REGIMENTAL DOCUMENTS

NAME AITKEN, MARY ELIZABETH REGT. NO. N/Sister UNIT C.A.M.C. H. Q. FILE NO. 3214

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
3X	ATTESTATION PAPER (M.F.W. 23, 133, or 51) 3		Dir's Dept to Federal Service Rec'd	27/7/19		DEATH
1	CASUALTY FORM (M.F.W. 54 or A.F.B. 103) 2			16/7/19	Ref Pers 869	Category
	TRAINING HISTORY SHEET (M.F.W. 113)					
	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
2X	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178) 2					DISCHARGE
1	DENTAL HISTORY SHEET (M.F.B. 465) 1					Category
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					Demob.
1	MEDICAL EXAMINATION (M.F.W. 129)					
	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
	LAST PAY CERTIFICATE (M.F.W. 44)					
	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					3
1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
1	M. F. W. 2591					14-8
1	Disp. Cert.					
2	Misc					14-8
1	Cas. Card					11-8
1	R 149					
2	A 75 & 37					

Ref S.S. Olympic 2-749

W. 2589
100M 11-18
1772-36-1377

BASE HOSPITAL
MILITARY DISTRICT No. 2

ORIGINAL

MEDICAL HISTORY SHEET.

Surname Authen *Christian Name* Mary Elizabeth

Examined { on 13th day of June 1917
at Base Hospital Toronto.

Approved by Jas. W. Barton
Rank Major M.O.

Birthplace { City or Town Paris
County Brant

Apparent age 22 yrs.

Trade or occupation Nurse

Height 5 Feet 8 Inches.

Weight 130 lbs. Lbs.

Chest measurement { Minimum 33 inches.
Maximum expansion 36 inches.

Physical development

Small-Pox Marks None

Vaccination Marks { Arm ~~Right~~ ~~Left~~
Number One

When Vaccinated last May 18th

(a) Marks indicating congenital peculiarities or previous disease None

(b) Slight defects but not sufficient to cause rejection None

Date.	Fit or Unfit.	Examined for Re-engagement.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date.	Result.	Vaccinations.
		M.O.
May 18/17		G.B. Porter Capt. M.O.
		M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.
May 18/17		M.O.
25/17		G.B. Porter Capt. M.O.
June 3/17		M.O.

Enlisted on 8th *day of* March 1917 *at* Toronto

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment				
Transferred to	Cam C.			8th March.

BASE HOSPITAL
MILITARY DISTRICT No. 2

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.

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.
400M.—1-16.
H. Q. 1772-39-439.

Surname Cuthers Christian Name Lucy Elizabeth

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. 4 Canadian Gen. Hospital, Basingstoke.		22	10	18.	31	10	18	Abrasion of Left Knee.	9	Has fallen from a bicycle - rubbed skin off Left knee - injured Left shoulder X Ray showed nothing abnormal. After a few days rest able to go back to duty.	H.W. Wilson Major
No. 4 Canadian Gen. Hospital, Basingstoke.	11	2	19.	27	2	19	Acute Catarrhal Otitis Media - Acute Naso-pharyngitis	16	Admitted to hospital ~~with~~ complaining of earache - postnasal dropping and impaired hearing - aural condition keeping patient awake at night - on Exam - R drum - injected but not bulging - Nasopharynx acutely injected with considerable tenacious purulent discharge - Lateral walls of pharynx & post wall - injected & swollen - Condition has improved - ears clear, nasopharyngeal & pharyngeal condition has cleared up - patient feeling well - Chest Exam - & X ray of Chest neg. for TB.	G.D. Lawson Capt. G.D. Lawson Capt.

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

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

No. ..... Rank N. S. Surname AITKEN

(Given name in full) MARY - ELIZABETH -

Unit or Corps C.A.M.C. # 2 C.G.H. Birthplace PARIS - ONT.

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

1. GENERAL DESCRIPTION:

Physique good Weight 136 lbs. Height 5 ft. 8 in. Colour of Eyes Brown

Nutrition Good

Pulse 84

Condition of arteries Good

Vision Rt. 6/6 Left 6/6

Hearing (conversational voice) Rt. 21 ft.

Left 21 ft.

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

Splenden Scar - Dec. Nov. 1916

Opinion as to general health and physical condition fit.

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

Nervous System No Genito Urinary System No Cardio-Vascular System No

Special Senses No Integumentary System No Respiratory System No

Disturbance of Mentality No Muscular System No Digestive System No

Osseous and Joint System No Any other general condition No

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

Visual Acuity Rt Eye 6/12 C +.50 — .50 axis ⊖ 180 = 6/6

L. Eye 6/9 C - .50 axis ⊖ 180 = 6/6

No disability no glasses -

Rt Ear - ord. voice 21 ft.

L. Ear - " - 21 ft.

as a child often measles Double otitis media

six weeks ago Isolated for suppurative otitis media

Now no inconvenience No disability

(If space is insufficient, continue on back of form.)

[OVER]

EXAMINATIONS

THIS SECTION FOR USE OVERSEAS—

Examined at Bruges (Overseas)

Date MAY - 8 1919 Signed Robert R. Graham Capt. A.M.C. M.O.

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

Signature W. E. Arthurs

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

THIS SECTION FOR USE IN CANADA—

Examined at .....(Canada)

Date ..... Signed ..... M.O.

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

Signature .....

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

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

Unit C A M C Rank Nursing Sister Name Mary E Aitken

OFFICERS' DECLARATION PAPER

ORIGINAL

CANADIAN OVER-SEAS EXPEDITIONARY FORCE

BASE HOSPITAL
MILITARY DISTRICT No. 2

QUESTIONS TO BE ANSWERED BY OFFICER

[ANSWERS]

1. (*a*) What is your Surname ? Aitken
   (*b*) What are your Christian Names ? Mary Elizabeth
2. (*a*) Where were you born ? (State place and country) Paris, Ontario
   (*b*) What is your present address ? Base Hospital Toronto
3. What is the date of your birth ? November - 1889.
4. What is (*a*) the name of your next-of-kin ? Euphemia Aitken
   (*b*) the address of your next-of-kin ? Paris, Ontario
   (*c*) the relationship of your next-of-kin ? Mother
5. What is your profession or occupation ? Nurse
6. What is your religion ? Protestant
7. Are you willing to be vaccinated or re-vaccinated and inoculated ? Yes
8. To what Unit of the Active Militia do you belong ? —
9. State particulars of any former Military Service —
10. Are you willing to serve in the

CANADIAN OVER-SEAS EXPEDITIONARY FORCE ?

The undersigned hereby declares that the above answers made by him to the above questions are true.

Mary E Aitken (*Signature of Officer.*)

Taken on strength (place) Toronto 8th 1917, Base Hospital

(date)

E B Pardee Lt. Col.
(*Signature of Commanding Officer.*)

BASE HOSPITAL
MILITARY DISTRICT No. 2

CERTIFICATE OF MEDICAL EXAMINATION

I have examined the above-named Officer in accordance with the Regulations for Army Medical Services.

I consider him* fit for the CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

Date 13/6 1917

Place Toronto

Jas. W. Barton
Medical Officer. Major

*Insert here "fit" or "unfit

M. F. W. 51
100m.—4-16.
H. Q. 1772. 39-917

8

S.G - 33.
Occupational Group 19.
Dispersal Area "I" Toronto.

WSB class "B".

Proceedings of an Officer or Nursing Sister Struck off Strength OF THE Canadian Expeditionary Force.

H

M

1. RANK	N/SISTER	
2. NAME	AITKEN MARY ELIZABETH.	
3. UNIT	No.4 CANADIAN GENERAL HOSPITAL. Basingstoke	
4. DATE STRUCK OFF STRENGTH		PLACE
5. REASON	SOS 12-7-19 RO 2085-19	

DEMOBILIZATION

6. AUTHORITY

7. PROPOSED RESIDENCE P.O. Paris. Ont. Canada.

This folder should contain the following documents :—

1. Declaration Paper, M. F. W. 51, or Attestation Paper, M. F. W. 23.
2. Casualty Form, A. F. B. 103 or M. F. W. 54.
3. Medical History Sheet, M. F. B. 313 or A. F. B. 178.
4. Proceedings of Medical Boards, A. F. A. 179 or M. F. B. 227.
5. Medical Report, M. F. W. 129.
6. Dental History Sheet, M. F. B. 465.
7. Last Pay Certificate, M. F. W. 44.
8. Certificate as to Missing Documents.

M. F. W. 2591.
(923) Wt. /45P 3/19 15M D.St.

Forms
I. 1237
12

31-10-18 RL 9 S/S

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
DLA 128		Pte.	Aitken	M. E.

Year	Unit.	Age.	Service.
1918	C A M C. 4th C.G.H.	27.	19/12

Station and Date.	Disease Abrasion of L. Knee. (acc)
22/10/18	Thrown from a trap/le. Shaken back of head.
	Skin scraped off left Knee. Injury to left Shoulder.
	No serious damage done after a few days rest in Bed
	was able to go back to duty.
	X Ray - Nothing abnormal shown in L Shoulder
	Thos Woodruff Major

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

(6365) W2944/P438 2,950,000 1/18 McA & W Ltd Forms/I. 1237/13 (E 2349)

[P.T.O.

Station and Date.

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

M. F. W. 54. (A. F. B. 108.
500M.—9-16
H. Q. 1772-39-920.

Casualty Form—Active Service

Unit, Regiment or Corps ..... C 4th Bn

Regimental No. ..... Rank Pte C. E. F. Name Aitken H .....

Enlisted (*a*) ..... Terms of Service (*a*) ..... 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		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				
16 7/19	M.H.Q. Ottawa	T.O.S. C.E.F. in Canada on General Demobilization	M.D. No 2	2/7/19	C.E.F. R.O. No. 2081-19
21-7-19	M.H.Q. Ottawa	S.O.S. C.E.F. in Canada on General Demobilization	M.D. No. 2	12-7-19	C.E.F. R.O. No. 2085-19

E. Dickinson Capt
for Director Personal Services

(*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				

CANADIAN EXPEDITIONARY FORCE

N.J.A.-2-35.

H.Q.

Certificate of Service

ISSUED TO OFFICERS AND NURSING SISTERS

This is to Certify that (Rank) Nursing-Sister

(Name in full) Mary Elizabeth ARCH

Enlisted in Canadian Army Medical Corps

CANADIAN EXPEDITIONARY FORCE, on the [illegible]

day of [illegible] 191 AND WAS APPOINTED to COMMISSIONED RANK

in Canadian Army Medical Corps

CANADIAN EXPEDITIONARY FORCE on the Eighth day

of March 191 7.

SHe SERVED in CANADA, and England with the C.A.M.C., C.A.M.C. Depot, Shorncliffe., No 4 Can. Gen. Hospital., and C.A.M.C. Cas. Coy.

and was STRUCK OFF THE STRENGTH on the Twelfth day

of July 191 9 by reason of General Demobilisation

Dated at Ottawa, this Thirteenth day

of December 191 9

Lieut.

for Director of Personal Services.

M. F. W. 2618a.

'30m.—4-19.

1772-39-1428.

C.A.D.C. 5009A

CANADIAN ARMY DENTAL CORPS, O.M.F.C.

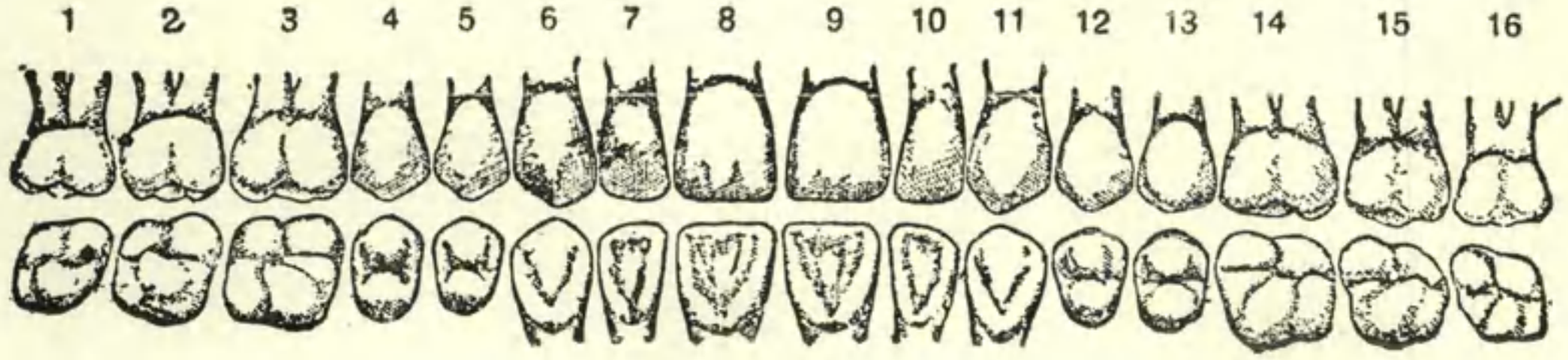
DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) AITKEN. M.E.

REGIMENT C.A.M.C. RANK Nursing Sister NO. —

Date of Examination in England 15-4-19. | Date of Examination in France —



DIRECTIONS TO DENTAL OFFICERS

1. This form will be made out for each individual at the time of Demobilization in England or France.
2. Figures as per chart will be used to designate teeth concerned.
3. In reference to Partial Dentures the numbers of teeth thereon will be stated

PRESENT DENTAL REQUIREMENTS

1. FILLINGS Three.
2. EXTRACTIONS no
3. CROWNS no.
4. DENTURES
   - (*a*) Full Upper
   - (*b*) Part Upper
   - (*c*) Full Lower
   - (*d*) Part Lower

} no.

HAS HE EVER REFUSED DENTAL TREATMENT? no.

HAS HE EVER RECEIVED DENTAL TREATMENT? (Reply by "*Yes*" where applicable to any or all of *a*, *b* or *c*.)

- (*a*) In Canada yes.
- (*b*) In England —
- (*c*) In France —

No. 4 Canadian Gen. Hospital, Basingstoke.

Signature of Dental Officer H.L. Smith. Capt. C.A.D.C.

W.S.B class 'B'

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

M. F. W. 54. (A. F. B. 103.)
350M.—5-16
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps ..... C. A. M. C. BASE HOSPITAL MILITARY DISTRICT No. 2

Regimental No. ..... Rank Nursing Sister C. E. F. Name ..... Aitken, Mary Elizabeth .....

Enlisted (a) 8-3-17 Terms of Service (a) Canadian Exped. Force Service reckons from (a) 8-3-17

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) (a) Nursing Sister (C) graduate Nurse.

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
29-8-18	S. O. S.	BASE HOSPITAL MILITARY DISTRICT No. 2 on proceeding Overseas (Auth: A.D.M.S. letter 2MD. 34-3-33, dated 19-8-18 and H. Q. Telegram 5047) E B Pardy Lieut Colonel, A.M.C. BASE HOSPITAL MILITARY DISTRICT No. 2			
		Embarked			
		Disembarked			
21 SEP 1918	O.C., C.A.M.C. R. & T. Depot, T.O.S. from Canada		SHORNCLIFFE	4 SEP 1918	Pte Do 264
24/10/18	O.C., C.A.M.C. R. & T. Depot, S.O.S. to Camberley		"	30/9/18	Pte Do 264 A. H. Davis Capt. Asst. Adjutant For O.C. C.A.M.C. Reserve Depot

(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				
4.10.18	Camp Cas Dept.	20 S from Camp Dept & On Command 4th Gen Hosp	Shorncliffe	30.9.18	Pt II DO. 128 A. Adjutant Lieut Office Records for Ob. S/cliffe Depot Troops
5.10.18	No. 46. G.H.	Attached for Duty, Quarters and Rations from Camp. Casualty Depot Shorncliffe	Basingstoke	30.9.18	Pt. 2 D.O. 52/5.10.18
23.10.18.	do.	Adm. to Hosp. "Inj. to shldr."	Basingstoke	22.10.18	Pt. 2 D.O. 57 23.10.18.
31.10.18.	#4 C.G.H.	Dis. from Hosp. (inj. shoulder)	B'stoke	31.10.18.	Pt. 2 D.O. 59 31.10.18.
11/12/18.	Do.	T.O.S. from Camp. Cas. Coy. on ceasing to be attached	Do.	9/12/18.	Pt II D.O. #71/11/12/18.
12-2-19.	No 4 C.G.H.	Adm. to Hosp (Otitis media)	Do.	10-2-19.	Pt II D.O. 120/12-2-19.
28-2-19.	Do.	Dis from Hosp. "Otitis media."	Do.	27-2-19.	Pt. II D.O #17. D/28.2-19.
12 JUL 1919	Do	SOS. on TC to CEF in Canada.	Do.	12 JUL 19	Pt II Do #53 of. 2 JUL 1919

EMBKD. SOUTHAMPTON 2.7.19
ARR HALIFAX JULY 8 19

Mcsharpe
Major RAMC
No. 4 Canadian Gen. Hospital,
Basingstoke.

Forms R. 150
3232. 15 M. 14/1

Surname AITKEN **Christian Names** Mary Elizabeth

Rank N.Str.

Promotion

Name and Address of Next-of-Kin
Euphemia Aitken, (mother)
Paris, Ont.

Unit CAMC.

Place of birth Paris, Ont.

Married (Yes or No)

Appointments

Date of leaving Canada 4-9-18. RL. ~~28-15~~, 7/90, 7/187. **Date and Cause of Resignation**

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
20-9-18.	DGMS. CAMC.	T.O.S. on arrival from Canada,		4-9-18.	C.O. 710.
21-9-18	Res. & Tr. Dep	T.O.S. on arrival from Canada		4-9-18	P.T. H. ord. 264.
4-10-18	- do -	S.O.S. on posting to CAMC. Cas. Depot		30-9-18	P.T. H. ord. 277
4-10-18	Cas. Dep. Sec.	T.O.S. on posting from CAMC. R. & T. Dep.		30-9-18	P.T. H. ord. 128.
		"on Command" to 4 C.G.H. Basingstoke		30-9-18	
31-10-18	AMS.	Adm. 4 Can. Gen. Hosp. Basingstoke	Discharged	23-10-18 / 31-10-18	Ch. 1126 / Ch. 1134 — abrasions L. Knee Acc ~~A.A.D.~~ Do ~~Do~~ (2) Ch. 1193
12-12-18	CAMC. Cas. Coy.	Cease Command 4 CGH on posting to that unit		9-12-18	P.T. H. ord. 187.
11-12-18	4 C.G.H.	T.O.S. from CAMC. Cas. Coy. on Ceasing to be att.		9-12-18	P.T. H. ord. 71.
17-2-19	AMS.	Adm. 4 Can. Gen. Hosp. Basingstoke	Discharged	12-2-19 / 27-2-19	Ch. 1216 / Ch. 1227 — Otitis Media Do
29-5-19	Do	Adm. 4 Can. Gen. Hosp. Basingstoke	Discharged	24-5-19 / 29-6-19	Ch. 1300 / Ch. 1303 Tonsillitis P.T. II O. 53. "
2-7-19	4 C.G.H.	S.O.S. on Transfer to C.D. Fin Can.		2-7-19	

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				
9-7-19	Dmd.	S.O.S. to Canada.		3-7-19	C.O. 80.
		Sailed to Canada S.S. Olympic		2-7-19	Sailing No. 97.

20061

2.8.18. STER.

880. CS 186. W.503/P.36. 20,000 Pads. 10/17. N.P.A. Ltd. E. 1955.

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

H Can Gen. Hospital.

Ward N/S 6 Ward. No. of Bed Date Oct 25/18.

Regl. No.	Rank and Name.	Corps.	Part to be X-Rayed.
	N. S. Aitken.		Left Shoulder

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

Fell on left shoulder three days ago.

Signature of M O. [illegible]
Oct 25.18.

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

No. of Plate H.H.82.

Nothing abnormal shown ~~found~~ at L. shoulder.

Signature of Radiographer A. H. Ralph Capt.
Date 25.10.18

No. RANK F. Lister. NAME Authen. Mary

T. O. S. 8-3-17. UNIT Base Hospital a.m.c.
D.D. 112 of 11-4-17.

M. D. 2

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1917	1917			
Mar.	no a/c	u.	probationer 9-3-17.	0070 of 10-3-17.
Mar. 8	Apr. 30	✓		
	May.	✓		
	June.	✓		
	July.	✓		
	Aug.	✓		
	Sept.	✓		
	Oct.	✓		
	Nov.	✓		
	Dec.	✓		
1918	1918			
	Jan.	✓		
	Feb.	✓		
	Mar.	✓		

(over.)

1918	1918		
Apr.		✓	
May.		✓	
June		✓	

NAME Aitken M. E. REGT. No. —

RANK AND UNIT N/Sto. C. A. M. C. 4 C. G. H.

NEXT OF KIN

CABLE		NATURE OF CASUALTY
No.	DATE	

M. F. W. 42—100M.—8-18.
H.Q. 1772 39-893.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
1126-4.	4 C.G. Basingstoke	29-10-18	~~D.G.H.~~
1134	Disch.	31.10.18	" " " "
			as per 1193 Abrasions L. Knee Acc
1216	4 Can Gen: Basingstoke	12-2-19	Otitis Media
1227	Disch	27-2-19	"
1300.	4 Can Gen: Bas.	24-5-19.	Tonsilitis
1303.	" " " Dis	29-6-19	"

Form E. 149.

EF013.

Name AIKEN ✓ Rank N/S ✓ Reg. No.

Unit Mary ✓ Elizabeth ✓
CAMC 4th CGH ~~all from camp~~

Next of Kin Canada

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1918 23-10	4th CGH	Basingstoke	29867 NYD(Q)	1156		C
31-10	Discharged			1134		
	Casualty (Sick)	Abscess R Knee		1193		
12-2-19	Admitted No. 1 Canadian Hospital Basingstoke			1216		
27-2	Discharged			1229		
24-3	Admitted No. 1 Canadian Hospital Basingstoke			1303		
29-6	Discharged			1303		

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