# REGIMENTAL DOCUMENTS

NAME ANDERSON. Fordyce. John REGT. No. 874339 UNIT 184th Batt H. Q. FILE No.

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| | | | | | | 1 |

W. 2589
25M.—1-43
2-39-1377

# ATTESTATION PAPER.

No. 871339

184th. OVERSEAS BATTALION

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

Folio.

ORIGINAL

## QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?..... Anderson
1a. What are your Christian names?..... Fordyce John
1b. What is your present address?..... Pleasant Home
2. In what Town, Township or Parish, and in what Country were you born?..... Drayton N. D. U.S.A.
3. What is the name of your next-of kin?..... Duncan Anderson
4. What is the address of your next-of-kin?..... Pleasant, Man
4a. What is the relationship of your next-of-kin?. Father
5. What is the date of your birth?..... Mar. 5 1899
6. What is your Trade or Calling?..... Farmer
7. Are you married?..... no
8. Are you willing to be vaccinated or re-vaccinated and inoculated?..... Yes
9. Do you now belong to the Active Militia?..... no
10. Have you ever served in any Military Force?.. No
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

## DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Fordyce John Anderson, do solemnly declare that the above are answers made by me to the above questions and that they 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.

Fordyce John Anderson (Signature of Recruit)

Date March 1 1916 A. P. Leach (Signature of Witness)

## OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Fordyce John 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.

Fordyce John Anderson (Signature of Recruit)

Date March 1 1916. A. P. Leach (Signature of Witness)

## CERTIFICATE OF MAGISTRATE.

The Recruit above-named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath

before me, at Winnipeg this 1st day of March 1916.

W. J. Rowe (Signature of Justice)

A Notary Public in and for Manitoba.

Resworn at Camp Hughes in the Province of Manitoba This 7th, day of August 1916,

M. F. W. 23.
600M.—2-16.
H. Q. 1772-39-841.

# Description of Fordyce Johns Anderson on Enlistment.

Apparent Age 27 years — months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height ..... 5 ft. 11 3/4 ins.

Chest measurement: Girth when fully expanded ..... 38 ins.

Chest measurement: Range of expansion ..... 4 ins.

Complexion ..... Fair

Eyes ..... Blue

Hair ..... Brown

Religious denominations.

Church of England .....

Presbyterian ..... ✓

Methodist .....

Baptist or Congregationalist .....

Roman Catholic .....

Jewish .....

Other denominations .....
(Denomination to be stated.)

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).

Scar on left arm

## 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 March 1 1916

Place Pharmacy

A B Stewart
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.

Anderson, Fordice John having been finally approved and inspected by me this day, and his Name, Age, Date of Attestation, and every prescribed particular having been recorded, I certify that I am satisfied with the correctness of this Attestation.

(Signature of Officer)
Lieut Col

Date April 19 1916.

184th OVERSEAS BATTALION

# CANADIAN EXPEDITIONARY FORCE

## Discharge Certificate

15023

**This is to Certify** that No. 874339 (Rank) Private

Name (in full) Fordyce John Anderson enlisted in

the 184th Overseas Battalion

CANADIAN EXPEDITIONARY FORCE at Winnipeg, Man. on the first

day of March 1916

HE served in France

and is now discharged from the service by reason of being medically unfit.

R.O. 237 dated 22-7-18. C.O. 154 July 3/18, para. 2990

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

Age 29 years

Height 5 feet 11 3/4 Ins.

Complexion Fair

Eyes Blue

Hair Brown

Marks or Scars Scar on left arm.

ORDERLY ROOM

JUL 8 1918

10th. BATTALIAN,
C. G. R.

Fordyce J. Anderson
Signature of Soldier

Issuing Officer

Lieut.-Colonel
Rank

O.C. 10th Battalion C.E.F.
Appointment

Date of Discharge 8th July 1918

Signed at Winnipeg, Man. this eighth day of July 1918

in Military District No. 10

File Reference No.

N.B.—As no duplicate of this Certificate will be issued, any person finding same is requested to forward it in an unstamped envelope to the Secretary, Militia Council, Ottawa, Canada.

M. F. W. 39a
200m.—2-18.
H.Q. 1772-39-882

DISTRICT CASUALTY OFFICE.
JUL 9 1918
M. D. 10

# CANADIAN EXPEDITIONARY FORCE

## Discharge Certificate

No. 874339 (Rank) Private Name Fordyce John Anderson

Unit 10th Battalion C.G.R.

Address on Discharge Plumas, Man.

Character and Conduct Very Good.

Former Occupation Farmer

Special Qualifications of Value in Civil Life Farmer

Medals and Decorations

Remarks Campaigns: European War. France Nov. 1916 to May 1917. Vimy Ridge. Arleaux.

Signed at Winnipeg, Man. this eighth day of July 1918

[signature]
Name of Officer

Lieut.-Colonel
Rank

O.C. 10th Battalion C.G.R.
Appointment

[signature] Capt.
District Casualty Officer,
Military District No. 10

Form D.M.S. 1394.
700M—100M.—5/2/17.

Canada MRD 20181 82-A

# PROCEEDINGS OF A MEDICAL BOARD.

Dated at E. Sandling 12-9- 1917.

No 874339 Rank Pte Name Anderson F.L.

Local Unit 1 C.C.D. Overseas Unit 8th Age 27

Examination held at E. Sandling.

DISABILITY.
Overseas—Local
(scratch one out).

Myalgia.

## PRESENT CONDITION.

In France 5½ mos:
This man was evacuated from France because of pains in the back and legs. He has been laid up with this for several months - but thinks dates back three or four years.
He cannot carry on efficiently with work of Command Depot:

BOARD RECOMMENDS:— B III

1. Fit for Duty.....

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

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

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

5. Discharge .....

Signatures:—

Members { W. A. Culham Capt. President.
Hamilton Lt
.....

APPROVED 13 SEP 1917

Dated.....1917. .....CAPT.
FOR A.D.M.S. CANADIANS, SHORNCLIFFE
For A.D.M.S.

M.D.10
JAN 25 1919

DEPARTMENT OF MILITIA AND DEFENCE.

# WAR SERVICE GRATUITY.

13595

270

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 Fordyce John 2. Surname Anderson
3. Rank Pte 4. Original Unit 184th 5. Reg. No. 874339
6. Address, in full, to which future payments of gratuity are to be forwarded Riding Mountain Man.
7. Date of enlistment in the C.E.F. Feb 29 1916
8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge Margaret Anderson
9. Relationship of such dependent Wife
10. Address, in full, of such dependent Margaret Anderson Riding Mountain Man.
11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier ? No
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:— No
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
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 From Feb. 29. 1916 till July. 8. 1918 from Feb. 29 16 till Nov 29. 16 with 184th Batt then with the 8th Batt in France till Apr 30 when invalided to England.
16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department No
17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.? No

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

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

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 ... have myself and wife received One hundred and Seventy five Dollars Pay and allowa

20. Have you been issued with a War Service Badge? If so, what class? ... G. S. 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 ... have not received any

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? ...

24. Are you now serving in the C.E.F. ... No If not, give:—(a) Date of discharge ... July 8: 1918 ... (b) Reason for discharge ... Physically unfit for further war Services

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 ... With 8th Batt from Nov 29: 1916 until April 3rd: 1917.

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

(b) If so, are you in receipt of full pay and allowances from that Department? ... 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: Fordyce John Anderson

Place of Residence: Riding Mountain, Man

Declared before me at: Riding Mountain

This 22d day of January 1919.

Signature of Barrister of the Supreme Court Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner for the Administration of Oaths. D C Syles J.P

## POST DISCHARGE PAY.

| Date paid | Paid Soldier | Paid Dependent | War Service Gratuity | Net amount due |
|---|---|---|---|---|
| Unit | 58 | | $100 | |
| 30/7/18 | 58 | | $500 | |
| 30/8/18 | 59.10 | | | |

Certified Correct. 175.10

NO OVERPAYMENT OUTSTANDING IN M. D. 10

District Paymaster.

PAYMASTER M.D. No. 10

# DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

NAME OF SOLDIER ..... DISTRICT ..... 10

REGIMENT ..... RANK ..... No. 824339

## INSTRUCTIONS

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

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

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

| | Date | Amalgam | Temporary Filling (a) G. P. (b) Cement | Cement | Treatment Putrescent Pulp | Root Filling | Pulp Cap | Devitalization | Pyrrhœa | Synthetic Porcelain | Extracting | Dentures U | Dentures L | Dentures P | Gold Clasp | Gold Filling | Crowns Gold | Crowns Porcelain | Bridge Work | OPERATOR | Military Dist. | REMARKS |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Condition on first Examination | 1918 | | | 2 | | | | | | | 1 | | | | | | | | | | | Cavities |
| Feb 14 | | | | 12.13. | | | | | | | 3.4.8 | | | | | | | | | R.S. Bailey Capt | 10 | |
| " 16 | | | | | | | | | Pyrrh. | | 31 | | | | | | | | | | | Instructions issued |
| " 28 | | | | | | | | | / | | | | | | | | | | | | | |
| | | | | | | | | | / | | | | | | | | | | | | | |

Dentally Fit.

Feby 28th 1918 — R.S. Bailey Capt

Can. A.C.

M.F.B. 465
20/M/1-17
1772-89 950

# DENTAL HISTORY SHEET

Triplicate

# CANADIAN CONTINGENT EXPEDITIONARY FORCE

## LAST PAY CERTIFICATE

This form to be used for all Ranks (Vide Articles 122, 130 and 141, Financial Instructions, 25715c, C.E.F., 1916).

Regimental No. 674339 Rank Pte. Name Andereon. F.J.

Corps 10th Battalion C.E.F. who was* Discharged

On 8-7-18 191....., to ---------

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1-7-18 191....,
to 8-7-18 191...., the inclusive date of transfer or discharge.

| Dr. | $ | c. | Cr. | $ | c. |
|---|---|---|---|---|---|
| Bal. Dr. from prev. month | | | Bal. Cr. from prev. month S/A. | 53 | 00 |
| Advances by Cheques No. | | | Regt'l Pay 8 days at $ 1 c 00 | 8 | 00 |
| | | | Field Allow. 8 days at $ c 10 | | 80 |
| Assigned Pay and Sep'n Allce. No. 910 | 60 | 00 | Separation Allowances* (Monthly) 8days | 7 | 00 |
| Other charges Canteen | 1 | 00 | Other Allowances* Clothing | 8 | 50 |
| Payment on transfer or discharge No. 921 | 74 | 30 | Other Credits* | | |
| | | | Pay & Allowances 1st month's | | |
| Balance Cr. (to be paid by the new unit) | | | Bal. Dr. (to be deducted by new unit) | 58 | 00 |
| | | | Post Discharge Pay | | |
| Total | 135 | 30 | Total | 135 | 30 |

*Give particulars.

A monthly stoppage of $ 20.00 (†) has (‡) been paid on account of Assigned

{Pay for the month of June 1918
and Sep'n Allce. for month of June&8dys July 1918} (to) Assignee Mrs. M. Anderson,

(Address) 609 Warsaw Ave.
Winnipeg, Man.

(†) 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 YES. YES.

(3) cause of discharge Medically Unfit authority G.O.354 Para:2998

(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 8-7-18

Place Winnipeg, Man.

*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.

100M.—1-18.
H. Q. 1772-3-903.

To be made out in duplicate. H.Q. 54-21-23-53

# PARTICULARS OF FAMILY OF AN OFFICER OR MAN ENLISTED IN C. E. F.

INSTRUCTIONS.

(a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.

(b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.

(c) All questions, etc., must be answered.

(d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.

(e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

---

(1) Name of Overseas Unit which Soldier joins.....

184th Overseas Battalion, C.E.F.

(2) Regimental Number 874339

(3) Full Name of Soldier..... Anderson Fordyce John

(4) Place of Birth..... Drayton, North Dakota.

(5) Are you married, or not ? ..... No

(6) If married, state,
(a) Full name of your wife..... ----

(b) Present Postal Address..... -----

(7) Are you a widower ? ..... No ----

(8) Have you any children ?..... ----

If so, give number of boys and girls.....

Also their names and ages.....

-----

M. F. W. 67.

300M.—5-16.
1772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive ?.....Yes Duncan Anderson, Plumas, Man.

If so, state name and address .....

(10) Is your Mother alive ?.....Yes.....

If so, state name and address.....Jennie Anderson,

Plumas, Man.

(11) If your Mother is a widow.....No.....

Are you her sole support, or not ?.....No.....

(12) If sole support of widowed mother, state what amount you have given her per month prior to your enlistment, also reason she has no other support than yourself.

.....

.....

(13) If you have no wife, father, mother or children, state the name and relationship with full postal address of your next of kin, to whom you would desire any communication to be sent concerning you.

.....

.....Mrs/ Anderson. (Mother).....

.....Plumas, Man.....

(14) If you have a wife, or children, or a widowed mother who depends on you as her sole support, have you applied to the Paymaster of your unit for Separation Allowance ? If not, this must be done.

.....

15) Are you insured ?.....Yes.....

If so, in what Company ?.....Canadian Order of Foresters.....

Have you made arrangements for payment of your Insurance premium.....Yes.....

If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.

C Kenwoode

.....

*Officer Commanding.*

Date.....SEP 20 1916.....

DUPLICATE

BRL 40958 CR486 874339

# MEDICAL HISTORY SHEET.

184th. OVERSEAS BATTALION

*Surname* Anderson *Christian Name* Fordice John

Examined { on 1st day of March 191 6
at Plumas, Man. Canada.

Birthplace { City or Town Drayton, N.D.
County U.S.A.

Apparent age 27 yrs.

Trade or occupation Farmer

Height 5 Feet 11½ Inches.

Weight ..... Lbs.

Chest measurement { Minimum 34 inches.
Maximum expansion 4 inches.

Physical development .....

Small-Pox Marks .....

Vaccination Marks { Arm Right. Left.
Number .....

When Vaccinated last .....

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

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

Approved by A B Stewart M.O.

Rank ..... M.O.

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

| Date. | Result. | Vaccinations. |
|---|---|---|
| SEP 25 1916 | | J. D. Wright. M.O. |
| | | M.O. |
| | | M.O. |

| Date. | Result. | Anti-Typhoid Inoculations, Etc. |
|---|---|---|
| 8 June | OK | J. D. Wright. M.O. |
| 17 June | OK. | J. D. Wright. M.O. |
| | | M.O. |

*Enlisted on* 1st *day of* March *191*6 *at* Plumas, Man. Canada

| | Corps. | Regt'l Number. | Habits. | Date. |
|---|---|---|---|---|
| Joined on enlistment | 184th Batt | 874339 | | March 1/16 |
| Transferred to | 8 Bn | | | |

## EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

| Station. | Date. | Disease. | Result. |
|---|---|---|---|
| | | | |

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

M. F. B. 313.

200M—11-15.
H. Q. 1772 39-479.

Surname Anderson Christian Name Fordice John.

| STATION. | Date of Arrival at the Station. | Dates of Admission into Hospital. Day | Month | Year | Dates of Discharge from Hospital. Day | Month | Year | DISEASE. | Number of days in Hospital | Remarks on nature of the disease: how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations. | Signature of Medical Officer. |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | | | |

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

No. 474339 Rank Pte. Name and Corps of disabled Soldier:— Anderson, Fordyce John, 184th Batt

Previous civilian occupation:— Farmer.

Cause of Disability:— Myalgia. Aggravated but not caused by service.

Condition, in detail, which prevents the soldier earning a full livelihood:—

In France 5½ mos.

Pt. complains of pain in l. side & shoulder. States he has also had some myalgia along the whole l. side of his body. Sometimes ℞ foot swells so he cannot get his boot on. Admits having had myalgia for 15 yrs. off & on, but claims it has been much worse since entering service. Was taken ill June 1916. In Hosp. for one time was so bad had to be carried on stretcher.

Phys. Exam: Neg. except that pt. states that elevation of l. arm is very painful.

## OPINION OF THE BOARD.

Degree of incapacity. (Please state in fractions) 30%. 15% Due to service. Reducing.

Probable duration of incapacity:— Impossible to state.

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

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

Convalescent home.

Signature:— E. H. Robertson Capt ..... President.

Station:— Quebec.

Date Dec. 7th 1917

C. M. Bryans. Capt. ..... Members

W. A. Grant Capt

## APPROVED.

Date 7/12/17

W. A. Carnegie Major
Asst. Director Medical Services.

Date .....

.....
Director General Medical Service.

# CASE HISTORY SHEET.

Wpg. Gen. Hosp.

No. 874339 Rank Private Name Anderson Jno. L. Age 28

Unit 8th Completed years of service { Where and how long } .....

Date of admission Feb. 4th 1918 Date of discharge March 2nd 1918

Diagnosis Myalgia & trench mouth Place of origin .....

---

CONDITION ON ADMISSION AND PROGRESS OF CASE

Admitted Feb 4th

Treated By Dental Corps for trench mouth

FAMILY HISTORY

(Tuberculosis, mental or nervous diseases.)

Neg

TREATMENT

(Especially any specific or special form )

None at W G H

CONDITION ON DISCHARGE,

(and disposal made of case.)

Improved

Date March 2nd '18

Geo Faith Evans
Medical Officer i/c case.

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

882.

# CASE HISTORY SHEET.

No. 874339 Rank Private Name Anderson. Jno. Frdyc Age 28.

Unit 8th. Completed years of service Where and how long } Engl. France. 2 3 months

Date of admission Feb 4th. Date of discharge

Diagnosis Myalgia Place of origin

CONDITION ON ADMISSION AND PROGRESS OF CASE

Complaining of rheumatism in back. Both legs.

Transferred

Was the patient vaccinated? Is there a history of vaccination? Recurrent pain in left leg and sometimes in right leg.

Had rheumatism before joining the army.

FAMILY HISTORY

(Tuberculosis, mental or nervous diseases.) Parents. A. & W.

Brother. A. & W.

Sister. A. & W.

Husband Dead

TREATMENT

(Especially any specific or special form.) Transferred to convalescent treatment Lift pushed in deepened

CONDITION ON DISCHARGE, Transferred to convalescent

(and disposal made of case.) of Diagnosis of trench mouth & Rheumatism.

Date D. E Mellis Capt.

Medical Officer i/c case. A.A.M.C

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

Forms
I. 1237
12

Army Form I. 1237.

# MEDICAL CASE SHEET

| No. in Admission and Discharge Book. | Regimental No. | Rank. | Surname. | Christian Name. |
|---|---|---|---|---|
| 1a-T1099 | 874339 | Pte. | Anderson | F.J. |
| **Year** | **Unit.** | | **Age.** | **Service.** |
| 1917 | 8th.Bn. | | 27 | 16/12 |

**Station and Date.**

Disease Myalgia Back & Legs.

Enlisted Plymouth Plumas wm Man Feb 29. 1916. Was in good health.
Reports ill about Feb 24. 1917 at Bully Grenay. Has pains back and legs and was unable to walk. Improved after treatment by M.O. and returned to duty as stretcher bearer. Reports sick again on April 25 but returned to duty. Broke down on way out and had to be carried on stretcher. Sent to C.C.S. & thence Camiers. Liverpool. Foxteth Mil Hosp. thence Buxton.

Farnes Fr. 6 mos. O.H. 2 mos.

Condition on admission.

Limited movement left shoulder. Limited turning. Complains of left Knee. Very slight swelling of Knee.
Pains in ankles. Knees. back & shoulders. No definite organic lesion Heart O.K. Lungs O.K.
Urine. Sp. 10-12- Reac. Qc. Alb. nil. Sugar nil.
Teeth. Reg. Inst.

Inst. WmB Mon Wed Fri.
Wells Mist mag.

5-7-17 Weight 183 lbs.
22-7-17 Says he does not feel any improvement
28-7-17 Complains of same pain in the back and left leg & knee. — T.W.S.

*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. (E289)

P.T.O.

| Station and Date. | |
|---|---|
| 31-7-17 | Well improved ~~with the exception of~~ no more pain in left shoulder. (Board) W.D.G. |
| 1-8-17 | Board Cont Tmt, well |
| 11-8-17 | Still improving W.D.G. |
| 15-8-17 | Quite improved W.D.G. |
| 21-8-17 | Boards rec. Discharged D.T |
| | W. Dawkins Major R.A.M.C. |

REPORT OF MEDICAL BOARD.
-Classification by Categories.-

1. Station **M.M.H. Tuxedo.**
2. Regiment **184th, & 8th Batt.**
3. Reg. No. **M.H.C.C. 8743393** 4. Rank **Pte.**
5. Name **Anderson, John** 6. Age **29** Fordyce
7. Former occupation **Farmer**
8. Conduct **No records.**
9. Enlisted on **29th Feb/16.**
10. At **Winnipeg.**

11. Former classification **D.111.**

12. Condition present necessitating change of classification. **Myalgia in back and left leg. No objective symptoms. This condition has improved since tonsils were removed and teeth fixed.**

| | | |
|---|---|---|
| 13. Cardia vascular - systems | | **NORMAL** |
| 14. Respiratory | " | " |
| 15. Digestive | " | " |
| 16. Genito-Urinary | " | " |
| 17. Nervous | " | " |
| 18. Lymphatic | " | " |
| 19. Visual | " | " |
| 20. Auditory | " | " |
| 21. Locomotion | " | **Slight limp** |
| 22. Antaomical defects | | **None** |
| 23. Class to which recommended | | **C.111.** |

24. Did Condition pre-exist Enlistment **No.**

25. If pre-existing enlistment to what extent has it been aggravated by service - State in fractions **N.A.**

26. Observations on recommendations of Boards **This man was sent back with the classification of B.111 from England.**

RECEIVED APR 30 1918 A.D.M.S.M.D.-10

APPROVED MAY 6 1918 Major, A.D.M.S., M.D. No. 10 WINNIPEG, MAN.

27. Date of Examination

28. Signatures of Board

N.B. In sections 13 to 21, Boards after examinations, will state if normal. Systems defective will be reported as "except as above described." Describing fully conditions in No. 12.

B.P.C. ORIGINAL

# MEDICAL HISTORY OF AN INVALID

Military District No. 10 — 4-257 — JUN 20 1918 — Man.

## INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" issued by the B.P.C. and instructions issued by Militia H.Q., Ottawa, will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of Sections 1 to 17 of this Form and will obtain the signature of the soldier to the "Statement," page 3. The President of the Board of Medical Officers is responsible for the proper completion of sections reserved for recording the "Opinion of the Medical Board."
3. In answering the questions, Medical Officers will carefully obtain and record the 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 13. Please read the questions carefully. All questions must be answered.
5. If space provided under any sections is insufficient use blank space, page 4 or add another sheet. Such entries or sheets must be initialled by the Medical Board.
6. A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board."
7. Under no circumstances may information other than that in sections 8, 9 and 10 be communicated to the soldier, directly or indirectly.
8. The nomenclature of diseases must be followed, if possible, as described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London, (1915), by Messrs. Harrison & Sons.

STATION Winnipeg, Man, DATE June 18th, 1918

1. 1 (a) Unit 184th, Batt. #10.D.D.#10.Batt. (b) Regimental No. 874339, (c) Rank Pte, CGR.

(d) Surname ANDERSON, (e) Christian name Fordyce, John,

2. Age last birthday 29 years, Date of birth March 5th, 1889.

3. Enlisted at Winnipeg, Man. on Feb, 29th, 1916.

4. Personal description:—

(a) Height 5ft 10-1/2 ins. (b) Weight 175 lbs. (stripped) (c) Complexion Fair,

(d) Colour of hair L. Brown, (e) Colour of eyes Blue. (f) Identification marks Scar and mole, right cheek. Mole on right clavicle.

5. Address after discharge (for the use of the Board of Pension Commissioners) 669 Warsaw Ave., Winnipeg, Man,

6. Former trade or occupation Farmer,

RECEIVED. JUN 20 1918 A.D.M.S.M.D.-10

7. (a) Service

| | Years | Days | Periods From | Periods To |
|---|---|---|---|---|
| C.E.F. | | | Feb, 29th, 1916. | June 18th, 1918. |

(b) Has he been overseas? Yes, 14 mos. France 6 mos.

8. Original disease or disability 1. Myalgia.

(a) Date of origin April, 1905. (b) Place of origin Plumas, Man.

(c) Cause* Exposure.

(d) Present disease or disability Impaired function of left hip and left knee.

9. Present condition (a) (Important to be a full description of the present disabling condition or conditions only.) "History" must be recorded in Section 10.

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

He walks with a marked limp due to stiffness of hip joint. Has pain in left hip joint and left knee when walking or climbing a flight of stairs.

M. F. B. 227.
300M.—2-18.
1772—39—117.

R.

9. Present condition.—(*Continued.*)

Pains are aggravated in damp weather; there is limitation of movements of hip and knee joint. Can flex hip on body to 100 degrees only-passive. Flexion normal; abduction and adduction and internal rotation 75% normal. Passive movements normal. ~~Passive movements normal~~ Extension normal. Flexion of left knee 90degrees only - extension normal. When weather is very damp pain will start in right knee and left ankle;no pain of disability in these joints.

(b) Are the following systems normal? If not, briefly state abnormality

Nervous Normal. Digestive Normal. Respiratory Normal. Cardiac Normal.

Genito-Urinary Normal. Skin, Middle Ear, Eye or any other part Normal.

at time of examination.

Can walk half a mile slowly.

10. History: (*a*) of Condition referred to in "a" section 9.

Has been continually under treatment since April 30th,1917.

(*b*) 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.

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

Pre-existed enlistment - aggravated by service 75%

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

The regimental documents will be referred to.

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

13. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? Permanent - aggravation due to service will disappear after a minimum period of six months.

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

Hosps. France, 8 days, Hosps. Eng. 5-1/2 mos.

Canada . 3-1/2 mos.

## OPINION OF THE MEDICAL BOARD

14. (*Continued*).

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit ?
(If the answer is "yes" state nature of treatment required and probable duration.)

No.

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

17. Recommendations Discharge as medically unfit.

W. Shelston Capt
*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 and either "satisfied" or "not satisfied" struck out.)

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

Rodney E. Anderson
*Signature of soldier examinea.*

## OPINION OF THE MEDICAL BOARD

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

Yes,

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

20. It is certified that the soldier
(a) ~~Does require treatment~~ (Give the nature of the condition and of the treatment required and its probable duration).

(b) Does not require treatment.
(c) Should pass under his own control.
(d) ~~Should not pass under his own control~~
(Strike out condition not applicable).

## OPINION OF THE MEDICAL BOARD—(*Continued*).

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

Discharge as medically unfit.

Before signing the President of the Medical Board will read the certificate signed by the soldier, to the soldier, and if no change is indicated will initial the certificate.

E Struthers Capt - *President.*

PLACE... Winnipeg, Man,

DATE... June 18th, 1918.

W J Stulstaberg Capt

} Members.

APPROVED BY

H. Mehaffey Col.

*Assistant Director of Medical Services.*

DATE... JUN 20 1918

APPROVED BY

*Director-General of Medical Services.*

DATE...

## 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.

*President.*

PLACE.....

DATE.....

} Members.

# FORM OF WILL.

73823

I, Fordyce John Anderson (Name in full)

Regimental Number 874339. serving in 184th Batt

of the Canadian Expeditionary Force, do hereby revoke all former Wills by me made and declare this to be my last Will.

I bequeath all my real estate unto

None

Name and Address of person or persons to whom it is to go.

absolutely, and my personal estate I bequeath to

Jennie Maria Anderson
Plumas
Manitoba

Name and Address of person or persons to receive personal estate* *(See note).*

**IMPORTANT NOTE**
**This must be Signed and Dated by THE SOLDIER HIMSELF.**

this 20th day of September A. D. 191 6

Fordyce J. Anderson Signature of Soldier.

*N.B.—Personal estate includes pay, effects, money in bank, insurance policy, in fact everything except real estate.

Signed and acknowledged by the Testator as and for his last Will in the presence of us both present at the same time, who in his presence, at his request, and in the presence of each other have hereunto subscribed our names as Witnesses.

**THE TWO WITNESSES MUST SIGN HERE**

Signature of First Witness John Wesley Kew

Address of Witness Plumas Man.

Occupation of Witness Farming

Signature of Second Witness Sgt. R. R. Millar

Address of Witness 44 Hargrave St. Winnipeg

Occupation of Witness Gordon Mitchell Hardware Co (Winnipeg)

A. F. W. 82
00M-5-16.
1772-39-983.

13595/270

# POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

374-F-2.

Name Anderson, Fordice James
(Surname, Christian Name)

Regimental Number 874339 Rank Pte. Address (in full) Plumas, Man.

Unit 10th Bn.

Original Unit

District where paid M.D.10.

Date of Discharge 8-7-18.

P. D. P. Filing Number 14-263-10.

Mrs. M. Anderson

Rates:—Regimental pay $ 1.00 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 | | | SECOND PAYMENT | | | FINAL PAYMENT | | | Balance Over-payments to be Recovered | Total Amount Paid |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | Cheque No. A | Date | Amount 30 days | Cheque No. B | Date | Amount 30 days | Cheque No. C | Date | Amount 31 days | | |
| 175 10 | | | | 4116 | 30-7-18 | 58 00 | 4119 | 30-8-18 | 59 10 | 58 00 | 117 10 |
| ~~1247 1/2d G/15737 3 3/19 7000~~ | | | | | | | | | | | |
| ~~1247 1/2d G15738 3 3/19 3000~~ | | | | | | | | | | | |
| ~~1128 Awd G42105 15/3/19 70 00~~ | | | | | | | | | | | |
| ~~1887a 2nd G403028 1/4/19 30.00~~ | | | | | | | | | | | |

M. F. W. 127.
60M—6 17.
1772 39-1140.

Remarks: Advance payment by Casualty Unit# 10.

Dec'n No 135705270 W. S. G. File No 0374 F-4

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

S. A. ..... months at $ 30. per mo. $ ..... $ 500.00

Less P. D. P. Credited $ 150.00

$ 350.00

Less further debit balance $ .....

Net due paid as below 350.00

TO SOLDIER TO DEPENDENT

| O | Ag. No. | Ch. No | Amount | Ag. No. | Ch No | Amount | |
|---|---|---|---|---|---|---|---|
| 1 | 1247 | 15137 | 70 00 | 1247 | 15739 | 30 00 | 3-3-19 15-3-19 |
| 2 | 11788 | 422105 | 70 00 | 11788 | 403078 | 30 00 | 1-4-19 |
| 3 | 9698 | 422360 | 34.90 | 9698 | 438634 | 30 00 | 19-4-19 10.4.19. |
| 4 | | | | 911C | 458821 | 30 00 | 12-5-19 |
| 5 | | | | | 485713 | 30 00 | |
| 6 | | | | | | | |
| | Total | | | Total | | | |

GEN'L AUDITOR
Posting checked by
Macdonald
Date 19/7/19

Mrs M. anderson.

Riding Mountain

Man.

L. L. Job 4503.—M. & D. 6832.

ASSIGNED PAY. MILITIA AND DEFENCE

M. F. W. 11.
50m.—6-16.
H. Q. 1772-39-818.

# SEPARATION ALLOWANCE

Name Mrs. Duncan Anderson,
Address Plumas, Man..

Relation to Soldier wife, child or mother } $20.00 Apl. 1917.

Name of Soldier Anderson F. J.
Regtl. No. 874339
Rank Pte..
Corps 184 Bn..
To what Corps belonging when called out }

2 M 22/3/17 a.P.D. 20/4/17.

## 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. | | | | |
| Dec. | | | | |
| Jan. | 1916 | | | |
| Feb. | | | | |
| March | | | | |

Consolidated Card

MILITIA AND DEFENCE

# ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a.
50m.—7-16
1772—39—819.

Sheet No. 2. Miss Duncan Anderson
(Assignee)

Name of Soldier Anderson L. D.
Pte. 874339. 184th Bn

L. L. Job 5470—Req. 6888.

$2000 Apr. 1917.

| Month. | Year. | Cheque No. | Amt. | Remarks. |
|---|---|---|---|---|
| April | 1916 | | | |
| May | | | | |
| June | | | | |
| July | | | | |
| Aug. | | | | |
| Sept. | | | | |
| Oct. | | | | |
| Nov. | | | | |
| Dec. | | | | |
| Jan. | 1917 | | | |
| Feb. | | | | |
| March | | | | |
| April | | | | |
| May | | B 7951 | 40 | 40 Mr |
| June | | B 17990. | 20 | 20. C |
| July | | 19740 | 20 | Cu |
| Aug. | | L 26837 | 20 | 03 |
| Sept. | | K 33548 | 20 - | Cu 120. ✓ |
| Oct. | | | | |
| Nov. | | | | |
| Dec. | | | | |
| Jan. | 1918 | | | |
| Feb. | | | | |
| March | | | | |
| April | | | | |
| May | | | | |
| June | | | | |
| July | | | | |

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. | | | | |

R—122
8,401—50,000—21-10-16.

A.G.R. Rank Name ANDERSON, Fordyce John Reg'l No. 874339

Unit 184th Bn. If in perm. Corps, What Unit? Married or Single Single.

Place and Date of Enlistment Winnipeg, 1st March, 1916. Place of Birth Drayton, N.D. USA.

Name and Address, Next-of-Kin Duncan Anderson,
Plumas, Man. Relationship Father.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Relationship

Discharge, Date and Place Reason Character

N/E A.B No 8861
File R.L.
Category ORCan

CHECKED A.F.B. 103 - 8 DEC.1916

| 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. | | 11.11.16 | Empress of Britain |
| 23.11.16 | 11th Bn. | Taken on strength. | Shorncliffe | 12.11.16 | P.R.O. 274-280. |
| 30-11-16 | " | S.O.S to 8th Bn. O.seas | " | 30-11-16 | " " " 286 |
| 7,12,16 | 8th. Bn, | Taken on Strength, | Field. | 1.12.16 | Pt, 2, O-65 |
| 10.5.17 | " | to 22 General Hosp: | Dannes Camiers | 1.5.17 | C.L. 8657. P.U.O. |
| 23.5.17 | " | 1st Western Genl: Hosp. | Liverpool | 8.5.17 | " B367. Rheumatism |
| 28.5.17 | M.R. Dep. | Taken on Strength. | Shrcliffe | 8.5.17 | Pt II O.80 (8th B. 72 d/29.5.17) |
| 7.7.17 | 8th B. | Can Red X Spec: Hosp. | Buxton | 1.7.17 | C.L. 8402. myalgia |
| 4.9.17 | M.R. Dep. | On Com: 1st C.C.D.T. Sandling. | Shrcliffe | 1.9.17 | Pt II 179. (1st C.C.D. 176. d/11.9.17. |
| 8.9.17. | 8th B. | Decid'd C. Red X Spec Hosp. | Buxton. | 1.9.17 | C.L. 86. |
| 29.9.17. | M.R. Dep. | Leave On Com 1st C.C.D. to Com: C. Mil. School of Shooting & Bombing | Shrcliffe | 25.9.17 | Pt II 204. (1st C.C.D 190 d/26.9.17) |

874339. Anderson F. J.

| 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. |
|---|---|---|---|---|---|
| 13.10.17. | M.R. Dep. | Leave on Conv: 1 Sp Surgery | Scheff. Pk | 12.10.17 | Pt II O 218. |
| 4.11.17 | " | On conv: 1st C.D.D. Burdon. | " | 3.11.17 | " 240. |
| 25.11.17 | " | Leave on Conv. 1st C.D.D | " | 17.11.17 | " 261 |
| | | R.O. 1 to Canada. | | | (Cis by A.G.) |
| | D's Depot. | Convalescent Home | M D No 10 Winnipeg | 30/11/17 | M R 415. |

Army Form B. 103. Regimental Number 874339

# Casualty Form—Active Service.

Regiment or Corps .....

Rank Gnr Surname Anderson Christian Name Fordyce John.

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

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

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

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

or Corps Trade and Rate .....

Occupation ..... Signature of Officer.

| Report: Date | Report: From whom received | Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case. | Place of Casualty | Date of Casualty | Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents. |
|---|---|---|---|---|---|
| | | Embarked ... | | | |
| | | Disembarked... | | | |
| 29.9.17 | | Leave to be attached despatch to Manitoba Regimental Depot | Hastings | 12/10/17 | Pte DO 3 Canadian School of Stenography |
| 14.10.17 | M R D. | Com 1st C C D | Hastings | 1.9.17 | Pte DO 179 |
| " | " | Cease Com 1st C C D | " | | |
| | | & Com Sch of Stenog. | " | 25.9.17 | " " 204 |
| " | " | Cease Com Sch of Sten & Dft to Depot Coy | " | | |
| | | | Lebgate | 12.10.17 | — 218 |
| 4-11-17 | " | Command to 1 C D D | Buxton | 3-11-17 | " 240 |

Lieut. & Adjutant
Manitoba Regimental Depot.

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

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

W. 11814—M1188 1000m 1/17 (27227) S P & Co, Ltd. Forms B./103/4 E./354. [P.T.O.

| Report | | Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case. | Place of Casualty | Date of Casualty | Remarks Taken from Army Form B.213, Army Form A.36, or other official documents. |
|---|---|---|---|---|---|
| Date | From whom received | | | | |
| 5 NOV 1917 | | TAKEN ON STRENGTH C.D.D, BUXTON Pt. 11 ORDER No. ~~262~~ | | | R Wm Lt Lieut.-Col. Commanding Canadian Discharge Depôt. |
| 17 NOV 1917 | | EMBARKED FOR CANADA FROM LIVERPOOL | | | |
| JUN 3 1918. | | Transferred to 10th Batt. can. Gar. ~~Batt~~ | | | E Sharpe Major Commanding Canadian Discharge Depôt. |
| | | Discharged & S.O.S. as medically unfit. | Winnipeg. | 8-7-18. | B.O.#38, 8-7-18, Part two. |
| | | ---------- 10th. Battn. C.G.R. | | | F Cuj Lt: & Adjutant. |

RECEIVED Winnipeg. NO. 10 DISTRICT DEPOT.

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

M. F. W. 54. (A. F. B. 103.)
250M.—1-16.
H. Q. 1772-39-929.

# Casualty Form—Active Service.

Unit, Regiment or Corps 184th. OVERSEAS BATTALION

Regimental No. 874339 Rank Pte Name FORDYCE JOHN ANDERSON

C. E. F.

Enlisted (a) Mar 1/16 Terms of Service (a) 6 mos. after end of war Service reckons from (a) Mar 1/16

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) (Farmer)

| Report Date | Report From whom received | Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case. | Place | Date | Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents. |
|---|---|---|---|---|---|
| | | Embarked | Canada | 31.10.16 | H.M.T. Empress |
| | | Dis " | Liverpool | 11.11.16 | of Britain. |
| 13.11.16 | O.C. 184th | Transferred to IIth Reserve Battalion. | Shorncliffe | 12.11.16 | Pt II. Bn.O. 228. |

W. R. Shupe ..... O.C
Commdg 184th Battalion.

22-11-16 O.C. 11th Taken on Strength ..... 11th Batt. Shorncliffe 12-11-16 Pt. II. B.O. 274 v. 280.

(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.

CERTIFIED CORRECT.
17 DEC. 1916
CAN. RECORDS, LONDON

| 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 | | | | |
| 30-11-16 | O.C. 11th | Trans. to 8th Battn | Overseas | 30-11-16 | Pt. II. Rn. O. 286 Capt. & Adjt. 11th Res. Battn. |
| 1.12.16 | C.B.D. | ARRIVED C.B.D. | FRANCE | | N.R.D. |
| 2.12.16 | | LEFT C.B.D. | Rouen | | PART II ORDERS No 65 D 7.12.16 |
| 9.12.16 | | ARRIVED 8 | | 5.12.16 | N.R.D 1.12.16 |
| 8.5.17 | 22 Gen. | p.u.o. Invalided sick Posted to Manitoba Regt. Depot. Homeless 08.11 | St. Andrew | 8.5.17 | B 213 D 9.12.16 n 3083. pt II o 80 92 d. 29.5.17. |

Chas. B. Maxwell
Lieutenant
for Acting Adjt.

| | | | | | | |
|---|---|---|---|---|---|---|
| 28.6.17. | M.R. Dep. | Taken on strength | Shiffe. | 8.5.17. | pt II O. 80. | d. 9.17. |

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

26-9-17. Discharged from 1st C.C.D. E. Sandling to Sch of Sig. Bn. Part II D.O. No. 199 25-9-17

A. Hetherington Lieut
for Adjutant,
1st Canadian Command Depôt,

C.A.D.C.5009-10M.
349 30-8-17.

874339
L. Anderson 7 J

# DENTAL CERTIFICATE.

The following Certificates will be attached to the Medical History Sheets of all Other Ranks being returned to Canada for disposal.

In R W

| Date of Examination. | Present Dental Condition. | In case of loss or decay of teeth. Is the loss due to wounds, injury or disease directly attributed to Active Service? | Has he ever declined Dental Treatment. | Recommendation. |
|---|---|---|---|---|
| 8.11.17. | Sat. | | | Edwardsburgh Cardinal |

874 339 Pte. Aaronson. F.



## EXTRACTS FROM ACTIVE SERVICE PAY BOOKS.

| Date of Payment. | No. of Acq. Roll | AMOUNT. Francs | £ | s | d | Place of Payment. | Name of Paymaster | Remarks. |
|---|---|---|---|---|---|---|---|---|
| 15.7.17 | 834 | X | 1 | | 4 87 | Etaples | | ✓ |
| 30.7.17 | 4158 | X | 1 | 5 | 6 01 | " | | ✓ |
| 15.9.17 | 1356 | X | 2 | | 9 73 | Etaples | | |
| 28.9.17 | 8 | | 1 | 10 | 7 35 | " | | 22/4/18 |
| 10.10.17 | (508) | | 2 | | 9 73 | " | | 22/2/18 |
| 15.10.17 | 19 | | 10 | 2 | 43 | Abbeville Cash Office | | 22/2/18 |
| 31.10.17 | 268 | | 10 | 2 | 43 | Etaples | | Chy 22/2/18 |
| | | | 42 | 8 | | | | |

x Charged wife's

(2 49 / 2 15)

FORM D.M.S. 1300.
8137—50m—28/2/17.

| Surname | Christian Name or Names | Reg. No. |
|---|---|---|
| Anderson | F.J. | 874339 |

Rank: Pte  Unit: 8th Bn  Co.  Troop  Batty.

Hospital: 22 Gen Dannes Camiers  Date of Admission: 1-5-17

Transferred
1 W. G. Lpool  Hosp. 8.5.17.
Buxton Can Special  Hosp. 1.7.17.
Hosp.

Diagnosis: P.U.O.

(1) Later Diagnosis (if changed): Rheumatism Gt. Back & Legs

(2)

(3)

Additional Diagnosis: if more than one state present

DISPOSITION

C.L. 10-5-17, A657
23.5.17 B367.
7.7.17. B402
10.9.17. B6(2) Dis 1.9.17.

REMARKS

Date

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

# EPITOME OF HOSPITAL TREATMENT.

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

REGT'L. No. 874339

NAME Anderson Fordyce John.

H. Q. FILE No. 649

RANK AND CORPS Pte. 8th Bn

FOLLOWS No.

FOLLOWS

| CABLE NO. | CABLE DATE | NATURE OF CASUALTY |
|---|---|---|
| Auth Letter - 7118 G.O.C. M.D. # 10. | | Sailed from Liverpool per SS Saxonia on 17-11-17 (Dirp of A.G.) M.D.10 Adm. Man Mil Conv Home 4-1-18. |

L. L. 18950—M. & D. 7789

M. F. W. 42—30M.—4-17.
H. Q. 1772-39-893.

| LIST NO. | HOSPITAL | DATE OF ADMISSION | REMARKS |
|---|---|---|---|
| A657 | #22 Gen. Manned Camiers | 1-5-17 | P.U.O. Slt. |
| B367 | 1st. West. Gen. Fazakerley. Liverpool. | 8-5-17 | Rheumatism. |
| B402 | Can. Red Cross. Spec. Buxton, Derbyshire | 1-7-17 | Sciatica back & legs. (many) |
| B6 (R) | Hirsch. | 1-9-17 | Sciatica back & legs |
| 322. | M. H 6 b. Winnipeg | 15-12-17. | Posted as O.P. Rec Depot |

No. 874339 RANK Pte NAME Anderson T. J

T.O.S. 1-3-16
D.O. 24 of 3-16 UNIT 184th Battalion C. E. T.

M. D. 10

| PAID FROM | PAID TO | SIG. OR REC'T | PROMOTIONS, TRANSFERS, DISCHARGES, ETC. | |
|---|---|---|---|---|
| | | | PARTICULARS | AUTHORITY |
| 1916 | 1916 | | | |
| Mar 1 | Mar 31 | v | | |
| apr. | | v | | |
| May | | m. | | |
| June | | v | | |
| July | | m. | a. A. L. 26-7-16 | D. O. 140, 27-7-16. |
| Aug. | | m. | | |
| Sept | | v | | |
| Oct | | v | | |

874339 Pte Anderson, Fordyce J. A.P. #20[illegible]

| 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 |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Oct. 1 | Bal. B/F | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Oct. 1-31 | 31 days Pte Pay | | 37 | 10 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Nov 1-2 | 6 " " " | | 6 | 60 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Instalment Dep Pay 30/9/17 | | 4 | 12 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | 10 | 72 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | |

REMARKS. Manc Mil Conv Home 2-3-18 Hyalgia 9-3-18 To St Boniface 883

" St Boniface 9-3-18 Hyalgia 25-3-18 Duty 884

" Manc Mil Conv Home 25-3-18 " " 13-5-18 Cat C III Duty 885

882

REG. NO. 84339 NAME (SURNAME FIRST) Anderson John F 28

RANK Pte CORPS 8th Bttn

AGE 29 SERVICE

NAME OF HOSPITAL General PLACE Winnipeg

DATE OF ADMISSION 4-2-18

DISEASE Myalgias & Trench mouth

DISCHARGE 27-3-18

OPERATION

DISCHARGED TO DUTY Yes

TRANSFERRED TO

DISCHARGED BY MEDICAL BOARD

100M—9-17—H.Q. 1211-8-30.

Form R. 149.
7106—250m—7/2/17.

*Name* ANDERSON, Fordyce John. *Rank* Pte. *Reg. No.* 874339.

*Unit* 8th Battalion.

*Next of Kin* Canada.

| Date 1917. | Movement | Place | Casualty | List No. | Notified N/K O. | W.O. List |
|---|---|---|---|---|---|---|
| 1-5. | No. 22. Gen. Hosp. | Camiers. | P.U.O. | A.657. | | |
| 8-5 | to No. Gen. Hosp. | Liverpool | Rheumatism | B.367 | | |
| 1-7 | Can. Red X. Sple. | Hosp. Buxton | Myalgia Back & Legs | B.402 | | 7002. |
| 1-9 | Discharged | | | B.O. | | |

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

Date of Enlistment

MILITIA AND DEFENCE

# Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

Apr. 1 1917.

RATE OF SEPARATION ALLOWANCE

| | | | |
|---|---|---|---|
| | | | |

RATE OF ASSIGNMENT

| | | | |
|---|---|---|---|
| 20- | | | |

1 1 a 21 207

## PARTICULARS OF SEPARATION ALLOWANCE

No. 874339

Rank Pte. Promoted Reverted Discharge

Soldier's Name F. J. Anderson

Battalion 154th Bn.

Beneficiary

Relationship

Address

## PARTICULARS OF ASSIGNMENT

Name Mrs Duncan Anderson

Address Plumas, Man.

Change of Address

1

2

3

4

| Date | Cheque No. | Amount S/A | Amount A/P | Total | | REMARKS |
|---|---|---|---|---|---|---|
| 30/9/17 | | | 120 ✓ | 120 | | |
| Oct | C 51196 | | 20 | 20 | | |
| Nov | C 52435 | | 20 | 20 | T | |
| Dec | F 54761 | | 20 | 20 | M | |
| Jan 18 | A 54049 | | 20 | 20 | B | A.54049 cancelled. |

A/c Closed 31-12-17.

Rat'd per Saxonia

A/P #180. Date 17-11-17 F. X 16-12-17

Clerk J. Meredith a/p.

M. F. W. 128
400M.—6-17—1772-39-1141
L. L. 22320—M. & D. 7693.

Date of Enlistment

MILITIA AND DEFENCE

# Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

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. 1593.

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.

This space to be left blank for the Chelsea Number.

GAMMA 25
NOV 30 1917

Army Form B. 268.

Com-
1503.

# Proceedings on Discharge.

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

No. 874339 Army Rank Pte

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

Corps M.R.D 184th

Battalion, Battery, Company, Depôt, &c.
(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)

Date of discharge

Place of discharge

1. *Description at the time of discharge.*

Age 27 years months
Height 6 feet — inches
Chest measurement { girth when fully expanded ins. / range of expansion ins.
Complexion
Eyes
Hair
Trade Farmer
Intended place of residence (To be given as fully as practicable) Plumas 10 Man.

Descriptive marks.

Scar on left forearm.

Returned to Canada,- Authority Combatant Board of Officers hold at Shorncliffe Dated 20/10/ 1917.
Category B.3.

To be filled in on the soldier quitting the Colours.

3. Military character :—

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

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

Initials of Commanding Officer.

Army Form B. 2088 has been issued to*

* Strike out if not applicable.

D. D. & L., London, E.C.
A4502 Wt. W1717/M291 500,000 2/16 Sch. 39 Forms B. 268 40

[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 — France 6 mos.

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)_____ _____

(Date)_____ *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*)_____ _____(*Signature of Soldier.*)

(*Date*)_____ _____(*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_____(the date to which the record of service is completed)_____years_____days.

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

Total ..._____ „ _____ „

11. *Confirmation of discharge.*

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

(Place)_____

*Signature*_____

(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.)

_____

# List of Discharge Documents.

| | | | |
|---|---|---|---|
| Reg. Conduct Sheet, | Militia form B. 263. | Attestation Paper, | Militia Form B. 233. |
| Squadron / Battery / Company } Conduct Sheet, | " B. 263a. | Proceedings on Discharge | " B. 218. |
| Copies of Convictions, by C. P. | in MS. | | |
| Med. Hist. Sheet, | Militia Form B. 313 | | |
| Medical Report for Invalid* | " B. 227. | | |
| Statement of Man's Account on Transfer and Last Pay Certificate, | " D. 877. | | |

*Only if discharged "Medically unfit."

In the case of recruits who are rejected on final approval, the discharge documents will consist of

(a) Proceedings on Discharge.

(b) Attestation.

(c) Medical History Sheet (in the event of such having been prepared.)

*N. B.—In the case of a man discharged by purchase, the date and number of Deposit Receipt with amount of same is to be noted hereon.*

715 & R

DEPT. OF MILITIA & DEFENCE
JUL 19 1918
H.Q. CANADA

649-A-4058.

This space to be for numbers.

15023

# Proceedings on Discharge.

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

No. 874339.

Rank Private.

Name Fordyce John Anderson.
Note—The name must agree strictly with that on enlistment unless changed subsequently by authority.

Corps (Squadron, Battery or Company) 10th.Battn.C.G.R.(184th.Battn).

Date of Discharge 8th.July 1918.

Place of Discharge Winnipeg,Man:

1. DESCRIPTION AT THE TIME OF DISCHARGE.

| | | Descriptive Marks |
|---|---|---|
| Age | 29 years ... months. | |
| Height | 5 feet 11¾ inches. | |
| Complexion | Fair. | |
| Eyes | Blue. | |
| Hair | Brown. | |
| Trade | Farmer. | Scar on left arm. |
| Intended place of residence (To be given as fully as practicable.) | Illmas Man: | |

2. The above-named man is discharged in consequence of being medically unfit.
R.O.#237,dated 22-2-18.

Contingent Order #154,July 3rd.para:2990.

N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.

To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.

3. Conduct and character while in the service have been, according to the records, etc.

Very Good

N. B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldier and the Officer Commanding his Squadron, Battery or Company:

4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)

Farmer

Reconsg 13-2-18

M. F. B. 218.
100m.—6-16.
H. Q. 1772-39-113

wty compo.
7/2/19.
A.B.

(OVER)

5. He is in possession of the following number of G. C. Badges:

-------- N I L. --------

No reference to G. C. Badges is to be made on either the discharge or character certificate.

6. Medals and Decorations..... NIL.

To be copied by the Commanding Officer on to the parchment Discharge Certificate.

7. His account is correctly balanced, and signed by the Officer Commanding his Company. (*Squadron or Battery*), and I have impartially enquired into all matters brought before me in accordance with Regulations.

(Place) Winnipeg, Man: ..... Lt-Col.

(Date) 8th. July 1918. ..... *Commanding* 10th. Battn. C.G.R.

8. **Certificate to be signed by the Soldier on Discharge**

I hereby acknowledge that I received all my Pay, Allowances and Clothing, and all just demands, up to the present date, subject to the reservations of the claims noted on the third page.

(Place) Winnipeg, Man: Fordyce J. Anderson *(Signature of Soldier.)*

(Date) 8th. July 1918. Harold C. Richard *(Signature of Witness.)*

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

9. **Additional Certificate in the case of a Soldier who takes his discharge on his own request.**

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

..... *(Signature of Soldier.)*

10. **Statement of Service.**

Service toward Engagement to.....(the date to which the Record of Service is completed)..... 2 years 129 days.

Total..... 2 years 129 days.

11. **Confirmation of Discharge.**

The discharge of the above-named man is hereby confirmed.

(Place) Winnipeg, Man: (Signature) Lt-Col.

(Date) 8th. July 1918. O.C. 10th. Btn. C.G.R.

**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.)

---------- N I L. ----------

Fordyce J. Anderson.

(OVER)

Q-292

PD

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

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

PROCEEDINGS of a * Medical Board

assembled at Winnipeg, Man.,

on the 23rd day of March 1918

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

for the purpose of examining into and reporting on the condition of #874339 Pte John Fordyce Anderson, (184th) 8th Battn. C.E.F. Man. Mil. Con. Hosp:

PRESIDENT.

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

MEMBERS.

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

Lieut. M. S. Lougheed, A.M.C.

RECEIVED.
MAR 28 1918
A. D. M. S. M. D.-10

The Board having assembled pursuant to order, proceed to examine #874339 Pte John Fordyce Anderson, (184th) 8th Battn. C. E.F. and find:-

He is a patient in St. Boniface Hosp: suffering from indefinite pain down left side, most marked in left shoulder this pain is not severe, but of an aching character. Had tonsillectomy done on 16th inst and is still to have an operation on nose.

We believe his disability to be three fifths for a minimum period of two months. We recommend further treatment.

To Be Reboarded May 23-18

APPROVED
APR 1 - 1918
Major, A.M.C.
A.D.M.S., M.D.No. 10
WINNIPEG, MAN.

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

M. F. B. 303.
150M.—1-17.
H. Q. 1772—39—133.

P. 559.

MARRIED OR SINGLE: Married Single

PLACE OF BIRTH: Draydon. N. Dak U. S. a.

NAME AND ADDRESS OF NEXT OF KIN: Duncan Anderson Plumas. Man.

RELATIONSHIP OF NEXT OF KIN: Father

NAME AND ADDRESS OF NEXT OF KIN:

RELATIONSHIP OF NEXT OF KIN:

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

**CASUALTIES, PROMOTIONS, &c.**

| PARTICULARS | EFFECTIVE DATE | AUTHORITY |
|---|---|---|
| | | |

**ADMISSIONS TO HOSPITAL, &c.**

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

REG'L. No. 874339. RANK Pt. NAME Anderson. Jordyce. O V

IF IN PERMT. CORPS WHAT UNIT } UNIT 184th Bn. TRANSFERRED TO 11th Res DATE 7-11-16 AUTHORITY P.C. 2350

PERMANENT FORCE ALLOWANCES TRANSFERRED TO 8th Bn DATE 1.1.17 AUTHORITY 30 M.C. Gaz 1/6

PLACE OF ATTESTATION Winnipeg. Man TRANSFERRED TO Non Eff C DATE AUTHORITY

DATE OF ATTESTATION 1/3/16 TRANSFERRED TO DATE AUTHORITY

JAN 24 1918 CANADIAN CONTINGENTS

ASSIGNED PAY MONTHLY $20.00 DATE EFFECTIVE April 1st 1917. A2m Form 22/3/17.

PAYABLE TO Mrs Duncan Anderson, Plumas, Manitoba Can. RELATIONSHIP Mother

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO B. RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) Stopped EFFECTIVE 1-12-17 REASON Ass. to Canada

DISCHARGE DATE AND PLACE Canada 6/11/17. REASON AND AUTHORITY Comb. Bd. 28/10/17

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE) Entered on N.E. Card Checked by W. J. Walter

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

| DATE 1916 | PAY No. OF DAYS | PAY RATE | PAY AMOUNT $ | PAY AMOUNT c. | FIELD ALLOWANCE No. OF DAYS | FIELD ALLOWANCE RATE | FIELD ALLOWANCE AMOUNT $ | FIELD ALLOWANCE AMOUNT c. | WORKING OR SPECIAL PAY No. OF DAYS | WORKING OR SPECIAL PAY RATE | WORKING OR SPECIAL PAY AMOUNT $ | WORKING OR SPECIAL PAY AMOUNT c. | ASSIGNED PAY CREDITS | OTHER CREDITS | TOTAL CREDITS | ACQUITTANCE ROLLS 1 No | 1 Date | 2 No. | 2 Date | 3 No. | 3 Date | 4 No. | 4 Date | CASH PAYMENTS 1 | 2 | 3 | 4 | ASSIGNED PAY | OTHER CHARGES | TOTAL DEBITS | BALANCE CREDIT | BALANCE DEBIT | PAY WITHHELD OR DEFERRED | PAY AVAILABLE FOR ISSUE | c | REMARKS |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Nov 1 | | | | | | | | | | | | | | 3 10 | 3 10 | | | | | | | | | Balance from Canada | | | | | | | 3 10 ✓ | | | | | |
| 1-30 | 30 | 1.00 | 30 | | 30 | 10 | 3 | | | | | | | | 33 | | | | | | | | | | | | | | | | 36 10 | | 15 | | | 1 Drops Hours 1/12/17 |
| Dec 1-31 | 31 | | 31 | | 31 | | 3 10 | | | | | | | | 34 10 | 2618 15/11 2818 30/11 | | | | | | | | 9 73 ✓ 4 87 ✓ | | | | | 36 14 96 | | 55 24 ✓ | | 30 | | | Cramps 1/18 Pen Off 1/19. B Ord 1/19 |
| | | | 6 10 | | | | 6 10 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Jan 1-31 | 31 | 1.10 | 34 10 | | | | | | | | | | | | 34 10 | 1969 24/12 1917 19/12 | 2049 10/1 2009 5/1 | | | | | | | 8 72 ✓ 5 23 ✓ | 3 49 ✓ 2 61 ✓ | | | | | 20 05 | 69 29 | | 45 | | | |
| Feb 1-28 | 28 | ✓ | 30 80 | | | | | | | | | | | | 30 80 | | | | | | | | | 2 62 ✓ | | | | | | | 100 09 | | 60 | | | |
| | | | 135 10 | | | | | | | | | | | | | | | 2206 | 20/2 | | | | | | | | | | | | | | | | | |
| Mar | 31 | | 34 10 | | | | | | | | | | | | 34 10 | | | 2114 | 10/2 | | | | | 2 61 ✓ | | | | | 10 45 | 123 74 | | 75 | | | |
| Apl 1/30 | 30 | ✓ | 33 | | | | | | | | | | | | 33 | | | 2307 | 13/3 | 2264 | 3/3 | | | 2 61 ✓ | 2 61 ✓ | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | 20 | | 20 | 136 74 | | 9 | | | |
| May | 31 | ✓ | 34 10 | | | | | | | | | | | | 34 10 | 107 20/12 | | | | | | | | 5 23 ✓ | | | | | 20 | | 25 23 | 145 61 | | | | | |
| June | 30 | ✓ | 33 | | | | | | | | | | | | 33 | | | | | | | | | | | | | | 20 | | 20 | 158 61 | | | | | |
| July | 31 | | 34 10 | | | | | | | | | | | | 34 10 | | | | | | | | | | | | | | 20 | | 20 | 172 71 | | 75 | 97 71 | | |
| Aug | 31 | | 34 10 | | | | | | | | | | | | 34 10 | | | | | | | | | | | | | | 20 | | 20 | 186 81 | | 75 | 111 81 | | |
| Sept | 30 | | 33 00 | | | | | | | | | | | | 33 00 | | | | | | | | | | | | | | 20 | | 20 | 199 81 | | 75 | 199 81 | | |
| | | | 367 40 | | | | | | | | | | | 3 10 | 370 50 | | | | | | | | | 41 62 | 8 71 | | | | 120 | 36 170 69 | | | | | | |

Sailing List #50 Berwick d/17/11/17 Liv 11217 L1 End. 14064