REGIMENTAL DOCUMENTS

NAME ANDERSON. Frederick REGT. No. 430263 UNIT 111th Battn H. Q. FILE No. 6313

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
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2	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					CATEGORY
1	~~TRAINING HISTORY SHEET (M.F.W. 113)~~ Record sheet					
2	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
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2	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
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W. 2589
25M.—1-23
1772-39-1377

"B" ORIGINAL

ATTESTATION PAPER.

No. 730263

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your surname?	Anderson
1a. What are your Christian names?	Fred
1b. What is your present address?	R.R. #4 Bright Ont
2. In what Town, Township or Parish, and in what Country were you born?	Stanstead Kent County England
3. What is the name of your next-of-kin?	Burt Anderson
4. What is the address of your next-of-kin?	Washington Ont.
4a. What is the relationship of your next-of-kin?	Brother
5. What is the date of your birth?	Dec 19th 1885
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? If so, state particulars of former service.	Yes: Royal Canadian Regt.
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, Fred 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.

S for distinction only.

Fred S. Anderson (Signature of Recruit)

Date Dec 22nd 1915 J. P. Gourlay Lieut (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Fred 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.

Fred S. Anderson (Signature of Recruit)

Date Dec 22nd 1915 J. P. Gourlay Lieut (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 New Hamburg this 24th day of Dec 1915.

R. T. Rumsey (Signature of Justice)

M. F. W. 23
200 M—9-15
H. Q. 1772-39-841

Description of Fred Anderson on Enlistment.

Apparent Age 30 years ..... months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height ..... 5 ft. 4 ins.

Chest measurement.
- Girth when fully expanded ..... 37 ins.
- Range of expansion .. 3 ins.

Complexion Medium

Eyes Blues

Hair Dark Brown

Religious denominations
- Church of England X
- 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.)

nil

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 declares that he is not subject to fits of any description.

I consider him* Fit for the **Canadian Over-Seas Expeditionary Force.**

Date Dec 23 1915. .....

Place New Hamburg ..... G. Dawson Anderson
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.

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

..... (Signature of Officer)
Lieut.-Colonel,
O.C. 111th (South Waterloo) O. S. Battalion, C. E. F.

Date Dec 23rd 1915

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 750263 (Rank) Private

Name (in full) "Anderson" Frederick enlisted in

the 111th Battalion C.E.F.

CANADIAN EXPEDITIONARY FORCE at New Hamburg, Ont. on the Twenty-third

day of December 19 15.

HE served in France (with R.C.R's.)

and is now discharged from the service by reason of Being Medically Unfit due to

service, although fit for employment in civil life. Category "E".

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

Age 22

Height 5' 5"

Complexion Ruddy

Eyes Blue

Hair Black

Marks or Scars

S. I. round Left Foot

Signature of Soldier

Issuing Officer

Lieut.

Rank

Date of Discharge MAY 29 1918

O.C. Discharge Section, No. 1 D.D.

Appointment

Signed at LONDON, ONT. this Twenty-ninth day of May 19 18.

in Military District No. ONE

File Reference No. 1 D 30-1-240
1 D.D. 10-4-19

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

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

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

No. 730263 (Rank) Private Name "Anderson" Frederick

Unit 111th Battalion C.O.M.F.

Address on Discharge R.R. No. 4, Bright, Ontario.

Character and Conduct Very Good

Former Occupation FARMER

Special Qualifications of Value in Civil Life FARMER

Medals and Decorations NIL

Remarks Not entitled to wear gold wound stripe, S.I. wound (accidental)

Signed at LONDON, ONT. this Twenty-ninth day of May 19 18.

Name of Officer

Lieut.
Rank

O. C. Discharge Section, No. 1 D.D.
Appointment

CANADIAN CONTINGENT EXPEDITIONARY FORCE

30-A-240

LAST PAY CERTIFICATE

TRIPLICATE

District Depot No. 1

Casualty Co.

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

Regimental No. 730263 Rank pte. Name ANDERSON, Fred

Corps 111th Bn. who was* discharged

On 29-5-18 191...., to .....

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 24-5-18 191....,
to 29-5-18 191...., the inclusive date of transfer or discharge.

Dr.	$	c.	Cr.	$	c.
Bal. Dr. from prev. month			Bal. Cr. from prev. month 8/9	22.	
Advances by Cheques } No			Regt'l Pay 6 days at $ 1. c	6.	
Advances by Cheques } No			Field Allow. 6 days at $ .10 c	.60	
Assigned Pay and Sep'n Allce. No			Separation Allowances* (Monthly)		
Other charges			Other Allowances* clothing	8.	
Payment on transfer or discharge No 1048	36.	60	Other Credits*		
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)		
Total	36.	60	Total	36.	60

*Give particulars.

A monthly stoppage of $ 20 (†) has (‡) been paid on account of Assigned
{Pay for the month of pd to 31-3-18 191....
{and Sep'n Allce. for month of Nil 191....} (to) Assignee Bert Anderson, R. R. #4, Bright, Ont.

(Address) .....

.....

(†) 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 unknown

(2) if married and if a Separation Allowance Card has been submitted .....

(3) cause of discharge Medically unfit due to service, Category E. authority D.O.41 Disch. 29-5-18

(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 May 29;18.

Place London, Ont.

Captain
For Paymaster, District Depot No. 1
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.

DUPLICATE

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 111th (South Waterloo) Overseas Battalion, C. E. F.

(2) Regimental Number 730,263

(3) Full Name of Soldier Fred Anderson

(4) Place of Birth Kent, England

(5) Are you married, or not ? No

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

(b) Present Postal Address NIL.

(7) Are you a widower ? no

(8) Have you any children ? no

If so, give number of boys and girls NIL.

Also their names and ages NIL.

M. F. W. 67.

200M.—3-16.
I772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive ? Yes., Richard Anderson,

If so, state name and address Washington, Ont., Can.

(10) Is your Mother alive ? Yes, Eugenia Anderson

If so, state name and address Washington, Ont., Can.

(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.

NIL.

(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.

NIL

(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.

NIL.

(15) Are you insured ? No.

If so, in what Company ? NIL.

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

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

Lieut.-Colonel,
O.C. 118th (South Waterloo) O.S. Battalion, C.E.F.
Officer Commanding.

Date June 7th, 1916

Forms
I. 1237
12

5 CAN. GEN. M. H.
LIVERPOOL

Org.

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
†1704	730263	L/C	Anderson	T
Year 1918	Unit. R.C.R.		Age. 31	Service. 2 3/12

Station and Date.

Disease G.S.W. L. foot & L. leg.

W.S.C.G.H. Liverpool 12-3-18

on admission – wounds well healed.
Complaint – "pains in L. foot on walking."
Dorsi flexion at L. ankle limited to right angle, further flexion causes much pain in foot, partial ankylosis metatarso phalangeal joint L. great toe. Sensation O.K. Chest, abdomen, nervous System O.K.

W. C. O'Neill Captain R.A.M.C.

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

Wt. W 6604/M 2870—1,500,000—8/17—H. & Sp. (10938). Forms/I. 1237/12. (E239)

[P.T.O.

Station and Date.	

DUPLICATE

Certified, true copy.

DUPLICATE

Lieut.-Colonel,
O.C. 111th (South Waterloo) O. S. Battalion, C. E. F.

MEDICAL HISTORY SHEET.

377 85

Surname Anderson *Christian Name* Fred

Examined { on 23 day of Dec 191 5
at New Hamburg

Approved by R W Anderson

Birthplace { City or Town Stanstead
County Kent

Rank M.O.

Apparent age 30

Trade or occupation

Height 5 Feet 4 Inches.

Weight 140 Lbs.

Chest measurement { Minimum 34 inches.
Maximum expansion 37 inches.

Physical development Good

Small-Pox Marks None

Vaccination Marks { Arm Right. Left. X
Number 5

When Vaccinated last 1907

(*a*) Marks indicating congenital peculiarities or previous disease None

(*b*) Slight defects but not sufficient to cause rejection None

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

Date.	Result.	Vaccinations.
7.4.16		W J H Gould M.O.
		M.O.
		M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.
28/3/16		W D Aikins M.O.
15/5/16		W D Aikins M.O.
		M.O.

Enlisted on 22 day of December 191 5 at New Hamburg, Ont

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	111th O. S. Battn.	730262		Dec 24-15
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
London, Ont.	29-4-18	G.S.W. left foot G.S.W. left leg.	Cat. E. III @ 7 Land Capt

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 39-4-19.

Surname Anderson Christian Name Fred

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.
Westcliffe Hospital	9.11.16.							Defective Vision		R V 6/8 with correction 6/6 L.V 6/8 " " 6/6 Fit with glasses for overseas	W.H.Brown Capt HH
M.H. Wilding.		10	6	17	17	9	17	G.S.W. Left Leg.	100.	Invalided Horable	
M.C. H. Epsom.		17	9	17	12	3	18	do.	177	Severe wds. L foot. healed Mass. No duty. 4.10. R.C.M. Gym. 13.11. Treatment continued. 15.12.17 General condition is excellent Two scars. on outer side of L. leg. about 4" above ext Malleolus. Three large scars across the dorsum. of L foot and a small scar in the center of left sole. There is a slight atrophy of muscles of L. leg. L. foot still some what swollen. He has pain right through the center of L foot. on walking. X ray shows old fracture of left Metatarsal and int cuniform Eye report Westcliffe in Nov. 16 R.V. 6/9 with correction 6/6 Horton. Dec 1917 L.V. 6/8 " " 6/6 R.V. 6/36 with corr. 6/9 He has glasses now. L.V. 6/24 " 6/9	F.C. MacKay. Lieut
No 5 Can. Gen Hosp. Liverpool		12	3	18	25	3	18	G.S.W. left foot.		Pain in left foot on pressure. Impaired dorsi flexion L. ankle. Partial ankylosis 1. great toe Unchanged.	F.C. MacKay. a MC. 2.
		28	3	18	9	4	18	"			R.H. McShillington Capt

H.M.S. Llandovery Castle

CERTIFIED TRUE COPY ..... Lieut.
For O. C. No. 1 District Depot

"B" ORIGINAL

ORIGINAL

ORIGINAL

MEDICAL HISTORY SHEET.

Surname Anderson *Christian Name* Fred

Examined { on 23 day of Dec 1915
at New Hamburg

Approved by S R W Anderson

Birthplace { City or Town Stanstead
County Kent.

Rank M.O

Apparent age 30

Trade or occupation

Height 5 Feet 4 Inches.

Weight 140 Lbs.

Chest measurement { Minimum 34 inches.
Maximum expansion 37 inches.

Physical development good.

Small-Pox Marks none

Vaccination Marks { Arm Right. Left. +
Number 5

When Vaccinated last 1907.

(a) Marks indicating congenital peculiarities or previous disease none

(b) Slight defects but not sufficient to cause rejection none

Date	Fit or Unfit	Examined for Re-engagement,
		13 JUN 1917 M.O
		M.O
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date	Result	Vaccinations.
7/4/16		W. J. H. Gould M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
28/3/16		W. J. Dakin M.O.
15/5/16		W. J. Dakin M.O.
		M.O.

Enlisted on 24 day of December 1915 at New Hamburg Ont.

111th (South Waterloo) Overseas Battalion

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	111th Bn Inf.	730263		Dec 24 - 1915
Transferred to..	35th BATTALION C.E.F. 17th Can Res Bn	730763		13 7 16 8.10.16
	4th CAN. RES. BATTALION. R.C.R. C.E.F.			

CANADA

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
M C H. Epsom.	7 11. 1. 18.	G.S.W. Left Foot Fract. of Tarsal bones	Y.S.C. as Kanadian Smith
London, Ont.	29-4-18	G.S.W. left foot G.S.W. left leg.	Cat. T.M.L. A7 Land Capt

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.
150M.—8-15.
H. Q. 1772-39-439.

Surname Anderson Christian Name Fred

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.
Westcliffe Hosp	9-11-16							Defective Vision		R v 6/8 with correction 6/6 L v 6/8 " 6/6	
M.H. Woking		10	6	17	17	9	17	G.S.W. L/F & Leg.	100	Fit with glasses for 07 sea[illegible] wounds on right - both healed up quickly. No incidence of past.	Lieut Brown Capt Duplicate Medical History Sheet posted to here for O.C. Westcliffe Hosp Lieut.
M.C.H. Epsom		17	9	17	12 MAR 1918			do	177	Severe wds L. foot. healed - Mass. On duty 4.10 Rom Gym. 13.11. Treatment continued	Lieut RAMC
										15.12.17. — General condition is excellent two scars on outer side of L. Leg about 4" above ext malleolus. Three large scars across the dorsum of L. foot. and a small scar in the centre of the left sole there is slight atrophy of muscles of L. leg. L foot stiff same what swollen. He has pain right through the centre of L. foot on walking. x Ray shows old fracture of Left 1st Metatarsal and int. cuneiform. Eye Report Westcliffe in Nov. 1916. R.V. 6/8 with correction 6/6 L.V. 6/8 do 6/6. Horton Dec. 1917 R.V. 6/36. with correction 6/9 L.V. 6/24 do 6/9 He has glasses now. Pain in L foot on pressure Impaired dorsi flexion L ankle. partial ankylosis L great toe.	Lieut RAMC Lieut RAMC W.C. Med Officer Lieut RAMC

NO. 3 CANADIAN GENERAL HOSPITAL LIVERPOOL

12 MAR 1918 28 MAR 1918 G S W L foot.

H. M. H. S. LLANDOVERY CASTLE

28-3-18 to 9-4-18

Unchanged

R.W. Shilly Capt

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

M. F. W. 54. (A. F. B. 103.
350M.—5-16
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps 111th O.S. Battn.

Regimental No. 730263 Rank Private Name ANDERSON, Fred
C. E. F.

Enlisted (a) 22.12.15 Terms of Service (a) D.O.W. Service reckons from (a) 22.12.5

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 Musketry Instructor

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	Halifax, Can.	26.9.16	S.S. Tuscania
		Disembarked	Liverpool, Eng.	6.10.16	
18.10.16	O.C. 111Bn.	App. A/Sgt.	E. Sandling	7.10.16	Pt. 11 O. 257
~~8.10.16~~	O.C. 111th Battn.	Transferred to 17th ~~Reserve~~ Battn.	E. Sandling	8.10.16	Part 11 O. #252
			Adjutant. 111th S.W. Overs. Bn. C.E.F.		Capt.
~~9.10.16~~	O.C. 17BN	Taken on Strengtn 17 RBn	E. Sandling	8.10.16	Part 11 O. #273
18.10.16	O.C. 17Bn	Re-transferred to 111th Battn.	E. Sandling	13.10.16	Part 11 O. #282
			A/Adjut. 17th Reserve Battn. C.E.F.		Lieut.
~~13.10.16~~	O.C. 111Bn	Taken on ~~Strength~~ 111Bn	~~E. Sandling~~	13.10.16	~~Part 11 O. #255~~
13.10.16	O.C. 111Bn	Transferred to 35th Reserve Battn.	W. Sandling	13.10.16	Part 11 O. #255
			Adjutant. 111th S.W. Overs. Battn. C.E.F.		Capt.
13.10.16	O.C. 35 Bn	Taken on Strength 35 ~~R~~Bn	W. Sandling	13.10.16	Part 11 O. #246

cancelled

(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				
4.1.17	O.C.35th	Struck off strength 35th Bn.on transfer to 4th.Res Bn.	W.Sandling	4.1.17	Pt.2 Order No.4 .....Capt. Adjt.35th Battalion,CEF.
4.1.17	O.C.35th	Taken on strength 4th Res Bn.	W.Sandling	4.1.17	Pt.2 Order No.1
20.1.17	O.C. 4th Res Bn.	Transpt to R.C.R. France	W. Sandling.	20.1.17	Pt. II. ord. 15 A. Robbins Capt Adj. 4th Res. Bn. CEF.
21-1-17	O.C. C. B. D.	Landed in France. Taken on strength	Nom. Roll Pt III D.O.7	d/ 21-1-17. d/ 25-1-17	
22-1-17	— do. —	Left for Etaples	Nom. Roll	d/ 22-1-17	
27-1-17	O.C. Bn.	Arrived Etaples 23-1-17	B213	d/ 23-1-17. DCS 152	
21-3-17.	Ocunit	Reverted to ranks at own request.	Field	21-1-17	army fo. 2170 of 1916 9th Orders No 25 of 10-3-17.
20.5.17.	9 & 8a.	G.S.W. to foot Lt (accdl)	13 & 8a.	17.5.17	A36(H176) DCS199
16-5-17	ocunit	Wounded in Action (accd)	Field	17.5.17	B213 DCS200
19.5.17	13 cda.	GSW foot L. (accd)	6 ccs.	17.5.17	A36(H186) DCS201
20.5.17	58 CCS	" "	58 ccs	18.5.17	A36(H107) DCS201
2.6.17	Goc i army	Classified Wounded (self inflicted without negligence)	Field	2.6.17	A B K 785/6 K.D.D 16 7882
5.6.17	58 CCS	GSW foot L (accd)	2 at.	5.6.17	a36 (H416) DCS204
9.6.17	HS. St Andrew' Footr accd.	posted Nova Scotia Regt Depot Brunshott		9.6.17	W 2053. a 7530 } 9th 067 d/- 23.6.17

CERTIFIED CORRECT.
25 JAN 1917
CAN. RECORDS, LONDON

R—122

A.G.R. Rank Name ANDERSON, Fred - Reg'l No. 730263 -

Unit 111th Bn. - If in perm. Corps, What Unit? } Married or Single Single. -

Place and Date of Enlistment New Hamburg, 23rd Decr.,1915. Place of Birth Stanstead, Kent Co. England. -

Name and Address, Next-of-Kin Bert Anderson, -

Washington, Ont. - Relationship Brother. -

Assigned Pay Monthly $ Payable to

Relationship Descreyany

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

N/E. R.B. No 4042
File R.L.
Category M & Con

H. W. & V., Ld.—7165-16.

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.
		lo/ARRIVED IN ENGLAND S'S' T. BUSCANIA 6.10.16			
13.10.16	Vf.	111th Bn. S.O.S. on trans. to 35th Bn.	W. Sandling	13.10.16	Pte. II No. 255.
14-10-16	OC 35th	Taken on strength. of 35th.	"	13.10.16	Pt. II 246
8-10-16	35 Bn.	Apld. A/Sgt. with pay	"	6-10-16	" " 267 (" " 262 111th Bn
4-I-17	35th	S.O.S To 4th Res Bn	W. Sandling	4-I-17	Pt II, O'4
4-I-17	4th Res	T.O.S From 35th Res Bn	W. Sandling	4-I-17	Pt II, O'1
20-1-17	-do-	S.O.S. to R.C.R. O/Seas	-do-	20-1-17	" " 15 A. Apl.
~~21-1-17~~	R.C.R.	Taken on Strength	In Field	21-1-17	~~Cancelled by Pt II O. 66 d. 9.6.17~~ " " 7
~~10.3.17~~	"	Reverts to Ranks	"	21-1-17	~~Cancelled by Pt II O. 96 d. 9.6.17.~~ 5
6.6.17	V	No 13 Can. Fld. Ambulance	V	17.5.17	C.L.A. 403.

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.
12.6.17	R.C.R.	2013 Gen. Hosp.	Boulogne.	5.6.17	C.L. A.H.of G.S.W. foot. accidental
14.6.17	✓	Milty Hospl.	Woking	10.6.17	C.L. B. 299 R.C.R. Rl. Rd. 67 ✓
16.6.17	N.S.R.D.	T.O.S. pro Kool from R.L.R	Brandsh	10-6-17	P.H.D. 99 d. 23.6.17.
19.6.17	R.C.R.	T.O.S. from H.Res Bn with Ranks of H.Bgh. Rtn to Rankcat	Field	21.1.17.	P.H.D. 66.
4.4.17			Died	21.2.14	P.H.D. 44
		~~Furn Request~~			
19.9.17.	N.S.R.	Mil Convt Hospl	Epsom.	18.9.17.	C.L. B 15. G.S.W. L. Foot acc.
4.4.18	"	Invalided to Canada	R. Kirkdale	28.3.18	C.L. B 178 G.S.W. L. Foot. Accident.
8.4.18	N.S.R.D.	" " " is S.O.S.	" Bisholt	28.3.18	P.H.D. 85.
	D.S. Depot	For Further Treatment	London N.I	7 4 18	N R H 4 3

Army Form B. 103 Page 2 Regimental Number 730263

Casualty Form—Active Service.

Regiment or Corps 111th OS Battn

Rank Pte Surname Anderson Christian Name Fred

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

Enlisted (*a*) 23.12.15 Terms of Service (*a*) D O W Service reckons from (*a*) 23-12-15

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

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

or Corps Trade and Rate .....

Occupation ....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...			
16-6-17	NSRD.	TOS from RCR Hosp. Cas.	Bkhott.	10.6.17	Pt 99
					LIEUT:
					FOR LT: COL: I/C RECORDS, C.O.M.F.

#1 Cas. Unit.

T. O. S. ~~District Depot No.~~ 1 12.4.18 D. O. # 105.

S. O. S. District Depot No. 1 MAY 29 1918 D. O. .....

LONDON ONT

H C Macklinnock Lieut.

O. C. Casualty Co. No. 1 District Depot

"A", "E" MEDICALLY UNFIT DUE TO SERVICE ALTHOUGH FIT FOR EMPLOYMENT IN CIVIL LIFE

Hans. m. Livingstone Lt.

Section, No. 1 D.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.

(6328) W. 13863/M1477 2,400,000 1/17 McA & W Ltd Forms B./103/4 (E. 858)

[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				

The undermentioned "Medical Documents" have been detached from Discharge Documents and forwarded to B. P. C.

Medical History Sheet, M. H. B. 313.2.....

" " " or A. F. B. 178.....

Proceedings of Medical Board A. F. B. 179.....

Dental History Sheet, M. F. B. 465.....

Medical Report D. M. S. 1375.....

Miscellaneous Reports.....

Ref B.P.C - 637.

.....

R. O.

P. Anderson L. 78263

Date. 1.8.46.....

Doc.S.F. 14.
1000
5/18.

CANADIAN ARMY DENTAL CORPS, MILITARY DISTRICT NO.

M.F.B.484.
100m-2-18.
1772-39-1219.

DENTAL CERTIFICATE ON DISCHARGE.

To Officer i-c Dental Services at Central Mil. Hospital London Ont

Name Anderson F Regimental Number 130263

has been given Dental examination previous to discharge and is entitled to Dental treatment to the extent of:- as Pres D.H.S

This certificate to be presented within two months of the date on discharge papers.

A. Berry Lieut
Officer i-c Dental Examination on Discharge.

Examined at London Date April 27 1918

2

FORM D.M.S. 1300.
8137—50m—28/2/17.

Surname	Christian Name or Names	Reg. No.
Anderson	F.	730263

Rank	Unit	Co.	Troop	Batty.
Pte	R.C.R.	1 Sqn.		

Hospital: 13.C.F.Amb. Date of Admission: 17-5-17

Transferred 13 Gen Broque. Hosp. 5.6.17.
Mil Hosp. Woking Hosp.
Mil Conv. Epsom. Hosp. 18.9.17
5 Can Gen Kirkdale Hosp. 13-3-18

Diagnosis G.S.W. Lt Foot Acc. JL

(1)
Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

Invalided to Canada 28-3-18

DISPOSITION	Date	REMARKS
C.L. 6-6-17 A403		
12.6.17. A408.		
14.6.17 B299.		
20.9.17 B15.(2)		
16-3-18 B164.		
4-4-18 B178		
		Dis. to Canada per H.S. Llandovery Castle from L'pool. 28-3-18.

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.		

Pay cash

for R. C. R. R.

pkgs.

Date of sending

CANAD

Lettre au médecin pour accompag

BUREAU DES V

Cher Monsieur:

L'ex-militaire précité demande
qu'il prétend être due à son service d'arm
consultés afin d'obtenir l'aide nécessaire
Dans les témoignages qu'il soumet à l'appu
consulté aux dates suivantes:

Nous vous adressons donc la fo

*Name ANDERSON, Frederick, Rank Pte. Regtl. No. 730263

Original unit 111th Bn. Present unit C.C. Rs. Mar. S. Age. 32 Religion C of E Fyle Depot I.D.D. 10-A-19 Ref. H.Q. I.D. 30-A-240

Port, ship, and date of arrival

Next of kin Brother, Bert Anderson, Washington, Ont.

Address on leave

Address on discharge R.R. No. 4, Bright, Ont.

Transportation issued ~~Yes~~ No Date 29/5/18 Character on discharge Very Good.

Previous occupation Farmer. Date and place of enlistment New Hamburg, 23/12/15

Diagnosis Cat. "E" Date of Medical Boards 16/5/18.

Date. T.O.S.	Remarks	Pt. 2 Order No.
18/4/18	Trans. from "F" Unit. C.E.F. R.O. #372, 28/3/18.	
	444, 16/4/18 and posted to Cas. Co.	1
3/5/18	From Cas. Co. to Hosp. Sect.	16
23/5/18	From Hosp. Sect. to Cas. Co.	37

*—Name will be given in full; surname first.

(over)

Date.	Remarks.	Pt. 2 Order No.
29/5/18	Discharged from H.M.S.	41

M.F.W. 192.
60M-3-18. (D.P.) 353.
1772-39-1243.

Form R. 149.
7106—250m—7/2/17.

Name ANDERSON.Fred. *Rank* Pte. *Reg. No* 730263

Unit R.C.R.

Next of Kin CANADA.

Date 1917	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
17-5	No.13 Can Fld Amb.	GSW.L.Foot.	Accident.	A403	M5530	
5-6	No13 Gen Hosp	Boulogne	Do	A408		
10-6	Mil Hosp Woking	Do	Do	B2978		
8.9.17 (Poor)	Kens Milly on Epsom	do	do	B15		
11-1-18	Still in Hosp	3582	do			
13-3	5. C G H	Kirkdale		B.164		
28-3	Arrived to Canada	1434 2 6265		B.178		

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

Reg. No. 320263 Name Anderson. T

Rank L/c Corps 11th Bn Age 32 Service 4/12 & 3/12 = 7/12

Ledger No. Serial No.

HOSPITALS	DATE	DIAGNOSIS
L Gen Sc H London	4-5-18	G.S.W. Leg
Dvs 5 unit	23-5-18	

P. T. O.

HOSPITALS	DATE	DIAGNOSIS

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

NAME Anderson Fred S.

REGT'L. No. 730263

RANK AND CORPS Pte R.C.R.

H. Q. FILE No. 649

FOLLOWS No.

FOLLOWS

CABLE NO.	CABLE DATE	NATURE OF CASUALTY
M 5-5-30	6-6-17	Adm 13 Fld amb. May 17th 1917. (Wounded accidentally foot.)

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
a403.	#13 C. F. Amb.	17-5-17	Gsw. l. foot. Rec.
a408(2)	#13 Gen. Boulogne	5-6-17	Gsw. l. foot. Sec. Rec. 5-7-17
B299.	Mil. Wokingham	10 6-17	" " " " " " Acc 7-6-17
B16	Can. Con. Uxbridge	18-9-17	" " " " " " Nova Sco 12-16-17
B164.	2nd Mil" Epsom no 5 Can Gen Kirkdale	13-3-18.	" " " " " " 9-4-18
B178.	"Invalided to Canada	28.3.18.	" " " " " " "

NAME Anderson, Fred S.

RANK & NO. ~~Pte~~ Sergt. 30263

CORPS 111th Batt

ENLISTMENT, PLACE New Hamburg, Ont DATE 2 Dec. 24th 1915

FORMER CORPS Royal Lean. Regt.

COUNTRY OF BIRTH England, Stansted, Kent.

NEXT OF KIN Anderson, Bert (brother)

ADDRESS OF NEXT OF KIN Washington, Ont.

Also notify Alma Johnson (RLS)

~~DISCHARGE, PLACE~~ 35 Waterside Ave ~~DATE~~ Galt, Ont.

letter 13/4/18.

Sailed from Halifax. S.S. "Tusconia" 25-9-16

P/C. 7/4/18 Ref H.Q. 1772/39 839.

M. F. W. 22. 100 m.—9-15.

L. L. 85779—M. & D.—6011.

REMARKS:

No. 730263 RANK Pte. NAME Anderson Fred

T. O. S. 22-12-15 UNIT 111th Battalion
Dec. pay list

M. D. /

PAID FROM	PAID TO	SIG OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC. PARTICULARS	AUTHORITY
1915	1915			
Dec. 22	Dec. 31	V		
1916	1916			
Jan. 1	Jan. 31	"	Prom. Prov. Cpl. 21-1-16.	D.O. 17 of 21-1-16,
Feb. 1	Feb. 29	"	" " Sgt. 3-2-16.	D.O. 26 of 3-2-16,
Mar. 1	Mar. 31	V		
Apr.		V		
May		V		
June		"		
July		"		
Aug.		"		
Sept.		"		

UNIT SAILED
SEP 25 1916

No. 730263 RANK Pte NAME Anderson F.

~~T.O.S.~~ UNIT Casualties C. E. F.

Transfd from C. D. 2244 6.1.8.
(D.O. No 105 S/15=4-18.)

M. D. 1

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1918 May (no date no sig)	1918.	n.	Transfd. to Dis. Depot. No1.	D.O. No 107 S/17-4-18.

L-L. Job 5470—M. & D. 6888

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12
50m.—7-16
H. Q. 1772-39-819

To Whom Mr. Bert Anderson

Address ~~Washington~~ ~~Ont~~
RR # 4
Bright, Ont

Rate $ 25.00

By Whom Assigned Anderson Jr.

Regtl. No. 730263.

Rank Sgt

Corps Bbo. 111 & Batln

OCT 1 - 1916

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			02 M. 15 8/17 / L H. 21 8/17
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

Consolidated Grant.

CONSOLIDATED 2 ACCOUNT

23612/471

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

374-F-4.

Name Anderson, Frederick
Surname Christian Name

Regimental Number 730263 Rank Pte.

Unit 111th Bn. C.O.M.F.

Original Unit

District where paid M.D. 1.

Date of Discharge 29-5-18.

P. D. P. Filing Number 16-112-1.

Address (in full) R.R. #1.
Bright, Ontario.

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

L. L. 22573—M. & D. 8009.

Total Credits 91 days	FIRST PAYMENT Cheque No. A	Date	Amount 30 days	SECOND PAYMENT Cheque No. B	Date	Amount 30 days	FINAL PAYMENT Cheque No. C	Date	Amount 31 days	Balance Over-payments to be Recovered	Total Amount Paid
100 10	2128	28-5-18	33 00	2049	28-6-18	33 00	1563	28-7-18	34 10		100 10
1753 1st	~~G36103~~	~~12/3/19~~	~~70 00~~								
~~1439 A 2nd~~	~~G33742~~	~~12-3-19~~	~~70 00~~								

M. F. W. 127.
60M—6 17.
1772-39-1140.

Remarks:

Decln No 23612/4.7 W.S.G. File No 0374.1.-12

Award ..... days att $ 10. per day $ 350.00

S. A. ----- months att $ ..... per mo. $ .....

Less P. D. P. Credited $ 100.10

$249.90

Less further debit balance $ .....

Net due paid as below 249.90

	TO SOLDIER				TO DEPENDENT			
O	Ag. No.	Ch No	Amount		Ag. No	Ch No	Amount	
1	1753	36103	70 00	H				
2	1439a	33742	70 00	H				
3	15713	413313	70 00	H				
4	14006	466699	39 90	H				
5								
6								
	Total		249 90		Total			

1-3-19

8/4/19

20-5-19

GEN'L AUDITOR
Posting checked by
D. V. Halpin
Date 14-7-19

RR 720 ft.
Bright-Ont-

Eho

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12a.
50m.—7-16
1772—39—819.

Sheet No. 2. Mrs. B. Anderson (Assignee)

L. L. Job 5470—Req. 6888.

PAYMENTS.

Name of Soldier Anderson F. 730263 Sgt. 111th Battn

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			# 25.00 OCT 1 - 1916
May				
June				
July				
Aug.				O.P.M. notified Re stoppage of acct.
Sept.				
Oct.		~~72196. 20~~		Retd & cancelled 31/10/16 usn
Nov.				
Dec.				
Jan.	1917			A 1102
Feb.				
March				Obtain London countersign to cheque from 1/10/16. Ottawa will issue adj. cheque from that date on receipt of correct address. Mailed 1/12/17
April				
May				
June				
July	# 250	B a 14806	250	# 250 to adj. from Oct. 1/16. — # # 4
Aug.		B 28377	25	# 25 Future. # Bright, Ont.
Sept.	X 33467	~~X 33544~~	~~25~~ 25	X 33544 Cancelled C.H.M. AUG 24 1917
Oct.				300.
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.				

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

Oct. 1 1916.

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

~~25~~	20 ⓒ 1/10/17		

1/12/21 ⓒ

PARTICULARS OF SEPARATION ALLOWANCE

No. 730263

Rank ~~Sgt.~~ Promoted Reverted Pte ⓒ Discharge

Soldier's Name F. Anderson

Battalion "B" Co. 111th Battn.

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT (Brother)

Name Mrs Bert Anderson

Address ~~Washington, Ont.~~

Change of Address

1 R.R. #4. Bright Ont.

2

3

4

Date	Cheque No.		Amount S/A	Amount A/P	Total		REMARKS
30/9/17				300 x ✓	300 ✓		x A.P. #25.00 from 1/10/16 – 31/9/17
Oct	51183	C		25	25		
Nov	52422	C		15	15	T	Nov. to adjust. A.P. 20.00 ÷ 1 10/17 – 2 M. 15 10/17 – M.N. 20 10/17
Dec	54748	F		20	20	m	20.00 ÷ A.P. future
Jan	54036	A		20	20	B	
Feb.	92262	B ✓		20	20		+ O/d 12/4/18 to adjust. Mch & April as soldier actually retd 10/4/18
Mar.	~~99491~~	G		~~20~~	~~20~~		G 99491. Canc. Soldier retd to Canada. 7/4 03/4 F.12.
13/4/18	April	G 3489		40	40	+	a/c closed ruling Mr MacNeil ~~20/3/18~~ MRO 2 D. 21/3/18
				440	440	∞	

A/c closed 30/4/18

Ret'd per Llandovery Castle

Date 10/4/18. F.X. 12/4/18.

Clerk Jno T Baron

M. F. W. 128
400M.—6-17—1772-39-1141
L. L. 22320—M. & D. 7663.

ACCOUNTS CONSOLIDATED

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—172-38-1141
L. L. 22320—M. & D. 7893.

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form B. 263.	Attestation Paper,	Militia Form B. 235.
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.

This space to be for numbers

Proceedings on Discharge.

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

No. 730263

Rank Private

Surname ANDERSON

Christian Name FRederick

NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.

Corps (Squadron, Battery or Company) 111th Battalion

Date of Discharge MAY 29 1918

Place of Discharge LONDON, ONT.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 32 years ... months.
Height 5 feet 3 inches.
Complexion Ruddy
Eyes Blue
Hair Black
Trade
Intended place of residence (To be given as fully as practicable.)

Descriptive Marks: S. I. Wound Left Foot.

2. The above-named man is discharged in consequence of CAT. "E" MEDICALLY UNFIT DUE TO SERVICE ALTHOUGH FIT FOR EMPLOYMENT IN CIVIL LIFE

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 soldiers 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

Deceased 2-2-41
649-A-4644

M. F. B. 218.

100M.—1-17.
H. Q. 1772-39-113.

(OVER)

H. L. I. Comp. 28-2-16 a m

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

NIL

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) LONDON, ONT.

(Date) MAY 29 1918

Hans. m. Livingston Lt
Commanding O.C. Discharge Section, No. 1 D.D.

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) LONDON, ONT. J Anderson X *(Signature of Soldier.)*

(Date) MAY 29 1918 G Reddon *(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.

J. Anderson X *(Signature of Soldier.)*

10. **Statement of Service.**

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

Total.....years.....days.

11. **Confirmation of Discharge.**

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

(Place) LONDON, ONT.

(Date) MAY 29 1918

Hans. m. Livingston Lt
(Signature) O.C. Discharge Section, No. 1 D.D.

Reservations referred to at Para. 8.

(To be signed by the soldier. When there are none, it is to be so stated, and signed by the soldier.)

NIL

X J Anderson

(OVER)

P. 559.
MARRIED OR SINGLE Single.
PLACE OF BIRTH Stanstead, Kent Co. England.
NAME AND ADDRESS OF NEXT OF KIN Bert Anderson
Woohington Ont Canada
RELATIONSHIP OF NEXT OF KIN Brother
NAME AND ADDRESS OF NEXT OF KIN
RELATIONSHIP OF NEXT OF KIN
SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)
PAYABLE TO nil

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY
Reverts to Pte	21.1.17	A.O.25. 10/3/17
above cancelled		A.O.66. 19/6
Reverts to Pte	21/2/17	do 74 RCR 17/7/17

ADMISSIONS TO HOSPITAL, &c.

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

REG'L. No. 730263 RANK ~~Actg. Sgt.~~ Pte NAME Anderson Fred
IF IN PERMT. CORPS WHAT UNIT } UNIT 111th
TRANSFERRED TO ~~11th~~ 35th Res Bn DATE 8.10.16 AUTHORITY G.O. 755.
PERMANENT FORCE ALLOWANCES
TRANSFERRED TO 4th Res Bn DATE 1.2.17 AUTHORITY 30.4. 11-1-17
PLACE OF ATTESTATION New Hamburg Ont. Can TRANSFERRED TO R.C.R. DATE 21-2-17 AUTHORITY B.O.15 20-2-17
DATE OF ATTESTATION 22-12-15. TRANSFERRED TO N.S.R.O. DATE 21/6/17 AUTHORITY G.R.B. 299 14/6/17
N. E. Bgde to 1/3/18
ASSIGNED PAY MONTHLY $ ~~25.00~~ 20.00 1/10/17 DATE EFFECTIVE 1.10.16
PAYABLE TO Bert Anderson ~~Woohington~~ R.R.4 Bright Ont Canada RELATIONSHIP Brother
ASSIGNED PAY MONTHLY $ DATE EFFECTIVE
PAYABLE TO RELATIONSHIP
STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) Stopt EFFECTIVE 1/2/18 REASON Dis to Can
DISCHARGE DATE AND PLACE Canada 30/1/18 REASON AND AUTHORITY Epsom 12/65 26/1/18 Invalided
ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)
ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

MAR 27 1918 CANADIAN MILITARY HEADQUARTERS

P.697-25M.
3989-31-19-17.

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS.

Date of Payment.	No. of Acq. Roll	AMOUNT Francs	£	S.	$	¢	Place of Payment.	Name of Paymaster.	Remarks.
27/6/17	1			10	2	4	Witley	Thompson	Ch 244
14/8/17	2			4	4	87	"	"	" 487
19/10/17	2773			4	4	87	Aldershot	Hathaway	" 487
21/12/17	2844			2	9	23	"	Hodder	
12.1.18	2917			10	4	5	"	"	
					70	56			

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
45.									Balance from Canada							45 00				
10 80													25 00		25 00	30 80				
36 00											14 60				14 60	51 90				
45 00	925	30/10.	1021	15/11					24 33	9 74			25.		59 07	37 83				Severn Repayt Rec 05-138 D. 10/11/17
46 80	1073	30/11	1164 1152	19/12 15/12					12 17	14 60 14 87			25.	03	56 67	27 66				
46 80													25		25	49 16			49 16	B.O.H. 4-1-17 2nd to 4th Res Bn 11-1-17 B.O.15. 20-1-17 2nd to R.C.R. 21-2-17
30 –	78	19/1	26	1/1					2 13	9 74			25		37 17	11 99				
12 80													– – +			53 99			53 99	Overpaid as Sgt 21-1-17 = 39 Days @ 1/10
34 10	1323 1305	26/2 20/2	1476 1412	14/3 5/3	157	R.C.R. 8/3/17			3 49 3 49	1 75 3 49	3 49		25 –	15 60	56 31	31 78			31 78	
53													25		25 –	39 78			39 78	
34 10	94	13/4							2 61				25 –		30 23	43 65			43 65	unexpd as Sgt 24/1/17 31 days @ 1/10
172 70	47								2 62		18 09									
									51 14	44 49			200	15 63	229 05					Transf to N.S.R.O. 21/6/17
June 20	1/6	30											25		25	101 05				
		357 70																		
52 40	82 40																			
97 40	45 10								51 14	44 19	18 09		225	15 63	354 05					

Epsom SS no 4 28.3.18. Cr 42.26.
Endorsed AR 6504 10/- 25-2-18 Epsom AR. 11806. £2

P. 559.

MARRIED OR SINGLE Single.

PLACE OF BIRTH Stanstead, Hunt Co. England.

NAME AND ADDRESS OF NEXT OF KIN Bert Anderson Washington Ont Canada

RELATIONSHIP OF NEXT OF KIN Brother

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO nil

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY
Reverts to Pte	21.1.17	O.O. 25. 10/3/17
above cancelled		O.O. 26. 19/6
Reverts to Pte	21/2/17	do 74 RCR 17/7/17

ADMISSIONS TO HOSPITAL, &c.

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

REG'L. No. 730263 RANK ~~Actg. Sgt~~ Pte NAME Anderson Fred

IF IN PERMT. CORPS WHAT UNIT — UNIT 111th

PERMANENT FORCE ALLOWANCES

PLACE OF ATTESTATION New Hamburg Ont. Can.

DATE OF ATTESTATION 22-12-15.

ASSIGNED PAY MONTHLY $ ~~35.00~~ 20.00 1/10/17 DATE EFFECTIVE 1.10.16

PAYABLE TO Bert Anderson RR4 Bright ~~Washington~~ Ont Canada RELATIONSHIP Brother

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) Stopt EFFECTIVE 1/2/18 REASON Dis to Can

DISCHARGE DATE AND PLACE Canada 30/1/18 REASON AND AUTHORITY Chasm 12/65 26/1/18 Invalided

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

TRANSFERRED TO 35th Res Bn DATE 8.10.16 AUTHORITY G.O. 285.

TRANSFERRED TO 4th Res Bn DATE 1.2.17. AUTHORITY 30.4.17

TRANSFERRED TO R.C.R DATE 21-2-17 AUTHORITY 30.15 20.1.17

TRANSFERRED TO N.S.R.O. DATE 21/6/17 AUTHORITY G.R.O. 299 14/6/17

N.S.R.O. 1/3/18

MAR 27 1918

Entered by ... Checked by ...

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
1916 Oct'														45.	45																				
1-7	7	1.35	9	45	7	15	1	05							10 50																				
8-31	24	1.35	32	40	24	15	3	60							36 00																				
Nov 1-30	30	1.35	40	50.	30	15	4	50.							45 00	925	30/10	1031	15/11																
Dec 1-31	31	1.35	41	85	31	15	4	65							46 50	1073	30/11	1152	15/12																
			13	80																														
Jan. 1-31	31	1.35 .15	46	50											46 50																				
Feby. 1-28	20	1.35 1.15	30	—											30 —	78	19/1	26	16/1																
21-28	8		12												25 50 12 50																				
March 1-31	31	1.00 .70	34	10											34 10	1373 1305	26/2 20/2	1476 1411	5/3	1257	R.C.R.	28/3														
April 1-30	30	"	33	·											33																				
May 31		"	34	10										45	34 10	94 47	19/4 "																		
				40											32 70																				
June 20	20	1.35 .15	30											52 40	82 40																				
			357	70										97 40	455 10									51 14	44 19	18 09		225	15 63	354 05					

Balance from Canada 14500

730263 Pte ~~Sgt~~ Anderson F. (8 A.P. 20 ~~25~~ 1/10/17)

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
B.F.			357	70										97 40	455 10									51 14	44 19	18 09	225	15 63	354 05	101 05				
Jan 30	10	35/15	15												15															116 05				Revert to Pte 2/2/1, Do 74 RBR 7/1/1
July 31	31	1.00/10	34	10											34 10												25	52	77	73 15				over 130 day @ 40
Aug 31	31		34	10											34 10												25		25	82 25				
Sept 30	30		33												33												25		25	90 25				
			473	90										97 40	571 30												300	67 63	481 05	90 25				
														97 40	571 30									51 14	44 19	18 09	300	67 63	481 05					

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR 3	DR 4	BALANCE	DEFERRED PAY	SER. ALLCE. ENG.
Sept 30		~~90 25~~ AK		Bal Fwd					90 25	Nil	
Oct	Pte Pay	34 10		A.P.				20	100 35		
				Dr AR 14 2 Lt H. Wokingham 1/8/17	4 87				99 48		
		34 10			4 87			20			
Nov	" "	33		ap do 17				20			
Dec	" "	34 10		ap Dec 17				20			
				CR 5414 21/11 Epsom	9 73						
				Drak 4 Sq Kenwood	2 43				114 52		
		67 10			12 16			40			
Jan 1-30		33		Bal ap Jan				20	127 42		
				Drak 3075 5 Sq Epsom	9 73						
				" " 32 27/8 Cobbs	4 87				112 82		
				" " 2 29/6 Cook	2 44						
				" " 3773 19/10 Epsom	4 87						
				" " 27 18/8 Cook	4 87				100 64		
		33			26 78			20			
				CR 2317 17/1 Epsom	48 67						
				" 706 4 21/12 "	9 73				42 24		
					58 40						

Balance transferred to N. E. Branch. NIL

N.C. May 1918			ap 1136 25/2/18 C.G.H. Epsom	13.3 14/3/18		9 73	End.
"			6604 15/5/18 p2-9 Hap	do		2 43	End
June	Transd to "Canada Disc"	End	12 16				

A 3 M. FORM REN'D S EFFEC. 1/2/18
DISCHARGED TO Can DATE 30/1/19
PAY BOOK VERIFIED Yes
BA 32 26 L.P.C. REN'D 30/1/19
AUTHY. Epsom 12/1/18 5 26/1/19

Invalided
Chicken J Bruce

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. A.F.B. 179 Canada (Revised).

Reserved for M.H.C.

Regt. No. 730263 Rank L/Cpl. Surname ANDERSON Christian Name FREDERICK.

Unit or Corps—(a) Overseas from United Kingdom R.C.R. (b) In United Kingdom 4th Res.

Born at—Town STANSTEAD County or Province KENT Country ENGLAND.

Date of Birth—Day 19th. Month December. Year 1885 Age 32 yrs. months.

Joined at NEW HAMBURG ONTARIO CANADA Date December 22nd, 1915.

Former Trade or Occupation Farmer.

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

Scars as described in Section 7.

Height—feet 5 inches 5 Colour of eyes Grey.

Signature of Soldier (*for identification purposes*) [signature]

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*). INABILITY TO MARCH.

Disabilities Group (*b*). DEFECTIVE VISION.

Disabilities Group (*c*).

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

	Disease or injury to which the disability is due.	Place of origin.	Date of origin.
(*i.*) As to Group (*a*) above.	G.S.W LEFT FOOT WITH COMPOUND FRACTURE OF FIRST METATARSAL AND INTERNAL CUNEIFORM BONE	Vimy Ridge	15.5.17.
(*ii.*) As to Group (*b*) above.	DISORDER OF ACCOMMODATION BOTH EYES.	Canada	Unknown.
(*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? (i) No. (ii), Yes.

(*i.*) As to Group (*a*) above? No. If yes, has Active Service aggravated it?

(*ii.*) As to Group (*b*) above? Yes. If yes, has Active Service aggravated it? Yes.

(*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) Yes. (ii) No.

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

(*ii.*) As to Group (*b*) above? No.

(*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? No. (*iv.*) Where? (*v.*) When?

(*vi.*) Opinion of the Court?

6. HISTORY OF THE CASE. (*State concisely the essential points of the history, noting the entries made on the Medical History Sheet and other records.*) Went to France in January, 1917. Wounded on 15.5.17. at Vimy Ridge, while on duty in the trenches. Operated at 6th C.C.S. and again twice at 58th C.C.S. Then to 13th Gen. Hosp. at Boulogne. Admitted to Woking on 10.6.17. In bed until the 1st of September - No operations at Woking. Admitted to Epsom on 17.9.17. He has been taking Massage and Remedial Gymnastics since admission and has improved, but if he walks on it he has pain across the instep, and cannot sleep at night. He has a slight flesh wound left leg just above the ankle a few weeks before the above-mentioned.date. His eyesight is somewhat defective.

7. PRESENT CONDITION. (*Give previous and present weight if likely to indicate progress of disability.*) General condition is excellent. Two scars on outer side of left leg about 4 inches above external Malleolus. Three large scars across the dorsum of left foot, and a small scar in the centre of the left sole. There is slight atrophy of muscles of left leg. Left foot still somewhat swollen He has pains right through the centre of left foot on walking. X-Ray shows old fracture of left 1st metatarsal and internal Cuneiform. Eye Report, Westcliffe in November, 1916 R.V. 6/8 with correction 6/6 - L.V. 6/8, With correction 6/6. Horton Dec. 1917. - R.V. 6/36, with correction 6/9. L.V. 6/24, with correction 6/9. He has glasses now.

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

(*ii.*) If so, state what. Repair at C.C.S. & removal of F.B's.

(*iii.*) Was one advised and declined? No.

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? Yes.

(*ii.*) If so, describe. 3 uppers decayed.
1 puterscent root.
1 lower decayed. 2 puterscent root.

10. DO YOU RECOMMEND:—

(*a*) Fit for duty?

(*b*) Fit for base duty?

(*c*) Invalid to Canada? Yes.

(*d*) Discharge from the Service as permanently unfit?

Date of Report 13th December, 191 7. Signed FRED. C. MARIOT, Captain, C.A.M.C. Officer in medical charge of case.

Station EPSOM.

I have satisfied myself of the general accuracy of the above Report, and concur therein *except R.B.JENKINS Capt.CAMC. for { Officer i/c Hospital / S.M.O. Brigade } Strike out one of these.

Dated at Military Convalescent Hospital, EPSOM. Station, on 14 JAN 1918 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%.)
Fifty per cent.

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.*)
Four-fifths.

16. Permanency of the Pensionable Disability estimated next above in (15).
(*i.*) Is it permanent? No.
(*ii.*) If not permanent, what is its probable minimum duration (*in months*)? Six months.

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

18. Remarks. There has undoubtedly been a diffuse septic condition of the foot and lower leg which accounts for the swollen condition of the foot, and the pain in attempting to walk. A.F.B.117 noted.
"The soldier was not to blame".

19. Recommendation:—(*a*) Fit for duty?
(*b*) Fit for base duty?
(*c*) Invalid to Canada? Yes.
(*d*) Discharge from service as permanently unfit?

Classification for the Military Hospitals Commission. G.

Date of Board 11th January, 1918. *Signatures of the Board* A. H. CAMERON SMITH, Major, *President.* P.J.S. BIRD, Capt. C.A.M.C.

Station EPSOM. M.C.H.

Approved [signature] A.D.M.S.

Dated at for A.D.M.S., Canadians, London Area. Station Major, C.A.M.C.

A.D.M.S. CANADIANS, LONDON AREA, LONDON. 23 JAN 1918 191

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

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

Placed in Category "E" for discharge

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.

A F Laird Capt AMC *President.*
Capt AMC
Capt AMC } Members.

PLACE Armouries London Ont

DATE 16-5-18

APPROVED BY
E C Brink Capt AMC
For *Assistant Director of Medical Services.*

DATE 17-5-18

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.

Specialist report London Ont 8-5-18
Advise discharge,no further T surgical- Foot still tender but patient is a farmer and can do lots of workthat is not to Strenious and with frequ periods of rest Signed Hadly Williams
Taken from fyle and attached to board

A F I	1237	1
A F B	179	1
M F B	465	1

MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" issued by the B.P.C. and instructions issued by Militia H.Q., Ottawa, will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of Sections 1 to 17 of this Form and will obtain the signature of the 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 London Ont DATE 16-5-18

1. 1 (a) Unit # I Dist Depot (b) Regimental No 730263 (c) Rank L/Cpl.
(d) Surname A N D E R S O N (e) Christian name Frederick
2. Age last birthday 32 Date of birth 19-12-85
3. Enlisted at New Hamburg ont on 22-12-15

4. Personal description:—
(a) Height 5' 2 (b) Weight 130 (stripped) (c) Complexion Ruddy
(d) Colour of hair Black (e) Colour of eyes Blue (f) Identification marks 2 linear

5. Address after discharge (for the use of the Board of Pension Commissioners)
R R No 4 Bright Ont

6. Former trade or occupation Farmer

7. (a) Service

	Years	Days
111 th Bn.		
	PERIODS	
	From	To
# I District Depot	22-12-[illegible] 19-4-18	16-5-18

(b) Has he been overseas? Yes 8. Original disease or disability Gun shot wound left leg and foot

(a) Date of origin 15-4-18 (b) Place of origin France
(c) Cause* ~~Partial loss of function of left foot and leg~~ Bullet
(d) Present disease or disability Partial loss of function of left foot and leg

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.]

Soldier complains of tenderness over all scars on foot and leg. Walking for any length of timecauses pain in arch of foot and also shooting pains up to knee . Any pressure on fore part of foot causes pain over instep. Soldier walks with limp. After walking ¼ mile foot and leg are painful. Linear scar 2½" long lower third left legabove

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

9. Present condition.—(*Continued.*)

external malcolus another scar on leg 1" long posterior to previous scar
3 scars on foot two transverse about 2½" long another sides of instep.
and one large irregular scar below external malcolus of left foot at
ankle. dorsi flexion 85° plantar flexion 40° foot tender on these move-
ment; see specialist report back of page (4)

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

Nervous yes Digestive yes Respiratory yes Cardiac yes

Genito-Urinary yes Skin, Middle Ear, Eye or any other part. Yes 3 (3)s foot and leg

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

wounded on 24-4-17 subsequently operated on three times for removal
of bone fragments, and massage and electrical treatment for two month
in England (Sept and Oct. 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.

as described above

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

Not applicable

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

The regimental documents will be referred to.

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

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

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

Hospital in France England and C M C H London Ont

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.)

yes

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

17. Recommendations discharge yes

George Renton Lt Colonel
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

Anderson F.
AS
Signature of soldier examined.

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. In extension of left foot at ankle same as right but full flexion of left foot at ankle is 20° less than right ankle
There is no movement of abduction or adduction of left foot at ankle
There is atrophy of left calf muscle as follows, Circumference of right calf is 14" and left is 13". The position of the tender scars on either side of left instep hinders him from lacing up his boots properly as any pressure causes considerable pain

19. 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).	no
(d) Temporarily unfit,	(" D)	(Yes or No).	yes
(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).

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