REGIMENTAL DOCUMENTS

Pte NAME ATWOOD ALLISTON GRANT REGT. NO. 282445 UNIT 219th Bn H. Q. FILE NO. X 6666

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W. 2589
100M-11-18
1772-39-1377

B

ATTESTATION PAPER.

No. 282445

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

ORIGINAL

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? Atwood
1a. What are your Christian names? Allston Grant
1b. What is your present address? Clarks Harbour Shel. Co N.S.
2. In what Town, Township or Parish, and in what Country were you born? Clarks Harbour N.S.
3. What is the name of your next-of kin? Maude Susan Atwood
4. What is the address of your next-of-kin? Clarks Harbour Shel. Co N.S.
4a. What is the relationship of your next-of-kin? wife
5. What is the date of your birth? 11 August 1891
6. What is your Trade or Calling? Fisherman
7. Are you married? yes
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? 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

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Allston Grant Atwood, 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.

Allston G Atwood (Signature of Recruit)

Date 8-3-16 191 . W B Lewer (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Allison Grant Atwood, 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.

Allston G Atwood (Signature of Recruit)

Date 8-3-16 191 . W B Lewer (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 Clarke Harbor this Eighth day of March 191 6

M G Nickerson (Signature of Justice)

A J P in and for the county of Shelburne

M. F. W. 13.
600M.—2-16.
H. Q. 1772-89-341.

Description of Alwood Allston Grant on Enlistment.

Clarks Harbor Shelburne Co NS

Apparent Age 24 years ..... months.

(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height		5 ft. 6½ ins.
Chest measurement.	Girth when fully expanded	37 ins.
	Range of expansion	3 ins.
Complexion		Fair
Eyes		Grey
Hair		Brown
Religious denominations.	Church of England	
	Presbyterian	
	Methodist	
	Baptist or Congregationalist	Fr
	Roman Catholic	
	Jewish	
	Other denominations (Denomination to be stated.)	

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 March 2. 1916. .....

Place Clarks Harbor NS ..... Ro W Brown

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.

Allston G. Atwood 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.

..... Lieut. Colonel
Comdg. 219th "Overseas" Highland Bn. C.E.F. (Signature of Officer)

Date Mar 8th 1916

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 282445 (Rank) Private

Name (in full) Alliston Grant Atwood enlisted in

the 219th Battalion

CANADIAN EXPEDITIONARY FORCE at Clarke Harbour on the 8th

day of March 19 16 N.S.

HE served in France

and is now discharged from the service by reason of Medically unfit

THE DESCRIPTION OF THIS SOLDIER on the DATE below is as follows :—

Age 27 years 6 months

Height 5 feet 6½ inches.

Complexion Fair

Eyes Grey

Hair Brown

Marks or Scars Nil

Alliston G Atwood

Signature of Soldier

for [illegible] LIEUT

O.C. DISCHARGE SECTION NO. 6 DISTRICT DEPOT

Issuing Officer

Rank

Appointment

Date of Discharge February 20. 1919

Signed at Halifax N.S. this 12th day of February 19 19

in Military District No. 6.

File Reference No.

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

M. F. W. 39a
200m.—2-18.
H.Q. 1772-39-882

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

No. ..... (Rank) ..... Name .....

Unit .....

Address on Discharge .....

Character and Conduct .....

.....

Former Occupation .....

Special Qualifications of Value in Civil Life .....

.....

Medals and Decorations .....

.....

Remarks .....

.....

Signed at ..... this ..... day of 19

.....
Name of Officer

.....
Rank

.....
Appointment

On demobilization particulars called for on the back of this certificate will not be completed.

Uniform not to be worn after Date of Discharge, unless authority has first been obtained from G. O. C. District.

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DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

OTTAWA, CANADA.

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

If the applicant will enquire at the local Branch of the Canadian Patriotic Fund he will be informed if there is an official who will take this Declaration free of charge.

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 this Declaration is to be returned to THE DISTRICT PAYMASTER OF THE DISTRICT IN WHICH THE SOLDIER WAS DISCHARGED.

1. Christian names Allister Grant 2. Surname Atwood
3. Rank Pte 4. Original Unit 219th Bn 5. Reg. No. 284445
6. Address, in full, to which future payments of gratuity are to be forwarded Clarke Harbor Shelburne Co N.S
7. Date of enlistment in the C.E.F. 8-3-16
8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge Mrs Maud Atwood
9. Relationship of such dependent Wife
10. Address, in full, of such dependent Clarke Harbor Shelburne Co N.S.
11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? No
12. Were you at any time on the strength for pay and allowances of a unit of the C.E.F. which was out of Canada or the United States when such pay and allowances were issuable? If so, give particulars of one such unit and dates of service overseas with such unit:—
Yes - 85th Bn 17-3-17 to 3-7-17
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? No
14. Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service No
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 From 8-3-16
219th Bn (Can & Eng), 17th Res (Eng) 85th Bn (France) N.S.R.S. (Eng) to
16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department No
17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.? No

M.F.W. 2595.
1772—39—1389.
1160—D.P.—250M-12-18.

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

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

20. Have you been issued with a War Service Badge? If so, what class ? ..... No .....

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

22. Are you entitled to receive, or have you received any gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled ..... Not applicable .....

23. (a) Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England ? ..... No .....
(b) If so, was such reversion in consequence of misconduct or inefficiency? ..... Not applicable

24. Are you now serving in the C.E.F.? ..... No ..... If not, give:—(a) Date of discharge ..... February 20. 1919 ..... (b) Reason for discharge ..... being medically unfit .....

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 which you served at the front, and dates of such service with that unit ..... Yes! 85th Bn. 17-3-17 to 3-7-17 .....

27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment? ..... No .....
(b) If so, are you in receipt of full pay and allowances from that Department ? ..... Not applicable

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: Alliston G Atwood

Place of Residence: Clarkes Harbor, Shelburne Co. N.S.

Declared before me at: Halifax, N.S.

This 12th day of February 19 19 R Z Chisholm

Signature of Barrister of the Supreme Court Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner for the Administration of Oaths.

A Commissioner of the Supreme Court in and for the Province of Nova Scotia.

POST DISCHARGE PAY.

Date paid.	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
	Allowed 28/2/18		153	280 00
9/e Clear 1st payment P.D.P. paid			5 Mo.	147

Certified Correct W W Pugsley CAPT

District Paymaster.

ORIGINAL

B C263/17 D

282445

MEDICAL HISTORY SHEET.

ORIGINAL

Surname Alwood Christian Name Allistor Grout

Examined on 7th day of March 1916 at Clarks Harbour

Approved by Robt W Brown

Birthplace City or Town ____ County Shelburne

Rank ____ M.O.

Apparent age 30

Trade or occupation Tinsmith

Height 5 Feet 6½ Inches.

Weight 149 Lbs.

Chest measurement Minimum 34 inches. Maximum expansion 37 inches.

Physical development Good

Small-Pox Marks None

Vaccination Marks Arm Right. Left. Number None

When Vaccinated last —

(a) Marks indicating congenital peculiarities or previous disease None

(b) Slight defects but not sufficient to cause rejection None

8 March

Date.	Fit or Unfit.	Examined for Re-engagement.
		6 JUL 1917
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date.	Result.	Vaccinations.
5-7-16	Good	Lt Churchill M.O.
		M.O.
		M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.
11-5-16	Good	Lt. Churchill M.O.
5-6-16	Good	L.R.C. M.O.
11/11/16	T.A.B	L.R.C. M.O.

Enlisted on 29th day of February 1916 at Clarks Harbour

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	219th. "Overseas" Highland B'n. C. E. F. 85th Bn	282445		29-2-16 8/3/16
Transferred to	17th Res. Bn			16-3-17
	R. S. R. D			10/2/17
				3/7/17

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
Monks Harbour Imptched Bramshott.	1.9.17 7/5/18 25 NOV 1918	Trench Fever Wastage. To recruit Trench Fever	C.H. (2 months) Invalided to Canada

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.

400M.—1-16.
H. Q. 1772-39-439.

CANADIAN

Surname Atwood Christian Name Allistair G.

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital. Day	Month	Year	Discharge from Hospital. Day	Month	Year	DISEASE.	Number of days in Hospital	Remarks on nature of the disease: how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
HUDDERSFIELD No. ..... Date ..... WAR HOSPITAL		3	7	17	12	7	17	Trench Fever	10	Transferred to Can. Conv. H. Monks Horton.	[illegible]
Canadian Convalescent Hospital, Monks Horton, Kent.		12	7	17	11	9	17	— " —	66	Disch. to Hosp. Rep. Category C.	[illegible] Registrar. Capt. C.A.M.C.

A.F.B. 179, Canada.

Regt: No 222445..... Rank Pte... Surname ..ATWOOD.....Christian ALLISTON GRANT.

Unit or Corps (a) Overseas from United Kingdom ..85th. Bttn.....
(b) In United Kingdom .....N.S.. D.. Bn.....

Born at Clark's Harbour. County or Province ..Shedbourne, Co... Country Canada....

Date of Birth - Day 11th.. Month ..August,..Year 1890.. Age 28-8 mos.....

Joined at .....Clark's Harbour,..N.S... Date ....Feb.. 29-1916.....

Former trade or Occupation ....TINSMITH.....

Permanent marks or any peculiarity that will serve for identification: One vacc Mark, right arm.

Height - Ft..5... Inches .7..... Color of Eyes ...Brown.....

Signature of Soldier (for identification purposes) .Allisto. Grant.... Atwood .

MEDICAL REPORT.

1. Disability.

Group the disabilities, placing those resulting from separate causes in separate groups.

Disabilities Group (a) .....TRENCH FEVER.....

Disabilities Group (b) .....N.A.....

Disabilities Group (c) .....N.A.....

2. CAUSE OF DISABILITY:

	Place of Origin	Date of origin.
(I) (a) As to group above.	Active Service, Vimy	June, 14-1917
(II) (b) As to Group above.	N.A.	
(III) (c) As to Group above.	N.A.	

3. Is the disability due to disease contracted or injuries received prior to Active Service? No.

(I) As to Group (a) Above? No..... Is, yes, has Active Service Aggravated it? ..N.A.....

(II) As to Group (b) above? N.A.... If yes, has Active Service Aggravated it?....N.A.....

(III) As to Group (c) above? N.A.... If yes, has Active Service Aggravated it ....N.A.....

4. Is the disability due to disease contracted or injuries received while on Active Service? Yes.

(I) As to Group (a) above? Yes.

(II) As to Group (b) above? N.A.

(III) As to Group (c) above? N.A.

PART TWO A.F.B. 179.

5. MEDICAL HISTORY Arrived in England November 17th, 1816. and spent 3 ½ Months in France.

Was sent to England suffering fron Trench Fever and was over two months in Hospital .

Before going in army he always had good health.

6. PRESENT CONDITION:

Man states that at most times he feels fairly ~~good~~ well, but at preiods he has a return of pain in limbs. Cannot do the work he formerly did necause he finds that after exertion he requires rest and is very easily tired out.

EXAMINATION; Man looks to be in good condition, Pulse is weak rapid and easily compressible, Circulatory, respiratory, Nervous, Genito-Urinary, Gastro intestinal and other Systems show no physical signs of disease.

7. OPERATION:

(I) Was one performed? No

(II) If so, state what. N.A.

(III) Was one advised and declined? No.

NOTE: Loss of teeth on or ~~im~~medicately after active service should be attributed thereto, unless there is evidence to the contrary.

8. (I) Is there loss or decay of teeth attributable to Active Service? No.

(II) Is so, describe. N.A.

9. DO YOU RECOMMEND:

(a) Fit for Duty? (State Category) B-2 Yes.

(b) Invalid to Canada? NO

(c) Discharge from Service as permanently unfit? NO/

Date of Report Nova. 25-1918 Signed N Remers, Capt .C.A.M.C.
O. in Medical Charge of case.

Station BRAMSHOTT

I have satisfied myself of the general accuracy of the above Report and concur therein, except Not on Hospital.

(O. i/c Hospital) Strike out
(S.M.O. Brigade) one of these

Dated at Station, on 19

PART FOUR, A. F. B. 179.

19. RECOMMENDATIONS:

(a) Fit for duty? (State Category) **Yes, B-2**

(b) Invalid to Canada? **No.**

(c) Discharge from Service asppermanently unfit?

DATE OF BOARD **25 November, 1918**

Signature of the Board

H. W Sutton, Major, President.

Chas. P. Jonton. Capt.

Station **BRAMSHOTT.**

Approved **J.W. Bridges.** for A.D.M.S. .....

Dated at **Bramshott.** Station **25 November, 1918**

STATEMENT OF SOLDIER

(This is to be completed only in the case of the Soldier taking his discharge in England.) Sections 1, 2, 5 and 6 are to be read to the Soldier.)

I, the undersigned, **A.G. Atkwood.** have heard the description of my disability read, and am satisfied (or not satisfied) with it. (If ~~dissatisfied~~, state should follow. I complain in addition of:

Allison Grant Atwwood.
Signature of Soldier examined.

CERTIFIED TRUE COPY.

Major,
for D/A.D.M.S., ADMIN., LD6.

13-3-19

PART THREE A. F. B. 179.

PROCEEDINGS OF A MEDICAL BOARD OF THE SOLDIER MENTIONED IN PART I

10. Is the disability fully described in Part I (1)? Yes.
If not, describe it. -Yes.

11. Is the cause of the disability fully described in Part I (2)?
If not, describe it. Yes.

12. From the Medical Information now adduced, was the disability caused or aggravated by:	Negligence of (a) the soldier	Caused? NO	Aggravated?
	Misconduct of (b) the soldier	Caused? NO	Aggravated?

13. THE ENTIRE DISABILITY: Without regard to his regular occupation to what extent is his capacity lessened at present for earning a full livlihood in the general market for untrained labor.
(Estimate at none, 5%, 10%, 15%, 20%, etc.) 10 %

14. THE DISABILITY DUE TO SERVICE: (See Part 1 (3). Aggravation on Active Service of a disability existing previous to joining is to be included in this estimate).

What part of the entire disability estimated next abofe (13) is due to causes arising during Active Service?
(Estimate at none, 1/10, 2/10, 3/10, etc. or all) All.

15. Permanency of the Disability due to Service estimated next above in (14.)

(I) Is it permanent? No.

(II) If not permanent, what is its probable minimum duration (in months). Three months,

16. If an operation was advised and declined, do you consider the refusal to have been reasonable? None advised.

17. Can the former trade or occupation be resumed? Yes.

18. REMARKS:

Boarded under Authority A.G. Telegram 9083 11-11-18

Condition unchanged.
G.J. McNally,
Halifax,N.S. for A.D.M.S. M.D.#.6

Forms
I. 1237
12

Army Form I. 1237.

Boyd 4

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
T 3-569	282445	pte.	Atwood	Alston G.
Year: 1917	Unit: 85th Bn	Age: 27	Service: 1s 1/12 France 3/12	

Station and Date.

Disease Trench Fever

Trimnick

CAN. CONV. HOSPITAL, MONKS HORTON, KENT

12-7-17 Reported sick June 16th 1917 - Lens sector - Complains of pains in legs, back, head, shin bones aching - Chills & fever, headache.

Sent to St. John's Amb. Estaples - 2 weeks - then to Huddersfield War Hosp. - 10 days -

Arrived Monks Horton July 12th 1917.

Present Condition

Feet examined - bottures with callus on sides of feet.

Pains in legs & arms - headache

Refer Asthus conv. - Walmer -

A H Christie Capt Can

BRITISH WAR HOSPITAL, THE BEACH, WALMER.

27/7/17. July 28 - Slow march. Lt. physical drist. Linda, Sal.

Aug 4. Massage. Aspirin at night.

E & W Wells

Monks Horton

29. 8. 17 Still complains of pains in legs & shoulders

Board - Short Leave.

A H Christie Capt

1-9-17 Boarded & Bad Form

Finding C II - Two months

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

(44502) Wt.W 11203—M 1150. 1,450,000. 6/12 16. C.F.& S. Forms/I. 1237/12. (E239)

P.T.O.

Station and Date.	

Forms
I. 1237
12

D

Army Form I. 1237.

MEDICAL CASE SHEET.*

Baptist

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	883445	Pte	Atwood	Alexander

Year	Unit.	Age.	Service.
	5th Canadians	24	15 months

Station and Date.

WAR HOSPITAL
3 JUL 1917
HUDDERSFIELD.

Disease Trench Fever

Has been ill 18 days with pain in head & limbs with rigors.
R.C. Chaplain of same has head & legs no cough temp. normal. no rash.

6/7/17 Remanded to Canadian Hospital
Bellairs

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

(44502) Wt.W 11203—M 1150. 1,450,000 6/12 16. C.F.&S. Forms/I. 1237/12. (E239)

P.T.O.

Station
and Date.

F[redacted] D.M.S. 1394
50M 11478-17-4-17.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at [illegible] 1917.

No. [illegible] Rank [illegible] Name [illegible]

Local Unit 17th Res. Bn Overseas Unit [illegible] Age [illegible]

Examination held at [illegible]

DISABILITY.
Overseas-Local
(SCRATCH ONE OUT).

14.6.17

PRESENT CONDITION.

In France 3½ mths. Invalided with above disability 3/7/17
Complains of muscular pains in legs & shoulders. Pulse & still weak
Says he has headaches, & sleep is poor.
Sweats easily.

BOARD RECOMMENDS :-

1. Fit for Duty ~~Fit~~ (for 2 months)
2. Fit for duty after B II L.R.O. 2799 weeks' physical training.
3. Fit for Temporary Base Duty ..... weeks
4. Fit for Permanent Base Duty .....
5. Discharge .....

Signatures :-

(..... President.
(..... Members
(.....
(.....

APPROVED

Dated 3 SEP 1917 1917. .....For A.D.M.S.

PROCEEDINGS OF A MEDICAL BOARD.

Post Office ..... Date .....

No. ..... Rank ..... Name .....

Dated at ..... this ..... day of ..... 191..

PRESENT CONDITION.

(Duration one out)

DISABILITY

Examination held at .....

Board ..... weeks, previous examination.

BOARD RECOMMENDS :-

1. Fit for duty .....

2. Fit for duty after ..... weeks, previous examination.

3. Fit for temporary Base Duty .....

4. Fit for Permanent Base Duty .....

5. Discharge .....

Grounds :-

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.

---

(1) Name of Overseas Unit which Soldier joins 219th S.S. Bn. C.E.F.

(2) Regimental Number 282445

(3) Full Name of Soldier Atwood Allister Grant.

(4) Place of Birth Clarks Harbor Shelburne Co. N.S.

(5) Are you married, or not ? Yes.

(6) If married, state,
(a) Full name of your wife Susan Maude Atwood

(b) Present Postal Address Clarks Harbor. Shelburne Co. N.S.

(7) Are you a widower ?

(8) Have you any children ? Yes

If so, give number of boys and girls Two Girls

Also their names and ages

Melba — 2 Years

Evelyn — 8 Months

M. F. W. 67.

300M.—5-16.
1772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive ? Yes.

If so, state name and address David Atwood – Clarks Harbor N.S.

(10) Is your Mother alive ? Yes

If so, state name and address Mrs Isadora Atwood Clarks Harbor. Shelburne Co N.S.

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

Are you her sole support, or not ?.....

(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.

.....

(15) Are you insured ? No / Yes.

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

Have you made arrangements for payment of your Insurance premium.....

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

W. Scott Lieut. Colonel.
Comdg. 219th "Overseas" Highland Bn. C.E.F.
Officer Commanding.

Date August – 12. 1916.

219th. OVERSEAS HIGHLAND BATTALION
ORDERLY ROOM
AUG 28 1916
No.....
E.

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

This form to be used for all Ranks (Vide Articles 122, 130 and 141, Financial Instructions, 25715c, C.E.F., 1916).

Regimental No. 282445 Rank Pte. Name Atwood A.G.

Corps C.T.S. who was* Discharged.

On 20-2-19 191...., to .....

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1/12/18 191....

to 20-2-19 191...., the inclusive date of transfer or discharge.

Dr.	$	c.	Cr.	$	c.
Bal. Dr. from prev. month L.P.C.	84	48	Balance Cr. from prev. month	11	15
Advances by Cheques No.			Regt'l. Pay 82 days at $ 1 00 c.	82	00
No. War Service Grat.	70	00	Field Allow. 82 days at $ 10 c.	8	20
~~Assigned~~ Pay and Sep'n Allce. No. 14452	30	00	Separation Allowances* (Monthly)	30	00
Other charges Rtl. Fund.		05	Other Allowances* Clo. Allee.	35	00
Payment on transfer or discharge No. 14453	50	52	Other Credits*		
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)	68	70
Total	235	05	Total	235	05

*Give particulars.

A monthly stoppage of $ 20.00 (†) has been chgd. (‡) been paid on account of Assigned Pay for the month of Jan. 1919 191... and Sep'n Allce. for month of Feb. 1919 191... (to) Assignee Mrs. H. Atwood

(Address) Clarke's Harbour N.S.

(†) Insert amount to be assigned, whether it has been paid or not.
(‡) Insert "not" if amount has not been paid for period of account.

On Transfer of an Officer.

Out Allowance of $..... has been paid by Paymaster, Military District No. .....

REMARKS:—

State (1) date of enlistment .....

(2) if married and if a Separation Allowance Card has been submitted yes to 28-2-19

(3) cause of discharge Demob. authority D.O. 43

(4) authority for transfer .....

NOTE.—Separation Allowance and Assigned Pay Card and Index Card (M.F.W. 71) are to accompany the original Last Pay Certificate on transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay List of the Unit.

Date 26/2/19

Place Halifax, N.S.

W W Pringle CAPT
Paymaster No. 6 District Depot
Paymaster.

N.B.—For purposes of transfer this form is to be made out in quadruplicate. Original copy to paymaster of new unit, duplicate to District Paymaster; triplicate to accompany the pay list at the end of the month, and quadruplicate for retention as a record.

For purposes of discharge it is to be made out in triplicate. Original copy to accompany discharge papers; duplicate to accompany pay list at the end of the month, and triplicate for retention as a record.

If a man on discharge is entitled to three months' Post Discharge Pay, Last Pay certificate will be made out in quadruplicate. The original Last Pay Certificate will be forwarded with other documents to Paymaster Post Discharge Pay and triplicate, with his discharge documents.

No. 6 DISTRICT DEPOT RECORDS OFFICE MAR 3 1919 A-272

M. F. W. 44.

H.Q. 1772-39-903.
100M-9-18. D.P. 874.

Army Form B. 103. Regimental Number 282445

Casualty Form—Active Service.

Regiment or Corps 219th O.S. Bn. C.E.F.

Rank Pte Surname Atwood Christian Name Allison Grant

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

Enlisted (a) 8.3.16 Terms of Service (a) no fee Service reckons from (a) 8.3.16

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

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

or Corps Trade and Rate .....

Occupation Tinsmith ..... Signature of Officer

Report: Date	Report: From whom received	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
		~~Embarked~~ ...			
		~~Disembarked~~ ...			
20.8.18	N.S.R.D.	S.O.S. to Can. School of Musketry Mytchett	B'Shott	16.7.18	Pt II no. 20
					Geo. Duckett LIEUT, OFFICER i/c RECORDS, NOVA SCOTIA REGTL. DEPOT.
1-11-18	N.S.R.D.	S.O.S. Can. Musk. Camp Mytchett	Mytchett	19-8-18	Pt II orders no 1.
					H. J. Gabb Capt ADJT CANADIAN MUSKETRY CAMP MYTCHETT.
22-11-18	C.M.C.	S.O.S.			Pt II orders no 14 d/ 22-11-18
					H. J. Gabb Capt CANADIAN MUSKETRY CAMP MYTCHETT.

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

(b) Signaller, Shoeing-Smith, &c

(17591.) Wt. W 1887—P 1124. 1,000,000. 6/18. D & S. Form B/103. (E. 1256.)

[P.T.O.

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				
23.11.18	NSRD	T.O.S and posted to Depot Coy	B'Slatt	22.11.18	DO 285
		SoS on transfer from [illegible] Canada			Geo. Duckett LIEUT. OFFICER i/c RECORDS. NOVA SCOTIA REGTL. DEPOT.
5.12.18	NSRD	On Command CCD	Buxton	6.12.18	DO 296 Geo. Duckett Jr LIEUT. OFFICER i/c RECORDS, NOVA SCOTIA REGTL. DEPOT.
7/12/18		Attached C.D.D. Buxton for return to Canada Part 11 Order No 290 Ceases to be attached C.D.D. Buxton on embarking for Canada Maurice Oliver Lt. for Lt. Co Commanding Canadian Discharge Depot			
12/1/19		S Discharge Canada Sailing No 4 R M Hammond, Lieut			
12/1/19		Embarked for Canada			Kennel Park.
12.1.19	O'seas. T/O/S. No. 6 D.D. Hlfx Casy Co.			22.1.19	DO 29 A M Ferguson Lieut ASST. ADJT. No. 6 DISTRICT DEPOT
20-2-19	Discharged at Halifax				DO 43 C W MacAloney CAPTAIN. O. C. DISCHARGE SECTION No. 6 DISTRICT DEPOT

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

M. F. W. 54. (A. F. B. 103.)
250M.—1-16.
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps (4) 219th O.S.H.Bn C.E.F.

Regimental No. (1) 282445 Rank (2) Private Name (3) Atwood Alliston Grant

Enlisted (a) (5) ~~29/2/16~~ 8/3/16 Terms of Service (a) (6) D of W. #6 ~~[illegible]~~ (7) Service reckons from (a) ~~29/2/16~~ 8/3/16

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) (8) Tinsmith E.W.

Report: Date	Report: From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36. or other official documents.
		Embarked Canada	Halifax	12-10-16	
		Disembarked England	Liverpool	18-10-16	
28-12-16	219th	Transferred to 85th Battn	Witley	28-12-16	Part II Order #251 [illegible] Lieut. Asst Adjt 219th. "Overseas" Highland B'n. C.E.F.
28-12-16	85th Bn C.D.	Taken on strength 85th Bn C.D.	Witley	28-12-16	Part II D.O. No 61 [illegible] Lt. Colonel Comdg 85th "Overseas" [illegible] C.E.F. (Nova Scotia Engineers)
		~~Proceeded overseas for service~~			
10/2/17	O.C. 85th Bn.	Transferred to 17th Res Bn.	Witley	10/2/17	Part II D.O. No 36
10-2-17	O.C. 17th B'n	Taken on the strength	Bramshott	10-2-17	Part II Orders "35" [illegible] For Officer Comdg 85th. Overseas Bn. C.E.F. [illegible] Asst. Adjt. 17th Canadian Res. Batt.

(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.

CERTIFIED CORRECT.
30 MAR 1917
CAN. RECORDS, LONDON.

Report Date	Report From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213 Army Form A. 36, or other official documents.
16-3-17	O.C. 17th	Proceeded overseas for service with 85th Bn.	Bramshott	16-3-17	Part 11 Order 64. Lieut., Asst. Adjt. 17th Canadian Res. Batt
17-3-17	C.B.D.	Arrived in France	Havre	17-3-17	N.Roll.
17-3-17	"	T.O.S. C.B.D.	BASE	17-3-17	N.Roll.
17-3-17	"	" 85th Battalion	"	17-3-17	N.R.Pt 11,0,42 d/-21-3-17
17-3-17	"	Left for 4th Ent. Batt.	Field	19-3-17	N.Roll.
15.4.17	85 Bn.	Joined Unit	"	5.4.17	wire, DBS.19
19.6.17	St. John Amb. Bde	French fever adm	St. John Amb. Bde.	18.6.17	W3084/3219.
23.6.17	O.C. 85 Bn.	Sick To	F. Amb.	18.6.17	B213. DBS 48.
3.7.17	O.C. H/S. Princess Elizabeth	Invalided Sick & posted to N.S.R.D. Bramshott	England	3.7.17	W3083/A9722. Pt. II O 86 d/-10.7.17
			J M Anderson		Lieut. for Lt-Col., A. A. G. Canadian Section G. H. Q. 3rd Echelon. B. E. F.
11-7-17	NSRD	TOS from 85th Bn Pass Cas	B'shott.	3-7-17	Pt II 124. R.A. 19/7
					J A Macdonald LIEUT: FOR LT. COL. I/C RECORDS. C.O.M.F.
15-9-17	NSRD	Posted to Depot Coy	Bramshott	15-9-17	Pt II D.O. 189
2/10/17	"	Comd to Longmoor	"	2/10/17	P. II 204
2-11-17	N.S.R.D.	Cease to be shown on Cmd to Longmoor & shown On Cmd To Mychett 30-10-17.	"	1-11-17	Pt.2 D.O.230 d/1-11-17 para.3

R—122
S.401—50.000—21-10-16.

A.G.R. Rank Name ATWOOD, Alliston - GRANT Reg'l No. 282445 -

Unit 219th Bn. If in perm. Corps, What Unit? Married or Single . Married -

Place and Date of Enlistment Clarks Harbor, 8th March, 1916. Place of Birth Clarks Harbor N.S. -

Name and Address, Next-of-Kin Maude Susan Atwood, -

Clarks Harbour, Shel. Co., N.S., Can. - Relationship Wife. -

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

N/E. R.B. No 6791
File R.C.
Category OR CAN

O/S

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.
		Arrived in England S.S. Olympic 18/10/16			
28 DEC 1916		219th Bn, S O S Trans to 85 Bn, Witley	28 DEC 1916		Pt11*DO*251
28 DEC 1916		85th Bn, T O S Trans from 219 Bn, Witley		Dec. 28th, 1916	*Pt11*DO*61
10-2-17.	" "	S.O.S. to 17th Res Bn.	"	10-2-17.	Pt II D.O. 36
10.2.17	17th Res	To Strans'd from 85th Bn	Bramshott	10.2.17	Pt II D/O 35
16-3-17	do	S of S. to 85 Batter.	do	16-3-17	" 64
21-3-17	85th Bn	TOS from 17th Res Bn	Field	17-3-17	— 42
26.6.17	✓	St Johns. Amb. Bde. Hosp.	Etaples	18.6.17	C.L.A 85: Trench Fever.
7.7.17	✓	No 2 Mil Hosp. Old Park.	Canterbury.	3.7.17	C.L. B.99.
10.7.17	✓	Inval. Sick Posted to NSRD.	Field.	3.7.17	Pt II O 86.
					*Pt II 124 d/11 7/17 NSRD.

A.F.B. 103 CHECKED
WB. 27 MAR 1917

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.
19.7.17	85th Bn	Can Convt Hosp'l	Monks Horton	13.7.17	CL B 108 Trench Fever.
17.9.17	NSR	Desch'd from Hosp'l	"	13.9.17	" 13 "
20.8.18.	Do	S.O.S. to ~~Can School of Musketry~~ Can Musketry Camp			Amendment NSRD Pts DO. 232 D/23 9/18
		~~Mytchett Farnborough~~	Pte Bramshott	16.7.18.	DO. 203. C M C Pts DO 1 D/5/9/18 Pte
22-11-18	C M. Cp	S O S to N S R D.	" Mytchett	22-11-18	14 & NSRD. DO. 285 D/23.11.18.
6-12.18	N.S.R.D.	On Command CDD. Buxton	" B'shott	6.12.18	DO 296
4-2-19	N.S.R.D.	Ceases O/C to C. C. D. Buxton & S.O.S. to C. E. F. Canada	" Ripon	12-1-19	" 26.

C.A.D.C. 5009. 50M-3-5-18.

CANADIAN ARMY DENTAL CORPS.

DENTAL CERTIFICATE.

NOTE:- This form will be attached to the Medical History sheet of each Other Rank being returned to Canada for disposal.

REGTL. No.	* NAME	RANK	UNIT
282445	ATWOOD. AG.	PTE.	N.S.R.D

Date of Examination	25-11-18
Present Dental Condition	FAIR.
In case of loss, or decay of teeth, is the loss due to wounds, injury, or disease, directly attributable to Active Service?	YES
Has he ever declined Dental Treatment?	NO
Recommendation	3 FILLINGS.

Date 25 NOV. 1918

Station

Signature of Examining Officer ... J. M. James ... Capt. C.A.D.C.

* Name should be entered in block letters.

P.878. Extract D[redacted] No. 4 Unit.- GD. Date:-

Reg. No.	Rank	MAILING LIST Name	Struck off Strength of O.M.F. of C. on transfer to C.E.F. Canada. MD 2..
288445 282446	PTE	ATWOOD Canada AJ	12/1/19

Acted on Ledger Ck.

Copied by_____ Checked_____ Date_____

L. L. Job 95618 & D. 6555.

1-3-16

192

MILITIA AND DEFENCE

M. F. W. 11.
15m.—3-16.
H. Q. 1772-39-818.

SEPARATION ALLOWANCE

Name Maud S. Atwood.

Address Clarks Harbor
Shelburne. Co.
N.S.

Relation to Soldier wife, child or mother — Wife.

Name of Soldier Atwood. Alliston G

Regtl. No. 282445

Rank Pte.

Corps 219 Batt.n.

To what Corps belonging when called out

PAYMENTS

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

CONSOLIDATED ACCOUNT 2

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

M. F. W. 11a.
15m.—3-16.
H. Q. 1772-39-818.

Sheet No. 2. Maud S. Attwood Wife

PAYMENTS

Name of Soldier Attwood Alliston G

Pte 282445

L. L. Job 95618—M. & D. 6555.

Month.	Year.	Cheque No.	Amt.		Pte.	Remarks.
April	1916	T 1759	40		40	
May		R 6220	20		20	
June		A 2033	20		20	
July		S 9800	20		20	
Aug.		B 10816	20	-	20	
Sept.		H 14921	20		20	
Oct.		H 18222	20		20	
Nov.		H 20929	20		20	
Dec.		H 24287	20		20	
Jan.	1917	H 27636	20		20	
Feb.		H 30794	20		20	
March		H 33928	20		20	
April		I 205	20		20	
May		I 3398	20	300	20	
June		J 6423	20		20	
July		I 9871	20		20	
Aug.		K 13297	20		T	
Sept.		J 16338	20		B	F.M. 380
Oct.			20		m	
Nov.						
Dec.						
Jan.	1918					
Feb.						
March						
April						
May						
June						
July						

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

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.				

L-L. Job 5470—M. & D. 6888

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12
50m.—7-16
H.Q. 1772-39-819

Wife

To Whom Mrs. M. A. Atwood

Address Clarks Harbor
N. S.

By Whom Assigned Atwood A. S.

Regtl. No. 282445

Rank Pte

Corps 219 Bn

Rate $20 Oct 1 - 1916

A.S.B. 70927 - 29-11-16

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				

CONSOLIDATED ACCOUNT 1

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a.
50m.—7-16
1772—39—819.

Sheet No. 2. Mrs M. L. Atwood Wife
(Assignee)

Name of Soldier Atwood A. G.

L. L. Job 5470—Req. 6888.

282445 Pte 219 Bn

$20 Oct 1/16 Remarks. A.S.B. 70927-29-11-16

Month.	Year.	Cheque No.	Amt.	
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				60.00 Dec
Jan.	1917	37361	80	80.00 ~~Future~~ Jan
Feb.		42673	20	20 Future (JW)
March		47806	20	20 L
April		4488	20	20 E.
May		6388	20	
June		12980	20	20 E.
July		19839	20	S
Aug.		27468	20	B
Sept.		33920	20	8
Oct.				240.00 P.G.G.
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

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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.				

REGT'L No. 282445

H. Q. FILE No. 649.

NAME Atwood, A. G.

RANK AND CORPS Pte. 85th Bn (4th CD)

FOLLOWS No.

FOLLOWS

CABLE		NATURE OF CASUALTY
NO.	DATE	

L. L. 20497—M. & D. 7908

M. F. W. 42—50M.—5-17.
H. Q. 1772-39-893.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
A 85.	St. John's Amb. Bde: Etaples	18-6-17	Trench Fever (Sev) (Sev)
B99	War: Huddersfield	3-7-17	" "
B108.	Et " Can. Conv: " Monks Horton.	13-7-17	" "
B. 13.	Discharged.	13-9-17.	" " ") Nova Scotia Reg

FORM R. 149.
7106—250m—7/2/17.

Name ATWOOD. *Rank* PRIVATE. *Reg. No.* 282445

Unit Alliston, Grant, 85th. Battalion.

Next of Kin CANADA.

Date 1917.	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
18-6.	St. John's Amb. Bde. H.	Etaples.	Trench Fever.	A85.		
3-7.	The W.H. Huddersfield.		-do-	B99.		
13-7	C.C. Hosp. Monks	Horton	do	B108.		
13-9-17	DISCHARGED (R224. 14th.)		D.	1313.		

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

SURNAME. Atwood

CHRISTIAN NAMES Allison Grant

REGL. No. 282445 RANK Pte.

UNIT 219th Bn.

FORMER CORPS nil

CARD NO. 6

Dis 30-2-19 6 mu
DO 43 fol 2-19 #6 AD

NEXT OF KIN.

NAMES IN FULL Atwood, Mrs. Maud S.

RELATIONSHIP TO SOLDIER wife

ADDRESS Clarks Harbor, Shelburne Co., N.S.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada Clarks Harbor N.S. DATE Aug 11th 1891

PLACE OF ATTESTATION Clarks Harbor, N.S. DATE Mar. 8th 1916

Sailed from Halifax Per S.S. "Olympic" 12/10/16

R/C 25-1-19 256 72 Pte

L L. 94504. M. & D. 6512. M. F. W. 22. 250M.—2-16. H. Q. 1772-39-339.

MARRIED Yes. SINGLE WIDOWER

TRADE OR CALLING Sinsmith RELIGION Baptist

DESCRIPTION.

APPARENT AGE 24 YEARS — MONTHS

HEIGHT 5 FEET 6½ INCHES

CHEST MEASUREMENT 37 INCHES EXPANSION 3 INCHES

COMPLEXION Fair EYES Grey HAIR Brown.

DISTINGUISHING MARKS not stated.

MEDICAL EXAMINATION. PLACE Clarkes Harbor N.S. DATE Mar. 2nd 1916

Present address Clarks Harbor, N.S

No. 282445 Rank Pte. Name Atwood Alliston G.

T. O. S. 29-2-16 D. O. 220 Unit 219th Battalion, C. E. F.
1-27-3-16.

M. D. 6.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916	1916			
Feb. 29	Mar. 31	X.		
apl		V		
may		V		
June		V		
July				
aug		V		
Sept		V		
Oct		V		

Number 282443 Rank Pte

Surname ATWOOD

Christian Name Allston Grant

Units 85th Bn Can Inf Theatre of War France

Date of Service 17-3-17

Remarks

Latest Address Clarks Harbour
Shelburne Co. N.S

Roll No. B. Page 22096.

10m.-8-21.M

DESP NOV 11 1922
REGN. No. 49457

*Name Atwood, A. G. Rank Pte Regtl. No 282445

Original unit 9th Bn Present unit 85th Bn M. or S. Age 27 Religion Baptist Fyle Depot Ref. H.Q.

Port, ship, and date of arrival Halifax "Empress of Britain" 22/1/19.

Next of kin Mrs. Maude Susan Atwood. (Wife)

Address on leave Clarks Harbor, Shel. Co. N.S.

Address on discharge Clarks Harbor, Shel. Co. N.S.

Transportation issued Yes / No Date Character on discharge

Previous occupation Fisherman Date and place of enlistment 8/2/16 "Clarks Harbor"

Diagnosis Date of Medical Boards

Date:	Remarks	Pt. 2 Order No.
12/1/19.	S.O.S. No. 6. D.D. Do	29
22/1/19.	Ports & Casualty Co. Do	29
20/2/19	Discharged at Halifax Do	43.

*—Name will be given in full; surname first.

(over)

Date.	Remarks.	Pt. [redacted]der No.

M.F.W. 192
150M—6-18.
1772-39-1243.

FORM D.M.S. 1300.
8137—50m—28/2/17.

Surname	Christian Name or Names	Reg. No.
Atwood.	A. G.	282,445

Rank	Unit	Co.	Troop	Batty.
Pte.	85th Batt.		N. S. Reg.	

Hospital — Date of Admission

St. Johns. Amb. Etaples. 18. 6. 17

Transferred Huddersfield War Hosp. 3-7-17

Monks Horton Con Coun. Hosp. 13-7-17

~~Can. Conv. Monks Horton~~ Hosp.

Hosp.

Diagnosis Trench Fever.

(1)

Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

DISPOSITION — Date

Disc. 13-9-17

REMARKS

C.F. 26. 6. 17 A85

7-7-17 B99

" 19-7-17 B108.

" 18-9-17 B13

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

EPITOME OF HOSPITAL TREATMENT.

	Hospital	Adm.
1.		
2.		
3.		
4.		
5.		
6.		
7.		

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form B. 263.	Attestation Paper,	Militia Form B. 235.
Squadron / Battery / Company } Conduct Sheet,	" B. 263a.	Proceedings on Discharge	" B. 218.
Copies of Convictions, by C. P.	in MS.		
Med. Hist. Sheet,	Militia Form B. 313		
Medical Report for Invalid*	" B. 227.		
Statement of Man's Account on Transfer and Last Pay Certificate,	" D. 877.		

*Only if discharged "Medically unfit."

In the case of recruits who are rejected on final approval, the discharge documents will consist of

(a) Proceedings on Discharge.

(b) Attestation.

(c) Medical History Sheet (in the event of such having been prepared.)

N. B.—In the case of a man discharged by purchase, the date and number of Deposit Receipt with amount of same is to be noted hereon.

9-1-16

This space to be for numbers

Proceedings on Discharge.

M H

(When forwarded for confirmation these proceedings should be accompanied by the documents specified on fourth page).

No. 282445

Rank Private

59-a-438

Surname Atwood

Christian Name Alliston Grant.

NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.

Corps (Squadron, Battery or Company) 219th Battalion

Date of Discharge February 20. 1919

Place of Discharge Halifax N. S.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 27 years 6 months.
Height 5 feet 6½ inches.
Complexion Fair
Eyes Grey
Hair Brown
Trade Tinsmith
Intended place of residence (To be given as fully as practicable.) Clarks Harbor Shelburne Co. N.S.

Descriptive Marks

Nil

2. The above-named man is discharged in consequence of

Medically unfit

N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.

To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.

3. Conduct and character while in the service have been, according to the records, etc.

N.B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldiers and the Officer Commanding his Squadron, Battery or Company.

4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)

M. F. B. 218.
100M.—1-17.
H. Q. 1772-39-113.

(OVER)

5. He is in possession of the following number of G. C. Badges:

No reference to G. C. Badges is to be made on either the discharge or character certificate.

6. Medals and Decorations.....

To be copied by the Commanding Officer on to the parchment Discharge Certificate.

7. His account is correctly balanced, and signed by the Officer Commanding his Company. (*Squadron or Battery*), and I have impartially enquired into all matters brought before me in accordance with Regulations.

(Place)..... .....

(Date)..... *Commanding* .....

8. **Certificate to be signed by the Soldier on Discharge**

I hereby acknowledge that I received all my Pay, Allowances and Clothing, and all just demands, up to the present date, subject to the reservations of the claims noted on the third page.

(Place) Halifax N. S. Alliston G Atwood (*Signature of Soldier.*)

(Date) February 12th 1919 Ken. Smith (*Signature of Witness.*)

When a soldier is absent through illness or any other cause and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned, should be attached here.

9. **Additional Certificate in the case of a Soldier who takes his discharge on his own request.**

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

.....(*Signature of Soldier.*)

10. **Statement of Service.**

Service toward Engagement to.....(the date to which the Record of Service is completed).....years.....days.

Total.....years.....days.

11. **Confirmation of Discharge.**

The discharge of the above-named man is hereby confirmed.

(Place) Halifax N. S.

J. S. Davie Major for LIEUT, COL.

(Date) 20. 2. 1919

(*Signature*) No. 6 DISTRICT DEPOT.

Reservations referred to at Para. 8.

(To be signed by the soldier. When there are none, it is to be so stated, and signed by the soldier.)

Nil — Alliston G Atwood

(OVER)

AUDITOR | PAYMASTER

M. OR S. E of B 21/1/19

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

REGT. No. 282445 RANK NAME (IN FULL) Atwood A G (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? yes DATE EFFECTIVE 1/2/19

TO WHOM PAID Mrs M Atwood RELATIONSHIP

ADDRESS Clarkes Harbor NS

PARTICULARS	EFFECTIVE DATE	AUTHORITY
100		
10		

ORIGINAL UNIT C.E.F. C.T.S. IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION TRANSFERRED TO DATE 10 AUTHORITY

ASSIGNED PAY $ 20 00 DATE EFFECTIVE 1/2/19

PAYABLE TO wife RELATIONSHIP

ADDRESS

ANY CHANGE IN ASSIGNEE OR ADDRESS

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE EFFECTIVE

DISCHARGED PLACE DATE 20/2/19 REASON AUTHORITY 4043 IF ENTITLED TO POST DISCHARGE PAY

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $ C.	OTHER CREDITS $ C.	$ 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.	$ C.	TOTAL DEBITS $ C.	BALANCE DEBIT $ C.	CREDIT $ C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT																				
1/12/18	52		90 20	11 20		11 20													11 15	Subs Do 29
20/2/19	20	110	22 00	30 00	11 15	166 35						144 53	144 52	00			00			
				35 00		98 15						50 52	30 00	00	184 48					
											145 15						235 05	68 70		
											70 00									
	153	350	142			492														

War Service Gratuity

				Mar. 13 1919, B 5641	70 00					Man	Wife		
				" 13, 1919 B 5642	52 00					210	90		
					70 00					140	60	155070-155071	18/4/19
					30 00								
		1	30	1 30	71 30							Ob. #4.	
					30					70	30	584832-33	14-3-19
					70								
					30					Nil		598137-8	12-6-19
	350 00	143 30		493 30	423 30		70 00		493 30				

Certified that all payments due on this acct. have been paid.

[signature] CAPT.

For Senior Officer Pay Services, M. D. 6

30M-11-18.—L.L. 50877-M. & D. 9553.

MONTH	PAY AND F.A.				OTHER CREDITS				TOTAL CREDITS		ACQUITTANCE ROLLS						CASH PAYMENTS						ASSIGNED PAY		REGIMENTAL CHARGES		OTHER CHARGES				TOTAL DEBITS		BALANCE				PARTICULARS OR REMARKS
	NO. OF DAYS	RATE	AMOUNT								COL. NO. 1		COL. NO. 2		COL. NO. 3		COL. NO. 1		COL. NO. 2		COL. NO. 3												DEBIT		CREDIT		
			$	C.	$	C.	$	C.	$	C.	NO.	DATE	NO.	DATE	NO.	DATE	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	

P. 559.
MARRIED OR SINGLE Married

PLACE OF BIRTH Clarks Harbor NS

NAME AND ADDRESS OF NEXT OF KIN Maude Susan Atwood
Clarks Harbor. NS.

RELATIONSHIP OF NEXT OF KIN Wife

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

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

REG'L. No. 2824445 RANK Private NAME Atwood Allston G.

IF IN PERMT. CORPS } WHAT UNIT } UNIT 219th Battn TRANSFERRED TO 85th Bn. DATE 5/12/16 AUTHORITY P.O. 251

PERMANENT FORCE ALLOWANCES TRANSFERRED TO N.S.R.D. DATE JUL 21 1917 AUTHORITY 6086 10/17

PLACE OF ATTESTATION Clarks Harbor. NS. TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION 8/3/16 TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY $20 DATE EFFECTIVE October 1st 1916

PAYABLE TO Mrs Maud S. Atwood Hawk. Shel Co RELATIONSHIP Wife

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

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

DISCHARGE DATE AND PLACE REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE) G.J.

DATE 1916	PAY NO. OF DAYS	PAY RATE	PAY AMOUNT $	PAY AMOUNT c.	FIELD ALLOWANCE NO. OF DAYS	FIELD ALLOWANCE RATE	FIELD ALLOWANCE AMOUNT $	FIELD ALLOWANCE AMOUNT c.	WORKING OR SPECIAL PAY NO. OF DAYS	WORKING OR SPECIAL PAY RATE	WORKING OR SPECIAL PAY AMOUNT $	WORKING OR SPECIAL PAY AMOUNT c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 NO	1 DATE	2 NO.	2 DATE	3 NO.	3 DATE	4 NO.	4 DATE	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE CREDIT	BALANCE DEBIT	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
2/10/16														9 10	9 10													~~20~~			9 10				Oct Pay Sub by A.P. Pay Book recorded on oct Pay Lists (Canada)
Nov	30	1.00	30		30	10¢	3								33	19	11/16							9 73	9 43			20	24 70	56 36		14 26			Jul from Canada
Dec 1917	31	1.00	31		31	10	3	10							34 10									9 43				20	32 ~~27 01~~ 22 75			2 91			P.O. 1859 forfeits 22 50 Pay. d.w.l
31-1	31	"	31	00	31	"	3	10							37 20	138	25/11							H 86	2 H+			2000	1.75	29 03	2 16		2 16		64005 No 82 Cases to 85 Batt. 1.75. q.H005/222
			9	20																														
28-2	28	1.10	30	80											30 80													2000		200 00 12.8 1.H		12 96		12 96	
			34	10											34 10													2000		44 34	2 72		0		
Apr	30		33												33 45	3/4								3 49				2000		23 49	12 23				
May	31		34	10											34 10	77	17/4							2 62				2000		22 62	23 71				
June	30		33	00											33 00	1328	5							268	268			2000		25 36	31 35				
JUL 8	20	H	22	00											22 00													2000		20 00	33 85				
21														9 10	9 10													180	26 45	H 83 95		45 45			
3	11		12	10											12 10																				
Aug	31		34	10											34 10													20		20	59 55				
Sept	30		33												949	42	49									268		20		22 68	79 36				SF 13/9/16 25/9/16 Ls 189 17/9/16 NSRD
			367	40											18 59	385	99									27 00		220		306 63	79 36				

2317 27/2 17 Rec
2347 1/3 "
2351 14217 17 Rec
2365 14/3 "

24 1/4 85 Bn

Trans to N.S.R.D. 6086 d 10/7/17

282445 Pte Atwood. A.G.

Date	Pay: No. of Days	Pay: Rate	Pay: Amount $	Pay: Amount c.	Field Allowance: No. of Days	Field Allowance: Rate	Field Allowance: Amount $	Field Allowance: Amount c.	Working or Special Pay: No. of Days	Working or Special Pay: Rate	Working or Special Pay: Amount $	Working or Special Pay: Amount c.	Assigned Pay Credits	Other Credits	Total Credits	Acquittance Rolls 1 No.	Acquittance Rolls 1 Date	Acquittance Rolls 2 No.	Acquittance Rolls 2 Date	Acquittance Rolls 3 No.	Acquittance Rolls 3 Date	Acquittance Rolls 4 No.	Acquittance Rolls 4 Date	Cash Payments 1	Cash Payments 2	Cash Payments 3	Cash Payments 4	Assigned Pay	Other Charges	Total Debits	Balance Credit	Balance Debit	Pay Withheld or Deferred	Pay Available for Issue	Remarks
MONTH	PARTICULARS				CR. 1			CR. 2	PARTICULARS					DR. 1	DR. 2	DR. 3	DR. 4	BALANCE																	
Sept 30					~~79~~	~~36~~	AK		Bal Fwd																										
Oct	Pte Pay				34	10			Can A.P.									79	36	Nil															
																		20																	
									AR. 743 27/7/17 Monks Horton					2	44																					
									AR 669 11/9/17 CCH Monks Horton					48	67																					
									AR. 916 1/8/17 P.P.R.+H Ramsgate					4	87																					
									AR. 606 29/8/17 CCH Monks Horton					2	44																					
					34	10								58	42			20		35	04														
Nov	"	"			33				ap Nov									20																	
Dec.	"	"			34	10			AR 724 26/10 5th Div Eng. ~~NSRD~~					4	87																				
									" 396 14/11 5 Div Eng					7	30																				
									ap Dec									20																	
									AR 553 12/10 Deb Bpwt					7	30																				
1918									DnAR 97 27/9 NSRD.					7	30																				
					67	10								26	77			40		35 ~~55~~	37														
Jan					34	10			ap Can Jan									20																	
									AR 462 5/12 5 DSC					12	17																					
					34	10								12	17			20		37	30														
Feb					30	80			Can A.P.									20																	
									AR 547 15/1 5 CDSC					7	30																					
									" " 737 30/1 5 " "					4	87																					
									" " 852 15/2 5 " "					9	73																					
					30	80								21	90			20		1/6	20														
Mch	Pay				34	10			Can A.P.									20		60	20														
									AR 921 25/2 5 Sig.					2	43					46	76															
									" " 920 10/3 Defaults Wtley					7	30																					
									" " 511 17/12 5 Sig					9	73																					
									" " 1256 25/3 Deb Wtley					7	30					13	54															
					34	10								26	76			20																	

Date of Enlistment

1-5-16

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

A 4895

Date of Assignment

Oct. 1/916.

RATE OF SEPARATION ALLOWANCE

20	25 1-12-17	30 00 1/9/18	

P.B. 3257 P.C. 2753

M.O. 48047

RATE OF ASSIGNMENT

201			

(Wife)

PARTICULARS OF SEPARATION ALLOWANCE

No. 252445

Rank Pte Promoted Reverted Discharge

Soldier's Name A. G. Atwood

Battalion 219 Battn.

Beneficiary Mrs Maud S. Atwood

Relationship Wife. W.P. 2554 1/4

Address Clarks Harbor, Shelburne Co. N. S.

Rec.

PARTICULARS OF ASSIGNMENT

Name Mrs M. S. Atwood

Address Clarks Harbor

Change of Address N. S.

1

2

3

4

591-A-1

Date	Cheque No.		Amount S/A	Amount A/P	Total		REMARKS
Sept-30-17			380	240	620		
Oct	D51434		20	20	40		
Nov.	53219	C	20	20	40	13	
Dec	59234	B	20	20	40	B	M
1918 Jan/18	60538	F	30	20	50	S	
" Feby	94639	B	25	20	45	B	
Mch	90978	A	25	20	45	A	
Apr	7708	I	25	20	45	A	
May	9069	C	25	20	45	A	
June	17447	D	25	20	45	B	
July	30458	G	25	20	45	B	
Aug	33021	A	25	20	45	A	
Sept	39830	A	25	20	45	A	
OCT	46455	A	25	20	45	6	
NOV	54541	A	25	20	45	6	
Dec	63770	A	45	20	65	6	
Jan	73651	B	30	20	50	6	
Feb			395	560			

31-1-19
Empress of Britain
23-1-19 28-1-19
MRO 6. P.O. Okay MRO 64356

M. F. W. 128
400M.—6-17—1772-39-1141
L. L. 22820—M. & D. 7593.

CONSOLIDATED ... CO. OF CANADA LTD.

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

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

M. F. W. 128
400M.—6-17—1772-39-1141
L. L. 22320—M. & D. 7993.

P 820
12474—375M—13-2-18.

* Strike out whichever is not applicable.

ASSIGNED PAY.	* ~~ENGLAND~~ OR CANADA.	SEPARATION ALLOWANCE.	* ENGLAND OR CANADA.
EFFECTIVE DATE:-	oct 1/16	EFFECTIVE DATE:-	
AMOUNT:-	20 00.	AMOUNT:	

NAME:- ATWOOD Allister G.

NUMBER:- 282445.

NAME, ADDRESS, RELATIONSHIP & AUTHORITY { WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.

Mrs Maud S. Atwood
Mother Allot 20 pc
Cancelled
Off 1/12/18 (Canada)

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Private.

UNIT AND TRANSFERS

ORIGINAL UNIT:- 219th Bn.

DATE ACCOUNT FIRST OPENED:- 1/11/16.

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			USRD
1 16/7/18	1/9/18	20/9/18	C. Mush Camp

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
~~12/4/18~~	~~2~~	~~Mytchett~~	~~7 30~~				
~~27/4/18~~	~~2443~~	~~BRDY.~~	~~4 87~~			Ledger Shed Bal.	34.32
~~4/12/18~~	~~3127~~	~~—~~	~~7 30~~			Cash Payments	19.47
			19 47			L Pb b/d	14.85

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBSICE ALLICE
	1 00	1 6		

PARTICULARS OF RENDERING NON-EFFECTIVE:- D is to Canada 30/11/18 A4 30. 14-1-48 15/11/18.

MONTH 1918	PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
March 31st	Balance forward								13 5H		
Apl	P.O. Pay	33 —		Can a/c.				20			
—				a/c 124 14/4/18 Details Wilkey	7 30						
—				a/c 526 26/4/18 " "	4 87				14 37		
May	P.P.	33 — / 34 10		Can a/c	12 17			20 — / 20 —			
—				a/c 818 15/5/18 Det Wilkey	7 30						
—				a/c 1108 27/5/18 " "	7 30				13 87		
June	P.P.	34 10 / 33		Can a/c	14 60			20 / 20			
—				a/c 1983 1/6 "	4 87						
—				" 1679 a/c 6 "	7 30				14 70		
—		33 —			12 17			20			
July	—	34 10 —		Can a/c				20			
—				a/c 1978 17/7 "	4 87						
—				" 2164 30/7 "	7 30				16 63		
—		34 10			12 17			20			
AUG	"	34 10		Can a/c				20			
—				a/c 2531 13/8/18	4 87						
—				a/c 2775 27/8/18 Details Wilkey	7 30 —				18 56		
—		34 10			12 17			20			
SEP	"	33 —		C. A. P.				20			
—				" 3143 10.9.18 "	4 87						
—				" 3464 24.9.18 "	7 30				19 39		
—		33 00			12 17			20 00			
Oct	P.P.	34 10 —		C. A. P.				20 —	33 49		
—				(16) 3818 15.10.18 C.T.S.	7 30				26 19		
—				(32) 4184 29.10.18 Det Wil.	14 87				21 32		
—		34 10			12 17			20			

NUMBER 282445 RANK NAME ATWOOD A.G.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
				Forward					21 32		
Nov	P.P	33		C.A.P.				20	34 32		
				(64) 2945. 27/11/18. N.I.R.	4 87				29 45		
				(64) 3127. 4.12.18. B.R.D.Y.	7 30				22 15		
				73 6025 20.12.18 C.D.D. en on L.R.	9 73				12 42		
		33			21 90			20			
Feb				1770. 9.1.19. Rhyl en on L.R.	9 73				2 69		
				2. 12.11.18 Sch of Mus	7 30				4 61		
					17 03						

Statement of the Soldier

(This is to be completed only in the case of the Soldier taking his Discharge in England.)
(Sections 1, 2, 5, and 6 are to be read to the Soldier.)

I, the undersigned A. G. Atwood have heard the description of my disability read, and am satisfied (or not satisfied) with it. (If dissatisfied, statement should follow.) I complain in addition of :—

Alliston Grant Atwood
Signature of Soldier examined.

Instructions to Medical Officers

Question 1.—State the disability in terms of a diagnosis, that is, a diagnosis of the existing condition as distinguished from the disease or injury which caused it. It should be noted that in medical cases the disability may be the actual disease; for example, Tubercle of Lung, Chronic Bronchitis, Myalgia, Gastric conditions and so forth. (Follow the nomenclature as laid down in the "List of Diseases" of 1915, and amended by A. C. I. No. 1587 of 1917.)

Question 2.—The cause of the disability when known should be stated and care should be taken to establish as correctly as possible the place and date of origin. This is important in view of the relationship of Questions 3 and 4 to Question 5.

Questions 3 and 4.—*NOTE*—By Active Service is meant Service with the Colours in Canada, the United Kingdom or elsewhere during the present war, (since the 4th August, 1914.)

Question 5.—MEDICAL HISTORY.—State concisely the essential points of the history of the case as supported by documentary evidence. If further evidence is considered necessary to complete the Medical History, the same not being supported by documents, this should be obtained by questioning the soldier, but should be distinctly shown as "Patient's Statement." It is considered advisable that these latter statements be grouped apart from the evidence supported by documents available to the Medical Officer.

Extracts should be made from all entries on the Medical History Sheet.

If answers to Nos. 2, 3 or 4 show that the Soldier is suffering from some condition which pre-existed enlistment, it is advisable that these answers be substantiated as far as possible by statements obtained from the Soldier showing history of previous illness or injury.

Question 6.—PRESENT CONDITION.—As this question is primarily intended for the Medical Officer's report, in answering show clearly the condition of the Soldier at the time of examination.

It is directed that the objective and subjective matter be arranged in separate groups. The objective matter is considered to be the more important, in that it consists of a statement of the Medical Officer's actual finding.

Specialists' reports bearing on the PRESENT CONDITION should be attached.

In addition to description of the disability, a report on "all systems" is required in order that the whole when completed may be a true pen portrait of the Soldier's condition.

The Medical Officer in charge of the case will fill out pages 1 and 2 of this Form. The original must be wholly in the handwriting of the Medical Officer. The copies may be typewritten but must be signed by the Medical Officer who must be responsible that these are true copies of the original.

Finally the O. C. Hospital or S. M. O. or an Officer delegated for such duty by the A. D. M. S., is required to sign a certificate at the bottom of page 2, which reads as follows :—

"I have satisfied myself of the general accuracy of this report and concur therewith, except....."

This is a most important part of the paper and one to which the attention of the Officers concerned should be frequently drawn as it is by such strict supervision that the accuracy and good results of Medical Board work can be assured.

ENTRIES OF RECATEGORIZATION

Date	Station	Category	Signature of M. O.	Date	Station	Category	Signature of M. O.

A.F.B. 179 Canada (Revised 1918). 40266 10/8/18 D. 343

Reserved for M.H.C.

Regt. No. 282415 Rank Pte Surname ATWOOD Christian Name ALLISTON GRANT

Unit or Corps—(a) Overseas from United Kingdom 85th Bn. (b) in United Kingdom N.S.D.Bn

Born at—Town Clark's Harbour County or Province Melbourne N.S. Country Canada

Date of Birth—Day 11th Month August Year 1890 Age 28 yrs. 5 months.

Joined at Clark's Harbour Date Feb 29 1916

Former trade or occupation TINSMITH

Permanent Marks or any peculiarity that will serve for future identification :—

One vacc mark right arm

Height—feet 5 inches 7 Colour of eyes Brown

Signature of Soldier (*for identification purposes*) Alliston Grant Atwood

Medical Report

☞ *Read carefully the instructions on last page of this form.*

1. DISABILITY.

Group the disabilities, placing those resulting from separate causes in separate groups.

Disabilities Group (a) TRENCH FEVER

Disabilities Group (b) n a

Disabilities Group (c) n a

2. CAUSE OF DISABILITY

		Place of origin.	Date of origin.
(i.) As to Group (a) above.	ACTIVE SERVICE	VIMY	June 14 1917
(ii.) As to Group (b) above.	n	a	
(iii.) As to Group (c) above.	n	a	

3. Is the disability due to disease contracted or injuries received prior to Active Service? no

(i.) As to Group (a) above? no If yes, has Active Service aggravated it? n a

(ii.) As to Group (b) above? n a If yes, has Active Service aggravated it? n a

(iii.) As to Group (c) above? n a If yes, has Active Service aggravated it? n a

4. Is the disability due to disease contracted or injuries received while on Active Service? yes

(i.) As to Group (a) above? yes

(ii.) As to Group (b) above? n a

(iii.) As to Group (c) above? n a

PART I. (continued).

5. MEDICAL HISTORY.

Joined C.E.F. England Oct/1916 and
went to France
Was sent to England suffering
from trench fever and was
two mos in hospital.
Before joining army he always had good
health

6. PRESENT CONDITION. Man states that at most
times he feels fairly well, but at periods
he has a return of pain in limbs. Cannot
do the work he formerly did because he finds
that after exertion he requires rest and is very
easily tired out.

EXAMINATION Man looks to be in good condition
Pulse weak, rapid and easily compressible
Circulatory, respiratory, nervous, genito urinary
gastro intestinal, and other systems show
no physical signs of disease.

7. OPERATION. (i.) Was one performed? No (ii.) If so, state what. N a

(iii.) Was one advised and declined? No

NOTE.—Loss of teeth on or immediately after Active Service should be attributed thereto, unless there is evidence to the contrary.

8. (i.) Is there loss or decay of teeth attributable to Active Service? No

(ii.) If so, describe. N a

9. DO YOU RECOMMEND:—

(a) Fit for duty? (*state category*) Yes B II (b) Invalid to Canada? No

(c) Discharge from the Service as permanently unfit? No

Date of Report 25 NOV 1918 Signed H. Remers Calfee Capt
Officer in medical charge of case.

Station Bramshott Hants

I have satisfied myself of the general accuracy of the above Report,
and concur therein *except .....
{Officer i/c Hospital / S.M.O. / Brigade} Strike out one of these

Dated at .....Station, on.....191.....

*Delete if inapplicable.

PART II.

Proceedings of a Medical Board on the Soldier mentioned in Part I.

10. Is the diasbility fully described in Part I. (1)? If not, describe it. Yes

11. Is the cause of the disability fully described in Part I. (2)? If not, describe it. Yes.

12. From the medical information now adduced, was the disability caused or aggravated by:— (a) Negligence of the Soldier {Caused? No. / Aggravated? No.} (b) Misconduct of the Soldier {Caused? No. / Aggravated? No.}

13. THE ENTIRE DISABILITY.—Without regard to his regular occupation, to what extent is his capacity lessened at present for earning a full livelihood in the general market for untrained labour?
(Estimate at none, 5%, 10%, 15%, 20%, etc.) Nil

14. THE DISABILITY DUE TO SERVICE.—(See Part I. (3). *Aggravation on Active Service of a disability existing previous to joining is to be included in this estimate.*)
What part of the entire disability estimated next above (13) is due to causes arising during Active Service?
(Estimate at none, 1/10, 2/10, 3/10, etc., or all.) All

15. Permanency of the Disability due to Service estimated next above in (14).
(i.) Is it permanent? No
(ii.) If not permanent, what is its probable minimum duration (*in months*)? Indefinite

16. If an operation was advised and declined, do you consider the refusal to have been unreasonable? None

17. Can the former trade or occupation be resumed? Yes

18. REMARKS:— Barracks No. 3 Ward 4083
Discharged 11/11/18
CONDITION UNCHANGED
G. J. Mc Nally
Major,
Halifax, 19... for A. D/M. S. M. D. No. 6

19. RECOMMENDATION:—
(a) Fit for duty? (*state category*) No B II (b) Invalid to Canada? Yes
(c) Discharge from Service as permanently unfit? Yes

Date of Board 25 NOV 1918 *President.*

Signatures of the Board

Station Bramshott.

Approved H. Burdon
Colonel, A.D.M.S.
Canadian Troops, Bramshot Camp.
A.D.M.S.

Dated at Bramshott Station 25 NOV 1918 191