.....th. DIVISONAL SIGNAL COMPANY

TRIPLICATE

4162

Divisional Signalling Corps.

ATTESTATION PAPER.

No. 507606

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1.	What is your surname?	Mack
1a.	What are your Christian names?	William
1b.	What is your present address?	Kenora Ontario
2.	In what Town, Township or Parish, and in what Country were you born?	Superior Wisconsin U.S.A.
3.	What is the name of your next-of kin?	Mr Mathew Mack.
4.	What is the address of your next-of-kin?	1620-56th Street Station B. Wis. U.S.A.
4a.	What is the relationship of your next-of-kin?	Father.
5.	What is the date of your birth?	24th May. 1893.
6	What is your Trade or Calling?	Telegrapher & Railroad Brakeman.
7	Are you married?	No
8	Are you willing to be vaccinated or re-vaccinated and inoculated?	Yes
9.	Do you now belong to the Active Militia?	No
10.	Have you ever served in any Military Force? If so, state particulars of former Service.	Yes. 3 Years in Wisconsin National Guar
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

13. Have you ever been discharged from any Branch of His Majesty's Forces medically unfit? No

14. If so, what was the nature of the disability?

15. Have you ever offered to serve in any Branch of His Majesty's Forces and been rejected? No

16. If so, what was the reason?

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

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

Wm Mack (Signature of Recruit)

Date February 8 1917. G. D. Russell (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Wm Mack, 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.

Wm Mack (Signature of Recruit)

Date February 8 1917. G. D. Russell (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 Winnipeg this 8th day of February 191 7

William Worley J.P. (Signature of Justice)

M. F. W. 23
750M—8-16
H. Q. 1772-39-341

N.B.—Attention is drawn to the fact that any person making a false answer to any of the above questions is liable to a penalty of six months' imprisonment

4162

Description of William Mack. on Enlistment.

Apparent Age 23 years ... 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 ins.
Chest measurement.	Girth when fully expanded.	36 ins.
	Range of expansion	3 ins.
Complexion	Fair	
Eyes	Blue	
Hair	Light Brown	
Religious denominations	Church of England	
	Presbyterian	
	Methodist	Yes
	Baptist or Congregationalist	
	Roman Catholic	
	Jewish	
	Other denominations (Denomination to be stated.)	

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 8th February 1917.

Place Winnipeg Manitoba.

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:—

MOBILIZATION MEDICAL BOARD APPROVED FIT

PRESIDENT

MEMBER

MEMBER

CERTIFICATE OF OFFICER COMMANDING UNIT.

William Mack having been finally approved and inspected by me this day, and his Name, Age, Date of Attestation, and every prescribed particular having been recorded, I certify that I am satisfied with the correctness of this Attestation.

(Signature of Officer)

Major

O.C. SIGNAL TRAINING DEPOT, C.E.F.

Date Feb 19 1917.

REGIMENTAL DOCUMENTS

NAME MACK WILLIAM REGT. NO. 507606 UNIT 2nd Div Signals H. Q. FILE NO.

CONTENTS		DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
	ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
	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.F.B. 263 or A.F.B. 120)					
1	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					
	DENTAL HISTORY SHEET (M.F.B. 465)				00326	DISCHARGE
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					Category Demob
	MEDICAL EXAMINATION (M.F.W. 129)					
1	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)					
1	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					
1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
3	Medal					
1	ODS					
1	1914					
1	casualty					
1	POR					
1	Indy					

Deceased 21-11-60

W. 2589
100M-11-18
12-39-1377

Surname	Christian Name or Names	Reg. No.
MACK.	W.	507606.
Rank	Unit	
Spr.	C.E. Sig.	

4162

Cas. List.		
30-9-18.A332/2	56. G.H. Etaples.	12-9-18.
	Neurosis. R	
2.10.18.A334 (2)	Dis to 3B Depot.	25-9-18.

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

D.M.S.1300. 50M-30-8-18.

Cas. List.

Form R. 149.

WILLIAM

Name MACK Rank Spr. Reg. No. 507696
4182

Unit Can Sig Pool.

Next of Kin U. S. A.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1918						
10 9	56 G.D. Etaples	Neuvosia	K/332			4205/13
25 9	Disp to 3 B Depr	do	K/334			4394/13

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

NAME Mack 3t

REGT. No. 507606

RANK AND UNIT Pte Can Engrs

NEXT OF KIN

CABLE	
No.	DATE

NATURE OF CASUALTY

M. F. W. 42—100M.—8-18.
H.Q. 1772 39-893.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
A 332	56 Gen Etaples	12-9-18	Neurasia Can Exp.
A 334-2	Disch. to 3. B. Depot.	25-9-18.	"

No. 507606 RANK Pte NAME Mack William

T.O.S. 17-2-17 UNIT 4th Divisional Co Signal Training Depot
Do 43 19-2-17

M.D. 14 O.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1917	1917			
Feb 17	Feb 28	✓		
Mar		✓		
April		✓	Prod Overseas 24-4-16	April paylist.

SURNAME. Mack

CARD No. 4
M.D.F.4
Sps Dis 24-5-19 Demob
100162 of 4 Lib 19 #4010

CHRISTIAN NAMES William

REGL. No. 507606 RANK Spr

UNIT Signal Training Depot (12th R.D.)

FORMER CORPS Wis National Guard (3yrs)

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL Mack, Mathew

RELATIONSHIP TO SOLDIER Father

ADD 5720 Ogden Ave Superior Wisconsin U.S.A.

L.S.A.A. P. 18-8-17

COUNTRY OF BIRTH U.S.A. Superior, Wis DATE May 24th 1893

PLACE OF ATTESTATION Winnipeg. Man DATE Dec 8th 1917

Os. 29.4.17

R/C 22/5/19 330/14 Spr.

L. L. 10437. M. & D. 7253.

M. F. W. 22. 100M.—11-16. H. Q. 1772-39-339.

Sailed from Halifax per S.S. Olympic 29/7/17

MARRIED SINGLE Yes WIDOWER

TRADE OR CALLING Telegraph & Railroad Brakeman RELIGION Methodist

DESCRIPTION.

APPARENT AGE 23 YEARS — MONTHS

HEIGHT 5 FEET 9 INCHES

CHEST MEASUREMENT 36 INCHES EXPANSION 3 INCHES

COMPLEXION Fair EYES Blue HAIR Light Brown

DISTINGUISHING MARKS Not Stated

MEDICAL EXAMINATION. PLACE Winnipeg. Man DATE Feb. 8th 1917

Present Address, Kenora, Ont.

Can Da

Number 507606 Rank Spr

Surname MACK

Christian Name William

Unit 6 E. Theatre of war France

Date of Enlistment 2-11-17 Gen Del

Remarks Kenora Ontario

Latest Address ~~5720 Ogden Avenue, Superior, Wisconsin, U.S.A.~~

U.S.A.

Roll No. B Page 5763

Qa 31013 dep

AUG 13 19

Sheet #2

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

4162

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

Casualty Form—Active Service.

Unit, Regiment or Corps 2nd DSC

Regimental No. 507606 Rank Spr Name MACK, Wm.
C. E. F.

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

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

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

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B 213, 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				
11-6-19	O/S	T.O.S.D.D.#4. Disp.Sta."F"	Montreal.	13-5-19	D.O. Pt. 11#162
11-6-19		S.O.S.D.D.#4. Demob.	"	24-5-19	D.O. Pt. 11#162 R.O. 1420.

G.H. Fletcher Lieutenant,
a/ Assistant Adjutant,
District Depot No. 4.

(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				

4162

W. S. B. CLASS A — Fill in only.—Unit, Number, Rank and Name.

M. F. W. 54. (A. F. B. 103.)
350M.—5-16
H. Q. 1772-39-9?0.

Casualty Form—Active Service.

Unit, Regiment or Corps Draft SIGNAL TRAINING DEPOT

Regimental No. 507606 Rank Spr Name Mick William

Enlisted (a) 8-2-17 Terms of Service (a) ~~Dur. War~~ 2 yrs Service reckons from (a) 8-2-17

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) 3 yrs in W is consin Nat Guard Telegrapher & Rr Brakeman

Report: Date	Report: From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
		Embarked.	Canada.	29-4-17.	
		Disembarked.	England.	7-5-17.	
8-5-17	C.E.T.D.	Taken on Strength of C.E.T.D., from Canada.	Crowboro.	7-5-17.	Part II Order# 109.
3-NOV 1917	C E T D	Struck off Strength of C.E.T.D. leaving Proceeded to Sig Pool France	Seaford	2.11.17	Part II Order No. 256. Fred W. [illegible] Lieut. O.E. Adjutant, O.E.T.D.
12 11/17	A A S.	Arrived + 2 w/s	Sig Pool	3 11/17	[illegible] 87
	O C Pool			11/17	
14 11/17	C C R C	Joined	C C R C	10 11/17	
10 12/17	do	2 yrs & 3 Can Sig Coy		1 12/17	96. 92
1	Do	T O S. 3rd C. D. Signal Coy		2-12-17	R+R 96. Prom 84. 1917
9-12-17	O C 3rd Coy	Joined from C C R C.		7-12-17	B 13
24 6/18	A P M. Cardiff.	Transferred to Can Signal Pool.		24 6/18	K.E. 30242. Prom 30. 1918 32.

(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				
22/7/18	6 C R C	Joined	6 C R C	25/6/18	K 5171/231
26/9/18	6 S O B D.	Arrived (a) from	56 Emb Camp	24/9/18	1652
18/9/18	6 C R C	12	Hospl	18/9/18	R E 7853
5/10/18	6 S B S	20	Sig Pool	1/10/18	D 1497
5/10/18	6 C R C.	Arrived	6 C R C	1/10/18	A 1548.
24/9/18.	56 Emb.	Debility	20 3 Emb BD	24/9/18.	K 35 23
18.9.18.	Do.	Neuroris	56 G. Hpl.	18-9-18.	Lo 4703 - K 8511
31/12/18	C E R C	S O S to 2nd Sig Co		27/12/18	R T R 2315
31/12/18	O.C.	S. O. S. 2nd Sig Coy.	Fld	28/2/18	Pt II 8 1919
9/4/19	Witley Camp.	Proceeded to England.		9/4/19	N.R. O.No. [illegible] LIEUT. FOR LT COL. A.A.G.
13.5.19	O.C. N Wing	S. O. S. ON PROCEEDING TO CANADA.	Witley	13.5.19	Pt II 27 [illegible] Capt. Officer i/c Records, "N" Wing, C.C.C.

H. M. T. ⇒ NORTHLAND ⇐
EMB. LIVERPOOL 13-5-19
DISEMB. HALIFAX 23.5.19

Form R 122.
2353—100M—9-12-16.

A162

DL. Rank Name MACK William Reg'l No. 507606.

Unit No 12. Sig Dft to Cetd. If in perm. Corps, What Unit? Married or Single Single.

Place and Date of Enlistment Winnipeg. Feb 8th. 1917. Place of Birth Superior Wiscousin U.S.A.

Name and Address, Next-of-Kin Mt Mathew Mack.

1620-56th Street Stn N.Wis U.S.A. Relationship Father.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

17702
N/E. R.B. No.
File R.L.
Category CAN.OR

H. W. & V., Ld.—9546-16.

Report. Date.	From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place	Date.	REMARKS Taken from Official Documents.
		ARRIVED IN ENGLAND 7-5-17 S.S. OLYMPIC.			
8.5.17	C.E.T.D.	T.O.S.	Crowboro	7.5.17	Pt. II 109.
3.11.17	"	S.O.S. to Sig. Pool, France	Seaford	2.11.17 "	256 Sig. Pool A.II O. 87 d/17.11.17
15.12.17	Sig. Pool	SOS to 3 Div. Sig. Co.	Field	1.12.17 "	93 3 D.S. A.II O. 84 d/12.12.17 Sig Pool 00 32
30.6.18	3rd Sig Coy	S.O.S to Sig Pool.	Spr Field	24.6.18 "	30.5 Sig Pool 10/30.6.18
5.2.19	C. Sig P.	SOS to 2nd C.D. Sig Co	" "	27/12/18	20.6. TOS D.O.8. 7/2/19. 2nd CDSCo
11.4.19	2nd C.D. Sig Coy	proceded to Eng Draft H 65 Group 9	" Leffaore	9.4.19	6021
18.4.19	N Wing C.C.E.	Tot from 2 C.D. Sig Coy	Lovtley	10.4.19	6028.
13.5.19	do	S.O.S to Canada	" "	13.5.19	D.O. 26.
			62-F	13-5-19	

A.B. 103 NOV 1917

507606

507606 Mack, W.

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.					

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

WAR SERVICE BADGE
CLASS A No.

THIS IS TO CERTIFY that No. 507606 (Rank) Sapper

Name (in full) MACK WILLIAM enlisted in

the Canadian Engineers

CANADIAN EXPEDITIONARY FORCE at Winnipeg on the 8th

day of February 1917

HE served in 2nd Cdn Divl Signal Coy in France,

and is now discharged from the service by reason of Demobilization.

~~Medical Unfitness~~.

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

Age 26

Height 5' 9"

Complexion Fair

Eyes Blue

Hair Lt Brown

W Mack

Signature of Soldier.

Marks or Scars

Date of Discharge

Dispersal Station "F"
MAY 24 1919
Military District No. 4

L. Fauvreau Major

Issuing Officer Commanding Dispersal Station "F"

Rank

Date May 24 1919

N.B.- AS NO DUPLICATE OF THIS CERTIFICATE WILL BE ISSUED, ANY PERSON FINDING SAME IS REQUESTED TO FORWARD IT IN AN UNSTAMPED ENVELOPE TO THE SECRETARY, MILITIA COUNCIL, OTTAWA, CANADA.

M.F.B. 39A.

To be made out in duplicate. H.Q. 54-21-23-[illegible]

9

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..... Divisional Signalling Corps

(2) Regimental Number 507606

(3) Full Name of Soldier..... William Mack.

(4) Place of Birth..... Superior ..... Wisconsin.

..... Station B. ..... U.S.A.

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

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

(b) Present Postal Address..... Nil

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

(8) Have you any children? ..... No

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

Also their names and ages..... Nil

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 Mr Mathew Mack.1620-56th St.Station B Superior. Wisconsin. U.S.A.

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

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

.....

(11) If your Mother is a widow.....Nil.....

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

(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.

.....Nil.....

.....

.....

(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.

.....Nil.....

(15) Are you insured?.....No.....

If so, in what Company?.None.....

Have you made arrangements for payment of your Insurance premium.....No.....

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

.....Lieut. A/Adjt.

SIGNAL TRAINING DEPOT C.E.F.

Officer Commanding.

Date.....8th.....February.....1917.

July 2nd.1919

Rank Sapper Date of att. February 8th.1917

Regimental Number 507606 Date of Discharge May 24th.1919

Unit 2nd. Can. Div. Sig.

Name MACK William,

Address 5720 Ogden Ave., Superior Wisconsin, Sta. "B" U.S.A.

B.P.C. District Office Montreal D.D. # 4

Attestation Form:-

Weight on enlistment:	155 pounds
Marks of Identification:	Scar back of right hand.
Rank at attestation:	Sapper

Casualty Form:-

Disease:	Neurasthenia. Existed on enlistment.

Miscl.:	Nil
Conduct:-	
Venereal Disease:	Nil
Conduct:	Good
Self inflicted wound:	Nil

B.P.C. Form 871.
20M-2-19.

Rank ..... Date .....

Regimental Number ..... Date of Discharge .....

Unit .....

Name .....

Address .....

S.P.C. District Office .....

.....

Alternation Form:-

Casualty Form:-

Conduct:-

B.C. Form 871.
SOM-S-19.

C.A.D.C. 5009A

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

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.

NAME OF SOLDIER (Block Letters) MACK . W.

REGIMENT 2nd Signals RANK Spr. No. 507606

Date of Examination in England 11-4-19 | Date of Examination in France

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? No

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 Yes
- (c) In France

Thompson Capt
A. D. D. S. M. D. No. 4

Signature of Dental Officer E O Deane Capt

L.L. 19226—M. & D. 7814.

5720 Ogden Ave.
Superior Wis.
U. S. A.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

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

To Whom Matthew Mack

Address ~~620, 56th St. Superior. Station B. Wis. U.S.A.~~

Rate $20.00

MAY 1 1917

By Whom Assigned Mack W.

Regtl. No. 507606.

Rank Spr.

Corps Signal Dpt.

PAYMENTS

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

CONSOLIDATED

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a.
18m.—4-17.
1772—39—819.

Sheet No. 2. Matthew Mack
(Assignee)

Name of Soldier Mack W.
Spr 507606. Signal Dpt.

L. L. Job 19227—M. & D. 7814.

MAY 1 1917

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April				
May				
June		H17562 H17561	40	Bd H17561 Canc Y.P.M.
July		J24200	20	20
Aug.		V30442	20	5720 Ogden Ave Superior Wis. U.S.A.
Sept.		T38308	20	20
Oct.		F43990	20	
Nov.		Y56437	20	
Dec.		Y57683	20	$160.00
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

CONSOLIDATED 4

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier_____

PAYMENTS.

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

P. 559

MARRIED OR SINGLE: Single

PLACE OF BIRTH: Superior Wisconsin U.S.A

NAME AND ADDRESS OF NEXT OF KIN: Mr. Mathew Mack

1620 · 56 Thist ST. N. Wis. U.S.A

RELATIONSHIP OF NEXT OF KIN: Father

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

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

REG'L No. 507606 / 507693 RANK Spr. NAME Mack William

IF IN PERMT. CORPS WHAT UNIT

UNIT 6 C.T.D. (28 Sqs Offt) TRANSFERRED TO Can Dep Corps DATE 1-5-18 AUTHORITY 87

PERMANENT FORCE ALLOWANCES TRANSFERRED TO DATE AUTHORITY

PLACE OF ATTESTATION Winnipeg TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION Feby 8. 1917 TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY $ 2.00 DATE EFFECTIVE 1/5/1917.

PAYABLE TO Mr. M. Mack. 1620. 56th Street Superior Stn B. Wis U.S.A. RELATIONSHIP Father.

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) EFFECTIVE REASON

DISCHARGE DATE AND PLACE REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

DATE	PAY No. OF DAYS	PAY RATE	PAY AMOUNT $	PAY AMOUNT c.	FIELD ALLOWANCE No. OF DAYS	FIELD ALLOWANCE RATE	FIELD ALLOWANCE AMOUNT $	FIELD ALLOWANCE AMOUNT c.	WORKING OR SPECIAL PAY No. OF DAYS	WORKING OR SPECIAL PAY RATE	WORKING OR SPECIAL PAY AMOUNT $	WORKING OR SPECIAL PAY AMOUNT c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No.	1 DATE	2 No.	2 DATE	3 No.	3 DATE	4 No.	4 DATE	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE CREDIT	BALANCE DEBIT	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
														27.	27.																27 –				C.
																																			C. from Canada
May	31	1st/10	34	10											34 10													20		20	41	10				
June	30	..	33	.											33 .	416	15/5	563	31/5					14	60	4	87	20		39	46	34	63			
July	31	..	34	10											34 10													20		20	48	73				
Aug	31	.	34	10											34 10	248	30/6							4	86										
																11	15/6							9	73			20	1	50	36	09	46	74		J.O.R. 1543 21-6-17
																788	15/8								57										
																318	31/7							4	73										
Sep	30		33												33 .	418	15/7							4	87										
			168	30										27	195 30	823	31/8							53	53	4	87	20	1	50	159	89				

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR 3	DR 4	BALANCE	DEFER-RED PAY	SEP. ALLOWE. ENG.
									100		
Oct 1st			~~35 40~~						35 40		
									20		
				1023 15/9 CETD		9 74					
Oct	C.P.		34 10	1088 30/9		4 87					
			34 10			14 61			20 34 89		
									120		

50766 Spr Mack Wm

DATE	PAY No. OF DAYS	PAY RATE	PAY AMOUNT $	PAY AMOUNT c.	FIELD ALLOWANCE No. OF DAYS	FIELD ALLOWANCE RATE	FIELD ALLOWANCE AMOUNT $	FIELD ALLOWANCE AMOUNT c.	WORKING OR SPECIAL PAY No. OF DAYS	WORKING OR SPECIAL PAY RATE	WORKING OR SPECIAL PAY AMOUNT $	WORKING OR SPECIAL PAY AMOUNT c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No.	1 DATE	2 No.	2 DATE	3 No.	3 DATE	4 No.	4 DATE	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE CREDIT	BALANCE DEBIT	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
MONTH PARTICULARS					CR. 1				CR. 2				PARTICULARS			DR. 1		DR. 2		DR. 3		DR. 4		BALANCE	DEFR-RED. PAY	SER. ALLCE. ENG.	MONTH PARTICULARS											
					~~168~~	~~30~~								~~27~~	~~195~~									170	34	89			~~55~~	~~33~~	~~44~~	~~84~~		~~1~~	~~50~~					
Nov	P	P			33																														
													1270	6 8 2	05	14	10/17							9	73										
													1373	"	~~20~~	10	~~/17~~							4	84										
Dec	P	P			34	10							6 A P											20											
													588	hq Dep R &		17	11/17							2	68										
													Q 3926	6 6 7 D		25	8/17							1	32										
													6 A P											20	43	39									
					67	10										18	60							40											
1918																								20											
													2264	"	12/12/17	3 Div Sig Co								4	46										
Jan					34	10							3476	1	12/17	C C Sig Coy								4	46										
													2461	1	/18	3 Sig Co								4	46										
													389	18	11/17	2 Div Sig Coy								13	38										
					34	10										26	76							20		30	73								
													AR 2772	19	7/18	3 Div Sig Co								3	57										
Feb					30	80							AR 2891	2	2/18	"								5	35										
																Can A P								20	32	61									
					30	80										8	92							20											
Mar	4	1			34	10										Can A P								20											
													AR 3157	15	2/18	3 Div Sig Co								4	46										
													AR 52	30	1/18	L O R								1	72										
													AR 1346	8	3/18	4 Bde C T A								4	46										
													AR 1618	23	3/18	" "								1	78										
					34	10										12	42							20		34	29								
																								~~220~~											

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

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

NAME, ADDRESS, RELATIONSHIP & AUTHORITY { WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.

Mrs M. Mack
1620 56th Street
Superior Stn B. Wis: U.S.A
Father

NAME:- MACK William
NUMBER:- 507606 L

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Sapper

UNIT AND TRANSFERS

ORIGINAL UNIT:- C.E.T.D. (12th Sig Draft)

DATE ACCOUNT FIRST OPENED:- 1.5.17

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
87	1.1.18		Can Sig: Pool
N.R. Apl. 1918			3 Div. Sig. Co.

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS { UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK

DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT
29/12	3549	2 Sig 40th	~~5 19~~				
24/3	6059	-	~~3 65~~				
4/4	91	Fwds	~~2 78~~				
14/4	112	D. Base	~~30 07~~				
			46 64				

DAILY RATES OF PAY AND ALLOWANCES

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

PARTICULARS OF RENDERING NON-EFFECTIVE:- To Canada 1/5 Fg 72044 NCCC 14/4/19 L&B Bal D-S 45 MD 4 DA F Brandon. 17/4/19

MONTH	PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
1918	Bal Fwd.							220			
Mar 31									34 29		
Apl.	Spl Pay	33 -		Can A.P.				20			
				A.R. 47. 8.4.18. 9 Bde C.F.A.	1 78						
				" 107. 23.4.18 "	1 78				43 73		
		33			3 56			20			
May	" "	34 10		Can A.P.				20			
				A.R. 178. 9 Bde C.F.A. 8/5/18	6 25						
				A.R. 293. do 22.5.18	3 54						
		34 10			9 82			20	48 01		
June	P & A	33 -		Can A.P.				20 -			
				A.R. 408 9 Bde C.F.A. 22/6/18	3 57						
				A.R. 348 do 7/6/18	7 14				50 30		
		33 -			10 71			20			
July	A.P.	34 10		C.A.P.				20 -			
				A.R. 477 9 Bde C.F.A. 6/7	4 46						
				A.R. 1649 66 School 27/7	4 46				55 48		
		34 10			8 92			20			
Aug.	S.P.	34 10		C.A.P.				20	69 58		
Sept	S.P.	34 10		C.A.P.				20			
		33 -						20			
				D.M.A.R. 2398 C.C. School 24.6.18	3 57						
				D.M.A.R. 2086 C.S.R.D. 9.8.18	3 57						
				10723. C.G.B.D. 31.9.18	1 78				73 66		
		33 -			8 92			20			
Oct	Pay.	34 10		C.A.P.				20 -	84 03		approved 17/4/19
				3203 3 C.C.S.C. 14.10.18	3 73						
		34 10			3 73			20 -			
								340			

NUMBER 507606. RANK Sh. NAME MACK. William.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Oct	Brought forward							360	84 03		
Nov	Pay	33		loan				20	97 03		
				3797 3 D. Sig Coy 1 11/18	373						
				Cash London 65066. ✓ 17 11/18	3407						
				663 3 D sig ✓ 14 11/18	486						
				4099 ✓ ✓ 14 11/18	933						
Dec	✓	3440		loan				20			
				4888 ✓ ✓ 3 17/18	466						
JAN 1919	✓	34 10		loan				20	24 77		
		10120			10018			60			
July	✓	3080		8907 3 ✓ ✓ 19/2	649						
				4018 ✓ ✓ 2/3	746						
Mar	✓	34 10		4723 2nd ✓ ✓ 18/3	373				24 99 / 49 67		
				5111 ✓ ✓ 3/3	365						
				5591 2nd ✓ ✓ 18/3	365						
				loan July + Mar				40	24 69		
		6490			2498			40 -			
Apr	✓	33		loan				20 -	37 69		
				6059 4 6 D 13 28/3	365						
				41 2.A. 26 Dw. 5/4	365						
				11 V K 666. 14/4	3407				60 80		
				409. " 21/4	1947						
				. 15 11 60 16							
				3 106 16 6 81. 9 15 11 66 16					23 15		
		33			6084			20 -			
				1364 7 5/19 " End	467				28 02		
					487						
Sept				AR 3549. 29/1 2/18. 2nd Leg by	5.19				33 21		
				S.O.S to Canada 13/5/19							
				K. 62. 68.							

Oq. 6
Da. F

4162

WAR SERVICE BADGE,
CLASS [illegible] a
278622

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

1. No. 507606
2. Rank. Sapper.
3. Name. Mack; William.
4. Unit. 2nd Can. Divisional Signals.
5. Date of Discharge 24-5-19 Place Montreal
6. Reason for Discharge Demobilization. Proceed 21-1-20
7. Authority. R.O. 1420 DD#4 D.O. Pt. II-162.
8. Proposed Residence after Discharge 572 Ogden Ave., Superior Wisconsin Sta. "B" U.S.A.

9. CERTIFICATE TO BE SIGNED BY SOLDIER.

I hereby acknowledge that at the undernoted place and date I received my discharge Certificate

M. F. W.? 4 B 39 Montreal

MAY 24 1919

W Mack

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place H.M.T. NORTHLAND Montreal

EMB. LIVERPOOL 13-5-19

Date MAY 24 1919

DISEMB. HALIFAX 23 5 19

Signature L. Gauvreau Major

(O. C. Discharging Unit.) Commanding Dispersal Station

M.F.B. 218a—300M.-11-18—1772-39-113.

LIST OF DISCHARGE DOCUMENTS.

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

1. Triplicate Attestation Paper (M.F.W. 23), or
   Particulars of Recruit (M.F.W. 133).
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. 5609a).
6. Field Conduct Sheet (A.F.B. 122.)
7. Proceedings on Discharge (M.F.B. 218a)
8. Discharge Certificate (M.F.W. 39)
   (Enclosed in special envelope (260M)).
9. Copy of Discharge Certificate (M.F.W. 39a).
10. Dispersal Certificate (C.D.S).
11. Equipment Statement Q.M.G. Form 20.O.S. 2
    and Clothing)
12. Last Pay Certificate (P.851).
13. Pay Book (A.B.64).
14. War Service Gratuity (Form M.F.W. 2595).
15. Sundry Documents.

Group 13

Checked by No. 3

Date 11/3/19

CANADIAN ENGINEERS ORIGINAL
4162
ORIGINAL

MEDICAL HISTORY SHEET

Surname Mack Christian Name William 507606

Examined on 8th day of February 1917 at Winnipeg Manitoba.

Approved by

Rank M.O.

Birthplace City or Town Superior County Superior Wisconsin U.S.A.

Apparent age 23 Years

Trade or occupation Telegrapher.

Height 5 feet 9 Inches

Weight 155 lbs.

Chest measurement Minimum 33 inches Maximum expansion 36 inches

Physical development Good

Small-pox Marks None

Vaccination Marks Arm Right Left / Number One

When Vaccinated last Ten years ago

(a) Marks indicating congential peculiarities or previous disease None

(b) Slight defects but not sufficient to cause rejection Tab 2 30/10/17 None

Date	Fit or Unfit	Examined for Re-Engagement	
		MOBILIZATION MEDICAL BOARD APPROVED FIT	M.O.
		S. G. Cumberland PRESIDENT	M.O.
		J. Macadam Jr. MEMBER	M.O.
		Brandt Capt MEMBER	M.O.
			M.O.
			M.O.

Date	Result	Vaccinations	
4.4.17		J W Shillington	M.O.
			M.O.
			M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.	
TAB 24.2.17		J W Shillington	M.O.
3.3.17		J W Shillington	M.O.
10.3.17		J W Shillington	M.O.

Enlisted on 8th day of February 1917 at Winnipeg Manitoba.

	Corps	Regt'l Number	Habits	Date
Joined on enlistment	Divisional Signalling Corps	507606		8th February 1917.
Transferred to	Sig Pool			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

Station	Date	Disease	Result
C.C.C. Witley	April 17th 1919	Neurasthenia	"A" Medically Unfit for Service

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

M. F. B. 313.
500M.—3-16.
H. Q. 1772-39-439.

J.M.C.

Surname Macke Christian Name M

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STATION	Date of Arrival at the Station	Dates of Admission into Hospital			Dates of Discharge from Hospital			DISEASE	Number of days in Hospital	Remarks on nature of the disease; how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer
		Day	Month	Year	Day	Month	Year				
Crowboro		23	5	14	26	5	14	Diarrhoea	3	Disch to Unit	H Hylton-Foxwell Capt

THIS FORM WILL BE USED FOR ALL RANKS 4162 9

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 N. Wing C.C.C. Witley DATE 15 — 4 — 1919.

1. 1 (a) Unit 2nd Cdn. Div. Sigs (b) Regimental No. 507606 (c) Rank Spr.

(d) Surname Mack. (e) Christian name William

(f) Home address 5720 Ogden Ave. Superior, Wis.; Sta. B. U.S.A.

(g) Next of Kin Mr. M. Mack. (h) Relationship Father.

(i) Address of Next of Kin same as above.

2. Age last birthday 25 yrs. Date of birth 24 — 5 — 1893.

3. Enlistment, or Appointment (if an Officer) (a) Place Winnipeg. (b) Date 17 — 2 — 17

4. Personal description: Est.

(a) Height 5ft. 9 in. (b) Weight 140 (stripped) (c) Complexion Medium

(d) Colour of hair brown. (e) Colour of eyes grey. (f) Identification marks, Scars, etc. Scar

across back of rt. hand — Scar — end of 1st. finger

5. Former trade or occupation Telegraphist.

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).	Years	Days
	2	59

	Periods	
	From	To
Canada	17 — 2 — 17	29 — 4 — 17.
England	7 — 5 — 17	30 — 10 — 17
France or other theatres of War	30 — 10 — 17	9 — 4 — 19.

7. Original disease, or injury NEURASTHENIA

(a) Date of origin Previous to Enlistment (b) Place of origin ~~At S. A.~~ Canada

(c) Cause Unknown

M. F. B. 227.

400M.—11-18.
1773-39-117.

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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.)

Neurasthenia (weakness - sleeplessness etc.)

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.)

Patient is well nourished - seems rather irritable, ~~[illegible]~~
No areas of anaesthesia, pain etc. Moto power good.
Deep reflexes - (Knee, ankle, biceps, supinator) Considerably increased. - Moderate dermatographia - hands shaking. Slight rather coarse tremor of extended hands.
Pulse Rate 78 - regular - arteries soft. Heart normal - sys - sounds clear
Subjective - Complaint of (1) Sleeplessness - difficulty in getting to sleep, restless etc. - Wakes several times at night, for no apparent reason. (2) Weakness - easily tired, feels languid. (3) Shortness of breath and palpitation on moderate exertion.

(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 (If pulse rate is abnormal, B. P. will be taken.) — Genito-Urinary System No (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

Urine :- no albumen or sugar
Vision Rt. 6/12+ — Left 6/12+
Hearing Normal.

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

Patient states that he was rather "Nervous" before enlistment. Was in France for about a year before hostilities ceased - on signal work. Occasionally exposed to shell fire etc. No definite history of "Concussion" etc. But On 18/9/18 he felt very tired, exhausted and irritable. Could hardly keep himself at work - felt like "throwing things and getting out". Admitted to hosp. for about a week, then back to duty. Has been able to carry on since But still has above described symptoms.

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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*).)

23/5/17 — Pneumonia — cured
Childhood — Scarlet fever — cured — no disability

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

Scar across back foot. Hand — Scar at index finger

11.—(*a*) Did the disabling condition have its origin before enlistment? Yes

(*b*) If so, has it been aggravated by Service? (If aggravated, give a description, as far as it is possible to do so, of the disabling condition at time of enlistment.)

Yes:- Experience of service have possibly increased symptoms.
No record of Condition on enlistment

12. Was the disability caused, or aggravated; (*a*) by intemperance, or improper conduct; or (*b*) by unreasonable refusal to accept treatment? (a) No (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? 6 months.

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

Nil.

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit? No
(If the answer is "yes" state nature of treatment required and probable duration)

16. Can the former trade or occupation be resumed? Yes
(If not, briefly state why)

17. Recommendations Nil.

L. G. Swain Capt. CAMC
Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

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

I, the undersigned 507606 Pte Wm. Mack 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

W Mack Pte 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.~~

Yes

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.~~)

Yes A.

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.)

(*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.)

R.T.C. Auth A.G. Tel 90830 of 11/11/18

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.

President.

PLACE C.C.C. Witley

DATE April 17th 1919

Members

TO BE COMPLETED WHEN TREATMENT IS REFUSED

I, the undersigned.....understand the nature of the treatment which it is recommended that I should undergo and refuse to accept it.

Witness..... Signed.....

Should the refusal of the invalid to accept treatment appear to be unreasonable, or should he decline to sign this statement the Board of medical officers should so state.

President

PLACE.....

DATE.....

Members

APPROVED BY

Assistant Director of Medical Services.

DATE.....

APPROVED BY

Director-General of Medical Services.

DATE.....

HEADQUARTERS A.D.M.S. 21 APR 1919 File CANADIAN TROOPS

Mr 1512 / JB.

M. OR S.

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

REGT. No. 507606 RANK Spr NAME (IN FULL) MACK. W.

AUDITOR | PAYMASTER

NEXT OF KIN — RELATIONSHIP 0

ADDRESS

IS SEPARATION ALLOWANCE PAID? No — DATE EFFECTIVE

TO WHOM PAID — RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY
TOS	13-5-19	DO 162 IgB AR 58

ORIGINAL UNIT C.E.F. CE — IF IN P.F. WHAT UNIT? — BLOCK LETTERS SURNAME FIRST

PLACE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

DATE OF ATTESTATION 8-2-17 — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY $ 20.00 — DATE EFFECTIVE 1-6-19

PAYABLE TO Matthew Mack — RELATIONSHIP — ANY CHANGE IN ASSIGNEE OR ADDRESS: Wlg Royal Bank of Canada Kenora Ont

ADDRESS 1620 56th St Superior Stat B Wis USA

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

DISCHARGED — PLACE Montreal — DATE 24-5-19 — REASON Demob. — AUTHORITY DO 162 IgB AR 58 — IF ENTITLED TO POST DISCHARGE PAY

MILITARY DIST. No. 4 JUN 20 1919 DEMOBILIZATION PAY DEPT.

BALANCE FROM PREVIOUS ACCOUNT

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	C.		TOTAL CREDITS $	C.	ACQUITTANCE ROLLS COL. No. 1	DATE	COL. No. 2	DATE	COL. No. 3	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
																						480					33	29	33	29	33	29	Dr Bal E.F.C.
1-5-19 to 28-5-19	28	1 10	30	80	35	00		135	80	Boat		Train		DCK 26786		4	87	5	00	72	64	20	00			4	40		106	91	4	40			Cr Clothing 35.00 W S & G 70.00
																																		A D 20.00 (for May 1919)
																																		P.A. Ops from 25/5/19 to 28/5/19 inc 4.40
																													140	20				
			Other Credits		W.S.C.	S.A.	Total			War Service Gratuity												500		Other Charges		W.S.G.	S.A.	Total		Balance Soldier Dependants				
					350			350																	70			70		279				
24.6.19																						440					440		275	60			
24/7/19																									70			70		205	60			5116601
24.8.19																									70			70		135	60			1079480 3
24.9.19																									70			70		65	60			1288304 4
																									65	60		65	60					1537927 5
																											350							

Final

200M-3-19.—L. L. 58788-M. & D. 9985.
M. F. W. 2596.
1772-38-1398.

W.S.

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

m

6249

Date of Assignment

May 1/17

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

20			

11 Ls-M 1 S.K.

PARTICULARS OF SEPARATION ALLOWANCE

No. 507606,

Rank Spr. Promoted Reverted Discharge

Soldier's Name W. Mack,

Battalion Signal Dft.

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name Matthew Mack,

Address 1620-56th St Superior

Change of Address Stat. B. Wis. W. Sd

1

2

3

4

Date 1917	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
					11539-N. 63.
Dec. 31	—		160	160	
Jan 18	J 66001		20	20	Fm
Feb. "	H 72382		20	20	
Mar	M 90628		20	20	
apr	E 4266		20	20	✓
May	N 19193		20	20	✓
June	Z 12983		20	20	✓
July	Z 24238		20	20	✓
Aug	Z 36675		20	20	✓
Sept	Z 50447		20	20	✓
Oct.	Z 65238		20	20	✓
Nov	Z 79806		20	20	✓
Dec	Z 97829 ✓		20	20	✓
Jan	Z 100472		20	20	✓
Feb	Z 123517		20	20	✓
Mar.	Z 138497		20	20	✓
Apr.	Z 5106		20	20	✓
May	Z 13197		20	20	-
			500	500	

A/c Closed 31/5/19.

Ret'd per Marchland.

Date 23/5/19. M.F.W.187 7/10 H

Clerk ... 29/5/19. MRoLeb 8705. Rw

M. F. W. 128
400m.—6-17—172-38-141
L. L. 22320—M. & D. 7693.

A STENCIL HAS BEEN MADE FOR THIS ACCOUNT

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

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

M. F. W. 128
400m.—6-17—1772-39-1141
L. L. 22320—M. & D. 7693.