

# ATTESTATION PAPER

No. H 0079  
Folio.

## CANADIAN OVER-SEAS EXPEDITIONARY FORCE

### QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS)

1. What is your name? ..... *Morrison Peter.*
  2. In what Town, Township, or Parish, and in what Country were you born? ..... *Aberdeen Scot.*
  3. What is the name of your next-of-kin? ..... *Sister Agnes Mackie.*
  4. What is the address of your next-of-kin? ..... *Humboldt Sask.*
  5. What is the date of your birth? ..... *March 4. 1896.*
  6. What is your trade or calling? ..... *Locomotive Fireman*
  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? ..... *no*  
If so, state particulars of former Service.
  11. Do you understand the nature and terms of your engagement? ..... *yes.*
  12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE? ..... *yes.*
- ..... *P Morrison* (Signature of Man.)  
 ..... *J Harley* (Signature of Witness.)

### DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *Peter Morrison*, 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.

..... *P Morrison* (Signature of Recruit.)  
 Date *Dec 29* 191*4* ..... *J Harley* (Signature of Witness.)

### OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Peter 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.

..... *P Morrison* (Signature of Recruit.)  
 Date *Dec 29* 191*4* ..... *J Harley* (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 ..... this ..... day of ..... 191 ..

..... (Signature of Justice.)

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

..... (Approving Officer.)

DESCRIPTION OF Peter Morrison ON ENLISTMENT.

Apparent Age 18 years 9 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. 7 ins.

Chest measurement { Girth when fully expanded 39 ins.  
 Range of expansion 3 ins.

Complexion dark

Eyes grey

Hair black

*Deep Scar on right  
 Shoulder. anterior surface  
 right hip and right ankle*

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

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 29 191 4

Place Humbolt

*Webb*  
 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

Peter 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.

(Signature of Officer.)

Date 191

REGIMENTAL DOCUMENTS

NAME *MORRISON PETER*

REGT. NO. *440079*

UNIT *53<sup>rd</sup> Bn*

H. Q. FILE NO.

*S*

*M*

*H*

CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505  
REFERENCE

NON-EFFECTIVE BY

DEATH

Category

DISCHARGE

Category *Demob*

DESERTION

*34527*

*4*

*41-23*

*26-24*

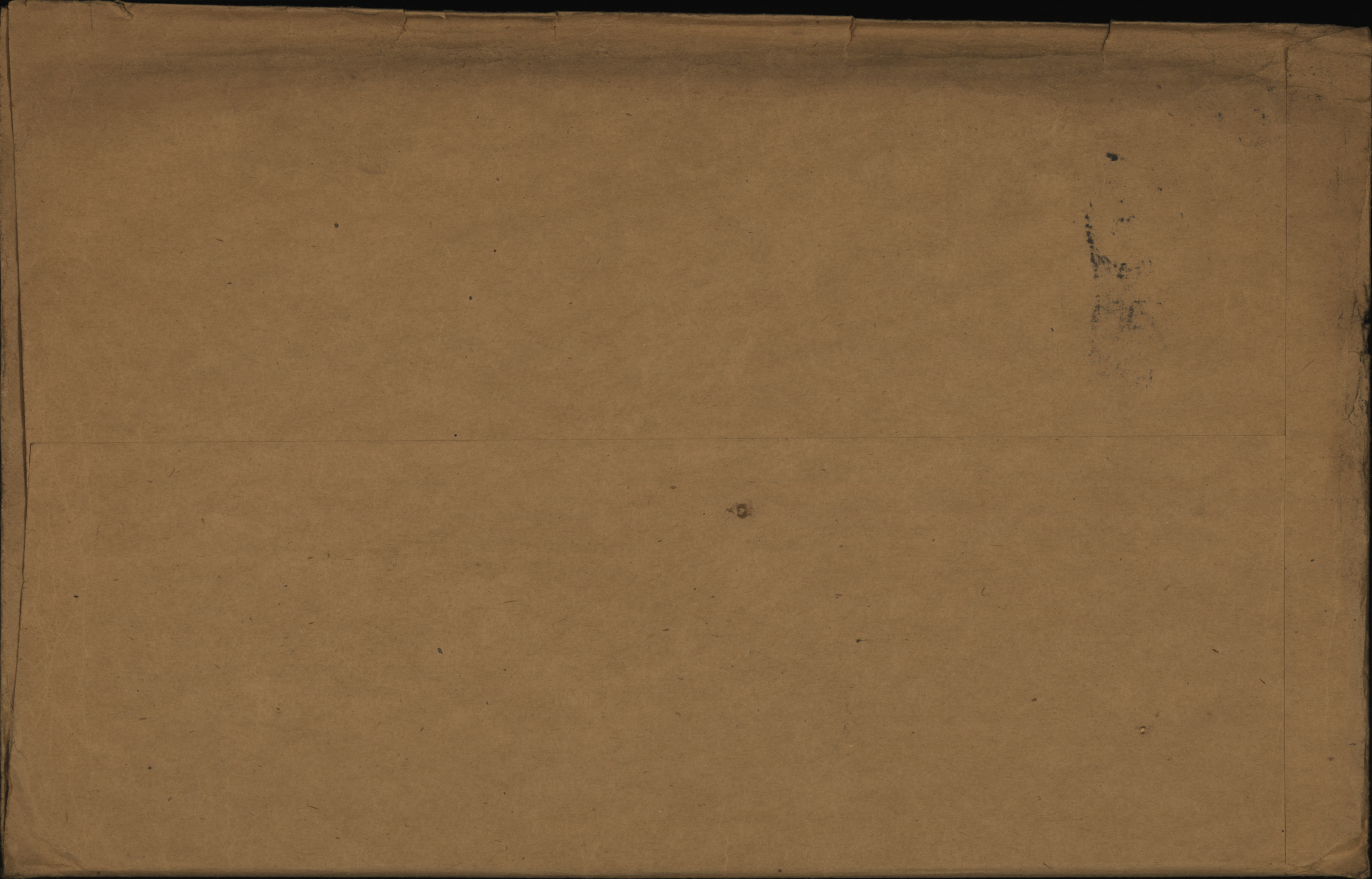
*5-24*

*7*

*H*

- 48* ATTESTATION PAPER (M.F.W. 23, 133, or 51)
- CASUALTY FORM (M.F.W. 54 or A.F.B. 103)
- TRAINING HISTORY SHEET (M.F.W. 113)
- 2x* 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)
- 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)
- DENTAL HISTORY SHEET (M.F.B. 465)
- MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)
- MEDICAL EXAMINATION (M.F.W. 129)
- TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)
- PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)
- DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)
- LAST PAY CERTIFICATE (M.F.W. 44)
- 1* PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)
- PARTICULARS OF CHARACTER (A.F.W. 3226)
- 1* COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)

*4x misc*  
*2x back*  
*128*  
*1 pay card*  
*2 P/409*







NAME Morrison Peter

H. Q. FILE No. 649-*M-4012*

REG'T'L. No. *A40079*

RANK AND CORPS *Pte*

*5<sup>th</sup> Battalion (Form 53<sup>rd</sup> Bn*

CABLE

NATURE OF CASUALTY

NO. DATE

*M 6023 4-5-16*

*Adm. No. 3. Gen. Hosp. Boulogne April 25<sup>th</sup> 1916  
G.S.W. eyes ✓*

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
A 348	No 3 Can. Gen., Boulogne	25-4-16	SW. Eyes
a 355	No 1 Cond. Depot, Boulogne	3-5-16	SW. Eyes
A 357	Disch. to Base Details	7-5-16	SW. Eyes
A 562	No 39 Gen., Havre	20-1-17	N.Y.D. slight &
A 616	Disch. to Reinf. Havre	27-3-17	N. D. S.
A-13	#10. Can. Fld. Amb.	14-9-17.	Sycosis Barbac. <sup>miscell</sup> <sub>aneous</sub> <sup>units.</sup>
a 25	Rep. from Base	21-9-17	Rejoined Unit Sycosis Barbac.



Name Morrison P. Rank Private

Reg. No. A40079

Unit 5th. Battalion

Next of Kin Canada

Date 1916	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
Apr. 25	3rd. Can. Gen. H. Boulogne	SW. Eyes	A348	3/57 1/16	M 6023	
May 3	No. 1 Conv. Depot	do	A355			
May 7	Discharged to Base Details	do	A357			
20-1-17	No. 39 Gen. Hosp. Havre	NYD. Slt.	A562			
27-3-17	Dis. Reinf. Havre.	VDS	A616			







NAME

Morrison P

REGT. No

440079

RANK AND UNIT

Cpl

2d Regt 2d Ab Units Gen Sps

NEXT OF KIN

CABLE

No.

DATE

NATURE OF CASUALTY

LIST No.

HOSPITAL

DATE OF  
ADMISSION

REMARKS

A181  
A18518 Gen Carrier  
discharged

21-11-18

26-11-18

Tonsillitis

"

'

No. A 40079 RANK *Ote*

NAME *Marrison P.*

T. O. S.

UNIT *58<sup>th</sup> Battalion C. I. F.*

M. D. *10*

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1915</i> <i>Apr 1</i>	<i>1915</i> <i>Apr 30</i>	<i>n</i>		
<i>May</i>		<i>v</i>		
<i>June</i>		<i>v</i>		

UNIT SAILED  
MAR 29 1916





NAME

Morrison, Peter

S.O.S. Humboldt Over mp 12  
10-4-19.

RANK & No.

Pte

121100. 10-4-19.  
121100. A40079

CORPS

~~5th. 53rd (1st R.O.)~~ 121100

~~Batt~~

ENLISTMENT, PLACE

Humboldt  
hill

DATE Dec. 29th 1914 S.

FORMER CORPS

COUNTRY OF BIRTH

Scotland, Aberdeen

NEXT OF KIN

Mackie, Agnes (sister)  
' Humboldt, Sask.

ADDRESS OF NEXT OF KIN

DISCHARGE, PLACE

DATE

Sailed from Montreal per S.S.  
"Scandinavian" 17-6-15-

RIC 5-4-19  $\frac{298}{30}$  Cpl

REMARKS:

Taken on strength 5<sup>th</sup>. Batt. 3/8/15. Part II. C. No. 24,  
in the field, 14/8/15.

JCA  
C/M

B

V

P

Number. 440079 . . . Rank. : Corpl.

Surname. . . MORRISON

Christian Name. . . Peter

Units. 5<sup>th</sup> BN Can Inf . . . Theatre of war. France

Date of Service. . . 3/8/15

Remarks. . . Suite B. Tack Apts.  
Bayer St.  
Winnipeg

Latest Address. . . P.O. Humboldt Man.  
Sask.

Roll No. Page 7458

No.

RANK

NAME

T. O. S.

UNIT

M. D.

DEPT. JUN 14 1922  
 REC. NO. 38918

PROMOTIONS, TRANSFERS, DISCHARGES, ETC.

AUTHORITY

PARTICULARS

SIG.  
OR  
REC'T

PAID  
TO

PAID  
FROM

Surname

Christian Name or Name

Reg. No.

Morrison

D.

440079

Rank

Unit

Co.

Troop

Batty.

Pte Cpl 5th Batt. (7 cca imp.) Min Unit  
Hospital Date of Admission

Transferred #3 Can. Gen. Boulogne Hosp. 25.4.16.

#1 Con Depot Boulogne Hosp. 3.5.16

# 39 Gen. Hosp. Havre Hosp. 20.1.17

10. Can. Gen. Hosp. Hosp. 14.9.17

Diagnosis

S.W. Eyes.

(1) Later Diagnosis (if changed)

V.D. 1.

(2)

(3)

Syccosis Barbac.

Additional Diagnoses: If more than one state present

Lousilitis a

DISPOSITION

Dis to Base Details 7.5.16

Dis to Reinf. Havre 27.3.17

CL 4.5.16 A348

.. 12.5.16 A355

.. 15.5.16 A357

.. 27.1.17 A562

3.4.17 A616

.. 21.9.17. A13

5-10-17 A25

29.11.18. A180-2

5-12-18 A185-2

REMARKS

TR. 7. B. Ref. Unit 21-9-17

Dis 26-11-18

A.M.D. 2 DEPT.

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

✓ R

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1. 18 Gen Carriers

21. 11. 18

2.

3.

4.

5.

6.

7.







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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) MORRISON, P.  
REGIMENT S.R.D. RANK CPL No. 440079

Date of Examination in England 21-319 Date of Examination in France

DIRECTIONS TO DENTAL OFFICERS

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



PRESENT DENTAL REQUIREMENTS

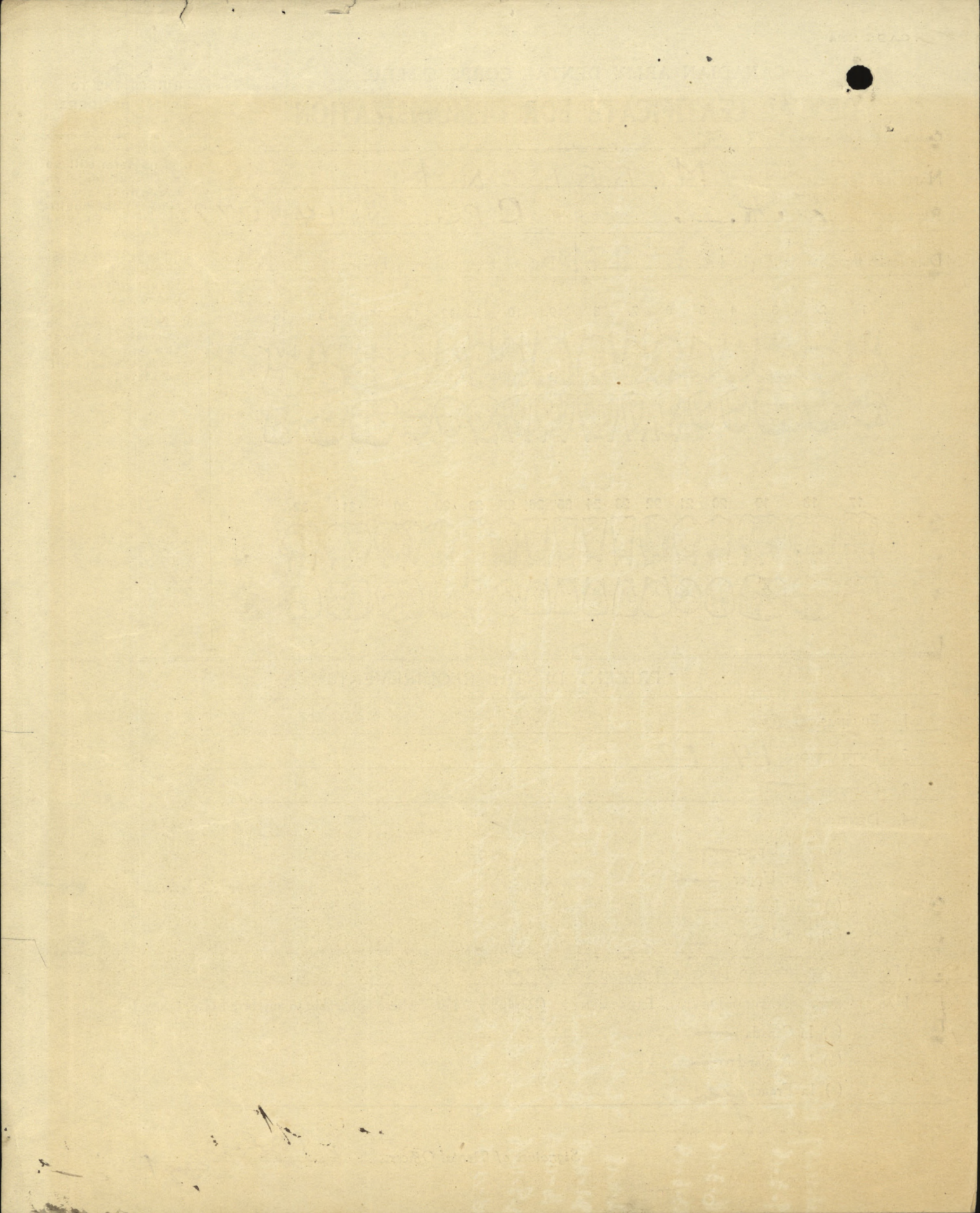
1. FILLINGS 20.
2. EXTRACTIONS 14.19.
3. CROWNS —
4. DENTURES
  - (a) Full Upper —
  - (b) Part Upper —
  - (c) Full Lower —
  - (d) Part Lower —

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 *R. P. ...*



# SERVICE AND CASUALTY FORM (Part I).

Army Form B, 103-I.  
Part I.

(1)*Substantive rank <i>Cap</i> *Acting rank * [To be entered in pencil to facilitate alteration.] (4) Surname <i>Morrison</i> (5) Christian Names <i>Peter</i> (6) Army Form, number of, Attestation } Form or Record of Service paper } (7) Whether of British or of Alien origin [vide A.C.I. 578 of 1918] (8) Date of birth as stated on enlistment <i>4<sup>th</sup> Mch 1896</i> (9) (a)	(2) Regiment or Corps <i>32<sup>nd</sup> Batt</i>	(3) Regtl. No. <i>440079</i>
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(10) Enlistment (b) <i>Summold has 29 Dec/14</i> (12) Service reckons from (date) <i>29 Dec/14</i> (14) Any subsequent variations (if any) } of conditions of service	(11) Engagement (c) (13) Special conditions (if any) of enlistment (d) (Authority) _____ (date) _____	Initials and Rank of an Officer.
--	---	-------------------------------------

(15) Category	Date	Medical Authority	Initials and Rank of an Officer	(16) (Record of Occupation in Civil life (vide Army Order 93 of 1917)
				Industrial Group No. Trade or Calling <i>Locomotive Fireman</i> Married or Single <i>Single</i> Particulars of Trade Test  Occupation Cards despatched on (date) Second Occupation Card despatched on (date)

(17) Next of Kin <i>M<sup>rs</sup> James Mackie</i> (18) Demobilizer (f) _____ (Place) (19) Pivotal-man (f) _____ (Date) (20) Qualifications (g) _____ or (21) Corps trade and rate	(Signature of Posting Officer)
(22) Extended { (24) Miscellaneous entries:—	(23) Re-engaged {

NOTES.—[a] Here enter particulars of any subsequent claim as to actual age after verification by birth certificate [vide A.C.I. 470 of 1918. [b] Whether direct or voluntary enlistment or called up under the Military Service Acts. [c] Whether for specified term of years or for duration of the war. [d] Whether "for Home Service only," or not to be transferred without the soldier's consent, &c. [e] If to be retained on Home Service, period, if specified, to be stated, also authority, and on what grounds. [f] Required for demobilization purposes. [g] Signaller, Shoing-smith, &c.

Army Form B. 103 (II.) to be gummed on here if required.

Nothing to be written in this margin.

W1889—PP 1150 1M 5/18 G.W.P. Co. (3490)

Temporary Taken from Record Sheet

(A) Report		(B)	(C)	(D)	(E)	(F)
Date	From whom received	Authority of Part II. of Orders	Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	Place of casualty	Date of promotion, reduction, reversion, casualty, &c.	Remarks, and initials and rank of an officer

War Service Record

Class "A" No. ....

3.8.15	32 Au	208	Att <sup>d</sup> from 53 <sup>rd</sup> Transf <sup>d</sup> to 5 <sup>th</sup> Bn	France	3.8.15	
14.8.15	5	24	T.O.S. of 5 <sup>th</sup> Bn on arrival from Eng			
7.5.7	5	57	Classified P.B.	Field	12.4.17	
4.9.17	5	105 + 6226 + 1107	Transf to #7 base area temp Co.		22.8.17	
24.12.17	J.C. Area Engrs	18	Permitted left to comd Engr		15.11.17	
18.12.18			6 <sup>th</sup> hand Engrs left to Engrs reported to Gen Dept		13.12.18	
16.12.18	S. Reg Dpt	318	Taken on strength	Bahatt	13.12.18	

Certified true copy, taken from Record Sheet  
of [unclear] for [unclear] 1/0 Records, om. etc

Nothing to be written in this margin.

22.3.19	SRD	66	Do S to In 8.12	Repon	22.3.19	
---------	-----	----	-----------------	-------	---------	--

*R. E. Apperley*

22/3/19  
TAKEN ON STRENGTH Part 11 Ord No: 70.  
EMBARKED FOR CANADA..... 29 MAR 1919

*R. P. [unclear]*

10/4/19 20.S. Special Station  
10/4/17 5.0.S. " " Kimmel Park Camp.

Demobilization

511-1111 M.R 29/19  
ARR HIX APL 5  
J.M.7 \* JARONIA  
capt R.O. 1420.  
D.O. 102-648

O.C. DISPERSAL STATION "P"

# CANADIAN EXPEDITIONARY FORCE

## DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 440079 (Rank) Cpl.

Name (in full) Morrison, Peter enlisted in

the 53<sup>rd</sup> Bn.

CANADIAN EXPEDITIONARY FORCE at Hamboldt on the 29<sup>th</sup>

day of Dec. 19 14

HE served in France.

and is now discharged from the service by reason of Demobilization.  
Medical Unfitness.

THE DESCRIPTION OF THIS SOLDIER on the DATE below is as follows:

Age 23 1/2 yrs.

Height 5ft. 7"

Complexion Dark

Eyes Grey

Hair Black

Marks or Scars

Scars R. shoulder, R. hip  
& R. ankle

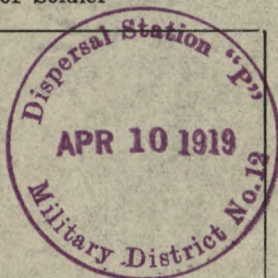
P Morrison

Signature of Soldier

T. J. Dinnie

Issuing Officer

Date of Discharge



Major

Rank

10

March 29<sup>th</sup>

Date 1919

N.B.—As no duplicate of this Certificate will be issued, any person finding same is requested to forward it in an unstamped envelope to the Secretary, Militia Council, Ottawa, Canada.

CANADIAN EXPEDITIONARY FORCE

WAR SERVICE BADGE

ISSUED

CLASS

10.4.19

66630

DISCHARGE

THIS IS TO CERTIFY THAT NO. 66630 (Rank)

Name (in full) \_\_\_\_\_ enlisted in

CANADIAN EXPEDITIONARY FORCE on the \_\_\_\_\_ day of \_\_\_\_\_

HE served in \_\_\_\_\_

and is now discharged from the service by reason of \_\_\_\_\_

THE DESCRIPTION OF HIS DUTY on the DATE below is as follows:

Yes \_\_\_\_\_

Height \_\_\_\_\_

Complexion \_\_\_\_\_

Hair \_\_\_\_\_

Build \_\_\_\_\_

Weight \_\_\_\_\_

Complexion of body \_\_\_\_\_

Issuing Officer \_\_\_\_\_

Rank \_\_\_\_\_

Date \_\_\_\_\_ 19\_\_



14. As an official receipt, this form will be issued only when the same is requested to forward it in an

FORM 100 (REVISED 1918)

Rank

Name **MORRISON Peter**Reg'l No. **A.40079**

R-122.

Unit

**32nd Bn**If in perm. Corps,  
What Unit?Married or Single **Single**

Place and Date of Enlistment

**Humboldt, Sask. 29th Dec 1914**Place of Birth **Aberdeen, Scot.**

Name and Address, Next-of-Kin

**Mrs James Mackie, Humboldt, Sask, Canada.**

Relationship

**Sister**

Assigned Pay Monthly \$

Payable to

Relationship

Separation Allowance \$

Payable to

Relationship

Discharge, Date and Place

Reason

Character

139-108  
N/E. R.B. No. 11039  
File R.L.  
C.R. Card

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				
3.8.15	Ob. 32	attd from 53 <sup>rd</sup> Trans. to 5 <sup>th</sup>	France	3.8.15	Part II 708
14.8.15	5	Taken on str of 5 <sup>th</sup> on arrival from England			At 250. 24
4.5.16.	5 <sup>th</sup> Bn.	N <sup>o</sup> 3 Can. Gen. Hosp.	Boulogne.	25.4.16.	C.L. A348. S.W. Eyes. ON.
12.5.16.	5 <sup>th</sup> Bn.	N <sup>o</sup> 1 Cowal. Depot	do.	3.5.16.	C.L. A355. do.
15.5.16.	5 <sup>th</sup> Bn.	Discharged to Base	Details	7.5.16.	C.L. A357. do
14.7.16.	OC 5 <sup>th</sup> Bn.	"Absent from 19.00 hrs till 10.30 hrs. 27.6.16 without leave" 3 days. F.P. N <sup>o</sup> 2.	Field.	27.6.16.	Part II 28.
27-1-17	do	N <sup>o</sup> 39. Genl Hosp	Home.	20-1-17.	C.L. 562. W.D. (Slt)
3-4-17.	6 <sup>th</sup> 5 <sup>th</sup> Bn.	Discharged to Reinforcements	—	27-3-17.	C.L. 616. V.T.S.
7-5-17.	5 <sup>th</sup> Bn.	Classified "P.B"	Field.	12-4-17.	Part II 57.

Sask

99

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
2-5-17	Can Corps Camp Co.	Classified "P.M." & attached.	Field.	17-4-17	Stn 29, 5 <sup>th</sup> Bn Stn 57 d/7/17
4-9-17	5. Can Hqs	Cease to be attach C.C.C.C and transf'd to J. Can. Area Employ. Co. Y.	PC	22.8.17	5 <sup>th</sup> Can Bn P.A. 1050/49/1 44 <sup>th</sup> A.B. Co P.E. 10. I. /10. 9-14.
20.9.17.	J.C.C.P. Emp.	admi: 10. Can. Field Amb.	" Field.	14.9.17.	C.L.A. 13. Syria Rabat.
4.10.17.	misc.	Repaired Unit (reported from Base)	" "	21.9.17.	C.L.A. 25 "
24. 11. 17	J.C.A.E. Co	Promoted Cpl. to comp. estate.	" "	15. 11. 17	P. 0 18 4 Gen Det 20298 d/16-12-18
18-12-18	J.C.A.E. Coy	Tpl to Eng selected to Gen Dep	Cpl "	13-12-18	006
16.12.18	S.R.D	Taken on Strength	Cpl. Bsholt.	13.12.18	20318
22/3/19	—	S.O.S. to M.D. 12 Rhyd	- Repair	22/3/19.	" 66. 20.70. 24/3/19 17 MDC
29/3/19.	12 M.D.C.	S.O.S. to Canada.		29/3/19	8075
15-7-19	Gen. Delh.	SOS to Canada.	Witley	10-2-19	20154
		To Canada 29.3.19			
			34-P-102-		



# SERVICE AND CASUALTY FORM (Part I).

Army Form B, 103-I.  
Part I.

Army Form B. 103 (II.) to be gummed on here if required.

Nothing to be written in this margin.

W 1859 - P 1130 1M 5/18 G.W.P.C. (3190)

(1)*Substantive rank *Acting rank * [To be entered in pencil to facilitate alteration.] (4) Surname <i>Morrison</i> (5) Christian Names <i>Peter</i> (6) Army Form, number of, Attestation Form or Record of Service paper ) (7) Whether of British or of Alien origin [vide A.C.I. 578 of 1918] (8) Date of birth as stated on enlistment (9) (a)	(2) Regiment or Corps	(3) Regtl. No.  <div style="font-size: 2em; font-family: cursive;">440079</div>
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(10) Enlistment (b)	(11) Engagement (c)
(12) Service reckons from (date)	(13) Special conditions (if any) of enlistment (d)
(14) Any subsequent variations (if any) of conditions of service	Initials and Rank of an Officer.
(Authority)	(date)

(15) Category	Date	Medical Authority	Initials and Rank of an Officer	(16) (Record of Occupation in Civil life (vide Army Order 93 of 1917)
				Industrial Group No. Trade or Calling Married or Single Particulars of Trade Test  Occupation Cards despatched on (date) Second Occupation Card despatched on (date)

(17) Next of Kin,

(18) Demobilizer (f) (Place)

(19) Pivotal-man (f) (Date)

(20) Qualifications (g) or (21) Corps trade and rate

(22) Extended } (23) Re-engaged }

(24) Miscellaneous entries:—

NOTES.—[a] Here enter particulars of any subsequent claim as to actual age after verification by birth certificate [vide A.C.I. 470 of 1918. [b] Whether direct or voluntary enlistment or called up under the Military Service Acts. [c] Whether for specified term of years or for duration of the war. [d] Whether "for Home Service only," or "not to be transferred without the soldier's consent, &c. [e] If to be retained on Home Service, period, if specified, to be stated, also authority, and on what grounds. [f] Required for demobilization purposes. [g] Signaller, Shoemaking, &c.

Morrison Peter

440099. (Copy Original Available)

(A) Report		(B)	(C)	(D)	(E)	(F)
Date.	From whom received	Authority of Part II. of Orders	Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	Place of casualty	Date of promotion, reduction, reversion, casualty, &c.	Remarks, and initials and rank of an officer
			alt from 53 <sup>rd</sup>			
3.8.15.	Op. 32.	-	Transf to 5 <sup>th</sup>	France.	3.8.15.	P <sup>no</sup> 40 208
14.8.15.	5.	-	Tos of 5 <sup>th</sup> on arrival from England.	England.		P <sup>no</sup> 15 600 24
4.5.16.	5 Bn	-	N <sup>o</sup> 3. Can Gen Hospit.	Boulogne.	25.4.16	CLA. 308
12.5.16.	do	✓	N <sup>o</sup> 1. Can Gen Hospit.	do	3.5.16	CLA. 355
15.5.16.	"	✓	Discharged to Base.	Details	7.5.16.	" 359
14.7.16.	op 5 Bn	✓	Absent from 9 P.M. till 10.30 P.M.			
			27.6.16. without leave. 3 days.	FP No 2. Field	27.6.16.	Part II 6 28
27.1.17.	do		N <sup>o</sup> 39 Gen Hospit.	Laure.	20.1.17	CLA. 562.
3.4.17.	62.5 Bn	✓	Discharged to reinforcements		23.3.17	CLA. 616
4.5.17.	5 <sup>th</sup> Bn	✓	Classified P. B.	Field	12.4.17	P <sup>no</sup> 150 57
2.5.17.	62 Coy Supt	-	Classified P. B. & attached	"	17.4.17	P <sup>no</sup> 1039d P <sup>no</sup> 10/59 / 25
4.9.17.	5. Can Bn	✓	Leaves to be att C.C.C. & Transf			47.2.22. P <sup>no</sup> 150 1/10/17.17
		✓	to 7 Can Am Supply Coy.			
4.10.17.	misc	✓	Rejoined Unit rept from Base		21.9.17	CLA. 257
20.9.17.	7. CCA. Inf.	✓	Adm 10. Can fld Adv.		14.9.17	CLA 13
24.12.17.	" "	✓	Promoted Cpl to Complete-Cat		15.11.17	P <sup>no</sup> 150 18
13.12.18.	7.2.2 Coy	✓	Tfd to Emp Posted to Gen Hospit.		13.12.17.	1006.
16.12.18.	S.R. Co	✓	Taken on strength	Bshott	13.12.18	100 318.

Nothing to be written in this margin.

*J. H. Davis*

LIEUT.

FOR LT. COL. I/C RECORDS, C.O.M.F.

Rank

*Pte*

Name

MORRISON Peter

Reg'l No.

A.40079

P-56

Unit

32nd Ba

If in perm. Corps,  
What Unit?

Married or Single

Single

Place and Date of Enlistment

Humboldt, Sask. 29th Dec 1914

Place of Birth

Aberdeen, Scot.

Name and Address, Next-of-Kin

Mrs James Mackie, Humboldt, Sask, Canada.

Relationship

Sister

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							
July,	21	31	1	31	31	10 <sup>c</sup>	3 10		34.10			15 -			32.50	1.60	1st 5th Batt. 21/7/15	
							Diff in Exchange	8				17 50				2.47		
1/8/15	30/8/15	61	1	61	61	10	610		6710			1 23			7 19	62 38		
1/10/15	31/10/15	31	1	31	31	10	310		3410			2 23			5 24	91 24		
1/11/15	30/11/15	30	1	30	30	10	300		33			2 62			5 30	118 94		
1/12/15	31/12/15	31	1	31	31	10	310		3410			2 68			21 00	132 04		
1/1/16	31/1/16	31	1	31	31	10	310		3410			6 98			5 22	160 92		
1/2/16	29/2/16	29	1	29	29	10	290		3190			2 34			5 24	187 58		
1.3	31.3.	31	1	31	31	✓	310		3410			2 61			5 22	216 46		
				275				2750	87303 37							86 91	216 46	







\* Strike out whichever inapplicable.

ASSIGNED PAY.	ENGLAND OR CANADA.	SEPARATION ALLOWANCE.	ENGLAND OR CANADA.
EFFECTIVE DATE:-		EFFECTIVE DATE:-	
AMOUNT:-		AMOUNT:-	
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.	

NAME:- **MORRISON.** Peter.

NUMBER:- **440079.**

PARTICULARS OF RANK OR APPOINTMENT			
AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT	
		<i>corporal.</i>	
UNIT AND TRANSFERS			
ORIGINAL UNIT:- <i>5<sup>th</sup> Bn.</i>			
DATE ACCOUNT FIRST OPENED -			
AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S'F'D	UNIT TRANSFERRED TO
			<i>7<sup>th</sup> Area Empl Co</i>

*L.P.C. Bal 539.14*  
*Ledges Bal 565.90*

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
<del>4/12/18</del>	<del>3474</del>	<del>BRM.G.</del>	<del>200</del>				<del>9.73</del>
<del>13/1/19</del>	<del>4361</del>	<del>"</del>	<del>200</del>				<del>9.73</del>
<del>26/1/19</del>	<del>4712</del>	<del>"</del>	<del>170.00</del>				<del>7.30</del>
			<i>26.76</i>				

DAILY RATES OF PAY AND ALLOWANCES				
AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	<i>1.10</i>	<i>-</i>	<i>10</i>	

PARTICULARS OF RENDERING NON-EFFECTIVE:- *Dis to Canada 1/3/19 MR 2611 Repon 6/2/19 Repon MID# 12.*

MONTH 1918	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
Nov 31	Balance Forward								<i>389.42</i>	<i>405</i>	
Apr.	C.P.	<i>36</i>		A.R. 374. CE & G. 7-4-18.	<i>4.46</i>						
				" 798. do 23-4-18	<i>4.46</i>				<i>416.50</i>	<i>420</i>	
			<i>36</i>		<i>8.92</i>						
May.	C.P.	<i>37.20</i>		A.R. 114. 2 <sup>nd</sup> Inf Wk & Pn 15-5-18	<i>5.35</i>						
				" 222. - do. 21.5.18	<i>5.35</i>				<i>443.00</i>	<i>435</i>	
			<i>37.20</i>		<i>10.70</i>						
June	Spl. P.	<i>36</i>		A.R. 116. HQ det. 7-6-18	<i>3.57</i>						
				" 279. 2 <sup>nd</sup> Inf Wk & Pn 15-6-18	<i>5.35</i>						
				" 299. - do. 30.6.18	<i>6.25</i>				<i>467.40</i>	<i>450</i>	
			<i>36</i>		<i>11.60</i>						
July.	Spl. P.	<i>37.20</i>		A.R. 468. 10 <sup>th</sup> C.S.B. 2-7-18	<i>5.35</i>						
				" 284. 2 <sup>nd</sup> Inf Wk & Pn. 15-7-18	<i>5.35</i>				<i>493.90</i>	<i>465</i>	
			<i>37.20</i>		<i>10.70</i>						
Aug.	Spl. P.	<i>37.20</i>		A.R. 1137. 1 <sup>st</sup> Bde C.A. 2-8-18	<i>3.57</i>						
				" 1100. Trans Coy C.E. 16-8-18	<i>3.57</i>				<i>523.96</i>	<i>480</i>	
			<i>37.20</i>		<i>7.14</i>						
Sept	Spl. Pay	<i>36</i>		A.R. 8486 25/3/18 6 days	<i>5.35</i>						
				A.R. 9287 8/9/18	<i>4.46</i>						
				A.R. 11091 30/9/18 6 days	<i>4.46</i>						
				A.R. 32 16/9/18 7 days	<i>4.46</i>				<i>541.22</i>	<i>495</i>	
			<i>36</i>		<i>18.73</i>						
Oct	C.P.	<i>37.20</i>		4351 7/10 9.	<i>5.60</i>				<i>578.43</i>	<i>471.68</i>	
				1375 29/10 PARIS 45	<i>27.99</i>				<i>572.83</i>		
				179 17/10 7 <sup>th</sup> B.A.E. Coy	<i>4.66</i>				<i>544.84</i>		
				190 26/10	<i>9.33</i>				<i>540.18</i>		
				314 2/11 WARE	<i>23.32</i>				<i>530.85</i>		
			<i>37.20</i>		<i>70.90</i>				<i>507.53</i>		

NUMBER 440079. RANK

One

NAME

Morrison

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
		3720		Baker Tow	7090				50753	47168	
				300 1/11/18 Paris 50	2332					2332	Adm. PARIS
				1685 20/10/18 ✓ 50	2799				45622	44836	
		3720			12221					4867	Adm. 16/12/18
Nov	Left Pay.	36		5025 30/11/18 6/12/18	466				48756	39969	
Dec	✓	3720		61539 18/12/18 Lead Rem	4867						
1919				83429 14/12/18 London	2433				45176	41469	
Jan	✓	3720		6719 10/12/18 6/12/18	466				48430	42969	
		11040			8232						
Feb	Interest on Def. Pay.	3360									
		4800							56590	44469	
				DN 3474 14/12/18 Bickert Reg Group	973						
				4712 26/1/19 ✓	730						
				6260 12/2/19 ✓	73						
				1809 2/3/19 End ✓	1484						
				4361 13/1/19 ✓	973				45130		
		8160			11460						
				2039 Himmel 28/2/19 End	973				4467		
				gross #48. Mah 19.9 advised 7/3/19	370				43787		
					1343						

S.O.S. Van. 29.3.19.  
St. 34. Sect 2



22/3

SHORT FORM.  
PROCEEDINGS ON DISCHARGE.  
(Demobilization.)

29-11

16-6-32 P

War Service Badge  
Class "A" No. 66630

WAR SERVICE BADGE	66630
ISSUED	10-1-19
CLASS	B

1. No. H40049

2. Rank. CPL

3. Name. Morrison. Peter.

4. Unit. 15th Reserve 53rd Reserve Ptn

5. Date of Discharge 10/4/19 Place

6. Reason for Discharge

DEMobilization



7. Authority. R.O. 1420. (200102-B 648)

8. Proposed Residence after Discharge..... Next of Kin..... Sister

Intended Town of Residence..... Humboldt

Occupation..... Loco Engineer

Service in France..... 19

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.?.....

Peter Morrison

Signature of Soldier.

10. CONFIRMATION.  
The discharge of the above named man is hereby confirmed.

Place.....

Date.....



Medical Documents forwarded to S. C. R. or B. P. C. APR 23 1919
--

Signature..... [Signature]

(O. C. Discharging Unit.)

3371

PROCEEDINGS ON DISCHARGE  
(Discharge)

1. No.	
2. Rank	
3. Name	
4. Unit	
5. Branch of Service	
6. Reason for Discharge	
7. Remarks	
8. Date of Discharge	
9. Signature of Discharge Officer	
10. Signature of Recipient	
11. Date	
12. Signature of Approving Officer	

LIST OF DISCHARGE DOCUMENTS.

.....	Attention Paper, Physical	.....	Medical Form W-27
.....	or Particulars of Account	.....	Medical Form W-28
.....	With Contract Sheet	.....	Medical Form W-10 or A.E.B. 102
.....	Casualty Return	.....	Medical Form W-29 or A.E.B. 103
.....	Last Pay Certificate	.....	Medical Form W-44
.....	Certificate that missing documents are unobtainable	.....	.....
.....	Medical History Sheet	.....	Medical Form W-113 or A.E.B. 108
.....	Proceedings of Medical Board	.....	Medical Form W-114 or A.E.B. 109
.....	Medical History Sheet	.....	Medical Form W-115
.....	Medical Report	.....	Medical Form W-116 or A.E.B. 110
.....	Regimental Contract Sheet	.....	Medical Form W-117
.....	Company Contract Sheet	.....	Medical Form W-118

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. 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 (1603)),
9. Copy of Discharge Certificate (M.F.W. 39a). ✓
10. Discharge Certificate (D 3) ✓
11. Equipment Statement Q.M.G. Form (D.O.S. 2). ✓  
 and Clothing.
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..... A.  
 Checked by No. 127  
W. J. J.  
 Date 3-19-

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..... *Ripon Yorks*..... DATE..... *March 12/1919*

1. 1 (a) Unit..... *S.R.A.*..... (b) Regimental No..... *440079*..... (c) Rank..... *Cpl.*

(d) Surname..... *MORRISON*..... (e) Christian name..... *PETER*

(f) Home address..... *Humboldt Sask. Canada*

(g) Next of Kin..... *Mrs. J. Mac Kie*..... (h) Relationship..... *Sister*

(i) Address of Next of Kin..... *Humboldt Sask. Canada*

2. Age last birthday..... *23*..... Date of birth..... *March 4/1896*

3. Enlistment, or Appointment (if an Officer) (a) Place..... *Humboldt Sask.,* (b) Date..... *Dec 29/1914*

4. Personal description:

(a) Height..... *5'4"*..... (b) Weight..... *165 lb* <sup>*wt*</sup> (stripped)..... (c) Complexion..... *dard*

(d) Colour of hair..... *dard*..... (e) Colour of eyes..... *grey*..... (f) Identification marks, Scars, etc..... *Scars*  
*is 3 inches shorter than the left*

5. Former trade or occupation..... *Locomotive Fireman*

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
	<i>Four</i>	<i>73</i>

	PERIODS	
	From	To
Canada.....	<i>Dec 29/1914</i>	<i>May 28/1915</i>
England.....	<i>June 9/1915</i> <i>Dec 16/1918</i>	<i>Aug 2/1915</i> <i>March 17/1919</i>
France or other theatres of War.....	<i>Aug 2/1915</i>	<i>Dec 16/1918</i>

7. Original disease, or injury..... *unknown -*

(a) Date of origin..... *1903*..... (b) Place of origin..... *Scotland*

(c) Cause..... *accident -*

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.)

(Partial loss function R. Arm—)

some weakness. R. arm —

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

Exam shows:- 3 inches of humerus removed R. arm - Two adherent scars R. Shoulder - arm freely movable in all directions, muscles R arm well developed - grip R. hand normal -

Subjective

soldier complains of pains in right shoulder - worse in wet weather. otherwise his arm don't bother him -

(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.....	w	Respiratory System.....	no	Integumentary System.....	w
Disturbances of Mentality.....	no	Digestive System.....	w	Muscular System.....	w.
Osseous and Joint Systems.....	w	Any other general condition.....	w		

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

Soldier states he injured his R. arm when a boy at school - D. Rose - Aberdeen Scotland operated on arm and removed 3 inches of humerus - good recovery. worked as locomotive fireman until enlisting - served 10m years and 73 days. has always done full duty since enlisting - Has had pain in R. arm since being blown up. 9 mes. - 24 April 1916.

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).)

Influenza - Commer. France. Nov 1818 -  
two weeks - good recovery -

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

Small Shrapnel Scar. R. Shin -

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.)

Yes -

Aggravation consist of myalgia pain since being  
buried by shell explosion - April 1916 -

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?

old condition permanent - aggravation 6 months

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)

No.

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

Yes -

17. Recommendations

B.F.

W.H. Willson Capt.

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, Peter Morrison, 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

Peter Morrison Cpl. Rank.  
Signature of invalid examined.

4  
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.) <i>BT</i> |
| (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 return to Canada  
and all telegram 9083811-11-18.*

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.

PLACE **RIPON CAMP, YORKS.**  
DATE **12 MAR 1919**

*W. Wilson Capt* } President.  
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.

PLACE..... } President.  
Members

DATE.....

APPROVED BY *E. Howard*  
Assistant Director of Medical Services.  
CAPTAIN, C.A.M.C.,  
DATE **FOR A.D.M.S. CANADIAN TROOPS,**  
**RIPON CAMP, YORKS.**  
**12 MAR 1919**

APPROVED BY.....  
Director-General of Medical Services.  
DATE.....



**Casualty Form - Active Service.**

Regiment or Corps *5th Canadian Bn*

Rank *Pte* Surname *Morrison* Christian Name *Peter*

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 ..			
<i>25-8-17</i>	<i>CCCCoy</i>	<i>Leaves to be attd to CCCCCoy on transfer to 4 Can area Employment Coy.</i>	<i>23/8/17</i>	<i>B213 Ka 12777</i>	<i>No. 105 d/4.9.17</i>
<i>25-8-17</i>	<i>O.C. 7th Can. (Area) Emp. Co.</i>	<i>Taken on Strength 7th Can. (Area) Employment Coy.</i>	<i>Field</i>	<i>23-8-17</i>	<i>B213 Pt. 11 0 No. 1 d/10-9-17.</i>
<i>1-9-17</i>	<i>do</i>	<i>Granted 10 days leave (Peri) England</i>		<i>22-8-17</i>	<i>Dis 110.2 d/17<sup>2</sup></i>
<i>14-9-17</i>	<i>4 C.A.</i>	<i>P.B. Bartae adn</i>	<i>4 C.A.</i>	<i>14-9-17</i>	<i>a 36 880 3.</i>
<i>14-9-17</i>	<i>do</i>	<i>do do</i>	<i>10 C.A.</i>	<i>14-9-17</i>	<i>do</i>
<i>14-9-17</i>	<i>10 C.A.</i>	<i>Syrosis Bartae adn</i>	<i>10 C.A.</i>	<i>14-9-17</i>	<i>do</i>
<i>8-9-17</i>	<i>Ob. unit</i>	<i>Rejoined from leave Fd.</i>		<i>5-9-17</i>	<i>B213 Pt. 1105 d/29<sup>7</sup></i>
<i>22-9-17</i>	<i>do</i>	<i>Returned from Fd. Duty</i>		<i>21-9-17</i>	<i>B213</i>

(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.

*Sheet II*

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				
24-11-17	Ob. 7th Can. A.C.	Promoted Corporal	Ed.	15-11-17	B213 P 19 d/
9-3-18	7 cables	Granted 14 days LEAVE	Paris	3-3-18	B212 P 19 d/ 21-3-18
		Granted days LEAVE			
16-3-18	7 cables	Returned from LEAVE	Ed	16-3-18	B212
23-6-18	A. S. D.	Classified B2	Field	23-6-18	W3339/583
		multiple S.W. Wounds.			P 10 44 d/ 11-7-18
2-11-18	7 cables	Granted 8 days leave	Paris	27-10-18	B213 P 558 d/ 28-11-18
31-11-18	18 Gen	Inf of Tonsils adv	18 Gen	21-11-18	W7167
16-11-18	7 cables	Returned from leave		9-11-18	B213
28-11-18	18 Gen	Arrived from Unit		27-11-18	W27
13-12-18.	C. & B. D.	Classified B posted.	Can. Gen Depot. Whitley	13-12-18.	W/R. 9.

Canadian Section, G.  
 Lt. for Lt.-Col., A. A. G.  
 H. O. 3rd Echelon; B. E. F.

File M. 556.

Caronia 4/4/19

AUDITOR PAYMASTER

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

REGT. NO. 440049 RANK *1st Lt* NAME (IN FULL) MORRISON, P.

M. OR S.

Form with fields for NEXT OF KIN, ADDRESS, IS SEPARATION ALLOWANCE PAID?, TO WHOM PAID, ADDRESS.

Form with fields for PARTICULARS, EFFECTIVE DATE, AUTHORITY.

Form with fields for ORIGINAL UNIT C.E.F., PLACE OF ATTESTATION, DATE OF ATTESTATION, ASSIGNED PAY \$, PAYABLE TO, ADDRESS, STOP PAYMENT FORM, DISCHARGED, PLACE, DATE, REASON, AUTHORITY, IF ENTITLED TO POST DISCHARGE PAY.

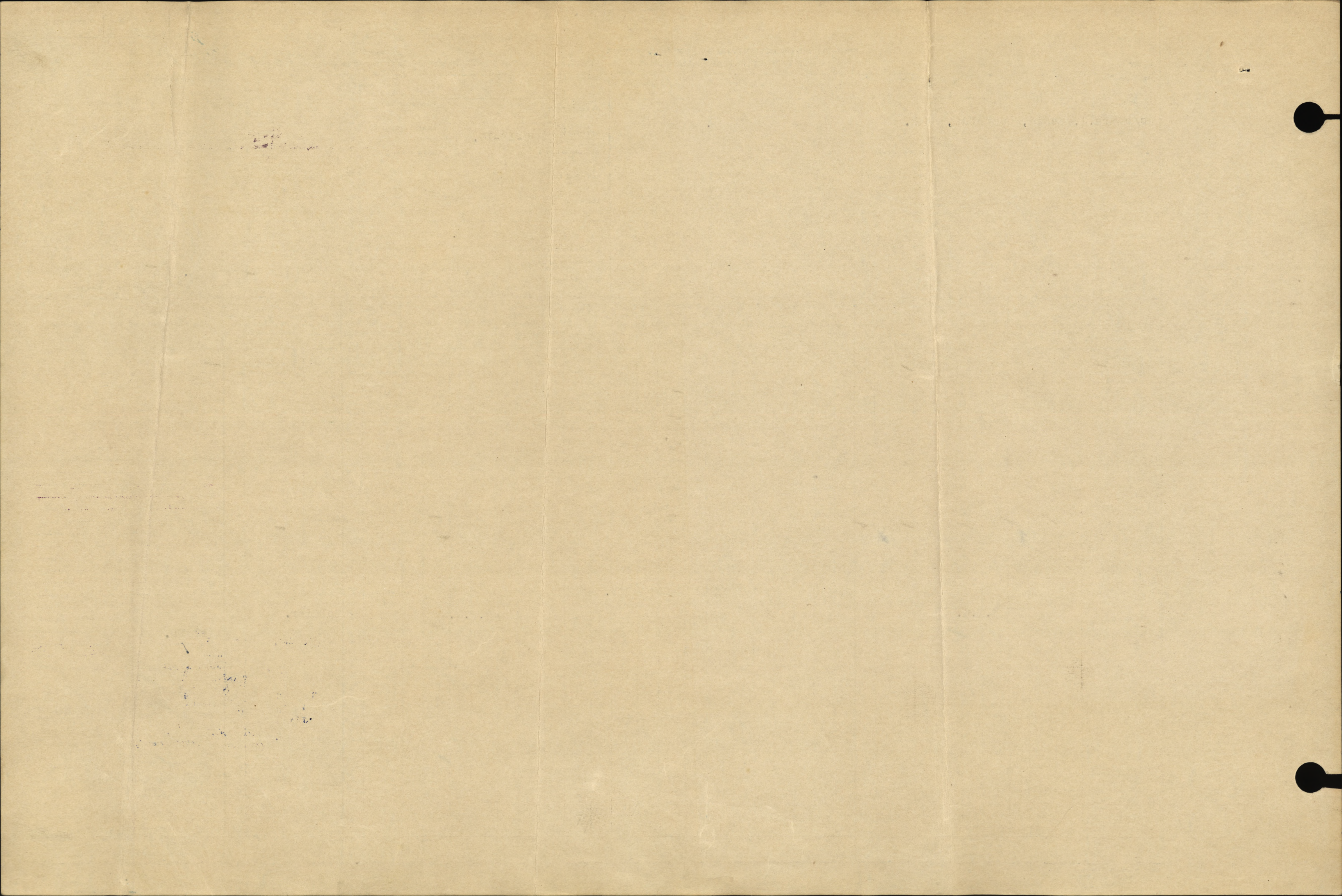
Main accounting table with columns: MONTH, PAY AND F.A., OTHER CREDITS, TOTAL CREDITS, ACQUITTANCE ROLLS, CASH PAYMENTS, ASSIGNED PAY, REGIMENTAL CHARGES, OTHER CHARGES, TOTAL DEBITS, BALANCE (DEBIT/CREDIT), PARTICULARS OR REMARKS.

BALANCE FROM PREVIOUS ACCOUNT

I certify that all payments due on this account have been completed.

Paymaster War Service Gratuity Military District No. 12

GENERAL AUDITOR'S OFFICE AUDITED SEP 17 1919 DISTRICT AUDITOR M.



## Casualty Form—Active Service.

CERTIFIED CORRECT. *GB.*  
 Canadian Record Office,  
 Westminster House,  
 7, Millbank, S.W. 181

Regiment or Corps *3rd Bn Cdn Inf*  
 Regimental No. *40079* Rank *Pte.* Name *Morrison Peter*

Enlisted (*27.12.14*) Terms of Service (a) \_\_\_\_\_ Service reckons from (a) \_\_\_\_\_

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

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

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
<b>JUN 27</b> 1915		<b>Transferred to 32nd Reserve Battalion C.E.F.</b>			
<b>AUG 3</b> 1915		<b>Proceeded on draft to ..... Battalion C.E.F. Lt.-Colonel</b>			
		<b>Comdg. 32nd. Battalion, CANADIAN EXPEDITIONARY FORCE</b>			
		<b>5<sup>TH</sup> CANADIAN INF. BATTALION</b>	<i>Fried</i>	<i>3/8/15</i>	<i>Part 2 orders 14/8/15</i>
<i>25/4/16</i>	<i>3 Can Gen</i>	<i>sw Eyes sct adm.</i>	"	<i>25/4/16</i>	<i>W3034</i>
<i>3/5/16</i>	<i>1 Com Spt</i>	<i>wounded adm</i>	"	<i>3/5/16</i>	<i>W3034</i>
<i>30/4/16</i>	<i>2 csa</i>	<i>shrap wd over b. eyes adm</i>	"	<i>24/4/16</i>	} <i>A36</i> <i>SCS 299</i>
<i>28/4/16</i>	<i>17 CCS</i>	<i>8 sw l eye adm</i>	"	<i>25/4/16</i>	
		<i>To 17 CCS</i>	"	"	} <i>A36</i> " <i>300</i>
		<i>To 24 csa</i>	"	"	
<i>3/5/16</i>	<i>3 Can Gen</i>	<i>sw face conjunctivitis sct To</i>	<i>Com Spt</i>	<i>3/5/16</i>	<i>W3034</i>
<i>7/5/16</i>	<i>1 Com Spt</i>	<i>Fit - To Base Details</i>	<i>Home</i>	<i>7/5/16</i>	<i>W3034</i>
<i>12/5/16</i>	<i>CB Depot</i>	<i>arrived Class A</i>	"	<i>12/5/16</i>	<i>N.R.</i> " <i>304</i>
<i>20/5/16</i>	"	<i>left to join Unit</i>	<i>Field</i>	<i>20/5/16</i>	<i>N.R.</i> " <i>306</i>
<i>27/5/16</i>	<i>OC 5<sup>th</sup> Bn</i>	<i>ret'd to duty</i>	"	<i>22/5/16</i>	<i>B213</i> " <i>314</i>

(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				
29/6/16	OC 5th Bn	Sentenced to 3 days F.P. No 2 for Absent without leave from 9. P.m to 10.30 P.m.	Field	28/6/16	B 2069
2 <sup>nd</sup> Dec 1916	"	Granted 9 days leave to Long		16.11.16	B 213. P.O. 89 dated 13/11/16
21-12-16	"	Sentenced to Forfeit 10 days pay, for, while on Active Service over staying leave from 2.30 am to 9.12.16 to 2.30 am 13.12.16. Forfeits 5 days pay by h.c.		20-12-16	B 2069 P.O. No 7 18/1/17
20.1.17	5th Bn.	To hospital	Field	14.1.17	B 213. P.O. 432 d 26.1.17.
23-1-17	"	Retd from leave	Field	13-1-17	K.P. 169589.
20.1.17	39 Gen.	w.y.d.	adm 39 Gen	20.1.17	W 3034
21-1-17	2.C.S.A.	Ac. Gonorrhoea.	trans } 6.C.C.S.	16-1-17	A 36 O.C.S. 436 d/2-2-17 (6228)
"	"	"	adm }	11-1-17	"
20-1-17	6 C.C.S.	Gonorrhoea	adm 6 C.C.S.	16-1-17	936
"	"	"	To 12 AT	17-1-17	62264 Det 444 d/26-2-17.
27-3-17	39 Gen	Forfeits Fld allowance and is placed under stoppage of pay at the rate of 50 cents per diem whilst in Hospital from 21-1-17 to 27-3-17. 66 days.		27-3-17	O.1643 P.O. No 38 d/2-4-17
27.3-17	OC 39 Gen	V.D.S.	To Remf. Home	27.3.17	W 3034
28.3-17	CB D	Arrived	CB D Class 'a'	28.3.17	NR
22.4.17	Joc. Camps	Attd to an for employment.		17.4.17	B 213. P.O. No 51 7.5.17
12.4.17	CB D	Classified P.B. CB D		17/4/17	NR

CPL

