Unit C. A. M. C. Rank Nursing Sister Name Ethel Mildred Caydeman

OFFICERS' DECLARATION PAPER

CANADIAN OVER-SEAS EXPEDITIONARY FORCE

BASE HOSPITAL
MILITARY DISTRICT No. 2

TRIPLICATE

QUESTIONS TO BE ANSWERED BY OFFICER

[ANSWERS]

1. (a) What is your Surname? Caydeman
   (b) What are your Christian Names? Ethel - Mildred
2. (a) Where were you born? (State place and country) Walkerton, Ontario, Canada
   (b) What is your present address? Walkerton Ontario Canada
3. What is the date of your birth? April 19th 1893
4. What is (a) the name of your next-of-kin? Mother (Sarah Ann Caydeman)
   (b) the address of your next-of-kin? Walkerton Ontario
   (c) the relationship of your next-of-kin? Mother
5. What is your profession or occupation? Nurse (graduate)
6. What is your religion? Methodist
7. Are you willing to be vaccinated or re-vaccinated and inoculated? Yes
8. To what Unit of the Active Militia do you belong? nil
9. State particulars of any former Military Service nil
10. Are you willing to serve in the

CANADIAN OVER-SEAS EXPEDITIONARY FORCE? Yes

The undersigned hereby declares that the above answers made by him to the above questions are true.

Ethel Mildred Caydeman (*Signature of Officer.*)

Taken on strength (place) Base Hospital Toronto

(date) April 6th 1917

E. B. Vardy, Lieut. Colonel
(*Signature of Commanding Officer.*)

CERTIFICATE OF MEDICAL EXAMINATION

I have examined the above-named Officer in accordance with the Regulations for Army Medical Services.

I consider him* fit for the CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

Date April 6th 1917

Place Toronto

A. McPhedran Capt.
Medical Officer.

*Insert here "fit" or "unfit

M. F. W. 51
100m.—4-16.
H. Q. 1772. 39-917

25/7/19

REGIMENTAL DOCUMENTS

NAME Cryderman Ethel Mildred REGT. NO. N. Sister UNIT C.A.M.C. H. Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
2	ATTESTATION PAPER (M.F.W. 23, 133, or 51)		Pers	25-7-19	Pers — 941 Corp	DEATH
2	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)			20-8-19		Category
	TRAINING HISTORY SHEET (M.F.W. 113)					
	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)				47492	
2	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
1	DENTAL HISTORY SHEET (M.F.B. 465)					Category
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					
1	MEDICAL EXAMINATION (M.F.W. 129)					
	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
	LAST PAY CERTIFICATE (M.F.W. 44)					
	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					
	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
1	Disp. Cert.					
1	M.F.W. 67					
2	misc.					
1	M.F.W. 25-91					
	Pay card					

Ref. S.S. Royal George 12/7/19.

W. 2589
100M-11.18
15-2-38-1377

CANADIAN EXPEDITIONARY FORCE

M.J.A. 2-37.
L.E.

Certificate of Service

ISSUED TO OFFICERS AND NURSING SISTERS

This is to Certify that (Rank) Nursing Sister.

(Name in full) Ethel Mildred CHYDERIAH.

Enlisted in The Canadian Army Medical Corps.

CANADIAN EXPEDITIONARY FORCE, on the [redacted]

day of [redacted] 191[redacted] AND WAS APPOINTED to COMMISSIONED RANK

in The Canadian Army Medical Corps.

CANADIAN EXPEDITIONARY FORCE on the Sixth day

of April 191 7.

He SERVED in CANADA, England and France with the C.A.M.C., C.F.C.S. Hosp., Duchess of Connaught Red Cross Hosp., No. 11 Can. Gen. Hosp., No. 1. Can. Gen. Hosp., No. 3. Can. Gen. Hosp., C.F.C. Hosp., No. 3. C.C.C.S., C.A.M.C.C.C. Shorncliffe and No. 15 Can. Gen. Hosp.

and was STRUCK OFF THE STRENGTH on the Twenty-Third day

of July 191 9 by reason of General Demobilization.

Dated at Ottawa, this Twenty-Ninth day

of December 191 9.

Mentioned in Despatches. No. 31069. 31-12-18.

Page 15224

Lieut.

for Director of Personal Services.

M. F. W. 2618a
30m.—4-19.
1772-39-1428.

11

Army Form B. 103—II.
Part II.

(SERVICE AND CASUALTY FORM Part II).

Regiment or Corps CAMC. Regimental Number

*Substantative Rank N/S. Surname Cryderman Christian Names E M.

*Acting Rank

(* To be entered in pencil to facilitate alteration.)

To be folded on this line.

Nothing to be written in this margin.

W1889—PP1150 500,000 5/18 G.W.P.Co (3490)

(A) Report: Date.	(A) Report: From whom received	(B) Authority of Part II. of Orders	(C) Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	(D) Place of casualty	(E) Date of promotion, reduction, reversion, casualty, &c.	(F) Remarks, and initials and rank of an officer
30/11/18	4th Tour Hpl.	Reposted	to No 1 Can Gen Hosp.		13/11/18	B213
		(Authy: TMS	Can Sec. M/850 of 24/11/18)			Pte 21/11/1918.
23.11.18.	1 C.G.H.	Reported	from C.F.C detention H.Q.		16.11.18	B213. P. 9a
			La Joux Jura.			of 1918
7.12.18.	"	14 days	leave France.		4.12.18	B213 P. 9a of 1918
24.12.18	"		Rejoined from leave.		23.12.18	B213
19.1.19			S.O.S of No 1 Can Gen Hosp.			
			Reported to No 3 C.C.C.S		19.1.19.	B213 KM 20421
			(DMS Can M850d 11.1.19			Pte No 6. 1919
28/1/19.	3 CCCSk.	1 OS.	On reposting from 1 C G Hosp.		14.1.19	Pte 4 of 1919 B213.
31.12.18	Can. Gaz.		Mentioned in despatches.			No 31089
15/3/19	RFF	9 of 1919	Posted to Camc Casualty			2.N 15/58
	Pwr Mutrm		Co. Shorncliffe in despatch to			KR. 50034
	(LDMS)		England.		15/3/19	
			H H Chrichton			
			Captain for Major Can. Ref 3rd Echelon	Camc A/H.A.G. G.H.Q		

N/S. E. M. Cryderman.

(A) Report: Date.	(A) Report: From whom received	(B) Authority of Part II. of Orders	(C) Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	(D) Place of casualty	(E) Date of promotion, reduction, reversion, casualty, &c.	(F) Remarks, and initials and rank of an officer
	O.C. C.A.M.C.					
24-3-19	& T. DEPOT.		T.O.S. from Camb. Cas Coy	SHORNCLIFFE.	16.3.19.	P II O.O. 83.
do	do		On Command No 11 C.G.H.	do	do	do
7-4-19.	do		Cases Command No 11 C.G.H.	do	21-3-19.	P II O.O 97
do	do		S.O.S. to No 16. C.G.H.	do	do	do.
						Capt. Adjutant For O.C. C.A.M.C. Reserve Depot
21.3.19	#16.C.G.H.	82.	T.O.S. on posting from Cams or R.T. Depot.	Expiration	5/4/19.	
1/7/19	16 C.G.H.	—	T.O.S. O.M.F.O. 6 as Embarkation for Canada	Expiration	12/1/19	W. Graeme
			Embarked 12 7 19 Liverpool Disembarked 22,7,19 Halifax H M T Royal George.			[illegible]

Nothing to be written in this margin.

BASE HOSPITAL
MILITARY DISTRICT No. 2

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

M. F. W. 54. (A. F. B. 103.)
350M.—5-16
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps ..... C.A.M.C. .....

Regimental No. ..... Rank Nursing sister C. E. F. Name Ethel Winifred Snyderman.

Enlisted (a) ~~April 6 1917~~ Terms of Service (a) Duration of War and 6 mths Service reckons from (a) ~~April 6 1917~~

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				
		Embarked	Halifax	27/4/17	
		Disembarked	Liverpool	6/5/17	
17/5/17	C.A.M.C.	TAKEN ON STRENGTH	Westenhanger	6/5/17	P II D.O. 137.
20/5/17	"	Posted to C.R.C. & Hosp: Buxton	"	8/5/17	P II D.O. 139 D.S. Gaherty Capt. Adjutant for O.C. C.A.M.C. Training School.
10/7/17	D.M.S.	Taken on S. Canadian Red x Sp Hospital	Buxton	8/7/17	D.M.S. C.O 634 - 14/7/17 D.O.T.H. = 137 17-7-17
29/7/17	"	Transferred to D. of C Red x Hospital	Taplow	27/7/17	A.M.D. 4/377 26/7/17 (Nurse) D.O.T.H. 148 - 28/7/17
					Frederick Grant Lt. Col. O.C. CANADIAN RED CROSS SPECIAL HOSPITAL, BUXTON.

(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				
27-5-17.	DMS	S.O.S. D.S. 666 R x Hospital	Taplow Bucks	27/5/17	L2 D 6 1124 28/5/17
2.10.17	Wire. Medreca. A.M.D. 4.2377.	Struck off. strength 15.ba. Gen. Hosp. and posted to Station in Blif.	Taplow Bucks	2.10.17.	L2 D. O. 202 - 2.10.17 Geo. CAPT. C.A.M.O. COMPANY OFFICER.
8-10-17	O.C. 11 C.G.H.	S. On S. from D of S. R.C. 44. St Cliff		1.10.17	Pt. II Do. 281.
30.10.17	O.C. 11 C.G.H.	S off S. to Overseas		29.10.17	Pt. II D.O. 291. A.R.M. for Company Officer, For Colonel, Officer i/c Hospital.
3/11/17	1 C.G.H.	Reinforcement W.O. 129/Overseas/6313 A.M.D. dy 27/10/17 Folio 1937		30/10/17	B213 Pt II 74 26/11/17
8/6/18	1 C.G.H.	Granted 14 days Leave.		2/6/18	B213 Pt II 1041 9/1918
22.6.18	3 C.G.H	Att for Temp duty to No 3 C.G. Hosp for inspection of Issue. D.G.M.S. 13/1823/S&d 20.6.18.		17.6.18	B213 KM 20421. Pt II No 63/1918
24.6.18	- ... -	Return to be att to No 3 C.G.H Authy: D.G.M.S. D.G. S/11 d. 19.6.18		14.6.18	B213. KM 20421 Pt II No 69 d 1918.
24.6.18	2 C.S. Hpl	S.O.S of No 1 C.G.H on reposting to C.C.S Hospl. La Gorgue.		24.6.18	B213. KM 20421 Pt No 73. d 1918.
31. 8/18	L/Tooxr. Hpl.	T.O.S. on posting from 1 C.G.H.		25/8/18	B213. Pt 14/1918.
12/10/18	— .. —	On Command to Gerardmer. Hosp.		10/10/18	B213.
26/10/18	— w —	Rejoined from On Command.		25/10/18	B213

Forms R. 150.
3232. 15 M. 14/12/16.

E.Y. **Surname** CRYDERMAN **Christian Names** Ethel Mildred 25-9-17. No 15 Gen

Rank Nursing Sister **Name and Address of Next-of-Kin** Mother.-

Promotion To: 6 Apr 17 Sarah Ann Cryderman.-
Walkerton.Ontario.Canada.-

Unit C.A.M.C.

Place of birth Walkerton.Ontario.Canada.

Married (Yes or No)

Appointments

Date of leaving Canada **Date and Cause of Resignation**

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 Embs. 24.4.17	Date	REMARKS Taken from Official Documents
		T.O.S. Canc. Crt. on arr. fr. Can.			
14.5.17	Dms.	Posted to Canc. Depot.		27/4/17	CO. 622
14.5.17	Dms.	Posted to Can. Red x. H	Buxton	8.5.17	CO. 624
1.6.17	Dms.	Posted to D. of Con. C. Red x. H	Taplow	27.5.17	Co. 406
6-10-17	-do-	Posted to No 11. Can Gen. Hp.	Moore Bks.	2-10-17	CO. 233
30.10.17.	Do.	Proceeded O/Seas for Service.		29.10.17	Co 1145.
26.11.17	No1 C.G.Hp.	T.O.S. on arrival in France.		30.10.17	Pte 9/74
15-6-18	do	~~Granted 14 days leave~~		2-6-18	Pte 9/47
3.7.18	do	Att. for Sem. duty to 3 C.G.H.		17.6.18	Pte II 0.53 3 C.G.H. Pte II 0.37
31-8-18	3 C.G.Hp.	Cases to be attached from 1 C.G.Hp.		14-8-18	Pte II. ord. 50
17-9-18	1 C.G.H. CF.C. D.H.p.	S.O.S. on reposting to CFC. DH.	La Jour Jura	24-8-18	Pte II. ord. 73.
26-9-18	La Jour Jura	T.O.S. on posting from 1 Can. Gen. Hosp.		25-8-18	Pte II. ord. 14.
21-12-18	Do	S.O.S. on reposting to 1 Can Gen. Hosp.		15-11-18	Pte II. ord. 21.

A.F.B. 103. 18 NOV 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
11-12-18	1CGH	T.O.S. Reposted from C.F.C. Det Hp La Joux Jura		16-11-18	Pt II. ord. 96.
14-12-18	Do	Granted 14 days leave		4-12-18	Pt II. ord. 98.
		Mentioned in Despatches LG.31089 d.31-12-18			
4-2-19	1CGHp	S.O.S. reposted to 3 Can Cas. Ag. Stat.		13-1-19	Pt II. ord. 6.
20-2-19	3 CCCS	T.O.S. on reposting from 1CGHp.		14-1-19	Pt II. ord. 4.
20-3-19	Do	S.O.S. posted to Camc. Cas. Coy		15-3-19	Pt II ord. 9.
22-4-19	Camc. Cas. Coy. Camc.	S.O.S on posting to Camc. R.O.T. Dep		16-3-19	Pt II ord. 93.
24-3-19	R.O.T. Dep.	T.O.S. on posting from Camc. Cas. Coy.		~~15-3-19~~ 16-3-19	Pt II ord. 83
		On Command 1CGHp. Move Bks.		~~15-3-19~~ 16-3-19	Amd by Pt II 100.
7-4-19	do	Ceases to be shown on Cmd to 11 C.G.H.		21-3-19	Pt II Ord. 97
7-4-19	C.A.M.C.R.T	S.O.S. On posting to 16 C.G.H. Osh		21-3-19	Pt II Ord. 97
5-4-19	16 C.G.H.	T.O.S. On posting fm C.A.M.C.R.T.T.		21-3-19	Pt II Ord 82.
29-4-19	"	S of S to C & E.	Canada	12.7.19	Pt II 0/177
					21213
		SOS trans to CEF in Canada		12 7 19	CO 90
		Sailed to Canada "Royal George"		12.7.19	S.L. 506.
				S.S. 23 7.19	

DEPARTMENT OF VETERANS AFFAIRS

Dept. of Veterans Affairs
War Service Records
NOV - 4 1963

Ottawa Ont

To ● Copy for H.O. FILE VF-692-7

Date Nov 1/63

Attention of

NAME CRYDERMAN, Ethel Mildred. SERVICE NUMBER N.S. WW1

C.P.C. No. 205533
W.V.A. No.

NAVY
ARMY x
R.C.A.F.

The DEPARTMENT has received information from

Veterans Insurance. Ottawa, Ont. Oct 29/63

(State authority and source of information of death)

regarding the death of the above mentioned veteran.

Particulars are as follows:

Date of Death Oct 18/63
Cause of Death
Place of Death Not stated

Name and Address of next of kin (if known)

Copies to: W.S.R.
~~Vocl.~~
~~B.A.V~~
~~D.O.~~
H.O.

Destroy form if advice of death already received.

E.C. Richards
for
Chief, Central Registry

DVA 24

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

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

Casualty Form—Active Service.

Unit, Regiment or Corps C a Sh C

Regimental No. ..... Rank N. Sister C. E. F. Name Cryderman R. W

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				
26 7 19	M.H.Q. Ottawa	T.O.S. C.E.F. in Canada on General Demobilization	M.D. No. 2	12 I 19	C.E.F. R.C. No. 2095-19
11-8-19	M.H.Q. Ottawa	S.O.S. C.E.F. in Canada on General Demobilization	M.D. No. 2	23-7-19	C.E.F. R.C. No. 2117-19

W. Sister Capt.
for Director Personal Services

(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				

BASE HOSPITAL
MILITARY DISTRICT No. 2.

DUPLICATE

DUPLICATE

MEDICAL HISTORY SHEET

Surname Cryderman (Snyderman) Christian Name Ethel Mildred

Examined on 6th day of April 1917
at Base Hospital Toronto.

Approved by [signature]
Rank Capt A.M.C. M.O.

Birthplace City or Town Walkerton
County Bruce

Apparent age 24

Trade or occupation Graduate nurse

Height 5' 3" feet Inches

Weight 129 lbs.

Chest measurement Minimum 33 inches
Maximum expansion 35 inches

Physical development Good

Small-pox Marks No

Vaccination Marks Arm Right Left
Number one.

When Vaccinated last 4 years.

(a) Marks indicating congential peculiarities or previous disease

none

(b) Slight defects but not sufficient to cause rejection

none

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

Date	Result	Vaccinations
April 16/17		Gp. Porter Capt M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc. Paratyphoid
1917. April 6		Gp Porter Capt M.O.
11/17		M.O.
16/17		Gp Porter M.O.

Enlisted on 6th day of April 191 at Toronto

	Corps	Regt'l Number	Habits	Date
Joined on enlistment				
Transferred to	C.A.M.C.	Sister		April 6th 1917

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 Sanderson Christian Name Ethel Mildred

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				

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) CRYDERMAN.E.

REGIMENT C.A.M.C. RANK N/Sr NO.

Date of Examination in England 15/3/19 | 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.

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? No

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 yes
- (*c*) In France yes

Signature of Dental Officer J.K. Rogers

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

Officers and Other Ranks leaving the service for reasons other than medical unfitness are to be reported on this form. Where there is evidence of any undetermined or progressive disability, this form will not be used, but the case will be referred to a Medical Board for completion of M.F.B. 227.

No. ..... Rank Lieut. N/S Surname CRYDERMAN (Given name in full) ETHEL MILDRED

Unit or Corps 16 C.G.H. C.A.M.C. Birthplace Walkerton, Ont.

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

1. **GENERAL DESCRIPTION:**

Physique good Weight 127 est lbs. Height 5 ft. 3 in. Colour of Eyes Blue

Nutrition good

Pulse 84

Condition of arteries good

Vision Rt. 20/40 Left 20/40

Hearing (conversational voice) Rt. 20 ft.

Left 20 ft.

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

none

Opinion as to general health and physical condition... good

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

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

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

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

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

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

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

[OVER]

EXAMINATIONS

THIS SECTION FOR USE OVERSEAS—

No. 16 CANADIAN GENERAL (ONTARIO) HOSPITAL,
BRIGHTON, KENT.

Examined at ..... (Overseas)

Date 15.6.19 Signed W. Ballantyne Capt. A.M.C. M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature Ethel Cryderman.

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

THIS SECTION FOR USE IN CANADA—

Examined at ..... (Canada)

Date ..... Signed ..... M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to, or during service.

Signature .....

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

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

[OVER]

M.F.W. 129.
1033 (D.P.) 500M-11-18.
1772-89-1142.

To be made out in duplicate.

BASE HOSPITAL
MILITARY DISTRICT No. 2

H.Q. 54-21-23-53

ORIGINAL

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 ..... C. A. M. C.

(2) Regimental Number .....

(3) Full Name of Soldier ..... Ethel Mildred Snyderman

(4) Place of Birth ..... Walkerton Ontario

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

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

(b) Present Postal Address .....

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

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

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

Also their names and ages .....

M. F. W. 67.

500M.—9-16.
1772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive? Yes

If so, state name and address Clarke Wilbes Brydeman Walkerton Ontario

(10) Is your Mother alive? Yes

If so, state name and address Sarah Ann Brydeman Walkerton Ontario

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

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

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

.....

.....

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

.....

.....

.....

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

.....

(15) Are you insured? Yes

If so, in what Company? Mutual Life

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.

E B Pardy
Lieut.-Colonel
Officer Commanding.

Date 6/4/17

FORM A.G. I.a. - OFFICERS RETURNING TO CANADA.

1. RANK Nursing Sister.

NAME Cryderman.

3. CHRISTIAN NAME IN FULL Ethel,Mildred.

4. UNIT 16 Canadian General(Ontario)Hospital

5. UNIT LEFT CANADA WITH Reinforcement,April1917

6. MILITARY DISTRICT TO WHICH PROCEEDING Toronto.

7. NEXT OF KIN Mrs C.W.Cryderman,
Niagara Falls,
Ontario

8. CANADIAN POSTAL ADDRESS c/o Mrs C.W.Cryderman
Niagara Falls,
Ontario

9. RELIGION Methodist

10. DEPENDENTS RETURNING TO CANADA WITH OFFICER None.

FORM A.G. I.a. - OFFICERS RETURNING TO CANADA.

1. RANK ..Nursing Sister.....

2. NAME..Cryderman.....

3. CHRISTIAN NAME IN FULL.....Ethel Mildred.....

4. UNIT ..16 Canadian General(Ontario)Hospital.....

UNIT LEFT CANADA WITH..Reinforcement, April 1917.....

6. MILITARY DISTRICT TO WHICH PROCEEDING.....Toronto.....

7. NEXT OF KIN ...Mrs. C.W. Cryderman,
Niagara Falls,
Ontario.....

8. CANADIAN POSTAL ADDRESS. c/o Mrs C.W. Cryderman
Niagara Falls,
Ontario

9. RELIGION ...Methodist....

10. DEPENDENTS RETURNING TO CANADA WITH OFFICER.....None.

L. L. 28912. M. & D. 8368.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12.
25m.—10-17.
H. Q. 1772-33-819.

To Whom Mrs S. A. Cryderman

Address Walkerton Ont.

By Whom Assigned Cryderman E. M

Regtl. No.

Rank W/ Sister

Corps C. A. M. C

Rate $78.00

SPECIAL REMITTANCE

P. L. 11-C-147. P. M. 21117

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.		U 45583	78 00	mailed 23/11/17.
Dec.				
Jan.	1916			
Feb.				
March				

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12a.
50m.—7-16
1772—39—819.

Sheet No. 2. Mrs A. Cryderman (Assignee)

Name of Soldier Cryderman, E.

L. L. Job 5470—Req. 6888.

PAYMENTS. N.S. 6 M 6 R S

MAY 1917

(# 30.00 May 1/17)

	Month.	Year.	Cheque No.	Amt.	Remarks.
	April	1916			
	May				
	June				
	July				
	Aug.				
	Sept.				
	Oct.				
	Nov.				
	Dec.				
	Jan.	1917			
	Feb.				
	March				
	April				
Lell	May		M12534	30	150
Lell	June		016513	30	S
Lell	July		H21165	30	Bw
	Aug.		IV 28192	30	6
	Sept.		M37600	30	5
	Oct.		H47719	30	
	Nov.		H50105	30	240.00 D
	Dec.		L55997	30	
	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.				

L. L. Job 4503.—M. & D. 6832

ASSIGNED PAY. MILITIA AND DEFENCE ASSIGNED PAY.

M. F. W. 11.
50m.—6-16.
H. Q. 1772-39-818.

SEPARATION ALLOWANCE

Name Mrs Sarah Ann Cryderman

Address Waterloo Ont

~~Relation to Soldier~~ wife, ~~child or mother~~ Wife $20.00 May 1/17

Name of Soldier Cryderman Ethel

Regtl. No.

Rank N S.

Corps C A M C R H

To what Corps belonging

when called out

PAYMENTS

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

Number _____ Rank N/S

Surname CRYDERMAN

Christian Name ETHEL. MILDRED

Units _____ Theatre of War FRANCE

Late of Service 29/10/17

Remarks _____

Latest Address Niagara Falls.
Ont Can

Roll No. _____

200m.-6-21. B Page 22217

GRATUITY (IMPERIAL)

CHRISTIAN NAME	SURNAME	REG. NO.

SCHEDULE NO.	LINE NO.

UNIT RETIRED OR DISCHARGED FROM

PLACE OF RETIREMENT OR DISCHARGE

DATE RECEIVED FROM OTTAWA	IMPERIAL DEPOT NO.

DATE RECEIVED FROM REG. DEPOT.	DATE FORWARDED TO OTTAWA

868—D.P.—40M-1-12-19.

No. Rank N. Sister. Name Cryderman E.

T. O. S. Unit Base Hospital C.A.M.C.

M. D. 2

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1917	1917		Attached for duty 6-4-17	D.D.197 of 6-4-17.
Apr. 6	Apr. 30	✓	pro. o/s. 24-4-17.	D.D.116 of 25-4-17.

SURNAME. Cryderman

CHRISTIAN NAMES Ethel Mildred

REGL. No. RANK Nursing Sister

UNIT C.A.M.C. (Pur. Sisters.)

FORMER CORPS Nil

CARD NO. 2 X

SOS 23-7-19 Demob
RO 211 TO 11-8-19
Ret to Ont Mil
DO 2279 15-8-19

NEXT OF KIN.

NAMES IN FULL Cryderman, Mrs. Sarah Ann

RELATIONSHIP TO SOLDIER Mother

ADDRESS Walkerton. Ont.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada. Walkerton. Ont DATE Apr. 19th 1893.

PLACE OF ATTESTATION Base Hosp. Toronto. Ont DATE Apr. 6th 1915

R/C. 20-7-19 376 4 N/S.

O

L. L. 10437. M. & D. 7253.

M. F. W. 22. 100M.—11-16. H. Q. 17 2-30-339.

MARRIED SINGLE WIDOWER

TRADE OR CALLING Graduate Nurse RELIGION Methodist

DESCRIPTION.

APPARENT AGE	YEARS	MONTHS	
HEIGHT	FEET	INCHES	
CHEST MEASUREMENT	INCHES	EXPANSION	INCHES
COMPLEXION	EYES	HAIR	
DISTINGUISHING MARKS			

MEDICAL EXAMINATION. PLACE Toronto. Ont. DATE Apr. 6th 1917

Present Address. Walkerton. Ont.

FORM P. 15. 12519—16M—1-3-18 H.W.V.Ld.—3717-18.

ASSIGNED PAY.

UNIT. NAME OF: C.M.C. RATE OF P. AND A.: Pay 2 / F.A. 1 / Messing 1

RANK. DATE AUTHORITY: N 15

NAME. 4

Beneficiary

Address

Amount. $ 50 00 Can

Separation Allowance issued. Yes or No.....

Name Cryderman
Initials E. M.
Bank of Montreal
Trafalgar

DATE 1919	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialed by P.M. in every case.	INITIALS
May	Brought Forward (Sil)							
	Pay (R)		124					
	a P Can				50			
14	Billeting 1-15/18	0134					A 1-14-6	
26	Bank	2593		74		0		
June 18	Pay (R)		120					
	a Pay Can.				50			
	Bank.			70		0		
25 July	Add July P. a.	Bank.		74		Dr 74		
	July Pay R.		124					
	A. P. Loan.				5 c			

RETURNED TO CANADA
L.P.C. TO 31.7.19
TRANSFER TO N.E. LEDGER

Trafer fr Ledg 3. to Ledg 12 14 7/19

FORM P. 15.
12519—16M—1-3-18 H.W.V.Ld.—3717-18.

ASSIGNED PAY.

UNIT.
NAME OF
RATE OF P. AND A.

RANK.
DATE
AUTHORITY

NAME.

Beneficiary
Address

Amount. $
Separation Allowance issued. Yes or No.....

Pay
F.A.
Messing

Name
Initials
Bank

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialed by P.M. in every case.	INITIALS

FORM P. 15.
5986—25M—19/1/17

ASSIGNED PAY.

UNIT.

NAME OF ~~AUTHORITY~~ DATE

RANK.

DATE AUTHORITY

NAME.

Beneficiary

Address can

Amount. $ 50 ××

Separation Allowance issued. Yes or No.....

a k b D. Pay 2×× pd
7 a. 60 "
Mess 1 ×× "

R. S 7/5/17 fr can. b P b

Name bryderman
Initials E. M.
Bank of Montreal
Trafalgar Sq

add outfit allce 1/5/19.

DATE 1918	PARTICULARS		CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS
apl 17	a P can					50.			
	apl Pay (R)			108					
24		Bank	1187.		58				
May 19	May Pay (R)			111 60					
13	A P can.					50.			
23		Bank	2643.		61 60				
June	June Pay (R)			108					
14	A P can.					50.			
24		Bank.	4166		58				
July	July Pay (R)			111 60					
16	A P can					50			
24		Bank	5626		61 60				
Aug	Aug Pay R			111 60					
13	A P can					50			
24		Bank	7258		61 60				
Sep	Sept Pay R.			108					
12	A P can					50			
26		Bank	9187		58				
Oct	Oct Pay R.			111 ~~60~~					
15	A P can					50			
25		Bank	10404		61 60				
Nov. 5	Trav. Allce 22-25 8/18 France		11407					Fcs. 58.70	
"	Trav Pay (R), A P Can.			140		50			
26		Bank	12521		90				

FORM P. 15.
5986—25M—19/1/17

ASSIGNED PAY. | UNIT. NAME OF | DATE | AUTHORITY | RANK. | DATE | AUTHORITY | NAME. A

Beneficiary — Pay 2.00 Pd
Address — Fa 1 00 "
Pressn 1 00 "

Amount. $50. Can
Separation Allowance issued. Yes or No.....

Name Cryderman
Initials E M
Bank of Montreal
Trafalgar Square

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS
								I.D
	Dec. Pay R.		124					
	a. P Can				50			
18	Bank	13792		74				
Jan 22	a. Pcan				50			
	Pay (R)		124					
28	Bank	15564		74				
Feb 7	Ordnance Less of kit 19/5/18	7371					Ex 4.6.6	
10	a. Pay Can						Ordnance	
	Pay (R)		112		50			
26	Bank	17078		62				
18	Had Exs 7-9 10/18 France	2908					Fcs 48.90	
23	Rat re Belg 25-31 5/18 do.	2311					21.	
27	Belg 1-30 9/18 France	25755					90.	
1	Had Exs. 16-19 11/18	30999					58.70	
Mch 17	" 13-15 1/19	00496					2-12-6	
17	Pay (R)		124					
	a. Pay Can				50			
24	Bank.	18657		74				
April	April Pay (R)		120					
	a. Pay Can				50			
17	Trew allce. 10-14 3/19	763					3.7.6.	16.42
26	Bank.	25993		70				
May 3rd	Deduction for a.o allce of one half Compensation Pd for lost Kit 19/5/18 Vo 211			59 19				
5	add out fit allce Vo 189.		100					
	Do Do Bank.	1554		40 81				

FORM P.15
5986—25M—19/1/17

ASSIGNED PAY. | UNIT. NAME OF | DATE | AUTHORITY | RANK. | ~~DATE~~ | AUTHORITY | NAME.

Beneficiary — C.A.M.C.D. — Pay 2nd pd 9d 60 Mess 1.00 — N/S. — 7/5/17 — M. Canada L.P.6.

Address — ✓ Canada.

Name Clyderman

Initials E. W.

Bank of Montreal Trafalgar Sq. 1/18

Amount. $~~30.00~~ 50 1/12/17. ~~1/5/17~~

Separation Allowance issued. Yes or No.....

1917-18

DATE 1917	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS
May 21	P of A @ U.S. rates Mess ~~7/5~~ 7/17 C.M.S.C.O. 622 ~~1/4/17~~ 1/4/17 L.P.6	108075	105 60					
23	Bank	5986		75 60		Cr 30		
June 9th	A.P. Canada (2 months)				60			
" 11.	June Pay (R)		108			78		
22	Bank	9004		78				
July 6th	Trav. Allce 24-27 7/17	91					12.00	£5.9/14.
19	July Pay (R)		111 60					
" 17.	A.P. Canada.				30			
21	Bank	13092		81 60				
Aug. 18	August Pay (R)		111 60					
	A P Can				30	81 60		
21	Bank	17361		81 60				
Sep 7.	Sept Pay (R)		108					
12	A. P. Canada.				30	78		
21	Bank	21863		78				
Oct 9	Octobr Pay (R)		111 60					
10	A. Pay Canada.				30			
21.	Bank	26291		81 60				
Nov. 16	November Pay (R)		108					
15	A. Pay Canada				30			
15	A Pay Canada Spec. Remit	30763			78			
Dec 7	December Pay (R)		111 60					
8	a P. can.				50			
13	Bank	35096		61 60				

Carried For

FORM P.15
5986--25M--19/1/17

ASSIGNED PAY. | UNIT. NAME OF | DATE | AUTHORITY | RANK. | DATE | AUTHORITY | NAME.

Beneficiary
Address

Pay 2 Jpd R/S
Fa .60
Mess 1.00

Name bryderman
Initials E M
Bank of Montreal
Trafalgar Sq 1/18

Amount. $ 50 ban
Separation Allowance issued. Yes or No.....

1917-18

DATE 1918	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS
Jan	Jan Pay (R)		111 60					
15	A P ban				50			
22	Bank R	39501		61 60		✓		
Feb 11	Feb Pay (R)		100 80					
11	A P ban				50			
20	Bank	40996		50 60		✓		
Mar	March Pay (R)		111 60					
11	A P ban				50			
22	Bank			61 60		✓		

Occupational Group 19.
Disposal . . J.

W. S. B.–CLASS A

PROCEEDINGS OF AN OFFICER OR NURSING SISTER STRUCK OFF STRENGTH OF THE CANADIAN EXPEDITIONARY FORCE

1. RANK: Nursing Sister
2. NAME: CRYDERMAN ETHEL MILDRED
3. UNIT: CAMC
4. DATE STRUCK OFF STRENGTH: SOS 23-7-19 | PLACE: RO 2117-19
5. REASON: Demobilization
6. AUTHORITY:
7. PROPOSED RESIDENCE: Niagara Falls, Ont. Canada

This folder should contain the following documents:

1. Declaration Paper, M. F. W. 51, or Attestation Paper, M. F. W. 23.
2. Casualty Form, A. F. B. 103 or M. F. W. 54.
3. Medical History Sheet, M. F. B. 313 or A. F. B. 178.
4. Proceedings of Medical Boards, A. F. A. 179 or M. F. B. 227.
5. Medical Report M. F. W. 129.
6. Dental History Sheet, M. F. B. 465.
7. Last Pay Certificate, M. F. W. 44.
8. Certificate as to Missing Documents.

1. [illegible] W. 51), or [illegible] W. 23).
2. Casualty Form [illegible].
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. [illegible] off Strength (M.F.W. 2551).
7. Last Pay Certificate (P.41)
8. War [illegible] Gratuity Form (M.F.W. 2595).
9. Sundry Documents.

Dispersal Ass

M. F. W. 2591.
20M—11-18.
1772-39-1380.

W/S Cryderman Ethel M

Group NA

Checked by No. 13

Date 11/7/9

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch C 13282

OVERSEAS CONTINGENTS

Date of Assignment May 1/17

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

~~30~~	"50 1-12-17		

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank M.S. Promoted Reverted Discharge

Soldier's Name Ethel M. Cryderman

Battalion C. A. M. C., B. H.

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name Mrs. Sarah A. Cryderman

Address Walkerton, Ont.

Change of Address

1

2

3

4

4033-E-7.

	Date		Cheque No.	Amount S/A	Amount A/P	Total		REMARKS
	1917 Dec 31				240 -	240 -		
1918.	Jan	C	70292		30. -	30. -	mc	
	Feb	U	71946		90	90	Madea 5-2/18	(1) 2m 20 12/17 Sam 8 1/18
	Mch	A	119889		50	50	J2L	A to pays $50 from 1-12-17 (1) 2m 20 13/17
	Apl	B	24407		50	50		
	May	M	18533		50	50		
	June	J	22166		50	50		
	July	S	33416		50	50		
	Aug	9	35913		50	50		
	Sept	L	45340		50	50		
	Oct	M	53277		50	50		
	Nov	D	61336		50	50		
	Dec	R	65126		50	50		
	Jan	M	73584		50	50		
	Feby	P	78898		50	50		
	Mch	H	91078		50	50		
	Apr.	K	3532		50	50		
	MAY	H	8050		50	50		
	JUN	I	9631		50	50		
	JUL	D	12836		50	50	✓	
					1210	1210		

AUDITED - WH 26/7/19

A/c Closed 21-7-19

Ret'd per Royal George

Date 23/7/19 M.F.W.187 24/7/19

Closed C.O. Collier M.D.

LH. 103824 Destroy

M. F. W. 128
400M.—6-17—172-39-1141
L. L. 22320—M. & D. 7983.

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.—6-47—1772-39-1141
L. L. 22320—M. & D. 1933.

288 Royal George 22/7/19

AUDITOR | PAYMASTER

M. OR S. | PROMOTIONS, REDUCTIONS AND REVERSIONS AFFECTING DAILY RATE OF PAY AND ALLOWANCES | REGT. No. | RANK N/S. | NAME (IN FULL) CRYD ERMAN ETHEL MILDRED 23

NEXT OF KIN | RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? No. ✓ | DATE EFFECTIVE

TO WHOM PAID | RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F. C.A.M.C. | IF IN P.F. WHAT UNIT? Bank of Commerce, Niagara Falls, Ont.

PLACE OF ATTESTATION ✓ | TRANSFERRED TO | DATE | AUTHORITY

DATE OF ATTESTATION 6/4/17 ✓ | TRANSFERRED TO | DATE | AUTHORITY

ASSIGNED PAY $ 50 00 ✓ | DATE EFFECTIVE 1/8/19 ✓

PAYABLE TO Mrs Sarah A. Cryderman | RELATIONSHIP | ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS Walkerton, Ont. ✓

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE

DISCHARGED | PLACE | DATE 23-7-19 ✓ | REASON Demob | AUTHORITY DO 227 | IF ENTITLED TO POST DISCHARGE PAY Yes

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	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.			TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT																																			
31/7/19 ✓					NIL ✓													90 00 ✓										20 00 ✓									Adj. Cond. P.M. Reb Mess 12-31/7/19 ✓
Aug 1 ✓	31 ✓																											110 00 ✓				110 00 ✓		110 00 ✓		
																												24 ✓				134 ✓		134 ✓		T.O.S. D.O.2.11
			W.S.G. ✓																									W.S.C.						AMOUNT DUE SOLDIER DEPENDENT		Ofc Pay 24-31-7-19 ✓
153 days	3 —		459 — ✓						459 — ✓																			134 — ✓				134 — ✓		325 — ✓		
																		AR 96. Aug. 21. 1045666.										93 — ✓				227 — ✓		232 — ✓		
																		A.R. 122. Sep. 22. 1048653.										90 — ✓				317 — ✓		142 — ✓		W. S. G. PAID IN FULL
																		AR 145 Oct 20 1046077 ✓										49 — ✓				366 — ✓		93 — ✓		
																		172 Nov 20 1750855										93 — ✓				459 — ✓		0 ✓		LIEUT. FOR PAYMASTER WAR SERVICE GRATUITY
			459 — ✓						459 — ✓																			459 — ✓				459 — ✓		Adj		

100M-1-19.—L. L. 53962-M. & D. 9723.
M. F. W. 2596.
1772-39-1300.