

REGIMENTAL DOCUMENTS

2/8
20/3/19
S

NAME **ANDERSON, PETER.**

REGT. NO. **2021845**

UNIT **1st Dep Bn. B.C. Regt.**



CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
ATTESTATION PAPER (M.F.W. 23, 133, or 51)	21/3/19				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.F.B. 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)					<i>Deserter.</i>
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)					



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 PETER.
2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule 310874
3. Consecutive number on schedule of men reporting for service (if he appears on it) 287 T
4. Address (including street and number, if any) Lund, B.C.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 25th day of January 1917, by the undersigned medical board sitting at VANCOUVER, B. C.

- 5. Age as stated 24 Years 3 Months. 6. Apparent age 24 Years Months
7. Height 5 Feet 10 1/2 Inches. 8. Weight 170 Pounds.
9. Chest measurement { Minimum 37 1/2 Ins. Maximum 40 1/2 Ins.
10. Complexion fair { Eyes brown Hair brown
11. Physical development good { Good Fair Poor
12. Smallpox marks 0

- 13. Number of vaccination marks { Right arm 2 Left arm 3
14. When vaccinated last infancy
15. Distinctive marks and marks indicating congenital peculiarities or previous disease Mole in forehead. Scar left cheek, Scar back of left wrist.

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 A

States not previously examined.
Spuller Capt. President.

Bonney Capt. Member. W. F. Mackay Capt. Member.

Table with columns: Date, Result, VACCINATIONS, Date, Result, ANTI-TYPHOID INOCULATIONS, ETC. Rows show M.O. results.

Joined day of 191 at

Table with columns: CORPS, REG'TL NUMBER, HABITS, DATE. Rows for 'Joined on enlistment' and 'Transferred to'.

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Table with columns: STATION, DATE, DISEASE, RESULT.

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.

VISION: Right 20/20 Left 20/20 Hearing; slightly impaired both

NO. 6
Ckd. to Schedule by

Handwritten notes and signature: Peter Anderson

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

M. F. W. 54. (A. F. B. 103.)

500M.—9-16

H. Q. 1772-30-020.

Casualty Form—Active Service.

Unit, Regiment or Corps. Ist. Depot. Bn. B.C. Regt.
 Regimental No. 2021845 Rank Pte. Name Anderson, Peter
 Enlisted (a) 25.2.18 Terms of Service (a) D. of W. Service reckons from (a) 25.2.18
 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)

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				
<u>3.1.19</u>	<u>11th Bn</u>	<u>D.O.S on trans from 1st B.C. Regt.</u>		<u>1.1.19</u>	<u>Pt. II 3.</u>
<u>31.1.19</u>	<u>C.A.K.</u>	<u>S.O.S. as Deserter by C. of I. Pt. II. D.O. 31 d/31/19</u>	<u>Vancouver</u>	<u>31.1.19</u>	<u>Pt. II. D.O. 31.</u>
<u>2/3.21</u>	<u>do</u>	<u>amended to read;— S.O.S. W/E.</u>	<u>Ottawa</u>	<u>17.3.18</u>	<u>after Order. 10</u>



Peter Anderson
 for D. of R.

(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.]

