C.E.F. REGIMENTAL DOCUMENTS

NAME ALLAN THOMAS PTE. REGT. No. 420018 UNIT 16 BN. H. Q. FILE No. 5038

CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
ATTESTATION PAPER (M.F.W. 23, 133 or 51)					DEATH
CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					CATEGORY
TRAINING HISTORY SHEET (M.F.W. 113)					
FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
REGT. CONDUCT SHEET (M.B.W. 263 or A.F.B. 120)					
COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 173)					DISCHARGE
DENTAL HISTORY SHEET (M.F.B. 465)					CATEGORY
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CARDS					
PAY-SHEETS					

H

H

40982

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

A-20018 4 C

ATTESTATION PAPER.

No. A 20018

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name?	Thomas Allan
2. In what Town, Township or Parish, and in what Country were you born?	Aberdeen, Scot.
3. What is the name of your next-of-kin?	Mrs A. Allan(Mother)
4. What is the address of your next-of-kin?	Rodhra Dyce, Aberdeen
5. What is the date of your birth?	26/6/85
6. What is your Trade or Calling?	Farm er
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.	No
11. Do you understand the nature and terms of your engagement?	Yes
12. Are you willing to be attested to serve in the Canadian Over-Seas Expeditionary Force?	Yes

x Thos Allan (Signature of Man).

W. T. Herald (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Thomas Allan, 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.

x Thos Allan (Signature of Recruit)

Dated Dec 26th 1914. W. T. Herald (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Thomas Allan, 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.

x Thos Allan (Signature of Recruit)

Dated Dec 26th 1914. W. T. Herald (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 Winnipeg this 26th day of December 1914.

J. Inglis (Signature of Justice)

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

Lieut Colonel (Approving Officer)

COMD'G. 43rd. BATT., C. E. F.

200 M.—8-14.
H.Q. 1772-1-13.

Description of Thomas Allen on Enlistment.

Apparent Age 23 years 6 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height	5 ft. 10 ins.
Chest measurement. Girth when fully expanded	40 ins.
Chest measurement. Range of expansion	3 ins.
Complexion	Fresh.
Eyes	Brown.
Hair	Dark Brown.
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 26th December 1914.

Place Winnipeg, Man.

W. Gardner Capt
Medical Officer.

*Insert here "fit" or "unfit."

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

CERTIFICATE OF OFFICER COMMANDING UNIT.

Thomas 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.

J. M. Mathewson Lieut. Colonel (Signature of Officer)
COMD'G. 43rd. BATT., C. E. I

Date 26th December 1914.

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

War Service Badge
Class "A" No. 185513

THIS IS TO CERTIFY that No. 420018 (Rank) Pte

Name (in full) Allan Thomas enlisted in

the 43rd Bn.

CANADIAN EXPEDITIONARY FORCE at Winnipeg on the 26th

day of December 1914

HE served in England & France with 16th Bn

and is now discharged from the service by reason of Demobilization. ~~Medical Unfitness.~~ Demobilization R.O. 1420 (c)

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

Age

Height 5 ft. 10 ins.

Complexion Fresh

Eyes Brown

Hair Dk. Brown

Marks or Scars Scar on outer surface right leg

Linear scar over rt. temple

Thos Allan.
Signature of Soldier

Date of Discharge

Dispersal Station "M" No. 10 Military District
MAY 8 1919

L. Chauvin
Issuing Officer

Lieut
Rank

Date 8/5/19 19

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.B. 39A.
1049-D.P.-300M-11-18.
H.Q. 1772-39-882.

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

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

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

516

P. 880.

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

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

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, if soldier discharged in Canada, this Declaration is to be returned to THE DISTRICT PAYMASTER OF THE DISTRICT IN WHICH THE SOLDIER WAS DISCHARGED, or if soldier discharged in England to be returned to Paymaster General O.M.F. of C., 7, Millbank, London, S.W.

1. Christian names Thomas 2. Surname Allan

3. Rank L/Cpl. 4. Original Unit 43rd Batt. 5. Reg. No. 420018

6. Address, in full, to which future payments of gratuity are to be forwarded 442 Boyd ave. Winnipeg

7. Date of enlistment in the C.E.F. 26.12.14

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

9. Relationship of such dependent —— Nil

10. 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? —— Nil

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 particu ars of one such unit and dates of service overseas with such unit:— —— Nil

—— Nil

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? —— Nil

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

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 43rd 26.12.14 — 17.7.15
16th Batt. 17.7.15 — 27.2.17 No 9 C.G.H. 27.2.17 —
Still Serving

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

5434. Wt. /30P. 250,000(8). 2/19. S.O., F.Ltd.

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

19. Have you already received any payment of Post Discharge Pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid No

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

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

22. Are you entitled to receive, or have you received any gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled No

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

(b) If so, was such reversion in consequence of misconduct or inefficiency? No

24. Are you now serving in the C.E.F.? Yes. If not, give:—(a) Date of discharge 8-8-19 (b) Reason for discharge

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 9 C. G. H.

26. Did you at any time serve at the front in an actual theatre of war? If so, give particulars of one unit in which you served at the front, and dates of such service with that unit 16th Can. Batt. 17.7.15 — 27.2.17.

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

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

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

Signature of Applicant: Thomas Allan

Place of Residence: 442 Boyd Avenue Winnipeg Manitoba

Declared before me at: [illegible]

This 18th day of March 1919

Signature of Barrister of the Supreme Court Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner for the Administration of Oaths under P.C. 2767, dated 11th Nov., 1918.

[illegible] Col.

O.C. No. 9 Canadian General Hospital, Kinmel Park, Rhyl.

POST DISCHARGE PAY.

Date paid.	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
			$20.00	35.000
			70.00	

Certified Correct.

District Paymaster.

Original Full Temporary

Army Form B. 178.

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

MEDICAL HISTORY of

Surname Allen *Christian Name* J.

TABLE I.—General Table.

Birthplace { Parish..... / County .....

Examined { on.....day of.....191 , / at.....

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

Trade or Occupation.....

Height .....feet.....inches.

Weight.....lbs.

Chest Measurement { Girth when fully Expanded ..... inches. / Range of Expansion ..... inches.

Physical Development .....

Vaccination Marks { Arm..... RIGHT | LEFT / Number ..... | .....

When Vaccinated .....

Vision { R.E.—V = ... / L.E.—V = ...

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

.....

.....

(*b*) Slight defects but not sufficient to cause rejection—

.....

.....

Approved by .....

Rank .....

Medical Officer.

Enlisted { at..... / on ..... day of .....191.....

	Corps	Regtl. No.
Joined on enlistment	Can C.	43008
Transferred to		

Became non-effective by.....

.....

on ..... day of .....191.....

(*Signature*).....

(*Rank*).....

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

Date	Brief details, and Signature
12-3-19	Old Fr. Rft Fitter B ii

TABLE IV.—Service Table.

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

W. P. Griffith & Sons Ltd., Printers, Old Bailey, E.C.
[1188] W11425/M1166 200m 12/16R 45 59

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

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
Military Hospital, Shorncliffe.	4	4	18	6	4	18	Latent Syphilis	2.	Discharged as Duty Patient To attend Weekly for concurrent Course of 606 & Hg Cream 3. Injections	R Kennedy Capt. RAMC

Forms
I. 1237
11

C.H. 20

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
T 4454	420018	Pte	Cullan	Thomas.
Year	Unit.		Age.	Service.
	16 Bn.		37	2y 12

Station and Date.

2 JAN 1917 RAMSGATE

Disease GSW rt ankle

Occupation – Farmer
Enlisted – Sept. 8th 1914 / Winnipeg
Arr. in England – May 31st 1915
To France – July 18th 1915
Wounded – Oct 8th 1916 – Somme
To England – Oct 13th 1916
Dentistry –
Hospitals – 3rd Can Gen Boulogne – 4 days
– Royal Herbert Woolwich – 6 weeks
– R.A.C. Epsom – 9 weeks
– G.C.S.H. Jan 26/17.

Complaint – weakness Rt ankle.
History – wounded in Rt ankle by shrapnel bullet. The bullet entered Rt leg about 2" Rt ext malleolus fractured Rt fibula lower end exit 2" below Rt ext malleolus near Achilles. Pt had no operation removal shrapnel. Pt had leg in splint six weeks
Present condition – movements Rt ankle & foot normal. – Pt says ankle feels good but is weak especially when he walks far. Says ankle swells if he walks far. – V.D. neg. General condition Good

A Blythe Capt

29 JAN 1917 Admitted here – Complains heel + inside of ankle

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

(23205) Wt. W 4234—M 627. 1,000,000, 8/16. C.F.&S. Forms/I. 1237/11.

P.T.O.

Station and Date.	
	Office exercises & warnings. T A Chapman Lieut
21/1/17	Urinalysis Blot / Turbid / Reac / acid / S.G / 1035 Albumen
8/2/17	Referred to Nursing Staff.
8 FEB 1917	Is over age for service & unfit for work and sent again. Is have tibial class at Gym. Continue Massage A.M.P.
	Ready for B' class. Report to Board Monday A.M.P. T H Chancellor Adt Capt
19-2-17	Med. Board finding B II

ORIGINAL.

A. 20018 Pte 35996 052

MEDICAL HISTORY SHEET. 473.28.10 A.6

Surname Allan. Christian Name Thomas.

Examined on 26 day of December. 1914. at Winnipeg.

Approved by J Sloan Capt. M.O. 24.10.16

Birthplace City or Town Aberdeen. County Scotland.

Apparent age 28.

Trade or occupation Farmer.

Height 5. Feet 10. Inches.

Weight Lbs.

Chest measurement Minimum 37 inches. Maximum expansion 3. inches.

Physical development

Small-Pox Marks

Vaccination Marks Arm Right. Left. Number

When Vaccinated last

(a) Marks indicating congenital peculiarities or previous disease

(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.
		M.O.

The Medical History sheets of all men proceeding overseas, must be returned by the Officer commanding their unit to the Records Office when they leave England.

Lieut.-Col. In Charge of Records, Canadian Contingent.

Date	Result	Vaccinations.
26/2/15	Good.	J Sloan M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
31/3/15 9/4/15 12/5/15	Good.	J Sloan M.O.
		Blackett M.O.
H 417	TAB 1	Capt A.E. Blackett signed. M.O.

Enlisted on 26. day of December. 1914. at Winnipeg.

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	43rd Batt. C.E.F.	A. 20018. 420018		
Transferred to..	16th Batt.			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
Seamens Hosp	14-2-17	S.S.W. Rheumatism	Bn W.T.M. MacKinnon Major
No 2 Can. C.G.H.	17/4/18	" " "	Changed to B-I for Rheumatism Capt Canc
do do	14/9/18	" " "	PRESIDENT, STANDING MEDICAL BOARD.
do	12-3-19	" " "	B-I Subject to Capt Canc

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. 6. 313.

100M.—1-15.
H. Q. 1772-39-439.

Entries in Red Ink made from Attestation Sheets.

Aug 12. 15. R.M. Shaw for D. D. M. S.

Surname Allan Christian Name Thomas

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.
Winnipeg.	26/12/14.	12	4	15	3	5	15	Influenza.	21 days.		
Roy. Herbert Hospital, Woolwich.		13	10	16	22	11	16	G.S.W. Rt. Leg	41	Had comminuted fract. fibula a little above ankle joint. Tibia intact. Eusol dressings. Wound healed. Good bony union	H. Crasta Surgeon Capt. I.C.B. 11 W Kent Regt
C.C. Hosp	Epsom	22.	11	16	26	1	17	Do		Transferred to Ramsgate	J.M. Burn Capt. C.A.M.C.
G.C.S. Hp. Ramsgate		26	1	17	22	2	17	Do.	27	Trans. C.C.A.C. Hastings	G.H. Meanchester Capt
Military Hosp. Shorncliffe		18	5	17	25	5	17	Circumcision	7	To Unit & Duty Circumcised	C. Parsons Capt.
St. Midit Hosp.		29	9	17	10	10	17	Debility	12	To Unit & Duty.	J.A. Beaumier Capt.
MILITARY HOSPITAL, [illegible] A. SHORNCLIFFE.		14	11	17.	19	11	17	Syphilis	5	To Etchinghill — Can. Mil. Hosp.	J.A. Beaumier
CANADIAN HOSPITAL, ETCHINGHILL, LYMINGE.		19.	11	17	30.	11	17	Latent Syphilis	12	Dis. to Unit as out Patient	A.V. Greaves Capt

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

NAME OF SOLDIER (Block letters) ALLAN. T.

REGIMENT 16. Can Bde RANK L/Cpl. No. 420018

Date of Examination in England 14-4-19 | 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.

26-M

PRESENT DENTAL REQUIREMENTS

1. FILLINGS

2. EXTRACTIONS

3. CROWNS

4. DENTURES

(*a*) Full Upper

(*b*) Part Upper

(*c*) Full Lower

(*d*) Part Lower

A/ D.J. Lawson Capt

HAS HE EVER REFUSED DENTAL TREATMENT ?

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

BRAMSHOTT CAMP
HANTS.

Signature of Dental Officer D.D. Henderson Capt

25M.—12-18.

H.Q. 1772-39-950

Ottawa, 27-10-20

From:

The Adjutant-General,
Canadian Militia.

To: 420018 Thos. Allan
442 Boyd Ave
Winnipeg

Sir:

Enclosed herewith please find Military Will executed by you while in the C.E.F., and returned, the same being your own property.

Lieut.,
for Lt.-Col.,
Director of Records,
for Adjutant-General.

30-8-20.
EBM.

Form R.A.O. 6746
1228-180M 29/11/16.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at 19-2-17 1916.

No. 420018 Rank Pte Name Allen, Thos.

Local Unit 14th Res.Bn Overseas Unit 16th Bn Age 37

Examination held at Granville Hosp.

DISABILITY.
Overseas ~~Local~~.
(scratch one out)

G.S.W. rt. ankle.

PRESENT CONDITION.

Shrapnel removed.
Complains of weakness in ankle and says he is not able to walk far. General condition good.

Phys. exam. Evidence of scars of wound operation.
Otherwise apparently normal.

BOARD RECOMMENDS:— B-11

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

Signatures:—

Members { W.M. MacKinnon, Major. President.
H. Coppinger, Capt.

APPROVED

Dated at 22 FEB 1917 1916.

S L Wacker Capt.
FOR A.D.M.S. CANADIANS, SHORNCLIFFE. For A.D.M.S.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at ..... 19..

Name .....

Rank .....

Local Unit .....

Overseas Unit .....

Age .....

Examination held at .....

DISABILITY.

Overseas Home.

(Service (use one))

PRESENT CONDITION.

BOARD RECOMMENDS:—

1. Fit for Duty.....

2. Fit for duty after ..... weeks' physical training

3. Fit for Temporary Base Duty..... weeks

4. Fit for Permanent Base Duty.....

5. Discharge .....

Signatures:—

.....President.

.....

Members

.....

Dated at ..... 1918.

APPROVED

.....

.....

For A.D.M.S.

Date 30.11.17

Reg. No. 420018,

Rank. Pte

Name. Allen J.

The marginally noted soldier discharged to you this date, has been placed in Category, B 1/2 III

Capt. C.A.M.C.
for Officer Commanding
Canadian Hospital,
Etchinghill, Lyminge.

Report No. 19373

Army Form W. 3212.
(In books of 100)

Regtl. No., Rank and Name } 420018 L/Cpl Allan T. Age 37 Corps C.A.M.C.

Disease V.D.S. Hospital No 9 Ca. General.

To Officer ~~i/c~~ Laboratory. Ward Kinmel Park.

Please carry out an examination of the accompanying specimen of Blood

with special regard to Wasserman

Nos. of previous Reports (if any)

In Pathological Reports a résumé of clinical history, treatment or progress since last report should be given.

Date 20-1-19 R.A.Kennedy Capt.C.A.M.C.
O. i/c Ward.

LABORATORY REPORT.

DEPARTMENT OF PATHOLOGY
UNIVERSITY OF MANCHESTER.

The serum reaction is positive.

Date of Examination 23 Jan 1919 Sgd. H.R.Drury ?
O. i/c Laboratory.

W6591—P1803 300,000 10/18 HWV(iM374)

Report No. 19573 Army Form W. 3212.
(In books of 100)

Regtl. No., Rank and Name } 420018 Pte Allan J. Age 37 Corps C.A.M.C.

Disease V.D.S. Hospital No 9 Canadian General

To Officer i/c Laboratory. Ward Tunnel Park

Please carry out an examination of the accompanying specimen of Blood

with special regard to Wassermann

Nos. of previous Reports (if any)

In Pathological Reports a résumé of clinical history, treatment or progress since last report should be given.

Date 20-1-19 R C Kennedy
O. i/c Ward.
C.A.M.C.

LABORATORY REPORT.

DEPARTMENT OF PATHOLOGY.
UNIVERSITY OF MANCHESTER.

The Serum reaction is positive.

Date of Examination 23 JAN 1919

R C Kennedy
CAPTAIN R.A.M.C. (T.)
O. i/c Laboratory.

(8690) W. 1369/P1107. 6,000 Bks. 8/5/18.—R. & J., Gy. (E 3123.)

LABORATORY REPORT

Canadian Hospital,
Etchinghill, Lyminge.

Date 30.11.17.

TO WHOM IT MAY CONCERN

No 420018.

Rank Pte.

Name Allen J.

Unit C.A.M.C.

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

Capt:CAMC.
for Lieut-Colonel,CAMC.
O.C.,Canadian Hospital,
Etchinghill.

CANADIAN HOSPITAL
ETCHINGHILL, LYMINGE.

ENG.W?113.

To. D.D.M.S.Canadians,
86 Strand W.C.
Dated Tuesday.....1917.

HOSPITAL.	Number in Hospital at...	
	For Invaliding	For Discharge
Canadian Hospital, Etchinghill, Lyminge.		
TOTAL.		

Military Hospital,
Shorncliffe.

191 .

To:- Officer Commanding,
Military Hospital
Shorncliffe

Pte Allen T. 420018
C.A.M.C.

The marginally named soldier is now free from Infection and able to rejoin Unit.

To complete his course of Treatment it will be necessary for him to report to this Hospital at 9.00 a.m., on the dates mentioned below.

12 APR 1918

19 APR 1918

Capt. CAMC. for,
Officer-in-Charge,
Military Hospital,
Shorncliffe.

Canadian Casualty Assembly Centre,
Hastings.

With reference to attached Casualty Form you will notice that entry of attachment to your Unit is incomplete.

This is due to the fact that C.C.A.C. Part II Daily Orders are not issued until after mnn and documents have been dispatched.

The Daily Orders shewing entry will reach you to-morrow, so kindly complete form when same comes to hand.

A.O. Horne

Lieut. and Adjutant
For Officer Commanding
Canadian Casualty
Assembly Centre.

(0377) W6304/M781 7,500m. 10/16 C. & Co. Ltd.
Forms
C 348
388

Army Form C. 348.

P.A 1796

MEMORANDUM.

From O.C. Etchinghill Hosp

To O.C. Mobile Hospital
Shorncliffe

From O.C. Canadian Hosp
Shorncliffe

To Registrar Etchinghill Hosp
Lyminge

ANSWER.

21/11/ 191

22nd Nov. 191

Kindly forward Medical History Sheet & signed statement of category for 420018 Pte Allan Y of your unit admitted here on 19-11-17 Please

L.O. Reeves
Capt. C. A.M.C.

Pte. Allan's Category is B1.
For your information
Mrs forwarded to you on 20-11-17 Please

A.M. Brodie Lt
for O.C. No 9 Can Gen Hosp
Shorncliffe.

REGISTRAR. CANADIAN HOSPITAL.
ETCHINGHILL, LYMINGE.

B. C

Military Hospital

[illegible]

HOSPITAL STOPPAGES

No. 4[illegible] Rank [illegible] Name Allen T. Unit 6.A.mf.6.

Date of Admission 19.11.17. Date of Discharge 30.11.17.

To- Officer Commanding.

6.A.mf.6. Dep't.

Please note that the above mentioned, has been treated here for ~~V.D.~~ from 19.11.17.. to 30.11.17..and is Not subject to forfeiture of 60c. per diem for the period mentioned.....days $.....

This has not been entered in his Active Service Paybook.

~~Please have the necessary entry appear in your Pt.II Daily Orders.~~

9

Capt. C.A.M.C.
for Officer Commanding
Canadian Hospital,
Etchinghill, Lyminge.

Canadian Hospital,
Etchinghill, Lyminge.

(Date) Nov 29th .....1917.

To:- Officer Commanding,

Camb.

TO BE RETAINED BY MEDICAL OFFICER OF UNIT.

No. 420018

Name Allan Pte

Dates:

Dec 12th

Dec 19th

Jan 2nd

Jan 9th

Blood Test Jan 14th

The marginally named is at present not infectious. To complete his cure it is essential that he report here for further treatment on the marginally noted dates.

To effiaiently and safely give the remaining "606" treatment, the patient should have 24 hours light duty after each injection. If the reaction is severe, 48 hours.

If seven days after his Blood Test he is not recalled by us, his WASSERMANN can be marked "NEGATIVE".

In case the marginally named reports to another hospital for the completion of his treatment, A.F.I.1238 will be forwarded on application to this hospital.

Captain, R.A.M.C.,

For Officer Commanding,
Canadian Hospital,
Etchinghill, Lyminge.

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 43rd Battn: C.E.F.

Regimental No. A. 20018 Rank Pte. Name Allan Thos.

Enlisted (a) 26/12/14. Terms of Service (a) D. of W. C. E. F. Service reckons from (a) 26.12.14

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				
		26.4.19. T.O.S. Dispersal Station M.	D.O. 132 Pa 2.		
		and Dispersed 8.5.19.	do	"	3
		Ja. Dack Lieut. for O. C. 10 District 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				

(9178)—Wt. W12165—2146.—1,250,000.—2-15.—C. & G. Forms B. 103/1.

16TH CANADIAN INF. BATTALION

169

Army Form B. 103.

W.S.B. CLASS A

Casualty Form—Active Service.

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

Regiment or Corps 43rd Batta. C.E.F.

Regimental No. A20018 Rank Pte Name Allan Thos.

Enlisted (a) 26/12/14 Terms of Service (a) Dur W Service reckons from (a) 26-12-14

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) Tel

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 May 1915			
		Disembarked May 1915			
31/7	Pt 2 Orders	Arrived in France and Taken on Strength	16th Bn	17/7	No 21 31/7
24.3.16	O.C. Bn	Forfeits 5 days pay for "when on Active Service Insolence to an NCO		22.3.16	B206. No. 14. 31.3.16
21.4.16 12-10-16	O.C. Bn O.C. Bn to Duty	Police Duty Poperinghe Rem. Leg. St. Comp. Fract. Shrapnel of Patella Rt. Knee. in Act.		25.8.16 12.10.16	B213 W30/3/6938. 3 Leg 61 of 19-10-16. Part 2 Orders
		J.W. Hogan Capt. for Lt.-Col., A. A. G. Canadian Section, G. H. Q. 3rd Echelon, B. E. F.			
	28-10-16	Taken on strength C.C.A.C. Pt. II D.O. No. 44 [illegible]			
26-2-17	ATTACHED ~~TRANSFERRED~~	FROM C.C.A.C. TO Mil. Hosp. Shorncliffe PART II D.O. No.			A.W.O.C. Lt for O.C. C.A.C.
28/2/17	Shorncliffe	Attached to Mil. Hosp	Shorncliffe	27/2/17	Part II D.O. 60.
18-5-17	M. H. S.	Awarded one Good Conduct Stripe for Two years Good Conduct	Shorncliffe	16-5-17	Part II D.O. 137

(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				
28-5-17	M.H.S.	Ceases to be Attached on return to Camb. Depot	Shorncliffe	22-5-17	Part 2. D.O. 147.
28-5-17	M.H.S.	T.O.S from Camb. Depot.	Shorncliffe	22-5-17	Part 2 D.O. 147
20.7.17	M H S	S O S on Transfer to C A M C Depot	Shorncliffe	1 7-17	Part II Do 200
20.7.17	M H S	Attached to Mil Hosp Shorncliffe from C A M C Depot.	Shorncliffe	1 7-17	Part II Do 200.
26.9.17.	No 9 C.G.H. Shorn.	T.O.S. from Camc. Depot. on ceasing to be Att. to Mil Hosp.	Shorncliffe	24/9/17	Pt II D.O. 3.
28.7.18	No.9. Can.Gen. Hos. S'cliffe	Appointed A/L/Cpl. with pay and allowance effective 12.5.18. Auth. AMD. 1c/29-4-9. Dated 23.7.18.	Shorncliffe.	28.7.18.	Part.2.D.O.145.
4/1/19	No 9 C G H Kinmel Park	Awarded 1914 & 1915 B E F Ribbon & Star	Kinmel Park	27/12/18	Part 2 DO 1
31/3/19	No. 9 C G H Kinmel Park	S.O.S. to 16th Batt Bramsbott	Kinmel Park	30/3/19	Part 2 DO 23
	SOS	Taken on Strength Dwing CCC 30/3/19 [illegible]			[illegible]

M.T.S. EMPRESS OF BRITAIN EMBARKED 23-4-19

PROCEEDED TO CANADA

26/4/19 [illegible]

[illegible]

Form R 122.
8750—15M—25-4-17.

2nd Page of Record.

Rank Name Allan. Thomas. Reg'l No. 420018.

Unit 43rd. Bn. If in perm. Corps What Unit? } Married or Single Single.

Place and Date of Enlistment Winnipeg, 26th Dec. 1914. Place of Birth Scotland.

Name and Address, Next-of-Kin Mrs. A. Allan, Bodachra Dyce, Aberdeen, Scotland.

Relationship Mother.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

N/E. R B / 20018
File R L
Category O. R. C.E.F.

Discharge, Date and Place Reason Character

H. W. V., Ld.—11319-17. First Page Filed in Envelope.

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" Perm Grade Pte. a/Rank. Pte.				
5. 12. 17.	Came.	Disch. Can. Hp. Etch'hill.	Lyminge.		1. 12. 17.	C.L.C. 81. V.D.S.
28. 7. 18	#9 C.G. Hosp.	Apptd A/L/Cpl with pay	S'cliffe		12-5-18	Pt II D.O. 145.
31-3-19	#9 C.G. Hosp	SOS to 16th Batt	Kemmel P/K		20-3-19	— 23.
		29 4 19 D W CCC SOS TO	CANADA		26 4 19	D O 31
		Canada 56-11-93			26.4.19	

Came Cas

#20018. Allan. T.

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.					

Camle.

E 23433

R—122.

Rank Name ALLAN. Thomas. Pte. Reg'l No. 420018.

Unit 43rd Bn. If in perm. Corps, What Unit? Married or Single Single.

Place and Date of Enlistment Winnipeg. 26th Dec 1914. Place of Birth Scotland.

Name and Address, Next-of-Kin Mrs A Allan. Bodachra Dyce. Aberdeen. Scotl

Relationship Mother

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place 114 Reason Character

OS B-551

1/11/16	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
			Embarked			
	31/7/15.	O.C. 16th	Taken on strength, 16th Bn.	France	17/7/15	Pt. II O #21.
	31.3.16	"	Forfeits 5 days Pay - Insolence to an N.C.O	Field	24/3/16	do #14
	19/10/16.	16th Bn.	Adm No 3. Can Gen Hosp.	Boulogne.	10/10/16.	S.W. R Foot. C.L. A 471.
	25/10/16.	do.	Transfd Royal Herbert Hosp.	Woolwich	13/10/16.	G.S.W. Leg. C.L. B 196.
	19.10.16.	—	Wounded. Transferred to C.C.A.C., Folkestone.		12.10.16.	Pt. II - 61. W.
	28.10.16.	CCAC	Taken on strength.	Shoreham	13.10.16	" 473-A.
	24.11.16	16th C.A.M.C.	Discharged from Royal Herbert Hosp	Woolwich	22.11.16	C.L.B. 221 S.W. R Foot
	3-10-17.	Mil. Hosp.	Adm. to Hosp.	Shorncliffe Pte	29-9-17	P.T.O. C.L. C. 27. N.Y.D. Q.

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
8.12.16	16 Bn	Adm CCH from CCAC	Epsom	23.11.16	CLB 233 GSW R Ankle
1.2.17	"	Trans. to Gran Can Spec Hosp	Ramsgate	27.1.17	" 277 Do.
23.2.17	"	Dis Gran Can Spec Hosp	do	22.2.17	" 296 Do
25.2.17	CCAC	REPORTED TO C.C.A.C.	Hastings	23.2.17	PIIO 95
1.3.17	do	Br Com Shorncliff Mil Hos	do	27.2.17	PIIO 102
1-3-17	Sh. Mil Hp	Att for duty from CCAC	S'Cliffe	27.2.17	" 60 + Pt IIO-102 d/1317 CCAC Pte.
1.5.17	CCAC	SOS to Man R Dep + att S.M. Hp	Hastings	1.5.17	" 168. (RL 6.44-49) 10.6.17
18.5.17	~~Sh Mil~~ Hp	Granted Good Conduct Bge	S'Cliffe	16.5.17	" 137
9.5.17	Man R	T.O.S. on com to S.M. Hp	S'ffe	10.3.17	" 61
19.5.17	—	Adm SM Hp	—	18.5.17	— 138
26.5.17	—	Disch S.M. Hp	—	25.5.17	" 145
28.5.17	Sh —	Ceases to be att on ret to Man R D	—	22.5.17	" 147
26.5.17	CAMC Dep	TOS from Man R D + posted to S.M. Hp	Westenhanger	22.5.17	" 146
—	~~Sh~~ Mil Hp	TOS from CAMC Dep	S'ffe	22.5.17	" 147
25.5.17	Man Reg	Ceases to be att SM Hp + SOS to CAMC Dep	S'ffe	22.5.17	" 77
12.7.17	CAMC D	T.O.S from & on comm to S.M.H.	W'hanger	1.7.17	" 193. SM Hosp Pt. II 200 7 20/7/17
24.9.17.	"	Ceases to be shown. On Com. & S.O.S. on posting to 9 C.G.H. S'cliffe	Pte. "	24.9.17	" 267 & 3. 9 C.G.H. 7 26/9/17
→ See previous page.					
12-10-17	CAMC	Disch from M. H.	S'cliffe	10.10.17.	C.L.C. 35. N.Y.D.Q. (Debility) CL C.40
20-11-17	Do.	Adm. Mil Hosp.	Pte. Do.	15.11.17	C.L.C. 68. N.Y.D.Q.
23-11-17	Do.	Adm. Can Hosp. Ex Mil. Hosp. S'cliffe	Pte Lyminge	20.11.17	C.L.C. 71 V.D.S.

A-305

43364

Ref. No. 37902.

MmilitIA AND DEFENCE

ASSIGNED PAY.

To whom Mrs A. Allan (Mother)

Address Bodachra Dyce,
Aberdeen, Scotland

Rate $15.00

Date to Commence 1st December 1916.

By whom assigned Allan, T.

Regtl. No. 420018

Rank Pte.

Corps, &c. C.C.A.C - 16th Bn.

PAYMENTS.

Month.	Year.	Cheque No.	Amt.	Pay Sheet Deduction.	REMARKS.
Jan.	1916				
Feb.					
March					
April					
May					
June					
July					
Aug.					
Sept.					
Oct.					
Nov.		2			
Dec.		302073.	15.		
Jan.	1917	306865	15		
Feb.		347380	15		
March		390386 OK.	15		
April			60		
May					
June					
July					
Aug.					

Checked N Thackeray Pay Sgt. [illegible]

ASSIGNED PAY.

By whom assigned Allan J. Pte.

Regtl. No. 420018. C.A.S.C. 16th Battn

Month.	Year.	Cheque No.	Amount.	Pay Sheet.	REMARKS.
Sept.	1917				
Oct.					
Nov.					
Dec.					
Jan.	1918				
Feb.					
March					
April					
May					
June					
July					
Aug.					
Sept.					
Oct.					
Nov.					
Dec.					
Jan.	1919				
Feb.					
March					

P—56

Rank Pte Name ALLAN. Thomas. 9 Gen Reg'l No. 420018.

Unit 43rd Bn. If in perm. Corps, What Unit? Married or Single Single.

Place and Date of Enlistment Winnipeg. 26th Dec 1914. Place of Birth Scotland.

Name and Address, Next-of-Kin Mrs A Allan. Bodachra Dyce. Aberdeen. Scotl

Relationship Mother

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
July 1	July 31	31	1-	31	31	.10	3 10	1 13	35 23							35 23	$1.13 Cr from June
		Adjustment of Exchange														35 23	
1.8.15	31.8.15	31	~	31	31	~	3 10		~~34 10~~ ~~69 33~~							69 33	
Sept 1	30	30	~	30	30	~	3		33		✓	8 03			8 03	94 30	
Oct 1	31	31	.	31	31	~	3 10		34 10		✓	5 23			5 23	123 17	
Nov. 1	30	30	.	30	30	.	3		33		✓	60 24			60 24	95 90	
Dec 1 1914	31	31	.	31	31	.	3 10		34 10		✓	14 82			14 82	115 18	
Jany 1	31	31	.	31	31	.	3 10		34 10		✓	5 24			5 24	144 04	
Feb 1	29	29	.	29	29		2 90		31 90		✓	7 85			7 85	168 09	
Mch 1	31	31		31	31		3 10		34 10		✓	7 85	✓	5 50	13 35	188 84	Forfeit 5 days Pay 22.3.16 Insolence to N.C.O PC 14. 31.3.16
		245					24 50	1 13	303 63			109 29		5 50	114 49		

BALANCE TRANSFERRED TO NEW LEDGER

Checked W.P.H.

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

FILE No. F.D.

SUBJECT

Reg Scr 10-3-48.

CHARGED TO	PER	DATE	CHARGED TO	PER	DATE
		10-4-48			
		Mailed to Local Board			
		DVA			10-5-48

B-634661

Crepeau, Andre.

1 set.

VLA List 8-5-48.

SSB 10-5-48.

Mr Elmore.

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

O.S.S. 3A
100M—12-45 (8488)
H.Q. 1773-45-1

FILE No. K 4029.4 K5-75 2 F.D. (5) 2 sets

SUBJECT

Kolomay George

CHARGED TO	PER	DATE	CHARGED TO	PER	DATE
D v a		2-6-48			
Key List		1-6-48			
42 001 F					
Allen, Thomas					
St		30-6-48			

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

O.S.S. 24
100M—12-45 (8155)
H.Q. 1771-4-4

EPITOME OF HOSPITAL TREATMENT.

	Hospital	Adm
1.	9 C.G Thorncliffe /	4.4.18.
2.		
3.		
4.		
5.		
6.		
7.		

Ch. 20.4.18 C192. Note Diagn now rpt to be V.D.S. Latent.

D.M.S. 1300.

Surname	Christian Name or Names	Reg. No.
Allan	TL	420018

Rank	Unit	Co.	Troop	Batty
Pte.	16th Bn.	C.A.M.C. (9 G)	Dep.	

Hospital B. C. G. H. Boulogne. Date of Admission 10. 10. 16.

Royal Herbert Woolwich 13.10.16

Transferred Can Div Conv Epsom Hosp. 23.11.16

Granvill Spec. Ramsgate Hosp. 27-1-17

Shorncliffe Can. Mil Hosp. 29. 9. 17

" Mil Hosp. 15. 11. 17.

Can. H. Etch. Syminge. 20-11-17

Diagnosis G.S.W. Legs.

(1) Later Diagnosis (if changed) S.W. R. Ankle.

(2) NYD "Q"

(3) Debility RW

Additional Diagnosis: if more than one state present V.D.S. HO

~~NYD. VD. "Q"~~

VDS, Latent. HO Dis 22-11-16

DISPOSITION Date

ch 19. 10. 16 A 471. Dis. 22-2-17.

C.L. 25.10.16 B196 Dis 10-10-17

REMARKS Dis 1-12-17

" 6. 4. 18. ✓

24-11-16 — B221

8. 12. 16 B/233

1-2-17 B277.

23-2-17 B296.

4. 10. 17 C27

" 13. 10. 17 C35

19 10 17 C40 " Nose giving diagnosis

21. 11. 17. C68 (1)

" 24-11-17 C71 (1)

" 6-12-17 C81 (2)

9. 4. 18 C182. ✓

A.M.D. 2 DEPT.

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

R

R. 149.

Name ALLAN, Thomas *Rank* Pte. *Reg. No.* 420018

Unit 16th. Battalion

Scot.

Next of Kin Mrs A. Allan, (Mother) Bodachra Dyce Aberdeen

Date 1916	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
				18-10		
10-10	No.3 C.G.Hsp.	Bou'gne	SW R.Foot	A471	03112	19-10
13-10	Royal Herbert Hos.	Woolwich	do	B196	24/10	
22-11	Discharged.		do	B221	23/11	
23-11	Can. Dw Con. Hs	Epsom	"	B733	7/12	
27-1-17.	Gram.Can.Spec.Hsp.	Rams.	SW R.Ankle	B277.	3/2.	
22-2-17.	Discharged		do	B296.	12/2.	

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

D.M.S. 1313.

G

ADMITTING CARD.

Regt. No. 420018 A. & D. No.

Rank Pte

Name Allan J.

Corps 16

Religion Pres

M. H. Rec'd 24/11/16 M. H. Requested 13/11/16 M. H. Ret'd

Disease L Sw Rt Ankle

Admitted 22 NOV 1916 Woolwich RH

Discharged

Place in Hospital

Transferred Ramsgate 26/1/17.

Results

P.T.O.

REMARKS:

23/11/16 Rt ankle stiff Spl X & carryon.
5/12/16 Improving carryon
11/12/16 Inter. X. & LD.
19/12/16 Carryon.
29/12/16 Continue
3/1/17 Continue
16/1/17 Ramsgate

J W Brien
Capt.

Form R. 149.
7106—250m—7/2/17.

T. HOMAS.

Name ALL~~E~~AN Rank Pte Reg. No. 420018

Unit C.A.M.C. ~~9th C. Gen. Hosp.~~ Depot

Next of Kin Mrs. A. Allan, Bodachra Dyce, Aberdeen, Scotland. (Mother)

Date		Movement	Place	Casualty	List No.	Notified N/K O.		W.O. List
1917								
15-	11	Mil Hos Shorncliffe		N.Y.D.Q.	C 68			6091
20-	11	Can Hos Etchinghill		Y.D.S.	C 71			6563
1-	12	Discharged	"	"	C 91	No		1737
1918								
4-	4	9 Can Gen S'cliffe		N.Y.D. Y.D.Q.	C 182			12897
6-	4	Discharged	"	"	C 182	No		4214
		Diagnosis		VDS Latent	C 192			6876

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

FORM R. 149.
7106—250m—7/2/17.

Name ALLAN. Thomas Rank Pte. Reg. No. 420018

Unit C.A.M.C. 9th C. Gen Hos.

Next of Kin Mrs A. Allan Bodachra Dyce, Aberdeen. Scotland

Date 1914.		Movement	Place	Casualty	List No.	Notified N/K O.		W.O. List
29-	9	MIL. HOSP. S'CLIFFE:-		N.Y.D. Q	C 29			7001.3019
10-	10	DISCHARGED:-		" Do	C 35			7002.716
		CAS NAW REP TO BE	"DEBILITY"		C 40			19-42-6

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

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
A471-2	#3 Can. Gen. Boulogne	10-10-16	S.W. R foot
B196.	Royal Herbert, Woolwich	13-10-16	G. S. w. leg
B221	Discharged	22-11-16	S.W. R. foot.
B233	Can. Div. Convt. Epsom Ex. C. C. A. C.	23-11-16	G. S. w. rt. ankle
B277.	to Granville Can. Spec. Ramsgate	27-1-17	S.W. R. Ankle
B296.	Discharged	22-2-17	" " "
C27.	Mil: Shoune	29-9-17	N.Y.D.Q.
C35.	Disc	10-10-17	" " "
C			Debility as per C40
C68.	Mil: Shoune	15-11-17	N.Y.D
C71	Can: Etchinghill Lym Kent	11-17	V.D.S.
C81-2.	Disc.	1-12-17	" " "

REGT'L NO A 20018

NAME Allan Thomas

H. Q. FILE No. 649-

RANK AND CORPS Pte. 16th Bn. (Form. 43rd Bn)

FOLLOWS No.

FOLLOWS

CABLE No.	CABLE DATE	5 NATURE OF CASUALTY
O 3112	18-10-16	Adm. to No. 3 Gen. Hosp. Boulogne Oct. 10th 1916 Shrapnel foot. L

L. L. Job 90581—M. & D. 6314.

M. F. W. 42—50M—1-16.
H. Q. 1772-39-893.

TELEPHONES MAIN 746 AND 2658

W.F.G. BRATHWAITE

DISPENSING CHEMIST

WINNIPEG. SECUNDUM ARTEM CANADA.

DISPENSING PHYSICIANS' PRESCRIPTIONS A SPECIALTY

288 MAIN STREET

THE SAFE DRUG STORE

FOR

℞

30-6-19
Complaint.

211.

No further
action indicated

[illegible]

Leave on Fyle
19

No. 2565 RANK Pte. NAME Allan Thos.
a 20018 Marpaylist.

T. O. S. UNIT 43rd Battalion.

M. D. 10

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC. PARTICULARS	AUTHORITY
1914 Dec 26	1914. Dec 31	✓		
1915. Jan.	1915.	✓		
Feb		✓		
Mar		✓		
Apr.		✓		
May		✓		
June		✓		

UNIT SAILED
JUN 1 1915

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
C 182.	#9 Can Gen: Shorne.	4-4-18.	N.Y.D. V.D. Q
C 182.	Disc	6-4-18	" " " " "
			V.D.S. Latent as per C 192

REGT'L. No. 420018

NAME Allan, D.

H. Q. FILE No 649

RANK AND CORPS Pte. (Depot) 6th M6.

FOLLOWS

NO

FOLLOWS

CABLE

NO.	DATE

NATURE OF CASUALTY

L. L. 31493. M. & D. 8476.

M. F. W. 42—100M.—28-11-17.
H. Q. 1772-39-893.

LIST OF DISCHARGE DOCUMENTS.

Attestation Paper, Triplicate	Militia Form W. 23
or Particulars of Recruit	Militia Form W. 133
Field Conduct Sheet	Militia Form W. 178 or A.F.B. 122
Casualty Form	Militia Form W. 54 or A.F.B. 103
Last Pay Certificate	Militia Form W. 44
Certificate that missing documents are unobtainable	
Medical History Sheet	Militia Form B. 313 or A.F.B. 178
Proceedings of Medical Board	M.F.B. 227, A.F.B. 179 or A.F.A. 45
Dental History Sheet	Militia Form B. 465
Medical Report	M. F. W. 129 or D. M. S. 1375
Regimental Conduct Sheet	Militia Form B. 263
Company Conduct Sheet	Militia Form B. 263a

1. Triplicate Attestation Paper (M F.W. 23), or Particulars of Recruit (M.F.W. 133).
2. Casualty Form (A.F.B. 103).
3. Medical History Sheet (M.F.B. 313 or A.F.B. 178).
4. Proceedings of Med. Board (M.F.B. 227 or M.F.W. 129)
5. Dental Certificate (C.A.D.C. 5009a).
6. Field Conduct Sheet (A.F.B. 122)
7. Proceedings on Discharge (M.F.B. 218a)
8. Discharge Certificate (M.F.W. 39) (Enclosed in special envelope (260M)).
9. Copy of Discharge Certificate (M.F.W. 39a).
10. Dispersal Certificate (C.D. 3).
11. Equipment and Clothing } Statement Q.M.G. Form (D.O.S. 2).
12. Last Pay Certificate (P. 851). + Duplicate
13. Pay Book (A.B. 64).
14. War Service Gratuity (Form M.F.W. 2595).
15. Sundry Documents.

Group B
Checked by No. 15
Date 23/4/19

D.A. M.
M.D. 10
O.G. 4

War Service Badge
Class "A" No. 186613

SHORT FORM.
PROCEEDINGS ON DISCHARGE.
(Demobilization.)

MEDICAL DOCUMENTS FORWARDED TO ~~S.C.R.~~ or P.B.C. on MAY 26 1919

1. No. 420018
2. Rank. Pte
3. Name. Allan Thomas
4. Unit. 16th Bn.
5. Date of Discharge 8/5/19 Place Winnipeg
6. Reason for Discharge DEMOBILIZATION
7. Authority. D.O. 132.
8. Proposed Residence after Discharge 442 Boyd Ave. Winnipeg

9. CERTIFICATE TO BE SIGNED BY SOLDIER.

I hereby acknowledge that at the undernoted place and date I received my discharge Certificate M. F. W.?

Thos. Allan
Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

E of Brittain 26/4/19

Place

Dispersal Station "M" MAY 8 1919 Military District No. 10

Date

Signature [signature] (O. C. Discharging Unit.)

M.F.B. 218a—300M.-11-18—1772-39-113.

Station	Date	Symptoms and progress (Date of admission to hospital, and date of discharge from hospital, to be entered in red ink.)	Weight clothed, without boots—lbs.	Urine: Normal (N.) Albumen (Alb.)	Wassermann Reaction: Method {Original (O.) Modification (M.)}	Wassermann Reaction: Result {Positive (+) Negative (—)}	Treatment: Arsenical: Intravenous Injection. Dose in grammes: Salvarsan	Treatment: Arsenical: Intravenous Injection. Dose in grammes: Neo-Salvarsan	Treatment: Mercurial: Intramuscular injection. Dose of Metallic Mercury in grains	Treatment: Mercurial: Innunctions or Oral (Preparation and dose)	Treatment: Other Methods	Signature of M.O. (Each M.O. will sign his name in full on the first occasion; subsequent entries may be initialled)

Army Form I. 1238.

SYPHILIS CASE-SHEET.

Regtl. No. 420018 Rank and Name Allan Pte. J. Corps C. A. M. C.

Placed on Syphilis Register at CANADIAN HOSPITAL, ETCHINGHILL, LYMINGE. on 19-11-17 No. in Register

Disease contracted at . Primary sore appeared on (date)

CONDITION WHEN PLACED ON REGISTER.

Primary sore—character and site no evidence but scaliness of glans.

Lymphatic glands all shotty.

Skin (nature and distribution of rash) Negative

Mucous membranes Throat injected mucous patch on on Buccal mucous membranes. small ulceration on lateral side of tongue.

Other symptoms Alopecias capitus.

Examination of exudate from sore—Spirochaeta Pallida (present or absent)

Examination of blood serum— Wassermann reaction { Method employed (original ~~or modification~~) Original
Result (positive ~~or negative~~) Positive XXX

Station CANADIAN HOSPITAL, ETCHINGHILL, LYMINGE. Date 19-11-17 Signature of M.O. [illegible]

Struck off Syphilis Register at on

Cause of being struck off Register { (a) Recovered
(b) Transferred to Army Reserve
(c) Discharged from Army }

Station Date Signature of M.O.

(9 38 38) W 1624—1106 100,000 5/15 H W V(R) Forms I. 1238 / 8

N.B.—On completion of a course of treatment a red line to be drawn across the page, and the date when the next blood test is due to be entered in red ink below the line, *e.g.*, "Blood test due 15.5.14."
The date and result of the blood test to be entered; and if negative, the date on which the next blood test is due to be also entered.

CANADIAN HOSPITAL
TORONTO, LYMINGE

Station	Date	Symptoms and progress (Date of admission to hospital, and date of discharge from hospital, to be entered in red ink.)	Weight clothed, without boots—lbs.	Urine	Wassermann Reaction		Treatment					Signature of M.O. (Each M.O. will sign his name in full on the first occasion; subsequent entries may be initialled)
							Arsenical		Mercurial		Other Methods	
							Intravenous Injection. Dose in grammes					
				Normal (N.) Albumen (Alb.)	Method {Original (O.) Modification (M.)}	Result {Positive (+) Negative (—)}	Salvarsan	Neo-Salvarsan	Intramuscular injection. Dose of Metallic Mercury in grains.	Inunctions or Oral (Preparation and dose)		
	19-11-17	Admitted to Hospital									Salyl.	
		Full Course Treatment - Well										
	20-11-17			N							4	
	21-11-17								1/4			
	24-11-17			N				.45				
	28-11-17			N				.45	1/4			
	12-12-17			N					1/4		4 Doses	
	19-12-17			N				.75	1/4			
	26-12-17			N				.75	1/4			
	2-1-18								1/4			
	9-1-18			N				.75	1/4			
	14-1-18	Wassermann Positive			O+							

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.

Yes we concur

19. Is the invalid fit for

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

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.)

Boarded Cat. B II for return to Canada
Auth Tel. A.G. 90837 11-11-18

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.

Soldier satisfied

[signature] Major Capt. President

PLACE Kinmel Park Military Hospital [signature] Capt. } Members

DATE 12-3-19

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 A. Archibald Capt. for Assistant Director of Medical Services.

DATE 13-3-19

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

DATE .....

Original

THIS FORM WILL BE USED FOR ALL RANKS A-1-X-2

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 Kinmel Park Mil Hosp DATE 12-3-19

1. 1 (a) Unit Canc (b) Regimental No. 420018 (c) Rank L Cpl
(d) Surname Allan (e) Christian name Thomas
(f) Home address 442 Boyd Ave Winnipeg
(g) Next of Kin Mrs Fanny Allan (h) Relationship Mother Scot
(i) Address of Next of Kin Balgownie Village Bridge of Dawn Aberdeen
2. Age last birthday 38 Date of birth June 26, 1880
3. Enlistment, or Appointment (if an Officer) (a) Place Winnipeg (b) Date Dec. 26, 1914
4. Personal description:
(a) Height 5' 10" (b) Weight 215 (stripped) (c) Complexion Dark
(d) Colour of hair Brown (e) Colour of eyes Hazel (f) Identification marks, Scars, etc. Scar on out surface right leg, Linear Scar over right Temple
5. Former trade or occupation Farmer

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).	Years	Days
	4	76

	Periods From	Periods To
Canada 43 Btu	Dec 26, 1914	May 1915
England 43 Btu	May 1915	July 1915
France or other theatres of War 46 Btu	July 1915	Oct 8, 1916
~~Eng - Canc~~	~~Oct 8, 1916~~	~~To date~~

Mans statement

7. Original disease, or injury Comminuted Fracture Right Fibula

(a) Date of origin Oct 8, 1916 (b) Place of origin France
(c) Cause GSW in action

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

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

(Old Fracture Right Fibula) Moderate weakness of right ankle & foot.

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.)

Obj. Symptoms: - There is a circular scar over lower third right fibula. There is some enlargement of fibula in lower third at seat of fracture. Alignment fair. Walks with a limp and Right foot is more or less flat and there is tenderness on pressure over lower third of Fibula and in tarsal & metatarsal bones

Subj. Symptoms: - Complains of weakness in ankle (Right) and in Right foot and that foot swells after walking or standing for some time and foot and ankle becomes quite painful

(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 yes (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.

M.H.S. states Latent Syphilis Elchinghill Hosp 19-11-17 to 30-11-17 discharged to unit as out patient. Laboratory report of Jan 23-1919 sgnd. Maj. Rawe, of Univ. Manchester states Wasserman positive. There are now no clinical signs of syphilis but states he is jelling K. Treatment

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

States he received GSW Rgt leg Oct. 8. 16 in action. In 3rd Con. Gen. Boulogne for 3 days where he says bullet was removed. M.H.S. "states Roy Herbert Hosp Woolwich 13-10-16 to 22-11-16 GSW. Rgt Leg. Had Communicated fract. fibula a little above ankle joint Tibia intact wound healed, Good bony union. CC, Hosp Epsom and G. CS Hosp Ramsgate from 22-11-16 to 22-2-17 for GSW Right Leg

R&O. 60, 48 of 19-2-17 states Cat. B11 for GSW, Rgt ankle."

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).) OR. states no illnesses prior to enlistment.

M.H.S. states Winnipeg Gen. Hos 12-4-15 to 3-5-15 Influenza
Rural Hos. Shorncliffe 18-5-17 to 25-5-17 Circumcision
Mil. Hos. Shorncliffe 29-9-17 to 10-10-17 Debility
Mil. " " 14-11-17 to 17-11-17 Syphilis
Elchinghill Hosp. 19-11-17 to 30-11-17 Latent Syphilis
Mil. Hos. Shorncl. 4-4-18 to 6-4-18 Latent Syphilis.

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

Small scar over lower third rgt Fibula

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

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

not applicable

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

The regimental documents will be referred to.

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

13. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? 6 months

14. Treatment (Case reports, general or special, should be secured and attached where possible.) M.H.S. states Roy Herbert Hosp. 13-10-16 to 22-11-16 GSW. Rgt Leg Ensal dressings, CC Hosp. Epsom 22-11-16 to 26-1-17 GSW Rg. Leg. G.C.S. Hos. Ramsgate 26-1-17 to 22-2-17 GSW. Rg leg. Trans to CCAC. Hastings

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit? Suggested (If the answer is "yes" state nature of treatment required and probable duration) that patient be dealt with on arrival in Canada according to P.C.T. 47 dated 20-1-19.

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

17. Recommendations

Cat. B11

T. J. Scober 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 Thomas Allan 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 no other Disability

Thos Allan L/Cpl Rank.
Signature of invalid examined.

Ecol Brit

AUDITOR | PAYMASTER

MONTHS.

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

REGT. No. 42918 RANK Gpl NAME (IN FULL) Allan D

NEXT OF KIN — RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? No. — DATE EFFECTIVE

TO WHOM PAID — RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F. 43 Bn — IF IN P.F. WHAT UNIT? — (BLOCK LETTERS SURNAME FIRST)

PLACE OF ATTESTATION — TRANSFERRED TO Dustin M — DATE APR 26 1919 — AUTHORITY 20/132

DATE OF ATTESTATION 26-12-14 — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY $ 15.00 — DATE EFFECTIVE

PAYABLE TO Mrs A Allan Mother — RELATIONSHIP — ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS Balgownie Village Bridge of Don Aberdeen

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE 1-5-19

DISCHARGED PLACE MH 10 — DATE MAY 8 1919 — REASON 10 — AUTHORITY 20/132 — IF ENTITLED TO POST DISCHARGE PAY

4 42 Boyd Ave Wpg

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	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.			TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	BALANCE CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT							230	30	230	30																									230	30	By BAL. ENG. L. P. C. 230.30
31-3-19																	9 93																			P. a. a. to 16-5-19
1/4 to 16/5	46	1 15/100	52	90	35	00	230	30									9 73																			Clothing Allee, 1st payment W.S.G.
					70	00			388	20							4 87												15	00			388	20				Advances Boat Train
																	5 00																			Posted on Eng. L. P. C. to May
																	343 87																			6 Regts.
	W.S.G. 8 a																																				
183 Days at min	420	00			XXX	XX																															
	15				435	00																							9 20								1st Payment W. S. G. as above
June 9																	761124	70																			A. P. 15.00 Charged but not paid
" 14																	766434	5	80																		for May
July 9																	785586	70																			A. P. 92.00 c/f P. a. a.
																	Gnr 8 120 X 49	70																			70 - 2nd W.S.G.
																	Gpl 8 123 X 893	70																			580 adj. approved
																	Gdr 8 167 X 329	70																			70 - 3rd
																																				70 - 4th
																																				70 - 5th
																																				70 Final
			435														435	80											9 20				435				
																	Closed																			

War Service Gratuity,

	W.S.G.	Soldiers	Dependents
	70 00	365 00	Nil
		355 80	Nil
		285 80	70
		280 —	70
		210 —	70
		140 —	70
		70 —	70
			70

AUDITED OCT. 3 1919 1919 ..... Audit Clerk

200M-3-19.—L. L. 38788-(.). & D. 9985.
M. F. W. 2096.
1772-39-1390.

MARRIED OR SINGLE S

PLACE OF BIRTH Scotland

NAME AND ADDRESS OF NEXT OF KIN Mrs a allan
Bodachra Dyce Aberdeen Scotland

RELATIONSHIP OF NEXT OF KIN

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY $ Nil EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

A.P.&A. checked 23/3/17

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

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

REG'L. No. 420018 RANK Private NAME Allan Thomas. E 35

IF IN PERMT. CORPS WHAT UNIT } UNIT 16th Bn TRANSFERRED TO Clab. DATE 1/11/16. AUTHORITY AB. 196 10/16

PERMANENT FORCE ALLOWANCES TRANSFERRED TO ~~Lyth~~ Kog Lan H'pool DATE 1/1/17 AUTHORITY G.R.

PLACE OF ATTESTATION Winnipeg TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION 26th Dec. 1914. TRANSFERRED TO DATE AUTHORITY

Ref: 37902 - 1/3/16 HAB

ASSIGNED PAY MONTHLY $ Nil. 15/- DATE EFFECTIVE 1st December 1916.

PAYABLE TO Mrs. A. allan, Bodachra Dyce, Aberdeen. Scotland. RELATIONSHIP Mother.

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)

CJ

DATE 1916	PAY No. OF DAYS	PAY RATE	PAY AMOUNT $	PAY AMOUNT c.	FIELD ALLOWANCE No. OF DAYS	FIELD ALLOWANCE RATE	FIELD ALLOWANCE AMOUNT $	FIELD ALLOWANCE AMOUNT c.	WORKING OR SPECIAL PAY No. OF DAYS	WORKING OR SPECIAL PAY RATE	WORKING OR SPECIAL PAY AMOUNT $	WORKING OR SPECIAL PAY AMOUNT c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE CREDIT	BALANCE DEBIT	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
April			275				27	50						1 13 303	63												109 29	5 50	114 79	188 84					
														33 -																221 84				
1 30	30	1/22	30		30	10	3							~~221 84~~																				
1 31/5	31		31		31		3	10						34 10																522	250 72			
1 30/6	30		30		30		3							33																7 79	275 93			
July	31	1	31		31	10	3	10						34 10																	310 03			
Aug	31	1	31		31	10	3	10						34 10																	344 13			
Sept	30	1/-	30		30	/-	3							33																-	-			
														- -																-	-			
														- -																27 00	350 13			
Oct	31	1/-	31		31	/-	3	10						34 10																7 84	376 39			Remarks C.E.A.C. effee 1/10/16 C.B. 196. 23/10
														5 3 9 03																1 32 64				
Nov	1-30		30		30		3	-						33 -																	409 39		165	243 39	
Dec 31	31		31		31		3	10						34 10																76 51	367 98			
		1/a	55	00																														
1917		10																																
Jany	31	100	34	10										34 10																78 05	324 03		195 -	129 03	
			639	10										1 13 640 33										17 03	2 43	103 28	157 96	30	5 50	316 20				

Checked W.P. Hill

420018 - Allan, Thomas

DATE	PAY No. of Days	PAY Rate	PAY Amount $	PAY Amount c.	FIELD ALLOWANCE No. of Days	FIELD ALLOWANCE Rate	FIELD ALLOWANCE Amount $	FIELD ALLOWANCE Amount c.	WORKING OR SPECIAL PAY No. of Days	WORKING OR SPECIAL PAY Rate	WORKING OR SPECIAL PAY Amount $	WORKING OR SPECIAL PAY Amount c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE Credit	BALANCE Debit	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
			639	10										1 13	640 23									17 03	2 43	103 25	157 96	30	5 50	316 20	324 03				
Feb	28	10	30	80											30 80	402 6m 23/1 Ramsgate 285 15/2 468 23/2					3868 23/2			2 43 4 87 4 99		47 33		15		17 43	337 40				
Mar	31	1	34	10											34 10												15		122 19	249 31				
Apl	30	✓	33	00											33 00												15		15	267 31				447061
May	30	✓	33	00											33 00												15		15	285 31				557061
" 31/31	1		1	10											1 10												—		—	286 41				
June	30	✓	33												33												15		15	304 41				A61040
July	31	✓	34	10											34 10												15		15	319 51				A170894
Aug	31		34	10											34 10						Sick 23/3 13 16 4 326 25 3					4 87 4 73 9 73		15		15	332 57 334 44	Sick 4.87			A167633
Sept	30		33												33												15		3446	336 28				A211122
			905	80										1 13	906 43									29 32	2 43	224 94		150	5 50	565 98				

MONTH	PARTICULARS	CR.1	CR.2	PARTICULARS	DR.1	DR.2	DR3	DR4	BALANCE	DEFERRED PAY	SEP. ALLCE. ENG.
Oct		336 28		A170894			15		336 28		
									355 38		
Oct	P/P	34 10									
		34 10					15				
Nov	P/P	33 00		B26402 £3 1 8			15				
Dec	P/P	34 10		AR 109 9" Lm Hoop	14 11/17	9 43					
				" 1444 " "	12 11/17	4 87					
				" 1004 " "	11 7/17	9 43					
				" 62 " "	24 9/17	9 73					
				DR AR 1198 " "	25 7/17	9 43					
				" 6 " "	24 8/17	9 73					
				" 1420 " "	10 8/17	9 73					
				" 33 " "	10 9/17	9 73					
				B9720 £3 1 8			15				
				DR AR 219 Lm Hoop	10 8/17	14 60			304 89		
1918 Jany	P/P	67 10				84 59	30				
		84 10		663401 £3 1 8			15				
				AR 270 9" Lm Hoop	18 12/17	14 60					
				DR AR 62 " "	12 6/17	14 87					
				" 454 " "	25 6/17	19 44			288 05		
Feb		34 10		D16835 3 1 8		38 94	15				
				Mng 3860	11/1	9 73					
		2100				9 73	15				

MONTH	PARTICULARS	CR.1	CR.2	PARTICULARS	DR.1	DR.2	DR3	DR4	BALANCE	DEFERRED PAY	SEP. ALLCE. ENG.
									265 05		
Feb	P/P	3300		A170894		3300			298 05		
Mar	P/P	3410									
		3410									
Apl	P/P	3300									
May	P/P	3300									
		3410									
June	P/P	33									
July	P/P	3410									
Aug	P/P	3410									
Sept	P/P	33									
		2100				3892			242 10		

MONTH	PARTICULARS	CR.1	CR.2	PARTICULARS	DR.1	DR.2	DR3	DR4	BALANCE	DEFERRED PAY	SEP. ALLCE. ENG.
Feb	P/P										
Mar	P/P										
Apl	P/P										
May	P/P										
June	P/P										
July	P/P										
Aug	P/P										
Sept	P/P										

P 820
12474—375H—13-2-18.

* Strike out whichever inapplicable.

B

ASSIGNED PAY.	* ENGLAND OR ~~CANADA~~	SEPARATION ALLOWANCE.	* ENGLAND OR CANADA.
EFFECTIVE DATE:- 1. 12. 16		EFFECTIVE DATE:-	
AMOUNT:- 15⁰⁰		AMOUNT:-	

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

Mrs. A. Allan
~~Bodachrat Dyce~~
~~Aberdeen. Scotland~~
(Mother) Balgownie Village.
Bridge of Don, Aberdeen (9/8)

L/C Commuted 21 3 19
A/C stopped 1 5 19

NAME:- ALLAN. Thos.

NUMBER:- 420018

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Private
D.O.145: 28/7/18 9.H.	12.5.18	a/Lance Cpl

UNIT AND TRANSFERS

ORIGINAL UNIT:- 16th. Bn.

DATE ACCOUNT FIRST OPENED -

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
N. R.		1/11/17	209. G. H.

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
26219	66	9 G H 2-0-0	~~9 7 3~~	Ledger			249 76
12319	847	" 2-0-0	~~9 9 0~~	A & B			1946
				L PC			23030

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY.	PAY	F.A.	P.F.A.	SUBSIS'CE ALL'CE
9 Gen Hosp. D.O.145 28/7/18	1 05	10		

PARTICULARS OF RENDERING NON-EFFECTIVE- Th Con 31 3 19 TB 54874 Bkyk 21 3 19 Bkyk

~~MONTH~~ 1918	PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Mar 31									242 10	165	
Apl	P P	33		A 8238: 3-1-8			15		227 10		
				~~AR~~ 39: 15/4/18: 9 S.H. A 4.	9 7 3				260 10		
				~~and~~ AR 121: 25/10/17 " A 17	14 6 0				250 37		
				AR 179: 25/4/18 " A 17	9 7 3				235 77		
		33			34 06		15		226 04		
May	P. P.	34 10							260 14		
				A 92040: 3-1-8			15		245 14		
				AR 263: 13/5/18 9 S H A 3	9 7 3				235 41		
		34 10		343 20/5/18 " A 11	24 33				211 08	165	
					34 06		15				
June	P. P.	33							244 08		
				B 31441 3-1-8			15		229 08		
				AR 483 13/6/18 9 S.H. A 2	14 60				214 48		
		~~33~~		" 556 29/6/18 " A 9	9 7 3				204 75	165	
					24 33		15				
July	P. P.	34 10									
				B 97644 3-1-8			15		223 85		
	Diff Pay. Pte & Lance Cpl. 12/56			AR 655 17/7/18 9 S H A 3	9 7 3				214 12		
	31. 7. 18. 81 days @ 05	4 05							218 17		
				AR 734 30/7/18 9 S H A 13	9 7 3				208 44		
		38 15			19 46		15				
Aug	~~P P~~ L. Cpl. Pay	35 65									
				C H 3243 3-1-8			15		229 01		
				AR 809 14.8.18 9 S H A 3	9 7 3 —				219 36		
				890 29.8.18 " A 11	9 7 3 —				209 63		
		35 65			19 46		15				

Forward

NUMBER 420018 RANK A/L/Cpl NAME ALLAN, Thos.

1918 MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Aug	Bal								209 63		
Sept	L. Cpl Pay	3450									
				D17443 3-1-8			15		229 13		
				990 12/9 9SH A 3	14 60				214 53	Agreed	
				1077 24/9 " A 12	9 73				204 80	165	
		3450			24 33		15				
Oct	L Cpl Pay	3565		D70644 3-1-8			15		225 45		
				1289 14/10 9SH A 12	9 73				215 72		
				1529 30/10 " A 39	9 73				205 99		
		3565			19 46		15				
Nov	L. C. Pay	3450		D89444 3-1-8			15		225 49		
				1595 14/11 9SH A 9	9 73				215 76		
				1784 28/11 " 29	9 73				206 03		
	do D/C	3565		G49445 3-1-8			15		226 68		
	do Jan 1919	3565		1863 9/12 9SH 54	19 47				207 21		
1919		10580		76043 3-1-8	38 93		15		227 86		
Feb	L.C. P.	3220		F72055 3-1-8			45				
				H143 9/1 Kimmel RO			15		245 06		
				419 13/2 9SH 91	9 73				235 33		
	Mar	3565		G7854 3-1-8	14 60				220 73		
				F7599 Apr 3-1-8	24 33		15		241 38		
	2nd Def Pay	2338					15		226 38		
				616 26/2 9SH 119	9 73				249 76		
				841 12/3 " 149	9 73				240 03		
		9123			43 79		45		230 30		
Apr				1299 29/3 " and 5	9 73						
				545 1/4 " 6	9 73				210 84		
					19 46				7		

Sailed Canada 26.4.19 S.L. 56