1087036

C.E.F. REGIMENTAL DOCUMENTS

NAME ANDERSON, FRED JAMES REGT. No. 1039694 UNIT 239 BN. 230 BN. No. 8207

CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
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FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
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COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
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II H

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M.F.W. 2589
20M-4-46 (9113)
H.Q. 1772-49-1377

1.0 8th/036

Original

ATTESTATION PAPER.

No. 1087036

25th Battn C.O.R.

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 James
1b. What is your present address?	Lindsay Ontario.
2. In what Town, Township or Parish, and in what Country were you born?	Syracuse N.Y.
3. What is the name of your next-of kin?	Mrs Beatrice Anderson.
4. What is the address of your next-of-kin?	Durham St. Lindsay Ont.
4a. What is the relationship of your next-of-kin?	Wife.
5. What is the date of your birth?	12th April 1890.
6. What is your Trade or Calling?	Foreman
7. Are you married?	Yes.
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. 4th Battn 11 mos.
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 James 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.

Fred James Anderson (Signature of Recruit)

Date Nov 23/16 191 . J K Roberts o Pay Sgt (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Fred James 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 James Anderson (Signature of Recruit)

Date Nov 23/16 191 . J K Roberts o Pay Sgt (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 Lindsay this 23rd day of Nov 191 6.

E. J. Thomas J.P. (Signature of ~~Justice~~)

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

Description of Anderson Fred James on Enlistment.

Apparent Age 26 years 6 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

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).

1 Vac L. Arm

Height	5 ft 4 ins.	
Chest measurement. Girth when fully expanded	37 ins.	
Chest measurement. Range of expansion	4 ins.	
Complexion	Fair.	
Eyes	Grey.	
Hair	Auburn.	
Religious denominations. Church of England		
Presbyterian		
Methodist		
Baptist or Congregationalist		
Roman Catholic	X	
Jewish		
Other denominations (Denomination to be stated.)		

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 Nov 23/1916. 191 .

Place Lindsay Ont. R. T. Coulter
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 James 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.

J J Gleason (Signature of Officer)

Date Nov 23/1916 191 .

Anderson Original 1.087.036

MEDICAL HISTORY SHEET

ANDERSON

Surname ~~Anderson~~ Christian Name Fred James

Examined { on 23 day of Nov 1916
at Lindsay Ont.

Approved by N. St. Cowdrey
Rank Asst M.O.

Birthplace { City or Town Syracuse
County N York

Apparent age 26 = 6

Trade or occupation Fireman

Height 5 feet 4 Inches

Weight 144½ — lbs.

Chest measurement { Minimum 33 inches
Maximum expansion 37 inches

Physical development Good.

Small-pox Marks Nil.

Vaccination Marks { Arm ~~Right~~ / Left
Number 1

When Vaccinated last Childhood

(a) Marks indicating congential peculiarities or previous disease /

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

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

Date	Result	Vaccinations	
14/3/17		J. P. Bannister Capt. A.M.C.	M.O.
			M.O.
			M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.	
14/3/17		J. P. Bannister Capt. A.M.C.	M.O.
			M.O.
			M.O.

Enlisted on 23 day of Nov 191 6 at Lindsay Ont.

	Corps	Regt'l Number	Habits	Date
Joined on enlistment	252nd Bn	1087036.	Good.	23. 11. 16.
Transferred to	230th Bn	1087036	"	27. 2. 17.
	CANADIAN FORESTRY CORPS			
Auth:- Virtue of Para 10 A.C.I. 2 dated 1/2/17	10/54 Victoria St. LONDON S.W.1			27. 2. 17

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

Station	Date	Disease	Result
Mil. Cot	May 17. 17	Epilepsy.	Discharged N.B. Thomson. Capt
	18 MAY 1917		

Approved
Lennox Davis Major
CAPT.
FOR A.D.M.S. CANADIANS, SHORNCLIFFE.

PRESIDENT,
STANDING MEDICAL BOARD.

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

M. F. B. 313.
500M.—3-16.
H. Q. 1772-39-439.

Surname Anderson Christian Name Fred Jacques

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
Moore Barracks Hpl, Shorncliffe.	26537	12	4	17				Epilepsy.		Admitted with certificate of Capt F. W. Pethers Amc that he saw Pte Anderson in time of the service at or on or about 11th 1917 Heart & Lungs Neg. Wassermans & Mantoux Neg. B.P. 130/80	
										Boarded & invalided to Canada recommended	R.W. Leslie Capt Amc
H.M.H. Hethers	18	6	17	29	6	17		— do —		As above	T. Wakefield Capt RAMC

INVALIDED TO CANADA FOR FURTHER MEDICAL TREATMENT

E.D. Thomas

HOSPITAL REPRESENTATIVE FOR ADJUTANT GENERAL CANADIANS. MOORE BARRACKS HOSPITAL. SHORNCLIFFE.

MEDICAL OFFICE
16 APR. 1917
CANADIAN

IMPORTANT.

DISPOSAL OF ORIGINAL MEDICAL HISTORY SHEETS.

1. Action by Officer i/c Hospital—

(*a*) See that all entries are properly and fully made, and signed.

(*b*) Forward to Hospital to which man is transferred, immediately it is done. If discharged to Unit—to Officer Commanding such Unit.

2. Action by Officer Commanding Unit—

(*a*) On admission of man to Hospital, forward M.H.S. to such Hospital at once.

(*b*) On transfer to another Unit—to Officer Commanding such Unit

(*c*) On proceeding Overseas — return to Record Office, London, without delay.

(Authority, Army Council Instruction 831, April, 1916.)

239th BATT. C. E. F.
RAILWAY CONSTRUCTION CORPS

ORIGINAL

ATTESTATION PAPER.

No. 1039694

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. James.
1b. What is your present address?..... Brandon. Manatoba.
2. In what Town, Township or Parish, and in what Country were you born?..... Syracine. N.Y. U.S.A.
3. What is the name of your next-of kin?..... Beattrice. Anderson.
4. What is the address of your next-of-kin?..... Lindsay. Ontario
4a. What is the relationship of your next-of-kin?. Wife.
5. What is the date of your birth?..... April. 12. 1890.
6. What is your Trade or Calling?..... teamster.
7. Are you married?..... yes
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?.. np
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, Fred James 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.

Fred. J. Anderson (Signature of Recruit)

Date Sept. 26 191 6. John Thompson (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Fred James 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 J. Anderson (Signature of Recruit)

Date SEpt 26 1916, 191 . John Thompson (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 Brandon this 26th day of Sept 191 6

D.B. Stinwell (Signature of Justice)

M. F. W. 28
750M—8-16
H. Q. 1772-89-841

Description of Fred James Anderson. on Enlistment.

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

Height	5	ft 5 ins.
Chest measurement. Girth when fully expanded		ins.
Chest measurement. Range of expansion		ins.
Complexion	Fresh	
Eyes	Grey	
Hair	auburn	

Religious denominations.
- Church of England
- Presbyterian
- Methodist
- Baptist or Congregationalist
- Roman Catholic R.C.
- 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).

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 Sept 26th 1916. W B Grant Lieut Colonel

Place Winnipeg 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 James 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.

J B L Macdonnell major (Signature of Officer)

Date 5th October 1916.

239th BATT. C. E. F.
RAILWAY CONSTRUCTION CORPS

ORIGINAL
1039694

MEDICAL HISTORY SHEET

Surname Anderson · *Christian Name* Fred. James

Examined { on 26 day of Sept 1916
at Winnipeg

Birthplace { City or Town
County

Apparent age 26 years

Trade or occupation Teamster

Height 5' feet 5" Inches

Weight 145 lbs.

Chest measurement { Minimum 34 inches
Maximum expansion 36½ inches

Physical development Good

Small-pox Marks none

Vaccination Marks { Arm Right — Left 1
Number one

When Vaccinated last Childhood

(*a*) Marks indicating congential peculiarities or previous disease none

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

Approved by J. B. Grant
Rank Lieut Colonel 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	
5/10/16	+	R. H. Ross	M.O.
			M.O.
			M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.	
5/10/16	A+B 500 Million	R. H. Ross	M.O.
			M.O.
			M.O.

Enlisted on 26 *day of* September 1916 *at* Brandon

	Corps	Regt'l Number	Habits	Date
Joined on enlistment	239th Batt O.S.R.C.C.	1039694		
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

Station	Date	Disease	Result
Valcartier	Oct 5/16	Old contusion of back & ankle	Discharged. [signature] Lieut. A.D.M.S. Valcartier Camp, P.Q.

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

M. F. B. 313.
500M.—3-16.
H. Q. 1772-39-439.

Surname Anderson Christian Name Fred James

STATION	Date of Arrival at the Station	Dates of Admission into Hospital			Dates of Discharge from Hospital			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
		Day	Month	Year	Day	Month	Year				

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. 1039694 Rank Spr. Name Anderson, F.J.

Corps 239th Battn, C.E.F. who was* discharged

On OCT 26 1916 191 , to

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 26th Septr, 191 6, to OCT 26 1916 191 , the inclusive date of transfer or discharge.

Dr.	$	c	Cr.	$	c
Bal. Dr. from prev. month			Bal. Cr. from prev. month		
Advances by Cheques No 682	5	00	Regt'l Pay 31 days at $ 1.00 c	31	00
No.			Field Allow. 31 days at $ c .10	3	10
Assigned Pay No. 701	20	00	Other Allowances*		
Other Charges*					
Payment on transfer or discharge No. 807	9	10	Other Credits*		
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)		
Total	34	10	Total	34	10

*Give Particulars.

A monthly stoppage of $ 20.00 (†) has (‡) been paid on account of Assigned Pay for the month of October 1916 to (Assignee) Mrs Beatrice Anderson,

(Address) Bracebridge, Ont,

(†) 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 26-9-16

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

(3) cause of discharge and authority Para 322-2-C K.R.& O 1910, C.O.1220 of 7/10/16

If discharged from the Contingent, state if Stop Payment advice for Assigned Pay has been forwarded, and date

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

Date OCT 26 1916

Place Windsor, N.S.

Mat Lowe Campbell
Paymaster

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

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

M. F. W. 44.

200M.—6-16.
H. Q. 1772-39-903

0394-7-14

I. G. A.
JUL 15 1919

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

OTTAWA, CANADA.

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

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

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

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

1. Christian Names Fred James 2. Surname Anderson

3. Rank Pte 4. Original Unit Can Forestry Corps 5. Reg. No. 087036

6. Address, in full, to which future payments of gratuity are to be forwarded
Fred James Anderson Lindsay Ont
No 6 Vinny St. Lindsay

7. Date of enlistment in the C.E.F. 23 November 1916

8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge Mrs Beatrices Anderson

9. Relationship of such dependent Wife

10. Present address, in full, of such dependent Mrs Beatrices F. Anderson
No 6 Vinny St Lindsay Ont

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:—
Canadian Forestry Corps overseas
27 March 1916 untill July 1 1917

13. Were you on the strength for pay and allowances of the Clearing Services Command, having been at any time on duty outside of Canada or the United States ? Yes in Fra overseas

14. Were you on active service only in Canada or the United States ? If so, give particulars of units and dates of such service 26 September 1916 untill
26 of October Discharged 1916

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 239 Bath Railway Construction Corps
26 September 1916 untill 26 October 1916
23rd November 1916 untill 10 octo - 1917

16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department Not Applicable

17. Were y u a member of the Permanent Force at the time of enlistment in the C.E.F.? Not Applicable

M.F.W. 2595.
1772—39—1389.
122—D.P.—250M-2-19.

18. Have you had more than one enlistment? If so, give particulars of discharges and re-enlistments, and under what regimental numbers and units. No 1039694 Sapper Railway Construction Corps Sept 26-1916 October 26-1916 re enlisted 23rd November 1916 C 230 Batt Canadian Forestry Corp Discharged 1917 one year and a Half Month services all Total

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 .. Wife and I have received 159 Dollars Post Discharge Pay 159 Post Discharge Pay

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

21. Have you, during the present war, served in the Imperial Forces? Not applicable

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 ..... Not Applicable

23 (a) Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England ..... No.....
(b) If so, was such reversion in consequence of misconduct or inefficiency? Not Applicable

24. Are you now serving in the C.E.F. Not Applicable. If not, give:—(a) Date of discharge .....(b) Reason for discharge ..... Not applicable

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 ..... Not Applicable

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 ..... Only Seen Service In England

27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment?.....
(b) If so, are you in receipt of full pay and allowances from that Department? Not Applicable

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:

Place of Residence:

Declared before me at:

This day of 19....

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

POST DISCHARGE PAY.

Date paid	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
Dec 14-17	33.00	20.00		
Jan 16-17	33.00	20.00		
Feb 19-17	34.10	20.00		
Total Amt				

Certified Correct. $160.10

C Elmer Knapp

District Paymaster.

Form R 122
2353—100M—9-12-16.

J.P.

Rank Name ANDERSON, Fred James. Reg'l No. 1087036.

Unit Dft 230th Bn. If in perm. Corps, What Unit? Married or Single Married.

Place and Date of Enlistment Lindsay. 23rd Nov.1916. Place of Birth Seracuse. N.Y.

Name and Address, Next-of-Kin Mrs. Beatrice Anderson.
Durham St. Lindsay. Ont. Relationship Wife.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

N/E. R.B. No. 432
File R.L.
Category DRCan

Discharge, Date and Place Reason PK. Character

H. W. V., Ld.—9546-16.

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.
23.3.17	C.F.C.	Arrived in England.	T.O.S. London	15.3.17	P.II D 071 Epilepsy
23-4-17	Cas. "	Adm Moore Bks Hfx S'cliffe	London	13-4-17	C.h. 74 P.II 98
25.5.17	C.F.C.B.D.	On Strength	Sun/dale	1.5.17	P.II 23.
26-6-17	cas C.F.C.	Desch. Moore Bks Hfx. Shornclyffe		18-6-17	C.h. 114
15.8.17	C.F.C.B.D.	S.O.S. to Canada for disch.	S'dale	18.6.17	P.II 94.
	Disch Depot	To Convl Home.	M.D. NO. 3 Kingston	1.8.17	N.R. 309

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.	
Date.	From whom received.					

Forms
I. 1237
12

Boarder for Imoaldy case

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
26537	1057036	Pte.	Anderson	Fred J.
Year	**Unit.**		**Age.**	**Service.**
1917	C.F.C. Base Depot		26	4/12

Station and Date.

Moore Bks Can Hosp. 24.12.17

Disease Epilepsy :—

Complaint :— Loss of consciousness + convulsions

Duration :— From Age X to date

Family History :— Mother was subject to epilepsy & died in a seizure. One brother is subject to epilepsy. One sister had fits.

Past Illnesses :— Nothing serious. No venereal disease.

Present Illness :— Has had epileptic seizures since he was ten years of age. In the summer time has fits very frequently. Has fits on average of once a month. Last fit on April 11th '16 & Capt Petrie C.A.M.C. certifies that he saw Pte Anderson in Epileptic seizure on that date.

Enlisted in 239th C.F.C. in Sept '16 Discharged because of fits after 2 months service. Reenlisted in 25.2 in Nov '16.

Examination :—

Heart :— Reg

Lungs :— Reg

Urine :— Analysis :—

Wasserman :— neg

Blood pressure :— 130/80

P.C. Everton Capt A.M.C.

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

(44502) Wt. W 11203—M 1150. 1,450,000. 6/12/16. C.F.& S. Forms/I. 1237/12. (E239)

P.T.O.

Station and Date.	
Aj 27/16	No 15 Smn admission Boarded & invalided to Canada recommended R Ernest Capt RAMC

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. 1087036 Rank Pte. Name Anderson, F.J.

Corps 230th Battalion who was* discharged

On October 10th 1917, to Class 1, Civil Life.

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from September 1st 1917, to October 10th 1917, the inclusive date of transfer or discharge.

Dr.	$	c	Cr.	$	c
Bal. Dr. from prev. month	3	60	Bal. Cr. from prev. month		
Advances by Cheques No.			Regt'l Pay 40 days at $ 1 c	40	00
Advances by Cheques No.			Field Allow. 40 days at $ c 10	4	00
Assigned Pay No. & S.A. 9327	50	00	Other Allowances* Clothing	13	00
Other Charges*			Separation Allowance	26	00
Payment on transfer or discharge No. 9328	55	60	Other Credits* Subs. D.O. 240	25	00
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)		
Total	108	00	Total	108	00

*Give Particulars.

A monthly stoppage of $ 20.00 (†) has (‡) been paid on account of Assigned Pay for the month of September 1917 to (Assignee) Mrs. Beatrice Anderson,

(Address) 72 Durham St.,

Lindsay, Ont.

(†) 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 S.A. paid to date of discharge

(3) cause of discharge and authority MD-88-A-43.

If discharged from the Contingent, state if Stop Payment advice for Assigned Pay has been forwarded, and date

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

Date September 18th, 1917.

Place Kingston, Ont.

Paymaster, C.A. Unit M.H.Q.O.

Paymaster

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

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

M. F. W. 44.

200M.—6-16.
H. Q. 1772-39-903

cheque # 9328 attached.

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 Canadian Forestry Corps.

(2) Regimental Number 1087036

(3) Full Name of Soldier Fred James Anderson

(4) Place of Birth Syracuse New York

(5) Are you married, or not ? Yes.

(6) If married, state,
(a) Full name of your wife Mrs. Beatrice Anderson

(b) Present Postal Address 72 Durham Street Lindsay Ontario

(7) Are you a widower ? No.

(8) Have you any children ? No

If so, give number of boys and girls

Also their names and ages

M. F. W. 67.

200M.—3-16.
1772 39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive ? No

If so, state name and address —

(10) Is your Mother alive ? No

If so, state name and address —

(11) If your Mother is a widow No

Are you her sole support, or not ? —

(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.

—

(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.

Yes.

(15) Are you insured ? No

If so, in what Company ? —

Have you made arrangements for payment of your Insurance premium —

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

R. McClaughry Maj.
Officer Commanding.
O.C. 230th Btn.

Date March 28th 1917

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 252nd O. S. BATTALION, C. E. F.

Regimental No. 1087036. Rank Private. Name ANDERSON FRED JAMES.
C. E. F.

Enlisted (*a*) 23.11.16. Terms of Service (*a*) War and 6 mos. Service reckons from (*a*) 23.11.16.

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*) Fireman.

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				
		Transf'd to 30th Bn on 29.2.17.			
		Auth:- Verbal from Adjt 2nd Bn on 29.2.17.			
		Embarked	Halifax	3/3/17	
		Disembarked	England	15/3/17	
23.3.17	D of T.O.	T.O.S. C.F.C. (Draft from Canada)	London	15.3.17	D.O.Pt.II No.71 Lt. & Asst/Adjt.C.F.C.

INVALIDED TO CANADA FOR FURTHER MEDICAL TREATMENT

HOSPITAL REPRESENTATIVE FOR ADJUTANT GENERAL CANADIANS MOORE BARRACKS HOSPITAL, SHORNCLIFFE.

(*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				

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. 239th O/S RLY. CONST. CORPS

Regimental No. 1039694 Rank Gte Name Anderson Fred James

C. E. F.

Enlisted (a) 26-9-16 Terms of Service (a) Duration of War Service reckons from (a) 26-9-16

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) .....

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				

(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				

Army Form W. 3212. (In books of 100.)

Regtl. No., Rank and Name 108036 Pte Anderson F. Corps 6 of C

Disease Epilepsy Hospital MBCK

To Officer i/c Laboratory. Ward 16

Please carry out an examination of the accompanying specimen of blood

with special regard to Wassermann

Date 16.4.17 R E Carlson Capt

O. i/c Ward.

15

LABORATORY REPORT.

NEGATIVE

Date of Examination

CANADIAN MOBILE LABORATORY
18 APR 1917
FOLKESTONE

K. F. Johnston Captain, O.C.
No. 2 Canadian Mobile Laboratory,
FOLKESTONE
O. i/c Laboratory.

W 12965—6740 200,000 11/15 H W V (M 875) Forms/W. 3212/1
1439—480 200,000 5/16

LABORATORY REPORT

Base Depot, Canadian Forestry Corps,
Smith's Lawn, Sunningdale, Berkshire.
11th. April 1917.

From:- The Medical Officer,
Base Depot, Can.Forestry Corps,

to :- The Officer Commanding,
Moore Barracks Hospital,
Shorncliffe. Kent.

No.1087036.
Pte.Anderson,F.J.

I hereby certify that No. 1087036. Pte. Anderson, F.J. had attacks of Epileptic Fits on April 11th. and was seen by me in those fits, having ten fits in succession.

Please have the men boarded from Hospital.
For your information please.

(Sgd.) F.M.Petrie, Captain.
C.A.M.C.

26-9-16

282

L. L. Job 4503.—M. & D. 6332

MILITIA AND DEFENCE

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

SEPARATION ALLOWANCE

Name Beatrice Anderson

Address Bracebridge, Ont.

Relation to Soldier wife, child or mother } "Wife"

Name of Soldier Anderson, Fred James

Regtl. No. 1039694

Rank Pte.

Corps 239th. Battn.

To what Corps belonging when called out }

PAYMENTS

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

ACCOUNT CLOSED
DATE.....PER.....

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

334- F - 1

Name Anderson, F. J.
Surname Christian Name

Regimental Number 1087036 Rank Pte.

Unit 230th Bn.

Original Unit

District where paid M.D.3.

Date of Discharge 10-10-17.

P. D. P. Filing Number 8-34-3.

Address (in full) 28 William St.,
Lindsay, Ont.

Rates:—Regimental pay $1.00 per diem: Field Allowance $ .10 per diem. Separation Allowance $20.00 per month.

L. L. 22573—M. & D. 8000.

Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Over-payments to be Recovered	To Am P
	Cheque No. A	Date	Amount 30 days	Cheque No. B	Date	Amount 30 days	Cheque No. C	Date	Amount 31 days		
160 10	676	14-12-17	5300	662	16-1-18	53 00	664	19-2-18	54 10		160

M. F. W. 127.
50M—6 17.
1772 33-1140.

Remarks:

File No. 0374-F-14 15.7.19 W62.

WAR SERVICE GRATUITY.

Register No. A-3-22

Reg. No. 1087036

Name Anderson D.O.

Address 6 Verney St, Lindsay, Ont.

Pay Soldier $ 109.90

Wh. Harrison
P. May
Can Treas

Clerk

Dependent Mrs Beatrice Anderson,

Address 6 Verney St, Lindsay, Ont.

Pay Dependent $ 30.00

Days 92 · Rate 100. Due 300.

Less P.D.P. credited 160.10

Less further Dr. Bal. or overpayment.

Net 139.90

R. W. 109 18-9-19

Date	Ck. Order	Ck. No.	Amount	Remarks.	Date	Ck. Order	Ck. No.	Amount.
1 29/7/19	3082	30/7/19 49606 3	109.90		29/7/19	3083	30/7/19 49606 4	30.00
2					2			
3					3			
4					4			
5					5			
6					6			

495-D.P.-100M-6-19 (10248).

GEN'L AUDITOR
Posting checked by
.....
Date 29-7-19

M. F. W. 41
1 0M—7-16
1772-39 889.

(568)

Name Anderson F.J. (Pte)

Regimental No. 1087036 (725768)

Unit 230 Bn

Date of enlistment

Place of " S.A. 20 00/.. 23 11/16 45 31 7/17

Married (yes or no) Yes.

Amount of pay assigned monthly $ 20 00/.. 1 3/17 45 30 6/17

To whom payable Mrs B. Anderson
72 Denhamstn
Lethbn 29.6.17 Lindsay

Name and address ~~of next-of-kin~~ Lindsay Ont.

Convalescent Home Rec 2.7.17

Date and place discharged

Reason for discharge

Character on discharge HQ 649. a 4833
Class 2

5b 5351—M. & D. 6880.

Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
	28 5/17							37								Eng L.P.C.
29 5/17.	31 7/17.	64	100	64 00	64	10	6 40		70 77					30 00		D D Halifax
													20 00			June
Bal Cr. on Sgs.				20 77					70 77							Aug 1/17 Chq
																Letter to Asap Asst. of a/c for June 5/8/17
																E & A P 31/8/17

M. F. W. 41
1 0M—7-16
1772-39 889.

Name.....

Regimental No.

Unit

Date of enlistment

Place of "

Married (yes or no)

Amount of pay assigned monthly $

To whom payable

Name and address of next-of-kin

Date and place discharged

Reason for discharge

Character on discharge

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

18-3-16

280

L. L. Job 88773—M. & D. 6195.

M. F. W. 11.
20m.—11-15.
H. Q. 1772-39-818.

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

F. J.

Name Beatrice M. Anderson

Address Lindsay Ont.

Name of Soldier Anderson, F. D.

Regtl. No. 725168 or 1087036 in 25th Bn

Rank Pte

Corps 109 Batt

Relation to Soldier wife, child or mother: Wife

To what Corps belonging when called out

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			Pacifier thought deserted & anonymous letter 1 June 26 16.
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
Apl.				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

ACCOUNT CLOSED
DATE JUL 8 - 1916 PER W

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

PAYMENTS.

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

Sheet No. 2.

L. L. Job 89002.—Req. 6213.

Beatrice M. Anderson Wife

Name of Soldier Anderson, T. D

425168 Rte

Month.	Year.	Cheque No.	Amt.	Remarks.
		S1491	28 -	
April	1916	P120	~~28~~	28 P.120 Cancelled Rewrite -
May		T5879	20	20
June		D2015	20	20
July		L10131	20	20 L10131 Cancelled
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

ACCOUNT CLOSED

DATE JUL 8 - 1916 PER W.

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier .....

PAYMENTS.

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

26-9-16.

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS.

PAYMENTS.

M. F. W. 11a.
50m.—6-16.
1772—39—813.

Sheet No. 2. Beatrice Anderson Wife Name of Soldier Anderson, Fred James Pte.

L. L. Job 4503.—Req. 6832.

Month.	Year.	Cheque No.	Amt.		Remarks.
April	1916				
May					
June					
July					
Aug.					
Sept.					
Oct.		L 21651	23	23	Q 23732 London
Nov.		~~Q 23732~~	~~20~~	20	Dis 26/10/16 pmt 27/10/16
Dec.					
Jan.	1917				
Feb.					ACCOUNT CLOSED
March					DATE..... PER.....
April					
May					
June					
July					
Aug.					
Sept					
Oct.					
Nov.					
Dec.					
Jan.	1918				
Feb.					
March					
April					
May					
June					
July					

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier_____

PAYMENTS.

Month.	Year.	Cheque No.	Amt.	Remarks.
Aug.	1913			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1919			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1920			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				

L-L. Job 5470—M. & D. 6888

Wife

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

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

F. J. W. J.

To Whom Mrs. Beatrice Anderson

Address 72 Durbane St
Lindsay
Ont.

By Whom Assigned Anderson

Regtl. No. 1087036

Rank Pte

Corps 230 Bn.

Rate ~~15.00~~ 20.00 × 20.00 APR 1 1917 March 1/17.

app P.2, 10. 18/5/17.

P.6. 148 Bar. 3/4/17

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

COPIED FOR 2 CASUALTIES.

Acc closed.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a.
50m.—7-16
1772—39—819.

Sheet No. 2. Mrs Beatrice Anderson Wife (Assignee)

Name of Soldier Anderson H. J. No 1087036 Pte 230 Bn.

L. L. Job 5470—Req. 6888.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			~~20 75~~ 20.00 March 1/17 ~~MAR 1 1917~~
May				
June				A.P. overpayment 20.00 June 1917
July				recovd by C.P. auth. J.T.C. 2649 A.4833
Aug.				C.P. letter 15/8/17 on file 0364-P-14
Sept.				L. Perkins 20/8/17
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April		A5493	15	20
May		J6355	15	"
June	L17816	~~J12969~~	~~15~~ 50	" Cancel J 12969.
July		~~J19741~~	~~20~~	50. B. J 12969 Cancelled Cheque Taken June Cheque 50.00
Aug.				Cancelled B
Sept.				$ 80
Oct.				A/c Closed 30/6/17
Nov.				Rct'd per Letter
Dec.				Date 18/6/17 F. X. 27/6/17
Jan.	1918			Clerk JWG
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.				

23 11/16

L. L. Jo[illegible]3.—M. & D. 6832.

MILITIA AND DEFENCE

M. F. W. 11.
50m.—6-16.
H. Q. 1774-39-813.

SEPARATION ALLOWANCE

Name Beatrice Anderson

Address 72 Durham st. Lindsay Ont.

Relation to Soldier wife, child or mother } Wife

Name of Soldier Anderson Fred Jas

Regtl. No. 1087036

Rank Pte

Corps ~~230th 27/2/17 Dpml 3/3/17 WB~~ ~~232~~ 2nd Batt. Cdn. 6th Unit N.H.G. 6/8/17 #3 Dpml 23/10/17 #4 9/10/17

To what Corps belonging when called out }

PAYMENTS

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

COPIED FOR 3 CASUALTIES.

CONSOLIDATED 4 ACCOUNT

ACCOUNT CLOSED PER ..... DATE .....

W—

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

M. F. W. 11a.
50m.—4-16.
1772—39—818.

Sheet No. 2. Beatrice Anderson Wife PAYMENTS. Name of Soldier Anderson Fred Jas Pte

L. L. Job 310.—Req. 6574.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.		D 27250	25	25 Jw
Jan.	1917	D 28283	20	20
Feb.		D 31103	20	20
March		D 34181	20	20
April		62440	20	20
May		63694	20 → 125.00	20
June		F 74558	20	20
July		E 10502	20	20
Aug.			~~20~~	
Sept.			$165.00	
Oct.			A/c Closed	
Nov.			Ret'd per	Ret'd per Letitia
Dec.			Date	Date X 18/6/17 F. X 20/7/17
Jan.	1918		Clerk	Clerk LC
Feb.				Struck off 10/10/17
March				#3 D Bon L 22/7/17
April				
May				
June				
July				

ACCOUNT CLOSED
DATE ..... PER ..... W

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier .....

PAYMENTS.

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

FORM D.M.S. 1300.
8137—50m—28/2/17.

Surname	Christian Name or Names	Reg. No.
Anderson	F.J.	1087036

Rank Pte Unit Fors. Corps Co. Troop Batty.

Hospital Moore Bks. Date of Admission 13-4-17

Transferred Hosp.

Hosp.

Hosp.

Hosp.

Diagnosis Epilepsy Rw.

(1)
Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

DISPOSITION

C.L. 23-4-17 74
16.6.17 114

Date

D/S. 18.6.17

REMARKS

To Canada per HS Letitia.
fromLiverpool. 18-6-17.

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

EPITOME OF HOSPITAL TREATMENT.

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

Form D.M.S. 1317.
1202—15m—21/11/16.

V

HOSPITAL.

A. & D. No. 26537 Ward 16.

Unit C. F. C. Base Depot. Sick or Wounded.

Regtl. No. 1084036 Pl. of Act'n

Rank Pte. Name Anderson. Fred J.

Age 26 Religion RC

Service Compl'd 4/12 Time with Field Force

Diagnosis Epilepsy

Admitted 12-4-17 Discharged 18.6.17 To Canada ~~22.5.17 To Canada~~

Transferred

Lindsay RECORD FURTHER REMARKS ON BACK. No. No. 235

77
81
31
17

MEDICAL HISTORY SHEET.

Orig. recd. from C. F. C. 18/4/1917.
Dup. recd. from ..../..../191 .

Orig. sent to ..../..../191 .
Dup. sent to ..../..../191 .
Received in the Registrar this 21st. ..../..../191 7
J. Swallow Lieut.

No. 1087036 RANK Pte NAME Anderson, F. James

T.O.S. 23-11-16. UNIT 252nd Battalion

D.H.H. of 23-11-16.

M.D. 3.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916.	1916.			
Nov 23	Nov 30	C		
	Dec	C		
1917.	1917.			
Jan 1	Jan 31	C		
	Feb	C	Trans to 230 Battalion Now shown on 230th Bn. Ahero 28-2-17	D.H.49 of 27-2-17. D.O. 263 / 8-3-17

REGT'L. NO. 108 70 36

H. Q. FILE NO. 649

NAME Anderson D. J.

RANK AND CORPS Pte. Can Forestry Corps

FOLLOWS NO.

FOLLOWS

CABLE NO.	CABLE DATE	NATURE OF CASUALTY
1338	25-6-17	Sailed from Liverpool for Canada per H. S. Letitia on the 18th June 1917. Epileptic

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
74.	Moore Bks Can. Stores	13-4-17	Epilepsy
114	Leuch	5-6-17	"
192.	M.A.C.C. Kingston	9-7-17	Adm. Queen's Mil. Hosp
194.	" " " " "	10-7-17	Class 2 Trans for 2. M. H.
207.	" " " " "	25-7-17	Outpatient Taken on List Queen
210.	" " " " "	27-7-17	" " " " "
240.	" " " " "	27-8-17	" " " " "
238.	" " " " "	25-8-17	Struck off List Queen's
268.	" " " " "	10-10-17	Disc from M. S. service " Class

FORM R. 149.
7106—250m—7/2/17.

Fred James.

1087036

Name Anderson Rank Pte. Reg. No. ~~101323~~

Unit Can. Forestry Corps.

Next of Kin Canada.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1917.						
13-4.	Moore Bks Can Hosp	Shorncliffe	Chilblains	7/4		
18.6	Discharged		do	1/4	✓	

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

Number 1087036 Rank Pte

Surname ANDERSON

Christian Name Fred James

Units C.M.C. Theatre of War England

Date of Service 15-3-17

Remarks

Latest Address 72 Dunham St, Sunday, Ont

Roll No. Reg 4354

200m.-6-21.

.....

R RANK SURNAME INITIALS UNIT

....

al address.....
(Street) (City or Town) (Province)

one person to be notified of arrival.....

.....

Station in Military District to which a furlough warrant is required.....

..... Railway.....

d, is your wife on board.....Number of children on board.....

stination.....

(Sgd.).....

V. 2502.

-1-19.
—1269.

DESP. FEB 8 1923
REGN. NO. 11327

No. 1039694 RANK Spr. NAME Anderson. H. J

T.O.S. 26-9-16 UNIT 239th Battalion (Railway Const. Corps)
D.O. 105 of 4-10-16

M.D. Vol.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC. PARTICULARS	AUTHORITY
1916 Sep. 26	1916 Oct. 26	V	Discharged 26-10-16	D.O. 128 of 27-10-16
			a/c closed by payment. S	

UNIT SAILED
DEC 15 1916

Date of Enlistment

23/11/16

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

RATE OF SEPARATION ALLOWANCE

20			

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No. 1087036

Rank Pte. Promoted Reverted Discharge

Soldier's Name Fred Jas. Anderson

Battalion 230th Battn

Beneficiary Mrs Beatrice Anderson

Relationship Wife

Address 72 Durham St Lindsay Ont.

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
30/9/17		165	80	245	

a/c closed 30/6/17 Returned per Letitia -

M. F. W. 128
400M.—6-17—1772-39-1141
L. L. 22320—M. & D. 7493.

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. 7668.

(At Station or Hospital where finally disposed of.)

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

Date .....

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

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

Date of final Medical Board or decision. } .....

Administrative Medical Officer.

DETAILED MEDICAL HISTORY OF INVALID.

Militia Form B. 227.
150 m—5-16.
H. Q. 1772—39—117.

Station
Corps
Regimental No. Rank
Name
Disability
Date

Hospital or Station transferred to for final disposal. }
Date of final disposal }
How finally disposed of }

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

A.B. Grand. Captain.

MEDICAL HISTORY OF AN INVALID.

1. Station. Valcartier.
2. Regiment or Corps. 239 Bn.
3. Regimental No. and Rank. 1039694 Pte
4. Name. Anderson. F.J.G.
5. Age last Birthday. 26
6. Enlisted on Sept 26/16 at Brandon.
7. Former Trade or Occupation. Teamster.

8. General remarks on his :—
   (a) Conduct. good
   (b) Habits. good
   (c) Temperance. Temp.

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

Date. Oct 5/16

DEPT. MILITIA & DEFENCE NOV -5 1916 H.Q. 649-A-2475 CANADA

9. Service. Years. 9 Days.

	PERIODS.	
	From.	To.
239 Bn.	Sept 26/16.	Oct 5/16

10. (a) Disease or disability. ① Old Contusion of back ② Sprained Ankle.
    (b) Date of origin. ① Two years ago. ② 1 yr. ago.
    (c) Place of origin. ① Brandon. ② Brandon.
    (d) Cause. ① fell from Cab. ② Caught in R.R. Track.

11. Present Condition. (Most Important).
    (To include full description of present disabling condition or conditions.)

General condition fair.
He is somewhat anaemic.
He states that he never has been able to do heavy work because of his weak back & cannot walk for because of the old injury to the ankle. He was told he could get back as a driver & owned nothing to do work.

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

M. F. B. 227.
150 M—5-16.
1772-39-117.

HALIFAX NOV 2 1916 59-A-117 Landed 13-11-16 J.G.

13. (a) For purpose of Identification. (Here a full description of wounds, scars, deformities, etc., is to be given.) — none

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

(c) In the event of the disability being attributed to exposure on duty, state clearly the nature of such exposure, and whether it was exceptional or otherwise. — not applicable

14. Treatment — none.

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

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

17. To what extent will it prevent his earning a full livelihood in the general labour market? Please state in fractions. — nil.

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

D.A.M.S. Captains

Medical Officer by whom the case is brought forward.

OPINION OF THE MEDICAL BOARD.

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

10.
11.
12.
15.
16.
17.

} yes

18 Is he unfit for Military Service.

yes.

Recommendations:

That he be discharged.

Signatures:— A MacLardick President.

Captain

J Warnock Captain Members.

J Grant Captain

Station. Valcartier.

Date. Oct 5/16

VALCARTIER CAMP, P.Q. ASSISTANT DIRECTOR MEDICAL SERVICES OCT 6 1916

Date.

Asst. Director of Medical Services.

Approved.

Date. 10/16

Director-General of Medical Services.

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.

1

Proceedings on Discharge.

No 239.

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

No.	1039694
Rank	Sapper
Name NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.	Fred James Anderson
Corps (Squadron, Battery or Company)	239th Batt 7s Ry Const. Corps.
Date of Discharge	October 26th 1916
Place of Discharge	Windsor. N.S.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age	26 years 6 months.
Height	5 feet 5 inches.
Complexion	Fresh
Eyes	Grey
Hair	Auburn
Trade	Teamster
Intended place of residence (To be given as fully as practicable.)	Brandon Man.

Descriptive Marks

Nil

2. The above-named man is discharged in consequence of being "medically unfit" Para. 322-2-c K.R&O 1910 Camp Order 1220 dated 7-10-16.

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 B.L.M.

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.)

M. F. B. 218.
50m.—3-16.
H. Q. 1772-39-113.

(OVER)

Printed 9-17 9M8

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) Windsor N S — J B L Macdonald Major

(Date) October 26th 1916 — *Commanding* 239th Bn 03 RCC

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) Windsor N S — Fred. J. Anderson *(Signature of Soldier.)*

(Date) October 26th 1916. — F. L. Anderson *(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).....years 31 days.

Total.....years 31 days.

11. **Confirmation of Discharge.**

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

(Place) Windsor N.S

(Date) October 26th 1916. — *(Signature)* J B L Macdonald major

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.)

No reservations

Fred. J. Anderson
Signature of Soldier

(OVER)

PENSIONS AND CLAIMS BOARD, Canadian Expeditionary Force, assembled at England, on the day of 191

Members of Board.

LIEUT.-COL. SIR H. MONTAGU ALLAN, C.V.O., *President*.
LIEUT.-COL. W. GRANT MORDEN.
LIEUT.-COL. D. McLEAN
MAJOR R. RAIKES, C.A.M.C.
MAJOR HUME BLAKE.
MAJOR T. H. MACDONALD, C.A.M.C.

Proceedings.

The Board having considered the evidence of the man marginally noted, and the documents submitted, hereto attached, which form part of these Presents, marked

President.
Lt.-Col.

Lt.-Col.

Major, C.A.M.C.

Major.

Major, C.A.M.C.

Wd 11. Local

D.M.S. 1312.
Army Form B. 179.
Canada.

Medical Report on an Invalid.

Station Moore Barracks Hospital

Date May 14th 1917

DEPT. OF MILITIA & DEFENCE
OCT 3 1917
H.Q. CANADA

1. Unit 23rd Bn 30 Bn C.F.C. Base Depot
2. Regimental No. 1087036
3. Rank Pte
4. Name Anderson Fred J
5. Age last birthday 26
6. Enlisted on 23 Nov 1916 at Lindsay Ont.
7. Former Trade or Occupation Fireman.
8. Disability. Epilepsy.

HOSPITAL REPRESENTATIVE FOR ADJUTANT GENERAL CANADIANS. MOORE BARRACKS HOSPITAL SHORNCLIFFE.

INVALIDED TO CANADA FOR FURTHER MEDICAL TREATMENT

Statement of Case.

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.

9. Date of origin of disability. Before enlistment.

10. Place of origin of disability. Before Canada.

11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case. Invalid states that he has had epileptic seizures since he was ten years old. In the summer time they occur more frequently. Has fits on an average of once a month. Enlisted in 239 C.E.F. in Sept 1916 & was discharged because of epilepsy. Reenlisted in 23rd Bn in Nov. 1916. Mother died of epilepsy & one brother is subject to fits.

12. (*a*) Give your opinion as to the causation of the disability. Before enlistment

(*b*) If you consider it to have been caused by wounds received or illness contracted (1) in the presence of the enemy (2) on active service, explain the specific conditions to which you attribute it. (*See notes on page 3*). Before enlistment.

Disc. Section 3-10-17 C.F.C.

13. What is his present condition ? Healthy looking man.

Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.

Capt T. M. Petrie's certificate that he saw Pte Anderson in an epileptic seizure on Apl 11th 1917 is attached. Heart & Lungs normal. Wasserman & Urinalysis Negative. Blood pressure 130/80.

14. If the disability is an injury, was it caused Not applicable

(*a*) In action ?

(*b*) On field service ?

(*c*) On duty ?

(*d*) Off duty ?

15. Was a Court of Inquiry held on the injury ? Not applicable

If so—(*a*) When ?

(*b*) Where ?

(*c*) Opinion ?

16. Was an operation performed ? If so, what ? Not applicable

17. If not, was an operation advised and declined ? Not applicable

18. *In case of loss or decay of teeth.* Is the loss of teeth the result of wounds, injury or disease, directly* attributable to active service ? Not applicable

19. Do you recommend

(*a*) Fit for duty ? ✓

(*b*) Fit for light duty ? ✓

(*c*) Invalided to Canada ? Yes

(*d*) Discharge as permanently unfit ? ✓

R E Weston Capt A.M.C.
Officer in medical charge of case.

I have satisfied myself of the general accuracy of this report, and concur therewith, except†

Station

Date

*Date

ORDERLY ROOM 14 MAY 1917 MOORE BARRACKS CANADIAN HOSPITAL

W. Allen A. Scott
Officer in charge of Hospital.

CAPT. C.A.M.C.
OFFICER i/c MOORE BARRACKS,
CANADIAN HOSPITAL, SHORNCLIFFE.

*Loss of teeth on, or immediately after, active service, should be attributed thereto, unless there is evidence that it is due to some other causes.

† Delete this word if no exceptions are to be made.

Opinion of the Medical Board.

NOTES.—(i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as it is essential that the Members of the Pensions and Claims Board should be in possession of the most reliable information to **enable them to decide upon the man's claim to pension.**

(ii.) Expressions such as "may," "might," "probably," &c., should be avoided.

(iii.) The rates of pensions vary according to whether the disability is attributed to wounds or injuries received or illness contracted, (1) in the presence of the enemy, (2) on active service. It is therefore essential when assigning the cause of the disability to differentiate between them (see Article 591 to 598 of the Canadian Pay and Allowance Regulations as amended G.O., 57, May 1st, 1915).

(iv.) In answering question 20 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.

20. (*a*) State whether the disability is the result of injuries received or illness contracted, (1) in the presence of the enemy, (2) on active service. 1 No. 2. No

(*b*) If due to one of these causes, to what specific condition do the Board attribute it ? not applicable

This mans condition has not been affected by service. and he is the same now, as when he enlisted.

21. Has the disability been aggravated by

(*a*) Intemperance ? No

(*b*) Misconduct ? No

22. Is the disability permanent ? Yes.

23. If not permanent, what is its probable minimum duration ? not applicable

To be stated in months.

24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present ? None compared with his capacity at time of enlistment.

In defining the extent of his inability to earn a livelihood, estimate it at $\frac{1}{4}$, $\frac{1}{2}$, $\frac{3}{4}$, or total incapacity.

25. If an operation was advised and declined, was the refusal unreasonable ? not applicable

26. Do the Board recommend

(*a*) Fit for duty ? No

(*b*) Fit for light duty ? No

(*c*) Invalided to Canada ? No

(*d*) Discharge as permanently unfit ? Yes. Discharged

Signatures :—

Leeson Davis Major President.

H. B. Thomson. Capt

Members.

Station MBCH

Date May 17. 17

Approved.

Station SHORNCLIFFE—
(19, Westbourne Gardens, Folkestone)

Date 18 MAY 1917

Leeson Davis Major
CAPT.
FOR A.D.M.S. CANADIANS, SHORNCLIFFE
Administrative Medical Officer.

R.C. AUG 30 1917

AUG 30 1917

(At Station or Hospital where finally disposed of.)

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

Date .....

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

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

Date of final Medical Board or decision. .....

Administrative Medical Officer.

DETAILED MEDICAL HISTORY OF INVALID.

Station

Corps

Regimental No. Rank

Name

Disability

Date

Hospital or Station transferred to for final disposal.

Date of final disposal

How finally disposed of

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

Militia Form B. 227.
200m. 8-16.
H. Q. 1772-38-117.

45-A-43.

EM/ 44-A-120

Address:- 72 Durham St.
Lindsay, Ont.

MEDICAL HISTORY OF AN INVALID.

DEPT. MILITIA & DEFENCE
AUG 29 1917
H.Q. CANADA

B.P.C.

1. Station. Kingston, Ont.
2. Regiment or Corps. 252nd. Battalion
3. Regimental No. and Rank #1087036 Private.
4. Name. F.J.Anderson
5. Age last Birthday. 27
6. Enlisted on Nov. 1916 at Lindsay, Ont.
7. Former trade or occupation Fireman

8. General remarks on his:—
(a) Conduct.
(b) Habits.
(c) Temperance.
(For this purpose the Company defaulter sheets will be obtained from the man's Commanding Officer.)

Date. July 26th 1917

9. Service.

	Years.	Days.	PERIODS From	PERIODS To
252nd. Batt'n C.E.F.			Nov. 1916	to Date.

10. (a) Disease or disability. Epilepsy.
(b) Date of origin. Sin ce Childhood.
(c) Place of origin. not applicable
(d) Cause. not applicable

11. Present condition. (Most Important.)
(To include full description of present disabling condition or conditions, and of the immediate and direct cause of incapacity, *i.e.*, debility, breathlessness on exertion, necessity of treatment by rest, etc.)
Examination reveals nothing abnormal, knee jerks sharply active. Patient states that he has had fits since he was 10 years old; at first, once a month and at nights. Is in about the same condition now. H has no definite warning apart from the feeling that something serious is about to happen. Has hurt himself in falling, small scars about the head. Has bitten tongue, had a fit a week ago. Capt. F.N.Petrie A.M.C' says he saw this man in Epileptic Seizure April 10th 1917. Man is healthy in all other respects. He says he enlisted in 239th but later was discharged. He again re-enlisted as above.

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

M. F. B. 227.
200M. 8 16.

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

Few scars on his head, on back and top. Small vaccination mark at insertion of deltoid muscle on left arm. Birth mark on left side of gleutæal cleft. Several small scars on right side of chest & abdomen. Scar on right side of right knee joint just below joint.

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

Not Applicable.

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

Not Applicable.

14. Treatment.

Moore Barrack Hospital

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

Has not been aggravated by service.

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

Permanent.

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

Not Applicable.

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

Discharge unfit for service

J.M. Asselstine
Capt:
~~Lieut.~~ A.M.C.

Medical Officer by whom the case is brought forward.

OPINION OF THE MEDICAL BOARD.

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

10. Yes

11. Yes

12. Yes

15. Yes

16. Yes

17. Same as before enlistment.

18. Is he unfit for Military Service. Yes.

Recommendations : On account of Epilepsy present before enlistment and which has not been aggravated thereby, the Board recommends that this man be discharged as medically unfit. Category E. Condition same as before enlistment. No Hospital treatment recommended in this case. Man may pass under his own control.

Signatures :—

G Kidd Lt Col. AMC President.

A Rossdalgwin Major AMC

Members.

Station. Kingston, Ont.

Date. July 27th 1917

E.R. Mahaney

Date. AUG 11 1917

Asst. Director of Medical Services.

D/ A.D.M.S. Military District No.3
For A.D.M.S. Mil. District No.3

Approved.

Date.

Director-General of Medical Services.

PENSIONS AND CLAIMS BOARD, Canadian Expeditionary Force, assembled at England, on the day of 191

Members of Board.

LIEUT.-COL. SIR H. MONTAGU ALLAN, C.V.O., *President*.
LIEUT.-COL. W. GRANT MORDEN.
LIEUT.-COL. D. MCLEAN
MAJOR R. RAIKES, C.A.M.C.
MAJOR HUME BLAKE.
MAJOR T. H. MACDONALD, C.A.M.C.

Proceedings.

The Board having considered the evidence of the man marginally noted, and the documents submitted, hereto attached, which form part of these Presents, marked

President

Lt.-Col.

Lt.-Col.

Major, C.A.M.C.

Major.

Major, C.A.M.C.

D.M.S. 1312.
Army Form B. 179.
Canada.
4516—5M—8/1/17

N.O.F. 29/5/17 82667

MOORE BARRACKS, SHORNCLIFFE
CANADIAN HOSPITAL

Medical Report on an Invalid.

Station Moore Barracks Canadian Hospital

Date May 14th. 1917.

1. Unit 252 Bn. 230th. Bn. C.F.C. Base Depot.
2. Regimental No. 1087036.
3. Rank Pte.
4. Name Anderson, Fred. J.
5. Age last birthday 26 years.
6. Enlisted on 23rd. Nov. 1916. at Lindsay, Ont.
7. Former Trade or Occupation Fireman.
8. Disability.

Epilepsy.

Statement of Case.

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.

9. Date of origin of disability.

Before enlistment.

10. Place of origin of disability.

Canada.

11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.

Invalid states that he has had Epileptic seizures since he was ten years old. In the summer time they occur more frequently. Has fits on an average of once a month. Enlisted in 239 C.E.F. in Sept. 1916 and was discharged because of Epilepsy. Re-inlisted in 252nd. Bn. in Nov.1916. Mother died of Epilepsy and one brother is subject to fits.

12. (*a*) Give your opinion as to the causation of the disability.

Before enlistment.

(*b*) If you consider it to have been caused by wounds received or illness contracted (1) in the presence of the enemy (2) on active service, explain the specific conditions to which you attribute it. (*See notes on page 3*).

" "

13. What is his present condition ?

Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.

Healthy looking man.
Captain F.M. Petrie's certificate that he saw Pte. Anderson in an Epilertic seizure on April 11th. 1917 is attached. Heart and Lungs Normal. Wasserman & Urinalysis Negative. Blood pressure 130/80.

14. If the disability is an injury, was it caused

(*a*) In action ?

(*b*) On field service ?

(*c*) On duty ?

(*d*) Off duty ?

Not applicable.

15. Was a Court of Inquiry held on the injury ?

If so—(*a*) When ?

(*b*) Where ?

(*c*) Opinion ?

Not applicable.

16. Was an operation performed ? If so, what ?

Not applicable.

17. If not, was an operation advised and declined ?

Not applicable.

18. *In case of loss or decay of teeth.* Is the loss of teeth the result of wounds, injury or disease, directly* attributable to active service ?

Not applicable.

19. Do you recommend

(*a*) Fit for duty ? -

(*b*) Fit for light duty ? -

(*c*) Invalided to Canada ? Yes.

(*d*) Discharge as permanently unfit ? -

R.E.Weston, Captain, C.A.M.C.
Officer in medical charge of case.

I have satisfied myself of the general accuracy of this report, and concur therewith, *except*†

Station Moore Barracks Hospital, (Sgd.) Wallace A. Scott. Colonel, C.A.M.C.
Officer in charge of Hospital.

Date May 18th. 1917.

* Loss of teeth on, or immediately after, active service, should be attributed thereto, unless there is evidence that it is due to some other causes.

† Delete this word if no exceptions are to be made.

Opinion of the Medical Board.

N.F

NOTES.—(i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as it is essential that the Members of the Pensions and Claims Board should be in possession of the most reliable information to **enable them to decide upon the man's claim to pension.**

(ii.) Expressions such as "may," "might," "probably." &c., should be avoided.

(iii.) The rates of pensions vary according to whether the disability is attributed to wounds or injuries received or illness contracted, (1) in the presence of the enemy, (2) on active service. It is therefore essential when assigning the cause of the disability to differentiate between them (see Article 591 to 598 of the Canadian Pay and Allowance Regulations as amended G.O., 57, May 1st, 1915).

(iv.) In answering question 20 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.

20. (*a*) State whether the disability is the result of injuries received or illness contracted, (1) in the presence of the enemy, (2) on active service.

(1) No (2) No

(*b*) If due to one of these causes, to what specific condition do the Board attribute it ?

Not applicable.

This man's condition has not been affected by service, and he is the same now as when he enlisted.

1. Has the disability been aggravated by

(*a*) Intemperance ? No

(*b*) Misconduct ? No

22. Is the disability permanent ? Yes

23. If not permanent, what is its probable minimum duration ?

Not applicable

To be stated in months.

24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present ?

None compared with his capacity at time of enlistment.

In defining the extent of his inability to earn a livelihood, estimate it at $\frac{1}{4}$, $\frac{1}{2}$, $\frac{3}{4}$, or total incapacity.

25. If an operation was advised and declined, was the refusal unreasonable ?

Not applicable.

26. Do the Board recommend

(*a*) Fit for duty ? No

(*b*) Fit for light duty ? No

(*c*) Invalided to Canada ? No

(*d*) Discharge as permanently unfit ? Yes.

Signatures :—

S. Hixon Davis, Major, CAMC. — President.

H. B. Thomson, Capt. CAMC. — Members.

Station Moore Brs. Hosp.

S. Date May 17th, 1917.

Approved... Hixon Davis Major

Station SHORNCLIFFE— (18, Westbourne Gardens, Folkestone.) CAPT. FOR A.D.M.S. CANADIANS, SHORNCLIFFE.

Date 18 MAY 1917

Administrative Medical Officer.

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.

Enlisted in 252nd. Bn.
Local
Date of Enlist. 23.11.16.

88-A-43

This space to be left blank for the Chelsea Number.

Army Form B. 268.

Proceedings on Discharge.

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

No. 1087036 Army Rank Private

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

Corps Canadian Forestry Corps Depot

Battalion, Battery, Company, Depôt, &c. 230th. Battalion.
(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 Canada.

1. *Description at the time of discharge.*

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

Descriptive marks.
1 Vacc. left arm.

(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)

2. The above-named man is discharged in consequence of being no longer physically fit for War Service K.R. & O. 392 XVI.

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

To be filled in on the soldier quitting the Colours.

3. Military character :— Good.

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

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

Initials of Commanding Officer.

Army Form B. 2088 has been issued to*

* Strike out if not applicable.

D. D. & L., London, E.C.
A4502 W:. W17176 M291 500,000 2 16 Sch. 3) Forms B. 268 40

[OVER.

Discharged 3-10-17 C.P.

INVALIDED TO CANADA FOR FURTHER MEDICAL TREATMENT

HOSPITAL REPRESENTATIVE FOR ARMY AND GENERAL CANADIANS, ROUGE BARRACKS PORTSEA, SOUTHAMPTON.

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

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

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

6. Campaigns, Medals and Decorations _____

Certificate of education ..... _____

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

(Place) Moore Barracks Hosp^t — E A Thomas Lt

(Date) 10.6.17 — *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)

(Date) _____

Signature _____

_____

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

Queens

2

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. 1087036

Rank Pte.

Name Fred James Anderson.

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

Corps (Squadron, Battery or Company) 230th Bn.

Date of Discharge

Place of Discharge

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 27 years 4 months.
Height 5 feet 6 inches.
Complexion fair
Eyes blue
Hair auburn
Trade teamster
Intended place of residence (To be given as fully as practicable.) 72 Durham St., Lindsay, Ont.

Descriptive Marks

1 vacc. on left arm

brown birthmark on right hip.

2. The above-named man is discharged in consequence of being physically unfit for service.

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 all official entries on the character certificate and initial them.

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

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.)

M. F. B. 218.

50m.—3-16.
H. Q. 1772-39-113.

(OVER)

W. L. I. Comp 16-7-19 A 522 Att Disp Section 16-47 E. P.

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

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

6. Medals and Decorations.....

To be copied by the Command-ing 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) Kingston Ont — F.F. Bidwell Major

(Date) 10. 10. 17 — *Commanding* "C" Unit M.H.C.C

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) Kingston, Ont. Fred. James Anderson *(Signature of Soldier.)*

(Date) 27th Aug. 1917. L.D. Stevenson Lieut. A.M.C. *(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.

Fred James Anderson *(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.330.....days.

11. **Confirmation of Discharge.**

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

(Place) Kingston Ont.

(Signature) F.F. Bidwell Major

(Date) 10. 10. 17

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.)

Fred. James Anderson

(OVER)

P. 559
MARRIED OR SINGLE M.

PLACE OF BIRTH Syracuse, N.Y.

NAME AND ADDRESS OF NEXT OF KIN Anderson, Beatrice
Durham St. Lindsay, Ont.

RELATIONSHIP OF NEXT OF KIN Wife

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. 1087036 RANK Pte NAME Anderson, Fred James.

IF IN PERMT. CORPS WHAT UNIT } UNIT 230th. Forestry Bn. C.E.F.

TRANSFERRED TO Dept L. DATE 29/5/17 AUTHORITY W.B. No. 222 & 30 23/5/17

PERMANENT FORCE ALLOWANCES TRANSFERRED TO Pay 2 K DATE — do — AUTHORITY — do —

PLACE OF ATTESTATION Lindsay TRANSFERRED TO N.E. DATE 29/5/17 AUTHORITY

DATE OF ATTESTATION 23/11/16. TRANSFERRED TO DATE AUTHORITY

PAY OFFICE, N.E. BRANCH NOV 26 1917 CANADIAN CONTINGENTS

ASSIGNED PAY MONTHLY $ 20.00 DATE EFFECTIVE MAR 1 1917

PAYABLE TO Wm. B. ~~Lindsay~~ Anderson, 72 Durham St, Lindsay, Ont. RELATIONSHIP Wife

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) Stopped EFFECTIVE 1/6/17 REASON Discharged to Canada

DISCHARGE DATE AND PLACE Canada 28-5-17 REASON AND AUTHORITY Mov. Ord. 2a 30 23/5/17. Invalided.

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE) Entered on N.E. Card Index

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE) Checked by T. Williams

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
1917																																			
Mch	31	1.00/70	34	10											34 10					1189	23/3															
Apl	30		33												33									973 ✓				20								
May 1-28	28		30	80											30 80													20	5 50 ✓		29 73	4 37				
	✓		✓																									20	5 54 ✓	26 07	11 30					
Sept																												20		20	22 10					
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																													~~1 40~~	2 26	~~16 74~~					
															174 24/4/17									122							1 22	18 62 ✓			
															97 90									973	1 22			60	8 33						

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE
Oct	Bal. forward ~~18 62~~								18 62 ✓
				Draft 4482. 21/5/17 Blks Hosp Assoc	9 73				
				" 2001 14/4/17 C.3 Corp Base Hsp	7 30				
				" 347 7/5/17 MRH 103/1	1 22				38 ✓
					18 25				
	Can. Liability a/c					34			NIL
	Balance transferred to N. E. Branch.								~~NIL~~

B.O.R. 12/17 Pd/16/5/17 Ltd pay by R.V.
D.O.R. Goods 2-16 20.16 25/5/17 M.B. 26.
Trans Dept L. 29/5/17 Amt 2a 30 28/5/17
Qm Charges 1-4-17.
~~Accts. 4-4-17.~~

ASS'N. PAY REND'D Paid EFFEC. 1/6/17.
DISCHARGED TO Can. DATE 28/5/17.
PAYBOOK VERIFIED 28/5/17.
BAL. 1 33 L.P.C. REND'D 28/5/17.
AUTHY Mov. Ord. 2a 30 23/5/17
Invalided
Checked Voided RBC

Canadian Forestry Corps, Sailed for Canada 1/6/17 D. of Militia

N.S.L.S.

DATE	PAY				FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS								CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
	No. OF DAYS	RATE	AMOUNT $	AMOUNT C.	No. OF DAYS	RATE	AMOUNT $	AMOUNT C.	No. OF DAYS	RATE	AMOUNT $	AMOUNT C.				1		2		3		4		1	2	3	4				CREDIT	DEBIT			
																No.	DATE	No.	DATE	No.	DATE	No.	DATE											