

2463

Original

ATTESTATION PAPER.

No. 835355

146th OVERSEAS BATTALION, C. E. F.

Folio. ✓

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS)

- 1. What is your surname?..... *Dafoe*
- 1a. What are your Christian names?..... *Gerald*
- 1b. What is your present address?..... *Clinton, Ont.*
- 2. In what Town, Township or Parish, and in what Country were you born?..... *Clinton, Ont. Can*
- 3. What is the name of your next-of-kin?..... *J. M. Dafoe*
- 4. What is the address of your next-of-kin?..... *Clinton, Ont. Que*
- 4a. What is the relationship of your next-of-kin?..... *Father*
- 5. What is the date of your birth?..... *May 2, 1897*
- 6. What is your Trade or Calling?..... *Miller*
- 7. Are you married?..... *No*
- 8. Are you willing to be vaccinated or re-vaccinated and inoculated?..... *Yes*
- 9. Do you now belong to the Active Militia?..... *No*
- 10. Have you ever served in any Military Force?..... *No*
- 11. Do you understand the nature and terms of your engagement?..... *Yes*
- 12. Are you willing to be attested to serve in the } CANADIAN OVER-SEAS EXPEDITIONARY FORCE? } *Yes*

Actual date of Birth on 29/16/17 Birth Cert. shows date of Birth. 1/5/1900

FOR LT: COM: G RECORDS, C. O. M. F. LIEUT: *Miller*

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

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

Date *January 18* 191*6*. *Gerald Dafoe* (Signature of Recruit)  
*McSnider Lieut* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Gerald Dafoe*, do make Oath, that I will be faithful and bear true Allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will as in duty bound honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity, against all enemies, and will observe and obey all orders of His Majesty, His Heirs and Successors, and of all the Generals and Officers set over me. So help me God.

Date *January 18* 191*6*. *Gerald Dafoe* (Signature of Recruit)  
*McSnider Lieut* (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 *Clinton* this *18<sup>th</sup>* day of *January* 191*6*.  
*McSnider* (Signature of Justice)

Description of Gerald Dafoe on Enlistment.

Apparent Age 18 years ..... months.  
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

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

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

Height ..... 5 ft. 6 ins.

Chest measurement { Girth when fully expanded ..... 34 ins.  
Range of expansion ..... 3 ins.

Complexion ..... Fair

Eyes ..... Blue

Hair ..... Light Brown

Nil

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

CERTIFICATE OF MEDICAL EXAMINATION.

I have examined the above-named Recruit and find that he does not present any of the causes of rejection specified in the Regulations for Army Medical Services.

He can see at the required distance with either eye; his heart and lungs are healthy; he has the free use of his joints and limbs, and he declares that he is not subject to fits of any description.

I consider him\* fit ..... for the Canadian Over-Seas Expeditionary Force.

Date ..... January 17th ..... 191 6

Place ..... Kingston, Ont. .....

[Signature]  
[Signature]  
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.

..... Gerald Dafoe ..... 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]  
..... (Signature of Officer)

Date ..... January 21st ..... 191 6

REGIMENTAL DOCUMENTS

NAME *DAFoe Gerald*

*Pte*

REGT. NO. *835355*

UNIT *3 Special Service Coy* H. G. FILE NO.

*5*

CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505  
REFERENCE

NON-EFFECTIVE BY

DEATH

Category

*00130*

DISCHARGE

Category

*Services no longer required*

DESERTION

*H. G. M. R.*

*2-1  
16-1  
28-1*

*M*

*H*

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

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

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

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

REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)

COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)

MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)

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

MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)

MEDICAL EXAMINATION (M.F.W. 129)

TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)

PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)

DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)

LAST PAY CERTIFICATE (M.F.W. 44)

PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)

PARTICULARS OF CHARACTER (A.F.W. 3226)

COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)

*4 Cas card*

*4 2811207*

*4 m...*

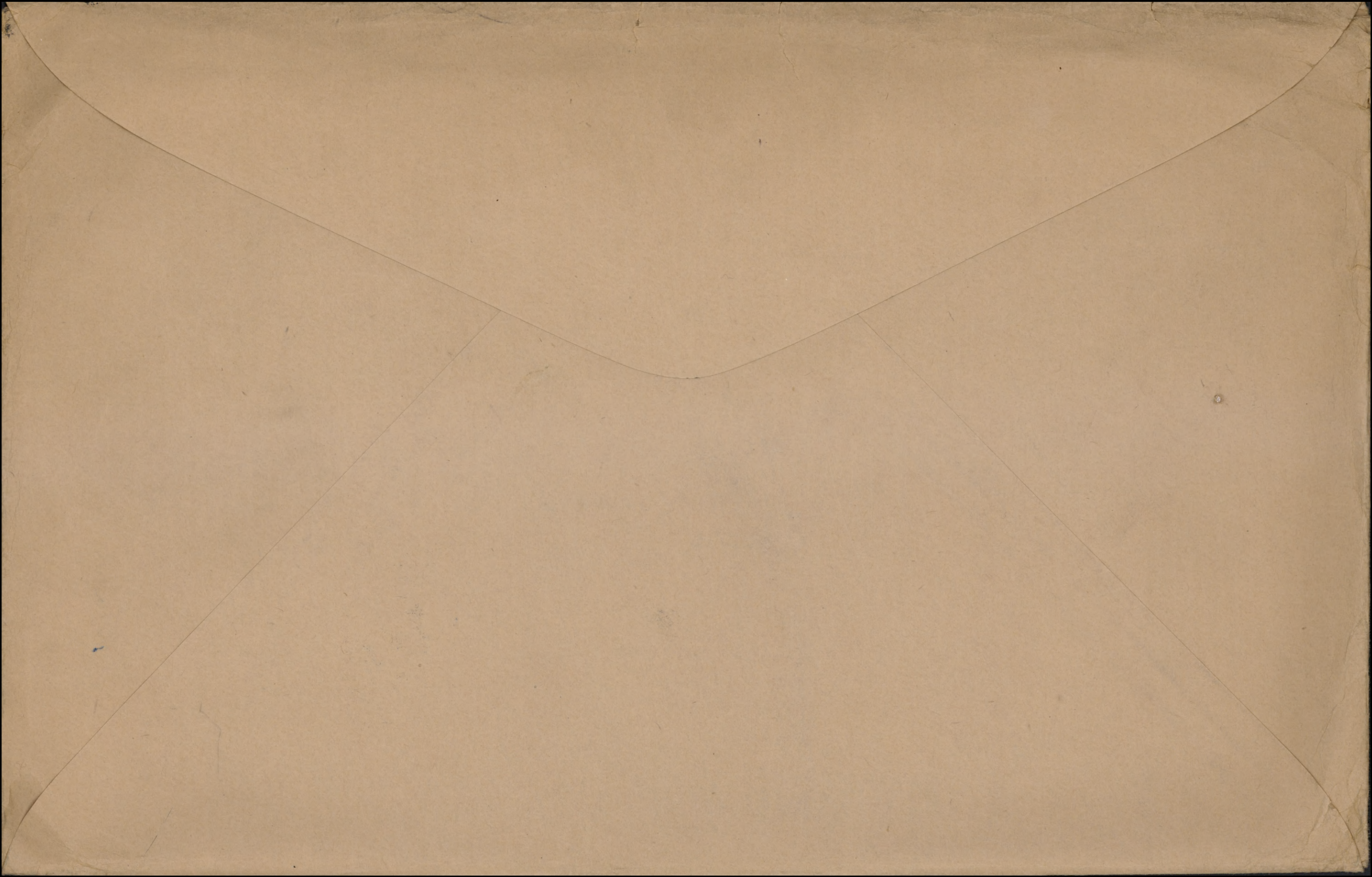
*1 M & W 67.*

*1 M...*

*1 A. G. Board*

*1 DWS 1394*

*1 CAD 5109*



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				

## Casualty Form—Active Service.

Regiment or Corps 146 Overseas Battalion C.E.F.Regimental No. 83555 Rank Private Name Dejoe Gerald

Enlisted (a) \_\_\_\_\_ Terms of Service (a) \_\_\_\_\_ Service reckons from (a) \_\_\_\_\_

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

Extended \_\_\_\_\_ Re-engaged \_\_\_\_\_ Qualification (b) \_\_\_\_\_

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
11 DEC 1917		TAKEN ON STRENGTH C.D.D, BUXTON Pt. 11 ORDER No. 293			Lieut.-Col. Canadian Discharge Depôt.
23 DEC 1917		EMBARKED FOR CANADA FROM LIVERPOOL			Lieut. Col. Canadian Discharge Depôt.
		DISCHARGED & STRUCK OFF STRENGTH		Kingston 22-2-18 Auth 3MD. 88-D-194 Dated 12-2-18	Lieut. & Adjutant No. 3 Special Service Company, C.E.F.

(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.

2463

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				
3.11.16	C. B. D.	ARRIVED C. B. D.	FRANCE	3.11.16	N. R. D. PART II ORDERS No 72 D 8.11.16
3.11.16	C. B. D.	LEFT C. B. D. FOR		19.11.16	N. R. D.
27.11.16	O. C. BN	ARRIVED <i>of [unclear]</i> BN.	FIELD	22.11.16	B. 213 <i>101-554</i>
31.3.17	42 bds.	In hospital wounded		23.3.17	B 213
30.3.17	22 Gen.	Gen. IV (4) R. L. L. L.	22 Gen.	30.3.17	W 3034 / 252.
2.4.17	do	do seriously ill		2.4.17	W 3034 / 255
31.3.17	42 bds.	S. S. W. Capt. Adm. 243	To A.T. 12.	29.3.17	A 36 / E. 3220 Sep. 198
4.5.17	22 Gen.	" To England		4.5.17	W 3034 / 330
4-5-17.	O. C. H/S St. Denis	Invalided (wounded) and posted to 2nd. Central Ontario Regt'l depot, Shorncliffe		4-5-17.	W. 3083/A3021 Pt. II. 54 d/28-5-17.
<i>[Signature]</i>					Lieut. for <i>[unclear]</i> , A. A. G. Canadian Section, G. H. Q. 3rd Echelon, B. E. F.
13-5-17	2nd C. O. RD	Posted from 4th B. M.P.	Bandy	4-5-17	AD. 65 <i>[Signature]</i> FOR LT: OOL: W/O RECORDS, G. O. M. F.
3-11-17	<i>[unclear]</i>	Lieut. Furlough	Epsom	31-10-17	DO 239
11-11-17	<i>[unclear]</i>	Detached to Depot Coy.	E. Sandling	11-11-17	DO 247
10-12-17	<i>[unclear]</i>	On Com C. D. D.	Buxton	10-12-17	DO 273
<i>[Signature]</i>					Capt. & Adj. t. 2nd Cent. Ont. Reg. Depot.





2463

R-122  
8,401-50,000-21-10-16  
835355

LTR

Rank

Name

DAFOE, Gerald ✓

Reg'l No.

Unit

146th, Bn.

If in perm. Corps,  
What Unit? }

Married or Single

Single ✓

Place and Date of Enlistment

Flinton, Jany, 18th, 1916. ✓

Place of Birth

Flinton, Ont. ✓

Name and Address, Next-of-Kin J. M. Dafoe.,

Flinton. Ontario, Canada. ✓

Relationship

Father. ✓

Assigned Pay Monthly \$

4.51R

Payable to

Separation Allowance \$

N/E. R.B. No.

11288

Payable to

File R.L.

Category

Relationship

N/E. R.B. No. 3064

Relationship

File R.L.

Category Full Cas.

Discharge, Date and Place

Reason

Character

Report		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
Date.	From whom received.				
		Arrived in ENGLAND S.S. SOUTHLAND		6, 10, 16	
	7 TO 16	146th Bn Tfd. to 95th, Res. Bn.	Lower Didgate	6-10-16	DO 248
	8 10 16	95th Bn TCS from 146th Bn	Lr. Dibgate	6.10.16	DO 262
24-10-16	" "	S.O.S. on Trans. to 4th Bn R.	" "	24-10-16	" 281
	8 11 16	4CMR	Taken On Strength. Field	3/11/16	Pt. II O 72
27-3-17	" "	No. 42 Cas. Cpl. (Dangerously ill)	Field	25-3-17	C.I.A. 382. Not stated
2. 4. 17	62 - "	Trans. No. 22 Gen. Hospital DANNES	CAMIERS	30. 3. 17	C.L. A. 356 GSW. Rt. Thorax Seriouly ill.
14. 4. 17	62 " "	O.C. 22 Gen. Hosp. Camiers reports formerly seriously ill now Dangerously ill	" "	12. 4. 17	C.L. A. 395. G.S.W. Thorax
7. 5. 17	" " "	Removed from Dangerously ill list	" "	3. 5. 17	C.L. A. 414 - " -

A.F.B. 108 CHECKED  
24 NOV 1916  
mme

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.				
8.5.17	4 <sup>th</sup> C.M.R.	oc. 4 <sup>th</sup> North <sup>n</sup> Gen. Hoapl. Lincoln Reports - Dangerously wounded		4.5.17	C.L.B. 221 G.S.W.-R. Thorax
13.5.17	2 <sup>nd</sup> B.O.B.W.	G.O. Strength	E Sandling	4.5.17	B.D. 65 (4th P.M.B. 54 D/28.5.17)
23.5.17	4 <sup>th</sup> C.M.R.	oc. 4 <sup>th</sup> North <sup>n</sup> Genl Hoapl Lincoln Rept. Slight Improvement	Lincoln	18.5.17	C.L.B. 233 <sup>Dang. 1 wdd</sup> G.S.W. R Thorax
11.8.17	"	Spd to Gran. Spec. Hospital	Ramsgate	8.8.17	C.L.B. 290. -- --
8.9.17	2 <sup>nd</sup> C.O.R.	Spd to L <sup>th</sup> Derby War Hoapl	Warrington	30.8.17	C.L.B. 6 G.S.W. -- --
12.9.17	"	Spd to C.C. Hoapl Woodcote	Epsom	10.10.17	C.L.B. 35 G.S.W. thorax
12.11.17	"	Drick? " " " "	"	31.10.17	C.L.B. 61. -- --
10-12-17	2 <sup>nd</sup> B.O.R.D.	On comm to G.D.D. Buxton.	E. Sand'g.	10-12-17	80.273.
2-1-18	"	cease to be on Com CDD TSOS Saw to Can. Minor. Born: 1.5.00.	"	23-12-17	DDI.
Di Refs to	For class Duty		M.D. 3 Kingston	5/1/18	nr 417.

2463

Medical Examination upon leaving the Service  
of an Officer fit for general service or a Soldier fit for duty.

Officers leaving the Service upon being found unfit for general service by a Medical Board, and Soldiers leaving the Service upon being found otherwise than fit for duty by a Medical Board, are not to be reported on this Form.

Rank pte Name Dafe Surname Gerald  
Unit of Corps SS Coy No 3 (If a soldier) Regtl. No. 83526J  
Born at F. Britain on, (date) May 2<sup>nd</sup> 1900  
Signature (for identification) Gerald Dafe

The examination is to be made jointly by two Medical Officers.

1. PHYSIQUE—Any deformity, maiming or lameness? If so, describe.

Weight 135 lbs.  
Height 5 ft. 6 in.

Colour of eyes Blue  
Identification Marks scar over back right chest.

2. NUTRITION AND DIATHESIS?

Good

After searching enquiry and thorough examination is any evidence found of disease or impairment of the parts indicated below? If so, describe.

3. NERVOUS SYSTEM? Is there a history of previous disability?

nil

4. RESPIRATORY SYSTEM? Is there a history of lung trouble?

Empyema & bullet in chest.

5. HEART?

Abnormal Sounds? no  
Abnormal Size? no

Pulse Rate? 74

Intermittence or Irregularity? no

Muscular Tone? Good

6. ARTERIES.—(a) Any hardening or nodulation? no

(b) Blood Pressure.

7. DIGESTIVE SYSTEM? (Condition of teeth and tonsils to be included).

nil

8. GENITO-URINARY SYSTEM?

Urinalysis—S.G.? 1021 Reaction? acid Albumen? nil Sugar? nil

9. SKIN, MIDDLE EAR, EYE or any other part?

nil

10. Is there any evidence of impairment of health or physical condition not mentioned above? If so, describe.

no

11. Opinion as to the health and physical condition of the one examined?

Fair

Examined at Ford Henry Signed W. A. Jones Capt M. O.  
Date Feb 5<sup>th</sup> 1918 Signed A. Macdonald Capt M. O.  
Gerald Dafe Signature note of Soldier.

If any disease or impairment of health or physical condition is discovered or complained of by the soldier examined, this report should be sent at once to the O. C. concerned for the Officer or Soldier to be sent before a Medical Board for regular boarding

Medical Examination upon leaving the Service

of an Officer for general service in a Soldier at leaving

The officer leaving the Service upon being found unfit for general service by a Medical Board and Soldiers leaving the Service upon being found otherwise than fit for duty by a Medical Board, are to be reported on this form.

Rank	...
Local Corps	...
Home	...
Signature for Identification	...
1. PRESENT AND PREVIOUS MEDICAL HISTORY, including or including, if applicable, the following:	...
2. PREVIOUS AND PRESENT MEDICAL HISTORY, including or including, if applicable, the following:	...
3. PRESENT AND PREVIOUS MEDICAL HISTORY, including or including, if applicable, the following:	...
4. PRESENT AND PREVIOUS MEDICAL HISTORY, including or including, if applicable, the following:	...
5. PRESENT AND PREVIOUS MEDICAL HISTORY, including or including, if applicable, the following:	...
6. PRESENT AND PREVIOUS MEDICAL HISTORY, including or including, if applicable, the following:	...
7. PRESENT AND PREVIOUS MEDICAL HISTORY, including or including, if applicable, the following:	...
8. PRESENT AND PREVIOUS MEDICAL HISTORY, including or including, if applicable, the following:	...
9. PRESENT AND PREVIOUS MEDICAL HISTORY, including or including, if applicable, the following:	...
10. PRESENT AND PREVIOUS MEDICAL HISTORY, including or including, if applicable, the following:	...
11. PRESENT AND PREVIOUS MEDICAL HISTORY, including or including, if applicable, the following:	...
12. PRESENT AND PREVIOUS MEDICAL HISTORY, including or including, if applicable, the following:	...
13. PRESENT AND PREVIOUS MEDICAL HISTORY, including or including, if applicable, the following:	...
14. PRESENT AND PREVIOUS MEDICAL HISTORY, including or including, if applicable, the following:	...
15. PRESENT AND PREVIOUS MEDICAL HISTORY, including or including, if applicable, the following:	...
16. PRESENT AND PREVIOUS MEDICAL HISTORY, including or including, if applicable, the following:	...
17. PRESENT AND PREVIOUS MEDICAL HISTORY, including or including, if applicable, the following:	...
18. PRESENT AND PREVIOUS MEDICAL HISTORY, including or including, if applicable, the following:	...
19. PRESENT AND PREVIOUS MEDICAL HISTORY, including or including, if applicable, the following:	...
20. PRESENT AND PREVIOUS MEDICAL HISTORY, including or including, if applicable, the following:	...

2463

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

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
M. G. Epsom	9	10	17	31	OCT	1917	Sharp R <sup>s</sup> chest. (flesh).	23	Had a piece of rib resided for drainage of pleural cavity. Metal still present. Temp normal; should be boarded for employment. Discharge to Regt Depot.	<i>G. A. M. G.</i> CAPT. G. A. M. G. DIVISION.

2463

# 8.35355

To be used (a) for recruits enlisting direct into the Regular Army, and (b) for men of the Territorial Force when they are admitted to Hospital. Army Form B. 178<sup>A</sup> to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY OF

Surname Wase Christian Name Wase

TABLE I.—General Table.

Birthplace { Parish..... }  
 { County..... }

Examined { on.....day of.....191 }  
 { at..... }

Declared Age .....years.....days.

Trade or Occupation.....

Height.....feet.....inches

Weight .....lbs.

Chest Measurement { Girth when fully Expanded }.....inches  
 { Range of Expansion }.....inches

Physical Development .....

Vaccination Marks { Arm..... RIGHT LEFT }  
 { Number..... }

When Vaccinated .....

Vision { R.E.—V = ..... }  
 { L.E.—V = ..... }

(a) Marks indicating congenital peculiarities or previous disease—

.....

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

.....

Approved by .....  
 Rank .....  
 Medical Officer.

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

Joined on enlistment	Corps	Regtl. No.

Transferred to { ..... }

Became non-effective by .....  
 on..... day of .....191...  
 (Signature).....  
 (Rank).....

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

Date	Brief Details and Signature

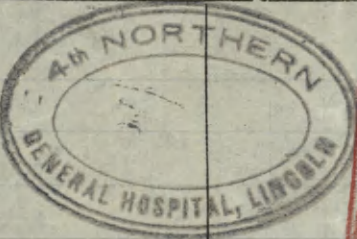
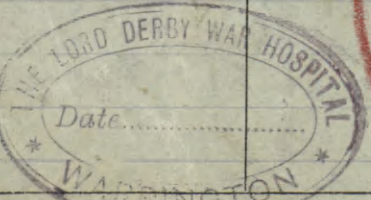
TABLE IV.—Service Table.

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

2463

Christian Name

Surname

STATION.	Date of Arrival at the Station.	DATES OF						DISEASE.	Number of days in Hospital.	Remarks on nature of the disease: how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
		Admission into Hospital.			Discharge from Hospital.						
		Day	Month	Year	Day	Month	Year				
		5	5	1917	7	8	1917	R.W. chest (4-4) Penetrating.	94	Bullet remains in or attached to Pericardium. Empyema drained in places. healing favourable condition found upon (transferred to Granville Special Canadian Hoptl. Ramsgate)	H. W. M. H. Smith Capt R.A.M.C. F.
Crawley Special Hoptl Ramsgate		7	8	17	30	8	17	S. D. W. Chest	24	Bullet still in chest wound became asepti Empyema followed. Operation for drainage, complaints of pain & tightness in chest - on deep inspiration Present weakness Nothing definite can be made out in lungs. Breathing exercises & other diet. Improving. Hans & Epton	
		30	8	17	9	10	17		41		almond Capt J. B. Smith

MEDICAL HISTORY SHEET.

Surname Dybb Christian Name Ernest

Examined { on 17 day of Jan 1916  
at Plunk's Out  
Birthplace { City or Town St. Catharines  
County Waddington

Approved by H. Lindell  
Rank Capt M.O.

Apparent age 18  
Trade or occupation Farmers & Miller  
Height 5 Feet 6 Inches.  
Weight 120 Lbs.

Date.	Fit or Unfit.	EXAMINED FOR RE-ENGAGEMENT.
		M.O. <u>9 MAY 1917</u>
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Chest measurement { Minimum 31 inches.  
Maximum expansion 34 inches.  
Physical development Good  
Small-Pox Marks NMS

Vaccination Marks { Arm Right Left.  
Number NMS

Date.	Result.	VACCINATIONS.
<u>Aug 27</u>	<u>Good</u>	<u>H. Cheaspe</u> M.O.
		M.O.
		M.O.

Date.	Result.	ANTI-TYPHOID INOCULATIONS, ETC.
<u>July 8</u>	<u>Good</u>	<u>H. Cheaspe</u> M.O.
<u>" 15</u>	<u>Good</u>	<u>H. Cheaspe</u> M.O.
<u>" 22</u>	<u>Good</u>	<u>H. Cheaspe</u> M.O.

When Vaccinated last NMS  
(a) Marks indicating congenital peculiarities or previous disease ✓

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

Enlisted on 17th day of January 1916 at Kingston, Ontario

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>146th Bn.</u>	<u>835355</u>		<u>18/1/16.</u>
Transferred to	<u>drafted to 95th Bn</u>	<u>"</u>		<u>6/10/16.</u>
	<u>Drafted to 4th C.O.R.D.</u>	<u>"</u>		<u>4-5-17</u>

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>Epson</u>	<u>Oct. 24/17</u>	<u>S.S.W. right chest</u>	<u>CIII</u>
<u>Fort Henry</u>	<u>Feb 5/15</u>	<u>S.S.W. right chest</u>	<u>CIV</u>

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



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835355  
Pte Majoe G.

### DENTAL CERTIFICATE.

The following Certificates will  
be attached to the Medical History Sheets of all  
Other Ranks being returned to Canada for disposal.

2nd Lt. Col.

Date of Examination.	Present Dental Condition.	In case of loss or decay of teeth. Is the loss due to wounds, injury or disease directly attributed to Active Service?	Has he ever declined Dental Treatment.	Recommendation.
13.12.17.	Fit.			G. M. ... Capt Hill

OFFICIALS' REPORT BY TORONTO ON CANADA.

General Board Office,  
Queen's Park,  
Toronto, Ont.,  
Canada.

It is to be noted that the correct statement  
of facts of the relative activities noted has been  
produced, and I certify that the same is true  
to the best of my knowledge and belief.

*W. J. ...*

W. J. ...  
for District ...  
D. O. ...

Mr. ...  
The ...  
and ...  
left ...

OVERSEAS MILITARY FORCES OF CANADA.

Canadian Record Office,  
Green Arbour House,  
Old Bailey,  
London. E.C.4.

R. L. 22-3.  
No....."E".....27617:.... Officer i/c R.2.

27th June 1917.

MINOR.

No.835355.  
Pte.DAFOE.Gerald.  
2nd Gen: Ont:  
Regt: Depot.

This is to certify that the correct statement  
of Birth of the soldier marginally noted has been  
produced, and I certify that he was born on the  
1st day of May ~~189~~ 1900  
To be attached to ORIGINAL. Attestation  
Paper, please.

LIEUT.  
~~EXAMINER~~  
for Lieut. Col. i/c Records.  
C.O.M.F.

BJ.

*Rgr.  
R.2.A5.*

# CANADIAN CONTINGENT EXPEDITIONARY FORCE

## LAST PAY CERTIFICATE OVERSEAS CASUALTY (FRANCE)

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

Regimental No. 835355 Rank Pte Name Dafoe, G.

Corps #3 S.S. Coy. who was\* Discharged.

On FEB 22 1918 191... to...  
\*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 14/12/17 191...  
 to FEB 22 1918 191..., the inclusive date of transfer or discharge.

Dr.	\$	c.	Cr.	\$	c.
Bal. Dr. from prev. month <u>R.D. P. Sheets</u>			Bal. Cr. from prev. month <u>L.P.C.</u>	<u>54</u>	<u>33</u>
Advances } No. <u>Cash</u>	<u>15</u>		Reg'tl Pay <u>71</u> days at \$ <u>1</u> c.	<u>71</u>	
by } No. <u>4368</u>	<u>75</u>		Field Allow. <u>71</u> days at \$ <u>10</u> c.	<u>7</u>	<u>10</u>
Cheques } No. <u>4368</u>	<u>15</u>		Separation Allowances* (Monthly)		
Assigned Pay and Sep'n Allice. No.			Other Allowances* <u>Clothing</u>	<u>13</u>	
Other charges <u>Laundry</u>		<u>40</u>	Other Credits*		
Payment on transfer or discharge No. <u>4774</u>	<u>72</u>	<u>63</u>	Bal. Dr. (to be deducted by new unit)	<u>33</u>	
Balance Cr. (to be paid by the new unit)					
<b>Total</b>	<b>178</b>	<b>43</b>	<b>Total</b>	<b>178</b>	<b>43</b>

\* Give particulars.

A monthly stoppage of \$ 15.00 (†) has Been (‡) been paid on account of Assigned  
 { Pay for the month of February 1918 }  
 { and Sep'n Allice. for month of 191 } (to) Assignee Mrs. M. Dafoe  
 (Address) Flinton, Ont.

(†) Insert amount to be assigned, whether it has been paid or not.  
 (‡) Insert "not" if amount has not been paid for period of account.

### On Transfer of an Officer

Outfit Allowance of \$..... has been paid by Paymaster, Military District No.....

**REMARKS:—**

- State (1) date of enlistment .....
- (2) if married and if a Separation Allowance Card has been submitted Not Applicable
- (3) cause of discharge Services no longer authority 88-D-194
- (4) authority for transfer .....

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

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

Date FEB 22 1918

Place KINGSTON, ONT.

*D. G. Bissonnette*  
 Paymaster.

**N.B.**—For purposes of transfer this form is to be made out in quadruplicate. Original copy to paymaster of new unit; duplicate to District Paymaster; triplicate to accompany the pay-list at the end of the month, and quadruplicate for retention as a record.  
 For purposes of discharge it is to be made out in triplicate. Original copy to accompany discharge papers; duplicate to accompany pay-list at the end of the month, and triplicate for retention as a record.  
 If a man on discharge is entitled to three months' Post Discharge Pay, Last Pay certificate will be made out in quadruplicate. The original Last Pay Certificate will be forwarded with other documents to Paymaster Post Discharge Pay and triplicate, with his discharge documents.

THE EXPEDITIONARY FORCE

1

188

188

188

ORIGINAL.

PARTICULARS OF FAMILY OF AN OFFICER OR MAN ENLISTED IN C. E. F.

INSTRUCTIONS.

- (a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.
- (b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.
- (c) All questions, etc., must be answered.
- (d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.
- (e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

(1) Name of Overseas Unit which Soldier joins..... **146th OVERSEAS BATTALION, C. E. F.**

(2) Regimental Number..... **835355**

(3) Full Name of Soldier..... **Gerald Dafee**

(4) Place of Birth..... **Glinton Ont**

(5) Are you married, or not?..... **No**

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

(b) Present Postal Address.....

(7) Are you a widower?..... **No**

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

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

Also their names and ages.....

.....

.....

.....

.....

(9) Is your Father alive? *Yes*

If so, state name and address *As Dafee Flinton Ont.*

(10) Is your Mother alive? *Yes*

If so, state name and address *Mary Dafee Flinton*

(11) If your Mother is a widow *No*

Are you her sole support, or not?

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

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

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

(15) Are you insured? *No*

If so, in what Company?

Have you made arrangements for payment of your Insurance premium?

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

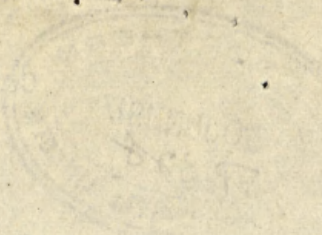
SEP 21 1916

*Chas. How*  
Officer Commanding.

Date.....



Canadian Record Office,  
Green Arkon House,  
Old Bailey,  
London, E.C.4.



Officer Commanding,  
14th Northern General Hospital,  
LONDON.

LONDON.

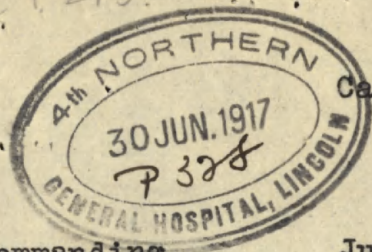
Receipt of your letter of 1st instant  
concerning the soldier mentioned  
please.

This soldier will naturally report to the  
2nd Central Postal Directory, and Messengers  
Canadian, should like, have been instructed to take the  
necessary steps to prevent this man being supplied  
overseas until he reaches the prescribed age of 19 years.

For list of records  
M. U. R.  
C. C. R.

2/MB

*20/1/17*  
4A Ward. CT. 273.  
R.L.22-3.  
"E" 28617.



Canadian Record Office,  
Green Arbour House,  
Old Bailey,  
London. E.C.4.

Officer Commanding, June 28th 1917.  
4th Northern General Hospital,  
LINCOLN.

MINOR.

No.835355.  
Pte.Dafoe.G.

Receipt of your P. 328 dated 21st instant concerning the soldier marginally noted, acknowledged please.

This soldier will ultimately report to the 2nd Central Ontario Regimental Depot, and Headquarters Canadians, Shorncliffe, have been instructed to take the necessary steps to prevent this man being despatched Overseas until he reaches the prescribed age of 19 years.

A large, stylized handwritten signature in dark ink, written over a horizontal line.

E2/EE

LIEUT.  
For Lieut.Col. i/c Records.  
C.O.M.F.

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

25858/16

OTTAWA, CANADA.

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

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

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

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

1. Christian names *Gerald*..... 2. Surname *Wafar*.....
3. Rank *Pte*..... 4. Original Unit *146 B. att.*..... 5. Reg. No. *836355*.....
6. Address, in full, to which future payments of gratuity are to be forwarded .....  
*Gerald Wafar*  
*Clinton Ontario*
7. Date of enlistment in the C.E.F. *January 18<sup>th</sup> 1916*.....
8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge *None*.....
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:—  
*Served with the 146 B. in Canada & England, with 146 from 18 Jan. 1916 till Sept. and spent 6 weeks in France and joined the C.E.F. in Rio de Janeiro.*
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? *Not applicable*.....
14. Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service *Service in England & France*.....
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, *Served with 146 from 18 Jan. 1916 till Sept. arrived in England transferred to the C.E.F. in France served till May 1918 then returned to England and then to Canada in January 1918*
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*.....

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. *Received*

*post Discharge pay for 3 months at the rate of 1.10<sup>00</sup> per day paid by Capt. W. Peters*

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

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 *Not applicable*

24. Are you now serving in the C.E.F.? *No.* If not, give:—(a) Date of discharge

*February 22<sup>nd</sup> 1918* (b) Reason for discharge *wounded and medically unfit for further military service*

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

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

*Served with the 4<sup>th</sup> C.M.A. in France from Nov. 4<sup>th</sup> 1916 until May 4<sup>th</sup> 1917 was wounded March 22<sup>nd</sup> and returned to England on May 4<sup>th</sup>*

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. but I have applied for Vocational and likely to receive it soon*

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: *Gerald Pape*

Place of Residence: *Linton, Ontario*

Declared before me at: *The Village of Linton*

This *21<sup>st</sup>* day of *February* 19*18*

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

*J. W. Doane*  
*a Police Magistrate*

**POST DISCHARGE PAY.**

Date paid.	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
<i>1918 June 14 -</i>	<i>33<sup>00</sup></i>			
<i>July 13 -</i>	<i>34<sup>00</sup></i>			
	<i>67<sup>00</sup></i>			

Certified Correct.

District Paymaster.

Debit Bal. \$ *33<sup>00</sup>*  
*67<sup>00</sup>*  
*100<sup>00</sup>*

# POST DISCHARGE PAY OFFICE

25858/516

Three months pay and allowances after discharge.

Name Dafoe, Gerald  
Surname Christian Name

4154-E-2

Regimental Number 835355 Rank Pte.

Address (in full) Flinton, Ont.

Unit #3. Special Service CO.

Original Unit

District where paid M.D. 3.

Date of Discharge 22-2-18.

P. D. P. Filing Number 1-131-3.

Rates:—Regimental pay \$ 1.00 per diem: Field Allowance \$ .10 per diem. Separation Allowance \$ \_\_\_\_\_ per month.

L. L. 22573—M. & D. 8069.

Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Over-payments to be Recovered	Total Amount Paid
	Cheque No. A	Date	Amount 30 days	Cheque No. B	Date	Amount 30 days	Cheque No. C	Date	Amount 31 days		
100 10	2568	14-6-18	33 00	2461	13-7-18	34 10				33 00	67 10
	2194 Mt	447460	26-3-19			70 00					
	1853 2nd	447910	25-3-19			70 00					

Remarks: Advance on Account Post Discharge Pay.

M. F. W. 127.  
50M-6 17.  
1772 39-1140.

Clinton  
Ont

Dec'n No 25858/516 W. S. G. File No 4154-G-9

Award..... days at \$ 70 per <sup>two</sup> day \$ 350.00

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

Less P. D. P. Credited \$100.10

Less further debit balance \$.....

Net due paid as below 249.90

**TO SOLDIER OR DEPENDENT**

0	Ag. No	Ch No	A	ou	t	Amount
1	2194	47460	70	n		
2	1853A	47910	70	n		
3	1541B	413065	70	n		
4	1536C	469457	39	90	n	
5						
6						
Total			249.90			

26-3-19  
25-3-19  
8-4-19  
22/5/19

GEN'L AUDITOR  
Posting checked by  
[Signature]  
Date 16-7-18

[Signature]

MILITIA AND DEFENCE  
**ASSIGNED PAY**  
 OVERSEAS CONTINGENTS

M. F. W. 12a.  
 60m.-6-16.  
 1772-39-819.

Sheet No. 2. *Mrs M Dapoe*

Name of Soldier *Dapoe G.*  
*# 835355 Pte 146<sup>th</sup> Batta*

L. L. Job 4503. -Req. 6332.

PAYMENTS.

Month.	Year.	Cheque No.	Amt.	Remarks.
				<i>1,500</i>
				<i>OCT 1 - 1916</i>
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.		<i>23047</i>	<i>15</i>	
Nov.		<i>29179</i>	<i>15</i>	
Dec.		<i>27472</i>	<i>15</i>	
Jan.	1917	<i>37383</i>	<i>15</i>	
Feb.		<i>43749</i>	<i>15</i>	<i>15 P</i>
March		<i>50151</i>	<i>15</i>	<i>15-B.</i>
April		<i>11073</i>	<i>15</i>	<i>15-W.</i>
May		<i>77698</i>	<i>15</i>	
June	1917	<del><i>114502</i></del>	<del><i>15</i></del>	<i>15 (W) 114502, ban 6713.</i>
July		<i>26599</i>	<i>15</i>	<i>W.</i>
Aug.		<i>133164</i>	<i>15</i>	<i>CB</i>
Sept.		<i>X36628</i>	<i>15</i>	<i>20</i>
Oct.		<i>B41172</i>	<i>15</i>	<i>✓</i>
Nov.		<i>P54177</i>	<i>15</i>	
Dec.		<i>C57370</i>	<i>15</i>	<i>225</i>
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

*88*

*60*

*W*

*23*

*✓*

MILITIA AND DEFENCE  
**ASSIGNED PAY**  
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

**PAYMENTS.**

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

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



2463

Surname *Wafce* Christian Name or Names *g.* Reg. No. *835355*  
 Rank *Plt* Unit *4th. emk. 2nd Co Regt.* Co. Troop Batty.  
 Hospital Date of Admission

Transferred *42 Cas. Cl. Sta.* Hosp. *25-3-17*  
*22 G. H. Danes Camiers* Hosp. *30-3-17*

*N. Gen. Lussolm* Hosp. *4-5-17*  
*Granville Spec. Paussgete* Hosp. *8-8-17*

Diagnosis *MSU; Rt. Thorax. sev. ill.*  
 (1)  
 Later Diagnosis (if changed)  
 (2)  
 (3)

Additional Diagnosis: if more than one state present

DISPOSITION

Date

DISPOSITION	REMARKS
<i>e.l. 27-3-17</i>	<i>A382</i>
<i>" 2-4-17</i>	<i>A386</i>
<i>" 14-4-17</i>	<i>A395. Now Dang ill. 12-4-17.</i>
<i>- 7-5-17</i>	<i>@414 Rmd from dang ill list-3-5-17</i>
<i>8-5-17</i>	<i>B227 Dang 2nd 4-5-17</i>
<i>- 23-5-17</i>	<i>B233 Slight Improvement 18-5-17</i>
<i>11-8-17</i>	<i>B290 Dis! - 31-10-17.</i>
<i>10-9-17</i>	<i>B6</i>
<i>13-10-17</i>	<i>B35</i>
<i>13-11-17</i>	<i>B. 61(2)</i>

A.M.D. 2 Dept.

R

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

- 1. *Lord Derby War Warrington* 30.8.17.
- 2. *Cav. Casual Woodcote Park Exeter* 10-10-17.
- 3.
- 4.
- 5.
- 6.
- 7.

SURNAME.

*Dajoe.*

CARD NO.

CHRISTIAN NAMES

*Gerald*

FOLL.  
*x C.P.*

REGL. No.

*835 955*

RANK

*Pte.*

UNIT

*146<sup>th</sup>*

*Bn*

FORMER CORPS

*Nil.*

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

*Dajoe, J. M.*

RELATIONSHIP TO SOLDIER

*Father*

ADDRESS

*Flinton, Ont*

COUNTRY OF BIRTH

*Canada Flinton*

DATE

*May 2<sup>nd</sup> 1897.*

PLACE OF ATTESTATION

*Flinton*

DATE

*Jan 18<sup>th</sup> 1916*

*Sailed from Halifax 26/9/16*

*Per S.S. Southland 558 # 3.*

L. L. 10437. M. & D. 7253.

M. F. W. 22. 100M.-11-16. H. Q. 1772-39-339.

*26*

MARRIED

SINGLE

WIDOWER

TRADE OR CALLING

Miller

RELIGION

Yes.  
Methodist

DESCRIPTION.

APPARENT AGE

18.

YEARS

—

MONTHS

HEIGHT

5.

FEET

6.

INCHES

CHEST MEASUREMENT

34

INCHES

EXPANSION

3.

INCHES

COMPLEXION

Fair

EYES

Blue

HAIR

St Brown

DISTINGUISHING MARKS

Not Stated

MEDICAL EXAMINATION.

PLACE

Kingston

DATE

Jan 17<sup>th</sup> 1916

Present Address

Flinton, Ont.!

2463

REGT'L. No. 835355  
H. Q. FILE NO. 649

NAME Dafoe, Gerald

RANK AND CORPS Pte

4<sup>th</sup> Bn M.R. (form 146<sup>th</sup> Bn)

FOLLOWS  
NO. 146<sup>th</sup> Bn

CABLE

NO.

DATE

NATURE OF CASUALTY

FOLLOWS

M5104	23-5-17	Dangerously Wounded May 18/17 slight improvement 4 <sup>th</sup> North. Gen. Hosp. Lincoln
M4983.W.S.M	22-5-17	Cau. bonv. Hosp. E. from. Condition satisfactory slightly improved. Sailed from Liverpool for Canada per. S.S. Metagama 23-12-17 M.D. 3. Cal. 1. Disp. J.A.S.

2463

LIST NO.

HOSPITAL

DATE OF  
ADMISSION

REMARKS

B.61-2

Can lion waste ck Epsom  
Disc.

31.10.17

G&W. Thorax. (S.O.Pg)

2463

REGT'L NO 835-355

NAME Dafee, Gerald

H. Q. FILE NO. 649-

RANK AND CORPS Pte 4th Co. M. R. I. form 146th Bn

FOLLOWS No.

CABLE

NATURE OF CASUALTY

FOLLOWS

No. DATE

M 753	26-3-17	Dangerously wounded at 42 Gas Co. Station March 25th 1917 (Nature of wounds not reported yet.) ✓
M 1016	31-3-17	Seriously ill at 22 Gen. Hosp. Camiers Mar. 30th. 1917. (G. S. W. Thorap.) ✓
M 1757	12-4-17	Prev. rep. sev. ill now dang. ill at No. 22. Gen. Hosp. Camiers April 12th 1917 GSW Thorap. ✓
M. 3780	5-5-17.	Removed from dang. ill. list 22 Gen. Hosp. Camiers, May 3rd. 1917 ✓
M. 3814.	5-5-17.	Dang. wded, 4th Northern Gen. Hosp. Lincoln May 4th 1917 ✓

LIST No

HOSPITAL

DATE OF  
ADMISSION

REMARKS

A352 Ob. # 42 bas. cl. Stat. reports 25-3-17 Dangerously Wided (not stated)

A368 Ob. # 22 Gen. Cannes Camiers reports, 30-3-17 Ser. ill G.S.W. R. Thorax

A395 Ob. # 22 Gen. Cannes reports 12-4-17 Formerly ser. ill now  
dangerously ill G.S.W. thorax

1414 Ob. # 22 Gen. Cannes reports, 3-5-17 G.S.W. R. Thorax  
Removed from danger. ill

B221 Ob. 4<sup>th</sup> North. Gen. Lincoln reports 7-5-17 Danger. Wided G.S.W.  
R. thorax

B233 Ob. 4<sup>th</sup> North. Gen. Lincoln reports 18-5-17 Dangerously Wided  
slt. improvement G.S.W Thorax

B290 - Grumille Cam. Spec. Ramsgate 8-8-17 pw. R. Thorax. 7-9-17

B6 - Ford Derby Har. Warrington 30-8-17 " " "

B35 Cav. Lond. Woodstock Pk. Epsom - 10-10-17 G.S.W. Thorax



2463

Name DAFOE, Gerald. Rank Private.

Reg. No. 835355.

Unit 4th, Canadian Mounted Rifles.

Next of Kin Canada.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. Li
1917.						
Mar. 25	O.C. No. 42. Cas. Clg. Stn., Reports:- DANGEROUSLY WOUNDED.			A382.	M753.	27-3.
Mar. 30	O.C. No. 22. Gen. Hosp. Camiers, Reports:- SERIOUSLY ILL. GSW. R. Thorax.			A386.	M1016.	
Apr. 12	O.C. No. 22. Gen. Hos. Camiers, Reports:- FORMERLY SER. ILL. NOW DANGEROUSLY ILL.			A395.	M1751.	
May. 3	O.C. No. 22. Gen. Hos. Camiers, Reports:- REMOVED FROM DANGEROUSLY ILL LIST.			A414.	M3780.	
May. 4	O.C. 4th, Nor. Gen. Hos. Lincoln Reports:- DANGEROUSLY WOUNDED.			B220.	M3814.	
May 18	<i>Obtained transfer to Lincoln J. P. slight improvement do</i>				M5104	
8	8	Gran. Ban Spec Hos. Ramsgate	do	B290		
	P. T. O.					

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
30-9	Lord Derby War. Hos.	Warrington	Do.	16		1442
10-10	Mil. Con.	Epsom		B35		3485
31-10	Busch.		do.	161		1333
	767					

Granville Can. Spl. Hospital,  
Ramsgate.

2463

HOSPITAL.

A. & D. No. T. 7330 Ward 121-523Unit L.M.R. Sick or Wounded.Regtl. No. 835355 Pl. of Act'n \_\_\_\_\_Rank Pte. Name Blaford G.Age 17 Religion Meth.Service Compl'd 16-12 Time with Field Force 6-12Diagnosis G.S.W. Chest.Admitted 7 AUG 1917 Discharged 23 days 30/8/17Transferred L.D. War Hosp Warrington



No. 835-355 RANK

Plt

NAME

Dafoc, Gerald

T. O. S. 18-1-16

UNIT

146th Battalion

2017-21-1-16

M. D. 3

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916	1916			
Jan 18	Jan 31	L		
	Feb	n		
	Mar	L		
	Apr	m		
	May	v		
	June	v		
	July	v		
	Aug	v		
	Sep	v		
Oct 1	Oct 6	n	Trans to 95th Bin.	UNIT SAILED SEP 25 1916 AD262 of 8-10-16.



No. 885358 RANK Pte

NAME Dafoe. G.

T. O. S.

UNIT

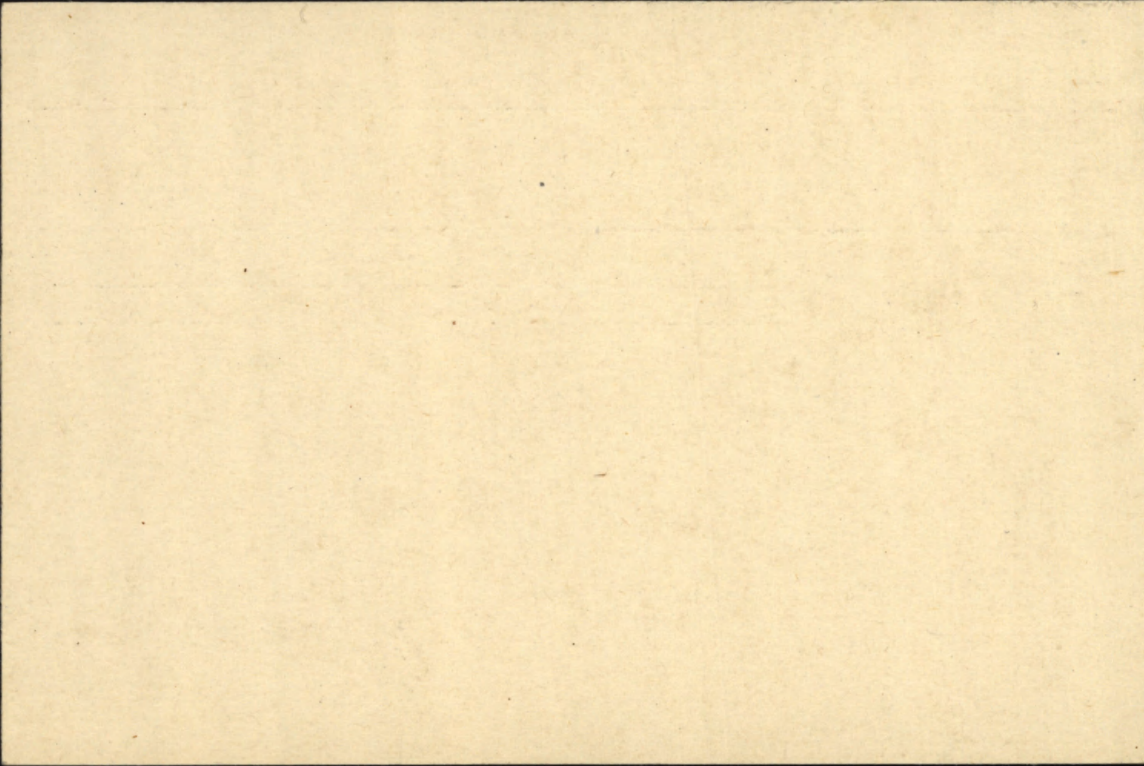
# 3 Special Service Coy

Transfd from Casualties  
20 12.

M. D.

3

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1917 Dec 14	1918 Jan 22	✓	ltd. 22-2-18 R.M.L.	0054720.2.18
a/c closed by payment l.				





31am

Number 835355 Rank Pte.

B  
V

Surname DAFOE

Christian Name Gerald

Units 4th. e m R Theatre of War France

Date of Service 27-10-16

Remarks

Latest Address ~~Flinton Ont~~

279 Logan Ave

Roll No. B page 21368 Toronto

200m.-2-21.M. Ontario

REGT. NO. .... RANK ..... NAME .....

UNIT ..... AGE ..... SERIAL NO. IN A. AND D. ....

TOTAL SERVICE WHERE ..... DATE AND PLACE OF OR  
AND HOW LONG .....

DISEASE OR INJURY .....

OPERATIONS .....

RESULT OF OPERATIONS .....

(A) DATE OF ARRIVAL AT HOSPITAL AS AN ADMISSION .....

(B) AS A TRANSFER (STATE WHERE FROM) .....  
NAME OF HOSPITAL .....

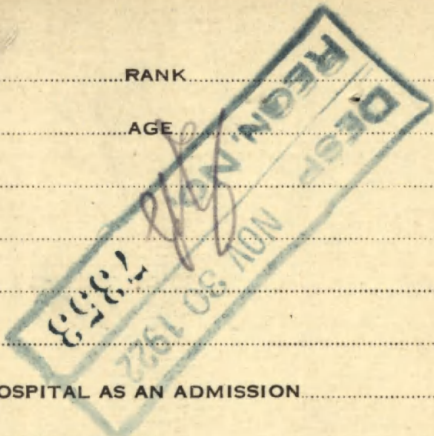
DATE OF DISCHARGE TO UNIT ..... IN CA

DATE OF DISCHARGE AS AN INVALID .....

DATE OF DEATH .....

DATE OF TRANSFER (STATE WHERE TO) .....  
NAME OF HOSPITAL .....

OTHER INDEPENDENT CONDITIONS DIAGNOSED .....



P. 559.  
MARRIED OR SINGLE

*Single*

PLACE OF BIRTH

NAME AND ADDRESS OF NEXT OF KIN  
*Mr. J. M. Lafoe  
Flinton, Ontario, Canada*

RELATIONSHIP OF NEXT OF KIN  
*Father*

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY \$ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.			
DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL

REG'L. NO. *835355* RANK *Pte* NAME *Lafoe, Gerald*

IF IN PERM. CORPS } UNIT *146<sup>th</sup> Bttn* TRANSFERRED TO *95<sup>th</sup> Bttn* DATE *7/10/16* AUTHORITY *...*

PERMANENT FORCE ALLOWANCES TRANSFERRED TO *H.C.M.R.* DATE *26-11-16* AUTHORITY

PLACE OF ATTESTATION *Flinton, Ontario, Canada* TRANSFERRED TO *2<sup>nd</sup> COR'D* DATE *2/6/17* AUTHORITY *CRB 221 9/5/17*

DATE OF ATTESTATION *18/1/16* TRANSFERRED TO *N.C.B.* DATE *14-12-1917* AUTHORITY *ag. 5-1-35*

ASSIGNED PAY MONTHLY \$ *15.00* DATE EFFECTIVE *1/10/16*

PAYABLE TO *Mrs. Mary Lafoe, Flinton, Ontario, Canada* RELATIONSHIP *Mother*

ASSIGNED PAY MONTHLY \$ DATE EFFECTIVE

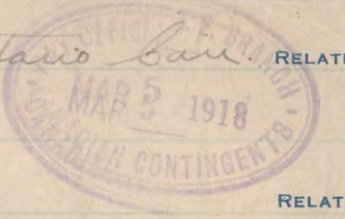
PAYABLE TO RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) *stopped* EFFECTIVE *1-1-18* REASON *Dis to Canada*

DISCHARGE DATE AND PLACE *Canada 13-12-17* REASON AND AUTHORITY *for disposal ag. 5-1-35. 10/12/17.*

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)



Checked *W.P.H.*

DATE	PAY		FIELD ALLOWANCE		WORKING OR SPECIAL PAY		ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS				CASH PAYMENTS				BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS					
	NO. OF DAYS	RATE	AMOUNT	NO. OF DAYS	RATE	AMOUNT				NO. OF DAYS	RATE	AMOUNT	1	2	3	4	1	2	3				4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	CREDIT
									635	635																	
<i>Oct 1-6</i>	<i>6</i>	<i>100</i>	<i>600</i>	<i>6</i>	<i>10</i>	<i>60</i>			<i>660</i>										<i>15-</i>		<i>15-</i>		<i>205</i>			<i>Trans to 95<sup>th</sup> Bttn DO 262 eff. 7-10-16</i>	
<i>Nov 7-31</i>	<i>25</i>	<i>100</i>	<i>2500</i>	<i>25</i>	<i>10</i>	<i>250</i>			<i>2750</i>		<i>425</i>	<i>15/10</i>							<i>15-</i>		<i>243</i>	<i>2302</i>					
<i>Dec 1-15</i>	<i>15</i>	<i>15</i>	<i>150</i>	<i>15</i>	<i>15</i>	<i>150</i>			<i>1650</i>					<i>973</i>				<i>15-</i>		<i>2473</i>	<i>1479</i>					<i>To 4<sup>th</sup> C.M.R. 15/4/16 DO 281</i>	
<i>Dec 16-30</i>	<i>15</i>	<i>15</i>	<i>150</i>	<i>15</i>	<i>15</i>	<i>150</i>			<i>1650</i>							<i>436</i>				<i>436</i>	<i>2693</i>						
<i>Dec 1917</i>			<i>920</i>			<i>920</i>			<i>2410</i>	<i>1145</i>	<i>2/12</i>	<i>8576</i>	<i>19/11</i>	<i>COR'D</i>	<i>87</i>				<i>15-</i>		<i>2808</i>	<i>3295</i>					
<i>Jan 31</i>	<i>31</i>	<i>100</i>	<i>3410</i>						<i>3410</i>	<i>1314</i>	<i>24/12</i>								<i>15</i>		<i>2078</i>	<i>4682</i>					
<i>Feb 28</i>			<i>3080</i>						<i>3080</i>	<i>1258</i>	<i>19/11</i>								<i>15</i>		<i>2024</i>	<i>5738</i>					
<i>Mar 31</i>			<i>2410</i>						<i>2410</i>	<i>1392</i>	<i>23/12</i>	<i>1254</i>	<i>13/12</i>	<i>1444</i>	<i>9/3</i>	<i>261</i>			<i>15</i>		<i>2284</i>	<i>6864</i>					
<i>Apr 30</i>			<i>33</i>						<i>33</i>										<i>15</i>		<i>15-</i>	<i>8664</i>					
<i>May 31</i>			<i>3410</i>						<i>3410</i>										<i>15</i>		<i>15-</i>	<i>10574</i>					
<i>June 20</i>			<i>22</i>						<i>22</i>											<i>487</i>	<i>15-</i>	<i>1987</i>	<i>10787</i>				<i>20-COR'D 2/6/17 CRB 221 9/5/17</i>
<i>Contd.</i>			<i>28930</i>						<i>635</i>	<i>29565</i>						<i>3414</i>	<i>505</i>	<i>872</i>	<i>487</i>	<i>135-</i>	<i>18778</i>	<i>10787</i>					

*Buxton O.L. No. 52 23.12.17 Cr. Bal. 114<sup>13</sup> Less a.R. 16362 4<sup>86</sup>*

*Dafoe, Gerald 835355 (Dte)*

DATE	PAY		FIELD ALLOWANCE		WORKING OR SPECIAL PAY		ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS				CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
	NO. OF DAYS	RATE	AMOUNT	NO. OF DAYS	RATE	AMOUNT				NO. OF DAYS	RATE	AMOUNT	1	2	3	4	1				2	3			
<i>Bal</i>			289 30						6 35 59 65					34 14	5 05	8 72	4 87	1 35	187 78	107 87					
June 10			11					11												11 88	7				
July 31			34 10					34 10												19 87	13 31				
Aug 31			34 10					34 10												15	15	15 22			
Sept 30			33					33												15	15	17 02			
			40 50											34 14	5 05	8 72	9 74	1 80							

MONTH	PARTICULARS	CR.1	CR.2	PARTICULARS	DR.1	DR.2	DR.3	DR.4	BALANCE	DATE
Sept 30	Bal fwd								170 20	Nil
Oct 31	P/P	34 10		a pay			15		189 30	189 30
Nov 30	P/P	33		"			15		54 60	243 90
Dec 13	P/P	14 30		"			15		206 60	93 27
	Sick Furlough 3/10/17 to 10/11/17 50 239 3/11/17 100 amp @ 730	7 30		DR. AR. 1009 17.517 Riattm	4 87					150 63
				AR 140 15/11 12 Res	9 73					30
		54 60		4006 31/10. CCH Epa.	48 67					
					63 27					
Jan 18				AR 15 20/9/17 5 <sup>th</sup> Clyd	4 87					
				3505 10/10/17 Epson	9 73					
				AR 163 62 17/14/17, Buxton	4 87					
				AR 149 28/11/17 12 Res	14 60				116 56	
					34 07					

Balance transferred to N. E. Branch Nil

330. FORM NO. 1  
 Sepd 11/18  
 DISCHARGED TO Canada 13/17  
 PARTLY VERIFIED Extract from  
 Cf. Bal. 114.13 10/14/17  
 AUTHS. a.g. 5.1.35  
 Disposal

Checked *Quidbury*  
 L.P.C.  
 Supp. Exp 27/1/18 for 7<sup>th</sup> 18.  
 C. Bal 121 43  
 Checked *Quidbury*

2463

4.C.M.R.S.

1874/39

This space to be for numbers

# Proceedings on Discharge.

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

No. <i>835355</i>	
Rank <i>Private.</i>	
Surname <i>D. J. Gerald.</i>	
Christian Name <i>Gerald.</i> <small>NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.</small>	
Corps (Squadron, Battery or Company) <i>#3. Special Service Coy.</i>	
Date of Discharge <i>February 22nd-18</i>	
Place of Discharge <i>Fort Henry.</i>	
1. DESCRIPTION AT THE TIME OF DISCHARGE.	
Age <i>17</i> years <i>7</i> months.	Descriptive Marks <i>Gun shot wound in right chest.</i>
Height <i>5</i> feet <i>7</i> inches.	
Complexion <i>Fair.</i>	
Eyes <i>Blue.</i>	
Hair <i>Brown.</i>	
Trade <i>Hammer.</i>	
Intended place of residence <i>Clinton Ont.</i> <small>(To be given as fully as practicable.)</small>	
2. The above-named man is discharged in consequence of <i>Services no longer required with. 3MD. 88-D-194 dated 19-2-18</i>	
<small>N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.</small>	
<small>To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.</small>	3. Conduct and character while in the service have been, according to the records, etc. <i>Very Good+</i>
	<small>N.B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldiers and the Officer Commanding his Squadron, Battery or Company.</small>
	4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.) <i>8.6.7.11</i>

M. F. B. 218.

100M.—1-17.  
H. Q. 1772-39-113.

(OVER)

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

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

6. Medals and Decorations.....

*Such as may be authorized for service in Canada England & France.*

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

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

(Place) *Fort Henry* *A. B. Sumner Merritt*

(Date) *February 22nd-18* *MAJOR*  
Commanding *Co. 2 Special Service, C. E. F.*

8. Certificate to be signed by the Soldier on Discharge

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

(Place) *Fort Henry* *A. B. Sumner Merritt* (Signature of Soldier.)

(Date) *February 22nd-18* (Signature of Witness.)

When a soldier is absent through illness or any other cause and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned, should be attached here.

9. Additional Certificate in the case of a Soldier who takes his discharge on his own request.

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

..... (Signature of Soldier.)

10. Statement of Service.

Service toward Engagement to.....(the date to which the Record of Service is completed).....years.....days.

Total.....years.....days.

11. Confirmation of Discharge.

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

(Place) *Fort Henry* *A. B. Sumner Merritt*

(Date) *February 22nd-18* (Signature) *MAJOR*  
*Co. 2 Special Service, C. E. F.*

Reservations referred to at Para. 8.

(To be signed by the soldier. When there are none, it is to be so stated, and signed by the soldier.)

*G. J. Safre*

Res. (Number) Sheet	Medical Report
Statement of Medical Account on Transfer and Discharge	Medical Report on Discharge
Case of Conviction by C. P. M. P.	Medical Report on Discharge
Medical Report on Discharge	Medical Report on Discharge
Medical Report on Discharge	Medical Report on Discharge

## List of Discharge Documents.

<p>Reg. Conduct Sheet, Militia form B. 263.</p> <p>Squadron }          Battery } Conduct Sheet, " B. 263a.          Company }</p> <p>Copies of Convictions, by C. P. in MS.</p> <p>Med. Hist. Sheet, Militia Form B. 313</p> <p>Medical Report for Invalid* " B. 227.</p> <p>Statement of Man's Account on          Transfer and Last Pay Cer-          tificate, " D. 877.</p> <p>*Only if discharged "Medically unfit."</p>	<p>Attestation Paper, Militia Form B. 235.</p> <p>Proceedings on Discharge " B. 218.</p> <hr/> <p style="text-align: center;">In the case of recruits who are rejected on final approval, the discharge documents will consist of</p> <p style="padding-left: 40px;">(a) Proceedings on Discharge.</p> <p style="padding-left: 40px;">(b) Attestation.</p> <p style="padding-left: 40px;">(c) Medical History Sheet (in the event of such having been prepared.)</p>
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*N. B.—In the case of a man discharged by purchase, the date and number of Deposit Receipt with amount of same is to be noted hereon.*



# MEDICAL HISTORY OF AN INVALID

## INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

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

STATION Fort Henty DATE 26/1/18.

1. 1 (a) Unit S.S. Co. #3. (b) Regimental No. 835355 (c) Rank Pte.

(d) Surname Dafce, (e) Christian name Gerald

2. Age last birthday 17 Date of birth May 2, 1900.

3. Enlisted at Flinton, on Jan. 18th, 1916.

4. Personal description:—

(a) Height 5' 6" (b) Weight 135 (c) Complexion dark

(stripped)

(d) Colour of hair Brown (e) Colour of eyes Blue (f) Identification marks

Scar on right side on 3rd rib.

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

Flinton, Ont.

6. Former trade or occupation Farmer.

7. (a) Service

Years

Days

PERIODS

From

To

146th Batt'n.  
4th C.M.R.  
S.S. Co. No. 3.

Jan. 1916.  
Nov. 1916.  
Jan. 1918.

Nov. 1916.  
Jan. 1918.  
To date.

(b) Has he been overseas France, 6 mos. 8. Original disease or disability G.S.W. of right chest  
(penetrating)

(a) Date of origin March 22, 1917. (b) Place of origin Vimy Ridge

(c) Cause\* G.S.W. of chest.

(d) Present disease or disability

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

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

**SUBJECTIVE** Man complains of feeling of general weakness and shortness of

breath on walking fast or going up a slope. Has a feeling of pain under

sternum bothering him most in wet weather. Feeling of tightness in chest on

M. F. B. 227.

300M.—2-18.  
1772—39—117.

MD.

9. Present condition.—(Continued.)

taking a deep breath.

**OBJECTIVE.** There is a long adherent scar of operation for empyema, along 8th rib on right side of chest. This scar is drawn in slightly on inspiration. There is great diminution of breath sounds and dullness over wound area and over an area about two inches square directly above wound. There is a great increase in vocal resonance. Vocal fremitus is same as corresponding side. There is slight dullness over this area.

**X-Ray Report says:-** "Fracture of 8th. rib about 5" from spine. It also

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

Nervous..... Digestive..... Respiratory..... Cardiac.....  
Genito-Urinary..... Skin, Middle Ear, Eye or any other part.....

shows two or three small pieces broken from right scapula, inferior angle."

**M.H.S. says--**"Bullet remains in or attached to Pericardium".

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

**Nil.**

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

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

**N.A.**

12. Was the disability caused or aggravated by negligence, by vice or by misconduct, or by unreasonable refusal to accept treatment? **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? **One Year at least.**

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

**French and English Hospitals.**

14. (Continued)  
15. Is further (If the...)  
16. Can the (If no...)  
17. Recomm...  
(Sections 8, I, the u present con complain in  
18. Does t number  
19. Is the s  
20. It is ce (a) Do (b) Do (c) Sho (d) Str

OPINION OF THE MEDICAL BOARD

14. (Continued).

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

No

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

17. Recommendations **Fit for Category C-3.**

**(sgd.) W.H. Loyd, Capt.**  
*Medical Officer by whom the case is brought forward.*

STATEMENT OF THE SOLDIER.

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

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

**(sgd.) Gerald Dafoe.**  
*Signature of soldier examined.*

OPINION OF THE MEDICAL BOARD

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

Yes

19. Is the soldier fit for  
(a) General service, (Category ~~A~~) ~~(Yes or No)~~.  
(b) Service abroad, not general service, ( " ~~B~~) ~~(Yes or No)~~.  
(c) Home service, (Canada only), ( " C) ~~(Yes or No)~~. **C-3.**  
(d) Temporarily unfit, ( " D) ~~(Yes or No)~~.  
(e) Unfit for service in Categories A, B and C, ( " E) ~~(Yes or No)~~.

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

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

OPINION OF THE MEDICAL BOARD—(Continued).

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

Fit for Category G-3.

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

(sgd.) W.A. Jones, Capt. AMC. President.

PLACE... Fort Henry, Ont.

(sgd.) A. MacDonald, Capt. AMC.

DATE... Feb. 5th, 1918.

(sgd.) M.D. Graham, Capt. AMC.

Members.

APPROVED BY

APPROVED BY

(sgd.) V.H. Craig, Capt. AMC.

Assistant Director of Medical Services.

For A.D.M.S. Mil. Dist. No. 3.

Director-General of Medical Services.

DATE... Feb. 7th, 1918.

DATE.....

TO BE COMPLETED WHEN TREATMENT IS REFUSED

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

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

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

PLACE.....

..... President.

DATE.....

Members.

- 1. In using issue
- 2. The Me and Med Med
- 3. In answer his state such
- 4. Special answer
- 5. If space sheets
- 6. A note v
- 7. Under n directly
- 8. The non order in Messrs
- 9. 1 (a) U (d) Sur
- 2. Age last
- 3. Enlisted
- 4. Personal (a) He (d) Co
- 5. Address
- 6. Former t
- 7. (a) Serv
- (b) Ha
- (a) Da
- (c) Ca
- (d) Pr
- 9. Present (After desc due part

**SUBJECTIVE**  
 breath  
 sternum  
 M. F. B. 22  
 300M.-2-18.  
 1772-39-117.  
 MD.

(Medical Officers will please read this Form carefully before using it. See instructions, page 4.)

2463 ORIGINAL

FORM TO BE USED FOR WARRANT OFFICERS, N.C.O'S AND MEN  
MEDICAL HISTORY OF AN INVALID

STATION Fort Henry DATE 26/1-18.

1. (a) Unit S.S.Co. #5. (b) Regimental No. 855355 (c) Rank pte.

(d) Surname Dafoe (e) Christian name Gerald

2. Age last birthday 17 Date of birth May 2, 1900

3. Enlisted at Flinton on Jan. 18th., 1916.

4. Personal description :-

(a) Height 5-6 (b) Weight 135 (c) Complexion dark

(d) Colour of hair brown (e) Colour of eyes blue (f) Identification marks

Scar on right side on 3rd rib.

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

Flinton, Ont.

6. Former trade or occupation Farmer.

7. (a) Service

	PERIODS	
	From	To
<u>146 Battn</u>	<u>Jan. 1916</u>	<u>Nov. 1916.</u>
<u>4th C.M.R.</u>	<u>Nov. 1916.</u>	<u>Jan. 1918.</u>
<u>S.S.Co. No.3.</u>	<u>Jan. 1918.</u>	<u>to date</u>

(b) Has he been overseas? France 6 mos.

8. Present disease or disability (use authorized nomenclature if possible) G.S.W. of right chest (penetrating)

(a) Date of origin March 22, 1917. (b) Place of origin Vimy Ridge.

(c) Cause\* G.S.W. of chest.

\*(Here include original disease or injury)

If further space is needed for this or other answer, use page 4

9. Present condition. (Important to be a full description of the present disabling condition or conditions).

Subjective Man complains of feeling of general weakness and shortness of breath on walking fast or going up a slope. Has a feeling of pain under sternum bothering him most in wet weather. Feeling of tightness in chest on taking a deep breath.

Objective. There is a long adherent scar of operation for empyema, along 8th rib on right side of chest. This scar is drawn in slightly on inspiration. There is great diminution of breath sounds and ~~over~~ dullness over would area and over an area about two inches square directly ~~above~~ above would, there is a great increase in vocal resonance. Vocal fremitus is same as corresponding side. There is slight dullness over this area.

X-Ray report says:- "Fracture of 8th rib about 5" from spine. It also shows two or three small pieces broken from right

scapula, inferior angle."  
M.H.S.says--"Bullet remains in or attached to Pericardium."

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

2463

10. History :

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

Nil.

11. What is the extent (state in percentages) of the disability in earning a livelihood in the untrained labour market? If there is more than one disabling condition, estimate the disability, due to each, and that due to all combined.

40% for 6 mos. at least.

12. Did the disability arise on or off duty? In action.

13. Was a Court of Inquiry held?

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

If the answer is in the affirmative, state in percentages, to what extent the soldier is incapacitated by that aggravation.

Not applicable.

15. Was the disability caused or aggravated by negligence, by vice or by misconduct, or by unreasonable refusal to accept treatment?

No.

(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.)

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

One year at least.

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

French and English Hospitals.

18. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit?

No.

19. Can the former trade or occupation be resumed? Partially.

Fit for Category C-3.

20. Recommendations

*W. H. Longstaffe*

Medical Officer by whom the case is brought forward.

STATEMENT OF THE SOLDIER.

(Sections 8, 9 and 10 are to be read to the soldier.)

I, the undersigned Gerald Dafoe have heard the description of my disability read, and am satisfied (or not satisfied) with it. (If dissatisfied, statement should follow.) I complain in addition of

*Gerald Dafoe*

Signature of soldier examined.

2463

### OPINION OF THE MEDICAL BOARD

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

Yes.

22. Is the soldier fit for

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

23. It is certified that the soldier

- ~~(a) Does require treatment.~~ (Give the nature of the condition and of the treatment required and its probable duration).
- (b) Does not require treatment.
- (c) Should pass under his own control.
- ~~(d) Should not pass under his own control.~~  
(Strike out condition not applicable).

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

Fit for Category C-3.

*W. A. Jones* Capt. AMC. President  
*A. Macdonald* Capt. AMC.  
*H. S. Johnson* Capt. AMC. } Members.

STATION Fort Henry, Ont.

DATE Feb. 5th., 1918.

APPROVED BY \_\_\_\_\_  
 DATE FEB 7 - 1918

*W. C. Craig* Captain A. M. C.  
 Assistant Director of Medical Services.  
 For A. D. M. S. Mil. District No. 3.

APPROVED BY \_\_\_\_\_  
 DATE \_\_\_\_\_

Director-General of Medical Services.

2463

Lined area for text entry with horizontal dotted lines.

TO BE COMPLETED WHEN TREATMENT IS REFUSED

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

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

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

INSTRUCTIONS

- 1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of pages 1 and 2 of this Form. The President of the Board of Medical Officers is responsible for the proper completion of the space, of page 3, reserved for recording the Proceedings of a Board of Medical Officers.
3. In answering the questions, Medical Officers will carefully obtain and record the soldier's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the soldier concerned, from witnesses, or from documents.
4. Special care is required in answering question 14. Please read the questions carefully. All questions must be answered.
5. The nomenclature of diseases to be followed is that 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 and Sons.



2463

Form No. 1304  
1917

# PROCEEDINGS OF A MEDICAL BOARD.

Dated at EPSOM, OCT. 24th, 1917.

No. 835355 Rank PTE. Name DAFOE, G.

Local Unit..... Overseas Unit 4th C.M.R. Age 17.

Examination held at C.M.H. EPSOM.

DISABILITY. Shrap. RT. CHEST FLESH.  
Overseas—~~Local~~  
(scratch one out).

①

## PRESENT CONDITION.

(

F.B. entered under right axilla and is still in chest.  
Right plura was drained for empyaema.  
Ninth rib resected and long scar over its site.  
Complains of shortness of breath on exertion and pain over  
precondium.  
On enlisting May, 1916, stated age 18. He says now that he  
was 17 yeas of age last May.  
There is some diminished resonance at right apex with  
bronchial breathing and increased vocal resonance.  
Some dullness and diminished breathing at right base.

## BOARD RECOMMENDS:—

1. Fit for Duty.....
2. Fit for duty after.....weeks' physical training.
3. Fit for Temporary Base Duty .....weeks.
4. Fit for Permanent Base Duty.....C.iii. unlikely to be raised in Category within six months.
5. Discharge .....Mill hand.

## Signatures:—

Members { H. L. Pavay, Major. President.

{ S.R.D. Hewitt, Capt.

## APPROVED

Dated EPSOM, OCT. 24th, 1917.

*H. L. Pavay*

For A.D.M.S.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, 1917

No. \_\_\_\_\_ Rank \_\_\_\_\_ Name \_\_\_\_\_

Local Unit \_\_\_\_\_ Overseas Unit \_\_\_\_\_ Age \_\_\_\_\_

Examination held at \_\_\_\_\_ O.M.H. EPSON.

DISABILITY Overseas Local \_\_\_\_\_

PRESENT CONDITION

On enlisting May, 1916, stated age 18. He says now that he was 17 years of age last May. There is some diminished resonance at right apex with bronchial breathing and increased vocal resonance. Some dulness and diminished breathing at right base. Complaints of shortness of breath on exertion and pain over right ribs resorted and gone over the side. Right arm was trained for engine work. X-ray shadows under right axilla and in still in chest.

BOARD RECOMMENDS:

- 1. Fit for Duty
- 2. Fit for duty after \_\_\_\_\_ weeks' physical training
- 3. Fit for Temporary Base Duty \_\_\_\_\_ weeks
- 4. Fit for Permanent Base Duty \_\_\_\_\_ C.M.F. unlikely to be raised in category within six months.
- 5. Discharge \_\_\_\_\_

Signatures —

\_\_\_\_\_, Major, President

\_\_\_\_\_, Captain, Member

Members

APPROVED

Dated \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, 1917

MEDICAL CASE SHEET.\*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
Year	Unit.		Age.	Service.
Station and Date.	Disease			
7-7 AUG 1917	Greatly improved - say that pain in chest is still present but less than last week - Carry on - Return sick W W Barracough R			
15-8-17	Blom	R B E	6,000.000.	W B E 10 000, H.S. 75%
23-8-17	Feeling stronger. Lung clearing up. Less pain in chest, carry on 9.2 a.m. Only slight pain in chest on deep inspiration. Chest apparently clear thro' out - Carry on Return sick W W Barracough R			

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

Station  
and Date.

**MEDICAL CASE SHEET.\***

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	835353	Pte	Dafor	G
Year	Unit.	Age.	Service.	
	CMR	17	16/12 6/12	

Station and Date.	Disease
	G.S.W. Chest
	Occupation - Subner.
	Enlisted - Jan 18/1916.
	Arrived in France - Oct-1916.
	Arrived in France Nov 1st 1916
	Wounded - Mar 22/1917
	Hospitals - 26th Gen Cameron's Bn
	- 4th Noct Gen Smith's Bn



**Complaints** - Pain and tightness in right chest. General weakness. Shortness of breath on exertion -

**History** - no previous illness of importance.

**Pre-Condition** - Enlisted on Jan 18th 1916 at age of 16. Went to France on Nov 1st 1916 was in trenches about 6 months. Wounded near Vimy on Mar 22nd 1917 by a snaphnel. Bullet entered right axilla between 5th & 6th space, 2 1/4" outside nipple line and lodged in lung. Wound evidently became septic as on Apr 10th 1917. Had operation at 26th Gen Cameron's. Resection of 9th rib in great axillary space for drainage purposes. Wound nearly healed. Slight discharge. Diminished expansive movement.

Station and Date.

in right side below nipple line extending to post-part of chest; increased vocal fremitus over right chest - marked below nipple line and posteriorly.

relative dullness on percussion in right chest below point of entrance of bullet extending posteriorly -

diminished and distant breathing from nipple line of right chest - posteriorly no rales made out;

cough no expectoration

Heart Neg. action rather rapid but regular

Aortic sound accentuated

Complains of pain and tightness in right chest; and general weakness

deat-

Extra diet: Jonic. Breathing exercises. Light garden work for 2 hrs to be out in fresh air

70 AUG. 1917

Patient is poorly nourished and weak - Pulse - volume good - 84 lying down - 120 after slight exertion slow to return to normal.

Chest: Diminished movement over whole of right side, especially in axilla - Resonance diminished over ~~same~~ <sup>in axilla</sup> area, - breath sounds distant - No rales heard.

Heart: apex out beyond nipple line - Diffuse fulcration in 2nd + 3rd interspace just left of sternum. - Sounds are poor. - second aortic accentuated no aortic sounds.

Carry on: Return with W.W. Barraclough R

16-8-17

Improving. Gained 4 lbs this wk. still looks pale. Blood count ordered. a lin

Camp

2463

MEDICAL CASE SHEET.\*

MIL CNV HP  
WOODCOCK PK  
EPSOM

No. in Admission and Discharge Book.  Year	Regimental No.	Rank.	Surname	Christian Name.
	835 355	Pte.	Defoe.	H.
	Unit.	Age.	Service.	
	4th Canadians	17	Total 19m.	

Station and Date.	Disease	In Pd:
Aug 20/17	G. S. L. Chest. Pneumonia	
		slight Severe Dangerous

The Lord Derby War Hospital, Warrington.

NEXT OF KIN.

Mother, Mrs. Jm. Defoe.  
Linton - 6 W.  
Canada

INOCULATION AGAINST ENTERIC.		
TV	TV	TV
	2	Nil.
Date		

Cross out that which does not apply.

Sept 17. Reaction of Rib Right Chest  
Wound sealed  
To be transferred Camp  
21 7/17 At for from resumed left

Warrant to

Station.

RECOMMENDED FOR

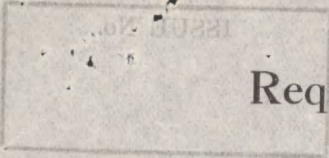
Discharge
On
To
Duty

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

Station  
and Date.



GRANVILLE CANADIAN SPECIAL HOSPITALS



Requisition For Treatment

2463

Date 16/8 1917

REG'TAL No. 835 375 RANK. pl NAME Saper UNIT em.R.

BED 523 WARD 121

INJURY OR DISEASE PART AFFECTED

TREATMENT

REPORT

Blood exam

R. B. C  
W.B. e  
H.S.

5,600,000  
10,400  
75%

SIGNED [Signature]



2463

MEDICAL CASE SHEET.\*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
Year	Unit.	Age.	Service.	
4 <sup>a</sup>	83535	Pfc	Dafae	Gerald
1917 Lincoln.	4 <sup>th</sup> C. M. R.	E. Coy.	17	16/12 F.S. 6/12
Station and Date.	Disease <u>J.W. Chest 1V. 4 penetrating</u>			
5.5.17	wounded 22/3/17 at Anas.			
	bullet w? Rt axilla about 2" space.			
	note from C.C.S. W. in Rt. axilla considerable distress			
	Apex beat 2 1/2 in. out.			
	26/3/17 Of bloodstained fluid withdrawn. No again			
	28/3 A.B. 1/2 in. out.			
	10/4 Of at Camiers. Damage of Rt upper thorax.			
	diapram on chest			
	Cot. General condition very feeble. + wastes.			
	hot much cough. diapram on chest 2 weeks. bullet prob			
	near heart.			
	Discharging wound at the back of Rt axilla.			
	Temp. normal.			
	R.B. Willoughby Smith Capt R.A.M.C. F.			
8/5	Drainage kept on chest			
12/5	much better.			
30/5	Urine acid. Also present small quantity			
5/6.	slowly improving. + putting on weight. Heart still			
	rapid. hot so much discharge from chest.			
20/6	up in a chair. Satisfactory			
30/6.	much improved. Only a little discharge, lung			
	expanding more freely. Pulse slower.			
15.7.17	Urine test acid free.			
15/7.	General condition very fair now. Pulse steady			
	no pain. still a little discharge from Empyema			

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

Station  
and Date.

wound. No dulness to percussion & air entry  
improving. Bullet in or attached to Pericardium

19/7/17.

Should heal with time. C III Canadian  
for disposal

Canada's Class III  
Will remain a  
snare for some  
time before  
could do some  
work

A.B. Willoughby Smith Capt.

20/7/17

No. 835 <sup>355</sup> Name *Dagou Gerald* Sqn., Batty., or Company } *C* Corps *95<sup>th</sup> Battalion* Date of enlistment } *16. 1. 16.* G.C. Badges } Service or Proficiency Pay }  
 Date of last entry in Company Conduct Sheet } *Nil.* No. and date of last drunk } *Nil.* Period not reckoning towards freedom from extra fine } Sheet No. *one* Signature O.C. Company, etc. } *W. M. McIner* Character. *W. M. McIner*

Place	Date of offence	Rank	Cases of Drunkenness	Offence	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remarks
				<i>Transferred to</i>	<i>#10</i>	<i>C. M. R.</i>	<i>25/10/16</i>	<i>W. M. McIner</i>	<i>Capt.</i>
								<i>Adj. 95th. Battalion.</i>	<i>C. E. F.</i>
				<i>Wounded in Action.</i>	<i>25/11/16</i>				
				<i>To England - 11<sup>th</sup> Nov. 1918.</i>					

Army Form B. 122

Place	Date of offence	Rank	Cases of Drunkenness	Offence	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remarks

20NT/D-101

2nd Central Ontario Regimental Depot,  
East Sandling, Kent.

July 2nd, 1917.

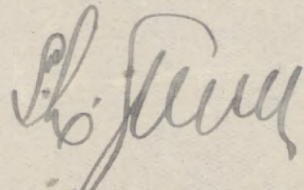
To:- The Officer Commanding,  
4th Northern General Hospital,  
Lincoln.

835355, Pte  
Dafoe G.  
-----

Instructions have been received at this Depot to the effect that the marginally noted man, who is at present a patient in your Hospital, is a minor.

Instructions have been issued that, pending verification of this man's age, he is not to be again despatched overseas.

On discharge from your Hospital will you please see that these instructions are issued to which ever Unit he is despatched.



Captain & Adjutant.

Officer Commanding, 2nd C.O.R.D.





*[Handwritten signature]*

-----  
The undersigned, being a duly qualified and licensed  
attorney at law, do hereby certify that the within  
copy of the original of the within and last  
mentioned instrument is a true and correct  
copy of the original as the same appears from  
the records of the office of the undersigned.

-----  
Notary Public  
for the State of New York

Witness my hand and seal this \_\_\_\_\_ day of \_\_\_\_\_ 19\_\_\_\_.

Notary Public

My office is located at \_\_\_\_\_

Notary Public



1218  
855555  
Pl. Dafoe  
Canmu  $\frac{23}{12}$  1st Col B  
17  
No. 14677



ONTARIO  
REGISTRAR GENERAL

PROVINCE OF ONTARIO  
DOMINION OF CANADA

**This is to Certify** that the following Return of Birth was made to

THE REGISTRAR GENERAL OF THE PROVINCE OF ONTARIO,  
by the Registrar of the Division of *Haladar, Angelsea & Effingham* in the  
County of *Lennox & Addington* for the year A.D. *1900* and  
is now duly on record in the Books of this department and is a true copy of the same.

Name	<i>Gerald Dafoe</i>
Sex	<i>m.</i>
Date of Birth	<i>May 1. 1900</i>
Name of Father	<i>Jas. M. Dafoe</i>
Maiden Name of Mother	<i>Mary Rabbea</i>
Residence of Father	<i>Haladar</i>
Occupation of Father	<i>Farmer</i>
Name of Physician in attendance	<i>Dr. Aull</i>
Name of Person making Return	<i>J. M. Dafoe</i>
Address of Person making Return	
Date of Registration	<i>Oct. 29. 1900</i>
Name of Division Registrar signing Return	<i>Moses Lessard</i>
REMARKS	

This Certificate is granted under Section 7, Chap. 49., R.S.O., 1914, entitled the Vital Statistics Act.



*J. W. McCullough*  
Deputy Registrar General.

Date of issue *May 18 - 1917*  
Parliament Buildings,  
Toronto.

11  
11

Unverhofft  
1891

1891  
1891

1891

1891  
1891  
1891

1891

1891



Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

# Separation and Assigned Pay Branch

*Oct 1916*

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

<i>15</i>			
-----------	--	--	--

*12988  
1515  
8077*

## PARTICULARS OF SEPARATION ALLOWANCE

No. *835355*

Rank *Pt* Promoted Reverted Discharge

Soldier's Name *G. Dapoe*

Battalion *146th Batta*

Beneficiary

Relationship

Address

## PARTICULARS OF ASSIGNMENT

Name *Mrs Mary Dapoe*

Address *Flinton Ont*

Change of Address

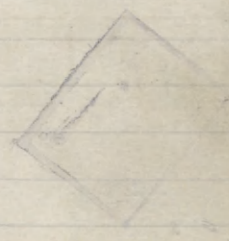
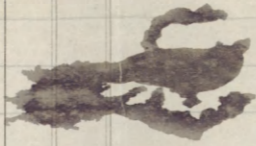
1

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
<i>1917</i>					
<i>Dec 31</i>			<i>225</i>	<i>225</i>	
<i>Jan 2</i>	<i>65934</i>		<i>15</i>	<i>15</i>	<i>S. <del>as</del> account closed 31/1/18. F.X. rendered 6/2/18.</i>
<i>Feb.</i>			<i>15</i>	<i>15</i>	<i>← M.R.O. 2.B 6/2/18: Soldier returned Mutagama 5/1/18.</i>



Date of Enlistment \_\_\_\_\_

MILITIA AND DEFENCE

Date of Assignment \_\_\_\_\_

### Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

--	--	--	--

#### PARTICULARS OF SEPARATION ALLOWANCE

#### PARTICULARS OF ASSIGNMENT

No.			
Rank	Promoted	Reverted	Discharge
Soldier's Name			
Battalion			
Beneficiary			
Relationship			
Address			

Name	
Address	
Change of Address	
1	
2	
3	
4	

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

M. F. W. 128.  
 FORM. 6-7-172-39-1141  
 L. L. 22340-M. & D. 1953.

MILITIA AND DEFENCE  
 ASSIGNED PAY  
 OVERSEAS CONTINGENTS

M. F. W. 12.  
 50m.—6-16.  
 H. Q. 1772-39-319.

To Whom *Mrs Mary Dapoe*  
 Address *Flinton*

By Whom Assigned *Dapoe G.*

Regtl. No. *835355*

Rank *Plt*

Corps *146<sup>th</sup> Batta*

Rate *15.*

OCT 1 - 1916

PAYMENTS

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



100  
100  
100  
100  
100

78