131st OVERSEAS BATTALION

Original

790075

No. ~~790206~~.

Folio.

ATTESTATION PAPER.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? — Gamon
1a. What are your Christian names? — William Sprott
1b. What is your present address? — 237 8th St New Westminster BC
2. In what Town, Township or Parish, and in what Country were you born? — New Westminster BC
3. What is the name of your next-of kin? — J G Gamon
4. What is the address of your next-of-kin? — 237 8th St New Westminster BC
4a. What is the relationship of your next-of-kin? — Father
5. What is the date of your birth? — 1st March 1898
6. What is your Trade or Calling? — Bookkeeper
7. Are you married? — No
8. Are you willing to be vaccinated or re-vaccinated and inoculated? — Yes
9. Do you now belong to the Active Militia? — Yes 104th Regt
10. Have you ever served in any Military Force? If so, state particulars of former Service. — 104th Regt - 9 mos
11. Do you understand the nature and terms of your engagement? — Yes
12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE? — Yes

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

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

William Sprott Gamon (Signature of Recruit)

Date 14 Dec 1915. L A Murphy (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, William Sprott Gamon, 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.

William Sprott Gamon (Signature of Recruit)

Date 14th Dec 1915. L A Murphy (Signature of Witness)

CERTIFICATE OF MAGISTRATE.

The Recruit above-named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath before me, at New Westminster this 24th day of December 1915.

B G Walker (Signature of Justice)

M. F. W. 23.
200 M.—11-15.
H. Q. 1772-39-841.

Drummer

Description of William Sprott Gamon on Enlistment.

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

Height ..... 5 ft. 10 3/4 ins.

Chest measurement.
- Girth when fully expanded ..... 38 ins.
- Range of expansion ..... 3 ins.

Complexion Medium

Eyes Blue Grey

Hair Very dark brown

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

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).

Mole 1 inch under right ear

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 DEC 14 1915 191 . G H Manchester Capt.

Place NEW WESTMINSTER .....

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.

William Sprott Gamon having been finally approved and inspected by me this day, and his Name, Age, Date of Attestation, and every prescribed particular having been recorded, I certify that I am satisfied with the correctness of this Attestation.

J W Taylor (Signature of Officer)
Lt Col

Date 21st Dec 1915.

REGIMENTAL DOCUMENTS

Pte. NAME GAMON WILLIAM SPROTT REGT. NO. 790075 UNIT 131st Bn. H. Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
						DEATH
1	ATTESTATION PAPER (M.F.W. 23, 133, or 51)					
3	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)				03106	Category
	TRAINING HISTORY SHEET (M.F.W. 113)					
1	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
1	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
1	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
2	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
	DENTAL HISTORY SHEET (M.F.B. 465)					Category Demob.
1	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					
	MEDICAL EXAMINATION (M.F.W. 129)					
1	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
	LAST PAY CERTIFICATE (M.F.W. 44)					
1	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					4
1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					4-4
2½	Disp. Cert					4-4
2	R&C boxes					12-4
1	mise					
1	CANDC 5809A					
2	cancelled					
1	A 49					
1	472137					
	[illegible]					
	[illegible]					
	B149					

W 2589
100M-11-18
1772-39-1377

To be made out in duplicate.

H.Q. 54-21-23-53

30

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

INSTRUCTIONS.

(a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.

(b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.

(c) All questions, etc., must be answered.

(d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.

(e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

---

(1) Name of Overseas Unit which Soldier joins 131st OVERSEAS BATTALION

(2) Regimental Number 790075

(3) Full Name of Soldier Gannon, William Scott

(4) Place of Birth New Westminster

(5) Are you married, or not? no

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

(b) Present Postal Address —

(7) Are you a widower? no

(8) Have you any children? —

If so, give number of boys and girls —

Also their names and ages

M. F. W. 67.

200M.—3-16.
I772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive? Yes

If so, state name and address John Grindley Gamon, 237-8th New Westminster BC

(10) Is your Mother alive? Yes

If so, state name and address Florence Clark Gamon
237-8th New Westminster BC

(11) If your Mother is a widow —

Are you her sole support, or not? —

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

—

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

—

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

—

(15) Are you insured? Yes

If so, in what Company? Metropolitan Life

Have you made arrangements for payment of your Insurance premium Yes

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

J. Taylor
LIEUT. COL.
COMMANDING 131st (NEW WESTMINSTER) BATT. C. E. F.

OCT 4 - 1916

Date

R—122
8,401—50,000—21-10-16.

LTR

Rank | Name GAMON, ~~N~~ William Sprott | Reg'l No. 790075

Unit 131st, Bn. | If in perm. Corps, What Unit? | Married or Single Single.

Place and Date of Enlistment New Westminster, 14th, Dec, 1915. | Place of Birth New Westminster B.C.

Name and Address, Next-of-Kin J.G. Gamon

237, 8th, St, New Westminster, B.C. | Relationship Father.

Also notify:- L. SHEPHERD, 183 Clapham Rd, London S.W.

Assigned Pay Monthly $ | Payable to | Relationship

ENQ A 2805
22117

Separation Allowance $ | Payable to | Relationship

N/E. R.B. No. 20758
File R.L.
Category CRC

Discharge, Date and Place | Reason | 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.
		Arrived in England.			
		Arrived in England.		11-11-16	per S.S. "Caronia"
13. II. 16	30th.	Taken on Strength	Sh'clf,	3. 11. 16	Pt, 2-O, 300
20. 11. 16	"	appt'd A/Sgt/bpl	"	11-11-16	Pt 5 307
25. 11. 16	"	Reverts to Pte at own request	"	26. 11. 16	Pt 5 312
27. 11. 16	"	A.O. Sta 47th Bn	Overseas	27. 11. 16	" 314
3. 12. 16	47th	T.O.S. from 30th	In the Field	28. 11. 16	" 262
16. 4. 17	GL 47 Bn	Admtd No 12 Can Field Amb	Field	22. 3. 17	GL A186 Eye trouble
"	do	Rejoined Unit Dc " " "	"	23. 3. 17	GL A186
16. 5. 17	GL 47 Bn	Admtd No 13 Stat Hosp	Boulogne	8. 5. 17	GL A212 G.S.W. Head
26. 5. 17	GL " "	Trans No 1 Conv Depot	"	19. 5. 17	GL A221 " "

A.F.B. 103 CHECKED
16 DEC 1916

Report. Date.	From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.		Date.	REMARKS Taken from Official Documents.
7.6.17	BL 47 Bn	Trans Base Details	Boulogne		31.5.17	BL A231 GSW Head
4.9.17	BB Regt	Admtd St Johns Amb Bde Hosp	Staples		25.8.17	BL A 2 GSW Chest Ser
8.10.17	" "	Trans Graylingwell War Hosp	Chichester	Pte	4.10.17	BL B31 " " 47th Battn
11.10.17	" "	Adm Hosp in Eng is T.C.S from 47 Battn	Seaford	Pte	4.10.17	Pt II 6. 210 v 103 d 16.10.17
29.10.17	" "	Trans No 4 Can Gen Hosp	Basingstoke	Pte	25.10.17	BL B49 GSW Chest Scar v L Wrist B.B.R.D
C 26.2.18	1st Res Bn	Attached from B.B.R.D	Seaford	Pte	19.2.18	Pt II 6. 48 v 53 d 2.3.18
5.3.18	1st " "	Awarded Good conduct stripe		Pte	4.3.18	" " 54
30.5.18	1st " "	Ceases att v T.C.S from B.B.R.D		Pte	29.5.18	B.B.R.D Pt II 6. 132 d 3.6.18
					29.5.18	" " 130. for effective date see 132 d 1.6.18
20.8.18	1st Res	S.C.S to 29th Battn	"	Pte	20.8.18	" " 200 v 84 d 27.8.18
		29 BATT DO 20 D.13,4,19				
		PROC TO, ENG 10,4.19				
		M WING, CCC. DO:2 D,12,4,19				
		TOS, 11.4.19	64.T.		10.5.19	
10.5.19	M Wing BBC	S.C.S to Canada	Witley	"	10.5.19	D6.30

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

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

Casualty Form—Active Service.

Unit, Regiment or Corps 131st Battalion

Regimental No. 790075 Rank Pte Name Gamon William Shrott

Enlisted (a) 14-12-15 Terms of Service (a) C. E. F. Dur of War Service reckons from (a) 14-12-15

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

Extended ..... Re-engaged ..... Qualification (b) Bookkeeper

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
		T. O. S. No11DD 10May 19,			
		S. O. S C. E, F24May19 TArea			
		NcII DD do148 May28 19			

J O Evans Lieut.
Asst. Adjutant, District Depot, M. D. XI

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

[P.T.O.

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

a

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

"M. F. W. 54.
150M. 10-15.
H.Q. 1772-39-920.

Casualty Form—Active Service.

W.O.B. CLASS. "A"

Unit, Regiment or Corps 131st OVERSEAS BATTALION

Regimental No. 790075 Rank ~~Sgt~~ Pte Name Gamon, William Sprott

Enlisted (a) 14 Dec/15 Terms of Service (a) Dof War ~~6 mos.~~ C. E. F. Service reckons from (a) 14 Dec./15

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

Extended Re-engaged Qualification (b) Bookkeeper

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
		Embarked at Halifax.		1.11.16.	
		Disembarked at Liverpool.		11.11.16.	
20.11.16	30th Bn	Appointed Actg. L/Corpl.	S'cliffe	11.11.16	Batt. Order 307. Part 2.
13.11.16	do	Transferred to 30th Batt.	do	13.11.16.	~~Bgde Order 4323.~~ ~~13.11.16.~~ Pt II O # 300
		~~E. Sandling.~~			
26.11.16	o/c 30th	Rots. to ranks at own request.	E. Sandling	26.11.16	Pt. 2. 312
	o/c 30th	PROCEEDED ON DRAFT TO 47th BATTALION. C.E.F.		27 NOV 1916	
			EAST SANDLING,	Pt II DO. 314.	
28.11.16	CBD.	Arrived in France	Field	28 11 16	NR
3.12.16	o/c 47th	Taken on strength	Field	28 11 16	Pt II 262 d/3.12.16
11.12.16	CBD.	Left to join unit	Field	11.12.16	NR
30.12.16	Unit	Joined unit	Field	13 12 16	B213 OCS 95 d/11.1.17
19.2.17.	9th 47th	T.O.S Can Base Depot	Field	19.2.17	NR

CERTIFIED CORRECT. 29 DEC. 1916 CAN. RECORDS, LONDON.

ADJUTANT 131st WESTMINSTER BATT. C. E. F.

H. G. Pocock Lt.
~~Capt. &~~ Adjutant.
for
O.C. 30th Battn. C.E.F.

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

P.T.O

799075 Pte GAMON. W.S

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
15.2.17.	C.D.R.S	To CSD for action of S.M.S.D	Freiell	15.2.17.	R.R. D.C.S 116 of. 26.2.17.
23.2.17	Pte CSD.	Left to Join 4th Entr Batn	Freiell	23.2.17.	R.R
26.2.17.	O/C 4 Entr Bn	Joined 4th Entr Bn	Freiell	26.2.17.	R.R
10.3.17	O/C 47th Bn	Joined Unit Ex 4th Entr. Battn:	"	3.3.17	B 213 D.C.S. 126 d/20.3.17
24.3.17.	O/C 47th Bn	Eye Trouble to 12 C.F.A.	"	22.3.17.	" " 132 of. 5.4.17
24.3.17	—do—	Relea from C.F. Amb	Freiell	23.3.17.	" " " " "
10.5.17.	—do—	Evac. Wounded.	"	5/7-5-17.	C.R. " 15-1.
12.5.17	O/C 11 C.F.A.	Sw Head to 23 C.C.S	"	7.5.17.	C.S.C. " 154
19.5.17	O/C 13 Stat Hy	Sw Head. acc	"	8-19.5.17.	W. 3034 (W.412)
19.5.17	O/C Con Dep	Wounded. acc	"	19.5.17.	W. 3034 (W. 286)
2.6.17	4 C.D.S	T.O.S nor 4 C.D.S.	"	2.6.17.	R.R
6.6.17	Do	Left for Unit	"	6.6.17	R.R
7.6.17	4 Entr Bn	T.O.S 4 Entr Bn.	"	7.6.17.	R.R
16.6.17	O/C 47th Bn	Joined Unit ex 4 Entr Bn	"	10.6.17.	B 213. D.C.S 163.
27.8.17	Do	Evac Wounded	"	24.8.17.	C.R. D.C.S 179
25.8.17	O/C St J A B	G.S.W. L. Leg. S Acc	"	24.8.17.	Ex 4474
3.10.17	O/C H.M.T.S Stad Antwerpen	Invalided (Wounded) and posted to B.C. Regtl Depot. Seaford.		3.10.17.	W. 3083. (4003. Pt II D.C 103. of. 18/10/17
					To Lieut Col Lieut A.A.G. Canadian Section
Pte 11.10.17	B.E.R.D	Invalided r T.C.S from 47 Bn	Seaford	4.10.17	Pt II C. 210

✓

D. Durell
Lieut.
for Lt Col i/c Records, C.E.F.

Sheet 2

Army Form B. 103. Regimental Number 790075

Casualty Form—Active Service.

Regiment or Corps 131st Battn

Rank Pte Surname Gamon Christian Name William Spritt

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

Enlisted (a) 14-12-15 Terms of Service (a) D of W Service reckons from (a) 14-12-15

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

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

or Corps Trade and Rate .....

..... 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...			
19-2-18	B.C. R.D.	Detailed to Depot Coy.	Seaford	18-2-18	P.D.II D.O. 42
2-3-18	B.C. R.D.	Command 1st Res ✓	"	15-2-18	" " " 53
	attached 48/26.2.18				
			W. Williams Capt X For O.C. B.C. REGL. DEPOT.		
26/2/18	1st Res Bn	Attached from BCRD ✓	Seaford	19.2.18	A200.48
5.3.18	1st Res Bn.	Has permission to wear Good Conduct Stripe. ✓	Seaford	4.3.18	P.II 54
30.5.18	1st Res. Bn	Ceases to be attached to T.O.S. reporting from BCRD ✓	Seaford	29.5.18	P.II 131+132

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

[P.T.O.

[M1101] W6135/M768 1000m 9/16s 153 G & S Forms/B.103/4. E./354.

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				
6-18	D.C.R.D.	Ceases to be on Command 1st Can Res Battn	Seaford	29-5-18	Pt. 2. D.O. 132
		S.O.S. on posting to Res. B			
					L. B. Dauthwaite Lieut. For O.C. B.C. REGL. DEPOT.
AUG 20 1918	1st Res Bn	PROCEEDED ON DRAFT TO 29th BATT	Seaford	AUG 20 1918	Pt II 200
					Fr Nadbymolkd for Captain Adjutant, 1st Canadian Reserve Battalion.
21-8-18	OC RB	On Reinf - TD 29th Bn	Leave	21-8-18	TD Rd - 27-8-18
23-8-18	"	Left for CCRC	TD	23-8-18	WR
"	CCRC	On "	"	"	"
29-8-18	"	Left for 29th Bn	"	29-8-18	"
7-9-18	OC 29	On. "	"	31-8-18	B213
	Emb Camp	Proceeded to England			N/R Do
			invalided		
			Lieut		
			Fr Lt Col Adj		
					Newman LIEUT. FOR OFFICER COMMANDING, "M" WING
10/5/19	S.O.S. OF O.M.F.C. ON PROCEEDING TO CANADA. for discharge			D.O. (30) 10/5/19	

CERTIFIED TO BE A TRUE COPY 29 AUG 1918 C.M.F.C. LONDON

L. L. Job 4503.—M. & D. 6832.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12.
50m.—6-16.
H. Q. 1772-39-819.

To Whom Mrs Florence Gamon
Address 237-8th Street
New Westminster
B.C.

Rate 15.00

NOV 1 1916

By Whom Assigned Gamon M L
Regtl. No. 790975 790075 "a"
Rank Pte
Corps 131 Westminster Ds Bn

PAYMENTS

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

CONSOLIDATED 2 ACCOUNT

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12a.
50m.—7-16
1772—39—819.

Sheet No. 2. Mrs Florence Gannon
(Assignee)

PAYMENTS.

Name of Soldier Gannon Mr. L
#790975 pte "a" 131st Bn

I. L. Job 5470—Req. 6888.

Month.	Year.	Cheque No.	Amt.	Remarks.
			15 00	NOV 1 1916
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.		230480	15	
Dec.		235476	15	
Jan.	1917	H 37419	15	
Feb.		H 43367	15	15-00
March		J 44454	15 -	
April		B 20 N	20	156
May		C 7902	20	
June		K 18753	5	
July		~~E 15026~~	~~20~~	5 00 S. to adjust E 15026 2/4/17 Cancelled
Aug.		I 21783	15	
Sept.		F 32707	15	
Oct.		P 35415	15	
Nov.		C 41865	15	
Dec.		C 43363	15	
Jan.	1918	N 55625	15	
			210 00	
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier_____

PAYMENTS.

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

DEPARTMENT OF VETERANS AFFAIRS

To ● Copy for H.O. File

Attention of

P.A.

Ottawa, Ont.
Date Jan.27, 1965

NAME GAMON, William S.

SERVICE NUMBER 790075 WW1

C.P.C. No. 144944
W.V.A. No.

NAVY
ARMY XXX
R.C.A.F.

The DEPARTMENT has received information from

Mrs. Catherine Gamon,(widow) 5991 Clarendon St.,Vancouver 16, B.C. Letter d/Jan.22, 1965
(State authority and source of information of death)

regarding the death of the above mentioned veteran.

Particulars are as follows:

B01 # 05321

Date of Death January 16, 1965
Cause of Death
Place of Death not stated

Name and Address of next of kin (if known)

Copies to: W.S.R. ✓
V. I.
XXXXX
D.O.
H.O.

Destroy form if advice of death already received.
VANCOUVER

E.C. Richards
for
Chief, Central Registry

DVA 24

FORM R. 149.
7106—250m—7/2/17.

Name GAMON *Rank* Private *Reg. No.* 790075

Unit William Sprott, 47th Battalion. S.W.

Next of Kin Canada Alos L Shepherd 183 Clapham Rd, London

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
22-3	No.12 C F A	Eye	Trouble Q	A186		
23-3	Rejoined Unit	do	do	A186		
8-5	No 13 Stg H Boulogne		GSW Head	A212	15-5 M 4604	16-5
19-5	No.1. Conv. Dep. Boulogne		do	A221		
31-5	Base Details	"	Do	A231		
10-6	Unit Dcs 163					

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

No. 790075. RANK Bugler. NAME Gamow. H. S.

T. O. S. UNIT 131st Battalion R.E.T.

Trans. from 104th Regt. 6-12-15.
(Do 1-6-12-15)

M. D. 11.

PAID FROM 1915.	PAID TO 1915.	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
Dec. 14.	Dec. 31.	✓	Prom. L/Cpl. 17-12-15.	(Do 1-6-12-15)
1916	1916			
Jan 1.	Jan 31.	✓		
	Feb	✓		
	Mar	✓		
	April	✓		
	May	✓		
	June	✓		
	July	✓		
	Aug	✓		
	Sept	✓		
	Oct	✓		

Form DMS 1401.
8289 100M 9/3/17.

No. 4 Canadian Gen. Hospital, HOSPITAL.

AT Basingstoke.

A. & D. CARD

A. & D. No. M.1670. PL. OF ACTION

RANK Pte. 790075 UNIT 47 Can a SICK OR WOUNDED

NAME Gamon Wm AGE 19 RELIGION C.E.

PLACE IN HOSPITAL ~~OS~~ B.L.

DIAGNOSIS Gsw Chest & L. wrist.

ADMITTED 24.10.17 FROM Graylingwell War Hosp Chichester

DISCHARGED 8.2.18. TO Brit. Col. Regt. Depot. Seaford.

TRANSFERRED

SERVICE AT HOME 13 m IN FIELD 11 m

RESULTS B.2.

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

(P.T.O.)

REMARKS.

Reg. No. 790075 Name Gammon. W.

Rank L/Cpl Corps 131 Bn. Age 18 Service C 9/12.

Ledger No. Serial No.

HOSPITALS	DATE	DIAGNOSIS
Brigade Vancouver.	5-8-16	Mumps C
Dis to Duty	17-8-16.	

P. T. O.

HOSPITALS	DATE	DIAGNOSIS

M. F. W. 2553.
75M.—9-19.
1772-39-1332.

REGT'L. NO. 490075.

NAME Lamon, William Sprott

H. Q. FILE NO. 649

RANK AND CORPS Pte. 44th Bn (4th Can Div)

FOLLOWS NO. Form 131 S/Bn

CABLE NO.	CABLE DATE	NATURE OF CASUALTY
M4604	16-5-17	Adm. to #13 Stat. Hosp. Boulogne May 8th 1917 G.S.W. head
WSM M.5541	10-6-17	Discharged from Hosp to Base Details May 31st.
M6007 21-3	6-9-17	Adm. St. Johns Amb. Brigade Staples. Aug 25th 1917. G.S.W. Chest.

FOLLOWS

L. L. 18950—M. & D. 7789

M. F. W. 42—30M.—4-17.
H. Q. 1772-39-893.

LIST NO.	HOSPITAL	DATE OF ADMISSION	REMARKS
A 186.	#12 Canfield. Amb.	22-3-17.	Eye Trouble.
"	Rej. unit	23-3-17.	" "
A 212.	No 13 Stat. Boulogne	8-5-17.	G. S. W. Head.
A 221	to No 1 Conv. Depot Boulogne	19-5-17	GSW Head
A-231	or Base Details Boulogne	31-5-17	G. S. W Head.
A 2.	St. Johns. Amb. Bde. Etaples	25-8-17	" " " Chest, lungs.
B 31	Graylingwell War Chester	4-10-17	GSW. & Chest Sev.
B.149 (2)	or 111 Gen. "Basingstoke"	25/10/17	" " Sev. + Lt. wrist
B136-1	Discharged	8-2-18	" " " 5-3-18 17/11/17

Form R. 149.
7106—250m—7/2/17.

Name ~~GAMON~~ GAMON William S. proll

Rank Pte.

Reg. No. 190075

Unit 47th Bn.

Next of Kin Canada

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
25-8-17	St. J. Amb. Bds. H. Stafs.		G.S.W. Chest Sev.	A2		M 6007 5-9-17
4-10	Graylingwell War Hospital Chichester		—Do—	B31		3235
25-10	H. Lan. Gen. H. Basingstoke		—do— & Lt. wrist	B49		4352
8-2-18	Discharged		—Do—	B136		3041
	Dc					

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

Hyl

Number 790078 Rank A/L/Cpl.

Surname GANON

Christian Name William Sprott

Units 47th Bn Can Inf Theatre of War France

Date of Service 27-11-16

Remarks

Latest Address 237-8th St
New Westminster

Roll No. B. Page 15818. B.C.

200m.-2-21.M.

D.M.S. 1300.

Surname	Christian Name or Names	Reg. No.
Gamon.	W.S.	790075.

Rank	Unit	Co.	Troop	Batty.
Pte.	47th. Bn.	B.C. Rest		

Hospital	Date of Admission
Transferred 12. Can. Fld. Amb.	Hosp. 22-3-17.
13 Stat., Boulogne	Hosp. 8-5-17
1 Convl Depot, Boulogne	Hosp. 19-5-17
St. Johns Amb. Brig. Etaples	Hosp. 25-5-17

Diagnosis Eye. Trouble. "Q"

(1) Later Diagnosis (if changed) G.S.W. Head. P.

(2) G.S.W. Chest Sev P.

(3)

Additional Diagnosis: if more than one state present & S.I. Wint. Dr cad

DISPOSITION Rej. Unit. 23-3-17. Date

Bar det. Boulogne 31. 5. 17

REMARKS

Mis. 8-2-18.

C.L. 16-4-17.	A/186.
— 16-5-17	@212'
— 26-5-17	@221
" 7. 6. 17	A231.
5.9.17	A 93
9.10.17	B31.
30.10.17	B49.2
12.2-18.	B. 136

EPITOME OF HOSPITAL TREATMENT.

	Hospital	Adm.
1.	Graylingwell War Hosp. Chichester	4.10.17
2.	4 Can. Gen. Basingstoke	26.10.17
3.		
4.		
5.		
6.		
7.		

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY.	* ~~ENGLAND~~ OR CANADA.	SEPARATION ALLOWANCE.	* ENGLAND OR CANADA.
EFFECTIVE DATE:- 1/11/16.		EFFECTIVE DATE:-	
AMOUNT:- $15		AMOUNT:-	

Stopped 1.5.19

NAME, ADDRESS, RELATIONSHIP & AUTHORITY | WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.

Florence Gamon
237-8th St. New Westminster BC

NAME:- GAMON William Sprott

NUMBER:- 790075

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Pte

UNIT AND TRANSFERS

ORIGINAL UNIT:- 131 Bn

DATE ACCOUNT FIRST OPENED:- 1/11/16

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
	1/3/18		BCRD
	1/9/18	10/9/18	29 Bn

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS | UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK

DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT
14/4	434	Willy $15	~~75~~			LPCBalce Cr	8 59
14/19	111	Field 20/50	~~3 15~~				4 94

DAILY RATES OF PAY AND ALLOWANCES

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

PARTICULARS OF RENDERING NON-EFFECTIVE:- Total Canada 30/4/19 Z6989 Willy B'shott 7/4/19 MD11 T

MONTH 1918	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
31 Mar		Balance Forward							109 45		
April	C.O. Pay	33 -		C.A.P.				15			
				2466 1 Res 1/4	48 67						
				1464 " 25/4	14 60				64 18	✓	
		33			63 27			15			
May	C.O. Pay.	33		C.A.P.				15			
		1 10		a/R 7714 1 Res Bn 13/6/18	14 60						
				1128 " 29/5	24 33				44 35	✓	
		34 10			38 93			15			
June.	P.P.	33 -		C.A.P.				15			
				a/R. 1468 1 Res. 12/6.	14 60						
				✓ 1679 ✓ 26/6.	34 07				13 68		
		33			48 67			15 -			
July	P.P.	34 10		C.A.P.				15 -			
				a/R 2025 1 Res 9.7.18	4 87						
				✓ 2349 ✓ 26.7.18.	14 60				13 31		
		34 10			19 47			15			
Aug.	✓ ✓	34 10		C.A.P.				15			
				a/R. 2723 ✓ 14/8/18	4 87						
				✓ 2845 ✓ 22/8/18.	19 47				8 07	✓	
		34 10			24 34			15			
Sep.	✓ ✓	33 -		C.A.P.				15 -			
				a/R 928 - 15/9/18 - 6th R.F.B	3 57						
				a/R 1155 - 26/9/18 - 29 Bn	3 57				18 93		
		33			7 14			15			
Oct	✓	34 10		C.A.P.				15 -	38 03		
				a/R. 1623 17/10/18 ✓	3 73						
				✓ 2343 29/10/18 ✓	3 73				30 57		
		34 10			7 46			15 -			

NUMBER 190075 RANK NAME Gannon W.S.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
									30 57		
Nov	P.P.	33						15	86 77		
Dec	✓	34 10		A.R. 2764 14/11/18 29 Mn	3 73	✓		15			
Jan	✓	34 10		" 3369 26.11.18 ✓	13 06	✓		15			
				✓ 3881 18/12/18 ✓	6 49				63 49		
		101 20			23 28			45			
Feb	✓	30 80		✓ 4217 14/1/19 ✓	5 03						
				✓ 5064 27/1/19 ✓ (58)	3 73						
				✓ 5251 14/2/19 ✓ (98)	3 73						
				✓ 6843 26.2.19 ✓ (119)	18 66						
				✓ 6866 21.3.19 ✓ (159)	3 65						
				EAP				15			
Mch	✓	30 10						15	63 59		
		61 90			34 80			30			
Apr	✓	33		CAP.				15			
				111. 3/4 29. (10)	3 65				96 59		
				433 14/4 " (20)	4 3 -						
				1105. 4.5 " 64	9 73				~~5 21~~		
		33			86 38			15	4 79		

S. O'Canada 10/5/19 £64 3 0 Kd.

P. 559.

MARRIED OR SINGLE: Single

PLACE OF BIRTH:

NAME AND ADDRESS OF NEXT OF KIN: Samson J. G. 237-8th St. W., New Westminster, B.C.

RELATIONSHIP OF NEXT OF KIN: Father

NAME AND ADDRESS OF NEXT OF KIN:

RELATIONSHIP OF NEXT OF KIN:

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO:

RELATIONSHIP OF DEPENDANT:

CASUALTIES, PROMOTIONS, &c

PARTICULARS	EFFECTIVE DATE	AUTHORITY
Reverts to Ranks	26/1/16	B.O. 31 & 26/1/16

ADMISSIONS TO HOSPITAL, &c.

DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL

REG'L. NO. 79007 RANK ~~Corporal~~ Pte. NAME Samson, William Sproll

IF IN PERMT. CORPS WHAT UNIT } UNIT 131st TRANSFERRED TO 47th Bn DATE 1/1/17 AUTHORITY DO 262 3/12/16

PERMANENT FORCE ALLOWANCES TRANSFERRED TO BBKR DATE 14/3/18 AUTHORITY

PLACE OF ATTESTATION New Westminster, B.C. TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION 14/12/15 TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY $ 15.00 DATE EFFECTIVE 1/11/16.

PAYABLE TO Samson, Florence, 237-8th St. W., New West., B.C. RELATIONSHIP

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) EFFECTIVE REASON

DISCHARGE DATE AND PLACE REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

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	C.	Remarks
Sept.														13 10	13 10									Balance from Canada							13 10					
1-25	25	1.05	26 25		25	.10	2 50																													
26-30	5	1.	5		5	.10	50								34 25			2043	15-1/4						12 17			15		27 17	20 18					Reverts to Ranks 26.1/16 BO 31/1/16
Dec 1-31	31		31		31		3 10								34 10	2132	27/4							9 74				15		24 74	29 54			29 54		D 47th Bn 1/1/17 D 262 31/12/16
1917			6 10				6 10																													
Jan. 1-31	31	100 10	34 10												34 10	523	15/12	588	12/1	9399	7/12	C.D.B.		8 72	2 62	4 36		15		30 70	32 94			32 94		
1-28/2	28		30 80												30 80	616	15/1							2 61				15		17 61	46 13					
																786	21/2							2 62												
Mar	31		34 10												34 10	720	9/2	893		12009	28/2	C.B.D.		2 62	2 61	6 98		15		32 44	47 79					
Ap 1-30	30		33												33			17	7-4						2 61			15		17 61	65 18					
May 1-31	31		34 10												34 10	84	22-4							2 62				15		17 62	79 66					
June 1-30	30		33												33					1320	3/5	C.B.D.				2 68		15		17 68	94 98					
July	31		34 10												34 10													15		15	114 08					
Aug	31		34 10												34 10	327	25/6	384	6/7					2 68	2 67			15		20 35	127 83					
			335 65											13 10	348 75									31 61	22 68	16 63		150		220 92	127 83					

790075 Pte. Gamon. W. S.

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
			335.											12 10	348 75.									31 61	22 68	16 63		150		220 92	127 83.				
																557	5 75							268											
Sept	30		33												33	462	23 17	6 56	29 18	25 26				8 35	2 68	4 46		15		20 17	130 66				
			368.											12 10	381 75									39 64	25 36	21 09		165		251 09	130 66.				

Month	Particulars	CR. 1	CR. 2	Particulars	DR. 1	DR. 2	DR. 3	DR. 4	Balance	Defer. Pay	Sep. Allce. Eng.
	Bal. Fwd -	~~130 66~~							130 66		
Oct	Pte Pad.	34 10		A P Law				15			
				AR 2101 2/8/16 47 Bn	2 44				147 32		
		34 10			2 44			15			
Nov	Pte Pad.	33.		ap Law				15			
Dec	Pte Pad.	34 10		A P Law Dec				15	184 42		
		67 10						30			
Jan	Pte Pad.	34 10		A. P. Law.				15			
				AR P223 17/11/17 Hendros	2 43						
				AR P22 2/11/17 HBGH.	2 43				198 66		
		34 10			4 86			15			
Feb	P Pad.	30 80		AR 341 4/12/17 BERR	2 43						
					4 43						
				A P Law.				15	214 03		
		30 80			4 43			15			
Mch	P. Pay	34 10						15			
				9/2 1938 17 Co 23/2	9 73						
				1 P 185 " GH. 7/2	4 87						
				1 P 184 -"- 7/2.	4 87						
				2/4 P 412 -"- 20/2	4 87						
				1 P 485 -"- 7/1	4 87						
				1 P 724 -"- 10/1	24 33						
				9/2 2127 17 Co. 13/3.	4 87						
					102 21						
				1 2353 -"- 2/3.	19 47				109 45		
		34 10			121 68			15			

SG — 26
OG — 3
DA — T

SHORT FORM.

WAR SERVICE BADGE
CLASS "A" No. 304848

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

M

1. No. 790075

2. Rank. PRIVATE

3. Name. GAMON WILLIAM SPROTT

4. Unit. 29th BATTALION

5. Date of Discharge 24th May 19 Place Vancouver B.C.

6. Reason for Discharge DEMOBILIZATION

H

7. Authority. NoII DD do148 May28 19~~18~~

8. Proposed Residence after Discharge 237 8th Street
New Westminster BC 14/12/15
29th Batn.

9. CERTIFICATE TO BE SIGNED BY SOLDIER.

I hereby acknowledge that at the undernoted place and date I received my discharge Certificate

M. F. W.? 39

W. S. Gamon
Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

MEDICAL DOCUMENTS FORWARDED TO ~~S.C.~~ R. OR B.P.C. ON 3-6-19

Place

Date

Demobilization "T" MAY 24 1919 Military District No. 11

Signature D.M. Grant Capt.
(O. C. Discharging Unit.)

a.k.

M.F.B. 218a—300M.-11-18—1772-39-113.

LIST OF DISCHARGE DOCUMENTS.

Attestation Paper, Triplicate	Militia Form W. 23
or Particulars of Recruit	Militia Form W. 133
Field Conduct Sheet	Militia Form W. 178 or A.F.B. 122
Casualty Form	Militia Form W. 54 or A.F.B. 103
Last Pay Certificate	Militia Form W. 44
Certificate that missing documents are unobtainable	
Medical History Sheet	Militia Form B. 313 or A.F.B. 178
Proceedings of Medical Board	M.F.B. 227, A.F.B. 179 or A.F.A. 45
Dental History Sheet	Militia Form B. 465
Medical Report	M. F. W. 129 or D. M. S. 1375
Regimental Conduct Sheet	Militia Form B. 263
Company Conduct Sheet	Militia Form B. 263a

1. Triplicate Attestation Paper (M.F.W. 23), or Particulars of Recruit (M.F.W. 133).
2. Casualty Form (A.F.B. 103).
3. Medical History Sheet (M.F.B. 313 or A.F.B. 178).
4. Proceedings of Med. Board (M.F.B. 227 or M.F.W. 129)
5. Dental Certificate (C.A.D.C. 5009a).
6. Field Conduct Sheet (A.F.B. 122.)
7. Proceedings on Discharge (M.F.B. 218a)
8. Discharge Certificate (M.F.W. 39) (Enclosed in special envelope (260M)).
9. Copy of Discharge Certificate (M.F.W. 39a).
10. Dispersal Certificate (C.D. 3).
11. Equipment and Clothing } Statement Q.M.G. Form (D.O.S. 2).
12. Last Pay Certificate (P. 851).
13. Pay Book (A.B.64).
14. War Service Gratuity (Form M.F.W. 2595).
15. Sundry Documents.

Group.....

Checked by No.....

Date 7 MAY 1919

Forms
I. 1237
12

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
GEI 71 AB. 796	790075	Pte	Gamon	William C.S.
Year	**Unit.**		**Age.**	**Service.**
1917	47th Canadians		19	2 Yrs

Station and Date.	Disease
Oct 8/17.	Shell wd left wrist & chest. Wounded Aug. 22nd. Small superficial wound on ant. surface of left forearm in lower third, with excessive granulations. Small healed wound on left chest in post axillary line at level of nipple. Notes from France state haemothorax & 1900 ccs of sterile fluid drawn off on Sept 12th. There is relative dulness over the left base & the breath sounds are much diminished. Basil Wade Capt 16-10-17

*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.	

790075 Drummer

ORIGINAL

MEDICAL HISTORY SHEET.

Surname Gamon (GAMON) Christian Name William Sprott

Examined on 13th day of Dec 1915 at New Westminster B.C.

Approved by G H Meanwell Lieut

Rank Capt CAMC M.O.

Birthplace City or Town New Westminster B.C. County

Apparent age 17 3/4

Trade or occupation Book-keeper

Height 5 Feet 10 3/4 Inches.

Weight 150 Lbs.

Chest measurement Minimum 35 inches. Maximum expansion 38 inches.

Physical development Average

Small-Pox Marks

Vaccination Marks Arm Right. Left. L Number 3

When Vaccinated last as a child

(a) Marks indicating congenital peculiarities or previous disease Birth mark on right side

(b) Slight defects but not sufficient to cause rejection

Date	Fit or Unfit	Examined for Re-engagement,
		8 OCT 1917 M.O.
29/5/18	fit	Passed in category to A1 M.O.
		R. Bryan Capt CAMC M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date	Result	Vaccinations.
13/5/16	—	G H Meanwell M.O.
11/7/16	+	G H Meanwell M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
22/7/16		G H Meanwell M.O.
31/7/16		M.O.
16/8/16		M.O.
21.7.18		JMB.

Enlisted on 13th day of December 1915 at New Westminster B.C.

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	131st Batt. C.E.F.	790075	Good	DEC 13 1915
Transferred to	47th. Bn			
	29, BN O/S			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
NEW WESTMINSTER, B.C. NEW WESTMINSTER, B.C.	JUN 1 - 1916		PASSED BY BOARD Fit G B Meanwell Capt CAMC A E Christie Capt CAMC
VERNON, B. C.	OCT 5 1916		Fit M J Wagner Capt CAMC A. E. Christie Capt CAMC Category B II
H 4 Gen. Gen. Hosp Bramshott	Feb 6th 1918	G.S.W. left chest with. Defective vision.	Robert J Armour Capt
	15/4/19	Def Vision	B.T. Howell Lieut & Capt

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.

150M.—8-15.
H. Q. 1772-39-439.

Surname Samson Christian Name Williams Scott

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.
Vernon, B.C.	June 21-1916	4	8	1916	17	8	1916	Mumps	14		G H Lauckner
No12 Can.fld. Amb.		22	3	17	23	3	17	Eye trouble	2	Rejoined unit. Duplicate Medical History Sheet	A186-186 (VW)
BRAYLINGWELL WAR HOSPITAL CHICHESTER		3	10	17	24	10	17	Shell wd Left Wrist + chest	22	Wd. Aug 22 1917. Small flesh wd forearm. Wd chest in post axillary line. notes from France state haemothorax - 1900 cc fluid removed from chest. still some dullness & diminished breath sounds.	am Thomas moor c u s c
4th Canadian General Hospital Basingstoke Hants		24	10	17	8	2	18	Do	107	Area of dullness and diminished B.S. unchanged. No rales. General condition improved Eyes-Vision- R 6/60; L 6/6	H Wbaulcyd Capt C A M C

EYE, EAR, NOSE, AND THROAT CLINIC

Witley Camp Surrey

Date....12.....4....1919

Reg.No. 790075 Rank. Pte Name. Gannon W.S.

Unit. 29th Bn

WITHOUT GLASSES.		WITH GLASSES. (as per prescription below.)		
		SPH.	CYL.	AXIS.
Visual acuity.Rt	6/24 with	not improved		
Visual acuity.Lt.	6/6 with			

Category recommended is; B1

~~Glasses not ordered.~~

REMARKS.

Defective vision Rt eye due to Amblyopia since Childhood

CONDITION WAS.....PRESENT PREVIOUS TO ENLISTMENT AND HAS not BEEN CAUSED BY SERVICE.

HAS not BEEN AGGRAVATED BY SERVICE.

J. A. Macneil
Captain C.A.M.C.
Eye and Ear Specialist. Witley Camp
Surrey

Form R. & O. 6745
1338-180M-29/11/18

30

PROCEEDINGS OF A MEDICAL BOARD.

Dated at Basingstoke, Hants. February 6th, 1918 16.

No. 790075 Rank Pte. Name Gamon Wm.

Local Unit ..... Overseas Unit ..... Age .....

Examination held at No.4 Canadian General Hospital

DISABILITY.
Overseas—~~Local~~
(scratch one out)

G.S.W. Left chest & Wrist
Defective vision.

PRESENT CONDITION.

General condition good.
No disability from wounds.
Vision R. - 6/60 not improved by glasses
L. - 6/6

BOARD RECOMMENDS:—

1. Fit for Duty Category "B" Two (2)
2. Fit for duty after ..... weeks' physical training.
3. Fit for Temporary Base Duty ..... weeks.
4. Fit for Permanent Base Duty .....
5. Discharge .....

Signatures:—

Members
Robert G. Armour, Major. President.
H. W. Wookey, Capt., C.A.M.C.
.....

APPROVED

Dated at Basingstoke, Feb. 6th 1918 Robert G. Armour, Major, C.A.M.C.

For A.D.M.S.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at Base Hospital, Rouen, February 4th, 1916.

No. 17/2/2 Rank Pte. Name Gaman No.

Local Unit ..... Overseas Unit ..... Age .....

Examination held at No. 4 General Overseas Hospital

DISABILITY.
Overseas—~~XXXX~~
(scratch one out)

G.S.W. left chest & Wrist
Defective vision.

PRESENT CONDITION.

General condition good.
No disability from wounds.
Vision R. - 6/60 not improved by glasses
L. - 6/6

BOARD RECOMMENDS:—

1. Fit for Duty ..... "B" two (2)
2. Fit for duty after ..... weeks physical training.
3. Fit for Temporary Base Duty ..... weeks
4. Fit for Permanent Base Duty .....
5. Discharge .....

Signatures:—

Lorent ..... Colonel ..... President

Members { H. A. Morkey Capt. C.A.M.C.
.....

APPROVED

Dated at Rouen 1916

For A.D.M.S.

Form R & O 6048
1238-130M-29/11/18

30

PROCEEDINGS OF A MEDICAL BOARD.

Dated at Basingstoke, Hants. February 6th, 1918 1916.

No. 790075 Rank Pte. Name Gamon Wm.

Local Unit B6 Overseas Unit A Age

Examination held at No.4 Canadian General Hospital

DISABILITY.
Overseas ~~Local~~.
(scratch one out)

G.S.W. Left chest & Wrist
Defective vision.

PRESENT CONDITION.

General condition good.
No disability from wounds.
Vision R. - 6/60 not improved by glasses
L. - 6/6

BOARD RECOMMENDS:—

1. Fit for Duty Category "B" Two (2)
2. Fit for duty after ..... weeks' physical training.
3. Fit for Temporary Base Duty ..... weeks.
4. Fit for Permanent Base Duty
5. Discharge

Signatures:—

Members
Robert G. Armour, Major, President.
H. W. Wookey, Capt., C.A.M.C.

APPROVED

Dated at Basingstoke, Feb. 6th 1918 1916.

Robert G. Armour, Major, C.A.M.C.
For A.D.M.S.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at ..... 19.....

No. ..... Rank ..... Name .....

Local Unit ..... Overseas Unit ..... Age .....

Examination held at .....

DISABILITY.
Overseas — Local.
(strike one out)

PRESENT CONDITION

BOARD RECOMMENDS:—

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

Signatures:—

..... President

Members .....

.....

APPROVED

Dated at ..... 19.....

For A.D.M.S.

C.A.D.C. 5000

"M" WING, C.C.C.

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

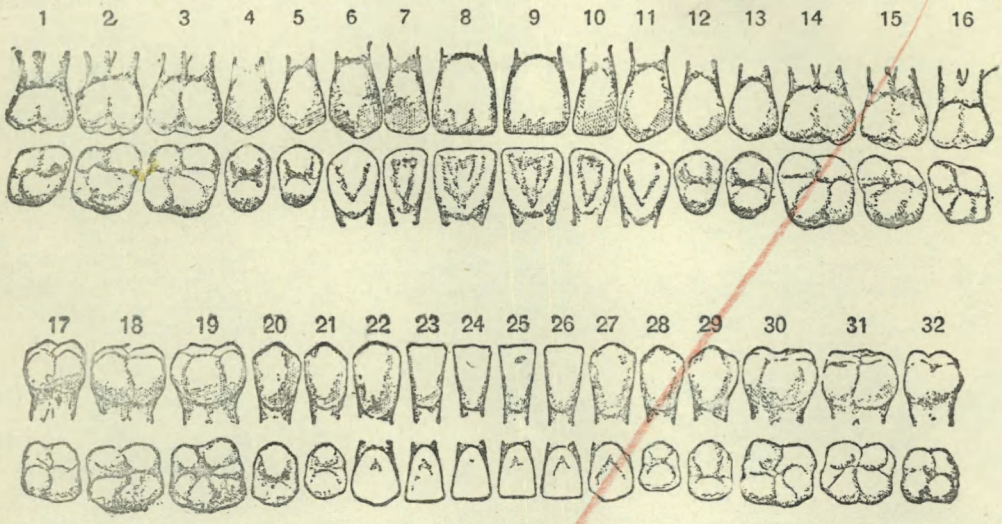
DIRECTIONS TO DENTAL OFFICERS

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) GAMON, W. S.

REGIMENT 29th Battn. RANK Pte. No. 790045

Date of Examination in England 15/4/19. | Date of Examination in France



PRESENT DENTAL REQUIREMENTS

1. FILLINGS 7, 8, 20.21, 30
2. EXTRACTIONS 28. 29
3. CROWNS 19
4. DENTURES
   - (a) Full Upper
   - (b) Part Upper
   - (c) Full Lower
   - (d) Part Lower

Gen

FOR A. D. D. S., M. D. No. 11

HAS HE EVER REFUSED DENTAL TREATMENT? No

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

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

Signature of Dental Officer [illegible]

Forms
I. 1237
12

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
Year		Unit.	Age.	Service.

Station and Date.	Disease
Nov 1/17	~~Tympana~~ cones slightly thickened. V.C slightly congested mobility good - approximation good - but flattening region slightly worse owing to some swelling of walls - No evidence of disease - Hoarseness not adequate due to congestion - element of neurosis (functional) - Treat^t GLC
Nov 20/17	Wounds nearly healed. Chest condition unchanged since previous exam:
Dec. 13	R.V.=6/60. and not improved. L.V.= 6/6. He has a small excavation at right macula upon which is placed some pigment. The clear cut edges of the area would lead me to think that the condition is a coloboma of the macula. No treatment is of any use. Classify B2 in so far as the eyes are concerned. Wm Lowry Maj.
Dec. 18.	General condition much improved.
Jan 10.	Improved. Has no cough. Voice less hoarse. Gaining in weight.
Jan. 28	Area of dullness diminished by one half. No rales. Recommended for discharge in B^II category. H. B. Cowley Capt.

*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.	Regimental No.	Rank.	Surname.	Christian Name.
	790075	Pte.	Gamon	William

Year	Unit.	Age.	Service.
1917	47th Can.	19	2y 11m

REGISTRAR
No. 4 Canadian General Hospital,
BASINGSTOKE.

Station and Date. 24.10.17.

Disease G.S.W. Chest & L. Wrist

OCCUPATION Bookkeeper

ENLISTED Dec 11. 1915 - at New Westminster B.C. in 131st Bn

ENGLAND Nov 13, 1916 -

FRANCE Nov. 27, 1916 47 Bn.

WOUNDED ~~Aug 5th 1917, Lens; slightly - shrapnel~~
Aug 22, 1917; Lens. - shrapnel

HOSPITALS.

Aug 24 To #13 F.A.

Aug. 24 To #6 C.C.S

Aug 25. To St John Amb. Brigade Hospital (Etaples)

Oct 3 To Graylingwell Hospital (Chichester)

Oct 24. To #4 Can Gen Hosp.

OPERATIONS

None. Was aspirated three times at Etaples; 1900 ccs of fluid - black, was told it contained blood.

REMARKS Patient states that he is improving steadily. Has been up only 9 days.

Coughed blood for first two days

Aphonia at first with gradual but not complete recovery.

PRESENT CONDITION.

Small healed circular wound, 2 cm in diameter over 6th left interspace in posterior axillary line. Left chest rachitic, markedly

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

Station and Date.

flattened below nipple and bulging in axilla, the apex of which is very narrowed. Patient states this has been since childhood. Expansion diminished on left side. Resonance impaired in axilla over lower lobe anteriorly and to level of 8 dorsal posteriorly. Fremitus diminished over same area. Breath sounds more distant, and a low leathery sound just below scapula pleural rub. Vocal resonance diminished.

Has no cough. Wound not painful. Voice very hoarse.

Heart - not enlarged, sounds clear. Color cyanotic dusky. Shortness of breath & dyspnoea on exertion.

Sleeps well, good appetite, is improving.

J. P. Boardley Capt.

30/x/17 Condn very poor. Pale. very short of breath on exertion. Respn not hurried when he is at rest.

Pulse low tension. very tense at left wrist, feeble at right.

Chest. Left side flat. movement much lessened. Right. moves well.

Left post. note good to 3rd space, below that + dull: B.S. almost absent: V.F. less V.S. not much changed. Signed H. C. Powell Maj

back the same.

Chart - herewith.

Voice very hoarse. To See Major Royce

H. Sounds dbs

Hastings Park,
Vancouver, B.C.,
MAY 24 1919 1919.

This is to certify that the physical condition of the within named man has not changed since date of Overseas Board herewith attached.

Capt., C.A.M.C.

A-T.S.

Prophylactic **NO**
with E.F. **YES**

DATE .....

Date 2-9-19 Units 1500

Date 7-10-19 Units 500

Date.....Units.....

Date.....Units.....

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 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, hospital 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, Surrey DATE 15-4-19.

1. 1 (a) Unit 29th Battn. (b) Regimental No. 790075 (c) Rank Private

(d) Surname Gamon. (e) Christian name William S.

(f) Home address 237 East H. New Westminster, B.C.

(g) Next of Kin Mr. Gamon. (h) Relationship Father

(i) Address of Next of Kin Same as above.

2. Age last birthday 21 Date of birth March 1st 1898

3. Enlistment, or Appointment (if an Officer) (a) Place New Westminster (b) Date Dec. 14th 1915

4. Personal description:

(a) Height 5-11¾ (b) Weight 164 (Est.) (stripped) (c) Complexion Dark

(d) Colour of hair Black (e) Colour of eyes Blue Grey (f) Identification marks, Scars, etc. Small oval scar l. forearm and small round scar left lateral chest.

5. Former trade or occupation Farmer.

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
	3	118

	Periods	
	From	To
Canada	Dec 14th 1915	Nov. 1st 1916
England	Nov. 11th 1916	Nov 26th 1916
France or other theatres of War	Nov 27th 1916	April 11th 1919.

7. Original disease, or injury Amblyopia.

(a) Date of origin Childhood. (b) Place of origin Canada

(c) Cause Unknown.

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.)

(Amblyopia, right eye.) Slight degree defective vision.

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.)

Objective Symptoms. Eye Report (Witley) 12-4-19. (Signed) Capt. MacNe
States;+ C.A.M.C.
R.V. 6/12; not imrpoved with glasses; L.V. 6/6. Defective Vision due to amblyopia right eye since childhood. Condition was present prior to enlistment and is not due to nor aggravated by service. Cat. B 1.
Subjective Symptoms. Poor vision.

Urine Normal.

(*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*).)

States that he first knew he had defective vision when nine years of age.

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*).)

~~(Amblyopia xx right xx eye) xxx Slight xx degree xx defective vision.~~
States grippe when 11 years old. M.H.S. states mumps 4-8-16 to 23-8-16.
M.H.S. states Eye trouble 22-3-17 to 23-3-17. Shell wound l. wrist
and chest 3-10-17 to 8-2-18. A.F.B. 103 Wound head 7-5-17.

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

~~Nil~~ See 4 7.

11.—(*a*) Did the disabling condition have its origin before enlistment? Yes

(*b*) If so, has it been aggravated by Service? (If aggravated, give a description, as far as it is possible to do so, of the disabling condition at time of enlistment.)

No

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

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.)

Nil

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)

N.A.

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

17. Recommendations

A. Archibald. Capt. C.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 W.S. Gamon. 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 nothing.

W.S. Gamon. Private. Rank.
Signature of invalid examined.

OPINION OF THE MEDICAL BOARD

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

Yes.

19. Is the invalid fit for

(*a*) General service,	(Category A)	(~~Yes or No.~~)	
(*b*) Service abroad, not general service,	(" B)	(~~Yes or No.~~)	Yes B 1.
(*c*) Home service (Canada only),	(" C)	(~~Yes or No.~~)	
(*d*) Temporarily unfit.	(" D)	(~~Yes or No.~~)	
(*e*) Unfit for service in Categories A, B and C	(" E)	(~~Yes or No.~~)	

20. It is certified that the invalid

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

(*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 R.T.U. Authority A.G. Tel. 9083 of 11-11-18.

Before signing the President of the Medical Board will read the statement signed by the invalid and differing opinions regarding Sections 7, 8, 9 and 10, as recorded in Section 18, to the invalid and if no change is indicated, will initial the statement. If, as a result of differing opinions regarding Sections 7, 8, 9 and 10 only, recorded in Section 18, the invalid is dissatisfied with the statement previously made, remarks of the Medical Board will be added here.

J.M.F. Malone. Capt. C.A.M.C. *President.*

PLACE Witley Camp. Surrey.

DATE 15-4-19.

Horace McIntyre. Capt. C.A.M.C. } 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

Assistant Director of Medical Services.

DATE

APPROVED BY

Director-General of Medical Services.

DATE

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

G

735

Date of Assignment Nov. 1-1916.

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

15			

7798 B.

PARTICULARS OF SEPARATION ALLOWANCE

No. (~~790975~~) ~~790075~~ 790975.

Rank pte. Promoted Reverted Discharge

Soldier's Name W. L. Garnon

Battalion 131 Westminster, Battn. "A" Co.

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name Mrs. Florence Garnon.

Address 237-8th. Street, (Eighth)

Change of Address New. Westminster B.C.

1

2

3

4

Date 1917.	Cheque No.	Amount S/A	Amount A/P	Total	
Dec 31			210	210	
Jany	C 64938		15	15	G
Feb	S 98487		15	15	
March	A 138288		15	15	
April	J 15463		15	15	
May	S 14608		15	15	
June	M 25019		15	15	
July	M 32412		15	15	
Aug	M 40509		15	15	
Sept	T 43272		15	15	
Oct	M 51260		15	15	
Nov.	M 59738		15	15	
Dec	V 68685		15	15	
Jan 19	T 70809		15	15	
Feb.	Y 74888		15	15	B.
MAR	K 87410		15	15	
apr	2 1699		15	15	2
May	K 7665		15	15	

REMARKS 6634. J. 3.

Mlo. 110318 recd 23 5 19

A/c Closed 31. 5. 19

Ret'd per

Date 16 5 19 M.F.W. 18 23 5 19

Clerk

AUDITED

M. F. W. 128
400M.—6-17—172-39-1141
L. L. 22320—M. & D. 7498.

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—1772-39-1141
L. L. 22320—M. & D. 7633.

OLYMPIC 16-5-19.

AUDITOR	PAYMASTER

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

M. OR S. S.

REGT. No. 790075 RANK Pte NAME (IN FULL) GAMON W.S. (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? no. DATE EFFECTIVE

TO WHOM PAID RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY
English St Cahy.	30-4-19	

ORIGINAL UNIT C.E.F. BCR. IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY $ 15.00 DATE EFFECTIVE Closed 1-6-19.

PAYABLE TO RELATIONSHIP

ADDRESS

ANY CHANGE IN ASSIGNEE OR ADDRESS
237- 8th Street
New Westminster B.C.

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE EFFECTIVE

DISCHARGED PLACE MD XI DATE 24-5-19. REASON AUTHORITY IF ENTITLED TO POST DISCHARGE PAY

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	C.	$	C.	TOTAL CREDITS $	C.	ACQUITTANCE ROLLS COL. NO. 1 / COL. NO. 2 / COL. NO. 3 (NO. / DATE)	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.	$	C.	TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	BALANCE CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT 30-4-19							4	94	4	94																				4	94	other Credits 35.00 clothing allowance
30-5-19	30	1.10	33	00	35	00			68	00	Board & Train Cheque	4	87	5	00	108	34	MAY. 15	00							133	21	60	27			other charges 6.60 adj 6 dys Pay overpaid
											M. Wing CCC	9	73													9	73	70	00.			
																						6	60			6	60	76	60	Cwh		
183 days	420								420	00												76	60			76	60	343	40			
											June 808997					63	40									63	40	280	00			
											July 24 827097					70	.	3rd								70		210	-			
											Aug 24 1148772					70	-	4								70		140	-			
											Sept 24 1568935					70	.	5								70		70				
											Oct 24 1579906					70	.	7								70		—				
									420																	420	-					

Certified that all payments have been made on this account for which covering authority has been received to date.
Lieut., Paymaster, Demobilization Pay M.D. No. 11

War Service Gratuity
Service 3 years ...... months

I certify that all payments of War Service Gratuity have been made on this account according to the period of Service shown on the M.F.W. 2595 received.
Officer i/c War Service Gratuity M.D. No. 11

H.D. Patterson

200M-3-19.—L. L. 58788-11. & D. 9985.
M. F. W. 2596.
1772-39-1390.