706819

Original

103RD BATT. C. E. F.

ATTESTATION PAPER.

No. 706819

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? ..... West
1a. What are your Christian names? ..... Charles Edgar
1b. What is your present address? ..... Coombs V I B C
2. In what Town, Township or Parish, and in what Country were you born? ..... Muskoka District Ont. Canada.
3. What is the name of your next-of kin? ..... John A. West
4. What is the address of your next-of-kin? ..... Coombs V I B C Post Office
4a. What is the relationship of your next-of-kin? ..... Father (VANCOUVER ISLAND)
5. What is the date of your birth? ..... July 18th 1891
6. What is your Trade or Calling? ..... Engineer
7. Are you married? ..... No.
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, Chas E West, 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.

C. E. West (Signature of Recruit)

Date JAN 18 1916 191 . Albrefield (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Chas E West, 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.

C. E. West (Signature of Recruit)

Date JAN 18 1916 191 . Albrefield (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 VICTORIA, B. C. this day of JAN 18 1916 191 .

Major (Signature of Justice)

Lieut.-Col

for O. C. 103rd Battalion C. E. F.

M. F. W. 23.
200 M.—11-15.
H. Q. 1772-39-841.

Description of Chas E West on Enlistment.

Apparent Age 24 years 6 months.

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

Height 5 ft. 7½ ins.

Chest measurement: Girth when fully expanded 39½" ins.

Range of expansion 3 ins.

Complexion Med.

Eyes Brown

Hair Brown

Religious denominations:

- Church of England
- Presbyterian
- Methodist Yes
- Baptist or Congregationalist
- 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).

Black mole 0 2" to L. ~~[illegible]~~ on level with umbilicus

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 Jan 12" 1916

Place Victoria

H. J. McE. Sorley M.D.
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.

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

[signature] Major (Signature of Officer)
Lieut.-Col
for O. C. 103rd Battalion C. E. F.

JAN 18 1916

Date 191 .

3-4-19
M10

REGIMENTAL DOCUMENTS

NAME WEST Charles Edgar REGT. NO. 706819 UNIT 103rd Bn H. Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
1	ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
3	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
	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)					
2	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
2	DENTAL HISTORY SHEET (M.F.B. 465)					Category
1	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					Demob.
1	MEDICAL EXAMINATION (M.F.W. 129)					
1	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
1	LAST PAY CERTIFICATE (M.F.W. 44)					
1	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					
1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
1	A.F.W. 3997					
1	M.F.W. 192					
1	R 149					
1	M.F.W. 67					
1	Gas Card					
1	R122					
	IPC					

M

H

14410

Box # 10 237

25 = 17
10 = 17
5 17

W. 2539
100M-11-18
1772 39-1377

706 819 — **I.D. number / No. d'identification**

WEST — **Surname / Nom de famille**

CHARLES EDGAR — **Given names / Prénoms**

PERSONNEL RECORDS CENTRE
CENTRE DES DOCUMENTS DU PERSONNEL

PERSONNEL RECORDS ENVELOPE
ENVELOPPE DES DOSSIERS DU PERSONNEL

Location / Lieu Box # 10,237

"CONTENTS CONFIDENTIAL"
"CONTENU CONFIDENTIEL"

ARC-1048 (r. 87/05)

103rd Bat. O/S C.E.F.

Duplicate

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..... 103rd Bat. O/S C.E.F.

(2) Regimental Number 706819

(3) Full Name of Soldier..... West, Charles, Edgar,

(4) Place of Birth..... Barriedale, Ontario.

(5) Are you married, or not ? ..... No.

(6) If married, state,
(a) Full name of your wife.....

(b) Present Postal Address.....

(7) Are you a widower ? .....

(8) Have you any children ?.....

If so, give number of boys and girls.....

Also their names and ages.....

M. F. W. 67

200M.—2-16
1772-39-954

(SEE OTHER SIDE.)

(9) Is your Father alive? Yes

If so, state name and address John A. West, Coombs, B.C.

(10) Is your Mother alive? Yes,

If so, state name and address Emma West, same address

(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.

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.

[signature] Lieut.-Col
Officer Commanding
Of C. 103rd Battalion C. E. F.

Date JUL 4 1916

O. H. M. S.

POSTAGE
FREE

SECRETARY, MILITIA COUNCIL,

DIRECTOR OF RECORDS,

OTTAWA, ONT.

200M.-4-21.

H. Q. Reference

No. 706819 Rank L/CpL Unit 103rd BATTN.

Surname WEST

Christian names (CHARLES) EDGAR

Kindly forward Medals, to which I am entitled by reason of my service in FRANCE & BELGIUM
(Theatre of War)

with 54th BATTN.
(Unit with which served in Theatre of War)

No. GENERAL DELIVERY

Street

Town COOMBS. B.C.

County

APR 18 1922

C. E. West
(Signature)

(WRITE IN BLOCK LETTERS AND IN INK)

13347

No. 706 819 RANK Pte. NAME West C. E.

T. O. S. 18-1-16. UNIT 103rd Battalion, C.E.F.
D.O. 38. 25-1-16.

M. D. 11.

PAID FROM	PAID TO	SIG. OR REC'T
1916.	1916.	
Jan. 18.	Jan 31	C
Feb. 1.	Feb. 29	C
Mar. 1	Mar. 31	C
Apr		C
May		C
June		C
July		C

PROMOTIONS, TRANSFERS, DISCHARGES, ETC.

PARTICULARS	AUTHORITY

UNIT SAILED
JUL 23 1916

Form R. 149.

Charles Edgar. 406819.

Name WEST. Rank L/Cpl. Reg. No.

Unit 54th Bn.

Next of Kin Canada Can

Date 1918.		Movement	Place	Casualty	List No.	Notified N/K O.		W.O. List
13.	8.	16 Can G H Crf'tor		G Sw Lt Arm	B	240	H 255	23982
10	12	Disch		do	B	393		293
20	12	Will rept Can disc Rep Buxton Crp					W	329

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

REGT'L No. 706819

H. Q. FILE No. 649.

NAME West Chas Edgar

RANK AND CORPS Pte. 54th. Bn. (form. 103rd. Bn.)

FOLLOWS NO.

FOLLOWS

CABLE NO.	CABLE DATE	NATURE OF CASUALTY
N of K.		West John A. Father. Coombs V. I. (B. C)
H. 255	18-8-18	Adm. Ont. Mil. H. Orpington
171	167-4	Aug. 13th. 1918. G. S. W. L. Arm.
W & M	18-9-18	O. in C. Ontario Mil. H Orpington reports wound almost healed good progress.

L. L. 26438. M. & D. 8207.

M. F. W. 42—50M.—8-17.
H. Q. 1772-39-893.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS B 4 Regt
B290-1.	No16. Can. Gen. Orpington	13-8-18.	Gsw Lt arm
B393-2.	Alice	10-12-18.	" " " " "

A.D.

Number 706819 Rank L/Cpl

Surname WEST

Christian Name Edgar

Units 54th Bn Can Inf Theatre of War France

Date of Service 8-2-17

Remarks

Latest Address Coombs B.C

Roll No. B. Page 13347

200m—2—21. M.

DESP. MAY 13 1922
REGN. NO. 32943

C.

CARD NO. 11

SURNAME. West,

CHRISTIAN NAMES Charles Edgar

REGL. No. 706819 RANK Pte.

UNIT 103rd

FORMER CORPS Mil

SOS Dis 13-2-19.
SO 45 Pol 14-2-19
Demob 11 DD.

Bw.

NEXT OF KIN.

NAMES IN FULL West, John A.

RELATIONSHIP TO SOLDIER Father

ADDRESS Coombs V.I. B.C.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada, Muskoka District Ont. DATE July 18th 1891.

PLACE OF ATTESTATION Victoria, B.C. DATE Jan. 18th 1916

Sailed from Halifax per. S.S. Olympic 23-7-16. 487/23

L. L. 90589.—M. & D. 6312. Nfld 13-1-19 252/41 11 L/Cpl. M. F. W. 22. 100m.—1-16. H. Q. 1772-39-839.

MARRIED SINGLE Yes WIDOWER

TRADE OR CALLING Engineer RELIGION Methodist

DESCRIPTION.

APPARENT AGE 24 YEARS 6 MONTHS

HEIGHT 5 FEET 7 1/2 INCHES

CHEST MEASUREMENT 39 1/2 INCHES EXPANSION 3 INCHES

COMPLEXION Medium EYES Brown HAIR Brown.

DISTINGUISHING MARKS Black mole 0 2" ft on level with implius.

MEDICAL EXAMINATION. PLACE Victoria, B. C. DATE Jan. 12th 1916

Present address. Coombs V. I. B. C.

D.M.S. 1300-50M-21-11-17.

SURNAME	CHRISTIAN NAME OR NAMES	REG. NO.
WEST	C.E.	706819.

RANK	UNIT	CO.	TROOP	BATTY.
L/Cpl.	BC. 54.			

HOSPITAL

DATE OF ADMISSION

16 CGH. Orpington. 13-8-18.

1. HOSP.

2. HOSP.

3. HOSP.

4. HOSP.

GSW. Lt. Arm.

DIAGNOSIS

1.

2.

3.

DISPOSITION

CL. 15-8-18. B290-1.

Dis — 10-12-18

DATE

REMARKS

12-12-18 B39 3.2.

A.M.D. 2 Dept.

Bch. of D.G.M.S. O.M.F.C. London

EPITOME OF HOSPITAL TREATMENT

	HOSPITAL	ADM.
1.		
2.		
3.		
4.		
5.		
6.		
7.		

*Name West Chas. Edgar Rank Pte Regtl. No. 706819

Original unit 103 rd Present unit 103 rd. M. or S. Age 27. Religion Ref. H.Q. Fyle Depot 6369

Port, ship, and date of arrival St Johns. Scotian 15-1-19

Next of kin

Address on leave

Address on discharge Coombs. BC.

Transportation issued Yes No Date Character on discharge

Previous occupation Shj. Engineers Date and place of enlistment Victoria BC. 18-1-16

Diagnosis Fit Date of Medical Boards 10/2/19

Discharged 13-2-19 DO 25/2/19

Date.	Remarks	Pt. 2 Order No.
27-1-19	T.O.S. from O/seas 3.1.19 Posted to Cas. Coy. 21-1-19. Leave 6.2.19	27-118 F
JAN 28 1919	P&A 1/1/19 SUBS ALLCE FIRST LEAVE	28/130A
13-2-19	Posted to Disc. Sec. from Cas. Co. DDD O 255 E 14-2-19	46 - 15/2/19

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

(over)

Date.	Remarks.	[redacted]2 Order No.

M.F.W. 192
150M—6-18.
1772-39-1243.

DENTAL HISTORY SHEET

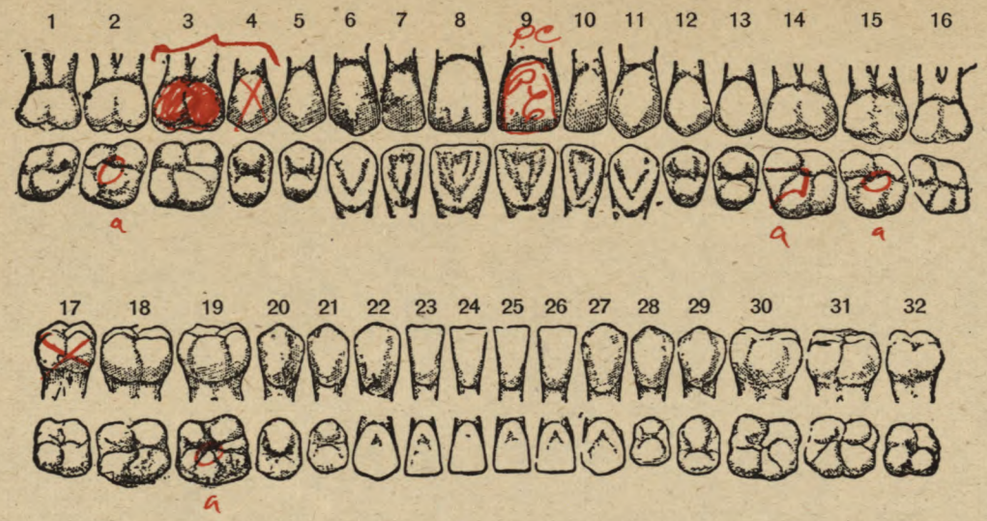
CANADIAN ARMY DENTAL CORPS

NAME OF SOLDIER West Charles Edgar

REGIMENT 54 Batt RANK Cpl. No. 706819

DISTRICT 11

M.F.B. 465.
200M.—6-18
1772-39-950



INSTRUCTIONS

1. On examination the condition of patient's mouth to be marked on diagram in red ink.
2. On first line of report record of same to be made in red ink.

Only such entries to be made on this sheet as will show:

1. Condition on examination (in red).
2. Condition on leaving Canada.
3. Condition on discharge.

	Date		Amalgam	Temporary Filling (a) G. P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhœa	Synthetic Porcelain	Extracting	DENTURES U	DENTURES L	DENTURES P	Gold Clasp	Gold Filling	CROWNS Gold	CROWNS Porcelain	Bridge Work	OPERATOR	Military District	REMARKS
Condition on first Examination	1919 Feb.	8th	4 / 2.14 15.19									2 / 4.17						1/3	1/9	1/3 to 4	Lieut McAlister	XI	No. Work Required

Father, John A. West, Coombs, B. C. Pte Leave 6369

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

X1 C/C

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. 706819 Rank L/Cpl. Surname West
(Give name in full)
Charles Edgar

Unit or Corps 1st. B.C.R.D. Birthplace Barriedale, Ont.

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

1. **GENERAL DESCRIPTION:**

Physique good Weight 142 lbs. Height 5 ft. 8 in. Colour of Eyes brown

Nutrition good

Pulse 62

Condition of arteries. Normal

Vision Rt. 20/20 Left 20/20

Hearing (conversational voice) Rt. 20 ft.

Left. 20 ft.

Identification marks, scars, or deformities. (Give cause and date of origin.)

Scar right cheek
Scar left elbow

Opinion as to general health and physical condition Good

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

Nervous System. No Genito Urinary System. No Cardio-Vascular System. No

Special Senses. No Integumentary System. No Respiratory System. No

Disturbance of mentality. No Muscular System. No Digestive System. No

Osseous and Joint System. No Any other general condition. No

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

Disability caused by wound left elbow described in O/S Board has now practically disappeared. No other disabilities.

(If space is insufficient, continue on back of form.)

[OVER]

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at.....(Overseas)

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 Medical Board.)

THIS SECTION FOR USE IN CANADA—

Examined at New Westminst B.C. (Canada)

Date Feb. 10. 1919 Signed A. F. Fuller Capt. 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 C. E. West

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

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

[OVER]

M.F.W. 129.
1033 (D.P.) 500M-11-18.
1772-39-1142.

Demobilization Pay M.D. No. 11

CANADIAN CONTINGENT EXPEDITIONARY FORCE

M. D. 11

LAST PAY CERTIFICATE

No. 52

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

Regimental No. 706819 Rank L/Cpl Name West C E

Corps XI D D who was* Discharged

On 13-2- 1919, to

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1-2- 1919 to 13-2- 1919, the inclusive date of transfer or discharge.

Dr.	$	c.	Cr.	$	c.
Bal. Dr. from prev. month			Bal. Cr. from prev. month Jan	194	45
Advances by Cheques No.			Regt'l Pay 13 days at $ 1 c. 15	14	95
Advances by Cheques No.			Field Allow. days at $ c.		
Assigned Pay and Sep'n Allce. No.			Separation Allowances* (Monthly)		
Other charges 1st War Gratuity	70	-	Other Allowances* Clothing	35	-
Payment on transfer or discharge No. 255	60		Other Credits* 14 Subs	11	20
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit) PDP	70	-
Total	325	60	Total	325	60

*Give particulars.

A monthly stoppage of $ 15 (†) has not (‡) been paid on account of Assigned Pay for the month of 191... and Sep'n Allce. for month of 191... (to) Assignee Mrs Emma West

(Address) Coombs BC

(†) 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

Outfit 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.....

(3) cause of discharge DO authority XI D D

(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 12-2-19

Place Vancouver BC

Captain
Paymaster

Demobilization Pay M. D. No. 11

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.

M. F. W. 44.

300M—2-18.
H. Q. 1772-39-903.

AP a/c Closed 31-1-19.
1st War Service. Gratuity paid by XI DD

16 RD BATT. C. E. F. 706819 ORIGINAL Original

MEDICAL HISTORY SHEET.

Surname West *Christian Name* Chas. E.

Examined { on 18 day of Jan 1916 / at Victoria Bl.

Birthplace { City or Town Barriedale / County Ont.

Apparent age 24

Trade or occupation engineer

Height 5 Feet 8 Inches.

Weight 150 Lbs.

Chest measurement { Minimum 36½ inches. / Maximum expansion 39½ inches.

Physical development good

Small-Pox Marks none

Vaccination Marks { Arm Right. Left. / Number 3

When Vaccinated last childhood

(*a*) Marks indicating congenital peculiarities or previous disease none

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

Approved by H. H. McSorley M.D.

Rank Capt. Cam. C. M.O.

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

Date.	Result.	Vaccinations.
1916 Apr		[signature] Capt. Cam. C. M.O.
		M.O.
		M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.
1916 May	ok	[signature] M.O.
"	ok	M.O.
June	ok	M.O.
Sept	OK	TAB [signature] M.O.

Enlisted on 18 *day of* Jan 1916 *at* Victoria Bl.

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	103rd Batt C.E.F.	706819.		Jan 18/16
Transferred to	16th. C.R. Bat. 54th Bn			JAN 10 1917

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
No. 16 CANADIAN GENERAL (ONTARIO) HOSPITAL, ORPINGTON, KENT.	30 NOV 1918	[signature]	[signature] L. McCrorton Capt. Cam. C.

CANADIAN

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.

200M—11-15.
H. Q. 1772 39-439.

Surname West Christian Name Stanley E.

706819

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital. Day	Month	Year	Dates of Discharge from Hospital. Day	Month	Year	DISEASE.	Number of days in Hospital	Remarks on nature of the disease: how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
16 Can Gen Hosp. Orpington		13	8	18	10	12	18	G.S.W. left Arm.	119	Wounded at Amiens GSW. post surface left arm just above elbow. - Infected - Considerable subcutaneous tissue - 19/11/18 Wound healed - 28/11/18 Recommended B[illegible] - Small contracted scar post surface left arm - some limitation of flexion	W. Scott Capt Canada

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

Temporary.

Army Form B. 103.

Casualty Form—Active Service.

Regiment or Corps 54th Bn. C. E. F.

Regimental No. 706819 Rank L/Cpl. Name West. Charles. E.

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

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)_____

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				
27.12.18		Attached C.D.D. Buxton for return to Canada, Part II Order No. 306. Ceases to be attached C.D.D. Buxton on embarking for Canada. J. W. Lock Lt. for Lt. Col. Commanding Canadian Discharge Depot.			
8 JAN 1919		Sailing 104 "SCOTIAN" 14 JAN 1919			
27/1/19	Overseas	T. O. S. District Depot XI.	Victoria, B. C.	3/1/19	D. O. Pt II 27/1/8 1919
DISCHARGED		DEMOBILIZATION	VANCOUVER, B. C.	13/2/19	D.O. 45/256 D of 14/2/19 D. H. MacLean Capt. For O.C. District Depot XI

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) e.g., Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

[P.T.O.

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				

SERVICE AND CASUALTY FORM (Part I). Sheet 2

Army Form B. 103 (II.) to be gummed on here if required.

Nothing to be written in this margin.

W1889—P2 1150 1M 5/18 G.W.P.Co.(3490)

(1) *Substantative rank *Acting rank *[To be entered in pencil to facilitate alteration.]	(2) Regiment or Corps	(3) Regtl.
(4) Surname WEST	5 4th Bn	706
(5) Christain Names Charles Edgar		
(6) Army Form, number of, Attestation Form or Record of Service paper		
(7) Whether of British or of Alien origin [*vide* A.C.I. 578 of 1918]		
(8) Date of birth as stated on enlistment		
(9) (*a*)		

(10) Enlistment (*b*) 18-1-16 (11) Engagement (*c*) R of W

(12) Service reckons from (*date*) 18-1-16 (13) Special conditions (if any) of enlistment (*d*)

(14) Any subsequent variations (if any) of conditions of service

(Authority) (*date*) Initials and Rank of an Officer.

(15) Category	Date	Medical Authority	Initials and Rank of an Officer

(16) (Record of Occupation in Civil life (*vide* Army Order 93 of 1917)

Industrial Group No.

Trade or Calling

Married or Single

Particulars of Trade Test

Occupation Cards despatched on (*date*)

Second Occupation Card despatched on (*date*)

(17) Next of Kin

(18) Demobilizer (*f*) (Place) (Signature of Posting Officer

(19) Pivotal-man (*f*) (Date)

(20) Qualifications (*g*) *or* (21) Corps trade and rate

(22) Extended (23) Re-engaged

(24) Miscellaneous entries:—

NOTES.—[a] Here enter particulars of any subsequent claim as to actual age after verification by birth certificate [*vide* A.C.I. 470 of 1918. [b] Whether direct or voluntary enlistment or called up under the Military Service Acts. [c] Whether for specified term of years or for duration of the war. [d] Whether "for Home Service only," or "not to be transferred without the soldier's consent, &c. [e] It to be retained on Home Service, period, if specified, to be stated, also authority, and on what grounds. [f] Required for demobilization purposes. [g] Signaller, Shoeing-smith, &c.

(A) Report		(B)	(C)	(D)	(E)	(F)
Date.	From whom received	Authority of Part II. of Orders	Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I, 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	Place of casualty	Date of promotion, reduction, reversion, casualty, &c.	Remarks, and initials and rank of an officer
MB 19-8-18	B.C.R.D.		T.O.S. from 54th Bn	Seaford	13-8-18	Pt II. O. 198

aaandrew

Lieut.

for Major i/c Records, C.E.F.

Nothing to be written in this margin.

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

M. F. W. 54.
150M. 10-15.
H.Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps 103rd Bat. O/S C.E.F.

Regimental No. 706819 Rank Pte Name West Charles Edgar.

Enlisted (a) 18.1.16 Terms of Service (a) War x 6 months C. E. F. Service reckons from (a) 18.1.16

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) Engineer

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 in Canada	Halifax	23.7.16	
		Arrived in England	Liverpool	31.7.16	
9/11/16	103 Bn	Appointed Act L/Cpl W Pay	Seaford	9-11-16	Part II Para 3 #287 9-11-16
JAN 9 1917	O.C. 103rd Battn	Transferred to 16th C.R. Bn.	Seaford	JAN 9 1917	Part II D.O # 9 9/1/17 [signature] O.C. 16th. Canadian Reserve Battn.
JAN 1 1917	16 Res Bn	Taken on Strength C.R. Bn	Seaford	JAN 10 1917	Part II D.O # 1 10/1/17 [signature] O.C. 16th. Canadian Reserve Battn.
6.2.17	"	Reverts to the ranks at own request to proceed overseas	Seaford	6.2.17	Part II # 28. 6.2.17 [signature] Major O.C. 16th. Canadian Reserve Battn.

(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
16 FEB. 1917
CAN. RECORDS, LONDON.
FEB 7 1917

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.
	O.C. 16th Res.	Transferred for Overseas Service with 54th Bn	Seaford	FEB 7 1917	Part II # 29 [signature] O.C. 16th. Canadian Reserve Battn.
8-2-17	C. B. D.	ARRIVED C. B. D.	FRANCE	8-2-17	N. R. D PART II ORDERS No 25 D 13-2-17
9-2-17	C. B. D.	LEFT C. B. D. FOR	54 Bn	9-2-17	N. R. D
17-2-17	O. C.....BN	ARRIVED 54 BN.	FIELD	12-2-17	B. 213 D 1S98 d/28-2-17
13 OCT 17	~~C.B.D.~~ 54	Left for 4th En. Bn.	Field	10 OCT 17	B. 213.
10 OCT 17	4th En. Bn.	Joined 4th En. Bn.	Field	10 OCT 17	N. R.
3.12.17.	do	Left for Unit	do	3.12.17.	N.R.
8.12.17.	Unit.	Joined Unit.	do	3.12.17.	B213.
29-12.17.	do	To 4 Div. Train Guard	do	24.12.17.	B213.
12.1.18	do	From do	do	9.1.18	B213
26.1.18	do	Granted 14 days Leave	do	21.1.18	B213. D.O. 8.
9.2.18	do	From do	do	5.2.18	B213.
9.3.18	do	Awarded 1 G.C. Badge	do	18.1.18	B213 D.O. 19
4.5.18	do	To be L/cpl. to comp Est.	do	12.4.18	B213. D.O. 44/18.
10.8.18	do	Evac Wounded	do	8.8.18	B213.
8.8.18.	1 C.F.A.	S.W. L. Arm. adm to	1 C.F.A. C.C.S.	8.8.18	A36. A7049.
9.8.18.	3 Aust Gen.	do adm	3 Aust Gen.	9.8.18.	W3034-W9542
13.8.18	do	do to	11 A.S.	13.8.18	W3034-W9739.
13.8.18	do	Invalided (wd) & Posted to B.C.R. Depot. Seaford	England	13.8.18	W3083-5742. D.O. 84 d/21-8.18
		H.S. P/Elizabeth			

J M Anderson
Lieut.
For Lieut-Col. A.A.G.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

District Depot M.D. XI
FEB 13 1919
Discharge Section

This is to Certify that No. 706819. (Rank) L. Corporal.

Name (in full) Charles Edgar West enlisted in the 103rd Battalion

CANADIAN EXPEDITIONARY FORCE at Victoria B.C. on the 18th day of January 1916.

HE served in France with the 54th Battalion and is now discharged from the service by reason of DEMOBILIZATION

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

Age	27 years
Height	5' 8"
Complexion	Medium
Eyes	Brown
Hair	Brown.
Marks or Scars	Scar on cheek. Scar left elbow.

Signature of Soldier

H.H. Andrews
Issuing Officer

Captain
Rank

for O.C. District Depot No 11
Appointment

Date of Discharge Feb. 13th 1919.

Signed at Vancouver B.C. this 13th day of February 1919.

in Military District No. Eleven

File Reference No. D.D. M. 6369.

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 .....

.....

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

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

.....
Name of Officer

.....
Rank

.....
Appointment

A

WAR SERVICE BADGE CLASS " "

No. 62406 ISSUED

R—122

J.M. Rank Pte. Name WEST, Charles Edgar. Reg'l No. 706819

Unit 103rd Bn. If in perm. Corps, What Unit? Married or Single Single.

Place and Date of Enlistment Victoria B.C., 18th Jan 1916. Place of Birth Muskoka District, Ont, Can.

Name and Address, Next-of-Kin John A. West.

Post Office, Coombs, Vancouver Island, B.C. Relationship Father.

Assigned Pay Monthly $ Payable to

Relationship

N/E. R.B. No. 13,861
File R.L.
Category Can R

Sept 0.C.

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

H. W. & V., Ld.—7165-16.

Report. Date.	Report. From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS. Taken from Official Documents,
C.			H.M.T. 2810		
		"Arr." in ENGLAND	S.S. OLYMPIC 31-7-16		
9/11/16	103rd Bn.	App. A/L-cpl. with pay.	Seaford.	9/11/16	Pt II D.O. #28
9-1-17	103rd Bn	S O S to 16th Res Bn	Seaford.	9.1.17	Pt. 2 D.O. 9
10-I-17	16 Res	T.O.S. FROM 103rdBn.	Seaford	10-1-17	Pt. 2. D.O. 1
6.2.17	Do.	Reverts to ranks on proceeding overseas	Do.	4.2.17	" " #28.
7.2.17.	Do.	S.O.S. on trans to 54th Batty.	Do.	7.2.17.	" " #29.
13-2-17.	54th Bn	T.O.S. from 16th Res Bn	Field.	8.2.17	Pt II Do. 25.
18-3-18	54th Bn	Granted Good Conduct Badge	Pte	18-1-18	Pt II 19
14.5.18	"	Appt L/Cpl	"	12.4.18	" 44
16-8-18	54 Bn	Wounded	Fd	9-8-18	Amt 2177/23.

A.F.B. 103 CHECKED

W.B. 13 FEB 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.
19-8-18	BCRD	TOS from 54 Bn	L/C	Seaford	13-8-18	& 54 Bn Pt II 84 Pt II 198. & 21-8-18
14-12-18	"	on Com C.H.D. Buxton	"	"	16-12-18	Pt II. O. 298
21-1-19	"	Ceases on Com C.D.D. Buxton & S.O.S. to C.E.F. in Can. MD 11	"	"	3-1-19	-21

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12a.
50m.—6-16.
1772—39—819.

Sheet No. 2. Mrs Emma West.

Name of Soldier West. C.E.

PAYMENTS. 706819 — Pte — 10 3 8 Bn

L. L. Job 4503. - Req. 6332.

10.00 Nov 1/16

	Month.	Year.	Cheque No.	Amt.	Remarks.
	April	1916			
	May				
	June				
	July				
	Aug.				
adj noted	Sept.				
	Oct.				
HD	Nov.				
	Dec.	G	35583	20	
	Jan.	1917 F	41337	10	
	Feb.	G	48192	10	
	March	J	53966	10	
	April		K5544	10	10
	May		K12074	10	
	June		J19492	10	Cr J19491 Can
	July		C25643	10	
	Aug.	R	33322	10	
McC	Sept.	H	40620	10	
	Oct.		Q45677	10	
	Nov.	T	54402	10	
	Dec.		N63555	10	
	Jan.	1918			
	Feb.			140	
	March				
	April				
	May				
	June				
	July				

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.				

L. L. Job 4503.—M. & D. 6332.

M. F. W. 12.
50m.—6-16.
H. Q. 1772-39-819.

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

To Whom Mrs Emma West.

Address Coombs B. C.

By Whom Assigned West. C.E.

Regtl. No. 706819

Rank Pte

Corps 103 d Battn.

Rate 10.00 Nov 1/16

Sm. 27/10/16 GEH 18/12/16

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 2 ACCOUNT

MARRIED OR SINGLE: Single

PLACE OF BIRTH: Muskoka Dist: Can:

NAME AND ADDRESS OF NEXT OF KIN: John A West.
P.O. Coombs V.I. BC.

RELATIONSHIP OF NEXT OF KIN: Father

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
Apptd Lt-Lieut @ date	9-11-16	DO 787 9-11-16
Reverted to Rank @ date	4-2-17	DO 28. 6-2-17

ADMISSIONS TO HOSPITAL, &c.

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

REG'L. No 706819 RANK ~~Lieut~~ Lt-Lieut. NAME West. Charles Edgar

IF IN PERMT. CORPS WHAT UNIT — UNIT 103rd Batt. TRANSFERRED TO 16th Res: Batt: DATE 1-8-17 AUTHORITY DO 69 7/1/17

PERMANENT FORCE ALLOWANCES — TRANSFERRED TO 54th Batt DATE 2-3-17 AUTHORITY DO 79 7/1/17

PLACE OF ATTESTATION Victoria B.C. — TRANSFERRED TO — DATE — AUTHORITY

DATE OF ATTESTATION Jan 18th 16. — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY MONTHLY $ 10.00 — DATE EFFECTIVE Jan: 1/16

PAYABLE TO ~~Mrs Emma West~~ Coombs ~~B.C. Canada~~ — RELATIONSHIP Mother

ASSIGNED PAY MONTHLY $ 15.00 — DATE EFFECTIVE April 1/18.

PAYABLE TO Mrs. John West, Coombs, B.C. — RELATIONSHIP Mother

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)

DATE	PAY: No. of Days	PAY: Rate	PAY: Amount $	PAY: Amount c.	FIELD ALLOWANCE: No. of Days	FIELD ALLOWANCE: Rate	FIELD ALLOWANCE: Amount $	FIELD ALLOWANCE: Amount c.	WORKING OR SPECIAL PAY: No. of Days	WORKING OR SPECIAL PAY: Rate	WORKING OR SPECIAL PAY: Amount $	WORKING OR SPECIAL PAY: Amount c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1: No.	1: Date	2: No.	2: Date	3: No.	3: Date	4: No.	4: Date	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE: Credit	BALANCE: Debit	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
1916														38 85	28 85															28 85				C.
Aug:																																		Bal from Canada 31.7.16
1-31	31	1	31		31	10	3	10							34 10	33	4/8/16							9 73						9 73	53 87				
Sept:																		166	15/9						9 73					43 80	43 87				
1-30	30		30		30		3								33	34	31/8	76	15.8.					24 33	9 74										
Oct																																			
1-31	31		31		31		3	10							34 10	34	30/9	247	13-10					9 30	9 74					17 04	69 48		45		
Nov:	8		8																																
1-8	28	1.05	29	40	30		3								34 10	283	28 11/16							9 30				10	20	17 50	76 08		50 55		
Dec:																																			
1-31	31		32	55	31		3	10							35 65	357	30 7/16	384	15 7/16					9 30	9 73			10		27 03	84 70		56 30		
Jan:			15	30																															
1917 1-31	31	1.05 10	36	65											36 65	393	17 7/16							17 03				10		27 03	93 35		67 05		
Feby	3		3	45												12	19.1.17							4 74											
1-28	28	1.00	28	50											30 95	66	29.1.17							9 30				10		27 04	97 23		67 05	30 18	
Mch	1		1	10											1 10													10		10	88 33		72 05	16 28	
															46 50															179 17					
Mar: 31	30		33	00											33 00	463	16/2	1575	7/3	546	16/3/17			261	261	262				784	113 49		77 05	36 44	
Apl.	30		33	00											33 00													10		10	136 49		82 05	54 44	
May	31		34	10											34 10	161								2 67											
																123	20/4							5 23				10		17 90	152 69				
																235	21/5							2 67											
June	30		33												33 00	331	2/6							2 68				10		15 35	170 34				
			371	75										28 85	400 60									105 89	41 55	262		80	20	230 26					
																								105 89	41 55	262		80	20	230 26					

Appt'd Lt-Lieut @ date 9-11-16 DO 787 9-11-16
New Assignment
24005 — Manchr. Regt. 2/5 7/16

Transf'd 16th Res: Bn. 7/1/17. DO 69 7-1-17
Transf'd 54th Bn. DO 79 7/1/17. ES 3/1/17
Reverted to Rank 4/4/17. DO 28. 6/4/17

706819. Pte. West, C.E. assigned Pay $10.00

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
			371	75										28 85	400 60									105 89	41 55	262		80	20	236 26	170 34		92 05	~~920~~	
July	31	1.10	34	10											34 10													10		10	194 44				
Aug	31		34	10											34 10	544 442	2/7 12/6							267 268				10		15 35	213 19				
Sept	30		33												33	629	17/7	722 872	1/8 2/8					5 35	268 267			10		20 70	225 49		L 109 ~~05~~	118 44	

Month	Particulars	Cr. 1	Cr. 2	Particulars	Dr. 1	Dr. 2	Dr. 3	Dr. 4	Balance	Deferred Pay	Sep. Allce. Eng.
Balance Ford		~~225 49~~							225 49	109	
Oct	P.P	34 10		CAP				10			
				A/R 971. 54th Bn 3/9/17.	2 67				246 92	105	
		34 10			2 67			10			
Nov	"	33 —		A/R 1182 2/10/17 54th Bn	4 46						
Dec	"	34 10		A/R 249 18/10/17 C.D.T.R.R.C.	3 57						
				A/R 1085 16/9/17 54th Bn	2 68						
				A/R 1033 25/11/17 75th Bn	13 38						
								10			
				Can A/P for Nov & Dec				10	269 93	118	
1918		67 10			24 09			20			
Jan	31 " "	34 10		Can A/Pay				10			
				AR341-4 Div. W.C.C.R.C. 4/11	4 46						
				" 708 " 3/12	3 57						
				" 1756 54 Bn 15/12	4 46				281 54	120	
		34 10			12 49			10			
Feb.	"	30 80		AP				10			
				" F64-2397 54 Bn 19/1.	97 33						
				" 1985 " 24/1.	4 46						
				" 1843 " 1/1.	4 46						
				" 1929 " 15/1.	3 57						
				CP 88139. 26/1.	24 33				168 19	125	
		30 80			134 15			10.			
March	" "	34 10		A.P.				10			
				A/R 2167. 24/2/18. 54 Bn.	4 46				202 29 26 06 176 23		
				" 2090. 15/2/18. " "	8 03						
				" 2268. 16/3. " "	3 57				176 23	130	
		34 10			16 06			10			

Month	Particulars	Cr. 1	Cr. 2	Particulars	Dr. 1	Dr. 2	Dr. 3	Dr. 4	Balance	Deferred Pay	Sep. Allce. Eng.

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY. * ENGLAND or CANADA.	SEPARATION ALLOWANCE. * ENGLAND or CANADA.
EFFECTIVE DATE:- 1/4/18	EFFECTIVE DATE:-
AMOUNT:- 15⁰⁰	AMOUNT:-

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 John West. A2M.
Coombs. B.C. mother.

NAME:- WEST. C. E.
NUMBER:- 706819.

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Pte.
B.O. 44. 14/5/18.	12-4-18	L/Cpl.

UNIT AND TRANSFERS

ORIGINAL UNIT:- 103 Bn.
DATE ACCOUNT FIRST OPENED:- 1/8/16.

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			54 Bn.
B.O. 198. 19/8.	1/9/18.		B.C.R.D.
			Canada Res

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
20/11/18	8166.	Orp.	~~9 15~~			L.C. Cr balance	~~2 15 10~~ 243 40
10/12/18	9111	✓	~~5 8 6 7~~ 5 8 4 0				
S.P. 10/12/18 - 20/12/18 10 days.			7 3 0				
			5 1 1 0				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1	10		
B.O. 44. 14/5/18.	1 05	10		

PARTICULARS OF RENDERING NON-EFFECTIVE:- Transf^d Canada 31/12/18 Orp. 18 B/15. 9/1/18

MONTH 1918	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
Mch. 31.	Bal fwd.								176 23	130	
Apl	P. pay	33		a/R 18. 2/4/18. 54 Bn.	4 46						
				A.P.				15	189 77		
May	L/Cpl P. 12/4/18 - 30/4/18 19 d @ 05	33	95	A.P.	4 46			15			
	L/C pay	35	65	a/R 201. 1/5. 54 Bn.	8 03						
				" 341. 7/5. " "	3 57						
		36	60		11 60			15	199 77		
June	" "	34	50	A.P.				15			
				a/R 460. 2/6. 54 Bn.	4 46						
				" 565. 18/6. " "	3 57						
		34	50		8 03			15	211 24	130	
July	" "	35	65	a/R 77. 1/7. 54 Bn.	4 46						
				A.P.				15			
				a/R 817. 15/7. " "	3 57						
		35	65		8 03			15	223 86	130	
Aug	" "	35	65	a/R 919. 6/8. 54 Bn.	3 57						
				A.P.				15			
				a/R 4491. 28/8. Orpington Hos.	4 87					130	
		35	65		8 44			15	236 07		
Sept.	L/C P & A	34	50	L.A.P.				15			
		34	50	D/R A R 5529 16 Genl 25.9.18	4 87			15	250 70	130	
Oct.	L/Cpl. P & A	35	65	6 A.P.	4 87			15	282 35		
				a/R "876 31/10	24 33						
				D/R A R 6521 23/10 Orpington	4 87				242 15		
		35	65		29 20			15	26, 65		
Nov	✓	34	50					15	58 2 30		
Dec	✓	35	65					15	29 4 50		
	Int on Def'd Pay 31/12/18	12	20					30			
		82	35								

NUMBER 706819 RANK L/Cpl NAME West C. E.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
		82 35						30 -	296 50		
	SF. 10.12.18. & 20/12/18 (Clothing) 130.295. 13.12.18 & DD Buxton	7 30		ad 91111 10/12 Overseas	48 67						
				Dred 8146 20/11 "	9 73				243 40		
		89 65			58 40			30 -			
29 July.	DD 298 14/1/18. S. Y. 10/1/18. 20/12/18	7 30		ad 7870 31/12 Buxton	9 73				240 97		
		7 30			9 73						
				D.S. Canada 31.19							
				BO 21. 21/1. BGHD							

2

M. D. 11
No. 52

Demobilization Pay M.D. No. 11

Bolton 4/1/19

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

3999.

AUDITOR | PAYMASTER

M. OR S. S. REGT. No. 706819 RANK L/Cpl NAME (IN FULL) WEST. CHAS. E. (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN — RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? Nil. DATE EFFECTIVE

TO WHOM PAID — RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY
Emp Lt Corpl	31/12/18	
A.O.B.	1-1-19	D.O. 28
Discharged	13-2-19	D.O. 45

ORIGINAL UNIT C.E.F. 103rd Bn. IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION Victoria TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION 18-1-16 TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY $ 15.00 DATE EFFECTIVE 1-2-19 To be continued by New Unit

PAYABLE TO Mrs Emma West RELATIONSHIP ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS Coombs. B.C.

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE EFFECTIVE

DISCHARGED PLACE Vanco DATE 13-2-19 REASON Demobn AUTHORITY D.O. 45 IF ENTITLED TO POST DISCHARGE PAY

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.	OTHER CREDITS $	OTHER CREDITS C.	L.R.C. $	L.R.C. C.	TOTAL CREDITS $	TOTAL CREDITS C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	COL. NO. 1 DATE	COL. NO. 2 NO.	COL. NO. 2 DATE	COL. NO. 3 NO.	COL. NO. 3 DATE	CASH PAYMENTS COL. NO. 1 $	COL. NO. 1 C.	COL. NO. 2 $	COL. NO. 2 C.	COL. NO. 3 $	COL. NO. 3 C.	ASSIGNED PAY $	ASSIGNED PAY C.	REGIMENTAL CHARGES $	REGIMENTAL CHARGES C.	OTHER CHARGES $	OTHER CHARGES C.	$	C.	TOTAL DEBITS $	TOTAL DEBITS C.	BALANCE DEBIT $	BALANCE DEBIT C.	BALANCE CREDIT $	BALANCE CREDIT C.	PARTICULARS OR REMARKS
Amt'd. BALANCE FROM PREVIOUS ACCOUNT 31.12.18		1.15					243	40	243	40	Buxton 31/12/18		Brook 6/1/19		W. Johns 13/1/19		9	73	4	87	5		15				20								243	40	A.P. Jan
Jan 16 31	31		35	65			243	40	279	05	W. Johns 13/1/19						50														18	460			194	45	D.O. 28 14 Subs
Feb 16 13	13	1.15	14	95	11	20	194	45									255	60																			D.O. 45 Cloathing
			135	-	255	60	26	99									70	-													327	60	70	-			1st War Gratuity paid Bal Dr 256.60 PDP
	183 days				W.S.G. 420		420																										420			

War Service Gratuity

Service 3 years — months

Date. Ck No.

						70	70	350		
Mch	19	84	15	70			70	280		
Apl	20	166	795	70			70	210		
May	13	170	943	70			140	140	Rem	
Jun	13	804	925	70			70	70	Rem	
July	13	822	476	70			70		Rem	
				420			420		Stamp	

Certified that all payments have been made on this account for which covering authority has been received to date.

A. H. Lamb Lieut.,
Paymaster, Demobilization Pay
M.D. No. 11

I certify that all payments of War Service Gratuity have been made to the person entitled thereto according to the proof of identification required by the M.F.W. 2696 received herewith.

Officer i/c War Service Gratuity
M.D. No. 11

30M-11-18.—L.L. 50877-M. & D. 9553.

MONTH	PAY AND F.A.				OTHER CREDITS				TOTAL CREDITS		ACQUITTANCE ROLLS						CASH PAYMENTS						ASSIGNED PAY		REGI-MENTAL 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.	

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

W 4529

Date of Assignment
April 1st-1918
Nov. 1/16

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

+0.	15		

PARTICULARS OF SEPARATION ALLOWANCE

No. 776819

Rank Pte. Promoted Reverted Discharge

Soldier's Name C. E. West.

Battalion 103 Battn.

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name Mrs. Emma West.

Address Coombs. B. C.

Change of Address

1

2

3

4

19772. C-11
19142 C.10.

Date 1917	Cheque No.	Amount S/A	Amount A/P	Total		REMARKS
Dec 31			140	140		
Jan	X 72244		10	10	W	assignment increased to 7/15 with effect 1/1/18
Feby	W 71907		10	10	WW	A2mm form on file
march	X 92069		10	10	✓	
april	Y 7825		15	15	✓	
May	W 20064		15	15	✓	
June	J 22998		15	15	✓	
July	B 23152		15	15	✓	
Aug	V 37293		15	15	✓	
Sept	V 47574		15	15	✓	
Oct	K 51406		15	15	✓	
Nov	Q 57380		15	15	✓	
Dec 1918	N 64823		15	15	✓	
Jan	N 74087		15	15	✓	
			320	320		

M. F. W. 128.
4'OM. 6-17—1'72-33-1141
L. L. 22320—M. & D. 1933.

A/c Closed 31-1-19.
Ret'd per "Scotian"
Date 15-1-19. M.F.W.187 M25#11.
Clerk Bellefont.
M.O. 48096 Est. 18-1-19 Ok to pay RMC

OBS 1/18

STENCIL MADE BY THE MARCUS ROSS CO. TORONTO

M.R.O. 3 rendered 1/4/18 H.Palen

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

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.
4'Om. 6-7—1-72-39-1141
L. L. 22340—M. & D. 7993.

Victoria sc.

This space to be for numbers.

M

Proceedings on Discharge.

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

No.	706819.
Rank	L/Corporal.
Surname	West.
Christian name	Charles Edgar.
NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.	
Corps (Squadron, Battery or Company)	103rd Battalion
Date of discharge	13th February 1919.
Place of discharge	Vancouver B.C.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

		Descriptive marks
Age	27 years months.	Scar right cheek.
Height	5 feet 8" inches.	Scar left Elbow.
Complexion	Medium	
Eyes	Brown.	
Hair	Brown.	
Trade	Stationary Engineer	
Intended place of residence (To be given as fully as practicable.)	Coombs. B.C.	

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

DEMOBILIZATION

Authority for discharge.....

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.)

WAR SERVICE BADGE CLASS " " 7

NO. 6240 ISSUED

M. F. B. 218.

200M.—5-18.
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**

District Depot M.D. XI FEB 13 1919 Discharge Section

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, and that I have received my permanent discharge certificate.

(Place)..... C. E. West *(Signature of Soldier.)*

(Date)..... A. J. Ayles *(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.**

District Depot M.D. XI FEB 13 1919 Discharge Section

The discharge of the above-named man is hereby confirmed. 13th February 1919.

(Place).....

(Signature) H.B. Andrews Discharge Section, District Depot, M.D. XI

(Date).....

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.)

None

C. E. Hunt

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form	B. 263
Squadron / Battery / Company } Conduct Sheet,	"	B. 263a
or		
Field Conduct Sheet	"	W. 178
Copies of Convictions, by C. P.		in MS.
Med. Hist. Sheet,	Militia form	B. 313
Casualty Form	"	W. 54
Medical Report for Invalid§	"	B. 227
Dental History Sheet	"	B. 465
Last Pay Certificate	"	W. 44
Duplicate Discharge Certificate	"	W. 39A
‡Form of Will	"	W. 82

§Only if discharged "Medically unfit."

‡Only if man has not been overseas.

Attestation Paper	Militia Form	W. 23
or		
Particulars of Recruit	"	W. 133
Proceedings on Discharge	"	B. 218

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.

Documents not accompanying this form should be crossed out.

I hereby certify that the following documents are unobtainable.

Officer Commanding.

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.

No.16 Canadian General(Ontario)Hospital,
Orpington, Kent.
Date. Dec. 7/18.

The undermentioned soldier is free from Venereal, Infectious skin and all other Infectious Diseases.

Regt.No. 406819. Name. L/C West. C.E.

M.O.i/c. [signature]

PA... 22 B

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

Reserved for M.H.C.

Regt. No. 206819 Rank L/Cpl Surname WEST Christian Name CHARLES E.

Unit or Corps—(a) Overseas from United Kingdom 54th BATTN (b) in United Kingdom 103 BATTN

Born at—Town BARRYDALE County or Province ONTARIO Country CANADA

Date of Birth—Day 18 Month JULY Year 1891 Age 27 yrs. 4 months.

Joined at VICTORIA. B.C. CANADA Date 18. 1. 1916

Former trade or occupation STATIONERY ENGINEER

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

Scar on RIGHT CHEEK ABOUT 3/4"

Height—feet 5 inches 8½ Colour of eyes BROWN

Signature of Soldier (*for identification purposes*) Charles Edgar West

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*) ADHERENT ~~CONTRACTED~~ SCAR LEFT ARM

Disabilities Group (*b*) —

Disabilities Group (*c*) —

2. CAUSE OF DISABILITY

		Place of origin.	Date of origin.
(*i.*) As to Group (*a*) above.	G.S.W	Amiens	Aug. 8th 1918
(*ii.*) As to Group (*b*) above.	—		
(*iii.*) As to Group (*c*) above.	—		

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 ?

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

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

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 ?

(*iii.*) As to Group (*c*) above ?

PART I. (continued).

5. MEDICAL HISTORY. Wounded at Amiens Aug. 8th 1918
Documents show 1st C C S - Wound left arm
3rd Australian hosp. - Wound back of left arm
just above the elbow - 16 Can general Hosp.
Case sheet shows infected wound left arm post
surface with discharging sinus.
19/11/18 Wound healed

6. PRESENT CONDITION.

Contracted scar just above elbow post surface
of left arm limiting flexion of the arm
to a full degree - will improve, Flexion
now is almost normal - Complains of pain
on lifting heavy object - in the arm.

Other Systems Normal

7. OPERATION. (i.) Was one performed? NO (ii.) If so, state what. —

(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? One

(ii.) If so, describe. Extracted

9. DO YOU RECOMMEND:—

(a) Fit for duty? (state category) B1

(b) Invalid to Canada? NO

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

Date of Report Nov 28th 1918

Signed W J Post Capt
Officer in medical charge of case.

Station 16 Can Gen Hosp.
Orpington

Came

I have satisfied myself of the general accuracy of the above Report,
and concur therein *~~except~~

G W Walther
Capt. C.A.M.C.
Asst. Adjt. & Dep.
For O.C. No. 16 Canadian General (Ontario) Hospital

{Officer i/c Hospital / ~~S.M.O.~~ ~~Brigade~~} Strike out one of these

Dated at No. 16 Canadian General (Ontario) Hospital, Orpington, Kent. Station, on 30 NOV 1918 191

*Delete if inapplicable.

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? / Aggravated? } No

(b) Misconduct of the Soldier { Caused? / 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.*) 5% five percent

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*)? 2 months

16. If an operation was advised and declined, do you consider the refusal to have been unreasonable? not applicable

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

18. REMARKS:—

Authority A.G.T. 9083 11/11/18

19. RECOMMENDATION:—

(a) Fit for duty? (*state category*) Bone

(b) Invalid to Canada? No

(c) Discharge from Service as permanently unfit? No

Date of Board 30 NOV 1918

Signatures of the Board: L. M. Morton Capt Cam C. President. W. J. Post Capt Cam C. M. J. Kennedy Capt Cam C.

Station No. 76 CANADIAN GENERAL (ONTARIO) HOSPITAL, ORPINGTON, KENT.

ASSISTANT DIRECTOR OF MEDICAL SERVICES, CANADIANS, LONDON AREA. DEC 9 1918 13, BERNERS ST, LONDON, W.1

Approved [signature] A.D.M.S.

Dated at ..... Major, C.A.M.C. for A.D.M.S., Canadians, London Area. Station

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 706819, Sgt. West, Charles E. 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 :—

C. T. West
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.