REGIMENTAL DOCUMENTS

NAME ANDERSON. CHARLES Pte REGT. NO. 438787 UNIT 52nd Battn 18th Res H. Q. FILE NO. 8000

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
3	ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
1	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
	TRAINING HISTORY SHEET (M.F.W. 113)					
1	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
1	REGT. CONDUCT SHEET (M.B.W. 263 or A.F.B. 120)					
1	COMPANY CONDUCT SHEET (M.F.B. 263A or A F.B. 121)					
	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
	DENTAL HISTORY SHEET (M.F.B. 465)					Category
4	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					Med Unfit
	MEDICAL EXAMINATION (M.F.W. 129)					
	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
	LAST PAY CERTIFICATE (M.F.W. 44)					
1	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					
	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
1	a F B 122					
1	" " 179					
3	" " 181					
2	a F B 1237					
1	R 122					
1	P.C.					

Box 402017

CANADIAN CORPS RECORDS CENTRE ROOM 53 JACKET

M

H H

Deceased 10-55

W. 2589
100M-11-19
1772-39-1377

Original

ATTESTATION PAPER

No.

Folio. #38787

CANADIAN OVER-SEAS EXPEDITIONARY FORCE

~~#38787~~

QUESTIONS TO BE PUT BEFORE ATTESTATION.

		(ANSWERS)
1.	What is your name?	Anderson Charles
2.	In what Town, Township, or Parish, and in what Country were you born?	Stockholm, Sweeden
3.	What is the name of your next-of-kin?	Mrs M Anderson, Mother
4.	What is the address of your next-of-kin?	Gen Del PO Stockholm, Sweeden
5.	What is the date of your birth?	Feb 15 — 1884
6.	What is your trade or calling?	Laborer
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

Charles Anderson (Signature of Man.)

E. Field (Signature of Witness.)

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Anderson, Charles, 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.

Charles Anderson (Signature of Recruit.)

Date MAY 13 1915 191 . E. Field (Signature of Witness.)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Anderson Charles, 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.

Charles Anderson (Signature of Recruit.)

Date MAY 13 1915 191 . E. Field (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 Ottawa this 13 day of May 191 5

A. W. Hayhoe (Signature of Justice.)

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

A. W. Hayhoe (Approving Officer.)

M. F. W. 23.
200 M.—3-15.
H.Q. 1772-39-841.

DESCRIPTION OF E Anderson ON ENLISTMENT.

Apparent Age 31 years ..... months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height	5 ft. 5½ ins.
Chest measurement — Girth when fully expanded	38 ins.
Chest measurement — Range of expansion	2½ ins.
Complexion	Fair
Eyes	Blue
Hair	L Brown
Religious Denominations — Church of England	Yes
Presbyterian	
Methodist	
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.)

145 lbs

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 MAY 13 1915 191 . W Kellie Chesholm

Place Petawawa .....

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

E Anderson 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. D. McRae Lieut (Signature of Officer.)

Date MAY 13 1915 191 .

Forms
I. 1237
11

Army Form I. 1237.

5 CAN GEN M H LIVERPOOL

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book	Regimental No.	Rank.	Surname.	Christian Name.
0/9831	438787	Pte	Anderson	C.
Year	Unit.		Age.	Service.
	22 nd		35	2812.

Station and Date.	Disease Sharpnel Rt Elbow Frac.
	Line June 28 th 1917
220 D.	" 4 Stat. Etaples " 29 th 1917
	2 2nd South Gen Bristol July 5 th 1917
	Bear Wood Sept 12 th 1917
	P.S. Wound discharging. Movement
	& forearm limited. Hand
	Acyanotic. Dressings G.C. fair.
14/9/17	G.C. Fair Dressings improving
20/9/17	G.C. Fair Dressings "
26/9/17	G.C. Fair Dressings improving
3 OCT 1917	G.C. Fair. Wd healed. Elbow stiff.
	Massage. to be Boarded Convd

*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.

649-a-6808

H S H2

NOV 28 1917

Army Form B. 268.

This space to be left blank for the Chelsea Number.

Proceedings on Discharge.

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

MILITIA DEPT. DEFENCE APR 19 1918 H.Q. CANADA

No. 438787 Army Rank Private

Name Anderson Charles.

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

Corps Manitoba. 6. 18th May 1915. 18th Res.

Battalion, Battery, Company, Depôt, &c. B. 52nd Bn

(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 APR 8 1918

Place of discharge WINNIPEG, Man.

1. *Description at the time of discharge.*

Age 35 years ____ months

Height 5 feet 5½ inches

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

Complexion Fair

Eyes Blue.

Hair L. Brown

Trade Laborer

Intended place of residence (To be given as fully as practicable) { Gen. Delivery / Wpg / Man

Descriptive marks.

Scar on Right elbow.

(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 medically unfit for further War Service- K. R. & O. Sec. 16 para 392. 1912.

(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 :— Very Good.

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.

[OVER.

D. D. & L., London, E.C.
A4502 Wt. W17176 M291 500,000 2/16 Sch. 33 Forms B. 268 40

W. S. & S. Comp. 29-1-19

I.C. 18.12.19. corn.

CANADIAN CONVALESCENT HOSPITAL, BEARWOOD PARK, WOKINGHAM.

INVALIDED TO CANADA FOR FURTHER MEDICAL TREATMENT

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

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

Classification for service, or proficiency pay... ... ... Class _____

6. Campaigns, Medals and Decorations

_____

_____

_____

_____

_____

Certificate of education ..... _____

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

Hospital Representative

(Place) 20 OCT. 1917

Canadian Convalescent Hospital Bearwood Park Wokingham

(Date) _____

W Duncan Lt

HOSPITAL REPRESENTATIVE.
CANADIAN CONVALESCENT HOSPITAL.
BEARWOOD PARK, WOKINGHAM.

Commanding _____ *Battn.* _____ *Regiment.*

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

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

(*Place*) WINNIPEG, Man.

Charles Andersan (*Signature of Soldier.*)

(*Date*) APR 8 1918

A Haines (*Signature of Witness.*)

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

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

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

_____ (*Signature of Soldier.*)

10. *Statement of service.*

Service towards engagement to APR 8 1918 (the date to which the record of service is completed) 2 years 330 days.

Further service „ „ _____ (the date of confirmation of discharge) ... ... — „ — „

Total ... 2 „ 330 „

11. *Confirmation of discharge.*

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

(Place) WINNIPEG, Man.

(Date) APR 8 1918

Signature _____

OFFICER COMMANDING 'C' UNIT
MILITARY HOSPITALS COMMISSION COMMAND

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

M.D. 10
JAN 18 1919

5959 1/19

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

OTTAWA, CANADA.

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

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

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

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

1. Christian names Charles 2. Surname Anderson
3. Rank Private 4. Original Unit 52nd 5. Reg. No. 438787
6. Address, in full, to which future payments of gratuity are to be forwarded
Charles Anderson
181 Logan ave Winnipeg Canada
7. Date of enlistment in the C.E.F. 13th May 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 —
10. Address, in full, of such dependent not applicable
11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? ~~No~~ not applicable
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:—
Oct 1916 52nd Battalion
~~From~~ Dec 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? Yes ~~No~~
14. Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service ~~Overseas~~ 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
2 years 11 months may 13th 1915 to april 8th 1918
52nd Batt only
16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department No
17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.? No

M.F.W. 2595.
1772—39—1389.
1160—D.P.—250M-12-18.

18. Have you had more than one enlistment? If so, give particulars of discharges and re-enlistments, and under what regimental numbers and units ..... only one .....

19. Have you already received any payment of Post Discharge Pay or War Service Gratuity? If so, state amount you and your dependents ~~have already~~ received and by whom paid ? ..... 3 Months 99.00 33.00 ~~=~~ month Paymaster M.D. 10

20. Have you been issued with a War Service Badge? If so, what class ? ~~.....~~ ~~Imperial~~ a/B.

21. Have you, during the present war, served in the Imperial Forces ? ~~yes~~ 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 ? ..... — not applicable

24. Are you now serving in the C.E.F.? ..... No ..... If not, give:—(a) Date of discharge April 8th 1918 ..... (b) Reason for discharge medically unfit

25. Are you at present a member of and in receipt of pay and allowances from any Canadian naval or land forces? If so, give unit ..... 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 - 52nd Batt. only - throughout service ..... March 1916 ..... 28 June 1917

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 ? ..... —

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: Charles Anderson

Place of Residence: 181 Logan Ave.

Declared before me at: Winnipeg

This 4th day of January 1919

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

---

POST DISCHARGE PAY.

Date paid.	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
Sent	33.		350.00	249.90
8/5/18	33.			
8/6/18	34.10			
	100.10			

Certified Correct.

..... CAPTAIN
District Paymaster.

PAYMASTER MILITARY DISTRICT No. 10

R—122.

Rank Pte Name ANDERSON, Charles. Reg'l No. 438787

Unit 52nd Bn. If in perm. Corps, What Unit? Married or Single Single

Place and Date of Enlistment Pt. Arthur, 13th May 1915. Place of Birth Stockholm, Sweden,

Name and Address, Next-of-Kin Mrs M. Anderson,

Gen.Del. P.O.Stockholm, Sweden. Relationship Mother

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

N/E R.B No 9118
File R.L.
Category MUC

Discharge, Date and Place Reason Character

Report Date	Report From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place	Date	REMARKS Taken from Official Documents
		Arrived in England		3 DEC 1915	
		Embarked for France.		20.2.16	NR
16 6 16	6C 52	Adm No 23 G H	Etaples	7 6 16	C S A 82 31 G S W Head
24.6.16	"	T No 6 Conv Depot	"	16 6 16	" 89 "
8.7.16	"	T No 6 " "	"	28.6.16	" 98 "
16.11.16	"	#9 Can Field Amb	Field	27.10.16	" 198. 79 PUO
8.12.16	"	Rejoined Unit		18.11.16	" 217. 79. "
6.7.17.	"	No 4 Genl. Hosp.	Dannes Lamiers	28 6 17	C.L. A384. G.S.W. L Arm & Hand.
12.7.17.	"	2nd Southern Genl Hosp.	Bristol	5.7.17	" B357. G.S.W. Elbow: Sec.
14.7.17.	Man Reg Dep.	T. O. Strength	Scliffe	5.7.17	Pt II 127. (52nd Bn 61. 9/10 7/17)
17.9.17.	52nd Bn	Can: Con: Hosp.	Bearwood Wokingham	13.9.17.	C.L. B13. G.S.W. L Arm Hand.

438787. Anderson C

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				
6.11.17.	52nd Bn	No 5 Can: Genl: Hosp:	Kirkdale Liverpool	3.11.17	C.L.B.56. G.S.W. Lt Arm. Hand. Frac.
30.11.17.	"	Invalided to Canada		19.11.17	" B77. "
3.12.17.	M.R. Dep.	S.O.S. Invalided to Canada.	Sheliff Pte.	19.11.17	Pt II O269.
	Dis Depot	For Further Treatment (Convalescent)	MD 10 Winnipeg.	28/11/17	NR 404.

Forms
I 1237
11

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
F.C.F. 441.	43787.	Pte	Anderson	C
Year 1917.	Unit. 52 Canadian		Age. 35	Service. 2 4

Station and Date. 2nd S. G. Bristol. 5.7.17.

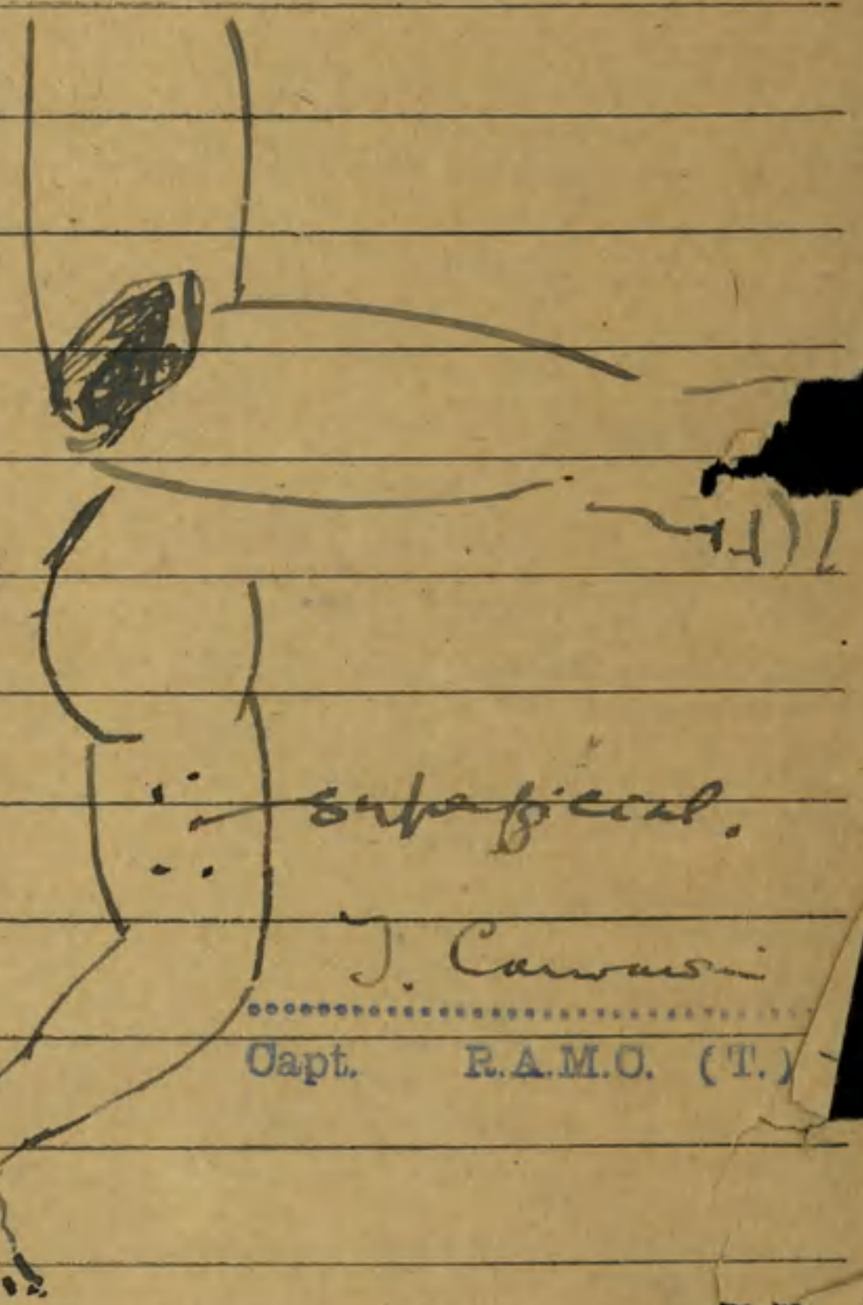
Disease S.W. R^t Elbow joint. XI Fracture of Humerus (Neglect)

DATE 28.6.17. PLACE Shulbrede CAUSE Action

CONDITION

Joint inflamed

Pyrexia 102°.



Shell lesion bend of humerus.

X-RAYS. FRACTURE :— 6

FOREIGN BODY :—

superficial.

J. Cameron
Capt. R.A.M.C. (T.)

TREATMENT & FINAL STATE

July 6. Wrist Splint. Caution Kindly dust with Collodion should it develop.

T. 102.

14.7.17. ATS. 500 Allowed

11.7.17. Seen.

13.7.17. Pyrexia 101 last night, Temp normal this morning.

16.7.17. Seen. Wound healing

20.7.17. Seen, no fever. Back splint removed gallows splint is painful.

23.7.17. ATS 500 3 doses Allowed. Wokingham.

25.7.17. Seen 12.9.17

31.7.17. ATS. 500 4th dose Allowed. J. Cameron

1.8.17. Hand sling. To sit up. Aug 8 Seen. .....
Capt. R.A.M.C. (T.)

SOUTHERN GENERAL HOSPITAL BRISTOL

*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.	
3-8-17	Sen 15. 8. 17. Khorsanto,
3. 8. 17	Manaza

DATE OF DISCHARGE:- 12. 9. 17.

DESTINATION:- Wokingham.

Forms
I. 1237
12

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
1642 Year	438787	Pte	Anderson	C.
	Unit.		Age.	Service.
	52 Bn		35	2 8/12 // 1 6/12

Station and Date

Disease S w Rt Elbow. C.F Humerus.

No. 5 CANADIAN GENERAL HOSPITAL LIVERPOOL

2-11-17

M.C.S. Bearwood Can Con Hosp (?) States
he was wounded 28 6 -17. at Leys.
Sent to 4th Stat Hosp Etaples 29-6-17.
" " 2nd South Gen. Bristol 5-7-17
" " Bearwood Can Con Hosp 12-8-17
condition on admission there - "wound
discharging, movement of fore arm
limited. Hand cyanotic".
notes 3.11.17 - "G.S. fair, wd healed. Elbow
Stiff, massage".
Transferred to No 5 Can Gen Hosp
Liverpool on 2-11-17
On admission - general appearance
good.
wound on external side R Elbow joint
Healed. R Elbow joint ankylosed at angle of
about 100°. R hand can be fairly well pronated
& supinated to mid pronation - Supination.
R wrist good, fingers R hand rather
stiff, extension to normal, flexion one half
normal. Sensation good
Heart. Lungs. - Coarse rales & apex.
Digestive, Urinary & Nervous Systems O.K.

W.O. Medical Captain

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

(44502) Wt.W 11203—M 1159. 1,450,000. 6/12/16. C.F.& S. Forms/I. 1237/12. (E239)

P.T.O.

Station and Date.	

B 6

[redacted] MILITARY HOSPITAL (No. 3) TUXEDO PARK

CASE HISTORY SHEET.

No. 438787 Rank Pte. Name Anderson Charles Age 35

Unit 52nd Completed years of service Where and how long } C. 6/12 E. 6/12 F. 18/12

Date of admission 3/1/18 Date of discharge

Diagnosis G.S.W. Right Elbow. Place of origin France.

R... A.I.F. ... APR 25 1918 A.D.M.S. 8/4 M.S. M.D. 10

CONDITION ON ADMISSION AND PROGRESS OF CASE

Jan. 5th 18 On examination Scar on elbow adherent and tender. Has no nerve lesion. Arm in position of 110°. about 50° of Movement. Supination & pronation 50%

Jan 12th X-ray Shows distortion & rachlear surface of humerous. Some bates phytic outgrowth.

Feb 9th Considerable pain at attempted Movement. Later will require arthrodesis

Feb 23rd 1918 Continue treatment

March 14th 1918 Patient occupation = coal miner Very slight movement of elbow, except that pronation and supernation are fairly free. Short fibrous ankylosis. For purpose of his occupation a stiff elbow is likely to be more useful than a moveable weak elbow produced by excision. Recommend for Invalid Board

FAMILY HISTORY

(Tuberculosis, mental or nervous diseases.)

TREATMENT Massage — Manipulation

(Especially any specific or special form)

Medical Board Report :— Rt. elbow fixed in position of 110° with hand in fully pronated position, forearm can be supinated about 1/6 normal distance only. There is a barely perceptible degree of movement at elbow — joint not more than 3°. Grip of hand diminished about 50% in strength

CONDITION ON DISCHARGE, (and disposal made of case.) Recommended for discharge

Date 8/4/18

C. W. Moore, Lieut Col
Medical Officer i/c case.

Orthopedic

C 7827

M. F. B. 313a.
50M.—11-17.
1772—39-439.

11 D.

Proceedings of Medical Board at Discharge Depot,
QUEBEC, Que.

No. 438787 Rank Private Name and Corps of disabled Soldier:— Anderson Charles

Previous civilian occupation:— Laborer -

Cause of Disability:— Fixation of right elbow joint at 100° in Flexion and mid - supination due G.S.W

Condition, in detail, which prevents the soldier earning a full livelihood:— Soldier was in France 18 months, wounded in the right elbow, and left forehead. Complains of poor use of right arm. Heart no sound. Lungs clear - Nervous system negative - Depressed healed scar shape of an oak leaf, at right external condyle. Complete fixation, and flexion in mid - supination of right elbow joint at 100°. There is slight pasive pronation and supination from elbow. Movements of wrist joint normal - Grasp of right hand poor Stiffness of fingers, moderate in degree with passive flexion of all fingers - Soldier is unable to write or eat with right hand - No disability from wound in head. Soldier requires further massage for arm & hand

OPINION OF THE BOARD.

Degree of incapacity. (Please state in fractions) 50% reducing To 30%

Probable duration of incapacity:— Permanent

Does it render him permanently unfit for Military Service? No

Would operation, Special treatment, or use of appliances, etc., lessen incapacity? Convalescent Home

Signature:— E A Roberts Capt ..... President.

Station:— Quebec

Date Dec 3rd 1917

W R Cream Capt
J M Macri Capt
..... Members

APPROVED.

Date 3.12.17

W W Carmichael Major
Asst. Director Medical Services.

Date .....

..... Director General Medical Service.

P. C. ORIGINAL

RECEIVED. NOV 24 1918 A. D. M. S. M. D.-10

M[illegible]TORY OF AN INVALID.

1. Station. M.M.C. H. Wnpg.
2. Regiment or Corps. 52nd Battn.
3. Regimental No. and Rank. 438787 Pte
4. Name. Anderson, Charles.
5. Age last Birthday. 35
6. Enlisted on 15th May 1915 at Fort William, Ont.
7. Former trade or occupation. Coal Miner. Date. 20th March 1918

Gen Deh: Fort William, Ont.

8. General remarks on his:—
   (a) Conduct. No
   (b) Habits. records
   (c) Temperance. available.

(For this purpose the Company defaulter sheets will be obtained from the man's Commanding Officer.)

9. Service. two Years. 308 Days.

	PERIODS	
	From	To
C. E. F.	15th May 1915	20th March 1918

10. (a) Disease or disability. Ankylosis right elbow.
    (b) Date of origin. 28th June 1917
    (c) Place of origin. Vimy Ridge.,
    (d) Cause. Shrapnel.

11. Present condition. (Most Important.)
(To include full description of present disabling condition or conditions, and of the immediate and direct cause of incapacity, *i.e.*, debility, breathlessness on exertion, necessity of treatment by rest, etc.)

Right elbow fixed in position of 110° with hand in fully pronated position forearm can be supinated about one ~~th~~ third normal distance only. There is a barely perceptible degree of movement at elbow joint not more than about 3° Grip of hand diminished about fifty per cent in strength.

12. (a) Is the disability the result of service or climate? Service
    (b) Has it been aggravated by intemperance, vice or misconduct? No

M. F. B. 227.
200M. 8-16.
1772-39-117.

13. (a) For purpose of Identification. (Here a full description of wounds, scars, deformities, etc., is to be given.)

Scar back of outer condoyle of right humerus. Scar back of right thumb. Small scar on forehead.

(b) In case of wounds, or other injuries, state whether sustained on or off duty. If not received in action was a Court of Inquiry held ?

In action

(c) In the event of the disability being attributed to exposure on duty, state clearly the nature of such exposure, and whether it was exceptional or otherwise.

Not exceptional;

14. Treatment.

Hospital in France and England 5 months.

Convalescent M.D. 10 for 4 months.

15. If the disabling condition had its origin before enlistment, has it been aggravated by service, and to what extent ?

N/a

16. What is the probable duration of the disability or of each disabling condition, if more than one contributes ?

Six months.

17. To what extent will it prevent his earning a full livelihood in the general labour market ? Please state in fractions. When more than one disabling condition is present, the extent of the disability due to each should be stated.

18. State if for discharge on account of unfitness for Service.

For discharge physically unfit.

W. S. Dickenson Capt. RAMC

Medical Officer by whom the case is brought forward.

OPINION OF THE MEDICAL BOARD.

RECEIVED.
MAR 22 1918
A. D. M. S. M. D.-10

Does the Board concur with the preceding report? If not, give differing opinion.

10. Yes

11. Yes

12. Yes

15. Yes

16. Yes

17. Yes

18. Is he unfit for Military Service. Yes

Recommendations: That he be discharged as Medically unfit. He has had adequate treatment. Further treatment will not benefit. It is desirable that he pass under his own control.

Signatures :—

[signature] President.

[signature]

[signature] Members.

Station. M.M.C.H. Wnpg.

Date. 20th March 1918

APPROVED
MAR 23 1918

[signature] Major, A.M.S.
A.D.M.S., M.D. No. 10
Asst. Director of Medical Services.

Date.

Approved.

Date.

Director-General of Medical Services.

(At Station or Hospital where finally disposed of.)

Station and Hospital } ..... Arrived from } .....

Date .....

If admitted.	If under treatment.		Disease.	How fully disposed of.	Date of Discharge, &c.
Index No.	From	From			
Date	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....

Summary of Causes of invaliding, or remarks as to remand to Regiment, Station or Depôt.

Date of final Medical Board or decision. }

.....
Administrative Medical Officer.

DETAILED MEDICAL HISTORY OF INVALID.

Militia Form B. 227.

200m. 8-16.
H. Q. 1772-39-117.

Station .....

Corps .....

Regimental No. Rank

Name

Disability

Date

Hospital or Station } transferred to for } final disposal.

Date of final disposal }

How finally disposed of }

The original Report is invariably to accompany the discharge documents of invalids.

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.)

Nil

Charles Anderson

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.

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

5959/119
ts
372-C-3

Name ANDERSON, CHARLES
Surname Christian Name

Regimental Number 438787 Rank PTE.

Address (in full) GEN. DEL.,
WINNIPEG, MANITOBA.

Unit 52nd O/S. BN.

Original Unit

District where paid M.D. 10.

Date of Discharge 8-4-18.

P. D. P. Filing Number 10-195-10.

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

L. L. 22573—M. & D. 8009.

Total Credits 91 days	FIRST PAYMENT Cheque No. A	Date	Amount 30 days	SECOND PAYMENT Cheque No. B	Date	Amount 30 days	FINAL PAYMENT Cheque No. C	Date	Amount 31 days	Balance Over-payments to be Recovered	Total Amount Paid
100 10				2986	8-5-18	33 00	2966	8-6-18	34 10	33 00	67 10
~~1st~~	~~G.6435~~	~~20-2-19~~	~~70 00~~								
~~1800 A 2nd~~	~~G48301~~	~~18-3-19~~	~~70 00~~								

M. F. W. 127.
50M—6 17.
1772 39-1140.

Remarks: ADVANCE PAYMENT by CAS. UNIT. of $33.00. Soldier still on strength of D. C. R Autho Pyle 0232-C-28 9/26 2/19

Dec'n No 5959/119 W. S. G. File No 0332-C-28

Award ..... days at $ 70 per day $ 350.00

S. A. ..... months at $ ..... per mo. $ ..... $

Less P, D. P. Credited $ 100.10

$ 249.90

Less further debit balance $ .....

Net due paid as below 249.90

TO SOLDIER TO DEPENDENT

	0	Ag. No.	Ch. No	Amount		Ag. No.	Ch. No	Amount
20-2-19	1	411	6435	70 00	4			
18-3-19	2	1800A	48301	70 00	4			
8-4-19	3	484 B	415953	70 00	4			
5-4-19	4	384 C	449549	39 90	4			
	5							
	6							
		Total		249.90		Total		

GEN'L AUDITOR
Posting checked by
J. Nalpin
Date 14-7-19

181 Logan Ave
Strathcona Man

26 L 30

P—56

Rank Pte. Name ANDERSON, Charles Reg'l No. 438787

Unit 52nd Bn. If in perm. Corps, What Unit? Married or Single Single

Place and Date of Enlistment Pt. Arthur, 13th May 1915. Place of Birth Stockholm, Sweden

Name and Address, Next-of-Kin Mrs. M. Anderson

Gen. Del. P.O. Stockholm, Sweden. Relationship Mother

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance Payable to

Relationship

Discharge, Date and Place Canada Reason Character G Ronald

MAR 19 1918 CANADIAN CONTINGENT

Entered on N.E. Card Index

Checked by G Ronald

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.
1915																	
Dec 1	Dec 31	31	1.00	31 00	31	10	3 10		34 10	6 53	15-12 31-12	17 03 17 03			34 06	04	
1916																	
Jan 1	Jan 31	31	1.00	31 00	31	10	3 10		34 10	100 148		14 60 9 73			24 33	9 81	
Feb 1	Feb 29	29	1.00	29 00	29	10	2 90		31 90	194 15		7 30 2 62			9 92	31 79	
Mar 1	31	31	..	31 -	31	..	3 10		34 10	70 100		2 62 2 62			5 24	60 65	
				122 00			12 20		134 20			73 55			73 55	60 65	

6 bd 30/11/17 [illegible]

Carried forward to Large Ledger sheet

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						

(611)—Wt. W1751-1103. 500,000.—5-15.—C. & G. Forms B. 103/1.

Army Form B. 103.

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

Casualty Form—Active Service.

Regiment or Corps 52nd Cand'n Batt'n

Regimental No. 438787 Rank Pte Name Anderson Chas.

Enlisted (a) May 13 Terms of Service (a) Mobilization Service reckons from (a) May 13/15

Date of promotion to present rank _____ Date of appointment to lance rank _____ Numerical position on roll of N.C.Os. _____

Extended _____ Re-engaged _____ Qualification (b) _____

Report: Date	Report: From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
		Landed in France		21/2/16	
		EMBARKED FOR FRANCE.		20 2 16	13144 C.Y. 1844 Q.M.G.2
7/6/16	23 Gen'l	GSW head	ad. 23 Gen'l	7/6/16	W 3034
16/6/16	"	"	tf. 6 Conv Dep.	16/6/16	"
11/6/16	10 C.F.A.	"	ad. 10 C.F.A. tf. C.C.S.	6/6/16	A 36 #82 22/6/16
28/6/16	C.B.D.	Taken on stgh	C.B.D. Fld.	28/6/16	U Roll
12/8/16	"	Left for 3rd Entg. B.		12/8/16	"
14/8/16	3 E.B.	Arrived		14/8/16	"
16.9.16	" "	Left for Unit	"	16.9.16	"
23.9.16	52nd Bn.	Joined "	"	16.9.16	B213
29.10.16	9 C.F.A.	P.U.O.	ad 9 C.F.A. to D.R.S.	27.10.16 28.10.16	A 36 #157 8/11/16
4.11.16	30 C.C.S.	Myalgia	ad 30 C.C.S. to A.T.	3.11.16	A 36 #160 21/11/16
29.10.16	10 C.F.A.	P.U.O.	ad 10 C.F.A.	28.10.16	" " "

(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				
25.11.16	O.C. Unit	Rejd	Fld	18.11.16	B213 #164 3/12/16
12-5-17	"	14 days Rest Camp,	Boulogne	7-5-17	" #214 21/5/17
26.5.17	"	Rejd. unit	Fld.	25.5.17	" #218 4/6/17
20.6.17	"	Wounded to hospital		28.6.17	B 213. D. C. S 228 dated 10/7/17
5.7-17	HS. Pieks deconick	GSW arm shaul legs	Posted to Man Reg. Depot Shorncliffe	5.7-17	W3083 99793 } P. II #69 10/7/17
14.7.17.	M.R.Dep.	Taken on strength.	Shcliffe	5.7.17.	Pt II Q. 127.

J. Johnston

Lieut. for Lt.-Col., A.A.G.
Pay Section, G.H.Q. 3rd Echelon, B.

[signature] 23.10.17

LIEUT:
FOR LT: COL: I/C RECORDS. C.O.M.F.

28-11-17. Disembarked at Halifax per SS H.S.H2.
10-12-17 T.O.S. "G" Unit, M.H.C.C. At Winnipeg, D.O. 316, Para. 2232.
8-4-18 Dischafged from H.M. Forces " " " " 91 " 541.

[signature]
OFFICER COMMANDING "G" UNIT
MILITARY HOSPITALS COMMISSION COMMAND

1263
18

Name Anderson Charles Rank Pte Regt. No 438787 Unit.....

Battn. 52nd Camp or O. S. O/S File M. H. C. C. H. Q. File.....

Next of kin.....

Discharged to Class..... D. of D. ..... Conduct.....

Pension awarded..... Date of first payment.....

Address on discharge. .....

Diagnosis..... Date boarded.....

DATE	CLASS	REMARKS	Part 2 Order
10/12/07		RECEIVING DEPOT. D. 316 PARA 2233 OUTPATIENT	
JAN 3 - 1918		TRANSFERRED TO MANITOBA M. C. H. D.O. H. PARA 16/18	
8.4.18		DISCHARGED	D.O. 91/a. 5-41/18

L. L. Job 24571 M.H.C. F. 29. 75-7-17.—50M.

DATE	CLASS	REMARKS	Part 2 Order

D.M.S. 1300.

Surname	Christian Name or Names	Reg. No.
Anderson	C.	438787

Rank	Unit	Co.	Troop	Batty.
Pte.	52nd Batt. Man. Reg.			

Hospital — Date of Admission

Transferred #23 Gen. Etaples — Hosp. 7. 6. 16

6 Cono Depot. " — Hosp. 16.6.16.

" " " " — Hosp. 28.6.16

9 C. F. Amb. — Hosp. 27.10.16

Diagnosis G.S.W. Head. 4. Gen. Sanus. Camino. 28.6.17

(1) P. U.O.

Later Diagnosis (if changed) G. S. W. Lt. Arm & Hand.

(2) Frac. R

(3)

Additional Diagnosis: if more than one state present

DISPOSITION — Date

Ch. 16. 6. 16 A82.

" 24.6.16. A89.

Ch. 8.7.16 #A98

15.11.16. A98.

8.12.16 A217

" 6.7.17. B384

12.7.17 B357

18.9.17 B13.(2)

7.11.17 B56(2)

1-12-17 B77-3.

Rejoin unit 18 11 16

REMARKS

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

Dis to Canada per H.S.
" Araguaya from L'pool.
19-11-17.

P. T. O.

R

EPITOME OF HOSPITAL TREATMENT.

	Hospital	Adm.
1.	2nd S.G.H. Bristol	5-7-17
2.	Woodcote Pk. Epsom	13.9.17
	Can. Con. Berwood,	
3.	5 Can Sec. Kirkdale	3-11-17
4.		
5.		
6.		
7.		

REGT'L NO 438787

NAME Anderson Charles.

H. Q. FILE NO. 649-

RANK AND CORPS Pte. 52nd Bn.

FOLLOWS NO.

FOLLOWS

CABLE No.	CABLE DATE	NATURE OF CASUALTY
		"Sweden"
M 8199	15-6-16	Admitted No. 23 Gen. Hosp. Etaples June 7th (gunshot wound head).
M 5683.	6-7-17.	Adm to 4th Gen. Hosp. Camiers. June 28th 1917. (G.S.W. Left Arm.) Returned to Canada per H. S. Araguay 28-11-17. Shrap. wd. R Elbow & Ankle.
Auth Letter G.O.C.	24-12-17 M.D. #10	Adm Manitoba Mil. Conv Home 3-1-18

L. L. Job 90581—M. & D. 6314.

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

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
A 82.	#23 Gen. Etaples	7-6-16	G. S. W. head
A. 89.	#6. Conv. Depot "	16-6-16.	G. S. W. "
A 98	#6 Convt. Depot Etaples	28-6-16	" " " "
A 198	#9 Can Field Amb	27-10-16	P U O
A 217	Rej. unit	18-11-16	P. U. O.
A 384.	#4 Gen. Dannes Camiers	28-6-17	G.S.W. L. arm & hand
B 357	2nd South Gen Bristol	5-7-17	G.S.W. Elbow Sev
B 132	2nd Can. Conv. Bearwood Wokingham	13-9-17	" " L. Arm Hand (man)
B 56.	2nd 5 Can. Gen: Kirkdale Liverp	3-11-17.	G.S.W. Lt. Arm. Hand Frac
B 773	2nd Invalided to Canada.	19-11-17	G.S.W. Lt. Arm & Hand.
316.	M.H. Cl. Winnipeg	10-12-17.	Posted as O.P. - Rec Depot
4.	" " " " "	3-1-18.	Rec Depot to M.M.C.H.
4.	" " " " "	3-1-18.	To D.P. - Rec Depot

No. A 38787 RANK Pte. NAME Anderson, C.
~~38788 June Payist~~
4 38747 Dec. paylist.

T. O. S. 13-5-15 D.O. 500 UNIT 52nd Battalion, C. E. F.
14-5-15.

M. D. 10.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC. PARTICULARS	AUTHORITY
1915 May 13	1915 May 31	✓		
June.		✓	Fined $5 Drunk on Parade.	B.O. 77 of 16-6-15.
July.		✓		
Aug.		✓		
Sept.		✓	Forfeits 1 dys. pay a. w. L & Fined $2.00 Drunk.	B.O. 151 of 18-9-15.
Oct.		✓	Fined $3.00 Drunk.	B.O. 182 of 25-10-15.
Nov.		✓		
Dec.		N.		

UNIT SAILED
NOV 23 1915

7827

REG. NO. 438787 NAME (SURNAME FIRST) Anderson Chas.

RANK Pte CORPS 52nd Batt. 39

AGE 35 SERVICE 30/12.

NAME OF HOSPITAL M.M. Conv. Hosp. PLACE Winnipeg Man.

DATE OF ADMISSION 3-1-18

DISEASE G.S.W. Rt. Elbow

DISCHARGE 8-4-18

OPERATION

DISCHARGED TO DUTY Recommended for discharge.

TRANSFERRED TO

DISCHARGED BY MEDICAL BOARD

100M—9-17—H.Q. 1211-8-30.

REMARKS .....

R. 149.

Name ANDERSON, Charles *Rank* Pte. *Reg. No.* 438787

Unit 52nd Batt.

Next of Kin Mrs M. Anderson, Gen. Del. P.O. Stockholm, Sweden.
Mrs

N/E.

Not Called Over

Date		Movement	Place	Casualty	List No.	Notified N/K O.		W.O. List
7.6.	16.	23rd Gen Hos.	Elaptes	G.S.W. Head	A 82		M 8119.	16/6/16
16.6.	16	No 6. Con Depot.	"	"	A 89			
28.6.	16	Discharged	"	"	A 98			
27-10-16.		No 9 Can Fld Amb	-	P.U.O.	A 198.			
18-11-16		Rejoined Unit		(Do.)	A 217.			
28-6.		No. 4. G.H. Camiers.	GSW. L. Arm. Hand. A.		384.	M5683.		6-7.
5-7-17		2nd South Gen Hos Bristol		Do Trac	B 357			
13-9.		C. C. Hosp. Bearwood W'Kham		do.	B 13			2033.
3-11-17.		5 Can Fld. Liverpool.		do	B 56.			4998
19-11.		Invalided to Canada		(do.)	B 77.			1790.

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

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

Registrar, Canadian Convalescent Hospital,
Bear Wood, Wokingham, Berks.
HOSPITAL.

A. & D. CARD

AT

A. & D. No. D 9831 PL. OF ACTION 438787.

RANK Pte UNIT 52nd Batt. SICK OR WOUNDED

NAME Anderson L. AGE 35 RELIGION C.E.

PLACE IN HOSPITAL 220 D

DIAGNOSIS Shrap Rt Elbow. Trac.

ADMITTED 12 SEP 1917 FROM 2nd S.G. Bristol

DISCHARGED TO

TRANSFERRED 2 - NOV 1917 Kirkdale Hosp. Liverpool.

SERVICE AT HOME 10/12 IN FIELD 1 2/12

RESULTS

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

(P.T.O.)

REMARKS.

Name Anderson Enl. 13-5-15

Date of Embarkation for England Arr. 3-12-15.

Proceeded to France. 20-2-16 Returned to England. 5-7-17 Wd

R./C. 19-11-17

P.R.2855.

(over)

Checked 12-3-26.

Cas. Sheet.

6-6-16 — G. S. W. Head — To duty 28-6-16

27-10-16 — P. U. O — Myalgia — To duty 18-11-16

28-6-17 — G. S. W. Arm. — Hand L. — Leg

— To Eng. 5-9-17

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

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

Southmead Hospital.

Ward 23 No. of Bed 6 Date 6.7.17.

Regl. No.	Rank and Name	Corps	Part to be X-Rayed
438787.	Pte Anderson.	52nd Can Inf	L. arm & hand & R. leg.

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

Signature of M.O. _____

Date _____

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

No. of Plate 7 2169.

Screen only legs.

Fract at elbow joint

Signature of Radiographer W Stilwell Cpl

Date 6.7.17

CONFIDENTIAL INFORMATION

HEH

Report No. 4937 | Category D ~~or E~~

Anderson, Charles
48 Logan Ave.,
Winnipeg,
Man.

G

No. of M. H. C. File	No. of Local File	No. of H. Q. File
MILITIA DEFENCE MAY 17 1920		

No. 438787 Rank Pte. Original Unit 52nd Bn Present Unit 52nd

Age 35 Height 5 ft. 5½ ins. Complexion fair Eyes blue Hair l.brown Character N.R.

Date of enlistment 13-5-15 Where enlisted Port Arthur Where seen service France.

Ship returned by HSH-2 Date of arrival 28-11-17 Port of arrival Hfx.

Birthplace Sweden Religion C of E.

649-Q-6808

Name and address next of kin Mother, Mrs.C.Anderson, same address.

Notification of return to be sent to -do-

Cause of disability Fixation of rt.elbow joint at 100° in flexion and mid-supination due to GSW.

Condition in detail which prevents the soldier from earning a full livelihood

Soldier was in France 18 months. Wounded in the right elbow and left forehead. Complains of poor use of right arm. Heart is sound. Lungs clear. Nervous system neg. Depressed healed scar shape of an oak leaf, at right external condyle. Complete fixation and flexion in mid-supination of right elbow joint at 100 deg. There is slight passive pronation and supination from elbow. Movements of wrist joint normal. Grasp of right hand poor, stiffness of fingers, moderate in degree with passive flexion of all fingers. Soldier is unable to write or eat with right hand. No disability from wound in head. Soldier requires further massage for arm and hand.

E. 1. Discharge, no pensionable disability.
E. 2. Waiting Reclassification.
E. 3. Discharge with claim for pension.

Degree of incapacity (Please state in fractions) Eng. Board -- Canadian Board 50% reducing to 30%

Probable duration of incapacity Permanent.

Does it render him permanently unfit for Military Service? No.

Would operation, Special treatment, or use of appliances etc., lessen incapacity? Conv. Home.

Destination to which transportation issued Winnipeg, Man.

Members of Board E.A.ROBERTSON CAPT. W.R.GRANT CAPT. J.R.TASSE CAPT. W.M.CARRICK MAJOR

INFORMATION TO BE FURNISHED BY SOLDIER

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

C. Service in Canada.
D. Treatment.

Occupation prior to enlistment Coal miner

Regular trade or profession do

Average earnings previous to enlistment 4.00 Any other income?

Name and address of last employer Mines at Seattle, Wash

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

Taxes If Homestead, when is patent due?

If carrying life or accident insurance, annual premium

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

If unable to follow previous occupation, name preference Cannot state at present.

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

Has he taken any Technical or Continuation Classes, if so what? N.A.

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

References Last empl.

Witness J.E.Woodley

Date Quebec 3-12-17. Signature Anderson, C.

I declare that the above statement is correct.

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

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

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

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

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

First payment date.....

Form No. 5a.

A. General Service.
B. Service abroad, not general.

AB MAY 8 1920

CONFIDENTIAL INFORMATION

Report No.

Category D 8 MAY 1920

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

AB MAY 10 1920

MAY 10 1920 233

RC

No. Original Unit Present Unit

Age Height Rank Etc. Complexion Eyes Hair Character

Date of enlistment Where enlisted Where seen service

Ship returned by Date of arrival Port of arrival

Birthplace Religion

Name and address next of kin

Notification of return to be sent to

Cause of disability

Condition in detail which prevents the soldier from earning a full livelihood

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

Probable duration of incapacity

Does it render him permanently unfit for Military Service?

Would operation, Special treatment, or use of appliances etc., lessen incapacity?

Designation to which transportation issued

Members of Board

INFORMATION TO BE FURNISHED BY SOLDIER

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

Occupation prior to enlistment

Regular trade or profession

Average earnings previous to enlistment Any other income?

Name and address of last employer

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

Taxes If Homesteed, when is patent due?

If carrying life or accident insurance, annual premium

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

If unable to follow previous occupation, name preference

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

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

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

References

Witness I declare that the above statement is correct.

Date Signature

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

Last Pay Cert. Cr. $ Dr. $ Amount paid at Depot R.C. $ L. F. C. leaving Depot $

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

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

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

Last payment made

Form No. 34

I 226
19/2/18

283-19-2-18

A-236

RECEIVED.
FEB 12 1918
A. D. M. S. M. D.-10

※ N. B.—This Form being applicable to any Board of Officers or Committee or Court of Inquiry, this blank to be filled in accordingly.

The signature of each Officer composing the Board, &c., should be attached to the end of the proceedings.

PROCEEDINGS of a * Medical Board

assembled at Winnipeg, Man.,

on the 8th day of February 1918

by order of A. D. M. S. M.D. 10

for the purpose of examining into and reporting on the condition of #438787 Pte Charles Anderson, 52nd Battn C.E.F. Man. Mil. Con. Hospital.

649-A-6808

PRESIDENT.

Capt. F. C. A. Walton, A.M.C.

MEMBERS.

Capt. G. S. Fahrni, A.M.C.

Lieut. C. W. Moore, A.M.C.

The Board having assembled pursuant to order, proceed to examine #438787 Pte Charles Anderson, 52nd Battn. C.E.F. and find:-

He has right elbow almost completely ankylosed at about 115°. There is a very faint degree of movement possible. Very limited degree of supination and pronation permissible, movements of hand and fingers very good. We believe his disability to be one third for a minimum period of two months. We recommend further massage treatment under supervision of orthopedic clinic.

APPROVED
FEB 20 1918
"/D.G.M.S.

APPROVED
FEB 12 1918
C. E. Forten
Major, A.M.C.
A.D.M.S., M.D.No. 10
WINNIPEG, MAN.

F. C. A. Walton Capt. A.M.C.
G. S. Fahrni Capt. A.M.C.

M. F. B. 303.
150M.—7-16.
H. Q. 1772—39—133.

To Be Reboarded April 8-18 C. W. Moore Lieut

PART I. *(continued).*

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

(*i.*) While on duty? **Yes.** (*ii.*) While off duty? **No.**

(*iii.*) Was a Court of Inquiry held? **No.** (*iv.*) Where? **-** (*v.*) When?

(*vi.*) Opinion of the Court? **-**

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

While at Lens June 28 th was hit in Rtb elbow by shrapnel which fractured elbow joint .
Was taken to Dressing Station ,4th Stationary Etaples June 29th.2nd Southern General Bristol July 5th.1917.
Bearwood Hospital Sept 12th.
Wound not healed.

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

General condition of patient Fair.
Heart,lungs and abdomen negative.
There is a wound on outer side of Rt elbow joint,which has n
nearly healed.
Complete ankylosis of joint,Rt.
The hand is cyanosed and weak.

8. OPERATION. (*i.*) Was one performed? **No.**

(*ii.*) If so, state what. **-**

(*iii.*) Was one advised and declined? **-**

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

9. (*i.*) Is there loss or decay of teeth attributable to Active Service? **Not Applicable.**

(*ii.*) If so, describe.

10. DO YOU RECOMMEND:—

(*a*) Fit for duty? **No.**

(*b*) Fit for base duty? **No.**

(*c*) Invalid to Canada? **Yes.**

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

Date of Report..... 191 Signed **J.T.Lewis. Capt. CAMC.**

Officer in medical charge of case.

Station.....

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

R.E.Wodehouse. Major. CAMC. Officer i/c Hospital / S.M.O. Brigade / Strike out one of these.

Dated at.....Station, on.....191.....

* Delete if inapplicable.

PART II.

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

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

11. Is the disability fully indicated in Part I. (1)?

If not, indicate it. **Yes**

12. Is the cause of the disability fully indicated in Part I. (2)?

If not, indicate it. **Yes**

13. Was the disability caused or aggravated by— (*a*) Negligence of the Soldier { Caused? **No** / Aggravated? **No** } (*b*) Misconduct of the Soldier { Caused? **No** / Aggravated? **No** }

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

Not applicable

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

Not applicable

16. Permanency of the Pensionable Disability estimated next above in (15).

(*i.*) Is it permanent? **Not applicable**

(*ii.*) If not permanent, what is its probable minimum duration (*in months*)?

17. If an operation was advised and declined, do you consider the refusal to have been unreasonable? **Not applicable**

18. Remarks.

Healed wound Rt elbow outer aspect between head of radius and lower of humerus. Joint ankylosed at angle of about 100° about 15° supination from complete pronation. No evidence of nerve injury. Small healed wound over head of second meta corpal Stiffness of disuse in hand.

HOSPITAL REPRESENTATIVE,
CANADIAN CONVALESCENT HOSPITAL,
BEARWOOD PARK, WOKINGHAM.

19. Recommendation :—(*a*) Fit for duty? **No**

(*b*) Fit for base duty? **No**

(*c*) Invalid to Canada? **Yes**

(*d*) Discharge from service as permanently unfit? **No**

Classification for the Military Hospitals Commission.

Date of Board **16-9-17**

President.

Signatures of the Board. **R.P.Borden Capt C.A.M.C.**
J.D.Adamson Capt C.A.M.C.

Station **Bearwood**

A.D.M.S. CANADIANS,
LONDON AREA.
LONDON.

Approved

A.D.M.S.

Dated at ..... Captain C.A.M.C. Station 18 OCT 1917 191

for A.D.M.S., Canadians, London Area.

INVALIDED TO CANADA FOR FURTHER MEDICAL TREATMENT

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

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

on the day of 191

Members of the Board :—

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

Dated at this day of 191

Date of Board

Signatures of the Board

President.

Station

Form (D.M.S. 1312). A.F.B. 179 Canada (Revised). 3737. 50M.

Reserved for M.H.C.

Regt. No. 438787 Rank Pte. Surname ANDERSON Christian Name CHARLES.

Unit or Corps—(a) Overseas from United Kingdom 52nd Bn. (b) In United Kingdom –

Born at—Town Stockholm. County or Province – Country Sweden.

Date of Birth—Day 15th Month February, Year 1882 Age 35 yrs months.

Joined at Port Arthur. Ontario. Date 13th. May 1917.

Former Trade or Occupation Miner.

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

None except scar of wound in Rt elbow outer side.

Height—feet 5 inches 5 Colour of eyes Blue

Signature of Soldier (*for identification purposes*) Charles Anderson.

Medical Report.

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

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

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

Disabilities Group (*a*)	G.S.WOUND RT ELBOW. Ankylosis Rt Elbow
Disabilities Group (*b*)	–
Disabilities Group (*c*).	–

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

	Disease or injury to which the disability is due.	Place of origin.	Date of origin.
(*i.*) As to Group (*a*) above.	G.S.WOUND RIGHT ELBOW.	Lens	June 28th. 1917.
(*ii.*) As to Group (*b*) above.			
(*iii.*) As to Group (*c*) above.			

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

3. Is the disability due to disease contracted or injuries received prior to Active Service ? No.

(*i.*)	As to Group (*a*) above ?	If yes, has Active Service aggravated it ?
(*ii.*)	As to Group (*b*) above ?	If yes, has Active Service aggravated it ?
(*iii.*)	As to Group (*c*) above ?	If yes, has Active Service aggravated it ?

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

(*i.*)	As to Group (*a*) above ?
(*ii.*)	As to Group (*b*) above ?
(*iii.*)	As to Group (*c*) above ?

MARRIED OR SINGLE: Single.

PLACE OF BIRTH: Stockholm, Sweden.

NAME AND ADDRESS OF NEXT OF KIN: Mrs. M. Anderson,
General Delivery, P.O. Stockholm, Sweden.

RELATIONSHIP OF NEXT OF KIN: Mother

NAME AND ADDRESS OF NEXT OF KIN:

RELATIONSHIP OF NEXT OF

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. 438787 RANK A6 NAME Anderson, Charles

IF IN PERMT. CORPS WHAT UNIT / UNIT 52nd Bn

PERMANENT FORCE ALLOWANCES

PLACE OF ATTESTATION Port Arthur, Ont.

DATE OF ATTESTATION 13th May, 1915

TRANSFERRED TO L.2.S. DATE 25.10.17 AUTHORITY Beaverwood 13/A/19.10.17

TRANSFERRED TO Non-Effective DATE 25.10.17 AUTHORITY

TRANSFERRED TO DATE AUTHORITY

TRANSFERRED TO DATE AUTHORITY

MAR 19 1918 CANADIAN CONTINGENTS

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 24.10.17 Canada REASON AND AUTHORITY Beaverwood 13/A/19.10.17

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE) G Ronald

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
Mar 31			122				12 20								134 20									73 55						73 55	60 65			
															3 00	129	15/4	172	30/6					2 62	2 62					5 24	88 41			
															4 10	202	15/5							2 55						2 55	211 96			
															3.			247	15/6 30/6						2 56		4 26				2 56	150 40			
															4 10					2762 CBA 30/6 3954 Gn Mon 15/6							4 26				8 52	175 98			
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															4 10	590 562	30/9	603	15/10	A. 420 S.C.M.				2 62	2 62	2 61	3 06				10 91	250 58			
															33 00																	983 58		165	
															4 10			695	15/12						11 34						11 34	306 34		180	126 34
															4 10	766	30/9							5 24						5 24	335 20		195	140 20
															70 80									89 26	19 13	27 27				135 60	Carried Forward.			

P. 697.

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS.

Date of Payment.	No. of Acq. Roll	AMOUNT Francs	£	S.	$	¢	Place of Payment.	Name of Paymaster.	Remarks.
18-9-17	774			10	2	13			
2-10	854			10	2	44			
16-10	944			10	2	13			
22-10	Land			15	3	73			
					80	30			

H No1 #566 H. Liverpool 6th Bal $523.6ct

Smith Lockhart Edwards

MARRIED OR SINGLE: Single.

PLACE OF BIRTH: Stockholm, Sweden,

NAME AND ADDRESS OF NEXT OF KIN: Mrs M. Anderson, General Delivery, P.O. Stockholm, Sweden,

RELATIONSHIP OF NEXT OF KIN: Mother

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF

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. 438787 RANK A NAME Anderson, Charles

IF IN PERMT. CORPS WHAT UNIT UNIT 52nd Bn

PERMANENT FORCE ALLOWANCES

PLACE OF ATTESTATION Port Arthur, Ont.

DATE OF ATTESTATION 12th May, 1915

TRANSFERRED TO S.S.S. DATE 25.10.17 AUTHORITY Bearwood 13A19.10.17

TRANSFERRED TO Nortesek DATE 25.10.17 AUTHORITY

TRANSFERRED TO DATE AUTHORITY

TRANSFERRED TO DATE AUTHORITY

MAR 19 1918 CANADIAN CONTINGENTS

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 24.10.17 Canada REASON AND AUTHORITY Bearwood 13A19.10.17

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

G Ronald Int.

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
Mar 31			122				12	20							134	90								73	55					73	55	60	65		
1/4 30/4	30	1	00	30	00	30	10	3	00						33	00	129	15/4	172	30/4				2	62	2	62			5	24	88	41		
1/5 31/5	31	1		31		31	10	3	10						34	10	202	15/5						2	55					2	55	119	96		
1/6 30/6	30	1	00	30	00	30	10	3	00						33				247	30/6						2	56			2	56	150	40		
1/7 31/7	31	1		31		31		3	10						34	10					2762	6/8	3/4				4	26		8	52	175	98		
1/8 31/8	31	1		31		31		3	10						34	10					3954	Gr. Hop	13/6				4	26				218	08		
1/9 30/9	30	1		30		30		3	00						33	90					481	C&B	27/7				4	36		15	69	227	89		
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1/11 30/11	30	1		30				3	00						33	00																283	58	165	
Dec. 31			31				3	10							34	10			695	4/12						11	34			11	34	306	34	180	126	34
1917			39	70			39	70																										
Jan 31	1	60/70	34	10											34	10	766	30/1						5	24					5	24	335	20	195	140	20
Fwd			470	80											470	80								89	26	19	13	27	27	135	80	Carried Forward			

SUPPLIES.

INDENT FOR RATIONS.

No.

STATION

DATE

AND MEN.

HEAVY DRAFT HORSES.

LIGHT DRAFT, RIDIN AND MULE

RENGTH

FOR RATIONS

* TOTAL

* TOTAL STRENGTH

LESS ON COMMAND

" IN HOSPITAL

TOTAL NOT DRAWING RATIONS

* TOTAL DRAWING RATIONS

* These totals must agree with the Daily Parade State accompanying this Indent.

NUMBER OF DAYS RATIONS INDENTED FOR { MEN / HORSES

OFFICERS AND MEN.

BREAD	MEAT	BACON	SUGAR	TEA	SALT			FOR BREAD: FLOUR	YEAST	SALT	WOOD

OVE

HAND

Kr No 1 #664 Liverpool C/A Bal $523.64

Straits Exchange Stock

438787 Pte. Anderson Charles. Assigned Pay Nil.

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
Bt. Fwd.			470	80											470	80								8920	1913	2727				13560	33520		195	140 20	
Feb	28		30	80											30	80	817	30/12						523						5 23	36077		210	150 77	
March	31	1/10	34	10											34	10	902 880	28/12	1049 990	15/3				261 261	261					10 44	38443		225		
April	30		33	00											33	00	32							262						2 62	41481				
1/31 May	31		34	10											34	10	43	2 14/14	149	4/5/14				262	268					5 30	44361				
30 June	30	1/10	33	-											33	-	231 100	5/5 5/5						268 268		264				8 03	40858		270	198 58	
July	31		34	10											34	10															50268		285	217 68	
Aug	31		34	10											34	10	341 298	22/6 11/6						268 268						5 36	53149		300 00	231 42	
Sept	30		33	-											33	-								11561	7103	7994				17758	56442		315.	249 42	

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFER-RED Pay	SER. ALLOTG. NG.
	Bal Fwd London	~~564 42~~							564 42		
	30.9.17								564 42 315		
Oct 1-24		26 40							590 82		
	Interest on Deffery 31-8 17	13 12							603 94		
18/12 Jany				Draft 1006 - 66A Bisewood. 22-10-17	73 00						
				✓ 943 - CCA Wokingham. 16-10-17	2 43						
				✓ 852 - do. 2-10-17	2 43				526 08		
					77 86						
Feb.				Draft 745 - CCA Wokingham 18/9/17	2 44				523 64		
					2 44						
				Balance transferred to N. E. Branch					Nil		

A.S.C. FORM RENT — EFFEC —
DISCHARGED TO Can DATE 24-10-17
PAYBOOK VERIFIED 24-10-17
65 BAL 8523 CPC HELD 24-10-17
AUTHY Bearman 13a 19/10/17

Checked