

Original

ATTESTATION PAPER.

No. 204543

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION. (ANSWERS.)

- 1. What is your surname? David
- 1a. What are your Christian names? Felix
- 1b. What is your present address? Dewar Lake, Sask.
- 2. In what Town, Township or Parish, and in what Country were you born? Wolseley, Sask. *Sask.*
- 3. What is the name of your next-of kin? Ferdinand David
- 4. What is the address of your next-of-kin? Dewar Lake P.O. Sask *Canada*
- 4a. What is the relationship of your next-of-kin? Father
- 5. What is the date of your birth? December 14th 1894.
- 6. What is your Trade or Calling? Farmer
- 7. Are you married? No
- 8. Are you willing to be vaccinated or re-vaccinated and inoculated? Yes
- 9. Do you now belong to the Active Militia? No
- 10. Have you ever served in any Military Force? If so, state particulars of former Service. 3 yrs 26th Light Horse Cadets
- 11. Do you understand the nature and terms of your engagement? Yes
- 12. Are you willing to be attested to serve in the } CANADIAN OVER-SEAS EXPEDITIONARY FORCE? } Yes

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

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

Felix David (Signature of Recruit)

Date March 25th 191 6 A. Bell (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Felix David, 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.

Felix David (Signature of Recruit)

Date March 25th 191 6 A. Bell (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 Saskatoon this 25th day of March 191 6.

M. Cowan (Signature of Justice)
Commissioner for Oaths
My Commission Expires Dec 31/16

Description of Felix David on Enlistment.

Apparent Age.....21 years3 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Distinctive marks, and marks indicating 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 5ft. 7½ ins.

Chest measurement. { Girth when fully expanded..... 40½ ins.
 { Range of expansion..... 4½ ins.

Complexion Fresh

Eyes Grey

Hair Dark

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

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 25th..... 191 6.

Place..... Saskatoon

D. G. Cameron
 Acting 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:—

.....

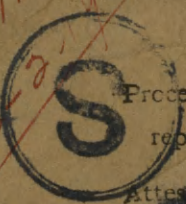
CERTIFICATE OF OFFICER COMMANDING UNIT.

..... Felix David..... 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.

[Signature]..... (Signature of Officer)

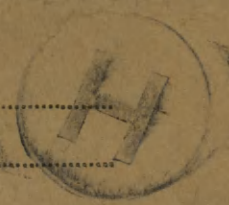
Date..... March 25th..... 191 6.

R.M.
3-2-19



DISCHARGE DOCUMENTS

R. O. No.....
H. Q. No.....

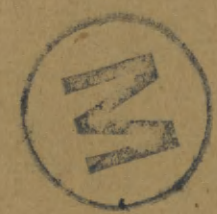


- Proceedings of Court of Inquiry or on men reported Missing on Active Service.....
- Attestation Papers..... *1 B*
- Declaration of change of name.....
- Authority for special enlistments.....
- Documents of re-enlisted men.....
- Regimental Conduct Sheet.....
- Compulsory Stoppages.....
- Casualty Forms..... *33*
- Proceedings on discharge..... *1*
- Corps History Sheet.....
- Date and No. of Deposit Receipt for Purchase Money and Amount.....
- Parchment Certificate.....
- Medical Report for Invalids.....
- Medical History Sheet..... *3 H*
- Proceedings of Regt. Court Martial.....
- Copies of Convictions by Civil Power.....
- Company Conduct Sheet.....
- Clothing Transfer Certificate.....
- Inventory of Kit.....

Name DAVID FELIX
 Regt. No. 204573 Rank Pvt
 Corps 96th Bn.
Demob.

03600

Am. O. No. 1111
5-3-40
Am. O. No. 1111
5-3-40



R. 122

Last Pay Certificate..... *1*
m 7. 21 129 - 1 1 card card P.C. - 1
m 7. 21 192 - 1
m 7. 21 39a - 1
a 7 B 122 - 1 a 7 B 1237 - 1
a 7. 21 3997 - 2 a 7 B 181 - 1
card 5009 - 2
27ms. 1375 - 2 a 7 W. 3212 - 1
a 7. 1237 - 1
 M. F. W. 62.
 100m. - 6-17.
 H. Q. 1772-39-835.
a 7 B 181 - 1
Chemical Rep - 1 1 card

8-4
21-4
27-4

4

23/2

Reference copy of original C.E.F. Discharge Certificate
issued to the soldier shown hereon.

This copy is to be attached to a soldier's discharge documents and must contain the exact wording which appears on the original certificate, and must be signed by the Officer carrying out discharge.

DEPT
MUST. & OFFICE
APR - 2 1919
H.Q.

This is to Certify that No. ---204573--- (Rank) ----- Private -----

(Name in Full) ----- Felix, David ----- enlisted in
----- 96th. Battalion -----

Canadian Overseas Expeditionary Force, on the --- 25th --- of --- March ---
1916, and accompanied said unit to France Five (5) Months with the 15th. Bn.

was returned to Canada, and discharged from the service at Regina, Saskatchewan
on the --- 11th --- of --- January --- 1919, in consequence of On Demobil-
ization. Entitled to wear One Gold Casualty Stripe: 10-4-17

DESCRIPTION ON DISCHARGE

Age ----- 25 years 1 month -----
Height ----- 5 feet 7 1/2 inches -----
Complexion --- Fresh ---
Eyes ----- Gray -----
Hair ----- Dark -----
~~File~~ File No. 124-D-12 D.D.
Trade _____

Marks or Scars _____

Signature of Man *Felix David*

A. Samuel Col Lt-Colonel,
Officer-in-charge Discharge Depot,
O.C. 412 District Depot.

Place and Date Regina, Sask., 11-1-19.

CANADIAN OVERSEAS EXPEDITIONARY FORCES

Discharge Certificate

520

3-4-19

APR 9 1919

No.

Rank

Name

Unit

Address on Discharge

.....

.....

.....

.....

On demobilization the particulars called for on the back of this certificate will not be completed.

His conduct and character while in the Service have been :

.....

.....

Place

Date

Campaigns

Medals and Decorations

.....

.....

Discharge Section
JAN 11 1919
NO. 12 DISTRICT DEPOT

..... Commanding

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

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

250M.—1-16.

H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps 86TH OVERSEAS BATTALION (CANADIAN HIGHLANDERS)

Regimental No. 204573. Rank Pte. Name Felix David

Enlisted (a) 25/3/16 Terms of Service (a) 6 6/7 Service reckons from (a) 25/3/16

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

Extended _____ Re-engaged _____ Qualification (b) Farmers

Report Date	From whom received	Record of promotions, reductions, transfers, casualties, etc., 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	Date	Remarks taken from Army Form B. 213, Army Form A. 38, or other official documents.
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CERTIFIED CORRECT.
 20 NOV 1916
 CAN. RECORDS, LONDON.

10-10-16	OC 96 th	Embarked Arrived Transferred to 92 nd	Halifax Liverpool E Sandring	27-9-16 6/10-16 8-10-16	SS Laconia Pt II O. 279
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20-10-16	OC	Taken on Strength 92 nd	E Sandring	8/10/16	Bn 4 266
11-11-16	2 Rde.	Trans. to 15 Bn.		12-11-16	Bn. 290.

R. Brown LIEUT.
 ASST. ADJUTANT 92nd OVERSEAS BATTALION
 (48th HIGHLANDERS) C.E.F.

13-11-16	6 R.D.	ON STRENGTH 15TH BATTN CAN.			
27 NOV 1916		LEFT FOR UNIT	1 ST CAN ENT BN		
1/12/16		JOINED UNIT	1 ST CAN ENT BN		
3/12/16	1 ST CAN ENT BN	LEFT FOR UNIT	15 Bn		

(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, e.g. Signaller, Shoelng Smith, etc., etc., also special qualifications in technical Corps duties.

204573 Itc David F

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				
19/1/17	15th Pm	On Comm 3rd Bar	I M. Patteney	19/1/17	B 213. D. C. S. 366 dated 27/1/17
10/4/17	8. Staty.	Wounded to hospital	G W face amk 8. Staty	10/4/17	W 3036
14/4/17	15 Pm	Posted To 1st. Cent. Ont. Regt.	Eng	10/4/17	B 213. D. C. S. 386 dated 29/4/17
"	Jan Breydel	Depot Shorncliffe	Chas. Chapnell	14/4/17	W 3083/6400
			fresh for Major as by Kenrick in Rochelton		Park II. 047. 27/4/17
23-4-17	(CORP)	105	Wandig	15/4/17	-45 114
			W. Matsum		capt Lieut for Colonel i/c Records om 46
28/6/17.	1st BORD.	Off. S. on being Posted to 5th Res. Bn.	Wandig	22/6/17	1st BORD of 111
29/6/17.	O.B. 5th Res.	Taken on strength from 1st BORD.	Wandig	22/6/17	Bn of 174
28/7/17.	O.B. 5th Res.	Off. S. having been found by 6th Bn. he is legally absent as he was in hospital	Wandig	2/7/17	Bn of 203.

as he was in hospital on 2/7/17

Wright
Lieut.
O.I/c Records,
5th Canadian Reserve Battalion,
West Sandling, Kent

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

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

500M—9-16

H. Q. 1772-39-9.0.

Casualty Form—Active Service.

Unit, Regiment or Corps. 15th. O. S. Battalion.

Regimental No. 204573 Rank Pte Name David Felix
C. E. F.

Enlisted (a) 25-3-16 Terms of Service (a) D. O. F. War Service reckons from (a) 25-3-16

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

Extended Re-engaged Qualification (b) Farmer

Date	Report		Place	Date	Remarks taken from Army Form B 213, Army Form A. 36, or other official documents
	From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case			
15-2-18	O.C. 5th	3. Off. S. to 12th. Res. Bn	W. Sandling	15-2-18	Bn. Ord 46
15-2-18	O.C. 12th	T. On. S. from 5th. Res. Bn	W. Sandling	15-2-18	Bn. Ord 40
20-2-18	do.	S.O.S. to 1st. C.O.R.D. on reporting to 1st. C.C.D.	do.	20-2-18	Part II 11 Lieut. i/c Records, 12th. Res. Bn.
21-5-18	Admitted to 1st C.O.D. from <u>12th Res. D.O. Pt. II. No. 124 10. 79.6.17</u>				
	Ceases to be attached on proceeding to <u>12th Res Bn</u> B.O. No. 139. <u>5721-5-18.</u>				<u>Adjutant</u> <u>13. Canadian Command Depot,</u>
23-5-18	1st. CO RD	S.O.S. to 12th Res Bn	Witley	21-5-18	Part II 191
22-5-18	12th Bn	T.O.S. 12th Res Bn	Witley	21-5-18	Part II 122.

(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.

Casualty Form - Active Service

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				
2.12.18	^{ac} 12 th Res.	S.O.S. on posting to 1 st C.O.F.D.	Willy	30.11.18	part II 286. No same bar
1.12.18	^{ac} 1 st C.O.F.D.	T.O.S. on posting from 12 th Res Bn.	do.	30.11.18	part II 300
1.12.18	do.	S.O.S. on transfer to C.C.F. Canada.	do.	30.11.18	part II 323
6-12-18	Ob. Div. Ny	att. from 12 Res.	K.P. Co	3-12-18	PX. II - 1
11-12-18	-	Trans. to C.C.F.	-	11-12-18	" 6
					Base. A. Sunderland. N. for O.C.
12.12.18		Sailed from Liverpool			
		D.D.O. Part II T.O.S. No. 12 DISTRICT DEPOT	REGINA	12.12.18	
12.12.18	253-1110	Cleaning Dept Dundee Regina		11.1.19	
P.1.19	Ch Coy	Lieut. & A/Mjt.			Capt. O.C. Cavalry Company, No. 12 District Depot No. 12 District Depot

Lieut i/c Records
12th Res. Bn. C.E.F.

W.P. Sully CAPT.
Regina
ADJUTANT H.M.T.

Special
Capt.
O.C. Cavalry Company, No. 12 District Depot
No. 12 District Depot

ORIGINAL

D290

MEDICAL HISTORY SHEET.

Surname David Christian Name Felix

Examined on 25th day of March 1916
at Saskatoon

Approved by D. G. Cameron

Birthplace { City or Town Wolseley Sask
County Sask.

Rank Af. M.O.

Apparent age 21 yrs 3 mths

EXAMINED FOR RE-ENGAGEMENT. 20 APR 1917

Trade or occupation Farmer

M.O.

Height 5 Feet 7 1/2 Inches.

M.O.

Weight 160 Lbs.

M.O.

Chest measurement { Minimum 35 inches.

M.O.

Maximum expansion 40 1/2 inches.

M.O.

Physical development Good

M.O.

Small-Pox Marks none

M.O.

Vaccination Marks { Arm Right 0 Left 1
Number 1

VACCINATIONS.

When Vaccinated last childhood

4/1/16 Good MAC M.O.

(a) Marks indicating congenital peculiarities or previous disease none

F.A.B. J.C.G. Capt. C.A.M.O. M.O.
1918 G.C.D. M.O.

(b) Slight defects but not sufficient to cause rejection none

ANTI-TYPHOID INOCULATIONS, ETC.
June 8-16 Good MAC M.O.
June 16-16 Good MAC M.O.
June 22-16 Good MAC M.O.

Enlisted on 25 day of March 1916 at Saskatoon

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>46th OSBatt</u>	<u>201573</u>		<u>25 March 1916</u>
Transferred to	<u>15th Bn.</u> <u>12th Res Bn.</u>			<u>15 FEB 1918</u>

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>West Sandling</u>	<u>17. 11. 17</u>		<u>A III SAT</u>
<u>East Sandling</u>	<u>15. 1. 18</u>	<u>Myalgia</u>	<u>Dijudicio. A. J. Powell A.</u>
<u>12 C. C. P.</u>	<u>15. 5. 18</u>	<u>gsw - a. H. H.</u>	<u>A. J. Powell A.</u>
<u>Regina</u>	<u>10. 1. 19</u>	<u>nil</u>	<u>ambulance</u>

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

CANADIAN

Surname *David* Christian Name *Tellus*

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				
		15	6	17	22	6	17	GSW R Arm & Lead	8	Recovered and discharged to Unit A <u>111</u>	<i>Amstrong</i> "G" DIVISION. CAPT. C.A.M.C.
	No 12 CAN. GENERAL HOSPITAL.	24	10	18	13	11	18	Influenza	21	Lungs - clear	<i>Emmett</i>

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book. <i>ke.12</i> OLVT 25 Year 1917	Regimental No. 204573	Rank.	Surname. David	Christian Name. Felice
Station and Date. ROYAL MINERAL WATER HOSPITAL, BATH. 2ND. SOUTHERN GENERAL HOSPITAL BRISTOL.	Unit. 15th Canadian Infantry. 3rd Bde. 1st Div. Trench Mortar Battery	Age. 22	Service. 2 yrs	Disease Gonococcal arthritis
Date & place of injury: July 1917, Southampton & London	Condition on admission: - Fixed pain in lower hip & flying pain in other joints <i>Spencer Macdonald</i> <i>MO</i>			
Treatment. Thermal baths Massasp	Progress: - Satisfactory			
Condition on discharge: - Partly relieved				
Jan 7 /18	Transferred back to Discharged to (1) Duty <i>5 Res Bn Canadian Cavalry</i> <i>Spencer Macdonald</i> <i>MO</i>			

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

Station
and Date.

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... 96th. Overseas Battalion.
Canadian Highlanders.

(2) Regimental Number... 204573

(3) Full Name of Soldier... Felix David

(4) Place of Birth... Wolsley, Saskatchewan.

(5) Are you married, or not? ... No (Single)

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

(b) Present Postal Address.....

(7) Are you a widower?

(8) Have you any children? ... No

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

Also their names and ages.....

(9) Is your Father alive?.....Yes.....

If so, state name and address Ferdinand David, Dewar Lake, Sask.

(10) Is your Mother alive?.....Yes.....

If so, state name and address Grace David, Dewar Lake, Sask.

(11) If your Mother is a widow.....No.....

Are you her sole support, or not?.....No......

(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?.....No.....

If so, in what Company?.....

Have you made arrangements for payment of your Insurance premium.....

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

William James Major
for Officer Commanding.

Date.....July 20th......1916

Medical Examination upon leaving the Service of an Officer fit for general service or a Soldier fit for duty.

Officers leaving the Service upon being found unfit for general service by a Medical Board, and Soldiers leaving the Service upon being found otherwise than fit for duty by a Medical Board, are not to be reported on this Form.

Rank Private. Name DAVID. Surname FELIX
Unit or Corps 1st. C.O.R. (If a soldier) Regtl. No. 204573
Born at Wolsley, Saskatchewan, Canada. on date 14th. December 1896.
Signature (for identification) Felix David

The examination is to be made jointly by two Medical Officers.

1. PHYSIQUE—Any deformity, maiming or lameness? If so, describe.

Weight 170 lbs. good
Height 5 ft. 8 ins.

small scar R elbow
not adherent - no disability

2. NUTRITION AND DIATHESIS P

good

After searching inquiry and thorough examination is any evidence found of disease or impairment of the parts indicated below? If so, describe.

3. NERVOUS SYSTEM P

ny

4. RESPIRATORY SYSTEM.

ny

5. HEART P

Abnormal Sounds?

ny

Abnormal Size?

no

Pulse Rate?

78

Intermittence or irregularity?

no

6. ARTERIES.—Any hardening?

ny

7. DIGESTIVE SYSTEM P

ny

8. GENITO-URINARY SYSTEM P

ny

Urinalysis—s.g.?

1020

Reaction?

acid

Albumen?

ny

Sugar?

ny

9. SKIN, MIDDLE EAR, EYE

or any other part?

V.R.E 4/6 Cause hearing. V. S.E 4/6 normal. Mcabell capt came

10. Is there any evidence of impairment of health or physical condition not mentioned above? If so, describe.

no

11. Opinion as to the health and physical condition of the one examined?

good.

A.D.M.S. - HEADQUARTERS
CANADIAN TROOPS.
29 NOV. 1918
WITLEY, BURDEY.

Examined at

Witley

Signed

Mcabell capt came M.O.

Date

20-Nov-1918

Signed

Wolpers M.O.

If any disease or impairment of health or physical condition is discovered, this report should be sent at once to the O.C. concerned for the Officer or Soldier to be sent before a Medical Board for regular boarding.

Small near 1170
pitched on - 1000

170
8

wood

per

per

per

8

per

per

per

1050

per

per

per

1000
1000
1000
1000
1000

m

wood

wood

1000
1000

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 204573 (Rank) Private.

Name (in full) David, Felix, enlisted in

the 96th. Battalion,

CANADIAN EXPEDITIONARY FORCE at Saskatoon, on the 25th.

day of March 1916.

HE served in England

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

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

Age 25 1/12 years. Marks or Scars ---

Height 5 feet 7 1/2 inches.

Complexion Fresh.

Eyes Grey.

Hair Dark.

F. David
Signature of Soldier

[Signature]
Issuing Officer
Lt-Col.,
Rank

Date of Discharge 11-1-19. O.C./12 District Depot.

Appointment

Signed at Regina, this 11th. day of January 1919.

in Military District No. 12.

File Reference No. 124-D-12 D.D.

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

G.B. Rank Name **DAVID. Felix.** Reg'l No. **204573.**
 Unit **96th Battn** If in perm. Corps, } Married or Single **Single.**
 What Unit? }
 Place and Date of Enlistment **Saskatoon, March 25th 1916.** Place of Birth **Wolseley Sask.**
 Name and Address, Next-of-Kin **Ferdinand David,**
Dewar Lake P.O. Sask Canada. Relationship **Father.**
 Assigned Pay Monthly \$ Payable to Relationship
 Separation Allowance \$ Payable to Relationship

N/E. R.B. N. **5850**
 File R.L.
 Category **Reserve**
O'ceas has

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.	Character
Date.	From whom received.				
		Arrived in England S.S. Laconia 6-10-16			
10.10.16	96th. Bn	SOS to 92nd Bn.	E, Sandling	8-10-16	D, O, 279
20.10.16	92nd. Bn	TOS from 96th Bn.	E, Sandling	8-10-16	D, O, 266
13.11.16	---	S.O.S to 15 th Bn O'ceas	---	12.11.16	Pt II O. 290
16.11.16	96 th Bn	Taken on Strength Field	Field	13.11.16	Pt II O [#] 80
18.4.17	C.L. "	No. 8 Sta Hospital	Wimereux	10.4.17	C.L. 623 GSW Face Rarm Legs
20.4.17	C.L. "	To No. 3 Westn Gen Hosp.	Cardiff	16.4.17	G.L. B332 " " 7
27.4.17	15 Bn	Wounded Post to 1 CORP.	Field	14.4.17	Pt IO. 47 Dup ENTRY Report
23.4.17	1 CORP.	T.O.S.	W. Sandling	15.4.17	Pt II 45 Pt II - 129 d/16/17 Cancelled PR 224 d/19/17 (G.S.W. Face & R arm)
28-6-17	15 th Bn	Discharged Com. Dis. Conv. Hosp	Epsom	22-6-17	C.S.B. 389
28-6-17	1 st CORP.	S.O.S. to 5 th Res. Bn.	W Sandling	22-6-17	Pt ID.O. III Pt II 7.0.174 d/29/17

N/E. R.B. N. **16696**
 File R.L. REMARKS
 Taken from Official Documents.
 Category **CANLOR**
O'ceas has

A.F.B. 103 CHECKED
24 NOV. 1916
WZL.

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.				
14-7-17	15 th BN.	Adm. Mil. Hosp. Rochester Row. London S.W.	6-7-17	C.S.B. 400	General N.Y.D.
28-7-17	5th Res	S.O.S. on being found by C. of S. held on that date to be illegal as from R 7-17 Stoppage for deficiency of H/1779		Cancelled by P.II-286 d/18/10/17 of the 5th Res. W'Sandling 25717 P.II-203	
29.11.17	1 st CORPS	To. Mil. Hosp. Court Farm Warlingham	16.10.17	CL C 76(1)	V.D. P.
29.11.17		To. Bath Royal Naval Hosp. Bath.	23.11.17	CL C 76(1)	Myalgia
15.2.18	12 th Res	T.O.S. from 5 th Res.	Pt W'Shing 15.2.18	Pt II 40	(Pt II Lib d/15-2-18)
20.2.18	"	S.O.S. to 7 th CORPS Com 1 st a.c.d.	" 20.2.18	" 44	(1 st CORPS Pt II 53 d/22-2-18)
22.5.18	"	T.O.S. from 1 b.b.d.	" Witley 21.5.18	Pt II 01224141d/23.5.18	16000
19-11-18		Reduced to Lt (H.W.L.)	19-11-18	Pl 5275	
31211	12 Res	Attach Remel Parc	-	31211	Canc. P. 278 22-11-18 12 Res P-287
4-1-19	✓	Census on Com. Kimmel Pk. Pt. Witley + SOS to Canada	12-12-18	120-3	

No. *204573* RANK *Pte*

NAME *David Felix*

T. O. S. *255-16*
Do 75/273-16

UNIT *96th Battalion (Canadian Highlanders)*

M. D. *10*

			PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
PAID FROM	PAID TO	SIG. OR REC'T	PARTICULARS	AUTHORITY
<i>1916</i>	<i>1916</i>			
<i>Mar 25</i>	<i>Mar 31</i>	<i>v</i>		
<i>Apr.</i>		<i>v</i>		
<i>May.</i>		<i>v</i>		
<i>June.</i>		<i>v</i>		
<i>July.</i>		<i>v</i>		
<i>Aug.</i>		<i>v</i>		
<i>Sept.</i>		<i>v</i>		

UNIT SAILED
SEP 26 1916



Name **David Felix** Rank **Pte.**Reg. No. **204573.**Unit **15th. Batt.** **12. Res**~~5 Res Bn~~Next of Kin **Canada.**

1917.	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
	10-4 8 Sty Hos. Wimereux.	GSW. Face & R. Arm. A623. M2133.				
	15-4 3 W Gen Hos Cardiff.	do	LEG B332.			18-4
16-6-17	<i>6th Epsom</i>	<i>Do.</i>		<i>B384</i>		
22-6-17	<i>transferred</i>	<i>Do.</i>		<i>B389</i>		
6-7-17	<i>6th H. Berkhurst Row St</i>	<i>Transferred to 10</i>		<i>B400</i>		
16-10	<i>Unit. H. of Court Farm</i>	<i>Wokingham.</i>	<i>do</i>	<i>56</i>		
23-11	<i>Batt Royal Tunnard</i>	<i>Wales. Asp.</i>		<i>576</i>		
	<i>(1959) Bath</i>		<i>Myalgia</i>			
7-1-18	<i>Discharged</i>		<i>do</i>	<i>576</i>		<i>50795</i>
25.10	<i>12 6th H. Bransholt</i>		<i>Influenza</i>	<i>576</i>		<i>50795</i>
13 11	<i>Discharged</i>		<i>do</i>	<i>576</i>		<i>9207</i>

SURNAME.

David

12. CARD NO. ✓
S.O.S. No. 11-1-19. Demob.
Auth: D.O. 10 of 101-1-19.
FOLL. #12 B. 10.

CHRISTIAN NAMES

Felix

REGL. No.

204573

RANK

Pt.

UNIT

96th

B 10

FORMER CORPS

3 yrs, 26th L. H. Cadets.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

David, Ferdinand
Father

RELATIONSHIP TO SOLDIER

ADDRESS

Newar Lake, P.O.
Sask.

COUNTRY OF BIRTH

Canada, Wolsely, Sask.

DATE

Dec. 14th 1894.

PLACE OF ATTESTATION

Saskatoon, Sask.

DATE

Mar. 25th 1916.

8/S: 26-9-16, 5-60
5-

PIC 20-12-18 244
63

MARRIED

SINGLE *yes*

WIDOWER

TRADE OR CALLING

Farmer

RELIGION

Presbyterian

DESCRIPTION.

APPARENT AGE

21

YEARS

3

MONTHS

HEIGHT

5

FEET

7 1/2

INCHES

CHEST MEASUREMENT

40 1/2

INCHES

EXPANSION

4 1/2

INCHES

COMPLEXION

Fresh

EYES

Grey

HAIR

Dark

DISTINGUISHING MARKS

Nil.

MEDICAL EXAMINATION.

PLACE

Saskatoon, Sask.

DATE

Mar. 25th 1916.

Present Address —

Newar Lake, Sask.

Dew

Number 204573

Rank *Oste*

House

Surname DAVID

Christian Name Felix

Units 15th Bn CAN Theatre of War France

Date of Service 12-11-16

Remarks

Latest Address Dewar Lake 90

Roll No. Lask

200m. - 2-21. M. *B Page 22135.*

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

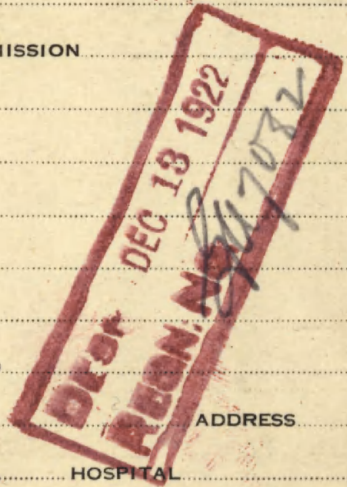
DATE OF DISCHARGE AS AN INVALID.....

DATE OF DEATH.....

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

OTHER INDEPENDENT CONDITIONS DIAGNOSED.....

NEXT OF KIN..... ADDRESS.....



..... HOSPITAL.....



12. Can Gen HOSPITAL.

AT.....

A. & D. No. 9717 PL. OF ACTION.....

RANK 1st REG. NO. 204573 UNIT 12th Reserve SICK OR WOUNDED

NAME David F AGE 22 RELIGION Conf.

PLACE IN HOSPITAL Ward 12.

DIAGNOSIS Influenza

ADMITTED 24 10 FROM H.

DISCHARGED NOV 13 1918 TO Hms

TRANSFERRED.....

SERVICE AT HOME 26/12. IN FIELD.....

RESULTS.....

(See Document Card for M.H. Sheet and other Documents.)

REGT'L NO 204573

H. Q. FILE NO. 649-

NAME

David Felix

RANK AND CORPS

Pte 15th Bn Norm 96

FOLLOWS

NO.

FOLLOWS

CABLE

No.

DATE

NATURE OF CASUALTY

"b"Adm # 8. Stat Hosp Thimier
Apr 10th 1917 Gen face it arm
legs. ✓progressing favourably (U.S.M.)
3rd Dist. Gen Hospital (U.S.M.)M2133 18-4-176-5-177-5-17M3463M3²73

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
A623	#8 Stat, Wimereux	10-4-17	G.S.W. face. R. arm & legs.
B.332	1st West. Gen. Cardiff	15-4-17	G.W. head, rt. arm & legs
B.387	16th Can. Div. Com. Epsham	16-6-17	face R. arm & legs
B.389	16th Can. Div. Com. Epsham (disc)	22-6-17	face & R. arm.
B.400.	Mil. Rochester Row S.W.	6-7-17	Venerical N. y. D.
C.76	Mil. Court Farm Warlingham	16-10-17	V. D. "Q"
C.76	Bath Royal. Mineral. Water Bath	23-11-17	Myalgia (1st. C. Regt)
C.122.	Disc.	7-1-18	Myalgia (1st. C. Ont.)
C.358	12 Can. Gen. Braunschweig	25-10-18	Influenza
C.372	Discharged	13-1-18	" " "

*Name DAVID, Felix Rank Pte. Regtl. No. 204573

Original Present Fyle Depot
unit unit 15th M. or S. Age Religion Ref. H.Q.

Port, ship, and date of arrival Regina 20-12-18

Next of kin (Father) O. F. David, Dewar Lake, Sask.

Address on leave Dewar Lake, Sask.

Address on discharge

Transportation issued Yes No Date Character on discharge Good

Previous occupation Date and place of enlistment

Diagnosis Date of Medical Boards

Date.	Remarks.	Pt. 2 Order No.
<u>12-12-18</u>	<u>T.O.S. and Posted to Casualty Co. pany from 25-12-18</u>	<u>253/1110</u>
	<u>Granted leave from 26-12-18 to 9-1-19 inc. Entitled</u>	
	<u>to wear 3 Blue Chevrons</u>	<u>253/1110</u>

Date.

Remarks.

Pt. 2 Order No.

10-1-19. Posted from Casualty Coy. to Discharge Section.

10-52

11-1-19 Discharged on demob.

10/51

Surname **David** Christian Name or Names **F** Reg. No. **204573**

Rank **Pte.** Unit **15th Bat.** Co. **1 C.O.** Troop **Dep.** Batty. **12 R.**

Hospital **8 Sta. Wimereux** Date of Admission **10-4-17**

Transferred **3 Western Gen Hosp Cardiff.** Hosp. **15.4.17**

Ep. m. bouval. Hosp. **16.6.17**

Mil Hosp. Rochester Row Hosp. **6.7.17**

Mil Hosp. Court Farm Warlingham Hosp. **16.10.17.**

Diagnosis **G.S.W. rt Arm Face Legs**

(1) Later Diagnosis (if changed) **Venerical A+D**

(2) **V.D.S. 140**

(3) **v. D. O.**

Additional Diagnosis: if more than one state present **Myalgia.**

Influenza

Dis 22.6.17.

DISPOSITION

C.L. 18-4-17 A 623

20.4.17 B 332

22.6.17 B 384

28.6.17 B 389.

14.7.17 B.400

Dis - 7-1-18. Date
" 13.11.18

REMARKS

Report received from Hosp by phone

Ch. 30.11.17 C.76.

25-1-18- C.122.

30-10-18 C 358-I

15.11.19 6372

7.11.18

A.M.D. 2 DEPT.

Bch. of O.A.M.S. O.M.F.S. London.

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1. Bath Royal Mineral Water. H. Bath. 23. 11. 77
12 cjt Bramshott 25. 10. 18

2.

3.

4.

5.

6.

7.

NAME & ADDRESS Pat. Felix David

AGE 22 yrs OCCUPATION Rt. No 20, 573, 15th Canadian 3rd T.M. B.

CASE BOOK NO. _____ PAGE _____ DISEASE mumps.

RESULT _____

DAY OF MONTH	25 th			26 th			27 th			28 th			29 th			30 th			DAY OF MONTH																		
	DAY OF DISEASE			DAY OF DISEASE			DAY OF DISEASE			DAY OF DISEASE			DAY OF DISEASE			DAY OF DISEASE																					
TIME	MORN			EVE			MORN			EVE			MORN			EVE			MORN			EVE			TIME												
107	4	8	12	4	8	12	4	8	12	4	8	12	4	8	12	4	8	12	4	8	12	4	8	12	4	8	12	4	8	12	4	8	12	4	8	12	
106																																					
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98																																					
97																																					
96																																					
PULSE				76		68	80		48	84		86	84		46	68		42	62		60	60		60										PULSE			
RESP.				22		20	22		24	28		26	26		24	22		22	18		18	18		18										RESP.			
MOTIONS.				1		0	0		A	0		EI.	0		0	0		0	A.		0	1		1										MOTIONS			
Fl. Oz.																																					Fl. Oz.
Sp. Gr.																																					Sp. Gr.
Reaction																																					Reaction
Abnorm- alities.																																					Abnorm- alities.

REMARKS _____

Area 7
Habitat
Serial No. in A. 2
Book

Field No.

CANADIAN ARMY DENTAL CORPS.

DENTAL CERTIFICATE.

NOTE:- This form will be attached to the Medical History sheet
of each Other Rank being returned to Canada for disposal. R.

REGTL. No. 204573* NAME DAVID F. RANK PTE UNIT 12 RES

Date of Examination

28-11-18

Present Dental Condition

Impit.

In case of loss, or decay of teeth,
is the loss due to wounds, injury,
or disease, directly attributable
to Active Service?

Yes.

Has he ever declined
Dental Treatment?

No.

Recommendation

1 Lower IillDate 28/11/18Station WitleySignature of Examining Officer J. S. Ross Capt.

C.A.D.C.

* Name should be entered in block letters.

CANADIAN ARMY DENTAL CORPS

DENTAL CERTIFICATE

This form is to be filled out by the dental officer in charge of the dental clinic at the station where the patient is being treated.

<p>NAME: <i>[Handwritten Name]</i></p> <p>UNIT: <i>[Handwritten Unit]</i></p>	<p>DATE OF EXAMINATION: <i>[Handwritten Date]</i></p>
<p><i>[Handwritten Notes]</i></p>	<p>PRESENT DENTAL CONDITION: <i>[Handwritten Description]</i></p>
<p><i>[Handwritten Notes]</i></p>	<p>IS THERE ANY HISTORY OF DENTAL DISEASE OR TRAUMA? <i>[Handwritten Answer]</i></p>
<p><i>[Handwritten Notes]</i></p>	<p>RECOMMENDATION: <i>[Handwritten Recommendation]</i></p>
<p><i>[Handwritten Notes]</i></p>	<p>REMARKS: <i>[Handwritten Remarks]</i></p>

DATE: *[Handwritten Date]*

STATION: *[Handwritten Station]*

SIGNATURE OF EXAMINING OFFICER: *[Handwritten Signature]*

NAME OF DENTAL OFFICER: *[Handwritten Name]*

GRADE: *[Handwritten Grade]*

UNIT: *[Handwritten Unit]*

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.



Eg 7

Name **David, Felix**
Surname Christian Name

Regimental Number **204573** Rank **Pte**

Address (in full) **Dewar Lake, Sask**

Unit **96th Bn**

Original Unit

District where paid **M.D. 12**

Date of Discharge **11-1-19**

P. D. P. Filing Number

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

L. L. 48038—M. & D. 9245.

Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Over-payments to be Recovered	Total Amount Paid
	Cheque No. A	Date	Amount 30 days	Cheque No. B	Date	Amount 30 days	Cheque No. C	Date	Amount 31 days		

M. F. W. 127.
25M, -8-18.
1772-89-1140.

Remarks: **Account opened 17-1-19**

File No.....

WAR SERVICE GRATUITY.

Register No.....

Reg. No. W. S. G. File No.

Award days at \$ per day \$

Name months at \$ per mo. \$ \$

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

..... Less further debit balance \$

..... Net due paid as below

TO SOLDIER'S DEPENDENT

U	Ag. No.	Pay	Rate	Due	Amount
1					
2					
3					
4					
5					
6					

Dependent.....

Address.....

Pay Soldier \$..... Pay Dependent \$.....

Days..... Rate..... Due.....

Less P.D.P. credited.....

Less further Dr. Bal..... or overpayment.

Net.....

Date	Ck. Order	Ck. No.	Amount	Remarks	Date	Ck. Order	Ck. No.	Amount
1					1			
2					2			
3					3			
4					4			
5					5			
6					6			

495-D.P.-100M-6-19 (10248).

GEN'L AUDITOR
 Posting checked by

 Date.....

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

OTTAWA, CANADA.

Declaration required of Officers, Warrant Officers and Men who claim War Service Gratuity under Order-in-Council (P.C. 3165), dated 21st December, 1918.

If the applicant will enquire at the local Branch of the Canadian Patriotic Fund he will be informed if there is an official who will take this Declaration free of charge.

A complete reply must be given to every question in this Declaration. There must be no blanks and no dashes. If any questions are not applicable, the words "NOT APPLICABLE" must be written out.

On completion this Declaration is to be returned to THE DISTRICT PAYMASTER OF THE DISTRICT IN WHICH THE SOLDIER WAS DISCHARGED.

1. Christian names *Felix* 2. Surname *David*
3. Rank *Pte* 4. Original Unit *96th Batta* 5. Reg. No. *204573*
6. Address, in full, to which future payments of gratuity are to be forwarded
Felix David
Dewar Lake, Sask.
7. Date of enlistment in the C.E.F. *March 20th 1916*
8. Names of dependent, if any, to whom ~~Separation Allowance~~ *assignment* is being issued, or was being issued, immediately prior to your discharge *Ferdinand David*
9. Relationship of such dependent *Father*
10. Address, in full, of such dependent *Ferdinand David*
Dewar Lake, Sask.
11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? *NO*
12. Were you at any time on the strength for pay and allowances of a unit of the C.E.F. which was out of Canada or the United States when such pay and allowances were issuable? If so, give particulars of one such unit and dates of service overseas with such unit:—
12th Reserve Batta March 1st until
December 1st. 1918
13. Were you on the strength for pay and allowances of the Clearing Services Command, having been at any time on duty outside of Canada or the United States? *NO*
14. Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service *NO*
15. Give total length of time which you served on active service, whether in Canada or Overseas, setting out particulars of units on whose strength you served *34 months*
5 months 96th Batta. 7 months 15th Batta
8 months 12th Reserve Batta.
16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department *NO*
17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.? *NO*

61-1-11

P. 159

18. Have you had more than one enlistment? If so, give particulars of discharges and re-enlistments, and under what regimental numbers and units. *No*
19. Have you already received any payment of Post Discharge Pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid
20. Have you been issued with a War Service Badge? If so, what class? *No*
21. Have you, during the present war, served in the Imperial Forces? *No*
22. Are you entitled to receive, or have you received any gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled
23. (a) Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England? *No*
- (b) If so, was such reversion in consequence of misconduct or inefficiency? *No*
24. Are you now serving in the C.E.F.? *Yes* If not, give:—(a) Date of discharge
7 11 1-19 (b) Reason for discharge
on demobilization
25. Are you at present a member of and in receipt of pay and allowances from any Canadian naval or land forces? If so, give unit *M.D. No 12*
26. Did you at any time serve at the front in an actual theatre of war? If so, give particulars of one unit which you served at the front, and dates of such service with that unit
- 15th Battrn 10th Oct. 1916 until*
12th April 1919
27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment?
- (b) If so, are you in receipt of full pay and allowances from that Department?

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

Signature of Applicant: *Felix David*

Place of Residence: *Duvar Lake. Sask*

Declared before me at: *Pagina*

This *11* day of *Jan* 19*.19*

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

J. McArthur

POST DISCHARGE PAY.

Date paid.	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
.....
.....
.....

Certified Correct.

District Paymaster

Temporary

To be used (a) for recruits enlisting direct into the Regular Army, and (b) for men of the Territorial Force when they are admitted to Hospital. Army Form B. 178^A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname *David*

Christian Name *F.*

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
Rank Medical Officer.

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

Joined on enlistment	Corps	Regtl. No.
	<i>3 T N B</i>	<i>204573</i>
Transferred to		

Became non-effective by
on day of 191.....
(Signature)
(Rank)



TABLE III.—Boards; Courts of Enquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, etc.

Date	Brief details, and Signature

TABLE IV.—Service Table.

Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation

TABLE II.—Only for admissions to Hospital or to the Sick List in case of Warrant Officers treated in quarters.

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of 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 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
	Day	Month	Year	Day	Month	Year				
	6	7	17	16	10	17	Syphilis	103	P.P. 1/6000-1/4000-1/3000. Agnoz 1/5000 Sin Tot 1/5000 Chloro 30 Min. Alkaline M. salt. Fluor. Vacc. (14)	<i>[Signature]</i> C.S. M. P.A.M.C.
	16	OCT	1917	23	11	17	Syphilis	39	Route treatment transferred to Bldg for special treatment	<i>[Signature]</i> Capt. [Name]
ROYAL MINERAL WATER HOSPITAL, BATH.	25	11	17	7	1	18	Gonorrhoea	46	Ficed pain in L Hip. Flaying pain in other joints. Treatment - Thermal baths & Massage - Pains relieved. Discharged to (1) Duty.	<i>[Signature]</i> [Name]

23 Oct 17

To be used (a) for recruits enlisting direct into the Regular Army, and (b) for men of the Territorial Force when they are admitted to Hospital. Army Form B. 178^A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname *David*

Christian Name *Felix*

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

Rank
Medical Officer.

Enlisted { at
on day of 191

Joined on enlistment Corps *15 Canadian* Regtl. No. *207573*

Transferred to {

Became non-effective by

on day of 191

(Signature)

(Rank)

TABLE III.—Boards; Courts of Enquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, etc.

Table with 2 columns: Date, Brief details, and Signature. The table is mostly empty.

TABLE IV.—Service Table.

Table with 3 columns: Station or Troopship, Date of arrival or embarkation, Date of departure or disembarkation. The table is mostly empty.

TABLE II.—Only for admissions to Hospital or to the Sick List in case of Warrant Officers treated in quarters.

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of 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 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
	Day	Month	Year	Day	Month	Year				
Warrant Officer Bardiff	15	X	17	15	6	17	Gonorrhoea "11" 3 in elbow 2 in wrist	62	all shortened Two TB's removed Convalescent 25.4.17 transferred Sanatorium for mumps.	M. Broad
Warrant Officer Candiff	15	4	17	12	5	17	Mumps		Ordinary case and treatment Transfer from CCH.	T. Broad Major M. Broad Capt.

Medical Examination upon leaving the Service of an Officer fit for general service or a Soldier fit for duty.

Officers leaving the Service upon being found unfit for general service by a Medical Board, and Soldiers leaving the Service upon being found otherwise than fit for duty by a Medical Board, are not to be reported on this Form.

Rank..... *Plt* Name..... *David* Surname..... *Felix*
 Unit or Corps..... *12th Reserve* (If a soldier) Regt. No. *204573*
 Born at..... *Walsley Sask.* on, date..... *14th Decr 1896*
 Signature (for identification)..... *F. David*

The examination is to be made jointly by two Medical Officers.

1. **PHYSIQUE**—Any deformity, maiming or lameness? If so, describe. *no*

Weight..... *170* lbs.
 Height..... *5* ft. *8* ins.

2. **NUTRITION AND DIATHESIS ?**
normal

After searching inquiry and thorough examination is any evidence found of disease or impairment of the parts indicated below? If so, describe.

3. **NERVOUS SYSTEM ?**
normal

4. **RESPIRATORY SYSTEM.**
normal

5. **HEART ?** *normal*
 Abnormal Sounds? *none*
 Abnormal Size? *no*
 Pulse Rate? *40* Intermittence or irregularity? *none*

6. **ARTERIES.**—Any hardening? *no*

7. **DIGESTIVE SYSTEM ?**
normal

8. **GENITO-URINARY SYSTEM ?** *normal*
 Urinalysis—s.g.? *1025* Reaction? *acid* Albumen? *no* Sugar? *no*

9. **SKIN, MIDDLE EAR, EYE**
 or any other part? *normal*

10. Is there any evidence of impairment of health or physical condition not mentioned above? If so, describe. *no*

11. Opinion as to the health and physical condition of the one examined? *good*

Examined at..... *Bunsey Park* Signed..... *J. R. [Signature]* M.O.
 Date..... *5-12-18* Signed..... *J. W. [Signature]* M.O.

If any disease or impairment of health or physical condition is discovered, this report should be sent at once to the O.C. concerned for the Officer or Soldier to be sent before a Medical Board for regular boarding.

Medical Examination upon leaving the service
of an Officer in the general service of a Soldier in the Army

1. NAME	
2. GRADE	
3. REGIMENT AND DISTRICT	
4. SERVICE SYSTEM	
5. RESPIRATORY SYSTEM	
6. HEART	
7. STOMACH AND INTESTINES	
8. NERVOUS SYSTEM	
9. UROGENITAL SYSTEM	
10. SKIN, NAILS AND EYES	
11. HEAD, EARS, NOSE AND THROAT	
12. CONCLUSION	

[Faint handwritten signature and text at the bottom of the page]

General Medical Board
REGINA, SASK.

Medical Examination upon leaving the Service
of an Officer fit for general service or a Soldier fit for duty.

Officers leaving the Service upon being found unfit for general service by a Medical Board, and Soldiers leaving the Service upon being found otherwise than fit for duty by a Medical Board, are not to be reported on this Form.

Rank *Pte.* Name *Felix* Surname *DAVID.*
 Unit of Corps *12-D-D.* (If a soldier) Regtl. No. *204573.*
 Born at *Walsley, Sask.* on, (date) *Dec. 12th 1896*
 Signature (for identification) *Felix David*

The examination is to be made by one Medical Officer.

1. PHYSIQUE—Any deformity, maiming or lameness? If so, describe.

Weight *156* lbs. *stuffed*

Colour of eyes

Grey

Height *5* ft. *8* in.

Identification Marks, Scars, etc.

Scar over shoulder at arm

2. NUTRITION AND DIATHESIS?

Very good

After searching enquiry and thorough examination is any evidence found of disease or impairment of the parts indicated below? If so, describe.

3. NERVOUS SYSTEM? Is there a history of previous disability?

Normal - no

4. RESPIRATORY SYSTEM? Is there a history of lung trouble?

Normal - no

5. HEART ?

Abnormal Sounds ? *none*Abnormal Size ? *no*Pulse Rate ? *78*Intermittence or Irregularity ? *no*Muscular Tone ? *good*6. ARTERIES.—(a) Any hardening or nodulation ? *no*(b) Blood Pressure. *Systolic 132 mm Diastolic 102 mm Hg*7. DIGESTIVE SYSTEM ? (Condition of teeth and tonsils to be included). *good**Tonsils enlarged*

8. GENITO-URINARY SYSTEM ?

Urinalysis—S.G. ? *1021*Reaction ? *acid*Albumen ? *none*Sugar ? *none*9. SKIN, MIDDLE EAR, EYE
or any other part ?

Vision :

Rt. Eye.....

L. Eye.....

Hearing :

Rt. Ear.....

L. Ear.....

10. Is there any evidence of impairment
of health or physical
condition not mentioned above?
If so, describe.*No - no myalgia. G.S. is no disability*11. Opinion as to the health and
physical condition of the one
examined ?*Fit - A.*

Examined at.....

Signed.....

M. O.

Date.....

Signature note of Soldier.

If any disease or impairment of health or physical condition is discovered or complained of by the soldier examined, this report must be sent at once to the O. C. concerned and the Officer or Soldier brought before a Medical Board.

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

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

Regimental No. 204573 Rank Pte Name Demé. David J.
 Corps No. 12 District Depot. who was* Discharged.
 On 11-1-19 191... to 191...
 *Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1-12-18 191...
 to 11-1-19 191..., the inclusive date of transfer or discharge.

Dr.			Cr.		
	\$	c		\$	c
Bal. Dr. from prev. month			Balance Cr. from prev. month	203	90
Advances by Cheques } No. <u>186/106</u>	50	00	Reg'l. Pay <u>42</u> days at \$ <u>1</u> c	42	00
			Field Allow. <u>42</u> days at \$ <u>10</u> c	4	20
Assigned Pay and Sep'n All'ce No.			Separation Allowances* (Monthly)		
Other charges			Other Allowances* <u>C.C. Allow.</u>	35	00
Payment on transfer or discharge No. <u>186/117</u>	317	25	Other Credits <u>Subs. on Leave</u>	12	00
Balance Cr. (to be paid by the new unit)			<u>Xmas Allow.</u>		25
Total	367	25	Bal. Dr. (to be deducted by new unit)	70	00
			Total	367	25

*Give particulars: 70.00 U.S.G. Advances, & Chgd.

A monthly stoppage of \$ 15.00 (†) has (‡) been paid on account of Assigned Pay for the month of December 1918 and Sep'n All'ce. for month of 191... (to) Assignee Mrs. J. Demé.
 (Address) Dower, Lake, Sask.

(†) Insert amount to be assigned, whether it has been paid or not.
 (‡) Insert "not" if amount has not been paid for period of account.

On Transfer of an Officer

Outfit Allowance of \$..... has been paid by Paymaster, Military District No.....

REMARKS:—

- State (1) date of enlistment
- (2) if married and if a Separation Allowance Card has been submitted No
- (3) cause of discharge On Demob. authority R.C. 10
- (4) authority for transfer

NOTE.—Separation Allowance and Assigned Pay Card and Index Card (M.F.W. 71) are to accompany the original Last Pay Certificate on transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay List of the Unit.
 Date Jan 13th 1919
 Place Regina, Sask.
J. Campbell Captain, Paymaster, No. 12 District Depot.

N.B.—For purposes of transfer this form is to be made out in quadruplicate. Original copy to paymaster of new unit, duplicate to District Paymaster; triplicate to accompany the pay list at the end of the month and quadruplicate for retention as a record.
 For purposes of discharge it is to be made out in triplicate. Original copy to accompany discharge papers; duplicate to accompany pay list at the end of the month, and triplicate for retention as a record.
 If a man on discharge is entitled to three months' Post Discharge Pay, Last Pay certificate will be made out in quadruplicate. The original Last Pay Certificate will be forwarded with other documents to Paymaster Post Discharge Pay and triplicate, with his discharge documents.

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

The form to be used for the purpose of settling the accounts of the members of the Canadian Contingent Expeditionary Force.

Name of member: _____
Rank: _____
Regiment: _____
Service number: _____
Date of entry: _____
Date of departure: _____

Description	Amount
Basic pay	...
Gratuity	...
Travel allowance	...
Medical allowance	...
Other allowances	...
Total	...

Signature of member: _____
Signature of commanding officer: _____
Date: _____

Amount to be paid: _____
Outstanding in Order: _____

Remarks: _____

WILSON'S

eyes

eyes OK

DUPLICATE.

MEDICAL HISTORY SHEET.

Surname David Christian Name Felix

Examined on 25th day of March 1916 at Saskatoon

Approved by J. Cameron

Birthplace City or Town Wolsley Sask County Sask Rank of M.O.

Apparent age 21 yrs 3 mths

Trade or occupation Farmer

Height 5 Feet 7 1/2 Inches

Weight 160 Lbs

Chest measurement Minimum 35 inches Maximum expansion 40 1/2 inches

Physical development Good

Small-Pox Marks None

Vaccination Marks Arm Right 0 Left 1 Number 1

When Vaccinated last Childhood

(a) Marks indicating congenital peculiarities or previous disease none

Table with columns: Date, Result, ANTI-TYPHOID INOCULATIONS, ETC. Entries: June 2/16 Good Seal, June 8/16 Good Seal, June 16/16 Good Seal

Enlisted on 25 day of March 1916 at Saskatoon

Table with columns: CORPS, REG'T NUMBER, HABITS, DATE. Entry: 96th OS B Coy 204573 Canadian High 25 March 1916

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Table with columns: STATION, DATE, DISEASE, RESULT

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

* Strike out whichever inapplicable.

ASSIGNED PAY	ENGLAND OR CANADA.	SEPARATION ALLOWANCE.	ENGLAND OR CANADA.	NAME:-
EFFECTIVE DATE:-		EFFECTIVE DATE:-		NUMBER
AMOUNT:-		AMOUNT:-		
NAME, ADDRESS, RELATIONSHIP & AUTHORITY		WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.		
<i>1/12/18</i> Mr Ferdinand David Lower Lake Saskatchewan Dist.				

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS				UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK			
DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
15.11.18	3121	12 Reo. Bm.	24 33				
27.11.18	3350		24 33				
19.11.18	BC. 275	Forfeit 1 day Pay R.W.	1 10				

PARTICULARS OF RENDERING NON-EFFECTIVE: *To Canada 1/12/18 Auth 473 24/11/18*

MONTH	PARTICULARS	CR 1	CR 2	PARTICULARS
1918				
24/11	Bac fund			
Apr	Error March Balce P.P.	3410		AR 101 AR 732 26/4
		33		
		67 10		
May	P.P.	3410		AR 1183 14 May ICCS b.a.p.
		3410		AR 667-23/5/18-12 Reo
June	P.P.	33		b.a.p.
				AR 896-14/6/18-12 Reo
		33		AR 1044-26/6/18 do
July	P.P.	3410		b.a.p.
		3410		AR 1191-2/7/18-12 Reo
Aug.	R.P.	3410		cap.
				AR 1733 14-8-18 12 Reo
				" 1928 23-8-18 "
Sept	R.P.	33		b.a.p.
				AR 2184 12/9 ✓
				" 2361 20/9 ✓
Oct	✓	3410		cap
				AR 2619 9/10 ✓
		3410		

forward

ENGLAND OR CANADA. SEPARATION ALLOWANCE. ENGLAND OR CANADA. NAME: DAVID Delise. NUMBER: 304573

EFFECTIVE DATE: 1/2/18. AMOUNT: PARTICULARS OF RANK OR APPOINTMENT

RELATIONSHIP & AUTHORITY: *David* *Delise* *Catchman* *Delise*. WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.

UNIT AND TRANSFERS: ORIGINAL UNIT: *96 Bvt*. DATE ACCOUNT FIRST OPENED: *1 Oct 1916*

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

UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
<i>Bo. Bn.</i>	<i>24 33</i>				
<i>A</i>	<i>24 33</i>				
<i>bits 1 day Pay R.W.</i>	<i>1 10</i>				

DAILY RATES OF PAY AND ALLOWANCES: AUTHORITY, PAY, F.A., P.F.A., SUBS CE ALL'CE

RENDERING NON-EFFECTIVE: *To Canada 1/2/18 Cnd 473 24/1/18 br. Balce. #293 27*

PARTICULARS	CR 1	CR 2	PARTICULARS	DR 1	DR 2	DR 3	DR 4	BALANCE	DEFERRED	SEPARATION
<i>e fund</i>								<i>23164</i>	<i>270</i>	
<i>March's Balce</i>	<i>3410</i>		<i>AR 101</i>	<i>2920</i>					<i>285</i>	
<i>P.P.</i>	<i>33</i>		<i>AR 732 7/14</i>	<i>2433</i>						
	<i>6710</i>			<i>5353</i>				<i>21521</i>		
<i>P.P.</i>	<i>3410</i>		<i>AR 1183 14 May. ICCA</i>	<i>973</i>						
	<i>3410</i>		<i>b.a.p.</i>				<i>15</i>			
	<i>3410</i>		<i>AR 667-23/5/18-12 Res</i>	<i>1217</i>				<i>26241</i>	<i>285</i>	
	<i>33</i>			<i>2190</i>			<i>15</i>			
<i>P.P.</i>	<i>33</i>		<i>b.a.p.</i>				<i>15</i>			
	<i>3410</i>		<i>AR 896-14/6/18-12 Res</i>	<i>243</i>				<i>25555</i>	<i>285</i>	
	<i>33</i>		<i>AR 1044-26/6/18-10</i>	<i>243</i>			<i>15</i>			
	<i>3410</i>		<i>b.a.p.</i>				<i>15</i>	<i>27465</i>		
	<i>3410</i>		<i>AR 1191-2/7/18-12 Res</i>	<i>973</i>				<i>26492</i>	<i>285</i>	
	<i>33</i>			<i>973</i>			<i>15</i>			
<i>R.P.</i>	<i>3410</i>		<i>b.a.p.</i>				<i>15</i>	<i>28402</i>		
			<i>AR 1733 14-8-18 12 Res</i>	<i>243</i>						
			<i>" 1928 23-8-18 "</i>	<i>243</i>				<i>27916</i>	<i>285</i>	
	<i>3410</i>			<i>486</i>			<i>15</i>			
<i>R.P.</i>	<i>33</i>		<i>b.a.p.</i>				<i>15</i>	<i>29716</i>		
	<i>3410</i>		<i>AR 2184 12/9</i>	<i>243</i>						
	<i>33</i>		<i>" 2361 20/9</i>	<i>243</i>				<i>29230</i>	<i>285</i>	<i>de speed 20/9/18</i>
	<i>3410</i>			<i>486</i>			<i>15</i>			
<i>✓</i>	<i>3410</i>		<i>bal</i>				<i>15</i>	<i>31140</i>		
	<i>3410</i>		<i>AR 2619 9/10</i>	<i>487</i>				<i>30653</i>		
				<i>487</i>			<i>15</i>			

473 20/4

forward

NUMBER 204573

RANK

Pte.

NAME

DAVID

7.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED
1918	Balance Forward								306 53	285
Nov-	P. Pay	33		b.a.P.				15		
	Int. on D. Pay to 21/10/18	19		at 31. 15/11						
		52		✓ 3350 27/11	24 33					
		52			24 33			15	294 87	
Jan				Do 27 5/11 P. 12 pay 1/11		110			293 77	

CANADIAN
ASSIGNED PAY AUDITED

O.K.

awg Harris
AUDIT CLERK

DATE 22-5-19

NAME DAVID 7.

1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
							306 53 285		
		b.a.p.				15			
		at 2131. 15/11							
		✓ 3350 27/11							
			74 33						
			24 33			18			
			48 66				294 87		
		2750 p.p. 18 pay OKL 17/11		110					
				110			293 77		

CANADIAN
ASSIGNED PAY AUDITED

OK

ang Harris
AUDIT CLERK

DATE 22-5-19

P. 559.
MARRIED OR SINGLE

Single

PLACE OF BIRTH

Woleley, Leek, Canada

NAME AND ADDRESS OF NEXT OF KIN

*Jordana David,
Dewar Lane, Leek.*

RELATIONSHIP OF NEXT OF KIN

Father

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY \$

EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

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

DATE	PAY		FIELD ALLOWANCE		WORKING OR SPECIAL PAY		ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS									
	NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE				AMOUNT		1		2		3			
			\$	C.						\$	C.	No.	DATE	No.	DATE	No.	DATE	No.	DATE
<i>Oct</i> 1-6	<i>6</i>	<i>1</i>	<i>6</i>	-	<i>6</i>	<i>10</i>	-	<i>60</i>	<i>1.99</i>	<i>1.99</i>									
<i>7-31</i>	<i>25</i>	<i>1</i>	<i>25</i>	-	<i>25</i>	<i>10</i>	-	<i>250</i>		<i>127.50</i>									
<i>Nov</i> 1-30	<i>30</i>		<i>30</i>	-	<i>30</i>		-			<i>33</i>									
<i>Dec</i> 1-31	<i>31</i>		<i>31</i>	-	<i>31</i>		-	<i>3.10</i>		<i>34.10</i>									
				-			-	<i>9.20</i>		<i>9.20</i>									
<i>1917</i> <i>Jan</i> 1-31	<i>31</i>	<i>1.10</i>	<i>34</i>	<i>10</i>						<i>34.10</i>									
<i>Feb</i> 1-28	<i>28</i>		<i>30</i>	<i>80</i>						<i>30.80</i>									
<i>Mar</i> 1-31	<i>31</i>		<i>34</i>	<i>10</i>						<i>34.10</i>									
<i>April</i> 1-28	<i>28</i>		<i>30</i>	<i>80</i>						<i>30.80</i>									
<i>30/4</i>	<i>2</i>		<i>2</i>	<i>20</i>						<i>22.99</i>									
<i>30/5</i>	<i>30</i>		<i>33</i>							<i>33</i>									
<i>30/5</i>	<i>1</i>		<i>1</i>	<i>10</i>						<i>1.10</i>									
			<i>267</i>	<i>30</i>							<i>1.99</i>	<i>269.29</i>							

Checked *W.P. Hill*

625 12/10
901 3/10/12
922 9/11/16
9040 2/11
CRB
1788 3/12
1405 12
1861 1
1934 2
2022 3/3/17
39. 2/2/17
37M. Baly
P3. Casaliff
17/4
P3. Casaliff
24/4
5-13-4 6/4

204593 The David P

DATE	PAY				FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS								CASH PAYMENTS												
	NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT					1		2		3		4		1	2	3	4									
			\$	C.			\$	C.			\$	C.				No.	DATE	No.	DATE	No.	DATE	No.	DATE													
			267	30									1	99	269	29									26	31	15	65	19	14						
30/6	30	10	33												33																					
July 31	31		34	10											34	10																				
Aug	31		34	10											34	10																				
Sept	30		33												33																					
			401	50										1	99	403	49																			

9588 5/6 Card off.
 9142 26.5. 3rd W. Gen.
 9142 16.5.
 9989. 12.6 Cardiff

9/18
 Cash 24/4
 Rem 13/9
 Cash 4/9

Rem 9/0
 " 17/0

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	BALANCE	DR. SEP. ALLOE. PAY ENG.
							270 57	160
Oct	P.F.	34 10		Rem 2950 10/17 10/17 10/17	24 33		280 34	195
Nov	P.P.	34 10			24 33			
				AR 523 72. 1495. 22/11. Epsom 48 60				
				AR 1431 18/6 66 Steps 9 73				
				R. 8367 4/12/7. 2nd BORR 9 73				
				AR 4300 9/11 London 4 87				
				AR 36604 11 London 4 87				
				AR 95473 10/17 London 4 87				
Dec	P.F.	34 10					269 57	225
		67 10						
Jan	P.P.	34 10		AR 1175-21/15 W 4149 3rd W Gen. Cardiff 8 40				
				AR 2817 6/31/8. 17 Rach Rom 21 -				
				AR 196 28/9 18 " 16 80				
				AR 16/10 6/26/10 KCESTN 824 6 60				
				Rem Ldn 9/15/22-9/18 24 33			221 67	210
		34 10			29 20	52 80		
Feb		30 80		AR 1999 20/18 5 Res. 9 73				
				1480 14/2/18 5 Res. 24 33			218 41	255
		30 80			24 06			
March	P.P.	34 10		AR 3205. 20/18 18 Res. 9 73				
				AR 51. 6636 23/11/17 Wokingham 08				
				AR 3650 12/3/18 14 Res. 9 73				
				AR 2466 7/18 do 9 73				
		8 40					1975 4270	
		34 10	8 40		29 27			


note 3414.
 Mad. Hospital Stoppage
 debited in error
 May 12 25 1917.

Proceedings on Discharge.

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

No.	204 573
Rank	Pte.
Surname	Kelso David
Christian name	David Felix
NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.	
Corps (Squadron, Battery or Company)	86 Bn.
Date of discharge	11 th Jan. 1919
Place of discharge	Regina

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age	25	years	1	months.	Descriptive marks 
Height	5	feet	4 1/2	inches.	
Complexion	Fresh.				
Eyes	Grey				
Hair	Dark.				
Trade	Farmer.				
Intended place of residence (To be given as fully as practicable.)	Dewar Lake Sask.				

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

Authority for discharge *DDO 10.17.*

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

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

Very good

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

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

*Emaco
27-1-19*

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

only

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

6. Medals and Decorations.....

*Local Casualty
England*

To be copied by the Commanding Officer on to the parchment Discharge Certificate.

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

(Place)..... *Regma*.....

J. J. Jones Lt. Col.
Officer Commanding
Commanding..... *No. 12 District Depot*

(Date)..... *11. 1. 19*.....

8. Certificate to be signed by the Soldier on Discharge

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

(Place)..... *Regma*..... *F. David*..... (Signature of Soldier.)

(Date)..... *11. 1. 19*..... *P. W. Bamister*..... (Signature of Witness.)

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

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

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

..... (Signature of Soldier.)

10. Statement of Service.

Service toward Engagement to.... (the date to which the Record of Service is completed)..... *2* years *297* days.

Total..... *2* years *297* days.

11. Confirmation of Discharge.

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

(Place)..... *Regma*.....

(Signature)..... *J. J. Jones Lt. Col.*
Officer Commanding
No. 12 District Depot

(Date)..... *11. 1. 19*.....

Reservations referred to at Para. 8.

(To be signed by the soldier. When there are none, it is to be so stated, and signed by the soldier.)

*I hereby certify that there are
no reservations.*

F David

List of Discharge Documents.

<p>Reg. Conduct Sheet, Militia form B. 263</p> <p>Squadron } Battery } Conduct Sheet, " B. 263a Company } or Field Conduct Sheet " W. 178</p> <p>Copies of Convictions, by C. P. in MS.</p> <p>Med. Hist. Sheet, Militia form B. 313</p> <p>Casualty Form " W. 54</p> <p>Medical Report for Invalid§ " B. 227</p> <p>Dental History Sheet " B. 465</p> <p>Last Pay Certificate " W. 44</p> <p>Duplicate Discharge Certificate " W. 39A</p> <p>‡Form of Will " W. 82</p> <p>§Only if discharged "Medically unfit."</p> <p>‡Only if man has not been overseas.</p>	<p>Attestation Paper Militia Form W. 23 or Particulars of Recruit " W. 133</p> <p>Proceedings on Discharge " B. 218</p> <hr/> <p style="text-align: center;">In the case of recruits who are rejected on final approval, the discharge documents will consist of</p> <p style="text-align: center;">(a) Proceedings on Discharge.</p> <p style="text-align: center;">(b) Attestation.</p> <p style="text-align: center;">(c) Medical History Sheet.</p>
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Documents not accompanying this form should be crossed out.

I hereby certify that the following documents are unobtainable.

Officer Commanding.

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

CLINICAL CHART.
(To be attached to Case Sheet.)

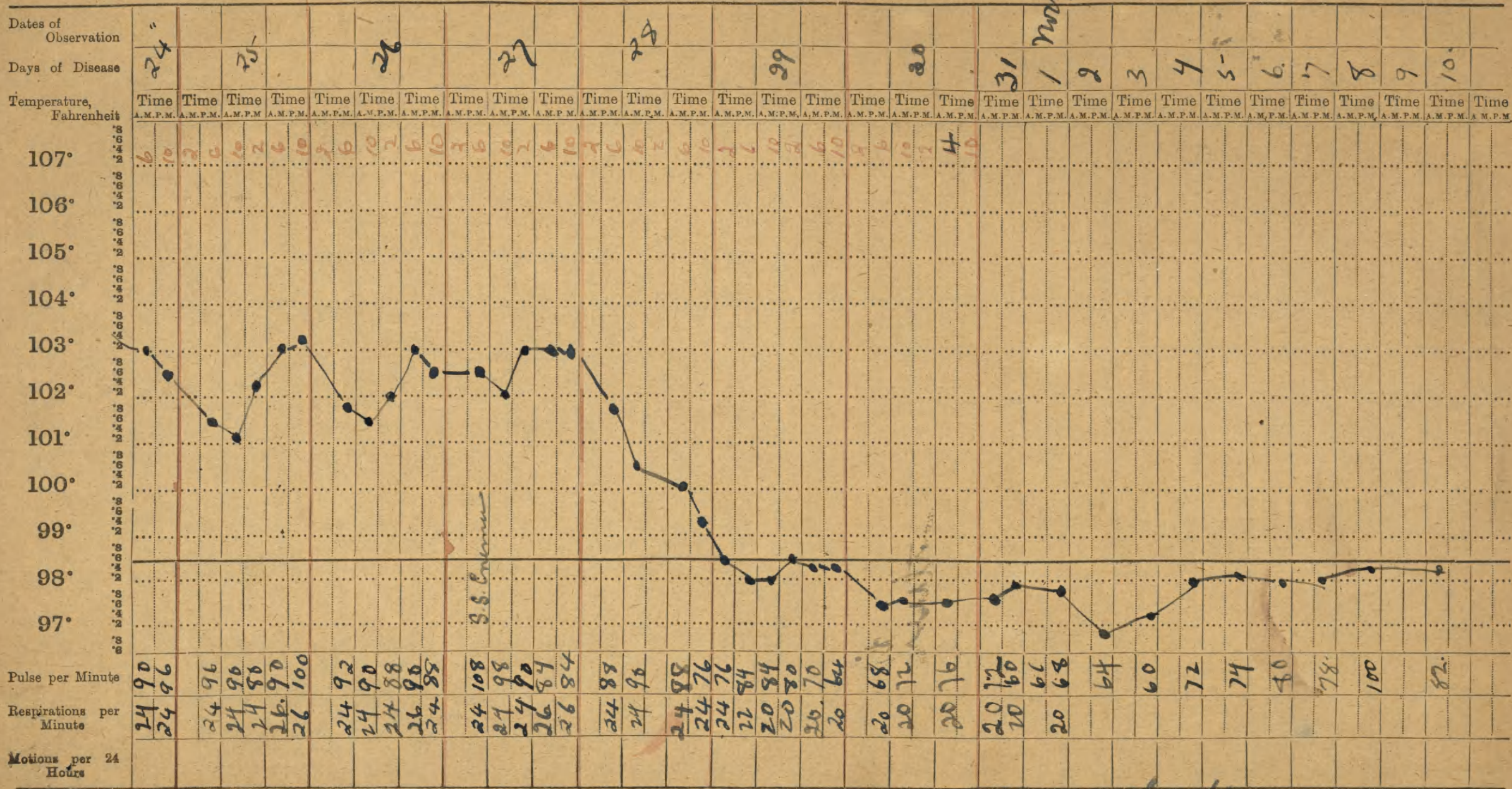
Army Form B. 181.

Corps 12. Res
No. 204573

Rank and Name David Pte

Military Hospital No 12 Cur Gen
Age 22 Service 26/12

Disease _____ Date of admission _____ Date of discharge _____ Result _____



S.S. Enema

Signature [Handwritten Signature] In charge of case.

CLINICAL CHART.

(To be attached to Case Sheet.)

Army Form B. 181.

Corps _____

No. _____ Rank and Name _____

Military Hospital _____
Age _____ Service _____

Disease _____ Date of admission _____ Date of discharge _____ Result _____

Dates of Observation																													
	Days of Disease																												
Temperature, Fahrenheit	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time
	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.
107°																													
106°																													
105°																													
104°																													
103°																													
102°																													
101°																													
100°																													
99°																													
98°																													
97°																													
Pulse per Minute																													
Respirations per Minute																													
Motions per 24 Hours																													

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
9717 Year	204573	Pte	Honed	F.
Station and Date.	12-Pus	Unit.	Age.	Service.
				26/12
			Father, Mrs F. Honed Hewar, Lake, Sask. Canada.	
	Disease			
	Family History - F - low. M - low. B1 - low 32 - low.			
	Personal History - Arrived Eng. Sept 1946			
	Previous Illness - No previous illness			
	Present Illness.			
	Onset - 6 days ago he felt dizzy + weak shad headache. He got better until 2 days ago when previous symptoms returned she had cough + running at nose + sores in throat.			
	Complaint - Headache, Sore throat, Cough which "racks" his chest.			
	Physical Exam. Well developed + well nourished - face flushed - eyes heavy he looks sick. Skin hot but moist elastic + free from rash.			
	Digestive System Tongue moist + slightly coated with whitish film. Abdomen negative. Bowels regular.			
	Respiratory System. Pharynx + spaces congested - tonsils not enlarged. Chest clear.			
	Cardio-Vascular System. Apex beat in 5th I. Intercostal space 1" inside nipple line. Heart normal - Regular regular in rhythm + intensity - volume good - tension moderate. Artery wall not palpable.			

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

Station
and Date.

Nervous. } Negative
G. U. }

Glandular System - Rt Cervical glands
slightly enlarged & tender.

Diagnosis - Influenza

Treatment - R Seiler's Sol Gange q. 3 h.
R Ammon N Quinine 3 to 4 h.

W. J. Thomson
Capt. C. A. M. C.

Oct 29

During the 28th temp
fell rapidly to normal
feeling much better -

Nov 1/18
11/11/18

Had get up for 1st time p.m.
Recovered fit for discharge
E. M. Smith

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
F.C.T. 176 Year	204573.	Pte	Davis	Felix
		Unit.	Age.	Service.
1917.	15 th Canadian	I. H. B.	22 yrs.	1 1/2.
Station and Date.	Disease	(G.W. over mastoid region. Rt. II V) "Elbow. (Rt.) III (V) "Both thighs behind IX (I)		
3 rd Western Gen				
H. G. Cardiff				
15-4-17.	all slight wounds			
	X-ray = R.B. path to elbow + in neck			
17/4/17	Removal of R.B. arm + neck			
	both slight + superficial. M. Bowen Capt.			
20/4/17	Transferred to Canadian Hospital Developed slight temp: not transferred to Canadian H.P.			
24. 4. 17	Still running Temp: no sore throat no rash			
25. 4. 17	Developed mumps. Both parotid submaxillary glands swollen Tenderness in testis Transferred to Sanatorium for further health.			
	J.R. Bowen Capt.			
25 apr 17.	admitted to Cardiff Isolation Hospital			
12 may 17	Re-transferred to Howard Gardens Hospital			
	D. W. Broad Major: R.A.M.C.(T.)			
6. 6. 17	Free from infection Convalescent Transfer to Spinn M. Bowen Capt.			
18. 4. 17				
S. O. 1025				
React: Creid				
Alb: nil				
Sugar nil				

200. TETANUS ANTITOXIN
 INOCULATED.
 Date... 17. 4. 17.
 Date.....

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

Station
and Date.

18

Report No. _____

Army Form W. 3212.

(In books of 100.)

Regtl. No., Rank and Name } 204573, David, Y. Age _____ Corps 13 Res.

Disease Influenza Hospital _____

To Officer i/c Laboratory. Ward 12.

Please carry out an examination of the accompanying specimen of Urine with special regard to _____

Nos. of previous Reports (if any) _____

In Pathological Reports a résumé of clinical history, treatment or progress since last report should be given.

Date 25/10/18. _____

O. i/c _____ Ward _____

LABORATORY REPORT.

React and
Alb neg

Req 1040
Requering

Date of Examination 25/10/18

21 A. Montgomery
O. i/c Laboratory

City of *St. Louis* *Missouri*

Hospital *St. Louis Hospital*

Ward *12*

Department of *Pathology*

Specimen No. *1234*

Date of Examination *10/10/1918*

Examination of *Stomach*

Findings *Stomach contents*

Remarks *Normal*

LABORATORY REPORT

Signature *A. M. [illegible]*

Department of *Pathology*

City of *St. Louis*

CANADIAN ARMY DENTAL CORPS.

DENTAL CERTIFICATE. *MD 12*

NOTE:- This form will be attached to the Medical History sheet of each Other Rank being returned to Canada for disposal.

REGTL. No. *204573* * NAME *DAVID* RANK *Pte* UNIT *15th Bn*

Date of Examination

8/12/18

Present Dental Condition

It requires fillings

In case of loss, or decay of teeth, is the loss due to wounds, injury, or disease, directly attributable to Active Service?

Has he ever declined Dental Treatment?

Recommendation

*Fillings at the Public Expense*Date *8/12/18*Station *Rommel Park**N. Walls*Signature of Examining Officer *A. C. Steele* ...Capt.

C.A.D.C.

* Name should be entered in block letters.

MD 12

304573 DAVID

PC

PC

81218

[Faint, illegible handwriting]

[Faint, illegible handwriting]

DAVID

205

URINALYSIS REPORT
(for Board)

Regtl. No. 204573 Rank Pte
Rank Name David F
Unit 12th Res

Sp. Gravity 10.20
Reaction acid
Albumen neg
Sugar neg
Microscopic



James

Captain, C.
for Major, C.
O.C., Can. Gen. Laboratory

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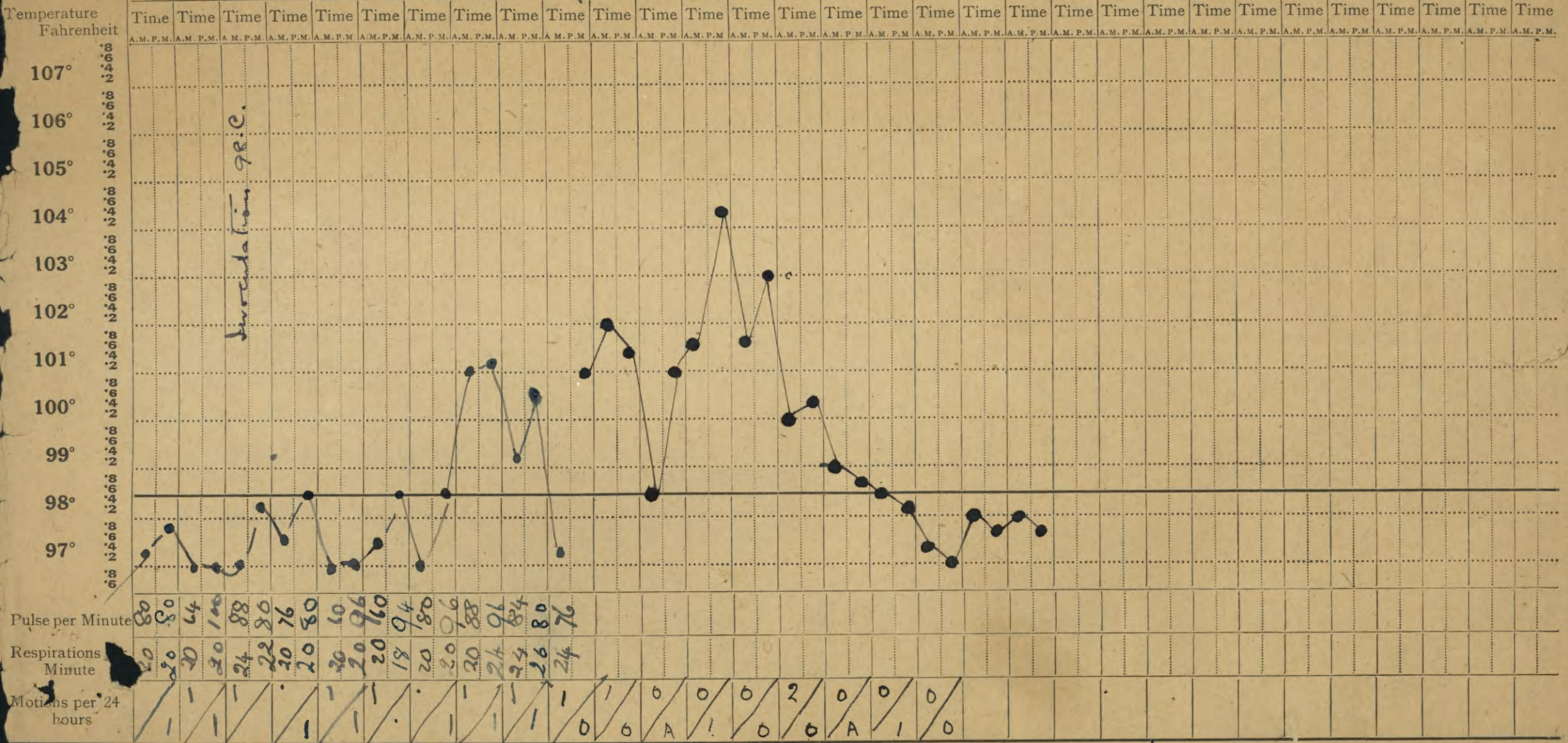
.....
.....
.....

.....

(To be attached to Case Sheet.)

Corps 8th 15th Cavalry Military Hospital 3rd West Gen
 No. 204573 Rank and Name F David Pitt Age 22 Service 13²
 Disease and Mumps Date of admission 15-4-17 Date of discharge _____ Result _____

Dates of Observation Apr 15 May 1917
 Days of Disease 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 . 2 3 4 5 6 7 8 9 10 11 12 13 14 15



Circulation 98°C.

E

Signature B.W. Broad : Major In charge of case.



Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

25-3-16.

Separation and Assigned Pay Branch

D

933

May 1-18.

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

\$15.00			
---------	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

No.	Promoted	Reverted	Discharge
Rank			
Soldier's Name			
Battalion	96" Bn.		
Beneficiary			
Relationship			
Address			

PARTICULARS OF ASSIGNMENT

Name	
Address	
Change of Address	
1	FERDINARD DAVID, DEWAR LAKE,
2	SASK. 15 15.00
3	% 204573 PTE F.DAVID FIFTEEN DOLLARS
4	

Date	Cheque No.	Amount S/A	Amount A/P	Total
April	X. 9085		15	15
May	0 12778		15	15
June	I 23971		15	15
July	G 28611		15	15
Aug.	I 37812		15	15
Sept	L 47371		15	15
Oct	M 55304		15	15
Nov	I 57741		15	15
Dec.	T 62536		15	15
			<u>135</u>	<u>135</u>

File 4284-7-9. REMARKS M.R. 96

Assignment effc 1-5-18 per a. 2 m
Cheque issued in april in error.
causing output of \$15. P. m. mD12
notified of output on m.F.W. 187.

AUTHORITY FOR NEW ACCT.

M. F. W. 128
400M.-6-17-1772-89-141
L. L. 22220-M. & D. 7583.

A/c Closed 31-12-18
Ret'd per Regina.
Date 20-12-18 F.X. 27-12-18.
Clerk J. Clarke
MRO.44978.

CANADIAN ASSIGNED PAY AUDITED
DATE 22-5-19
AUDIT CLERK

AUTHORITY FOR NEW ACCT. } 2.M.13-3-18
M. Ward 24-4-18

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

--	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No.

Rank

Promoted

Reverted

Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

Name

Address

Change of Address

1

2

3

4

Date

Cheque
No.

Amount
S/A

Amount
A/P

Total

REMARKS

[Faint purple stamp text, possibly indicating approval or processing status]

M. F. W. 128.
400 M. 17-1772 89-1141
L. L. 22220-M. & D. 7993.

File 159

AUDITOR	PAYMASTER
<i>[Signature]</i>	<i>[Signature]</i>

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

REGT. No. *204573* RANK *Pte* NAME (IN FULL) *DAVID, Felix*
 ORIGINAL PAY UNIT C.E.F. *96 Bn* IF IN P.F. WHAT UNIT? *Regina*
 (BLOCK LETTERS SURNAME FIRST) *20/12/18*

M. OR S. _____

NEXT OF KIN _____ RELATIONSHIP _____

ADDRESS *Bewar Lake Sask*

IS SEPARATION ALLOWANCE PAID? *no.* DATE EFFECTIVE _____

TO WHOM PAID _____ RELATIONSHIP _____

ADDRESS _____

PLACE OF ATTESTATION _____ TRANSFERRED TO _____ DATE _____ AUTHORITY _____

DATE OF ATTESTATION *20/3/16* TRANSFERRED TO _____ DATE _____ AUTHORITY _____

ASSIGNED PAY \$ *15.00* DATE EFFECTIVE *1/1/19*

PAYABLE TO *Ferdinand David* RELATIONSHIP *F.* ANY CHANGE IN ASSIGNEE OR ADDRESS _____

ADDRESS *Bewar Lake Sask.*

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE _____ EFFECTIVE _____

DISCHARGED *REGINA, SASK.* PLACE _____ DATE *1/1/19* REASON _____ AUTHORITY *2010* IF ENTITLED TO POST DISCHARGE PAY *yes*

MONTH	PAY AND F.A.			OTHER CREDITS			TOTAL CREDITS			ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY		REGI-MENTAL CHARGES		OTHER CHARGES		TOTAL DEBITS		BALANCE		PARTICULARS OR REMARKS
	NO. OF DAYS	RATE	AMOUNT		CREDITS		CREDITS		COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2	COL. NO. 3	PAY	CHARGES	CHARGES	CHARGES	DEBITS	DEBIT	CREDIT	DEBIT	CREDIT			
			\$	C.	\$	C.	\$	C.	\$	C.	NO.	DATE	NO.	DATE										NO.	DATE	
BALANCE FROM PREVIOUS ACCOUNT																										
<i>30/11/18</i>				<i>297 77</i>	<i>77</i>	<i>297 77</i>	<i>297 77</i>																			
<i>1/12/18 - 11/11</i>	<i>11/1</i>	<i>1.10</i>	<i>46 30</i>	<i>35 00</i>	<i>12 25</i>	<i>203 90</i>	<i>317 35</i>	<i>106</i>	<i>117</i>			<i>59 87</i>	<i>317 35</i>		<i>15 -</i>		<i>15 -</i>		<i>89 87</i>		<i>40 00</i>	<i>203 90</i>		<i>15% of pay at age 18 to 19/10/17 - 12/11/18 35% P&P 70</i>		
			<i>46 30</i>	<i>35 00</i>	<i>12 25</i>	<i>203 90</i>	<i>317 35</i>					<i>59 87</i>	<i>317 35</i>		<i>15 -</i>		<i>15 -</i>		<i>89 87</i>		<i>40 00</i>	<i>203 90</i>		<i>to match</i>		
			<i>46 30</i>	<i>35 00</i>	<i>12 25</i>	<i>203 90</i>	<i>317 35</i>					<i>109 87</i>	<i>317 35</i>		<i>15 -</i>		<i>15 -</i>		<i>457 22</i>		<i>40 00</i>	<i>40 00</i>		<i>WAR SERVICE GRATUITY M.D. 12</i>		
					<i>W.S.G.</i>													<i>70 -</i>		<i>70</i>		<i>70</i>		<i>11/3/19</i>		
	<i>153</i>				<i>350</i>		<i>350</i>												<i>70 -</i>		<i>70</i>	<i>280</i>		<i>12.0 arfor</i>		
																			<i>70 -</i>		<i>140</i>	<i>210</i>		<i>3603 = 11-2-19</i>		
																			<i>70 -</i>		<i>210</i>	<i>140</i>		<i>1919 = 11-3-19</i>		
																			<i>70 -</i>		<i>280</i>	<i>70</i>		<i>1922.42 11-4-19</i>		
																			<i>70 -</i>		<i>350 =</i>	<i>0</i>		<i>198302 11/5/19</i>		
					<i>350</i>		<i>350</i>												<i>350 =</i>		<i>350</i>	<i>0</i>		<i>20</i>		

I certify that all payments due on this account have been completed.

[Signature] Capt.
 Paymaster War Service Gratuity
 Military District No. 12

