

7174

ATTESTATION PAPER

No. 46464

Folio. 406464

CANADIAN OVER-SEAS EXPEDITIONARY FORCE

QUESTIONS TO BE PUT BEFORE ATTESTATION. (ANSWERS)

1. What is your name?..... Anderson W
2. In what Town, Township, or Parish, and in what Country were you born?..... Oakville, North York County Ont.
3. What is the name of your next-of-kin?..... None
4. What is the address of your next-of-kin?.....
5. What is the date of your birth?..... July 2nd 1886
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?..... No
If so, state particulars of former Service.
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

W Anderson (Signature of Man.)
W Ballance, Lt. (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.

Date 14th April 1915 W Anderson (Signature of Recruit.)
W Ballance, Lt. (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.

Date 14th April 1915 W Anderson (Signature of Recruit.)
W Ballance, Lt. (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 Hamilton this 17 day of April 1915
W J Cressney (Signature of Justice.)

I certify that the above is a true copy of the Attestation of the above-named Recruit.
W J Cressney Major (Approving Officer.)

DESCRIPTION OF William Anderson ON ENLISTMENT.

Apparent Age 28 years 9 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

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.)

Height 5 ft. 8 ins.

Chest measurement { Girth when fully expanded 38 ins.
Range of expansion 2 1/2 ins.

1 Vaccination mark on left arm
4 Scars Left shoulder
2 " Right Buttock

Complexion Fair

Eyes Blue

Hair Sark

Religious Denominations { Church of England
Presbyterian
Methodist X
Baptist or Congregationalist
Other Protestants
(Denomination to be stated.)
Roman Catholic
Jewish

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 14 1915

W. M. Currier

Place Hamilton

Capt R. M. C

Medical Officer.

*Insert here "fit" or "unfit."

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

CERTIFICATE OF OFFICER COMMANDING UNIT

William 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.

[Signature] (Signature of Officer.)

Date APR 20 1915

CANADIAN EXPEDITIONARY FORCE *War Service Badge*

DISCHARGE CERTIFICATE

Class *a*
No. *374892*
issued.

THIS IS TO CERTIFY that No. *406464* (Rank) *Pte*

Name (in full) *Anderson* *William* enlisted in

the *36th Battalion*

CANADIAN EXPEDITIONARY FORCE at *Hamilton* on the *17th*

day of *April* 19 *15*

HE served in *France + Belgium*

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 *32 yrs*

Marks or Scars *4 scars on*

Height *5' 8"*

left shoulder

Complexion *Fair*

Eyes *Blue*

Hair *Dark*

W Anderson
Signature of Soldier

Dwight Thompson
Issuing Officer

Date of Discharge

No. 2 District Depot
Toronto, Ont.

FOR
O.C. No. 2 District Depot

Rank

MAY 31 1919

Date *MAY 31 1919* 19

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

Uniform is not to be worn after
expiration of one month from date of
discharge
of G. O. C.

1st Lt. Col. W. H. ...
Regt.
General W. H. ...
May 14 1913

Certificate of Service

(Issued following loss of Permanent Discharge Certificate M. F. W. 39)

This is to Certify that No. 406464 (Rank) Private

(Name in full) ANDERSON, William

Enlisted in 36th Battalion

Canadian Expeditionary Force, on the 14th day

of April 19 15

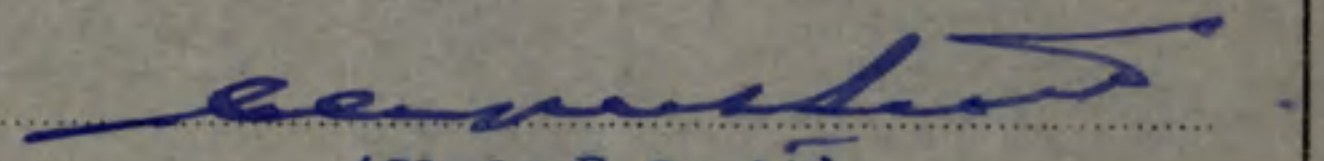
He served in CANADA, ENGLAND & FRANCE with 1st Div. Train, C.A.S.C.,

and was discharged at Toronto, Ont., on

the 31st day of May 19 19

by reason of demobilization

His conduct and character while in the Service were good


(Clyde R. Scott)

Major,
Asst. Director of Records

Address _____

Ottawa 19th day of January 19 31

H. Q. 649-A-604

Filed pending
application

7174C

20976

Rank _____ Name **ANDERSON. Wm.** Reg'l No. **406464.**
 Unit **36th BN.** If in perm. Corps, }
 What Unit? } Married or Single **Single.**
 Place and Date of Enlistment **Hamilton. 17th Apl. 1915.** Place of Birth **Oakville. Ont.**
 Name and Address, Next-of-Kin **None.**

Relationship **None.**

Assigned Pay Monthly \$ _____ Payable to _____

Relationship _____

Separation Allowance \$ _____ Payable to _____

Relationship _____

Discharge, Date and Place _____ Reason _____ Character _____

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				
C. 27/5	CC. 36	2 days pay. absence Arr'd in England	Niagara	27/5 28-6-15	Pt II - 51
22.9.15	" "	5 days pay + 14 days F.P. no2 for absence	Shorncliffe	22-9-15	" - 144
26.10.15	"	Trans. to 1st B.	W. Sandling	26.10.15	Pt II O. 174.
6/11/15	Ob. 1st	Taken on strength	In the field	27/10/15	" " 37.
16.12.15	C.P. 235.	B. wd. L. Hand.	#2 Can. Staty. H. Boulogne. Bevan Mill.	8.12.15	O.N.
23.12.15	Sp. 241	" " " "	Hoop. Sandling	17/12/15	
24.12.15	Ob. 1st	Invalid to Eng	Central Com. Hoop.	16.12.15	Pt II O. 44
5/1/16.	Sp. 250	Sp. 1st L. Hand.	monks Horton	2/1/16.	
4.1.16.	Ob. 36	Taken on strength	to Sandling	17/2/15	Pt II O. 4

406464 Anderson Wm

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Report

Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.

REMARKS
Taken from Official Documents

Date	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
10-6-16	0.638 th Adm Moore	Baracks Hosp	W Sandling	10-6-16	Pt II 162
24.8.16	..	Trans to CASCTD.	..	18.8.16	.. 237.
28.8.16	Base	Taken on strength	Shoucliffe	19.8.16	" 241
29.8.16	CASCTD	S. C. S. TOP DEPT	CASC. S. Clife	28-8-16,	Pt II 242
26.1.17	N ^o 3 Case	SOS to 5 th Div Train C&S.	Witley	25.1.17	Pt II 0 26
26-1-17	5 Div Tr	TOS from C&S	Witley	25-1-17	" 3
11.1.17	casctd)	SOS to CASCTD) / Clife	Witley	11-1-17	Pt II 11
12.1.17	"	TOS from CASCTD	Clife	11-1-17	--- 12
15.2.17	"	SOS on proceeding overseas	"	15-2-17	--- 46
21.2.17	C.A.S.C.	Pool	Field	2.17	PT. II 12
23.3.17	Pool	Posted to 3 rd Div 3 rd Bn	In the Field	23.3.17	4 - 18
24.3.17	3 DT	1 st DT reinforcement from CASCTD	do	4-3-17	--- 20
28.3.17	3 DT	Watched for duty to 1 st DT	"	12.3.17	--- 21 1 DT Pt II 44
14.4.17	1 DT	Order to be attached to 1 DT	"	1.4-17	--- 26
10.7.17	DT	Reported from Base to Hosp	"	17.6-17	Chk 30 NSQ
16.7.17	DT	Adm N ^o 1 Can Ho Amb	"	17.6-17	Chk 34. Kerner R Ing
16.7.17	DT	Reported unit	"	25-6-17	Chk 34
4.12.17	CASC	Adm & Hd Amb	Pte Field	28.11.17	CLA 79 Hernia R Ing
		Direct from Hosp	Pte -	28.11.17	

N^o 3 CASCTD.
Pt II 201
A.F.B. 103 CHECKED
26 FEB. 1917
WAP

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

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

No. H06464 Rank PRIVATE Surname ANDERSON
(Give name in full)
WILLIAM
Unit or Corps CORPS DEPOT C.A.S.C. Birthplace BRANTO ONT.

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

1. GENERAL DESCRIPTION:

Physique Good Weight 180 lbs. Height 5 ft. 9 in. Colour of Eyes Blue
Nutrition Good
Pulse 90
Condition of arteries Healthy
Vision Rt. Normal Left Normal
Hearing (conversational voice) Rt. 20 ft.
Left 20 ft.

Identification marks, scars, or deformities.
(Give cause and date of origin.)
Scars of Rt. & Lt. Inguinal
Hernia operations.
Scars and slight deformity from
wound of left middle finger

Opinion as to general health and physical condition Good

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

Nervous System No Genito Urinary System No Cardio-Vascular System No
Special Senses No Integumentary System No Respiratory System No
Disturbance of mentality No Muscular System No Digestive System (a) Yes
Osseous and Joint System (b) Yes Any other general condition No

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

(a) Left Inguinal Hernia - Operation in July 1915 - Good result.
Right Inguinal Hernia - Operation in Dec. 1918 - Good result.
(b) G. S. L. middle finger, left hand, fracture 1st phalanx. Wounds healed
well, union of fracture with slight deformity.

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EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at Blandford (Overseas)

Date 8-5-19

Signed J. Maylor, Capt. R.A.M.C.

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

Signature W. Anderson

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

THIS SECTION FOR USE IN CANADA—

Examined at..... (Canada)

Date

SignedM.O.

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

Signature

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

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

[OVER]

DEPARTMENT OF MILITIA AND DEFENCE

WAR SERVICE GRATUITY.

*Certified this document
checked with
Regimental documents.*

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 *William* 2. Surname *Anderson*
3. Rank *Pte* 4. Original Unit *36th Batt* 5. Reg. No. *406464*
6. Address, in full, to which future payments of gratuity are to be forwarded
B. P. O. Milland ont
Canada
7. Date of enlistment in the C.E.F. *December 12 1914*
8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge *Not applicable*
9. Relationship of such dependent *Not applicable*
10. Address, in full, of such dependent *Not applicable.*
11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? *Not applicable.*
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? *as*
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. *4 years 6 months*
36th Batt 9 months 1. Batt
6 months 3 years 3 months C.A.S.C
16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department *Not applicable.*
17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.? *Not applicable.*

18. Have you had more than one enlistment? If so, give particulars of discharges and re-enlistments, and under what regimental numbers and units. *Not applicable*

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. *Not applicable*

20. Have you been issued with a War Service Badge? If so what class? *(1)*

21. Have you, during the present war, served in the Imperial Forces? *Not applicable*

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. *Not applicable*

23. (a) Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England? *Not applicable*

(b) If so, was such reversion in consequence of misconduct or inefficiency? *Not applicable*

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

MAY 31 1919

(b) Reason for discharge

DEMOBILIZATION

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 *(1)*

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: *W. Anderson*

Place of Residence: *Mr D. Bruce Buffle, V.D.C.,*

Declared before me at: *Blanford Heath*

This *7th* day of *May* 19*19*.

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.

Clearborne
**MAJOR
OFFICER COMMANDING
C.A.S.C. CORPS DEPOT.**

POST DISCHARGE PAY.

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

Certified Correct.

District Paymaster

*G. P. J.
W. Anderson's test.*

14

WILL

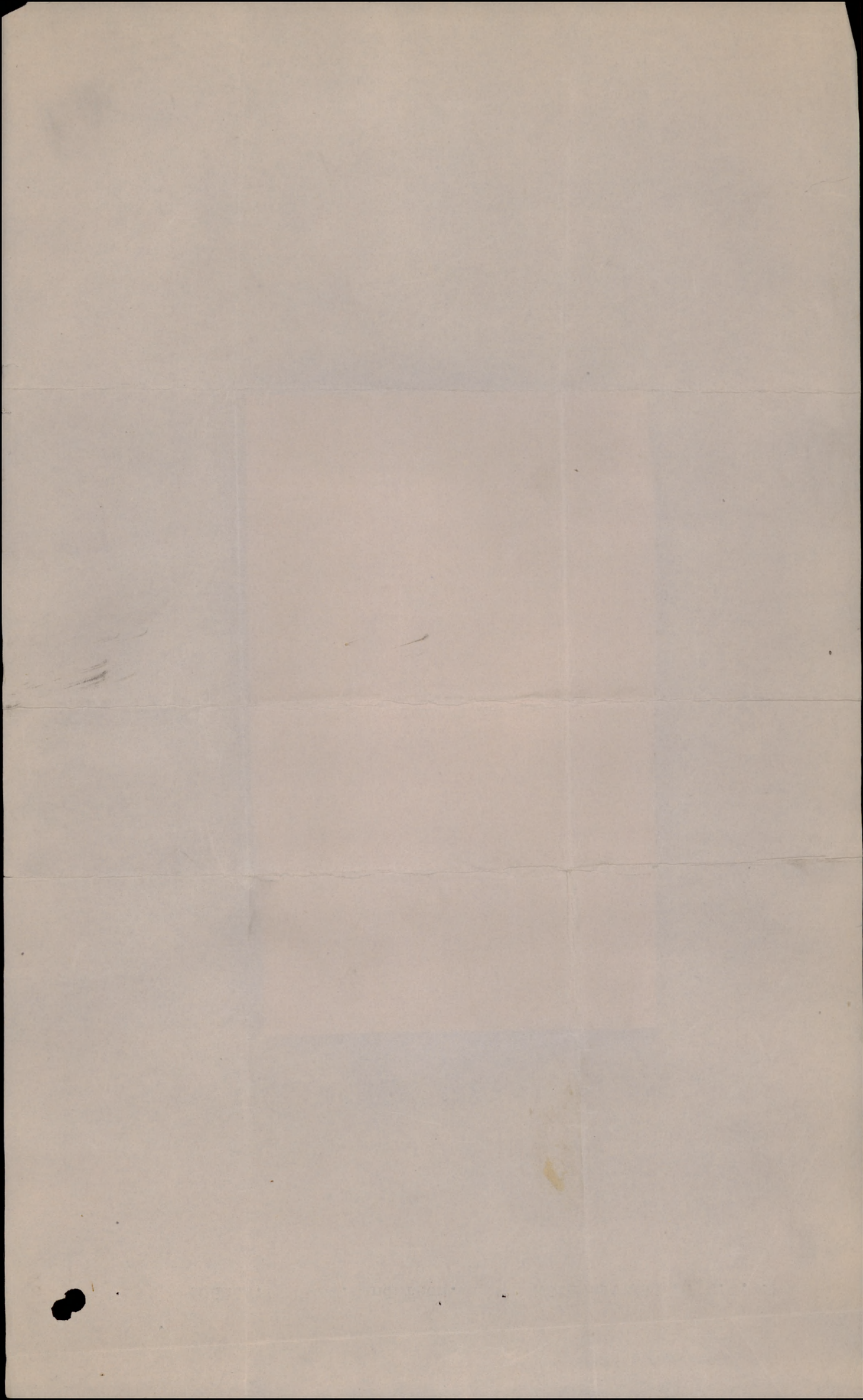
*West Sandling Camp.
Oct. 20th 1915.*

*In the event of my death
I give the whole of my
property and effects to
Hugh Charles Niccosi of
the City of Kingston in the
Province of Ontario Son of
Mr H. Niccosi No 406548
now of the 36th Batt C.E.F.*

*W Anderson
406464*

*Witness M. McDonald
406578*

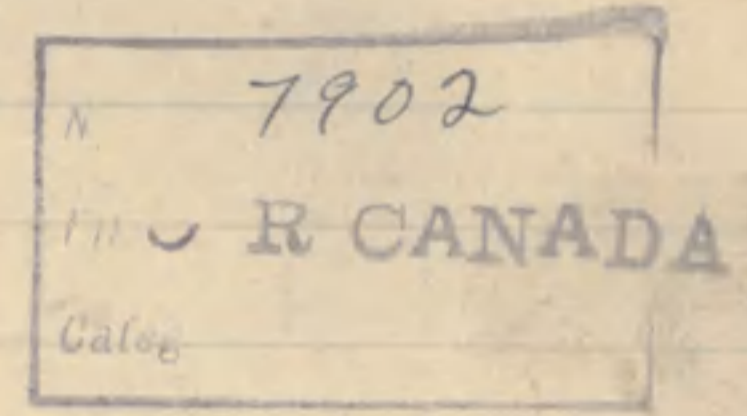
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Rank _____ Name ANDERSON, Wm. Reg'l No. 406⁶464
 Unit 36th Bn. If in perm. Corps, }
 What Unit? } Married or Single Single
 Place and Date of Enlistment Hamilton, 14th Apl. 1915. Place of Birth Oakville, Ont.
 Name and Address, Next-of-Kin None.

Assigned Pay Monthly \$ _____ Payable to _____ Relationship _____
 Separation Allowance \$ _____ Payable to _____ Relationship _____



Discharge, Date and Place Reason Character
 H. W. V., Lt. 1ST PAGE OF RECORD FILED IN ENVELOPE. 3rd DT.

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.				
		Permanent Grade..... ^{Pt} Acting Rank.....			
15-5-19	18/7/19 Case ed	Tos from 3rd D Train Pt	Wesley	3-2-19	Pt O. 42 P/O. 23d/22/19 Tos 2 mdcw.
15-5-19	- " -	Tos to M4 #2 Rhyt	Blandford	14-5-19	40 116 do 116d/15-5-19
		Proc to Canada		21-5-19	66-1-88
22-5-19	2 mdcw	Sub Canada Sq. 66. Pt Rhyt.		21-5-19	do. 1st

CLINICAL CHART.

Army Form B. 181.

Corps 1 Bn Cav

(To be attached to Case Sheet.)

Military Hospital No 2 Cav Det

No. 406464

Rank and Name Pvt Anderson Wm

Age 28

Service -11

Disease D. W. 2nd Degree Phos Date of admission Dec 1-15

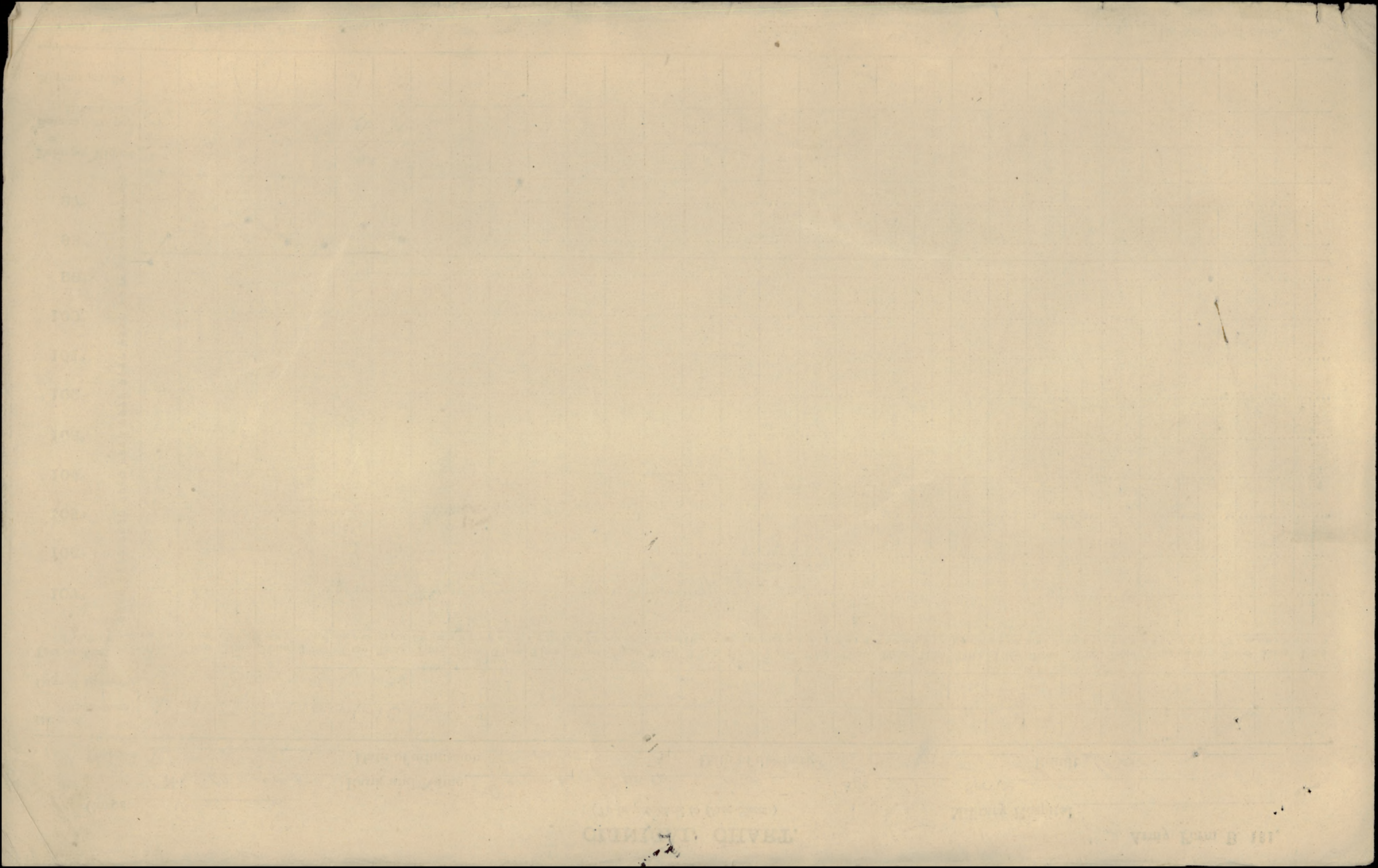
Date of discharge Dec 16/15

Result Improved

Dates of Observation	Dec																											
	9	10	11	12	13	14	15	16																				
Days of Disease	1	2	3	4	5	6																						
Temperature Fahrenheit	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time
	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.
107°																												
106°																												
105°																												
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103°																												
102°																												
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98°																												
97°																												
Pulse per Minute	72	72	68	78	84	84	88	88	88	88	88	88	88	88	88	88	88	88	88	88	88	88	88	88	88	88	88	
Respirations per Minute	18	20	18	20	20	20	20	20	20	20	20	20	20	20	20	20	20	20	20	20	20	20	20	20	20	20	20	
Motions per 24 hours	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	

Admin. 2 antiparasitics
 2 P.M. Mixture
 Dressing to limbs
 Trans to England
 Dress. 16/15

Signature W. Arthur Manning In charge of case.



LEAVED & PRINTED

1811

CANADIAN ARMY DENTAL CORPS, O.M.F.C. DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

DIRECTIONS TO DENTAL OFFICERS

NAME OF SOLDIER (Block Letters) ANDERSON. W.
REGIMENT CORPS DEPOT C.A.S.G. RANK PTE. No. 4064 64

Date of Examination in England 7-5-19. Date of Examination in France _____

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 17
- 2. EXTRACTIONS no
- 3. CROWNS no
- 4. DENTURES no
 - (a) Full Upper
 - (b) Part Upper
 - (c) Full Lower
 - (d) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT? no

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

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

Signature of Dental Officer

R. Woodcock

ANDERSON

PTX

11
11
11

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book. <u>063</u> Year. <u>1915</u>	Regimental No.	Rank.	Surname.	Christian Name.
	<u>406464</u>	<u>Plt</u>	<u>Sunderson</u>	<u>Wm.</u>
	Unit.	Age.	Service.	
	<u>1 Bty (Can)</u>	<u>28</u>	<u>-11</u>	

Station and Date.	Disease
<u>Med Can.</u>	<u>B. W. L. Hand</u>
<u>Stal Hoop</u>	
<u>9/12/15</u>	
<u>Boulogne</u>	

Pl. admitted to-day suffering from a bullet-wound thru proximal phalanx of middle finger R. hand - wd septic + discharging freely - phalanx shattered - blood supply to the rest of the finger good
 saline baths 2 hrs duration twice daily
 dressing moist 1/20 carbolic
 12/12/15 Wd looking much better, ^{+ healthier} less painful, less discharge,
 16/12/15 Transfer to England

W. Fisher Capt

R / 16/12/15

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

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	<i>406464</i>	<i>Pte</i>	<i>Anderson</i>	<i>W.</i>
Year	Unit.		Age.	Service.
<i>1916</i>	<i>1st Bn.</i>		<i>28</i>	<i>1 yr.</i>
Station and Date.	Disease <i>G. S. W. L. hand</i>			
<i>Woods Horton 1/1/16</i>	<i>Bullet round middle finger left hand. Dec. 6th at Meisines. Was not ad bed. Was 2 weeks ad hosp. No r lau. Boulogne. Beran Military 2 days - Fairfield Hosp. W Dec 31st.</i>			
	<i>Present condition: General health good. Middle finger still somewhat enlarged and stiff, flexion not complete. But has good use of the hand as a whole.</i>			
	<i>Discharged to Unit as Recovered with sick furlough approved. 36th Res. Sandling.</i>			
	<i>J. Walker Capt C. C. C.</i>			

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

567

NEWLEY, FOLKESTONE.
20
6000 22-1-16-4055

7174

20-2-16 ✓

RE-EXAMINATION

BY

STANDING MEDICAL BOARD, SHORNCLIFFE.

Feb 2nd 1916.

Number 406464

Rank Private

Name Anderson W.

Unit 36th Res Bde.
Formerly 1st Bde.

DISABILITY.

Present Condition :

Received G.S.W. left middle finger 6th
Dec. 1915. Interphalangeal joints very stiff - tender
mass over head of proximal phalanx. Very
little power of flexing middle finger.

APPROVED
[Signature]
MAJOR D. A. A. G. OF D. OF R. & O. FOR
BRIGADIER GENERAL
COMMANDING
CANADIAN TRAINING DIVISION, SHORNCLIFFE.

Board recommends :

- 1. Fit for Duty? no.
- 2. Fit for Permanent Light Duty? no.
- 3. Fit for Temporary Light Duty and Physical Exercise? yes.
- 4. Discharge? no.

Signatures :

Members { H.C. Mearns Capt. Pres.
J. Hankin Capt. Chair

Approved.

Shorncliffe 3 FEB 1916 1916.

[Signature] Capt.

A/D. A.D.M.S.
Canadian Training Division.

RE-EXAMINATION

BY THE BOARD OF MEDICAL EXAMINERS

NAME: _____
ADDRESS: _____
CITY: _____

EXAMINATION

QUESTIONS

ANSWERS

1963

60

EXAMINATION

BY

STANDING MEDICAL BOARD, SHORNCLIFFE.

..... June 23rd 1916

No. 406464 Unit. 36th Can Rank. Pte

Name. Anderson W Age. 29

Examination held at. West Sandling

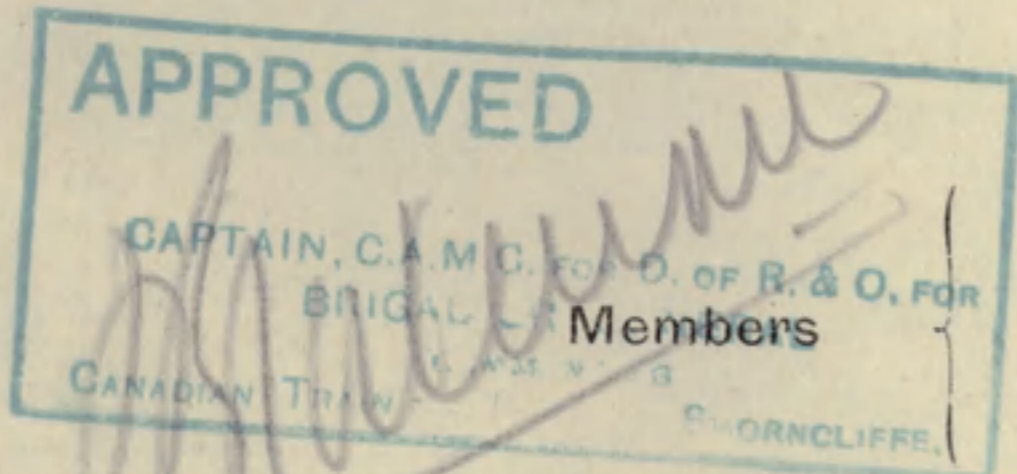
DISABILITY. G S W Middle finger Left hand
Overseas—Local.
(scratch one out)

Present Condition

Wound of December 1916. Some thickening of bone
No disability other than a little stiffness of
finger

Board recommends:— **Yes**

1. Fit for Duty.
2. Fit for duty after.....weeks' physical training.
3. Fit for light duty.....weeks.
4. Fit for permanent base duty.
5. Discharge.



Signatures:—
 R. W. Ferguson Capt President.
 Michaelis Capt

APPROVED

Shorncliffe..... 27 JUN 1916 1916. H. D. Craig Captain.

A/D, A.D.M.S.,
Canadian Training Division.

EXAMINATION

STANDING MEDICAL BOARD SHORCLIFFE

THE YEAR

NO. 10001

NAME

EXAMINATION

STANDING MEDICAL BOARD SHORCLIFFE

THE YEAR

NO. 10001

THE YEAR

NO. 10001

NAME

EXAMINATION

STANDING MEDICAL BOARD SHORCLIFFE

THE YEAR

APPROVED

Handwritten signature and date within the APPROVED stamp.

THE YEAR

NO. 10001

NAME

EXAMINATION

7174

Christian Name *Volkmann*
Surname *Auderson*

STATION.	Date of Arrival at the Station.	DATES OF						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.
		Admission into Hospital.			Discharge from Hospital.						
		Day	Month	Year	Day	Month	Year				
<i>Moon Barracks Hosp.</i>		29	7	15	1	8	15	<i>Hernia</i>	4	<i>transferred to Bevan Hospital</i>	<i>F.C. Clark</i>
<i>Bevan Military Hospital Sandgate</i>		1	8	15	8	9	15	<i>adenitis (inguinal)</i>	38	<i>Radical cure of Hernia. Depot Cured</i>	<i>Joseph E. Labadie</i>
<i>Bevan Military Hosp Sandgate</i>		16	12	15	18	12	15	<i>bullet wound finger left hand</i>		<i>Recovered.</i>	Signature
<i>No 1 C.F.A.</i>		17	6	17	25	6	17	<i>Hernia R. Ing.</i>		<i>Rej Unit.</i>	<i>J.C.O. Bruden</i>
<i>Princess Patricia Canadian Red Cross Hospital, Corden Camp, Beahill</i>		10	2	19							<i>A34-A34. GH.</i>

Duplicate Medical History Sheet posted to here.
Medical Registrar
Record Office.

Casualty Form—Active Service.

Regiment or Corps CASC Pool

Rank Pte Surname Anderson Christian Name W.

Religion Age on Enlistment years months.

Enlisted (a) Terms of Service (a) Service reckons from (a)

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

Extended { } Re-engaged { } Qualification (b)
 or Corps Trade and Rate

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		
			DISSEMBARKED		
			HAVRE		N.R. (19)
<u>18-2-17</u>	<u>B.D. H.T.&S.</u>	<u>Having arrived at Can. Base Depot as reinforcement is taken on the strength of CASC Pool</u>	<u>Field</u>	<u>16-2-17</u>	<u>Pt 2 O No 12 dated 21-2-17</u>
		<u>Posted to</u>	<u>as Reinforcements</u>		
<u>25-2-17</u>	<u>A.A.G.</u>	<u>Posted to 5th Can Divl Train as Reinforcements</u>		<u>4-5-17</u>	<u>N.R. 6456 P.O. 18 d/25-5-17</u>
<u>10-3-17</u>	<u>Q.B. 3rd Train</u>	<u>1 on S. of Unit from CASC Pool as Reinforcement</u>		<u>5-3-17</u>	<u>B215. P.O. No 20 d/24/3/17</u>
<u>17-3-17</u>	<u>Q.B. 1st Can Divl Train</u>	<u>Attached for duty to 1st Can Divl Train</u>		<u>12-3-17</u>	<u>A.F.B. 215 P.O. No 21 d/28-5-17</u>
<u>7/4/17</u>	<u>Q.B. 3rd Train</u>	<u>Cases to be attached to 1st C.O.T.</u>		<u>1/4/17</u>	<u>B213. P.O. 26 d/24/17</u>

(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) Signaller, Shoeing-Smith, &c.

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 of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents	
From whom received					
23.6-17	Account	Adm to Hospital	Field	17-6-17	Adm 91/4/3-7-17
30-6-17	do	Rejoined from Hospital		25-6-17	Adm 92/10-7-17
1-7-17	1st CFA	Herms R. Eng	Adm 1st CFA	17-6-17	Adm 41807
24-6-17	9th CFAmb	Eng Herms	Trans to Duty	25-6-17	A36/10-7-17
			Adm 9th CFA	17-6-17	
			Trans 1st CFA	17-6-17	A36/10-7-17
24-7-17	10th CFA	do do	Adm 10th CFA	17-6-17	A36/10-7-17
29-11-17	8th CFA	- do - R.	Adm Trans to Duty	28-11-17	A 3423
28-11-17	10th do	- do -	Adm Trans to 8th CFA	28-11-17	A 3500-
5-1-18	Account	Rejoined from Hospital		29-11-17	K14 17-9
12-1-18	- do -	Granted 14 days leave	England	6-1-18	B213 P20.4 21-1-18
26-1-18	3rd. Coy	Rejoined from	- do -	21-1-18	B213
7-12-18	43 C.C.S.	Hermitage	To A.T.31	14-12-18	A3891
2-12-18	Do	Do	adm	3-12-18	A3788
2-12-18	8 CFA	Do	To C.C.S.	1-12-18	A3777
5-12-18	10 Gen Hosp	Do	adm	5-12-18	W4295
7-12-18	5 C.C.S.	Do	To C.C.S.	3-12-18	A4297
12-12-18	7th General	Do	adm	12-12-18	W5258
30-1-19	74 General	Still a Patient		30-1-19	KH-18-23030.
2-2-19	74 General	Invalided Sick to England per H.I. Grantully Castle and Posted to C.A.S.C Regt Depot Witley		4-2-19	FFW 3083(6776) OKHO 23/1/19

Lieut.
C. A. Stewart
Lt. Col., AAG.,

71747

Army Form B: 103. 406464

Casualty Form - Active Service.

CERTIFIED CORRECT
Canadian Report Office
Westminster
7, Millbank

Regiment or Corps 36th Battalion C E F

Regimental No. 406464 Rank Private Name Anderson William

Enlisted (a) 14/4/15 Terms of Service (a) Duration of war Service reckons from (a) Apr 14/15

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) civil Labourer Corps Horse Transport Driver

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
		<u>Arrived</u>	<u>England.</u>	<u>28/6/15</u>	
<u>27-10-15</u>	<u>C.B.D.</u>	<u>Reinforcement from 36th Res Bn.</u>			<u>Can Base Dep. 27-10-15. Nom Roll.</u>
<u>27-10-15</u>	<u>C.B.D.</u>	<u>Proceeding to join</u>	<u>Unit</u>	<u>6/11/15</u>	<u>101/CEF/G/25</u>
<u>14-11-15</u>	<u>1st Con</u>	<u>Joined</u>	<u>Unit</u>	<u>8-11-15</u>	<u>B213</u>
<u>8-12-15</u>	<u>2 Con Sqn</u>	<u>B.Wd. 2. Hand.</u>	<u>2 Con Sqn</u>	<u>8-12-15</u>	<u>W3034-225.</u>
<u>12-12-15</u>	<u>2 BTA</u>	<u>" " Ad Trans</u>	<u>2 BTA</u>	<u>6-12-15</u>	<u>373.</u>
<u>12-12-15</u>	<u>1st Con</u>	<u>Wounded</u>	<u>not given</u>	<u>7-12-15</u>	<u>B213.</u>
<u>16-12-15</u>	<u>H.S. Brighton</u>	<u>Admission</u>	<u>H.S. Brighton</u>	<u>16-12-15</u>	<u>W3083. P.V. no 44.</u>
<u>16-12-15</u>	<u>2 Con Sqn</u>	<u>B.Wd. 2. Hand.</u>	<u>To England</u>	<u>16-12-15</u>	<u>W3034-233</u>
<u>13-12-15</u>	<u>8 BBS.</u>	<u>Cy W. 2. Hand. Ad Trans</u>	<u>8 BBS.</u>	<u>7-12-15</u>	<u>376.</u>
<u>4.1.16</u>	<u>O.C. 36</u>	<u>Trans to 36th</u>	<u>2024 Train</u>	<u>8-12-15</u>	<u>A-36-4565</u>
			<u>Sandling</u>	<u>17.12.15</u>	<u>P.V. 4</u>

W Kelly Lieutenant

(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.

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				
(12) 24-8-16	OG 36 th Bn	TRANSFERRED TO CASC TD BATTN. C.E.F.	18-8-16	18-8-16	Pt #237 Lt. Col. O.C. 36th Battalion C.E.F.
(13) 28/8/16	D.A.S.C. TD	208, from 36 th Bn	SHORNCLIFFE	19/8/16	Pt II 241
29-8-16	OG Basc TD	Test'd to CASC	SHORNCLIFFE	28-8-16	Part II 242 CAPT for MAJOR O.C. - CASC TD
5/11/17	O.C.C.A.S.C. J.O.	T.O.S. No. 3 DEPÔT C.A.S.C.	Witley	28-8-16	Part II 241
11-1-17	OG Basc	Transferred to C.A.S.C. TD	Shorncliffe	11-1-17	Part II 241 Supt. & Adj. No 3 DEPÔT, C.A.S.C., WITLEY
JAN 12 1917	OG case, 2D	J.O.D. Basc TD	SHORNCLIFFE	11/1/17	Part II 241 Supt. & Adj. No 3 DEPÔT, C.A.S.C., WITLEY
FEB 15 1917	O.C., C.A.S.C. TD	On draft over to C.A.S.C.	Shorncliffe	FEB 15 1917	PART II. ORDER No. 46 Cumulators: Lh for O.C., C.A.S.C. TD.
26/10/16	O/c 36 th Bn	Trans to 1 st Bn.	W. Sandling	26/10/15	Pt #174
11/1/16	O/c 1 st Bn	Taken on strength	Field	27/10/15	Pt #37
	O/c 36 th Bn	Taken on strength	W. Sandling	17/12/15	Pt #4

VERIFIED CORRECT
 26 FEB. 1917
 CAN. RECORDS. COMPANY

Officer
 Lieut.
 for Selected i/c Records, C.E.

7174

(SERVICE AND CASUALTY FORM Part II).

Regiment or Corps 36 Bn. Regimental Number 406464.

*Substantive Rank _____ Surname Anderson Christian Names William

*Acting Rank _____
(*To be entered in pencil to facilitate alteration.)

(A) Report.		(B) Authority of Part II. of Orders	(C) Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	(D) Place of casualty.	(E) Date of promotion, reduction, reversion, casualty, &c.	(F) Remarks, and initials and rank of an officer.
Date.	From whom received.					
18-2-19.	60866D	Part 42	20 from 3 D.T.	Witley	3-2-19.	
14-5-19		Part 116	HAVING PROCEEDED TO <u>Blythe</u> 15 S.O.S. to M.D. WING No. <u>2</u>	Blandford		

William Anderson
FOR LT. COL. / O RECORDS, C.O.M.F.

[Signature]
O. I/C RECORDS,
CORPS DEPOT, C.A.S.C.

To be folded on this line.

Nothing to be written in this margin.

(426383.) Wt. W. 9693—P. 2068. 500,000. 3/19. S. & S., Ltd. E. 4602.

MAY 21 1919 O. S. T. O. S. No. 2 DISTRICT DEPOT, TORONTO 1919 PART II D. C. 163
MAY 31 1919 S. O. S. (DISCHARGED FROM H. M. S.) No. 2 DIS. DEPOT, PART II D. C. 163

[Signature]
For O. C. No. 2 District Depot.

7174

OFFICE OF THE ADJUTANT GENERAL AND CASUALTY FORM

(A) Report.		(B) Authority of Part II. of Orders	(C) Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	(D) Place of casualty.	(E) Date of promotion, reduction, reversion, casualty, &c.	(F) Remarks, and initials and rank of an officer.
Date.	From whom received.					
15/5/19	C.A.S.C.		T.O.S. Kinmel Park	M.O.Z.		
22/5/19		S.O.S.	to C.E.F. Canada.	D.O. 121.		
						C. F. Hammers Capt. for oc. No. 2 wing

Emb'd We 2700L 21-5-19

Nothing to be written in this margin.

Rank *Private* Name

ANDERSON, Wm.

Reg'l No. ⁴⁰ *A6464.*

Unit *36th bn.*

If in perm. Corps,
What Unit?

Married or Single *Single.*

Place and Date of Enlistment
Hamilton. 17th Apl. 1915.

Place of Birth *Oakville. Ont.*

Name and Address, Next-of-Kin.
None.

Relationship
None.

Assigned Pay Monthly \$ Payable to

Relationship

Separation Allowance \$ Payable to

Relationship

Discharge, Date and Place

Reason

Character

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						
<i>1915</i>															
<i>July 1</i>	<i>July 31</i>	<i>31</i>	<i>1.00</i>	<i>31.00</i>	<i>31</i>	<i>10</i>	<i>3.10</i>			<i>34.10</i>			<i>32.50</i>	<i>1.60</i>	
								<i>87</i>							<i>adj. Exchange</i>
<i>Aug 1</i>	<i>31</i>	<i>31</i>	<i>1</i>	<i>31.00</i>	<i>31</i>	<i>10</i>	<i>3.10</i>		<i>137</i>	<i>34.10</i>			<i>14.60</i>	<i>21.97</i>	
<i>Sept 1</i>	<i>30</i>	<i>30</i>	<i>1</i>	<i>30.00</i>	<i>30</i>	<i>10</i>	<i>3.00</i>		<i>179</i>	<i>33.00</i>		<i>5.50</i>	<i>24.33</i>	<i>2.44</i>	<i>B.O. 144 of Sept 21 pay</i>
									<i>222</i>			<i>15.40</i>	<i>7.50</i>		<i>5 days pay. B.O. 144 of</i>
<i>Oct 1</i>	<i>31</i>	<i>31</i>	<i>1.00</i>	<i>31.00</i>	<i>31</i>	<i>10</i>	<i>3.10</i>		<i>284</i>	<i>34.10</i>			<i>4.87</i>	<i>31.67</i>	<i>Apr 21 - 1st day F.P.H. 2 dls.</i>
<i>Nov 1</i>	<i>30</i>	<i>30</i>	<i>1.00</i>	<i>30.00</i>	<i>30</i>	<i>10</i>	<i>3.00</i>		<i>365</i>	<i>33.00</i>			<i>9.34</i>	<i>55.33</i>	<i>1st day F.P.H. 2 dls.</i>
									<i>612</i>				<i>9.34</i>		
<i>Dec 1</i>	<i>31</i>	<i>31</i>	<i>1.00</i>	<i>31.00</i>	<i>31</i>	<i>10</i>	<i>3.10</i>		<i>640</i>	<i>89.43</i>			<i>11.34</i>	<i>78.09</i>	<i>Apr 1. 36 - B = 31 Dec/15</i>
<i>Jan 1</i>	<i>31</i>	<i>31</i>	<i>1</i>	<i>31</i>	<i>31</i>	<i>10</i>	<i>3.10</i>			<i>34.10</i>			<i>55.97</i>	<i>56.22</i>	
<i>Feb 1</i>	<i>29</i>	<i>29</i>	<i>1.00</i>	<i>29</i>	<i>29</i>	<i>10</i>	<i>2.90</i>	<i>1.40</i>		<i>33.30</i>			<i>17.16</i>	<i>57.76</i>	<i>\$1.40 over debit in 2d</i>
													<i>14.60</i>		<i>in forfeiture of pay</i>
<i>March 1</i>	<i>31</i>	<i>31</i>	<i>1.00</i>	<i>31.00</i>	<i>31</i>	<i>10</i>	<i>3.10</i>		<i>924</i>	<i>34.10</i>			<i>14.60</i>	<i>60.38</i>	<i>B.O. 68 8/3/16 issues</i>
									<i>950</i>			<i>4.58</i>	<i>12.30</i>		<i>on replacement.</i>
				<i>275</i>			<i>27.50</i>			<i>273.04</i>			<i>218.91</i>	<i>60.38</i>	
													<i>25.48</i>	<i>244.39</i>	

Checked *CUM*

BALANCE TRANSFERRED TO NEW LEDGER.

Surname

Christian Name or Names

Reg. No.

Andersen, W.

406464

Rank

Unit

Co.

Troop

Batty.

Plt Sur 6th Batta case. O.T. 3 D.T.

Hospital

Date of Admission

Transferred Bevan Military Hosp. 1. 8. 15

No. 2. Can. Stat. Hosp. Boulogne. Hosp. 8. 12. 15

Bevan Mill. Hosp Sandgate Hosp. 17. 12. 15

Genl. Gov. Hosp. Monks Horton Hosp. 2. 1. 16

Diagnosis

Hernia + Pneumonia

(1) Later Diagnosis (if changed)

B. wd. L. Hand.

(2)

(3)

Additional Diagnoses, if more than one state present

I Hernia Rt. Ingu. gh
II Hernia Rt. Ingu. R

Hernia Rt. Ingu.

DISPOSITION

Date

REMARKS

W. R. 3. 9. 15 Discharged 8. 9. 15

C. L. 16. 12. 15 # 236 " 3-1-16

C. L. 23. 12. 15 # 241

" 5. 1. 16 250

14-9-16 166

A. & B. To Hosp 17-6-17

Rej. unit. 25-5-17

10-7-17 230

Dis 28-11-17

16-7-17 A 34

" 4. 4. 19

5-12-17 A 79

A.M.D. 2 DEPT

10. 12. 18. a 392

11-12-18 A 394-1

Bch. of D G M S. D M S. London.

21-12-18 A 402

7174

EPITOME OF HOSPITAL TREATMENT.

	Hospital	Adm.
1.	Mil Hosp. <i>Shawnee</i>	
2.	1 C. F. Amb.	17.6.17
3.	8 Can. Fld. Amb.	28-11-17
	53. G. B. Sta.	3 IV. 18
4.	10 G. Roman.	5-12-18
	74 Gen. Trowville	12.12.18
5.	2 Eas. Gen. Brighton	3.2.19
	D.P.C.R. Cross Beachill	12.2.19
6.		
7.		

CL. 14. 2. 19. B. 432^①
 17. 2. 19. B. 434/2
 10. 4. 19. B. 444



Number

406464

Rank

pte

Surname

ANDERSON

Christian Name

William

Units

1st Bn. Can Inf Theatre of War France

Date of Service

26-10-15

Remarks

Latest Address

Welland Ont.

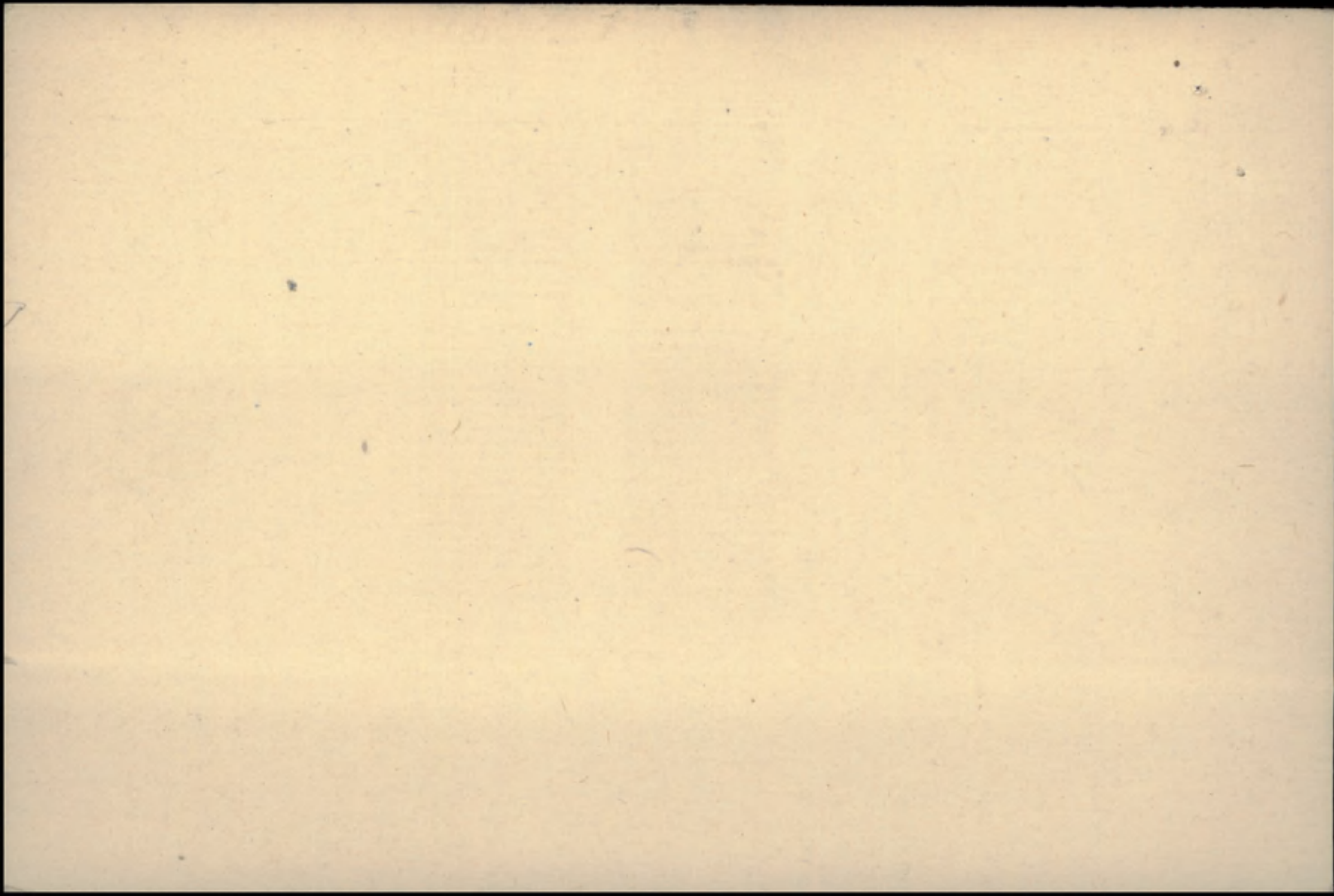
will send address

Roll No.

Traveller for Ford Coy.

200m.-6-21

Page 20181



No. *A6464*

RANK

Pte

NAME

Anderson W.

T. O. S.

UNIT

36th Battalion.

M. D. *2*

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1915 Apr. 1</i>	<i>1915- Apr. 30</i>	<i>✓</i>	<i>absent without leave -</i>	<i>D.O. 51 - may pay list</i>
<i>May</i>		<i>✓</i>		
<i>June</i>		<i>✓</i>		
<i>July</i>		<i>✓</i>		

UNIT SAILED
JUN 1 9 1915

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
A392	53 pp le 5.	3.12.18	Hernia R Inq
A394	10 Gen: Rouen	5.12.18	" " "
A402	H Gen: Trouville	12.12.18	" " "
B432	2 nd East Gen: Brighton	3-2-19	" " "
B434	P.P. le Rle: Bixhill	12.2.19	" " "
B479	Desch	4.4.19	" " "

NAME

Anderson, W.

REGT. No.

406464

RANK AND UNIT

Drvr. (3202) 10asls

NEXT OF KIN

CABLE

No.

DATE

NATURE OF CASUALTY

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

Name Anderson W. Rank Pte

Reg. No. 406464

7174

Unit 1st. Battalion

Next of Kin Canada

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
8-12.	No. 2 Can. Stn. Hosp.	Boulogne	B. Wd. L. Hand	235		M2721 7/1
17-12.	Bevan Mil. Hosp.	Sandgate	do	241		
1-1-16.	St. Andrew's High Branch Hosp.	Westgate-on-Sea	do	240		
2-1-16.	Cent. Conv. Hosp.	Monks Horton	do	250		
3-1-16	Discharged	do	do	3166		

William

7174

Name **ANDERSON** Rank **Doc.**Reg. No. **406464**Unit **Co. A. S. Co. 3rd D. T.**Next of Kin **no N. K.**

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1918 3. 12	53 bas bldg Str	Sterna Ing R		A392		40153
5. 12	10 G. H.	Rouen	do	A394		6193-12
12. 12	44 G. H.	Trouville	do	A402		6380-11
3. 2. 19	2 E. Sew H	Brighton	do	B432		6531.
12. 2. 19	D F Co to Co H	Blochier	do	B434		6901.
4-4	disch	do	do	B479		3050.
16-4	Case Framing Depot	Witley	Cooder	A759		

REMARKS.

Haymer

S.

May 1915

Welland Out.

Princess Patricia Canadian Red Cross Hospital HOSPITAL.

A. & D.
CARD

Cooden Camp, Bexhill.

AT

Regl. 406464
A. & D. No. 406464 PL. OF ACTION Snows
RANK Dvr. REG. No. UNIT 3rd Div. Train Co. C. C. C. SICK OR WOUNDED T6644
NAME Anderson W. AGE 32 RELIGION C.E.

PLACE IN HOSPITAL

DIAGNOSIS

ADMITTED

DISCHARGED

TRANSFERRED

SERVICE AT HOME

IN FIELD

RESULTS

DISCHARGED TO DUTY

Cava

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

REMARKS:

MOORE BARRACKS, CANADIAN HOSPITAL, SHORNCLIFFE.

ADMITTING CARD.

Regt. No. *A 6464* A. & D. No. *2877*
Rank *Pvt*
Name *Anderson Wm*
Corps *36 Bⁿ Co 'y* Age *28* $\frac{6}{12}$
Religion *Meth*
M. H. Rec'd *29.7.15* M. H. Requested M. H. Ret'd *1.8.15*
Disease *Hernia*
Admitted *29.7.15*
Discharged
Place in Hospital *11*
Transferred *Bevan Home 1.8.15*
Results

From Montreal per S.S. Corsican 19/6/15

MARRIED

SINGLE

yes

WIDOWER

TRADE OR CALLING

Labourer

RELIGION

Methodist

DESCRIPTION.

APPARENT AGE

28 YEARS

9 MONTHS

HEIGHT

5' FEET

8 INCHES

CHEST MEASUREMENT

38 INCHES

EXPANSION

2 1/2 INCHES

COMPLEXION

Fair

EYES

Blue

HAIR

Dark

DISTINGUISHING MARKS

1 Vacc. mark on left arm.

4 scars left. shoulder. 2 scars on right Buttock

MEDICAL EXAMINATION.

PLACE

Hamilton, Ont.

DATE

Apr. 14th 1915

Present address:- not stated

SURNAME.

Andersson

"9" CARD NO. *C*

CHRISTIAN NAMES

William

*Sollis 31-5-19, Dinet
Do 163 of 12-6-19, 2*

REGL. NO.

406464

RANK

Pte.

UNIT

36th

Bn.

FORMER CORPS

nil

NEXT OF KIN.

NAMES IN FULL

nil

RELATIONSHIP TO SOLDIER

nil

ADDRESS

nil

CHANGE OF ADDRESS

*Please notify Mr. & Mrs.
N. Hubbert (Father & Mother)
Box 322 Burlington
Ont. auth. Letter.*

*Also notify Mrs. C. Medcalf (sister)
Aldershot, P. O. Ont. auth. Letter Dec. 14~~th~~ 1916*

Dec. 8-1916

COUNTRY OF BIRTH

Canada, Oakville, Ont.

DATE

July 2nd 1886

PLACE OF ATTESTATION

Hamilton, Ont.

DATE

Apr. 17th 1915

o/p 19-6-15 125

*R/C 29-5-19 337
45 Pte*

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
235	#2 Can. Stat, Boulogne	8-12-15	B. wd. lt. hand.
241	Bevan Mil. Sandgate	17-12-15	B. w. l. hand.
250	Can. Convt. Monks Horton	2-1-16	gsw. l. hand.
B166	Mil. Shomo. Hlisch	3-1-16	gsw. l. hand.
979 ¹¹	#8 Can. Old Amb	28-11-17	Hernia R. Inq.
979 ¹¹	Discharged	28-11-17	" " "
A30	Rep from Base to Hosp	17-6-17	M.S. Q.
A34	#1 l.F. Amb.	17-6-17	Hernia R. Inq.
A34	Reg. Unit	25-6-17	" " "

7174

H. Q. FILE No. 649-

NAME Anderson William

REGT'L. No. 406464

RANK AND CORPS Plc

1st. Batt. form 36th

CABLE

NATURE OF CASUALTY

NO. DATE

m. 2721 16-12-15

Adm to, No. 2 Gen. Stat. Hosp. Boulogne ^{8th}
(Gunshot wound hand.)

06604 21-12-16

(wsm) disch. from hosp. on
strength of C. A. S. C.

Training Depot Whitley Camp.

NO. 572
FOLL.

* Strike out whichever inapplicable.

ASSIGNED PAY.	ENGLAND OR CANADA.	SEPARATION ALLOWANCE.	ENGLAND OR CANADA.	NAME:- <i>ANDERSON, William</i>
EFFECTIVE DATE:-		EFFECTIVE DATE:-		NUMBER:- <i>406464</i>
AMOUNT:-		AMOUNT:-		PARTICULARS OF RANK OR APPOINTMENT

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.	
AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		<i>P6.</i>

UNIT AND TRANSFERS	ORIGINAL UNIT:- <i>36th Res Bn.</i>		
	DATE ACCOUNT FIRST OPENED:-		
AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S'D	UNIT TRANSFERRED TO
<i>AR June</i>	<i>21/7/17</i>		<i>3 D Train</i>

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
		<i>12 days Sick Pay</i>	<i>8 7/16</i>	<i>29/1/19</i>	<i>296</i>	<i>A'ford</i>	<i>4867</i>
			<i>357</i>			<i>Londa</i>	<i>2777</i>
			<i>55.19</i>	<i>7/9/19</i>	<i>795</i>	<i>A'ford</i>	<i>4867</i>

PARTICULARS OF RENDERING NON-EFFECTIVE: *9.11.31/19 m.m.g. 8731 B'ford. 10/19 B'ford mtd 2*

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
<i>March</i>	<i>Bal Forward</i>								<i>401.18</i>		
<i>April</i>	<i>P.P.</i>	<i>33</i>							<i>3887</i>		
				<i>AR 14. 21/1/18. 36 A.T. ①</i>	<i>446</i>				<i>43418</i>		
					<i>446</i>				<i>42972</i>	<i>420</i>	
<i>May</i>	<i>P.P.</i>	<i>3410</i>							<i>46382</i>		
				<i>AR 145. 10/5/18. 3 R.T. ③</i>	<i>803</i>				<i>45579</i>		
				<i>AR 252. 17/5/18 do ⑥</i>	<i>803</i>				<i>44776</i>		
					<i>1606</i>				<i>46076</i>		
<i>June</i>	<i>P.P.</i>	<i>33</i>							<i>47630</i>	<i>450</i>	
				<i>AR 309. 1/6/18. 3 R.T. ②</i>	<i>446</i>				<i>47273</i>		
				<i>380. 15/6/18. " ⑤</i>	<i>357</i>				<i>50683</i>		
					<i>803</i>				<i>50237</i>		
<i>July</i>	<i>P.P.</i>	<i>3410</i>							<i>49860</i>	<i>465</i>	
				<i>AR 466. 3/7/18. 3 R.T. ②</i>	<i>446</i>				<i>53290</i>		
				<i>AR 542. 10/7/18. do 9.</i>	<i>357</i>				<i>52833</i>		
					<i>803</i>				<i>52876</i>	<i>480</i>	
<i>Aug</i>	<i>P.P.</i>	<i>3410</i>							<i>55876</i>		
				<i>AR 676. 10/8. 3 R.T. 5</i>	<i>357</i>				<i>55519</i>		
				<i>AR 422. 20/8. " 11</i>	<i>357</i>				<i>55162</i>		
					<i>714</i>				<i>58576</i>		
<i>Sept</i>	<i>P.P.</i>	<i>33</i>							<i>55519</i>		
				<i>AR 918. 6/9/18. " 5</i>	<i>357</i>				<i>55162</i>		
				<i>AR 1015. 20/9/18. " 10</i>	<i>357</i>				<i>58576</i>	<i>510</i>	
					<i>714</i>				<i>58199</i>		
<i>Oct</i>	<i>P.P.</i>	<i>3410</i>							<i>58199</i>		
				<i>AR 1110. 1/10/18. " 36</i>	<i>373</i>						
					<i>373</i>						

Forward

NUMBER 406464 RANK Pfc.

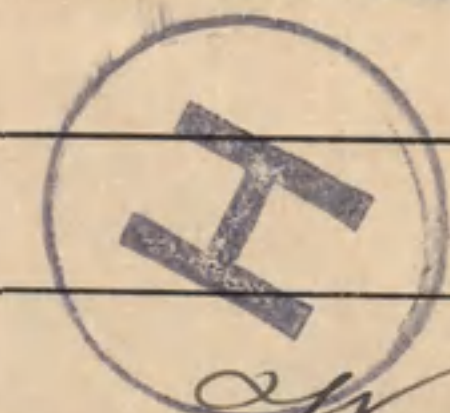

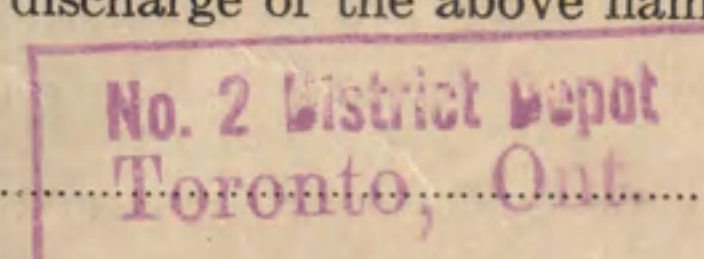
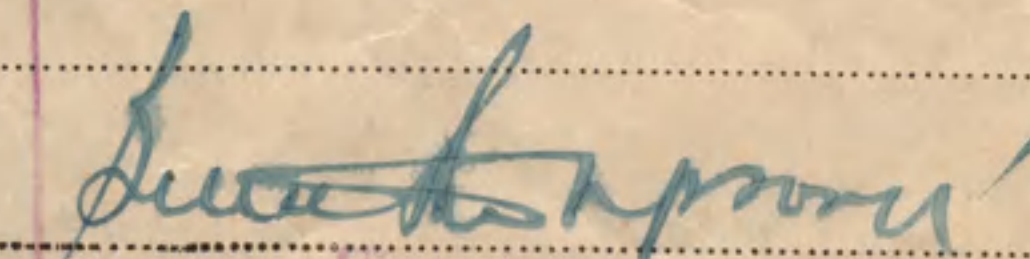
NAME ANDERSON. W.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Nov									581.99	510-	
	P.P.	33	-						614.99	525-	
Dec	P.P.	34	10	AR. 1592 21/1/18 36A.J.	32	13	06		601.93		
Jan	P.P.	34	10						636.03	540-	
		10	20						670.13	555-	
Feb	P.P.	30	80						700.93	570.00	
Mar	P.P.	34	10	6810 17/4 Bld. 97	97	97			691.20		
				8712 7/3 ✓	129	19	47		705.83		
				9310 17/3 ✓	144	97			696.10		
		6	90						38.93		
Apr	P.P.	33							729.10	600.00	
				BP 5923 5/2 30	1	19	47		704.63		
				5 1/4 100	6	97			694.90		
				260 3/3 ✓	10	48	67		651.23		
				Q4005 536 5/3	11	37	0		647.53		
				107 8/4 20	13	34	07		613.46		
				93 14/4 ✓	21	97			602.73		
May	P.P.	34	10						637.83	615-	
	Int on Def Pay	53	81						691.84		
				BP. 66891 3/5	43	24	33		667.31		
				296 28/4 Bfnd	45	48	67		618.64		
				795 8/5	69	48	67		569.97		
				10921 10/5	83	97			560.21		
		20	91						256.77		
				Rly 7/4 WA 78/6 Bld. Melford	73				539.57	615-	
				Wendon 27-4/19	73						
	121 Imp. S.F.	87	6						568.27		
				SOS. 66 21/5/19							

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

W.B.P. Class A.
 SERVICE GROUP 20
 OCCUPATIONAL GROUP 1
 M.D.2
 SHORT FORM.
 PROCEEDINGS ON DISCHARGE.
 (Demobilization.)
 Toronto
 Fiancée
 Farmer.
 2-5-11
 A.

1. No.	de 06464		
2. Rank.	Pte		
3. Name.	Anderson	William	
4. Unit.	P.C.S.P.	P.C.S.P.	
5. Date of Discharge	MAY 31 1919	Place	TORONTO, ONT.
6. Reason for Discharge	DEMobilIZATION 		
7. Authority.	No. 2, D.D., Part II, D.O. No. 163		
8. Proposed Residence after Discharge	Welland Ont 17 th		
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.?		
	<i>Declassified</i> William Anderson		
	Signature of Soldier.		
10.	CONFIRMATION.		
	The discharge of the above named man is hereby confirmed.		
Place			
Date	MAY 31 1919		
			
	For O.C. No. 2 District Depot:		
	Signature..... (O. C. Discharging Unit.)		

Checked by No. 20
 Date 20 MAY 1919

