79TH BATTERY, C. E. F. DUPLICATE

ATTESTATION PAPER.

No. 12 J 1986

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? — Mc Lean.
1a. What are your Christian names? — Hamilton Alexander.
1b. What is your present address? — 38 Windsor Ave.
2. In what Town, Township or Parish, and in what Country were you born? — Montreal Que.
3. What is the name of your next-of kin? — Johnathan Albert McLean.
4. What is the address of your next-of-kin? — 38 Windsor Ave.
4a. What is the relationship of your next-of-kin? — Father.
5. What is the date of your birth? — 1898 March 7th.
6. What is your Trade or Calling? — Clerk.
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? — Yes.
10. Have you ever served in any Military Force? If so, state particulars of former Service. — Yes 21st Battery.
11. Do you understand the nature and terms of your engagement? — Yes.
12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE? — Yes.
13. Have you ever been discharged from any Branch of His Majesty's Forces as medically unfit? — No.
14. If so, what was the nature of the disability? — ~
15. Have you ever offered to serve in any Branch of His Majesty's Forces and been rejected? — No
16. If so, what was the reason? — ~

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Hamilton Alexander McLean, 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.

Hamilton Alexander McLean (Signature of Recruit)

Date May 28th 1917. G E Millar (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Hamilton Alexander McLean, 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.

Hamilton Alexander McLean (Signature of Recruit)

Date May 28 1917 G E Millar (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 Montreal this 28th day of May 1917.

(Signature of Justice)

M. F. W. 23.
750 M.—1-17.
H. Q. 1772-39-841.

N.B.—ATTENTION IS DRAWN TO THE FACT THAT ANY PERSON MAKING A FALSE ANSWER TO ANY OF THE ABOVE QUESTIONS IS LIABLE TO A PENALTY OF SIX MONTHS' IMPRISONMENT.

Description of Hamilton Alexander McLean on Enlistment.

Apparent Age 18 years 2 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height ..... 5 ft. 7 ins.

Chest measurements:
- Girth when fully expanded ..... 35 ins.
- Range of expansion ..... 4 ins.

Complexion Fair

Eyes Blue

Hair Fair

Religious denominations.
- Church of England .....
- Presbyterian X .....
- 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).

Eyesight R. D.= 20
" L. D.= 20
Hearing R. Ear OK
" L. " OK

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* ..... for the **Canadian Over-Seas Expeditionary Force.**

MOBILIZATION CENTRE M. D. No. 4 MONTREAL

Date ..... 191 . MAY 28 1917

Place .....

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:—

Declared FIT by MEDICAL BOARD
MOBILIZATION CENTRE, M. D. #4

Class A II

H. Aubry Major
President, S. M. B.

CERTIFICATE OF OFFICER COMMANDING UNIT.

Hamilton Alex. McLean 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.

W. W. Cowley Major
O. C. 79th Depot Battery C. E. F. (Signature of Officer)

Date 28. 5. 1917.

REGIMENTAL DOCUMENTS

Dvr.

NAME McLEAN HAMILTON ALEX REGT. NO. 125 1986 UNIT 6 A, R, D, 79th R. Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
1	ATTESTATION PAPER (M.F.W. 23, 133, or 51)	5-7-19				~~DEATH~~
3 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)					
3 2	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)				25919	
1	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
	PROCFEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					~~DESERTION~~
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					
	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)					
1	S.R.E. 132					
1	C.D. 3					
2	Disc					
1	Disk Cert R.H.Q.					
1	M.S. 267					
1	Cas Card					

480755

W. 2589
100M-11-18
17/2 39-1377

SURNAME. Mc Lean. 74

CARD NO. 2
SOS Desc Dem 31-5-19
100170 4/19-6-19
FOLL. DDH

CHRISTIAN NAMES Hamilton Alexander

REGL. No. 125 1986 RANK Gr.

UNIT 79th. Bty. C. F. A. (4th R.H.)

FORMER CORPS 21st. Bty.

NEXT OF KIN.

NAMES IN FULL Mc Lean, Johnathan A.

RELATIONSHIP TO SOLDIER Father

ADDRESS 38 Windsor. Ave.
Montreal, P.Q.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada. Montreal. P.Q. DATE Mar 7th 1898

PLACE OF ATTESTATION Montreal. P.Q. DATE May 28th 1917

R/C. 29/5/19 337/28.

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

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

FROM HALIFAX PER

S.S. MEGANTIC 26/11/17

MARRIED SINGLE yes WIDOWER

TRADE OR CALLING Clerk. RELIGION Presbyterian

DESCRIPTION.

APPARENT AGE 18 YEARS 2. MONTHS

HEIGHT 5- FEET 7. INCHES

CHEST MEASUREMENT 35- INCHES EXPANSION 4. INCHES

COMPLEXION Fair EYES Blue HAIR Fair

DISTINGUISHING MARKS Nil

MEDICAL EXAMINATION. PLACE Montreal. P.Q. DATE May 28th 1917

Present Address, 38 Windsor ave.,
Montreal, P.Q.

Emit

Number 125198 Rank Lieut.

Surname M C L E A N

Christian Name Hamilton Alexander

Units C.F.A. Theatre of War France

Date of Service 13-2-18

Remarks

Latest Address 38 Windsor Ave.

Montreal Westmount

Que.

Poll No B Page 8254

No. RANK NAME

T. O. S. UNIT

M. D.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY

DESP OCT 28 1921
REGN. NO. 91524

NAME Mc Sean, H. A. REGT. No. 125.1986

RANK AND UNIT Dvr. 2.D.A.C.

NEXT OF KIN

CABLE		NATURE OF CASUALTY
No.	DATE	

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

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS (Can. Ext.)
A 507-2.	5th Gen. Ambergue	15-3-19.	Influenza
B. 510-1.	#16 Can. Gen. Orpington	22-3-19	" & Bron. Pneum.
B 526-2.	Discharged	11-4-19.	Influenza & Bron-Pneu.

Form R. 149.

Hamilton Alexander RCR

Name McLEAN Rank Dvr. Reg. No. 1251986

Unit 2nd DRC

Next of Kin Canada.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
15.3.19	5th Gen Hosp Auberngue		Influenza	A507		7576-11
22.3.-	Ont Hosp Orp' Ton		do + Bronchi-Pneumonia	B570		8978
11.4.19	Discharged do		do	B576		3218
A.L. 11/4/19	will proceed 23/4/19 to	Arlg Depot Ripon				Orp MC 511

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

Surname	Christian Name or Names	Reg. No.
MCLEAN	H.A.	1251986

Rank 1. Unit 1.
2. Dvr. 2. CA 5 DAC(2 D.A.C)
3. 3.
4. 4.

Cas List.	Hospital and Diagnosis.	Date
24-3-19 A507-2 ✓	54 Gen Aubengue Influenza	15-3-19
27.3.19 B870	16 C.G. Orpington Dis.	22.3.19
15.4.19 B526 (2)	& Broncho Pneumonia	11.4.19

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

Cas. List.	Hospital and Diagnosis.	Date

79TH BATTERY C. E. F. ORIGINAL

ORIGINAL MEDICAL HISTORY SHEET

12/5/1918

Surname McLean Christian Name Hamilton Alexander

Examined on 28th day of May 1917 at Montreal

Approved by

Birthplace City or Town Montreal County Quebec

Rank M.O.

Apparent age 18 years 2 months

Trade or occupation Clerk

Height 5' feet 7 Inches

Weight 122 lbs.

Chest measurement Minimum 34 inches Maximum expansion 35 inches

Physical development Good

Small-pox Marks Nil

Vaccination Marks Arm Right Left Number 1

When Vaccinated last Child

(a) Marks indicating congential peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

MOBILIZATION CENTRE M. D. No. 4 MAY 28 1917 MONTREAL, P.Q.

Date	Fit or Unfit	Examined for Re-Engagement	
		Declared FIT by MEDICAL BOARD MOBILIZATION CENTRE, M. D. #4	M.O.
		H R Ambrymajor	M.O.
		for President, S. M. B.	M.O.
		Class A	M.O.
		J W S Brent Capt.	M.O.
		INSPECTING MEDICAL BOARD No. 4 FIT NOV 8 1917 Pres. MONTREAL, P.Q.	M.O.
			M.O.

Date	Result	Vaccinations	
JUL 31 1917		C H Elliott	M.O.
			M.O.
			M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.	
JUL 13 1917		C H Elliott.	M.O.
JUL 20 1917		C H Elliott	M.O.
JUL 31 1917		C H Elliott	M.O.
		W F G Capt	

Enlisted on 28th day of May 1917 at Montreal

	Corps	Regt'l Number	Habits	Date
Joined on enlistment	79th Battery	12/1918		MAY 28 1917
Transferred to	Res. Bde. C.A.	6 Fd		8/12/17
	PROCEEDED O/SEAS TO			13 FEB 1918

CANADIAN

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

Station	Date	Disease	Result
		INSPECTING MEDICAL BOARD M. D. No. 4 FIT A2 JUN 7 1917 Pres. MONTREAL, P.Q.	

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.
30M.—1-17.
H. Q. 1772-39-439.

Surname McLean Christian Name Alexander

STATION	Date of Arrival at the Station	Dates of Admission into Hospital			Dates of Discharge from Hospital			DISEASE	Number of days in Hospital	Remarks on nature of the disease; how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer
		Day	Month	Year	Day	Month	Year				
MONTREAL MAY 28 1917											
Petawawa	17.6.17										
Montreal	26.9.17										
16 Con Gen Hosp Orpington Kent		21	3	19	11	4	19	Influenza + Bronchitis	22	Convalescent when admitted Impaired Resonance Rt Base. 5-4-19 Chest clear Fit for Furlough + Duty	J.T. Macklaw Capt

Form R 122.
8750—15M—25-4-17.

LTR Rank Name McLEAN, Hamilton Alexander Reg'l No. 1251986

Unit Dft 79th Depot Battery C F A to C. R. A. If in perm. Corps, What Unit? Married or Single Single.

Place and Date of Enlistment Montreal, May 28th, 1917. Place of Birth Montreal. Que.

Name and Address, Next-of-Kin Jonathan H Albert McLean.

38 Windsor Ave, Westmount. Montreal. Relationship Father.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

H. W. V., Ld.—11319-17.

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 7-12-17 S/S Megantic			
14.12.17	Res Bde C.F.A.	T.O.S. on Ord. from Canada	Witley Dep.	8.12.17.	Pte to 27.
14.2.18	—"—	S.O.S. on proceeding to Base	Witley Dep	13/2/18.	—"— H 5 Pte to 29 9/18 2/18
5-4-18	2nd D.A.C.	T.O.S. from Can. Artillery Pool	Sling Camp	22.3.18	—"— 50 Pte to H 5 9/11 4/18
7-4-19	C.A.R.D.	T.O.S. from 2nd D.A.C.	Witley "	22-3-19	50 97
14-5-19	—	T.O.S. to M.S.4 Rhyl	Ripon —	14-5-19	50 1348 M.O. 4 50114 5/11 5/19
20-5-19	M.S.4	S.O.S. to Canada	Rhyl —	21-5-19	50125
		To Canada	66-1-83	21-5-19	

A.F.B. 103 CHECKED

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.	
Date.	From whom received.					

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

M. F. W. 54. (A. F. B. 103.)
350M.—5-16
H. Q. 1772-39-920.

W. S. B. Class A

Casualty Form—Active Service.

Unit, Regiment or Corps 79TH BATTERY, C. E. F.

Regimental No. 125198 Rank Gunner Name McLean, Hamilton Alexander

Enlisted (a) 28.5.17 Terms of Service (a) C. E. F. For War Service reckons from (a) 28.5.17

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

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

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	MONTREAL. NOV 19 1917		H. M. T. Megantic
		Disembarked	Liverpool	7/8/12/17	H. M. T. Megantic
14-12-17	O.C. Res Bde C.F.A.	T.O.S. From Canada	Witley	8-12-17	R.O Pt. 2-27
14-2-18	O.C. Res Can. Bde C.F.A.	PROCEEDED O/SEAS TO C.F.A	Witley	13-2-18	R.O Pt II 45 — A. A. Wolverton LIEUT. & ASST. ADJUTANT. RESERVE BRIGADE, CANADIAN FIELD ARTILLERY.
14-2-18	C.C.B.D.	Arr'd Reinf. T on S Can Art'y Pool,	Field	14-2-18	HR(515)Pt.II.O.23,d/15-2-18
17-2-18	do	Left Base for C.C.R.C.	do	17-2-18	HR(973)
do	C.C.R.C.	Arr'd at C.C.R.C.	do	do	HR(138)
18-3-18	A.A.G.	Posted to 2 C.D.A.C.	do.	22-3-18.	cancels N.R. d/22-3-18 K.R. 868. Pt II O. 45 d/4-4-18
18-3-18	—	T. O. S. 2 C.D.A.C.	do	22-3-18	— 50 d/5-4-18
24-3-19.	48bbS.	Influenza adm	48bb.S.	4.3.19	A — N 9586.

CERTIFIED CORRECT. 22 FEB 1918 CAN. RECORDS, LONDON.

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

[P.T.O.

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A 36, or in other official documents. The authority to be quoted in cach case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
4.3.19	2 COO	To Hospital	ns.	4.3.19	B213
15.3.19	54 Genl.	Influenza. adm	54 Genl.	15.3.19	P. 442
21.3.19	54 Genl	— To England		21.3.19.	P. 497
21.3.19	54 Genl	Invalided to (EAR)) Ripon		21.3.19	W3034 P2. 0. 4!
		" "			G.H. Skelton Lieut Capt for Lieut Col
7.4.19	CARD	SOS from 2nd DAC	Witley	22.3.19	D.O.7.
14.5.19	~	SOS to M.D.4 Rhyl	Ripon	14.5.19	" 134 & M.D.4 D.O 114 14/5/19
30.5.19	M.D.4	SOS to Canada	Rhyl	21.5.19	— 125
		To Canada	66-7-83	21.6.19	

Sheet No.3

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

M. F. W. 54. (A. F. B. 103.
500M.—9-16
H. Q. 1772-39-9 '0.

Casualty Form—Active Service.

Unit, Regiment or Corps. C.A.R.D.

Regimental No. 1251986 Rank Pte Name McLean. H.A

C. E. F.

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

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

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

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
19-6-19	O.S	T.O.S. D.D./4 Dis.Sta. "F"	Montreal.	21-6-19	D.O Pt II-170
19-6-19		S.O.S. D.D./4 Demob.	"	21-6-19	D.O Pt II-170
					R.O 1420

E.H.Fletcher Lieutenant,
91 Assistant Adjutant,
District Depot No. 6

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

[P.T.O.

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				

Copy of Original

SERVICE AND CASUALTY FORM (Part I).

Army Form B.103—L.
Part I.

(1) *Substantive rank *Acting rank *(To be entered in pencil to facilitate alteration.)	(2) Regiment or Corps	(3) Regtl. No.
		1251986

(4) Surname — Mc Lean

(5) Christian Names — Hamilton Alexander

(6) Army Form, number of, Attestation Form or Record of Service paper

(7) Whether of British or of Alien origin (*vide* A.C.I. 578 of 1918)

(8) Date of birth as stated on enlistment

(9) (*a*)

(10) Enlistment (*b*) (11) Engagement (*c*)

(12) Service reckons from (*date*) (13) Special conditions (if any) of enlistment (*d*)

(14) Any subsequent variations (if any) of conditions of service

(Authority) (*date*)

Initials and Rank of an Officer.

(15) Category	Date	Medical Authority	Initials and Rank of an Officer

(16) Record of Occupation in Civil life (*vide* Army Order 93 of 1917)

Industrial Group No.

Trade or Calling

Married or Single

Particulars of Trade Test

Occupation Cards despatched on (*date*)

Second Occupation Card despatched on (*date*)

(17) Next of Kin

(18) Demobilizer (*f*) (Place)

(19) Pivotal-man (*f*) (Date) Signature of Posting Officer

(20) Qualifications (*g*) *or* (21) Corps trade and rate

(22) Extended

(23) Re-engaged

(24) Miscellaneous entries:—

NOTES.—(a) Here enter particulars of any subsequent claim as to actual age after verification by birth certificate (*vide* A.C.I. 4 0 of 191). (b) Whether direct or voluntary enlistment, or called up under the Military Service Acts. (c) Whether for specified term of years or for duration of the war. (d) Whether "for Home Service only," or "not to be transferred without the soldier's consent," &c. (e) If to be retained on Home Service, period, if specified, to be stated, also authority, and on what grounds. (f) Required for demobilization purposes. (g) Signaller, Shoeing-smith, &c.

Army Form B. 103 (II.) to be gummed on here, if required.

Nothing to be written in this margin.

Forms/B. 103/3 HWV(R1460) 3/19 100,000 W10416—P2151 (6 23 19)

(A) Report: Date	(A) Report: From whom received	(B) Authority of Part II. of Orders	(C) Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named	(D) Place of casualty	(E) Date of promotion, reduction, reversion, casualty, &c.	(F) Remarks, and initials and rank of an officer
			Arrived in England S.S. Megantic 7.12.17			
14.12.17	R.B.C.G.A.	P.H.D.O. 27	T.O.S. from Canada	Witley	8.12.17	
14.2.18	"	" H.S.	S.O.S. proc O/seas	"	13.2.18	Art Pool 23 15/2/18
5.4.18	2 D.A.C.	" 50	T.O.S. from Art Pool	Field	22.3.18	" " H.S. 4/4/18.
			Certified true copy of Record Sheet.			
			A. H. Bramall LIEUT. FOR LT. COL. I/C RECORDS. C.O.M.F.			
7.4.19	L.A.A.R.D.	97	S.O.S. from 2 D.A.C.	Ripon	22.3.19	
15.5.19	L.A.A.R.D.	D.O. 135	S.O.S. to L.L.L. Rhyl.	"	14.5.19.	
14/5/19	T.O.S.	G.C.C. Kinmel Park for return to Canad MD 4			J.W. MacKay LIEUT. OFFICER I/c RECORDS,	
		Part II Order No.				
21/5/19	T.O.S.	G.C.C. Kinmel Park on Embarking for Canada Part II Order No			Officer I/c Records No 6 Concentration Wing.	

Embkd LIVERPOOL 21-5-19

Nothing to be written in this margin.

DUPLICATE

79TH BATTERY, C. E. F.

4

To be made out in duplicate.

H.Q. 54-21-23-53

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

INSTRUCTIONS.

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

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

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

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

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

---

(1) Name of Overseas Unit which Soldier joins 79TH BATTERY, C. E. F.

(2) Regimental Number 125198

(3) Full Name of Soldier Hamilton Alexander McLean

(4) Place of Birth Montreal Que.

(5) Are you married, or not ? No

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

(b) Present Postal Address

(7) Are you a widower ?

(8) Have you any children ?

If so, give number of boys and girls

Also their names and ages

M. F. W. 67.

500M.—9-16.
1772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive? Yes. Jonathan McLean. 38 Windsor ave. Wmt

If so, state name and address —

(10) Is your Mother alive? Yes. Mrs J. McLean

If so, state name and address 38 Windsor Ave. Wmt.

(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.

Date May 28 1917

A. E. Cowley
Officer Commanding
O.C. 79th Depot Battery C. E. F.

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. 125986 Rank Driver Surname McLEAN

(Given name in full) Hamilton A.

Unit or Corps C.A.S.C. Birthplace Montreal Que

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

1. GENERAL DESCRIPTION:

Physique Good Weight 140 lbs. Height 5 ft. 8 in. Colour of Eyes Blue

Nutrition Good

Pulse 72

Condition of arteries Normal

Vision Rt. 6/6 Left 6/6

Hearing (conversational voice) Rt. 20 ft.

Left 20 ft.

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

Opinion as to general health and physical condition Good

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 Yes

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.

Br. pneumonia March 1919

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

[OVER]

EXAMINATIONS

THIS SECTION FOR USE OVERSEAS—

Examined at Ripon (Overseas)

Date 6.3.19 Signed [signature] M.O.

Captain

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 Wm McLean

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

THIS SECTION FOR USE IN CANADA—

Examined at .....(Canada)

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 a Medical Board.)

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

[OVER]

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 125-1986 (Rank) Gnr.

Name (in full) McLean Hamilton Alex. enlisted in

the 79th Battery

CANADIAN EXPEDITIONARY FORCE at Montreal on the 29th

day of May 1917

HE served in France with 2nd H.A.C.

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 20 years 2 months

Height 5 feet 7 inches

Complexion Fair.

Eyes Blue

Hair Fair.

Marks or Scars Nil.

Hamilton McLean
Signature of Soldier

Date of Discharge

Issuing Officer

Lieutenant

Rank

Date May 31 1919

N.B.—As no duplicate of this Certificate will be issued, any person finding same is requested to forward it in an unstamped envelope to the Secretary, Militia Council, Ottawa, Canada.

M.F.B. 39A.
1049-D.P.-300M-11-18.
H.Q. 1772-39-882.

DISCHARGE CERTIFICATE

CANADIAN EXPEDITIONARY FORCE

C.A.D.C. 5009A

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

4

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) MCLEAN H. A.

REGIMENT C. A. R. D. RANK Drv. No. 125786

Date of Examination in England 9/5/19 | Date of Examination in France

DENTAL BOARD
9 MAY 1919
RIPON

PRESENT DENTAL REQUIREMENTS

1. FILLINGS 2. 7. 9. 10. 18. 29
2. EXTRACTIONS —
3. CROWNS —
4. DENTURES
   - (a) Full Upper —
   - (b) Part Upper —
   - (c) Full Lower —
   - (d) Part Lower —

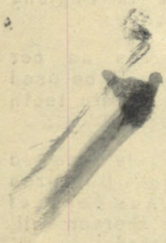
HAS HE EVER REFUSED DENTAL TREATMENT? No

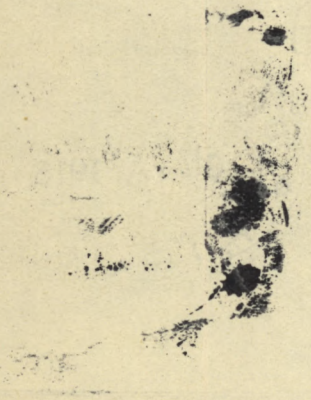
HAS HE EVER RECEIVED DENTAL TREATMENT? (Reply by "*Yes*" where applicable to any or all of *a*, *b* or *c*.)

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

E. V. Sheehan Lieut. Col.
A. D. D. S., M. D. 4

Signature of Dental Officer J. E. Thompson, Capt.





A.G.10410. 25M.

OVERSEAS MILITARY FORCES OF CANADA.

Date ..... 9 APR 1919

To:- Hospital Representative,
No. 18 CANADIAN GENERAL (ONTARIO) HOSPITAL,
ORPINGTON, KENT. Hospital.

1251986
Dvr McLean, HA
C.F.A.

The marginally named soldier has this day been medically examined and placed in Category A. and is now available to be discharged.

For your information and necessary action please.

CAPT. O.A.M.C.
ASST. ADJT. & REG.
No. 18 CANADIAN GENERAL (ONTARIO) HOSPITAL.

Officer Commanding,
..... Hospital.

Overseas.

P 559
MARRIED OR SINGLE: Single

PLACE OF BIRTH: Montreal, P.Q.

NAME AND ADDRESS OF NEXT OF KIN: Mrs J.A McLean
38 Kinnaird Ave Westmount Que.
Father

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. 125986 RANK Gnr. NAME McLean Hamilton Alexander

IF IN PERMT. CORPS WHAT UNIT — UNIT 7th C.R.A. (79 Bty)

	TRANSFERRED TO	DATE	AUTHORITY
PERMANENT FORCE ALLOWANCES			
PLACE OF ATTESTATION: Montreal			
DATE OF ATTESTATION: 28-4-17			

ASSIGNED PAY MONTHLY $ 20.00 DATE EFFECTIVE 1-12-17

PAYABLE TO Mrs J.A. McLean 38 Kinnaird Ave Westmount Que. RELATIONSHIP Mother

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

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

DISCHARGE DATE AND PLACE REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

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
1917 MONTH PARTICULARS					CR. 1	CR. 2	PARTICULARS							DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFER SER. PAY	ALLOT. ENG.															
Dec Bal from Can																																33 87			
Dec Jan Pay			68 20				AR 3913 19/1/17 CRA.							29 20																						
							AR																						40	32 87				
			68 20											29 20															40					
Feby Pay			30 80				AR																						20					
							AR 4623 CRA 30-1							4 87																						
							AR 4422 CRA 16-1							4 87																			33 93			
														9 74																	34 10			
			30 80											9 74															20	68 03				
																														88 68			
March Pay			34 10				AR																						20	29 35				
							AR 4789 CRA 12-2							4 87																						
							64005-369 " 31-1							1 32																						
							AR 1311 2 Tac. 19-2							4 46																						
							AR 1428 " 21-3							3 57																						
							AR 1409 " 16-3							4 46																			29 35			
			34 10											18 68															20					

DATE	PAY				FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS								CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
	No. of Days	Rate	Amount $	Amount c.	No. of Days	Rate	Amount $	Amount c.	No. of Days	Rate	Amount $	Amount c.				1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	1	2	3	4				Credit	Debit			

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY. * ~~ENGLAND~~ OR CANADA.	SEPARATION ALLOWANCE. * ENGLAND OR CANADA.
EFFECTIVE DATE:- 1-12-17	EFFECTIVE DATE:-
AMOUNT:- 20.00	AMOUNT:-

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

Mrs J.A. McLean
384 Windsor Ave
Westmount
Mother Que

NAME:- McLEAN Hamilton Alex
NUMBER:- 1251986

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Gunner

UNIT AND TRANSFERS

ORIGINAL UNIT:- 19 Bty
DATE ACCOUNT FIRST OPENED:- 1-12-17

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			CRA
50	22-3-18	1-4-18	2 D Ac

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
30/4	3821	Ripon	~~19 47~~			S.F. 11/4 to 23/4/19 = 12 days	~~8 76~~
6/5	5008	"	~~19 47~~				
			38 94				

DAILY RATES OF PAY AND ALLOWANCES

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

PARTICULARS OF RENDERING NON-EFFECTIVE:- Dis: Canada 31/5/19 N.R. 8433 Ripon 7/5/19 Ripon M.D. 2 & B'Bal. 40 39

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
31.3.18	Bal. Fwd								29 35		
Apl	Gn Pay.	33		Can Ass Pay.				20			
				2 D Ac 58 17/4/18	3 57				38 78		
		33			3 57			20			
May	Gn Pay.	34 10		Can As Pay.				20			
				2 D Ac 106 2/5/18	4 46						
				2 D Ac 154 17/5/18	3 57						
				On 9/R. 13 - 2 D Ac 4/4/18.	4 46				40 39		
		34 10			12 49			20	4 97		
									45 36		
Jany	Gn Pay.	33		Can A Pay.				20			
				2 D Ac 217 2/6/18	4 46						
				2 D Ac - 261 16/6/18	3 57				45 36		
		33			8 03			20			
July	Gn Pay	34 10		Can A. Pay				20			
				2 D Ac 482 6/7/18	4 46						
				" " 583 7/7/18	3 57				51 43		
		34 10			8 03			20			
Aug	G D.	34 10		Ca P				20	65 53		
				2 D Ac 631 2/8	3 57				61 96		
		34 10			3 57			20			
Sep	G P.	33		Ca P				20	74 96		
				2 D Ac 693 5/9	7 14				67 82		
				" " 738 25/9	3 57				64 25		
		33			10 71			20			
Oct		34 10		C. A. P.				20	78 35		
				2 D Ac 842 16/10/18	3 73				74 62		
		34 10			3 73			20			

NUMBER 1251986 RANK NAME McLEAN H A.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
19th Nov.	Gr. Pay	33		Bal Fwd					74 62		
Dec	"	34 10		C & G				20			
Jan	"	34 10		2DA 6.985 7/11/18	3 73						
				" 1116 29/11/18	3 73						
				" 1184 26/12/18	13 06						
					20 52						
				"				20			
				"				20	95 30		
		101 20			20 52			60			
Feb	" "	30 80		" 1424 21/12/18	7 79						
Mar	" "	34 10		" 1686 8/1/19	3 77						
				A.R. 1772, 25/1/19, 2 DAC.	3 77						
				2DAC 1832 7/2/19	3 73						
				" 1897 21/2/19	3 73						
				"				20			
				"				20			
				" 1644 8 26/3/19	4 87				92 54		
		64 90			27 66			40			
Apl	" "	33 00		"				20			
	S.P. 11/4 to 23/4 = 12 days D.O. 104 CARD. 14/4/19	8 76		"				20	114 30		
May	Gr Pay	34 10		18 6 GH 1179 11/4/19	4 8 67				79 73		
				~~ERA 3821 30/4/19~~	19 47						
				" 5008 6/6/19	19 47				~~40 79~~ 39 79		
		75 86			87 61			40	40 79		
				Endsd. K.P. 3683 20/5/19	9 73				31 66		
					9 73						

SOS. 21/5/19. SL 66 CFA

79.73
38.94
40.79

114.30
25.51
140.81
127.51
13.30

14-5-19

F

Cat. A'
S.G. 30
O.G. 3

SHORT FORM.

PROCEEDINGS ON DISCHARGE

(Demobilization.)

1. No. 125/1986

2 Rank. Drr.

3. Name. McLean Hamilton Alexander

4. Unit. C.A.R.D. 79th Batty.

5 Date of Discharge 31-5-19 Place Montreal.

6 Reason for Discharge Demobilization

R.M.R. SERVICE BADGE. CLASS "A" No. 301706

7. Authority. R.O 142 D.D.#4 D.O Pt II-170

8. Proposed Residence after Discharge Montreal. Westmount
38 Windsor Ave.

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.? B. 39. Montreal

MAY 31 1919

Hamilton McLean.
Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place Montreal

Date MAY 31 1919

Signature [illegible] Lieutenant
(O. C. Discharging Unit.)

M.F.B. 218a—300M.-11-18—1772-39-113.

LIST OF DISCHARGE DOCUMENTS.

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

1. Triplicate Attestation Paper (M.F.W. 23), or Particulars of Recruit (M.F.W. 133).
2. Casualty Form (A.F.B. 103).
3. Medical History Sheet (M.F.B. 313 or A.F.B. 178).
4. Proceedings of Med Board (M.F.B. 227, or M.F.W. 129)
5. Dental Certificate (C.A.M.C. 3108a).
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 and Clothing } Statement Q.M.G. Form (D.O.S. 2,
12. Last Pay Certificate (P.851),
13. Pay Book (A.B.64),
14. War Service Gratuity (Form M.F.W. 2595),
15. Sundry Documents.

RM.

Group..... a

Checked by No..... 44

.....

Date..... 19/5/19

09 APR 1919

No.16 Canadian General(Ontario)Hospital,
Orpington, Kent.

Date. 09 APR 1919

The undermentioned Soldier is free from Venereal, Infectious skin and all other Infectious Diseases.

Regt.No. 125.986 Name. Dr. McLean H W

M.O.i/c.....

25

Report No. 24

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

Regtl. No., Rank and Name } 125986. McLean, HA Age ____ Corps L. FA

Disease ____ Hospital O.M.A.

To Officer i/c Laboratory. Ward — 19 —

Please carry out an examination of the accompanying specimen of Urine

with special regard to Routine

Nos. of previous Reports (if any) ____

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

Date 21/3/19 J.F. Hazlewood
O. i/c Ward.

LABORATORY REPORT.

Amber

Acid

S.G. 1010

Alb. nil

Sugar. O

Date of Examination 23/3/19 A Mackay
O. i/c Laboratory.

W6591—P1803 300,000 10/18 HWV(iM374)

Army Form B. 181.

CLINICAL CHART.

(To be attached to Case Sheet.)

Corps 2 L. D.A.C. Military Hospital 5 M.H.

No. 1251986 Rank and Name Pte McLEAN. H.A. Age 20 Service 2y/12

Disease Date of admission 21/3/19 Date of discharge Result

Dates of Observation	21	22	23	24	25	26	27	28	29	30	31	1 Apl	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
Days of Disease																														
Temperature Fahrenheit	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.
107°																														
106°																														
105°																														
104°																														
103°																														
102°																														
101°																														
100°																														
99°																														
98°																														
97°																														
Pulse per Minute	100	88	80	84	68	80	76	84		80		100		104		68	108	90		90		84								
Respirations per Minute	24	20	22	20	16	20	18	18		18		22		20		20	20	20		20		20								
Motions per 24 hours																														

Admitted 8pm

(6378) Wt. W4612/P566 2,000,000 2/18 McA & W Ltd A.F.B. 181/5 (E. 2565)

Signature In charge of case.

Army Form B. 181.

CLINICAL CHART.

(To be attached to Case Sheet.)

Corps_____ Military Hospital_____

No._____ Rank and Name_____ Age_____ Service_____

Disease_____ Date of admission_____ Date of discharge_____ Result_____

Dates of Observation

Days of Disease

Temperature Fahrenheit

Time A.M. P.M.

107° 106° 105° 104° 103° 102° 101° 100° 99° 98° 97°

Pulse per Minute

Respirations per Minute

Motions per 24 hours

(6378) Wt. W4612/P566 2,000,000 2/18 McA & W Ltd A.F.B. 181/5 (E. 2565)

Signature_____ In charge of case.

Forms
I. 1237
14

Duty 11/4/19.

Army Form I.-1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
T 11618.	251986	Dvr.	McLean	H A
Year. 1919	Unit. 2nd C D A		Age. 20	Service. 2 3/12

Station and Date.

Disease Influenza & Bronco-Pneumonia

No. 16 CANADIAN GENERAL (ONTARIO) HOSPITAL, ORPINGTON, KENT.

21-3-19 Admitted to Ward 19 Temp. normal

Military History -

Enlisted May 28 1917 at Montreal
England Dec 8 1917
France Feb 12 1918

Family History - Negative for T.B.

Past Illness Chickenpox & measles in childhood.

Present Illness.

Became unwell 24 Feby 1919 with pains in head pains left side & chest more severe on deep breathing, coughed much blood in sputum, & nose bleeding - admitted 48 C.C.S 4 March 19. Then to 54 Gen^n 14-3-19 and to U.K. 21-3-19.

Present Condition - somewhat debilitated very slight cough -

Lungs Resonance slightly impaired at base of Rt lung. Left Negative -

Heart - apex in 5th Space 1/3" outside nipple line -

There is a "squeaky" murmur heard with diastole at Aortic & Pulmonary area.

5/4/19 Chest clear - Fit for Furlough & Duty

J. F. Hazlewood Capt

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

(A 1014) W3091/P/1296 3,450m 7/18 Drayton Mill Forms/I. 1237/14 (E. 3420)

(P.T.O.)

Station and Date.	

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS 8513

Date of Assignment

1 Dec 1st/17

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

20 00	~~15 00~~	20. 00	

9L4 M c21 S.K.

PARTICULARS OF SEPARATION ALLOWANCE

No. 125 1986

Rank Gnr Promoted Reverted Discharge

Soldier's Name Hamilton Alex McLean

Battalion 79th Batty. C.E.F.

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name Mrs J. A. McLean

Address 38 Windsor Ave Westmount Que

Change of Address

1

2

3

4

	Date	Cheque No.	Amount S/A	Amount A/P	Total		REMARKS
							L12496-H98
Dec	D	61238		40	40	M	① A.P. This assignment should have been effective from
Jan '18	G	60357		20	20	F	Dec 1st/17 not from Nov. as originally shown
Feb	U.	75596		15	15		(A.C.I.) A deduction of $5.00 per month will be made until
Mar	M.	92783		15	15		the $20.00 overpaid in Dec is adjusted
Apr	F.	1343		15	15		W.D. Dickson 18/1/18
May	P.	13575		15	15		
June	J.	~~25859~~		~~15~~	~~15~~		J. 25859 Cancelled ✓ 18/6/18 Credit Slip for $15.00 for Feb Mar & April 22/4/18
June	J.	1089		20	20		Mailed 24/6/18 5.00 " May. W.D.C
July	L.	32620		20	20		M.R.O. 1B 15/6/18 + A.C.I. 22/6/18
Aug	N.	35942		20	20		
Sept	Q.	48423		20	20		
Oct	T	55668		20	20	✓	M.R.O. L.P. 98900 Destroy 1st Jan 7/6/19
Nov	C	61148		20	20	-	
Dec	Y	60354	✓	20	20	-	M D #4
Jan	V	69999		20	20	-	
Feb.	2	81685		20	20.	✓	A/c Closed 31-5-19
Mar	K.	84215.		20.	20.	✓	Ret'd per. Commanding
apr.	N.	725.		20.	20.	✓	Date 29/5/19.. M.F.W.187 7/6/19
May	C	6344		20	20		Clerk L. Chadburn
				360	360		

M. F. W. 123.
400M.—4-17—1779 39-1141
L. L. 22320—M. & D. 7933.

S. K. M.

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

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

M. F. W. 128.
4'Om. 6-'7—1772-39-1141
L. L. 22330—M. & D. 7993.

AUDITOR 110 | PAYMASTER 0

M. OR S.

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

REGT. NO 1251986 RANK Gnr NAME (IN FULL) McLean Hamilton A (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN — RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? Nil — DATE EFFECTIVE

TO WHOM PAID Nil — RELATIONSHIP

ADDRESS Nil.

PARTICULARS	EFFECTIVE DATE	AUTHORITY
T. O. L.	31/5/19	D.O.C. P.S.B. M.R.#67

ORIGINAL UNIT C.E.F. 79th Bty — IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

DATE OF ATTESTATION 22/5/17 — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY $ 30.00 — DATE EFFECTIVE 1/6/19

PAYABLE TO Mrs A. McLean (Brother) — RELATIONSHIP — ANY CHANGE IN ASSIGNEE OR ADDRESS T. S. S.

ADDRESS 38 Hindsdale Ave Westmount Que. — 38 Hindsdale Ave Westmount Que. Canada

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE Canada

DISCHARGED — PLACE Montreal — DATE 31/5/19 — REASON Demob. — AUTHORITY D.O.C. P.S.B. — IF ENTITLED TO POST DISCHARGE PAY

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	C.	L.P.C. $	C.	TOTAL CREDITS $	C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	DATE	COL. NO. 2 NO.	DATE	COL. NO. 3 NO.	DATE	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.	$	C.	TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	BALANCE CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT							31	06	31	06																								31	06	"Canada"
31/5/19					5500																															
1/6/19 to 5/6/19	5	110	5	50	7000				110	50	Boot Toronto	66	487		500		1316	69									550				14706		550				5/6/19 = 155 50
									141	56																										
			Other Credits		W. S. C.		S. A.		Total		War Service Gratuity																Other Charges		W. S. G.		S. A.		Total		Balance Soldier		Balance Dependant	
					350	00			350	00																		70				70		280			
																											350				5	50	274	50		
31/6/19																												70				70		204	50		
31/7/19																												70				70		134	50		
31/8/19																												70				70		64	50		
30/9/19																												6450				6450					
																																350	—				

923003 3
1265378 4
1515079 5
1630166

Dmat

200M-3-19.—L. L. 58789-M. & D. 9825.
M. F. W. 2596.
1772-39-1396.