Duplicate

ATTESTATION PAPER.

No. a/44255

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name? Halverson — McNeill
2. In what Town, Township or Parish, and in what Country were you born? — Dalhousie NB
3. What is the name of your next-of-kin? — H. H. McNeill
4. What is the address of your next-of-kin? — Dalhousie NB
5. What is the date of your birth? — 1892 Apr 11
6. What is your Trade or Calling? — Electrician
7. Are you married? — no
8. Are you willing to be vaccinated or re-vaccinated? — yes
9. Do you now belong to the Active Militia? — no
10. Have you ever served in any Military Force? — 1 yr Sussex Regt.
    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

H. McNeill (Signature of Man).

J. J. Buee (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Halverson McNeill, do solemnly declare that the above answers made by me to the above questions 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.

H. McNeill (Signature of Recruit)

Date May 15th 1915. J. J. Buee (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Halverson McNeill, 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.

H. McNeill (Signature of Recruit)

Date May 1915. J. J. Buee (Signature of Witness)

CERTIFICATE OF MAGISTRATE.

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

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

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath before me, at Sussex this 15 day of May 1915.

[illegible] (Signature of Justice)

I certify that the above is a true copy of the Attestation of the above-named Recruit.

S S Wetmore Major (Approving Officer)
SS Batho

M. F. W. 23.
150 M.—12-14.
H.Q. 1772-39-841.

Description of Halverson McNeill on Enlistment.

Apparent Age 23 years ..... months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 6 ft. 2 ins.

Chest measurement: Girth when fully expanded 40 ins.
Range of expansion 4 ins.

Complexion light

Eyes Brown

Hair Black

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

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

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

CERTIFICATE OF MEDICAL EXAMINATION.

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

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

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

Date May 1915 [signature]

Place Sussex N.B. 55th Batt

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.

H. McNeil 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.

J. C. Kirkpatrick Lt Col (Signature of Officer)

Date May 1915 Comdg 55th Battn.

M 13.9.18

Proceedings of Court of Inquiry or on men reported Missing on Active Service.....

Attestation Papers..... 3 4

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet..... 1

Compulsory Stoppages.....

Casualty Forms..... x 2

Proceedings on discharge..... 1

Corps History Sheet.....

Date and No. of Deposit Receipt for Purchase Money and Amount.....

Parchment Certificate.....

Medical Report for Invalids..... 4

Medical History Sheet.....

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet..... 1

Clothing Transfer Certificate..... 1

Inventory of Kit.....

Last Pay Certificate..... 1

A 7 B 268-1
M 7 W 192-1
M 7 W 39a-1
A 7 B 122-1

2 Cas Cards

M. F. W. 62.
50M.-9-16.
H Q. 1772-39-935.

DISCHARGE DOCUMENTS

R. O. No.....

H. Q. No.....

Name McNeill Halverson

Regt. No. A 44255 Rank Gd

Corps 1st Can. Inf Bn C E F

Phy Unfit

~~K C D 24-2-20 ac~~

~~Re 12 4/20~~

S C R 13/3/22

Feb 23-11-19

5-27
17-2
26 2
1

REGT'L. No. 444255.

NAME Mc Neil. A.

H. Q. FILE No. 649

RANK AND CORPS Cpl. 1st Bn.

FOLLOWS No.

FOLLOWS

CABLE No.	CABLE Date	NATURE OF CASUALTY

L. L. 18950—M. & D. 7789

M. F. W. 42—30M.—4-17.
H. Q. 1772-39-893.

LIST NO.	HOSPITAL	DATE OF ADMISSION	REMARKS
126.	M.H.C.C. Halifax	22-5-17.	Adm. on leave at home.
1	" " " " St John	31-8-17	Trans. K. unit M.H.C.C
1	" " " " " "	31-8-17	Taken on List Out Pat
210.	M.H.C.C. Halifax	5-7-17.	Out Patient Taken on list
1.	M.H.C.C. St John	31-8-17.	Trans. from "B" Unit to "K. Unit."
1.	" " " " "	~~31-8-~~	
1	" " " "	31-8-17	Taken on List Out "K" to "B" Unit
222.	M.H.C.C. Halifax	31-8-17	transfered from B Unit
222	" " "	31-8-17	Add of P.Ks. O-Pat.
17	" " St John	28-9-17	S.O.L. Out Patients
No 10	M.H.C.C Fredericton	3-1-18	Tr Out-p. to In-p

H. Q. FILE No. 649-

NAME McNeill Halverson

REGT'L. No. A44255

RANK AND CORPS Cpl. 1st Bw. Fam 55th 1st R.D.

CABLE NO.	CABLE DATE	NATURE OF CASUALTY
01672	28-9-16	Seriously ill at no 4 Gen. Hosp. ~~Camm~~ Camiers. Sept. 27th 16. G.S.W. leg.
02061	4-10-16	Prev. rep. ser. ill, condition improved No 4 Gen. Hosp Camiers Oct 1st 1916
02190 W.S.M.	7-10-16	Reported Oct 1st Condition improved
04332 W.S.M.	8-11-16	Now convalescent.

L. L. Job 86907- -M. & D. 16065.

M. F. W. 42—50m.-10-15.
H. Q. 1772—39-893.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
A455	O/C. No4 Gen. Camiers	27-9-16	G.S.W L.Leg. Ser. ill.
A.459	4 Gen Dannes Camiers	1-10-16	Ser. ill. (Condition improved)
B199	To Northants War. Duston Northants	14-10-16	G.S.W L Leg
B283	To Can. Con. Woodcote P.K. Epsom	14-2-17	" " "
B22-2	" Disch.	11-5-17	" " " " " East Ant Reg.

NAME McNeill. Halverson S.O.S. Disc Over 15.2.18. V Auth. Pt. II 16 of 2-5-18. 7. West Dep.

RANK & No. Pte. A- 44255.

CORPS ~~55th~~ 12th Battalion 1st Reinforcement Draft.

ENLISTMENT, PLACE Sussex. DATE May 15/15. S.

FORMER CORPS Nil.

COUNTRY OF BIRTH Canada. Dalhousie. N. B.

NEXT OF KIN McNeill. H. H.

ADDRESS OF NEXT OF KIN Dalhousie. N. B. Can.

DISCHARGE, PLACE DATE

Sailed from Levis per S.S. "Corsican" 19-6-15 127/4.

also notify Sapper W. McNeill, # 793988

Signal Train. Depot, ~~Rockcliffe~~ army P.O. London Eng.

Auth. Inquiry Office. 30/9/16.

L. L. 71518—M. & D. 5271.

M. F. A. 22.—50m—18.14.
H. Q. 1772—39—839.

REMARKS: Taken on strength 29/6/15 12th Batt. auth: Part II O. no 662 Shorncliffe 30/6/15.
Rel. to Canada Per H.M.T.S. "Letitia" 13/5/17. auth. Discharge list 22/5/17.

W.O. Have

Number 444255 Rank Pte

Surname McNEILL

Christian Name Halverson

Units 1st Bn. Can. Inf. Theatre of War France

Date of Service ~~29-6-15~~ 28.8.15

Remarks

Latest Address Dalhousie

P.Q. N.B.

Roll No B Page 6815

DESR NOV 16 1921
REGN. NO. GA57066

R. 149.

Name McNeill Halverson Rank Cpl Reg. No. A44255

Unit 1st Bn

Next of Kin Canada

Date 1916	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
27 9.	4 Gen Hosp. Seriously ill	Camiers	G.W.L.Leg	A455	0.16 72	29/9/16
1-10.	Condition Improved.	do	do			
14-10.	Northants War Hosp.	Duston.	do	B199.		
14-2-17	C.C.Hospital,	EPSOM.	do	B282.		
29-10	Convalescent Hosp					
11. 5.	Dis to Canada.			B22		Non Roll
	26-1-16	Still there				

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

Reg. No. 44255 Name Mc Neill Stabneraton

Rank Cpl. Corps 1st Can Age 23 Service 2 yrs C.E.F.

Ledger No. Serial No.

HOSPITALS	DATE	DIAGNOSIS
St John Mil. H. B.	2-7-17	G.S.W. Lt hip & Lt leg
?	?	

P. T. O.

HOSPITALS	DATE	DIAGNOSIS

M. F. W. 2553.
75M.—9-19.
1772-39-1332.

D.M.S. 1300.

Surname	Christian Name or Names	Reg. No.
McNeill	H.	444255

Rank	Unit	Co.	Troop	Batty.
Cpl.	1st Bn. W.O.			

Hospital

4 G.H.Camiers 27.9.16

Date of Admission

Transferred Northhants War Duston Hosp. 14.10.16.

Epsom, Conval, Hosp. 14.2.17

Hosp.

Hosp.

Diagnosis

(1) G.S.W.L.Leg.

Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

DISPOSITION

Dis. 11.5.17. Date

CCL. 29.9.16 A455

REMARKS

Seriously Ill 27.9.16

" " Condition Imp. 1.10.16

To Canada per H.S. Letitia from Lpool 11th 5/17.

ch. 4.10.16 #a/459

24.10.16 B199.

20.2.17 B283.

" 28.9.17 B22 (2)

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

R

EPITOME OF HOSPITAL TREATMENT.

	Hospital	Adm.
1.		
2.		
3.		
4.		
5.		
6.		
7.		

*Name McNEILL Halverson (Local) Rank Cpl. Regtl. No. 44255

Fyle Depot Mc-15

Original unit 55th Present unit 1st Battn. X M. or S. - Age 23" Religion Pres. Ref. H.Q.

W Letitia

Port, ship, and date of arrival Halifax, N. S. 25-5-17

Next of kin Mrs. H. McNeill, mother

Address on leave Dalhousie, N. B.

Address on discharge

Transportation issued Yes No Date Character on discharge

Previous occupation Theatre electrician Date and place of enlistment Sussex, N B., May 11, 1918.

Diagnosis G.S.W. Date of Medical Boards December 17, 1917.

Date.	Remarks.	Pt. 2 Order No.
~~3-5-18~~ 15-2-18	Discharged from H.M. Service 3-5-18. D.S.#	16

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

(over)

Date.	Remarks.	Pt. 2 Order No.

M.F.W. 192.
60M.—3-18 (D.P. 353).
1772-39-1243.

Name Mckeil 15-5-15

Date of Embarkation for England 29-6-15

Proceeded to France. Returned to England.

28-8-15 13-10-16 Inv Wd

Date returned to Canada.

11-5-17

P.R.2855.

Name _____

Date of Embarkation for England _____

Proceeded to France. Returned to England

_____ _____

Date returned to Canada.

P.R.2855.

DEPARTMENT OF VETERANS AFFAIRS
MINISTÈRE DES AFFAIRES DES ANCIENS COMBATTANTS

DEATH NOTIFICATION
AVIS DE DÉCÈS

TO:
À:

DATE 3/4/75

NAME
NOM MC NEIL HALVERSON

Service No.
Matricule No 444255 ARMY WW2

CPC No.
CCP No NO 469916

WVA No.
AAC No 59996

Information Received from:
Information reçue de: DVA 93 HX DIST

Date of Death
Date du Décès JAN 3 1975

Place
Endroit Cal Hosp, Truro, N.S.

Distribution: WSR-DASG
VI - ASS
~~DC - PD~~
HO - BC

Pour le chef,
for Chief, Central Registry Division.
Dépôt central des dossiers.

DVA 24 (Rev. 2/70) BIL.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

DISTRICT DEPOT No. 7. FREDERICTON, N.B.

This is to Certify that No. A44255 (Rank) Corporal

Name (in full) Halverson McNeill enlisted in

the 55th Battalion C.E.F.

CANADIAN EXPEDITIONARY FORCE at Sussex.N.B. on the 15th

day of May 1915

HE served in not avaible

and is now discharged from the service by reason of Being no longer fit for War Service

K.R.&.O.Para 1912 392 Sec XVI.

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

Age 25 yrs 10 months

Height 6 feet 2 inches

Complexion Light

Eyes Brown

Hair Dark

Marks or Scars Scars left buttock Shrapnel wounds, also om left calf.

Signature of Soldier

Issuing Officer

Lieut Colonel

Rank

Date of Discharge February 15th 1918.

Appointment

Signed at Fredericton.N.B. this 15th day of February 1918

in Military District No. 7

File Reference No. 86 Mc-15

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
200m.—2-18.
H.Q. 1772-39-882

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

No. A44255 (Rank) Corporal Name Halverson McNeill

Unit 55th. Battalion.

Address on Discharge Dalhousie.N.B.

Character and Conduct GOOD

Former Occupation Eletriciah

Special Qualifications of Value in Civil Life

Medals and Decorations 1 Casualty Stripe

Remarks

Signed at Fredericton.N.B. this 15th day of February 19 18

W. J. Osborne

Name of Officer

Lieut Colonel

Rank

Appointment

DISTRICT DEPOT No. 7. FREDERICTON, N.B.

(9178)—Wt. W12165—2146.—1,250,000.—2-15.—C. & G. Forms B. 103/1.

a.10

Army Form B. 103.

CERTIFIED CORRECT.
Canadian Record Office,
Westminster House,
7, Millbank, S.W.

Casualty Form—Active Service.

Regiment or Corps 12th Reserve Batt.

Regimental No. A.44255 Rank Pte. Name McNeill, H.

Enlisted (a) _____ Terms of Service (a) Period of War. 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: 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.
29-8-15	3 GBD.	Draft for. 1ST CANADIAN INF. BATTALION		29-8-15	Nom Roll.
5-9-15	1st Bn	Joined	Unit	4-9-15	B213.
16-7-16	1st Bn.	To be Corporal.	Field.	15-6-16	B213. P.T.O. 30 dy 31 4/16
24.9.16	4 Gen.	G.S.W. leg. thigh. adm.	4 Gen.	24.9.16	W. 3034
13.10.16	4 Gen	Transfer to H.S. Maheno.		13.10.16	W. 3083-7470. P.T.O. 53. dy 21.10.16.
			J W Logan Capt. For Officer i/c Can. Records, Canadian Section. G.H.Q. 3rd Echelon.		
27.10.16.	CCAC.	Taken on Strength	S. ham	14.10.16	Pt. 4 DO 471
10.3.17	"	SOS to Westn Ont Regt	Hastings	10.3.17	" 116 TWORD DO 3.

R. H. Blows LIEUT: [signature]
FOR LT: COL: I/C RECORDS, C.O.M.F.

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particular[illegible] 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				
31-8-17	England	"K" UNIT TAKEN ON STRENGTH ~~D.M.T.~~ PART II. ORDER No. 16	Fredericton	15-2-18	H. W. Allingham Capt. & Adj. For O. C. "K." UNIT M. D. C. C.

"DISCHARGED" FROM HIS MAJESTY'S SERVICE
K. R. & O. 1912 Par 392 Sec. XVI.

P. W. Lindsay Lieut.
O. C. Discharge Section
For O. C. District Depot No. 7.

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

M. F. W. 54. (A. F. B. 103.
500M.—9-16
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps 12th Reserve Battalion.

Regimental No. A44255 Rank Cpl. Name McNeil, Halverson,
C. E. F.

Enlisted (a) 15/5/15 Terms of Service (a) Duration of war Service reckons from (a) 15/5/15.

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

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

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				
31-8-17	England	TAKEN ON STRENGTH PART II. ORDER No. 1	Unit Fredericton WB		
					T H Rand McNally Capt, & Adjt, For O. C. District Depot No. 7.
		"DISCHARGED" FROM HIS MAJESTY'S SERVICE K. R. & O. 1912 Par 392 Sec. XVI.			
27-8-18		D.S.O.# 16 3-5-18		3-5-18	R. W. Lindsay Lieut. O. C. Discharge Section For O. C. District Depot No. 7.

(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				

35839

R—122.

Rank — Name: McNEILL Halverson — Reg'l No. A 44255

Unit 55th BN. — If in perm. Corps, What Unit? — Married or Single Single.

Place and Date of Enlistment Sussex. N.B. 15th May.1915 — Place of Birth Dalhousie.N.B.

Name and Address, Next-of-Kin H.H.McNeill, Dalhousie. N.B. — Relationship

N/E. R.B. No. 1633
File R.L.
Category MV. Can.

Assigned Pay Monthly $ — Payable to — Relationship

Separation Allowance $ — Payable to — Relationship

Discharge, Date and Place — Reason — Character

26.10

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
30-6-15	OC 12th	Taken on Strength 12th	Shorncliffe	29.6.15	Part II. 0662
29/8/15	do.	Drafted to 1st Bn.	France	28/8/15	Part II. do. No. 1152. " " " 28—1st Bn
14.6.16	OC 1st Div Eng	Attch. to 3rd Fld Coy, 1st Div Eng.	"	1.5.16	Pt II. 24
7.8.16	1st Batt.	Promoted to Corporal.	—.—	15.6.16.	—.— 31.
29.9.16.	—.—	G.S.W. L.leg. #4 Gen. Hosp.	Camiers.	27.9.16.	C.L. a 45 S. Seriously ill.
4.10.16.	—.—	—.— #4 " "	"	1.10.16.	C.L. a 459. Condition Improved.
24.10.16.	—.—	—.— Northants War Hosp.	Duston Northants.	14.10.16.	C.L. B 199.
21-10-16	—.—	Transfd to C.C.A.C.	Fld	13-10-16	Pt II O #53 W.
27-10-16	A.C.A.C.	Taken on strength	Shorn.	14-10-16	Pt II O. 471.

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				
20-2-17	1st Bn	Ffd Can Conv Hosp Woodcote Pk	Epsom	14-2-17	C.L.B. 282. G.S.W. L. Leg
10-3-17	C.C.A.C.	S.O.S. to Western Ontario Regt	Hastings	10-3-17	Pt II O. 116
12. 3. 17	Wt. Ont. Regt. Depot	T. O Sgth. from C.C.A.C.	Bramshott	10.3.17	Pt II O. 3.
23.5.17	"	S.O.S. on proc. to Can. for dis.	"	11.5.17	— 66.
27-9-17	W.O.R.	Dis. Can Conv. Hsp Woodcote Pk.	Epsom	11-5-17	C.L.B. 22 G.S.W. L. Leg
	Sixth Depot	Conval Home M.D. no. 6	Dalhousie N.B.	22 5 17	N/R 270

FORM TO BE USED INSTEAD OF BLANK SPACE ON ARMY FORM 158

PROCEEDINGS OF MEDICAL BOARD AT DISCHARGE DEPOT.

DEPT. MILITIA & DEFENCE
JUN 1 1917
H. Q. 649-M-9057
CANADA

Number, Rank, Name & Corps of disabled Soldier:- A 44255 Corporal McNeill, Halverson

Previous civilian occupation:- 1st Canadian Btn. C.E.F. Electrician

Is he able to resume previous civilian occupation:-

Cause of disability:- G.S.W

Condition, in detail, which prevents the Soldier from earning a full livelihood:- Presents a broad deep scar exting obliquely across the left gluteal region from sacroiliac region downwards & outwards another broad scar with tendency to keloid from great trocanter upwards for 3 inches - small scars posterior and external surface of middle of left leg. Movements of knee & ankle normal. Complains of pain on movement of hip joint - describes it as running from buttock down back of thigh. Walks with a very decided limp and uses a stick as support. Can walk about 1/2 mile without inconvenience or pain

OPINION OF THE BOARD

Degree of incapacity - (please state in fractions) 50%

Disability due to Service:- 50%

Probable duration of incapacity:- Six months

Does it render him permanently unfit for Military Service:- yes

Would operation, special treatment or the use of appliances etc., lessen incapacity:- yes

Recommendation of Medical Board:- That he be given treatment in a Convalescent Home

Station:- Halifax, N. S. J. R. Cristen Capt. R.C. President

CLASS:- # 2 D. J. Macdonald Member

Date 22-5-17 F. H. Anderson C.S. Member

APPROVED

Date _____ C. H. Monn

Asst. Director Medical Services.

Date _____

Director General Medical Services.

B. P. C. FOLIO
FALSE DOCKET
2

26

Forms
I. 1237
10.

2x

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
G26/640	44255	Cpl	McNeill	H

Year	Unit.	Age.	Service.
1916	1st Bat.	23 yrs	1 10/12 yrs

Station and Date.

Disease G.S.W. L. thigh. Tx. ①.

14 Oct 1916. Duston Northampton

Wounded 21 Sept. A.T. serum given 23 Sept.
Opt. No. 4 General Hosp. Camiers. 26 Sept.
Wound cleaned & drained.

On admission lacerated flesh wound – clean between L. trochanter & crest of ilium.
Large deep. opt. wound to outer side of L. sacro iliac synchondrosis – deep sinus at centre.
No bone nor fb. felt. Both wounds clean – granulating. Ensol.
Two small superficial wounds L. calf. E.M. White.

18 10/15

Recommended for transfer to aux Hosp. A.
Cannot parade for kit – stretcher –
E.M. White.

(386)

F. J. Stuart.

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

(J 3521.) Wt. W 5606—2621. 2,000,000. 7/15. D & S.

P.T.O.

Station and Date.	

Forms
I. 1237
10

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
G26/640	44255	Cpl	Mc Neill	H.
Year 1917	Unit. 1st Canadians		Age. 23	Service. 1 11/12

Station and Date.

Northamptonshire War Hosp.

Disease G. S. W. thigh.

Wounded France 21/9/16.

Wounds healed. Awaiting transfer to Canadian Con.

Transferred to W.P. Epsom Feb. 13/17

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

(J 3521.) Wt. W 5606—2621. 2,000,000. 7/15. D & S.

P.T.O.

Station and Date.	

CLINICAL CHART.

(To be attached to Case Sheet.)

Army Form B. 181.

Corps _____ Military Hospital _____

No. 4422 S5 Rank and Name Lpl McNeill Age 23yrs Service _____

Disease _____ Date of admission 14th Oct. 1916 Date of discharge 24 Oct 1916 Result _____

Dates of Observation: Oct

Days of Disease: 14 15 16 17 18 19 20

Temperature, Fahrenheit

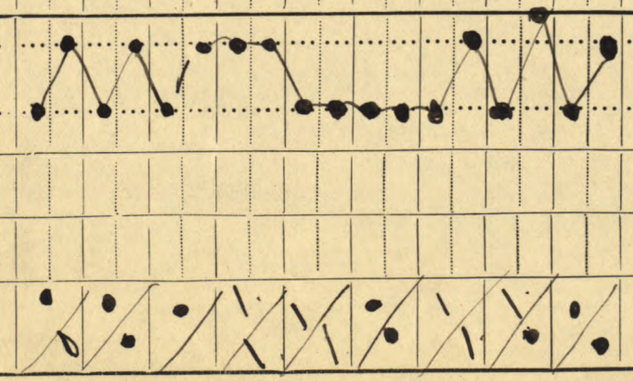
107° 106° 105° 104° 103° 102° 101° 100° 99° 98° 97°

Time A.M.P.M.

Pulse per Minute

Respirations per Minute

Motions per 24 Hours



(3103.) W 7204-1542. 750,000. 8/15. H. & Sp. Forms/B. 181/3.

Signature _____ In charge of case.

COPY

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE DISTRICT DEPOT No. 7

This form to be used for all Ranks (Vide Articles 122, 130 and 141, Financial Instructions, 25715c, C.E.F., 1916).

Regimental No. 444255 Rank Cpl. Name McNeil H.

Corps 1st Bn. who was* Discharged

On Feb. 15 191..., to

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from Feb. 1. 1918., to Feb. 15 1918., the inclusive date of transfer or discharge.

Dr.	$	c.	Cr.	$	c.
Bal. Dr. from prev. month			Bal. Cr. from prev. month		
Advances by Cheques No.			Regt'l Pay 15 days at $ 1 c 10	16	50
Advances by Cheques No.			Field Allow. 15 days at $ c 10	1	50
Assigned Pay and Sep'n Allce. No. 2800	59	70	Separation Allowances* (Monthly)		
Other charges			Other Allowances* Clo. Allce.	13	00
Payment on transfer or discharge No 1957	33	60	Other Credits*		
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)	62	30
Total	93	30	Total	93	30

*Give particulars.

A monthly stoppage of $ Nil (†) has (‡) been paid on account of Assigned

{Pay for the month of 191...
and Sep'n Allce. for month of 191...} (to) Assignee

Made By R Rivers
Checked By
No. Last Part II D.O. 16
Date Ottawa 22nd 1918

(Address)

(†) Insert amount to be assigned, whether it has been paid or not.
(‡) Insert "not" if amount has not been paid for period of account.

M.D. No. 7 No. 10

On Transfer of an Officer

Outfit Allowance of $ has been paid by Paymaster, Military District No.

REMARKS:—

State (1) date of enlistment

(2) if married and if a Separation Allowance Card has been submitted No

(3) cause of discharge authority O.C. "K" Unit. 15/2/18. D.O.

(4) authority for transfer

NOTE.—Separation Allowance and Assigned pay Card and Index Card (M. F. W. 71) are to accompany the original Last Pay Certificate on transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay-list of the unit.

Date April 25, 1918

Place Fredericton, N. B.

Captain
Paymaster District Depot No. 7.
Paymaster.

N.B.—For purposes of transfer this form is to be made out in quadruplicate. Original copy to paymaster of new unit; duplicate to District Paymaster; triplicate to accompany the pay-list at the end of the month, and quadruplicate for retention as a record.
For purposes of discharge it is to be made out in triplicate. Original copy to accompany discharge papers; duplicate to accompany pay-list at the end of the month, and triplicate for retention as a record.
If a man on discharge is entitled to three months' Post Discharge Pay, Last Pay certificate will be made out in quadruplicate. The original Last Pay Certificate will be forwarded with other documents to Paymaster Post Discharge Pay and triplicate, with his discharge documents.

M. F. W. 44.

300M.—2-18.
H. Q. 1772-39-903.

POST DISCHARGE PAY OFFICE

29615-5-91

Three months pay and allowances after discharge.

Name McNeil, Halverson
Surname Christian Name

0125-25-H-1.

Regimental Number 444255 Rank Cpl.

Address (in full) Dalhousie, N.B.

Unit 1st Bn.

Original Unit

District where paid M.D.7

Date of Discharge 15-2-18

P. D. P. Filing Number 6-11-7

Rates:—Regimental pay $ 1.10 per diem: Field Allowance $ .10 per diem. Separation Allowance $ per month.

L. L. 22573—M. & D. 8009.

Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Over-payments to be Recovered	Total Amount Paid
	Cheque No. A	Date	Amount 30 days	Cheque No. B	Date	Amount 30 days	Cheque No. C	Date	Amount 31 days		
109 20	152	30-6-18	36 00	148	30-7-18	10 90				62 30	46 90

M. F. W. 127.
60M—6 17.
1772 39-1140.

Remarks:

Dec'n No 29615/591 W. S. G. File No 012525-N-35

Award..... days at $ per day $ 70.00

S. A..... months at $ per mo. $ $350.00

Less P, D. P. Credited $109.20

$

Less further debit balance $.....

Net due paid as below 240.80

TO SOLDIER TO DEPENDENT

	0	Ag. No	Ch No	Amount	No	Ch No	Amount
12/4/19	1	2843	439783	210.00			
	2	~~1708B~~	~~~~	~~30.80~~			
	3	~~~~	~~~~	~~~~			
26.5.19	4	1708C	472926	30.80			
	5						
	6						
		Total					

Dalhousie, N.B.

GEN'L AUDITOR
Posting checked by
[signature]
Date 9/10/19

M. F. W. 41
1 0M—7-16
1772-39 889. 748

Name McNeil Cpl. H.

Regimental No. 444255

Name and address of next-of-kin Dalhousie N.B.

Unit 1 St. Bn.

Date of enlistment 11-5-15

Place of " Sussex

Married (yes or no) No

Date and place discharged

Amount of pay assigned monthly $ 17.00 1/7/15 - 30/4/17 374.00

Reason for discharge

To whom payable S.A. — Nil

Character on discharge

Letitia 22-5-17

II 649-M-9057

ob 5351—M. & D. 6880.

Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
	14/6/16							115 43								L. P.C.
19/4/17	31/5/17	43	1.10	47 30	43	10	4 30		167.03					110.00		Halifax D.D.
										Cr Bal of				57 03	167 03	
																from 1/6/17 "B" MD 6
																E.a.p. 18/6/15 - 30/4/17 = 374.00

Name.....

M. F. W 41
1 0M—7-16
1772-39 889.

Regimental No.

Unit

Date of enlistment

Place of "

Married (yes or no)

Amount of pay assigned monthly $

To whom payable

Name and address of next-of-kin

Date and place discharged

Reason for discharge

Character on discharge

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date					

L-L. Job 5470—M. & D. 6888

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12
50m.—7-16
H.Q. 1772-39-819

To Whom Mrs. H H McNeill,

Address Dalhousie, N.B.

By Whom Assigned Mc Neill. H.

Regtl. No. 444255

Rank Cpl.

Corps C.E.F.

SPECIAL REMITTANCE

Rate $ 100.00

Sched 326 3 3/17.

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March		Y53241	100 —	
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

CONSOLIDATED 3 ACCOUNT

42013 THE MORTIMER SYSTEMS, OTTAWA, CANADA

271

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

To Whom Mrs H. H. McNeil
Address Dalhousie N.B.

Rate $17-

JUL 1 1915

By Whom Assigned McNeil H.
Regtl. No. 444255
Rank Pte.
Corps 55th Bat (Reinforcmts)

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			Stop 1st May 1917
Sept.				Discharged to Canada
Oct.				3 M 18 4/17 GOD 9 5/17
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
Apl.				
May				
June				
July		S1972	17-	
Aug.		T3123	17-	
Sept.		X 103	17-	
Oct.		Y1239	17-	
Nov.		K 4052	17	
Dec.		L 6432	17	
Jan.	1916	L10709	17	
Feb.		N 14119	17	
March		S 15028	17	

COPIED FOR 4 CASUALTIES.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

242

M. F. W. 12a.
60m.—12-15.
1772—39—819.

Sheet No. 2. Mrs H. H. McNeil

Name of Soldier McNeil H.
55. Batt

L. L. Job 89002.—Req. 6213.

Month.	Year.	Cheque No.	Amt.		Remarks.
				$17.00	
April	1916	L1459	17		
May		L5729	17	–	
June		E2387	17		
July		U8931	17		
Aug.		C13716	17		
Sept.		W18588	17		
Oct.		W23794	17		
Nov.		M29000	17		
Dec.		T31342	17		
Jan.	1917	M39712	17		
Feb.		M45593	17		
March		G51671	17		17.W
April		C3228	17		17.E. Stop 1st May/17 3 Mo 18 4/17 Gmd 9 5/17
May		~~C9459~~	~~17~~		17 K — C9459 Cancelled W
June					$374 A/c Closed 30/4/17
July					Ret'd per Letitia
Aug.					Date 11/5/17 F X 13/6/17
Sept.					
Oct.					Clerk A.H.B.
Nov.					
Dec.					
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.				

Rank Name McNEILL Halverson Reg'l No. ~~A 44255~~ 444255 P—56

Unit 55th BN. If in perm. Corps, What Unit? Married or Single Single.

Place and Date of Enlistment Sussex. N.B. 15th May.1915 Place of Birth Dalhousie.N.B.

Name and Address, Next-of-Kin H.H.McNeill, Dalhousie. N.B.

Relationship

Assigned Pay Monthly $ 17.00 Payable to Mrs H. H. McNeill (above)

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Canada 19/4/17 Reason Character

Entered on N.E. Card Index EM

Checked by T. Williams

Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
18:6:15	31:7:15	44	1.00	44 ..	44	10	4 40	10 53	58 40			20 :	17 :		37 ..	21 40. 21 93.	Exchange
1/8/15	31/8/15	31		31	31		3 10		34 10	201 238		12 17	17		29 17	26 86	Trans to 1st Batt
1/9/15	30/9/15	30	1.00	30 -	30	10	3 -		33 -	456 485		5 36	17		22 36	37 50	
Oct 1st	Oct 31	31	1.00	31	31	10	3 10		34 10.	521 568		5 24	17	55	22 49	48 81	55¢ A.F.W. 3069 / 181 GBD.
Nov 1	Nov 30	30	1	30	30	10	3 -		33 -	305 600		12 41	17		29 41	52 40	
Dec 1st 1916	Dec 31	31	1	31 -	31	10	3 10		34 10			13 96	17		30 96	55 54	
Jan 1	Jan 31	31	1	31 -	31	10	3 10		34 10			5 22	17 -		22 22	67 42	
Feb 1	Feb 29	29	1	29 -	29	10	2 90		31 90			5 23	17		22 23	77 09	
Mch 1	31	31	1	31 .	31	10	3 10		34 10			5 24	17		22 24	88 95	Cr Bal.
				288			28 80		327 33			84 83	153	55	238 38		

Carried forward to Large Ledger sheet

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks; Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date						

MARRIED OR SINGLE S.

PLACE OF BIRTH Dalhousie N. B.

NAME AND ADDRESS OF NEXT OF KIN H. H. Mc Neill
Dalhousie N. B.

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
Promoted Corporal	15/6/16	Bo 31/7/8/16

ADMISSIONS TO HOSPITAL, &c.

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

REG'L. No. 444255 RANK ~~Pte~~ Corporal NAME Mc Neill . Halverson.

IF IN PERMT. CORPS WHAT UNIT | UNIT 1st Battalion TRANSFERRED TO 16a & G DATE 21-1-17 AUTHORITY Bo 21/10/16 C.R.B. 199 24/10/16

PERMANENT FORCE ALLOWANCES TRANSFERRED TO Dept. "L" DATE 19.4.17. AUTHORITY Epsom 8/4/17.

PLACE OF ATTESTATION Sussex N.B. TRANSFERRED TO K. DATE 20.4.17 AUTHORITY

DATE OF ATTESTATION 15 May 1915 TRANSFERRED TO Non Effec. Branch. DATE ✓ AUTHORITY ✓

ASSIGNED PAY MONTHLY $ 17.00 DATE EFFECTIVE

PAYABLE TO Mrs H.H. McNeill . Dalhousie N.B. RELATIONSHIP

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) 18/4/17 EFFECTIVE 1/5/17 REASON Discharge to Canada

DISCHARGE DATE AND PLACE 19/4/17 Canada REASON AND AUTHORITY Epsom 8/4/8 8/4/17

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

PAY OFFICE, R.E. BRANCH DEC 29 1917 MILITARY ESTIMATES

Entered on N.E. Card Index 8/1

Checked by T. J. Sullivan

C.J. C.M.

DATE	PAY No. of Days	PAY Rate	PAY Amount $	PAY Amount c.	FIELD ALLOWANCE No. of Days	FIELD ALLOWANCE Rate	FIELD ALLOWANCE Amount $	FIELD ALLOWANCE Amount c.	WORKING OR SPECIAL PAY No. of Days	WORKING OR SPECIAL PAY Rate	WORKING OR SPECIAL PAY Amount $	WORKING OR SPECIAL PAY Amount c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE Credit	BALANCE Debit	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	✓	REMARKS
1916			288				28 80							10 53	327 33											84 83		153	55	238 38	8895				✓	
apr 1/30	30	1st	30	-	30	10	3	-							33 -	932	975							261 ✓	262 ✓			17 -		22 23	99 72					
May 1/31	31	1st	31	00	31	10	3	10							34 10	992						CE 1500	24/5/16	2 55 ✓		2 55 ✓		14 -		22 10	111 42					
Jne 1/30	30	1st	30	-	30	10	3	-							33		1082 15/4/16 1042 3/6/16							3 41 ✓ 2 55 ✓				14 -		22 96	121 46					
July 1/31	31	1	31		31	10	3	10							34 10		1107 24/6 485 15/7							1 74 ✓ 88 ✓ 1 75 ✓				17 -		21 34	134 52					
Aug 1/31	31	1st	34	10	31	10	3	10						470	38 80	1113 7 1155 8/8	33							174 ✓	262 ✓			17 -		21 36	155 06					
Sept. 30	30	1st	30		30	10	3								33	1314	21/8 1333	14/9 ✓						348 ✓	1046 ✓			17		30 94	157 12					
Oct 20	1st	22		20	10	2							3		25												17		17	167 12					
Nov 30	-	33	.	30	.	3	.						12 -		48 -												17		—	215 12					
Dec 1-31	31		34	10	31		3	10							37 20												17		34	218 32					
Jan 31		1st 10	33	20																							17		17	238 32					
Feb 28			37	28											37 20												17		17	255 52					
March 1-31	31		33	60											33 60												17		17	289 12					
			37	20											37 20							85 Epsom 21/7 ✓		RR 1237 ✓ Epsom 24/7/17			100	117		126 73	165 59	Carried forward				
			726	40										10 53 19 70	756 63									209 6	25 15	87 38	100	357	55	591 04						

From C.F.L. 15/6/16 Bo 31/7/8/16
47 days @ 1/-

Underpaid as Lance Corporal
Trans to 16a & G Bo 21/10/16

Underpaid as Private
Trans to CCAC "Channel"
As P.T. 17/- not ckd Nov
Trans to CCAC 11-17 Bo 54 21/10/16
C.R.B. 199 24/10/16

Checked

Small Ledger Sheets.

Work out Reg Depot Sailed per H.S. Lapland 11/5/17.

444255 Mc Neill H. A.P. 17xx

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.																																			
April			726	40										30 23	756 63									2096 25	15 87	38 100	357	55	591 04	165 59					
1-18	18	1/20	21	60											21 60												17		17	170 19					
															799 23										4 81						2				
														1 20	1 20										4807				55	114 73					
															779 03															115 53				
																													66 00					

1036 Marked 17/7/17
1781 " 7/11/17
147 " 14/11/17

MONTH	PARTICULARS	DR.1	DR.2	PARTICULARS	DR.1	DR.2	DR.3	DR.4	BALANCE	DEFERRED PAY	SER. ALLCE. ENG.
	Balce FORWARD								115 43		

Balance transferred to Canadian Liability. 9/6.

Balance transferred to N. E. Branch. NIL

To Dept to 12/5. 8.4.17

Underpaid one day, Oct 1916

A.3M. FORM REN'D 8/4/17 EFFEC. 1/5
DISCHARGED TO Canada DATE 19/4/17
PAYBOOK VERIFIED Extracts
BAL. 115 43 L.P.C. REN'D
AUTHY. Epsom 12/5 8/4/17

Invalided

Checked Kidd LRO

DISTRICT DEPOT No. 7. FREDERICTON, N.B.

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. A 44255

Rank Corporal

Surname McNEILL

Christian Name HALVERSON

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

Corps (Squadron, Battery or Company) 1st. Canadian Inf. Bn. -- C. E. F.

Date of Discharge February 15th, 1918

Place of Discharge Fredericton, N. B.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 25 years 10 months.

Height 6 feet 2 inches.

Complexion Light

Eyes Brown

Hair Dark

Trade Electrician

Intended place of residence (To be given as fully as practicable.) Dalhousie, N. B.

Descriptive Marks

Scars left buttock from Shrapnel Wounds; also on left calf.

2. The above-named man is discharged in consequence of being no longer fit for War Service. K.R.& O. 1912. Para. 392. Sec. XVI.

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.

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

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

" GOOD "

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.)

K C
24-2-20
ac

M. F. B. 218.

100M.—1-17.
H. Q. 1772-39-113.

(OVER)

Stas
23-10-19
H.C.A.

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..... ONE CASUALTY STRIPE

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) Fredericton, N. B. A. J. Osborne Lieut. Col.

(Date) February 15th 1918 *O. C. District Depot No. 7.*
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)..... Capt W. McNeill *(Signature of Soldier.)*

(Date)..... E. R. Richard *(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.

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

10. **Statement of Service.**

Service toward Engagement to.....(the date to which the Record of Service is completed) 2 years 285 days.

Total 2 years 285 days.

11. **Confirmation of Discharge.**

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

(Place) Fredericton, N. B. A. J. Osborne Lieut. Col.

(Date) February 15th 1918 *(Signature)* *O. C. District Depot No. 7.*

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
Cpl. N. McNeill.

(OVER)

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.

Triplicate B.P.C.

(Medical Officers will please read this Form carefully before using it. See instructions, page 4.)

FORM TO BE USED FOR WARRANT OFFICERS, N.C.O'S, AND MEN

MEDICAL HISTORY OF AN INVALID

STATION St. John N.B. DATE Dec17/17

1. (a) Unit 1st Bn C.E.F. (b) Regimental No. 444255 (c) Rank Cpl/

(d) Surname McNeil (e) Christian name Halverson

2. Age last birthday 25 Date of birth April11-1892

3. Enlisted at Sussex on Mayll,1915.

In the 55th Bn C.E.F.

4. Personal description :—

(a) Height 6½ (b) Weight 185 (stripped) (c) Complexion Fresh

(d) Colour of hair Dark (e) Colour of eyes Brown (f) Identification marks Scars on left buttock from shrapnel wd.s.also on left calf.

5. Address after discharge (for the use of the Board of Pension Commissioners.)

Dalhousie?N. B.

6. Former trade or occupation Moving Pisture Theatre Manager.

7. (a) Service — Years 2 Days 212

	Periods From	Periods To
55th Bn C.E.F.	11-5-15	18-6-15
12th Res Bn	18-6-15	1-9-15
1st Bn	1-9-15	23-5-17
"B" Unit M.H.C.C.	23-5-17	31-8-17
"k"Unit	31-8-17	Present.

(b) Has he been Overseas ? Yes 13 mos. in France

8. Present disease or disability (use authorized nomenclature if possible). Partial loss Function left Hip and Leg.

(a) Date of origin Sept 21,1916. (b) Place of origin Courcelette France

(c) Cause* Shrapnel Wd.left buttock and calf.

*(Here include original disease or injury)

9. Present condition. (Important, to be a full description of the present disabling condition or conditions).

General condition good. Complains of stiffness about left hip joint, and sensation of numbness at buttock of thigh of same side. Movements at left hip cause sensation of pain and left hip tires easily. The movement of flexion at left hip 25% below normal. Abduction also 25% below normal. There is a large deep scar in left buttock extending from left Sacro-iliac region to outer side of buttock. Also a deep broad scar broad scar over great trachanter of femur-3½" long. Both scars are healed. There is marked loss of tissue beneath them and contraction of scar tissue. This interveres with the muscular movements, especially the scar over left trachanter. Patient has a limp, uses a stick to walk. Left leg gives out after a walk of one half mile. Scar on left calf causes no Disability.

[After describing all abnormalities, anatomical and functional, contributing to present incapacity (see section 11) state whether such incapacity is directly due to (a) weakness, (b) loss (complete or partial) of an organ or member or of its functions, or (c) to the necessity for rest of the body or of some of its parts.]

M. F. B. 227.

150M.-6-17.
1772-39-117.

10. History ;

Here give a description of wounds, scars, deformities, and signs and symptoms of abnormal conditions present and not included in answer 8. This section cannot be completed without stripping the soldier and subjecting him to a thorough physical examination

On Sept 21,16 at Courcelette sustained shrapnel wounds about left buttock hip and calf. Lay 2½ days in trench. Infection followed. Wounds eventually healed with contraction of scar tissue, leaving impared function of left hip and pain and fatgue on movements thereof.

11. To what extent, state in percentages, is capacity to earn a livelihood in the untrained labour market reduced? If there is more than one disabling condition, estimate the incapacity due to each, and that due to all combined.

40%

12. Did the disability arise on or off duty? On duty in trench

13. Was a Court of Inquiry held? No.

14. If the disabling condition had its origin before enlistment, has it been aggravated on service?

Yes..... No. N.A.

(If the answer is in the affirmative, state in percentages, to what extent the soldier is incapacitated by that aggravation.)

15. Was the disability caused or aggravated by negligence, by vice or by misconduct, or by unreasonable refusal to accept treatment? No.

(If the answer is in the affirmative, state in percentages, to what extent the patient is incapacitated by that causation or aggravation. In answering this question, conduct sheets should be considered. If treatment has been refused, the circumstances surrounding the refusal should be described on page 4.)

16. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? Permanent.

17. Treatment (Case reports, general or special, should be secured and attached where possible). Hosp. in France 1 Mos. Operation for removal F.B. Drainage for infected wounds. Hosp. in England. Con. Home in Eng., and Canada. Massage, electric & orthopaedic movements.

18. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit?

No

No, patients disabilities now reduced to minimum.

19. Can the former trade or occupation be resumed? Yes

20. Recommendations That no 444255 Cpl, Halverson McNeil, of 1st Bn C.E.F. be placed in Category "E" and be allowed to pass under his own control.

E W Lanney Lt Col

Medical Officer by whom the case is brought forward.

STATEMENT OF THE SOLDIER.

(Sections 8, 9 and 10 are to be read to the soldier.)

I, the undersigned Halverson McNeil. have heard the description of my disability read, and am satisfied (or not satisfied) with it. (If dissatisfied, statement should follow.) I complain in addition of

Cpl H. McNeill

Signature of soldier examined.

OPINION OF THE MEDICAL BOARD

21. Does the Board concur with the preceding report? If not, give differing opinions, with reasons, quoting the number of the answer criticized.

Yes

22. Is the soldier fit for

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

Yes

23. It is certified that the soldier

(a) Does require treatment.
(b) Does not require treatment.
(c) Should pass under his own control.
(d) Should not pass under his own control.

(Strike out condition not applicable).

24. It is recommended that the soldier be discharged. (When not for discharge add special recommendation).

No; 444255 Cpl. McNeil Halverson 1st Bn 1st Brigade C.E.F. be allowed to pass under his own control as his best opportunity of fully regaining his former health treatment apart from time will not further benefit.

Category "E"

Ralph B. Cox Capt AMC President.

R. Gillis Capt AMC
R.C. Hastings Lieut AMC } Members.

STATION St, John N.B.

DATE Dec 20th 1917.

APPROVED BY

DATE 29/12/17

AC Ford
Assistant Director of Medical Services.

A.D.M.S. M.D. No. 7

APPROVED BY

DATE

Director-General of Medical Services.

TO BE COMPLETED WHEN TREATMENT IS REFUSED

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

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

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

INSTRUCTIONS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" will be carefully followed.

2. The Medical Officer in charge of the case is responsible for the proper completion of pages 1 and 2 of this Form. The President of the Board of Medical Officers is responsible for the proper completion of the space, of page 3, reserved for recording the Proceedings of a Board of Medical Officers.

3. In answering the questions, Medical Officers will carefully obtain and record the soldier's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the soldier concerned, from witnesses, or from documents.

4. If a complete answer to any question requires more space than that reserved for it, the answer may be continued on the blank space on this page.

5. The nomenclature of diseases to be followed is that described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London, (1915), by Messrs. Harrison and Sons.

A.F.B. 179 Canada (Revised).

Reserved for M.H.C.

Regt. No. 44255 Rank C/L Surname McNeill Christian Name Halbertson

Unit or Corps—(a) Overseas from United Kingdom 1st Bn (b) In United Kingdom 12th Res

Born at—Town Dalhousie County or Province New Brunswick Country Canada

Date of Birth—Day 11th Month April Year 1892 Age 25 yrs. months.

Joined at Sussex N.B. Date May 11th 1915

Former Trade or Occupation Electrician

Permanent marks or peculiarities that will serve for future identification:— Shrapnel Scars on Left Leg. (Left)

Height—feet 6 inches 2 Colour of eyes Brown

Signature of Soldier (*for identification purposes*) H. McNeill

Medical Report.

☛ *The answers to the questions below are to be filled in by the Officer in medical charge of the case. He will carefully discriminate between the soldier's unsupported statements and the evidence as recorded in the medical or other military documents bearing on the case. He will plainly state the existence of any of the disability prior to the soldier joining for the present war.*

1. DISABILITY (*State the actual disabling conditions as distinguished from the diseases or injuries from which they resulted*). (*Follow the official nomenclature as far as possible.*)

Group the disabilities, placing those resulting from separate causes in separate groups.

Disabilities Group (*a*). Partial loss of function of Lt. Hip + Leg
from Flesh wounds of Left hip, thigh

Disabilities Group (*b*).

Disabilities Group (*c*).

2. CAUSE OF DISABILITY. (*Follow the official nomenclature in stating the disease or injury.*)

	Disease or injury to which the disability is due.	Place of origin.	Date of origin.
(*i.*) As to Group (*a*) above.	G.S.W. Lt. Hip + Lt Leg	Connecelette	21/9/16
(*ii.*) As to Group (*b*) above.			
(*iii.*) As to Group (*c*) above.			

NOTE.—By Active Service is meant Service with the Colours in Canada, United Kingdom, or elsewhere during the present war (since August 4th, 1914).

3. Is the disability due to disease contracted or injuries received prior to Active Service? No

(*i.*) As to Group (*a*) above? No If yes, has Active Service aggravated it? —

(*ii.*) As to Group (*b*) above? — If yes, has Active Service aggravated it? —

(*iii.*) As to Group (*c*) above? — If yes, has Active Service aggravated it? —

4. Is the disability due to disease contracted or injuries received while on Active Service—

(*i.*) As to Group (*a*) above? Yes

(*ii.*) As to Group (*b*) above?

(*iii.*) As to Group (*c*) above?

PART I. (*continued*).

5. If a cause of disability was an injury received on Active Service, was it received—

(*i.*) While on duty? Yes (*ii.*) While off duty? No

(*iii.*) Was a Court of Inquiry held? — (*iv.*) Where? — (*v.*) When? —

(*vi.*) Opinion of the Court? —

6. HISTORY OF THE CASE. (*State concisely the essential points of the history, noting the entries made on the Medical History Sheet and other records.*)

On patrol in front line trenches at Courcellette, when struck on left hip + Lt calf, by shrapnel. ~~Lay~~ Lay 2 days in the trenches after being hit. Treated at dressing station then at No 4 Gen Hosp Camiers, where operation was performed for removal of shrapnel, then to Dunstan War Hosp for 10 days. then to Daventry Mill Hosp. North Hants 5 months. where he had 2 months massage + electrical treatment. then to C.C.H. Epsom where he had 5 weeks massage treatment.

7. PRESENT CONDITION. (*Give previous and present weight if likely to indicate progress of disability.*)

Scar 5" long extending from left sacro 'iliac' syrichondros to Lt Great trochanter. Scar 3" long extending from above great trochanter to 1" below crest of ilium (Lt). two small scars posteria + external surface middle third left leg. Partial loss of power Lt hip, thigh, leg, and foot. Heart + circulatory system normal, Lungs normal, kidneys normal Nervous system normal otherwise normal.

8. OPERATION. (*i.*) Was one performed? Yes.

(*ii.*) If so, state what. for removal of Shrapnel.

(*iii.*) Was one advised and declined? No.

NOTE.—Loss of teeth on or immediately after Active Service should be attributed thereto unless there is evidence to the contrary.

9. (*i.*) Is there loss or decay of teeth attributable to Active Service?

(ii.) If so, describe. Negative.

10. DO YOU RECOMMEND:—

(*a*) Fit for duty?

(*b*) Fit for base duty?

(*c*) Invalid to Canada? Yes

(*d*) Discharge from the Service as permanently unfit?

Date of Report Mar. 23rd 1917 Signed J M Bruce Capt CAMC
Officer in medical charge of case.

Station Epsom

I have satisfied myself of the general accuracy of the above Report, and concur therein *~~except~~

S Rogers Capt. CAMC. Officer i/c Hospital ~~S.M.O. Brigade~~ Strike out one of these.

Dated at Military Convalescent Hosp. Epsom Station, on for March 27 1917

* Delete if inapplicable.

P

Proceedings of a Medical Board on the Soldier mentioned in Part I.

☞ *Clear and decisive answers are to be given to all questions. Such terms as "may," "perhaps," "probably," "possibly," are not to be employed. Disability due to causes arising on Active Service is to be clearly shown in order that the Pensions Authorities may deal with the case properly.*

11. Is the disability fully indicated in Part I. (1)?

If not, indicate it.

Yes

12. Is the cause of the disability, fully indicated in Part I. (2)?

If not, indicate it.

Yes

13. Was the disability caused or aggravated by— (a) Negligence of the Soldier { Caused? no / Aggravated? no } (b) Misconduct of the Soldier { Caused? no / Aggravated? no.

14. THE ENTIRE DISABILITY.—Without regard to his regular occupation, to what extent is his capacity lessened at present for earning a full livelihood in the general market for untrained labour?
(*Estimate at none*, 10%, 20%, 30%, 40%, 50%, 60%, 70%, 80%, 90%, *or* 100%.)

100%.

15. THE PENSIONABLE DISABILITY—(*see Part I. (3). Aggravation on Active Service of a disability existing previous to joining is to be included in the estimate*).
What part of the entire disability estimated next above in (14) is due to causes arising during Active Service? (*Estimate at none*, $\frac{1}{5}$, $\frac{2}{5}$, $\frac{3}{5}$, $\frac{4}{5}$, *or all.*)

all.

16. Permanency of the Pensionable Disability estimated next above in (15).
(*i.*) Is it permanent? no
(*ii.*) If not permanent, what is its probable minimum duration (*in months*)? 12 mos +

17. If an operation was advised and declined, do you consider the refusal to have been unreasonable? not applicable

18. Remarks.

nil

19. Recommendation:—(*a*) Fit for duty?
(*b*) Fit for base duty?
(*c*) Invalid to Canada? Yes.
(*d*) Discharge from service as permanently unfit?

Classification for the Military Hospitals Commission.

Date of Board
30.3.17.

Signatures of the Board { A. K. Haymood Capt. / C. K. Dowson Capt Came } *President.*

Station
Epsom

Approved [signature] Captain C.A.M.C.,
Dated for A.D.M.S., Canadians, London Area.

A.D.M.S.
Station

A.D.M.S. CANADIANS,
LONDON AREA,
76, STRAND, LONDON, W.C.

191

5 APR 1917

Proceedings of the Pensions and Claims Board on the Soldier mentioned in Part I.

The Pensions and Claims Board, Canadian Expeditionary Force, assembled at

on the day of 191

Members of the Board:—

The Board having considered the evidence of the soldier marginally named, together with the documents submitted, recommend:—

Dated at this day of 191

Signatures of the Board

President.

A44255

ORIGINAL

MEDICAL HISTORY SHEET.

9/44255

Surname McNeil Christian Name Halvorson

Examined on 11 day of May 1915
at Sussex N.B.

Birthplace City or Town Dalhousie
County N.B.

Apparent age 23

Trade or occupation Electrician

Height 6 Feet 2 Inches.

Weight 190 Lbs.

Chest measurement Minimum 36 inches.
Maximum expansion 40 inches

Physical development normal

Small-Pox Marks none

Vaccination Marks Arm Right. yes. Left.
Number 1

When Vaccinated last 3 yrs Ago

(a) Marks indicating congenital peculiarities or previous disease none

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

Approved by O.B. Taylor
Rank Capt M.O.

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

25 OCT 1916

Date	Result	Vaccinations.	
			M.O.
			M.O.
			M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.	
			M.O.
			M.O.
			M.O.

Enlisted on 11 day of May 1915 at Sussex N.B.

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	3rd Bn	9/44255		May 11 - 1915
Transferred to..				

12th Reserve Battalion Canadians

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
Epsom	30.3.17.	G.S.W. thigh	D to C. G. K. Haywood Capt

Approved:
A.D.M.S. Canadians,
London Area,
76, Strand, London, W.C.
5 APR 1917

Captain C.A.M.C.,
for A.D.M.S., Canadians, London Area.

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

M. F. B. 313.
100M.—1-15.
H. Q. 1772-39-439.

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

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.
Northamptonshire War Hospital, DUSTON		14	10	16	13	2	17	g.s.w. lt thigh IX. 1.	123	Lacerated flesh wound between L Trochanter & crest of Ileum, Healed 2 small spfcl wounds left calf; Healed Transferred to Woodcote Park Epsom	J Stuart Major RAMC
C. C. H. Epsom		13	2	17				— " —		Stiff left hip (arthritis) left knee swelling left foot, quite lame. Partial loss of function of left leg foot & hip from wounds. Treatment Massage & Special Exercise	J M Bruce Capt-C.A.M.C.
		11	5	17	22	5	17	do		Same as on admission	D. R. Wark Capt Camc.

H.M. HOSPITAL SHIP "LETITIA" No..... Date.....

CLINICAL CHART.

(To be attached to Case Sheet.)

Army Form B. 1

Corps 1st Canadians

Military Hospital Duston

No. 44255 Rank and Name Cpl McNeill Age 23 Service 1 11/12

Disease _____ Date of admission Feb: 9. 17 Date of discharge Feb 13 17 Result _____

Dates of Observation	9	10	11	12	13
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

(29347) W6465—M789. 1,000,000. 9-16. D.P.W. A.F.B. 181/4. (373)

Signature _____ In charge of case.