REGIMENTAL DOCUMENTS

NAME ANDERSON. Ernest: E REGT. NO. 443881 UNIT 54th Battn H. Q. FILE NO.

	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
2	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
1	~~TRAINING HISTORY SHEET (M.F.W. 113)~~ Record Sheet					
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)					
3	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
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	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
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1	LAST PAY CERTIFICATE (M.F.W. 44)					
1	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
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	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
1	M F W. 125					
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W. 2589
100M-11-19
1772-39-1377

ORIGINAL

ATTESTATION PAPER

No. 43881

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS)

1. What is your name? ..... Ernest Edward Anderson
2. In what Town, Township, or Parish, and in what Country were you born? ..... Vancouver, B.C.
3. What is the name of your next-of-kin? ..... Mrs. Rose Anderson
4. What is the address of your next-of-kin? ..... 250 Lansdowne St., Kamloops, B.C.
5. What is the date of your birth? .....
6. What is your trade or calling? ..... Teamster
7. Are you married? ..... No
8. Are you willing to be vaccinated or re-vaccinated? ..... Yes Inoc F
9. Do you now belong to the Active Militia? ..... Yes
10. Have you ever served in any Military Force? ..... 102nd R.M.R.
    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

Kamloops

Ernest E Anderson (Signature of Man.)

F. D. Lucas Capt. (Signature of Witness.)

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Ernest Edward 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.

Ernest E Anderson (Signature of Recruit.)

Date Sept. 5th 1915. F. D. Lucas, Capt. (Signature of Witness.)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Ernest Edward 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.

Ernest E Anderson (Signature of Recruit.)

Date Sept 5th 1915. F. D. Lucas, Capt. (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 Vernon Camp this 8th day of Sept. 1915.

W. F. Wakeman (Signature of Justice.)

A Justice of the Peace in and for Province of British Columbia

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

F. D. Lucas, Capt. (Approving Officer.)

M. F. W. 23.
200 M.—3-15.
H.Q. 1772-89-841.

229

DESCRIPTION OF L. L. Anderson ON ENLISTMENT.

Apparent Age 21 years ..... 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	33 ins.
	Range of expansion	3 ins.

Complexion dark

Eyes Grey

Hair black

Religious Denominations

- Church of England
- 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.)

2 vac Lam

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 8th Sept 1915. A Hamilton Capt Comb

Place Vernon B C

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

L. L. 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. W. G. Kemball LIEUT.-COL. (Signature of Officer.)
54TH O. S. KOOTENAY BATT. C. E. F.

Date 10th Sept 1915

703

17556

Address your reply to:—
[redacted]
DISTRICT PAYMASTER M D NO. 11
VICTORIA.
and mark letter For "C" SECTION

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

WAR SERVICE GRATUITY
JAN 29 1919
C. E. F., M. D. XI

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 Ernest Edward 2. Surname Anderson
3. Rank Lance. Cpl. 4. Original Unit 54. Batt 5. Reg. No. 443881.
6. Address, in full, to which future payments of gratuity are to be forwarded P.O. Box 856. Kamloops. B. C.
7. Date of enlistment in the C.E.F. 5/9/15.
8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge Mrs. R. Anderson.
9. Relationship of such dependent Mother
10. Address, in full, of such dependent P.O. Box 856. Kamloops. B.C.
11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? Yes.
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:—
54. Battn. 28/7/16. until 25/3/18.
13. Were you on the strength for pay and allowances of the Clearing Services Command, having been at any time on duty outside of Canada or the United States? No.
14. Were you on active service only in Canada or the United States? If so, give particulars of 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 2 yrs. 7 mos.
54 Battn. 5/9/15 until 25/3/18.
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 ..... 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 .....
3. mos. Pay @ $53.00 $53.00. $54.10. Total $160.10.
Paymaster Post Discharge Pay. Victoria B.C.

20. Have you been issued with a War Service Badge? If so, what class ? ..... A. & B. .....

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? Not Applicable

24. Are you now serving in the C.E.F.? ..... No. ..... If not, give:—(a) Date of discharge
25/3/18. (b) Reason for discharge .....
G. S. W. Right Arm.
Physically 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 .....
54 Batt'n. 28/7/16. until 18/9/16.

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: E E Anderson

Place of Residence: 445 Seymour St. Kamloops B.C.

Declared before me at: Kamloops

This 29th day of Jan 19.19

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

D B Johnstone
A Notary Public in and for the Province of British Columbia.

POST DISCHARGE PAY.

Date paid.	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
1918 Mar 25				
Apl 25	179	65		
May 27				

Certified Correct.

District Paymaster.

W H Hargreaves Major

CANADIAN CONTINGENT EXPEDITIONARY FORCE

"J" M. H. C. M. D. XI.

LAST PAY CERTIFICATE M. D. 11

16th Res Bn No. 19

This form to be used for all Ranks (Vide Articles 122, 130 and 141, Financial Instructions, 2571c, C.E.F., 1916).

Regimental No. 443881 Rank L/Cpl Name Anderson, E Ed

Corps "J" Unit M.H.C.C. who was* discharged

On 20-3-18 191....., to.....

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 22-11- 191..., to 25-3- 191 8, the inclusive date of transfer or discharge.

Dr.	$	c.	Cr.	$	c.
Bal. Dr. from prev. month T.P.S.	52	62	Bal. Cr. from prev. month		
Advances by Cheques No 18457.	10		Regt'l Pay 124 days at $ 1 05 c	130	20
No			Field Allow. 124 days at $ 10 c	12	40
Assigned Pay and Sep'n Allce. No 19159.	32	16	Separation Allowances* (~~Monthly~~)	20	16
Jan 20 S/A + P/P. pd by 11 Can. D. 19053 Other charges	80		Other Allowances* Clothing	10	
Payment on transfer or discharge No 19158	6	23	Other Credits* Soldiers Christmas allce 7-1-18 — 16-1-18	8	35
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)		
Total	181	01	Total	181	01

*Give particulars.

SPS

A ~~monthly~~ stoppage of $ 12 00 (†) has (‡) been paid on account of Assigned

{Pay for the month of Jan 1 — 25/3 191 8.
and Sep'n Allce. for month of Jan 1 — 25/3 191 8.} (to) Assignee Mrs R. Anderson

(Address) 750 Lansdowne St., Kamloops B.C.

(†) Insert amount to be assigned, whether it has been paid or not.
(‡) Insert "not" if amount has not been paid for period of account.

On Transfer of an Officer

Outfit Allowance of $..... has been paid by Paymaster, Military District No.....

REMARKS:—

State (1) date of enlistment —

(2) if married and if a Separation Allowance ~~Card~~ has been ~~submitted~~ Pd to Jan 25-3-18

(3) cause of discharge..... authority DO 83 "J" Unit M.H.C.C.

(4) authority for transfer .....

NOTE.—Separation Allowance and Assigned pay Card and Index Card (M. F. W. 71) are to accompany the original Last Pay Certificate on transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay-list of the unit.

Date 25. 3. 18

Place Victoria B.C.

H. E. Braddock Capt.
Paymaster "J" Unit, M. H. C. C. *Paymaster.*

N.B.—For purposes of transfer this form is to be made out in quadruplicate. Original copy to paymaster of new unit; duplicate to District Paymaster; triplicate to accompany the pay-list at the end of the month, and quadruplicate for retention as a record.

For purposes of discharge it is to be made out in triplicate. Original copy to accompany discharge papers; duplicate to accompany pay-list at the end of the month, and triplicate for retention as a record.

If a man on discharge is entitled to three months' Post Discharge Pay, Last Pay certificate will be made out in quadruplicate. The original Last Pay Certificate will be forwarded with other documents to Paymaster Post Discharge Pay and triplicate, with his discharge documents.

M. F. W. 44.

10M.—1-18.
H. Q. 1772-33-903.

Forms
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Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
890	443881	L/Cpl	Anderson	E.E.
Year	Unit.		Age.	Service.
	16th Res Bn.		23	2 8/12

Station and Date.
Raven's Croft, Military Hpl Seaford, Sussex.
Admitted. 20 SEP 1917

Disease G.S.W. Rt. Arm. Kamloops: B.C. 102nd Batt:
Former Occupation: Teamster. Enlisted Aug: 1915
Arrive England: Oct 1915 To France. 8 months:
Returned England: Oct: 1916: Present Complaint.

Present Complaint: Bow on right arm.
In France: G.S.W. right arm. Fracture
Came to England Stretcher case: Humerus
(In France a few pieces of bone removed)
Birmingham 1st Southern Gen. 3 months
Uxbridge Convalescent 2½ months.
3rd Cdo: 1½ "
at 3rd Cdo the bone wound opened up again but healed soon again
X-ray with documents taken about. Shows bowing of humerus
first week of Sept: '17: and sequestrum?

Next of Kin.

Examination:

The shoulder and elbow joints are unimpaired
There is bowing (slight) of the arm convexity
outwards and over the convexity the
bone is more superficial than in left arm.
There is a small open wound covered
with granulations looking like the
exit of a sinus (position indicated by
drawing)
General Exam. reveals nothing abnormal.
no other complaints: Jeffrey Lieut

*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 1150. 1,450,000. 6/12 16. C.F.&S. Forms/I. 1237/12. (E239) P.T.O.

Station and Date.	
27-9-17	Trans to C.M.A.C.
	[illegible] Lieut
5 C.G. H	
Liverpool	Wound of entry healed - Exit wound shows
13/11/17	a sinall surface unhealed - Elbow flexes to 95°
	shoulder free - abduction weak - Hand weak
	but all movements free
	W.G. Robertson Lt

3 CAN. GEN. H. H.
LIVERPOOL

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Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book	Regimental No.	Rank.	Surname.	Christian Name.
T 3111	443881	L/Cpl	Cameron	R. E.
Year 1917	Unit. 16 Reserve.		Age. 23	Service. 28/12

Station and Date.	Disease
C.C.S. Rouen. 20/9/17	Gsw Right Arm Present Complaint Gsw Right Arm Dam/ history unimportant ~~Last Night~~ Yesterday Present Complaint Last night a Belgian gunshot wound. went asleep about midnight ½ hour afterwards he was dressed. The injury happened at midnight the was in hospl. at 4 am next morning. Remained there until en Belgium at C.C.S & then came to Hospl at Boulogne where he was X Rayed & a piece of bone taken out Hospl Hospl. The wound healed up & he went to Canada convalescent Home ~~sept 1917~~ Etaples The wound broke open there about 1st Nov. It healed over again broke down again when he started drill at 3 C.C.D. Healed over again. & he returned to Etaples where it broke down again. He was admitted Condition on admission Patient both wrists wounded. put back for condition of arm Has fairly good grip with right hand but cannot bend right elbow & raise arm above head There is a scar on posterior surface of arm about 4 inches long healed with exception of a piece about size of 25 cent piece which is covered with granulations. Dressing two or three inches above this downwards cause pus to ooze from wound. Oct 1st wound dressed today. Granulations touched with nitrate of silver. & dry dressing put on " 5th arm discharging very considerable Amount

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

W. P. Griffith & Sons Ltd., Printers, Old Bailey, E.C.
[1185] W11203/M1150 50m 12/16v 5 89 Forms/I. 1237/12

P.T.O.

Station and Date.	
	9/10/17 ~~Some~~ Some swell upper part groin apply Hot Fomentations F Evans
	10/10/17 Swelling going down discharge about Some. F Evans
	16/10/17. Very slight discharge, slight swelling J.O. Baker
	14/10/17 " " " " " J O Baker
	20/10/17. No discharge. very slight swelling J O Baker
	24/10/17. Screwed. with probe in arm. evidently passes through the bone J O Baker.
	27/10/17. Wounds closed, Complains of pain. Some swelling. J O Baker
	29/10/17 " " " " " " " " J O Baker
	30/10/17 Complains of pain J O Baker
	Nov 2/17 Arm Swollen, painful. J O Baker
	4/11/17. Swelling region of Deltoid, probed. J O Baker Capt Canc.
	6/11/17. " " " " wounds local anaesthesia J O Baker Capt Canc
	6/11/17. Papers prepared for board. J O Baker Capt R.A.M.C
	9/11/17. Slight discharge: but arm Very painful J O Baker Capt Canc
	Nov 21/17 Invalided to Canada J O Baker Capt Canc
5 C.G.H Liverpool	23/1/17 Wound of entry healed - surface raw with small unhealed ulcer - Elbow flexes to 95°. Shoulder for abduction weak - hand weak but all movements free W.G. Robertson Lt.

Forms
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Admitted 20 JUN 1917

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book	Regimental No.	Rank.	Surname.	Christian Name.
1904	443881	L/Cpl	Anderson	C C

Year

Unit.	Age.	Service.
16th Lond R	23	1/12

20 JUN 1917

CANADIAN MILITARY HOSPITAL, EASTBOURNE.

Station and Date.

Disease Enlarged tonsils

Sore throat for about two weeks
No previous trouble. Feels fairly
well apart from throat
Temp

Large ulcer on ant. surface of
Rt tonsil, covered with whitish
membrane easily removed.
Several smaller ulcers about
mouths of follicles, chiefly on
Rt side. One ulcer on posterior
pillar Lt. side.
Smear negative for Vincents.
R K Anderson

July 23/17 Ulcer healed fairly
slowly after recovery tonsils
were removed under local.
Bleeding (arterial) followed
during the night and it was
necessary to give him ether and
ligate the bleeder. Good recovery
Discharged to Bat Aldw
R K Anderson Capt

Mother Mrs H Anderson
Kirkella

1904

DISCHARGED
23 JUL 1917

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

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[1185] W11203/M1150 50m 12/16 5 89 Forms/I. 1237/12

P.T.O.

Station and Date.	

N.B.—To be filed by M.O. inaccessible to Patients.

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(Part I.) 939

Army Form I. 1237.

(C.I.F. 1.)

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
Year	443881	L/Cpl	Anderson	E.
	Unit.		Age.	Service.
	54th Bn		22	14/12

(Part II.)

(a) Station and Date.

(b) Disease Bullet wd. rt arm

(c) Date of origin 17/9/16 Place Ypres Country Belgium

Can. Con. Hosp. at

UXBRIDGE VOX

24 Dec 1916

(d) Cause

(e) History to Date.	Admitted to	Date.	Special Treatment, &c.	Result.	Date Discharged
	1 C.C.S.	17/9/16			
	2 Boulogne	18/9/16			
	3 Birmingham	20/9/16			
	4				

(f) X Ray Report. From

(g) Marks of Injury. External Scar rt. arm.

Internal

(h) Present Condition. of physical state Fair Symptoms Pain in wound

of disability Stiffness of elbow

Complications

(i) Prognosis.

(j) Treatment and Semi-Weekly Progress. Date.	Treatment.	Progress.
29-12-16.	Massage —	
6-1-17	" R.T. Shoulder & Elbow	
16-1-17	"	
23-1-17	" " "	
31-1-17	" "	

(k) Result.

(l) Disposal. Transferred to ccac For B.D.

Date 7-2-17. 16/2/17

Signed Bellamy Capt., C.A.M.C.

*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.

(m)

Station and Date.	ADDITIONAL MEMO re Part 1.
	(1) Married No.
	(2) Occupation Teamster
	(3) Enlisted at Kamloops Date Sept. 1915
	(4) Vaccinated for Small Pox Yes
	(5) Inoculated for Typhoid Yes
	for Tetanus Yes

Section (n)

Date.	TREATMENT, &c., re Part II.—Continued.	Progress.
16-2-16	Cable Bill	

Signed Capt., C.A.M.C.

(o)

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Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	443881	Lc	Anderson	Ernest.
Year 1916.	Unit. 54 Canadians		Age. 22 yrs.	Service. 1 2/12.

Station and Date.	Disease
B-Lem.	B.W. Rt. arm – Fri. Sept 17. Ypres. X Ray Sleeve (Rt arm). Comminuted fracture of Humerus (Rt). No nerve involvement.
27.10.16	Convalescent Home. Wm.
Nov 27/16.	Wounds Htd. unhealed at back of Rt arm.

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

(J 3521.) Wt. W 5606—2621. 2,000,000. 7/15. D & S. P.T.O.

Station and Date.	

Report No.	Class	No. of M.H.C. File	No. of Local File	No. of H. Q. File
	ANDERSON, Ernest E. Kamloops, B.C.			

No. 443881 Rank L/Cpl. Original Unit 54th Present Unit 54th.

Age Height ft, ins. 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

Cause of disability LOSS OF POWER OF RIGHT ARM.

Condition which prevents the soldier from earning a full livelihood

BOARDED AND CATERORIZED D3BY MEDICAL BOARD HELD IN VANCOUVER.

JANUARY 6th, 1918.

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

Probable duration of incapacity

Is final disability likely to prevent return to previous occupation?

Recommendation of Canadian Board

Destination to which transportation issued

Members of Board

INFORMATION TO BE FURNISHED BY SOLDIER

DEPENDENTS	NAME	AGE	WHERE—IF 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 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

At what age soldier left school? What grade, standard, etc., 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

I declare that the above statement is correct.

Witness

Signature .....

Date Quebec Dec. 30, 1917

Recommended 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. 5c.

Class 1.—Men for immediate discharge without a pension.
(a) Unfit for overseas service, but capable to take up their previous civilian occupation.
(b) Disability not the result of service or increased by service.

Class 2.—Men whose condition may be benefitted by further medical treatment or rest in a Convalescent Home, Hospital or Sanatorium. If deemed advisable, in some cases the medical officer in charge of the Convalescent Home, Hospital or Sanatorium may grant these men leave to return to their own homes and families for a definite period.

Class 3.—Men who have benefitted by further medical treatment (such disability due to or aggravated by service) and whose cases will immediately be considered by the Pensions Board with a view to pension.

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

Occupation prior to enlistment

Present trade or profession

Average earnings previous to enlistment $

Name and address of last employer

Rent per month $ If homeowner, value of property $ Any other income

Taxes $ If contributing life or accident insurance, amount premium

If in receipt of sick pension or other insurance—name of society. $ per day

If unable to follow previous occupation, name brief cause

Is partial disability likely to prevent return to previous occupation?

Recommendation of Canadian Board

Destination to which transportation issued

Members of Board

Members of Board (Please state if medical) Can. Board

Hospital admission

Condition which prevents the soldier from entering a full previous

Cause of disability

Name and address next of kin

Birthplace

Date of enlistment

Date of arrival

Date of return to duty

Age Height Build Complexion Eyes Hair Character

No. Name Rank Unit Current Date Date Present Date Date

Report No.	Class	No. of A.M.C. Tin	No. of Local Tin	No. of H. O. Tin

Class B—Grade 2—8 pages

Form No. 258

Final treatment date

PENSION—Class Amount per week $ Period granted for Dating from

Transfer to Hospital Transfer Class I—Date Transfer Class 2—Date

Amount forwarded to H. O. this day $ Grade Clothing allowance $

Last Pay Card Cr. $ Dr. $ Amount held at Depot H. O. $ L. T. C. leaving Depot $

Recommended by Institution as to classes likely to be of use and general remarks:

Date Signature

I declare that the above statement is correct:

Witness

Relationship

Is soldier entitled to Compensation classes? If so, what?

Has he taken any Technical or Commutation classes? If so, what?

Is he receiving Vocational Training while in Hospital in England If so, what supplies?

Remarks

If unable to follow previous occupation name brief cause

If in receipt of sick pension or other insurance—name of society. $ per day

If claiming life or accident insurance, amount premium

Taxes If homeward, when is permit due?

Rent per month If homestead property, amount due and amount paid $ $

Name and address of last employer

Approximate earnings previous to enlistment Any other income

Occupation prior to enlistment

Class B—Grade 2—8 pages

Form No. 258

Final treatment date

PENSION—Class Amount per week $ Period granted for Dating from

Transfer to Hospital Transfer Class I—Date Transfer Class 2—Date

Amount forwarded to H. O. this day $ Grade Clothing allowance $

Last Pay Card Cr. $ Dr. $ Amount held at Depot H. O. $ L. T. C. leaving Depot $

Recommended by Institution as to classes likely to be of use and general remarks:

Date Signature

I declare that the above statement is correct:

Witness

Relationship

Is soldier entitled to Compensation classes? If so, what?

Has he taken any Technical or Commutation classes? If so, what?

Is he receiving Vocational Training while in Hospital in England If so, what supplies?

Remarks

If unable to follow previous occupation name brief cause

If in receipt of sick pension or other insurance—name of society. $ per day

If claiming life or accident insurance, amount premium

Taxes If homeward, when is permit due?

Rent per month If homestead property, amount due and amount paid $ $

Name and address of last employer

Approximate earnings previous to enlistment Any other income

Occupation prior to enlistment

Kenora Ont.

MILITARY HOSPITAL

PROVIDED FOR CONVALESCENT SOLDIERS

Report No. Class No. of A.M.C. Tin No. of Local Tin No. of H. O. Tin

Name Rank Unit Current Date Date Present Date Date

No. Height Build Complexion Eyes Hair Character

Age

Birthplace

Name and address next of kin

Cause of disability

Condition which prevents the soldier from entering a full previous

Hospital admission

Members of Board

Destination to which transportation issued

Recommendation of Canadian Board

Is past disability likely to prevent return to previous occupation?

Hospital division of records

Members of Board (Please state if medical) Can. Board

A.J.

2ND ORIGINAL

mR

443881

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. 178[A] to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY OF

Surname ANDERSON *Christian Name* Ernest Edward

TABLE I.—General Table.

Birthplace { Parish Vancouver / County B.C.

Examined { on 8th day of Septr. 191 5 / at Vernon, B.C.

Declared Age 21 years days.

Trade or Occupation Teamster

Height 5 feet 10 inches

Weight lbs.

Chest Measurement { Girth when fully Expanded 36 inches / Range of Expansion 3 inches

Physical Development

Vaccination Marks { Arm — RIGHT — LEFT / Number — 2

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 J.H.Hamilton.

Rank Capt. C.A.M.C.

Medical Officer.

Enlisted { at Vernon, B.C. / on 5th day of Septr. 191 5

	Corps	Regtl. No.
Joined on enlistment	"C" Coy. 54th Bn	443881
Transferred to	16th. Canadian Reserve Battalion.	

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
6.9.15	Vac c. Neg. J.H.H.
6.9.15	Inoc. " "
16.9.15	Inoc. " "
27.9.15	Inoc. " "
30.7.16	" " "
10-11-17 Eastbourne	Loss of Power of Rt Arm Invalided to Canada B Gillies Capt PRESIDENT, STANDING MEDICAL BOARD.

3 AUG 1917

TABLE IV.—Service Table.

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

[11,725] W305/M1635 1,000,000 4 17 W. P. & Co. (1121)

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				
Isolation Hosp. Aldershot.	21	3	16	9	5	16	Measles	50	Severe case with complete recovery	A.J.BEADEL, Lt. R.A.M.C.
1st Southern Gnl. Birmingham.	6	10	16	28	12	16	B.W.R. Arm		These entries made at Canadian Record Office, London, from Records available.	
C.C.H. Uxbridge	28	12	16	16	2	16	Do.		Major R.A.M.C.	
CANADIAN MILITARY HOSPITAL, EASTBOURNE.	20	6	17	23	7	17	Enlarged Glands	34	Tonsils & enucleated. Good result	
CANADIAN MILITARY HOSPITAL, EASTBOURNE.	20	9	17	21	11	17	GSW L. Arm	63	Boarded 10/11/17 Invaliding to Canada. Transferred to 5 C.G.H. Liverpool	J.W.Baker Capt. CAMC
5 C.G.H. Liverpool	22	4	17				Do		Entry wound healed - exit wound shows a small unhealed ulcer on anterior elbow flexes to 95°. Shoulder fair. Abduction weak - Hand weak but all movements free.	A.G.Roberts - Lt R

P—56

Rank Pte. Name ANDERSON, Ernest Edward. Reg'l No. 443861

Unit 54th Bn. If in perm. Corps, What Unit? Married or Single Single

Place and Date of Enlistment Vernon Camp, Sept. 5th 1915. Place of Birth Vancouver, B.C.

Name and Address, Next-of-Kin Mrs Rose Anderson, 250 Lansdowne St, Box 856, Kamloops, B.C. Canada Relationship

Assigned Pay Monthly $ 15.00 Payable to Next of kin

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

Entered on N.E. Card Index

Checked by H Wolfe

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	31	31	1	31	31	10	3 10	10	44 10			17 03	15		32 03	12 07	Clothing Ctr
												4 87					
Jan. 1916.	31	31	1	31	31	10	3 10		34 10			9 73	15		29 60	16 57	
												4 87					
Feb. 1	29	29	1	29	29	10	2 90		31 90			9 73	15		29 60	18 87	
Mch. 1	31	31	1	31	31	10	3 10		34 10			7 20	15		22 30	30 67	
		122			1220.10				1442.0			5353.60			11353.067		

Carried forward to Large Ledger sheet

Checked H Dales

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						

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

17556/350.

373-E-5

Name Anderson, Ernest Edward
Surname Christian Name

Regimental Number 443881 Rank L/Cpl. Address (in full) Box 856,

Unit 54th Bn. Kamloops, B.C.

Original Unit

District where paid M.D.11.

Date of Discharge 25-3-18.

P. D. P. Filing Number 6-152-11.

Rates:—Regimental pay $1.05 per diem: Field Allowance $ .10 per diem. Separation Allowance $25.00 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
179 65	1855	25-3-18	59 50	1815	25-4-18	59 50	1736	27-5-18	60 65		179 65
2192	~~1st G400051 26-3-19 70 00~~										
"	~~1st G400052 26-3-19 30 00~~										
1894 & 2	~~G47979 25/3/19 70 00~~										

M. F. W. 127.
50M—6 17.
1772 39-1140.

Remarks:

Dec'n No. 12536/350 W. S. G. File No. 0773 C-15

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

S. A. ..... months at $ 30 per mo. $ ..... $ 489 00

Less P. D. P. Credited $ 179 65

$ 309 35

Less further debit balance $ ....

Net due paid as below $ 309 35

TO SOLDIER CONCERNED

	Ag. No.	Ch. No.	Amount				Amount
1	219	400051	70 00	219	400052	30 00	
2	1894a	47979	70 00	2944 A.	47786	30 00	
3	11878	426726	30 35	26453	477915	30 00	9-6-19
4				1117C	466766	44 00	14-5-19
5							
6							
	Total		170 35	Total		134 00	

26-3-19
25-3-19
11.4.19

Box 86 Kamloops
B.C.

GEN'L AUDITOR
Posting checked by
W.R. Laws
Date 6-7-19

L. L. JOB. 85506 M. & D. 5997.

P.O. 856,
445 Seymour St.
Kamloops, B.C.
2nd Contingent

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

(3/17/[illegible])

M. F. W. 12.
20m.—9-15.
H. Q. 1772-39-819.

To Whom Mrs Rose Anderson

Address ~~Kamloops B.C.~~ ~~Box 856.~~

Rate $15-00

NOV 1 - 1915

By Whom Assigned Anderson Ernest E.

Regtl. No. 443881

Rank Pte.

Corps C Coy 54th Battn. C.E.F.

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.		L5650	30	Consolidated Account
Jan.	1916	L10506	15	
Feb.		N 13911	15	
March		S 14834	15	75

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12a.
60m.—12-15.
1772—39—819.

Sheet No. 2. Mrs Rose Anderson PAYMENTS.

Name of Soldier Anderson Ernest E.
443881 "E" 54 Bln

L. L. Job 89002.—Req. 6213.

15.00

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916	J 524	15	
May		K 3713	15	
June		L 6929	15	
July		A 7467	15	
Aug.		A 11828	15	
Sept.		C 15147	15	
Oct.		E 19453	15	
Nov.		E 24429	15	
Dec.		A 34860	15	
Jan.	1917	I 35977	15	15 (JW)
Feb.		I 42331	15	
March		9 48427	15	15 L.
April		J 62	15	15 E.
May		J 6352	15	
June		J 12966	15	15 E.
July		J 19734	15	S
Aug.		L 2683	15	P.O. 856, 445 Seymour St.,
Sept.		K 33539	15 — tx 345	Kamloops, B.C. (3/7/17 wz)
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

330

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier.....

PAYMENTS.

Month.	Year.	Cheque No.	Amt.	Remarks.
Aug.	1918			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1919			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1920			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				

L. L. JOB. 85506 M. & D. 5997.

5-9-15

MILITIA AND DEFENCE

M. F. W. 11.
10m.—9-15.
H. Q. 1772-1-13.

SEPARATION ALLOWANCE

Name Rose Anderson

Address ~~Box 856~~ 445 Seymour St
Kamloops, B.C.

Relation to Soldier / wife, child or mother } ~~wife~~ Widowed Mother

Name of Soldier Anderson Ernest E.

Regtl. No. 443881

Rank Pte

Corps 54th Battn. C.E.F.

To what Corps belonging when called out }

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
Apl.				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.		F20829	57	57
Dec.		O/50440	20	20
Jan.	1916	E25476	20	20
Feb.		F29289	20	20
March		G30215	20	20 137

CONSOLIDATED ACCOUNT 4

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 11a.
60m.—12-15.
1772—39—818.

Sheet No. 2. Mrs Rose Anderson

Name of Soldier Anderson Ernest E.

L. L. Job 89002.—Req. 6213.

X443881

Month.	Year.	Cheque No.	Amt.	Remarks.
			137	
April	1916	38	20	20
May		4294	20	20 /
June		D2010	20	20
July		L10126	20	20
Aug.		A 11819	20	20
Sept.		4914608	20	20
Oct.		D17650	20	20
Nov.		D20791	20	20
Dec.		D24789	20	20
Jan.	1917	D28274	20	20
Feb.		D 31094	20	20
March		D34173	20	20
April		E232	20	20
May		E3686	20 →417	20
June 29th		F 7449	20	20 445 Seymour St. Kamloops BC
July		E 10494	20	20
Aug.		E 13524	20	20
Sept.		F 17477	20	20 497. /
Oct.			20	20
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier .....

PAYMENTS.

Month.	Year.	Cheque No.	Amt.	Remarks.
Aug.	1918			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1919			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1920			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				

M. F. W. 41
1 0M—7-16
1772-39 889.

Name L/Corp., Anderson, E. Ed.

Regimental No. 443881

Unit 16th., Res. Bn.

Date of enlistment ~~5-9-18~~

Place of "

Married (yes or no) Yes

Amount of pay assigned monthly $ 15.00

To whom payable Mrs. R. Anderson,
250 Lansdowne St., Kamloops B.C.

Name and address of next-of-kin 2492 Stanley

Date and place discharged Jan P. 22-11-17. DO 83 Disch 25.3.18

Reason for discharge

Character on discharge

E. & O. E. Job 5351—M. & D. 6880.

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.
Mar	22/11/17.	25	124	1.05	130 20	124	10	12 40	20 16 8 25 0 50	181 01		80— 6 23 10 5	32 16 50	57 62	181 01 50	o March assen ations pd Sept Paylist

L. E. Job 5351—M. & D. 6880.

M. F. W. 41
1 0M—7.16
1772-39 889.

Name.....

Regimental No.

Unit

Date of enlistment

Place of "

Married (yes or no)

Amount of pay assigned monthly $

To whom payable

Name and address of next-of-kin

Date and place discharged

Reason for discharge

Character on discharge

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					

4/3881. ANDERSON. E. E.

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				
16.10.16.	66 A C	Taken on strength.	Folkestone	6.10.16	Pt II O 455/a
4.1.17	54 Bn	Tfd to C.C.H. Hillingdon Ho.	Uxbridge	28.12.16	C.R.B. 164 Bw Ramn
19.2.17	do	Dis 66 H Hellingdon Ho	do	16.2.17	— 203 — " —
25.2.17	C.C.A.C.	On Command to 3rd Comm. Depot	Hastings	23.2.17	P II O 95
20.4.17	16 Res Bn	T.O. from 366 D.	Seaford.	20.4.17	~ 101 (+ 3rd C.C.D. P II O 452 d/20/4/17
21.5.17	B.C.R.D.	Tos. from Cleak on Com @ 366 D	-	11-3-17	- 73.
16-6-17	16 Res.	Adm to Hsp.	Seaford	15-6-17	— — 158. Tonsilitis
~~20-6-17~~	-	~~Dis from Hsp~~	-	~~19-6-17~~	Deleted P II 197 d/25-7-17 — — 162
28.6.17	~	Adm. Can. Mil. Hosps.	Eastbourne	21.6.17	C L 77 Enlarged Tonsils.
11-7-17	B.C.R.D.	Ceases to be attached to 366 D & Tos to 16 Res	Seaford	19-4-17	B II & O 124
27.7.17	16th Res.	Djsd from Hosp.	Eastbourne	23.7.17	C L 92.
27-8-17	-	Tos to 1st Res & remains attached	Seaford	27-8-17	B II O 230. 1st Res B.D.O. 743 d 6-9-17
24.9.17	1st Res	Can. Mil. Hosp.	Eastbourne	21.9.17	C L C 17 G.S.W. R. arm (Old)
30.10.17.	16 Res.	Ceases to be att. on Rel To 1st Res	Seaford	30.10.17	P II 294. & B.C. P II 244
18.11.17	1st Res.	S.O.S. To B.C.R.D. for Invd To Canada	~	16.11.17	P II 306. d/ 20.11.17
24.11.17	B.C. Regt	Trans No 5 Can Gen Hosp	Liverpool	23.11.17	C.L.C. 65 G.S.W. Rarm Old.
19.12.17	" "	Invalided to Canada	"	16.12.17	~ 82 " " "
24.12.17	B.C.R.D. Depot	S.O.S. on being Invd to Canada finally Discharged.	Seaford Victoria	16.12.17 20/1/17	P II O. 273. (Auth K.R. & Q. Para 392 Sec 16. N.R. 419. Tuscaloosa. B.C.

R—122.

Rank Pte. Name ANDERSON, Ernest Edward. Reg'l No. 443881

If in perm. Corps, What Unit?

Unit 54th Bn. Married or Single Single

Place and Date of Enlistment Vernon Camp, Sept. 5th 1915. Place of Birth Vancouver, B.C.

Name and Address, Next-of-Kin Mrs Rose Anderson, 250 Lansdowne St, Kamloops, B.C. Canada Relationship

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

N/E. R.B. No. 8210
File R.L.
Category Can. M.U. 44.

Discharge, Date and Place Reason Character

17.10.16

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
		Arrived in England	Per. S.S. Saxonia		2 DEC 1915
25.3.16	54th Bn ~~D.C.L.34~~	Adm. Mult. Isolation H	Aldershot	22.3.16	Measles A.2 #82 DCL 34.
11.5.16	O/C 54th Bn	Dis from Hosp.	"	9.5.16	Pt. 2. D.O. 131
11.5.16	do	Sick Furlough	Bramshott	11-20 5/16	" " " 131
28.6.16	adj. 54th Bn	To be acting L/Cpl.	"	1.7.16	" " 179
8.8.16.	" "	To be L/Cpl.	"	8.8.16	" " 220 AFB 103 checked 21.8.16 CHR.
12.8.16	"	Proceeded Overseas	"	13-8-16	Pt. 2. D.O. After Order
6.10.16	54th Bn	Reported from Base Wounded.	In the Field	14.9.16	DCL A32.
12.10.16.	54th Bn.	Adm 1st Southern Gen. Hospital.	Birmingham	6.10.16	B.W.R. arm. DCL B.103.
13.10.16.	" "	Wd. Lfd. to bbd & L Stone	In the field	4.10.16	Pt II 0260 W

CERTIFIED CORRECT.
5 SEP 1916
CAN. RECORDS, LONDON.

(641)—Wt. W1751-1403.—500,000.—5-15.—C. & G. Forms B. 103/1.

12. No. 443881. Army Form B. 103.

Ont-32795 CR R2B4 12

Casualty Form—Active Service.

Regiment or Corps 54th Kootenay Battn C.E.F.

Regimental No. 443881 Rank Pte. Name Anderson Ernest Edward

Enlisted (*a*) 5/9/15 Terms of Service (*a*) One year or duration of War Service reckons from (*a*) 5/9/15

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

Extended ____ Re-engaged ____ Qualification (*b*) (Teamster)

Report: Date 1915	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.
Nov 22		Embarked Halifax, Canada "H.M.T.Saxonia"		22.11.15	
Dec 1		Arrived Plymouth, England.		1.12.15	
1916 June 28		Promoted to rank of L/Cpl (appointed)	Bramshott.	1.7.16.	B.O.179. Part II
12.8.16	54th Bn	proceeded for services	Overseas	13/8/16	R.I.Warder Lieut for O.C. 54th Bn
8.8.16	54th Bn	Appointed to rank of Lance Cpl	Bramshott	8.8.16	Part II O. 220. 8.8.16 Lieut. for Colonel i/c Records, C.E.F.
		Disembarked. France	**Havre.**	**14.8.16**	**N.R.**
23.9.16	O.C. unit	Admitted	Julot	17.9.16	B213 N.C.S 25. of 2.10.16
do	13th F.A.	do Str. Corp[orale] Ruppersam	do	do	A36 N.C.S 30 of 10.10.16
do	do	Hyd to 3 C.C.S.	do	do	do do
11.10.16	St Omer	Str. Ram. [illegible] Hyd			W3083 (5423) pt 11 N° 260 of 13.10.16
		C.C.S Isolation	do	11.10.16	Lieut for Lt-Col A.A.G.

6 OCT. RECD

(*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				
Hastings. 2/2/17	16/10/16	Taken on strength C.C.A.C. Pt. II D.O. No. 455 ATTACHED ~~TRANSFERRED~~ FROM C.C.A.C. TO 3rd C.C.D. PART II D.O. No.			J. Smith Lt. for O.C. C.C.A.C.
1917 19/1/17		Discharged from 3rd C.C.D. 18 Kennards to 16th Res Bn. Part II D.O. No. 54			[illegible] Lieut. for Adjutant for O.C. 3rd CANADIAN COMMAND DEPOT
20/4/17	16 Res Bn	Taken on strength	Seaford	20/4/17	Pt. 2. Do 101.
30-4-17	OC. 16th Res. Bn.	On Command to PT.&.BF. Course - Shorncliffe.	Seaford	30-4-17	Pt.II.D.O. No. 125
25-5-17	OC. 16th Res. Bn.	Returned from PT.&.BF Course - Shorncliffe.	Seaford	25-5-17	Pt.II.D.O. No. 137
AUG 2 7 1917	16 Res Bn	Transferred to 1st Res Bn. attached to 16th Res Bn	Seaford	AUG 2 7 1917	Pt 2 D.O. 230 [illegible] Lieut. Asst. Adjt. 16th. Canadian Reserve Battn.
OCT 3 0 1917	16 Res Bn	Ceases to be attached on return to 1st Res Bn.	Seaford.	OCT 3 0 1917	Pt 2 D.O. 294. [illegible] Lieut. Asst. Adjt. 16th. Canadian Reserve Battn.
6-9-17	~~OC~~ OC 1st	TAKEN ON STRENGTH OF 1st CAN. RES. BATTN.	Seaford.	27/8/17	Pt II 243.
18/11/17	OC 1st	SOS to RCR for invaliding to Canada. (14 Can General Hospital Buramore)	Seaford	16/11/17	R.O. 306 [illegible] Captain, Adjutant, 1st Canadian Reserve Battalion

Army Form B. 103. Regimental Number 443881

Casualty Form—Active Service.

Regiment or Corps 54th Kootenay Batt'n

Rank Pte Surname Anderson Christian Name Ernest Edward

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

Enlisted (*a*) 5-9-15 Terms of Service (*a*) D of W Service reckons from (*a*) 5-9-15

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

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

..... or Corps Trade and Rate .....

..... Signature of Officer.

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
		Embarked ...			
		Disembarked...			
21-5-17	66 R.C.	T.O.S. B.C. Reg. Depot	Seaford	11-3-17	P.O.W. D.O. 73.
		Command 3 M.D.			
11-7-17	B.C.R.D.	Ceases to be on Com. 3 M.D.	"	19-11-17	" " " 1244
		D.A.S. on posting to 16th Res.			
20-11-17	1st Res.	T.O.S. B.C. Reg. Depot	"	17-11-17	" " " 2442
		Patient in N.C.H. Can.			
		Gen. Hosp. Eastbourne			
		awaiting invaliding			
		to Canada.			
		F. C. Williams		Lt. A.P.M.	13 C.R.D.

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

[P.T.O.

[M1101] W6135/M768 1000m 9/16s 153 G & S Forms/B.103/4. E./854.

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
10/1/18.	England	2.O.S "L" Lieut. M. H66.	Victoria B6	7/1/18.	"L" Lieut D/C 10/85 B 10/1/18
25/3/18.		Discharged Being Physicially Unfit for Further Servic Under K. R. & O., Can. 822, I Auth. H.Q. 16/1/25 B 31/10/17 ~~Auth: Med. Board~~ ~~Dep. A.D.M.S. 21/3/18.~~	"	25/3/18	"L" Lieut D/C. 8-7/947 B 25/3/18.

5-11

No. 14 Canadian General Hospital,
Eastbourne, Sussex.

Ward No. 11

Oct 25th. 1917.

X-RAY REPORT.

Regl. No. 44388 Rank Cpl. Name Anderson E.E. Unit 18th Res. Batt.

Screened — Lines leads through lungs.

W. Curtis

Capt. C.A.M.C.,
Officer i/c X-Ray Department.

THE INFIRMARY,
DUDLEY ROAD,
BIRMINGHAM.

Anderson. Ernest. B5 Oct-22.

R H- Arm.

8 OCT 1916

X-RAY DEPARTMENT.

Communited fracture of Humerus

H Russell Fern

Radiographer.

571

RECORD No. 511

M.O. 16TH. RES. BATTN.
SEAFORD.

443881 ¼CPL. ANDERSON E.E.

1A

THE VANCOUVER GENERAL HOSPITAL.

X-RAY DEPARTMENT.

L/Cpl. Anderson, E.E. January 23/18.

Dr. Patterson.

Examination of right arm.

X-Ray no. 13623 - 6 C

X-ray finding and Diagnosis:- There has been an oblique fracture of the shaft of Humerus, involving the whole middle third. The union and position is excellent although there is a bridge of bone ununited fully on the inner posterior aspect of middle of the shaft.

Dr. Whitelaw.

OVERSEAS BOARD.

14th C.G.H. Eastbourne.
Novemebt 9th, 1917.

#443881 L/Cpl. ANDERSON, E.E. 54th.

Disability:- PARTIAL LOSS OF POWER RIGHT ARM. LIM.OF MOVEM'T.R.ELBOW.

Cause of Dis:- (a) G.S.W. OF HUMERUS (UPPER THIRD RIGHT). (b) SEQUENCE of (a).

His.of Case:- Was wounded at St. Eloi Sept. 17, 1916 by German sniper, bullet passing through upper part of R. arm.causing a compound comminuted fracture. Was in Hisp. as follows:- 3rd. Can.C.C. 3 wks. Birmingham 1st Southern Gen. 3 mos., Can. Conv.Home, Uxbridge 3 months., then to 3rd C.C.D. 1 mos., 16th Can. Res. Seaford 2 mos., 14th C.G.Hosp. 2 mos., then the 16th Can. Res. 1 mos. then 14th C.G.Hosp. 3 mos. Fracture united readily but in sinus in track of bullet freely broke down and discharged.

Present Cond:- Osteomyelitis of upper end of Humerus, with considerable swelling in region of shoulder (deltoid) X-Ray reveals a large sequestrum and a probe can be passed through the arm. Under screen it shows that probe apparently passes through humerus. A discharging sinus persists. There is partial loss of power of arm, with limitation of movement of arm and elbow. Precious weight 155 lbs. Present weight 145 lbs. Nervous system, Irritability. Digestive system.- Appetite poor. Respiratory - normal.

D.M.S. 1500.

Surname	Christian Name or Names	Reg. No.
Anderson	E.	443881

Rank	Unit	Co.	Troop	Batty.
~~Pte.~~ L. Cpl.	5-4 Bn B6	16th	Res Batt.	

Hospital — Date of Admission

Transferred Mil Isolation Aldershot Hosp. 22.3.16

1st. S. Gen. Birmingham Hosp. 6-10-16.

Hillingdon House Hosp. 28-12-16.

Eastbourne Can. Mil. Hosp. 21.6.17

Diagnosis

(1) Measles

Later Diagnosis (if changed)

(2) B. W. K. arm

(3) Enlarged Inguin.

Additional Diagnoses: If more than one state present

G.S.W. R arm and old F.L.

G.S.W. R Ankle

DISPOSITION — Date

Dis. 9.5.16. Dis. L 23.7.17.

L. 25.3.16 #34

" 16.5.16. 17/432

6.10.16 B102.

C.L. 12-10-16 B167

L.L. 4-1-17

19.2.17 B203. Dis. 16.2.17

26.6.17 77

27-7-17 92

25-9-17 C17

26-11-17 C65

20.12.17. C82 Invalided to Canada. 16-12-17

REMARKS

Repl from base. 17.9.16

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

EPITOME OF HOSPITAL TREATMENT.

	Hospital	Adm.
1.	Eastbourne Can. Mil	21-9-17
2.	5th Can. Gen. Hosp. Lpool	23-11-17
3.		
4.		
5.		
6.		
7.		

THE VANCOUVER GENERAL HOSPITAL.

XRAY DEPARTMENT.

L/Cpl. Anderson. E.E. January 23/18.

Dr. Patterson.

Examination of RIGHT ARM.

XRAY no. 13625 - 6 C

Xray finding and DIAGNOSIS:- There has been an obligue fracture of the shaft of Hymerus, involving the whole middle third. The union and position is excellent although there is a bridge of bone ununited fully on the inner posterior aspect of middle of the shaft.

Dr. Whitelaw.

Form D.M.S. 1313.
4682 10m 11/1/17

No. 14 Canadian General Hospital Wearne, Eastbourne, Sussex

Casualty Readmitted O.S.

ADMITTING CARD.

Regt. No. 443881 A. & D. No. T 3111

Rank L/Corpl

Name Anderson P. C.

Corps 16th Bn Can. Inf.

Religion Pres Age 23

M. H. Rec'd M. H. Requested M. H. Ret'd

Disease G.S.W. Rt. Arm

Admitted 20 SEP 1917 A III

Discharged

Place in Hospital Bayeux Convt. 110

Transferred to 3 C.G.H. Lurkdale 21/9/17

Results

28/12 8/12

V.T.O.

Temp. W.A.S. rec'd from 16th Res Bn 20/9/17

REMARKS:

MEDICAL HISTORY SHEET.

	Requested From	Date	Reply	Date
1				
2				
3				
4				

Orig. Dup. Recd. from 16th Res. Bn. 20/9/1917

Orig. Dup. Sent to / /19

Recd. from Regr. this Orig. Dup. / /19

Ward

No. 443881 RANK Pte NAME Anderson E E.

T. O. S. UNIT 5th Battalion C.E. 21

Trans. fr. 102nd Regt. R.M.R. 5-9-15
Do 11th 7-9-15.

M. D. 11

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915	1915			
Sept. 5	Sept. 30	✓		
	Oct.	✓		
	Nov.	✓		

UNIT SAILED
NOV 22 1915

REMARKS:

9 AUG 1917

MEDICAL

	Requested From	Date	Reply	Date
1	L.R.K.D.	1/8/17	A. Casualty on strength of C.C. & C. 16th Oct. 16.	3/5/17
2	Expenses	5/8/17	forwarding Lead. Orig	7.8.17
3				
4				

Orig. Dup. Recd. from Canada 8/8/19

Orig. Dup. Sent to Note. 9/8/19

Recd. from Regr. this Orig. Dup. / /19

Ward

FORM D.M.S. 1313.
7065 20m 6/2/17.

MK

ADMITTING CARD.

Regt. No. 4th 3881 A. & D. No. 1904

Rank Lt/Col

Name Anderson C.E.

Corps 16th Res Bn.

Religion Age

M. H. Rec'd M. H. Requested M. H. Ret'd

Disease

Admitted

Discharged

Place in Hospital

Transferred

Results

P.T.O.

REMARKS: Temporary need from 16th Res Bn 20/6/17

Temp Recd Wardley

23 JUL 1917

MEDICAL HISTORY SHEET.

	Requested From	Date	Reply	Date
1	16 Res Bn	23/6/17	Temporary only required letter to Base re taking	27/6/17
2			over after exp with 3rd C.C.S.	
3	A.C.A.D.	4/7/17	application made to 3 C.C.S. & Records to forward this	6/7/17
4	A.C.A.D.	7/7/17	not yet come to hand.	25/7/17
5	16 Res Bn	11/8/17	not yet come to hand.	9/8/17

Orig. Dup. Recd. from / /19

Orig. Dup. Sent to / /19

Recd. from Regr. this Orig. Dup. / /19

Ward

FORM D.M.S. 1313.
7065 20m 6/2/17.

ADMITTING CARD.

Regt. No. 443881 A. & D. No. 1904

Rank L/Cpl

Name Anderson GG

Corps 16th Lancashire

Religion Pres Age 23

M. H. Rec'd M. H. Requested M. H. Ret'd

Disease Enlarged Gland

Admitted 20 JUN 1917 A III

Discharged 23 JUL 1917 A III OPERATION. 6-7-17

Place in Hospital 43/49 Ward Balcony 16 Lancs

Transferred

Results

14/12

P.T.O.

FORM R. 149.
7106—250m—7/2/17.

Name ANDERSON Ernest Edward

Rank L/Cpl Reg. No. 443881

Unit ~~16th Reo. Bn.~~ 1st Res. Bn

Next of Kin Canada

Date 1917	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
Sept 21.	C.M.H. Eastbourne	= 1st W.R. Hosp = old				22/1489
23 "	N.S.C.A.H. Liverpool	do				6664
Dec. 16.	Inval. to Canada	do		C 82		2618

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

Reg. No. 443881 Name Anderson E

Rank L/Cpl Corps 54 Batt Age 23 Service

Ledger No. Serial No.

HOSPITALS	DATE	DIAGNOSIS
Vancouver Mil	21-1-18	?
Dis	31-1-18	
	25 3.18	

P. T. O.

HOSPITALS	DATE	DIAGNOSIS

M. F. W. 2553.
75M.—9-19.
1772-39-1332.

R. 149.

Name Anderson. Ernest Edward. *Rank* ~~Pte~~. L/Corpl. *Reg. No.* 443881.

Unit (54th Battn.) Canada. 16th Res. Bn.

Next of Kin

Date 1916.	Movement	Place	Casualty	List No.	Notified N/K O.	W.O List
22-3.	Mil. Isolation.		Measles.	34.		
9-5.	Discharged.		Do.	51.		
17-9.	Reported from Base.	Wounded.		A32.	02195 6-10	
6-10	1st Sth. Gen. Hosp. Dud. Rd. Sec.		BW. R. Arm	B103		
28-12	Can. Conv. Hosp. Uxbridge.		Do	B167.		
1917						
16-2	Discharged		Do	B203		
21-6-17	G. M. O.	Eastbourne	Enlarged Tonsils	77		16th Res. Bn
23-7-17	Discharged.	"	"	92		

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

REGT'L No 443881

NAME Anderson, E. E

RANK AND CORPS Pte L/Cpl 54th Batt

H. Q. FILE No. 649-

FOLLOWS NO. 472x

FOLLOWS

CABLE No.	CABLE DATE	NATURE OF CASUALTY
02195	5.10.16	C. Reported wounded Sept. 17th 1916 Sailing from Liverpool per H. M. H. S. Braemer Castle Dec. 16th/17 MD # 11. Loss Rober R Arm.

L. L. Job 90581—M. & D. 6314.

M F. W. 42—50M—1-16.
H. Q. 17-2-39-853.

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
34.	Brit. Isolation, Aldershot	22-3-16	measles
51.	Hisch.	9-5-16	"
A32.	Rep from base	17-9-16	wounded
B103	1st South Gen. Dudley Road Section Birmingham	6-10-16	B.W. R arm
B167	to Can Conv. Hillingdon House Uxbridge.	28-12-16	" " " "
B203.	Discharged	16-2-17	" " " "
77	Can Mil Eastbourne	21-6-17	Enlarged Tonsils (16 C. Regt Bn)
92.	Hisch.	23-7-17	" " (16 in Regt)
617	Can Mil Eastbourne	21-9-17	G.S.W. Arm Old
C65.	4th Can Gen: "	23-11-17	" " " R "
C82	No 5 Can Gen: Liverpool Invalided To Canada	16-12-17	G.S.W. R Arm (old)

Date of Enlistment

5/9/15

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

Nov. 1/915.

RATE OF SEPARATION ALLOWANCE

~~$1~~	1/12/17 25-		

RATE OF ASSIGNMENT

15-			

PARTICULARS OF SEPARATION ALLOWANCE

No. 443581

Rank Pte Promoted Reverted Discharge

Soldier's Name Ernest E. Anderson

Battalion C. Coy 54th Batt. C.E.F.

Beneficiary Mrs Rose Anderson.

Relationship Wife - Mother

Address

PARTICULARS OF ASSIGNMENT

Name Mrs Rose Anderson

Address 445 Seymour St.

Change of Address Kamloops B.C.

1

2 P.O. 856.

3

4

	Date	Cheque No.		Amount S/A	Amount A/P	Total	
	20-9-17			497 ✓	345 ✓	842 ✓	
	Oct	51166	C	20	15	35	
	Nov	52405	C	20	15	35	T
	Dec	54730	F	20	15	35	m
	~~Jan~~ (Nil)	54019	A	~~30~~	~~15~~	~~45~~	B
	Jan	69562	U	5	×	5	Bo
				×	×	×	
	Feby.	~~74186~~	U	~~+50~~		~~50~~ 35	

a/c closed.

REMARKS

A/c Closed 31-12-17

~~$390~~ Ret'd per Justicia

~~$551.00~~ $562.00 Date 7-12-17 F. X. 6-1-15

Clerk J.B. Brown A/c

Cancelled

to adj. Dec increase Mailed 16/1/18

U 74186 mailed 16-2-18

SA to be re-opened & Continue ~~Feby~~ 0363. £.15

S.B. ruling 13/2/18 noted 15/2/18 J.Baron

+ SA Jany & Feby o/d 15/2/18

MRO 1A New 15/2/18.

Refund 50cc requested 15/3/18. Remit 16/4/18 Cancelled 19/4/18 J.Baron

MRO 2A withdraw 25/3/18 Credit Slip 19/4/18 JB

M. F. W. 128
400M.—6-17—1772-33-1141
L. L. 22820—M. & D. 7993.

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS

M. F. W. 128
400M.—6-17—1772-39-1141
L. L. 22320—M. & D. 7993.

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.

25-3-18 Sharpe

This space to be left blank for the Chelsea Number.

BRAEMER CASTLE DEC 23 '17

Army Form B. 268.

2492

Proceedings on Discharge.

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

No. 443881 Army Rank L/Corporal.

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

Corps 54th Bn. ~~2nd Res.~~ 1st Res Bn

Battalion, Battery, Company, Depôt, &c. ~~54 Batt.~~ 2nd C.O.R.D. B.C.R. (O) 54th
(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 25. March. 1918

Place of discharge Victoria Invalided to Canada for further treatment.

1. *Description at the time of discharge.*

Age 25 years months
Height 5 feet 10 inches
Chest measurement { girth when fully expanded ins. / range of expansion ins.
Complexion Dark
Eyes Grey
Hair Black
Trade Learner
Intended place of residence (To be given as fully as practicable) PO Box 656 Kamloops B.C.

Descriptive marks.
1. Vacc mark left arm

(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 Physically Unfit for Further Service Under K. R. & O., Can. 322, IX*
Cert S.G 10/1/25 31/10/17
~~Cert Med Board~~
~~(appeals of 12 March 1918)~~

(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)

To be filled in on the soldier quitting the Colours.

3. Military character :—

4. Character awarded in accordance with King's Regulations :— Very Good

Certified that the above is an accurate copy of the character given by me on Army Form B. 2067* and that Army Form D. 489 was awarded in this case.

Initials of Commanding Officer.

Army Form B. 2088 has been issued to*

* Strike out if not applicable.

D. D. & L., London, E.C. A1502 Wt. W17176 M291 500,000 2/16 Sch. 3) Forms B. 268 40

H.S.G Comps. 12-2-19 A.G. KCD 28/12/19

[OVER.

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.

(Place) _____ Military Hospitals Commission COMMAND MAR 23 1918 ORDERLY ROOM "J" UNIT

(Date) _____

Major
O. C. "J" Unit, M.H.C.C.

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) _____ Military Hospitals Commission COMMAND MAR 25 1918 ORDERLY ROOM "J" UNIT

E Anderson (*Signature of Soldier.*)

(Date) _____

J Davey (*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 25-3-1918 (the date to which the record of service is completed) 2 years 201 days.

Further service " " _____ (the date of confirmation of discharge) ... ... _____ " _____ "

Total ... 2 " 201 "

11. *Confirmation of discharge.*

The discharge of the above-named man is hereby confirmed for (date) March. 25-1918

(Place) _____ Military Hospitals Commission COMMAND MAR 25 1918 ORDERLY ROOM "J" UNIT

Signature _____ Major
O. C. "J" Unit, M.H.C.C.

(Date) _____

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.

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.)

None

E Anderson

MARRIED OR SINGLE: S

PLACE OF BIRTH: Vancouver B.C.

NAME AND ADDRESS OF NEXT OF KIN: Mrs Rose Anderson

250 Lansdowne St Kamloops.

RELATIONSHIP OF NEXT OF KIN

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY
Promoted Cpl.	8.8.16.	B.O. 220 8.8.16

ADMISSIONS TO HOSPITAL, &c.

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

REG'L. No. 443881 RANK Pte NAME Anderson. Ernest. Edward. OV

IF IN PERMT. CORPS WHAT UNIT? UNIT 54th Batt. TRANSFERRED TO b.b.b.b. DATE 16.10.16 AUTHORITY b.b.B.103 12.10.16

PERMANENT FORCE ALLOWANCES TRANSFERRED TO 3.b.b.D DATE 31/5/17 AUTHORITY a. Rolls

PLACE OF ATTESTATION Vernon BC. TRANSFERRED TO 16 Reserve DATE 11.8.17. AUTHORITY A/C

DATE OF ATTESTATION 5th Sept 1915 TRANSFERRED TO P. Dis to Vancouver DATE 22.11.17 AUTHORITY East 9a/38

B.C.R.D 1.11.17 NR

ASSIGNED PAY MONTHLY $ 15 DATE EFFECTIVE P2F 1/2

PAYABLE TO Mrs. Rose Anderson. 250 Lansdown St. Kamloops BC RELATIONSHIP

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO Wife. RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) Stopped EFFECTIVE 1.12.17. REASON Discharged

DISCHARGE DATE AND PLACE Canada. 21.11.17. REASON AND AUTHORITY Invalided. Eastbourne 9A/38 16/11/17

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

N.E. PAY OFFICE, N.E. BRANCH. JAN 26 1918 CANADIAN EXPEDITIONARY FORCE

Entered on N.E. Card Index. 6/

Checked by H.C.M.

DATE	PAY: No. of Days	Rate	Amount $	Amount c.	FIELD ALLOWANCE: No. of Days	Rate	Amount $	Amount c.	WORKING OR SPECIAL PAY: No. of Days	Rate	Amount $	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	Debit	Pay Withheld or Deferred	Pay Available for Issue	REMARKS
1916																																			
			122.	--			12	20						10 --	144 20												53 53	460		113 58	30 67				
															23													15		15	1867				
															38 90	462	15/5	532	31/5					24 35	19 47			15		58 82	28 75				5.6.17. B.O. 131 11/6/18
															33.										7 30			15		22 30	39 45				
															34 10	647	31/1/16	705	15/7/16					974	730			15		3204	4151				
															35 20	754	31/7							973				15		2473	5208				
															34 50	797	31/7	878	4/9					349	762			15		2111	6547				7.6.b.b.b. 16.10.16 b.b.B.103 12.10.16
															17 25													15		15	6772				
															34 60									4731	3819			105		3053	8532				
															35 40													15		15	10472				
															34 50													15		15	12547				
															35 65													15		15	13030				
															35 65			463 (4b/8/1 376 (11/1						14 60 22			15		30 82					
															493 65									47 31	52 51		53 53	2100		363 35					

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.
1917									
June 27	1344		-	10	2	43	Can. Mil Hdqrs Eastbourne	P/M. M.H. Eastbourne	
July 12	1521		-	10	2	44	— do —	"	
28.9.17.	2659		-	10	2	43	✓	J.B. Wilson.	
15.10.17.	2680		-	10	2	44	✓	✓	
27.10.17.	2795		-	10	2	43	✓	✓	
15.11.17.	2898		-	10	2	44	✓	✓	
15.11.17.	2899		1	-	8	67	✓	✓	63.28

Small Ledger Sheet.

Sailing List #5. S.S. L. 4.81 A.R. #924 10/- Endorsed

MARRIED OR SINGLE: S

PLACE OF BIRTH: Vancouver B.C.

NAME AND ADDRESS OF NEXT OF KIN: Mrs Rose Anderson

250 Lansdowne St Kamloops.

RELATIONSHIP OF NEXT OF KIN

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY
Promoted Flgh.	8.8.16.	B.O. 220 8.8.16

ADMISSIONS TO HOSPITAL, &c.

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

REG'L. No. 443881 RANK Pte. NAME Anderson. Ernest. Edward. O.V

IF IN PERMT. CORPS / WHAT UNIT UNIT 54th Batt. TRANSFERRED TO f.b.b.b. DATE 16.10.16 AUTHORITY G.H.Q.103 12.10.16

PERMANENT FORCE ALLOWANCES TRANSFERRED TO 3.b.b.D DATE 31/5/17 AUTHORITY a. Rolls

PLACE OF ATTESTATION Vernon B.C. TRANSFERRED TO 16 Reserve DATE 11.8.17. AUTHORITY A.R.

DATE OF ATTESTATION 5th Sept 1915 TRANSFERRED TO P. Dis to Canada DATE 22.11.17 AUTHORITY East 99/38

B.C.R.D 1.11.17 N.R

ASSIGNED PAY MONTHLY $ 15 DATE EFFECTIVE P.F.R.E

PAYABLE TO Mrs. Rose Anderson. 250 Lansdown St Kamloops B.C. RELATIONSHIP

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO Wife. RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) Stopped EFFECTIVE 1.12.17. REASON Discharged

DISCHARGE DATE AND PLACE Canada. 21.11.17. REASON AND AUTHORITY Invalided. Easthorne 9A/38 16/11/17

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

PAY OFFICE, N.E. BRANCH JAN 26 1918 CANADIAN EXPEDITIONARY FORCE

Entered on N.E. Card Index. 6/1

Checked by A. Moyle

DATE	PAY: No. of Days	Rate	Amount $	Amount c.	FIELD ALLOWANCE: No. of Days	Rate	Amount $	Amount c.	WORKING OR SPECIAL PAY: No. of Days	Rate	Amount $	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
1916				122. --				12 20						10 --	144 20																				
Sept 1/30	30	1	30		30	10	3								33												53 53	+60 -	113 53	30 67					
May 1/31	31		31		31		3	10						4 80	38 90	462	15/5	532	31/5					24 35	19 47		15		58 82	28 75					
June 1/30	30		30		30		3								33										7 30		15		22 30	39 45					
July	31		31		31		3	10							36 40	647	31/7/16	705	15/7/16					97 47	7 30		15		32 04	41 51					
1/31.8.16	7		7		7		70																												
	24	1.65	25	20	24		2	40							35 30	751	31/7							9 73			15		24 73	52 08					
Sept	30		31	50	30		3								34 50	747	31/7	878	31/8					3 49	36 2		15		21 11	65 47					
Oct.	15		15	75	15		1	50							17 25												15	15	67 72					
Oct.														4 80	37 30									47 31	36 19		15		30 25	85 32					
16-31	16		16		16		1	60							18 40												15		15	104 72					
Nov.																											160								
1-30	30		31	50	30		3	-							34 50												15 -		15 -	125 47					
Dec.	31		32	55	31		3	10							35 65																				
1917			30	37 70																															
Jany	31	1.05/70	35	65											35 65										14 60		15		30 82	130 30					
																									1 22										
			478	85										14 80	493 65									47 31	52 51		53 53	210 00	363 35					

P. 6

OFFICERS AND MEN

OF DAYS RATIONS INDENTED FOR

e total must agree with the Daily Parade State acc

* TOTAL DRAWING RATIONS

TOTAL NOT DRAWING RATIONS

IN HOSPITAL

LESS ON COMMAND

* TOTAL STRENGTH

HEAVY DRAFT HORSES.

STATION

INDENT FOR RATIONS.

SUPPLIES

Small Ledger Sheet.

Sailing List #5. S.S. C. 4.81 a.R. #924 10/- Endorsed

443881 Pte. Anderson Ernest Edward

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
[illegible]			478	86										14 80	493 65								47 31	52 51		53 53	210		363 35	130 30				
Feb.	28	1/5 10/5	32	20											32 20	562 Ltk. 25/4 658 do 1/2	7/2 Ltk 5/2							1 22 ✓ 1 22 ✓				15 -		18 66	143 84				
Mar	31	10/5	35	65											35 65	Ltk 5992 Ltk 6223	30 2/3							1 22 ✓ 9 85 ✓				15 -		128 39	51 10				
Apr			34	50											34 50	F.P. 3 15/2 Accrd 1/7/17 2 57	6 3/3							H 99 ✓ 97 33 ✓				15 -		15	70 60				
May	30		34	50											34 50													15 -		15	90 10				3rd C.C.D 31.5.17 a. Roll
June	1		1	15											1 15	103 3/4							16 Apr 94 2/4	9 86 ✓						9 86	81 39				
July	31		34	50											34 50										19 46 ✓			15 -		34 46	81 43				
Aug	10		1	58											1 58													15 -		15	102 08				
	11		11	50										80	11 30													15 -		15	99 38				cr 80c under p/a. Oct/16 Transto 16 Res Draft 21/8/17
			698	62										15 60	714 22	194 10/10							9 73 ✓						17 15	106 38				
11.31	81		54	13											54 13	103 28/6							7 42 ✓											
Feb 1.30	30		1	50											1 50									9 73 ✓										
			33	3											33 3	33 14/7/17	14/7/17	15/8/17					58 40 ✓	9 73 ✓			15 -		97 86	48 07				
			7	10											7 10								41 57	188 37	19 40	52 53	330 -		711 73					

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR 3	DR 4	BALANCE	DEF. REP. PAY
Oct	~~Cal Forward~~								~~48 07~~ 48 02	
	L/C P.	35 65							15 -	
				AR 554 1/9 16 Res	9 73				58 94	
		35 65			9 73				15 - 58 09	
Nov	L/C 21 days	24 15		AR					15 - ~~44 80~~	
		✓		AR 2746 16 Res 27/10	2 43					
		✓		" 2650 " 13/10	2 43					
		✓		" 2559 " 28/9	2 44					
		✓		" 2999 " 15/11						
		✓		~~2654 Hospital~~	48 67					
		✓		" 2898 " 15/11	2 43					
		✓		" 13414 10 Stat Hosp 27/6	2 43					
		✓		" 1621 " 12/7	2 43					
		✓		" Pg24 5 C.G. Hosp 3/12	2 43	Endorsed.			2 40	
		24 15			65 69					

Balance transferred to Canada

Balance transferred to N.E. Branch. Ned.

A3M. FORM REM2 Noted EFFEC 1/1/17
DISCHARGED TO Can. DATE 24/11/17.
PAYBOOK VERIFIED 21.11.17
Ac. Pm 54.81 L.P.C. REM'D 21/11/17.
AUTHY ~~Canteen 9b 38~~ 15/11/17.

Invalided.
Ch Graham Lt/Pte

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 soldier to accept treatment appear to be unreasonable, or should he decline to sign this statement the Board of medical officers should so state.

INSTRUCTIONS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of pages 1 and 2 of this Form. The President of the Board of Medical Officers is responsible for the proper completion of the space, of page 3, reserved for recording the Proceedings of a Board of Medical Officers.
3. In answering the questions, Medical Officers will carefully obtain and record the soldier'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 soldier concerned, from witnesses, or from documents.
4. If a complete answer to any question requires more space than that reserved for it, the answer may be continued on the blank space on this page.
5. The nomenclature of diseases to be followed is that 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 and Sons.

N/K (mother) Mrs. R. Anderson,
Box 656.
Kamloops, B.C.

(Medical Officers will please read this Form carefully before using it. See instructions, page 4.)

FORM TO BE USED FOR WARRANT OFFICERS, N.C.O'S, AND MEN

MEDICAL HISTORY OF AN INVALID

STATION Vancouver, B.C. DATE March 5, 1918.

1. (a) Unit 54th Battn. (b) Regimental No. 443051 (c) Rank L/Cpl.
   (d) Surname Anderson. (e) Christian name Ernest Edward.
2. Age last birthday 23 Date of birth March 14, 1895
3. Enlisted at Kamloops, B.C. on August 1st, 1915.
4. Personal description :—
   (a) Height 5' 10" (b) Weight 142 (stripped) (c) Complexion Dark.
   (d) Colour of hair Black (e) Colour of eyes Gray. (f) Identification marks One vaccination mark on left arm.
5. Address after discharge (for the use of the Board of Pension Commissioners.)
   Box 656 Kamloops, B.C.
6. Former trade or occupation Teamster.
7. (a) Service

	Years	Days
	2	6 mos.

			Periods	
			From	To
Canada:	Aug. 1915	Nov. 1915		
England	Nov. 1915	July 1916		
France	July 1916	Sept. 1916		
England	Sept. 1916	Dec. 1917		
Canada.	Dec. 1917	Present.		

   (b) Has he been Overseas? Yes.
8. Present disease or disability (use authorized nomenclature if possible). Weakness Right arm.
   (a) Date of origin Sept. 17th 1916 (b) Place of origin St. Eloi.
   (c) Cause*
   *(Here include original disease or injury)
9. Present condition. (Important, to be a full description of the present disabling condition or conditions).

Bullet entered upper third ant. surface right arm internal border of Biceps muscle, caused compound fracture of humerus. Exit scar about 3" long and 1" wide back of lower third of arm. X-Ray report attached. There is no limitation of motion of any of the joints in the right upper extremity. There is some loss of power, about 1/3 normal. Sensation in arm and forearm normal. Complains of pins and needles sensation in forearm and hand if he rests arm for some minutes on table, and sometimes when writing. There is some atrophy of muscles of right arm and forearm. Rt. arm is one inch smaller than left, right forearm about ½ inch smaller than left.
Grip about 2/3 normal. The atrophy is due to disuse. No nerve lesion.

[After describing all abnormalities, anatomical and functional, contributing to present incapacity (see section 11) state whether such incapacity is directly due to (*a*) weakness, (*b*) loss (complete or partial) of an organ or member or of its functions, or (*c*) to the necessity for rest of the body or of some of its parts.]

M. F. B. 227.
15m.-6-17.
1772-39-117.

10. History ;

Here give a description of wounds, scars, deformities, and signs and symptoms of abnormal conditions present and not included in answer 8. This section cannot be completed without stripping the soldier and subjecting him to a thorough physical examination

This man is in good health, and with no disability except weakness in right arm.

Heart and lungs and other systems normal.

11. To what extent, state in percentages, is capacity to earn a livelihood in the untrained labour market reduced ? If there is more than one disabling condition, estimate the incapacity due to each, and that due to all combined.

10% diminishing.

12. Did the disability arise on or off duty ? On duty in action.

13. Was a Court of Inquiry held ? No.

14. If the disabling condition had its origin before enlistment, has it been aggravated on service ? N.A.

Yes..... No.....

(If the answer is in the affirmative, state in percentages, to what extent the soldier is incapacitated by that aggravation.)

15. Was the disability caused or aggravated by negligence, by vice or by misconduct, or by unreasonable refusal to accept treatment ? No.

(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.)

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

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

Splints. Fragments of bone removed, followed by massage.

18. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit ?

No.

19. Can the former trade or occupation be resumed ? Not at present.

20. Recommendations

Must be be placed in Class C3 permanent.

Geoge A. Graves, Capt. C.A.M.C.

Medical Officer by whom the case is brought forward.

STATEMENT OF THE SOLDIER.

(Sections 8, 9 and 10 are to be read to the soldier.)

I, the undersigned.....have heard the description of my disability read, and am satisfied (or not satisfied) with it. (If dissatisfied, statement should follow.) I complain in addition of

S. C. E. Anderson.

Signature of soldier examined.

OPINION OF THE MEDICAL BOARD

21. Does the Board concur with the preceding report ? If not, give differing opinions, with reasons, quoting the number of the answer criticized.

Yes.

22. Is the soldier fit for

(a) General service, (Category A) (Yes or No). No.
(b) Service abroad, not general service, (" B) (Yes or No). No.
(c) Home service, (Canada only), (" C) (Yes or No). Yes C3 permanent.
(d) Temporarily unfit, (" D) (Yes or No). No.
(e) Unfit for service in Categories A, B and C,(" E) (Yes or No). No.

23. It is certified that the soldier No.

(a) Does require treatment.
(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).

24. It is recommended that the soldier be discharged. (When not for discharge add special recommendation).

(1) No.

(2) C3 permanent.

C.A. Edmonton Capt. *President.*

H.W. Watson, Capt. } *Members.*

R. MacDougall Capt. }

STATION Vancouver, B.C.

DATE March 6th, 1918.

APPROVED BY

DATE Mar.12-1918

(sgd). R.J.Miller Capt., C.A.M.C.
for *Assistant Director of Medical Services.* M.D.11

APPROVED BY

DATE.....

Director-General of Medical Services.

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 soldier to accept treatment appear to be unreasonable, or should he decline to sign this statement the Board of medical officers should so state.

INSTRUCTIONS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" will be carefully followed.
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3. In answering the questions, Medical Officers will carefully obtain and record the soldier'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 soldier concerned, from witnesses, or from documents.
4. Special care is required in answering question 14. Please read the questions carefully. All questions must be answered.
5. The nomenclature of diseases to be followed is that 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 and Sons.

N/K (Mother) Mrs. R. Anderson,
Box 856,
Kamloops, B.C.

3.4-A-103

2492

(Medical Officers will please read this Form carefully before using it. See instructions, page 4.)

FORM TO BE USED FOR WARRANT OFFICERS, N.C.O'S AND MEN

MEDICAL HISTORY OF AN INVALID

STATION Vancouver, B.C. DATE March 5, 1918.

1. (a) Unit 54th Batt'n. (b) Regimental No. 443851 (c) Rank L/Cpl.
   (d) Surname Anderson. (e) Christian name Ernest Edward.
2. Age last birthday 23 Date of birth March 14, 1896
3. Enlisted at Kamloops, B.C. on August 1st, 1915.
4. Personal description :—
   (a) Height 5' 10" (b) Weight 142 (stripped) (c) Complexion Dark.
   (d) Colour of hair Black (e) Colour of eyes Grey (f) Identification marks One Vaccination mark on left arm.
5. Address after discharge (for the use of the Board of Pension Commissioners) Box 856 Kamloops, B.C.
6. Former trade or occupation Teamster.
7. (a) Service

			Years	Days
			2	6 month.
Canada.	Aug. 1915	Nov. 1915		
England	Nov. 1915	July 1916.		
France	July 1916	Sept. 1916.		
England	Sept. 1916	Dec. 1917.		
Canada.	Dec. 1917	Present.		

Periods	
From	To

(b) Has he been overseas? Yes.

8. Present disease or disability (use authorized nomenclature if possible) Weakness Right arm.
   (a) Date of origin Sept. 17th 1916 (b) Place of origin St. Eloi.
   (c) Cause* G. S.W. right arm.
   *(Here include original disease or injury)

If further space is needed for this or other answer, use page 4

9. Present condition. (Important, to be a full description of the present disabling condition or conditions).

Bullet entered upper third ant. surface right arm internal Border of Biceps muscle, caused compound fracture of humerus. Exit scar about 3" long and 1 1/2" wide back of lower third of arm. X-Ray report attached. There is no limitation of movement motion of any of the joints in the right upper ~~ar~~ extremity. There is some loss of power, about 1/3 normal. Sensation in arm and forearm normal. Complains of pins and ~~nids~~ needles sensation in forearm and hand if he rests arm for some minutes on table, and sometimes when writing. There is some atrophy of muscles of right arm and forearm. RT. arm is one inch smaller than left, right forearm about 1/4 inch smaller than left.
Grip about 2/3 normal. The atrophy is due to disuse. No nerve lesion.

[After describing all abnormalities, anatomical and functional, contributing to present incapacity (see section 11) state whether such incapacity is directly due to (a) weakness, (b) loss (complete or partial) of an organ or member or of its functions, or (c) to the necessity for rest of the body or of some of its parts.]

M. F. B. 227.
75M.-12-17.
1772-39-117.

10. History :

Here give a description of wounds, scars, deformities, and signs and symptoms of abnormal conditions present and not included in answer 8. This section cannot be completed without stripping the soldier and subjecting him to a thorough physical examination.

This man is in good health, and with no disability except weakness in right arm.
Heart and lungs and other systems normal.

11. What is the extent (state in percentages) of the disability in earning a livelihood in the untrained labour market? If there is more than one disabling condition, estimate the disability, due to each, and that due to all combined.

10% diminishing.

12. Did the disability arise on or off duty? On duty in action.

13. Was a Court of Inquiry held? No.

14. If the disabling condition had its origin before enlistment, has it been aggravated on service? N.A.

If the answer is in the affirmative, state in percentages, *to what extent the soldier is incapacitated by that aggravation.*

15. Was the disability caused or aggravated by negligence, by vice or by misconduct, or by unreasonable refusal to accept treatment? No.

(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.)

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

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

Splints, fragments of bone removed, followed by Massage.

18. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit?

No.

19. Can the former trade or occupation be resumed? Not at present.

20. Recommendations

That he be placed in Class C3 permanent.

SHAUGHNESSY MILITARY CONVALESCENT HOSPITAL RECEIVED

Sergt Adjutant
Medical Officer by whom the case is brought forward.

STATEMENT OF THE SOLDIER.

(Sections 8, 9 and 10 are to be read to the soldier.)

I, the undersigned ..... have heard the description of my disability read, and am satisfied (or not satisfied) with it. (If dissatisfied, statement should follow.) I complain in addition of

S/C E Anderson
Signature of soldier examined.

OPINION OF THE MEDICAL BOARD

21. Does the Board concur with the preceding report? If not, give differing opinions, with reasons, quoting the number of the answer criticized.

YES.

22. Is the soldier fit for

(a) General service, (Category A) (Yes or No). No.
(b) Service abroad, not general service, (" B) (Yes or No). No.
(c) Home service, (Canada only), (" C) (Yes or No). Yes C3 permanent.
(d) Temporarily unfit, (" D) (Yes or No). No.
(e) Unfit for service in Categories A, B and C, (" E) (Yes or No). No.

23. It is certified that the soldier

(a) Does require treatment. (Give the nature of the condition and of the treatment required and its probable duration).

No.

(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).

24. It is recommended that the soldier be discharged. (When not for discharge add special recommendation).

(1) No.

(2) ~~NX~~ C3 permanent.

R. R. Robertson Capt. *President*
H. E. Watson Capt.
Murray Lloyd Capt. } *Members.*

STATION Vancouver, B.C.

DATE March 6, 1918.

APPROVED BY

DATE MAR 12 1918

R. L. Miller Capt. A.M.C.
For *Assistant Director of Medical Services* M.D. 11

APPROVED BY

DATE .....

Director-General of Medical Services.

PART III

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

Signatures of the Board

President.

PART I. 10

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

Reserved for M.H.C.

Regt. No. 443881 Rank. L/CPL Surname. ANDERSON Christian Name. ERNEST EDWARD

Unit or Corps—(a) Overseas from United Kingdom. 54th Bat'n (b) In United Kingdom. 54th 16TH RES Bat'n

Born at—Town. VANCOUVER County or Province. BRITISH COLUMBIA Country. CANADA

Date of Birth—Day. 14th Month. MARCH Year. 1894 Age. 23 yrs. 8 months.

Joined at. VERNON B.C. Date. SEPT 5th. 1915

Former Trade or Occupation. TEAMSTER

Permanent marks or peculiarities that will serve for future identification :

SCAR RIGHT UPPER ARM. UPPER THIRD.

Height—feet. 5 inches. 10 Colour of eyes. BLUE

Signature of Soldier (*for identification purposes*). Ernest Edward 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*) PARTIAL LOSS of POWER RIGHT ARM

Disabilities Group (*b*) LIMITATION of MOVEMENT of ELBOW RIGHT

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.	GUNSHOT WOUND of HUMERUS (UPPER THIRD, RIGHT)	St ELOI	SEPT 17/16
(*ii.*) As to Group (*b*) above.	SEQUENCE of ABOVE	DO	DO
(*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 ? NO If yes, has Active Service aggravated it ? —

(*ii.*) As to Group (*b*) above ? NO 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—

(*i.*) As to Group (*a*) above ? YES

(*ii.*) As to Group (*b*) above ? YES

(*iii.*) As to Group (*c*) above ? —

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? —

(*iii.*) Was a Court of Inquiry held? (*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).*

was wounded at St Eloi Sept 1916 by German sniper bullet passing through upper part of sternum, causing a Compound comminuted fracture. was in hospital at folkst. 3rd Can C.C. 3 weeks, Birmingham 1st Southern General 3 mos; Can Con'l Stone Lee bridge 3 mos. 3rd C.C.D 1 mo. 16th Reserve Seaford 2 mo 14 C.G.H 2 mos then 16th Reserve 1 mos, then 14 C.G.H 3 mos. fracture united readily but in Sternum was found bullet felt, Broke down and discharged

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

Osteo myelitis of upper end of humerus. much considerable swelling in region of shoulder (Bellas) X Ray reveals a large sequestrum, and a probe can be passed through the arm, under screen it shows that the apparent passes through humerus. a discharging sinus present. there is partial loss of power of arm, with limitation of movement of arm and elbow. Previous weight 155 lbs. Present weight 145 lbs. Nervous System - Irritability Respiratory System - appetite poor. Respiratory - normal. Heart -

8. OPERATION. (*i.*) Was one performed? Yes

(*ii.*) If so, state what. Removal of bone piece of bone from arm

(*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? No

(*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 4th Nov 1917 Signed D. A. Baker Capt R.A.M.C.

Station 14 Can Gen Hpl Eastbourne. Officer in medical charge of case.

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

MAJOR R.A.M.C. Officer i/c Hospital. *Strike out one of these.*

No. 14 CANADIAN GENERAL HOSPITAL EASTBOURNE, SUSSEX

FOR LT. COL. I/C HOSPITAL

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)? yes

If not, indicate it.

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

If not, indicate it.

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.

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? Yes

Classification for the Military Hospitals Commission.

Date of Board 10-11-17

Station Eastbourne

Approved 13 NOV 1917

Dated at Seaford-Sussex

Signatures of the Board. Lieut-Col. President. J. McKay Capt Can A.M.C. J. Gillies Capt A.D.M.S. T.D. Gutkin Captain, C.A.M.C.

APPROVED

A.D.M.S. for A.D.M.S., Canadians, Station 191