Original

63rd DEPOT BATTERY

ATTESTATION PAPER.

No. 675693

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? — Crawford.
1a. What are your Christian names? — William Ralph.
1b. What is your present address? — 33 Winnett St Woodstock Ont
2. In what Town, Township or Parish, and in what Country were you born? — Woodstock Ontario
3. What is the name of your next-of kin? — Mrs Laura E. Crawford.
4. What is the address of your next-of-kin? — 33 Winnett St Woodstock Ont
4a. What is the relationship of your next-of-kin? — Mother.
5. What is the date of your birth? — Sept. 18th 1889.
6. What is your Trade or Calling? — Telephone Wire Chief
7. Are you married? — no.
8. Are you willing to be vaccinated or re-vaccinated and inoculated? — yes.
9. Do you now belong to the Active Militia? — no
10. Have you ever served in any Military Force? If so, state particulars of former Service. — no.
11. Do you understand the nature and terms of your engagement? — yes.
12. Are you willing to be attested to serve in the Canadian Over-Seas Expeditionary Force? — yes.

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

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

W R Crawford (Signature of Recruit)

Date July 29 1916 J C Hunter (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, William Ralph Crawford, 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.

W R Crawford (Signature of Recruit)

Date July 29 1916 J C Hunter (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 Woodstock this 29 day of July 1916

V Z Fraser (Signature of Justice)

J. P. in and for the County of Oxford

M. F. W. 23.
400M.—1-15.
H. Q. 1772-39-841.

Description of William Ralph Crawford on Enlistment.

Apparent Age 26 years ..... months.

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

Height ..... 5 ft. 7½ ins.

Chest measurement: Girth when fully expanded ..... 36 ins.

Range of expansion ..... 32 ins.

Complexion medium

Eyes hazel

Hair brown

Religious denominations:

- Church of England yes
- Presbyterian .....
- Methodist .....
- Baptist or Congregationalist .....
- Roman Catholic .....
- Jewish .....
- Other denominations ..... (Denomination to be stated.)

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

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

none

CERTIFICATE OF MEDICAL EXAMINATION.

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

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

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

Date July 29. 1916. A. Beverley Welford Capt

Place Woodstock Medical Officer.

*Insert here "fit" or "unfit."

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

CERTIFICATE OF OFFICER COMMANDING UNIT.

W R Crawford 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.

MAR 11 1916 [signature] Lt. Col. (Signature of Officer)

O. C. 168th O. S. Bn., C. E. F.

Date ..... 191 .

20.6-19 R.B

REGIMENTAL DOCUMENTS

NAME Crawford William Ralph Snr. REGT. NO. 673-693 UNIT 11th Bty 3rd Bdge C.F.A. (168 Q Bty) FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
						DEATH
1	ATTESTATION PAPER (M.F.W. 23, 133, or 51)					Category
3	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					
	TRAINING HISTORY SHEET (M.F.W. 113)					
1	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
1	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)				43030	
1	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
2	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
	DENTAL HISTORY SHEET (M.F.B. 465)					Category
1	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					
	MEDICAL EXAMINATION (M.F.W. 129)					Demob.
	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
	LAST PAY CERTIFICATE (M.F.W. 44)					
1	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					
1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					1
1	C.D.3					21-42
1	M.F.W. 67					16-12
2	Ltr A Ebrog B					3-12
1	Card					1
1	A33					
1	A933279					
1	A29181					
1	R.C.A.F.					
	Map Card					

W 2589
100M-11-18
3724 39-1377

FORM D.M.S. 1300.
8137—50m—28/2/17.

Surname	Christian Name or Names	Reg. No.
Crawford	W. R.	675693

Rank	Unit	Co.	Troop	Batty.
Gnr.	3rd CDAC.			

Hospital — Date of Admission

Transferred 13 Gen. Boulogne Hosp. 12-5-17
Scott. Nat. Red + Glasgow Hosp. 24-5-17
Epsom Conv. Hosp. 16.7.17.
Hosp.
Hosp.

PUO 14D

Diagnosis

(1)
Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

DISPOSITION — Disc. 20-7-17 — Date

A194

C.L. 19-5-17
" 1-6-17 B195

19.7.17. B221.
" 27-7-17 B226

REMARKS

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

EPITOME OF HOSPITAL TREATMENT.

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

No. 675693 RANK Enr. NAME Crawford Wm. R.

T. O. S. 24-2-16 (168th O/S Battn) UNIT 6 3rd Depot Battery

Guard. for. 168th O/S Battn 27-9-16
Do. 189 6-10-16.

M. D. 1

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916 Sept. 27	1916. Oct. 31	R	Proc O/S 28-10-16. Now shown on 6 3rd Dep. Bty	Do 160 27-10-16.

Number 675693 Rank Gnr

Surname CRAWFORD

Christian Name William Ralph

Units C.F.A. Theatre of War France

Date of Service 26-2-17

Remarks

Latest Address ~~33 Winnett St~~
~~Woodstock Ont~~
100 Brunswick
Stratford Ont.

Roll No. B Page 18576

200m.-6-21.M.

DATE AND PLACE OF ORIGIN

*DUE TO SERVICE
*NOT DUE TO SERVICE

OSPITAL AS AN ADMISSION

WHERE FROM)

IIT IN CATEGORY

INVALID

WHERE TO)

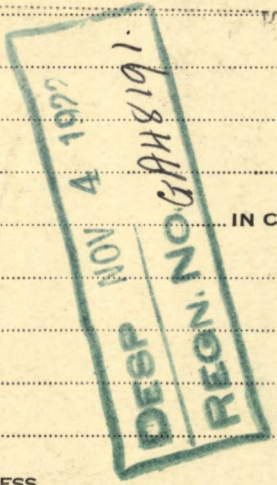
ITIONS DIAGNOSED

ADDRESS

HOSPITAL STATION

* CROSS OUT CONDITION NOT APPLICABLE.

(OVER



FORM R. 149.
7106—250m—7/2/17.

Name CRAWFORD, Wm. Ralph Rank Gnr Reg. No. 675693

Unit 3rd.C.D.A.C.

Next of Kin CANADA.

Date	Movement	Place	Casualty	List No	Notified N/K O.	W.O. List
1917.						
12-5.	No.13 1/2 Gen.Hosp.	Boulogne	P.U.O	a.194.		
24-5.	Scot.N.Red X.G.H.	Cardonald.	do	B.195.		
16-7.	C.C.H.	Woodcote Park, Epsom.	do	B.221.		
20-7.	Discharged.		do	B.226.		

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

Form D.M.S. 1317.
1202—15m—21/11/16.

HOSPITAL.

A. & D. No. Ward F

Unit CFA 9 Bde Sick or Wounded.

Regtl. No. 676693 Pl. of Act'n

Rank Gnr Name Crawford W.R.

Age 27 Religion CE.

Service Compl'd 12/12 Time with Field Force 4/12

Diagnosis PUO.

Admitted 15 JUL 1917 DSG Glasgow Discharged DI 20-7-17

Transferred 1 CCD Hastings

RECORD FURTHER REMARKS ON BACK.

19-7-17

Complains of weakness in legs
& knees when walking
Heart a little weak no murmurs

D T

M G Brown
Capt

No. 675693 RANK Pte. NAME Crawford Wm. R.

T. O. S. 29/2/16 (D.D.64) of 6/3/16 UNIT 168th. Battalion

M. D. 1.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916	1916			
Feb. 29	Mar. 31	M.		
April		"		
May		"		
June		"		
July		"		
Aug		"		
Sept 1.	Sept 26	"	Transfd to 63rd Bty 27-9-16	D. D. 68. 26-9-16

REGT'L. No. 675693

NAME Crawford, W. R.

H. Q. FILE No. 649

RANK AND CORPS Gnr. 3rd San. Div. Asstn. Col.

FOLLOWS No.

FOLLOWS

CABLE

No. | Date

NATURE OF CASUALTY

L. L. 18950—M. & D. 7789

M. F. W. 42—30M.—4-17.
H. Q. 1772-39-893.

LIST NO.	HOSPITAL	DATE OF ADMISSION	REMARKS
A194	#13 Gen. Boulogne	12-5-17	P.U.O.
B195	Scottish National Red Cross Gen. Cardonald #Glasgow.	24-5-17	P.U.O.
B221	Car Court, Woodcote Park Epsom	16-7-17	P.U.O.
B226	Discharged	20-7-17.	" " "

NAME Crawford. William Ralph. 2.J. SOS Dis 27-5-19 Demob. DO 16099-6-19 DO 2.

RANK & NO. Pte. 675693.

CORPS ~~168th~~. 63rd. Bty. (Arty. Draft) ~~Batt.~~

ENLISTMENT, PLACE Woodstock, Ont. DATE Feb. 29th 1916.

FORMER CORPS Nil.

COUNTRY OF BIRTH Canada. Woodstock, Ont.

NEXT OF KIN Crawford. Mrs. Laura E. (Mother)

ADDRESS OF NEXT OF KIN 33 Winnett. St, Woodstock. Ont.

DISCHARGE, PLACE DATE

Trans from 168th Bn. to 63rd. Bty. Arth. M. D. #2, 27/8/16.

R/C 25-5-19 334 / 1 Gr

M. F. W. 22. 100 m.—9-15.

L. L. 85779—M. & D.—6011.

H. Q. 1772-39-839.

MARRIED SINGLE Yes. WIDOWER

TRADE OR CALLING Telephone Clerk RELIGION Church of England.

DESCRIPTION.

APPARENT AGE 36. YEARS 0. MONTHS

HEIGHT 5. FEET 7 1/2. INCHES

CHEST MEASUREMENT 36. INCHES EXPANSION 4. INCHES

COMPLEXION Medium EYES Hazel. HAIR Brown.

DISTINGUISHING MARKS Nil.

MEDICAL EXAMINATION. PLACE Woodstock Ont. DATE Feb. 29th. 1916.

REMARKS: Present address:- 33 Winnett St., Woodstock, Ont.

DEPARTMENT OF VETERANS AFFAIRS

To ● Copy for H.O. File

P.A.

Ottawa, Ont.
Date Oct.15, 1964

Attention of

NAME CRAWFORD, William Ralph SERVICE NUMBER 675693 WWI C.P.C. No. 140754 W.V.A. No. 210976 NAVY ARMY XXX R.C.A.F.

The DEPARTMENT has received information from

S.T.M.O. London, Ont. Tele-Memo d/Oct.13, 1964

(State authority and source of information of death)

regarding the death of the above mentioned veteran.

Particulars are as follows:

Bo 1 40 40 53

Date of Death October 13, 1964
Cause of Death
Place of Death Westminster Hospital, London, Ont.

Name and Address of next of kin (if known)

Copies to: W.S.R.
V. I.
~~PAY~~
~~DOX~~
H.O.

Destroy form if advice of death already received.

E.C. Richards
for
Chief, Central Registry

DVA 24

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.
12 5/17	1267a	P.U.O. adm Fa	C C D	10 5/17 10 5/17	A36 DCS 193 26 5/17
23-5-17	13 Gen'l	Trench Fever, sev. ~~adm~~ Trans to England		23-5-17	W-3034/839.
12-5-17	-Do-	P.U.O. adm		12 5/17	3034/1096.
23 5/17	13 Gen	Inv. (S), and posted to ban Artly R. Depot at Shorn. via H.S. St Denis		23 5/17	W 3083 (a. 5755) Part II O. 111 of 6-6-17
3.6.17 ✓	Reg' Depot	T. O. S from 9th Bde CFA	S'Cliffe	24-5-17	R. Vaultain LIEUT OFFICER i/c RECORDS CANADIAN SECTION G.H.Q. 3RD ECHELON Pt II O86 JWR2H R. H. W. Clowes for Colonel i/c Records, ~~C.E.F.~~ Lieut. OMFC
27-8-17	Discharged from 1st C.C.D. St Leonards to 2nd CCD. Bn. Part II D.O. No. 162 28-8-17				R. A. Grant for Adjutant, 1st Canadian Command Depot.
29-8-17	2 CCD.	Attached to 2 CCD.	Bramshott	27-8-17	D.O. Pt 2 #167.
15-9-17	OC. 2ndCCD	Ceases to be attached to 2nd C.C.D. on return to Ast. Res. Bn. Depot	Bramshott	14-9-17	Pt, 2 D.O. No. 182 F. Raphael for OC. 2nd CCD.
~~16-9-17~~	~~C.C. C.A.R.O.~~	~~S.O.S. to 1st Bde C.R.A.~~	~~Vitry~~	~~16-9-17~~	~~Pt II D.O. No 191~~

Sheet 1

W.S.B. CLASS. A

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

M. [illegible] V. 54.
15-M. 10-15.
H.Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps 6th Battalion C.E.F. ✓ Nafa to 63rd DEPOT BATTERY

Regimental No. 675693 Rank ~~Ba~~ Gunner Name Crawford William Ralph

C.E.F.

Enlisted (a) 29/2/16 ✓ Terms of Service (a) C.E.F. ✓ 4 Mos Service reckons from (a) 29/2/16 ✓

Date of promotion to present rank. } Date of appointment to lance rank } Numerical position on roll of N. C. Os. }

[illegible]ended Re-engaged Qualification (b) Telephone wire chief.

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.
		Embark	Halifax	23/11/16	
		Disembark ✓	Liverpool	30/11/16	
2-12-16	O.C. Res Bde C.F.A.	Taken on strength Res Bde C.F.A.	SHORNCLIFFE.	30-11-16	B.O. Part II 5/12/16 W.R. Elliott Adjutant, Reserve Brigade, C.F.A.
26/2/17	O.C. Res Bde C.F.A.	To 3rd D.A.C.	SHORNCLIFFE.	26/2/17	Pt II 57 D 26/2/17 W.R. Elliott Adjutant, Reserve Brigade, C.F.A.
27/2/17	C.B.D.	Arr from England as Reinf	to 3rd & 6th Dab	27.2.17	Pt II 38 a/2-3-17 Base M.R.
18/3/17	C.R.A.	POSTED TO. 9TH BDE.	FIELD	21/3/17	6aa a 5/55 P+II 0 vg 23/3/17
18/3/17	C.R.A.	Taken on Strength 9th Bde.	to F.a.	21/3/17	-do- D.O. P+II 63 23/3/17
17/5/17	Unit		To strength (NS)	9/5/17	B-23 W66 191 23/5/17
17/5/17	86 Fa	R.U.O.	a.o.w. Hospital	6/10/5/17	A 326 W66 193 26/5/17
17/5/17	18 66 b.	R.U.O.	a.o.w. Hospital	16 a.s.	10/17/5/17 A 326 W66 193 26/5/17

(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.

[illegible] P.T.O.

Sheet 2

WSP

(1001)—Wt. W8203—1273.—800,000.—11-14.—K. & K. Forms B. 103/1.

Army Form B. 103.

No 2. Petawa Art Dft

Casualty Form—Active Service.

Regiment or Corps Can. Res. Artillery

Regimental No. 675693 Rank Gnr. Name Crawford William Ralph.

Enlisted (a) 29/2/16 Terms of Service (a) War + 6 Mos Service reckons from (a) 29-2-16

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

Extended _____ Re-engaged _____ Qualification (b) Telephone wire chief

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.
25/7/17	OC C.A.R.D.	Shown O/C. 1st C.C.D.	Seliffe	20/7/17	Pt II D.O. 138
12/9/17	do.	On Com. 2nd C.C.D. B'shott.	do.	27/8/17	Pt II D.O. 187
16/9/17	do.	S.O.S. to 1st Bde C.R.A.	Witley	15/9/17	Pt II D.O. 191
					Wirtoward LIEUT. & ADJT. FOR O.C. CAN. ART REGIMENTAL DEPOT.
16-9-17	O.C. 1st Bde C.R.A.	T.O.S. from Regt Depot	Witley	15-9-17	B.O. Pt II no 87
15 OCT 1917	O.C. 1st BDE. Can. Res. Arty.	PROCEEDED O/SEAS TO C.F.A.	WITLEY CAMP. 14 OCT 1917		1st BDE. Pt. II. ORDER No. 116 Chas Ritey Lt for CAPT. & ADJT. FOR O.C. 1st BDE. CAN. RES. ARTY.
16-10-17	C.G.B.D.	Arr'd. Reinf. XXXXX T. on S. Can. Arty. Pool.		16-10-17	N.R. 90 22-10-17
28-10-17	do	Left Base for Can. Arty. Pool.		28-10-17	N.R.
do	C.C.R.C.	Arrived at do do do		28-10-17	N.R. (36)
4/11/17	A.A.G.	Posted to 3rd Bde C.F.A.		4/11/17	CCRCHR dp 4/11/17 KR 118 Pt II 111 dp 20/11/17

CERTIFIED CORRECT 27 OCT 1917 CAN. RECORDS, LONDON

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

[P.T.O.

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
4/11/17	A.A.G.	Taken on Strength 3rd Bde C.F.A.		4/11/17	CCRC & R d/4/11/17 RR 118 Pt II 111 d/20/11/17
4/11/17	Hort	Joined Unit		4 " "	B213.
26.10.18	3rd Bde	Granted 14 days leave		26.10.18	B213 Pt II Do. 143.
16.11.18	"	From leave		11.11.18	"

Proceeded To England 25 AVR 1919

S.S AQUITANIA Sig: No-77
EMB S, HMPTON 18-5-19
Disemb HLFX 2[illegible]

G. F. Skelton
Lt.
~~Capt.~~ for Lt.-Col., A. A. G.
Canadian Section. G. H. O. 3rd Echelon. B. E. F.

S.O.S. On proceeding to Canada

P. II. 015
D/20-5-19

A. D. Anderson Lieut
For Lt. Col. O.C. 3rd Brigade C.F.A.

3

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

M. F. W. [redacted] (A. F. B. 103.)
350M.—5-16
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps. .....

Regimental No. 675693 Rank Gnr. C. E. F. Name Crawford Williams K.

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

Date of promotion to present rank ..... Date of appointment to lance rank ..... Numerical position on roll of N. C. Os. .....

Extended..... Re-engaged..... Qualification (*b*)..

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
MAY 18 1919	O. S.	T. O. S. No. 2 DISTRICT DEPOT,	TORONTO 1919	PART II D. O 160	
MAY 27 1919	S. O. S.	(DISCHARGED FROM H. M. S.)	No. 2 D.S. DEPOT,	PART II D. O 160	

W. C. Roberts
Lieut.
For O. C. No. 2 District 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*) *e.g.* Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

[P.T.O.

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

R—122
8,401—50,000—21-10-16.

AGR

Rank Gnr. Name CRAWFORD, William Ralph Reg'l No. 675693

Unit No.2 Petawawa Art Dft. If in perm. Corps, What Unit? Married or Single Single.

Place and Date of Enlistment Woodstock, 29th Feb. 1916. Place of Birth Woodstock. Ont.

Name and Address, Next-of-Kin Mrs. Laura E. Crawford,

33 Winnett St., Woodstock, Ont. Relationship Mother.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

N/E. R.B. No. 1620
File R.L.
Category

A.F.B. 103 CHECKED
WB. 3 - MAR 1917

Report. Date.	Report. From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
		Arrived in England S.S. Mauretania 30.11.16			
2.12.16	OC Res	Bde Taken on Strength S'cliffe 30-II-16 Pt.2,O 310			
26. 2. 17		S.O.S. to 3rd D.A.C	—	26-2-17	— 57
2/3/17.	3rd D.A.C.	attached to the Column on Arrival in Field.		27/2/17.	— " — 38.
23/3/17.	do.	Cease to be attached to the Column on being Posted to the 9th Bde C.F.A.	do.	27/2/17.	— " — 49.
23/3/17	9th Bde	T.O.S. of Unit	"	27/2/17	" 63
19-5-17.	3rd D.A.C.	Adm No 13 Gen Hosp.	Boulogne.	12-5-17.	C.L. A194. P.U.O
1-6-17.	do.	Adm Scottish Nat Red x Gen Hosp.	Glasgow.	24-5-17.	" B195 "
3-6-17.	Reg Depot	T.O.S. from 9th Bde C.F.A.	S'Cliffe	24-5-17	Pt II O86 & Pt II O111d/6-6-17 of 9th Bde
27.7.17	3rd DAC	Disc Cam. Conv Hosp.	Epsom	20.7.17	CB226. P.U.O

Crawford, William, Ralph. 675693

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.
25.7.17	CARD	On command 1st CCD	St Leonards	20.7.17	Pri O 138
2.8.17	1st C.C.D	Att for Pay Rations quarters & Clothing	"	20.7.17	" " 141.
27.8.17		Ceases to be att on proc to 2 CCD		27.8.17	" 162 Pri O 167 d 29.8.17 2nd CCD
16.9.17	1st Res art	T.O.S from Reg Depot	Gm Willey	16.9.17	" 87
15.9.17	2 CCD	Ceases to be att or return to Can Res Art Depot	"	14.9.17	" 182
16.9.17	Reg't Depot	S.O.S to 2 Res Art	Gm "	15.9.17	" 191
15.10.17	1 Res art	SOS. proceeding O/Seas	" "	14.10.17	" 116 WSR
22.10.17	art Pool	TOS as Reinforcements	" Field	16.10.17	" 90
20.11.17	" "	S.O.S to 3rd Aby Bdg	" "	4.11.17	Pt 2. 111 & 3rd Bde Pt 2. 117/23.11.17
26.4.19	3rd Bde	Proceeded to England	" "	25.4.19	- 33
30.4	B. Wing CCC	TOS pending ret to Canada	" Bramshott	26.4.	- 13
31-5-19	Do	S.O.S. to Canada	" Do	18-5-19	- 17.
		To Canada	77-J-51	18-5-19	

A.F.B. 103 CHECKED 24 OCT 1917

Duplicate
675693

MEDICAL HISTORY SHEET.

Surname Crawford *Christian Name* William Ralph

Examined { on 29 day of Feb 1916
at Woodstock Ont

Birthplace { City or Town Woodstock, Ont
County Oxford

Apparent age 26

Trade or occupation Telephone wire chief

Height 5 Feet 7½ Inches.

Weight 160 Lbs.

Chest measurement { Minimum 32 inches.
Maximum expansion 4 inches.

Physical development Good

Small-Pox Marks —

Vaccination Marks { Arm Right. Left.
Number 1

When Vaccinated last 1900

(*a*) Marks indicating congenital peculiarities or previous disease —

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

Approved by R E Weston
OK
Rank Capt M.O.

Date.	Fit or Unfit.	Examined for Re-engagement.
13.9.17.	A.III	(Sgd.) J.S.Douglas Lt. M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date.	Result.	Vaccinations.
Apl 13	Pos	R E Weston M.O.
		M.O.
		M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.
May 20	Good	R E Weston M.O.
May 29	Good	R E Weston M.O.
21/10/16	T.A.B.	H. A. Culham M.O.
3.8.17.	T.A.B./2	1st C.C.D. (Sgd.) G.W.Sta (Staples)

Enlisted on 29 *day of* Feby 1916 *at* Woodstock, Ont

2nd Petewawa ART Y DET

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	168th Batt	675693		29/2/16
Transferred to 63rd DEPOT BATTERY 3rd D.A.C				Sep 27/1916
	P.O.S. to C.F.A.			14.10.17.

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.

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

M. F. B. 313.
400M.—1-16.
H. Q. 1772-39-439.

Surname Crawford Christian Name William Ralph

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.
Petawawa	SEP - 9 1916										
Scottish Red Cross H. Bellahouston		24	5	17	16	7	17	P.U.O.	51.	Pain in right shoulder & along shin bones Sod. Sal. & massage to shoulder Transferred to Epsom.	(Sgd.) J. McKendrick
M.C.H. Epsom.		15	7	17	20	7	17	"		Complained of some weakness in legs. Now fit for Physical Training D.I	(Sgd.) M.G. Brown Capt. DT.

ORIGINAL

ORIGINAL

Original

17

675693

157 C

MEDICAL HISTORY SHEET.

Surname Crawford Christian Name William Ralph

29 MAY 1917

Examined on 29 day of Feby 1916 at Woodstock

Birthplace City or Town Woodstock County Oxford

Apparent age 26

Trade or occupation Telephone wire chief

Height 5 Feet 7½ Inches.

Weight 160 Lbs.

Chest measurement Minimum 32 inches. Maximum expansion 36 inches.

Physical development Good

Small-Pox Marks no

Vaccination Marks Arm Right. — Left. yes Number one

When Vaccinated last 1900

(a) Marks indicating congenital peculiarities or previous disease none

(b) Slight defects but not sufficient to cause rejection

None

Approved by R E Weston

Rank Captain M.O.

Date.	Fit or Unfit.	Examined for Re-engagement.
13/9/17	A III	J S Douglas Lieut. M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date.	Result.	Vaccinations.
Apr 13	Pos	R. E. Weston Per H. A. Culham M.O.
		M.O.
		M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.
May 20	O.K.	H. A. Culham R. E. Weston M.O.
May 29	O.K.	H. A. Culham Per. M.O.
21/10/16	T.A.B.	H. A. Culham M.O.
3/8/17	T.A.B. 2	1st C.C.D. [illegible] Capt

Enlisted on 29 day of Feby 1916 at Woodstock

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	168th Battn. C.E.F.	675693		29-2-16
Transferred to 63rd DEPOT BATTERY	3rd D.A.C.			Sep 27/1916
	1st Bde C.R.A.			15-9-17
	P.O.S. to C.F.A.			14-10-17

CANADIAN

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
Bramshott	Bramshott	Arthritis	[illegible] Capt Cat A.

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

M. F. B. 313.

400M.—1-16.

H. Q. 1772-39-439.

J. M. C

Surname Crawford Christian Name Colph

SCOTTISH NATIONAL RED CROSS HOSPITAL BELLAHOUSTON

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital. Day	Month	Year	Discharge from Hospital. Day	Month	Year	DISEASE.	Number of days in Hospital.	Remarks on nature of the disease: how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
Ottawawa	SEP 9 1916										[illegible] McKenzie M.D. [illegible]
		24	5	17	14	7	17	P.U.O.	51.	Pain in right shoulder & along shew bones Sod. Sal. & massage to shoulder Transferred Dr Epsom.	
M.C.H. Epsom		15	7	17	20 JUL 1917			do		Complains of some weakness in legs. Now fit for physical training Dt	[illegible]

Duplicate Medical History Sheet posted to here 7. S.

Forms
I. 1237
12

[CON. HOSP. WOODCOTE PARK
EPSOM

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book. 17 103

Year 1917

Station and Date.

24 MAY 1917
HOSP. TAL. ELLAHOUSTON

Regimental No.	Rank.	Surname.	Christian Name.
675693	Eur.	Crawford	Wm. R.

Unit.	Age.	Service.
C. F. A. 9 Bgde Hdqrs.	27	14/2 4/12.

Disease P. U. O.

Reported sick. May 10th near Mount St Eloi complaining of pains in back, across stomach, & in shin bones. Onset was gradual. He had reported sick previously with the symptoms On admission in 8th Canadian F.A. with temperature of 104° remained there 5 days. Got up but temp. arose again to 103° & he was transferred to 18. C.C.S and after a day to No 13 G.H. Boulogne. Remained there about a week.

Present Condition.

Tongue clean, pulse fast (100 per min) Heart normal in size with no murmurs. Lungs sound Abdomen some pain in abdominal muscles. Pains in right shoulder & along the shin bones especially at night

Treatment. Sod Sal t.i.d.
Massage to shoulder

J. Donald McClendrick.
M.D. Comp

Transferred to Epsom. 14.7.17.

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

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

P.T.O.

Station and Date.	

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

WAR SERVICE BADGE
CLASS "A" NO. 200076

THIS IS TO CERTIFY that No. 675.693 (Rank) Gunner

Name (in full) CRAWFORD. William Rolph enlisted in

the 168th Battalion

CANADIAN EXPEDITIONARY FORCE at Woodstock, Ont on the 29th

day of February 1916

HE served in 11th Battery, 3rd Brigade. C.F.A. France & Eng.

and is now discharged from the service by reason of Demobilization.

~~Medical Unfitness.~~

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

Age 29

Height 5.7½

Complexion Medium

Eyes Hazel

Hair Brown

Marks or Scars

Tatoo marks

W. R. Crawford
Signature of Soldier.

Date of Discharge

No. 2 DISTRICT DEPOT
MAY 27 1919
TORONTO

A. J. McLaren
Issuing Officer.

For
O.C. No. 2 District Depot.

Rank

Date MAY 27 1919 19

NB.- 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.B. 39A.

C.A.D.C. 5009A

CANADIAN ARMY DENTAL CORPS, O.M.F.C.

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) Crawford. W.R.

REGIMENT 11th Battery RANK Gnr. No. 675693

Date of Examination in England 27/4/19. Date of Examination in France

DIRECTIONS TO DENTAL OFFICERS

1. This form will be made out for each individual at the time of Demobilization in England or France.
2. Figures as per chart will be used to designate teeth concerned.
3. In reference to Partial Dentures the numbers of teeth thereon will be stated.

15 – 8

PRESENT DENTAL REQUIREMENTS

1. FILLINGS
2. EXTRACTIONS
3. CROWNS
4. DENTURES
   - (*a*) Full Upper
   - (*b*) Part Upper
   - (*c*) Full Lower
   - (*d*) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT?

HAS HE EVER RECEIVED DENTAL TREATMENT? (Reply by "*Yes*" where applicable to any or all of *a*, *b* or *c*.)

- (*a*) ~~In Canada~~
- (*b*) ~~In England~~
- (*c*) ~~In France~~

BRAMSHOTT CAMP
HANTS.

Signature of Dental Officer R.S. Aljoe
cap

Original
675693

To be made out in duplicate. H.Q. 54-21-23-53

PARTICULARS OF FAMILY OF AN OFFICER OR MAN ENLISTED IN C. E. F.

INSTRUCTIONS.

(a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.

(b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.

(c) All questions, etc., must be answered.

(d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.

(e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

---

(1) Name of Overseas Unit which Soldier joins 168th Battalion C.E.F.
Transferred Sep 27/1916 to 63rd DEPOT BATTERY

(2) Regimental Number 675693

(3) Full Name of Soldier Crawford, William Ralph

(4) Place of Birth Woodstock, Ont

(5) Are you married, or not ? No

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

(b) Present Postal Address

(7) Are you a widower ? no

(8) Have you any children ?

If so, give number of boys and girls

Also their names and ages

M. F. W. 67
200M.—2-16
1772-39-954

(SEE OTHER SIDE.)

(9) Is your Father alive? Yes

If so, state name and address Daniel Edward Ernest Crawford, 33 Runnett St. Woodstock Ont

(10) Is your Mother alive? Yes

If so, state name and address Laura Crawford, 33 Runnett St Woodstock Ont

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

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

(12) If sole support of widowed mother, state what amount you have given her per month prior to your enlistment, also reason she has no other support than yourself.

.....

.....

(13) If you have no wife, father, mother or children, state the name and relationship with full postal address of your next of kin, to whom you would desire any communication to be sent concerning you.

Mother

.....

.....

(14) If you have a wife, or children, or a widowed mother who depends on you as her sole support, have you applied to the Paymaster of your unit for Separation Allowance? If not, this must be done.

.....

(15) Are you insured? Yes

If so, in what Company? I.O.O.F.

Have you made arrangements for payment of your Insurance premium Yes

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

W. McMullen

Officer Commanding.

Date Sept 27/1916

CLINICAL CHART.

(To be attached to Case Sheet.)

Army Form B. 181

Corps C. F. A. Military Hospital Bellahouston

No. 675693. Rank and Name Gnr. W. Crawford. Age 27. Service

Disease P. U. D. Date of admission 24-5-17. Date of discharge Result

27-5-17. Wire normal.

Dates of Observation	24	25	26	27	28	29	30	31	1 June	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23.
Days of Disease																															

Temperature Fahrenheit — Time A.M. P.M. (each day)

107° 106° 105° 104° 103° 102° 101° 100° 99° 98° 97°

Mag. Sulph.

Headache. Nurse.

Cascara.

Up

Pulse per Minute

Respirations per Minute

Motions per 24 hours

(6201) Wt. W 11421/M1165 2,000,000 12/16 McA & W Ltd. A.F.B. 181 (E. 735)

Signature [illegible] In charge of case.

L-L.Job 5470—M. & D. 6888

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

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

Mrs.

To Whom Laura E. Crawford,

Address 33 Winnett St.,
Woodstock, Ont.

By Whom Assigned Crawford, Wm. R.

Regtl. No. 675693

Rank Lnr.

Corps 63rd. Bty.

Rate 20. per NOV. - 1916

PAYMENTS

NOV - 1916

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

CONSOLIDATED 2 ACCOUNT

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a.
50m.—7-16
1772—39—819.

Sheet No. 2. Mrs. Laura E. Crawford
(Assignee)

Name of Soldier Crawford, Wm. R.
675693 Pte. 63rd Bty.

I. L. Job 5470—Req. 6888.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			To 10 NOV 1916
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.		G 29417	20	
Dec.		M 35194	20	
Jan.	1917	D 38068	20	
Feb.		D 43560	20	20 H
March		E 50217	20	20 L
April		C 995	20	20 6
May		Z 7499	20	
June		Q 3912	20	20 Lu
July		E 21139	20	Ba
Aug.		K 27623	20	03
Sept.		J 35332	20	05
Oct.		Y 47349	20	
Nov.		Q 52845	20	
Dec.		J 55935	20	280 —
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier_____

PAYMENTS.

Month.	Year.	Cheque No.	Amt.	Remarks.
Aug.	1918			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1919			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1920			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY. * ~~ENGLAND~~ OR CANADA.	SEPARATION ALLOWANCE. * ENGLAND OR CANADA.
EFFECTIVE DATE:- 1-11-16	EFFECTIVE DATE:-
AMOUNT:- 20⁰⁰	AMOUNT:-

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

Mrs Laura Crawford (Mother)
33 Winnett St
Woodstock

Stopped 1/6/19

NAME:- CRAWFORD William R
NUMBER:- 675693

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Gnr

UNIT AND TRANSFERS

ORIGINAL UNIT:- 63 Bty Aft
DATE ACCOUNT FIRST OPENED:- 1-12-16

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			3 Bde CFA

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS { UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK.

DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT
4/4	100		3 49				
9/4	235		3 49				
20/4	3125		49				
30/4	677		29 20				
			39 67				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
Gnr	1 00	10		
	1st D.	2		

PARTICULARS OF RENDERING NON-EFFECTIVE:- Dis to Canada 31/5/19. B. Shatt 8226. Debit Bal 3 49 ~~Deb~~ Pay due J Philpott.

MONTH 1918	PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
March 31	B fwd								24 97		
A/c	GP	33 00		A.P. Can				20			
				AR 20 36 Fa 5/4/18	4 46						
				AR 75 " 18/4/18	3 57				29 94		
		33 -			8 03			20			
May	G.P	34 10		A.P. Can				20			
				AR 124 36 Fa 3/5/18	4 46						
				AR 212 " 12/5/18	3 57				36 01		
		34 10			8 03			20			
June	Gnr	33 00		A.P. Can				20			
				AR 291 36 Fa 2/6/18	4 46						
				457 " 27/6/18	3 57				40 98		
		33 -			8 03			20			
July	Gnr	34 10		A.P. Can				20			
				AR 476 36 Fa 1/7/18	4 46						
				566 " 25/7/18	3 57				47 05		
		34 10			8 03			20			
Aug	Gnr	34 10		A.P.				20			
				AR 625 36 Fa 6/8/18	3 57				57 58		
		34 10			3 57			20			
Sep	Gnr	33 -		A.P.				20			
				692 36 Fa 10/9/18	7 14						
				732 " 19/9	3 57				59 87		
		33 -			10 71			20			
Oct	GP	34 10		A.P.				20	43 94		
				AR 823 " 13/10	3 73						
				958 " 29.10.18	3 73						
				~~Illegible~~ " 26.10.18	58 40				811		
		34 10			65 86			20			

NUMBER 675693 RANK Fn NAME CRAWFORD WR

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
1918				2nd					8 11	4 15	
Nov	fn's pay	33 -		Arrs pay Can				20			
				AR. 2182. 20.11.18. 3 Bde C7a.	16 79						
Dec	"	34 10		Cap.				20			
Jan	"	34 10		AR. 2352. 7.12.18 "	3 73						
		101 20		Cap				20	7 8 7 9		
		101 20			20 57			60			
Feby	"	30 80		Cap				20			
				AR. 2481. 24.12.18. 3 Bde C7a.	3 73						
				AR. 471. 14.1.19. "	3 73						
				AR 7802. 24.1.19. "	18 66						
				AR. 3018. 5.2.19. "	7 46						
Mar	Gnrs Pay	34 10		Cap				20			
				AR 3227. 17.2.19 3 Bde C7a	3 73						
				AR 3369. Mar. " "	3 65						
				AR 3598 21.3.19 " "	3 65				9 0 8		
		64 90			44 61			40 -	2 7 10		
April		33		Cap April & May	—			40	39 83		
May		34 10		100 - 3 Bde - 5/4	3 49			—	3 6 18		
				235 " 10/4	3 49				3 65		
				3125 " 20/4	3 65						
				677 - Brmg 1/5	29 20				3 6 5		
		67 10			39 83			40			

67.10
4.04
71.14

S.O.S. 18/5/19 SL. 77
40
79.67
76.18
3.49 Debit

P. 559
MARRIED OR SINGLE S

PLACE OF BIRTH Woodstock Ont

NAME AND ADDRESS OF NEXT OF KIN Mrs Laura E. Crawford
33 Winnett St. Woodstock Ont.

RELATIONSHIP OF NEXT OF KIN Mother

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. 675693 RANK NAME Crawford William Ralph

IF IN PERMT. CORPS WHAT UNIT UNIT 63 Batty Dft to Res. Bde. TRANSFERRED TO 9th Bde. DATE 21/4/17. AUTHORITY DO 49. 23/3/17

PERMANENT FORCE ALLOWANCES TRANSFERRED TO Res. Bde DATE 1/11/17 AUTHORITY N. Roll 117

PLACE OF ATTESTATION Woodstock Ont TRANSFERRED TO 3 Bde DATE 4/12/17 AUTHORITY 23/11/17

DATE OF ATTESTATION Feby 29th 1916 TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY $ 20.00 DATE EFFECTIVE 1 · 11 · 16 Nov. ass. Pay chgd on Jan. Pay sheets.

PAYABLE TO Mrs Laura Crawford, 33 Winnett St. Woodstock RELATIONSHIP Mother

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

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

DISCHARGE DATE AND PLACE REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

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
														13	13											Balance from L.O.C.				13				
Dec.	31	1.00	31		31	10	3	10							34 10			37/04	15/12/16						2.43			20		22.43	24 67		Nil		
Jan	31		34	10											34 10	3892	31/12	4082	15/1					4 86	7 30			20		32 16	26 61				
Feb	28		30	80											30 80	4223	31/							4 87				20		24 87	32 54				
Mch	31		34	10											34 10	4390	14/2			1953 8.3. Dch. G.H.Q. 541 23/3 9th Bde 1211 28/2 CBD 2201 16/3 Dch. G.H.Q.				7 30		4 36 2 61 4 36 1 74		20		40 37	26 27				
Apr.	1/20		22	—											22 —													20		20	28 27			28 27	To 9th Bde. DO 49. 23/3/17.
Apr	21/30		10		11										11																39 27				
May	31		34	10											34 10	3 51								2 61 2 62				20		25 23	48 14				
June	30		33												33							Hop Rem. 14.6.17					4 86	20		24 86	56 28				
July	31		34	10											34 10													20		20	70 38				
Aug	31		34	10											34 10					Sent Nat Red x Hon S22 14/7						61		20		20 61	83 87				
Sept	30		33												33													20		20	96 87				
			334	40										13	347 40									22 26	9 73	13 68	4 86	200		250 53					

675693. Gnr Crawford W.R. AP. 20 Can.

Date	Pay No. of Days	Pay Rate	Pay Amount $	Pay Amount c.	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount $	Field Allowance Amount c.	Working or Special Pay No. of Days	Working or Special Pay Rate	Working or Special Pay Amount $	Working or Special Pay Amount c.	Assigned Pay Credits	Other Credits	Total Credits	Acquittance Rolls 1 No.	Acquittance Rolls 1 Date	Acquittance Rolls 2 No.	Acquittance Rolls 2 Date	Acquittance Rolls 3 No.	Acquittance Rolls 3 Date	Acquittance Rolls 4 No.	Acquittance Rolls 4 Date	Cash Payments 1	Cash Payments 2	Cash Payments 3	Cash Payments 4	Assigned Pay	Other Charges	Total Debits	Balance Credit	Balance Debit	Pay Withheld or Deferred	Pay Available for Issue	Remarks
MONTH	PARTICULARS				CR. 1				CR. 2	PARTICULARS				DR. 1		DR. 2		DR. 3	DR. 4	BALANCE		DEFER-RED. PAY	SEP. ALLCE. ENG.	MONTH	PARTICULARS		CR. 1	CR. 2	PARTICULARS		DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	
MONTH	PARTICULARS				CR. 1				CR. 2	PARTICULARS				DR. 1		DR. 2		DR. 3	DR. 4	BALANCE		DEFER-RED. PAY	SEP. ALLCE. ENG.													
																																		26 93	
Oct	Bal				~~96 87~~														96 87					Mch	G.P		34 10		AP Can					20		
	P.&A.	Gnr.			34 10								AP.					20	110 97										AR 1017	36 Fa	6/2/18	4 46				
					34 10													20											1069	"	21/2/18	3 57				
Nov		Gpay			33 ..								AP					20											1124	"	9/3/18	4 46				
										AR 2906.	CRA		12 10/17	2 43															1189	"	20/3/18	3 57				24 97
										" 2826	"		26-9-17	4 87													34 10					16 06		20		
										" 4054	C Gen Base Depot		31/10/17	4 46																						
										" 1044/12.	1 CCD.		14/8.	4 86.																						
										Dh " 1159.	"		25/8	4 87																						
										2131	Eps.		16/7.	9 73																						
Dec		GP			34 10													20	106 85	Nil																
1918					67 10									31 22				40																		
Jan		G.P.			34 10								AP.					20																		
										Q 4005	3692 / 35. 23		31/8/17	1 16																						
										AR 703	36 Fa		11/11/17	4 46																						
										748 "			25/11/17	3 57																						
										796 "			5/12/17	13 38																						
										Dh AR 813	2nd CCD		14/9	7 78																						
										" 2182	C.C.H		20/7	48 67																						
										Dh AR 2925	"		10/9	9 74																						
										AR 850.	36 Fa		17/12/17	3 57						28 62																
					34 10									92 33				20																		
Feb		GP			30 80					AR 893.	36 Fa		11/1/18	4 46																						
										AR Can								20																		
										AR 962.	36 Fa		24/1/18	3 57																						
										AR 3795	GBD		21/10/17	4 46						26 93																
					30 80									12 49				20																		

Fwd

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

12186 Nov. 1/16

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

20.			

9.L/C31 Batt

PARTICULARS OF SEPARATION ALLOWANCE

No. 675693

Rank Gnr. Promoted Reverted Discharge

Soldier's Name Wm R. Crawford

Battalion 63rd Batty.

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name Mrs. Laura E. Crawford

Address 33 Winnett St. Woodstock Ont.

Change of Address

1

2

3

4

03899.W58

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
1917 Dec. 31			280 -	280	
Jan	T 66043		20	20	00 Pdeg
Feby	D 100663		20	20 -	
Mar	A 118846.		20	20 -	
Apl.	B 1340		20	20 -	JL
May	M 17441		20	20	
June	J 21135		20	20	
July	S 32371		20	20	
Aug	I 34851		20	20	
Oct as. Sept	L 44235		20	20	
Oct	M 52166		20	20	
Nov	D 60219		20	20	
Dec	R 67400		20	20	
Jan	M 72577		20	20	
Feb	P 77995		20	20	
Mar	H 90245		20	20	
Apr.	K 2895		20	20	
MAY	H 8121		20	20	✓
			620	620	

A/c Closed Aquitania

Ret'd per

Date 25/5/19 M.F.W.187 2/6/19

Clerk [signature] WN 2

WRO 116724 AUDITED [signature] 4 6/19

CONSOLIDATED ACCOUNT

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

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

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

M. F. W. 128
400M.—6-17—1772-49-1141
L. L. 22820—M. & D. 1993.

"AQUITANIA" 25--5-19 C.4710 DISPERSAL "I"

AUDITOR	PAYMASTER

27.

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

M. OR S.

REGT. No. 675693 RANK Gnr NAME (IN FULL) CRAWFORD, Wm.R. (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? DATE EFFECTIVE

TO WHOM PAID RELATIONSHIP

ADDRESS

nil

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F. C.R.A. IF IN P.F. WHAT UNIT? Bank of Commerce, Woodstock, Ont

PLACE OF ATTESTATION TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION 29/2/16 TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY $ 20.00 DATE EFFECTIVE Closed by Ottawa 31-5-19

PAYABLE TO Mrs Laura Crawford RELATIONSHIP ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS 33 Winniett str. Woodstock Ont

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE EFFECTIVE

DISCHARGED PLACE Toronto DATE 27-5-19 REASON Demob AUTHORITY Do 160 IF ENTITLED TO POST DISCHARGE PAY Yes

MONTH	No. of Days	Rate	Amount $	Amount c.	Other Credits $	Other Credits c.	$	c.	Total Credits $	Total Credits c.	Acquittance Rolls / Cash Payments	Cash Col. No. 1 $	Cash Col. No. 1 c.	Cash Col. No. 2 $	Cash Col. No. 2 c.	Cash Col. No. 3 $	Cash Col. No. 3 c.	Assigned Pay $	Assigned Pay c.	Regimental Charges	Other Charges $	Other Charges c.	Total Debits $	Total Debits c.	Balance Debit $	Balance Debit c.	Balance Credit $	Balance Credit c.	Particulars or Remarks
BALANCE FROM PREVIOUS ACCOUNT																													T.O.S. 18/5/19 D.O. 160 SUBS. ... TO ... D.O. ...
31-5-19																					3	49	3	49	3	49			Bal Eng P.O.C.
2-6-19	2	1.10	2	20																									A.g.a. 1-6-19 – 2-6-19
					35	00																							Clothing all
					70	00																							1st pay W.S.G.
																		20	00										A.p. June
														4	87	5	00												Boat & train exp
									107	20	Cheque	73	84										103	71					
					W.S.G.																W.S.G.								
																				27/5/19	70	00							W.S.G. as above
																					6	60			Due				6 days p.a. over credit
					20	00																			Soldier				A.p. June as above
183 dys					430	–			440	–													76	60	363	40			1st W.S.G. Paid by #2 D.D.
											AR 70 23/6/19									664371	63	40	140	–	300	–			
											Q.R. 91 July 18									978624	90	–	230	–	210	–			W.S.G. PAID IN FULL
											Q.R. 116 Aug 19									1341394	70	–	300	–	140	–			[signature] CAPTAIN FOR PAYMASTER WAR SERVICE GRATUITY
											Q.R. 144 Sept 22									1353268	70	–	370	–	70	–			
											AR 173 Oct 27									1367537	70	.	440		–				
					440				440												440		440	–					

100M-1-19.—L. L. 53962-M. & D. 9723.
M. F. W. 2596.
1772-39-1390.

WAR SERVICE RECORD
CLASS-A-NO. 200076

11-2-57

D.A. 1
O.G. 6

M

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

1. No. 675693

2 Rank. Gunner

3. Name. CRAWFORD William Rolph

4. Unit. 11 Bty

5 Date of Discharge MAY 27 1919 Place TORONTO, ONT.

6 Reason for Discharge DEMOBOLIZATION

DEMOBOLIZATION

7. Authority. No.2 District Depot, Part II. D.O. No. 160

8. Proposed Residence after Discharge Woodstock Ont

33 Winnett St.

33 Winnett St. Woodstock

9. CERTIFICATE TO BE SIGNED BY SOLDIER.

I hereby acknowledge that at the undernoted place and date I received my discharge Certificate

M. F. W.?

A R Crawford

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place No. 2 DISTRICT DEPOT

Date MAY 27 1919 TORONTO

RCDSR 5/2/20

Signature For O.C. No. 2 District Depot.

(O. C. Discharging Unit.)

M.F.B. 218a—300M.-11-18—1772-39-113.

LIST OF DISCHARGE DOCUMENTS.

Attestation Paper, Triplicate	Militia Form W. 23
or Particulars of Recruit	Militia Form W. 133
Field Conduct Sheet	Militia Form W. 178 or A.F.B. 122
Casualty Form	Militia Form W. 54 or A.F.B. 103
Last Pay Certificate	Militia Form W. 44
Certificate that missing documents are unobtainable	
Medical History Sheet	Militia Form B. 313 or A.F.B. 178
Proceedings of Medical Board	M.F.B. 227, A.F.B. 179 or A.F.A. 45
Dental History Sheet	Militia Form B. 465
Medical Report	M. F. W. 129 or D. M. S. 1375
Regimental Conduct Sheet	Militia Form B. 263
Company Conduct Sheet	Militia Form B. 263a

1. Triplicate Attestation Paper (M.F.W. 23), or
   Particulars of Recruit (M,F,W, 133).
2. Casualty Form (A.F.B. 103).
3. Medical History Sheet (M.F.B. 313 or A.F.B. 178).
4. Proceedings of Med. Board (M.F.B. 227 or M.F.W. 129)
5. Dental Certificate (C.A.D.C. 5009a).
6. Field Conduct Sheet (A.F.B. 122.)
7. Proceedings on Discharge (M.F.B. 218a)
8. Discharge Certificate (M.F.W. 39)
   (Enclosed in special envelope (460M)).
9. Copy of Discharge Certificate (M.F.W. 39a).
10. Dispersal Certificate (C.D.5).
11. Equipment [illegible] Statement Q.M.G. Form (D.O.S. 2).
    and Clothing)
12. Last Pay Certificate (P. 851).
13. Pay Book (A.B.64).
14. War Service Gratuity (Form M.F.W. 2595).
15. Sundry Documents.

Group B

Checked by No. 11

TDM

Date 16 MAY 1919

"B" Group 46.15

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 Bramshott DATE Apr. 27 1919

1. 1 (a) Unit 11th C.F.A. (b) Regimental No. 675693 (c) Rank Gunner

(d) Surname Crawford (e) Christian name William Rolph

(f) Home address 33 Winnett St. Woodstock Ont.

(g) Next of Kin Mrs. Laura E. Crawford (h) Relationship Mother

(i) Address of Next of Kin 33 Winnett St. Woodstock Ont.

2. Age last birthday 29 Date of birth Sept 18 1889

3. Enlistment, or Appointment (if an Officer) (a) Place Woodstock Ont. (b) Date Feb 29. 1916

4. Personal description;

(a) Height 5' 7½" estimated (b) Weight 155 est. (stripped) Nov. (c) Complexion Dark

(d) Colour of hair Dark Brown (e) Colour of eyes ~~Grey~~ (f) Identification marks, Scars, etc. Tatoo Masonic emblem Left forearm

5. Former trade or occupation Telephone Wire Chief.

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
	3	59

	Periods	
	From	To
Canada	29-2-16	27-11-16
England	30-11-16 28-3-17	27-2-17 15-10-17
France or other theatres of War	27-2-17 15-10-17	23-3-17 25-4-19

7. Original disease, or injury P. U. O.

(a) Date of origin 12-5-17 (b) Place of origin Mt. St. Eloi.

(c) Cause Infection

M. F. B. 227.

400M.—11-18.
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.)

Subacute arthritis. Pain in left shoulder and right hands

Disability slight

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.)

Objective Slight swelling of phalangeal joints of ring finger right hand

Subjective Sufferes pain in all joints of body in damp weather with slight swelling of joints of hands and feet

(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 No — Cardio-Vascular System (If pulse rate is abnormal, B. P. will be taken.) No — Genito-Urinary System (Albumen and Sugar will be excluded.) No

Special Senses No — Respiratory System No — Integumentary System No

Disturbances of Mentality No — Digestive System No — Muscular System No

Osseous and Joint Systems No — Any other general condition No

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

P.U.O. 12-5-17 Onset with fever and headache As fever subsided he suffered from pains in muscles and joints At present has dull aching pain in damp weather.

Lent National Red Cross Hospital 24-5-17 to 14-7-17 Pain right shoulder and along chest bone

M.C.H. Epsom 15-7-17 to 20-7-17 Weakness legs felt

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, scars and deformities.

Tatoo Masonic emblem left fore arm

11.—(*a*) Did the disabling condition have its origin before enlistment? 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.)

NA

12. Was the disability caused, or aggravated; (*a*) by intemperance, or improper conduct; or (*b*) by unreasonable refusal to accept treatment? (a) No (b) 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? Three months

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

Hospitalization

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

(If the answer is "yes" state nature of treatment required and probable duration)

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

(If not, briefly state why)

17. Recommendations Na

Flor Capt. CAMC

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 No. 675693 Gnr Crawford W R 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

~~NA~~

C A Crawford Rank. Gnr

Signature of invalid examined.

ASW

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.

yes

19. Is the invalid fit for

(a) General service,	(Category A)	(Yes or No.) yes A
(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.)

Boarded under auth tel AG 9083 of 11-11-18

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.

D. Nathan Capt. *President.*

PLACE Bramshott — Annaclaren Capt } Members

DATE 29-4-19

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..... } Members

DATE.....

APPROVED BY — APPROVED BY

I. F. McKenzie Capt for *Assistant Director of Medical Services.* — *Director-General of Medical Services.*

DATE 29/4/19 — DATE.....