

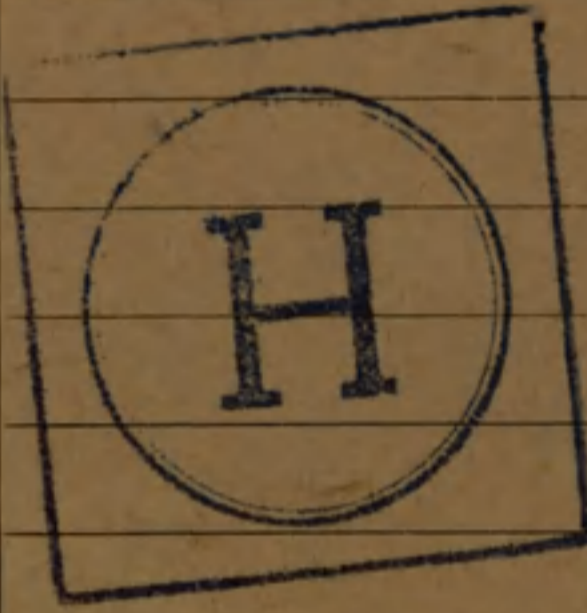
C.E.F. REGIMENTAL DOCUMENTS

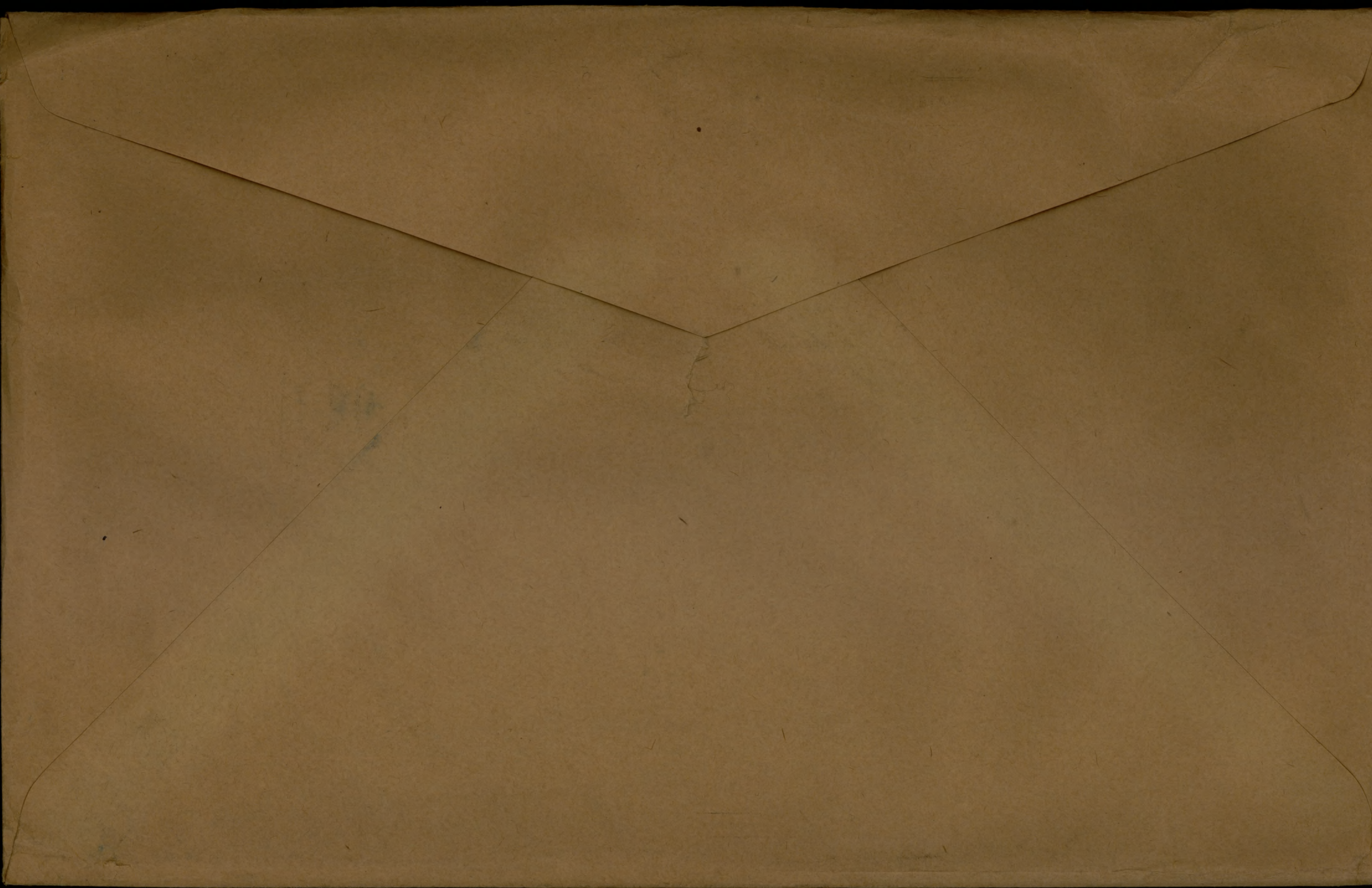
NAME CLAXTON CHARLES ROLAND REGT. No. 50411 UNIT 18 BN H. Q. FILE No. 23788



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)					
FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
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. 17j)					DISCHARGE
DENTAL HISTORY SHEET (M.F.B. 485)					CATEGORY
MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					M.U.
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)					
PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
PARTICULARS OF CHARACTER (A.F.W. 3226)					
COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
CARDS					
PAY-SHEETS					

Deceased 14-12-34





6078
Provisional

54047/104 48

ATTESTATION PAPER.

No. 10

Folio. Staff

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name? *Clayton, Charles Roland*
 2. In what Town, Township or Parish, and in what Country were you born? *London, Eng.*
 3. What is the name of your next-of-kin? *Mrs. Sarah Ann Clayton*
 4. What is the address of your next-of-kin? *19 McKay Ave, Gall.*
 5. What is the date of your birth? *11 Feb. 1874*
 6. What is your Trade or Calling? *Carpenter*
 7. Are you married? *Yes*
 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?.. *Garrison Art. S.A.*
If so, state particulars of former Service.
 11. Do you understand the nature and terms of your engagement? *Yes*
 12. Are you willing to be attested to serve in the} *Yes*
CANADIAN OVER-SEAS EXPEDITIONARY FORCE?}
- C. H. Clayton* (Signature of Man).
J. W. Widdell (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

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

Date *Nov 2* 1914. *C. H. Clayton* (Signature of Recruit)
J. W. Widdell (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Charles Roland Clayton*, do make Oath, that I will be faithful and bear true Allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will as in duty bound honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity, against all enemies, and will observe and obey all orders of His Majesty, His Heirs and Successors, and of all the Generals and Officers set over me. So help me God.

Date *Nov. 2* 1914. *C. H. Clayton* (Signature of Recruit)
J. W. Widdell (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 *Gall.* this *2* day of *Nov.* 1914.

A. J. [Signature] (Signature of Justice)

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

[Signature] (Approving Officer)

6078

Description of Chas. R. Claxton on Enlistment.

Apparent Age 40 years months.
 (To be determined according to the instructions given in the Regulations for Army Medical Services.)

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

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

Height 6 ft. 0 ins.

Chest measurement { Girth when fully expanded 41 ins.
 Range of expansion 3 ins.

Complexion Fair

Eyes Blue

Hair Light Brown

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

Meningitis
operation marks on both joints

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 Nov. 2 1914.

Place Galt

John H. Katz
 Major
 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. Roland Claxton 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.

W. Kemp (Signature of Officer)

Date Nov. 2 1914.

CANADIAN EXPEDITIONARY FORCE

6078

Discharge Certificate

This is to Certify that No. 50411 (Rank) Corporal

Name (in full) CLAXTON, Charles Roland enlisted in
the 18th. Battalion C.E.F.

CANADIAN EXPEDITIONARY FORCE at Galt, Ontario on the Second
day of November 19 14

HE served in Canada, England, France and Belgium.

and is now discharged from the service by reason of being medically unfit for further
general service. Auth. Routine order #668. d/14-6-18.

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

Age 48 years 7 months

Height 5 feet 11 inches

Complexion Fair

Eyes Blue

Hair Lt. Brown.

Marks or Scars

Nil.

C. H. Claxton

Signature of Soldier

Chas. Lewis

For O. C. 1st Bn. 8th Garr. Regt.

Capt. B. J. J.

Issuing Officer

Rank

Date of Discharge 15/8/18.

Appointment

Signed at London, Ontario this 15th. day of August 19 14

in Military District No. I

File Reference No. I.D. 30 C.494. d/9-8-18.

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.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

No. 504II (Rank) Corporal Name CLAXTON, Charles Roland

Unit 1st. Battn Cdn. Garr. Regt.

Address on Discharge 321 Ottaway Ave, London, Ontario

Character and Conduct Very Good.

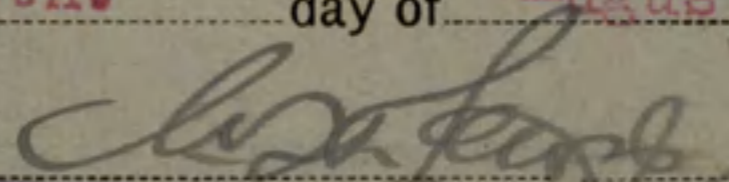
Former Occupation Carpenter.

Special Qualifications of Value in Civil Life Nil.

Medals and Decorations Nil.

Remarks Nil.

Signed at London, Ontario this 15th. day of August 1918.


Name of Officer Capt. & Adj.
For O.C. 1st Bn. Cdn. Garr. Regt.

Rank

Appointment

add. Dec M. S. 1

Ref. Letter H. L. file

.....
"D"

.....
A T I O N .

69

.....
E BADGES

No. 50411 Name Claxton, C.R.

Sqn., Batty.,
or Company } /

Corps

18th. Batt.

Date of
enlistment } 2/11/14

G.C.
Badges } ✓

Service or
Proficiency Pay } ✓

Date of last entry in
Company Conduct Sheet } nil

No. and date
of last drunk } nil

Period not reckoning towards
freedom from extra fine }

Sheet No. 1/10

Signature O.C.
Company, etc. }

Character

Good

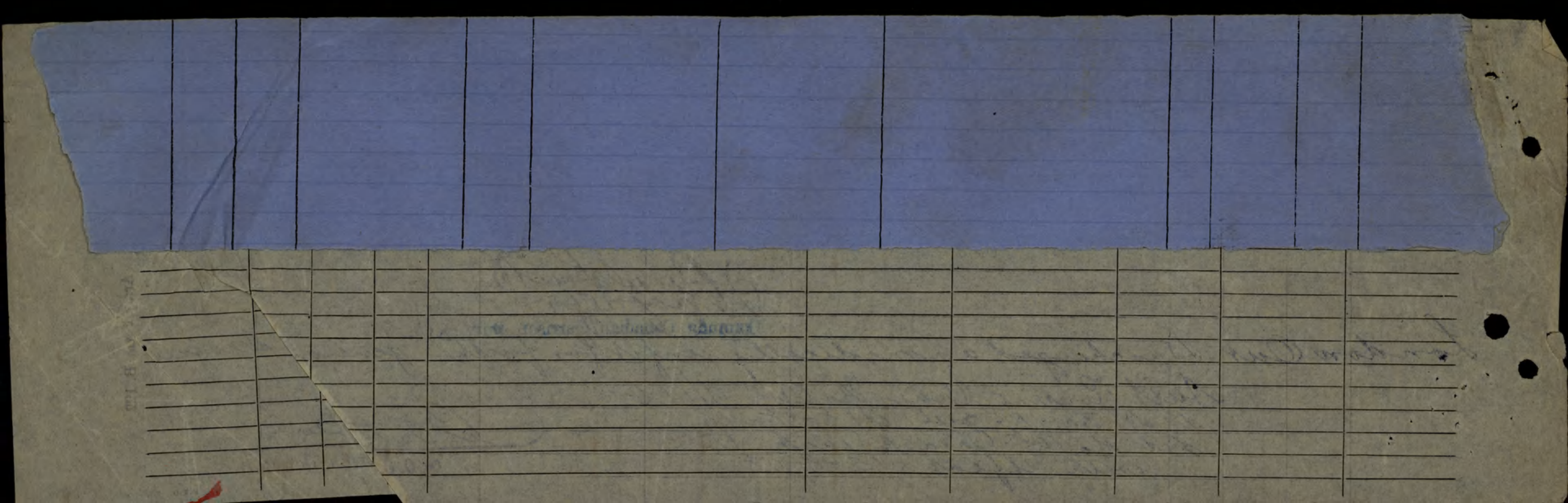
Place	Date of offence	Rank	Cases of Drunkenness	Offence	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remarks
	26/2/14			Certified no entries since attachment to this unit					
London Out				Discharged as medically unfit for further general service.	James Smith Lt. Col. Command. Canadian Garrison Regt. And.				
				Auth Routine Order No 668 d/14-6-18					
				1. D. 30-K-214. d/8-8-18.					
				D.O. No 105-Para A Part II with effect 15-8-18.					

CERTIFIED CORRECT
ALL ENTRIES MADE

For O. C. Lt. Bn. Odn. Garr. Regt.

[P.T.O.]

ARMY FORM B. 122



Date of Enlistment

MLITIA AND DEFENCE

Date of Assignment

2-11-14

Separation and Assigned Pay Branch

Feb 1/16

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

20			
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RATE OF ASSIGNMENT

20			
----	--	--	--

147040

PARTICULARS OF SEPARATION ALLOWANCE

No. *0101* *50411*
 Rank *Pte* Promoted Reverted Discharge
 Soldier's Name *L. R. Claxton*
 Battalion *A. M. L. Hd. 18th Batta*
 Beneficiary *Mrs Sarah A. Claxton*
 Relationship *Wife*
 Address *19 Mackay Ave. South St. Galt-ont*

PARTICULARS OF ASSIGNMENT

Name *Mrs L. R. Claxton*
 Address *19 Mackay Ave*
 Change of Address *South St. Galt-ont*
 1
 2
 3
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
<i>a.p. to Nov 30</i>					
<i>1917</i>					
<i>Dec 31</i>		<i>758 98</i>	<i>540</i>	<i>540</i>	
<i>Dec 31</i>	<i>B63205</i>		<i>20</i>	<i>20</i>	<i>6</i>
					<i>C.P.M. wishes to be paid Oct Nov Dec 15 & Jan 16 this date 3 1/2</i>
					<i>Unable to total a.p. pending reply from C.P.M.</i>

A/c Closed 31-12-17
S.A. 758 Ret'd per Saxon
AP 540
 Date *17-11-17* E. X. *18-12-17*
 Clerk *J. M. A. P.*

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

0078
507330101
MEDICAL HISTORY SHEET.

Surname Clayton Christian Name Charles Roland

Examined { on 2nd day of November 1914
at Galt-Ontario
Birthplace { City or Town London
County England

Approved by D. H. Hogg Major
Rank W. Garrow Capt M.O.

Apparent age 40 years
Trade or occupation Carpenter
Height 6 Feet 5 Inches
Weight ✓ Lbs.
Chest measurement { Minimum 38 inches
Maximum expansion 41 inches
Physical development Good
Small-Pox Marks None
Vaccination Marks { Arm Right ✓ Left ✓
Number ✓

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT,
4.1.18	Ci	W. Garrow Capt M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

When Vaccinated last ✓
(a) Marks indicating congenital peculiarities or previous disease None

Date	Result	VACCINATIONS.
1914	good	D. H. Hogg M.O.
		M.O.
		M.O.

(b) Slight defects but not sufficient to cause rejection
Operation mark on both groins

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
9/19	good	D. H. Hogg M.O.
1914	good	D. H. Hogg M.O.
20 FEB 1917	TAB	W. Garrow M.O.

Enlisted on day of 1914 at

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment		50411		
Transferred to.. ..	<u>1st Balln C.S.R.</u>	50411		11/3/17 30-4-18

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>Hastings</u> <u>London out.</u> <u>Examined by</u> <u>London, Ontario</u>	<u>19/2/17</u> <u>4.1.18</u> <u>Medical Board</u> <u>6-8-18</u>	<u>Rheumatism</u> <u>Rheumatism</u> <u>Rheumatism</u>	<u>C-3. W. Garrow Capt</u> <u>Ci</u> <u>W. Garrow Capt</u> <u>Category "C" III</u> <u>J. H. Fuller Capt</u>

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.

CANADIAN

227
Camp

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Report No. **14149** Class **C-111** Duty **C-111**

Claxton, Charles R.
19 McKay Ave.,
Balt, Ont.

No. of M. H. C. File No. of Local File No. of H. Q. File

No. **50411** Rank **Cpl.** Original Unit **18th** Present Unit **18th**

Age **47** Height **5 ft. 11 1/2 ins.** Complexion **fair** Eyes **blue** Hair **l. brown** Character **N.R.**

Date of enlistment **2-11-14** Where enlisted **Galt** Where seen service **France.**

Ship returned by **Gamma 25** Date of arrival **30-11-17** Port of arrival **Hfx.**

Birthplace **England** Religion **C.of E.**

Name and address next of kin **Wife, Mrs. S.A. Claxton, same address.**

Cause of disability **Arthralgia.**

Condition which prevents the soldier from earning a full livelihood

France 14 months. Returned to England with rheumatic fever & was in Hospital for 85 days. (In Sept. 1916 to Feb. 1917) May 1917 sustained right collar fracture. Bone is now healed causing no disability. Had double castration done in 1914, reason not known. Present Condition: - Complains of pain in right shoulder, hips and knees. Worse in damp weather. States he is still run down from the effects of his rheumatic fever; has no heart lesion; respiratory system negative. Likely to be raised in category in three months.

Degree of incapacity (Please state in fractions) Eng. Board **-1/3-** Canadian Board **15%**

Probable duration of incapacity **3 months.**

Is final disability likely to prevent return to previous occupation? **Does it render him perm. unfit for Mil. Service? No.**

Recommendation of Canadian Board **Duty**

Destination to which transportation issued **London, Ont.**

Members of Board **A. HAIG CAPT. F.J. SCULLY LIEUT. F.J. COUGHLIN LIEUT. E.A. ROBERTSON CAPT.**

INFORMATION TO BE FURNISHED BY SOLDIER

DEPENDENTS	NAME	AGE	WHERE-IF EMPLOYED	WAGES	STATE OF HEALTH
Wife	Wife	43			
Children 1					
2					
3	3 eldest,	12			Good
4					
5					

Occupation prior to enlistment **Carpenter**

Regular trade or profession **do**

Average earnings previous to enlistment **2.50 a day** Any other income

Name and address of last employer **T. Hain, Galt, Ont.**

Rent per month **If purchasing property amount due and annual payment, \$ 1000.00 \$ Int. 6%**

Taxes **Wifepays** If Homestead, when is patent due?

If carrying life or accident insurance, annual premium **Prudential, Wife pays.**

If in receipt of sick benefits or other insurance—name of society **Amt. per mo. \$**

If **unable** to follow previous occupation, name, preference **after improvement.**

At what age soldier left school? **What grade, standard, &c., was he in? N A.**

Has he taken any Technical or Continuation classes, if so what?

Whether given Vocational Training while in Hospital in England. If so, what subjects?

References **Last empl.**

Witness **J. McDonnell** I declare that the above statement is correct.

Date **Quebec 11-12-17.** Signature **C.R. Claxton**

Recommendation by Interviewer as to classes likely to be of use, and general remarks:

Last Pay Cert. Cr., \$ Dr., \$ Amount paid at Depot H. Q., \$ L. P. C. leaving Depot, \$

Amount forwarded to H. Q. Unit, \$ Credit Clothing allowances, \$

Transf'd to Unit—Date Transf'd Class 1—Date Transf'd Class 3—Date

PENSION—Class..... Amount per year, \$..... Period granted for..... Dating from.....

First payment date.....

CLASS 3—Men having a permanent disability which would not be benefited by further medical treatment (such disability due to or aggravated by service) and who—cases will immediately be considered by the Pensions Board with a view to pension.

CLASS 2—Men whose condition may be benefited by further medical treatment or rest in a Convalescent Home, Hospital or Sanatorium. If deemed advisable, in some cases the medical officer in charge of the Convalescent Home, Hospital or Sanatorium may grant these men leave to return to their own homes and families for a definite period.

CLASS 1—Men for immediate discharge without a pension. (a) Unfit for overseas service but capable to take up their previous civilian occupation. (b) Disability not the result of or aggravated by service.

Report No. 11115
 Class
 No. of Local No. of M. E. C. No. of

Original Unit
 Rank
 Age
 Height
 Complexion
 Eyes
 Hair
 Date of enlistment
 Date of arrival
 Date of arrival
 Where existed
 Where seen
 Port of arrival
 Religion
 Name and address next of kin
 Cause of disability
 Condition which prevents the soldier from earning a full livelihood

Members of Board
 Destination to which transportation issued
 Recommendation of Canadian Board
 Is final disability likely to prevent return to previous occupation?
 Probable duration of incapacity
 Degree of incapacity (Please state in fractions) Eng. Board
 Canadian Board

INFORMATION TO BE FURNISHED BY SOLDIER

DEPENDENTS	NAME	AGE	WHERE-IF EMPLOYED	WAGES	STATE OF HEALTH
Wife					
Children					
1					
2					
3					
4					
5					

Occupation prior to enlistment
 Regular trade or profession
 Average earnings previous to enlistment
 Name and address of last employer
 Rent per month
 If purchasing property amount due and annual payment
 Taxes
 If carrying life or accident insurance, annual premium
 If in receipt of sick benefits or other insurance - name of society
 If unable to follow previous occupation name of reference
 At what age soldier left school? What grade standard, etc., was he in?
 Has he taken any Technical or Commercial classes, if so what?
 Whether given Vocational Training while in Hospital in England, if so what subjects?
 References
 Witnesses
 Date
 Signature
 I declare that the above statement is correct

Recommendation by Interviewer as to class likely to be of use, and general remarks
 Transferred to Unit - Date
 Amount for which to be paid to P. O. Unit
 Credits Clothing Allowance
 Amount paid by Depot H. Q.
 L. P. G. leaving Depot
 First payment date
 Pension - Class
 Amount payable
 Period granted for
 Transferred Class - Date
 Transferred Class - Date

TRIPPLICATE

CANADIAN CONTINGENT EXPEDITIONARY FORCE

M. D. 1
NO. 28

LAST PAY CERTIFICATE

August P.L. 1-26-11

I.D. 30-C-494

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

Regimental No. 50411 Rank Corporal Name Claxton, Charles R.

Corps. 1st Bn. Can. Garrison Regt. C.E.F. who was* Discharged

On 15-8-18 191... to 1-8-18 191...

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1-8-18 191... to 15-8-18 191... the inclusive date of transfer or discharge.

Table with columns: Dr., \$, c., Cr., \$, c. Rows include Bal. Dr. from prev. month, Advances by Cheques, Assigned Pay and Sep'n Allce., Other charges, Payment on transfer or discharge, Balance Cr. (to be paid by the new unit), Total.

Kit Clear

*Give particulars. Eligible for 3 mos P.D.P.

A monthly stoppage of \$ 20.00 (†) has been (‡) been paid on account of Assigned Pay for the month of Aug (\$10.00) 1918 and Sep'n Allce. for month of pd to Aug 15 1918 (to) Assignee Mrs. C.R. Claxton, 321 Ottawa Ave., London, Ontario.

(†) 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 2-11-14 (2) if married and if a Separation Allowance Card has been submitted Yes Yes (3) cause of discharge med unfit for service 1st Bn C.E.F. DO 105 (4) authority for transfer I.D. 30-C-494 8/9-8-18

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 August 14, 1918.

Place LONDON, ONT. M.D. W. Jaggard Capt. Paymaster, 1st Bn. Can. Garrison Regt. C.E.F. 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.

1870

Faint, illegible text throughout the page, possibly bleed-through from the reverse side.

TRIPPLICATE

CANADIAN CONTINGENT EXPEDITIONARY FORCE

Nov. Pay List
1-13-23

LAST PAY CERTIFICATE

Amended

No. 26

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

Regimental No. 50431 Rank OP1 Name CLAYTON, Charles, R.

Corps. 1st. Bn. Can. Garrison Regt. C.E.F. who was* discharged

On 15-8-18 191... to.....
*Insert "discharged" or "transferred."

MILITARY DISTRICT NO. 1

NOV 21 1918

NOV 18 1918

30-C-494

L D

The following is a statement of the account of the above named from.....
to 15-8-18 191..., the inclusive date of transfer or discharge.
per Nov. 1918 Pay List.

Dr.	\$	c.	Cr.	\$	c.
Bal. Dr. from <u>Aug. P.L.</u> prev. month.....	61	00	Bal. Cr. from prev. month.....		
Advances by Cheques } No.....			Reg't Pay..... days at \$ <u>1</u> c. <u>10</u>		
Assigned Pay and Sep'n Allee. No.....			Field Allow. days at \$ <u>c. 10</u>		
Other charges <u>Ok. #8522</u>	1	00	Separation Allowances* (Monthly).....		
Payment on transfer or discharge No.....			Other Allowances* <u>per Aug. 1918 Obs. #9</u>	1	00
Balance Cr. (to be paid by the new unit).....			Other Credits*.....		
			Bal. Dr. (to be deducted by new unit).....	61	00
Total	62	00	Total	62	00

Kit clear * Give particulars. **3 mos. P.D.P.**

A monthly stoppage of \$ 20.00 ~~10.00~~ has..... (†) been paid on account of Assigned
{ Pay for the month of paid Aug...... 191... }
{ and Sep'n Allee. for month of paid to 15-8-18..... 191... } (to) Assignee Mrs. C.R. Clayton,
(Address) 321 Ottaway Ave.,
London, Ont.

(†) 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 2-11-14
- (2) if married and if a Separation Allowance Card has been submitted yes..... yes
- (3) cause of discharge Med unfit for service authority I.D. 50-C-494 d/9-8-18
- (4) authority for transfer 1st. Bn. C.G.R. D.O. 105 d/13-8-18.

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 Nov., 9-1918.

Place LONDON, ONT.

W. D. Duggan
Paymaster, 1st Bn. Can. Garrison Regt. C.E.F.

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.

NOV 21 1919

NOV 21 1919
REC

R. O.

6078

Op. 36825.
517. / 23.11.16.

N.E.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at Feb 19th 1916.

No. 5044 Rank Cpl Name CLAXTON, C R

Local Unit C.C.H.C. Overseas Unit 8th Batta. Age 46

Examination held at Hastings

DISABILITY.
Overseas— Local.
(scratch one out)

Rheumatism

PRESENT CONDITION.

20 months in France. Complaints of
pain in Back, and limbs, legs weak
and clumsy he cannot walk more
than 1 mile, looks age 60 - Seems
tired - General condition fair.

BOARD RECOMMENDS:— C-3

- 1. Fit for Duty.....
- 2. Fit for duty after.....weeks' physical training.
- 3. Fit for Temporary Base Duty.....weeks.
- 4. Fit for Permanent Base Duty
- 5. Discharge

Signatures:—

Members

G. B. P. M. J. President.

J. H. G. M. J.

APPROVED

Dated at..... 1916.

[Signature]

For A.D.M.S.

Captain, C.A.M.C.
for A.D.M.S. Hastings, Sussex.

M E
PROCEEDINGS OF A MEDICAL BOARD

Dated at _____ 1918

No. _____ Rank _____ Name _____

Local Unit _____ Overseas Unit _____

Examination held at _____

DISABILITY
Overseas - Local
(attach one only)

PRESENT CONDITION

BOARD RECOMMENDS:-

1. Fit for Duty
2. Fit for duty after _____ weeks' physical training
3. Fit for Temporary Base Duty _____ weeks
4. Fit for Permanent Base Duty
5. Discharge

Signatures

..... President

..... Members

.....

APPROVED

Dated at _____ 1918

For A.D.M.S.

Proceedings of Medical Board at Discharge Depot
QUEBEC, Que.

No. _____ Rank _____
Name and Corps of disabled Soldier _____
Previous civilian occupation _____
Cause of Disability _____

Condition, in detail, which prevents the soldier carrying a full livelihood _____

OPINION OF THE BOARD

Degree of incapacity. (Please state in fractions) _____
Probable duration of incapacity: _____
Does it render him permanently unfit for Military Service? _____
Would special treatment, or use of appliances, etc., lessen incapacity? _____

Signature: _____
Station: _____
Date: _____

APPROVED

Signature: _____
Date: _____
Signature: _____
Date: _____
Signature: _____
Date: _____

008
Forms

Canadian Red Cross Special Hospital
BUXTON, DERBY.

Army Form I. 1237.

I. 1237
CAN. R.C. SPEC HOSP

BUXTON, DERBY MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	50411	Capt.	Clarke	CR
Year	Unit.	Age.	Service.	
	Canadian A.M.C.	at 18 th Canadian	45	2 yrs.
Station and Date.	Disease			
Lieut. Col. Inf 14/11/16	Myalgia Admitted for 1 st Canad. Hosp. Etaple. Declared sick 1/11/16 at Herson with aching in legs & some high temp. Still complain of much pain in muscle of legs. By Pres. Gen. Sal. 31.10.16			
20/11/16	Pain improving general health better.	W. Traeney Capt. R.A.M.C.		
24/11/16	General health improved; no pain.	W. Traeney Capt. R.A.M.C.?		
Buxton 24/11/16	W.M. Bath Massage with radiant heat	} alternate days		
Jan 10 th	Pain across back, otherwise much improved.			
" 17 th	Radiant heat and deep massage to back			
note	In Nov 1914 had double <u>castration.</u>			
Feb 16 th	Recommended for base duty 17/2/17 E.T. Curran			

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

Station
and Date.

C 20

33

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 *Charles Roland* 2. Surname *Colaxton*
3. Rank *Epl* 4. Original Unit *18th Battalion* 5. Reg. No. *50411*
6. Address, in full, to which future payments of gratuity are to be forwarded
700 Adelaide Street London Ont
7. Date of enlistment in the C.E.F. *2nd November 1914*
8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge
Wife Sarah Ann Colaxton
9. Relationship of such dependent
Wife
10. Address, in full, of such dependent
700 Adelaide Street London Ont
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:—
No
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
Three Years and One Month with the 18th Battalion
Nine Months with the C.G.R. No 1 M.D. London
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*

9

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. 60991 Gunner*

Royal Garrison Artillery 12 Years
Then went on Second Class for six years in England

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 *\$183.00*

Three Months at 61 Dollars Per Month
From No 1 M.D.

20. Have you been issued with a War Service Badge? If so, what class? *A. and B. Class*

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 *No*

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? *No*

24. Are you now serving in the C.E.F.? *No* If not, give:—(a) Date of discharge

15th August 1918 (b) Reason for discharge
Medically unfit for further service

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 *No*

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*

18th Battalion 14 Months Sept 22 1915
Till 10th Oct 1916

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? *No*

And I make this solemn declaration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath and in virtue of the Canadian Evidence Act.

Signature of Applicant: *W. H. Stewart*

Place of Residence: *70 Adelaide St. London Ont*

Declared before me at: *London Ontario*

This *6* day of *January* 19*19*

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

POST DISCHARGE PAY.

Date paid.	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
<i>Sept 15th 1918</i>	<i>\$61.00</i>		<i>\$600.00</i>	<i>\$415.80</i>
<i>Oct 15th</i>	<i>62.20</i>			
<i>Debit Balance recovered 61.00</i>				

Certified Correct.

W. H. Stewart
District Paymaster

Major C. P. G.

District Paymaster M. D. No. 7.

Was Service Gratuity 183 days Pt A

RECEIVED
JAN 30 1918
DEPT. OF MILITARY & DEFENCE
CANADA
140661
NE

PROCEEDINGS OF A MEDICAL BOARD.

Dated at Feb 19th 649-C-18811 1916.

No. 50411 Rank Cpl Name CLAXTON C R

Local Unit C.C.H.C. Overseas Unit 18th Batta. Age 46

Examination held at Hastings

DISABILITY.
Overseas—Local.
(scratch one out)

Rheumatism

PRESENT CONDITION.

20 months in France. complains of pains in Back and limbs, legs weak and claims he cannot walk more than 1 mile, looks age 60 - seems tired - General condition fair.

BOARD RECOMMENDS:— C-3.

1. Fit for Duty.....
2. Fit for duty after.....weeks' physical training.
3. Fit for Temporary Base Duty.....weeks.
4. Fit for Permanent Base Duty
5. Discharge

Signatures:—

[Signature] President.
 Members { [Signature]
 {
 {

APPROVED

Dated at.....1916.

[Signature]
 For A.D.M.S.
 Captain, C.A.M.C.
 Hastings, Sussex.
 Dr. [Signature] 7-9-18
 4

5/1/30
2-2-1
30-1-2-2

PROCEEDINGS OF A MEDICAL BOARD

30/1/16

3795

REC'D
JAN 3 1916

Dated at 1916

No. Rank Name
 Local Unit Overseas Unit Age
 Examination held at

DISABILITY:
Overseas - Local
(attach and out)

PRESENT CONDITION

BOARD RECOMMENDS:-

1. Fit for Duty
2. Fit for duty after weeks' physical training.
3. Fit for Temporary Base Duty weeks.
4. Fit for Permanent Base Duty
5. Discharge

Signatures:-

..... President

.....

 Members

APPROVED

Dated at 1916

0078

0078

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				
Hastings 20/2/17 21/17	23/11/16	Taken on strength C.C.A.C. Pt. II D.O. No. ... G.D.D. PART II D.O. No. ...		5-17	Audacity Lt. for C.C.A.C.
	26/2/17	attach to Brit 46 School Westenhanger		26/2/17 12/11 5053 26/2/17	
	5/3/17	attach to this unit for Calgary C.II duties from C. Club	Westenhanger	26/2/17	Pl 2-5064
	10/3/17	ceases to be attached to this Unit on attachment to A.D.M.S. (Cans) London Area for duty with the Can Red Cross Hosp Buxton	Westenhanger	4/3/17	Pt II DO 68
	12-3-17	ADMS on attachment London to Canadian RK Area S to Buxton		10-3-17	P.O. 535 10-3-17

J. Paul Smith
Major
Commandg. Canadian Garrison Duty Depot
Lt. Col.

W. Horne
CAPT. ASST. ADJUTANT.
FOR O.C. C.A.M.C. TRAINING SCHOOL.

Casualty Form—Active Service.

Regiment or Corps 18th Battalion, C.E.F.

RECEIVED OFFICE
Canadian Record Office
Westminster House,
7, Millbank, S.W.

Regimental No. 50411 Rank Private Name Claxton, Charles Roland

Enlisted (a) 2nd Nov. 1914 Terms of Service (a) War Service reckons from (a) _____

Date of promotion to present rank 4th Nov. 1914 Date of appointment to lance rank _____ Numerical position on roll of N.C.Os. _____

Extended _____ Re-engaged _____ Qualification (b) Carpenter

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					
	18th Bn.	Disembarked in France	Boulogne	15.9.15	Nominal Roll. <u>R 1-X-67</u>	
<u>23.6.16.</u>	18 Bn.	Confirmed in rank of Cpl	Field	4.11.14	letter 236/16 (101/Inf/18/13. <u>R 292-17546</u>)	
<u>14.11.16.</u>	6 CC Stn	W/D.	Adm	Field	1.11.16	A 36 DBS No 259
<u>7.11.16.</u>	1 CG Hosp.	P.U.O.	Adm.	"	7.11.16	W 3034/116
<u>11.11.16.</u>	6 CC Stn	P.U.O.	Trans to 26 Athan	"	6.11.16	A 36 DBS No 259
<u>14.11.16.</u>	1 CG Hosp.	Myalgia	to England	"	14.11.16	W 3034/121
<u>4.11.16.</u>	6 CC Amb	P.U.O.	Adm	"	1.11.16.	A 36 DBS 259
<u>14.11.16.</u>	HS Sted Antwerpen	"Sick" Trans. to CCAC. Shoreham on Sea Auth: AF W3083	"	"	14.11.16.	PT II Ord 88 d/23 1/16 J.L. Kemp
<u>28.1.16.</u>	18 Bn	Granted 8 days leave.	Field	24.1.16	B 213. PT II Ord 904 9 2/16.	
<u>4.2.16.</u>	"	Rejoined from leave	"	3.2.16	B 213. DBS 109 d/10 2/16	

(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.]

6078

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				
16/3/17	W.O.R.D.	T.O.S. from 18th Bn. attached	Bramshott	11/3/17	DO # 7
		to G.D. Bn.			
12/10/17	W.O.R.D.	Classed on command G.D. Bn	Bramshott	22/10/17	DO # 189
		now on command C.R. & S.H. Buxton.			
23/10/17	W.O.R.D.	Reported to Coy from Buxton	Bramshott	22/10/17	DO # 196
1-11-17	W.O.R.D.	By command C.D. Buxton	Bramshott	31-10-17	
		pending return to Canada			
6 NOV. 1917	TAKEN ON STRENGTH C.D.D. BUXTON Pt. 11		ORDER No. 263		
			Commanding		Lieut.-Col. Canadian Discharge Depôt.
17 NOV 1917	EMBARKED FOR CANADA FROM LIVERPOOL				
			Commanding		Lieut.-Col. Canadian Discharge Depôt.
4-1-18	N.I. Casualty list	Transferred to CMP	London	9-1-18	
		Transferred to 1st Battalion C.G. Regt.		24/5/18	
30-4-18	J.O.S.	1st Bn C.G. R	London		
No. 1, Det	M.P.F.	D.O. # 5 Para "C"		5-5-18	

M. Stueck
R. V. ...
R. V. ...
St. Maunley Capt.
P.C. ...

W. St. ...
Ver. U. ...

Casualty Form—Active Service.

6028
 Regiment or Corps C.A.M.B. Regimental Number 50411
 Rank Capt Surname Classton Christian Name Charles Roland
 Religion C. of E. Age on Enlistment 40 years 0 months.
 Enlisted (a) 2/11/14 Terms of Service (a) D of W Service reckons from (a) 2-11-14
 Date of promotion to present rank 11/11/14 Date of appointment to lance rank _____
 Extended { } Re-engaged { } Qualification (b) _____
 or Corps Trade and Rate Carpenter
 Signature of Officer i/c Records.

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
7-3-17	G.O. Adams L.A.	Embarked ... Disembarked... Att Camp Red x Sp. Hops	Buxton	7/2/17	ADMS LA RO 535 10-3-17 DOT # 72-13-3-17
24/4/17	A.D.M.S.	Taken on Strength Red x Sp Hospital	Buxton	24/4/17	DOT # 121-1-5-17
27/10/17	A.D.M.S. L.A.	Entry taken on Strength CB x Special Hospital Cancelled	Buxton	27/10/17	D.O.P. # 11-264 22/10/17
20/10/17	% W.O.R.D.	Leaves to be attached to Red x Sp. Hospital returns to W.O. Reg Depo	Buxton Bramshott	22/10/17 22/10/17	D.O.P. # 2 264 22/10/17
			Fredrick Guest		

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
 (b) Signaller, Shoeing-smith, &c.
 (B99130) W 15012-5156 J. P. & Co., Ltd. Forms/B103/3. P.T.O.

6078

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

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

350M.—5-16
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps.....

Regimental No..... Rank..... Name.....
C. E. F.

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

Date of promotion to } Date of appointment } Numerical position on }
present rank } to lance rank } 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				

*London. Out Discharged as medically unfit—
for further general service "Auth Routine
Order No 668. d/14-6-18. I.D. 30. K-214
d/8-8-18. with effect 15/8/18.
D.O. No 105 Para A. Part II*

CERTIFIED CORRECT
ALL ENTRIES MADE

W. S. Long
for Q.C. 1st Bn. Cdn. Garr. Regt. Capt. S. 11/1/18

(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.]

17

{ Squadron
Battery
Company }

1st TB = C. G. P.

6078

Aug 6

19 18

Morning Sick Report

Regt No.	RANK AND NAMES (Christian Name in full)	Completed years of		Religion	Whether for Duty, a Prisoner, or Defaulter	Married or Single	Disease	Medical Officers Remarks and Initial
		Service	Age					
50411	Cpl Clayton C-P	3477	48	Cal P	N	m	Eyes Glasses of many	Major Brown
	<p>Glasses ordered. Presbyopia</p> <p>A man due to vision</p>							

Moreland
Medical Officer.

Brown
Major

Orderly N.C.O.

6078

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				
5-1-17	CA me Gen.	Pt #0 88-23-11-16 is hereby cancelled and the following substituted = ceases to be att'd 18 th Bn as in war Est. on being trans to CCAC	Field	14-11-16	Pt #02
21.2.17	18 Bn	Dis from Can Spec Hosp	Buxton	17.2.17	CRB 288 Rheum. fever
19.2.17	CCAC	Reported from Buxton	Hastings	18.2.17	Pt-II 084 B
21.2.17	C.C.A.C.	On Command to Garr. Duty Depot	"	20.2.17	89 J C3
12-3-17	CCAC	S.O.S. on transfer to W.ont Regiment	Hastings	10.3.17	Pt. II D.O. 1107 W.O.R.D. 1007
15.10.17	W.O.R.D.	{ off Com. 9. D. Bn. 1004 Low Lw. Red X Hospital, Buxton	Bshott	cp. 26.2.17	CRMC. D. 64 J. 573/17 CRX 112 p. Pt II 67 d 8/4/17
23.10.17	"	{ ceases to be shown on Com. Buxton on reporting to depot 204	"	" 22.10.17	- 195
31.10.17	"	{ On Com 2.00 Buxton Pending dispatch to Canada	"	" 21.10.17	- 203 CRX Hosp. 264 ²² / ₁₇
26.11.17	"	{ off Com and SOS on Proc. to Canada for disposal by a.g.	"	col 17.11.17	- 225
	Dis Depot	Lih. for Duty	M.D. London	30/11/17	NR 416 Gall-Ont.

Water Detail

6078

Rank *Coupl* Name **CLAXTON Chas. Roland** Reg'l No. **53047** (50411)
 Unit **18th Battn.** If in perm. Corps, What Unit? **Gar. Art. S.A.** Married or Single **Married**
 Place and Date of Enlistment **Galt, 2nd Nov. 1914** Place of Birth **London Eng.**
 Name and Address, Next-of-Kin **Mrs. Sarah Ann Claxton, Galt. (19 McKay Avenue) Ont.**
 Relationship **wife.**

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

N/E. R.B. No. 3360
 File R.L. *bus*
 Category *Can OR*

Discharge, Date and Place Reason Character

Report		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place	Date	REMARKS Taken from Official Documents
Date	From whom received				
29-4-15	Ob 18	Arrived per <i>S. Grampian</i>	England	29-4-15	Inform Form
1-5/6/15	Ob. 18th	Number changed to 50411 <i>Water detail attn</i>	Shoncliffe	1-5/6/15	Part II order. 224.
16-7-15	"	To be Corporal	W. Sandring	1-7-15	Home Roll
18-9-15	"	Embarked Overseas	Folkestone	14-9-15	Inform. Form
15-9-15	C.A.M.C. Gen	905 on arrival in France att'd 18th Bu		15-9-15	PT # 11-12-16
7-2-16	18th Bu	8 days leave from as <i>water detail</i>		24-1-16	Part II 7.
30-6-16	"	Confirmed in Rank of <u>Corporal</u> from		4-11-14	" 26.
18-11-16	18th	No 1 General Hospital	Etaples	7-11-16	C.L. A 368 P.V.O.
21-11-16	"	5th Northern Genl Hospital	Leicester	14-11-16	" - B 218 Myalgia
23-11-16	C.A.M.C. Gen	To C.C.A.C.	Hastings	14-11-16	PT II 88 <i>cancelled by Pt # 2 52117</i>
30-11-16	18th	Can. Red Cross Special Hoop.	Buxton	26-11-16	C.L. B 225
28-11-16	18th	To C.C.A.C.	Shoreham	14-11-16	PT II 54 S
23-11-16	6696	Taken on strength.	do	14-11-16	PT # 0 517

Rank *Capt.* Name *CLAXTON Chas. Roland* *Buxton* Reg'l No. *50411*
 Unit *18th Battn.* If in perm. Corps, What Unit? *Gar. Art. S.A.* Married or Single *Married*
 Place and Date of Enlistment *Galt, 2nd Nov. 1914* Place of Birth *London Eng.*
 Name and Address, Next-of-Kin *Mrs. Sarah Ann Claxton, Galt. (19 McKay Avenue)* Relationship *wife.*

Assigned Pay Monthly \$ *20⁰⁰* Payable to *W. C. R. Claxton*
19 McKay Ave. South St. Galt. Ont. Relationship *as above (1-2-16) @.*
~~*56 Gerald Ave. Parkway Rd. East Ham. London Eng.*~~
 Separation Allowance \$ Payable to Relationship

MAR 20 1918
 CONTINGENT

Entered on N.E. Card Index *WUS*

Discharge, Date and Place Reason Character *Ronald*

Date		PAY		Field Allowance		Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days			Rate	Amount						
1/4	30/4	30	110	33	30	10	310			36			36		Reimburse
1/5	31/5	31	110	34 10	31	10	310			12 50	20		32 50	4 70	
1/6	30/6	30		33	30		3			10	20		30	10 70	
1/7	31/7	31		34 10	31		310			10	20		30	17 90	
							86							18 76	<i>Cr. Exchange</i>
1/8	31/8	31	110	34 10	31	10	310		376	12 16	20		35 16	23 80	
1/9	30/9	30		33	30		3		364	2 68	20		22 68	34 12	
1/10	31/10	31		34 10	31		310		410	4 86	20		24 86	46 46	
1/11	30/11	30		33	30		3		462						
1-12	31-12	31		34 10	31		310		497	4 46	20		24 46	58	
1-1-16	31-1-16	31		34 10	31		310		510	12 21	20		40 14	50 06	
1-2	29-2	29		31 90	29		290		522	3 49	20		36 10	66 16	
March		31		34 10	31		310		533	2 61	20		38 71	104 87	<i>2000 address chg</i>
									545	3 49	20		38 25	147 11	
									557	4 36	20		27 85	24 06	

BALANCE TRANSFERRED TO NEW LEDGER.

No Dates

369 60 - 33 60 - 86 404 06 ✓ 160 - 220 - 380 - 24 06

2. 11. 14

Duplicate

19 MacRay Avenue
South Street
Galt. Ont. Canada.

MILITIA AND DEFENCE

SEPARATION ALLOWANCE 6546

Name Mrs Sarah A Claxton

Name of Soldier Claxton, Charles R.

Address ~~56 Emerald Ave~~
~~Barking Road, East Ham~~
~~London, England~~

Regtl. No. 50411

Rank Corporal

Corps 18th Batt

Relation to Soldier
wife, child or mother } Wife

To what Corps belonging

when called out

P.O. High St. Wm.

PAYMENTS

42229 M. CO.

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			Marriage Cert produced 9 th 15 th - marries 9 Aug 1896.
Sept.				
Oct.				
Nov.				<u>Returned to Canada.</u>
Dec.		E 316	20 -	
Jan.	1915	E 1200	20 -	Paid by Ottawa \$ 219. 00 £ 45. 0. 0. " " London " \$ 99. 98. 20. 10. 10 Total paid to end of February '16. £ 65. 10. 10. 318 (Paid to end of Feb. 1916) Credit Drafts ret'd. 252489/98 £ 9. 6. 4 = \$ 45. 40 cts. (M 7867 cancelled) £ m 7 cc 40 ⁰⁰ 1 129364 / 376 To be paid by cheque to end of Feb. Ring sheet returned. Book recalled. 252786-98 Mrs Claxton returns to Returned. £ 3. 0. 0 drawn.
Feb.		E 3103	39 -	
March		E 5119	20 -	
Apl.		F 5036	20 -	
May		F 6761	20 -	
June		H 6962	20 -	
July		H 8607	20 -	
Aug.		J 8169	20 -	
Sept.		J 9103	20 -	
Oct.		M 7867	20 -	
Nov.				
Dec.			60 -	
Jan.	1916		14 60	
Feb.		F. 1666	25 38	
March			31 8 98	

6546

SEPARATION ALLOWANCE.

Name of Dependant *Glaxton Mrs Sarah A*
Relation to Soldier *wife*

Name of Soldier *Glaxton Charles R*
Regtl. No. *50411*

1
3

Rank *Corp*
Corps *18 Batts*

P.O.
2
4

To what Corps belonging
when called out

P.O.
P.O.

Month.	Year.	Cheque No. or Postal Draft Book No.	Amount.		Date.	REMARKS.		
			£	s. d.		£	s.	d.
		Brought Forward ...						
Apl.	1916							<i>Returned to Canada</i>
May								
June								
July								
Aug.								
Sept.								
Oct.								
Nov.								
Dec.								
Jan.	1917							
Feb.								
Mar.								
Apl.								
May								
June								
July								
Aug.								
Sept.								
		Carried Forward ...						



2nd Contygt

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

Duplicate

To Whom *Mrs C R Claxton*
Address *Mrs Baker*
56 Ernauld Ave.
Barking Rd. East Ham
Rate *20.00* *Apr 1/15 London Eng*
May 1/15

By Whom Assigned *Claxton C.R.*
Regtl. No. *50411*
Rank *Pte*
Corps *18th Batta N.D. Staff*

PAYMENTS RECEIVING SEPARATION ALLOWANCE

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May		<i>P 5444</i>	<i>40 -</i>	
June		<i>- -</i>	<i>- -</i>	
July		<i>M 3772</i>	<i>20 -</i>	
Aug.		<i>N 5101</i>	<i>20 -</i>	
Sept.		<i>06841</i>	<i>20 -</i>	
Oct.			<i>100</i>	
Nov.		<i>✓ 77798</i>	<i>40</i>	
Dec.		<i>87579</i>	<i>20</i>	
Jan.	1916			
Feb.				
March				

RECEIVED FROM
NOV 4 1915
OTTAWA.

FILE

Do not pay fine to adjust April

ASSIGNED PAY.

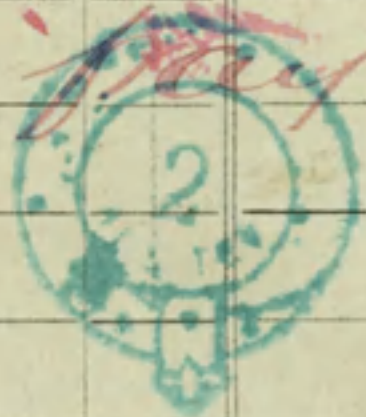
By whom assigned *Claxton C.B.*

Regtl. No. *50411*

Plc.

18th Batt. H.Q. Staff

Month	Year	Cheque No.	Amt.	Pay Sheet	REMARKS.
Jan.	1916	<i>105686</i>	<i>20</i>		
Feb.					<i>All future payment by Ottawa</i>
March					
Apl.			<i>180</i>		
May					
June					
July					
Aug.					
Sept.					
Oct.					
Nov.					
Dec.					
Jan.	1917				
Feb.					
March					
Apl.					
May					
June					
July					
Aug.					
Sept.					
Oct.					
Nov.					
Dec.					



POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

1646 / 33 ^{DM}

Name Claxtan, Charles R.
Surname Christian Name

Sarah Ann Claxton

Regimental Number 50411 Rank Cpl.

Address (in full) 700 Adelaide St.,
London, Ont.

Unit 1st C.G.R.

Original Unit

District where paid M.D. 1.

Date of Discharge

P. D. P. Filing Number 9-135-1.

Rates:—Regimental pay \$ _____ per diem: Field Allowance \$ _____ per diem. Separation Allowance \$ _____ per month.

L. L. 22573—M. & D. 3009.

Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Over-payments to be Recovered	Total Amount Paid
	Cheque No. A	Date	Amount 30 days	Cheque No. B	Date	Amount 30 days	Cheque No. C	Date	Amount 31 days		
184 20	2537	15-9-18	61 00	2455	15-10-18	62 20				61 00	123 20
	1st. G-1469	5-2-19	70.00								
	1st. G-1470	5-2-19	30.00								
	8/A 2nd G-16948	26/2/19	70.00								
	8/A 2nd G-16949	26/2/19	30.00								

M. F. W. 127.
60M-6 17.
1772 89-1140.

Remarks:

700 Adelaide St.

London.

Out.

19 1/2 Kay Ave
South Salt,

Out.

Sarah Ann. Clayton

As above

Dec'n No. 1646/33 W. S. G. File No 3262-6-8

Award..... days at \$ 100.00 per day \$ 600.00

S. A..... months at \$ per mo. \$ 184.20

Less P, D. P. Credited \$
\$ 415.80

Less further debit balance \$
Net due paid as below 415.80

TO SOLDIER		TO DEPENDENT				
0	Ag. No.	Ch No	Amount	0	Ch No	Amount
1	116	1469	70 00	116	1470	30 00
2	81A	16948	70 00	81A	16949	30 00
3	238B	409178	70 00	238B	409179	30 00
4	148C	446190	25 80	148C	446191	30 00
5					490719	30 00
6					493653	30 00
Total				Total		

5-2-19
26-2-19
5-4-19
1-5-19

5-2-19.
26-2-19.
5-4-19.
1-5-19

n-f.

GEN'L AUDITOR
 Properly checked by
Webster
 Date 21.10.19

✓

2-11-14.

MILITIA AND DEFENCE.

SEPARATION ALLOWANCE.

6546.

Name *Blaxton Mrs Sarah A*
 Address *19. Mackay Avenue*
South St
Exeter, Ontario
 Relation to Soldier *Canada*
 wife, child or mother *Wife*

Name of Soldier *Blaxton Charles R.*
 Regtl. No. *50411.*
 Rank *Capt.*
 Corps. *18th Battalion*
 To what Corps belonging
 when called out

PAYMENTS.

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			<i>Marriage Certificate Paid. 9-11-15.</i> <i>married 9-19-16.</i>
Sept.				
Oct.				
Nov.				
Dec.		E 316	20 -	
Jan.	1915	E 1200	20 -	
Feb.		E 3103	39 -	
March		E 5119	20 -	
Apl.		F 5036	20 -	
May		F 6761	20 -	
June		H 6962	20 -	
July		H 8607	20 -	
Aug.		I 8169	20 -	
Sept.		J 9103	20 -	
Oct.		M 7867	20 -	<i>M 7867 cancelled.</i>
Nov.				
Dec.			60 -	<i>cc 129 364/376.</i>
Jan.	1916		14-60	
Feb.		I 16666	25-38	
March				<i>cc 1252786/98</i>

Destroy

SEPARATION ALLOWANCE.

Name of Dependant		Name of Soldier	
Relation to Soldier		Regtl. No.	
1	3	Rank	
P.O.	P.O.	Corps	
2	4	To what Corps belonging } when called out	
P.O.	P.O.		

Month.	Year.	Cheque No. or Postal Draft Book No.	Amount.		Date.	REMARKS.		
			£	s.		d.	£	s.
		Brought Forward ...						
Apl.	1916							
May								
June								
July								
Aug.								
Sept.								
Oct.								
Nov.								
Dec.								
Jan.	1917							
Feb.								
Mar.								
Apl.								
May								
June								
July								
Aug.								
Sept.								
		Carried Forward ...						

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

To Whom *M^r. C. R. Claxton*

By Whom Assigned *Claxton. C. R.*

2m 10/11 15
 Address ~~*Co M^r. Baker*~~
~~*54 Emerald Ave*~~ *19 McKay Ave*
~~*Banking Rd East Ham*~~
~~*Galt Out London Eng.*~~

Regtl. No. 0101 *50411*

Rank *Pte.*

Corps *A.M.C. H.Q. 18th Battrn.*

Rate *20⁰⁰ Apr. 1st 1915*

re-open Feb. 1. 16.

Feb 16 2m 24 7/16

P.L. 3-3-0 x 9628. 10⁹/₁₅ P.S.G.

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May		<i>P. 544</i>	<i>40</i>	} <i>No June cheque to recover overpayment in apl.</i>
June				
July		<i>M 3772</i>	<i>20</i>	
Aug.		<i>N. 5101</i>	<i>20</i>	
Sept.		<i>O. 6841</i>	<i>20</i>	
Oct.				
Nov.		<i>77998</i>	<i>40 00</i>	} <i>paid in Eng. 1-10-15 15-1-2-16 P.G.H. 15-2-18</i>
Dec.		<i>87579</i>	<i>20</i>	
Jan.	1916	<i>105686</i>	<i>20</i>	
Feb.				
March		<i>M 16891</i> <i>N 16977</i>	<i>40</i> <i>40</i>	<i>40⁰⁰ by M. 16891 cancelled</i>

Duplicate sent to England.

2-11-14.

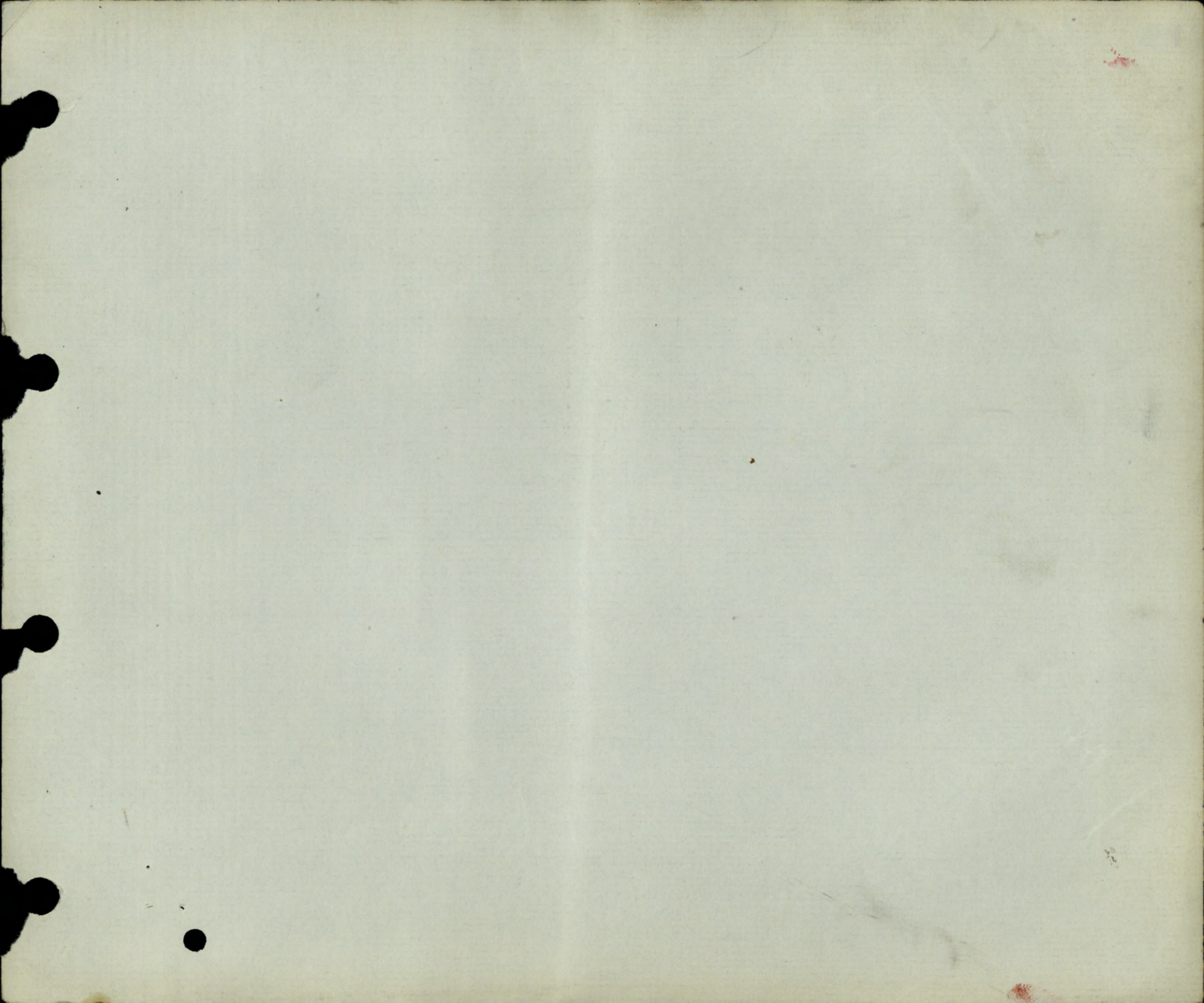
MILITIA AND DEFENCE
SEPARATION ALLOWANCE

Name *Mrs Sarah A Claxton*
 Address ~~*19 McKay Ave*~~
~~*Gault Ave.*~~
51 Emerald Ave.
Barking Rd London Eng.
 Relation to Soldier *Wife*
 wife, child or mother

Name of Soldier *Charles R. Claxton*
 Regtl. No.
 Rank *Capt*
 Corps *18 Batt*
 To what Corps belonging }
 when called out }

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			<i>Duplicate sent to England for payments</i>
Sept.				
Oct.				<i>20 20 20 20 20 20 20 20 20 20 20 20 20 20 20</i> <i>Returned to Canada</i> <i>(M 7867 cancelled)</i>
Nov.				
Dec.		<i>6316</i>	<i>20</i>	
Jan.	1915	<i>61200</i>	<i>20</i>	
Feb.		<i>63103</i>	<i>39</i>	
March		<i>65119</i>	<i>20</i>	
Apl.		<i>75036</i>	<i>20</i>	
May		<i>76761</i>	<i>20</i>	
June		<i>46962</i>	<i>20</i>	
July		<i>118607</i>	<i>40</i>	
Aug.		<i>88169</i>	<i>20</i>	
Sept.		<i>89103</i>	<i>20</i>	
Oct.		<i>M 7867</i>	<i>20</i>	
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				



SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2

Sarah A. Clayton *Wife*

Name of Soldier

Clayton Charles B.

PAYMENTS.

50411

L. L. Job 88002.—Req. 6213.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916	G779	20	20
May		M5259	20	20
June		L 9180	20	20
July		R10762	20	20
Aug.		K14169	20	20
Sept.		M15253	20	20
Oct.		V 18445	20	20
Nov.		A 22160	20	20
Dec.		A 25528	20	20
Jan.	1917	A 29112	20	20
Feb.		A.32059	20	20
March		A35265	20	20
April		B 704	20	20
May		B. 4159	20	20
June		E7675	20	20
July		D 11584	20	20
Aug.		H 13825	20	R
Sept.		G 17370	20	R
Oct.		M22805	20	R
Nov.		B 26830	20	Hol
Dec.		J 25952	20	R #758. 98/12
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

618 98/12

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.				

2. 11. 14.

Triplicate.

MILITIA AND DEFENCE
SEPARATION ALLOWANCE.

6546.

Name *Blaxton*. Mrs. Sarah. A. Name of Soldier *Blaxton Charles R.*
 Address *19, Mackay Avenue, South St., ^{Half} ~~Half~~ Ontario, Canada* Regtl. No. *50411.*
 Rank *Corpl.*
 Corps *18th Batt.*
 Relation to Soldier *Wife.* To what Corps belonging }
 wife, child or mother when called out

PAYMENTS.

Month	Year	Cheque No.	Amt.	REMARKS
Aug.				<i>Marriage Certificate produced 9.11.15. Married 9th Aug. 1896.</i>
Sept.				
Oct.				
Nov.				
Dec.		<i>E 316</i>	<i>20</i>	
Jan.	<i>1915</i>	<i>E 1200</i>	<i>20</i>	
Feb.		<i>E 3103</i>	<i>39</i>	
March		<i>E 5119</i>	<i>20</i>	
Apl.		<i>F 5036</i>	<i>20</i>	
May		<i>F 6461.</i>	<i>20</i>	
June		<i>H 6962</i>	<i>20</i>	
July		<i>H. 8604</i>	<i>20</i>	
Aug.		<i>J. 8169</i>	<i>20</i>	
Sept.		<i>J. 9103.</i>	<i>20</i>	
Oct.		<i>M. 7867</i>	<i>20</i>	<i>(M. 7867 cancelled.)</i>
Nov.				
Dec.			<i>60</i>	<i>66</i> <i>129364/376.</i>
Jan.	<i>1916</i>		<i>14 60</i>	<i>66</i> <i>252486/88.</i>
Feb.		<i>J. 16666</i>	<i>25 38.</i>	
March		<i>7 33793</i>	<i>20</i>	

Handwritten scribbles at the top of the page, possibly including the number '2'.

Handwritten scribbles on the left side of the page, possibly including the number '100'.

Vertical column of handwritten scribbles in the center of the page, possibly including the number '100'.

Large, dense handwritten scribble in the bottom right corner of the page.

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2.

Mrs C. R. Claxton

Name of Soldier

Claxton, C. R.

PAYMENTS.

0101

A.M.C. H.Q. 18th Bn

L. L. Job 89002.-Req. 6213.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916	<i>M 1667</i>	<i>20</i>	<i>220-</i>
May		<i>0 4163</i>	<i>20</i>	
June		<i>P 7581</i>	<i>20</i>	
July		<i>E 7021</i>	<i>20</i>	
Aug.		<i>H 10958</i>	<i>20</i>	
Sept.		<i>M 15714</i>	<i>20</i>	
Oct.		<i>M 20288</i>	<i>20</i>	
Nov.		<i>M. 25056</i>	<i>20</i>	
Dec.		<i>S 30110</i>	<i>20</i>	
Jan.	1917	<i>N 37689</i>	<i>20</i>	
Feb.		<i>M 43811</i>	<i>20</i>	
March		<i>P 49702</i>	<i>20</i>	<i>20 B.</i>
April		<i>M 1182</i>	<i>20</i>	<i>20 L</i>
May		<i>L 7224</i>	<i>20</i>	
June		<i>Y 13920</i>	<i>20</i>	<i>20 B.</i>
July		<i>P 20761</i>	<i>20</i>	<i>B.</i>
Aug.		<i>U 27519</i>	<i>20</i>	<i>b</i>
Sept.		<i>S 35041</i>	<i>20</i>	<i>J</i>
Oct.		<i>A 25384</i>	<i>20</i>	
Nov.		<i>T 55366 L 54900</i>	<i>20</i>	<i>K 54900 Can J.S.R.P</i>
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

\$2000

pro

CH

500

*Just for payment
in ten*

K 54900 Can J.S.R.P

*540 paid in Can
80 " " " Eng
620 Total paid 31 Nov. 1917.*

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

PAYMENTS.

Name of Soldier _____

Month.	Year.	Cheque No.	Amt.	Remarks.
Aug.	1918			
Sept.				
Oct.				
Nov.				
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.				

MILITIA AND DEFENCE
ASSIGNED PAY.

To whom *Mr. C. R. Claxton*
Address *40 Mrs Baker*
56 Erwald Ave
Boring Rd. East Ham
Rate *£20* *London Eng*
Date to commence

By whom assigned *Claxton C.R.*
Regtl. No. *50411*
Rank *Spl.*
Corps, &c. *Capt Claxton*
(Reg 18th Battn)

PAYMENTS.

Month.	Year.	Cheque No.	Amt.	Pay Sheet Deduction.	REMARKS.
Jan	191 ⁵				
Feb.					
Mar.					
April					
May					
June					
July					
Aug.					
Sept.					
Oct.					
Nov.		<i>77798</i>	<i>40 00</i>		
Dec.		<i>87579</i>	<i>20</i>		
Jan	191 ⁶	<i>105686</i>	<i>20.</i>		
Feb.					
Mar.					
April					
May					
June					
July					
Aug.					

ASSIGNED PAY.

By whom assigned

Regtl. No.

Month.	Year.	Cheque No.	Amount.	Pay Sheet.	REMARKS.
Sept.	1917				
Oct.					
Nov.					
Dec.					
Jan	1918				
Feb.					
Mar.					
April					
May					
June					
July					
Aug.					
Sept					
Oct.					
Nov.					
Dec.					
Jan	1919				
Feb.					
Mar.					

6078

Surname

Christian Name or Names

Reg. No.

Clayton

C. R.

50411

Rank

Unit

Co.

Troop

Batty.

Pte

18th Batt.

Hospital

Date of Admission

Transferred

Gen. Etaples

Hosp. 7-11-16.

5 N. Gen. Leicester

Hosp. 14. 11. 16

Buxton Red Cross

Hosp. 26. 11. 16

Hosp.

Diagnosis

P. V. O. ^{not}

(1) Later Diagnosis (if changed)

Myalgia

(2)

Rheumatic Fever

(3)

Additional Diagnosis: if more than one state present

DISPOSITION

Date

A 368.

Dis 15. 2. 17

C.R. 18-11-16

REMARKS

21. 11. 16. B218.

30. 11. 16. B225

21-2-17 B1288

A.M.D. 2 DEPT.

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

W.F.

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

~~Rgn~~

50411

B

Number ~~54047~~ Rank *Cpl*

Surname *C. L. A. X. T. O. N.*

Christian Names *Charles Roland*

Unit *C. A. M. C.* Theatre of War *France*

Date of Service *14-9-15*

Remarks

Latest Address *54, Carnald Ave, Barking Rd,
East Ham, London E. 6, Eng.*

Roll No. *B. Page 2288*

~~V~~

9a 28937 6cm

AUG 5 1921

9a 40340 6cm

SEP 19 1921

6078



LIST No

HOSPITAL

DATE OF
ADMISSION

REMARKS

A. 368	Lo No. 1 Gen. Taylor	7-11-16	P. U. O.
B. 218	57th. North Gen. Leicester	14-11-16	Myalgia
B 225	Can+ spec. Buxton	26-11-16	Rheumatic fever.
B 288	Discharged	17-2-17	Rheumatic fever.

MARRIED

Yes.

SINGLE

WIDOWER

TRADE OR CALLING

Carpenter

RELIGION

Church of England

DESCRIPTION.

APPARENT AGE

40

YEARS

MONTHS

HEIGHT

6

FEET

INCHES

CHEST MEASUREMENT

38

INCHES

EXPANSION

3

INCHES

COMPLEXION

Fair

EYES

Blue

HAIR

lt. Brown

DISTINGUISHING MARKS

Operation mark on both groins.

MEDICAL EXAMINATION.

PLACE

Galt, Ont.

DATE

Nov. 2nd 1914

649-6-18811

CARD NO.

SURNAME.

Clayton

CHRISTIAN NAMES

Charles Roland

80.8 Dis. M. 15-8-18
D.O. # 106 of 13-8-18

REGL. No.

~~54047~~ 50411

RANK

Cpl.

UNIT

~~18th (A.M.C. Detail)~~

~~Batt~~ 1st Bn. C.I.A.

FORMER CORPS

G.A., S.A.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Clayton, Mrs. Sarah Ann

RELATIONSHIP TO SOLDIER

Wife.

A

321 Ottaway Ave.,

6

London, Ont.

auth. M.D.I. 87-77-5 7-8-18

COUNTRY OF BIRTH

England, London

DATE

Feb. 11th 1874

PLACE OF ATTESTATION

Galt, Ont.

DATE

Nov. 2-14.

Sailed from Halifax Per S.S. "Grampian" R/B. 30-11-14.

No. 50411.

RANK *Capt.*

NAME *Claxton Chas. R.*

T. O. S.

UNIT

*Trans. Fr. 1. Det. Md. Inf.
3014 18. 205-5-5-18)*

*1st Dep. Battalion Can. Gvar. Regt.
No. 1. Special Services.*

M. D. *1.*

			PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
PAID FROM	PAID TO	SIG. OR REC'T	PARTICULARS	AUTHORITY
<i>1918</i>	<i>1918.</i>			
<i>May 1.</i>	<i>May 31</i>	<i>m.</i>		
<i>June</i>		<i>m.</i>		



No. 50411

RANK

Pte.

NAME

Claxton Chas. Roland

T. O. S.

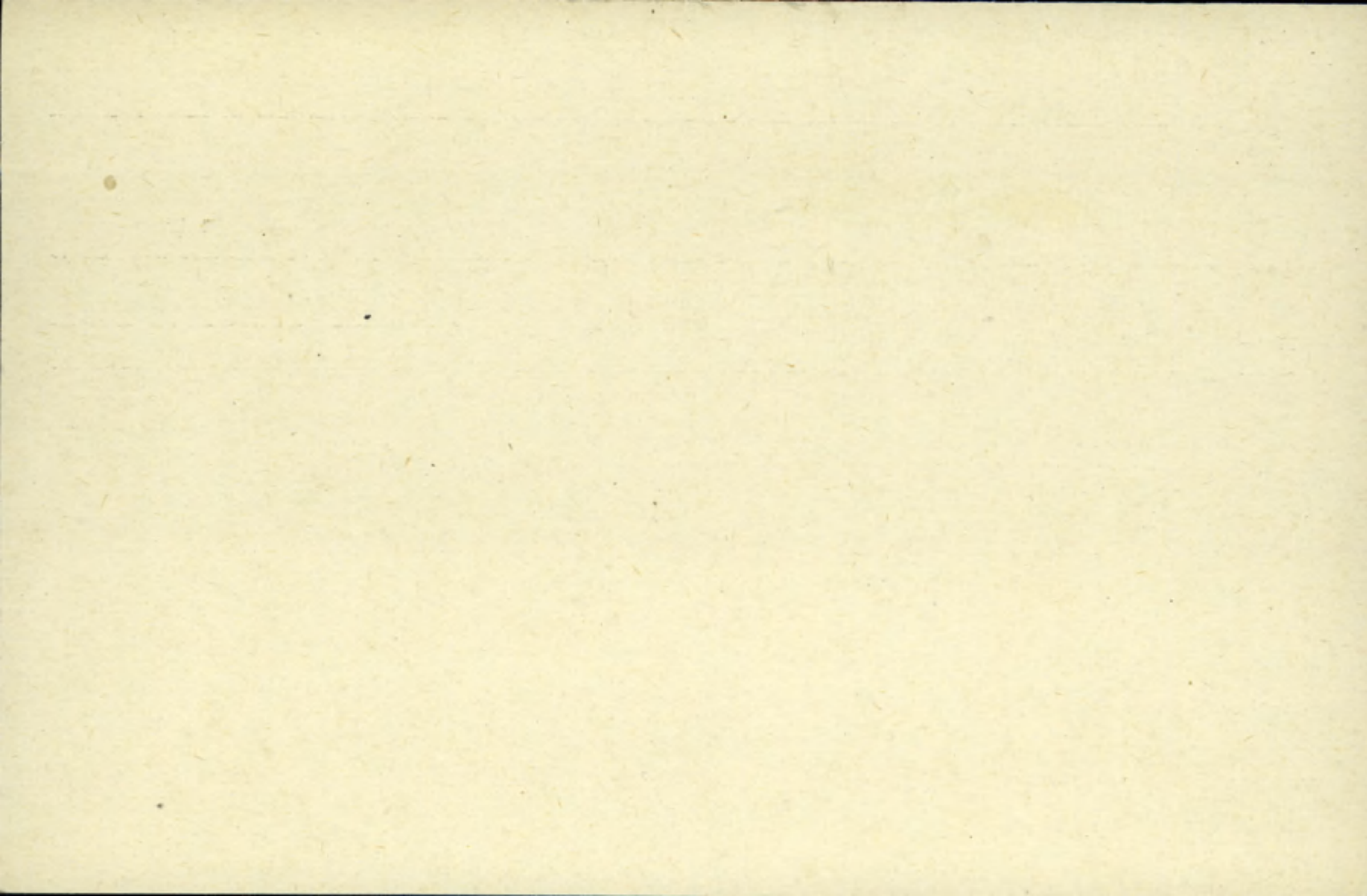
UNIT

Casualties C. E. F.

*Transfd. from C.O. 2. 13-12-17
(D.O. no 43 of 17. 12-17)*

M. D. /

			PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
PAID FROM	PAID TO	SIG. OR REC'T	PARTICULARS	AUTHORITY
<i>1917</i>	<i>1917</i>			
<i>Dec (no dates no afc)</i>		<i>n.</i>		
<i>1918</i>	<i>1918</i>			
<i>Oct 29</i>	<i>Jan. 9</i>	<i>n.</i>	<i>Transfd. to S. Unit M. H. C. D. O. no 10 of 10-1-18 9-1-18.</i>	<i>D. O. no 10 of 10-1-18</i>



No. 47
0101

RANK

Pte

NAME

Claxton, C R

T. O. S.

UNIT

18th Battalion

M. D. /

PAID FROM	PAID TO	SIG OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1914	1914			
Nov 2	Nov 11	AS	paid as corpl on 18th paylist.	
Nov 12	Nov 30	L		
	Dec	L		
1915	1915			
	Jan	L		
	Feb	L		
	Mar	L		
	Apr	L		

UNIT SAILED
APR 18 1915



No. 50411

RANK

PL

NAME

Blaxton, G.

R.

bpl.

T. O. S.

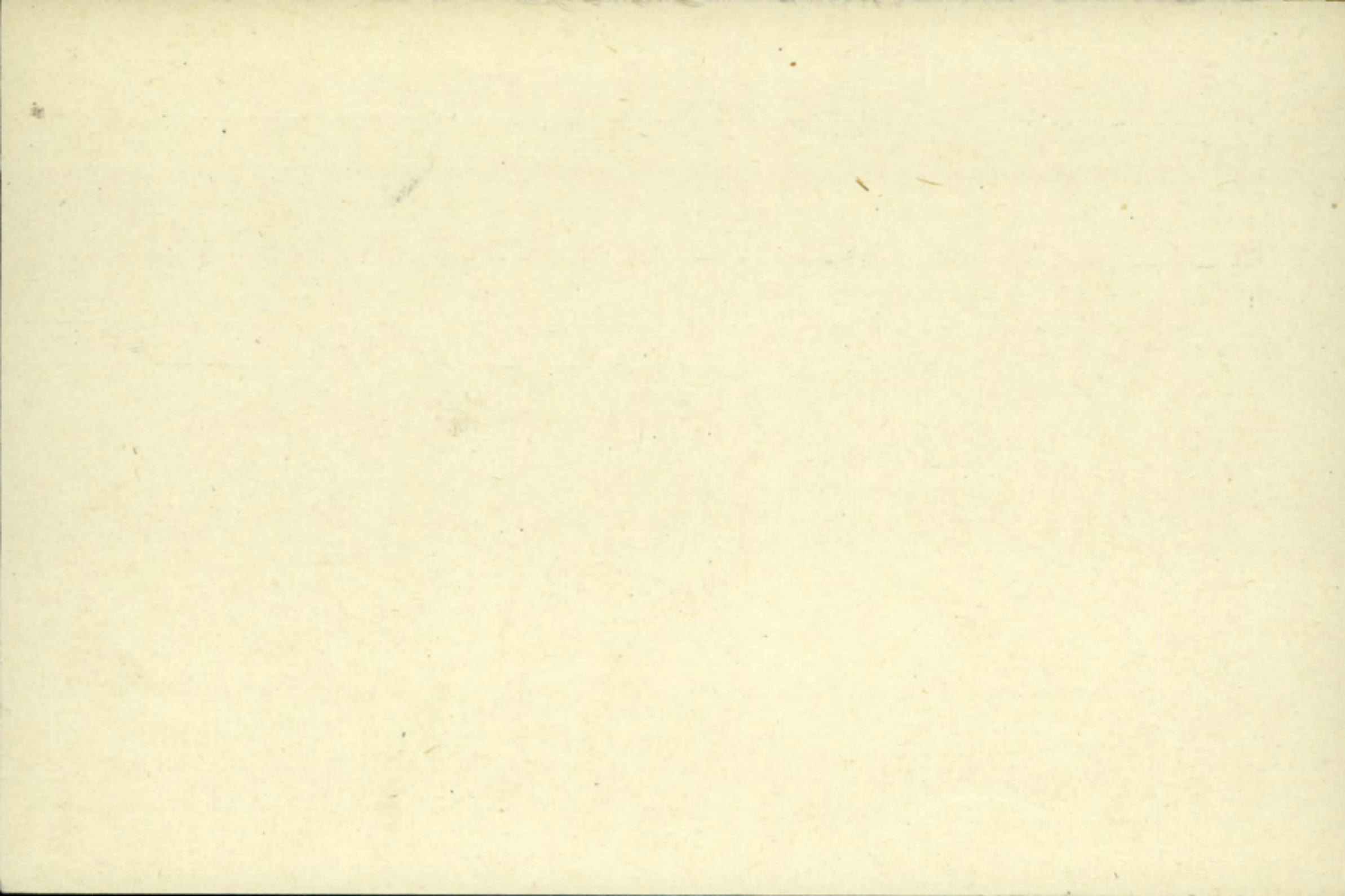
UNIT

Military Police Force 701 Detachment

Trans from 701. b. W.
9-1-18 to 10-1-18

M. D. |

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1918 Jan. 10	1918 Jan 31	✓	Reverts to Pte 9-1-18	W.O. 14 10-18
Feb		✓	To be Cpl. 8-2-18	W.O. 38 of 7-2-18
Mar.		✓		
April.		✓		
May.	n/a	n.	Trans. to 1 st Bn. b. g. R. 30-4-18	W.O. 124 of 4-5-18



Name CLAXTON
 Charles Rowland

Rank

Cpl.

Reg. No.

50411

Unit 18th Bn.

Next of Kin Canada

6078

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1916						
7-11	1 Can. G.H.	Etaples	P.U.O.	A368		
14-11	5th Nth. G.H.	Leicester	Myalgia	B218		
26-11	Can. RC Spl.	H. Buxton	Rheum. Fever	B225		
17-2-17	Discharged		-do-	B288		

List of Discharge Documents.

Reg. Conduct Sheet, Militia form B. 263.	Attestation Paper, Militia Form B. 235.
Squadron } Battery } Conduct Sheet, " B. 263a. Company }	Proceedings on Discharge " B. 218.
Copies of Convictions, by C. P. in MS.	
Med. Hist. Sheet, Militia Form B. 313	In the case of recruits who are rejected on final approval, the discharge documents will consist of
Medical Report for Invalid* " B. 227.	(a) Proceedings on Discharge.
Statement of Man's Account on Transfer and Last Pay Certificate, " D. 877.	(b) Attestation.
	(c) Medical History Sheet (in the event of such having been prepared.)

*Only if discharged "Medically unfit."

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.

is space to be for numbers.

Proceedings on Discharge.

Military District No. 1
AUG 28 1918
D. 30-C-494

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

No. 50411

Rank Corporal

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

Corps (Squadron, Battery or Company) 1st Bn. Cdn. Garr. Regt.

Date of Discharge 15-8-18.

Place of Discharge LONDON, ONT.

1. DESCRIPTION AT THE TIME OF DISCHARGE

Age 48 years 7 months.	Descriptive Marks 54 Earnald Ave., Parker Rd., East Hill, London, E. 4-8-20 19 Market Ave. Essex, Ont.
Height 5 feet 11 inches.	
Complexion Fair	
Eyes Blue	
Hair Lt Brown	
Trade Carpenter	
Intended place of residence } 321 Ottawa Ave. To be given as fully as } London, Ont. practicable.)	

2. The above-named man is discharged in consequence of as medically unfit for further general service
Auth. Routine Order No 668. d/14-6-18
I. D. 30. C. 494. d/9-8-18.

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.

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

Very Good

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

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

Carpenter

H. C. Galt
7. 10 1918.

F. B. 218.
50m.—3-16.
Q. 1772-39-113.

(OVER)

Wsg Comp 201119ms 5.

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

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

6. Medals and Decorations..... *Nil*

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) *LONDON, ONT.* *[Signature]* *Capt. & Adj.*
for U. C. 1st Bn. Cdn. Garr. Regt.
(Date) *15-8-18.* 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) *LONDON, ONT.* *G. H. Winstanley* (Signature of Soldier.)
(Date) *15-8-18.* *E. Ouellette* (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.

..... *G. H. Winstanley* (Signature of Soldier.)

10. Statement of Service.

Service toward Engagement to.....(the date to which the Record of Service is completed)..... *3* years..... *286* days.
Total..... *3* years..... *286* days.

11. Confirmation of Discharge.

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

(Place) *LONDON, ONT.* *[Signature]* *Capt. & Adj.*
for U. C. 1st Bn. Cdn. Garr. Regt.
(Date) *15-8-18.*

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.)

I have received all just demands due.

G. H. Winstanley

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OPINION OF THE MEDICAL BOARD—(Continued).

21. It is recommended that the soldier be discharged. (When not for discharge add special recommendation).

Category "C" III

Before signing the President of the Medical Board will read the certificate signed by the soldier, to the soldier, and if no change is indicated will initial the certificate.

John J. ... Capt. President.
G. L. Bryan, Capt. Members.
J. J. Weir, Capt. Members.

PLACE... London, Ontario;

DATE... 6-8-18

APPROVED BY

Wm. ... Asst. Dir. of Medical Services.

APPROVED BY

Director-General of Medical Services.

DATE... 8.8.18

DATE

TO BE COMPLETED WHEN TREATMENT IS REFUSED

I, the undersigned, understand the nature of the treatment which it is recommended that I should undergo and refuse to accept it.

Witness... Signed... Should the refusal of the soldier to accept treatment appear to be unreasonable, or should he decline to sign this statement the Board of medical officers should so state.

PLACE... DATE... President. Members.

MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

- 1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" issued by the B.P.C. and instructions issued by Militia H.Q., Ottawa, will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of Sections 1 to 17 of this Form and will obtain the signature of the soldier to the "Statement," page 3.
3. In answering the questions, Medical Officers will carefully obtain and record the soldier's statements concerning his condition.
4. Special care is required in answering question 13. Please read the questions carefully. All questions must be answered.
5. If space provided under any sections is insufficient use blank space, page 4 or add another sheet. Such entries or sheets must be initialled by the Medical Board.
6. A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board."
7. Under no circumstances may information other than that in sections 8, 9 and 10 be communicated to the soldier, directly or indirectly.
8. The nomenclature of diseases must be followed, if possible, as described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London, (1915), by Messrs. Harrison & Sons.

STATION (London, Ontario) DATE 3-8-18

1. 1 (a) Unit 1st B'n. C.G.R. (b) Regimental No. 50411 (c) Rank Cpl.

(d) Surname CLAXTON (e) Christian name Charles Roland

2. Age last birthday 48 Date of birth 11-1-70

3. Enlisted at Galt, Ontario on 2-11-14

4. Personal description:-

(a) Height 5' 11" (b) Weight 180 lbs (c) Complexion Medium

(d) Colour of hair Brown (e) Colour of eyes Blue (f) Identification marks

Small scar over right eye brow.

5. Address after discharge (for the use of the Board of Pension Commissioners)

321 Ottawa Ave., London, Ontario

6. Former trade or occupation Carpenter.

7. (a) Service

18th B'n. 1st B'n. C.G.R.

Table with 2 columns: From, To. Row 1: 2-11-14, 3-8-18

(b) Has he been overseas? YES 8. Original disease or disability

RHEUMATISM

(a) Date of origin Sept. 1916 (b) Place of origin France

(c) Cause* Infection

(d) Present disease or disability Debility

9. Present condition (a) (Important to be a full description of the present disabling condition or conditions only.) "History" must be recorded in Section 10.

[After describing all abnormalities, anatomical and functional, contributing to present disability (see section 11) state whether such disability is directly due to (a) weakness, (b) loss (complete or partial) of any organ or member of its functions, or (c) to the necessity for rest of the body or of some of its parts.]

Pulse, temperature, heart, lungs and other systems normal. Is slightly pale and dull in appearance. All his joints are mobile.

He complains of rxk rheumatism during wet weather. There is no physical evidence of this at the present time.

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9. Present condition.—(Continued.)

(b) Are the following systems normal? If not, briefly state abnormality.....
Nervous..... **YES** Digestive..... **YES** Respiratory..... **YES** Cardiac..... **YES**
Genito-Urinary..... **NO** Skin, Middle Ear, Eye or any other part..... **Yes, except as stated**
G.U. Both testicles removed at operation.

10. History: (a) of Condition referred to in "a" section 9.

He had an attack of rheumatic fever in France in sept. 1916. In Hospital 85 days.

(b) Here give a description of wounds, scars, deformities, and signs and symptoms of abnormal conditions present and not included in answer 8. This section cannot be completed without stripping the soldier and subjecting him to a thorough physical examination.

**He has a scar on each inguinal region where he was operated on for double varicocele and at same time had his testicles removed. This was a few weeks previous to enlistment.
Had a right collar fracture-march 1917-good recovery.**

11. If the disabling condition had its origin before enlistment, has it been aggravated on service?.....
Not applicable.

12. Was the disability caused or aggravated by negligence, by vice or by misconduct, or by unreasonable refusal to accept treatment?..... **NO**
The regimental documents will be referred to.
(If the answer is in the affirmative, state in percentages, to what extent the patient is incapacitated by that causation or aggravation. In answering this question, conduct sheets should be considered. If treatment has been refused, the circumstances surrounding the refusal should be described on page 4.)

13. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one?..... **Six months.**

14. Treatment (Case reports, general or special, should be secured and attached where possible).
Hospitals in France and England.

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3
OPINION OF THE MEDICAL BOARD

14. (Continued).

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit? (If the answer is "yes" state nature of treatment required and probable duration.)
NO

16. Can the former trade or occupation be resumed?..... **Yes**
(If not, briefly state why.)

17. Recommendations..... **Category "C" III**

J. W. M. Freese Lieut
Medical Officer by whom the case is brought forward.

STATEMENT OF THE SOLDIER.

(Sections 8, 9 and 10 are to be read to the soldier and either "satisfied" or "not satisfied" struck out.)

I, the undersigned, **C. R. Claxton**..... have heard the description of my disability and present condition read, and am satisfied (~~or not satisfied~~) with it. (If dissatisfied, statement should follow.) I complain in addition of.....

J. J. H.

C. R. Claxton
Signature of soldier examined.

OPINION OF THE MEDICAL BOARD

18. Does the Board concur with the preceding report? If not, give differing opinions, with reasons, quoting the number of the answer criticized.

AGREE

19. Is the soldier fit for
(a) General service, (Category A) (Yes or No) **NO**
(b) Service abroad, not general service, (" B) (Yes or No) **NO**
(c) Home service, (Canada only), (" C) (Yes or No) **YES**
(d) Temporarily unfit. (" D) (Yes or No) **NO**
(e) Unfit for service in Categories A, B and C, (" E) (Yes or No) **NO**

20. It is certified that the soldier
(a) ~~Does require treatment.~~ (Give the nature of the condition and of the treatment required and its probable duration).

(b) Does not require treatment.
(c) ~~Should pass under his own control.~~
(d) ~~Should not pass under his own control.~~
(Strike out condition not applicable).

35

11/1/18
525
D

(Medical Officers will please read this Form carefully before using it. See instructions, page 4.)

FORM TO BE USED FOR WARRANT OFFICERS, N.C.O.'S, AND MEN
MEDICAL HISTORY OF AN INVALID

DEPT MILITIA & DEFENCE

16 1918

H.Q. CANADA

STATION London, Ont. DATE 3-1-18

1. (a) Unit Casualty No. 1. (b) Regimental No. 50411 (c) Rank Pl.
(d) Surname CLAXTON. (e) Christian name CHARLES ROLAND.

2. Age last birthday 47 Date of birth 11-1-70

3. Enlisted at Galt, Ont. on 2-11-14.

4. Personal description :-

(a) Height 5' 11" (b) Weight 183 (c) Complexion Medium.
(stripped)

(d) Colour of hair Dk Brown. (e) Colour of eyes Blue. (f) Identification marks

Small scar over right eyebrow.

5. Address after discharge (for the use of the Board of Pension Commissioners.) 19 McKay Ave., Galt, Ont.

6. Former trade or occupation Carpenter.

7. (a) Service	PERIODS	
	From	To
<u>18th.</u>	<u>2-11-14</u>	<u>20-10-17</u>
<u>C. Red x Spc. Hosp.</u>	<u>20-10-17</u>	<u>13-12-17</u>
<u>Casualty No. 1.</u>	<u>13-12-17</u>	<u>3-1-18</u>

(b) Has he been Overseas? Yes.

8. Present disease or disability (use authorized nomenclature if possible). Debility

(a) Date of origin Sept. 1916 (b) Place of origin France.

(c) Cause* Rheumatism.
* (Here include original disease or injury)

9. Present condition. (Important, to be a full description of the present disabling condition or conditions). was returned

to England from France with rheumatism fever. was in Hospital 85 days. (Sept. 1916 to Feb. 1917.) Still complains of pain in hips and right shoulder aggravated by cold and damp weather. Can walk two or three miles before becoming fatigued. Walking up and down 23 steps increased pulse 88 - 100. No evidence of dyspnoea. Heart Lungs and other system normal.

Both testicles removed he says, during an operation for double varicocele in order to make him fit for service Operation last week of October 1914 and he signed up November 2nd. 1914.

TO BE COMPLETED WHEN TREATMENT IS REFUSED

I, the undersigned, understand the nature of the treatment which it is recommended that I should undergo and refuse to accept it.

Witness..... Signed.....
Should the refusal of the soldier to accept treatment appear to be unreasonable, or should he decline to sign this statement the Board of medical officers should so state.

INSTRUCTIONS

- In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" will be carefully followed.
- The Medical Officer in charge of the case is responsible for the proper completion of pages 1 and 2 of this Form. The President of the Board of Medical Officers is responsible for the proper completion of the space, of page 3, reserved for recording the Proceedings of a Board of Medical Officers.
- In answering the questions, Medical Officers will carefully obtain and record the soldier's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the soldier concerned, from witnesses, or from documents.
- If a complete answer to any question requires more space than that reserved for it, the answer may be continued on the blank space on this page.
- The nomenclature of diseases to be followed is that described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London, (1915), by Messrs. Harrison and Sons.

[After describing all abnormalities, anatomical and functional, contributing to present incapacity (see section 11) state whether such incapacity is directly due to (a) weakness, (b) loss (complete or partial) of an organ or member or of its functions, or (c) to the necessity for rest of the body or of some of its parts.]

10. History ;

Here give a description of wounds, scars, deformities, and signs and symptoms of abnormal conditions present and not included in answer 8. This section cannot be completed without stripping the soldier and subjecting him to a thorough physical examination

Two operation scars one in each groin.

11. To what extent, state in percentages, is capacity to earn a livelihood in the untrained labour market reduced? If there is more than one disabling condition, estimate the incapacity due to each, and that due to all combined.

5% (five percent.) due to service with

12. Did the disability arise on or off duty? on duty

13. Was a Court of Inquiry held? No.

14. If the disabling condition had its origin before enlistment, has it been aggravated on service?

Yes..... Not applicable. (If the answer is in the affirmative, state in percentages, to what extent the soldier is incapacitated by that aggravation.)

15. Was the disability caused or aggravated by negligence, by vice or by misconduct, or by unreasonable refusal to accept treatment? No

(If the answer is in the affirmative, state in percentages, to what extent the patient is incapacitated by that causation or aggravation. In answering this question, conduct sheets should be considered. If treatment has been refused, the circumstances surrounding the refusal should be described on page 4.)

16. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? three months.

17. Treatment (Case reports, general or special, should be secured and attached where possible).

Hospital in England.

18. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit? No.

19. Can the former trade or occupation be resumed? Not at present.

20. Recommendations G. I.

Medical Officer by whom the case is brought forward.

STATEMENT OF THE SOLDIER.

(Sections 8, 9 and 10 are to be read to the soldier.)

I, the undersigned Charles Roland Claxton 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

Signature of soldier examined.

OPINION OF THE MEDICAL BOARD

21. Does the Board concur with the preceding report? If not, give differing opinions, with reasons, quoting the number of the answer criticized.

Agree.

22. Is the soldier fit for

- (a) General service, (Category A) (Yes or No) no
(b) Service abroad, not general service, (" B) (Yes or No) no
(c) Home service, (Canada only), (" C) (Yes or No) Yes
(d) Temporarily unfit, (" D) (Yes or No) no
(e) Unfit for service in Categories A, B and C, (" E) (Yes or No) no

23. It is certified that the soldier

- (a) Does require treatment.
(b) Does not require treatment.
(c) Should pass under his own control.
(d) Should not pass under his own control.

(Strike out condition not applicable).

24. It is recommended that the soldier be discharged. (When not for discharge add special recommendation).

That he be placed in some unit in Category G.I. for duty.

President.

Members.

Signature of member.

STATION London, Ont.

DATE 4-1-18.

APPROVED

APPROVED BY

JAN 9 1918

DATE

Signature of Assistant Director of Medical Services.

Assistant Director of Medical Services.

APPROVED BY

DATE

18/1/18

Signature of Director-General of Medical Services.

Director-General of Medical Services.

DUPLICATE

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		
date ?	Good	Vaccinations.	D.H.Hogg.
date ?	"	Anti-Typhoid Inoculations.	"
19.11.14	"	"	"

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

To be used for recruits enlisting direct into the Regular Army only. Army Form B. 178^A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname CLAXTON Christian Name Charles Roland.

TABLE I.—GENERAL TABLE.

Birthplace ... Parish London County England.

Examined ... (on 2nd day of Nov. 191 . 4
at Galt, Ontario.

Declared Age ... 40 years ... days.

Trade or Occupation ... Carpenter

Height ... 6 feet, ... inches.

Weight ... lbs.

Chest Measurement { Girth when fully Expanded. 41 inches.
Range of Expansion 3 inches.

Physical Development ... Good

Vaccination Marks { Arm ... Right Left
Number

When Vaccinated ...

Vision ... { R.E.—V=
L.E.—V=

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

(b) Slight defects but not sufficient to cause rejection ... Operation mark on both groins

Approved by (Signature) D.H.Hogg.
(Rank) Major. Medical Officer.

Enlisted ... (at ... on ... day of ... 191 .

Corps.	Regtl. No.
	<u>5 0 4 1 1</u>

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.

I certify the foregoing to be a true copy of an original entry on a Medical History Sheet of this man ... C.A.M.C. for the Officer in Charge of Records Canadian Contingents.

