

# 511855

Original

# ATTESTATION PAPER.

No.

Folio.

## CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

### QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?..... *Davis*
- 1a. What are your Christian names?..... *James Lewis*
- 1b. What is your present address?..... *1 North Park St. Halifax N.S.*
2. In what Town, Township or Parish, and in what Country were you born?..... *Halifax N.S.*
3. What is the name of your next-of-kin?..... *Walter Gibson*
4. What is the address of your next-of-kin?..... *306 Crichton St. Halifax N.S.*
- 4a. What is the relationship of your next-of-kin?..... *Sister*
5. What is the date of your birth?..... *12th July 1877*
6. What is your Trade or Calling?..... *Teamster*
7. Are you married?..... *Widower*
8. Are you willing to be vaccinated or re-vaccinated and inoculated?..... *No*
9. Do you now belong to the Active Militia?..... *No*
10. Have you ever served in any Military Force?..... *No*  
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*

### DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *James L. Davis*, 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.

Date *Jan 12th* 1916 *James L. Davis* (Signature of Recruit)  
*Chubbrow* (Signature of Witness)

### OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *James L. Davis*, 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.

Date *Jan 12th* 1916 *James L. Davis* (Signature of Recruit)  
*Chubbrow* (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 *Halifax* this *12th* day of *Jan* 1916  
*Chubbrow* (Signature of Justice)

*in for the City & County of* *AT*

# Description of James L. Davie on Enlistment.

Apparent Age... 38 years ..... months.  
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

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

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

Height ..... 5 ft. 6<sup>3</sup>/<sub>4</sub> ins.

wt. 147<sup>1</sup>/<sub>2</sub>

Chest measurement { Girth when fully expanded..... 37 ins.  
 Range of expansion..... 2<sup>1</sup>/<sub>2</sub> ins.

Complexion ..... Medium

Eyes ..... Brown

Hair ..... DK. brown

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

## 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..... 12-1-1916 J. M. Murdoch

Place..... Halifax NS Leopt Ave  
 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.

..... James L. Davie ..... 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. Keating Capt. (Signature of Officer)  
 O. C.  
 No. 4 Coy. 3rd. Divisional Train C. E. F.

Date..... 10<sup>th</sup> February 1916.

REGIMENTAL DOCUMENTS

NAME DAVID JAMES LEWIS PTE. REGT. NO. 511855 UNIT C. A. S. C. H. Q. FILE NO. \_\_\_\_\_

①  
24

**CONTENTS**

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505  
REFERENCE

NON-EFFECTIVE BY

①  
M

ATTESTATION PAPER (M.F.W. 23, 133, or 51)

CASUALTY FORM (M.F.W. 54 or A.F.B. 103)

TRAINING HISTORY SHEET (M.F.W. 113)

FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)

REGT. CONDUCT SHEET (M.F.B. 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. 178)

DENTAL HISTORY SHEET (M.F.B. 465)

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)

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)

2 Disp. cert.

Garh

Classand

1 a 71 1207

1 P.M.B.

1 a 2 W 3 2 1 2

1 a 2 W 3 1 7 2

1 a 2 W 3 4 2 8

1 musc

1 a 2 W 3 1 2

①  
H

DEATH

Category

C4463

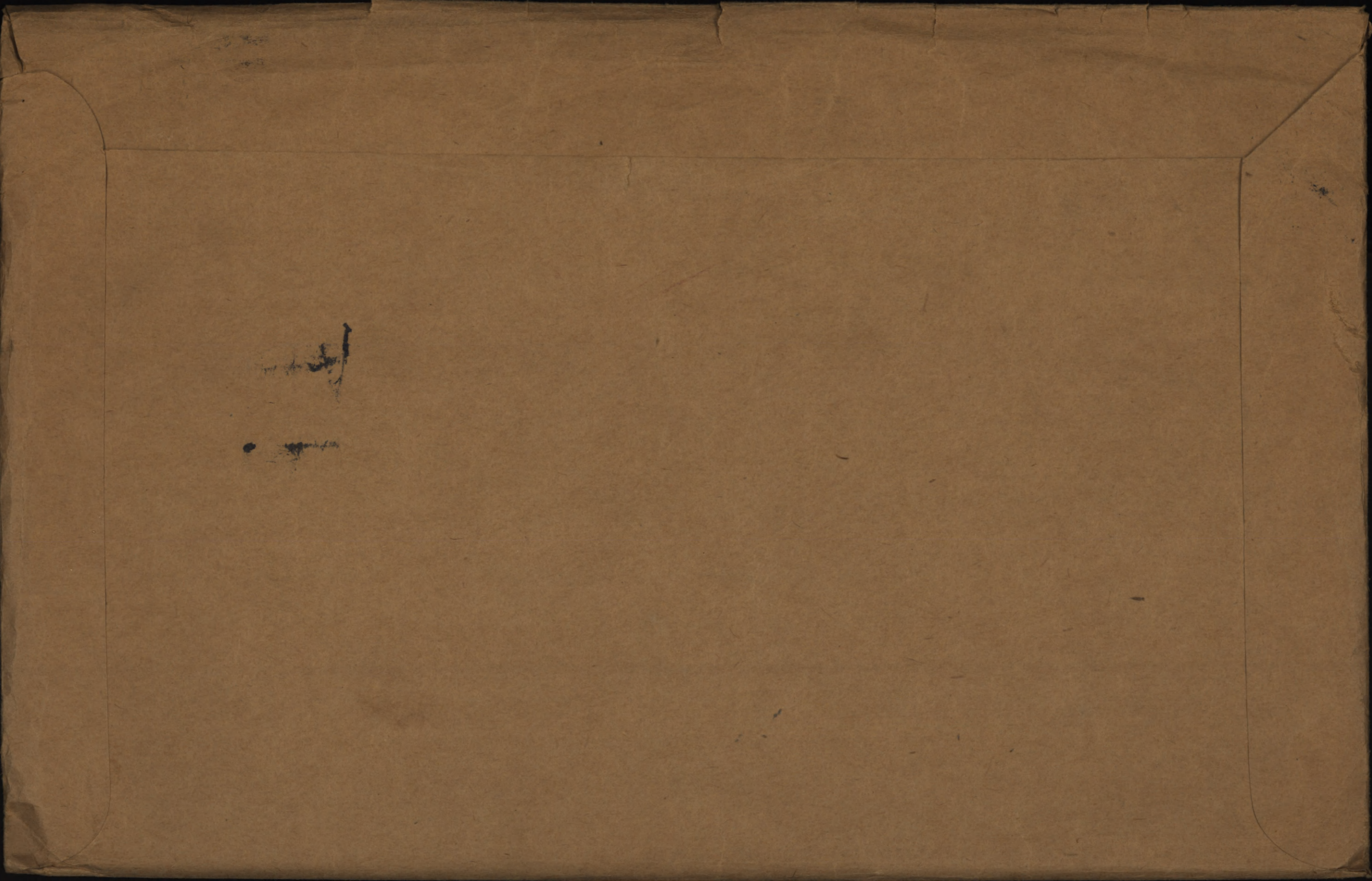
DISCHARGE

Category

DZ MOB.

DESERTION

9-5  
18-7  
32-7  
1



No. 511855.

RANK *Ser.*

NAME *David G. L.*

UNIT *3rd Div Train*

IS REPORTED *Injured Accidentally* ON *20/4/18*

BY

IN *A. J. W. 3428.*

R. 220 10M-26-11-17.

No,

RANK

NAME

UNIT

IS REPORTED

ON

BY

IN

SURNAME.

*Davie.*

CHRISTIAN NAMES

*James Lewis.*

REGL. NO.

*5118515.*

RANK

*W.E.*

UNIT

*Co 4. Co. 3rd Div Icani. C. A. S. C.*

FORMER CORPS

*Nil.*

*B. 6.*

CARD NO.

✓

*5052 emb 2-8-19*

*W.O. 212 FOLL 851-7-19*

*#6210.*

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

*Robson, Maud.*

RELATIONSHIP TO SOLDIER

*Sister.*

ADDRESS

*306 Creighton St. Halifax. N.S.  
312*

*S. A. A. P. 23-10-18*

COUNTRY OF BIRTH

*Canada. Halifax. N.S.*

DATE

*July 15<sup>th</sup> 1877.*

PLACE OF ATTESTATION

*Halifax.*

*N.S.*

DATE

*Jan. 15<sup>th</sup> 1916.*

*75. 1-3-16 348  
11*

*R/E. 28-7-19 379/10*

MARRIED

SINGLE

WIDOWER

*Yes.*

TRADE OR CALLING

*Steamer*

RELIGION

*Church of England.*

DESCRIPTION.

APPARENT AGE

*38.* YEARS

— MONTHS

HEIGHT

*5.* FEET

*6  $\frac{3}{4}$ .* INCHES

CHEST MEASUREMENT

*37.* INCHES

EXPANSION

*2  $\frac{1}{2}$ .* INCHES

COMPLEXION

*Med.*

EYES

*Brown.*

HAIR

*Wk Brown.*

DISTINGUISHING MARKS

*Nil.*

MEDICAL EXAMINATION.

PLACE

*Halifax, N.S.*

DATE

*Jan. 10<sup>th</sup> 1916.*



NAME

RANK AND CORPS

CABLE

NO.

DATE

NATURE OF CASUALTY

REG'TL. No.

H. Q. FILE No. 649

FOLLOWS

No.

FOLLOWS

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
A202	26 Gen Etaples	25-4-18	"Fract Tibia Sw
B204.	Footing ind. Church.	27-4-18.	" " " "
	Law Footing	B. 210"	"Fract. Tibia injured acc.
B263-1 To	Can. Conv. Blomley	17-7-18	" " " "
B. 294.	To 16 Can Gen Arington	22-8-18.	" " " "
B. 363	Disch. P. P. Can Rectt. Bephill.	<del>15-11-18</del>	"Fract Tibia Acc.

Princess Patricia Canadian Red Cross Hospital, *B III*  
Cooden Camp, Bexhill, HOSPITAL.

*T. 1087*  
D.M.S. 1817

*Regt.*  
A. & D. No. *511855* Ward *Div. 2*

Unit *C. A. S. C.* (3<sup>rd</sup> Res. Trans) Sick or Wounded.

Regtl. No. *-* Pl. of Act'n *Vimy*

Rank *Ser* Name *David J. L.*

Age *45* Religion *C. of E.*

Service Compl'd  *$\frac{32}{12}$*  Time with Field Force *15/12*

Diagnosis *Simple Isonc Rheumatism (acc)*

Admitted *5/9/18* *Out. Mil* *Hoopa Arpington* Discharged *15-11-18*  
*Kimel Park Phys*

Transferred *DISCHARGED TO DUTY*  
*Cat B III.*

Trameter

A. & D.  
CARD

*66th* HOSPITAL.  
*Bromley*

*F*  
✓

AT.....  
A. & D. No. *T 987* PL. OF ACTION.....

RANK *Sgt.* REG. No. *511855* UNIT *6. assb.* ~~SICK OR~~ WOUNDED

NAME *Davie, J.L.* AGE *46* RELIGION *Ch.*

PLACE IN HOSPITAL.....

DIAGNOSIS *Fract. Rt. Tibia Acclth.*

ADMITTED *16. 7. 18.* FROM *Boateng m.H.*

DISCHARGED..... TO.....

TRANSFERRED *19. 8. 18* *Oapington*

SERVICE AT HOME *75* IN FIELD *15*  
*12* *12*

RESULTS.....

(See Document Card for M.H. Sheet and other Documents.)

REMARKS.

A series of horizontal dotted lines for writing remarks.

James Lewis

Name **DAVIE**Rank **Dr.**Reg. No. **511855**Unit **CASC. 3<sup>d</sup> D.T.**Next of Kin **CANADA**

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1918						
<del>24</del> 25	4 26 Gen Hq.	Etaples	5" frac Tibia Sev.	<del>H202</del>		070-2
27	4 Tooting Mil St church lane Tooting	do	do	<del>B204</del>		17100
Note	Injured accidentally as accepted diagnosis			B210		ATW.3428
17	1 C. Com Hq.	Bromley	do (Acc)	B265		21550
22	8 16. C.G. Hq. out	O'pington	acc R. Tibia Acc.	<del>B294</del>		24905
6.9.18	P.P.C.C.C. Bechill		- do -	<del>B265</del>		25965
15-11-18	Discharged			<del>B265</del>		9513
15-11-18	Remel Ph.	Rhyl				

Date

Movement

Place

Casualty

List  
No.

Notified  
N/K O.

W.O. List

2058



*A*  
Number

5-11855

Rank

*Pvt.*

Surname

DAYIE

Christian Name

James Lewis

Units

CASC

Theatre of War

France

Date of Service

15-2-17

Remarks

Latest Address

312 Creighton St,

Wagon, 25

Roll No.

*B. Page 19025*

200m.-6-21.M.

DATE AND PLACE OF ORIGIN

\* DUE TO SERVICE  
\* NOT DUE TO SERVICE

HOSPITAL AS AN ADMISSION

WHERE FROM)

UNIT

IN CATEGORY

INVALID

WHERE TO)

CONDITIONS DIAGNOSED

ADDRESS

HOSPITAL

STATION

\* CROSS OUT CONDITION NOT APPLICABLE.

DESP  
REGN. NO. 21327  
DEC 21 1922

(OVER

No. 511855 RANK *Pvt*

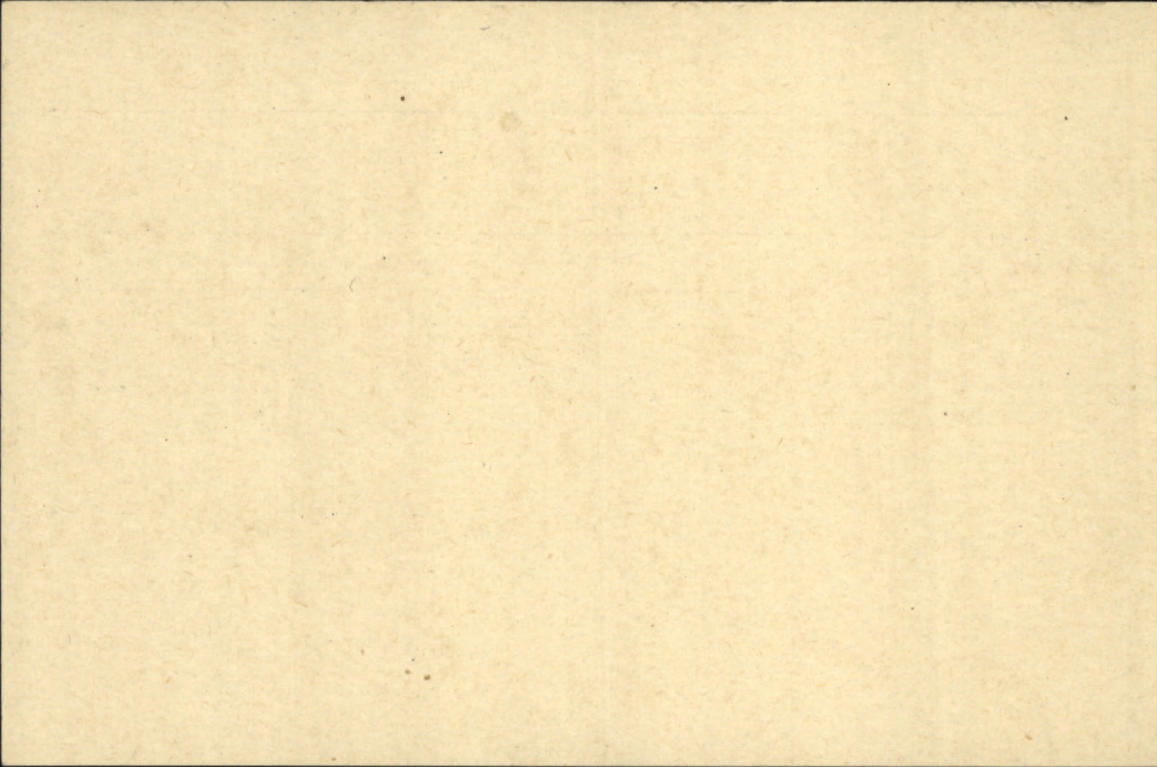
NAME *Wavie J*

T. O. S. *12-1-16*  
*70.0.10 of 12-1-16*

UNIT *C.A. S.C. #4 Coy. 3<sup>rd</sup> Div. Train*

M. D. *6*

PAID		SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
FROM	TO		PARTICULARS	AUTHORITY
<i>1916</i> <i>Jan 12</i>	<i>1916</i> <i>Jan 31</i>	<i>v</i>		
<i>Feb</i>		<i>v</i>		



URNAME

CHRISTIAN NAME OR NAMES

REG. NO.

DAVIE

J.L.

511855.

RANK

UNIT

Co.

TROOP

BATTY.

*2<sup>nd</sup> Pr.*

CASC.3DT.

HOSPITAL

DATE OF ADMISSION

26 G.H. Etaples.

25-4-18.

*Looking me Church Lane*

HOSP. 27.4.18

2.

*6. 6. Bromley  
16. 6. 4. Orpington.*

HOSP. 17-7-18  
22.8.18.

3.

*J.P. & R.C. Beshill*

HOSP. 6.9.18.

4.

HOSP.

DIAGNOSIS

~~SMSM "S" Frac. Tibia Severe~~

*by Acc.  
(Ent. 15.5.18)  
HR*

1.

*Frac. R. Tibia Acc.*

2.

3.

DISPOSITION

DATE

*CL. 2-5-18. A202.*

REMARKS

*6.5.18 B204.*

*13.5.18 B210.*

*Stop work C.L B204.*

*19.7.18 B265*

*6.5.18. add. to diagnosis*

*27.8.18 B294*

*Dis 15.11.18*

*9.9.18 B304/1.*

*20.11.18 B363.*

A.M.D. 2 Dept.

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

EPITOME OF HOSPITAL TREATMENT

HOSPITAL

ADM.

1.

2.

3.

4.

5.

6.

7.

Ward 22 Hospital. No. of Bed \_\_\_\_\_ Date 27-4-18.

Regl. No.	Rank and Name.	Corps.	Part to be X-Rayed.
5-11855	Dr. Davie	3rd Can. asc Co.	RT tibia. upper 3rd

## SHORT HISTORY OF CASE.

(To be completed by M.O. i/c case.)

Said to have  
fracture.  
2 both bones

## REPORT ON RESULT OF X-RAY EXAMINATION.

(To be completed by Radiographer.)

No. of Plate 745 U d 2

Shows fracture of tibia only.

Signature of M.O. P. Chase

Date \_\_\_\_\_

Signature of Radiographer E. BensonDate 29 Ap 1918.





DENTAL CERTIFICATE

Reg No 51855 Rank Dr. Name Davis, H. Unit L.A.S.C.

Date of Examination 3/10/18 Present Dental Condition 1 filling required In case of loss or decay of teeth is the loss due to wounds, injury or disease directly attributed to Active Service NO

Has he ever declined Dental Treatment NO Recommendation Completion in England & Canada

... E. Henry ... Capt C.D.C.

1841

1841

1841

1841

1841

1841

1841

1841

1841

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

# DENTAL CERTIFICATE FOR DEMOBILIZATION

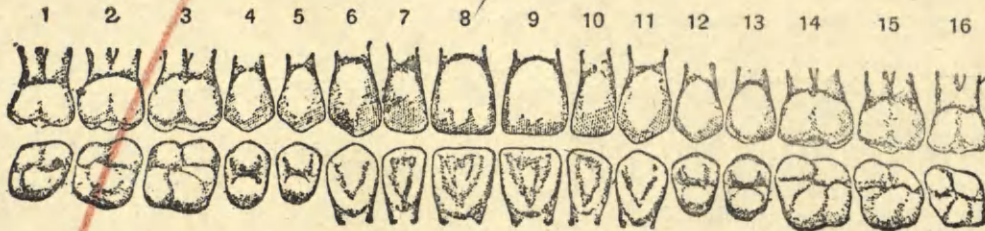
DIRECTIONS TO DENTAL OFFICERS

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) DAVIE James Lewis

REGIMENT C.A.S.C. RANK Pte No. 511 855-

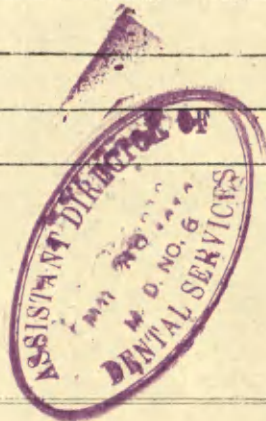
Date of Examination in England 11-7-44 Date of Examination in France \_\_\_\_\_



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
2. EXTRACTIONS
3. CROWNS
4. DENTURES
  - (a) Full Upper
  - (b) Part Upper
  - (c) Full Lower
  - (d) Part Lower



HAS HE EVER REFUSED DENTAL TREATMENT ?

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

*F. H. G. O'Connell*



DAVIS

1872

DAVIS

War Service Badge  
Class A, No. 38397

# CANADIAN EXPEDITIONARY FORCE

## DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 511855 (Rank) Pte

Name (in full) James Lewis Davis enlisted in  
the C. A. S. C.

CANADIAN EXPEDITIONARY FORCE at Halifax on the 12<sup>th</sup>  
day of January 1916

HE served in France with 3rd. Div. C. A. S. C. England  
Canada

and is now discharged from the service by reason of  
Demobilization.  
~~Medical Unfitness.~~

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

Age 42 years  
Height 5' 6 3/4"  
Complexion Medium  
Eyes Brown  
Hair Dark Brown

Marks or Scars  
Two vacc scars left  
Arm one in the Army, one  
mole back left side

J. L. Davis  
Signature of Soldier.

[Signature]  
D. C. Dispersal Station Major  
Issuing Officer.

Date of Discharge



Rank

Date HALIFAX, N.S. JUL 28 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.

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

# SERVICE AND CASUALTY FORM (Part I).

Army Form B.103-I  
Part I.

Army Form B. 103 (II.) to be gummed on here, if required.

Nothing to be written in this margin.

Forms/B. 103/8

HWV(R1460)

3/19

100,000

P2151

W10416

(6 28 19)

(1)*Substantive rank *Acting rank *(To be entered in pencil to facilitate alteration.) (4) Surname (5) Christian Names (6) Army Form, number of, Attestation } Form or Record of Service paper } (7) Whether of British or of Alien origin ( <i>vide</i> A.C.I. 578 of 1918) (8) Date of birth as stated on enlistment (9) (a)	(2) Regiment or Corps	(3) Regtl. No.
--	-----------------------	----------------

(10) Enlistment (b)	(11) Engagement (c)
(12) Service reckons from ( <i>date</i> )	(13) Special conditions (if any) of enlistment ( <i>d</i> )
(14) Any subsequent variations (if any) } of conditions of service }	(Authority) <span style="float: right;">(<i>date</i>)</span>

Initials and Rank of  
an Officer.

(15) Category	Date	Medical Authority	Initials and Rank of an Officer	(16) Record of Occupation in Civil life ( <i>vide</i> Army Order 93 of 1917)
				Industrial Group No. Trade or Calling Married or Single Particulars of Trade Test  Occupation Cards despatched on ( <i>date</i> ) Second Occupation Card despatched on ( <i>date</i> )

(17) Next of Kin	
(18) Demobilizer ( <i>f</i> )	(Place)
(19) Pivotal-man ( <i>f</i> )	(Date)
(20) Qualifications ( <i>g</i> )	or (21) Corps trade and rate
(22) Extended {	(23) Re-engaged {
(24) Miscellaneous entries :—	

(Signature of  
Posting Officer)

**NOTES.**—(a) Here enter particulars of any subsequent claim as to actual age after verification by birth certificate (*vide* A.C.I. 470 of 1918). (b) Whether direct or voluntary enlistment, or called up under the Military Service Acts. (c) Whether for specified term of years or for duration of the war. (d) Whether "for Home Service only," or "not to be transferred without the soldier's consent," &c. (e) If to be retained on Home Service, period, if specified, to be stated, also authority, and on what grounds. (f) Required for demobilization purposes. (g) Signaller, Shoering-smith, &c.

No 4 boy 3rd Lt train

Name James Lewis

511855

(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					
			Arrived in England.	B. Shott	12 Nov. 1916	P. A. Scandinavian
1.5.16	3rd Lt. Train	PI 51	Rec'd. from 9.30 to 9.50 30-4-16	B. Shott	1-5-16	
5.4.16	"	55	W.O.A.P. failing to carry out order <sup>admn.</sup>	"	3-5-16	
22.5.16	6026 2nd Lt.	143	T.O.P. <sup>given by N.C.O. 74</sup>	B. Shott	16.5.16	
15.2.17	"	46	S.O.S. on proc. o/p.	"	15-2-17	
21.2.17	6026 Pool	12	T.O.P.	Field	16-2-17	
14.3.17	"	16	Posted to 36th Train	"	24.2.17	
16.3.17	3rd Lt. Train	18	T.O.P. from 6026 Pool	"	25-2-17	
3-5-18	do	34	S.O.S. TO CA2C CD	"	26-4-18	PI 1230/9.5.18 CA2CCD
22.11.18	6026 6th Lt.	294	on cam to 1CCD	Borden	15-11-18	
18.12.18	6026	237	T.O.S. from CA2CCD	Witley	18-12-18	
21.12.18	6026 6th Lt.	319	leaves on cam. to 1CCD	Borden	18-12-18	
			S.O.S. to 6026 Witley			
14.19	6026 6th Lt.	77	S.O.S. to 6026 Ripon	Witley	27-3-19	PI 820/7.4.19 2. D. D.

Nothing to be written in this margin.

*Belsham*

S.O.S. "J" Wing, Canadian Corps Camp, Witley, on proceeding to Canada 17/7 1919, D.O. No. 34

*John Strudwick Lt*  
for Officer Commanding.

H. M. T. S. WINIFREDIAN

T.O.S. No. 4 D.D. from 15-7-19  
S.O.S. EMBARKED discharge

Miss Stab. 28-7-19. No 212  
2-8-19

*W. Ferguson*  
Lieut.  
Officer in Charge Records No. 6 D.D.

31.7.19  
31.7.19



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

M. F. W. 54.  
150M. 10-15.  
H.Q. 1772-30-920.

# Casualty Form—Active Service.

Unit, Regiment or Corps 3rd Divisional Train C.E.F. (Mottled)  
 Regimental No. 511855 Rank Driver Name Davis, James Lewis  
 Enlisted (a) 12/1/16 Terms of Service (a) D of W. Service reckons from (a) 4/2/16 12/1/16  
 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) civil Seaman

Report Date	From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be noted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
		<u>Arrived</u>	<u>England.</u>	<u>12/3/16</u>	

CERTIFIED CORRECT.  
 MAY 22 1917  
 FEB 15 1917  
 CAN. DIST. OFFICE LONDON

20 S of  
~~Transferred to C.A.S.C.T.D.~~  
 SHORNCLIFFE  
 Auth. R.O 2593 d/20. 5.16

Embarked Mch 2/16  
 Disembarked Mch 13/16

16/5/16 R.O. 2593 P.T.O. #143

FEB 15 1917  
 O.C., C.A.S.C.T.D.

On draft overseas to C.A.S.C.

Shorncliffe FEB 15 1917

PART II. ORDER No. 46

James Lewis Lt  
 for O.C., C.A.S.C.T.D.

DISSEMBARKED

HAVRE

NR. 1191

18-2-17 BDN Y.S.

Having arrived at Can. Base Depot as Reinforcement is taken on the strength of C.A.S.C.

Field

Part II Ord No 12 of 21-2-17

3-3-17 3rd Train

Posted to 3rd Canadian Train as reinforcements Rank N.R. 6/433.

24-2-17

B 213 Part II Ord No 16 2/3/17

3-3-17 3rd Train

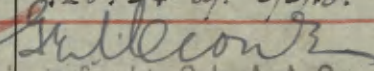
Taken on strength of 3rd Train

25-2-17

B 213 Part II Ord No 17 10/3/17

(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.

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				
13-10-17	Accum	Attached to 3rd Mob. Vet. Section for Duty	Field	5-10-17	B 213.
124-11-17	do	ceases to be attached to 3rd. M.D.S.		20-11-17	B 213.
5-1-18	do	Granted 14 days leave England		30-12-17	B 213 P 2 Q 2 12-1-18.
19-1-18	do	Rejoined from - do -		17-1-18	B 213.
24-1-18	Brd. C.D.T.	Sentenced to 7 days F.P. No. 1. for absence from active service absent without leave overdue. on leave to United Kingdom from 6.30 a.m. 13-1-18 to 6.30 a.m. 16-1-18. (3 days) 7 weeks 4 days pay under Royal Warrant.	Field	18-1-18	B 2069 P.I. End 10 d.
9-3-18	"	Attached 80th Chinese Labour Co		22-2-18	B 213a.
16-3-18	"	ceases to be attd 80th Chinese Labour Co.		10-3-18	✓
23.3.18	"	Attached to 3 C. S. H.Q. (farm work)		15.3.18	B 213a.
13.4.18	"	Returned to Unit from do.		11.4.18	"
20.4.18	9 C. S. Amb.	Sim. fracture tibia. adm. 29/4/18. to 42 CCS		20.4.18	A 36. E 7305
25.4.18	26 Gen. H.	S. fracture tibia. adm. 26 8. H.		25.4.18	W 3034 E 9232
26.4.18	do.	Invalided, sick, per Amb. 1st Newhaven & posted to CASC Corps Dept, Chanclyffe.		26.4.18	W 3083. 546. P. 20. 34 d. 3/5. 18.

  
 Lieut. for Lt.-Col., A. A. G.  
 Canadian Section, G. H. O. 3rd Echelon, B. E. F.

MILITIA AND DEFENCE  
SEPARATION ALLOWANCE

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

198

Sheet No. 2.

*Major Capt W.A. Robson* *Guardian*  
PAYMENTS.

Name of Soldier.

*Davie Jas. L.*

L. L. Job 310.—Req. 6574.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June		F8015	112	112
July		G10649	20	20
Aug.		T14649	20	20
Sept.		<del>L17672</del>	<del>20</del>	<del>20</del> [L-17672 cancelled
		X 21344	12	12
Nov.		A J23819	12	12
Dec.		H 27343	12	12
Jan.	1917	G 30298	12	12
Feb.		Z 23427	12	12
March		H 36121	68	68 (J)
April		S 483	20	20
May		S 4038	20	332 20
June		<del>W 7928</del>	<del>20</del>	20 V 7032 cancelled
July		W. 9639	20	20
Aug.		V 14710	20	20
Sept.		K 17325	20	B
Oct.		D 21422	20	Pro
Nov.		Z 24342	20	Pro
Dec.		M 26227	20	Pro 472 00
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

REWRITE

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.				

2nd. Contingent

MILITIA AND DEFENCE  
ASSIGNED PAY  
OVERSEAS CONTINGENTSM. F. W. 12.  
20m.—11-15.  
H. Q. 1772-39-8,9.To Whom <sup>Capt (Guardian)</sup> Mrs W A Robson  
Address 306 Creighton St  
Halifax  
N.S.By Whom Assigned Davie, James

Regtl. No. 511855

Rank Pte.

Corps No. 4 Co. 3rd Divisional Train.

Rate \$15<sup>00</sup> MAR 1 1916

## PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March		R16611	15-	



FEDERAL BUREAU OF INVESTIGATION  
DEPARTMENT OF JUSTICE

TO : SAC, NEW YORK

FROM : SAC, PHOENIX

SUBJECT: [Illegible]

DATE: [Illegible]

[Illegible stamp]

✓ 100-100000

[Illegible handwritten notes]

[Illegible handwritten notes]

[Illegible handwritten notes]

Mr. Tolson  
Mr. DeLoach  
Mr. Mohr  
Mr. Bishop  
Mr. Casper  
Mr. Callahan  
Mr. Conrad  
Mr. Felt  
Mr. Gale  
Mr. Rosen  
Mr. Sullivan  
Mr. Tavel  
Mr. Trotter  
Mr. Tele. Room  
Miss Holmes  
Miss Gandy

ASSIGNED PAY

Sheet No. 2.

<sup>Bapt</sup>  
<sup>(Guardian)</sup>  
Mrs. W.A. Robson

OVERSEAS CONTINGENTS

GUARDIAN  
PAYMENTS.

Name of Soldier

Davie, James.  
No 4 Co. 3rd Div. Train.

L. L. Job 89002.-Req. 6213.

#511855

Month.	Year.	Cheque No.	Amt.	Remarks.
				\$15 <sup>00</sup>
				MAR 1 1916
April	1916	P 322	15	
May		Q 3105	15	
June		R 6342	15	
July		S 6257	15	
Aug.		K 13795	15	
Sept.		7 16904	15	
Oct.		7 21273	15	
Nov.		M 24542	15	
Dec.		J 33688	15	
Jan.	1917	L 38697	15	
Feb.		L 43773	15	15 H
March		M 49085	15	15 W
April		L 1060	15	15 L
May		I 7321	15	
June		6 3662	15	15 All
July		N 20765	15	Pa
Aug.		S 28643	15	D
Sept.		R 35061	15	C3
Oct.		E 41064	15	
Nov.		V 54702	15	
Dec.		J 56864	15	
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

*mjs*

*ch*

*no*

*300*

*300.00*

MILITIA AND DEFENCE  
**ASSIGNED PAY**  
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

**PAYMENTS.**

Name of Soldier \_\_\_\_\_

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



## SEPARATION ALLOWANCE

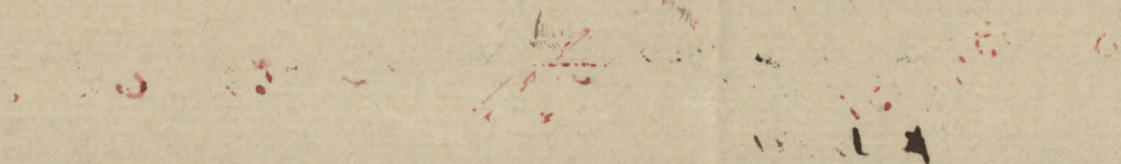
Name *Mrs. Capt W.A. Robson* Name of Soldier *David Jas L.*  
 Address *306 Brighton St* Regtl. No.  
*Halifax* Rank *Rte*  
*N.S.* Corps *No 4 Co 3rd Div Train*  
 Relation to Soldier }  
 wife, child or mother } *Guardian* To what Corps belonging }  
 when called out }

## 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				



15643



15643

15643

15643

Rank *Pte.* Name **DAVIE, James Lewis** Reg'l No. **511855**  
 Unit **No 4 Coy 3rd Div** If in perm. Corps, }  
**Train** What Unit? } Married or Single **Widower**  
 Place and Date of Enlistment **Halifax, Jan 12th 1916** Place of Birth **Halifax, N.S. CAN**  
 Name and Address, Next-of-Kin **Maud Robson,**  
**306, Creighton Street, Halifax, N.S. Canada.** Relationship **Sister**

Assigned Pay Monthly \$ **15<sup>00</sup>**Payable to **Mrs. Capt. W. A. Robson,**  
**306 Creighton St. Halifax N.S. Can.**Relationship **guardian**

Separation Allowance

Payable to

Relationship

Discharge, Date and Place

Reason

Character

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						
<b>1916.</b>																	
<b>March</b>																	
<b>1</b>	<b>31</b>	<b>31</b>	<b>1<sup>00</sup></b>	<b>31-</b>	<b>31</b>	<b>10</b>	<b>310</b>	<b>5-</b>	<b>3910</b>			<b>14 60 15-</b>			<b>2960</b>	<b>950</b>	<b>5<sup>00</sup> clothing</b>

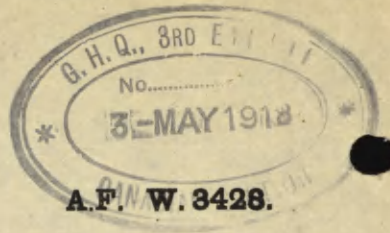
Checked

*[Signature]*

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						

*Noted  
K.H.S.  
rec. 3 CD Tm.*

A.G.'s BRANCH.
G.H.Q., 3RD ECHELON.
Date. <i>28/4/18</i>
No. <i>64</i>
CASUALTIES.



# REPORT ON ACCIDENTAL OR SELF-INFLICTED INJURIES.

To be rendered in accordance with instructions on the back of this form.

1. Number, Rank, Name, and Unit of injured man. **511855 Driver DAVIE J.L.** Date of Casualty. **20-4-18**  
*No 1 Company*  
*3rd Can. Div. Train.*

2. Nature, Location, and Severity of injury. (N.B. Field Ambulance to be notified at once if wound is believed to be self-inflicted.)  
*Simple fracture of upper third of tibia of right leg.*  
*R. G. Moffat*  
*Capt. C.A.M.C.*

3. Short statement of the circumstances of the case. (Signed statements of witnesses to be attached to this form.)  
*Broken leg caused by <sup>kick from</sup> horse which had broken loose, and which Davis had attempted to stop.*  
*see signed evidence of witnesses attached*

4. Commanding Officer's opinion as to whether the man was:—  
 (a) In the performance of military duty, *yes. On duty*  
 (b) To blame, *no -*  
 (c) Whether any other person was to blame. *no -*

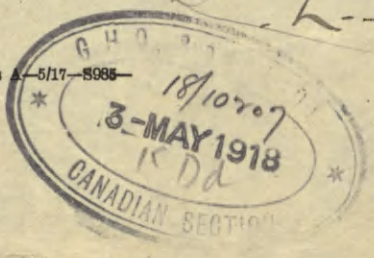
Date *20-4-18*  
*Chas Adams*  
 Commanding *No 1 Coy 3rd Can Div Train*

5. (a) Opinion of G.O.C. Brigade.  
 (b) Disciplinary action taken or proposed, whether against injured man or another.  
*Discussed in*  
*James G. Sinden*  
*G.O.C., 3rd Canadian Divl. Train*  
 Date \_\_\_\_\_ Commanding Brigade.

6. To **D.A.G.** Army "A."  
**G.H.Q., 3rd Echelon.**  
 Forwarded with reference to my Casualty Wire No. \_\_\_\_\_ dated \_\_\_\_\_  
*[Signature]*  
 Date *25-4-18.* **Major-General.**  
**Commanding 3rd Canadian Division.**

7. To D.A.G.,  
 G.H.Q., 3rd Echelon.  
 Forwarded for record. This casualty should be reported as **Injured (Accidentally).**

Date *3-5-18.*  
*[Signature]* **Lt.-Col., A.A.G.,**  
**for Major-General.**  
**DEPUTY ADJUTANT GENERAL.**



*AD*  
*K.D.*

REPORT ON ACCIDENTAL OR SELF-INFLICTED INJURIES

**INSTRUCTIONS.**

1. These forms are to be completed in all cases of accidental or self-inflicted injuries, involving a soldier's absence from duty, whether due to the man's own act, or that of a comrade, or to other extraneous circumstances.
2. Where several casualties occur as the result of one accident, one form is to be completed for each Officer or other rank injured, but only one set of statements from the witnesses of the accident need be attached.
3. Full statements are to be taken by an Officer from the witnesses of the accident. These statements will be signed by the witnesses making them, and by the Officer who takes them, and will be forwarded with this Form. Where it is intended to take disciplinary action, copies of these statements should be retained by the Unit for use in lieu of a summary of evidence.
4. Where it is possible to obtain it, a statement from the injured man will also be forwarded. This, however, should not be used as evidence against him in any subsequent disciplinary proceedings.

**Special Instructions as to Evidence in Cases of Self-Inflicted Wounds.**

5. In these cases the statements mentioned in paragraphs 2 and 3 above should bring out all material points, *e.g.*, statements to the effect that the witness was with the accused standing on the fire step (or sitting in a dug-out); that the accused was cleaning his rifle; position of safety catch, magazine, etc., if known; muzzle of rifle on toe of foot; hand on muzzle; that accused pulled trigger; that the rifle was afterwards examined and an empty cartridge case was found in chamber; that accused was seen to be wounded; what accused said ("I have shot myself," "I did not know it was loaded," etc.).
6. A soldier is specially trained in the safe use of his rifle and revolver, and evidence of any neglect of the ordinary precautions as to their handling in such cases usually has considerable bearing on the question of negligence. In cases of wilful self-wounding the fullest possible evidence should be obtained; unless the evidence is conclusive this charge should not be used. The charge will therefore usually be laid under Sec. 40 Army Act—"Conduct to the prejudice of good order and military discipline in wounding himself through negligently handling a rifle," and an alternative charge to this effect should be made, even if the accused is to be tried under Section 18 for wilful maiming.

Statements of Witnesses

Accident to 511855 Driver Davis J.L.  
No 1 Company. — — — 3<sup>rd</sup> Can. Div. Train.

No 117410 Farrier Corporal Martin B.F., 3<sup>rd</sup> Can Div  
Train states. I saw one of Driver Johnson's pair of  
horses break loose and when Driver Davis  
caught him the horse kicked with his hind  
leg Driver Davis who, had, trying to catch him,  
been knocked down. This happened about a quarter  
past four p.m. 20-4-18. B.F. Martin Corp

No 657183 Driver Johnson H.E., 3<sup>rd</sup> Can. Div. Train  
states. at about ten minutes past four p.m.  
20<sup>th</sup> April 1918. one of my horses got over the  
picquet line and when I went up to loose  
him. he knocked me up against the wall  
and got away. he ran down between the  
stables to the farrier's shop where he was  
caught but broke away again. I saw Driver  
Davis catch him <sup>then</sup> and while trying to hold  
him the horse knocked Davis down and  
kicked him in passing over him.

H.E. Johnson. Dr.

Taken before me this 20<sup>th</sup> day of April  
1918

Chas Adams  
Mgr

H. No 1 Coy 3<sup>rd</sup> Can Div. Train.







CANADIAN RECORD OFFICE,  
OLD BAILEY, E.C.4.

CANADIAN ARTILLERY.

April 26th 1918.

CASUALTY LIST "B"

No.B.226.

Sheet 1.

-----  
Date Adm. Number. Rank & Name. Unit. Nature of Casualty.  
-----

FIRST ADMISSIONS.

2/1ST SOUTHERN GENERAL HOSPITAL DUDLEY RD BIRMINGHAM.

24-4-18. 331890. Gnr. Dawson, L.L. (14B) Trench Fever P.U.O. & Pleurisy.

3RD SOUTHERN GENERAL HOSPITAL OXFORD.

24-4-18. 89764. Bdr. Ingram, F.H. (5B) SW. Face Sit.

24-4-18. 330114. Gnr. MacGregor, D. (5B) ICT. Rt. Leg.

4TH SOUTHERN GENERAL HOSPITAL PLYMOUTH.

24-4-18. 1257518. A/Cpl. Horwill, H.W. (1B OGA How.) GSW. Humerus.

2ND WESTERN GENERAL HOSPITAL MANCHESTER.

22-4-18. 2085437. Gnr. MacLeod, A.A. (9B) Appendicitis Ac. perforative.

2ND EASTERN GENERAL HOSPITAL BRIGHTON.

22-4-18. 342097. Gnr. Moran, J. (RCHA) Impetigo.

WHIPPS CROSS HOSPITAL LEYTONSTONE. (Aff. G. M. H. Colchester)

22-4-18. 340159. Gnr. Dewsbury, J.P. (RCHA) Myalgia.

GENERAL MILITARY HOSPITAL EDMONTON. N.

23-4-18. 1257904. Gnr. Carter, A.C. (6S) Impetigo.

23-4-18. 337988. Dvr. Hamer, W.V. (1DAC) Impetigo.

23-4-18. 90945. F/Sgt. Dearmonth, R. (3DAC) Impetigo.

HOSPITAL TRANSFERS DISCHARGES ETC.

GRANVILLE CANADIAN SPECIAL HOSPITAL BUXTON.

Ex. Canadian Convalescent Hospital, Monks Horton.

25-4-18. 1257867. Gnr. Eastwood, J.W. (1S) Neurasthenia.

Ex. Manor County of London War Hospital, Epsom.

24-4-18. 86970. Gnr. Price, C.S. (4B) SW. Lt. Arm Sev.

NO. 15. CANADIAN GENERAL HOSPITAL TAPLOW.

Ex. Canadian Convalescent Hospital, Bearwood, Wokingham.

24-4-18. 349433. Gnr. MacNeily, W.H. (1B) Eye Trouble. Q.

NO. 16. CANADIAN GENERAL HOSPITAL ORLINGTON.

Discharged.

23-4-18. 9808. A/Bdr. Matthews, H. (3B) SW. Head, Lt. Shldr. P'arm  
Lt. Thigh & Rt. Hand Sit.

CANADIAN CONVALESCENT HOSPITAL BROMLEY.

Ex. 1st Scottish General Hospital, Aberdeen.

24-4-18. 304441. Gnr. Inray, G.H. (3B) Frac. Lt. Femur & Clavicle

MILITARY CONVALESCENT HOSPITAL WOODCOTE PARK EPSOM.

Ex. Bath War Hospital, Bath.

21-4-18. 308729. Gnr. Armitage, M.H. (9B) Shell Gas.

24-4-18. 308611. Gnr. Fairweather, D.B. (10B) GSW. Rt. Hand.

Ex. Pavilion General Hospital, Brighton.

24-4-18. 334448. Gnr. Copeland, T.J. (Pool) Cont. Lt. Leg Acc.

Ex. Barnet War Hospital, High Barnet.

24-4-18. 507561. Gnr. Craig, H.H. (3B) Pneumonia.

Ex. Military Hospital, Woking.

25-4-18. 336001. Dvr. Holyoke, W.R. (9B) Spr. Rt. Ankle Acc.

R.2-164

From:- Officer i/c R.2.

To:- Officer i/c R.1.A.3.

REPORT OF ACCIDENTAL OR SELF INFLICTED WOUNDS.

(Extract from (A.P.W.3428)  
(Pro Forma 16)

1. Number, Rank, Name and Unit.

51855 Pvt. Dave J. G. [unclear] [unclear]

2. Date of Casualty.

20-4-18

3. Location, Nature and Severity of Wounds.

Simple fracture of upper third of tibia of right leg

4. Whether likely to render unfit for further service.

5. Particulars as to how and by whom caused, giving the Rank, Name, etc., of Witnesses of the accident, and if due to a detonator, grenade, or bomb.

Broken leg caused by kick from post which had broken loose which Dave had attempted to stop

6. Whether the man is considered to blame.

no

7. What action has been taken.

none

8. Final classification as reported by Army H.Q.

Injured (Accidentally)

9. Casualty was reported as.

'S' Frac tibia Sev.

10. Place and date of Court of Enquiry (if held)

*[Signature]* Lt

For Officer i/c Records 2.

Date... 18-5-18

LGT.

# MEDICAL EXAMINATION UPON LEAVING THE SERVICE OF OFFICERS AND OTHER RANKS WHO HAVE NO DISABILITY.

Officers and Other Ranks leaving the service for reasons other than medical unfitness are to be reported on this form. Where there is evidence of any undetermined or progressive disability, this form will not be used, but the case will be referred to a Medical Board for completion of M.F.B. 227.

No. 511855 Rank Pte Surname DAVIC <sup>Jaynes</sup> John Lewis  
(Given name in full)

Unit or Corps "J" Wing CCC Birthplace Halifax

(Examination of Officer or Other Rank (stripped) to be made by one Medical Officer.)

1. GENERAL DESCRIPTION: Est  
 Physique Good Weight 180 lbs. Height 5 ft. 6 1/2 in. Colour of Eyes Brown  
 Nutrition Good  
 Pulse 80 Regular  
 Condition of arteries Soft  
 Vision Rt. 6/12 Left 6/12  
 Hearing (conversational voice) Rt. 21 ft.  
 Left 21 ft.

Identification marks, scars, or deformities.  
(Give cause and date of origin.)  
Two vacc. scars left arm. One in the army. One mole back. Affeidl.

Opinion as to general health and physical condition Good

2. Has Officer or Other Rank ever suffered from, or has he now, any affection of the following systems? (Answer "Yes" or "No") (Subjective evidence may be sufficient in certain cases.)

Nervous System no Genito Urinary System no Cardio-Vascular System no  
 Special Senses no Integumentary System no Respiratory System no  
 Disturbance of Mentality no Muscular System no Digestive System no  
 Osseous and Joint System Yes Any other general condition Yes

3. If the answer to any part of Section 2 above is "Yes," here give full particulars, with cause and date of origin; and also a description of the present condition.

Rt. leg broken 28 April 1918 } Recovered  
Measles: Infancy }

no disability

M. H. S. & Casualty form missing

# EXAMINATIONS

## THIS SECTION FOR USE OVERSEAS—

Examined at Witley (Overseas)

Date 11-17/19 Signed [Signature] M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature [Signature]

(If not satisfied, M.F.B. 227 will be completed by Medical Board.)

## THIS SECTION FOR USE IN CANADA—

Examined at ..... (Canada)

Date ..... Signed ..... M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature .....

(If not satisfied, M.F.B. 227 will be completed by a Medical Board.)

(This space to be used, if necessary, in connection with Section 3, overleaf, only.)

Auth: D.A.G. 14/1/48 of 13/6/19

[Signature]

Regimental No. 511855

Region.....

Surname *Davis*

Christian Names *James Lewis*

TABLE I.—General Table.

Birthplace { Parish *Halifax*  
County *Nov Scotia*

Examined { on *17th* day of *January* 191*6*,  
at *Halifax N.S.*

Declared Age *28* years .....

Trade or Occupation *Steamer*

Height *5* feet *6 3/4* inches. Weight *147 1/2* lbs.

Colour of Hair *DK Brn* Complexion *med*

Eyes *Brown*

Chest Measurement { Girth when fully expanded *37* inches.  
Range of expansion *2 1/2* inches.

Physical Development .....

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

When Vaccinated .....

Vision { R.E.—V = ..... With Glasses { R. ....  
{ L.E.—V = ..... { L. ....

Identification Marks, such as Tattoo, Moles, Scars, etc :—  
.....

Defects or Ailments :—  
.....

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

Date	Brief details and Signature

Examined and found—  
Fit for Grade { I. *fit*  
                          II.  
                          III.  
                          IV.

(Strike out those which do not apply.)  
Signature *J. M. Mundell*  
                  *Capt. C.M.C.*  
Chairman of Medical Board

Special Remarks : state if a discharged Soldier  
.....  
.....  
.....

TABLE IV.—Service Table.

Re-examined for posting at .....

On..... day of..... 191.....

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

Joined on enlistment	Corps	Regtl. No.

Transferred to { .....

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

Became non-effective by .....

on..... day of..... 191.....

(Signature) .....

(Rank) .....



ORIGINAL

Original

611855

MEDICAL HISTORY SHEET.

Surname Davie Christian Name James L

Examined { on 12<sup>th</sup> day of January 1916  
at Halifax  
Birthplace { City or Town Halifax  
County Halifax NS

Approved by J. M. Murdoch  
Rank Capt M.O.

Apparent age 38  
Trade or occupation Seaman  
Height 5 Feet 6 3/4 Inches.  
Weight 147 Lbs.  
Chest measurement { Minimum 34 1/2 inches.  
Maximum expansion 37 inches.  
Physical development Good  
Small-Pox Marks nil

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT,
		<u>30 APR 1918</u>
	<u>Bill</u>	<u>Intormally</u> <u>15 NOV 1918</u>
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Vaccination Marks { Arm Right Left  
Number one  
When Vaccinated last 1912  
(a) Marks indicating congenital peculiarities or previous disease nil

Date	Result	VACCINATIONS.
<u>7/5/16</u>	<u>good</u>	<u>Wounded Capt.</u> M.O.
		M.O.
		M.O.

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

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>Feb 1/16</u>	<u>good</u>	<u>D. G. Nicholas Capt.</u> M.O.
<u>10/2/16</u>	<u>good</u>	<u>D. G. Nicholas Capt.</u> M.O.
<u>19/6/16</u>		<u>D. G. Nicholas Capt.</u> M.O.

Enlisted on 12<sup>th</sup> day of January 1916 at Halifax NS

	CORPS.	REG'T L NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>Third Divisional Train</u>			
Transferred to.. ..	<u>CASC Depot</u>	<u>Shorncliffe</u>		<u>APR 17 1916</u>
	<u>C.A.S.C</u>	<u>511855</u>		

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>Cooden</u>	<u>26-9-18</u>	<u>Fract Tibia R</u>	<u>Bill</u> <u>E. P. [unclear]</u>
<u>Cooden</u>	<u>20-10-18</u>	<u>do. + loose cart. L.</u>	<u>Bill</u> <u>not +</u> <u>Intormally</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.

CANADIAN

STANDING MEDICAL BOARD

20/1/19 2/2/19 2/3

Christian Name *James*

Surname *Davis*

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				
<i>Looking Hill H</i>		<i>26</i>	<i>4</i>	<i>18</i>	<i>16</i>	<i>7</i>	<i>18</i>	<i>acc. fract R tibia Simple 1229</i>	<i>81</i>	<i>20-4-18 Thrown from horse. In splints since. Tenderness &amp; irregularity skin 4 in below patella. Xray shows fracture &amp; good position. on Thomas &amp; extension. Then post. splint &amp; now walking 5 splint</i>	<i>D. Chase R. U.S.A.M.H.C.</i>
<i>CANADIAN CONVALESCENT HOSPITAL BROMLEY, KENT.</i>		<i>16</i>	<i>7</i>	<i>18</i>	<i>22</i>	<i>8</i>	<i>18</i>	<i>190</i>	<i>38</i>	<i>Reynier further convalescence</i>	<i>J. H. ...</i>
<i>16 Chiswick Strop Brompton</i>		<i>24</i>	<i>8</i>	<i>18</i>	<i>5</i>	<i>9</i>	<i>18</i>	<i>do</i>	<i>13</i>	<i>Recommended transfer to C. &amp; S. W. H. Dudley Capt</i>	<i>W. H. Dudley Capt</i>
<i>Princess Patricia Canadian Red Cross Hospital, Cotton Camp, Bexhill,</i>		<i>5</i>	<i>9</i>	<i>18</i>	<i>15</i>	<i>11</i>	<i>18</i>			<i>Down to duty</i>	<i>M. ...</i>

Princess Patricia Canadian Red Cross Hospital,  
Cotton Camp, Bexhill,



DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

1667

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 *James Lewis* 2. Surname *Davie*

3. Rank *Pte* 4. Original Unit *C.A.S.C.* 5. Reg. No. *511858*

6. Address, in full, to which future payments of gratuity are to be forwarded  
*P.O. Halifax N.S. Canada*

7. Date of enlistment in the C.E.F. *Jan 12<sup>th</sup> 1916*

8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge *Mrs. Maude Robson*

9. Relationship of such dependent *Sister*

10. Address, in full, of such dependent *312 Creighton St. Halifax N.S.*

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

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

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?

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

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.  
*Canada 17/1/16 to 7/3/16 - C.A.S.C. Total  
 England 27/3/16 to Feb. 17 3<sup>rd</sup> Div. C.A.S.C. France to Service  
 20/4/16 3<sup>rd</sup> Div. C.A.S.C. England from that date. 3yrs 6mos.*

16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department *Not applicable*

17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.? *Not applicable*

5434. Wt. /30P. 250,000(8). 2/19. S.O., F.Rd.  
 6234. Wt. /P49. 25,000(4). 4/19. 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.....

*Not applicable*

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.....

*Not applicable*

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

*Not applicable*

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

*Not applicable*

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.....

*Not applicable*

23. (a) Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England?.....

*Not applicable*

(b) If so, was such reversion in consequence of misconduct or inefficiency?.....

24. Are you now serving in the C.E.F.?..... If not, give:—(a) Date of discharge.....

6161 7-20-19

(b) Reason for discharge.....

**DEMOBILIZATION**

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.....

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.....

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

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

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:

*J. L. Davie*

Place of Residence:

*382 Creighton St. Halifax N.S.*

Declared before me at:

*Witter Camp. Sussex*

This..... day of..... 1919

*11th*

*July*

Questions 12-13-14-20-24-25-26 and 27 are unanswered

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.

*R.A. Spencer*

**POST DISCHARGE PAY.**

Date paid.	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
			<i>183 days</i>	<i>420.00</i>
			<i>6 months</i>	<i>180</i>
				<i>600.00</i>
				<i>70</i>
				<i>530.00</i>

Certified Correct.

*Len W. S.*  
District Paymaster.

*Can*

*91*



No 511455 per Dave James Lewis.

15.00 - Cash

DATE	PAY		FIELD ALLOWANCE		WORKING OR SPECIAL PAY		ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS				CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS		
	NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE				AMOUNT		1		2		3					4					CREDIT	DEBIT
			\$	C.						\$	C.	NO.	DATE	NO.	DATE	NO.	DATE				NO.	DATE					
1917			401	50					5 00	406 50					94 90	26 49	34 07		150	15 40	36 06	45 64					
Mar 31	10		34	10						34 10	379 1/2		213 17/8	200 June	4 66		4 62		15		22 45	57 26					
Apr 20			22	00						22 00									15		15 00	64 26			3rd to 3rd Du Jan		
May 10			11	-						11 -			2199 29/3								2 62	72 64					
May 31	110		34	10						34 10	268 21-4-17				2 67				15		20 28	86 46					
June 30			33	-						33 -	383 19-5-17				2 68				15		20 36	99 10					
July 31			34	10						34 10	444 3-6-17				2 68				15		15 -	118 20					
Aug 31			34	10						34 10	524 18-6			39 11/7	2 67				15		22 97	129 33					
Sept 30			33	-						33 -	611 4-7				2 68				15		20 36	141 97					
											761 12/8				2 68												
											664 22/11																

MONTH	PARTICULARS	CR.1	CR.2	PARTICULARS	DR.1	DR.2	DR.3	DR.4	BALANCE	DEFER. PAY	SER. ALLOE. ENG.	MONTH	PARTICULARS	CR.1	CR.2	PARTICULARS	DR.1	DR.2	DR.3	DR.4	BALANCE	DEFER. PAY	SER. ALLOE. ENG.
Oct									141 97			Libry											
									15														
				3 DJ 9/R 511 17/8	5 35																		
Nov	P.P.	34 10		3 DJ 9/R 589 4/9	2 68				153 04			Met											
		34 10		AR 106 2 1/2 3 WY.	3 57				15														
		33 00		941 1/9	2 68																		
				AR 114 3 3 DJ 2-10-17	4 46				15														
				AR 1210 3 DJ 1-11-17	3 57																		
Dec	P.P.	34 10							15 175 86														
1918		67 10			1 4 28				30														
Jan		34 10			15																		
				CP 9899 3.1.18 L 5.00	24 33																		
				AR 13524 3 DJ 6-12-17	3 57																		
				" 1960 " 29.12.17	9 73																		
				" " " "	87 60																		
				" 1271 " 15-11-17	13 38																		
				" 90-3 Section 18-12-17	4 46																		
				AR 1487 3 DJ 29.12.17	3 57																		
				CP 3536 9.1.18 L 7.00	34 07				25														
					180 71				14														
					34 10				15														

2099

\* Strike out whichever inapplicable.

ASSIGNED PAY.	ENGLAND or CANADA.	SEPARATION ALLOWANCE.	ENGLAND or CANADA.
EFFECTIVE DATE:- 1.3.16		EFFECTIVE DATE:-	
AMOUNT:- 15.00		AMOUNT:-	

NAME:- **DAVIE James Lewis**

NUMBER:- 311855

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.

Mrs Capt. W.A. Robson (Guardian)  
306 B righton St  
Halifax  
N.S.

*Stopped off 1-8-19.*

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Pte

UNIT AND TRANSFERS

ORIGINAL UNIT:- 302

DATE ACCOUNT FIRST OPENED:- 1.3.16

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S F D	UNIT TRANSFERRED TO
			302

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
26-6-14	2726	Duphon Lt-10	430			Lt 8!	4042
3-7-14	2900	- Lt	475			Lt 6 Lt Bal	94
8-7-14	11214	J Wang Lt	2400				
			4136				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBSCE ALL'CE
	1-	10		

PARTICULARS OF RENDERING NON-EFFECTIVE:- *Alan 31/7/19. N.R.G. 11562. B. Stott 9/7. Witley J. Irving.*

MONTH 1918	PARTICULARS	CR 1	CR 2	PARTICULARS	DR 1	DR 2	DR 3	DR 4	BALANCE	DEFERRED	SEPARATION
Apr	P. Pay	33		gap				15	2099		
				1 <sup>o</sup> ar. 96 302 18/4	803				3899		
				1 <sup>v</sup> 41 302 Lt Coy 6/4	357				3096		
					1160			15	2739		
May		33									
		3/10		gap				15	4649		
June		33									
		3/10		gap				15	7949		
				2 <sup>o</sup> ar. 13816/11904 Lar. 17/6	973				6449		
					973			15	5476		
July		33									
		3/10		gap				15	8886		
				1 <sup>o</sup> ar. 4695ooting 5/7	487				7386		
				4 <sup>v</sup> 1238. Bromley 19/7	487				6899		
					974			15	6472		
Aug.		33									
		3/10		gap				15	8322		
				1 <sup>o</sup> ar. 1505. ✓	10/8 487				7835		
Sept.		33									
		3/10		Cap				15	9635		
				1 <sup>o</sup> ar. 4658 Corp. 4/9	487				9148		
				17 <sup>v</sup> 4610 ✓	973				8175		
					1440			15			
Oct.		33									
		3/10		1 <sup>o</sup> ar. 1234 Service 9/10	973			15	10085		
				28 camp #2 10.10.18					9112		
				30. 266 Casca 10.10.18				3080	6033		
					973			15			

COMPILED BY *John Dove*

CHECKED BY *Woodall*

F-28  
10

NUMBER 511855

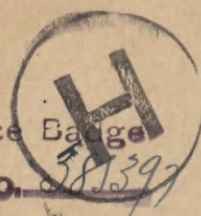
RANK

NAME DAVIE J. L.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Nov		33							6032		
				a.r. 11458. Reddie 7/11	487			15	7832		
Dec		3410						15	7345		
				v 8150 Kennebec Pk 28/11	4881				9255		
				v 6808 ICCO 10/12	4187				11370		
				v 7803 " 16/12	1947				3887		
				v 4250 Kennebec Pk 18/11	1460				1940		
Jan		3410			9262			15	480		
	10/17 27/18 5/18 18/18 RO 218-1 CCO-17/18	730							2390		
Feb		10850			9262			15	2120		
		2080									
				v 5205 Willey 12/1	730				47		
				v 5389 " 27/1	487				2960		
				89/116 Casco 18/2	2433				3473		
Mar	P.P.	3410						15	1040		
				Coat.					2950		
				130/ On. S. Casco 9/2	730				2220		
				150/ H23. ✓ 15/3	730				1490		
				150/ 296. ✓ 10/3	487				1003		
		6490			5607			30			
Apr		33-						15			
				1/ 4779. Der Ripon 23/3	487						
				3/ 464. ✓ 15/4	487						
May		3410						15			
				May bet P.							
				2/ 641. ✓ 29/4	487						
				1/ 1194. ✓ 13/5	1460				1792		
		6710			2921			30			
June		33-						15			
				1/ 1594. ✓ 27/5	487						
				2/ 2271. ✓ 13/6	973						
July		3410						15	4042		
				4/ 2726. Ripon 26/6	730				<del>3207</del>		
		6710			2190			30	3312		
				11214 8/7	2433				879		
				2900 3/7 Ripon	973				-94		
					3400						

LOS bur 8.7. 2/198

War Service Badge  
Class A, No. 581392

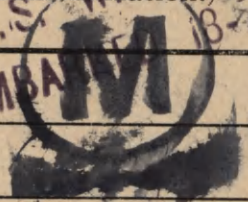


SHORT FORM.  
PROCEEDINGS ON DISCHARGE.  
(Demobilization.)

Occupation Group 1  
Dispersal Area B

16-6-41

H.M.T.S. WINIFREDIAN  
EMBARKED  
8-7-19



1. No. <u>511835</u>	
2. Rank. <u>Pte</u>	
3. Name. <u>James John Lewis Davie</u>	
4. Unit. <u>C.A.S.C.</u>	
5. Date of Discharge <u>2 8 19</u>	Place <u>Halifax</u>
6. Reason for Discharge..... ..... .....	
7. Authority. <u>R.O. 1420</u>	
8. Proposed Residence after Discharge <u>312 Broughton St Halifax N.S.</u>	
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.? <u>J. L. Davie</u> Signature of Soldier.	
10. CONFIRMATION. The discharge of the above named man is hereby confirmed. Place..... Date..... <u>HALIFAX, N.S. JUL 28 1919</u> <u>[Signature]</u> Major Signature..... (O. C. Discharging Unit.)	

DEMOBILISATION.

*Received 11/1/48*

24-

E.R.J.







**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 (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.A. 45).
5. Dental Certificate (C.A.D.C. 5609a).
6. Field Conduct Sheet (M.F.B. 122).
7. Proceedings on Discharge (M.F.B. 218a).
8. Discharge Certificate (M.F.W. 44)  
(Enclosed in special envelope (260M)).
9. Copy of Discharge Certificate (M.F.W. 30a).
10. Dispersal Certificate (C.D.S).
11. Equipment Statement (M.G. Form (D.O.S. 2), and Clothing (P. 851).
12. Last Pay Certificate (P. 851).
13. Pay Book (A.F.B. 44).
14. War Service Casualty (Form M.F.W. 2595).
15. Sundry Documents.

*Thrup*

Group \_\_\_\_\_  
 Checked by No. B  
LDM  
 Date 17 III 1919

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

D 1184

Mar 1/16

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

20	25	30	
----	----	----	--

RATE OF ASSIGNMENT

15-			
-----	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

No. *5-1185-5-*  
 Rank *Pte* Promoted Reverted Discharge  
 Soldier's Name *James Davie*  
 Battalion *No 4 Co. 3rd Div. Training*  
 Beneficiary *Mrs Capt. W.A. Robson*  
 Relationship *Guardian* *W 2554 26/7/18.*  
 Address

PARTICULARS OF ASSIGNMENT

Name *Mrs W.A. Robson*  
 Address *306 Brighton St Halifax N.S.*  
 Change of Address  
 1  
 2 *Can. Patriotic Fund.*  
 3 *(in trust for children)*  
 4 *Halifax N.S.*

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
1917					
Dec 31		472	330	802	HB
Jan. 18	66350	30	20	50	M
FEB	E92844	25	15	40	/
Mar.	A121991	25	15	40	
April	B4393	25	15	40	
May	13027 0	25	15	40	✓
June	24204 I	25	15	40	✓
July	28848 G	25	15	40	✓
Aug.	38054 I	25	15	40	✓
Sept	47625 L	25	15	40	✓
Oct	55553 M	25	15	40	✓
Nov	57990 I	25	15	40	✓
Dec.	67543 D	45	15	60	✓
Jan	75657 M	30	15	45	✓
Feb.	80803 P	30	15	45	
Feb.	80147 X	30	15	45	
Mar	82875 J	30	15	45	
Apr	61 M	30	15	45	
May	5884 G	30	15	45	
June	10366 G	30	15	45	
JUL	11902	30	15	45	
		1007	620	1627	

0 4286- J-12. REMARKS 04306-J-22  
 P.O. 16850 17/18  
 SA and AP trans to Can. Pat. Fund in trust for soldier's children eff 1-2-19 with PAB ruling M.R.O. 6804 3 C.C.O. 6470  
 A/p acct overpaid 5<sup>00</sup> xx in Jan 1918. M.D. #6 requested to recover overpayment. 6-8-19 J.S.

P80803 Cancelled 20/2/19

AUDITED 20/2/19

A/c Closed 31-7-19  
 Ret'd per... W. M. F. W. 187  
 Date... 28-7-19 M.F.W. 187 M.D. 6  
 Closed... J. Manakur M.R.O. 107 516- 6 8/19

M. F. W. 128  
 4003-6-17-1772-33-1141  
 L. L. 22320-M. & D. 7983.

11 V2 D5  
 S.K.

12-1-16

P.C. 3257

1-9-18  
 Re. 2753  
 M.O. 25687

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

PARTICULARS OF ASSIGNMENT

No.

Name

Rank

Promoted

Reverted

Discharge

Address

Soldier's Name

Change of Address

Battalion

1

Beneficiary

2

Relationship

3

Address

4

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

M. F. W. 128  
 400M. -6-17-1772-39-1141  
 L. L. 22320 -M. & D. 7593.

*Wimpredian 28.7.19*

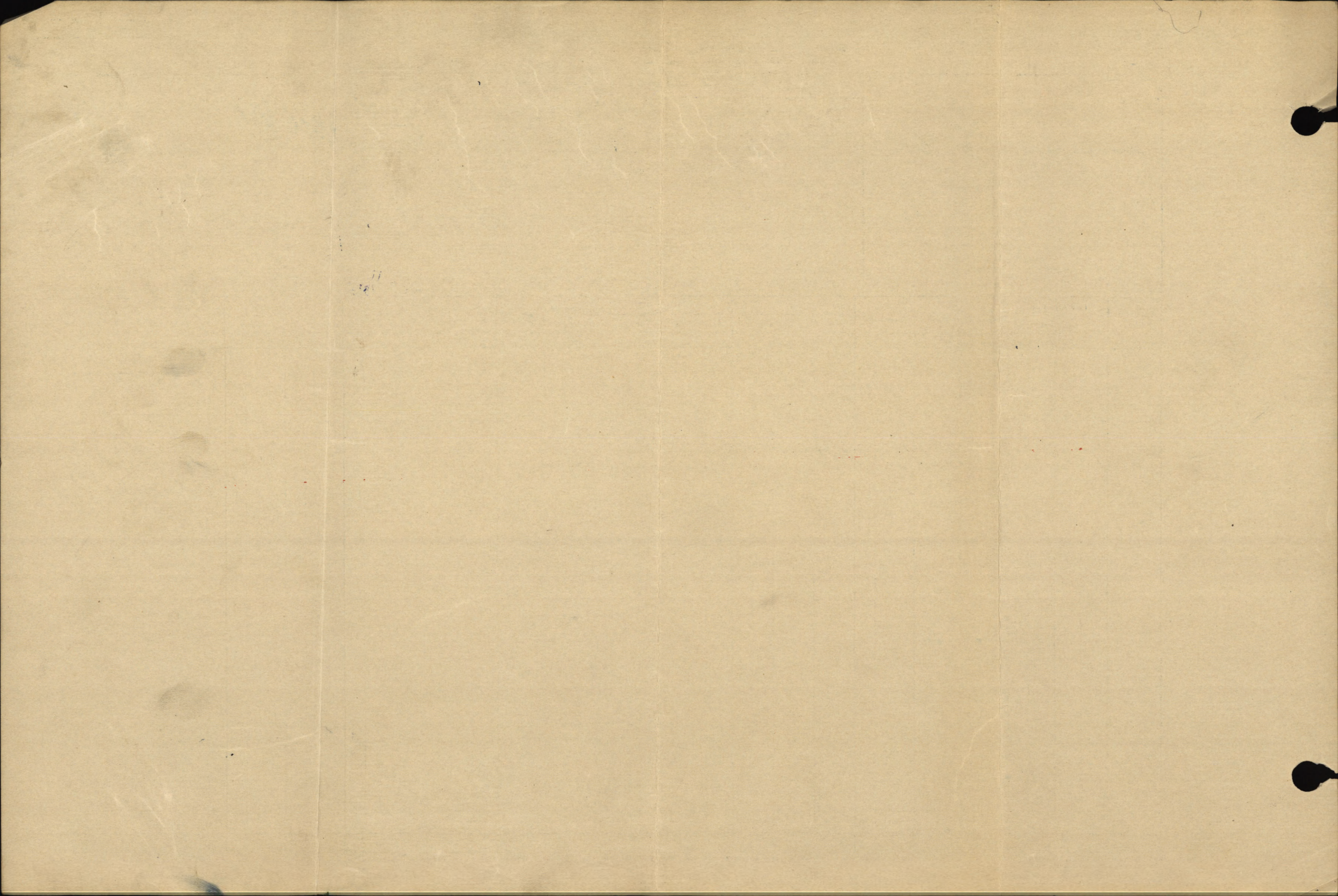
PROMOTIONS, REDUCTIONS AND REVERSIONS AFFECTING DAILY RATE OF PAY AND ALLOWANCES

M. OR S. \_\_\_\_\_ REGT. No. *410949* RANK *Pte* NAME (IN FULL) *David J. L.*  
 NEXT OF KIN \_\_\_\_\_ ORIGINAL UNIT C.E.F. *511885 (38.S)* IF IN P.F. WHAT UNIT? \_\_\_\_\_ (BLOCK LETTERS SURNAME FIRST)  
 ADDRESS \_\_\_\_\_ PLACE OF ATTESTATION \_\_\_\_\_ TRANSFERRED TO \_\_\_\_\_ DATE \_\_\_\_\_ AUTHORITY \_\_\_\_\_  
 DATE OF ATTESTATION \_\_\_\_\_ TRANSFERRED TO \_\_\_\_\_ DATE \_\_\_\_\_ AUTHORITY \_\_\_\_\_  
 IS SEPARATION ALLOWANCE PAID? *Yes 30.00* DATE EFFECTIVE *1.8.19* ASSIGNED PAY \$ *10.00* DATE EFFECTIVE *1.8.19*  
 TO WHOM PAID *Same as A.P.* RELATIONSHIP \_\_\_\_\_ ANY CHANGE IN ASSIGNEE OR ADDRESS \_\_\_\_\_  
 ADDRESS \_\_\_\_\_ PAYABLE TO *Gov. Pat. Fund* RELATIONSHIP *Guardian*  
 ADDRESS *In trust for Children Halifax N.S.*  
 STOP PAYMENT FORM RENDERED, DATE \_\_\_\_\_ EFFECTIVE \_\_\_\_\_  
 DISCHARGED *Halifax* PLACE \_\_\_\_\_ DATE *AUG 2 1919* REASON *Demot* AUTHORITY *Co. 212* IF ENTITLED TO POST DISCHARGE PAY \_\_\_\_\_

BALANCE FROM PREVIOUS ACCOUNT	MONTH	NO. OF DAYS	PAY AND F.A.		OTHER CREDITS		TOTAL CREDITS		ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY	REGIMENTAL CHARGES		OTHER CHARGES	TOTAL DEBITS		BALANCE		PARTICULARS OR REMARKS
			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>31.7.19</i>																						<i>As per bill Alter</i>
	<i>12.8.19</i>	<i>2</i>	<i>10</i>	<i>2</i>	<i>20</i>	<i>35.00</i>	<i>70.00</i>	<i>107.20</i>				<i>487</i>	<i>5.00</i>	<i>96.39</i>					<i>91</i>	<i>107.20</i>			<i>How W.S.G. bill on</i>
																							<i>but bill's but in do.</i>
	<i>18.9.19</i>				<i>420.00</i>	<i>180.00</i>	<i>600.00</i>	<i>180.00</i>						<i>70.00</i>									<i>1st. Lt. W.S.G.</i>
														<i>65</i>	<i>60</i>	<i>5.00</i>				<i>280</i>	<i>120</i>		<i>a receipt for 8</i>
														<i>70</i>	<i>30</i>					<i>210</i>	<i>90</i>		<i>1122814/30 2/9/19</i>
														<i>70</i>	<i>30</i>					<i>140</i>	<i>60</i>		<i>1502128 1-10-19</i>
														<i>70</i>	<i>30</i>					<i>70</i>	<i>30</i>		<i>1766307-8 1-11-19</i>
														<i>70</i>	<i>30</i>					<i>70</i>	<i>30</i>		<i>17791404 2-12-19</i>
														<i>70</i>	<i>30</i>								<i>17848 2-1-20</i>
					<i>420.00</i>	<i>180.00</i>	<i>600.00</i>	<i>180.00</i>						<i>70.00</i>						<i>600</i>	<i>600</i>		<i>net</i>

Certified that all payments due on this acct. have been paid.  
*[Signature]*  
 CAPT.  
 for Senior Officer Pay Services, M. D.

AUG 21 1919



RVG

Rank

Name

DAVIE, James Lewis

Reg'l No. 511855

Unit No 4 Coy 3rd Div  
Train

If in perm. Corps,  
What Unit? }

Married or Single Widower

Place and Date of Enlistment Halifax, Jan 12th 1916

Place of Birth Halifax, N.S. CAN

Name and Address, Next-of-Kin

Maud Robson,

306, Creighton Street, Halifax, N.S. Canada.

Relationship

Sister

Assigned Pay Monthly \$

Payable to

Relationship

Separation Allowance \$

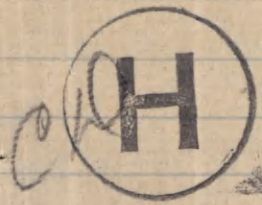
Payable to

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.				
			Bramshott		
		Arrived in England	Bramshott	1 2 MAR 1916	S. S. Scandinavian
1-5-16	Adj. Div. Lt.	While on Act. Ser. Absent from Roll call. 9:30 pm. to 9:50. 30-4-16 Admonished	Bramshott	1-5-16	Pt II D.O. #51
5-4-16	"	While on act. Ser. Failing to promptly carry out an order given to R.Co. 4 days. C.B.	Bramshott	3.5-16	Pt II D.O. #55
22.5.16	base to	T. O. S.	Shorncliffe	16.5.16	Pt II 143
15.2.17	"	Sold in proceeding order	"	15.2.17	46
21.2.17	C. A.	S, C, Pool, T, O, S, POOL	Field	16.2.17	PT. 1, 12
14.3.17	LASC Pool	Posted to 3rd Can Div Train	"	24.2.17	16

I.F.B. 103 CHECKED  
 23 FEB. 1917  
 WSR

# 511855 Davie James Lewis

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.				
16.3.17	3 <sup>rd</sup> Div. Sm.	S.O.S. as reinf. from b. & b. Pool Field		25.2.17	P# 18 (18)
3.5.18	Do.	S.O.S. to case. C. Dep.	Over Do.	26.4.18	case. C. D / DO. 12399.5-18. DO. 34.
22.11.18	casecd	on com. to 1 <sup>st</sup> . CCD.	.. Borden	15.11.18	P# 294.
18-12-18	BASE	TOPS			
18-12-18	BASE	TOPS from BASE Bd.	.. Witley	18-12-18	— 237.
21.12.18	casecd	leave on com. to 1 <sup>st</sup> . CCD & SOS to case Witley	.. Borden	18.12.18	— 319.
1-4-19	Casecd	S.O.S. to base Ripon	.. Witley	27-3-19	DO 77 S.O.S. to 9155 DO 82 d/7-4-19
7-7-19	base Bd	TOPS from O.D. Ripon	..	5-7-19	DO. 161
9.7.19	"	SOS to J. WINE	..	7-7-19	163 J. WINE 23 d/7-7-19
		To Canada		18-7.19	98- B-32
17.7.19	Joining	SOS to Canada HQ 98.	.. Witley	18.7.19	DO 33.



MEDICAL CASE SHEET.\*

No. in Admission and Discharge Book.	Regimental No.	Rank	Surname.	Christian Name.
	54855	Dew.	Davis	J.L.
Year		Unit		Age
				Service.
Station and Date.	Disease			
T1087				
Princess Patricia Canadian Coochen Camp	Red Cross Hospital, Bexhill			
5 - SEP 1914				
15 NOV 1918	Dose to duty J.W. Tommiller			

\* The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.  
(6365) W2944/P438 2,950,000 1/18 McA & W Ltd Forms/I. 1237/13 (E 2849) [P.T.O.]

Station  
and Date.

MEDICAL CASE SHEET.\*

FC

No. in Admission and Discharge Book.

Regimental No.

Rank.

Surname.

Christian Name.

54855

DW

Davie

James Lewis

Year 26 APR 1918

Unit.

Age.

Service.

3<sup>rd</sup> Band A. S. Co No 1 Co

45

2 3/12

Station and Date.

Disease accidental fracture of tibia simple.

20-4-18 Thrown from horse hurting of leg. In splints since.

Exam. Swelling & tenderness of right leg from knee to ankle. Tenderness & irregularity of skin 4 in. below patella apparent abnormal mobility here.

Patella to internal condyle Right 14 1/2 in  
" " " " " Left 15 1/2 "

Rx. Thomas splint in extension. X ray. Aug 1918 hit left knee. at times since has had locking of knee, freed by pushing down loose body from under inner side of patella.

Exam. Irregular hard movable body felt beneath skin to inner & lower side left patella.

27/4/18.

SKIAGRAPHIC REG. NO. 745 VOL 2

1-5-18

Xray shows fracture tibia Good position In on Thomas in coaptation splint & extension.

9-5-18

Extension painful. Strapping cutting in one place. cut away

20.5.18

Thomas' Extension splint taken off. Tole a light back splint

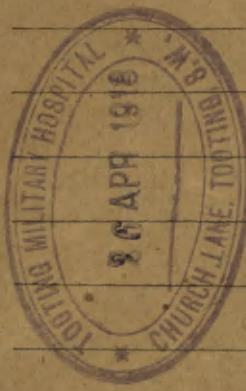
1-6-18

To get up. Will massage dept give treatment. FC

6-18

Manage wound for T. D. D.

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



Station  
and Date.

- 11. 6. 18. Back splint removed. To remain off.
- 15-6-18 Edema at night.  
Keep foot elevated as much possible.
- 21-6-18 To put some weight on foot while  
using crutches.
- 28. 6. 18 Making foot firmer. can bear some slight weight on  
limb now.
- 2. 7. 18. Seen T. Dyck
- 8. 7. 18 Discard crutches
- 11-7-18 Recommend transfer v m

Discharged Command P. Bromley  
16.7.18 BW

MASSEY-HARRIS CONVALESCENT HOSPITAL.

"KINGSWOOD" DULWICH.

LONDON, S.E. 17.7. 1918

Unsprung legament good states he  
has pain in tibia when he puts his weight on foot  
17.8.18. walking fairly well with stick. Rt knee is  
weak grating when walking.  
Transferred to Orpington.

Auxiliary

A R Perry Capt

MASSEY-HARRIS CONVALESCENT HOSPITAL.

"KINGSWOOD" DULWICH.

LONDON, S.E.

22-8. 18 to 16 ban, Gen. (Out) Hospital

27.8.18 some soreness and grating in Rt knee  
Requires stick to walk far.  
Transfer to No 16 ban Gen. (Out) Hospital  
Recommend Biii

A R Perry  
Capt

29.8.18 Recommended Transfer to C.H.

W St Dudley Capt  
C.M.C.

Div 2.

Report No. 237

Army Form W. 3212.

(In books of 100.)

511855

Regtl. No., Rank and Name Dr. Daniel J. S. Age 45 Corps Case

Disease \_\_\_\_\_ Hospital PPRC Hosp

To Officer i/c Laboratory. Ward 72 E.

Please carry out an examination of the accompanying specimen of Urine  
with special regard to \_\_\_\_\_

Nos. of previous Reports (if any) \_\_\_\_\_

In Pathological Reports a résumé of clinical history, treatment or progress since last report should be given.

Date 9-10-18

E. W. Connelly Cpt.  
O. i/c \_\_\_\_\_ Ward.

**LABORATORY REPORT.**

Color = Amber + Clear

S.G. = 1022

Litmus = Acid

Albumen = Neg

Sugar = Neg.

Date of Examination 3/10/18

E. W. Connelly Cpt.  
O. i/c Laboratory.

\_\_\_\_\_ Hospital \_\_\_\_\_

\_\_\_\_\_ Ward \_\_\_\_\_

\_\_\_\_\_

The accompanying report of the examining physician of \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

In the laboratory report a resume of clinical history, treatment or progress since last report should be given.

\_\_\_\_\_

### LABORATORY REPORT

Color \_\_\_\_\_

\_\_\_\_\_ 1055

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Date of Examination \_\_\_\_\_

\_\_\_\_\_

Reserved for M.H.C.

Regt. No. **511844** Rank **D<sup>2</sup>** Surname **DAYIE** Christian Name **JAMES LEWIS**  
 Unit or Corps—(a) Overseas from United Kingdom **3<sup>rd</sup> Div A.S.C.** (b) In United Kingdom **ASC**  
 Born at—Town **HALIFAX** County or Province **NOVASCOTIA** Country **CANADA**  
 Date of Birth—Day **12<sup>th</sup>** Month **JULY** Year **1873** Age **45** yrs. **3** months.  
 Joined at **HALIFAX** Date **12<sup>th</sup> JAN. 1916**  
 Former Trade or Occupation **DRIVER**

Permanent marks or peculiarities that will serve for future identification—  
**ONE VACCINATION MARK 1/2" DIAMETER LARM BELOW DELTOID**  
**BROW MOLE 2" ABOVE UMBILICUS**

Height—feet **5** inches **6 3/4** Colour of eyes **HAZLE**  
 Signature of Soldier (for identification purposes) *J. L. Davie*

**Medical Report.**

The answers to the questions below are to be filled in by the Officer in medical charge of the case. He will carefully discriminate between the soldier's unsupported statements and the evidence as recorded in the medical or other military documents bearing on the case. He will plainly state the existence of any of the disability prior to the soldier joining for the present war.

1. **DISABILITY** (State the actual disabling conditions as distinguished from the diseases or injuries from which they resulted).  
 (Follow the official nomenclature as far as possible.)

Group the disabilities, placing those resulting from separate causes in separate groups.

Disabilities Group (a) **FRACTURE TIBIA R**  
 Disabilities Group (b) **LOOSE CARTILAGE LEFT KNEE**  
 Disabilities Group (c) **NA**

2. **CAUSE OF DISABILITY.** (Follow the official nomenclature in stating the disease or injury.)

	Disease or injury to which the disability is due.	Place of origin.	Date of origin.
(i.) As to Group (a) above.	<b>THROWN FROM A HORSE</b>	<b>SOUCHEZ</b> <b>FRANCE</b>	<b>20.4.18</b>
(ii.) As to Group (b) above.	<b>SLIPPED ON WHEEL OF WAGON STRIKING KNEE ON TIRE</b>	<b>SHORNECLIFF</b>	<b>SEP 15 1917</b>
(iii.) As to Group (c) above.	<b>NA</b>		

NOTE.—By Active Service is meant Service with the Colours in Canada, United Kingdom, or elsewhere during the present war (since August 4th, 1914).

3. Is the disability due to disease contracted or injuries received prior to Active Service? **ALYES NO**  
 (i.) As to Group (a) above? **YES NO** If yes, has Active Service aggravated it? **NA**  
 (ii.) As to Group (b) above? **NA** If yes, has Active Service aggravated it? **NA.**  
 (iii.) As to Group (c) above? **NA** If yes, has Active Service aggravated it? **NA.**

4. Is the disability due to disease contracted or injuries received while on Active Service—  
 (i.) As to Group (a) above? **YES**  
 (ii.) As to Group (b) above? **YES**  
 (iii.) As to Group (c) above? **NA**

5. If a cause of disability was an injury received on Active Service, was it received -

- (i) While on duty? **YES**
- (ii) While off duty? **NA**
- (iii) Was a Court of Inquiry held? **NO**
- (iv) Where? **NA**
- (v) When? **NA**
- (vi) Opinion of the Court? **NA**

6. HISTORY OF THE CASE. (State concisely the essential points of the history, noting the entries made on the Medical History Sheet and other records).

#2 1-17 Mead to France and was injured 20<sup>th</sup> April 1918 by being thrown from a horse.  
 Was taken to 9<sup>th</sup> Cav. Field Ambulance and posted from there to 26 Genl. Hosp. Came then to Tooting Military Hosp. Then to Moseley Harris Convalescent Hospital, Delabury.

7. PRESENT CONDITION. (Give previous and present weight if likely to indicate progress of disability.)

Man looks well and is well nourished.  
 Complains of soreness in knee and leg in R. leg knee and finds difficulty in walking especially in going down hill. History of left knee generally.  
 Examination reveals irregularity across mid Right Tibia  
 X Ray shows that there was a simple fracture inner side of R. Tibia in good position.  
 Displacement of cartilage in left knee confirmed by M.N.S.  
 Other x-rays Negative  
 Urine Analysis Negative

8. OPERATION. (i) Was one performed?

- (i) Was one performed? **No**
- (ii) If so, state what. **NA**
- (iii) Was one advised and declined? **NA**

NOTE.—Loss of teeth on or immediately after Active Service should be attributed thereto unless there is evidence to the contrary.

9. (i) Is there loss or decay of teeth attributable to Active Service? **No**

(ii) If so, describe. **One filling required.**

10. DO YOU RECOMMEND:—

- (a) Fit for duty? **NA**
- (b) Fit for base duty? **B III NA likely to be raised in these terms**
- (c) Invalid to Canada? **NO**
- (d) Discharge from the Service as permanently unfit? **no**

Date of Report **2-19-18** 1918

Signed **Edmund Coffey**  
Officer in medical charge of case.

Station **Corden Bush**

I have satisfied myself of the general accuracy of the above Report, and concur therein \*except

**T. D. Boddell** (Officer i/c Hospital) Strike out one of these.  
**W. H. ...** (S.M.O. Private)

Dated at **Corden** Station, on **12/2/18** 1918

\* Delete if inapplicable.



Proceedings of a Medical Board on the Soldier mentioned in Part I.

Clear and decisive answers are to be given to all questions. Such terms as "may," "perhaps," "probably," "possibly," are not to be employed. Disability due to causes arising on Active Service is to be clearly shown in order that the Pensions Authorities may deal with the case properly.

11. Is the disability fully indicated in Part I. (1)? *Yes.*  
If not, indicate it.

12. Is the cause of the disability fully indicated in Part I. (2)?  
If not, indicate it. *Yes.*

13. Was the disability caused or aggravated by— (a) Negligence of the Soldier { Caused? *No*  
Aggravated? *No* (b) Misconduct of the Soldier { Caused? *No*  
Aggravated? *Yes*

14. THE ENTIRE DISABILITY.—Without regard to his regular occupation, to what extent is his capacity lessened at present for earning a full livelihood in the general market for untrained labour?  
(Estimate at none, 10%, 20%, 30%, 40%, 50%, 60%, 70%, 80%, 90%, or 100%.)  
*Not app*

15. THE PENSIONABLE DISABILITY.—see Part I. (3). Aggravation on Active Service of a disability existing previous to joining is to be included in the estimate.  
What part of the entire disability estimated next above in (14) is due to causes arising during Active Service?  
(Estimate at none, 1/5, 2/5, 3/5, 4/5, or all.)  
*Not app*

16. Permanency of the Pensionable Disability estimated next above in (15).  
(i.) Is it permanent? *Not app*  
(ii.) If not permanent, what is its probable minimum duration (in months)?

17. If an operation was advised and declined, do you consider the refusal to have been unreasonable? *Not app*

18. Remarks.  
*Right leg is swollen + oedematous over skin, especially about site of fracture. There is also considerable bowing of leg.*

19. Recommendation :—(a) Fit for duty? *No*  
(b) Fit for base duty? *Yes. But not likely to be raised in his class.*  
(c) Invalid to Canada? *No*  
(d) Discharge from service as permanently unfit? *No*

Classification for the Military Hospitals Commission

Date of Board *30-10-16*

Station *Coader*

Signatures of the Board  
*J. W. MacNeil, Capt. President.*  
*J. MacNeil, Capt.*

Approved *131 OCT 1918*

A.D.M.S. *W. Wallace*  
Station *for A.D.M.S., Canadians,*  
Captain, C.A.M.C. 191

Dated at *Bowford, Sussex.*

APPROVED

Proceedings of the Pensions and Claims Board on the Soldier mentioned in Part I.

The Pensions and Claims Board, Canadian Expeditionary Force, assembled at

on the \_\_\_\_\_ day of \_\_\_\_\_ 191\_\_\_\_\_

Members of the Board :—

\_\_\_\_\_

The Board having considered the evidence of the soldier marginally named, together with the documents submitted, recommend :—

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Classification for the  
Medical Hospital  
\_\_\_\_\_

Dated at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_ 191\_\_\_\_\_

*W. W. ...*

Signatures of  
the Board

President.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

II

PROCEEDINGS OF A MEDICAL BOARD.

Dated at Gooden 26-9-18 ~~1917~~

No. 511855 Rank Sr Name DAVIE J. L.

Local Unit A.S.C. sep. Overseas Unit 3 Can. Div. Train Age 45

Examination held at P. P. C. R. C. Hosp. Gooden.

DISABILITY.  
Overseas ~~---~~ FRACT. TIBIA R.  
(SCRATCH ONE OUT)

PRESENT CONDITION.

Man fully looks his age. Well dev & nourished.  
Exam. X ray shows simple fract. of R. Tibia. Position good. Some soreness over Callus. Fracture R. Knee marked. Displaced cartilage left knee confirmed by history. Other systems negative.  
Complaints - Pain in right leg on walking & locking of left knee occasionally.  
Overseas service 15 mos. Fract. accid. 20 April 18.

BOARD RECOMMENDS:-

- 1. Fit for Duty .....
- 2. Fit for duty after ..... weeks' physical training.
- 3. Fit for Temporary Base Duty ..... weeks
- 4. Fit for Permanent Base Duty .....
- 5. Discharge .....

BIII not likely to be used in 6 mos ✓

Signatures:-

G. P. Howlett major President.

Members

[Signature]

APPROVED

Dated 27-9-18 1917. [Signature] For A.D.M.S.

PROCEEDINGS OF A MEDICAL BOARD.

Date: October 26-1918  
Name: DAVIE V. L.  
Rank: 1st Lt.

Medical Unit: A. S. C. 2d. Inf. U.S. Army  
Examination held at: W. P. A. Hospital, Washington

DISABILITY: FRAC. TIBIA R.

PRESENT CONDITION

There is a well healed fracture of the right tibia, the fracture line is visible on the X-ray. There is a small amount of callus formation over the fracture. The patient is able to walk with the aid of crutches. There is no tenderness over the fracture. The patient is otherwise well.

- 1. Fit for duty
- 2. Fit for duty after \_\_\_\_\_ weeks physical training
- 3. Fit for temporary base duty \_\_\_\_\_ weeks
- 4. Fit for permanent base duty \_\_\_\_\_ weeks
- 5. Discharge

Board Members: \_\_\_\_\_  
President: \_\_\_\_\_

APPROVED: \_\_\_\_\_  
Date: \_\_\_\_\_  
For A. U. S.

(SERVICE AND CASUALTY FORM Part II).

Regiment or Corps 3<sup>rd</sup> D.T. C.E.F. Regimental Number 511855  
 \*Substantive Rank Qvr Surname Davie Christian Names James Lewis  
 \*Acting Rank \_\_\_\_\_  
 (\* To be entered in pencil to facilitate alteration.)

To be folded on this line.

Nothing to be written in this margin.

W 1889-PP1150 400,000 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					
9-5-18	Casced		TOS from 3 <sup>rd</sup> D.T.	Schiff	26 <sup>4</sup> / <sub>18</sub>	Pt 123.  Paarden FOR LT: COL: I/C RECORDS, C.O.M.F.
18-12-18			Ceases to be attached on proceeding to CASC Willey D.O.No. 344			18-12-18 Adjutant Canadian Command Depot
19-12-18	Casced		TOS from Casc Caps Depot	Witley	18-12-18	Part II 237
17-3-19	do	on command Witley to	Casc Ripon	do	17-3-19	Pt II 64. Shoreland Capt for oc. case.
1-7-19	BASE		R.O.S. to C.A.S.C. Corp Dept			
			Witley	Ripon	1-7-19	Pt 2 4745-79 Major, Commanding C.A.S.C. Ripon.

(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

Nothing to be written in this margin.

Wain's Sp. 9.1.10 26 Re aevol  
 Oil 1/2 mit Bloud and Sugar  
 10.10.10

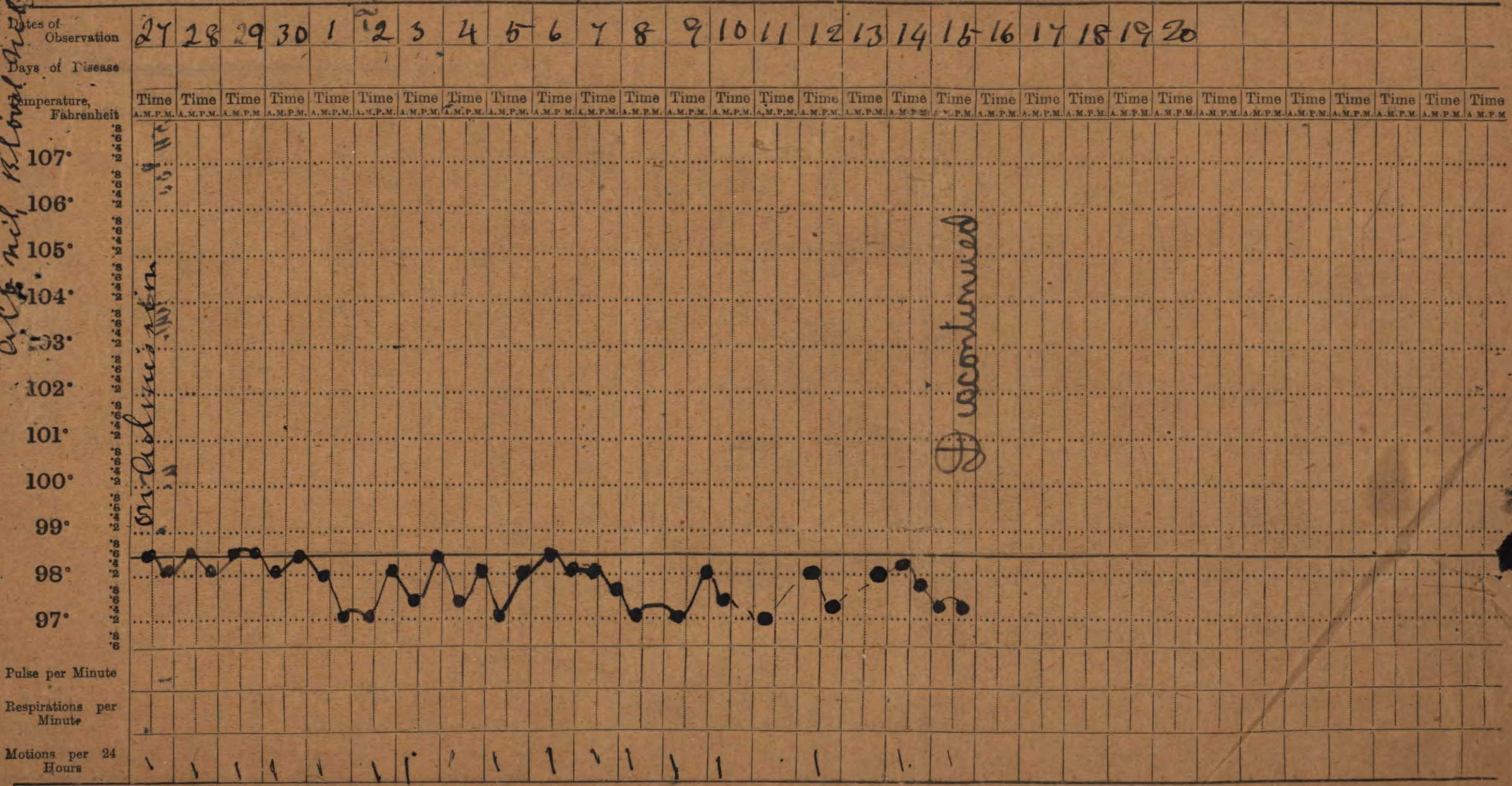
Corps 3<sup>rd</sup> Canadian Army 8 Co  
 No. 51755 Rank and Name Mr David J L

**CLINICAL CHART.**  
(To be attached to Case Sheet.)

Army Form B. 181.

Military Hospital Looleing  
 Age 45 Service 27 1/2

Disease \_\_\_\_\_ Date of admission 27-4-18 Date of discharge \_\_\_\_\_ Result \_\_\_\_\_



# CLINICAL CHART.

(To be attached to Case Sheet.)

Army Form B. 181.

Corps \_\_\_\_\_

Military Hospital \_\_\_\_\_

No. \_\_\_\_\_

Rank and Name \_\_\_\_\_

Age \_\_\_\_\_

Service \_\_\_\_\_

Disease \_\_\_\_\_

Date of admission \_\_\_\_\_

Date of discharge \_\_\_\_\_

Result \_\_\_\_\_

Dates of Observation																														
Days of Disease																														
Temperature, Fahrenheit	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	
	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.
107°																														
106°																														
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100°																														
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98°																														
97°																														
Pulse per Minute																														
Respirations per Minute																														
Motions per 24 Hours																														

Signature \_\_\_\_\_

In charge of case.