

ATTESTATION PAPER.

No. 2288497

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?..... *William Haver*
- 1b. What is your present address?..... *Banff, Alta*
2. In what Town, Township or Parish, and in what Country were you born?..... *Mulben, Banffshire, Scotland*
3. What is the name of your next-of-kin?..... *James Morrison*
4. What is the address of your next-of-kin?..... *Mulben P. O. Banffshire, Scotland*
- 4a. What is the relationship of your next-of-kin?..... *Brother*
5. What is the date of your birth?..... *Oct. 12, 1891*
6. What is your Trade or Calling?..... *Fireman*
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?..... *103rd Calgary Rifles, Banff*
10. Have you ever served in any Military Force?..... *17 months*
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*
13. Have you ever been discharged from any Branch of His Majesty's Forces as medically unfit? .. *No*
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?..... *No*
16. If so, what was the reason?..... *-*

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *William Haver 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.

W. Morrison (Signature of Recruit)

Date *May 16* 1917. *W. Morrison* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *William Haver 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.

W. Morrison (Signature of Recruit)

Date *May 16* 1917. *W. Morrison* (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 *CALGARY, ALTA* this *16th* day of *May* 1917

W. Morrison (Signature of Justice)

Description of William Haver Morrison on Enlistment.

Apparent Age 25 years 7 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. 10 ins.

Chest measurement: { Girth when fully expanded 41 ins.
 Range of expansion 3 ins.

Complexion Dark

Eyes Blue

Hair Dark Brown

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

Visor normal

Heard normal

Per. Dr. Blaw & Chambers

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 May 16 1917.

E. A. Dubuc

Place Calgary, Alta.

Cap. Vause

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:—

APPROVED BY MOBILIZATION BOARD
CALGARY, ALTA. MAY 16 1917
Clara A. Staples
 Major C. A. M. C. President.

CERTIFICATE OF OFFICER COMMANDING UNIT.

William Haver 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.

MAY 18 1917

W. J. Summers

(Signature of Officer)

Capt. O.C.

Date.....191 .

FORESTRY COMPANY
SOUTHERN ALBERTA, C. E. F.

REGIMENTAL DOCUMENTS

10-4-19
Sgt

NAME MORRISON, WILLIAM HAVER REG. NO. 2288497 UNIT Fr. Coy H. Q. FILE NO.

58
S

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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)

13-12-1924

M

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

1 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)

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

34769

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

Category *Dismiss*

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

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

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

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

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

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4 DMS, 1394

1 ISC 132

1 MFW 192

1 CADG SW9

1 MFW 2571

1 MFW 67

H

39-24
25-24
4-25

2



SURNAME.

Morrison

CHRISTIAN NAMES

William Haver

REGL. No.

2288497

RANK

Pte.

UNIT

Lancers Coy.

FORMER CORPS

103rd Rifles.

CARD NO.

2

818 Disc 24/3/19
2080/21/3/19.
FOLL
Serial #252.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Morrison, James

RELATIONSHIP TO SOLDIER

Father

ADDRESS

Mulden P.O. Banff. Scot.

COUNTRY OF BIRTH

Scotland Mulden, Banff.

DATE

Oct. 12th 1891

PLACE OF ATTESTATION

Calgary, Alta.

DATE

May 16th 1914

Q/S 25-6-17 $\frac{894}{6}$

P/C. 1-3-19 $\frac{226}{14}$ Sgt.

MARRIED

SINGLE *yes*

WIDOWER

TRADE OR CALLING

Fireman

RELIGION

Presbyterian

DESCRIPTION.

APPARENT AGE

25- YEARS

4 MONTHS

HEIGHT

5- FEET

10 INCHES

CHEST MEASUREMENT

41 INCHES

EXPANSION

3 INCHES

COMPLEXION

Dark

EYES

Blue

HAIR

dk. Brown

DISTINGUISHING MARKS

nil.

MEDICAL EXAMINATION.

PLACE

Calgary Alta.

DATE

May 16th 1914

Present address Banff, Alta.

No. 111

RANK *Pte.*
*Cpl.*NAME *Marrison W*T. O. S. 11-12-15 *DOH 17. UNIT 109th Regt. Calgary Rifles*
of 31-12-15

M. D. 13

PAID FROM	PAID TO	SIG. OR REC'D	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1915- Dec. 11 1916</i>	<i>1915. Dec 31 1916</i>	<i>v</i>	<i>Banff Detachment</i>	
<i>Jan.</i>		<i>v</i>		
<i>Feb</i>		<i>v</i>		
<i>Mar</i>		<i>v</i>	<i>now shown on Intermount Camp</i>	
<i>Apr.</i>		<i>v</i>	<i>Banff Detachment.</i>	
<i>May</i>		<i>v</i>		
<i>June</i>		<i>v</i>		
<i>July</i>		<i>v</i>	<i>Castle Detachment.</i>	
<i>Aug.</i>		<i>v</i>		
<i>Sept.</i>		<i>v</i>		
<i>Oct.</i>		<i>v</i>		
<i>Nov.</i>		<i>v</i>		
<i>Dec.</i>		<i>v</i>	<i>Banff Detachment.</i>	

(over)

1917

1917

Jan
Feb.

✓

✓

Mar.

✓

Prom. Ppl. 1/3/12

(D.O. 33) of 31/3/17

Apr.

May 1 - May 15 ✓

No. 2/75. Discharged 15th/17

No. 111

RANK

Cpl.

NAME

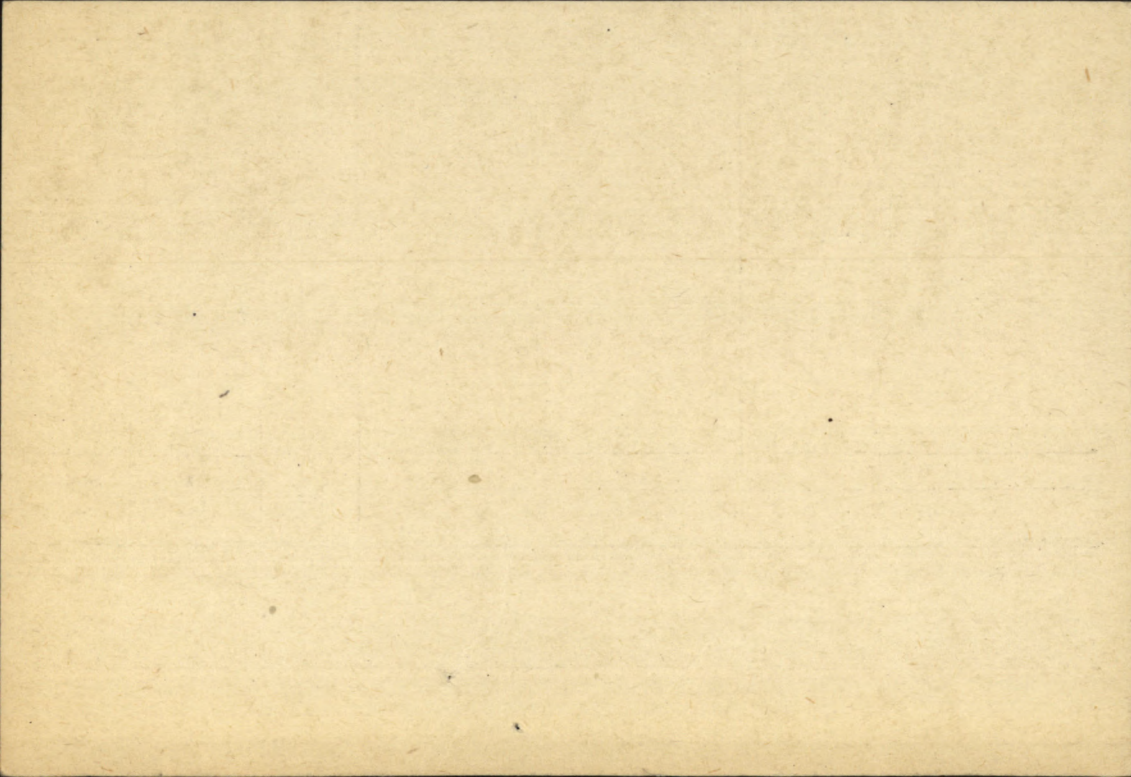
Morrison, W.

T. O. S.

UNIT 103rd. Regt. Calgary Rifles,

M. D. 13

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1917 Apr. 1 May 1	1917 Apr. 30 May 15	✓ ✓	Banff Det. Dischgd. 15-5-17	10.0.75
-acc closed by payment S.				



No. 2288499 RANK

Pte

NAME

Morrison, W. H.

T. O. S. 16-5-17

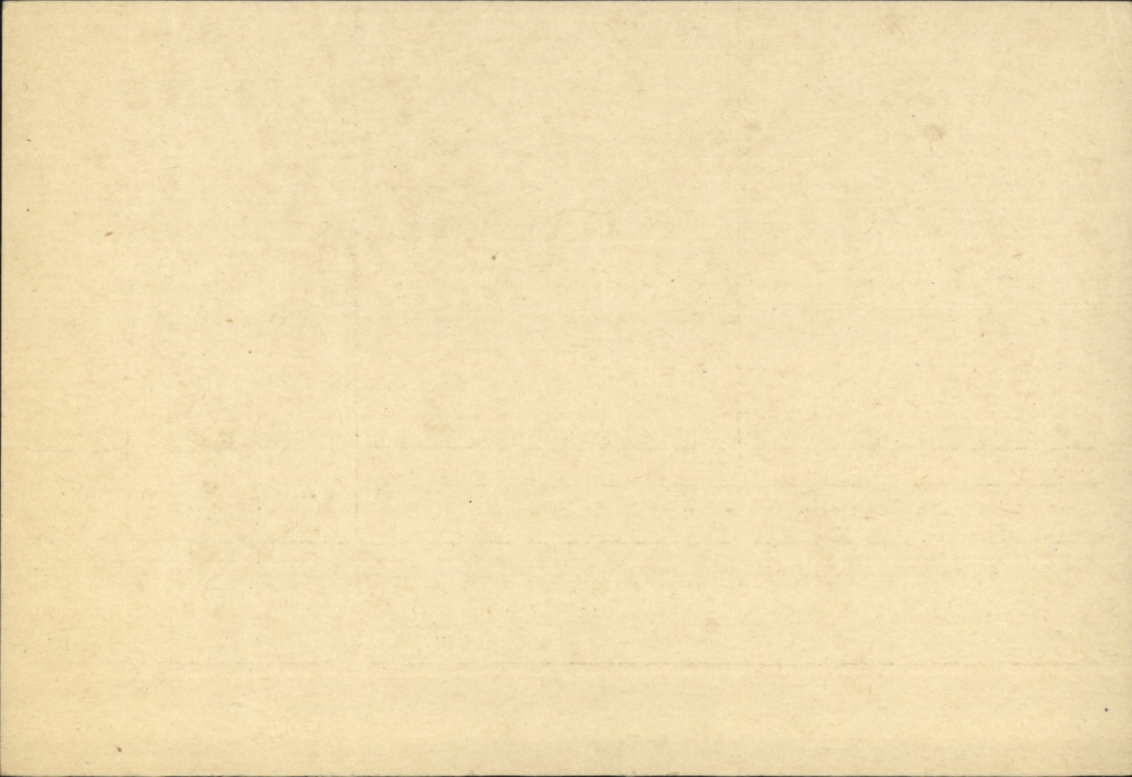
UNIT

Foustry Company South Atla

D. 097 of 16-5-17

M. D. 13

			PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
PAID FROM	PAID TO	SIG. OR REC'T	PARTICULARS	AUTHORITY
1914 May 16	1917 May 31	n		



*Miss
Stam*

B

Number. *2258-497* Rank *sgt.*

Surname. *MORRISON*

Christian Name. *William Haver*

Units. *C. & C.* Theatre of War. *France*

Date of Service. *22-7-17*

Remarks. *40 City Police
Calgary Alberta*

Latest Address. ~~*160 Duke St.*~~

~~*Hamilton Ont.*~~

Roll No. *B. Page 616H.*

No

RANK

NAME

OCT 12 1921

T. O. S.

UNIT

M. D.

PAID

FROM

PAID

TO

SIG.
OR
RECT

PROMOTIONS, TRANSFERS, DISCHARGES, ETC.
PARTICULARS

AUTHORITY

9260486 & 1/2

No.

RANK

Pte,

NAME

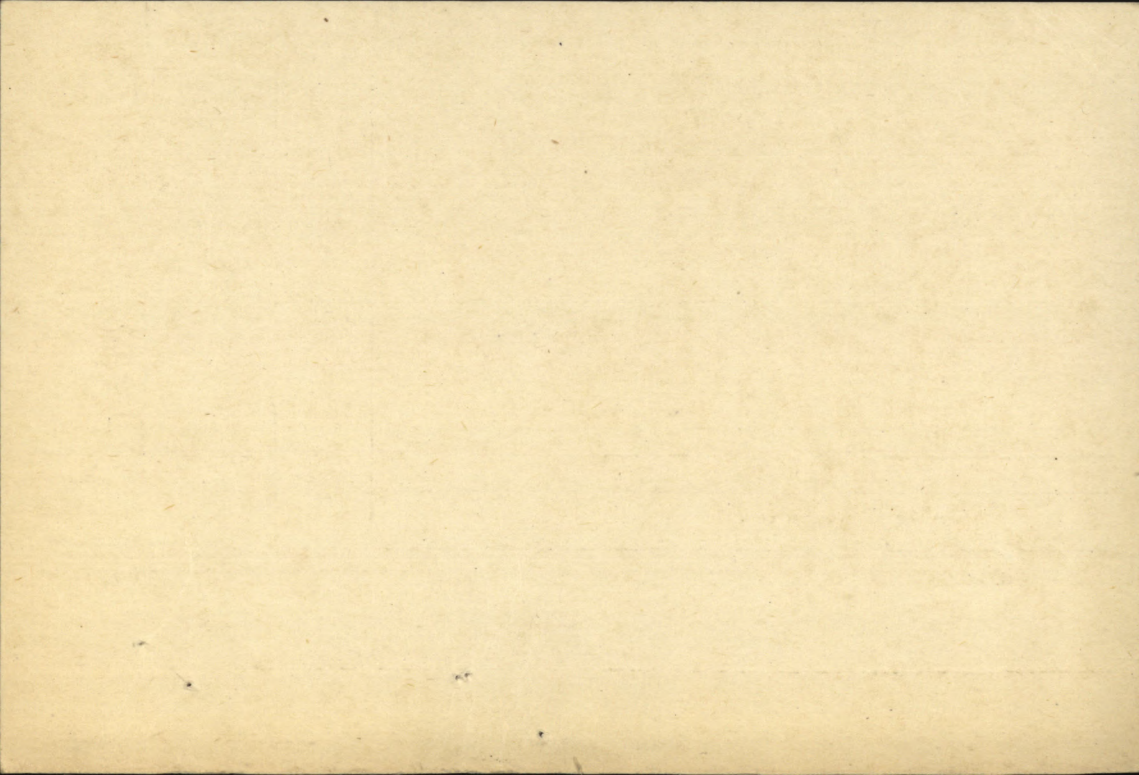
Morrison, Edm,

T. O. S.

UNIT

*103rd. Regt. Calgary Rifles*M. D. *13*

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1917 July</i>	<i>1917 2nd.</i>	<i>✓</i>		



Name MORRISON William Haver Rank Sgt. Regtl. No. 2288497 ES.

Fyle Depot 24-860-482

Original unit C.F.C. Present unit C.F.C. M. or S. M. Age 26 Religion Pres. Ref. H.Q. H.Q.

Port, ship and date of arrival Halifax Belgic 2-3-19

Next of kin Father James Morrison Mulben P.O. Banffshire Scotland.

Address on leave 165 Duke St., Hamilton, Ont.

Address on discharge Same

Transportation issued Yes Date 24-3-19 Character on discharge Calgary Alberta

Previous occupation Fireman Date and place of enlistment Calgary Alta. May 16/17

Diagnosis Category B.II Date of Medical Boards Mar. 20, 1919.

Date.	Remarks	Pt. 2 Order No.
<u>T.O.S.</u>		
<u>23-2-19</u>	<u>Posted to Cas o (Hamilton) 2-3-19</u>	
	<u>Leave & Subs from 6-3-19 to 20-3-19</u>	<u>67</u>
<u>24-3-19</u>	<u>S.O.S. Discharged "Demobilization" entitled to W.S.G.</u>	<u>80</u>

*—Name will be given in full ; surname first.

Date

Remarks

Pt. 2 Order No

M. F. W. 192

150m-5-18

1772-39-1243

U.S. GEOLOGICAL SURVEY

Dept. of Veterans Affairs
DEPARTMENT OF VETERANS AFFAIRS
War Service Medal

MAR 2 1964
Referred to.....
Charged to.....

Ottawa Ont.

Date Feb 28, /64

To ● Copy for H.O. file

Attention of

NAME MORRISON, William H.

SERVICE 2288497 WW1
NUMBER 10569 RCMP

C.P.C. No. 228782
W.V.A. No.

NAVY
ARMY
R.C.A.F.

The DEPARTMENT has received information from

Jull, Dingle & Jull Barristers & Solicitors. February 10, 1964 Calgary, Alberta.

(State authority and source of information of death)

regarding the death of the above mentioned veteran.

Particulars are as follows:

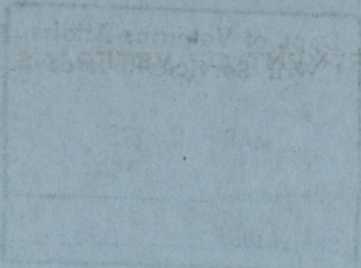
Date of Death Not stated. 1964.
Cause of Death.....
Place of Death Not stated.

Name and Address of next of kin (if known).....

Copies to: W.S.R.
V. I.
~~NAV~~
~~EG~~
H.O.

} Destroy form if advice of death already received.

C.C. Richards
for
Chief, Central Registry



Ottawa Ont.
Feb 22, 1961

Copy for Mr. [Name]



SERVICE NO. [Number]
NUMBER [Number]

NAME [Name]
[Address]

The [Department] has received information from

Mr. [Name] of [Address], [City], [Province], [Country]

regarding the death of the above mentioned veteran

Particulars are as follows:

Date of Death: [Date]
Place of Death: [Location]

Name and Address of next of kin (if known):

Copy to: [Name]
[Address]
[City]
[Province]
[Country]

Sheet 2

Casualty Form—Active Service.

Regiment or Corps.....
 Rank Sgt Surname Mouison Christian Name W. A.
 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..		
<u>11-2-19</u>	<u>B.D.C.F.C.</u>	<u>S.O.S. BASE DEPOT (S.F.C.)</u> <u>on posting to MD 2</u>	<u>SUNNINGDALE</u>	<u>11-2-19</u>	<u>Pl. II D.O. 42</u>
	<u>Com Camp</u>	<u>Rhyl</u>	<u>W. A. Stewart</u>		<u>Lt. Col. D.C. B.D.C.F.C.</u>

(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) Signalos, Sheeving-Smith, & Co. W. 5527—M2093 1600m 7/17 (25686) C. P. & S., Ltd. Forms B.103 E/1555. [P.T.O.]

MEDICAL HISTORY SHEET. 2288497

Surname Morrison Christian Name William Faver

Examined { on 16 day of May 1917
at Calgary Alta.

Approved by Clueda Staples

Birthplace { City or Town Mulben P.O.
County Banffshire Scotland

Rank MAJOR C.A.M.C. M.O.

Apparent age 25 yrs 7 months

Trade or occupation Fireman

Height 5 Feet 10 Inches.

Weight 175 Lbs.

Chest measurement { Minimum 39 inches.

Maximum expansion 3 inches.

Physical development Good

Small-Pox Marks None

Vaccination Marks { Arm Right Left None
Number

When Vaccinated last

(a) Marks indicating congenital peculiarities or previous disease None

(b) Slight defects but not sufficient to cause rejection Vaccines virus

Date.	Fit or Unfit.	EXAMINED FOR RE-ENGAGEMENT.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date.	Result.	VACCINATIONS.
		M.O.
		M.O.
		M.O.

Date.	Result.	ANTI-TYPHOID INOCULATIONS, ETC.
		M.O.
		M.O.
		M.O.

Enlisted on 16th day of May 1917 at Calgary Alta

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>Forestry Co</u> <u>SACEF</u>	<u>2288497</u>		<u>16/5/17</u>
Transferred to	<u>C. F. C.</u>			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>Summitdale</u>	<u>10-7-17</u>	<u>Vaccines Virus</u>	<u>Class B</u>
<u>do</u>	<u>22-1-17</u>	<u>Both legs</u>	<u>R.P. Bosden Capt. C.M.C.</u>
<u>Hamilton</u>	<u>19/3/19.</u>	<u>Vaccines virus</u>	<u>Flouant Capt. C.M.C.</u> <u>Bi. H. M. L. Capt.</u>

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

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.

FORESTRY COMPANY
SOUTHERN ALBERTA. C. E. F.

(1) Name of Overseas Unit which Soldier joins.....

(2) Regimental Number..... 2288497

(3) Full Name of Soldier..... William Haver Morrison.

(4) Place of Birth..... Mulben
~~brumber~~ Scotland

(5) Are you married, or not?..... no

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

(b) Present Postal Address.....

(7) Are you a widower?..... no

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

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

Also their names and ages.....

(9) Is your Father alive? Yes

If so, state name and address James Morrison: Mulben P.O. Boharm. Banphue Scotland

(10) Is your Mother alive? no

If so, state name and address

(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.

no

(15) Are you insured? no

If so, in what Company?

Have you made arrangements for payment of your Insurance premium?

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

Date JUN 11 1917

P. J. B. Thomas
Capt. Officer Commanding.

FORESTRY COMPANY
SOUTHERN ALBERTA

PROCEEDINGS OF A MEDICAL BOARD.

Dated at 10-7-17 1917.

No 1222/147 Rank L Capt Name MORRISON W H

Local Unit SAFC Overseas Unit CFCD Age 27

Examination held at Summingdale Barracks

DISABILITY.
Overseas-Local
(SCRATCH ONE OUT).

Varicose Veins Both legs -
PRESENT CONDITION.

Fairly large varix on inner aspect
of Lft knee - moderate enlargement
both lower legs -

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 weeks
- 5. Discharge

Fit

Signatures :-

Members (..... President.
 (.....
 (E J Moffatt Capt Cante
 (RP Borden Capt Cante

APPROVED

Dated 1917. For A.D.M.S.

PROCEEDINGS OF A MEDICAL BOARD

Dated at 1917.

No. Rank Name

Local Unit Overseas Unit Age

Examination held at

DISABILITY:
Overseas-Local
(SEARCH 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 1917. For A.D.M.S.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

2288497 Srgt.

This is to Certify that No. _____ (Rank) _____

Name (in full) MORRISON, WILLIAM HAYES, enlisted in
Forestry Co., South Alberta,

the _____

CANADIAN EXPEDITIONARY FORCE at Calgary, Alta on the 16th.
May 17.
 day of _____ 1919

HE served in ENGLAND and FRANCE.

and is now discharged from the service by reason of DEMobilIZATION.

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

Age 27 yrs. 5 mos.

Height 5 ft. 10 in.

Complexion Dark

Eyes Blue

Hair Dark Brown.

Marks or Scars _____
Vacc. scar left arm.

William H. Morrison
 Signature of Soldier

Jack Young Lt
 Issuing Officer

Date of Discharge 24th. March 1919

Signed at Hamilton, Ont. this 24th. day of _____ 1919

For _____ Rank
O. C. No. 2 District Depot.
 Appointment
March _____

in Military District No. 2 NO. 2

File Reference No. MAR 241919
DISTRICT DEPOT.

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

Discharge Certificate

No. (Rank) Name

Unit

Address on Discharge

Character and Conduct

Former Occupation

Special Qualifications of Value in Civil Life

Medals and Decorations

Remarks

Signed at this day of 19

Name of Officer

Rank

Appointment

On demobilization the particulars called for on the back of this certificate will not be completed.

Uniform is not to be worn after expiration of one month from date of discharge, except by special permission of G. O. C. District.

ORIGINAL

CANADIAN EXPEDITIONARY FORCE.

M.F.W. 44.
1188 (D.P. 250M-12-18.
1772-89-903.

LAST PAY CERTIFICATE

Regimental No. 2288497 Rank. Sgt Name. Morrison W J
(Surname first)

Unit No. 2 DISTRICT DEPOT who was*

On 191....., to.....
*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from..... to MAR 24 1919 191...
the inclusive date of transfer or discharge.

	Dr.	Cr.
Bal. Dr. or Cr. from prev. month.....		673.66
Regimental Pay..... <u>24</u> days at \$..... <u>1</u> c. <u>50</u>		36
Field Allowance..... days at \$..... c.		35
Separation Allowance.....		70
Clothing Allowance.....		
Post Discharge Pay..... <u>W 29</u>		
*Other Credits		
Advances	1325.31	500
Separation Allowance and Assigned Pay Cheque No.....		
*Other Charges		
Balance on transfer or on discharge, cheque No..... <u>W 3307</u>		314.66
Total		<u>814.66</u> <u>814.66</u>

*Give particulars.

13

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.

Regimental No. 2288497 Rank PLG Name Morrison William H.
C. E. F.

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

Date of promotion to } Date of appointment } Numerical position on }
present rank } to lance rank } 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				
FEB 28 1919	O. S.	T. O. S. No. 2 DISTRICT DEPOT, TORONTO		1919	PART II D. O. 67 <i>Wheuman</i> Lieut. For O. C. No. 2 District Dep.
	24-3-19	S.O.S. (Discharged) No. 2 District Depot Part II, D.O. No. 80			<i>Gas A Young</i> For O. C. No. 2 District Depot.

(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, Shoing Smith, etc., etc., also special qualifications in technical Corps duties.

CR Rank Name MORRISON. William Haver. Reg'l No. 2288497.
 Unit Sthn. Alta. For. Dft. If in perm. Corps, }
 to Base Depot. What Unit? } Married or Single Single.
 Place and Date of Enlistment Calgary, Alta. May 16th, 1917. Place of Birth Banffshire, Scotland.
 Name and Address, Next-of-Kin James Morrison.
 Mulben P.O., Banffshire, Scotland. Relationship Father.

Assigned Pay Monthly \$ Payable to Relationship
 Separation Allowance \$ Payable to Relationship

N/E. R.B. No. 9946
 File R.L.
 Category O.R.C. & A

Discharge, Date and Place Reason Character
 H. W. & V., Ltd., -9546-16.

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
Date.	From whom received.				
ARRIVED IN ENGLAND 5-7-17. S/S JUSTICIA					
6.7.17.	C.F.C II	T O S	SUN DALE	4 7, 17	Pt II, O 60
24-7-17	"	S.O.S. to #56 Coy Arama	Swindale	21-7-17	Pt II #25 Pt II #1, 31-8-17
7-12-18	"	56 Coy Promoted Sgt.	the field	16-11-18	" 55-
		S.O.S to B.N.C.F.C	Sgt		POS from 56 Coy CFC
		14-1-19			15 I 19
		56 Coy CFC			Pt II, O.17 d:17-1-19
11.2.19	B.N. CFC	S.O.S. to 2 M.D.C.C. Phyl	"	Sdale	11.2.19 P. II. O. 42
21.2.19	2 M.D.C.W.	T.O.S from Ban Depot	"	Phyl	11.2.19 " 44.
7.3.19	2 M.D.C.W S.V.I CFC	105 to Canada	"	"	12.2.19 " 56

DATED 15 FEB 1919
 BY THE
 ADJUTANT GENERAL

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

FORESTRY COMPANY
SOUTHERN ALBERTA. C. E. F.

Regimental No. 2288497 Rank Private Name Morrison William Haver

C. E. F.

Enlisted (a) 16/5/17 Terms of Service (a) Can Ex Force Service reckons from (a) 16/5/17

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) Fireman

CERTIFIED CORRECT,
 6-AUG. 1917
 CAN. RECORDS, LONDON

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 HALX 22.6.17 DISEMBARKED L-POOL, 4.7.17			
8-7-17	C.F.C.	T.O.S. Base Depot CFC	Sunningdale	4-7-17	Pt. II. D.O. No. 60 Lt. & A/Adj. C.F.C.
24.4.14	BD. B.F.B.	S. O. S. on posting to 56 Coy, France Loaded.	BASE DEPOT C.F.C, SUNNINGDALE	21.4.14	PT. II. DO. NO. 45 Lt. & A/Adj. C.F.C.
18-8-17	OC 56 Coy	Tech. Pay as Edgerman	Field	22-7-17	B. 213. HIO# 2.
2.2.18	do	Granted 14 days leave to	U.K.	30.1.18	B. 213. HIO# 6 d Feb 1918
25-2-18	do	Required meet	Field	19-2-18	B. 213.
23 1/8	OC	Comm. to	Field	20 1/8	B. 213
23 1/8	OC	Discharged	Field	21 1/8	

(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.

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				
16 th 75	J.B.	Go to draw 2nd Pay as Edgerman #225		15 th 78	B213. P. 56
16 th 75 30.11.18 7-12-18	J.C. OC/56 or	Prom. Sgt admitted to C.D.H. Generalmer. Rejoined from Hospital	76a	16 th 78 26/11/18 3-12-18	B213. P. 56 B213. B213
17-1-19	OC. 4c Records Letters	Transfer Eng & posted C.D.H. Depot. See front. Rejoining date		17-1-19	nr d. 14. 1. 19 P. 2. 2 No.
17-1-19	O.C. C.F.C. T.O.S. Base Depot, C.F.C. Sunningdale from 56 Co. Base	Pt. 11 D.O. Lt. & A/Adj. Esbarles For O.C. Base Depot, Canadian Forestry Corps.		17 th Jan	for Cap Hewett Lieut Cap Adj.

37

MEDICAL EXAMINATION UPON LEAVING THE SERVICE OF OFFICERS AND OTHER RANKS WHO HAVE NO DISABILITY.

Officers and Other Ranks leaving the service for reasons other than medical unfitness are to be reported on this form. Where there is evidence of any undetermined or progressive disability, this form will not be used, but the case will be referred to a Medical Board for completion of M.F.B. 227.

No. 2288497 Rank Sgt 1 Surname MORRISON
(Given name in full)

Unit or Corps No 2 DLI Birthplace Willingham, Essex
Baffshur, Scotland

(Examination of Officer or Other Rank (stripped) to be made by one Medical Officer).

1. GENERAL DESCRIPTION:

Physique good Weight 161 lbs. Height 5 ft. 11 in. Colour of Eyes Blue
Nutrition normal
Pulse 80
Condition of arteries normal
Vision Rt. 20 Left 20
Hearing (conversational voice) Rt. 21 ft.
Left 21 ft.

Identification marks, scars, or deformities.
(Give cause and date of origin).
Two scar marks

Opinion as to general health and physical condition Fit B II

2. Has Officer or Other Rank ever suffered from, or has he now, any affection of the following systems? (Answer "Yes" or "No"). (Subjective evidence may be sufficient in certain cases.)

Nervous System No Genito Urinary System No Cardio-Vascular System Yes
Special Senses No Integumentary System No Respiratory System No
Disturbance of mentality No Muscular System No Digestive System No
Osseous and Joint System No Any other general condition No

3. If the answer to any part of Section 2 above is "Yes," here give full particulars, with cause and date of origin; and also a description of the present condition

Flu in Dec 1918. fully recovered.
Vascular veins of both legs
present prior to enlistment and
not aggravated by service
No hemorrhoids. No hernia, no goiter
No varicocoele. No albumen
No sugar

(If space is insufficient, continue on back of form.)

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at (Overseas)

Date Signed M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature

(If not satisfied, M.F.B. 227 will be completed by Medical Board.)

THIS SECTION FOR USE IN CANADA—

Examined at Hamilton (Canada)

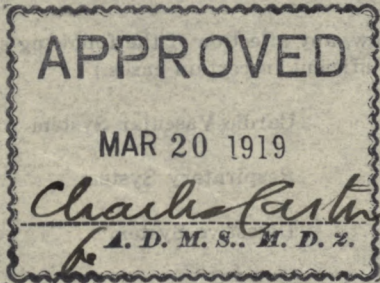
Date 19/3/19 Signed J. L. M. Whaley M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to, or during service.

Signature J. L. M. Whaley

(If not satisfied, M.F.B. 227 will be completed by Medical Board.)

(This space to be used, if necessary, in connection with Section 3, overleaf, only.)



[OVER]

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) MORRISON W. H.
 REGIMENT 6-F. 6. RANK Sgt No. 2288497
 Date of Examination in England 23/1/18. 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 6.
2. EXTRACTIONS None
3. CROWNS None
4. DENTURES
 - (a) Full Upper
 - (b) Part Upper
 - (c) Full Lower
 - (d) Part Lower
 } None

*Certificate Issued.
19/3/19*

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 yes
- (b) In England No
- (c) In France No.

Signature of Dental Officer *Jameson*
Capt CDRC

UNITED STATES DEPARTMENT OF AGRICULTURE
BUREAU OF PLANT INDUSTRY

M. C. RICHMOND
W. H.

W. H. ...

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ASSIGNED PAY	ENGLAND or CANADA.	SEPARATION ALLOWANCE.	ENGLAND or CANADA.	NAME: MORRISON. Wm Jb.			
EFFECTIVE DATE:-		EFFECTIVE DATE:-		NUMBER:- 2288497. 513			
AMOUNT:-		AMOUNT:-		PARTICULARS OF RANK OR APPOINTMENT			
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.			AUTHORITY			
				DATE EFFECTIVE			
				Private. Promoted to Sgt.			
				10/11/18.			
				UNIT AND TRANSFERS			
				ORIGINAL UNIT:- S. Alberta Forestry Draft.			
				DATE ACCOUNT FIRST OPENED:- 17/17.			
				AUTHORITY			
				DATE EFFECTIVE			
				DATE LEDGER SHEET T'S'FO			
				UNIT TRANSFERRED TO			
				G.D.C. France			
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
1919	6484	Edgerman	97.33				
1919	6410		97.33				
			107.06				
DAILY RATES OF PAY AND ALLOWANCES							
AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE			
Edgerman 17/11/18. 5664	2.25	-	-				
Edgerman 15/11/18. 5655	7.00	-	7.00				
Promoted Sgt. 16-11-18.							
Do. 55. 7/1/18. 5664	1.35	-	15				

PARTICULARS OF RENDERING NON-EFFECTIVE:- 1st to base 12/19. h.R. 2441. - date 20/1/19. date. h.R. 2. 411. Edgerman 17/11/18. 5664

MONTH 1918	PARTICULARS	CR 1	CR 2	PARTICULARS	DR 1	DR 2	DR 3	DR 4	BALANCE	DEFERRED	SEPARATION
Feb 21	Forward								360.44	304.25	
April	Edgerman's Pay	67.50		Ab. 54. 15-4-18 #6 Dist.	3.57				419.91	338.	
May	Edgerman's Pay	67.50		" 129. 30-4-18 ✓	4.46						
		69.75		Pl. 178. 27/5/18. ✓	8.93						
				all 239. 17-5-18 ✓	3.57						
		69.75		" 338. 31-5-18 ✓	4.46				432.96	338.	
June	Edgerman's Pay	67.50		" 441. 15-6-18 ✓	5.35						
		69.75		" 537. 30-6-18 ✓	8.92				491.54	371.75	
July	Edgerman's Pay	67.50		" 689. 15-7-18 ✓	3.57						
		69.75		" 841. 31-7-18 ✓	8.35				572.37	405.50	
Aug.	Edgerman's Pay	67.50		Pl. 340. 7-8-18. ✓	8.92						
		69.75		all 956. 15-8-18 ✓	4.46						
				" 1180. 31-8-18 ✓	5.35				564.53	405.50	
Sept	Edgerman's Pay	67.50		" 1391. 17-9-18. ✓	5.35						
		69.75		" 1507. 30-9-18 ✓	8.92				618.65	439.25	
Oct.	Edgerman's Pay	67.50		- 1609. 15-10-18 ✓	13.38						
		69.75		Pl. 445. 21-10-18 ✓	4.46						
				all 1726. 31-10-18 ✓	9.33				625.74		
Nov.	Edgerman's Pay	67.50		1832. 15-11-18 ✓	6.26						
		69.75		6226 to Edgerman's Pay as Edgerman's 15/11/18 overcredited. h.R. 2. 411. 15/11/18 ✓	18.40						
Dec	Sgt's Pay	46.50		all 2015. 18-12-18 ✓	13.99						
		166.50									
Jan	Sgt's Pay	46.50									
		166.50									
Feb.	Int m Def Pay	25.40		B6484. 18-1-19. 6 SCRA. ✓	9.75				741.19	581.75	
		25.40		B6910. 28-1-19 ✓	9.75				766.39	659.53	
					167.06						

COMPILED BY: W. Langdon
CHECKED BY: [Signature]

This space to be for numbers.



22-10-35

War Service Certificate
Class **H**
137814
[Handwritten signature]

Proceedings on Discharge.

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

No.	2288497
Rank	Srgt.
Surname	MORRISON,
Christian name	WILLIAM HAVER,
NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.	
Corps (Squadron, Battery or Company)	Forestry Co. So. Alberta. (#2 D.D.)
Date of discharge	24th. March 1919
Place of discharge	HAMILTON, ONT.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age..... 27 years..... 5 months.	Descriptive marks Vacc. scar left arm.
Height 5 feet..... 10 inches.	
Complexion Dark	
Eyes Blue	
Hair Dark Brown,	
Trade Fireman	
Intended place of residence (To be given as fully as practicable.)	
165 Duke St. Hamilton, Ont.	

2. The above-named man is discharged in consequence of

DEMOBILIZATION

Authority for discharge..... #2 D.D. Pt. 2 D.O. #80

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.

3. Conduct and character while in the service have been, according to the records, etc.

N.B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldiers and the Officer Commanding his Squadron, Battery or Company.

4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)

To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.

M. F. B. 218.
200M.—5-18.
H. Q. 1772-39-113.

MV.

[Handwritten initials]
13-12-19
A.O.
(OVER)

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

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

6. Medals and Decorations.....

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).....

(Date).....

Commanding.....

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, and that I have received my permanent discharge certificate.

(Place) Hamilton, Ont. William Morrison (Signature of Soldier.)

(Date) 24th. March 1919 Jack Young Lt (Signature of Witness.)

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

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

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

.....(Signature of Soldier.)

10. Statement of Service.

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

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

11. Confirmation of Discharge.

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

(Place) Hamilton, Ont.

(Signature) Jack Young Lt

(Date) 24th. March 1919

For
G. C. No. 2 District Depot.

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.)

List of Discharge Documents

Reg. Conduct Sheet	Minutes form B. 203	Attention Paper	Minutes Form W. 23
Squadron Battery Company	H. 203	Particulars of Reason	W. 23
Field Conduct Sheet	W. 178	Proceedings on Discharge	B. 218
Copies of Convictions by C. P.	in MS		
Med. Hist. Sheet	Minutes form B. 213		
Casualty Form	W. 24		
Medical Report for Invalids	B. 137	(a) Proceedings on Discharge	
Dental History Sheet	B. 405		
Last Pay Certificate	W. 44	(b) Attestation	
Duplicate Discharge Certificate	W. 302		
Form of Will	W. 82	(c) Medical History Sheet	
Only if discharged "Medically unfit"			
Only if man has not been overseas			

Documents not accompanying this form should be crossed out.

I hereby certify that the following documents are unobtainable:

NOT OBTAINABLE

Officer Commanding

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.

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.)

List of Discharge Documents.

Reg. Conduct Sheet, Militia form B. 263 Squadron } Battery } Conduct Sheet, " B. 263a Company } or Field Conduct Sheet " W. 178 Copies of Convictions, by C. P. in MS. Med. Hist. Sheet, Militia form B. 313 Casualty Form " W. 54 Medical Report for Invalid§ " B. 227 Dental History Sheet " B. 465 Last Pay Certificate " W. 44 Duplicate Discharge Certificate " W. 39A ‡Form of Will " W. 82 §Only if discharged "Medically unfit." ‡Only if man has not been overseas.	Attestation Paper Militia Form W. 23 or Particulars of Recruit " W. 133 Proceedings on Discharge " B. 218
In the case of recruits who are rejected on final approval, the discharge documents will consist of (a) Proceedings on Discharge. (b) Attestation. (c) Medical History Sheet.	

Documents not accompanying this form should be crossed out.

I hereby certify that the following documents are unobtainable.

Officer Commanding.

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.

Reserved for M.H.C.

B8

Regt. No. 2288497 Rank SQT Surname MORRISON Christian Name WILLIAM HAVER
 Unit or Corps—(a) Overseas from United Kingdom 56COY CFC (b) in United Kingdom C.F.C.
 Born at—Town BANFFSHIRE County or Province Country SCOT
 Date of Birth—Day 12 Month OCT Year 1891 Age 27 yrs. 3 months.
 Joined at CALGARY, ALTA. Date 16 MAY, 1917
 Former trade or occupation FIREMAN.
 Permanent Marks or any peculiarity that will serve for future identification:—
VACC. MARKS. 2. L. ARM.

Height—feet 5 inches 11 Colour of eyes BLUESignature of Soldier (for identification purposes) Sgt. W. H. MorrisonMedical Report

Read carefully the instructions on last page of this form.

1. DISABILITY.

Group the disabilities, placing those resulting from separate causes in separate groups.

Disabilities Group (a)

VARICOSE VEINS BOTH LEGS

Disabilities Group (b)

NA

Disabilities Group (c)

NA

2. CAUSE OF DISABILITY

		Place of origin.	Date of origin. PRIOR TO ENLISTMENT
(i.) As to Group (a) above.	<u>CONDITIONS OF CIVIL LIFE</u>	<u>CANADA</u>	<u>PRIOR TO ENLISTMENT</u>
(ii.) As to Group (b) above.	<u>NA</u>	<u>NA</u>	<u>NA</u>
(iii.) As to Group (c) above.	<u>NA</u>	<u>NA</u>	<u>NA</u>

3. Is the disability due to disease contracted or injuries received prior to Active Service?

- (i.) As to Group (a) above? YES If yes, has Active Service aggravated it? NO
 (ii.) As to Group (b) above? NA If yes, has Active Service aggravated it? NA
 (iii.) As to Group (c) above? NA If yes, has Active Service aggravated it? NA

4. Is the disability due to disease contracted or injuries received while on Active Service?

- (i.) As to Group (a) above? NO
 (ii.) As to Group (b) above? NA
 (iii.) As to Group (c) above? NA

5. MEDICAL HISTORY. *no past illnesses Fireman*
 Enlisted May 16/17 arrived England July 4/17
 In France Aug 3/17 to Jan 15/19. In Hospital
 in France for 1 week Influenza. Could not
 join infantry on account of varicose veins
 of both legs so joined C.F.C. in Canada
 He has had varicose veins for 13 years
 and states they have not been
 aggravated by service
 Boarded Sunningdale 10-7-17 Vancouver Bii

6. PRESENT CONDITION. *complaints varicose veins of both*
legs.
 Exam man is of good physique has varicose
 veins of both legs below knee and of left leg
 above knee. This condition is of a moderate
 degree but would probably get worse
 if much marching were done
 Heart normal in rate size & response
 to effort no murmurs sounds normal
 Lungs normal
 otherwise normal

7. OPERATION. (i.) Was one performed? *no* (ii.) If so, state what. *na*
 (iii.) Was one advised and declined? *na*

NOTE.—Loss of teeth on or immediately after Active Service should be attributed thereto, unless there is evidence to the contrary.

8. (i.) Is there loss or decay of teeth attributable to Active Service? *no*
 (ii.) If so, describe. *na*

9. DO YOU RECOMMEND:—
 (a) Fit for duty? *Bii* (state, category)
 (b) Invalid to Canada? *no*
 (c) Discharge from the Service as permanently unfit? *no*

Date of Report *Jan 22 1919* Signed *E. C. Rosebrought*
 Station *Sunningdale C.F.C.* Officer in medical charge of base.

I have satisfied myself of the general accuracy of the above Report,
 and concur therein *except *NOTE IN HOSPITAL* {Officer i/c Hospital} Strike out one
 {S.M.O. Brigade} of these
 Dated at Station, on 191.....
 *Delete if inapplicable.

Proceedings of a Medical Board on the Soldier mentioned in Part I.

10. Is the disability fully described in Part I. (1)?
If not, describe it.

Yes

11. Is the cause of the disability fully described in Part I. (2)?
If not, describe it.

Yes

12. From the medical information now adduced, was the disability caused or aggravated by:—

(a) Negligence of the Soldier { Caused? Aggravated? } 20

(b) Misconduct of the Soldier { Caused? Aggravated? } 20

13. THE ENTIRE DISABILITY.—Without regard to his regular occupation, to what extent is his capacity lessened at present for earning a full livelihood in the general market for untrained labour?
(Estimate at none, 5%, 10%, 15%, 20%, etc.)

14. THE DISABILITY DUE TO SERVICE.—(See Part I. (3). Aggravation on Active Service of a disability existing previous to joining is to be included in this estimate.)
What part of the entire disability estimated next above (13) is due to causes arising during Active Service?
(Estimate at none, 1/10, 2/10, 3/10, etc., or all.)

15. Permanency of the Disability due to Service estimated next above in (14).
(i.) Is it permanent?
(ii.) If not permanent, what is its probable minimum duration (in months)?

no

16. If an operation was advised and declined, do you consider the refusal to have been unreasonable?

17. Can the former trade or occupation be resumed?

Yes

18. REMARKS:—

Condition as on Enlistment no aggravation due to service

Unit A.C. Dec 9083 411115

RECOMMENDATION:—

(a) Fit for duty? (state category)

Bn

(b) Invalid to Canada? 1

(c) Discharge from Service as permanently unfit? 1

Date of Board

22.1.19

Station

Sumnerdale

Signatures of the Board

Thompson Capt President
J. J. Seaton Capt

Approved

J. J. Donevan Major

A.D.M.S.

Dated at

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