DUPLICATE

ATTESTATION PAPER.

No. 288292

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? Norman
1a. What are your Christian names? James
1b. What is your present address? Ritchot P.O Manitoba
2. In what Town, Township or Parish, and in what Country were you born? St Norbert Manitoba
3. What is the name of your next-of kin? Boneface Norman
4. What is the address of your next-of-kin? Ritchot P.O. Manitoba
4a. What is the relationship of your next-of-kin? Father
5. What is the date of your birth? 1896 (dont know day of month)
6. What is your Trade or Calling? Farmer
7. Are you married? no
8. Are you willing to be vaccinated or re-vaccinated and inoculated? yes
9. Do you now belong to the Active Militia? no
10. Have you ever served in any Military Force? no
If so, state particulars of former Service.
11. Do you understand the nature and terms of your engagement? yes
12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE? yes

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, James Norman, 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.

James his X Norman "Mark" (~~Signature~~ of Recruit)

Date April 4th 1916. Sterling R. Fraser (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, James Norman, 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.

James his X Norman "Mark" (~~Signature~~ of Recruit)

Date April 4th 1916. Sterling R. Fraser (Signature of Witness)

CERTIFICATE OF MAGISTRATE.

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

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

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath before me, at Winnipeg this 4th day of April 1916.

F.A.M. Tod (~~Signature of Justice~~)

A Commissioner in B.R. &c.

M. F. W. 23.
600M.—2-16.
H. Q. 1772-39-341.

Description of James Norman on Enlistment.

Apparent Age 19 years ..... months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height ..... 5 ft. 10 ins.

Chest measurement.
- Girth when fully expanded ..... 36 ins.
- Range of expansion ..... 3 ins.

Complexion Dark

Eyes Brown

Hair Black

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

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

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

CERTIFICATE OF MEDICAL EXAMINATION.

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

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

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

Date 4 April 1916. A Archer

Place Winnipeg Man Capt.

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.

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

[signature] (Signature of Officer)

Date April 4th 1916

Class A.4

COPY

ATTESTATION PAPER.

No. 288292

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?	Norman
1a. What are your Christian names?	James
1b. What is your present address?	Ritchot P.O., Manitoba, Canada
2. In what Town, Township or Parish, and in what Country were you born?	St. Norbert, Manitoba, Canada
3. What is the name of your next-of kin?	Boniface Norman
4. What is the address of your next-of-kin?	Ritchot P.O., Manitoba, Canada
4a. What is the relationship of your next-of-kin?	Father
5. What is the date of your birth?	1896 (do not know day of month)
6. What is your Trade or Calling?	Farmer
7. Are you married?	No
8. Are you willing to be vaccinated or re-vaccinated and inoculated?	Yes
9. Do you now belong to the Active Militia?	No
10. Have you ever served in any Military Force? If so, state particulars of former Service.	No
11. Do you understand the nature and terms of your engagement?	Yes
12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE?	Yes

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, James Norman, 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.

"Mark"

James Norman (~~Signature~~ of Recruit)

Date April 4th. 1916. Sterling R. Fraser (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, James Norman, 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.

"Mark"

James Norman (~~Signature~~ of Recruit)

Date April 4th. 1916. Sterling R. Fraser, (Signature of Witness)

CERTIFICATE OF MAGISTRATE.

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

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

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath before me, at Winnipeg this 4th. day of April 1916.

E.H.M. Foot (Signature of Justice)

M. F. W. 23.
400M.—1-15.
H. Q. 1772-39-841.

A Comm. in B.R. etc.

Description of James Norman on Enlistment.

Apparent Age 19 years ..... months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height ..... 5 ft 10 ins.

Chest measurement.
- Girth when fully expanded ..... 36 ins.
- Range of expansion ..... 3 ins.

Complexion ..... Dark

Eyes ..... Brown

Hair ..... Black

Religious denominations.
- Church of England .....
- Presbyterian .....
- Methodist .....
- Baptist or Congregationalist .....
- Roman Catholic x
- 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).

Solemn Declaration in case of Volunteers.
Edmond Leonard. Capt.
John H. R. Bond. M.P.

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 h[illegible]m* ..... Fit ..... for the **Canadian Over-Seas Expeditionary Force.**

Date ..... April 4th. ..... 191 6. ..... A. Arthur, ...

Place ..... Winnipeg, Manitoba, Canada. ..... Capt.

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.

James Norman ..... 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.

..... L. McMeans, ... (Signature of Officer)

Date April 4th. ..... 191 6.

221st OVERSEAS BATTALION

REGIMENTAL DOCUMENTS

NAME Normanton James REGT. NO. 28829-2 UNIT H. Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
	ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
	TRAINING HISTORY SHEET (M.F.W. 113)					
1	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
1	REGT. CONDUCT SHEET (M.B.W. 263 or A.F.B. 120)					
1	COMPANY CONDUCT SHEET (M.F.B. 263A or A F.B. 121)					
2	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
	DENTAL HISTORY SHEET (M.F.B. 465)					Category
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					
	MEDICAL EXAMINATION (M.F.W. 129)					
	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
	LAST PAY CERTIFICATE (M.F.W. 44)					
	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					
	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)				C8094	
1	R149					
1	R149 Casualty Report					

S

8

M

SEE RECORD

48108

H

2/51-27
27-27
2-27

W. 2589
100M-11-19
1772-39-1377

No. 228292 RANK Pte NAME Norman J

~~T.O.S.~~ Transfd from #10 C.C. No 31 of 5-17 N.O. 107 of 26-5-17 UNIT 106th Regt. Winnipeg Light Infantry

M. D. 10

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1917	1917			
May 22	May 31	W		
June		W	a. W. L. 1 day's pay	N.O. 120 of 6-17
July		W		
Aug		W		
Sept 1	Sept 26	W	a. W. L. 21 days det'n Transfd to H. 2. Ind. Co.	N.O. 191 + 207 of 9-17 " " 209 of 28-9-17

NK

Number 288292 Rank Pte

Surname NORMAN

Christian Name James

Units 8th Bn Can Inf Theatre of War France

Date of Service 19-1-18

Remarks ~~Infantry~~

Latest Address ~~Mr. Comfort Normand St Norbert Man~~ Retchot P.O. Man

Roll No B Page 7698

Port, ship, and date of arrival

Next of kin

Address on leave

Address on discharge

Transportation issued Yes / No Date

Character on discharge

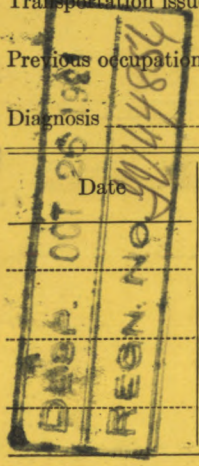
Previous occupation

Date and place of enlistment

Diagnosis

Date of Medical Boards

Date	Remarks



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

No. 288291 RANK Pte. NAME Norman Jas. A. John 2.

T.O.S. 4-4-16 UNIT 221st Battalion C. E. F.
D.O. 21 4-4-16

M.D. 10

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916	1916			
apr. 4	apr. 30	✓		
	May	✓		
	June	✓		
	July	✓		
	Aug	✓		
	Sept.	✓	Forfeit-pay 27-9-16-3-10-16	D.O. 185. Oct. pay list.
	Oct.	✓		
	Nov.	✓		
	Dec.	✓		
	1917			
	Jan.	✓		
	Feb.	✓		
	Mar.	✓		

C. (649-N-1997)

CARD NO.

SURNAME. Norman.

CHRISTIAN NAMES James

FOLL.

REGL. No. 288292 RANK Pte.

UNIT ~~221st~~ No 2 Indep Engr Coy (Draft) ~~Bn.~~

FORMER CORPS Nil

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL Norman, Boniface

RELATIONSHIP TO SOLDIER Father.

ADDRESS Ritchot P.O. Man.

COUNTRY OF BIRTH Canada, St. Norbert, Man. DATE 1896.

PLACE OF ATTESTATION Winnipeg, Man. DATE April 4th 1916.

Trans from 221st Bn to No 2 Indep Engr Coy (Draft) Auth Draft S.L. 10/10/17

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

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

MARRIED SINGLE Yes. WIDOWER

TRADE OR CALLING Farmer RELIGION Roman Catholic.

DESCRIPTION.

APPARENT AGE 19 YEARS ——— MONTHS

HEIGHT 5 FEET 10 INCHES

CHEST MEASUREMENT 36 INCHES EXPANSION 3 INCHES

COMPLEXION Dark. EYES Brown. HAIR Black.

DISTINGUISHING MARKS Nil.

MEDICAL EXAMINATION. PLACE Winnipeg, Man. DATE April 4th 1916.

Present Address: Pitchot. P.O. Man.

Form R. 149.

James.

Name NORMAN. Rank Pte. Reg. No. 288292.

Unit 8th Bn

Next of Kin Canada

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
15-2-18	Killed in Action	Pte 21 2-3-18	1	A155	M65	625 Card

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

NAME Norman James

RANK AND CORPS Pte. 8th Bn. form. 22nd Bn.

REGT'L. No. 288292

H. Q. FILE No 649

FOLLOWS NO.

FOLLOWS

CABLE NO.	DATE	NATURE OF CASUALTY
A65 13-4	6-3-18	Killed in action Feby. 15th. 1918.
a FB	2090d	Killed in action 2-2-18 On the Field
Rouen	2-3-18	France or Belgium. (Noted 6-4-18)

L. L. 31493. M. & D. 8476.

M. F. W. 42—100M.—28-11-17.
H. Q. 1772-39-893.

LIST NO.	HOSPITAL	DATE OF ADMISSION	REMARKS
A 155	Repld from Base	15-2-18	Killed in action

D.M S. 1300 50M-21- 1 17.

SURNAME | CHRISTIAN NAME OR NAMES | REG. NO.

Norman | T. | 288292

RANK | UNIT | CO. | TROOP | BATTY.

R.E. | Kan. 8 Batt.

HOSPITAL | DATE OF ADMISSION

1. ..... HOSP.

2. ..... HOSP.

3. ..... HOSP.

4. ..... HOSP.

DIAGNOSIS

1.

2. R. F. B. Killed in Action 15.2.18. R.

3.

DISPOSITION | DATE

G.S. 5.3.18 A155.

REMARKS

A.M.D. 2 DEPT.

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

EPITOME OF HOSPITAL TREATMENT

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

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

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

Casualty Form—Active Service.

Unit, Regiment or Corps 221st C. Bn C. Co

Regimental No. 388392 Rank Pte Name Norman James

Enlisted (a) 4.4.16 Terms of Service (a) D.g. C.E.F. / War Service reckons from (a) 4.4.16

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

Extended Re-engaged Qualification (b) Civil:- Farmer Military:-

Report Date	Report From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
		Embarked Halifax, N.S. Oct.4-1917 R.M.S. "Metagama"			
		Dis-embarked Liverpool, Eng. 17/10/17			
25/10/17	O.C. #2 Ind. Inf. Co.	Jsfd. to 18th Res. Battn.	St. Martins Plains	24/10/17	Dl. II D.O. 204
					Lieut. & O.C. No 2 Independent Infantry Co.
OCT 20 1917	8 RES BN	TAKEN ON STRENGTH	DIBGATE	18.10.17	PT II DO 288
JAN 18 1918	Do	Drafted to 8th Bn	do	JAN 18 1918	PT II DO 18

CERTIFIED CORRECT. 23 JAN 1918 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.

Asst. Adjutant, 18th Res. Bn

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				
C. B. D.		ARRIVED C. B. D.	FRANCE	19-1-18	N. R. D 20-1-18 PART II ORDERS No 9 D 24-1-18
C. B. D.		LEFT C. B. D. FOR 66RL	66RL	21-1-18	N. R. D 21-1-18
C. C. BN.		ARRIVED 66RL BN.	FIELD	21-1-18	NR B. 213 D 21-1-18
24-1-18	66RL	left for Unit	—	24-1-18	NR
27-1-18	8 Bn	JOINED UNIT	—	27-1-18	B 213
23-2-18.	8th Bn.	KILLED IN ACTION.	FIELD.	15-2-18.	B-213 Pt.2.Ord. No. 21 d/- 2-3-18.

Lieut.for
Lt.Col.AAG.Cdn.Sec.
G.H.Q. 3rd Echelon.

Form R 122.
2353—100M—9-17-16

LTR

Rank | Name NORMAN, James | Reg'l No. 288292

Unit No.2. Indep,Co. to 18th Res. Bn. | If in perm. Corps, What Unit? | Married or Single Single.

Place and Date of Enlistment Winnipeg, April 4th, 1916. | Place of Birth St Norbert Manitob Canada.

Name and Address, Next-of-Kin Boniface Norman

Ritchot, P.O. Manitoba, Canada. | Relationship Father.

Assigned Pay Monthly $ | Payable to | Relationship

Separation Allowance $ | Payable to | Relationship

Discharge, Date and Place | Reason | Character 18

H. W. & V., Ld.—9546-16.

M

N/E. R.B. No. 10256.
File R.L. 25 N. 782.
Category KA.

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 from Canada	R.B. 103 CHECKED 23 JAN. 1918 Dibgate Camp	17-10-17	S/S Metagama
30-10-17	18 Res Bn	Taken on strength	Dibgate Camp Plt	18.10.17.	A.F. II 288.
19-1-18	—"—	Posted 8th Bn 9 pcars.	—"— Plt	18-1-18	A.F. II 0.19. 8th Bn A.F. II 0.9. d/24-1-18.
2-3-18	8th Bn	Killed in action	Plt. Field	15-2-18	A.F. II 0.21.

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.				

L. L. Job 2321[illegible] & D. 8049.

ASSIGNED PAY.

M. F. W. 11.
15m.—6-17.
H. Q. 1772-39-818.

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

ASSIGNED PAY.

Name Boniface Norman

Address Ritchot P.O. Man

Name of Soldier Norman John

Regtl. No. 288292

Rank Pte

Corps 11 B/S. Batt

Relation to Soldier wife, child or mother } $15.00 OCT 1 1917

To what Corps belonging when called out }

PAYMENTS

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

CONSOLIDATED ACCOUNT

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a.
50m.—6-16.
1772—39—819.

Sheet No. 2. Boniface Norman

L. L. Job 4503.—Req. 6832.

Name of Soldier Norman John
288292, Pros Bath, Pte

15 OCT 1917

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.		I 49384	15-4	
Nov.		40 54349	15-	
Dec.		T 63234	15	
Jan.	1918		45	
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier_____

PAYMENTS.

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

P. 559

MARRIED OR SINGLE: Single

PLACE OF BIRTH: St Norbert Man Canada

NAME AND ADDRESS OF NEXT OF KIN: Boniface Homan

Ritchot P.O. Man Canada

RELATIONSHIP OF NEXT OF KIN: Father

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY
Killed in action	15/7/18	O.R.A. 155 5/3/18

ADMISSIONS TO HOSPITAL, &c.

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

REG'L NO. 288 292 RANK Private NAME Homan James

no 2 Ind Inf Co

IF IN PERMT. CORPS WHAT UNIT } UNIT To 18th Res. Bn.

TRANSFERRED TO 8th Bn. DATE 1.2.18. AUTHORITY

PERMANENT FORCE ALLOWANCES

TRANSFERRED TO N.E.E DATE 14.3.18 AUTHORITY

PLACE OF ATTESTATION Winnipeg Man Canada

TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION 4-4-16

TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY $ 15-00 DATE EFFECTIVE 1-10-17

PAYABLE TO Boniface Homan Ritchot P.O. Man RELATIONSHIP Father

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

11 SEP 1918

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
1/10/17	Balance from Canada																												24 10	24 10		24 10 ✓			
Oct. 1	Pay		34	10																															
			34	10 ✓																															
Nov.	P.P.		33	00 ✓	Nov A.P.										15																				
					A.M. 1187. 28/11/17. 18th Res.				4	87 ✓																										
					A.M. 1057. 1/11/17. do.				9	73 ✓																										
					A.M. 249. 26/10/17. to R.D.				2	43 ✓																										
Dec.	P.P.		34	10 ✓	A.P.										15		15	07																	
1918			67	10											30																				
Jan.	P.P.		34	10 ✓	A.P.										15 ✓																				
					A.R. 1279. 17/1/17. 18th Res.				2	43 ✓																										
					O.N.A.R. 1224. 5/1/17. 18th "				2	43 ✓																										
					" 1106. 12/11/17. 18 "				H	87 ✓																										
			34	10 ✓					9	73 ✓						15 ✓		24	44 ✓																	

MONTH	PARTICULARS	CR.1	CR.2	CR.3	CR.4	BALANCE	DEFERRED PAY	SER. ALLCE.	ENG.
1918									
Feb.	S.S.	30 80 ✓				24 44 ✓			
					15 ✓				
	A.M. 977 1.B.1.B.D 31.1.18			4 46 ✓					
	" 1302 8 Bn. 1.2.18			3 57 ✓					
	Rem. 18682 6.2.18			9 73 ✓		22 48 ✓			
		30 80 ✓		17 76 ✓	15 ✓				
Mar.	D.N.A.R. 1332. 11th Res. 10/1/18			8 28 ✓		14 20 ✓			
				828					
July	Bal Fwd to Ottawa 6 199			14 20 ✓		nil			
				14 20					

Killed in action

Asst Pay checked with CFX and found correct

Wtte

9.5.18

Bal Due on Statement of a/c $ 14.20

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			

288292.

Norman James

MEDICAL HISTORY OF AN INVALID.

1. Station. M.D.10

2. Regiment or Corps. 221st Battalion.

3. Regimental No. and Rank. Pte 288292

4. Name. Norman, J

5. Age last Birthday. 18 Years

6. Enlisted on April 15th 1916.

at Winnipeg Man

7. Former trade or occupation. Farmer

8. General remarks on his:—

(a) Conduct. No

(b) Habits. Records

(c) Temperance. Available.

(For this purpose the Company defaulter sheets will be obtained from the man's Commanding Officer.)

RECEIVED APR 25 1917 A.D.M.S. M.D.-10

RECEIVED MAY 26 1917 A.D.M.S. M.D.-10

Date. April 20th 1917.

9. Service.

	Years.	Days.	PERIODS From	PERIODS To
C.E.F.			April 15th 1916.	April 20th 1917.

10. (a) Disease or disability. Varicocele Left

(b) Date of origin. Unknown

(c) Place of origin. Unknown

(d) Cause. Unknown

11. Present condition. (Most Important.)

(To include full description of present disabling condition or conditions, and of the immediate and direct cause of incapacity, *i.e.*, debility, breathlessness on exertion, necessity of treatment by rest, etc.)

Enlargement of left pampiniform plexus

No evidence of hernia. Otherwise physical condition seems normal. Mentality low.

Patient seems abnormaly stupid.

12. (a) Is the disability the result of service or climate? No

(b) Has it been aggravated by intemperance, vice or misconduct? No.

M. F. B. 227.

200M. 8-16.
1772-39-117.

13. (a) For purpose of Identification. (Here a full description of wounds, scars, deformities, etc., is to be given.)

None

(b) In case of wounds, or other injuries, state whether sustained on or off duty. If not received in action was a Court of Inquiry held ?

Not applicable.

(c) In the event of the disability being attributed to exposure on duty, state clearly the nature of such exposure, and whether it was exceptional or otherwise.

Not applicable.

14. Treatment.

None

15. If the disabling condition had its origin before enlistment, has it been aggravated by service, and to what extent ?

Preexisted enlistment not aggravated by service.

16. What is the probable duration of the disability or of each disabling condition, if more than one contributes ?

Permanent

17. To what extent will it prevent his earning a full livelihood in the general labour market ? Please state in fractions. When more than one disabling condition is present, the extent of the disability due to each should be stated.

1/10 not due to service

18. State if for discharge on account of unfitness for Service.

Discharge

W. W. Burt Capt

Medical Officer by whom the case is brought forward.

OPINION OF THE MEDICAL BOARD.

Does the Board concur with the preceding report? If not, give differing opinion.

10. Yes

11. Yes

12. Yes

15. Yes

16. Yes

17. Yes

18. Is he unfit for Military Service.

Yes

Recommendations: That he be discharged from the service. as medically unfit. His condition preexisted enlistment and has not been aggravated by service. On account of his disability he should not be reenlisted. He has been offered operation This was refused. Waivers obtained and attached

Signatures :—

Gilbert H. Dandeson Capt AMC President.

Members.

Station. M.D.10

Date. April 20th 1917.

Date. APR 24 1917

B. H. Lee Capt
Asst. Director of Medical Services.

Approved.

Date.

Director-General of Medical Services.

(At Station or Hospital where finally disposed of.)

Station and Hospital ..... Arrived from .....

Date .....

If admitted.	If under treatment.		Disease.	How fully disposed of.	Date of Discharge, &c.
Index No.	From	From			
Date					

Summary of Causes of invaliding, or remarks as to remand to Regiment, Station or Depôt.

Date of final Medical Board or decision. .....

Administrative Medical Officer.

Militia Form B. 227.

200m. 8-16.
H. Q. 1772-89-117.

DETAILED MEDICAL HISTORY OF INVALID.

Station .....

Corps .....

Regimental No. ..... Rank .....

Name .....

Disability .....

Date .....

Hospital or Station transferred to for final disposal. .....

Date of final disposal .....

How finally disposed of .....

The original Report is invariably to accompany the discharge documents of invalids.

ORIGINAL

MEDICAL HISTORY SHEET.

Surname Norman Christian Name James

Examined on 4 day of April 1916 at Winnipeg Manitoba, Canada.

Approved by A Archer

Rank Capt. M.O.

Birthplace City or Town St Norbert County Manitoba, Canada

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

Apparent age 19

Trade or occupation Farmhand

Height 5 Feet 10 Inches.

Weight 140 Lbs.

Chest measurement Minimum 33 inches. Maximum expansion 36 inches.

Physical development moderate

Small-Pox Marks None

Vaccination Marks Arm Right. 1 Left. 1 Number Two

When Vaccinated last Childhood

Date.	Result.	Vaccinations.
27/10/16		A Clarke M.O.
		M.O.
		M.O.

(a) Marks indicating congenital peculiarities or previous disease None.

(b) Slight defects but not sufficient to cause rejection None.

Date.	Result.	Anti-Typhoid Inoculations, Etc.
May 31/16		A Archer M.O.
June 9/16	1st	M.O.
19-6-17	Tab Wasmuzath	
26-6-17	Tab Wasm	M.O.
18-7-17	Tab Wasm	

Enlisted on 4th day of April 1916 at Winnipeg, Manitoba, Canada.

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	32nd Overseas Battalion	288292	Good.	April 4th 1916.
Transferred to	#2 Ind. Coy C.E.T.			26/9/17.
	18th Res: Bn.			18/10/17

JAN 10 1918

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.

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.
400M.—1-16.
H. Q. 1772-39-439.

Surname Thomas Christian Name James

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital. Day	Month	Year	Dates of Discharge from Hospital. Day	Month	Year	DISEASE.	Number of days in Hospital	Remarks on nature of the disease: how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
Winnipeg	April 4	1	May	16	6	May	16.	Tonsilitis	5.	Mild Attack	A. L. Shanks
"	~~June~~	1	6	17				Contused Hand		Excused duty one day	
Camp St. Charles	18/8/17							Suspicious on Parade Aug 15th.		T. & D.	

Gilbert Lansdown Capt.
Edmonton Capt.
Hon. H. R. Brad. M.B.C.

169349

288296. Pte.Norman.J. No.2. I.C.D.

WILL WITH

M.D. No.10.

WINNIPEG.

REC'D FROM COMMAND P.M. SHORNCLIFFE. 18-12-17.

(BAC.)

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

Oct 1 - 17.

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

15			

3 f 3 Jr 16
$13

PARTICULARS OF SEPARATION ALLOWANCE

No. 288292.

Rank Pte Promoted Reverted Discharge

Soldier's Name John Norman

Battalion 22" O/s. Baltn

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name Boniface Norman

Address Pitchat P.O. Man

Change of Address

1

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
1917 Dec 31	—		45 ✓	45 ✓	File 13706. J - 20
Jan/18	I 63757.		15	15	M.R. 6.2A 13.3.18 03.
Feb	Q 74686		15	15	E 7X 13/3/18
~~March~~	~~P 91031~~		~~15~~	~~15~~	P. 91031 Cancd 16/3/18 £74 15 — to 28.2.18 {14.3.18 Acct Closed 28.2.18 {Roll.

Pensions Notified Date 14.3.18

~~Killed in Action~~ } Date 15.2.18

~~Died of Wounds~~

~~Missing~~

C. 11.4(3)7 3.18 J. Ball Clerk

Date Noted 14.3.1918

Closed

M. F. W. 128.
4'OM. 6-17—172-39-1141
L. L. 22320—M. & D. 1933.

A STENCIL HAS BEEN MADE FOR THIS ACCOUNT

L.L.

MRO. 2B Rendered 16/3/18

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

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

M. F. W. 128.
40M. 6-7—1172-39-1141
L. L. 22320—M. & D. 1903.