ORIGINAL

160th O. S. Battalion, C. E. F.

ATTESTATION PAPER.

No. 651752

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? ... FINLAYSON.
1a. What are your Christian names? ... JOHN, STANLEY.
1b. What is your present address? ... LORNE, BRUCE COUNTY, ONTARIO.
2. In what Town, Township or Parish, and in what Country were you born? ... ASHFIELD, HURON COUNTY, ONTARIO.
3. What is the name of your next-of kin? ... WILLIAM, FINLAYSON.
4. What is the address of your next-of-kin? ... LORNE, BRUCE COUNTY, ONTARIO. Canada
4a. What is the relationship of your next-of-kin? ... FATHER.
5. What is the date of your birth? ... 12TH. JUNE, 1897.
6. What is your Trade or Calling? ... STUDENT.
7. Are you married? ... NO.
8. Are you willing to be vaccinated or re-vaccinated and inoculated? ... YES.
9. Do you now belong to the Active Militia? ... NO.
10. Have you ever served in any Military Force? ... 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, JOHN, STANLEY, FINLAYSON., 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.

John Stanley Finlayson (Signature of Recruit)

Date FEBRUARY 17TH. 1916. Jas A Cowling Capt. (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, JOHN, STANLEY, FINLAYSON., 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.

John Stanley Finlayson (Signature of Recruit)

Date FEBRUARY 17TH. 1916. (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 KINCARDINE, ONT. this 17TH. day of FEBRUARY. 1916.

(Signature of Justice)

M. F. W. 23.
400M.—1-15.
H. Q. 1772-39-841.

Description of JOHN STANLEY FINLAYSON on Enlistment.

Apparent Age 18 years ..... months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height ..... 5 ft. 9 ins.

Chest measurement.
- Girth when fully expanded ..... 35 1/4 ins.
- Range of expansion ..... 3 1/4 ins.

Complexion ..... FAIR

Eyes ..... GREY

Hair ..... FAIR

Religious denominations.
- Church of England ..... YES
- Presbyterian .....
- 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).

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 FEBRUARY 17th 1916.

Place KINCARDINE, ONTARIO.

Jas A. McDonald
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.

John Stanley Finlayson 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.

A. Weir Lt Col. (Signature of Officer)

Date Feb 17th 1916.

...NTAL DOCUMENTS

NAME Finlayson John Stanley REGT. NO. 651782 UNIT H. Q. FILE NO.

CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
CASUALTY FORM (M.F.W. 54 or A.F.B. 103)				06975	Category
TRAINING HISTORY SHEET (M.F.W. 113)					K.a
FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
DENTAL HISTORY SHEET (M.F.B. 465)					Category
MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					
MEDICAL EXAMINATION (M.F.W. 129)					
TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
LAST PAY CERTIFICATE (M.F.W. 44)					
PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
PARTICULARS OF CHARACTER (A.F.W. 3226)					
COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
4 C.S.L. 1237					
5 " B181					
2 Casualty					
1 AFD					
1 Orig					
1 Misc					
1 R.22					
1 Pay Card					

AX 2620

W. 2589
100M-11-18
1772-39-1377

651752 — I.D. number / No. d'identification

FINLAYSON — Surname / Nom de famille

JOHN STANLEY — Given names / Prénoms

PERSONNEL RECORDS CENTRE
CENTRE DES DOCUMENTS DU PERSONNEL

PERSONNEL RECORDS ENVELOPE
ENVELOPPE DES DOSSIERS DU PERSONNEL

Location
Lieu 3093

"CONTENTS CONFIDENTIAL"
"CONTENU CONFIDENTIEL"

ARC-1048 (r. 87/05)

IV 13/11/17 ORIGINAL Original 651752

MEDICAL HISTORY SHEET.

Surname FINLAYSON *Christian Name* JOHN STANLEY

Examined { on 17th day of FEBY. 1916
at KINCARDINE, ONTARIO.

Birthplace { City or Town KINTAIL.
County. HURON.

Apparent age 18

Trade or occupation STUDENT

Height 5 Feet 9 Inches.

Weight 160 Lbs.

Chest measurement { Minimum 32 inches.
Maximum expansion 35 1/4 inches.

Physical development GOOD

Small-Pox Marks NONE

Vaccination Marks { Arm Right. Left.
Number NONE

When Vaccinated last

(a) Marks indicating congenital peculiarities or previous disease NONE

(b) Slight defects but not sufficient to cause rejection

Approved by [signature]

Rank Captain M.O.

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.
14/6/16	P.S.	[signature] M.O.
		M.O.
		M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.
22/8/16		[signature] M.O.
6/9/16		[signature] M.O.
14/9/16		[signature] M.O.
23/9/16		[signature] M.O.

Enlisted on 17th *day of* FEBRUARY 1916 *at* KINCARDINE, ONT.

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	160th Os. B'n.	651752		
Transferred to	C. E. F. 4th Res Bn 1st Bn			FEB 23 1918

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
London Ont	5/10/16	Board	Fit Lt Jelbert Captame

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.
200M—11-15.
H. Q. 1772 39-439.

Surname Finlayson Christian Name John Stanley

STATION	Date of Arrival at the Station.	Dates of Admission into Hospital. Day	Month	Year	Dates of Discharge from Hospital. Day	Month	Year	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.
London		29	8	16	1	9	16	Neuralgia	4	better	Capt H. S. White R.A.M.C. Capt
Bramshott		28	1	17	9	3	17	Onychia	41	Both big toenails removed. discharged inlined	
Brunswick		26	8	17	11	9	17	Onychia	17	3rd Toe R. Foot. Nail removed. Quite healed	Edwards Capt RAMC
No 12 Gen.		9	10	17.				Inflammation Toe.		Nail of 3rd Toe of Rt Foot Removed. Wound almost healed	G.B. Ferguson Capt.
M & H Epsom		13	11	17	30 NOV		1917	Onychia	18	On admission - 3rd Toe Rt. Foot - removal of nail - open yet. Dressings & light duties since admitted 26/11/17 Fit for Discharge to Reserve Unit	J.A. Carpenter Capt RAMC

Forms
I. 1237
11.

MIL CNV HP.
WOODCOCK PK
EPSOM.

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
6972	651752	Pte.	Finlayson.	J. S.
Year 1917.	Unit. 160 Can.		Age. 19.	Service. 1/12.

Station and Date.

Disease Onychia of Toe.

Bramshott
12/11/17.
1/10/17. Present condition
Nail of 3rd toe of Rt foot
ingrowing and some pus
exuding from beneath nail.
He had the nail removed
a month ago. There is
granulation tissue on one
side of nail.
Moist dressings.
2-4/10/17 Operation — Nail removed
under gas. Patient feeling
well.
6/11 Doing Well.
12/11/17. Wound almost healed.
Transferred to Epsom
C. B. Ferguson
Capt.

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

(23205) Wt. W 4234—M 627. 1,000,000, 8/16. C.F.&S. Forms/I. 1237/11.

P.T.O.

Station and Date.	

Army Form B. 181.

CLINICAL CHART.

(To be attached to Case Sheet.)

Corps 160 Cords. Military Hospital Bramshott

No. 681752 Rank and Name Pte Finlayson J.S. Age 19 Service 1 1/2

Disease _____ Date of admission 9-10-17 Date of discharge _____ Result _____

Dates of Observation																																	
Days of Disease	9	10	12																														
Temperature, Fahrenheit	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.
107°	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2
106°	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2
105°	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2
104°	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2
103°	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2
102°	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2
101°	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2
100°	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2
99°	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2
98°	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2
97°	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2	8 6 4 2
	8 6	8 6	8 6	8 6	8 6	8 6	8 6	8 6	8 6	8 6	8 6	8 6	8 6	8 6	8 6	8 6	8 6	8 6	8 6	8 6	8 6	8 6	8 6	8 6	8 6	8 6	8 6	8 6	8 6	8 6	8 6	8 6
Pulse per Minute		88	82																														
Respirations per Minute		20	18																														
Motions per 24 Hours																																	

Wt. W3728/M2313—2,000,000—6/17—H. & Sp. (10693)—A.F.B. 181/5 (E. 735)

Signature M.S. Ferguson Capt. In charge of case.

Army Form B. 181.

CLINICAL CHART.

(To be attached to Case Sheet.)

Corps_____ Military Hospital_____

No._____ Rank and Name_____ Age_____ Service_____

Disease_____ Date of admission_____ Date of discharge_____ Result_____

Dates of Observation

Days of Disease

Temperature, Fahrenheit

Time A.M. P.M.

107° 106° 105° 104° 103° 102° 101° 100° 99° 98° 97°

Pulse per Minute

Respirations per Minute

Motions per 24 Hours

Wt. W3728/M2313—2,000,000—6/17—H. & Sp. (10693)—A.F.B. 181/5 (E. 735)

Signature_____ In charge of case.

Army Form B. 181.

CLINICAL CHART.

(To be attached to Case Sheet.)

Corps 160, Can. Military Hospital Bramshott

No. 651752 Rank and Name Pte Finlayson, J.S. Age 19. Service 1/12

Disease Onychia. Date of admission 9-10-17. Date of discharge Result

Dates of Observation																																
Days of Disease	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	1	2	3	4	5	6	7	8
Temperature, Fahrenheit	Time A.M. P.M.																															
107°																																
106°																																
105°																																
104°																																
103°																																
102°																																
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98°																																
97°																																
Pulse per Minute	74	72	74	70	76	72	78	70	76	74	76	72	80	84	72	76	78	76	72	76	74	72	70	74	76	72	76	72	80	84	72	76
Respirations per Minute	16	16	16	16	18	18	18	18	18	18	18	18	18	18	18	18	18	20	20	20	20	20	20	20	20	20	20	20	20	20	20	20
Motions per 24 Hours																																

Wt. W3728/M2313—2,000,000—4/17—H. & Sp. (10693)—A.F.B. 181/5 (E. 735)

Signature C.H.B. Ferguson Capt. In charge of case.

CLINICAL CHART.

(To be attached to Case Sheet.)

Army Form B. 181

Corps_____ Military Hospital_____

No._____ Rank and Name_____ Age_____ Service_____

Disease_____ Date of admission_____ Date of discharge_____ Result_____

Dates of Observation

Days of Disease

Temperature, Fahrenheit

Time A.M. P.M.

107° 106° 105° 104° 103° 102° 101° 100° 99° 98° 97°

Pulse per Minute

Respirations per Minute

Motions per 24 Hours

Wt. W3728/M2313—2,000,000—6/17—H. & Sp. (10693)—A.F.B. 181/5 (E. 735)

Signature_____ In charge of case.

Forms
I. 1237
11

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
463	651757	Pte	Finlayson	J. C.
Year 1917	Unit. 160 Batt		Age. 18	Service. 11/2

Station and Date. Bus H Jany 28

Disease Onychia (Big toes)

Previous History:- Born in Ontario.
Has had measles, mumps, Pneumonia
No disability previous to enlistment.
V.D. negative.

Family History:- One brother and two sisters died in infancy — rest of family living and healthy.
Single — Student.

Onset Present Illness:-
Both nails of big toes have been giving him trouble for two years. Big nail left toe removed two years ago.

Present Condition:-
Left big toe nail turned inwards and growing into flesh on inner side of big toe. Matrix and surrounding flesh very much inflamed. Part of toe nail has already been removed.
The right big toe nail about same but not so inflamed.
Both pain when walking.
Heart and lungs - negative.

K. Macdonald

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

(23205) Wt.W 4234—M 627. 1,000,000, 8/16. C.F.&S. Forms/I.1237/11.

P.T.O.

Station and Date.	

Forms
I. 1237
11

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
463	65 1752	Pte	Hinkyson	J.P.
Year	Unit.	Age.	Service.	
1917	160 Batt	18	11/12	

Station and Date.	Disease	
Jan 30	Prep. for Operation	[illegible]
Jany 31	Operation - aether - removal ~~both~~ nails big toes & curettage matrix.	[illegible]
Feb 1	Doing well - dressing changed	[illegible]
Feb 5th	~~Dressing~~ satisfactorily	[illegible]
Feb 12	Healing & out of bed	[illegible]
Feb 26	All healed. Cannot be discharged in Quarantine.	[illegible]
March 1	Quarantine.	[illegible]
March 8	To be discharged. Kani Cunit Capt	

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

(23205) Wt.W 4234—M 627. 1,000,000, 8/16. C.F.&S. Forms/I. 1237/11. P.T.O.

Station and Date.	

CLINICAL CHART.

Army Form B. 181

(To be attached to Case Sheet)

Corps 160th Batt Military Hospital D.C.H.

No. 66-176-2. Rank and Name Pte. Finlayson, J. Age 18 Service 1/12

Disease Date of admission Jan. 28-17 Date of discharge Result

Dates of Observation	15	16	17	18
Days of Disease	33	34	35	36
Pulse per Minute	88	80	72	74
Respirations per Minute	20	20	20	20
Motions per 24 hours				

Temperature Fahrenheit — Time A.M. P.M. — 107° 106° 105° 104° 103° 102° 101° 100° 99° 98° 97°

(6201) Wt. W. 11421/M1165 2,000,000 12/16 McA & W Ltd. A.F.B. 181 (E. 735)

Signature In charge of case.

CLINICAL CHART.

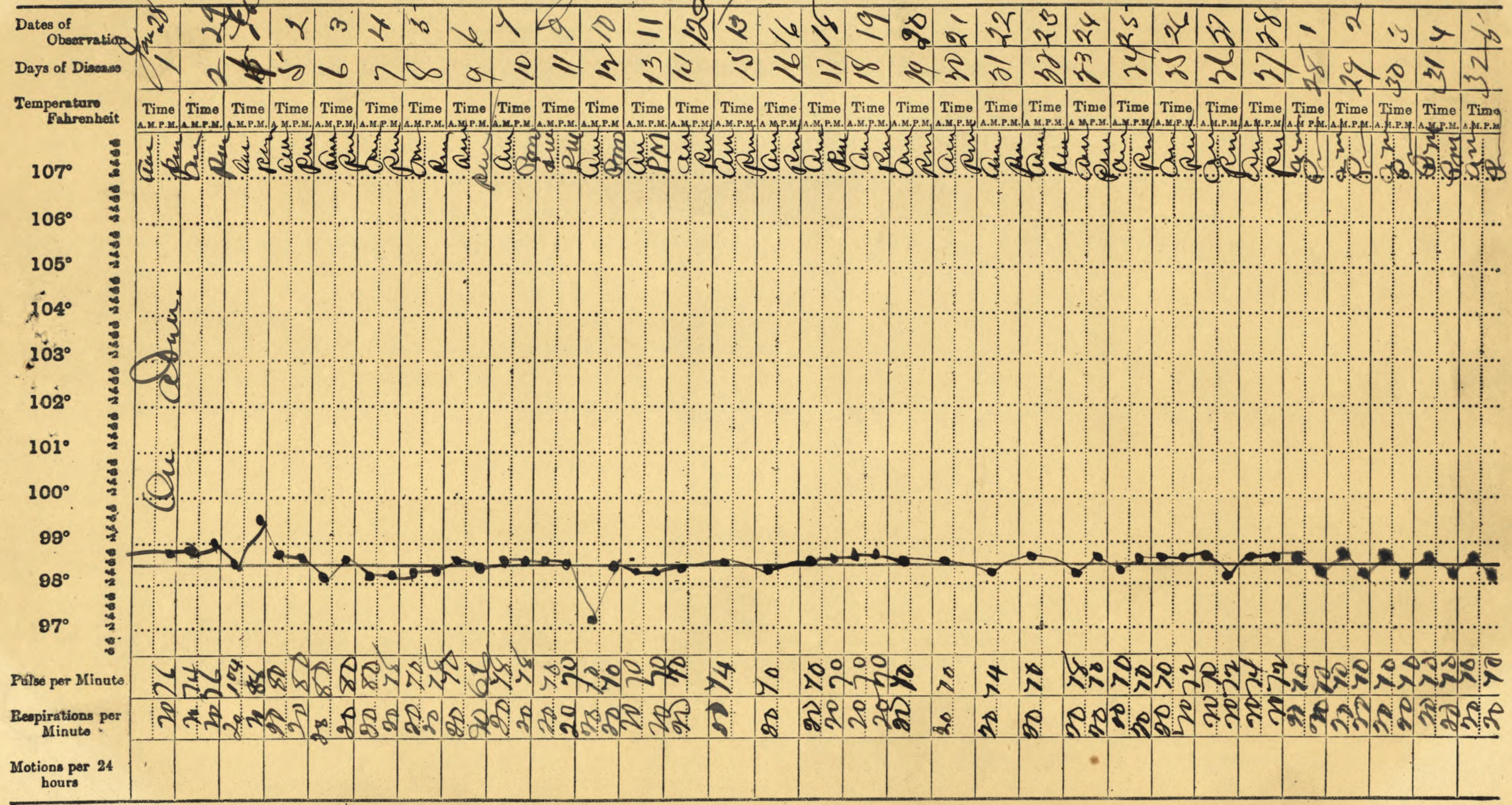
(To be attached to Case Sheet.)

Army Form B. 181.

Corps 16th Batt Military Hospital B. G H

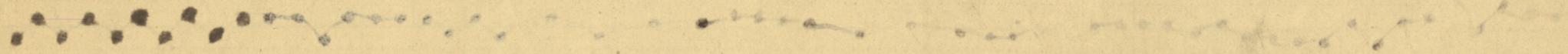
No. 65752 Rank and Name Pte Finlayson J.P. Age 18 Service 11/12

Disease _____ Date of admission Jan 28/17 Date of discharge _____ Result _____



(2669.) W9043—1195. 800,000. 12/14. C.P., Ltd. Forms/B. 181/3.

Signature _____ In charge of case.



Forms
I. 1237
12

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
Year 1917	65175 2	Pte	Finlayson	J. S.
	Unit. 160 Cands		Age. 19	Service. 18/12

Station and Date. Brandshott Aug 26/17

Disease Mycosis.

Rt 3rd. Left toe
Has been troubling him all summer
hair is imbedded in flesh both sides
& there is considerable inflammation

Sep 2.17. hair removed

Sep. 10.17. For discharge to duty 11.9.17

E Macmillan
Capt
RAMC

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

(44502) Wt.W 11203—M 1150. 1,450,000. 6/12 16. C.F.& S. Forms/I. 1237/12. (E239)

P.T.O.

Station and Date.	

651752

FORM OF WILL.

I, John Stanley Finlayson (Name in full)
Regimental Number 651752 serving in 160 Batt.
of the Canadian Expeditionary Force, do hereby revoke all former Wills by me made and declare this to be my last Will.

I bequeath all my real estate unto

/	Name and Address of person or persons to whom it is to go.

absolutely, and my personal estate I bequeath to

Mr William Finlayson Lorne Ont.	Name and Address of person or persons to receive personal estate* *(See note).*

IMPORTANT NOTE
This must be Signed and Dated by THE SOLDIER HIMSELF.

this 22nd day of August A. D. 1916

John S. Finlayson Signature of Soldier.

*N.B.—Personal estate includes pay, effects, money in bank, insurance policy, in fact everything except real estate.

Signed and acknowledged by the Testator as and for his last Will in the presence of us both present at the same time, who in his presence, at his request, and in the presence of each other have hereunto subscribed our names as Witnesses.

THE TWO WITNESSES MUST SIGN HERE

Signature of First Witness Norman L Smith
Address of Witness Armour Ont
Occupation of Witness Farmer
Signature of Second Witness G. A Sleeth
Address of Witness Armour Ont.
Occupation of Witness Student

M. F. W. 82
300M-5-16.
1772-39-983.

FORM OF WILL

I, _____, [Name in full],

[Regimental Number] _____ [Serving in] _____

of the Canadian Expeditionary Force, do hereby revoke all former Wills by me made and declare this to be my last Will.

I bequeath all my real estate unto

_____	[Name and Address of person or persons to whom it is to go]
_____	
_____	

absolutely, and my personal estate I bequeath to

_____	[Name and Address of person or persons to receive personal estate]
_____	
_____	

Witness my hand this _____ day of _____ A. D. 19[illegible]

_____ [Signature of Soldier]

*N.B.—Personal estate includes pay, allowances, money in bank, insurance policies, or [illegible] except real estate.

Signed and acknowledged by the Testator as and for his Will in the presence of us both present at the same time, who in his presence, at his request and in the presence of each other have hereunto subscribed our names as witnesses

Signature of First Witness _____

Address of Witness _____

Occupation of Witness _____

Signature of Second Witness _____

Address of Witness _____

Occupation of Witness _____

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

M. F. W. 54. (A. F. B. 103.)
250M.—1-16.
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps 160th O. S. Battalion, C. E. F.

Regimental No. 651752 Rank Pte. Name Finlayson, John Stanley

C. E. F.

Enlisted (a) 17-2-16 Terms of Service (a) ~~6 M F~~ Duration of War. Service reckons from (a) 17-2-16

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) (Student)

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 - Canada.	Halifax	17/10/16	
		Arrived - England	Liverpool	28/10/16	
23/2/18	O.C. 160th Bn	S.O.S. on transfer to 4th Cdn Reserve Bn	Witley	23/2/18	D.D. Part 2 "28" R. B. Whitehead CAPTAIN, ADJUTANT, FOR O.C. 160th CANADIAN INFANTRY BATTALION
26-2-18	O.C. 4th. Res. Bn.	T.O.S. 4th. Can. Res. Bn.	Bramshott	24-2-18	Pt. 2 Order No. 48
29-3-18	O.C. 4th. Res. Bn.	Having proceeded overseas to 1st. Bn. is S.O.S. 4th. Res. Battalion.	Bramshott	28-3-18	Pt. 2. Order No. 75 W. Barlow Lieut. A/Adjt for O.C. 4th. Canadian Res. Bn.

CERTIFIED CORRECT. 23 APR 1918 CAN. REGIMENTAL 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.

651752 Pte Finlayson J.L.

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				
C. B. D.		ARRIVED C. B. D. FRANCE	29 MAR 1918	N. R. D 29 MAR 1918 PART II ORDERS No 34 D 3/4/18	
C. B. D.		LEFT CAN. CORPS REINF. CAMP FOR	30 MAR 1918	N. R. D 30 MAR 1918	
O. C. BN		ARRIVED CAN. CORPS REINF. CAMP BN.	FIELD 30 MAR 1918	B. 213 D 30 MAR 1918	
AUG 12 1918		LEFT FOR UNIT		AUG 12 1918	D. 1383.
17.8.18	1st CAN BN	JOINED UNIT		1st. 8.18.	B 213
11.8.18.	OC 1st Bn	Killed in action.	Field.	30.8.18.	Sgt. K.A. 17573 & Effects to Base Burial Officer Letter dt. 7.9.18 Field K.A. 18/243. Pte II O No 89 dt. 13.9.18

A. De Bunter
Lieut
for Lt Col A.A.G.

R—122
8,401—50,000—21-10-16.

LTR

Rank Name FINLAYSON, John Stanley + Reg'l No. 651752

Unit 160th, Bn. If in perm. Corps, What Unit? Married or Single Single. +

Place and Date of Enlistment Kincardine Ont, February 17th, 1916. Place of Birth Ashfield, Huron County Canada. +

Name and Address, Next-of-Kin William Finlayson. + Lorne, Bruce County, Ontario, Canada, + Relationship Father. +

Assigned Pay Monthly $ Payable to

also notify. Pte D. S. FINLAYSON # 65-1678 H3 WARD SOUTHWARK MILITARY HOSP. EAST DULWICH S.E 22

RL 25-F-2049

Separation Allowance $ Payable to Relationship

Relationship

N/E. R.B. No. 44281
File R.L.25-F.2049 23/9/18
Category KA

R 13 16-27

Discharge, Date and Place Reason Character

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 "S.S. METAGAMA 28-10-16			
29.1.17	160th Bn	Adm. Bk. Hosp.	Bshott.	28.1.17	Pte D 029 bk 34
9.3.17	"	Discip. " "	Witley	9.3.17	" 68. " 48
31.8.17	"	Adm. Can. Mil. Hosp.	Bshott	27.8.17	D.L. 101 onwards
14.9.17	D.R.103 CHECKED 23 APR 1918	Dis. " " "	"	11.9.17	bkc 8. "
12.10.17		Adm. " " "	"	10.10.17	— 32 "
17.11.17		Ex to Can. Con. Hosp.	Epsom	14.11.17	— 63 "
5.12.17		Dis. " " "	"	30.11.17	— 78 "
23.2.18	160th Bn	to Lon Transf to 4th Res B.	Witley Pte	23.2.18	4th Res Bn DO. 48 of 26.2.18 Pte DO. 28
29.3.18	4th Res Bn	Posted to 1st Bn O/Seas	Bshott Pte	28.3.18	1 D.R. Pte DO. 34 of 3-4-18 Pte DO 75

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.
13.9.18	1st Bn	Killed in action	field	30.8.18	Lt II O 89.

L-L. Job 5470—M. & D. 6888

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12
50m.—7-16
H. Q. 1772-39-316

To Whom Wm Finlayson

Address Lorne Ont

By Whom Assigned Finlayson DS

Regtl. No. 651752

Rank Pte

Corps 160 Batt D Co

Rate 15-00

OCT 1 - 1916

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				

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a.
50m.—6-16.
1772—39—819.

Sheet No. 2.

L. L. Job 4503. –Req. 6832.

Name of Soldier Wm Finlayson Finlayson JS 651752 Pte 160 Batt

Month.	Year.	Cheque No.	Amt.	15.00	Remarks. OCT 1 1916
April	1916				
May					
June					
July					
Aug.					
Sept.					
Oct.		T26624	15.		
Nov.		28604	15		
Dec.		J4182	15		
Jan.	1917	P38206	15		
Feb.		V39649	15		
March		W46459	15	15	
April		X1576	15	15	
May		P7725	15		
June		O 14691	15	15	
July		V21661	15		
Aug.		D28884	15		
Sept.		D 35811	15		
Oct.		Q40848	15		
Nov.		[illegible]	15		
Dec.		M58162	15		
Jan.	1918			225	
Feb.					
March					
April					
May					
June					
July					

15.
15
7.5
1.50
2.25
2.3
1.36
3

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.				

NAME Finlayson, John Stanley.

RANK & No. Pte. 651752.

CORPS 160th. Batt.

ENLISTMENT, PLACE Kincardine, Ont. DATE Feb. 17th. 1916.

FORMER CORPS Nil.

COUNTRY OF BIRTH Canada, Ashfield, Huron Co., Ont.

NEXT OF KIN Finlayson, William. (Father.)

ADDRESS OF NEXT OF KIN Lorne, Bruce Co., Ont.

DISCHARGE, PLACE DATE

M. F. W. 22. 100 m.—9-15.

L. L. 85779—M. & D.—6011. H. Q. 1772-39-839.

MARRIED SINGLE Yes. WIDOWER

TRADE OR CALLING Student RELIGION Presbyterian

DESCRIPTION.

APPARENT AGE 18 YEARS ——— MONTHS

HEIGHT 5 FEET 9 INCHES

CHEST MEASUREMENT 35½ INCHES EXPANSION 3½ INCHES

COMPLEXION Fair EYES Grey. HAIR Fair

DISTINGUISHING MARKS Nil

MEDICAL EXAMINATION. PLACE Kincardine, Ont. DATE Feb. 17th. 1916.

REMARKS:

REGT'L No 651752

NAME Finlayson John Stanley

H. Q. FILE No. 649-

RANK AND CORPS Pte (from 60th Bn.) 1st C.I.Bn.

FOLLOWS No.

FOLLOWS

CABLE

No.	Date
P322 21-3	17-9-18
~~A316~~ 4	16 9. 18

NATURE OF CASUALTY

N. of K. William Finlayson "Father"
Lorne P.O. Bruce Co. Ont.
K in A. Aug. 30-1918

L. L. 12767—M. & D. 7390.

M. F. W. 42—50M.—12-16.
H. Q. 1772-39-893.

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
34.	Can. mil. Bramshott	29-1-17.	N. Y. D.
48.	Discharged	9-3-17.	Dysphia.
101	Can. Mil. Bramshott.	27-8-17	"
C.8.	Disch.	11-9-17	Conychia. (W. Out. R.)
C.32.	Can. Mil. Bramshott	10-10-17	" " " "
C63	Ex#12 Can Conv. Wdcote PK Epsom	14-11-17	" " " "
C78	Discharged	30-11-17	" "
43164	Rptd from Base		
	Killed in actn	26.8.18.	

R. 149.

Name FINLAYSON JOHN STANLEY *Pte.* *Reg. No.* 651752

Unit 160th. Batt

Next of Kin Canada

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
29-1-17.	Mil. Bramshott.		N.Y.D.	34		
9-3-17	Dis "		Oynchia	48		
27-8.	C.M.H. Bramshott.		Onychia.	101.		
11-9	Discharged		Do	C8.		87

Date		Movement	Place	Casualty	List No.	Notified N/K O.		W.O. List

No. 651752 Rank Pte. Name Finlayson. J. S.

T.O.S. 16-2-16. (D044-21-2-16) Unit 160th Battalion

M. D.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
Feb 16.	Feb 29.	✓		
	Mar.	✓		
	Apr.	✓		
	May	✓		
	June	✓		
	July	M.		
	Aug.	M.		
	Sept.	✓		
	Oct.	M.		

UNIT SAILED
OCT 17 1916

Number 65752 Rank Pte - V3

Surname FINLAYSON

Christian Name John Stanley

Units 1st Bn Can Inf. Theatre of War France

Date of Service 28-3-18 D

Remarks Wm. Finlayson,

Latest Address Lorne, Bruce Co., Ont.

Roll No. B. Page 18341.

200m.-2-21.M.

DATE | HISTORY

(FILES)

CASUALTY BRANCH

NAME _____ H. Q. _____

NO. _____ RANK _____ M. D. _____

UNIT (C.E.F.) _____ UNIT _____

ADDRESS _____

NEXT OF KIN _____

ADDRESS (KIN) _____

DEPT. OF NATIONAL DEFENCE
NOV 10 1922
No. 3708

HISTORY	DATE

M. F. W. 2536
100m.-5-18. 1772-39-1311

D.M S 1300.

Surname	Christian Name or Names	Reg. No.
Finlayson	J.S.	651752

Rank	Unit	Co.	Troop	Batty.
Pte	160th Bn		W Ont. (11)	

Hospital — Date of Admission

Bramshott Mil. 29-1-17

Transferred " " Hosp. 27. 8. 17

Can. Mil. Bramshott. Hosp. 10.10.17.

Epsom Convd Hosp. 14. 11. 17

Hosp.

Diagnosis N.Y. Onychia I

(1) Later Diagnosis (if changed) Onychia II

(2) Onychia 2nd finger

(3)

Additional Diagnosis: if more than one state present

R. F. B. Killed in Action - 26.8.18. R

DISPOSITION — Date

Dis 9-3-17

Des 11.9.17.

REMARKS

" 30-11-17

C.L. 5-2-17 34

13-3-17 48

31. 8. 17 101.

15. 9. 17 68.

C.L 13:10:17. C. 32.

19. 11. 17 C 63

6-12-17 678

16.9.18 @ 316 O

A.M.D. 2 Dept.
Bch. of D.G.M.S. O.M.F.C. London

RW

EPITOME OF HOSPITAL TREATMENT.

	Hospital	Adm.
1.		
2.		
3.		
4.		
5.		
6.		
7.		

P. 559.
MARRIED OR SINGLE S

PLACE OF BIRTH Kintail Ont

NAME AND ADDRESS OF NEXT OF KIN William Finlayson Lorne Ont

RELATIONSHIP OF NEXT OF KIN Father

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

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

REG'L. No. 651752 RANK Private NAME Finlayson John Hanley ✓

IF IN PERMT. CORPS WHAT UNIT } UNIT 160th Bn TRANSFERRED TO DATE AUTHORITY

PERMANENT FORCE ALLOWANCES TRANSFERRED TO DATE AUTHORITY

PLACE OF ATTESTATION Kincardine Ont TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION 17/2/16 TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY $ 15.00 DATE EFFECTIVE 1-10-16

PAYABLE TO William Finlayson Lorne Ont RELATIONSHIP Father

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)

c/d c.

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	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE CREDIT	BALANCE DEBIT	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
														10/76	10/76																10/76				Balance from Canada
Nov 1-30/16	30	1.00	30		30	10	3								33	3	3/11/16							14 60				15		29 60	14/16		7 50	6 66	
Dec 1-31/16	31	1.00	31		31	10	3	10							34/10	51	4/12/16	4th/20/12/16						12 17	4 87			15		32 04	16 22		15 50	72	
1917 Jan	31	1.00	31		31	10	3	10							34/10													15		15	33 32		16 00	19 32	
Feb	28	1.00	9 30 / 30	80											30 80													15		15	51 12		16 00	35 12	
Mch	31	1.10	14 2 / 34	00 / 10										10 76	182 76 / 34 10									19 46				15		9366	21 56		nil	21 56	
Apl	33		33												33													15		15	39 56				
May	31		34	10											34 10	33 / 77 / 91	12/11/17 / 30/1/17 / 16/3/17							14 87 / 14 60 / 486				15		34 47	39 19				
June	30		33												33	134	31/5/17							17 03				15		36 89	35 30				
July	31		34	10											34 10	205	17/6							7 30				15		15	54 40				
Aug	31		34	10											34 10	274	30/6							9 73				15		32 03	56 47				
Sept	30		33	-											33 -	340 / 422	19/7 / 31/7	483	14/8					7 30 / 9 73	7 30			15		39 33	80 14				
																								102 19	60 83			165							

651752. R6 Finlayson Jno S.

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	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE: Credit	BALANCE: Debit	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
MONTH PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFER PAY	SEE ASSC. ALLOC. ENG.																								
Sept Balance			50 14																															
Oct 3rdy Pt Pay (a) 1st			34 10					loan a/c															15											
								QR 624 160 Rn	17/9/17					21 90																					
								QR 699 160 Rn	30/9					12 17																	35 17					
			34 10											34 07									15											
Nov 30	R P		33 -																				15											
								QR 1525 166 Rn N 160 Rn	31/10/17					2 H 3																					
								QR 1527 166 R N 160 Rn	31/10/17					2 H 3																					
														" 86																				
Dec 21	R P		34 10					loan a Pay															15											
								QR 1818 166 Rn	14/11/17					H 87																	62 5 H				
1918			67 10											9 73									30											
Jan.	P P		34 10					to A P															15											
								QR. 1047 160 Rn	3/17					24 33																					
								1083 do	17/12					46 23																					
			34 10																				15											
Feb 28	R P		30 80					to A P															15											
								1146 9/1/18	160 Rn					7 30																					
								1205 25/1	"					12 17																					
								1277 12/2	"					7 30																	24 44				
			30 80											26 77									15											
March 31			34 10					to A P															15											
								1766 28/2 4 Les						9 73																					
								1981 20/3 -						17 03																	16 78				
			34 10											26 76									15											

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY. * ~~ENGLAND OR~~ CANADA.	SEPAR ALLOW * ENGLAND OR CANADA.
EFFECTIVE DATE:- 1-10-16	EFFECTIVE DATE:-
AMOUNT:- $15.00	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.

William Finlayson (Father)
Lorne. Ont

Stopped eff 1/9/18

NAME:- FINLAYSON John Stanley

NUMBER:- 651752

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Pte

UNIT AND TRANSFERS

ORIGINAL UNIT:- 160th Battn

DATE ACCOUNT FIRST OPENED:- 1-11-16

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
	1.11.18	26.4.18	4th Res

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

DAILY RATES OF PAY AND ALLOWANCES

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

PARTICULARS OF RENDERING NON-EFFECTIVE:- Killed in Action 26/8/18 & Pa 316 16/9/18.

MONTH 1918	PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
31 March	Bal Fwd								16 78		
Apr.	30 P.P.	33 -		Canar.				15			
				Dnar. 57. 5/4 (7) 6 6RB.	446						
				✓ 156. 20/4/18. (21) ✓	357				26 75		
May.	31 PP	33			803			15.			
		34 10		Can A.P.				15			
				Dnar. 253. 5/5/18. (11) 1 6 6RB.	446						
				✓ 25. 20/5/18 (9) 6 6RB	✓ 357				37 82		
June	30 PP	34 10			803			15.			
		33		6 A.P.				15			
				Dnar 461. 5/6. (2) 1 6 6RB.	357						
				✓ 566. 20/6 (9) ✓	446				47 79		
July	31 PP	33			803			15.			
		34 10		6 A.P.				15			
				✓ 826. 15/7 (5) 5 6RB.	357						
				✓ 968 31/7 (22) ✓	357				59 75		
		34 10			711			15			
Aug	31 PP	34 10		6 A.P.				15			
				✓ 1077 1/8 (4) 1 6 6RB.	357						
				✓ 355 22/8 (15) 1 Bn.	178				73 50		
		34 10			535			15			

NON EFFAC

Compiled 23.1.19 C.H.
C.R. Bal 73 50

NUMBER RANK NAME

MONTH	PARTICULARS	CR. 1.	CR. 2.		DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION

NX26-220
US

.....	First Draft.....

REINFORCING B

.....	Lieut.-Colonel F. W. Fish
.....	Lieut.-Colonel J. A. Hall.
.....	Lieut.-Colonel H. J. Cow
Total.	.....

d 12th Battalions Infantry Depots,

n reinforcements for 2 Cavalry Regin

LABORATORY REPORT.

Ward 17 Lud 29. Date Oct. 18th 1917

Reg.No. 65175.2 Rank. Pte Name Finlayson Unit 168th Can.

Disease _____

Kindly examine the accompanying specimen of _____

with special regard to _____

Sp Gr 1030 Alb neg

Reaction. Sugar neg

Capt Ferguson. Capt. CAMC
M.O. i/c Ward

A.B. Struthers Capt. CAMC
Officer i/c Laboratory.

URINE SPECIMENS

Ward 14 Date 29th Jan 19 17

Reg. No. 651752 Name & Rank Pte Finlayson Unit 160th

Disease

Sp. Gr. 1011

Reac. acid

Albumen neg.

Sugar neg.

(2)

M.O. i/c Ward

A. K. Campbell
Capt. C.A.M.C.
Officer i/c Laboratory.

Ward 20 URINE SPECIMEN. Date 27/8 1917

Reg.No. 651752 Rank Ste Name Finlayson Unit 160 Can

Disease _____ Examine specimen for _____

Reaction Acid Sp.Gr. 1035 Bile _____

Albumen neg Sugar neg Blood _____

Sediment _____

6/120

E.K. Macfarlane Capt. CAMC
M.O. i/c Ward

J. M. Johnston Capt. CAMC.
Officer i/c Laboratory

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch F 2037

OVERSEAS CONTINGENTS

~~2142~~ Date of Assignment Oct 1 - 1916

~~Oct. 1/15~~

11210 74 S.K.

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

15			

PARTICULARS OF SEPARATION ALLOWANCE

No. 651752.

Rank Pte. Promoted Reverted Discharge

Soldier's Name J. S. Finlayson

Battalion 160 Batt'n "D" Co.

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name Wm Finlayson

Address Lorne. Ont

Change of Address

1

2

3

4

Date		Cheque No.	Amount S/A	Amount A/P	Total	
1917 Dec. 31				225	225	
1918 Jan	V	66740		15	15	P
Feb	F	93736		15	15	
Mch	A	133610		15	15	
apr.	B	10941		15	15	a
May	C	17513		15	15	a
June	M	20307		15	15	a
July	O	34216		15	15	a
Aug	M	35600		15	15	a
Sept	R	47146		15	15	a

REMARKS 5956-J-20.

Account C Land 30-9-18.

E.F.X. Rend 26/5/19.

KILLED IN ACTION } DATE 30-8-18
~~DIED OF WOUNDS~~ }

C. L. No. 306 fol. 16 DATE 19-9-18

M.R.O. ..... TO DESTROY RENDERED 24/9/18

B. P. C. FORM 1 & C. F. X. COMPLETED ON FILE

CLERK Lynch DATE 24-9-18

1,30-
220
360
3

45
180
180
180
405
4

M. F. W. 128
400M.—6-17—177-39-1141
L. L. 22320—M. & D. 7693.

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—177-39-1141
L. L. 22320—M. & D. 7-93.

CLINICAL CHART.

(To be attached to Case Sheet.)

Army Form B. 181

Corps 160 Cands. Military Hospital Bramshott

No. 62175 2 Rank and Name Pte Finlayson J. S. Age 19 Service 1 8/12

Disease _____ Date of admission 26-8-17 Date of discharge _____ Result _____

Dates of Observation	26	27	28	29	30	31	1	2	3	4	5	6	7	8	9
Days of Disease															
Pulse per Minute	68	64	68	64	68	72	60	64	68	60	72	64	66	62	60	72	76	66	68	80	80
Respirations per Minute	18	18	18	20	18	20	20	18	20	18	20	20	16	20	20	20	16	18	18	20	20
Motions per 24 hours															

Temperature Fahrenheit — Time A.M. P.M. (8 6 4 2 8 6 4 2)

107° 106° 105° 104° 103° 102° 101° 100° 99° 98° 97°

Operation

(6201) Wt. W. 11421/M1165 2,000,000 12/16 McA & W Ltd. A.F.B. 181 (E. 735)

Signature [illegible] Capt. RAMC In charge of case.