ORIGINAL

1257

# ATTESTATION PAPER.

No. 59267

Folio.

## CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

## QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name? — Alyn Godwin Donaldson
2. In what Town, Township or Parish, and in what Country were you born? — Brockville. Ont
3. What is the name of your next-of-kin? — Allan Samuel Donaldson
4. What is the address of your next-of-kin? — Brockville. Ont-
5. What is the date of your birth? — March 30th 1894
6. What is your Trade or Calling? — Brakeman
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? — no
10. Have you ever served in any Military Force? If so, state particulars of former Service. — 5 yrs 41st Brockville Rifles. Bugle Band.
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.

A. G. Donaldson (Signature of Man).

Alan Lockeram (Signature of Witness).
No 1 Co.

## DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Alyn Godwin Donaldson, 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.

A. G. Donaldson (Signature of Recruit)

Date Feb. 27th 1915 Alan Lockeram (Signature of Witness)
2 Co.

## OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Alyn Godwin Donaldson, 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.

A. G. Donaldson (Signature of Recruit)

Date Feb. 27th 1915 Alan Lockeram (Signature of Witness)
No 1 Co.

9
30
23

15
31
16
62

## 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 Kingston this 27 day of Feb 1915.

W. S. Hughes (Signature of Justice)

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

W S Hughes (Approving Officer)
Lt. Col.

M. F. W. 23.
150 M.—12-14.
H.Q. 1772-39-841.

27/2/15
Kingston

## Description of Alyn Godwin Donaldson on Enlistment.

Apparent Age 20 years 11 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft 4½ ins.

Chest measurement: Girth when fully expanded 37 ins.; Range of expansion 2 ins.

Complexion fair

Eyes blue

Hair light

Religious denominations:
- Church of England
- Presbyterian Yes
- 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).

None

### 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 Feb 27th 1915 — R B Richardson

Place Kingston — Lieut A.M.C. Medical Officer.

*Insert here "fit" or "unfit."

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

### CERTIFICATE OF OFFICER COMMANDING UNIT.

Alyn Godwin Donaldson 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.

W S Hughes Lt-Col. (Signature of Officer)

Date Feb 27th 1915.

C.E.F.

DONALDSON ALYN GODWIN LIEUT.59267 4 RES. BN. 20234

1252

DEMOB.

R. 150

Surname DONALDSON, Christian Names Alyn Godwin,

Rank 59267 Pte., Name and Address of Next-of-Kin

Promotion Temp. Lieut. Allan Samuel Donaldson,

Brookville, Ont.

Unit 39th Battn.,

Place of birth Brookville, Ont.

Married (Yes or No) No.

Appointments

PMD. Date of leaving Canada Date and Cause of Resignation

| | 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 |
|---|---|---|---|---|---|---|
| 8 | 27.11.16. | Brighton. | Temp. Lieut. posted General List and attached C.M.S. | WEST ONT | 21.11.16. | R.O. 27.11.16. |
| 9 | 4.12.16 | " | Overseas to 18th Bn | | 2.12.16 | R.O. 352 |
| 10 | 22.1.17 | 18th Bn. | Reinforcts. arrived from Eng & T.O.S. | | 3.12.16 | Pt II ord 2. |
| 11 | 30.9.14. | " | Granted 10 days leave to England | | 12.9.14. | Pt II ord 68. |
| 12 | 9.10.14 | C.R.O. | Adm 10 Canadian Field Ambulance | | 2.10.14 | C/800 Ic. 1 leg |
| 13 | 13.10.14 | C.R.O. | Adm 2 General Hospital Cameos | Dvd to Base details | 12.10.14 | C/800 Ic. R. Leg Slt. |
| 14 | 28.1.18. | 18th Bn. | Granted 14 days leave to Paris | | 16.1.18. | Pt II ord 6 |
| 15 | 31.8.18 | B.A.M.S. | Adm 8 Red Cross Hosp Boulogne | Dangerously ill | 28-30.8.18 | C.L. 1074 G.S.W. Abdomen |
| 16 | 4.9.18 | " | Previously dangerously Now seriously ill | | 4.9.18. | C.L. 1077 |
| 17 | 14.9.18 | 18 Bn | Invalided Wounded & detached to WORD | | 10.9.18 | |
| 18 | 18.9.18 | WORD | Tos on posting from 18 Bn Wounded | | 18.9.18 | Pt II 220 |

A.F.B. 103 13 DEC. 1916

A.F.B. 103 1 OCT. 1918

| 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 | |
|---|---|---|---|---|---|---|
| 14.9.18 | BAMS | Adm 2 Western General Hosp Manchester | | 11.9.18 | CL 1086 Gsw R Hip Abdomen Sev | 19 |
| 29.10.18 | Ams | Adm Can Convl Officers Hosp Matlock Bath | | 10.10.18 | CL 1124 | 20 |
| | | Discharged | | 23.10.18 | CL 1149 | |
| 31.10.18 | WORD | Ceases shown in Hosp and is detached to Officers Casualty Company Bexhill | | 23.10.18 | Pt II 257 | 21 |
| 19.11.18 | 4th Res | Having been boarded H.G.S is att from WORD | | 18.11.18 | Pt II 274 | 22 |
| 19.11.18 | WORD | Ceases att to C.T.S Seaforths 4 Res BN | | 18.11.18 | Pt II 273 | 23 |
| 6.1.19 | 18 Bn | SOS & To Establishment | | 20.12.18 | Pt II 2 | 24 |
| 11.2.19 | 4 Res. | Ceases to be attached for all purposes | | 11.2.19 | Pt II 35 | 25 |
| 4.4.19 | WORD | Detached to Can Gen Depot for duty | | 31.3.19 | Pt II 76 | 26 |
| 2.6.19 | Ams | Adm 12 Can Gen Hosp, Bramshott | | 27.5.19 | CL 1303 | 28 |
| 11.6.19 | WORD | SOS on posting to "O" Wing CCC Witley | | 22.5.19 | Pt II 12 6'0" Wg Pt II 89 d/24.5.19 | 27 |
| | | Discharged | | 26.8.19 | CL 1358 | |
| 11.7.19 | Ams | Adm 16 Can Gen Hosp, Orpington | | 10.7.19 | CL 1334 "20" | |
| 28.7.19 | WORD | TOS on posting from M Wing | | 10.7.19 | Pt II 151 | |
| 23.8.19 | " | Ceases in H.S.O.S. to "M" Wing | | 18.8.19 | Pt II 165 | |
| 19.8.19. | M. Wing | T.O.S. pending R.T.C. | | 18.8.19. | Pt II dd 131. | |
| 22.10.19 | OMFC Pers. | SOS to CRT Canada | | 6.9.19 | after order No 8 | |

Sailed for Canad 6.9.19 SS MINNEKA SL 103

SOS 17.9.19

24842

Rank | Name DONALDSON Alyn Godwin. | Reg'l No. 59267.

Unit 21st Bn | If in perm. Corps, What Unit? | Married or Single Single

Place and Date of Enlistment Kingston. Ont. 27th Feb. 1915. Place of Birth Brockville. Ont.

Name and Address, Next-of-Kin Allan Samuel Donaldson. Brockville. Ont.

Relationship

Assigned Pay Monthly $ | Payable to

Relationship

Separation Allowance $ | Payable to

Relationship

RL.9-D-837 | Discharge, Date and Place | Reason Dn 6-5-15 | Character

| | 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 |
|---|---|---|---|---|---|---|
| | | | | Embk. M.T. 6.5.15 | | |
| 1 | 19-5-15 | O.C. 21st | Arrived per RMS Melagama | England | 15-5-15 | Inform Form |
| 2 | 27.7.15 | " " | AWL. 1 dys Pay. Restricted ½ Pay. 1 month. W. Sandling | | 25.7.15 | Part II 215 |
| 3 | 9.9.15 | " " | Forfeits 2 dys pay for AWL | " " | 7 2/15 & 8 2/15 | " " 253 |
| 4 | | | Awarded 10 days detn for AWL | " " | 9/9/15 | " " 254 |
| 5 | 8.10.15 | " " | Embarked for France | Folkestone | 14.9.15 | Inform Form |
| 6 | 31/8/16 | 21st Bn | S.O.S. to C.T.D. S'bliffe for Commission | Field | 17/8/16 | P II 034 |
| 7 | 25/8/16 | 39th Bn | T.O.S. from 21st Bn. pending Appt. | W. Sandling | 17/8/16 | " 902. |
| | 30-11-16 | OC 39th Bn | to Commission | | | |
| 8 | 30-11-16 | OC 39th Bn | to be Temp Lieut. Att to C.P.T.D. | W Sandling | 21-11-16 | P II 285 |

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

Forms I. 1237 14

Date 16 8 19

Army Form I. 1237.

# MEDICAL CASE SHEET.*

| No. in Admission and Discharge Book. | Regimental No. | Rank. | Surname. | Christian Name. |
|---|---|---|---|---|
| T 11 | | Lieut | Donaldson | A G |
| Year. 1919 | Unit. | 18th Battn | Age. 24 yrs | Service. 5 6/12 |

Station and Date.

No. 16 CANADIAN GENERAL (ONTARIO) HOSPITAL, ORPINGTON, KENT.

Disease V D Syphilis

Continued from Bramshott Milit Hospital

| | | |
|---|---|---|
| 12-7-19 | IV | N A B .6 Gm |
| 16-7-19 | | Mercury I gr |
| 19-7-19 | V | N A B .6 Gm |
| 23-7-19 | | Mercury I gr |
| 25-7-19 | | Urine - normal |
| 26-7-19 | VI | N A B .6 Gm |
| 30-7-19 | | Mercury I gr |
| 2.8.19 | VII | N A B |
| 9.8.19 | VIII | N A B .6 Wassermann 13-8-19. Negative |

Exposed 15-5-1919 at Windsor England
Sore developed on prepuce 15-6-1919
Admitted No 12 Canadian General Hospital
19-6-1919 Spirionema Pallida found in
Smear from sore Papular eruption on arms
Ulcer right tonsil Inguinal glands enlarged
Left inflammed and reddened Rt sub maxillary
glands enlarged. Transferred to #16 Can
General Hospital 9-7-1919.
Commencing 21-6-1919 and ending 30-7-19
received 4 Novarsenobillon intravenously
3 doses .45 Gm each - 2 doses .6 Gm each
and 1 dose .75 Gm and 5 intramuscular
injections of Mercury - 1 gr each
Treatment unfinished Would not conform
to regulations; ~~Returned to depot for
disciplinary action to then Estabs U.S.~~

~~J E Parke Capt R.A.M.C.~~

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

(A 1014) W3081/P/1296 3,456m 7/18 Drayton Mill Forms/I. 1237/14 (E. 3420)

P.T.O

[P.T.O.

| Station and Date. | |
|---|---|
| | Has received Eight N.A.B.T. Seven Hq i with immunizing |
| | Last Wassermann 13-8-19 Negative |
| | Discharged Classified Recovered |
| | U.S.S. Sussex Capt. |
| | Ch. M.P. |

Forms
I. 1237
12

Army Form I. 1237.

# MEDICAL CASE SHEET.*

| No. in Admission and Discharge Book. | Regimental No. | Rank. | Surname. | Christian Name. |
|---|---|---|---|---|
| 229 | | Lt. | Donaldson | A. G. |
| Year 1919 | Unit. 18 Batt. | Age. 24 | Service. 5-6/12 | |

Station and Date. 12 C9 H

Disease Syphilis

Exposed 15-5-19 at Windsor England
Admitted to hospital complaining of
Pruritis Ani given palliative treatment
on 15-6-19 Sore developed on prepuce
transferred to V.D Ward 19-6-19
On admission Sore on Prepuce Ulcer size
tonsil Inguinal glands enlarged left
inflamed and reddened Sub-maxillary
glands involved. Papular eruption on
arms Spirochaetae Pallidae Positive ++
25-6-19 Wasserman Positive +++

21-6-19 I N.A.B. 45

25-6-19 Hg I

28-6-19 II N.A.B. 45 Urine negative

2-7-19 Hg i. Transferred to Kramlin mil. H.

5-7-19 iii N.A.B. 45.

9-7-19 Transferred to Orpington H.

A.R. Hoey, Capt RAMC

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

(6365) W2944/P438 2,950,000 1/18 McA & W Ltd Forms/I. 1237/13 (E 2349)

[P.T.O.

| Station and Date. | |
|---|---|
| | |
| | |
| | |

Regtl. No. Rank and Name Lieut Donaldson Corps V. D. Clinic

Disease ..... Hospital .....

To Officer i/c Laboratory. Ward .....

Please carry out an examination of the accompanying specimen of Serum from Sore on Penis

with special regard to Dark field

Date 19/6/19 ..... O. i/c Ward.

## LABORATORY REPORT.

Treponema Pallida Positive

Date of Examination 19/6/19

A Montgomery Capt

O. i/c Laboratory.

W.3212. 50M-4-4-18.

Regtl. No. Rank and Name Lt - Donaldson Corps

Disease V D S Hospital 12 C G H

To Officer i/c Laboratory. Ward V D

Please carry out an examination of the accompanying specimen of Urine

with special regard to Albumen & Bile

Date 20 - 6 - 19

O. i/c Ward.

## LABORATORY REPORT.

Reaction acid
albu neg
dpep
Sugar neg
Bile neg

Date of Examination 21/6/19

A - Montgomery Capt
O. i/c Laboratory.

W.3212. 50M-4-4-18.

V. D. Clinic

236

4

PARTICULARS OF A CASE FOR WHICH WASSERMAN S TEST IS REQUIRED.

The particulars below are required for statistical purpose and further of reference, Unless those are furnished the Test will not be carried out

.....

Name Donaldson.....Rank..Lieut.....Reg NO.....

Unit .....

Diagnosis (If syphillis what stage ?) .....

Date of first sore .....T.Pallidum found date, and place,..

,,,.....

Secondaries, if any .....

Other symptoms .....

Treatment Arconical preparations employed .....

Total Dosge .....Of Injections .....

Date if last .....

Mercurial preparations employed.....

Total Dosge.....Of injections.....

Date of last .....

Other treatment .....

Previous Wasserman s date .....Result .....

Where performed .....
Station ans Date .....Signature .....

& & & & & &&-&-&-&-&-&-&-&-&& & & & & & &&-&-&-
Rrsults of Test (Original Wasserman) Quarter System.....
D
Date.....Serial.....Result .....

Remarks .....

WASSERMANN POSITIVE

.....

.....

.....

.....

.....

.....

.....

Canadian General Laboratory
25 JUN 1919
WITLEY

Regtl. No. Rank and Name L. Donaldson Corps

Disease Surgical Hospital

To. Officer i/c Laboratory. Ward K8

Please carry out an examination of the accompanying specimen of

with special regard to throat swab

Date June 13-19 B. Wheeler
O. i/c Ward.

## LABORATORY REPORT.

K. L. Negative

Date of Examination 14/6/19 A. Montgomery Capt.
O. i/c Laboratory.

W.3212. 50M-4-4-18.

# VENEREAL DISEASE CASE-CARD.

Army Form W. 3497.

No 12 Can. General Hospital. V.D Ward.

| Age | Service | Religion | Disease |
|---|---|---|---|
| 25 | C.F.C. | | V.D.S |

| Regiment | Coy. | Reg. No. | Rank | Name |
|---|---|---|---|---|
| | | | Lieut. | Donaldson A.G. |

| Date of Admission | Disposal | Date of Discharge |
|---|---|---|
| 19.6.19 | | |

SUMMARY

This space not to be written upon by M. O. i/c case.

In cases of Syphilis the particulars below must be sufficient to enable the Syphilis Case Sheet (Army Form I. 1238) to be made up from this Card.

1st, 2nd, 3rd attack or relapse

Dates and Places of Three last Exposures: 15.5.19 Wimereux

Main points in history Sore developed on prepuce 13.6.19

Condition on admission Sore on prepuce. Ulcer Rt. tonsil inguinal glands enlarged. Left inflammed Rt. epit. and axillary glands involved. Papular eruption on arms & chest.

Sp. Pal present

[P.T.O.

(9 19 24) W210—P1 200,000 10 17 HWV(P1148) Forms W. 3497/4
1810—P1224 200,000 5/18

| Date | Treatment | | Progress | Complications and their Treatment |
|---|---|---|---|---|
| | Local | General | | |
| 19.6.19 | | Dark field. Sf. Pal Positive | | |
| 21.6.19 | I | N.A.B .45 | | Urine Neg |
| 25.6.19 | | Hgi | | " |
| 28.6.19 | II | N A B .45 | | |
| 2.7.19 | | Hgi | | |
| | Transferred to Brownshott Military Hospital | | | |
| 5.7.19 | III | N.A.B .45 | | neg |
| 9.7.19 | Transferred to 16 Can. Gen. Hosp. Orpington | | | " |
| 12.7.19 | IV | N.A B .6 | | " |
| 16.7.19 | | Hgi | | " |
| 19.7.19 | V | N.A B .6 | | |
| 23.7.19 | | Hgi | | " |
| 26.7.19 | VI | N.A B .75 | | |
| 30.7.19 | | Hgi | | |
| 2.8.19 | VII | N.A B .9 | | |
| 5.8.19 | | Hgi Wassermann Negative | | — |
| 9.8.19 | VIII | N.A.B .6 | | urine normal |
| 13.8.19 | | Hgi Wassermann Negative | | |
| Discharged Classified Recovered | | | | |
| | | | | W.S. Turner Capt. CAMC |

Medical Officer: Major Haig Shaw

Army Form I. 1237.

Whether U.K. or Expeditionary Force: CAN OFFI HP

(If latter, state which).

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# MEDICAL CASE SHEET.*

Ward: C. I.

MATLOCK BATH.

| No. in Admission and Discharge Book. | Regimental No. | Rank. | Surname. | Christian Name. |
|---|---|---|---|---|
| FCO 142 | | Lt. | Donaldson | A G |

| Year | Unit. | Age. | Service. |
|---|---|---|---|
| 1918. | 18th Canadians | 23 | 4. 3yrs |

Station and Date.

2nd W. G. H. ~~Matlock St. Manchester~~ Sept 11th 1918

~~Transfer Class.~~

Disease M.S. Bullet wnd. r. hip & abdominal wall r. & l.

Date of Onset 28.8.18. (Peritoneum uninjured)

11.9.18 Transv. wound 4 in long: along post part of r. iliac crest. Sutured dry. Some pain.

Vertical wound 6 in long r. iliac region sutured - dry.

5/X/1918 Fit for Canadian Convalescent Hosp. Applied for. A.S.P. C.M.R.

9.10.18 Transferred to the Canad Conv Hospital Matlock Bath.

Next of kin: Mother

Mrs A. S. Donaldson.

136 Front St West

Brockville

Canada

| Antitetanus Inocn. | |
|---|---|
| Units. | Date. |
| 750 | 29-8-18 |
| 500 | 7-9-18 |
| 500 | 15-9-18 |
| 500 | 21-9-18 |

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

(44502) Wt. W 11203—M 1150. 1,450,000. 6/12 16. C.F.& S. Forms/I. 1237/12. (E239)

P.T.O.

| Station and Date. | |
|---|---|
| | |
| | |
| | |

Forms
I. 1237
12

Army Form I. 1237.

# MEDICAL CASE SHEET.*

No. in Admission and Discharge Book. T1509

Year 1918

Regimental No. | Rank. Lieut | Surname. Donaldson | Christian Name. Alyn Godwin

Unit. 18 Batt | Age. 23 | Service. CANADA. 3 FRANCE 26 TOTAL 47

Station and Date. C.C.O.H. HATLOCK BATH. Oct 9th

Disease G.S.W. Thigh R.

ONSET 29.8.18 WHERE France:

HISTORY OF DISABILITY.

M.G. Bullet entered over R. Sacro-iliac junction and exit 3" to R of umbilicus. Entrance wound excised to bone. Small hole in bone. Exit wd. dirty. Excised down to ilium & cleaned. Flavine packs. Ant. wound closed. and post. partially so. Evac. to 2/w Gen HP 11.9.18
To CCOH. 9.10.18

PERSONAL AND FAMILY HISTORY.

Nil:

PRESENT CONDITION. fair

DIGESTIVE SYSTEM. } O.K.
CIRCULATORY SYSTEM. }
RESPIRATORY SYSTEM }
NERVOUS SYSTEM. }
G.U. SYSTEM. }

Wounds healed. Complains of weakness and pain, especially in ant wd. No particular indication of trouble.

LOCAL CONDITION.

Treatment: Baths: Rem. Gym. Mass.
Hamstrings Capt.

12.10.18 Complains of pain in hip & weakness.
16.10.18 Ready for board
19-10-18 Cat. D.
Skin clear
Wounds healed

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

(44502) Wt.W 11203—M 1150. 1,450,000. 6/12 16. C.F.&S. Form/I. 1237/12. (E239)

P.T.O.

| Station and Date. | |
|---|---|

59267

~~1265~~

ORIGINAL

21st LIEUT

# MEDICAL HISTORY SHEET.

Surname Donaldson Christian Name Alex Godwin

Examined on 27nd day of Feb 1915
at Kingston

Approved by R B Richardson
Rank Lieut A.M.C. M.O.

Birthplace City or Town Brockville
County Ont.

Apparent age 20 yrs. 11 mths

Trade or occupation Brakeman

Height 5 Feet 4½ Inches.

Weight 123 Lbs.

Chest measurement Minimum 35 inches.
Maximum expansion 2 inches.

Physical development

Small-Pox Marks

Vaccination Marks Arm Right. Left. ✓
Number one

When Vaccinated last 1909.

(a) Marks indicating congenital peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

| Date | Fit or Unfit | Examined for Re-engagement. |
|---|---|---|
| | | 14 DEC 1916 M.O. |
| | | M.O. |
| | | M.O. |
| | | M.O. |
| | | M.O. |
| | | M.O. |
| | | M.O. |

| Date | Result | Vaccinations. |
|---|---|---|
| 26/3/15 | | J. E. Ethenington Mgr. A.M.C. |
| | | M.O. |
| | | M.O. |

| Date | Result | Anti-Typhoid Inoculations, Etc. |
|---|---|---|
| 2/3/15 | | J. E. Ethenington Mg. A.M.C. M.O. |
| 17/3/15 | | J. E. Ethenington Mg. A.M.C. M.O. |
| | | M.O. |

Enlisted on 27 day of Feb. 1915 at Kingston

| | Corps. | Regt'l Number. | Habits. | Date. |
|---|---|---|---|---|
| Joined on enlistment | 21st CANADIAN BATTALION. | ~~59267~~ LIEUT | | |
| Transferred to.. | 18th Bn. | | | |

## EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

| Station. | Date. | Disease. | Result. |
|---|---|---|---|
| Toronto Base | 18-10-15 | G.S.W. Thigh & Abd. Wall | D. Upon Cessation of Hostilities |
| Orpington | 13-11-16 | as- | C. to duty Invalided |
| Witley | 15-1-19. | G.S.W. thigh (Sup.) Abd. Wall | C. to Base Kingston |
| Witley | 27-2-19 | Myalgia - under scar Rt. Abd. Wall | Service with garrison or Labour unit abroad |
| Witley Camp | 25-8-19 | do | and W.O. [illegible] cyclo |

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—9-14.
H. Q. 1772-39-439.

21st Battalion (C.E.F.)

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

| STATION. | Date of Arrival at the Station. | Dates of Admission into Hospital. Day | Month | Year | Dates of Discharge from Hospital. Day | Month | Year | DISEASE. | Number of days in Hospital. | Remarks on nature of the disease: how induced: if mild or severe: if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations. | Signature of Medical Officer. |
|---|---|---|---|---|---|---|---|---|---|---|---|
| No.10. C.F.A. | | 2 | 10 | 17 | 12 | 10 | 17 | ICT. Rt Leg. | | | 800-804 ED. |
| No.20. G.H. Camiers | | 12 | 10 | 17 | 22 | 10 | 17 | ICT. Rt leg. | | Discharged to Base Details. | 804-818. ED. |
| 2nd WESTERN GENERAL HOSPITAL, MANCHESTER | | 11. | 9. | 18. | 9. | 10. | 18 | W. S and Hip & Abdomen wall. | 29. | Wounded 28-8-18. Trans. wd 4" long, along post. part of rt iliac crest. Vertical wound 6" long r iliac region. For transfer. | |
| C. C. S. A. Instow | | | | | | | | | | | |
| Bath | | 9 | 10 | 18 | 23 | 10 | 18 | do | 14. | To further hardening at Bushill — | Major, R.A.M.C., T.F. Secretary and Registrar 2nd WESTERN GENERAL HOSPITAL, MANCHESTER. |
| Bramshott Mil. Hosp. | | 19 | 6 | 19 | 9 | 7 | 19. | V.D.S. | | Prim. sore on penis. Ulcer pd. tonsil. Glandshatty. Pap. rash. Dark field T.P. Pos. Three N.A.B + Hg. given one period at 6.19 & 5.7.19. | C.B. Young Captain |
| #16 G.H. | | 9 | 7 | 19 | 1 | 8 | 19 | | 22 y | Transferred to Orpington H. No after Effects; received 3 N.A.B - 3 Hg. ~~Treatment unfinished. returned to Depot for disciplinary action. Disablement of~~ ~~sixth~~ Has had in all Eight - N.A.B + Seven Hgi. Last - N.A.B 5.8.19 Last Wassermann 13-8-19 Negative Discharged Classified Recovered | ~~J.H. Rabb Capt RAMC~~ W.H. Turner Capt-RAMC |

CERTIFIED CORRECT
13.DEC.1916
CANADIAN RECORD OFFICE

(9178) Wt. 27165—2146.—1,250,000.—2-15.—C. & G. Forms B. 103/1.

(Sheet No. 1) GL attens 21.11.16

Army Form B. 103.

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

## Casualty ~~Form~~ Active Service.

Regiment or Corps 21st Battalion 39th Battn

Regimental No. 59267 Rank ~~Pte~~ Corporal Name Donaldson A Gordon

Enlisted (a) ~~27.2.16~~ Terms of Service (a) Duration of war Service reckons from (a) ~~27.2.16~~

Date of promotion to present rank 21. 11. 1916 Date of appointment to lance rank Numerical position on roll of N.C.Os.

Extended Re-engaged Qualification (b)

| Report Date | Report From whom received | Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case. | Place | Date | Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents. |
|---|---|---|---|---|---|
| | | Discharged Sick | Boulogne | SEP 14 1915 | |
| | | Struck off strength on being transferred to C.3D for Commission. | Shorncliffe | 17/8 | 1810: No. 34 4/31.8.16. W.O. Letter 121/D/610 (A.G.4.a) 8/8. AA.G. Can. Sec K.E. 5512. |
| | | | | | Lieut Col. a.a.g. Captain for, Canadian Section |
| 21. 11. 1916 | BRIGHTON | Temp Lieut, posted to Gen list and attached C.M.S | | 21/11/1916 | F.O. 21. 11. 1916 |
| 4. 12. 1916 | " | Overseas to 18th Battn | | 2-12-1916 | F.O 3/5/17 |
| | | | | | J G Burnaby MAJOR, FOR OOC. i/c RECORDS, C.E.F. |
| 3-12-16 | A.E.S.O. Havre. | Arrived from England, & taken on strength of 18th Can. Bn. (Auth: War Office List No. 13, 121/Drafts/4009 (A.G.4.a), dated 29/11/16) | Havre | 3-12-16 | Landing Return 7036. (Can. Ident. No. KR. 5/434) Pt. II Order 2, 22/1/17. |

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

OVER

[P.T.O.

# Lieut Donaldson A. G.

| 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. |
|---|---|---|---|---|---|
| 9-12-16 | 18th Bn. | Joined unit | In the Fld. | 7-12-16 | B. 213. |
| 15-9-17 | 18th Bn | Granted 10 days leave to England | 12-9-17 | B. 213. | Pt. II Ord. 68, 30/9/17. |
| 2-10-17 | 6 C.F.A. | I.C.T. leg. Trans. to | 10 C.F.A. | 2-10-17 | A 36. (Ext. A. 3053) |
| do | 10 C.F.A. | I.C.T. R. leg. Adm. | 10 C.F.A. | 2-10-17 | do (Ext. A. 3280) |
| 11-10-17 | 22 Gen. | I.C.T. leg R. (M) Adm. | No. 22 Gen. | 11-10-17 | W. 3034 (Ext. A. 5274) |
| 22-10-17 | 20 Gen. | do do Discharged to | Base Details | 22-10-17 | do (Ext. A. 7433) |
| 23-10-17 | 2 Can. I.B.D. | Admitted from hosp | 2 Can. I.B. Dep. | 23-10-17 | Nom. Roll. |
| 19/11/17 | do | Left fr. CCRC | Field | 19/11/17 | Nom Roll, 146 |
| 23/1/17 | CCRC. | On strength CCRC. | do | 25/11/17 | Nom Roll. 2 |
| 23/11/17 | do | Left fr. 18th Bn. | do | 24/11/17 | do 47 |
| 30-11-17 | 18th Bn. | Rejoined 18th Can. Bn. | In the Fld. | 24-11-17 | B. 158. |
| 19-1-18 | 18th Bn. | Granted 14 days leave to Paris | | 16-1-18 | B. 213. Pt. II Ord. 6, 28/1/18. |
| 31-8-18 | 18th Bn. | Wounded. | In the Fld. | 28-8-18 | B. 213. Pt. II. Ord: 92, 24/9/18. |
| 30-8-18 | 8 B.R.C. Hosp. | GSW. abdomen. Adm. | 8 B.R.C. Hosp. | 30-8-18 | W. 3034 (Ext. H. 4652) |
| 10-9-18 | do | GSW. abdomen (penet). Trans. to | England | 10-8-18 | do (Ext. H. 8039) |

OVER

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

## Casualty Form—Active Service.

Regiment or Corps.....18th Bn. C.E.F.....

Rank...Lieut.....Surname...Donaldson.....Christian Name...Alym Godwin.....

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

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

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

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

or Corps Trade and Rate.....

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

| Report: 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... | | | |
| 11.2.19 | 4th Res. Bn. | Ceases to be attached from W.O.R.D. for all purposes and attached for quarters and rations | Witley | 11.2.19 | P.C. 2 D.O. No. 35. |
| | | | | | LIEUT. & ASST. ADJT. RESERVE BATTALION FOR O. C. 4TH CANADIAN |
| 12.2.19 | W.O.R.D. | Attached to Depot Coy for duty with Reserve Depot Troops | Witley | 11.2.19 | W.O. # 36 |
| 4.4.19 | - | Detached to Can General Depot Seaford | Witley | 31.3.19 | W.O. # 76 |
| | | | | | WESTERN ONTARIO REGIMENTAL DEPOT |

(*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 1121. 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 | | | | |
| 11.6.19 | WORD | SOS to "O" Wing 666 Witley | | 22.5.19 | Part II 136 |
| 24.5.19 | "O" Wing CCC | T.O.S. | Witley | — " — | " 39 |
| 28.7.19 | WORD | T.O.S. from M" Wing 666 | | 10.7.19 | " 151 |
| | | | | | Major, For A.G. Canada |
| | B.D.S. ON PROCEEDING TO CANADA. Part II D.O 145 | 6/9/19 | | A.H. Martin Capt FOR OFFICER COMMANDING "M" WING, C.O.D. | |
| | | Embarked Tilbury 6/9/19 | | E.F. Gerring Lt. | |
| 20-9-19 | M.H.Q. Ottawa | S.O.S. C.E.F. in Canada on General Demobilization | M.D. No. 3 | 6-9-19 | C.E.F. R.O. No. 2183-19 |
| 27-9-19 | M.H.Q. Ottawa | S.O.S. C.E.F. in Canada on General Demobilization | M.D. No. 3 | 17-9-19 | C.E.F. R.O. No. 219-4-19 |
| | | | | H. Winter Capt. for Director Personal Services | |

Army Form B. 103. (Sheet No. 2) Regimental Number.....

**Casualty Form—Active Service**

CERTIFIED CORRECT
1 OCT 1918
CANADIAN RECORDS OFFICE

Regiment or Corps 18th Battalion, C.E.F.

Rank Lieut Surname DONALDSON Christian Name Alyn Godwin

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

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

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

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

or Corps Trade and Rate.....

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

| Report | | Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A.36, or in other official documents. The authority to be quoted in each case. | Place of Casualty | Date of Casualty | Remarks Taken from Army Form B.213, Army Form A.36, or other official documents |
|---|---|---|---|---|---|
| Date | From whom received | | | | |
| | | Embarked ... | | | |
| | | Disembarked... | | | |
| 10-9-18 | A.T. Pieter de Connick | G.S.W. abdomen (penet). adm. | A.T. Pieter de Connick | 10-9-18 | W.3083 (Can. Sect. No. 6009) Pt. II Ord. 92, 24/9/18. |
| | | Detached to Western Ontario Regtl. Depot, WITLEY. | | | |
| | | J.Whogan Major for Lt.-Col., A.A.G. Canadian Section. G.H.Q. 3rd Echelon B.E.F. | | | |
| 18.9.18 | N.O.C.D. | Having been abs to 2nd Western Gen Hospital as I.O.S. on paying pay 18th Bn | Witley | 11.9.18 | Part II 80 # 220 J.B. Watson ..... LIEUT. OFFICER i/c RECORDS |

(*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 | | | | |
| 31-10-18 | W.O.R.D | Cease to be shown on Hospital Strength & detached to Offrs Casualty Co Bexhill. | Witley | 23-10-18 | Part II AO # 257 B Jackson LIEUT. OFFICER i/c RECORDS, WESTERN ONTARIO REGIMENTAL DEPOT |
| 28-10-18 | G.O.C.T.S. | Rtn'd C.T.S. from W.O.R.D. | Bexhill | 23.10.18 | D/O 253 |
| 15-11-18 | " " | Cases to be Attach'd C.T.S. on proceeding to W.O.R.D. | " " | 15-11-18 | " 269 Forrester Lieut. Asst. Adjt. Canadian Training School. |
| 19.11.18 | W. O. R. D | Detached to 4th Res Bn. | Witley | 17.11.18 | Part II AO # 273 A Shuckburgh WESTERN ONTARIO REGIMENTAL DEPOT |
| 22-11-18 | 4th Can: Res: Bn: | Attached from W.O.R.D Boarded 4.11.18 2 mos: | Witley | 18-11-18 | Pte 2 D.O. No 274 |
| 6-2-19 | G.O.C. in C. Aldershot Command. | Severely Reprimanded by sentence of G.C.M. on following charges. 1. Conduct to the prejudice of good order & military discipline. 2 Behaving in a scandalous manner unbecoming the character of an officer & a gentleman | Witley | 6-2-19 | Promulgated at Witley Camp Surrey. 6-2-19 |

14. What is the officer's present condition? Gen. condition good. Heart, lungs & nervous system normal. Wounds:- Large operation scars 6" to 8" long over right iliac region, & to right of umbilicus; healed but somewhat tender, especially over iliac bone which was penetrated & afterwards curetted. The board does not consider this officer fit for G.S. at present

15. To what degree is the officer disabled at the present time? —

(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? two 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 No, two months.

B.—Fit for service in a garrison or labour unit abroad No. two months.

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. 307 of 1918 been complied with?

W. Wallace Capt. President.

G. W. Mackie Capt

Jno Nuchol, Capt } Members.

343. W3035/1166. 29. 6. 18. Wh. P. 2[illegible] E.3410.

CONFIDENTIAL. Army Form A. 48.

# MEDICAL BOARD REPORT ON A DISABLED OFFICER.

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

Station BEXHILL

Date 13-11-18

1. Rank and Name Lieut DONALDSON, ALYN GODWIN,
2. Unit 4th Res. Bn. W.O.R.O. WITLEY.
3. Age 23 4. Total Service 4 yrs 12 War Service { (a) at home 2/12 (b) abroad 4 yrs 3/12 (In France 26/12)
5. Address C.O.C.C. 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. THIGH, R. (PER.)
7. Date of origin of disability 29-8-18
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 by M.G. bullet, entered R. sacro-iliac junction, exit 3" to right of umbilicus - passing through ilium. Evacuated & admitted to 2 W.G. hosp. 11-9-18; to C.C.O.H. 9-10-18 & boarded & given D. one month on 17-10-18. Says he is improving, but cannot walk more than two miles at a time without discomfort at sites of both wounds.

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. in France.

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

[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.

[R.T.O.

CONFIDENTIAL. Army Form A. 48.

# MEDICAL BOARD REPORT ON A DISABLED OFFICER.

(ALSO TO BE USED FOR DISABLED NURSES.)

Station C.C.O.H. MATLOCK BATH.DERBYS.

Date 17-10-18.

1. Rank and Name LIEUT. DONALDSON; ALYN, GODWIN,

2. Unit 18th Can.Battn. W.O.R.D. Witley.

3. Age 23 4. Total Service 47 Mos. War Service { (a) at home 5 Mos. (b) abroad 36 France.

5. Address 4th Can.Res. Bn. Witley. Surrey.

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. THIGH. RIGHT. PERF.

7. Date of origin of disability 29-8-18.

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.

Machine Gun Bullet entered over right sacro iliac junction and exit, 3" to Right of Umbilicus. Entrance wound excised to bone. Small hole in bone. Exit wound dirty, excised down to ileum and cleaned. Flavine packs. Ant. wound closed and post., partially so. Evacuated to 2/W.General Hospital,11-9-18. To C.C.O.H., 9-10-18.

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

Major, D.A.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? Bullet wound.

[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? N.A.

If so, by what specific military conditions? N.A.

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? Generally good. Heart and Lungs sound. Wounds healed and there is no appreciable disability, except some weakness with undue exercise. The board would advise a little further time at Bexhill after which he should be fit for G.S.

15. To what degree is the officer disabled at the present time? ----------

(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? ------- 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? Dressings, &c., Rem.Gym., at Canadian Convalescent Officers' Hospital, Matlock Bath.Derbys.

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 — No.One Mo.

B.—Fit for service in a garrison or labour unit abroad — No.One Mo.

C.—Fit for home service:—

(i) Active duty with troops — No.One Mo.

(ii) Sedentary employment only — No.One Mo.

D.—For admission to a command depot — Yes.

E.—Requiring indoor hospital treatment:—

(i) In an officers' military or auxiliary convalescent hospital — N.A.

(ii) In an officers' hospital — N.A.

F.—Permanently unfit for any further military service — N.A.

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

A.C.Rankin.Lt.Col.C.A.M.C. President.

W.J.McAlister,Major.C.A.M.C.

H.A.Mitchell,Capt.C.A.M.C. } Members.

"C".

343. W3035/1166. 29. 6. 18. Wh. P. [illegible] E.3418.

CONFIDENTIAL.

Army Form A. 45.

# MEDICAL BOARD REPORT ON A DISABLED OFFICER.

(ALSO TO BE USED FOR DISABLED NURSES.)

Station Witley

Date 15-1-19.

1. Rank and Name LIEUT. DONALDSON, ALYN GODWIN.
2. Unit. 4th Res. Bn. (18th Bn).
3. Age 23 4. Total Service 4 9/12. War Service { (a) at home 1 1/2 / (b) abroad 3 6/12 France
5. Address 4th Res. Bn. Witley Camp.

## 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. THIGH. R. (PER.)
7. Date of origin of disability 29.8.18.
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 by M.G. bullet entered at rt sacro-iliac junction, exit 3" & rt of umbilicus - passing through ileum. Admitted 2nd W. Gen Hosp. 11.9.18. wound 4" long along post part of rt iliac crest. Vo-luteal ord 6" long rt. iliac region. V/O Shallcock 9.10.18. ATA 45-0/13-11-18 states he was wounded 17.10.18 - 1 one month. Board on 13-11-18. gave home service for two months. States he is steadily improving

## 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? Gun Shot. 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? N.A.
If so, by what specific military conditions? N.A.

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.

Boilerplate: I concur in the findings of the Board of Medical Officers recorded herein.
Certain R.A.M.C. for D.G.S. Canadians.

14. What is the officer's present condition ? General condition good. Large operation scars 4" long over rt. sacro-iliac crest & 6" long over rt side of abdomen (vertical) - no tenderness. States he can walk well at own speed & is steadily getting better. Heart, lungs & nervous system normal. This Officer is not considered fit for G.S. for two months.

15. To what degree is the officer disabled at the present time ? T.D.

(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 ? two months. No

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 — No - two months

B.—Fit for service in a garrison or labour unit abroad — No - two months

C.—Fit for home service :—

(i) Active duty with troops — Yes - two months

(ii) Sedentary employment only —

D.—For admission to a command depot —

E.—Requiring indoor hospital treatment :— T.D.

(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 ? —

H. J. Barton Surgn. [illegible] President.

Jno. L. Hammond Capt. CAMC. Members.

(C.S. 2342) Wt. W.764—P. 955 500m. 19/4/18 3025 H.S. & Co.

Surname. Christian Name.

DONALDSON A. G.

Rank. Unit.

Lieut. 18th. Batt'n. W'O'RD.

Date of admission.

Hospital

No. 10 Canadian Field Ambulance. 2-10-17.

No. 20 General Hospital, Camiers. 12-10-17.

No.8 Red Cross Hospital, Boulogne. 30-8-18.

Transferred Hosp.

HS.to 2nd.West.Gen.Hosp.Manchester 11-9-18.

Canadian Conval.Offs.Hosp.Matlock 10-10-18.

Hosp.

12.. C.G.H.Bramshott. 27-5-19.

16. Can. Gen. Hospt. Orpington. 10-7-19.

Hosp.

Diagnosis. I.C.T. rt.Leg.

G.S.W. Abdomen;(Dangerously ill, 30-8-18).

Later diagnosis. Now seriously ill:-4-9-18.

GSW.rt.Hip & Abdomen severe.

Hemorrhoids.

"V.D.G"

Disposition. Date.

Disch.to Base:-22-10-17

Discharged:-23-10-18.

10-10-17 800.

15-10-17 804.

31-10-17 818.

C.L. 31-8-18 1074-2.

C.L. 4-9-18 1077-2.

C.L 14-9-18 1086-2.

C.L 29-10-18 1124-5.

C.L 27-11-18 1149-4.

C.L 2-6-19. 1303-2.

C.L.

do. 16-8-19

C.L. 11-7-19 1334-2

26-8-19 1358.

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

D. M. S. 1347.

| Surname | Christian Name | Reg. No. |
|---|---|---|
| DONALDSON | A. G. | |

| Rank | Unit |
|---|---|
| Lieut. | 18th. Batt'n. 4th Res. |

| MEDICAL BOARD held at | Date | Serial No. |
|---|---|---|
| Buxton Area | 17-10-18. | |
| (1) Seaford Area | 13-11-18. | |

| Other Medical Boards at | Date | Serial No. |
|---|---|---|
| Witley Area | 15-1-19 | |
| (2) do. | 27-2-19 | |
| do. | 25-8-19 | |
| (3) | | |
| (4) | | |
| (5) | | |

Condition found by Board

GSW.rt.Thigh. GSW Thigh R. Perf.

Disposition Recommended Lac.Wd.Buttock, Abdomen wall, V.D.S.

(1) Fit for C.C.D. unfit L.D.&.G.S. 1 month.
Fit H.S. Unfit G.D. G.S., 2 months.

(2) Fit Home ser.unfit G.D.&.G.S. 2 months.

(3) Fit Home ser.Perm.unfit G.D.&.G.S.
Fit Home ser.unfit G.D.&.G.S. 6 months.

(4)

(5)

PENSIONS & CLAIMS BOARD held at Date.....

Disposition

Remarks

Indicate by a P.T.O. if continued on other side.

H. W. & V., Ld.—7025-16.

No. 1252 RANK, Pte. NAME Donaldson, A. G.
59267 May payist

T. O. S. 1-3-15. D. 0.93 of 1-9-15. UNIT 21st Battalion
(2nd O/S Contingent)

M. D. 3.

| PAID FROM | PAID TO | SIG. OR REC'T | PROMOTIONS, TRANSFERS, DISCHARGES, ETC. | |
|---|---|---|---|---|
| | | | PARTICULARS | AUTHORITY |
| 1915- | 1915- | | | |
| Mar 1 | Mar 31 | ✓ | | |
| apr. 1 | apr. 30 | ✓ | | |
| May | | ✓ | | |

UNIT SAILED
MAY 20 1915

C

C4

H.3.

CARD No.

SURNAME. Donaldson

CHRISTIAN NAMES Alyn Godwyn

REGL. No. 602525 RANK ~~Pte~~ Sergt. Lieut.

Log. 17-9-19 Demob
R.C. 2194 FOLL. 227-919
# 3.3b

UNIT 21st Bn

FORMER CORPS 4th Brockville Rifles Bugle Band 3-yrs

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL Donaldson, Allan S.

RELATIONSHIP TO SOLDIER R.R.S.

ADDRESS Brockville, Ont, Can

COUNTRY OF BIRTH Canada, Brockville DATE Mar 30/94

PLACE OF ATTESTATION Kingston DATE Feb 24/15

Sailed from Montreal Per S.S. "Metagama" 6-5-15

O/S 6-5-15 68/5- R/C 14-9-19 467 Lieut

L. L. 90589.—M. & D. 6312.

M. F. W. 22. 100m.—1-16. H. Q. 1772-39-839.

Prom. to Lieut. 21/11/16. auth Col. Ashtons wire. orders 6165.

MARRIED SINGLE Yes WIDOWER

TRADE OR CALLING Brakesman RELIGION Presbyterian

DESCRIPTION.

APPARENT AGE 20 YEARS 11 MONTHS

HEIGHT 5 FEET 4 ½ INCHES

CHEST MEASUREMENT 37 INCHES EXPANSION 2 INCHES

COMPLEXION Fair EYES Blue HAIR Light

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE Kingston DATE Feb 27/15

FORM R. 149.
7108—2501—7/2/17.

Name DONALDSON Rank Lieut. Reg. No.
Unit Alyn Godwin
18th.Bn.
Next of Kin Canada

| Date | Movement | Place | Casualty | List No. | Notified N/K O. | W.O. List |
|---|---|---|---|---|---|---|
| 2.10.17. | 10.Can.Fld.Amb. | ICT | R Leg | 800 | | |
| 12 10 17 | 20 Gen Hosp Camiers | 36T | R Leg Sht | 904 | | |
| 22 10 17 | Disch to Base Details | | | 918 | | |
| | | | | | R 26/10/17 | |
| | | | | | B 3/12/17 | |

| Date | | Movement | Place | Casualty | List No. | Notified N/K O. | | Ret'd. List |
|---|---|---|---|---|---|---|---|---|
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| LIST NO. | HOSPITAL | DATE OF ADMISSION | REMARKS |
|---|---|---|---|
| 800-1 | No 10 Can Fld. Amb. | 2/10/17 | I.C.T. R. foot. |
| 804-1 | No 20. Gen Camiers | 12-10-17 | " " " " " |
| 818.-1 | Fish. to Base Details Etaples | 22.10.17 | " " " " Leg |

NAME Donaldson G.

RANK AND CORPS Lieut 18th Bn.

REGT'L No.

H. Q. FILE No. 649.

FOLLOWS No.

FOLLOWS

CABLE

| NO. | DATE |
|---|---|
| | |

NATURE OF CASUALTY

L. L. 20497—M. & D. 7908

M. F. W. 42—50M.—5-17.
H. Q. 1772-39-8s3.

Form B. 149.

Name DONALDSON Rank LIEUT. Reg. No.

Unit A Lyn. G odarn 18th Bn Visited by Lt Hook 18th Bn

Next of Kin Canada

| Date | Movement | Place | Casualty | List No. | Notified N/K O. | W.O. List |
|---|---|---|---|---|---|---|
| ~~1918~~ | | | | | | |
| 30-8 | 8 Red X Hos. Boulogne (Ph WO 509) | | | | | |
| | DANGEROUSLY ILL MAY BE VISITED. | | GSW Abdomen. | 1074 | Mother 2/9 | |
| 4-9 | Now Seriously Ill (Ph WO) | | | 1077 | O.H.M.S. | |
| 11-9 | 2nd Lieut Can Con Hos Manchester Ex HS (7001) | | GSW R Hip Abdomen and | 1086 | ✓ | |
| 10-10-18 | Can Con Off Hos. Matlock Bath 7001 | | ✓ | 1124 | | |
| 23-10-18 | Discharged | 7003 | | 1149 | | |

| Date | | Movement | Place | Casualty | List No. | Notified N/K O. | | W.O. List |
|---|---|---|---|---|---|---|---|---|
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Form 59267.

NAME Donaldson, Alyn Godwin

REGT'L NO.

H. Q. FILE No. 649.

RANK AND CORPS Lieut. 18th Bn

FOLLOWS NO.

FOLLOWS

| CABLE NO. | CABLE DATE | NATURE OF CASUALTY |
|---|---|---|
| | | Nok Allan A. Donaldson (R.N.S.) Brockville, Ont. |
| O 1017 3-4 | 1-9-18 | Dang ill 8. B.R.6 H. Le Touquet. |
| 4-4 | | Appd 30th/18. Gsw. abdomen. M.B. V.v |
| O.1102 | 5-9-18 | Pres. Regt. Dang. ill now Serill Sept. 4th 1918 |
| W.Sen.1-3 4 | 14-10-18 | Prog. Sates 2nd. W. Gen. Dt. Manchester. |

L. L. 26438. M. & D. 8207.

M. F. W. 42—50M.—8-17.
H. Q. 1772-39-893.

| LIST No. | HOSPITAL | DATE OF ADMISSION | REMARKS |
|---|---|---|---|
| 1074 2= | 8 R.C. Boulogne | 30-8-18 | GSW abdomen Dangerously |
| 1077 2= | Prevdang now serious | 4-9-18 | " " |
| 1085 2= | 2nd W. Gen Manchester | 11-9-18 | GSW r hip abdomen severe |
| 1127 (3) | Can. Conv. Officers Matlock Bath | 10-10-18 | G.S.W. Hip. R. Abdomen |
| 1149 (4) | " " " " Disch | 23-10-18 | " " " " |

Form R. 149.

a/a

Name DONALDSON Rank Lieut. Reg. No.

Unit ~~10th Bn.~~ A Lyn B Godwin works

Next of Kin Canada

| Date 1919 | Movement | Place | Casualty | List No. | Notified N/K O. | W.O. List |
|---|---|---|---|---|---|---|
| | 27-5 Can. Hosp. Bramshott. (10985) Hemorrhoids. | | | 1302 | ✓ | |
| 10.7 | 16 Can. Gen. Hosp. ~~Bramshott~~ Orpington | 7001 | 20 | 1334 | ✓ | |
| 16-8-19 | Discharged (Thos. Cell) | — | | 1358 | | |

| Date | Movement | Place | Casualty | List No. | Notified N/K O. | W.O. List |
|---|---|---|---|---|---|---|
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| LIST No. | HOSPITAL | DATE OF ADMISSION | REMARKS |
|---|---|---|---|
| 1303 2/ | 12 Can. Gen, Bramshott | 27-5-19 | Hemorrhoids |
| 1334 2/ | 16 Can Gen Hosp | 10-7-19 | 20. |
| 1358 1/ | Discharged | 16-8-19 | 20 |

NAME Donaldson, A. G. REGT. No.

RANK AND UNIT Lieut W.O.T.P.D.

NEXT OF KIN

| CABLE | | NATURE OF CASUALTY |
|---|---|---|
| No. | DATE | |

M. F. W. 42—100M.—8-18.
H.Q. 1772 39-893.

Form DMS 1401.

A. & D. CARD

HOSPITAL.

AT Alyn Southampton Conn.

A. & D. No. 229 PL. OF ACTION

RANK Lieut REG. NO. — UNIT 18 Battn C.E. Dep. SICK OR WOUNDED

NAME Donaldson H.G. AGE 24 RELIGION Presb

PLACE IN HOSPITAL ward 20. 11

DIAGNOSIS Piles

ADMITTED 26/5/19 FROM Witley

DISCHARGED / / TO

TRANSFERRED 2.7.19 B.M.H.

SERVICE AT HOME 5/6/19 IN FIELD

RESULTS

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

P.T.O.

REMARKS

Number ..... Rank Lieut

Surname DONALDSON.

Christian Name Alyn GODWIN.

Units ..... Theatre of War France

Date of Service 15-5-15. 14-9-15. 6-9-19

Remarks

W.O.K.

Latest Address 131 Pearl St. Brockville Ont.

Roll No. B Page 13018

200m—2—21.M.

DESP. MAY 16 1922
REQN. No. S.V. 33421

Rank | Name DONALDSON Alyn Godwin. | Reg'l No. 59267.

If in perm. Corps, What Unit?

Unit 21st Bn | Married or Single Single

Place and Date of Enlistment Kingston. Ont. 27th Feb. 1915. | Place of Birth Brockville. Ont.

Name and Address, Next-of-Kin Allan Samuel Donaldson. Brockville. Ont.

Relationship

Assigned Pay Monthly $ 15 | Payable to Mrs H. Donaldson

136 Pearl St, West, Brockville. Ont. | Relationship

Separation Allowance $ | Payable to

Relationship

Discharge, Date and Place Convalescent L.S.H. | Reason | Character Good

PAY OFFICE, A.E.D. OTTAWA
DEC 15 1917
CANADIAN CONTINGENTS

Entered on N.E. Card Index ... GM

Checked by T.J. Williams 687

| Date From | Date To | PAY No. of Days | PAY Rate | PAY Amount | Field Allowance No. of Days | Field Allowance Rate | Field Allowance Amount | Other Credits | Total Credits | Voucher No. | Voucher Date | Cash Payments | Assigned pay | Other Charges | Total Debits | Balance | Remarks, Casualties, etc. |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| June 1 | June 30 | 30 | 1.00 | 30 | 30 | .10 | 3 | 9 31 | 42 31 | | | 22 50 | 15 | | 37 50 | 4 81 | Bal May |
| 1/7 | 31/7 | 31 | . | 31 | 31 | . | 3 10 | | 34 10 | | | 15 | 15 | 1 10 | 31 10 | 7 81 | 1 day pay 29/7/16 |
| | | | | | | | | 1 | 1 — | | | | | | | 8 81 | Exchange |
| 1/8 | 31/8 | 31 | . | 31 | 31 | . | 3 10 | | 34 10 | | | 9 74 | 15 | 42 | 25 16 | 17 75 | 2 days pay DO 203 |
| 1/9 | 30/9 | 30 | . | 30 | 30 | . | 3 | | 33 | | | 5 35 | 15 | 13 20 | 33 55 | 17 20 | 10 days DTY DO 224 |
| 1/10 | 31/0 | 31 | . | 31 | 31 | . | 3 10 | | 34 10 | | | 2 61 | 15 | | 17 61 | 33 69 | |
| 1/11 | 30/11 | 30 | . | 30 | 30 | . | 3 | | 33 | | | 2 68 | 15 | | 17 68 | 49 01 | |
| 1/12 | 31/12 | 31 | . | 31 | 31 | . | 3 10 | | 34 10 | | | 16 90 | 15 | | 31 90 | 51 21 | |
| Jany 1 1916. | Jany 31 | 31 | . | 31 | 31 | . | 3 10 | | 34 10 | | | 5 28 | 15 | | 20 23 | 65 08 | |
| 1/2/16 | 29/2/16 | 29 | . | 29 | 29 | . | 2 90 | | 31 90 | | | 7 84 | 15 | | 22 84 | 74 14 | |
| 1/3/16 | 31/3/16 | 31 | . | 31 | 31 | . | 3 10 | | 34 10 | | | 26 2 / 26 1 | 15 | | 20 23 | 88 01 | |
| | | 305 | | 305 | | | 30 50 | 10 31 | 345 81 | | | 93 08 | 150 | 14 72 | 257 80 | 88 01 | |

BALANCE TRANSFERRED TO NEW LEDGER

R. Jackson.

Carried forward to Large Ledger sheet

| 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 | | | | | | |

A 3 M Form 30-1-17.

Formerly 59267. Pte. 21st Bn.

Assignment as at
February 1st 1917.

Donaldson, A. Gordon Lieut. 39th Battalion. 15

Mrs. F. L. Donaldson, (Mother)
136, Pearle Street, West.,
Brockville,
Ontario.

RETURNED TO CANADA
P.O. TO 30 SEP 1919
TRANSFER TO N.E. LEDGER

| 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 | | | Nr | 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 | | | | | | |
| | | | | | | | | | | | | | | | | | |

L. L. Job 70481—Req. 5220.

M. F. W. 12.
10m. 11-14.
H. Q. 1772-39-819.

MILITIA AND DEFENCE

# ASSIGNED PAY

OVERSEAS CONTINGENTS

To Whom Mrs. F. L. Donaldson

Address 136 Pearl St. West.
Brockville. Ont.

Rate $15 00 MAY 1 1915

By Whom Assigned Donaldson, A.G.

Regtl. No. V 9267.

Rank Pte.

Corps Base Unit. 21st Batt'n.

## PAYMENTS

| Month | Year | Cheque No. | Amt. | REMARKS |
|---|---|---|---|---|
| Aug. | 1914 | | | |
| Sept. | | | | |
| Oct. | | | | |
| Nov. | | | | |
| Dec. | | | | |
| Jan. | 1915 | | | |
| Feb. | | | | |
| March | | | | |
| April | | | | |
| May | | M 11626 | 15— | |
| June | | K 2914 | 15— | |
| July | | R 4212 | 15— | |
| Aug. | | 05523 | 15— | |
| Sept. | | P 6801 | 15— | |
| Oct. | | Q 8765 | 15— | |
| Nov. | | T 7721 | 15— | |
| Dec. | | U 9316 | 15— | |
| Jan. | 1916 | W 9862 | 15— | |
| Feb. | | X 12552 | 15 | |
| March | | Z 15859 | 15— | |

CONSOLIDATED 5 ACCOUNT

MILITIA AND DEFENCE

# ASSIGNED PAY

OVERSEAS CONTINGENTS

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

Sheet No. 2.

L. L. Job 89002.—Req. 6213.

Mrs. F. L. Donaldson PAYMENTS.

Name of Soldier Donaldson, A. G.

Base Unit, 21st Battn.

$15.00

| Month. | Year. | Cheque No. | Amt. | Remarks. |
|---|---|---|---|---|
| April | 1916 | Q162 | 15 | |
| May | | R2937 | 15 | |
| June | | S64854 | 15 | |
| July | | T57142 | 15 | |
| Aug. | | Q12444 | 15 | |
| Sept. | | L160554 | 15 | |
| Oct. | | L20746 | 15 | |
| Nov. | | Y22980 | 15 | |
| Dec. | | Z33696 | 15 | |
| Jan. | 1917 | X36171 | 15 | |
| Feb. | | X42844 | 15 | 15 R Commission C.E.F. |
| March | | Y49703 | 15 | 15 C |
| April | | Z3299 | 15 | 15 Ch |
| May | | Z7476 | 15 | |
| June | | N144655 | 15 | 15 Ch |
| July | | X20716 | 15 | Bn |
| Aug. | | E28526 | 15 | 03 |
| Sept. | | E35295 | 15 | 03 |
| Oct. | | Q405769 | 15 | |
| Nov. | | T51081 | 15 | |
| Dec. | | L57429 | 15 | $480.00 |
| 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. | | | | |
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| Jan. | 1920 | | | |
| Feb. | | | | |
| March | | | | |
| April | | | | |
| May | | | | |
| June | | | | |
| July | | | | |
| Aug. | | | | |
| Sept. | | | | |
| Oct. | | | | |
| Nov. | | | | |

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. Lieut DATE AUTHORITY

NAME. Name Donaldson Initials A.G. Bank

Beneficiary

Address

Amount. $ 150.00 Can

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

Pay

F.A.

Messing

| 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 |
|---|---|---|---|---|---|---|---|---|
| | Balance Forward | | | | | Cr 291 69 | | |
| Oct. 18 | A.R. 80 - 7 3/19 £5. 4 Kes. L116 Mch Vo | 1392 | | 24 33 | | | | |
| 19 | Pay (R) March | | 124 - | | | Cr 191 36 | | |
| Apl. 8. | Adv. P. A. £10. A.S.R.B. Direct | 281. | | 48 67 | | | A.R. 6/17 £5 A.R. $209.25 6/13 £10 | |
| - 8. | A.R. 15. 28 3/19. W.O.R.D. £10. List 63 Apl. Vo 826 | | | 48 66 | | | | |
| - 9 | - 12. 14 3/19 - £5. " 33 " Vo 175 | | | 24 33 | | | | |
| - 9 | - 13. 18 3/19 - £10 " 37 " Vo 393 | | | 48 67 | | | | |
| - 9 | - 14 25 3/19 - £5 " 33 " Vo 580 | | | 24 33 | | | | |
| - 12 | - 3. 5 3/19 " £5 " 62 " Vo 1196 | | | 24 33 | | | | |
| - 17 | - 1. 2 5/19 - £6. " 79 " Vo 992 | | | 38 93 | | | | |
| - 19 | Advance R/A £5 Direct | 703. | | 24 33 | | | Hold £5-0-0 per month commencing April against dishonoured cheque. MacBeath Brothers £20-0-0 - 2nd 4/19 | |
| - 21. | Pay. R. | | 120. | | | | | |
| - 24. | | | | | 15. | Cr 14 11 | | |
| Apl 30 | Adv. P. A | Direct 1262. | ✓ | 24 33 ✓ | | Dr 10 22 | | |
| May 1. | Adv. P. A | Direct 1336 | ✓ | 24 33 ✓ | | | | |
| - 12. | Cheque 281 6 5/19 £10. Lost in mail. Payt stopped Vo | 230 | 48 67 ✓ | | | | | |
| | Pay. R. | | 124 | | | | | |
| | A. P. Can. | | | | 15. | | | |
| 28 | A.R. 1 C.G. Dep. £5. 5 5/19. List 97 May Vo | 1442 ✓ | | 24 33 ✓ | | | | |
| 28 | A. 2 Do £5. 10 5/19. " 183 " Vo | 1745 ✓ | | 24 33 ✓ | | for 74 46 | | |
| June. | Pay. (R) | | 120 | | | | | |
| | A. P. Can. | | | | 15 | | | |
| 25 | Adv. A.P.M. 19 5/19 £10 (C.G.D.) List 57 June Vo | 556 ✓ | | 48 67 ✓ | | | | |
| | Do. 22.5.19. £5 (J.B.B.) " 47 " Vo | 429 ✓ | | 24 33 ✓ | | Dr | | |
| | Do. 26.5.19. £5 (J. Way C.C.) " 63 " Vo | 690 ✓ | | 24 33 ✓ | | 82 13 | | |
| July 15 | a.R 20. 30 6/19. £5. List 70 July. List 70 July. V825 | ✓ | | 24 33 ✓ | | for | | |
| | a.R 3 3 7/19 £5 List 74 July List 74 July V943 | ✓ | | 24 33 ✓ | | 33 47 | | For 1 |

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. Lieut | DATE | AUTHORITY | NAME.

Beneficiary
Address
Amount. $ 15.00 clear
Separation Allowance issued. Yes or No.....

Pay
F.A.
Messing

Name Donaldson
Initials A.S.
Bank

| DATE | PARTICULARS | CK. NO. | CR. | DR. | ASSIGNED PAY PAID IN CANADA | BALANCE | SPECIAL AUTHORITIES To be initialed by P.M. in every case. | INITIALS |
|---|---|---|---|---|---|---|---|---|
| July | Bal. B/ for'd. | | | | | for 33.47 | | |
| 15 | a.R.2. £5 23/24 Last 5 July | V627 | | 24.33 ✓ | | | | |
| | a.R.1. 11 14/19 Last 2 July £4 | V112 | | 19.47 ✓ | | | Cr to be accumulated during service £20 Cash chq on file | |
| | a.R. Can | | | | 15 | | | |
| 24 | Pay R | | 124 | | | for ✓ 98.64 | by Agent Collect | |
| Aug 1 | a O a. 1 8/19 | V3 | ✓100 | | | | | |
| 1 | A. factor. MacBeth Bros. payment. A/D. Chq. d/25 10/12 £20 | | | 97.33 ✓ | | | AR ✓ | |
| 6 | Adv. £10. Direct | | | 48.64 ✓ | | | ✓ | |
| 15 | Advance on a/c Aug P&A £10 Direct | | | 48.67 ✓ | | for 4.00 | adv £10 19/19 CCC £2 | |
| 18 | a.P. Can. | | | | 15 | | | |
| 20 | Adv Bal. 9/19 to Sept 30. Direct | | | ✓ 159.61 | | | Wills. | |
| 22 | Aug & Sept Pay (R) | | ✓ 2444 | | | for 64 8/9 | RETURNED TO CANADA L.P.C. TO 30.9.19 TRANSFER TO N.E. LEDGER | |
| 25 | Adv per aR 2 Ls. on 11 7/19 Liang. | Vo 119. | | ✓ 24.33 | | | | |
| " | " " " £3. £5. on 30 7/19 L25 aug | Vo 465 | | ✓ 24.33 | | for 24.73 | admitted 166 G Hosp. "30" 10 7/19 Discharged 16 8/9. 6 L.(1) B 34 X 1388. Vo 12192. Dr 76 | |
| Sept 22 | Adv per aR 10 L2 on 19 8/19 L10 Sept | Vo 223 | | ✓ 9.73 | | | | |
| " | " " " 753 £10 on 1 9/19 L46 Sept (Endorsed on LP 6) | Vo 500 | | 48.64 | | | | |
| " | " " " 790 £10 on 3 9/19 L46 Sept. ( " " " ) | 498 | | 48.64 | | | | |
| 22 | a.P. Can | | | | ✓ 15 | | | |
| 26 | Hosp. Stpage f 10 7/19 - 16 8/19 6 L 1358 | Vo 789 | | 76.. | | | Dr 173 314 5 11/19 Adv. note Dr 76.00 | |
| Dec 31. | Clgd Vo C.E.F | Vo 48 | 76.00 | | | | | |
| 31 | " | Vo 99 | 97.34 | | | | | |

MARRIED OR SINGLE: S.

PLACE OF BIRTH: Brockville. Ont.

NAME AND ADDRESS OF NEXT OF KIN: Allan S. Donaldson Brockville Ont.

RELATIONSHIP OF NEXT OF KIN

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. 59261 RANK Pte. NAME Donaldson Alyn Goldwin

IF IN PERMT. CORPS WHAT UNIT — UNIT 21st Bn. TRANSFERRED TO ~~Can. Fy. Divn.~~ 39th Res. Bn. DATE E.1/9/16 AUTHORITY B034 31/8/16

PERMANENT FORCE ALLOWANCES — TRANSFERRED TO L.R.C. Brok. DATE Eff 21/11/16 AUTHORITY Lond. Gaz. 2-33-4 23/11/16 London Gazette 9/12/16

PLACE OF ATTESTATION Kingston Ont. — TRANSFERRED TO K DATE 21/3/14. AUTHORITY

DATE OF ATTESTATION 27th Feb. 1915 — TRANSFERRED TO ~~Can. Fy. Div.~~ M.B.B. DATE " AUTHORITY "

ASSIGNED PAY MONTHLY $ ~~15~~ DATE EFFECTIVE

PAYABLE TO ~~Mrs. F. L. Donaldson, 136 Pearle St. W. Brockville Ont.~~ RELATIONSHIP Mother

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP London Gazette - 9/12/16. Commissioned in C.E.F. C.M.S.

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) P.S.W. 2.1.17 ~~1-12-16~~ EFFECTIVE 1-2-17 Mar REASON S.O. 107 29-11-16 Eff. 21-11-16 M/M & D Ag/Ag 2-32-1-4-23/11/16

DISCHARGE DATE AND PLACE England 20/11/16 REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE) Entered on N.E. Card Index SM

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE) Checked by T. Williams 62 wb

| DATE 1916 | PAY No. OF DAYS | PAY RATE | PAY AMOUNT $ | PAY AMOUNT C. | FIELD ALLOWANCE No. OF DAYS | FIELD ALLOWANCE RATE | FIELD ALLOWANCE AMOUNT $ | FIELD ALLOWANCE AMOUNT C. | WORKING OR SPECIAL PAY No. OF DAYS | WORKING OR SPECIAL PAY RATE | WORKING OR SPECIAL PAY AMOUNT $ | WORKING OR SPECIAL PAY AMOUNT C. | ASSIGNED PAY CREDITS | OTHER CREDITS | TOTAL CREDITS | ACQUITTANCE ROLLS 1 No. | 1 Date | 2 No. | 2 Date | 3 No. | 3 Date | 4 No. | 4 Date | CASH PAYMENTS 1 | 2 | 3 | 4 | ASSIGNED PAY | OTHER CHARGES | TOTAL DEBITS | BALANCE CREDIT | BALANCE DEBIT | PAY WITHHELD OR DEFERRED | PAY AVAILABLE FOR ISSUE | REMARKS |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1/30 | 30 | | 30 | 5 | | | 30 | 50 | | | | | | 10 31 | 345 81 | | | | | | | | | 93 08 | | | | 150 00 | 14 72 | 257 80 | 88 01 | | | | |
| Feb 5 | 31 | | 31 | | 31 | | 31 | 0 | | | | | | | 33 | 1027 | 1/4 | 1090 | 30/4 | | | | | 262 | 262 | | | 15 | 19 | 20 43 | 100 58 | | | | Q.M.S. Chgs Brock. |
| 1/5 | 31 | | 31 | | 31 | | 31 | 0 | | | | | | | 34 10 | | | 1169 | 1/5 | | | | | | 256 | 255 | | 15 | | 20 11 | 114 57 | | | | |
| 1/6 | 30 | | 30 | | 30 | | 30 | | | | | | | | 33 | | | 1222 | 28/5 | | | | | | | | | 15 | | 15 | 132 57 | | | | |
| 1/7 | 31 | | 31 | | 31 | | 31 | 0 | | | | | | | 34 10 | 1307 | 30/6 | 1346 | 11/7 | | | | | | 261 | | | 15 | | 25 34 | 141 33 | | | | |
| 8 | 31 | | 31 | | 31 | | 31 | 0 | | | | | | | 34 10 | 1419 | 26/7 | 1530 | 16/7 | | | | | 262 | 262 | | | 15 | | 24 60 | 150 82 | | | | |
| 1/9 | 15 | | 15 | | 15 | | 15 | 0 | | | | | | | 16 50 | | | | | | | | | | | | | 15 | | 15 | 152 33 | | | | Transferred to 39th Bn. 16-9-16 B034 31/8/16 |
| Sept 16 | 30 | | 15 | | 15 | | 15 | 0 | | | | | | | 16 50 | | | | | | | | | | | 121 67 | | | | 121 67 | 47 16 | | | | |
| Oct 1/31 | 31 | | 31 | | 31 | | 31 | 0 | | | | | | | 34 10 | 1691 | 30/9 | 1744 | 15/10 | | | | | 1703 | 2190 | | | 15 | | 53 93 | 27 33 | | | | |
| Nov | 20 | 5 59 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1-30 | 30 | | 30 | | 30 | | 30 | 0 | | | | | | | 33 | | 31. | | | | | | | | | | | 15 | | 15 | 45 33 | | | | |
| Dec 31 | ✱ | | ✱ | | ✱ | | ✱ | ✱ | | | | | | | ✱✱ | | | | | | | | | | | 4 87 | | 15 | 11 00 | 30 87 | 14 46 | | | | |
| 1916 Jan 1- | 403 | 90 | 54 | 90 | | | | | | | | | | 10 31 | 614 21 | | | | | | | | | | | | | 15 | | 15 00 | | 54 | | | |
| Febry | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 54 | | | |
| | | | 603 | 90 | | | | | | | | | | 10 31 | 614 21 | | | | | | | | | 120 46 | 41 84 | 126 54 | | 300 00 | 25 91 | 614 75 | | 54 | | | Carried forward |
| | | | 603 | 90 | | | | | | | | | | 10 31 | 614 21 | | | | | | | | | 120 46 | 41 84 | 126 54 | | 300 | 25 91 | | | | | | |

Checked R Jackson

Audited Lond. Gaz. Ag/Ag 2-32-1-4-23/11/16

To be Temp. Lieut. C.E.F. eff. 21-11-16 Auth. C.M.S. 107 29-11-16

Acc. Pay charged for Dec. H.J.M. 3/1/17

Adj. of Pay 21-11-16 to 30-11-16 10 3/30 @ 1/- Lond. Gaz. 9/12/16 & 11.00

London Gazette - 9/12/16. Tfd. to L.R.C. Brok. Eff. 21/11/16 M/M & D Ag/Ag 2-32-1-4 23/11/16

Small Ledger Sheet.

59267 - Pte. Donaldson Ag.

| DATE | PAY No. of Days | PAY Rate | PAY Amount $ | PAY Amount c. | FIELD ALLOWANCE No. of Days | FIELD ALLOWANCE Rate | FIELD ALLOWANCE Amount $ | FIELD ALLOWANCE Amount c. | WORKING OR SPECIAL PAY No. of Days | WORKING OR SPECIAL PAY Rate | WORKING OR SPECIAL PAY Amount $ | WORKING OR SPECIAL PAY Amount c. | ASSIGNED PAY CREDITS | OTHER CREDITS | TOTAL CREDITS | ACQUITTANCE ROLLS 1 No. | 1 Date | 2 No. | 2 Date | 3 No. | 3 Date | 4 No. | 4 Date | CASH PAYMENTS 1 | 2 | 3 | 4 | ASSIGNED PAY | OTHER CHARGES | TOTAL DEBITS | BALANCE Credit | BALANCE Debit | PAY WITHHELD OR DEFERRED | PAY AVAILABLE FOR ISSUE | REMARKS |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | 60 | 90 | | | | | | | | | | 10 31 | 614 21 | | | | | | | | | 120 46 | 111 84 | 126 54 | | 300 00 | 25 91 | 614 75 | | - 54 | | | |

A3M. FORM REN'D 24/1/17 EFFEC. 1/4/17.
DISCHARGED TO England DATE 29/1/19.
PAYBOOK VERIFIED B. Burley 29/1/19
~~Dr.~~ BAL. ~~54~~ L.P.C. REN'D 29/1/19
AUTHY. Comm. Gaz. London Gazette 9/12/18

Checked Ried LPC

| MONTH | PARTICULARS | CR. 1 | CR. 2 | PARTICULARS | DR. 1 | DR. 2 | DR. 3 | DR. 4 | BALANCE | DEFERRED PAY | SEPARATION ALLOWANCE | ENGAGEMENT |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| OCT 1917 | | | | Balce FORWARD | | ~~54~~ | | | ~~54~~ 54 | | | |
| | New England Ac ~~54~~ | | | | | | | | ~~nil~~ | | | |
| | | | | Bal. trans to P.M. Liability A/c. | | | | | | | | |

Balance transferred to N. E. Branch. NIL

P.M. Liable for .54

FORM P. 15.
5986—25M—19/1/17

**ASSIGNED PAY.** | **UNIT.** NAME OF: 18. Bn. RATE: Pay 2.00, F.A. 60, Mess. 1.00 = 3.60 | **RANK.** Lieut. DATE: Mess 21/11/16 | AUTHORITY: Apps. to R.O. (Brig) d/24/11/16 | **NAME.** Name Donaldson. Initials A. G. Bank

Beneficiary

Address

Amount. $15.00 Canada 1/3/17

Separation Allowance issued. Yes or No..... To be tried by G.C.M 25/3/18 2nd D.R.O. 4107 d/22/3/18 Bank a/c Closed. 9-2.692 ✓

a/o/allce 1/1/18 $100.00 12/3/18.

| 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 | | | | | | | | |
| April. | Balance Forward | | | | | Cr. 96 60 | No. More Deposits - | |
| 12 | A.P. Can. | | | | 15 | 81 60 | Under Arrest: File G.D. 692 30/3/18 | |
| 17 | Apr Pay R. | | 108 | | | 189 60 | Trans per from Ledger 16 to Ledger 25 5/4/18. | |
| 20 | A.R.* 1218 - 18 Bn d/9/3/18 A/Cpl A/c a/c - 750 fcs 125 fcs L 47 Apr V 350 | | " | 22 31 | | | | |
| 22 | " " * 1 d/ 10/3/18 - 18 Bn. 125 fcs List 119 Apr G a/c V 1062 | | " | 22 31 | | Cr. 144 98 | | |
| May 10 | To Cover O/Dft at Bof m. L4-8-1 | Bank 1827 | " | 21 44 | | Cr. 123 54 | | |
| 13 | May Pay R. | | 111 60 | | | 235 14 | | |
| 13 | A.P. Can | | | | 15 | Cr. 220 14 | | |
| June 10 | June Pay R | | 108 | | | | | |
| | A.P. Can | | | | 15 | Cr. 313 14 | | |
| July 17 | A.P. Can | | | | 15 | | | |
| 18 | Pay R. | | 111 60 | | | Cr. 409 74 | | |
| Aug 10 | A.P. Can | | | | 15 | | | |
| 10 | Pay R | | 111 60 | | | | | |
| 19 | A.R. # 5 d/29/7/18 18 Bn fcs 125 List 147 Aug G a/c | V° 2053 | | 22 31 | | Cr. 484 03 | | |
| Sept 10 | A.P. Can | | | | 15 | | | |
| 10 | Pay R | | 108 | | | | | |
| 18 | Adv PoA £20 (Note ~~as laid out~~ as P.B. Paid) Direct | 8550 | | 97 33 | | | | |
| 19 | A.R. # 40 d/4/9/18 18 Bn fcs 125 List 198 Sept G a/c | V° 2936 | | 22 31 | | | | |
| 20 | A.R. # 336 d/5/8/18 18 Bn ~~fcs~~ L-8 fcs 200 List 205 Sept G a/c | V° 3088 | | 35 69 | | Cr. 421 70 | Hold. | |
| Oct 16 | A.P. Can. | | | | 15 | | | |
| 18 | Pay R | | 111 60 | | | | | |
| 30 | a/o/allce 1/8/18 | | 100 | | | Cr. 618 30 | | |
| Nov 16 | A.P. Can. | | | | 15 | | | |
| 19 | CK to M. Ferré £37-8-4, Cmfd Cks d/21/10/17 fcs 150, Nov 17 " 200, d/12/11/17 £8, d/16/11/17 £8, d/18/11/17 £8 | 11844 | | 182 10 | | | | |
| 19 | CK to Hon. Philippe Roy £35 Covering Cmfd Cks | 11845 | | 170 33 | | Cr. 75 87 | | |

FORM P. 15.
5986—25M—19/1/17

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

Beneficiary
Address

Amount. $ 15.00 Can
Separation Allowance issued. Yes or No.....

UNIT. Pay 2.00 / Fa 1.00 / Trans 1.00

RANK. Lieut

Name Donaldson
Initials AG
Bank

| DATE | PARTICULARS | CK. NO. | CR. | DR. | ASSIGNED PAY PAID IN CANADA | BALANCE | SPECIAL AUTHORITIES To be initialled by P.M. in every case. | INITIALS |
|---|---|---|---|---|---|---|---|---|
| | | | 250 87 | | | 6/ 258 87 | | |
| 19 | Add Fa @ 40c/d 12-9-18 · 31-10-18 | | 20 | | | | | |
| 19 | Pay R | | 120 | | | 6/ 390 87 | | |
| 25 | CR to O/C Training Offrs Camp: 6 days 6 J S £2-15-0 To Comm mtg A/C #2/24/156 4/12/18 | 12249 | | 13 38 | | | | |
| 27 | AR #27 d/ 17/10/18 18 Rn £10 List 59 Hon Gen A/c | V: 2469 | | 48 67 | | | | |
| 27 | AR #29 d/ 24/10/18 " £10 " 57 " Gen A/c | V: 2449 | | 48 67 | | 6/ 280 15 | Hold P.A. & Under Arrest Cancel Arrest ELB 9/12/18 | |
| Dec 5 | Cheque favour Capt. J Cook, In payment of R/D ch. d/ 6/12/18, 350 Hrs £12.17.10 Cash | 13031 | | 62 74 | | 217 41 | | |
| 10 | a/P Can. | | | | 15. | | | |
| 12 | Pay R | | 124. | | | | | |
| 19 | a/R #47 d/ 12/12/18, £6, 4th Res. List 140 Dec. V: 2487 Gen A/c | | | 29 20 | | 297 21 | | |
| Jan 17. | A.P. Canada | | | | 15. | | | |
| - 18 | A.P. 53. 21/12/18. 4 Pte. £5. List 29 Jany. V: 422. | Gen. A/c | | 24 33 | | | | |
| - 18 | - 59. 2/1/19 4 - £2 - 77 - V: 868 | - | | 9. 73 | | | | |
| - 20 | Chq. for Sec. Officers Mess 4th Res. £3.2/. Dec. Acct. Direct: | 15080. | | 15. 09 | | | | |
| - 21. | Pay. R. | | 124. | | | 6/ 357 06 | | |
| Feb. 5. | Adv. to Sec. Officers Mess 4 Pte. £3.2/. Jan. Acct: | 15955 | | 15. 08 | | | Hold A/C #2449 for forfeiture ELB 10/2/19 | |
| - 12. | Pay. R. | | 112. | | | | | |
| - 13. | A.P. Canada | | | | 15. | | | |
| - 22 | Suspended from duty 6/12/18 - 6/2/19. 61 days @ 4/- V: 1855 | | | 244. | | 6/ 194 98 | | |
| Mch 4 | Advanced to Mrs Robertson Collet Direct | 22-10 17836 | | 44 49 | | | | |
| 15 | Can. Pay. Ch. 6/7. 3/12/18 - £2.0.0 4th Res. | L 594 Och V: 698 | | 9.73 | | | | |
| 15 | QR. Ont. 18/1/19 £4.0.0 18 Rn. | L 26 Och V: 221 | | 19 47 | | | | |
| 15 | " 74. 29/1/19 £3.0.0 4 Res. | L 59 Och V: 699 | | 14 60 | | | | |
| 18 | a/P Can | | | | 15 - | 6/ 91 69 | | |

FORM P. 15
5986–25M–19/1/17

ASSIGNED PAY.

1917-18

UNIT.

| NAME OF | DATE | AUTHORITY |
|---|---|---|
| C.M.S. 18. Bn. | | Pay $2.- 9A. .60 Mess 1.- $3.60 |

RANK.

| Mess DATE | AUTHORITY |
|---|---|
| 21/11/16. | App to R.O. (Brig) d/ 27/11/16 |

NAME.

Name Donaldson
Initials A. G.
Bank of Montreal.

Beneficiary
Address
Canada.

Amount. $ 15.00 per mo. 1/2/17.

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

Bank a/c closes 9-B-692 17.3.19

| DATE | PARTICULARS | CK. NO. | CR. | DR. | ASSIGNED PAY PAID IN CANADA | BALANCE | SPECIAL AUTHORITIES To be initialled by P.M. in every case. | INITIALS |
|---|---|---|---|---|---|---|---|---|
| 1917. | | | | | | | | |
| April 20 | A.P. loan | | | | 15. | | | |
| 25 | Pay (April) | | 108. | | | | | |
| 27 | Bank. | | | 93- | | 0 | | |
| May 16 | A.P. loan | | | | 15. | | | |
| 21 | Pay May (R) | | 111 60 | | | | | |
| 24 | Bank | 6049 | | 96 60 | | 0 | | |
| June 18 | A.P. loan | | | | 15. | | | |
| 19 | June Pay (R) | | 108 | | | | | |
| 22 | Bank | | | 93- | | 0 | | |
| July 21 | A.P. loan | | | | 15. | | | |
| 23 | July Pay (R) | | 111 60 | | | | | |
| 26 | Bank | 13082 | | 96 60 | | 0 | | |
| Aug 15 | A.P. loan | | | | 15 | | | |
| 18 | Aug Pay (R) | | 111 60 | | | | | |
| 21 | Bank | 17361 | | 96 60 | | 0 | | |
| Sept 18 | A.P. loan | | | | 15 | 1 | | |
| 19 | Adv. P+A. to 10. | Cash 21375 | | 48 67 | | | | |
| | Sept Pay (R) | | 108 | | | | | |
| 21 | Bank | 21921 | | 44 33 | | 0 | | |
| Oct 9 | Lwpd chq A.P.S. 1608 Fcs 125. Fld Cashier 9/10/17 £4.11.1 | | | 22 16. | | | | |
| | ——— do ——— do ——— 10/10/17 £4.11.1 ½ | 25570 | | 22 16. | | | | |
| 12 | A.P. loan | | | | 15- | | | |
| 13 | Oct Pay (R) | | 111 60 | | | | | |
| 20 | Bank | 26282 | | 52 28 | | 0 | | |
| Nov 10 | A.P. loan | | | | 15- | | | |
| 17 | Nov Pay (R) | | 108 | | | Cr 93. | | |

FORM P.15
5986–25M–19/1/17

**ASSIGNED PAY.** **UNIT.** NAME OF: 18 Bn. DATE: — AUTHORITY: Pay $2.— 7 A. '60 Mess $1.— $3.60

**RANK.** Lieut. DATE: 31/11/16 AUTHORITY: Appt. to R.O. Brighton

**NAME.** Name Donaldson Initials A G Bank [redacted]

Beneficiary

Address

Can

Amount. $ 15.00 1/2/17

Separation Allowance issued. Yes or No..... To be tried by G.C.M. 25/3/18 2nd Div R.O. 4101 d/22/3/18 Bank a/c closed 9-D-692

| DATE 1917 | PARTICULARS | | CK. NO. | CR. | DR. | ASSIGNED PAY PAID IN CANADA | BALANCE | SPECIAL AUTHORITIES To be initialled by P.M. in every case. (12.3.18) | INITIALS |
|---|---|---|---|---|---|---|---|---|---|
| Nov 20 | Brought fwd | | | | | | Cr 93 | | |
| 21 | | Bank | 30681 | | 93 | | | | |
| Dec 11 | A.P. Can | | | | | 15 | | | |
| 13 | Dec Pay (R) | | | 111 60 | | | | | |
| 14 | | Bank | 35096 | | 96 60 | | | | |
| Jan 7 | A.P. Can. | | | | | 15 | | | |
| | Pay R | | | 111 60 | | | | | |
| 22 | Unpaid Chits #160 & Jan 17 (125 frcs) £4.12.5 | Bank | 39425 | | 96 60 | | | | |
| Feb 5 | B/F M & Rec 24 (125 frcs) £4.12.3. | Cash | 40094 | | 44 93 | | | | |
| 8 | A.P. Can | | | | | 15 | | | |
| | Pay R. | | | 100 80 | | | | | |
| 21 | | Bank | | | 40 87 | | | Bank a/c closed No more deposits A 12 3/18 | |
| March | A.P. Canada | | | | | 15 | | | |
| | Pay R. | | | 111 60 | | | Cr 96 60 | Under arrest. Fcls 9-D-692 5/30 3/18 | |

FORM P. 15
2227—10M—1/1/17

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

Beneficiary
Address
Canada
Amount. $ 15.00 - 1 2/17
Separation Allowance issued. Yes or No.....

C.M.C. | Lt. | 2-11-16 App. to P.S. (Brig) dup. | Name Donaldson, Initials A.G., Bank of Montreal

1916-17

| 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 |
|---|---|---|---|---|---|---|---|---|
| Jan 9. | Bank. Pay-mess 21/11/16 - 31/12/16. | 16776 | | 147.60 | | 147.60 | | |
| 10 | Bank. Unpaid Cks. Dec'r £14.10.6 £14.10.8 £3.2.8 | 18009. | | 59.33 | | Dr. 206.93 | | |
| 20. | Rents Rates Pay-mess. (21/11/16 - 31/12/16) | No 17271 | 147.60 | | | | | |
| 20 | Pay Jan (R.) | | 111.60 | | | | | |
| 23. | Bank. | 19286. | | 52.27 | | | | |
| Feb. 17. | Pay Feb. (R) | | 100.80 | | | | | |
| 19. | a. P. Can. | | | | 15. | | | |
| 21. | Bank. | 21931 | | 85.80 | | | | |
| Mar 14. | a. P. Can. | | | | 15 | | | |
| 14. | Dr. Bal Pay 11 20/11/16. h.P.C. | No 235. | | .514 | | | | |
| 22. | Pay. Mar. (R) | | 111.60 | | | | | |
| 23. | Bank. | | | 96.06 | | | | |

FORM P.15
2227—10M—1/1/17

| ASSIGNED PAY. | UNIT. NAME OF | DATE | AUTHORITY | RANK. | DATE | AUTHORITY | NAME. |
|---|---|---|---|---|---|---|---|
| Beneficiary | | | | | | | Name |
| Address | | | | | | | Initials |
| | | | | | | | Bank |
| Amount. $ | | | | | | | |
| Separation Allowance issued. Yes or No..... | | | | | | | |

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

Report No._____ Army Form W. 3212.
(In books of 100)

Regtl. No., Rank and Name Lieut Donaldson Age_____ Corps_____

Disease V.D.S Hospital 16 C-G H

To Officer i/c Laboratory. Ward V D

Please carry out an examination of the accompanying specimen of Blood

with special regard to Wassermann

Nos. of previous Reports (if any)_____

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

Date 13-8-19 W.S. Turner Capt
O. i/c Ward.

# LABORATORY REPORT.

Reaction negative

Date of Examination 14.8.19 H R Nicholson
O. i/c Laboratory.

W6591—P1803 300,000 10/18 HWV(iM374)

# LABORATORY REPORT

Date of Examination

O. C. Laboratory.

Report No._____ Army Form W. 3212.
(In books of 100)

Regtl. No., Rank and Name } L/- Donaldson Age ____ Corps ____

Disease V.D.S. Hospital 16 Canal Glen

To Officer i/c Laboratory. Ward Isolation

Please carry out an examination of the accompanying specimen of Blood

with special regard to Wassermann

Nos. of previous Reports (if any) _____

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

Date 6-F-19 H.H. Clarke Capt. & A.P.M.
O. i/c Ward.

# LABORATORY REPORT.

Reaction negative

Date of Examination 7.8.19 H.R. Nicholson
O. i/c Laboratory.

W6591—P1803 300,000 10/18 HWV(iM374)

Report No. _____ Army Form W. 3212.
(In books of 100.)

Regtl. No.,
Rank and Name Lt Donaldson Age _____ Corps _____

Disease Piles _____ Hospital 12 Can Gen Hosp.

To Officer i/c Laboratory. Ward 20

Please carry out an examination of the accompanying specimen of Urine

with special regard to _____

Nos. of previous Reports (if any) _____

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

Date May 9/19 Capt Sutherland
O. i/c Ward.

## LABORATORY REPORT.

Shorncliffe N/S.

Sp gr 1025
React. Acid
Alb. Neg
Sugar Neg

Date of Examination 27/5/19 A Montgomery Capt
O. i/c Laboratory.

(8690) W. 1369/P1107. 6,000 Bks. 8/5/18.—R. & J., Gy. (E 3123.)

# LABORATORY REPORT

No.12 Canadian General Hospital.

To:- M.O. Ward 20.

Pl.No. 5875 29.5.19.

No. Lieut. A G. Donaldson,
18th. Bn.

Injury - R. pelvis.

An area of rarefaction in central area of ilium. No other lesion noted.

P B Eaton Capt. CAMC.

Regtl. No. Rank and Name Lieut Donaldson Corps

Disease V D I Hospital K-C-G-H

To Officer i/c Laboratory. Ward V D

Please carry out an examination of the accompanying specimen of Urine

with special regard to Albumin + Bile

Date 25-7-19 E Clark Capt

O. i/c Ward.

## LABORATORY REPORT.

amber

Acid.

S.G. 1016

Alb. 0

Bile Negative

Date of Examination 25/7/19

O. i/c Laboratory.

W.3212. 50M-4-4-18.

C.A.D.C. 5009A

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

# DENTAL CERTIFICATE FOR DEMOBILIZATION

Ca[illegible] Printing and Stationery Services, London

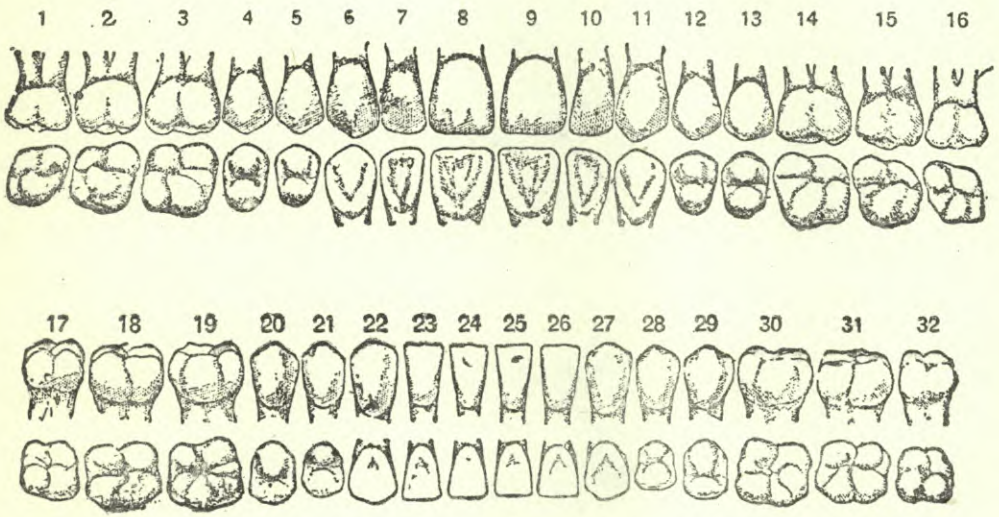
**DIRECTIONS TO DENTAL OFFICERS**

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

NAME OF SOLDIER (Block Letters) Alyn Godwin Donaldson

REGIMENT 18th Can. Bn. RANK Lieut No.

Date of Examination in England 26/8/19 | Date of Examination in France




## PRESENT DENTAL REQUIREMENTS

1. FILLINGS 2 – 7 – 21 – 31 –
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 –
- (c) In France Yes

*Signature of Dental Officer* H Crawford

3)

# CLINICAL CHART.

(To be attached to Case Sheet.)

Army Form B. 181.

Corps 18/ Cana. Military Hosp[illegible]

No. _____ Rank and Name Lt A.J Donaldson Age _____ Service _____

Disease _____ September Date of admission _____ Date of discharge _____ Result _____

| Dates of Observation | 30 | 31 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Days of Disease | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Temperature, Fahrenheit (Time A.M. P.M.) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Pulse per Minute | 99 | 100 | 90 | 104 | 96 | 92 | 90 | 92 | 96 | 88 | 90 | 88 | 88 | 96 | 88 | 106 | 92 | 96 | 90 | 88 | 92 | | | | | | | | | | |
| Respirations per Minute | 32 | 28 | 26 | 26 | 26 | | 24 | 22 | 22 | 22 | 22 | | 22 | 22 | | 22 | | | | | | | | | | | | | | | |
| Motions per 24 Hours | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Wt. W3728/M2313—2,000,000—6/17—H. & Sp. (10693)—A.F.B. 181/5 (E. 735)

Signature _____ In charge of case.

# CLINICAL CHART.

*(To be attached to Case Sheet.)*

Army Form B. 181.

Corps_____ Military Hospital_____

No._____ Rank and Name_____ Age_____ Service_____

Disease_____ Date of admission_____ Date of discharge_____ Result_____

Dates of Observation

Days of Disease

Temperature, Fahrenheit

Time A.M.P.M.

°8 °6 °4 °2

107° 106° 105° 104° 103° 102° 101° 100° 99° 98° 97°

°8 °6

Pulse per Minute

Respirations per Minute

Motions per 24 Hours

Wt. W3728/M2313—2,000,000—6/17—H. & Sp. (10693)—A.F.B. 181/5 (E. 735)

Signature_____ In charge of case.

# CLINICAL CHART.

(To be attached to Case Sheet.)

Army Form B. 181.

Corps 18/Can  Military Hospital

No.  Rank and Name H A J Donaldson  Age  Service

Disease Enteric August September  Date of admission  Date of discharge  Result

Dates of Observation

Days of Disease 31 1 2 3 4 5 6 7 8 9

Temperature, Fahrenheit

107° 106° 105° 104° 103° 102° 101° 100° 99° 98° 97°

Pulse per Minute

Respirations per Minute

Motions per 24 Hours

Shifting

Operation

Signature  In charge of case

# CLINICAL CHART.

*(To be attached to Case Sheet.)*

Army Form B. 181.

Corps_____ Military Hospital_____

No._____ Rank and Name_____ Age_____ Service_____

Disease_____ Date of admission_____ Date of discharge_____ Result_____

| | | |

Army Form B. 181.

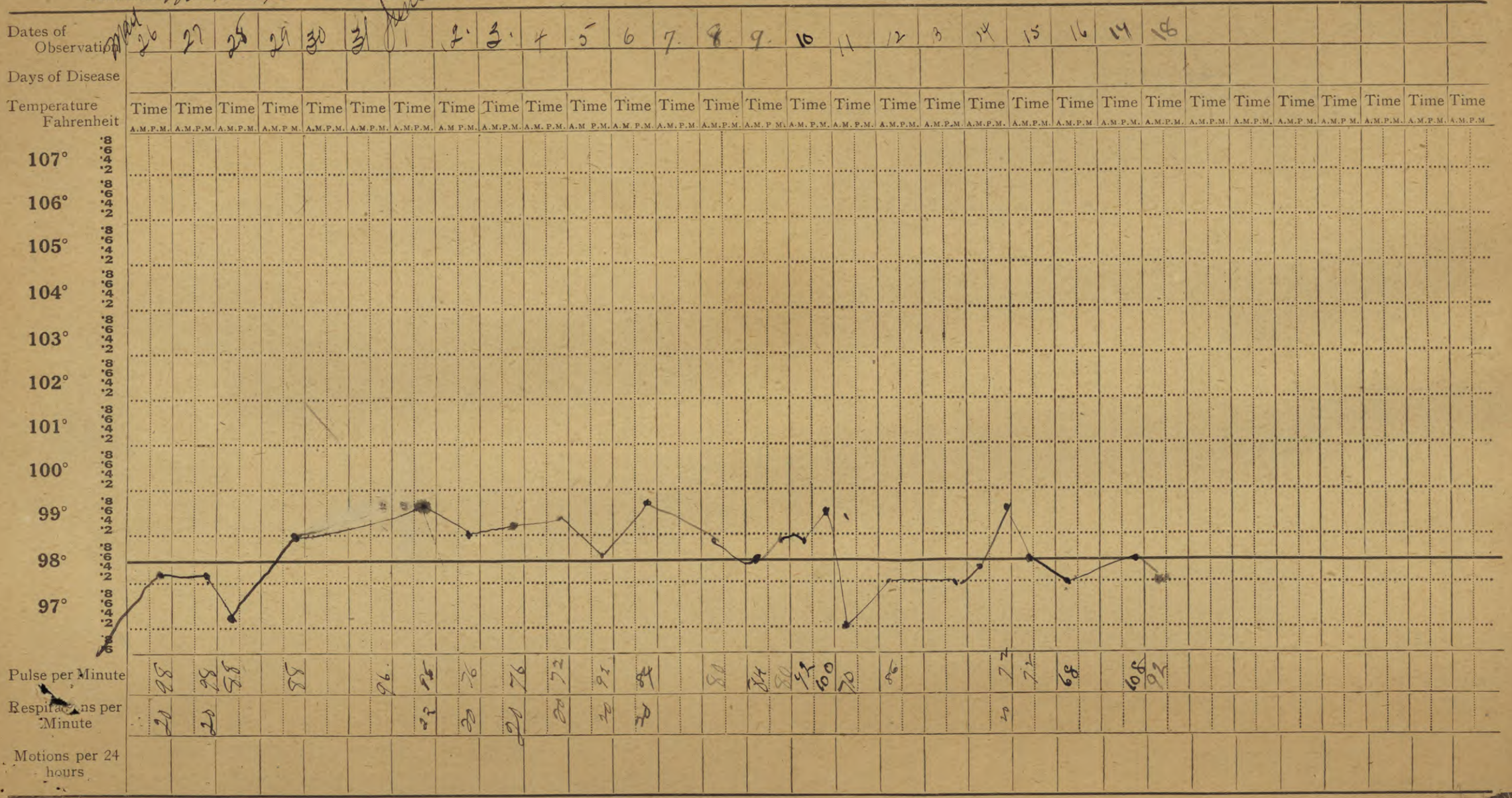
# CLINICAL CHART.

(To be attached to Case Sheet.)

Corps _____ Military Hospital 12th Can Gen Hosp.

No. _____ Rank and Name Lt. Donaldson A.S. Age 24. Service 5 6/12.

Disease Haemorrhoids Date of admission 26-5-19. Date of discharge _____ Result _____




(6378) Wt. W4612/P566 2,000,000 2/18 McA & W Ltd A.F.B. 181/5 (E. 2565)

Signature _____ In charge of case.

# CLINICAL CHART.

*(To be attached to Case Sheet.)*

Army Form B. 181.

Corps_____ Military Hospital_____

No._____ Rank and Name_____ Age_____ Service_____

Disease_____ Date of admission_____ Date of discharge_____ Result_____

Dates of Observation

Days of Disease

Temperature Fahrenheit

Time A.M. P.M.

107° 106° 105° 104° 103° 102° 101° 100° 99° 98° 97°

8 6 4 2

Pulse per Minute

Respirations per Minute

Motions per 24 hours

(6378) Wt. W4612/P566 2,000,000 2/18 McA & W Ltd A.F.B. 181/5 (E. 2565)

Signature_____ In charge of case.

Forms
I. 1237
12

Army Form I. 1237.

## MEDICAL CASE SHEET.*

| No. in Admission and Discharge Book. | Regimental No. | Rank. | Surname. | Christian Name. |
|---|---|---|---|---|
| 229 | | Pt. | Donaldson. | A. G. |
| Year 1919 | Unit. 18 Batt. | | Age. 24 | Service. 5/6/12. |
| Station and Date. 12 C. Gds. 26.8.19 | Disease Haemorrhoids. | | | |

Complains - taking anus 6 tablets / week.

S.H. - neg
P.H. -

G.S.W. lt. forehead but quite pamphlet after wounding

Present -

For past week taking 1 anus with Ceilon tablets - no Blood seen in for Haemorrhoids - never knew he had them before - some Cholepalen

Phy Exam -

Lg 70 clock position - Slight engorgement lt. ant. Anus not visible Sphincter moving - moderate varicose veins 5 o'clock position - prosum - anus at 12 o'clock -

Ht 5ft 8½ins Wt 9st 12lbs

Rep.

Ring gauze & Opn. for rectal washing.

[signature]

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

Wt. W 6604/M 2870—1,500,000—8/17—H & Sp. (10933). Forms/I. 1237/12. (E239)

[P.T.O.

| Station and Date. | |
|---|---|
| | |
| | |
| | |

Date of Enlistment

MILITIA AND DEFENCE

# Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

D 5402

Date of Assignment May 1/15

RATE OF SEPARATION ALLOWANCE

| | | | |
|---|---|---|---|
| | | | |

RATE OF ASSIGNMENT

| | | | |
|---|---|---|---|
| 15 | | | |

## PARTICULARS OF SEPARATION ALLOWANCE

No. 3-92167

Rank ~~Pte~~ Promoted Lieut 21/11/16 Reverted Discharge

Soldier's Name A. G. Donaldson

Battalion Base Unit. 21 Battn

Beneficiary

Relationship

Address

## PARTICULARS OF ASSIGNMENT

Name Mrs. F. L. Donaldson,

Address 136 Pearl St. W.

Change of Address Brockville, Ont.

1

2

3

4

| Date 1917 | Cheque No. | Amount S/A | Amount A/P | Total | | REMARKS 4811-a-11 |
|---|---|---|---|---|---|---|
| Dec. 31 | | | 480 | 480 | | Promoted Lieut 21/11/16 see file |
| Jan. | M 67451 | | 15 | 15 | m | |
| Feb | E 96794 | | 15 | 15 | | |
| March | A 12584 | | 15 | 15 | | |
| April | B 8135 | | 15 | 15 | m | |
| May | O 17114 | | 15 | 15 | m | |
| June | K 20350 | | 15 | 15 | m | |
| July | Q 32793 | | 15 | 15 | m | |
| Aug | K 34813 | | 15 | 15 | m | |
| Sept | M 45294 | | 15 | 15 | m | |
| Oct | O 54332 | | 15 | 15 | | |
| Nov | K 56885 | | 15 | 15 | | |
| Dec. 1918 | T 65819 | | 15 | 15 | | |
| Jan | O 72461 | | 15 | 15 | | |
| Feb | S 78812 | | 15 | 15 | | |
| Mar | J 86376 | | 15 | 15 | | |
| Apr | M 2887 | | 15 | 15 | | |
| May | B 8255 | | 15 | 15 | | |
| June | K 9064 | | 15 | 15 | | |
| July | K 12907 | | 15 | 15 | | |
| AUG | Z 13504 | | 15 | 15 | | |
| SEP | A 15166 | | 15 | 15 | | |
| | | | 795 | 795 | | |

A/c Closed 30-9-19

Ret'd per. Minnekahda MO#3 MRO 1D 26/4/18

Date. 14-9-19 M.F.W.187 MO#3

Closed Bonyd 24-9-19

M.R.O 125157 Dest Rcd 24-9-19.

AUDITED.

ACCOUNTS CONSOLIDATED

M. F. W. 128
400M.—6-17—1772-39-1141
L. L. 22330—M. & D. 7493.

Date of Enlistment

MILITIA AND DEFENCE

# Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

RATE OF SEPARATION ALLOWANCE

| | | | |
|---|---|---|---|
| | | | |

RATE OF ASSIGNMENT

| | | | |
|---|---|---|---|
| | | | |

## PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

## PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

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

M. F. W. 128
400m.—6-17—177-39-1141
L. L. 22520—M. & D. 7693.

AUDITOR | PAYMASTER

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

M. OR S. | REGT. No. - | RANK Lieut. | NAME (IN FULL) DONALDSON, Alys Godwin. (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN | RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? - Nil - | DATE EFFECTIVE

TO WHOM PAID | RELATIONSHIP

ADDRESS

| PARTICULARS | EFFECTIVE DATE | AUTHORITY |
|---|---|---|
| Reg Pay. $2.00 | | |
| Sep Allce. $1.00 | | |
| Lieut A. G. Donaldson | | |
| Bank of Montreal | | |
| Gen Dst. | Brockville, | |
| Subscribed | Ont. | |
| Pvt | | |
| 10 | | |

ORIGINAL UNIT C.E.F. W.O.R.D. | IF IN P.F. WHAT UNIT? | TRANSFERRED TO | DATE | AUTHORITY

PLACE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

DATE OF ATTESTATION 27/2/15. | TRANSFERRED TO | DATE | AUTHORITY

ASSIGNED PAY $ 15.00/10. | DATE EFFECTIVE 1/10/19.

PAYABLE TO Mrs. F. L. Donaldson, | RELATIONSHIP | ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS 136, Pearl Street, W., Brockville, Ont.

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE

DISCHARGED | PLACE Kingston | DATE 17/9/19. | REASON Demob. | AUTHORITY C.O. 2194 | IF ENTITLED TO POST DISCHARGE PAY

| MONTH 1919. | PAY AND F.A. NO. OF DAYS | RATE | AMOUNT $ | AMOUNT C. | OTHER CREDITS $ | OTHER CREDITS C. | $ | C. | TOTAL CREDITS $ | TOTAL CREDITS C. | ACQUITTANCE ROLLS COL. NO. 1 NO. | COL. NO. 1 DATE | COL. NO. 2 NO. | COL. NO. 2 DATE | COL. NO. 3 NO. | COL. NO. 3 DATE | CASH PAYMENTS COL. NO. 1 $ | COL. NO. 1 C. | COL. NO. 2 $ | COL. NO. 2 C. | COL. NO. 3 $ | COL. NO. 3 C. | ASSIGNED PAY $ | ASSIGNED PAY C. | REGIMENTAL CHARGES $ | REGIMENTAL CHARGES C. | OTHER CHARGES $ | OTHER CHARGES C. | $ | C. | TOTAL DEBITS $ | TOTAL DEBITS C. | BALANCE DEBIT $ | BALANCE DEBIT C. | BALANCE CREDIT $ | BALANCE CREDIT C. | PARTICULARS OR REMARKS |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| BALANCE FROM PREVIOUS ACCOUNT | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Sept. | | | | | | | | | | | | | | | | | 48 | 67 | 48 | 67 | 75 | 00 | | | | | 39 | 00 | 75 | 00 | 18 | 34 | 186 | 34 | - | - | Gdsr. A.R. 747. (Wills) Gdsr. A.R. 490 (Wills) Gdsr. Chq. D.R. 7680 (in favor) O/Paid Rate Allce. 18 to 30-9-19 O/Paid Mess Allce 6 to 30-9-19 |
| 183 Days @ 3.00 | | | 549 | 00 | | | | | 549 | 00 | | | | | | | | | | | | | 90 | 00 | | | 18 | 34 | | | 276 | 34 | | | | | 1st Pay's W.R. (in favor) Ag. D. 207681. |
| | | | | | | | | | | | | | | | | | | | | | | | 89 | 66 | | | | | | | 366 | - | 183 | - | | | 133937 - Dec. 11/19 |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | 7 | 6 | | | | | | | | | Deduction on H/C 10-7-19 to 16-7-19 |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 3549 @ 2 AAPD AP 4511 - R - 11-9/19. |
| | | | | | | | | | | | | | | | | | | | | | | | 17 | | | | | | | | 459 | | 90 | | | | 184074. JAN 14 1920 |
| | | | | | | | | | | | | | | | | | | | | | | | 90 | | | | | | | | 549 | | | | | | 184748. FEB 12 1920 |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

War Service Gratuity. W.S.G.

90.00 | 18.34 | 276.34

89.66 | 7.6 | 366 - 183 -

17 | 459 | 90

90 | 549

90.34

549.00

THIS FORM WILL BE USED FOR ALL RANKS

# MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

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

STATION Witley Camp DATE 25 : 8 : 19

1. 1 (a) Unit 1 8th Can. Bn (b) Regimental No. ..... (c) Rank Lieut.

(d) Surname Donaldson (e) Christian name Alym Godwin

(f) Home address 136 Pearl St West Brockville Canada

(g) Next of Kin Mrs. A. Donaldson (h) Relationship father

(i) Address of Next of Kin 136 Pearl St West Brockville Canada

2. Age last birthday 25 Date of birth march 30

3. Enlistment, or Appointment (if an Officer) (a) Place Shorncliffe (b) Date ~~Jan 21 1915~~ Feb 27 1915

4. Personal description:

(a) Height 5' 8" (b) Weight 140 (stripped) (c) Complexion fair

(d) Colour of hair light (e) Colour of eyes blue (f) Identification marks, Scars, etc. wound stomach & hip

5. Former trade or occupation Surveyor

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 |
|---|---|---|
| Canada | 1 | 179. |
| England | 4 | |
| France | 3 years | |
| Eng | 11 months | |

| | Periods From | Periods To |
|---|---|---|
| Canada | Oct 1914 | May 1915 - |
| England | May 1915 - | Sept 1915 - |
| France or other theatres of War | Sept 1915 - | Sept 1918 |

7. Original disease, or injury A. ~~Concussion S.W.~~ Lacerated wd of tissue Rt buttock & ant. abd. wall

B. G.S.W.

(a) Date of origin A. 25-8-15 B. 19-6-19 (b) Place of origin A. France & Windsor Eng.

(c) Cause A. G.S.W. B. Injection

M. F. B. 227.

400M.—11-18.
1772-30-117.

B. P. C. FOLIO
FALSE DOCKET
8

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.)

(A) Myalgia Rt buttock, partial loss of function Rt leg

(B) Tender scar Rt abdominal wall.

B U.D.I. Neg Wassermann.

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.)

A. Objective: There is a 6" scar Rt abdominal wall, semi-circular, the centre of which is about the Bums point. Scar non adherent but slightly tender. No tendency to hernia.

Another transverse scar on Rt buttock extending inter. from superior, and gluteal fold along upper border of Gluteus maximus muscle. Scar is hard indurated & adherent very tender - No limitation of movement Rt leg

Subj - Officer complains of pain in Rt buttock & Rt abdom. wall Rt, on long walking and severe exercise

B. No clinical signs. Last Wass. Neg. 13-8-19 copied from M.H.S. sgd. W.K. Turner Capt.

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

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

Special Senses no Respiratory System no Integumentary System no

Disturbances of Mentality no Digestive System no Muscular System no

Osseous and Joint Systems no Any other general condition no

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

A - Wounded by M.G. Bullet 28-8-18. F.B. passed from posterior at Rt sacro iliac junction, penetrating abdomen and emerged 3" to Rt of umbilicus. No intestinal injury and healed well.

B - Exposed at Windsor Eng. April 30-1919. Prim. sore on penis as shown on admission to Brantford Mil Hosp 19-6-19 T.P. Search - Positive. Discharged from #6 C.G.H after full course of treatment, classified recovered.

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

Nil Ale

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

A. Scars as described in no 9— B. not appl.

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

A. n. a. B. n. a.

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

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

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

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

A. usual hosp. treatment B one full course of N.A.B & Hg.

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

B - suggested be be dealt with on arrival in Canada in accordance with P.C.O 47-of 20-1-19

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

17. Recommendations

H. Mans or Roy capt. A.M.C.
*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 A. G. Lindsay have heard the description of my disability and present condition read, and am satisfied (~~or not satisfied~~) with it. (If dissatisfied, statement should follow.)

I complain in addition of

W.G.

A. G. Lindsay (Rank)
*Signature of invalid examined.*

B. P. C. FOLIO
FALSE DOCKET
3

## OPINION OF THE MEDICAL BOARD

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

Yes we concur.

19. Is the invalid fit for

| | | | |
|---|---|---|---|
| (*a*) General service, | (Category A) | (~~Yes~~ or No.) | unfit A six months |
| (*b*) Service abroad, not general service, | " B) | (~~Yes~~ or No.) | unfit B six months |
| (*c*) Home service (~~Canada only~~), | " C) | (Yes or ~~No~~.) | yes (C) six months |
| (*d*) Temporarily unfit. | " D) | (~~Yes~~ or No.) | N.A. II 2 |
| (*e*) Unfit for service in Categories A, B and C | " E) | (~~Yes~~ or No.) | N.A. |

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.)
suggested he be dealt with as an invalid in Canada vide
(*b*) Does not require treatment. attendance until P.C.O 42 of 20-1-19.
(*c*) ~~Should pass under his own control.~~
(*d*) ~~Should not pass under his own control.~~
(Strike out condition not applicable.)

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

R.T.C. with A.G.I. A/8. 1. 155 of 4-1-19.

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.

W. J. Snowdon Capt. *President.*

PLACE Witley Camp

DATE 25-8-19

D. W. Horne Capt } 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.

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

*President*

PLACE.....

DATE.....

Members

APPROVED BY

*Assistant Director of Medical Services.*

DATE.....

APPROVED BY

*Director-General of Medical Services.*

DATE.....

SOS 17-9-19 RO 2194-19

THIS FORM WILL BE USED FOR ALL RANKS

# MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

DEPT. OF MILITIA & DEFENCE OCT 17 1919 H.Q. CANADA

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 27-2-19.

1. 1 (a) Unit WORD. (b) Regimental No. (c) Rank Lieut.

(d) Surname Donaldson (e) Christian name Alyn Godwin.

(f) Home address 136 Pearl St Brockville

(g) Next of Kin Mr A Donaldson (h) Relationship Father.

(i) Address of Next of Kin As Above

2. Age last birthday 23 Date of birth Mch 30-1895

3. Enlistment, or Appointment (if an Officer) (a) Place Engld. (b) Date Nov 1916

4. Personal description:

(a) Height 506 (b) Weight 130 (stripped) (c) Complexion Fair.

(d) Colour of hair Fair. (e) Colour of eyes Blue. (f) Identification marks, Scars, etc.

Wnd scar rt side of abdn and posteriorly on rt hip.

5. Former trade or occupation Insurance.

| 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 | 120. |

| | Periods | |
|---|---|---|
| | From | To |
| Canada | Oct 1914 | May 1915 |
| England | May 1915 | Sept 19,5 |
| France or other theatres of War | Sept 1915 | Sep 1918. |

7. Original disease, or injury Penetrating GSW through rt buttock and ant abd wall.

(a) Date of origin 28-8-18 (b) Place of origin France.

(c) Cause GSW Enemy.

B. P. C. FOLIO. FALSE DOCKET 2.

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.)

1. Myalgia Rt Buttock, partial loss of function rt leg with necess ity for light occupation.
2 Tender scar rt abdominal wall

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.)

There is a 6" scar perpendicular rt abdominal wall, the centre of which is about McBurneys point. Scar non-adherent, no tendency ti hernia, scar slightly tender.
There is a 6" transverse scar on rt buttock extending anteriorly from superior end gluteal fold along upper border of gluteus monimis muscle. This scar is hard, indurated and adherent.
It is very tender, no limitation of m ovement rt leg.
The Officer complains of pain in rt buttock and rt abdominal wall on long walking and severe exercise.

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

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

Special Senses.....no.....Respiratory System.....no.....Integumentary System.....no.....

Disturbances of Mentality.....no.....Digestive System.....no.....Muscular System.....no.....

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

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

Wounded by M.G. Bullet 28-8-18. F.B. passed from posterior at right sacri iliac function, penetrating ilium and emerged 3" to right of umbilicus. No intestinal injury. Wound healed well.

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*).)

N.A.

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

Scars as described in No 9.

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.)

12. Was the disability caused, or aggravated ; (*a*) by intemperance, or improper conduct ; or (*b*) 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 ? Permanent.

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

Dressings, closure of wounds and massage.
Med Board Bexhill 13-11-18 C.1. two months. Ditto Witley 15-1-19 C.1 two months.

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 ? Yes.

(If not, briefly state why)

17. Recommendations

W.J. Grant, Capt., CAMC.
*Medical Officer by whom the case is brought forward.*

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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 A.G. Donaldson have heard the description of my disability and present condition read, and am satisfied ~~not satisfied~~ with it. (If dissatisfied, statement should follow.)

I complain in addition of

A.G. Donaldson Lieut Rank.
*Signature of invalid examined.*
NJB.

B.P.C. FORM
RED POCKET

B.C. OCT 18 1919

## OPINION OF THE MEDICAL BOARD

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

Yes.

SEC. A.C. OCT 1 1919

19. Is the invalid 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.) | Permanently |
| (*d*) Temporarily unfit. | ( " D) | (Yes or No.) | |
| (*e*) Unfit for service in Categories A, B and C | ( " E) | (Yes or No.) | |

20. It is certified that the invalid

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

xxxxxxxxxxxx

(*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 Auth AGla 8-1-155 of 4-1-19.

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.

N.J. Barton, Major, CAMC *President.*

PLACE Witley Jas. L. Hammond, Capt. CAMC

DATE 27-2-19. } Members

## TO BE COMPLETED WHEN TREATMENT IS REFUSED

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

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

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

*President.*

PLACE.....

DATE..... } Members

APPROVED BY ..... MAJOR. APPROVED BY

*Assistant Director of Medical Services.* *Director-General of Medical Services.*

DATE..... DATE.....

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

Captain, D.M.S.
for
Canadians,

WITLEY. SURREY.

# Proceedings of an Officer or Nursing Sister Struck off Strength OF THE Canadian Expeditionary Force.

1. RANK Lieut
2. NAME Donaldson, Alpin Godwin
3. UNIT 18th Bn.
4. DATE STRUCK OFF STRENGTH | | PLACE
5. REASON SOS 17-9-19 RO 2094-19

Demobilization

6. AUTHORITY
7. PROPOSED RESIDENCE

136 Pearl St.
Brockville, Ont

This folder should contain the following documents :—

1. Declaration Paper, M. F. W. 51, or Attestation Paper, M. F. W. 23.
2. Casualty Form, A. F. B. 103 or M. F. W. 54.
3. Medical History Sheet, M. F. B. 313 or A. F. B. 178.
4. Proceedings of Medical Boards, A. F. A. 179 or M. F. B. 227.
5. Medical Report, M. F. W. 129.
6. Dental History Sheet, M. F. B. 465.
7. Last Pay Certificate, M. F. W. 44.
8. Certificate as to Missing Documents.

1. Triplicate Declaration Paper (M.F.W. 51), or
1 Triplicate Attestation Paper (M.F.W. 23).
2. Casualty Form (A.F.B. 103).
3. Medical History Sheet (M.F.B.313 or A.F.B.178)
4. Proceedings of Med. Board (M.F.B.227 or M.F.W.129)
5. Dental Certificate (C.A.D.C. 5009a).
6. Proceedings on Striking off Strength (M.F.W. 2591).
7. Last Pay Certificate (P.41). Dup
8. War Service Gratuity Form (M.F.W. 2595).
9. Sundry Documents.

M. F. W. 2591.
(923) Wt. /45P 3/19 15M D.S.

9. Sundry Documents. (M.F.W. 2595).

10 Prepared Corp

Group B
Checked by No. 2
Date 28 SEP 1919

14/1-Class 1 3/4/19. RO