C.E.F. REGIMENTAL DOCUMENTS

NAME AITCHISON THOS. FINNIE REGT. NO. 89859 UNIT 27 BTY. H. Q. FILE No. 3104

H

CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
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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)					
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MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 173)					DISCHARGE
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H

4/1933

M. F.W. 2589
20M-4-46 (9113)
H.Q. 1772-39-1377

ORIGINAL.

ATTESTATION PAPER.

No. 89859

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

(C.R. H.1-15-103 H.Q.C.T.D. 24/10/15)

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name?..... Thomas Fairnie Aitchison
2. In what Town, Township or Parish, and in what Country were you born?..... Croft Cottage, Main St, Biggar, Lanarkshire, Scotland
3. What is the name of your next-of-kin?..... Mrs. W. Aitchison
4. What is the address of your next-of-kin?..... Biggar, Scotland
5. What is the date of your birth?..... June 20, 1885
6. What is your Trade or Calling?..... Bricklayer
7. Are you married?..... No
8. Are you willing to be vaccinated or re-vaccinated?..... Yes
9. Do you now belong to the Active Militia?..... No
10. Have you ever served in any Military Force?.. 3 yrs in British Territorials
    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

Thos F. Aitchison (Signature of Man).

Jas D McKeown (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Thomas F. Aitchison, 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.

Thos F. Aitchison (Signature of Recruit)

Date March 18, 1915 Jas D McKeown (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Thomas F Aitchison, 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.

Thos F. Aitchison (Signature of Recruit)

Date March 19 1915 Jas D McKeown (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 Montreal this 18 day of March 1915

E Bruce Payne (Signature of Justice)

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

E Bruce Payne (Approving Officer)

M. F. W. 23.
150 M.—12-14.
H.Q. 1772-39-841.

Thomas Finnie Aitchison

Description of Frank Gaussen on Enlistment.

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

Height ..... 5 ft. 8 ins.

Chest measurement.
- Girth when fully expanded ..... 39 ins.
- Range of expansion ..... 3½ ins.

Complexion ~~Blue~~ Fair

Eyes Blue

Hair Fair

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

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

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

Left inguinal region operative scar radical cure for hernia.

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 18th 1915

Place Montreal

A. R. Kinsman Capt A.M.C.
Medical Officer.

*Insert here "fit" or "unfit."

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

CERTIFICATE OF OFFICER COMMANDING UNIT.

Thomas Finnie Aitchison 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.

E. Bruce Payne (Signature of Officer)

Date March 18th 1915.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 89859 (Rank) Corporal.

Name (in full) AITCHISON, Thomas, Finlay. enlisted in

the 27th, Battery, C.F.A.

CANADIAN EXPEDITIONARY FORCE at Montreal, Que. on the 18th,

day of March 16 19

HE served in - - - FRANCE- - - - - - - - - - - - - - - - - - - -

and is now discharged from the service by reason of - - - - - - - - - - - - - - - - -

- - - - - - - - - - - - Medically Unfit- - - - - - - - - - - - - - -

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

Age 30 Years

Height 5 Feet 9½ Inches

Complexion Fair

Eyes Blue

Hair Light Brown

Marks or Scars

Two long scars on left thumb

Scar left hernia operation.

Middle finger left hand missing.

T. F. Aitchison

Signature of Soldier

Lieutenant,
Officer i/c Discharge Section, District Depot No. 4.
Issuing Officer

Rank

Appointment

Date of Discharge April 10th, 1919.

Signed at Montreal, Que. this 10th, day of April 19

in Military District No. 4.

File Reference No. DD4. 19-A-92.

N.B.—As no duplicate of this Certificate will be issued, any person finding same is requested to forward it in an unstamped envelope to the Secretary, Militia Council, Ottawa, Canada.

(GH)

M. F. W. 39a.
250m.—6-18.
H. Q. 1772-39-882.

1.—That discharge certificate must be carried when wearing uniform.

2.—That uniform can be worn only thirty (30) days after discharge, or when duly authorized in writing, and

3.—That wearing of uniform renders him liable to usual military discipline, as if on the strength of a unit.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

No. ..... (Rank) ..... Name .....

Unit .....

Address on Discharge .....

Character and Conduct .....

.....

Former Occupation .....

Special Qualifications of Value in Civil Life .....

.....

Medals and Decorations .....

.....

Remarks .....

.....

Signed at ..... this ..... day of 19

.....

Name of Officer

.....

Rank

.....

Appointment

On demobilization the particulars called for on the back of this certificate will not be completed.

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

POST DISCHARGE PAY OFFICE
JUL 5 1919
Military District No. 4
MONTREAL

OTTAWA, CANADA.

Declaration required of Officers, Warrant Officers and Men who claim War Service Gratuity under Order-in-Council (P.C. 3165), dated 21st December, 1918.

If the applicant will enquire at the local Branch of the Canadian Patriotic Fund he will be informed if there is an official who will take this Declaration free of charge.

A complete reply must be given to every question in this Declaration. There must be no blanks and no dashes. If any questions are not applicable, the words "NOT APPLICABLE" must be written out.

On completion this Declaration is to be returned to THE DISTRICT PAYMASTER OF THE DISTRICT IN WHICH THE SOLDIER WAS DISCHARGED.

1. Christian Names ... Thomas ... 2. Surname ... Atkinson AITCHISON

3. Rank ... Gpt ... 4. Original Unit ... 27th Battery ... 5. Reg. No. 89859

6. Address, in full, to which future payments of gratuity are to be forwarded ... 37 Congregation St Point St Charles, P.Q.

7. Date of enlistment in the C.E.F. ... 18/3/15 ... 102

8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge ... Not Applicable

9. Relationship of such dependent ... Not Applicable

10. Present address, in full, of such dependent ... Not Applicable

11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? ... No

12. Were you at any time on the strength for pay and allowances of a unit of the C.E.F. which was out of Canada or the United States when such pay and allowances were issuable? If so, give particulars of one such unit and dates of service overseas with such unit:—

27 Battery C.F.A. Overseas
7/8/15 to 11/11/18. 3 years 3 mos

13. Were you on the strength for pay and allowances of the Clearing Services Command, having been at any time on duty outside of Canada or the United States? ... No

14. Were you on active service only in Canada or the United States? If so, give particulars of units and dates of such service ... See question No 12.

15. Give total length of time which you served on active service, whether in Canada or Overseas, setting out particulars of units on whose strength you served ... Enlisted 18/3/15 Discharged 10/4/19 - 27th Battery C.F.A. 4 years 1 Month

16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department ... Not Applicable

17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.? ... No

M.F.W. 2595.
1772—39—1389.
122—D.P.—250M-2-19.

18. Have you had more than one enlistment? If so, give particulars of discharges and re-enlistments, and under what regimental numbers and units ~~See questions 12 and 15.~~ No

19. Have you already received any payment of Post Discharge Pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid None

20. Have you been issued with a War Service Badge? If so, what class? Yes (A. & B.)

21. Have you, during the present war, served in the Imperial Forces? No

22. Are you entitled to received, or have you received any gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled Not Applicable

23 (a) Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England No.

(b) If so, was such reversion in consequence of misconduct or inefficiency?

24. Are you now serving in the C.E.F. No. If not, give:—(a) Date of discharge 10/4/19 (b) Reason for discharge Medically unfit

25. Are you at present a member of and in receipt of pay and allowances from any Canadian naval or land forces? If so, give unit Not Applicable

26. Did you at any time serve at the front in an actual theatre of war? If so, give particulars of one unit which you served at the front, and dates of such service with that unit Yes. 27th Battery C.F.A. France from 16/1/16 to 8/11/17

27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment? No

(b) If so, are you in receipt of full pay and allowances from that Department? No.

And I make this solemn declaration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath and in virtue of the Canadian Evidence Act.

Signature of Applicant: J. F. Hitchins

Place of Residence: 84 Congregation St Montreal

Declared before me at: Montreal

This 5th day of July 1919.

Signature of Barrister of the Supreme Court Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner of the Administration of Oaths.

G. E. Ball
Manager

POST DISCHARGE PAY.

Date Paid	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due

Certified Correct.

District Paymaster.

Forms
I. 1237
12

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
1445	89859	Cpl	Aitchison	T. F.
Year 1917	Unit. Canadian F. A. Bricklayer		Age. 30	Service. 2 6/12 France 23/12

Station and Date.

Disease GSW. Hand L Fr. metacarpal of thumb. VIII 4 sen.

Wound Nov. 8, 1917 at Passchendaele Ridge by shrapnel.

No. 5 V.A. HOSPITAL EXETER. Admitted Nov. 17.

Entrance wd. L. Thumb. F.B. removed at 9th Gen.l Hosp. X-Ray showed badly comminuted fracture of metacarpal of thumb in good position.

On admission Rt forearm & hand on etn. splint. Clean wd. dorsum of L. Thumb & fairly clean wd. palmar aspect of L. Thumb. Probe goes to bare bone in each case. Eusol dressings & Gooch splinting.

26.11.17 Transf. to Can. Hosp. Kirkcaldy.

E.C. Hudgell.

Manks Barker

27-11-17 Wound of thumb not healed. Dressing. ~~Sloughs~~. Excused all duties. A Christie

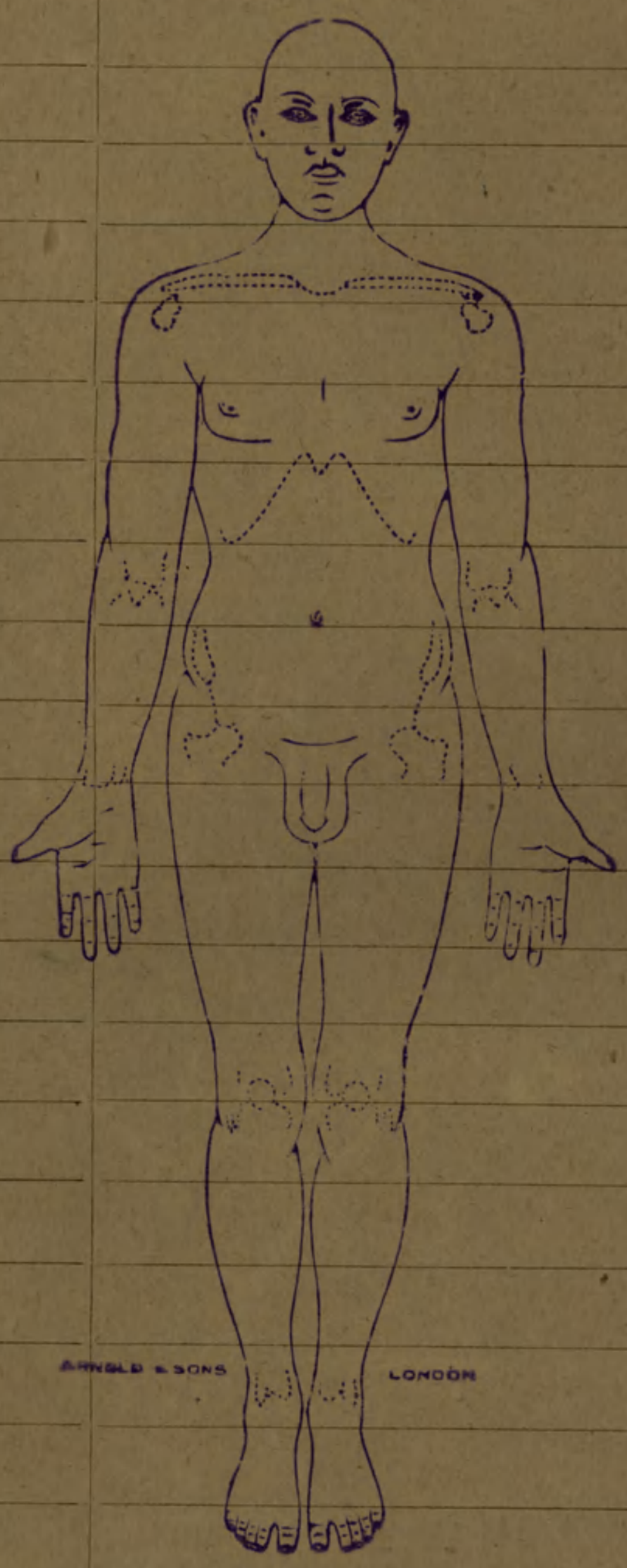
Sent to M.B. for treatment.

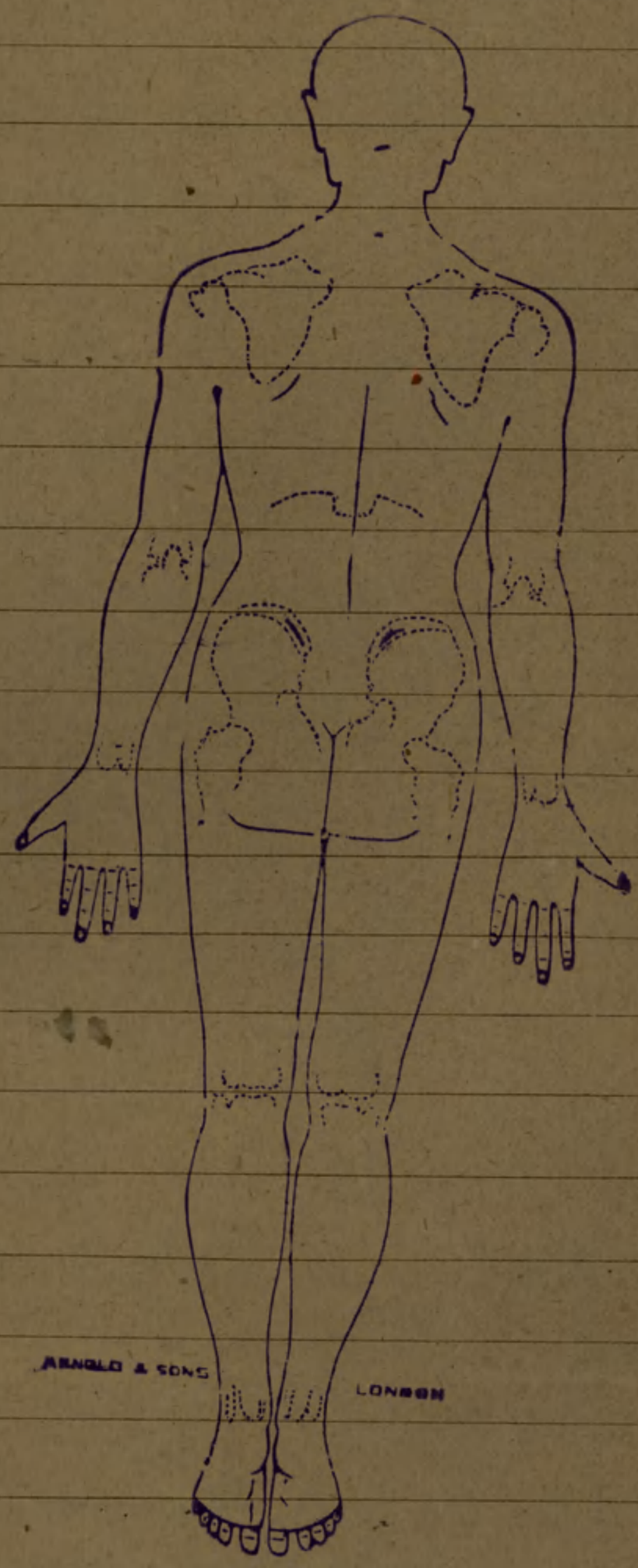
*The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.

WtW 6604/M 2870—1,500,000—8/17—H. & Sp. (10938). Forms/I. 1237/12. (E239)

[P.T.O.

Station and Date.





A—305.

Ref. No. 21124

JJ

MILITIA AND DEFENCE

ASSIGNED PAY.

30635

12/

To whom Mrs. W.Aitchison,

Address Croft Cottage,
Biggar, Lanarkshire,
Scotland.

By whom assigned Aitchison, T.F.

Regtl. No. 89859

Rank Gnr.

Corps &c. 27th Bty. 7th Bde.C.F.A.

Rate $10.00

Date to Commence 1st February 1916

Checked and found Correct WtWood

PAYMENTS.

Month.	Year.	Cheque No.	Amt.	Pay Sheet Deduction.	REMARKS.
Jan.	1916				
Feb.					
March					
Apl.					
May					
June		116133	50	✓	Feb to June.
July		114784	10	✓	
Aug.		118161	10	✓	
Sept.		151678	10	✓	
Oct.		187683	10	✓	
Nov.	100.00 ✓	224684	10	✓	
Dec.		265197	10	✓	
Jan.	1917	306711	10	✓	
Feb.		347217	10	✓	
March		390224	10	✓	
April					

Forms
I. 1237
12

19

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
T527	89859	Cpl.	Aitchison, Thos. F.	
Year	Unit.		Age.	Service.
1917	C.F.A.		30	32/12

Station and Date.

Disease G.S.W. Lt. Hand.
wounded Nov 8/17 at Paaschendaele by
Shrapnel in Left hand
C.C.S. No 2 Canada - 4 days - No Operation
#9 Gen Hosp. - 5 days - Operation for removal FB.
#5 Gen Hosp Exeter - 1 week - No Operation - X Ray
Monks Station - 1 week
No 11 Cedars Gen Hosp. -

Present Condition

Scars at base of 1st metacarpal & post surface flame
movements of thumb practically nil at present - though
passive flexion & extension are possible

X Ray -

10/12/17 Transfer to Granville. Bristol

R. Cooke
Captain

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

(44502) Wt.W 11203—M 1150. 1,450,000. 6/12 16. C.F.& S. Forms/I. 1237/12. (E239) P.T.O.

Station and Date.	

Forms
I. 1237
12

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449

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname	Christian Name.
T8273	89859	Cpl	Atchison	T. F.

Year	Unit.	Age.	Service.
1918	CDA Canadian Field Artillery	30	3y 32/12 2y 23/12

Station and Date: G.C.S. Hosp Bex Vox 22 MAR. 1918

Disease: G.S.W. L. hand.

(1) Gym. hand class — for further thumb power (2) Discontinue massage (3) Arts + crafts - mechanical

Ad. M

Mar. 28/18 Started gym. treatment. No change D.J.D.

Apr. 2/18 Improving D.J.D.

Gym Rep. 4/4/18 Special attention to be given to thumb & fingers. No strength in fingers to carry a stretcher.

Apr. 9/18 Condition improving D.J.D.

Gym Rep. Apl 11/18 Notable improvement in the hand was to carry a

Apr. 15/18 Improving grip of hand & still weak D.J.D.

Gym Rep. 18/4/18. Pat is decidedly imp. but could improve much more rapidly.

Apr 23/18 Hand grip still weak D.J.D. Apr. 30/18 about the same D.J.D.

Gym Rep 7/5/18. No further improvement is anticipated.

May 8/18 No change D.J.D.

8-MAY. 1918 For Board on May 13/18 C.A.M.C.

EXAM. MED. BOARD
13 MAY. 1918
G. C. S. H.

May 16/18 No change D.J.D.

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(44502) Wt. W 11203—M 1150. 1,450,000. 6/12 16. C.F.& S. Forms/I. 1237/12. (E239) P.T.O.

Station and Date.	

Forms
I. 1237
10

P 104-449

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
18272	89859	Cpl.	Cutchuson	T.F.

Year	Unit.	Age.	Service.
1917.	C.F.A. Canadian Field Artillery	30	3 yrs 2/12 — 23/12

Station and Date.

Disease G.S.W. St. hand

Occupation. Bricklayer.
Enlisted - 18th March 1915. Montreal -
To England - June. 1915 -
To France - Dec. 28th 1915 -
Wounded 8th Nov. 1917. at Passendale -
Th War Hosp. Epsom - 8th Nov. 1917.
No 9 U.S. Hospt. Rouen. 12 Nov 17.
No 5 General. Hosp Etretat - 19 Nov. 17.
Mount Stortons. 28 Nov.
Moore Barracks - 2 Dec. 1917.
G.C.S Hospt - Buxton 18th Dec. 1917.

Complaints:- Unhealed wound left Hand; inability to use Hand.

History: Wounded at Passchendaele on Nov. 8/17. by shrapnel; entered dorsal surface left Hand over 1st metacarpal bone; removed at operation at Rouen; fractured 1st metacarpal bone; wound healed about 4 days ago, but broke open again yesterday; slight pain; does not use Hand. Deaf right ear. Slightly in left; since being in France.

Present Condition. Entrance wound over 1st metacarpal bone dorsal surface left Hand; open & discharging; scar of operation on thenar eminence, healed; Middle finger amputated through wound received in Autumn 1916.

Movement at wrist limited from disuse; no power of

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

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

P.T.O.

Station and Date.	
	movement in thumb, movement of fingers limited.
	Union apparently good.
	X-ray of 17/11/17. "Comminuted fracture 1st metacarpal
	left hand".
	X. ray requisitioned for condition of fracture now
	To soak hand 20 min. daily in warm baths
	& moist dressing. No V.D. or Scabies"
	Right ear. Clean, drum membrane intact, somewhat
	retracted. Cannot hear ordinary voice at 1 foot
	distance.
	Left ear. Very slight deafness only. Wax in ear; to
	have ear syringed.
	Should see ear specialist re right ear R.A.M.C.
21 DEC. 1917	Crepitus on gentle movement.
	Continue treatment. Would also advise
	movement of distal phalanx at times without
	disturbance of fractured metacarpal. R.A.M.C.
~~22 DEC. 1917~~	
Jan. 5/18	~~Complains of much pain in big after~~
	Wound still discharging no movement in
	thumb J.J. Dunlop Capt.
Jan 25/18	Condition improving patient states J.J. Dunlop Capt
Feb. 6/18	Wound healed. Not much change in movement
	of pad or union. J.J. Dunlop Capt.
8-FEB. 1918	wound healed — no pain or tenderness about
	L thumb — app. firm union — mod. Callus.
	To have massage & gentle movts C.E.P.
Feb 15/18	Pat. states condition improving J.J.D.
Feb 18/18	Condition improving J.J.D.
Feb 26/18	Improving J.J.D. — Pain in left testicle, suspensory bag.
Mar. 6/18	Improving some J.J.D.
Mar. 13/18	Still improving J.J.D.
Mar 21/18	No improvement in left thumb J.J.D.

Original

MEDICAL HISTORY SHEET.

Surname Aitchison Christian Name Thomas Finnie

Examined { on 18th day of March 1915
at Montreal

Birthplace { City or Town Vallyfield Bigger
County Co. Lanarkshire Scotland

Apparent age 23.

Trade or occupation Journalist Bricklayer

Height 5 Feet 8 Inches.

Weight 160 Lbs.

Chest measurement { Minimum 39 inches.
Maximum expansion 37 inches.

Physical development good

Small-Pox Marks none

Vaccination Marks { Arm ~~Right~~ Left.
Number 2

When Vaccinated last 5 years ago

(a) Marks indicating congenital peculiarities or previous disease Nil

(b) Slight defects but not sufficient to cause rejection Nil

Approved by H R D Dunstan Gray

Rank Capt C A M C M.O.

Date	Fit or Unfit	Examined for Re-engagement.
		19 NOV. 1917 M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
T.A.B. 2	26/4/18	M.O.

Date	Result	Vaccinations.
		M.O.
		M.O.
		M.O.

Date 1915	Result	Anti-Typhoid Inoculations, Etc.
May 10	Good	M.O.
" 20	Good	M.O.
" 31	Good	M.O.

Enlisted on 18th day of March 1915 at Montreal

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	27th Bty. C.E.F.	89859		18/3/15
Transferred to..				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
Bramshott-Witley	6/7/18 21-9-18	G.S.W. L Hand Partial loss of function left hand	T.C.P. Invalided PRESIDENT MEDICAL BOARD, BRAMSHOTT. ... not likely to be raised within 6 months B III Jas L. Hammond Capt.

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

M. F. B. 313.

50M—9-14.
H. Q. 1772-39-439.

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital. Day	Month	Year	Discharge from Hospital. Day	Month	Year	DISEASE.	Number of days in Hospital.	Remarks on nature of the disease: how induced: if mild or severe: if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
No 10 C. F. Amb		2	10	16	19	10	16	P. U. O.		Reg Unit	A199-199
5. Section		16	11	17	26	11	17	VIII 4. sw. gw hand L. p. metacarpal	11	Trans. to Can. H. Monkshorton	E C Hudgell
		26	11	17	5	12	17		10	Trans to No 11 Can Gen Hosp	F H Wheeler Maj
					18	12	17	G S W Left Hand	13	G S W Left hand. region 1st Metacarpal X Ray No 7337 - Comminuted fracture base of 1st metatarsal bone left hand. Small Foreign Body seen 1/10" x 1/20" in region of metatarso phalangeal joint. The bone noted fracture has some displaced pieces of bone. Transfer to Granville Ceder Special Hospital Buxton X Ray 17-11-17 Comminuted frac. 1st metacarpal left hand. F.B. in region of metatarso phalangeal joint. Some displaced pieces of bone. Hand grip weak. Good movement in arm. Poor movement of thumb. Nothing abnormal found in other systems. Category II	J. Cooke Capt. Can. C.
		18	DEC	1917	20	5	18	G.S.W. Left hand.	154		J. Danby Capt. Can. C.

Surnam

Nan Convalescent Hospital, Monks Horton, Kent.
No. XI CANADIAN GENERAL HOSPITAL MOORE BARRACKS, SHORNCLIFFE
DEC 5 1917

Can. Spec. Hosp Derbyshire
18 DEC 1917

Form D.M.S. 1394.
2004.—200M.—5/2/17.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at BRAMSHOTT. July 6th 1918.

89559 Pte No. ..... Rank ..... Name AITCHSON. T. F

2nd C.C.D. 23rd Bn. Local Unit ..... Overseas Unit ..... Age 30

Examination held at BRAMSHOTT.

G.S.W. Lt. HAND

FILE

DISABILITY.
Overseas—Local
(scratch one out).

PRESENT CONDITION.

This pte. was wounded Jan 1917 left thumb + 2nd finger communicated 1st phalango-carpal - bone lost - wound - Lt. thumb extensor removed, tendon adhesion - Gunshot abduction left thumb - lost - 2nd finger of left hand before the war - Scars of wound healed. Heart + Lungs normal.

BI

BOARD RECOMMENDS:—

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 { Charles J. Imbert Capt. C.A.M.C. President.
....
D. MacKenzie Capt. C.A.M.C. .....

APPROVED
BRAMSHOTT.
Dated 6-7- 1918.

D. MacKay Capt. C.A.M.C.
For A.D.M.S.

15-7 Category B-1 Confirmed

D.A. misc for Lane Capt Camel

Copy of report issued Aug 5/18

EYE, EAR, NOSE & THROAT CLINIC.

Witley Camp, Surrey,

SEP 17 1918 1918

R.D.I.

UNIT.....

Reg No 8985-9 Rank Cpl Name Atchison D.T.

DIAGNOSIS :- Concussion deafness right

REMARKS :- has existed two years will not improve

FTLE

HEARING:)	Rt.	Lt.	Rt	Lt.
VOICE			RINNE.	
WHISPER.			WEBER.	
WATCH.			SCHWABACK	
			FORK 256.	
			FORK 2048	
			BONE COND'tn.	

CATEGORY RECOMMENDED :- A

TREATMENT RECOMMENDED :- Not advisable this M.O. cannot tell well on parade.

RETURN FOR FURTHER TREATMENT AND EXAMINATION OF.....

AND BRING THIS PAPER.

V. Palmer

.....Capt, C...M.C.
Eye & Ear Specialist, Witley Camp,
Surrey.

2245

RECORDS
MAR 13 1919
A.D. No. A-92

MONTREAL MILITARY HOSPITAL
DRUMMOND MILITARY CONV. HOSPITAL.

REQUEST FOR EXAMINATION.

Welfare Corp.
13-2-19.
50-2.

MONTREAL.

DATE March 12, 1919.

No. 89859 Clinical Diagnosis.

Rank. Cpl.

Name. Aitchison Ears M.Y.D.

Unit. D.D. #4

Kindly carry out examination on marginally noted, with special reference to :-

Ears

Reason for examination. Final Board Proceedings

Short Medical History.

EYE & EAR

Signature M.O. (Requesting).

REPORT

Right Ear : Diagnosis - nerve deafness.
Drum opaque, hearing moderate voice 1 ft.
Bone conduction reduced to 5/15.

Left Ear : Normal.

Condition due to service ; permanent.

Treatment of no benefit.

MAR 12 1919

MAJOR A.M.C.
M. O. i/c EYE & EAR DEPT.
MONTREAL MILITARY HOSPITAL, C.E.F.

Signature M.O. (Reporting)

This man is not to be admitted to Hospital for this report to be made out., but is to be returned to his Unit on completion of examination.

ADJUTANT
MAR 12 1919
D.D.A.

Yo
p. P. 4

CASE HISTORY SHEET.

Royal Victoria Hospital. M. D. #4. Station.

No. 89859 Rank Corporal Name Aitchison, T.F. Age 31

Unit D.D.#4(27th Batty.C.F.A.) Completed years of service Where and how long } 4 yrs. 32 days

Date of admission 11-12-18 Date of discharge APR 7 - 1919

Diagnosis G.S.W. left hand - Thumb - Place of origin
Loss of function left thumb.

CONDITION ON ADMISSION AND PROGRESS OF CASE

Complains of the following: G.S.W. left hand.

History - Wounded by shrapnell in France, Nov. 8-17.
Comminuted fracture base of 1st metatarsal bone left hand.
2nd finger left hand amputated at metacarpel phalangeal joint - before enlistment. Abductor tendon of left thumb havenbeen cut. Not able to abduct thumb.
F.H. - Negative.
Physcial Examination - General Condition good.
Left thumb - not able to abduct. All other systems normal.
Operation performed for repair of tendon.
Result on discharge shows considerable improvement.
Recommend transfer to P.C.M.H. for massage and passive movement.

Feb 12/19 Man getting massage daily. Movement returning to thumb. much improved. recommended that he be ~~fo~~ made an attending patient.

Mch. 14/19 Still improving To continue treatment
Works measure by movement and strength especially in flexion. Less tremor.
Ear report Rt ear. Nerve deafness. Drum ~~Patient~~ opaque. Mod voice heard Lt.
Bone conduction reduced to 5/15.
Left ear normal. Hearing due to service and permanent. Treatment No benefit

FAMILY HISTORY

(Tuberculosis, mental or nervous diseases.)

TREATMENT 4-4-19 227 made out Cat. Lo.
to D.S.C. for
(Especially any specific or special form.) further treatment

Fractured Phalanx

CONDITION ON DISCHARGE,

(and disposal made of case.)

Date

Medical Officer i/c case.
B 9/00

M. O. i/c of Troops Royal Victoria Hospital

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

CASE HISTORY SHEET

APR 2 - 1973

Army Form B. 243.

Form of Will, No. 1.

To be used by a Soldier desirous of leaving the whole of his Effects to one person.

47462

(a) *The Names of the Soldier to be written in full.*

I,(a) Thomas Finnie Aitchison

No. 89859, of the 27th Battery Regiment

of 7th Brigade C.F.A. C.E.F.

do hereby revoke all former wills by me made, and declare this to be my last Will.

After payment of my just Debts and Funeral Expenses I give to my

(b) *Insert "friend," or, if a relative, in what degree.*

(b) Father

(c) *The name in full.*

(c) Mr William Aitchison

(d) *Insert the address, if known, or other description.*

(d) Main-Street Biggar Lanarkshire Scotland

(e) *If to a female, add the words* [for her sole and separate use, her Receipt alone being a sufficient discharge.]

absolutely (e) for his own Sole and seperate use

the whole of my Estate and Effects, and everything that I can by law give or dispose of, and I appoint (f) Mr William Aitchison broad-Cottage Biggar Lanarkshire Scotland

(f) *The full names and descriptions and exact addresses of the Executor or Executors should be carefully stated.*

Executor of this my Will.

In witness whereof, I have hereunto set my hand

this 10th day of July A.D. 1916.

(g) *Soldier to sign here, or, if he cannot write, to make his mark.*

(g) Thomas Finnie Aitchison

Signed and acknowledged by the said

the same having been previously read over to him as and for his *last Will* in the presence of us, present at the same time, who, in his presence, at his request, and in the presence of each other, have hereunto subscribed our Names as Witnesses.

(h) *Witnesses to sign here.*

(h) K. Leishman

(i) *Add Addresses in full.*

(i) G. Ash 27th Battery

(h) Wm H. MacLean 7th Brigade

(i) Thos. G. Patterson C.F.A. C.E.F.

Declaration of the Medical Officer.

I declare that I was present at the execution of this Will and that Thomas Finnie Aitchison the Testator was at the time in a fit state of mind to execute same.

Alec Cawland. Capt.

M.O. 7th Bde. C.F.A.

No. 1.

THE WILL

of Thomas Tennie Aitchison

of the 24th Battery 6th Regt. A.F.A.

dated 10th July 1916

Army Form B. 243.

(1440) W13220. 306. 350M. 3/15. N.P.A. Ltd. Forms B. 243 /8

GENERAL RULES AS TO WILLS.

The Will must be in writing, and signed by the Testator with his name (or, if he cannot write, with his mark), in the presence of two Witnesses, who must be present together; and the Will must be acknowledged and attested in the presence of all three.

A person to whom money, &c., is left by the Will, or the husband or wife of such a person, should not be an attesting Witness, for the gift would not be good, but he or she may be appointed an Executor.

In English Law a Will is revoked by the Marriage of the Testator, and therefore a new Will ought to be made after marriage, if desired. By the Law of Scotland, the Channel Islands, and the Isle of Man, the rights of the widow or children to some portion of the estate cannot be defeated by a Will.

If any alteration is made in the writing of a Will, the signatures of the Testator and of the Witnesses ought to be made in the margin or other part of the Will, opposite to or near such alteration, or at the foot or end of, or opposite to, a Memorandum referring to such alteration and written at the end or some other part of the Will.

But an alteration or addition may be made by a *Codicil* (that is to say, by an addition to the Will) executed and witnessed in the same way as the Will.

N.B.—The Testator, if of English domicile, must be of the age of 21 years, unless he is on active service or under orders for active service. A Scotsman can dispose by Will of personal property (as distinguished from real property) when over the age of 14 years.

P—56

Rank Name AITCHISON Thomas Finnie Reg'l No 69859

If in perm. Corps, What Unit?

Unit 27th Battery Married or Single Single

Place and Date of Enlistment Montreal, 18 March 1915 Place of Birth Biggar, Scotland

Name and Address, Next-of-Kin Wm Aitchison

Biggar, Scotland.

Relationship

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
1/8/15	31/8/15	31	1.00	31 -	31	10	3 10	10 -	44 10			32 50	✓		32 50	11 60	
1/9/15	30/9/15	30	1'	30	30	10	3 -	87	33 87			14 60	✓		14 60	30 87	Adjust. Exchange Aug.
1/10/15	31/10/15	31	1'	31	31	10	3 10		34 10			41 36	✓		41 36	23 61	
1/11/15	30/11/15	30	1'	30	30	10	3 -		33 -			34 07	✓		34 07	22 54	
1/12/15	31/12/15	31	1'	31	31	10	3 10		34 10			51 09	✓		51 09	5 55	
1/1/16	31/1/16	31	1'	31	31	10	3 10		34 10			7 49	✓		7 49	32 16	
1/2/16	29/2/16	29	1'	29	29	10	2 90		31 90			5 22	✓		5 22	58 84	
1/3/16	31/3/16	31	1'	31	31	10	3 10		34 10			5 22	✓		5 22	87 72	✓
				244			24 40	10 87	279 27			191 55			191 55		

✓ ✓

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							

A—315.

List J. 768

ASSIGNED PAY.

PAID IN CANADA.

To whom Mr W. Aitchison

Address Croft Cottage. Biggar Lanark. Scot.

By whom assigned Aitchison T. F.

Regtl. No. 89859

Rank Gr

Corps, &c. C. F. A.

ASSIGNED PAY AND SEPARATION ALLOWANCE BEING PAID IN ENGLAND UNTIL ADVIC FROM OTTAWA OF DISCHARGE OF SOLDIE NAMED HEREIN.

	Month.	Cheque No.	Amt.	Amt. Debited	REMARKS.
~~1914.~~ 7	Oct. 1918	C89756	10		DISCHARGED TO CANADA.
	Nov.	D 78406	10		
	Dec.				
~~1915.~~ 8	Jan. 1919				
	Feb.				
	March				
	April				
	May				
	June				
	July				
	Aug.				
	Sept.	C 333			
	Oct.				
	Nov.				
	Dec.	E45822	10	—	
~~1916.~~ 9	Jan.	E85689	10		
	Feb.	J50034	10		
	March	J80701	10	Final payment.	

Paid for Mch T3129 20/3/19

L. P. C. cancelled or note issued to "J" 20/4/19

ASSIGNED PAY.

Month.	Cheque No.	Amt.	Amt. Debited.	REMARKS.
1916. April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
1917. Jan.				
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
1918. Jan.				
Feb.				
March				
April				
May				
June				

R 139. Pag 16

R—122.

Rank Name .AITCHISON Thomas Finnie Reg'l No. 89859

Unit 27th Battery If in perm. Corps, What Unit? Married or Single Single

Place and Date of Enlistment Montreal, 18 March 1915 Place of Birth Biggar, Scotland

Name and Address, Next-of-Kin Wm Aitchison Croft Cottage Main St (C.R. H.1-15=103 HQ CFD 24/10/15

Biggar, Lanarkshire Scotland. Relationship Father

Assigned Pay Monthly $ Payable to

Relationship

N/E. R.B. No. 6809
File R.L. 1
Category C.R.B.

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

A.F.B. 103 CHECKED N.L. 15 DEC 1916 DSlom

Report Date	Report From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place	Date O/S. B.	REMARKS Taken from Official Documents
		Landed England	Plymouth	18-8-15	
16-1-16	O.C. 7th C.F.A.	Embarked for France.	Westenhanger	16-1-16	Part II O - No 16
7-6-16	" "	Reported to Northern Arty School	In the Field	21/5/16	" " No 36 (Auty 2nd C. Dio Arty H.Q. B/M/5-13 5/4/16
21-6-16	" "	Appointed a Bombr	" "	1-5-16	Part II O No 38
31-7-16	" "	Promoted Bombr	" "	12-7-16	" " 43
31-7-16	" "	Rejoined Unit from attachment to Northern Arty School	" "	3-6-16	" " 43
7-11-16	" "	Adm No 10 C.F. Ambulance	" "	2-10-16	C.L.A. 199 PUO
7-11-16	" "	Rejoined Unit	" "	19-10-16	C.L.A. 199 PUO
25-11-16	" "	Promoted CpC	" "	11-10-16	Part II O 115

Report Date	Report From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place	Date	REMARKS Taken from Official Documents
23-3-17	7th C.F.A.	Adm to 16 Gen Hosp	Le Treport	14-3-17	C.L. A25-8 (Rupture R. Tympanum Slt
3-4-17.	CL "	Ex above To Con. Depot	—"—	25-3-17.	—"— A 263.
11-4-17.	—"—	Dis. #3 Con. Depot.	—"—	30-3-17.	—"— A265.
4.5.17	7th Bde	SOS. to 4th Bde.	Field	19.3.17	P II O 66, + 4th Bde 70 d/4.5.17
15.11.17	4 Bde	Adm 6 Can Fld Amb	Cpl "	8.11.17	CLA 92 SW L 4 land
19.11.17	"	Tfd No 9 Gen Hosp	" Rouen	11.11.17	CLA 95 " "
21.11.17	"	Tfd War Hosp	" Exeter	16.11.17	CLB 97 " "
26.11.17	CARD	SOS from 4th Bde	" Witley	16.11.17	P II 262 + 4th Bde P II 182 26/11/17
29.11.17	4 Bde	Tfd CCH	" Mons Hstn	27.11.17	CLB 104
8.12.17	"	Tfd 11 Can Gen Hosp	" S'cliffe	6.12.17	CLB 112
21.12.17	"	Tfd Gran Can Spec Hosp	Buxton	19.12.17	" 123
22-5-18	CCCD.	On Command from Hosp.	" B'Shott	20-5-18	P II 121 + P II 147 d/27 5/18 CARD
27-7-18	CARD.	Ceases on Com. Ind CCD.	" Witley	26-7-18	P II 208
3-10-18	do	On/Com C.D.D. Buxton	Cpl "	3-10-18	-276
28-11-18	"	Ceases on Com to CDD Buxton + SOS. to CEF in Canada	" Bordon	12-11-18	- 329

Returned to Canada. Is suitable employment in Eng.

12-11-18 Rh 23-6 Vol 16.

R.73 231118.

92431.—W6490/1535.—2,000,000—J. J. K. & Co., Ltd.—Forms B. 103/1.

Army Form B. 103.

CERTIFIED CORRECT.
Canadian Record Office,
Westminster House,
7, Millbank, S.W.

Casualty Form—Active Service.

Regiment or Corps 27TH BATTERY 7TH BDE. C. E. F.

Regimental No. 89859 Rank Act Sgt Name Aitchison, Thomas Finnie

Enlisted (a) 18/3/15 Terms of Service (a) Service reckons from (a) 18/3/15

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)

Report: Date	Report: From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
		LANDED IN FRANCE	HAVRE	18 JAN 1916	
26.5.16	O/C Unit	Attached to Northern Artillery School	Field	21.5.16	2nd C.D.A. B/M 5.13 d/5.4.16 P11 No 36 d/7.6.16
26.7.16	O/C Unit	Rejoined from do	Field	3.6.16	KG 115/299. P11 O. No 43 d/31.7.16
9-6-16	O.C.Unit	Appointed Act/Bombardier to complete establishment	Field	1-5-16	B213 PII No.38 d/21-6-16
21.7.16	do	Promoted Bombardier to comp Est.	Field	12.7.16	B213 " 43 31.7.16
6-10-16	do	Sick To Hosp.	do	1-10-16	B213 DCS. No 140 d/14-10-16
8.10.16	10 C.F.A	P.U.O (E1094A) A / 2fd.	10 C.F.A / Corp Rest Station	2-10-16 / 2.10.16	A36 " 149 d/30.10.16
20.10.16	O/C Unit	Rejoined Unit from Hosp.	Field	19.10.16	B213 " 149 d/30.10.16
8.10.16	9 C.F.A	Influenza ~~dis~~ A / dis	~~Duty~~ 9 C.F.A / Duty	7.10.16 / 7.10.16	A36 " 150 d/31.10.16
17.11.16	O/C Unit	Promoted Corporal	Field	11.10.16	B213 P11 Order 115 d/25.11.16
15.12.16	O/C Unit	Granted leave of absence	Field	12.12.16	B213 " 138 d/26.12.16
20.1.17	O/C Unit	Rejoined from — do —	Field	22.12.16	Letter K.T.149-561 Pt II O.15 d/25.1.17
10.3.17	O/C Unit	Sick	"	5.3.17	B213 DCS 211 d/17.3.17

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

[P.T.O

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				
	5 C.F.Amb				
10.3.17	~~of Unit~~	Deafness A	5 C.F. Amb.	5.3.17	A36 SCS 212 d/19.3.17
		Tfd.	30 CCS	5.3.17	
10.3.17	30 CCS	Rupture membrane tympani R. A (Gun concussion)	30 CCS	5.3.17	A36 SCS 213 d/21.3.17
14.3.17	16 General	Rupture R. Tympanicum (Wounds)	16 General	14.3.17	W3034
17.3.17	30 CCS	Rupture membrane tympani R. Tfd. (Gun concussion)	No 20 A Train	13.3.17	A36 SCS 216 d/27.3.17
25.3.17	16 General	do Tfd.	3 Con Depot	25.3.17	W3034
25.3.17	3 Con Depot	do A	3 Con Depot	25.3.17	W3034 SCS 219 d/5.4.17
30.3.17	3 Con Depot	To Base Details	do	30.3.17	W3034 " 220 d/6.4.17
1.4.17	O/C CB Depot.	Taken on Strength from 3 Con Depot. T.B.	Havre	1.4.17	NR. 92
10.4.17	do	Left for Unit	"	12.4.17	NR 224
21.4.17	O/C Unit	Rejoined	Field	14.4.17	B213 SCS 294 d/4.5.17
19.3.17	C.R.A.	S.O.S. 7th Bde C.F.A on reorganization	"	19.3.17	B213. Pt II 0.66 d/4.5.17
		T.O.S. 4th Bde C.F.A "	"	20.3.17	" 70 d/4.5.17.
10.11.17	Unit	Wounded	"	8.11.17	B213
11.11.17	9 Gen Hosp.	Gsw. Stand L. A	9 Gen. Hosp.	11.11.17	B4289
15.11.17	A.T. Grantully Castle.	Invalided (Wounded) & posted to Can. Arty. Regt Depot Witley	A.T. Grantully Castle.	16.11.17	W3083/4384. Pt II 0182 d/26.11.17
26.11.17	C.A.R.D.	T.O.S. from 4th Bde.	Witley	16.11.17	Pt II 262
22/5/18	Wco	att 2 Dep	B'Shott	20/5/18	Dr 121

Chas B Mayfield
OFFICER I/C RECORDS 3rd ECHELON
CANADIAN CASUALTY ASSOCIATION CANADA

A.W. Brady
FOR LT. COL. I/C RECORDS 3rd ECHELON

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
30.7.18	O.C. Res. Bde. C.F.A.	Attchd from C.A.R.D.	WITLEY.	30.7.18	BO Pt. 211
12.9.18	R.B. C.F.A.	Ceases to be att from C.A.R.D.	Witley	12-9-18	BO B II 755
			A.W. Gray LIEUT. & ASST. ADJUTANT. RESERVE BRIGADE, CANADIAN FIELD ARTILLERY.		
14-9-18	C.A.R.D.	att Dep Coy. - B I -	Witley	12-9-18	Pt II DO 25
3-10-18	do	o/c C.D.D. Buxton	do	3-10-18	Pt II DO 246
					..... LIEUT. OFFICER i/c RECORDS,
4 OCT 1918	Attached C.D.D. Buxton for return to Canada, Part II Order No. 235				
	Ceases to be attached C.D.D. Buxton on embarking for Canada.				
		J.W. Lock. Lt. for Lt. Col. Commanding Canadian Discharge Depot.			
NOV 27 1918	O/S.	T. O. S. District Depot No. 4	Montreal	12.11.18	AUTHY. PT. II D.O. No. 223.
10-4-19	SOS	R.O. 643 - Med. impt. to T.S.C. ~~Demobilization. RO. 1420~~	DD4	10-4-19	DO-101
		K.W. Gray Lieutenant, Officer i/c Discharge Section, District Depot No. 4.			

Army Form B. 103. Sheet II Regimental Number 89859

Casualty Form—Active Service.

Regiment or Corps C. F. A.

Rank Gunner Surname Artchison Christian Name Thomas Finnie

Religion ..... Age on Enlistment ..... years ..... months.

Enlisted (a) 18. 3. 15 Terms of Service (a) D of W. Service reckons from (a) 18. 3. 15

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

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

or Corps Trade and Rate .....

..... Signature of Officer.

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
		Embarked ...			
		Disembarked ...			
26 JUL 1918	OC 2nd CCD	Ceases to be attached to 2nd C. C. D. on return to Arty Reg. Depot	26 JUL 1918		Pt. 2 D. O. No 175 [illegible] for OC. 2nd CCD.
27-5-18	CCRD	On Cont to 2 CCD B'stock	Witley	20-5-18	DO Pt II 147
10-7-18	DO	Category Lowered to B I	DO	6-7-18	DO Pt II 191
27-6-18	DO	Attached to Depot Company	DO	26-7-18	DO Pt II 208
30-7-18	DO	On Cont to Res Bde C F A	DO	29-7-18	DO Pt II 211
			A W Dunkley		

(a) In the case of a man w[illegible]s re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) Signaller, Shoeing-Smit[illegible]c.

[P.T.O.

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

C.A.D.C.5009.
20M-19-2-18.
89859..
Cpl. Aitchison. L.H.
C.A.D.

4.

DENTAL CERTIFICATE.

The following Certificates will be attached to the Medical History Sheets of all Other Ranks being returned to Canada for disposal.

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.
CANADIAN DISCHARGE DEPOT OCT 4 1918	File			

A Cowan
Capt. C.A.D.C.

§ The word "Taken" to be inserted if drawn direct by the unit, and if by rail convoy, or other transport, the nature to be quoted, and truck number or convoy note inserted.

* This column should be filled in (and not those headed S., R., and U.) by Officers when returning Stores.

3.

REQUISITION FOR X-RAY EXAMINATION

X Ray 4096

C.H. 29 3000 19-6-17

Reg. No. 89859 Rank Cpl Name Aitchison T. Date 19/12/17

Ward 96 Palace / 347 Unit C.A.A. Disability GSW. left hand

(Officer making request, will please state exactly what is required, and give a brief report of the most important facts of the history, which might assist the radiographer in arriving at a diagnosis.)

X-ray 1st metacarpal bone left hand for condition of fracture

4 X 5 2 views

age 30

Canadian

R. Price
Sgt Cam

Please DO NOT WRITE in this space.

Date

Report Shrapnel fracture proximal half Metacarpal bone — Hand left — non union — multiple bone fragments — small piece of shrapnel just internal to Tarsophalangeal articulation

W.H. Eagan
Capt.
C.A.M.C.

Radiographer.

ROYAL VICTORIA HOSPITAL.

Montreal, Jan. 23rd 1919.

TO WHOM IT MAY CONCERN:

No. 89859

Rank... Corporal.....

Name... Aitchison, T.F...

Unit... D.D. #4 (27th Batty. C.F.F.)

This is to certify that the marginally named is free from infectious disease, transmissable skin disease, venereal disease, and vermin, and that he is fit to travel.

William Collinson

M. O. i/c of Troops, Royal Victoria Hospital

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

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

EQUIPED MILITARY HOSPITAL SECTION 5 EXETER

Hospital.

Ward 5 No. of Bed Date

Regl. No.	Rank and Name.	Corps.	Part to be X-Rayed.
	Aitchison.		J hand.

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

Fracture metacarpal of Thumb. ? Condition.

Small plate.

Signature of M.O. ECH.

Date

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

No. of Plate

Bullet fracture, central with much comminution. Small f.b. present

Signature of Radiographer J. D. Harris

Date Nov 17 – 17

10,000 bks.—John Rissen, Ltd.—3067/2/17—Forms W 3172/3.

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

General Hospital.

Ward T 4 No. of Bed _____ Date Nov 12 1917

Regl. No.	Rank and Name	Corps	Part to be X-Rayed
89859	Cpl Hutchison C. F.	Canad. F. A.	Rt. Thumb

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

Signature of M.O. _____

Date _____

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

No. of Plate 6793

Badly communited fracture of metacarpal of thumb

Position good.

Signature of Radiographer _____

Date _____

No. XI. Canadian General Hospital, Moore Barracks, SHORNCLIFFE.

.... 1917.

Requisition Urine

Date 5-12-17

Reg. No. 89859

Name. Ail Clyson J.P.

Unit. C.F.A.

Ward. 3

Diagnosis. G.S.W. Lauder

Exam. Req. Routine

Report.

Colour. amp

S.G. 1022

Reaction. acid

Sugar. neg

Albumen. neg

Microscopic.

M.O. Mann Lieut

Capt., C. M.C., O. i/c Laboratory.

D.M S 130C.

Surname: Aitchison | Christian Name or Names: T. H. | Reg. No.: 89859

Rank: ~~Bdr.~~ Cpl. | Unit: 7th Bde. Can. Fld. Artly | Co. | Troop | Batty.: (4 B) C.A.

Hospital: No 10. Can. Fld. Amb. | Date of Admission: 2.10.16.

Transferred #16 Gen Le Treport — Hosp. 14.3.17

3rd Conv. Depot. Le Treport. — Hosp. 25.3.17.

6 Can F. Amb. — Hosp. 8.11.17

9 Lakeside USA Gen. Rouen. — Hosp. 11-11-17

Diagnosis

(1) P. U. O.

Later Diagnosis (if changed) Rupture R^r Tympanum set

(2)

(3) S.W. Lt Hand.

Additional Diagnosis: if more than one state present

DISPOSITION

Rej. Unit. 19.10.16 — Date

Dis. 30.8.17

Disc:- 20-5-18

REMARKS

6 L. 7.11.16 A199.

23.3.17 a258.

3-4-17. A263.

11.4.17 a265

16.11.17 a92

20-11-17 a95-5

22-11-17 B94-2

30-11.17 B104-3.

10.12.17. B112 (2)

" 22-12-17 B123①

24-5-18 B/250.

A.M.D. 2 Dept.
Beh ord G M S O M F.C. London

EPITOME OF HOSPITAL TREATMENT.

	Hospital	Adm.
1.	Exeter War.	16-11-17
	Can. Conv Monks Horton.	27.11.17
2.	11. Can. Gen. Shorncliffe.	6.12.17
	G'ville C. Sp. H. Buxton.	19-12-17
3.		
4.		
5.		
6.		
7.		

*Name AITCHISON, Thos. Rank Cpl. Regtl. No. 89859

Fyle Depot 19-A-92

Original unit 27th. Bty. Present unit CARD. M. or S. S Age 30 Religion Presb. Ref. H.Q.

Port, ship and date of arrival 23/11/18 Tunisian St. John. N.B.

Next of kin Wm. Aitchion.

Address on leave 39 Congregation St. Pointe Ste. Charles, Montreal.

Address on discharge

Transportation issued Yes / No Date Character on discharge

Previous occupation Brocklayer. Date and place of enlistment Montreal 18/3/15

Diagnosis Date of Medical Boards

Date.	Remarks.	Pt. 2 Order No.
27/11/18	TOS effect 12/11/18 & Posted to Casualty Co. 26/11/18 & granted leave with Subsistence until 10/12/18	223/p/1

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

(over)

Date.	Remarks	Pt. 2 Order No.
12-12-18	SOS.Cas.Co. to Hosp.Sect. 11-12-18 RUH	238-p-3
19-2-19.	SOS.Hosp. Sec on Trans to Det Co'y W/sub 13-2-19.	50-p-2
8-4-19.	S.O.S. Details Coy.To Cas. Coy. S/S;. Eff 7-4-19.	98-P-3

M. F. W. 192
150m.—5-18
1772-39-1243

CARD

APPENDIX "B"

No. 89459 Pte. ... Name .... Aitchison T.F. .... Ref. No. 127 ... Dated. 16-19-18

RECOMMENDED FOR TRANSFER TO CORPS IN CANADA

In accordance with Instructions under paras. 7 & 19 of A.G.5-1-2 d/5-4-18

Major,
President.
Travelling Board on Temporary Non-effectives.

No. 89859 RANK Gnr. NAME Aitchison Thos.

T.O.S. 18-3-15 UNIT 27th Battery 7th Bdge. C.F.A., C.E.F.
1 Mar. paylist

M.D. 4

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915	1915			
Mar 18	Mar. 31	C.		
Apr		✓		
May		✓		
June		✓		
July		✓	0/B	Aug. paylist.
Aug		✓		
Sept		✓		

H. Q. FILE No. 649-

NAME Aitchison, Thomas Tunnie REGT'L. No. 89 859

RANK AND CORPS Bdr. (Form 27th Bty. 7th. Bgde. C. F. A.) (4th Bgde. C. F. A.)

Cpl.

CABLE NO.	CABLE DATE	NATURE OF CASUALTY
28-4		Scot:
Wf 6364.	17-11-17.	Adm 6th Fld Amb. Nov 8th 1917. GSW. Left Arm. ✓

L. L. Job 86907--M. & D. 16065.

M. F. W. 42—50m.-10-15.
H. Q. 1772—39-893.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
A.199	No. 10 Can. Fld. Amb.	2-10-16	P. U. O.
A.199	Ex " " " " "	14-10-16	" " " 1 Rej. unif.
A 258.	No. 16 Gen Le Treport	14-3-17	Rupture R Tympanum Sct.
A 263	to No. 3 Conv. Depot Le. " "	25-3-17	" " " "
A265	Disch	30-3-17	" " "
A92.	No 6 Can Fld amb	8-11-17	S.W. Lt Hand
A95.	No 9. (Lakeside USA) Gen: Rouen	11-11-17	" " " "
B97.	War: Exeter	16-11-17	" " " "
B104	To Can Conv Monks Horton	27-11-17	S.W. Lt Hand, (Can Arty
B112.2	Ex #11 Can Gen Sharncliff	6-12-17	" " " " "
B123.	Ex Granv. Can spec: Buxton	19-12-17.	" " " "
B250.	Disc	20-5-18	" " " "

R. 149.

Name AITCHISON. *Rank* Cpl. ~~Bdr~~. *Reg. No.* 89859.
Thomas .Finnie.
Unit 7th.Brigade.C.F.A.
Wm.Aitchison. Croft Cottage.
Next of Kin Main.St. Biggar. Lanarkshire. Scotland.

Date 1916.	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
2-10.	No.10.Can.Fld.Ambulance.		P.U.O.	A199.		
19-10.	Rejoined Unit. Ex Above.		do.	A199.		
14-3.	No.16.Gen.Hosp.Le Treport.		Rupture R.Tympanum "W"	Slt.	A.258.	
25-3.	No.3.Conv.Depot Le Treport.		do	A.263.		
30-3.	Discharged.		do	A.265.		

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

Form DMS 1401.
8289 100M 9/3/17.

DI

Granville Can. Spl. Hospital, HOSPITAL.

A. & D. CARD

AT

A. & D. No. T8272 PL. OF ACTION 89859

RANK Cpl UNIT C F A S SICK OR WOUNDED

NAME Aitcheson T. F. AGE 30 RELIGION Pres.

PLACE IN HOSPITAL ~~96/517~~ 104/449

DIAGNOSIS G S W Lt Hand.

ADMITTED 18 DEC 1917 FROM No 11 Can Gen Shoreliffe

DISCHARGED 20 MAY 1918 TO 2nd C.C.D. Bishott

TRANSFERRED

SERVICE AT HOME 32/12 IN FIELD 23/12

RESULTS

154 days

(See Document Card for M.H. Sheet and other Documents.)

(P.T.O.)

REMARKS.

Form R. 149.
7106—250m—7/2/17.

THOMAS FINNIE

Name AITCHISON Rank Cpl Reg. No. 69654

Unit 27/4th Bde C.F.A. SCOT.

Next of Kin W. AITCHISON CROFT COTTAGE, MAIN ST, BIGGAR, LANARKSHIRE

Date 1917	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
8-11	6 Can Fld Amb	SW Lanark		A92	16364	7766
11-11	9 (Lakeside U SA)	Gen Hpl Rouen	do	A95		16207
16-11	War Hpl Exeter		do	B94		6232
27-11.	Can.C.Hpl. Monks Horton.		do.	B104.		7062
6-12	11 Can Gen Hpl	Novon Bar Schyre	do	B112		7784
19-12	9 Can Sp Hpl	Buxton	do	B123		8720
9-5	Still in Hpl		do			7465
20-5	Discharged		do	B250.		5218

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

LEDGER NO. 90. SERIAL NO. Dg/00

REG. NUMBER 899959 NAME Aitchison J.T.

RANK Cpl CORPS D.D. 4

AGE 31 SERVICE 4 9/12

NAME OF HOSPITAL R.V.H. PLACE montreal

DATE OF ADMISSION 11-12-18

DISEASE G.S.W. Hand Thumb Loss of function & Thumb

TRANSFERRED TO OTHER HOSPITALS D.M.C.H. montreal 11-12-18

D.S.C for further treatment 4-4-19.

OPERATION

DISCHARGED TO Unit 7-4-18. IN CATEGORY "E"

M. F. W. 2553.
50m.—6-18.
1772-39-1332.

P. T. O.

REMARKS:

X. Ray Department,
No. XI Canadian General Hospital.
Record No. 7337.

M.O. wd. 3.
No. XI C.G.H.,

7th December, 1917.

89859. Cpl. Aitchison, T.F., C.F.A.,
a.d. no. 2527.

Comminuted fracture base of 1st Metatarsal bone (left) hand Small foreign body seen 1/10" x 1/20" in region of metatarso-phalangeal joint. The above noted fracture has some displaced pieces of bone.

Gwinden
for

Capt. C.A.M.C.
X. Ray Department,
Canadian General
Hospital.

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form B. 263	Attestation Paper or Particulars of Recruit	Militia Form W. 23 / " W. 133
Squadron / Battery / Company } Conduct Sheet,	" B. 263a	Proceedings on Discharge	" B. 218
or Field Conduct Sheet	" W. 178		
Copies of Convictions, by C. P.	in MS.		
Med. Hist. Sheet,	Militia form B. 313		
Casualty Form	" W. 54		
Medical Report for Invalid§	" B. 227		
Dental History Sheet	" B. 465		
Last Pay Certificate	" W. 44		
Duplicate Discharge Certificate	" W. 39A		
‡Form of Will	" W. 82		

§Only if discharged "Medically unfit."

‡Only if man has not been overseas.

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

(a) Proceedings on Discharge

(b) Attestation.

(c) Medical History Sheet.

Documents not accompanying this form should be crossed out.

I hereby certify that the following documents are unobtainable.

Officer Commanding.

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.

491

WAR SERVICE BADGE Class "B." No. 58052 ISSUED

WAR SERVICE BADGE Class "A" No. 94941 ISSUED

This space to be for numbers.

a-1017

Proceedings on Discharge.

101

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

No. ~~[illegible]~~ 89859

Rank Cpl.

Surname ~~XXXTHCISON~~ AITCHISON,

Christian name Thos, Finnie.

NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.

Corps (Squadron, Battery or Company) 27th, Bty., CFA.

Date of discharge Apl. 10th, 1919.

Place of discharge Montreal, QUE.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 30 years months.

Height 5 feet 9½ inches.

Complexion Fair

Eyes Blue

Hair L. Brown

Trade Builder (Mason)

Intended place of residence (To be given as fully as practicable.) 37 Congregation St., Montreal, QUE.

Descriptive marks

Two long scars on left thumb.
Scar left hernia operation.
Middle finger left hand, missing.

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

R.O. #1420 Medically Unfit.
Discharged to the I.S.C.

Authority for discharge

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.

200M.—5-18.
H. Q. 1772-39-113.

KC comp 25.10.19 Smrs.

(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.....

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).....

(Date).....

.....

Commanding.....

8. **Certificate to be signed by the Soldier on Discharge**

I hereby acknowledge that I received all my Pay, Allowances and Clothing, and all just demands, up to the present date, subject to the reservations of the claims noted on the third page, and that I have received my permanent discharge certificate.

(Place) Montreal, QUE. J. F. Hitchison *(Signature of Soldier.)*

(Date) Apl. 10th, 1919. L. C. Davies *(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) Montreal, QUE.

(Signature)..... *Lieutenant,*
Officer i/c Discharge Section, District Depot No. 4.

(Date) Apl. 10th, 1919.

Reservations referred to at H.

(To be signed by the soldier. When there are none, it is to be so stated, and signed by the soldier.)

NO RESERVATIONS.

J. F. Hitchison

LIST OF DISCHARGE DOCUMENTS.

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

This space to be left blank for the Chelsea Number.

TUNISIAN
SAILED 12-11-18
ARRIVED 23.11.18
ST. JOHN N.B.

CANADIAN DISCHARGE DEPOT
BUXTON, DERBYSHIRE
OCT 4 1918
FILE

a.92

Army Form B. 268.

Proceedings on Discharge.

(When forwarded for confirmation the documents named on page 4 should be enclosed.)

No. 89859 Army Rank Cpl.

Name Aitchison Thomas. C.H.

(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)

Corps C.A.R.D.

Battalion, Battery, Company, Depôt, &c. 27 Bty.

(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)

Date of discharge

Place of discharge

1. *Description at the time of discharge.*

Age 31 years — months

Height 5 feet 9½ inches

Chest measurement { girth when fully expanded ins. / range of expansion ins.

Complexion

Eyes

Hair

Trade Bricklayer

Intended place of residence (To be given as fully as practicable) Montreal

Descriptive marks.

2 Scars Lt Hand & FW. 3rd Finger missing Lt Hand

(4)

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

2. The above-named man is discharged in consequence of Returned to Canada in accordance with instructions ~~under Paras. 7 & 9 of A.G.5-1-22 of April 5th, 1918.~~

Category B. 2

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

To be filled in on the soldier quitting the Colours.

3. Military character :—

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

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

Initials of Commanding Officer.

Army Form B. 2088 has been issued to*

* Strike out if not applicable.

D. D. & L., London, E.C. (A8689) Wt. W7717/M2626 500,000 9/17 Sch. 39 Forms B. 268 4/

[OVER.

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

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

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

6. **Campaigns, Medals and Decorations** France 23 Months

Certificate of education .....

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

(Place)_____

(Date)_____ *Commanding*_____ *Battn.*_____ *Regiment.*

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

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

(*Place*)_____ _____ (*Signature of Soldier.*)

(*Date*)_____ _____ (*Signature of Witness.*)

(When a soldier is absent through illness or any other cause, and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned should be attached here.)

9. *Additional certificate in the case of a soldier who takes his discharge at his own request.*

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

_____ (*Signature of Soldier.*)

10. *Statement of service.*

Service towards engagement to_____(the date to which the record of service is completed)_____years_____days.

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

Total ..._____ " _____ "

11. *Confirmation of discharge.*

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

(Place)_____

*Signature*_____

(Date)_____

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

RESERVATIONS REFERRED TO AT PARA. 8.

(To be signed by the soldier. When there are none, it is to be so stated and signed by the soldier.)

OPINION OF THE MEDICAL BOARD

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

Concur

19. Is the invalid fit for

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

20. It is certified that the invalid
(*a*) Does require treatment. (Give the nature of the condition and of the treatment required and its probable duration.)

(*b*) Does not require treatment.
(*c*) Should pass under his own control.
(*d*) Should not pass under his own control.
(Strike out condition not applicable.)

21. It is recommended that the invalid be discharged. (When not for discharge add special recommendation.)
For further treatment.

Before signing the President of the Medical Board will read the statement signed by the invalid and differing opinions regarding Sections 7, 8, 9 and 10, as recorded in Section 18, to the invalid and if no change is indicated, will initial the statement. If, as a result of differing opinions regarding Sections 7, 8, 9 and 10 only, recorded in Section 18, the invalid is dissatisfied with the statement previously made, remarks of the Medical Board will be added here.

(SGD.) J.A. Chabot Capt.A.M.C. *President.*
" H.B. Carter Lt.

PLACE Montreal
DATE 4-4-19 } Members

TO BE COMPLETED WHEN TREATMENT IS REFUSED

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

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

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

President.

PLACE.....
DATE..... } Members

APPROVED BY
Assistant Director of Medical Services.
DATE 5-4-19

APPROVED BY
Director-General of Medical Services.
DATE.....

THIS FORM WILL BE USED FOR ALL RANKS

MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" issued by the B.P.C. and instructions issued by Militia H.Q., Ottawa, will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of Sections 1 to 17 of this Form and will obtain the signature of the invalid to the "Statement," page 3. The President of the Board of Medical Officers is responsible for the proper completion of sections reserved for recording the "Opinion of the Medical Board."
3. In answering the questions, Medical Officers will carefully obtain and record the invalid's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the invalid concerned, from witnesses, or from documents, Regimental or otherwise.
4. Special care is required in answering question 9. Read the questions carefully. All questions must be answered.
5. If space provided under any section is insufficient add another sheet. Such sheets must be initialled by the Medical Board.
6. A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board."
7. Under no circumstances may information other than that in sections 7, 8, 9 and 10 be communicated to the invalid, directly or indirectly.
8. The nomenclature of diseases must be followed, if possible, as described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London (1915), by Messrs. Harrison & Sons.

STATION Montreal Military Hospital DATE 4-4-19

1. 1 (*a*) Unit D.D. 4 (*b*) Regimental No. 89859 (*c*) Rank Cpl.
(*d*) Surname AITCHISON (*e*) Christian name THOMAS FINNIE
(*f*) Home address 37 Congregation St. Montreal.
(*g*) Next of Kin William Aitchison (*h*) Relationship Father
(*i*) Address of Next of Kin Main Street, Biggar, Lanarkshire, Scotland.
2. Age last birthday 30 Date of birth 1888
3. Enlistment, or Appointment (if an Officer) (*a*) Place Montreal (*b*) Date Mar.3/1915
4. Personal description:
(*a*) Height 5' 9½" (*b*) Weight 160 lbs. (stripped) (*c*) Complexion Fair
(*d*) Colour of hair lt.brown (*e*) Colour of eyes blue (*f*) Identification marks, Scars, etc. Two long scars left thumb, scar left Hernia operation, middle finger left hand
5. Former trade or occupation Builder (Mason)

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).	Years	Days
	4	32

	Periods	
	From	To
Canada	March 31/15	June 1915
England	June 1915	Feb. 1916
France or other theatres of War	Feb. 1916	Nov. 1917.
	Invalided to England Nov. 1917 - to	Canada Nov. 1918.

7. Original disease, or injury (1) G.S.W. Shrapnel left hand Nov. 8/1917
(2) ~~Left~~ Deafness right ear.

(*a*) Date of origin 1. Nov. 8/17 2. Sept. 1916 (*b*) Place of origin 1 Passenchendale France 2 Somme. France
(*c*) Cause 1. Shrapnel wound
2. Concussion from shell which exploded near him.

M. F. B. 227.
300M.—8-18.
1772-39-117.

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

(1) Marked weakness of left hand-grip (middle finger missing since 1911). b. The function of left thumb is almost due to weakness of abductor pollicis. c. Need of massage and Electric treat. for 5 months. d. He will never be strong enough in the lodt hand to resume occupation of Mason. (2) Deafness right Ear.

9. Present condition—(*a*) (Before completing this section the invalid should be stripped, and subjected to a thorough physical examination. Important, to be a full description of the present disabling condition, or conditions only. "History" must be recorded in Section 10. Describe all abnormalities, anatomical and functional, contributing to present disability; objective findings to be stated first, then subjective findings.)

(1)Left hand has middle finger missing (before enlistment). General weakness of left hand, especially in grip. His abduction action of left thumb is weak and not complete.

~~Mx~~ His abduction of left thumb is also very weak.

He has improved considerably during the past two months, but will require about five of six months more treatment. Complete normal power will never return to left thumb.

(2) Deafness of right Ear. Hears moderate voice 1 foot. Bone conduction reduced to 5/15 Normal.

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

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

Special Senses No — Respiratory System No — Integumentary System No

Disturbances of Mentality No — Digestive System No — Muscular System No

Osseous and Joint Systems No — Any other general condition No

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

(1) Wounded at Passenchendale, France by Shrapnel Nov. 8/17 causing comminuted fracture base of 1st Metacarpal bone left hand, abductor pollicis cut. Operation for repair of tendon performed in R.V.H. Montreal. Operation successful, but improvement slow. The tremor of left hand has disappeared since operation.

(2) Lost considerable hearing of right ear, at the Somme, France Sept. 1916.

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

1911 lost middle finger left hand by accident.

(*c*) (Here give a description of wounds, scar, and deformities.

Scar where middle finger was amputated (longitudinal) scar on back of left thumb

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

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

Not applicable

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

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

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

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

(1) Massage-Electri treatment.

(2) No treatment for ear.

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

16. Can the former trade or occupation be resumed? Not for months on account of loss of power of left hand.
(If not, briefly state why)

17. Recommendations That he be discharged as medically unfit for continuation of treatment.

(SGD.) E. O'Connor
Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

(Sections 7, 8, 9 and 10 are to be read to the invalid and either "satisfied" or "not satisfied" struck out).

I, the undersigned Thos. F. Aithsion have heard the description of my disability and present condition read, and am satisfied (or not satisfied) with it. (If dissatisfied, statement should follow.)

I complain in addition of

(SGD.) T.F. Aithison, Capt.
Rank.
Signature of invalid examined.

PART III

Proceedings of the Pensions and Claims Board on the Soldier mentioned in Part I.

The Pensions and Claims Board, Canadian Expeditionary Force, assembled at

on the day of 191

Members of the Board :—

The Board having considered the evidence of the soldier marginally named, together with the documents submitted, recommend :—

A.N.

A.N.

A.N.

A.N.

Dated at this day of 191

Signatures of the Board

President.

PART I. Form (D.M.S. 1312). A.F. 9 Canada (Revise 3737. 50M.

Reserved for M.H.C.

Regt. No. 89859. Rank Corporal Surname AITCHISON Christian Name THOMAS FINNIE

Unit or Corps—(a) Overseas from United Kingdom 27th Battery (b) In United Kingdom C.O.R.D.

Born at—Town Biggar County or Province Lanarkshire Country Scotland

Date of Birth—Day 20 Month June Year 1885 Age 31 yrs. 5 months.

Joined at Montreal Date March 16th 1915

Former Trade or Occupation Bricklayer

Permanent marks or peculiarities that will serve for future identification :—

Scar: Base of left chinese animals
Operation for left inguinal hernia
2nd finger left hand amputated

Height—feet 5 inches 9 Colour of eyes Blue

Signature of Soldier (for identification purposes) Cpl. Aitchison T. F.

Medical Report.

☞ *The answers to the questions below are to be filled in by the Officer in medical charge of the case. He will carefully discriminate between the soldier's unsupported statements and the evidence as recorded in the medical or other military documents bearing on the case. He will plainly state the existence of any of the disability prior to the soldier joining for the present war.*

1. DISABILITY (*State the actual disabling conditions as distinguished from the diseases or injuries from which they resulted*). (*Follow the official nomenclature as far as possible.*)

Group the disabilities, placing those resulting from separate causes in separate groups.

Disabilities Group (a) PARTIAL LOSS FUNCTION. LEFT HAND

Disabilities Group (b) Nil

Disabilities Group (c) Nil

2. CAUSE OF DISABILITY. (*Follow the official nomenclature in stating the disease or injury.*)

	Disease or injury to which the disability is due.	Place of origin.	Date of origin.
(i.) As to Group (a) above.	G.S.W. Left HAND	PASCHANDAEL	Nov 1917.
(ii.) As to Group (b) above.	Nil		
(iii.) As to Group (c) above.	Nil		

NOTE.—By Active Service is meant Service with the Colours in Canada, United Kingdom, or elsewhere during the present war (since August 4th, 1914).

3. Is the disability due to disease contracted or injuries received prior to Active Service ?

(i.) As to Group (a) above ? NO If yes, has Active Service aggravated it ?

(ii.) As to Group (b) above ? — If yes, has Active Service aggravated it ?

(iii.) As to Group (c) above ? — If yes, has Active Service aggravated it ?

4. Is the disability due to disease contracted or injuries received while on Active Service—

(i.) As to Group (a) above ? Yes.

(ii.) As to Group (b) above ? —

(iii.) As to Group (c) above ? —

PART I. (continued)

5. If a cause of disability was an injury received on Active Service, was it received—

(i.) While on duty? Yes (ii.) While off duty?

(iii.) Was a Court of Inquiry held? (iv.) Where? (v.) When?

(vi.) Opinion of the Court?

6. HISTORY OF THE CASE. (*State concisely the essential points of the history, noting the entries made on the Medical History Sheet and other records*).

He states that he was injured in Paschandael in Nov 1917. Was healthy previous to enlistment. Hand grip is weak.
Ined Hist Sheet. No 10 F.A. 2-10-16 to 19/10/16. P.U.O. Ret to unit. Exeter - Monks Horton. Shorncliffe Buxton Hosl 16-11-17 to 20/5/18. G.S.W. L Hand. X Ray 7337 communicated fracture base of 1st metatarsal bone left hand. Small foreign body seen 1/10 x 1/20 in region of metatarso phalangeal joint. The above noted fracture has some displaced pieces of bone. X ray 17/11/17. Same as 7337. Specialist report - Concussion degrees at ear. Has existed 3 years. Will not improve. "A". treatment not advisable. This nco cannot bear well on parade.
V. E. Latimer
(FHB)

7. PRESENT CONDITION. (*Give previous and present weight if likely to indicate progress of disability.*)

Mar 5/9. Weight 140. Musculature fat rather than developed. Flabby. Hand grip weak. Good movement in arm. Poor thumb movement with evidence of pain on adduction. Hand otherwise as described in Quest VI above (FHB)
5 cav of opin - Left inguinal hernia - no disability. Speaking voice heard 4 feet RA ear

8. OPERATION. (i.) Was one performed? Yes. Hand cleaned up.

(ii.) If so, state what.

(iii.) Was one advised and declined? No

NOTE.—Loss of teeth on or immediately after Active Service should be attributed thereto unless there is evidence to the contrary.

9. (i.) Is there loss or decay of teeth attributable to Active Service? No

(ii.) If so, describe.

10. DO YOU RECOMMEND:—

(a) Fit for duty? No

(b) Fit for base duty? B III not likely to improve in 6 months

(c) Invalid to Canada? No

(d) Discharge from the Service as permanently unfit? No

Date of Report 18/9/1918 191 Signed J. M. Mac Lean Capt.
Officer in medical charge of case.

Station Witley Camp. Surrey England

I have satisfied myself of the general accuracy of the above Report, and concur therein *except

F. H. Berkeley Capt. Officer i/c Hospital / S.M.O. Brigade — Strike out one of these.

Dated at Witley Camp - Surrey - Eng. Station, on 20 9 1918 191

* Delete if inapplicable.

PART II.

Proceedings of a Medical Board on the Soldier mentioned in Part I.

☞ *Clear and decisive answers are to be given to all questions. Such terms as "may," "perhaps," "probably," "possibly," are not to be employed. Disability due to causes arising on Active Service is to be clearly shown in order that the Pensions Authorities may deal with the case properly.*

11. Is the disability fully indicated in Part I. (1)? Yes
If not, indicate it.

12. Is the cause of the disability fully indicated in Part I. (2)? Yes
If not, indicate it.

13. Was the disability caused or aggravated by— (a) Negligence of the Soldier: Caused? No; Aggravated? No (b) Misconduct of the Soldier: Caused? No; Aggravated? No

14. THE ENTIRE DISABILITY.—Without regard to his regular occupation, to what extent is his capacity lessened at present for earning a full livelihood in the general market for untrained labour? (*Estimate at none, 10%, 20%, 30%, 40%, 50%, 60%, 70%, 80%, 90%, or 100%.*)
N.A.

15. THE PENSIONABLE DISABILITY.—*see Part I. (3). Aggravation on Active Service of a disability existing previous to joining is to be included in the estimate).*
What part of the entire disability estimated next above in (14) is due to causes arising during Active Service? (*Estimate at none, 1/5, 2/5, 3/5, 4/5, or all.*)
N.A.

16. Permanency of the Pensionable Disability estimated next above in (15).
(i.) Is it permanent?
(ii.) If not permanent, what is its probable minimum duration (*in months*)? N.A.

17. If an operation was advised and declined, do you consider the refusal to have been unreasonable? N.A.

18. Remarks.
2nd finger left hand amputated at the metacarpo-phalangeal joint. (Operation before enlistment). The abductor tendons of the left thumb have been cut. He is not able to abduct thumb. The left forearm is smaller than the right. He shows fear of moving the hand and arm.

19. Recommendation:—(a) Fit for duty? No
(b) Fit for base duty? B III not likely to be raised within 6 months
(c) Invalid to Canada? no
(d) Discharge from service as permanently unfit? no

Classification for the Military Hospitals Commission.

Date of Board 21 Sept 1918

Signatures of the Board. W. E. Gravesley for President. Jas. L. Hammond Capt

Station Witley

Approved

Dated at [signature] Capt

A.D.M.S.

Station

A.D.M.S. - HEADQUARTERS CANADIAN TROOPS, 22 SEP 1918 WITLEY, SURREY

191

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
5 years ago.	Vaccination.
1915. May 10.	Inoculation - good. H.R.Dunstan Gray.
" " 20.	" " "
" " 31.	" " "

Table IV.—Service Table.

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

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.

4

89859.

DUPLICATE.

ARMY FORM B. 178.

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

MEDICAL HISTORY of

Surname AITCHISON *Christian Name* Thomas Finnie,

TABLE I.—GENERAL TABLE.

Birthplace ... Parish Biggs, County Lanarkshire, Scotland.

Examined ... ... on 18th day of March 1915, at Montreal.

Declared Age ... ... 23 years days.

Trade or Occupation ... Bricklayer.

Height ... ... 5 feet 8 inches.

Weight ... ... 160 lbs.

Chest Measurement: Girth when fully Expanded 39 inches. Range of Expansion 2 inches.

Physical Development ... Good.

Vaccination Marks: Arm ... Right Left; Number 2

When Vaccinated ... ...

Vision ... ... R.E.—V= L.E.—V=

(a) Marks indicating congenital peculiarities or previous disease ... (a) Nil.

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

Approved by (*Signature*) H.R.Dunstan Gray,
(*Rank*) Capt. C.A.M.C.
Medical Officer.

Enlisted ... ... at Montreal. on 18th day of March 1915.

Joined on Enlistment ... Corps. 27th Bty. C.E.F. Regtl. No. 89859.

Transferred to ... ...

Became non-effective by ...

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

on day of 191 .

(*Signature*)
(*Rank*)

(4887.) W. 9597/1588. 500M. 3/15. C. P., Ltd. Forms B. 178 39

P.T.O.

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

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, 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
	Day	Month	Year	Day	Month	Year				
1010 C.F.A.	2	10	16	19	10	16	P. U. O		Reg Unit	A199-199.

FILE

MARRIED OR SINGLE S.

PLACE OF BIRTH Biggar, Scotland

NAME AND ADDRESS OF NEXT OF KIN Wm Aitchison, Biggar, Scotland.

RELATIONSHIP OF NEXT OF KIN

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO

Attached to [illegible] found [illegible] [illegible]

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY
Prom Bde.	12.7.16	SO. 31.7.16
from bpe.	11.10.16	DO 115 25/11/16

ADMISSIONS TO HOSPITAL, &c.

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

REG'L. No. 8985 RANK Gdsman Bdr Cpl NAME Aitchison, Thomas Tennie

IF IN PERMT. CORPS WHAT UNIT UNIT 24th Battery

PERMANENT FORCE ALLOWANCES

PLACE OF ATTESTATION Montreal.

DATE OF ATTESTATION 18th March 1915

ASSIGNED PAY MONTHLY $ 10.00 DATE EFFECTIVE 1/1/16 pat

PAYABLE TO Mr William Aitchison, Craft Cottage, Biggar Lanarkshire, Scot. RELATIONSHIP Father.

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) EFFECTIVE REASON

DISCHARGE DATE AND PLACE Dr Barnes 3/9/18 REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

TRANSFERRED TO 4th Bde 6th A Bde DATE 19/3/14. AUTHORITY DO 66. 4/4/14

TRANSFERRED TO C.A.R.D. DATE 26/11/17 AUTHORITY 262 GO 16/11/17

TRANSFERRED TO DATE AUTHORITY

TRANSFERRED TO DATE AUTHORITY

DATE	PAY No. OF DAYS	PAY RATE	PAY AMOUNT $	PAY AMOUNT C.	FIELD ALLOWANCE No. OF DAYS	FIELD ALLOWANCE RATE	FIELD ALLOWANCE AMOUNT $	FIELD ALLOWANCE AMOUNT C.	WORKING OR SPECIAL PAY No. OF DAYS	WORKING OR SPECIAL PAY RATE	WORKING OR SPECIAL PAY AMOUNT $	WORKING OR SPECIAL PAY AMOUNT C.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 NO.	1 DATE	2 NO.	2 DATE	3 NO.	3 DATE	4 NO.	4 DATE	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE CREDIT	BALANCE DEBIT	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
March			24				24	40						10 17	279 27												191 55			191 55	87 72				
April 1-30	30	1.00	30	.	30	10	3	.							33.	607	10/4	645	25/4					2 61	2 61					5 22	115 50				
May	31	.	31	.	31	.	3	10							34 10	669	15/5							2 44						244	147 19				
June	30	.	30	.	30	.	3	00							33. .										4 26			40 10		54 26	125 93				
July	31	.	31	.	31	.	3	10						1.00	34 10	617	1.00 1	552						2 56	2 61			10		15 17	145 86				20 days @ 6
Aug.	31	1.05	32	55	31	..	3	10							35 65	886		915						2 62	4 36			10		16 98	164 53	411 .	123 53		
Sept	30	.	31	50	30		3	.							34 50	951		987						2 61	5 23			10		17 84	181 19				
Oct	31	.	32	55	31		3	10							35 65			1039							5 23			10		15 23	201 61				
Nov	30	.	31	50	30		3	.							34 50													10	1 .	11 .	225 11	169 50	55 61		Dto 2/7th Bachanlé a/c 659 effect from bpe 11.10.16 DO 115 25/11/16
Dec	31	1.10	34	10	31		3	10						2 55	39 75	1085	22/11							4 57				10		26 57	288 39	176 88			
			51	90			51	90								1138								4 36											
Jan	31	1.10	34	20											37 20	1182								3 49			97 34	10		118 19	160 30	193 88			
Feb	28		33	60											33 60	1215								3 49				10		17 83	176 03	78 .	98 05		
March	31		37	20											37 20	1252								3 49				10		19 50	193 66				
			688	10										1 14 42	402 52									54 64	24 30	97 34	191 55	140	1 .	507 86 488 97					

203 15th 11/12

89889. Bbl. Artificer Thomas Dinnie

10 00

DATE	PAY No. of Days	PAY Rate	PAY Amount $	PAY Amount c.	FIELD ALLOWANCE No. of Days	FIELD ALLOWANCE Rate	FIELD ALLOWANCE Amount $	FIELD ALLOWANCE Amount c.	WORKING OR SPECIAL PAY No. of Days	WORKING OR SPECIAL PAY Rate	WORKING OR SPECIAL PAY Amount $	WORKING OR SPECIAL PAY Amount c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE Credit	BALANCE Debit	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
Mch.			68 8	10										14 42	107 82						25/3/14 0818		24 67	24 30	97 34	19 82	140	1	808 86	193 66		84 50		
Apl 30	1/10	1/10	36	00											36 -						H5796				✓1 14		10		11 44	217 92		91		
May 31			34	20											34 20						aR 590 LBB Rouillé 44839				✓6 97				23 95	231 14		94 50		
June 2			2	40											2 40										✓6 98		10 -			233 54		104		
" 28			33	60											33 60	164 25 5 121 17 5					Q 32401 YR 10744		✓3 54											
July 31			34	20											34 20						68531					✓Y3 -	10 -		83 -	203 34		110 50		
Aug 31			34	20											34 20	392 22 6 353 14 6 501 19 8 446 12 8 540 12 7 605 24 7					154601		✓3 54	✓14 46			10 -		18 03	222 51		114 -		
Sept			36												36 -						144001		✓3 54	✓14 46			10 -		26 06	232 45		123 50		
			907	70										14 42	922 12								86 79	24 30	113 05	264 55	200	1	689 67					

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFD. SER. ALLCE. PAY	EXTRA SERVICE PAY ENTRIES
Oct.	Bal. Fwd.	~~37 20~~							232 45	123 50	
"	C. P.	37 20		244001							
				AR 540 4 Bdr. 9.9.				4 46			
		37 20						4 46			
		36 -		£2-1-1							
Nov.	C.P.	~~37 20~~ 37 20		B44601							
	C.P. Dec.	37 20		AR 640 4 Bde 9.10.				5 35			
				" 616 " 20.9.				3 54			
				" 411 " 28.10				8 92			
				B44601 " £2-1-1							
		43 20						17 84			
1918 Jan	C.P. Pay	37 20		C 38211 £2-1-1							
				C 70 18 3 £							
				14 353/423/17 Bth Notts 1417				85			
				AR 3396 Bottrell 17/12/17				14 60			
				AR 1003 Thos Whitmore 30/11/17				2 43 17 88			
		37 20						17 88			
Feby	C.P. Pay	33 60		C 69713 £2-1-1							
				AR 3911 Burslem 8/1/18				7 30			
				AR 4388 " 17/3/18				7 30			
				Clemence 1440 21/3/18				24 33 38 63			
		33 60						38 93			

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFD. SER. ALLCE. PAY	EXTRA SERVICE PAY ENTRIES
											284 54 150
											37 76
											321 76
											63 77
											257 99
											255 77 153
											153
	Mar		37 20	C 33491 £2-1-1				10			
				AR 5869 Burton.		7 30					
				Tenancy 28399 31/3/18		48 67					
						55 97		10			

1st Half Rent

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY	* ENGLAND OR ~~CANADA~~	SEPARATION ALLOWANCE.	* ENGLAND OR CANADA.
EFFECTIVE DATE:–	1. 2. '16.	EFFECTIVE DATE:–	
AMOUNT:–	10/00	AMOUNT:–	

NAME, ADDRESS, RELATIONSHIP & AUTHORITY | WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.

Mrs Wm Aitchison
Croft Cottage
Biggar. Lanarks
(Father) Scotland.

~~ASSIGNED PAY~~ ~~ALLOWANCE~~ NOT TO BE PAID IN EARLY CASES UNTIL ADVICE FROM OTTAWA RE DISCHARGE OF SOLDIER NAMED HEREIN

Discharged to Canada 10/1/19 Ottawa Cable 4692. 30/4/19

NAME:– AITCHISON Thomas Finnie.

NUMBER:– 89859.

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY X	DATE EFFECTIVE	RANK OR APPOINTMENT
DO 115 d 23/4/16	11-10-16	Cpl

UNIT AND TRANSFERS

ORIGINAL UNIT:– 27th Bty.

DATE ACCOUNT FIRST OPENED:–

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			CARD.
		11/6/18	W.C.
	17-2-19		CANADA SECTN.

DAILY RATES OF PAY AND ALLOWANCES

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

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS | UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK

DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT
9/8	4205	Witley	~~4 87~~				
18/9/18	4567	"	~~9 73~~				

PARTICULARS OF RENDERING NON-EFFECTIVE: 30/9/18 Discharged to Canada C&RD Lk. 177 18/9/18 Cr. Bal. $199.55.

MONTH 1918	PARTICULARS	CR 1	CR 2.	PARTICULARS	DR. 1	DR 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
									233 77	155 -	
Apl	~~Cpl~~ Cpl P	36		A 40214 £2/0/0			10				
				AR 534 10/4 Chx	7 30				274 47	160	
May	Cpl P.	36			7 30		10				
	O.O. 121 22/5/18 2d 66 D. Granted sick furn. from 20/5/18	37 20		B 3906 £2-1-0			10				
	to 1/6/18 = 12 dys @ .43			AR 2000 9/4/18 Buxton	7 30						
		8 76		" V338 21/5/18 "	48 67				250 46	165 -	
		45 96			55 97		10 -				
June	Cpl P.	36		B 27014 AR £2-1-0			10 -		280 46		
				Q 4005 66 4/6/18	1 72						
				11696 20/6/18 London	24 33						
				AR 1670 11/6/18 2-66 D.	5 11						
				AR 1963 16/6/18 "	34 07						
				AR 2140 27/6/18 "	5 11				210 12	170 -	
		36 00			70 34		10 00				
July	Cpl P	37 20		B 9470 £2 1/1			10		231 32		
				AR 25232 CCD 11/7/18	48 91 -				173 57		
				2865 - 26/7/18	1484				173 57	175	
		37 20			63 78		10				
Aug	Cpl pay	37 20		C 9710 £2 1/1			10				
				AR 3392 Chx 13/8.	48 87						
				25331 London 21/8	48 87						
				AR 5522 CCRD 25/8.	5 35						
				3809 Chx 21/8	9 73				175 95	180	
		37 20			24 82		10				
Sept	Cpl's pay	36 00		A.P. (1928) £2 1/1			10		201 95		
	Ent on Sep pay	12 20							214 15		
		49 20		AR 4705 Chx 9/9	4 87						
				4567 - 21/9	9 73				199 55	P.T.O.	
		48 20			14 60		10				

Cpl. to Paint 31. only

NUMBER RANK NAME

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Oct	Forward								199 55		
				AR 158 Buxton 8/10 Endsd	19 47						
				AR 1001 " 22/10 "	9 73				170 35		
					29 20						
Nov.				AR 2049 5/11/18 ~~G.D.D.~~ Endorsed Buxton	9 73						
				SDW 1985 To Close a/c	170 35				9 73		
					180 08						
apl.				F45822 EAP Dec			10 -				
				E85689 Jan/19			10 -				
				F50034 Feb			10 -				
				F80701 Mar			10 -		49 73		
							40 -				
				Dr. 170 35 10-12-18							

SOS Canada 12.11.18

AUDITOR [illegible] PAYMASTER W

a 59

M. OR S.

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

REGT. No. 89859 RANK CPL NAME (IN FULL) AITCHISON THOMAS.

(BLOCK LETTERS, SURNAME FIRST)

NEXT OF KIN Mrs W Aitchison RELATIONSHIP

ADDRESS Croft Cottage Biggar Lanark Scot.

IS SEPARATION ALLOWANCE PAID? DATE EFFECTIVE

TO WHOM PAID RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY
T.O.S.	12-11-18	D.O. 223/1
Details Co W/3	13/2/19	D.O. 50/2

Dis. from I.S.D. 23-6-19

ORIGINAL UNIT C.E.F. CFA

IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION Montreal

DATE OF ATTESTATION 18-3-15

TRANSFERRED TO S.S. Tunisian DATE 23-11-18 AUTHORITY France

TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY, $ Nil 10.00 DATE EFFECTIVE 1-10-18 auth A.P. 159-T-15, 31-5-19 & 15-5-19 ad.

PAYABLE TO RELATIONSHIP

ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS W. Sl. 37 Congregation St Pte St Charles P.Q.

EFFECTIVE

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE

DISCHARGED PLACE Montreal DATE 10-4-19 REASON I.S.6 DD4 AUTHORITY 19-A-92 IF ENTITLED TO POST DISCHARGE PAY

D.O. 161-2

MONTH	Pay and F.A. No. of days	Rate	Amount $ c.	Other credits $ c.	Prev. o/c $ c.	Total credits $ c.	Acquittance Rolls Col. No. 1 No. / Date	Col. No. 2 No. / Date	Col. No. 3 No. / Date	Cash Payments Col. No. 1	Col. No. 2	Col. No. 3	Assigned pay	Regimental charges	Other charges		Total debits	Balance Debit	Balance Credit	Particulars or remarks
Balance from previous account 1919 Jan					204 20															Pst Cas Co 26-11-18 D.O. 223/1
1/1/19-31	31	1.10	34 10			238 30	19677 / 29			10 00							16 00		228 30	
Feb. 1/2/19-	28	1.10	30 80	12 80	~~228 30~~	43 60 ~~271 90~~	21494 / 10	24064 / 19	25349 / 25	50 00	50 00	100 00					200.00		71 90	
Mar	31	1.10	34 10	24 80	~~71.90~~	58 90 ~~130 80~~	28613 / 13	28728 / 26		75 00	55 80						130 80	—	—	
April	10	1.20	12 00	35 00 ~~70 00~~ 18.20	8 00	8 00 65 20	ck 208 13-4-19	ck 209 10/4/19	ck 18929 28/1/19	35 00 100 00	38 20				~~100 00~~		73 20 100.00	100.00		35.00 W.G. 8.00 Subs D.O. 60 / 18.20 Diff in rate of pay & Corp from 1/10/18 to 31/3/19 / $100.00 omitted to be charged in Jan. Ck 18929 Acquitt. Roll 19 (Jan)
						414 00											514 00			

	Other Credits	W.S.G.	S.A.	Total	War Service Gratuity	Other Charges	W.S.G.	S.A.	Total	Balance Soldier	Balance Dependant	
						100 00						Dr Bal. as above
						60 00			160 00	Dr Bal. 160 00		A.P. paid by England from 1-10-18 to 31-3-19 and not chgd. Auth. A.P. 159-T-15, 15-5-19
										260 00		
		420 00 (140 / 280)		420 00			~~260~~		~~260~~	~~260~~		
~~10/7/19~~ 10.7.19							70 00		70 00	190 00		1st Payment 1062661
18/8/19							70		70	120		2 1280064
10/9/19							70		70	50		3 1527609
10.10.19							50		50			1636265
									420			

A.C.W. Capt. Final

T

60m.-11-18. L. L. 51777. M. & D. 9585.