59th. OVERSEAS BATTERY C. F. A.

15th O/S Brigade C. F. A.

TRIPLICATE

ATTESTATION - PAPER.

No. 327881

Folio. 9

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? Nicoll
1a. What are your Christian names? Harry Lawson
1b. What is your present address? Newdale, Man.
2. In what Town, Township or Parish, and in what Country were you born? Dundee, Scotland
3. What is the name of your next-of kin? Peter Nicoll
4. What is the address of your next-of-kin? Newdale, Man.
4a. What is the relationship of your next-of-kin? Father
5. What is the date of your birth? 3rd, January 1899
6. What is your Trade or Calling? Farmer
7. Are you married? No
8. Are you willing to be vaccinated or re-vaccinated and inoculated? Yes
9. Do you now belong to the Active Militia? No
10. Have you ever served in any Military Force? If so, state particulars of former Service. No
11. Do you understand the nature and terms of your engagement? Yes
12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE? Yes

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Harry Lawson Nicoll, 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.

Harry Lawson Nicoll (Signature of Recruit)

Date March 9th 191 6 (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Harry Lawson Nicoll, 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.

Harry Lawson Nicoll (Signature of Recruit)

Date March 9th 191 6 (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 Winnipeg this 9th day of March 191 6

R J Riley (Signature of Justice)

M. F. W. 23.
400M.—1 -15.
H. Q. 1772-39-841.

Description of Nicoll, Harry Lawson on Enlistment.

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

Height 5 ft. 10 ins.

Chest measurement.
- Girth when fully expanded 36½ ins.
- Range of expansion 3 ins.

Complexion Ruddy

Eyes Grey

Hair Dark Brown

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

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

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

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 March 8th 1916. W. E. Guest

Place Winnipeg Capt C.A.M.C.

Medical Officer.

*Insert here "fit" or "unfit."

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

CERTIFICATE OF OFFICER COMMANDING UNIT.

Harry Lawson Nicoll 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 9th March 1916

REGIMENTAL DOCUMENTS

NAME NICOLL, HARRY, LAWSON, REGT. NO. 327881 UNIT 15th C.F.A. H. Q. FILE NO.

P. ER. 30/6/19

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
1	ATTESTATION PAPER (M.F.W. 23, 133, or 51)		KC 20/3/20			DEATH
3	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
	TRAINING HISTORY SHEET (M.F.W. 113)					
1	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
1	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
1	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
2	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
1	DENTAL HISTORY SHEET (M.F.B. 465)					Category
1	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					
	MEDICAL EXAMINATION (M.F.W. 129)					Demob.
1	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
	LAST PAY CERTIFICATE (M.F.W. 44)					
1	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					
1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
1	Misc.					
1	Cover					1
1	O A D C 5009 A					
1	Form 1375					27-24
1	Gas Card					27-24
1	Card R149					2-25
	R1					

S M H C

C6058

W 2589

F.21.
RS

Number 327881 Rank Gnr.

Surname Nicolle,

Christian Name Harry Lawson

Units C.F.A. Theatre of War France

Date of Service 22/8/17

Remarks

Latest Address Newdale,
Manitoba

Roll No B
Page 7496

No. 15

LEDGER NO. 1717 SERIAL NO. C 9097. 3

REG. NO. 327881 NAME Nichol A

RANK Pte CORPS C F A AGE 20 SERVICE C 6/12 E 11/12 F 8/12

HOSPITALS	DATE OF ADMISSION
1 Manitoba Mil Winnipeg	25 2 19
2	
3	

DIAGNOSIS G S W R Hand & Fibula

TRANSFERRED TO

DISPOSITION 20 5 19 10 D.D.C.C. CATEGORY

M.F.W. 2553.
1126-D.P.-50M-12-18.
1772-39-1332.

P.T.O.

REMARKS:

Form R. 149.

Harry Lawson

Name NICOLL Rank Dvr Reg. No. 327881

Unit 14th Bde

Next of Kin Canada

Date		Movement	Place	Casualty	List No.	Notified N/K O.		W.O. List
5.4.	18	13 Can Fd amb	S.M.	Scalp	a/243		9/18	16446
				Rt Shoulder, R Arm, R Hand	a/247			
10.4.		4 Gen Hosp		do	a/247			94311
22.4.		Wharton C.G.H.	Etaples	do	B2324			16961
27.4.		Milly (Con)	do	do	B3307			Ser 23058
4.9.		Discharged	do	do	B340			7802
R.L. 4.9.		R Will proceed on 16.9.16 2 Cl D Brandhott						ant Eks R 503

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

REGT'L. No. 327881

H. Q. FILE No. 649

NAME Nicoll Harry Lawson

RANK AND CORPS Dvr. 14th Bdge C.F.A.

FOLLOWS No.

FOLLOWS

CABLE No.	DATE	NATURE OF CASUALTY
N.O.K		Peter Nicoll (father) Newdale Man.
Q.178	12-4-18	Adm 13 Field Amb Apr 5th 1918 G.S.W Head G.S.W Rt Arm, Hand ✓
W.S.M C.288	30-4-18	County of London war Hosp Epsom, G.S.W
W.S.M C.315	8-5-18	Progressing slowly in County of London War Hosp. Epsom. Multiple

L. L. 31493. M. & D. 8476.

M. F. W. 42—100M.—28-11-17.
H. Q. 1772-39-893.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
a 213 2.	#13 Can. Bld. Amb.	5-4-18	S. W. Scalp R Shldr. R Arm & R Hand.
a 217	No 4 Gen. Camiers	15-4-18	S W Scalp R. Shldr R arm & R Hand
B. 224 1	Horton. Co. of Lon. War Epsom	22-4-18	" " " " " " " "
B 307	Mil. Conv. Red cote P. Epsom	27-7-18	" " " " " "
B 340.	Disch	4-9-18	" " " " " "

*Name Nicoll Harry Lawson Rank Gnr. Regtl. No. 327881

Fyle Depot

Original unit 59th Present unit M. or S. Age. 18 Religion. Pres Ref. H.Q.

Port, ship, and date of arrival 18-12-18 Melita St. John.

Next of kin Peter Nicoll. Newdale, Man.

Address on leave

Address on discharge

Transportation issued Yes No Date Character on discharge Vg 8/19

Previous occupation Farmer Date and place of enlistment March 9th 1916. Wpg.

Diagnosis Date of Medical Boards Apt. J.M.O.K.

Date.	Remarks. (Hold for Early)	Pt. 2 Order No.
	Dep'n mag	
10-12-18	T.O.S. and Posted Cas. Coy. Co. 306 Pa. 4854.	254.Pa.1884
	14 landing leave with Subs.	
28-2-19	Hosp Dec	57 S.
20-5-19.	To Cas Coy.	141-

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

(over)

Date.	Remarks.	Pt. 2 Order No.

M.F.W. 192.
60M.—3-18 (D.P. 353).
1772-39-1243.

D

D.M.S. 1300-50M-21-11-17.

Surname	Christian Name or Names	Reg. No.
NICOLL. 5198	H.L.	327881.

Rank	Unit	Co.	Troop	Batty.
Dvr.		C.A. 14B.		

Hospital	Date of Admission
13. C.F. Amb.	5-4-18.

1. 4 Gen. Hamiens — Hos. 10-4-18
2. Horton C.of L. Epsom — Hosp. 22.4.18
3. Woodcote Pk. Epsom. — Hosp. 27.7.18.
4. — Hosp.

Diagnosis

1. S.W. Scalp R. Shldr. R. Arm. & R. Hand
2.
3.

Disposition

		Date
C.L. 11-4-18.	A213/2.	Dis 4.9.18
16-4-18 A.	21Y (2)	
24.4.18 B	224 (1)	
31.7.18 B	507	
6-9-18 B	340 (3)	

Remarks

A.M.D. 2 DEPT.
Boh. of D.G.M.S. O.M.F.C. London.

EPITOME OF HOSPITAL TREATMENT

HOSPITAL	ADM.
1.	
2.	
3.	
4.	
5.	
6.	
7.	

5148 (9)

D.M.S.-1375.

Medical Examination upon leaving the Service of an Officer fit for general service or a Soldier fit for duty.

Officers leaving the Service upon being found unfit for general service by a Medical Board, and Soldiers leaving the Service upon being found otherwise than fit for duty by a Medical Board, are not to be reported on this Form.

Rank: Gunner Name: Nicoll Surname: Harry S.

Unit or Corps: 61st Bty (If a soldier) Regtl. No. 327881

Born at: Dundee Scotland on, date: 3/1/1899

Signature (for identification): Harry S Nicoll

The examination is to be made jointly by two Medical Officers.

1. **PHYSIQUE**—Any deformity, maiming or lameness? If so, describe. no

Weight 160 lbs.

Height 5 ft. 10 ins.

2. **NUTRITION AND DIATHESIS?** good

After searching inquiry and thorough examination is any evidence found of disease or impairment of the parts indicated below? If so, describe.

3. **NERVOUS SYSTEM?** no

4. **RESPIRATORY SYSTEM.** no

5. **HEART?**

Abnormal Sounds? no

Abnormal Size? no

Pulse Rate? 60 Intermittence or irregularity? no

6. **ARTERIES.**—Any hardening? no

7. **DIGESTIVE SYSTEM?** no

8. **GENITO-URINARY SYSTEM?** no

Urinalysis—S.G.? 1010 Reaction? acid Albumen? no Sugar? no

9. **SKIN, MIDDLE EAR, EYE** or any other part? no

10. Is there any evidence of impairment of health or physical condition not mentioned above? If so, describe. no

11. Opinion as to the health and physical condition of the one examined? good

Examined at: Kimmel Park Signed: [illegible] M.O.

Date: 8/12/18 Signed: [illegible] M.O.

If any disease or impairment of health or physical condition is discovered, this report should be sent at once to the O.C. concerned for the Officer or Soldier to be sent before a Medical Board for regular boarding.

DUPLICATE

To be made out in duplicate.

H.Q. 54-21-23-53

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

INSTRUCTIONS.

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

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

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

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

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

---

(1) Name of Overseas Unit which Soldier joins 59th. OVERSEAS BATTERY C. F. A. 15th O/S Brigade C. F. A.

(2) Regimental Number 327881

(3) Full Name of Soldier Harry Lawson Nicoll

(4) Place of Birth Dundee, 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? No

If so, give number of boys and girls ✓

Also their names and ages ✓

M. F. W. 67
200M.—2-16
1772-39-954

(SEE OTHER SIDE.)

(9) Is your Father alive? Yes

If so, state name and address Peter Nicoll Newdale, Manitoba

(10) Is your Mother alive? Yes

If so, state name and address Lily Nicoll Newdale Manitoba

(11) If your Mother is a widow ✓

Are you her sole support, or not? ✓

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

✓

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

✓

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

✓

(15) Are you insured? No

If so, in what Company? None

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 3rd August 1916.

Officer Commanding.

5198

K

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 327881 (Rank) Gunner

Name (in full) Harry Lawson Nicoll enlisted in

the 15th C.F.A.

CANADIAN EXPEDITIONARY FORCE at Winnipeg on the 9th

day of March 1916

HE served in 61st C.F.A. France-Belgium 8 mos.

and is now discharged from the service by reason of ~~Demobilization.~~ Medically Unfit R.O. 1120 Medical Unfitness.

☆ D.O. 143 - Para. 8. ☆

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

Age 20.

Height 5 ft. 11

Complexion Dark.

Eyes Grey.

Hair Dark

Marks or Scars GSW scar right shoulder thand.

H. L. Nicoll
Signature of Soldier

Gleed
Issuing Officer

Date of Discharge

27. 5. 19.

Reid for Major
Officer Commanding No. 10 District Depot
Rank

Date 27. 5. 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.

M.F.B. 39A.
1049-D.P.-300M-11-18.
H.Q. 1772-39-882.

WAR SERVICE BADGE

CLASS "B" NO. B.4753 ISSUED

a.168256

5198

(C)

69.

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

M. F. W. 54. (A. F. B. 103.)
250M.—1-16.
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps 59th. OVERSEAS BATTERY C. F. A. 15th O/S Brigade C. F. A.

Regimental No. 327881 Rank ~~Driver~~ Private C. E. F. Name Nicoll, Harry Lawson

Enlisted (a) 9th March 1916 Terms of Service (a) Four Six months Service reckons from (a) Mar. 9. 1916.

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) Nil Farmer.

Report: Date	Report: From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
		Embarked Canada	Halifax	Sept. 11. 1916.	
		Arrived England	Liverpool	Sept. 22. 1916	
22.1.17	OC., 14th. BDE, CFA.	Absorbed by 61st. Battery, Milford 22.1.17 Pt.2, #22a, 22.1.17. 14th. Brigade, C.F.A.			
20 AUG 1917	OC. 14th Bde, CFA	Proceeded Overseas on service.	Witley Camp.	21.8.17.	Part 2 order No 232 [illegible] Capt. For Adjt. 14th Bde, CFA
13/2/17.	14 Bde.	L.O.S.	Witley	22/1/17.	Pt II O. 44.
28.8.17	L.R.	LANDED IN FRANCE	HAVRE	22.8.17	

CERTIFIED CORRECT
20 AUG. 1917
CAN. RECORDS, LONDON

R. H. W. Reid Capt.
FOR LT: COL: I/C RECORDS, C.O.M.F.
8853

(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.

(C) 5198

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				
16-3-18.	14 Bde. C.F.A.	On Command for Reinforcts	Boulogne	12-3-18.	B. 213.
23.3.18	"	Rejoined from " "	Field	17.3.18	B 213
6.4.18	13 CFAmb	W.S.W. Scalp S Shlder R arm R hand R.	Adm 13 CFAmb Trans. 57 CCS	5.4.18 5.4.18	A 36 E 2214
6.4.18	14 Bde CFA	To Hosp. Wounded	N.S.	5.4.18	B 213
5.4.18	57 CCS	S.W. Scalp R Shlder R Arm R hand.	Adm. 57 CCS	5.4.18	A 36 E 2431
10.4.18	4 Genl	" " " "	4 General	10.4.18	W. 3034 E 2981
10.4.18	57 CCS	" " " Trans	27 A.T.	10.4.18	A 36 E 3608
21.4.18	4 Genl.	" " " Trans. to England		21.4.18	W. 3034 E. 5691
21.4.18	"	Invalided Wounded & posted to C.A.R.D., Witley	England	21.4.18	H.S. "Princesse Elizabeth", W. 3083. Part II 33 d/ 30.4.18
		Chas B. Chafwell Capt. for Lt.-Col., A. A. G. Canadian Section, G. H. Q. 3rd Echelon, B. E. F.			
29 4 18	CARD	Tond on posting from 14th Bde CFA	Witley	2 4 18	Pt II 0 119
					Lieut. FOR LT. COL. I/C RECORDS, C.O.M.E.
6-9-18	2nd C.O.D.	ttached to 2nd C.C.D.	Bramshott	4-9-18	Pt. No. 211
8.10.18	OC. 2nd CCD	Ceases to be attached to 2nd C. C. D. on return to 1 CCD Res. Bn.	Bramshott	8/10/18	Pt. 2 D. O. No. 238 for OC. 2nd CCD.

IV 5198 ORIGINAL 59th OVERSEAS BATTERY C. F. A. 15th O/S Brigade C. F. A. 327881 ORIGINAL N25

61st O. BATTERY C.E.F.

MEDICAL HISTORY SHEET.

Surname Nicoll NICOLL Christian Name Harry Lawson

Examined on 9 day of March 1916 at Winnipeg

Approved by W. E. Ewart

Rank Capt. C.A.M.C. M.O.

Birthplace City or Town Dundee County Scotland

Apparent age 18

Trade or occupation Farmer

Height 5' Feet 10 Inches.

Weight 130 Lbs.

Chest measurement Minimum 33½ inches. Maximum expansion 3 inches.

Physical development Normal

Small-Pox Marks None

Vaccination Marks Arm ~~Right.~~ Left. Arm Number 7

When Vaccinated last Childhood

(a) Marks indicating congenital peculiarities or previous disease None

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

Date.	Fit or Unfit.	Examined for Re-engagement	
29/8/18	D1	B. C. D.	M.O.
			M.O.
			M.O.
			M.O.
			M.O.
			M.O.
			M.O.

24 APR 1916

Date.	Result.	Vaccinations.	
14.8.16	—	[illegible]	M.O.
			M.O.
			M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.	
1916 May 2	Good	J. H. Coombes	M.O.
" 10	"	JHC TAB 30.7.18 2 13.8.18 B.C.D.	M.O.
" 15		JHC	M.O.
12.6.11		[illegible]	

Enlisted on 9th day of March 1916 at Winnipeg Man

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	59th OVERSEAS BATTERY C. F. A.	327881		9th March 1916.
Transferred to	61st O. BATTERY C.E.F. 14th Brigade C. F. A.			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
I.C.D.	1-11-18.	Fatigue.	Struck Off
M. M. Ott	15-5-19.	Gsw. Rt. Sho. forearm & hand.	Fit for duty [illegible] Capt.

CANADIAN

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

M. F. B. 313.

400M.—1-16.
H. Q. 1772-39-439.

J. MO.

Surname Nicoll Christian Name Harry Larson

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital. Day	Month	Year	Dates of Discharge from Hospital. Day	Month	Year	DISEASE.	Number of days in Hospital	Remarks on nature of the disease: how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
Horton War Hosp. Epsom		22	4	18	26	7	18	Shell wds. multiple		Ex-venin wounds Rt. shoulder 17.7.18 Wds healed. To Conv Hosp	C Daniel Capt
M.A.H. Epsom.		26	7	18	4 - SEP 1918			GSW Rt shoulder Rt arm - Rt hand (flesh)	41	Feeling fit - heart + lungs normal. Discharge to Command Depot Cat D1.	R.L. Hayhurst Capt C.A.M.C.
MANITOBA MILITARY HOSPITAL		25	2	19	15 - 5		19	GSW Rt arm	79	Impaired function right shoulder, partial loss of muscle tissue right shoulder with partial loss of function of same, strength of shoulder 50% of normal, To medical board	A.C. Taylor Capt CAMC

Registrar
for O. C. Manitoba Military Hospital

N-73 M.D. 10 5164 (H)

C.A.D.C. 5009 A

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

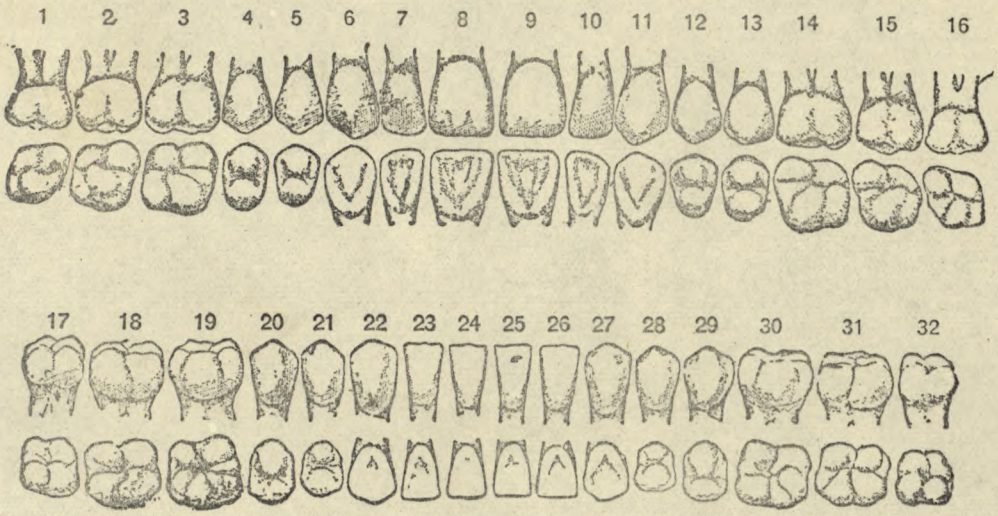
DIRECTIONS TO DENTAL OFFICERS

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

NAME OF SOLDIER (Block Letters) NICOLL H L

REGIMENT C R A RANK Gnr. No. 327881

Date of Examination in England 4/12/8 | Date of Examination in France



PRESENT DENTAL REQUIREMENTS

1. FILLINGS 7. 9.
2. EXTRACTIONS
3. CROWNS
4. DENTURES
   - (*a*) Full Upper
   - (*b*) Part Upper
   - (*c*) Full Lower
   - (*d*) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT?

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

Tunnel Park. N. Wales.

Signature of Dental Officer A. C. Steele

Capt. C. A. D. C.

DEPARTMENT OF VETERANS AFFAIRS

P.A.

To ● Copy for H.O. File

Ottawa, Ont.
Date May 13, 1964

Attention of

NAME NICOLL, Harry Lawson

SERVICE NUMBER 327881 CEF

C.P.C. No. 133517
W.V.A. No.

NAVY
ARMY xxx
R.C.A.F.

The DEPARTMENT has received information from

Supt. of Veterans Insurance, Ottawa d/May 7, 1964
(State authority and source of information of death)

regarding the death of the above mentioned veteran.

Particulars are as follows:

Date of Death 12-4-64
Cause of Death
Place of Death Winnipeg, Man.

Name and Address of next of kin (if known)

Copies to: W.S.R.
~~XXX~~
~~PAX~~
~~DOX~~
H.O.

Destroy form if advice of death already received.

E.C. Richards
for
Chief, Central Registry

DVA 24

R—122

J.M.

Rank Dvr. Name NICOLL, Harry Lawson. Reg'l No. 327881

Unit 59th Btty. 15th Bde. C.F.A. If in perm. Corps, What Unit? Married or Single Single.

Place and Date of Enlistment Winnipeg. 9th March 1916. Place of Birth Dundee, Scotland.

Name and Address, Next-of-Kin Peter Nicoll.

P.O., Newdale, Man, Canada. Relationship Father.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

N/E. R.B. No. 7617
File R.L.
Category CanGR.

Discharge, Date and Place Reason Character

H. W. & V., Ld.—7165-16.

Report. Date.	Report. From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS. Taken from Official Documents.
		ARRIVED IN ENGLAND S S CAMERONIA 22-9-16			
22 Jan. 17		15Bde: SOS. trafr, to 61Bty, New 14Bde:	Witley,	22-1-17	Pt. D022A
		13 Y. 17. 14 Bde: T.O.S:	Witley	22.1.17	Pt. II 044
21.8.17	14th Bde	Proceeds O/s	Dr Witley	20.8.17	Pt 232
11-4-18	"	ad. #13 Can Fld Amb	" Field	5/4/18	213 Sh Scalp. R. Shld Chn R arm & R Hand
29-4-18	CARD	TO & from 14th Bde	" Witley	22/4/18	Pt 119 & 14 Bde 33 30/4/18
7 9. 18	— " —	Ceases to be Hq. & on Com 2nd CCD	Gnr — " —	4. 9. 18	— 250 & 2nd CCD Pt 0 211 d/6.9.18
10-10-18	do	Ceases on Comd to 2 C.C.D. & on Comd to 1st C.C.D.	Gnr. do	8-10-18	op 1st C.C.D. Pt II Do. 279 D 9-10-18. Pt II Do. 283. & 2 C.C.D. Pt II Do. 238. D 8-10-18
7-11-18	Comp Bde C.R.A. T.O.S. on Posting From C.A.R.D. & 1st C.C.D.		Gnr. Camp Borden.	6-11-18	op 1st C.C.D. Pt II Do. 308. D 7-11-18 Pt II Do. 169. Do C.A.R.D. Pt II Do. 311 D. 7-11-18.
3-12-18	do	Shown on Comd to Kinmel Park Rykb.	Gnr. do	3-12-18	Pt II Do. 195.

R.F.B. 103 Checked 28/9/17 BY

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.				
6.1.19	Comp: Bde	SOS to Canada	Gnr	Borden	10-12-18 — b

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12a.
50m.—6-16.
1772—39—819.

Sheet No. 2. Mrs. L. Nicoll

L. L. Job 4503. - Req. 6332.

PAYMENTS.

Name of Soldier. Nicoll H. L.

Dr. 327881 - 59th Baty. 15th Brig.

15.00

Remarks. SEP 1 - 1916

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.		M 19392	15	
Oct.		22547	15	
Nov.		C 27952	15	
Dec.		X 28268	15	
Jan.	1917	P. 40286	15	
Feb.		745367	15	745367 (c. signed) & Remailed 3/17 to:- Union Bank, Newdale, Man. not
March		W 49931	15	15 W.
April		S 37550	15	15 Cu
May		S 10296	15	15 K
June		R 16229	15	
July		G. 23831	15	Cu
Aug.		H 31196	15	
Sept.		J 38823	15	03
Oct.		C 44432	15	
Nov.		Y 51199	15	
Dec.		X 58073	15	
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

240 —
CANADIAN
ASSIGNED PAY AUDITED
AUDIT CLERK
DATE 21 R 2

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier_____

PAYMENTS.

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

L. L. Job 4593.—M. & D. 6332.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

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

To Whom Mrs Lily Nicoll

Address The Valley
Newdale Man

Rate 15-00

SEP 1- 1916

By Whom Assigned Nicoll H.L.

Regtl. No. 327881

Rank Dr

Corps 59th Battery 15th Brigade

PAYMENTS

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

CONSOLIDATED ACCOUNT 4

Married or Single: S

Place of Birth: Dundee, Scotland.

Name and Address of Next of Kin: Peter Nicoll
Newdale, Manitoba, Canada.

Relationship of Next of Kin: Father.

Name and Address of Next of Kin:

Relationship of Next of Kin:

Separation Allowance Monthly $ — Effective (Date):

Payable to:

Relationship of Dependant:

Casualties, Promotions, &c.

Particulars	Effective Date	Authority

Admissions to Hospital, &c.

Date Admitted	Date Discharged	V. or A.	Name of Hospital

Reg'l No. 327881 Rank: Private Name: Nicoll, Harvey Lawson

If in Permt. Corps What Unit: — Unit: 15th Brigade C.F.A. — Transferred to: 14th Bgde. C.F.A. Date: Jan. 22/17. Authority: P.J.O. 22 a. 2.

Permanent Force Allowances — Transferred to — Date — Authority

Place of Attestation: Winnipeg — Transferred to — Date — Authority

Date of Attestation: March 9th 1916. — Transferred to — Date — Authority

Assigned Pay Monthly $ 15.00 Date Effective: Sept. 1. 1916.

Payable to: Mrs. Lily Nicoll, The Valley, Newdale, Manitoba Relationship: Mother.

Assigned Pay Monthly $ — Date Effective

Payable to — Relationship

Stop-Payment Form (Assigned Pay) Rendered (Date) — Effective — Reason

Discharge Date and Place — Reason and Authority

Account Transferred to Non-Effective Branch (Date)

Account Transferred to Officers' Pay Branch (Date)

Date 1916	Pay No. of Days	Pay Rate	Pay Amount $	Pay Amount c.	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount $	Field Allowance Amount c.	Working or Special Pay No. of Days	Working or Special Pay Rate	Working or Special Pay Amount $	Working or Special Pay Amount c.	Assigned Pay Credits	Other Credits	Total Credits	Acquittance Rolls 1 No	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	Cash Payments 1	2	3	4	Assigned Pay	Other Charges	Total Debits	Balance Credit	Balance Debit	Pay Withheld or Deferred	Pay Available for Issue	Remarks
														10	10																10					Bal. from Canadian Pay list
Sept.	30	1.00	30		30	10	3								33			7	29/9/16						14	60		15		29	60	13	40			
Oct.	31		31		31		3	10							34	10	40	78	17/10/16					4	87	9	73		15		29	60	17	90			
Nov.	30		30		30		3								33		109	149	16/11/16					4	86	9	73		15		29	59	21	31	15	50	5	81
Dec.	31		31		31		3	10							34	10		182	30/11/16							19	47		15		34	47	20	94	16		4	94
1917 Jan.	21		21		21		2	10							23	10	218		22/12/16					7	30				15		22	30	21	74				
															157	30			16/1/17												145	56						
	10		10		10		1								11																		32	74				
			15	30																																	
Feb.	28		30	80											30	80	261	5½						9	74				15		24	74	38	80				
Mar.	31	1.00/10	34	10											34	10			HH5 1-4/3/17; H81 1-4/3/17; H38 15/3/17							7 30; 9 73; 7 30			15		39	33	33	57				
Apr.	30		33												33							314	28/4/17				7 30		15; 28		27	30	44	27				
May	31		34	10											34	10	38; 79	16/4; 23/4						7 30; 9 73					15		32	03	46	34				
June	30		33												33		127; 162	14; 29/5						7 30; 9 74					15		32	04	47	30				
July	31		34	10											34	10													15		15		66	40				
			367	40										10	377	40								60	84	77	86	7 30	165		311	00						

327881. Gnr. Nicoll H.L.

DATE	PAY No. of Days	PAY Rate	PAY Amount $	PAY Amount c.	FIELD ALLOWANCE No. of Days	FIELD ALLOWANCE Rate	FIELD ALLOWANCE Amount $	FIELD ALLOWANCE Amount c.	WORKING OR SPECIAL PAY No. of Days	WORKING OR SPECIAL PAY Rate	WORKING OR SPECIAL PAY Amount $	WORKING OR SPECIAL PAY Amount c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE Credit	BALANCE Debit	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
			367	40										10	347 40									60 84	77 86	7 30		165		311	66 40				
Aug.	31	1d	34	10											34 10	233 12 / 278 28/10								17 03 / 9 74				15		41 77	58 73				
Sept.	30.		33.												33.	341 23/7 / 385 7/8		420 21/8 / 473 11/9						9 73 / 9 73	7 30 / 2 68			15.		44 44	47 29.				
			434	50										10.	444 50									107 07	87 84	7 30		195		397 21					

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFER-RED. PAY	SEP. ALLCE. ENG.
Oct.	Bal fwd.	~~[illegible]~~							47 29		
	G. Pay.	34 10		A.P.				15	66 29		
		34 10						15			
Nov.	- -	33 ..		AR 547 Hubbsta. 2/10/17.		4 46					
				" 503 - - - 24/9.		2 68					
				AP.				15			
				AP 612 - - 16/10		3 57					
Dec	- -	34 10		AP.				15			
				AR. 659 - - 4/11		4 46			88 32		
		67 10				15 17		30			
1918 Jan	- -	34 10		AP.				15			
				AR 720 " 30/11.		12 49					
				" 811 " 10/12		4 46					
				" 852 " 21/12		3 57			86 90		
		34 10				20 52		15			
Feb		30 80		AP				15			
				AR 928 " 6/1/18		4 46					
				" 1009 " 21/1		3 57					
				" 1208 " 7/2		4 46			90 21		
						12 49			4 50		
		30 80				12 49		15	94 71		
Mar	"	34 10		A.P.				15			
				AR 1293. 17/2/18 "		3 57					
				" 1467 13/3/18 "		3 57					
				" 1460. 4/3/18 "		4 46			94 71		
		34 10				11 60		15			

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFER-RED. PAY	SEP. ALLCE. ENG.

CANADIAN
ASSIGNED PAY AUDITED
[illegible]
AUDIT CLERK
DATE 9.8.18

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY.	* ~~ENGLAND OR~~ CANADA.	SEPARATION ALLOWANCE.	* ENGLAND OR CANADA.
EFFECTIVE DATE:– 1.9.16		EFFECTIVE DATE:–	
AMOUNT:– 15⁰⁰		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.

Mrs Lily Nicoll, mother
The Vaddey, Newdale
Man.

Address 1-1-19

NAME:– NICOLL Harry L.

NUMBER:– 327881

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		~~Pte~~ Gr

UNIT AND TRANSFERS

ORIGINAL UNIT:– 156 f a.

DATE ACCOUNT FIRST OPENED:– 1.9.16

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
PJO 22a 2.	22.1.19		146 f a
	23-2-19	CANADA SECTN.	

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
~~12-11-18~~	217	Bdn.	~~7 87~~				
28-11-18	1012	"	~~24 33~~				
2-12-18	1164		~~45 67~~				
			77 87				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1 00	10		

PARTICULARS OF RENDERING NON-EFFECTIVE:– 31-12-18 Disc to Canada (auth NR. 695) A. Bal. $64.46

MONTH	PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
31.3.18	Blce Forw.								94 71		
Ap	G.P.	33		C a P.				15	115 71		
				AR 30 7.4.18. 14 Bde	4 46				111 25		
		33			4 46			15			
May	G.P.	34 10		C a P				15	130 35		
				AR 2114 23.4.18 "	9 73						
				AR 866. 28.5.18.	9 73				110 89		
		34 10			19 46			15			
June	G.P.	33		C a P.				15	128 89		
				AR 1453. 25.6.18. C.C.H Epsom	9 73				119 16		
		33			9 73			15			
July	G.P.	34 10		C a P.				15	138 26		
				AR 1624. 23.7.18 CCH Epsom	4 87						
				" 5359 29.7.18 "	9 73				123 66		
		34 10			14 60			15			
Aug	G.P.	34 10		C a P.				15	142 76		
				AR 4291. 29/8/18 CCH Epsom	4 87				137 89		
		34 10			4 87			15			
Sept	"	33		C a P				15	164 65		
	S.S. from 4.9.18 to 16.9.18 12 dys c 73¢.	8 76		AR 453. 4.9.18. CCH Epsom	48 67				115 98		
	PJO 211. 1.9.18.	41 76		~~DR~~ AR 4677 11.9.18 " "	14 84				~~52 47~~		
		41 76			63 51			15	101 14		
Oct	Gun Pay	34 10		AP				15	120 24		
				4680 18/10 / CCD	5 28						
				5168 26/10 "	9 73				105 23		
		34 10			15 01			15			

NUMBER RANK NAME

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
	Bal. Fwd.								105 23		
nov.	GP	33		AP				15			
Dec	"	34 10		AP				15	142 33		
				217 18/11 CRA	487						
				1164 3/12 "	486						
				1012 28/11 "	2433				6446		
		67 10			7787			30			
	S.O. Sto Can. 10 7/8 S.O.6. 6/9 CRA										

NO. 10
DISTRICT DEPOT
MAY 27 1919
DISCHARGE SECTION
M.D. 10. WINNIPEG

WAR SERVICE BADGE
CLASS "B" NO. B.47535 a.168256 ISSUED

SHORT FORM.
PROCEEDINGS ON DISCHARGE.
(Demobilization.)

1. No. 327881

2. Rank Gunner

3. Name Nicoll, Harry Lawson

4. Unit 15th C.F.A.

5. Date of Discharge 27-5-19 Place Winnipeg

6. Reason for Discharge
Medically Unfit R.O. 1420 (a)

7. Authority R.O. 1420 (a) ☆ D.O. 143 - Para. 3. ☆

8. Proposed Residence after Discharge
Newdale, Man.

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. ?

H. Nicoll
Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place Winnipeg

Date 27-5-19

Signature Gleeson Lt
for (O. C. Discharging Unit.)

K.P.
20/3/20.

M.F.B. 218a—50M. -2-19 —1772-39-113.

LIST OF DISCHARGE DOCUMENTS.

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

H. SUB. Div

Forms
I. 1237
12

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	327881	Gnr.	Nicoll	H. L.

Year	Unit.	Age.	Service.
1918	Can F. A.	19.	2 4/12.

Station and Date.	Disease G.S.W. Rt. Shoulder Rt. arm & Rt. hand (flesh)
M.C.H. Epsom	
27-7-18	Wounds healed. Massage & R.G.
	F.V. BCH
30-7-18	Co.
1-8-18	Co
7.8.18	Co.
14.8.18	P.J2 47 VII Disc R.G. Co Mass
29.8.18	Disc P.J2 fit.
29.8.18	Debility [illegible] DT BCH

FURLOUGH ADDRESS IN FULL.

D

188 Strathmartine Rd.
Dundee
Scotland

30.7.18 M.N.S.
13.8.8

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

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

[P.T.O.

Station and Date.	

5196

HISTORY SHEET.

Manitoba Military Hospital. Tuxedo Park, Winnipeg Station.

No. 327881 Rank Pte. Name Nichol, Harry Age 20

Unit C F A Completed years of service (Where and how long) C. 6/12. E. 11/12, F. 8/12.

Date of admission 25-2-19 Date of discharge

Diagnosis F.B. Right hand. Place of origin Arras.

CONDITION ON ADMISSION AND PROGRESS OF CASE

APRIL 7, 1919: Condition satisfactory. MAJOR WHEELER.

APRIL 21, 1919: Condition improving. MAJOR WHEELER

APRIL 28, 1919: To have treatment by Gym. exercises and workshop. LT. COL. GALLOWAY

May 5th 1919 – Condition unchanged – FBW

MAY 10, 1919: Recommended for final board. LT. COL. GALLOWAY & DR. GIBSON

FAMILY HISTORY

(Tuberculosis, mental or nervous diseases.)

TREATMENT

(Especially any specific or special form.)

CONDITION ON DISCHARGE,

(and disposal made of case.)

Date

Medical Officer i/c case.

M. F. B. 313a.
50M.—3-18.
1772—39-439.

5198

J

B.P.C. ORIGINAL

TO MANITOBA MILITARY HOSPITAL MAY 15 1919 REGISTRAR

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.

M. D. 10.

STATION Winnipeg, Man. DATE May 15/1919.

1. 1 (a) Unit C.F.A./10 DD. 59th. (b) Regimental No. 327881. (c) Rank Pte.

(d) Surname NICOLL (e) Christian name Harry Lawson.

(f) Home address Newdale, Manitoba.

(g) Next of Kin Peter Nicoll (h) Relationship Father.

(i) Address of Next of Kin Newdale, Manitoba.

2. Age last birthday 20 years. Date of birth Jan. 3/1899.

3. Enlistment, or Appointment (if an Officer) (a) Place Winnipeg, Man. (b) Date 9/3/1916.

4. Personal description:

(a) Height 5' 10" (b) Weight 165 (stripped) (c) Complexion Fair.

(d) Colour of hair Brown (e) Colour of eyes Hazel (f) Identification marks, Scars, etc. See 10 (c).

5. Former trade or occupation Farmer.

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).	Years	Days
	3.	64.

	Periods From	Periods To
Canada	March 9/1916.	Sept 13/1916
	Dec. 10/1918	May 15/1919.
England	Sept. 13/1916	Aug. 22/1917.
	April 23/1918	Dec. 10/1918.
France or other theatres of War	Aug. 22/1917	April 23/1918.

7. Original disease, or injury G.S.W. Right shoulder, forearm and hand.

(a) Date of origin April 5/1918 (b) Place of origin Arras, France.

(c) Cause G.S.W.

Ass't Director Medical Services No. MAY 16 1919 MIL'Y DIST. No. 10, WINNIPEG

M. F. B. 227.

400M—11-18.
1772-39-117.

5198

8. Present disability— (Here state the exact nature of the disability resulting from the disabling conditions: e.g. (*a*) Weakness—slight, moderate, marked, etc; (*b*) Loss, complete or partial, of an organ or member, or of its functions; (*c*) Necessity for rest of the body, or of some of its parts, for therapeutic reasons; (*d*) Any other restrictions in choice of occupation.)

1. WEAKNESS AND PARTIAL LOSS OF FUNCTION OF RIGHT SHOULDER.

2. WEAKNESS AND PARTIAL LOSS OF FUNCTION OF RIGHT WRIST AND HAND.

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.)

Well developed, well nourished, color good, heart and lungs negative to examination. He has had a lesion of right shoulder, also right wrist and hand.

2 1. RIGHT SHOULDER:- Movements at shoulder joint are normal, strength of right shoulder is 65% of normal due to loss of muscular tissue. He can raise right arm straight above head, but cannot do so with any weight of five lbs. or over. He complains of pain in shoulder when exposed to cold.

2. RIGHT WRIST AND HAND :- Movements at wrist joint normal, fingers normal except index. He is barely able to flex index finger to palm of hand. Power of grip is 50% of normal. Apposition of thumb and index finger is 65% of normal. He can pick up and hold large and small objects. He finds difficulty in carrying a pail of water.

All other systems normal.

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

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

Special Senses NO Respiratory System NO Integumentary System NO

Disturbances of Mentality NO Digestive System NO Muscular System NO

Osseous and Joint Systems NO Any other general condition NO

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

He was wounded at Arras, April 5/1918 by shrapnel at C.C.S. on 5/4/1918, shrapnel removed from shoulder and drainage tubes (2) inserted. Evacuated to England 22/4/1918 to Horton War Hospital, later to M.C.H. Epsom. Evacuated to Canada 10/12/1918 to Man. Mil. Hospital, at this hospital operation was performed 28/3/1919 for removal of F.B. right wrist. One removed from back of styloid process of ulna. One behind base of first metacarpal. Third, about middle of shaft third metacarpal, and wounds sutured.

5198 (J)

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

NIL.

(*c*) (Here give a description of wounds, scars and deformities.) Four scars over right scapula, one $4\frac{1}{2}$" long adherent, vertical direction. Two 2" long linear. Three, stellate scar adherent to muscle. Four, small scar on left shoulder.

11.—(*a*) Did the disabling condition have its origin before enlistment? 1. NO 2. NO

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

Not applicable.

12. Was the disability caused, or aggravated; (*a*) by intemperance, or improper conduct; or (*b*) by unreasonable refusal to accept treatment? 1. (a). NO NO. (b) NO. 2. (a) NO NO. (b). NO.

The regimental documents will be referred to.

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

13. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? 1. Permenent. 2. twelve months.

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

In hospital in France 17 days. In England 7 month s 18 days. In Canada 5 months, 2 days.

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit? 1. NO 2. NO

(If the answer is "yes" state nature of treatment required and probable duration)

16. Can the former trade or occupation be resumed? YES.

(If not, briefly state why)

17. Recommendations Discharge as medically unfit.

C. W. Smith Capt. CAMC

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 H. Nicoll 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

H. Nicoll Rank.

Signature of invalid examined.

5198

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.)
(*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.)

AS MEDICALLY UNFIT.

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.

President.

PLACE M. D. 10 Winnipeg, Man.

DATE May 15/1919.

Members

TO BE COMPLETED WHEN TREATMENT IS REFUSED

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

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

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

President.

PLACE.....

DATE.....

Members

APPROVED BY

Assistant Director of Medical Services.

DATE MAY 16 1919

APPROVED BY

Director-General of Medical Services.

DATE.....

Army Form B. 103.

Sheet II

Casualty Form—Active Service.

Regimental Number 327881

Regiment or Corps C.F.A.

Rank Gunr. Surname Nicoll Christian Name Harry Lawson

Religion Pres Age on Enlistment 18 years months.

Enlisted (a) 9-3-16 Terms of Service (a) War + 6 mos Service reckons from (a) 9-3-16

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

Extended { } Re-engaged { } Qualification (b) or Corps Trade and Rate

Farmer Signature of Officer.

5198

Report: Date	Report: From whom received	Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
		Embarked			
		Disembarked			
		Admitted to 1st C.C.D. from 2nd C.C.D. D.O. Pt. II. No. 279 D 9.10.18.			
6.11.18		Ceases to be attached on proceeding to C.R.A.	D.O. No 307. D/6.11.18		
			A W Gartshore For Lieut Colonel 1st Canadian Command Depot		
8-11-18	C.A.R.D.	Ceases to be on command to 1st C.C.D. S.O.S. to Comp Bde C.R.A.	Bordon 6.11.18	B.O. No 31	
			M B Rother Lt for O.C., C.A.R.D.		
7-11-18	Comp Bde C.R.A.	T.O.S. from C.A.R.D.	Bordon 6-11-18	B.O. No 169	

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

[P.T.O.

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

5198 (C)

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				
3/12/18	Comp Bde, CRA	O/C to Kinmel Park Rhyl pending return to Canada	Bordon	3/12/18	BOP 195
6/12/18	CRA.	att to 66th Kinmel Pk Camp for return to Canada			Ref Pt II Orders 292 for 6. Block XI MD 10
10/12/18		ceased to be attached to 66th Kinmel Pk Camp on embarking for Canada			Ref Pt II Orders 293 for 6. Block XI MD 10 66th Kinmel Pk Camp

HMT "MELITA"
EMBKD Dec 10 1918
DISEMBKD

T. O. S. No. 10 DISTRICT DEPOT
10/12/18 D. O. 258 PARA 1884

Discharged 27-5-19.
D. O. 143. Para 3

H. E. Sutton Lt. Col.
Officer Commanding No. 10 District Depot.

Major
Officer Commanding No. 10 District Depot

Stretcher

Army Form W. 3172.

Horton War Hospital.

Ward A No. of Bed Date 23/4/18

Regtl. No.	Rank and Name	Corps	Part to be X-Rayed
327881	Gnr Nicholl	14th Bde C.F.A.	Rt Shoulder

Short History of Case.
(To be completed by M.O. i/c case)

S. W. Rt upper arm

Signature of M.O. E Daniel

Date 23.4.18

Report on Result of X-Ray Examination.
(To be completed by Radiographer.)

No. of Plate 4620.

Small drop of metal in shoulder. Nothing else abnormal though there is a doubtful shadow showing over neck of 3rd rib

Signature of Radiographer DL

Date 26.4.18

W 8290—3262 100,000 8/15 H W V(M 1318) G. 15/1043

2192. W.6520/M.2849. 10,000 Pads. 8/17. A. J. W. & Co., Ltd. E.1631.

E

Army Form W. 3172.
(In pads of 50.)

5766 Hospital.

Ward P.O. 5198 No. of Bed Date 5-4-18

Regl. No.	Rank and Name.	Corps.	Part to be X-Rayed.
327881	Nicholl H L Gnr	61 Bty, 14 Bde RFA	

SHORT HISTORY OF CASE.
(To be completed by M.O. i/c case.)

Gsw rt thigh
R shoulder fractured
(back)
Rheumatism

Signature of M.O.

Date

REPORT ON RESULT OF X-RAY EXAMINATION.
(To be completed by Radiographer.)

No. of Plate

No FB. seen in head.
F.B. just to outer end scapula Size ⬭. Chest clear good movement of diaphragm

Signature of Radiographer W C Smith

Date 5-4-18. Sgt

B. W. Bed 59

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

DISTRICT 10

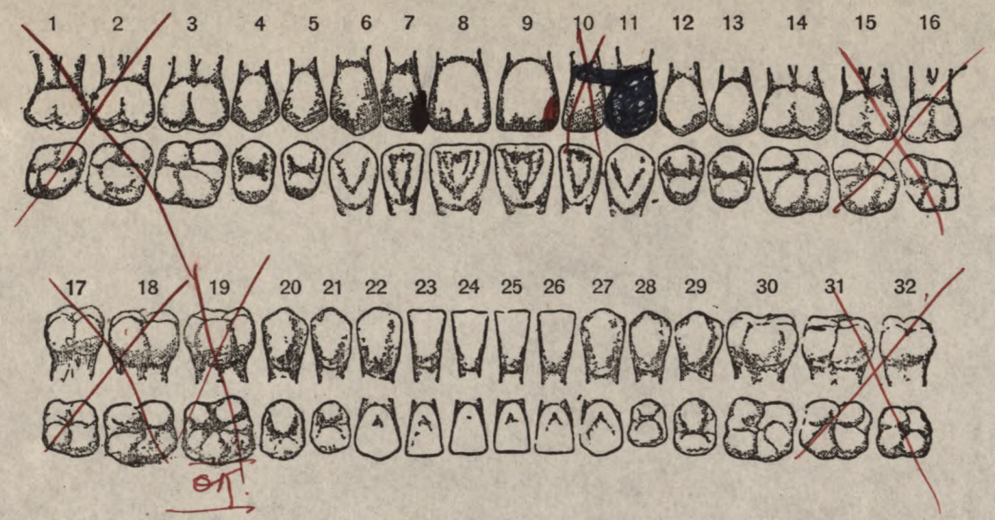
No. 327881

NAME OF SOLDIER Meade H. L.

RANK Sgt

REGIMENT 61 Bty C.F.A.

admin Military Hos 5198 d.o.s. 4-29



INSTRUCTIONS

1. On examination the condition of patient's mouth to be marked on diagram in red ink.
2. On first line of report, record of same to be made in red ink.

Only such entries to be made on this sheet as will show:

1. Condition on examination (in red).
2. Condition on leaving Canada.
3. Condition on discharge from the Service.

Rec for file

	Date	Amalgam	Temporary Filling (a) G. P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhœa	Synthetic Porcelain	Extracting	Dentures U	Dentures L	Dentures P	Gold Clasp	Gold Filling	Crowns Gold	Crowns Porcelain	Bridge Work	Prophylaxis	Operator	Military District	Remarks: Cavities	Remarks: Extractions
Condition on first Examination										7-9	1-2 10 15-16													
Feb 7	1919																				Pasadena Cap	10		
Mar	20 1919										17-18 31-32										" "	10	clean & inlay	
"	22						mfg. for								Gold	bridge				DA McLaren		10		
"	28						cemented in								bridge	from	10 to	11		" "		10		
April	24																					10		
"	28																				" " "	10		
																	Complete							

F.F.B. 465
500m-10-18
1772-39-950

MAY 2

5198

CASE HISTORY SHEET.

(F) 38

Man. Mil Hospital. Whs Station.

No. 327881 Rank Pte Name Nichol Harry Age 20

Unit C F C A Completed years of service Where and how long } C 6/12 E 11/12 F 8/12

Date of admission 25-2-19 Date of discharge MAY 20 1919

Diagnosis F B Rt Hand Place of origin Arras

CONDITION ON ADMISSION AND PROGRESS OF CASE

Feb 26th 1919

Complaint----- Pain in dorsal surface of the right wrist. Pain in the region of the right shoulder blade. He states that there is a piece of shrapnel in the wrist.

Presents History--- Always healthy prior to enlistment. Remained fit in the army till wounded, April 5th 1918. On that date he received shrapnel wounds of right wrist, and back, also a small wound over the deltiod muscle right shoulder. Foreign bodies were removed from the region of the scapula at a CCS in France. Patient states that there is still a small piece of metal in the wrist and also a piece near the scapula. Wounds were all healed in 4 months time and he eventually became an "A" man. returned to Canada on a transpor Dec 22ndand sent here from 10th DD for removal of ~~XX~~ F.B. from wrist.

Present Condition--- He is a robust, well developed, and well nourished man. Has no complaints aside from local conditions.
There are 3 small scars on dorsal surface of the right wrist, all well healed and non-adherent. There is a small FB. to be felt just beneath the skin near the styliod process.
Many stellate scars over the right scapula, the largest being 5" long and 1" wide. There is some loss of bone ~~in~~ from the spine of the scapula. Considerable tenderness to pressure at angle of scapula.
There is slight limitation of abduction in the shoulder joint, otherwise no involvement of any joint.
There is slight weakness of the deltoid, supraspinatus, and infraspinatus muscles.

FAMILY HISTORY
(Tuberculosis, mental or nervous diseases.)

TREATMENT Transfer to Surgical Ward.
(Especially any specific or special form.)

15-3-19- X Ray right wrist Gibson & Galloway.

17-3-19. For consultation on 22-3-19. Treatment

22-3-19 Removal of M.F.B. ordered Lt Col. Galloway Dr Gibson
Transferred to Roblen II for operation. F D Allen

CONDITION ON DISCHARGE,
(and disposal made of case.)

28.3.19. One small F.B. removed back of styloid process of ulna. One behind base of first metacarpal. Third about middle of shaft third metacarpal. Wds healing.
Op by Dr Gibson

Date. Medical Officer i/c case.

M. F. B. 313a.
200M.—5-18.
1772-39-439.

C9097.

Army Form B. 181.

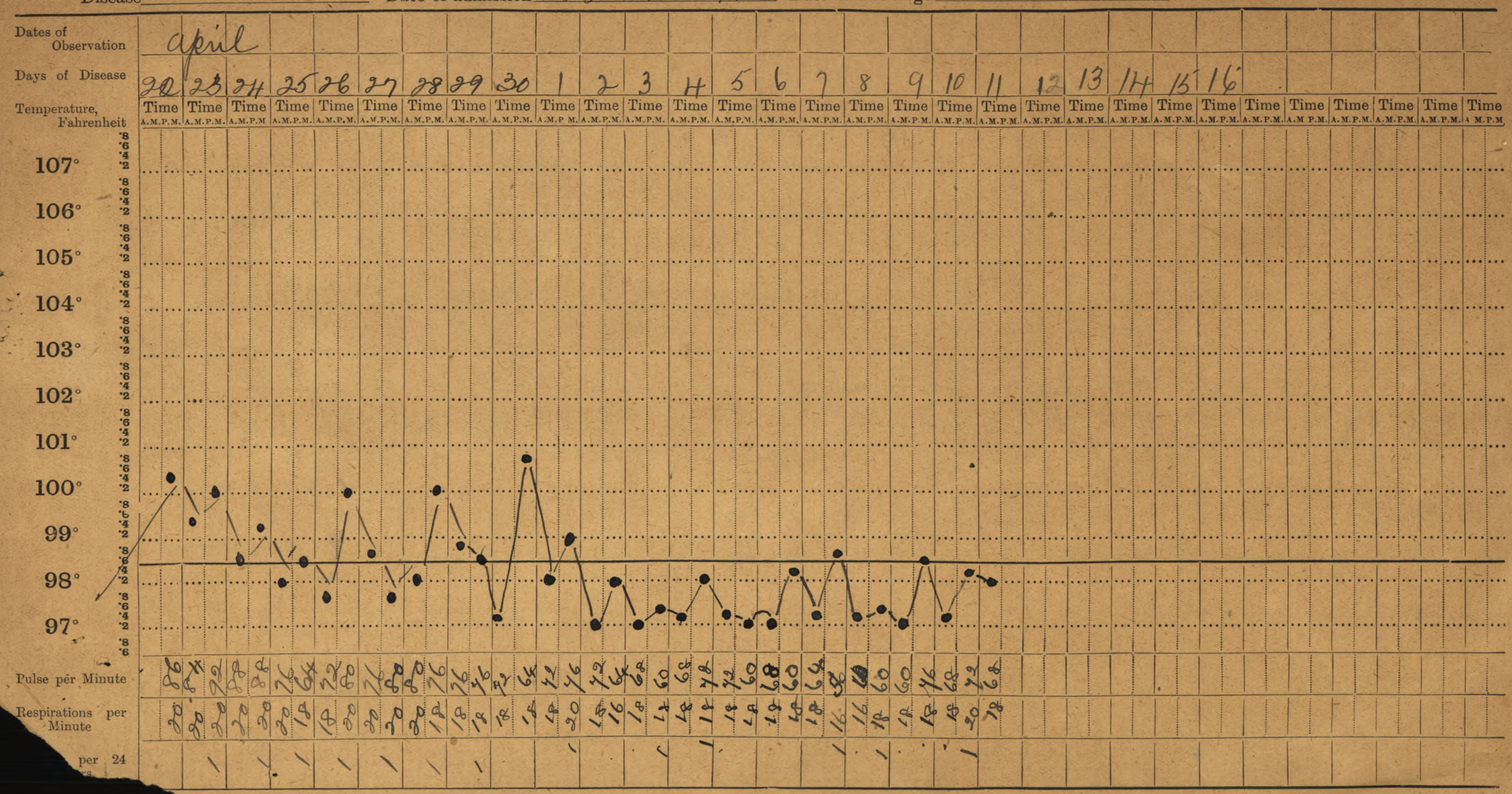
CLINICAL CHART.

(To be attached to Case Sheet.)

Corps 14th C.S.G. Military Hospital Horton Epsom

No. _____ Rank and Name Nicholl H. L. Gnr. Age 19. Service _____

Disease _____ Date of admission 22. 4. 18. Date of discharge _____ Result _____



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

Signature _____ In charge of case.

Army Form B. 181.

CLINICAL CHART.

(To be attached to Case Sheet.)

Corps ____________ Military Hospital ____________

No. ____________ Rank and Name ____________ Age ________ Service ____________

Disease ____________ Date of admission ____________ Date of discharge ____________ Result ____________

Dates of Observation																															
Days of Disease																															
Temperature, Fahrenheit	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.
·8 ·6 ·4 107° ·2																															
·8 ·6 ·4 106° ·2																															
·8 ·6 ·4 105° ·2																															
·8 ·6 ·4 104° ·2																															
·8 ·6 ·4 103° ·2																															
·8 ·6 ·4 102° ·2																															
·8 ·6 ·4 101° ·2																															
·8 ·6 ·4 100° ·2																															
·8 ·6 ·4 99° ·2																															
·8 ·6 ·4 98° ·2																															
·8 ·6 ·4 97° ·2																															
·8 ·6																															
Pulse per Minute																															
Respirations per Minute																															
Motions per 24 Hours																															

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

Signature ____________ In cl

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

N

1727

Date of Assignment Sept 1/16

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

15			

PARTICULARS OF SEPARATION ALLOWANCE

No. 327881

Rank Pr. Promoted Reverted Discharge

Soldier's Name H. L. Nicoll.

Battalion 5-9 Batty. 15 Bde.

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name Mrs Lily. Nicoll.

Address The Valley. Newdale Man.

Change of Address

1

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	
1917 Dec 31	—		240 -	240 -	
Jan 18	L 66845		15	15	
Feb	J 73498		15	15	✓
Mar	P 90540		15	15	✓
April	O 11271		15	15	✓
May	R 21826		15	15	✓
June	N 25950		15	15	✓
July	J 28857		15	15	✓
Aug	R 37262		15	15	
Sept	U 47284		15	15	✓
Oct	Y 48124		15	15	✓
Nov	U 61705		15	15	✓
Dec	X 70674		15	15	✓
				420 00	

REMARKS

13615-H-22.

M.R.C. Destroy 48420. 23-12-18

A/c Closed 31-12-18

Ret'd per Melita

Date 17-12-18 M.F.W.187 23-12-18

Clerk E. Reade

CANADIAN ASSIGNED PAY AUDITED

A Black

AUDIT CLERK

DATE 9.5.19

A STENCIL HAS BEEN MADE FOR THIS ACCOUNT

M. F. W. 128
400m—6-17—1772-39-1141
L. L. 22320—M. & D. 7693.

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

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

M. F. W. 128
400M.—6-17—1772-39-1141
L. L. 22320—M. & D. 7983.

AUDITOR	PAYMASTER

36

29

MOR S. N 261

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

REGT. No. 327881 RANK Gnr NAME (IN FULL) Nicoll H.L.

NEXT OF KIN | RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? No | DATE EFFECTIVE

TO WHOM PAID | RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F. C.F.A. | IF IN P.F. WHAT UNIT? | (BLOCK LETTERS SURNAME FIRST)

PLACE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

DATE OF ATTESTATION 9-3-16 | TRANSFERRED TO | DATE | AUTHORITY

ASSIGNED PAY $ 15.00 | DATE EFFECTIVE

PAYABLE TO Mrs Lily Nicoll | RELATIONSHIP | ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS ~~The Valley~~ Newdale Man

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE

DISCHARGED PLACE CMD 10 DATE 24/5/19 REASON M.U. AUTHORITY G.O. 143 IF ENTITLED TO POST DISCHARGE PAY

183 Days to C.G.

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	C.	$	C.	TOTAL CREDITS $	C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	DATE	COL. NO. 2 NO.	DATE	COL. NO. 3 NO.	DATE	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.	$	C.	TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT							14	59	14	59																									14	59	Trans. Cr. 14 59 for pay on 1-1-19 A/c closed Dec 1 P.C.
							14	59																													
1/1/19-31/1/19	31	1.10	34	10			11	20	59	89	98	61	13799	13780			25	79	19	10			15 -						31/1		59	89					
1/2-28/2	28	1.10	30	80					30	80			19633	19634					15	80			15 -								30	80					
1/3 31/3/19	31	1.10	34	10					34	10			27918	27919					19	10			15 -						31/3		34	10					Hosp Sec. 25-2-19 80 57
1/4-30/4	30	1.10	33	-					33	-			30 30/4	30 30/4					18	-			15 -						30/4/19		33	-					
1/5-27/5	27	1.10	29	70	35 -				64	70	26	25/5/19	23 23/5/19	23 23/5/19			35 -		16	70			13 -								64	70					~~G.O.~~ 35 - issued. ~~G.O.~~ 20.5.19 50 141 ~~G.O.~~ 20.6.19 20 143
			161	70	35 -		40	38	237	08							60	79	88	70			73 -								222	49			14	59	
May 27	183								420 -						577695		70 -																		350 -		70 - 1st Pay' w.e.f.
June 27															774253		70 -																		280 -		70 - 2nd " "
Aug'															1203698		70 -																		210 -		70 - 3rd " "
													Aug 27		1242403		70 -																		140 -		70 - 4th " "
													Sept 24		1246248		70 -																		70 -		5th " "
													Oct 24		1691484		70 -																		70 -		6th "
									420 -								420 -		a/c closed												420 -						

AUDITED OCT 23 1919

30M-11-18.—L.L. 50877-M. & D. 9553.

MONTH	PAY AND F.A.				OTHER CREDITS				TOTAL CREDITS		ACQUITTANCE ROLLS						CASH PAYMENTS						ASSIGNED PAY		REGI-MENTAL CHARGES		OTHER CHARGES				TOTAL DEBITS		BALANCE				PARTICULARS OR REMARKS
	NO. OF DAYS	RATE	AMOUNT								COL. NO. 1		COL. NO. 2		COL. NO. 3		COL. NO. 1		COL. NO. 2		COL. NO. 3												DEBIT		CREDIT		
			$	C.	$	C.	$	C.	$	C.	NO.	DATE	NO.	DATE	NO.	DATE	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	