ORIGINAL

ATTESTATION PAPER.

No. 868074

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? ..... Ferguson
1a. What are your Christian names? ..... James
1b. What is your present address? ..... 618 Woodbine ave Toronto Canada
2. In what Town, Township or Parish, and in what Country were you born? ..... Ballear Co armagh Ireland
3. What is the name of your next-of kin? ..... agnes Ferguson
4. What is the address of your next-of-kin? ..... 618 Woodbine ave Toronto Canada
4a. What is the relationship of your next-of-kin? ..... Wife
5. What is the date of your birth? ..... 15th March 1871
6. What is your Trade or Calling? ..... Carpenter
7. Are you married? ..... yes
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? ..... no
If so, state particulars of former Service.
11. Do you understand the nature and terms of your engagement? ..... yes
12. Are you willing to be attested to serve in the Canadian Over-Seas Expeditionary Force? ..... yes

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, James Ferguson, 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.

J Ferguson (Signature of Recruit)

Date 27th March 191 6 A.B. Cockburn Lt. (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, James Ferguson, 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.

J Ferguson (Signature of Recruit)

Date March 27th 191 6 A.B. Cockburn (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 Toronto this 27th day of March 191 6.

A A Cockburn Lt Col (Signature of Justice)

M. F. W. 23.
600M.—8-16.
H. Q. 1772-39-841.

Description of James Ferguson on Enlistment.

Apparent Age 45 years ..... months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height ..... 5 ft. 7½ ins.

Chest measurement.
- Girth when fully expanded ..... 37¼ ins.
- Range of expansion ..... ~~¼~~ ins. 3¾

Complexion ..... Fair

Eyes ..... Blue

Hair ..... Grey

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

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

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

None

CERTIFICATE OF MEDICAL EXAMINATION.

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

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

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

Date March 27th 1916 ..... H Bascom

Place Whitby ..... Lt Col.
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.

James Ferguson 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 of Officer)

Date April 25 1916.

C.E.F.

FERGUSON JAMES 868074 182 BN 04389

MED UNFIT

2 CARD NO. V

SURNAME. Ferguson.

CHRISTIAN NAMES James.

SOS Hdqrs 30-12-18
D025304 FOLL. 26-12-18
#219109 (m u)

REGL. No. 86 8074 RANK Pte.

UNIT 182nd. Bn.

FORMER CORPS Nil.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL Ferguson Mrs. Agnes

RELATIONSHIP TO SOLDIER Wife

ADDRESS ~~618 Woodbine Ave.~~

42 Brookmount Rd. Toronto Ont.

(auth. Sask 4-11-18)

COUNTRY OF BIRTH Ireland Ballinamough Co. DATE Mar. 15th 1871

PLACE OF ATTESTATION Whitby Ont. DATE May 31st 1916

From Shilfax per SS Justicia 3-5-17. R/C 28-11-18 231/52

L. L. 94504. M. & D. 6512.

M. F. W. 22. 250M.—2-16. H. Q. 1772-39-339.

FROM HALIFAX PER

S S' JUSTICIA' 3-5-17

MARRIED yes SINGLE WIDOWER

TRADE OR CALLING Carpenter RELIGION Presbyterian

DESCRIPTION.

APPARENT AGE	45	YEARS		MONTHS	
HEIGHT	5	FEET	7 1/2	INCHES	
CHEST MEASUREMENT	37 1/4	INCHES	EXPANSION	3 3/4	INCHES
COMPLEXION	Fair	EYES	Blue	HAIR	Grey
DISTINGUISHING MARKS	Nil				

MEDICAL EXAMINATION. PLACE Whitby Ont. DATE Mar. 27th 1916

Present address – 618 Woodbine Ave.
Toronto Ont.

No. 868074 RANK Pte. NAME Bergerson James

T. O. S. 28-3-16 UNIT 182nd. Battalion C. E. F.
D. O. C of 29-3-16

M. D. 2

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916	1916			
Mar. 28	Mar. 31	V		
apr.		✓		
may		✓		
June		✓		
July		✓		
aug		✓		
Sept.		✓		
Oct.		✓		
Nov		✓		
Dec.		✓		
1917 Jan	1917	✓		
Feb		✓		
Mar		✓		
Apr.	apr 26	✓		

over.

1917 Apr 24	1914. May 14.	n.	Transferred Base Bn from 19-5-17	AO 1 of 15-5-17

UNIT SAILED
MAY 3 1917

E.M.W.

Number 868074 Rank Pte

Surname FERGUSON

Christian Name James

Units 1st C. O. R. Theatre of War England.

Date of Service 14/5/17

Remarks

Latest Address 42 Brookmount Rd
Toronto Ont

Roll No. A Page 4605

200m.-2-21.M.

DESP.
APR 9 1923
REGN.

*Name L FERGUSON, James. Rank Pte. Regtl. No. 868074

Original unit [redacted] Present unit 192 Bn. M. or S. Age 47 Religion Presb. Fyle Depot Ref. H.Q.

Port, ship, and date of arrival Quebec, Aquitania, 28-11-18.

Next of kin Wife, Agnes Ferguson, 618 Woodbine Ave., Toronto.

Address on leave 618 Woodbine Ave., Toronto.

Address on discharge 42 Brookmount Rd. Toronto

Transportation issued Yes No Date Character on discharge

Previous occupation Carpenter. Date and place of enlistment Whitby, Ont. Mar. 31st., 1916.

Diagnosis Diabetes Mellitus Ankylosis Meta Tars. Date of Medical Boards 23-12-18

Date.	Remarks	Pt. 2 Order No.
T.O.S.		
22-11-18.	Posted to Cas. Co. Ex. Camp. 28-11-18.	
	Leave from 4-12-18 to 18-12-18.	
	Subs. " " "	232

Over

*—Name will be given in full; surname first.

(over)

Date.	Remarks.	Pt. 2 Order No.
30-12-18	S.O.S. DISCHARGED "MED.UNFIT"(to take further Out-patient treat't with the I.S.C.) 91 days PDP. & clo' all')	253

M.F.W. 192
150M—6-18.
1772-39-1243.

M. F. W. 41
100M-1-18.
1772-39-889.

Name Pte J. Ferguson.

Regimental No. 868074

Unit 1st C.O.R.D. 182nd Bn.

Date of enlistment

Place of "

Married (yes or no) Yes. paid to 31/12/18.

Amount of pay assigned monthly $ 20.00 paid to 31/12/18

To whom payable Mrs. Agnes Ferguson
42 Brookmount Rd., Toronto.

Name and address of next-of-kin
28/11/18 per SS. Aquitania

Date and place discharged

Reason for discharge

Character on discharge

Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
Dec 1.	30	30	1.00	30 -	30	10.	3 -	12 -	80 -	13604		46 5/45		32 50	80 -	S.O.S. D.O. 232.
								25 -						95		Subs. D.O. 232
																32nd Dis Bel L.P.C.
																Disch D.O. 253 - Slb-out
																clothing
									80 -						80 -	95 overpd Sep. allce

Name _____

M. F. W. 41
100M-1-18.
1772-39-889.

Regimental No.

Unit

Date of enlistment

Place of "

Married (yes or no)

Amount of pay assigned monthly $

To whom payable

Name and address of next-of-kin

Date and place discharged

Reason for discharge

Character on discharge

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date					

D.M.S. 1394

PROCEEDINGS OF A MEDICAL BOARD

Dated at 1-9 1917

No. 86074 Rank Pte Name FERGUSON J.

Local Unit 208th Overseas Unit — Age 46.

Examination held at WITLEY.

DISABILITY
~~Overseas~~ Local
(Strike out one)

HALLUX RIGIDUS RT
&
SENILITY.

PRESENT CONDITION

This man states that he went over as
S2. Looks about the age. Has a
good deal of arthritic degeneration.
Has a Rt- hallux rigidus. This had
caused him a good deal of trouble
in route marches.

B2

BOARD RECOMMENDS

SIGNATURES

J. Cockburn Capt Canada President

E. J. Beaupré Capt Canada Member

Member

APPROVED 1-9-1917

for A.D.M.S.
5th Division
Witley.

a.P. 05866-f-117

M. F. W. 41a.
120m. 1-18
1772-39-1213

English L.P.C. No. 7308

Name Ferguson J.

Regt'l No. 868074 Rank Pte File Numbers { C.m. 25-85

Former Units 1 C.O.R.D Original Unit 182nd Bn

Date of arrival in Canada 28-11-18 Boat Aquitania Port of Disembarkation Halifax

Rates of Pay:—Regt'l. 1.00 Field 40 Date of arrival in M.D. 2

Separation Allowance. Date paid to 31-12-18 Rate 30.00 If continued by Chief Paymaster, England no

Assigned Pay. Date paid to 31-12-18 Rate 20.00 If continued by Chief Paymaster, England no

Name and address of Beneficiary { Mrs Agnes Ferguson (wife)
92 Brookmount Rd Toronto Ont.

Pay claimed on English L.P.C. to 30-11-18 to be paid by new Unit from 1-12-18

Name of new Unit No 2 district depot Date L.P.C. forwarded to new Unit 11/12/18

a.P. Charged on English L.P.C to 30/11/18

L.L. 34682—M. & D. 8645.

Credit Balance shown on English L.P.C.	OTHER CREDITS DUE	TOTAL CREDITS	Charges to be made on account of advances since English L.P.C. made out: On Boat	a/p At Cl. Depot &c.	OTHER CHARGES	TOTAL DEBITS	BALANCE TO NEW UNIT: Credit	BALANCE TO NEW UNIT: Debit	REMARKS
$ c.	$ c.	$ c.	$ c.	$ c.	$ c.	$ c.	$ c.	$ c.	7R 7-12-18 WPS. 9/12/18
37 50		37 50							
			20 00						On Boat 24/11/18
			30 00						Twelve 1-12-18.
				20 00					Dec. 1918
						70 00			
Debit Balance		32 50							
		70 00				70 00		32 50	

M. F. W. 41a.
120m. 1-18
1772-39-1213

English L.P.C. No.....

Name.....

Regt'l No.....Rank.....File Numbers {.....

.....

Former Units.....Original Unit.....

Date of arrival in Canada.....Boat.....Port of Disembarkation.....

Rates of Pay:—Regt'l.....Field..... Date of arrival in M.D.....

Separation Allowance. Date paid to.....Rate.....If continued by Chief Paymaster, England

.....

Assigned Pay. Date paid to.....Rate.....If continued by Chief Paymaster, England

.....

Name and address of Beneficiary {.....

.....

Pay claimed on English L.P.C. to.....to be paid by new Unit from.....

Name of new Unit.....Date L.P.C. forwarded to new Unit.....

.....

.....

Credit Balance shown on English L.P.C.		OTHER CREDITS DUE		TOTAL CREDITS		Charges to be made on account of advances since English L.P.C. made out				OTHER CHARGES		TOTAL DEBITS		BALANCE TO NEW UNIT				REMARKS
						On Boat		At Cl. Depot &c.						Credit		Debit		
$	c.	$	c.	$	c.	$	c.	$	c.	$	c.	$	c.	$	c.	$	c.	

Original

MEDICAL HISTORY SHEET

F 204

Surname Ferguson Christian Name James.

Examined on 27th day of March 1916 at Whitby

Approved by H Bascom

Rank 4 Cdn M.O.

Birthplace City or Town Ballee County Armagh. Ireland.

Apparent age 45

Trade or occupation Carpenter

Height 5 Feet 7½ Inches.

Weight 150 Lbs.

Chest measurement Minimum 33½ inches. Maximum expansion 34 inches.

Physical development good

Small-Pox Marks none

Vaccination Marks Arm ~~Right.~~ Left. Number 2

When Vaccinated last 26 yrs ago

(a) Marks indicating congenital peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

Vision 20 each eye

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

Date.	Result.	Vaccinations.
4/3/17		H Bascom Capt. M.O.
		M.O.
		M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.
16/1/17		H Bascom Capt. M.O.
23/1/17		H Bascom Capt. M.O.
30/1/17		H Bascom Capt. M.O.

Enlisted on 27 day of March 1916 at WHITBY, ONT.

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	182nd O.S. Bn., C. E. F.	868074		March 27 1916
Transferred to	208th Bn C.E.F.			6/6/17
	1st C.O.R.D.			5-9-17

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
Whitby Approved. Whitby	1-9-17	Senility + Hernia	B2 J.A. Cook Capt Camp
	1-9-17	Rigidis R1	B1
	18-11-18. D.A.D.	Senility + Hallux Rigidus R1	(B11 Jas L Hammond Capt

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

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

Surname Finneran Christian Name James

STATION.	Date of Arrival at the Station.	DATES OF Admission into Hospital			DATES OF Discharge from Hospital			DISEASE.	Number of days in Hospital	Remarks on nature of the disease; how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
		Day	Month	Year	Day	Month	Year				

L. Job 310—M. & D. 6574.

28-3-16

MILITIA AND DEFENCE

M. F. W. 11.
50m.—4-16.
H. Q. 1772-39-818.

SEPARATION ALLOWANCE

Name Agnes Ferguson

Address 618 Woodbine ave. Toronto Ont.

Relation to Soldier wife, child or mother } wife

Name of Soldier Ferguson James

Regtl. No. 168074

Rank Pte.

Corps 183rd Batt.

To what Corps belonging when called out }

PAYMENTS

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

Form D.M.S. 1394.
7004—100M.—5/2/17.

7373 1st Hgrs Staff

PROCEEDINGS OF A MEDICAL BOARD.

Dated at ..... 11 – 9 – 1917

No. 868074 Rank Pte Name Ferguson J.

Local Unit 1st C.D.R.D. Overseas Unit ..... Age 52

Examination held at East Sandling

DISABILITY. ~~Overseas~~ Local (scratch one out). Partial stiff big toe (rt.)

PRESENT CONDITION.

Partial ankylosis of right big toe (metatarsal-phalyngeal joint). Looks his age. Do not think he could stand up under heavy work. Complains of pain on walking (says it pains all the time).

General condition: fair

BOARD RECOMMENDS:– C iii permanently

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

Signatures:–

W. P. Cullam Capt President.

Members { .....
Hamilton Lt Col.

APPROVED 12 SEP 1917

Dated ..... 1917.

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

For A.D.M.S.

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 11a.
15m.—3-16.
H. Q. 1772-39-818.

Sheet No. 2. Agnes Ferguson wife

Name of Soldier Ferguson James

L. L. Job 95618—M. & D. 6555.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May		S3264	42.	42
June		S3355	20	20
July		38224	20	20
Aug.		R12337	20	20
Sept.		H15761	20	20
Oct.		H18812	20	20
Nov.		M22559	20	20
Dec.		L2631	20	20
Jan.	1917	L26213	20	20
Feb.		L29638	20	20
March		L33243	20	20
April		M1029	20	20
May		M4475	20	20
June		P7679	20	20
July		P11189	20	20
Aug.		U12988	20	20
Sept.		T17301	20	20
Oct.		Z19465	20	20
Nov.		G22353	20	20
Dec.		J26219	20	20
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

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MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier.....

PAYMENTS.

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

D.M.S. 1394.
100M.—5/2/17.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at ..... Jan 30 1917

No. 868074 Rank Pte. Name Ferguson J.

Local Unit 1st CMRD Overseas Unit ..... Age 46

Examination held at East Sandling.

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

PRESENT CONDITION.

179° for 3rd Time.

Lt Lt Quartermaster Capt

BOARD RECOMMENDS:—

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

Signatures:—

Members { ..... President.
....
....

APPROVED

Dated ..... 1917. .....

For A.D.M.S.

L.L. 19226—M. & D. 7814.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

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

Wife

To Whom Mrs Agnes Ferguson

Address 618 Woodbine Ave
Toronto
Ont

Rate $20.00 May 1st 1917

By Whom Assigned Ferguson J

Regtl. No. 868074

Rank Pte

Corps 181 Battn

MAY 1 1917

PAYMENTS

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

CONSOLIDATED 5 ACCOUNT

D.M.S.1394

PROCEEDINGS OF A MEDICAL BOARD

Dated at 1-9 1917

No. 868074 Rank. Pte Name FERGUSON J.

Local Unit 208th Overseas Unit — Age 46.

Examination held at WITLEY.$$$

DISABILITY
~~Overseas~~-Local
(Strike out one)

HALLUX RIGIDUS Rt
&
SENILITY.

PRESENT CONDITION

This man states that his real age is 52. Looks about that age. Has a good deal of arterial degeneration. Has a Rt hallux rigidus. This has caused him a good deal of trouble in route marches.

B2

BOARD RECOMMENDS$$$

SIGNATURES

J.H. Cock Lt Col RAMC President

E.J.L. Beaugié Captain RAMC Member

Member

APPROVED$$$ 1-9-1917 [illegible] Major.
for A.D.M.S.
5th Division
Witley.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a.
50m.—6-16.
1772—39—819.

Sheet No. 2. Mrs A Ferguson Wife

Name of Soldier Ferguson J

L. L. Job 4503. - Req. 6832.

Pte 868074 182 Battn

Month.	Year.	Cheque No.	Amt.	Remarks.
			$20.00	May 1st 1917 MAY 1 1917
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April				
May		M13894	20	
June		T18173	20	B.
July		T21942	20	Ba
Aug.		Z30576	20	Lu
Sept.		Z37798	20	Co
Oct.		O41615	20	
Nov.		Z47031	20	
Dec.		Y53270	20	160
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

CANADIAN
ASSIGNED PAY AUDITED
AK 6 30-11-18
AUDIT CLERK
DATE 23-6-19

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier_____

PAYMENTS.

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

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

District 7

Name of Soldier Ferguson James

Rank Pte

No. 868074

Regiment

INSTRUCTIONS

1. On examination the condition of patient's mouth to be marked on diagram in red ink.
2. On first line of report record of same to be made in red ink.

Only such entries to be made on this sheet as will show:

1. Condition on examination (in red).
2. Condition on leaving Canada.
3. Condition on discharge.

	Date		Amalgam	Temporary Filling (a) G. P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhœa	Synthetic Porcelain	Extracting	DENTURES U	DENTURES L	DENTURES P	Gold Clasp	Gold Filling	CROWNS Gold	CROWNS Porcelain	Bridge Work	OPERATOR	Military District	REMARKS
Condition on first Examination																							
DISCHARGE EXAM. Ex Comp DATE DEC 2 1 1918	CERTIFICATE ISSUED FOR Dentally Fit																				G. Cooneydine, Capt.		

M.F.B. 465.
200M.—6-18.
1772-3[illegible]

C.A.D.C.5009. 50M-3-5-18.

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.

REGTL. No. 868074 * NAME FERGUSON J. RANK Pte UNIT CORD

Date of Examination	19-11-18
Present Dental Condition	Unfit
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 Extraction.

Date.....

Station.....

Signature of Examining Officer..... Capt. C.A.D.C.

* Name should be entered in block letters.

URINALYSIS REPORT

Name Pte. Ferguson Jas

Corps 2 D.D.D.

Date December 21/18

Colour Light Amber

Odour ?

Spec. Gravity ?

Albumen Negative

Sugar Positive

Reaction Acid

Remarks Quantity Sugar 1.096%

Microscopic:-
few Uric Acid Crys.
Debris

W. E. Tindale
capt.

J. W. Easton Sgt.
n/c Officer i/c Laboratory

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

Name

Surname Ferguson Christian Name James

Regimental Number 868074 Rank Pte.

Unit #2. D. D.

Original Unit

District where paid M. D. No. 2.

Date of Discharge 30-12-18

P. D. P. Filing Number

Address (in full) 42 Brookmount Rd.
Toronto, Ont.

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

L. L. 46038—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.
1772-39-1140.

Remarks: Account opened December 28th, 1918.

File No.....

WAR SERVICE GRATUITY.

Register No.....

Reg. No. .....

Name.....

Address.....

.....

.....

Pay Soldier $.....

Clerk .....

Dec'n No..... W. S. G. File No .....

Award.....days at $ ... per day $ ...

S. A.....months at $ ... per mo. $ ... $

Less P. D. P. Credited $.....

$

Less further debit balance $.....

Net Due [illegible]

TO SOLDIER

	Ag. [illegible]	[illegible]	[illegible]
0			
1			
2			
3			
4			
5			
6			
	Total		

DEPENDENT

	Amount
Total	

Dependent.....

Address.....

.....

.....

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.....

DUPLICATE

To be made out in duplicate.

H.Q. 54-21-23-53

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

INSTRUCTIONS.

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

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

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

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

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

---

(1) Name of Overseas Unit which Soldier joins.....182nd., O. S. Bn., C. E. F.

(2) Regimental Number 868074,

(3) Full Name of Soldier.....James Ferguson,

(4) Place of Birt .....Co. Armagh, Ireland.

(5) Are you married, or not ? Married.

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

(b) Present Postal Address 618 Woodbine Ave. Toronto, Ontario

(7) Are you a widower ? ....No.

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

If so, give number of boys and girls 1 boy and 3 girls.

Also their names and ages. Eliza Jane Ferguson, 23 years.
Minnie Ferguson, 19 "
Sarah Ferguson, 17 "
Walter Ferguson, 10 "

M. F. W. 67.

500M.—9-16.
1772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive ?..... No. .....

If so, state name and address.....

(10) Is your Mother alive ?..... No. .....

If so, state name and address..... ---- .....

.....

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

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

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

.....

.....

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

.....

.....

.....

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

..... Yes. .....

(15) Are you insured ?..... Yes. .....

If so, in what Company ?... Metropolitan Life Assurance Co. .....

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

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

D A Cockburn Lieut. Col.
O. C. 182nd O. S. Bn. C. E. F.
Officer Commanding.

Date..... March 22nd., 1917.

Form B 122.
2353—100M—9-17-16

J.P. Rank | Name FERGUSON, James | Reg'l No. 868074.

Unit 182nd. to 1st Cent. Ont. Regt. | If in perm. Corps, What Unit? | Married or Single Married.

Place and Date of Enlistment Whitby. 27th March.1916. | Place of Birth Ballear Co.Armagh. Ireland.

Name and Address, Next-of-Kin Agnes Ferguson.
618 Woodbine Ave.Toronto.Canada. | Relationship Wife.

Assigned Pay Monthly $ | Payable to | Relationship

Separation Allowance $ | Payable to | Relationship

Discharge, Date and Place | Reason | Character

N/E. R.B. No. 15727
File R.L.
Category Can R.

H. W. & V., Ld.—9546-16.

Report. Date.	Report. From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
		ARRIVED IN ENGLAND	14-5-17 SS. JUSTICIA.		
15.5.17	182'	S.O.S to 3' Res Bn	Otterpool	14.5.17	9th II O' 134 9th II O' 3 dy 17.5.17. 3 Res 9th II O' 127
6.6.17	3' Res	S.O.S to 208 Bn	W. Sandling	6.6.17	9th II O' 154 dy 6.6.17. 208
7-9-17	208th Bn.	S.O.S. to 1st C.O.R.D.	Pte. Witley	5-9-17	— 207 (1st C.O.R.D D.O. 181 dy 6-9-17)
~~15-9-17~~	~~1st CORD~~	~~On Com. To Hqrs Can. Scotts~~	~~W. Sling~~	~~15-9-17~~	— 190 Cancelled D.O. 192 dy 17-9-17
20-9-17	12th Res.	att. for B.P.O.R rations	Pte. E. Sling	19-9-17	Pte II D.O. 232 (1st CORD D.O. 203 dy 28-9-17)
14-12-17	1st CORD	Ceases to be att. 12th Res.	" ✓	13-12-17	— 280 (12th Res. D.O. 319 dy 31-12-17)
13-2-18	✓	On Com. 1st CCD	" E. ✓	13-2-18	— 44 (D.O. 1st CCD 43 dy 14-2-18)
16-4-18	✓	Ceases on Com. 1st CCD	" Witley	14-4-18	— 103
1 5 18	✓	Awarded Good Conduct Badge	✓ ✓	1 5 18	Pte II D.O 119

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.				
27.11.18	CORD SOS To*CAN.CEF		WITLEY	28.11.18	DO3 29

Feb 3

B

FILE No.
RECEIVED
MAR 2 1920
PAYMASTER
MILITARY DISTRICT No. 2

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 James 2. Surname Ferguson
3. Rank Pte. 4. Original Unit 18 Bn. 5. Reg. No. 168074.
6. Address, in full, to which future payments of gratuity are to be forwarded 42 Brookmount Rd. Toronto.
7. Date of enlistment in the C.E.F. March 26th 1916
8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge Agnes Ferguson
9. Relationship of such dependent Wife
10. Present address, in full, of such dependent 42 Brookmount Rd. Toronto
11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? not applicable
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:—
In England with 208th Bn. 3 mos. June, July & August 1917.
& with 1st C.D.R.D. from Aug. 1917 until discharge Dec 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? not applicable.
14. Were you on active service only in Canada or the United States? If so, give particulars of units and dates of such service not applicable
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 33 mos. & 2 days
18 Bn. 14 mos. 208th Bn. 3 mos, balance of time with 1st C.D.R.D. England until my return to Canada in Dec 1918.
16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department not applicable
17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.? not applicable.

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

18. Have you had more than one enlistment? If so, give particulars of discharges and re-enlistments, and under what regimental numbers and units ... not applicable ...

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 ... Received $8.00 on discharge from Brantford Depot & Exhibition Camp. Do not know if any of said amount was Post Discharge or not. Wife received $30.00 on Jan. 1st 1919. 1st payment War Gratuity. Since then received $6.40 and wife received $24.00 both marked 2nd payment War Gratuity.

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 received, or have you received any gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled ... no ...

23 (a) Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England ... no ...

(b) If so, was such reversion in consequence of misconduct or inefficiency? ...

24. Are you now serving in the C.E.F. ... no ... If not, give:—(a) Date of discharge ... December 30. 1918 ... (b) Reason for discharge ... medically unfit for further service ...

25. Are you at present a member of and in receipt of pay and allowances from any Canadian naval or land forces? If so, give unit ... no ...

26. Did you at any time serve at the front in an actual theatre of war? If so, give particulars of one unit which you served at the front, and dates of such service with that unit ... only in England ...

27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment? ... yes.

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

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: James Georgeson

Place of Residence: 42 Brookmount Rd

Declared before me at: Toronto

This 3rd day of March 19.19

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

Harold R. Ft

POST DISCHARGE PAY.

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

Certified Correct.

District Paymaster.

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

M. F. W. 54.
150M. 10-15.
H.Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps 182nd O.S. Bn., C.E.F.

Regimental No. 868074 Rank Private Name Ferguson, James,

Enlisted (a) 28-3-16 Terms of Service (a) M. D. W. Duration C.E.F. Service reckons from (a) 28-3-16

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) Carpenter

Report Date	Report From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
		Embarked	Halifax	May 3-17	H.M.T., F 628 "Justi cia"
		Disembarked	Liverpool	" 14/17	
		Transferred to 3rd. Canadian Reserve Battalion	West Sandling.		# 3 Part II Orders, May 15/17
					Capt & Adjt 182nd. O'S.Bn. Draft, CEF.
17-5-17	O.C. 3rd Res. Bn. C.E.F.	Taken on Strength 3RD RES. BATTALION C.E.F.	W Sandling	15-5-17	Pt II Bn O 134
JUN 6 1917	O.C. 3rd Bn. C.E.F.	Transferred to 208th Bn	W Sandling	JUN 6 1917	Pt II Bn O 154 O.C. 3RD RESERVE BN C.E.F.
June 6. 1917	O.C. 208th	Taken on strength	Witley Camp	June 6/17	Daily Orders Part II #127
5-9-17	O.C. 208th	S. O. S. to 1st C.O.R.D.	Witley	5-9-17	P.T. II D.O. No. 207 C.A. Vickery Lieut ass adt.
6.9.17	1st C.O.R.D.	T.O.S. 1st C.O.R.D.	West Sandling	5.9.17	Pt. II D.O. No. 141

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

[P.T.O.

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
28-9-17	1st CORD	att to 12th. Res Bn.	Wisling	19-9-17	Pt II O.O. No. 203
					Asst. Adjt. for O. C. 1st C. O. R. D.
14-12-17	1st C.O.R.D.	Ceases to be att. 12 Res.	Sandling	13-12-17	Pt II O.O. 208
13-2-18	-do-	att. to 1st C.C.D.	-do-	13-2-18	-do- #4
					Adjt. for O. C. 1st C. O. R. D.
20.4.18	1st C.D. proceeding to 1st C.O.R.D. 14.4.18 (auth D.O. 1/or 7 373 4/17 4/4/18)	Ld. this Depot on	to Martinique Plain		D.O. # 108. Officer i/c Records, for Officer Commanding 1st CANADIAN COMMAND DEPOT.
15.4.18	1st C.O.R.D.	Ceases to be att to Ld.	Witley	14.4.18	D 185
1.5.18	do	Clearance on Cond Conduct Blade	Witley	1.5.18	D 219
23/11/18	"	Ceases Depot Bay on proceeding to Port of embarkation Disembarked Canada	Wicken 29/11/18	22/11/18	do 235 LIEUT. OFFICER i/c RECORDS.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 868074 (Rank) Pte.

Name (in full) FERGUSON. JAMES. enlisted in

the 182nd Bn.

CANADIAN EXPEDITIONARY FORCE at Toronto, Ont. on the 27th

day of March. 1916.

HE served in England

and is now discharged from the service by reason of

"Medically Unfit"

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

Age 53

Height 5' 7½"

Complexion Fair

Eyes Blue

Hair Grey.

Marks or Scars

Vacc. Scars on Left Arm.

J Ferguson

Signature of Soldier

W H Steeple Capt

Issuing Officer

For

O.C. No. 2 District Depot.

Rank

Appointment

Date of Discharge Dec. 30th-1918.

Signed at Toronto, Ont. this 30th day of Dec. 1918.

in Military District No. 2

File Reference No.

No. 2
DEC 30 1918
DISTRICT DEPOT

RBM.

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

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

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

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

Unit .....

Address on Discharge .....

Character and Conduct .....

.....

Former Occupation .....

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

.....

Medals and Decorations .....

.....

Remarks .....

.....

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

.....
Name of Officer

.....
Rank

.....
Appointment

Application for the duplicate called for on the back of this certificate will not be completed.

Uniform not to be worn after 30 days of discharge unless written authority has been granted by the G. O. C. of district.

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

M. F. W. 54. (A. F. B. 103:
500M.—9-16
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps .....

Regimental No. 868074 Rank pte. C. E. F. Name Ferguson James.

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

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

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

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
	O/S.	T.O.S. No.2 District Depot, Part II, D.O. No. 232			
NOV 22 1918		Dis. #2 D.D. Dec. 30-1918. Pt.11.#253			
		Capt			
		For O.C. No. 2 District Depot.			
		Lieut. Capt. For O.C. No. 2 District Depot			

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

[P.T.O

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

P. 559.

MARRIED OR SINGLE Married

PLACE OF BIRTH

NAME AND ADDRESS OF NEXT OF KIN Agnes Ferguson.
618 Woodbine Ave., Toronto, Ont., Canada.

RELATIONSHIP OF NEXT OF KIN Wife.

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY $20.00 EFFECTIVE (DATE) May 1/17.

PAYABLE TO Agnes Ferguson,
618 Woodbine Ave., Toronto, Ont., Canada

RELATIONSHIP OF DEPENDANT Wife.

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

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

DATE 1917	PAY NO. OF DAYS	PAY RATE	PAY AMOUNT $	PAY AMOUNT c.	FIELD ALLOWANCE NO. OF DAYS	FIELD ALLOWANCE RATE	FIELD ALLOWANCE AMOUNT $	FIELD ALLOWANCE AMOUNT c.	WORKING OR SPECIAL PAY NO. OF DAYS	WORKING OR SPECIAL PAY RATE	WORKING OR SPECIAL PAY AMOUNT $	WORKING OR SPECIAL PAY AMOUNT c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 NO	1 DATE	2 No.	2 DATE	3 No.	3 DATE	No.
May 15	Balance forward from Canada													18 15	18 15							
15/31	17	1 00/70	18	70											18 70							
June	30	.	33	.											33 .			566	9/6	3rd 28th R. 3rd	73/5	
July	20		22												22							
"	11		12	10											12 10							
Aug 1/31	31		34	10											34 10			84	29/6			
			119	90										18 15	137 05			194	30/7	248	19/8	
Sept 1-30	30	"	33												33			138	16/7	296	29/8		
			152	90											17 1 05							

PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE
1917								
Sept 30 Balance	~~33 86~~					~~100~~	33	86
Oct 1 Pay	34 10		Can a/c			20	47	96
	34 10					20		
Nov. " "	33		a.R.261 30/9/17 1st C.O.T.D.	7 30				
			a.R.377 8/10/17 12th Res.	4 87				
				12 17		~~20~~	1 mos	

NS, &c.

ECTIVE ATE	AUTHORITY

TAL, &c.

NAME OF HOSPITAL

REG'L. NO. 868074 RANK Private NAME Ferguson, James

IF IN PERMT. CORPS WHAT UNIT } UNIT 187th Bn. Draft TRANSFERRED TO 3rd Res. Bn DATE 15/5/17 AUTHORITY

PERMANENT FORCE ALLOWANCES TRANSFERRED TO 208th Bn DATE 21/7/17 AUTHORITY 001645/6

PLACE OF ATTESTATION Whitby, Ont., Canada TRANSFERRED TO 1st CORPS DATE 1/11/17. AUTHORITY

DATE OF ATTESTATION March 28/16. TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY $ 20.00 DATE EFFECTIVE May 1, 1917.

PAYABLE TO Agnes Ferguson, 618 Woodbine Ave., Toronto, Ont., Canada RELATIONSHIP Wife

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)

6-1

UITTANCE ROLLS 2 DATE	3 NO.	3 DATE	4 NO.	4 DATE	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE CREDIT	BALANCE DEBIT	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	C. REMARKS
												18 15				Trans to 3rd Res Bn. 15/5/17
									20		20	16 85				
												~~24 63~~				
9/6	208th Bn. 3rd 73/5					2 44	2 43		20		24 87	24 98				
									20		20	26 98 ✓				To 208th Bn 21/7
											64 87	39 08				
									20		29 73	43 45 ✓				
1/8					9 73				20		94 60					Q4005. 3288 20/7/17
2/8					2 43	4 87		43								
					4 87	9 73			20	69	42 59	33 86 ✓				
					17 03	17 04	2 43		100	69	237 19					

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFER. SEP. RED. ALLCE. PAY ENG.

86

96

CANADIAN
ASSIGNED PAY AUDITED
OK
aw Harris
AUDIT CLERK
DATE 23-6-19

868074 Pte Ferguson, James a Day, 2 0 0

DATE	PAY No. of Days	PAY Rate	PAY Amount $	PAY Amount c.	FIELD ALLOWANCE No. of Days	FIELD ALLOWANCE Rate	FIELD ALLOWANCE Amount $	FIELD ALLOWANCE Amount c.	WORKING OR SPECIAL PAY No. of Days	WORKING OR SPECIAL PAY Rate	WORKING OR SPECIAL PAY Amount $	WORKING OR SPECIAL PAY Amount c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	CASH PAYMENTS 1	2	3	4

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED PAY	SER. ALLCE. ENG.
Oct 31	Balance forward								43 96		
Nov.	Forward	33			12 17						
				aR960. 2/10/17 1st Res	3 30						
							20				
Dec	P. Pay	34 10		aR. 1024. 15/11/17 12th Res.	12 17						
				" 220 13/9/17 1 CO RD	4 87						
							20		38 55		
1918		67 10			36 51		40				
Jany	A.P.	34 10					20				
				aR 1088-3/1/17 1st Res	9 73				43 92		
		34 10			9 73		20				
Feby	A.P.	30 80					20				
				aR 545 11/1/18 1 Board	4 87						
				aR 631 28/1/18 " "	4 87				43 98		
		30 80			9 74		20				
Mar	" "	34 10		A.P.			20				
				aR 3208 27/2/18 1 CO	9 73				48 35		
		34 10			9 73		20				

CANADIAN
ASSIGNED PAY AUDITED
OK
A. W. Harris
AUDIT CLERK
DATE 23-6-19

CASH PAYMENTS			ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
2	3	4				CREDIT	DEBIT			

AUDITED
[illegible]
CLERK

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY. * ~~ENGLAND OR~~ CANADA.	SEPARATION ALLOWANCE. * ENGLAND OR CANADA.
EFFECTIVE DATE:- 1.5.17	EFFECTIVE DATE:-
AMOUNT:- 20.00	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.

Agnes Ferguson (Wife)
618 Woodbine Ave Toronto Ont
~~Stopped~~ 1/12/18

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
12/11/18	4892	W.S.Hy Toronto	4 80				

A.F.M. FORM REN'D. Stopped EFFEC. 1/12/18.
DISCHARGED TO Can DATE 3/11/18
PAY BOOK VERIFIED Yes.
Cr. BAL. 37.50 L.P.O. REN
AUTHY. M R A Withy D.G. 19/11/18.

PARTICULARS OF RENDERING NON-EFFECTIVE:- Discharged to Canada 30/11/18.

1918 MONTH	PARTICULARS	CR. 1	CR. 2.	PARTICULARS
Mar	Bce Forward			
Apr	8 Pay	33 00		AR 440 11/4 2nd b
				can ap.
				" 113 26/4 3rd Ld
		33 00		
May	" "	34 10		" 219 14/5 " "
				can ap
				" 246 23/8 3rd Ld
		34 10		
June	8 Pay	33 .		can a P.
				AR 352 12/6/18 3rd Ld
				" 397 25/6 "
		33 .		
July	8 Pay.	34 10		Can ap
				AR 425. 12/7/18. 3rd Ld.
				" 451. 26/7 "
		34 10		
Aug	8 Pay	34 10		can ap
				AR 475. 12/8/18 "
				" 501. 26/8 "
		34 10		
Sept	8 Pay OK.	33 .		can ap
				AR 524 12/9/18. 3rd Ld
				" 546 26/9 "
		33 .		
				P Wd.

CANADIAN
ASSIGNED PAY AUDITED
aw Harris
AUDIT CLERK
DATE 23-6-19

* ~~ENGLAND OR~~ CANADA.

5.17

2.00

SEPARATION ALLOWANCE. EFFECTIVE DATE:-

* ENGLAND OR CANADA.

AMOUNT:-

NAME:- FERGUSON James

NUMBER:- 868074

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Pte

ESS. 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.

guson (Wife)
eine Ave Toronto Ont
ppd 11/12/18

UNIT AND TRANSFERS

ORIGINAL UNIT:- 182 Bn

DATE ACCOUNT FIRST OPENED:- 15.5.17

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			160 ORD

ROM 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	
Wilby Toron	4	87			A3 M. FORM REN'D Stoppage EFFEC. 11/12/18.		
					DISCHARGED TO Can DATE 3/11/18		
					PAY BOOK VERIFIED Yes.		
					Cr. BAL. 39 50		
					AUTHY. N.R.A. Wilby D.S. 19/11/18.		

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY		F.A.		P.F.A.		SUBS'CE ALL'CE	
	1	00		10				

S OF RENDERING NON-EFFECTIVE:- Discharged to Canada 30/11/18. Auth N.R.A. Wilby D.S. 19/11/18.

PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
lce Forward								48 35	~~100 00~~	
& Pay	33 00		AR 440 11/4 2nd Lt to D.	9 73						
			Can ap.				20			
			" 113 24/4 3rd Res Bn	7 30				44 32	~~100 00~~	
	33 00			7 03			20			
" "	34 10		" 219 14/5 " " "	4 87						
			Can ap				20			
			" 248 23/8 3rd Res Bn	7 30				46 25	~~100~~	
	34 10			12 17			20			
Pay	33 -		Can a P.				20			
			AR 352 12/6/18 3 Rfa	4 87						
			" 397 25/6 "	7 30				47 08		
	33			12 17			20			
Pay.	34 10		Can ap				20			
			AR 425. 12/7/18. 3 Rfa	29 20						
			" 451. 26/7 "	7 30				24 68		
	34 10			36 50			20			
ay	34 10		Can ap				20			
			AR 475 11/8/18 "	4 87						
			" 501. 28/8 "	7 30				26 61		
	34 10			12 17			20			
ay	34 -		Can ap				20	39 61		
			AR 524 11/9/18. 3 Rfa	4 87						
			" 546 26/9 "	7 30				27 44		
	33			12 17			20			
			Pwd.							

CANADIAN
ASSIGNED PAY AUDITED
ay OK.
aw Harris
AUDIT CLERK
ATE 23-6-19

NUMBER 868074 RANK Pte NAME FERGUSON James.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERR
				ffwd.					27 44	
Oct	P - Pay	34 10						20.		
				1766 12/10 3 Qrs.	4 87					
				9080 28/10 C.F.A.	7 30				29 37	
		34 10			12 17			20.		
Nov.	✓ ✓	33 -		Can. A.F.				20	37 50	
				9892 14/11 C.F.A.	4 87				37 50	
		33.			4 87			20.		

O.O.A.S. Canada. 23/11/18

WORKD 329 27/11/18

CANADIAN
ASSIGNED PAY AUDITED
OK
A.W. Harris
AUDIT CLERK
DATE 23-6-19

NAME FERGUSON James.

2.	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4.	BALANCE	DEFERRED	SEPARATION
	Fwd.					27 44		
					20.			
	566 $\frac{12}{10}$ 3 Res.	4 87						
	9080 $\frac{28}{10}$ C.F.D.	7 30				29 37		
		12 17			20.			
	Can. A.P.				20	37 50		
	9892 $\frac{14}{11}$ C.F.D.	4 87				37 50		
		4 87			20.			

o
anada. 23/11/18
ORD 329 27/11/18

CANADIAN
ASSIGNED PAY AUDITED
OK
AWJHarris
AUDIT CLERK
DATE 23-6-19

AUDITOR: W | PAYMASTER

7308

M. OR S.

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

REGT. No. 868074 RANK Pte. NAME (IN FULL) FERGUSON JAMES

30

NEXT OF KIN — RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? — DATE EFFECTIVE

Yes.

TO WHOM PAID — RELATIONSHIP

Mrs. A. Ferguson.

ADDRESS

42 B Brookmount Rd. Toronto.

Application.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F. 182nd Bn.

IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

DATE OF ATTESTATION 27-3-16. — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY, $ — DATE EFFECTIVE

PAYABLE TO — RELATIONSHIP

ADDRESS

ANY CHANGE IN ASSIGNEE'S ADDRESS: 42 B Brookmount Rd. Toronto.

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

DISCHARGED — PLACE: #20 D. — DATE: 30-12-18 — REASON: Demob. — AUTHORITY: DO. [illegible]3 — IF ENTITLED TO POST DISCHARGE PAY

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	C.	$	C.	TOTAL CREDITS $	C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	DATE	COL. NO. 2 NO.	DATE	COL. NO. 3 NO.	DATE	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 Regie $	C.	COL. NO. 3 $	C.	ASSIGNED PAY W.S.G. $	C.	REGIMENTAL CHARGES Regie $	C.	OTHER CHARGES $	C.	W.S.G. $	C.	TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.	PARTICULARS OR REMARKS
Balance from previous account	5 mos				350	-	150	-	600	00																	63	00			63	-	Due Soldiers Dep.			Dr sec Rs. 1016 Regis 6x7 Mar 31 33. Dep 350.
																	Jan 3																		
																	Jan 2141		63 40	21420							24 00		150	40					Cks voided 3-2-19.
																	March 209877		63 40	209878							24 -		237	80					
																	Mar 31 251605		63 40	251606							24 00		325	20	126	80	48	-	
																	May 2 349048		63 40	349049							24		412	60	63	40	24		
																	May 30 676581		63 40	676582							24		500	00	70		30		On strength S.C.R. from Pte. 31-12-18 to 10-4-19
	70		30		600												CAR182 Nov 6 1714777		70	1714778				30			600								
	420		180		600														387				63	150			600	-							W.S.G. PAID IN FULL [illegible] CAPTAIN FOR PAYMASTER WAR SERVICE GRATUITY

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

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

Date of Enlistment

28-3-16

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

F 1243

Date of Assignment

~~1377~~ May 12th/17

RATE OF SEPARATION ALLOWANCE

~~20~~	~~25~~	30	

1-12-17. 1-9-18
P.C 3257. P627053
m033722.

RATE OF ASSIGNMENT

20			

(Wife)

PARTICULARS OF SEPARATION ALLOWANCE

No. 868074

Rank Pte Promoted Reverted Discharge

Soldier's Name J. Ferguson

Battalion 181 Battn. (182nd Battn)

Beneficiary Mrs. Agnes Ferguson

Relationship Wife

Address

M. F. H. 25-4 13/5/18 ✓

PARTICULARS OF ASSIGNMENT

Name Mrs. Agnes Ferguson,

Address ~~616 Woodbine Ave,~~

Change of Address Toronto, Ont.

1 42 Brookmount Rd.

2

3

4

Date 1917		Cheque No.	Amount S/A	Amount A/P	Total	
Dec 31			422	160	582	
1918 Jan.	B	67637	30	20	50	M
Feb	F	93049	25	20	45	M
Mch	G	132937	25	20	45	M
Apr	J	10268	25	20	45	M
May	Q	16790	25	20	45	M
Jun	K	27489	25	20	45	M
Jul	O	33492	25	20	45	M
Aug	M	34848	25	20	45	M
Sep	R	46362	25	20	45	M
Oct	R	50900	25	20	45	L
Nov	L	59238	25	20	45	L
Dec	N	64544	45	20	65	L ✓
			747	420	1167	L

S.A. ap. A/c Closed 31-12-18

Ret'd per Aquitania

Date 28-11-18 F.X. 4-12-18

Clerk

REMARKS 05866-J 117.

m O 19742 30-10-18.

m O 52603 4-12-18

CANADIAN
ASSIGNED PAY AUDITED
OK 30-11-18
AUDIT CLERK
DATE 23-12-19

M. F. W. 128.
4/Ont. 6-17—272-39-1141
L. L. 22280—M. & D. 7903.

CONSOLIDATED ACCOUNT

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

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

M. F. W. 128.
400m. 6-17—1772-33-1141
L. L. 22320—M. & D. 1933.

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

1. No. 868074

2 Rank. Pte.

3. Name. Ferguson. James.

4. Unit. 182nd Bn. (#2 D.D.)

5 Date of Discharge | Dec. 30th-1918. | Place TORONTO, ONT.

6 Reason for Discharge HAVING BEEN FOUND MEDICALLY UNFIT FOR SERVICE.

7. Authority. D.O. D.D.#2 Pt.11.#253

8. Proposed Residence after Discharge

42 Brookmount Rd., 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.?

James Ferguson
Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place Toronto, Ont.

Date Dec. 30th-1918.

Signature [illegible] Capt
(O. C. Discharging Unit.)

For
O.C. No. 2 District Depot.

M.F.B. 218a—300M.-11-18—1772-39-113.

LIST OF DISCHARGE DOCUMENTS.

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

Form D.M.S. 1394
50M-11478-17-4-17.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at 11-9-17 1917.

No. 868074 Rank Pte Name Ferguson. J.

Local Unit 1st. CORD. Overseas Unit Age 52

Examination held at EAST SHEDLING.

DISABILITY.
Overseas-Local
(SCRATCH ONE OUT). PARTIAL STIFF BIG TOE (RT.)

PRESENT CONDITION.

Partial ankylosis of right big toe (metatarsal-phalangeal joint)
Looks his age. Do not think he could stand up under heavy work.
Complains of pain on walking (says it pains all the time)
General condition fair.

BOARD RECOMMENDS:-

1. Fit for Duty C 111 permanently.
2. Fit for duty after ..... weeks' physical training.
3. Fit for Temporary Base Duty ..... weeks
4. Fit for Permanent Base Duty .....
5. Discharge .....

Signatures:-

(..... President.
(H.A.Culham. Capt.
(
Members (.....
(H.A.Mitchell. Ltl
B. (
(.....

APPROVED

Dated 12 SEP 1917 1917.

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

Form D.M.S. '301
AGM-11478 17-4-17.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at ..... 19[illegible].

No. ..... Rank ..... Name .....

Local Unit ..... Overseas Unit ..... Age .....

Examination held at .....

DISABILITY.
Overseas-Local
(service one only).

PRESENT CONDITION.

BOARD RECOMMENDS:-

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

Signatures:-

President. .....

Members (.....
.....
.....

APPROVED

Dated ..... 19[illegible]. For A.D.M.S.

A.F.B. 179 Canada (Revised 1918). 40266 10/8/18. D.343

Reserved for M.H.C.

Regt. No. 86074 Rank PTE. Surname FERGUSON Christian Name JAMES

Unit or Corps—(a) Overseas from United Kingdom NIL (b) in United Kingdom ST CATH

Born at—Town ARMAGH County or Province — Country IRELAND

Date of Birth—Day 16 Month NOV Year 1866 Age 52 yrs. months.

Joined at WHITBY ONT. Date 27-3-1916

Former trade or occupation CARPENTER

Permanent Marks or any peculiarity that will serve for future identification :—

Vaccination mark left arm

Height—feet 5 inches 7½ Colour of eyes BLUE

Signature of Soldier (*for identification purposes*) J. Ferguson

Medical Report

☞ *Read carefully the instructions on last page of this form.*

1. DISABILITY.

Group the disabilities, placing those resulting from separate causes in separate groups.

Disabilities Group (*a*) Senility.

Disabilities Group (*b*) Hallux rigidus - rt.

Disabilities Group (*c*)

2. CAUSE OF DISABILITY

		Place of origin.	Date of origin.
(*i.*) As to Group (*a*) above.	Age	Canada	? Inf.
(*ii.*) As to Group (*b*) above.	Injury to toe	Ireland	1878
(*iii.*) As to Group (*c*) above.			

3. Is the disability due to disease contracted or injuries received prior to Active Service ? yes

(*i.*) As to Group (*a*) above ? yes If yes, has Active Service aggravated it ? yes

(*ii.*) As to Group (*b*) above ? yes If yes, has Active Service aggravated it ? no

(*iii.*) As to Group (*c*) above ? — If yes, has Active Service aggravated it ? —

4. Is the disability due to disease contracted or injuries received while on Active Service ? no

(*i.*) As to Group (*a*) above ? no

(*ii.*) As to Group (*b*) above ? no

(*iii.*) As to Group (*c*) above ? n/a

PART I. (continued).

5. MEDICAL HISTORY.

Enlisted in Mch 1916 gave his age as 45 and is 50. Injury to great toe on the rt. foot when 10 years old and has been troubling him ever since. Did a little drill in Canada, but mostly worked as a batman. He came to England in 1917 and did but little drill since. Fatigues easily ~~and~~ on short walks and complains of pain in the toe. Wet weather aggravates his condition (his statement). Was never in France and his work was only that of a batman.

11-9-17 Short board & recommended discharge of C III permanently

6. PRESENT CONDITION.

General condition fair. Heart + lungs negative Not well nourished, not developed and looks of stated age of 52. Arteries palpable and blood pressure increased. There is evidence of an old injury to the right big toe with limitation of movements of the joint. There is reason to believe that the above complaints follow exertion or marching. There is partial ankylosis of the metatarso-phalangeal joint of the rt. big toe.

Other systems negative.

Medical history sheet; only seen board 1-9-17.

Cat. B II

7. OPERATION. (i.) Was one performed? no (ii.) If so, state what. NA

(iii.) Was one advised and declined? no

NOTE.—Loss of teeth on or immediately after Active Service should be attributed thereto, unless there is evidence to the contrary.

8. (i.) Is there loss or decay of teeth attributable to Active Service? yes

(ii.) If so, describe. Three decayed + extracted

9. DO YOU RECOMMEND:—

(a) Fit for duty? (*state category*) B III

(b) Invalid to Canada? —

(c) Discharge from the Service as permanently unfit? —

Date of Report 8 Nov. 18 1918

Station Witley

Signed A B Ellery Capt RAMC

Officer in medical charge of case.

I have satisfied myself of the general accuracy of the above Report, and concur therein *except

..... {Officer i/c Hospital / S.M.O. / Brigade} Strike out one of these

Dated at ..... Station, on ..... 191.....

*Delete if inapplicable.

Statement of the Soldier

(This is to be completed only in the case of the Soldier taking his Discharge in England.)
(Sections 1, 2, 5, and 6 are to be read to the Soldier.)

I, the undersigned.....have heard the description of my disability read, and am satisfied (or not satisfied) with it. (If dissatisfied, statement should follow.) I complain in addition of :—

.....

Signature of Soldier examined.

Instructions to Medical Officers

Question 1.—State the disability in terms of a diagnosis, that is, a diagnosis of the existing condition as distinguished from the disease or injury which caused it. It should be noted that in medical cases the disability may be the actual disease; for example, Tubercle of Lung, Chronic Bronchitis, Myalgia, Gastric conditions and so forth. (Follow the nomenclature as laid down in the "List of Diseases" of 1915, and amended by A. C. I. No. 1587 of 1917.)

Question 2.—The cause of the disability when known should be stated and care should be taken to establish as correctly as possible the place and date of origin. This is important in view of the relationship of Questions 3 and 4 to Question 5.

Questions 3 and 4.—*NOTE*—By Active Service is meant Service with the Colours in Canada, the United Kingdom or elsewhere during the present war, (since the 4th August, 1914.)

Question 5.—MEDICAL HISTORY.—State concisely the essential points of the history of the case as supported by documentary evidence. If further evidence is considered necessary to complete the Medical History, the same not being supported by documents, this should be obtained by questioning the soldier, but should be distinctly shown as "Patient's Statement." It is considered advisable that these latter statements be grouped apart from the evidence supported by documents available to the Medical Officer.

Extracts should be made from all entries on the Medical History Sheet.

If answers to Nos. 2, 3 or 4 show that the Soldier is suffering from some condition which pre-existed enlistment, it is advisable that these answers be substantiated as far as possible by statements obtained from the Soldier showing history of previous illness or injury.

Question 6.—PRESENT CONDITION.—As this question is primarily intended for the Medical Officer's report, in answering show clearly the condition of the Soldier at the time of examination.

It is directed that the objective and subjective matter be arranged in separate groups. The objective matter is considered to be the more important, in that it consists of a statement of the Medical Officer's actual finding.

Specialists' reports bearing on the PRESENT CONDITION should be attached.

In addition to description of the disability, a report on "all systems" is required in order that the whole when completed may be a true pen portrait of the Soldier's condition.

The Medical Officer in charge of the case will fill out pages 1 and 2 of this Form. The original must be wholly in the handwriting of the Medical Officer. The copies may be typewritten but must be signed by the Medical Officer who must be responsible that these are true copies of the original.

Finally the O. C. Hospital or S. M. O. or an Officer delegated for such duty by the A. D. M. S., is required to sign a certificate at the bottom of page 2, which reads as follows :—

"I have satisfied myself of the general accuracy of this report and concur therewith, except....."

This is a most important part of the paper and one to which the attention of the Officers concerned should be frequently drawn as it is by such strict supervision that the accuracy and good results of Medical Board work can be assured.

ENTRIES OF RECATEGORIZATION

Date	Station	Category	Signature of M. O.	Date	Station	Category	Signature of M. O.

Proceedings of a Medical Board on the Soldier mentioned in Part I.

10. Is the diasbility fully described in Part I. (1)? yes
If not, describe it.

11. Is the cause of the disability fully described in Part I. (2)? yes
If not, describe it.

12. From the medical information now adduced, was the disability caused or aggravated by :—
(a) Negligence of the Soldier { Caused? no / Aggravated? no }
(b) Misconduct of the Soldier { Caused? no / Aggravated? no }

13. THE ENTIRE DISABILITY.—Without regard to his regular occupation, to what extent is his capacity lessened at present for earning a full livelihood in the general market for untrained labour?
(Estimate at none, 5%, 10%, 15%, 20%, etc.) ~~Ten~~ twenty per cent

14. THE DISABILITY DUE TO SERVICE.—*(See Part I. (3). Aggravation on Active Service of a disability existing previous to joining is to be included in this estimate.)*
What part of the entire disability estimated next above (13) is due to causes arising during Active Service?
(Estimate at none, 1/10, 2/10, 3/10, etc., or all.) three tenths

15. Permanency of the Disability due to Service estimated next above in (14),
(i.) Is it permanent? no
(ii.) If not permanent, what is its probable minimum duration (*in months*)? three months

16. If an operation was advised and declined, do you consider the refusal to have been unreasonable? N.A.

17. Can the former trade or occupation be resumed? yes.

18. REMARKS:— South A.1. 1/2083 d/11-11-18

19. RECOMMENDATION:—
(a) Fit for duty? (*state category*) B ii
(b) Invalid to Canada? no
(c) Discharge from Service as permanently unfit? no

Date of Board 18/11/18

Signatures of the Board — President. Lieut-Colonel
Jas. L. Hammond Capt. Canc.

Station Witley

Approved [signature]

Dated at Witley 191

A.D.M.S.

Station

WITLEY, SURREY.
18 NOV 1918
A.D.M.S.'s HEADQUARTERS

M. D. 2

CANADIAN CONTINGENT EXPEDITIONARY FORCE

No. 56

OC

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. 868074 Rank Pte Name J. Ferguson

Corps " D 2 D.D. who was* Discharged

On 30-12-18 191..., to I.S.C.(out)

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1-12-18 191....

to 30-12-18 191..., the inclusive date of transfer or discharge.

Dr.	$	c.	Cr.	$	c.
Bal. Dr. from prev. month	32	50	Balance Cr. from prev. month		
Advances by Cheques No.			Regt'l. Pay 30 days at $ 1 c.	30	
Advances by Cheques No.			Field Allow. 30 days at $ c. 10	3	
Assigned Pay and Sep'n Allce. No.			Separation Allowances* (Monthly)		
Other charges Overpd. 3. A. 13604		95	Other Allowances* Cloth	35	
Payment on transfer or discharge No.	46	55	Other Credits* Subs	12	
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)		
Total	80	00	Total	80	

*Give particulars.

A monthly stoppage of $ 20.00 (†) has (‡) been paid on account of Assigned Pay for the month of Dec. 191 8 and Sep'n Allce. for month of Dec. 191 8 (to) Assignee Mrs. Agnes Ferguson

(Address) 42 Brookmount Rd.,

Toronto, Ont.

(†) 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.

Out 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 married. Yes

(3) cause of discharge ..... authority Do 253

(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 28-12-18

Place Toronto, Ont.

CAPT.
PAYMASTER, No. 2 DEPOT
Paymaster.

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.

M. F. W. 44.

H.Q. 1772-39-903.
100M-9-18. D.P. 874.

THIS FORM WILL BE USED FOR ALL RANKS

MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" issued by the B.P.C. and instructions issued by Militia H.Q., Ottawa, will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of Sections 1 to 17 of this Form and will obtain the signature of the invalid to the "Statement," page 3. The President of the Board of Medical Officers is responsible for the proper completion of sections reserved for recording the "Opinion of the Medical Board."
3. In answering the questions, Medical Officers will carefully obtain and record the invalid's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the invalid concerned, from witnesses, or from documents, Regimental or otherwise.
4. Special care is required in answering question 9. Read the questions carefully. All questions must be answered.
5. If space provided under any section is insufficient add another sheet. Such sheets must be initialled by the Medical Board.
6. A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board."
7. Under no circumstances may information other than that in sections 7, 8, 9 and 10 be communicated to the invalid, directly or indirectly.
8. The nomenclature of diseases must be followed, if possible, as described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London (1915), by Messrs. Harrison & Sons.

STATION Exhibition Camp DATE Dec 23rd. 1918

1. 1 (a) Unit 42 D.B. (b) Regimental No 668074 (c) Rank Pte.

(d) Surname Ferguson (e) Christian name James.

(f) Home address 42 Brookmount Rd Toronto Ont.

(g) Next of Kin Agnes Ferguson. (h) Relationship Wife.

(i) Address of Next of Kin 42 Brookmount Rd Toronto Ont.

2. Age last birthday 53 Date of birth Nov. 16th. 1865

3. Enlistment, or Appointment (if an Officer) (a) Place Toronto (b) Date 28-3-16

4. Personal description:

(a) Height 5' 7½" (b) Weight 190 (stripped) (c) Complexion Fair.

(d) Colour of hair Grey (e) Colour of eyes Blue. (f) Identification marks, Scars, etc. 2 vaccination scars left arm.

5. Former trade or occupation Carpenter.

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
	2	234.

182nd Batt. C.E.F.	Periods From	Periods To
Canada	28-3-16	May 14th. 1917
England and Canada.	May 14th. 1917	To date.
France or other theatres of War		

7. Original disease, or injury (1) Diabites Mellitus. (2) Ankylosis meta-tarsal phalangeal joint right big toe.

(a) Date of origin (1) While in the army. (2) 1877 prior to enlistment. (b) Place of origin (1) England U.K.S.(2) Ireland

(c) Cause (1) Unknown. (2) Block of wood fell on toe.

M. F. B. 227.

300M.—8-18.
1772-39-117.

(P.T.O.).M.B.

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.

WE CONCUR.

19. Is the invalid fit for

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

For glycosuria, diabetic for 6 months under I.S.C. also for injured [illegible] too 3 months massage.

(*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.)

having been found medically infic for further military ser vice. For further treatment under the I.S.C. as an out patient.

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.

J. M. Williams Lt-Col *President.*

PLACE Exhibition Camp Toronto

DATE December 23rd. 1918

Robt. L. Stuart Capt } Members

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

T. B. Purdy Capt

Assistant Director of Medical Services.

DATE 23/12/18

APPROVED BY

.....

Director-General of Medical Services.

DATE.....

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

(1) Partial loss of function of meta bolism.

(2) Partial loss of function of joint system.

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

(1) Objective:-Patient is rather emaciated, appears to have lost weight recently:- Urine analysis:- See pathologists report.

(1) Subjective:-Man has polyuria, urinates every ½ hour, urine is excessive in amount. Appetite is very good, drinks very little water, does not consume more than average amount of fluid.

(2) Objective:-Meta-tarsal phalangeal joint right big toe is slightly swollen, considerable limitation of flexion both active and passive.

(2) Subjective:-When he walks a mile toe becomes painful, stiff and tender and swells.

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

Nervous System	no	Cardio-Vascular System (If pulse rate is abnormal, B. P. will be taken.)	no	Genito-Urinary System (Albumen and Sugar will be excluded.)	no
Special Senses	no	Respiratory System	no	Integumentary System	no
Disturbances of Mentality	no	Digestive System	no	Muscular System	no
Osseous and Joint Systems	no	Any other general condition	no		

Urine:- See specialist's report.

No varicose veins, varicocele hernia or haemorrhoids.

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

(1) Patient just noticed hewas urinating more frequently than usual and passing larger quantities of urine in November 1917, prior to that date he was not troubled that way, did not report it to M.O.

(2) Has sustained injury to the meta-tarsal phalangeal joint right big toe in 1877, has been bothered with stiffness and pain there ever since then.

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

nil

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

nil.

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

(1) Not applicable (2) Yes stiffer, more p inful than prior to enlistment.

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

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

No treatment for 1 or 2.

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit?

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

yes, recommended to I.S.C. for treatment for 1 and 2.

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

(If not, briefly state why)

17. Recommendations

category D.2.3

G.H. Smith Capt C.A.M.C.

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 James Ferguson, 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

J Ferguson Pte Rank.

Signature of invalid examined.