

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.....

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Date and No. of Deposit Receipt for
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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.....

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DISCHARGE DOCUMENTS

Name Dyndall, Cecil Bertie

Regt. No. 55327 Rank Sgt

Corps #2 Gas Unit 19th Bn/1st Co. R.D.

Med Unfit

R. O. No.
H. Q. No. 1649-7-8-100



22309

12-19
12-19
7-19

Eng. M. B. 10-2-17
10-8-17

C. R. 15-2-18

ATTESTATION PAPER.

No. 55327

Folio.

CANADIAN OVERSEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?..... T Y N D A L L
- 1a. What are your Christian names?..... Cecil Bertie.
- 1b. What is your present address?..... 453 Morley Ave. Toronto, Canada
2. In what Town, Township or Parish, and in what Country were you born?..... Nottingham, England.
3. What is the name of your next-of-kin?..... Ellen M. Tyndall.
4. What is the address of your next-of-kin?..... 453 Morley Ave. Toronto, Canada.
- 4a. What is the relationship of your next-of-kin?..... Wife.
5. What is the date of your birth?..... January 14th 1883.
6. What is your Trade or Calling?..... Billing Clerk.
7. Are you married?..... Married.
8. Are you willing to be vaccinated or re-vaccinated and inoculated?..... Yes.
9. Do you now belong to the Active Militia?..... No.
10. Have you ever served in any Military Force?..... Yes. Imp. Army, 12 yrs. Corp. 48th High. (Militia) 18 mths. Pte.
11. Do you understand the nature and terms of your engagement?..... Yes. (19th O.S. Bn 3 yrs. 3 mths. Sgt (55327
12. Are you willing to be attested to serve in the }
CANADIAN OVERSEAS EXPEDITIONARY FORCE? } Yes.
13. Have you ever been discharged from any Branch of His Majesty's Forces as medically unfit? .. Yes.
14. If so, what was the nature of the disability? .. Broken Knees.
15. Have you ever offered to serve in any Branch of His Majesty's Forces and been rejected? .. No.
16. If so, what was the reason?.....

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Cecil Bertie Tyndall

do solemnly declare that the above are answers made by me to the above questions and that they are true, and that I am willing to fulfil the engagements by me now made, and I hereby engage and agree to serve in the Canadian Overseas 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.

C. B. Tyndall

(Signature of Recruit)

Date March 4th 1918

191

[Signature]

(Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Cecil Bertie Tyndall

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.

C. B. Tyndall

(Signature of Recruit)

Date March 4th 1918

1918

[Signature]

(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 Toronto, Canada this 4th day of March 1918

[Signature]

(Signature of Justice)

Description of Cecil Bertie Tyndall on Enlistment.

Apparent Age 35 years 2 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 ft. ins.

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

Complexion Medium

Eyes Hazel

Hair Brown

Religious denominations. { Church of England C. of E.

Presbyterian

Methodist

Baptist or Congregationalist

Roman Catholic

Jewish

Other denominations
(Denomination to be stated.)

CERTIFICATE OF MEDICAL EXAMINATION.

I have examined the above-named Recruit and find that he does not present any of the causes of rejection specified in the Regulations for Army Medical Services.

He can see at the required distance with either eye; his heart and lungs are healthy; he has the free use of his joints and limbs, and he declares that he is not subject to fits of any description.

I consider him* Fit for the Canadian ~~Over-Seas Expeditionary Force.~~

Date March 4th 1918 191

Place Toronto, Canada

*Insert here "fit" or "unfit."

Medical Officer.

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.

Cecil Bertie Tyndall

..... 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.

Date March 11th 191 Phil L. Selt (Signature of Officer)
O/C. No. 2 Special Service Co'y, C. E. F.

ATTESTATION PAPER.

No. 55327

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name? *Pyndall Cecil Bertie*
2. In what Town, Township or Parish, and in what Country were you born? *E. Furnstowe North Eng.*
3. What is the name of your next-of-kin? *Wife*
4. What is the address of your next-of-kin? *383 Rhodes Ave. Toronto*
5. What is the date of your birth? *14th Jan. 1883*
6. What is your Trade or Calling? *Bookbinder*
7. Are you married? *Yes*
8. Are you willing to be vaccinated or re-vaccinated? *Yes*
9. Do you now belong to the Active Militia? *No*
10. Have you ever served in any Military Force? *12 yrs. North Eng.*
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*

Pyndall (Signature of Man).

H. C. Sheppard (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *B. C. Pyndall*, 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.

B. C. Pyndall (Signature of Recruit)

Date *Nov. 11* 1914. *H. C. Sheppard* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *B. C. Pyndall*, 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.

B. C. Pyndall (Signature of Recruit)

Date *Nov. 11* 1914. *H. C. Sheppard* (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 *North* this *11* day of *Nov* 1914.

Wm. Blamire JP (Signature of Justice)

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

Herbert Gordon Major (Approving Officer)

Description of Tyndall Bertie on Enlistment.

Apparent Age 31 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 37 ins.
Range of expansion 3 ins.

Complexion Fair

Eyes Light

Hair Fair

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

Tatto on right arm
of flower in front
* left arm. B
woman

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 Nov 11 1914.

Place Toronto

L. B. Rhett
L. B. Rhett
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.

C. B. Tyndall 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.

John van Haren (Signature of Officer)
Date Nov 11 1914.

454 Morley Ave, Toronto Ont

#55327 Sgt. Tyndall C.B.

19th Bn.

Alive.

14
WILL

West Sandling Camp
August 28th 1915

In the event of my death
I give the whole of my
property and effects to
my wife.

Ellen Mary Tyndall

Apple Grove
off Morley Ave
Toronto

Canada

Witness

L. Callaghan Cecil Berlie Tyndall
19th Bn. Sgt. No 55327

2nd C.E.F.

B Coy 19th Bn.

2nd C.E.F.

58805

Proceedings on Discharge.

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

No. 55327.	
Rank R.S.M.	
Surname SYNDAL Christian Name Cecil. Portier <small>NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.</small>	
Corps (Squadron, Battery or Company) Clearing Services Command, C.E.F.	
Date of Discharge 12th February 1919.	
Place of Discharge Quebec P.C.	
1. DESCRIPTION AT THE TIME OF DISCHARGE.	
Age 36 years 2 months. Height 5 feet 7 1/2 inches. Complexion No tan Eyes Hasol Hair Brown Trade Billing Clerk Intended place of residence 453 Morley Ave., Toronto Ont <small>(To be given as fully as practicable.)</small>	Descriptive Marks Scar Right Knee.
2. The above-named man is discharged in consequence of DEMORILIZATION Routine Order No 142d.	
<small>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.</small>	
To be in the handwriting 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.
	<small>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.</small>
	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.

(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.....

-----Nil-----

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) Quebec P.Q.

(Date) 12th February 1919.

.....
Lieut- Colonel
Clearing Services Command
C.B.E.

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) Quebec P.Q.

(Date) 12th February 1919.

C. J. Lyndall (Signature of Soldier.)

H. W. W. W. W. (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) Quebec P.Q.

(Date) 12th February 1919.

(Signature) Lieut- Colonel.

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.)

for CB Kendall RSM
for Wm. W. Wilson

Reg. Conduct Sheet, Military Form B. 203	Attestation Paper, Military Form B. 235
Squadron Battery Company	Proceedings on Discharge, Military Form B. 218
Copies of Convictions, by C. P. in MS.	In the case of recruits who are rejected on final approval, the discharge documents will consist of
Med. Hist. Sheet, Military Form B. 313	(a) Proceedings on Discharge.
Medical Report for Invalid* B. 237	(b) Attestation.
Statement of Man's Account on Transfer and Last Pay, C. P. D. 371	(c) Medical History Sheet (in the event of such having been prepared).
*Only if discharged "Medically unfit."	
N. R.—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.	
Med. Hist. Sheet,	Militia Form B. 313	In the case of recruits who are rejected on final approval, the discharge documents will consist of	
Medical Report for Invalid*	" B. 227.	(a) Proceedings on Discharge.	
Statement of Man's Account on Transfer and Last Pay Certificate,	" D. 877.	(b) Attestation.	
*Only if discharged "Medically unfit."		(c) Medical History Sheet (in the event of such having been prepared.)	

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.

Proceedings on Discharge.

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

No. 55327.	
Rank R.S.M.	
	
Surname TYNDALL.	
Christian Name Cecil. Bertie.	
Note—The name must agree strictly with that on enlistment unless changed subsequently by authority.	
Corps (Squadron, Battery or Company) Clearing Services Command, C.E.F.	
Date of Discharge 12th February 1919.	
Place of Discharge Quebec P.Q.	
1. DESCRIPTION AT THE TIME OF DISCHARGE.	
Age 36 years 2 months. Height 5 feet 7 1/2 inches. Complexion Medium Eyes Hazel Hair Brown Trade Billing Clerk Intended place of residence 455 Morley Ave., Toronto Ont (To be given as fully as practicable.)	Descriptive Marks Scar Right Knee.
2. The above-named man is discharged in consequence of	
DEMOBILIZATION Routine Order No 1422.	
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 handwriting 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.
	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.

(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.....

Nil

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).....**Quebec P.Q.**.....

(Date).....**12th February 1919.**.....

Lieut- Colonel
Commanding **Clearing Services Command**
C.A.F.

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).....**Quebec P.Q.**.....

(Signature of Soldier.)

(Date).....**12th February 1919.**.....

(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).....**345.**years.....days.

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

11. Confirmation of Discharge.

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

(Place).....**Quebec P.Q.**.....

(Signature)

Goumarriot

Lieut- Colonel.

(Date).....**12th February 1919.**.....

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.)

for R. R. Randall
Witness

Reg. Conduct Sheet Militia form B. 103	Squadron Battery Company
Attestation Paper, Militia form B. 232	Proceedings on Discharge Militia form B. 218
Copies of Convictions, by C. P. in M.S.	Med. Hist. Sheet Militia form B. 313
Medical Report for Invalid B. 137	Statement of Man's Account on Transfer and Last Pay D. 817
(a) Proceedings on Discharge	(b) Attestation
(c) Medical History Sheet (in the event of such having been prepared)	
N. R.—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.	
Med. Hist. Sheet,	Militia Form B. 313	In the case of recruits who are rejected on final approval, the discharge documents will consist of	
Medical Report for Invalid*	" B. 227.	(a) Proceedings on Discharge.	
Statement of Man's Account on Transfer and Last Pay Certificate,	" D. 877.	(b) Attestation.	
*Only if discharged "Medically unfit."		(c) Medical History Sheet (in the event of such having been prepared.)	

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.

This space to be for numbers.

Proceedings on Discharge.

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

No.	55327
Rank	Sergt
Name	TYNDALL Cecil Bertie
NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.	
Corps (Squadron, Battery or Company)	#2 Cas Unit (19th Bn) (1st CORD)
Date of Discharge	24th Jan 1918.
Place of Discharge	Toronto Ont.
1. DESCRIPTION AT THE TIME OF DISCHARGE.	
Age.....35.....years.....1.....months. Height.....5.....feet.....7.....inches. Complexion Fair Eyes Hazell Hair Fair Trade Checker Intended place of residence } 454 Morley Ave (To be given as fully as } Toronto Ont. practicable.)	Descriptive Marks Scar rt Knee Tattoo rt arm
2. The above-named man is discharged in consequence of Physical Unfitness	
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 handwriting 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 1498
	N. B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldier 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. S. G. Comp. 12-2-19. Q. D. Checker

M. F. B. 218.

100m.—6-16.
H. Q. 1772-39-113

(OVER)

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

Nil

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

6. Medals and Decorations.....

Nil

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).....Toronto Ont......

(Date).....24th Jan 1918......

Commanding

J. H. Beeman

For O. C. Casualties, C. E. F., M. D.

Lieut.

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).....Toronto Ont......

C. H. Kendall

(Signature of Soldier.)

(Date).....24th Jan 1918......

J. H. Beeman

(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).....3 years 74 days.

Total.....3 years 74 days.

11. **Confirmation of Discharge.**

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

(Place).....Toronto Ont......

(Date).....24th Jan 1918......

(Signature)

J. H. Beeman

For O. C. Casualties, C. E. F., M. D. No. 2

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.)

(OVER)

21/2/18
A. H. L.

21/2/08
-948
468-20-2-0

List of Discharge Documents.

Reg. Conduct Sheet, Militia form B. 263.	Attestation Paper, Militia Form B. 235.
Squadron } Battery } Conduct Sheet, " B. 263a. Company }	Proceedings on Discharge " B. 218.
Copies of Convictions, by C. P. in MS.	
Med. Hist. Sheet, Militia Form B. 313	In the case of recruits who are rejected on final approval, the discharge documents will consist of
Medical Report for Invalid* " B. 227.	(a) Proceedings on Discharge.
Statement of Man's Account on Transfer and Last Pay Certificate, " 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.

Casualty Form—Active Service.

Regiment or Corps 19th Batta, G. E. F.Regimental No. 55327 Rank Sgt Name Dyndall, Cecil BertieEnlisted (a) 11.11.14 Terms of Service (a) Period of War Service reckons from (a) 11.11.14Date of promotion to } 6.11.14 Date of appointment } Numerical position on }
present rank } to lance rank } roll of N.C.Os. }

Extended _____ Re-engaged _____ Qualification (b) _____

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
3 ⁹ / ₁₆	10 Staty	Disembarked	Boulogne	SEP 14 1915	
4 ⁹ / ₁₆	do	Admitted (N.Y.D.)	10 Stationary	3 ⁹ / ₁₆	W 3034
5 ⁹ / ₁₆	35 General	Transferred (Inter Derang Rt knee)	Am Barge A 370	4 ⁹ / ₁₆	W 3034
6 ⁹ / ₁₆	AS Stad Antwerpen	Admitted do	35 General	5 ⁹ / ₁₆	W 3024
		Admitted (Derangement of knee joint)	AS Stad Antwerpen	6 ⁹ / ₁₆	W 3083
Part 11 Orders No. 43 d/13-9-16.					
J. Whogan Captain, for Lieut. Colonel, A.A.G.					
15.9.16	Taken on strength C.C.A.C. Pt. II D.O. No. 399				
12.11.17	ATTACHED				
	TRANSFERRED FROM C.C.A.C. TO G.D.D. PART II D.O. No. 5 for 18882				

(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.]

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				

22/3/17 C.C.D. attach to 1st C.B. & Hastings 22/3/17 Part 2 S.O. 87

R. J. Harris LX

O. i/c Records & Dispatch,
For Lt. Col. Commanding,
Canadian Garrison Duty Depot.

cases to be attached on proceeding to ...

1st C.O.R.D. 10-11-17
L. F. Adams
Adjutant,
Canadian Command Depot,

4-4-17 1st C.O.R.D. T.O.S. 1st C.O.R.D. att to
1st C.C.D.

West Sandling 4-4-17 Pt. II D.O. No. 26

13-11-17 - 50 - Cases to be att to 1st C.C.D.

- 50 - 12-11-17 - 50 - 249

28-11-17 - 50 - Att to 1st C.O.D. Buxton

- 50 - 28-11-17 - 50 - 264

NOV 29 1917

TAKEN ON STRENGTH C.D.D. BUXTON Pt. 11 ORDER No. 283

Lieut. & Assist. Adjt.

Commanding

for O. C. 1st C. O. R. D,
Lieut.-Col.
Canadian Discharge
Depot.

DEC 7 1917

EMBARKED FOR CANADA FROM LIVERPOOL

Commanding

Lieut.-Col.
Canadian Discharge
Depot. O. # 316

29-12-17 - #2 Cas.
Unit - T-O S.

Toronto.

21-12-17

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

M. F. W. 54. (A. F. B. 105.)

500M.—9-16

H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps. #2 Cas Unit

Regimental No. 55327 Rank SGT Name Tyndall Cecil Bertis
C. E. F.

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

Date of promotion to } Date of appointment } Numerical position on }
present rank } to lance rank } roll of N. C. Os. }

Extended..... Re-engaged..... Qualification (b).....

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
Dis	#2 Cas Unit Toronto Ont	24th Jan 1918	Part 11...	19	

(a) In the case of a man who has re-engaged for, or enlisted into Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) e.g. Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

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

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

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

500M.—9-16

H. Q. 1772-39-9-0.

Casualty Form—Active Service.

Unit, Regiment or Corps. No. 2 Special Service Coy., C.E.F.

Regimental No. 55327 Rank Private Name TWINDALL, Cecil Bertie

C. E. F.

Enlisted (a) 4/3/18 Terms of Service (a) D. of W. Service reckons from (a) March 4/18.

Date of promotion to present rank } Date of appointment to lance rank } Numerical position on roll of N. C. Os. }

Extended. Re-engaged. Qualification (b) Billing Clerk (Civil)

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				
<u>4/3/18</u>	<u>—</u>	<u>S.O.S. on transfer to Clearing Depot, Quebec</u>	<u>Quebec, Que</u>	<u>4/3/18</u>	<u>Part 1 Order # 81</u>
<u>12-2-19</u>	<u>Quebec P.Q.</u>	<u>Discharged from the Service under Demobilization HQO. 1420.</u>	<u>Quebec P.Q.</u>	<u>12-2-19</u>	

J. Johnson
Lieut. Adjutant
No. 2, Special Service Coy., C.E.F.

G. H. Marriott
Lieut.- Colonel
Commanding Clearing Services Command C.E.F.

(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.]

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				

ORIGINAL MEDICAL HISTORY SHEET.

Surname Lyndall

Christian Name Carl Bertie

Examined { on 11 day of Nov 1914
at Toronto

Approved by

L.B. Phatton

Birthplace { City or Town Edinstowe
County Notts

Rank Lt. Col. M.O.

Apparent age 31

Trade or occupation Checker

Height 5 Feet 7 Inches.

Weight 140 Lbs.

Chest measurement { Minimum 34 inches.

{ Maximum expansion 37 inches.

Physical development Fair

Small-Pox Marks None

Vaccination Marks { Arm 3 Right. 3 Left.

{ Number Army 1900

When Vaccinated last Army 1900

(a) Marks indicating congenital peculiarities or previous

disease

(b) Slight defects but not sufficient to cause rejection

Enlisted on 28 day of October 1914 at Toronto

	CORPS.	REG'T NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>48th Highrs</u>		<u>1</u>	<u>28/10/14</u>
Transferred to..	<u>19th Infantry Battr C.E.F.</u>	<u>55327</u>		

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>St Leonards East Javeling</u>	<u>10/8/17</u>	<u>Synovitis of knee</u>	<u>B.T. got off to Canada</u>
	<u>27-9-17</u>	<u>Synovitis of knee</u>	<u>B.T. got off to Canada</u>
<u>Ravina Bks., Toronto</u>	<u>Jan. 9/18</u>	<u>Pain & Weakness in R. Knee</u>	<u>"E" W.T. McLean</u>

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

CANADIAN

STANDING MEDICAL BOARD.

Major AMC
Pres. SMB

Surname

Christian Name

Spindall
Spindall
Spindall

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				
Toronto	6. 11. 14										
H.T. Scandinavian	13. 5. 15										
Shorncliffe	23. 5. 15										
3rd Northern General Hospital SHEFFIELD.		7	9	16	18	12	16	Int: derange- Knee	94	Transferred to Lebridge.	Amsonnell
Convalescent Hospital, Millingdon House, Lebridge.		27	12	16	9	12	17	Do		Transferred to C.B.A.C. for duty 9. 2. 17	Spindall

Lt. Colonel, R.A.M.C. (T)
 3rd Northern General Hospital.

Next of Kin (wife) Mrs. E.M. Tyndall,
453 Morley Ave. Toronto.

Examined by
T.B. Robertson,

(Medical Officers will please read this Form carefully before using it. See instructions, page 4.)

Nov. 11, 1917.

FORM TO BE USED FOR WARRANT OFFICERS, N.C.O.'S, AND MEN
Man's address same.

Toronto..

MEDICAL HISTORY OF AN INVALID

STATION Rav. Brks. Toronto. DATE Jan. 8th. 1918.

1. (a) Unit #2 Casualty (b) Regimental No. 55327 (c) Rank Sergeant.

(d) Surname TYNDALL (e) Christian name Cecil Bertie.

2. Age last birthday 34 Date of birth Jan. 14, 1883.

3. Enlisted at Toronto. on Nov. 11, 1914.

4. Personal description:—

(a) Height 5 ft. 7 in. (b) Weight 130 (c) Complexion Fair.

(stripped)

(d) Colour of hair Fair (e) Colour of eyes Hazel (f) Identification marks Tattoo

on right arm and left arm. Vaccs. two on left arm.

5. Address after discharge (for the use of the Board of Pension Commissioners.)

454 Morley Ave. Toronto, Ont.

6. Former trade or occupation Clerk.

7. (a) Service

Years

3

Days

59

PERIODS

From

To

19th. Battalion

Nov. 11, 1914.

Dec. 21, 1917.

#2 Casualty.

Dec. 21, 1917.

To Date

(b) Has he been Overseas? Yes. France.

8. Present disease or disability (use authorized nomenclature if possible). Pain & Weakness R. Knee.

(a) Date of origin Prior to enlistment. (b) Place of origin West Indies.

(c) Cause* Injury to right knee with subsequent operation.

*(Here include original disease or injury)

9. Present condition. (Important, to be a full description of the present disabling condition or conditions).

Subjective:— Constant dull ache in right knee. Pain extending down shin

when walking. After walking $\frac{1}{2}$ mile leg gets very weak and painful. Knee

occasionally locks in a semi-flexed position. Sleeps fairly well. No pain

at night. Walks with a stick. Walks with a stiff leg. Afraid of knee

going out.

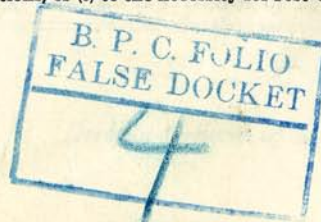
Objective:— Semicircular scar inner side right knee joint slight pain on

pressure over joint at this point. Slight creaking of joint on movement

Ache on movement. no pain. Movement of joint normal. Other systems normal

Incapacity due to pain and weakness of right knee.

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



10. History ;

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

Two vaccination scars on left arm.

Flower Pot tattoo on left arm. Dancing girl right arm.

two operation scars inner side right knee.

Veins in both legs prominent. No disability.

Very slight degree of flat feet. No disability.

11. To what extent, state in percentages, is capacity to earn a livelihood in the untrained labour market reduced? If there is more than one disabling condition, estimate the incapacity due to each, and that due to all combined.

20%

12. Did the disability arise on or off duty? Off duty.

13. Was a Court of Inquiry held? Not applicable.

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

Yes 10%

No

(If the answer is in the affirmative, state in percentages, to what extent the soldier is incapacitated by that aggravation.)

15. Was the disability caused or aggravated by negligence, by vice or by misconduct, or by unreasonable refusal to accept treatment? No

(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.)

16. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? Permanent.

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

Sheffield 7-9-16 to 18-12-16.

Uxbridge 22-12-16. to 9-2-17.

18. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit?

No

19. Can the former trade or occupation be resumed? No

20. Recommendations

That he be placed in Category C.3.

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.)

I, the undersigned, have heard the description of my disability read, and am satisfied (or not satisfied) with it. (If dissatisfied, statement should follow.) I complain in addition of

Signature of soldier examined.

OPINION OF THE MEDICAL BOARD

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

We concur.

22. Is the soldier fit for

- | | | |
|---|--------------------------|------|
| (a) General service, | (Category A) (Yes or No) | |
| (b) Service abroad, not general service, | (" B) (Yes or No) | No. |
| (c) Home service, (Canada only), | (" C) (Yes or No) | No. |
| (d) Temporarily unfit, | (" D) (Yes or No) | No. |
| (e) Unfit for service in Categories A, B and C, | (" E) (Yes or No) | Yes. |

23. It is certified that the soldier

- ~~(a) Does require treatment.~~
- (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).

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

That he be placed in Category E., and discharged as
physically unfit.

<u>W. T. McLean</u>	Major	President.
<u>Y. J. J. J.</u>	Capt.	Members.
<u>C. J. J. J.</u>	Capt.	

STATION Ravina Barracks, Toronto.

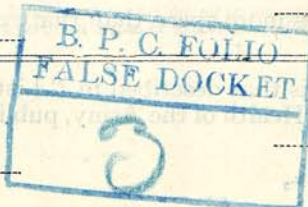
DATE Jan. 9, 1918.

APPROVED BY

DATE Jan. 16/18

APPROVED BY

DATE



Charles Carter M.D.
Assistant Director of Medical Services.

Director-General of Medical Services.

334
9/12/15
H
J25

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.

INSTRUCTIONS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of pages 1 and 2 of this Form. The President of the Board of Medical Officers is responsible for the proper completion of the space, of page 3, reserved for recording the Proceedings of a Board of Medical Officers.
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. If a complete answer to any question requires more space than that reserved for it, the answer may be continued on the blank space on this page.
5. The nomenclature of diseases to be followed is that 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 and Sons.

To be used for recruits enlisting direct into the Regular Army only.
Army Form B. 178^A to be used for Special Reserve recruits and
Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname Tyndal¹ Christian Name Cecil Bertie

TABLE I.—GENERAL TABLE.

Birthplace ... Parish Edwinstowe County Notts.

Examined ... { on 11th day of November 191 4.
 at Toronto

Declared Age ... years ... days.

Trade or Occupation ... Checker

Height ... feet, 5 inches.

Weight ... lbs. 140

Chest { Girth when fully Expanded. 34 inches.

Measurement { Range of Expansion 37 inches.

Physical Development ... Fair

Vaccination Marks { Arm ... Right 3 Left 3
 Number 6

When Vaccinated ... Army 1900

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) L.B. Robertson

(Rank) Lt.A.M.C.

Medical Officer.

Enlisted ... { at Toronto
28th day of October 191 4

Corps.	Regtl. No.
<u>48th Hrs.</u>	<u>55327</u>
<u>19th Infantry Battn.C.E.F.</u>	
Transferred to ...	

Became non-effective by

This Medical History Sheet has been compared with the
 Corresponding Attestation Paper, and entries made in red 191 .
 on day of been taken from the Attestation Paper.

(Signature) W.R. WARD,

(Rank) Colonel in Charge of Records,
Canadian Contingents.

I certify the foregoing to be a true copy of an original entry on a
 Medical History Sheet of this man.
 C.A.M.C.
 for the Officer in Charge of Records
 Canadian Contingents.

Rec.
 14-2-18
 J.M.

Table II.—Only for Admissions to Hospital or to the Sick List in the case of Warrant

[illegible]

[illegible]

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.
	Vaccinations.
27.1.15.	
	Anti-Typhoid Inoculations, etc.
30.11.14.	
8.12.14	
14.12.14.	

Table IV.—Service Table.

[illegible]

55327
DENTAL CERTIFICATE.

Sgt. Lyndall C.B.

The following Certificates will

be attached to the Medical History Sheets of all

Other Ranks being returned to Canada for disposal.

1st CORD

Date of Examination.	Present Dental Condition.	In case of loss or decay of teeth. Is the loss due to wounds, injury or disease directly attributed to Active Service?	Has he ever declined Dental Treatment.	Recommendation.
29-11-17	Set			Elmer Capt. C. H. C.

B. P. C.
C. R.
FEB
18
1918

139263
DEPT.
MILITIA & DEFENCE
649-
FEB 16 1918
8100
CANAD.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at..... 1916.

No. 55327 Rank Sgt. Name TYNDALL, C. B.

Local Unit..... Overseas Unit 19th. Age 34

Examination held at..... Hastings.

DISABILITY.
Overseas—Local.
(scratch one out)

Synovitis of Right Knee.
Sept 5/1916.

PRESENT CONDITION.

12 mrs full duty in France.
Removed Antilope Sept 13/1916.
at Royal in January - Sheffield.
"Joint still looks"
It had off on 1st March 1906. and had some trouble
"locking" after that began enlistment - -

BOARD RECOMMENDS:— Is still troublesome O 1

1. Fit for Duty.....
2. Fit for duty after..... weeks' physical training.
3. Fit for Temporary Base Duty..... weeks.
4. Fit for Permanent Base Duty
5. Discharge

Signatures:—

Members

H. H. May Capt. President.
T. J. G. P. H. Capt.

APPROVED

Dated at..... 1916.

B. P. C. FOLIO
FALSE DOCKET
10.2.1917
Hastings, Sussex.

For A.D.M.S.

For A.D.M.S., Canadians.

Hastings, Sussex.

DEPT.
MILITIA & DEFENCE

PROCEEDINGS OF A MEDICAL BOARD.

FEB 16 1918

649-2-8100
CANADA.

Dated at St. LEONARDS AUG 10 1917.

No. 55827 Rank Sgt Name TYNDAL C. B.

Local Unit 19TH BN. Overseas Unit 19TH BN. Age 35.

Examination held at St Leonards - 1st Lb. D.

DISABILITY.
Overseas—Local
(scratch one out).

CHR. SYNOVITIS RT. KNEE. - 1902

IN FRANCE 12 MOS.

PRESENT CONDITION.

In Imperial Service 1902 his knee was injured and while in hospital it began to lock in a flexed position. In 1906 a piece of cartilage was removed from joint and in Sept 1916 another piece was taken out. About one month ago the knee locked again and it tries out very quickly. He is unable to do P.T. or long marches.
General condition good

BOARD RECOMMENDS:—

1. Fit for Duty B II
2. Fit for duty after weeks' physical training.
3. Fit for Temporary Base Duty weeks.
4. Fit for Permanent Base Duty
5. Discharge

Signatures:—

Members

President.

APPROVED Hastings, Sussex.

Dated 14 AUG 1917 1917.

B.P.C. FOLIO
FALSE DOCKET

For A.D.M.S.

16
2.
D 324/18

16/2/18
324

PROCEEDINGS OF A MEDICAL BOARD.

409-16-2-18
Dated at 1917

No. Rank Name
Local Unit Overseas Unit Age

Examination held at

DISABILITY.
Overseas—Local
Section and Duty

PRESENT CONDITION.

BOARD RECOMMENDATIONS—

1. Fit for Duty
2. Fit for duty after weeks physical training
3. Fit for Temporary Base Duty weeks
4. Fit for Permanent Base Duty
5. Discharge

Signatures—

President

Members

APPROVED

Dated 1917

02 Inf. 25276

Army Form B. 178.

393 13-9-16

To be used for recruits enlisting direct into the Regular Army only.
Army Form B. 178^A to be used for Special Reserve recruits
and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname Tyndall Christian Name C B

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.
	19th Battalion C E F	55327
Transferred to ...		

Became non-effective by ...

on ... day of ... 191

(Signature) ...

(Rank) ...

Table II.—Only for Admissions to Hospital or to the Sick List in the case of Warrant Off

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks bearing on the cause, nature, or treatment of the case. In cases of syphilis, admissions and re-admissions subsequent progress, including particulars of treatment or given in the special syphilis case sheet.
	Day	Month	Year	Day	Month	Year			
C.C.H.Uxbridge.	22	12	16				Synovitis Right Knae		<p>Present Condition:-</p> <p>Operative scar right Knee. J</p> <p>Creaks on movement. Locks in</p>

sions to Hospital or to the Sick List in the case of Warrant Officers treated in quarters.

Disease	Number of days in Hospital	Remarks 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
Ostitis Right Knee		<p>Present Condition:-</p> <p>Operative scar right Knee. Joint painful when walking Creaks on movement. Locks in semi flexion quite often.</p>	<p><i>Chas Lewis</i> <i>Sept. 6. 1914.</i></p>

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
Hostig 3/4/17	Synovitis of right knee. C. I. Pottinger Capt
Schlesinger 10/8/17	B. I. [Signature] [Signature]
Eastland Aug 27-9-17	Synovitis of Rt Knee B. I. [Signature] [Signature] PRESIDENT, STANDING MEDICAL BOARD

Table IV.—Service Table.

[illegible]

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

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

No. 55327 Rank P. S. M. Surname Tyndall Cecil Beattie
(Given name in full)

Unit or Corps Training Centre Command Birthplace Trattingham, England

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

1. GENERAL DESCRIPTION:

Physique good Weight 138 lbs. Height 5 ft. 7 1/2 in. Colour of Eyes hazel
Nutrition good
Pulse 80
Condition of arteries good
Vision Rt. 20/20 Left 20/20
Hearing (conversational voice) Rt. 20 ft.
Left 20 ft.

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

Tattoo on both forearms

Opinion as to general health and physical condition good

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

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

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

Pension from previous Medical Board
(Chronic synovitis of right knee joint).

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at (Overseas)

Date Signed M.O.

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

Signature

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

THIS SECTION FOR USE IN CANADA—

Examined at *Quebec P.Q.* (Canada)

Date *February 12th - 1919* Signed *E. Paré M.D.* M.O.

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

Signature

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

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

MEDICAL CASE SHEET.*

P.T.O.

(m)

Station
and Date.

ADDITIONAL MEMO re Part 1.

(1) Married

Yes

3

(2) Occupation

black

(3) Enlisted at

Toronto.

Date

Nov 14

(4) Vaccinated for Small Pox

Yes

(5) Inoculated for Typhoid

3

for Tetanus

Yes

Section

(n)

Date.

TREATMENT, &c., re Part II.—Continued.

Progress.

21-1-17

Present condition.

Open a scar Rt knee.

Joint painful when walking
Creaks on movement.Locks in semi-flexion quite
often;

Chas Lewis Esq.

Signed

Capt., C.A.M.C.

(o)

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
13210	55327	Serg.	Tyndale	Cecil B.
Year	Unit.	Age.	Service.	
1916	19 th Canadians	B	33	15 years
Station and Date.	Disease			
3rd A G H Sheffield 7-9-16.	¹²²¹ Int. Derangement of Rt. Knee Jt.			
	Has had locking of the Rt knee Joint recurring at intervals since he fell down a cliff in West India.			
	Had operation in 1906 in Bloemfontein but with only slight improvement.			
	Fell in trench last October & has been worse since then.			
	Scar of old operation.			
	Transf. to Ward 9. Royal Infirmary for operation.			
Sept 11 th	Skidogram of knee.	W Monat. Capt R Amer		
Sept 13 th	Int. incision about $\frac{1}{2}$ of the int semilunar cartilage was found - it was loose & thickened at one end as if it had been repeatedly rubbed in the joint. Removed.	W Monat. Capt R Amer		
30	Cavalrescent	W Monat. Capt R Amer		

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

Station
and Date.

31/11

Stark Parker

Spent time in Message

RM

Nov 20th think this man is unfit for
further service ^{if was found} as he had other
authorities already established untrue at
operation.

think he should be fitted with a
Manshi's Splint & discharged &
unfit for further service

W. S. Monist
Capt RMCF

Dec 13th

please discharge to

Canadian Depot

W. S. Monist Capt
RMCF

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
13210	55327	Serg.-	Tyndall	Cecil B.
Year	Unit.		Age.	Service.
1916	19 th Canadians	B Co.-	33	15 yrs
Station and Date.	Disease			
3 rd C. G. H.	Int. Derangement of Knee 1221			
7/9/16				
7/16	w/p			
8/10	Dysuria			
17/16	- Treatment sch. p. 1221			
2/10	w/m			
17/16	-			
7/11/16	-			
	L. Acute 7 gr V L.S.			
8/11/16	R. Acute 7 gr V L.S.			
6/10	L. Acute 7 gr V L.S.			
7/10	w/p			
17/16	L. Acute 7 gr V L.S.			
18.12.16	Transferred to Canadian Conv. H. Bushey Park			

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

Station
and Date.

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

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

Regimental No. 55327 Rank RSM Name Tyndall, C.B.

Corps Clearing Services Command who was* Discharged

On 12-2-19 1919, to 1-2-19 1919,
*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1-2-19 1919,
to 12-2-19 1919, the inclusive date of transfer or discharge.

Dr.	\$	c.	Cr.	\$	c.
Bal. Dr. from prev. month.....			Bal. Cr. from prev. month.....		
Advances } No.....			Reg't Pay <u>12</u> days at \$ <u>1</u> c. <u>85</u>	<u>22</u>	<u>20</u>
by } No.....			Field Allow <u>12</u> days at \$ <u>20</u> c. <u>40</u>	<u>2</u>	<u>40</u>
Cheques } No.....			Separation Allowances* (Monthly)	<u>12</u>	<u>00</u>
Assigned Pay and Sep'n Allce. No.....	<u>12</u>	<u>00</u>	Other Allowances*		
Other charges			Other Credits* <u>Civ. Clothing</u>	<u>55</u>	<u>00</u>
Payment on transfer or discharge No.....	<u>59</u>	<u>60</u>	Bal. Dr. (to be deducted by new unit).....		
Balance Cr. (to be paid by the new unit).....					
Total.....	<u>71</u>	<u>60</u>	Total.....	<u>71</u>	<u>60</u>

* Give particulars.

A monthly stoppage of \$ 25.00 (†) has Not (‡) been paid on account of Assigned
{ Pay for the month of February 1919 }
{ and Sep'n Allce. for month of Feb. 12th. 1919 } (to) Assignee. Mrs E.M. Tyndall
(Address) 453 Morley Ave, Toronto, Ont.,

(†) 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.....

REMARKS:—

State (1) date of enlistment 1-3-18
(2) if married and if a Separation Allowance Card has been submitted yes. yes
(3) cause of discharge Demobilization authority D.O.43
(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 Feb. 12th. 1919

Place Quebec

[Signature] Capt.
Paymaster.

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.

M. D. 2 (4) CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

No. 23

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

Regimental No. 55327 Rank Sgt Name C. B. Tyndall
Corps # 2 Cas Unit who was* Discharged
On Jan 24 1918, to _____
*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from _____
to Jan 24 1918, the inclusive date of transfer or discharge.

Dr.	\$	c.	Cr.	\$	c.
Bal. Dr. from prev. month		46	Bal. Cr. from prev. month		
Advances } No. <u>13197</u>	15		Reg'tl Pay <u>56</u> days at \$ <u>1.35</u>	75	60
by } <u>14860</u>	20		Field Allow. <u>56</u> days at \$ <u>1.5</u>	84	0
Cheques } No. <u>16045</u>	10		Separation Allowances* (Monthly)		
<u>16651</u>	10		Other Allowances* <u>sub</u>	14	40
Assigned Pay and Sep'n Allce. No.			Other Credits* <u>clothing</u>	13	
Other charges <u>occup'd 40 Ottawa</u>	48	5	Bal. Dr. (to be deducted by new unit)		
<u>16652</u>	4	72			
Payment on transfer or discharge No.					
Balance Cr. (to be paid by the new unit)					
Total	111	40	Total	111	40

* Give particulars.

A monthly stoppage of \$ 20.00 (†) has _____ (‡) been paid on account of Assigned
Pay for the month of Jan 1918
and Sep'n Allce. for month of Jan 1918 (to) Assignee Mrs Ellen M. Tyndall
(Address) 453 Morley Ave
Toronto

(†) 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. _____

REMARKS:—

State (1) date of enlistment _____
(2) if married and if a Separation Allowance Card has been submitted yes
(3) cause of discharge _____ authority 0019
(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 31/1/18

Place Toronto

L. W. Nurse

Paymaster.

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.

Rank *Sgt.* Name **TYNDALL Cecil Bertie** Reg'l No. **55327**
 Unit **19th Bn.** If in perm. Corps, What Unit? Married or Single **Married**
 Place and Date of Enlistment **Toronto. Ont. 11th Nov. 1914** Place of Birth **Nottinham Eng.**
 Name and Address, Next-of-Kin **Mrs Tyndall, 382, Rhodes Ave, Toronto. Ont.**
 Relationship **Wife.**

Assigned Pay Monthly \$ Payable to

Separation Allowance \$ Payable to

Relationship

Relationship

N/E. R.B. No.	<i>10296</i>
File R.L.	<i>Lean R. 213376</i>
Category	<i>6-creators</i>

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				
<i>13.9.15</i>	<i>O.C. 19.</i>	<i>Arrived in England.</i>	<i>22 MAY 1915</i>		
<i>26.7.14.</i>	<i>O.C. 19.</i>	<i>To be Sgt.</i>	<i>Canada</i>	<i>6-11-14</i>	<i>P. Nom. R.</i>
<i>13.9.15</i>	<i>"</i>	<i>Confirmed in Applas Sergt</i>	<i>W. Sandling</i>	<i>1-7-15</i>	<i>Nom. R. Rail</i>
<i>14.3.16</i>	<i>"</i>	<i>Embarked for France</i>	<i>Folkestone</i>	<i>14-9-15</i>	
<i>14.3.16</i>	<i>"</i>	<i>Granted 8 days' leave to England from</i>	<i>In Field</i>	<i>14.2.16</i>	<i>Part II no 12.</i>
<i>30.6.16</i>	<i>"</i>	<i>Confirmed in rank of Sgt</i>		<i>6.11.14</i>	<i>Part II 29.</i>
<i>11.9.16</i>	<i>19^a</i>	<i>Due of promotion</i>		<i>6.9.16</i>	<i>Cus. List B 146</i>
<i>13.9.16</i>	<i>O.C. 19^a</i>	<i>3rd Northern General Hospital Sheffield</i>		<i>6.9.16</i>	<i>Part II 43 S</i>
<i>13.9.16</i>	<i>O.C. 19^a</i>	<i>To CCAC</i>	<i>Folkestone</i>	<i>6.9.16</i>	
<i>13.9.16</i>	<i>O.C. 19^a</i>	<i>Taken on Str.</i>		<i>5.9.16</i>	<i>393</i>
<i>27.12.16</i>	<i>19 Bn</i>	<i>Hd CCAC Hellingham Hse</i>	<i>Uxbridge</i>	<i>21.12.16</i>	<i>CLB 236</i>
<i>11.2.17</i>	<i>CCAC</i>	<i>Repled from Uxbridge</i>	<i>Hastings</i>	<i>9.2.17</i>	<i>PT 71 & CLB 274</i>

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				
31-3-17	ccac	Reported from leave	Hastings	12-3-17	RE 0137.
31-3-17	ccac	S.O.S. 1 st Cent Out Regt Camp to 1st B. B.N.	Hastings	12-3-17.	RE 0137
4-4-17	1st BORN	20 S. from C.B.A.C. & on Att'd from C. B.N.D.	W. Sandy	12-3-17	— 26.
24-3-17	1st B.B.N.	for duty, P.2. R. & B.	Pt. Leonard	22-3-17	Pt. II NO 28
10-11-17	1st B.B.N.	leave to be att'd 1 B.B.N.	Sgt E. Sandy	10-11-17	— 236
10-11-17	"	Att'd from 1 BORN p.2. R. & B.	"	10-11-17	— 236
12-11-17	"	leave to be att'd 1 BORN	"	12-11-17	— 238 + 249 d. 12 th 17
28-11-17	1 BORN	On com. to 1 B.N.D.	" W "	28-11-17	— 264
15-12-17	"	leaves on com 1 B.N.D. & " S.O.S. to Canada for duty 179.	"	7-12-17	— 281
Dis. Defoli		Class Duty	19/12/17	NR 418.	
			Toronto	Toronto - Ont.	

649-J-8100.

CARD NO.

SURNAME.

Tyndall

S.O.S. Dis

24/1/18.

FOLL.

2

CHRISTIAN NAMES

Cecil Bertie

REGL. NO.

55327.

RANK

Sergt.

UNIT

19th

Br.

FORMER CORPS

North Fusiliers. 12 yrs.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Tyndall, Mrs.

RELATIONSHIP TO SOLDIER

Wife.

ADDRESS

~~382 Rhodes Ave.~~

10 Applegrove

Toronto Ont.

Aut. SAMP 14-3-16) K.P.

COUNTRY OF BIRTH

England

Edinburgh Jan. 14th. 1883.

DATE

PLACE OF ATTESTATION

Toronto Ont.

DATE

Nov. 11th 1914

G/S. 13/5/15-75-17.

L. L. 94504. M. & D. 6512

M. F. W. 22. 250M.-2-16. H. Q. 1772-39-339.

Th.

Sailed from Montreal per S.S. "Scandinavian" May 13/15.

MARRIED

yes

SINGLE

WIDOWER

TRADE OR CALLING

Checker.

RELIGION

Church of England

DESCRIPTION.

APPARENT AGE

31 YEARS

MONTHS

HEIGHT

5 FEET

7

INCHES

CHEST MEASUREMENT

37 INCHES

EXPANSION

3

INCHES

COMPLEXION

Fair.

EYES

Hazel.

HAIR

Fair.

DISTINGUISHING MARKS

Tattoo on right arm "Floover,
left arm "Woman."

MEDICAL EXAMINATION.

PLACE

Toronto, Ont.

DATE

Nov. 11th. 1914.

Present Address - Not stated

SURNAME.

Tyndall

CHRISTIAN NAMES

Cecil Bertie

REGL. NO.

55327

RANK

Pte P. D. X M.

UNIT

Spec. Ser. Co. Per: Conducing \$⁶ off.

FORMER CORPS

Imp. Army (12 yrs.) 48th Regt. (18 mos.) 19th Bn. (3 yrs. 3 mos.)

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Tyndall, Mrs. Ellen M.

RELATIONSHIP TO SOLDIER

Wife.

ADDRESS

453 Morley Ave., Toronto
Ont.

COUNTRY OF BIRTH

England, Nottingham

DATE

Jan. 14th 1883

PLACE OF ATTESTATION

Toronto, Ont.

DATE

Mar. 4th 1918

L. L. 26989

M. & D. 8191.

O/S. 9/4/18. 7336.

O/S. 9/6/18 7353.

R/C. 28-10-18 226

R/C. 20-5/18. 176

R/C. 25/1/19.

R/C. 10/9/18. 198

M. F. W. 22. 100M.-8-17. H. Q. 1772-39-339. 255-

MARRIED

SINGLE

WIDOWER

TRADE OR CALLING

RELIGION

DESCRIPTION.

APPARENT AGE

YEARS

MONTHS

HEIGHT

FEET

INCHES

CHEST MEASUREMENT

INCHES

EXPANSION

INCHES

COMPLEXION

EYES

HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE

DATE

649-T-8100

ac
Number

55327

Rank

Sgt

Surname

TYNDALL

Christian Names

Lecil Bertie

Unit

19th Bn Can Inf

Theatre of War

France

Date of Service

14-9-15

Remarks

526 Dundas St. E., Toronto

22 1/2

Latest Address

453 Marley Ave

Toronto Ont

Roll No.

Page 2394

19th B

DESP. APR 27 1927.

REC'D. No 71650

NAME

RANK AND CORPS

CABLE

NO.

DATE

H. Q. FILE No. 649-

REGT'L. No.

NATURE OF CASUALTY

Sailed from Liverpool for Can per.
S.S. Justicia 7-12-17. His of. R. G.

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

B146	3 rd North, Gen, Sheffield	6-9-16	Deranged Knee Joint.
B236	Hillingdon Hos Can Conv Uxbridge	²¹ 7-12-16	Int Deranged Knee Joint
B274	" " " " "	9-2-17	(Deranged Knee Joint (Cartilage) Disch.

Name Tyndall.Cecil.Bertie. ^{Rank} Sgt.

Reg. No. 55327

Unit 19th. Battalion.

Next of Kin Canada.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1916			Knee Joint.			
6-9	3rd. N.G.H.	Sheffield.	Deranged	B146		
			do			
21-12-16.	Hillingdon Hse.	Can.C.H.	Uxbridge	B236		
9-2-17.	Discharged		do	B274		

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

Surname

Christian Name or Names

Reg. No.

Tyndall

C. B.

55327

Rank

Unit

Co.

Troop

Batty.

Sgt.

19 Batt.

Hospital

Date of Admission

3 Northern Gen. Sheffield

6.9.16

Transferred Hasbridge Convale

Hosp. 21.12.16

Hosp.

Hosp.

Hosp.

Diagnosis

Discharged 1 knee joint
cartilage(1)
Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

DISPOSITION

Date

Dis. 9.2.17

REMARKS

A.L. 11.9.16 B146

27.12.16 B236.

10.2.17 B274.

A.M.D. 2 DEPT.

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

RW

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

SUBJECT

VOL.

55327

THIS CHARGE-OUT AND ABSENT CARD **MUST NOT** LEAVE THE REGISTRY

THIS CHARGE-OUT AND ABSENT CARD **MUST NOT** LEAVE THE REGISTRY

VOL.

SUBJECT

[illegible]

M. & D. FORM O.S.S. 5.
12950-60M-1-24.

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

17414/347

18332-e-1

Name **TYNDALL, CECIL BERTIE**
Surname Christian Name

Regimental Number **55327** Rank **SGT.**

Address (in full) **453 MORLEY AVE.,
TORONTO, ONT.**

Unit **19th BN.**

Original Unit

District where paid **M.D. 2.**

Date of Discharge **24-1-18.**

P. D. P. Filing Number **6-329-2.**

Rates:—Regimental pay \$ **1.35** per diem: Field Allowance \$ **.15** per diem. Separation Allowance \$ **25.00** per month.

L. L. 22573—M. & D. 8009.

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		
211 50	5516	11-2-18	70 00	5441	11-3-18	70 00	5325	11-4-18	71 50		211 50
<i>Over</i>											

Remarks:

M. F. W. 127.
50M-6 17.
1772 33-1140.

Debit No. 17414/347 File No. 18382-C-9

Award days at \$ per day \$

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

Less P. O. Credited \$

Less further debit balance \$

Net due paid as below

TO SOLDIER			TO DEPENDENT		
Or.	Ag. No.	Amount	Or.	Ag. No.	Amount
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
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85					
86					
87					
88					
89					
90					
91					
92					
93					
94					
95					
96					
97					
98					
99					
100					

Total

453 Morley Ave
Toronto, Ont.

Gratuity not payable

M. F. W. 41
100M-1-18.
1772-39-889.

Name and address of next-of-kin *L.P. Clark T-39.*

File No. P.M. 25-Ty-2.

Place of “

Amount of pay assigned monthly \$ 22⁰⁰.. pd to 31. 1. 18. Reason for discharge

To whom payable *Mrs. Ellen M. Lyndall* Character on discharge

To whom payable *Mrs Ellen M. Tyndall.* Character on
Justicia. *19.12.17.* *453. Mosley Avenue. Toronto.*

[illegible]

[illegible]

Regimental No.

55327

Unit

19 Bw.

Date of enlistment

Place of “

Married (yes or no)

Yes

Amount of pay assigned monthly \$

2000? 1875

To whom payable

Mrs Ellen M. Tyndall

LPC

453 Morley Ave.

Name and address of next-of-kin

Adv. Made 20⁰⁰

Date and place discharged

Reason for discharge

Character on discharge

[illegible]

M. F. W. 41
1 OM--16
1772-39 889.

Name and address of next-of-kin

Date of enlistment

Place of “

Married (yes or no)

Date and place discharged

Amount of pay assigned monthly \$

Reason for discharge

To whom payable

Character on discharge

[illegible]

(Wife)

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

To Whom

Address

By Whom Assigned

Regtl. No.

Rank

Corps

Rate

MAY 1 1915

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

9543

22.00

R199

22.-

M4367

22

N5683

22-

07410

22-

87527

22.00

87656

22.

T9501

22

W 3340

22-

X11237

22

Z14554

22



453 Morley Avenue, 10 Apple Grove Ave
Toronto, Ontario. ~~Toronto~~
18/10/16 ~~W~~

22.00
2 M. 14 1/2 %

By Whom Assigned *Syndall C.B.*
Regtl. No. *55327*

Rank *Sergeant*
Corps *B. Co 19th Battalion*

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2.

Mrs Ellen M. Lyndall *Wife*

Name of Soldier

Lyndall C.B.

PAYMENTS.

L. L. Job 89002.—Req. 6213.

Month.	Year.	Cheque No.	Amt.	Remarks.
				22 ⁰⁰
April	1916	R 2358	22	
May		R 4461	22	
June		L 8849	22.	
July		A 9320	22	
Aug.		O 16832	22	
Sept.		L 18792	22	
Oct.		L 23727	22	
Nov.		K 28447	22	
Dec.		U 33698	22	
Jan.	1917	W 37011	22	
Feb.		O 47807	22	
March		3 53 406	22	
April		U 2 5262	22	22. (J)
May		U 11993	22	
June		T 19625	22	B.
July		H 25907	22.	in
Aug.		W 34924	22	
Sept.		K 40175	22	
Oct.		E 45871	22	
Nov.		T 34148	22	
Dec.		X 61118	22	
Jan.	1918			
Feb.			704	
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.				

28/10/14

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

Name *Mrs Ellen Mary Tyndall*Address ~~382 Rhodes Ave~~~~70 Apple Grove Ave Toronto~~
453 Murray Ave Ont

Relation to Soldier

wife, child or mother

} *Wife*Name of Soldier *Tyndall Cecil B*

Regtl. No.

Rank *Serjt*Corps *19th Batt n*

To what Corps belonging

when called out

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.		<i>3374</i>	<i>20</i>	
Jan.	1915	<i>33243</i>	<i>42</i>	
Feb.		<i>4386</i>	<i>41</i>	
March		<i>3942</i>	<i>25</i>	
Apr.		<i>2009</i>	<i>25</i>	
May		<i>H5476</i>	<i>25</i>	
June		<i>L1171</i>	<i>25</i>	
July		<i>K2285</i>	<i>25</i>	
Aug.		<i>4295</i>	<i>25</i>	
Sept.		<i>11730</i>	<i>25</i>	
Oct.		<i>N8693</i>	<i>25</i>	
Nov.		<i>20408</i>	<i>25</i>	
Dec.		<i>715190</i>	<i>25</i>	
Jan.	1916	<i>019476</i>	<i>25</i>	
Feb.		<i>H27850</i>	<i>25</i>	
March		<i>934662</i>	<i>25</i>	



SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2.

Ellen Mary Tyndall ^{Wife}
PAYMENTS.

Name of Soldier

Tyndall Cecil B.

L. L. Job 89002.—Req. 6213.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916	K 3820	25-	25
May		R 5355	25	25
June		W 7182	25	25
July		S 1110	25	25
Aug.		9 14409	25	25
Sept.		N 17731	25	25
Oct.		14 220927	25	25
Nov.		X 24211	25	25 Remailed 4/12/16
Dec.		X 27173	25-	25
Jan.	1917	V 30496	25	25
Feb.		V 33395	25	25
March		B 37201	25	25
April		T 2708	25	25
May		V 6389	25	25
June		V 9615	25	25
July		Y 12940	25	25
Aug.		J 15963	25	25
Sept.		M 79568	25	25
Oct.		Z 21434	25	25
Nov.		H 25711	25	25
Dec.		B 74614	25	25
Jan.	1918			
Feb.			95 3	
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.				

28-10-14MILITIA AND DEFENCE
SEPARATION ALLOWANCE

Name *Mrs Ellen Mary Lyndall* Name of Soldier *Lyndall Cecil S.*
 Address *382 Rhodes Ave* Regtl. No.
Toronto Rank *Serjt.*
Ont. Corps *19th Bn*
 Relation to Soldier *wife* To what Corps belonging
 wife, child or mother when called out

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.		<i>4374</i>	<i>20 00</i>	
Jan.	1915	<i>43243</i>	<i>42</i>	
Feb.		<i>64386</i>	<i>41</i>	
March		<i>7 3942</i>	<i>25 -</i>	<i>25</i>
Apl.		<i>82009</i>	<i>25 -</i>	<i>25</i>
May		<i>115476</i>	<i>25</i>	<i>25</i>
June		<i>21171</i>	<i>25 -</i>	<i>25</i>
July		<i>112285</i>	<i>25 -</i>	<i>25</i>
Aug.		<i>114295</i>	<i>25 -</i>	<i>25</i>
Sept.		<i>9 11730</i>	<i>25 -</i>	<i>25</i>
Oct.		<i>118693</i>	<i>25 -</i>	<i>25</i>
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

21172 Canceled

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

28-10-14.

May 1st 1915

RATE OF SEPARATION ALLOWANCE

25.			
-----	--	--	--

RATE OF ASSIGNMENT

22			
----	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

No. 55327.

Rank *Serjt* Promoted

Reverted

Discharge

Soldier's Name *C. B. Syndall.*Battalion *B. Co 19th Batten.*Beneficiary *Mrs. Ellen M. Syndall.*Relationship *wife.*

Address

PARTICULARS OF ASSIGNMENT

Name

Mrs. Ellen M. Syndall.

Address

453. Morley Ave. Toronto

Change of Address

Ont.

1

2

3

4

Wife

Date 1917	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
--------------	---------------	---------------	---------------	-------	---------

<i>Dec. 31</i>		953	704	1657	
<i>aff. Jan 1897</i>	<i>71196</i>	25	22	47	
	<i>XXX</i>	<i>XX</i>	<i>XX</i>	<i>XX</i>	

Mailed 30-1-18 JRC

8 A/c Closed 31-1-18
ap. 726 Ret'd per. *Justicia*
Sl. 978 Date *7-12-17* F. X. *9-1-18*
 Clerk *RS.*

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

--	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No.

Name

Rank

Promoted

Reverted

Discharge

Address

Soldier's Name

Change of Address

Battalion

1

Beneficiary

2

Relationship

3

Address

4

Date

Cheque
No.Amount
S/AAmount
A/P

Total

REMARKS

Rank

Sergt

Name

TYNDALL Cecil Bertie

Reg'l No.

55327

Unit

19th Bn.

If in perm. Corps,
What Unit?

Married or Single

Married

Place and Date of Enlistment

Toronto, Ont. 11th Nov. 1914

Place of Birth

Nottinham Eng.

Name and Address, Next-of-Kin

Mrs Tyndall, 382, Rhodes Ave, Toronto, Ont.

Relationship

Wife.

Assigned Pay Monthly \$

22.00

Payable to

Mrs C. M. Tyndall
10 Apple Grove Ave.
Toronto

Relationship

Separation Allowance \$

Payable to

Relationship

Discharge, Date and Place

Reason

Character

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date						
1/6/15	30/6/15	30	1.35	40 50	30	1.5	4 50		45 -	1915	15 -	22 -			37 -	8 -	
1/7/15	31/7/15	31	"	41 85	31	"	4 65		46 50	66	30/6	7 50	22 -		39 50	15 60	
								87	87	114	15/7	10 -	22 -			15 87	
1/8/15	31/8/15	31	1.35	41 85	31	1.5	4 65		46 50	166	31/7	9 73	22 -		53 63	8 74	
1/9/15	30/9/15	30	1.35	40 50	30	1.5	4 50		45 -	210	1/8	4 30	22 -		22 -	31 74	
1/10/15	31/10/15	31	1.35	41 85	31	1.5	4 65		46 50	359		523	22 -		36 16	42 08	
1/11/15	30/11/15	30	1.35	40 50	30	1.5	4 50		45 -	309		893	22 -		27 23	59 857	
1/12/15	31/12/15	31		41 85	31		4 65		46 50	400		523	22 -		51 89	52 46	
1/1/16	31/1/16	31		41 85	31		4 65		46 50	453		1071	22 -		27 24	73 72	
1/2/16	29/2/16	29		39 15	29		4 35		43 50	499		1375	22 -		34 21	83 01	
1/3/16	31/3/16	31		41 85	31		4 65		46 50	632		648	22 -		86 36	43 15	
		305		411 75			45 75	87	458 37	748		6436	22 -		41522	4315	Bal Fwd

BALANCE TRANSFERRED TO NEW LEDGER.

Carried forward to
Large Ledger sheet

[illegible]

Tyndall

BLOCK LETTERS, SURNAME FIRST

[illegible]

[illegible]

[illegible]

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 \$

EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS

EFFECTIVE DATE

AU

ADMISSIONS TO HOSPITAL, &c.

DATE ADMITTED

DATE DISCHARGED

V. OR A.

NAME OF HOSPITAL

PAY

FIELD ALLOWANCE

WORKING OR SPECIAL PAY

ASSIGNED PAY CREDITS

OTHER CREDITS

TOTAL CREDITS

ACQUITTANCE ROLLS

DATE

NO. OF DAYS

RATE

AMOUNT

\$

C.

NO. OF DAYS

RATE

AMOUNT

\$

C.

NO. OF DAYS

RATE

AMOUNT

\$

C.

1

2

3

NO.

DATE

NO.

DATE

NO.

DATE

P.697-25M.

3989-31-19-17.

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS.

55327 Sgt. Lyndall. *669*

Date of Payment.	No. of Acq. Roll	AMOUNT						Place of Payment.	Name of Paymaster.	Remarks.
		Francs	£	S.	\$	¢				
15-8-17	1106		2		9	73	St. Leonard	Gallagher		
24-8-17	1139		2		9	73	"	"		
Sept 1	1579		3		14	69	Washington	Good		
" 10	851256		2		9	73	E. Sand	Gallagher		
" 27	1425		2		9	73	"	"		
Oct 13	1488		2		9	73	"	"		
" 26	1587			10	24	3	"	"		
" 29	1624		1		4	87	"	"		
Nov 12	1679		2		9	73	"	"		
Nov 19	R.W.				24	5	"	"		
23/11/17	435		2		9	73	"	"		

92.46

34
- 806 15:485929.4

50 909/55 958 305

1010246

1062-27/7

50 1102-2/8
1286 28/8
1185 18/8

50 264.46 4/1 448.46 18/1
149. " 28/12 352. " 11/1

53 541 25/1 452 8/2
802 22/2 3100 623 8/3
480 14/2 647 10/3
378 12/2 200 24/3
338 12/2 1382 12/3

90

MARRIED OR SINGLE *M.*

PLACE OF BIRTH

Nottingham, Eng.

NAME AND ADDRESS OF NEXT OF KIN

Mrs Lyndall,

382 Rhodes Ave., Toronto.

RELATIONSHIP OF NEXT OF KIN

Wife

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

ADMISSIONS TO HOSPITAL, &c.

DATE ADMITTED

DATE DISCHARGED

V. OR A.

NAME OF HOSPITAL

DATE	PAY		FIELD ALLOWANCE		WORKING OR SPECIAL PAY		ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																										
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[illegible]

HOSPITAL, &c.

NAME OF HOSPITAL _____

QUITTANCE ROLLS

[illegible]

Small
Ledger Sheet.

55324

Sgt. Lyndall, C.B.

DATE	PAY		FIELD ALLOWANCE		WORKING OR SPECIAL PAY		ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS								CASH PAYMENTS																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																												
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MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFER. PAY.	SEP. ALLOC. ENG.
									63 36		
Oct	Lyndall pay	46 50							22 87 86		
Nov	29 days Sgt. P.	43 50							22 109 36		
	Can A.P.										
	DN/AR. 1519 1/9/17. Hastings			14 60							
	DN 35512										
	AR 120 6 10/9 1688			9 73							
	DN 35200										
	AR 110 6 15/8			9 73							
	AR 435 23/11. 16000			9 73							
	DN 82247 24/8										
	AR 1184 1/8 1000			9 73							
		43 50			53 52				55 84		
									22		
	Balance transf. to Canadian Diab. Account.								16 90		
	Balance transferred to N. E. Branch.								38 94		
1918				AR 1624 30/10/17 12100							
Feb				adv 70 75 2. N.E. 8/8				4 87	Extract		
do				AR 1425 27/9/17 10100				9 73	do		
do				adv 70 43 2. N.E. 8/29				9 73	do		
do				AR 1679 12/11/17 10100				9 73	do		
do				adv 70 43 2. N.E. 8/29				9 73	do		
do				AR 1489 13/10/17 12100				9 73	do		
do				adv 70 49 2. N.E. 8/2				2 43	do		
do				AR 1527 27/10/17 10100							
do				adv 70 56 2. N.E. 9/5							
March				Rail Warr 20/9/17 10100				1 34	do		
do				Charing x to West Sandling				37 83			
do				adv 70 54 2. N.E. 8/11							
April				Rail Warr 20/9/17 10100				1 11	do		
do				Patensfield to Waterloo				38 94			
do				adv 70 50 2. N.E. 8/12							

Question Sd no

PAYMENTS		ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
3	4				CREDIT	DEBIT			
19522	10708	484.00	6	1031.88	-	1793.			
	22.			22	507				
	22.			22.00	2807				Trans: ICCD. Auth: art.
				1960	997				
	22.			2942.	2555.				
	22			22	5005.				
	22			22	7455				
	22			5619.	6336				
19522	10708	616	6	128504					

ASM. FORM REND *1672* EFFECT *12/17*
 DISCHARGED TO *Canada* DATE *22/7*
 PAYROLL VERIFIED *21*
Credit BAL. 16-90 L.P.C. REND *22/7*
 AUTH. *015* 16-22 *22/4*

015 Extracts 3894

Checked

W. H. H.

SL no. 51 7-12-17 Br: 16-90