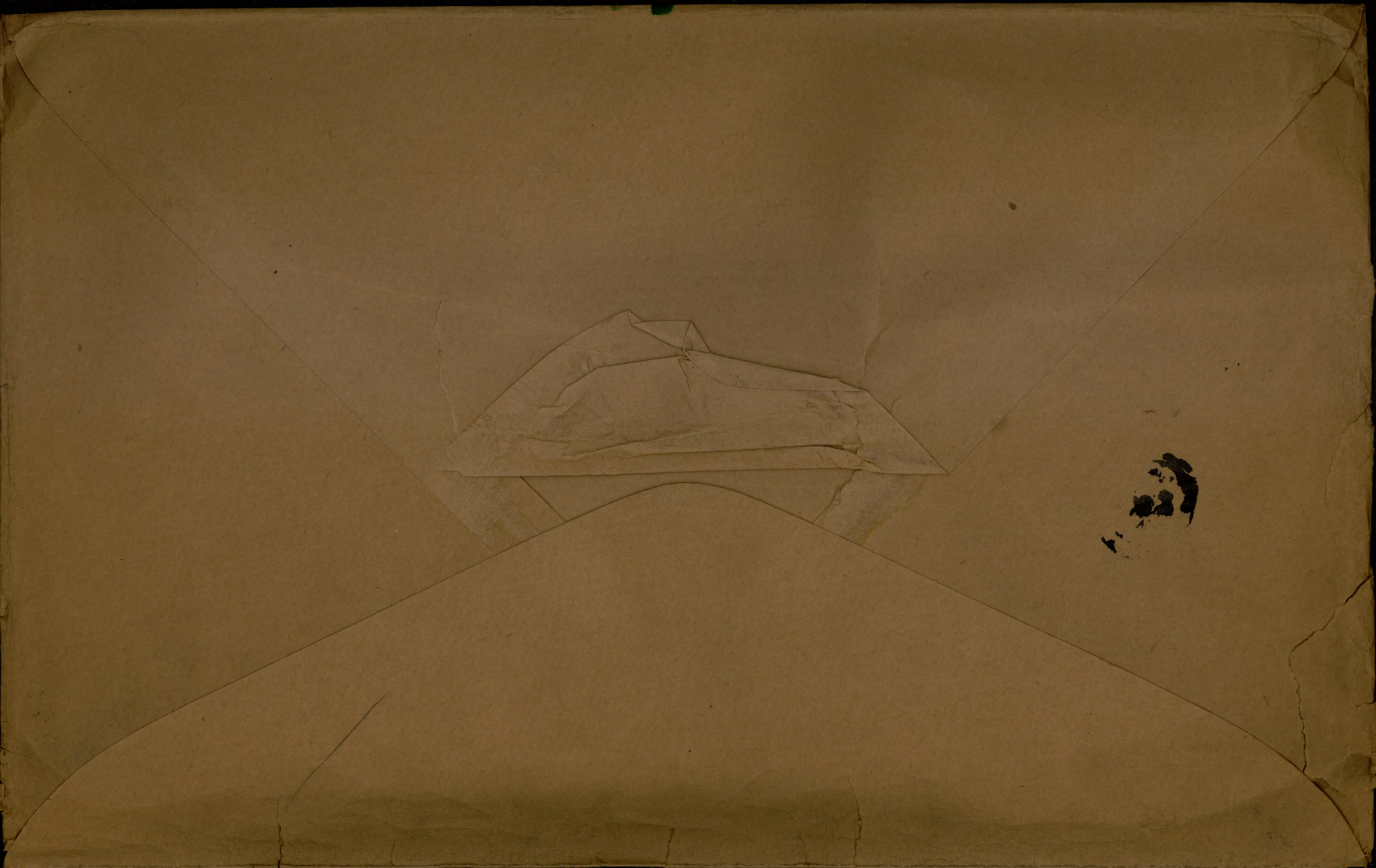
REGIMENTAL DOCUMENTS

NAME ANDERSON GEORGE LESLIE REGT. NO. 3138609 UNIT 7278 32 110th Fld Coy

H.Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
1	ATTESTATION PAPER (M.F.W. 23, 133, or 51)	11 2 39				DEATH
	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
	TRAINING HISTORY SHEET (M.F.W. 113)					
1	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
1	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
1	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
2	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
	DENTAL HISTORY SHEET (M.F.B. 465)					Category
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)				1	Medically unfit
1	MEDICAL EXAMINATION (M.F.W. 129)					
	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)				2	Hemorh
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
1	LAST PAY CERTIFICATE (M.F.W. 44)					
1	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					8-28
	PARTICULARS OF CHARACTER (A.F.W. 3226)					23-29
1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					31-29
1	Card 5009A					1
1	M.F.W. 67					
1	Ltr 3					
	Ltr					
1	Card					
	Ltr					
	2 AF 9123					
	5 Minor Med					
1	Ltr					
	PC					

W 2589
100M-11-18
1972 39 1377



6

ORIGINAL

ATTESTATION PAPER.

No. 727832

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?	George Leslie
1b. What is your present address?	Mitchell ont, Perth Co. Can
2. In what Town, Township or Parish, and in what Country were you born?	Mitchell Perth Co, Ont Can
3. What is the name of your next-of kin?	Mrs Annie Anderson
4. What is the address of your next-of-kin?	Mitchell ont Canada, Ont Perth Co
4a. What is the relationship of your next-of-kin?	Mother
5. What is the date of your birth?	Dec 9th 1889
6. What is your Trade or Calling?	Barber
7. Are you married?	no
8. Are you willing to be vaccinated or re-vaccinated and inoculated?	yes
9. Do you now belong to the Active Militia?	no
10. Have you ever served in any Military Force? If so, state particulars of former Service.	no
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, George Leslie 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.

George Leslie Anderson (Signature of Recruit)

Date May 15 1916. Pte W Carpenter (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, George Leslie 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.

George Leslie Anderson (Signature of Recruit)

Date May 15 1916. Pte W Carpenter (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 Stratford, Ont this 15th day of May 1916.

(Signature of Justice)

M. F. W. 25.
600M.—2-16.
H. Q. 1772-32-541.

Description of George Leslie Anderson on Enlistment.

Apparent Age 27 years 5 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height	5 ft 10¼ ins.
Chest measurement. Girth when fully expanded	35 ins.
Chest measurement. Range of expansion	2½ ins.
Complexion	Dark
Eyes	Brown
Hair	Dark

Religious denominations.

- ~~Church of England~~
- Presbyterian Jus
- ~~Methodist~~
- ~~Baptist or Congregationalist~~
- ~~Roman Catholic~~
- ~~Jewish~~
- ~~Other denominations~~ (Denomination to be stated.)

Distinctive marks, and marks indicating congenital peculiarities or previous disease.

(Should the Medical Officer be of opinion that the recruit has served before, he will, unless the man acknowledges to any previous service, attach a slip to that effect, for the information of the Approving Officer).

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 May 15 1916. R. D. Rawlens

Place Stratford Ont. Capt. C.A.M.C.

Medical Officer.

*Insert here "fit" or "unfit."

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

CERTIFICATE OF OFFICER COMMANDING UNIT.

George Leslie 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.

Thos. Rolland Lt. (Signature of Officer)
O. C. 110th O. S. Bn. C. E. F.

Date May 15th 1916.

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 3130609 (Rank) Private

Name (in full) George Leslie Anderson enlisted in

the 1st Depot Battn N.O.R.

CANADIAN EXPEDITIONARY FORCE at London Ont on the 7th

day of January 19 18

HE served in France with C. F. C.

and is now discharged from the service by reason of Demobilization.
~~Medical Unfitness.~~

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

Age 30 yrs 5 mos

Height 5' 9½"

Complexion Dark

Eyes Brown

Hair Brown

Marks or Scars Nil.

Signature of Soldier

Date of Discharge

DISCHARGE SECTION
MAY 18 1919
No. 1 District Depot.

J. B. Farrell
Issuing Officer

for Lieut
Rank

O. C. Dispersal Area Sta. "K."

Date MAY 18 1919 19

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

M.F.B. 39A.
1049-D.P.-300M-11-18.
H.Q. 1772-39-882.

ORIGINAL

.....M. D.....Depot Battalion 1st Depot Battn., W. O. R. Regiment

Regtl. No. 3130609

PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class One)

1. Surname ANDERSON
2. Christian name George Leslie
3. Present address Mitchell Ont.
4. Military Service Act letter and number 716239 A.C. 18
5. Date of birth Dec9th. 1888
6. Place of birth (town, township or county and country) Mitchell Ont
7. Married, widower or single Single
8. Religion Presbyterian
9. Trade or calling Teamster
10. Name of next-of-kin Annie Anderson
11. Relationship of next-of-kin Mother
12. Address of next-of-kin Mitchell Ont
13. Whether at present a member of the Active Militia No
14. Particulars of previous military or naval service, if any Two months with 110th. Batt. London Ont. May 1916.
15. Medical Examination under Military Service Act:—

(a) Place London Ont (b) Date Nov. 26th. 1917 (c) Category A.11

DECLARATION OF RECRUIT

I, George Leslie Anderson, do solemnly declare that the above particulars refer to me, and are true.

Jan.7th. 1918 George Leslie Anderson (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age 29 yrs. 1 mths.

Height 5 ft. 9½ ins.

Chest measurement: fully expanded 33½ ins.; range of expansion 31 ins.

Complexion Dark

Eyes Brown

Hair Brown

Distinctive marks, and marks indicating congential peculiarities or previous disease.

Hemoroids.

Right Eye D 40/20 Left Eye 30/20

Hearing R. Normal L Normal

W. L. Mulligan Lieut. Colonel

O. C. 1st Depot Battalion, W. O. R. Depot Btln.

..... Regt.

Place London Ont Date JAN 7 1918

M. F. W. 133.
500 M.—8-17.
1772—39—1158.

PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class .....)

DECLARATION OF RECRUIT

I ..... do solemnly declare that the above particulars are to me and are true.

(Signature of Recruit)

DESCRIPTION ON CALLING UP

Height	ins.
Chest measurement	ins.
Expansion	ins.
Complexion	
Eyes	
Hair	
Marks	

Distinctive marks, and marks indicating constitutional peculiarities or previous disease.

Place ..... Date .....

Reg. No. .....

Form R 122
2353—100M—9-12-16.

4th Dft 1St, Bn W.O.R

LTR

Rank — Name: ANDERSON, George Leslie — Reg'l No. 3130609

Unit — If in perm. Corps, What Unit? — Married or Single: Single.

Place and Date of Enlistment: London, Jan. 7th. 1918. — Place of Birth: Mitchell Ont.

Name and Address, Next-of-Kin: Annie Anderson, Mitchell Ont. — Relationship: Mother.

CFC

Assigned Pay Monthly $ — Payable to — Relationship

Separation Allowance $ — Payable to — Relationship

N/E. R.B. No. 13035
File R.L.
Category O.R. Can

Discharge, Date and Place — Reason — 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.
b		Arrived in England	4-3-18 S/S CRETIC		
5.8.18	4th Res	T.O.S, From CANADA	BSHOTT	5.3.18	PTii 54
8.8.18	WORD	TOS from 4 Res Bn Witley and O/S to 2ND BDD	fa	7.8.18	" 185 & 4 Res. 18584 7.8/18 & 2ND BDD 18584 7.8.18
7.9.18	-"-	leases O/S to " -	"	6.9.18	" 211 & 2 BDD 21106.9.18
19.9.18	-"-	SOS to 6 F bps.	"	19.9.18	" 221 (FC 22619.9.18
10/10/18	BDC.F.C.	S.O.S to 7 Con. Coy C.F.C. & Grana	Sdale	" 10/10/18	" 242 (7 Cy @ FC 10419.11.18.

A.F.B. 103 CHECKED 17 OCT 18

SOS to BDCFC, 4 3.19
7 Co DO 8 d.10 3.19 &
TOS BDCFC Ripon
DO 54 J 7.3.19 13th Res

work

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.
5.4.19	13th Res. Bde C.F.C. Rly	S.O.S. to M.D.C.W. error Rhyl	Ste Repon	5.4.19	P.M.O. 79
~~7-3-19~~	~~13 Res Bn C.F.C. Rly~~	~~T.O.S. arrival from France~~	~~Ste Repon~~	~~5-3-19~~	~~P.M.O. 54.~~
7-4-19	6 M.D.C.W. C.F.C.	T.O.S. from C.F.C.	" Rhyl	5-4-19	— 83
8.5.19	1 M.D.C.W. 5.9 C.F.C.	S.O.S. to Canada Sailg 52	" "	7.5.19	" 108
			52-K-30	7.5.19	

War Service Badge
Class "A" No. .....

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

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

No 4 Draft 1st Dep Bn. W O R

Casualty Form—Active Service.

Unit, Regiment or Corps 4th CAN. RES. BATT.

Regimental No. 3130609 Rank Pte C. E. F. Name Anderson George Leslie

Enlisted (a) 7.1.18 Terms of Service (a) D of W Service reckons from (a) 7-1-18

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

Extended ..... Re-engaged ..... Qualification (b) Teamster

Report		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				
FEB 14 1918	1st Depot Bn. W.O.R.	Transferred o/s	London, Ont.		Authority H.Q. 1072-39-20 FEB 4 1918
		EMBARKED 21.2.18	CANADA	H. M. T.	
		DISEMBARKED 4.3.18	ENGLAND	H. M. T.	Cretic
5-3-18	C.O. 4th C.R. O.S. Bn.	T.O.S. 4th Can. Res. Bn.	Bramshott	5-3-18	Part 2 order no. 54.
7-8-18	do.	S.O.S. on posting to W.O.R.D. on discharge from Hospital to 2nd L.D.	Witley	7-8-18	Part 2 order No 185
8-8-18	W.O.R.D	T.O.S. from 4th Res Bn on loan 2nd L.D.	Witley	7-8-18	D.O. 185

ADJUTANT 4TH CANADIAN RESERVE BATTALION

T. M. Jackson.
Lieut. i/c Records.
West Ont. Regtl. Depot.

(a) In the case of a man who has re-engaged for, or enlisted into Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) 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				
7-8-18	2nd C.C.D.	ttached to 2nd C.C.D	Bramshott	7-8-18	Pt. II No. 185
6 SEP 1918	OC. 2ndCCD	Ceases to be attached to 2nd C. C. D. on return to W.O.R.D. Res. Bn.	Bshott	6 SEP 1918	Pt. 2 D. O. No. 211 for OC. 2nd CCD.
7-9-18	W.O.R.D	attached Depot Coy	Witley	6-9-18	D.O. 211
19-9-18	W.O.R.D	S.O.S. on transfer to Can. Forestry Corps Sunningdale	Witley	19-9-18	D.O. 221 Lieut. i/c Records.
21.10.18	BobLC	O.C. C.F.C. T.O.S. Base Depot, C.F.C. Sunningdale from W.O.R.D.		19-9-18	Pt. II D.O. 226 West Ont. Regtl. Depot.
10.10.18	OC 6th SOS	on transfer to my Co 6th France	BASE DEPOT C.F.C. SUNNINGDALE	10.10.18	PT. II. DO. NO. 242 for OC, C.F.C.
	7 Coy C.F.C. Disembarked D.C.Cdn. S.O.S. for demobilisation Cmp. Le Havre		France C.F.C. Depot S'dale	11-10-18 4-3-19	DO 1 d/4-11-18 N/R. K4-1 Pt 2. O/S. 8. 1919. Lieut. for Lt. Col A. [illegible] Cdn. Sect. G.H.Q.

CERTIFIED A TRUE COPY
21 OCT 1918
CANADIAN RECORDS, LONDON.

SERVICE AND CASUALTY FORM (Part I).

Army Form B. 103—1.
Part I.

(1) *Substantative rank *Acting rank *[To be entered in pencil to facilitate alteration.]	(2) Regiment or Corps	(3) Regtl. No.
(4) Surname		
(5) Christian Names		
(6) Army Form, number of, Attestation Form or Record of Service paper		
(7) Whether of British or of Alien origin [*vide* A.C.I. 578 of 1918]		
(8) Date of birth as stated on enlistment		
(9) (*a*)		

(10) Enlistment (*b*) (11) Engagement (*c*)

(12) Service reckons from (*date*) (13) Special conditions (if any) of enlistment (*d*)

(14) Any subsequent variations (if any) of conditions of service

(Authority) (*date*)

Initials and Rank of an Officer.

(15) Category	Date	Medical Authority	Initials and Rank of an Officer

(16) (Record of Occupation in Civil life (*vide* Army Order 93 of 1917)

Industrial Group No.
Trade or Calling
Married or Single
Particulars of Trade Test

Occupation Cards despatched on (*date*)
Second Occupation Card despatched on (*date*)

(17) Next of Kin
(18) Demobilizer (*f*) (Place)
(19) Pivotal-man (*f*) (Date)
(20) Qualifications (*g*) *or* (21) Corps trade and rate

(Signature of Posting Officer

(22) Extended

(23) Re-engaged

(24) Miscellaneous entries:—

NOTES.—[a] Here enter particulars of any subsequent claim as to actual age after verification by birth certificate [*vide* A.C.I. 470 of 1918. [b] Whether direct or voluntary enlistment or called up under the Military Service Acts. [c] Whether for specified term of years or for duration of the war. [d] Whether "for Home Service only," or "not to be transferred without the soldier's consent, &c. [e] If to be retained on Home Service, period, if specified, to be stated, also authority, and on what grounds. [f] Required for demobilization purposes. [g] Signaller, Shoeing-smith, &c.

Army Form B. 103 (II.) to be gummed on here if required.

Nothing to be written in this margin.

W1889—P21150 1M 5/18 G.W.P.Co (3490)

(A) Report		(B)	(C)	(D)	(E)	(F)
Date.	From whom received	Authority of Part II. of Orders	Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	Place of casualty	Date of promotion, reduction, reversion, casualty, &c.	Remarks, and initials and rank of an officer

CANADIAN FORESTRY CORPS PERSONNEL.

5-4-19 OC. 13th Res. Bn. — BO. No. 79. Struck off strength Ripon. to MDCWing No. on proceeding to Kimmel Park Camp. RHYL. pending return to Canada on the cessation of hostilities. 5-4-19

Lieutenant.
Adjutant, 13th Canadian Reserve Battalion.....

Adjt., No. 14, C.T.C.S.

SAILING NO 52
SS ORDUNA FROM
L'POOL 7. 5. 19

Nothing to be written in this margin.

7/4/19 *O.C.M.D.C.W.I. T.O.S. For return to Canada, Rhyl 3/4/19 D.O. No. 83*

6/5/19 *S.O.S. on Proceeding to C.E.F. Can. Rhyl 7/5/19 D.O. No. 107*

Lieut.

Officer i/c W.D.O, for O.C.M.D.C.W.I.

ToS No. 1 Dist Depot
Displ. Stn. K. 7-5-19
SOS Dispersed
18,5,'9 D.O. No. 140

for O. C. Dispersal Area Sta "K."

To be made out in duplicate.

H.Q. 54-21-23-53

Duplicate

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..... 1st Depot Battn., W. O. R.....

(2) Regimental Number 3130609

(3) Full Name of Soldier Anderson George Leslie

(4) Place of Birth Mitchell Ont

(5) Are you married, or not ? No

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

(b) Present Postal Address.....

(7) Are you a widower ? No

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

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

Also their names and ages.....

M. F. W. 67.

500M.—9-16.
1772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive? No

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

(10) Is your Mother alive? Yes Annie Anderson

If so, state name and address Mitchell Ont

.....

(11) If your Mother is a widow Yes

Are you her sole support, or not? Yes

(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.

$10.00 per mth. 3 Sisters married

.....

(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.

No

.....

(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.

H. L. Mulligan Lieut. Colonel
Officer Commanding.
1st Depot Battalion, W. O. R.

Date 7-1-18

Forms
I. 1237
12

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book	Regimental No.	Rank.	Surname.	Christian Name.
29-56	3130609	Pte	Anderson	J.
Year	Unit.		Age.	Service.
1918	4th Res.		29	4/12
Station and Date.	Disease Stricture Canaliculi eye (right)			
RB 12 Con Jen	Family History negative.			

Present Illness

The Lachrymal duct has been closed since childhood, and has always complained of Epiphora.

Present Condition

Lachrymal duct completely blocked. Epiphora marked. Right Sac inflamed and enlarged. R.V. 6/12 L.V. 6/12. All other systems normal.

Treatment

Irrigations made Sol. 2.0. Argyrol 20% 2.0. J.W.S

24/4/18	Rt Canaliculi opened and small probe passed. J.W.S
30/4/18	Urinalysis negative

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

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

Station and Date.	
30/4/18	Duct dilated & no. 3.
5/4/18	Improving.
15/4/18	Duct reopened, and dilated.
27/4/18	Condition much improved.
10/5/18	Complains of severe pain in eye.
20/5/18	Improving.
12/6/18	Discharged & Inis Dun

Forms
I. 1237
12

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
4742	3130609	Pte	Anderson	G. Z.
Year 1918	**Unit.** 4 Res		**Age.** 29	**Service.** 6/12

Station and Date. Brantford 20/6/18

Disease Conjunctivitis Conjunctivitis

Pain in left eye with discharge and Photophobia.

Family History

(negative)

Personal History

Toronto, and always lived in Canada.

In Brantford Hospital from 20/4/18 to 15/6/18 for Stenosed lachrymal ducts.

Present Illness

16/6/18 Got some dust in eye and it became red & painful. with watery discharge.

Present Condition.

Conjunctivae reddened, Steamy Cornea. Photophobia. Discharge from eyes. Pupils Simmer to-gether in normal.

Treatment

Atropine 1% 2.d.

Argyrol 25% 2.d. Irrigations Mercl Sol. Compresses dye changed every two hours. Calomel & Soda at bed time pro

*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.	

MEDICAL EXAMINATION UPON LEAVING THE SERVICE OF OFFICERS AND OTHER RANKS WHO HAVE NO DISABILITY.

Officers and Other Ranks leaving the service for reasons other than medical unfitness are to be reported on this form. Where there is evidence of any undetermined or progressive disability, this form will not be used, but the case will be referred to a Medical Board for completion of M.F.B. 227.

No. 313069 Rank Pte Surname ANDERSON
(Given name in full) George Leslie

Unit or Corps 6 F.G. Birthplace

(Examination of Officer or Other Rank (stripped) to be made by one Medical Officer).

1. **GENERAL DESCRIPTION:**

Physique good Weight 140 lbs. Height 5 ft. 9 1/2 in. Colour of Eyes Brown.

Nutrition good

Pulse 73 regular

Condition of arteries good

Vision Rt. 6/6 Left 6/6

Hearing (conversational voice) Rt. 20 ft.

Left 20 ft.

Identification marks, scars, or deformities. (Give cause and date of origin).

none

Opinion as to general health and physical condition good

2. **Has Officer or Other Rank ever suffered from, or has he now, any affection of the following systems? (Answer "Yes" or "No"). (Subjective evidence may be sufficient in certain cases.)**

Nervous System No Genito Urinary Sytem No Cardio-Vascular System No

Special Senses No Integumentary System No Respiratory System No

Disturbance of mentality No Muscular System No Digestive System No

Osseous and Joint System No Any other general condition No

3. **If the answer to any part of Section 2 above is "Yes," here give full particulars, with cause and date of origin; and also a description of the present condition.**

20-6-18 Contusions Recovered.
Sclerosis of Lach Duct
20-11-18 - 15-6-18
Divided

(If space is insufficient, continue on back of form.)

[OVER]

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at Ripon Yorks (Overseas)

Date 3-4-19 Signed W Fountain Lt Col M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature G L Anderson

(If not satisfied, M.F.B. 227 will be completed by Medical Board.)

THIS SECTION FOR USE IN CANADA—

Examined at ..... (Canada)

Date ..... Signed ..... M.O.

I hereby certify that I have read, or have heard read, the above lescription of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to, or during service.

Signature .....

(If not satisfied, M.F.B. 227 will be completed bv Medical Board.)

(This space to be used, if necessary, in connection with Section 3, overleaf, only.)

[OVER]

M.F.W. 129.
1933 (D.P.) 500M-11-18.
1772-39-1142.

C.A.D.C. 5009A

CANADIAN ARMY DENTAL CORPS, O.M.F.C.

DENTAL CERTIFICATE FOR DEMOBILIZATION

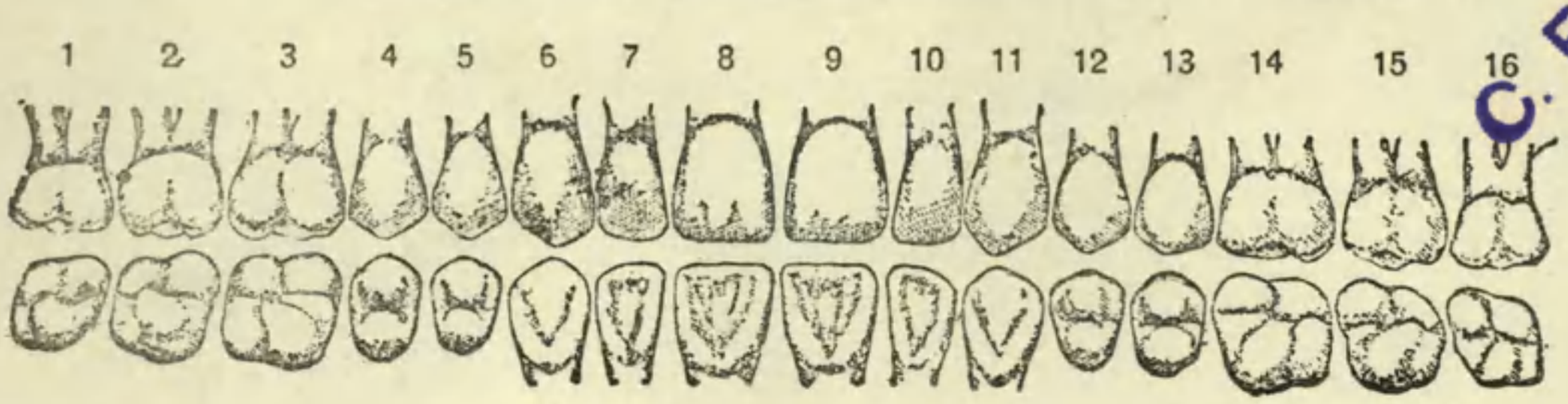
Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) ANDERSON. G.L.

REGIMENT C.F.C. RANK Pte No. 3130608

Date of Examination in England 4-4-19 Date of Examination in France

C.F.



DIRECTIONS TO DENTAL OFFICERS

1. This form will be made out for each individual at the time of Demobilization in England or France.
2. Figures as per chart will be used to designate teeth concerned.
3. In reference to Partial Dentures the numbers of teeth thereon will be stated

DENTAL BOARD * RIPON * 14 APR 1919

PRESENT DENTAL REQUIREMENTS

1. FILLINGS 2. 5. 8. 9. 10. 12. 15. 22. 23. 24. 25. 26. 27
2. EXTRACTIONS —
3. CROWNS —
4. DENTURES
   - (a) Full Upper —
   - (b) Part Upper —
   - (c) Full Lower —
   - (d) Part Lower —

CONTENTS COPIED C.A.D.C., M.D. No. 1

HAS HE EVER REFUSED DENTAL TREATMENT? No

HAS HE EVER RECEIVED DENTAL TREATMENT? (Reply by "*Yes*" where applicable to any or all of *a*, *b* or *c*.)

- (a) In Canada yes
- (b) In England yes
- (c) In France —

Signature of Dental Officer J. E. Thompson, Capt.

CONTENTS CHECKED
CALIFORNIA

M.S.A. 15.

To A A M & D A ii

MILITARY SERVICE ACT, 1917.

MEDICAL HISTORY SHEET.

IMPORTANT.—If the man's name does not appear upon the schedule of men reporting for service, or if he has not made an application for exemption or a report for service, or, although having made one, he does not know the number, he will be instructed that the copy of this medical history sheet (which will be handed to him) must be attached by him to a report for service or claim for exemption which he may make on application to any Postmaster in Canada, or be sent by him after he has noted upon it the number on the receipt he obtained from the Postmaster to a Registrar or Deputy Registrar under the Military Service Act. In any event the duplicate medical history sheet will be sent by the Medical Board to the District Officer Commanding unless instructions have been given by the latter to forward it direct to a Registrar or Deputy Registrar

1. Surname ANDERSON Christian name George Leslie

2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule 1163990 ~~London Board~~

3. Consecutive number on schedule of men reporting for service (if he appears on it)

4. Address (including street and number, if any) 399 Grey St London Ont Can

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 26th day of Nov 1917, by the undersigned medical board sitting at London Ont Can

5. Age as stated 27 Years 11 Months. 6. Apparent age 27 Years 11 Months

7. Height 5 Feet 9½ Inches. 8. Weight 129 Pounds.

9. Chest measurement { Minimum 31 Ins. / Maximum 33½ Ins. } 10. Complexion Dark { Eyes Brown / Hair Brown }

11. Physical development. fair { Good / Fair / Poor } 12. Smallpox marks Nil

13. Number of vaccination marks { Right arm X / Left arm 1 } 14. When vaccinated last Childhood

15. Distinctive marks and marks indicating congenital peculiarities or previous disease Hemeroids Scar inside rt. Leg

16. Slight defects but not sufficient to cause rejection Slight Tear left 14/1/18

The man denies having had { Rheumatism / Tuberculosis / Syphilis } We find no evidence of past { Rheumatism / Tuberculosis / Syphilis }

(Strike out disease admitted or suspected.)

We have examined the above named man in accordance with the C. E. F. Regulations for medical examinations, and he is placed in Category A ii

RIGHT EYE D 60/20 40/20 LEFT EYE D 50/20 30/20

HEARING R Normal Normal

W Connell Lieut President.

F W Harcourt Capt Member. D Nelson Capt A.M.C. Member.

Date	Result	Vaccinations	Date	Result	Anti-Typhoid Inoculations, Etc.
5/1/18		D Munro Capt M.O.	5/1/18		M.O.
		M.O.	13/1/18		M.O.
		M.O.	18/1/18		M.O.

Joined ... day of JAN 7 - 1918 191 ... at LONDON, ONT.

	Corps	Regtl Number	Habits	Date
Joined on enlistment	1st Depot Battn., W. O. B.	3130609		JAN 7 - 1918
Transferred to.....	C F C O/S			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station	Date	Disease	Result
Military Hospital London, Ont.	Mar 21/18 JAN 14 1918	Valvular Disease of Heart	CAT A II
London, Ont.	Feb.11,1918	Category A-2	Capt.A.M.C. President.

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

B Canno Hall - 30/7/18 Confirmed B ii 5 June 1918 Capt

Cunningdale 26-8-18 - B ii confirmed Capt

24.9.18 Bi(a) H Sutherland Capt

MEDICAL BOARD, BRAMSHOTT.

Surname Anderson Christian Name George Leslie

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.
No. 12 CAN. GENERAL HOSPITAL.								Stenosis Lach.		Stenosis Lachrymal duct.	
	26 APR. 18				15	6	18	Dacl.	57	Relieved & Discharged	J. W. Cunningham Capt.
No 12 CAN. GENERAL HOSPITAL								Conjunctivitis		Conjunctivitis. Routine treatment	
		20	6	18	7	8	18		49	Recovered. R.T. 6/18. L.T. 6/18	
										Very little impairment with	
										Glasses. Empt for A. Category as	
									1	far as eyes are concerned.	J. W. Cunningham Capt.

Original

CANADIAN CONTINGENT EXPEDITIONARY FORCE.

LAST PAY CERTIFICATE.

This form to be used for all Ranks (Vide Article 71, Financial Instructions C.E.F., 1914).

Regimental No. 727832 Rank Private Name G.L. Anderson C. Coy.

Corps 110th., O.S.Bn., C.E.F. who was* discharged

On July 4th., 1916, to

* Insert "discharged" or "transferred."

The following is a statement of the account of the above-named to date of transfer or discharge inclusive :—

From 1-7-16 To 4-7-16

DR.	$	c.	CR.	$	c.
Bal. Dr. from previous month . . .			Regimental pay 4 days at $ 1 c	4	00
Total payments during period from			Field allowance 4 " $ c 10		40
			Other allowance		
Assigned Pay			Other Credits (give particulars) . .	10	00
Other Charges (give particulars) . .			Clothing		
Bal. Cr. on discharge or transfer . .	14	40	Bal. Dr. on discharge or transfer . .		
TOTAL	14	40	TOTAL	14	40

From 1-7-16 To 4-7-16

The amount shewn as Balance Cr. due on discharge or transfer has‡ been not paid.

Monthly stoppage on account of assignment of pay is 15.00, and has been charged in Paylist for month of July 1916.

‡ Insert "been" or "not been," as case may be.

REMARKS:— Date of enlistment;- 15-5-16. Single.

State cause of discharge and authority M.F.B. 227 I.D. 30-A-27

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

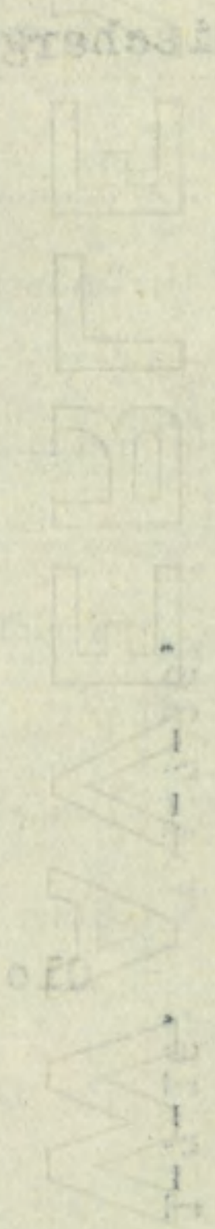
I have carefully examined this statement of account and find it to be a correct extract from the Paylist of the unit.

Date July 7th., 1916.

Place London Ont.

Captain
Paymaster 110th O.S.Bn. C.E.F.
PAYMASTER.

M. F. W. 44 Separation Allowance has been claimed in favor of Annie Anderson Mitchell Ont. (Mother)



Mo cond. C.R.482

ORIGINAL

727832

MEDICAL HISTORY SHEET.

Surname Anderson *Christian Name* George Leslie

Examined { on 15 day of May 1916
at Shalford

Birthplace { City or Town Mitchell
County Perth Ont.

Apparent age 27

Trade or occupation Barber

Height 5' Feet 10 1/4 Inches.

Weight 142 Lbs.

Chest measurement { Minimum 32 1/2 inches.
Maximum expansion 2 1/2 inches.

Physical development Good

Small-Pox Marks None

Vaccination Marks { Arm Right. Left.
Number 2

When Vaccinated last 10 years ago

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

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

Approved by R D Rankin

Rank Capt. A.M.C. M.O.

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

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

Date.	Result.	Anti-Typhoid Inoculations, Etc.
26/5/16	v	R D Rankin M.O.
2/6/16	v	R D Rankin M.O.
		M.O.

Enlisted on 15 *day of* May 1916 *at* Shalford

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	110th O.S.B.	727832		15/5/16
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.

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

M. F. B. 313.

200M—11-15.
H. Q. 1772 39-4-'9.

Christian Name George Frederick

Surname Gudgeon

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.

DVA: 95-7 Vol. 10 WSR 7(b) /CC

DEPARTMENT OF VETERANS AFFAIRS

RECORD OF SERVICE

IN THE

CANADIAN ARMED FORCES

THIS REPORT IS NOT VALID WITHOUT THE IMPRINT OF THE OFFICIAL STAMP OF THE DEPARTMENT

Service Rank and/or Number 3130609 Name George Leslie ANDERSON

1. Branch of Service: CANADIAN EXPEDITIONARY FORCE
2. Date and Place of Birth: 9th December, 1888 Mitchell, Ontario.
3. Date and Place of Appointment, Enlistment or Enrolment: 7th January, 1918 London, Ontario.
4. Unit on Appointment, Enlistment, or Enrolment: 1st Depot Battalion W.O.R.
5. Theatres of Service: CANADA--ENGLAND--FRANCE.
6. Date and Place of Retirement or Discharge: 18th May, 1919 London, Ontario.
7. Reason for Retirement or Discharge: "Demobilization"
8. Rank on Retirement or Discharge: Private
9. Medals and Decorations: BRITISH WAR & VICTORY MEDALS.
10. Remarks: Previously served under 727832 with 110th Battalion from 15th May, 1916 to 4th July, 1916 Discharged "Medically Unfit".

DESCRIPTION AT TIME OF RETIREMENT OR DISCHARGE

Sex: Male Age: 30 Years 5 Months. Height: 5 Feet 9½ Inches.

Eyes: Brown Hair: Brown Complexion: Dark

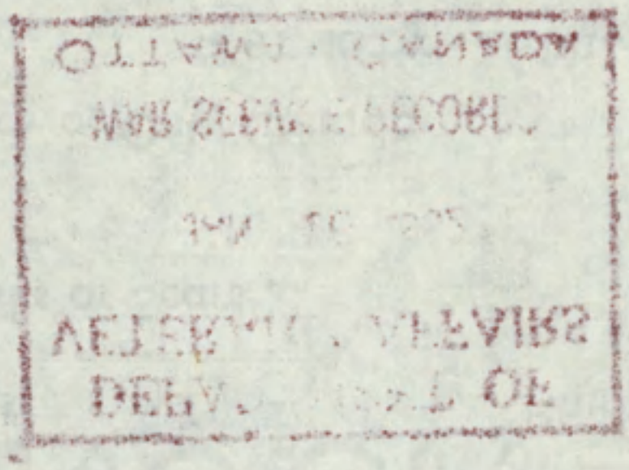
Marks or Scars: Nil

DEPARTMENT OF VETERANS' AFFAIRS
JAN 16 1952
WAR SERVICE RECORDS
OTTAWA CANADA

Ottawa, Ont., Canada, January 16th, 1951.

Director, War Service Records

DVA 812



LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
C 191.	12 Can Gen: Bramshott.	20-4-18.	Stricture Canaliculi Eye
C 233.	Disc	15-6-18	" " "
C 237.	12. Can Gen: "	21-6-18	Conjunctivitis
C 273.	Disc	7-8-18	"

NAME Anderson, G. L.

REGT'L. No. 3130609

RANK AND CORPS Pte. (4R) W.O.R.

H. Q. FILE No. 649

FOLLOWS NO.

FOLLOWS

CABLE

NO.	DATE

NATURE OF CASUALTY

L. L. 31493. M. & D. 8476.

M. F. W. 42—100M.—28-11-17.
H. Q. 1772-39-893.

No. 727832 RANK Pte. NAME Anderson G. L.

T. O. S. 15-5-16 UNIT 110th Battalion C.E.F.
D.O. 115 of 16-5-16

M. D. 1

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916 May 16	1916 May 31	✓		
June		✓		
July 1	July 4	✓	Discharged 4-7-16	D.O. 154 of 4-7-16.
			A/c closed by payments.	

UNIT SAILED
OCT 31 1916

Form DMS 1401.

A. 12. Gen HOSPITAL.

A. & D. CARD

AT

A. & D. No. 4742 PL. OF ACTION

RANK Pte REG. No. 3130609 UNIT 4th Res. Det. SICK OR WOUNDED

NAME Anderson G. L. AGE 29 RELIGION Pres.

PLACE IN HOSPITAL Ward 6.

DIAGNOSIS conjunctivitis

ADMITTED 20. 6. 18. FROM

DISCHARGED AUG 7 1918 TO Lines

TRANSFERRED

SERVICE AT HOME 6/12 IN FIELD

RESULTS

1/52.

(See Document Card for M.H. Sheet and other Documents.)

P.T.O.

REMARKS.

Form DMS 1401.

A

12 Camp Gordon HOSPITAL.

A. & D. CARD

AT Brunswick Ga

A. & D. No. 2956. PL. OF ACTION

RANK Pte REG. No. 913069 UNIT 4th Res F. Coy SICK OR WOUNDED

NAME Anderson G. AGE 29. RELIGION Pres

PLACE IN HOSPITAL Ward 6.

DIAGNOSIS Stricture Canaliculi eyes

ADMITTED 20 - 4 - 18 FROM 3

DISCHARGED JUN 15 1918 TO Nine

TRANSFERRED

SERVICE AT HOME 4/12 IN FIELD

RESULTS

2/12

(See Document Card for M.H. Sheet and other Documents.)

REMARKS.

Form R. 149.

George Leslie

C.F.C.

Name ANDERSON Rank Pte Reg. No. 3130609.

Unit 4th Res.

Next of Kin Canada

Date 1918.	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
20-4	to 12 Cs Bsht'd		CANALICULI			
—			Stricture	Canaliculi		16746
—			eyes	C191		
15-6	Discharged.		do	C233		5793.
21-6-	12 C.G.H. Brantford		Conjunctivitis	C237		20110 B.
7-8.	Discharged		"	C273		7178.

C.F.C.

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

Remedial Treatment Gymnasium,
Canadian Hospitals and
Command Depots.

LEAVE THIS BLANK.

Place: 2nd C.C.D.

Regt.No. 3/20609 Rank Pte Name Anderson G.

Unit 1/WORD Age 29 (Adm. 9.8.18

Date of(

Division ..... Hut ..... (Disch. .....

DISABILITY. Conjunctivitis.

Date. 8/11

CLASS. General.

MACHINES.

Hours of Attendance,
a.m.

p.m.

REMARKS. No M.O.'s had charge in Can. Hosts, visiting ~~Specialist~~ Oculist

R.T.G.1. 20M-30-4-18. P.T.O.

LEAVE THIS BLANK.

PROGRESS, Notes.

26-8-18- Dispatched Darn

DISPOSITION.

.....Capt.

Officer i/c Gymnasium.

16-5-16

295

L. L. Job 310—M. & D. 6574.

MILITIA AND DEFENCE

M. F. W. 11.
50m.—4-16.
H. Q. 1772-39-818.

SEPARATION ALLOWANCE

Name Mrs. Annie Anderson

Address Mitchell Ont.

Relation to Soldier wife, child or mother } Mother

Name of Soldier Anderson Geo L.

Regtl. No. 727832

Rank Pte

Corps 110th Batt.

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.....

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

M. F. W. 11a.
50m.—4-16.
1772—39—818.

Sheet No. 2.
L. L. Job 310.—Req. 6574.

Mrs. A. Anderson Mother PAYMENTS.

Name of Soldier Anderson G. L. Pte

$ 32.00 10 . 2

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				F. 10454 Cancelled.
July		~~F 10454~~	~~50~~	50. due 4/7/16 P.M.L. 8/7/16
Aug.			42	Recalled 150 overpd Aug 27/7/16
Sept.		J. 16267	32 —	Mailed 21-9-16
Oct.				Dr. Indgmt.
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..... .....PER.....

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.				

Date of Enlistment

7-18

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

A 2432

Date of Assignment

Feb 12th 1918

RATE OF SEPARATION ALLOWANCE

25.00	30 1-9-18		

7/18' P.6275-3 M.O.5-0711.

RATE OF ASSIGNMENT

15.00 100			

PARTICULARS OF SEPARATION ALLOWANCE

No. 3130609

Rank Ste. Promoted Reverted Discharge

Soldier's Name Geo. L. Anderson

Battalion 1st Depot Bn. W.O. Regt. 4th Draft.

Beneficiary

Relationship Wid mother MFW 2554 29/8

Address

PARTICULARS OF ASSIGNMENT

Name Mrs. Anna Anderson

Address Mitchell, Ont

Change of Address

1 MRS.ANNA ANDERSON,
MITCHELL,
ONT.

2 15 15.00
% 3130609 PTE GEO.L.ANDERSON
FIFTEEN DOLLARS

3

4

Date 1918		Cheque No.	Amount S/A	Amount A/P	Total		
1/4/18	March	G 422.		30	30	+	k
	April	H 7325		15	15		
	May	A 12273		15	15		
	June	B 15129		15	15	✓	
20/6/18	June	J 541.	145		145		f356
	July	Y 28106	25	15	40	✓	k
	Aug	A 30629	25	15	40		
	Sept	A 37312	25	15	40		
	Oct	A 43950	25	15	40		a.
	NOV	G 52037	25	15	40		
	DEC	G 62995	45	15	60		
	JAN 1919	B 71343	30	15	45		
	FEB	H 78336	30	15	45		
	MAR	B 84025	30	15	45		
	APR	L 1559	30	15	45		
	MAY	A 6511	30	15	45		
			465	240	705		

Z 554- 24-8-18 REMARKS 0374-9-9 B-66

+ d/d 30/3/18

SA to mother 7-18 auth S/B. 14-6-18

MRO 1B alter 29-6-18

AUTHORITY FOR NEW ACC'T. M.R. 7004 A Mrs. Beaudoin 28/3/18

M. F. W.-128.
4'0M.-6-7-1-72-39-1141
L. L. 22320—M. & D. 1921.

AUDITED.

A/c Closed 31/5/19

Ret'd per Ordnance

Date 16/5/19. m.t.w.m.II. 1-26/5/19.

Clerk E. Bamburick

m.R.O. 11/5/16.

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. 126.
400m.—5-17—1772 39-1141
L. L. 22329)—M. & D. 7593.

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form B. 263.	Attestation Paper,	Militia Form B. 235.
Squadron / Battery / Company } Conduct Sheet,	" B. 263a.	Proceedings on Discharge	" B. 218.
Copies of Convictions, by C. P.	in MS.		
Med. Hist. Sheet,	Militia Form B. 313		
Medical Report for Invalid*	" B. 227.		
Statement of Man's Account on Transfer and Last Pay Certificate,	" D. 877.		

*Only if discharged "Medically unfit."

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

(a) Proceedings on Discharge.

(b) Attestation.

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

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

This space to be for numbers.

Proceedings on Discharge.

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

No. 727832.

Rank Private

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

Corps (Squadron, Battery or Company) 110th C.S.Bn. C.E.F.

Date of Discharge July 4th 1916

Place of Discharge London Ontario Can.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 27 years 7 months.
Height 5 feet 10½ inches.
Complexion Dark
Eyes Brown
Hair Dark
Trade Barber
Intended place of residence (To be given as fully as practicable.) Mitchell Ont.

Descriptive Marks

2. The above-named man is discharged in consequence of being Medically unfit M.F.B.227 1.D 30-9-27

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.

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.
25m.—11-15.
H. Q. 1772-39-113.

(OVER)

Noted 24-11-16 M.M.

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 Commanding Officer on to the parchment Discharge Certificate.

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

(Place) London Ont — Maj. J. Delamere Lt. Col.

(Date) July 4th 1916. — *Commanding* 110th 05 Bn.

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

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

(Place) London Ont. — F L Anderson *(Signature of Soldier.)*

(Date) July 4th 1916 — H J Sanderson Captain *(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.....days.

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

11. **Confirmation of Discharge.**

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

(Place) London Ont.

(Date) July 4th 1916 — *(Signature)* Maj. J. Delamere Lt. Col.

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.)

F. L. Anderson

(OVER)

LIST OF DISCHARGE DOCUMENTS.

Attestation Paper, Triplicate	Militia Form W. 23
or Particulars of Recruit	Militia Form W. 133
Field Conduct Sheet	Militia Form W. 178 or A.F.B. 122
Casualty Form	Militia Form W. 54 or A.F.B. 103
Last Pay Certificate	Militia Form W. 44
Certificate that missing documents are unobtainable	
Medical History Sheet	Militia Form B. 313 or A.F.B. 178
Proceedings of Medical Board	M.F.B. 227, A.F.B. 179 or A.F.A. 45
Dental History Sheet	Militia Form B. 465
Medical Report	M. F. W. 129 or D. M. S. 1375
Regimental Conduct Sheet	Militia Form B. 263
Company Conduct Sheet	Militia Form B. 263a

1. Triplicate Attestation Paper (M F W. 23), or Particulars of Recruit (M.F.W. 133).
2. Casualty Form (A.F.B. 103).
3. Medical History Sheet (M.F.B. 313 or A.F.B. 178).
4. Proceedings of Med. Board (M.F.B. 227 or M.F.W. 129)
5. Dental Certificate (C.A.D.C. 5099a).
6. Field Conduct Sheet (A.F.B. 122).
7. Proceedings on Discharge (M.F.B. 218a)
8. Discharge Certificate (M.F.W. 39)
   (Enclosed in special envelope (260M)).
9. Copy of Discharge Certificate (M.F.W. 39a).
10. Dispersal Certificate (C.D. 3).
11. Equipment and Clothing Statement Q.M.G. Form (D.O.S. 2).
12. Last Pay Certificate (P. 851).
13. Pay-Book (Y.B. 64).
14. War Service Gratuity (Form M.F.W. 2595).
15. Sundry Documents.

Group A

Checked by No. 19 Dist.

Date 25-4-19

M.D.1.

(4)

War Service Badge
Class "A" No. 261117

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

SAILING NO 52
SS ORDUNA FROM
L'POOL MAY 5, 19

1. No. 3130609
2. Rank. Pte
3. Name. Anderson, George Leslie
4. Unit. W.O.R. 1 - 13th Res.
5. Date of Discharge 18-5-19 Place London, Ont
6. Reason for Discharge DEMOBILIZATION 1 - Ann. Next of Kin 1 - mother Over 20 yrs. of age 1
7. Authority.
8. Proposed Residence after Discharge Destination 1 - Mitchell Ont Dependents 1 - yes P.O. Occupations 1 - Farmer Service in France 6/12 months

9. CERTIFICATE TO BE SIGNED BY SOLDIER.

I hereby acknowledge that at the undernoted place and date I received my discharge Certificate M. F. W.? George L Anderson

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place London, Ont.

Date 18-5-19

Signature J.B. Farrell Lieut for (O. C. Discharging Unit.)

M.F.B. 218a—300M.-11-18—1772-39-113.

O.K.

(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 the discharge documents of invalids.

Militia Form B. 227.

100 m-2-16.
H. G. 1772—39—117.

Discharge

MEDICAL HISTORY OF AN INVALID.

1. Station. London.
2. Regiment or Corps. 110 Os Bn C&T.
3. Regimental No. and Rank. 727832 Pte
4. Name. G. L. Anderson
5. Age last Birthday. 27
6. Enlisted on May 15/16 at Stra Mitchell
7. Former Trade or Occupation. Barber

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. June 1/16

Military District No. 1
JUN 19 1916
I. M. D. 30-a-27

QUEEN'S OWN RIFLES OF CANADA
NOV 30 1916
H.Q.

9. Service. Years. Days.

	PERIODS.	
	From.	To.
110 Os Bn C&T.	May 15/16	June 1/16

10. (a) Disease or disability. Defective Blepharitis
    (b) Date of origin. before Enlistment
    (c) Place of origin. Mitchell
    (d) Cause. Inspection

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

Blepharitis of both Eyes. Lower lashes lost gone.

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

Noted 24-11-16 AA. Mc.

M. F. B. 227,

100 M—2-16.
1772-39-117.

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? no — not

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. two fifths than before enlistment

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

yes

R. T. Smith Capt. A.M.C.

Medical Officer by whom the case is brought forward. Capt. A. M. C. Training Depot No. 1, C. E. F.

OPINION OF THE MEDICAL BOARD.

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

10. Yes

11.

12.

15.

16.

17.

19. Is he unfit for Military Service.

Yes

20. Recommendations:

for discharge.

Signatures:—

J. S. Hudson Capt. A.M.C. President.
A. M. C. Training Depot No. 1, C. E. F.

Robert C. Wallace Capt. A.M.C. Members.
A. M. C. Training Depot No. 1, C. E. F.

Station. London

Date. June 2/16

Date. 2-6-16

C. C. Bell Major Asst. Director of Medical Services, M. D. No. 1

Approved.

Date. 6/12/16

D. J. McKay Col. for Director-General of Medical Services.

FORM P. 559
8245-150M.-7/3/17

MARRIED OR SINGLE: Single.

PLACE OF BIRTH: Mitchell, Ont.

NAME OF NEXT OF KIN: Annie Anderson RELATIONSHIP: Mother.

ADDRESS: Mitchell, Ont.

R.

NAME OF NEXT OF KIN: RELATIONSHIP:

ADDRESS:

APPOINTMENTS.
PROMOTIONS AND REVERSIONS

PARTICULARS	EFFECTIVE DATE	AUTHORITY

DATE ADMITTED	ADMISSIONS DATE DISCH'D	V. OR A.	TO HOSPITAL, &C. NAME OF HOSPITAL

SEPARATION ALLOWANCE

SEPARATION ALLOWANCE MONTHLY $ — EFFECTIVE (DATE) — STOPPED EFFECTIVE (DATE)

PAYABLE TO — REASON

RELATIONSHIP — AUTHORITY

AUTHORITY FOR ISSUE — REMARKS

SEPARATION ALLOWANCE MONTHLY $ — EFFECTIVE (DATE) — STOPPED EFFECTIVE (DATE)

PAYABLE TO — REASON

RELATIONSHIP — AUTHORITY

AUTHORITY FOR ISSUE — REMARKS

NEW PAYBOOK ISSUED — NEW PAYBOOK ISSUED

REG'L NO. 3130609, RANK Pte. NAME Anderson, George Leslie.

PLACE OF ATTESTATION London, Ont. DATE OF ATTESTATION 7/1/18. ORIGINAL UNIT 1st Depot Bn. N.S.R. Reg.

PRESENT UNIT 4th C.M.R. Res.

ASSIGNED PAY

PER MONTH $ 15.00 (1) DATE EFFECTIVE 1/2/18 AUTHY.

PAYABLE TO Annie Anderson.

Mitchell, Ontario RELATIONSHIP Mother.

PER MONTH $ (2) DATE EFFECTIVE AUTHY.

PAYABLE TO

RELATIONSHIP

PER MONTH $ (3) DATE EFFECTIVE AUTHY.

PAYABLE TO

RELATIONSHIP

PER MONTH $ (4) DATE EFFECTIVE AUTHY

PAYABLE TO

RELATIONSHIP

DISCHARGE DATE AND PLACE

REASON AND AUTHORITY

(1) STOPPED EFFECTIVE — CAUSE — DATE A3M FORMS REND.

(2) STOPPED EFFECTIVE — CAUSE — DATE A3M FORMS REND.

(3) STOPPED EFFECTIVE — CAUSE — DATE A3M FORMS REND

(4) STOPPED EFFECTIVE — CAUSE — DATE A3M FORMS REND.

ACCOUNT TRANSFERRED TO N.E. BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

PARTICULARS OF TRANSFERS

TO UNIT	EFFECTIVE DATE	AUTHORITY

PERIOD FROM	PERIOD TO	PAY AND FIELD ALLOWANCE NO. OF DAYS	PAY AND FIELD ALLOWANCE RATE	PAY AND FIELD ALLOWANCE $ C.	WORKING PAY NO OF DAYS	WORKING PAY RATE	WORKING PAY $ C.	SEPARATION ALLOWANCE $ C.	ASSIGNED PAY CREDITS $ C.	ANY OTHER CREDITS $ C.	TOTAL CREDITS $ C.	SEPARATION ALLOWANCE $ C.	CASH PAYMENTS DURING THE MONTH 1 $ C.	2 $ C.	3 $ C.	4 $ C.	ASSIGNED PAY $ C.	OTHER CHARGES $ C.	TOTAL DEBITS $ C.	BALANCE CARRIED FORWARD CREDIT $ C.	BALANCE CARRIED FORWARD DEBIT $ C.	NUMBER OF ACQUITTANCE ROLLS 1	NUMBER OF ACQUITTANCE ROLLS 2	NUMBER OF S.A. AND A.P. CHEQUE	REMARKS. ALL CASUALTIES, PROMOTIONS, &C., TO BE NOTED, ALSO PARTICULARS OF "OTHER CREDITS" OR "OTHER CHARGES"
MONTH	PARTICULARS	CR.1	CR.2	PARTICULARS						DR.1	DR.2	CR.3	DR.4	BALANCE											
28 FEB 1918.				BALANCE FROM CANADA.																					
March 31	PP	34	10											16	80										
				C.A.P.										34	10										
				a.r. 1467 7/3/18 Det. R.S.Holt				4	87					50	90										
				a.r. 2101 21-3-18 H.L.R.				7	30	12	17			27	17										
		34	10											23	73										
													15	23	73										

Ass Pay for the month of February has been deducted on Pay List for that month.

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY. * ~~ENGLAND~~ OR CANADA.

EFFECTIVE DATE:- 1-2-18

AMOUNT:- 15 00

SEPARATION ALLOWANCE. * ENGLAND OR CANADA.

EFFECTIVE DATE:-

AMOUNT:-

NAME:- ANDERSON. George Leslie 113 P

NUMBER:- 3130609

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Pte

NAME, ADDRESS, RELATIONSHIP & AUTHORITY | WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.

Annie Anderson Mother
Mitchell Ontario

Stopped Effective 1-4-19

UNIT AND TRANSFERS

ORIGINAL UNIT:- 1st Depot Bn. WORKS

DATE ACCOUNT FIRST OPENED:- 1-3-18

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			WORKS
329	1/10/18		BDep. C.F.C.

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS | UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK.

DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT
8-10-18		~~2 Hosp 0-0-9~~	~~18~~				
~~17-3-19~~	~~3788~~	~~13 Res f/14~~	~~68 13~~				
~~17-3-19~~	~~3792~~	~~" 0-0-6~~	~~17~~				
			68 13				

a/c agreed 31/10/18 P&S

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1 —	10		

PARTICULARS OF RENDERING NON-EFFECTIVE:- 31-3-19 Discharged to Canada ~~MR~~ 5659 Ripon 29/3/19 MD 1.

MONTH	PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
31/3/18	Bal. Forward								23 13		
April	30. CR.	33 00		a/c. Canr				15			
				CR 24 6/4/18 4 Lbs.	24 33				17 40		
		33 -			24 33			15			
May	31 PP	34 10		C.A.P.				15			
				a/c. 642. 1/5/18. 1269 H.	4 87				31 63		
		34 10			4 87			15			
June	30 C.R.	33		C.A.P.				15			
				a/c. 1349 5/6/18 1269 H.	4 87				44 76		
		33			4 87			15			
July	31 —	34 10		C.A.P.				15			
				- 1851 3/9/18 1269 H.	4 87				58 99		
		34 10			4 87			15			
Aug	31 —	34 10		C.A.P.				15			
				- 3497 14/9/18 2669 A.	14 84						
				- 3849 26/8 - —	19 71				43 54		
		34 10			34 55			15			
Sept	30. PP.	33 -		C.A.P.				15			
				a/c. 2237 13/9/18 4 Res	14 60				46 94		
				D.M.R. B3169 25/9/18 B.D.C.F.C.	29 20				17 74		
		33 -			43 80			15			
Oct	✓	34 10		C.A.P.				15			
				a/c B3604 B.D. 9/10/18	48 7				31 97		
		34 10			48 7			15			
Nov	✓			C.A.P.				15			
Dec	✓	67 10		a/c 347 11 Dis 20/11/18	11 19						
Jan	✓	34 10		C.A.P.				15			
				a/c 1 7 Co 5/12/18	2 46						
				a/c 2 B 15/12/18	9 3			15	60 19		
		101 20			27 98			45			

NUMBER 313069 RANK NAME ANDERSON G.L.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR 2	DR. 3.	DR. 4.	BALANCE	DEFERRED
31/1/19	Forwd								60 19	
Feb	BP	30 80		AR 54 JCo 4/1/19	3 73					
Mar	"	34 10		AR 85 21/1/19	3 73					
				Cap				15		
				AR 110 4/2/19	5 60					
				AR 137 15/2/19	3 73					
				AR 4257 Can Entcamp 1/3/19	16 79 5 46					
				Cap				15		
				AR 3728 3 CERB 17/3/19	6 8 13					
				AR 3777 " "	12				259	
		64 90			92 50			30		
Apl				AR 210. 9 4/19 Endorsed Kennel	9 73					
				QH 005. 284 R 720. 8 19/8.	18					
				AR 1625. 29 4/19 Cond "	9 73				1705	
					19 64					

S.O.S. Can. 7.5.19
S.L. 5½.

A 3 M. FORM REN'D. Stafford ELECT. 4-19
DISCHARGED TO Canada DATE 31-3-19.
PAY BOOK VERIFIED 31-3-19.
CR. BAL. 2 11 LETTER 31-3-19
AUTHY. AR 5659. Ripon 29 3 19

AR 210. 9 4/19 9 13 Cond. & Bal. 19.19 7 32

COMPILED BY Stafford
CHECKED BY A Ritchie

AR 1625 for 9 13 Endor. & Bal. 1705 19.19

148 — 1 Pm 10-AN-79 — 1 — 148

AUDITOR | PAYMASTER

PROMOTIONS, REDUCTIONS AND REVERSIONS AFFECTING DAILY RATE OF PAY AND ALLOWANCES

M. OR S. S. — REGT. No. 3130609 — RANK Pte — NAME (IN FULL) ANDERSON Geo Leslie (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN: Mrs. Anna Anderson — RELATIONSHIP: W. mother
ADDRESS: Mitchell, Ontario
IS SEPARATION ALLOWANCE PAID? 30.00 — DATE EFFECTIVE: Pd to 31-5-19
TO WHOM PAID: Mrs. Anna Anderson — RELATIONSHIP: M. mother
ADDRESS: Mitchell, Ontario

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F.: 6-7-6 — IF IN P.F. WHAT UNIT?: Mitchell Ontario
PLACE OF ATTESTATION: 7-1-18 — TRANSFERRED TO: T.O.S. DD #1 — DATE: 7-5-19 — AUTHORITY: DO 140
DATE OF ATTESTATION: 7-1-18 — TRANSFERRED TO: — DATE: — AUTHORITY:
ASSIGNED PAY $: 15.00 — DATE EFFECTIVE: Paid and Closed by Ottawa 31-5-19
PAYABLE TO: Mrs Anna Anderson — RELATIONSHIP: W. mother — ANY CHANGE IN ASSIGNEE OR ADDRESS
ADDRESS: Mitchell, Ontario
STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE:
DISCHARGED — PLACE: London — DATE: 18-5-19 — REASON: Dem — AUTHORITY: DO 140 — IF ENTITLED TO POST DISCHARGE PAY:

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.	OTHER CREDITS $	OTHER CREDITS C.			TOTAL CREDITS $	TOTAL CREDITS C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	COL. NO. 1 DATE	COL. NO. 2 NO.	COL. NO. 2 DATE	COL. NO. 3 NO.	COL. NO. 3 DATE	CASH PAYMENTS COL. NO. 1 $	COL. NO. 1 C.	COL. NO. 2 $	COL. NO. 2 C.	COL. NO. 3 $	COL. NO. 3 C.	ASSIGNED PAY $	ASSIGNED PAY C.	REGIMENTAL CHARGES $	REGIMENTAL CHARGES C.	OTHER CHARGES $	OTHER CHARGES C.			TOTAL DEBITS $	TOTAL DEBITS C.	BALANCE DEBIT $	BALANCE DEBIT C.	BALANCE CREDIT $	BALANCE CREDIT C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT 31-3-19							2	41	2	41																											Per S.S. Ordona 16 5/19
1/4-22 5/19	52	1.10	57	20	35 70	-			162	20					18/73		45	7	57	-	105	28	30	-					19	46			164	61					Bal. Eng L.P.C. 31-3-19
																																						Pay to Estimated Date of Discharge
																																						22-5-19 Clo. Allce. 1st Payment of W.S.C.
																																							Eight (8) only, Train Money
																																						9.73 Advance Returned 29 4/19
																																						9.73 Do. 29 4/19
					9 1/2 G	Sa													9 1/2 G	Sa																	
122 days			280	00	120	00	400	00									70																210	00	120	00			5 d overpd for May.
																														S.C. 12	00					108	00			
																								18	00											90	00			11/6/19 $89.88 Charge to adjust to date of Discharge 4 days @1.10
																														4	40			205	60					
																	65	60					30	00									140	00	60	00			19/6/19 $930.75-6
																	70						30	-									70	-	30	-			10-7-19 10.58 3/3 - 3
																	70						70																11.8.55 11.8.56 17.8.19
			280	-	120	-	400	-									275	60	108	-									16	40			400						Pay J Gilbert Capt.

WAR SERVICE GRATUITY

100M-1-19.—L. L. 53962-M. & D. 9723.
M. F. W. 2596.
1772-39-1390.