REGIMENTAL DOCUMENTS

NAME ANDERSON. William REGT. No. 2 38 37 78. UNIT 1 Supert Polls M. To H. Q. FILE No. DATE RECEIVED TO WHOM FORWARDED M. F. W. 2505 NON-EFFECTIVE BY CONTENTS FORWARDED REFERENCE ATTESTATION PAPER (M.F.W. 23, 133 or 51) DEATH CASUALTY FORM (M.F.W. 54 or A.F.B. 103) CATEGORY TRAINING HISTORY SHEET (M.F.W. 113) FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122) REGT. CONDUCT SHEET (M.B.W. 263 or A.F.B. 120) COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121) DISCHARGE MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178) DENTAL HISTORY SHEET (M.F.B. 465) CATEGORY MEDICAL REPORT (M.F.B. 227 or A.F.B. 179) MEDICAL EXAMINATION (M.F.W. 129) TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2) PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2) DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115) DESERTION LAST PAY CERTIFICATE (M.F.W. 44) PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268) PARTICULARS OF CHARACTER (A.F.W. 3226) COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A) CARDS PAY-SHEETS

Casualty Form-Active Service.

			Unit, Regiment or Corps	Depot Bn.	Mana Rog	t	
	Regimen	ntal No. 238	3.7.78 Rank Pt	ne Under	2000	William	
	Enlisted	(a) 17.4.	Terms of Service (a)	of War Se	ervice reckons	from (a) 17.4-18	-
			Date of appointme to lance rank			ical position on of N. C. Os.	The state of the s
	Extende	d	Re-engaged.	Qualification (b)		-
		Report	Rec rd of promotions, reductions, transfers, casualties, etc., during active service, as re-			Remarks	
	Date	From whom received	ported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	taken from Army Form B 213, Army Form A. 36, or other official documents	
(,/	19	lst/Man. Regt.	S.O.S. as deserter by 5. of I.	Winnipeg	17.4.18	Pt.11 D.O. #25-	
. 5	21	do	Pt.11D.0. 25 8/25-19 Amended to read; - 19 S.O.S. W/E	Ottawa	7.5:18	after Order #/2)	
		- 3				Bay	
						for D. of R	

⁽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 dutie.

[P.T.O.

Record of promotions, reductions, transfers, Report Remarks casualties, etc., during active service, as retaken from Army Form B. 213, Army Form A. 36, or other ported on Army Form B. 213, Army Form Place Date From whom A 36, or in other official documents. The Date official documents received authority to be quoted in each case

Ckel. to Schodule by.

MILITARY SERVICE ACT, 1917.

MEDICAL HISTORY SHEET.

IMPORTANT.—If the man's name does not appear upon the schedule of men reporting for service, or if he has not made an application for exemption or a report for service, or, although having made one, he does not know the number, he will be instructed that the copy of this medical history sheet (which will be handed to him) must be attached by him to a report for service or claim for exemption which he may make on application to any Postmaster in Canada, or be sent by him after he has noted upon it the number on the receipt he obtained from the Postmaster to a Registrar or Deputy Registrar under the Military Service Act. In any event the duplicate medical history sheet will be sent by the Medical Board to the District Officer Commanding unless instructions have been given by the latter to forward it direct to a Registrar or Deputy Registrar.

2. Number of report for service or claim for exemption according to Postmaster's 40364I. 3. Consecutive number on schedule of men reporting for service (if he appears) 4. Address (including street and number, if any) C.P.R. Boarding House. Fort William, Ont. The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 17th. day of November. 1917, by the undersigned medical board sitting at Fort. William, Ont. 5. Age as stated 22 Years II Months. 6. Apparent age 22 Years II Months 7. Height 5 Feet 24 Inches. 8. Weight 133 Pounds. 9. Chest measurement Minimum 35 Ins. 10. Complexion Ruddy. (Eyes Brown.) Maximum 38 Ins. (Good Fair Poor 12. Smallpox marks None.)
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undersigned medical board sitting at Fort William, Ont. 5. Age as stated 22 Years II Months. 6. Apparent age 22 Years II Months 7. Height 5 Feet 2\frac{3}{4} Inches. 8. Weight I33 Pounds. 9. Chest measurement { Minimum 35 Ins. Maximum 38 Ins. } 10. Complexion Ruddy. { Eyes Brown. Hair Brown. 11. Physical development. Good. { Good Fair Poor 12. Smallpox marks None.
5. Age as stated 22 Years II Months. 6. Apparent age 22 Years II Months 7. Height 5 Feet 2\frac{3}{4} Inches. 8. Weight I33 Pounds. 9. Chest measurement \(\begin{array}{cccccccccccccccccccccccccccccccccccc
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9. Chest measurement \begin{cases} \text{Minimum 35} & Ins. \ \text{Maximum 38} & Ins. \end{cases} & 10. Complexion \text{Ruddy.} \\ \text{HairBrown.} \\ \text{HairBrown.} \\ \text{Fair Poor 12. Smallpox marks None.} \end{cases}
11. Physical development. Good. Smallpox marks None.
11. Physical development. Good. Smallpox marks None.
11. Physical development. Good. Smallpox marks None.
(Right arm
13. Number of vaccination marks Right arm
15. Distinctive marks and marks indicating congenital peculiarities or previous disease None.
16. Slight defects but not sufficient to cause rejection Undescended testacle. (R.S.)
The man denies having had { Rheumatism Tuberculosis Syphilis We find no evidence of past { Rheumatism Tuberculosis Syphilis
(Strike out disease admitted or suspected.)
We have examined the above named man in accordance with the C. E. F. Regulations for medical examinations, and he is placed in Category W/R. 20/20. Y/L. 20/20. H/R. Normal.
H/L. Normal.
A May in lung President.
A June Coppyember. Hall the Member.
Date Result VACCINATIONS Date Result ANTI-TYPHOID INOCULATIONS, ETC.
Date Result Vaccinations Date Result Anti-Typhoid Inoculations, Etc.
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Date Result Vaccinations Date Result Anti-Typhoid Inoculations, Etc.
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Date Result Vaccinations Date Result Anti-Typhoid Inoculations, Etc.
Date Result VACCINATIONS Date Result ANTI-TYPHOID INOCULATIONS, ETC. M.O. M.O. M.O. M.O. M.O. M.O. Joined day of 191 at Corps Reg'tl Number Habits Date EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Signature of Man Wim Underson

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. DATES OF Signature of Date of Arrival Number of Admission into Hospital Discharge from Hospital. Medical STATION. at the DISEASE. days in Officer. Hospital. Station. Month Year Day Month Year Name. Christian Surname

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