TRIPLICATE

ATTESTATION PAPER.

No. 709095

Folio. Man

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

B

1. What is your surname? ..... MacEwen
1a. What are your Christian names? ..... Alden ~~Eldon~~ Osmond
1b. What is your present address? ..... Bathurst
2. In what Town, Township or Parish, and in what Country were you born? ..... * * *
3. What is the name of your next-of-kin? ..... John MacEwan
4. What is the address of your next-of-kin? ..... Bathurst N.B.
4a. What is the relationship of your next-of-kin? ..... Father
5. What is the date of your birth? ..... Jan. 11 1890
6. What is your Trade or Calling? ..... Farmer
7. Are you married ? ..... No
8. Are you willing to be vaccinated or re-vaccinated and inoculated? A.O.McE. ..... Yes
9. Do you now belong to the Active Militia? ..... No
10. Have you ever served in any Military Force? ..... No
If so, state particulars of former service.
11. Do you understand the nature and terms of your engagement? ..... Yes
12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE? ..... Yes

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, ... Eldon. O. MacEwen ....., 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.

Alden O. McEwen (Signature of Recruit)

Date ... Oct. 19th ..... 191 5 ..... (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, ... Eldon. O. MacEwen ....., 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.

Alden O. McEwen (Signature of Recruit)

Date ..... Oct. 19th ..... 191 5 ..... (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 ..... Sussex N.B. ..... this ..... 19th ..... day of ..... October 1915 ..... 191 .

..... (Signature of Justice)

M. F. W. 23
200 M—9-15
H. Q. 1772-39-841

Description Eldon O. MacEwen on Enlistment.

Apparent Age 25 years ..... months.
To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height ..... 5ft 10½ ins.

Chest measurement.
- Girth when fully expanded ..... 38 ins.
- Range of expansion .. 3½ ins.

Complexion ..... Medium

Eyes ..... Blue

Hair ..... Dark Brown

Religious denominations
- Church of England .....
- Presbyterian ..... Yes
- Methodist .....
- Baptist or Congregationalist .....
- Roman Catholic .....
- Jewish .....
- Other Denominations ..... (Denomination to be stated)

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

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

CERTIFICATE OF MEDICAL EXAMINATION.

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

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

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

Date ..... Oct. 19th ..... 191 5 J. A. McBurnett .....

Place ..... Sussex. N.B. .....

Medical Officer.

* Insert here "fit" or "unfit."

NOTE.—Should the Medical Officer consider the Recruit unfit, he will fill in the foregoing Certificate only in the case of those who have been attested, and will briefly state below the cause of unfitness:—

.....

.....

.....

.....

CERTIFICATE OF OFFICER COMMANDING UNIT.

..... Eldon O. MacEwen ..... 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)

LIEUT.-COLONEL.
COMMDG. 104th O/S BATN. C. E. F.

Date ..... Oct. 19th 191 5

REGIMENTAL DOCUMENTS

NAME Mac EWEN Alden Osmond REGT. NO. 719095 UNIT 78th Bn 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)					
	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)					DISCHARGE
1	DENTAL HISTORY SHEET (M.F.B. 465)					Category
3	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					
	MEDICAL EXAMINATION (M.F.W. 129)					
1	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					Demob.
	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)				13570	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)					
2.	Misc					5-3
2	Pay Cards					18-3
						30-3
						2

W. 2589
100M-11-18
1772-33-1377

To be made out in duplicate.

H.Q. 54-21-23-53

ORIGINAL

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 104th. Overseas Batt. C.E.F.

(2) Regimental Number 709095

(3) Full Name of Soldier Alden Osmond McEwan

(4) Place of Birth Middle River, Gloucester Co. N.B.

(5) Are you married, or not ? Single

(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.

200M.—3-16.
1772 39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive? John McEwan

If so, state name and address Middle River Gloucester Co. N.B.

(10) Is your Mother alive? Yes

If so, state name and address Elizabeth Alice McEwan

Middle River, Gloucester Co. N.B.

(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? No

If so, in what Company?.....

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

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

C W Cavers Lt
Officer Commanding.

Date APR 19 1916

104th "OVERSEAS" BATTALION, C.E.F.

C.A.D.C. 5009A

In Wing B. Groups

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) MACEWEN A. G.

REGIMENT 78th Bn RANK Pte No. 209095

Date of Examination in England 29/11/19 | Date of Examination in France

PRESENT DENTAL REQUIREMENTS

1. FILLINGS
2. EXTRACTIONS 17. 32.
3. CROWNS
4. DENTURES
   - (*a*) Full Upper
   - (*b*) Part Upper
   - (*c*) Full Lower
   - (*d*) Part Lower

ASSISTANT DIRECTOR OF DENTAL SERVICES M. D. NO. 6 23 JAN 1919

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~~

Signature of Dental Officer A A Grafat Major

Army Form B. 103. -2- Regimental Number 709095

Casualty Form—Active Service.

Regiment or Corps 78th Can Inf Battalion

Rank Pte Surname MacEwen Christian Name A.O.

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 W.S.B. CLASS A. Signature of Officer

Report: Date	Report: From whom received	Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks: Taken from Army Form B.213, Army Form A.36, or other official documents.
		Embarked ...			
		Disembarked ...			
8.3.19	Unit	Granted 14 days Leave to U.K.		9-3-19	B213 D.O.50/19
13.3.19	Lon Gaz	Awarded Military Medal			31227 D.O. 25/19
29.3.19	Unit	Rejoined Unit from leave		25.3.19	B213
26.4.19	Unit	Duty with Jnr C# 4th Can Div		22-4-19	B213
		Proceeded to England. APR 26 1919			
A.A.G.		Record List.		5.5.19	D.O.54/19
					Lieut. for Lt Col. A.A.G.
					Canadian Section, G.H.Q. - 3rd,
S.O.S. ON PROCEEDING TO CANADA.					
P.T.O. No. 129		FOR OFFICER COMMANDING, "M" W. No. C.C.C. LIEUT.			16-8-19.

(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 (S.011) C. P. & S., Ltd., Form B./103 B/1807. F.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				

NEW BRUN. REGT.

R-122-1.

Rank | Name MAC EWEN, Alden Osmond | Reg'l No. 709095

Unit 104th Bn. | If in perm. Corps, What Unit? | Married or Single Single

Place and Date of Enlistment Sussex.N.B,19thOct.1915. | Place of Birth Bathurst. N.B.

Name and Address, Next-of-Kin John MacEwen.

P.O. Bathurst. N. B. Canada. | Relationship Father.

Assigned Pay Monthly $ | Payable to

Relationship

Separation Allowance $ | Payable to

Relationship

Discharge, Date and Place | Reason | Character

M[illegible] N.B. No 271.85

File R.L.

Category O. R. Can

H. W. & V., Ld.—7165-16.

MANITOBA REGT.

Report. Date.	Report. From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS. Taken from Official Documents.
		Arrived in England. S.S. Olympic. 6th July 1916.			
25.7.17	104th Bn	SOS on transp to HQ 5th Div	Pte	Witley	19.7.17	Pt II AO 180. 5 Div RO 2016 a/25.7 TOS 5 Can Div Pt II 204 d/23.7.17
23.7.17	5 Can Div	Attd to 104th Bn	"	"	19.7.17	Pt II 204
23-3-18	5th Can Div	S.O.S. on transfer to Gen Depot	Pte	Witley	21.3.18	Pt II 013.
2.4.18	Gen. Depot	T.O.S from HQRS. Witley	Pte	Sicliffe	30.3.18	D.O. 78
6-4-18	17th Res	TOS from Genl Depot	"	Bshott	5.4.18	— 82 p 82 d/6.4.18 Genl Depot.
22.4.18	"	S.O. Scn transfer to 15th Res Bn	"	"	20.4.18	— 95 p 96 - 13 Res. 25/4/18
3.6.18	13 Res	S.O.S to 26 Bn Overseas	Pte	"	1.6.18	~ 129. p 49 - 26 Bn 1/6/18
22.8.18	26 Bn	S.O.S. to 78 Bn	Pte	Field	14.8.18	~ 73. 78 Bn. Pt. 2.0-80 d 27 8
9-4-19	78th Bn	Awarded the M.M for bravery in the field	Pte	— " —		Pt II 25 (Lon Gaz 31227 d/13-3-19

CHECKED 1918

709095 MacEwen, A. O.

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.
11.5.19	78 Bn.	Ass to Class I	Letharn	5.5.19	P.B.O.3rd C.R.L. DO Pt II 52 d/19-5-19.
		Proc to England.		26/4/19.	
		102-B-54	Sailing	16/8/19	
31-7-19.	M.R.D.	T.O.S from France	Witley	26-7-19	— 212.
18.8.19	M Wing	S.O.S to Canada		16.8.19	D.O. 130

Mac Ewen, Alden Osmond.

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

M. F. W. 54.
15/m. 10-15.
H.Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps 104th Bn-Ad.

Regimental No. 709095 Rank Pte Name Mac Ewen, Alden Osmond.
C. E. F.

Enlisted (a) 19-10-15 Terms of Service (a) Dof War Service reckons from (a) 19-10-15

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) (a) Civil Farmer

W.S.B. CLASS. A.

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	Halifax	28-6-16	S.S. Olympia
		Disembarked	Liverpool	5-7-16	
25-7-17	Ob. 104	Transferred to Hqrs. Sub-Staff 5th Canadian Division	Witley	19-7-17	B.D.O. II 180. 5 Div R.D. 2016 Captain, Adjutant, for O.C. 104th Canadian Inf. Bn.
28-7-17	Ob. 104	attached to 104th Bn Details	Witley	19-7-17	B.D.O. II 183
23-7-17	5 Can Div.	T.O.S. Hqrs. A.S. 5 Can Div. and attached 104 Bn	Witley	19.7.17.	Part II. D.O. 204.
22.3.18	do	S.O.S. on posting to General Depot	Witley.	24.3.18	Part II # 13 Chas Thompson Lieut. Camp Commandant.
2-4-18	Jen Depot.	T.O.S. Jen Depot	Shfft.	30/3/18	Pt-II. D.O. 78. 2-4-18.
6/4/18	✓	S.O.S Jen Depot transfer to 17th Res B'n Shorn	✓	5/4/18	✓ ✓ 82 6-4-18 M. F. Willcocks Captain for O.C. Can. General Depot

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

[P.T.O.

709095

R.O. MacEwen.

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.
6.4.18	OC. 17th	T.O.S. from Can. Gen. Depot. Shoreliffe	Bramshott	5.4.18	Pt. II O. 82.
22-4-18	O.C. 17th	S.O.S. on transfer to 13th Can. Res. Bn.	Bramshott	20-4-18	PT.II.Order 95 Lieut., Asst. Adjt., 17th Canadian Res. Batt.
25-4-18	OC 13th Res. Bn	T.O.S. 13th Res. Bn on transfer from 17th Res Bn.	Seaford	21-4-18	B.O. 96, Pt 2.
~~11-5-18~~	~~OC 13th Res. Bn~~	~~S.O.S. 13th Res. Bn on proceeding O/S to 26th Bn.~~	~~Bramshott~~	~~10-5-18~~	~~B.O. 110, Pt 2.~~ ~~K.B. Lloyd Lieutenant, Adjutant, 13th Canadian Reserve Bn. NEW BRUNSWICK REGIMENT.~~
3-6-18	OC 13th Res. Bn	S.O.S. 13th Res. Bn on proceeding O/S to 26th Bn.	Bramshott	1-6-18	B.O. 129, Pt 2. J.R.B. Lieutenant, a/Adjutant, 13th. Canadian Reserve Bn. NEW BRUNSWICK REGIMENT.
3/6/18	C.C.R.C.	T.O. 26th Bn.	France	3/6/18	K.R. 820.49.
17.6.18	" "	To C.C.R.C.	Field	17.6.18	" 1275
17.6.18.	CCRC 2	Arrived CCRC 2	"	17.6.18.	NR. A 9IO.
12.8.18	A.G.	Trans to 78 Bn and S.O.S. 26 Bn	Fld	14.8.18	K.R. 848 B20.73 d/22/8/18.
"	"	TAKEN ON STRENGTH 78th BN		15 AOU 18	D.O. 79/80/18 26 AOU 18
17 AOU 18	Unit	Joined Unit	FIELD	15 AOU 18	B213.

CERTIFIED CORRECT 6 JUN 1918 CAN. RECORDS, LONDON

L. L. Job 4503.—M. & D. 6832.

245

ASSIGNED PAY

MILITIA AND DEFENCE

M. F. W. 11.
50m.—6-16.
H. Q. 1772-39-818.

SEPARATION ALLOWANCE

Name Mrs John Mc Ewan

Address Middle River
West Bathurst
N.B.

Relation to Soldier wife, child or mother } 20th Apr. 1. 1917.

Name of Soldier McEwan a00.

Regtl. No. 709095

Rank Pte

Corps 104th Bn

To what Corps belonging when called out }

2m. 20/3/17. Jam. 21/4/17.

PAYMENTS

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

CONSOLIDATED 6 ACCOUNT

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12a.
50m.—7-16
1772—39—819.

Sheet No. 2. Mrs J. McEwan
(Assignee)

PAYMENTS.

Name of Soldier McEwan A. D. 6th
Pte. 709095. 104th Bn

L. L. Job 5470—Req. 6888.

20 00. April 1917

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April				
May		78622	40	40 W
June		M18721	20	20. Au
July		M23681	20	B.
Aug.		8 29936	20	
Sept.		2 36621	20	09
Oct.		6 43162	20	
Nov.		W49373	20	180
Dec.		M60605	20	
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

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.				

Number 709095 Rank Pte

Surname MACEWAN

Christian Name Alden Osmond

Units 26th Bn. Can. Inf. Theatre of War France

Date of Service 2-6-18

Remarks Bn. 19

Latest Address West Bathurst
Gloucester Co
N. B

Roll No. B Page 8995.

DESP. DEC 10 1921
REGN. NO. 4V2468

M. M.
L.G. #91227
10-3-19.

H. Q. R.b.
M. D. No.
T. O. S. 19
D. O. Pt. II of
S. O. S. 28-8-1919
Reason
Auth.

Surname Mac Ewen.
Christian names Alden. O.
Regtl. No. 180138. 709095. Rank Pte.
Unit 104th Bn.

S.O.S. Dis. 31-8-196
D.O.S. Demob 1-11-19 + 6 DW

Next of kin Mac Ewen. John. Relationship Father.
Address Bathurst, N. B.

Also notify:

BORN—Place Canada. Bathurst. N.B. Date Jan 11th 1890.
ATTESTED—Place Sussex N.B. Date Oct 19th 1915.
O/S
R/C 23-8-1 9398 R.b.
5-2

W. 22—50M.-3-19. 1772-39-839.

No. 180138 RANK Pte NAME Mac Ewen. A. O.
709095 apr. Mayfish

T.O.S. 16-10-15 UNIT 104th a/B. Battalion C.E.F.
(A.O.C. 19-10-15)

M.D. 6

PAID FROM	PAID TO	SIG. OR REC'T
1915	1915	
Oct 16	Oct 31	✓
nov		✓
dec		✓
1916		
jan		✓
feb		✓
mar		✓
apr		✓
may		✓
June		W
July		W

PROMOTIONS, TRANSFERS, DISCHARGES, ETC.

PARTICULARS	AUTHORITY

UNIT SAILED
JUN 28 1916

P. 559

MARRIED OR SINGLE: S

PLACE OF BIRTH: Bathurst, N.B.

NAME AND ADDRESS OF NEXT OF KIN: John MacEwan, Bathurst, N.B.

RELATIONSHIP OF NEXT OF KIN: Father.

NAME AND ADDRESS OF NEXT OF KIN:

RELATIONSHIP OF NEXT OF KIN:

SEPARATION ALLOWANCE MONTHLY $ Nil EFFECTIVE (DATE)

PAYABLE TO:

RELATIONSHIP OF DEPENDANT:

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY
SOS Gen Dep	21 3 18	B013
		23 3 18

ADMISSIONS TO HOSPITAL, &c.

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

REG'L NO. 709095 RANK Pte. NAME MacEwen. Alden Osmond

IF IN PERMT. CORPS / WHAT UNIT: UNIT 104th Bn TRANSFERRED TO 5th D.A.C.D. S/S DATE 1/11/17 AUTHORITY MR

PERMANENT FORCE ALLOWANCES: TRANSFERRED TO [illegible] DATE 4/11/16 AUTHORITY

PLACE OF ATTESTATION Sussex, N.B. TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION 16-10-15. TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY $ 20.00 DATE EFFECTIVE April 1st 1917

PAYABLE TO Mrs John McEwan Middle River, West Bathurst N.B. RELATIONSHIP Mother Canada

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
1916																																			
July 1	Balance from Canada													22	22 00																22 00				
July	31	1 00	31	00	31	10	3	10							34 10	34	8 3/10	81	17 7/10			129	3 3/10	9 73	19 46		9 73			38 92	17 18				
Aug	31	1 00	31	00	31	10	3	10							34 10	180	14 8/10							4 87						4 87	46 41				
Sept	30	1 00	30	00	30	10	3	00							33 00	237	31/8/16	287	15/9/16					14 60	9 73					24 33	55 08				
Oct	31	-	31		31	-	3	10							34 10	337	30-9-16	381	15 10/16					9 73	7 30					17 03	72 15				
Nov	30	1 00	30	-	30	10	3	-							33 -	424	30 10/16							9 73						9 73	95 42		75	20 42	
Dec 31	31	1 00	31		31	10	3	10							34 10	472	15/11/16							9 73						19 46	110 06		90	20 06	
1917			18	40												530	30/11/16							9 73											
Jan	31	1 00	34	10											34 10	596	15/12/16							2 44						19 47	124 69		105 -	19 69	
		10														628	27/12/16							17 03											
Feb	28	1 00	30	80											30 80	716	15 1/17							9 74						9 74	145 95		120 -	25 75	
		10														802	12-2-17							12 16											
Mch																891	27-2-17	999	26-3-17					9 74	9 73										
Mch 31	31	1 00	34	10											34 10	836	13-2-17	945	12-3-17					4 89	7 30					43 80	136 05		135 -	1 05	
Apl	30	1 00	33	-											33 -													20 -		20 -	149 05				
Carr Forw			334	40										22 00	356 40									124 10	53 52		9 73	20 00		207 35	149 05		135 00	14 05	

709095 · Pte · Mac Ewen · A · O Ass Pay @ 20

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
Bro Forw			334	40										22 00	356 40
May	31	1 00/10	34	10											34 10
June	30	1 00/10	33	00											33 00
July	31	1 00/10	34	10											34 10
Aug	31	1 00/10	34	10											34 10
Sep	30	1 00/10	33	·											33 ·
			502	70										22 ·	524 70

ACQUITTANCE ROLLS 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date
		35	17.4.17				
		85	27.4.17				
		138	15.5.17				
		198	28.5.17				
		295	29.6.17				
		246	13.6.17				
		308	24.4.17				
		350	13.4.17				

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
124 10	53 52		9 73	200 00		207 35	149 05		135 00	14 05	
7 30											
9 73				20 –		37 03	146 12		135 ·	11 12	
4 87											
7 30				20 ·		32 17	146 95		135 ·	11 95	
7 30				20 ·		24 30	153 45		135 ·	18 45	
4 84				20 ·		24 84	162 98		135 ·	24 98	
4 30											
4 30				20 ·		34 60	161 38		135 ·	26 38	
180 07	53 52		9 73	120 ·		363 32	·				

MONTH	PARTICULARS	CR. 1	CR. 2
Sep 30	Balance B/F	~~161 38~~	
Oct	Rem Pay	34 10	
		34 10	
Nov	44a 9a 19.7.17 to 31.10.17 105 days	15 75	
	20a 23.7.17		
	A Pay	37 50	
Dec	P Pay	38 75	
		92 00	
Jany	P. Pay	38 75	
		38 75	

PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED PAY	SEP. ALLCE. ENG.
					161 38		135 ·
Can Ass Pay			20		145 48		135 ·
			20				
aR 573 24/9/17 5 Det.	4 84						
" 518 24/9/17 5 Det.	4 84						
" 5587 15/10/17 "	9 73						
" 589 31/10/17 "	4 84						
" 628 13/11/17 "	4 30						
aR.							
DuaR 443 26/8/17 "	4 30						
DA 404 14.8.17 "	4 30						
Dec aR							
	46 24						
aR 660 28 11 17 "	9 73						
" 724 17/12/17	9 73						
" 690 6/12/17	7 30						
Ass pay							
	26 76						

MONTH	PARTICULARS	CR. 1	CR. 2
			6 2
Feby	Balance Forward		
	A Pay 35		
Mar	A Pay ~~35 75~~		
	1 20 A9 25		
	21-31 AR 12 10		

PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED PAY	SEP. ALLCE. ENG.
					143 23		135
aR 462 10/1/18 5 Details	4 30						
" 495 28/1/18 "	9 73				141 20		
aR							
	17 03						
6 aR							
aR 864 25/2/18 5 Det	14 03						
" 1036 11/3/18 " CJ	4 30						
	24 33						
" 1134 14/3/18 " "	9 73	34 06					
	34 06				154 24		135

13-2-18.

* Strike out whichever inapplicable.

K

ASSIGNED PAY. * ~~ENGLAND~~ OR CANADA.	SEPARATION ALLOWANCE. * ENGLAND OR CANADA.
EFFECTIVE DATE:- 1/4/14.	EFFECTIVE DATE:-
AMOUNT:- 20 00	AMOUNT:-

NAME:- MAC EWEN. Alden. Osmond.

NUMBER:- 409095.

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 John McEwen. Mother
Middle River
West Bathurst. N.B.
Canada.
Stopped Eff 1-8-19

Ao. Mil Medal Lon Gaz 13/3/19
20 25-9/4/19-18th Bn

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Pte

UNIT AND TRANSFERS

ORIGINAL UNIT:- 104th Bn.

DATE ACCOUNT FIRST OPENED:- 1/4/14

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			5th D.H.Q. S/S.
B.O. 82.	5/4/18	1/4/18	17th Res
49. 2/6.	1/7.	8/3/7	26 Bn E
80 15/8/18	1/9/18	20/9/18	78 Bn

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

Canada 31/7/19

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1 00	25		
B013 23 3 18	1 00	10		

Ld Bal C. 198 20

PARTICULARS OF RENDERING NON-EFFECTIVE:- 12150 E 28/7/19 B Shott Yo Witley m D6 LHC - Cr. 198 20

MONTH	PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
31/3/18	Bal forward.								154 24	135 00	
	A.P.	33		Can AP				20			
				AR 64 9/4 7th Res	9 43						
				G4005/3 2/4	32				154 19	135	
		33			10 05			20			
May	PP	34 10		AP Apts & May				20			
				DR564 2/5 13 Res	4 30						
				- 634 30/5 ✓	2 43				161 56	135	
		34 10			9 73			20			
June	P.P.	33		C.A.P.				20			
				AR 1445. 6/5/18. 12 Res	9 73					135	
				DW 930 24/6 m CCRC	4 42				160 37		
JUL 1918	P. Pay	33 34 10		Can. Ass. Pay	14 19			20 20			
				AR 1228 2nd CCRC 11/7	4 46						
				1488 26/7 ✓	3 57				166 44	135	
		34 10			8 08			20			
Augt	P. Pay	34 10		Can. Ass. Pay				20			
				AR 1631 2nd CCRC 5/8	3 57				176 97	135	
		34 10			3 57			20			
Septr	P.P.	33		C.A.P.				20			
				A.R. 623 12 C.R.B. 7.9.18	3 57				186 40	135	
		33			3 57			20			
	Oct. P.P.	34 10		C.A.P.				20	200 50	135	adj. agreed
		34 10						20			
Nov	P.P. Nov Dec Jan	101 20		AR 908 - 9/11/18 - 12 Bde	3 73						
				" 975 - 20/11/18 - "	13 06						
				" 1110 - 12/12/18 - "	3 73						
				CAP Nov Dec Jan				60	221 18	135	
		101 20			20 53			60			

COMPILED BY C B Greenham

CHECKED BY Mayo

NUMBER RANK NAME

MONTH 1919	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Feb	Bal Forward								221 18	135 -	
	P.P. Feb/Mar.	6 4 90		aR 1687 - 11/19 - 12 Bde	3 73						
				" 12444 - 16/1 - "	3 73						
				DNaR 1062 - 1/12/18 - "	3 73						
				aR 1299 - 1/2/19 - "	15 73						
				" 1367 - 13/2 - "	3 73						
				Cal Feb/Mar.	18 65			40			
				aR 1438 - 1/3 - 12 Bde	3 65						
				" L/C 531 - 6/3 - "	68 13						
				" 3540 - 6/3 - "	9 13				146 52	135	
		6 4 90			99 56			40			
Apr	PP	33		Cal				20	159 52		
				aR 26 - 3/4 - 12 Bde	3 49				173 62		
				" 204 - 27/4 - "	3 49						
May	PP	24 10		Cal				20	166 64		
		67 10			69 98			40			
June July	PP.	67 10		aR 23. 14/5. Edm. Y.M.C.A.	4 99						
				Cal.				40	193 74		
				aR 75. 17/6 "	5 11				180 64		
		67 10			13 10			40			
	Int on def Pay	~~17 56~~									
		17 56							19820	135	
		17 56			—						
Aug		—		aR 9581 7/8/19 L/C Reg	9 73				188 47		
					9 73						

Ld S Canada
LR 102 16/8/19 MD 6

War Service Badge
Class "A" No. 293003

SHORT FORM.

PROCEEDINGS ON DISCHARGE

(Demobilization.)

O. G. 1
D. A. B.

1. No. 709095
2. Rank. Pte
3. Name. MacEwan Alden Osmond.
4. Unit. 78th Bn.
5. Date of Discharge | 31 05 | Place Halifax NS

6. Reason for Discharge ..... Demobilization

7. Authority. R.O. 1420

8. Proposed Residence after Discharge ..... West Bathurst, Gloucester Co. N.B.

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.? .....

A O MacEwan
Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place ..... HALIFAX, N.S. AUG 24 1919

MEDICAL DOCUMENTS FORWARDED TO
Date 16/9/19
~~S. C. R.~~
B. P. C.
ON 16-9-19
Signature .....

Major
O. C. Dispersal Station "B"
(O. C. Discharging Unit.)

Emb. S.S. Belgic

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. 3).
11. Equipment (Statement Q.M.G. Form (D.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.

B

Group.....

Checked by No. 24

C.A.T.M.

Date 15-8-19

Date of Enlistment

11 L 6 Mc 14

S.K.

MILITIA AND DEFENCE

Separation and Assigned Pay Branch M

OVERSEAS CONTINGENTS

4295

Date of Assignment

Apr 1/17

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

20			

PARTICULARS OF SEPARATION ALLOWANCE

No. 709095.

Rank Pte Promoted Reverted Discharge

Soldier's Name A. O. McEwan - McEwen

Battalion 104th Batt'n

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name Mrs John McEwan

Address Middle River, W. Bathurst N.B.

Change of Address

1

2

3

4

Date 1917	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
Dec 31	—		180	180	
Jan 1/18	G 1188		20	20	
Feb.	G 72082		20	20	
Mar.	L 94748		20	20	
Apr.	E 2417		20	20	
May	Y 19303		20	20	
June	J 21847		20	20	
July	R 28561		20	20	
Aug	L 39252		20	20	
Sept.	Q 44066		20	20	
Oct	T 61305		20	20	
Nov	P 56820		20	20	
Dec	S 66675		20	20	
Jan 19	S 73278		20	20	
Feb.	Q 78004		20	20	
Mar	L 90722		20	20	
Apr	L 2848		20	20	
May	L 7070		20	20	
June	D 10215		20	20	
July	E 12027		20	20	
Aug	H 13310		20	20	
			580		

O/S 11-A-24

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

AUDITED.

A/c Cl'gd 31-8-19

Ret'd per ..... Belyea

Date 23/8/19 M.F.W.187 12/9/19

Clerk ..... R. Smith

Can

M.R.O. 113675 Aleah

A STENCIL HAS BEEN MADE FOR THIS ACCOUNT

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

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

M. F. W. 128
400M.—6-17—1772-39-1141
L. L. 22320—M. & D. 7493.

AUDITOR | PAYMASTER

Belgic 23-8-19

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

M. OR S. | REGT. No. 709065 | RANK Pte. | NAME (IN FULL) Mac Ewan, A.D. (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN | RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? | DATE EFFECTIVE

TO WHOM PAID Nil. | RELATIONSHIP

ADDRESS

L.P.C.

PARTICULARS	EFFECTIVE DATE	AUTHORITY
2nd	1-8-19	Des 241

ORIGINAL UNIT C.E.F. | IF IN P.F. WHAT UNIT? | 78th Bn.

PLACE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

DATE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

ASSIGNED PAY $ 1.20.00 | DATE EFFECTIVE 1-9-19

PAYABLE TO Mrs. J.M. Mc Ewan, | RELATIONSHIP | ANY CHANGE IN ASSIGNEE OR ADDRESS Bank of Montreal Bathurst N.B. 8-10-19

ADDRESS Enidale Rivers, Bathurst N.B.

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE

DISCHARGED | PLACE Halifax | DATE 31-8-19 | REASON Demob. | AUTHORITY Des 254 | IF ENTITLED TO POST DISCHARGE PAY

5-881

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.	OTHER CREDITS $	OTHER CREDITS C.	$	C.	TOTAL CREDITS $	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.	$	C.	TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	BALANCE CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT					198	20																														Bal. Cr. Ch. All Ads. D.G.
31/7/19							35 70	00 00	337	20																										Col. Hk. On Boat Cr. 3
31/8/19	31	110	34	10													4	87 5	00	297	70		20	00			9	73			337	30	V			Ch. #148635 Ass't. Aug. Ad. Aug.
WAR SERVICE GRATUITY W.S.G. S.A.																	WAR SERVICE GRATUITY W.S.G. S.A.																		
	183			420					420	00													70	00							350	00				Tot Pay. D.D.G.
																							70	00							280	00				1508268 9-10-19
																							70	00							210	00				1509396 24-10-19
																							70	00							140	00				1777127 25-11-19
																							70	00							70	00				1783879 22-12-19
																							70	00							Nil					281-20. #1783216
			420	00					420	00													420	00							420	00				

Certified that all payments due on the [illegible] have been paid.

[illegible] CAPT.

[illegible] Officer Pay Services. M.D. 6

OCT 4 1919

200M-3-19.—L. ... 5878S-i... & D. 9985.
M. F. W. 2.96.
1272-39-1390.

"M" Wing "B" Group

Original

THIS FORM WILL BE USED FOR ALL RANKS

MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" issued by the B.P.C. and instructions issued by Militia H.Q., Ottawa, will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of Sections 1 to 17 of this Form and will obtain the signature of the invalid to the "Statement," page 3. The President of the Board of Medical Officers is responsible for the proper completion of sections reserved for recording the "Opinion of the Medical Board."
3. In answering the questions, Medical Officers will carefully obtain and record the invalid's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the invalid concerned, from witnesses, or from documents, Regimental or otherwise.
4. Special care is required in answering question 9. Read the questions carefully. All questions must be answered.
5. If space provided under any section is insufficient add another sheet. Such sheets must be initialled by the Medical Board.
6. A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board."
7. Under no circumstances may information other than that in sections 7, 8, 9 and 10 be communicated to the invalid, directly or indirectly.
8. The nomenclature of diseases must be followed, if possible, as described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London (1915), by Messrs. Harrison & Sons.

STATION Witley DATE 2-8-~~20/4~~/19

1. 1 (a) Unit 48th Bn. (b) Regimental No. 709095 (c) Rank Pte.

(d) Surname Mac EWEN (e) Christian name Alden Osmond.

(f) Home address Westhurst. N.B.

(g) Next of Kin John Mac Ewen. (h) Relationship Father

(i) Address of Next of Kin Westhurst. N. B.

2. Age last birthday 29 Date of birth 11th January 1890.

3. Enlistment, or Appointment (if an Officer) (a) Place Sussex N.B. (b) Date Oct 19th 1915.

4. Personal description:

(a) Height 5 - 10 3/4 (b) Weight 164 Lbs. (stripped) (c) Complexion Medium

(d) Colour of hair Dark (e) Colour of eyes Blue (f) Identification marks, Scars, etc. one vac scar left arm.

5. Former trade or occupation Farmer.

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
	3	287

	Periods	
	From	To
Canada	19. 10. 15.	28. 6. 16.
England	28. 6. 16.	2. 6. 18
France or other theatres of War	2. 6. 18	26. 7. 19.

7. Original disease, or injury HAEMORRHOIDS.

(a) Date of origin 1916. (b) Place of origin England.

(c) Cause Service conditions.

M. F. B. 227.

400M.—11-18.
J772-39-117.

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.)

(Haemorrhoids) Irritable rectum, bleeding piles which prolapse at stool.

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.)

There is an internal pile mass which protrudes from the anus when he has been down, & he states he now has some difficulty in replacing them & that occasionally they rupture & bleed considerably. General condition is good.

Subjectively - There is slight irritability of the rectum & little pain on defecation.

(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.

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

Condition came on in early part of 1916 & have been very much worse during the last year.

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*).)

Catarrh 27.11.15 La Grippe 4-1-16 to 8.1.16. Mumps
Pneumonia aet 16. Mumps, measles when a child

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

See sec H-7.

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

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

na

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? Two months if treated.

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

yes. Should have surgical attention.

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

17. Recommendations

J. Pitchard Capt Canc
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 Aldon Osmond MacEwen 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

AAM

A. O. MacEwen Rank. Pte
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 we concur.

19. Is the invalid fit for

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

20. It is certified that the invalid

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

yes operation for haemorrhoids - 6 wks - 2 months

(*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 D A G 2d 40 B 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.

R.O. Dwyer Capt *President.*

PLACE Whitley

DATE 2-8-19

A. H. Naylor Capt CAMC } *Members*

TO BE COMPLETED WHEN TREATMENT IS REFUSED

I, the undersigned Alden Osmond MacEwen understand the nature of the treatment which it is recommended that I should undergo and refuse to accept it until arrival in Canada.

Witness J. S. Litchard Capt CAMC Signed A. O. MacEwen

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.

Refusal not unreasonable

R.O. Dwyer Capt *President*

PLACE Whitley

DATE 2-8-19

A. H. Naylor Capt CAMC } *Members*

APPROVED BY

C. V. Mills Capt CAMC

for Assistant Director of Medical Services.

DATE 2-8-19

for A.D.M.S. CANADIAN TROOPS, WITLEY. CAPTAIN.

APPROVED BY

Director-General of Medical Services.

DATE

A.D.M.S. HEADQUARTERS CANADIAN CORPS CAMP 2 AUG 1919 WITLEY SURREY

CERTIFIED TRUE COPY

ORIGINAL. 180138

MEDICAL HISTORY SHEET.

ORIGINAL

Surname MacEwen Christian Name Alden Osmond

Examined on 19th day of Oct. 1915 at Sussex N.B.

Birthplace City or Town Bathurst County N.B.

Apparent age 35

Trade or occupation Farmer.

Height 5 Feet 10 3/4 Inches.

Weight Lbs.

Chest measurement Minimum 37 1/2 inches. Maximum expansion 3 1/2 inches.

Physical development

Small-Pox Marks

Vaccination Marks Arm Right. Left. Number

When Vaccinated last

(a) Marks indicating congenital peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

Approved by S. F. A. Maunsell

Rank Major 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.
19/6/16.		2/E. M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
16.6.16		M.O.
15-7-16		2.c.B. M.O.
APR 25 1918		M.O.
6-4-18		a.c.B. M.O.

Enlisted on 19 day of 10 191 5 at

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	104th Batt	~~180138~~		19-10-15
Transferred to...	Transferred Surgical Hosp 5th Div	709095		19-7-17
	attached Corps			19-7-17
	17th Res Bn			5-4-18.
	26 Bn			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
Witley	2-8-19	Haemorrhoids	A. W. Mayhew Capt RAMC.

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.
100M.—5-15.
H. Q. 1772-39-439.

Surname Turner Christian Name Allen Osmond

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.
Fredericton		29	11	15	29	11	15	~~La Grippe~~ Catarrh	2		D A Wainwright
"		4	1	16	8	1	16	La Grippe	4		D A Wainwright

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

War Service Badge
Class "A" No. 39[illegible]03.

THIS IS TO CERTIFY that No. 709095 (Rank) Pte.

Name (in full) MacEWAN Alden Osmond enlisted in the 64th Bn.

CANADIAN EXPEDITIONARY FORCE at Sussex N.B. on the 19th day of October 1915

HE served in 78th Bn. in France England & Can

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 29

Height 5' 10 3/4"

Complexion Medium

Eyes Blue

Hair Dk Brown

A O MacEwan
Signature of Soldier.

Marks or Scars

C. C. Dispersal Station "B" Major
Issuing Officer.

Rank

Date of Discharge

Dispersal Station "B" AUG 31 1919 Military District No. 6

HALIFAX, N.S. AUG 24 1919
Date ..... 19.....

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.

1.—That discharge certificate must be carried when wearing uniform.

2.—That uniform can be worn only thirty (30) days after discharge, or when duly authorized in writing, and

3.—That wearing of uniform renders him liable to usual military discipline, as if on the strength of a unit.