Original

ATTESTATION PAPER.

No. 652149

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

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? ..... McIVOR.
1a. What are your Christian names? ..... ANGUS.
1b. What is your present address? ..... KINCARDINE. BRUCE COUNTY. ONTARIO.
2. In what Town, Township or Parish, and in what Country were you born? ..... BRUCE TOWNSHIP. BRUCE COUNTY. ONTARIO.
3. What is the name of your next-of kin? ..... NORMAN. McIVOR.
4. What is the address of your next-of-kin? ..... KINCARDINE? BRUCE COUNTY. ONTARIO.
4a. What is the relationship of your next-of-kin? ..... FATHER.
5. What is the date of your birth? ..... 23RD. OCTOBER. 1892
6. What is your Trade or Calling? ..... LABOURER.
7. Are you married? ..... NO.
8. Are you willing to be vaccinated or re-vaccinated and inoculated? ..... YES.
9. Do you now belong to the Active Militia? ..... NO.
10. Have you ever served in any Military Force? ..... NO.
If so, state particulars of former Service.
11. Do you understand the nature and terms of your engagement? ..... YES.
12. Are you willing to be attested to serve in the Canadian Over-Seas Expeditionary Force? ..... YES.

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, ANGUS. McIVOR., 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.

Angus McIvor (Signature of Recruit)

Date APRIL 3RD. 1916. Jas. A. Cormier Lieut (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, ANGUS. McIVOR., 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.

Angus McIvor (Signature of Recruit)

Date APRIL 3RD. 1916. (Signature of Witness)

CERTIFICATE OF MAGISTRATE.

The Recruit above-named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath before me, at KINCARDINE. Ont. this 3RD. day of APRIL. 1916.

(Signature of Justice)

M. F. W. 23.
600M.—2-16.
H. Q. 1772-39-841.

Description of ANGUS McIVER on Enlistment.

Apparent Age 24 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 6 3/4 ins.

Chest measurement.
- Girth when fully expanded ..... 37 1/2 ins.
- Range of expansion ..... 4 ins.

Complexion ..... FAIR

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.)

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 APRIL 3rd 1916

Place KINCARDINE ONTARIO

Jas. A. McDonald
Medical Officer.

*Insert here "fit" or "unfit."

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

CERTIFICATE OF OFFICER COMMANDING UNIT.

Angus Mc Ivor 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]
(Signature of Officer)
Lt. Col.

Date 3rd Apr 1916

1-4-19 Pte.

REGIMENTAL DOCUMENTS

NAME McIVOR ANGUS REGT. NO. 652149 UNIT 160th Bn C.O.M.F. 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
2	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)					
24	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
1	DENTAL HISTORY SHEET (M.F.B. 465)					Category
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					Demob
1	MEDICAL EXAMINATION (M.F.W. 129)					
	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)				19104	DESERTION
1	LAST PAY CERTIFICATE (M.F.W. 44)					
	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					
1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
1	M.F.W. 192					
1	form R149					
1	M.F.W. 67					
1	Cascard					
1	R. 122					
2	[illegible]					

Deceased 7.8.59

M

H

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

Duplicate

To be made out in duplicate. H.Q. 54-21-23-53

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

INSTRUCTIONS.

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

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

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

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

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

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(1) Name of Overseas Unit which Soldier joins..... 160th. O. S. B'n. C.E.F.

(2) Regimental Number ..... # 652149.

(3) Full Name of Soldier..... McIVOR, Angus.

(4) Place of Birth..... Bruce Township, Ontario.

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

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

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

(7) Are you a widower? ..... Nil.

(8) Have you any children ?..... Nil.

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

Also their names and ages..... Nil.

M. F. W. 67.

200M.—3-16.
1772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive ?..... Yes,

If so, state name and address ..... Norman, McIvor/ Kincardine, Ontario.

(10) Is your Mother alive ?..... Yes,

If so, state name and address..... Rachel, McIvor, Kincardine, Ontario.

(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.

..... Nil,

(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 ?..... Nil,

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

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

A. Meer Lt.Col.

Officer Commanding.

Date..... May, 29th, 1916.

160th Os. B'n. C.E.F.

SURNAME. Mc. Ivor.

CHRISTIAN NAMES Angus

REGL. No. 652149 RANK Pte

UNIT ~~160th~~ #188 Bn.

FORMER CORPS Nil

CARD No. 1

SOS Dis 29-1-19

FOLIO

D.O. 280 28-1-19

Demob

NEXT OF KIN.

NAMES IN FULL Mc. Ivor. Norman

RELATIONSHIP TO SOLDIER Father.

ADDRESS Kincardine. Bruce County Ont.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada Bruce Township Ont. DATE Oct: 23rd 1892

PLACE OF ATTESTATION Kincardine Ont. DATE Apr: 3rd 1916

R/c. 30-12-18. 248/8.

L. L. 94504. M. & D. 6512.

M. F. W. 22. 250M.—2-16. H. Q. 1772-39-339.

MARRIED SINGLE yes WIDOWER

TRADE OR CALLING Laborer RELIGION Presbyterian

DESCRIPTION.

APPARENT AGE 24 YEARS – MONTHS

HEIGHT 5 FEET 6 3/4 INCHES

CHEST MEASUREMENT 37 1/2 INCHES EXPANSION 4 INCHES

COMPLEXION Fair EYES Blue HAIR D K Brown

DISTINGUISHING MARKS Nil

MEDICAL EXAMINATION. PLACE Kincardine Ont. DATE Apr. 3rd 1916

Number 652149 Rank Pte

Surname McIVOR

Christian Name Angus

Units 18th Bn Can Inf Theatre of War France

Date of Service 28/3/18

Remarks

Latest Address Wiarton, Ont.

Roll No B. Page 1012.

200m.-2-21.M.

Next of kin

Address on leave

Address on discharge

Transportation issued Yes / No Date

Character on discharge

Previous occupation

Date and place of enlistment

Diagnosis

Date of Medical Boards

Date	Remarks

DESP FEB 14 1922 REGN. NO 440484

*—Name will be given in full, surname first.

2nd Issue WSB Class "A" # 124364 (23-9-58)
c/o Legion, Kincardine, Ont.

NAME Mc Ivor Angus.

REGT'L No. 652149

H. Q. FILE No. 649.

RANK AND CORPS Pte 18th Battn Can Inf

FOLLOWS No.

FOLLOWS

CABLE NO.	CABLE DATE	NATURE OF CASUALTY
9 W.K.		Norman McIvor. (Father)
51-M.		Kincardine Bruce County Ont
#289	4-9-18	Adm. 12 Mil. H. St. Pol
Also H.L.	A 304	Aug. 27-1918 G.S.W. L. Shldr
59-B.		
#294	6-9-18.	Adm. 2nd. Western Gen. H.
Also H.L.	B 303	Manchester Supt. 2nd. G.S.W. L. Shldr

L. L. 26438. M. & D. 8207.

M. F. W. 42—50M.—8-17.
H. Q. 1772-39-893.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
A. 306 (1)	#22 Gen. Canniers	25-8-18	Wd. L. Shldr.
B 344 (2)	to P.P. C.R.C. Bexhill	17-10-18	" " "
B 362	Disch.	4-11-18	" " "

Form DMS 1401.

T 3116

A. & D. CARD

D1

Princess Patricia Canadian Red Cross Hospital HOSPITAL.

AT Cooden Camp, Bexhill,

Rgl. ~~A. & D.~~ No. 652 149 PL. OF ACTION Arras.

RANK Pte. REG. No. UNIT 18th Bn. SICK OR WOUNDED

NAME McIver A. AGE 27 RELIGION Pres.

PLACE IN HOSPITAL Div I

DIAGNOSIS G. S. W. Shoulder Lt.

ADMITTED 16-10-18. FROM 2nd W. Gen. Manchester.

DISCHARGED 4-11-18 TO 1st C.C. Depot Witley

TRANSFERRED

SERVICE AT HOME 32/12. IN FIELD 6/12

RESULTS

DISCHARGED TO DUTY. Cat D I

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

P.T.O.

REMARKS.

(Railroader)

Form R. 149.

Angus

Name McIVOR Rank Pte. Reg. No. 652149

Unit 18th Bn

Next of Kin Canada

1918. Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
27-8	12 SH. St. Pol.	Wd. L.	Shldr.	A304	A289	3656/7
B 28.8.	22 GH Camiers		do.	A306		3674/3
1-9	2 W. GH. Manchester		do.	B302	11 274	25607
17-10	P.P.C. R.C. Bexhill		do.	B344		29483
4. N.	Discharged		do	B362		9301
4/11.	Will report 1 CCD Witley - No furlough - R.L. Cooden Rec 173.					

NE

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

No. 65-2149 RANK Pte. NAME Mc Iver Angus

T. O. S. 3/4/16
(D.O. 82) of 5/4/16 UNIT 160th. Battalion

M. D. 1

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916	1916			
Apr. 3	Apr. 30	V		
May		V		
June		V	Awarded 14 days C. B.	(D.O. 143) of 19/6/16
July		M.		
Aug.		M.		
Sept.		V		
Oct.		M.		

UNIT SAILED
OCT 17 1916

D.M.S. 1300-50M-21-11-17.

SURNAME	CHRISTIAN NAME OR NAMES	REG. NO.
Mc Ivor.	a.	652149.

RANK	UNIT	CO.	TROOP	BATTY
Pte	W.O. 18.			

HOSPITAL	DATE OF ADMISSION
12. Sta R. St Pol	27. 8. 18.

1. 22 Gen Camiers HOSP. 28-8-18
2. 2 W. G H Manchester HOSP. 1. 9. 18
3. P.P.C.R.C.S. Hsp. Bexhill HOSP. 17-10-18.
4. HOSP.

DIAGNOSIS Wd. Lt Thl dr. a.

1.

2.

3.

DISPOSITION

Misc - 4. 11. 18.

DATE

Ch. 2. 9. 18	a 304 2.
4-9-18. a/306/2	
4. 9. 18 B302.	
23-10-18 B344	
13. 11. 18 B362.	

REMARKS

A.M.D. 2 DEPT.

Bch. of D.G.M.S. O.M.F.C. London.

EPITOME OF HOSPITAL TREATMENT

	HOSPITAL	ADM.
1.		
2.		
3.		
4.		
5.		
6.		
7.		

*Name Mc IVOR, Angus Rank -Pte. Regtl. No. 652149

Fyle Depot

Original unit 160th Bn. Present unit 18th Bn. M. or S. Age 27 Religion Pres. Ref. H.Q.

Port, ship and date of arrival Halifax, Carmania, 30-12-18.

Next of kin (Father) Norman McIvor, Kincardine, Ont.

Address on leave

Address on discharge Kincardine Ont

Transportation issued Yes / No Date Character on discharge

Previous occupation Labourer Date and place of enlistment Kincardine, 3rd April, 1916.

Diagnosis R A Date of Medical Boards 25/1/19

Date.	Remarks.	Pt. 2 Order No.
T.O.S.		
21-12-18	No.1 D.D.	
2-1-19	Posted to Casualty Company	6.
16-1-19	Granted Subs. Allow. From 2-1-19 to 25-1-19.	15.

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

(over)

Date.	Remarks	Pt. 2 Order No.
29/1/19	Disch from HMS on Demob (P&P)	28

M. F. W. 192
150m.—5 18
1772-39-1243

COPY ONLY

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 652149 (Rank) PRIVATE

Name (in full) McIVOR, Angus, enlisted in

the 160th BATTALION, C.O.M.F.

CANADIAN EXPEDITIONARY FORCE at Kincardine, Ont. on the THIRD

day of APRIL, 1916.

HE served in FRANCE (with 18th Battalion)

and is now discharged from the service by reason of ON DEMOBILIZATION.

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

Age 27

Height 5 - 4 7/8

Complexion FAIR

Eyes HAZEL

Hair DARK BROWN

Marks or Scars

G. S. W. LEFT SHOULDER

Signature of Soldier

DISCHARGE SECTION
JAN 29 1919
No. 1 District Depot

Date of Discharge

Issuing Officer

Rank

O. C. Discharge Section, No. 1 D. D.

Appointment

Signed at LONDON, ONT. this TWENTY-NINTH day of JANUARY, 1919

in Military District No. ONE

File Reference No. ID-30-M-1749
IDD-10-M-439

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. W. 39a.
250m.—6-18.
H. Q. 1772-39-882.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

No. ..... (Rank) ..... Name .....

Unit .....

Address on Discharge .....

Character and Conduct .....

.....

Former Occupation .....

Special Qualifications of Value in Civil Life .....

.....

Medals and Decorations .....

.....

Remarks .....

.....

Signed at ..... this ..... day of 19

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

.....

Name of Officer

.....

Rank

.....

Appointment

R—122
8,401—50,000—21-10-16

J.P. Rank Name McIVOR, Angus Reg'l No. 652149.

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

Place and Date of Enlistment Kincardine Ont. 3rd April.1916. Place of Birth Bruce Twp. Bruce Co. Ont.

Name and Address, Next-of-Kin Norman McIvor.

Kincardine Bruce Co/Ontario Relationship Father.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

N/E. R.B. No. 5568
File R.L.
Category CAN.OR

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 "S.S. METAGAMA 28-10-16			
23.2.18	160thBN	S.O.S, TO 4th, RES. BN. WITLEY 23.2.18, PT 11 28 4, RES 48 d/26.2.18.			
28.3.18	4th Res	Posted TO 18th. BN. O/S BSHOTT 28.3.18, PT 1 75 + 16th BN 27 d/5 4/18			
2-9-18	WOR (18)	WOUNDED	field	Pte	27.8.18 CLA 304
7.9.18	WORD	Posted from 18th Bn.	Witley	"	1.9.18 Do 211
17.9.18	18 Bn	SOS to WORD	field	"	" 88 O.C.
6-11-18	W.O.R.D	on Comm. to 1st C.C. to	Witley	"	4-11-18 " 262 9 CCD 308 8/7 11/18
20.11.18	"	off Comm to " — and SOS to 4 Res	"	"	14.11.18 " 274 & 4 Res 28 00 / 26 11-18
1.1.19	No 1 MD M W	att to boy	Kimmel	Pte	13.12.18 " 1
"	"	Ceases att	"		21.12.18 " 1

WO

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.
16.1.19	4 Res.	[S.O.S. proceeding to Canada	Witley	21.12.18	D013

H.J.

MEDICAL EXAMINATION UPON LEAVING THE SERVICE OF OFFICERS AND OTHER RANKS WHO HAVE NO DISABILITY.

Officers and Other Ranks leaving the service for reasons other than medical unfitness are to be reported on this form. Where there is evidence of any undetermined or progressive disability, this form will not be used, but the case will be referred to a Medical Board for completion of M.F.B. 227.

No. 652149 Rank Pte. Surname McIVOR
(Given name in full) Angus

Unit or Corps 1 M.D. Birthplace Kincardine Ont.

(Examination of Officer or Other Rank (stripped) to be made by one Medical Officer.)

1. **GENERAL DESCRIPTION:**

Physique Good Weight 165½ lbs. Height 5 ft. 4 7/8 in. Colour of Eyes. Hazel.

Nutrition Good

Pulse 84

Condition of arteries Normal

Vision Rt. 20/20 Left. 20/20

Hearing (conversational voice) Rt. 21 ft.

Left 21 ft.

Identification marks, scars, or deformities. (Give cause and date of origin.)

1" scar over upper part, left scapula region, 27-8-18.
No disability.

Opinion as to general health and physical condition.... Good ... Cat. A1

2. **Has Officer or Other Rank ever suffered from, or has he now, any affection of the following systems? (Answer "Yes" or "No"). (Subjective evidence may be sufficient in certain cases.)**

Nervous System... No ... Genito Urinary System... No ... Cardio-Vascular System... No ...

Special Senses... No ... Integumentary System... No ... Respiratory System... No ...

Disturbance of mentality. No ... Muscular System... No ... Digestive System... No ...

Osseous and Joint System No ... Any other general condition... No ...

3. **If the answer to any part of Section 2 above is "Yes," here give full particulars, with cause and date of origin; and also a description of the present condition.**

No disability due to service.

(If space is insufficient, continue on back of form.)

[OVER]

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at.....(Overseas)

Date ..... Signed .....M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature .....

(If not satisfied, M.F.B. 227 will be completed by Medical Board.)

THIS SECTION FOR USE IN CANADA—

Examined at..London,..Ont.(Canada)

Date ....25-1-19..... Signed .....M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature .....

(If not satisfied, M.F.B. 227 will be completed by Medical Board.)

(This space to be used, if necessary, in connection with Section 3, overleaf, only.)

[OVER]

M.F.W. 129.
1033 (D.P.) 500M-11-18.
1772-39-1142.

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

DISTRICT 2

NAME OF SOLDIER McIVOR Angus

REGIMENT 160th Bn RANK Pte No. 652149

M.F.B. 465.
150M – 6-18
772-39-950.

INSTRUCTIONS

1. On examination the condition of patient's mouth to be marked on diagram in red ink.
2. On first line of report record of same to be made in red ink.

Only such entries to be made on this sheet as will show:

1. Condition on examination (in red).
2. Condition on leaving Canada.
3. Condition on discharge.

	Date	Amalgam	Temporary Filling (a) G.P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhœa	Synthetic Porcelain	Extracting	DENTURES U	DENTURES L	DENTURES P	Gold Clasp	Gold Filling	CROWNS Gold	CROWNS Porcelain	Bridge Work	OPERATOR	Military District	REMARKS
Condition on first Examination	1919 Jan 25	5 12.44 12.30									2 3.50									EXAMINED BY R. G. McMillan Capt.		Complete on Discharge

10 Mc D-7

LAST PAY CERTIFICATE

Regt.No 652149 Rank Pte Name McIvor Angus

Corps 160 Bn who was Disch

on 29-1- to

The following is a statement of the account of the above named

from 1-1- to 29-1-

Bal Dr from mon.of from L.P.C.			Bal Cr from mon.of from L.P.C.	1	56
ASSIGNED PAY; 10744	14	50	Regt Pay 29 days at $ 1.00	29	
			F'ld All 29 days at $ .10	2	90
SEPARATION ALLOWANCE:			SEPARATION ALLOWANCE:		
OTHER CHARGES:			OTHER CREDITS: Clothing Allowance	35	
PAYMENTS: 10745	73	16	Subsistence, 2-1- to 25-1-	19	20
Bal Cr (to be paid)			Bal Dr (to be deducted)		
Overseas P.D.D.	87	66	(from soldier $ / " Dependant $)	87	66

SEPARATION ALLOWANCE	ASSIGNED PAY	VICTORY BOND
at $ per month	at $ 15 per month	Subscribed $
has been to	has been Paid to 29-1-	Paid by Other Units $
		Paid by this Unit $

Dependant or Beneficiary; W McIvor
Address; Lucardine Out

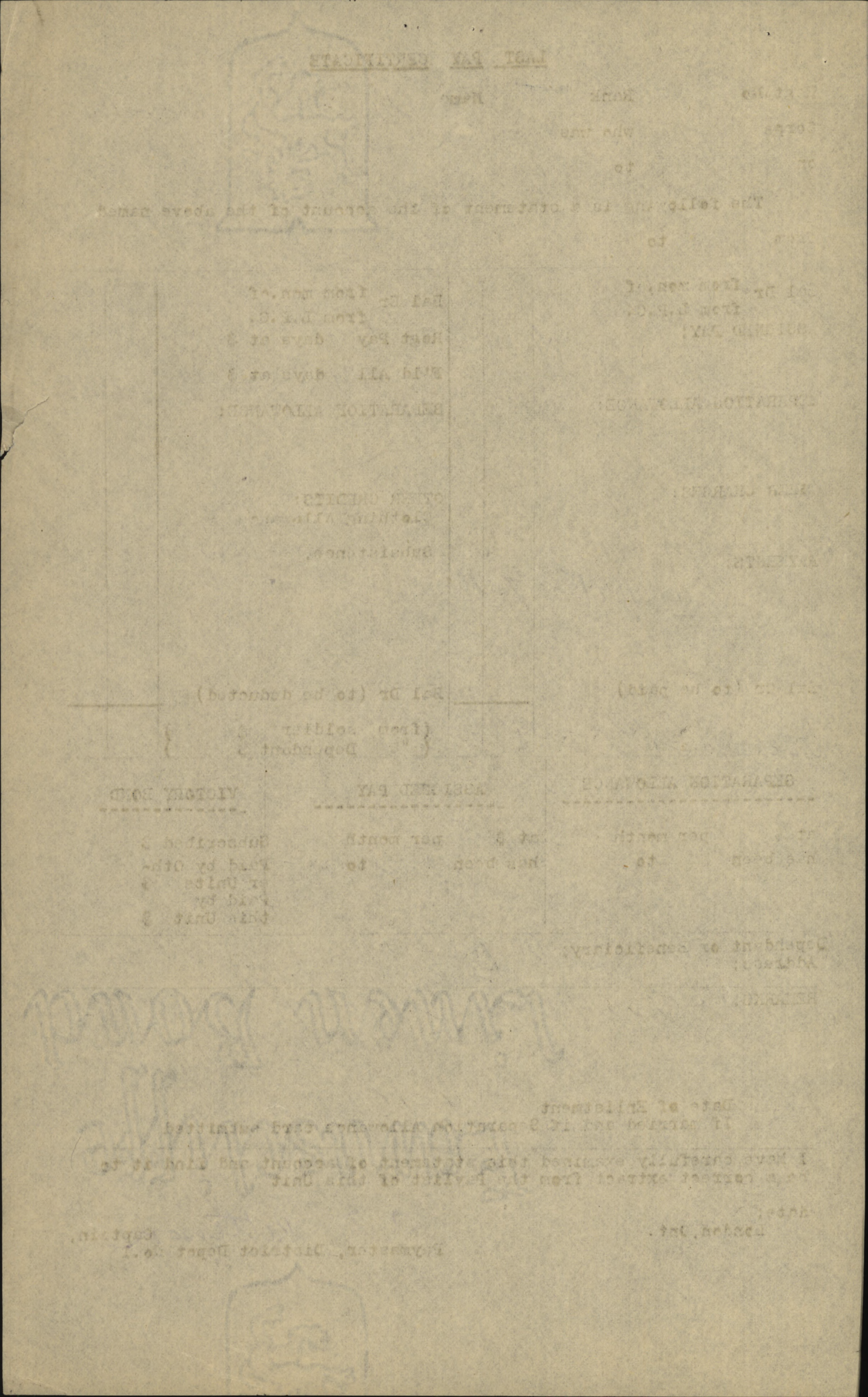
REMARKS; D028 Disch 29-1-19

Date of Enlistment 3-4-16
If married and if Separation Allowance card submitted

I have carefully examined this statement of account and find it to be a correct extract from the Paylist of this Unit

date;
London, Ont.

J D Patterson Captain,
Paymaster, District Depot No.1



2.

Army Form B. 103. Regimental Number 652149

Casualty Form—Active Service.

Regiment or Corps.....

Rank Pte Surname McIvor Christian Name Angus

Religion..... Age on Enlistment.....years.....months

Enlisted (a) 3-4-16 Terms of Service (a) D of W Service reckons from (a) 3-4-16

Date of promotion to present rank..... Date of appointment to lance rank.....

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

or Corps Trade and Rate.....

Occupation..... .....Signature of Officer.

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A.36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents
Date	From whom received				
		Embarked ...			
		Disembarked...			
14·11·18	Ceases to be attached on proceeding to	4th Res.	D.O.No. 315		8/14·11·18
			[signature] Capt for Adjutant,		
			1st Canadian Command Depôt,		
22-11-18	4th Can: Res: Bn:	T.O.S. on posting from W.O.R.D.	Witley	14-11-18	Pt 2 D.O No 271
13-12-18	-do-	"On Command" Kinmel Park Camp, pending return to Canada	-do.	13-12-18	Pt 2 D.O. 295.
			[signature] LIEUT. & ASST. ADJT. FOR O. C. 4TH CANADIAN RESERVE BATTALION.		

(a) In the case of a man who has re-engaged for, or enlisted in Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.

(b) Signaller, Shoeing-Smith, &c

(17591.) Wt. W 1887—P 1124. 1,000,000. 6/18. D & S. Form B/103. (E. 1256.) [P.T.O.

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A.36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents
Date	From whom received				
11/12/18	4th Can Res.	To D. #1 Cant. Camp Embarked for Canada	Rhyl	11/12/18	pte #2
					Gardhin [illegible] Lt. for O.S. M.D. #2 Wing
21.12.18	from O/S	Taken on strength No. 1 District Depot London D.O. #6			
					M R de Lauriere Lieut
		for O.C. NO. 1 DISTRICT DEPOT			
LONDON, ONT,		JAN 29 1919 Discharged On Demobilization			
					D Fletcher Lieut O.C. Discharge Section, No. 1 D.D.

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

M. F. W. 54. (A. F. B. 103.)
250M.—1-26.
H. Q. 1772-39-920.

Casualty Form—Active Service.

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

Regimental No. 65 2149 Rank Pte. Name McIvor Angus

Enlisted (a) 3-4-16 Terms of Service (a) ~~C. E. F.~~ Duration of War. Service reckons from (a) 3-4-16

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

Extended Re-engaged Qualification (b) (Laborer)

Report: Date	Report: From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
		Embarked-Canada	Halifax	17-10-16	
		Arrived-England	Liverpool	28-10-16	
23/2/18	O.C. 160 St Bn	S.O.S. on transfer to 43 L Cdn Reserve Bn.	Witley	23/2/18	D.O. Part 2. #28 R B Whitehead CAPTAIN, ADJUTANT, FOR O.C. 160th CANADIAN INFANTRY BATTALION
26-2-18	O.C. 4th Res. Bn.	T.O.S. 4th Res. Battalion	Bramshott	24-2-18	Pt. 2 Order No. 48.
29-3-18	O.C. 4th Res. Bn.	Having proceeded overseas to 18th Battn. is S.O.S. 4th Res. Battn.	Bramshott	28-3-18	Part 2 Order No. 75.

CERTIFIED CORRECT. 24 APR 1918 CAN. RECORDS, LONDON.

[signature] Lieut.
A/Adjt. 4th Canadian Res. Battalion.

OVER

(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 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.
29-3-18	2 Can I.B. Depot	Arr from 4 Can Res Bn Eng & T.O.S. of 18 Can Bn	2 Can IBD ETAPLES	29.3.18	Nom Roll Pt II Ord 27 d-5.4.18 also No 38 d-30.4.18
3-4-18	C.C.R.C.	Arr at Can.Corps Reinf. Camp		3.4.18	Nom Roll
17-8-18	18 Bn	Joined 18th Can Bn	In the Fld	14.8.18	AF.B.213
31-8-18	18th Bn	WOUNDED	In the Fld	27.8.18	AF.B.213
28-8-18	8 C.F. Amb.	GSW. L. shldr. Trans to C.C.S.		27-8-18	A.36. (No. A.8119)
27-8-18	12 Stat.	Wounded – L. shldr(M). Adm. 12 Stat.		27-8-18	W.3033 (No. W.1784)
28-8-18	22 Gen.	GSW. L. shldr. (M) Adm. 22 Gen.		28-8-18	W.3033 (No. W.1861)
31-8-18	A.T. Princess Elizabeth	Invalided to England, wounded. Posted to Western Ontario Regtl Depot WITLEY J Whogan Major for Lt.-Col., A.A.G. Canadian Section, G.H.Q. 3rd Echelon B.E.F.		31-8-18	AF.W.3083 (Can. Sect. No. 5905) Pt II Ord 88-17/9/18
7-9-18	W.O.R.D.	T.O.S. from 18th Bn.	Witley	1-9-18	Pt II O 211 L Glandy LIEUT FOR LT: COL: I/C RECORDS, C.O.M.

Army Form W. 3173. 20,000 Pads. 10/17. N.P.A. Ltd. E. 1955.

Army Form W. 3173.
(In pads of 50)

D. General Hospital.

Ward D3 No. of Bed Date 28-8-18.

Regl. No.	Rank and Name.	Corps.	Part to be X-Rayed.
65 2149	Pte. McEwen A	18 Can.	L Shoulder

Short History of Case.
(To be completed by M.O. i/c case.)

? F.B.

Signature of M.O. E.B.T.
Date 28-8-18

Report on Result of X-Ray Examination.
(To be completed by Radiographer.)

No. of Plate

Appr. negative for Fb.

Signature of Radiographer
Date

ORIGINAL.

652149

MEDICAL HISTORY SHEET.

Original

Surname McIVOR Christian Name ANGUS

Examined on 3rd day of APRIL 1916 at KINCARDINE ONTARIO

Approved by A. H. Abbott

Rank Captain M.O.

Birthplace City or Town KINCARDINE County BRUCE Ont.

Apparent age 24 YEARS

Trade or occupation LABORER

Height 5 Feet 6 3/4 Inches.

Weight 173 Lbs.

Chest measurement Minimum 33 1/2 inches. Maximum expansion 37 1/2 inches.

Physical development GOOD

Small-Pox Marks NONE

Vaccination Marks Arm Right. Left. YES Number ONE

When Vaccinated last 1902

(a) Marks indicating congenital peculiarities or previous disease NONE

(b) Slight defects but not sufficient to cause rejection

Date.	Fit or Unfit.	Examined for Re-engagement.
4.11.18	FH	4 SEP 1918 M.O.
25.11.18	"A"	M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date.	Result.	Vaccinations.
June 16 1916	Neg	M.O.
10/9/16	Pos	M.O.
		M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.
22/4/16		M.O.
30/6/16		M.O.
6/9/16		M.O.

Enlisted on 3rd day of APRIL 1916 at KINCARDINE ONT.

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	160th Overseas C.E.F.	652149		
Transferred to	4th Res. Bn 18th Bn			FEB 23 1918

CANADIAN

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
London Ont	5-X-16	Med. Board	Fit for Ft Duty Cert Corrame

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

M. F. B. 313.

200M—11-15.
H. Q. 1772 39-459.

D1

Surname McSwer Christian Name Richard

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital. Day	Month	Year	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.
		1	9	18	16	10	18	GS to lt shoulder	46	Wd 27-8-18 Wound healed - For transfer	[signature]
					4	11	18	[illegible]	19	To duty.	[signature]

WESTERN GENERAL HOSPITAL MANCHESTER.

Princess Patricia Canadian Red Cross Hospital, Cooden Camp Bexhill.

16 OCT 1918

CAPT. R.A.M.C. (T.F.) FOR OFFICER COMMANDING 2nd WESTERN GENERAL HOSPITAL

L.-L. Job 5470—M. & D. 6888

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

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

To Whom Norman McIver,

Address Kincardine, Ont.

Rate $15.

OCT 1 - 1916

By Whom Assigned McIver. Angus.

Regtl. No. 652 149.

Rank Pte

Corps 160 Bn.

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 6 ACCOUNT

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a.
50m.—6-16.
1772—39—819.

Sheet No. 2. Norman McIver.

Name of Soldier. McIver. Angus.

652149. Pte. 160 Bn.

L. L. Job 4503.—Req. 6832.

Month.	Year.	Cheque No.	Amt.	$15.	Remarks.
					OCT 1 - 1916
April	1916				
May					
June					
July					
Aug.					
Sept.					
Oct.		U28072	15		
Nov.		J29720	15		
Dec.		M35893	15		
Jan.	1917	D40218	15		
Feb.		D45755	15		
March		V 49236	15		15 B
April		S 3103	15		15 E
May		S 9246	15		15 OW
June		R 15623	15		Bn
July		S 28890	15		B.
Aug.		F 34456	15		
Sept.		C 37204	15		6
Oct.		J 43965	15		
Nov.		W 49803	15		
Dec.		S 60105	15		$225.00
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.				

P. 559

MARRIED OR SINGLE S

PLACE OF BIRTH Kincardine Bruce Co Ont

NAME AND ADDRESS OF NEXT OF KIN Norman McIver Kincardine Ont

RELATIONSHIP OF NEXT OF KIN

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. 652149 RANK Private NAME McIver Angus

IF IN PERMT. CORPS } WHAT UNIT UNIT 160th Bn

TRANSFERRED TO DATE AUTHORITY

PERMANENT FORCE ALLOWANCES

PLACE OF ATTESTATION Kincardine Ont

DATE OF ATTESTATION 3/4/16

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

PAYABLE TO Norman McIver Kincardine Ont RELATIONSHIP Father

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

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

DISCHARGE DATE AND PLACE REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

C1

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
														24 10	24 10																24 10				Asst pay paid by Capt Brand for Oct and worked in Oct pay list Canada
Nov																																			
1-30-16	30	1.00	30		30	10	3								33	6	8-11-16	63	30/1/16					24 33	487			15		4420	1290		750	540	Balance from Canada
Dec																																			
1-31-16	31	1.00	31		31	10	3	10							34 10	100	14-12-16	156	20/12/16					243	1216			15		2959	1748		1550	191	
1917																																			
Jany	31	1.00	31		31	10	3	10							34 10			235	31/1/17						1947			15		3447	1704		16	164	
Fa. fwd.			9 20																																
Feb	28	1.10	30 80												30 80									26 76	3150			15		15	3284		16	1684	
			132																																
Mch	31	1.10	34 10											24 10	34 10			423	24/3/17						1947			15		5150	1544		17	1544	
														15 6 10				336	11/3/17						1703			15							
Apl	30		33												33													15		15	3344				
May	31		34 10												34 10	35	18/4							487				15							
																80	30/4							1217											
June	30		33												33	124	16/5							486				15	59	3263	3491				626 $1008, 185, 22/4/17
			2620											24 10	2 9 0 30	167	31/5							1460	7300			120	59	3446	3345				
July	31		34 10												34 10													15		15	5255				
																235	17/6							730											
Aug	31		34 10												34 10	301	30/6							973				15		3203	5462				
																386	19/7	583	31/8					730	1460										
Sep	30		33												33	458	31/7	614	14/8					974	730			15		5394	3368				
			367 40											24 10	391 50									973	9490			165	59	3576					

652149. McIver. Angus.

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.	Acquittance Rolls 1: Date	Acquittance Rolls 2: No.	Acquittance Rolls 2: Date	Acquittance Rolls 3: No.	Acquittance Rolls 3: Date	Acquittance Rolls 4: No.	Acquittance Rolls 4: Date	Cash Payments 1	Cash Payments 2	Cash Payments 3	Cash Payments 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		DEFERRED PAY	SER. ALLCE. ENG.														
Sept	Balance	Forw'd			~~33~~	~~68~~												33	68																
Oct	31		P/P.		34	10					Can a Pay						15																		
										9R659	160 Bn	17/9		7	30																				
										9R731	160 Bn	30/9.		9	73			35	75																
					34	10								17	03		15																		
Nov	30.		P. P.		33	–											15.																		
										4R872	160 Bn	31/10		12	17																				
										4R806	do	16/10		7	30																				
										" 939	"	16/11/17		7	30																				
														26	77																				
Dec	31		P. P.		34	10					Can A Pay.			26	77		15	46	08																
1918					67	10											30																		
Jan.			P P		34	10					C.A.P.						15	80	18																
																		44	20																
																		35	98																
										aR 1049	160 Bn	5/12		17	03																				
										✓ 1006	– –	30/11		12	17																				
					34	10								29	20		15	35	98																
Feb	28		P. P		30	80					C A P						15																		
										1175	9/1/18	160 B	(6)	7	30																				
										1235	28/1	"	(9)	12	17																				
														19	47																				
										1281	12/2	"	(19)	7	30			25	01																
					30	80								26	77		15																		
Mch	31				34	10					C. A. P						15																		
										1781	28/2	4 Res	(22)	9	73																				
										2025	25/3	"		19	47			14	91																
					34	10								29	20		15																		

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

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

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

Norman McIver (Father)
Kincardine. Ont

Stopped off 1/1/19

NAME:- Mc IVER Angus

NUMBER:- 652149

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Pte.

UNIT AND TRANSFERS

ORIGINAL UNIT:- 160th Batt

DATE ACCOUNT FIRST OPENED:- 1-11-16

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
27	29.3.18	25-4-18	18th Bn.
	1/1/19		Can Sec.

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
11/12/18	3456	Witley	~~24 33~~				

DAILY RATES OF PAY AND ALLOWANCES

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

PARTICULARS OF RENDERING NON-EFFECTIVE:- Drafts to Can 1/1/19. W/R 1006 Witley. L.R.C. 3656

1918 MONTH	PARTICULARS	CR 1	CR 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
31 March	Bal Fwd								14 91		
April	Pte Pay	33 -		C.A.P.				15			
				A.R. 95 9/4/18 2nd C.C.R.C.	4 46						
				A.R. 210 22/4/18 "	3 57				24 88		
May	Pte. Pay	33 -			8 03			15 00			
		34 10		Can. A.P.				15 -			
				A.R. 331 4/5/18 2nd C.C.R.C.	4 46						
				A.R. 55 23/5/18 C.E. 5th Div.	3 57				35 95		
June	Pte. Pay	34 10			8 03			15			
		33 -		Can. A.P.				15			
				A.R. 620 6/6/18 2nd C.C.R.C.	3 57						
				A.R. 833 19/6/18 ✓	4 46				45 92		
July	Pte. Pay	33			8 03			15			
		34 10		Can. A.P.				15			
				A.R. 1054. 4/7/18 ✓	4 46						
				A.R. 1291. 16/7/18. ✓	3 57				56 99		
Aug.	Pte. Pay	34 10			8 03			15			
		34 10		Can. A.P.				15			
				A.R. 1543 3-8-18 ✓	3 57						
				✓ 646 19-8-18 ✓	3 57				68 95		
Sept		34 10		A.A.P.	7 14			15			
								15			
	Pte Pay	33.		Hosp Rem 32497 13-9-18	973				77 22		
Oct	"	33			973			15			
		34 10		Can				15	111 32		
				" 40387 Oct.	973						
				For 4 days Pay under A.A. sec 462(d) 11-10-18. A.O. 248 21-10-18 weekly.		4 46					
				A.R. 9180. 21-10-18 Seaford. 3	973				72 46	R850 19/11	
		34 10			19 46	4 40		15			
Nov.		33		Can				15			
	S.T. from 27-11-18 to 7-12-18. 10 days. 4 Res. B.O. 281 27/11/18.	7 30		3063 16/11 4 Res.	7 30						
				3189 28/11 "	48 67						
Dec		34 10		3456 11/12 "	24 33			15	36 56		
		74 40			80 30			30			

Checked A K Eaton 31/12/18

NUMBER 652149 RANK NAME McIVER Angus

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

This space to be for numbers

Proceedings on Discharge.

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

No. 652149

Rank PRIVATE

Surname Mc IVOR

Christian Name Angus

NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.

Corps (Squadron, Battery or Company) 160th BATTALION, C.O.M.F.

Date of Discharge JAN 29 1919 D.O 28. 28.1.19

Place of Discharge LONDON, ONT.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age	27 years
Height	5 feet 4 7/8 inches.
Complexion	FAIR
Eyes	HAZEL
Hair	DARK BROWN
Trade	Laborer
Intended place of residence (To be given as fully as practicable.)	Kincardine, Ont.

Descriptive Marks

G. S. W. LEFT SHOULDER

Deceased 7.8.59

2. The above-named man is discharged in consequence of

ON DEMOBILIZATION

N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.

3. Conduct and character while in the service have been, according to the records, etc.

N.B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldiers and the Officer Commanding his Squadron, Battery or Company.

4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)

To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.

M. F. B. 218.

100M.—1-17.
H. Q. 1772-39-113.

(OVER)

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

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

6. Medals and Decorations.....

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

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

(Place)..... .....

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

8. **Certificate to be signed by the Soldier on Discharge**

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

(Place) LONDON, ONT. A McIver .....(*Signature of Soldier.*)

(Date) JAN 29 1919 G Reddon C.S.M. .....(*Signature of Witness.*)

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

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

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

.....(*Signature of Soldier.*)

10. **Statement of Service.**

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

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

11. **Confirmation of Discharge.**

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

(Place) LONDON, ONT.

(Date) JAN 29 1919

(*Signature*) D Fletcher Lieut

O. C. Discharge Section, No. 1 D. D.

Reservations referred to at Para. 8.

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

None

A. McIver

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form B. 263.
Squadron / Battery / Company } Conduct Sheet,	" B. 263a.
Copies of Convictions, by C. P.	in MS.
Med. Hist. Sheet,	Militia Form B. 313
Medical Report for Invalid*	" B. 227.
Statement of Man's Account on Transfer and Last Pay Certificate,	" D. 877.

*Only if discharged "Medically unfit."

Attestation Paper,	Militia Form B. 235.
Proceedings on Discharge	" B. 218.

In the case of recruits who are rejected on final approval, the discharge documents will consist of

(a) Proceedings on Discharge.

(b) Attestation.

(c) Medical History Sheet (in the event of such having been prepared.)

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

Forms I. 1237 / 12

Medical Officer:

Whether U.K. or Expeditionary Force:
(If latter, state which).

Army Form I. 1237.

Dr. Kirst France

MEDICAL CASE SHEET.*

Ward: B1 Priest.

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
46.946	652149	Pte	McIver	Angus

Year	Unit.		Age.	Service.
1918	18th Can.	A Coy.	27.	2 6/12. 6/12

Station and Date.

Disease S. W. Shoulder S.

Date of Onset 27.8.18

2nd WESTERN GENERAL HOSPITAL
ALFRED ST., HARPURHEY.
1-9-18

Superficial W. on back of left Shoulder

Transfer Class.
Sitting A

5/9/18 M.

7.9.18 Transferred to Hartley College

HARTLEY COLLEGE,
AUXILIARY HOSPITAL,
ALEXANDRA ROAD, S.,
MANCHESTER.

9918 Suppurating wd back of L Shoulder.

10.9.18 Wd. healthy & healing

30.9.18 Wd healed

BASTER HOUSE RED CROSS HOSPITAL,
WHALLEY ROAD, WHALLEY RANGE,
MANCHESTER.

2nd WESTERN GENERAL HOSPITAL
BANK MEADOW.
4-10-18

Admitted

6.10.18

16.10.18 Trans to Princess Patricias Hosp. Beechill on Lea

Mother
Mrs. M. McIver.
Kincardine
Ontario.
Canada.

Next of kin:

Antitetanus Inocn.	
Units.	Date.
500	27.8.18
500	13.9.18

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

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

Station and Date.

Princess Patricia Canadian Red Cross Hospital,
Gooden Camp, Bexhill,

16 OCT 1918

4.11.18 To Duty/D 1

[illegible]

P.878. Extract from Sailing List No. 99 Unit:- 4th Res

Reg. No.	Rank	Name	Sailed for Canada, Military District No 1	Acted on Ledger Ck.
652149	PTE	McIVER. ?	21/12/18	

10 - Mid - 7

AUDITOR | PAYMASTER

M. OR S. S | 3904 | PROMOTIONS, REDUCTIONS AND REVERSIONS AFFECTING DAILY RATE OF PAY AND ALLOWANCES | REGT. No. 652149 | RANK Pte | NAME (IN FULL) Mc IVOR Angus 6

(BLOCK LETTERS, SURNAME FIRST)

NEXT OF KIN — RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? — DATE EFFECTIVE

TO WHOM PAID no — RELATIONSHIP

ADDRESS Nil

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F. 160 Bn — IF IN P.F. WHAT UNIT? Kincardine, Ont.

PLACE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

DATE OF ATTESTATION 3-4-16 — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY. $ 15 — DATE EFFECTIVE 1-1-19

PAYABLE TO W. McIver — RELATIONSHIP Father — ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS Kincardine Ont.

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

DISCHARGED — PLACE London — DATE 29-1-19 — REASON Dem. — AUTHORITY 10028 — IF ENTITLED TO POST DISCHARGE PAY

MONTH	10c PAY AND F. A. 1c: NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.	OTHER CREDITS $	OTHER CREDITS C.	$	C.	TOTAL CREDITS $	TOTAL CREDITS C.	ACQUITTANCE ROLLS: COL. NO. 1 NO.	COL. NO. 1 DATE	COL. NO. 2 NO.	COL. NO. 2 DATE	COL. NO. 3 NO.	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.	$	C.	TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	BALANCE CREDIT $	C.	PARTICULARS OR REMARKS
Balance from previous account																																					
31-12-18									36	56																	30 5				35				1	56	
1/1 29/1/19	29	1.10	31	90	35 00 19 20		1	56	87	66							107 45				73	16	14 50		10	74	4				87	66					
29-1-19			70						70			29/1/19					730 70														70						
			Nil																																		
28/2/19.			280						280								70														70		210				
29/3/19.			210						210								70														70		140				
29/4/19.			140						140								70														70		70				
29/5/19.			70						70								70														70						
									280								280														280						
									350								350														350						

Bl. Ons 210 / 140 / 70 / 350

R. Vincent Capt.

2367
447/21
75368.
31-5-19 486733

War service gratuity 2 years $350

A. McMartin Lieut.

WAR SERVICE GRATUITY

60m.-11-18 L. L. 51777. M. & D. 9585.

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

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment: Oct 1-16

6L8 Mc 11 S.K.

C 167 / 1

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

15			

PARTICULARS OF SEPARATION ALLOWANCE

No. 652149

Rank Pte Promoted Reverted Discharge

Soldier's Name Angus McIver

Battalion 160th Battn

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name Norman McIver

Address Kincardine, Ont.

Change of Address

1

2

3

4

Date 1917	Cheque No.	Amount S/A	Amount A/P	Total		REMARKS
Dec. 31	—		225	225		
Jan 18	J 45925		15	15		Fm
Feb "	H 72230		15	15		
Mar	M 90555		15	15		
Apr	E 4192		15	15	✓	
May	N 19114		15	15	✓	
June	J 23597		15	15	✓	
July	L 30340		15	15	✓	
Aug	L 41077		15	15	✓	
Sept	2 45985		15	15	✓	
Oct	T 53261		15	15	✓	
Nov	F 58734		15	15	✓	
Dec	S 68070 ✓		15	15		
Jan			15	15		
			405	405		

A/c Closed 31-12-18

MAC 1

Ret'd per Carmanca

Date 30/2/18 F.X. 3-1-19

MRO. 59810

Clerk G H Bendon

M. F. W. 128
400M.—6-17—1772-39-1141
L. L. 22320—M. & D. 7993.

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. 7593.