REGIMENTAL DOCUMENTS

NAME ANDERSON THOMAS Gt. REGT. NO. 732 05 UNIT 28 CS H. Q. FILE NO.

	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) 3					DEATH
	CASUALTY FORM (M.F.W. 54 or A.F.B. 103) 2					Category
	TRAINING HISTORY SHEET (M.F.W. 113) Record Sheet					
	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122) 1					
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	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121) 1					
	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178) 2					DISCHARGE
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	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179) 1					Demob
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	LAST PAY CERTIFICATE (M.F.W. 44)					
1	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					
1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
1	E 293					
2	Miss.					
1	C. & C. Sovg.					
2	Car. Card					
1	A 747					14.29
1	A 1722					21.29
1	R 149					33-29
1	Pay card					
	Payment					3

W 2589
100M-11-18
1772-39 1577

28th Bn. 503

ATTESTATION PAPER.

No. 73203.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

	(ANSWERS).
1. What is your name?	Thomas Anderson
2. In what Town, Township or Parish, and in what Country were you born?	York. Yorks. Eng.
3. What is the name of your next-of-kin?	Henry Anderson
4. What is the address of your next-of-kin?	Indiana. Sask
5. What is the date of your birth?	19. Nov 1891
6. What is your Trade or Calling?	Labourer
7. Are you married?	No
8. Are you willing to be vaccinated or re-vaccinated?	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.	4 years RN
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

Thomas Anderson (Signature of Man).

Geo. B. Dipwall (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Thomas Anderson, do solemnly declare that the above answers made by me to the above questions 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.

Thomas Anderson (Signature of Recruit)

Date 24 Oct. 1914. Geo. B. Dipwall (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Thomas 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.

Thomas Anderson (Signature of Recruit)

Date 24 Oct. 1914. Geo. B. Dipwall (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 Moose Jaw this 24th day of Oct 1914.

Herbert H. Lucas J.P. (Signature of Justice)

I certify that the above is a true copy of the Attestation of the above-named Recruit.

F. L. Lawless (Approving Officer)

Lt.-Col. 28th Battalion

200 M.—8-14.
H.Q. 1772-1-13.

503

Description of Thomas Anderson on Enlistment.

Apparent Age 22 years 11 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height ..... 5 ft. 6 1/2 ins.

Chest measurement { Girth when fully expanded ..... 38 ins.
Range of expansion ..... 3 ins. 2"

Complexion ..... Ruddy

Eyes ..... Light Blue

Hair ..... Brown

Religious denominations.
Church of England ..... Yes
Presbyterian ..... —
Wesleyan ..... —
Baptist or Congregationalist ..... —
Other Protestants ..... —
(Denomination to be stated.)
Roman Catholic ..... —
Jewish ..... —

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).

Birth mark. Right leg from calf to foot

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 24 Oct 1914. .....

Place Moose Jaw ....
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.

Thomas 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.

Herbert Lind .....(Signature of Officer)
Lt Col

Date 24/10 1914.

503

WAR SERVICE BADG.
CLASS "A" No. 204472

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 73205 (Rank) Pte.

Name (in full) ANDERSON Thomas enlisted in

the 28th. Battn.

CANADIAN EXPEDITIONARY FORCE at Moose Jaw Sask. on the 24th.

day of Oct. 1914 19

HE served in England and France --France with 28th Bn

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 27yrs 7 mos

Height 5'6½"

Complexion ruddy

Eyes lt. blue

Hair brown

Marks or Scars Birth mark right leg from calf to foot

T. Anderson.
Signature of Soldier

Date of Discharge

Dispersal Station "C"
JUN 2 1919
Military District No. 12

Issuing Officer

MAJOR

Rank

Date 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.

RECORD OF SERVICE
HAS BEEN VERIFIED
WITH THIS SOLDIERS
DOCUMENTS.
Signature

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

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

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

On completion, if soldier discharged in Canada, this Declaration is to be returned to THE DISTRICT PAYMASTER OF THE DISTRICT IN WHICH THE SOLDIER WAS DISCHARGED, or if soldier discharged in England to be returned to Paymaster General O.M.F. of C., 7, Millbank, London, S.W.

1. Christian names Thomas 2. Surname Anderson

3. Rank Pte 4. Original Unit 28th Bn Can 5. Reg. No. 73203

6. Address, in full, to which future payments of gratuity are to be forwarded General Delivery Findlater Sask Canada

7. Date of enlistment in the C.E.F. Oct. 24. 1914

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

9. Relationship of such dependent ~~Father~~

10. Address, in full, of such dependent ~~Findlater Sask. Canada~~

11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? No

12. Were you at any time on the strength for pay and allowances of a unit of the C.E.F. which was out of Canada or the United States when such pay and allowances were issuable? If so, give particulars of one such unit and dates of service overseas with such unit:—

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

14. Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service

15. Give total length of time which you served on active service, whether in Canada or Overseas, setting out particulars of units on whose strength you served 24.10.1914 to 20.5.1915 Canada. 20.5.1915 to 15.9.1915 England 28th Bn; 15.9.1915 to date of discharge 28th Bn France

16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department No.

17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.? No

5434. Wt. /30P. 150,000(8). 2/19. S.O., F.Rd.

18. Have you had more than one enlistment? If so, give particulars of discharges and re-enlistments, and under what regimental numbers and units. no

19. Have you already received any payment of Post Discharge Pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid no

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

21. Have you, during the present war, served in the Imperial Forces? no

22. Are you entitled to receive, or have you received any gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled no

23. (a) Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England? no

(b) If so, was such reversion in consequence of misconduct or inefficiency? no

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

Demobilization JUN 2 1919

25. Are you at present a member of and in receipt of pay and allowances from any Canadian naval or land forces? If so, give unit

26. Did you at any time serve at the front in an actual theatre of war? If so, give particulars of one unit in which you served at the front, and dates of such service with that unit

27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment?

(b) If so, are you in receipt of full pay and allowances from that Department?

And I make this solemn declaration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath and in virtue of the Canadian Evidence Act.

Signature of Applicant: O. Anderson.

Place of Residence: Findlater Sask.

Declared before me at: Witley Camp.

This 13 day of April 1919

Questions 12, 13, 14, 20, 24, 25, 26 and 27. are unanswered.

Signature of Barrister of the Supreme Court Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner for the Administration of Oaths under P.C. 2767, dated 11th Nov., 1918.

A. F. Simpson
Major.

POST DISCHARGE PAY.

Date paid.	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due

Certified Correct.

District Paymaster.

503

ORIGINAL

B 28 x

MEDICAL HISTORY SHEET.

Surname Anderson *Christian Name* Thomas

Examined { on 24 day of Oct 1914
at Moose Jaw

Birthplace { City or Town York
County Eng.

Apparent age 23

Trade or occupation Labourer

Height 5 Feet 6½ Inches.

Weight ..... Lbs.

Chest measurement { Minimum 35 inches.
Maximum expansion 3 inches.

Physical development Good

Small-Pox Marks No

Vaccination Marks { Arm Right. Left. X
Number 4

When Vaccinated last Feb 3rd 1915

(*a*) Marks indicating congenital peculiarities or previous disease .....

(*b*) Slight defects but not sufficient to cause rejection .....

Approved by J. A. Lovell

Rank Capt M.O.

Date	Fit or Unfit	Examined for Re-engagement,
		16 SEP 1918 M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date	Result	Vaccinations.
	X	J. A. Lovell Capt M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
3/12/14		J. A. Lovell Capt M.O.
13/12/14		J. A. L. M.O.
23/12/14		J. A. L. M.O.

June 15th R.T. C. 42. 14

Enlisted on 24 *day of* Oct. 1914 *at* Moose Jaw.

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	28th BATTALION	73203.		
Transferred to..				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
C.C.C. Witley	April 17th 1919	Chronic Purulent Otitis Media Right Ear due to active service conditions, slight deafness resulting	"A" T. A. Wolfenden Capt

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

M. F. B. 313.
100M.—1-15.
H. Q. 1772-39-439.

CANADIAN

Surname 503 Christian Name

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.
13 Gen Hosp Boulogne		8	4	16	19	4	16	G.S.W. rt Thigh	11	To No 1 Con Dep Boulogne	A 194
No 1 Con Dep Boulogne		19	4	16	24	4	16	" "	5	To Base Depot	A 203
Base Depot.		24	4	16	7	5	16	" "	13.	Dis to Duty.	A 206–218.
№ 12 CAN. GENERAL HOSPITAL.		11	9	18	19	9	18	D.C.T. Athy.	9	small superficial ulceration at ext malleolus 20/9/18 Discharged to Depot	J. H. Johnson Lieut

Adm Card

B 503

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EYE, EAR, NOSE AND THROAT CLINIC
Witley Camp, Surrey

13/4 1919

UNIT 28th Bn

Reg.No 73213 Rank 73213 Name ANDERSON

Diagnosis :- Defective Hearing Due to

Remarks :- R.T.M.Tr. Perforated

HEARING:-	Rt.	Lt.		Rt.	Lt.
VOICE	22ft	22ft	RINNE	+	+
WHISPER			WEBER		
WATCH			SCHWABACK		
			FORK:-256		
			FORK, 2048		
			BONE COND'N	Increased.	Rt

CATEGORY RECOMMENDED:- A

CONDITION WAS Not PRESENT BEFORE ENLISTMENT AND HAS _____

BEEN CAUSED BY SERVICE.

HAS _____ BEEN AGGRAVATED BY SERVICE.

Captain C.A.M.C.
Ear Specialist
Witley Camp, Surrey

503

Rank 2/C. Name ANDERSON. Thomas. Reg'l No. 73203.

Unit 28th Bn. If in perm. Corps, What Unit? Married or Single Single.

Place and Date of Enlistment Moose Jaw Jan. 24 th Oct. 1914. Place of Birth York. Eng.

Name and Address, Next-of-Kin Henry Anderson. Findlater. Sask.

Relationship

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

M/E R.B. No 12561
File R.L. 134/43
Category C.R. Can

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
		Embk for England per S.S. Northland		29.5.15	
21-6-15.	Pte. 28. Batt.	To be. unpaid L/Corp. Wilgate			4/II O# 137
		Embarked for France.		17.9.15	Nom. Roll 28th Bn 19.10.15 (Otis Medical)
11.12.15	W.O.	Admitted 6. Can. Field Amb.		26.11.15	Cas. Rpt. " 90.
13.12.15	W.O.	Transf. to Dio Rest. Stat.		29.11.15	" " " 91.
13.12.15	W.O.	Discharged to Duty		2.12.15	" " " 91.
7.3.16.	28th Bn	Granted 8 days leave from	In the field	19.2.16.	Pte D 11. Auth: OC. 28th B.213d/25/2/(O.N.
17.4.16.	do.	Admd No. 13. Genl Hospl	Boulogne	8.4.16.	G.S. A14 thigh G.S. W.R. Thigh
28.4.16.	do.	Tsfd No1. Convl. Depot	do.	19.4.16.	C.R. A203. do.
2.5.16.	do.	Discharged to Base Depot	do.	22.4.16.	C.L. A206. do.

503
73203. Anderson T.

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
7.5.16	28th Bn	Apptd. Paid Lce/Cpl	In the Field	16.10.15	Pte A 0" 19
16.5.16	do	Discharged to Duty	do.	7.5.16	6 L A 218(1) G.D.W.R. Thigh"
14.7.16	do	Promoted to Cpl.	do	1.7.16	P.H. D.28
13.3.17	"	Reverts to Per. Grade Own Request	"	23.2.17	P.H. O. 21
14.4.17	"	Awd. Good Conduct Badge	"	24.10.16	✓ 62
21.9.18	S.R.D.	1.0.S. from 28th Bn	Pte Bethell	12.9.18	✓ 244 Cancelled, S.R.D. P.H. 301 7/27/1118 Not cancelled
14/4/19	28th Bn	Proc to England	" Le Havre	11/4/19	A.F.W. 2121
20/5/19	R. Wing C.C.C.	S.O.S. to Canada Sailing #61.	" Witley	18/5/19	A.O. 34d.
		To Canada Ceases to be shown as a Patient in Hosp vide S.O.S. letter Disposal transfer from the O.M.F.C. to the C.E.F. in Canada		19.5.19	58.0.99
9.7.19	S.R.D.		Witley	18.5.19	P.H. 158.

C.A.D.C. 5009A

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

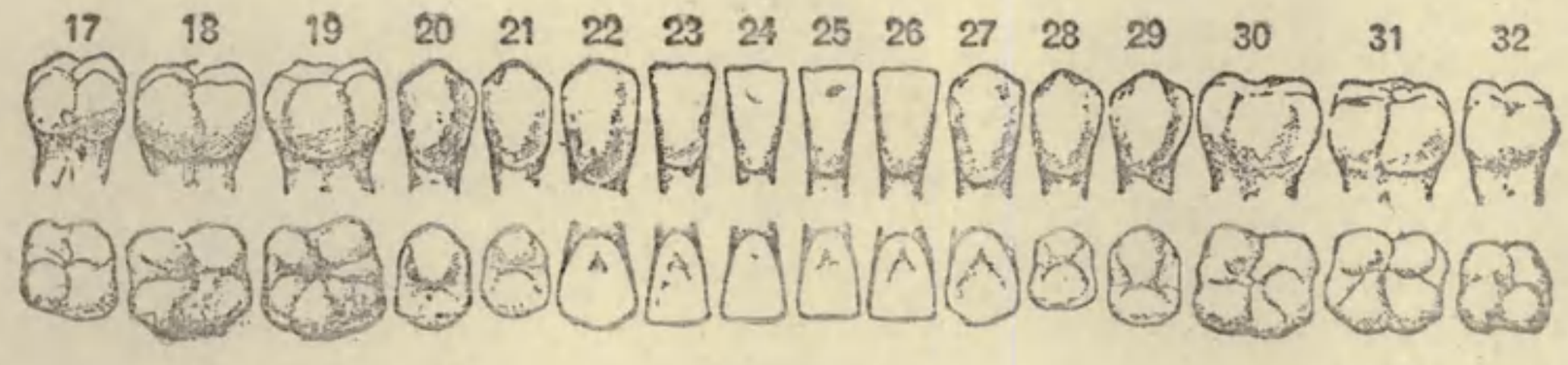
DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) ANDERSON T.

REGIMENT Sask 28th Bn RANK PTE. No. 73203

Date of Examination in England 14/4/17. | Date of Examination in France



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

PRESENT DENTAL REQUIREMENTS

1. FILLINGS
2. EXTRACTIONS
3. CROWNS
4. DENTURES
   - (*a*) Full Upper
   - (*b*) Part Upper
   - (*c*) Full Lower
   - (*d*) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT ?

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
- (*c*) In France

Signature of Dental Officer M R Thomas Capt

503

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				
19-4-16	6C70 1 Conv Depot	Wounded Adm.	70 Conv Depot	19-4-16	W.3034
9-4-16	6C 6CFa-	S. S. W. R. T. high. adm.	70 6CFa	8-4-16	} a-36 DCS 147.
Do	Do	Do Trans	C. C. S.	8-4-16	
28-4-16	6C 13 D.	Taken on Strength Class TB.	C 13 D.	28-4-16	70. R 101/13 D/3/300 DCS 148.
30-3-16	6 C Unit.	Appld Pte C/C.	In the Field	16-10-15	TB 213 of 30-3-16
7-5-16	6 C 13 D	Left C 13 Depot	Do	7-5-16	70. R 13 D DCS 153.
12-5-16	6 C Unit	Rejoined from Fd. Amb.	Do.	7-5-16	TB 213 DCS 160
5. 5. 16	C. B. D.	classified A	Havre	5. 5. 16	N.R.
7. 7. 16	7C unit	Promoted Cpl	Field	1. 7. 16	B 213. Pte Evans 28 9/16 7.16.
23. 2. 17	"	Reverts to Temp. Grade at own request.	"	23. 2. 17	B 213. Cert of Reversion A-II 0. 21/ d 13/3/17
2/7/17	"	Fined under stoppages of pay to make good cost of Govt property lost (practical) to the value of 15/- for when a T.S. losing by regular Govt property i.e. no practical to the value of 3/3 d	"	28. 6. 17	B 206 9. A-II 0 61 d 11/7/17
5. 7. 17	OC 28 In	Awarded G C Badge	"	24. 10. 16	KE 16/1331 6. A-II 0 62 d 14/7/17
21. 7. 17	"	Granted 10 days Leave from	"	18. 7. 17	B 213 A-II 0 67 d 20/7/17
4. 8. 17	"	Reported from leave.	"	30. 7. 17	B 213.
28/18	9 C Ga.	D. C. S. Food d.	adm 9 C Ga.	28/18	G 8360
98/18	5 "	do	do adm 5 C Ga.	98/18	G 8482.

(9178)—Wt. W12165—2146.—1,250,000.—2-15.—C. & G. Forms B. 103/1.

503

WSB
Class A.

Army Form B. 103.

CERTIFIED CORRECT.
Canadian Record Office,
Westminster House,
7, Millbank, S.W.

Casualty Form—Active Service.

Regiment or Corps 28th N. W. Battalion.

Regimental No. 73203 Rank ~~Pte.~~ a/L/C Name Anderson, Thomas.

Enlisted (*a*) 24/10/14 Terms of Service (*a*) duration of war Service reckons from (*a*) 24/10/14.

Date of promotion to present rank } ____ Date of appointment to lance rank } a/L/C Numerical position on roll of N.C.Os. } ____

Extended ____ Re-engaged ____ Qualification (*b*) ____

Report: Date	Report: From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
18/9/15	O/C	Disembarked	Boulogne	18/9/15	Nom Roll. 10/28/1
27/11/15	O/C 6 C.7 a.	Otitis Media adm. 6.C.7.a	In the field	26.11.15	a 36
3.12.15	O/C	Returned to duty	"	2.12.15	B 213
4.12.15	O/C 6.C.7.a.	Trans to DRS	"	29.11.15	a 36
4.12.15	DRS.	adm DRS.	"	29.11.15	" "
		To duty	"	1.12.15	"
25-2-16	O.C. Unit	Granted 8 days leave	U.K.	19-2-16	B 213 Part II orders No. 11
3-3-16	O.C. Unit	Returned to duty from leave	Unit	27-2-16	B 213 Part II
8-4-16.	G.C. No 13 Gen. Hos.	S.S.W. Rt Thight Rt Hand	No 13 Gen Hos.	8-4-16	W-3034
8-4-16	G.C. No 10 C.C.S.	Do Do Adm.	No 10 C C S	8-4-16	G-36 Dec 138.
Do	Do	Do Trans.	No 24 A.T.	8-4-16	
19-4-16	G.C. No 13 Gen. Hos	S. S W. FIII (1) Sev. Trans.	To No 1 Con Depot	19-4-16	W-3034
22-4-16	G.C. No 1 Con Depot	Fit Disc.	To Base Details	22-4-16	W-3034

(*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.

503 WSB Sheet No 2.

Army Form B. 103. Class A Regimental Number 23203.

Casualty Form—Active Service.

Regiment or Corps 28th Canadian Battn

Rank Pte Surname Anderson Christian Name Thomas

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

Enlisted (*a*) 24.10.14 Terms of Service (*a*) Dur War Service reckons from (*a*) 24.10.14

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

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

or Corps Trade and Rate .....

Occupation ....Signature of Officer.

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A.36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents
Date	From whom received				
		Embarked ...			
		Disembarked...			
7.8.18.	10 Cdn Fd Amb.	2 C.F. Foot P. adm	10 Cdn F.A.	7.8.18	A.F. 9108
		To	9 " " "	7.8.18)	
10/8/18	28th Bn.	Sick to F.A.		7/8/18	B213.
15/8/18	5 C.F.A.	A.C.F. foot r to	duty	15/8/18	A.781.
9/8/18	9 C.F.A	do to	5 C.F.A.	9/8/18	A.788.
24/8/18	28th Bn	Joined Unit	Field	16/8/18	B213.
21/8/18	do	Granted 14 days UK		30/8/18	B213. R.102 d/11/18
14/9/18	Can Records	Adm to Hosp, 12 Cdn Genl			R.L. 1-28-303
		Bramshott. (illness slight)		1/9/18	Ord R3. 14/9/18. K/1451
17/9/18	do	To report to Embk Officer		19/9/18	R.L. 1-28-303 Ord
					R3. 17/9/18. K/17/451.

(*a*) In the case of a man who has re-engaged for, or enlisted in Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.

(*b*) Signaller, Shoeing-Smith, &c.

(6396) Wt. W1 89 300,000 5/18 McA & W Ltd. Form B/103 (E. 3109)

P.T.O.

503 73203. Pte Anderson J.

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A.36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents
Date	From whom received				
28/9/18	O.C. 28th	Returned Unit	France	21/9/18	B213
9/11/18	Gen. 6 C.R.D.	attached 6 Bde H.Q.		5/11/18	B213
16/11/18	do	Returned to Unit		14/11/18	B213
28/12/18	O.C. 28th	att to Army Workshops		21/12/18	B213 Quickly 2 Cdn Div G 69/2/1 of 20/12/18
11/1/19		Rejoined Unit		7/1/19	B213
	O.C. Camp	Proceeded to England		APR 11 1919	A.R. 570
			Transferred		
			LIEUT. FOR LT.COL. A.A.G.		
21-4-19	R. Wing	T.O.S. pending disposal	Witley	12-4-19	D.O. # 9
	"	RETURN ON PROCEEDING TO CANADA	"	19 15-5-19	2nd Lieutenant

Embark HMT-Cedric
Liverpool 19,5,19
Capt & Adjt

REGINA DISPERSAL AREA "O"
T.O.S. R.O. 1620 (D.D.O. 153 Para. 9 (5)
S.O.S. R.O. ..... (D.D.O. ..... Para. 9 (6)
MEDICALLY UNFIT
DEMOBILIZATION.

LIEUT.

OFFICER IC RECORDS
R. WING C.C.S.
WITLEY.

503

D.M.S. 1300.

Surname	Christian Name or Names	Reg. No.
Anderson.	T.	73203.

Rank	Unit	Co.	Troop	Batty
Pte.	28th. Battn. Dask.			

Hospital — Date of Admission

No. 6 Can. Fld. Amb. 26.11.15.

Transferred to Div. Rest Sta. Hosp. 29-11-15.

13 Gen Boulogne. Hosp. 8.4.16.

1 Conv Depot. Boulogne Hosp. 19.4.16.

9 C.C.S. Hosp. 7.8.18

5 C.C.S. 9.8.18

Diagnosis: Otitis Media.

(1) Later Diagnosis (if changed): G.S.W. Rt. thigh..

(2) I.C.T.R. foot at.

(3) I.C.T.R. foot at.

Additional Diagnoses: If more than one state present

DISPOSITION

Dis, to Base Depot. 22.4.16. Date

Dis. to duty. 7.5.16

C.L. 11.12.15. 90. " " " 15.8.18.

REMARKS

C.L. 13-12-15. 91. Dis 20-9-18

" 14.4.16. A.194.

" 28.4.16. A 203.

" 2.5.16. A 206.

" 16.5.16. A 218.

15.8.18 A 291

16.8.18 A 292-7

20.8.18 A 296

16-9-18 B 319. Adm with sickness from France

23-9-18 B 325-2

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

fb.

503

EPITOME OF HOSPITAL TREATMENT.

	Hospital	Adm.
1.	12 Cb Bramshott	129-8
2.		
3.		
4.		
5.		
6.		
7.		

Emd

Number 73203 Rank Cpl

Surname ANDERSON

Christian Name Thomas

Units 28th Can Bat Inf Theatre of War France

Date of Service 18/9/15

Remarks Mrs Janet Anderson Sister

Latest Address P.O. Lindbergh Sask

1523 Rae St. SCR 30/23

Regina Sask.

Roll No. 6

200m.-6-21. Page 20179

24/1/40

(This form to be filled in by all ranks on voyage to Canada.)

M.D. No......

NUMBER	RANK	SURNAME	INITIALS
.....	.....	.....	....

Full postal address..... (Street) (City or Town) (Province)

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

Address.....

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

..... Railway.....

If married, is your wife on board.....Number of children on board.....

Their destination.....

(Sgd.).....

JAN 25 40
REG'N. NO. 210

No. 73203 RANK Pte NAME Anderson T

T. O. S. UNIT 28th Battalion

M. D. 10

PAID FROM	PAID TO	SIG. OR REC'T
1914 Nov 9	1914 Nov 30	✓
Dec		✓
1915	1915	
		O. S.
Jan		
Feb		✓
Mar		✓
Apr		✓
May		✓

PROMOTIONS, TRANSFERS, DISCHARGES, ETC.

PARTICULARS	AUTHORITY

UNIT SAILED
MAY 29 1915

503

H. Q. FILE No. 649-

NAME Anderson T. Thomas.

REGT'L No. 43203

RANK AND CORPS Pte. 28th. Batt.

NO. 551.

FOLL

CABLE NO.	CABLE DATE	NATURE OF CASUALTY
M. 5290.	15-4-16.	Adm. to No. 13 Gen. Hosp. Boulogne April 8th. 1916. (wounded right thigh)

L. L. Job 87318—M. & D. 6106.

M. F. W. 42—25m.-10-15.
H. Q. 1772-39-893.

LIST No.	503 HOSPITAL	DATE OF ADMISSION	REMARKS
90.	6th. Can. Fld. Amb.	26-11-15	Otis Media
91.	Div. Rest Stn.	29-11-15	Otis — Media
91.	6.C.28th. Batt. Reports:	2-12-15	Discharged to duty
A194.	#13 Gen. Boulogne	8-4-16	G.S.W. Rt. thigh
A203.	#1 Convt. Hsp. Boulogne	19-4-16	G.S.W. Rt. thigh
A206	Disch. to Base Depot	22-4-16	G.S.W. Rt. thigh
A218	Base Depot. Disch. to duty	7-5-16	" " " "
A291.	9 Can Fd. Amt.	7-8-18	D. & D. R. Foot
A292.	5 " " "	9-8-18	" " " " "
A296.	Disch. to Duty	15-8-18	" " " " "
B319-1.	adm. whilst on leave from France 12 C. G. Brandhoek	12-9-18	" " " " "
B325.	Disc.	20-9-18	" " " " "

Name ANDERSON. T. homas *Rank* PTE. *Reg. No.* 73203.

Unit 28th. Battalion.

503

Next of Kin Canada.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
26-11-15.	6.C.F.A.	Otis Media.		90.		
29-11-15.	D.R.S.	"	"	91.		
2-12-15.	DISCHARGED TO DUTY.	"		91.		
8-4-16.	13. G.H.Boulogne.	G.S.W.R.	Thigh.	A194.	M.Apl. 5290.17	
19-4-16.	1.Con depot. Boulogne.	"		A203.		
22-4-16.	Dis to base depot.	"		A206.		
7-5-16.	Dis to duty.	"		A218.		

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

Form DMS 1401. 503

12 Canadian Expeditionary HOSPITAL.

A. & D. CARD

AT IIX

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

RANK Pte REG. No. 73203 UNIT 28th Bn Stretcher Bearer Co. SICK OR WOUNDED

NAME Anderson J. AGE 26 RELIGION C of E

PLACE IN HOSPITAL 4 Ward 19.

DIAGNOSIS G.S.W. Rt Leg.

ADMITTED 11. 9. 18. FROM .....

DISCHARGED SEP 20 1918 TO Lines

TRANSFERRED .....

SERVICE AT HOME 4 8/12 IN FIELD 3 6/12

RESULTS On Leave.

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

P.T.O.

REMARKS.

Form R. 149.

Thomas

503

Name Anderson Rank Pte. Reg. No. 73203

Unit 28th Bn.

Next of Kin Canada

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1.8.18	9 G.H.Q.	9 C.S. R. Foot		A.204		34656
9.8.18	5 G.H.Q.	"		A.242		34798
18.8	Rejoined to Duty		do.	A.206		34986
		(M.S. 36 N.Z.)				
12 9	12 C.C.S. Brandhoek	1 C.C.S. Ry		A219		26476
	On Leave from France					
20.9	Discharged		do	A325		8097

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

L. L. Job 80137—M. & D. 5683.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12.
20m.—5-15.
H. Q. 1772-39-819.

A

To Whom Anderson Mrs ~~A~~

~~E. A. Machin~~

Address ~~Findlater Sask.~~

Pilot, ~~Butte Sask.~~

FINDLATER

~~To A. E. Machin~~ Sask. 3/17/20

Rate $15.00

JUN 1 1915

By Whom Assigned Anderson D.

Regtl. No. 73203

Rank Pte.

Corps "B" Coy. 28th Batt.

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			Consolidated Account.
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June		02742	15—	
July		P3002	15—	
Aug.		25930	15—	
Sept.		S4874	15—	
Oct.		25447	15 00	
Nov.		27459	15	
Dec.		W4586	15—	
Jan.	1916	X9954	15—	
Feb.		17690	15	
March		23844	15	150

Cheque T5448 for $15.00 should be $13.00
Cancelled.
T5553 forecast T5447

P—56

Rank Lance Cpl. Name ANDERSON. Thomas Reg'l No. 73203

If in perm. Corps, What Unit?

Unit 28th Bn. Married or Single Single.

Place and Date of Enlistment Moose Jaw. Oct. 24th. 1914. Place of Birth York. England.

Name and Address, Next-of-Kin Henry Anderson. Findlater, Sask.

Relationship

Assigned Pay Monthly $ 15.00 Payable to Mrs A. Anderson. Findlater. Sask.

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
1915.																	
June 1-30		30	1.00	30	30	.10	3		33			12 50	15		27 50	5 50	
July 1-31		31	"	31	31	"	3 10		34 10			12 50	15		27 50	12 10	
								64	64							12 77	Adj: of Ex:
Aug 1-31		31	"	31	31	"	3 10		34 10			14 60	15		29 60	17 27	
Sep 1-30		30	"	30	30	"	3		33			5 11	15		20 11	30 66	
Oct 1-31		31	"	31	31	"	3 10		34 10			9 70	15		24 70	39 56	
Nov 1-30		30	"	30	30	"	3		33			2 64	15		17 67	54 89	
Dec 1-31		31	"	31	31	"	3 10		34 10			5 22	15		20 22	68 77	
Jany 1-31		31	"	31	31	"	3 10		34 10			5 23	15		20 23	82 64	
Feb 1-29		29	"	29	29	"	2 90		31 90			2 62	15		17 62	96 92	
Mar 1 31		31		31	31		3 10		34 10			53 91	15		68 91	62 11	
				305			30 50	67	336 17			124 06	150		274 06	62 11	

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

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12a.
60m.—12-15.
1772—39—819.

Sheet No. 2. Mrs. A. Anderson

L. L. Job 89002.—Req. 6213.

'PAYMENTS.

Name of Soldier Anderson T.
C. Coy. 28th Batt.

$15-00

Month.	Year.	Cheque No.	Amt.	Remarks.
			150	
April	1916	J 5 88	15 —	
May		K 2176	15	
June		L 6991	15 —	
July		A 7525	15	
Aug.		Q 11473	15	
Sept.		F 16066	15	
Oct.		F 20387	15	
Nov.		F 25023	15	
Dec.		B 33163	15	
Jan.	1917	J 27317	15	
Feb.		J 42625	15	
March		J 48959	15	
April		K-22	15	
May		K 6160	15	
June		K 12809	15	
July		K 19771	15	
Aug.		M 29334	15	
Sept.		L 33700	15	
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

[redacted] Sask.

15-L. PINDLATER. SASK. 9-3-17 ✓

15-L

15-B.

6

6 420. ✓

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier_____

PAYMENTS.

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

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch A 2729

OVERSEAS CONTINGENTS

Date of Assignment June 1st 1915

RATE OF SEPARATION ALLOWANCE

Arr'

RATE OF ASSIGNMENT

15 closed 30/6/18	15⁰⁰ 1/9/18		

PARTICULARS OF SEPARATION ALLOWANCE

No. 73203

Rank 6Cb. Promoted Reverted Discharge

Soldier's Name T. Anderson.

Battalion C. Coy. 28th Batt.

Beneficiary

Relationship Father

Address

PARTICULARS OF ASSIGNMENT

Name Mrs W. ~~Mrs A.~~ Anderson. (Father)

Address Findlater Sask.

Change of Address

1 Findlater Sask

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	
30/9/17			420 ✓	420	
Oct	C 51282		15	15	
Nov	C 52518		15	15	T
Dec	F 54843		15	15	m
Jan	A 54129		15	15	B
Feb.	B 92589 ✓		15	15	
Mar	G 99822		15	15 ✓	
April	H 7610		15	15	
May	A 12564		15	15	
June	B 15405		15	15 ✓	
Sept	9 87614		15	15	
30.	L 5068		30	30	
Oct.	A 44256		15	15	M
Nov	A 52342		15	15	M
Dec.	B 63971		15	15	M
Jan	D 76273		15	15	M
Feb.	A 78578		15	15	
MAR	A 84238		15	15	
APR	B 173		15	15	
MAY	A 6650		15	15	
			720	720	

REMARKS 0379-J.6

Mother dead A P/Susp. 30/6/18 Soldier written further instruct: MRO 210. 9/7/18 J Baron CC. 2708-1517-18 JB

2M effective 1-9/18. A P $15⁰⁰ to Father } MRO #282 — 21-8-18 }

ACO 6212 gives A P from 1-7-18 to 31-8-18. for $30.00 Mailed Sept 20/18

AUDITED.

A/c Closed 31-5-19

Rec'd per [illegible]

Date 22/5/19 4.6.19

Clerk [illegible]

Mus 116842

CONSOLIDATED ACCOUNT

M. F. W. 128
400M.—6-17—1772-38-1141
L. L. 2220—M. & D. 1583.

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS

M. F. W. 128
400M.—6-17—1772-39-1141
L. L. 22520—M. & D. 1663.

503

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 criticised.~~

Yes

19. Is the invalid 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.~~)

Yes A

20. It is certified that the invalid
(~~*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.)

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

R.T.C. Auth. A.G. Tel 9083 of 11/11/18

Before signing the President of the Medical Board will read the statement signed by the invalid and differing opinions regarding Sections 7, 8, 9 and 10, as recorded in Section 18, to the invalid and if no change is indicated, will initial the statement. If, as a result of differing opinions regarding Sections 7, 8, 9 and 10 only, recorded in Section 18, the invalid is dissatisfied with the statement previously made, remarks of the Medical Board will be added here.

PLACE C.C.C. Witley

DATE April 17th 1919

President.

Members

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

President

PLACE.....

DATE.....

APPROVED BY

Assistant Director of Medical Services.

DATE.....

APPROVED BY

Director-General of Medical Services.

DATE.....

HEADQUARTERS A.F.W. 20 APR 1919 File CANADIAN TROOPS, WITLEY

B 503 Augmented

28

THIS FORM WILL BE USED FOR ALL RANKS

MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" issued by the B.P.C. and instructions issued by Militia H.Q., Ottawa, will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of Sections 1 to 17 of this Form and will obtain the signature of the invalid 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 invalid'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 invalid concerned, from witnesses, or from documents, Regimental or otherwise.
4. Special care is required in answering question 9. Read the questions carefully. All questions must be answered.
5. If space provided under any section is insufficient add another sheet. Such 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 7, 8, 9 and 10 be communicated to the invalid, 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 Witley Camp DATE April 15th 1919

1. 1 (*a*) Unit Sask. 28th Bn. (*b*) Regimental No. 473203 (*c*) Rank Pte.

(*d*) Surname Anderson (*e*) Christian name Thomas

(*f*) Home address Findlater Sask.

(*g*) Next of Kin Henry Anderson (*h*) Relationship Father

(*i*) Address of Next of Kin Findlater Sask

2. Age last birthday 27 Date of birth November 19th 1891

3. Enlistment, or Appointment (if an Officer) (*a*) Place Moose Jaw (*b*) Date October 24th 1914

4. Personal description:

(*a*) Height 5'6½" (*b*) Weight 175 est. (stripped) (*c*) Complexion Ruddy

(*d*) Colour of hair Brown (*e*) Colour of eyes Lt. Blue (*f*) Identification marks, Scars, etc. Birth Mark Right Leg from Calf to Foot

5. Former trade or occupation Labourer

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).	Years	Days
	4	75

	Periods	
	From	To
Canada	24/10/14	29/5/15
England	29/5/15	18/9/15
France or other theatres of War	18/9/15	11/4/19

7. Original disease, or injury ~~SHELL CONCUSSION~~ OTITIS MEDIA RIGHT

(*a*) Date of origin Since enlistment (*b*) Place of origin France

(*c*) Cause Service conditions

M. F. B. 227.

400M.—11-18.
1772-39-117.

503

8. Present disability— (Here state the exact nature of the disability resulting from the disabling conditions: e.g. (a) Weakness—slight, moderate, marked, etc; (b) Loss, complete or partial, of an organ or member, or of its functions; (c) Necessity for rest of the body, or of some of its parts, for therapeutic reasons; (d) Any other restrictions in choice of occupation.)

Defective Hearing Right -

9. Present condition—(a) (Before completing this section the invalid should be stripped, and subjected to a thorough physical examination. Important, to be a full description of the present disabling condition, or conditions only. "History" must be recorded in Section 10. Describe all abnormalities, anatomical and functional, contributing to present disability; objective findings to be stated first, then subjective findings.)

Objective: Specialist report - 15/4/19 - Defective hearing due to Rt. M.T. perforated - Hearing Rt 2' Lt 22 ft. Tinnitus Condition was not present before enlistment and has been caused by service. W.W. Bruce Capt CAMC

Subjective: Slight deafness right ear especially when he gets a cold.

(b) Has the invalid now any affection of the following systems, not described in Section 9 (a) above?
(Answer Yes or No.—if the answer to any part is Yes, give a brief description of the present condition.)

Nervous System no Cardio-Vascular System no (If pulse rate is abnormal, B. P. will be taken.) Genito-Urinary System no (Albumen and Sugar will be excluded.)

Special Senses no Respiratory System no Integumentary System no

Disturbances of Mentality no Digestive System no Muscular System no

Osseous and Joint Systems no Any other general condition no

Bruce exam" - normal

10. (a) History (of the condition referred to in Section 9 (a).)

States that right ear became sore first in Canada about November 1914. In France about December 1915 ear became sore & discharged but has been no discharge since then. Has been slightly deaf since then.

10.—(b) (Here give a complete history, as obtained from invalid, with dates of origin, of any affection from which the invalid, has suffered either prior to or since enlistment, and not included in Section 10 (a).)

France - 8/4/16 - 7/5/16 - GSW. Rt thigh
12 C.G.H. - 11/9/18 - 19/9/18 - Sh. I. Rt Leg

(c) (Here give a description of wounds, scars and deformities.

Birth Mark Rt Leg

11.—(a) Did the disabling condition have its origin before enlistment? no

(b) If so, has it been aggravated by Service? (If aggravated, give a description, as far as it is possible to do so, of the disabling condition at time of enlistment.)

N. A.

12. Was the disability caused, or aggravated; (a) by intemperance, or improper conduct; or (b) by unreasonable refusal to accept treatment? (a) no (b) no

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

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

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

6 C.F.A. - 27/11/15 - Tubes Medea

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

W.M. Bruce Capt CAMC
Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

(Sections 7, 8, 9 and 10 are to be read to the invalid and either "satisfied" or "not satisfied" struck out).

I, the undersigned Thomas Anderson 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

T Anderson Rank.
Signature of invalid examined.

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

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. 5009a),
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). 4 Dups.
13. Pay Book (A.B.64).
14. War Service Gratuity (Form M.F.W. 2595),
15. Sundry Documents.

Group B
Checked by No 1st Lt
Date 12/5/19

WAR SERVICE BADGE
CLASS "A" No. 209472

503

D. A. O.
O. G. 1
S. G. 29
26/9/39

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

1. No. 73203
2 Rank. Pte
3. Name. Anderson, Thomas
4. Unit. 28th Regt
5 Date of Discharge JUN 2 1919 Place Regina

Dispersal Section
Leave & Furlough Section
JUN 2 1919
NO. 12 DISTRICT DEPOT
No. 12 District Depot

6 Reason for Discharge DEMOBILIZATION

7. Authority. R.O. 1420 (D.D.O. 15) Para. 9 (V)

8. Proposed Residence after Discharge Findlater, Sask

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.? Deceased 23-10-39
649-a-820

T. Anderson.
Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place

Date

Dispersal Station No. 12
JUN 2 1919
Military District No. 12

H. St Cyr Capt
Signature
(O. C. Discharging Unit.)
MAJOR

M.F.B. 218a—300M.-11-18—1772-39-113.

Bedford
S.G. and
14-5-19

73203 ~~Cpl~~ Pte Anderson, Thomas.

DATE	PAY No. of Days	PAY Rate	PAY Amount $	PAY Amount c.	FIELD ALLOWANCE No. of Days	FIELD ALLOWANCE Rate	FIELD ALLOWANCE Amount $	FIELD ALLOWANCE Amount c.	WORKING OR SPECIAL PAY No. of Days	WORKING OR SPECIAL PAY Rate	WORKING OR SPECIAL PAY Amount $	WORKING OR SPECIAL PAY Amount c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS
			720	25										10 57	740 82
Mar 31	1	2	37	20											37 20
Apl 30	1	2	33	00											33 00
May 31			34	10											34 10
June 30			33												33
July 31			34	10											34 10
Aug 31			34	10											34 10
Sept 30			33												33
			968	75										10 57	979 32

ACQUITTANCE ROLLS 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date
		2036	28/2	2176	31/3		
		1947	13/2	2093	15/3		
		34	4/4				
		2	4/4				
		156	25/5				
		142	14/5				
		303	25/6				
		244	8/6				
						1236	8/6/17
		391	27/7			FC2	
		394	25/5				
		452	27/7			449	15/7

CASH PAYMENTS 1	2	3	4
53 88	37 43	8 55	124 06
262	262		
872	261		
261			
262			
1784			
268			
268			
268			
		268	
1071			
268			
268			
111 87	4 y 66	108 57	124 06

ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE Credit	BALANCE Debit	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
315 00		538 89	201 93				
15		31 57	207 36				Reverts to Pvte Grade at own request 29/12/17 R/O 21 /2/3/17 Dft 37 days @/10 = 370
15	370	18 70	221 86				
15		20 23	233 73				
15		35 52	233 21				Placed under stoppage of pay 28/6/17 to make good cost of lost Property (Blanket) Total value of 15/- for a fortnight after Service leaving a net balance of Govt property to the Value of 3/3 8/6 11/7/17
15	31	17 99	239 41			239 41	2nd R'Voucher 15/ 79-22 29/1/17
420	7 66	815 32	164 00			164 00	

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFER. REQ. PAY	SER. ALLCE. ENG.
Oct 1	~~Balcefwd~~	~~164 00~~							164 00		
	9te pay	34 10		a/c.							
				AR 596 10/9 2 Pte	2 68				180 42		
		34 10			2 68						
Nov	" 4	33		a/c.							
				AR 718 9/10 "	4 46						
				" 781 21/10 "	3 57						
				" 662 22/9 "	4 46						
					12 49						
Dec	" "	34 10		a/c							
				a/c 845 " /11 "	4 46						
1918		67 10			16 95				200 57		
Jany		34 10		A/c							
				✓ A 524 13/12/17 "	1 70						
				✓ a/c 888 23/11 "	12 49						
				✓ " 944 17/12 "	4 46						
				✓ " 999 24/12 "	3 57				197 45		
		34 10			22 22						
Feb	"	30 80		A/c							
				✓ a/c 1051 18/1 "	4 46						
				✓ " 1098 26/1 "	2 57				205 22		
		30 80			8 63						
Mar	"	34 10		A/c							
				✓ a/c 1165 22/2 "	8 03						
				✓ " 1222 15/3 "	4 46						
				✓ " 1276 22/3 "	3 57						
		34 10			16 06				208 24		

MARRIED OR SINGLE S.

PLACE OF BIRTH York. England.

NAME AND ADDRESS OF NEXT OF KIN Henry Anderson. Findlater. Sask.

RELATIONSHIP OF NEXT OF KIN

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY
Appt Lance Corporal 7-5-16	16/10/15.	Bo. 19. 7/5/16.
Promotn Corporal.	1-7-16	Bo 28. 14/7/16
Reverted to ranks at own request	23/2/17	Bo 21 13/3/17

ADMISSIONS TO HOSPITAL, &c.

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

REG'L NO. 73203 RANK ~~Cpl~~ Pte. ~~Lance Corpl.~~ NAME Anderson Thomas.

IF IN PERMT. CORPS } WHAT UNIT } UNIT 28th Battalion TRANSFERRED TO DATE AUTHORITY

PERMANENT FORCE ALLOWANCES TRANSFERRED TO DATE AUTHORITY

PLACE OF ATTESTATION Moose Jaw Sask. TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION October 24th 1914 TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY $ 15.00 DATE EFFECTIVE

PAYABLE TO Jno. A. Anderson. ~~Findlater~~ Sask. ~~Canada~~ RELATIONSHIP
c/o Mrs. Mackin Pilot Butte Sask. Canada.

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) EFFECTIVE REASON

DISCHARGE DATE AND PLACE REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

69 S.

DATE	PAY NO. OF DAYS	PAY RATE	PAY AMOUNT $	PAY AMOUNT c.	FIELD ALLOWANCE NO. OF DAYS	FIELD ALLOWANCE RATE	FIELD ALLOWANCE AMOUNT $	FIELD ALLOWANCE AMOUNT c.	WORKING OR SPECIAL PAY NO. OF DAYS	WORKING OR SPECIAL PAY RATE	WORKING OR SPECIAL PAY AMOUNT $	WORKING OR SPECIAL PAY AMOUNT c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 NO	1 DATE	2 NO	2 DATE	3 NO	3 DATE	4 NO	4 DATE	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE CREDIT	BALANCE DEBIT	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
Mar			305				30	50						67	336 17												12406	1500		37406	62 11			
Apl	30	1	30		30	10	3								33													15		15	80 11			
May	31	1.05	32	55	31	10	3	10						990	45 55	1054	11/5					e.P.O. 3954	4/5/16	256		681		15		2437	101 29				Diff. in rates. 198 days @ 5¢ = $9.92
June	30		31	50	30		3								34 50	1146 1105	1146					9 S.D. 6588	20/7/16		256	174		15		1930	116 49				
July	31	1.10	34	10	31	10	3	10							34 20	1156 1148	7/8/16 29/7/16							256				15		2182	131 84				
Aug.	31	1.10	34	10	31	10	3	10							34 20	1242	29/7/16							485				15		2285	146 22				
Sept	30	1.10	33		30	10	3								36 -	1339 1393	2/8	1391	14/9					523	523			15		3069	151 53				
Oct	31	1.10	34	10	31	10	3	10							37 20			1491	30						1046			15		2544	163 27				
Nov	30	1.10	33	-	30	10	3	-							36 -			1605	31/10						573			15		2023	179 04				
Dec	31		34	10	31		3	10							37 20	1657 1657	30/11	1708	5/12					524 523	1295			15		3942	176 82		143.50		
			58	00			58	00																											
1917 Jan	31	1.20	37	20											37 20	1767 1944	30/12 4/1/17							523 523				15		2023	193 79				
Feby	28		33	60											33 60	1840								523				15		2546	201 93				
			730	25										1057	7408 2									5385	3743	855	12406	31500		53889	201 93				
			730	75										1057	7408 2									5385	3743	855	12406	315		53889					

P 820
12474—375M—13-2-18.

d.

* Strike out whichever inapplicable.

ASSIGNED PAY.	* ~~ENGLAND~~ OR CANADA.	SEPARATION ALLOWANCE.	* ENGLAND OR CANADA.
EFFECTIVE DATE:–		EFFECTIVE DATE:–	
AMOUNT:– 15 °°		AMOUNT:–	

NAME:– ANDERSON Thomas

NUMBER:– 73203

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Private

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.

~~Mrs A Anderson~~ (deceased)
c/o ~~Mrs Mackin~~ changed ff. 1/9/17
~~Pilot Butte~~
~~Sask.~~
Mr W Anderson (brother)
Fairlight, Sask.
Stopped eff. 1/5/19

UNIT AND TRANSFERS

ORIGINAL UNIT:– 28th Bn

DATE ACCOUNT FIRST OPENED:–

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			28th Bn
			19/1/19 Canada dental

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
3.4.19	286	7th 20 yr. 3.45	~~3 73~~			L.R.C. C Bal.	$ 135 49
16.4.	557	'R' C C C £20-0-0	~~97 33~~				
			101 06				

DAILY RATES OF PAY AND ALLOWANCES

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

PARTICULARS OF RENDERING NON-EFFECTIVE:– Trans. to Can. 30/4/19 auth NKF/1188 24/4/19 Wrt. to Bkhott HD12.

MONTH 1918	PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Mar 31	Bal forward								208 26		
Apl	P.P.	33		Can A/P				15 –			
				aR. 12 11/4/18 28th Bn	4 46						
				" 70 21/4 "	3 57						
		33			8 03			15	218 23		
May	P.P.	34 10		" 126 4/5 "	4 46						
				Can A/P				15			
				aR 189 23/5 "	3 57				232 87		
		34 10			8 03			15	229 30		
June	P.P.	33 ..		a.p				15			
				aR 251 11/6 "	3 57						
		33 ..			3 57			15	243 73		
July	P.P.	34 10		a.p.				15			
				aR 312 7/7 "	4 46						
				" 378 9/7 "	3 57						
				" 391 24/7 "	4 46				250 34		
		34 10			12 49			15			
Aug	P.P.	34 10		a.p.				15	269 44		
				aR 426 29/8 "	9 33				172 11		
				" 466 26/8 "	7 14				164 97		
		34 10			16 47			15			
Sept	✓	33 ..		a.p.				15			
				aR 808 30/8 31 Bn	8 92						
				" 1186 26/9 28 Bn	7 14				166 91		Accepted
		33 ..			16 06			15			
									OVR		

OVR

NUMBER 73203. RANK NAME ANDERSON Thomas

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
30/9/18	Balance forward								16691		
Oct	P. Pro ✓	34 10		C a S.				15			
		✓		AR 1572 - 66 d B. 17/10/18	373				18728		
				✓ 2394 ✓ 09/10	373				17855		
		34 10			746			15			
Nov	✓	33		✓ 2873 15/11 ✓	373						
				C. a S.				15			
				AR 3407 28/11 ✓	1306						
Dec	✓	34 10		C a S.				15			
				✓ 3660 17/12 ✓	649						
Jan	✓	34 10		C a S.				15	21247	D	
		101 30			2348			45			
				AR. D2535 24/1/18 1st. T. RE.	560						
				✓ 4926 28/1/19	373						
Feb Mar	✓	64 90		✓ 5287 15/2 66 d B 933	373						
				✓ 481 4/1 1st Troops	373		E.				
				C a S. 1679				30	22958		
				✓ 5706 25/2 6 Brigs.	373				22585		
				✓ 6551 15/3. 28 Bn	365						
				✓ 6951 21/3 ✓ ✓ 419	365				21855		
		64 90			2782			30			
Apl	✓	33		Cap.				15	23653		
				✓ 286. 3/4 ✓	365						
				✓ 557. 17/4 ✓	9733						
				✓ 908 3/5 ✓ Ends	2433				111 24		
		33			12531			15			

S. O. S. Lean. 19.5.19 S. L. 58.

File. A. 387. S. S. Cedric 27-5-19

AUDITOR | PAYMASTER

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

M. OR S. | REGT. No. 73203 | RANK Pte | NAME (IN FULL) Anderson. J. (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN | RELATIONSHIP

ADDRESS Findlater, Sask.

IS SEPARATION ALLOWANCE PAID? | DATE EFFECTIVE

TO WHOM PAID | RELATIONSHIP

ADDRESS Fil.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F. 28th Bn. | IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

DATE OF ATTESTATION 24-10-14 | TRANSFERRED TO No. 12 DISTRICT DEPOT | DATE | AUTHORITY

ASSIGNED PAY $ 15.00 | DATE EFFECTIVE 1-6-19

PAYABLE TO Mrs W. Anderson (Brother) | RELATIONSHIP | ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS Findlaters Sask

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE

DISCHARGED PLACE Regina. DATE 2-6-19 REASON Demob. AUTHORITY D.O 153 IF ENTITLED TO POST DISCHARGE PAY Yes

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.	OTHER CREDITS $	OTHER CREDITS C.	Cr Bal P.A. $	Cr Bal P.A. 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.	Dr Bal P.A. $	Dr Bal P.A. C.	TOTAL DEBITS $	TOTAL DEBITS C.	BALANCE DEBIT $	BALANCE DEBIT C.	BALANCE CREDIT $	BALANCE CREDIT C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT																																					61.25 = 66 allow.
30-4-19					135	49	12	11	135	49																											
																																					Dr 6 = 6P3-E 8-6-19
											Pers & P.L.	24	33																								
											Bonus						4	87																			
											Train						5	00							Mary											
1-5 to 6	39	1.0	42	90	25	00	125	49	277	90	Cheque						234	19							15	00		6	60			289	99	76	60			
			42	90	17	049			213	39							268	39							15	00		6	60			289	99	76	60			
					W.S.G.						WAR SERVICE GRATUITY M.D. 12																		W.S.G.										
																													76	60			76	60	343	40		
	183				420	-			420																				70	=			146	60	273	40		
											I certify that the payment of this account have been completed.																		70	=			216	60	203	40		
											Paymaster War Service Gratuity Military District No. 12																		70	=			286	60	133	40		
																													70	=			356	60	63	40		
																													63	40			420	=	-	0		
			420.				420.																						420.				420.					

CAPTAIN
FOR ASST. DIRECTOR OF PAY SERVICES
MILITARY DISTRICT No. 12

22 12 0.

622070	JUL 2 1919
631343	AUG 2 1919
640931	SEP 2 1919
650049	OCT 2 1919
1653690	NOV 2 1919

GENERAL AUDITOR'S DEPT. AUSTIN 3 NOV 10 1919 DISTRICT No. 12

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