

12-10-19

REGIMENTAL DOCUMENTS

9748 H

NAME

Anderson William Maxwell

REGT. NO.

334777

UNIT

3rd Batty

M. F. W. 2505 REFERENCE

H. Q. FILE NO.

CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

NON-EFFECTIVE BY

1 ATTESTATION PAPER (M.F.W. 23, 133, or 51)

1 CASUALTY FORM (M.F.W. 54 or A.F.B. 103)

1 TRAINING HISTORY SHEET (M.F.W. 113)

1 FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)

1 REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)

1 COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)

1 MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)

1 DENTAL HISTORY SHEET (M.F.B. 465)

1 MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)

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1 PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)

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1 PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)

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1 COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)

1 CAD 5009

1 CAD 5009

1 DM 1375

1 PD 3

1 Maw 2602

1 T. 122

1 Psych

M

H

Discharged
3-8-60

15-11-21

DEATH

Category

DISCHARGE

Category

Demoted

DESERTION



23/4/8

Original

No 38777
Folio.

ATTESTATION PAPER.
63rd DEPOT BATTERY, C.F.A., C.E.F.
CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.
(ANSWERS.)

- 1. What is your surname?..... Anderson
- 1a. What are your Christian names?..... William Maxwell
- 1b. What is your present address?..... Windsor, Ontario.
- 2. In what Town, Township or Parish, and in what Country were you born?..... Chicago Illinois, U.S.A.
- 3. What is the name of your next-of kin?..... Mrs Anna Anderson
- 4. What is the address of your next-of-kin?..... Elk Rapids, Antrim Co. Michigan U.S.A. MKC
- 4a. What is the relationship of your next-of-kin?..... Mother
- 5. What is the date of your birth?..... October 31st 1886
- 6. What is your Trade or Calling?..... Locomotive Fireman
- 7. Are you married?..... Single
- 8. Are you willing to be vaccinated or re-vaccinated and inoculated?..... Yes
- 9. Do you now belong to the Active Militia?..... No
- 10. Have you ever served in any Military Force?..... 9 Years Illinois Natl. Guard U.S.A.
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
- 13. Have you ever been discharged from any Branch of His Majesty's Forces as medically unfit? .. No
- 14. If so, what was the nature of the disability? None
- 15. Have you ever offered to serve in any Branch of His Majesty's Forces and been rejected?..... No
- 16. If so, what was the reason?..... None

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, William Maxwell Anderson, do solemnly declare that the above are answers made by me to the above questions and that they 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 Maxwell Anderson (Signature of Recruit)

Date April 20th 1918 *Wm. B. Berman* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, William Maxwell 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 Maxwell Anderson (Signature of Recruit)

Date April 20th 1918 *Wm. B. Berman* (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 Windsor, Ontario this 20th day of April 1918.

Wm. B. Berman Major (Signature of Justice)
O.C. Windsor, Mobilization Centre

Description of William Maxwell Anderson on Enlistment.

Apparent Age.....32.....years.....5.....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.....36 ins.
 Range of expansion.....2 1/2 ins.

Complexion.....Fair

Eyes.....Hazel

Hair.....Dk. Brown

Religious denominations. { Church of England.....
 Presbyterian.....
 Methodist.....
 Baptist ~~of Congregational~~ Yes.....
 Roman Catholic.....
 Jewish.....
 Other denominations.....
 (Denomination to be stated.)

7/16

Hearing Normal
 Vision R.E. 20-25
 L.E. 20-25

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 20th.....191 8

[Signature] Major.....

Place.....Windsor, Ontario.....

C. A. 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 Maxwell 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.

Date.....Apr 24th.....191 8.....
[Signature] (Signature of Officer)
O. G. 63rd Depot Battery, C. F. A.

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 334777 (Rank) Gunner
Name (in full) William Maxwell Anderson enlisted in
the 63rd Battery C.F.A.
CANADIAN EXPEDITIONARY FORCE at Windsor, Ont on the 20th
day of April 1918
HE served in England with 2nd Tank Bn. and M.D.C. King's
Rhyle
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 <u>32 yrs. 7 mths.</u>	Marks or Scars <u>nil</u>
Height <u>5ft 8ins.</u>	
Complexion <u>Fair</u>	
Eyes <u>Hazel</u>	
Hair <u>DK Brown</u>	

Anderson W. M.
Signature of Soldier

[Signature]
Issuing Officer
..... Capt. for Lt.-Col.
O. C. Clearing Services Command.
Rank
AUG 28 1918
Date 19.....

Date of Discharge



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.

Original

DENTAL HISTORY SHEET

M.F.B. 465,
50M. -2-18,
1772-89-950.

CANADIAN ARMY DENTAL CORPS

DISTRICT.....

NAME OF SOLDIER.....

Anderson

REGIMENT.....

63 Batta

RANK.....

Pte

No. *334777*



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.

Condition on first Examination	Date	Amalgam	Temporary Filling (a)/(G. P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhcea	Synthetic Porcelain	Extracting	Dentures			Gold Clasp	Gold Filling	Crowns		Bridge Work	OPERATOR	Military Dist.	REMARKS
												U	L	P			Gold	Porcelain				
	<i>April</i> <i>1918 23</i>										<i>3.14</i> <i>19.17</i>								<i>A. Beony</i>	<i>1</i>	<i>2416</i>	
	<i>24</i>										<i>16</i>								<i>Full Hagey</i>	<i>1</i>	<i>Complete 24/4/18</i>	

INSTRUCTIONS

X

Handwritten notes in Cyrillic script, including the word "Судебный" (Court).

ДЕЛОВАЯ ИСТОРИЯ ЛИСТА

ОТДЕЛ

MEDICAL HISTORY SHEET

Surname Anderson Christian Name William Maxwell

Examined { on 20th day of April 1918
 at Windsor, Ontario
 Birthplace { City or Town Chicago.
 County Illinois, U.S.A.

Approved by _____
 Rank _____ M.O.

Apparent age 32 Years 5 Months

Trade or occupation Locomotive Fireman M.O.

Height 5 feet 8 Inches M.O.

Weight 142 lbs. M.O.

Chest measurement { Minimum 33 1/2 inches M.O.

{ Maximum expansion 36 inches M.O.

Physical development Good M.O.

Small-pox Marks Nil M.O.

Vaccination Marks { Arm Right Nil Left Nil
 Number Nil

When Vaccinated last Nil M.O.

(a) Marks indicating congenital peculiarities or M.O.

previous disease Nil 75-2. M.O.

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

Hearing Normal M.O.

Vision R.E. 20-25 M.O.

L.E. 20-25 M.O.

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
Date	Result	VACCINATIONS
<u>25/4/18</u>		<u>Blackish</u> M.O.
		M.O.
		M.O.
Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>25/4/18</u>		<u>Blackish</u> M.O.
<u>30/4/18</u>		M.O.
<u>6/5/18</u>		M.O.

Enlisted on 22nd day of April 1918 at Windsor, Ontario.

CORPS	REG'TL NUMBER	HABITS	DATE
<u>63rd DEPOT BATTERY</u>	<u>33A777</u>		<u>Apr 24/18</u>
Transferred to _____			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

STATION	DATE	DISEASE Attended	RESULT
<u>Petawawa</u>	<u>21-8-18</u>	<u>Nil</u>	<u>A2</u> <u>J.D. Brown capt per rono</u> <u>Edwin L. Pennoch capt same</u>
<u>Petawawa</u>	<u>17/9/18</u>	<u>"</u>	<u>A2</u> <u>J.D. Brown capt</u> <u>W.A. Reddick</u>
<u>Kumuck</u>	<u>2/5/15</u>		

14.13.—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.

**Medical Examination upon leaving the Service
of an Officer fit for general service or a Soldier fit for duty.**

Officers leaving the Service upon being found unfit for general service by a Medical Board, and Soldiers leaving the Service upon being found otherwise than fit for duty by a Medical Board, are not to be reported on this Form.

Rank gunner Name William Maxwell Surname Anderson
 Unit or Corps 2nd Can Tank Battn (If a soldier) Regtl. No. 334777
 Born at Chicago Ill U.S.A. on, date Oct 31, 1886
 Signature (for identification) William Maxwell Anderson

The examination is to be made jointly by two Medical Officers.

1. PHYSIQUE---Any deformity, maiming or lameness? If so, describe. none

Weight 165 lbs.
 Height 5 ft. 9 in.

2. NUTRITION AND DIATHESIS? good

After searching inquiry and thorough examination is any evidence found of disease or impairment of the parts indicated below? If so, describe.

3. NERVOUS SYSTEM? normal

4. RESPIRATORY SYSTEM? normal

5. HEART? normal
 Abnormal Sounds? no
 Abnormal Size? no
 Pulse Rate? 82 Intermittence or Irregularity? no

6. ARTERIES---Any hardening? no

7. DIGESTIVE SYSTEM? normal

8. GENITO-URINARY SYSTEM? normal
 Urinalysis---s.g.? 1020 Reaction? acid Albumen? 0 Sugar? 0

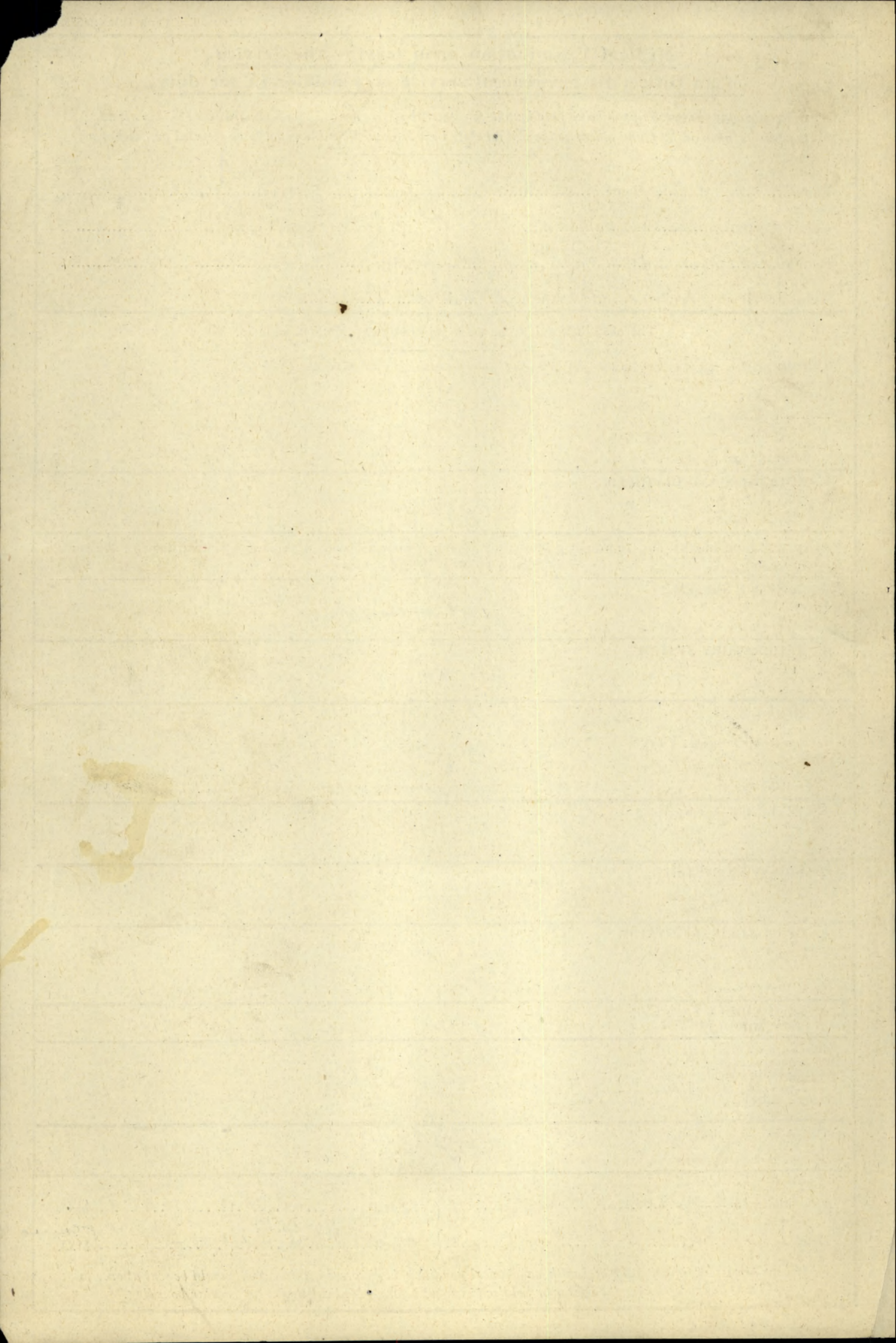
9. SKIN, MIDDLE EAR, EYE, or any other part? normal

10. Is there any evidence of impairment of health or physical condition not mentioned above? If so describe. normal

11. Opinion as to the health and physical condition of the one examined? good

Examined at Kinnel Park Signed J.P. Saward M.O.
 Date Nov. 19, 1918 Signed A.T. Dickson M.O.

If any disease or impairment of health or physical condition is discovered, this report should be sent at once to the O.C. concerned for the Officer or Soldier to be sent before a Medical Board for regular boarding.



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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) ANDERSON W.M. M.D.I.

REGIMENT 2nd Tank Bat. RANK Petitioner No. 334777

Date of Examination in England 5/6/19 Date of Examination in France _____

DIRECTIONS TO DENTAL OFFICERS

1. This form will be made out for each individual at the time of Demobilization in England or France.
2. Figures as per chart will be used to designate teeth concerned.
3. In reference to Partial Dentures the numbers of teeth thereon will be stated



PRESENT DENTAL REQUIREMENTS

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

Fit

HAS HE EVER REFUSED DENTAL TREATMENT?

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

- (a) In Canada *yes.*
- (b) In England
- (c) In France

KINMEL PARK
NORTH WALTON

Signature of Dental Officer *W.C. Procter*
Capt

Faint, illegible markings or bleed-through at the top of the page.

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. 334774 Rank Gunner Surname Anderson
 (Given name in full) William Maxwell
 Unit or Corps 2nd Tank Batt Birthplace Chicago Ill USA

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

1. GENERAL DESCRIPTION:

Physique good Weight 168 lbs. Height 5 ft. 8 in. Colour of Eyes Hazel
 Nutrition good
 Pulse 76
 Condition of arteries 20/1+
 Vision R good Left good
 Hearing (conversational voice) Rt. good ft.
 Left good ft.

Identification marks, scars, or deformities.
 (Give cause and date of origin).
None

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 Genito Urinary System Cardio-Vascular System
 Special Senses Integumentary System Respiratory System
 Disturbance of Mentality Muscular System Digestive System
 Osseous and Joint System Any other general condition

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.

EXAMINATIONS

THIS SECTION FOR USE OVERSEAS—

Examined at Kumilook (Overseas)
Date 23/5/15 Signed W. P. R. M.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 Anderson H. M.

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

THIS SECTION FOR USE IN CANADA—

Examined at (Canada)
Date Signed M.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 a Medical Board.)

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

Fill Only.—Unit, Number, Rank and Name.

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

Casualty Form—Active Service.

250M.—1-16.
H. Q. 1772-39-920.

Unit, Regiment or Corps 63rd DEPOT BATTERY, C.F.A., C.E.F.

Regimental No. 334777 Rank Gunner Name ANDERSON, William Maxwell

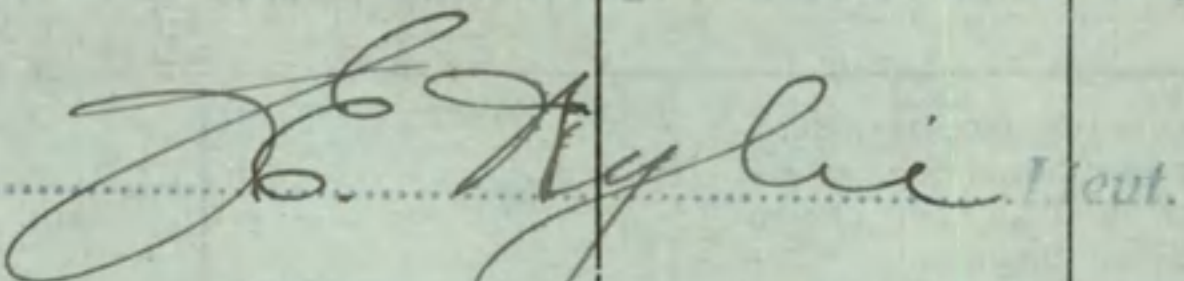
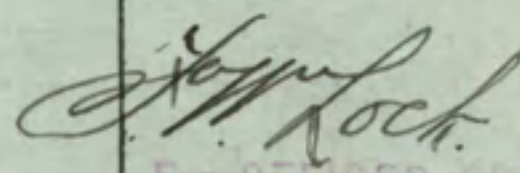
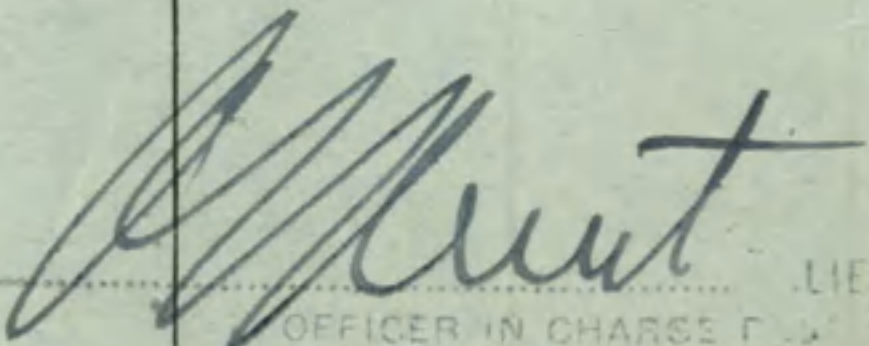
Enlisted (a) 24-4-18 Terms of Service (a) C.E.F., Day W Service reckons from (a) 24/4/18.

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

Extended _____ Re-engaged _____ Qualification (b) Locomotive Fireman
9 years Illinois National Guards U.S.A.,

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				
SEP 20 1918		Transferred 2nd Tank Battalion			<u>Major</u> <u>O. C. 63rd Depot Battery, C. F. A.</u>
		Embarked Canada <u>16-10-18</u>			<u>H. M. I.</u>
		Disembarked England <u>18-10-18</u>			<u>"Victoria</u>
13/12/18	2nd Tank Bn	Y.O.S. M.D. #1.	Phyl.	13/12/18	Pt II #11
		Concentration Camp			Lieut
		Embarked for			" for
		Canada			" M.D. #1

(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				
13/12/18		O.C.M.D.C.W.I. T.O.S. For return to Canada, Rhyt. 19/3/19 D.O. No. 67.			
16-6-19		S.O.S. on Proceeding to Canada ^{exp - mite} Rhyt. Pt II D.O. No. 133			
		 <i>J. H. Hylie</i> Lieut. Officer in Charge D.O. for O.C.M.D.C.W.I.			
23/6/19	MDI	SON & Reg Dep. KPC		23/6/19	DD# 148 Pt II
5/8/19		Attached C.D.D. Buxton for return to Canada, Part 11 Order No. 179			
14/8/19		Ceases to be attached C.D.D. Buxton on proceeding to Canada, Part 11 Order No. 187			
16-8-19		T. O. S. Quebec Depot Clearing Services Command Part 11. Order No. 240 D-28-8-19			
28-8-19		S. O. S. Quebec Depot, Clearing Services Command, on being discharged from the Service under Demob'n. Daily Orders Pt. II No. 240 D-28-8-19			
					 <i>J. H. Hylie</i> CAPT. For OFFICER COMMANDING CANADIAN DISCHARGE DEPOT.
					 <i>J. H. Hylie</i> LIEUT. OFFICER IN CHARGE CLEARING SERVICES COMMAND

C.A.D.C. 500-.

20M-19-2-18.

M.D. 1.

334777

Anderson W.M.

DENTAL CERTIFICATE.

*4th
Co 2nd Regt. Bn*

The following Certificates will be attached to the Medical History Sheets of all Other Ranks being returned to Canada for disposal.

Date of Examination.	Present Dental Condition.	In case of loss or decay of teeth. Is the loss due to wounds, injury or disease directly attributed to Active Service?	Has he ever declined Dental Treatment.	Recommendation.
<i>18-11-18.</i>	<i>Nil.</i>			<i>H Cowen Capt. C.A.D.C.</i>

DENTAL CERTIFICATE

The following Certificates will

be attached to the Medical History Reports of

those ranks being returned to Canada for approval.

Reasons for Examination	Date of Examination	In case of loss or absence of teeth, give the location of wound, injury or disease directly attributable to Active Service	Reasons for Examination	Date of Examination
<p><i>Handwritten notes:</i> 1. [unclear] 2. [unclear] 3. [unclear]</p>				

No. 334777 RANK

Sgt.

NAME *Anderson, W W*

T. O. S. *20-4-18* UNIT

OC-114-20-4-18

63rd Depot Battery

M. D. *1*

PROMOTIONS, TRANSFERS, DISCHARGES, ETC.

PAID
FROM

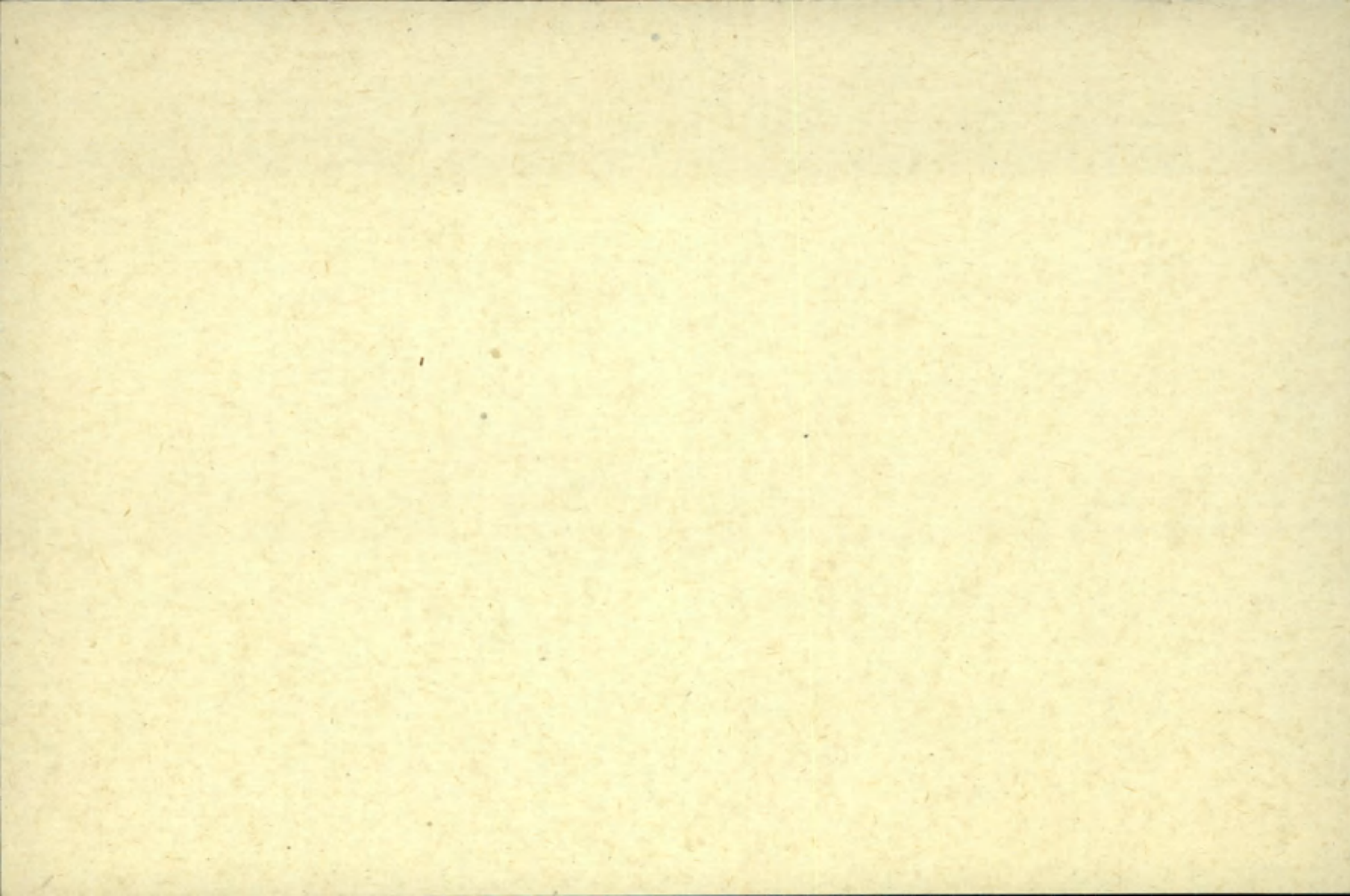
PAID
TO

SIG.
OR
REC'T

PARTICULARS

AUTHORITY

<i>1918</i>	<i>1918</i>	
<i>Apr 20</i>	<i>Apr 30</i>	<i>✓</i>
<i>May</i>		<i>✓</i>
<i>June</i>		<i>✓</i>



REMARKS:-

Number

334777

(ARR)

Rank

Plt B

Surname

ANDERSON

Christian Name

William Maxwell

Units

Can Tank Co

Theatre of War

England

Date of Service

18-10-18

Remarks

6809 Harper Ave Detroit Mich
USA

Latest Address

~~Box 276 Elk Rapids~~
^{13th St}
~~Mich. U.S.A.~~

Roll No.

A Page 44/6

SCR
9/18/23

200m.-6-21. ml.

RANK.....NAME.....

AGE.....SERIAL NO. IN A. AND D. BOOK.....

DATE AND PLACE OF ORIGIN.....

* DUE TO SERVICE
* NOT DUE TO SERVICE

REG. No. 2218	D. D. P.	APR 15 1926
---------------	----------	-------------

HOSPITAL AS AN ADMISSION.....

WHERE FROM).....

IT..... IN CATEGORY.....

INVALID.....

WHERE TO).....

CONDITIONS DIAGNOSED.....

Rank _____ Name **ANDERSON, WILLIAM. MAXWELL**, Reg'l No. **334777**
 Unit **C CO 177 Dft 2nd Tank Bn** If in perm. Corps, }
What Unit? } Married or Single **Single**
 Place and Date of Enlistment **Windsor, Ont. April 20th/18** Place of Birth **Chicago, Ill.**
 Name and Address, Next-of-Kin **Mrs. Anna Anderson**
Elk Rapids, Antrim Co. Michigan, U.S.A. Relationship **Mother**
 Assigned Pay Monthly \$ _____ Payable to _____ Relationship _____
 Separation Allowance \$ _____ Payable to _____ Relationship _____
 Discharge, Date and Place _____ Reason _____ Character _____

M.S.
~~_____~~
~~_____~~

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.				
		<i>Arrived in England.</i>		18 10 18	S S VICTORIA
28 7 18	OTDC	TOS FM 2nd TANK	LOV - 02	18-1-19	pt 28
19-3-19	OTDC <i>mktc Wing I</i> P. Cadre	<i>T.O.S. from 2nd TK. Bⁿ</i>	<i>Pt Rhyll</i>	13-12-18	Pto 67
6-6-19	"	<i>Married with permis of O.C at Liverpool</i>	"	29-5-19	DO 125
19-5-19	S.T.D.	<i>S.O.S to M.D.I</i>	"	9-12-18	DO 139
21-6-19	1 Wing	<i>S.O.S to H. Wing for RTC. with dependants to report on expiration of leave.</i>	"	21-6-19	DO 138
14⁸/19	P.O.D.	<i>Having proceeded to a pool for R.T.C. - S.L.D-37</i>	<i>Buxton</i>	14⁸/19	DO 187

Wing

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.				
28.8.19	CDD	D37 - K - 5 Do 187 is amended to read SOS to Canada	Buxton	14.8.19	Do 199

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

M. F. W. 12a.
 25m.-10-17.
 1772-39-819.

Sheet No. 2
 (Assignee)

Name of Soldier Anderson W. M.

PAYMENTS.

L. L. 28913-M. & D. 8368.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

PAYMENTS.

Name of Soldier.....

Month.	Year.	Cheque No.	Amt.	Remarks.
Aug.	1918			
Sept.				
Oct.				
Nov.		21 86961	30.	
Dec.		21 93201	15	
Jan.	1919	21 103083	15	
Feb.		21 116998	15	
March		21 129569	15	
April		21 282	15	
May		21 9318	15	<i>a/c. trans. to England Eff. 1-7-19.</i>
June		21 16529	15	
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1920			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				

*checked
 on 11/11/19*

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

To Whom

By Whom Assigned *Anderson William Maxwell*

Address

Regtl. No. *334777*

Rank

Snr.

Corps

2nd Tank Bn

Rate *\$15 Oct. 1st 1918*

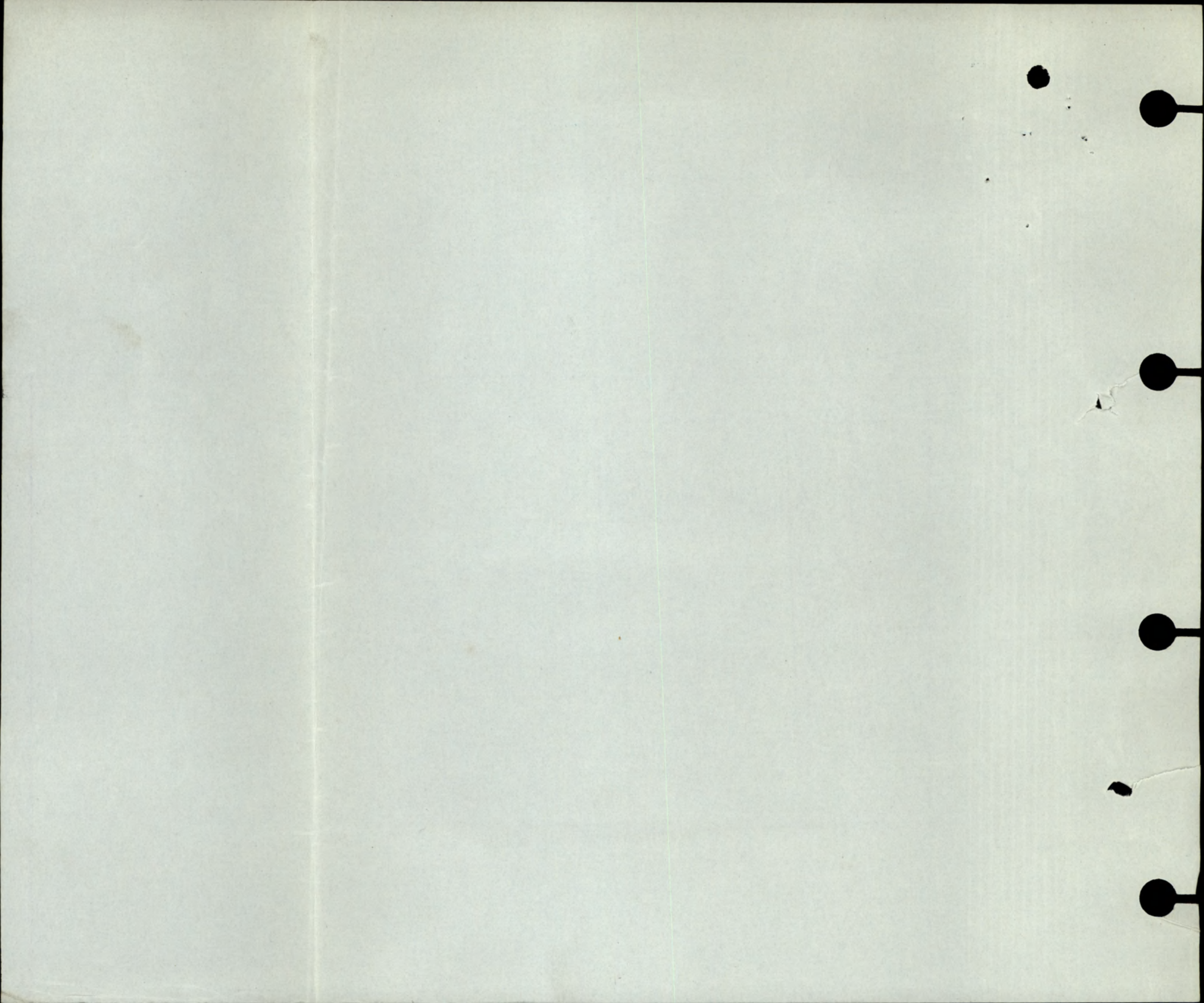
PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

Canadian Pay Office.
 Received by Pay II.
AUG 19 1919
 and Passed for Action to
 Sub-Div. _____ Date _____

A.	_____
B.	_____
C.	_____
D.	_____
E.	_____

[Handwritten signature]



Date of Enlistment *20-4-18*

MILITIA AND DEFENCE

A-6358

Date of Assignment

Separation and Assigned Pay Branch

1st Oct. 1918

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

<i>15⁰⁰</i>			
------------------------	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No. _____

Rank _____ Promoted _____ Reverted _____ Discharge _____

Soldier's Name _____

Battalion *2nd Tank Bn*

Beneficiary _____

Relationship _____

Address _____

Name _____

Address _____

Change of Address _____

1 MRS. ANNA ANDERSON,
BOX 276, ELK RAPIDS,
ANTRIM CO., MICH. U.S.A. 15 15.00

2 % 334777 GNR WILLIAM MAXWELL ANDERSON

3 FIFTEEN DOLLARS

4

ENGLISH

Date	Cheque No.	Amount S/A	Amount A/P	Total
<i>Nov.</i>	<i>3 86961</i>		<i>30.</i>	<i>30.</i>
<i>Dec.</i>	<i>4 93201</i>		<i>15</i>	<i>15</i>
<i>Jan</i>	<i>2 103083</i>		<i>15</i>	<i>15</i>
<i>Feb.</i>	<i>2 116998</i>		<i>15</i>	<i>15</i>
<i>MAR</i>	<i>2 129569</i>		<i>15</i>	<i>15</i>
<i>APR</i>	<i>2 282</i>		<i>15</i>	<i>15</i>
<i>MAY</i>	<i>2 4318</i>		<i>15</i>	<i>15</i>
<i>June.</i>	<i>2 16529</i>		<i>15</i>	<i>15</i>
<i>JUNE</i>	<i>2 21209</i>		<i>15</i>	<i>15</i>
<i>JUL</i>			<i>135</i>	<i>135</i>

REMARKS *0379-W-48*

ap. stopped 11/7/19 8 P.M. G. Cable P2614

Wife in Eng. 986 16/7/19

Mo. 98067.

2695

221209 base.

Acc Closed

Ret'd per... *Tunisian...*

Date *25-8/19* M.F.W. 1875-1/19

Clerk *MD/ J. Collins*

M. F. W. 128.
4008C-5-17-1772 39-1141
L. L. 22320-M. & D. 7993.

AUDITED.

AUTHORITY } *M. D-3-B-11*

FOR } *2-3-11-18*

NEW ACCT. } *E. Wash*

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

1. Triplicate Attestation Paper (M.F.W. 23). or Particulars of Recruit (M.F.W. 133).
2. Casualty Form (A.F.B. 103).
3. Medical History Sheet (M.F.B. 313 or A.F.B. 178).
4. Proceedings of Med. Board (M.F.B. 227 or M.F.W. 129).
5. Dental Certificate (C.A.D. 5009a).
6. Field Conduct Sheet (A.F.B. 122).
7. Proceedings on Discharge (M.F.B. 218a).
8. Discharge Certificate (M.F.W. 31) (Each in special envelope (260M)).
9. Copy of Discharge Certificate (M.F.W. 39a).
10. Dispersal Certificate (C.D. 3).
11. Equipment and Clothing Statement Q.M.G. Form (D.O.S. 2).
12. Last Pay Certificate (P. 851).
13. Pay Book (A.B. 64).
14. War Service Gratuity (Form M.F.W. 2595).
15. Sundry Documents.

Group.....
 Checked by No. *O.A.A.*
 Date *13.8.1919.*

NO OF DEPENDENTS 1

CANADIAN DISCHARGE DEPOT, C.E.F.
 BUXTON, DERBYSHIRE
 AUG 5
 SHORT FORM.

DISPERS'D PRE: *K1*

PROCEEDINGS ON DISCHARGE.
 (Demobilization.)

RELIGION *Bap.*

NEST OF KIN *wife*

1. No.	<i>334777</i>	
2. Rank	<i>Gen</i>	
3. Name	<i>ANDERSON. William Maxwell</i>	
4. Unit	<i>2nd Can Tanks. 63. Batty</i>	
5. Date of Discharge	<i>AUG 28 1919</i>	Place <i>QUEBEC</i>
6. Reason for Discharge	<i>Demobilization</i>	CATEGORY <i>A.</i>
TRADE	<i>Loco Fireman</i>	OCCUPATION GROUP <i>21</i>
SERVICE IN FRANCE	<i>nil</i>	
7. Authority	<i>Routine Order 1420</i>	
8. Proposed Residence after Discharge	<i>St. H Rapids Michigan USA Box 276.</i>	
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>39.</i> <i>Anderson W. M.</i> Signature of Soldier.	
10. CONFIRMATION.	The discharge of the above named man is hereby confirmed. Place <i>QUEBEC</i> Date <i>AUG 25 1919</i> <i>[Red Stamp: Discharge 3-8-19]</i> Signature <i>[Signature]</i> (O. C. Discharging Unit.)	

KINMEL PARK

This ledger sheet is not to be transferred to Canada Section until further advice from Capt. Maxwell

ASSIGNED PAY	ENGLAND or CANADA	SEPARATION ALLOWANCE	ENGLAND or CANADA
EFFECTIVE DATE: 1-10-18	1.7.19	EFFECTIVE DATE: 29/5/19	30.
AMOUNT: 15 ⁰⁰	20 ⁰⁰	AMOUNT: 30.	

NAME: ANDERSON, William Maxwell
NUMBER: 334777

Mrs Anna Anderson (mother)
Box 276,
Elk Rapids, Antrim Co.
Mich, U.S.A.

Anderson

PARTICULARS OF RANK OR APPOINTMENT		
AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
L.P.C. from Canada	1-10-18	Gunner

UNIT AND TRANSFERS
ORIGINAL UNIT: Draft No 177-8-9 (2nd Tank Bn)
DATE ACCOUNT FIRST OPENED: 1-10-18

AUTHORITY	DATE EFFECTIVE	DATE LEGER SHEET T SP'D	UNIT TRANSFERRED TO

Mrs A. Anderson wife
47 Salisbury Lane
Marsh Bootle, Liverpool
Lanc
eff. 1.7.19

Stop eff 1-10-19.

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
16/18	4069	Kinmel Park	19 47				
1919	4103	CCC	25 34 23				
22/7	2225		25 34 23				

DAILY RATES OF PAY AND ALLOWANCES				
AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
L.P.C. from Canada	1	10		

PARTICULARS OF RENDERING NON-EFFECTIVE: *Transferred to Canada eff 1-10-19. Ref N 12384. M.D. 1*

MONTH	PARTICULARS	DR 1	DR 2	DR 3	DR 4	BALANCE
309-18	Transfer to Canada 1/19					10 00
Oct	Pte	34 10				29 10
			1489 T.B. - 29/10	4 87		24 23
Nov	Pte's Pay	33				42 23
		67 10				
Dec		34 10				22 76
			4069 T.B. 16/0/18	19 47		
Jan 19		34 10				60 96
		68 20				
Feb		30 80				
			11388 2 T.B. 22/12	9 73		
			AR 11699 2TB 10-1-19	29 20		
			AR 815 "	4 30		
March	Pte's Pay	34 10				15 00
			1668 "	9 73		
			2002 "	4 87		
			3055 "	9 73		25 30
		64 90				
April	Pte's Pay	33 00				15
			3853 KPE 28/3	9 73		
			430 "	14 60		
May		34 10				15
			1288 "	4 87		
			2412 "	9 73		23 47
		67 10				
			11330 10-6-19 RP.	4 87		38 93
			487			30

A2M
5-6 19
10/19

AUTHORITY
A.P. NUM. ROLL

Copy Cheque N B-10 3440 Rep. Allowance 29/10/30 1918-15-2
Carried forward 32 90

NUMBER 334777 RANK GNR NAME ANDERSON W.M.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4.	DEFERRED	SEPARATION
				Brought forward	487					32 90
				AR 5178 20.6.19 Tanker	2433	End				
June	99			" 3031 26.5.19 "	3893				44 66	
July		33			6813					32 90
Aug		3410		608						
		3410		5137402-3 (2 cheques)			20	20		30
		101		English AP 20th Sept			40			60
				2735 "A" 6 to 6 22/19	2433					
				1603 " 11/19	2433					
		10120			4866		60	20	72 12	90
Sept	St Note 904 - 1st Sept			CR 2191 9/10/19	487					
	1919 chgd 200 paid 15									
	Vide minutes P2CK 20819	5								
		5			487				71 99	

44 66
80 00
48 66
173 32
101 20
72 12

St Note 14/11/19 should be 37