Officers.

# ATTESTATION PAPER.

No. 606

Folio. 234

## CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

## QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name? ..... Cranston Davidson
2. In what Town, Township or Parish, and in what Country were you born? ..... Calcutta India
3. What is the name of your next-of-kin? ..... Father J. H. S. Davidson
4. What is the address of your next-of-kin? ..... 744 Alexander Ave Wpg
5. What is the date of your birth? ..... 4th Nov. 1895
6. What is your Trade or Calling? ..... Linsmith
7. Are you married? ..... No
8. Are you willing to be vaccinated or re-vaccinated? ..... Yes
9. Do you now belong to the Active Militia? ..... Yes
10. Have you ever served in any Military Force? ..... 4 yrs 90th Rifles
    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

Released 8-1-16

C. Davidson. ..... (Signature of Man).

Drectolson ..... (Signature of Witness).

## DECLARATION TO BE MADE BY MAN ON ATTESTATION.

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

C. Davidson ..... (Signature of Recruit)

Date 21/9/ 1914. Drectolson ..... (Signature of Witness)

## OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, C Davidson, 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.

C. Davidson ..... (Signature of Recruit)

Date 21/9/ 1914. Drectolson ..... (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 Valcartier P.Q. this 21st day of September 1914.

J. T. O'Grady ..... (Signature of Justice)

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

J. T. O'Grady Lieut. ..... (Approving Officer)

100 M.—8-14.
H.Q. 1772-1-13.

8 batt.

# Description of Dawson, Cranston on Enlistment.

Apparent Age 20 years 10 months.
(To be determined according to the instructions given in the Regulation for Army Medical Services.)

Height 5 ft. 8 ins.

Chest measurement.
- Girth when fully expanded 33½ ins.
- Range of expansion 1½ ins.

Complexion Fair

Eyes Grey

Hair Dk Brown

Religious denominations.
- Church of England ✓
- Presbyterian
- Wesleyan
- Baptist or Congregationalist
- Other Protestants (Denomination to be stated.)
- Roman Catholic
- Jewish

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

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

2 Vacc L.
Scar L. wrist & knee.
" R. "
Wart middle finger

## 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 Sept 8th 1914.

Place Val Cartier

J D Urquhart Capt CAMC
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.

C Dawson 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.

(Signature of Officer)
Lieut

Date 24/9/ 1914.

REGIMENTAL DOCUMENTS

NAME Davidson, Cranston REGT. NO. [illegible] UNIT H. Q. FILE NO.

| | CONTENTS | DATE RECEIVED | TO WHOM FORWARDED | DATE FORWARDED | M. F. W. 2505 REFERENCE | NON-EFFECTIVE BY |
|---|---|---|---|---|---|---|
| 1 | ATTESTATION PAPER (M.F.W. 23, 133, or 51) | | | | 0 38 29 | 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.F.B. 263 or A.F.B. 120) | | | | | |
| | COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121) | | | | | |
| 1 | MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178) | | | | | DISCHARGE |
| | DENTAL HISTORY SHEET (M.F.B. 465) | | | | | Category |
| 3 | 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) | | | | | DESERTION |
| | 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) | | | | | |
| 1 | Casualty card | | | | | |
| 1 | Identity Card | | | | | |
| 23 | Letters | | | | | 1 |
| 1 | Envelope | | | | | 1-9 |
| | | | | | | 1-9 |
| | | | | | 404242 | |

Deceased 8-1-61

(8915)—Wt. W4862—540.—600,000.—9-14.—G. A. T. & S., Ltd. Forms B. 103/1.

Army Form B. 103.

# Casualty Form—Active Service.

8TH CANADIAN INFANTRY BATTN (SOUTH WALES)

Regiment or Corps

Regimental No. 666 Rank ~~Pte~~ Lieut Name Cranston Davidson G. T.

Enlisted (a) ~~22/9/14~~ Terms of Service (a) duration Service reckons from (a) ~~22/9/14~~ 2/9/14

Date of promotion to present rank ~~22/9/14~~ 3.10.15 Date of appointment to lance rank — Numerical position on roll of N.C.Os. 7

Extended — Re-engaged — Qualification (b)

W. S. B. CLASS A

| Report: Date | Report: From whom received | Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B, 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case. | Place | Date | Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents. |
|---|---|---|---|---|---|
| 12-2-15 | 8th Bn | Joined in France | Field | 12-2-15 | N.R. of Admiralty |
| 7.8.15. | O.C. 8 Bn. | Promoted sergt. | Field | 26.3.15. | B213. |
| 17.8.15. | 1st Can. Div. | Selected to attend cadet school. 6/10/15. | with unit | 17.8.15. | AQ259 |
| 27.9.15. | A.G. British army in Fld. | To pass out of cadet school 3/10/15 & posted to 8 Bn. Granted Temporary Commission as Lieutenant | Cadet school | 2.10.15. | A/1186/268. |
| | | | | 3.10.15. | List 50 Appointments commissions & Rewards. |
| 14.10.15. | London Gazette. | To be Temp. Lieutenant | 8 Bn. | 3.10.15. | London Gazette. |
| 6/11/15 | 8th Bn. | Rejoined unit | 8 Bn. | 1/11/15 | B213. |
| 8/1/16 | 8 Bn | on leave | | 6/1/16 | B213 |
| ~~29~~/1/16 | 8 Bn | To M. G. school for course | | 22/1/16 | B213. AQ. 247. |
| 12/2/16 | 8 Bn | Returned from school | | 2/2/16 | B213. AQ 253. |
| 24-3-16 | Base Records | Struck initial "C" | — | — | 101/Inf/8/12 N.R. |
| 6-5-16 | 8th Bn | Granted 7 days leave | England | 3-5-16 | B213. Pt. 2. Ord 20. 14-5-16 |
| 15-6-16 | A. 4, 1 H.Q. | Wounded | Field 13 Mil. Sqn. 21 | 15-6-16 | List 653 O.C.S. 322. |
| 17-6-16 | 14 G.H. | G.S.W. L. arm, leg & buttock - sev. | 14 G. H. | 16-6-16 | Sheet 393. Cowles. |

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

P.T.O.

| Report | | Record of promotions reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case. | Place | Date | Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents. |
|---|---|---|---|---|---|
| Date | From whom received | | | | |
| 17-6-16. | Hosp Ship | G.S.W.L.arm. - Adm. | Newhaven | 17-6-16 | A36.- w3083 Pt. 2 Orders No 26 d/30-6-16. A Lockhart LIEUT. FOR LT COL. A.A.G. |
| | G.O.C C.T.D. | Posted to Gen. List. | | 17.6.16. | D.O. 3329. J. Burnham MAJOR, FOR COL. I/c RECORDS, C.E.F. |
| 16-1-17. | A.G. Can: B.I. | Attached to Canadian Command Depot. | Hastings | 13-1-17. | For COL. I/c RECORDS; C.E.F. A.G.O 146. John Wordsworth. For Director of Personal Service C.E.F. |
| 28.9.17 | C/o C.T.S. | Attached C.T.S. from In R.P. | Bexhill | 27.9.17 | C/0166 Pt II |
| 13.3.18 | C/o C.T.S. | To be Asst. Instructor at C.T.S. | Bexhill. | 12.10.17 | Pt II. D/o 61. Auth. H.C.R.O. No 3695: d/12.3.18. |
| 27.3.18 | C/o C.T.S. | Seconded for duty from N.R.D. | Bexhill. | 12.10.17 | Pt II D/o 73 Auth. H.C.R.O. No 3732. of 26.3.18. |
| 8.7.18 | C/o C.T.S. | To be Asst.-Adjt. C.T.S., from an Asst. Instructor. | Bexhill cancelled D/o 239 | 14.5.18. | Pt. II. D/o 157. HCRO 4775: 10/7/18 Auth. H.C.R.O. No. 4301 d/5.7.18. |
| 27.11.18 | " " | Ceases to be Asst-Instr. | " " | 15.11.18 | D/o 279. HCRO 4828. 25/11/18. |
| 2.12.18 | " " | Ceases to be Seconded to C.T.S. | " " | 15.11.18 | D/o 283 HCRO 4906. d/30/11/18. A. W. Tyson Capt Asst. Adj Canadian Training School. |

LIEUT

# MEDICAL HISTORY SHEET. 237

Surname Davidson · Christian Name Branston Regt no. [illegible]

Examined { on 8 day of Sept. 1914 / at Valcartier Camp.

Birthplace { City or Town Calcutta India / County

Apparent age 20 yrs 10 mths.

Trade or occupation Dynamiter

Height 5 Feet 9 Inches.

Weight Lbs.

Chest measurement { Minimum 32 inches. / Maximum expansion 33½ inches.

Physical development 1½

Small-Pox Marks —

Vaccination Marks { Arm Right. — Left. / Number — 2

When Vaccinated last 1908

(a) Marks indicating congenital peculiarities or previous disease Scar L. wrist & Knee.
Scar R. wrist. Wart little finger

(b) Slight defects but not sufficient to cause rejection

Approved by G L Mathewson

Rank Maj M.O. 90th Bty

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

| Date | Result | Vaccinations. |
|---|---|---|
| | | M.O. |
| | | M.O. |
| | | M.O. |

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

Enlisted on 21 day of Sept. 1914 at V-Cartier

| | Corps. | Regt'l Number. | Habits. | Date. |
|---|---|---|---|---|
| Joined on enlistment | | | | |
| Transferred to..... | 8th Bn. | 606 Lieut | | 25 |

## EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

| Station. | Date. | Disease. | Result. |
|---|---|---|---|
| Bexhill | Nov 17/17 | Syph Chancre | 6 months Home Service |
| Bexhill | 29-5-18 | " " | T. J. Graham Capt. R.A.M.C. (T.F.) Fit for Home Service |
| Bexhill | 2.10.18 | do | Gen. Service Invalided Copy |
| Bexhill | 11/4/19 | " " | Before three months |

N. B.—This sheet to be disposed of in accordance with instructions in the Regulations for Army Medical Service, on the man becoming non-effective; the date and cause being stated on next page.

M. F. B. 313.

50M—8-14.
H. Q. 1772—39—439.

Entries in Red Ink made from Attestation Sheets. R M Shaw

JUN 11 1915 for D. D. M. S.

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

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

SD 113

**CONFIDENTIAL.** Army Form A. 45.

PROCEEDINGS OF A MEDICAL BOARD

assembled at Hastings on 15-X-17

by order of D.A.D.M.S. Canadians, Seaford.

for the purpose of examining and reporting upon the present state of health of

(Rank and Name) Lieut. Davidson, C.T. (Corps) 8th Bn. 4th C.T.S.

Age 22 Service 3 8/12 Disability G.S.W. Arm. L.

Date of commencement of leave granted for present disability 2nd Dec. 1916.

Date on which placed on half-pay for present disability

The Board having assembled pursuant to order, and having read the instructions on the back of the form, proceed to examine the above-named officer and find that

there is very little change in condition of this officer's left arm and hand - There is the same loss of power of left hand, with atrophy and limitation of movement - He complains very much of pain in hand and arm - Left radial pulse still almost imperceptible -

The Board will classify the officer under one of the following categories, the probable period of unfitness for the higher categories being stated.

1. Fit for General Service — no - two months -
2. Fit for service in a Garrison or Labour Battalion abroad. *No officer likely to be fit for general service within six months should be classed in this category* — no - two months -
3. Fit for Home Service — yes - two months
4. Fit for Light Duty at Home — not applicable -
5. Requiring indoor hospital treatment—
   (a.) In an Officers' Hospital
   (b.) In an Officers' Convalescent Hospital
6. (a.) Fit for light duty at a Command Depôt
   (b.) Fit for treatment only at a Command Depôt
7. In very special cases such as tuberculosis leave not exceeding six months may be recommended by Medical Boards for special treatment, the Board giving detailed reasons for any such recommendation
8. Was the disability contracted in the service? — yes -
9. Was it contracted under circumstances over which he had no control? — yes -
10. Was it caused by military service? — yes -
11. If caused by military service, to what specific military conditions is it attributed? — G.S.W. - in action -
12. If the disability was not caused by military service, was it aggravated thereby, and if so, by what specific military conditions? — not applicable -

I concur in the findings of the Board of Medical Officers here recorded.

Captain, D.A.D.M.S. for D.M.S. Canadians.

Officer's Address: H.Q. C.T.S. Bexhill -

Signatures: Lieutenant Colonel, President. E. McReich Capt. C.A.M.C., Members.

[P.T.O.

# INSTRUCTIONS.

1. On the occasion of an Officer's first appearance before a Medical Board for his present disability, the circumstances under which the disability was contracted will be fully detailed; whenever possible a statement of the case by his medical attendant will also be attached.

2. In recording the proceedings of subsequent Boards, the progress of the individual since his last appearance will be clearly and concisely stated so as to ensure a continuous medical history of the case being available.

3. Enteric Fever, Dysentery, Malaria, etc., contracted when on service abroad, in countries where there is a special liability to the disease, are to be regarded as caused by military service.

[168] Wt. W.4955—M.2449. 100,000. 7/17. V. & S., Ltd.

Military address - c/o A.P.M. 44 Swanspit Sq E
Basic address - 2-4 Salenspit Place - Hastings

CONFIDENTIAL. Army Form A. 45.

8 D 113

PROCEEDINGS OF A MEDICAL BOARD

assembled at Hastings on 14/8/17

by order of A.A.M.S. Canadians. Hastings

for the purpose of examining and reporting upon the present state of health of

(Rank and Name) Lieut G.T. Davidson (Corps) 8th Batt.

Age 22 Service 36/12 Disability G.S.W. Left Arm.

Date of commencement of leave granted for present disability 2nd Dec - 1916

Date on which placed on half-pay for present disability

The Board having assembled pursuant to order, and having read the instructions on the back of the form, proceed to examine the above-named officer and find that

the condition of this Officers arm and hand is about the same as at time of last board. Tenderness over area of scar at elbow & pain on full extension of arm. Lessened power of grip in left hand and inability to fully flex index finger. Considerable atrophy of muscles of left hand, decreased sensation - gets cold easily - pulse small.

The opinion of the Board upon the questions herein is as follows:—

(1.) a. Is the officer fit for "General Service"? No

b. If not so fit, how long is he likely to be unfit? Two months.

(2.) a. *If unfit for General Service, is he fit for service at home?* yes

b. *If not so fit, how long is he likely to be unfit for service at home?* Not applicable

c. *If unfit for General Service at home, is he fit for light duty at home?* Not applicable

d. *If not so fit, how long is he likely to be unfit for light duty at home?* Not applicable

(3.) Was the disability contracted in the service? yes

(4.) Was it contracted under circumstances over which he had no control? yes

(5.) Was it caused by military service? yes.

(6.) If caused by military service, to what specific conditions is it attributed? G.S.W. in action.

(7.) If the disability was not caused by military service, was it aggravated by it? Not applicable

Signatures { Recommended Capt Canada, President.
J.M. McKay Capt CAMC
I concur in the opinion of the Board of Medical Officers here recorded. Members.
G.T. Tennent Captain, D.A.D.M.S. for Canadians, D.M.S.

(1)

Man

## Instructions.

1. On the occasion of an Officer's first appearance before a Medical Board for his present disability, the circumstances under which the disability was contracted will be fully detailed; whenever possible a statement of the case by his medical attendant will also be attached.

2. In recording the proceedings of subsequent Boards, the progress of the individual since his last appearance will be clearly and concisely stated so as to ensure a continuous medical history of the case being available.

3. Enteric Fever, Dysentery, Malaria, etc., contracted when on service abroad, in countries where there is a special liability to the disease, are to be regarded as caused by military service.

CONFIDENTIAL. Army Form A. 45.

CENTRAL REGISTRY. RECORDS BRANCH MAY 18 1917

9 D 113

## PROCEEDINGS OF A MEDICAL BOARD

assembled at Hastings on 16/5/17

by order of A.D.M.S Canadians Hastings

for the purpose of examining and reporting upon the present state of health of

(Rank and Name) Lt Davidson. C.J. (Corps) 8th Batt

Age 22 Service 3 0/12 Disability G.S.W Left Arm.

Date of commencement of leave granted for present disability 2/12/16

Date on which placed on half-pay for present disability

Address c/o A.P.M. Hastings
or 24 Cranfield Place, Hastings

The Board having assembled pursuant to order, and having read the instructions on the back of the form, proceed to examine the above-named officer and find that

There is a slight improvement in the condition of this Officers Limb. There is impaired sensation in index & middle fingers & inability to fully flex same. Pain in elbow upon full extention. Muscles of Left hand & forearm lack tone. Pulse at wrist barely perceptible. Circulation in Left Limb deficient

The opinion of the Board upon the questions herein is as follows:—

(1.) *a.* Is the officer fit for "General Service"? no

*b.* If not so fit, how long is he likely to be unfit? One month

(2.) *a.* *If unfit for General Service, is he fit for service at home?* Yes

*b.* *If not so fit, how long is he likely to be unfit for service at home?* Not applicable

*c.* *If unfit for General Service at home, is he fit for light duty at home?* Not applicable

*d.* *If not so fit, how long is he likely to be unfit for light duty at home?* Not applicable

(3.) Was the disability contracted in the service? Yes

(4.) Was it contracted under circumstances over which he had no control? Yes

(5.) Was it caused by military service? Yes

(6.) If caused by military service, to what specific conditions is it attributed? G.S.W in action

(7.) If the disability was not caused by military service, was it aggravated by it? Not applicable

Signatures { J Hamilton Lt Col I.M.S. President.
A.H. Hong Capt I.M.S. Members.
Capt I.M.S. Members. }

I concur in the finding of the Board of Medical Officers here recorded.
A. Dalton Lt Col A.D.M.S. Invaliding Officer for D.M.S. Canadian Contingents.

S.L. (A) HQ Hastings Albert

## Instructions.

1. On the occasion of an Officer's first appearance before a Medical Board for his present disability, the circumstances under which the disability was contracted will be fully detailed; whenever possible a statement of the case by his medical attendant will also be attached.

2. In recording the proceedings of subsequent Boards, the progress of the individual since his last appearance will be clearly and concisely stated so as to ensure a continuous medical history of the case being available.

3. Enteric Fever, Dysentery, Malaria, etc., contracted when on service abroad, in countries where there is a special liability to the disease, are to be regarded as caused by military service.

8. D. 113

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CONFIDENTIAL. Army Form A. 45.

# PROCEEDINGS OF A MEDICAL BOARD

assembled at Hastings on 16/4/17

by order of A.D.M.S. Canadians

for the purpose of examining and reporting upon the present state of health of

(Rank and Name) Lieut C. I Davidson (Corps) 8th Battn

Age 22 Service 2/12 Disability G.S.W. Lft Arm

Date of commencement of leave granted for present disability 2/12/16

Date on which placed on half-pay for present disability ———

The Board having assembled pursuant to order, and having read the instructions on the back of the form, proceed to examine the above-named officer and find that

this is improvement in finger condition, but circulation in hand still deficient

25

The opinion of the Board upon the questions herein is as follows:—

(1.) *a.* Is the officer fit for "General Service"? No

*b.* If not so fit, how long is he likely to be unfit? One month

(2.) *a.* *If unfit for General Service, is he fit for service at home?* yes

*b.* *If not so fit, how long is he likely to be unfit for service at home?* ———

*c.* *If unfit for General Service at home, is he fit for light duty at home?* ———

*d.* *If not so fit, how long is he likely to be unfit for light duty at home?* ———

(3.) Was the disability contracted in the service? yes

(4.) Was it contracted under circumstances over which he had no control? yes

(5.) Was it caused by military service? yes

(6.) If caused by military service, to what specific conditions is it attributed? G.S.W. in action

(7.) If the disability was not caused by military service, was it aggravated by it? Not applicable

Signatures { W. Goodwill Major President.
D. Mullin Capt.
Major R.A.M.C. Members.
Capt. D.M.S.
for D.M.S. Canadian Contingents. }

I concur in the opinion of the Medical Officers.

Officer in charge of Records.

Gen List (A.H.Q. Hastings) Noted.



Forms A.45 37

X 518. W15367/M1383. 350m. 2/17. D.P.W.

## Instructions.

1. On the occasion of an Officer's first appearance before a Medical Board for his present disability, the circumstances under which the disability was contracted will be fully detailed; whenever possible a statement of the case by his medical attendant will also be attached.

2. In recording the proceedings of subsequent Boards, the progress of the individual since his last appearance will be clearly and concisely stated so as to ensure a continuous medical history of the case being available.

3. Enteric Fever, Dysentery, Malaria, etc., contracted when on service abroad, in countries where there is a special liability to the disease, are to be regarded as caused by military service.

CONFIDENTIAL. Ag. 8-D-113 Army Form A. 45

# PROCEEDINGS OF A MEDICAL BOARD

assembled at Hastings on 15-2-17

by order of A.D.M.S. Canadians

for the purpose of examining and reporting upon the present state of health of

(Rank and Name) Lieut. C.T. Davidson (Corps) 8 Bn

Age 22 Service 2 7/12 Disability G.S.W. Lt. Arm.

Date of commencement of leave granted for present disability 2-12-16.

Date on which placed on half-pay for present disability

The Board having assembled pursuant to order, and having read the instructions on the back of the form, proceed to examine the above-named officer and find that

the scar is still tender. and, loss of Sensation partial in thumb. 1st & 2nd fingers. Inability to flex index finger more than fifty percent. Impossible to extend index finger fully. Pain on flexion and hyper extension of fore arm.

C.A.P.M. Canadian Hastings.

25

The opinion of the Board upon the questions herein is as follows:—

(1.) *a.* Is the officer fit for "General Service"? No

*b.* If not so fit, how long is he likely to be unfit? 1 mo.

(2.) *a. If unfit for General Service, is he fit for service at home?* yes.

*b. If not so fit, how long is he likely to be unfit for service at home?* –

*c. If unfit for General Service at home, is he fit for light duty at home?* –

*d. If not so fit, how long is he likely to be unfit for light duty at home?* –

(3.) Was the disability contracted in the service? yes.

(4.) Was it contracted under circumstances over which he had no control? yes

(5.) Was it caused by military service? yes.

(6.) If caused by military service, to what specific conditions is it attributed? G.S.W.

(7.) If the disability was not caused by military service, was it aggravated by it? Not applicable

Signatures Ironside Lieut-Col President.

I concur in the finding of the Board of Medical Officers here recorded. Capt Salmond

Major, D.A.D.M.S. for Members.

Canad...

(Base Depot)

(5725.) W.16789/M260. 200M. 2/16. C. P., Ltd. Forms A.45 26

(139.) W.5373/M726. 200M. 8/16.

[P.T.O.

## Instructions.

1. On the occasion of an Officer's first appearance before a Medical Board for his present disability, the circumstances under which the disability was contracted will be fully detailed; whenever possible a statement of the case by his medical attendant will also be attached.

2. In recording the proceedings of subsequent Boards, the progress of the individual since his last appearance will be clearly and concisely stated so as to ensure a continuous medical history of the case being available.

3. Enteric Fever, Dysentery, Malaria, etc., contracted when on service abroad, in countries where there is a special liability to the disease, are to be regarded as caused by military service.

3755

15 MAR 1917

CONFIDENTIAL.

A48-A-113

Army Form A. 45.

## PROCEEDINGS OF A MEDICAL BOARD

assembled at Hastings on March 15th/17.

by order of A.D.M.S. Canadians.

for the purpose of examining and reporting upon the present state of health of

(Rank and Name) Lieut. C. T. Davidson (Corps) 8th.

Age 21. Service 2 8/12 Disability G. S. W. Lt Arm.

Date of commencement of leave granted for present disability 2/12/16.

Date on which placed on half-pay for present disability _____

The Board having assembled pursuant to order, and having read the instructions on the back of the form, proceed to examine the above-named officer and find that

This Officers Arm has improved somewhat But there is still inability to flex index finger, loss of muscular power & Sensation. He has pain upon full extention of Elbo. There is diminution of Pulse on Lt Arm due to operation Brachial Artery

25

The opinion of the Board upon the questions herein is as follows:—

(1.) *a.* Is the officer fit for "General Service"? no

*b.* If not so fit, how long is he likely to be unfit? one month

(2.) *a. If unfit for General Service, is he fit for service at home?* yes.

*b. If not so fit, how long is he likely to be unfit for service at home?* not applicable

*c. If unfit for General Service at home, is he fit for light duty at home?* not applicable

*d. If not so fit, how long is he likely to be unfit for light duty at home?* not applicable

(3.) Was the disability contracted in the service? yes.

(4.) Was it contracted under circumstances over which he had no control? yes.

(5.) Was it caused by military service? yes.

(6.) If caused by military service, to what specific conditions is it attributed? G S W in action.

(7.) If the disability was not caused by military service, was it aggravated by it? not applicable

Signatures { Wakefield Major President. / D Brazier Capt. Member. / _____ Members. }

I concur in the findings of the Board of Medical Officers here recorded.

Major D.M.S. Canadian Contingents.

Invaliding

(5725) W.16789/M260. 200M. 2/16. C. P., Ltd. Forms A.45 27

(436.) W.11059/M1135. 50M. 12/16

[P.T.O.

## Instructions.

1. On the occasion of an Officer's first appearance before a Medical Board for his present disability, the circumstances under which the disability was contracted will be fully detailed; whenever possible a statement of the case by his medical attendant will also be attached.

2. In recording the proceedings of subsequent Boards, the progress of the individual since his last appearance will be clearly and concisely stated so as to ensure a continuous medical history of the case being available.

3. Enteric Fever, Dysentery, Malaria, etc., contracted when on service abroad, in countries where there is a special liability to the disease, are to be regarded as caused by military service.

D.M.S.
10-D-421

8D113

CONFIDENTIAL. Army Form A. 45.

PROCEEDINGS OF A MEDICAL BOARD

assembled at 86 Strand on 13-1-17

by order of A.D.M.S. London Area

for the purpose of examining and reporting upon the present state of health of

(Rank and Name) Lt. C.T. Davidson (Corps) 8th Bn

Age 22 Service 2 6/12 Disability G.S.W. left arm

Date of commencement of leave granted for present disability 2-12-16

Date on which placed on half-pay for present disability

The Board having assembled pursuant to order, and having read the instructions on the back of the form, proceed to examine the above-named officer and find that he has improved considerably but there is yet some loss of movement & anaesthesia of median nerve side of the left hand. Board recommend as below.

25

174 Willesdane Lane
Brondesbury N.W.

The opinion of the Board upon the questions herein is as follows:—

(1.) *a.* Is the officer fit for "General Service"? No

*b.* If not so fit, how long is he likely to be unfit? 1 month

(2.) *a. If unfit for General Service, is he fit for service at home?* yes

*b. If not so fit, how long is he likely to be unfit for service at home?*

*c. If unfit for General Service at home, is he fit for light duty at home?*

*d. If not so fit, how long is he likely to be unfit for light duty at home?*

(3.) Was the disability contracted in the service? yes

(4.) Was it contracted under circumstances over which he had no control? yes

(5.) Was it caused by military service? yes

(6.) If caused by military service, to what specific conditions is it attributed? G.S.W.

(7.) If the disability was not caused by military service, was it aggravated by it? Not applicable

I concur in the findings of the Board of Medical Officers here recorded.
Captain, D.A.D.M.S.
for D.D.M.S.
Canadians, England.

Command Depot

Signatures { David Donald Major RAMC President.
Brown Maj RAMC
Wm Davis Capt RAMC } Members.

W.16789/M260. 200m. 2/16. C. P., Ltd. Forms A.45 27
W.11089/M1135. 50m. 12/16.

[P.T.O.

## Instructions.

1. On the occasion of an Officer's first appearance before a Medical Board for his present disability, the circumstances under which the disability was contracted will be fully detailed; whenever possible a statement of the case by his medical attendant will also be attached.

2. In recording the proceedings of subsequent Boards, the progress of the individual since his last appearance will be clearly and concisely stated so as to ensure a continuous medical history of the case being available.

3. Enteric Fever, Dysentery, Malaria, etc., contracted when on service abroad, in countries where there is a special liability to the disease, are to be regarded as caused by military service.

(4 8 78) W 10527—4 100,000 10/15 H W V(P 1119) Forms A. 45A 12
17379—309 60,000 2/16

Army Form A. 45A.

Confidential.

To be used in cases of wounds or injuries received in action.

(For instructions for preparing this report see back of form.)

PROCEEDINGS OF A MEDICAL BOARD assembled by order of D.D.M.S. Canadians

for the purpose of examining and reporting on the present state of a wound or injury sustained by Lieut. Davidson, C. 8th Battalion

at (Place of injury) Ypres on the (Date of injury) 14-6-16

The Board find that this Officer suffered from G.S.W. of left upper arm in France. Admitted to No. 14 General Hospital 15-6-16. Discharged to England to Royal Free Hospital 17-6-16. ¼" drain middle third left upper arm on inner aspect. To small wounds on outer aspect at junction of middle and lower third left upper arm. Developed aneurism of Brachial artery Legated 18-7-16. 12-8-16 wounds healed. Sent to Convalescent Home, Putney Hill. M.O. in charge there states that he is suffering from loss of power of three outer fingers of left hand. Has had massage and Electric treatment and is much imppoved. Still little power in fingers.

The opinion of the Board upon the questions below is as follows:—

| | Replies | | |
|---|---|---|---|
| | As to first wound | As to second wound (if any) | As to third wound (if any) |
| 1.—Has the officer lost an eye or a limb; or has he permanently lost the use of an eye or a limb; or is the injury equivalent to the loss of a limb, and permanent, or likely to be permanent? (Articles 639 to 644 of the Royal Warrant for Pay, &c.) | No | | |
| 2.—If the case does not come under the category of 1:— (a) Was the injury, in the first instance, very severe in character? | No | | |
| (b) Are its effects still very severe? | No | | |
| 3.—If the case is classified under category 2, are the effects of the injury permanent, or likely to be permanent? (Article 646.) | Not applicable | | |
| 4.—Injuries that do not come under the above categories should be classified here, making use of the following terms:—*severe* or *slight* and *permanent* or *not permanent*, as the case may be. | Severe - not permanent | | |
| 5.—For what period, calculated from the date of the wound or injury, is it probable that the officer will be incapacitated for military duty by such wound or injury? | 7 months. | | |

25

I concur in the findings of the Board of Medical Officers here recorded.

W Macdonald
Captain, C.A.M.C.
For D.M.S.
Canadian Contingent.

Signatures: David Donald, Maj. CAMC,
G. M. Davis, Capt, CAMC.
G. O. Taylor, Capt, CAMC.

Station 86 Strand. London,

Date 2 To 16

4 DEC 1916

[P.T.O.

## INSTRUCTIONS to be observed by the Medical Board preparing the Report.

---

1. On the occasion of an officer's first appearance before a medical board, the circumstances under which the wound or injury was sustained will be fully detailed.

2. If the injuries be more than one, they should be numbered and described separately; and should it be considered that, though only "severe" or "slight" in themselves, they represent together the equivalent of a single 'very severe" injury, such an opinion may be expressed in the columns provided for that purpose.

3. The board will not express any opinion, either to the Officer examined, or in their report, as to whether he is entitled to compensation, or as to the amount of it, nor will it inform the Officer how the wound or injury has been classified.

CONFIDENTIAL. Army Form A. 49.

# MEDICAL BOARD REPORT ON A DISABLED OFFICER.

(ALSO TO BE USED FOR DISABLED NURSES.)

Station BEXHILL.

Date 2-10-18

1. Rank and Name Lieut DAVIDSON, GRANSTON TAYLOR.
2. Unit C.T.S. M.R.D.
3. Age 23 4. Total Service 4 9/12 War Service (a) at home 2/12 (b) abroad 4 7/12 (In France
5. Address ~~C.C.C.~~ C.T.S. BEXHILL.

STATEMENT OF CASE.

NOTE.—In answering the following questions the Board will carefully discriminate between the officer's statements and evidence recorded in his medical documents. When possible, a statement by his medical attendant should be attached.

6. Disability G.S.W. ARM. L.
7. Date of origin of disability 13-6-16
8. Place of origin of disability France
9. Give concisely the essential facts bearing on the history of the disability (personal and family history, etc.) :—

NOTE.—Boards subsequent to the first should record here the progress of the case since the officer's last appearance.

Wounded as above.
Boarded 12-11-17 and given C1 six months.
Boarded 29-5-18 and given C1 four months.
Says his arm is weaker than normal, but except for some susceptibility to cold hand does not cause much trouble.

I concur in the findings of the Board of Medical Officers here recorded.

Major, D.A.D.M.S.
for D.M.S.
Canadian Contingent

OPINION OF THE MEDICAL BOARD.

NOTES.—(i) **The Board will on no account inform the officer of its opinion on any of the following questions.**
(ii.) Clear and decisive answers should be filled in by the Board to enable the Pensions Commission to come to a reliable decision on the officer's claim to pension, etc.
(iii.) Expressions such as "may," "might," "probably" should be avoided, if possible.
(iv.) When there is more than one disability the replies will distinguish between them.

10. Was the disability contracted (a) before entering the service? No.
(b) in the service? Yes.
11. Was it attributable to military service? Yes.
If so, to what specific military conditions is it attributed? G.S.W. [illegible] France

[Enteric Fever, Dysentery, Malaria, &c., contracted on service in countries where there is a special liability to the disease are to be regarded as attributable to military service.]

12. If not attributable to, was it aggravated by, military service? Not app.
If so, by what specific military conditions? Not app.

13. Is it attributable to, or aggravated by, the officer's own negligence or misconduct? If so, in what way, and to what extent? No.

P.T.O.

14. What is the officer's present condition? General condition good. Heart, lungs & other organs normal. Ann L. - Scars on lower ⅓ arm both anteriorly & posteriorly no adhesions & no limitation of movement of elbow. Slightly lessened hand grip, but not now a disability. He is now considered fit for General service.

15. To what degree is the officer disabled at the present time? Nil.
(Degrees of disablement should be expressed in the following percentages—100, 80, 70, 60, 50, 40, 30, 20, under 20, or nil.)

16. Is the disability permanent? No.

17. If not permanent, how soon is re-examination recommended? Not app. months.

18. Is it necessary that the officer should be re-examined by the same Board? No.

19. What treatment is the officer receiving, and where, and from whom? None

20. Is the officer in need of special medical treatment of any kind, and, if so, of what nature? No.

21. Does the officer require the constant attendance of another person? No.

22. Officers will be classified by the Medical Board under one of the following categories, the probable period of unfitness for the higher categories being stated. Explanation of these categories is in para. 5 of A.C.I. 158/1918. In case of nurses, omit B. and (i) and (ii) of E.

A.—Fit for general service Yes.

B.—Fit for service in a garrison or labour unit abroad

C.—Fit for home service:—
(i) Active duty with troops

(ii) Sedentary employment only

D.—For admission to a command depot

E.—Requiring indoor hospital treatment:—
(i) In an officers' military or auxiliary convalescent hospital

(ii) In an officers' hospital

F.—Permanently unfit for any further military service

23. In the case of officers suffering from neurasthenia found permanently unfit, has A.C.I. 307 of 1918 been complied with?

J. W. MacNeil Capt President.
A. J. Martin Capt
J. W. Nichol, Capt Members.

343. W3035/1166. 29. 6. 18. Wh. P. 250,000 E.3410.

**CONFIDENTIAL.** Army Form A 45.

# MEDICAL BOARD REPORT ON A DISABLED OFFICER.

**(ALSO TO BE USED FOR DISABLED NURSES.)**

Station Bexhill

Date May 29-18

1. Rank and Name Lt Davidson Cranston Taylor.
2. Unit C.T.S. M.R.D.
3. Age 23 4. Total Service 45/12 War Service (a) at home 2/12 (b) abroad 43/12
5. Address C.T.S. Bexhill

STATEMENT OF CASE.

NOTE.—In answering the following questions the Board will carefully discriminate between the officer's statements and evidence recorded in his medical documents. When possible, a statement by his medical attendant should be attached.

6. Disability G.S.W. Left Arm.
7. Date of origin of disability June 13th 1916
8. Place of origin of disability France.
9. Give concisely the essential facts bearing on the history of the disability (personal and family history, etc.) :—

NOTE.—Boards subsequent to the first should record here the progress of the case since the officer's last appearance.

This officer received G.S.W. left arm in France 1916. This has left considerable weakness in power of left hand.

I concur in the findings of the Board of Medical Officers here recorded.

D.M.S.

For D.M.S. Canadian Contingents.

OPINION OF THE MEDICAL BOARD.

NOTES.—(i.) The Board will on no account inform the officer of its opinion on any of the following questions.

(ii.) Clear and decisive answers should be filled in by the Board to enable the Ministry of Pensions to come to a reliable decision on the officer's claim to pension, etc.

(iii.) Expressions such as "may," "might," "probably," should be avoided, if possible.

(iv.) When there is more than one disability the replies will distinguish between them.

10. Was the disability contracted (a) before entering the service? No
(b) in the service? Yes

11. Was it attributable to military service? Yes
If so, to what specific military conditions is it attributed? G.S.W.

[Enteric Fever, Dysentery, Malaria, etc., contracted on service in countries where there is a special liability to the disease are to be regarded as attributable to military service.]

12. If not attributable to, was it aggravated by, military service? Not appl
If so, by what specific military conditions? Not appl.

13. Is it attributable to, or aggravated by, the officer's own negligence or misconduct? If so, in what way, and to what extent? No

[P.T.O.

14. What is the officer's present condition? General condition good. Left hand weak, and grasp is below normal. There is some tenderness over scar just above elbow and supination and pronation cause some pain.

15. To what degree is the officer disabled at the present time? Twenty per cent
(Degrees of disablement should be expressed in the following percentages—100, 80, 70, 60, 50, 40, 30, 20, under 20, or nil.)

16. Is the disability permanent? No

17. If not permanent, how soon is re-examination recommended? 4. months.

18. Is it necessary that the officer should be re-examined by the same Board? No

19. What treatment is the officer receiving, and where, and from whom? None

20. Is the officer in need of special medical treatment of any kind, and, if so, of what nature? No

21. Does the officer require the constant attendance of another person? No

22. Officers will be classified by the Medical Board under one of the following categories, the probable period of unfitness for the higher categories being stated. Explanation of these categories is in para. 5 of A.C.I. 1677/1917. In case of nurses, omit B. and (i) and (ii) of E.

A.—Fit for general service. — To four months.

B.—Fit for service in a garrison or labour unit abroad. —

C.—Fit for home service:—
(i) Active duty with troops. — Yes
(ii) Sedentary employment only.

D.—For admission to a command depot.

E.—Requiring indoor hospital treatment:—
(i) In an officers' military or auxiliary convalescent hospital.
(ii) In an officers' hospital.

F.—Permanently unfit for any further military service.

23. In the case of officers suffering from neurasthenia found permanently unfit, has A.C.I. 1289 of 1917 been complied with?

J McKellar Capt President.

J Gillies Capt

D J Martin Capt. Members.

W277 P378 100,000 4/18 DSG(52136)

CONFIDENTIAL. 117661 Army Form A. 45.

# PROCEEDINGS OF A MEDICAL BOARD

assembled at 86 Strand, London. on 2-12-16.

by order of D.D.M.S. Canadians

for the purpose of examining and reporting upon the present state of health of

(Rank and Name) Lieut. C.I. Davidson (Corps) 8th Battalion.

Age 22 Service 5 yrs. Disability G.S.W. upper arm.

Date of commencement of leave granted for present disability 2-12-16

Date on which placed on half-pay for present disability

The Board having assembled pursuant to order, and having read the instructions on the back of the form, proceed to examine the above-named officer and find that this officer suffered the disability noted in Army Form A. 45a

Wounds healed still has little power of three outer fingers of left hand. Can get massage on leave.

174 Willesden Lane, Brondesbury, N.W.

The opinion of the Board upon the questions herein is as follows:—

(1.) *a.* Is the officer fit for "General Service"? No

*b.* If not so fit, how long is he likely to be unfit? 6 weeks

(2.) *a.* *If unfit for General Service, is he fit for service at home?* No

*b.* *If not so fit, how long is he likely to be unfit for service at home?* 6 weeks

*c.* *If unfit for General Service at home, is he fit for light duty at home?* No

*d.* *If not so fit, how long is he likely to be unfit for light duty at home?* 6 weeks

(3.) Was the disability contracted in the service? Yes

(4.) Was it contracted under circumstances over which he had no control? Yes

(5.) Was it caused by military service? Yes

(6.) If caused by military service, to what specific conditions is it attributed? G.S. wds.

(7.) If the disability was not caused by military service, was it aggravated by it? Not applicable.

Signatures

Sgd. David Donald, Major, C.A.M.C. President.

" G.M. Davis, Capt. C.A.M.C. } Members.

" G.O. Taylor, Capt. C.A.M.C. }

I concur in the findings of the Board of Medical Officers here recorded.

Captain, C.A.M.C.
For D.D.M.S.

4 DEC 1916 Canadian Contingent.

[P.T.O.

(5725.) W.16789/M260. 200M. 2/16. C. P., Ltd. Forms A.45 26
(139.) W.5373/M726. 200M. 8/16.

## Instructions.

1. On the occasion of an Officer's first appearance before a Medical Board for his present disability, the circumstances under which the disability was contracted will be fully detailed; whenever possible a statement of the case by his medical attendant will also be attached.

2. In recording the proceedings of subsequent Boards, the progress of the individual since his last appearance will be clearly and concisely stated so as to ensure a continuous medical history of the case being available.

3. Enteric Fever, Dysentery, Malaria, etc., contracted when on service abroad, in countries where there is a special liability to the disease, are to be regarded as caused by military service.

C.A.D.C. 5009A

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

# DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) DAVIDSON GRANSTON TAYLOR

REGIMENT 8 Can Bn RANK Capt No.

Date of Examination in England 2-4-19 | Date of Examination in France




**DIRECTIONS TO DENTAL OFFICERS**

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

## PRESENT DENTAL REQUIREMENTS

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

HAS HE EVER REFUSED DENTAL TREATMENT? no

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

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

*Signature of Dental Officer* W. Rutherford Capt.

Form P. 85.

1918—60M—29-11-16.

MD 10

# FORM OF WILL.

Name in full.

I Cranston Taylor Davidson

Regimental Number Lieut serving in 8th Bn Canadians

of the Canadian Expeditionary Force do hereby revoke all former Wills made by me and declare this to be my last Will.

Name & Address of person or persons to whom it is to go.

I DEVISE and BEQUEATH all my real estate unto

absolutely, and my personal estate I bequeath to Mrs James Henry Samuel Davidson (mother) Suite 20 Acadia Blk. 590 Victor Street Winnipeg Manitoba Canada.

Name & Address of persons or person to receive personal estate (see Note 1.)

Fill in Date and Year.

IN WITNESS WHEREOF I have hereunto set my hand this 29th day. day of November A.D. 1918.

C. T. Davidson Lieut

(*Signature*)

Signed by the said Testator as his last Will and Testament, the same having been read over and explained to him, in the presence of us both present at the same time who at his request and in his presence and in the presence of each other have subscribed our names as witnesses.

Name of Witness Ry. Sam Thorpe.

Address of Witness "Estaire" London.

Occupation of Witness C. E. Forces.

Name of Witness G. A. Wallis

Address of Witness Estates Branch.

Occupation of Witness O.M.F.C.

N.B.—Personal Estate includes pay, effects, money in Bank, insurance policy, in fact everything except real Estate.

| Surname | Christian Name | | Serial No. |
|---|---|---|---|
| DAVIDSON | C. | T. | 4-D-43. |
| Rank | Unit | | |
| Capt. | | | |
| ~~Lieut.~~ | 8th.Batt'n. | | |

| Medical Board held at | Date | Condition found by Board |
|---|---|---|
| D.M.S.Office, | 2-12-16 | GSW.lt.up.Arm. |
| Unfit any service 6 weeks. | | |
| London Area | 13-1-17 | do. |
| Fit Home ser.unfit G.S.1 month. | | |
| Hastings | 15-2-17 | do. |
| Fit Home ser.unfit G.S.1 month. | | |
| Hastings | 15-3-17 | do. |
| Fit Home ser.unfit G.D.1 month. | | |
| Hastings | 16-4-17 | do. |
| Fit Home ser.unfit G.S.1 month. | | |
| Hastings | 16-5-17 | do. |
| Fit Home ser.unfit G.S.1 month. | | |
| Hastings | 14-6-17 | do. |
| Fit Home s r.unfit G.S.2 months. | | |
| Hastings | 14-8-17 | do. |
| Fit Home ser.unfit G.S.2 months. | | |
| Hastings | 15-10-17 | do. |
| Fit Home ser.unfit G.S.2 months. | | |
| Seaford Area | 12-11-17 | do. |
| Fit Home ser.unfit G.S.6 months. | | |
| Seaford Area | 29-4-18 | do. |
| Fit Home ser.unfit G.S.4 months. | | |
| Seaford Area | 2-10-18 | do. |
| Fit for General service. | | |
| Wit.ey Area | 11-4-19 | Penet.Wd.lt.Arm |
| Fit Garr.Duty unfit Gen.ser.3 months. | | |

Remarks.

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

| Surname | Christian Name |
|---|---|
| DAVIDSON | C. T. |
| Rank | Unit |
| Lieut. | 8th.Batt'n. |

| Casualty List | |
|---|---|
| 17-6-16/393. | No.14 General,Wimereux 16-6-16 |
| 20-6-16/395-2. | "GSW.lt.Arm,Leg,Buttock sev." |
| 9-8-16/438-2. | HS.to Royal Free,London 17-6-16 |
| | Discharged:-4-8-16. |

R/.

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

D.M.S.1347. 5M-10-10-18.

R. 149.

File

*Name* Davidson, Cranston *Rank* Lieut. ~~Reg.~~ *No.* 9-D-203

*Unit* 8th Batt.

*Next of Kin* Canada.

| Date | Movement | Place | Casualty | List No. | Notified N/K O. | W.O. List |
|---|---|---|---|---|---|---|
| 16-6-16. | No.14 Gen.Hosp. | Wimereux | GSW.L.ARM,LEG | SEVERE 393 | M.8233 | 17/6 |
| 17-6-16 | Exhtd to Royal Free Hosp | | do | 393 | | |
| 4.8.16 | do | Discha | – | 438 | | |

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

REGT'L No

NAME Davidson Cranston

H. Q. FILE No. 649-

RANK AND CORPS Lieut. 8th Bn.

FOLLOWS No.

FOLLOWS

| CABLE No. | CABLE Date | NATURE OF CASUALTY |
|---|---|---|
| M8233 | 16-6-16 | No. 14 Gen. Hosp. Wimereux reports June 16th '16 severely wounded, wnded left arm, leg, buttock. C |

L. L. Job 90581—M. & D. 6314.

M. F. W. 42—50M—1-16.
H. Q. 172-39-893.

| LIST No | HOSPITAL | DATE OF ADMISSION | REMARKS |
|---|---|---|---|
| 393 (1) | #14 Gen. Hospital Hyperama Skipton | 16-6-16. | Buttock severe. |
| 395. | Royal Free Hospital Grafton Road NC, | 17-6-16. | G.S.W. Legs & L. Arm |
| 438 (2) | " " " " | 4-8-16 | " " " " " " Back |

No. 606 (626.) RANK Sgt. NAME W Davidson C.

T. O. S. UNIT 90th Regt (Winnipeg Rifles)

M. D. 10

| PAID FROM | PAID TO | SIG. OR REC'T | PROMOTIONS, TRANSFERS, DISCHARGES, ETC. | |
|---|---|---|---|---|
| | | | PARTICULARS | AUTHORITY |
| 1914 | 1914 | | | |
| Aug 12th | Aug 21st | ✓ | | |
| Aug 22nd | Aug 27th | ✓ | | |
| Aug 28 | Sept 21 | ✓ | On 8th Bn paylist. | |
| Sept 22 | Oct. 31 | — | shown as Cpl. | Sept-Oct paylist |

UNIT SAILED
OCT 3 1914

SURNAME. Davidson,

CHRISTIAN NAMES Cranston.

(Old No 6361)

REGL. No. 606 RANK ~~Corpl~~ Lieut

UNIT 8th. Bn.

FORMER CORPS 90th. Regt. 4 yrs.

CARD NO. C

FOLL.

NEXT OF KIN.

CHANGE OF ADDRESS

NAME Mrs. J. H. S. Davidson

RELA Mother

ADDR Suite 20 Acadia Apts., 590 Victor St., Winnipeg, Man. 5-4-21-38-1 5-10-18

COUNTRY OF BIRTH India, Calcutta. DATE Nov. 4th. 1895.

PLACE OF ATTESTATION Valcartier, P.Q. DATE Sept. 21st. 1914.

O/S. 7-10-14 8/11

L. L. 94504. M. & D. 85th.

M. F. W. 22. 150M.—2-18. H. Q. 1772-3-339

From Quebec per S.S. "Franconia" 4/10/14.

MARRIED SINGLE Yes WIDOWER

TRADE OR CALLING Linsmith RELIGION Church of England

DESCRIPTION.

APPARENT AGE 20 YEARS 10 MONTHS

HEIGHT 5' FEET 8 INCHES

CHEST MEASUREMENT 33½ INCHES EXPANSION 1½ INCHES

COMPLEXION Fair EYES Grey HAIR L. Brown

DISTINGUISHING MARKS 2 Vacc. left arm. Scar left wrist & knee. Scar right wrist. Wart little finger right hand.

MEDICAL EXAMINATION. PLACE Valcartier, P.Q. DATE Sept. 8th. 1914.

Present address, Not stated

Number ..... Rank Lieut CAPT

Surname DAVIDSON

Christian Name CRANSTON

Units ..... Theatre of War FRANCE

Date of Service 9 2 15.

Remarks .....

Latest Address ~~Address not available~~

Suite 20, Arcadia Apt.

590 Victor St. Winnipeg

Man.

Page 14387

Roll No. .....

200m.-2-21.M. man les

DESP. JUL 4 1922
REGN. NO. 43030

NAME DAVIDSON, Cranston.

Regimental No. 606.

Unit 8th Battalion. 2. C.

Date of enlistment 21 Sept. 1914.

Place of birth Calcutta, India.

Married (yes or no) No.

Amount of pay assigned monthly $ 15. 00.

To whom payable next of kin

Name and address of next-of-kin
Mrs. J. Davidson
Mr. J. H. S. Davidson (Father)
799, Alexander Avenue,
Winnipeg, Man.

Date and place discharged

Reason for discharge COMMISSION 3-10-15
C.E.F.

Character on discharge

| Date From 1914 | To | PAY No. of Days | Rate | Amount | Field Allowance No. of Days | Rate | Amount | Other Credits | Total Credits | Voucher No. | Voucher Date | Cash Payments | Assigned pay | Other Charges | Total Debits | Remarks, Casualties, etc. |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Sept 22 | Oct 31 | 40 | 1.10 | 44 | 40 | .10 | 4 | | 48 | | | 30. | 15 | | 45 | |
| Nov 1 | Nov 30 | 30 | 1.10 | 33 | 30 | .10 | 3 | 3 | 39 | | | 23 | 15 | | 38 | |
| Dec | 1-31 | 31 | 1.10 | 34 10 | 31 | .10 | 3 10 | 1 - | 38 20 | | | 20 25 | 15 - | | 35 25 | |
| 1915 Jan | 1-31 | 31 | 1.10 | 34 10 | 31 | .10 | 3 10 | 2 95 | 40 15 | | | 20 25 | 15 - | | 35 25 | |
| Feby | 1-28 | 28 | 1.10 | 28 80 | 28 | .10 | 2 80 | 4 90 | 38 50 | | | 3 | 15 | | 18 | |
| Mch | 1-31 | 31 | 1.15 | 35 65 | 31 | .15 | 4 65 | 20 50 | 60 80 | | | 9 | | | 9 | |
| Apl | 1-30 | 30 | 1.15 | 34 50 | 30 | .15 | 4 50 | 51 80 | 90 80 | | | 6 | | | 6 | |
| May | 1-31 | 31 | 1.15 | 35 65 | 31 | 15 | 4 65 | 84 80 | 125 10 | | | 6 | 45 | | 51 | 15.00 ea. Assist Pay mch apl may. |
| June | 1-30 | 30 | 1.15 | 34 50 | 30 | .15 | 4 50 | 74 10 | 113 10 | | | 18 | 15 | | 33 | |
| July | 1-31 | 31 | 1.15 | 35 65 | 31 | .15 | 4 65 | 80 10 | 120 40 | | | 86 | 15 | | 101 | |
| | | | Adjustment of Exchange. | | | | | 5 90 | | | | | | | | |
| | | | | | | | | 1940. | | | | 221 50 | | | | |
| Aug. | 1-31 | 31 | 1.15 | 35 65 | 31 | .15 | 4 65 | 25 30 | 65 60 | | | 9 13 | 15 - | | 24 13 | |
| Sept. | 1-30 | 30 | 1.00 | 30 - | 30 | .10 | 3 - | 41 47 | 74 47 | | | 5 36 | 15 - | | 20 36 | |
| Oct. | 1-31 | 31 | 1.15 | 35 65 | 31 | .15 | 4 65 | 54 11 | 100 41 | | | 67 12 | 15 - | | 82 12 | A.C. 6.00 Should have been paid as Lieut omitted in Sept. |
| | | | | | | | | 18 29 | | | | | 15 - | 37 70 | 52 70. | Temp. Lieut 3/10/15. Bo. 34. allowance Overpaid 29 days. |
| | | | | | | | | | | | | | | 34 41 | | Office Pay Sheet. |

TRANSFERRED TO
P.M. LIABILITY ACCT

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

Assignment as at
1st December 1917.

FOR MONTH OF DECEMBER ONLY.

Davidson Lieut. C.T. Can. Training School $25.

Mrs. J.H.S. Davidson,
Suite No.1 Orris Block,
987 Sherbrooke Street,
Winnipeg, Man.

| 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 | | | | | | |

Rank Name Reg'l No.

Unit If in perm. Corps, What Unit? Married or Single

Place and Date of Enlistment Place of Birth

Name and Address, Next-of-Kin

Relationship

Assigned Pay Monthly $ Payable to

Relationship

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 | | | | | | |
| | | | | | | | | | | | | | | | | | |

Assignment as at
April 1st. 1916

Davidson 6 T. Lieut. 8 Batt

Mrs J. Davidson 799 Alexander Ave
Winnipeg Man

Payment Stopped
A. 3 M Form
1 6 17
Personal

| 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 | | | | | | |

Rank Name Reg'l No.

Unit If in perm. Corps, What Unit? Married or Single

Place and Date of Enlistment Place of Birth

Name and Address, Next-of-Kin

Relationship

Assigned Pay Monthly $ Payable to

Relationship

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 | | | | | | |
| | | | | | | | | | | | | | | | | | |

Form P. 812B
7961 10m 1/5/19 D.671

FILE NO. 8159

# WAR SERVICE GRATUITY and SEPARATION ALLOWANCE

Payable to DAVIDSON. Cranston Taylor Capt.

Address c/o Belfast Banking Co. Donegal St Belfast. Co. Down. Ireland.

Dependent c/o Fanoy Leather Workers Ltd. 29/9/19 wms
27. Victoria St Belfast Ireland

Address

| Date | Cheque No. | Gratuity | | | Payments | | | Balance Due. | | | Remarks |
|---|---|---|---|---|---|---|---|---|---|---|---|
| June 12. | 275-70 | | | | 24 | 13 | 2 | 24 | 13 | 2. | |
| Aug 1 | | 150 | 8 | 2. | | | | | | | |
| " 1 | H.A. | | | | 9 | 16 | 5 | | | | P.M. Branch o/p adj Pay 26/4/19 to 16/6/19 26 00 Unpaid Chit H 22842. 125 Fr. 2180. |
| " 1 | 56956 | | | | 14 | 16 | 9 | 101 | 1 | 10. | 2nd instal less above |
| Aug 13 | 71622 | 150 | 8 | 2 | 24 | 13 | 2. | 76 | 18 | 8. | 3rd. |
| Sept. 4 | 85596. | | | | 24 | 13 | 2 | 52 | 15 | 6. | 4th |
| Oct. 8 | 111078. | | | | 24 | 13 | 2 | 27 | 2 | 4 | 5th |
| Nov. 12. | 137056. | | | | 27 | 2 | 4 | 0 | | 0 | Final |
| | | 150 | 8 | 2 | 150 | 8 | 2 | | | | |

FORM P.15
5986–25M–19/1/17

ASSIGNED PAY. | UNIT. NAME OF | DATE | AUTHORITY | RANK. | DATE | AUTHORITY | NAME.

Beneficiary — 8. Bn. Can Comm[d] Depot — Pay. $2.– F.A. .60 Mess. 1.– $3.60 — Lieut. — Name Davidson.

Address — Canada. — Initials C.S.J.

Amount. $ 150.00 Cancelled 1/7 — Bank of Montreal

Separation Allowance issued. Yes or No..... — 1917-18 — Capital & Counties Bank Ltd. 39 Threadneedle St. E.C.2

| DATE 1917. | PARTICULARS | CK. NO. | CR. | DR. | ASSIGNED PAY PAID IN CANADA | BALANCE | SPECIAL AUTHORITIES To be initialled by P.M. in every case. | INITIALS |
|---|---|---|---|---|---|---|---|---|
| April 20 | A.P. Can | | | | 15. | | | |
| 24 | Pay April (R) | | 108. | | | | | |
| 27 | Bank | | | 93. | | | | |
| May 16 | A.P. Can | | | | 15. | | | |
| 19 | Pay May (R) | | 111 60 | | | | | |
| 23 | Bank | 6049 | | 96 60 | | | | |
| June 18 | A.P. Can - Cancelled | | | - | - | | | |
| | June Pay (R) | | 108. | | | | | |
| 22 | Bank | | | 108. | | | | |
| July 9 | Billeting 1-30 6/17 | 464 | | | | | 30.00 £6.3.4 | |
| 23 | July Pay (R) | | 111 60 | | | | | |
| 25 | Bank | 13082 | | 111 60 | | | | |
| Aug 15 | Billeting 1-31 7/17 | 3285 | | | | | £6.7.5 31.00 | |
| 18 | Aug Pay (R) | | 111 60 | | | | | |
| 21 | Bank | 17361 | | 111 60 | | | | |
| Sep 11 | Billeting Aug 17. | 4737 | | | | | £6-7-5 31.00 | ✓ |
| 19 | Sept Pay (R) | | 108 | | | | | |
| 20 | Bank | 21921 | | 108 | | | | |
| Oct 13 | A.P. June 1917 pd by Ottawa not charged. Audit. all letter 9-D-203. Cr. A.P. Canada | Vo 1138 | | 15 | | | | |
| | Oct Pay (R) | | 111 60 | | | | | |
| 16 | Billeting 1-30 9/17 | 6903 | | | | | £6-3-3 30.00 | ✓ |
| 19 | Bank | 26055 | | 96 60 | | | | |
| Nov 15 | Nov Pay (R) | | 108 | | | | | |
| 19 | Bank | 30486 | | 108 | | | | |
| 22 | Billeting 1-31 10/17. | 9717 | | | | | £6-7-5 31.00 | ✓ |
| Dec 12 | A.P. Can. For Dec only. | | | | 25 | 25 | Fwd. | |

FORM P. 15
5986–25M–19/1/17

ASSIGNED PAY. | UNIT. NAME OF | DATE | AUTHORITY | RANK. | DATE | AUTHORITY | NAME.

Beneficiary — Can Command Depot — Pay 2/- F.A. .60 Mess 1/- 3.60 EDP .50 22/2/18 $4-10 — Lieut — Name Davidson
Address — Initials C. T.
Bank Capital & Counties Ltd
39 Threadneedle St EC 2
Amount. $
Separation Allowance issued. Yes or No.....

| DATE 1917 | PARTICULARS | CK. NO. | CR. | DR. | ASSIGNED PAY PAID IN CANADA | BALANCE | SPECIAL AUTHORITIES To be initialled by P.M. in every case. | INITIALS |
|---|---|---|---|---|---|---|---|---|
| Dec 12 | Brought fwd | | | | | Dr 25- | | |
| 13 | Dec Pay R. | | 111 60 | | | | | |
| | Bank | 34414 | | 86 60 | | | | |
| 17 | Rations 1-30 11/17 | 10654 | | | | | £6.3.3 $30 00 | |
| Jan | Pay R. | | 111 60 | | | | | |
| 21 | Bank | 39261 | | 111 60 | | | | |
| 24 | Subs 1-31 12/17 | 12622 | | | | | £6.7.5 $31 00 | |
| Feb | Pay R. | | 100 80 | | | | | |
| 19 | Bank | 40750 | | 100 80 | | | | |
| 22 | Sub 1-31 1/18 | 15047 | | | | | 6.7.5 $31. | |
| March | Pay R. | | 127 10 | | | | | |
| 19 | Subs 1-28 2/18 | 16280 | | | | | 5-15-1 28 00 | |
| | author. G.O.C. 3645 12 3/18. | | | | | | | |
| 22 | Sobe. ass. Instr C.Y.Sch. 12 10/17 & D.P. @ 50c pd. ~~days~~ | Vo. 22788. | 70 .. | | | | | |
| | Bank | 42232 | | 70 .. | | | | |
| 22 | Bank | 42346 | | 127 10 | | | | |
| April 0. | Sub 1-31 3/18. | 371 | | | | | 6.7.5 $31. | |

UNIT 8th Battalion

NAME Davidson C. S. Lieut.

DATE OF APPOINTMENT 31/12/15 29.10.18 - 14/12/15

MARRIED (YES OR NO)

NEXT OF KIN:— NAME See attestation papers

ADDRESS

DATE NON-EFFECTIVE AND CAUSE

ASSIGNED PAY:—

MONTHLY AMOUNT $15.75

TO WHOM PAYABLE Mrs. J. Davidson, 799 Alexander Ave Winnipeg Man Vo# 1771

BANK IN WHICH PAY & ALLOWANCES DEPOSITED Bank of Montreal

1915-16

| PERIOD From | PERIOD To | No. of Days | Regtl. Rate | PAY Amount of Regimental | PAY Command | PAY Adjutant | PAY Cr. from Prev. Account | PAY Total Pay | Rate of Field Allowance | ALLOWANCES Amount of Field Allowance | ALLOWANCES P. F. Allowance | ALLOWANCES Messing | ALLOWANCES Subsistence | ALLOWANCES Total | Total Pay and Allowances | Assigned Pay | Sundry Deductions | Net P. A. | Paid in Cash | Deposited in Bank | Carried Forward | Remarks |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1915 | | | | | | | | | | | | | | | | | | | | | | |
| 31/10 | 31/10 | 29 | 2 | 58 | | | | 58 | 60 | 17.40 | | 29 | | 46.40 | 104.40 | | | | | 104.40 | | Voucher # 369 |
| 1/11 | 30/11 | 30 | | 60 | | | | 60 | | 18 | | 30 | | 48 | 108 | | | | | 108 | | |
| 1/12 | 31/12 | 31 | | 62 | | | | 62 | | 18.60 | | 31 | | 49.60 | 111.60 | 15 | 31.11 | | | | | Ordnance Trans Vo. 1917 |
| | | | | | | | 34.41 | 34.41 | | | | | | | 34.41 | | 34.41 | | | 31.08 | | Dr bal Pay Vo# 1771 |
| 1/1/16 | 31/1/16 | 31 | | 62 | | | | 62 | | 18.60 | | 31 | | 49.60 | 111.60 | 15 | | | | 96.60 | | |
| 1/2/16 | 29/2/16 | 29 | | 58 | | | | 58 | | 17.40 | | 29 | | 46.40 | 104.40 | 15 | 8.94 | | | 80.46 | | Ordnance Trans Vo 4339 |
| 1/3 | 31/3 | 31 | | 62 | | | | 62 | | 18.60 | | 31 | | 49.60 | 111.60 | 15 | 17.84 | | | 78.76 | | Advance a/c. Pay 6146. |
| | | 121 | | | | | | | | | | | | | | 60 | 91.30 | | | 49.30 | 87.20 | Vo# 6495 |
| | | | | | | | | | | | | | | | | | 87.20 | | | 22.22 | | |

## SUNDRY PAYMENTS

| DATE | CHEQUE NO. | PARTICULARS | AMOUNT $ | AMOUNT c. | AMOUNT £ | AMOUNT s. | AMOUNT d. | REMARKS |
|---|---|---|---|---|---|---|---|---|

P.-15

G. B. & S.

UNIT 8th Battalion

NAME Davidson C. S.

DATE OF APPOINTMENT 3/12/15 2.9.1018 - 14/12/15

MARRIED (YES OR NO)

NEXT OF KIN:— NAME See attestation papers

ADDRESS

DATE NON-EFFECTIVE AND CAUSE

1915

ASSIGNED PAY:—

MONTHLY AMOUNT $15.75

TO WHOM PAYABLE Mrs. J. Davidson, 799 Alexander Ave Winnipeg Man No 1772

BANK IN WHICH PAY & ALLOWANCES DEPOSITED Bank of Montreal

| PERIOD From | PERIOD To | No. of Days | Regtl. Rate | PAY Amount of Regimental | PAY Command | PAY Adjutant | PAY Cr. from Prev. Account | PAY Total Pay | Rate of Field Allowance | ALLOWANCES Amount of Field Allowance | ALLOWANCES P. F. Allowance | ALLOWANCES Messing | ALLOWANCES Subsistence | ALLOWANCES Total | Total Pay and Allowances | Assigned Pay | Sundry Deductions | Net P. A. | Paid in Cash |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1915 31/10 | 31/10 | 29 | 2 | 58 | | | | 58 | 60 | 17 40 | | 29 | | 46 40 | 104 40 | | | | |
| 1/11 | 30/11 | 30 | | 60 | | | | 60 | | 18 | | 30 | | 48 | 108 | | | | |
| 1/12 | 31/12 | 31 | | 62 | | | | 62 | | 18 60 | | 31 | | 49 60 | 111 60 | 15 | 31 11 | | |
| | | | | | | | 37 41 | 37 41 | | | | | | | 37 41 | | 34 41 | | |
| 1/1/16 | 31/1/16 | 31 | | 62 | | | | 62 | | 18 60 | | 31 | | 49 60 | 111 60 | 15 | | | |
| 1/2/16 | 29/2/16 | 29 | | 58 | | | | 58 | | 17 40 | | 29 | | 46 40 | 104 40 | 15 | 8 94 | | |
| 1/3 | 31/3 | 31 | | 62 | | | | 62 | | 18 60 | | 31 | | 49 60 | 111 60 | 15 60 | 17 84 9 2 30 | | |
| | | 181 | | | | | | | | | | | | | | | 87 20 | | |

## SUNDRY PAYMENTS

| DATE | CHEQUE NO. | PARTICULARS | AMOUNT $ | c. | £ | s. | d. |
|---|---|---|---|---|---|---|---|

P—15.

C

**ASSIGNED PAY.** | **UNIT.** NAME OF / DATE / AUTHORITY | **RANK.** / DATE / AUTHORITY | **NAME.**

Beneficiary Mrs. J. Davidson
Address 799 Alexander Ave.
Winnipeg Man
Amount. $ 15.-

8 Batt'n

Lieut.

Name Davidson
Initials C. H. J.
Bank
Bank of Montreal

Separation Allowance issued. Yes or No.

1916 17

| DATE 1916 | PARTICULARS | CK. NO. | CR. | DR. | ASSIGNED PAY PAID IN CANADA | BALANCE | SPECIAL AUTHORITIES To be initialled by P.M. in every case | INITIALS |
|---|---|---|---|---|---|---|---|---|
| Apr. 1 | Bal. fwd. from March. | | | 87 20 | | D 87 20 | | |
| " 24 | A. P. Canada. | | | | 15 | | | |
| " " | Pay april (R) | ✓ | 108 | | | | | |
| " 26 | Bank | 1057 | | 5 80 | | | | |
| May 22 | Pay May (R) | ✓ | 111 60 | | | | | |
| 24 | A. P. Can. | | | | 15 | | | |
| | | Bank 2444 | | 96 60 | | | | |
| June 19 | A. P. Canada | | | | 15 | | | |
| 20 | Pay June (R) | ✓ | 108 | | | | | |
| 26 | Bank | 3991 | | 93 | | | | |
| July 18 | A. P. Can | | | | 15 | | | |
| 20 | Pay July (R) | ✓ | 111 60 | | | | | |
| 25 | Bank | 5467 | | 96 60 | | | | |
| Aug 18 | Pay Aug (R) | ✓ | 111 60 | | | | | |
| 21 | A. P. Canada | | | | 15 | | | |
| 28 | Bank | 7467 | | 96 60 | | | | |
| Sept 22 | Pay Sept. (R) | ✓ | 108 | | | | | |
| 23 | A. P. Can. | | | | 15 | | | |
| 26 | Bank. | 9515 | | 93 00 | | | | |
| Oct. 19 | Pay Oct (R) | ✓ | 111 60 | | | | | |
| 23 | A. P. Can | | | | 15 | | | |
| 28 | Bank | 11765 | | 96 60 | | | | |
| Nov. 17 | Pay Nov. (R.) | | 108 | | | | | |
| 21 | A. P. Canada | | | | 15 | | | |
| 27 | Bank | | | 93 | | | | |
| | Carried forward to new Sheet. | | | | | | | |

FORM P. 15. H.W.V.Ld.—3717-18.
12519—16M—1-3-18

ASSIGNED PAY. | UNIT. NAME OF | RATE OF P. AND A. | RANK. | DATE | AUTHORITY | NAME.

Beneficiary — 8. Bn M.R.D. — Pay — Capt.
Address — F.A. — Relieving appt of adjt. — 25 4/19 — Dbg. 548/2 7/19
Amount. $ — Messing
Separation Allowance issued. Yes or No.....

Name DAVIDSON.
Initials C.T.
Bank

| DATE 1919 | PARTICULARS | CK. NO. | CR. | DR. | ASSIGNED PAY PAID IN CANADA | BALANCE | SPECIAL AUTHORITIES To be initialed by P.M. in every case. | INITIALS |
|---|---|---|---|---|---|---|---|---|
| July 25. | Balce forward. | | | 21·80 | | 21·80 | | |
| 25 | O/Pd adj[t] Pay 26 4/19 - 16 5/19. Dbg. 548/2 7/19 Vo 1081 | | | 26·00 | | Dr. 47·80 | | |
| Sept 3 | chgd to W.L.G. | Vo 231 | 47 80 | | | | | |

W. L. G. Clear Cert issued 28/7/19 shewing
Dr Bal. Due. 47.80

FORM P. 15.
12519—16m—1-3-18 H.W.V.Ld.—3717-18.

| ASSIGNED PAY. | UNIT. NAME OF | RATE OF P. AND A. | RANK. DATE | AUTHORITY | NAME. |
|---|---|---|---|---|---|
| Beneficiary | | Pay | | | Name |
| Address | | F.A. | | | Initials |
| | | Messing | | | Bank |
| Amount. $ | | | | | |
| Separation Allowance issued. Yes or No..... | | | | | |

| DATE | PARTICULARS | CK. NO. | CR. | DR. | ASSIGNED PAY PAID IN CANADA | BALANCE | SPECIAL AUTHORITIES To be initialed by P.M. in every case. | INITIALS |
|---|---|---|---|---|---|---|---|---|
| | | | | | | | | |

FORM P. 15.
5986—25M—19/1/17

ASSIGNED PAY.

UNIT. NAME OF 8th Bn. Can. Com. Depot

RANK. ~~DATE~~ Mess

NAME. 16

Beneficiary C. T. S. & Bn

Address

Amount. $

Separation Allowance issued. Yes or No.....

Rate ~~DATE~~ Pay 2.00 Lieut ~~AUTHORITY~~ G.O.B. 36 45 12318.

Fd. 60 ~~Assistant~~ 12 10/17. C.T.S.

Mess 1.00 ~~Asst. Instructor~~ A. Comdt. 1st Cl. H.Q. R.O. 4477 5.10/18 Threadneedle St. E.C. 2.

3.60 ~~Asst. Instructor~~ H.Q. R.O. 4477 5.10/18 Threadneedle St. E.C. 2.

~~8.50~~ causes to be Asst. Instr. 15-11-18. C.T.S. Reflec. 1-12-18. 17603

~~A/Instrs Pay Expd.~~

Name Davidson

Initials C. T.

Bank Capital & Counties Ltd

| DATE | PARTICULARS | CK. NO. | CR. | DR. | ASSIGNED PAY PAID IN CANADA | BALANCE | SPECIAL AUTHORITIES To be initialled by P.M. in every case. | INITIALS |
|---|---|---|---|---|---|---|---|---|
| 1918 | | | | Add Outfit allce 1-8-18 100 00 | | | | |
| Apl 16 | Pay R. | | 108 - | | | | | |
| 23. | Bank. | 0879 | | 108 - | | | | |
| May 10 | Pay R. | | ~~111 60~~ 127 10 | | | | | |
| 11 | E.D. Pay as Asst Instr fr. Apl 1-30/9/18. V0227788. | | 15 - | | | | | |
| 11 | Bank | 1862 | | 15 - | | | | |
| 23. | Bank | 2662 | | 127 10 | | | Transfered to ledger 11 15/8/18. V0.227788. from ledger 16. | |
| June 11 | Pay R. | | 123 - | | | | | |
| 18 | Lon. R. Narcons Goods. 13 6/18 L1.0.6. List 132 June 8. Vo 1604 Gen a/c. | | | 4 99 | | | | |
| 21 | Bank | 3970 | | 118 01 | | | | |
| 25 | Drew allce. 13-14 6/18. | 3754 | | | | | 1-5-6. 620 | |
| July | Pay R. | | 127 10. | | | | | |
| 23. | Bank | 5357 | | 127 10 | | | | |
| Aug | Pay R. | | 127 10. | | | | | |
| 21 | Bank | 6877 | | 127 10 | | | | |
| Sept 10 | Pay R. | | 123 - | | | | | |
| 23 | Bank | 8884 | | 123 - | | | [25-5-6 Transfd to L/16 of 2/11 october 1918. | |
| Oct 10 | Opd E.D.P. fr as Asst Instr fr 14/8-30/9/18. | Vo 1180 P.E. | | 70 | | | 9/10 Shown in 4/5/11. | |
| 15. | Refund by Pers. Chg. 2/3/1919 £14-7-5. Vo 3514. | Cash Vo 1307 | 70 | | | | | |
| 18 | Asst. Instr Nos 14/8-30/9/18. H.Q.R.O. 4301. 5/8 Cancelled | | 70 | | | | | |
| 18 | do. dispatched Pay R. | Bank | 10257. | 70 | | | | |
| 22 | | Bank | 10568 ~~10568~~ | 127 10 | | | | |
| 31 | Add Outfit allce 1-8-18 | | 100 | | | | | |
| | | Bank | 10952 | 100 | | | | |

~~Forward~~

FORM P. 15.
5986—25M—19/1/17

ASSIGNED PAY. | UNIT. NAME OF | DATE | AUTHORITY | RANK. | DATE | AUTHORITY | NAME.

Beneficiary
Address

Amount. $
Separation Allowance issued. Yes or No.....

8 Bn. | Pay. 2. | F.A. 1. | Mess. 1. | Adjt. Lay. 50[4]

Lieut. | + Adjt. 9/14. a.c.p. 227 d/ 13 2/14. V 24192. | ¾/Capt. 11 12/18. T.S.G. 317 d/ 14 2/19. V 26103. | + Adjt.

Name Davidson
Initials C. J.
Bank Capital & Counties Threadneedle St

Retired in Dr Isles 16 6/19 m8/a 8-D-761 d/ 16 6/19

| DATE | PARTICULARS | CK. NO. | CR. | DR. | ASSIGNED PAY PAID IN CANADA | BALANCE | SPECIAL AUTHORITIES To be initialled by P.M. in every case. | INITIALS |
|---|---|---|---|---|---|---|---|---|
| | Nov. Balce Forward | | Nil | | | Nil | | |
| | Pay & Adjt. 1st A 15 9/153, 15 9/15 | | 155 | | | | | |
| Dec 6 | Bank 540 Victor St. Spec. Permit to Lun. Mrs J. H. S. Davidson: Suit 20. Acadia Apts. | 12352 | | 155 | | 0 | | |
| 14 | Pay | | 124 | | | | | |
| | Bank | 13629 | | 86 | | Cr. 8.00 | | |
| 20 | C/Bd. as Asst. Instr. fr 15 11/18 - 30 11/18. Ceases to be Asst. Instr 15 11/18 | V 2903 | | 8 | | 0 | | |
| 1919 Jan 21 | Pay | | 124 | | | | | |
| | Bank | 15275 | | 124 | | 0 | | |
| Feb 14 | Pay | | 112 | | | | | |
| 21 | Bank | 16834 | | 112 | | | | |
| 27 | To be Adjt. fr. 9/19 - 28 2/19 @ 50[4] p.d. | V 24192 | 25.50 | | | | | |
| | " " Bank | 17234 | | 25.50 | | | | |
| Mch 20 | Adv. March P & A. Bank. | | | 139.50 | | | | |
| 21 | Pay | | 139.50 | | | | | |
| 25 | Adj. P & A. fr. Lt. to Capt's. rates fr 11 12/18 - 31 3/19. | V 26103 | 111 | | | 2 Lt. Capt Lg. July 19. | | |
| | " " Bank. | 18861 | | 111 | | | | |
| April 2 | Adv. April P & A. Bank. | | | 165 | | Retd to Class R. L. P. Cl 30 4/19 (Bshott) Class. R.N.E. Ledger 28 4/19 Disp P. & A as usual Exd | | |
| 15 | Pay | | 165 | | | | | |
| May 14 | Pay & A | | 170 50 | | | | | |
| | Bank | | | 170 50 | | | | |
| June 12 | Advance June P. & A. Bank | | | 88 ~~64~~ | | 8.88 ~~64~~ | Resigning off. 16 6/19 | |
| 16. | Unpaid Nett 42 2 42 Less 42 June 24-9-7. No. 125. | | | 21 80 | | | auth M.S. 1a/8-D-11122 8/-11 6/19 | |
| | Apparently Spd Adjutants Pay matter referred to A.H.Q 18 6/19 15 11 6/19 No declaration entry appears up to date. Refd to Pers File | | | | | | | |
| 20. | Pay & A. | | 88. | | | W/A 21 80. | | |

P—15.

**ASSIGNED PAY.**

Beneficiary Mrs. J. Davidson,
Address 799 Alexander Ave.
Winnipeg, Man
Amount. $ 15.00
Separation Allowance issued. Yes or No.

**UNIT.** NAME OF: 8th Batt'n — DATE — AUTHORITY

**RANK.** Lieut. — DATE — AUTHORITY

Leave 2 17/16 - 13 1/17. AG. #30. 19 17/16.

**NAME.**

Name Davidson,
Initials C. V. J.
Bank
Bank of Montreal

Sheet 2.

1916-17

| DATE 1916 | PARTICULARS | CK. NO. | CR. | DR. | ASSIGNED PAY PAID IN CANADA | BALANCE | SPECIAL AUTHORITIES To be initialled by P.M. in every case | INITIALS |
|---|---|---|---|---|---|---|---|---|
| Dec 12 | Pay Dec. | | 111 60 | | | | | |
| | Allan | | | | 15 | | | |
| 19 | Bank | | | 96 60 | | — o — | | |
| 1917. Jan 16. | A.P. Can. | | | | 15. | | | |
| 20 | Pay Jan (R.) | | 111.60 | | | | | |
| 23. | Bank. | 19286. | | 96.60 | | — o — | | |
| Feb. 15. | Pay Feb. (R.) | | 100.80 | | | | | |
| 19. | a. P. Can. | | | | 15. | | | |
| 21. | Bank. | 21931. | | 85.80 | | — o — | | |
| Mar 13. | a. P Can. | | | | 15. | | | |
| 22. | Pay Mar (R) | | 111.60 | | | | | |
| 23. | Bank. | | | 96.60 | | — o — | | |

UNIT

NAME

DATE OF APPOINT

MARRIED (YES OR

NEXT OF KIN:—

ASSIGNED PAY:—

MONTHLY AMOUNT

TO WHOM PAYABLE

DATE NON-EFFECT

AND CAU

BANK IN WHICH PAY & ALLOWANCES DEPOSITED

| PERIOD | | No. of Days | Regtl. Rate | PAY | | | | | Rate of Field Allowance | ALLOWANCES | | | | | TOT |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| From | To | | | Amount of Regimental | Command | Adjutant | Cr. from Prev. Account | TOTAL PAY | | Amount of Field Allowance | P. F. Allowance | Messing | Subsistence | TOTAL | ALLO |
| | | | | | | | | | | | | | | | |

## SUNDRY PAYMENTS

| DATE | CHEQUE NO. | PARTICULARS |
|---|---|---|
| | | |

LIEUT.
~~608~~

DUPLICATE. Army Form B. 178.

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

# MEDICAL HISTORY of

*Surname* DAVIDSON, *Christian Name* Cranston.

H

TABLE I.—GENERAL TABLE.

Birthplace ... Parish Calcutta, County India.

Examined ... ... on 8th day of Sept. 191 .
at Valcartier.

Declared Age ... ... 20 years 10 months. days.

Trade or Occupation ... Tinsmith.

Height ... ... ... 5 feet, 8 inches.

Weight ... ... ... 33½ lbs.

Chest Measurement — Girth when fully Expanded. 1½ inches.
Range of Expansion inches.

Physical Development ...

Vaccination Marks — Arm ... Right Left
Number 2

When Vaccinated ... ... 1908

Vision ... ... ... R.E.—V=
L.E.—V=

(a) Marks indicating congenital peculiarities or previous disease ... (a) Scar lt. wrist & knee, Scar rt. wrist, wart little finger.

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

Deceased 8-1-61

Approved by (*Signature*) G. S. Mothersill,
(*Rank*) Major.
*Medical Officer.*

I certify the foregoing to be a true copy of an original entry on a Medical History Sheet of this man.
C.A.M.C.
In charge of Records
Canadian Contingents.

Enlisted ... ... ... at Valcartier,
on 21st day of Sept. 191 4

| Joined on Enlistment ... | Corps. | Regtl. No. |
|---|---|---|
| | 8th Battn. | ~~608~~ LIEUT. |
| Transferred to ... ... | | |

Became non-effective by

on day of 191 .

(*Signature*)

(*Rank*)

This Medical History Sheet has been compared with the Corresponding Attestation Paper, and entries made in red have been taken from the Attestation Paper.

W.R. WARD, D.P.T.O.
Colonel in Charge of Records,
Canadian Contingents.

2966. Wt. W8005/2748. 300,000. 8/15. D. D. & L.

## Table II.—Only for Admissions to Hospital or to the Sick

| Name of Hospital. | Admitted to Hospital | | | Discharged from Hospital | | | Disease | Number of Days in Hospital | Rema |
|---|---|---|---|---|---|---|---|---|---|
| | Day | Month | Year | Day | Month | Year | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | |

## List in the case of Warrant Officers treated in quarters.

| ks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital must be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet. | Signature of Medical Officer. |
|---|---|
| | |
| | |
| | |

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

| Date. | Brief details, and signature. |
|---|---|
| | |
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## Table IV.—Service Table.

| Station or Troopship | Date of arrival or embarkation | Date of departure or disembarkation | Station or Troopship | Date of arrival or embarkation | Date of departure or disembarkation |
|---|---|---|---|---|---|
| | | | | | |
| | | | | | |
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| | |
|---|---|
| Rank and Name | DAVIDSON, Cranston. ~~Lieut.~~ Capt. |
| Regimental No. | 606. |
| Unit | 8th Canadian Inf.Bn.(90th Rifles) |
| Date of enlistment | 21st September 1914. |
| Place of birth | Calcutta, India. |
| Married (Yes or No) | No |
| If in Permanent Force | |
| Promotions or appointments | |

A.F.B. 1561

1 NOV 1915

Name and Address of Next-of-kin

Mrs J.H.S. Davidson, (mother) 1-12-16
~~mate to~~ Acadia apartments
~~799 Alexander Ave.,~~
590 Victor St. Winnipeg.

also notify:- Miss E Hutchinson ~~Strathcona~~ 17a Bilings Park London S.W.13 ~~6 Gautelope Rd~~ ~~Penbroke Sq~~ ~~Lumen~~ R.L.G.D.-203.

Date and place of discharge
8th Batt. JAN 1 1916
do. 1-2-16
do 1-3-16
do 1-4-16
do 1-5-16.
Hqrs Hastings 25 3 17
" 26.4.17

Reason for discharge

Character on discharge

~~A.F.B. 103~~

Hastings 11/9/16
1-6-17
1-7-17
1-8-17

| Date | From whom received | Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case. | Place | Date | REMARKS Taken from Official Documents |
|---|---|---|---|---|---|
| | | | MANITOBA | | |
| | | To be temp.Lieut. | | 3-10-15. | London Gazette.No.29326 Dated 14-10-15. |
| 14-2-16 | 8th Batt. | Appointed M.G. Officer | | 19-1-16 | Pt. II ord. 8. |
| 14.5.16 | - do - | Granted 4 days Leave | | 2.5.16 | Pt II ord. 20. |
| 17-6-16 | D.O. | Adm to No 14 Gen Hosp. Wimereux | | 16-6-16. | C.L 393. Wounded. |
| 20-6-16 | D.D.M.S. | Adm to Royal Free Hosp. Gray's Inn Rd. Discharged to Ekn Lisl | | 4-8-16 17-6-16 17.6.16 | C.L 438. C.L 395 GSW L arm D.O 339. Pte ord 26 (illegible) |
| 19.12.16 | A.G. | Leave on rec Med. Bd 2.12.16 | | 13.1.17 | R.O 30 |
| 16.1.17 | A.G. O.C. | Attd Can. Command Depot | | 13.1.17 | R.O 146. (Part II No 18 (a)) |
| 16-1-17 | Hastings O.C. | Posted temporarily to H.Q. Hastings To be acting Assistant to A.P.M. | | 15-1-17 | R.O 501. |
| 20-1-17 | Hast. | Hastings temporarily vice Capt D.A. McKinnon | | 20-1-17 | R.O. 527. |
| 26.5.17 | G.L.O. | Transf & Posted to 1st Can Regt Depot | | 21.5.17 | App |
| 22-10-17 | Man.R.D. | Is declared U.G.S. for 2 months from } Ont F.H.S. } | | 15-10-17 | Pt II 4/227 |

| 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 | | | | |
| 26-10-17 | M.R.Dep | Ord to Hastings | | 29.9.17 | Pte C.431 |
| 12-3-18 | Hgom HC | To be Asst Instructor Can Trg School | | 12.10.17 | R.O. 3645 |
| 26-3-18 | do | Seconded for duty to Can. Training Schl. | | 12.10.17 | R.O. 3730 |
| ~~5.7.18~~ | do | To be Asst. Adjt. from Asst. Instr. Can Trng Sch. | | 14.5.18 | R.O. 4300 Cancelled by C.R.O. 4775 - 1/10/18 |
| 25-11-18 | Hgom HC | Ceases to be Asst Instructor Can Trg School | | 15/11/18 | R.O. 4778 |
| 30-11-18 | do. | Ceases to be Seconded to Can. Trg. School | | 15-11-18 | R.O. 5006 |
| 12-12-18 | M.R.D. | SOS. proceed Overseas to 8 Bn. | | 15-11-18 | Pte O 346 |
| 22-11-18 | 8 Bn | SOS. as Reinf. from England | | 18-11-18 | Pte O. 146 |
| 16-2-19 | Gen Hq | To be adjutant 8 Bn vice Capt BB Smith M.C. | | 9-1-19 | A.F.B. 103. A.C.R. 229 Ltg. 31215-6/3/19 |
| 21-3-19 | W.O. | To be Temp Captain | | 11-12-18 | Ltg 31244 |
| 29.3.19 | 8 Bn. | Proceeded to England | | 21.3.19 | Pte O 30 |
| 1-4-19. | H. Wing. | SOS pending return to Canada | | 28.3.19. | Pte O 18. |
| 26-6-19 | W.O | Retired in British Isles. | | 16/6/19 | Ltg 31419 |
| 10/7/19 | Do. | Relinquishes Apptmt of Adjutant | | 26/4/19 | L.G. 31447 |
| 17 7 19 | M.R.D | SOS returned in British Isles | | 25 6 19 | Pte 198 |

24329.

Rank and Name: DAVIDSON Cranston.
Regimental No.: 606
Unit: 8th. Battalion.
Date of enlistment: 21st. Sept. 1914.
Place of birth: India.
Married (Yes or No): No.
If in Permanent Force:
Promotions or appointments:

Name and Address of Next-of-kin:
Mrs. J. Davidson.
799 Alexander Avenue.
Winnipeg. Man.

Date and place of discharge:
Reason for discharge:
Character on discharge:

| Report Date | Report From whom received | Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case. | Place | Date | REMARKS Taken from Official Documents |
|---|---|---|---|---|---|
| 19/12/14 | O/C. 8 Bn. | Promoted to L/Sgt from Cpl. | Lark Hill | 19/12/14 | Part II O. 103. |
| 1. 4. 15. | | On Nominal Roll. | France. | | |
| 14. 8. 15. | O.C. 8 Bn. | Promoted Sergt. | do. | 26. 3. 15. | Part II O. 24 |
| 10. 10. 15. | Major Gen. Currie. | Appointed Temp. Lieut. | | 3. 10. 15. | Routine O. 1245. |

| 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 | | | | |

Army Form B. 103. Sheet III. Regimental Number.....

## Casualty Form—Active Service.

Regiment or Corps.....

Rank Lieut. Surname Davidson Christian Name C. T.

Religion..... Age on Elistment.....years .....months

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

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

Extended {..... / .....} Re-engaged {..... / .....} Qualification (b)..... W.S. B. CLASS. A.

or Corps Trade and rate.....

Occupation..... .....Signature of Officer.

| Report | | Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case. | Place of Casualty | Date of Casualty | Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents. |
|---|---|---|---|---|---|
| Date | From whom received | | | | |
| | | Embarked ... | | | W/O. Desh. |
| | | Disembarked | | | 121/Drafts/1 |
| 18.11.18. | G.I.B.D. | T.O.S. 8th Battalion | | | 3052/V 3/5 |
| | | as Reinforcement from | | | G.S.M.S. |
| | | England. | | | (5) R. Fus |
| | | | | | No 202 M |
| | | | | | 9.11.18 Tele |
| | | | | | 3505. V. 3. |
| | | | | | NR B.C. 3353. |
| | | | | | M 16.11.18 |
| | | | | 18.11.18 | R.F. N°1/Draft/225 |
| 20.11.18. | — " — | Left for CCRC | " | 20.11.18 | NR 513. |
| 20.11.18 | CCRC | Arrived | | 20.11.18 | NR A. 1833. |

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.

(b) Signaller, Shoeing-Smith, &c.

W. 5527—M2093 1000m 7/17 (25686) C. P. & S., Ltd. Forms B./103 E/1555.

[P.T.O.

| Report | | Record of promotions, reductions, transfers, casualties. &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case. | Place of Casualty | Date of Casualty | Remarks Taken from Army Form B.213, Army Form A.36, or other official documents. |
|---|---|---|---|---|---|
| Date | From whom received | | | | |
| 8/12/18 | 66 Rfs | Left for Unit | Field | 8/12/18 | N.R. D 211 |
| 14.12.18 | Ofc 8th Fr. | joined unit | | 12.12.18 | B213 GHQ 3rd Sch NR 1/24 |
| 16.2.19. | R. C. R. | To be Adjutant Vice Capt [illegible] to B. Unit 66 (rd) | | 9.1.19. | Ac [illegible] 277 [illegible] 20 4/3.3.19 |
| 27 MAR 1919 | Emb. Camp. | Proceeded to England. | 27 [illegible] 1919 | | N.R. Pt.2 O.No [illegible] |
| | | | | | A Brander LIEUT. FOR LT-COL. A. A. G |
| | | Rtn to U.K. - 25-6-19 Demob. | | | |

Army Form B. 103. Regimental Number.....

CERTIFIED 2 JAN 1919 CANADIAN RECORD OFFICE

## Casualty Form—Active Service.

Regiment or Corps.....Manitoba Regiment.....

Rank Lieut Surname DAVIDSON Christian Name Cranston ~~Taylor~~

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

Enlisted (a) ~~22-9-14~~..... Terms of Service (a)..... Service reckons from (a) ~~22-9-14~~.....

Date of promotion to present rank 3.10.15 Date of appointment to lance rank.....

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

or Corps Trade and Rate.....

Occupation..... .....Signature of Officer.

| Report: Date | Report: From whom received | Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A.36, or in other official documents. The authority to be quoted in each case. | Place of Casualty | Date of Casualty | Remarks: Taken from Army Form B.213, Army Form A.36, or other official documents |
|---|---|---|---|---|---|
| | | Embarked ... | | | |
| | | Disembarked... | | | |
| 12-12-18 | MRD | Ceases to be Seconded to C.T.S. Bexhill and SOS Man. Regt'l Depot on proceeding O/S to 8th Batt'n. | Seaford | 15-11-18 | DO 346 |
| | | Lt. for O.C. Man. Regt'l Depot. | | | |
| 30-4-19 | MRD. | Taken pay from service unt. Det to 12th Res Q & R. only | Wetley | 23-4-19 | DO 120. |
| 27-5-19 | MRD. | Det 142 Ath. Team Lndn. | Wetley | 23-4-19 | DO 147. |
| | | Struck off. | | | |

(a) In the case of a man who has re-engaged for, or enlisted in Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.

(b) Signaller, Shoeing-Smith, &c

(17591.) Wt. W 1887—P 1124. 1,000,000. 6/18. D & S. Form B/103. (E. 1256.)

[P.T.O.

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

THIS FORM WILL BE USED FOR ALL RANKS

# MEDICAL HISTORY OF AN INVALID

25

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

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

STATION Witley DATE 11. 3-14-19.

1. 1 (a) Unit 8TH C. I. Bn. (b) Regimental No. ..... (c) Rank Capt.

(d) Surname Davidson (e) Christian name Crawford Taylor.

(f) Home address Suite 20 Acadia Apts 590 Victor St. Winnipeg Man.

(g) Next of Kin Mrs. J. H. S. (Oza) Davidson (h) Relationship Mother

(i) Address of Next of Kin same address

2. Age last birthday 24 Date of birth 4/11/94

3. Enlistment, or Appointment (if an Officer) (a) Place St. Omer (b) Date 3-10-15

4. Personal description:

(a) Height 5 ft. 8 in. (b) Weight 150 (est) (stripped) (c) Complexion Medium

(d) Colour of hair lt. brn. (e) Colour of eyes grey (f) Identification marks, Scars, etc.

Lt. arm. 3 scars posterior aspect lt. elbow. - Scar on wrist

5. Former trade or occupation Sheet metal worker.

| 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 |
|---|---|---|
| | 4 | 233 |

| | Periods | |
|---|---|---|
| | From | To |
| Canada | 21/9/14 | 26/9/14 |
| England | 4-10-14 | 12-2-15 |
| | 17-6-16 | 18-11-18 |
| France or other theatres of War | 12-2-15 | 17-6-16. |
| | 18-11-18 | 27-3-19. |

7. Original disease, or injury PENETRATING WOUND LEFT ARM.

(a) Date of origin 13-6-16 (b) Place of origin Mount Sorel

(c) Cause G.S.W. from enemy shell.

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.)

~~Amputation left arm at hand.~~
Paresis left arm & hand

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.)

Scar 7" long, extending upward from cubital fossa, along inner side of arm. This is tender to pressure - patient complains of tingling in hand and fingers.
No limitation of range of movements.
Power of grip markedly less than on right.
Left pulse at wrist much weaker than right.
~~Radial~~ Brachial artery pulsation not palpable below upper part of scar where it ends abruptly.
Subjective:- Weakness of left arm and hand and tingling pains in palm and fingers.

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

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

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

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

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

Hearing Normal
R/V. 6/12 L/V 6/12
Urine: Sp. Gr. 1020, acid, No albumen & sugar

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

Wounded at Mount Sorrel 13/6/16 - Shrapnel fragments in Lt. Arm.
No record of operation etc. on M.H.S.
Bradford Dec. 12/16 - G.S.W. arm - Unfit for service for 6 weeks.
Bexhill - Nov. 12/17 - G.S.W. arm - 6 months home service
Bexhill - May 28/18 - do - 4 months home service.
Bexhill Nov 7/18 - do - Gen. Service.

Patient states that he was told at hospital that he had an aneurysm of the brachial artery which was tied.
Had tingling pains and partial paralysis of hand, which has almost recovered since operation

10.—(a) (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).)

Nil

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

3 scars & wds. abve lt elbw. - 7" scar inner side of lt arm, just above elbw - Pigmented scar across front of rt. wrist.

11.—(a) Did the disabling condition have its origin before enlistment? no

(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.)

Not applicable

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

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

13. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? 6 months

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

(Record A a)

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

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

17. Recommendations. Nil

C. E. Brain Capt Can Amc
*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 Capt Lieut C.T. Davdson 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

C. Davdson Rank.
*Signature of invalid examined.*

Capt

## OPINION OF THE MEDICAL BOARD

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

Yes

19. Is the invalid fit for

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

20. It is certified that the invalid

(a) Does require treatment. (Give the nature of the condition and of the treatment required and its probable duration.)

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

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

Boarded for return to Canada Cat A5 1A/9-155 1/4/19

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.

PLACE Witley Surrey — *President.*

DATE 11/4/19 — Members

### TO BE COMPLETED WHEN TREATMENT IS REFUSED

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

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

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

*President*

PLACE..... Members

DATE.....

APPROVED BY

*Assistant Director of Medical Services.*

DATE.....

APPROVED BY

I concur in the findings of the Board of Medical Officers as recorded.

*Director-General of Medical Services.*

DATE.....

Captain, R.A.M.C.
for D.M.S.
Canadians

C. If unfit for General Service is he fit for Garrison Duty Abroad..... no

D. If unfit for General Service is he fit for Duty on Lines of Communication..... no

C. If unfit for General Service is he fit for Duty on Lines of Communication.....

D. If unfit for General Service is he fit for Certain Duty Abroad.....

(1) C. If unfit for General Service is he fit for Garrison Duty Abroad? no

D. If unfit for General Service is he fit for duty on Lines of Communication? no

(1) C. If unfit for General Service is he fit for Garrison Duty abroad? No

D. If unfit for General Service is he fit for Duty on lines of communication? No

**CONFIDENTIAL.** 8D 113 Army Form A. 45.

PROCEEDINGS OF A MEDICAL BOARD

assembled at Byhill on Nov 17/1917

by order of Canadians

for the purpose of examining and reporting upon the present state of health of

(Rank and Name) Lt. C. T. DAVIDSON (Corps) C. T. S.

Age 23 Service 3 9/12 Disability G.S.W. Lt. Arm.

Date of commencement of leave granted for present disability 2-12-16

Date on which placed on half-pay for present disability not applicable —

The Board having assembled pursuant to order, and having read the instructions on the back of the form, proceed to examine the above-named officer and find that

this officer has had 10 months home service. Left arm is greatly wasted much atrophied & the movements & pronation give great pain.

Strength of grip about 30% of normal.

Pulse rate normal. Heart & lungs normal.

The Board will classify the officer under one of the following categories, the probable period of unfitness for the higher categories being stated.

1. Fit for General Service ..... No - 6 months
2. Fit for service in a Garrison or Labour Battalion abroad. *No officer likely to be fit for general service within six months should be classed in this category* ..... No - 6 months
3. Fit for Home Service ..... Yes - 6 months
4. Fit for Light Duty at Home .....
5. Requiring indoor hospital treatment—
   (a.) In an Officers' Hospital .....
   (b.) In an Officers' Convalescent Hospital .....
6. (a.) Fit for light duty at a Command Depôt .....
   (b.) Fit for treatment only at a Command Depôt .....
7. In very special cases such as tuberculosis leave not exceeding six months may be recommended by Medical Boards for special treatment, the Board giving detailed reasons for any such recommendation .....
8. Was the disability contracted in the service? Yes
9. Was it contracted under circumstances over which he had no control? Yes
10. Was it caused by military service? Yes
11. If caused by military service, to what specific military conditions is it attributed? G.S.W. - active
12. If the disability was not caused by military service, was it aggravated thereby, and if so, by what specific military conditions? not applicable

I concur in the findings of the Board of Medical Officers hereto recorded.

Captain, D.A.D.M.S. for D.M.S. Canadians.

Officer's Address: C.T.S. Byhill

Signatures: T.S. Jackson Capt President.
F. Mackelcan Capt C Members.

T.S.J.

[P.T.O.

## INSTRUCTIONS.

1. On the occasion of an Officer's first appearance before a Medical Board for his present disability, the circumstances under which the disability was contracted will be fully detailed; whenever possible a statement of the case by his medical attendant will also be attached.

2. In recording the proceedings of subsequent Boards, the progress of the individual since his last appearance will be clearly and concisely stated so as to ensure a continuous medical history of the case being available.

3. Enteric Fever, Dysentery, Malaria, etc., contracted when on service abroad, in countries where there is a special liability to the disease, are to be regarded as caused by military service.

(2541.) Wt. W16848/G9255. 500,000. 3/17. P.P.Ltd. **Est. No. 1069.**

P. 880.

DEPARTMENT OF MILITIA AND DEFENCE.

# WAR SERVICE GRATUITY.

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

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

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

1. Christian names Cranston Taylor 2. Surname Davidson

3. Rank Capt. 4. Original Unit 8th Bn 5. Reg. No. ———

6. Address, in full, to which future payments of gratuity are to be forwarded 40 Belfast Bank ~~Bank of Canada Winnipeg Man.~~ Donegal St Belfast Co Down Ireland

7. Date of enlistment in the C.E.F. Sept 21st 14.

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

9. Relationship of such dependent Not applicable

10. Address, in full, of such dependent Not applicable

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:— Not applicable

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

14. ~~Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service~~ No

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 5 7 months. Continuously with 8 Bn. Total Service 4 yr + 9 months

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

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

5434. Wt. /30P. 150,000(3). 2/19. S.O.,F.Rd.

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

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

20. Have you been issued with a War Service Badge? If so what class? No

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

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

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

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

24. Are you now serving in the C.E.F.? If not, give: (a) Date of discharge 16-6-19 (b) Reason for discharge Permitted to Return to British Isles.

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.~~ 8th Bn. 15-2-15 — 25-3-19.

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

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

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

Signature of Applicant: C. Mawdson Capt

Place of Residence: ~~Duke of Scotia apt~~ ~~290 Victor Street~~ 27 Victoria St Belfast Ireland

Declared before me at: Brumholt

This 15th day of April 1919

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

R.W. Tuke Major

## POST DISCHARGE PAY.

| Date paid. | Paid Soldier | Paid Dependent | War Service Gratuity | Net amount due |
|---|---|---|---|---|
| | | | | |
| | | | | |
| | | | | |

Certified Correct.

District Paymaster.

29281 THE MORTIMER SYSTEMS, OTTAWA, CANADA

make 6 mo. P.L.

110

# MILITIA AND DEFENCE

## ASSIGNED PAY

### OVERSEAS CONTINGENTS

To Whom Mrs. T. Davidson,

Address 799 Alexandra Ave, Winnipeg.

By Whom Assigned Davidson, L.

Regtl. No.

Rank ~~"Lieut."~~ Lieut

Corps "D" Co. 8th Batt. 2 Bgde.

Rate #15.00 per mth.

xx

## PAYMENTS

| Month | Year | Cheque No. | Amt. | REMARKS |
|---|---|---|---|---|
| Aug. | 1914 | | | Stop Paymts 1/6/17. Personal's 3 M 12/6/17 A.R.S. 14/6/17 |
| Sept. | | E | | |
| Oct. | | E 1561 | 15- | |
| Nov. | | F 11443. | 15 | |
| Dec. | | B 3489. | 15 | |
| Jan. | 1915 | A 4937 | 15 | |
| Feb. | | H 5624 | 15 | |
| March | | H 6706 | 15 | |
| Apl. | | H 8088 | 15 | |
| May | | F 7595 | 15 | |
| June | | E 8965 | 15 | |
| July | | D 11361 | 15- | |
| Aug | | C 11899 | 15 | |
| Sept. | | B 13042 | 15- | |
| Oct. | | A 14391 | 15 | |
| Nov. | | J 9605 | 15- | |
| Dec. | | D 11298 | 15 | |
| Jan. | 1916 | H 17250 | 15 | |
| Feb. | | G 18052 | 15 | |
| March | | K 16625 | 15 | |

MILITIA AND DEFENCE

# ASSIGNED PAY

OVERSEAS CONTINGENTS

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

Sheet No. 2. Mrs T. Davidson

Name of Soldier Davidson C. Lieut Capt.

L. L. Job 89002.—Req. 6213.

## PAYMENTS.

| Month. | Year. | Cheque No. | Amt. | $15.00 | Remarks. 8th Bttn |
|---|---|---|---|---|---|
| April | 1916 | 15843 | 15 | | |
| May | | 16992 | 15 | | |
| June | | R 8843 | 15 | | |
| July | | F 8882 | 15 | | |
| Aug. | | 15 136884 | 15 | $15 Refund Requested | |
| Sept. | | E 16051 | 15 | | |
| Oct. | | E 20433 | 15 | | |
| Nov. | | M 25465 | 15 | 15.00 Received by Com and Soldiers acct Dental File 042926 MD 580 12/17 | |
| Dec. | | 931491 | 15 | | |
| Jan. | 1917 | L 38533 | 15 | | |
| Feb. | | L 43608 | 15 | 15 H. | Credit Slip rendered Refunds - Dm°H16/18 |
| March | | M 48918 | 15 | 15 H. | |
| April | | L 891 | 15 | 15 L | |
| May | | I 7197 | 15 | | |
| June | | 613500 | 15 | 15 Nil | |
| July | | | | | |
| Aug. | | | | | |
| Sept. | | | | | |
| Oct. | | | | | |
| Nov. | | | | | |
| Dec. | | | | | |
| Jan. | 1918 | | | | |
| Feb. | | | | | |
| March | | | | | |
| April | | | | | |
| May | | | | | |
| June | | | | | |
| July | | | | | |

MILITIA AND DEFENCE

# ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier.....

## PAYMENTS.

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

L. L. 28912. M. & D. 8368.

O.H. 5-1-

MILITIA AND DEFENCE

# ASSIGNED PAY

## OVERSEAS CONTINGENTS

M. F. W. 12.
25m.—10-17.
H. Q. 1772-39-819.

To Whom Mrs J H S Davidson
Address Suite no 1 Orris Blk
987 Sherbrooke St
Winnipeg
Man.

Rate $ 25.00

By Whom Assigned Davidson C.T.
Regtl. No.
Rank St.
Corps 8th Can Training School

SPECIAL REMITTANCE

P.L. 9-D-203. P.M. 27.11.17

## PAYMENTS

| Month | Year | Cheque No. | Amt. | REMARKS |
|---|---|---|---|---|
| Aug. | 1914 | | | |
| Sept. | | | | |
| Oct. | | | | |
| Nov. | | | | |
| Dec. | | | | |
| Jan. | 1915 | | | 1917 |
| Feb. | | | | |
| March | | | | |
| April | | | | |
| May | | | | |
| June | | | | |
| July | | | | |
| Aug. | | | | |
| Sept. | | | | |
| Oct. | | | | |
| Nov. | | | | |
| Dec. | | U 47696 | 25.00 | Mailed 17/12/17 ✓ |
| Jan. | 1916 | | | |
| Feb. | | | | |
| March | | | | |

8B 113

CONFIDENTIAL. Army Form A. 45.

PROCEEDINGS OF A MEDICAL BOARD

assembled at Hastings, on 14th June 1917.

by order of A.D.M.S. Canadians, Hastings

for the purpose of examining and reporting upon the present state of health of

(Rank and Name) LIEUT: C.T. DAVIDSON. (Corps) 8th Bn:

Age 22 Service 3 4/12 Disability G.S.W. LEFT ARM.

Date of commencement of leave granted for present disability 2nd Dec: 1916.

Date on which placed on half-pay for present disability

The Board having assembled pursuant to order, and having read the instructions on the back of the form, proceed to examine the above-named officer and find that

His Officer's condition is the same as at his last Board.

A.P.M's Office Hastings
24 Swantip Blac. 1st Tuesday

25

The opinion of the Board upon the questions herein is as follows:—

(1.) *a.* Is the officer fit for "General Service"? No

*b.* If not so fit, how long is he likely to be unfit? Two months

(1) C. If unfit for General Service is he fit for Garrison Duty Abroad..... No.

D. If unfit for General Service is he fit for Duty on Lines of Communication..... No

(2.) Is he fit for Garrison Duty at home? Not applicable

(3.) Is he fit for Duty on Lines of Communication at home? Not applicable

(4.) Is he fit for General Service? Yes.

(5.) Was it caused by military service? Yes

(6.) If caused by military service, to what specific conditions is it attributed? G.S.W. in action

(7.) If the disability was not caused by military service, was it aggravated by it? Not applicable

I concur in the finding of the Board of Medical Officers recorded.

Lt Col D.M.S. Travelling for D.M.S. Canadian Contingents.

Signatures { H. Wallace Capt. C.A.M.C. President.
A.H. Hough Lieut C.A.M.C. Members.

Man

X 518. W15367/M1383. 350m. 2/17. D.P.W. Forms A.45 27

[P.T.O.

8D 113

CONFIDENTIAL. Army Form A. 45.

A.P.M's Office Hastings
24 Swansea Place, Mt. Pleasant

PROCEEDINGS OF A MEDICAL BOARD

assembled at Hastings, on 14th June 1917.

by order of A. D. M. S. Canadians, Hastings

for the purpose of examining and reporting upon the present state of health of

(Rank and Name) LIEUT: C.T. DAVIDSON. (Corps) 8th Bn:

Age 22 Service 3 4/12 Disability G.S.W. LEFT ARM.

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The Board having assembled pursuant to order, and having read the instructions on the back of the form, proceed to examine the above-named officer and find that

His Officer's condition is the same as at his last Board.

25

The opinion of the Board upon the questions herein is as follows:—

(1.) *a.* Is the officer fit for "General Service"? No

*b.* If not so fit, how long is he likely to be unfit? Two months

(2.) *a.* *If unfit for General Service, is he fit for service at home?* Yes.

*b.* *If not so fit, how long is he likely to be unfit for service at home?* Not applicable

*c.* *If unfit for General Service at home, is he fit for light duty at home?* Not applicable

*d.* *If not so fit, how long is he likely to be unfit for light duty at home?* Not applicable

(3.) Was the disability contracted in the service? Yes.

(4.) Was it contracted under circumstances over which he had no control? Yes.

(5.) Was it caused by military service? Yes

(6.) If caused by military service, to what specific conditions is it attributed? G.S.W. in Action

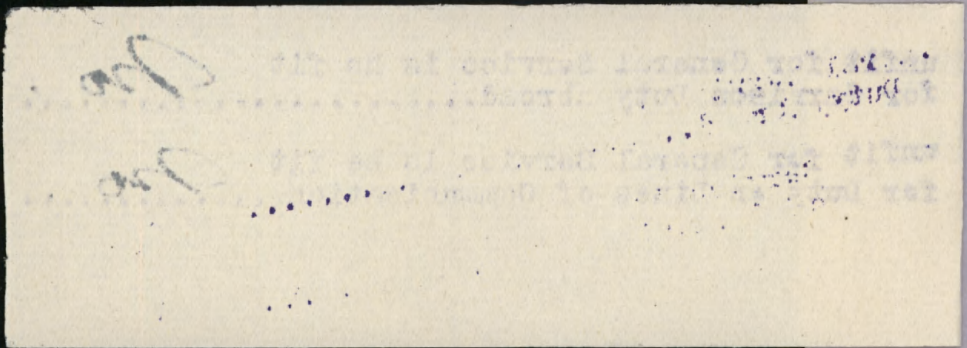
(7.) If the disability was not caused by military service, was it aggravated by it? Not applicable.

I concur in the findings of the Board recorded.
Lt-Col D.M.A. Travelling for C.A.M.C. Canadian Contingents.

Signatures { H. Hamilton Capt. C.A.M.C. President.
A. H. Hough Lieut C.A.M.C. Members.

X 518. W15367/M1383. 350m. 2/17. D.P.W. Forms A. 45 27

[P.T.O.



## Instructions.

1. On the occasion of an Officer's first appearance before a Medical Board for his present disability, the circumstances under which the disability was contracted will be fully detailed; whenever possible a statement of the case by his medical attendant will also be attached.

2. In recording the proceedings of subsequent Boards, the progress of the individual since his last appearance will be clearly and concisely stated so as to ensure a continuous medical history of the case being available.

3. Enteric Fever, Dysentery, Malaria, etc., contracted when on service abroad, in countries where there is a special liability to the disease, are to be regarded as caused by military service.