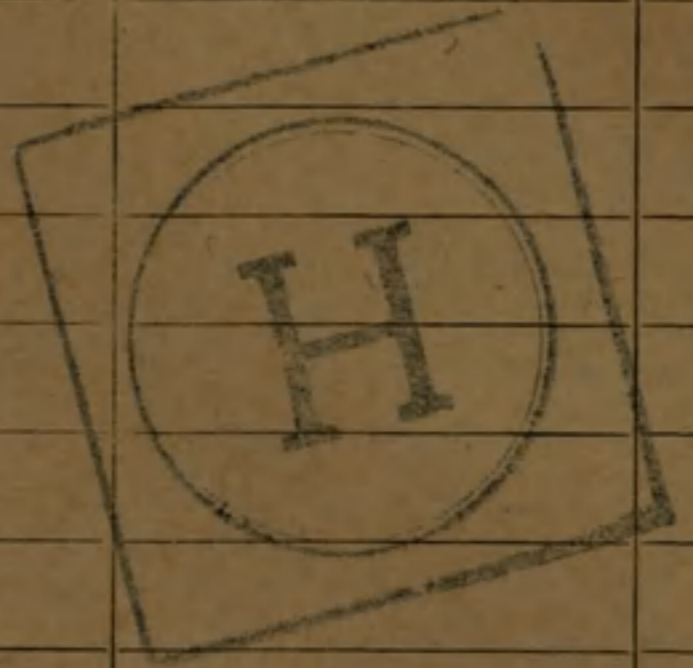


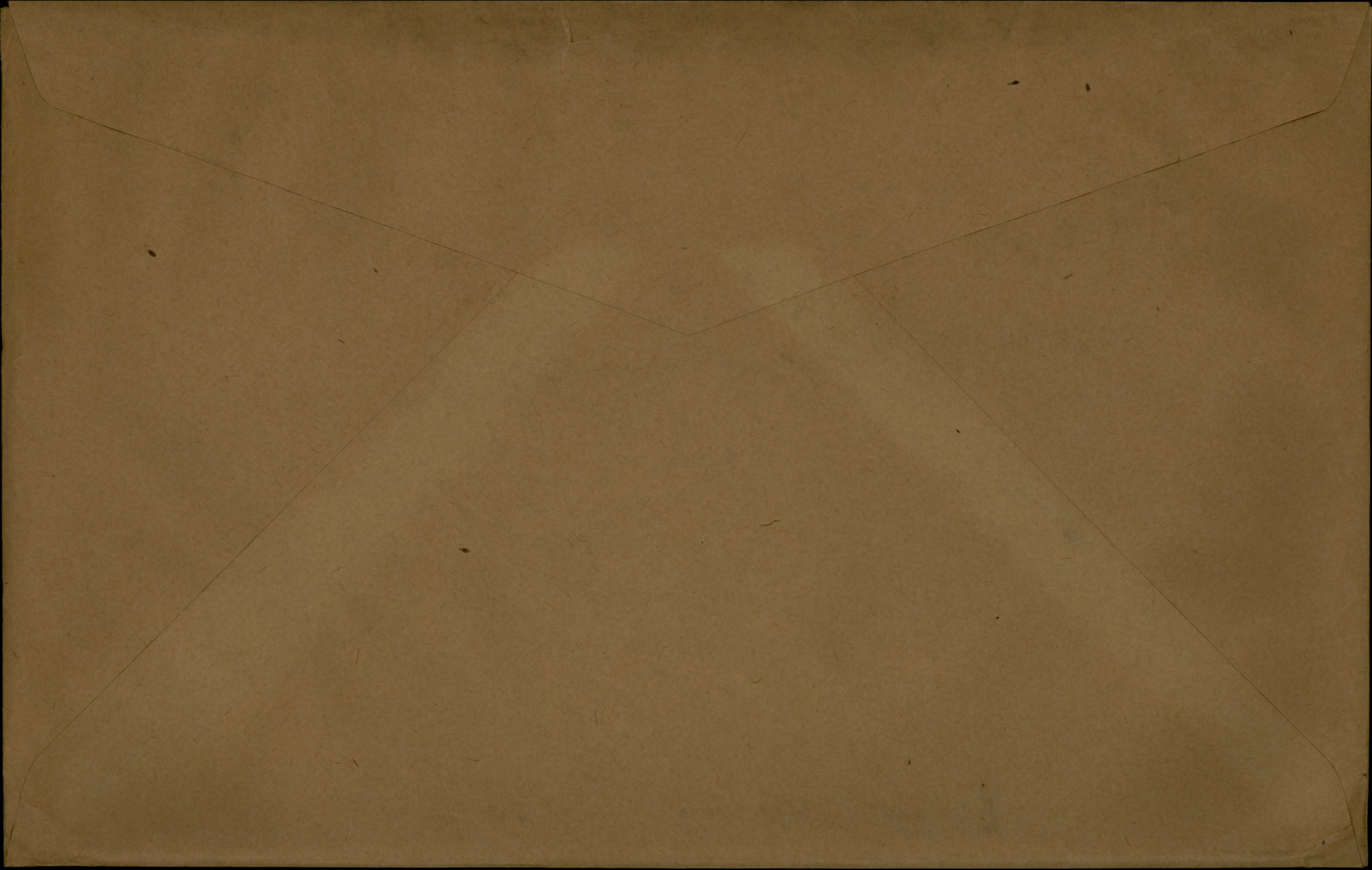
C.E.F. REGIMENTAL DOCUMENTS

NAME **COTCHER, NEIL HOFFMAN** REGT. No. **529474** UNIT **C.A.R.D.** H. Q. FILE No. **38045**



CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
ATTESTATION PAPER (M.F.W. 23, 133 or 51)					DEATH
CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					CATEGORY
TRAINING HISTORY SHEET (M.F.W. 113)					
FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
REGT. CONDUCT SHEET (M.B.W. 263 or A.F.B. 120)					
COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 173)					DISCHARGE
DENTAL HISTORY SHEET (M.F.B. 465)					CATEGORY
MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					DEMOB
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)					DESERTION
LAST PAY CERTIFICATE (M.F.W. 44)					
PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
PARTICULARS OF CHARACTER (A.F.W. 3226)					
COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
CARDS					
PAY-SHEETS					





came

No. 5 29474

ATTESTATION PAPER.

Transferred to 63rd Depot Battery CFA CEF April 8th 1918

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? COTCHER
- 1a. What are your Christian names? NEIL HOFFMAN
- 1b. What is your present address? 287 King St. London Ont. Can.
2. In what Town, Township or Parish, and in what Country were you born? Oakland Co. Pontiac Mich. U.S.A.
3. What is the name of your next-of-kin? ~~Lillian S. Cotcher~~
4. What is the address of your next-of-kin? ~~287 King St. London Ont. Can.~~
- 4a. What is the relationship of your next-of-kin? Wife divorced 10/4/18
5. What is the date of your birth? July 3rd 1892
6. What is your Trade or Calling? Street Car Conductor
7. Are you married? yes
8. Are you willing to be vaccinated or re-vaccinated and inoculated? yes
9. Do you now belong to the Active Militia? no
10. Have you ever served in any Military Force? 1 year National Guard U.S.A.
If so, state particulars of former Service.
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
13. Have you ever been discharged from any Branch of His Majesty's Forces as medically unfit? no.
14. If so, what was the nature of the disability? no.
15. Have you ever offered to serve in any Branch of His Majesty's Forces and been rejected? no.
16. If so, what was the reason? no.

Mrs. Theresa Cotcher
 PORTIAC MICH.
 R.F.D. #1
 next of kin
 MOTHER
 O.K. N.H.C.

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Neil Hoffman Cotcher, 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.

Neil H. Cotcher (Signature of Recruit)

Date May 11 1917. Geor Galluath (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Neil Hoffman Cotcher, 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.

Neil Hoffman Cotcher (Signature of Recruit)

Date May 11 1917. Geor Galluath (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 London Ont. Can. this 11th day of May 1917.

W. H. H. H. (Signature of Justice)

Description of Neil Hoffman Cotcher on Enlistment.

Apparent Age 24 years 10 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

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

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

Height 5 ft. 8¹/₂ ins.

Chest measurement { Girth when fully expanded 36 ins.
 Range of expansion 33 ins.

Complexion Dark

Eyes Grey

Hair Brown

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

RIGHT EYE $D \frac{40}{20}$ LEFT EYE $D \frac{30}{20}$
 WEARING R normal L normal

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 MAY 11 1917 191

H. Kingsmill

Place Rondon, Ont. Can.

Major, C.A.M.C.
 Medical Officer.

*Insert here "fit" or "unfit."

NOTE.—Should the Medical Officer consider the Recruit unfit, he will fill in the foregoing Certificate only in the case of those who have been attested, and will briefly state below the cause of unfitness:—

.....

CERTIFICATE OF OFFICER COMMANDING UNIT.

Neil Hoffman Cotcher 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.

H. Benfield Capt. (Signature of Officer)
 O. G. Service Co., Canadian Engineers M. D. No. 1.

Date May 11th 191 7

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE



WAR SERVICE BADGE
CLASS "A" NO. 11111111

THIS IS TO CERTIFY that No. 529474 (Rank) Gunner

Name (in full) Neil Hoffman Cotcher enlisted in
the Canadian Engineers

CANADIAN EXPEDITIONARY FORCE at London Ont on the 21st
day of May 1917

HE served in 48th Battery in France

Demobilization.

and is now discharged from the service by reason of

Medical Unfitness.

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

Age 27

Height 5' 9"

Complexion Dark

Eyes Blue

Hair Dark

Neil H. Cotcher

Signature of Soldier.

Marks or Scars nil

J. B. Farrell

Issuing Officer.

Date of Discharge

DISCHARGE SECTION
JUL 4 1919
No. 1 District Depot

Levi
Rank

for O. C. Dispersal Area Sta. "K."
U. S. Dispensary "K."
Date JUL 4 1919 19.....

N.B. - AS NO DUPLICATE OF THIS CERTIFICATE WILL BE ISSUED, ANY PERSON FINDING SAME IS REQUESTED TO FORWARD IT IN AN UNSTAMPED ENVELOPE TO THE SECRETARY, MILITIA COUNCIL, OTTAWA, CANADA.

O Wing N-2A

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) COTCHER H H
REGIMENT CARD RANK gwr No. 529474
Date of Examination in England 2/6/19 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



2749

PRESENT DENTAL REQUIREMENTS

1. FILLINGS 13, 19, 21, 30.

2. EXTRACTIONS

3. CROWNS

4. DENTURES

- (a) Full Upper
- (b) Part Upper
- (c) Full Lower
- (d) Part Lower

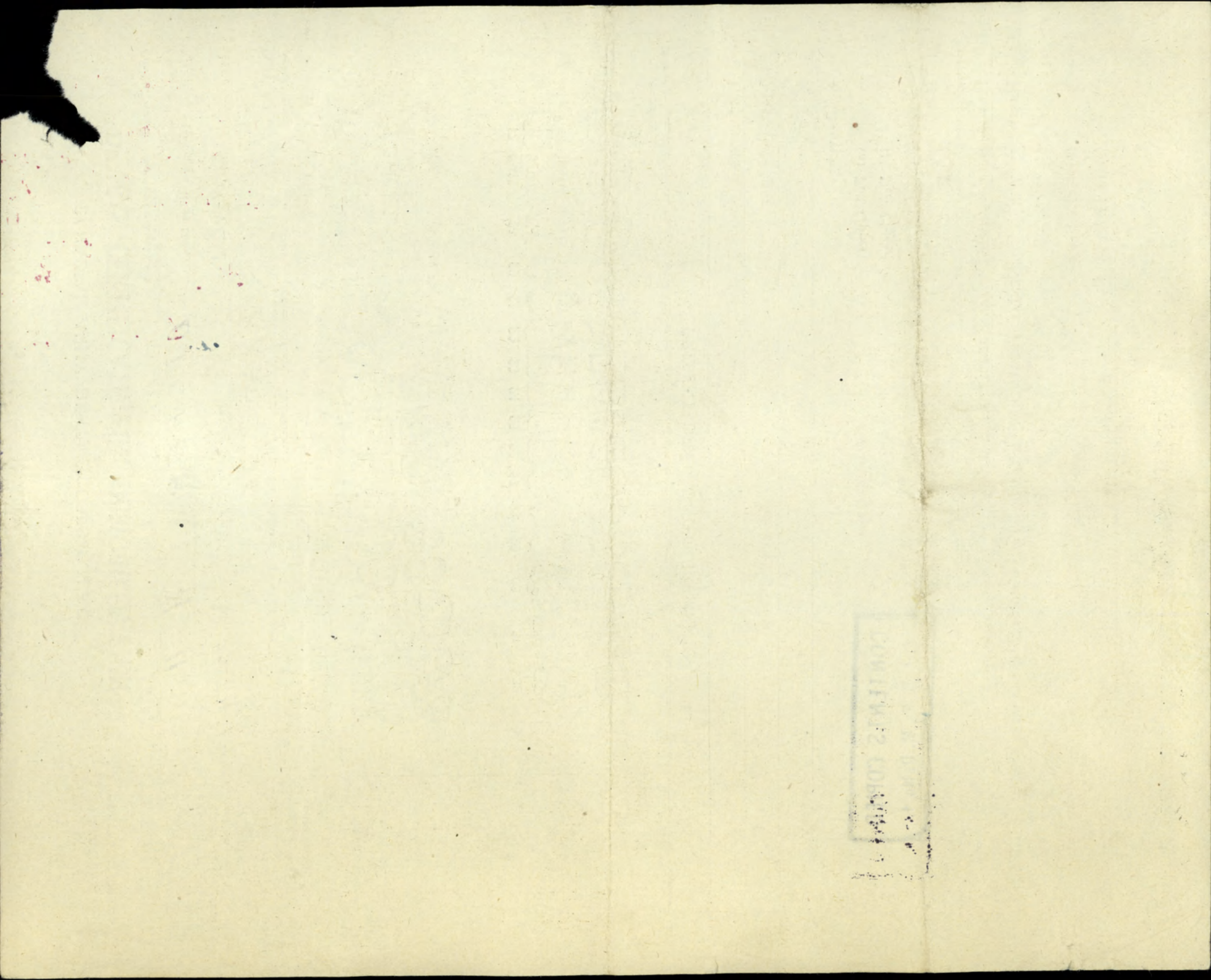
CONTENTS COPIED
C.A.D.C., M.D. No. 1.

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 Yes
- (b) In England Yes
- (c) In France

Signature of Dental Officer H. A. Simons
Capt



CERTIFIED CORRECT
 25 FEB 1919
 CANADIAN ARMY
 LONDON

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				
27-5-18	Res Bde CFA.	Off Com. Fresham Pond	Witley.	26-5-18	B.O. Pt. 11 147.
17-9-18	Res Bde CFA	Proceeded O/Seas to CFA	Witley	16-9-18	R.B. BO Pt. 11 260 <i>Ally</i> Lieutenant & Asst. Adjutant, Res. Bde. Canadian Field Artillery
18-9-18.	CGBD.	Arr. as Reinf & TOS. Can.	Art. Pool.	18-9-18.	NR. 762 Pt. II 0.126
21-9-18.	"	Left Base for C.C.R.C.	Field	21-9-18.	NR. 1395
21-9-18.	CCRC.	Arrived at C.C.R.C.	Field	21-9-18.	NR. 1472
1.10.18.	Cdn Corps.	POSTED TO 2nd Bde CFA	FIELD	4.10.18.	A.39. CCRC. N.R. 257 (1778)
-do-	-do-	T.O.S. " " "	"	5.10.18.	a/- 4.10.18. Pt. 11. O. 144 -do- -do- Pt. 11. O. 107.
5.10.18.	2nd Bde CFA	JOINED " " "	"	4.10.18.	.A.F.B. 213.
PROCEEDED TO ENGLAND					
20-2-19	7 Gen'l Hq.	V.D.G. admin 20-2-19	To base details	Ambleton	20-2-19 W. 9487/N 8824.
18-2-19	3 Cdn F.A.	V.D.G. admin 18-2-19	To 55 CCS.		18-2-19 A6336/N 8500.
22-3-19	2nd Bde CFA	To hospital sick.			16-2-19 B-213.
28-2-19	50 CCS.	V.D.G. admin 18-2-19	to A.T. 31		18-2-19 A6601/N 8522
3-3-19.	1st Bde CFA	V.D.G. admin 3-3-19			3-3-19 W467/P163.
26-3-19		Trans to Cdn Army Pool.			26-3-19 150. W 41914

Ally
 Lieutenant
 Subunit - Cdn A.F.

W. S. B.
Class A.

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

M. F. W. 54. (A. F. B. 103.
350M.—5-16
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps. *63rd Bty - 679*
C.A.M.C. H.Q. NO. 1, C.E.F.

Regimental No. *529474* Rank *Private* Name *COTCHER Neil Hoffman*
C.E.F.

Enlisted (a) *11-5-17* Terms of Service (a) *Do of W. 46 mes* Service reckons from (a) *11-5-17*

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) *Street Car Conductor*

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				
29-1-18	O.C. Amc	Admitted to Mil. Hosp. 1st No. 1. C.E.F. No. 1. Tonsillitis.	London Ont	25.1.18.	NO. 28d/28.1.18.
4-2-18	.	Discharged from Hosp.	.	1.2.18	NO. 35. d/4 2.18
8-4-18.	A.A.G.	Transferred to 63rd M. No. 1. Batty. C.E.F.	.	8-4-18.	(30-C-386 8.4.18). <i>Smith</i>
3/4/18	A.A.G., M.D.#1.	TRANSFERRED OVERSEAS	LONDON ONT	13/4/18	H.Q. AUTH: 593-6-7. d/3-4-18.
		EMBARKED	CANADA		H.M.T.
		DISEMBARKED	ENGLAND		H.M.T.
		Embarked Canada date 17-4-18	H.M.T.		
		Disembarked England date 28-4-18			

On Com. Fleuchau Road
2-5-18 Res Bdo T.O.S. from Canada Witley 28-4-18 B.O. Pt. 11 122

(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, Shoemaking Smith, etc., etc. also special qualifications in technical Corps duties. [P.T.O.]

(SERVICE AND CASUALTY FORM Part II).

Temporary

Regiment or Corps 2^d de Cst Regimental Number 529474

*Substantive Rank Gen. Surname Cotcher. Christian Names Neil Hoffman.

*Acting Rank _____

(* To be entered in pencil to facilitate alteration.)

To be folded on this line.

Nothing to be written in this margin.

W1889-PP1150 500,000 5/18 G.W.P.Co (3490)

(A) Report		(B) Authority of Part II. of Orders	(C) Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	(D) Place of casualty	(E) Date of promotion, reduction, reversion, casualty, &c.	(F) Remarks, and initials and rank of an officer
Date.	From whom received					
3-3-19	9 Cdn Stab.		V.O.G.	ad. 9 Cdn Stab.	3-3-19	W46/P163
26-3-19		Div. Mt of 1919.	Trans to Cdn Arty Pool.		26-3-19	
do	A.A.G.		T.O.S. Cdn. Arty. Pool		27-3-19	PT. #0.374/19 Lieutenant for Lieut-Col A.A.G.
3-3-19	9 Cdn Stab.		V.O.G.	ad. 9 Cdn Stab.	3-3-19	W46/P163
do	2 Genl.		7 th fld. allow. + 50 cents per day			0.1643/14611
			from 20.2.19 to 3.3.19 (12 days)		3-3-19	PT. # 0.400/1919
18.4.19	4 Cdn Stab.		7 th fld. allow. + 50 cents per day			0.1643/1620
			from 4.3.19 to 18.4.19 (46 days)			PT. # 0.520/19
2.5.19	6 Cdn Stab.		T.O.S. Cdn. Arty. Pool in			DQ. M. G. 189
			proceeding to England & i			Q.A. 10/25 th /19
			posted to 6 Cdn Arty South River		2 ⁵ /19	A.A.G. 4A50073
						PT. # 0.540/19

J.R.A.M.
Capt for Lt.-Col., A. A. G.

Canadian Section, G. H. O. 3rd Echelon. B. E. T.

(A) Report		(B)	(C)	(D)	(E)	(F)
Date.	From whom received	Authority of Part II. of Orders	Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	Place of casualty	Date of promotion, reduction, reversion, casualty, &c.	Remarks, and initials and rank of an officer
25-5-14	C.A.R.I.D		S.O.S. to "O" wing	Butley		
3-5-19	"O" wing	45.	T.O.S. "O" wing	"		
18-6-14	"O" wing	58.	SOS on Proceeding to Canada		18-6-14	

TOS No 1 Dist. Dept.
 Displ. Stn. K.-25,6-9
 SOS Dispersed
 4.7.19 D.O. No. 188

J.B. Farrell
 For O. C. Dispersal Area Sta. K.

[Signature]
 Officer in Charge
 Records

Nothing to be written in this margin.

CASE HISTORY SHEET.

No. 529474 Rank Private Name Catchen, R.H. Age 26

Unit 1st Lt. Co. Completed years of service 9 ^{Where and how long} 12

Date of admission 12-3-18 Date of discharge 1-4-18

Diagnosis Scarlet Fever Susp. Place of origin London

CONDITION ON ADMISSION AND PROGRESS OF CASE.

Swelling of salivary glands. Pain, Headache. Temperature 101°
Pulse 76 Resp 20

Diag. as Mumps

FAMILY HISTORY

(Tuberculosis, mental or nervous diseases.)

nil

TREATMENT

(Especially any specific or special form.)

CONDITION ON DISCHARGE

(and disposal made of case.)

Recovered

Date 1-4-18

A. F. Lewis Esq
Medical Officer i/c case.

9/10/30

THE UNIVERSITY OF CHICAGO

81-1-1

1-1-1

1-1-1

1-1-1

1-1-1

10130

Owing
K

167

CANADIAN GENERAL LABORATORY

WASSERMANN REPORT FOR MEDICAL BOARDS.

NAME..... COTCHER ~~N.H.~~ N.H. REGTL. NO. 539474

RANK..... R.N.R. UNIT 2203

Previous Wasserman Date..... July 1917- C.F.A.

Result..... +++

Station, and Date..... London Ontario Canada

Result of Wasserman (Original) quarter system.

DATE..... SERIAL NO..... RESULT.....

WASSERMANN
NEGATIVE

Wasserman
base Major,

Officer Commanding
Canadian General Laboratory.

Witley Camp.



673

Present

MEMORANDUM FOR THE RECORD

1917

GOVERNMENT

1917

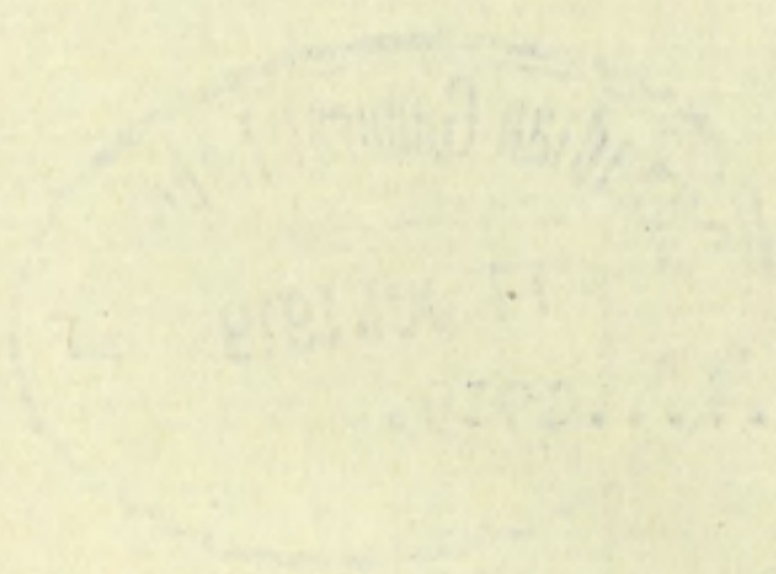
1917

UNITED STATES GOVERNMENT

REPORT OF THE COMMISSIONER OF THE GENERAL LAND OFFICE

FOR THE YEAR ENDING DECEMBER 31, 1917

1917



MEDICAL CASE-HISTORY SHEET.

Hospital... *A. M. C.* Station... *Queens Park*
Regtl. No. *329474* Name... *Paul Cotcher*
Unit... *A. M. C.* Service... *8 months*
Date of Admission... *25-1-18* Date of Discharge... *1/2/18*
Diagnosis... *WAD*
Date of Crigin... Place of Origin...

Cause of Illness or Injury:

History of present Illness or Injury.
Is Illness or Injury result of service.

taken from
26/1/18 Negative
27/1/18 Negative

Condition on Admission.

Treatment, 10000 units of *antitoxin* 26/1/18 *Salmonella Petten 2910 tons*
6 mg of sulph in the morning

Rx Syrup White Pine Co 3 1/2
Syr 7 1/2 & 3 hrs. D.D.G.

Condition on discharge from Hospital:

15407

D. G. Sanderson
Medical Officer in Charge of Case.

Date.....

42639C

MEDICAL CASE-HISTORY SHEET

Hospital Station
Regt. No.
Unit
Date of Admission
Disease
Date of Origin
Place of Origin

Course of Illness or Injury

History of present illness or injury
is illness or injury result of service.

Condition on Admission

Treatment

Condition on Discharge from Hospital

Medical Officer in Charge

Date

43084

26 SEP 1918

Original

Korea
529474

MEDICAL HISTORY SHEET

Surname Cotcher Christian Name Neil Hoffman

Examined { on 11th day of May 1917
at London, Ont. Can.

Approved by H. Kingsmill

Birthplace { City or Town Oakland Pontiac
County Oakland, Mich. U.S.A.

Rank Major C.A.M.C. M.O.

Apparent age 24/10

Date 10/8/17 Fit or Unfit EXAMINED FOR RE-ENGAGEMENT
A. J. J. M. Gally Capt. M.C. M.O.

Trade or occupation Street-car-conductor

Height 5 feet 8 1/2 Inches

Weight 150 lbs.

Chest measurement { Minimum 33 inches
Maximum expansion 36 inches

Physical development Good

Small-pox Marks nil

Vaccination Marks { Arm Right Left 2
Number 2

When Vaccinated last 1909

Date Result VACCINATIONS
19/9/17 Spore Stane M.O.

(a) Marks indicating congenital peculiarities or previous disease

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

RIGHT EYE D ⁴⁰/₂₀ LEFT EYE D ³⁰/₂₀

WEARING R normal L normal

Date Result ANTI-TYPHOID INOCULATIONS, ETC.
May 15 E. P. Hutchinson M.O.
" 22 L. J. Hebert M.O.
" 29 L. J. Hebert M.O.
11/3/18 TAB J. A. B. M.O.

Enlisted on 11th day of May 1917 at London, Ont. Can.

	CORPS	REG'TL NUMBER	HABITS	DATE
Joined on enlistment	<u>Canadian Engineers</u>			<u>May 11, 1917</u>
Transferred to	<u>A. M. C. T.D. No. 1, U. E. F.</u>	<u>529474</u>		<u>1-9-17</u> <u>8-4-18</u> <u>SEP 16 1918</u>
	<u>13th Battery C.F.A.</u>	<u>529474</u>		
	<u>PROCEEDED OVERSEAS TO</u>	<u>U.S.</u>		

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

STATION	DATE	DISEASE	RESULT
<u>London, Ont.</u>	<u>1917</u>	<u>On Attestation considered</u>	<u>Fit</u>
<u>London, Ont.</u>	<u>10/8/17</u>	<u>Nil.</u>	<u>Fit.</u>
<u>Examined by S.M. Board.</u>	<u>J. J. M. Gally Capt. M.C.</u>		<u>Pres.</u>
<u>Examined by S.M. Board</u>	<u>5-4-1918</u>	<u>Fit</u>	<u>A-2</u>
<u>with</u>	<u>13-6-19</u>	<u>J. J. Hebert</u>	<u>Capt. C.A.M.C.</u>

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.

Surname Cotcher Christian Name Neil Hoffman

STATION	Date of Arrival at the Station	DATES OF			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
		Admission into Hospital	Discharge from Hospital					
		Day	Month	Year	Day	Month	Year	
London		6	7	17	6	8	17	Chenckii Syphilitic 29 Recovered. Improved. J. A. Bennett District Comm.
London		28	11	17	18	12	17	Angularitis 21. Recovered. Returned to duty. J. P. Bryant. Capt. B. Ross. Capt. J. M. Swan. Capt. J. M. Bennett. Capt.
London	Military Hospital, M. D. No. 1	25	1	18	1	2	18	Tonsillitis 2 Recovered. Returned to duty. J. M. Bennett. Capt.
		12	3	18	1	4	18	Gonorrhoea 2 Recovered. C. T. Lewis. Capt.

MEDICAL CASE-HISTORY SHEET.

Hospital. *A.M.C.* Station. *London*
Regtl. No. *579474* Name. *Pte N. N. Cotcher*
Unit. *Q.A.M.C.* Service. *6 1/2 mo.*
Date of Admission. *28/11/17* Date of Discharge. *Dec 18/17*
Diagnosis. *Conjunctivitis*
Date of Origin. Place of Origin.

Cause of Illness or Injury :

History of present Illness or Injury.
Is illness or injury result of service.

Condition on Admission.

Treatment. *Major Brown.*

see 27
instilled fresh c hot boracic. Zinc boracic drops 1/2 % T.J.T.
at Eye dropper. *14138*

Condition on discharge from Hospital :

H. L. Dwyer, Capt. am
Medical Officer i. o. of Case.

Date. *Dec 18/17*

400572

MEDICAL CASE HISTORY FORM

Hospital No. *1000*
 Name *John D. ...*
 Unit *...*
 Date of Admission *1941*
 Diagnosis *...*
 Cause of Illness or Injury *...*

History of present illness or injury
 is illness or injury result of service

Condition on Admission

Treatment

Diagnosis for a ...

10/28

...

Condition on Discharge from Hospital

Medical Officer in Charge

Date

1488/2

To:- President, Standing Medical Board,
Witley.

C.S.H. 4/6/19

The marginally named soldier has no infectious Syphilitic lesions and may be returned to Canada forthwith.

529474

Cmr Catcher M

It is suggested that the patient be dealt with on arrival in Canada in accordance with P.C. 47 - dated 20-1-19.

for J. Melan Corp
.....
Officer i/c Syphilis Clinic.
C.S.H. 4/6/19
.....

To:- President, Standing Medical Board,
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for J. Melan Corp
.....
Officer i/c Syphilis Clinic.

1874

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...

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..... *A. M. C. T.D. No. 1, C.E.F.*.....

Transferred to 63rd Depot Battery CFA CEF April 8th 1918

(2) Regimental Number..... **529474**.....

(3) Full Name of Soldier..... **COTCHER, Neil Hoffman**.....

(4) Place of Birth..... **Oakland Co., Pontiac, Mich., U.S.A.**.....

(5) Are you married, or not?..... **Married**.....

(6) If married, state,
(a) Full name of your wife..... **Lillian S. Cotcher**.....

Divorced N.H.C. O.K.

(b) Present Postal Address..... ~~287 King St., London, Ont., Canada~~

~~1141 - 3rd Ave., Detroit, Mich., U.S.A.~~

(7) Are you a widower?..... **X**.....

(8) Have you any children?..... **X**.....

If so, give number of boys and girls..... **X**.....

Also their names and ages..... **X**.....

(9) Is your Father alive?.....Yes.....

If so, state name and address Archie Cotcher, Pontiac, Mich., R.F.D.#1

(10) Is your Mother alive?.....Yes.....

If so, state name and address.....Tress Cotcher, Pontiac Mich., R.F.D.#1

(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.

.....X.....

(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.

.....~~Wife~~ divorced 10/4/18
O.K. N.K.C......

(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.

.....~~Yes~~ divorced 10/4/18
O.K. N.K.C......

15) Are you insured?.....No......

If so, in what Company?.....X.....

Have you made arrangements for payment of your Insurance premium.....X.....

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

Date.....Jan 8/18.....

.....[Signature].....
.....Major
.....1st Lt. A. G. Training Officer Commanding, F......

LTR

Rank Name COTCHER, Neil Hoffman

Reg'l No. 529474

Unit **Dft. 63rd Batty C, F, A** If in perm. Corps, }
What Unit? }

Married or Single Married.

Place and Date of Enlistment London May 11th, 1917.

Place of Birth Oakland Mich USA.

Name and Address, Next-of-Kin Mrs Thersa Cotcher

Pontiac Mich, USA. R.F.D. #1.

Relationship Mother.

Assigned Pay Monthly \$

Payable to

Relationship

Separation Allowance \$

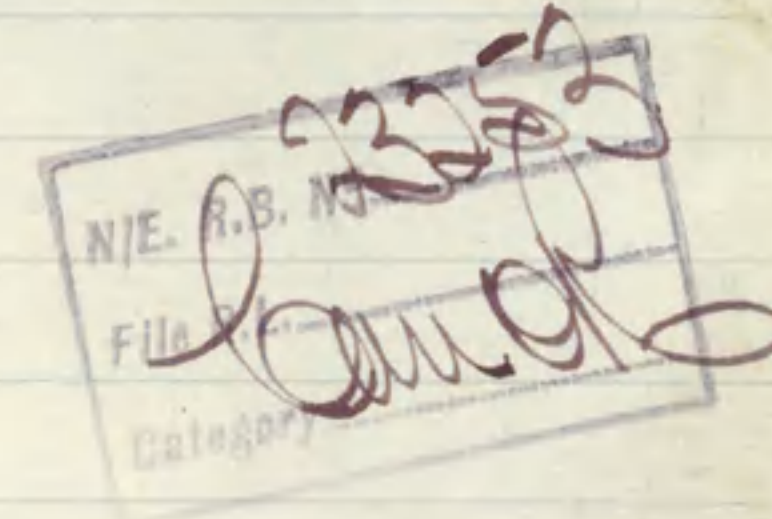
Payable to

Relationship

Discharge, Date and Place

Reason

Character



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.				
<i>b.</i>		Arrived in England		28-4-18	S/S SCOTIAN
		<i>Taken on strength</i>			
2-5-18	Res. Bde		Am Witley	28.4.18	Pe 1122
17-9-18	Res Bde.	S. O. Son proc. of seas	Gen. do	18.9.18	Pe 260 + Art Pol Pe 126 21.9.18
13-10-18	2 nd Bde	to S. from arty tool	Field	31.10.18	1072 " " 144 12.18
3-4-19	Art. Bde.	T.O.S. from 2 nd Bde	-	27.3.19	- 37 2 nd Bde 24.27.31.19
5-5-19	CARD	T.O.S. from 48 th How Bty	Ripon	2-5-19	- 125 + 54 Ca Pol 7/6/19
27.6.19	O. Wing.	S.O. to Canada	Witley	23.6.19	- 63
		<i>J, Canod. 54-K. 93.</i>			

A.F.B. 103
27.5.19

D/E. 11. 5. 17.

MILITIA AND DEFENCE

M. F. W. 11.
50m.—4-16.
H. Q. 1772-39-818.

SEPARATION ALLOWANCE

Name *Lillian Louisa Cotcher*

Name of Soldier *Cotcher Neil Hoffman*

Address *1141 Third Ave.
Detroit
Mich. U. S. A.*

Regtl. No. *529474*

Rank *Pvt.*

Corps *A. M. C. I. D. # I*

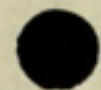
Relation to Soldier }
wife, child or mother } *wife*

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				





D/E 11. 5. 17.

MILITIA AND DEFENCE

M. F. W. 11a.
50m.-4-16.
1772-39-818.

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2.

Lillian S. Cotcher

Wife
PAYMENTS.

Name of Soldier

Cotcher Neil H.

L. I. Job 310.—Req. 6574.

Pte. 529474.

A.M.C.Y.D. # 1.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.		A 11415	93	93.R mailed 29/9/17
Oct.		C 23089	20	R
Nov.		R 25651	20	B
Dec.		A 19918	20	183
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.				

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

11. 5. 17.

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

20.	20		
-----	----	--	--

RATE OF ASSIGNMENT

--	--	--	--

1-12-17
P. 83257

PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No. **5-29474.**
 Rank **pte.** Promoted Reverted Discharge
 Soldier's Name **Neil Hoffman Cotcher**
 Battalion **A. M. C T.D. #1.**
 Beneficiary **Lillian Stonia Cotcher**
 Relationship **Wife**
 Address **1141 Third Ave. Detroit Mich U.S.A.**

Name
 Address
 Change of Address
 1 **1317 Garland St Flint Mich - 1/1/18**
 2
 3
 4

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

1917					
Dec 31		153		153	
Jan	D65054	30		30	c
		<u>183</u>			

m. R. O 2 B rend'd.
M. R. O 62123 - Des. 22.1.19. E. G.

Paymaster Paying
 From 1-2-18
 To.....

M. R. #1



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. 123.
 40M. 6-17-4772-38-1141
 L. L. 23320-M. & D. 7693.

Date of Enlistment 11-5-14.

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

17 May 1918

OVERSEAS CONTINGENTS

10546

RATE OF ASSIGNMENT

RATE OF SEPARATION ALLOWANCE

--	--	--	--

\$15.00			
---------	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

No. 529474
 Rank *Gar.* Promoted Reverted Discharge
 Soldier's Name *Neil Hoffman Catches*
 Battalion *63rd Depot Battery C.F.A - C.E.F.*
 Beneficiary
 Relationship
 Address

PARTICULARS OF ASSIGNMENT

Name
 Address
 Change of Address
 1 MRS. THERSA COTCHER,
 2 R.F.D. #1 PONTIAC,
 MICH. U.S.A. 15 15.00
 3 % 529474 GNR NEIL HOFFMAN COTCHER
 FIFTEEN DOLLARS
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
1918					3758-72-1
May	M 15878		15	15	
June	H 8904		15	15	
July	Z 29409		15	15	
Aug	Z 32078		15	15	
Sept	Z 45335		15	15	
Oct	Z 59881		15	15	
Nov	Z 74403		15	15	
DEC	Z 94558		15	15	
JAN	Z 105228		15	15	
Feb	Z 118969		15	15	
Mar	Z 131391		15	15	
Apr	Z 1690		15	15	
MAY	Z 10450		15	15	
June	Z 17265		15	15	
July	Z 21684		15	15	
			225	225	

M. F. W. 128.
 40M. 6-17-1772-38-1141
 L. L. 22320-M. & D. 1903.

A/c Closed 31-7-19
 Ret'd per *Caronia*
 Date 2-7-19 M.F.W. 18710-7-19 M.D. 1.
 Closed *H.M. Phillips*
 M. 12.0 98753

AUDITED.

AUTHORITY FOR NEW ACC'T. *M.D. 1 B 3.*
Rose Garay 1-5-18.

Neil Hoffman

Name *COTCHER*

Rank

*Sgt*Reg. No. *529474*Unit *2nd Co*Next of Kin *USA.*

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
<i>1919</i>						
<i>20.7</i>	<i>Neil Hoffman</i>		<i>20</i>	<i>0497</i>		<i>7310.5</i>
<i>3.3</i>	<i>Discharged</i>		<i>do</i>	<i>0497</i>		<i>4462.7</i>
<i>3.3</i>	<i>96th Engineers</i>		<i>do</i>	<i>0499</i>		<i>7474</i>
<i>22.4</i>	<i>Discharged</i>		<i>do</i>	<i>0535</i>		<i>4846.4</i>

No. 529474 RANK

Ser

NAME

Cotcher, N H

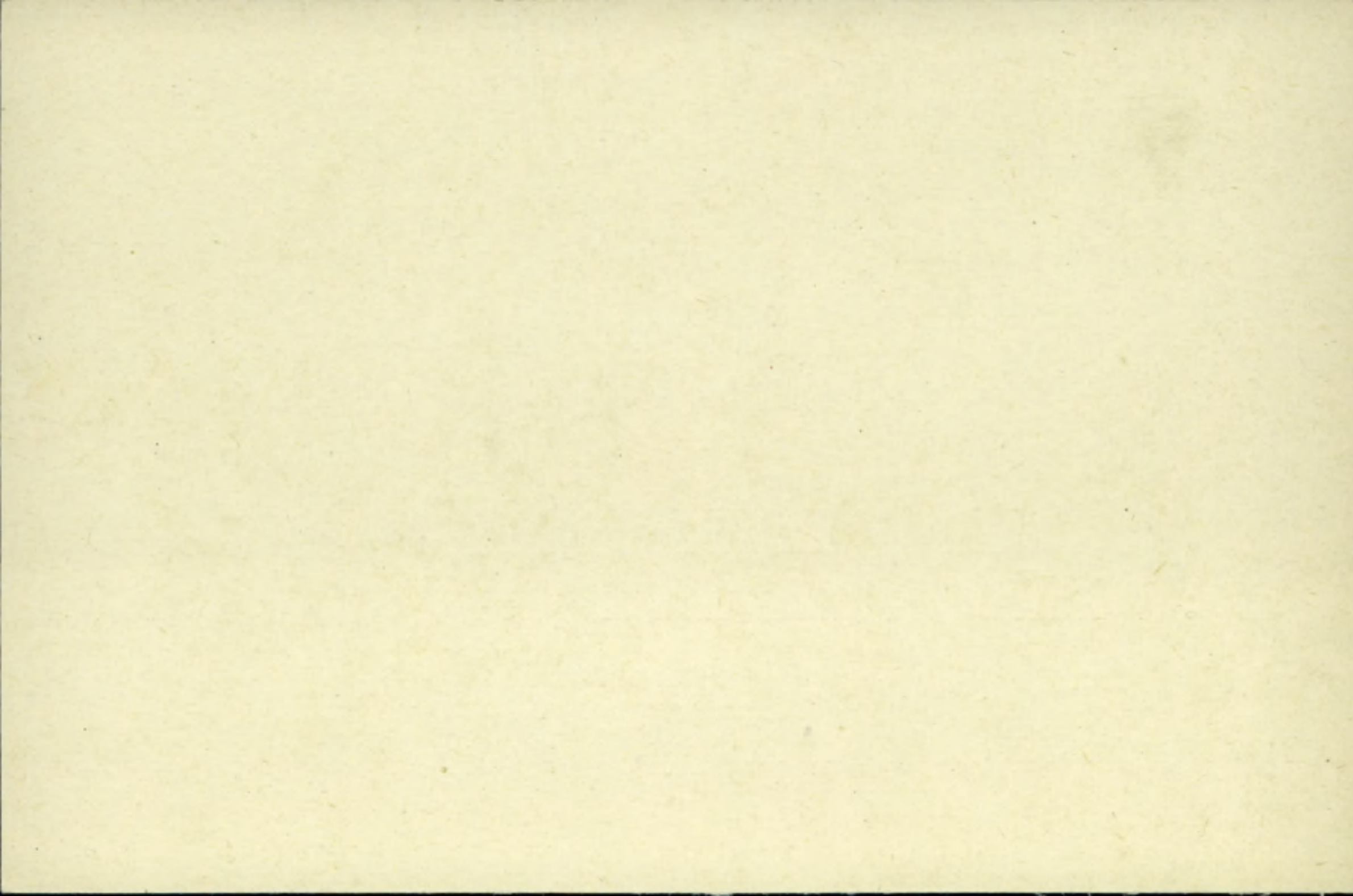
T. O. S. *Leave from* UNIT

3rd Depol Battery.

*AMC 7D#1. 8-4-18
Dec 99 Apr 1918.*

M. D. *1*

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1918 Apr 9</i>	<i>1918. Apr 30</i>	<i>✓</i>	<i>Trans'ns 13-4-18.</i>	



No. 1056

RANK

Sapper.

NAME

Botcher N. H.

T. O. S. 11-5-17.

UNIT

7th Field Company, Canadian Engineers.

(D.O. no 134 of 14-5-17)

M. D. /

PAID		SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
FROM	TO		PARTICULARS	AUTHORITY
1917 May 11	1917. May 31	L	a.w.l. forfeits pay.	Aug. payroll.
	June.	n.		
	July.	n.		
	Aug.	n.		



No. 529474 RANK Pte.

NAME Catcher, W.

H.

T. O. S.

UNIT No 1 Training Depot. A. M. C.

Trans. fr. D/S, Det. M. D. 1
1-9-17 D.O. 213 of 7-9-17

M. D. /

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1917 Sept. 1	1917 Sept. 30	✓		
	Oct.	✓		
	Nov.	✓		
1918 Dec	1918	✓		
Jan. 1	Jan. 31	✓		
	Feb.	✓		
	Mar.	✓		
Apr. 1	Apr. 8	✓	Trans. to 63rd. Depo. Bty. 6. I. A. S. M. D. 98 of 8-4-18	

MARRIED

Yes.

SINGLE

WIDOWER

TRADE OR CALLING

Street car

RELIGION

Methodist

Conductor

DESCRIPTION.

APPARENT AGE

24 YEARS

10 MONTHS

HEIGHT

5 FEET

8 1/2 INCHES

CHEST MEASUREMENT

33 INCHES

EXPANSION

3 INCHES

COMPLEXION

Warts

EYES

Grey

HAIR

Brown.

DISTINGUISHING MARKS

Not stated.

MEDICAL EXAMINATION.

PLACE

London Ont.

DATE

May 11th. 1917.

Present Address: 287 King St. London Ont.

SURNAME.

Cotcher

CHRISTIAN NAMES

Heir Hoffmann

REGL. NO.

529474

RANK

pt.

UNIT

C.A.M.C. (C.I.D.#1)

FORMER CORPS

Inf.

CARD NO.

X-1

FOL.

508-11-1-19
100-188 of 1-19
#186 no

NAMES IN FULL

Cotcher Mrs. Lillian S.

RELATIONSHIP TO SOLDIER

Wife.

ADDRESS

287 King St. London Ont

COUNTRY OF BIRTH

U.S.A.

Portiac Mich.

DATE

July 3rd. 1892

PLACE OF ATTESTATION

London Ont.

DATE

May 11th. 1912

L. L. 10137. M. & D. 7253.

116917-1
1.

M. F. W. 22. 100M.-11-16. H. Q. 17 2 33-339.

Plc 2-7-19
300 Am 1
56

NAME *Cotcher, W. H.*

REGT. NO. *529474*

RANK AND UNIT *Sm*

2 Bgde Co. F.A.

NEXT OF KIN

CABLE

NATURE OF CASUALTY

No.

DATE

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

a487.

Gen. Werners

20-2-19

20

a447

Discharged

3-3-19

" "

a499.

9. Stat. Garmiers

3-3-19

" "

a535

Discharged

22-4-19

"

Surname
 COTCHER.
 Rank 1. Gnr.
 2.
 3.
 4.

Christian Name or Names
 N.H.
 Unit 1. C.A. 2B.
 2.
 3.
 4.

Reg. No.
 529474.

Cas List.	Hospital and Diagnosis.	Date
28-2-19. A487/2	7. G.H. Wimereux. V.D.G. 1.	20-2-19.
12.3.19 ^a 497 ⁽²⁾	Disch	3.3.19
14.8.19 A499/2	9 C. Stab. Camer. w. D. 1/8	3.3.19.
28.4.19 A/535	Discharged.	22.4.19

A.M.D. 2 Dept.

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

Reg. No. 529474 Name Botcher G. H.
 Rank PTC Corps C.A.M.B. Age 26 Service 8/126
 Ledger No. _____ Serial No. 4005-7 15

HOSPITALS	DATE	DIAGNOSIS
Mil London	28-11-17	Conjunctivitis
To duty	18-12-17	
C.A.M.B. London	25-1-18	Tonsillitis
To duty	1-2-18	
Mil London	12-3-18	Mumps
Duty	1-4-18	

HOSPITALS**DATE****DIAGNOSIS**

M. F. W. 2533.
75M.—9-19.
1772-39-1332.

Fun

Number

529474

Rank

1st Lt

How

Surname

BOITCHEP

Christian Name

Freil Hoffmann

Units

638

Theatre of War

France

Date of Service

18-9-18

Remarks

Latest Address

*H. P. O. 34 Oakland Ave,
Santiago
Nuech USA*

Roll No.

P. Page 22281

200m. -6-21. vi.

REGT. NO.

RANK

NAME

UNIT

AGE

SERIAL NO. IN A. AND D.

TOTAL SERVICE WHERE
AND HOW LONG

DATE AND PLACE OF OR

DISEASE OR INJURY

OPERATIONS

RESULT OF OPERATIONS

(A) DATE OF ARRIVAL AT HOSPITAL AS AN ADMISSION

(B) AS A TRANSFER (STATE WHERE FROM)

NAME OF HOSPITAL

DATE OF DISCHARGE TO UNIT

IN CA

DATE OF DISCHARGE AS AN INVALID

DATE OF DEATH

DATE OF TRANSFER (STATE WHERE TO)

NAME OF HOSPITAL

OTHER INDEPENDENT CONDITIONS DIAGNOSED

DESP. REG. NO. 1591
MAY 19 1923

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

1. Triplicate Attestation Paper (M.F.W. 23), or Particulars of Recruit (M.F.W. 133).
2. Casualty Form (M.F.B. 103).
3. Medical History Sheet (M.F.B. 313 or A.F.B. 178).
4. Proceedings of Medical Board (M.F.B. 227 or M.F.W. 129).
5. Dental Certificate (M.F.B. 465).
6. Field Conduct Sheet (M.F.B. 122).
7. Proceedings on Discharge (M.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. Discharge Certificate (M.F.W. 39).
11. Equipment Statement Q.M.G. Form (D.O.S. 2), and Clothing.
12. Last Pay Certificate (P. 851).
13. Pay Book (A.B. 64).
14. War Service Gratuity (Form M.F.W. 2595).
15. Sundry Documents.

Group..... B
 Checked by No..... 9
 Date..... 23 JUN 1919

O.G. - 6Ath Badge
 Class
 No 263491

MD-1
 D-A-K.

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

HM T. CARONIA
 SAILING, NO 84
 Embarked 25, 6, 19.

1. No.	529474	
2. Rank.	Gunner	
3. Name.	Cotcher Neil Hoffman	
4. Unit.	C.A.R.D.	
5. Date of Discharge	JUL 4 1919	Place LONDON, ONT.
6. Reason for Discharge	DEMobilIZATION <div style="text-align: center; border: 1px solid black; border-radius: 50%; width: 40px; height: 40px; margin: 0 auto; display: flex; align-items: center; justify-content: center;"> H </div> DEMobilIZATION	
7. Authority.	R. O. 1894	
8. Proposed Residence after Discharge	G.P.O. Pontiac Mich U.S.A.	
9.	<p style="text-align: center;">CERTIFICATE TO BE SIGNED BY SOLDIER.</p> <p>I hereby acknowledge that at the undernoted place and date I received my discharge Certificate</p> <p>M. F. W. ?.....</p> <p style="text-align: center;"><u>Neil H. Cotcher</u></p> <p style="text-align: right;">Signature of Soldier.</p>	
10.	<p style="text-align: center;">CONFIRMATION.</p> <p>The discharge of the above named man is hereby confirmed.</p> <p>Place..... LONDON, ONT.</p> <p>Date..... JUL 4 1919</p> <p style="text-align: right;">Signature..... <u>B. Farrell Lt.</u> (O. C. Discharging Unit.)</p>	

Table with 10 columns and 10 rows. The table is mostly blank with some faint markings.

Faint, illegible text on the right page, possibly bleed-through from the reverse side.

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, we concur

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.)

Suggest that he be dealt with on arrival in Canada in accordance with P.C.D. 47 of 20-1-19

- (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.J.C. authy 2-9-19083 of 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.

[Signature] President.

PLACE *Witley*

DATE *13-6-19*

[Signature] 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

[Signature]
Assistant Director of Medical Services.

APPROVED BY

Director-General of Medical Services.

DATE

A.D.M.S. HEADQUARTERS
CANADIAN CORPS CAMP.
14 JUN 1919
WITLEY SECTION.

THIS FORM WILL BE USED FOR ALL RANKS

MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

- 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.
- 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."
- 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.
- Special care is required in answering question 9. Read the questions carefully. All questions must be answered.
- If space provided under any section is insufficient add another sheet. Such sheets must be initialled by the Medical Board.
- A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board."
- Under no circumstances may information other than that in sections 7, 8, 9 and 10 be communicated to the invalid, directly or indirectly.
- 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 *Witley Surrey* DATE *2-6-19*

1. 1 (a) Unit *K Area* (b) Regimental No. *529474* (c) Rank *g/r/r*

(d) Surname *COTCHER* (e) Christian name *NEIL*

(f) Home address *70 The Pentac Mich. R.F.D.*

(g) Next of Kin *Mrs. Archie Cotcher* (h) Relationship *mother*

(i) Address of Next of Kin *as above*

2. Age last birthday *26* Date of birth *June 2 1892*

3. Enlistment, or Appointment (if an Officer) (a) Place *London* (b) Date *11-5-17*

4. Personal description:

(a) Height *5'8 1/2"* (b) Weight *180* (c) Complexion *Medium*

(d) Colour of hair *dark* (e) Colour of eyes *hazel* (f) Identification marks, Scars, etc.

5. Former trade or occupation *hair - left lumber region*

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
	<i>2 years</i>	<i>32</i>

	PERIODS	
	From	To
Canada	<i>11-5-17</i>	<i>13-4-18</i>
England	<i>13-4-18</i>	<i>17-9-18</i>
France or other theatres of War	<i>17-9-18</i>	<i>2-5-19</i>

7. Original disease, or injury *U.D.S.*

(a) Date of origin *July 1916* (b) Place of origin *Detroit*

(c) Cause *Infection*

M. F. B. 227.

400M-11-18.
1772-39-117.

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.)

None at present apparent
P. V. P. S. J.

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.)

was examined negative
withly from 11. 1. 1919
by Dr. Williams Capt.
no objective or subjective
signs of disease

(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 Genito-Urinary System... No
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... Yes
slight hypertrophy
muscles

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

Infected in Detroit July 1916
prior to enlistment. For 3 weeks
after exposure.
Rec'd treatment in Detroit
states - Blood test after a year
- July 1917. and stays he received
full course of treatment.
MRS. Rheumatism of Syphilis
8/6/17 - 4/1/18/17.

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).)

MRS. London Chytritis 28/11/17 - 18/12/17.
Syphilis 25/1/18 - 1/2/18.
Mumps 12/3/18 - 1/4/18.
Ear pain 20/2/19 - 26/3/19.

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

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) yes. 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?

Six months

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

Usual.

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)

Suggested that he be dealt with on arrival in accordance with PC. 47 29/1/19

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

yes

17. Recommendations

[Signature]

[Signature] 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, Neil Colcher, 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

Neil K. Catcher Rank. Signature of invalid examined.

110-30-6-3811 21

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

M. OR S. *S*

REGT. No. *529474* RANK *Gr.* NAME (IN FULL) *COTCHER Neil Hoffman*

ORIGINAL UNIT *C. S.* IF IN P.F. WHAT UNIT? *1st Commercial Bank Pontiac Mich*

RELATIONSHIP *Mother*

NEXT OF KIN *Mrs Theresa Cotcher*

ADDRESS *R.F.D. 1 Pontiac Michigan USA*

DATE EFFECTIVE *25-6-19*

DATE EFFECTIVE *11-5-17*

ASSIGNED PAY \$ *15.00* DATE EFFECTIVE *31-7-19*

STOP PAYMENT FORM RENDERED, DATE

DISCHARGED PLACE *London* DATE *4-7-19* REASON *Dem* AUTHORITY *Do 188* IF ENTITLED TO POST DISCHARGE PAY

MONTH	PAY AND F.A.		OTHER CREDITS		TOTAL CREDITS		ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY	REGI-MENTAL CHARGES	OTHER CHARGES	TOTAL DEBITS		BALANCE		PARTICULARS OR REMARKS	
	NO. OF DAYS	RATE	AMOUNT				COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2	COL. NO. 3				DEBIT	CREDIT	DEBIT	CREDIT		
			\$	C.	\$	C.	\$	C.	\$	C.	\$	C.	\$	C.	\$	C.	\$	C.	\$	C.	
<i>30-6-19</i>							<i>23.73</i>														<i>War Per p.p. Caronia 2-7-19</i>
<i>12-10-19</i>	<i>10</i>	<i>11.10</i>	<i>11.00</i>		<i>85</i>				<i>198.478</i>	<i>487</i>	<i>15</i>	<i>105.13</i>	<i>15</i>		<i>9.73</i>					<i>139.73</i>	<i>WAR ENGL. P. C. 10-6-19</i>
																					<i>PAID TO ESTIMATE DATE OF DISCHARGE 10-7-19</i>
																					<i>PAY. MONEY & PAID MONEY</i>
																					<i>9.73 War. Whistley 21-6-19</i>
																					<i>WAR SERVICE GRATUITY</i>
					<i>79.9</i>								<i>79.9</i>								<i>153 days</i>
							<i>35.0</i>														<i>WAR SERVICE GRATUITY</i>
																					<i>35.0</i>
																					<i>35.0</i>
																					<i>63.40</i>
																					<i>70.00</i>
																					<i>70.00</i>
																					<i>70.00</i>
																					<i>70.00</i>
																					<i>343.40</i>
															<i>660</i>						<i>660</i>
																					<i>273.40</i>
																					<i>210</i>
																					<i>140.00</i>
																					<i>70</i>
																					<i>350</i>
																					<i>112266</i>
																					<i>2617/19</i>
																					<i>2/9/19 1163249</i>
																					<i>SEP 30 1919 1172712</i>
																					<i>NOV 1 1919 1181409</i>

JB



Handwritten scribbles or faint markings, possibly illegible text or a signature.

* Strike out which ever inapplicable.

ASSIGNED PAY.	ENGLAND OR CANADA.	SEPARATION ALLOWANCE.	ENGLAND OR CANADA.	NAME: COTCHER Neil Hoffman
EFFECTIVE DATE: 1/5/18		EFFECTIVE DATE: 1/5/18		NUMBER: 529474
AMOUNT: \$15.00		AMOUNT: \$15.00		PARTICULARS OF RANK OR APPOINTMENT
NAME, ADDRESS, RELATIONSHIP & AUTHORITY Mrs. Theresa Cotcher (Mother) R.F.D. #1, Pontiac Mich. U.S.A.				AUTHORITY
				DATE EFFECTIVE
				6 Platoon Com
				1
				1st Lt
UNIT AND TRANSFERS				
ORIGINAL UNIT: 63rd D. Bty.				
DATE ACCOUNT FIRST OPENED: 1-5-18				
AUTHORITY		DATE EFFECTIVE	DATE LEDGER SHEET T'S'D	UNIT TRANSFERRED TO
RB P240132		28-4-18		C.P.A.
d. 3-5-18				

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
1/6	5974	Walter	4.93				
1/11	506		9.73				
			19.46				

DAILY RATES OF PAY AND ALLOWANCES					
AUTHORITY	PAY	F.A.	P.F.A.	SUBS CE ALL'CE	
6 Pl. Com	1.00	10			

PARTICULARS OF RENDERING NON-EFFECTIVE: Up to Canada 1/7/18 10734 Walter to Walter 1. K. 1/6/18 2373											
MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
30-4-18	Bal from Canada								14.73		
May	Gen's pay	34.10		AR 1187 CRA 22/5/18	4.87						
				AR 1138 CRA 10/5/18	2.43						
				at				15.	29.53		
		34.10			7.30			15.			
June	Gen's pay	33.00		Ass ^d pay Can				15.			
				AR 1948. 17.6.18. CRA.	4.87						
				AR 2259. 26.6.18. CRA	4.87				37.79		Back pay 14/9/18.
		33.00			9.74			15.			
July	Gen's pay	34.10		Ass ^d pay Can				15.			
				AR 2724. 10.7.18. CRA	4.87						
				AR 3023. 24.7.18. "	9.73				42.79		
		34.10			14.60			15.			
Aug	Gen's pay	34.10		Ass ^d pay Can				15.			
				AR 3278. 8.8.18. CRA.	34.07						
				AR 3518. 27.8.18. "	9.73				17.59		
		34.10			43.80			15.			
Sept:	Gen's pay	33.		Ass ^d pay Can				15.			
				AR 4451. 12.9.18. CRA.	4.87				30.72		
		33.			4.87			15.			
Oct	at	34.10		at				15.	44.82		
				AR 628 1st Lt 8/10/18	3.43						
				40th 2 CRA 11/10/18	3.73						
				805 ✓ 24.10.18	3.73				38.63		
		34.10			11.19			15.			

2018

NUMBER 529474 RANK

pr

NAME COTCHER. N. H.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
1918				Forward					3863	nil	
Nov	<i>pr's pay</i>	33-		<i>Ass: pay Law</i>				15			
				AR. 916. 2-11-18. 2. Bde C 7. A.	373						
				AR. 994. 14-11-18. "	373						
Dec	<i>pr's pay</i>	34 10		<i>Ass: pay Law</i>	746			15			
				AR. 1097. 4-12-18. 2. Bde C 7. A.	1679						
Jan	"	34 10		<i>Cap.</i>	2435			15	7058		
		101 20									
Feb	"	30 80		<i>Cap.</i>				15			
				AR. 1251. 4-1-19. 2. Bde C 7. A.	377						
				AR. 1339. 24-1-19. "	373						
				AR. 1464. 8-2-19. "	933						
Mar	<i>Gr. Pay</i>	34 10		<i>Cap.</i>				15			
				AR. 1558. 14-2-19. 2. Bde C 7. A.	280				8585		
		64 90			1963			30	3710		
April & May		67 10		4/5 V. 20/2/19 to 20/3/19. D.O. to 10/4/19		7 20			122 95		
				2178 - C. 9. B. D. 24/4/19	4 56				97 76		
				S. 68238 9/5	48 67						
				Work stop V.D. 9. 4/3/19 to 18/4/19 1/5/19		27 60			25 19		
				5646 2 Reg. Group 8/5	9 73						
				<i>Cap. April & May</i>				30	25 19		
		67 10			62 96	34 80		30			
June	<i>Ins Pay</i>	33 -		<i>at</i>				15	4319		
				5974 Widg. C. 1/6	9 73				34 16		
				7474 2 Reg. Group 20/5	4 87						
				8461 " " 14/6	9 73						
				8490 30.0 - 9/5 21/6	9 73				9 13		
		33			34 86			15			

4319
1946
2373 61

Lo D. 25/6/19 Sh 84