

C.E.F.

FERGUSON ZETTA MAE

C.A.M.C.

04881

DEMOB.





Christian Name Zella Mae

W. P. GRIFFITH & SONS LTD., Printers, Old Bailey, E.C.
[1183] W11425/M1166 200m 12/16R 45 59

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 7/5 Name ZETTA MAE Surname FERGUSON
Unit or Corps C.A.M.C. (If a soldier) Regtl. No. _____
Place at Deeswater Out on, date 7/4/1886
Signature (for identification) Z. W. Ferguson

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

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

Weight 120 lbs.
Height 5 ft. 2 in.

2. NUTRITION AND DIATHESIS? 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? normal

4. RESPIRATORY SYSTEM? normal

5. HEART?
Abnormal Sounds? normal
Abnormal Size?
Pulse Rate? Intermittence or irregularity?

6. ARTERIES.—Any hardening? no

7. DIGESTIVE SYSTEM? normal

8. GENITO-URINARY SYSTEM?
normal
Urinalysis—s.g.? 1030 Reaction? acid Albumen? 0 Sugar? 0

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? Genl condition good - no disability -

Examined at No. 18 CANADIAN GENERAL (ONTARIO) HOSPITAL, ORPINGTON, KENT.
Date 12 JAN 1919
Signed [Signature] M.O.
Signed [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 of a Soldier

of an Officer in for General Service or a Soldier in for duty

The purpose of this examination is to determine the physical condition of the soldier and to report on his fitness for duty. The examination should be conducted by a medical officer or a medical board. The results of the examination should be reported on this form.

Name of Soldier: _____
 Unit or Post: _____
 Date of Examination: _____
 Signature of Medical Officer: _____

The examination is to be conducted by a medical officer or a medical board.

1. PHYSIC - The following information should be obtained:

Weight: _____

Height: _____

Temperature: _____

2. NUTRITION AND DENTISTRY

After examination of the mouth and throat, the following information should be obtained:

3. NERVOUS SYSTEM

4. RESPIRATORY SYSTEM

5. HEART

Abnormal sounds: _____

Abnormal rhythm: _____

Abnormal location of heart: _____

6. ARTERIES - Any abnormality

7. DIGESTIVE SYSTEM

8. GENITOURINARY SYSTEM

9. EYES, NOSE, EARS, ETC.

Any abnormality: _____

Is there any evidence of
 impairment of health?
 Physical condition
 Condition of teeth
 Condition of skin

Is there any evidence of
 impairment of health?
 Physical condition
 Condition of teeth
 Condition of skin

If any condition is observed which is considered to be a medical disability, this report should be sent at once to the Medical Board for the Officer or Soldier to be sent before a Medical Board for regular reporting.

Born by W.O. Act: 392-6-95

Number _____ Rank N/S

Surname FERGUSON

Christian name ZETTA. MAE

Units _____ Theatre of War ENGLAND

Date of Service 25/2/18

Remarks This med for wastage in view of above remarks

Latest Address Address not available

Roll No. A Page 4905

200m.-6-21...

GRATUITY (IMPERIAL)

4405

CHRISTIAN NAME

SURNAME

REG. NO.

SCHEDULE NO.

LINE NO.

UNIT RETIRED OR DISCHARGED FROM

PLACE OF RETIREMENT OR DISCHARGE

DATE RECEIVED FROM OTTAWA

IMPERIAL DEPOT NO.

DATE RECEIVED FROM REG. DEPOT.

DATE FORWARDED TO OTTAWA

Brown Ws Jetha M Ferguson
 being for 2657132 ps. R. Coulombe

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters)

Furgeson L.N.

REGIMENT

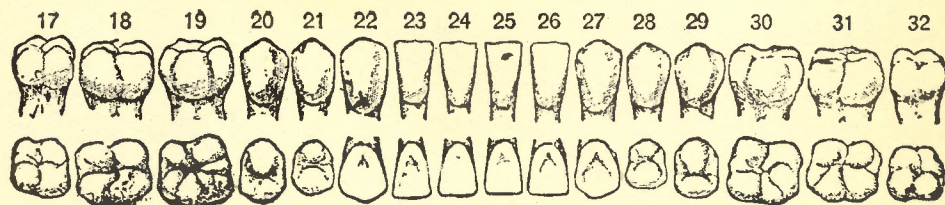
C.A.M.C.

RANK

N/S No.

Date of Examination in England Jan. 13/19

Date of Examination in France



PRESENT DENTAL REQUIREMENTS

1. FILLINGS No. 31

2. EXTRACTIONS none

3. CROWNS none

4. DENTURES

(a) Full Upper

(b) Part Upper none

(c) Full Lower

(d) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT? no

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

(a) In Canada no

(b) In England no

(c) In France no

DIRECTIONS TO
DENTAL OFFICERS

1. This form will be made out for each individual at the time of Demobilization in England or France.

2. Figures as per chart will be used to designate teeth concerned.

3. In reference to Partial Dentures the numbers of teeth thereon will be stated.

Signature of Dental Officer

Oherlie Capt

W. H. L. L. L. L.

4/4

U. S. A.

Jan. 10, 1910

U. S. A.

U. S. A.

U. S. A.

U. S. A.

U. S. A.

U. S. A.

U. S. A.

U. S. A.



Casualty Form—Active Service.

Regiment or Corps..... C.A.M.C.

Rank..... N/S Surname..... FERGUSON Christian Name..... ZETTA MAE

Religion..... Bres Age on Enlistment..... 32 years..... months

Enlisted (a)..... Terms of Service (a)..... 50 M Service reckons from (a).....

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

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

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

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A. 36, or in other official documents.
Date	From whom received				
		Embarked ...			
		Disembarked ...			
<u>25.2.18</u>	<u>Comd. J.A. on Appln to Comd</u>	<u>Schiffe</u>	<u>25.2.18.</u>	<u>Pl 56 (1916)</u>	
<u>8.3.18</u>	<u>do. 205 to 16 C.S. Corp</u>	<u>do</u>	<u>8.3.18</u>	<u>Pl 56 (1916)</u>	
		<u>Capt. Huland Hunt</u>			
<u>7.3.18</u>	<u>16 C.S.</u>	<u>205 from Comd. det</u>	<u>Detungton</u>	<u>2.3.18</u>	<u>Pl 56 (1916)</u>
<u>20.2.19</u>	<u>Transfer to C.E.F.</u>				
<u>8.3.19</u>	<u>H.Q. Quawa</u>	<u>TOS CEF Canada</u>	<u>M 19</u>	<u>20.2.19</u>	<u>CEF RO</u>
<u>21/3/19</u>	<u>Quawa</u>	<u>Gen Demob</u>	<u>" 2</u>	<u>1776-19</u>	
		<u>SOS CEF Canada</u>	<u>M 19</u>		
		<u>on Demob</u>	<u>2</u>	<u>17/3/19</u>	<u>to CEF</u>

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

(b) Signaller, Shoering-Smith, &c.

8635 M2733 2000m 9/17 (35611) C.P. & S., Ltd., Form B.103 E/1807. P.T.O.
D. J. P. J. P. Lieut.
for Director Personal Services

CANADIAN EXPEDITIONARY FORCE

G.T. 2-27.
R.A.F.

Certificate of Service

ISSUED TO OFFICERS AND NURSING SISTERS

This is to Certify that (Rank).....Nursing Sister.....

(Name in full).....Edith Mae FENNELL.....

Enlisted in.....Canadian Army Medical Corps.....

CANADIAN EXPEDITIONARY FORCE, on the.....~~fourteenth day of March~~.....

day of.....1917.....AND WAS APPOINTED to COMMISSIONED RANK

in.....Canadian Army Medical Corps.....

CANADIAN EXPEDITIONARY FORCE on the.....Twenty Fifth..... day

of.....February..... 1918

He SERVED in CANADA,.....and England with the Canadian Army Medical Corps.....

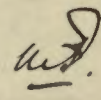
and was STRUCK OFF THE STRENGTH on the.....Seventeenth..... day

of.....March..... 1918 by reason of.....General Demobilization.....

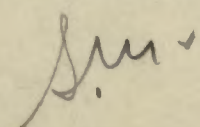
Dated at Ottawa, this.....Seventeenth..... day

of.....March..... 1918 1920.

Also served with the C.I.I.N.S.,


Capt.

For Director of Personal Services.



CANADIAN EXPEDITIONARY FORCE

Certificate of Service

ISSUED TO OFFICERS AND NON-COMMISSIONED RANK

This is to certify that

(Name in full)

Entered in

CANADIAN EXPEDITIONARY FORCE on the

day of 1917 and was appointed to COMMISSIONED RANK

in

CANADIAN EXPEDITIONARY FORCE on the

day of 1917

HE SERVED IN CANADA

and was STRUCK OFF THE STRENGTH on the

day of 1917 by reason of

Dated at Ottawa the

day of 1917

Chief Clerk, General Post Office

ASSIGNED PAY.

UNIT.

RANK.

NAME.

NAME OF

RATE OF P. AND A.

DATE

AUTHORITY

Beneficiary

Address

Amount. \$

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

16 6 G H.
Orpington

Pay 2^{xx} pd
F.A. 60
Messing 1^{xx}

H.S. 2 3/8 Dh S 60 246
22 2/8

Name Fergusson.
Initials Zetta Mae.
Bank of Montreal
Trafalgar Sq

add 0 allow 25 1/2

DATE

PARTICULARS

1918-19

CK. NO.

CR.

DR.

ASSIGNED
PAY PAID IN
CANADA

BALANCE

SPECIAL AUTHORITIES
To be initialed by P.M. in every case.

INITIALS

apl 20 apl Pay R
24

Bank 1187

108

108

May 19 May Pay (R)
23

Bank 2683

111 60

111 60

June June Pay (R)
24

Bank 4166

108

108

July July Pay R
24

Bank 5626

111 60

111 60

Aug Aug Pay R
24

Bank 7258

111 60

111 60

Sep Sept Pay R
24

Bank 9187

108

108

Oct Oct Pay R
30

Bank 10484

111 60

111 60

Nov Nov Pay (R)

Bank 12521

140

140

Dec Pay (R.)

Bank 13792

124

124

Jan 22 Pay (R.)

124

Jan 25 Jan & Feb Pay R a Bank

15497

236

Feb 15 Pay (R.)

112

Apr 17 Trav allow 25 1/2 21 1/2 P.M. Can.

765

RETURNED TO CANADA
L.P.C. TO

15-156 7611

To Ledger 12 From Ledger 5 11 3/19

ASSIGNED PAY.

UNIT.

RANK.

NAME.

NAME OF

RATE OF P. AND A.

DATE

AUTHORITY

Beneficiary

Address

Pay

F.A.

Messing

Name

Initials

Bank

Amount. \$

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

DATE

PARTICULARS

CK. NO.

CR.

DR.

ASSIGNED
PAY PAID IN
CANADA

BALANCE

SPECIAL AUTHORITIES
To be initialed by P.M. in every case.

INITIALS

ASSIGNED PAY.

UNIT.

RANK.

NAME.

NAME OF DATE AUTHORITY

DATE AUTHORITY

Beneficiary

Address

Amount. \$

Separation Allowance issued. Yes or No.

*canb
16 6 9 H
Wpington*

ns

*2 3/8 Wm S Co. 246
22 7/8*

Name *Fergusson*
Initials *Zetta Mae*
Bank *of Montreal*
Traf Square

DATE

PARTICULARS

CK. NO.

CR.

DR.

ASSIGNED
PAY PAID IN
CANADA

BALANCE

SPECIAL AUTHORITIES
To be initialed by P.M. in every case

INITIALS

1918

Feb 28 Outfit Alice

15327

30.16.5

Mar 20 P.A. for 25 3/8 - 26 3/8. less for 2 3/8. out Dk S Co. 246. 22 7/8 1022685

10 40

Do

cash

10 40

20 March Pay (R) (30 dys less)

110 60

22

Bank

110 60

NAME

RANK

UNIT

ASSIGNED PAY

DATE AUTHORITY

NAME OF DATE AUTHORITY

Home

Initials

Bank

General

Address

Amount

Separation Allowance Yes or No

SPECIAL AUTHORITIES
PAY PAID IN BALANCE
CANADA

DATE OF NO

PERIOD

DATE

File No. D.V.A.....

DEPARTMENT OF VETERANS AFFAIRS

N/S. FERGUSON. Zetto. Mac.

15-5-7-21
R.O. 1815
Fill in only.—Unit, Number, Rank and Name.

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

500M.—9-16

H. Q. 1772-39-920.

Temporary.

Casualty Form—Active Service.

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

Regimental No..... Rank N/S/ Name FERGUSON, Zetta Mac.

C. E. F.

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, or in other official documents, with 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.M.F.C.	T.O.S.#2 D.D.	Toronto	20-2-19	Auth.R.O.1766 Pt.2 D.O.70 A.M. Turner Major, For Lieut.-Colonel, O.C. No. 2 District Depot.
		S.O.S. on Gen.Demob.	Toronto	17-3-19	Auth.2MD 15-5-F-21 dated 20-3-19 Pt.2 D.O.81 A.M. Turner Major, For Lieut.-Colonel, 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, Shoeling Smith, etc., etc., also special qualifications in technical Corps duties.

(P.T.O)

[illegible]

