

78TH DEPOT BATTERY, C.E.F.
ATTESTATION PAPER.

Original
 No. *1251083*

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.
 (ANSWERS.)

1. What is your surname? *Morrison*
- 1a. What are your Christian names? *Guy*
- 1b. What is your present address? *Leithbridge + 505112 St Idaho St Butte Mont.*
2. In what Town, Township or Parish, and in what Country were you born? *Antigonish N.S.*
3. What is the name of your next-of-kin? *Annie McFinty*
4. What is the address of your next-of-kin? *1012 26th Ave North Seattle*
- 4a. What is the relationship of your next-of-kin? *Mother*
5. What is the date of your birth? *22 Oct 1890*
6. What is your Trade or Calling? *Railway - Harst Engineer*
7. Are you married? *No*
8. Are you willing to be vaccinated or re-vaccinated and inoculated? *Yes*
9. Do you now belong to the Active Militia? *No*
10. Have you ever served in any Military Force? *18th Field Batt Antigonish (militia)*
If so, state particulars of former Service.
11. Do you understand the nature and terms of your engagement? *Yes*
12. Are you willing to be attested to serve in the } *Yes*
 CANADIAN OVER-SEAS EXPEDITIONARY FORCE? }

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *Guy Morrison*, 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.

..... *Guy Morrison* (Signature of Recruit)
 Date *9 Oct* 1916, *W. P. Lundell* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Guy Morrison*, 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.

..... *Guy Morrison* (Signature of Recruit)
 Date *9 Oct* 1916, *W. P. Lundell* (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 *Leithbridge* this *7th* day of *October* 1916
 *W. P. Lundell* (Signature of Justice)

*Noted 22-3-17
 S.P.*

Description of Morrison, Guy on Enlistment.

Apparent Age... 26 years months.
 (To be determined according to the instructions given in the Regulations for Army Medical Services.)

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

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

Height 5 ft. 5 ins.

Tattoo left arm S.M.

Chest measurement { Girth when fully expanded 36 ins.
 Range of expansion 38 ins.

Complexion Ruddy

Eyes Brown

Hair Dark

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

CERTIFICATE OF MEDICAL EXAMINATION.

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

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

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

Date Oct 7 1916.

M. Robertson

Place Waltham

Capt. 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.

Guy Morrison

..... 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.

M. Robertson (Signature of Officer)

Date Oct 14 1916

78th Depot Battery, C.E.F.

ATTESTATION PAPER.

No. 125/083.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

- 1. What is your surname?..... Morrison,
- 1a. What are your Christian names?..... Guy
- 1b. What is your present address?..... Lethbridge + 50 5 1/2 St. Idaho St.
- 2. In what Town, Township or Parish, and in what Country were you born?..... Antigonish N.S. (Butte Mont.)
- 3. What is the name of your next-of-kin?..... Annie McSinty
- 4. What is the address of your next-of-kin?..... 1012 26th Ave. North Seattle
- 4a. What is the relationship of your next-of-kin?..... Mother.
- 5. What is the date of your birth?..... 22 Oct. 1890.
- 6. What is your Trade or Calling?..... Railway Horse Engineer.
- 7. Are you married?..... no.
- 8. Are you willing to be vaccinated or re-vaccinated and inoculated?..... yes.
- 9. Do you now belong to the Active Militia?..... no.
- 10. Have you ever served in any Military Force?..... 18th Field Batt. Antigonish Militia
- 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.
- 13. Have you ever been discharged from any Branch of His Majesty's Forces as medically unfit? ..
- 14. If so, what was the nature of the disability? ..
- 15. Have you ever offered to serve in any Branch of His Majesty's Forces and been rejected? ..
- 16. If so, what was the reason? ..

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

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

Date 9 Oct 1916. Guy Morrison (Signature of Recruit)
Reb Wendell (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

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

Date 9 Oct 1916. Guy Morrison (Signature of Recruit)
Reb Wendell (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 Lethbridge this 7th day of October 1916
M. Nelson (Signature of Justice)

Description of Morrison, Guy, on Enlistment.

Apparent Age 26 years months.
 (To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 5 ins.

Chest measurement { Girth when fully expanded..... 36 ins.
 Range of expansion..... 38 ins.

Complexion Ruddy.....

Eyes Brown.....

Hair Dark.....

Religious denominations. { Church of England.....
 Presbyterian.....
 Methodist.....
 Baptist or Congregationalist.....
 Roman Catholic..... X
 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).

Tattoo left arm G.M.

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 Oct. 7th 1916 H. B. Thomson

Place Hethbridge Capt. Amc.
 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.

Guy Morrison..... 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.

M. J. Nelson Lieut. (Signature of Officer)

Date Oct. 14th 1916

- Proceedings of Court of Inquiry or on men reported Missing on Active Service.....
- Attestation Papers.....
- Declaration of change of name.....
- Authority for special enlistments.....
- Documents of re-enlisted men.....
- Regimental Conduct Sheet.....
- Compulsory Stoppages.....
- Casualty Forms.....
- Proceedings on discharge.....
- Corps History Sheet.....
- Date and No. of Deposit Receipt for Purchase Money and Amount.....
- Parchment Certificate.....
- Medical Report for Invalids.....
- Medical History Sheet.....
- Proceedings of Regt. Court Martial.....
- Copies of Convictions by Civil Power.....
- Company Conduct Sheet.....
- Clothing Transfer Certificate.....
- Inventory of Kit.....
- Last Pay Certificate.....

DISCHARGE DOCUMENTS

R. O. No.....
H. Q. No.....



Name Morrison, Guy
 Regt. No. 125108th Rank Gnr.
 Corps 48th Depot Bty.

Medically Unfit

[Handwritten signature]

34145



index

[Handwritten signature]

SURNAME.

Mcarrison,

649-m-13629

CARD NO.

✓

CHRISTIAN NAMES

Guy. Gr.

FOLL.

Sos. Dis. 19-2-17 13
P.F.

REGL. NO.

125-1083.

RANK

UNIT

78th Bty.

FORMER CORPS

18th Id. Bn.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

McGinity, Mrs. Annie

RELATIONSHIP TO SOLDIER

Mother.

ADDRESS

*1012 - 26th Ave. North, Seattle,
Wash., U.S.A.*

COUNTRY OF BIRTH

Canada, Antigonish, N.S.

DATE

Oct. 22nd 1890

PLACE OF ATTESTATION

Lethbridge Alta.

DATE

Aug. 7th 1916.

MARRIED

SINGLE *Yes.*

WIDOWER

TRADE OR CALLING

*Railway hoist
engineer.*

RELIGION

Roman Catholic.

DESCRIPTION.

APPARENT AGE

26

YEARS

— MONTHS

HEIGHT

5

FEET

5

INCHES

CHEST MEASUREMENT

36

INCHES

EXPANSION

2.

INCHES

COMPLEXION

Ruddy

EYES

Brown

HAIR

Dark.

DISTINGUISHING MARKS

Tattoo, Left arm

"G. M."

MEDICAL EXAMINATION.

PLACE

Lethbridge, P. Q.

DATE

Oct. 7th 1916.

*Present Address, - 505112 St. Idaho St., Butte, Mont.
U.S.A.*

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

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

Regimental No. 1257083 Rank Quartermaster Name G. Morrison
 Corps 7th Depot Batty who was* Discharged
 On Feb 1917 1917, to _____

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from Feb 1 1917 to Feb 19 1917, the inclusive date of transfer or discharge.

Dr.	\$	c	Cr.	\$	c
Bal. Dr. from prev. month			Bal. Cr. from prev. month		
Advances by Cheques } No. <u>1583</u>	<u>15</u>		Reg'tl Pay <u>19</u> days at \$ <u>1</u> c	<u>19</u>	
Assigned Pay No.			Field Allow. <u>19</u> days at \$ <u>10</u> c	<u>190</u>	
Other Charges* <u>Kit Mortgage</u>		<u>47</u>	Other Allowances*		
Payment on transfer or discharge No. <u>1696</u>	<u>15</u>	<u>43</u>	Other Credits* <u>Clothing</u>	<u>10</u>	
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)		
Total	<u>30</u>	<u>90</u>	Total	<u>30</u>	<u>90</u>

*Give Particulars.

A monthly stoppage of \$ _____ (†) has _____ (‡) been paid on account of Assigned Pay for the month of _____ 1917 to (Assignee) _____
 (Address) _____

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

On Transfer of an Officer.

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

REMARKS:—

State (1) date of enlistment 7-10-16
 (2) if married and if a Separation Allowance Card has been submitted Single
 (3) cause of discharge and authority Medically unfit - goc Feb 16/17

If discharged from the Contingent, state if Stop Payment advice for Assigned Pay has been forwarded, and date _____

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

Date Feb 19 1917

Place Lethbridge _____
Paymaster

N.B.—For purposes of transfer this form is to be made out in quadruplicate. One copy to Paymaster of new unit; one to District Paymaster; one to accompany the pay-list at the end of the month, and; one for retention as a record.

For purposes of discharge it is to be made out in triplicate. One copy to accompany discharge papers; one copy to accompany pay-list at the end of the month, and; one for retention as a record.

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

This certificate is issued to all members of the Canadian Contingent Expeditionary Force...

Name: _____ Rank: _____
Component: _____
Date: _____
These figures are based on the account of the member...

Particulars	Amount
Basic Pay	
Gratuity	
Other Allowances	
Other Credits	
Total	

On Transfer of an Officer...
has been paid by the Army Paymaster...

It is requested that the member...
of the Force...

Date: _____
Signature: _____
Official Seal: _____

MEDICAL HISTORY SHEET

Surname: Morrison Christian Name: Fry

Examined { on 7th day of October, 1916
 at Lethbridge Alberta
 Birthplace { City or Town Antigonish
 County N. S.

Approved by R. B. Robinson
 Rank Capt. RMC M.O.

Apparent age 26
 Trade or occupation Railroading M.O.
 Height 5 feet 5 Inches M.O.
 Weight 145 lbs. M.O.
 Chest measurement { Minimum 36 inches M.O.
 Maximum expansion 2 inches M.O.
 Physical development Good M.O.
 Small-pox Marks None M.O.

Vaccination Marks { Arm Right Left upper
 Number 1
 When Vaccinated last 4 yrs ago Nov. 11 1916 Fyp. R. B. Robinson M.O.
 (a) Marks indicating congenital peculiarities or previous disease None M.O.

(b) Slight defects but not sufficient to cause rejection
None

Date	Result	VACCINATIONS
<u>1916</u>	<u>Typ</u>	<u>T.A.B. R. B. Robinson M.O.</u>
<u>" 16</u>	<u>Typ</u>	<u>T.A.B. R. B. Robinson M.O.</u>
<u>Oct 23</u>	<u>Typ</u>	<u>T.A.B. R. B. Robinson M.O.</u>

Enlisted on 7th day of October, 1916 at Lethbridge Alberta

	CORPS	REG'TL NUMBER	HABITS	DATE
Joined on enlistment	<u>78th Depot Battery</u>	<u>6671251083</u>		<u>October 7th 1916</u>
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD


STATION	DATE	DISEASE	RESULT

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.

This space to be for numbers.

Proceedings on Discharge.

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

No. <i>1251083</i>	
Rank <i>Gunner</i>	
Name <i>Guy Morrison</i> <small>NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.</small>	
Corps (Squadron, Battery or Company) <i>75th Depot Battery CEF</i>	
Date of Discharge <i>19th February 1917</i>	
Place of Discharge <i>Lethbridge Alta.</i>	
1. DESCRIPTION AT THE TIME OF DISCHARGE.	
Age..... <i>27</i> years..... <i>5</i> months.	Descriptive Marks <i>None</i> 
Height..... <i>5</i> feet..... <i>5</i> inches.	
Complexion <i>Ruddy</i>	
Eyes <i>Brown</i>	
Hair <i>Dark</i>	
Trade <i>Railway Hoist Engineer</i>	
Intended place of residence } <i>Lethbridge</i> (To be given as fully as practicable.)	
2. The above-named man is discharged in consequence of <i>being medically unfit "Squint"</i> <i>Authority Col. Selby 16th 1917 Medical Board 13th Feb 1917</i>	
<small>N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.</small>	
To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.	3. Conduct and character while in the service have been, according to the records, etc. <i>Good</i>
	<small>N. B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldier and the Officer Commanding his Squadron, Battery or Company:</small>
	4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.) <i>Railway Hoist Engineer</i>

M. F. B. 218.

50m.—3-16.
H. Q. 1772-39-113.

(OVER)

Noted 22-3-17. g.P.

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

None

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

6. Medals and Decorations.....

None

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

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

(Place) *Lethbridge Alta*

W. Nelson Lewis

(Date) *19th July 1917*

Commanding *78th Depot Battery*

8. Certificate to be signed by the Soldier on Discharge

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

(Place) *Lethbridge Alta* *John Morrison* (Signature of Soldier.)

(Date) *19th July 1917* *John Millhouse* (Signature of Witness.)

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

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

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

..... (Signature of Soldier.)

10. Statement of Service.

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

Total.....years *1^{1/2}*.....days.

11. Confirmation of Discharge.

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

(Place) *Lethbridge Alta*

W. Nelson Lewis

(Date) *19th July 1917*

(Signature)

Reservations referred to at Para. 8.

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

M. L.
2

List of Discharge Documents.

<p>Reg. Conduct Sheet, Militia form B. 263.</p> <p>Squadron } Battery } Conduct Sheet, " B. 263a. Company }</p> <p>Copies of Convictions, by C. P. in MS.</p> <p>Med. Hist. Sheet, Militia Form B. 313</p> <p>Medical Report for Invalid* " B. 227.</p> <p>Statement of Man's Account on Transfer and Last Pay Cer- tificate, " D. 877.</p> <p>*Only if discharged "Medically unfit."</p>	<p>Attestation Paper, Militia Form B. 235.</p> <p>Proceedings on Discharge " B. 218.</p> <hr style="border: 0.5px solid black;"/> <p style="text-align: center;">In the case of recruits who are rejected on final approval, the discharge documents will consist of</p> <p>(a) Proceedings on Discharge.</p> <p>(b) Attestation.</p> <p>(c) Medical History Sheet (in the event of such having been prepared.)</p>
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N. B.—In the case of a man discharged by purchase, the date and number of Deposit Receipt with amount of same is to be noted hereon.

MEDICAL HISTORY OF AN INVALID.

160

1. Station. *Lethbridge* 8. General remarks on his:—
2. Regiment or Corps. *78th Bty.* (a) Conduct. *good*
3. Regimental No. and Rank. *Gunner 1251083* (b) Habits. *good*
4. Name. *Guy Morrison* (c) Temperance. *good*
5. Age last Birthday. *26* (For this purpose the Company defaulter sheets will be obtained from the man's Commanding Officer.)
6. Enlisted on *9th Oct 1916*
- at *Lethbridge*
7. Former Trade or Occupation. *Stationary Engineer* Date. *Feb 16/17*

REPT. OF
MILITIA & DEFENCE
MAR -7 1917
CANADA

9. Service.	Years.	Days.	PERIODS.	
			FROM.	To.
<i>78th Bty.</i>			<i>Oct 9th/16</i>	<i>date</i>

10. (a) Disease or disability. *Squint + old wounds of right ankle*
- (b) Date of origin. *Congenital -*
- (c) Place of origin. *Nova Scotia -*
- (d) Cause. *Congenital*

11. Present Condition. (Most Important). *Squint rendering him unfit for active military service.*
(To include full description of present disabling condition or conditions.)
Scars of severe injury to right ankle which occurred five years ago. Disability - not caused by active service.

12. (a) Is the disability the result of service or climate? *no*
- (b) Has it been aggravated by intemperance, vice or misconduct? *no*

Noted 11-3-17. EP

13. (a) For purpose of Identification. (Here a full description of wounds, scars, deformities, etc., is to be given.)

scars over right ankle
squint.

(b) In case of wounds, or other injuries, state whether sustained on or off duty. If not received in action, was a Court of Inquiry held?

na.

(c) In the event of the disability being attributed to exposure on duty, state clearly the nature of such exposure, and whether it was exceptional or otherwise.

na.

14. Treatment

none

15. If the disabling condition had its origin before enlistment, has it been aggravated by service, and to what extent?

not aggravated
before enlistment

16. What is the probable duration of the disability or of each disabling condition, if more than one contributes?

permanent

17. To what extent will it prevent his earning a full livelihood in the general labour market? Please state in fractions.

none

18. State if for discharge on account of unfitness for Service.

yes

C. B. Bragg
Capt Rambo

Medical Officer by whom the case is brought forward.

OPINION OF THE MEDICAL BOARD.

Does the Board concur with the preceding report? If not, give differing opinion.

10. *yes*

11. *yes*

12. *yes*

15. *yes*

16. *yes*

17. *yes*

18. Is he unfit for Military Service.

yes

Recommendations :

*Board recommend his discharge as physically unfit for active service
No disability as result of service*

Signatures :—

Martin _____ President.
capt Rame

Station. *Luttwig*
Date. *Feb 15/17*

bb brass _____
capt Rame _____
P. L. Connor _____
Capt A.M.C. _____
Members.

Date. **FEB 17 1917**

W. J. Johnson _____
Ass. Director of Medical Services. M. D. 13

Approved.
Date. *12/3/17*

D. B. Neely _____
Director-General of Medical Services. M. D. 13

OPINION OF THE MEDICAL BOARD.

Does the Board concur with the preceding report? If not, give differing opinion.

(At Station or Hospital where finally disposed of.)

Station and Hospital } Arrived from }

Date

If admitted. Index No.	If under treatment.		Disease.	How fully disposed of.	Date of Discharge, &c.
	From	From			
Date					

Summary of Causes of invaliding, or remarks as to remand to Regiment, Station or Depôt.

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.....

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.....

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.....

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.....

.....

.....

Date of final Medical Board or decision. } Administrative Medical Officer.

DETAILED MEDICAL HISTORY OF INVALID.

Militia Form B. 227.
150 m-5-16.
H. Q. 1772-39-117.

Station	
Corps	
Regimental No.	Rank
Name	
Disability	
Date	
Hospital or Station transferred to for final disposal.	
Date of final disposal	
How finally disposed of	

The original Report is invariably to accompany the discharge documents of Invalids.