1478

I.D. number
No. d'identification

OPEN ATIA.

AITKEN

Surname
Nom de famille

DAVID

Given names
Prénoms

PERSONNEL RECORDS CENTRE
CENTRE DES DOCUMENTS DU PERSONNEL

Location
Lieu 60

ARC-1048 (rev. 91)

REGIMENTAL DOCUMENTS

S

NAME AITKEN. David REGT. NO. 1478 UNIT C.A.S.C. H. Q. FILE NO. 3135

H

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
4	ATTESTATION PAPER (M.F.W. 23, 133, or 51)	OPEN ATTA				DEATH
/	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
/	~~TRAINING HISTORY SHEET (M.F.W. 113)~~ Record Sheet					
/	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
	REGT. CONDUCT SHEET (M.B.W. 263 or A.F.B. 120)					
	COMPANY CONDUCT SHEET (M.F.B. 263A or A F.B. 121)					
2.	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
	DENTAL HISTORY SHEET (M.F.B. 465)			51		Category
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					Cessation of Working Pay
	MEDICAL EXAMINATION (M.F.W. 129)					
/	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					DESERTION
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	MFW. 125.					
6	Misc Cards.					
	Paysheets					

M H

Deceased 14-10

W. 2509
100M-11-19
1272-30-1977

Copy. D.D.

39-9-101

ATTESTATION PAPER.

No. 1478

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

	(ANSWERS.)
1. What is your surname?	Aitken
1a. What are your Christian names?	David
1b. What is your present address?	
2. In what Town, Township or Parish, and in what Country were you born?	Parkhill, Huron County Can.
3. What is the name of your next-of kin?	Bessie Aitken
4. What is the address of your next-of-kin?	Parkhill, Huron County Can.
4a. What is the relationship of your next-of-kin?	
5. What is the date of your birth?	Feb. 22nd. 1884
6. What is your Trade or Calling?	Baker
7. Are you married?	Yes
8. Are you willing to be vaccinated or re-vaccinated and inoculated?	Yes
9. Do you now belong to the Active Militia?	No
10. Have you ever served in any Military Force? If so, state particulars of former Service.	No.
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
13. Have you ever been discharged from any Branch of His Majesty's Forces as medically unfit?	
14. If so, what was the nature of the disability?	
15. Have you ever offered to serve in any Branch of His Majesty's Forces and been rejected?	
16. If so, what was the reason?	

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

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

David Aitken (Signature of Recruit)

Date 191 . W. Rayfield (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, David Aitken, 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.

David Aitken (Signature of Recruit)

Date 191 . W. Rayfield (Signature of Witness)

CERTIFICATE OF MAGISTRATE.

The Recruit above-named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath before me, at Toronto this 19th day of February 191 .

(Signature of Justice)

M. F. W. 23.
750 M.—1-17.
H. Q. 1772-39-841.

N.B.—ATTENTION IS DRAWN TO THE FACT THAT ANY PERSON MAKING A FALSE ANSWER TO ANY OF THE ABOVE QUESTIONS IS LIABLE TO A PENALTY OF SIX MONTHS' IMPRISONMENT.

Wm. Black
Capt.

Description of David Aitken on Enlistment.

Apparent Age 21 years — months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height ..... ft. ..... ins.

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

Complexion Fair

Eyes Grey

Hair Light Brown

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

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).

Mon. 8th 1914 Quebec D.D.
I have examined this man and find him fit.
W A Storey
Capt.

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 Feb. 19 1915. Frank M. Walker

Place Toronto Lieut Army 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.

David Aitken 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.

Wm. Black (Signature of Officer)
Capt.

Date 19th February 1915.

CLINICAL CHART.

Army Form B. 181.

(To be attached to Case Sheet.)

Military Hospital No. 2 CANADIAN STATIONARY HOSPITAL

Corps C. A. S. C. 2 Fld Bkry

No. 1478 Rank and Name Pte Aitken David Age 33 Service 1-4/9

Disease Anaemia Bronchitis Date of admission 12/3/16 Date of discharge Apr. 11-16 Result Improved

Dates of Observation	Adm. 12	13	14	15	16	17	18	19	20	21	22	23	24	25	26
Days of Disease															
Temperature Fahrenheit	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.
Pulse per Minute	76 80	72	76	72	80	76	72	78	80	76	68	76	80	76	80
Respirations per Minute	20 20	18	20	18	16	20	18	20	16	20	18	20	16	16	16
Motions per 24 hours	X		1	1	1	1	1		1		1	1	1	1	1

Dates of Observation	27	28	29	30	Apr 1	2	3	4	5	6	7	8	9			
Days of Disease																
Temperature Fahrenheit	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.
Pulse per Minute	78	72	76	68	72	80	76	72	68	72	76	84	76			
Respirations per Minute	18	18	16	18	16	20	18	16	16	16	20	18	20			
Motions per 24 hours	X	X	1	1	1	1	1	1	1	1	1	1	1			

Signature E. Emsley. N. S. In charge of case.

(2669.) W9043—1195. 800,000. 12/14. C.P., Ltd. Forms /B. 181/3.

CLINICAL CHART.

(To be attached to Case Sheet.)

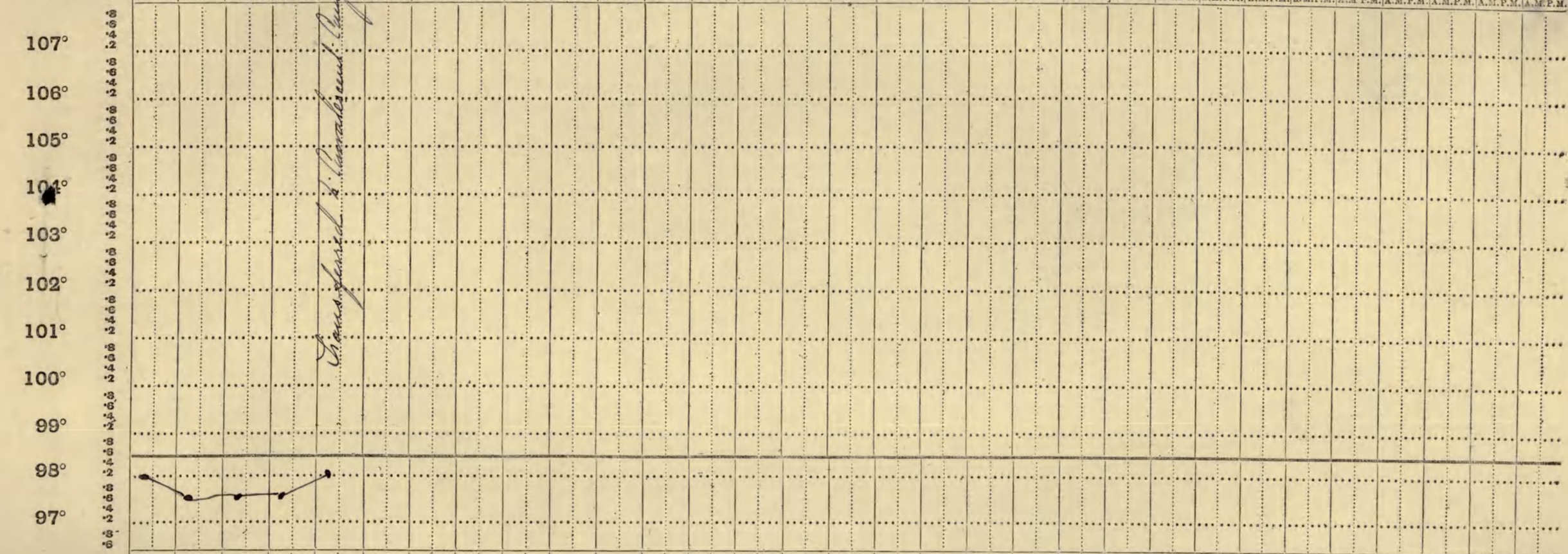
Army Form B. 181.

Corps C. & C. - 2 Fld Bty Military Hospital _____

No. 1478 Rank and Name Pte Luthen Sand Age 32 Service 1-4

Disease Debility Date of admission 20/4/16 Date of discharge 24/4/16. Result Improving.

Dates of Observation	20	21	22	23	24
Days of Disease	1	2	3	4	5
Temperature Fahrenheit	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.
Pulse per Minute	72	76	80	84	
Respirations per Minute	20	20	22	18	
Motions per 24 hours					



(2669.) W9043—1195. 800,000. 12/14. C.P., Ltd. Forms /B. 181/3..

Signature A. Hitchey Nursing Sister In charge of case.

Forms
I. 1237
10

491

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
H 363	1478	Pte	Sutherland	David
Year	Unit.		Age.	Service.
1916	C A S C - 2 Fld Bkry		32	1-4

Station and Date.

Disease Debility

No. 2 CANADIAN STATIONARY HOSPITAL
No. 20
Date 4/16

In hospy for several weeks for anaemia + bronchitis. a couple of weeks ago.
Still sl. cough. gen'l cond. improving.

To be sent back to Corps Camp.

R. B. Kennedy
Capt.

*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.	

19

Forms
I. 1237
10

71541

Aitken

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
H 180	1478	Pte	Aitken	David
Year	Unit.		Age.	Service.
1916	C.A.S.C. 2 Fld Bkry		33.	16 mos 8/12 Sr.

Station and Date.

Disease Anaemia Bronchitis. Debility.

Has had cough + sore chest for part ~~two~~ weeks.
Few rales. Must Expect.

12/3/16

18/3/16 — Pat complains of pus from the nose. Exam - shows no pus at all. and normal condition of nasal passages.

R Gardiner
Major

10:4:16. Rales cleared up. ~~Rapidly~~ Anaemia improving on Pil Blaud.

To be discharged to duty

R H Menzies
Capt.

*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.	

3050

[redacted]port No. D

Clas[redacted] N.C.

Aitken, David
404 Main St. E.,
Toronto.

No. of M. H. C. File	No. of Local File	No. of H. Q. File

No. 1478 Rank Pte, Original Unit 2nd Field Bakery Present Unit C.A.S.C.T.D.

Age 33-8 Height 5 ft. 3 ins. Complexion Fair Eyes Hazel Hair Light Character V. Good

Date of enlistment 19-2-15 Where enlisted Toronto Where seen service France

Ship returned by Olympic Date of arrival 5-11-16 Port of arrival Halifax

Birthplace Canada Religion Wesleyan

Name and address next of kin Wife: Same address.

Cause of disability Cessation of working pay.

Condition which prevents the soldier from earning a full livelihood

I have examined this man and find him fit.

V.H. STOREY CAPT.
C.A.M.C.

Degree of incapacity (Please state in fractions) Eng. Board Canadian Board

Probable duration of incapacity

Is final disability likely to prevent return to previous occupation?

Recommendation of Canadian Board

Destination to which transportation issued Toronto, Ont.

Members of Board

INFORMATION TO BE FURNISHED BY SOLDIER

DEPENDENTS	NAME	AGE	WHERE—IF EMPLOYED	WAGES	STATE OF HEALTH
Wife	Wife				Ill
Children 1	1 Child	3			Good
2					
3					
4					
5					

Occupation prior to enlistment Dentist (Mechanical)

Regular trade or profession do.

Average earnings previous to enlistment $23.00 week Any other income

Name and address of last employer Dr. O.B. Bell, Toronto

Rent per month If purchasing property amount due and annual payment, $ Owns property $

Taxes If Homestead, when is patent due?

If carrying life or accident insurance, annual premium

If in receipt of sick benefits or other insurance—name of society Amt. per mo. $

If unable to follow previous occupation, name preference

At what age soldier left school? What grade, standard, &c., was he in?

Has he taken any Technical or Continuation classes, if so what?

Whether given Vocational Training while in Hospital in England. If so, what subjects?

References

I declare that the above statement is correct.

Witness L.W. BAILEY

Signature DAVID AITKEN.

Date 8-11-16

Recommendation by Interviewer as to classes likely to be of use, and general remarks:

Last Pay Cert. Cr., $ Dr., $ Amount paid at Depot H. Q., $ L. P. C. leaving Depot, $

Amount forwarded to H. Q. Unit, $ Credit Clothing allowances, $

Transf'd to Unit—Date Transf'd Class 1—Date Transf'd Class 3—Date

PENSION—Class..... Amount per year, $..... Period granted for..... Dating from.....

First payment date.....

Form No. 5c.

CLASS 3.—Men having a permanent disability which would not be benefitted by further medical treatment (such disability due to or aggravated by service) and who-e cases will immediately be considered by the Pensions Board with a view to pension.

CLASS 2.—Men whose condition may be benefitted by further medical treatment or rest in a Convalescent Home, Hospital or Sanatorium. If deemed advisable, in some cases the medical officer in charge of the Convalescent Home, Hospital or Sanatorium may grant these men leave to return to their own homes and families for a definite period.

CLASS 1.—Men for immediate discharge without a pension.
(a) Unfit for overseas service but capable to take up their previous civilian occupation.
(b) Disability not the result of service or involving claim as the result of or aggravation by service.

31

540

Report No.	Class	No. of M. D. C. file	No. of Local file	No. of R. Q file

No. Rank Original Unit Present Unit

Age Height in. Complexion Eyes Hair Character

Date of enlistment Where enlisted Where seen service

Ship returned by Date of arrival Port of arrival

Birthplace Religion

Name and address next of kin

Cause of disability

Condition which prevents the soldier from earning a full livelihood

Degree of incapacity (Please state in fractions) Ent. Board Canadian Board

Probable duration of incapacity

Is final disability likely to prevent return to previous occupation?

Recommendation of Canadian Board

Destination to which transportation issued

Members of Board

INFORMATION TO BE FURNISHED BY SOLDIER

DEPENDENTS	NAME	AGE	WHERE—IF EMPLOYED	WAGES	STATE OF HEALTH
Wife					
Children 1					
2					
3					
4					
5					

Occupation prior to enlistment

Regular trade or profession

Average earnings previous to enlistment Any other income

Name and address of last employer

Rent per month If purchasing property amount due and annual payment, $

Taxes If Homestead, when is patent due?

If carrying life or accident insurance, annual premium

If in receipt of sick benefits or other insurance—name of society Amt. per mo. $

Unable to follow previous occupation, name preference

At what age soldier left school? What grade, standard, &c., was he in?

Has he taken any Technical or Continuation classes, if so what?

Whether given Vocational Training while in Hospital in England. If so, what subjects?

References

Witness I declare that the above statement is correct.

Signature.....

Date

Recommendation by Interviewer as to classes likely to be of use, and general remarks:

Last Pay Cert. C., $ Dr., $ Amount paid at Depot H. Q., $ L. P. C. leaving Depot, $

Amount forwarded to H. Q. Unit $ Credit Clothing allowances, $

Transfd to Date—Date Transfd Class 1—Date Transfd Class 3—Date

PENSION—Class Amount per year, $..... Period granted for..... Dating from.....

First payment date

Form No. 5.

DEPARTMENT OF MILITIA AND DEFENCE. 10157/202

WAR SERVICE GRATUITY.

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 David John 2. Surname Aitken

3. Rank Pte. 4. Original Unit 2 Field Bakery 5. Reg. No. 1478

6. Address, in full, to which future payments of gratuity are to be forwarded
404 Main St. East Toronto Ont.

7. Date of enlistment in the C.E.F. Feb 22nd 1915.

8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge Bessie Irene Aitken

9. Relationship of such dependent wife

10. Address, in full, of such dependent 404 Main St East Toronto Ont

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:—
April 1915. — Oct 1916
2 Field Bakery

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 unit and dates of such service no.

14

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 21 months
2nd Field Bakery.

16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department no

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.
1160—D.P.—250M-12-18.

18. Have you had more than one enlistment? If so, give particulars of discharges and re-enlistments and under what regimental numbers and units ..... 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 .....
3 months discharge Pay $159.00.
Pay office Ottawa

20. Have you been issued with a War Service Badge? If so, what class ? ..... no .....

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

22. Are you entitled to receive, 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 ... no .....

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? .... no .....

24. Are you now serving in the C.E.F. ..... no ..... If not, give:—(a) Date of discharge Nov 11th 1916. ..... (b) Reason for discharge had rheumatism & hernia, but took discharge on working pay.

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 ..... no .....

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 .....
France Aug. 1915. Oct 1916.

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: David John Aitken

Place of Residence: 404 main st East Toronto Ont.

Declared before me at: Toronto

This 15th day of June 1919

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

POST DISCHARGE PAY.

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

Certified Correct.

District Paymaster.

MEDICAL HISTORY SHEET.

ORIGINAL

No Card

Surname Aitken Christian Name David

Examined on 18th day of Feb 1915 at Toronto

Birthplace City or Town Parkhill County Huron County

Apparent age 21

Trade or occupation Baker

Height 5 Feet 2½ Inches.

Weight 125 Lbs.

Chest measurement Minimum 31 inches. Maximum expansion 33½ inches.

Physical development Fair

Small-Pox Marks Nil

Vaccination Marks Arm Right. Left. 1 Number 1

When Vaccinated last 10 yrs ago

(a) Marks indicating congenital peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

Approved by F. R. M. Walker

Rank Lieut. A.M.C. M.O.

Date	Fit or Unfit	Examined for Re-engagement,
		6 OCT 1916 M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date	Result	Vaccinations.
Mar 5/15		F. M. Walker M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
22/2/15		M.O.
27/2/15		M.O.
4/3/15		M.O.

ASST. DIRECTOR MEDICAL SERVICES No MAR 9 1915 2nd DIVISION

Enlisted on 18th day of Febuary 1915 at Toronto

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	Field Bakery C.O.S.C.	1478		Feby 18th/15
Transferred to..				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.

The Medical History Sheets of all men proceeding overseas must be returned by the Officer commanding their unit to the Nominal Roll when they leave England.

H. Bruce Scott Lieut.-Col. In Charge of Reo Centre

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.

CANADIAN

Surname..... Christian Name.....

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital. Day	Month	Year	Dates of 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 2 Can. Stat. Hosp. Boulogne		12	3	16	11	4	16	~~Aen~~ Anaemia & Bronchitis	30	Discharged to duty.	A190-1, A214-1
No 2 Can Stat. Hosp. B'logne		20	4	16	24	4	16	Debility	4	To No 1 Con. Dep. Boulogne	A221 - A224
No 1 Conv Dep. Boulogne		24	4	16	28	4	16	"	4	Rejoined Unit.	A230

Rank | Name AITKEN, David. | Reg'l No. 1478

Unit 2nd. Fld. Bakery | If in perm. Corps, What Unit? No | Married or Single Married

Place and Date of Enlistment Toronto, 19th. Feby. 1915. | Place of Birth Parkhill, Ont.

Name and Address, Next-of-Kin Bessie Aitken, Parkhill, Huron County, Ontario.

Relationship

Assigned Pay Monthly $ | Payable to

Relationship

Separation Allowance $ | Payable to

Relationship

Discharge, Date and Place | Reason | Character

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
		Emb for England SS Missanabie		24.4.15	
28.8.15	O/C 2nd Fld Bky	Present with Unit	West Sandling	9.8.15	Nom Roll
14-12-15	casualties	Adm Hosp. Myalgia	11 Gen Hos. Boulogne	10-12/15	cas list 119-L of C
21-12-15	" "	Discharged (unfit)	Base Details	15-12/15	
29-12-15	" "	Returned to duty.	In the fld	15 12/15	cas list 126. L of C
21-3-16	L of C casc	Adm No 2. C. Stat. Hos	Boulogne	12.3.16	C L A 190. Leucaemia Bronchitis
		Embarked for Overseas		16-9-15	Part II 0
18-4-16	L of C	Discharged to duty.	Field	11-4-16	C. L. A 214(1) Am. Bron
27-4-16	-"-	Adm No 2 Stat Hosp	Boulogne	20-4-16	C. L A 221. Debility
1-5-16	"	Transferred to No 1 Con Dpt	do	24-4-16	C L A 224 do
6-5-16	"	Discharged to Details Rejoined unit from B Dpt	Field	28-4-16 28-4-16	C L A 230. "

Report		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place	Date	REMARKS Taken from Official Documents
Date	From whom received				
10.10.16	2.7 Bky.	Trans to 6 A.S.C. W.D.	Field	3.10.16	PC II DO 44
6-10-16	C.A.S.C. W.D	To S from O/seas	S Cliff	5-10-16	P'II 106 280.
27.10.16	"	SOS having proceeded to Canada for discharge		24.10.16	— .. — 301 Auth DO 5574
	Dis. Depot	Finally discharged	Quebec.	13-11-16	N.R. 81-404 Main St. Toronto Ont

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 11a.
60m.—12-15.
1772—39—818.

Sheet No. 2. Mrs Bessie Aitken Wife

Name of Soldier Aitken D.

L. L. Job 89002.—Req. 6213.

Month.	Year.	Cheque No.	Amt.	Pte	Remarks.
April	1916	F235	20 —	20	D
May 30		G.4666	20	20	
June		B1623	20	20	
July		J9751	20	20	
Aug.		A 11156	20	20	
Sept.		B14579	20	20	
Oct.		B17997	20	20	
Nov.		B21247	20	20	
Dec.		~~B24840~~	~~20~~	B. 24840 Cancelled. Acct closed	
Jan.	1917		160	Reid Troopship. 24/10/16	
Feb.		Fwd	268		
March			428		
April					
May					
June					
July					
Aug.					
Sept.					
Oct.					
Nov.					
Dec.					
Jan.	1918				
Feb.					
March					
April					
May					
June					
July					

ACCOUNT CLOSED

DATE..... PER W

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier.....

PAYMENTS.

Month.	Year.	Cheque No.	Amt.	Remarks.
Aug.	1918			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1919			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1920			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				

L. L. Job 71782—M. & D. 5292.

M. F. W. 71
85m.-12-14.
H. Q. 1772—39-819.

18-2-15

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

2-40

Name Mrs Bessie Aitken

Address ~~Parkhill,~~ ~~84 Bismarck Ave~~ ~~Toronto~~ ~~Ont.~~ ~~Middlesex County.~~ ~~Ontario Canada.~~

Relation to Soldier wife, child or mother } Wife. 404 Main St East Toronto, Ont!

Name of Soldier Aitken, D.

Regtl. No.

Rank Pte.

Corps Field Bakery C. A. S. C.

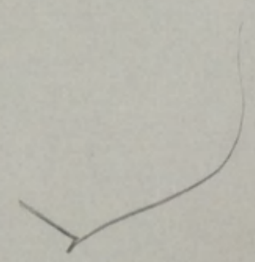
To what Corps belonging when called out }

PAYMENTS

Month	Year	Cheque No.	Amount	REMARKS
Aug.	1914			D
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March		H 1311	28 -	28
Apl.		H 2880	20 -	20
May		H 3574	20	20
June		E 10379	20	20
July		E 12279	20 -	20
Aug.		E 14081	20	20
Sept.		E 15724	20	20
Oct.		E 18108	20 -	20
Nov.		J 14840	20	20
Dec.		E 22619	20	20
Jan.	1916	E 25159	20	20
Feb.		E 27745	20	20
March		F 30551	20	20
			268	P.D.P 15-6-17

COPIED FOR I CASUALTIES.

ACCOUNT CLOSED
DATE..... PER..... W



MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12a.
60m.—12-15.
1772—39—819.

Sheet No. 2. Mrs Aitken

L. L. Job 89002.—Req. 6213.

PAYMENTS.

Name of Soldier Aitken, D. 436
Field Bakery C.A.S.C.

Month.	Year.	Cheque No.	Amt.	Remarks.
				Rd. $20.00 4/6 Jan
April	1916	J210	25-	
May		K3407	25	
June		L66341	25-	
July		~~a 7183~~ L 101866	~~25~~ 10	make July chq. $10.00 to adj Jan
Aug.		a 11165	20	
Sept.		B15-269	20	
Oct.		B19603	20	
Nov.			275	
Dec.			420	Account closed. Rtd. Troopship 24-10-16. F.X. 31/10/16.
Jan.	1917			
Feb.				
March				Stop Payment 3.m.11 10/16 M.H.R.
April				
May				P.D.P. 29/6/17 O.K.
June				F.X 17/7/17
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier .....

PAYMENTS.

Month.	Year.	Cheque No.	Amt.	Remarks.
Aug.	1918			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1919			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1920			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				

L. L. Job 704[illegible]-Req. 5220.

M. F. W. 12.
10m. 11-14.
H. Q. 1772-39-819.

MILITIA AND DEFENCE

2nd Contingent

ASSIGNED PAY

OVERSEAS CONTINGENTS

~~435~~

Ewv

To Whom Mrs Aitken.

Address ~~Parkhill~~ 404 Main St. E. ~~Middlesex Co.~~ Ont.

~~81 Bismarck Ave.~~ Toronto Ont

Rate $25.

MAY 1 1915

$20.00 May 1st. 2 M. 15 5/16 Jan 4 7/16

By Whom Assigned Aitken. D.

Regtl. No. 1478

Rank Pte

Corps Field Bakery. C.A.S.C.

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				1 11/16 stop payment \ Discharge to Canada
Nov.				
Dec.				3 M. 11 10/16 MHR 9 4/16
Jan.	1915			
Feb.				
March				
April				
May		N 1087	25 —	
June		O-2196	25 —	
July		U 1399	25 —	
Aug.		R 5267	25 —	
Sept.		R 1223	25 —	
Oct.		Z 8230	25 —	
Nov.		P 4453	25 —	
Dec.		R 10649	25 —	
Jan.	1916	T 11757	25	
Feb.		T 12900	25	
March		~~X 16028~~	~~25~~ —	X 16028 Cancelled
		X 16930	25	

E

Name Aitken D Pte A

M. F. W. 41
1 0M—7-16
1772-39 889.

540

Regimental No. 1478

Unit 2nd Fuld Bty C.A.S.C.

S/D $20.00 18 2/15 to 30 11/16

Date of enlistment

Place of "

Married (yes or no) yes

Amount of pay assigned monthly $ 25.00 1 8/7 to 30 11/16
20.00 1 5/6 " 31 10/16
(same)

To whom payable

Olympia 5 11/16

Name and address of next-of-kin 404 Main St East Toronto

H.Q. 649-A-2348

Mrs Bessie Aitken
404 Main St East
Toronto

Date and place discharged 13 11/16 D D Quebec

Reason for discharge

Character on discharge Civil Clothes Issued
Cessation Wkg Pay

Job 5351—M. & D. 6880.

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	Remarks, Casualties, etc.
	10 10/16													7 60		Engt. P.C.
11 10/16	13 11/16	34	1.00	34 00	34	10	3 40		37 40					29 80	37 40	D.D. Quebec Pd
1 11/16	10 10/16	284	.50	142 00	Wkg Pay											H.Q. 3150-64-4-Vol 2
								25	167							app. apr 1915
										As 18/7	~~167~~ 167 ✓			~~10~~	167	~~S.A. 13.11.16-30.11.16~~

EAP 31 10/16

Name.....

M. F. W 41
1 0M—7-16
1772-39 889.

Regimental No.

Unit

Date of enlistment

Place of "

Married (yes or no)

Amount of pay assigned monthly $

To whom payable

Name and address of next-of-kin

Date and place discharged

Reason for discharge

Character on discharge

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date					

10157-202

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

153-D-1.

Name Aitken, David
Surname Christian Name

Regimental Number 1478 Rank Pte.

Unit C.A.S.C. form. 2nd F.B.

Original Unit

District where paid Ottawa

Date of Discharge 13-11-16

P. D. P. Filing Number 7A7.

Address (in full) 404 Main St.E.
Toronto, Ont.

Rates:—Regimental pay $ 1.00 per diem: Field Allowance $ .10 per diem. Separation Allowance $ 20.00 per month.

L. L. 22573—M. & D. 8009.

Total Credits 91 days	FIRST PAYMENT Cheque No. A	Date	Amount 30 days	SECOND PAYMENT Cheque No. B	Date	Amount 30 days	FINAL PAYMENT Cheque No. C	Date	Amount 31 days	Balance Over-payments to be Recovered	Total Amount Paid
160 10	2981	23/8/17	53 00	2906	24/9/17	53 00	2879	24/10/17	54 10		160 10
~~578 15~~	~~G. 7527~~	~~29.2.19~~	~~70 00~~								
~~578 15~~	~~G. 7528~~	~~29.2.19~~	~~30 00~~								
~~524a 2nd~~	~~G. 41876~~	~~6 3/19~~	~~70 00~~								
~~524a 2nd~~	~~G. 41877~~	~~6 3/19~~	~~30 00~~								

M. F. W. 127.
50M—6 17.
1772 39-1140.

Remarks:

1157/nov 153-D-3

70 500.00

30 160.10

Less P. D. P. Claimed 339.90

Less further deb't balance

Net due paid on account 339.90

	1	578	7527	70 00	578	7528	30 00	29-2-19
29-2-19	2	523A	41876	70 00	524A	41877	30 00	6-3-19
6-3-19	3	513B	409726	49 90	513B	409727	30 00	5-4-19
5-4-19	4				658C	454086	30 00	8-6-19
	5					485606	30 00	
	6							
	7							
	8							
	9							
	10							
						Total		

Mrs B. Aitken
Same add.

404 Main St E
Toronto

Rank | Name AITKEN, David. | Reg'l No. 1478

Unit 2nd. Fld. Bakery | If in perm. Corps, What Unit? No | Married or Single Married

Place and Date of Enlistment Toronto, 19th. Feby. 1915. | Place of Birth Parkhill, Ont.

Name and Address, Next-of-Kin Bessie Aitken, Parkhill, Huron County, Ontario.

Relationship

Assigned Pay Monthly $ ~~25.00~~ 1/5/16 20.00 Pl. 44 3/5/16. Payable to as above.

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place To Canada Reason WOSF. Character

PAY OFFICE, N.Z. BRANCH, NOV 15 1916, CANADIAN CONTINGENT

Date From 1915	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.
																	Paid in Canada 1.60 bal from Can a/c
1/4	30/4	30	1	30 .	30	10	3 .	1 60	49 60			24 60	25 .		49 60	. .	3rd bl Pay.
1/5	31/5	31	1	31 .	31	10	3 10	15 50	49 60			20 .	25 .		45 .	4 60	1.60 underpaid in Feb see Paymasters observation Feb & Mch
1/6	30/6	30	1	30 .	30	10	3 .	15 . 4 60	52 60			10 .	25 .		35 .	17 60	" "
1/7	30/7	31	1	31 .	31	10	3 10	15 50 17 60	67 20			30 .	25 .		55 .	12 20	" "
								12 20				60 .					
								1 60									Difference of Exchange
1/8	31/8	31	1	31 .	31	10	3 10.	15 50 13 80	63 40.			19 47	25 .		44 47	18 93	3rd bl Pay.
1/9	30/9	30	1	30 .	30	10	3 .	15 18 93	66 93.			6 10	25 .		31 10	35 83	" "
1/10	31/10	31	1	31 .	31	10	3 10	15 50 35 83	85 43.			4 36	25 .		29 36	56 07	" "
Nov 1	Nov 30	30	1	30 .	30	10	3	56 07 15 -	104 07			28 84	25		53 84	50 23	" "
Dec 1 1916	31	31	"	31 -	31	"	3 10	50 23 18 50	99 83			17 65	25 -		42 65	57 18	
Jan 1	31	31	"	31 -	31	"	3 10	57 18	91 28			3 49	25 -		28 49	62 79	
Feb 1	29	29	"	29 -	29	"	2 90	62 79	94 69			56 55	25 -		81 55	13 14	
Mar 1	31	31	-	31 -	31	"	3 10	13 14	47 24			3 49	25 -		28 49	18 75	
				366			36 60	18 75				55	300.				
				366			36 60	140 70	543 30			224 55	300 .		524 55	18 75	
												224 55					

BALANCE TRANSFERRED TO NEW BOOK

Checked

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						

-2146.—1,250,000.—2-15.—C. & G. Forms B. 103/1

Army Form B. 103.

Casualty Form—Active Service.

39-a-101

Regiment or Corps 2nd. Field Bakery C.A.S.C.

Regimental No. 1478. Rank Pte. Name Aitken David.

Enlisted (a) Feb. 23rd 15 Terms of Service (a) Period of War Service reckons from (a)

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.
		Disc'm'kd	Havre	14/9/15	
10/12/15	D.C.M. No 11 Genl.	Admitted No 11. General "Myalgia" sl.	No 11 Genl.	10.12.15	No 268 W 3034 df. 10-12-15
14/12/15	No 1. Conv. Depot	Admitted No 1. Convl. Depot. "Sick"	No 1 Conv. Depot	14.12.15	No 154 W 3034 df. 14.12.15
15/12/15	No 1 Conv. Depot.	Transferred to Base Details Unfit.	Base Details	15.12.15	No 158. W3034 df. 15.12.15
18/12/15	O.C. Bakery.	Returned to duty	Unit	15.12.15	B.213 df. 18.12.15 D.C.I. 32 df. 23-12-15.
12/3/16	O.C. 2 Can. Stat. Hos.	Anaemia, bronchitis. Admitted	2 C. Stat. Hosp.	12-3-16	W3034 No. 314.
11-4-16.	do.	Anaemia, bronchitis. Discharged	to Unit (duty)	11-4-16.	W3034 No. 344.
15-4-16	O.C. 2nd. Fd. Bakery.	Returned to duty from 2 Can. Hosp.	Field.	11-4-16	B213a. D. Cas. Sheet 22/4/16.
20.4.16	O.C. 2 Can. Stat. Hosp.	Debility. Admitted	2 Can. Stat. Hosp.	20.4.16	W3034 No. 353.
24/4/16	do.	Debility. Transferred to	No. 1 Conv. Depot	24.4.16	W3034 No. 357.

(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				
23.4.16	O.C. No. 1 Conv. Depot.	Sick. Admitted	1 Conv. Depot.	23.4.16	W3034 No. 286.
28.4.16	O.C. No. 2 Fld. Bakery.	Reformed Unit from Hospital	Field.	28.4.16	B213. D. Cas. Sheet No. 63 4/5/16.
28.4.16	O.C. No. 1 Conv. Depot.	Fit. Discharged to	Base Details.	28.4.16.	W3034 No. 291.
30.9.16	O.C. CBD	Taken on Strength C.B.D	Havre	30.9.16	Nom Roll D.B.S. 83 of 4-10-16.
3-10-16	O.C. CBD	Trans to Can. Train. Divi for discharge re working pay.	Shorncliffe	3.10.16	Nom Roll Pt 2 O No 44 of 10/10/16
					R. McKeesh Lieut. For Officer i/c Can. Records, Canadian Section, G.H.Q. 3rd Echelon.
6.10.16	Casc to	S.S. from O/Seas	Sclffe.	5/10/16	Pt II No 280 Lillian Northcote Lieut. for Colonel i/c Records, C.E.F.
		Discharged from service cessation of working pay. D.O. 3734 dated 23/11/15. Glenn Ferguson for Major Ob. & A. S.C.D.			

CERTIFICATE OF SERVICE

(Issued following loss of Permanent Discharge Certificate M.F.B.39)

This is to certify that No. 1478 (Rank) Private

Name in full AITKEN, David John

Enlisted in 2nd Field Bakery., C.A.S.C.

Canadian Expeditionary Force on the 19th day

of February 19 15

He served in CANADA ENGLAND & FRANCE

with the 2nd Field Bakery., C.A.S.C.

and was discharged at Quebec., P.Q.

on the 13th day of November 19 16

by reason of CESSATION OF WORKING PAY

His conduct and character while in the Service were Good

Medals and Decorations, etc 1914-15 STAR

BRITISH WAR & VICTORY MEDALS

DESCRIPTION ON DISCHARGE

Age 33 Years

Height 5'3"

Complexion Fair

Eyes Hazel

Hair Light

649-A-2348

H.Q.

(W.E.L.Coleman), Major,
Officer i/c Records,
Officer i/c Records
for Adjutant-General.
for Adjutant-General.

11th September 33

Ottawa day of 19

NOTE- This Certificate, if lost, will not be replaced.

Number. 1478 Rank. Pte

Surname. AITKEN

Christian Names. David

Unit. C.A.S.C. Theatre of War. France

Date of Service. 16-9-15

Remarks.

Latest Address. 404 Main St E
Toronto East
Ont.

Roll No. B

Page 1997

Ill Baker
Ill

No 1474. RANK Pte. NAME Aitken D.

T. O. S. UNIT Discharge Depot. Quebec

M. D. 21.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916 Oct 11	1916 Nov. 13	✓	2nd T. B. Co. S.C.	

Name AITKIN D. *Rank* Pte. *Reg. No.* 1478.

Unit C.A.S.C. No.2 Field Bakery.

Next of Kin Canada.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1915.						
Dec.10.	No.11 Gen.Hosp.Boulogne.		Myalgia slt.	119 E		
" 15	No.1.Con.Depot, Boulogne.		ditto	121 E		
	Discharged to Base Details UNFIT					
1916. 15.	Rtd to duty Ex Con.Depot.		Ditto	126		
Mar.12.	No.2.Can.Stat.Hosp.Boulogne.		Anaemia, Bronchitis A			
Apr.11.	Discharged to Duty		do.	A214.E	190.E	
do. 20.	No.2.Can.Stat.Hosp.Boulogne.		Debility.		A221.E.	
do.24.	Trans to No.1.Con.Dep.Boulogne.		do.		A224.E	
" 28.	Wlisch to Base Hdls		do		A230.	
" 28.	Rejoined unit		do		A230.	

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

SURNAME. Aitken

CARD NO. S.A.S. Dis. 13/11/16 #5

CHRISTIAN NAMES David

FOLL.

REGL. No. 1478 RANK Pte.

UNIT C. A. S. C. (Field Bakery)

FORMER CORPS Nil.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL Aitken, Mrs. Bessie

RELATIONSHIP TO SOLDIER Not Stated.

ADDRESS ~~Park Hill, Ont.~~

A.A.P. 9/5/16 404 Main St E. Toronto, Ont

COUNTRY OF BIRTH Canada Park Hill, Ont. DATE Feb. 22nd. 1884

PLACE OF ATTESTATION Toronto, Ont. DATE Feb. 19th. 1915

O/S 24-4-15

P/C Oct 24/16 (J. 284)

From Halifax, Per S.S. "Missanabie" — 24-4-15

MARRIED Yes SINGLE WIDOWER

TRADE OR CALLING Baker RELIGION Wesleyan

DESCRIPTION.

APPARENT AGE 31 YEARS MONTHS

HEIGHT Not Stated FEET INCHES

CHEST MEASUREMENT Not Stated INCHES EXPANSION Not Stated INCHES

COMPLEXION Fair EYES Grey HAIR Light Brown

DISTINGUISHING MARKS Not Stated.

MEDICAL EXAMINATION. PLACE Toronto, Ont. DATE Feb. 19th. 1915

Present Address:- Not Stated

H. Q. FILE No. 649-

NAME Aitken H.

REGT'L No. 1478.

RANK AND CORPS Pte C. A. S. C. # 2 Fld. Bakery

CABLE	
NO.	DATE

NATURE OF CASUALTY
L. of Comm.

NO. 205

xxx FOLL. x

L. L. Job 87318—M. & D. 6106.

M. F. W. 42—25m.-10-15.
H. Q. 1772-39-893.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
119	#11 Gen. Boulogne	10-12-15	Myalgia. Slt.
121 (1)	DC #1 Convt Hosp. Boulogne	15-12-15	Myalgia Slt.
	Mis. to Base Details, Unfit		
126	DC #2 Can. Fd. Bakery rep.	15-12-15	Myalgia. Slt.
	Ret. to duty from #1 Convt Hosp.		
A 221.	#2 Can. Stat. Boulogne	20-4-16	Debility

REGT'L NO 1478.

H. Q. FILE NO. 649-

NAME Aitken W.

RANK AND CORPS Pte C. A. S. C. #2 Fd Bky.

FOLLOWS

No. 195x.

FOLLOWS

CABLE	
No.	DATE

NATURE OF CASUALTY

L. of Comm.

L. L. Job 90581—M. & D. 6314.

M. F. W. 42—50M—1-16.
H. Q. 17-2-39-893.

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
A 190 (1)	#2 Can. Stat. Boulogne	12-3-16	Anaemia bronchitis
A 214 (1)	Disch. to duty	11-4-16	" "
A 224.	#2 Can. Stat. Boulogne Trans to #1 Const. Dep of Boulogne	24-4-16	Debility
A 230.	O.C. #2 Fd. Bakery rep. Rej. unit from Base Details	28-4-16	Debility
A 230.	Disch to Base Details Et #1 Const. Dep. Boulogne	28-4-16	Debility

D.M.S. 1300.

Surname	Christian Name or Names	Reg. No.
Aitkin	D	1478.

Rank	Unit	Co.	Troop	Batty.
Pte.	C.A.V.C.	102 Field Bty		

Hospital	Date of Admission
No 11 Gen Hosp Boulogne	10.12.15

Transferred 1 Convo Depot. Hosp. 15.12.15.

2 Can Stat. Boulogne - Hosp. 12.3.16.

do. Hosp. 20.4.16.

1 Convo Dep " Hosp. 24.4.16.

Diagnosis Myalgia Slight

(1)

Later Diagnosis (if changed)

(2) Anaemia, Bronchitis.

(3) Debility.

Additional Diagnoses: If more than one state present

DISPOSITION

		Date
	To Base details. unfit.	6.12.15
	To Duty.	15.12.15.
C.L. 17.12.15	#119	
" 29.12.15.	126.	
" 21.12.15.	121.	
" 21.3.16.	A.190.	
" 18.4.16.	A.214.	
" 27.4.16.	A 221.	
" 1.5.16.	A.224.	
" 8.5.16.	A.230.	

REMARKS

Dis. to duty. 11.4.16.

Rej. unit from Base Details 28.4.16.

Dis. to Base Det. 28.4.16.

3 & 6 pr.

EPITOME OF HOSPITAL TREATMENT.

	Hospital	Adm.
1.		
2		
3.		
4.		
5.		
6		
7.		

S.S. Olympic 5-11-16. R.O. 18-11-16.

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 depôt 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, despatch, 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.

(40)

M

Army Form B. 268.

Proceedings on Discharge.

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

No. 1478. Army Rank Private.

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

Corps C.A.M.C.

Battalion, Battery, Company, Depôt, &c. (2nd Field Bakery).
(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 13th Nov. 1916

Place of discharge Canada Quebec Discharge Depot.

1. *Description at the time of discharge.*

Age 33 years 8 months
Height 5' feet 3 inches
Chest measurement { girth when fully expanded 36 ins. / range of expansion 3 ins.
Complexion Fair.
Eyes Hazel
Hair Light
Trade Mechanical Dentist.
Intended place of residence (To be given as fully as practicable) 404 Main St. East Toronto. Ont. Canada

Descriptive marks.
Mole on back of neck
Impression on left of forehead

Donald B. Lieut-Col. Major
O.C. C.A.S.C. T.D.

(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 Cessation of working pay under D.O. 3/34 d. 23.11.16.

D. W. Allen
LIEUT.-COLONEL,
A.A. & Q.M.G.
FOR GENERAL OFFICER COMMANDING
MILITARY DISTRICT No. 2

(The cause of discharge must be worded as prescribed in the King's Regulations and in accordance 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 :— Very Good. Donald B. Lieut-Col. Major.
O.C. C.A.S.C.

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

1st Class Mechanical Dentist.

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.

Donald B. Lieut-Col. Major.
Initials of Commanding Officer.
O.C. C.A.S.C. T.D.

Army Form B. 2088 has been issued to*

Wt. W. 13141/283 430,000 3/15 M.&C. Ld.

Forms B. 268

*Strike out if not applicable.

[OVER

Mess. Comp. 31/10 E.P.

Cadet 23/11/16

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?

Nil.

G. Dunb. Major ~~Lieut-Col.~~

Classification for service, or proficiency pay ... ... Class O.C. C.A.S.C. T.D.

6. Campaigns, Medals and Decorations

Nil.

G. Dunb. ~~Lieut-Col.~~ Major

O.C. C.A.S.C. T.D.

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) Shorncliffe.

(Date) October 6/16

G. Dunbar Major ~~Lieut-Col.~~

C.A.S.C. TRAINING DEPOT

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*) DISCHARGE DEPOT NOV 12 1916 QUEBEC

(*Date*)

D. Aitken (*Signature of Soldier.*)

J. Cuthbert, (*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 Oct. 6/16 (the date to which the record of service is completed) 1 years 196 days.

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

Total ... . " ..... G. Dunb. Major ~~Lieut-Col.~~

O.C. C.A.S.C. T.D.

11. *Confirmation of discharge.*

The discharge of the above-named man is hereby confirmed for Nov. 13th 1916 (date)

(Place) DISCHARGE DEPOT NOV 14 1916 QUEBEC

(Date)

Signature A. Slater CAPT. for O. C. Discharge Depot, Quebec.

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.)

None.

D. Aitken

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

Date	Brief details, and signature
	VACCINATIONS
Mch 5/15	F.M. Walker
	ANTI-TYPHOID INOCULATIONS ETC
22/2/15	
27/2/15	
4/3/15	

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

CASC.NE

J.D.

DUPLICATE.

no card CR 88

1478

Army Form B. 178.

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

MEDICAL HISTORY of

Surname A I T K E N *Christian Name* David

TABLE I.—GENERAL TABLE.

Birthplace .. Parish Parkhill County Huron County

Examined .. .. .. on 18 day of February 1914. at Toronto

Declared Age .. .. 31 years days.

Trade or Occupation .. Baker

Height .. .. .. 5 feet 2½ inches.

Weight .. .. .. 125 lbs.

Chest Measurement: Girth when fully Expanded 31 inches. Range of Expansion 33½ inches.

Physical Development .. Fair

Vaccination Marks: Arm .. Right 1 Left; Number 1

When Vaccinated .. .. 10 years ago

Vision .. .. .. R.E.—V= L.E.—V=

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

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

Approved by .. (*Signature*) Frank M. Walker

(*Rank*) Lieut A. M. C. *Medical Officer.*

I certify the foregoing to be a true copy of an original entry at the Medical History Sheet of this man.

for the Officer in Charge of Records C.A.M.C. Canadian Contingents.

Enlisted .. .. .. at Toronto on 18 day of February 1915

	Corps.	Regtl. No.
Joined on Enlistment ..	Field Bakery C.A.S.C.	1478
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*) W.R. WARD,

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

W. P. Griffith & Sons Ltd., Printers, Old Bailey,
[634] 200m 5/15ss 45 59

Forms B. 178.

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				
No 2 Can. Stat. Hosp. Boulogne	12	3	16	11	4	16	Anaemia & Bronchitis	30	Disc. to duty	A190-1, A214-1
No 2 Can Stat. Hosp. Boulogne	20	4	16	24	4	16	Debility	4	To No 1 Con. Dep. Boulogne	A221 A224
No 1 Con. Dep. Boulogne	24	4	16	28	4	16	"	4	Rejoined Unit.	A230.

Married or Single: Married

Place of Birth: Parkhill, Ont.

Name and Address of Next of Kin: Bessie Aitken
Parkhill, Huron County, Ontario

Relationship of Next of Kin:

Name and Address of Next of Kin:

Relationship of Next of Kin:

Separation Allowance Monthly $: Effective (Date):

Payable to:

Relationship of Dependant:

Casualties, Promotions, &c.

Particulars	Effective Date	Authority
Discharged to Canada.	10/10/16	D.O. 3734. 23/11/15

Admissions to Hospital, &c.

Date Admitted	Date Discharged	V. or A.	Name of Hospital
			Nil

Reg'l No. 1478 Rank Pte Name Aitken David. Div 2

If in Permt. Corps What Unit: — Unit 2nd Field Bakery Transferred to Non effect Date 11/10/16 Authority D.O. 3734

Permanent Force Allowances: Transferred to: Date: Authority:

Place of Attestation: Transferred to: Date: Authority:

Date of Attestation: Transferred to: Date: Authority:

Assigned Pay Monthly $ ~~10.00~~ ~~5.00~~ Stopped. Date Effective 1/5/16. ~~1/11/15~~ Pl. 44 3/5/16.

Payable to Bessie Aitken Parkhill Huron County Ont. Relationship:

Assigned Pay Monthly $: Date Effective:

Payable to: Relationship:

Stop-Payment Form (Assigned Pay) Rendered (Date) 10/10/16. Effective 1/11/16. Reason Discharged to Canada.

Discharge Date and Place 10/10/16 to Canada. Reason and Authority Cessation of Ldg pay. D.O. 3734. 23/11/15. H-39-B-305.

Account Transferred to Non-Effective Branch (Date) 15/11/16. effect. 11/10/16.

Account Transferred to Officers' Pay Branch (Date):

W.P.S.F.

Date 1916	Pay No. of Days	Pay Rate	Pay Amount $	Pay Amount c.	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount $	Field Allowance Amount c.	Working or Special Pay No. of Days	Working or Special Pay Rate	Working or Special Pay Amount $	Working or Special Pay Amount c.	Assigned Pay Credits	Other Credits	Total Credits	Acquittance Rolls 1 No	1 Date	2 No.	2 Date	3 No.	3 Date	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 31															543 30.															524 55.	18 75				
Apl 1-30	30	1.20	30 -		30	.10	3 —								33 —	1650								4 36		174		25 -		29 36	22 39				
May-31	31	1.00	31	00	31	10	3 10								34 10											698		70 00		37 74	19 75				
Jun 1-30	30	1.00	30	-	30	10	3								33											425		20		24 25	28 00.				do 4-2 Fld Bakery tel. 1916 20 from a/Pell. 685 chgd 4 39 planed the 3.49
July 1-31	31	1	31		31	10	3 10							90	35 00											426		20		24 26	38 74				
Aug 1-31	31	1	31	-	31	10	3 10								34 10													20		20 00	52 84				
Sept 1-30	30	1.00	30	00	30	10	3 00.								33 00.											436.									
															0											436		20		41 79.	44 05.				
Oct 1-10	10	1.00	10	00	10	10	1 00.								11 00.											436									
																										436.									
																										533		20		57 78.		273.			
															756 50											1947				757 23		273			
																										8524									
Jan 1917														273	273															273		Nil			

Payments taken from payroll.

Balance transferred to N.E. Branch

Checked Balance for 1916

N.E.

Discharged to Canada 10/10/16. Cessation of Ldg pay under D.O. 3734. 23/11/15. H-39-B-305. a Sta Form rendered 10/10/16. effect 1/11/16.
Trans N.E. Branch
Transd to "Canada Disc'ge a/c"