REGIMENTAL DOCUMENTS

NAME Coleman M.F. REGT. NO. 59185 UNIT 21st Bn. H. Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
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1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
2.	M.F.W. 125					3-9-20
1	R. & O. 6064					17-9-20
6 1	Misc.					5
2	[illegible]					
1	[illegible]					
	[illegible]					
1	Postcard					
1	A.W.A.1394					
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1	[illegible]					

W. 2539
100M-11-18
1772 [illegible]

289

289

ATTESTATION PAPER.

No.

Folio.

ORIGINAL

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

5185

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name?..... Michael Francis Coleman
2. In what Town, Township or Parish, and in what Country were you born?..... Stafford. Eng.
3. What is the name of your next-of-kin?..... Margaret Coleman (mother)
4. What is the address of your next-of-kin?..... Colbourne Ont;
5. What is the date of your birth?..... 21 Nov. 1880
6. What is your Trade or Calling?..... Telegraphist
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?.. 2nd South Staffordshire Regt 12 yrs.
    If so, state particulars of former Service.
11. Do you understand the nature and terms of your engagement?..... yes
12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE? yes

M. F. Coleman (Signature of Man).

H O'Meara (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Michael Francis Coleman, 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.

M. F. Coleman (Signature of Recruit)

Date Nov. 6 1914. H O'Meara (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Michael Francis Coleman, 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.

M. F. Coleman (Signature of Recruit)

Date Nov 6 1914. H O'Meara (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 Kingston this 6 day of Nov 1914.

W S Hughes (Signature of Justice)

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

W S Hughes (Approving Officer)

D. Col.

200 M.—8-14.
H.Q. 1772-1-13.

Cobourg 28.10.14

Description of Michael F. Coleman on Enlistment.

Apparent Age 23 years 10 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height ..... 5 ft. 6½ ins.

Chest measurement.
- Girth when fully expanded ..... 37 ins.
- Range of expansion ..... 4 ins.

Complexion ..... Ruddy

Eyes ..... Blue

Hair ..... Fair

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

scar on inside left thigh.
scar front of tenth rib.

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* ~~unfit~~ fit for the Canadian Over-Seas Expeditionary Force.

Date 6/11 1914. ..... J. Sparks Capt. A.M.S.

Place Kingston ..... 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:—

~~Twelve teeth missing below.~~

CERTIFICATE OF OFFICER COMMANDING UNIT.

M. F. Coleman 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. S. Hughes (Signature of Officer)
Lt.-Col.

Date 6/11/ 1914.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 59185 (Rank) Sgt.

Name (in full) Coleman, Michael Francis enlisted in

the 21st Battalion, C.E.F.

CANADIAN EXPEDITIONARY FORCE at Kingston on the 6th

day of November 19 14

HE served in England, Canada & France

and is now discharged from the service by reason of "On Demobilization" Medically unfit for general service H.O. 18 94 d/15-4-19 .

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

Age 38 yrs 8 mon.

Height 5 ft 7½ ins.

Complexion Fair

Eyes Blue

Hair Brown

Marks or Scars

M Coleman

Signature of Soldier

Graham Stairs

Issuing Officer

Major

Rank

2-8-19

Date of Discharge

O.C.No.3 Detachment, CMPC. MD#3

Appointment

Signed at Kingston this 2nd day of August 19 19

in Military District No. 3

File Reference No.

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

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

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

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

Unit .....

Address on Discharge .....

Character and Conduct .....

.....

Former Occupation .....

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

.....

Medals and Decorations .....

.....

Remarks .....

.....

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

.....

Name of Officer

.....

Rank

.....

Appointment

Particulars called for on the back of this Certificate will not be completed.

On Discharge Each Man is to be Supplied with a Duplicate of this Certificate.

Returned to Canada,- Authority Combatant Board of Officer

held at.....Seaford.....Dated.....1.11.....1917.

Category.....B.11.....

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

1797

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 ...Michael Francis... Surname ...Coleman.....

3. Rank ...Sergt... 4. Original Unit ....21st Bn.... 5. Reg. No. ...591885

6. Address, in full, to which future payments of gratuity are to be forwarded .....
.....351 Johnson St. Kingston Ont
.....

7. Date of enlistment in the C.E.F. .....6-11-14.....

8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge .....Hannah Coleman.....

9. Relationship of such dependent .....Wife.....

10. Present address, in full, of such dependent .....351 Johnson St.....
.....Kingston.....

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:—
.....21st Bn. 5th May 1915 to Nov 1917
.....

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 units 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 ...21st Bn 6th ~~May~~ Nov
1914 to 6-2-17 E.O. R.D 19-7-17
to 17-11-17 C.M.P.C. Jany 1918 to Aug 1919

16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department .....NO.....

17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.? .....NO.....

M.F.W. 2595.
1772—39—1389.
122—D.P.—250M-2-19.

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

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

20. Have you been issued with a War Service Badge? If so, what class? ..... "A" .....

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 ..... 2-8-19 ..... (b) Reason for discharge ..... "On Demobilization" Medically Unfit for General 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 ..... 21st Bn 14-9-15 to 17-1-17 .....

27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment? ..... No .....

(b) If so, are you in receipt of full pay and allowances from that Department? ..... 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: M. Holeman

Place of Residence: 351 Johnson St Kingston Ont.

Declared before me at: Kingston

This 2nd day of August 19.19.

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

POST DISCHARGE PAY.

Date paid	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
			183 days @2.50	$637.50

Certified Correct.

District Paymaster.

MEDICAL HISTORY SHEET.

287

Surname Coleman *Christian Name* Michel J.

Examined { on 6th day of Nov. 191 4
at Kingston

Approved by A Spark
Rank Capt. A.M.S. M.O.

Birthplace { City or Town Stafford
County England.

Apparent age 32 yrs 11 mon.

Trade or occupation Telegraphist

Height 5' Feet 6 1/2. Inches.

Weight Lbs.

Chest measurement { Minimum 33 inches.
Maximum expansion 4 inches.

Physical Development Good

Small-Pox Marks None

Vaccination Marks { Arm Right Left. ✓
Number 4 4/15

When Vaccinated last 1898

(a) Marks indicating congenital peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

Date	Fit or Unfit	Examined for Re-engagement
		16 FEB 1917 M. O.
		M. O.
		M. O.
		M. O.
		M. O.
		M. O.

Date	Result	Vaccinations.
4/15		F. Etherington Maj A.M.S. M. O.
		M. O.
		M. O.

Date	Result	Anti-Typhoid Inoculations, Etc.
4/11/14		F. Etherington Major A.M.S. M. O.
21/11/14		F. Etherington Maj A.M.S. M. O.
27/7/17		anti typhoid Lancet M. O.

Enlisted on 6 *day of* Nov 1914 *at* Kingston

	Corps.	Regt'l Number	Habits.	Date.
Joined on enlistment.		59185		
Transferred to.....				

21st CANADIAN BATTALION.

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
Granville C.S. Hosp Kingston Ont.	6/VII/17	G.S.W. Left thigh	Bil to B.T. Toronto May. C.A.M.C.
	29.7.17	G.S.W. Left thigh " Left patella	Cvili R.M. Pilkington Lt Col R.A.M.C. W.H. Lavell Capt R.A.M.C.

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

M. F. B. 313.

5M—8-14.
H. Q. 1772-39-439.

21st Battalion (C.E.F.)

Surname ..... Christian Name .....

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital: Day	Month	Year	Dates of Discharge from Hospital: Day	Month	Year	DISEASE.	Number of days in Hospital.	Remarks on nature of the disease; how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of Inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
No.7 Can. Stat.Hosp. Havre		3	10	16	14	10	16	N.Y.D.			A 340- A 351. KT.
No.4 Can. Depot. Havre		14	10	16	27	10	16	Debility Myalgia Scabies		Discharged to Reinfircements Havre	A 363.
										Duplicate Medical History Sheet posted to here.	
Nol Con.Dep.Boulogne		26	9	16	29	9	16	Sick	4	Discharged to Base Details.	A334-338 (VW)
Reported from base		5	11	16						Reported from base, rejoined unit.	A383
Wharncliffe War Hospital Sheffield.		7	11	17	28	111	17	G.S.W. Back & left thigh:	50	Face wounds now slight. Had. post patella. slight post head & Abia. traumatic arthritis knee joint now bends about 10°. Trans. to Canad. Red X. Conv. Hosp. Bushey Park.	R.K.Robertson.
								G.S.W. left Thigh Patella	IV-4	Wound through quadriceps healed. slight atrophy in thigh muscles Wound over centre of Patella healed Some bone & synovial thickening about knee joint Small amount of fluid in joint Patella not adherent. Very slight movement at knee joint Is able to walk a short distance with a stick This causes pain in the knee joint Trans. to G.C.S. Hosp. Ramsgate	J.Shearer Captain, C. A. M. C.
THE KING'S CANADIAN RED CROSS CONVALESCENT HOSPITAL		28	3	17	7	4	17		10		
GCSH Ramsgate		7-4-17			14-7-17			GSW. Left kg	99	Entering had 30° mont knee has now 90° a full extension	J.E.C.Henderson Capt CAMC

MEDICAL HISTORY SHEET

Surname ..... *Christian Name* .....

Examined { on ..... day of ..... 191.....
at .....

Birthplace { City or Town .....
County .....

Apparent age .....

Trade or occupation .....

Height ..... feet ..... Inches

Weight ..... lbs.

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

Physical development .....

Small-pox Marks .....

Vaccination Marks { Arm ..... Right ..... Left
Number .....

When Vaccinated last .....

(*a*) Marks indicating congential peculiarities or previous disease .....

.....

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

.....

.....

Approved by

.....

Rank ..... M.O.

Date	Fit or Unfit	Examined for Re-Engagement
		..... 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.
		..... M.O.
		..... M.O.
		..... M.O.

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

	Corps	Regt'l Number	Habits	Date
Joined on enlistment				
Transferred to				

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 Servcie, on the man becoming non-effective; the date and cause being stated on next page.

M. F. B. 313.
500M.—3-16.
H. Q. 1772-39-439.

Surname Coleman. Christian Name M. J.

Lyl.

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				
Kingston. Queens Univ Mil Hosp.		15.	11.	18	16	11.	18.	Neuralgia	1	Tooth extracted.	Sth. Asselstine Capt. A.M.S.

Forms
I. 1237
10

Copied 3/4/17
AA

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
Year 1917	59185	Pte.	Coleman	M. J.
	Unit. 21st Bn.		Age. 39	Service. 12 yrs 12 mths

Station and Date.	
Bushey Park.	Disease G.S.W. (Left Thigh) IX - 4 (Patella)
	BORN AT Stafford Eng.
28 Mch	MARRIED ~~OR SINGLE~~ OCCUPATION Fitter
	ENLISTED AT Cobourg Ont. ON 14 Oct 1914
	INOC T. 1 S.P.V. 1
	NEXT OF KIN:- (Wife) Mrs Hannah Coleman General Hospital Kingston Ontario
17 Jany 17	Bully Grenay Shrapnel
	Entry left upper 1/3 thigh front aspect.
	exit " " inner "
	Left Patella broken.
17 Jany	C.C.S. 22 Operation Wound in thigh bed 1 week. tube inserted
24 Jany	6 staples & General put knee in splint
	X Ray taken. tube taken out of thigh
7 Feby	Wharncliffe War Hospital in bed 4 weeks
	Splint on knee for 4 weeks and X Ray (finding)
	numerous small F.B. Leg Massage 2 weeks
29 Mch	Bushey PK
	On admission:-
	Wd. through quadriceps healed.
	Slight atrophy in thigh muscles.
	Wd. over centre of patella.
	healed. Slight Some Bony & synovial

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

(J 3521.) Wt. W 5606—2621. 2,000,000. 7/15. D & S.

P.T.O.

Station and Date.	
	Thickening about Knee joint
	Small amount of fluid in joint
	Patella not adherent.
	Very slight movement at Knee joint
	Is able to walk a short distance
	with a stick. This causes pain in
A.C.	the knee joint.
	Massage
	2 to 6.
Sept. 3	Feels weak & nauseated
	Does not look well Pulse 120
	Urinalysis Nil.
	To go to bed.
	Ramsgate 79
7.4.17	Transferred to Granville Can. Spec. Hospital Ramsgate

L. D. Lambkin
Major C.A.M.C.

Forms
I. 1237.
12

23/1476.

(2) Continued.

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book. T5602

Year 1917

Station and Date. GRANVILLE CANADIAN SPECIAL HOSPITAL REGISTRAR'S OFFICE RAMSGATE 7 APR 1917

Regimental No.	Rank.	Surname.	Christian Name.
59186	Pte	Coleman	Bp.

Unit.	Age.	Service.
21st Bn	39	2y 12m 17/12

Disease G.S.W. L. Knee Leg

See previous sheet.

Present condition: Ambulatory & Comp

Complains of pain on both sides of infra patellar ligament.

Slight amount of fluid in joint.

Bad adherent to quadriceps. Preventing full extension

of leg by 10°.

Flexion of knee to 40° only.

Patella not adherent. Joint thickening & Capsule of joint

APR - 9 1917

Radiant heat, massage & exercises and knee with gentle

10 APR 1917

forced movement of knee. Lt. Robson capt.

Carry on as ord.

9 April 17

Hindhead / Letter / Light Arched / Reaction / Acid / Hyperaemia / N.S. / Abb. / Leg / Leg / Anaesthetic / Part / Left Knee

APR 17 1917

Flexion increased to 45° otherwise no changes

O.D → B.D → Lt. R.

APR 25 1917

Flexion increased to 50°. Leg "Feels stronger". Complains of pain

on inner side of knee at night. O.D → B.D → Lt. R.

MAY - 3 1917

No change since last outing. Quadriceps class Gym Lt R.

MAY 13 1917

Flexion increased to 65° Carry on. O.D → Lt. R.

MAY 22 1917

Flexion increased to 75°. Some grating in knee joint. O.D → Lt R

MAY 31 1917

Flexion increased to 85° O.D → Lt R

JUN - 9 1917

No change since last entry O.D → Lt R

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

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

P.T.O.

Station and Date.	
JUN 20 1917	No change JEHenderson Capt
JUN 27 1917	Can pass to right angles VD-0 SD-0 JEH
30 JUN 1917	Comy on Shows to fit - for B II in this case
JUL 4 - 1917	For Board Category, VD-0 - D JEH

EXAM. MED. BOARD.
16 JUL 1917
U. S. G. C. S. H.
PASSGATE.

B II

VD-0 SD-0 JEH

Forms
I. 1237
10

Army Form I. 1237

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
T.C. 16	59185	Pte	Coleman.	Frank.
Year	**Unit.**		**Age.**	**Service.**
1917	2/5th Canadians.		26	2 4/12.

Station and Date.

Wharncliffe War Hospital
Sheffield.

Disease G.S.W. face & left lower limb.
fract. patella.

Feb 8/17 Wounded Jan 17th during a raid on the German front line: He received some scratches of the face: He was also wounded in the left thigh & his left knee was struck by a ? fire cap. On Exam face wounds healed. Wounds of thigh now clean. There is a good deal of fluid in the knee joint: F.B. was removed from thigh: to Pat. Lg Office for X ray.

A Robertson:

13. X ray shows post. patella. numerous fine F.B.s slight post of head of tibia Injury to internal condyle producing traumatic arthritis:

A.R.

Mar 5. To be taken off splint. Union has taken place knee bends a few degrees. To have massage.

A.R.

26. Knee bends about 10° now. walks fairly well.

28. To 4th King's Canad. Red X Conv. Hosp. Bushey Park Hampton Hill Middlesex

A Robertson

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

(J 3521.) Wt. W 5606—2621. 2,000,000. 7/15. D & S.

P.T.O.

Station and Date.	

M.F.W.

WAR SERVICE BADGES. File No. 12763

P.C. 2199.

A P P L I C A T I O N.

Classes "A"-"B"-"C".

Kingston Jan 16 1918

I hereby make application for a War Budge

Class "A" ~~& Class~~ ....."

~~I am in possession of Patriotic Fund Badge~~,

~~Class " " Number~~ ....."

(A) I enlisted in the Canadian Expeditionary Force, have seen Active Service at the Front in the present War, from Sept 1st 1915 to March 1917 ~~and have been honourably discharged,~~ (or have been retained in Canada on duty) ,and am therefore entitled to a War Badge, Class "A", ~~and also to a War Badge, Class~~ "B".

~~(B) I enlisted in the Canadian Expeditionary Force,~~ have seen Active Service in England in the present War, from ..... 191 to ..... 191 ..... and have been honourably discharged on account of old age, Wounds, Sickness, whereby I have been rendered permanently unfit for further military service and am therefore entitled to a War Badge, Class "B".

C) I enlisted in the Canadian Expeditionary Force and served in the Present War from ..... 19 ..... to ..... 191 ....., and have been honourably discharged from the Canadian Expeditionary Force, on account of old age, wounds, sickness, whereby I have been rendered permanently unfit for further ~~military service.~~

W. J. Coleman
(Signature)

ADDRESS 351 Johnston St REG. NO. 59185 RANK Lieut.
(No. and Street)

Kingston Ontario UNIT 21st Bn.
(Town and Province)

NOTE: The applicant should strike out that part of the form which does not apply to his particular case.

M.F.W.125.
100m-9-17.
1272-39-1134.

3

CERTIFIED TRUE COPY
SUBSTITUTED FOR TRIPLICATE
[illegible] MAR. 2004.

O.Inf. 44328

R. 144

UNIT 21st Bn. 2nd C.M.R.

Regimental No. 59185

ATTESTATION PAPER.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

	(ANSWERS)
1. What is your name?	Michael Francis Coleman
2. In what Town, Township or Parish, and in what Country were you born?	Stafford, Eng.
3. What is the name of your next-of-kin?	Margaret Coleman (Mother)
4. What is the address of your next-of-kin?	Colbourne, Ont.
5. What is the date of your birth?	21st Nov. 1880
6. What is your Trade or Calling?	Telegraphist
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.	2nd North Staffordshire Regt. 12 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.

Sgd. M. F. Coleman (Signature of Man).

" H.O. Dennis (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Michael Francis Coleman, 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.

Sgd. M. F. Coleman (Signature of Recruit).

Date Nov. 6. 1914 " H.O. Dennis (Signature of Witness).

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Michael Francis Coleman, 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.

Sgd. M. F. Coleman (Signature of Recruit).

Date Nov. 6. 1914 " H.O. Dennis (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.

28 FEB 1914

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 Kingston this 6 day of Nov. 1914

Sgd. W.S. Hughes. (Signature of Justice).

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

Sgd. W.S. Hughes Lt. Col. (Approving Officer).

Certified true copy.

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

V. & S., Ltd. 30M. 18-12-15. 48297.

Description of Michael F. Coleman **on Enlistment.**

Apparent Age 33 years 11 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 6½ ins.

Chest measurement: Girth when fully expanded 37 ins.; Range of expansion 4 ins.

Complexion Ruddy

Eyes Blue

Hair Fair

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

Scar outside left thigh.
Scar front of tenth rib.

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* ~~unfit~~ fit for the Canadian Over-Seas Expeditionary Force.

Date 6 · 11 · 1914 Lgd. J.F. Sparks

Place Kingston Capt. A.M.C.

*Insert here "fit" or "unfit." *Medical Officer.*

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 :—

~~Incapable~~ Poor.
~~Twelve teeth missing below~~

CERTIFICATE OF OFFICER COMMANDING UNIT.

M.F.C. Coleman 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.

Lgd. W.L. Hughes. (Signature of Officer.)
Lt. Col.

Date 6 · 11 · 1914

Certified true copy.

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

259 Copy

ATTESTATION PAPER.

No. 59185

Folio.

Coleman

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name?	Michael Francis Colman
2. In what Town, Township or Parish, and in what Country were you born?	Stafford Eng
3. What is the name of your next-of-kin?	Margaret Colman Mother
4. What is the address of your next-of-kin?	Colbourne Ont
5. What is the date of your birth?	Nov 21st 1880
6. What is your Trade or Calling?	Telegraphist
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.	2nd Batt Staffordshire Regt. 12 yrs
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

sigd { M. F. Coleman (Signature of Man).
{ H. O. Dennis (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Michael Francis Coleman, 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 16th 1914. sgd { M. F. Coleman (Signature of Recruit)
{ H. O. Dennis (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Michael Francis Coleman, 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 16th 1914. sgd { M. F. Coleman (Signature of Recruit)
{ H. O. Dennis (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 Kingston this 16th day of Nov 1914.

W. P. Hughes (Signature of Justice)

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

W. P. Hughes (Approving Officer)

200 M.—8-14.
H.Q. 1772-1-13.

Description of Michael F. Coleman on Enlistment.

Apparent Age 33 years 11 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height ..... 5 ft. 6½ ins.

Chest measurement: Girth when fully expanded ..... 34½ ins.
Range of expansion ..... 4 ins.

Complexion Ruddy

Eyes Blue

Hair Fair

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

Scar outside left thigh
Scar front of tenth rib

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* Unfit for the Canadian Over-Seas Expeditionary Force.

Date 6/11 1914. G. Starks

Place Kingston Capt. C.A.M.C.
Medical Officer.

*Insert here "fit" or "unfit."

NOTE.—Should the Medical Officer consider the Recruit unfit, he will fill in the foregoing Certificate only in the case of those who have been attested, and will briefly state below the cause of unfitness:—

Five teeth missing below

CERTIFICATE OF OFFICER COMMANDING UNIT.

M. F. Coleman 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. S. Hughes (Signature of Officer)

Date Nov. 30th 1914.

Form R. & O. 6064.
10339—12 Books.

REFER TO FILE.

In reply please quote No. 97958
and date of letter

THE CANADIAN DISCHARGE DEPOT,

BUXTON.

STATEMENT ON DISCHARGE.

STATEMENT OF...Name Colman SWF

Reg. No. 5-9188- Rank Pte

Unit CORD

Place BUXTON Date 13-11-17

To OFFICER i/c, EMBARKATION, at BUXTON

I hereby request my Discharge in CANADA

I desire to make the following remarks, on the understanding that this statement may be produced as evidence in any subsequent inquiry, in regard to the following matters:—

CLOTHING—

FOOD, AND TREATMENT AT DISCHARGE DEPOT—

PAY—

Complaints. If any, will be noted hereon opposite the corresponding headings.

I understand that it is my privilege to make these remarks, and with the exception of the points raised, I hereby affirm that I have no complaints to make regarding my treatment at the Canadian Discharge Depot, Buxton.

I also certify that any delay in the carrying out of my Discharge has been explained to my satisfaction.

Signature W. McLennan

Rank Pte.

Witnesses { Buxton Lt. (*Adjutant, C.D.D., Buxton*).

P Pilcher for (*O.C., C.D.D. Buxton*).

N.B.—This statement will be prepared in duplicate, and disposed of as follows:—

ORIGINAL—To be forwarded with Discharge Documents.

DUPLICATE—To be filed, for reference, by the O.C., Canadian Discharge Depot, BUXTON.

Do not write in this space

CANADIAN DISCHARGE DEPOT

BUXTON

STATEMENT ON DISCHARGE

This is to certify that No. 81328

Rank

Name

Unit

Regt. No.

has been discharged as an Other Rank from the Canadian Discharge Depot, Buxton.

Date

Place

Signature of Officer Authorized to Sign

STATEMENT OF SERVICE

IN DISCHARGE DEPOT—
FOOD AND TREATMENT

GROOMING—

The following particulars:—

Statement may be produced as evidence in any subsequent inquiry in regard to

I desire to make the following complaint on the understanding that this

I understand that it is my privilege to make these statements and with the

exception of the bonus raised. I hereby affirm that I have no complaints to make

regarding my treatment at the Canadian Discharge Depot, Buxton.

I also certify that my duties in the carrying out of my instructions have been

explained to my satisfaction.

Signature

Date

Form No. 10—43 Book
10-30—43 Book

23/146

Forms
I. 1237
10

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	59185	Pte.	Coleman	M.F.
Year 1917.	Unit. 21st. Batt.		Age. 39	Service. 12/12. 17/12.

Station and Date.	
	Disease G.S.W. Left thigh 1X-4 (Patella)
Bushy Park	Born at- Stafford Eng.
	Married Occupation:) Fitter
	Enlisted at- Cobourg Ont. On 14th. Oct. 1914.
	Inoc. T. 1 S.P.V. 1
	Next of kin:- Wife. Mrs. Hanna Coleman. Genl. Hospl.
	Kingston Ontario.
Jany. 17th	Builly Grenay Shrapnel
	Entry:- Left upper third thigh front aspect
	Exit:- Left upper third thigh inner aspect.
	Left Patella Broken.
Jany 17th.	22 C.C.S. Operations:- Wound in thigh, Tube inserted
	In bed 1 week.
Jany 24th.	Etaples 4 Genl. Hospl. Put knee in splint.
	X Ray taken. Tubes taken out of thigh.
Feby. 7th.	Wharncliffe War Hospl. In bed 4 weeks.
	Splint on knee for 4 weeks. X Ray:- Numerous small F.B.
	Leg massaged 2 weeks.
Mch. 29th.	Bushy Park C.C/H.
	On admission:- Wound through quadriceps
	healed. Slight atrophy in thigh msucles. Wound over center of
	Patella. Some boney and synovial thickening about knee joint.
	Smalll amount of fluid in joint. Patella not adherent. Very
	slight movement at knee joint. Is able to walk a very short dista
	with a stick. Th$$ causese Pain x in the knee joint.
	Massage. I to C. J.D.A.

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

(J 3521.) Wt. W 5606—2621. 2,000,000. 7/15. D & S.

P.T.O.

Station and Date.	
APr. 3rd.	Fells weak and nauceated. Does not look well.
	Pulse 120. Urinalysis Nil. Tog go to bed. J.D.A.

Ramsgate ½

J D Adams

Proceedings of a Board of Officers assembled at Seaford on.....by order of Colonel S.W. Gardner, M.C. . C.C., Canadian Troops, Seaford, for the purpose of examining the N.C.O. or man named below with a view to ascertaining his suitability for retention in England, or return to Canada.

(List of Names)

Regimental No.	Rank.	Name.	Unit.

The Board having heard and considered the evidence in the case of the man mentioned above, with special reference to:-

(a) The man's usefulness from a Military point of view.

(b) The cost of his maintenance, including pay.

(c) His occupation in civil life, and his physical fitness for this occupation.

is of the opinion that this man should be returned to Canada, for disposal by the Adjutant-General, Ottawa.

(Sgd)_____President.

_____Member.

_____Member.

H/I.W.

Serial No.

No. 59185 Rank. Pte. Name. Coleman, M.F.

Unit. 21st Bn. Category. Bii. appeared

before a Combatant Board of Officers composed of:-

President - Lt-Col.F.W.Wedderburn. N.B.R.D.

Members - (Capt. F.L. Shouldice, E.O.R.D.
(Capt. C. Fraser. B.C.R.D.

held at Seaford, Sussex the 1st day of November, 1917.

Authority:- A.G. 5-1-22, 29-4-17.

The Board having heard the evidence in the case of this m with special reference to :-

(a) The man's usefulness from a Military point of view.

(b) The cost of his maintenance, including pay.

(c) His occupation in Civil life, and his physical fitness for this occupation;

is of the opinion that this man should be returned to Canada for disposal of the Adjutant-General, Ottawa.

.....Lt-Col. C
Eastern Ontario Regimental Depot
Seaford, Sussex.

Rank Name COLEMAN Michael. Francis. Reg'l No. 59185.

Unit 21st Bn If in perm. Corps, What Unit? Married or Single Single

Place and Date of Enlistment Kingston. Ont. 6th Nov. 1914. Place of Birth Stafford. Eng

Name and Address, Next-of-Kin Margaret Coleman. Calbourne. Ont.

Relationship Mother

JAN 19 1918 CANADIAN CONTINGENT

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Entered on N.E. Card Index NR 7
Checked by J.C. Scott

Discharge, Date and Place Reason Character

Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
June 1	June 30	30	1.00	30	30	.10	3	965	42 65			40	/	-	40	2 65	By Bal. May 2 days pay + 10c Bal June
1/7	31/7	31	4	31	31	4	3 10		34 10			32 50	/	2 30	34 80	1 95	
								193	193							388	Exchange
1/8	31/8	31	.	31	31	.	3 10		34 10			29 20	/	.	29 20	8 78	
1/9	30/9	30	.	30	30	.	3		33			5 36	/	.	5 36	36 42	
1/10	31/10	31	.	31	31	.	3 10		34 10			26 24	/	.	26 24	67 90	
1/11	30/11	30	.	30	30	.	3		33			26 85	/	.	26 85	98 22	
1/12	31/12	31	.	31	31	.	3 10		34 10			16 90	/	.	16 90	115 42	
1916. Jany 1	Jany 31	31	.	31	31	.	3 10		34 10			26 21	/	.	26 21	146 90	
1/2/16	29/2/16	29	.	29	29	.	2 90		31 90			5 23	/	.	5 23	173 57	
1/3/16	31/3/16	31	.	31	31	.	3 10		34 10			26 1 / 26 1	/	.	5 22	202 45	
		305			305		0 11 58		34 708			142 33		2 30	144 63	202 45	

Carried forward to Large Ledger sheet

Checked 7/5 12/12/17

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			No.	Date							

EASTERN ONTARIO REGIMENTAL DEPOT.

From:- O.C., E.O.R.D.

To:- Officer Commanding,

File No. H-Cont.-

Date.....1917.

EASTERN ONTARIO REGIMENTAL DEPOT
ORDERLY ROOM
8 - NOV. 1917
CANADIANS

The marginally noted soldier is to the Unit under your Command.
He is Boarded in Category:-

Kindly acknowledge receipt of the Man and Documents as enumerated below, on the duplicate copy of this letter.-

Medical History Sheet.	Field Conduct Sheet.
Medical Board Paper.	Index Card.
Attestation Paper.	Casualty Form.
D.O.S.2.	

K H Chamberlain
Lieut. & Asst.Adjutant,
for Officer Commanding,
Eastern Ontario Regtl. Depot.

Receipt of Man and Documents as above, is acknowledged, please.

.....Adjutant.

11
22.....

Rank | Name COLEMAN Michael. Francis. | Reg'l No. 59185.

Unit 21st Bn | If in perm. Corps, What Unit? | Married or Single Single

Place and Date of Enlistment Kingston. Ont. 6th Nov. 1914. Place of Birth Stafford. Eng

Name and Address, Next-of-Kin Margaret Coleman. Calbourne. Ont.

Relationship Mother

N/E. R.B. No 5603
File R.L.
Category Can. OR

Assigned Pay Monthly $ | Payable to

Relationship R 132 12-16

Separation Allowance $ | Payable to

Relationship 81813/379.

Discharge, Date and Place | Reason | Character

90

23.2.17

Report: Date	Report: From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place	Date	REMARKS Taken from Official Documents
19.5.15	O.C. 21st	Arrived per R.M.S. Metagama England		15.5.15	Inform: Form
8-7-15	" "	Forfeits 2 days pay AWL West Sandling camp.		5-7-15 to 6-7-15	Part II Orders No 199
8.10.15	" "	Embarked for France	Folkestone	14.9.15	Inform. Form.
20-1-16	W.O.	G.S.W. Abdoman. No 5 Can Field Ambu: Div Rest Stat. 4/1/16			Cas: List 125. O.N.
" " "	" "	" " Trans to Div Rest Stat	Godewaersvelde	4.1.16	" " " "
24-1-16	" "	" " Buttock. Nth: Mid: Div: Cas: clear: Station		14.1.16	" " " 128
25-1-16	" "	" " No 4. Stat: Hos	St Omer	18.1.16	" " " 129
4-2-16	" "	" " Dis to Duty	"	27-1-16	" " " 138
4-10-16	"	Admn No 1 Conv Depot	Boulogne	26.9.16	B/17334 Sick
9-10-16	"	Dis to Base Details	Field	29.9.16	" 338 "

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				
11-10-16	21st Bn	Adm No 7 Can Stat Hosp	Havre	3-10-16	GLR 340 NYD.
24-10-16	"	Transf to No 4 Conv Depot	"	14-10-16	" 357 Debility Myalgia
7-11-16	"	Discharged to Reinforcements	"	27-10-16	" 363 " "
2-12-16	"	Reported from Base Rejoined Unit	Field	5-11-16	" 383 " "
31-1-17	"	Adm No 4 Gen Hosp	Camiers	21-1-17	" 428 GSW Face L. Leg for OD
16-2-17	"	Wharncliffe War Hosp	Middlewood Rd Sheffield	7-2-17	" B 274 "
17-2-17	"	Wd transf to CCAC	Shoreham-on-sea	6-2-17	Pt II O 20 W.
22-2-17	CCAC	Taken on strength.		7-2-17	" 90A
10-3-17	C.C.A.C.	S.O.S. on tr. to L. Ont. Regt		10-3-17	Pt II O. 116
12-3-17	EOR.	T.O.S from CCAC	Seaford	11-3-17	Pt II D.O.
3-4-17	21st Bn	Ptd. Kings Can Red X Hsp	Bushy Park	29-3-17	Ch. B. 313.
16-4-17	✓	Ptd. Granville Spec Hsp	Ramsgate	8-4-17	Ch. B. 322
26-9-17	EOR.	Dis Gran. Can Spec Hosp.	✓	14-7-17	Ch. B 21
9-11-17	EOR.D	On com. C.D.S. Buxton pending discharge to Canada	Seaford.	8-11-17	Pt II 242.
26-11-17	✓	Cases on com. C.D.S Buxton Pte & S.O.S. to Canada for discharge	✓	17-11-17	Pt II 259
Proceeded to Canada for disposal by A.G			N R d	17.11.17	
	Dis Depot	Fit for Duty	M.D. 3 Military Hospitals	30/11/17	N R 41b Glenbrae Ont.

Army Form B. 103. 11 Regimental Number 59185

Casualty Form—Active Service.

Regiment or Corps .....

Rank Pte. Surname Coleman Christian Name M. F.

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

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

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

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

or Corps Trade and Rate .....

..... Signature of Officer.

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				
		Embarked ...			
		Disembarked...			
19.7.17	O.C. E.O.R.D.	Furlough 10 days	Seaford	14.7.17	Rt. II Do. 129
8.11.17	O.C. E.O.R.D.	On command to C.D.D. Buxton	Seaford	8/11/17	Rt. II Do. 242
					H. Chamberlain Lt. for Capt. Adjt. for O.C. E.O.R.D.
9 NOV 1917		TAKEN ON STRENGTH C.D.D, BUXTON Pt. 11 ORDER No. 266			H. Hill Lieut.-Col. Commanding Canadian Discharge Depot
17 NOV 1917		EMBARKED FOR CANADA FROM LIVERPOOL			H. Hill Lieut.-Col. Commanding Canadian Discharge Depot

(*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.

[P.T.O.

[M1101] W6135/M768 1000m 9/16s 153 G & S Forms/B.103/4. E./354.

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				
19.12.17	Y Seas	TAKEN ON STRENGTH NO. 3 SPECIAL SERVICE CO.	Quth 3 M D	88-1-8	19.12.17
					W. Cummings Lieut. & Adjutant No. 3 Special Service Company, C.E.F.
27.2.18		Left to #3 M.P. Detachment Quth 3	In D	26-6-7101-14	23.2.18
					W. Cummings Lieut. & Adjutant No. 3 Special Service Company, C.E.F.
18-5-18	Kingston	T.O.S. No.3 Detachment, CMPC. D.O. 138 d/18-5-18.			Graham Stevens Major Asst. Provost Marshal, M.D. No. 3
32-8-19	Kingston	S.O.S. on disch arge No.3 Detachment, CMPC. D.O. #214 D/2-8-19	Asst. Provost Marshal, M. D. No. 3		Graham Stevens Major Asst. Provost Marshal, MD#3

7252

Extract of Information Coded for Hollerith

Regtl. No. 59185 Name { Surname Coleman
Christian Names Michael Frances

Abbreviations used:—A.P., Attestation Paper, Particulars of Recruit, Officer's Declaration Paper.
A.P.C., Attestation Paper and Pay-roll Card.
Cas., Casualty Form and Record Sheet.
P.D., Proceedings on Discharge.

Extracted by: EJB Coded by: EJB Checked by: AD

	SOURCE OF INFORMATION			CODE USED	LONGHAND EXTRACT	CODE NO.
A. No. of Card 1, 2, 3, 4, 5, 6					Cards to be punched	1 1
B. Professional Soldier	A.P.			1	A.M	6
C. Theatre of Service		Cas.		2	European	0
D. Personnel Seconded to W.O., R.A.F., etc.		Cas.		3	or S	0
E. Rank on Discharge			P.D.	4	O R	1
F. Date Discharged			P.D.	5	2nd Aug 1919	6 8
G. Disposition on Discharge			P.D.	6	med fit-21	
H. Place proceeding to			P.D.	7	ontario	4
J. Unit Enlisted in	A.P.C.			12 (a) 12 (b)	21 Bn	3 0 2 1
K. Country of Birth	A.P.			8	Eng	1 3
L. Occupation	A.P.			9	Telegraphist-8 0	
M. Date of Enlistment	A.P.C.			5	Nov 6/1914	1 1
N. Place of Enlistment	A.P.C.			13	Kingston	3 3 4

O. Age on Enlistment	A.P.			Years	33 33
P. Religion	A.P.			10	R C 2
Q. Rank when left Canada		Cas.		4	O R 1
R. Unit left Canada with		Cas.		12 (b)	21st Bn 021
S. Date left Canada		Cas.		5	May 1915 17
T. Unit in England		Cas.		12 (b)	21 Bn 021
U. Date first proceeded to Theatre of War		Cas.		5	14 Sept 1915 21

Source of Information—Casualty Form.

1st Unit in T. of W.	2nd Unit in T. of W.	3rd Unit in T. of W.	4th Unit in T. of W.
~~21 Bn~~ 021			

Period of Service	Period of Service	Period of Service	Period of Service
Months: 17 17	Months:	Months:	Months:

X. Check Column					~~CHECK~~
Z. Casualties		Cas.		11	W 2
YA. Honours and Awards		Cas.		~~1. Yes.~~ 2. No.	NO ~~1~~ 2
YB. Married or Single	A.P.			~~4. M.~~ 5. S. ~~6. W.~~	S ~~4~~ 5 ~~6~~
YC. Service Unit Transfer		Cas.		7. Subsequent Unit or Units. 8. First Unit.	All cards subsequent to 1st. Last or only card. 8

WATCH

725M.—6-8-20
H.Q. 54-21-40-96

12769

WAR SERVICE BADGES.

INFORMATION REQUIRED File No.

To Director of Records.

Re Application for War Service Badge Class "A" & Class

No. 59185 Rank Pte. Name Coleman, W. H.

Unit 21st. Bn. Address 351 Johnston St. Kingston Ont.

(Strike out answer which does not apply)

~~Service over 3 months-yes-no~~

Service in Canada Yes. - ~~No.~~ Awaiting Discharge

Service in England Yes. - ~~No.~~

Service in France Yes. - ~~No.~~ Weakness in left knee.

Retained for duty)

in Canada) Yes. - No.

Discharged ~~Yes~~. - No.

APPROVED.

If discharged, state reason

Age 38 Yrs. Complexion Ruddy Eyes Blue Hair Fair

Badge issued Class A No. 268359

" " " No.

Badge Refused

W.138-100m.10-17.
1772-39-1167.(M).

165631

COLEMAN,M.F. - Pte - 59185 - E.O.R.D.

States does not wish to makeba Will

Rec'd from P.M. E.O.R.D. 22-10_17.

L. L. 12767—M. & D. 7390.

M. F. W. 42—60M.—12-16.
H. Q. 1772-39-893.

NAME Johnson, Walter Harris. 2/Lt. (2nd Lieut.)

RANK AND CORPS

CABLE

No.	DATE

NATURE OF CASUALTY

FOLLOWS

REGT'L No 37183

H. Q. FILE No. 649-

FOLLOWS No.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
123	#3 Can. Fld Amb D.R. Sta	4-1-16	G.S.W. abdomen
125	D.R. Sta Godewaersvelde	4-1-16	" " " "
128	No. Midland Div Cas. Cl. Sta	14-1-16	" " " Buttock
129.	#4 Stat, St. Omer	18-1-16	" " " " "
138	" " " "	27-1-16	" " " " Sick & Duty
a334	Conv. Dep. Boulogne	26.9.16	Sick
a338	ex No 1 " " Disc to "Base Details	2.9.16	"
a340.	Can Stat Havre	3.10.16.	R & D.
a351	Ex No 7 Can Stat Havre To No 4 Conv Havre	14-10-16	Debility Myalgia
a363	Disc to Reinforcements-	24.10-16.	Myalgia
a383-2	Repat from base rejoined Unit	5-11-16	"
a428	4 Gen., Camiers	21-1-17	G.S.W. face left leg severe
B274	Wharncliffe War, Middlesex	7-2-17	" " " " " "
			Sheffield

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
13 313.	Westminster Hosp. Lond.	29-3-17	Gun Shot wound Rt. Arm
13 393	Kingston on Thames "	8-4-17	" " " " Rt. Arm
381 (2)	Richmond	14-7-17	Gun Shot wound L. Leg Rt. Arm

No. 649- 6-1769

NAME Cater, Michael Francis No. 59185.

RANK AND CORPS Pte. 21st. Batt.

CABLE NO.	CABLE DATE	NATURE OF CASUALTY
		6.
M3382	20-1-16	Adm. to Div. Rest Station Godewaersvelde Jan 4th (GSW. Abdomen.)
08225	31-1-17	Adm. to #4 Gen. Hosp. Camiers Jan. 21st 1917 GSW face, GSW. left leg severe Sailed from Liverpool per S.S. Saxonia 17-11-17 Dis. a. G. M.D. 3.

NO. 1611
FOLL.

No. 289 Rank Pte Name Coleman M. J

5-9185 May pay list

T. O. S. Unit 21st Battalion
(2nd o/s Contingent)

M. D. 3

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1914	1914			
Nov 11	Nov 30	✓		
Dec		✓		
1915 Jan	1915	✓	Fined for drunkenness 21-1-15	D.O 49
Feb		✓		
Mar		✓		
apr.		✓		
May		✓	5 days detention. Fined $6.00	D.O. 137 § 2 3-4-15.

UNIT SAILED
MAY 20 1915

14 9-12-
6- 2-17
12

H. Q. Reference

No. 59,185 Rank Sergr Unit 21st Bn. C.E.F.

Surname Coleman.

Christian names Michael. Francis.

Kindly forward Medals, to which I am entitled by reason of my service in England, Belgium, France.
(Theatre of War)

with 21st Bn. C.E.F.
(Unit with which served in Theatre of War)

No. 40

Street Pears Ave

Town Toronto

County Ont. M Holeman.
(Signature)

(WRITE IN BLOCK LETTERS AND IN INK

O. H. M. S.

POSTAGE FREE

TORONTO MAR 17 1038 P.M.

REGISTERED LETTER OF VALUE

SECRETARY, MILITIA COUNCIL,

DIRECTOR OF RECORDS.

OTTAWA, ONT.

200M-1-21.

LEDGER NO. 9 SERIAL NO.

REG. NUMBER 59185 NAME Coleman, M.F.

RANK Sgt. CORPS C. M. P.

AGE SERVICE

NAME OF HOSPITAL Queens Mil. PLACE Kingston

DATE OF ADMISSION 15.11.18

DISEASE Neuralgia

TRANSFERRED TO OTHER HOSPITALS

OPERATION

DISCHARGED TO Unit 16.11.18. IN CATEGORY

M. F. W. 2553.
50m.—6-18.
1772-39-1334.

P. T. O.

REMARKS:

Name COLEMAN. M.F. *Rank* Pte. *Reg. No.* 59185.
Michael Francis

Unit 21st. Battalion.

Next of Kin Canada.

Date	Movement	Place	Casualty	List No.	Notified N/KO.	W.O. List
					M	
4- 1-16.	No.5.C.F.A.D.R.S.	GSW.	Abdomen.	125	3382	20-1-16
4- 1-16.	T'fd D.R.S.	Godewaersvelde	do	125		
14- 1-16.	Nth Mid Div Cas Clg Stn.	GSW.	BUttock	128		
18- 1-16.	No.4.Staty Hosp.	St Omer.	do	129		
27- 1-16.	**do**	**DISCHARGED TO DUTY.**	**do**	**138**		
26- 9-16.	No.1.Con Dep.	Boulogne	Sick.	A334		
29- 9-16.	DISCHARGED.	BASE DETAILS.	do	A338		
3-10-16.	No.7.Can Sty H.	Havre.	N.Y.D.	A340		
14-10-16.	No.4.Con Dep.	Havre.	Debility-Myalgia	A351		
27-10-16.	DISCHARGED.	REINF. HAVRE.	do	A363		
5-11-16	REPORTED FROM BASE	REJOINED UNIT	DO.	A383		

P.T.O.

COLEMAN Michael Francis Pte. 59185

Date	Canada Movement	Place	Casualty	List No.	Notified N/KO.	W.O. List
				O.8225		31-1
21-1-17	4. Gen Hosp Camiers		GSW Face & Lt Leg	Sev		A428
7-2-17	Wharncliffe War Hosp	Middlewood Rd Sheffield		Do.		D274
29-3	Kings.C.R.C.C.H.	Bushy Pk.	do	B313		
8-4-17	Do Gran Can Spec Hosp	Ramsgate	Do.	B322		
14-7-17	Discharged		Do	B21		H/L

Number . . 59185 . . . . Rank . . Pte . . .

Surname . COLEMAN . . . . .

Christian Names . . Michael Francis . .

Unit . 21st Bn. Can. Inf. Theatre of War . France

Date of Service . . . . . 14/9/15 . . .

Remarks . . . . . .

Latest Address . . 357 Johnston St. . . .
. . . . . Kingston, Ont.

Roll No. B. 21st Bn
Cap 12125

G 12543 Hus
G 508.77 Qeb
SEP 12 1921

No. 59185 RANK Cpl. NAME Coleman. M.F.

~~T.O.S.~~ Transac from UNIT #3 Det. Can. Military Police
#3 Special Service Coy.
Mar Paylist

M. D. 3

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1918	1918			
Mar 1	Mar 31	L		
Apr		L		
May		L		
June.		L		

No. 59185 RANK Pte NAME Coleman. M. J.

T. O. S. UNIT Special Service Battalion
3 Ft Boy.

M. D. W

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1917	1918			
Nov. 8	Jan 31	C		
	Feb.	C	transfd to #3 Det. Mil Police 27-2-18	DOS 9/28-2-18
May. No date		M		

MARRIED SINGLE ✓ WIDOWER

TRADE OR CALLING Telegraphist RELIGION Roman Catholic

DESCRIPTION.

APPARENT AGE 33 YEARS 11 MONTHS

HEIGHT 5 FEET 6 1/2 INCHES

CHEST MEASUREMENT 33 INCHES EXPANSION 4 INCHES

COMPLEXION Ruddy EYES Blue HAIR Fair

DISTINGUISHING MARKS Scar outside l. thigh - scar front of 10th. rib.

MEDICAL EXAMINATION. PLACE Kingston, Ont. DATE 6/11/14

SURNAME. Coleman

CHRISTIAN NAMES Michael Francis,

REGL. No. 39185 RANK Pte.

UNIT 21st

FORMER CORPS 2nd N.d Staff Capt. (12 yrs.)

CARD NO. 100 Dig 2-819
Demob.-M. Unfit.
FOLL. 200 214 A 2-819 A 103

Batt

old 39288

NEXT OF KIN.

NAMES IN FULL Coleman, Margaret (Mrs)

RELATIONSHIP TO SOLDIER wife

ADDRESS General Hospital, Kingston, Ont.

CHANGE OF ADDRESS

COUNTRY OF BIRTH England Stafford, DATE Nov. 21-1880

PLACE OF ATTESTATION Kingston, Ont. DATE Nov. 6/14

Sailed from Montreal Per S.S. "Melaga- ma" 6-5-15

68
4

L. L. 90:89.—M. & D. 6312. R.C. 17-11-17

M. F. W. 22. 100m.—1-16. H. Q. 1772-39-839.

Form R. & O. 6034

REGTL NO	RANK	NAME	COY.	FOLIO
59185	Pte.	Coleman M. F.		

TAKEN ON FROM	DATE	PARTICULARS
C.C.A.C.	12-3-17	Pt. II D.O.1.

PROMOTIONS OR APPOINTMENTS	AUTHORITY	DATE	"ON COMMAND

HOSPITAL	ADMITTED	BY ORDER	DISCHARGED	BY ORDER

EMPLOYED AS	INOCULATIONS
QUALIFICATIONS Telegraphist.	VACCINATION
DRAFTED TO	REMARKS
STRUCK OFF	

LEAVE		NEXT OF KIN Mother: Margaret Coleman
FROM	TO	Colbourne, Ont.
		REMARKS

D.M.S. 1900.

Surname	Christian Name or Names		Reg. No.
Coleman.	M.	F.	59185.

Rank	Unit	Co.	Troop	Batty.
Pte	21st Bn H.Q.			

Hospital — Date of Admission

Transferred #5 C.F. Amb Div. Rest Stat. Hosp. 4-1-16.

Div. Rest Stat Goedvaersvelde Hosp. 4-1-16.

N. Mil Dri Cas Clg. Stn Hosp. 14.1.16

17th Reserve Hospl Boulogne Hosp. 18.1.16

Diagnosis G.S.W. Abdomen. Debility, Myalgia.

(1)

Later Diagnosis (if changed)

(2) G.S.W. face. L. leg. sev.

(3)

Additional Diagnoses: If more than one state present

DISPOSITION — Date

Dis to duty 27.1.16

REMARKS

Dev. B. Details G 29.9.16

Dev. to Reinforcements Havre 27.10.16

Duty 5.11.16

Dis. 14.7.17.

C.L. 20-1-16 #125

C.L. 21.1.16 #128 (1)

C.L. 28.1.16 #129

C.L. 5.2.16 #138

C.L. 4.10.16 #334

C.L. 9.10.16 A338

11.10.16 A340

" 24-10-16 A357 (2)

7.11.16 A363

2.12.16 A383

31.1.17. A428.1.

16.2.17. B274

A.M.D. 2 Dept.

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

J.O.2.

B 4 R.

EPITOME OF HOSPITAL TREATMENT.

	Hospital	Adm.
1.	#1 Conv. Depot Boulogne ✓	26.9.16
	7 Can Stat Havre.	3.10.16
2.	104 Conv. Dep. Havre. ——	14-10-16
	4 Gen Canières.	21.1.17
3.	Wharncliffe War Sheffield.	7.2.17
	Bushey Park Combe	29.3.17
4.	Gran. Can. Spec. Ramsgate.	8.4.17
5.		
6.		
7.		

C.L. 3.4.17 B313
" 16.4.17. B322.
" 27.9.17. B21. (2)

(9178)—Wt. W12165—2146.—1,250,000.—2-15.—C. & G. Forms B. 103/1.

Obf 44328

CERTIFIED COPY
Canadian Record
Westminster
7, Millbank

Army Form B. 103.

Casualty Form—Active Service.

Regiment or Corps 21st Battalion.

Regimental No. 59185. Rank Pte Name Colman. M. Y.

Enlisted (*a*) 28:10:14 (6-11-14) Terms of Service (*a*) Duration of war Service reckons from (*a*) 28:10:14 (6-11-14)

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: Date	Report: From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.		Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
		Disembarked		Havre	14.9.15	
20/9	2 Bn	Attd 4 Bde Lincsmen		4 Bde	20.9.15	a.f. B213 26.9.15
8/1	5 Fd	G.S.W. abdomen		5 Fd Amb	4/1/16	A36 8/1/16 DCR 65.66
18/1	4 Staty	Dental Caries		4 Staty	18/1	W3034 18/1/16
15/1	N.M.F.S.	G.S.W. Buttock		N.M.F.S.	14/1	A36 15.1.16 DCR 68
16/1	5 Fd Amb	— do —		D.R.S. Rue de Col	14/1	4 16/1 4 71
27/I	4 Staty.	Dental Caries	to	Duty	27/I	W 3034 27/I/I6. B213 28/1.
22/1	13 F.F.S.	— do —		4 Staty	18/1	A36 22.1.16 DCR 75
	2 Can. Staty.	P.U.O.	Adm.	2 Can. Staty.	14/9	W3034 14/9.
	5th C.F.A	Do.	Adm	5 C.F.A.	8/9	A36 13/9
	Do.	Do.	to	C.C.S No. 44	12/9	D.C.S 210 3/10.
	1 Con Dep.	Sick	Adm	1 Con Dep.	26/9.	W3034 26/9.
	2 Can Staty.	P.U.O.	to	Do.	26/9	W3034 26/9.
	C.B.D.	Taken on from Boulogne. "B"		C.B.D.	2/10	N.R 2/10.
	Do.	Struck off strength "A"	to	7 Staty Hop.	4/10.	N.R. 4/10.

(*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.

59185 Coleman, M F.

Report: Date	Report: From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.		Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
	44 C.C.S.	P. U. O.	Adm	44 C.C.S.	12/9	A 36 16/9
	Do.	Do.	to	18 A. J.	13/9	D.C.S. 216 13/10.
	7 Can. Stat'y.	N. Y. D.	Adm	7 Can. Stat'y.	3/10	W3034 3/10.
	C. B. D.	Taken on from 4 Con Dep. "A"		C. B. D.	28/10	N.R 28/10.
	C B.D.	Left to join unit.		C. B. D.	2/11/16	N.R. 2/11/16.
	7 Can Stat'y	Debility	to	Con Dep.	14/10	W3034 14/10.
	4 Con Dep.	Do.	Adm	4 Con Dep.	14/10	— Do —
	~~4 Gen Hosp~~	~~Trans to Convalescent~~	~~adm~~	~~4 General~~	~~24/10~~	~~W 3034 26/10.~~
	4. Con Dep.	"T.B."	to	C.B.D.	27/10.	W 3034. 27/10.
21st BATTALION		Rejoined Unit		Field	5/11	B213 10/11. D.C.S. 235. 27/11/16.
	Do	Granted 10 days Leave		Do	15/12	Pt II O. 94 26/12 B-213 15/12.
21st BATTALION		Wounded	to	Fld Amb.	17-1-17	B-213 19/1. D.C.S. 259. 24/1/17.
21-1-17.	4 Gen Hosp.	G.S.W. foc. L. leg.		4. Gen Hosp.	21-1-17.	W. 3034.
20-1-17.	5 C F A	Do	Do to	22 C.C.S.	18/1/17.	A 36. D.C.S. 264. 3/2/17.
	22 C.C.S.	Do	Adm	22 C.C.S.	17/1/17.	A 36 24/1.
	Do	Do	Trans to	No 12 A. J.	20/1.	D.C.S. 266. 14/2/17.
	4 General	Invalided to England on H.S. "Stad Antwerpen"			6/2/17	W. 3083 No. 7084. Pt. II O. 20 d/17-2-17.

J Whogan Capt. for Lt.-Col., A. A. G.
Canadian Section, G. H. Q. 3rd Echelon, B. E. F.

22-2-17	CCAC	Taken on strength		Shoreham	7-2-17	Pt II 00 90
10-3-17	"	SOS to EOR.		Hastings	10-3-17	" 116
12-3-17	EOR. Dep	Taken on strength		Seaford	11-3-17	" 1

R. W. W. Reid Capt
LIEU
FOR LT: COL: I/C RECORDS, C.O.M.

G.W.S.

C.A.D.C.5009-[redacted]M.
3494-3[redacted]8-17.

59185
Coleman M7.
EORD

DENTAL CERTIFICATE.

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

Date of Examination.	Present Dental Condition.	In case of loss or decay of teeth. Is the loss due to wounds, injury or disease directly attributed to Active Service?	Has he ever declined Dental Treatment.	Recommendation.
9-11-17	Sat			Wardens Capt. A.D.C.

DEPARTEMENT

Proceedings of a Board of Officers assembled at Seaford on.....by order of Colonel S.W. Gardner, M.C. . C.C., Canadian Troops, Seaford, for the purpose of examining the N.C.O. or man named below with a view to ascertaining his suitability for retention in England, or return to Canada.

(List of Names)

Regimental No.	Rank.	Name.	Unit.

The Board having heard and considered the evidence in the case of the man mentioned above, with special reference to:-

(a) The man's usefulness from a Military point of view.

(b) The cost of his maintenance, including pay.

(c) His occupation in civil life, and his physical fitness for this occupation.

is of the opinion that this man should be returned to Canada, for disposal by the Adjutant-General, Ottawa.

(Sgd)_____President.

_____Member.

_____Member.

H/I.W.

Burton

Serial No.

No. 59185 Rank. Pte. Name. Coleman, M.F.

Unit. 21st Bn. Category. Bii. appeared

before a Combatant Board of Officers composed of:-

President - Lt-Col.F.W.Wedderburn. N.B.R.D.

Members - (Capt. F.L. Shouldice, E.O.R.D.
(Capt. C. Fraser. B.C.R.D.

held at Seaford, Sussex the 1st day of November, 1917.

Authority:- A.G. 5-1-22, 29-4-17.

The Board having heard the evidence in the case of this man with special reference to :-

(a) The man's usefulness from a Military point of view.

(b) The cost of his maintenance, including pay.

(c) His occupation in Civil life, and his physical fitness for this occupation;

is of the opinion that this man should be returned to Canada for disposal of the Adjutant-General, Ottawa.

.....Lt-Col. O.
Eastern Ontario Regimental Depot,
Seaford, Sussex.

IW.

CASE HISTORY SHEET.

Queen's Military Hospital. Kingston, Station.

No. 59185 Rank Sgt. Name Coleman, M.F. Age 40

Unit C.M.P.C. Completed years of service Where and how long

Date of admission 15-11-18. Date of discharge Nov. 16/18.

Diagnosis Neuralgia Place of origin Canada.

CONDITION ON ADMISSION AND PROGRESS OF CASE Man was admitted to Q.U.M.H. suffering from neuralgia and some swelling of left mandible the result dental caries. Tooth is very tender and requires attentation . Man is apparently in good health otherwise.

FAMILY HISTORY Negative.

(Tuberculosis, mental or nervous diseases.)

TREATMENT Dental treatment & tooth extracted.

(Especially any specific or special form.)

CONDITION ON DISCHARGE, Fit to return to Unit. Same category as

(and disposal made of case.) before C3.

Date Nov. 16/18. L.N. Armstrong, Capt. AMC.
Medical Officer i/c case.

M. F. B. 313a.
200M.-5-18.
1772-39-439.

Duty C-111

Proceedings of Medical Board at Discharge Depot,
QUEBEC, Que.

No. 59185 Rank Pte. Name and Corps of disabled Soldier:— COLEMAN, Michael F. - 21st.Battn.

Previous civilian occupation:— Telegraohist.

Cause of Disability:— 1. GSW.L.Leg. & 2. Left knee. (Limited movement)

Condition, in detail, which prevents the soldier earning a full livelihood:—

18 months in France. GSW. L. Leg. Middle third through the quadreceps muscle. Bullet wound through left patella. States that X-Ray shows small fragments still in joint. Present Condition:- Knee very painful on inner side., on pressure. Extension normal flexion 135 degrees. Complains of pain when he walks. Other Systems normal.

GAB.

OPINION OF THE BOARD.

Degree of incapacity. (Please state in fractions) 20%

Probable duration of incapacity:— Permanent.

Does it render him permanently unfit for Military Service? No.

Would operation, Special treatment, or use of appliances, etc., lessen incapacity? No.

Signature:— ..... President.

Station:— Quebec,

Date Dec.13th.1917. ..... } Members

APPROVED.

Date DEC 13:1917 ..... Asst. Director Medical Services.

Date .... Director General Medical Service.

Form R. & O. 6045
1298-130M-29/11/15

PROCEEDINGS OF A MEDICAL BOARD.

CANADA
FEB 6 1918
B. F. & C.
FEB 6 1918
DEPT. MILITIA & DEFENCE
FEB 12 1918
649-C-19761
A.G.

Dated at ..... July 6th 1917 ..... 1916.

No. 69185 Rank ..... Pte ..... Name ..... Coleman, M. .....

Local Unit ..... 21st Reserve ..... Overseas Unit ..... 21st Battn ..... Age ..... 39 .....

Examination held at ..... G.C.S.H., Ramsgate. .....

DISABILITY.
Overseas—Local.
(scratch one out) ~~Local~~ Overseas

WEAKNESS LEFT LEG AND KNEE.

PRESENT CONDITION.

Wound in quadriceps. Some thickening of the left knee.

BOARD RECOMMENDS:—

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

Signatures:—

F.G.

Members

(Sgd) Clarence L. Starr, Lt-Col. C.A.M.C. President.

(Sgd) W.G. Turner Major C.A.M.C.

.....

APPROVED

-8 JUL 1917

Dated at ..... 1916.

..... CAPT.
FOR A.D.M.S. CANADIANS, SHORNCLIFFE

For A.D.M.S.

Disch 1-2-18

3824
3/5/18
4/4/18

C 4715
4/24/18

PROCEEDINGS OF A MEDICAL BOARD

LIST OF DISCHARGE DOCUMENTS.

1. Proceedings on discharge. (Army Form B. 268.)
2. Proceedings on transfer to reserve (if any). (Army Form B. 2056.)
3. Duplicate attestation.
4. Army Form B. 97 (if any).
5. Declaration of change of name (if any).
6. Re-engagement paper (if any). Army Form B. 136).
7. Authority for continuance, or extension, of service (if any). Army Form B. 221.)
8. Court of Inquiry on an injury (if any) (Army Form A 2.)
9. Regimental conduct sheet. (Army Form B. 120).
10. Company conduct sheet. (Army Form B. 121.)
11. Copies of convictions by Civil Power (if any).
12. Medical history sheet. (Army Form B. 178).
13. Medical report on invalid (if any). (Army Form B. 179).
14. Copy of receipt for purchase money (if any).
15. Attestation of fraudulently enlisted man for corps in which he has not been held to serve (if any).
16. Detailed statement of former service allowed to reckon towards pension (if any).
17. Copy of 3rd page attestation (in the case of men from abroad entitled to deferred pay who go to Netley or the discharge depot for discharge).
18. Descriptive return (Army Form D. 400), where required. See section 11 on second page.
19 Active service casualty form. (Army Form B. 103).
20. Employment sheet. (Army Form B. 2066).

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

1. Duplicate attestation. (On third page the date and cause of discharge will be entered and signed by the competent military authority).
2. Medical history sheet (if any). (Army Form B. 178).

Instructions as to the preparation, dispatch, and custody, of discharge documents.

1. When a soldier is to be discharged, the documents retained with the duplicate attestation will be placed inside this form. Should any of the documents be missing, an explanation of the deficiency, signed by the commanding officer, must be substituted for the missing document. The officer in charge of records will then extract from the original attestation, any documents required to complete the list of discharge documents enumerated in the margin, which will then be placed in this form in the sequence given.

2. When men are discharged from the colours at home as medically unfit, or with claims to pension, Army Form B. 268 will be sent confirmed, together with the duplicate attestation and documents retained therein to the officer in charge of records 10 days in advance of the date for discharge in the case of invalids, and 14 days in other cases. This officer will then extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin, place them in this form, and after carefully checking the duplicate attestation with the original forward the whole to the Secretary, Royal Hospital, Chelsea. When such men are discharged abroad, the same procedure will be adopted as above, with the exception that the discharge documents will be sent to the officer in charge of records immediately after discharge takes place (except in the case of men who are granted gratuities on discharge from local battalions or companies, Royal Artillery.

3. When soldiers are sent home from abroad for discharge, the documents retained with the duplicate attestation will be placed inside this form and sent home with the men for transmission to the officer who carries out the discharge, together with the following additional forms :—

(a) Discharge certificate (Army Form B. 2079 or Army Form B. 264).
(b) Character Certificate (Army Form B. 2067) if entitled.
(c) Copy company conduct sheet (Army Form B. 121) when required under King's Regulations.

The duplicate attestation and documents retained therein will be sent to the officer in charge of records, who will extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin and place them in this form.

4. The discharge documents of re-enlisted pensioners, on re-discharge, will be sent to the officer in charge of records, who will extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin, place them inside this form, and forward the whole to the Secretary, Royal Hospital, Chelsea, irrespective of the cause of discharge.

5. The original and duplicate attestations of recruits who are rejected before, or on, final approval will be retained by the approving officer for one year, when they will be destroyed.

6. In all other cases the discharge documents will be sent, directly the discharge is carried out, to the officer in charge of records of the unit concerned.

7. Postage need not be paid, and receipts are not required, in the case of documents sent to Chelsea or to the War Office.

8. When the discharge documents of men not entitled to pension are sent to the officer who will have final charge of them, they are to be accompanied by Army Form B. 279, and that officer will, if they are found to be correct, sign and return Army Form B. 279. Should any document be missing, he must at once apply for it.

9. The officers having final charge of the discharge documents will arrange them according to regimental numbers, and enter the names in the alphabetical index, Army Book No. 129.

This space to be left blank for the Chelsea Number.

GAMMA 25
NOV 30 1917

Army Form B. 268.

Proceedings on Discharge.

Duty 90
6-10-31

(When forwarded for confirmation the documents named on page 4 should be enclosed.)

No. 59185 Army Rank Pte

Name Coleman M J.
(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)

Corps C. of R.D.

Battalion, Battery, Company, Depôt, &c. 21st
(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)

Date of discharge

Place of discharge

1. *Description at the time of discharge.*

Age 39 years 1 months
Height 5 feet 8 inches
Chest measurement { girth when fully expanded ins. / range of expansion ins.
Complexion
Eyes
Hair
Trade Telegraphist
Intended place of residence (To be given as fully as practicable) Kingston Ont

Descriptive marks.

G.S.W. L Leg

(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)

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

(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)

To be filled in on the soldier quitting the Colours.

3. Military character :—

4. Character awarded in accordance with King's Regulations :—

Certified that the above is an accurate copy of the character given by me on Army Form B. 2067* and that Army Form D. 489 was awarded in this case.

Initials of Commanding Officer.

Army Form B. 2088 has been issued to*

* Strike out if not applicable.

D. D. & L., London, E.C.
A4502 W. W17176 M291 500,000 2/16 Sch. 3 Forms B. 268 40

[OVER.

5. He is in possession of the following number of G.C. badges (if the man is a N.C.O. and enlisted prior to 1st July, 1881, the number he would have been entitled to had he not been promoted should be stated).

Is it probable that he will be entitled to another good conduct badge before the confirmation of these proceedings?

Classification for service, or proficiency pay... ... ... Class_____

6. **Campaigns, Medals and Decorations**

Drawn 18/12 2 Bars

Certificate of education ....._____

7. His accounts are correctly balanced, and I have impartially inquired into all matters brought before me in accordance with Regulations.

(Place)_____ _____

(Date)_____ *Commanding*_____*Battn.*_____*Regiment.*

8. *Certificate to be signed by the soldier on discharge.*

I hereby acknowledge that I have received all my pay and allowances (including clothing allowance), and all just demands up to the present date, subject to the reservations of the claims noted on the 3rd page.

(*Place*)_____ _____(*Signature of Soldier.*)

(*Date*)_____ _____(*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 at his own request.*

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

_____(*Signature of Soldier.*)

10. *Statement of service.*

Service towards engagement to _____(the date to which the record of service is completed)_____years_____days.

Further service „ „ _____(the date of confirmation of discharge) ... ..._____ „ _____ „

Total ..._____ „ _____ „

11. *Confirmation of discharge.*

The discharge of the above-named man is hereby confirmed for (date)

(Place)_____

*Signature*_____

(Date)_____

Commanding officers (or the Paymaster if at Netley) will issue to every discharged soldier whose claim to pension, either on account of service or disability, is to be brought under the consideration of the Chelsea Board, a memorandum for his guidance on Army Form D. 401, and will at the same time transmit to the Secretary, Royal Hospital Chelsea, a descriptive return of the man on Army Form D. 400.

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.)

List of Discharge Documents.

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

*Only if discharged "Medically unfit."

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

(a) Proceedings on Discharge.

(b) Attestation.

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

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

This space to be for numbers

Proceedings on Discharge.

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

No. 59185

Rank Sgt.

Surname Coleman,

Christian Name Michael Francis

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

Corps (Squadron, Battery or Company) No.3 Detachment, C.M.P.C.

Date of Discharge 2-8-19

Place of Discharge Kingston, Ont.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age	38 years 8 months.
Height	5 feet 7½ inches.
Complexion	Fair
Eyes	Blue
Hair	Brown
Trade	Assembler
Intended place of residence (To be given as fully as practicable.)	351 Johnston St Kingston, Ont.

Descriptive Marks

Scar left thigh

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

#On Demobilization"
Medically unfit for g eneral dervice
R.O. 1894 d/15-419.

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

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

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

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

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

Kalong 8.11.19 RR

M. F. B. 218.

100M.—1-17.
H. Q. 1772-39-113.

Medical Documents Forwarded to ~~S. C. R.~~ or B. P. C. on Date AUG 13 1919

(OVER)

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

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

6. Medals and Decorations..... { } To be copied by the Commanding Officer on to the parchment Discharge Certificate.

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

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

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

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

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

(Place).....Kingston Ont..... *(Signature of Soldier.)*

(Date).....August 2nd 1919..... *(Signature of Witness.)*

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

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

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

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

10. **Statement of Service.**

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

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

11. **Confirmation of Discharge.**

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

(Place).....Kingston, Ont.....

(Date).....August 2nd 1919 *(Signature)*..... Major

O.C. No.3 Detachment, C.M.P.C. MD#3

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.)

(OVER)

MARRIED OR SINGLE S.

PLACE OF BIRTH Stapford. Eng.

NAME AND ADDRESS OF NEXT OF KIN Margaret Coleman
Colbourne. Ont.
Mother.

RELATIONSHIP OF NEXT OF KIN

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

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

REG'L. No. 59185 RANK Private NAME Coleman. Michael Francis

IF IN PERMT. CORPS WHAT UNIT UNIT 21st Bn

PERMANENT FORCE ALLOWANCES

PLACE OF ATTESTATION Kingston Ont

DATE OF ATTESTATION November 6th 1914.

TRANSFERRED TO FCAC DATE 11.5.17 AUTHORITY B374 6/2/17

TRANSFERRED TO Ramsgate N. Patricia DATE 23/5/17 AUTHORITY A.R. Roles

TRANSFERRED TO DATE AUTHORITY

TRANSFERRED TO DATE AUTHORITY

CANADIAN OVERSEAS EXPEDITIONARY FORCE RECORD OFFICE, N.E. BRANCH JAN 19 1918

change off 1.10.17.

ASSIGNED PAY MONTHLY $ 20.00 DATE EFFECTIVE 1st June 1917. A.2 M. Rec'd 21/6/17.

PAYABLE TO Miss Mary Margaret Coleman, 46 North St, Dunn. RELATIONSHIP Mother (deceased) Sister.
Stapford, England.

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) Stopped EFFECTIVE 1.12.11.17 REASON Disch to Can.

DISCHARGE DATE AND PLACE 7.11.17. REASON AND AUTHORITY Adm. 1-1198 1917. Disposal, Q.M.G.

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE) Entered on N.E. Card Index JFR 8

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE) Checked by J.C.Scott

WB

DATE	PAY No. OF DAYS	PAY RATE	PAY AMOUNT $	PAY AMOUNT c.	FIELD ALLOWANCE No. OF DAYS	FIELD ALLOWANCE RATE	FIELD ALLOWANCE AMOUNT $	FIELD ALLOWANCE AMOUNT c.	WORKING OR SPECIAL PAY No. OF DAYS	WORKING OR SPECIAL PAY RATE	WORKING OR SPECIAL PAY AMOUNT $	WORKING OR SPECIAL PAY AMOUNT c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE CREDIT	BALANCE DEBIT	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
1916			30	5			30	50						11 58	34 08											142 33		2 30	44 63	202 45			45		
Apr. 1-30	30	1.00	30	.	30	.10	3	.							33	1066	14/4	1101	26/4					2621	261✓				17✓	540	230 05			60		2. m.d. March
May 1-31	31	.	31	.	31	.	3	10							34 10			1150	7/5						255✓					510	255 05			75		
June 1-30	30	.	30	.	30	.	3	.							33			1732	28/5						255✓						292 05			90		
July 1-31	31	.	31	.	31	.	3	10							34 10	1317	30/6	1376	11/7			FR 53	3/7/16	511✓	261✓		9733✓			1005 05	221 10			105		
Aug. 1-31	31	.	31	.	31	.	3	10							34 10			1506	4/8						261✓											
																		1449	1/8						2621					523	249 94			120		
Sept. 1-30	30	.	30	.	30	.	3								33	1548	30-8			6978	3-10	C.D.R.		2621		694✓				262	280 35			135		
Oct.	31	.	31	.	31	.	3	10							34 10					7113 / 7470	15-10	C.B.D.				6981 / 4361 / 888✓				1222	302 23			150		
Nov.	30	.	30	.	30	.	3								33			1774	12-11	8220	31-10	"		~~25~~	261✓	698✓				959	325 64			165	160 64	
Dec	31		31		31		3	10							34 10	1804	27.11					CPm 16.11		872✓			418 67✓			5739	302 35					
			58				58	.																												
1917 Jan.	21	1.10	34	10											34 10	114	13-12					FC 3781	14-12	262✓		9733✓					9995	236 50					
Feb	28	.	30	80											30 80																	267 30					
			702	90										11 58	714 48									2169	1816	116 52	2883 3		247	44718	267 30					

Small Ledger Sheet.

L No 50 17.11.17 C² Bal $ 270.95

59185 Pte. Coleman M F.

DATE	PAY: No. of Days	PAY: Rate	PAY: Amount $	PAY: Amount c.	FIELD ALLOWANCE: No. of Days	FIELD ALLOWANCE: Rate	FIELD ALLOWANCE: Amount $	FIELD ALLOWANCE: Amount c.	WORKING OR SPECIAL PAY: No. of Days	WORKING OR SPECIAL PAY: Rate	WORKING OR SPECIAL PAY: Amount $	WORKING OR SPECIAL PAY: Amount c.	Assigned Pay Credits	Other Credits	Total Credits	ACQUITTANCE ROLLS 1: No.	1: Date	2: No.	2: Date	3: No.	3: Date	4: No.	4: Date	CASH PAYMENTS 1	2	3	4	Assigned Pay	Other Charges	Total Debits	BALANCE: Credit	BALANCE: Debit	Pay Withheld or Deferred	Pay Available for Issue	REMARKS
1917.																																		
			70	290										11 58	71 448								2169	1816	116 53	288 33		247	447 18	267 30				Transfd to Clac E 4/3/17.
Mar	10	100/10	11												11							C.P.M. 1/3/17				58 40 ✓			58 40	219 90				
	11/31		21	2 10											23 10															243 00				
Apl	30		33												33 -															276.				
May	30		33												33 .							P50 Ltr7 Rowe 24/4 CP 2/5					14 60 ✓		14 60	294 40				Hfx Rams Hosp Patients 31/5/17
"	1		1	10											1 10	115	17/4									4 87 ✓			4 87	290 63				
June	30		33												33 .	366	16/5					C.C.H.Co 4/6 CPM 6.				486 ✓		1460. ✓	20		39 46	284 17				A 60700
July	31.		34	10											34 10													20		20 -	298 27				A 114646.
Aug	31		34	10											34 10.													20		20	312 37		255.		A 170635.
Sep	30.		33.												33.	786	14-7									24 33. ✓								
																579	25-6									4 87 ✓			20		49 20	296 17		255. 17 Months	A 21228.
			938	30.										11 58	949 88.								60 62	18 16	116 53	375 93	80.	247	653 71				

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED PAY	STOPPAGES
1917											
Sept 30.	Balance	~~296 17~~							296 17 ✓	255.	
Oct 31	P P	31 10		B8675				20	310 27		
1-7		31 10						20			
Nov.	P.P.	7 70							317 97		
	30/9/17 Int on Def. pay	1 38 1							331 78		
		~~5 56 7~~						20			
Nov 17				AR 164. 10.9.17 C.ORD.	9 73						
/				" 192. 30.9.17. E.ORD.	7 30						
✓				" 162. 31.8.17. ✓ ✓	9 73.						
✓				" 129. 15.8.17. ✓ ✓	14 60						
				✓ 218 15/10/17 ✓	7 30						
				" 240 31.10.17 ✓	7 30						
				✓ 104 31.7.17 "	4 87				270 95		
		21 51			60 83						

Balance transferred to Canadian Liability a/c.

Balance transferred to N. E. Branch. Nil

A3M. FORM REN'D Stb EFFEC 9/11/17
DISCHARGED TO Can. DATE 7/11/17.
PAYBOOK VERIFIED 7/11/17
Cr. BAL 270.95 L.P.C. REN'D 7/11/17
AUTHY AG 1-1198 1917

Disposal A5 Checked E Brumley Lt C.

AUDITOR W.M. | PAYMASTER

M. OR S. Married.

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

REGT. No. 59185 RANK Sergt. NAME (IN FULL) Coleman, Michael Francis

NEXT OF KIN — RELATIONSHIP
ADDRESS Mrs Hannah Coleman Wife
351 Johnston St Kingston Ont.

IS SEPARATION ALLOWANCE PAID? Yes. ✓
TO WHOM PAID As above.
ADDRESS

DATE EFFECTIVE
RELATIONSHIP

PARTICULARS	EFFECTIVE DATE	AUTHORITY
50 ✓		F. I. & A.
E.D. pay 1st pd. Subs .80 ✓		
Sgt. M. F. Coleman		
~~351 Johnston St.~~		~~Kingston~~
617 King St W Toronto		Ont.
2/9/19		

ORIGINAL UNIT C.E.F. — IF IN P.F. WHAT UNIT? — (BLOCK LETTERS, SURNAME FIRST)

PLACE OF ATTESTATION Kingston Ont. — TRANSFERRED TO — DATE — AUTHORITY
DATE OF ATTESTATION 6-11-14 — TRANSFERRED TO — DATE — AUTHORITY
ASSIGNED PAY, $ 20.00 ✓ — DATE EFFECTIVE

PAYABLE TO — RELATIONSHIP — ANY CHANGE IN ASSIGNEE OR ADDRESS
ADDRESS Mrs Hannah Coleman Wife
351 Johnston St., Kingston, Ont.

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

DISCHARGED Yes — PLACE Kingston — DATE 2-9-19 ✓ — REASON Demob. — AUTHORITY — IF ENTITLED TO POST DISCHARGE PAY

S.A.A.P. SUBS.

MONTH	PAY AND F.A. NO. OF DAYS	RATE ✓	AMOUNT $	C.	OTHER CREDITS $	C.	S.A. $	C.	TOTAL CREDITS $	C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	DATE	COL. NO. 2 NO.	DATE	COL. NO. 3 NO.	DATE	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.	S.A. $	C.	TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.	PARTICULARS OR REMARKS
Balance from previous account																																				1797 ✓
March	31	1.50	46 50 ✓		24 80 ✓ 31 00 ✓		30 00 ✓		132 30 ✓		CK331 ✓		91956 ✓				40 ✓		42 30 ✓				20 00 ✓						30 00 ✓		132 30 ✓						Sgt. & A.P. Ck. 1784
April	30	1.50	45 00 ✓		24 00 ✓ 30 00 ✓		30 00 ✓		129 00 ✓		Ck 2165		Ck 3669 ✓				40 00 ✓		39 00 ✓				50 00 ✓								129 00 ✓						Ck 2927 ✓
May	31	1.50	46 50 ✓		24 80 ✓ 31 00 ✓		30 ✓		132 30 ✓		Ck 3832 ✓		S 2649773 ✓				40 ✓		42 30 ✓				50 ✓								132 30 ✓						H.S. 2646336 ✓
June	30		45 ✓		24 ✓ 30 ✓		30 ✓		129 ✓		3267328 ✓		S 2649821 ✓				40 ✓		35 40 ✓				50 ✓				3 60 ✓				129 ✓						20 17th 2 days leave ✓
July	31		46 50 ✓		24 80 ✓ 31 00 ✓		30 ✓		132 30 ✓		S 430148 ✓		S 431759 ✓				40 ✓		42 30 ✓				50 ✓								132 30 ✓						S. 247492 ✓ S 430439
Aug	2		3 00 ✓		35 00 ✓ 77 50 ✓ 3 60 ✓		32 00 ✓		151 10 ✓		S 431371 ✓						119 10 ✓						32 00 ✓								151 10 ✓						S 431372 ✓
183 days		$2.50 ✓			W.S.G. ✓ 457 50		F.A. ✓ 180 00		637 50 ✓								War Service Gratuity																				
																	77 50		30 00 ✓												107 50 ✓		380 ✓		150 ✓	1st W.S.G. + S.A. paid as above
																	75 00 ✓		30 00 ✓												212 50 ✓		305 ✓		120 ✓	1300750-51 Aug 28/19
																	75 ✓		30 ✓												317 50 ✓		230 ✓		90 ✓	1316662 ✓ + 63 Oct 1
																	75 ✓		30 ✓												422 50 ✓		155 ✓		60 ✓	1328491 + 92 Oct 21/19
																	77 50 ✓		30 ✓												530 ✓		77 50 ✓		30 ✓	1337671 - 2 NOV 29 1919
									637 50								77 50 ✓		30 ✓												637 50 ✓						1852063 - 4 JAN 2 1920

60m.-11-18 L. L. 51777. M. & D. 9585.

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

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 criticised.

Yess

19. Is the invalid fit for

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

20. It is certified that the invalid

(*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.)

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

On Demobilization. Medically unfit for General Service.

Disabilities No.1 & No.2 Due to Service.

Before signing the President of the Medical Board will read the statement signed by the invalid and differing opinions regarding Sections 7, 8, 9 and 10, as recorded in Section 18, to the invalid and if no change is indicated, will initial the statement. If, as a result of differing opinions regarding Sections 7, 8, 9 and 10 only, recorded in Section 18, the invalid is dissatisfied with the statement previously made, remarks of the Medical Board will be added here.

F. M. Filson Lt.Col. C.A.M.S. *President.*

W.H. Lavell, Capt. C.A.M.C. } Members

PLACE Kingston, Ont.

DATE 29 - 7 - 19.

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 invalid to accept treatment appear to be unreasonable, or should he decline to sign this statement the Board of medical officers should so state.

President.

PLACE.....

DATE..... } Members

APPROVED BY

Captain
Assistant Director of Medical Services.
For A.D.M.S. M.D. District No. 3

DATE JUL 31 1919

APPROVED BY

Director-General of Medical Services.

DATE.....

C/HW

THIS FORM WILL BE USED FOR ALL RANKS

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 invalid to the "Statement," page 3. The President of the Board of Medical Officers is responsible for the proper completion of sections reserved for recording the "Opinion of the Medical Board."
3. In answering the questions, Medical Officers will carefully obtain and record the invalid'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 invalid concerned, from witnesses, or from documents, Regimental or otherwise.
4. Special care is required in answering question 9. Read the questions carefully. All questions must be answered.
5. If space provided under any section is insufficient add another sheet. Such 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 7, 8, 9 and 10 be communicated to the invalid, 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 Kingston, Ont. DATE July 29th.1919.

1. 1 (*a*) Unit #3 Det., C.M.P.C. (*b*) Regimental No. 59185 (*c*) Rank Sgt.

(*d*) Surname Coleman (*e*) Christian name Michael Francis.

(*f*) Home address 351 Johnston St., Kingston, Ont.

(*g*) Next of Kin Mrs. Hannah Coleman. (*h*) Relationship Wife.

(*i*) Address of Next of Kin 351 Johnston St., Kingston

2. Age last birthday 38 years Date of birth 21st Nov., 1880

3. Enlistment, or Appointment (if an Officer) (*a*) Place Cobourg (*b*) Date Nov.14/14.

4. Personal description:

(*a*) Height 5' 6½" (*b*) Weight 126 Lbs. (stripped) (*c*) Complexion Fair.

(*d*) Colour of hair brown (*e*) Colour of eyes blue (*f*) Identification marks, Scars, etc. 3" scar Ant. surface, left thigh middle, small scar centre of left Ratella. Semi-circular scar about lower costal margin left side

5. Former trade or occupation Assembler.

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).	Years	Days
	4	259

	Periods	
	From	To
Canada	14 - 11 - 14.	May 5th/15.
	May 5th/15.	Spet. 14/15.
England	Feb. 7th/17.	Nov. 30th/17.
	Spet. 14/15.	Feb. 7th/17.
France or other theatres of War	Nov. 30th/17.	July 29th/19.
Canada		

7. Original disease, or injury

(1) S.W. left thigh

(2) G.S.W. left knee.

(*a*) Date of origin (1) Jan. 17/17. (2) Jan. 17/17. (*b*) Place of origin France.

(*c*) Cause

1 - 2 Wounds while on Active Service.

M. F. B. 227.
300M.—8-18.
1772-39-117.

8. Present disability— (Here state the exact nature of the disability resulting from the disabling conditions: e.g. (*a*) Weakness—slight, moderate, marked, etc; (*b*) Loss, complete or partial, of an organ or member, or of its functions; (*c*) Necessity for rest of the body, or of some of its parts, for therapeutic reasons; (*d*) Any other restrictions in choice of occupation.)

(1) Pain and limitation of function left knee.

(2) Pain in left thigh.

9. Present condition—(*a*) (Before completing this section the invalid should be stripped, and subjected to a thorough physical examination. Important, to be a full description of the present disabling condition, or conditions only. "History" must be recorded in Section 10. Describe all abnormalities, anatomical and functional, contributing to present disability; objective findings to be stated first, then subjective findings.)

(1) Objective - There is a small scar over the upper surface of the left Patella. There is limitation of flexion at the left knee. Knee can only be flexed to a right L. X. Ray Report - (1) Oblique fracture of the Patella. The union andposition of fragments are good. (2) There are many tiny F.B.'s embedded in the ant. surface of the Patella (3) Fracture of the upper part of the Tuberosity of the Tibia with non-union of the fragments. (SGD.) J. . aigley, Major, C.A.M.C.

(1) Subjective - N.C.O. complains of pain around the left knee joint aggravated by long standing or walking. Also by wet cold weather. In walking the N.C.O. tends to evert the left foot, to favor the knee. So that theoutside of foot is callousedd. He complains that he has difficulty in swinging the left leg from the knee while walking.

(2) There is a 5" xxxx long scar on the anterior surface of the left mid-thigh with a smaller wound of exit inner surface of thigh. The enterior scar is somewhat adherent to underlying tissues and tender on pressure. There is some muscular atrophy of the left thigh. Rt. mid-thigh measures 15½". Left mid-thigh measures 15". XRay shows no bony lesion.

(2). Subjective - N.C.O. complains of an occasional pain in the muscles of left thigh particularly around the left hip joint when sitting with the

(*b*) Has the invalid now any affection of the following systems, not described in Section 9 (*a*) above?
(Answer Yes or No.—if the answer to any part is Yes, give a brief description of the present condition.)

Nervous System.....Cardio-Vascular System.....Genito-Urinary System.....
(If pulse rate is abnormal, B. P. will be taken.) (Albumen and Sugar will be excluded.

Special Senses.....Respiratory System.....Integumentary System.....

Disturbances of Mentality.....Digestive System.....Muscular System.....

Osseous and Joint Systems.....Any other general condition.....

leg flexed at the knee, for any length of time. He gets a numb feeling in the left thigh under surface; from the hip to the knee.

X N.C.O. complains of a morning coughwith profuse expectoration. No Objective findings.

10. (*a*) History (of the condition referred to in Section 9 (*a*).)

(1) While in the line with 21st Battn., January 1917. N.C.O. was wounded in left thigh, and left knee. He was sent to base and from there to England, Feb. 7th, 1917 to Wharncliffe War Hospital, Sheffield, till 28-3-17. Then to King's Canadian Red Cross Hospital, Bushy Park, from 28-3-17 till 7-4-17, then to Granville, C.S.H., Ramsgate 7-4-17 till 14-7-17, then to B.C.R.D. 25-7-17 till Nov. 30th,1917 when he was returned to Canada, and was taken on for duty in office of D.P.W., Kingston, Ontario.

10.—(*b*) (Here give a complete history, as obtained from invalid, with dates of origin, of any affection from which the invalid, has suffered either prior to or since enlistment, and not included in Section 10 (*a*).)

Nil.

(*c*) (Here give a description of wounds, scar. and deformities.

As in 4F

11.—(*a*) Did the disabling condition have its origin before enlistment? 1 - 2 No.

(*b*) If so, has it been aggravated by Service? (If aggravated, give a description, as far as it is possible to do so, of the disabling condition at time of enlistment.)

1 - 2 N/A

12. Was the disability caused, or aggravated; (*a*) by intemperance, or improper conduct; or (*b*) by unreasonable refusal to accept treatment? (A) 1 - 2 No. (B) 1 - 2 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? 1 - 2 Permanent.

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

1 - 2 Hospital treatment in France and England consisting of dressings followed by Radiant Heat and Massage.

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)

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

17. Recommendations On Demobilization. Medically Unfit for General Service. Disabilities due to Service.

Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

(Sections 7, 8, 9 and 10 are to be read to the invalid and either "satisfied" or "not satisfied" struck out).

I, the undersigned (SGD.) N. F. Coleman 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 Nil.

Rank.
Signature of invalid examined.