

Cardiff  
22-3-16

DUPLICATE

# ATTESTATION PAPER.

No. 158511

Folio. ✓

## CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

### QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name?..... Arthur Charles Gauder
  2. In what Town, Township or Parish, and in what Country were you born?..... St. Catharines Ont.
  3. What is the name of your next-of-kin?..... Edward Gauder
  4. What is the address of your next-of-kin?..... 73 James Street, St. Catharines, Ont.
  5. What is the date of your birth?..... 25th September 1893
  6. What is your Trade or Calling?..... Postal Clerk
  7. Are you married?..... No
  8. Are you willing to be vaccinated or re-vaccinated?..... yes
  9. Do you now belong to the Active Militia?..... No
  10. Have you ever served in any Military Force?..... 7 years in 19th Regt.  
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.
- ..... Arthur C. Gauder (Signature of Man).  
 ..... E. M. Wylie (Signature of Witness).

### DECLARATION TO BE MADE BY MAN ON ATTESTATION.

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

..... Arthur C. Gauder (Signature of Recruit)  
 Date: 16th Oct 1915 ..... E. M. Wylie (Signature of Witness)

### OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, A. C. Gauder, 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.

..... Arthur C. Gauder (Signature of Recruit)  
 Date: 16th Oct 1915 ..... E. M. Wylie (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 St. Catharines this 16th day of Oct 1915.

..... W. M. Wylie J.P. (Signature of Justice)

I certify that the above is a true copy of the Attestation of the above-named Recruit.

..... W. M. Wylie (Approving Officer)  
Captain

Description of Arthur Gander on Enlistment.

Apparent Age 22 years 1 months.  
 (To be determined according to the instructions given in the Regulations for Army Medical Services.)

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

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

Height 5 ft. 9 1/2 ins.  
 Chest measurement { Girth when fully expanded 39 ins.  
 Range of expansion 3 1/2 ins.  
 Complexion Dark  
 Eyes Brown  
 Hair Dark Brown

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

CERTIFICATE OF MEDICAL EXAMINATION.

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

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

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

Date Oct 4<sup>th</sup> 1915 D. V. C. Murray Lieut.  
 Place St. Catharines A. M. E.  
 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.

Arthur Charles Gander 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. C. Gander (Signature of Officer)  
 81st. Battalion, C. E. F.  
 Date December 1st 1915.

REGIMENTAL DOCUMENTS

NAME *Gander Arthur Charles*

REGT. NO. *158511*

UNIT

H. Q. FILE NO.

| <p><b>CONTENTS</b></p>                                     | <p>DATE RECEIVED</p> | <p>TO WHOM FORWARDED</p> | <p>DATE FORWARDED</p> | <p>M. F. W. 2505<br/>REFERENCE</p> | <p>NON-EFFECTIVE BY</p> |
|--|----------------------|--------------------------|-----------------------|------------------------------------|-------------------------|
| 1 ATTESTATION PAPER (M.F.W. 23, 133, or 51)                |                      |                          |                       |                                    | DEATH                   |
| 1 CASUALTY FORM (M.F.W. 54 or A.F.B. 103)                  |                      |                          |                       |                                    | Category                |
| 1 TRAINING HISTORY SHEET (M.F.W. 113)                      |                      |                          |                       |                                    |                         |
| 1 FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)           |                      |                          |                       |                                    |                         |
| 1 REGT. CONDUCT SHEET (M.B.W. 263 or A.F.B. 120)           |                      |                          |                       |                                    |                         |
| 1 COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)        |                      |                          |                       |                                    |                         |
| 1 MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)         |                      |                          |                       |                                    | DISCHARGE               |
| 1 DENTAL HISTORY SHEET (M.F.B. 465)                        |                      |                          |                       |                                    | Category                |
| 1 MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)                |                      |                          |                       |                                    |                         |
| 1 MEDICAL EXAMINATION (M.F.W. 129)                         |                      |                          |                       |                                    |                         |
| 1 TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)      |                      |                          |                       |                                    |                         |
| 1 PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)   |                      |                          |                       |                                    |                         |
| 1 DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115) |                      |                          |                       |                                    |                         |
| 1 LAST PAY CERTIFICATE (M.F.W. 44)                         |                      |                          |                       |                                    |                         |
| 1 PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)      |                      |                          |                       |                                    |                         |
| 1 PARTICULARS OF CHARACTER (A.F.W. 3226)                   |                      |                          |                       |                                    |                         |
| 1 COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)     |                      |                          |                       |                                    |                         |
| 1 <i>Cas. Card.</i>  |                      |                          |                       |                                    |                         |
| 1 <i>2 a f. l. 1237</i>                                    |                      |                          |                       |                                    |                         |
| 1 <i>200</i>   |                      |                          |                       |                                    |                         |
| 1 <i>af. w 3997</i>  |                      |                          |                       |                                    |                         |
| 1 <i>A.F.B. 122</i>  |                      |                          |                       |                                    |                         |
| 1 <i>D.S.C. 132</i>  |                      |                          |                       |                                    |                         |
| 1 <i>Pay Card</i>  |                      |                          |                       |                                    |                         |

**S**

**171**

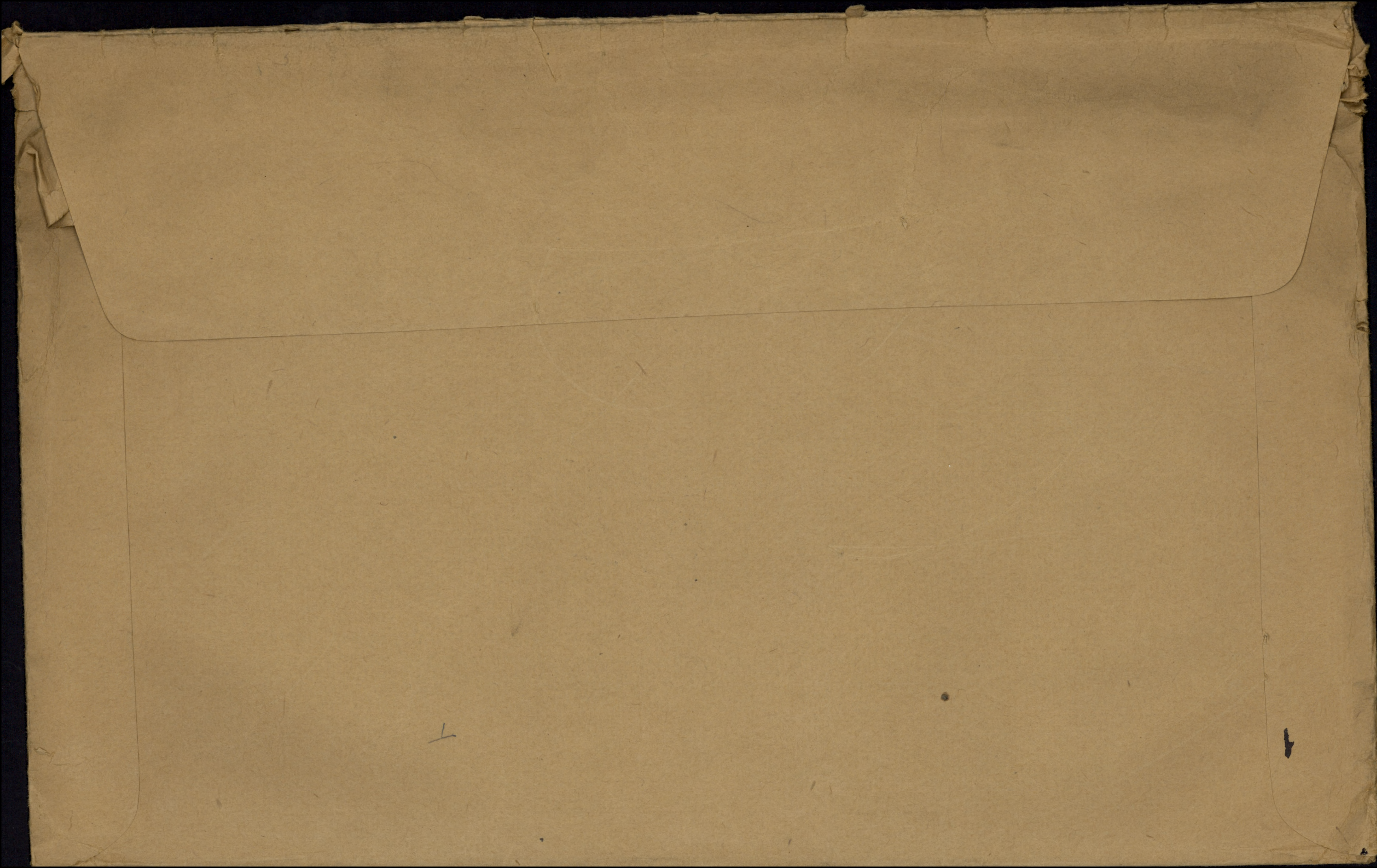
**M**

**3119**

**H**

*Med. Dept.*

*4*  
*10 - 4*  
*10 - 4*  
*11 - 4*



**CANADIAN EXPEDITIONARY FORCE.**

M.F.W. 44.  
1188 (D.P.) 250M.-12-18.  
1772-89-908.

**LAST PAY CERTIFICATE**

Regimental No. 158511 Rank Cpl Name Gardner AC  
 Unit ..... who was\* .....  
 On 17-2-19 191....., to 1-2-19 191.....  
 \*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1-2-19 to 17-2-19 191...  
 the inclusive date of transfer or discharge.

|  | Dr.       | Cr.                 |
|--|-----------|---------------------|
| Bal. Dr. or Cr. from prev. month .....                           |           | 24 59               |
| Regimental Pay..... <u>17</u> days at \$..... <u>1.70</u> .....  |           | 29 40               |
| Field Allowance..... <u>17</u> days at \$..... <u>1.70</u> ..... |           |                     |
| Separation Allowance .....                                       |           |                     |
| Clothing Allowance .....   |           | 3 50                |
| Post Discharge Pay .....   |           | 70                  |
| *Other Credits .....   |           |                     |
| Advances .....   | 57 47 1/2 |                     |
| Separation Allowance and Assigned Pay Cheque No. ....            | 50 93 2   |                     |
| *Other Charges .....   |           |                     |
| Balance on transfer or on discharge, cheque No. ....             |           | 170 40              |
| <b>Total</b> .....   |           | <u>119 94 19 99</u> |

\*Give particulars.

A monthly stoppage of \$..... 20 04 (†) has..... (‡) been paid on account of  
 Assigned Pay for the month of January 191..... (to) Assignee Mr. G. Gardner  
 and Separation Allee. for month of..... 191.....  
 (Address) ..... 73 James St. St. Catharines 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.**

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

**REMARKS:—**

- State (1) date of enlistment ..... married or single..... S
- (2) Separation Allowance, entitled or not ..... (3) Reason for discharge..... SC outpatient
- (4) Authority for discharge or transfer ..... 1045

NOTE.—S.A. & A.P. Card and Index Card (M.F.W. 71) are to accompany Last Pay Certificate on transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay Account of the officer or soldier.

Date .....  
 Place ..... TORONTO, ONT.  
 Paymaster. [Signature] CAPT. DIST. DEPOT

N.B.—(A) This form is to be used for all ranks (vide Article 122-130 and 141) Financial Instructions, C.E.F., 1916.  
 (B) For purposes of transfer it is to be made out in triplicate. Copies will be disposed of in accordance with instructions as laid down in Routine Order No. 1307, dated 12th Nov., 1918. Payment of the balance will not be made and the words "or on discharge cheque No." will be deleted.  
 (C) For purpose of discharge it is to be made out in duplicate. One copy to accompany discharge papers, and one copy for retention as a record. As payment of the balance will have been made, the words "on transfer or" will be deleted.  
 (D) If a man on discharge is entitled to Post Discharge Pay, Last Pay Certificates will be made out as in "C" with an additional copy to be forwarded to the District Paymaster.

CREDITS, ADVANCES, Etc.

Credits, Advances, Forfeitures, Issues on Repayment, etc., since issue of this L.P.C. are to be entered hereunder:

Table with columns: Date, Place, Cheque No. A.R. No. or Other Particulars, AMOUNT (Dr., Cr.), and Signature of Officer Making Payment. The table contains multiple rows of dotted lines for data entry.

Remarks section containing faint, illegible text and a large handwritten number '1333' on the left margin.

NOTES - SA & A.R. Card and Index Card (NEW) are to accompany each L.P.C. at the time of transfer. Authority for disburse or transfer. (2) Expiration allowed, entered or not. (3) Date of expiration. REMARKS - Officer's name of \$... has been paid by Treasurer/Minister. ON TRANSFER OF AN OFFICER.

**81st Battalion, C. E. F.**  
**MEDICAL HISTORY SHEET**

158511

**ORIGINAL**

Surname Gauder Christian Name Arthur Charles

Examined { on 4 day of Oct 1915  
at St. Catharines  
Birthplace { City or Town St. Catharines  
County Lincoln

Approved by D. V. Burrell  
Rank Private 1st Class M.O.

Apparent age 22-1 Years.  
Trade or occupation Postal Clerk  
Height 5 Feet 9 1/2 Inches.  
Weight \_\_\_\_\_ Lbs.  
Chest measurement { Minimum 35 1/2 inches.  
Maximum expansion 39 inches.  
Physical development Good  
Small-Pox Marks None

| Date | Fit or Unfit | EXAMINED FOR RE-ENGAGEMENT, |
|------|--------------|-----------------------------|
|      |              | <u>30 AUG 1918</u> M.O.     |
|      |              | M.O.                        |
|      |              | M.O.                        |
|      |              | M.O.                        |
|      |              | M.O.                        |
|      |              | M.O.                        |

Vaccination Marks { Arm Right Left  
Number Nil  
When Vaccinated last \_\_\_\_\_  
(a) Marks indicating congenital peculiarities or previous disease None

| Date             | Result      | VACCINATIONS. |
|------------------|-------------|---------------|
| <u>Oct 17/11</u> | <u>Good</u> | M.O.          |
|                  |             | M.O.          |
|                  |             | M.O.          |

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

| Date             | Result      | ANTI-TYPHOID INOCULATIONS, ETC. |
|------------------|-------------|---------------------------------|
| <u>Oct 17/11</u> | <u>Good</u> | M.O.                            |
| <u>Oct 14/11</u> | <u>Good</u> | M.O.                            |
| <u>Oct 19/11</u> | <u>Good</u> | M.O.                            |

Enlisted on 16 day of October 1915 at St. Catharines

|                      | CORPS.                          | REG'TL NUMBER. | HABITS. | DATE.           |
|----------------------|---------------------------------|----------------|---------|-----------------|
| Joined on enlistment | <u>19th Reg.</u>                | <u>158511</u>  |         |                 |
| Transferred to       | <u>81st Battalion, C. E. F.</u> |                |         | <u>16/10/15</u> |
|                      | <u>35th BATTALION C.E.F.</u>    |                |         |                 |
|                      | <u>4th CAN. RES. BATTALION.</u> |                |         | <u>4-1-17</u>   |

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

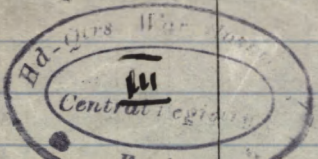
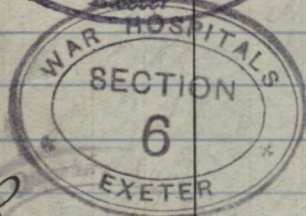
| STATION.       | DATE.          | DISCASE.         | RESULT.                  |
|----------------|----------------|------------------|--------------------------|
| <u>Windsor</u> | <u>11-2-19</u> | <u>Arthritis</u> | <u>D. J. Julian M.D.</u> |

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

**CANADIAN**

J. Mc

Christian Name *Arthur Charles*  
 Surname *Lander*

| STATION.   | Date of Arrival<br>at the<br>Station. | DATES OF                    |       |      |                             |       |         | DISEASE.   | Number<br>of days<br>in<br>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<br>of Medical Officer. |
|--|---------------------------------------|-----------------------------|-------|------|-----------------------------|-------|---------|------------|---|--|----------------------------------|
|  |                                       | Admission<br>into Hospital. |       |      | Discharge<br>from Hospital. |       |         |            |   |  |                                  |
|  |                                       | Day                         | Month | Year | Day                         | Month | Year    |            |   |  |                                  |
| <br><br>Bearwood |                                       | 26                          | 8     | 18   | 10                          | 18    | Gassed. | 43         | <i>Conjunctivitis - Gastritis</i><br><i>Trans. Section vi.</i><br><i>Two hammer toes removed.</i> | <i>J. H. Keble Perkins</i>   |                                  |
|  |                                       | 7                           | 10    | 18   | 15                          | 11    | 18      |            | 40  | <i>Recommended for surgical hospital.</i>  | <i>L. W.</i>                     |
|  |                                       | 15                          | 11    | 18   | 20                          | 11    | 18      | <i>Do.</i> | 5   | <i>Fit for dis. D.</i>   |                                  |

*W. W. W. W. W.* Captain,  
 Med. Off., Canadian Convalescent Hospital,  
 Bear Wood, Wokingham, Berks.



## 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..... *Cpl.* Name..... *Gander* Surname..... *Arthur Charles*  
 Unit or Corps..... *81 Bn - 4th Res* (if a soldier) Regtl. No. *158511*  
 Born at..... *St. Catharines Ont* on date..... *Sept. 21, 1893*  
 Signature (for identification)..... *A.C. Gander*

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

1. PHYSIQUE---Any deformity, maiming or lameness? If so, describe. *None*

Weight..... *170* lbs.  
 Height..... *5 9* ft..... 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?

*No.*

4. RESPIRATORY SYSTEM?

*No.*

5. HEART?

*No.*  
 Abnormal Sounds? *None.*  
 Abnormal Size? *No.*  
 Pulse Rate? *72.* Intermittence or Irregularity? *No.*

6. ARTERIES---Any hardening?

*No.*

7. DIGESTIVE SYSTEM?

*No.*

8. GENITO-URINARY SYSTEM?

*No.*  
 Urinalysis---s.g.? *1020.* Reaction? *acid.* Albumen? *0.* Sugar? *0.*

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

*No.*

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

*None.*

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

*Good.*

Examined at..... *Kinnelon Ont* { Signed..... *J.A. [Signature]* M.O.  
 Date..... *28/12/18* { 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.



# CANADIAN EXPEDITIONARY FORCE

## Discharge Certificate

This is to Certify that No. 158511 (Rank) Cpl

Name (in full) GANDER ARTHUR CHARLES M. M. enlisted in  
the 81st Batt.

CANADIAN EXPEDITIONARY FORCE at St catharines Ont on the 16th  
day of October. 1915

HE served in England and France.

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 25

Height 5' 9½"

Complexion Dark

Eyes Brown

Hair Dr. Brown

Marks or Scars

Vacc. Scar left Arm.

*A. C. Gander*

Signature of Soldier

*W. H. Hall*

Issuing Officer

Date of Discharge Feb 17. 1919

For Rank  
O. C. No. 2 District Depot  
Appointment

Signed at Toronto. Ont this 17th day of February 1919

in Military District No. No. 2

File Reference No. FEB 17 1919

**DISTRICT DEPOT**

E. S.

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.

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

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

Uniform is not to be worn after expiration of one month from date of discharge, except by special permission of G. O. C. district.

(31)

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

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

350M.—5-16

H. Q. 1772-39-920.

# Casualty Form—Active Service.

Unit, Regiment or Corps .....

Regimental No. 158511 Rank Cpl Name Gander  
C. E. F.

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

Date of promotion to } Date of appointment } Numerical position on }  
present rank } to lance rank } 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 |   |       |      |   |
| JAN 13 1919 | O. S.              | T. O. S. No. 2 DISTRICT DEPOT, TORONTO  |       | 1919 | PART II D. O. 28  |
| 17-2-19     |                    | S.O.S. (Discharged) No. 2 District Depot<br>Part II, D.O. No. 45<br><i>Since [unclear] Lieut</i>  |       |      |   |
|             |                    | <b>O. C. Discharge Sections,<br/>No. 2 District Depot</b>   |       |      |   |

*W. C. Robert*

Lieut.  
For O. C. No. 2 District Dep

(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, Shoing Smith, etc., etc., also special qualifications in technical Corps duties.

Casualty Report

| 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<br>taken from Army Form B. 213, Army Form A. 36, or other official documents |
|--------|--------------------|---|-------|------|--|
| Date   | From whom received |   |       |      |  |
|        |                    |   |       |      |  |

Casualty Form—Active Service.

Regiment or Corps 81st Battalion, C. E. F. Regimental Number 158511  
 Rank Private Surname Bander Christian Name Arthur Charles  
 Religion Meth Age on Enlistment 22 years 1 months.  
 Enlisted (a) 16/10/16 Terms of Service (a) D of W. Service reckons from (a) 16/10/16  
 Date of promotion to present rank \_\_\_\_\_ Date of appointment to lance rank \_\_\_\_\_  
 Extended { \_\_\_\_\_ } Re-engaged { \_\_\_\_\_ } Qualification (b) Postal Clerk  
 or Corps Trade and Rate \_\_\_\_\_  
 Signature of Officer i/c Records. \_\_\_\_\_

| Date           | Report From whom received                                | Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case. | Place of Casualty    | Date of Casualty        | Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents |
|----------------|--|---|----------------------|-------------------------|---|
|                |  | Embarked ... <u>Halifax</u>   |                      | <u>1/5/16</u>           | <u>Olympic</u>  |
|                |  | Disembarked... <u>Liverpool</u>   |                      | <u>6/5/16</u>           |   |
| <u>15/6/16</u> | <u>R.O. # 299</u>  | <u>App Actg. Sergt.</u>   | <u>West Sandling</u> | <u>6/5/16</u>           | <u>Pt. II O. 34</u>   |
| <u>7/7/16</u>  | <u>Part II Orders No 53</u>                              | <u>Transf to 35th Bn C.E.F.</u>   | <u>"</u>             | <u>6/7/16</u>           | <u>D.O. 3666</u>  |
|                |  |   |                      |                         | <u>Adjutant, 81st Battalion, C.E.F.</u>   |
| <u>14-7-16</u> | <u>O.C. 81st Bn.</u>                                     | <u>Taken on strength 35th Bn. W. Sandling</u>   |                      | <u>14-7-16</u>          | <u>Pt. 2. Ord. 167</u>  |
| <u>4.1.17</u>  | <u>O.C. 35th. Transferred to 4th. Res. Battalion.</u>    | <u>W. Sandling</u>  | <u>4.1.17</u>        | <u>Pt. 2 Ord. No. 4</u> |   |
| <u>4.1.17</u>  | <u>O.C. 35th. Taken on strength 4th. Res. Battalion.</u> | <u>W. Sandling</u>  | <u>4.1.17</u>        | <u>Pt. 2 Ord. No. 1</u> | <u>... Capt.</u>  |
| <u>18-6-17</u> | <u>O.C. 4th. Can. Res. Bn.</u>                           | <u>Reverts to permanent grade at own request.</u>   | <u>Bramshott</u>     | <u>17-6-17</u>          | <u>Pt. 2. Ord. 143</u>  |
|                |  |   |                      |                         | <u>... CAPTAIN</u>  |
|                |  |   |                      |                         | <u>ADJUTANT 4TH CANADIAN RESERVE BATTALION.</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, Shoeing-smith, &c.  
 (B99130) W 15012-5156 J. P. & Co., Ltd. Forms/B103/3. **OVER** **[P.T.O.]**

CERTIFIED COPY

Date:

12 JUL 1917

From whom received

Record of promotions, reductions, transfers, casualties, &amp;c., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.

Place of Casualty

Date of Casualty

Remarks  
Taken from Army Form B. 213, Army Form A. 36, or other official documents

18-6-17

O.C. 4th. Can. Res. Bn.

S O S to 18th. Bn. France

Bramshott

16-6-17

Pt. 2. Order No. 143.

*A. J. Stephenson*  
CAPTAIN  
ADJUTANT 4TH CANADIAN RESERVE BATTALION.

19-6-17

2 Can I.B. Depot

Arr from 4 Can Res Bn  
Eng & T.O.S. 18 Can Bn.

2 Can I.B.D.

ETAPLES

17.6.17

Nom Roll

Pt II Ord 45 d-29.6.17  
also 51, d/25.7.17

8-7-17

2 Can Ent Bn

Arr at 2nd Can Ent Bn

In the Fld

8.7.17

Nom Roll

25-8-17

18 Bn

Joined 18th Can Bn

In the Fld

20.8.17

B. 213

7/11/17

4 C.P.A.

Exhaustion transferred to

12 C.P.A.

C.P. no date

A 36 B. 3327

8/11/17

12 C.P.A.

Debility

Adm. to

12 C.P.A.

8/11/17

A 36 (B 4934)

11/11/17

do

do

Lo Duty

Field

11/11/17

A 36 (B 5231)

22.11.17

18th Bn

Promoted Corporal, vice 54155, Cpl. W. K. Gray, promoted.

In the Fld

25.9.17

Letter 22/11/17.

Pt II ord. 93, 19/12/17

13-12-17

12 C.F. Amb.

I.C.T. legs.

Trans. to

6 C.F. Amb.

13-12-17

A. 36.

(Ext. C. 1467)

do

6 C.F. Amb.

Impetigo, legs

Adm.

6 C.F. Amb.

13-12-17

do

(Ext. C. 1813)

OVER



158511. Ch. C. Gauder. Chest & Heart Report.

Present Complaint.

1. Wakes cough generally at night.
2. Much mucus-spas from nasopharynx.
3. Dyspnoea only on running 100 yds.
4. Perspires easily. Feels languid all the time.
5. Has gastric hyperacidity at times.
6. Bowel pain at times R. U. Q. along end rib.

Was troubled with "biliousness" as a youngster, otherwise healthy

until passed Aug. 1914 for West. Shows entries.

Family hist. neg. Improving since return to Canada.

Physical Findings.

Other than slight prolongation of expiration - which is broadened  
in type in right infrapneumonic fossa, there are no abnormal  
findings in chest.

Heart - normal rate is only 108 after touching toes  
10 times.

Diagnosis - Symptoms persisting from Gastroenteritis.

Recommend - One month as out-patient under  
J.C. to spend at his home in St. Catharines.

Not abnormal

Encampment

11/2/19

11/19

JB

H. G. Caspary

W. G. Chest Clinic



Sir:

Medical Re-examination.

1. I have the honour, by direction, to inform you that the Board of Pension Commissioners for Canada, require your appearance for medical re-examination on \_\_\_\_\_ at \_\_\_\_\_ in order to ascertain your present condition.

2. If you are unable to report on the above date, or if you have changed your address so that the Travelling Warrant enclosed does not read from the place in which you are now residing, please notify this office immediately, and return the Travelling Warrant, whereupon a new one will be issued.

3. If you fail to comply with these instructions the Board of Pension Commissioners will not hold itself liable for your railway transportation or other expenses.

4. If you have been married or there has been a birth in your family since your last Medical Examination, kindly bring the necessary Certificates of Marriage or birth in order that the question of additional Allowances may be considered.

# Department of Soldiers' Civil Re-establishment

OTTAWA, May 6th, 1922.

MEMORANDUM TO:

---DIRECTOR OF RECORDS' ---

Re:- Arthur Charles GANDER

It is noted that military Will of the above mentioned has been returned to you.

As this man has applied to this Department for treatment any mail addressed to him c/o Unit Director of Administration D.S.C.R., #185 Spadina Ave., TORONTO, Ont.

will be passed to him.

W.C. MARriott, for  
Director of Administration.

PER 

ASW/RC

|                             |
|-----------------------------|
| <b>A. &amp; D.<br/>CARD</b> |
|-----------------------------|

Can: Conval: Hospital..... HOSPITAL.

Bear Wood,

AT.....

 A. & D. No. *OS 15588* PL. OF ACTION.....

 RANK *Sgt.* REG. NO. *158511* UNIT *18th Gen Inf Co* SICK OR WOUNDED

 NAME *Gander, Al* AGE *35* RELIGION *M*

 PLACE IN HOSPITAL *hut 10* *Arthur Charles*

 DIAGNOSIS *Shell Gas*

 ADMITTED..... FROM *W. E. Co*

 DISCHARGED *4-19-18* TO *4 Res Witley*

TRANSFERRED.....

 SERVICE AT HOME *23/12* IN FIELD *15/12*

RESULTS.....

*Recovered 7/18*

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



59

Number

15-85-11

Rank

Cpl

59

Surname

GANDER

Christian Name

Arthur Charles

Units

18<sup>th</sup> Bn Can Inf Theatre of War France

Date of Service

17-6-17

Remarks

26 Highland Ave

Latest Address

~~73 James St~~

St Catharines

Roll No.

B. Page 15819

Out

DESP AUG 16 1922

REGN. NO. GA37574



No. 1585-11 RANK PTE

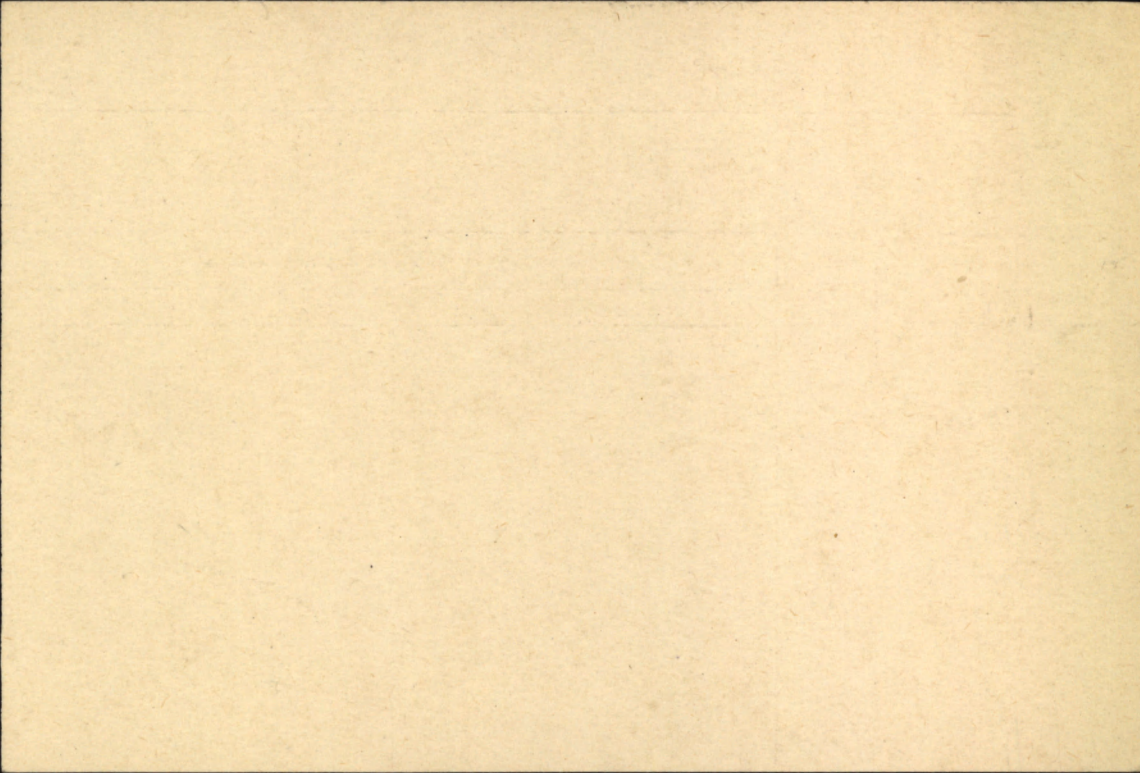
NAME Gander. A. C.

T. O. S.

UNIT 87 st B n.

M. D. 2.

| PAID<br>FROM | PAID<br>TO | SIG.<br>OR<br>REC'T | PROMOTIONS, TRANSFERS, DISCHARGES, ETC. |           |
|--------------|------------|---------------------|---|-----------|
|              |            |                     | PARTICULARS                             | AUTHORITY |
|              |            |                     | see Gander. A. C.<br>87 st B n.         |           |



SURNAME.

Gander

M. M.  
S.G. # 31142

2

CARD NO.

CHRISTIAN NAMES

Arthur Charles

S.O.S. 17-2-19  
D.O. 45 FOLL. 14-2-19  
On 21 222

REGL. NO. 158511

RANK

Cpl.

UNIT 81st

Bn.

FORMER CORPS

19th Regt. (7 yrs)

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Gander, Edward,

RELATIONSHIP TO SOLDIER

R. n. S.

ADDRESS

13 James St. St Catharines, Ont.

COUNTRY OF BIRTH

Canada St Catharines, Ont.

DATE

PLACE OF ATTESTATION

St Catharines, Ont.

DATE

Oct 16th, 1915.

Sailed from Halifax Per

S. S. Olympic 28-4-16<sup>408</sup>  
APC 20-1-19 2568  
38 Cpl.

MARRIED

SINGLE

Yes.

WIDOWER

TRADE OR CALLING

Postal clerk

RELIGION

Wesleyan.

DESCRIPTION.

APPARENT AGE

22

YEARS

1

MONTHS

HEIGHT

5

FEET

9 1/2

INCHES

CHEST MEASUREMENT

39

INCHES

EXPANSION

3 1/2

INCHES

COMPLEXION

Dark

EYES

Brown

HAIR

Dk. Brown.

DISTINGUISHING MARKS

MEDICAL EXAMINATION.

PLACE

St Catharines, Ont.

DATE

Oct 4th, 1915.

No. 158511 RANK *Otc.*

NAME *Gander, G.*  
*Gander may Paylist C.*

T. O. S. 16-10-15 UNIT *81st* *IX* *Battalion,*

*D.O. 6 of 2-10-15*  
*16-10-15 D.O. 20 of 19-11-15*

M. D. *2*

| PAID FROM      | PAID TO        | SIG. OR REC'T | PROMOTIONS, TRANSFERS, DISCHARGES, ETC. |                             |
|----------------|----------------|---------------|---|-----------------------------|
|                |                |               | PARTICULARS                             | AUTHORITY                   |
| <i>1915</i>    | <i>1915</i>    |               |   |                             |
| <i>Oct. 16</i> | <i>Oct. 31</i> | <i>✓</i>      |   |                             |
| <i>Nov. 1</i>  | <i>Nov. 30</i> | <i>✓</i>      |   |                             |
| <i>Dec.</i>    |                | <i>✓</i>      |   |                             |
| <i>1916</i>    |                | <i>✓</i>      | <i>a/ Lt. Cpl. 15-12-15</i>             | <i>D.O. 36 of 15-12-15.</i> |
| <i>Jan.</i>    |                | <i>✓</i>      |   |                             |
| <i>Feb.</i>    |                | <i>✓</i>      | <i>a/ Sgt. 12-2-16</i>                  | <i>D.O. 34 of 12-2-16</i>   |
| <i>Mar.</i>    |                | <i>✓</i>      |   |                             |
| <i>Apr.</i>    |                | <i>✓</i>      |   |                             |
| <i>May</i>     |                | <i>u</i>      |   |                             |

UNIT SAILED  
APR 28 1916



Can: Conval: Hosp:

HOSPITAL.

A. & D.  
CARD

Bear Wood,

AT.....

A. & D. No. 0.3.2.13469 PL. OF ACTION France.RANK Captain REG. No. 144576 UNIT 10th Cav Reg Troop SICK OR WOUNDEDNAME Gair John AGE 28 RELIGION Cath.PLACE IN HOSPITAL 204c.DIAGNOSIS Broncho Pneumonia.ADMITTED July 24th 1918 FROM G. A. H. Hospital.DISCHARGED 16 AUG 1918 TO 3rd L. L. D. Seaford.

TRANSFERRED .....

SERVICE AT HOME 26 months IN FIELD 9/12.

RESULTS .....

G. L. Gair M.

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





*Arthur Charles*

Name

*GANDER*

Rank

*1st Lt*

Reg. No.

*158511*

Unit

*18<sup>th</sup> Bn*

Next of Kin

*Canada*

| Date   | Movement                  | Place                | Casualty | List No.         | Notified N/K O. | W.O. List    |
|--|---------------------------|----------------------|----------|------------------|-----------------|--------------|
| <i>18/11</i>   | <i>176 F.A.</i>           | <i>Debelity</i>      |          | <i>262</i>       |                 | <i>7618</i>  |
| <i>14-12</i>   | <i>5. C. F. A.</i>        | <i>Impetigo Lips</i> |          | <i>292</i>       |                 | <i>10202</i> |
| <i>14-12</i>   | <i>6 P. F. A.</i>         | <i>do</i>            |          | <i>2101</i>      |                 | <i>10648</i> |
| <i>23-12</i>   | <i>Discharged to Duty</i> | <i>do</i>            |          | <i>2101</i>      |                 | <i>20</i>    |
| <i>1918</i>  | <i>6 Gen H. Raven</i>     | <i>650 base Sten</i> |          | <i>A298 H248</i> |                 | <i>30411</i> |
| <i>26-8</i>  | <i>was better</i>         | <i>do</i>            |          | <i>B297</i>      |                 | <i>25062</i> |
| <i>16-11</i>   | <i>C. O. Bearwood</i>     | <i>do</i>            |          | <i>B. 3109</i>   |                 | <i>1349</i>  |
| <i>4-12</i>  | <i>Discharged</i>         | <i>do</i>            |          | <i>B426</i>      |                 | <i>1392</i>  |
| <i>R L 4/12/18 SF 4/12/18 to 14/12/18 Report - H. R. R. with</i> |                           |                      |          |                  |                 |              |

*NE*



NAME

Gander Arthur Charles

REGT'L No.

158511.

RANK AND CORPS

Pte Cpl 18<sup>th</sup> Bn form 81<sup>st</sup> Bn

H. Q. FILE No. 649.

CABLE

NO.

DATE

NATURE OF CASUALTY

FOLLOWS

No.

FOLLOWS

not Edward Gander (RNs)  
 13. James St., St. Catharines, Ont.  
 Adm 6 Gen W. Rouen Aug 18<sup>th</sup>  
 1918 Sh. gas.

Sos 17-2-19

| LIST No. | HOSPITAL          | DATE OF ADMISSION | REMARKS                     |
|----------|-------------------|-------------------|-----------------------------|
| A624)    | 12 Can Old Amb.   | 8-11-17           | Debility.                   |
| A92-1    | 5 " " "           | 14-12-17          | Impetigo, legs. W. Out Reg. |
| A.100-1  | 6 " " "           | 14-12-17          | "                           |
| A-100-1  | Disc to duty      | 29-12-17          | "                           |
| A 298    | 6 Gen Rouen       | 18-8-18           | Grew Shell Gas.             |
| B297     | way Exeter        | 26-8-18           | " " " "                     |
| B369     | Can. Com. Birwood | 16-11-18          | " " "                       |
| B426     | Discharged        | 4-12-18           | " " "                       |

SURNAME

CHRISTIAN NAME OR NAMES

REG. NO.

Gander.

A.C.

158511.

RANK

UNIT

Co.

TROOP

BATTY.

Pte. *Call*

WO 18.

DATE OF ADMISSION

12 Can Fd Amb.

8-11-17.

1. *6" Can Fd Amb.*

HOSP. *14-12-17*  
*14-12-17*

2. *6 Gen. Pouch*

HOSP. *18-8-18*

3. *War. Exch.*

HOSP. *26-8-18*

*C.C. Bearwood.*

HOSP. *16. 11. 18*

DIAGNOSIS

~~XXXXXXXX~~ Debility.

1.

*Impetigo legs.*

2.

*G.I.W. Shell Gas.*

3.

DISPOSITION

DATE

CL 14-11-17 A62-4.

REMARKS

*19-12-17 292-1*  
*31-12-17 2100-1*  
*26-8-18 298.*  
*29-8-18 10297*  
*31. 11. 18 13369.*  
*31. 1. 19 13426/1*

*Dis to D by 23-12-17*  
*Dis. 4. 12. 18.*

A.M.D. 2 DEPT.

Bch of ... M.F.C. London.

EPITOME OF HOSPITAL TREATMENT

HOSPITAL

ADM.

1.

2.

3.

4.

5.

6.

7.

Name L. GANDER Arthur Charles. Rank Cpl Regtl. No. 158511

Fyle Depot.....

Original unit..... Present unit 81st Bn M. or S. Age 25 Religion Wes Ref. H.Q.....

Port, ship and date of arrival Empress Britain Halifax 21-1-19

Next of kin Father Edward Gander 73 James St. St. Catharines, Ont

Address on leave Same

Address on discharge Same

Transportation issued <sup>Yes</sup> No Date No Character on discharge.....

Previous occupation Postal Clerk Date and place of enlistment St Catharines, Oct. 4-15

Diagnosis Gassing. Date of Medical Boards 11-2-19.

| Date.          | Remarks.   | Pt. 2 Order No. |
|----------------|--|-----------------|
| <u>T.O.S.</u>  |  |                 |
| <u>15-1-19</u> | <u>Posted to Gas. Co. (Ex. Camp) 22-1-19.</u>  |                 |
|                | <u>Leave &amp; Subs. from 27-1-19 to 10-2-19.</u>  | <u>28</u>       |
| <u>17-2-19</u> | <u>SOS DISCHARGED "MEDJUNFIT" entitled to 183 days WSG to take OUT-Pat. treat't with Dept. of S.C.R.</u> | <u>45</u>       |

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

Date.

Remarks

Pt. 2 Order No.

M. F. W. 192

150m.—5-18

1772-39-1243



MARRIED OR SINGLE *S.*  
 PLACE OF BIRTH *St. Catharines, Ont.*  
 NAME AND ADDRESS OF NEXT OF KIN *Edward Gander*  
*73 Jas St., St. Catharines, 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            |
| <i>Reverts to ranks to proceed 9 Dec. 17/017</i> | <i>17/017</i>  | <i>80-143-15/017</i> |
| <i>Prom Corp</i>                                 | <i>25.9.17</i> | <i>93. 19.12.17</i>  |

| ADMISSIONS TO HOSPITAL. &c. |                 |          |                  |
|-----------------------------|-----------------|----------|------------------|
| DATE ADMITTED               | DATE DISCHARGED | V. OR A. | NAME OF HOSPITAL |
|                             |                 |          |                  |

REG'L No. *158511* RANK *Sgt* NAME *Gauder, Arthur Charles*  
 IF IN PERM. CORPS WHAT UNIT *81st Btu.* TRANSFERRED TO *35th Bn.* DATE *21/7/16* AUTHORITY *Do. 53*  
 PERMANENT FORCE ALLOWANCES TRANSFERRED TO *4th Res Bn.* DATE *1.2.17* AUTHORITY *51/116*  
 PLACE OF ATTESTATION *St. Catharines, Ont.* TRANSFERRED TO *18 Bn.* DATE *1-11-17* AUTHORITY *M.R.*  
 DATE OF ATTESTATION *Oct 16. 15* TRANSFERRED TO DATE AUTHORITY  
 ASSIGNED PAY MONTHLY \$ *20.00* DATE EFFECTIVE *1 Nov 17*  
 PAYABLE TO *Mrs. E. Gander, 73 James St., St. Catharines, Ont.* RELATIONSHIP *Mother*  
 ASSIGNED PAY MONTHLY \$ DATE EFFECTIVE  
 PAYABLE TO RELATIONSHIP  
 STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) EFFECTIVE REASON  
 DISCHARGE DATE AND PLACE REASON AND AUTHORITY  
 ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)  
 ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

Checked *A. Robertson.*

| DATE            | PAY         |               | FIELD ALLOWANCE |             | WORKING OR SPECIAL PAY |        | ASSIGNED PAY CREDITS | OTHER CREDITS | TOTAL CREDITS | ACQUITTANCE ROLLS |              |                |             | CASH PAYMENTS  |             |               |               | ASSIGNED PAY | OTHER CHARGES | TOTAL DEBITS | BALANCE      |               | PAY WITHHELD OR DEFERRED | PAY AVAILABLE FOR ISSUE | REMARKS |   |        |       |  |  |
|-----------------|-------------|---------------|-----------------|-------------|------------------------|--------|----------------------|---------------|---------------|-------------------|--------------|----------------|-------------|----------------|-------------|---------------|---------------|--------------|---------------|--------------|--------------|---------------|--------------------------|-------------------------|---------|---|--------|-------|--|--|
|                 | NO. OF DAYS | RATE          | AMOUNT          | NO. OF DAYS | RATE                   | AMOUNT |                      |               |               | NO. OF DAYS       | RATE         | AMOUNT         | 1           | 2              | 3           | 4             | 1             |              |               |              | 2            | 3             |                          |                         |         | 4 | CREDIT | DEBIT |  |  |
|                 |             |               |                 |             |                        |        |                      |               | <i>28.95</i>  | <i>28.95</i>      |              |                |             |                |             |               |               |              |               |              |              |               |                          |                         |         |   |        |       |  |  |
| <i>May 31</i>   | <i>135</i>  | <i>41.85</i>  | <i>31</i>       | <i>15</i>   | <i>4.65</i>            |        |                      | <i>46.50</i>  |               | <i>46.50</i>      | <i>25</i>    | <i>18 May</i>  | <i>69</i>   | <i>31 May</i>  |             | <i>26.44</i>  | <i>9.43</i>   |              |               | <i>25</i>    |              | <i>61.50</i>  | <i>13.95</i>             |                         |         |   |        |       |  |  |
| <i>June 30</i>  | <i>135</i>  | <i>40.50</i>  | <i>30</i>       | <i>15</i>   | <i>4.50</i>            |        |                      | <i>45.00</i>  |               | <i>45.00</i>      | <i>104</i>   | <i>15 June</i> | <i>123</i>  | <i>30 June</i> |             | <i>4.84</i>   | <i>2.43</i>   |              |               | <i>25</i>    |              | <i>32.30</i>  | <i>26.65</i>             |                         |         |   |        |       |  |  |
| <i>July 20</i>  | <i>135</i>  | <i>27</i>     | <i>20</i>       | <i>15</i>   | <i>3</i>               |        |                      | <i>30</i>     |               | <i>30</i>         |              |                |             |                |             |               |               |              |               | <i>25</i>    |              | <i>25</i>     | <i>31.65</i>             |                         |         |   |        |       |  |  |
| <i>2/31</i>     | <i>135</i>  | <i>14.85</i>  | <i>11</i>       | <i>15</i>   | <i>1.65</i>            |        |                      | <i>16.50</i>  |               | <i>16.50</i>      |              |                | <i>575</i>  | <i>17/7</i>    |             |               | <i>9.73</i>   |              |               |              | <i>11.80</i> | <i>9.73</i>   | <i>38.42</i>             |                         |         |   |        |       |  |  |
| <i>Aug. 31</i>  | <i>135</i>  | <i>41.85</i>  | <i>31</i>       | <i>15</i>   | <i>4.65</i>            |        |                      | <i>46.50</i>  |               | <i>46.50</i>      | <i>647</i>   | <i>29/8</i>    | <i>681</i>  | <i>9/8</i>     |             | <i>9.73</i>   | <i>4.87</i>   |              |               | <i>25</i>    |              | <i>39.60</i>  | <i>45.32</i>             |                         |         |   |        |       |  |  |
| <i>Sept 30</i>  | <i>135</i>  | <i>40.50</i>  | <i>30</i>       | <i>15</i>   | <i>4.50</i>            |        |                      | <i>45.00</i>  |               | <i>45.00</i>      | <i>772</i>   | <i>3/8</i>     | <i>818</i>  | <i>14/9</i>    |             | <i>19.47</i>  | <i>9.73</i>   |              |               | <i>25</i>    |              | <i>54.20</i>  | <i>36.12</i>             |                         |         |   |        |       |  |  |
| <i>Oct 31</i>   | <i>135</i>  | <i>41.85</i>  | <i>31</i>       | <i>15</i>   | <i>4.65</i>            |        |                      | <i>46.50</i>  |               | <i>46.50</i>      | <i>865</i>   | <i>29/9</i>    | <i>885</i>  | <i>14/10</i>   |             | <i>19.47</i>  | <i>9.74</i>   |              |               | <i>25</i>    |              | <i>54.21</i>  | <i>28.41</i>             |                         |         |   |        |       |  |  |
| <i>Nov 30</i>   | <i>135</i>  | <i>40.50</i>  | <i>30</i>       | <i>15</i>   | <i>4.50</i>            |        |                      | <i>45.00</i>  |               | <i>45.00</i>      | <i>998</i>   | <i>30/10</i>   | <i>1033</i> | <i>14/11</i>   |             | <i>4.87</i>   | <i>4.86</i>   |              |               | <i>25</i>    |              | <i>34.73</i>  | <i>38.68</i>             |                         |         |   |        |       |  |  |
| <i>Dec 1-31</i> | <i>135</i>  | <i>41.85</i>  | <i>31</i>       | <i>15</i>   | <i>4.65</i>            |        |                      | <i>46.50</i>  |               | <i>46.50</i>      | <i>1075</i>  | <i>30/11</i>   | <i>1124</i> | <i>14/12</i>   |             | <i>12.17</i>  | <i>4.87</i>   |              |               | <i>25</i>    |              | <i>42.04</i>  | <i>43.14</i>             |                         |         |   |        |       |  |  |
| <i>Jan 1-31</i> | <i>135</i>  | <i>46.50</i>  |                 |             |                        |        |                      | <i>46.50</i>  |               | <i>46.50</i>      | <i>1181</i>  | <i>27/12</i>   |             |                |             | <i>17.03</i>  |               |              |               | <i>25</i>    |              | <i>42.03</i>  | <i>47.61</i>             |                         |         |   |        |       |  |  |
| <i>Feb 1-28</i> | <i>28</i>   | <i>42</i>     |                 |             |                        |        |                      | <i>42</i>     |               | <i>42</i>         | <i>90</i>    | <i>26/11</i>   | <i>28</i>   | <i>16/11</i>   | <i>1007</i> | <i>24/12</i>  | <i>136.28</i> | <i>9.73</i>  | <i>4.36</i>   |              | <i>25</i>    |               | <i>60.99</i>             | <i>28.62</i>            |         |   |        |       |  |  |
|                 |             | <i>456.00</i> |                 |             |                        |        |                      | <i>456</i>    |               | <i>456</i>        | <i>28.95</i> |                |             |                |             | <i>136.28</i> | <i>65.69</i>  | <i>4.36</i>  |               | <i>250</i>   |              | <i>456.33</i> |                          |                         |         |   |        |       |  |  |

C.I.

*Red 4-17 2018*  
*4761*



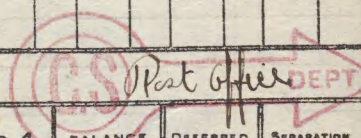
|   |                       |                                    |                                     |
|---|-----------------------|------------------------------------|-------------------------------------|
| ASSIGNED PAY: ENGLAND or CANADA.  | SEPARATION ALLOWANCE. | ENGLAND or CANADA.                 | NAME: <b>GANDER, Arthur Charles</b> |
| EFFECTIVE DATE: 1-5-16.   | EFFECTIVE DATE: -     |                                    | NUMBER: 158511                      |
| AMOUNT: 20 <sup>00</sup>  | AMOUNT: -             | PARTICULARS OF RANK OR APPOINTMENT |                                     |
| NAME, ADDRESS, RELATIONSHIP & AUTHORITY                                 |                       | AUTHORITY                          | DATE EFFECTIVE                      |
| M <sup>rs</sup> E. Gander, (Mother)<br>73 James St, St. Catharines Ont. |                       | B093 19/12/17                      | 25/9/17. Cpl.                       |
| EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS                                  |                       | UNIT AND TRANSFERS                 |                                     |
| DATE OF PAYMENT   |                       | ORIGINAL UNIT: 81 Bn.              |                                     |
| NUMBER OF A.R.  |                       | DATE ACCOUNT FIRST OPENED: 1-5-16  |                                     |
| UNIT PAID BY  |                       | AUTHORITY                          | DATE EFFECTIVE                      |
| AMOUNT  |                       | DATE LEADER SHEET T'S P'D          | UNIT TRANSFERRED TO                 |
| DATE OF PAYMENT   |                       | 206. 2/9/18                        | 18 Bn.                              |
| NUMBER OF A.R.  |                       | 1/9/18                             | 20/9/18                             |
| UNIT PAID BY  |                       | 1-1-19                             | 26-2-19                             |
| AMOUNT  |                       | loan Sec                           |                                     |
| DATE OF PAYMENT   |                       | DAILY RATES OF PAY AND ALLOWANCES  |                                     |
| NUMBER OF A.R.  |                       | AUTHORITY                          | PAY                                 |
| UNIT PAID BY  |                       | F.A.                               | P.F.A.                              |
| AMOUNT  |                       | SUBS'CE ALL'CE                     |                                     |
| DATE OF PAYMENT   |                       | 1 10 10                            |                                     |
| NUMBER OF A.R.  |                       |                                    |                                     |
| UNIT PAID BY  |                       |                                    |                                     |
| AMOUNT  |                       |                                    |                                     |

PARTICULARS OF RENDERING NON-EFFECTIVE: Dischd. to Canada 1/19. Auth: 74R. 16. work. Witley.

| MONTH   | PARTICULARS | CR 1  | CR 2  | PARTICULARS  | DR 1    | DR 2 | DR 3 | DR 4 | BALANCE | DEFERRED | SEPARATION |
|---------|-------------|-------|-------|--|---------|------|------|------|---------|----------|------------|
| 31-3-18 | Bal. Fwd    |       |       | Leave: Bal. 44.99  |         |      |      |      |         |          |            |
| April   | Cpl. P.     | 36    | -     | A.R. 30. 7-4-18 18 <sup>th</sup> Bn                          | 5 35    |      |      | 20   | 5 39    |          |            |
| May     | Cpl. Pay    | 36    | 37 20 | Cpl. AR. 150. 16/5/18 "                                      | 5 35    |      |      | 20   |         |          |            |
| June    | Cpl. Pay    | 36    | 37 20 | R. Transp. Warrant 60/976 893. Victoria to Fullerton 25/3/18 | 1 46    |      |      | 20   | 15 78   |          |            |
|         |             |       |       | Can. A.P.  | 6 81    |      |      | 20   |         |          |            |
|         |             |       |       | AR. 209 4/6/18 18 <sup>th</sup> Bn.                          | 10 71   |      |      |      |         |          |            |
|         |             |       |       | AR. 263. 22/6/18   | 5 35    |      |      |      | 15 72   |          |            |
| July    | Cpl. Pay    | 36    | 37 20 | Loan. A.P.   | 16 06   |      |      | 20   |         |          |            |
|         |             |       |       | AR. 395. 9.7.18  | 5 35    |      |      |      |         |          |            |
|         |             |       |       | 511 24.7.18  | 5 35    |      |      |      | 22 22   |          |            |
| August  | Cpl. Pay    | 37 20 | 37 20 | Loan. A.P.   | 10 70   |      |      | 20   | 39 42   |          |            |
| Sept.   |             | 37 20 | 36    | Can. A.P.  |         |      |      | 20   |         |          |            |
|         |             |       |       | Sup Rem 29761 4-9-18 (81)                                    | 9 73    |      |      |      | 45 69   |          |            |
|         |             |       |       |  | 9 73    |      |      | 20   |         |          |            |
| Oct.    |             | 36    | 37 20 | G. A. P  |         |      |      | 20   | 62 89   |          |            |
|         |             |       |       |  |         |      |      | 20   |         |          |            |
|         |             |       |       | AR 9585 16/11 work   | 1 9 73  |      |      | 20   |         |          |            |
| Nov.    | Cpl. Pay.   | 36    | 7 30  | ✓ 365 4/12   | 5 48 67 |      |      |      |         |          |            |
|         |             |       |       | ✓ 3514 17/11 ✓ 1 Res   | 7 9 73  |      |      |      |         |          |            |
|         |             |       |       |  | 68 13   |      |      |      |         |          |            |
| Dec.    | Cpl. Pay.   | 87 30 | 80 50 | C. A. P.   |         |      |      | 20   | 35 26   |          |            |
|         |             |       |       |  | 68 13   |      |      | 40   |         |          |            |

62.89  
80.50  
143.39  
98.40  
44.99  
35.26  
9.73

H. W. ...  
G. ...





P. 878.

Extract from Sailing List No. .... 3 .....

Unit. - 4<sup>th</sup> Res

Reg. No.

Rank

Name

Sailed for Canada,  
Military District No. .... 2 .....

158511

Opel

GANDER.

A. C.

9.1.19

Acted on

Ledger Ck.



*[Handwritten scribble]*

*3.6-44*

*19-9-46*

War Service Certificate

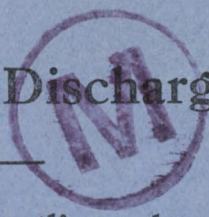
*85192*

*54233*

This space to be for numbers.

*26-2-1998*

# Proceedings on Discharge.



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

|   |   |
|---|---|
| No. 158511  |   |
| Rank Cpl  |   |
| Name <b>GANDER ARTHUR CHARLES</b><br><small>NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.</small>   |   |
| Corps (Squadron, Battery or Company) 81st Batt. (D.D.#2)  |   |
| Date of Discharge Feb'y 17. 1919  |   |
| Place of Discharge <b>TORONTO, ONT.</b>   |   |
| 1. DESCRIPTION AT THE TIME OF DISCHARGE.  |   |
| Age..... <i>25</i> .....years.....months.   | Descriptive Marks<br><br>Vacc. Scar Left Arm.<br><br>   |
| Height..... <i>5</i> .....feet..... <i>9 1/2</i> .....inches.   |   |
| Complexion <i>Dark</i>  |   |
| Eyes <i>Brown</i>   |   |
| Hair <i>Dk. Brown</i>   |   |
| Trade <i>Postal Clerk</i>   |   |
| Intended place of residence } <i>83 James St.,<br/>St Catharines Ont</i><br><small>(To be given as fully as practicable.)</small>                         |   |
| 2. The above-named man is discharged in consequence of<br><br><b>HAVING BEEN FOUND MEDICALLY UNFIT FOR SERVICE.</b><br><br><i>D.O.D.D.# 2 Pt 11 No 45</i> |   |
| To be in the hand writing of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.               | 3. Conduct and character while in the service have been, according to the records, etc.<br><br>N. B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldier and the Officer Commanding his Squadron, Battery or Company: |
|   | 4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)<br><br><p style="text-align: right;">E.S</p>  |

*041*

*REV. 30/1/19*  
*12.3.*

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

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

6. Medals and Decorations.....

Three horizontal dashed lines for listing medals and decorations.

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

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

(Place).....

(Date)..... Commanding .....

8. Certificate to be signed by the Soldier on Discharge

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

(Place) Toronto. Ont. Arthur Charles Gaudet (Signature of Soldier.)  
Feb 17. 1919

(Date)..... Bruce Thompson (Signature of Witness.)

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

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

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

..... (Signature of Soldier.)

10. Statement of Service.

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

Total.....years.....days.

11. Toronto. Ont Confirmation of Discharge.

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

(Place) Toronto. Ont.

(Date) Feb 17. 1919

(Signature) Bruce Thompson



**Reservations referred to at Para. 8.**

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

(OVER)

## List of Discharge Documents.

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|  |  |
|--|--|
| Reg. Conduct Sheet, Militia form B. 263.<br><br>Squadron }<br>Battery } Conduct Sheet, " B. 263a.<br>Company }   | Attestation Paper, Militia Form B. 235.<br><br>Proceedings on Discharge " B. 218.  |
| Copies of Convictions, by C. P. in MS.<br><br>Med. Hist. Sheet, Militia Form B. 313<br><br>Medical Report for Invalid* " B. 227.<br><br>Statement of Man's Account on<br>Transfer and Last Pay Cer-<br>tificate, " D. 877. | In the case of recruits who are rejected on final approval, the discharge documents will consist of<br><br>(a) Proceedings on Discharge.<br><br>(b) Attestation.<br><br>(c) Medical History Sheet (in the event of such having been prepared.) |

\*Only if discharged "Medically unfit."

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

(Sheet 1) **Casualty Form Active Service.**

Regiment or Corps ..... **18th Battalion, C.E.F.**  
 Rank **lpl** Surname **GANDER** Christian Name **Arthur Charles**  
 Religion ..... Age on Enlistment ..... years ..... months  
 Enlisted (a) ..... Terms of Service (a) ..... Service reckons from (a) .....  
 Date of promotion to present rank ..... Date of appointment to lance rank .....  
 Extended { ..... } Re-engaged { ..... } Qualification (b) .....  
 { ..... } (Sheet No. 2) { ..... } or Corps Trade and Rate .....  
 Occupation ..... Signature of Officer .....

| Report   |                    | Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case. | Place of Casualty    | Date of Casualty | Remarks Taken from Army Form B.213, Army Form A.36, or other official documents. |
|----------|--------------------|--|----------------------|------------------|--|
| Date     | From whom received |  |                      |                  |  |
|          |                    | Embarked ...   |                      |                  |  |
|          |                    | Disembarked...   |                      |                  |  |
| 14-12-17 | 5 C.F. Amb.        | Impetigo, legs   | Adm. 5 C.F. Amb.     | 14-12-17         | A.36 (Ext. C.2014)   |
| 21-12-17 | do                 | Impetigo   | Trans to 6 C.F. Amb. | 21-12-17         | do (Ext. C.4002)   |
| 23-12-17 | 6 C.F. Amb.        | Impetigo, legs   | Adm. 6 C.F. Amb.     | 21-12-17         | do (Ext. C.4298)   |
| do       | do                 | do   | Dischgd. to duty     | 23-12-17         | do do  |
| 29-12-17 | 18th Bn            | Rejoined 18th Can Bn.  | In the Fld           | 23-12-17         | B.213  |
| 16-3-18  | 18th Bn.           | Granted 14 days leave to U.K.  |                      | 11-3-18          | B.213  |
|          |                    |  |                      |                  | Pt. II Ord. 23, 26/3/18  |
| 24-8-18  | 18th Bn.           | Wounded - gassed.  | In the Fld.          | 17-8-18          | B.213  |
| 18-8-18  | 6 Gen.             | Y.W. Gas shell   | Adm. 6 Gen.          | 18-8-18          | W.3034 (Ext. H.944)  |
| 25-8-18  | do                 | Y.W. shell gas.  | Trans. to England    | 25-8-18          | do (Ext. H.2791)   |

**G V E R**

(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, Sheering-Smith, &c.

| 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<br>Taken from Army Form B.213, Army Form A.36, or other official documents. |
|----------|----------------------------------|--|---|------------------|---|
| Date     | From whom received               |  |   |                  |   |
| 25-8-18  | A.T.<br>MARGUERITE               | Gas Shell - W.<br>(severe)   | Adm A.T. MARGUERITE                     | 25.8.18          | AF.W.3083<br>(Can.Sect. No 5825)<br><br>Pt II Ord. 79, 3/9/18.                      |
|          |                                  | Posted to Western Ont<br>Regtl Depot, WITLEY   | <i>Whogau</i> Major<br>Canadian Section |                  | for Lt.-Col., A. A. G.<br>G. H. O. 3rd Echelon B.E.F.                               |
| 2-9-18   | H. O. A. D.                      | T. O. I. from 18 <sup>th</sup> Bn<br>Awd. Mil. Medal   | Witley<br>Field                         | 21-8-18          | Pt II O206<br>2 <sup>nd</sup> Div Order 4276 of 1-9-18                              |
|          |                                  |  |   |                  | <i>Lilward</i> LIEUT.<br>FOR LT: COL: I/C RECORDS, C.O.M.F.                         |
| 6.12.18  | 4 <sup>th</sup> Can.<br>Res. Bn: | T.O.I. on posting from<br>W.O.R.F.   | Witley                                  | 4-12-18          | P <sup>o</sup> 2 D.O. No 289  |
| 27-12-18 | do                               | On command Kimmel Bk<br>Pending despatch to Canada   | do                                      | 27-12-18         | Pt 290 305<br><i>Amars</i><br>LIEUTANT 4 <sup>th</sup> CANADIAN RESERVE BATTALION   |
|          |                                  | Attached C.C.C.K. P. 2 Orders pending transfer to C.E.F. Canada.<br>Ceases to be attached on transfer to C.E.F. Canada. Part 2 Orders.   |   |                  | 12 <sup>th</sup> JAN 1919 52<br>12 <sup>th</sup> JAN 1919 33                        |
|          | <i>Albena</i>                    | Lieutenant for<br>Officer Comdg M.P. 2, C.V.<br>Kimmel Park Camp, Rhtl   |   |                  | 13/1/19. Embarked England   |

Rank *Acting Sergeant.* Name *Gander.* **GANDER, Arthur Charles** ✓  
 Unit **81st, Bn.** If in perm. Corps, }  
 What Unit? } Married or Single **Single.** ✓  
 Place and Date of Enlistment **St Catharines 16th, Oct, 1915.** Place of Birth **St Catharines,** ✓  
**Ontario.** ✓  
 Name and Address, Next-of-Kin *Gander.* **Edward Gander** ✓  
**73 James Street, St Catharines, Ontario, Canada** Relationship

Assigned Pay Monthly \$ Payable to Relationship  
 Separation Allowance \$ Payable to Relationship

N/E - R/E No. **5917**  
 File R.L.  
 Category **CAN. OR**

Discharge, Date and Place Reason Character

| Report.         |                     | Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case. | Place.                    | Date.                             | REMARKS.<br>Taken from Official Documents.     |
|-----------------|---------------------|--|---------------------------|-----------------------------------|--|
| Date.           | From whom received. |  |                           |                                   |  |
| <b>"C"</b>      |                     |  | <i>Arrived in England</i> | <i>Nov. 2. 2810 S. S. Olympic</i> |  |
|                 |                     |  | <b>6 MAY 1916</b>         | <i>West</i>                       |  |
| <i>15/6/16</i>  | <i>81st Bn.</i>     | <i>App. Acting Serg. with pay</i>  | <i>Sandling</i>           | <i>6/5/16</i>                     | <i>Part II D. O #34.</i>                       |
| <i>7/7/16</i>   | <i>" "</i>          | <i>W. S. on transfer</i>   | <i>35th Bn.</i>           | <i>5/7/16</i>                     | <i>" " #53.</i>                                |
| <i>7-7-16</i>   | <i>Ob. 35th</i>     | <b>Taken on strength.</b>  | <i>" "</i>                | <i>6-7-16</i>                     | <i>" " 1612/167</i>                            |
| <i>10.10.16</i> | <i>" "</i>          | <i>Rep. to C.M.S. for O.Y.C</i>  | <i>" "</i>                | <i>12.10.16</i>                   | <i>Pt II O. 249.</i>                           |
| <i>22.12.16</i> | <i>" "</i>          | <i>On Conducting Duty of Seas</i>  | <i>" "</i>                | <i>22.12.16</i>                   | <i>" " 305</i>                                 |
| <i>26-12-16</i> | <i>" "</i>          | <i>Rept. back from of Seas</i>   | <i>" "</i>                | <i>26.12.16</i>                   | <i>" " 307</i>                                 |
| <b>4-I-17.</b>  | <b>35th</b>         | <b>S.O.S To 4th Res Bn</b>   | <b>W. Sandling</b>        | <b>4-I-17</b>                     | <b>Pt II, O'4</b>                              |
| <b>4-I-17.</b>  | <b>4th Res</b>      | <b>T.O.S From 35th Res Bn</b>  | <b>W. Sandling</b>        | <b>4-I-17</b>                     | <b>Pt II, O'1</b>                              |
| <i>18.6.17</i>  | <i>" "</i>          | <i>S.O.S to 18th Bn ops.</i>   | <i>Bishott.</i>           | <i>16.6.17</i>                    | <i>" 143. 718th Bn Pt II 45<br/>27 29 6-17</i> |

| Report.  |                        | Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case. | Place.   | Date.     | REMARKS<br>Taken from Official Documents. |
|----------|------------------------|--|----------|-----------|---|
| Date.    | From whom received.    |  |          |           |   |
| "C"      |                        |  |          |           |   |
| 18.6.17  | 4 <sup>th</sup> Res Bn | Reverts to ranks on pedig off.   | Dschott. | 17.6.17   | Miss 143 <i>MS</i>                        |
| 13.11.17 | W.O.R.                 | no 12 ban Fld Amb.   | Field    | 8.11.17   | C.L.A 62 Debility                         |
| 18.12.17 | "                      | no 5 ban Fld. Amb.   | "        | 14.12.17  | — 92 Impetigo Legs.                       |
| 19.12.17 | 18 <sup>th</sup> Bn    | Promoted corporal  | "        | 25.9.17   | Pte 93.                                   |
| 29.12.17 | W.O.R                  | no 6 ban Fld Amb   | "        | 14.12.17  | C.L.A. 100 " "                            |
| 29.12.17 | "                      | Disch'd to Duty  | "        | 23.12.17  | — 100 " "                                 |
| 26.8.18  | " (18)                 | WOUNDED  | "        | 18.8.18   | — 298                                     |
| 2.9.18   | WORD                   | TOS from 18 Bn   | "        | 21.8.18   | Pte 206                                   |
| 3.9.18   | 18 Bn                  | SOS to WORD  | "        | 25.8.18   | " 79 O.C.                                 |
|          |                        | MM.  |          |           |   |
| 6-12-18  | H.O.R.D.               | S.O.S. to 4 <sup>th</sup> Res.   | Hutley   | ✓ 2-12-18 | — 2884 Res 289 of 6-12-18                 |
| 23.1.19  | 4 Res.                 | S.O.S. proceeding to Canada  | "        | — 12.1.19 | — 19                                      |

A.F.B. 103  
8 JUL 1917

# DENTAL HISTORY SHEET

M. F. B. 465.  
200M, -6-18.  
1772-38-950.

CANADIAN ARMY DENTAL CORPS

DISTRICT

NAME OF SOLDIER

*Gardner Arthur Charles*

REGIMENT

*Co pl*

RANK

No.

*1158511*

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16



17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32



## INSTRUCTIONS

- On examination the condition of patient's mouth to be marked on diagram in red ink.
- 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:

- Condition on examination (in red).
- Condition on leaving Canada.
- Condition on discharge.

| Condition on first Examination | Date   | Amalgam | Temporary Filling<br>(a) G. P.<br>(b) Cement | Cement | Treatment<br>Putrescent Pulp | Root Filling | Pulp Cap | Devitalization | Pyrrhoea | Synthetic Porcelain | Extracting | DENTURES |   |   | Gold Clasp | Gold Filling | CROWNS |           | Bridge Work | OPERATOR | Military District | REMARKS  |
|--------------------------------|--|---------|--|--------|------------------------------|--------------|----------|----------------|----------|---------------------|------------|----------|---|---|------------|--------------|--------|-----------|-------------|----------|-------------------|--|
|                                |  |         |  |        |                              |              |          |                |          |                     |            | U        | L | P |            |              | Gold   | Porcelain |             |          |                   |  |
|                                |  |         |  |        |                              |              |          |                |          |                     |            |          |   |   |            |              |        |           |             |          |                   |  |
|                                | <i>Discharge Exam.</i><br><i>At Exhibition Camp</i><br><i>Date. FEB 1 1 1919</i> |         |  |        |                              |              |          |                |          |                     |            |          |   |   |            |              |        |           |             |          |                   | <i>Certificate issued for</i><br><br><i>DENTALLY FIT</i> |
|                                |  |         |  |        |                              |              |          |                |          |                     |            |          |   |   |            |              |        |           |             |          |                   | <i>Hasinger</i><br><i>Major</i>                          |





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 Toronto Exhibition Camp DATE Feb 11, 1919

1. 1 (a) Unit # 2 D.D. (b) Regimental No 158511 (c) Rank Cpl.  
 (d) Surname GANDER (e) Christian name Arthur Charles  
 (f) Home address 73 James St. St. Catharines, Ont.  
 (g) Next of Kin Mr. Edward Gander (h) Relationship father  
 (i) Address of Next of Kin 73 James St. St. Catharines, Ont.

2. Age last birthday 25 Date of birth Sept. 25, 1893

3. Enlistment, or Appointment (if an Officer) (a) Place St. Catharines (b) Date Oct. 16/15

4. Personal description:  
 (a) Height 5 ft. 9 1/2" (b) Weight 164 1/2 (c) Complexion dark  
(stripped)  
 (d) Colour of hair brown (e) Colour of eyes brown (f) Identification marks, Scars, etc. 1 Vacc. none

5. Former trade or occupation Postal clerk

|   |                       |                        |
|---|-----------------------|------------------------|
| 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<br><br><b>3</b> | Days<br><br><b>116</b> |
|---|-----------------------|------------------------|

|                                 | PERIODS   |                                 |
|---------------------------------|---|---------------------------------|
|                                 | From  | To                              |
| <b>81 Bn.</b>                   |   |                                 |
| Canada                          | <u>Oct. 16/15</u>                                   | <u>May 6/16</u>                 |
| England                         | <u>May 6, 1916</u>                                  | <u>June 1917</u><br><u>15th</u> |
| France or other theatres of War | <u>June 15th 1917</u>                               | <u>Aug. 1918</u>                |
|                                 | <u>England &amp; Canada</u><br><u>Aug. 26, 1918</u> | <u>to date</u>                  |

7. Original disease, or injury Gassing.

(a) Date of origin Aug. 1918 (b) Place of origin France  
 (c) Cause Shell gas.

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.)

Partial loss of function of lungs.

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.)

Objective and Subjective— See spec. report

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

Nervous System..... **no** ..... Cardio-Vascular System..... **no** ..... Genito-Urinary System..... **no sug. No alb.**  
(If pulse rate is abnormal, B. P. will be taken.) (Albumen and Sugar will be excluded.)  
 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**  
**No hernia, varicose veins, varicocele, piles or goitre.**

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

**Passed Aug. 1918. See M.H.S. Has been subject to colds since. Has improved considerable since returning to Canada.**

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).)

Had Impetigo in France. States had 3rd hammer toe, Lt. foot & end of Rt. foot removed by operation in Eng. Sept. 1918. No disability.

(c) (Here give a description of wounds, scar, and deformities. A few Impetigo scars Rt. & L. leg. 2nd toe Right foot and 3rd toe left foot missing.

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

(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.)

Not applicable

12. Was the disability caused, or aggravated; (a) by intemperance, or improper conduct; or (b) by unreasonable refusal to accept treatment? A and 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 month

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

60 days in hospital

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

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

Under I.S.C. as out-patient. See special report

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

(If not, briefly state why)

17. Recommendations. Cat. B. 3.

J. L. Stauffer Capt. Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

(Sections 7, 8, 9 and 10 are to be read to the invalid and either "satisfied" or "not satisfied" struck out).

A. C. Gander

I, the undersigned, 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

[Handwritten mark]

A. C. Gander Capt. Rank. Signature of invalid examined.

OPINION OF THE MEDICAL BOARD

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

We concur

19. Is the invalid fit for

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

20. It is certified that the invalid

(a) Does require treatment. (Give the nature of the condition and of the treatment required and its probable duration.)

Observation re chest condition 1 month out-patient.

- (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.)

To I S.C. for further treatment 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.

PLACE Toronto Exhibition Camp,

DATE Feb 11, 1919

Julian Maynt Wain President.

W E Brown 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.

PLACE DATE APPROVED BY Members

APPROVED BY

APPROVED FEB 13 1919 CAPT. FOR R. D. M. S. M. D. 2

APPROVED BY

Director-General of Medical Services.

DATE

DATE

MEDICAL CASE SHEET.\*

| No. in Admission and Discharge Book. | Regimental No.   | Rank.       | Surname.                        | Christian Name. |
|--------------------------------------|--|-------------|---------------------------------|-----------------|
|                                      | 15857  | Cpl         | Gander<br>Gauden.               | A. C.           |
| Year                                 | Unit.  | Age.        | Service.                        |                 |
|                                      | 18 Canadian  | 24          | 2 <sup>10</sup> / <sub>12</sub> |                 |
| Station and Date.                    | Disease  |             |                                 |                 |
|                                      | I Gassed   |             |                                 |                 |
|                                      | 15/8/18 - Gassed - Shell - Eyes blind for 24 hrs with conjunctivitis<br>Both - effect Gastritis - sickness   |             |                                 |                 |
| 17/9/18.                             | No sickness for 14 days. Much improved.  |             |                                 |                 |
| 23/9/18                              | Operated on for hammer toes. One removed from each foot.   |             |                                 |                 |
| 1/10/18                              | Still complain of some gastritis.  |             |                                 |                 |
|                                      | 7.10.18. Transferred to Sect. VI   |             |                                 |                 |
| 15.10.18.                            | Eyes white tested G. Watson  | J. H. Roper |                                 |                 |
| 22.10.                               | Ry Alum Sulphate grj Chloratum griv. Gm. 3; ft. Gutta<br>To be dropped into the eyes thrice daily.<br>Usual hyperaemia of optic discs after Gas.<br>Slight failure of accommodation for distance + D. presbyopia | J. H. Roper |                                 |                 |
| 23.10.18.                            | Recommended for transfer to sea side.  | G. Watson   |                                 |                 |



\* The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.  
Wt. W 6604/M 2870-1,500,000-8/17-H. & Sp. (10933). Forms/I. 1237/12. (E239) [P.T.O.]

Station  
and Date.

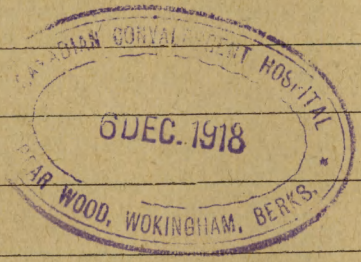
*[Faint pencil scribbles]*

MEDICAL CASE SHEET.\*

*M*

|   |  |                      |                           |                                    |
|---|--|----------------------|---------------------------|------------------------------------|
| No. in Admission and Discharge Book.                      | Regimental No.<br><i>158511</i>  | Rank.<br><i>capt</i> | Surname.<br><i>Gander</i> | Christian Name.<br><i>M</i>        |
| Year<br><i>15/11/18</i>                                   | Unit.<br><i>18<sup>th</sup> Bn</i>   |                      | Age.<br><i>25</i>         | Service.<br><i>38<sup>12</sup></i> |
| Station and Date.<br>Can: Conval: Hospital,<br>Bear Wood. | Disease<br><i>Sh. Shell Gas.</i><br><i>Gasped Aug 15<sup>th</sup> at Amiens.</i><br><i>eyes had two laminae removed.</i><br><i>put a little tender - no cough</i><br><i>a expectoration - slight dyspnoea.</i><br><i>has been on special diet - 9.c. fair.</i><br><i>W.E. murray</i> |                      |                           |                                    |
| <i>Mar 14</i>   | <i>Det Dr</i>  |                      |                           |                                    |
| <i>4-12-18</i>  | <i>Discharged to duty.</i>   |                      |                           |                                    |

*J Murray Robertson Lt*  
Captain,  
Med. Off., Canadian Convalescent Hospital,  
Bear Wood, Wokingham, Berks.



Station  
and Date.



# 81st BN., C. E. F.

NO. 158511.

73 James St. St. Catharines

NAME: Gander - A.C., Sgt.

Ont

m D 2



STATIONED AT

West Sandling Camp  
West Eng.  
June 14 1916

My military will has been  
forwarded to my mother.

Mrs Lydia M. Gander:

73 James St

St Catharines. Ont.

Canada.

Signature

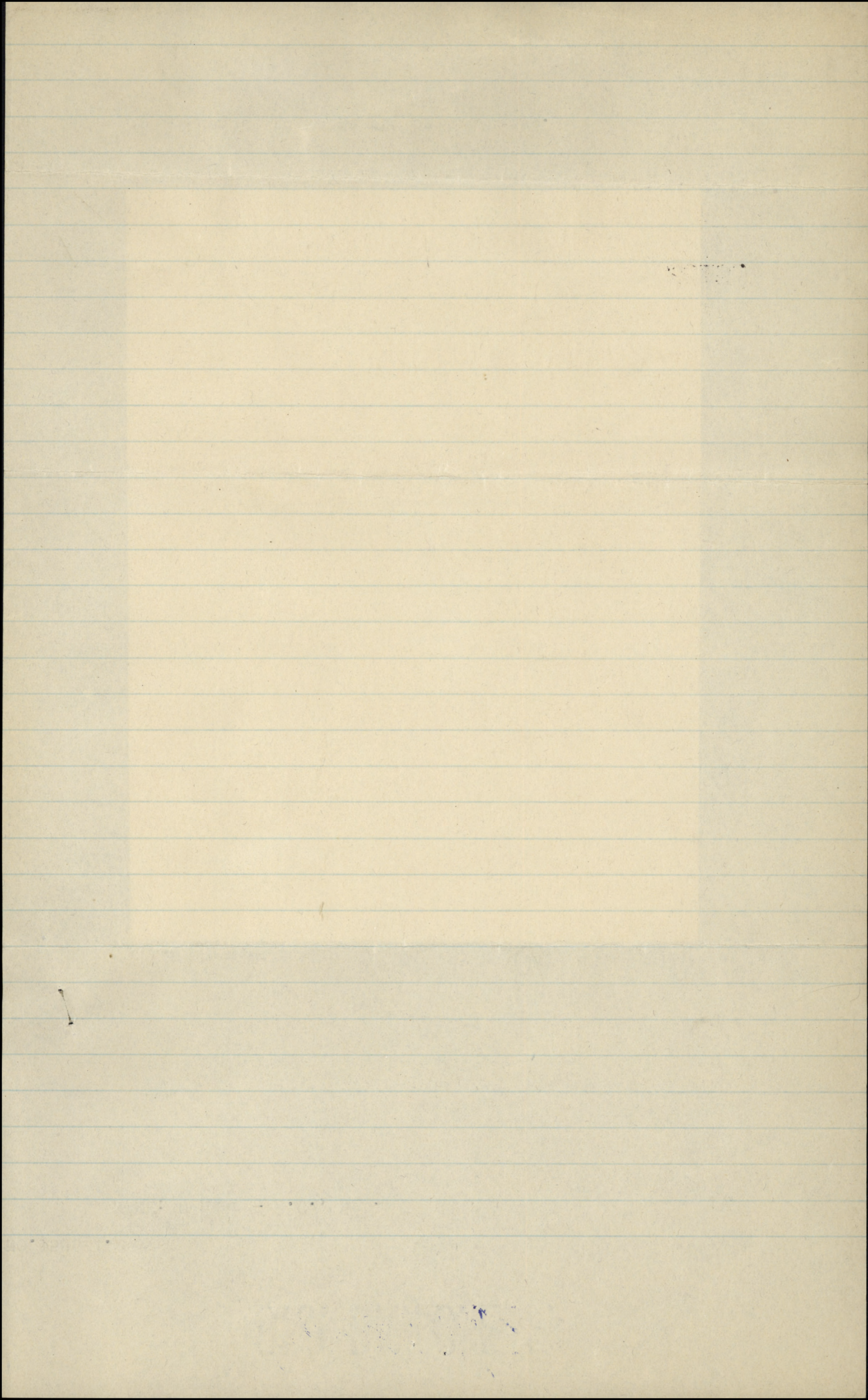
Sgt A. Gander:

No 158511

C Co 81st Batt. C. E. F.

23187

Handed to Paymaster by the above.



**EXHIBITION**

"EMPRESS OF BRITAIN" 13-1-19

No. 2 DISTRICT DEPOT 9760  
 AUDITOR *R. J. A.* PAYMASTER

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

|                               |                                  |  |  |
|-------------------------------|----------------------------------|--|--|
| M. OR S.                      | REGT. No. 1581511                | RANK cpl.                                      | NAME (IN FULL) GANDER, A.C.  |
| NEXT OF KIN                   | ORIGINAL UNIT C.E.F. <i>WORD</i> | IF IN P.F. WHAT UNIT?                          | (BLOCK LETTERS - SURNAME FIRST) <i>73 James St. St. Catharines Ont.</i>  |
| ADDRESS                       | PLACE OF ATTESTATION             | TRANSFERRED TO                                 | DATE AUTHORITY   |
| IS SEPARATION ALLOWANCE PAID? | DATE EFFECTIVE                   | TRANSFERRED TO                                 | DATE AUTHORITY   |
| TO WHOM PAID <i>wif</i>       | RELATIONSHIP                     | ASSIGNED PAY, \$ <i>20<sup>00</sup></i>        | DATE EFFECTIVE <i>1-2-19</i>   |
| ADDRESS                       | RELATIONSHIP                     | PAYABLE TO <i>Mrs E Gander</i>                 | RELATIONSHIP <i>mother</i>   |
|                               |                                  | ADDRESS <i>78 James St St Catharines</i>       | ANY CHANGE IN ASSIGNEE OR ADDRESS <i>out</i>   |
|                               |                                  | STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE  | EFFECTIVE  |
|                               |                                  | DISCHARGED <i>Dy't Patient S.C.R. Toronto.</i> | DATE <i>17.2.19</i> REASON <i>med. u.</i> AUTHORITY <i>D.O. 45</i> IF ENTITLED TO POST DISCHARGE PAY <i>183 days</i> |

| MONTH                         | PAY AND F. A. |                        | OTHER CREDITS         | TOTAL CREDITS | ACQUITTANCE ROLLS |            |               | CASH PAYMENTS       |                        |            | ASSIGNED PAY | REGI-MENTAL CHARGES |              | OTHER CHARGES | TOTAL DEBITS  | BALANCE      |    | PARTICULARS OR REMARKS                            |
|-------------------------------|---------------|------------------------|-----------------------|---------------|-------------------|------------|---------------|---------------------|------------------------|------------|--------------|---------------------|--------------|---------------|---------------|--------------|----|---|
|                               | NO. OF DAYS   | RATE                   |                       |               | AMOUNT            | COL. NO. 1 | COL. NO. 2    | COL. NO. 3          | COL. NO. 1             | COL. NO. 2 |              | COL. NO. 3          | \$           |               |               | C.           | \$ |   |
| Balance from previous account |               |                        |                       |               |                   |            |               |                     |                        |            |              |                     |              |               |               |              |    |   |
| 31-12-18                      |               | <i>20<sup>00</sup></i> | <i>6<sup>00</sup></i> |               |                   |            | <i>35-26</i>  |                     |                        |            |              |                     |              |               |               |              |    |   |
|                               |               |                        |                       | <i>35 26</i>  |                   |            |               | <i>15-1-19 4 87</i> |                        |            |              |                     |              |               |               |              |    |   |
|                               |               |                        |                       |               |                   |            |               | <i>20-1-19 30</i>   |                        |            |              |                     |              |               |               |              |    |   |
|                               |               |                        |                       |               |                   |            |               | <i>21-1-19 5</i>    |                        |            |              |                     |              |               |               |              |    |   |
|                               |               |                        |                       |               |                   |            |               |                     | <i>20<sup>00</sup></i> |            |              |                     |              |               |               |              |    |   |
| 1-1-19                        | 31            | <i>20<sup>00</sup></i> | <i>37 20</i>          |               |                   |            | <i>49 20</i>  |                     |                        |            |              |                     | <i>24 61</i> |               | <i>59 87</i>  | <i>24 61</i> |    | <i>Feb 19 19</i>                                  |
| Feb. 1-17                     | 17            | <i>20<sup>00</sup></i> | <i>20 40</i>          | <i>70</i>     |                   |            | <i>24 59</i>  | <i>5093252471</i>   |                        |            |              | <i>24 59</i>        | <i>5</i>     |               | <i>149 99</i> | <i>24 59</i> |    | <i>T.O.S. 12-1-19 D.O. 28</i>                     |
|                               |               |                        |                       | <i>35</i>     |                   |            | <i>149 99</i> | <i>53304</i>        |                        |            | <i>12040</i> |                     |              |               | <i>149 99</i> |              |    | <i>SUBS. 27-1 TO 10-2 D.O. 28</i>                 |
| 6 mos                         |               |                        |                       |               |                   |            | <i>420</i>    |                     |                        |            |              |                     |              |               |               |              |    | <i>1st Payment War Service Gratuity</i>           |
|                               |               |                        |                       |               |                   |            |               |                     | <i>Feb 17 70</i>       |            |              |                     |              |               | <i>70</i>     |              |    | <i>1st p.H.S.S. D.O. 28</i>                       |
|                               |               |                        |                       |               |                   |            |               |                     | <i>Mar 17 70</i>       |            |              |                     |              |               | <i>140</i>    |              |    |   |
|                               |               |                        |                       |               |                   |            |               |                     | <i>Apr 17 70</i>       |            |              |                     |              |               | <i>210</i>    | <i>210</i>   |    |   |
|                               |               |                        |                       |               |                   |            |               |                     | <i>May 17 70</i>       |            |              |                     |              |               | <i>280</i>    | <i>140</i>   |    |   |
|                               |               |                        |                       |               |                   |            |               |                     | <i>June 10 70</i>      |            |              |                     |              |               | <i>350</i>    | <i>70</i>    |    |   |
|                               |               |                        |                       |               |                   |            |               |                     | <i>July 10 70</i>      |            |              |                     |              |               | <i>420</i>    |              |    | <i>W.S.S. PAID IN FULL</i>                        |
|                               |               |                        |                       |               |                   |            | <i>420</i>    |                     |                        |            |              |                     |              |               | <i>420</i>    |              |    | <i>CAPTAIN FOR PAYMASTER WAR SERVICE GRATUITY</i> |

*final*

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

61 1/2  
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 20.00  
 21.00  
 - 1 - 0 - 00  
 - 1 - 0 - 00

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

# Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

# G

789 May 1. 1916.

RATE OF SEPARATION ALLOWANCE

|  |  |  |  |
|--|--|--|--|
|  |  |  |  |
|--|--|--|--|

RATE OF ASSIGNMENT

|    |    |  |  |
|----|----|--|--|
| 25 | 20 |  |  |
|----|----|--|--|

1/1/17

### PARTICULARS OF SEPARATION ALLOWANCE

No. 158511  
 Rank ~~Sgt.~~ Promoted ~~Capt.~~ Reverted ~~Pte~~ Discharge  
 Soldier's Name A. C. Gander  
 Battalion 81st. Battrn. C. Coy.  
 Beneficiary  
 Relationship  
 Address

### PARTICULARS OF ASSIGNMENT

Name Mrs. E. Gander.  
 Address 73 James St.  
 Change of Address St. Catherine's. Ont.  
 1  
 2  
 3  
 4

66691  
B.

| Date     | Cheque No. | Amount S/A | Amount A/P | Total | REMARKS   |
|----------|------------|------------|------------|-------|---|
| 1917     |            |            |            |       |   |
| Dec 31   |            |            | 500        | 500   | (MRO 2A) until March - 6 <sup>25</sup>  |
| 1918 Jan | C 69943    |            | 25         | 25    | 9   |
| Feb      | U 72260    |            | 5          | 5     | mailed 6 <sup>25</sup> 18 <sup>50</sup> Febry. to adjust. 20 <sup>00</sup> future |
| March    | A 138293   |            | 20         | 20    | U 72260 mailed 6-2-18.  |
| April    | G 15467    |            | 20         | 20    | 8   |
| May      | S 14612    |            | 20         | 20    |   |
| June     | M 25823    |            | 20         | 20    |   |
| July     | M 32416    |            | 20         | 20    | 6   |
| Aug      | M 40513    |            | 20         | 20    |   |
| Sept     | T 43276    |            | 20         | 20    |   |
| Oct      | U 51264    |            | 20         | 20    |   |
| Nov      | N 59742    |            | 20         | 20    |   |
| Dec      | V 68687    |            | 20         | 20    |   |
| Jan/19   | T 70813    |            | 20         | 20    |   |
|          |            |            | 750        | 750   |   |

M. F. W. 128  
400M-6-17-1772-38-1141  
L. L. 22320-M. & D. 7993.

.....2.... A/c Closed 31.1.19  
 Ret'd per *Comptroller of British*  
 Date 22.1.19. F.X. 29.1.19.  
 Clerk *A. Bullock*  
 MRO Sect # 64175.



Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

|  |  |  |  |  |
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RATE OF ASSIGNMENT

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|  |  |  |  |  |
|--|--|--|--|--|

PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No.

Rank

Soldier's Name

Battalion

Beneficiary

Relationship

Address

Promoted

Reverted

Discharge

*4103*

*882*

Name

Address

Change of Address

1

2

3

4

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

*2nd Contingent*  
**MILITIA AND DEFENCE**  
**ASSIGNED PAY**  
**OVERSEAS CONTINGENTS**

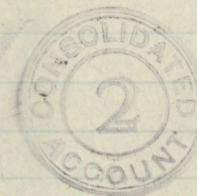
To Whom *Mrs. E. Gander*  
 Address *73 James St  
 St Catharines Ont*

By Whom Assigned *Gander, A. C.*  
 Regtl. No. *158511*  
 Rank *Sgt.*  
 Corps *81<sup>st</sup> Battrn C. Co*

Rate *2.5-* **MAY 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 |      |            |      |         |



1941

19

1941



## ASSIGNED PAY

Sheet No. 2.

*Mrs. E. Gander*

OVERSEAS CONTINGENTS

PAYMENTS.

Name of Soldier

*Gander H.*

L. L. Job 310.—Req. 6574.

*Sgt. 158511 Co. 81st Batt.**\$ 25* **MAY 1 1916** Remarks

| Month. | Year. | Cheque No.     | Amt.       | Remarks.     |
|--------|-------|----------------|------------|--------------|
| April  | 1916  |                |            |              |
| May    |       | <i>J 5489</i>  | <i>25</i>  |              |
| June   |       | <i>J 8925</i>  | <i>25</i>  |              |
| July   |       | <i>J 8938</i>  | <i>25</i>  |              |
| Aug.   |       | <i>R 12894</i> | <i>25</i>  |              |
| Sept.  |       | <i>H 16426</i> | <i>25</i>  |              |
| Oct.   |       | <i>H 20971</i> | <i>25</i>  |              |
| Nov.   |       | <i>F 26732</i> | <i>25</i>  |              |
| Dec.   |       | <i>J 32621</i> | <i>25</i>  |              |
| Jan.   | 1917  | <i>H 37423</i> | <i>25</i>  |              |
| Feb.   |       | <i>H 43371</i> | <i>25</i>  | <i>25-L.</i> |
| March  |       | <i>J 44458</i> | <i>25</i>  |              |
| April  |       | <i>B 2019</i>  | <i>25</i>  | <i>256</i>   |
| May    |       | <i>L 2906</i>  | <i>25</i>  |              |
| June   |       | <i>E 15029</i> | <i>25</i>  | <i>25. S</i> |
| July   |       | <i>I 21787</i> | <i>25</i>  | <i>25 C</i>  |
| Aug.   |       | <i>F 32711</i> | <i>25</i>  | <i>25 L</i>  |
| Sept.  |       | <i>P 35419</i> | <i>25</i>  | <i>25 O</i>  |
| Oct.   |       | <i>E 41869</i> | <i>25</i>  |              |
| Nov.   |       | <i>C 43366</i> | <i>25</i>  |              |
| Dec.   |       | <i>M 58628</i> | <i>25</i>  |              |
| Jan.   | 1918  |                | <i>500</i> |              |
| Feb.   |       |                |            |              |
| March  |       |                |            |              |
| April  |       |                |            |              |
| May    |       |                |            |              |
| June   |       |                |            |              |
| July   |       |                |            |              |

*SL**25*

MILITIA AND DEFENCE  
**ASSIGNED PAY**  
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

**PAYMENTS.**

Name of Soldier \_\_\_\_\_

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