Unit CAMC. Rank Nursing Sister Name Gunn. M.C.N. Triplicate

OFFICERS' DECLARATION PAPER

CANADIAN OVER-SEAS EXPEDITIONARY FORCE

QUESTIONS TO BE ANSWERED BY OFFICER

[ANSWERS]

1. (a) What is your Surname? Gunn
   (b) What are your Christian Names? Mary Catherine Nichols.
2. (a) Where were you born? (State place and country) Pictou. Co. Nova Scotia.
   (b) What is your present address? 535 19th Ave. W. Calgary
3. What is the date of your birth? 6th December 1886
4. What is (a) the name of your next-of-kin? William Gunn
   (b) the address of your next-of-kin? East River. St. Marys. Nova Scotia.
   (c) the relationship of your next-of-kin? Father
5. What is your profession or occupation? Nurse
6. What is your religion? Presbyterian
7. Are you willing to be vaccinated or re-vaccinated and inoculated? Yes.
8. To what Unit of the Active Militia do you belong? CAMC Nursing Sister
9. State particulars of any former Military Service Temporary Mil. Hospital Lethbridge Alta.
10. Are you willing to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE? Yes.

The undersigned hereby declares that the above answers made by him to the above questions are true.

M. C. Nichols Gunn (Signature of Officer)

Taken on strength (place) Calgary.

(date) 1st January 1917

A. D. Johnson Major A.M.S. (Signature of Commanding Officer.)

CERTIFICATE OF MEDICAL EXAMINATION

I have examined the above-named Officer in accordance with the Regulations for Army Medical Services.

I consider her* fit for the CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

Date Dec 21 1916

Place Calgary Alta. G. H. Clarkin Capt. Medical Officer.

*Insert here "fit" or "unfit"

M. F. W. 51
100m.—4-16.
H. Q. 1772. 39-917

DW
12-8-19

REGIMENTAL DOCUMENTS

NAME GUNN MARY CATHERINE NICHOLS REGT. NO. Z-Sister UNIT W.A.A.C. G.H.Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
3	ATTESTATION PAPER (M.F.W. 23, 133, or 51)	Ret. 21-8-19	~~Pers.~~	~~18-8-19~~	~~Pers 982 Dis~~	DEATH
3.	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)		~~Certs 12-12-19~~ Ret. 8-1-26			Category
	TRAINING HISTORY SHEET (M.F.W. 113)					
	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
2.	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)				31691	DISCHARGE
1	DENTAL HISTORY SHEET (M.F.B. 465)					Category Demob.
4.	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					
	MEDICAL EXAMINATION (M.F.W. 129)					
	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
	LAST PAY CERTIFICATE (M.F.W. 44)					
	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					
	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
1.	M.F.W. 2591					
1.	A.F.B. 40.					
2	Disp Certs.					
1	Letter of Grant.					
1	A.F.W. 67					1
2	Misc					2-9
1	Card A.C.					2-9
1	479/237 RIM					
	28-adriatic 28-7-19.					

W 2559
1000-11-18
47/2-39-1477

(1)

Surname. Christian Name.

GUNN M. C. N.

Rank. Unit.

N/Str, C.A.M.C. ~~I.C.C.H.~~ 11 C.G.H.

	Date of admission.
No. 24 General Hospital, Etaples	17-12-17
Hospital No.11 Canadian Gen.Hosp.Shorncliffe	16-4-19
Transferred Canadian Red Cross Offs.Hosp.London	9-5-19
..... Hosp.	
..... Hosp.	
..... Hosp.	
..... Hosp.	

Diagnosis I.C.T. Finger.
(Deformity) Index Finger. Infection

Later diagnosis. .....

.....

.....

.....

Disposition.	Date.
	Disch. to Unit:- 11-2-18.
.....	~~Discharged.~~ ~~9-6-19.~~

24-12-17 864.
~~16-2-18.~~ 909.
17-4-19 1267-2.
10-5-19 1285.
~~11-6-19.~~ 1309-2

C.L. ..... Remarks.
C.L. .....
C.L. .....
C.L. .....
C.L. .....
C.L. .....
C.L. .....

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

D. M. S. 1347.

Surname	Christian Name		Reg. No.
GUNN	M. C. N.		DMS. 4-G-570.

Rank	Unit
N/Str.	C. A. M. C.

MEDICAL BOARD held at	Date	Serial No.
(1) 24 Gen. Hosp. Etaples	2-2-18.	
Bramshott Area.	**26-6-19.**	

Other Medical Boards at	Date	Serial No.
(2)		
(3)		
(4)		
(5)		

Condition found by Board

I.C.T. Thumb. **Cellulitis Rt. Hand.**

Disposition Recommended

(1) Unfit any service 3 weeks, sick leave to England 12-2-18 to 4-3-18.

(2) **Fit Home service Unfit Gen. service.**

(3)

(4)

(5)

PENSIONS & CLAIMS BOARD held at Date.....

Disposition

Remarks

Indicate by a P.T.O. if continued on other side.

ERRS.

FORM R. 149.
7106—250m—7/2/17.

GUNN.

Name ~~NICHOLS~~ Mary Catherine ~~GUNN~~ Nichols *Rank* N/Str. *Reg. No.*

Unit CAMC ~~1 CCH Nichols~~ 190 T. Dep. att 11 CCH.

Next of Kin Canada

Date 1917	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
17-12	24 Gen. Hosp. Etaples (WO)		ICT Finger	86	✓	
11-2-18	Granted 8 weeks sick leave (WO)			909	✓	
16-4-19	11 Con Gen Hosp Shorncliffe		Deformity Index Finger	1167		
9-5	Embkn Hoff Hos Audley St (WO)		~~Septic Index~~ Infection Index R (deformity) ~~Finger R Hand~~	1275		
9-6	Discharged 90.3			1309		

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

REGT'L. No. ———

NAME Gunn M C. N.

H. Q. FILE No. 649

RANK AND CORPS M/Str C.A.M.C.

FOLLOWS No.

FOLLOWS

CABLE

No. | Date

NATURE OF CASUALTY

L. L. 31493. M. & D. 8476.

M. F. W. 42—100M.—28-11-17.
H. Q. 1772-39-893.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
8647	No 24 Gen Etaples	17-12-17	I.C.T Finger
909	Dis	11-12-18	" " " Wanted 3rd Wound Card
261	11 Can Gen Shorne	16-4-19	Deformity Index finger
1285	Can Rd Xoff, 17 N. Audley St	2-5-19	Infection Index R (Deformity)
1308 2	Disch	9-6-19	Infection Index R Deformity

SURNAME. Gunn

CHRISTIAN NAMES Mary Catherine Nichols.

REGL. NO. RANK Nursing Sister.

UNIT C.A.M.C.

FORMER CORPS C.A.M.C. Nursing Sister, Temp. Mil. Hosp. Lethbridge Alta.

B6 CARD NO. V

S.O.S. 12-8-19
A0212 FOLL. 15-8-19
On S6

NEXT OF KIN.

NAMES IN FULL Gunn, William.

RELATIONSHIP TO SOLDIER Father.

ADDRESS East River, St. Marys, N.S.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada, Pictou Co., N.S. DATE Dec. 6th. 1886.

PLACE OF ATTESTATION Calgary, Alta. DATE Jan. 1st. 1917.

R/C. 4-8-19 3+3 R/S.

L. L. 6945. M. & D. 6994.

M. F. W. 22. 100M.—8-16. H. Q. 1772-39-339.

MARRIED SINGLE WIDOWER

TRADE OR CALLING Nurse. RELIGION Presbyterian.

DESCRIPTION.

APPARENT AGE YEARS MONTHS

HEIGHT FEET INCHES

CHEST MEASUREMENT INCHES EXPANSION INCHES

COMPLEXION EYES HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE Calgary, Alta. DATE Dec. 21st. 1916.

Present Address:- 535 – 19th. Ave. W., Calgary.

Number ..... Rank N/Sister

Surname GUNN

Christian Name MARY CATHERINE NICHOLS

Units ..... Theatre of War FRANCE

Late of Service 9/7/17.

Remarks 1514-11th Ave W.

Latest Address ~~2707 Wolfe St~~
Calgary Alta

Roll No. .....

200m.-6-21. B Page 22205

GRATUITY (IMPERIAL)

CHRISTIAN NAME	SURNAME	REG. NO.
SCHEDULE NO.	LINE NO.	
UNIT RETIRED OR DISCHARGED FROM		
PLACE OF RETIREMENT OR DISCHARGE		
DATE RECEIVED FROM OTTAWA		IMPERIAL DEPOT NO.
DATE RECEIVED FROM REG. DEPOT.		DATE FORWARDED TO OTTAWA

DEC 5 1928
REGN. NO. 1121
DEST.

868—D.P.—40M-1-12-19.

No. RANK N/Str. NAME Gunn. M. C. N.

T. O. S. UNIT Army medical Corps, Reinforcements

M. D. 4

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1917 Jun 1.	1917 Jun 31	—		
2nd.		—		

Duplicate.

To be made out in duplicate.

H.Q. 54-21-23-53

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

INSTRUCTIONS.

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

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

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

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

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

---

(1) Name of Overseas Unit which Soldier joins..... CAMC.

(2) Regimental Number..... Nursing Sister

(3) Full Name of Soldier..... Gunn - Mary Catherine Nichols.

(4) Place of Birth..... Victoria Co. Nova Scotia

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

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

(b) Present Postal Address..... ✓

(7) Are you a widower ?..... ✓

(8) Have you any children ?..... ✓

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

Also their names and ages..... ✓

M. F. W. 67.

500M.—9-16.
1772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive? Yes.

If so, state name and address Wm Gunn. East River. St Mary's Nova Scotia.

(10) Is your Mother alive? Yes.

If so, state name and address (Mrs) Margaret Gunn
East River, St Mary's. Nova Scotia.

(11) If your Mother is a widow ~

Are you her sole support, or not? ~

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

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

~

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

~

(15) Are you insured? Yes.

If so, in what Company? Canada Life Assce. Co.

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

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

W. E. Fredrick Gunn
Officer Commanding.

Date 1st. Jany. 1917.

Forms R. 150.
3232. 15 M. 14/12/16.

Surname GUNN ✓ **Christian Names** Mary Catherine Nichols ✓

Rank Nursing Sister ✓

Promotion

Name and Address of Next-of-Kin
William Gunn, (Father)
East River, St Marys,
Nova Scotia, Canada. ✓

Unit C.A.M.C. ✓

Place of birth Picton Co. Nova Scotia, Canada ✓

Married (Yes or No)

Appointments

Date of leaving Canada

Date and Cause of Resignation

31.3.17 D.of C.
2.5.17 D.of C

Report Date	Report From whom received	Record of Promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case	Place	Date	REMARKS Taken from Official Documents
		T.O.S. Canc. 6.6.7. on arr. f. Can.			
19.2.17	Dms.	& posted to	Canc. T.S.	3.2.17	Co. 245.
21.2.17	Dms.	Posted to D. of Con. Red x H. Taplow.		17.2.17	CO. 257.
22.2.17	D. of Con. H.	T.O.S.		17.2.17	Pt II ord. 50.
11.7.17.	DMS.	Proceeded. o/seas for Service		9.7.17	Co 191.
25.7.17	I.C.Gen.H.	T.O.S.		10.7.17	Pt II ord. 47.
22.12.17	C.R.D.	Adm No 24 Gen Hosp.	Etaples	17.12.17	C.R. 864. I.C. Finger
		Discharged on 3 wks sick leave		11.2.18	" 909 " "
28.2.18	I.C.G.Hp	Granted sick leave from 12.2.18 to		4.3.18	P½ of 11.
20.6.18	do	Attd for temp duty to 8 C.G.Hp. Leases to be attached		6.6.18 27.8.18	P½ of 44. P II. ord 74.
17.10.18	- do -	S.O.S. Reposted to 2 Can. Stat Hosps.		3.10.18	P II. ord. 81.
20.10.18	2 C.S.Hp.	T.O.S. on reposting from 1 C.G.Hp.		4.10.18	P II. ord. 61
22.11.18	Do	S.O.S. Reposted To 1 Can. Gen. Hosp.		14.11.18	P II. ord. 69
25.11.18	1 C.G.H.	T.O.S. Reposted from 2 Can. Stat. Hosp.		15.11.18	P II. ord. 91.

A.F.B. 103.
10 AUG. 1917

Report		Record of Promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case	Place	Date	REMARKS Taken from Official Documents
Date	From whom received				
16-1-19	1 CGHp	S.O.S. Reposted to 3 Can. Cas. Clg. Stat.		17-12-18	Pt II ord 3
23-1-19	3 CCCS.	T.O.S. on reposting from 1 Can. Gen. Hp		18-12-18	Pt II. ord. 2.
30-3-19.	Do - camc.	S.O.S posted to camb base dep S'bliffe		23-3-19	Pt II ord 10.
5-4-19	Cas. Coy.	T.O.S. on posting from Camc. France		24-3-19	Pt II ord. 79.
9-4-19	Do	S.O.S. on posting to Camc. R.T. Dep		24-3-19	Pt II ord. 84.
7-4-19	C.A.M.C.R.T.	T.O.S. on posting fm C.a.M.C. Cas. Coy.		24-3-19	Pt II Ord 97
7-4-19	C.a.M.C.R.T.	on Cond to 11 C.G.H. Shiffe		24-3-19	Pt II Ord 97
17-4-19	AMS	Adm 11 Can. Gen. Hp. Sheliffe		16-4-19	Cl. 1267 Deformity Index Finger
10-5-19	Do - Camb	Adm. Can. Red X Off. Hp. 17 n. Audley St.		9-5-19	Cl. 1285 Infection Index R (Deformity
2-5-19	C.A.M.C.	S.O.S. on posting to 11 b G. H.		30-4-19	11-II O. 122.
7-5-19	XI CG.H	T.O.S. on posting from Camb Dep		30-4-19	" " 41.
"	do	S.O.S. on transfer to Camb Depot (21 days Cas)		6-5-19	" " 41
8-5-19	Camc. Cas. Dep.	T.O.S. from 11 CGHp (21 days Cas.)		6-5-19	Pt II ord. 107.
26-6-19	do	S.O.S. on posting to 12 CG. H		24-6-19	Pt-II O. 149.
26-6-19	12 CG.H	T.O.S. on posting from Cas Coy.		24-6-19	Pt-II O. 149.
10-7-19	do	S.O.S. to 16 CG. H		8-7-19	" " 160.
11-7-19	16 CG.H	T.O.S. from 12 CG. H		8-7-19	" " 163
8-8-19	Dms	SOS on transfer to CAMC Canada		28-7-19	SL 2-27 - C097
9-8-19	16 CG.H.	S of S to 6 & 7	Canada	28-7-19	Pt II O/184

21903

CERTIFIED CORRECT
10 AUG. 1917 Noe
CANADIAN RECORD OFFICE

47

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

M. F. W[illegible]. (A. F. B. 103.
350M.—5-16
H. Q. 1772-39-920.

W.S.B. class "A"

Casualty Form—Active Service.

Unit, Regiment or Corps. Army Medical Corps.

Regimental No. ..... Rank Nursing Sister C. E. F. Name Mary Catherine Nichols Gunn

Enlisted (a) 4/4/17 Terms of Service (a) Duration Service reckons from (a) 4/4/17

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

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

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				
		Embarked	Canada	3/2/17	
		Disembarked	England	13/2/17	
22/2/17	C.A.M.C. T.S.	TAKEN ON STRENGTH from Canada	Westerham	3/2/17	Pt II D6. 53
25-2-17	CAMC T.S.	S.O.S on transfer to the Dof C. C. R. C. Hosp Taplow	Westerhanger	17-2-17	Pt II D55 Capt. Adjutant, for O.C. C.A.M.C. Training School
7-2-17	Wire Underwood 6 W 1947.	Taken on Strength D of C R x Hospital	Taplow Bucks	7-2-17	P 21 6. 50. 19/2/17
9/2/17.	O. i. Chief.	Struck off strength D of C R Mil. Hosp. Folkestone	Taplow Bucks.	9-7-17	P. 2. D. O. 179 9-7-17

CAPT. C.A.M.C.
COMPANY OFFICER.

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

[P.T.O.

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
11-7-17	D.M.S.	Proc. of leas to #1 C. Gen. Hosp.		9-7-17	C.O. 891. MAJOR, FOR O. i/c RECORDS, C.S.P.
15/7/17	1 C.G.H.	Reinforcement pro 12/D.Pats/5411 (am 4) 3/7/17 Ref file 14173	3/7/17	10/7/17	Bns Dtl 49 25/7/17
17/12/17	24 Gen	Admn 20 Longer (m)		17/12/17	W 3034
11-2-18.	"	Discharged. ~~do~~ from Hosp.	~~Unit~~	11-2-18	W 3034.
17/2/18	1 C.G.H.	3 Weeks sick leave to Villa Tino Hosp.		11-2-18	
"	A.A.G.	Sick leave. Granted from 12/2/18 To		4/3/18	A.F.G. 45. File. 248 95. B213. P II 011 d/28 2/18
9/3/18	1 C.G.H.	Rejoined from sick leave.		5/3/18	B213.
8/6/18	1 C.G.H.	Attached to No 8 Cdn. G.H. for Temp. Duty Authy D.G.M.S. B/1523/98 d/6/6/18		6/6/18	B213. P II 1049 d/1918
31. 8. 18	8. C.C.H.	Leave to be attached for temp. duty to No 8. Cadr. Sent. 1918. on proceeding to nursing sisters Home. Abbeville. Authy A.A.G. 7/8. d/ 28. 8. 18.		17. 8. 18	B. 213. 7th and No 71 d 1918.
31. 8. 18.	12 Stat Hp	Arrived for duty. 12 Stat Hp		28. 8. 18.	B213.
4. 9. 18.	D.G.M.S.	To #5 C.C.S. for duty. D.G.M.S. D.G.S./1 d. 4. 9. 18.			KM 20421.
5. 10. 18.	2 C.C.S.	S.O.S. 9/No 1 Can. Gen. Hosp. on reporting 15 No 2. Can. Stat. Hosp. (D.G.M.S. 8/1. d. 6. 10. 18.)		3.10.18.	B213 KM. 20421 P II 81. d. 11. 18

Army Form B. 103. Regimental Number.....

Casualty Form—Active Service.

Regiment or Corps.....

Rank.....Surname.....Christian Name.....

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*).....

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..			
11/2/19	Pte 16th 103 d 11/2/19	103 Fus 12 6 HA 8/2/19	Aspington	11/2/19	
	WO 24/29/4/16				
		SOS D WO Plan	Aspington		CAPT. G.M. ASST. ADJT.
23 JUL 1919		Embarkation for Home			
		SL ? H FROM HLY 2BT 1/13			
		ARM V ALTRAX		25 AUG 1919	
		R M S ADRIATIC			

(*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.

W. 5[illegible]—M2[illegible] 1[illegible] 7/19 [illegible] C. P. & S., Ltd. Forms B./103 E/1555.

[P.T.O.

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				
14 8/19	M.H.Q. Ottawa	T.O.S. C.E.F. in Canada on General Demobilization M.D. No. 6	28 7/19		C.E.F. R.O. No. 2123-19
15-8-19	M.H.Q. Ottawa	S.O.S. C.E.F. in Canada on General Demobilization M.D. No. 6	12-8-19		C.E.F. R.O. No. 2127-19

for Director Personal Services

CANADIAN EXPEDITIONARY FORCE

W.E. 6-37.
L.B.

Certificate of Service

ISSUED TO OFFICERS AND NURSING SISTERS

This is to Certify that (Rank) Nursing Sister.

(Name in full) Mary Catherine Nichols GUNN.

Enlisted in The Canadian Army Medical Corps.

CANADIAN EXPEDITIONARY FORCE, on the [redacted]

day of [redacted] 191[redacted] AND WAS APPOINTED to COMMISSIONED RANK

in The Canadian Army Medical Corps.

CANADIAN EXPEDITIONARY FORCE on the First. day

of January 191 7.

He SERVED in CANADA, England and France with the C.A.M.C., 3 of C.C.A. Cross Hosp., Taplow., No.1. Can. Gen. Hosp., Att.No.3 Can. Gen. Hosp., No.12 Can. Stat.Hosp., No.4 C.C.C. Station., No.2 Can. Stat. Hosp., No.3 C.C.C. Station., No.11 Can. Gen. Hosp., Shornclife., and No.12 Can. Gen.Hosp. Bramshott.

and was STRUCK OFF THE STRENGTH on the Twelfth. day

of August 191 9 by reason of General Demobilisation.

Dated at Ottawa, this Twenty-Ninth day

of December. 191 9.

for Lieut.
Director of Personal Services.

M. F. W. 2618a
30m.—4-19.
1772-39-1428.

ORIGINAL

Original.

MEDICAL HISTORY SHEET.

Surname Gunn. Christian Name Miss. M.C.N.

Examined { on 21 day of Dec 1916
at Calgary.

Birthplace { City or Town Victoria
County Nova Scotia

Apparent age 30

Trade or occupation Nursing.

Height 5 Feet 6 Inches.

Weight 130 Lbs.

Chest measurement { Minimum 32½ inches.
Maximum expansion 3 inches.

Physical development Good

Small-Pox Marks None

Vaccination Marks { Arm Right. Left. None
Number

When Vaccinated last 1912 – Did not take

(a) Marks indicating congenital peculiarities or previous disease None

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

Approved by [signature]

Rank Capt. A.M.C. M.O.

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

Date.	Result.	Vaccinations.
30/1/17		[illegible] M.O.
		M.O.
		M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.
1/1/17		500 mill. mixed. [illegible] M.O.
15/1/17		1,000 mill. mixed. [illegible] M.O.
23/1/17		1000 mill. mixed. [illegible] M.O.

Enlisted on 1st day of January 1917 at Calgary.

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	C. Am C.	Nursing Sister		1st Jany. 1917
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.

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

M. F. B. 313.
200M—11-15.
H. Q. 1772 39-4-19.

1917

J. MO

Surname Gunn Christian Name Mary Catherine Regt. No.

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital. Day	Month	Year	Dates of Discharge from Hospital. Day	Month	Year	DISEASE.	Number of days in Hospital.	Remarks on nature of the disease: how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
No. XI CANADIAN GEN[illegible] HOSPITAL, MOORE BARRACKS, [illegible]CLIFFE		15	4	19	8	5	19	No admittance			C H Clynch Capt Lieut.-Colonel, A.D.M.S. Mil. District No 4.
								Deformity of Index finger	23	Trans. to Petrograd Hospl	W H Gunn Major
CANADIAN RED CROSS OFFICERS HOSPITAL. 17, NORTH AUDLEY STREET, LONDON, W.		8	5	19	9	6	19	do	32	Stiff finger following infection. Operation Col. Gunn Scar tissue excised & tendon loosened. Passive movement & massage	A Roberts Major

C.A.D.C. 5009A

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

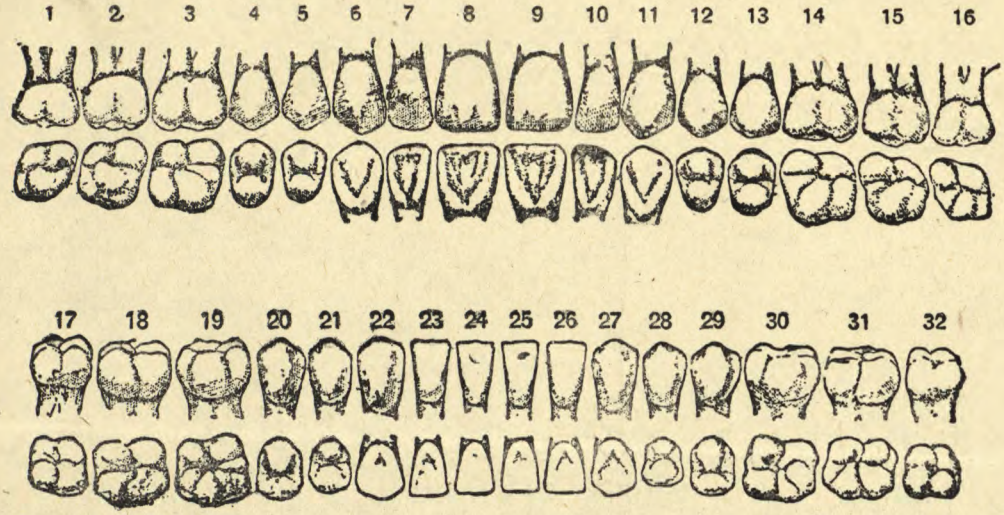
DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) Gunn M C N

REGIMENT C A M C. RANK Nursing Sister No.

Date of Examination in England 25/6/19 | Date of Examination in France



DIRECTIONS TO DENTAL OFFICERS

1. This form will be made out for each individual at the time of Demobilization in England or France.
2. Figures as per chart will be used to designate teeth concerned.
3. In reference to Partial Dentures the numbers of teeth thereon will be stated

PRESENT DENTAL REQUIREMENTS

1. FILLINGS
2. EXTRACTIONS
3. CROWNS
4. DENTURES
   - (a) Full Upper
   - (b) Part Upper
   - (c) Full Lower
   - (d) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT ? —

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

- (a) In Canada —
- (b) In England —
- (c) In France Yes

Signature of Dental Officer D J Bazzard Capt

Report No. 11 62

Army Form W. 3212.
(In books of 100)

Regtl. No., Rank and Name } W/S Gunner Age ____ Corps ____

Disease ____ Hospital 10 DE.

To Officer i/c Laboratory. Ward ____

Please carry out an examination of the accompanying specimen of Urine

with special regard to Routine

Nos. of previous Reports (if any) ____

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

Date 9-5-4

O. i/c Ward.

LABORATORY REPORT.

Acid
1.030
Cloudy amber
Flocculent sediment
Sugar - nil
Albumen - nil
Micro: Fairly numerous
pus cells (showing tendency to clumping
+ epithelium

A. M. Sellers
Major

Date of Examination ____

O. i/c Laboratory.

W6591—P1803 300,000 10/18 HWV(iM374)

LABORATORY REPORT.

Forms
I. 1237
12

JA J.

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
C178		Sister	Gunn	N.M.C.
Year 1917	Unit. C.A.M.C.	1 Canadian General Hosp.	Age.	Service. in France 5/12.

Station and Date.

Disease I.C.T.Finger

Sisters Hosp. ~~Le~~ Touquet 24 Gen.Hosp. 30-1-18.

She was admitted to Hospital on 17-12-17 suffering from a whitlow of index finger, right. It had been incised before admission but it still spread up the finger to palm and back of hand. It had to be further incised. It had now healed but she still requires a further period rest before she will be fit for duty.

Sgd/ A.R.Stoddard.
Surgeon Major,

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

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

P.T.O.

Station and Date.	

D.D.M.S. No. 2/443/18 Date 3/2/18 ETAPLES.

CONFIDENTIAL.

Army Form A. 45.

PROCEEDINGS OF A MEDICAL BOARD

assembled at 24th GENERAL HOSPITAL. ETAPLES..... on 2nd Febry. 1918.

by order of D.D.M.S., E.A.D.....

for the purpose of examining and reporting upon the present state of health of

(Rank and Name) Sister (Miss) GUNN. N.M.C., (Corps) C.A.M.C., att.l Can. G. Hp.

Age _____ Service 11 mnths (In France 5 mnths). Disability I.C.T. FINGER.....

Date of commencement of leave granted for present disability _____

Date on which placed on half-pay for present disability _____

The Board having assembled pursuant to order, and having read the instructions on the back of the form, proceed to examine the above-named ~~officer~~ Lady and find that she is suffering from the effects of a severe wound of the index finger & palm of the right hand. The flexor tendon has been involved & the finger is stiff. She is also debilitated. The Board recommend that she be granted 3 weeks sick leave to England.

The opinion of the Board upon the questions herein is as follows:—

(1.) *a.* Is the ~~officer~~ Lady fit for "General Service"? No

b. If not so fit, how long is she likely to be unfit? 3 weeks

(2.) *a. If unfit for General Service, is she fit for service at home?* No

b. If not so fit, how long is she likely to be unfit for service at home? 3 weeks

c. If unfit for General Service at home, is she fit for light duty at home? No

d. If not so fit, how long is she likely to be unfit for light duty at home? 3 weeks

(3.) Was the disability contracted in the service? Yes

(4.) Was it contracted under circumstances over which she had no control? Yes

(5.) Was it caused by military service? Yes

(6.) If caused by military service, to what specific conditions is it attributed? Burning clothes

(7.) If the disability was not caused by military service, was it aggravated by it? —

G.H.Q., 3RD ECHELON No. 24465 22FEB1918 CANADIAN SECTION

Approved. [illegible] 3.2.18

To Convalds

Signatures

R. H. S. Cutler Colonel. President.
O.C. 24th General Hospital.

James Capt R.A.M.C. } Members.
B. Rolland. Capt. R.A.M.C.

I concur in the above recommendation
3/2/18

(5725) W. 16789/M260. 200M. 2/16. C. P., Ltd. Forms A.45 27

(529) W. 12554 M12 8. 50M. 1/17.

[P.T.O.

Instructions.

1. On the occasion of an Officer's first appearance before a Medical Board for his present disability, the circumstances under which the disability was contracted will be fully detailed; whenever possible a statement of the case by his medical attendant will also be attached.

2. In recording the proceedings of subsequent Boards, the progress of the individual since his last appearance will be clearly and concisely stated so as to ensure a continuous medical history of the case being available.

3. Enteric Fever, Dysentery, Malaria, etc., contracted when on service abroad, in countries where there is a special liability to the disease, are to be regarded as caused by military service.

FORM P. 15.
[illegible]—16M—1-3-18 H.W.V.Ld.—3717-18.

ASSIGNED PAY.

UNIT.

NAME OF

RATE

Beneficiary

Address

Amount. $

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

6 am 6

Pay

F.A

Me

add. ou

DATE 1918	PARTICULARS		CK.
Apl 12	Sickleave 12 2/18 - 14 3/18		47
	apl Pay R		
24		Bank	11
May 19	May Pay (R)		
23		Bank	268
June	June Pay (R)		
24		Bank	41
July	July Pay R		
24		Bank	56
Aug	Aug Pay R.		
24		Bank	73
Sep	Sept Pay R.		
24		Bank	91
Oct	Oct Pay R		
24		Bank	104
Nov	Nov. Pay R.	do	
26		Bank	125
Dec.	Pay R.		
18		Bank	137
Jan 22	Jan Pay (R)		
28		Bank	155
Feb 13	Rat ns + Belg All 4-21 10/18 France		27
18	Feb. Pay (R)		
26		Bank.	17
27	Trav Ltes 14-15 11/18 France		31

C. Forward

RATE OF P. AND A.	RANK.	DATE	AUTHORITY	NAME.
Pay 2 ** pd	R.S	13 2/17	fr ban	Name Gunn
F.A. 60 "			D In S 60245	Initials Mary Cath. Nicholas
Messing 1 ** "			19 2/17	Bank of Montreal Trafalgar Sq

outfitted 1/3/19

CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialed by P.M. in every case.	INITIALS
474					232 4/0 50	
	108					
1187		108				
	111 60					
2683		111 60				
	108					
4166		108				
	111 60					
5626		111 60				
	111 60					
7258		111 60				
	108					
9187		108				
	111 60					
10404		111 60				
	140					
12521		140				
	124					
13792		124				
	124					
15564		124				
2785					Fcs 84	
	112					
17078		112				
3102					Fcs 29.35	

FORM P. 15. H.W.V.Ld.—3717-18.
12519—16M—1-3-18

ASSIGNED PAY. UNIT. NAME OF RATE OF P. AND A. RANK.

Beneficiary C A M C Pay 2. A /

Address F.A. /

Messing /

Amount. $

Separation Allowance issued. Yes or No..... a. o. a. 1 3/19

DATE 1919	PARTICULARS	CK. NO.	CR.	DR.
	Bro Ford.			
Mar 8	Add. outfit allce. 1 3/19 Vo	37	100	
	Bank	17684		100
18	March Pay (R)		124	
18	Bltg. allce 1-30 11/18 Frame	3327		
26	Bank.	18651		124
April 11	April Pay (R)		120	
17	Trav allce. 13-22 3/19	712		
26	Bank.	1044		120
May 13.	May Pay (R)		124	
22	Bank	2593		124
June 12	Adv June P+a	Bank.		120
19.	June Pay (R)		120	
July 10.	Adv July + Aug P+a.	Bank.		248
	July Pay R.		124	
	Aug Pay R.		124	

RANK.	DATE	AUTHORITY	NAME.
A/S	13/7/17	fr Can DMS 60245 19/2/17	Name Gunn. Initials M C R. Bank of Mon Traf Sqr
1 3/19			

DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialed by P.M. in every case.	INITIALS
100		0		
124		0	Fcs. ~~20~~	
120		0	3-7-6	
124		0		
120		0		
245		D 245	RETURNED TO CANADA L.P.C. TO 31 8/19 DMS TRANSFER TO N.E. LEDGER	
		D 124		
		0	fr L3 to h 12.15 9/19	

FORM P. 15
5986--25M--19/1/17

ASSIGNED PAY.

UNIT.

NAME OF / DATE

Beneficiary C.A.M.C.

Address

Amount. $

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

DATE	PARTICULARS	CK. NO
1917		
March 22	Mess Allce @ 1.00 p. 13 2/7 - 28 2/7 16 days	Bank 24612
22	P & A @ n/p rates Mess p. 13 2/7 D.M.L.C.O. 245 d/19 2/7	V0201
22	March Pay	
23		Bank F248

DATE	AUTHORITY	RANK.	DATE	AUTHORITY	NAME.
		R/S	13-2-17	From Canada D.M.A.C. 0/245 dy 19-2-17.	Name Gunn; Initials Mary Catherine Nichols Bank of Montreal.

1916-17

	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS
nk	24612		16				
19	V020178	16					
		111 60					
R	F24818		111 60				

FORM P. 15
5986—25M—19/1/17

ASSIGNED PAY.	UNIT. NAME OF	DATE	AUTHORITY	RANK
Beneficiary				
Address				
Amount. $				
Separation Allowance issued. Yes or No.....				

DATE	PARTICULARS	CK. NO.	CR.	DR.

ANK.

DATE AUTHORITY

NAME.

Name

Initials

Bank

DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS

FORM P.15
2227—10M—1/1/17

ASSIGNED PAY.

UNIT.

NAME OF DATE A

Beneficiary Came.

Address

Amount. $

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

1917-18

DATE	PARTICULARS	CK. NO.
1917		
April 21	April Pay . R.	
26	Bank	3003
May 22	May Pay. R.	
23	Bank	5980
June 15	June Pay. (R)	
22	Bank.	9004
July 19	July Pay. (R)	
21	Bank.	13092
Aug. 18	Aug. Pay. (R)	
22.	Bank.	17361
Sep. 17	Sept. Pay- (R).	
18.	Subs. to Maple Leaf Tobacco Fund. Aut. Letter 16-23-17.	No. 959
21	Bank	21863
Oct. 9	October Pay. R.	
16	Subs to Maple Leaf Tobacco Fund. Aut. Letter 16/17.	No. 1225
20	Bank.	26291
Nov. 19	November Pay. R.	
19	Subs to Maple Leaf. Tob. Fund. Aut Letter 16/17.	No 923
20	Bank	30763
Dec 7	Dec Pay (R)	
14	Bank	35096
Jan 7th	Subs. to Maple Leaf Tobacco Fund. 4/t. Aut Letter 16/17	No 421 125 Ja
14	Jan Pay (R)	
22	Bank.	39501

Carried for.

DATE	AUTHORITY	RANK.	DATE	AUTHORITY	NAME.
	Pay $2.00 pd J A .60 Mess 1.00	R/S	13 2/19	fr Canada D.M.S.C. 0245 cl/14 2/19	Name Gunn Initials Mary Edith Nichols Bank of Montreal Trafalgar Sq 1/14

	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS
		108					
R	3003		108	✓			
		111 60		✓	111 60	✓	
12	5980		111 60	✓			
		108			108	✓	
	9004		108	✓			
		111 60					
	13092		111 60	✓			
		111 60					
	17361		111 60	✓			
		108					
29-2-17	No. 959		1 ..	✓	107		
H	21863		107	✓			
		111 60					
	No-1225		1 ..	✓			
H.	26291		110 60	✓			
		108					
	No 923		1 ..	✓			
	30763		107	✓			
		111 60					
	35096		111 60	✓			
	No 421 25 Jan.		1 00	✓			
		111 60					
R.	39501		110 60	✓			

FORM P. 15
2227—10M—1/1/17

ASSIGNED PAY.

UNIT.

NAME OF DATE AUTHORITY

RANK.

Beneficiary C.A.M.C Pay 2nd pd 7d 60 Mess 1.00 N.

Address

Amount. $

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

1917-18

DATE	PARTICULARS	CK. NO.	CR.	DR.
1918				
Feb 5th	Subs to Maple Leaf Tobacco fund. 4/1. Aut List 13 Feb. V6150			1 00
14	Feb Pay (R)		100 80	
14	Subs to Maple Leaf Tobacco fund. 4/1. Aut. Feb List 50 V0.704.			1 00
20		Bank 40996		98 80
Mar 12	March Pay (R)		111 60	
22		Bank		111 60

ANK. NAME.

DATE AUTHORITY

R. S

Name Gunn.
Initials Mary Cath Nichols
Bank of Montreal
Trafalgar Sq 1/6

DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS
1 00				
1 00				
98 80		0		
111 60		60		

DEPARTMENT OF THE INTERIOR.

OTTAWA, CANADA.

LETTER OF IDENTIFICATION.

The bearer of this letter, Miss M. C. Nichols Gunn, *whose signature and photograph appear in the margin hereof, has produced satisfactory evidence that* she (he or she) *is a British-born subject, and, as the said person will apply for entry to the United Kingdom, the present letter is issued for identification purposes only.*

Signature M. C. Nichols Gunn

O. W. Scott

Superintendent of Immigration.

Countersigned A. Regnaud

Office Dominion Immigration Agent,

Address Montreal, Canada.

Date January 16th 1917.

MONTREAL IMM. AGENCY RECEIVED JAN 16 1917

A. Regnaud

N.B.—This **LETTER OF IDENTIFICATION** will enable the holder to enter, but not to leave, the United Kingdom: a regular British passport will be required to leave any port in the United Kingdom. This letter will readmit the bearer to Canada if presented within one year.

W.S.B. CLASS "A" NO.....

SERVICE GROUP 23.
OCCUPATIONAL GROUP. 19.
DISPERSAL AREA "B"

PROCEEDINGS OF AN OFFICER OR NURSING SISTER STRUCK OFF STRENGTH OF THE CANADIAN EXPEDITIONARY FORCE

I 4-2-22 4/8/37

1. RANK Nursing Sister.
2. NAME Gunn, Mary, Catherine Nichols
3. UNIT No. 12 CAN. GENERAL HOSPITAL.
4. DATE STRUCK OFF STRENGTH | PLACE Halifax N. S.
5. REASON SOS 12-8-19 RO 2127-19

Demobilization.

6. AUTHORITY
7. PROPOSED RESIDENCE

2707 Wolfe St.
Calgary, Alta.,
Canada.

This folder should contain the following documents:

1. Declaration Paper, M. F. W. 51, or Attestation Paper, M. F. W. 23.
2. Casualty Form, A. F. B. 103 or M. F. W. 54.
3. Medical History Sheet, M. F. B. 313 or A. F. B. 178.
4. Proceedings of Medical Boards, A. F. A. 179 or M. F. B. 227.
5. Medical Report M. F. W. 129.
6. Dental History Sheet, M. F. B. 465.
7. Last Pay Certificate, M. F. W. 44.
8. Certificate as to Missing Documents.

SLD LIVERPOOL MAY 28TH/19
ARRIVED HALIFAX 5 AUG 1919
R M S ALSATIAN

M. F. W. 2591.
20M—11-18.
1772-39-1380.

1. Triplicate Declaration Paper (M.F.W. 51), or Triplicate Attestation Paper (M.F.W. 23).
2. Casualty Form (A.F.B. 103).
3. Medical History Sheet (M.F.B.313 or A.F.B.178)
4. Proceedings of Med. Board (M.F.B.227 or M.F.W.129)
5. Dental Certificate (C.A.D.C. 5009x).
6. Proceedings on Striking off Strength (M.F.W. 2591).
7. Last Pay Certificate (P. 41)
8. War Service Gratuity Form (M.F.W. 2593).
9. Sundry Documents.

Group H.Q.
Checked by No. 21
CMS
Date 27-7-19

Army Form I. 1238.

SYPHILIS CASE-SHEET.

Regtl. No. 203471 Rank and Name Pte Gunn. H. R. Corps 2/4 Camr

Placed on Syphilis Register at CHERRYHINTON MILITARY HOSPITAL CAMBRIDGE on No. in Register

Disease contracted at Newcastle. Primary sore appeared on (date) Aug. 11/1917.

CONDITION WHEN PLACED ON REGISTER.

Primary sore—character and site Small Sore Hard indurated base Scabbed over. ? Prepuce.

Lymphatic glands Inguinal Slightly Epit + Axill + Cervical +.

Skin (nature and distribution of rash No Rash, No Condylomata.

Mucous membranes Throat nil.

Other symptoms

Examination of exudate from sore—Spirochaeta Pallida (present or absent) Not sent

Examination of blood serum— Method employed (original or modification)

Wassermann reaction Result (positive or negative) Negative.

Station CHERRYHINTON CAMBRIDGE MILITARY HOSPITAL Date Aug 18/1917. Signature of M.O.

W. B. Dickson
Capt. R.A.M.C.

Struck off Syphilis Register at on

Cause of being struck off Register (a) Recovered (b) Transferred to Army Reserve (c) Discharged from Army

Station Date Signature of M.O.

(2487) Wt. W6391—2665. 250000. 7/15. Sir J. C. & S.

N.B.—On completion of a course of treatment a red line to be drawn across the page, and the date when the next blood test is due to be entered in red ink below the line, *e.g.*, "Blood test due 15.5.14."
The date and result of the blood test to be entered; and if negative, the date on which the next blood test is due to be also entered.

Station	Date	Symptoms and progress (Date of admission to hospital, and date of discharge from hospital, to be entered in red ink.)	Weight clothed, without boots—lbs.	Urine: Normal (N.) Albumen (Alb.)	Wassermann Reaction: Method {Original (O.) Modification (M.)}	Wassermann Reaction: Result {Positive (+) Negative (—)}	Treatment: Arsenical: Intravenous Injection. Dose in grammes: Salvarsan	Treatment: Arsenical: Intravenous Injection. Dose in grammes: Neo-Salvarsan	Treatment: Mercurial: Intramuscular injection. Dose of Metallic Mercury in grains	Treatment: Mercurial: Inunctions or Oral (Preparation and dose)	Treatment: Other Methods	Signature of M.O. (Each M.O. will sign his name in full on the first occasion; subsequent entries may be initialled)
	1917											
CHERRYHINTON CAMBRIDGE MILITARY HOSPITAL	Aug 18.	Admitted		N.								W B Dickson Capt RAMC
	" 20.	WASSERMANN REACTION RESULT. Negative.			O	—						
	" 27.	Discharged to Gen Clinic										
		To have Wasserman September 10th/1917.										

Station	Date	Symptoms and progress (Date of admission to hospital, and date of discharge from hospital, to be entered in red ink.)	Weight clothed, without boots—lbs.	Urine	Wassermann Reaction		Treatment					Signature of M.O. (Each M.O. will sign his name in full on the first occasion; subsequent entries may be initialled)
							Arsenical		Mercurial		Other Methods	
				Normal (N.) Albumen (Alb.)	Method {Original (O.) Modification (M.)	Result {Positive (+) Negative (—)	Intravenous Injection. Dose in grammes: Salvarsan	Intravenous Injection. Dose in grammes: Neo-Salvarsan	Intramuscular injection. Dose of Metallic Mercury in grains	Inunctions or Oral (Preparation and dose)		

Army Form B. 103. Sheet 2. Regimental Number.....

Casualty Form—Active Service.

Regiment or Corps C. A. M. C.

Rank Nursing Sister Surname Gunn Christian Name Mary Catherine Nichols

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)..... 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 ...			
5.10.18	2 Can Stat Hpl	Taken on strength of No 2 Can Stat Hospital.	Outreau	4.10.18	B213 fm 20421. Pte 61 d/30.10.18
		S.O.S. to 2 Can. Stat. Hpl.		14.11.18.	B213. KM. 20421.
16.11.18.	2. C. S. H.	on reporting to No 1 Can. Gen. Hosp. (as per DGMS. DG. 8/1 dy. 6.10.18)			Pte E 69. d/22.11.18.
16.11.18	1 C. G. H.	T.O.S of No 1 Can. Gen. Hosp on transfer from No 2 Can Stat Hosp DGMS DG. 8/1 d 6.10.18.		15.11.18	B213. KM 20421 Pte No 91 of 1918.

(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.

W. 8635—M2733 2000m 9/17 (35611) C. P. & S., Ltd., Form B./103 E/1807. P.T.O.

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				
				17.12.18	B213
21.12.18	D.C.G.H.	S.O.S of No 1 Can Gen Hosp to Rpt to No 3 C.C.C.S (Authy D.M.S. Telm. M850d 18.12.18.			K.R. 20421 D/- No 63 of 1919
— " —	3 C.C.C.S.	T.O.S from 1 C.G.H/pl		19/12/18.	B213 Pt = 4 of 1919
16.3.19	— " —	To Hotel du Nord - Boulogne		13.3.19	B213
25.3.19	Prin Matron	Posted to Canc Casualty Co Shorncliffe - on proceeding to England			(for D.M.S. Clas) QM 15758
				23/3/19	K.a. 50034 P.II O. 10 of 1919

C R Wilson
Capt. for Lt.-Col., A. A. G.
Canadian Section, G.H.Q. 3rd Echelon, B.E.F.

25-3-19	D.C. #10 C.G.H.	Attached from C.A.M.C. R.T.D. on reporting from France	Shorncliffe	23-3-19	Pt. II D.O. 25
7-5-19	D.C. #XI C.G.H.	T.O.S. from C.A.M.C. R.T.D.	Shorncliffe	20-4-19	Pt. II D.O. #41
7-5-19	D.C. #XI C.G.H.	S.O.S on posting to the C.A.M.C. Cas. Depot.	Shorncliffe	6-5-19	Pt. II D.O. #41

D. A. Wingfield
CAPT. & ADJT.
For O.C. No. XI CAN. GEN. HOSPITAL, MOORE BARRACKS, SHORNCLIFFE.

8.5.19.	Canc Cas Coy	T.O.S. from No. 11 C.G.H. (21 days Cas)	Bexhill	6.5.19.	P II D.O 107
26.6.19.	do	S.O.S to No. 12 C.G.H.	Witley	24.6.19.	P II D.O 149

for O.C. Canc Cas Coy.
Capt

Forms
I. 1237
14

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
		N/S	Gunn	M C N
Year.		Unit.	Age.	Service.

Station and Date.

Disease Deformity of Rt index finger

15.4.19

Jo DS

Contracture of R. index finger following
9.5.19 an infection in the spring of 1918.
Finger in ~~flexion~~ position of complete flexion
& extension impossible.

12.5.19 Operation Col. J. A. Gunn
Scar tissue excised flexor
tendon lengthened sutured with linen.
Finger put up in fully extended position

21.5.19 Finger slightly swollen & exuding small
amount of serum.

10.6.19 Wound healed. Having massage &
passive movement. To duty

A W Mott
Major RAMC

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

(A 1014) W3081/P/1296 3,150m 7/18 Drayton Mill Forms/I. 1237/14 (E. 3420)

P.T.O.

Station and Date.	

28.4.19

Adriatic 4.8.19

AUDITOR | PAYMASTER

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

M. OR S. | REGT. No. | RANK Sgt | NAME (IN FULL) Gunn Mary b. n.

NEXT OF KIN	RELATIONSHIP	PARTICULARS	EFFECTIVE DATE	AUTHORITY
ADDRESS		TOS	223	
IS SEPARATION ALLOWANCE PAID?	DATE EFFECTIVE			
TO WHOM PAID Nil	RELATIONSHIP			
ADDRESS				

ORIGINAL UNIT C.E.F. b. a. mb. | IF IN P.F. WHAT UNIT? | BLOCK LETTERS SURNAME FIRST

PLACE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

DATE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

ASSIGNED PAY $ | DATE EFFECTIVE

PAYABLE TO Nil | RELATIONSHIP | ANY CHANGE IN ASSIGNEE OR ADDRESS 1/10

ADDRESS Bank of Montreal Head office Calgary Alta

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE

DISCHARGED PLACE Edgd | DATE 12/8/19 | REASON Demob | AUTHORITY Dev 223 | IF ENTITLED TO POST DISCHARGE PAY

adjusted MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $ C.	OTHER CREDITS $ C.		TOTAL CREDITS $ C.	ACQUITTANCE ROLLS COL. NO. 1 NO. DATE	COL. NO. 2 NO. DATE	COL. NO. 3 NO. DATE	CASH PAYMENTS COL. NO. 1 $ C.	COL. NO. 2 $ C.	COL. NO. 3 $ C.	ASSIGNED PAY $ C.	REGIMENTAL CHARGES $ C.	OTHER CHARGES $ C.		TOTAL DEBITS $ C.	BALANCE DEBIT $ C.	CREDIT $ C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT																				
31.8.19		3 00													8 00					Hearing on boat 28/4/19 to 4/8/19
															90 00		98 00	98 00		Advance 1/2 on boat
			5 60			5 60									76 00	98 00	174 00	168 40		Staff Sub Messing 5/8/19 to 1/8/19
		Nil																		Pay Messing 1/8/19 to 31/8/19
153 days			459 00			459 00							90 00							pro payment made
															78 40					And overpaid
													14 60					276		1139121 10-9-19
													90					186		1510692 14-10-19
													90					96		1774063 10-11-19
													96					Nil		1781112 9-12-19
		459 -				459 -							330 60		78 40		459 00			

WAR SERVICE GRATUITY W.S.G. S.A.

Certified that all payments due on this date have been paid.

[signature] CAPT.

For Senior Officer Pay Services, M. D. 6

AUG 30 1919

200M-3-19.—L. L. 58788-M. & D. 9985.
M. F. W. 2596.
1772-39-1390.