

ATTESTATION PAPER.

No. 651405

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?..... **Petter**
- 1a. What are your Christian names?..... **Harry**
- 1b. What is your present address?..... **Colpoys Bay. Ont.**
2. In what Town, Township or Parish, and in what Country were you born?..... **London England**
3. What is the name of your next-of-kin?..... **Laura Jessie Petter**
4. What is the address of your next-of-kin?..... **Colpoys Bay Ont.**
- 4a. What is the relationship of your next-of-kin?..... **Wife**
5. What is the date of your birth?..... **April 12.th. 1882**
6. What is your Trade or Calling?..... **Labourer**
7. Are you married?..... **Yes**
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 } **Yes**
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? }

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

Harry Petter

I,....., 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.

Harry Petter..... (Signature of Recruit)

Date..... **Jan 13**..... 191 **6**..... *J. M. Eachen*..... (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

Harry Petter

I,....., 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.

Harry Petter..... (Signature of Recruit)

Date..... **Jan 13.**..... 191 **6**..... *J. M. Eachen*..... (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 **Warton Ont.**..... this **13 th.**..... day of **January**..... 191 **6**.....

A. W. Bauer..... (Signature of Justice)

Harry Petter

Description of _____ on Enlistment.

Apparent Age.....**34**.....years...**8**.....months.
 (To be determined according to the instructions given in the Regulations for Army Medical Services.)

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

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

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

Chest measurement. { Girth when fully expanded.....**34 3/4**.....ins.
 Range of expansion.....**4 3/4**.....ins.

Complexion.....**Fair**.....

Eyes.....**Grey**.....

Hair.....**Dark**.....

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

CERTIFICATE OF MEDICAL EXAMINATION.

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

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

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

Date.....**Jan 13,**.....191**6**.....

Place.....**Warton, Ont.**.....

R. H. Fisher

 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.

Harry Petter.....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.

A. Mac

 (Signature of Officer)

Date.....**January 13th**.....191**6**.....

L. G. Galt

REGIMENTAL DOCUMENTS

Pte NAME **PETTER HARRY**

REGT. NO. **651405** UNIT **160th Bn** H. Q. FILE NO.

3

3

12

2

CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505
REFERENCE

NON-EFFECTIVE BY

M

~~29-10-14~~

Ref 29/10/1943

649-P-13619

5574

H

DEATH

Category

DISCHARGE

Category

Demob

DESERTION

37-27
20-27
7x 27
/



OK ✓ ✓ ✓
Number 651405 Rank A/cpl ✓

Surname PETER ✓

Christian Name Harry ✓

Units 18th Div. Gen. Inf. Theatre of War France ✓

Date of Service 29-3-78 ✓

Remarks

Latest address R.R. 6 Wiarlow ✓

Post

Roll No. B Page 9891

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

DESP
MAR 7 1922
REGN. NO. 1178

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

Name

PETTER Rank

Harry

A/c

Reg. No.

651405

Unit

18th Bn

Next of Kin

Canada

Date	Movement	Place	Casualty	List No.	Notified N/K O	W.O. List
1918						
51. 8.	3rd Aust LH Coy	Oklae	PW arm L	A307	291	3763/12
3-9	Fort Pitt	Chatham	do.	B328		257/69
12-12	11 C Gen Hosp	Storncliffe	do.	B390		307H
4-2	Discharged			B435		1633
4-2-19	SK: 4-2-19 to 15-2-19	report to com				

NAME

Petter, Harry

SO. Dis 13-4-19
"Demot"
auth 100 1040 of 14-4-19

H.I.

RANK & No.

Pvt.

#12010. 651405

CORPS

160th

Batt.

ENLISTMENT, PLACE

Warton

DATE

Jan. 13, 1916 "m"

FORMER CORPS

nil.

COUNTRY OF BIRTH

England, London

NEXT OF KIN

Petter, Laura Jessie (wife)

ADDRESS OF NEXT OF KIN

Colpoys Bay, Ont.

DISCHARGE, PLACE

DATE

Re. Rec. 10-4-19. $\frac{303}{8}$

M. F. W. 22. 100 m.-9-15.

REGT'L No. 65-1405

H. Q. FILE No. 649.

NAME Petter Harry

RANK AND CORPS Pte. 18th Bn. from 160th Bn.

FOLLOWS
No.
FOLLOWS

CABLE

NATURE OF CASUALTY

NO.	DATE
-----	------

		Laura Jessie Petter (wife) Calpog's Bay, Ant.
56-2 H 296	9-9-18	Adm. 3. Anst. Gen. H. Asherill Aug.
A 307	5-9-18	31 St. 1918 Issu L. arm.
WSM 189	14-10-18	Fort Pitt Mil H. Chatham progressing satisfactorily

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

W. O. Regt.

13305-2 Fort Det Mich.

Chatham 3-9-18. S. W. L. Arm

B390¹ 11 Can Gen Shorn 12-12-18 Sw. L. Arm.

B435¹ Disch 4-2-19 Sw L arm

No.

651405-

RANK

Pte.
Cpl.

NAME

Petter. Harry J.

T. O. S. 13-1-16.

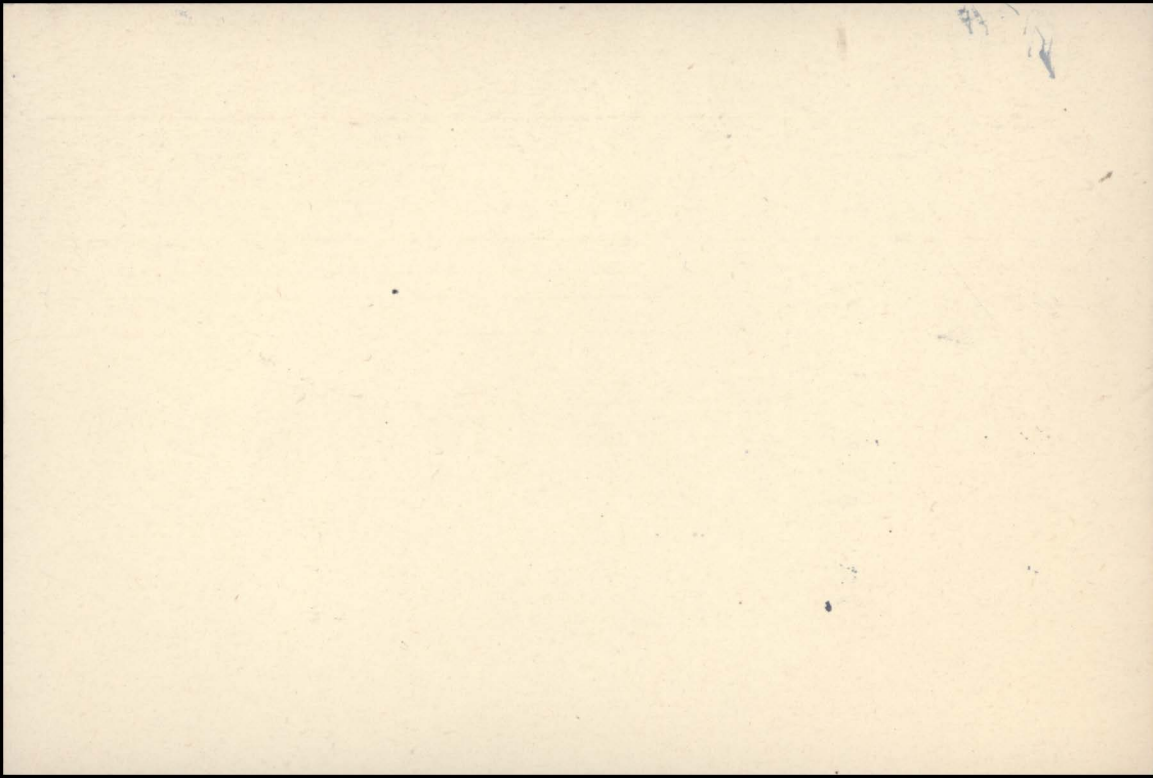
(0018-21-1-16)

UNIT

160th Battalion.

M. D. /

PAID		SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
FROM	TO		PARTICULARS	AUTHORITY
1916.	1916.			
Jan 13.	Jan 31.	✓		
Feb.		✓		
Mar.		✓		
Apr.		✓		
May		✓		
June		✓		
July		M.		
Aug.		✓		
Sept.		✓		
Oct.		M.	Prom. Cpl. 30/8/16	(W.O. 207) of 20/8/16 UNIT SAILED OCT 17 1916



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SURNAME

CHRISTIAN NAME OR NAMES

REG. No.

PETTER

H.

651405

RANK

UNIT

Co.

TROOP

BATTY.

Pte.
HOSPITAL

WO 18

DATE OF ADMISSION

3 Aust. Gnl. Abbeville

31-8-18.

1.

Front Post with Blather

HOSP.

3-9-18

2.

11 Coav. Gen. Stormchase

HOSP.

12-12-18

3.

HOSP.

4.

HOSP.

DIAGNOSIS

SW L. Arm N.

1.

2.

3.

D

Disch 4. 2-19

DISPOSITION

DATE

T.L. 5-9-18 A307 -3

REMARKS

11-9-18 B308 2

16-12-18 B390 ①

11-2-19 B435 1

A.M.D. 2 Dept.

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

EPITOME OF HOSPITAL TREATMENT

HOSPITAL

ADM.

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

244 ORIGINAL MEDICAL HISTORY SHEET.

651405

P3 28

Surname: Petter Christian Name: Harry

Examined on 13 day of January 1916 at Warton Ont.

Approved by [Signature] Rank: M.O.

Birthplace: City or Town: London County: England

Apparent age: 35

Trade or occupation: Labourer

Height: 5 Feet 10 Inches

Weight: 145 Lbs.

Chest measurement: Minimum 30 inches Maximum expansion 34 inches

Physical development: good

Small-Pox Marks: none

Vaccination Marks: Arm: Right, Left: X Number: three

When Vaccinated last: childhood

(a) Marks indicating congenital peculiarities or previous disease: none

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

eyes: none

Table with columns: Date, Fit or Unfit, EXAMINED FOR RE-ENGAGEMENT. Includes stamp: 6 SEP 1918

Table with columns: Date, Result, VACCINATIONS. Includes entry: 10/6/16 Pos [Signature] M.O.

Table with columns: Date, Result, ANTI-TYPHOID INOCULATIONS, ETC. Includes entries: 22/8/16, 30/8/16, 7/9/16, 24/11/16 with signatures and M.O. marks.

Enlisted on 13 day of January 1916 at Warton Ont.

Table with columns: Corps (160th B'N), Reg't Number (651405), Habits. Includes 'Transferred to' section and 'CANADIAN' stamp.

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

Table with columns: Station, Date, Disease, Result. Includes entries for London Ont, Witley, Med. Bd, Adherent scars, Flat feet, and signatures.

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.

Surname Christian Name

Petty Jerry

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STATION.	Date of Arrival at the Station.	DATES OF						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.
		Admission into Hospital.			Discharge from Hospital.						
		Day	Month	Year	Day	Month	Year				
Fort Pitt bhatnagar General		29	18								
HOWARD DE WALDEN HOSPITAL, MAIDSTONE.		16	10	18	10	12	18	G.S.W.L. upper arm	55	Cautious irrigation Treated by extension & Eschol gauze dressings for wound Comminuted fracture of humerus, very good union spontaneous - good movement	Det J Jansen Det J Jansen
No. XI CANADIAN GENERAL HOSPITAL, MOORE BARRACKS, SHORNCLIFFE.		1	DEC	19	4	2	19	G.S.W. Arm (L) Fract. Humerus	56	W ^d Aug 23/18 to - 1 month Jan. 14/19. Good movement of arm Arms in Shov. splint & extension D I ✓	Det Warr my

B

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H
CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 651405 (Rank) Private

Name (in full) Harry Pether enlisted in

the 160th Battalion

CANADIAN EXPEDITIONARY FORCE at Winston, Ont. on the 13th

day of January 19 16

HE served in France

and is now discharged from the service by reason of Demobilization.
Medical Unfitness.

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

Age 37 yrs.

Marks or Scars Nil

Height 5ft 10 ins.

Complexion Fair

Eyes Grey

Hair Dark

Signature of Soldier

[Signature]
Issuing Officer

Date of Discharge

Rank

DISCHARGE SECTION
APR 13 1919
No. 1 District Depot

[Signature]
O.C. Dispersal Area Sta. K.

Date 13 19 16

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.

DISCHARGE CERTIFICATE

CANADIAN EXPEDITIONARY FORCE

THIS IS TO CERTIFY that No. _____ (Rank) _____

Name (in full) _____ enlisted in _____

the _____

CANADIAN EXPEDITIONARY FORCE at _____ on the _____

day of _____ 19 _____

He served in _____

and is now discharged from the service by reason of _____
 Demobilization _____
 Medical Unfitness _____

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

Age _____ Height _____ Complexion _____ Eyes _____ Hair _____ Mark or Scars _____	Signature of Soldier _____ Date of Discharge _____ Issuing Officer _____ Rank _____ Date _____
--	--

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

G.B.

Rank *a/cpl.* Name **PETTER. Harry.** ^x

Reg'l No. **651405.** ^x

Unit **160th Battn** / If in perm. Corps, What Unit? }

Married or Single **Married.** ^v

Place and Date of Enlistment **Wiaraton Ont Jan.13th 1916.** ^x Place of Birth **London England.** ^v

Name and Address, Next-of-Kin **Laura Jessie Petter,** ^x

Colpoys Bay Ont. ^x Relationship **Wife.** ^x

Assigned Pay Monthly \$ Payable to

Relationship

Separation Allowance \$ Payable to

Relationship

N/E. R.B. No. **6742**
File No. **CAN. OR**
Category

Discharge, Date and Place

Reason

Character

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.				
ARRIVED IN ENGLAND "S. S. L. ETAGAMA 28-10-16					
2-11-16	O.C. 160. Bn	Appled. Oct. Corp.	Branchott	17-10-16	St. II. D.O. #262.
2-8-17	---	Reverts to Ranks (Pte) at his own Request	Witley	1-8-17	--- " 213
23.2.18		S.O.S. to 4 th Res Bn	"	23.2.18	Pt. I 28 4 th Res Pt. II 48 1/2
12.3.18	4 th Res.	Awarded G.C. Badge	Witley	12.3.18	Pt. I 60
29.3.18	"	Posted to 18 th Bu ops	Witley	28.3.18	" 7580027 of 18 th Bu 45.8
5.9.18	WORD (18)	WOUNDED	field	31.8.18	CLA 307.
14.9.18	WORD	YOS from 18 Bn	Witley	3.9.18	M 214
17.9.18	18 Bn	SOS to WORD	field	" "	" 58 O.L.

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.				
5-2-19	W.O.R.D.	On loan to 1 st C.C.D.	Mr. W. Key	4-2-19	40411-2-19 On 20.30. 1 st C.C.D.
19-3-19	1 st C.C.D.	Cease on Com	" "	18-3-19	" " 76+W.O.R.D. 07/1/23/3/19
18-3-19	4 th Res.	S.O.S. from W.O.R.D.	" "	18-3-19	" " 654+W.O.R.D. 07/1/23/3/19
		37-4-51.		3-4-19.	
29-3-19.	W.O.R.D.	S.O.S. from 4 th Res	" "	28-3-19	" " 464 ^d Res 74 ^d 23/3/19
4-4-19	"	S.O.S. to C.E. in Can. S.S. 37.	Rhyl.	3-4-19	" " 8'

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

M. F. W. 54. (A. F. B. 103.)

250M.—1-16.
H. Q. 1772-29-920.

Casualty Form—Active Service.

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

Regimental No. 651405 Rank Pte. Name Petter, Harry.

Enlisted (a) 13-1-16 Terms of Service (a) C. E. F. Service reckons from (a) 13-1-16

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) (Labourer)

War Service Badge No. _____

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		Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
				Date	
		Embarked - Canada	Halifax	17/10/16	
		Arrived - England	Liverpool	28/10/16	
2-11-16		A/Corporal. (with pay)	Witley	14/11/16	Part II Order No. 262
2-8-17	D. O. 160th Bn	Reported to rank of private at his own request	Witley	1-8-17	D.O. Part 2 #213.
23/2/18	D. O. 160th Bn	S.O.S. on transfer to 4th Bn in Reserve Bn	Witley	23/2/18	D.O. Part 2 #28 R. B. Wether FOR O.O. 160th CANADIAN INFANTRY BATTALION
26-2-18	O.C. 4th Res. Bn.	T.O.S. 4th Res. Battalion	Bramshott	24-2-18	Part 2 Order No. 48.
29-3-18	O.C. 4th Res. Bn.	Having proceeded overseas to 18th Battn. is S.O.S. 4th Res. Battn.	Bramshott	28-3-18	Part 2 Order No. 75.

J. E. Nalgie Lieut.
A/Adjt. 4th Canadian Res. Battalion.

(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, Shoing Smith, etc., etc., also special qualifications in technical Corps duties.

OVER

[P.T.O.]

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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.
12-3-18 24 APR 1918	H. Cheskn CAN. RECORDS, LONDON.	Awarded 1 Gb Badge	B'shatt.	12.3.18	P. 110 # 60 JAB. H. Charto LIEUT. FOR LT: COL: I/C RECORDS, C.O.M.F.
29-3-18	2 Can I.B. Depot	Arr from 4 Can Res Bn Eng & T.O.S. of 18 Can Bn	2 Can IBD ETAPLES	29.3.18	Nom Roll Pt II Ord 27 d-5.4.18
3-4-18	C.C.R.C.	Arr at Can. Corps Reinf. Camp		3.4.18	Nom Roll
20-4-18	18 Bn	Joined 18th Can Bn	In the Fld	13.4.18	AF.B.213
7-9-18	18 Bn	WOUNDED	In the Fld	28.8.18	AF.B.213
3-9-18	A.T. ville de liege	Invalided to England, wounded. Posted to Western Ontario Regtl Depot WITLEY	Major for Lt.-Col., A.A.G. Canadian Section. G. H. O. 3rd Echelon B.E.F.	3-9-18	AF.W. 3083 (Can. Sect. No. 5914) Pt. II Order 88-17-9-18
14.9.18	WORD	TOS from 18 Bn	Witley	3.9.18	DO 217 Witley LIEUT. FOR LT: COL: I/C RECORDS, C.O.M.F.

SERVICE AND CASUALTY FORM (Part I).

Army Form B. 103—I.
Part I.

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

Nothing to be written in this margin.

W1889—PP 1150 1M 5/18 G.W.P.Co (34/0)

(1)*Substantive rank *Acting rank *[To be entered in pencil to facilitate alteration.] (4) Surname (5) Christian Names (6) Army Form, number of, Attestation } Form or Record of Service paper } (7) Whether of British or of Alien origin [vide A.C.I. 578 of 1918] (8) Date of birth as stated on enlistment (9) (a)	(2) Regiment or Corps	(3) Regtl. No.								
(10) Enlistment (b) (12) Service reckons from (date) (14) Any subsequent variations (if any) } of conditions of service } (Authority)	(11) Engagement (c) (13) Special conditions (if any) of enlistment (d) (date)									
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 20%;">(15) Category</th> <th style="width: 15%;">Date</th> <th style="width: 20%;">Medical Authority</th> <th style="width: 20%;">Initials and Rank of an Officer</th> </tr> </thead> <tbody> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>	(15) Category	Date	Medical Authority	Initials and Rank of an Officer					(16) (Record of Occupation in Civil life (vide Army Order 93 of 1917) Industrial Group No. Trade or Calling Married or Single Particulars of Trade Test Occupation Cards despatched on (date) Second Occupation Card despatched on (date)	
(15) Category	Date	Medical Authority	Initials and Rank of an Officer							
(17) Next of Kin (18) Demobilizer (f) (19) Pivotal-man (f) (20) Qualifications (g)	(Place) (Date) or (21) Corps trade and rate									
(22) Extended { (24) Miscellaneous entries:—	(23) Re-engaged {									

Initials and Rank of an Officer.

NOTES.—[a] Here enter particulars of any subsequent claim as to actual age after verification by birth certificate [vide A.C.I. 470 of 1918. [b] Whether direct or voluntary enlistment or called up under the Military Service Acts. [c] Whether for specified term of years or for duration of the war. [d] Whether "for Home Service only," or "not to be transferred without the soldier's consent, &c. [e] If to be retained on Home Service, period, if specified, to be stated, also authority, and on what grounds. [f] Required for demobilization purposes. [g] Signaller, Shoing-smith, &c.

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(A) Report		(B) Authority of Part II. of Orders	(C) Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	(D) Place of casualty	(E) Date of promotion, reduction, reversion, casualty, &c.	(F) Remarks, and initials and rank of an officer
Date.	From whom received					
1/8/319			ceases to be attached on proceeding to	H. Reskin	D.O. No. 76 d 19. 3. 19	
18.3.19	H. Reskin	65	J.O.S. from W.O.R.D.	Witley	18.3.19	
28.3.19	do.	74	S.O.S. on transfer to M.D. Wing No: 1 Himmel Park.	do.	28.3.19	
				<i>J. W. Riley</i> LIEUT. & ASST. ADJUT. FOR O. C. 4TH CANADIAN RESERVE BATTALION.		

29/3/19 O.C.M.D.C.W.I. T.O.S. For return to Canada, Rhyl..... D.O. No.

S.O.S. on Proceeding to C.E.F. Can. Rhyl..... D.O. No. 78

J. J. Coombes Lieut.

TOS No 1 Dist. Depot Officer i/c W.D.O, for O.C.M.D.C.W.I.

Displ. Stn. K. 3-4-19 Embarked Liverpool

SOS dispersed S. Lapland 3 April 1919.

13,4,9 D.O. No. 94

J. J. Coombes

O.C. Dispersal Area Sta. K.

Nothing to be written in this margin.

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

INSTRUCTIONS.

- (a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.
- (b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.
- (c) All questions, etc., must be answered.
- (d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.
- (e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

(1) Name of Overseas Unit which Soldier joins..... **160th Bruce Battalion**

(2) Regimental Number **651405**

(3) Full Name of Soldier..... **PETTER, Harry**

(4) Place of Birth..... **London, England**

(5) Are you married, or not? **Yes**

(6) If married, state,

(a) Full name of your wife..... **Laura Jessie Petter**

(b) Present Postal Address..... **Wiaraton, Ont.**

(7) Are you a widower?

(8) Have you any children? **Yes**

If so, give number of boys and girls..... **4 Boys** **1 Girl**

Also their names and ages..... **Marie, 12** **Esther, age 10**

..... **Louise, age 7** **Francis, age 5** **Walter, age 3**

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

If so, state name and address.....**George Petter, London, England**.....

(10) Is your Mother alive?.....**No**.....

If so, state name and address.....

(11) If your Mother is a widow.....**No.**.....

Are you her sole support, or not?.....

(12) If sole support of widowed mother, state what amount you have given her per month prior to your enlistment, also reason she has no other support than yourself.

(13) If you have no wife, father, mother or children, state the name and relationship with full postal address of your next of kin, to whom you would desire any communication to be sent concerning you.

(14) If you have a wife, or children, or a widowed mother who depends on you as her sole support, have you applied to the Paymaster of your unit for Separation Allowance? If not, this must be done.

.....**Yes**.....

(15) Are you insured?.....**No**.....

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

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

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

A. Weir Lt-Col.
Officer Commanding.

Date.....**6th June, 1916.**.....

160th Os. Battalion. C. E. F.

MILITIA AND DEFENCE
 ASSIGNED PAY
 OVERSEAS CONTINGENTS

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

Pether's wife
 To Whom *Mrs. Laura Jessie Pether* By Whom Assigned *Pether Harry*
 Address *Warton* Regtl. No. *65-1405*
Ont. Rank *Corp.*
 Corps *160th Bm.*
 Rate *16⁰⁰* *OCT 1. 1916* *Oct. 1. 1916*

PAYMENTS

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



1911

1912

1913

1914

1915
1916
1917
1918
1919
1920

1921

1922

1923

1924

ASSIGNED PAY

OVERSEAS CONTINGENTS

Wife
PAYMENTS.

Name of Soldier

Sheet No. 2.

L. L. Job 4503. -Req. 6832.

*Pether**L. J. Pether**Pether**Pether Harry**651405**Corpl. 16018 Bn**SA*

Month.	Year.	Cheque No.	Amt.	Remarks.
				<i>OCT 1 1916</i>
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.		<i>Z 23090</i>	<i>16</i>	
Nov.		<i>a 31863</i>	<i>16</i>	
Dec.		<i>T 34969</i>	<i>16</i>	
Jan.	1917	<i>Y 41295</i>	<i>16</i>	
Feb.		<i>446799</i>	<i>16</i>	<i>16-R- Y 46799 Can 16-2-17 (ad M)</i>
March		<i>E 48881</i>	<i>16</i>	
		<i>m 51694</i>	<i>16</i>	
April		<i>K 4298</i>	<i>16</i>	<i>16 R</i>
May		<i>K 10827</i>	<i>16</i>	
June		<i>J 18123</i>	<i>16</i>	<i>OBa</i>
July		<i>K 24589</i>	<i>16</i>	<i>S</i>
Aug.		<i>Y 39447</i>	<i>16</i>	<i>S Y 31416 Can Gro</i>
Sept.		<i>F 40919</i>	<i>16</i>	<i>lu</i>
Oct.		<i>V 43652</i>	<i>16</i>	<i>V 43651 Can</i>
Nov.		<i>Y 51754</i>	<i>16</i>	
Dec.		<i>J 61963</i>	<i>16</i>	<i>240.</i>
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

PAYMENTS.

Name of Soldier _____

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.				

SEPARATION ALLOWANCE

Name *Laura J. Petter*Name of Soldier *Petter, Harry*Address *Wianton
Out*Regtl. No. *651405*Rank *Pte*Corps *160 Batt*

Relation to Soldier

To what Corps belonging

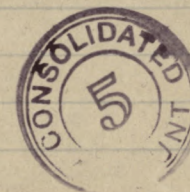
wife, child or mother

Wife

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				



4410
OK



Handwritten scribbles and faint markings, possibly including the word "KIND" written upside down.

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Laura J. Petter ^{Wife} PAYMENTS.

Name of Soldier

Petter, Harry

Pte

Sheet No. 2.

L. L. Job 89002.-Req. 6213.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916	Q2873	40	40
May		07626	20	20
June		J8866	20	20
July		E8045	20	20
Aug.		A12642	20	20
Sept.		2016627	20	20
Oct.		L20458	20	20
Nov.		J23696	20	20
Dec.		Y26338	20	20
Jan.	1917	729544	20	20
Feb.		J32659	20	20
March		J36010	20	20
April		R2244	20	20
May		5156	20	20
June		P8360	20	20
July		J11859	20	T
Aug.		S15327	20	B
Sept.		D20478	20	B
Oct.		H21481	20	⊕
Nov.		P24392	20	m
Dec.		T27658	20	S
Jan.	1918			
Feb.			440	
March				
April				
May				
June				
July				

MILITIA AND DEFENCE
SEPARATION ALLOWANCE
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

PAYMENTS.

Name of Soldier.....

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.				

* Strike out whichever inapplicable.

ASSIGNED PAY.	ENGLAND or CANADA.	SEPARATION ALLOWANCE.	ENGLAND or CANADA.	NAME:- PETTER Harry				
EFFECTIVE DATE:- 1-10-46		EFFECTIVE DATE:-		NUMBER:- 651405				
AMOUNT:- 7 16⁰⁰		AMOUNT:-		PARTICULARS OF RANK OR APPOINTMENT				
NAME, ADDRESS, RELATIONSHIP & AUTHORITY		WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.		AUTHORITY				
Mr. Laura Jessie Petter (Wife) Warton Ont Stopped off. 1/4/19				DATE EFFECTIVE				
				RANK OR APPOINTMENT				
				UNIT AND TRANSFERS				
				ORIGINAL UNIT:- 160th Bn				
				DATE ACCOUNT FIRST OPENED:- 1-11-16				
		AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S F'D				
		27	29.3.18	4.18				
			16.5.19	18th Bn				
				Can Sect				
EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS		UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK						
DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	
13/3/19	12099	16.6.D.	7 30					
21/3/19	5397	Wrt	7 30					
				DAILY RATES OF PAY AND ALLOWANCES				
				AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
					100	10		

PARTICULARS OF RENDERING NON-EFFECTIVE:- **Trans. to ban. 1/4/19 Mr. 5103. Wrt. to Wrt. 24/3/19. Ind. 1. L.P.B. \$61.97**

1918 MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
March	Bal Fwd								1708	450	
April	P. Pay	33 00		cap				16			
				AR 95 9.4.18 *200RC	446						
				✓ 76 17.4.18 18 th Bn	357						
				5 th 76 th Batal C.V.W. 6 B2801	2000				605	450	
May	P.P.	33 10		C.A.P.	2803			16			
				AR 142 16.5.18 18 th Bn	446			16	1969	450	
June	P.P.	33 10		C.A.P.	446			16			
				AR 202 4.6.18	803						
				✓ 255 22.6.18	357				2509	450	
July	P.P.	33 10		C.A.P.	1160			16			
				AR 388 9.7.18	446						
				✓ 504 24.7.18	357				3516	450	
Aug	P.P.	34 10		C.A.P.	803			16			
				AR 617 19.8.18	357				4969	450	
Sept	P.P.	33 10		C.A.P.	357			16			
				bat				16	6669	450	
Oct		34 10						16	8479	450	
Nov		33 10						16			
Dec		34 10						16	11989	450	
				6498 23 rd 116 th Bn	2920				9069		
Jan		34 10		cap				16	10879		
				AR 1823 # E.3096 14/11	15 1270				10757	450	
		101 20			3042			48			
Feb		30 80		cap				16			
				AR 1823 # E.3336 21/1/18	85						
				AR 7465 27/1/19 # 116 th Bn	6 487						
				AR 1823 # E.3919 5/12	7 85						
				✓ 1372 28/11	7 85						
	Carried Ford.	30 80			742			16			

NUMBER 651405 RANK

NAME PETTER H.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
July	Sol Ford								107.57	450	
	Sret Ford	30.80			742			16			
Mar				7726 4/20 11.6 942	10 4867						
		34.10		AK 50979 9/11/19	5641 973			16	74.65		
	S.F. 4-2-19 to 16-2-19 2041-17/19. 1cc	876		AR 11632-24-2-19. 1cc 65.812	730				46.11		
	Int. on Def. Pay.	- 46		14099-13-3-19	37 7330				6927		
		7412		5397-24-3-19 - 4 Res	36 730				6197		
		7412			8472			32-			

Sol. Canada MD 1-3-4-19. SL 37. 4 Res.

Checked 24/3/19
 RM Jambin
 2 copies

76.11
 46
 76.57
 14.60
 61.97

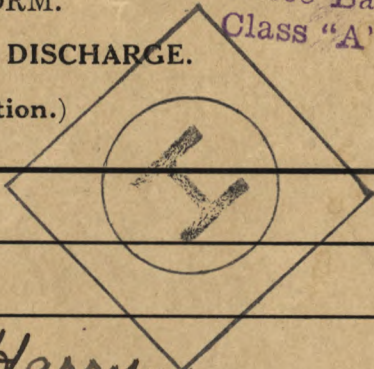
M.C.1.

SHORT FORM.
PROCEEDINGS ON DISCHARGE.

War Service Badge
Class "A" No. 259687

(Demobilization.)

14



1. No. 651405

2. Rank. Private

3. Name. PETTER, Harry

4. Unit. Late 160 Bn. 18th Bu. 4th

5. Date of Discharge 12-4-19 Place London

6. Reason for Discharge B II
Next of Kin Wife
Occupational Group 1

7. Authority

8. Proposed Residence after Discharge Warton Int.
Causality yes. RR6
Decorations none
Service in France 6 months

9. CERTIFICATE TO BE SIGNED BY SOLDIER.

I hereby acknowledge that at the undernoted place and date I received my discharge Certificate

M. F. W.? H. Peter

Deceased
Signature of Soldier
21-33
13619

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place

Date

SOS No 1 Dist. Depot
Displ. Stn. K.3-4-19
SOS dispersed
13,4,19 D.O. No. 104

Embarked Liverpool
SE L n. 3 April 1919
Disembarked Halifax 10 April 1919

Signature

(O. C. Discharging Unit.)

Here 29-10-19

LIST OF DISCARDED DOCUMENTS

1875-1876	Medical History Sheet
1877-1878	Examination of the eye
1879-1880	Examination of the ear
1881-1882	Examination of the nose
1883-1884	Examination of the throat
1885-1886	Examination of the chest
1887-1888	Examination of the abdomen
1889-1890	Examination of the pelvis
1891-1892	Examination of the skin
1893-1894	Examination of the nervous system
1895-1896	Examination of the mind
1897-1898	Examination of the general condition
1899-1900	Examination of the special senses
1901-1902	Examination of the organs of sense
1903-1904	Examination of the organs of locomotion
1905-1906	Examination of the organs of reproduction
1907-1908	Examination of the organs of excretion
1909-1910	Examination of the organs of nutrition
1911-1912	Examination of the organs of circulation
1913-1914	Examination of the organs of respiration
1915-1916	Examination of the organs of assimilation
1917-1918	Examination of the organs of elimination
1919-1920	Examination of the organs of growth
1921-1922	Examination of the organs of development
1923-1924	Examination of the organs of maturation
1925-1926	Examination of the organs of senescence
1927-1928	Examination of the organs of death
1929-1930	Examination of the organs of resurrection
1931-1932	Examination of the organs of eternal life
1933-1934	Examination of the organs of glory
1935-1936	Examination of the organs of honor
1937-1938	Examination of the organs of power
1939-1940	Examination of the organs of wisdom
1941-1942	Examination of the organs of love
1943-1944	Examination of the organs of peace
1945-1946	Examination of the organs of joy
1947-1948	Examination of the organs of hope
1949-1950	Examination of the organs of faith
1951-1952	Examination of the organs of charity
1953-1954	Examination of the organs of grace
1955-1956	Examination of the organs of mercy
1957-1958	Examination of the organs of kindness
1959-1960	Examination of the organs of gentleness
1961-1962	Examination of the organs of self-control
1963-1964	Examination of the organs of patience
1965-1966	Examination of the organs of perseverance
1967-1968	Examination of the organs of courage
1969-1970	Examination of the organs of fortitude
1971-1972	Examination of the organs of justice
1973-1974	Examination of the organs of temperance
1975-1976	Examination of the organs of sobriety
1977-1978	Examination of the organs of chastity
1979-1980	Examination of the organs of modesty
1981-1982	Examination of the organs of humility
1983-1984	Examination of the organs of meekness
1985-1986	Examination of the organs of mildness
1987-1988	Examination of the organs of gentleness
1989-1990	Examination of the organs of kindness
1991-1992	Examination of the organs of love
1993-1994	Examination of the organs of peace
1995-1996	Examination of the organs of joy
1997-1998	Examination of the organs of hope
1999-2000	Examination of the organs of faith
2001-2002	Examination of the organs of charity
2003-2004	Examination of the organs of grace
2005-2006	Examination of the organs of mercy
2007-2008	Examination of the organs of kindness
2009-2010	Examination of the organs of gentleness
2011-2012	Examination of the organs of self-control
2013-2014	Examination of the organs of patience
2015-2016	Examination of the organs of perseverance
2017-2018	Examination of the organs of courage
2019-2020	Examination of the organs of fortitude
2021-2022	Examination of the organs of justice
2023-2024	Examination of the organs of temperance
2025-2026	Examination of the organs of sobriety
2027-2028	Examination of the organs of chastity
2029-2030	Examination of the organs of modesty
2031-2032	Examination of the organs of humility
2033-2034	Examination of the organs of meekness
2035-2036	Examination of the organs of mildness
2037-2038	Examination of the organs of gentleness
2039-2040	Examination of the organs of kindness
2041-2042	Examination of the organs of love
2043-2044	Examination of the organs of peace
2045-2046	Examination of the organs of joy
2047-2048	Examination of the organs of hope
2049-2050	Examination of the organs of faith
2051-2052	Examination of the organs of charity

LIST OF DISCHARGE DOCUMENTS.

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

1. Triplicate Attestation Paper (M.F.W. 23), or Particulars of Recruit (M.F.W. 133).
2. Casualty Form (A.F.B. 103).
3. Medical History Sheet (M.F.B. 313 or A.F.B. 178).
4. Proceedings of Med. Board (M.F.B. 227 or M.F.W. 129)
5. Dental Certificate (C.A.D.C. 5000a).
6. Field Conduct Sheet (A.F.B. 122)
7. Proceedings on Discharge (M.F.B. 218a)
8. Discharge Certificate (M.F.W. 39)
(Enclosed in special envelope (260M)).
9. Copy of Discharge Certificate (M.F.W. 39a).
10. Dispersal Certificate (C.D. 5).
11. Equipment and Clothing Statement Q.M.G. Form (D.O.S. 2).
12. Last Pay Certificate (P. 851).
13. Pay Book (A.B. 64).
14. War Service Gratuity (Form M.F.W. 2595).
15. Sundry Documents.

Group..... A

Checked by No..... 19

Date..... 31-3-19

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MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
T 2053 Year 1918 Dec 11	651405	Pte	Petter Petter.	H. E
		Unit.	Age.	Service.
		R Can Bact.	38	36 1/2
Station and Date.	Disease			
	<p>D. W. Left Arm (Fract. Humerus) On Aug 28/18 sharp wound upper 1/3 left arm. F. b. removed at operation was on Thomas splint with Extension for 2 mos. Massage for 2 mos. Some limitation of Ext. rotation</p>			
Jan 14/19.	<p>Has good movement of arm but muscles are flabby. For Remedial treatment.</p>			
	<p>Always by</p>			

M. J. ...

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

MEDICAL CASE SHEET

Station
and Date.

Organization No. Name of Surgeon (Chief)

Room

Year

Station and Date

1-1-12

TABLE II.—Only for admissions to Hospital or to the Sick List in Case of Warrant Officers treated in quarters

Name of Hospital	Admitted to Hospital.			Discharged from Hospital			Disease	Number of days in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
Fort Pitt and Chatham	3.	9.	18				95. w. am. (L)		Comp. Fract. humerus (L) upper 1/3. Canal - broken tube inserted. Dressing -	J. Hagan
Stent Gen: Hosp: Maidstone	5	9	18	16	10	18	" "		Cartilage irregular - Extension on thumb splint - good position	218 J. Hagan
									Treatment continued, massage - good result	218 J. Hagan

HOWARD DE WALDEN HOSPITALS MAIDSTONE

P328

THIS FORM WILL BE USED FOR ALL RANKS
MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

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

18th attached 10/1888 STATION Witley Surrey DATE Mar 6-1919

1. 1 (a) Unit 10/1888 (b) Regimental No. 651405 (c) Rank Pte

(d) Surname PETTER (e) Christian name HARRY

(f) Home address Wiarlton Ont Canada

(g) Next of Kin Mrs L J Petter (h) Relationship wife

(i) Address of Next of Kin Wiarlton Ont Canada

2. Age last birthday 38 Date of birth 1881

3. Enlistment, or Appointment (if an Officer) (a) Place Wiarlton (b) Date 13 Jan 1915

4. Personal description:

(a) Height 5 ft 10 1/2" (b) Weight 155 (c) Complexion Dark
(stripped)

(d) Colour of hair Dark (e) Colour of eyes Blue (f) Identification marks, Scars, etc. nil

5. Former trade or occupation Farm Labourer

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).

	Years	Days
	<u>3</u>	<u>2 mos</u>

	PERIODS	
	From	To
Canada	<u>Jan 1915</u>	<u>Oct - 1915</u>
England	<u>Oct 1915</u>	<u>Mar - 1918</u>
France or other theatres of War	<u>Mar 1918</u>	<u>Sept 1918</u>

7. Original disease, or injury 1. Penetrating wound of L arm & fracture of humerus.

2. Flat feet.

(a) Date of origin 1. 28-5-1915 (b) Place of origin 1. France

(c) Cause 1. ILLD Farm (2) Unknown

8. Present disability— (Here state the exact nature of the disability resulting from the disabling conditions: e.g. (a) Weakness—slight, moderate, marked, etc; (b) Loss, complete or partial, of an organ or member, or of its functions; (c) Necessity for rest of the body, or of some of its parts, for therapeutic reasons; (d) Any other restrictions in choice of occupation.)

(Adherent scars) Partial loss of function L. Arm.
(Flat feet) Partial loss of function of feet

9. Present condition—(a) (Before completing this section the invalid should be stripped, and subjected to a thorough physical examination. Important, to be a full description of the present disabling condition, or conditions only. "History" must be recorded in Section 10. Describe all abnormalities, anatomical and functional, contributing to present disability; objective findings to be stated first, then subjective findings.)

Obj. Signs:—1. About 4" below head of humerus posteriorly is scar of entry about 1" in diameter + adherent to underlying muscle. About 3" below head of humerus, anteriorly is an linear 2 1/2" scar from operation for F.B. There has been a compound fracture of the humerus about 3" below the head no deformity of bone good union fair amount of callus. There is atrophy in L. arm. R arm 11" L arm 10 1/4" Dc. Semitarsus good. Hand sup 3/4 rounded. Flexion of wrist elbow about 20% less than normal. Supination about 3/4 normal. Upward abduction of shoulder limited; about 15-20% less than normal.
Subj. Symptoms:—(1) Chief complaint is limitation of upward movement of the arm. Also partial loss of power in arm. (2) No complaint regarding feet now. In France could not carry or write marches on acc. of painful feet.

(b) Has the invalid now any affection of the following systems, not described in Section 9 (a) above?
(Answer Yes or No.—if the answer to any part is Yes, give a brief description of the present condition.)

Nervous System.....no Cardio-Vascular System.....no Genito-Urinary System.....no
(If pulse rate is abnormal, B. P. will be taken.) (Albumen and Sugar will be excluded.)
Special Senses.....no Respiratory System.....no Integumentary System.....no
Disturbances of Mentality.....no Digestive System.....no Muscular System.....no
Osseous and Joint Systems.....no Any other general condition.....no

(2) Both feet are moderately flat + slightly rigid type. Nails 10 2 2 acid alb. + rug. rid. Tendency to hammer toes L. foot + hallux valgus. Also slight lordosis in spine.

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

1. He was injured 28-8-1918. Hospitals Meadstone + Shorecliffe 16-10-18—4-2-19 2. f. 210 d. upper arm. "Comminuted fract. of humerus".
2. He states that his feet first bothered him in France when he fell out of the route marches on 3 different occasions. On his return to England feet have not bothered him.

10.—(b) (Here give a complete history, as obtained from invalid, with dates of origin, of any affection from which the invalid, has suffered either prior to or since enlistment, and not included in Section 10 (a).)

*Prior Hist. nil
since Enlistment nil*

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

see (9a)

11.—(a) Did the disabling condition have its origin before enlistment? *no (2) yes*

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

(1) no (2) yes. the condition looks of long standing. He states that he does not know if previous flat pneumonia healed.

12. Was the disability caused, or aggravated; (a) by intemperance, or improper conduct; or (b) by unreasonable refusal to accept treatment? *1 + 2 - no*

The regimental documents will be referred to.

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

13. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? *1. permanent - improvement (2) permanent*

14. Treatment (Case reports, general or special, should be secured and attached where possible.)

Irrigation of wound - cure + extension for 2 weeks in Thomas splint.

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit? (If the answer is "yes" state nature of treatment required and probable duration)

1 + 2 - no

16. Can the former trade or occupation be resumed? (If not, briefly state why) *no - the work is too difficult at present with present state of arm.*

17. Recommendations

[Signature]
Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

(Sections 7, 8, 9 and 10 are to be read to the invalid and either "satisfied" or "not satisfied" struck out).

I, the undersigned *Harry Potter* have heard the description of my disability and present condition read, and am satisfied (or not satisfied) with it. (If dissatisfied, statement should follow.)

I complain in addition of

H. Potter Rank *Private*
Signature of invalid examined.

OPINION OF THE MEDICAL BOARD

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

Para 16. Man should be able to resume his former occupation

19. Is the invalid fit for

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

20. It is certified that the invalid

- (a) Does require treatment. (Give the nature of the condition and of the treatment required and its probable duration.)
- (b) Does not require treatment. *Yes*
- (c) Should pass under his own control.
- (d) Should not pass under his own control. (Strike out condition not applicable.)

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

Boarded for return to Canada Auth AG, 1.9083 d. 7/18

Before signing the President of the Medical Board will read the statement signed by the invalid and differing opinions regarding Sections 7, 8, 9 and 10, as recorded in Section 18, to the invalid and if no change is indicated, will initial the statement. If, as a result of differing opinions regarding Sections 7, 8, 9 and 10 only, recorded in Section 18, the invalid is dissatisfied with the statement previously made, remarks of the Medical Board will be added here.

PLACE *Witley* *H. B. Barton Esq. C.M.C.* President.

DATE *6/3/19* *Jos. L. Hammond* Members

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

PLACE..... President

DATE..... Members

APPROVED BY *[Signature]* Assistant Director of Medical Services. APPROVED BY *[Signature]* Director-General of Medical Services.

DATE..... DATE.....



Date of Enlistment

1 9 18

MILITIA AND DEFENCE

Date of Assignment

1. 3. 16.

PG 2753

Separation and Assigned Pay Branch

Oct 14 16.

MO 27864

OVERSEAS CONTINGENTS

P

4138

RATE OF SEPARATION ALLOWANCE

20	25 1/2	30	
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RATE OF ASSIGNMENT

16			
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628 P10
Dmt

PARTICULARS OF SEPARATION ALLOWANCE

No. 6514 05.
 Rank *Corp.* Promoted Reverted Discharge
 Soldier's Name *Harry Pether. Pether*
 Battalion *160th Battrn.*
 Beneficiary *Laura J. Pether.*
 Relationship *Wife.*
 Address

PARTICULARS OF ASSIGNMENT

Name *Mrs. Laura Jessie Pether. Pether* (Wife)
 Address *Widarton, Ont.*
 Change of Address
 1
 2
 3
 4

M F W. 2557 Issued 27-7-18

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
1917					
Dec. 31.		440.	240.	680.	
Jan 18	W 71556	30	16	46	
Feb 18	A 67390	25	16	41	<i>✓</i>
Feb 18	Q 91148	25	16	41	<i>✓</i>
April	Q 7762	25	16	41	<i>✓</i>
May	Q 15665	25	16	41	<i>✓</i>
June	Q 20839	25	16	41	<i>✓</i>
July	Q 30600	25	16	41	<i>✓</i>
Aug	Q 37444	25	16	41	<i>✓</i>
Spt.	E 38893	25	16	41	<i>✓</i>
Oct.	C 45765	25	16	41	<i>✓</i>
Nov	Q 60870	25	16	41	<i>✓</i>
Dec	H 63528	45	16	61	<i>✓</i>
Jan/19	A 73068	30	16	46	<i>✓</i>
Feb	B 79983	30	16	46	<i>✓</i>
Mar	A 85575	30	16	46	<i>✓</i>
Apr	A 2995	30	16	46	<i>✓</i>
		885	496	1381	

R160

M.R.O #11530 Change name 26/9/18 OK

M. F. W. 128
4000 G. 17-172-38-114
L. L. 22320-M. & D. 1993.

A/c Closed 30-4-19
 Ret'd per. *Lapland*
 Date 10/4/19 M.F.W. 187 MD-1 M.R.O. 75220 Destroy.
 RM 16/4/19 file 14475-H 23



244

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) PETTER, H.

REGIMENT 4TH RES. RANK PTE. No. 651405

Date of Examination in England 20/3/19 Date of Examination in France _____



DIRECTIONS TO DENTAL OFFICERS

1. This form will be made out for each individual at the time of Demobilization in England or France.
2. Figures as per chart will be used to designate teeth concerned.
3. In reference to Partial Dentures the numbers of teeth thereon will be stated.

F

PRESENT DENTAL REQUIREMENTS

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

HAS HE EVER REFUSED DENTAL TREATMENT? No

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

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

CONTENTS COPIED
C.A.D.C., M. D. No. 1.

Signature of Dental Officer J. Ross

U

RES
PLIK

Handwritten notes in purple ink, including the word "PLIK" and other illegible characters.

RES
PLIK

PROMOTIONS, REDUCTIONS AND REVERSIONS AFFECTING
 DAILY RATE OF PAY AND ALLOWANCES
 REGT. NO. *651405* RANK *Plt* NAME (IN FULL) *Petter Harry*

M. OR S. *M.*

NEXT OF KIN *Mrs Laura Jessi Petter* RELATIONSHIP *wife* ✓
 ADDRESS *Wiarnton Ont*

ORIGINAL UNIT C.E.F. *160th Bn* ✓
 PLACE OF ATTESTATION *J.O.S. D.D.#1* TRANSFERRED TO *J.O.S. D.D.#1* DATE *3/4/19* AUTHORITY *DD 104*

DATE OF ATTESTATION *13-1-16* TRANSFERRED TO *J.O.S. D.D.#1* DATE *3/4/19* AUTHORITY *DD 104*

ASSIGNED PAY *16⁰⁰* DATE EFFECTIVE *30/4/19*
 PAID AND CLOSED BY OTTAWA *30/4/19*

TO WHOM PAID *Mrs Laura Jessi Petter* RELATIONSHIP *wife* ✓
 ADDRESS *Wiarnton Ont*

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE

DISCHARGED *London* PLACE *13/4/19* DATE *Dem.* REASON *DD 104* AUTHORITY *DD 104* IF ENTITLED TO POST DISCHARGE PAY

od

MONTH	PAY AND F.A.		OTHER CREDITS		TOTAL CREDITS		ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY		REGI-MENTAL CHARGES		OTHER CHARGES		TOTAL DEBITS		BALANCE		PARTICULARS OR REMARKS
	NO. OF DAYS	RATE	AMOUNT				COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2	COL. NO. 3	\$	C.	\$	C.	\$	C.	\$	C.	DEBIT	CREDIT	
<i>31-3-19</i>					<i>61.97</i>	<i>61.97</i>																	<i>Rappel Lapland 11/19</i>
<i>18-4-19</i>	<i>18</i>	<i>119</i>	<i>1980</i>	<i>35</i>	<i>470</i>	<i>124.80</i>				<i>28.30</i>	<i>4.87</i>	<i>5-</i>	<i>160.90</i>	<i>16-</i>						<i>186.77</i>			<i>BALENG L.P.C. 31-3-19</i>
																							<i>PAY TO ESTIMATED DATE OF DISCHARGE 18-4-19</i>
																							<i>CLO. ALLGE. 1st PAYMENT OF W.S.G.</i>
																							<i>BOAT MONEY TRAIN MONEY</i>
																							<i>W. A. Mortimer Major</i>
																							<i>Soldier Dependent</i>
	<i>183 days</i>				<i>420.00</i>	<i>180.00</i>	<i>600.00</i>																<i>1st payment 21.11.19 above</i>
																							<i>SA for apr. 17 days overpaid</i>
																							<i>by Ottawa</i>
																							<i>MAY 3 1919 4.75908</i>
																							<i>Adj. to adjust to date of discharge</i>
																							<i>5 days @ 1.00</i>
																							<i>MAY 13 1919 4.79767-8</i>
																							<i>12/6/19 1890622-3</i>
																							<i>18/7/19 103215-6</i>
																							<i>12/8/19 116731-1</i>
																							<i>SEP 9 1919 1166733-17</i>
																							<i>Capl.</i>

