13-6-18 E.Ftn.

Proceedings of Court of Inquiry or on men reported Missing on Active Service.....

Attestation Papers..... 3 - 1 + 1

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet..... 1

Compulsory Stoppages.....

Casualty Forms..... 1

Proceedings on discharge.....

Corps History Sheet.....

Date and No. of Deposit Receipt for Purchase Money and Amount.....

Parchment Certificate.....

Medical Report for Invalids.....

Medical History Sheet..... 1

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet.....

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate.....

A.F.B. 122 ------ 1

Name ANDERSON, David

Regt. No 6293 Rank Pte.

Corps 1st Can. Regt.

FOR OFFICIAL PURPOSES PRES. TO HAVE DIED ON OR SINCE 23-4-15.

R. O. No.....

H. Q. No.....

4.

1. Anthrax Removed 9-1-18
Cards. 1. Change of Address
1. Part. II.
1. Casualty.

6.27
23.27
31.27
1

M. F. W. 62.
100m.—6-17.
H. Q. 1772—39—935.

M.T. 9e 11/2/20

Pay sheet

Triplicate

ATTESTATION PAPER.

No. 6293.

Folio. 9

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

	(ANSWERS).
1. What is your name?	David Anderson
2. In what Town, Township or Parish, and in what Country were you born?	Glasnaghacee, Ireland
3. What is the name of your next-of-kin?	Mary Jane Anderson
4. What is the address of your next-of-kin?	42 Abbey St. Bangor, Co. Down, Ireland
5. What is the date of your birth?	June 2nd 1884
6. What is your Trade or Calling?	Plumber
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?	
10. Have you ever served in any Military Force? If so, state particulars of former Service.	
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

David Anderson (Signature of Man).

A. A. Williamson (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, David Anderson, 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.

David Anderson (Signature of Recruit)

Date Sept 17 1914. A. A. Williamson (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, David Anderson, do make Oath, that I will be faithful and bear true Allegiance to His Majesty **King George the Fifth,** His Heirs and Successors, and that I will as in duty bound honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity, against all enemies, and will observe and obey all orders of His Majesty, His Heirs and Successors, and of all the Generals and Officers set over me. So help me God.

David Anderson (Signature of Recruit)

Date Sept 17 1914. A. A. Williamson (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 Valcartier this 22 day of Sept 1914.

J. Mitchell (Signature of Justice)

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

J. Mitchell Lt Col (Approving Officer)

100 M.—8-14.
H.Q. 1772-1-13.

5th Batt

Description of David Anderson on Enlistment.

Apparent Age 26 years ..... months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height ..... 5 ft. 8½ ins.

Chest measurement. { Girth when fully expanded ..... 36½ ins.
Range of expansion ..... 2½ ins.

Complexion ..... Dark
Eyes ..... Brown
Hair ..... Brown

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

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 August 31st 1914. .....

Place Valcartier ..... Medical Officer.

*Insert here "fit" or "unfit."

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

CERTIFICATE OF OFFICER COMMANDING UNIT.

David 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.

..... (Signature of Officer)
O.C. 1st Bn

Date Sept 2nd 1914.

#6293 649-A-583

MEDICAL HISTORY SHEET.

ORIGINAL

9

Surname Anderson Christian Name David

Examined on 31 day of Aug 1914 at Val Cartier

Birthplace City or Town Donnaghadee County Ireland

Apparent age 26

Trade or occupation Plumber

Height 5 Feet 8½ Inches.

Weight 156 Lbs.

Chest measurement Minimum 34 inches. Maximum expansion 2½ inches.

Physical development Good

Small-Pox Marks Nil

Vaccination Marks Arm Right. Left. Number 1

When Vaccinated last 1888

(a) Marks indicating congenital peculiarities or previous disease Nil

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

Approved by D Columbus

Rank Lt M.O.

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

Date	Result	Vaccinations.
1888		M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
1914 Sept		M.O.
		M.O.
		M.O.
		M.O.

Colonel in Charge of Records, Canadian Contingents, London.

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

W. R. WARD,

Enlisted on 22 day of September 1914 at Valcartier

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	1st Bn.	6293		
Transferred to..				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.

N. B.—This sheet to be disposed of in accordance with instructions in the Regulations for Army Medical Service, on the man becoming non-effective; the date and cause being stated on next page.

Entries in Red Ink made from Attestation Sheets.

17/5/15 R M Law for D. D. M. S.

M. F. B. 313.

50M—8-14.
H. Q. 1772—39—439.

Christian Name.....

Surname.....

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.

4/133

Rank and Name ANDERSON, David

Regimental No. 6293

Unit 1st Battalion

Date of enlistment 17th September, 1914.

Place of birth Ireland

Married (Yes or No) No.

If in Permanent Force

Promotions or appointments

Name and Address of Next-of-kin

Mrs M.J.Anderson (Mother)
42, Albert Street, Bangor
Co. Down Ire..

Date and place of discharge

Reason for discharge

Character on discharge

N/E R.B. No. 1
File R.L.
Category K.A.

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	Embarked			K.A. 4.D.
21/8/15	W.O.	Wounded & Missing		23/4/15	Cas. list 144. 09/10/K. Part II orders. — 26 A.F.B 103
26.4.16	CL-A339-1st R.	For official purposes presumed to have ~~dd~~ "Died" (KA) on or since		23.4.15	& CL-A/344-2/5/16

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				

1ST CANADIAN INF. BATTALION

18919—Wt. W4862—510. - 600,000.—9-14.—G. A. T. & S., Ltd. Forms B. 103/1.

Army Form B. 103.

Casualty Form—Active Service.

Regiment or Corps 1st Canadian Reg. (1st Ontario Batt.)

Regimental No. 6293 Rank Pte Name Anderson David

Enlisted (a) Sept 22nd/14 Terms of Service (a) end of war. Service reckons from (a) 22 SEP 1914

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.
11-8-15	1st Bn	Wounded & missing	Field	23-4-15	Corrected from Roll.
26-4-16	1st Bn	For official purposes (KR) Res. to have died on or since	F.	22-4-15	6 LA 329 & 6 LA 344 d/ 2.5.16

O.C. Brinks CAPT. OFFICER i/c RECORDS CANADIAN SECTION G. H. Q.

H Quarters Lieut. for Colonel i/c Records, O.M.F.C.

(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				

29281 THE MORTIMER SYSTEMS.
OTTAWA, CANADA

GWW

385

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

To Whom Anderson Mrs M J.
Address 42 Albert St.
Bangor. Co Down
Ireland
Rate $ 20 00 per month

By Whom Assigned Anderson David
Regtl. No. 6293
Rank Pte
Corps B Co 1st Battn

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.		A 120.	20 00	Casualties
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
Apl.				
May				
June				
July				
Aug				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

Duplicate sent to Eng. for future pay'ts

Wounded & Missing 23/4/15
(C.L. 22/8/15)
Pension Notified 17-7-17
20 Pilow 17-7-17
Stop Sept 1/15. 3rd Wpn 8/9/15

Previously reported missing
Now for official purposes presumed
to have died on or since 23rd April 1915
C 2 (1) 28/12/16 GJD

H.K. 8/1/17.

Geo. Dunn.
Cavendish

29247 THE MORTIMER SYSTEMS
OTTAWA, CANADA

NAME ANDERSON, DAVID

Regimental No. 6293.

Unit [redacted] - 1st Battn

Date of enlistment 17th September 1914

Place of Birth Ireland

Married (yes or no) No

Amount of pay assigned monthly $ 20.00 c

To whom payable Next of Kin

Name and address of next-of-kin
Mother, Mrs M. J. Anderson
42 Albert Street, Bangor,
Co: Down, Ireland

Date and place discharged list 144. 2/8 wounded & missing 23. April. 1915

Reason for discharge

Character on discharge Considered Dead.

Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned pay	Other Charges	Total Debits	Remarks, Casualties, etc.
~~Aug 24~~	~~Sep 21~~	~~29~~	~~1.00~~	~~29.00~~	~~29~~	~~.10~~	~~2.90~~		~~31.90~~			~~31.90~~			~~31.90~~	
Sep 22	Oct 31	40	1.00	40 -	40	.10	4.		44.	1		20.	20.		40.	
Nov 1	Nov 30	30	1	30 -	30	10	3	4	37	1		2.50	20		22.50	
Dec 1	Dec 31	31	1	31	31	10	3.10	14.50	48.60			2.50	20		45	
Jan 1	Jan 31	31	1	31	31	10	3.10	36.03	77.0			7.50	20		27.50	
Feb 1	Feb 28	28	1	28.	28.	10.	2.80.	10.20	41.			3.	20.		23.	
Mar	1-31	31	1	31	31	10	3.10	18.	52.10			5	20		25	
April	30	30	1	30	30	10	3 -	24.10	60.10			2	20		22 -	
May 1	May 31	31	1	31	31	10	3.10	38.10	72.20				20		20 -	
June 1	June 30	30	1	30	30	10	3	52.20.	85.20				20		20 -	
July 1	July 31	31	1	31	31	10	3.10.	65.20	99.30				20		20 -	
								99.30								
								173. Exch. Adjust								
	1-31	-	-	-	-	-	-	81.03	81.03				20	108.90	128.90	
								4787								
								4787	4787							

Settled

Statement of account rendered JUN 1 1918

Cash found in effects No Report

Lem. A.P. 2.00 for Oct 19 14 Dep'd in Canada In agreement with Ottawa Slip H. 893-1-1 2 28/12/14

list 144. 2/8. wded & missing 23/4. Acct. stopped 31. Aug dr $108.90 a/c pay 24/4 99.30 - 31/7

Fld. B.N.E. Dept Pte Authority Letter Ap. Main Office mic 10-2-50 -3/1/17

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

Surname: Anderson Christian Name or Names: D. Reg. No.: 6293

Rank: Pte. Unit: 1st Bn. Co. Troop Batty.

Hospital Date of Admission

Transferred ..... Hosp.

..... Hosp.

..... Hosp.

..... Hosp.

Diagnosis: Wounded & missing 23.4.15

(1)
Later Diagnosis (if changed)

(2)
(3) Died.

Additional Diagnoses, if more than one state present

DISPOSITION Date

C.L. 21.8.15.

" 26.4.16. A.339. 1HH

" 2.5.16. A344

REMARKS

Rec'd. off. missing. now for official purposes presumed to have died on or since 23.4.15.

A.M.D. 2 DEPT.

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

EPITOME OF HOSPITAL TREATMENT.

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

H. Q. FILE No. 649- at 5-8 3.

NAME Anderson. David

REGT'L. No. 6293

RANK AND CORPS Pte. 1st Battalion.

NO. 467-

FOLL.

CABLE NO.	CABLE DATE	NATURE OF CASUALTY
M.720	21-8-15	Wounded and missing April 23rd
B2090 C.	28-3-16	Prev. rep. missing now for offic. purposes presumed to have died on or since 23-4-15

L. L. Job 83225 —M. & D. 5842.

M. F. W. 42—50m 7-15.
H. Q. 1772—39-893.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
144		23-4-15	Wounded & missing
A339			Prev. rep. missing now
			for offic. purposes presumed
			to have died on or since
			~~23-4-16~~ 23-4-15 as per Casualty

Name Anderson D. *Rank* Pte. *Reg. No.* 6293

Unit 1st Battalion 42 Albert St. 25-A-227

File No Bangor

Next of Kin Mrs. M.J. Anderson Ireland.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
23-4-15	Wounded & Missing			144	M-720	

Prev reported missing now for official purposes presumed to have died on or since 23-4-15

A344

Jones B

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

Anderson. Rte. David 6293 649A-583.

Elig for 14/15 Star. Had

Medals. Brother. Mrs. M. J. Anderson.

& Decorations. 42 Albert St.

Bangor. Co. Down.

Ireland.

B.W.V. Ditto.

(Serial no. 75651.)

Scroll Desp. 1-12-20 Reqn. No. Z 2620

Plaque Desp. SEP 30 1921 Reqn. No. 5 2641

O.H.S. Ditto

J.A.S. 23/1/20.

M 1095-

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

Date	Brief details, and signature
1888	Vaccination
Sept. 1914.	Anti- Typhoid.

Table IV.—Service Table.

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

6293

DUPLICATE.

Army Form B. 178.

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

MEDICAL HISTORY of

Surname Anderson *Christian Name* David.

TABLE I.—GENERAL TABLE.

Birthplace ... Parish Donnaghadee. County Ireland.

Examined ... ... on 31st. day of Aug. 1914.
at Valcartier.

Declared Age ... ... 26 years days.

Trade or Occupation ... Plumber

Height ... ... 5 feet, 8½ inches.

Weight ... ... 156 lbs.

Chest Measurement. Girth when fully Expanded. ~~34~~ 36½ inches.
Range of Expansion. 2½ inches.

Physical Development ... Good

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

When Vaccinated 1888

Vision ... ... R.E.—V=
L.E.—V=

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

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

Approved by (*Signature*) D. E. Rolenper.
(*Rank*) Lt.
Medical Officer.

I certify the foregoing to be a true copy of the original entry on page [illegible] of this man's Medical History Sheet in the Office of the Officer in charge of Records, Canadian Contingents.

Enlisted ... ... at Valcartier
on 22nd day of September. 1914.

Joined on Enlistment ... / Transferred to ...	Corps.	Regtl. No.
	1st Battn.	6293

Became non-effective by ...

This Medical History Sheet has been compared with the corresponding Attestation Paper, and entries made in red have been taken from the Attestation Paper.

on day of 191.
W. R. WARD,
(*Signature*) Colonel in Charge of Records,
(*Rank*) Canadian Contingents.

(7278.) Wt. 2869—1662. 200M. 5/15. J. T. & S., Ltd. Forms B. 178.

P.T.O.

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

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				