C.E.F. REGIMENTAL DOCUMENTS

NAME ANDERSON WILLIAM REGT. No. LIEUT UNIT R.C.H.A. H. Q. FILE No. 9610

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE
	ATTESTATION PAPER (M.F.W. 23, 133 or 51)				
	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)				
	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)				
	DENTAL HISTORY SHEET (M.F.B. 465)				
	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)				
	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)				
	CARDS				
	PAY-SHEETS				

H

NON-EFFECTIVE BY H

DEATH

CATEGORY

DISCHARGE

CATEGORY

MED
UNFIT ON
DEOMB

DESERTION

M.F.W. 2589
20M-4-46 (9113)
H.Q. 1772-39-1377

Lieut - 25th Bty
2nd Brig

ATTESTATION PAPER.

No.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

DEPT MILITIA & DEFENCE
AUG -7 1917
H.Q. CANAD.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

	(ANSWERS)
1. What is your name?	William Anderson
2. In what Town, Township or Parish, and in what Country were you born?	Edinburgh Scotland
3. What is the name of your next-of-kin? (Wife)	Janet Baydon Anderson
4. What is the address of your next-of-kin?	158 Carling Avenue Ottawa
5. What is the date of your birth?	20th April 1876
6. What is your Trade or Calling?	Civil Servant
7. Are you married?	Yes
8. Are you willing to be vaccinated or re-vaccinated?	Yes
9. Do you now belong to the Active Militia?	Yes 2nd ~~Field~~ Battery C.F.A.
10. Have you ever served in any Military Force? If so, state particulars of former Service.	1st Edinburgh City Volunteers Artillery 9 years, Scottish Germany 18 months, 2nd Battery 3 yrs. R.A.O. 1915.
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

William Anderson Lt. (Signature of Man).

Wm Henry (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, William 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.

William Anderson Lt. (Signature of Recruit)

Date March 1st 1915. Wm Henry (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, William 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.

William Anderson Lt. (Signature of Recruit)

Date March 1st 1915. Wm Henry (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 Valcartier this 23rd day of July 1915.

H Macdougall (Signature of Justice)

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

Leon F Jaeger Lieut. (Approving Officer)

M. F. W. 23.
150 M.—12-14.
H.Q. 1772-39-841.

Description of William Anderson on Enlistment.

Apparent Age 38 years 11 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height	5 ft. 4 ins.
Chest measurement. Girth when fully expanded	36½ ins.
Chest measurement. Range of expansion	3 ins.
Complexion	fair
Eyes	Brown
Hair	light
Religious denominations. Church of England	
Presbyterian	X
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).

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 April 1st 1915 A. K. Farrell

Place Ottawa Capt A.M.S.
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.

.....having been finally approved and inspected by me this day, and his Name, Age, Date of Attestation, and every prescribed particular having been recorded, I certify that I am satisfied with the correctness of this Attestation.

J. McPortland Capt. (Signature of Officer)

Date 24/7/15 191 . a/ O.C. 25 Battery

L. L. JOB. 85506 M. & D. 5997.

M. F. W. 12.
20m.—9-15.
H. Q. 1772-39 819.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

To Whom Mrs. William Anderson

Address 138 Carling Ave, Ottawa, Ont.

Rate $30.00 Nov 1/15.

By Whom Assigned Anderson Wm.

Regtl. No.

Rank Lieut

Corps 25 Battery 7 Bde

2 M 2 11/15 - C.A.D.V.

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			Stop payments 1/12/16 3 M 158/17 + Ltr 1.12.16/17 "Retained in Canada"
Sept.				
Oct.				
Nov.				Consolidated
Dec.				
Jan.	1915			Accounts
Feb.				
March				
April				
May				
June				
July				
Aug.				Acc closed.
Sept.				
Oct.				
Nov.				
Dec.		Z 7709	60 —	
Jan.	1916	D 12433	30 —	
Feb.		P 14220	30 —	
March		V 16060	30 —	150

COPIED FOR 2 CASUALTIES.

CANADIAN EXPEDITIONARY FORCE

W.W.3-41.
L.B.

Certificate of Service

ISSUED TO OFFICERS AND NURSING SISTERS

Lieutenant.

This is to Certify that (Rank) .....

William ANDERSON.

(Name in full) .....

The Canadian Field Artillery.

Enlisted in .....

CANADIAN EXPEDITIONARY FORCE, on the .....

day of ..... 191 ..... AND WAS APPOINTED to COMMISSIONED RANK

The Canadian Field Artillery.

in .....

First

CANADIAN EXPEDITIONARY FORCE on the ..... day

March 5.

of ..... 191 .....

England and France, with the 7th Brigade,
Canadian Field Artillery., General List., Canadian Artillery
He SERVED in CANADA, ...
Regimental Depot., District Depot #7, and "C" Battery, R.C.H.A.

.....

Thirty-First

and was STRUCK OFF THE STRENGTH on the ..... day

May 19 being Medically Unfit.

of ..... 191 ..... by reason of .....

Second

Dated at Ottawa, this ..... day

July

of ~~Wounded,-16-6-16.~~ ..... 191 .....

Capt.

for. Director of Personal Services.

M. F. W. 2618a
30m.—4-19.
1772-39-1428.

Rank and Name Lieut. ANDERSON, William.

Regimental No.

Unit 25th Battery

Date of enlistment Valcartier P.Q. Ist March. 1915.

Place of birth Edinburgh, Scot.

Married (Yes or No) Married

If in Permanent Force

Promotions or appointments LEFT CANADA 10-8-15.

Name and Address of Next-of-kin Wife. Janet B. Anderson, 158 Carling Ave. Ottawa.

A.F.B. 158.

7=1 DEC 1915

Date and place of discharge

Reason for discharge

Character on discharge

7 Bde. a/c 15 Bde. 7-1-1-16 7-1-2-16 7-1-3-16 7-1-4-16 7-1-5-16

Report Date	Report From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case	Place	Date	REMARKS Taken from Official Documents
7.10.15	G.O.C. C.T.D.	Attached E. mn. S.B. whilst attending course	Shorncliffe	5.10.15 to 12.10.15	R.O. 2850
		On Strength 25th Batty.		17.9.15	NR
22.10.15	G.O.C. C.T.D.	Qualified in Signalling	do	10.6.15	R.L. 68-7
16-12-15	G.O.C. 7 Bde C.F.A.	On Command. With the 5 Bde C.F.A.	do	15-12-15	Pt II Ord 247
19-6-16	W.O.	Admtd to No 14 Genl Hospital	Boulogne	W 16 June 16	17-6-16 G.L. 394 GSW Leg fracture
22-6-16	D.D.M.S.	adm 1st Lon Genl Hosp	Camberwell	Gen List 19-6-16	19-6-16 S.O. 3343. C.T.D.
30-6-16.	7th Bde C.F.A.	Transfd to H.2.C.S.D. Wounded	Discharged	14.9.16 20-6-16.	19-6-16 G.L. 397 fract L. tibia C.L.S.3 Pt II Ord 39.
11.9.16	G.O.C. C.D.	Leave to Can, without exp. to Sub. for rec. in B.	7.9.16	7.1.17	D.O. 4788. R.L. 30-6. 158 Carling Ave Ottawa.
15.1.17	A.G.	Leave extended to		1.2.17	R.O. 140.
9.3.17	A.G.	— do —		1.4.17	R.O. 422
1-5-17	G.O.	" " (recon. of M.B.)		15.4.17	7/638
21.5.17	G.O. C.E.	Trans. to Can. Art. Reg. base		21/5/17	Address
22.6.17	~~A.G.~~	S.O.S. on 7 days on being Retd. in Canada for more than 4 months.		20.6.17	R.O. 1771.

4028

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

Unit 18th O'Seas Draft, *Rank* Lieut. *Name* Anderson, William
"C" Battery, RCHA

OFFICERS' DECLARATION PAPER

CANADIAN OVER-SEAS EXPEDITIONARY FORCE

QUESTIONS TO BE ANSWERED BY OFFICER

(ANSWERS)

1. (*a*) What is your Surname? ..... Anderson

(*b*) What are your Christian Names? ..... William

2. (*a*) Where were you born? (State place and country) ..... Edinburgh, Scotland.

(*b*) What is your present address? ..... 158 Carling Ave., Ottawa, Ont.

3. What is the date of your birth? ..... April 20th., 1876

4. What is (*a*) the name of your next-of-kin? ..... Janet Brydon Anderson,

(*b*) the address of your next-of-kin? ..... 158 Carling Ave., Ottawa, Ont.

(*c*) the relationship of your next-of-kin? ..... Wife

5. What is your profession or occupation? ..... Civil Servant

6. What is your religion? ..... Presbyterian

7. Are you willing to be vaccinated or re-vaccinated and inoculated? ..... Yes

8. To what Unit of the Active Militia do you belong? ..... 2nd Battery, CFA.

9. State particulars of any former Military Service ..... 13½ yrs Scottish Vol. Artillery
18 months. " Yeomanry, South Africa
Qualified Lieutenant, RSA
Course, Jan-Feb, 1915.
4 yrs. 2nd Battery, CFA.
15 months, 25th Battery, CEF.
20 months, Casualties, CEF.

10. Are you willing to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE? ..... YES

The undersigned hereby declares that the above answers made by him to the above questions are true.

William Anderson Lieut. CFA.
.....(*Signature of Officer.*)

CERTIFICATE OF MEDICAL EXAMINATION

I have examined the above-named Officer in accordance with the Regulations for Army Medical Services.

Category B ii

I consider him* ..... fit. ..... for ~~the CANADIAN OVER-SEAS EXPEDITIONARY FORCE.~~

Date ..... February 5th., ... 191 8.

Place ..... Kingston, Ontario.

S E. Thompson
.....
Medical Officer.
Capt

*Insert here "fit" or "unfit"

M. F. W. 51
40m.—12-15.
H. Q. 1772-39-917.

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS DISTRICT St. Lucia. B.W.I.

NAME OF SOLDIER Anderson. H. No.

REGIMENT RANK Lieutenant.

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
Condition on first Examination	1915							Exam..														
	Mar 10	3																		J.J. Tuttle Lt. Surg. B.W.I.		O.K.

DENTAL HISTORY

MEDICAL HISTORY SHEET.

Surname Anderson *Christian Name* William

Examined { on 1st day of April 1915
at Alland

Birthplace { City or Town Edinburgh
County Scotland

Apparent age 39

Trade or occupation Civil Service

Height 5 Feet 4 Inches.

Weight 140, Lbs.

Chest measurement { Minimum 33½ inches.
Maximum expansion 36½ inches.

Physical development Good

Small-Pox Marks no

Vaccination Marks { Arm Right. Left. X
Number 2

When Vaccinated last 1900.

(*a*) Marks indicating congenital peculiarities or previous disease no

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

Approved by
A B Farrell
Rank Captain M.O

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

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

Date	Result	Anti-Typhoid Inoculations, Etc.	
30/7/15	O.K.	A L Davey Major	M.O.
10/8/15	O.K.	A B Farrell	M.O.
			M.O.

Enlisted on 1st *day of* March *1915 at* Ottawa

	Corps.	Regt'l Number.	Ranks.	Date.
Joined on enlistment	25th Battn	Lieut		March 1—1915
Transferred to..				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.

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

M. F. B. 313.

100M.—5-15.
H. Q. 1772-39-439

Surname..... Christian Name.....

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				

To be made out in duplicate. H.Q. 54-21-23-53

PARTICULARS OF FAMILY OF AN OFFICER OR MAN ENLISTED IN C. E. F.

INSTRUCTIONS.

(a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.

(b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.

(c) All questions, etc., must be answered.

(d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.

(e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

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(1) Name of Overseas Unit which Soldier joins "C" BATTERY, R.C.H.A.

(2) Regimental Number

(3) Full Name of Soldier Anderson, William

(4) Place of Birth Edinburgh, Scotland.

(5) Are you married, or not ? Yes

(6) If married, state,
(a) Full name of your wife Janet Brydon Anderson

(b) Present Postal Address 158 Carling Ave., Ottawa, Ont.

(7) Are you a widower ? No

(8) Have you any children ? Yes

If so, give number of boys and girls 5 boys & 1 girl.

Also their names and ages Alexander, 15 yrs. 3 months. William, [illegible] 14 yrs. 2 months. John Nelson, 13 yrs. Lorna Annie, 8 yrs Harold, 6 yrs. Edward, 2 yrs.

M. F. W. 67.

500M.—9-16.
1772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive ?.....No.....

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

(10) Is your Mother alive ?.....Yes.....

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

.....Edinburgh, Scotland.....

(11) If your Mother is a widow.....Yes.....

Are you her sole support, or not ?.....No.....

(12) If sole support of widowed mother, state what amount you have given her per month prior to your enlistment, also reason she has no other support than yourself.

.....

.....

(13) If you have no wife, father, mother or children, state the name and relationship with full postal address of your next of kin, to whom you would desire any communication to be sent concerning you.

.....

.....

.....

(14) If you have a wife, or children, or a widowed mother who depends on you as her sole support, have you applied to the Paymaster of your unit for Separation Allowance ? If not, this must be done.

.....Civil Servant, as such not necessary.....

15) Are you insured ?.....Yes.....

If so, in what Company ?.....Civil Service.....

Have you made arrangements for payment of your Insurance premium.....~~No~~ Yes.....

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

R. L. Garth

.....Capt. R.C.H.A.
Commanding [illegible]
Officer Commanding.

Date.....February 5th., 1918.

MAR 3 1917

CONFIDENTIAL.

FOR OFFICERS ONLY.

The signature of each Officer composing the Board, &c., should be attached at the end of the Proceedings.

R.C. MAR 3 1917

PROCEEDINGS OF A MEDICAL BOARD assembled

at Ottawa

on the 22nd Feb 1917 by order of

A.D.M.S., 3rd Division

for the purpose of examining and reporting upon the present state of health of

Lieut W. Anderson C.F.A.C.E.F.

PRESIDENT Lt-Col J.F. Argue R.M.S.

MEMBERS { Major T.H. Leggett A.M.C.
Lieut. J.H. Laidlaw A.M.C.

The Board having assembled pursuant to order, proceed to examine the above-named officer and find that inch and a half scar over left tibia just above ankle due to osteomyelitis from gunshot wound is entirely healed. Three small ulcers in skin about wound show that skin is not entirely healthy but these should be healed in ten days. Slight stiffness of ankle joint which will no doubt be entirely overcome.

The opinion of the Board upon the questions herein is as follows :—

(1) Is the officer fit for service ?* No

(2) If not so fit, how long is the disability likely to continue ? April 1st 1917

(3) To what extent does it prevent his earning a livelihood ? totally

SIGNATURES { J Haverland Lynn Thos Rees
T. H. Leggett Major A.M.C.
J.H. Laidlaw Lieut A.M.C.

* If an officer of the Active Militia sick or injured at Annual Training, etc., state if he is able to return to his civil duties.

M. F. B. 380.
4m.-7-15.
H.Q. 1772-39-274.

Assistant Adjutant General, Mil.District No.3.

Forwarded.

I concur in this report.

DEPT
MILITIA & DEFENCE
MAR -3 1917
H.Q. 249-4-8
CANADA

Lt-Col.A.M.C.,
A.D.M.S., M.D. No.3.

Secretary, Militia Council,

Forwarded.

Brig-General,
G.O.C., Mil. District No.3.

Approved 5/3/17

for Col.,
Director General Medical Services.

Q-233/28/19116.
S235-3-10-16

S209

SEP 28 1916

INSTRUCTIONS to be observed by the Medical Board preparing the Report.

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1. On the occasion of an officer's first appearance before a medical board, the circumstances under which the wound or injury was sustained will be fully detailed.

2. If the injuries be more than one, they should be numbered and described separately; and should it be considered that, though slight in themselves, they represent together the equivalent of a single "very severe" injury, such an opinion may be expressed in the columns provided for that purpose.

3. The board will not express any opinion, either to the Officer examined, or in their report, as to the amount of compensation they may think should be awarded.

(4 8) W 10527—4037 100,000 10/15 H·W V(P 175) ms 5A 11

Army Form A. 45A.

Confidential.

To be used in cases of wounds or injuries received in action.
(For instructions for preparing this report see back of form.)

PROCEEDINGS OF A MEDICAL BOARD assembled by order of D.M.S. Canadians.

DEPT MILITIA & DEFENCE SEP 27 1916 CANADA

for the purpose of examining and reporting on the present state of a wound or injury sustained by Lieut. Wm. ANDERSON. C.F.A.

at (Place of injury) Ypres Salient. on the (Date of injury) 15th. June 1916.

The Board find that this Officer was wounded by H.E. Shell causing a compound fracture of lower third of left leg. Fragment lodged and was extracted at No.10 C.C.S. Sent to No.14 General Boulogne for 3 days. Admitted to 1st. London General on 19th. June 191 There is firm union without much displacement. Small sinus on anterior surface of leg leading to cavity in bone which is filling in.

The opinion of the Board upon the questions below is as follows:—

	Replies		
	As to first wound	As to second wound (if any)	As to third wound (if any)
1.—Has the officer lost an eye or a limb; or has he permanently lost the use of an eye or a limb; or is the injury equivalent to the loss of a limb, and permanent, or likely to be permanent? (Articles 585 to 588 of the Royal Warrant for Pay, &c.)	No.		
2.—If the case does not come under the category of 1:— (*a*) Was the injury, in the first instance, very severe in character?	Yes.		
(*b*) Are its effects still very severe?	Yes.		
3.—If the case is classified under category 2, are the effects of the injury permanent, or likely to be permanent? (Article 590.)	Probably not permanent.		
4.—Injuries that do not come under the above categories should be classified here, making use of the following terms:—*severe* or *slight* and *permanent* or *not permanent*, as the case may be.	-------		
5.—For what period, calculated from the date of the wound or injury, is it probable that the officer will be incapacitated for military duty by such wound or injury?	7 months.		

I concur in the findings of the Board of Medical Officers here recorded. W Macdermott Major, C.A.M.C.

7 SEP 1916

Signatures (Sgd) C.E. COOPER COLE Maj. C.A.M.C.
" C.M. DAVIS, Capt. C.A.M.C.

Station 86, Strand London.

Date 7-9-16.

S-209-18-4-17

(1) 81

(1) 80 ~ S-28-18/4/17-2.

Assistant Adjutant-General, M.D°,No.3,

Forwarded -

I concur in this report -

Capt.,A.M.C.,D/A.D.M.S.,
For A.D.M.S., M.D.,No.3.

Secretary, Militia Council,

Forwarded-

Brig-General,
G.O.C., Military District No.3.

CONFIDENTIAL.

The signature of each Officer composing the Board, &c., should be attached at the end of the Proceedings.

FOR OFFICERS ONLY.

PROCEEDINGS OF A MEDICAL BOARD assembled

at Ottawa, Ont.

on the 15th March 1917. by order of

A.D.M.S., M.D., No. 3.

for the purpose of examining and reporting upon the present state of health of

Lieut. William Anderson

8th Brigade C.F.A. C.E.F.

PRESIDENT Lt-Col J.F. Argue R.M.S.

MEMBERS { Capt. A.F. McLaren A.M.C.
Lieut J.H. Laidlaw A.M.C.

The Board having assembled pursuant to order, proceed to examine the above-named officer and find that wound over lower end of left tibia is healed with small scab still adherent. Ankle moves fairly well, but would recover more fully and quickly with massage. This officer should be fit for light duty by April 15th 1917.

The opinion of the Board upon the questions herein is as follows :—

(1) Is the officer fit for service ? * No.

(2) If not so fit, how long is the disability likely to continue ? April 15th 1917

(3) To what extent does it prevent his earning a livelihood ? totally.

APPROVED
APR 20 1917
A/D.G.M.S.

SIGNATURES { J. Renton Lyne Lt-Col R.M.S.
A.F. McLaren Capt
J.H. Laidlaw Lieut

* If an officer of the Active Militia sick or injured at Annual Training, etc., state if he is able to return to his civil duties.

M. F. B. 380.

4m.-7-15.
H.Q. 1772-39-274.

78

CONFIDENTIAL.

Army Form A. 45.

PROCEEDINGS OF A MEDICAL BOARD

assembled at 86, Strand, London. on 7th. Sept. 1916

by order of D.M.S. Canadians.

for the purpose of examining and reporting upon the present state of health of

(Rank and Name) Lieut. Wm. ANDERSON. (Corps) C.F.A.

Age 40 Service 1-4/12 Disability G.S.W. Left leg & fracture.

Date of commencement of leave granted for present disability 7th. Sept. 1916.

Date on which placed on half-pay for present disability

DEPT MILITIA & DEFENCE SEP 27 1916 349-4-8 CANADA

The Board having assembled pursuant to order, and having read the instructions on the back of the form, proceed to examine the above-named officer and find that

this Officer suffers from the disability noted above and described in A.F. A45a There is a small sinus but he is quite fit to travel provided he can have medical attention. There is firm union of the fracture and the leg is put up in a Plaster of Paris splint.

Address. C/o 1st. London General

The opinion of the Board upon the questions herein is as follows:—

(1.) *a.* Is the officer fit for "General Service"? No.

b. If not so fit, how long is he likely to be unfit? 4 mos.

(2.) *a. If unfit for General Service, is he fit for service at home?* No.

b. If not so fit, how long is he likely to be unfit for service at home? 4 mos.

c. If unfit for General Service at home, is he fit for light duty at home? No.

d. If not so fit, how long is he likely to be unfit for light duty at home? 4 mos.

(3.) Was the disability contracted in the service? Yes.

(4.) Was it contracted under circumstances over which he had no control? Yes.

(5.) Was it caused by military service? Yes.

(6.) If caused by military service, to what specific conditions is it attributed? H.E. Shell Wound.

(7.) If the disability was not caused by military service, was it aggravated by it? Not applicable.

Signatures (Sgd) C.E. COOPER COLE Maj. C.A.M.C. President.

G.M. DAVIS, Capt. C.A.M.C. Members.

I concur in the findings of the Board.
W. MacDermot
For D.M.S. Canadian Contingent.
7 SEP 1916 Captain, C.A.M.C.

(5725.) W16789/M2 0. 200M. 2/16. C. P., Ltd. Forms A.45 25

[P.T.O.

Instructions.

1. On the occasion of an Officer's first appearance before a Medical Board for his present disability, the circumstances under which the disability was contracted will be fully detailed; whenever possible a statement of the case by his medical attendant will also be attached.

2. In recording the proceedings of subsequent Boards, the progress of the individual since his last appearance will be clearly and concisely stated so as to ensure a continuous medical history of the case being available.

3. Enteric Fever, Dysentery, Malaria, etc., contracted when on service abroad, in countries where there is a special liability to the disease, are to be regarded as caused by military service.

W.W. 3-41.

THIS IS TO CERTIFY that (Rank) Lieut.

(Name in full) William ANDERSON.

Enlisted in the 6. F. A.

CANADIAN EXPEDITIONARY FORCE, on the

day of 19 AND WAS APPOINTED TO COMMISSIONED RANK

in the 6. F. A.

CANADIAN EXPEDITIONARY FORCE on the 1st day

of March 1915

He SERVED in CANADA England & France with the

7th Bde C.F.A. Gen List., C. A. R. Depot.,

D.D.#7. & Batty R.C.H.A.,

and was STRUCK OFF THE STRENGTH on the 31st day

of May 1919 by reason of Medically Unfit.

Dated at Ottawa, this day

of 19

Wounded 16-6-16.

Forms
F. 1237
10

1st LONDON GENERAL HOSPITAL,
ST. GABRIEL'S COLLEGE, CORMONT ROAD,
CAMBERWELL, S.E.5.

Army Form F. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.
T. 116
Year
1916.

Regimental No.	Rank.	Surname.	Christian Name.
/	Lieut.	Anderson	Wm

Unit.	Age.	Service.
Can. Fld Artly.	40	1 4/12

Station and Date.
19 JUN 1916

Disease G. Shell W^d L^t leg.
W^d 15-16 June/16 France Hull
Compd comminuted Fracture lower
⅓ of tibia W^d communicating with
interior of bone.

Oper. 15-16 June/16 France F. B. removed
C.O.A. Leg on back splint with side
splints. W^d clean & ~~—~~

Aug. 1/16 Good union Sinus leads to bare bone
Aug 16-
Sep 1-6- Oper. Several small sequestra removed
Much improved Still a small area of bare
bone to be felt at bottom of sinus but
it has much diminished during last
few days. Leg & foot placed
in plaster of paris with window
for wound. Gen. cond. good

14 9 16 Discharged A

H. R. Hay Lt RAMC

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

(J 3521.) Wt. W 5606—2621. 2,000,000. 7/15. D & S.

P.T.O.

Station and Date.	

CLINICAL CHART.

(*To be attached to Case Sheet.*)

Army Form B. 181.

Corps Gen. F.A. Military Hospital

No. Rank and Name Lieut Anderson W. Age Service

Disease Date of admission Date of discharge Result

Dates of Observation	Aug																Sept															
Days of Disease	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	1	2	3	4	5	6	7	8	9							
Temperature Fahrenheit	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.
107°																																
106°																																
105°																																
104°																																
103°																																
102°																																
101°																																
100°																																
99°																																
98°																																
97°																																
Pulse per Minute		84									100 64	80 88	76 100	68 92	68	68 64	80	72 160	80 96	76 84	72 92	88										
Respirations per Minute																																
Motions per 24 hours	0	0	2	1	1		0	1	1	1	1	1	1	1	1	1	1	1	1	1	1											

(1002.) W9043—1195. 499,500. 1/15. K. & K. Forms/B. 181/3.

Signature KRA In charge of case.

CLINICAL CHART.

(To be attached to Case Sheet).

Army Form B 181.

1st LONDON GENERAL HOSPITAL R.A.M.C. (T.F.)
13 JUN 1916

Corps Can. F.A. Military Hospital

No. Rank and Name Lieut Anderson W. Age 40 Service 1 1/2

Disease Date of admission Date of discharge Result

Dates of Observation	19	20	21	22	23	24	25	26	27	28	29	30	July 1	2.	3.	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19
Days of Disease																															
Temperature Fahrenheit — Time A.M.P.M.																															
107°																															
106°																															
105°																															
104°																															
103°																															
102°																															
101°																															
100°																															
99°																															
98°																															
97°																															
Pulse per Minute	116	96	95	92	88	86	116	92	102	100	102	88	96	96		110	88														
Respirations per Minute																															
Motions per 24 hours	0	0	3	0	0	1	0	0	2	0	1	0	0	1	2	1	1	0	0	1	0	2.	0	1	0	1	0	1	1	1	0	1	0	1	0

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 "C" Battery R.C.H.A. (18th Depot Bgde.

Regimental No. ..... Rank Lieut. Name Anderson, William

R.T.O. S. C.E.F.

~~Enlisted~~ (a) 31.1.18. Terms of Service (a) D'Jour. Service reckons from (a) 31.1.18.

Date of promotion to present rank R.O. 149. 19.8. 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				
25.3.18.	H.Q. Coy. R.C.H.A.	Having arrived from Halifax T.O.S. W/E	St Lucia B.W.I.	24.3.18	D.D. Pt = 71
3.5.19	"	Transf. to Canada	"	25.5.19.	" " 103
27.5.19	D.D.O.	T.O.S. 16.5.19. & posted to Can. Coy. W/E	St John N.B.	27.5.19	" " 147.
28.5.19.	"	Transf. to Dn. Dl. 3 Sat. Depot	"	28.5.19	" " 148.
29.7.19.	M.D.3.	S.O.S. "Demob" at Ottawa Med. unfit	~~Kingston~~ Pt.	31.5.19.	" " 210 R.O. 2071

Demobilized 1st Dec 19

Ln Bty 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.

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				

92431.—W6490/1535.—2,000,000—J. J. K. & Co., Ltd.—Forms B. 103/1.

Army Form B. 103.

Casualty Form—Active Service.

Regiment or Corps 7th Artillery Brigade, C.F.A., C.E.F.

Regimental No. _____ Rank Lieut. Name Anderson, Wm.

Enlisted (a) 1-3-15. Terms of Service (a) Duration of War. Service reckons from (a) 1-3-15.

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) _____

J. Burnham, Major, for Lt.Col. I/c Records, C.E.F. R.I.

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				
19/6	A.G.O.	Landed in France	Havre	18/6	Can Sec. G.H.Q No.C4463 22/6
17.6.16	D.C.S.	wounded	Field	16.6.16	No654 D.C.S 88 d/19.6.16
19.6.16	H.S. Newhaven	Shell. W. (Left) leg. Comp. Fract Tibia 2 trans to Hd/q C.I.D. Shorncliffe	~~Field~~ H.S. Newhaven	19.6.16	W3083 Part II Orders 39 d/30.6.16 D.C.S. 93 d/29.6.16
19.6.16	14 Gen.	G.S.W. R. Leg. F. Tibia 2 trans.	H.S. Newhaven	19.6.16	W3034
19.6.16	H.S. Newhaven	do	do	19.6.16	A36 93 d/29.6.16
					L.L. Bentley CAPT OFFICER I/c RECORDS CANADIAN SECTION G.H.Q. 3rd ECHELON
	G.O.C. C.T.B.	Posted Gen. List		19/6/16	D.O. 3343 J. Burnham, Major, for Col I/c Records C.E.F.

FOR COL. I/c RECORDS; C.E.F.

(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 offi ial 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				
	G.O.C.	Leave to Canada.		7.9.16	
11.9.16.	C.R.D.	w.o.e. on recommendation of M.B.		to 7.1.17.	D.O. 4788.
15-1-17	A.G.CAN.B.I.	Leave extended to 1-3-17.		7-1-17.	A.G.O. 140.
9-3-17	A.G.CAN.B.I.	Leave extended to 1-4-17.		1-3-17.	A.G.O. 422
1-5-17.	A.G.CAN.B.I.	Leave extended to 15-4-17		1-4-17.	G.L.O. 638
21.5.17.	A.G.	Trans. to Can. Art. Reg and posted 5 Reg. Depot	Shorncliffe	21.5.17	G.L.O 215

FOR DIRECTOR OF PERSONAL SERVICES, C.E.F.

21-5-17	O.C. C.A.R.D.	T.O.S. Tfs. form G.L.O.	Sh'cliffe.	21-5-17	Part II. 75 /	23-5-17
21-6-17	""	Leave to Canada Ext. to 15-5-17	"" "	15-5-17	" " 104/	21-6-17
20-6-17	""	S.O.S. of O.M.F. of C. in the British Isles.	" "	20-6-17	" " 108 /	25-6-17.

Lieut. & Adjt.
for O. C. Regimental Depot.

H.Q. | S.o.S. C.E.F. in Canada returned to Active Militia Unit to which he formerly belonged. | Ottawa | 31.8.17. | Asst. M.O. ~~184~~ 242

Army Form W. 3172.
(In pads of 50.)

_____ **Hospital.**

Ward _____ No. of Bed _____ Date _____

Regtl. No.	Rank and Name	Corps	Part to be X-Rayed
	Lt. W. Anderson	Can. F.A.	

SHORT HISTORY OF CASE.
(To be completed by M.O. i/c case)

Compd - Fracture
Tib. & Fibula.
? Position of Fracture
? 7-B.

Signature of M.O. _____

Date 20/6/16

REPORT ON RESULT OF X-RAY EXAMINATION.
(To be completed by Radiographer.)

No. of Plate 2445

Comminuted fracture of tibia. The upper fragment lies in front of the lower but the alignment is good. There is a small f.b. among the fragments

Signature of Radiographer _____

Date June 21/16

(9 38 40) W 8290—3262 100,000 8/15 H W V(M 163) Forms/W. 3172/1
15134—116 300,000 1/16

Army Form W. 3172.
(In pads of 50.)

_____ **Hospital.**

Ward D No. of Bed _____ Date _____

Regtl. No.	Rank and Name	Corps	Part to be X-Rayed
	Lt Anderson	C. F. A	

SHORT HISTORY OF CASE.
(To be completed by M.O. i/c case)

G. Sh 1- W- 2E Tibia.

? Sequestrum

Signature of M.O. KRH

Date 13/8/16

REPORT ON RESULT OF X-RAY EXAMINATION.
(To be completed by Radiographer.)

No. of Plate 3232

Comm. fracture L. tibia
& fibula large sequestrum

Signature of Radiographer _____

Date Aug 16

(9 38 40) W 8290—3262 100,000 8/15 H W V(M 163) Forms/W. 3172/1
15134—116 300,000 1/16

To C.C Train ∇ Base Hsp.

Case of Lieut W. ANDERSON, C7.a
25th Bty.

admitted 15.VI.16

Compound Fracture ~~Right~~ Left Tibia.

Operation — Anterior Surface of shaft removed & shell fragment & clothing removed from interior.

Packed lightly twice daily with Eusol gauze.

Clean granulating.

Cold

N.Z. Wellacott
Capt RAMC
10 CCS

17.VI.16

Surname: ANDERSON. Christian Name: W. Reg. No. 10-A-288.

Rank: Lieut. Unit: C.F.A.

MEDICAL BOARD held at | Date | Serial No.

(1) D.M.S.Office. 7-9-16.

Other Medical Boards at | Date | Serial No.

(2)

(3)

(4)

(5)

Condition found by Board

G.S.W. left leg & fracture.

Disposition Recommended

(1) Unfit for any service - 4 mths.

(2)

(3)

(4)

(5)

PENSIONS & CLAIMS BOARD held at | Date .....

Disposition: Leave to Canada. 7-9-16. to 7-1-17.

To Canada. 15-9-16.

Remarks: Leave Extended to :-15-4-17

Indicate by a P.T.O. if continued on other side.

H. W. & V., Ld.--3594-15.

HJ

Anderson. W.

Lieut. 7th. Bgde. CFA.

No. 14. Gen. Boulogne. 17-6-16.
H.S. to.
1st. London Gen. Camberwell. 19-6-16.

G.S.W. leg. frac.

Fract. lt. tibia.

Discharged:-. 14-9-16.

C.L. 19-6-16. 394-2.
22-6-16. 397-2.
24-10-16. 503-3.

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

MEDICAL TRANSFER CERTIFICATE. Army Book 172.

(To accompany a Man Transferred from one Hospital to another.)

Extract from Admission and Discharge Book of 4 General Hospital at Dunkerque. Date 18. 6. 16

No. of Case.	Regiment or Corps.	Troop or Company.	Regt. No.	RANK AND NAME. Surname first. If Married, write "M" under name.	Completed Years of: Age last birthday.	Service.	Service in the command.	DATES: Admitted into Hospital.	Transferred.	Religion.	DISEASE. (a) Primary. (b) Secondary. (c) Operations.	Destination on Transfer, and to what Hospital or Ship Transferred.
	C.F.A. 25th Batt.			Lt Anderson W.	40	1 7/12	5/12	17/6/16	19/6/16		Shell wd. Left Leg. Comp. Fract. Tibia	England. H.S. Mc Shaws to Boyer.

State here briefly reasons for Transfer, and note any particulars of Case for information of Medical Officer.

Notes from C.C.S. Lunatic.

A Roberts Capt RAMC

Medical Officer in Charge.

MEDICAL CERTIFICATE BOOK.

London: Printed for H.M. Stationery Office by Henry Good & Son, Ltd

Extension of Leave to 1-4-17 (auth [redacted] dn O. # 73.) (23-3-17).
Extension of Leave to 15-4-17. auth [redacted] M.S. # 1174

MARRIED yes | SINGLE | WIDOWER

TRADE OR CALLING | RELIGION

DESCRIPTION.

APPARENT AGE	YEARS	MONTHS	
HEIGHT	FEET	INCHES	
CHEST MEASUREMENT	INCHES	EXPANSION	INCHES
COMPLEXION	EYES	HAIR	
DISTINGUISHING MARKS			

Struck off strength C.E.F. in Canada & returned to Active Militia Unit to which he formerly belonged 31-8-17

MEDICAL EXAMINATION. PLACE | DATE (auth No. 02472)

Sailed for Canada per S.S. Missanabie Sept. 15 1916
Leave granted 7-1-17 auth Cable T 270
Leave granted to 15-5-17 auth. # 136. Mil Orders 18-1-17.

11 - 349-4-8

SURNAME. Anderson — W/Dembleg (over)

CHRISTIAN NAMES William

REGL. No. RANK Lieut.

UNIT 25th Baty. 7th Bgde., C.F.A.

FORMER CORPS 2nd Baty. C.F.A.

CARD NO. 2826

31-5-547-19
210-3220
9.20th

R. TOS C.E.F.
31/1/18 RO 14-1918
Detailed to art Dist St Louis

NEXT OF KIN.

NAMES IN FULL Anderson, Janet Brydon

RELATIONSHIP TO SOLDIER

ADDRESS 158 Carling Ave., Ottawa, Ont.

Notify Dept of Interior

COUNTRY OF BIRTH Scotland. Edinburgh DATE

9-8-15 16 6

PLACE OF ATTESTATION Valcartier DATE July 23, 1915

Struck off strength of [redacted] C.E.F. in Canada

20-6-17 (with F.R.O.) 23-6-19

O L. L. 90589.—M. & D. 6312. M. E. W. 22. 100m.—1-16. H. Q. 1772-39-839.

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

R. 149.

Name William. Anderson, *Rank* Lieut. File *Reg. No.* 9-A111

Unit C.F.A. 7th Bdge 25th Batty.

Next of Kin Canada.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
	17-6-16	No.14 GENERAL HOSP.	BOULOGNE.			6
			GSW Leg, Fracture.	394M8381		19-6-1
19-6-16	ho 1. London.	Gen. Camberwell S.E.				
	Ex. H.S.		Fract. L. Tibia	397		
1H 9	Discharged		still in	50B	198	
					6/9	

REMARKS

14

REG. NO. [illegible] NAME (SURNAME FIRST) Anderson Wm

RANK Lieut CORPS

AGE SERVICE

NAME OF HOSPITAL Protestant General PLACE Ottawa

DATE OF ADMISSION 13- 12- 16 12- 7- 17

DISEASE 29 Osteomyelitis Tibia Same

DISCHARGE 29- 10 14 16- 7- 17

OPERATION

DISCHARGED TO DUTY Yes Yes

TRANSFERRED TO

DISCHARGED BY MEDICAL BOARD

100M—9-17—H.Q. 1211-8-30.

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
394 (21	#14 Gen. Boulogne (Pk. Wo)	17-6-16	G.S.W. Leg. Fracture
397 (2)	1st Lon. Gen. Camberwell S.C. (W.W. (M.S.L.D) Ep. H.S.	19-6-16	Fract. L. Tibia
503 3	Discharged	14-9-16	Fract. L. Tibia

REGT'L NO

NAME Anderson, William

H. Q. FILE No. 649-

RANK AND CORPS Lieut, 7th Bgd. C.F.A. (formr 25th Bty)

FOLLOWS No.

FOLLOWS

CABLE No.	CABLE DATE	NATURE OF CASUALTY
M.8381	18-6-16.	C. Admd. to No. 14 Gen. Hosp. Boulogne. June. 17th 1916, (G.S.W. leg. fracture.)

L. L. Job 90581—M. & D. 6314.

M. F. W. 42—50M—1-16.
H. Q. 1772-39-893.

No. RANK Lieut NAME Anderson William

T. O. S. UNIT 25 Battery 7th Bdy. C. F. A. 1 C. E. F.

M. D. 3

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915 Mar. 1	1915 Mar. 31	L.		
apr		✓		
May		✓		
June		✓		

Name: Anderson, William

Lieut.

Unit: Can. L. Horse.

Awarded: M.C.

Auth: L.G. # 31219 8-3-19

Action for M.C. L.G. 31383 4-10-19.

Reg. No.

Surname

Rank

Other Names

UNIT

DATE	K.I.A.	D.O.W.	D.O.S.	A. D.	W.	M.	P.O.W.	Other Cas.	In Hospital	Discharged from C.E.F.
			6 4 9 — a — 4 2 1							
Left Point				In	on Command					
					2nd C D D					

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

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

L. L. Job 89002.—Req. 6213.

Sheet No. 2. Mrs Wm Anderson

Name of Soldier Anderson Wm.

Linch. 25th Battery

$30.00

Month.	Year.	Cheque No.	Amt.		Remarks.
April	1916	J 6074	30	—	
May		K 3790	30	"	
June		L 7005	30	—	
July		A 7539	30	"	
Aug.		A 12002	30	"	
Sept.		F 16099	30	"	
Oct.		F 20443	30	"	
Nov.		H 25078	30	"	
Dec.		B 33218	30	"	
Jan.	1917	J 37388	30	"	45.0 J X 26 11 Can.
Feb.		J 42697	30	"	30 Gnl
March		J 49030	30	"	30-L
April		K 94	30	"	30 L
May		K 6230	30	"	
June		K 12875	30	"	30 B
July		K 19845	30	"	Cy 630.
Aug.		M 29406	30	6	Cancelled. Acc Cloud 31/7/17 Authy O.C.L. 349-4-8 on File 0379-W-5-5 Qr C.P
Sept.					
Oct.					
Nov.					
Dec.					
Jan.	1918				
Feb.					
March					
April					
May					
June					
July					

$630

Gnl 9/8/17

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

OVERSEAS CONTINGENTS

Date of Assignment

Nov 1/15

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

30			

gms

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Lieut. Promoted Reverted Discharge

Soldier's Name Wm. Anderson

Battalion 25th Batty. 7 Bgde.

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name Mrs William Anderson

Address 158 Carling Ave. Ottawa Ont.

Change of Address

1

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	0379-W-55 REMARKS
31/7/17			630	630	

a/c Closed 31/7/17

M. F. W. 128
400M.—6-17—177-39-1141
L. L. 22320—M. & D. 7663.

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—177-39-1141
L. L. 22320—M. & D. 7193.

M. F. W. 41.
10m.—4-16.
1772-39-889.

Name..... Anderson Wm L.

3449 - 4 - 8

Regimental No.

Unit C. F. A.

Date of enlistment

Place of "

Married (yes or no)

Amount of pay assigned monthly $30. open) ✓ Stopped 31/7/17
S.A. nil.

To whom payable

Name and address of next-of-kin
158. Carling ave. Ottawa
St. Lukes Hospl.
Ottawa.

To May 15th 1917
C.O.M.F.16 C.F.F.16 4/17 Extended to april 1st 1917

Date and place discharged L. J. 1. 17 to 1. 3. 17

Reason for discharge S.O. 31-8-17

Character on discharge

arr 23-9-16
Missanabie 15.9.16 own expense

L.P.C. 30 Sept/16. Cle

L. L. Job 502 M. & D. 6578.

Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
																L.P.C. # 37
1 10/16	31 10/16	31	2.00	62 =	31	.60	18 60	46 50	127 10	a 2194	11 10/16	135 10	4		135 10	
15 9/16	30 9/16	(16)						8 =	5 13 5 10							
1 11/16	30 11/16	30	2.00	60 -	30	.60	18 -	45 -	123 -	a 2675	16 11/16	63 =	4 60 =		123 -	
1 12/16	31 12/16	31	2.00	62 =	31	.60	18 60	46 50	127 10	a 3126	19 12/16	97 10	4 30 -		127 10	
1 1/17	31 1/17	31	2.00	62 -	31	.60	18 60	46 50	127 10	a 3421	17 1/17	97 10	4 30 -		127 10	
1 2/17	28 2/17	28	2.00	5600	28	.60	1680	4200	11480	a 3803	19 2/17	84 80	4 3000		11480	
1 3/17	31 3/17	31	2.00	6200	31	.60	1860	4650	12710	a 4177	15 3/17	97 10	4 3000		12710	
1 4/17	15 5/17	45	2.00	9000	45	.60	2700	6750	18450	544	10 5/17	124 50	6000		18450	Called up:
16 5/17	31 5/17	16	2.00	3200	16	.60	960	2400	6560	741	25 5/17	6560 ✓	— ✓		6560	to Pers - 19/4
1 6/17	30 6/17	30	2.00	6000	30	.60	1800	4500	12300	1302	27 6/17	9300	3000		12300	to pers 31/5/17
1 7/17	31 7/17	31	2.00	6200	31	.60	1860	4650	12710	1878	31 7/17	97 10	3000		12710	16 days paynthority T.L. Jones
																auth. Capt. Guard 6/7
																5
																Amd. L.P.C. ordnance

Name.....

Regimental No.

Unit

Date of enlistment

Place of "

Married (yes or no)

Amount of pay assigned monthly $

To whom payable

Name and address of next-of-kin

Date and place discharged

Reason for discharge

Character on discharge

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

13.4.21.

Number.....Rank.....Lieut.....

Surname.....ANDERSON.....

Christian Names.....William.....

Unit.....Theatre of War....France....

Dates of Service.10:8:15 - 15:1:16 - 20:6:17.....

Remarks.....

Latest Address.....~~42 Rideau St~~.....

158 Carling Ave., Ottawa Ont.....

Roll No. B

Page 1342

h 160 41 - Dec 6 APR 29 1921
g 4 26033 Dec 6 JUN 27 1921

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.) Yes.
(*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 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.)

Demobilization. Fit for service in Canada. Disability is due to service.

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.

E. B. Moles *President.*
W. J. Nolan Capt
} Members

PLACE Ottawa, Ont.,
DATE 4/6/19.

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
} Members

PLACE.....
DATE.....

APPROVED BY
Assistant Director of Medical Services.
DATE 4/6/19

APPROVED BY
Director-General of Medical Services.
DATE.....

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 Ottawa, DATE June 4th, 1919.

1. 1 (*a*) Unit No 3 Sub Depot (Mtl) 6th Co., R.C.G.A. (*b*) Regimental No..... (*c*) Rank Lieutenant
(*d*) Surname ANDERSON (*e*) Christian name William
(*f*) Home address Dept. of the Interior, Ottawa.
(*g*) Next of Kin Mrs. Janet B. Anderson (*h*) Relationship wife.
(*i*) Address of Next of Kin 73 Arlington Ave.
2. Age last birthday 43 Date of birth April 20th, 1876
3. Enlistment, or Appointment (if an Officer) (*a*) Place Ottawa, (*b*) Date Mar., 1915.
4. Personal description:
(*a*) Height 5 ft. 5 in. (*b*) Weight 165 (Stripped) (*c*) Complexion ruddy
(*d*) Colour of hair red brown (*e*) Colour of eyes brown (*f*) Identification marks, Scars, etc. Irregular shaped depressed scar 3 in. above left ankle.
5. Former trade or occupation Civil Servant.

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	Periods From	Periods To
Canada			March, 1915.	7th Aug., 1915.
			Sept. 26th, 1916.	to date.
England			Aug. 16th, 1915.	Jan. 15th, 1916
			June 20th, 1916.	Sept. 15th, 1916.
France or other theatres of War			Jan. 16th, 1916.	June, 19th, 1916.

7. Original disease, or injury G.S.W. left tibia.
(*a*) Date of origin June 15th, 1916. (*b*) Place of origin Dickiebush, Belgium.
(*c*) Cause Fragment of high explosive shell.

M. F. B. 227.
400M.—11-18.
1773-89-117.

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.)

Limitation of movement of left ankle.

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.)

Obj. - Officer walks with a slight limp, favoring the left leg. There is a crucial scar above left ankle, each arm of which measures 1-1/2 in. This is well healed. Circumferende of left calf is 1 inch less than that of right. Circumference of left leg over site of fracture is 1/2 in. greater than that of right. Movements at left ankle joint:- Extension to angle of 125 degrees. Flexion to angle of 100 degrees. Right ankle joint:- Extension to angle of 125 degrees. Flexion to angle of 85 degrees. X-Ray Report :- "Old healed fracture about 3 in. from lower end of tibia. No abnormal bony condition seen about seat of fracture. (SD.) R.K. Patterson.

Subj.- Officer complains of pain in left leg if he has to do much walking. Says that if he goes slowly that he can walk 2 miles without distress.

(*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.

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

Officer was wounddd at Dickiebush, Belgium, on June 15th, 1916. Admitted to No. 10. Cas. Clear. Station. Admitted to Hospital in Boulogne. Transferred to No. 1. Gen. Hosp. Camberwell, London. Returned to Canada on leave Sept. 16th, 1916. Admitted to C.C.P. Hospital, Ottawa, in Dec., 1916. Discharged in Feb., 1917. Continued treatment at Fleming Home until Oct., 1917. Returned to duty in Oct., 1917.

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*).)

No.

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

Scar on lower end of left shin.

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? N.A.

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? Probably some permanent disability.

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

Hospital treatment in France, England, and Canada.

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit?
(If the answer is "yes" state nature of treatment required and probable duration)

No.

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

17. Recommendations

Demobilization. Fit for service in Canada. Disability is due to service.

W.D. Graham Capt.
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 officer. 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

E.B.M.

William Anderson Lieut Rank.
Signature of invalid examined.

Table III.—Boards; Courts of Inquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, etc.

Date	Brief details, and signature
30 July 1915	Anti-Typhoid Inoculation O K. H. L. Pavey
10 Aug 1915	do do do

Table IV.—Service Table.

Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation	Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation

I certify the foregoing to be a true copy of an original entry on a Medical History Sheet of this man.

for the Officer in Charge of Records
C.A.M.C.
Canadian Contingents.

DUPLICATE.

ARMY FORM B. 178.

To be used (*a*) for recruits enlisting direct into the Regular Army, and (*b*) for men of the Territorial Force when they are admitted to Hospital.
Army Form B. 178A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname ANDERSON *Christian Name* William

TABLE I.—GENERAL TABLE.

Birthplace ... Parish Edinburgh County Scotland

Examined ... ... on 1st day of April 1915,
at Ottawa

Declared Age ... ... 39 years days.

Trade or Occupation ... Civil Service

Height ... ... 5 feet 4 inches.

Weight ... ... 140 lbs.

Chest Measurement { Girth when fully Expanded 36½ inches. / Range of Expansion 3 inches.

Physical Development ... Good

Vaccination Marks	Right	Left
Arm ...		
Number		2

When Vaccinated 1900

Vision ... ... R.E.—V=
L.E.—V=

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

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

Approved by (*Signature*) A. K. Farrell,
(*Rank*) Capt.,
Medical Officer.

Enlisted ... ... at Ottawa
on 1st day of March 1915.

Joined on Enlistment ... / Transferred to ...	Corps.	Regtl. No.
	25th Battery	Lieut-

Became non-effective by ...

This Medical History Sheet has been compared with the Corresponding Attestation Paper, and entries made in it have been taken from the Attestation Paper.

on day of 191 .

(*Signature*) A. K. Farrell Lieut.-Col.
(*Rank*) In Charge of Records, Canadian Contingent.

(4887.) W. 9597/1588. 500M. 9/15. C. P., LTD. Forms B. 178 39

P.T.O.

Table II.—Only for Admissions to Hospital or to the Sick List in the case of Warrant Officers treated in quarters.

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
The London General Hospital	19	6	16	14	9	16	G.Sht. Wd. Lt. Leg	88	Compound Comminuted Fracture of Tibia. Opern. Sequestra removed Aug. 16th. Sinus leading into Medulla; some bare bone Good Union	K.R. Hay.

Table III.—Boards; Courts of Inquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, etc.

Date	Brief details, and signature
30-7--15	AntiTyphoid Inoculation O.K. H.L. Pavey
10-8-15	do. do. A.K. Farrell

Table IV.—Service Table.

Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation	Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation

EC

ORIGINAL.

Lieut.

ARMY FORM B. 178.

To be used (*a*) for recruits enlisting direct into the Regular Army, and (*b*) for men of the Territorial Force when they are admitted to Hospital.
Army Form B. 178A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname ANDERSON *Christian Name* WILLIAM

TABLE I.—GENERAL TABLE.

Birthplace ... Parish Edinburgh County Scotland.

Examined ... ... on 1st. day of April. 1915,
at Ottawa.

Declared Age ... ... 38 years 11.mths. days.

Trade or Occupation ... Civil Servant.

Height ... ... 5 feet 4. inches.

Weight ... ... lbs.

Chest Measurement — Girth when fully Expanded: 36½ inches.
Range of Expansion: 3. inches.

Physical Development ...

Vaccination Marks — Arm ... (Right / Left)
Number

When Vaccinated ... ...

Vision ... ... R.E.—V=
L.E.—V=

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

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

Approved by (*Signature*) A.K.Farrell.
(*Rank*) Capt. A.M.C.
Medical Officer.

Enlisted ... ... at Valcartier.
on 23rd day of July. 1915.

Joined on Enlistment ...	Corps.	Regtl. No.
	25th. Baty. 7th. Brig.	Lieut.
Transferred to		

Became non-effective by ... D.O.S. of O.M.F.S.C. in British Isles
P.C. II D.O. 108 dated 25.6.17
on day of PL 95-5 C 8831 191 .
(*Signature*)
(*Rank*)

The Medical History Sheets of all men proceeding overseas, must be returned by the Officer commanding their unit to the Record Office when they leave England.

W.R. WARD,
Colonel in Charge of Records,
Canadian Contingents, London.

This Medical History Sheet has been compared with the Corresponding Attestation Paper, and the entries made in red have been taken from the Attestation Paper.

W.R. WARD,
Colonel in Charge of Records,
Canadian Contingents.

(4887) W. 9507/1388. 500m. 9/15. C. P., Ltd.

Forms B. 178 39

P.T.O.

Table II.—Only for Admissions to Hospital or to the Sick List in the case of Warrant Officers treated in quarters.

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
THE LONDON GENERAL HOSPITAL	19	6	16	14	9	16	G. Sh. L. W. L. Leg	88	Compd. Comminuted Fracture of Tibia Oper. Sequestra removed Aug 16th. Sinus leading into centre medulla some bare bone. Good union.	K.R.H. Surg Lieut-Col RAMC

1-3-38

PROCEEDINGS OF AN OFFICER OR NURSING SISTER
STRUCK OFF STRENGTH
OF THE
CANADIAN EXPEDITIONARY FORCE

1. RANK	Lieut		
2. NAME	Anderson, William		
3. UNIT	3rd District Depot		
4. DATE STRUCK OFF STRENGTH	31 [illegible] 19	PLACE	Ottawa
5. REASON	On Demobilization Medically Unfit for General Service		
6. AUTHORITY	R.O. 2071 – 9/7/19 – H.Q. 349-4-8.		
7. PROPOSED RESIDENCE	73 Arlington Ave Ottawa Ont.		

This folder should contain the following documents:

1. Declaration Paper, M. F. W. 51, or Attestation Paper, M. F. W. 23.
2. Casualty Form, A. F. B. 103 or M. F. W. 54.
3. Medical History Sheet, M. F. B. 313 or A. F. B. 178.
4. Proceedings of Medical Boards, A. F. A. 179 or M. F. B. 227.
5. Medical Report M. F. W. 129.
6. Dental History Sheet, M. F. B. 465.
7. Last Pay Certificate, M. F. W. 44.
8. Certificate as to Missing Documents.

Medical Documents
Forwarded to
~~S.C.R. or~~ B.P.C.
on
Date AUG 29 1919

M. F. W. 2591.
2m.—2-19.
1772-39-1380.

2-a-87

AUDITOR | PAYMASTER

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

M. OR S. | REGT. NO. | RANK Lieut. | NAME (IN FULL) ANDERSON. William (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN | RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? Yes | DATE EFFECTIVE 1-6-19

TO WHOM PAID Mrs Janet Anderson, Wife | RELATIONSHIP

ADDRESS 73 Arlington Avenue Ottawa. Ont.

PARTICULARS	EFFECTIVE DATE	AUTHORITY
Reg. Pay $2.00		
Fld. allce $1.00		
Lieut William Anderson.		
Geographers Office.		
Dept of Interior		
Ottawa		
Ont.		

ORIGINAL UNIT C.E.F. No. 6 Coy R.C.I. C.A. | IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

DATE OF ATTESTATION Mar. 1915 | TRANSFERRED TO | DATE | AUTHORITY

ASSIGNED PAY $ Nil | DATE EFFECTIVE

PAYABLE TO | RELATIONSHIP | ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE

DISCHARGED PLACE Kingston | DATE 31-5-19 | REASON Demobilization. R.O. 207 | AUTHORITY | IF ENTITLED TO POST DISCHARGE PAY

MONTH 1919	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.	OTHER CREDITS $	OTHER CREDITS C.	$	C.	TOTAL CREDITS $	TOTAL CREDITS C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	DATE	COL. NO. 2 NO.	DATE	COL. NO. 3 NO.	DATE	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.	$	C.	TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	BALANCE CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT																																					
May	31	3.00	93	00	15	36			108	36							148	36																			Special mess allce 16 dys @ 9/6
							40	00	40	00																											Sep allce for May
																	343	75															343	75			A.D.C. St Lucia, Govt. B.W.I. Transp. adv. subject to refund
			343	75					343	75							343	75													343	75					9 F M
			100						100								100																				4.9.81 Cust Pay A/c
																																					Cloth A/c 419333
					War Service Gratuity																																	
183 days	3.00		549	00	240	00	789	00																													27 5 4.20 Dr 210 days @ 2/
		8.50																																			adj. ck. 4th Payment Wag.
																																					A.D.C. 9324928 - 9-9-19
																																					2nd Payment Allce
																																					A.D.C. 9324929 - 9-9-19
																																					25/9/19 1316 715 16
																																					1330 rly 80 OCT 27 1919

200M-3-19.—L. L. 58786-M. & D. 9985.
M. F. W. 2596.
1772-39-1390.

M.D.No.7

DISTRICT DEPOT No. 7

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

AUDITOR | PAYMASTER

M. OR S. | REGT. No. | RANK Lieut | NAME (IN FULL) ANDERSON. W. (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN ? RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? 60 DATE EFFECTIVE

TO WHOM PAID 2/0 RELATIONSHIP (Wife)

ADDRESS S/A Mrs. W. Anderson

(not known)

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F. R.C.G.A. IF IN P.F. WHAT UNIT? S.S. Chignecto 27-5-19

PLACE OF ATTESTATION TRANSFERRED TO D.D.#3 DATE 28-5-19 AUTHORITY D.O. 148

DATE OF ATTESTATION TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE EFFECTIVE

DISCHARGED PLACE DATE REASON AUTHORITY IF ENTITLED TO POST DISCHARGE PAY

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	C.			TOTAL CREDITS $	C.	ACQUITTANCE ROLLS COL. No. 1 NO.	DATE	COL. No. 2 NO.	DATE	COL. No. 3 NO.	DATE	CASH PAYMENTS COL. No. 1 $	C.	COL. No. 2 $	C.	COL. No. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.			TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM FREVIOUS ACCOUNT																																					T.O.S. 16-5-19. D.O. 147
May	31	3.00	93	00	55	36			148	36	B/f'd						148	36															148	36	—		—		L.P.C. 31-5-19
																													343	75			343	75	343	75			o/Inc. S.A. May.
																																	492	11					Transp. advance subject to refund H.2. Cable No. 1485 of 9-11-19
																															a-c	closed							R.P.C. issued
			93	00	55	36			148	36							148	36											343	75			492	11	343	75			
																																			N-E			

200M-3-19.—L. C. 5878S-I.I. & D. 9985.
M. F. W. 2596.
1772-39-1390.

UNIT 7th Bgde C.F.A — Taken on for pay from Aug P.L. 7 Bgde CFA

NAME Anderson W Lieut

1915-16

DATE OF APPOINTMENT 7th March 1915

MARRIED (YES OR ~~NO~~)

NEXT OF KIN:— NAME Janet B Anderson

ADDRESS 158 Carling Ave, Ottawa.

DATE NON-EFFECTIVE AND CAUSE

ASSIGNED PAY:—

MONTHLY AMOUNT $30.00 (Nov 1st 15. See Vo. 632)

TO WHOM PAYABLE Mrs. William Anderson
158 Carling Ave. Ottawa. Ont.

BANK IN WHICH PAY & ALLOWANCES DEPOSITED Bank of Montreal

G. B. & S.

PERIOD From	PERIOD To	No. of Days	Regtl. Rate	PAY Amount of Regimental	PAY Command	PAY Adjutant	PAY Cr. from Prev. Account	PAY Total Pay	Rate of Field Allowance	ALLOWANCES Amount of Field Allowance	ALLOWANCES P. F. Allowance	ALLOWANCES Messing	ALLOWANCES Subsistence	ALLOWANCES Total	Total Pay and Allowances	Assigned Pay	Sundry Deductions	Net P. A.	Paid in Cash	Deposited in Bank	Carried Forward	Remarks
1/9/15	30/9/15	30	✓	60				60	60	18		30		48	108			Total Debits	~~108~~	108	25 SEP 1915	225-3-10
1/10	31/10	31		62				62		18 60		31		49 60	111 60			Balance	~~111 60~~	111 60	222-18-7	
1/11	30/11	30		60				60		18		30		48	108	30				78		
1/12	31/12	31	✓	62				62	✓	18 60		31		49 60	111 60	20				81 60		
1/1/16	31/1/16	31	✓	62				62	✓	18 60		31		49 60	111 60	20				81 60		
1/2/16	29/2/16	29	✓	58				58	✓	17 40		29		46 40	104 40	30				74 40		
1/3/16	31/3/16	31 21 3	✓	62				62	✓	18 60		31		49 60	111 60	30 130				81 60 216 90		

SUNDRY PAYMENTS

DATE 1915	CHEQUE NO.	PARTICULARS	AMOUNT $	AMOUNT c.	AMOUNT £	AMOUNT s.	AMOUNT d.	REMARKS
Sept 3	567	Travelling Expenses Quebec to England 9-15th 15.	10		2	1	1	
" 3	568	Outfit Allce	100					

P—15.

ASSIGNED PAY. **UNIT.** NAME OF / DATE / AUTHORITY **RANK.** DATE / AUTHORITY **NAME.** 9-A-111C

Beneficiary Mrs. Wm Anderson
Address 158 Carling Ave. Ottawa Ont.
Amount. $30.00
Separation Allowance issued. Yes or No.

J. Bde. C.F.A. — Lieut.

Name Anderson
Initials. W.
Bank Bank of Montreal.

1916-17

DATE 1916	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case	INITIALS
Apl. 24	A.P. Can.				30..			
✓ 25	Pay April (R)		108..			6 78..		
27	Bank			78		—		
May 22	Pay May (R)		111 60					
23	A.P. Can				30..			
25	Bank			81 60		—		
June 21	Pay June (R)		108.					
23	A.P. Can				30.			
	Bank			78		—		
July 19	July Pay R		111 60					
	A.P. Can.				30			
	Bank.			81 60		—		
Aug 18	Aug. Pay. R		111 60 ✓				Ly. 7/17. DO. 4788, CRD. 11 9/16	
	A.P. Can				30		leave to Canada 18 9/16	
	Bank	7462		81 60		—	PrA to be carried forward.	
Sept 11	Bank			78			L.L.C. to 30 9/16	
18	Ord. issued to Officers Can. pres. R.S.1 free "Gen. 9/c	7485		64 60			charge Sept + Oct	
20	Sub. Pay R		108				equally	
	A.P. Can				30	6 64 60		
Oct 20	Oct. Pay.		111 60					
" 20	A.P. Canada.				30	6 17		
Nov 18	Nov Pay		108			" 125		
"	A.P. Canada.				30	" 95		
Dec 12.	Dec Pay.		111 60			20660		
	~~Dec~~ ~~Pay~~ A.P. Canada.				30	17660		

Carried forward to sheet 2.

P—15.

ASSIGNED PAY.

Beneficiary Mrs. Wm. Anderson
Address 158 Carling Ave
Ottawa, Ont.
Amount. $ 30.00
Separation Allowance issued. Yes or No.

UNIT.

NAME OF	DATE	AUTHORITY
7 Bde. C.D.A.		

RANK.

	DATE	AUTHORITY
Lieut		

NAME.

Name Anderson
Initials W.
Bank of Montreal

1916-17

DATE 1917	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case	INITIALS
Jan	Balance brought forward					Cr 176 60		
17	A. P. Can				30		Extn. to 1 4/17. A.G. 422 9 3/17.	
22	Jan Pay R.		111 60			Cr 258 20	to 7/17 D.O. #788. C.T.D. 11 2/16	
Feb 16	Feb Pay R.		100 80				Leave to Canada 12 2/16.	
17	A. P. Can				30	327	Pay to be carried	
Mar 20	Mar Pay R.		111 60				forward R.P.C. to 30 9/16.	
15	A. P. Leave				30	410 60		

FORM P.15
2227—10M—1/1/17

ASSIGNED PAY.

UNIT. NAME OF: Gen Risk. DATE: . AUTHORITY: .

RANK. Lieut. DATE: . AUTHORITY: .

NAME.

Beneficiary

Address

Canada

Amount. $ 30 00

Separation Allowance issued. Yes or No.....

Name Anderson
Initials W.
Bank
Bank of Montreal

Retained in Canada. A.P. Can. 1771 vv 6/17

1917-18

DATE 1917	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS
						£s	Extn to 15 4/17 N.A.G.R. Gr #638 1 5/17	
Apl 2	Balance brought forward					4 10 60	Ext to 1 4/17 A.G. 4422. 9 3/17	
17.	a.P. Can.				30.	3 80 60	Ext to 7/17. D.O. 4788 C.T.D. 11 9/16.	
26.	Pay Apr (R)		108			488 60	Leave to Can. 12 9/16.	
May 15.	a.P. Can.				30.	458 60	Pro to be carried	
15.	Pay May (R.)		111.60			570 20	forward until return	
June 13.	a.P. Can				30.	540.20	L.P.C. to 30 9/16.	
18.	Pay June (R.)		108.			648.20	Typ NE Ledger	
July 13	Overcredited Pro. 1 10/16-30 6/17 V#301 P.E			98780			To ledger No 12.	
13	a.Pay charged not paid 1 10/16-30 6/17 V#54 a.P.Can		270			64 60	From ledger No 2.	9 7/17.
Aug 28	Transfd to suspense account V373		64 60				28/2/17 amend LPL sent to Canada showing	
1918							∴ Balce $64.60	
Jan 11	a Roll #3206 d/28 2/17 Pay II V#595			973		973	$64.60 1918 recovered by Ottawa vide letter on file dy 25 2/17	
11	" "3128 d/15 2/17 " V#594			973		1946	15 4/16 J.A.L.R.C. sent to Can. Dr Bal. $19.46	

FORM P. 15.
5986—25M—19/1/17

ASSIGNED PAY. | UNIT. NAME OF | DATE | AUTHORITY | RANK. | DATE | AUTHORITY | NAME.

Beneficiary — Gen List — Lieut. — Name Anderson
Address — Initials W.
Amount. $ 50.00 / Canada — Bank of Montreal
Separation Allowance issued. Yes or No..... Retained in Canada 1918-19 H.Q. 1741 dy 2nd 6/14

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS
1918								
Apl 1	Balance Forward					Dr 1946	15/4/18 Fa/2186 to Can.	
" 30	chgd to Can	1155 Can	1946			—	Dr bal 1946 a	
1919							14/3/19 K.B. requested	
Mch 15	To re-instate Dr Bal. chgd to Can. apl. 1918 to enable a/c to be correctly adjusted. Obs. & file Can. a/c 9-9-111	No. 1359		1946		Dr 1946	to sign [illegible] Dr 1946 a/c	
24	adv. on A.R. 3128 dy 15 2/17, $9.73 " " " 3206 dy 28 2/17, $9.73 chgd in error, Mch 1918, shd be Lt. W. Anderson C.L.H. auth Ledger Obs. Misc. a/c	No. 302	1946			—	Acted by Ottawa 9 Apl 19	