REGIMENTAL DOCUMENTS

NAME Anderson William REGT. NO. 513212 UNIT 2 Tn ASC H. Q. FILE NO. 9614

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W 2589
100M-11-18
1772 [illegible] 1377

~~Duplicate~~ TRIPLICATE

ATTESTATION PAPER.

No. 513212

Folio.

No. 2 Overseas A.S.C. Training Depot C.E.F.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1.	What is your name?	William Anderson.
2.	In what Town, Township or Parish, and in what Country were you born?	Wellingborough, Northamptonshire, England.
3.	What is the name of your next-of-kin?	Thomas Harper Anderson,
4.	What is the address of your next-of-kin?	66 Cannon St., Wellingborough, Eng.
5.	What is the date of your birth?	Aug. 17th. 1879.
6.	What is your Trade or Calling?	Labourer.
7.	Are you married?	No.
8.	Are you willing to be vaccinated or re-vaccinated?	Yes.
9.	Do you now belong to the Active Militia?	Yes. C.A.S.C.
10.	Have you ever served in any Military Force? If so, state particulars of former Service.	Yes. Roy. Innis. Fus. 12 yrs.
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.

William Anderson (Signature of Man).

[illegible] (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, William Anderson, 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.

William Anderson (Signature of Recruit)

Date Sept. 29th 1914. [illegible] (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, William Anderson, 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.

William Anderson (Signature of Recruit)

Date Oct. 13th 1914. [illegible] (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 Petawawa this 13th day of October 1914.

[illegible] (Signature of Justice)

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

[illegible] (Approving Officer)

Officer Commanding
No. 2 Overseas A.S.C. Training Depot, C.E.F.

100 M.—8-14.
H.Q. 1772-1-13.

Description of William Anderson on Enlistment.

Apparent Age 37 years ..... months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height ..... 5 ft. 11 ins.

Chest measurement:
- Girth when fully expanded ..... 33 1/2 ins.
- Range of expansion ..... 1 1/2 ins.

Complexion ..... Medium

Eyes ..... Blue

Hair ..... Black turned with Grey

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

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).

Blue eye left thigh.

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 Sept 29th 1914. A. J. de Beaupré Capt. A.M.S.

Place Pietermaritzburg ..... 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.

William Anderson 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.

NOV 25 10 A. Allotson Lt. (Signature of Officer)

Officer Commanding No. 2 Overseas A.S.C. Training Depot, C.E.F.

Date ..... 1914.

Continuation of Original

ARMY FORM B. 178.

To be used (*a*) for recruits enlisting direct into the Regular Army, and (*b*) for men of the Territorial Force when they are admitted to Hospital. Army Form B. 178A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname Anderson *Christian Name* William

TABLE I.—GENERAL TABLE.

Birthplace ... Parish _____ County _____

Examined ... ... on _____ day of _____ 191 ;
at _____

Declared Age ... ... _____ years _____ days.

Trade or Occupation ... _____

Height ... ... _____ feet _____ inches.

Weight ... ... _____ lbs.

Chest Measurement — Girth when fully Expanded _____ inches.
Range of Expansion _____ inches.

Physical Development ... _____

Vaccination Marks — Arm ... Right _____ Left _____
Number _____

When Vaccinated ... ... _____

Vision ... ... R.E.—V= _____
L.E.—V= _____

(*a*) Marks indicating congenital peculiarities or previous disease ... (*a*) _____

(*b*) Slight defects but not sufficient to cause rejection ... ... (*b*) _____

Approved by (*Signature*) _____
(*Rank*) _____
Medical Officer.

Enlisted ... ... at _____
on _____ day of _____ 191 .

Joined on Enlistment ...	Corps.	Regtl. No.
		5/3212.
Transferred to		

Became non-effective by ... _____

on _____ day of _____ 191 .

(*Signature*) _____
(*Rank*) _____

261 Wi. '8 T.
28 JUN 1918

Table II.—Only for Admissions to Hospital or to the Sick

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remar
	Day	Month	Year	Day	Month	Year			
No. XI CANADIAN GENERAL HOSPITAL, MOOR BARRACKS, SHORNCLIFFE.	13	5	18	Died @ 11.30. P.M. 14	6	18	General Paralysis of the Insane	29	

List in the case of Warrant Officers treated in quarters.

ks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
On admission - patient thin and weak very confused and difficult to obtain any information - History of delusions + general mental failure - Gradually became weaker Pupils sluggish - speech tremulous - Reflexes patellar present. Wassermann pos + + + Globulin pos - Col. Gudby saw case agreed on diagnosis became weaker lost weight - very dull unable to speak. Urine + faeces passed involuntarily - Died 11 pm June 14/18	F.L. Keely Capt

Table III.—Boards; Courts of Inquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, etc.

Date	Brief details, and signature

Table IV.—Service Table.

Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation	Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation

ORIGINAL

MEDICAL HISTORY SHEET

ORIGINAL

Surname Anderson Christian Name William

Examined { on 22nd day of Sept. 1916
at Petawawa Camp.

Approved by J. de Beaujeu Captain M.O.

Birthplace { City or Town Wellington Square
County Cumberland.

Apparent age 37 yrs.

Trade or occupation Labourer

Height 5 feet 11 Inches

Weight 136 1/2 lbs.

Chest measurement { Minimum 31 3/4 inches
Maximum expansion 1 1/2 inches

Physical development Good

Small-pox Marks

Vaccination Marks { Arm Right x Left x
Number 3

When Vaccinated last 1897

(a) Marks indicating congential peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

Date	Fit or Unfit	Examined for Re-Engagement	
		4 DEC 1917	
			M.O.
		18 JUN 1918	M.O.
			M.O.
			M.O.
			M.O.
			M.O.
			M.O.

Date	Result	Vaccinations	
NOV 22 1916		J. J. Heath Capt	M.O.
			M.O.
			M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.	
		Paratyph A	
14/10/16		A.R. Tilley major A.M.C.	M.O.
23/10/16		D. Hom Capt. A.M.C.	M.O.
30/10/16		D. Hom Capt A.M.C.	M.O.
19-5-17		Past the dust cyst exam.	

Enlisted on 13 day of October 191 6 at Petawawa.

	Corps	Regt'l Number	Habits	Date
Joined on enlistment	C.A.C.	513212		
Transferred to	F.F.C.L.I.			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

Station	Date	Disease	Result

CANADIAN

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

M. F. B. 313.
500M.—3-16.
H. Q. 1772-39-439.

Surname Anderson Christian Name William

STATION	Date of Arrival at the Station	Dates of Admission into Hospital			Dates of Discharge from Hospital			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
		Day	Month	Year	Day	Month	Year				
Whippe Cross War Hosp. Leytonstone		26	11	17	10	1	18	Neurasthenia	46	Doing well. Transferred Epsom.	D. Broderick. Capt. RAMC.
W.C.H. Epsom	10	1	18					Do		Last further Comfort Endorsed to Red X Branch. [illegible] Capt. C.A.M.C. No. 1 Division	
W.C.H. Epsom	10	1	18	26	1	18		Do	17	26-1-18 Transfer to Naval War urgent- [illegible] Capt. C.A.M.C. No. 1 Division	
W.H.H. Epsom	26	1	18	15 MAY 1918						29.4.18. Pain in neck better. Temp. ranges bet. 99°-100°. No physical signs of disease in lungs. Stools normal. Rec'd for Board of Cmt. Cornwood 14.5.18. Has been depressed lately, sleeps badly, says he hears voices, manner strange, quiet, depressed. No physical sign of disease. Not likely to be fit in 3 months. Rec'd for Three Counties Hosp. Cornwood	

B—122
8,401—50,000—21-10-16

E.T.

Rank | Name ANDERSON, William | Reg'l No 513212

Unit No.10.Draft. C.A.S.C.T.D. | If in perm. Corps, What Unit? | Married or Single Single.

Place and Date of Enlistment Petawawa. Sept 29th. 1916. #2 | Place of Birth Wellingborough Northampshire. England

Name and Address, Next-of-Kin Thomas Harper Anderson.

66, Cannon St. Wellingborough. England. | Relationship

Assigned Pay Monthly $ | Payable to | Relationship

M.X. 8-6-21 R.R.

Separation Allowance $ | Payable to | Relationship

M.E. R.B. No. 7182
File R.L. 25-A-1662
Category Died

Discharge, Date and Place | Reason | Character

Report. Date.	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 per	S.S. Olympic	28.12.16	✓
9.1.17	C.A.S.C. T.D.	Taken on Strength	S'cliffe	29.12.16	Pt II 9 ✓
8.5.17	"	S.O.S. to 7th Reserve Bn	"	8.5.17	—·— 128 + 111. P.P.C.L.I. No. 54 dd 10.7.17
5.7.17	7th Res Bn	S.O.S. to P.P.C.L.I.	Seaford	5.7.17	—·— 160
26.11.17	E.O.R.	Adm. No. HH Cas. Clg. Sta.	Field	19.11.17	C.L.A. 73. Trench Feet
30.11.17	✓	Trans. No. 8 Stat. Hosp.	Wimereux	22.11.17	C.L.A. 77 ✓ ✓
4.12.17	✓	Adm. Gen. Mil. Hosp.	Colchester	26.11.17	C.L.B 80 ✓ ✓
4.12.17	P.P.C.L.I.	Posted to E.O.R.D.	Field	O.C. 24.11.17	Pt II 108 ✓ E.O.R.D. Pt II 270 dd 7.12.17
17-6-18	E.O.R.	"Died"	2C 11 C.G.H. Shorncliffe	14-6-18	C.L.B 240. Gun Paralysis of Rt. Limbs
17.6.18	E.O.R.D.	DIED. Moore Bks. Hosp.	" Seaford	14.6.18	Pt II 0 155

A.F.B. 103 CHECKED 31 JUL 1917

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.					

FORM R. 149.
7106—250m—7/2/17.

Name Anderson. William Rank Pte Reg. No. 513212.

Unit P.P.C.L.I. R.L. 25 A. 1662. England

Next of Kin Thomas Harper Anderson, 66 Canon St. Wellingborough

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1917						
19-11	44 C.C.S.	Trench Feet				8604.
22-11	8 Stat. H. Wimereux	Do				16610
26-11	G.M. Colchester	Do				7340
11-1-18	Mil(Con)H. Epsom	Do				10344.
27-1-18	Manor (Cot.L.) W.H. Epsom	Do				11502.
16-5	II C.G.H. Shorncliffe	Dementia Praecox				18162.
28-5	Seriously Ill	D.A.H.				9305
	Diagnosis Now Changed to Mad Exhaustion Psychosis & Debility				29-5	9404
8-6	Still Seriously Ill	Do				9768
14/6/18	Died 11.30 P.M.		Temporary loss of the use of hands and feet			9871
			Religion C of E age 45			
	Not Notified					

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

REGT'L No. 513212

NAME Anderson, William

H. Q. FILE No. 649.

RANK AND CORPS Pte. (East Ont Reg)

FOLLOWS

NATURE OF CASUALTY (Cas.C) E.

FOLLOWS No. from Oct 4 2

CABLE NO.	DATE	
Q 265. 1-3	29-5-18.	Ser. ill Moore Bks. H. Shorncliffe May 28th/18. D.A.H.
Q 303. 1-1.	16-6-18.	Priv. repd. ser. ill now "D" at Moore Bks. H. Shorncliffe June 14th/18. paralysis insanity.

L. L. 26438. M. & D. 8207.

M. F. W. 42—50M.—8-17.
H. Q. 1772-39-893.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
A73.	#4 H.H. Cas. Cl. Statn.	19-11-17	Trench Fvr
977-2	#8 Stationary Wing Epsom	22-11-17	" " (East Cent.
B80	Ex Mil Colchester	26-11-17	(PBCL) " "
B112.	Mil Conv: W Cote Epsom	Survey 11-1-18.	Trench.
B126.	"Manor (Cas of Lond) War: Epsom	21-1-18.	" "
B215.	"Can Conv: Shorncliffe	16-5-18	Dementia Praecox
B224.	" " " " "	28-5-18.	ser. ill ~~D.A.H.~~ Exhaustion Psychosis & Debilitys
B240.	" " " " "	14-6-18.	Prev rept. ser ill now rept Died – General

FORM D.M.S. 1300

SURNAME	CHRISTIAN NAME OR NAMES	REG. NO.
Anderson.	W.	513212.

RANK	UNIT	CO.	TROOP	BATTY.
Pte.	E.O.P.P.B.L.I.			

HOSPITAL — DATE OF ADMISSION

1. 44 Cas. Cl. Station — HOSP. 19.11.17
2. 8 Stat. Hospital — HOSP. 22-11-17
3. Gen. Mil. Colchester. — HOSP. 26.11.17.
Mil. Conv. Woodcote Pk Epsom — HOSP. 17-1-18

DIAGNOSIS

1. Trench Feet bilat.
Dementia Praecox 1140
D.A.H. 1042
3. Exhaustion Psychosis & Nibility 1042
General Paralysis of the Insane.

DISPOSITION — DATE

Prov. Rep. per Ill. Invs. Died. 14.6.18 R

REMARKS

A.M.D. 2 DEPT.

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

6 L 24.11.17 Oy3-2
P 12.17 A 97.2
5.12.17 B 30.0
15.1.18 B 117-2
21.1.18 B 126
17.5.18 B 2 15-
29.5.18 B 224 -1 Seriously ill 28.5.18.
1.6.18 B 227 Note correct heading of B 224.
17.6.18 B 240.

EPITOME OF HOSPITAL TREATMENT

	HOSPITAL	ADM.
1.	Manor (Co. of Lon.) War Epsom.	27.1.18
	11 C. G. Stonecliffe.	16.5.18
2.		
3.		
4.		
5.		
6.		
7.		

FORM OF WILL.

I, William Anderson (Name in full)

Regimental Number 513212 serving in No. 2 Overseas D.S.C. Training Depôt, C.E.F.

of the Canadian Expeditionary Force, do hereby revoke all former Wills by me made and declare this to be my last Will.

I bequeath all my real estate unto

Mrs. Mary Cowie
52 Victoria Ave. Peterboro
Ontario Canada.

Name and Address of person or persons to whom it is to go.

absolutely, and my personal estate I bequeath to

Mrs. Mary Cowie
52 Victoria Ave. Peterboro.
Ontario. Canada.

Name and Address of person or persons to receive personal estate* *(See note).*

IMPORTANT NOTE
This must be Signed and Dated by THE SOLDIER HIMSELF.

this 1st day of December A. D. 1916

William Anderson Signature of Soldier.

*N.B.—Personal estate includes pay, effects, money in bank, insurance policy, in fact everything except real estate.

Signed and acknowledged by the Testator as and for His last Will in the presence of us both present at the same time, who in his presence, at his request, and in the presence of each other have hereunto subscribed our names as Witnesses.

THE TWO WITNESSES MUST SIGN HERE

Signature of First Witness L C Buston

Address of Witness 3 Minto Ave. Hamilton Ont Canada

Occupation of Witness Clerk

Signature of Second Witness Vere Kerrison

Address of Witness 401 East St. Kingston Canada

Occupation of Witness Soldier Hon Lieut.

C. Pass

M. F. W. 82
500M-5-16.
1772-39-983.

No. 41 CANADIAN
GENERAL HOSPITAL,
MOORE BARRACKS,
SHORNCLIFFE.

Forms
I. 1237
10

Army Form I. 1237

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
T. 300	513212	Pte	Anderson	William
Year 1918	Unit. P. P. C. L. I.		Age. 45	Service. 1 1/2

Station and Date.	Disease G. P. I.
No 1 C.G.H.	
15/5/18.	Transfered from Manor County War Hosp. Epsom to date. On admission looked unkempt and dishevelled. walked with tottering gait, fine tremors, articulation indistinct. left pupil did not react well to light. knee jerks normal. some stiffness of muscles of neck. marked incoordination of muscular movement.
30/5/18.	Wassermann positive +++, globulin test positive. Failing, memory very bad. Is lost about to ward. unable to take incoordination worse.
3/6/18.	Progressively worse, confined to bed for the last ten days, unable to care for himself in any way, incontinence of urine and faeces. semi comatose.
14/6/18.	Transfered to ward 34.

Hadley Captain

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

(J 3521.) Wt. W 5606—2621. 2,000,000. 7/15. D & S.

P.T.O.

Station and Date.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12
50m.—7-16
H. Q. 1772-39-316

Mrs.

To Whom Mary Cowie,

Address Cor. Victoria & Dickson Sts.
Peterboro, Ont.

Rate 15.00

By Whom Assigned Anderson, Wm.

Regtl. No. 513212

Rank pte.

Corps #2. A. S. C. Trng. Dpt.

DEC 1916

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 Accounts

C. F. $285.00 to 30 June 18
acc. closed 30 " 18

Pensions Notified Date 2 July 18
Killed in Action
Died of Wounds } Date 14 June 18
Missing
O. L. 211/1-17 June 18 Clerk
Date Noted July 2 1918

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a.
50m.—6-16.
1772—39—819.

Sheet No. 2.

L. L. Job 4503. –Req. 6832.

Mrs. Mary Comrie

Name of Soldier Anderson Wm.

513212 pte. # 2. A. S. C. Trg. Bn

15.00

DEC 1916

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.		Y 36479	15	
Jan.	1917	J 27381	15	
Feb.		J 47689	15	15 (JW)
March		J 49023	15	15-2.
April		K 88	15	15-2
May		K 6224	15	
June		K 12871	15	15-3.
July		K 19841	15	Cu
Aug.		M 29407	15	6
Sept.		L 33765	15	6 150.
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

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.				

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

Dec 1/16

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

15			

PARTICULARS OF SEPARATION ALLOWANCE

No. 513212

Rank Pte. Promoted Reverted Discharge

Soldier's Name Wm. Anderson

Battalion 2 A. S. C. Train. Depot.

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name Mrs Mary Cowie

Address Cor Victoria & Dickson Sts Peterboro Ont

Change of Address

1

2

3

4

0379-W-110

Date	Cheque No.		Amount S/A	Amount A/P	Total		REMARKS
30/9/17				150 ✓	150		
Oct.	C	51548		15	15		
Nov	C	52783		15	15	T	
Dec.	F	55103		15	15	m	
Jan	A	54394		15	15	10	
Feb.	G	95736		15	15		
	B	~~92626~~ ✓					B92626 Canc
2/3/18	March	U	85376	15 +	15		O/d 25/3/18
	April	A	7647	15	15		
	May	A	12605	15	15		
	June	B	15448	15	15	✓	
				285 00	285 00		

C. R. R. #283 to 30 June/18
Acct closed 30-/18

Pensions Notified Date 2. July/18.

~~Killed in Action~~
Died ~~of Wounds~~ Date 14 June/18
~~Missing~~

C. R. R. 1/7 June/18 Clerk J. LeClair

Date Noted 2. July 1918

MKO 2B Rend 5.7.18

CONSOLIDATED ACCOUNT

M. F. W. 128
400M.—6-17—177-39-1141
L. L. 22320—M. & D. 7493.

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

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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. 1493.

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY	* ~~ENGLAND OR~~ CANADA.	SEPARATION ALLOWANCE.	* ENGLAND OR CANADA.
EFFECTIVE DATE:- 1/12/16		EFFECTIVE DATE:-	
AMOUNT:- 15.00		AMOUNT:-	

NAME:- ANDERSON Wm

NUMBER:- 513212

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. Mary Cowie
Victoria Ave & Dixon St.
Peterboro, Ont.
Stopped eff 1/7/18 dlr.

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Pte.

UNIT AND TRANSFERS

ORIGINAL UNIT:- 10 Dft. Cas. C.D.

DATE ACCOUNT FIRST OPENED.-

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			EORD
L.P.C.	1/7/18	23/7/18	"B" N.E.
	1/2/19		Pay 2. 0 Mtl Bgd

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

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:- Died Gen'l Paralysis of the Insane 14/6/18 L.G. 3240 17/6/18

MONTH 1918	PARTICULARS	CR 1	CR 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Mar 31	Bal. Forward								89 04		
Apr	P.P.	33		A.R. 904 Epsom 11/4/18	4 87			15	102 17		
		33			4 87			15			
May	✓	34 10						15	121 27		
		34 10						15			
June	✓	33						15			
	Cash in effects received from O.C.		13 38					15	152 65		
		33	13 38								
Jan 19				Cr Bal to Can	152 65				Nil		
					152 65						

Completed 14/6/18 Argyle
To N.E. Sec. 14-10-18.
Bkee. 152 65

UNIT AND TRANSFERS

ORIGINAL UNIT:- 10 Dft. 6a S. 62D.

DATE ACCOUNT FIRST OPENED.-

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			E.O.R.D
L.P.C.	1/7/18	23/7/18	"B" N.E.
	11/2/19		Pay 2. 0 Inf Bde

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

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:- Died Gen! Paralysis of the Insane 14/6/18 C.L.B. 240 17/6/18

MONTH 1918	PARTICULARS	CR 1	CR 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Mar 31	Bal. Forward								89 04		
Apr	P.P.	33		A.R 904 Epsom 11/4/18	4 87			15	102 17		
May	✓	33 / 34	10		4 87			15	121 27		
June	✓	34 / 33	10					15 / 15			
	Cash in effects received from O.C.		13 38					15	152 65		
		33	13 38								
Jan 1 19				By Bal to Can	152 65				Nil		
					152 65			OK			

Completed 14/8/18 Argyle

To N.E. Sec. 14-10-18.

Bkee. 152 65

NUMBER RANK NAME

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION

P. 559.

MARRIED OR SINGLE Single

PLACE OF BIRTH Wellingborough Eng

NAME AND ADDRESS OF NEXT OF KIN Thomas H. Anderson
66 Caunt St Wellingboro Eng

RELATIONSHIP OF NEXT OF KIN

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	AUTHO

ADMISSIONS TO HOSPITAL, &c.

DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL

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
10.12														10	10						
11.12 31.1.17	52	1/10	57	20											57 20						
Feb 28	28	1 00/10	30	80											30 80	3553	19/1				
Mar 31.	31	1 00/10	34	10											34 10	3873	14/2	4174	14/3		
12 2 10															132 10			3992	28/2		
Apl 30	30	1 00/10	33	—											33 —			4301	28/3		
																		4311	12/4		
May 31.	31.	1 00/10.	34	10											34 10	176	30.4				
June	30	1 00/10	33												33						
July,	31	"	34	10											34 10						
Aug	31	"	34	10											34 10						
Sep 1	30	"	33												33						
															333 40						

96 7th Pro Bn. 14/5/17

O.S.B. 1930 T.S.M

OTIONS, &c.

Effective Date	Authority

SPITAL, &c.

Name of Hospital

Reg'l. No. 513212 Rank Pte. 1010 Draft Name Anderson William

If in Permt. Corps What Unit } Unit 6a86 1D Transferred to P.P.C.L.I. Date 1-11-17 Authority n.r

Permanent Force Allowances Transferred to E.O.R.D. Date 1/1/18 Authority 270

Place of Attestation Petawawa, Ont Transferred to Date Authority

Date of Attestation Sept 29th 1916 Transferred to Date Authority

Assigned Pay Monthly $ 15.00 Date Effective 1-12-16

Payable to Mrs Mary Lowis, Victoria Ave & Dixon St Peterborough, Ont Relationship

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)

Acquittance Rolls 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				L.H.C. Canada
										15							
14/3						973				15		24 73	53 27				Carried overleaf
28/2							487										
28/3.						1460	973			15	03	53 96	~~53 41~~ 2. 1651				Q4005.380. 14/2/17.
												10869					
12/4							487			15		19 87	46 54				
						973				15.		24 73	55 91				
	96 7th Pro Rm. 14/5/17							9.73		15		24.73	64.18				
										15		15	83 28				
	O.S.B. 1930 7.5.17							714		15	15 40	37 54	79 84				For 14 days Pay O.O.30. 15.5.17 Ca.O.C.Prot
						3406	2920	1684		15 150	15 43	15 245 56	97 84				
						3406	2920	1684		150	15 43	245 56	94 84				Balance adjusted overleaf

5/13212 Pte Anderson Com

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
MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS										DR. 1	DR. 2	DR.3	DR.4	BALANCE	DEFER-RED. PAY	SEP. ALLCE. ENG.	MONTH	PARTICULARS			
1917				Errors Exc of Bal Feb 1917														87 84							
Oct.	Balance	87 84																87 84							
"	P.P.	34 10														15									
"				D.H.Q.R. 726 P.P. Pd 2.9. 11.9.17										2 68											
"				290 1st Res. B.W. 26.6.17										9 73				94 53							
		34 10												12 41		15									
Nov	P.P.	33		A.P. Canada												15									
✓				A.R. 3023 14/11/17 L.G.S.										3 57											
✓				D.N. 6097 A.R. 447 26/7/17 P.P.C.L.I.										2 68											
✓				- 56834 - 194. 15/9/17 1st Res										9 73											
✓				- 56941. - 180. 12/9/17 ✓										14 60											
✓				D.N. 6050 A.R. 141 11/7/17 3rd C.M.R.										4 47											
✓				D.N. 77737 A.R. 514. 8/8/17 P.P.C.L.I.										2 68											
✓				D.N. 81517 A.R. 655. 1/9/17 ✓										2 67											
✓				D.N. 94759 A.R. 158 21/7/17 4th C.M.R.										4 46											
✓				D.N. 77898 A.R. 593 16/8/17 P.P.C.L.I.										5 38											
✓				A.R. 3304. 25/10/17 L.G.S.										4 46											
✓				D.N. - 7775. 30/9/17 P.P.C.L.I.										3 57											
✓				A.R. 994. 11/11/17 ✓										13 38											
Dec	P.P.	34 10		A.P. Canada												15									
				Sd F.P.T. 4/4/17 W.O. 102. 20/11/17										$ 71 62	5 50 5 50		30	34 51							
1918 Jan	"	67 10														15	43 61								
		34 10														15									
Feb	"	34 10														15	79 68								
		30 80		A.R. 2246 11-1-18 Epsom										9 73		15									
March	P.P.	30 80		✓ 11345 21/1/18 ✓										9 73 4 87		15									
		37 10																							
				✓ 14443 Epsom 14/3/18										4 87											
		34 10												9 74		15	89 04								

79 68
34 10
113 78
24 74
89 04

15.00

PAYMENTS			ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
	3	4				CREDIT	DEBIT			
RTICULARS	CR. 1	CR. 2	PARTICULARS				DR. 1	DR. 2	DR 3 DR 4	BALANCE INTER- SER. FED. ALLOC. PAY ENC.

68
10
78
74
04

No. S-13212 RANK Pte NAME Anderson, W.

T. O. S. Transf'd from UNIT Canadian Army Service Corps (# 2 Training Depot)
C.A.S.C. Details. Blairawa from 1/11/16.
(D.O.# 493 of 14-11-16)

M. D. 2.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916	1916.			
Nov 1	Nov 30	L		
Dec 1	Dec 10	L	Proceeded O/S with #10 Draft: C.A.S.C. 12-12-16	D.O.# S-01 of 12-12-16.

M E.O.R.D

Anderson, Wm., Pte. 513212 P.P.C.L.I. France 649-A-8237

Med. & Dec. (Friend) Mrs. Mary Cowie,
18 Dixon St.,
Cor. Victoria Ave.,
Peterboro, Ont.

P. & S. (Brother) T. H. Anderson, Esq.,
66 Cannon Street,
Wellingborough, England.

(Ser. #760244.)

JUN 4 Scroll Desp. Regn. No. 45928

Mem. Cross. (NIL) Plague Desp. NOV 26 1921 Regn. No. 52682

not Eligible for 14-15. Star
E. " " " V.M.
E. " " " B.W.M.

P18239

124 Forms I. 1237 / 11

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
Year 1918	513212	Pte.	Anderson	Wm.
	Unit.		Age.	Service.
	P.P.C.L.I.		45	1 7/12.

Station and Date.

Disease

W.H.H. Epsom [redacted] Trench feet Nov 16-17.
3 days in support unable to change socks.
Wood Cote Jan 11th.
about two weeks ago his neck was stiff also shoulders in the Trapezei in the ~~Deltoids~~ Pectorals near the shoulder.
Feet not sore at present.
Heart Normal. Lungs. Harsh breathing and prolonged exp sound left axilla pain & tenderness in pectorals near anterior axillary folds in the Trapezius and scalenus.
Small mass on back of R thigh which he has noticed 3 weeks resembling a fatty tumor.
Hot air baths 3 times a week
Mist Pot Iod gr i tds.

D.S. Doolittle Lt A.M.C.

13.5.18. Has recently developed curious mental symptoms. Sleeps badly & is very strange in his manner at times - says he hears voices telling him to do certain things - depressed & cries to himself. No violent symptoms.
Physically, no organic symptoms found.
Rec'd to Tecumseh Canad Hosp

C. Comyn Lt

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

(23205) Wt.W 4234—M 627. 1,000,000, 8/16. C.F.&S. Forms/I. 1237/11.

P.T.O.

Station
and Date.