REGIMENTAL DOCUMENTS

NAME ANDERSON. Oliver Mowat. REGT. No. 2384035 UNIT 1st Depot Battn. M.R. H. Q. FILE No.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
3	ATTESTATION PAPER (M.F.W. 23, 133 or 51)					DEATH
/	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					CATEGORY
/	TRAINING HISTORY SHEET (M.F.W. 113)					
/	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
	REGT. CONDUCT SHEET (M.B.W. 263 or A.F.B. 120)					
	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
/	DENTAL HISTORY SHEET (M.F.B. 465)					CATEGORY
/	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					
	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)					
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
/	LAST PAY CERTIFICATE (M.F.W. 44)					
/	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					
/	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
2	CARDS					
	PAY-SHEETS					
						12-28
						19-29
						29-29.
						1

W. 2559
25M.—1-23
1772-39-1377

ORIGINAL

IO M. D. Ist Depot Battalion Manitoba Regiment

Regtl. No. 2384035

PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class I)

1. Surname Anderson
2. Christian name Oliver Mowat
3. Present address 182 Secord street Port Arthur Ontario Canada
4. Military Service Act letter and number 697740 TC
5. Date of birth September 13th. 1895
6. Place of birth Lakeside Ontario Canada
   (town, township or county and country)
7. Married, widower or single Single
8. Religion Presbyterian
9. Trade or calling Locomotive Fireman
10. Name of next-of-kin George B. Anderson
11. Relationship of next-of-kin Father
12. Address of next-of-kin Rural Route No. I Lakeside Ontario Canada
13. Whether at present a member of the Active Militia no
14. Particulars of previous military or naval service, if any no
15. Medical Examination under Military Service Act:—

    (a) Place Port Arthur, Ont. (b) Date Nov. 9, 1917 (c) Category A2

Discharged – Railroad Employee 29/11/18 eff 2/12/18 (C.O. 281 of)

DECLARATION OF RECRUIT

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

Oliver Mowat Anderson (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age 24 yrs. 2 mths.

Height 5 ft. 6¾ ins.

Chest measurement: fully expanded 37 ins.; range of expansion 3 ins.

Complexion Medium

Eyes Grwy

Hair Brown

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

Nil

H. R. Mathews Major

O. C. "H" Coy. 1st. Depot. Battalion, Manitoba Regiment

O. C. Depot Btln.

Regt.

Place Port Arthur, Ontario Canada Date May 20, 1918

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

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

10472

This is to Certify that No. 2,384035 (Rank) Private

Name (in full) Oliver Mowat Anderson enlisted in

the 1st Depot Battalion Manitoba Regiment

CANADIAN EXPEDITIONARY FORCE at Port Arthur, Ont. on the 20th.,

day of May 1918.

HE served in 1st. Depot Battalion Man. Regt. (Canada)

and is now discharged from the service by reason of being a Railroad Employee

(C.O. 281 – 29-11-18)

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

Age 23 Years 2 Months

Height 5 Feet 6 3/4 Inches

Complexion Medium

Eyes Grey

Hair Brown

Marks or Scars Nil.

ORDERLY ROOM
DEC 2 1918
1st DEPOT BATTALION
MANITOBA REGIMENT

Oliver Mowat Anderson
Signature of Soldier

W. E. Crowhurst
Issuing Officer

Major for
Commanding, 1st Depot Battalion Manitoba Regiment
Rank

Date of Discharge December 2nd-1918.

Appointment

Signed at Winnipeg, Man. this 2nd day of December 1918.

in Military District No. Ten

File Reference No.

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

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

DISTRICT CASUALTY OFFICE, DEC 2 1918 M. D. 10

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

No. 2384035 (Rank) Private Name Oliver Mowat Linderson

Unit 1st Depot Battalion Man. Regt

Address on Discharge 182 Second St., Port Arthur, Ont.

Character and Conduct Good. Werk

Former Occupation Locomotive Fireman

Special Qualifications of Value in Civil Life Locomotive Fireman

Medals and Decorations Nil

ORDERLY ROOM DEC 2 1918 1st DEPOT BATTALION MANITOBA REGIMENT

Remarks

Signed at Winnipeg, Can. this 2nd day of December 1918

W. A. Crawford Major for
Name of Officer
Commanding, 1st Depot Battalion Manitoba Regiment

Rank

Appointment

S. Goldstein Capt.
District Casualty Officer,
Military District No. 10

NOV 20 1917

20-5-18

VOLUNTARY

M.S.A. 15.

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 Andreson Christian name Albert Howard

2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule 697740 T.C.

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

4. Address (including street and number, if any) 182 Second St PORT ARTHUR, ONT.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 19 day of Nov 1917, by the undersigned medical board sitting at PORT ARTHUR, ONT.

5. Age as stated 24 Years 7 Months. 6. Apparent age 25 Years — Months

7. Height 5 Feet 6 3/4 Inches. 8. Weight 143 Pounds.

9. Chest measurement { Minimum 34 Ins. / Maximum 37 Ins. } 10. Complexion Med { Eyes Grey / Hair Brown }

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

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

15. Distinctive marks and marks indicating congenital peculiarities or previous disease —

16. Slight defects but not sufficient to cause rejection —

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 A1 (~~A2~~) A S VR 20/20 VL 20/20 Hearing normal

J Picard Capt President.

J E Martin Capt Member. P M Boyd Member.

Signature of Man J Anderson

Date	Result	Vaccinations	Date	Result	Anti-Typhoid Inoculations, Etc.
27-7-17		G W Broom M.O.	13-7-18		G W Broom M.O.
		M.O.	20-7-17		G W Broom M.O.
		M.O.	27-7-17		G W Broom M.O.

Joined 20 day of May 1918 at Port Arthur, Ontario

	Corps	Reg'tl Number	Habits	Date
Joined on enlistment				
Transferred to	1st Depot Batt. N.R.	2284139		20-5-18

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station	Date	Disease	Result
Port Arthur	Sept 19th 18	adhesions after appendectomy	A.V. Pres G.W. Broom major & Ferguson major
Port Arthur	21-11-18	Nil	A2 For discharge A Ferguson major A Cameron Capt

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.

Surname Anderson Christian Name Oliver Mowat

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				

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

District IO

Name of Soldier Anderson Oliver Mowat

Regiment "H" Coy. Ist. Depot Battalion Manitoba Regiment

Rank Private

No. 2384055

M.F.B. 465
200M-1-17
1772-39 950

INSTRUCTIONS

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

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

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

	Date	Amalgam	Temporary Filling (a) G.P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhœa	Synthetic Porcelain	Extracting	Dentures U	Dentures L	Dentures P	Gold Clasp	Gold Filling	Crowns Gold	Crowns Porcelain	Bridge Work	OPERATOR	Military Dist.	REMARKS
	1918 July																					
Condition on first Examination	12										1.30 32									O Neill	10	Ext 2.14.15. Cav. 8.16.19.29.
	July 15/18										2.14. 15									Jas G. O'Neill Capt	10	

ORIGINAL

44-a-424

M. D. 10 No. 29

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 2384035 Rank Pte. Name Anderson O.M.

Corps I.D.B.M. who was* struck off strength

On 2.12.18 191...., to .....

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1.12.18 191...., to 2.12.18 191...., the inclusive date of transfer or discharge.

Dr.	$	c.	Cr.	$	c.
Bal. Dr. from prev. month	3	90	Balance Cr. from prev. month		
Advances by Cheques No.			Regt'l. Pay 2 days at $ 1 c.	2	00
Advances by Cheques No.			Field Allow. 2 days at $ 10 c.		20
Assigned Pay and Sep'n Allce. No 10506	18	35	inc SA 3 mos & 2 days Dec Separation Allowances* (Monthly)	17	00
LWOP 1.12-2.12.18 Other charges	2	20			
			Other Allowances* clothing	35	00
Payment on transfer or discharge No. 10507	29	75	Other Credits*		
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)		
Total	54	20	Total	54	20

*Give particulars.

A monthly stoppage of $ 20.00 (†) has ..... (‡) been paid on account of Assigned Pay for the month of December 191 8 and Sep'n Allce. for month of ..... 191... (to) Assignee Myrtle I Anderson

(Address) 139 South Marks St Fort William 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.

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

REMARKS:—

State (1) date of enlistment 20.5.18

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

(3) cause of discharge railroad employee authority B.O. 334

(4) authority for transfer .....

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

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

Date December 20th. 1918 1st. DEPOT BATTALION, MANITOBA REGT.

Place Winnipeg Man.

Capt. Paymaster

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

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

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

M. F. W. 44.

H.Q. 1772-39-903.
100M-9-18. D.P. 874.

JAN 3 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 "H" Coy. 1st. Depot Battalion Manitoba Regiment

Regimental No. 2384035 Rank Private C. E. F. Name Anderson Oliver Mowat

Enlisted (a) 20-5-18 Terms of Service (a) M.S.A. Service reckons from (a) May 20, 1918

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) Civil Locomotive Fireman Military Nil

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				
29/11/18	A.A.G.	Discharged - Railroad Employee.	Winnipeg	2/12/18	C.O. 281 of 29/11/18

[signature] Major for Commanding, 1st Depot Battalion Manitoba Regiment

(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				

A 39448

REG. No. 238 4038 NAME Anderson C. J.
(SURNAME FIRST)

RANK Pte CORPS 10th Bn Lo. Lt.

AGE 39 SERVICE 2/12

NAME OF HOSPITAL General PLACE Port Arthur

DATE OF ADMISSION 10-7-18

DISEASE Sprained Rt. Ankle

DISCHARGE 15-7-18

OPERATION

DISCHARGED TO DUTY Yes

TRANSFERRED TO

DISCHARGED BY MEDICAL BOARD

100M—9-17—H.Q. 1211-8-30.

REMARKS .....

M. S. A. 697740 I.C.

H.

NO. 2384035 NAME Anderson Oliver Mowat

ENLISTED AT Port Arthur DATE 20.5.18 CATEGORY A 2

PREVIOUS SERVICE none NATIONALITY Canadian

CLASS OF ENLISTMENT Draftee OCCUPATION Loco Fireman

WHEN ORDERED TO REPORT WHERE

MARRIED OR SINGLE Single RELIGION Presbyterian

AGE 24.2 HEIGHT 5 6 3/4 WEIGHT

COLOR OF HAIR Brown EYES Grey COMPLEXION medium

CHEST MEASUREMENT, NORMAL 34 EXPANDED 37

NAME OF NEXT OF KIN G B. Anderson RELATIONSHIP Father

ADDRESS Lakeside. R. R. No 1 Ont. Canada

REMARKS 141 Taken on

329 of 25.11.18. h. W O G further orders.

334 of 30.11.18. S. A. S. being Reyman Co. 78.

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.

DEPT. OF MILITIA & DEFENCE
DEC -9 1918
CANADA

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

No. 2384035

Rank Private

Name Anderson, Oliver Mowat.
NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.

Corps (Squadron, Battery or Company) 1st Depot Battalion Manitoba Regiemnt.

Date of Discharge December 2nd, 1918.

Place of Discharge Port Arthur. Canada.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 23 years 2 months.
Height 5 feet 6¾ inches.
Complexion Medium.
Eyes Grey
Hair Brown.
Trade Locomotive Fireman.
Intended place of residence (To be given as fully as practicable.) 182 Secord St., Port Arthur. Ont. Canada.

Descriptive Marks

Nil.

2. The above-named man is discharged in consequence of

Being a Railroad Employee
(C. O. 381 29-11-18)

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 hand writing 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.

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.)

Locomotive Fireman.

M. F. B. 218.

160m.—6-16.
H. Q. 1772-39-113

(OVER)

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) Winnipeg. Canada. ..... [signature] Major for Commanding, 1st Depot Battalion Manitoba Regiment

(Date) December 2 nd, 1918. *Commanding* .....

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) Port Arthur. Ont. Oliver Mowat Anderson (*Signature of Soldier.*)

(Date) December 2nd, 1918 William Closs (*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.

Oliver Mowat Anderson (*Signature of Soldier.*)

196

10. **Statement of Service.**

Service toward Engagement to.....(the date to which the Record of Service is completed).....years 196 days.

Total.....years 196 days.

11. **Confirmation of Discharge.**

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

(Place) Winnipeg. Canada.

(Date) December 2nd, 1918 (*Signature*) [signature] Major for Commanding, 1st Depot Battalion Manitoba Regiment

Reservations referred to at Para. 8.

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

None.

Oliver Mowat Anderson

Witness. William Closs

(OVER)

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

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

Is fit for duty in Category "A2"

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

President.

PLACE Port Arthur, Ont.

Members.

DATE Nov. 21st. 1918

APPROVED BY

Assistant Director of Medical Services.

DATE

APPROVED BY

Director-General of Medical Services.

DATE

TO BE COMPLETED WHEN TREATMENT IS REFUSED

I, the undersigned, ... understand the nature of the treatment which it is recommended that I should undergo and refuse to accept it.

Witness ..... Signed .....

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

President.

PLACE

Members.

DATE

MEDICAL HISTORY OF AN INVALID

B.P.C. ORIGINAL

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" issued by the B.P.C. and instructions issued by Militia H.Q., Ottawa, will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of Sections 1 to 17 of this Form and will obtain the signature of the soldier to the "Statement," page 3. The President of the Board of Medical Officers is responsible for the proper completion of sections reserved for recording the "Opinion of the Medical Board."
3. In answering the questions, Medical Officers will carefully obtain and record the soldier's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the soldier concerned, from witnesses, or from documents.
4. Special care is required in answering question 13. Please read the questions carefully. All questions must be answered.
5. If space provided under any sections is insufficient use blank space, page 4 or add another sheet. Such entries or sheets must be initialled by the Medical Board.
6. A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board."
7. Under no circumstances may information other than that in sections 8, 9 and 10 be communicated to the soldier, directly or indirectly.
8. The nomenclature of diseases must be followed, if possible, as described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London, (1915), by Messrs. Harrison & Sons.

STATION Port Arthur, Ont. DATE Nov. 21st. 1918

1. 1 (a) Unit 1st. Depot Battn. M.R. Regimental No. 2384035 (c) Rank Pte.

(d) Surname Anderson (e) Christian name Oliver, Mount.

2. Age last birthday 24 Date of birth Sept. 13th. 1894.

3. Enlisted at Port Arthur, Ont. on May, 20th. 1918

4. Personal description:—

(a) Height 5'-6½" (b) Weight 143 (stripped) (c) Complexion Fair

(d) Colour of hair Fair (e) Colour of eyes Blue (f) Identification marks Appendectomy Scar. Scar on right side of Neck.

5. Address after discharge (for the use of the Board of Pension Commissioners)

139 South Mark St. Fort William, Ont.

6. Former trade or occupation Locomotive Fireman.

7. (a) Service

	Years	Days

	Periods	
	From	To
C. E. F.	May, 20th. 1918	Nov. 21st. 1918

(b) Has he been overseas? No. 8. Original disease or disability None

(a) Date of origin Not Applicable (b) Place of origin Not Applicable

(c) Cause* Not Applicable

(d) Present disease or disability None

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

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

In good Physical Condition.

(a) Not Applicable. (b) Not Applicable. (c) Not Applicable

M. F. B. 227.

300M.—2-18.
1772—39—117.

9. Present condition.—(*Continued.*)

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

Nervous Yes Digestive Yes Respiratory Yes Cardiac Yes

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

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

Wsa opperated on for Appendicitis on May,18th.1918.Completely recovered and causes no disability.

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

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

Not Applicable

12. Was the disability caused or aggravated by negligence, by vice or by misconduct, or by unreasonable refusal to accept treatment? Not Applicable.

The regimental documents will be referred to.

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

13. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? Not Applicable

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

Sec.10 (a)

OPINION OF THE MEDICAL BOARD

14. (*Continued*).

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit? No
(If the answer is "yes" state nature of treatment required and probable duration.)

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

17. Recommendations Is fit for duty in Category "A2"

A. P. Cameron Capt
Medical Officer by whom the case is brought forward.

STATEMENT OF THE SOLDIER.

(Sections 8, 9 and 10 are to be read to the soldier and either "satisfied" or "not satisfied" struck out.)

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

Jno. O. M. Anderson
Signature of soldier examined.

OPINION OF THE MEDICAL BOARD

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

Yes

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

20. It is certified that the soldier
(a) ~~Does require treatment~~. (Give the nature of the condition and of the treatment required and its probable duration).
(b) Does not require treatment.
(c) ~~Should pass under his own control.~~
(d) Should not pass under his own control.
(Strike out condition not applicable).