REGIMENTAL DOCUMENTS

NAME ALLEN ALFRED REGT. NO. 102591 UNIT 61 Lab H. Q. FILE NO. 50-77-415

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
1	ATTESTATION PAPER (M.F.W. 23, 133, or 51)	3				DEATH
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	TRAINING HISTORY SHEET (M.F.W. 113)	Ryket				
1	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)	2				
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1	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)	1				DISCHARGE
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	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					Multiple
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1	Pte 8 Paykets					15-23
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1	Med (R)	4-7-22				

S

M

H

102591

ATTESTATION PAPER.

ORIGINAL

No.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name?..... Alfred Allen
2. In what Town, Township or Parish, and in what Country were you born?..... London - England
3. What is the name of your next-of-kin?..... ~~Lord~~ Walter Norman Jun ("Friend")
4. What is the address of your next-of-kin?..... ~~Lord~~ 336 Cobourg St, Victoria B.C. Canada
5. What is the date of your birth?..... July 3 - 1885
6. What is your Trade or Calling?..... Hospital Orderly
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? If so, state particulars of former Service. Yes. 50th G.N. 2 yrs 1/2 R.C.R.
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

Alfred Allen (Signature of Man).

Farmer (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Alfred Allen, 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.

Alfred Allen (Signature of Recruit)

SEP 13 1915

Date.....191 . Farmer (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Alfred Allen, 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.

Alfred Allen (Signature of Recruit)

SEP 13 1915

Date.....191 . Farmer (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 VICTORIA this 13 day of Sept 191 5

A Eastmeat J.P. (Signature of Justice)

In and for the Province of British Columbia

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

A Ellwood MAJOR. (Approving Officer)

For Officer Commanding (Incapacitated)

M. F. W. 23.
200 M.—5-15.
H. Q. 1772-39-841.

Description of Alfred Allen on Enlistment.

Apparent Age 20 years 2 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height ..... 5 ft. 6 1/2 ins.

Chest measurement.
- Girth when fully expanded ..... 36 ins.
- Range of expansion ..... 3 ins.

Complexion ..... Dark

Eyes ..... Blue

Hair ..... Black

Religious denominations.
- Church of England ..... Yes
- Presbyterian .....
- 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).

none

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 Sept 13 191 5 ..... D M Bryant

Place Victoria BC ..... Lt Colonel

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.

Alfred Allen ..... 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.

A E Christie ..... (Signature of Officer)

MAJOR.

For Officer Commanding (Incapacitated)

Date Sept 20 191 5

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 102591 (Rank) Private

Name (in full) ALLEN, Alfred enlisted in

the 67th Battalion

CANADIAN EXPEDITIONARY FORCE at Victoria, B.C. on the 13th

day of April 19 15.

HE served in FRANCE

and is now discharged from the service by reason of

ON DEMOBILIZATION MEDICALLY UNFIT FOR GENERAL SERVICE

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

Age 34 years 3 months

Height 5 feet 6½ inches

Complexion Dark

Eyes Blue

Hair Black

Marks or Scars

Nil

Alfred Allen
Signature of Soldier

Issuing Officer

Captain,
Officer i/c Discharge Section, District Depot No. 4.
Rank

Appointment

Date of Discharge May 13th, 1919

Signed at Montreal, Quebec this 13th day of May 19 19

in Military District No. 4

File Reference No. 2DA 19-A-265.

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.

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

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.

Army Form B. 103. Regimental Number 102591

Casualty Form—Active Service.

Regiment or Corps 7th Edn. Area Employment Coy.

Rank Pte Surname Allen Christian Name Alfred

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

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

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

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

or Corps Trade and Rate.....

Occupation..... .....Signature of Officer.

Report: Date	Report: From whom received	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
		Embarked ...			
		Disembarked...			
23-9-18	Lab. Edt	S.o.S. 7th Edn. Area Emp Co on reporting to 8th Edn Area Emp Coy.		26-9-18	KR 25502/5 PII 0 54 dy 9-10-18
do	do	T. o. S. 8th Edn. Area Emp Coy.		27-9-18	PII 0 64 d/ 1-9-10-18
14-11-18	5th Glos	D. of A. adm 5th Glos		14-11-18	M 3056
10-11-18	do	D of A To England		10-11-18	M 5351
11-11-18	do	Invalided sick to England ex A.T. Ville de Liege & posted to Edn Glos Depot Wiltley		11-11-18	M 3083/650 PII 063 d/= 28-11-18.
			C.B. Johnston for D.A.A.G. Section		Captain A.A.G. Canadian G.H.Q. 3rd Echelon

(*a*) In the case of a man who has re-engaged for, or enlisted in Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.

(*b*) Signaller, Shoeing-Smith, &c

(17591.) Wt. W 1887—P 1124. 1,000,000. 6/18. D & S. Form B/103. (E. 1256.)

[P.T.O.

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				
18.11.18	Gen Depot	Tos from 8th C.A.C. Coy.	Kirkley	12.11.18	DD 274
					Lieut. for Major i/c Records O.M.F.C.
14-5-19.	SOS. Disch. Med. Unfit r0.1420		Montreal.	13-5-19.	DD4/DO/Pt.11-134.
					Captain, Officer i/c Discharge Section, District Depot No. 4.

CERTIFIED CORRECT.
31 AUG. 1916
CAN. RECORDS, LONDON

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

M. F. W. 54.
150M. 10-15.
H.Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps 67th BATTALION C.E.F.

Regimental No. 102591 Rank Private Name Alfred Allen
C. E. F.

Enlisted (a) 13/9/15 Terms of Service (a) Duration of War Service reckons from (a) 73/9/15

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) (Hospital Orderly)

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.
		Embarked Canada	Halifax	1/4/16	
		Debarked England	Liverpool	11/4/16	
		PROCEEDED OVERSEAS WITH 67th PIONEER BATT. AUG ~~10~~ 13 1916			A E Christie MAJOR AND ADJUTANT.
		Disembarked	Havre.	14.8.16.	N.R.
		Transferred 12~~4~~th Bn	Field	1-5-17	B II O. 65, d/- 28-5-17
28/5/17	D.C. 12th Bn.	T. O. S. 12th Bn.	do.	2/5/17	D.O. Pt. 2. No. 101 d 28/5/17
12.5.17	do.	Attch. to Chaplain's Services	do.	6.5.17	B.213 D.C.O. 20. d.5.6.17
7.7.17	56 Gen. Hp.	Sick sev. (12) adm.	56 Gen. Hp.	7.7.17	W.303H/W.467H
8.7.17	10 C.F.A.	Abdominal N.Y.D. adm. To	10 C.F.A. 8 C.F.A.	5.7.17	A.36 E.5017 D.C.O. 30 d. 24.7.17
8.8.17	4 C.I.B.D.	T.O.S. 4 C.I.B.D. "A"	Etaples	8.8.17	N.R. 41 D.C.O. 34 d. 10.8.17
29.8.17	do.	Class. "B" labor by Med. Bd.	do.	29.8.17	W. 3339/100
13.9.17	do.	do.	do.	13.9.17	W. 3339/123
11.10.17	do.	do.	do.	11.10.17	W. 3339/169

(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				
20.10.17	4 C.I.B.D.	Granted 10 days leave to	England	18.10.17	B213 D.O. 141 d. 31.10.17
4.11.17	do.	Class "B" by Med. Bd.	Etaples	4.11.17	W.3339/213
3.11.17	do.	Rejoined from leave	do.	1.11.17	B.213
5.11.17	do.	To Canadian Lab. Pool.	do.	5.11.17	A.R. 134
5.11.17	do.	D.O.S. 124 Bn. on trans. To Can. Lab. Pool.	do.	4.11.17	A.G. Can. Rec. A.R. 16276 A.R. 134 D.O. 146 d. 15.11.17
	A.G.	T.O.S. CANADIAN LABOUR POOL, from 124th Bn		5-11-17.	A.R. 16276 Pt II O No 4 d/19-11-17
6.12.17.	—— C.G.B.D.	S.O.S of Can. L. Pool to 4th C.L. Batt.		8/18/17.	A/R. 798. A.R. 16276. Pt II O. 22 14.12.17.
6.12.17.	4th Lab Bn	S.O.S on transfer from Lab Pool	Field	9.12.17.	Pt II. do. No 107.
6.12.17.	C.G.S.	Left for Unit	"	8.12.17	A.R. 798.
16.12.17.	4th Lab Bn	Arrived Unit	"	9.12.17.	B 213.
30.12.17.	do	Evac. for dentistry	"	26.12.17	B 213.
		Rejoined Unit.	"	28.12.17	
		Designation changed to 2nd 1st Can Inf Works Bn (Auth: War Office letter 121/Overseas/4840 (A.G.12) d/11-3-18.			Pt II. No 24 d/31.3.18
29.6.18	1/Lowth	Diarrhoea adm Hosp		23.6.18	C 45275.
21.6.18	a 25	Class - B2.	Field	21.6.18	W 3339/578
7.7.18	24th Bn	Rejoined Unit.	Fld	4.7.18	B213
25.7.18	Lab Coll Can Corps	SOS on transfer to 7th Can Area Emp. Coy.		26.7.18	P.S.S. Ref A.R. 25502/5. D.O. 78. d/5.8.18.
do	do	T.O.S. 7th Can Area Emp Co		27-7-18	Pt II O 47 d/= 7-8-18

Rank Private. Date of att. Sept. 16rd. 1915.

Regimental Number 102591. Date of Discharge May 13th. 1919. E.F.

Unit 67th. Bn.

Name ALLEN Alfred.

Address Khaki Club 660 Dorchester St., W. Montreal, Que.

B.P.C. District Office Montreal, Que.

Attestation Form:-

Weight on Enlistment: 145 pounds

Marks of Identification: None.

Rank at attestation: Private.

Casualty Form:-

Minor defects: Disordered Action of Heart causing shortness of breath on moderate exertion.

Rank when disability was incurred: Private.

Misc.: Nil

Conduct:-

Venereal dosease: Nil

Conduct: Good

Self inflicted wound: Nil

B.C. Form 871.
20M-2-19.

Medical Officer :— Captain Spearing.

~~Whether U.K. or~~ Expeditionary Force :— France Bed 12 Religion. C/E B2

Forms' I. 1237/12 (If latter, state which.) Army Form I. 1237.

Bed 6 **MEDICAL CASE SHEET.*** Ward. ~~BLEX~~

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name. in Full
FC 2818	102591	Pte.	Allen	Alfred

Year 1918.

Unit.	Age.	Service. Total.	Service. In Field.
8 Can. Employ Coy.	45	3 3/12	3 0/12

A.T.S. Inoculations.

Phial No.	Units.	Date.

Station and Date of Admission. 2nd WESTERN GENERAL HOSPITAL, HOLLYWOOD PARK, STOCKPORT. 12-11-18

Disease Dull

Date of Onset :—

W J Spen
Capt R.A.M.C.

Allowed out
4/5.

5/11/18 Transfd to — N. Reddish

2nd WESTERN GENERAL HOSPITAL, NORTH REDDISH.

18/11/18 Admitted B X Ward

C C ++ 25/11/18 Transferred to Bank Meadow

2-12-18 Trans to Woodcot Park Epsom

Transfer to	Discharge to	Recommended for Medical Board.	Next of Kin :—
Class B Sq.			Master Walter Norman,
Date 18/11/18	Date	Date	33A, Barclay Avenue, Victoria, Brit. Columbia
M.O.	M.O.	M.O.	

* 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.	

Forms
I. 1237
12

Army Form I. 1237.

IV

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
Year 1918	102591	Pte.	Allen.	A
	Unit.		Age.	Service.
	8th Can. Inf. Emp. Co			

Station and Date.	Disease Dark (Cont.)
8 DEC 1918	Claims he has improved somewhat since going to hospital – Says he had some severe Praecordial pain again last night. Heart sounds normal – slightly enlarged. Transfer to Bushey Park. Spec. Hosp. A Kennedy Lieut. Comdg.
No 5 C.G.H.	
Jan 31/19	Heart Condition Improved. Awaiting Invaliding to Canada. H Wallace Capt

Hospital Orderly	Mgr. Manchester

D

TAC

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

(6365) W2914/P138 2,950,000 1/18 McA & W Ltd Forms/I. 1237/13 (E 2349)

[P.T.O.

Station and Date.	

Station and Date.	
	Present State:
	Physique
	Teeth good number teeth gone from upper set. Tonsils
	Appearance well nourished Hands normal
	Thyroids normal.
	Pulse, before 84; after exercise ; mins later
	B.P. 130-80.
	Heart- Apex beat 5- I.C. outside nipple line
	Left limit 11 Cm from mid sternum.
	C. A. D. Left limit 5- intercostal space 11 Cm from mid
	sternum, outside nipple line.
	Sounds ~~normal~~ aortic 2nd at 2 R C cart bell like in character
	Lungs nil.
	Abdomen nil.
	Urine Neg
	Nervous System. Pupils equal and pupil reflex normal
	Knee tendons reflex brisk Ankle clonus. J. P. Sterling
	Orthostatic Subjective Pain - increased on heavy lifting
	Tenderness on percussion over sternum opposite lower Edge
	3rd rib. Two murmurs.

Forms
I. 1237.
10

Army Form I. 1237.

MEDICAL CASE SHEET.*

THE KING'S CANADIAN RED CROSS SPECIAL HOSPITAL, BUSHY PARK, HAMPTON HILL.

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	102591	Pte.	ALLEN.	ALFRED.
Year 1918.	Unit. 8. Employment Co.		Age. 45.	Service. 39 mon.

Station and Date.

Disease ~~D.A.H.~~ Arthritis (307) Arthritis

Permanent Address Victoria BC. Gen delivery.

Disability Pain left side chest. on exertion.

Previous Occupation Laborer.

Enlisted on 13 Sept- 1915- at Victoria BC. Canada.

Foreign Service 67 Bn- ~~28 Mon~~. 8 Employment Co - Duration 28 mon.

Disability

Date of Origin June 1918. Place of Origin France.

Concise History

(Schools, Games, Work, Training, Past Illness, Service, Onset.)

healthy boy able to play games mind was good. no chief hard sickness. went to sch 10 years Page. Joined army Sept. 1915- 67 Bn Came to Eng after 7 months training Stood training well. was 6 mnths trained and stood it well. went to France aug. 10 - 1916 was in 67 Bn till may 1917: no trouble. went to 124 Bn was with them till Sept. no trouble except colic which lasted one month was at 56 Gen. Hsp discharged to Base details marked B.I 4-11-17. See Pay book. went to 4th Can Inf Bn 8 months. during this time began to have Pain in Chest-wind was good. about June 1. - 1918 began to have so much Pain that he could not work. Was in Shoulder. (He is a bit doubtful about this feature of the pain): went to a field amb Stayed 2 wks. returned to duty. was boarded B II Pay book. went to Employment Co. while resting in gas school had extra bad attack of Pain and was vaccinated 2nd Med Gen. D.A.H. 22 days. Sent to Epsom 10 days and to Bushy Park. 12-12-18.

Had a soft Chancre about 15 years ago.

Present Condition Re. V.D.S. Wassermann found Pos. see report.

Tobacco 10 Cigarettes a day. Alcohol not since 1916.

Caus ation (a) (b)

Present Symptoms.

*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.

COPY.

CASE HISTORY SHEET.

Military Hospital. Ste Anne de Bellevue Station.

No. 102591 Rank Pte. Name Aller, Alfred Age 45

Unit D D #4 Completed years of service Where and how long } C 7/12 E 6/12 F 28/12

Date of admission 8.3.19./ 24.3.19. Date of discharge 9-5-19

Diagnosis Pseudo Angina Place of origin Impossible to State.

CONDITION ON ADMISSION AND PROGRESS OF CASE. Complaints:- pain in praecordia on exertion.

Past History:- 15 years ago had sore on penis after exposure and was treated for soft chancre - Wasserman positive 24:12:18.

Present Condition:- Pain comes on only with severe exertion when same is severe enough to cause him to lie down - also causes him to become dizzy - First noticed this in September 1918 - the pain is felt mostly over sternum and praecordia and radiates to left shoulder and down left arm as far as the elbow - Only slight dyspnoea. Says he thinks he could walk 1 or 2 miles slowly.

Physical Examination:- Pulse 122 - regular - small volume - tension + Vessel Wall palpable. Blood Pressure 130 - 80. Pulse after exercise (touching toes 10 times) 136 - regular - - volume fair - tension + Returns to normal in 2 minutes. Respiration increased from 20 to 24. Point of Maximum intensity seen and felt in 5th inter costal space, 9 cm from Mid sternal line. Relative Cardiac Dulness 4 S.M. / 9 cms. No thrill, no pulsation apex sounds clear and distinct - 1st sound slightly accentuated sounds at base clear A2 - P2. Moderately Plus.

Examination of Heart:- Lt. Col. Browne 1.4.19.)

FAMILY HISTORY. Relative Cardiac Dulness

(Tuberculosis, mental or nervous diseases.) within normal limits. Point of Maximum Intensity seen and felt in 5th space 9½ cm from Mid Sternal Line. No thrill.- Sounds clear - vApex 1st accentuated - no murmurs. Base - A2 - P2. +

Examination of Heart:- (Col. Finley 2.4.19) Heart normal.

TREATMENT. Wasserman, negative.

(Especially any specific or special form.)

CONDITION ON DISCHARGE,

(and disposal made of case.) Recommend discharge to Unit, Class C. 3461

Date.....

J.C. Browne, Lieut.
Medical Officer i/c case.

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

CASE HISTORY SHEET.

Militart Hospital. STE ANNE de BELL. Station.

No. 102591. Rank PTE. Name ALLEN ALFRED. Age 45.

Unit DD 4. Completed years of service Where and how long } C. 7/12 E 6/12 F 28/12

Date of admission 8:3:19/24:3:19. Date of discharge 9-5-19

Diagnosis ~~Mitral Insufficiency~~ Pseudo Angina Place of origin Montreal Que

CONDITION ON ADMISSION AND PROGRESS OF CASE. Complaints - pain in praecordia on exertion

Past History - 15 years ago had sore on penis after exposure and was healed for Soft chancre - Wassermann positive 24:12:18.

Present Condition - Pain comes on only with severe exertion when same is severe enough to cause him to lie down - also causes him to become dizzy - first noticed this in Sept. 1918 - The pain is felt mostly over Sternum + praecordia and radiates to left shoulder and down left arm as far as the shoulder elbow. - Only slight dyspnoea. Says he thinks he could walk 1 or 2 miles slowly -

Physical examination

Pulse 122 - regular - small volume - Tension + V.W. palpable B.P 130-80.

Pulse after exercise (touching toes 10 times) 136 - regular - vol. fair - Tension +. Returns to normal in 2 min. Resp. increased from 20 to 24.

FAMILY HISTORY. P.M.I. Seen + feel in 5th I.C.S. 9cm. from M.S.L. R.C.D. $\frac{IV}{L.S.M.}$ 9cm. no thrill - no pulsation

(Tuberculosis, mental or nervous diseases.) apex sounds clear & distinct - 1st sound slightly accentuated - Sounds at base clear $A^2 - P^2$ moderately plus.

TREATMENT. Examination of Heart (Lt Col. Browne 1:4:19).

(Especially any specific or special form.) R.C.D. within normal limits P.M.I Seen + feel in 5th space 9½ cm from M.S.L. no thrill - Sounds clear - Apex 1st accentuated - no murmurs Base - $A^2 - P^2$ +

Examination of Heart (Col. Finley 2:4:19).

CONDITION ON DISCHARGE. Heart normal.

(and disposal made of case.)

Wassermann. Negative

Recommend discharge to unit Class C

Date ..... H. Browne

Medical Officer i/c case.

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

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS DISTRICT 4.

NAME OF SOLDIER ALLEN. No. 102591.

REGIMENT 67 Regt RANK Pte

A. 31 reg

INSTRUCTIONS

1. On examination the condition of patient's mouth to be marked on diagram in red ink.
2. On first line of report record of same to be made in red ink.

Only such entries to be made on this sheet as will show:

1. Condition on examination (in red).
2. Condition on leaving Canada.
3. Condition on discharge.

Foir

	Date	Amalgam	Temporary Filling (a) G.P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhœa	Synthetic Porcelain	Extracting	DENTURES U	DENTURES L	DENTURES P	Gold Clasp	Gold Filling	CROWNS Gold	CROWNS Porcelain	Bridge Work	OPERATOR	Military District	REMARKS
Condition on first Examination	1919																					
foir	3/5.										3									E. Kennie Lt Dr		Recommended for discharge 3/5/19 E. Kennie
	5/5																					

M.F.—465.
200M.—6-18.
1772-39-950.

C.A.D.C. 5009 A

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

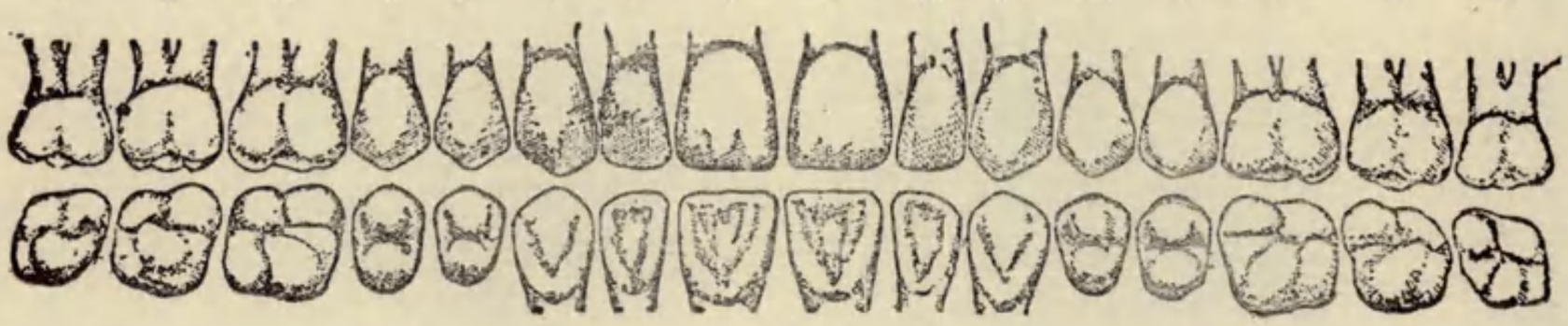
DENTAL CERTIFICATE FOR DEMOBILIZATION

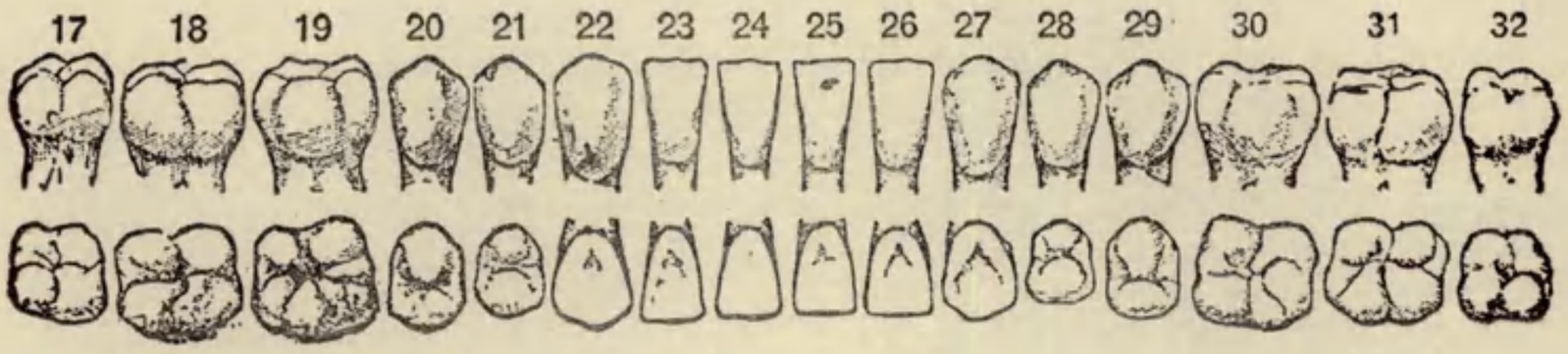
Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) ALLAN A

REGIMENT 8th A.E.F. RANK Pte No. 1025-91

Date of Examination in England 18/1/19 | 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
2. EXTRACTIONS 3
3. CROWNS
4. DENTURES
   - (*a*) Full Upper
   - (*b*) Part Upper 2-3-4-5-6-7-10-11-12-13-14-15
   - (*c*) Full Lower
   - (*d*) Part Lower 20-30-31

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
- (*b*) In England
- (*c*) In France Yes

Signature of Dental Officer A/P Aussie Capt

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) ALLEN. A.

REGIMENT 1 Eng Co. RANK Pte No. 102591

Date of Examination in England 23/1/19 | 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
2. EXTRACTIONS
3. CROWNS
4. DENTURES
   - (*a*) Full Upper
   - (*b*) Part Upper — 7 teeth
   - (*c*) Full Lower
   - (*d*) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT? Nil.

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

- (*a*) In Canada
- (*b*) In England Yes
- (*c*) In France

Signature of Dental Officer G. Rawcliffe Capt.

ORIGINAL

1025 91

ORIGINAL

MEDICAL HISTORY SHEET.

Surname Allen Christian Name Alfred

Examined on 13 day of Sept 1915 at Victoria B C

Approved by J M Bryant

Birthplace City or Town London County England

Rank Hcame M.O.

Apparent age 30

Trade or occupation Hospital Orderly.

Height 5 Feet 6 ½ Inches.

Weight 145 Lbs.

Chest measurement Minimum 33 inches. Maximum expansion 36 inches.

Physical development Good

Small-Pox Marks

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

When Vaccinated last 1905

(a) Marks indicating congenital peculiarities or previous disease Scar 1" Right Hand Scar 1½" on Right side of Head

(b) Slight defects but not sufficient to cause rejection

Date.	Fit or Unfit.	Examined for Re-engagement.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
2/3/16	Fit	for Overseas M.O.
		M.O.

Date.	Result.	Vaccinations.
2/5/16	OK	T. C. C. M.O.
		M.O.
		M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.
9/10/15	OK	M.O.
23/10/15	OK	TAB 30 7-16 M.O.
28/12/15	OK.	M.O.

Enlisted on 13 day of Sept 1915 at Victoria B C

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	67th Batt C. E. 7	102591		Sept 13th 1915
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
Bushy Park	2-1-19	Arteritis	Invalided to Canada per S.S. Seaborn Capt
St Anne de Bell.	2/5/19	Arteritis Pseudo angina	Discharged to unit. Class C
D.D.M. Montreal	10.5.19	Fit for service abroad.	J Brownlow 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.

200M—11-15.
H. Q. 1772-39-439.

CANADA

Surname ... Christian Name ... Corps

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. 56. General Hospl. Etaples.		7	7	17	7	8	17	Sick.		Dis. Base Details.	A77/A96. EK
		12.	11.	18.	2.	12.	18	Da H.	22.	For transfer	
2nd WESTERN GENERAL HOSPITAL MANCHESTER											
Mch. Epsom		3	12	18	12	12	18	(Convl)	10	Claims he has improved some what since going to hospital. Says he had some severe precordial pain again last night. Heart sounds normal, slightly enlarged. Transfers to Bushey Park Special Hosp.	Major, R.A.M.C., T.F. Secretary and Registrar, 2nd WESTERN GENERAL HOSPITAL
THE KING'S CANADIAN RED CROSS SPECIAL HOSPITAL		12	12	18				Arteritis		Pos Wassermann. tenderness precurdium Systolic bruit. R Card. ocs Sternum. Card left Clavicle 11 C M from mid Sternum apex 5th interspace outside nipple. BP 130-80. Rt Pulse on Hard 80-110 - after 15 min Feeble Pulse 120. after 2 min Rest - 108. Remained Feeble dies owing to Card Insufficiency.	A. E. Kennedy Lieut. C.A.M.C.
NO. 5 CANADIAN GENERAL HOSPITAL LIVERPOOL		20 JAN 1919			24 FEB 1919						J. H. Shirley Capt. R.A.M.C.

H. M. A. T. "ESSEQUIBO" FEB 24 1919 MAR 8 1919 Do- Improved. awaiting Invaliding to Hoylake
8 3 14 9-5-19 Pseudo Angina Do 13 Condition unchanged Keeps Cot Hewallace Capt

13

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

POST DISCHARGE PAY OFFICE
JUN 6 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 ...Alfred... 2. Surname ...Allen...

3. Rank ...Pte... 4. Original Unit ...6.7. Batt'n. 5. Reg. No. ...1025.91

6. Address, in full, to which future payments of gratuity are to be forwarded .....
...Khaki Club G.G.O. Dorchester St. West
.....

7. Date of enlistment in the C.E.F. ...13th September 1915...

8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge ...None... .....

9. Relationship of such dependent ...None... .....

10. Present address, in full, of such dependent ...Nil... .....
.....

11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier ? ...N.O.....

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:—
.....
...6y th Batt'n. March 1916 to May 1917...

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 ...N.O..... .....
.....
.....

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 ...Seven Months
in Canada Six Months England
28 Months in France.....

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.
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 ..... None

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 ..... First War Gratuity received Seventy Dollars from D#4

20. Have you been issued with a War Service Badge? If so, what class? A and 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 ..... 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 ..... May 13th 1919 ..... (b) Reason for discharge Medically unfit for general Service

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 ..... Yes. ..... G.J. Balfour nine months

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: Alfred. Allen

Place of Residence: 660 Dorchester, St. West Montreal P.Q.

Declared before me at: Montreal

This 20th day of May 19...19

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

A S Parker
Commissioner of the Superior Court for District of Montreal

POST DISCHARGE PAY.

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

Certified Correct.

District Paymaster.

R—122

A.G.R.

Rank | Name ALLEN, Alfred. | Reg'l No. 102591.

Unit 67th Bn. | If in perm. Corps / What Unit? | Married or Single Single.

Place and Date of Enlistment Victoria, B.C., Canada, 13th September, 1915. | Place of Birth London, England.

Name and Address, Next-of-Kin Walter Norman Jun,

336 Coburg Street, Victoria B.C., Canada. | Relationship Friend.

Assigned Pay Monthly $ | Payable to

Relationship

Separation Allowance $ | Payable to

Relationship

Discharge, Date and Place | Reason | Character

N/E. R.B. No 6360
File R.L.
Category MV. Canada

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.
C.		Arrived in England S.S. Olympic		12 APR 1916	A.F.B. 103 CHECKED 22 AUG. 1916 R.L.C.
12.8.16	..	Proceeded Overseas	,,,	13-8-16	Pt. 2. D. O. 75
28-5-17	67 Bn	To 124 Pioneer Bn	Field	1-5-17	Pt II D.O. 65. 101. 28-5-17 124BN
16-7-17	124	To Gen Hospt	Etaples	7-7-17	Cl. 77. Sick
16-8-17	124.	Desig Base Details		7-8-17	Cl. 176
15-11-17	124.	S.O.L. to Can Lab Bn	Field	25-10-17	Pt II D.O. 101 + C.L.P 4 d/ 9.11.17
15. 12. 17	4 Lab	T.O.S.	"	9. 12. 17	DO # 22.0/14.12.17 C.L.P. " 107
	31.3.18.	4th. Can, Lab, Bn. Designated, 2nd Can. Inf. WKs. Bn.			
5-8-18	2nd Can Inf Works Bn	S.O.L. to 7th Can Area Emp Co	Fld	26-7-18	Pt II 78 7th Can Area Emp Co 47/7.8.18
9-10-18.	8th B.A.C. Coy.	T.P.S. from. 7th B.A.C.B.	Fld	27-9-18	7 B.A.C.B. Pt II P.S.K. 99-075. —"—59.

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.
28-11-18	8 C A E Coy	Invalided Sick & posted to Gen Dep Witley O/C.	Field	11-11-18	D063
18-11-18	Gen Dep	T.O.S from 8 C A E Coy	Witley	12-11-18	DO 274
4-3-19	Gen Dep.	Invalided to Canada	"	24-2-19	CLB256.
19.5-19	Gen Dep	Ceases Hosp and S.OS. Invalided to Canada	" Seaford	24-2-19	100109

No. 1025-91 RANK Pte NAME Allen, A

699 apr Paylist

T.O.S. 13-9-15 UNIT 67th Battalion

D050 sept-1915

M. D. 11

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915	1915			
sept 13	sept 30	✓	(Late of 60th Regt.)	sept paylist.
	Oct	✓		
	Nov	✓		
	Dec	✓		
1916	1916			
	Jan	✓		
	Feb	✓		
	Mar	✓		
	Apr	✓		

UNIT SAILED

APR 21 1916

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS

E. M. B.

Number 102591 Rank Pte

Surname ALLEN

Christian Names Alfred

Unit 16. 7th Bn. Can. Inf. Theatre of War France

Date of Service 13/8/16

BPC 2 Bishop St Montreal

Remarks

Latest Address 336 Colburn St

Victoria B. C.

Roll No. B

Page 322

NAME REGT. NO.

RANK AND UNIT

NEXT OF KIN

CABLE		NATURE OF CASUALTY
No.	DATE	

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

Form R. 149.

Alfred

Name ALLEN. Rank Pte Reg. No. 102591

Unit 1st C.M.R. & C.A. Emp Coy.

Next of Kin Canada

Date 1918	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
23 6	1/1st Lowland F. Amb	Dieuloec	D.S.W.			32450
4 7	Discharged to duty		do	A60		32931
4 11	56 C.C.S. Hpl Etaples		D.A.H.	A165		5452/6
12 11	2 A. Gen Hpl Manchester		Do	B		953
3-12	Mil (Leave) Epsom		"	B		2427
13-12-	R.A.M.C. Hpl Bushey Park		Do	B		3166
	Note Adj: B.196d 18-2-19 Pleurisy now Rheumatism			B		6144
21-1-19.	S.C.E.H. Kirkdale		D.A.H.	B22		5452
24-2-19.	Invalided to Canada		"	B256		7620.

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

FORM R. 149.
7106—250m—7/2/17.

Name ALLEN Alfred *Rank* Pte *Reg. No.* 102591

Unit 124th Pioneer Battalion

Next of Kin CANADA

Date 1917	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
Jly 7	No 56 General Hsp	Etaples	Sick		A77	
Aug 7	Dis Base Details		Do		A96	

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

NAME Allen, C.

REGT'L No. 102591

H. Q. FILE No. 649.

RANK AND CORPS Pte. 124 Bn. Pnr. Bns.

FOLLOWS NO.

FOLLOWS

CABLE

NO.	DATE

NATURE OF CASUALTY

L. L. 20497—M. & D. 7908

M. F. W. 42—50M.—5-17.
H. Q. 1772-39-8s3.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
A 77	#56 Gen. Etaples	7-7-17	Sick.
A 96	Mis. Base Details	7-8-17	"
A 5'2	1/st Lowland Fld Amb	23-6-18	Diarrhoea
A 60-1	" " " Mis.	4-7-18	"
A 165	56 Gen: Etaples	4-11-18	D A H
B 167	2nd West Gen: Manchester	12-11-18	" " "
B 185-3	6 Mil. Conv. Wdcote Pk. Epsom	3-12-18	" " "
B 196	Kings Can. Kl. Epsom: BP	13-12-18	" " " Arthritis per B 216
B 228	5 Can Gen: Kirkdale	21-1-19	" " " "
B 216	Invalided to Canada	24-2-19	Arthritis D A H

LEAVE THIS BLANK.

PROGRESS, Notes. Class I.

13 mins P.T. and Shot walk I

mile Pulse raised to 1020.

Rest of 2 mins - 108

with drawn from P.T

owing to Conjunctivo

purulent inflammation of

ocular due to Syphilis.

DISPOSITION.

E.

Capt.

Officer i/c Gymnasium.

Palmer

Remedial Treatment Gymnasium,
Canadian Hospitals and
Command Depots.

LEAVE THIS BLANK.

Place:- Bushy Park Heart Hosp:

Regt.No 102595 Rank Pte Name Allen. A.

Unit 8th Emp. Co. Age 45 (Adm 12:12:18

Date of(

Division ..... Hut ..... (Disch. .....

DISABILITY.

Date.

CLASS.

MACHINES.

Hours of Attendance

a.m.

p.m.

REMARKS. Definite tenderness over Sternum. Hamilt
3 R C Cant. Wasserman Pos. BP. - 130-80
Rest Pulse in Hosp 80-110. after 15 min Ex
and 1 mile walk Pulse 102-128 after 2
min Rest - 102. Cardiac limit and after 5
interval: 11 C.M. from mid Sternum 2nd
Sound at 2 R C Card is well like in Chandle

R.T.G.1.

Abs reflexes normal

P.T.O

LEDGER NO. 199 SERIAL NO. 3461

REG. NO. 102591 NAME Allen. A

RANK Pte. CORPS D.D. 4. AGE 45 SERVICE 6 7/12 6 9/12 Jr 28/12

HOSPITALS	DATE OF ADMISSION
1 St Anne de Bellevue.	8-3-19
2	
3	

DIAGNOSIS ~~Arthritis~~, Pseudo Angina

TRANSFERRED TO

DISPOSITION smil 9-5-19 CATEGORY

M.F.W. 2553.
1126-D.P.-50M-12-18.
1772-39-1332.

P.T.O.

REMARKS:

*Name ALLEN, Alfred Rank Pte Regtl. No 102591

Fyle Depot 19-A-263

Original unit 67th Bn. Present unit D.D.4. M. or S. S Age 33 Religion C.E. Ref. H.Q.

Port, ship, and date of arrival PORTLAND.Me.S.S" ESSIQUIBO"7-3-19.

Next of kin W. N. Jones, 336 Coburg ST. Victoria B.C. (Friend)

Address on leave

Address on discharge

Transportation issued Yes / No Date Character on discharge

Previous occupation Hosp. Orderly Date and place of enlistment Sept. 13-15 Victoria B.C.

Diagnosis Date of Medical Boards

Date.	Remarks	Pt. 2 Order No.
12-3-19.	O/S T.O.S.from 24-2-19.Posted to Hosp-Sect..8-3-19.	
	Fur.W/S 24-3-19.	71

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

(over)

Date.	Remarks.	Pt. 2 Order No.
9-5-19.	SOS.Hos . Sec on Trans to Cas Co'y 8-5-19	129-p-
14-519.	Dis.H.M.Service.13-5-19.Med.Unfit.Auth.RO.1420.	134.p.

M.F.W. 192
150M—6-18.
1772-39-1243.

EPITOME OF HOSPITAL TREATMENT.

	Hospital	Adm.
1.	Kenji Lan Red Cross S.H. Bunbury W.A.	13-12-18
2.	5 C. G. Kirkdale	21-1-19
3.		
4.		
5.		
6.		
7.		

FORM D.M.S. 1300.
8137—50m—28/2/17.

Surname	Christian Name or Names	Reg. No.
Allan	A.	102591

Rank: Pte
Unit: 124th Pionrs (2 C.D.W.B.) H.Q.M.C.
Co. / Troop / Batty.

Hospital: 56 Gen Etaples 7-7-17 (& ca emp)
Date of Admission

Transferred 1/1st. Lowland, F. Amb. Hosp. 23.6.18.
56 Gen Etaples Hosp. 4-11-1.
2nd W.G.H. Manchester Hosp. 12.11.18.
Woodcote Epsom Hosp. 5.12.18

Diagnosis

(1) Diarrhoea, o.f.
Later Diagnosis (if changed)
(2) D.A.H.
(3) Hypertrophy Myocardium

Additional Diagnosis: if more than one state present
Arthritis & D.A.H. add

DISPOSITION

Date

C.L. 16-7-17 A77 — Disch to Base details 7-8-17
15-8-17 @ 96.
4-7-18 @ 520
13.7.18 @ 160
12.11.18 @ 165
12.11.18. B167.
5.12.18 to 389-3
18-12-18 B96
14-1-19 B216
30-1-19 B228 2
4.3.19 B256/4

REMARKS: Dis* 7.18

2 Rep Ch & arthritis
Invd To Canada. 24.2.19
7

A.M.D. 2 DEPT.
Extn. of O.G.M.S. O.M.F.C. London.

Date.	Remarks.	Pt. 2 Order No.
6-8-18	Absent without leave Co. 113	(8-8-18)
6-8-18	Granted leave without pay from 6-8-18 inclusive 16-8-18 Co. 114.	(9-8-18)
	address % Post Office Dept to Joliette	
	Absent without leave of 6-8-18 deleted and Granted Co 114 from 6	(9-8-18)
31-8-18	To Discharge Sqd. Co. 4.5.	(9-9-18)
9-9-18	Discharged from H.M.S. Fredericton.N.B. D.S.O.# 144	9-9-18

M.F. [redacted]192.
60M.[redacted]18 (D.P. 353).
1772-39-1243.

*Name ALLINGHAM, Harry ..... Rank Pte ..... Regtl. No. 409129 .....

Original unit 26th ..... Present unit 26th D ..... M. or S. S Age 33 ... Religion Pres ..... Fyle Depot 26 - A - 22 .....

Ref. H.Q. .....

Port, ship, and date of arrival Halifax, "Olympic", 14-11-17 .....

Next of kin Wife, Mrs. Harry Allingham, 99 Prince Wm. Street, St. John, N.B. .....

Address on leave as above .....

Address on discharge .....

Transportation issued Yes / No Date ..... Character on discharge .....

Previous occupation Painter ..... Date and place of enlistment 23-10-15, Sussex, N.B. .....

Diagnosis Hernia ..... Date of Medical Boards 17-11-17 .....

Date.	Remarks.	Pt. 2 Order No.
T.O.S.		
18-4-18	Posted to Details Company	9-
25-7-18	Posted to Hospital Section	91-100
26.7.18	" Sedentary Co.	96. 100.
25-7-18	Granted leave with subsistence 27/8 until 6-8-18	Co 103 (29-7-18)

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

(over)

Each issue of orders will be numbered consecutively throughout the year. A fresh series will be commenced with the first issue in each year.

Unit.....

DAILY ORDERS Part II

No.....

Station.....

N.B.—Every circumstance which affects a soldier's service or pay must be published **immediately** after its occurrence.

Date.....

Sub. No. of Order	SUBJECT	Regimental No., Rank and Name	Squadron Battery or Co.	Particulars of Casualties, etc., and date

N.B.—Copies to be sent weekly and on last day of each month to Officer *i/c* Records (Para. 1484A. K. R. & O. 1910); and daily, semi-weekly or weekly, to the Paymaster as necessity requires.

M. F. D. 873
200m.—12-15
H.Q. 1772—39-254

OFFICER COMMANDING ADJUTANT.

2

№102591

47474

Allen. A Pte

67th OVERSEAS BATTALION

— 20 —

Perforated sheet for Will from Pay Book of Reg.

No. 102591

Name Alfred Allen

Unit 67 Bn Western Scot.

Military Will.

In the event of my death
I give the whole of my
property & effects to
Master Wallie Norman
33a Coburg Street
Victoria B. C

Signature Alfred Allen Pte

Rank and Regt. Pte

Date Aug 5-18

✓

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form	B. 263	
Squadron / Battery / Company } Conduct Sheet,	"	B. 263a	
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.

Attestation Paper or Particulars of Recruit	Militia Form	W. 23 / W. 133
Proceedings on Discharge	"	B. 218

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.

This space to be for numbers.

WAR SERVICE BADGE Class "A" No. 275603 ISSUED

WAR SERVICE BADGE Class "B" No. 57602 ISSUED

134 14/5/19

Proceedings on Discharge.

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

No. 102591

Rank Private

Surname ALLEN Christian name Alfred.

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

Corps (Squadron, Battery or Company) 67th Battalion.

Date of discharge May.13th 1919

Place of discharge Montreal. QUEBEC.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 34 years 3 months.
Height 5 feet 6½ inches.
Complexion Dark
Eyes Blue
Hair Black.
Trade Hospital Orderly
Intended place of residence (To be given as fully as practicable.) 336 Coburg St Victoria B.C.

Descriptive marks

"NIL"

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

R.O.1420 Medically unfit for General Service.

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.

(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 Alfred Allen ..... *(Signature of Soldier.)*

(Date) 13/5/19 L&L 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

(Date) 13/5/19

(Signature) ..... *Captain;*

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

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.)

NO RESERVATIONS.

Alfred Allen

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.

Montreal

This space to be left blank for the Chelsea Number.

410

Army Form B. 268.

4

Proceedings on Discharge.

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

No. 102596. Army Rank Pte

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

Corps General Depot

Battalion, Battery, Company, Depôt, &c. 8th A.B. Coy. (Attached to 67th Bn 15-9-15)
(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 Canada

1. *Description at the time of discharge.*

Age years months
Height feet inches
Chest measurement { girth when fully expanded ins. / range of expansion ins.
Complexion
Eyes
Hair
Trade
Intended place of residence (To be given as fully as practicable)

Descriptive marks.

(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 being no longer physically fit for War Service

K. R. 70 para 392. Sect 16.

(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. Forms B. 268 40
A1502 Wt. W17176 M291 500,000 2/16 Sch. 31

[OVER.

102591 Pte Allan Alfred — Assigned Pay Mrs

DATE 1917	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
Bt. Forward.			420	40											420 40									6980	6221					132 01	288 39		180 -	108 39	
1-30 apr	30	10	33												33 00																321 39		195 -	126 39	
May 1/31	31	10	34	10											34 10																355 49		210 -	145 49	
June 1/30	31		33												33					205	4/6/17	24 Bn				535			535	383 14		225		
July 1/31	31		34	10											34 10																417 24		240		
Aug 1/20	20		22	-											22 -					616	9/5/17	4 Bde Sig		69 80	62 24	5 35			5 35	433 89				Tofofo 124th Bn eff 21/5/17. B066. 26/5/17
" 21			576	60											576 60										10 90.				142 71	445 99		255	190 99	
" 1/31	21		12	10											12 10																478 99		270		
Sept 30			33												33																				
			621	70											621 70														142 71						

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR 3	DR 4	BALANCE	DEFERRED PAY	SER. ALLCE. ENG.
		~~478 99~~							478 99	270	
Oct	P/Pte	34 10		a/R. 558 3/8 40 BBE.		4 46					
		34		" 465 11/5 "		7 13					
				" 629 10/9 "		4 46					
				E.P. 4 19/10		1 46					
				" 1609 24/10		19 47					
				A/R 692 27/9 40 3138 80		4 46					
				E.P. 2938 7/10		14 60					
		34 10				200 55			312 51	285 00	
Nov	Pte Pay	33 00		A/R. 744 10/4 40 3138		4 46					
Dec	" "	34 10		" 800 21/10 " "		4 46					
				" 800 " " "		13 38			357 31		
Jan 18		47 10		2A IN 3019 9 559 B. 30/11/17 + C.B.S.		22 30					
		34 10				28					
				C.R. 708 " Labour 15/12/17		3 57					
				" 731 " 31/12/17		4 46					
				2A 9 559 B C.R. 4790 25/11/17		13 38					
				2A 25 J.B.B. 915 10/11/17		4 46					
				" 69 B.B. 5377 8/12/17		4 46					
		34 10				30 61			360 80	315	

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR 3	DR 4	BALANCE	DEFERRED PAY	SER. ALLCE. ENG.
											366 40
	Bfd										
	Pby		DP		30 80						
				C.R. 767 " Labour 20-1-18		3 57					
				" 798 " 31-1-18		4 46					332 57 329.32
	Mch		DP		30 80						
				34 10							
				C.R. 826 " Feb 15-2-18		3 57					
				" 887 " 28-2-18		4 46					696 + 3H
						8 03					
						8 03					

MARRIED OR SINGLE S.

PLACE OF BIRTH London, Eng.

NAME AND ADDRESS OF NEXT OF KIN Waller, Norman Jun,
336 Corburg St., Victoria B. C. Can.

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

ADMISSIONS TO HOSPITAL, &c

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

REG'L. NO. 102591 RANK Pte. NAME Allen, Alfred.

IF IN PERMT. CORPS WHAT UNIT UNIT 67th B'n.

TRANSFERRED TO 124th C.I.B. DATE 21/8/17 AUTHORITY B065 28/3/17

TRANSFERRED TO 4TH Labour Bn DATE 1/1/18 AUTHORITY DO 107 15/4/17

TRANSFERRED TO DATE AUTHORITY

TRANSFERRED TO DATE AUTHORITY

PERMANENT FORCE ALLOWANCES

PLACE OF ATTESTATION Victoria, B. C. Can.

DATE OF ATTESTATION 13th Sept. 1915.

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

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

DISCHARGE DATE AND PLACE REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

69 B

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
			18	90											1890
Apr	30	1.00	30		30	10	3								
31/5	31	1.00	31		31	10	3	10							
30/6	30	1.00	30		30	10	3								
31/7	31	1.00	31		31	10	3	10							
31/8	31		31		31		3	10							
30/9	30		30		30		3								
31/10	31		31		31		3	10							
30/11	30		30		30		3								
31/12	31		31		31		3	10							
			27	50			27	50							
1917 1/1	31		34	10											
			35	50											
Feb	28	1.00/10	30	80											
Mch 31	31		34	10											
Carried Forward			420	40											

ACQUITTANCE ROLLS 1 NO.	1 DATE	2 NO.	2 DATE	3 NO.	3 DATE	4 NO.	4 DATE
1890							
33		36	5/4/17	675	26/4/17		
34/10		181	26/5	140	18/5		
33				229	14/6		
34/10		254	28/6	328	15/7		
34/10				431			
				398	5/8		
33		480	22/8	535	6/9		
		648	11/10				
34/10		599	18/9				
33							
34/10				900	7/12		
34/10		952	20/12	1048	10/1		
35 5 50							
3080		1129	25/1	1204	3/2		
34/10		1053	24/3				
420 40							

CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS
2677	730					
971	731					
	730					
973	730					
	146					
	973					
262	262					
262						
262						
	1395					
1046	262					
6456	5959					
262	262					
362						
6980	6221					

BALANCE CREDIT	BALANCE DEBIT	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
	1890			Balance from Canada
3407	1783			
1705	3488			
730	6058			
1703	4765			
1179	10056			
524	12832			
524	15718			
	19018			
1395	21033			
1308	23135			
12415				
524	25691	165	9191	
262	28839	180	10839	
132 01		180		

M. OR S. | PROMOTIONS, REDUCTIONS AND REVERSIONS AFFECTING DAILY RATE OF PAY AND ALLOWANCES | REGT. No. 102591 | RANK Pte. | NAME (IN FULL) Allen - Alfred

NEXT OF KIN | RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? N/a | DATE EFFECTIVE

TO WHOM PAID | RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY
T.O.S.	24-2-19	
Hospse	8-3-19	DO #711/2
L.w.s. to	14-3-19	
Bas. Co.	8-5-19	DO. 129/3

ORIGINAL UNIT C. E. F. 6th Bn.

PLACE OF ATTESTATION Victoria

DATE OF ATTESTATION 13-9-15

ASSIGNED PAY. $ Nil

PAYABLE TO

ADDRESS Khaki Club, 660 Dorchester St, Montreal

IF IN P. F. WHAT UNIT? X

TRANSFERRED TO | DATE | AUTHORITY

TRANSFERRED TO O/S France | DATE | AUTHORITY

DATE EFFECTIVE

RELATIONSHIP | ANY CHANGE IN ASSIGNEE OR ADDRESS

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE

DISCHARGED Montreal | PLACE | 13-5-19. DATE | DO 4-19-a 263 REASON | AUTHORITY | IF ENTITLED TO POST DISCHARGE PAY

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	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 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.	$	C.	TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.	PARTICULARS OR REMARKS
Balance from previous account from							597	03																											Cr. h.P. to 31-1-19
Mar 1-2-19																																				
31-3-19	59	1.10	64	90	13	60			67	53	8766	27					15	00													15	00		660	53	13 60 subs. 8-3-19 to 31-5-19
April	30	1.10	33	00					33	00	22140	29					15	00													15	00		678	53	
May	13	1.10	14	30	35	00	70	00	119	30							79	83													79	83				
									827	83	cp 31/3/19																				827	83				
											13/5/19																									

Other Credits: W. S. C. 420 00 | S. A. | Total 420 00

War Service Gratuity

Other Charges: W. S. G. 70 00 | S. A. | Total 70 00

Balance: Soldier 350 00 | Dependant

17/6/19	70 00		70 00	280 00	908570
13.7.19.	70 00		70 00	210 00	1068013
13.8.19.	70		70	140	1275571
15/9/19	70		70	70	1530165
13/10/19	70		70		1628109 Final
			420 -		

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

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY * ENGLAND OR CANADA.	SEPARATION ALLOWANCE. * ENGLAND OR CANADA.
EFFECTIVE DATE:–	EFFECTIVE DATE:–
AMOUNT:–	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.	

NAME:- ALLEN Alfred

NUMBER:- 102591

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Private

UNIT AND TRANSFERS

ORIGINAL UNIT:- 67 Bn

DATE ACCOUNT FIRST OPENED:- 1.4.16

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			Labour Bn
47.	27.7.18.	21.8.18.	Area Emp Co

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
16/2/18	397	Rem. £10.0.0	48 67				
31/5/18	1606	Bushy Park £1.0.0	24 67			Ledger Balce	73 34
3/11/19	2756	~~£5.0.0~~	~~24 33~~			2 Bc	66 77
~~3/11/19~~	~~2756~~	~~Sick Bun. 3/11/19 to 27/11/19~~	~~14 30~~				

DAILY RATES OF PAY AND ALLOWANCES

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

PARTICULARS OF RENDERING NON-EFFECTIVE:- Desch Canada and Bushy Park 2/h. 16 A/Sick. 27/11/19

MONTH 1918	PARTICULARS	CR 1	CR 2.	PARTICULARS	DR 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
27 March	Balance Bt. fwd.								409 6	344	
Apl	1 Pay	33							442 6		
		33								359	
May	"	34 10							476 7	374	
		34 10									
June	"	33							509 7		
				CR 356 2@10/- K 13/6/18	2 8 7				506 17		
				" 304 " 30.6.18	7 14				499 03	389	
		33			10 7 1						
Jul	P.C.	34 10							533 13		
				CR 382. 8 Bde C.T.C. 11 7 18.	3 5 7				529 56	404	
		34 10			3 5 7						
AUG	P.C.	34 10		A.R. D.N. 1007 H. 2. C. I. Wks. 22 7 18	4 4 6						
				" 670 23 Lab Group. 10-8-18	4 4 6				554 74	419	
		34 10			8 9 2						
Sept	P.P.	33							587 74	434	
		33									
Oct	P/P	34 10							621 84	419	
		34 10									
Nov	P/P	33							654 84		
				AR. 543 6. Stockport	9 7 3				645 11		
				AR 228. 16. 10 18. 8 Comp Coy	8 3 9				636 72		
				2466. 3. 12 18. Epsom	4 8 7				631 85		
Dec	P P	34 10			2 7 9 9				635 95	494	
				4414. 8. 12. 18. Bushy Park	4 8 7				631 08		
Jan	P P	34 10			2 7 8 6				635 18		
		101 20			2 7 8 6				635 18		
	Sat on Def Pay	37 16							732 34		

NUMBER 102591. RANK NAME ALLEN, Alfred.

Date	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Jan	B. Forward	37 16							732 3d		
				4726. 8.1.19. Bushy Park 1	24 33				708 01		
				Rem 397. 16/12/18 1.	48 67				659 3d		
				4606. 31.12.18. B. Park 2	487				654 47		
				8141. 8.2.19. Enad. 6	487				649 60		
				9355. 19.2.19. Enad 9	487				644 73		
				9 9	487						
		37 16			87 61						
				Sos Law. M. Jr. 24.2.19.							

B 2.0 .0 .2

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.)

he is fit for service abroad, but not general service.

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.

President.

PLACE Montreal, P.Q.M.D.#4.

DATE May 10th, 1919. } 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..... } Members

DATE.....

APPROVED BY
for *Assistant Director of Medical Services.*
DATE May 12th, 1919.

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, P.Q.M.D.#4 DATE May 10, 1919.

1. 1 (a) Unit D.D. No.4. (b) Regimental No. 102591 (c) Rank Pte.

(d) Surname ALLEN. (e) Christian name ALFRED

(f) Home address 660 Dorchester St. West, Montreal, P.Q.

(g) Next of Kin Walter Norman (h) Relationship Friend

(i) Address of Next of Kin 33a Government St. Victoria, B.C.

2. Age last birthday 45 Date of birth July 3rd, 1873.

3. Enlistment, or Appointment (if an Officer) (a) Place Victoria, B.C. (b) Date Sept.13/15

4. Personal description:

(a) Height 5-7 (b) Weight 145 (c) Complexion Medium (stripped)

(d) Colour of hair Brown (e) Colour of eyes Blue (f) Identification marks, Scars, etc. Appendix scar. Scar on right side of head.

5. Former trade or occupation Hospital orderly.

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
	3 8/12	

	Periods	
	From	To
Canada Invalid's statement.	13-9-15 4-3-19	15-3-16
England	15-3-16 11-11-18	7-8-16 4-3-19
France or other theatres of War	7-8-16	11-11-18.

7. Original disease, or injury D.A.H.

(a) Date of origin June 1918 (b) Place of origin France.

(c) Cause Unknown.

M. F. B. 227.
[illegible]

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.)

Slight shortness of breath on moderate exertion.

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.)

Complains of praecordial pain and shortness of breath on exertion.
Pulse at rest 100, volume and tension normal. B.P. 130 - 80; on bending 10 times rate increased to 136, returning to 100 in 2 minutes. Slight dyspnoea.
Finley
Heart examined by Col./and Lt.Col.Browne.
Heart normal.
Lungs normal. Wassermann negative.
Thinks he can walk 2 - 3 miles.

(*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*).)

Ever since June 1918 has complained of praecordial pain and shortness of breath. In hospital since Sept. 1918 - 8 months.

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*).)

Chancre in 1904.

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

Appendectomy 1908. Laceration right side of head as child.

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.)

N.A.

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? Six months.

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

Rest, medicine and diet.

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit? No.
(If the answer is "yes" state nature of treatment required and probable duration)

16. Can the former trade or occupation be resumed? Yes.
(If not, briefly state why)

17. Recommendations Fit for service, not general service.

C.A. Malcolm Capt
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 Private 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 nothing.

A.L. A. Allen Rank.
Signature of invalid examined.