| CPT | CHISHOLM | EDWARD ALEX |
|---|---|---|
| **I.D. number**<br>**No. d'identification** | **Surname**<br>**Nom de famille** | **Given names**<br>**Prénoms** |

# PERSONNEL RECORDS CENTRE
# CENTRE DES DOCUMENTS DU PERSONNEL

## PERSONNEL RECORDS ENVELOPE
## ENVELOPPE DES DOSSIERS DU PERSONNEL

**Location**
**Lieu** 1685

**«CONTENTS CONFIDENTIAL»**
**«CONTENU CONFIDENTIEL»**

ARC-1048 (r. 87/05)

# C.E.F. REGIMENTAL DOCUMENTS

NAME CHISHOLM, EDWARD ALEX. REGT. No. CAPT. UNIT 23 BTY H. Q. FILE No. 18764

| CONTENTS | DATE RECEIVED | TO WHOM FORWARDED | DATE FORWARDED | M. F. W. 2505 REFERENCE | NON-EFFECTIVE BY |
|---|---|---|---|---|---|
| ATTESTATION PAPER (M.F.W. 23, 133 or 51) | | | | | DEATH |
| CASUALTY FORM (M.F.W. 54 or A.F.B. 103) | | | | | CATEGORY |
| TRAINING HISTORY SHEET (M.F.W. 113) | | | | | K.A. M.C. |
| FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122) | | | | | 7-11-18 |
| REGT. CONDUCT SHEET (M.B.W. 263 or A.F.B. 120) | | | | | |
| COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121) | | | | | |
| MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 17d) | | | | | DISCHARGE |
| DENTAL HISTORY SHEET (M.F.B. 465) | | | | | CATEGORY |
| MEDICAL REPORT (M.F.B. 227 or A.F.B. 179) | | | | | |
| MEDICAL EXAMINATION (M.F.W. 129) | | | | | |
| TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2) | | | | | |
| PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2) | | | | | |
| DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115) | | | | | DESERTION |
| LAST PAY CERTIFICATE (M.F.W. 44) | | | | | |
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| PARTICULARS OF CHARACTER (A.F.W. 3226) | | | | | |
| COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A) | | | | | |
| CARDS | | | | | |
| PAY-SHEETS | | | | | |

FORCES
CENTRE
JACKET
ROOM

H

1685

BOX 403606

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

Officer No 2 Capt. Chisholm Edward Alexander

# ATTESTATION PAPER.

No.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

## QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name? ..... Edward A Chisholm
2. In what Town, Township or Parish, and in what Country were you born? ..... Antigonish Nova Scotia
3. What is the name of your next-of-kin? ..... Duncan Chisholm (father)
4. What is the address of your next-of-kin? ..... Lismore Nova Scotia
5. What is the date of your birth? ..... July 26 1892
6. What is your Trade or Calling? ..... Law Student
7. Are you married? ..... No
8. Are you willing to be vaccinated or re-vaccinated? ..... Yes
9. Do you now belong to the Active Militia? ..... Yes
10. Have you ever served in any Military Force? .. If so, state particulars of former Service. ..... 18th Battery C.F.A. 3 years
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

Edward A Chisholm (Signature of Man).

Edgar W. Russell (Signature of Witness).

## DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Edward Alexander Chisholm, ~~do~~ solemnly declare that the above answers made by me to the above questions are true, and that I am willing to fulfil the engagements by me now made, and I hereby engage and agree to serve in the **Canadian Over-Seas Expeditionary Force,** and to be attached to any arm of the service therein, for the term of one year, or during the war now existing between Great Britain and Germany should that war last longer than one year, and for six months after the termination of that war provided His Majesty should so long require my services, or until legally discharged.

Edward A Chisholm (Signature of Recruit)

Date Nov 27 1914. Edgar W. Russell (Signature of Witness)

## OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Edward Alexander Chisholm, ~~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.

Edward A Chisholm (Signature of Recruit)

Date Nov 27 1914. Edgar W. Russell (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 Fredericton this 27th day of November 1914.

T. M. Seeley J.P. (Signature of Justice)

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

T. M. Seeley Lt Col. (Approving Officer)

200 M.—8-14.
H.Q. 1772-1-13.

X Capt

Officer

# Description of Edward Alexander Christoleon Enlistment.

Apparent Age 22 years 4 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 10 ins.

Chest measurement: Girth when fully expanded 40 ins.; Range of expansion 5 ins.

Complexion Fresh

Eyes Blue

Hair Black

Religious denominations:
- Church of England
- Presbyterian
- Wesleyan
- Baptist or Congregationalist
- Other Protestants (Denomination to be stated.)
- Roman Catholic Jrs
- Jewish

Distinctive marks, and marks indicating congenital peculiarities or previous disease.

(Should the Medical Officer be of opinion that the recruit has served before, he will, unless the man acknowledges to any previous service, attach a slip to that effect, for the information of the Approving Officer).

## CERTIFICATE OF MEDICAL EXAMINATION.

I have examined the above-named Recruit and find that he does not present any of the causes of rejection specified in the Regulations for Army Medical Services.

He can see at the required distance with either eye; his heart and lungs are healthy; he has the free use of his joints and limbs, and he declares that he is not subject to fits of any description.

I consider him* fit for the Canadian Over-Seas Expeditionary Force.

W. H. IRVINE, M. D.
P. O. BOX 157
FREDERICTON, N. B.

Date November 26 1914. H. W. St. Irvine

Place Fredericton N.B. Ass. Surg. MO
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.

Edward A Christoleon 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.

T. M. Seeley, J.P. (Signature of Officer)

Date 27 Nov 1914.

ORIGINAL.

# MEDICAL HISTORY SHEET.

Cuff

ORIGINAL.

Surname Chisholm Christian Name Edward A.

Examined { on 27 day of Nov. 1914
at Fredericton, New Brunswick

Birthplace { City or Town Lunenburg
County Antigonish Co. Nova Scotia

Apparent age 22 yrs 4 mos.

Trade or occupation Lab Student

Height 5 Feet 10 Inches.

Weight Lbs.

Chest measurement { Minimum 40 inches.
Maximum expansion 5 inches.

Physical development

Small-Pox Marks

Vaccination Marks { Arm Right. Left.
Number

When Vaccinated last

(a) Marks indicating congenital peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

Approved by W. St. Irvine

Rank Lieut. A.M.C. M.O.

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

| Date | Result | Vaccinations. |
|---|---|---|
| | | M.O. |
| | | M.O. |
| | | M.O. |

| Date | Result | Anti-Typhoid Inoculations, Etc. |
|---|---|---|
| 1/2/15 | | W. St. Eagar Lieut. M.O. |
| 11/2/15 | | " " M.O. |
| | | M.O. |

*Enlisted on* 10 *day of* Nov. 191~~4~~ *at* Fredericton N.B.

| | Corps. | Regt'l Number. | Habits. | Date. |
|---|---|---|---|---|
| Joined on enlistment | 23rd Batty C.E.F. | ~~85653~~ | | 10/11/14 |
| Transferred to..... | | ~~85653~~ Capt. | | |

## EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

| Station. | Date. | Disease. | Result. |
|---|---|---|---|
| | | | |

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

M. F. B. 313.

50M—9-14.
H. Q. 1772-39-439.

Surname Christoher Christian Name Edward A.

| STATION. | Date of Arrival at the Station. | Dates of Admission into Hospital. | | | Dates of Discharge from Hospital. | | | DISEASE. | Number of days in Hospital. | Remarks on nature of the disease: how induced: if mild or severe: if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations. | Signature of Medical Officer. |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | | Day | Month | Year | Day | Month | Year | | | | |
| | | | | | | | | | | | |

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

M. F. W. 54. (A. F. B. 10s.
500M.—9-16
H. Q. 1772-39-920.

# Casualty Form—Active Service.

Capt. Unit, Regiment or Corps 23rd Bty 6th Bde CFA

Regimental No. ~~Lieut~~ Rank C. E. F. Name Chisholm Edward Alexander

Enlisted (a) 27-11-14 Terms of Service (a) Service reckons from (a) 11-11-14

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 | | | | |
| | | Ex-Can. Proceeded Overseas | 27-2-15 | | |
| | | on strength Res Bde CFA. | Shorncliffe | 26-4-15 | auth AFB158 |
| 24-11-15 | GOC CTD | SOS trans to R FA. | Shorncliffe | 22-11-15 | Lon Gazette 16-11-15 R.O. 2745 W.O. L11743/1 amended by Lg 22-2-16 RL-9-C-53. |

H. Langman
~~Capt~~
for DOR

(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 | | | | |
| | | | | | |

Rank and Name CHISHOLM, Edward A.

Regimental No. Captain

Unit 6th. Bdge. C.F.A.

Date of enlistment Feb. 27th. 1915

Place of birth Harve Boncher N. S.

Married (Yes or No) No

If in Permanent Force

Promotions or appointments

Name and Address of Next-of-kin

Duncan Chisholm (Father)

Linwood ~~Cut~~ Co. N.S.

Antigonish Co.

Canada.

Date and place of discharge

Reason for discharge

Character on discharge

A.F.B. 1 NOV 1915

H

M

| 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 |
|---|---|---|---|---|---|
| | | | | 9-6-15 | Muster Roll |
| | | Ch. Strength Res. Bdge. C.F.A. | Shorncliffe | 26-4-15 | A.F.B 158 |
| 17-4-15 | Cond. Can G.G.C. | Qualified as Musk. Inst. | Shorncliff | 6-14/8/15 | Routeword. 336 ~~Lon. Gazette 16-11-15~~ |
| 24-11-15 | C.T.D. | Transferred to R.F.A. | do | 22-11-15. | ~~R.O. 3745. W.O. L. 11743~~/1 Amended by London Gazette 22-2-16. R.L.-9-C-53. |
| 18/5/17 | W.O. | Mentioned in Despatches | | | Lon Gg. 30077. |

4028

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

NAME Chisholm. E. A. REGT. No.

RANK AND UNIT Capt Res Bde C.F.A.

NEXT OF KIN

| CABLE No. | CABLE DATE | NATURE OF CASUALTY |
|---|---|---|
| 02289. 1-2. | 25-1-19. | S. of S (Imperial army). War Office Reports. K. in A. Nov. 7th /18. |

S 1717. 23-1-19. Eng. Mrs. F. Chisholm Stuart 919 Watertown St W Newton Mass U S A

M. F. W. 42—100M.—8-18.
H.Q. 1772 39-893.

| LIST No. | HOSPITAL | DATE OF ADMISSION | REMARKS |
| --- | --- | --- | --- |
| | | | |

Memorial Cross. Imperial

Temp. Capt. (Acting Major)
Chisholm, Edward Alexander

Applicant - Mrs. M. Chisholm (m)
Linwood, Antigonish Co., N.S.

File No- 349-20-3.
Date Recd 13/2/21.

Issue of M x approved
[illegible]
16/5/21.

M 50360 MAY 30 1921 871

| LIST No. | HOSPITAL | DATE OF ADMISSION | REMARKS |
|---|---|---|---|
| Pro forma asked 7.7.24 | 1914-15 * B+V by W.O. | 349-20-3 | 10 10/24 |

Number..... Rank CAPT

Surname CHISHOLM

Christian Name EDWARD A

Unit..... Theatre of War ENG 23/2/15

Date of Service {S.O.S. to R.F.A. 22.11.15 / Lon. Gaz. 22.2.16}

Remarks W.O. Roll no. 2 Page 99 / W.O. N/W/9/1783 of 5.5.20

6 F.A.

Latest Address Col. H.A. Chisholm (B) Linwood, N.S.

Roll No. A Page 508

NAME REGT. No.

RANK AND UNIT

NEXT OF KIN

| CABLE | | NATURE OF CASUALTY |
|---|---|---|
| No. | DATE | |
| | | |

M. F. W. 42—100 M.—8-18.
H.Q. 1772 39-893.

D 7/11/18

SURNAME. Chisholm 349-20-3

CARD NO.

FOLL.

CHRISTIAN NAMES Edward A.

REGL. NO. ~~85502-85653~~ RANK Captain

UNIT ~~23rd Bty~~ Res Bde

FORMER CORPS 18th Bty. C.F.A. Capt. 3rd Bde. F.A. 20-6-14 (Auth O.G.L. Nov. 1st 1915)

NEXT OF KIN.

NAMES IN FULL Chisholm, Duncan

RELATIONSHIP TO SOLDIER Father

ADDRESS Linwood, Antigonish Co., N.S.

~~CHANGE OF ADDRESS~~ Also Notify.

Miss Constance Willing:
231 Major St.,
Toronto, Ont.
Letter 20-3-17

COUNTRY OF BIRTH Canada, Havre Boucher, N.S. DATE July 26th 1892

PLACE OF ATTESTATION Fredericton, N.B. DATE Nov. 27th 1914

O/S. 23-2-15 49/3

L. L. 94504. M. & D. 6512.

M. F. W. 22. 250M.—2-16. H. Q. 1772-39-339.

Date of sailing 11-6-15
Date of appt. 10-11-14
(auth. O.C.L. Nov. 1st. 1915.)

MARRIED SINGLE ✓ WIDOWER

TRADE OR CALLING Law Student RELIGION Roman Catholic

DESCRIPTION.

APPARENT AGE 22 YEARS 4 MONTHS

HEIGHT 5 FEET 10 INCHES

CHEST MEASUREMENT 35 INCHES EXPANSION 5 INCHES

COMPLEXION Florid EYES Blue HAIR Black

DISTINGUISHING MARKS Nil

MEDICAL EXAMINATION. PLACE Fredericton N.B. DATE Nov. 27th 1914.

No. Rank Capt Name Chisholm. E. a.

T.O.S. 10-11-14 Unit 23rd. Battery, 6th Brigade, C.F.A.
D.O.# 19 26-11-14

M.D. 6

| Paid From | Paid To | Sig. or Rec't | Promotions, Transfers, Discharges, etc. | |
|---|---|---|---|---|
| | | | Particulars | Authority |
| ~~1914~~ Nov. 10 | ~~1914~~ Dec. 31 | ✓ | | |
| 1915 | Jan. 1915 | ✓ | | |
| | Feb. | ✓ | | |

UNIT SAILED
FEB 23 1915

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

| Date | Brief details, and signature |
|---|---|
| 1-2-15. | Anti-Typhoid Inoc. W.H.Eagar. Lieut. |
| 11-2-15. | " " " " |

**Table IV.—Service Table.**

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

Medical History Sheet of this Man.
C.A.M.C.
For the Officer in Charge of Records
Canadian Contingents.

MF

# DUPLICATE.

ARMY FORM B. 178.

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

H

10/2/22

## MEDICAL HISTORY of

*Surname* CHISHOLM *Christian Name* Edward A.

TABLE I.—GENERAL TABLE.

Birthplace ... Parish Havre Boucher County N.S.

Examined ... ... ... on 27th day of November 1914, at Fredericton, N.B.

Declared Age ... ... 22 years 4 mths days.

Trade or Occupation ... Law student

Height ... ... ... 5 feet 10 inches.

Weight ... ... ... lbs.

Chest Measurement: Girth when fully Expanded 40 inches. Range of Expansion 5 inches.

Physical Development ...

Vaccination Marks: Arm ... Right Left; Number

When Vaccinated ... ...

Vision ... ... ... R.E.—V= L.E.—V=

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

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

Approved by (*Signature*) Lt. W.H. Morel
(*Rank*) A.M.C
*Medical Officer.*

Enlisted ... ... ... at Fredericton N.B. on 27th day of November 1914.

| | Corps. | Regtl. No. |
|---|---|---|
| Joined on Enlistment ... | 23rd Batty. C.E.F. | Capt. |
| Transferred to ... ... | | |

Became non-effective by ...

on day of 191 .

(*Signature*)
(*Rank*)

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

H. Kemmis Betty
Lieut.-Col.
In Charge of Records,
Canadian Contingent.

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

Forms B. 178 / 39

P.T.O.

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

| Name of Hospital | Admitted to Hospital | | | Discharged from Hospital | | | Disease | Number of days in Hospital | Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet. | Signature of Medical Officer |
|---|---|---|---|---|---|---|---|---|---|---|
| | Day | Month | Year | Day | Month | Year | | | | |

NAME Chisholm, E.A. (Captain) UNIT 6 Bgde C.F.A

DATE OF APPOINTMENT

MARRIED (YES OR NO)

NEXT OF KIN:— NAME

ADDRESS

ASSIGNED PAY:—

MONTHLY AMOUNT

TO WHOM PAYABLE

1915-16

DATE NON-EFFECTIVE AND CAUSE Transf. to R.F.A. 17.11.15. L.G. 11327 d/16/11/15
LPC Cosc Hq 4.1.16. d 30/11/15.

BANK IN WHICH PAY & ALLOWANCES DEPOSITED Bank of Montreal

| PERIOD From 1915 | To | No. of Days | Regtl. Rate | PAY Amount of Regimental | Command | Adjutant | Cr. from Prev. Account | Total Pay | Rate of Field Allowance | ALLOWANCES Amount of Field Allowance | P.F. Allowance | Messing | Subsistence | Total | Total Pay and Allowances | Assigned Pay | Sundry Deductions | Net P.A. | Paid in Cash | Deposited in Bank | Carried Forward | Remarks |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1/4 | 30/4 | 30 | 3 | 90 | | | | 90 | 75 | 22 50 | | 30 | | 52 50 | 142 50 | | | 142 50 | | 142 50 | | |
| 1/5 | 31/5 | 31 | 3 | 93 | | | | 93 | 75 | 23 25 | | 31 | | 54 25 | 147 25 | | | 147 25 | | 147 25 | | |
| 1/6 | 30/6 | 30 | 3 | 90 | | | | 90 | 75 | 22 50 | | 30 | | 52 50 | 142 50 | | | 142 50 | | 142 50 | | |
| 1/7 | 31/7 | 31 | 3 | 93 | | | | 93 | 75 | 23 25 | | 31 | | 54 25 | 147 25 | | | 147 25 | | 147 25 | | |
| 1/8 | 31/8 | 31 | | 93 | | | | 93 | | 23 25 | | 31 | | 54 25 | 147 25 | | | 147 25 | | 147 25 | | |
| 1/9 | 30/9 | 30 | | 90 | | | | 90 | | 22 50 | | 30 | | 52 50 | 142 50 | | | Total Deductions | ~~142 50~~ | 142 50 25 SEP 1915 | | |
| 1/10 | 31/10 | 31 | | 93 | | | | 93 | | 23 25 | | 31 | | 54 25 | 147 25 | | | | ~~147 25~~ | 147 25 | | |
| 1/11 | 30/11 | 30 | | 90 | | | | 90 | | 22 50 | | 30 | | 52 50 | 142 50 | | ① 66 50 | | | 142 50 | Dr Bal 66 50 | ① Transf to R.F.A. L.G. 11327 16/11/15 O/P-P&A 17/11/15 to 30/11/15 V#1290 |
| 1/12 | 31/12 | | | | | | ② 66 50 | 66 50 | | | | | | | 66 50 | | 66 50 | | | 159 00 | | ② Refund of O/Pint by Bk of Montreal 30/11/15 |
| | | | | | | | | | | | | | | | | | | | | | 66 50 | O/P fr. 17-30/11/15. V#1290. |
| ~~17/4~~ | ~~30/11~~ | ~~14~~ | ~~3~~ | ~~42~~ | | | | ~~42~~ | ~~75~~ | ~~14 50~~ | | ~~14~~ | | ~~24 50~~ | ~~66 50~~ | | ~~66 50~~ | | | | | |

~~Entered & cancelled~~

~~Refunded by B of M. £13. 13. 3. on 30/11/15.~~

## SUNDRY PAYMENTS

| DATE | | CHEQUE No. | PARTICULARS | AMOUNT $ | C. | £ | S. | D. | REMARKS |
|---|---|---|---|---|---|---|---|---|---|
| May | 5 | 941 | Gratuity all. | 10 | | 2 | 1 | 1 | RO 3745 24/11/15 O.O on trsf to RSA 22/11/15 |
| | 7 | 1448 | Outfit all | 100 | | 20 | 10 | 11 | |

REMARKS

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

| Date | Brief details, and signature |
|---|---|
| 1-2-15. | Anti-Typhoid Inoc. W.H.Eagar. Lieut. |
| 11-2-15. | " " " " |

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

MF 113

ORIGINAL.

Capt.

ARMY FORM B. 178.

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

# MEDICAL HISTORY of

*Surname* CHISHOLM *Christian Name* Edward A.

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Height ... ... ... 5 feet 10 inches.

Weight ... ... ... lbs.

Chest Measurement: Girth when fully Expanded 40 inches. Range of Expansion 5 inches.

Physical Development ...

Vaccination Marks: Arm ... Right Left; Number

When Vaccinated ... ...

Vision ... ... ... R.E.—V= L.E.—V=

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

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

Approved by (*Signature*) Lt. W.H. Morel

(*Rank*) A.M.C

*Medical Officer.*

Enlisted ... ... ... at Fredericton N.B. on 27th day of November 1914.

Joined on Enlistment ... Corps. 23rd Batty. C.E.F. Regtl. No. Capt.

Transferred to ... ...

Became non-effective by ...

on day of 191 .

(*Signature*)

(*Rank*)

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

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

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

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

(4887.) W. 9507/1588. 500M. 9/15. C. P. LTD.

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P.T.O.

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

| Name of Hospital | Admitted to Hospital | | | Discharged from Hospital | | | Disease | Number of days in Hospital | Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet. | Signature of Medical Officer |
|---|---|---|---|---|---|---|---|---|---|---|
| | Day | Month | Year | Day | Month | Year | | | | |
| | | | | | | | | | | |