

AIR 719

✓
2-7/19/16

ATTESTATION PAPER.

No.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name?.....
2. In what Town, Township or Parish, and in what Country were you born?.....
3. What is the name of your next-of-kin?.....
4. What is the address of your next-of-kin?.....
5. What is the date of your birth?.....
6. What is your Trade or Calling?.....
7. Are you married?.....
8. Are you willing to be vaccinated or re-vaccinated?.....
9. Do you now belong to the Active Militia?.....
10. Have you ever served in any Military Force?..
If so, state particulars of former Service.
11. Do you understand the nature and terms of your engagement?.....
12. Are you willing to be attested to serve in the }
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? }

Mervyn Thornton Daniel
Toronto, Ont.
(Mother) Mrs George Daniel
179 Adelaide St. Toronto
29th Sept. 1894
Driver.
No.
No.
No.
yes.
yes.
M. J. Daniel (Signature of Man).
G. W. Kennedy (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

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

M. J. Daniel (Signature of Recruit)
 Date *1st March* 191*5* *G. W. Kennedy* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

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

M. J. Daniel (Signature of Recruit)
 Date *1st March* 191*5* *G. W. Kennedy* (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 *Hindsay* this *1st* day of *March* 191*5*
G. W. Kennedy (Signature of Justice)

I certify that the above is a true copy of the Attestation of the above-named Recruit.
[Signature] (Approving Officer)

COM. 32nd BN. C.E.F.

Description of Merwyn Horton Daniel on Enlistment.

Apparent Age 31 years 6 months.
 (To be determined according to the instructions given in the Regulations for Army Medical Services.)

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

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

Height 5 ft. 7 1/2 ins.

Chest measurement { Girth when fully expanded 35 1/2 ins.
 Range of expansion 2 ins.

Complexion Ruddy

Eyes Hazel

Hair Black

Tattoo Right Forearm Girls Head

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

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 March 12 1910

J. McCulloch

Place Rindsey

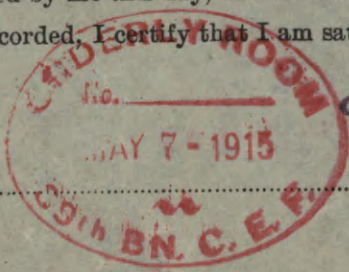
Medical Officer.

*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.

Merwyn Horton Daniel 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.



J. McCulloch
 LT. COL. (Signature of Officer)

COM. 39TH BN. C.E.F.

Date 1910

REGIMENTAL DOCUMENTS

NAME Daniel Mervyn T. (7e) REGT. NO. 412719 UNIT 397th Bn. H. Q. FILE NO. _____

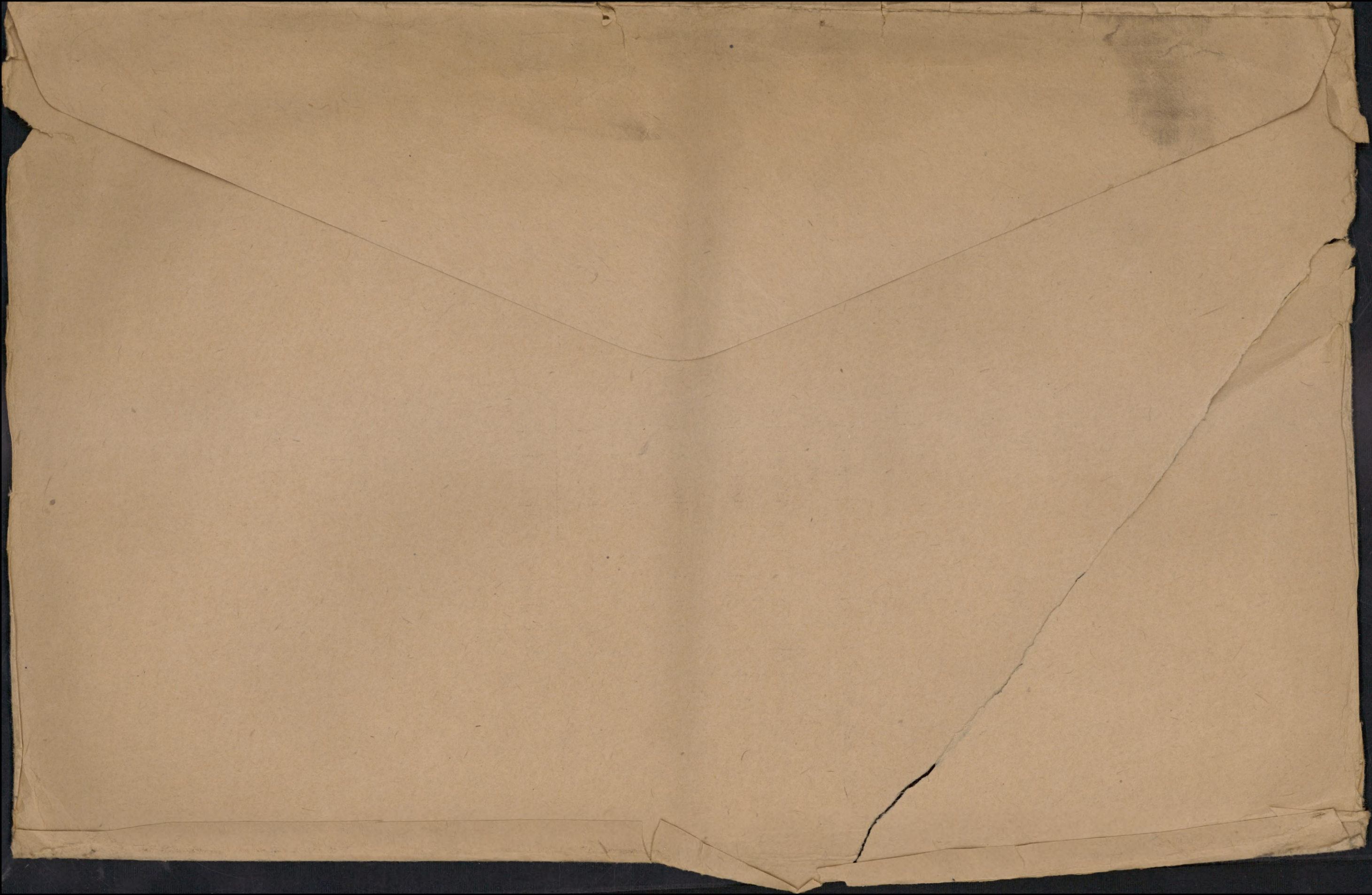
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CONTENTS

CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
ATTESTATION PAPER (M.F.W. 23, 133, or 51)					
4 CASUALTY FORM (M.F.W. 54 or A.F.B. 103)		leaf to B.P.L.	25/11/19	B.P.L. Spec 1257	DEATH Category
TRAINING HISTORY SHEET (M.F.W. 113)					
1 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)				C2083	
3 MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					
1 DENTAL HISTORY SHEET (M.F.B. 465) <i>cont</i>					DISCHARGE Category
3 MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					<i>Demobil</i>
MEDICAL EXAMINATION (M.F.W. 129)					
1 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)					
LAST PAY CERTIFICATE (M.F.W. 44)					DESERTION
1 PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
PARTICULARS OF CHARACTER (A.F.W. 3225)					
1 COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
1 <i>Diary - cont.</i>					
1 <i>A. P. B. 241</i>					
1 <i>A. P. B. 117</i>					
4 <i>Ex. Stan. m.B.</i>					
54 <i>Misc.</i>					
1 <i>Gen. card</i>					
1 <i>PR. 49</i>					
1 <i>A. P. B. 1237</i>					

H

7-2
16-2
28-2



412719

I.D. number
No. d'identification

Daniel

Surname
Nom de famille

Mervyn T

Given names
Prénoms

PERSONNEL RECORDS CENTRE
CENTRE DES DOCUMENTS DU
PERSONNEL

Location
Lieu

2287



1st sheet of Record

✓
R-122.

Rank _____ Name **DANIEL Mervyn Thornton** Reg'l No. **412719**
 Unit **39th Bn** If in perm. Corps, }
 What Unit? } Married or Single **Single**
 Place and Date of Enlistment **Lindsay, 1 March 1915** Place of Birth **Canada**
 Name and Address, Next-of-Kin **Mrs G. Daniel** Relationship **Mother**
179 Ashdale Ave, Toronto, Ont.
 Assigned Pay Monthly \$ _____ Payable to _____ Relationship _____
 Separation Allowance \$ _____ Payable to _____ Relationship _____

Discharge, Date and Place Reason Character

Report		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place	Date	REMARKS Taken from Official Documents
Date	From whom received				
		Arrived	England	7-15	
	9 ⁸ / ₁₁ O.C. 39 th	Awarded 10 days F.P. N° 2	Shorcliffe	9 ⁸ / ₁₁	Part II Do # 137
10/9.15	"	Trans to 18 th Bn	"	10/9.15	Part II # 164
18.9.15	O.C. 18	Embarked ("C" Co.)	Folkestone	14.9.15	Inform Form
9.11.15	W.O.	G.S.W. Lt Col (Self Inflicted) Special Hospital	Boscheppe	24.10.15	Cas. List 68 O.N.
15.11.15	"	26 th General Hospital	Etaples	8.11.15	and Cas. dist 71 and 72
27.11.15	O.C. 18 th	Awaiting trial from 25/10/15 28 days for self inflicted wound 11/15			Part II no. 10 (Page 3)
8.12.15	W.O.	Fract. 2 nd meta. d. Foot (Right) Bevan Mil. Hospital	Sandgate	4.12.15	Cas List 89
18.12.15	"	Central Mil. Hospital	Shorcliffe	6.12.15	" " 94
11.12.15	O.C. 18	Invald. transfd to England and struck off strength from		4.12.15	Part II 12
14.12.15	O.C. 36	Transfd to 36 th Bn	W Sandling	4.12.15	" " 218
8.1.16	O.A. 112 (18 th)	Adm. Con. Con. 4p.	Monks Horton.	4.1.16	G.S.W. l. foot self inflicted

Report		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place	Date	REMARKS Taken from Official Documents
Date	From whom received				
17.2.16	th 36 th from 66 ab.			15.2.16	Pt II 218
16.2.16	66 ab. Taken on strength			15.2.16	5
11-4-16	18 th	Discharged from 4 th Coy	4 th Coy Horton	8-2-16	C.L. B. 41 S.M. K. Post.
17.2.16	18 th 36 th	Attached to 4 th Coy 36 th Bn for retires	W. Sandling	15.2.16	Pt II D.O. 48.
11.5.16	39 th Bn	J.O.S. from C.Cal.	"	8.5.16	Pt II O. 113.
12.5.16		10 days 7 th 2 breaking Camp & remaining absent without leave from 6 th 16 to 7 th 16. 10 days pay and 2 days Pt. A.	"	11 th 16	Pt II 114
10.6.16	O.B. 39 th	Quartermasters Store issues on repayment of 9-9	H. Sandling	10.6.16	P. II 138
28.6.16	AB 39 th	S.O.S. to reinforce 20 th B.N.	France	28.6.16	P. II 153.
7.7.16	20 th Bn	J.O.S. from 39 th Bn	"	29.6.16	" 27.
31.7.16		Transf to 60 th Batt	"	21/7/16	" 30
31.7.16	6 th abn.	Taken on strength.	Field.	27.7.16	" 21. 60
15.9.16	COB.	adm: #6 Cam. fd. amb.	"	8.8.16	C. L. 148 "P. N. O"
20.10.16		Rejoined unit.	"	1.10.16	— 178 — ad —
17.1.17	COJ "	att. to 3 rd D.A.C.	"	30/11/16	Pt II D.O. 6.-
8-2-17.	3 rd D.A.C.	Attached From 60. Bn.	do.	30-11-16	" " 24.
9/3/17.	do.	Case to be attached to the Column.	do	17/2/17.	" " 41.
14-7-17	60 th Batt	adm no 2 bus from Stat	"	14-7-17	Ch. # 283



2nd sheet. 87th Bn

Horsley ~~*Blair*~~ *Army*
MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
Year 1916	412419	Pte	Daniels	Mr. J. Mervyn Thornton Age. Home Front Service. 1 3/12 2/12 X 4/2
Station and Date.	Disease <i>Fracture L. foot (Self inflicted)</i>			
<i>Moulton Norton</i> 3/1/16	<i>Paraded sick Oct 15 - in France Sent to Hazelbrook for 2 weeks - Clyde 3 weeks Bevan sanders 1 week Hillman Janssen 3 weeks to Moulton Norton.</i>			
	<i>Present Condition some thickening over site of wound not much pain on movement - Complains of some discomfort in angle on movement</i>			
	<i>Recommended to Blair <i>Horsley</i></i>			
	<i>Inspected all cases.</i>			
4/2/16	<i>Returned from Hastings</i>			
7/2/16	<i>Det.</i>	<i>Return bound</i>		
		<i>Malgut first Capt</i>		
		<i>Came.</i>		

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

4/1/16

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	412719	Pte	Daniels	M. J.
		Unit.	Age.	Service.
Year Hermitage Hastings	18 Batt		22	1 year 6 month $\frac{3}{12}$
Station and Date.	Disease Fract L. Foot Self Inflicted			
	Discharged well. William Daint. M.D.			

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

ORIGINAL.

#Wing Coy 8390

MEDICAL HISTORY SHEET.

86
417719
53

Surname

Daniel

Christian Name

Mervyn Thornton

Examined

on 9th day of March 1915

at

Lindsay

Birthplace

City or Town Toronto

County

Ontario

Apparent age

21 years

Trade or occupation

Driver

Height

5 Feet 7 1/2 Inches

Weight

149 Lbs.

Chest measurement

Minimum 33 1/2 inches

Maximum expansion 35 1/2 inches

Physical development

Good

Small-Pox Marks

None

Vaccination Marks

Arm Right None Left Two

Number Two

When Vaccinated last

March 1st 1915

(a) Marks indicating congenital peculiarities or previous

disease Tattoo right arm & left hand

(b) Slight defects but not sufficient to cause rejection

None

Approved by

J McCulloch

Rank

Li

M.O.

Date

Fit or Unfit

EXAMINED FOR RE-ENGAGEMENT,

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

Date

Result

VACCINATIONS.

1-3-15 Good J McCulloch Li M.O.

Date

Result

ANTI-TYPHOID INOCULATIONS, ETC.

16-3-15 Good J McCulloch M.O.

26-3-15 J. Carron M.O.

Enlisted on

26th day of

February 1915

at

Lindsay

Joined on enlistment

Overseas Coy
45th Victoria Regt

Transferred to..

18th Can Bn

412719

10-9-15

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.

DATE.

DISEASE.

RESULT.

15.6.16

Fit for duty

R.M. Fergusson
Capt. President.

WITBY CAMP, SURREY

15-7-1919

1919

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.

Record

Christian Name *Megyeu Shorn*
 Surname *Lavel*

STATION.	Date of Arrival at the Station.	DATES OF						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.
		Admission into Hospital.			Discharge from Hospital.						
		Day	Month	Year	Day	Month	Year				
Berau Military Hosp: Sandgate Hill Hq. Minster Monks Horton		4	12	15	13	12	15	fract. 2 ^d metatarsal R foot. (q.s.c.)	9	Self-inflicted w: injury. Withheld from Minster	Attached 13/1/14
Monks Horton, Kent		3	1	16	8	2	16	Frac. Lft. (self inflicted)	36	Paraded sick. Oct. 15th in France. Sent to Hazelbrook for 2 wks. Etaples 3 wks. Bevan M.H. Sandgate, 1 wk. Hillhouse Minster, 3 wks. To M. Horton Present condition, Some thickening over site of wound. Not much pain on movement. Complains of some discomfort in ankle on movement. Recommended to Hastings. 7-2-16. Returned from Hastings. Present condition, - Fit. Discharged, 8-2-16 to 48th Bn. W. Sandling.	<i>Blann May MHS</i> <i>J. Z Campbell aff</i>
C. Fld Amb		8	8	16	1	10	16	P.O.O.	53	High Unit Regt. 4179. Insulation	DM Case
NO. 38 CANADIAN GENERAL HOSPITAL, MOORE BARRACKS, SHORNOLIFFE		15	5	19	16	6	19	U.D. 41	32	Expected about April 1st 1919. On admission had mucopurulent urethral discharge since 24/5/19 positive for gonococci. Urethroscopic exam 19/5/19 showed folliculitis anterior urethrae treatment Lorications section sounds prostatic examination cultures negative for G.C. since 24/7/19	Duplicate Medical History Sheet posted to here. Medical Register & Record Book
		16	6	19	5	7	19	Folliculitis	19	cat's gut persists Discharged as gleet	BR Phlegmest reg. C/MC

cat's gut persists Discharged as gleet

TEMPORARY SHEET
CASUALTY FORM

UNIT.....

39th Inf

NO. 412719. RANK. NAME

Private M.I.

T. O. S. of Halifax Depot clearing services command
part II Order No. 258 Dated 15 9 19

S. O. S. of Halifax Depot clearing services command
part II Order No. 258 Dated 15 9 19
16 9 19
CAPT & ADJUTANT HALIFAX DEPOT
BEARING SERVICE COMMAND

[Handwritten signature]

NO LINE

NAME

.....

IS ONLY ONE FILE



EXAMINATION

BY

STANDING MEDICAL BOARD, SHORNCLIFFE.

June 15th 1916

No. H12 719 Unit. 39th Batt Rank. Pte

Name. Daniels M. J. Age. 22 yrs

Examination held at. West Sandling

DISABILITY:
Overseas—Local.
(scratch one out)

Old G. S. W. left foot

Present Condition

Wound entirely healed,
no disability

Board recommends:—

- 1. Fit for Duty. yes
- 2. Fit for duty after.....weeks' physical training.
- 3. Fit for light duty.....weeks.
- 4. Fit for permanent base duty.
- 5. Discharge.



Signatures:—

R. W. Ferguson Capt President.

Walter Ross Capt

APPROVED

17 JUN 1916

Shorncliffe.....1916.

S. L. Walker Captain.

EXAMINATION

STANDING MEDICAL BOARD, SHORCLIFFE

15/11

General Practitioner

APPROVED
15/11

Signature

CANADIAN ARMY DENTAL CORPS, O.M.F.C. DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

**DIRECTIONS TO
DENTAL OFFICERS**

NAME OF SOLDIER (Block Letters) DANIEL MT
 REGIMENT 87th BATTN RANK PTE. No. 412719
 Date of Examination in England 8.7.19 Date of Examination in France _____

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 30
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 Yes
- (b) In England Yes
- (c) In France Yes

Signature of Dental Officer N. S. H. ... Capt.



EXAMINATION

BY

STANDING MEDICAL BOARD, SHORNCLIFFE.

Apr 20

1916

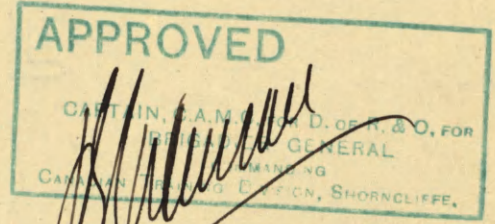
No. *412719* Unit *36th Batt.* Rank *Pte.*

Name *Daniel M. J.* Age *22.*

Examination held at *West Sandling*

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

Present Condition



Board recommends:—

- 1. Fit for Duty. *y*
- 2. Fit for duty after.....weeks physical training. _____
- 3. Fit for light duty.....weeks. _____
- 4. Fit for permanent base duty. _____
- 5. Discharge. _____

Signatures:

W. B. ...

President.

Members

S. U. ...

APPROVED

26 APR 1916

Shorncliffe.....1916.

A. D. ...

Captain.

A.D. A.D.M.S.,
Canadian Training Division.

EXAMINATION

BY

STANDING MEDICAL BOARD, SHORNICLIEFF

1916

No.

Unit

Rank

Name

Age

Examination held at

Classification

Overseas work

Remarks

Present Condition

BRITISH

IVORY

WORK

Board recommends:

1. Fit for Duty

2. Fit for duty after weeks physical training

3. Fit for light duty weeks

4. Fit for permanent base duty

5. Discharge

Signature

President

Member

APPROVED

Signature

Captain

HEAD, ADM. S. COUNCIL TRAINING DIVISION

RE-EXAMINATION

BY

STANDING MEDICAL BOARD,

SHORNCLIFFE.

Feb 29 1916.

Number 412719

Rank Pte

Name Daniel M. G.

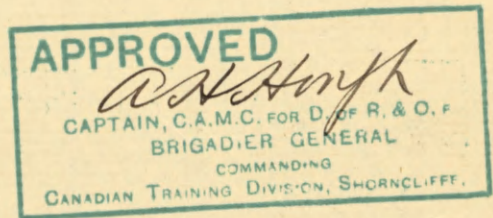
Unit 18th Batt.

DISABILITY:—

G. S. N. Lt Foot.

PRESENT CONDITION:—

Nervousness.



BOARD RECOMMENDS:—

- 1. Fit for Duty?
- 2. Fit for Permanent Light Duty?
- 3. Fit for Temporary Light Duty } 6 weeks
and Physical Exercise? }
- 4. Discharge?

SIGNATURES:—

Members { W. Bethune Capt. Pres.
A. Swan Capt. Cam.

Approved.

SHORNCLIFFE, 2nd March 1916.

E. M. Keesey Maj. Capt.
for A/D.A.D.M.S.
Canadian Training Division.

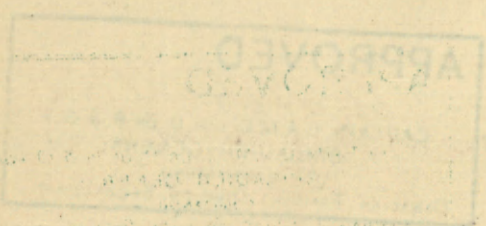
RE-EXAMINATION
BY
STANDING MEDICAL BOARD

SHORNCLEIFFE

Name: _____
Number: _____
Rank: _____
Unit: _____

DISABILITY

PRESENT CONDITION



BOARD RECOMMENDS

1. Fit for Duty
2. Fit for Permanent Light Duty
3. Fit for Temporary Light Duty and Hospital Treatment
4. Discharge

Members

Approved

Shorncleiffe _____ 1910

AND A.D.M.S.
Captain Training Division

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

M. F. W. 12a.
 25m.-10-17.
 1772-39-319.

Sheet No. 2.....
 (Assignee)

Name of Soldier W. S. Daniel

PAYMENTS.

L. L. 28913-M. & D. 5368.

Month.	Year.	Cheque No.	Amt.	Remarks.
			135	
April	1916	P. 2796	15	
May		P. 2926	15	
June		P. 6171	15	
July		P. 6093	15	
Aug.		K 13467	15	
Sept.		E 15808	15	
Oct.		E 20164	15	
Nov.		m 25203	15	
Dec.		J. 31236	15	
Jan.	1917	J. 38713	15	
Feb.		J. 44021	15	
March		K 49876	15	
April		J. 1202	15	
May		J. 12434	25	
June		O 16740	20	
July		K 21392	20	
Aug.		P 28162	20	
Sept.		P. 34797	20	
Oct.		C 40980	20	
Nov.		Q 53624	20	
Dec.		Q. 56655	20	
Jan.	1918	Q 66748	20	
Feb.		E 92196	20	
March		A 121342	20	
April		B 3797	20	
May		O 12376	20	
June		J 23579	20	
July		Q 28209	20	

635

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

PAYMENTS.

Name of Soldier _____

Month.	Year.	Cheque No.	Amt.
Aug.	1918	J 37394	20
Sept.		L 46910	20
Oct.		3 54848	20
Nov.		9 54289	20
Dec.		J 62214	20
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.			

635

Effective 1.1.19.

OK.
 Checked by A.S. J. 2.19.

87 Bn

~~No Card A~~

Canadian Pay Office.
 Received by Pay II.

JAN 24 1919

and Passed for Action to
 Sub-Div. Date

A.		Accts.
B.		Bank
C.		Disch.
D.	✓	Invest
E.		Obs.
F.		P. Bks
G.		P. n S.S.
H.		Sep/C
K.		
L.		
M.		
P.		

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

To Whom

By Whom Assigned

Address

Regtl. No.

Rank

Corps

M. Y. Daniel

412719

Plc

39 Batt

Rate

15⁰⁰

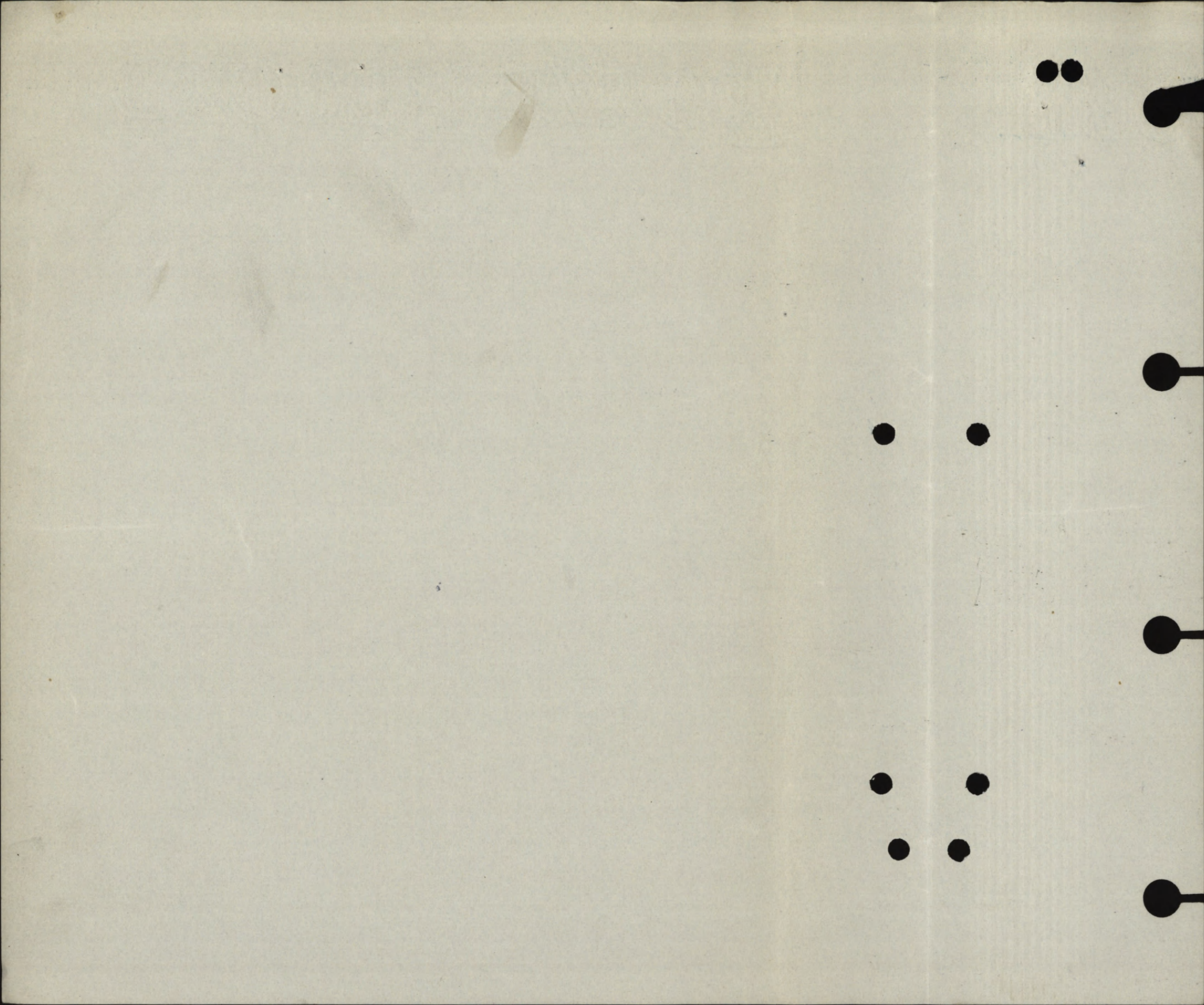
July 1. 1915

20⁰⁰

April 1 - 1914

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July		Q 3879.	15	
Aug.		R. 4475	15	
Sept.		U 4089	15	
Oct.		V 6215	15	
Nov.		Y 3026	15	
Dec.		S 7218	15	
Jan.	1916	Z 2836	15	
Feb.		K 12869	15	
March		H 16021	15	



Rank

Name

DANIEL Mervyn Thornton

Reg'l No

12719

Unit

39th Bn

If in perm. Corps,
What Unit?

Married or Single

Single

Place and Date of Enlistment

Lindsay, 1 March 1915

Place of Birth

Canada

Name and Address, Next-of-Kin

Mrs G. Daniel

Relationship

Mother

275
170 Ashdale Ave, Toronto, Ont.Assigned Pay Monthly \$15^{xx}/₁₀₀

Payable to

next of kin

Relationship

Separation Allowance \$

Payable to

Relationship

Discharge, Date and Place

Reason

Character

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.	
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date							
July 1	July 31	31	100	31	31	10	310		3410	31st		1750	15		3250	160		
Aug 1	Aug 31	31	100	31	31	10	310	47	3617 ⁶⁸ ₁₀₉			1338	1500	11.00	3938	321	adj. in exch. 21 days at 139137	
Sept 1	Sept 10	10	10	100	10	10	100	321	321						779	164	21 days at 139137	
Balance Sept 10 th 1915																		
11/10	30/9	20	1	20	20	10	2		22	402		268	15		1768	1211		
1/10	3/10	31		31	31		310		3410	404		262	15		1462	2859		
1/11	30/11	30		30	30		3		33	4186 ¹⁹⁶⁵		892	15	28	5192	967	28 days P.P. #101027/11	
1/12	30/12	30		30	30		2		32				15		15	1667	Transf. to 363 Bn. 5/12/15	
Dec 21	31	11	1	11	11	10	110		1210			122				2847	3050. 218 4/12/15	
Jan 1	31	31	1	31	31	10	310		3720			121	15		1986	4301		
Feb 1	15	15	1	15	15	10	150		1650			243			2231	3720	20.48 trans to CCAC 16/2/16	
16-	31/3	145	1	45	45	10	450	47	4950			487	15		5649	3021		
				275			2750					190	76	135	3900			
		275		275			2750	47	30297			98	76	135	39	27276	3021	

47

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

M. F. W. 12.
25m-4-17.
H. Q. 1772-39-819.

To Whom

Mrs G. Daniel

By Whom Assigned

Daniel M. F.

Address

245 Ashdale Ave
Toronto
Ont

Regtl. No.

412719

Rank

Plt

Corps

60th Bn

Rate \$ 30 00

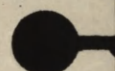
SPECIAL REMITTANCE

Pchd # 364. 4. 5. 17

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May		A 10497	30 -	
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				





MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

To Whom *Mrs. G. Daniel*
Address *245 Ashdale Ave*
Toronto Ont.

By Whom Assigned *Daniel M. S*
Regtl. No. *(412 719)*
Rank *Pte*
Corps *39 Batt. C.C.*

Rate ~~*\$15.00*~~
0 \$20.00 *JULY 1915*
apl. 1st/17

PAYMENTS

ENGLISH

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			<i>① 2M 29/3/17 apd 4/5/17</i>
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July		<i>Q3879</i>	<i>15 00</i>	
Aug.		<i>P.4475</i>	<i>15 —</i>	
Sept.		<i>24688</i>	<i>15 —</i>	
Oct.		<i>V6715</i>	<i>15 —</i>	
Nov.		<i>Q3016</i>	<i>15 —</i>	
Dec.		<i>Y17218</i>	<i>15 —</i>	
Jan.	1916	<i>29836</i>	<i>15 —</i>	
Feb.		<i>K. 12869</i>	<i>15 —</i>	
March		<i>K16021</i>	<i>15 —</i>	



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MILITIA AND DEFENCE
ASSIGNED PAY

M. F. W. 12a.
 60m.—12-15.
 1772—39—819.

OVERSEAS CONTINGENTS

Sheet No. 2. Mrs G Daniel

Name of Soldier Daniel M. J.
C. Co. 39th Batt

PAYMENTS.

L. L. Job 89002.—Req. 6213.

Month.	Year.	Cheque No.	Amt.	Remarks
		P 2796	15	#1500 20.00 Apr. 27/17
April	1916	P 1124	15	P 139 Cane
May		P 2926	15	
June		P 6171	15	
July		P 6093	15	
Aug.		P 12467	15	
Sept.		C. 15808	15	
Oct.		E. 20164	15	
Nov.		M 25203	15	
Dec.		J 31236	15	
Jan.	1917	J 38713	15	
Feb.		J 44021	15	15-R-
March		K 49876	15	
April		J 1202	15	15-E.
May		T 12434 J 7615	25 15	25.00 May to ady cancelled due
June		O 16740	20	20.00 future
July		H 21392	20	20.00
Aug.		J 28162	20	20.00
Sept.		P 24747	20	20.00
Oct.		C 40950	20	20.00
Nov.		S 53624	20	
Dec.		R 56655	20	
Jan.	1918			495-
Feb.				
March				
April				
May				
June				
July				

12

12

495-

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

PAYMENTS.

Name of Soldier _____

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

Name Daniel, Mervyn, Rank Private.

Reg. No. 412719.

8/11 Late
 Unit 60th. Battalion.

Next of Kin Canada.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
8-8-16.	No. 6 Can. Field Amb.		P.U.O.	A148.		
1-10	Rejoined Unit		do	A178		
8-2-17.	No 10 C.F. Amb.		P.U.O.	A283		
11-2-17	Discharged 84 Bn. (Late 60th)		do	A.283		

SURNAME.

Daniel

649-D-736

44

CARD NO.

✓

CHRISTIAN NAMES

Mervyn Thornton

FOLL.

E.P.

REGL. No.

412719

RANK

Pte.

UNIT

3rd. 18th

Bn.

FORMER CORPS

nil.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Daniel, Mrs George

RELATIONSHIP TO SOLDIER

Mother

ADDRESS

245 Ashdale Ave,

Toronto, Ont.,

serv. 24-7-18

COUNTRY OF BIRTH

Canada, Toronto, Ont.

DATE

Sep. 29th. 1894

PLACE OF ATTESTATION

Lindsay Ont.

DATE

Mar. 1st. 1915

o/s. 17-6-15

m/s 5



Plt 12-9-19 403 Pte.

From Montreal per  S. S. Missanabic 17-6-15

MARRIED

SINGLE

Yes

WIDOWER

TRADE OR CALLING

Driver

RELIGION

Baptist.

DESCRIPTION.

APPARENT AGE

21

YEARS

6

MONTHS

HEIGHT

5

FEET

7 1/2

INCHES

CHEST MEASUREMENT

35 1/2

INCHES

EXPANSION

2

INCHES

COMPLEXION

Ruddy

EYES

Hazel

HAIR

Black.

DISTINGUISHING MARKS

Tattoo R. forearm, girls head.

MEDICAL EXAMINATION.

PLACE

Lindsay Ont.

DATE

Mar. 12d. 1915

Present address, not stated.

Name DANIEL M.T. Rank PTE.

Reg. No.412719.

Unit 18th.BATTALION. 2nd. CANADIAN DIVISION.

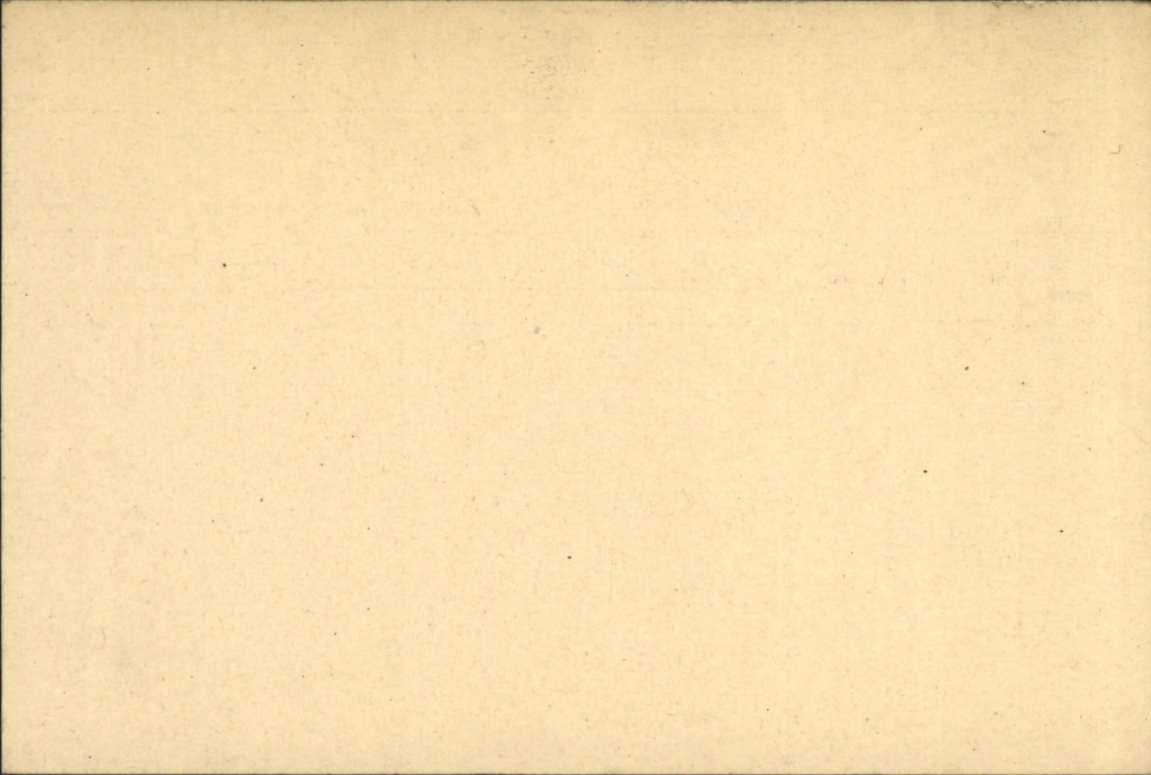
Next of Kin CANADA.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1915.					M.	
24 10.	SPECIAL HOSPITAL.	BOESCHEPE.	G.S.W.L.			
8-11			Foot.	68.	1882.	
8-11	26th.Gen.Hosp.	Etaples.	<i>Self-inflicted</i> Ditto.	72		
4-12.	Bevan Mil.Hosp.	Sandgate.	"	89		
6-12	Gen.Mil. Hosp.	SHorncliffe.	" " "	"94		
<u>1916</u>						
4-1	Can.Conv.Hosp.	Monks-Horton.	Ditto.	112		
8 2	Discharged		do	B41		

No. *a.12719*RANK *Plt*NAME *Daniel N. J.*T. O. S. *26/3/15 (10036-27/3/15)* UNIT *39th Battalion.*M. D. *3*

			PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
PAID FROM	PAID TO	SIG. OR REC'T	PARTICULARS	AUTHORITY
<i>1915</i>	<i>1915</i>			
<i>Mar. 26</i>	<i>Mar. 31</i>	<i>v</i>		
<i>Apr 1</i>	<i>Apr 30</i>	<i>v</i>		
<i>May</i>		<i>v</i>		
<i>June</i>		<i>v</i>		
<i>July</i>		<i>v</i>		

UNIT SAILED
JUN 24 1915



86
Number 412 719

Rank

Pte

Surname

DANIEL

Christian Name

Mervyn Horton

Units

20 Bn

Can Coy

Theatre of War

France

Date of Service

28-6-16

Remarks

Latest Address

245-Ashdale Ave

Toronto

Ont

Roll No.

200m.-2-21.M.

Page 21282

REGT. NO. RANK NAME

UNIT AGE SERIAL NO. IN A. AND D.

TOTAL SERVICE WHERE DATE AND PLACE OF OR
AND HOW LONG

DISEASE OR INJURY

OPERATIONS.....

RESULT OF OPERATIONS.....

(A) DATE OF ARRIVAL AT HOSPITAL AS AN ADMISSION.....

(B) AS A TRANSFER (STATE WHERE FROM).....
NAME OF HOSPITAL

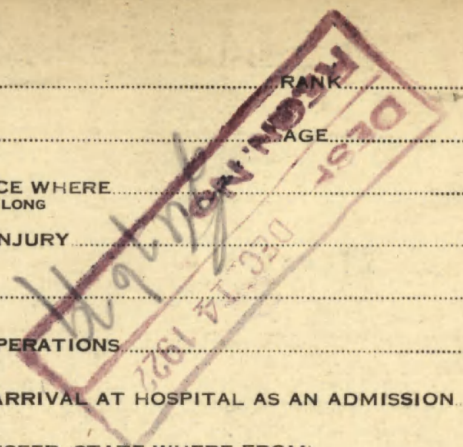
DATE OF DISCHARGE TO UNIT..... IN CA

DATE OF DISCHARGE AS AN INVALID.....

DATE OF DEATH.....

DATE OF TRANSFER (STATE WHERE TO).....
NAME OF HOSPITAL

OTHER INDEPENDENT CONDITIONS DIAGNOSED



Surname: Daniel Christian Name or Names: M. J. Reg. No.: 412719

Rank: Pfc Unit: 18th Batt. Que (Dep.) Co. Troop Batty.

Hospital: # Special Hosp Boeschepe Date of Admission: 24-10-15

Transferred to: 26. Gen: Etaples Hosp: 8-11-15

Bevan Mil Candgate Hosp: 4-12-15

Cuba Mil Capt: Shoveliffe Hosp: 6-12-15

Can Conv. Honks Norton Hosp: 4-1-16

Diagnosis: GSW L. foot G.S.W. Foot (self inflicted)

(1) Later Diagnosis (if changed)

(2)

(3)

P210 P.V.O. V.D.G.

Additional Diagnoses: If more than one state present

DISPOSITION

Date

Dis. 8-2-16

Ref. Unit 1-10-16 Disc. 11-2-17

REMARKS

C.L. 9-11-15 #68

C.L. 15-11-15 72.

- 13-11-15. 71.

8-12-15. 89

Ch. 15-12-15 #94

- 8-1-16. 112.

- 11-4-16. B.H.

15-9-16 A.H.S

Ch. 20-10-16 H.178

" 14-3-17 a. 283 20-5-19 C. 5220

A.M.D. 2 Dept.

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

Rw (Rw)

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

*no 6 Co. F. Amb
no 10 Can. Fr. Amb.
11 C. G. S'cliffe.*

*8-8-16
8-2-17
16-5-19*

2.

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4.

5.

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9.4.19. 6561. ——— 20 incl 8.4.19.



RECORD OF SERVICE

IN THE

CANADIAN ARMED FORCES

THIS REPORT
IS NOT VALID
WITHOUT THE
IMPRINT OF
THE OFFICIAL
STAMP OF THE
DEPARTMENT

Service Rank and/or Number 412719 Name Mervyn Thornton DANIEL

1. Branch of Service: CANADIAN EXPEDITIONARY FORCE
2. Date and Place of Birth: 29th September, 1894. Toronto, Ontario.
3. Date and Place of Appointment, Enlistment or Enrolment: 1st March, 1915. Lindsay, Ontario.
4. Unit on Appointment, Enlistment, or Enrolment: 39th Battalion
5. Theatres of Service: CANADA ENGLAND & FRANCE
6. Date and Place of Retirement or Discharge: 16th September, 1919. Halifax, N.S.
7. Reason for Retirement or Discharge: "Demobilization"
8. Rank on Retirement or Discharge: Private.
9. Medals and Decorations: 1914-1915 STAR - BRITISH WAR & VICTORY MEDALS
10. Remarks: Nil.

DESCRIPTION AT TIME OF RETIREMENT OR DISCHARGE

Sex: Male Age: 24 Years. 11 Months. Height: 5 Feet 7 1/2 Inches.

Eyes: Hazel Hair: Black Complexion: Ruddy

Marks or Scars: Tattoo right forearm.

DEC 4 1953

Ottawa, Ont., Canada
WAR SERVICE RECORDS
OTTAWA - CANADA
4th December, 1953.

[Signature]
Director, War Service Records

THIS REPORT
IS NOT VALID
WITHOUT THE
PARTICIPATION
OF THE OFFICIAL
STAFF OF THE
DEPARTMENT

DEPARTMENT OF VETERANS AFFAIRS
RECORD OF SERVICE
IN THE

CANADIAN ARMED FORCES

CANADA

A
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X

Name: [Faint text]
 Branch of Service: [Faint text]
 Date and Place of Birth: [Faint text]
 Date and Place of Appointment: [Faint text]
 Unit of Appointment: [Faint text]
 Description of Appointment: [Faint text]
 Date of Discharge: [Faint text]
 Reason for Retirement or Discharge: [Faint text]
 Rank at Retirement or Discharge: [Faint text]
 Name and Decoration: [Faint text]

DESCRIPTION AT TIME OF RETIREMENT OR DISCHARGE

Age: [Faint text] Years [Faint text] Months [Faint text] Days
 Height: [Faint text] Feet [Faint text] Inches
 Complexion: [Faint text]

DEPARTMENT OF
 VETERANS AFFAIRS
 CANADA

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 412719 (Rank) pte

Name (in full) Daniel Merwyn Thornton enlisted in the 39th Battalion.

CANADIAN EXPEDITIONARY FORCE at Lindsay on the 1st day of March 1915.

HE served in France (87th Battalion)

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 24 Years

Height 5' 7 1/2"

Complexion Ruddy

Eyes Hazel

Hair Black

Marks or Scars Tattoo right

fore arm

M. J. Daniel

Signature of Soldier.

J. C. Page

Issuing Officer.

Cap

Rank

Date of Discharge

M. J. Daniel

16 9 - 19

Date 12 9 1919

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.

MARRIED OR SINGLE *Single*
 PLACE OF BIRTH *Canada*
 NAME AND ADDRESS OF NEXT OF KIN *Mrs G. Daniel*
275 Ashdale Ave. Toronto. Ont.
 RELATIONSHIP OF NEXT OF KIN *Mother*
 NAME AND ADDRESS OF NEXT OF KIN *E. Brooks* *R. 229*
20 Cranworth Rd. Winchester Ham. *R2B2 9817*
 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. *CI 12719* RANK *Pte* NAME *Daniel, Morayn. Thornton*
 IF IN PERM. CORPS, WHAT UNIT *39th Bn* TRANSFERRED TO DATE AUTHORITY
 PERMANENT FORCE ALLOWANCES TRANSFERRED TO *60th Bn.* DATE *1/8/16* AUTHORITY *B.O. 30 20 Bn. 31/7/16*
 PLACE OF ATTESTATION *Lindsay Ont.* TRANSFERRED TO *84th Bn* DATE *11-6-14* AUTHORITY *B.O. 45*
 DATE OF ATTESTATION *1st March 1915* TRANSFERRED TO DATE AUTHORITY
 ASSIGNED PAY MONTHLY \$ *20.00* DATE EFFECTIVE *1/4/14 (AZM Recd 29/3/14)*
 PAYABLE TO *Next of Kin Mrs. G. Daniel, 245 Ashdale Avenue, Toronto, Ont., Canada* 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				FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS				CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS				
	NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT					1	2	3	4	1	2	3	4				CREDIT	DEBIT							
			\$	C.			\$	C.			\$	C.																				NO.	DATE	NO.	DATE
1916 Mar 31	Forward	275				2750									47	302	97																		
Apr	1-30	30	1	30		3010		3																											
May	1-31	31	1	31		3110		3																											
June	1-30	30	1	30		3010		3																											
July	1-31	31	1	31		3110		3																											
	1-31-8	31		31		31		3																											
	1-30/9	30		30		30		3																											
Oct.	31	100		31	00	31	10	3	10																										
Nov.	30	100		30	00	30	10	3	00																										
Dec.	31	100		31	00	31	10	3	10																										
				55				55	00																										
1917	Jan.	31	100		31	10																													
	Feb	28		30	80																														
	Forward			669	90																														

Checked *[Signature]*

100 P. No 2. 2 days pay R. D. Abner 31. 20. 14. 12/16
 awarded 10 days P. 2. B. O. 128. 7/5/16
 as 28 days P. 2. B. O. 131. 8/2/16

REGIMENTAL DISCHARGE

Reg. No. **412219** Rank **PT3** Name **Daniel** Unit **23. Res.** **Overseas.**

Disease. **CF** Word **Ac&D.No.** Secretary **A**
on Discharge. **A**

..... **BR Phasquest**
Capt. C.A.M.C.,

Handwritten scribbles and illegible text at the top of the page.

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No. 27. Can. Gen. Hospital,
Moore barracks, Montreal.

Number *412719* Rank *P1E*

Name *Daniel* Regt. *23 Res. Bn.* is

suffering from Chronic gleet ; no gonococci can be found
in his urethral discharge , he is non-contagious and quite
fit for duty. He should not be admitted to Hospital for
venereal disease unless he develops any complications or
contracts a fresh attack.

signed.....

Jos Officer i/c Hospital.

*Auth. W.D. Circular letter no 5141
24 June
Mj: C.A.M.C.*



Number 11-714
 Name of patient
 Date of admission
 in his medical history, he is non-communicative and
 ill for many. He should not be admitted to Hospital
 unless he develops any complications or
 contracts a fatal attack.

Signature
 Officer of Hospital

TO WHOM IT MAY CONCERN

Regtl. No. 412719

Rank PFC

Name Donald

Unit 23. Res.

XI Canadian Hospital, *Sharncliffe*

~~Etchingham, Lymington.~~

..... 1919.....

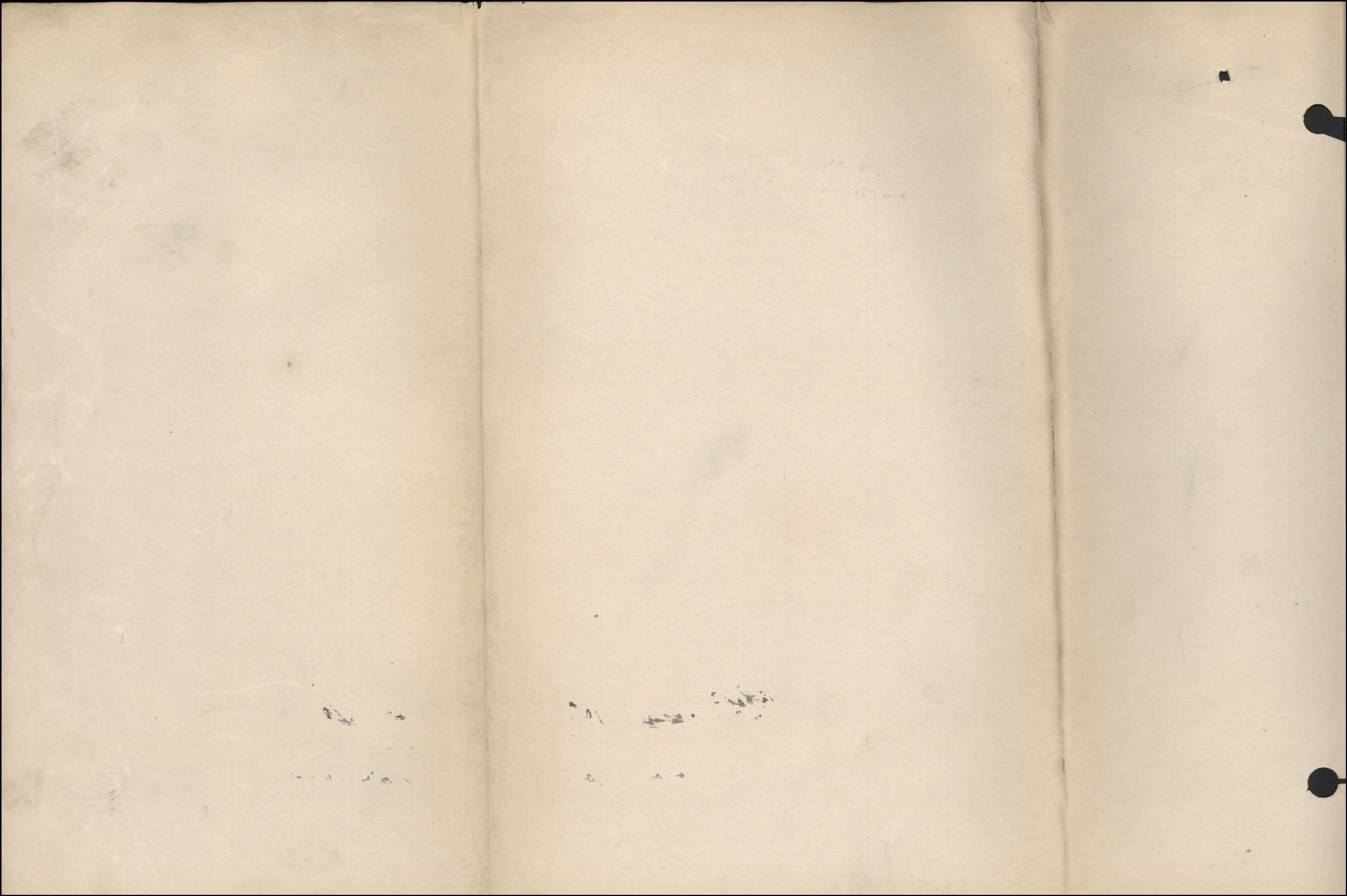
This to certify that the marginally named is free from infectious disease, transmissible skin disease, venereal disease and vermin and that he is fit to travel.

BR Ph... ..
C.A.M.C.

For Officer Commanding
Canadian Hospital Etchingham.



[Faint, illegible handwriting or bleed-through text is visible across the page.]



No. of DEPENDENTS 1

CANADIAN DISCHARGE DEPOT, G.E.F.
BUXTON, DERBYSHIRE
AUG 10 1919
FILE SHORT FORM.

1258
DISPERSAL AREA 2T

PROCEEDINGS ON DISCHARGE.

RELIGION Baptist

(Demobilization.)

NEXT OF KIN Wife

1. No. 412719

War Service Badge 322250

2 Rank. Pte

Class "A" No.

3. Name. Daniel Mervyn Thornton

4. Unit. P.R.C. 39th Bn

5 Date of Discharge SEP 16 1919 Place

6 Reason for Discharge

CATEGORY "A"

TRADE Motor mechanic

OCCUPATIONAL GROUP 13

SERVICE IN FRANCE 36 months.

7. Authority. ROUTINE ORDER 1420

8. Proposed Residence after Discharge

245 Ashdale Avenue
Toronto, Ont

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.? 39

M. D. Daniel

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place

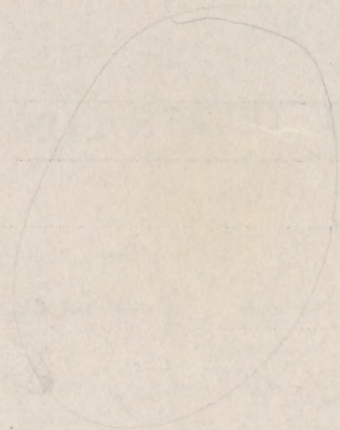
Date

HALIFAX DEPOT
SEP 16 1919
CLEARING SERVICES COMMAND

R.M.S. CEDRIC Sailing
Emb'do Liverpool 4-19
Liverpool 12-19

Signature Lt. Col

(O.C. Discharge DEPOT)
CLEARING SERVICES COMMAND



1903

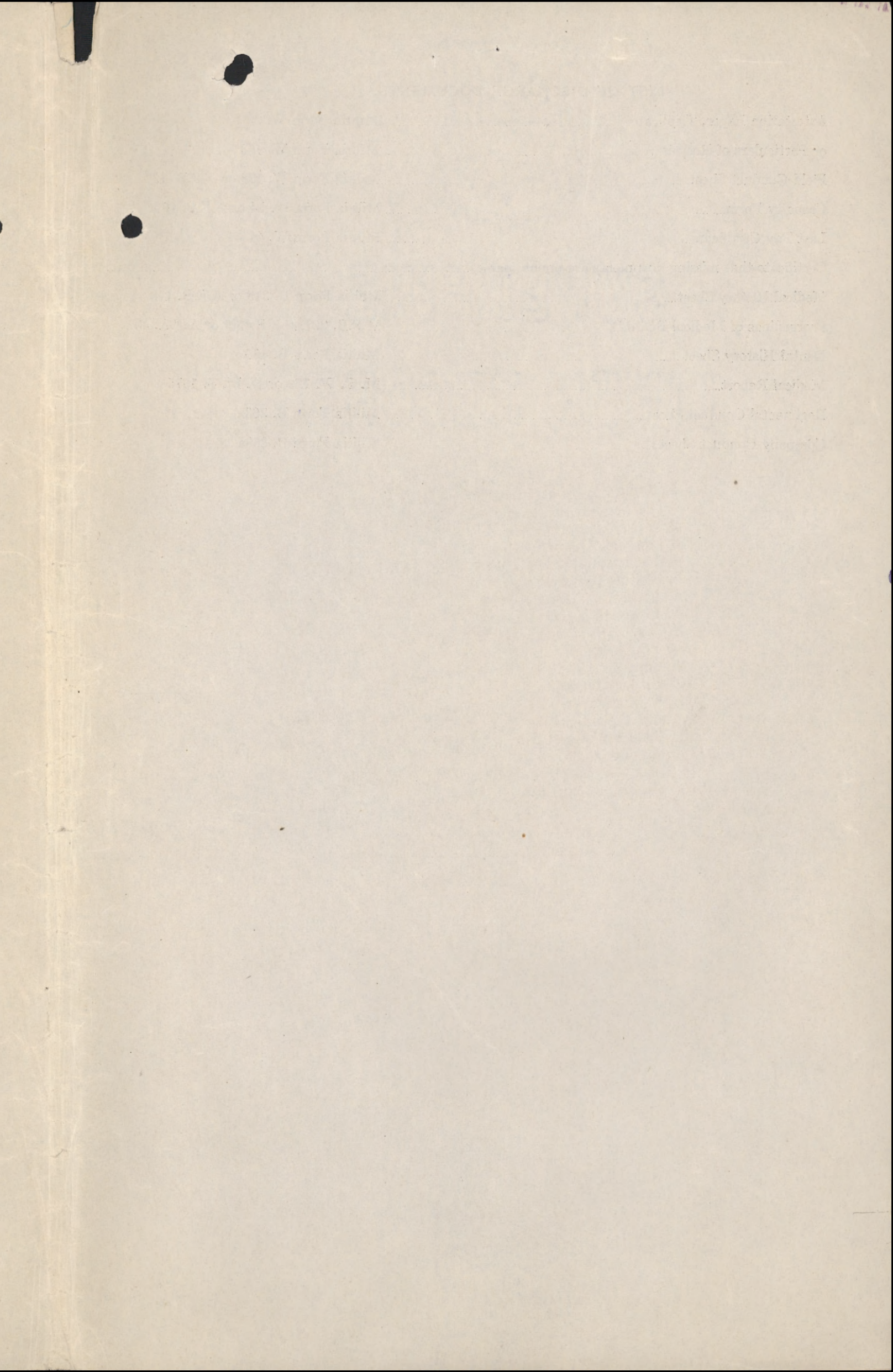
1904

1905

1906

1907

1908



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 (O.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 (260M)).
9. Copy of Discharge Certificate (M.F.W. 39a).
10. Dispersal Certificate (O.D. 8).
11. Equipment and Clothing } Statement Q, M.G. Form (D.O.S. 2).
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 6
 Checked by No. 9
 Date 23/8/19

No. 8
 DEPT
 REL I

Howling Coy.

Original

THIS FORM WILL BE USED FOR ALL RANKS

MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

- 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.
- 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."
- 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.
- Special care is required in answering question 9. Read the questions carefully. All questions must be answered.
- If space provided under any section is insufficient add another sheet. Such sheets must be initialled by the Medical Board.
- A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board."
- Under no circumstances may information other than that in sections 7, 8, 9 and 10 be communicated to the invalid, directly or indirectly.
- 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 Witley Camp DATE 15/7/19

1. 1 (a) Unit Gen Depot (b) Regimental No. 412719 (c) Rank Private
 (d) Surname Daniel (e) Christian name Mervyn Thornton
 (f) Home address 245 Ashdale Ave Toronto Canada
 (g) Next of Kin Mrs. E. Daniel (h) Relationship wife
 (i) Address of Next of Kin ~~same address as~~ see 1. 1. 45

2. Age last birthday 25 Date of birth Sept 29th - 1893

3. Enlistment, or Appointment (if an Officer) (a) Place Lindsay (b) Date 26/2/15

4. Personal description:
 (a) Height 5-7 1/2 (b) Weight 160 (c) Complexion Dark
 (d) Colour of hair Black (e) Colour of eyes Hazel (f) Identification marks, Scars, etc. Tattoo on right forearm. Scars on back of neck.

5. Former trade or occupation Driver - (motor mechanic)

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
	<u>4</u>	<u>165</u>

	PERIODS	
	From	To
Canada	<u>26-2-15</u>	<u>24-6-15</u>
England	<u>24-6-15</u>	<u>10-9-15</u>
France or other theatres of War	<u>10-9-15</u>	<u>11-12-15</u>
	<u>29-6-16</u>	<u>27-4-19</u>

7. Original disease, or injury Flat Feet

(a) Date of origin 1912 (b) Place of origin Canada
 (c) Cause unknown

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.)

Pain and aching feet when standing for a long time or after a march.

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.)

Both feet flat. but not completely broken down. Soldier can march 2 or 3 miles without much trouble, civil boots do not cause him any inconvenience.

(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...no Genito-Urinary System...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...yes.

Cyst in front of neck - does not cause any disability.

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

feet have been flat for years, but wearing army boots they are much worse.

10.—(b)
P.L.
V.R.
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11.—(a)
(b)
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present
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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).)

Fracture of 2nd metatarsal of left foot - 4-12-15' Buon Hosp. Sault Ste
P.H.O. - No 6 C.F. Amb. - 8-8-16 Recorred
V.R. Co. - Moore Barracks Hosp. Recorred
Fasciitis - Moore Barracks Hosp. Recorred

(Here give a description of wounds, scars and deformities.)

Cyst - on front of neck -

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

(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.)

yes. - Army Boots etc

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? *3 months,*

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

none.

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

none.

J. Wright, Capt.
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, *M. T. Daniel #412719* 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 *nothing.*

MD

M. T. Daniel Rank.
Signature of invalid examined.

OPINION OF THE MEDICAL BOARD

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

Yes we concur

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.)

R.C. Adv. Ab. Tel 9083 7 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.

[Signature] President.
[Signature] Members

PLACE WITLEY CAMP, SURREY.
15-7 1919
 DATE.....

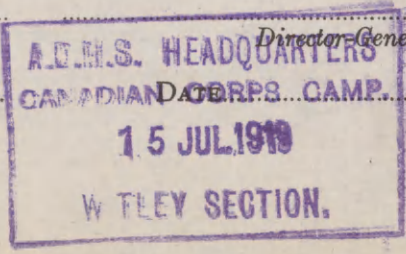
TO BE COMPLETED WHEN TREATMENT IS REFUSED

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

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

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

APPROVED BY *[Signature]* Assistant Director of Medical Services.
 APPROVED BY *[Signature]* Director General of Medical Services.



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- 1772-3

Certified True Copy.

Casualty Form—Active Service.

Regiment or Corps *39th Bn*
 Rank *Pte* Surname *Daniel* Christian Name *Marion Stanton*
 Religion Age on Enlistment years months
 Enlisted (a) Terms of Service (a) *Def. War* Service reckons from (a) *1st March 1915*
 Date of promotion to present rank Date of appointment to lance rank
 Extended { } Re-engaged { } Qualification (b)
 or Corps Trade and Rate
 Occupation Signature of Officer

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
Date	From whom received				
		Arrived in England	Embarked ... Disembarked...	<i>3-7-15</i>	
<i>9.8.15</i>	<i>B.C. 39th</i>	<i>Awarded 10 days F.P No 2</i>	<i>Shorncliffe</i>	<i>9.8.15</i>	<i>Pt Lt O 137</i>
<i>10.9.15</i>	<i>"</i>	<i>Trans to 18th Bn</i>	<i>"</i>	<i>10.9.15</i>	<i>" " 164</i>
<i>18.9.15</i>	<i>" 18th</i>	<i>Embarked (C Coy)</i>	<i>Folkestone</i>	<i>14.9.15</i>	<i>Infantry Ser</i>
<i>9.11.15</i>	<i>M.O</i>	<i>G.S.H. in Fort. Spec Hosp. Self Inf</i>	<i>Broscupe</i>	<i>24.10.15</i>	<i>Cas Lt 69. A.M</i>
<i>15.11.15</i>	<i>"</i>	<i>26 General Hospital</i>	<i>Etaples</i>	<i>8.11.15</i>	<i>" " 71 & 72</i>
<i>27.11.15</i>	<i>B.C. 18th</i>	<i>Awaiting trial from 25.10.15</i>			<i>Pt Lt O 10</i>
		<i>28 Days F.P No 1 for Self Inf Wound</i>			
<i>8.12.15</i>	<i>M.O</i>	<i>Fract 2nd meta. R. foot (Slight)</i>	<i>Sandgate</i>	<i>4.12.15</i>	<i>Cas Lt 89</i>
<i>15.12.15</i>	<i>"</i>	<i>Central Mil Hosp</i>	<i>Shorncliffe</i>	<i>6.12.15</i>	<i>" " 94</i>
<i>11.12.15</i>	<i>B.C. 18th</i>	<i>S.O.S. trans to Eng. Invalided</i>	<i>Field</i>	<i>4.12.15</i>	<i>Pt Lt O 137</i>
<i>14.12.15</i>	<i>36th</i>	<i>Trans to 36th Bn</i>	<i>H Sandling</i>	<i>4.12.15</i>	<i>" " 218</i>

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
 (b) Signaller, Shoeing-Smith, &c. W. 11814—M1188 1000m 1/17 (27227) S P & Co, Ltd. Forms B./103/4 E./354. [P.T.O.]

Army Form B. 103.

Casualty Form—Active Service.

Supplied **CERTIFIED CORRECT.**
 Canadian Regimental Number 412719
 Westminster House,
 7, Millbank, S.W.

Regiment or Corps 39th Bn. C.E.F.

Rank Pte. Surname Daniels Christian Name H. J. Hanton

Religion Church of England Age on Enlistment _____ years _____ months.

Enlisted (a) 1-3-15 Terms of Service (a) Duration of War Service reckons from (a) 1-3-15

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

Extended { _____ } Re-engaged { _____ } Qualification (b) _____
 or Corps Trade and Rate Driver

Signature of Officer i/c Records.

Report		Record of promotions, reductions, transfers, casualties, &c. during active service, as reported on Army Form B. 213, Army Form A. 38, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
		Embarked ...	<u>Montreal</u>	<u>24-6-15</u>	
		Disembarked ...	<u>Plymouth</u>	<u>5-7-15</u>	
<u>28-6-16</u>		<u>Drafted to 20th Bn</u>			
<u>29/6/16</u>	<u>C. B. Dep</u>	<u>Arrived & taken on strength</u>	<u>20th Bn</u>	<u>29/6/16</u>	<u>Lt.-Col. N.R. Pt. 2 O'rs</u>
<u>21.7.16</u>	<u>Ab 20 Bn</u>	<u>Joined unit</u>		<u>14.7.16</u>	<u>No 27d7/7/16.</u>
<u>21/7/16</u>	<u>A.A.G. Can Sect</u>	<u>Struck off strength 20th Bn on transfer to 60th Can Bn</u>	<u>In Fld</u>	<u>21/7/16</u>	<u>294/979 Pt 2 O'rs</u>
	<u>do.</u>	<u>Taken on strength 60th Bn.</u>		<u>22.7.16</u>	<u>o 30d31-7-16</u>
<u>12.8.16</u>	<u>6th Flamb</u>	<u>Ret.D.</u>	<u>6th Flamb</u>	<u>8.8.16</u>	<u>Pt. 2#21-31/7/16</u>
<u>13.8.16</u>	<u>6th B.7.A</u>	<u>...</u>	<u>6th B.7.A</u>	<u>8.8.16</u>	<u>736262 in 2-10.9.16</u>
<u>7.10.16</u>	<u>oc. Bn.</u>	<u>Can Corp pack Mule Co.</u>		<u>1.10.16</u>	<u>3213 OCS 154</u>
<u>21.10.16</u>	<u>"</u>	<u>Regimental Unit.</u>		<u>17.10.16</u>	<u>" " 169</u>
<u>26.8.16</u>	<u>oc. 7.A.</u>	<u>Influenza.</u>	<u>In Duty.</u>	<u>21.8.16</u>	<u>Asst.</u>
<u>28.10.16</u>	<u>oc Bn.</u>	<u>Div. Amv. Column.</u>	<u>On Comm.</u>	<u>26.10.16</u>	<u>3213 OCS 174 15/11/16</u>

(a) In case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
 (b) Signaller, Shoering Smith, &c.

[P.T.O.]

11-18-15 Pm
 39 Bn 10-9-15
 4-13-15
 367 11-9-15
 15-9-15
 20th Bn
 11-12-15

11-18-15 Pm
 39 Bn 10-9-15
 4-13-15
 367 11-9-15
 15-9-15
 20th Bn
 11-12-15

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
22/12/16	OCBn.	Adm to Hospital	—	20.12.16	B213 DEC 192 2/1/17.
30/12/16	"	Rejoined Unit.	—	27.12.16	" DEC 193 2/1/17.
1/12/16	3 rd SAC.	Attached to 3 rd Div Army Column	—	30/11/16	A54/12/12/16 of file RT 108-714A 700 3 rd SAC B213 on 1/12/16 file 7 th
9/2/17	OCBn.	Admission to Hospital	—	9.2.17	B213 DEC 209 2/2/17.
16/2/17	"	Rejoined Unit.	—	12.2.17	B213 DEC 211.
11/2/17	106 FA	puo	106 FA	8.2.17	B213 DEC 211
26.3.17	W.O.L.	Transf to 87 th Cav Bn	Duty	11.2.17 23.4.17	16.3.16.5871 pt. 11 45-15-17
26.3.17	do	Taken on Strength 87th Battn		24.4.17	Pt II 0.67 dated 19.5.17
11.8.17	Unit	Wounded at duty		9.8.17	B213
22.4.17	"	Att to 4 th CB Bn		19.4.17	"
29.9.17	"	Transf to 4 th CB Bn as above		23.9.17	"
2.9.17	"	Permitted to Hospital 2 days Pay		7.10.17	B2069
		for loss by Dept 1 while on Hospital			S.D. IV 4/21 of 25.10.17
20.10.17	"	Wounded on 10 days leave		20.10.17	B213 S. 42 of 27.10.17
10.11.17	"	Rejoined from leave		5.11.17	"
1.7.18	Unit	Awarded one bars Conduct Badge		1.3.17	80760 1918
24.8.18	Unit	Att to 4 th CB Bn as Cooks Keeper.		23.8.18	B213 14 CW-A3238 2/21/18

Casualty Form—Active Service.

Regiment or Corps 87th Canadian Infantry Battalion (C.G.G.)

Rank Private Surname DANIEL Christian Name M.T.

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

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

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

Extended { } Re-engaged { } Qualification (b).....
or Corps Trade and rate.....

Occupation..... Signature of Officer.....

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
Date	From whom received				
		Embarked ...			
		Disembarked ...			
10-10-18	Unit	Sentenced to 7 Days F.P.No.1. for Conduct prejudice to the good order and military discipline, (Being improperly in possession of Gov't rations.)		28-9-18	B.2069 DO 104-1918
5.10.18	"	leaves to be att to C.C.R.6		6.10.18	B.213
9.11.18	"	granted 14 days leave to UK		4.11.18	B.213 DO 118/1918
30.11.18	"	rejoined from leave		26.11.18	B.213
24.12.18	unit	granted permission to marry.			K.G. 18.23198 DO 1-1919.

(a) In the case of a man who has re-engaged for, or enlisted into section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.

(b) Signaller, G. H. Smith, & Co.

Sheet No. 2.

Rank Name DANIEL, Mervyn Thornton Reg'l No. 412719
 Unit 39th Bn. If in perm. Corps }
 What Unit? } Married or Single Single

Place and Date of Enlistment Lindsay, 1 March 1915 Place of Birth Canada

Name and Address, Next-of-Kin Mrs. G. Daniel, *Additional info. E. Brooks, 20 Cranworth Road Winchester, Hants*
 179, Ashdale Ave., Toronto, Ont. Relationship Mother. *File R.B. # 33584*

Assigned Pay Monthly \$ Payable to

Relationship

Separation Allowance \$ Payable to

Relationship

File R.L. Category CAN. OR X300

Discharge, Date and Place Reason Character
 H. W. V., Ld.-9546-16. *1st page of Records filed in envelope.*

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
Date.	From whom received.				
→ QUEBEC ←					
14-3-17	<i>60th Bn</i>	Adm no 10. Can Fld Amb	Fld	8-2-17	6L # 283 (PWO)
14-3-17	" "	Discharged from above	"	"-2-17	" # 283
15-5-17	" "	S.O.S to 84th Bn	"	23-4-17	45 <i>42067d/195-17 of 87th Bn</i>
4-1-19	87 th Bn	Granted perm to marry	"	24-12-18	D.O. 1
24-4-19	" "	S.O.S & posted to A.R.D	"	27-4-19	Do 18. to 99. QPRD 30 1/2
8-7-19	QPRD	S.O.S to H.Wing	Witley	7-7-19	" 154
16-7-19	H.Wing	S.O.S.	"	8-7-19	" 66
13-8-19	H.Wing	S.O.S. to 60th Bn	"	9-8-19	" 74 <i>8154 d/11.8.19 B Dis Dep</i>
Q39-I-9					
4-9-19	C.D.D.	S.O.S. to CANADA	"	4-9-19	DO. 205

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.
141
Year
1916

Regimental No.	Rank.	Surname.	Christian Name.
<u>412719</u>	<u>PLT</u>	<u>Daniels</u>	<u>M. J.</u>
Unit.	Age.	Service.	
<u>C. E. F.</u>	<u>22</u>	<u>1 6/12 yrs</u>	

Station and Date.
Hill House
Camp: military
Hosp: military

Disease Fract 2nd metatarsal lft foot (Self inflicted)
Dry dressings & splint.

J. H. Powell M.D.

*The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.
(J 3521.) Wt. W 5606-2621. 2,000,000. 7/15. D & S.

Station
and Date.

RECORD CASE SHEET

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

MEDICAL HISTORY of

Surname DANIEL Christian Name Mervyn Thornton.

TABLE I.—GENERAL TABLE.

Birthplace ... Parish Toronto County Ont.

Examined ... { on 9th day of March 1915.
at Lindsay.

Declared Age ... 21 years ... days.

Trade or Occupation ... Driver.

Height ... 5 feet, 7½ inches.

Weight ... 149 lbs.

Chest { Girth when fully Expanded. 35½ inches.
Measurement { Range of Expansion 2 inches.

Physical Development ... good

Vaccination Marks { Arm ... Right Left
Number 2

When Vaccinated ... March 1st 1915

Vision ... { R.E.—V=
L.E.—V=
(a) Marks indicating congenital peculiarities or previous disease ... { (a) Tattoo right arm, Girls Head.

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

Approved by (Signature) J. McCulloch.
(Rank) Lieut. Medical Officer.

I certify the foregoing to be a true copy of an original entry on a Medical History Sheet of this man.

C.A.M.C.
for the Officer in Charge of Records
Canadian Contingents.

Enlisted ... { at Lindsay.
on 26th day of Feb. 1915.

Joined on Enlistment ...	Corps. <u>Overseas Con. 45th Victoria Regt.</u>	Regtl. No.
Transferred to ...	<u>18th Battn.</u>	<u>4 1 2 7 1 9</u>

Became non-effective by _____
on _____ day of _____ 1915.
(Signature) _____
(Rank) _____

This Medical History Sheet has been compared with the
Corresponding Attestation Paper, and it has been made in red
Ink to be taken from the Attestation Paper.

Colonel W. P. WARD,
in Charge of Records,
Canadian Contingents. [P.T.O.]

Table II.—Only for Admissions to Hospital or to the Sick List i

Name of Hospital.	Admitted to Hospital			Discharged from Hospital			Disease	Number of Days in Hospital	Remarks bearing use. In subsequent given
	Day	Month	Year	Day	Month	Year			
Bevan Military Hosp. Sandgate.	4.	12.	15.	13.	12.	15.	Fract. 2nd metatarsal left foot. (G.S.W.)	9.	Self infl transferr
Hill Ho. Minster.	13.	12.	15.	3.	1.	16.	do.	21.	
Monks Horton, Kent.	3.	1.	16.	8.	2.	16.	Fract. L. ft. (self inflicted).	36.	Paraded for 2 we Hill Hou Present Not much in ankle Returned Present
<i>S. C. M. Amb.</i>	<i>8</i>	<i>8</i>	<i>16</i>	<i>2-8</i>	<i>10</i>	<i>16</i>	<i>P. O. S.</i>	<i>8</i>	<i>Rij</i>

the Sick List in the case of Warrant Officers treated in quarters.

Number Days in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital must be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer.
9.	Self inflicted wound. Improving wound healed. Transferred to Minster.	G. Mackney, B.M.H. F.B. Carron, Major.
6.	Paraded sick Oct. 15th in France. Sent to Hazelbrook, for 2 weeks. Etaples 3 weeks. Bevan M.H. Sandgate 1 week. Hill House Minster, 3 weeks. To Monks Horton. <u>Present condition:-</u> Some thickening over site of wound. Not much pain on movement. Complains of some discomfort in ankle on movement. Recommended to Hastings 7. 2. 16. Returned from Hastings. <u>Present condition:-</u> Fit. Discharged 8.2.16 to 48th Bn. W Sandling.	F.T. Campbell, Capt.
3	<i>Rij Unit</i>	<i>R48. R178</i>

ORIGINAL

H. Wing Cloy

Army Form B. 178.

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

MEDICAL HISTORY of

Surname Daniels Christian Name M J

TABLE I.—GENERAL TABLE.

Birthplace ... Parish ... County ...

Examined ... (on ... day of ... 191 ... at ...)

Declared Age ... years ... days.

Trade or Occupation ...

Height ... feet, ... inches.

Weight ... lbs.

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

Physical Development ...

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

When Vaccinated ...

Vision ... { R.E.—V= L.E.—V=

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

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

Approved by (Signature) (Rank) Medical Officer.

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

Table with 2 columns: Corps (39th Res Bn, 20th Battalion) and Regtl. No. (412719)

Became non-effective by ... on ... day of ... 191 ...

(Signature) (Rank)

e Sick List in the case of Warrant Officers treated in quarters.

Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.

Signature of Medical Officer



Report on Wounds or other Injuries, received otherwise than in Action.

4181

114 Gen. No. 4269

Certificate of Medical Officer.

No. 412719 Pte Daniel M T 18 Canadian

was admitted to hospital on the 8/11/15 suffering from G.S.W. Left foot self inflicted

The disability is of a moderate serious nature, and in all probability will not interfere with his future efficiency as a soldier.

† Here insert "trivial" or "serious." ‡ Here insert "will" or "will not." * Here insert "claims" or "does not claim."

He* claims that he was in the performance of military duty at the time of the accident.

(If the soldier makes no claim that he was on duty at the time, the certificate below should be signed by him.)

Station Gt. Depot Date 9/14/15 Medical Officer in charge C. J. West L.R.M.C. new

Certificate to be signed by soldier.

I, hereby declare that the injury sustained by me on the did not occur while I was in the performance of military duty.

{ Soldier's Signature.

Station Date Signature of Medical Officer.

Certificate of Commanding Officer.

(This certificate will be completed only in cases of trivial injury where the soldier claims to have been injured while on duty.)

I certify that the injury to the above-named soldier occurred while he was in the performance of military duty.

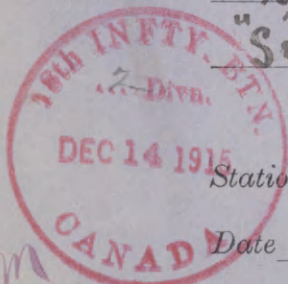
† Here insert "occurred" or "did not occur."

7 - DEC 1915

† If on duty, state (a) The date of the injury. (b) The place where it occurred. (c) The nature of the duty. (d) Whether the soldier was in any way to blame.

A. 23rd October, 1915. B. Viestraat, in trenches. C. cleaning rifle. D. Yes; he was tried by G.C. Tr. 1-11-15 on a charge of "Self-Inflicted wound", found guilty, and awarded 28 days F.P. No. 1.

The soldier has been so informed. Station In the Field Date 14th Dec., 1915 Commanding 18th Canadian Bn.



This Army Form will be attached to the Medical History Sheet, on which it will be recorded whether the soldier was on duty, and whether he was to blame.

