

29-8-18
Proceedings of Court of Inquiry or on men
reported Missing on Active Service.....

Attestation Papers.....

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet.....

Compulsory Stoppages.....

Casualty Forms.....

Proceedings on discharge.....

Corps History Sheet.....

Date and No. of Deposit Receipt for
Purchase Money and Amount.....

Parchment Certificate.....

Medical Report for Invalids.....

Medical History Sheet.....

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet.....

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate.....

AJB 122 — 1

MHC 751 — 1

M. J. B. 288 — 1

AJB 1237 — 2

M. J. B. 186 — 2

M. J. B. 5007 — 1

M. F. W. 62.
50M.-9-16.
H. Q. 1772-39-635.

DISCHARGE DOCUMENTS

Name CADMAN LEOPOLD W.

Regt. No. 222940 Rank Pte

Corps 85th Battrn

No longer fit for war service

00265

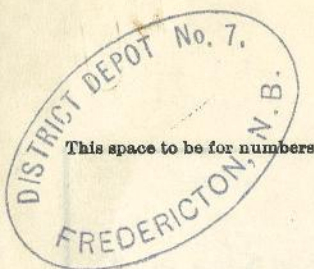
R. O. No.

H. Q. No.



Rev 8 '32

3
2-15
2-15
7 15
3



Proceedings on Discharge.

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

No.	222940
Rank	PRIVATE
Surname	CADMAN
Christian Name	LEOPOLD WELLINGTON
NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.	
Corps (Squadron, Battery or Company)	85th Battalion.
Date of Discharge	August 19, 1918.
Place of Discharge	Fredericton, N. B.
1. DESCRIPTION AT THE TIME OF DISCHARGE.	
Age.....38.....years.....2.....months.	Descriptive Marks Crescentic scar base left thumb ($2\frac{1}{2}$ "). <i>Deceased 28-11-36.</i> <i>649-C-12979</i>
Height 5.....feet.....7.....inches.	
Complexion Dark	
Eyes Blue	
Hair Dark	
Trade Farmer	
Intended place of residence } (To be given as fully as practicable.)	Sackville, N. B.
2. The above-named man is discharged in consequence of being no longer fit for War Service. K.R. & O. 1912. Para 392. Sec. XVI.	
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.	
To be in the hand writing of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.	3. Conduct and character while in the service have been, according to the records, etc.
	VERY GOOD.
	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.)	

M. F. B. 218.

100M.—1-17.
H. Q. 1772-39-113.

H. S. G. Comp.
28-1-19
A. G.

(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.....

ONE CASUALTY STRIPE

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) Fredericton, N. B. *W. J. Osborne* Lieut. Col.
O. C. District Depot No. 7.
(Date) August 19, 1918. 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.

(Place) Fredericton, N. B. *Leopold Cadman* (Signature of Soldier.)
(Date) August 19, 1918. *P. W. Massey* (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) Fredericton, N. B. *W. J. Osborne* Lieut. Col.
(Signature) O. C. District Depot No. 7.
(Date) August 19, 1918.

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.)

None


Leopold W. Cadman

Reg. Conduct Sheet B. 263	Minutia form B. 263	Attestation Paper Minutia form B. 263
Squadron Battery Company	Conduct Sheet B. 263	Proceedings on Discharge B. 263
Copies of Convictions by C. P. in MS.	Minutia form B. 313	In the case of recruits who are rejected on final approval, the discharge documents will consist of
Medical Report for Invalids B. 237	" B. 237	(a) Proceedings on Discharge
Statement of Man's Account on Transfer and Last Pay Cer- tificate D. 877	" D. 877	(b) Attestation (c) Medical History Sheet (in the event of such having been prepared)
*Only if discharged "Medically unfit"		
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.		

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form B. 263.	Attestation Paper,	Militia Form B. 235.
Squadron } Battery } Company }	Conduct Sheet, " B. 263a.	Proceedings on Discharge	" B. 218.
Copies of Convictions, by C. P.	in MS.	<p>In the case of recruits who are rejected on final approval, the discharge documents will consist of</p> <p>(a) Proceedings on Discharge.</p> <p>(b) Attestation.</p> <p>(c) Medical History Sheet (in the event of such having been prepared.)</p>	
Med. Hist. Sheet,	Militia Form B. 313		
Medical Report for Invalid*	" B. 227.		
Statement of Man's Account on Transfer and Last Pay Cer- tificate,	" D. 877.		
*Only if discharged "Medically unfit."			

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.

Number 222940 Rank pte. 
Surname CADMAN
Christian Name Leopold Wellington
Units 85th. Bn. Can. Inf. Theatre of War France
Date of Service 20-3-17

Remarks _____

Latest Address _____

Roll No. _____

200m.-6-21.44

Sackville

G. P. O. N. B.

B. Page 21170.

GRATUITY (IMPERIAL)

CHRISTIAN NAME

SURNAME

REG. No.

SCHEDULE No.

LINE No.

UNIT RETIRED OR DISCHARGED FROM

PLACE OF RETIREMENT OR DISCHARGE

DATE RECEIVED FROM OTTAWA

IMPERIAL DEPOT No.

DATE RECEIVED FROM REG. DEPOT.

DATE FORWARDED TO OTTAWA

Army Form B. 268.

C / 81

Proceedings on Discharge.

No. 222940 Army Rank Private.

Name C A D M A N, L.W.
(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)

Corps 85th Bn. 17th Res.

Battalion, Battery, Company, Depôt, &c. N.S.R.D. (O)
(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)

Date of discharge _____

Place of discharge Invalided to Canada for further treatment.

1. Description at the time of discharge.

Description at the time of discharge.		Descriptive marks.
Age _____ years _____ months		
Height _____ feet _____ inches		
Chest measure- ment { girth when fully expanded _____ ins. range of expansion _____ ins.		
Complexion _____		
Eyes _____		
Hair _____		
Trade _____		
Intended place of residence (To be given as fully as practicable) { _____ _____		

(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)

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

(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)

3. Military character :—

4. Character awarded in accordance with King's Regulations :—

To be filled in on the soldier quitting the Colours.

Certified that the above is an accurate copy of the character given by me on Army Form B. 2067* and that Army Form D. 489 was awarded in this case.

Initials of Commanding Officer. _____

Army Form B. 2088 has been issued to* _____

D. D. & L., London, E.C.

A4502	Wt.	W17176	M291	500,000	2 16	Sch. 3)	Forms B. 268 40
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* Strike out if not applicable.

OVER.

5. He is in possession of the following number of G.C. badges (if the man is a N.C.O. and enlisted prior to 1st July, 1881, the number he would have been entitled to had he not been promoted should be stated).

Is it probable that he will be entitled to another good conduct badge before the confirmation of these proceedings?

Classification for service, or proficiency pay... .. Class

6. Campaigns, Medals and Decorations

Certificate of education

7. His accounts are correctly balanced, and I have impartially inquired into all matters brought before me in accordance with Regulations.

(Place)

(Date)

Commanding Battn. Regiment.

8. *Certificate to be signed by the soldier on discharge.*

I hereby acknowledge that I have received all my pay and allowances (including clothing allowance), and all just demands up to the present date, subject to the reservations of the claims noted on the 3rd page.

(Place)

(Signature of Soldier.)

(Date)

(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 at 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 towards engagement to (the date to which the record of service is completed) years days.

Further service " " (the date of confirmation of discharge) " "

Total " "

11. *Confirmation of discharge.*

The discharge of the above-named man is hereby confirmed for (date)

(Place)

Signature

(Date)

Commanding officers (or the Paymaster if at Netley) will issue to every discharged soldier whose claim to pension, either on account of service or disability, is to be brought under the consideration of the Chelsea Board, a memorandum for his guidance on Army Form D. 401, and will at the same time transmit to the Secretary, Royal Hospital Chelsea, a descriptive return of the man on Army Form D. 400.

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.

1. Proceedings on discharge.
(Army Form B. 268.)
2. Proceedings on transfer to reserve (if any).
(Army Form B. 2056.)
3. Duplicate attestation.
4. Army Form B. 97 (if any).
5. Declaration of change of name (if any).
6. Re-engagement paper (if any).
Army Form B. 136.)
7. Authority for continuance, or extension, of service (if any).
Army Form B. 221.)
8. Court of Inquiry on an injury (if any).
(Army Form A 2.)
9. Regimental conduct sheet.
(Army Form B. 120).
10. Company conduct sheet.
(Army Form B. 121.)
11. Copies of convictions by Civil Power (if any).
12. Medical history sheet.
(Army Form B. 178).
13. Medical report on invalid (if any).
(Army Form B. 179).
14. Copy of receipt for purchase money (if any).
15. Attestation of fraudulently enlisted man for corps in which he has not been held to serve (if any).
16. Detailed statement of former service allowed to reckon towards pension (if any).
17. Copy of 3rd page attestation (in the case of men from abroad entitled to deferred pay who go to Netley or the discharge depot for discharge).
18. Descriptive return (Army Form D. 400), where required.
See section 11 on second page.
19. Active service casualty form.
(Army Form B. 103).
20. Employment sheet.
(Army Form B. 2066).

In the case of recruits who are rejected before, or on, final approval, the discharge documents will consist of—

1. Duplicate attestation.
(On third page the date and cause of discharge will be entered and signed by the competent military authority).
2. Medical history sheet (if any).
(Army Form B. 178).

Instructions as to the preparation, dispatch, and custody, of discharge documents.

1. When a soldier is to be discharged, the documents retained with the duplicate attestation will be placed inside this form. Should any of the documents be missing, an explanation of the deficiency, signed by the commanding officer, must be substituted for the missing document. The officer in charge of records will then extract from the original attestation, any documents required to complete the list of discharge documents enumerated in the margin, which will then be placed in this form in the sequence given.

2. When men are discharged from the colours at home as medically unfit, or with claims to pension, Army Form B. 268 will be sent confirmed, together with the duplicate attestation and documents retained therein to the officer in charge of records 10 days in advance of the date for discharge in the case of invalids, and 14 days in other cases. This officer will then extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin, place them in this form, and after carefully checking the duplicate attestation with the original forward the whole to the Secretary, Royal Hospital, Chelsea. When such men are discharged abroad, the same procedure will be adopted as above, with the exception that the discharge documents will be sent to the officer in charge of records immediately after discharge takes place (except in the case of men who are granted gratuities on discharge from local battalions or companies, Royal Artillery).

3. When soldiers are sent home from abroad for discharge, the documents retained with the duplicate attestation will be placed inside this form and sent home with the men for transmission to the officer who carries out the discharge, together with the following additional forms:—

- (a) Discharge certificate (Army Form B. 2079 or Army Form B. 264).
- (b) Character Certificate (Army Form B. 2067) if entitled.
- (c) Copy company conduct sheet (Army Form B. 121) when required under King's Regulations.

The duplicate attestation and documents retained therein will be sent to the officer in charge of records, who will extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin and place them in this form.

4. The discharge documents of re-enlisted pensioners, on re-discharge, will be sent to the officer in charge of records, who will extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin, place them inside this form, and forward the whole to the Secretary, Royal Hospital, Chelsea, irrespective of the cause of discharge.

5. The original and duplicate attestations of recruits who are rejected before, or on, final approval will be retained by the approving officer for one year, when they will be destroyed.

6. In all other cases the discharge documents will be sent, directly the discharge is carried out, to the officer in charge of records of the unit concerned.

7. Postage need not be paid, and receipts are not required, in the case of documents sent to Chelsea or to the War Office,

8. When the discharge documents of men not entitled to pension are sent to the officer who will have final charge of them, they are to be accompanied by Army Form B. 279, and that officer will, if they are found to be correct, sign and return Army Form B. 279. Should any document be missing, he must at once apply for it.

9. The officers having final charge of the discharge documents will arrange them according to regimental numbers, and enter the names in the alphabetical index, Army Book No. 129.

ATTESTATION PAPER.

No. 222740

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your name? Leopold W. Cadman
2. In what Town, Township or Parish, and in what Country were you born? Anderson Settlement, N.B.
3. What is the name of your next-of-kin? Mrs. Mabel Cadman - (Wife)
4. What is the address of your next-of-kin? Backsells N.B.
5. What is the date of your birth? 5th May - 1880
6. What is your Trade or Calling? Laborer
7. Are you married? yes
8. Are you willing to be vaccinated or re-vaccinated? Yes Increased L.W.C. yes
9. Do you now belong to the Active Militia? no
10. Have you ever served in any Military Force?.. no
If so, state particulars of former Service.
11. Do you understand the nature and terms of your engagement? yes
12. Are you willing to be attested to serve in the }
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? } yes

Leopold Cadman (Signature of Man.)
Mabel Cadman (Signature of Witness.)

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

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

Date 28 Oct 1915 Leopold W. Cadman (Signature of Recruit)
J. E. Hopkins (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

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

Date 28 Oct 1915 Leopold W. Cadman (Signature of Recruit)
J. E. Hopkins (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 Halifax this 28 day of Oct 1915.

J. P. Prinaud for the Magistrate (Signature of Justice)
I certify that the above is a true copy of the Attestation of the above-named Recruit.

L. W. Cadman Lt. Col. (Approving Officer)
2nd. in Com'd. 85th. Overseas Batt. (Nova Scotia Highlanders.)

Description of balmain recruit on Enlistment.

Apparent Age 35 years months.
 (To be determined according to the instructions given in the Regulations for Army Medical Services.)

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

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

Height 5 ft. 7 ins.

Chest measurement { Girth when fully expanded..... 38 ins.
 Range of expansion..... 2½ ins.

Complexion Light

Eyes Blue

Hair Black

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

Height 15' 7"

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 24th Dec 1915 191

Place Halifax, N.S. Joseph Haggis 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.

Leopold W. Corman 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 DEC 20 1915 191

..... Lt. Colonel
 Comd'g 85th "Overseas" Batt'n, C.E.F.
 (Nova Scotia Highlanders.)

FH Rank Name CADMAN, Wellington, Leopold x Reg'l No. 222940 x
 Unit 85th. Bn. / If in perm. Corps, } Married or Single Married x
 What Unit? }
 Place and Date of Enlistment Halifax, 28. Oct. 1915. x Place of Birth Anderson Settlement
 Name and Address, Next-of-Kin Mrs. Mabel Cadman, x N. B.

P.O. Sackville, N.B. Canada x

Relationship Wife x

Assigned Pay Monthly \$

Payable to

Separation Allowance \$

Payable to

Relationship

N/E. R.B. No. 3440

File R.L.

Relationship

Category Can MU

Discharge, Date and Place

Reason

Character

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 S.S. Olympic 18/10/16					
2-2-17	Ex 85 th	Adm'd to Hosp	Witley	2-2-17	Pt 50 3. Chrs Venereal
10-2-17	"	Attd to 185 th field. r. g. d	"	10-2-17	36. (185 th Bn 0043)
14-2-17	185 th Bn	Beases to be att'd	"	13-2-17	40
20-3-17	85 th Bn	Rejoined Overseas	"	20-3-17	36 Supp.
5-4-17	✓	Dis from 200.	✓	19-2-17	C.L.B. 33. V.O.O.
24-3-17	85 th Bn.	T.O. from 85 th Bn Details Eng	Field.	21-3-17	Pt 20 44.
5-7-17	✓	To 35 th Gen Hosp.	Gelais	29-6-17	C.L. 492. E.S.W. R. 2nd.
13-7-17	✓	1st Western Gen. Hosp.	Liverpool.	8-7-17	C.L.B. 103
12-7-17	✓	Ino 'W' and posted to N.R.D.	Id	7-7-17	Pt 87.
					152 48 8/7 N.R.D.

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.				
25.9.17	NKR	ban Mil Hospil	L'pool.	22.9.17	bl B50 Csw R Foot.
30.11.17.	"	Invalided to Canada (85)		19.11.17	" 77 "
3.12.17	M.I.R.D.	S.O.S. on invaliding to Canada.	Pte B'kett	19.11.17	Pt # 259

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate



This is to Certify that No. **222940** (Rank) **Private**

Name (in full) **LEOPOLD WELLINGTON CADMAN** enlisted in
the **85th Battalion**

CANADIAN EXPEDITIONARY FORCE at **Halifax, N. S.** on the **28th**
day of **October** 19**15**

HE served in **FRANCE from 20-3-17 to 7-7-17**

being no longer fit for War
and is now discharged from the service by reason of
Service. K.R. & O. 1912. Para. 392. Sec. XVI.

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

Age **38 years 2 months**
Height **5 feet 7 inches**
Complexion **Dark**
Eyes **Blue**
Hair **Dark**

Marks or Scars
Crescentic scar base left thumb
(2½").

Signature of Soldier

Issuing Officer **COLONEL**

AUGUST 19, 1918

O. C. DISTRICT DEPOT NO. 7

Date of Discharge

Appointment

Fredericton, N. E. 19th

August 18

Signed at **7** this day of **19**

in Military District No. **D.D. 7 86-C-81**

File Reference No.

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. 222940 (Rank) Private Name LEOPC LD WELLINGTON CADMAN

Unit 85th Battalion

Address on Discharge Sackville, N. B.

Character and Conduct VERY GOOD

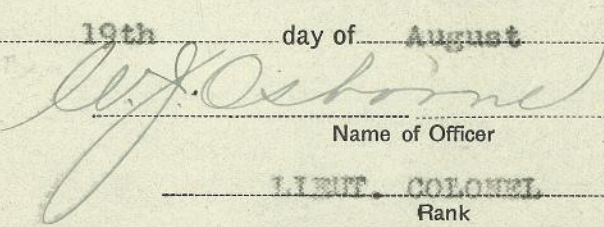
Former Occupation Farmer

Special Qualifications of Value in Civil Life

Medals and Decorations NIL

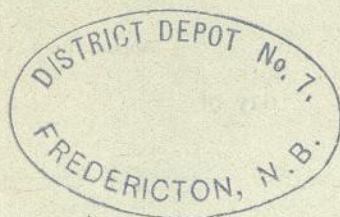
Remarks ONE CASUALTY STRIPE -- Wounded 30-6-17

Signed at Fredericton, N. B. this 19th day of August 1918


Name of Officer

LIEUT. COLONEL
Rank

O. C. DISTRICT DEPOT N. B. 7
Appointment



SURNAME.

Cadman,

CHRISTIAN NAMES

Leopold Wellington
pte

REGL. NO. 222940

RANK

UNIT

~~154~~ * 71010

Batt.

FORMER CORPS

nil.

CARD NO.

303 Dis. 19-8-18

1001257 20-8-18

FOLL.

x(Hmg)

ex 8

NEXT OF KIN.

NAMES IN FULL

Cadman, Mrs. Mable

RELATIONSHIP TO SOLDIER

Wife

ADDRESS

Sackville, N. B.

CHANGE OF ADDRESS

COUNTRY OF BIRTH

Canada Anderson

DATE

May 5, 1880

PLACE OF ATTESTATION

Halifax, N. S.

DATE

Oct. 28-15-

Sailed from Halifax per S.S. "Olympic" 12/10/16

5913

4

R/c. 28-11-17.

MARRIED

SINGLE

WIDOWER

TRADE OR CALLING

RELIGION

APPARENT AGE

YEARS

MONTHS

HEIGHT

FEET

INCHES

CHEST MEASUREMENT

INCHES

EXPANSION

INCHES

COMPLEXION

EYES

HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION.

PLACE

DATE

Present Address.

Not stated

Yes
Labourer

Presbyterian

DESCRIPTION.

35

YEARS

MONTHS

5

FEET

INCHES

38

INCHES

EXPANSION

2 1/2

INCHES

Light

EYES

Blue

HAIR

Black

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

M. F. W. 54. (A. F. B. 103.)

Casualty Form—Active Service.

250M.—1-16,
H. Q. 1772-39-920.

Unit, Regiment or Corps

85th Overseas Bn. Nova Scotia Highlanders C.E.F.

Regimental No. 222940

Rank

Pte

Name

Georgie Edward Cadman

C. E. F.

Enlisted (at) 28/10/15

Terms of Service (a)

Duration of War

Service reckons from (a)

date enlistment

Date of promotion to present rank.

Date of appointment to lance rank

Numerical position on roll of N. C. Os.

28-10-15

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				

Embarked, Canada
Disembarked, England.

Halifax.
Liverpool

OCT 13 1916

OCT 19 1916

20-3-17

85th Bn.

Proceeded overseas for service

Witley

20-3-17

Part 11 Orders, no 36 Suppⁿ

MAJOR.
For Officer Com'dg 85th Overseas Bn. C. E. F.

10-2-17

85th Bn.

Attd to 185th for D.R. G.D.

Witley

10-2-17

Rt II. 36/185th D.O. 42

14-2-17

85th Bn.

ceases to be attd.

etc

13-2-17

75th

O C. C. B. D.

Landed in France. Taken on strength 85th Cdn. Bn.

Nom. Roll d 21.5.17

Pt II D. O 24.5.17

Nom. Roll d 14.4.17

Field

23-4-17

B.213, D.C.S.28.

O C. Bn.

Arrived Unit

30.6.17

35 Gen. Hosp.

G. S. W. foot-R.

adm

35 Gen Hosp

29.6.17

W 3084/14060.

30.6.17

O.C. 85 Bn.

Wounded in action

Field

26.6.17

8213, Dec. 50.

7.7.17

O.C. H/S.

Invalideed wounded

Beamthott

7.7.17

W 3083/29921. O. 87/d-12.7.17.

(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.]

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.
			<i>J. M. Andersa</i>		
8-8-17	NSRD	TOS from 85 th Bn of less Cas.	O. Short.	7-7-17	<p> <i>Went for Lt. Col. A. A. G.</i> <i>Canadian Section. G. H. Q. 3rd Echelon. B. C. F.</i> <i>44 II 152</i> <i>18/18/17</i> </p> <p> <i>St. Wabon</i> LIEUT: FOR LT: COL: I/C RECORDS, C.C.M.F. </p>
18-4-18	K Unit	TAKEN ON STRENGTH D.D 7 PART II. ORDER No. 1	<i>Hubert</i>		<p> <i>H. Paul McWally</i> Capt, & Adj., For O. C. District Depot No. 7. </p>
26-8-18.		"DISCHARGED" FROM HIS MAJESTY'S SERVICE K. R. & O. 1912 Par 392 Sec. XVI. DSO #123. C19-8-18.		19-8-18	<p> <i>P. W. Lindsay</i> Lieut. O. C. Discharge Section For O. C. District Depot No. 7. </p>

A. M. G. S.

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.....

(2) Regimental Number..... 222940

(3) Full Name of Soldier..... Cadman Leopold Wellington

(4) Place of Birth..... Anderson Settlement Westmoreland Co
N. B.

(5) Are you married, or not?..... Married.

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

(b) Present Postal Address..... Sackville N. B.

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

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

If so, give number of boys and girls..... 1 Boy 2 girls

Also their names and ages.....

Alberta Cadman	9 years
Aubrey Cadman	6 years
Vessie Cadman	4 years

(9) Is your Father alive? *yes* [*an older son settled in H. 8*

If so, state name and address *William Bedman*

(10) Is your Mother alive? *no*

If so, state name and address *nil*

(11) If your Mother is a widow *no*

Are you her sole support, or not? *nil*

(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.

nil

(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.

nil

(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.

None Arranged

(15) Are you insured? *no*

If so, in what Company? *none*

Have you made arrangements for payment of your Insurance premium? *no*

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

9161 5 5074

Edphur Lt. Colonel
Comd'g 85th "Overseas" Bn. C.E.F.
(Nova Scotia Highlanders)

Officer Commanding.

Date.....

CASE HISTORY SHEET.

N. B. Military Hospital. Fredericton Station.
 No. 222940 Rank Pte. Name Cadman L. W. Age 38
 Unit 85th Btn. Completed years of service Where and how long Cna. 12/12 Eng. 7/12 France 6/12
 Date of admission July 3, 1918. Date of discharge 4-8-18.
 Diagnosis Place of origin

CONDITION ON ADMISSION AND PROGRESS OF CASE.

Shows a healed bullet wound on dorsum of rt foot. There is a sharp projection beneath skin on outer side below ext malleolus which aches. Foot is much deformed & arch is flattened. whole foot aches when he walks or stands around much. Chest & abdominal organs normal.

FAMILY HISTORY.

(Tuberculosis, mental or nervous diseases.)

neg.

TREATMENT.

(Especially any specific or special form)

massage.

CONDITION ON DISCHARGE.

(and disposal made of case.)

Date 4-7-18.

Warren W. Gregor

Medical Officer i/c case.

Bullet

5

Sincere

Lower

Foot Rt-

CASE HISTORY SHEET.

N. B. Military Hospital. Fredericton Station.
 No. 222940 Rank Pte. Name Cadman L. W. Age 38
 Unit 85th Btn. Completed years of service ^{Where and how long} Cna. 12/12 Eng. 7/12 France 6/12
 Date of admission July 3, 1918. Date of discharge 9-8-18
 Diagnosis Bw Dorsum & foot with impaired function Place of origin France

CONDITION ON ADMISSION AND PROGRESS OF CASE. Shows a healed bullet wound on dorsum of rt. foot. There is a sharp projection beneath skin on outer side below ext malleolus which aches. Foot is much deformed & arch is flattened. Whole foot aches when he walks or stands around much.
 Chest & Abdominal organs. normal

FAMILY HISTORY
 (Tuberculosis, mental or nervous diseases.)
 Nil neg

TREATMENT
 (Especially any specific or special form.)
 massage.

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

Date 4-7-18 E J. W. Gregory
 Medical Officer i/c case.

No. 222940 RANK *Pte.*NAME *Cadman L. H.*

T. O. S. 5-10-15

UNIT

*85th Battalion C. B. I.**(Nov. paylist)*

M. D. 6

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1915</i>	<i>1915</i>			
<i>Oct. 5</i>	<i>Nov. 30</i>	<i>✓</i>		
<i>Dec.</i>		<i>✓</i>		
<i>1916</i>	<i>1916</i>			
<i>Jan.</i>		<i>✓</i>		
<i>Feb.</i>		<i>✓</i>		
<i>Mar.</i>		<i>✓</i>		
<i>Apr.</i>		<i>✓</i>		
<i>May</i>		<i>✓</i>		
<i>June</i>		<i>✓</i>		
<i>July</i>		<i>✓</i>		
<i>Aug.</i>		<i>✓</i>		
<i>Sept.</i>		<i>✓</i>		
<i>Oct.</i>		<i>✓</i>		

UNIT SAILED

OCT 12 1916

Wellington, Leopold,
 Name **CADMAN Leopold** Rank **Private** Reg. No. **222940**
 Unit **85th. Battalion (Canadian Infantry)**
 Next of Kin **CANADA**

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1917						
3-2	Connaught Hsp.	Aldershot	N.Y.D.	23		
19-2	Discharged		V.D.G.	B33		
29-6.35	G.H. Calais.	GSW R. Foot.	<i>W.D. G.</i>	A.92	M5678.5-7.	
8-7.	1st. Wstn. G.H. Fazak'ly.	H. Lvpl.	-do-	B103		
22.9.17	Trans Can Milly	Kirkdale	do	1920		
(7081)	2534					
19.11.17	Invalided to Canada	do	do	B77		
R 220	1792	RR				

[illegible]

Surname **Cadman** Christian Name or Names **L.M.** Reg. No. **222940**
 Rank _____ Unit _____ Co. _____ Troop _____ Batty. _____
 Pte. **85th Bn. S.P.**
 Hospital _____ Date of Admission _____
Connaught Aldershot 3-2-17.
 Transferred #35 *Gen. Hosp. Calais* Hosp. 24-6-17.
1st Western Gen Liverpool Hosp. 8-7-17
Can. Milit. Liverpool Hosp. 22-9-17
 Hosp. _____

Diagnosis

V.D.G. 94 G.S.W.R. Foot R

(1)
Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

DISPOSITION

Disch 19-2-17 Date

C.I. 12-2-17 23

REMARKS

5-4-17 B/33

5-7-17 A42.

12-7-17 B/02

26-9-17 B20

1-12-17 B77 (2) Invalided to Canada 19-11-17.

Dis. to Canada per H.S.
 Araguaya from L'pool.
 19-11-17.

A.M.D. 2 DEPT.

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

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

REG. NO.

NAME

(SURNAME FIRST)

RANK

CORPS

AGE

SERVICE

NAME OF HOSPITAL

PLACE

DATE OF ADMISSION

DISEASE

DISCHARGE

OPERATION

DISCHARGED TO DUTY

TRANSFERRED TO

DISCHARGED BY MEDICAL BOARD

100M-9-17-H.Q. 1211-8-30.

Bedman L. W. 22146

Pte

85-604

38

38-

8/12 4 7/12 7 6/12

Infectious Hosp

Nova Scotia

17-4-16

Diphtheria

121 4 4 W Wound Rt Foot with impaired function

8-5-16

Military Hosp

over

Dr. Ammonite St John N.B.

18-6-18

Grant
REMARKS

W.B. M. F. & Co. Fredrickton July 3. 1918

G. B. W. Right Foot Bush 9. 8. 18

NAME

RANK AND CORPS

CABLE

No.

DATE

NATURE OF CASUALTY

REGT'L NO

H.Q. FILE NO. 649-

FOLLOWS

No.

FOLLOWS

M5678

5-7-17

C.

Adm. to 35 Gen. Hosp. Calais
 June 29th. 1917. (G. S. W. Pt. Boat) ✓
 Sailed per. H. S. Araguaya - Disembarked
 Halifax. 28-11-17.

LIST NO	HOSPITAL	DATE OF ADMISSION	REMARKS
23.	Connaught Aldershot	3-2-14	N. G. J.
B 33	" " Disc	9-2-17	V. J. G.
A 92.	#35. Gen. Calais	29-6-17	9 sw. R foot.
B 103.	1st Western Gen. Fozakerley	8-7-17	" " "
B. 20①	4th Can. Mil. Liverpool	22-9-17	" " " 17-10-17 J. S. Regt
B 77-2	Invalided to Can.	19-11-17	" " " " " "
84.	M. H. C. C. Fredericton N.B.	3-12-17	Out-P. Armouries, M. C. H.
77-2	" " " " St John.	3-12-17	Tro. Cln. Depot St John N.B.
77-2	" " " " "	1-12-17	Cln. Dep Halifax to Armouries MCH

LOCAL

*Name CADMAN Leopold Wellington Rank Pte. Regtl. No. 222920 ✓
 Original unit 85th Present unit M. or S. # Age 37 Religion Pres. Fyle Depot C-81
 Port, ship and date of arrival Halifax, Araguaya, 28/11/17. Ref. H.Q.
 Next of kin Wife, Mrs. Mabel Cadman, Sackville, N. E.
 Address on leave
 Address on discharge
 Transportation issued Yes No Date Character on discharge
 Previous occupation Labourer Date and place of enlistment Halifax, 28 Oct. 1915.
 Diagnosis C.S.W. Right foot Date of Medical Boards

Date	Remarks.	Pt. 2 Order No.
18-4-18	Posted to Details Company	9-1
18-6-18	Posted to Hospital Section	56-65
9-8-18	Committed to	110-115
19-8-18	To Recharge Sec.	Co. 124 (19-8-18)

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

(over)

Date.

Remarks.

Pt. 2 Order No.

19-8-18 Discharged from H.M.S. Frederickton D.S.O. 1923 (19-8-18)

CAN. GEN. M. M. MEDICAL CASE SHEET.*

No. in
Admission
and
Discharge
Book.

T 377

Year

1917

Regimental No.

22 2940

Rank.

Pte

Surname.

Cadman.

Christian Name.

R. W.

Unit.

8th Bat

Age.

37

Service.

1 $\frac{1}{2}$ $\frac{5}{12}$ Station
and Date.

Disease

G. S. W. R. Foot.

CANADIAN
MILITARY HOSPITAL
LIVERPOOL.

22.9.17

Near heel, on 26.6.17. Hit by bullet
Entrance wound over head of astragalus, Exit
on outer side of foot. First dressed at 11 C.E.S.
operated upon, wound cleaned, sent to 35th Gen
Hosp. Calais, dressed for 9 days, then to mill road
and Hosp. Liverpool. Massage & fomentations used.
Transferred to C.M.H. Liverpool 21.9.17.

On admission -

General appearance good.

Heart OK. Lungs OK. Nerves & urinary system
OK. Digestive system OK.

R. Foot:- Scar of entrance wound on dorsum
of foot inside middle line of foot slightly in front
of head of astragalus. Exit scar just below &
behind ext malleolus. Foot swollen, cyanosed.
Slight movement flexion & extension at ankle joint,
no other movements. Sensation fair.

Massage.

W. O. Dray
Caplain

Station
and Date.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book. T 377 Year 1917	Regimental No. 222940.	Rank. Pte	Surname. Paduan	Christian Name. LW.
	Unit. 8 th Ballistics		Age. 37	Service. 1 1/2
Station and Date No. 5 CANADIAN GENERAL HOSPITAL LIVERPOOL 18. 11. 17	Disease G. O. Fr. Rt foot. Near heels 26. 6. 17. hit by bullet Entering 9. cm. in head of astragalus Exit on outer side of foot First dressed at 11 th C.C.S. Operated wound cleaned. Sent to 35 th General Hosp. Calais, dressed for 9 days. Sent to Mill Road Aux Hosp. Liverpool Massage & Jumentation used Transferred to C. M. H. Liverpool 21. 9. 17 On admission. Cardiac good Heart lungs. Kidneys. OK. Nervous System & Digestive System OK Rt foot Scar on dorsum of foot slightly in front of head of astragalus Exit scar just below & behind 5 th Metatarsal Foot swollen. Cyanosed. Slight movement - flexion & extension at ankle joint. No other movements. Circulation fair			
	W. Brown Capt.			

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

Station
and Date.

CLINICAL CHART.

(To be pasted into Case Book opposite Patient's Case.)

Corps 85th Battalion

No. 202940

Rank and Name Pte. Cadman, L. W.

Age

Hospital Station N. B. Military Hospital

Service 33/12

Disease

Date of Admission 3-7-18 Date of Discharge 9-8-18 Result

Case Book

Folio

Dates of Observation																														
Days of Disease																														
Temperature Fahrenheit	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME
	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.
107°	8																													
	6																													
	4																													
	2																													
106°	8																													
	6																													
	4																													
	2																													
105°	8																													
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	6																													
	4																													
	2																													
97°	8																													
	6																													
	4																													
	2																													
Pulse per Minute	76	60	60	84	80	96	76																							
Respirations per Minute	20	18	18	18	16	16	16																							
Motions																														

M. F. B. 288.

25M-2-18.

H. Q. 1772-39-513.

Signature J. H. Whisttt Lt. AMC. In charge of case.

CANADIAN
MILITARY HOSPITAL
LIVERPOOL

HOSPITAL.

A. & D.
CARD

0.

AT _____

A. & D. No. T # 377 PL. OF ACTION _____

RANK 222940 PC UNIT 85 Battⁿ (A) SICK OR WOUNDED _____

NAME CADMAN L.W. AGE 37 RELIGION Pres

PLACE IN HOSPITAL F 21

DIAGNOSIS G.S.W. Rt Foot

ADMITTED 21. 9. 17 FROM 1 WGH. Spl: (Will R^d Aux.)

DISCHARGED 19 NOV 1917 TO INV. TO CANADA

TRANSFERRED _____

SERVICE AT HOME 1 6/12 IN FIELD 5/12

RESULTS _____

REMARKS.

Form DMS 1402.
8289 100M 9/3/17.

CANADIAN
MILITARY HOSPITAL,
LIVERPOOL.

DOCUMENT
CARD

0

HOSPITAL.

A. & D. No. T. 377.

AT

ADMITTED 222940. DISCHARGED 19 NOV 1917

WARD No. F. 21.

REGTL. No. 21-9-17. RANK PTE. NAME CADMAN. L.W.

UNIT 85 BATTN. TRANS'D FROM I.W.G.H. (Mil Rd. Aux.)

DIAGNOSIS G.S.W. RT. FOOT.

DIAGNOSIS
CHANGED

M.H.S. WRITTEN FOR		M.H.S. RECEIVED		FINAL DISPOSAL OF M.H.S.	
DATE	TO	DATE	TO	DATE	TO WHOM SENT.
		<u>21-9-17.</u>	<u>Orig. sup.</u>	<u>3/11/17.</u>	<u>H.R.</u>

M.H.S. IN HOSPITAL.

SENT TO M.O. 1/c _____ FLOOR _____ WARD 2 ON 2/10/ 1917

RECEIVED FROM M.O. COMPLETE. _____ 1917

(M.O.)

REMARKS.

OTHER DOCUMENTS (Board Papers, Charge Sheets. etc.)

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

DISTRICT DEPOT No. 7

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

Regimental No. 22940 Rank Pte. Name CADMAN L. W.Corps. 85th Bn. who was* DischargedOn 19-8-18 191... to.....

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1-8-18 191...
to 19-8-18 191..., the inclusive date of transfer or discharge.

Dr.	\$	c.	Cr.	\$	c.
Bal. Dr. from prev. month.....			Bal. Cr. from prev. month.....		
Advances } No.....			Reg'tl Pay <u>19</u> days at \$ <u>1.00</u>	<u>19</u>	<u>00</u>
by } No.....			Field Allow. <u>19</u> days at \$ <u>c10</u>	<u>1</u>	<u>90</u>
Cheques } No.....			Separation Allowances* (Monthly).....	<u>25</u>	<u>00</u>
Assigned Pay and Sep'n Allce. No. <u>3982</u>	<u>40</u>	<u>00</u>	Other Allowances* <u>Clo. Allce.</u>	<u>35</u>	<u>00</u>
ck. #3983 Lieut. Lindsay	<u>3</u>	<u>00</u>	Other Credits*.....		
Other charges.....			Bal. Dr. (to be deducted by new unit).....	<u>58</u>	<u>00</u>
Payment on transfer or discharge No. <u>3981</u>	<u>95</u>	<u>90</u>	Total.....	<u>138</u>	<u>90</u>
Balance Cr. (to be paid by the new unit).....					
Total.....	<u>138</u>	<u>90</u>			

* Give particulars.

A monthly stoppage of \$ 15.00 (†) has been (‡) been paid on account of Assigned
Pay for the month of Aug. 1918 } (to) Assignee Mrs. Mabel Cadman,
and Sep'n Allce. for month of do 1918 }
(Address) Sackville, N. B.

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

On Transfer of an Officer

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

Made By	<u>[Signature]</u>
Checked By	<u>[Signature]</u>
No. Last Part 11 D.O.	<u>19/8/18</u>

REMARKS:—

- State (1) date of enlistment.....
(2) if married and if a Separation Allowance Card has been submitted Yes, S.A. & A.P. pd. by D.D. #7 for Aug.
(3) cause of discharge..... authority D.D. #7. D.O.
(4) authority for transfer.....

NOTE.—Separation Allowance and Assigned pay Card and Index Card (M. F. W. 71) are to accompany the original Last Pay Certificate on transfer.

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

Date 19-8-18Place Fredericton, N. B.

[Signature] Captain
Paymaster District Paymaster, 7.

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

If a man on discharge is entitled to three months' Post Discharge Pay, Last Pay certificate will be made out in quadruplicate. The original Last Pay Certificate will be forwarded with other documents to Paymaster Post Discharge Pay and triplicate, with his discharge documents.

M. F. W. 44.

300M.—2-18.
H. Q. 1772-39-903.

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 soldier 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 soldier'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 soldier concerned, from witnesses, or from documents.
4. Special care is required in answering question 13. Please read the questions carefully. All questions must be answered.
5. If space provided under any sections is insufficient use blank space, page 4 or add another sheet. Such entries or 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 8, 9 and 10 be communicated to the soldier, directly or indirectly.
8. The nomenclature of diseases must be followed, if possible, as described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London, (1915), by Messrs. Harrison & Sons.

STATION Fredericton, N. B. DATE Aug. 8/10.

1. (a) Unit B. D. # 7 (b) Regimental No. 222940 (c) Rank Pte.

(d) Surname CADMAN (e) Christian name LEONARD WILLIAMSON

2. Age last birthday 30 Date of birth May 22/1880

3. Enlisted at Sackville, N. B. on Oct. 5/1916

In 88th Nova Scotia

4. Personal description:—

(a) Height 5'-7" (b) Weight 150 (c) Complexion Dark

(d) Colour of hair Dark (e) Colour of eyes Blue (f) Identification marks Crescentic scar base left thumb (2 1/2")

5. Address after discharge (for the use of the Board of Pension Commissioners) Sackville, N. B.

6. Former trade or occupation Farmer.

7. (a) Service

Years

Days

88th Batta. Canada & England.

88th B. France

Hoosp. in England.

B. D. # 7 Canada.

PERIODS

Oct. 1916 From

Mar. 1918

Mar. 1916

July 1916

July 1916

Nov. 1917

Dec. 1917

Present.

(b) Has he been overseas? Yes 8. Original disease or disability Impaired function of right foot.

(a) Date of origin June 26/17. (b) Place of origin Near Lang.

(c) Cause* Gun shot wound.

(d) Present disease or disability Impaired function of right foot.

9. Present condition (a) (Important to be a full description of the present disabling condition or conditions only.) "History" must be recorded in Section 10.

[After describing all abnormalities, anatomical and functional, contributing to present disability (see section 11) state whether such disability is directly due to (a) weakness, (b) loss (complete or partial) of any organ or member of its functions, or (c) to the necessity for rest of the body or of some of its parts.]

Objective:— On dorsum of right foot there is a depressed scar about size of 1/4 inch. It is healed and not tender. Scar of entrance as above scar of exit just below and behind external malleolus. There is some limitation

9. Present condition—(Continued) but flexion is unlimited. Inversion and Eversion cannot be performed by neither Act. or passive movements. Has slight tendency to foot drop.

Obj.:— Patient states his foot pains him occasionally but as a rule has very little trouble. Has walked three miles without difficulty.

(b) Are the following systems normal? If not, briefly state abnormality.

Nervous..... Yes Digestive..... Respiratory..... Cardiac.....

Genito-Urinary..... Disability-- Skin, Middle Ear, Eye or any other part foot-- due to Service.

10. History: (a) of Condition referred to in "a" section 9.
was wounded in foot with bullet at Lens.

(b) Here give a description of wounds, scars, deformities, and signs and symptoms of abnormal conditions present and not included in answer 8. This section cannot be completed without stripping the soldier and subjecting him to a thorough physical examination.

11. If the disabling condition had its origin before enlistment, has it been aggravated on service?

12. Was the disability caused or aggravated by negligence, by vice or by misconduct, or by unreasonable refusal to accept treatment?

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?

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

Mill Road Infirmary G. S. W. Foot --- 60 days	} Massage and Electrical.
No. 5 General, Kirkdale G. S. W. Foot. 60 days.	
H.B. Military Hospital. G. S. W. 32 "	

OPINION OF THE MEDICAL BOARD

14. (Continued).

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit?
(If the answer is "yes" state nature of treatment required and probable duration.)

No.

To an extent.

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

17. Recommendations

That #222940 CADMAN Pte. Leopold Wellington be placed in Category "E". Disability due to Service and further treatment not indicated at present.

L. Stacey M. Gregor
Medical Officer by whom the case is brought forward.

STATEMENT OF THE SOLDIER.

(Sections 8, 9 and 10 are to be read to the soldier and either "satisfied" or "not satisfied" struck out.)

I, the undersigned, 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

L. J. D.

Leopold W. Cadman
Signature of soldier examined.

OPINION OF THE MEDICAL BOARD

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

Yes.

19. Is the soldier fit for

- (a) General service,
- (b) Service abroad, not general service,
- (c) Home service, (Canada only),
- (d) Temporarily unfit,
- (e) Unfit for service in Categories A, B and C,

(Category A) (Yes or No). *No*
(" B) (Yes or No). *No*
(" C) (Yes or No). *No*
(" D) (Yes or No). *No*
(" E) (Yes or No). *Yes*

20. It is certified that the soldier

(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).

9.

OPINION OF THE MEDICAL BOARD—(Continued).

21. It is recommended that the soldier be discharged. (When not for discharge add special recommendation).

That #222940 Pte. Dadman Leopold W. be placed in Category "E" for discharge. Further treatment will not benefit. Disability due to Service.

Before signing the President of the Medical Board will read the certificate signed by the soldier, to the soldier, and if no change is indicated will initial the certificate.

J. J. Paul President.

PLACE... Fredericton, N. B.

DATE... Aug. 5/18.

Members.

APPROVED BY *Wm. Sutton*
Assistant Director of Medical Services.

APPROVED BY
Director-General of Medical Services.

DATE... 7-8-18

DATE...

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 soldier 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.

ORIGINAL MEDICAL HISTORY SHEET.

Surname Carlson Christian Name Leobold

Examined on 28th day of Oct 1917 at Halifax

City or Town Halifax County Halifax

Apparent age 35

Trade or occupation Labourer

Height 5 Feet 4 Inches

Weight 157 Lbs.

Chest measurement { Minimum 34 inches

{ Maximum expansion 36 inches

Physical development Good

Small-Pox Marks

Vaccination Marks { Arm Right Left Good
Number 1

When Vaccinated last 36 years ago

(a) Marks indicating congenital peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

Approved by Joseph Hays
Rank Lieutenant M.O.

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT,
		<u>12 JUL 1917</u> M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date	Result	VACCINATIONS,
<u>31/5/16</u>	<u>Good</u>	<u>Hays</u> M.O.
		M.O.
		M.O.

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>20/3/16</u>	<u>Good</u>	<u>Hays</u> M.O.
<u>12-4-16</u>	<u>Good</u>	<u>Hays</u> M.O.
<u>23/10/16</u>	<u>TA 15</u>	<u>H.</u> M.O.

Enlisted on 28 day of Oct 1915 at Halifax

	CORPS.	REG'T. NUMBER.	RANK.	DATE.
Joined on enlistment	<u>85th. Overseas B'n. C. E. F.</u> <u>Nova Scotia Highlanders</u>	<u>222940</u>		<u>28/10/15</u>
Transferred to.. ..	<u>Proceeded overseas for service with 20/3/17 Part II Orders Ser 11 26</u>			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>C. M. H. Liverpool</u>	<u>25.9.17</u>	<u>G.S.W. R. foot</u>	<u>Invalid to Canada</u> <u>Haw Brown left cane</u>

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

CANADIAN

Surname

Cadman

Christian Name

Leopold

STATION.	Date of Arrival at the Station.	DATES OF						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.
		Admission into Hospital.			Discharge from Hospital.						
		Day	Month	Year	Day	Month	Year				
Halifax 28/10/18											
Commaught ashos		3	2	17	19	2	17	Gonorrhoea	17	Pot: Permanent Dring: Prostatic massage	Geo. Fleming.
Mill Rd Infy alt 1 st											J. H. Rance.
W. G. Hosp. Chool.		8	7	17				62 to Rt Foot		Healed.	W. S. Paul m. B.
W. S. Can Gen.		21	9	17				" "		Limited movement R foot	W. S. Paul
ARAGUAYA.		19	11	17	28	11	17	" "		Tendency to foot drop	W. S. Paul
Ammonia St John		18	6	18	3	7	18			Sent to 4th Hosp. H.A.	W. S. Paul
W. S. Miles Hosp								G. S. W. R Foot		Massage treatment while in Hospital.	J. H. Rance
Fredin										Boarded W. S. Miles Hosp and placed in Cat E.	J. H. Rance
W. B. military Hosp. 7 th m. B.		3	7	18	9	8	18	G. S. W. R Foot	36	Discharged. 2 Cat E.	J. H. Rance

Duplicate Medical
History Sheet
posted to here:

History Sheet

PLACE OF BIRTH

NAME AND ADDRESS OF NEXT OF KIN

Anderson Settlement
Mrs Mabel Adman

PARTICULARS

P.697.

EXTRACTS FROM ACTIVE SERVICE PAY BOOK.

Date of Payment.	No. of Acq. Roll	AMOUNTS				Place of Payment.	Name of Paymaster	REMARKS.
		Francs	£	s	d			
6-17	247	15			2 68	Leila	M.H. Morrison	
26-9	138		1		11 86	Liverpool	C.S. Adams	
5-10	156		1		11 87			
19-10	1160		1		4 86			
2-11	1761			10	2 44			
7-11	1301		10		48 61			
					68 38			

P.697.

EXTRACTS FROM ACTIVE SERVICE PAY BOOKS.

<i>Apr</i>	<i>30</i>	<i>33</i>
		<i>199 10</i>
	<i>29-30</i>	<i>2 20</i>
<i>May</i>	<i>30</i>	<i>33</i>
	<i>31 1</i>	<i>1 10</i>
<i>June</i>	<i>30</i>	<i>33</i>
<i>July</i>	<i>31</i>	<i>34 10</i>
<i>Aug</i>	<i>31</i>	<i>34 10</i>
		<i>336 60</i>

ADMISSIONS TO		
ED	DATE DISCHARGED	V. OR A.

TOTAL CREDITS		1
NO.	DATE	

19 10
3300 4 26/10/16
34 10 135 15 12
34 10 286 15 12

30 80

34 10

33

19 10 218 20

2 20

33

1 10

33

34 10

34 10

19 10 255 70

P. 559
MARRIED OR SINGLE

PLACE OF BIRTH

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY

PAYABLE TO

RELATIONSHIP OF DEPENDANT

PARTICULARS

EFFECTIVE
DATE

ADMISSIONS TO HOSPITAL, &

DATE
ADMITTED

DATE
DISCHARGED

V.
OR
A.

NAME

PAY

FIELD ALLOWANCE

WORKING OR
SPECIAL PAY

ASSIGNED
PAY
CREDITS

OTHER
CREDITS

TOTAL
CREDITS

ACQUITTANCE

DATE

NO.
OF
DAYS

RATE

AMOUNT
\$ C.

NO.
OF
DAYS

RATE

AMOUNT
\$ C.

NO.
OF
DAYS

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REG'L NO 222940 RANK Pte NAME J. Adman, Leonard

IF IN PERMT. CORPS
WHAT UNIT UNIT 85th Batt'n, C.F.E. TRANSFERRED TO C.B.A.C. DATE 29.4.17 AUTHORITY C.B. 33
5.4.17

PERMANENT FORCE ALLOWANCES TRANSFERRED TO But. Hosp. DATE 31/5/17 AUTHORITY

PLACE OF ATTESTATION Amherst N.S. TRANSFERRED TO McBch DATE 11-11-17 AUTHORITY

DATE OF ATTESTATION 13th Oct 1915 TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY \$ 15.00 DATE EFFECTIVE 1st Oct 1916

PAYABLE TO Mrs Isabel Adman, Sacville N.B. RELATIONSHIP Wife

ASSIGNED PAY MONTHLY \$ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) Stopped EFFECTIVE 1-12-14 REASON Wrecked

DISCHARGE DATE AND PLACE 10/11/14 Can. REASON AND AUTHORITY Med Unfit. M.R. date 9/16.5-11-17

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE) Entered on N.E. Card Index

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE) Checked by A. Gillotson

CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
1	2	3	4				CREDIT	DEBIT			
							1910				C. Assigned pay by A.P. Branch for C.B. and received on Oct 21/17 from Canada
1460	486	1480		1500		3933	12 4/1		12 4/1		
204	1217			1500		3961	17 26		15 50	1 76	
730	730			1500		2960	21 46		1600	5 76	
				1500		1500	31 56		1600	21 56	
		244		1500		3640	35 26				
		1460									
		436									
				1500	220	1720	51 06				6 mrs credited 2 days pay - apl. J. C.B.A.C. 29.4.17
2434	2433	2627		90	220	16714		53 26			
				15		15	71 26				Tfd But. Hosp 31/5/17
							72 36				
				15		15	90 36				
R 19/1/17				487	15	1987	104 59				
R 24/1/17				487	15	1987	118 82				
2434	2433	2627		974	150	220	226 88				

Sl No. 1 #5 C.B. Liverpool 23.11.17 C² Bal 60⁵⁵

222940 He Cadman

DATE	PAY		FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS								CASH PAYMENTS																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																						
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45630.12/4 Rem. 6/4
119-352 8/5
186- 13/5
313- 23/6

24 34 24 33 26 27
523
267
268
267

24 34 24 33 39 51

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE
		113 83							113 83
Oct	PR	34 10							15 132 93
		34 10							15
Nov	10d.	11 00							15 143 93
				D/n U.R. 1/6/17 247 85 Pm.	2 68				128 93
				" " 26/9. P. 58. L'pool	4 87				121 38
					7 56				102 38
									15
1918									
Jan.				D/n A.R. P. 261. 59m. Ho. 3/11	2 43				
				" " P. 55 " " 5/10	4 87				
				" " 301 " " 7/11	48 64				65 41
					55 97				
Feb.				Bank 160. GYM. Lio. 19-10-17	4 87				60 54
					4 87				

Balance transferred to N. E. Branch. Nil

in L.V. A.P. 15⁰⁰

MENTS		ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
3	4				CREDIT	DEBIT			
26 27	9 74 150		2 20	236 88	118 82				
523	4 87								
267	4 87	15		37 99	113 83				
368									
267									
39 52	19 48 165		2 20	27 487					

ASM. FORM REND *Stoppes 11/2/14*
 DISCHARGED TO *Can* DATE *10/14/14*
 PAYBOOK VERIFIED *12/11/14*
 BY *BAL 6055* L.P.C. REND *12/11/14*
 AUTHY *Mulligan 9/16 5-11-14*

*checked Jack Dism
LPC*

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

75	25		
	1/12/17		

RATE OF ASSIGNMENT

15-			
-----	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

No. 222940 (222194)
 Rank Pte Promoted Reverted Discharge
 Soldier's Name L. W. Cadman
 Battalion 85th Batt.
 Beneficiary Mrs. Mabel Cadman
 Relationship Wife
 Address

PARTICULARS OF ASSIGNMENT

Name Mrs Mabel Cadman. (wife)
 Address Sackville N.B.
 Change of Address
 1
 2
 3
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total
1917				
Dec 31		537	225	762
Jan - 18	C 68967	30	15	45
Feb	C 100063	25	15	40

REMARKS

File 2137-8-7.

.....A/c Closed 28-2-18
 Ret'd per. Arangam
 Date 9-1-18 F.X. 1-3-18
Clerk. W.H. Lorrain

M1902 B-1-3-18. 2074.



Date of Assignment

OVERSEAS CONTINGENTS

RATE OF ASSIGNMENT

--	--	--	--

PARTICULARS OF ASSIGNMENT

4

M. F. W. 128
400M.—6-17-1772-39-1141
L. L. 22220—M. & D. 7993.

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

4521/91

Name

Cadman, Leopold W.
Surname Christian Name

Regimental Number

222940 (222194)

Rank

Pte.

Address (in full)

Sackville, N.B.

Unit 85th Bn.

Original Unit

District where paid

M.D. 7.

Date of Discharge

P. D. P. Filing Number

6-35-7.

Rates:—Regimental pay \$

per diem: Field Allowance \$

per diem. Separation Allowance \$

per month.

L. L. 40038—M. & D. 9245.

Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Over, payments to be Recovered	Total Amount Paid
	Cheque No. A	Date	Amount 30 days	Cheque No. B	Date	Amount 30 days	Cheque No. C	Date	Amount 31 days		
175 10	392	16-9-18	39 00	378	15-10-18	39 00	347	15-11-18	39 10	58 00	117 10
	95451	15/2/19	70 00								
	95452	4	30 00								
914 A2	923177	4/2/19	70 00								
1413 A2nd	931781	11-3-19	30 00								

M. F. W. 127.
25M.—8-18.
1772-39-1140.

Remarks:

Dec'n No 4521/91 W. S. G. File No 2637-L-70

Award ... days at \$ 100.⁰⁰ per day \$ 500⁰⁰

S. A..... months at \$ per mo. \$ \$ 175.¹⁰

Less P, D. P. Credited
\$ - ONE HUNDRED & SEVENTY FIVE AND 10 CENTS
\$ 324 90

Less further debit balance \$

Net due paid as below 324 90

T O SOLDIER TODEPENDENT

G.	Pg. R.	Cash Paid	No.	Ch. No.	Amount
	449	5451	70.00	449 5452	30 00
	914A	23177	70.00	1413A 31781	30 00
	349B	411431	34.90	349 B 411432	30 00
				280C 44782	30 00
				7583 50915	30 00
	Total				

Sackville

N. B.

15-2-19

4-3-19

7-4-19

15-2-19

11-3-19

7-4-19.

2-5-19

12-8-19

GEN'L AUDITOR
Posting checked by
Logan
Date *12/8/9*

M. M. L.

5-10-15

MILITIA AND DEFENCE

M. F. W. 11.
10m.-9.15.
H. Q. 1772-1-13.

50

SEPARATION ALLOWANCE

Name

Mrs. Mabel Cadman.

Name of Soldier

Cadman, L. W.

Address

Dackville,

N. B.

Regtl. No.

222940 222194

Rank

Private,

Corps

85th Batt'n. B.E.F.

Relation to Soldier

wife, child or mother

Wife.

To what Corps belonging

when called out

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
Apl.				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.		0 15408	57	57
Jan.	1916	V 15635	20	20
Feb.		N 21061	20	20
March		0 24859	20	20



SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2.

Mabel Cadman,

PAYMENTS.

Name of Soldier

Cadman, L.W.

#222940

L. L. Job 89002.—Req. 6213.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916	N 692	20	20
May		G. 5206	20	20
June		H 9031	20	20
July		H 9753	20	20
Aug.		H. 11570	20 -	20
Sept.		H 15199	20	20
Oct.		O 18136	20	20
Nov.		Q 21001	20 -	20
Dec.		Q 24578	20	20
Jan.	1917	P 28004	20	20
Feb.		P 31293	20	20
March		O 31230	20	20
April		Q 365	20	20
May		P 3629	20	20
June		R 1338	20	20
July		P 10495	20	20
Aug.		T 13534	20	20
Sept.		S 16697	20	20
Oct.		A 12795	20	20
Nov.		Q 25963	20	20
Dec.		A 16866	20	20
Jan.	1918			537
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE
SEPARATION ALLOWANCE
OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

PAYMENTS.

Name of Soldier _____

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.				

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

M. F. W. 12
 50m.—7-16
 H. Q. 1772-39-819

To Whom

Address

Rate

By Whom Assigned

Regtl. No.

Rank

Corps

Mrs. Mabel CadmanSackville
N. B.\$15⁰⁰ OCT 1 - 1916

Wife

Cadman, L. W.

222940

Pte.

85th Bn.

PAYMENTS

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



ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2. Mrs. Mabel Cadman
(Assignee)Name of Soldier Cadman L. W.

PAYMENTS.

#222940 - Pte. 85 - 1st Bn.

L. L. Job 5470—Req. 6888.

OCT 1 - 1916

Month.	Year.	Cheque No.	Amt.	Remarks
April	1916		\$15.00	
May				
June				
July				
Aug.				
Sept.				
Oct.		W 26256	15	
Nov.		X 29142	15	
Dec.		Q 36661	15	
Jan.	1917	X 35669	15	
Feb.		X 42461	15	15 (W)
March		T 50253	15	15 (W) 24937 + balance
April			15	15 B
May		U 7005	30	30.75
June		Y 13582	15	15 mi
July		X 20145	15	C
Aug.		C 26886	15	8
Sept.		C 34429	15	26
Oct.		A 25185	15	
Nov.		L 34506	15	
Dec.		A 44114	15	
Jan.	1918			225-
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

PAYMENTS.

Name of Soldier _____

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.				