

ATTESTATION PAPER.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

No.

TriPLICATE
163419

Folio.

OK 24433

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name? *William Robert Reid*
 2. In what Town, Township or Parish, and in what Country were you born? *Belfast, Ireland.*
 3. What is the name of your next-of-kin? *Sarah Reid.*
 4. What is the address of your next-of-kin? *Dunmurray, Belfast Clontarf*
 5. What is the date of your birth? *July 23rd 1888*
 6. What is your Trade or Calling? *Car Repairer*
 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? *Yes*
 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*
- William Robert Reid* (Signature of Man).
Stanley W Riches (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *William Robert Reid*, 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.

Date *Aug 6th* 191 *Stanley W Riches* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *William Robert Reid*, 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.

Date *Aug 6th* 191 *Stanley W Riches* (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 *Toronto* this *10th* day of *August* 191 *5*

W. H. Hopkins (Signature of Justice)

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

W. H. Hopkins (Approving Officer)

Description of William Robert Reid on Enlistment.

Apparent Age 28 years 1 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. 8 1/2 ins.

Chest measurement { Girth when fully expanded 37 ins.
Range of expansion 2 ins.

Complexion Light

Eyes Grey

Hair Light Brown

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

Two Vaccination Marks on left arm

Scar on left arm

Tattoo on Right Arm

Pansy & Mary

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 Aug 6th 1915

Place Toronto

J. B. Burroughs
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.

William Robert Reid 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.

Date Sept 10 1915 J. G. Wright (Signature of Officer)
Major Lt. Col. Commanding
84th Bn. C. E. F.

REGIMENTAL DOCUMENTS

NAME REID WILLIAM RETICE REGT. NO. 163419 UNIT 84th Bn H. Q. FILE NO. _____

CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505
REFERENCE

NON-EFFECTIVE BY

DEATH

Category

DISCHARGE

Category

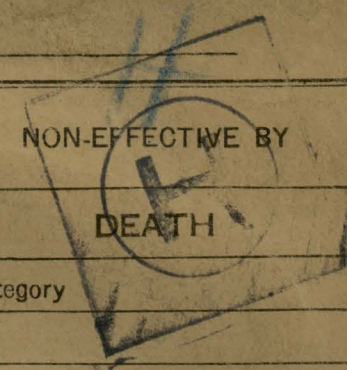
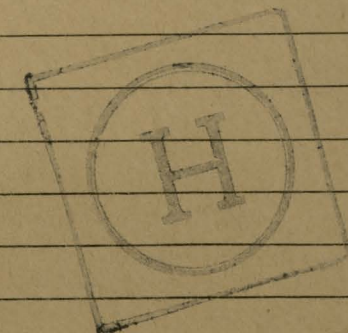
Demobilization

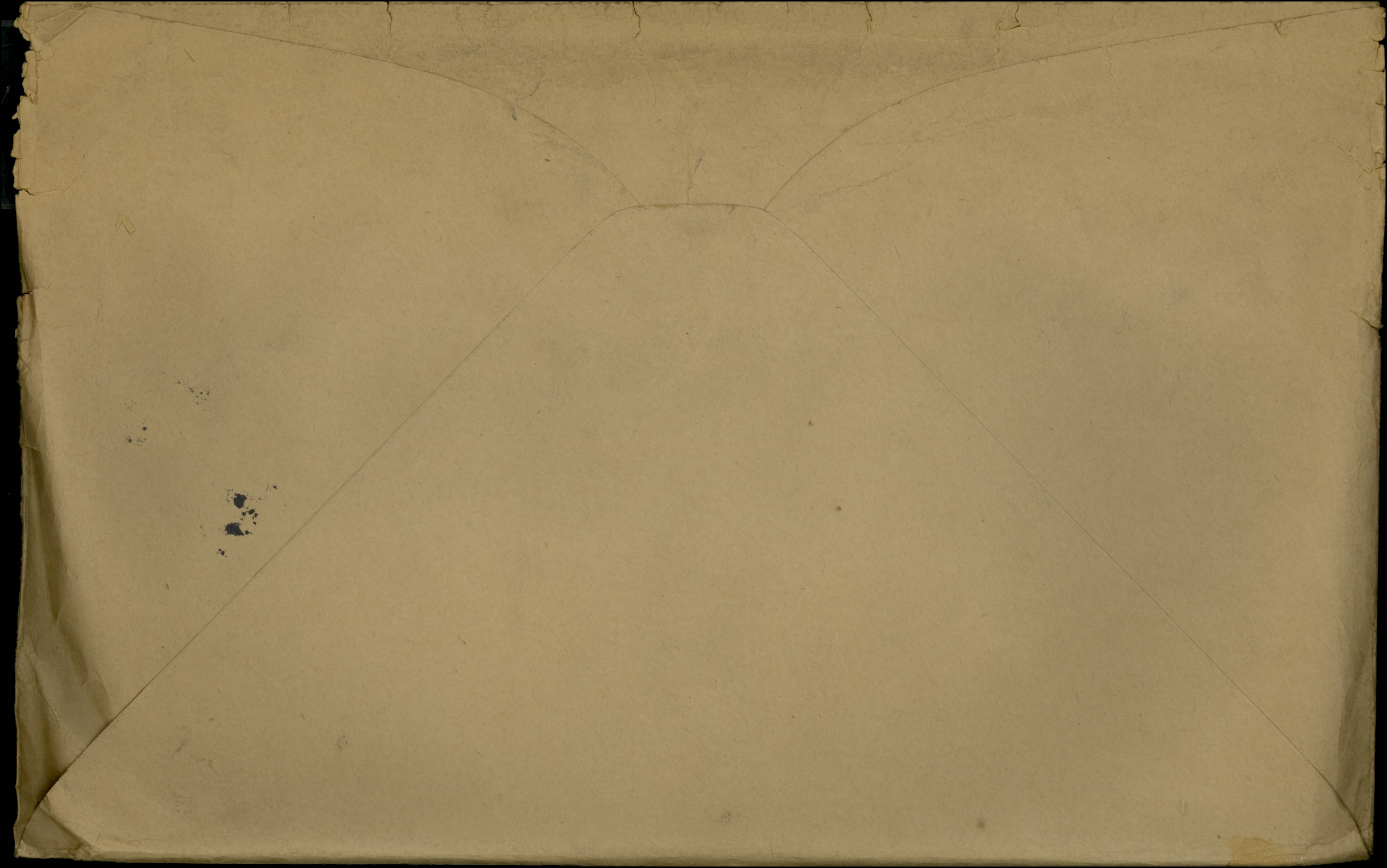
DESERTION

07141

41- 23
19- 23
11- 23

Discharged 15-4-54





SURNAME.

Reid

CHRISTIAN NAMES

William Robert

REGL. NO.

163,419

RANK

Pte

UNIT

84th

FORMER CORPS

nil

NEXT OF KIN.

NAMES IN FULL

Reid, Mrs. Sarah,

RELATIONSHIP TO SOLDIER

Mother

ADDRESS

Lunmurry, Co. Antrim, Ire.

CHANGE OF ADDRESS

COUNTRY OF BIRTH

Ireland, Belfast

PLACE OF ATTESTATION

Toronto, Ont.

DATE

July 23rd 1888

DATE

Aug. 6th 1915

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

18/6/16

S. of Empress of Britain

*155

M. F. W. 22. 250M.-2.16. H. Q. 177239-339.

303 27th

Sip Card "L" m 2
S.O.S. 12-4-19 Demol
FOLL.
D/6107 of 17-4-19 M.D.2

Rm.

MARRIED

SINGLE

yes

WIDOWER

TRADE OR CALLING

Car Repairer

RELIGION

Presbyterian

DESCRIPTION.

APPARENT AGE

28

YEARS

1

MONTHS

HEIGHT

5

FEET

8 1/2

INCHES

CHEST MEASUREMENT

37

INCHES

EXPANSION

2

INCHES

COMPLEXION

Light

EYES

Grey

HAIR

Light Brown

DISTINGUISHING MARKS

2 vacc. marks left arm. Scar on left arm. Tattoo on right, "Flower, Pansy, Mary".

MEDICAL EXAMINATION.

PLACE

Toronto, Ont

DATE

Aug. 8th 1915

Present Address, Not Stated.

No. 163419 RANK *pt*NAME *Reid. William R*

T. O. S.

UNIT

*84 Battalion C.B.F.
(109 Regt. Quola)*M. D. *2*

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1915-</i>	<i>1915</i>			
<i>July 12</i>	<i>July 31</i>	<i>✓</i>		
<i>Aug 1</i>	<i>Aug 11</i>	<i>✓</i>		
<i>Aug 12</i>	<i>Aug 31</i>	<i>✓</i>		
<i>Sept -</i>		<i>✓</i>		
<i>Oct -</i>		<i>✓</i>	<i>Forfeits 1 day's pay. Pt A.</i>	
<i>Nov</i>		<i>✓</i>	<i>Regulations. 8-9-15</i>	
<i>Dec</i>		<i>✓</i>	<i>Forfeits 2 days pay.</i>	<i>Sept - pay list -</i>
<i>1916</i>				<i>Oct - 22nd 1915.</i>
<i>Jan</i>		<i>✓</i>		
<i>Feb</i>		<i>✓</i>		
<i>Mar</i>		<i>✓</i>		
<i>Apr</i>		<i>✓</i>		
<i>May</i>		<i>✓</i>		
<i>June</i>		<i>N</i>		
			UNIT SAILED	
			JUN 18 1916	



NAME

Reid William Robert

H. Q. FILE No. 649-

REG'T'L. NO. 163419

RANK AND CORPS

Pte.

43-th. Battrn. (form. 84 th. Bn.)

CABLE

NO.

DATE

NATURE OF CASUALTY

Re.

M. 1175-7 25-8-16

Adm. to No. 3 Gen. Hospt. Boulogne ^{gm} Aug 14th 1916
(G.S. W. Chest.) ✓

42

15-0

31-5-18

Adm. 20 Field Amb. May 22nd 1918
Cont. Reg ✓

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
a1	3rd. Can. Gen. Boulogne	17-8-16	Gen. chest
B29.	St. Mary's Paddington	20-8-16	" "
B. 50	70 Can. Conv. Bromley Kent	19-9-16	" "
B 54	" " " "	3-10-16	" " Disch.
A286	No 8 Can. Field Amb.	26-7-17	Scabies.
A 293	#11 Can. Field Amb.	15-8-17	Furunculosis L. Knee.
A 301	" " " "	23-8-17	" " "
A 2	Ref from base	15-8-17	Sick to Hosp.
A 7	" " " "	28-8-17	Ref. Unit.
A109 ⁽³⁾	#42 Cas. Clg. Station	4-1-18	W. S. S.
A117 ⁽³⁾	#51 Gen. Staples	12-1-18	V. D. S.
A142 ⁽³⁾	#6. Conv. Hep. Staples	10-2-18	W. H. S.
A170 ⁽¹⁾	Disch. to Base Sep 14	3-18	
A227 ⁽²⁾	No 20 Field Amb	22-5-18	Cont R. Leg.

NAME

Reid, W.

RANK AND COPPS

Pte

CABLE

NO.

DATE

NATURE OF CASUALTY

REG'TL No.

163419

H. Q. FILE NO. 649.

FOLLOWS

No.

FOLLOWS

LIST No.	HOSPITAL	DATE OF ADMISSION	1st C. O. Regt REMARKS
A 235	No 20 Fild Amb.	3-6-18	Cont-R. Leg. disch.
A 396	26 Gen. Etaples	7-12-18	Sprain L. Ankle. ^{as per B 408 spec.}
B 399	Royal Victoria Netley	13-12-18	" " "
B 408	Mil. Conv. Woodcote P. Epsom	21-12-18	" " " acc.
B. 436.	Disch.	27-1-19	" " " "

Name *Reid William* ^{Robt.} Rank *Pte*

Reg. No. *163419*

Unit *75th Bde.*

Next of Kin *Sarah Reid, Dunmurry, Belfast*
Co. Antrim, Ireland.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1916.						
17-8-16	3 rd Can. Gen. Hosp.	Boulogne	G.S.W. Chest	A 1	^{26/8/16} ^M 1757	26/8/16
20-8-16	St Mary's Hosp.	Paddington	do	B 29	^{25/8/16}	
19-9	Can. Conv. Hosp.	Bromley. Kent.	--do--	B 50.		
3-10.	Discharged.		(--do--)	B 57.	7-10.	
26-7-17	8 B F A	Scabies		A 286		
15-8-17	No 11 B F A	Furunculitis L Knee		A 293		
29-8-17	To Duty	do		A 301		

[illegible]

Emk
RS

B

Number.....163419..... Rank.....Plt.....

Surname.....R.E. 10.....

Chris ian Name.....William Robert.....

Uni s.....75th In fan Bf hea re of War France
11-8-16

Da e of Service.....

Remarks.....

La es Address.....180 Franklin Ave.
Toronto.....

Roll No. B Page 10395

Next of kin

Address on leave

Address on discharge

Transportation issued ☐ Yes ☐ No

Date

Character on discharge

Previous occupation

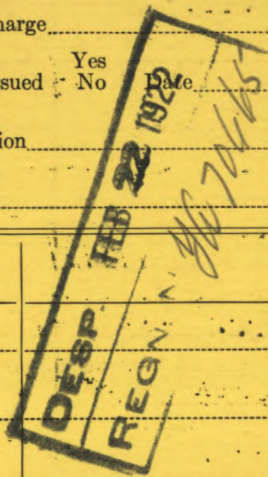
Date and place of enlistment

Diagnosis

Date of Medical Boards

Date

Remarks



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

William Robert

250m-7/2/17.
Name Reed ✓ Rank Plt ✓

Reg. No. 163 419

Unit 75¹ Bath. ✓

Next of Kin Sarah Reid (Mother) Dunmurry, Belfast
Ireland

[illegible]

[illegible]

Surname

Christian Name or Names

Reg. No.

Reid

W.R.

163419

Rank

Unit

Co.

Troop

Batty

Pte. 75th Bn. 1st C. Ont Reg.

Hospital

Date of Admission

3rd Can. G.H. Boulogne

17.8.16

Transferred St Marys Paddington

Hosp. 20.8.16

Bromley Convales.

Hosp. 19-9-16

No. 5 Lau. Dist. Amb.

Hosp. 26-7-17

42 Gas Clear Stat. 4-1-18

Hosp. 15.5.17

Diagnosis

G.S.W. Chest

(1) Later Diagnosis (if changed)

Scabies on

(2)

(3)

Tuberculous Lt Knee

Additional Diagnoses: If more than one state present

Cont. R. Leg

spr. L. ankle & acc

V.S. "Q"

V.D. S. 10

DISPOSITION

Dis. 3.10.16

Dis to B. Dep. Staples 14.3.18

Date

C.L. 26.8.16

A1 & B29

Dis. 3-6-18

REMARKS

B50

C.L. 23-9-16

9.10.16

B54

C.L. 14-5-17 A1286

22.8.17

A1293

31.8.17 A301. Dis to Duty 23.8.17

5.9.17 A2 R.F.B. sick to Hosp. 15.8.17

11.9.17 - A4(3) R.F.B. Ref Unit. 23.8.17

10-1-18 A109-3

19.1.18 A117(3)

A.M.D. 2 DEPT.

18.2.18 A142-3

22.3.18 A1700

30.5.18 A1772

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

R

EPITOME OF HOSPITAL TREATMENT.

	Hospital	Adm.
1.	51 Gen. Hospital #6 Comm. Dep't. Hospital	12.1.18 10.2.18
2.	20 Field Amb. 26. G. Hospital	22.5.18 7.12.18.
3.	Royal Victoria Netley. Woodgate Ph. Epsom -	13.12.18. 21.12.18
4.		
5.		
6.		
7.		

cl.
 8.6.18 a/235.
 13.12.18 a 396-2.
 17.12.18 B. 3990
 30.12.18 a 408/3 ^{Note Re a 396 nature of bas acc}
 30.12.18 B 408/3.
 1.1.19 B 436.2

MILITIA AND DEFENCE

31596

ASSIGNED PAY.

To whom Sarah Reid,

Address Dunmurray,

Belfast,

Ireland.

Rate \$15.00 per month.

Date to Commence 1st June, 1916

By whom assigned Reid, W.R.

Regtl. No. 163496⁴¹⁹

Rank Pte.

Corps &c. 84th Battalion "A" Coy.

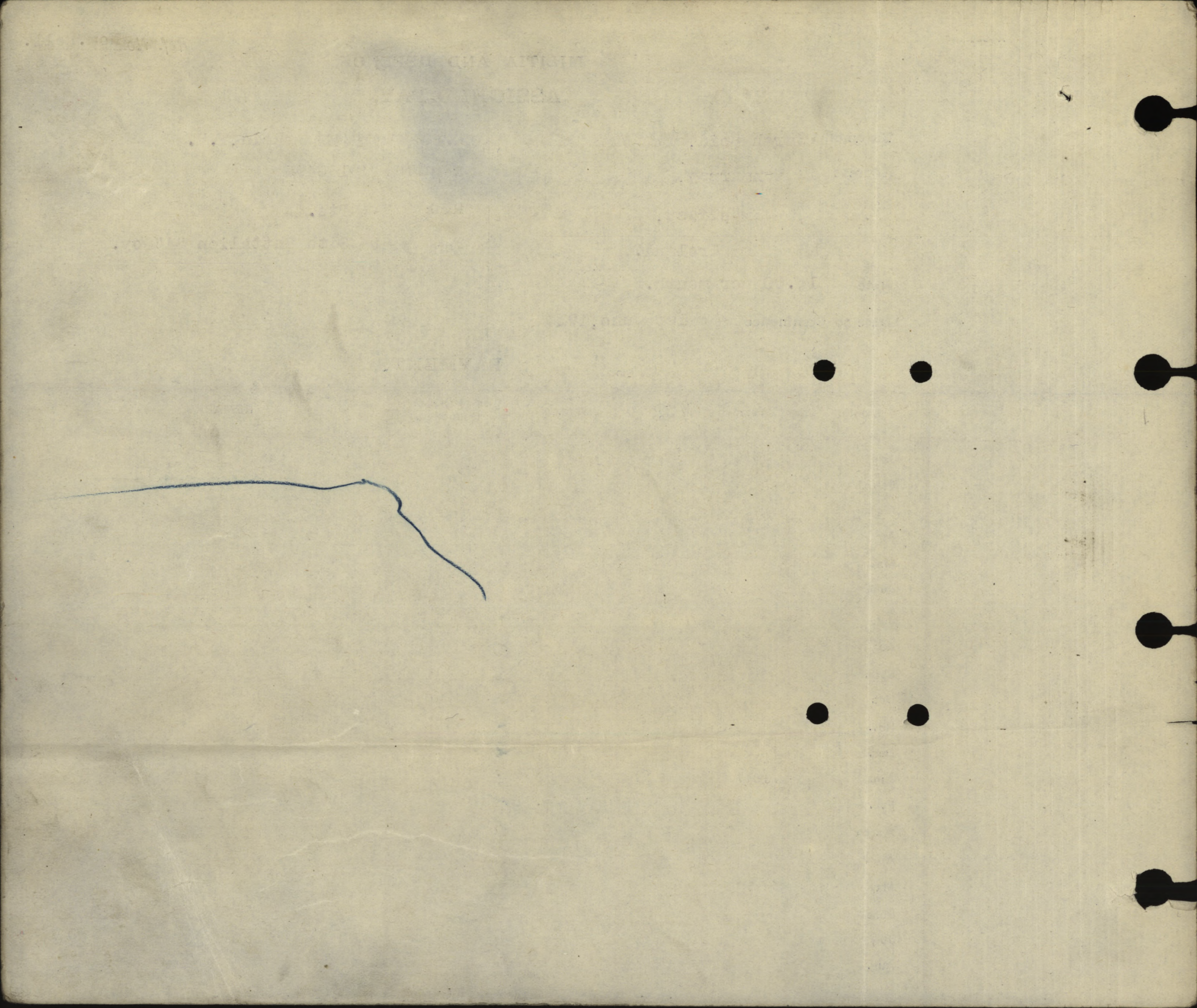
PAYMENTS.

John R. Miller. Pay Sergt.

Month.	Year.	Cheque No.	Amt.	Pay Sheet Deduction.	REMARKS.
Jan.	1916				
Feb.					
March					
Apl.					
May					
June					
July		100980	30		
Aug.		141392	15		
Sept.		178917	15		
Oct.		217040	15		
Nov.	90	241154	15		
Dec.		264185	15		
Jan.	1917	305904	15		
Feb.		376027	15		
March		425152	15		
April			150		
May					
June					
July					
Aug.					



A.P. checked & found correct 21.7.17
A.W. Sullivan



CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 165419 (Rank) Pte

Name (in full) William Robert Reid enlisted in
the 84th O.S. Bn

CANADIAN EXPEDITIONARY FORCE at Toronto on the 6th
day of Aug 19 15

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 32 yrs

Height 5' 8 1/2"

Complexion light

Eyes Grey

Hair Dark Brown

Marks or Scars

One wound scar back

Wound scar shoulder

17/8/15

W R Reid
Signature of Soldier

[Signature]
Issuing Officer

Date of Discharge

No. 2 DISTRICT DEPOT

APR 12 1919

TORONTO

Issuing Officer

For

O.C. No. 2 District Depot
Rank

Date APR 12 1919 19

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.

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY (that No. _____)	
Name (in full) _____	
The _____	
CANADIAN EXPEDITIONARY FORCE in _____	
day of _____ 19 _____	
He served in _____	
and is now discharged from the service by reason of _____	
Demobilization _____	
THE DESCRIPTION OF THIS SOLDIER on the DATE below is as follows:	
Age _____	Height _____
Complexion _____	Weight _____
Hair _____	Build _____
Marks or scars _____	
Signature of Soldier _____	
Date of Discharge _____	Place of Discharge _____
Date _____	Place _____

N.B.—As no duplicate of this certificate will be sent, any person making same is requested to forward it in an unopened envelope to the Secretary, British Forces, Ottawa, Canada.

PRINTED BY THE
GOVERNMENT OF CANADA
OTTAWA, CANADA

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canada Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters)

Reid W.R.

REGIMENT

3rd Can Bn

RANK

Pte

No.

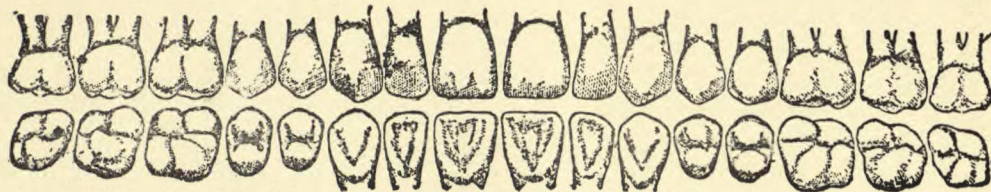
163419

Date of Examination in England

15/3/19

Date of Examination in France

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16



17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32



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?

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

(c) In France

Signature of Dental Officer

M. B. Thomas
Capt.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.

TO: _____
FROM: _____

152419

152419
152419

152419
152419

152419
152419

152419
152419

152419
152419

152419

Name Reed Eul. 6-8-15-

Date of Embarkation for England 18-6-16

Proceeded to France 11-8-16
15-2-17

Returned to England 24-8-16 wd
12-12-18

Date returned to Canada 3-4-19

P.R.2855.

Injured.
"Chick"
3-10-30 / Over

Leas Sheet

17-8-16	G. S. W. Back to Eng. 24-8-16
26-7-17	Scabies to duty 30-7-17
15-8-17	Furunculosis l. Knee to duty 23-8-17
4-1-18	V. D.S. to duty 11-1-18
12-1-18	V. D.S. to duty 10-2-18
22-5-18	Cont. leg R. to duty 3-6-18
5-12-18	Injury ankle l. Sprain (acc.) to Eng. 12/12/18

CERTIFIED CORRECT

1 SEP 1916

CAN. RECORDS, LONDON.

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

Casualty Form—Active Service.

Unit, Regiment or Corps

84th Overseas Battalion C.E.F.

Regimental No. 163419

Rank Pte.

Name

Reid, William Robert

C. E. F.

Enlisted (a) Aug 6/15

Terms of Service (a) Duration of War

Service reckons from (a) Aug 6/15

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)

Can. Repairer

Date	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.
3/7/16	O. C. 84th Bn.	Embarked	Canada	18-6-16	
17.16		Disembarked	England	29-6-16	W. Stewart
		Transferred to 75th Bn. Canadian Infantry	England	3-7-16	Lt. Col. Comdg. 84Bn. C. I. 20150
10.8.16	75th Bn	Proceeded for service overseas.	Bransford	11/8/16	Lt. Col. Buckle
27-8-16	M.L.O.	Disembarked France	Havre	11-8-16	L.R. No. 6280
19-9-16	17-C.C.S	C.S.W. Back			
19-8-16	O.C.H.S.	WOUNDED	England	17-8-16	a36-D.C. 522-d/24-9-16
31 8 16	Western Australian	Trans.to	England	19-8-16	A.F.W. 3083. Part II D.O. 24.8.16 193 d/- 31-8-16.
					Lieut. for Lt. Col. A.A.G., Can. Sec. 3rd Ech. G.H.Q.

(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.

163419 Pte. Reid W.R.

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B 213, Army Form A. 30, 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. 30, or other official documents.
Date	From whom received				
24-2-17.	A.A.G.	Arrived & taken on strength of 75th Battn.	Field.	15-2-17.	PII.O.29.
22-3-17.	O.C.CBD.	Left for 4th Ent D attn.	do.	22-3-17.	N.R.
24-3-17.	do.	forfeits all pay for 10 days for drunkenness	do.	13/3/17	B2069. DO. 4544 31 3/17.
25.3.17	4th EntBn	Taken on Strength	do	25.3.17	NR
1-4-17	do.	Left for Unit	do	14/1/17	do.
7-4-17	OC 75th	Joined unit	do	do	B.213; Dec's. 133
28/7/17	8 C.F.A.	Scabies	8 C.F.A.	26/7/17	A/36/5313. Dec's. 173.
4/8/17	do	Impetigo	to Duty	30/7/17	A/36/5582
18/8/17	Unit	Evac. Sick	Field	15/8/17	B.213. Dec's. 178
16/8/17	11 C.F.A.	Frumentous T. Mue (Remq)	11 C.F.A.	do	A/36/6288
25/8/17	Unit	Rejoined Unit	Field	23/8/17	B.213. Dec's. 179.
22/12/17	do	14 days leave	v	16/12/17	B.213 Dec's. 138
5/1/18	do.	Rejoined Unit	do	3/1/18	B.213
do.	do.	Evac. Sick - N.D.S.	do	4/1/18	B.213
do.	13 C.F.A.	Chancroid	(adm. 13 C.F.A.	4/1/18	A/5702 - C.6653.
do.	42 C.C.S.	M.Y.D. N.S.	(adm. 42 C.C.S.	4/1/18	A/5722 - C.6737.
12/1/18	51 Gen.	N.D.S.	19. A.T.	11/1/18	11/1/18
28/1/18	42 C.C.S.	forfeits 7 d. and placed under 50¢ per diem stoppages from 4/1/18 to 11/1/18. - 8 days.	51 Gen.	12/1/18	M.9982 - C.7750.
10/2/18	51 Gen.	forfeits 7 d. & placed under 50¢ per diem stoppages from 12/1/18 to 10/2/18 - 30 days.	6 Condep	10/2/18	A40.1643/846. D.O.8.
do	do.	N.D.S.	do.	do.	A40.1643/13/8. D.O.12.
do.	6 Condep.	do.	do.	do.	M.2260 - D.2560.
					M.2672 - D.2769.

Signature of Officer i/c Records.

[illegible]

(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.

[P.T.O.]

Date.	From whom received	Report Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
29.8.16	C.C.A.C.	Taken on strength C.C.A.C. Pt. II D.O. No. 3647	Stone	20.8.16	H2 D.O. 3647
10/16		ATTACHED TRANSFERRED FROM C.C.A.C. TO	Shoreham	31.10.16	PART II D.O. No. 48
16.2.17		Discharged from C.C.D. [Signature] to 12th Bn.	Hastings	31.1.17	Lt. J. H. [Signature] Adjutant, Canadian Command Depot,
31.1.17	12th	T.O.S. 12th Res Battn	Handling	31.1.17	AZES.
14.2.17	12th	Trans to 75th Battn O'seas	E. Sandling	14.2.17	Pt. 11.39.
10/16	5th Bn	Taken on Strength Reports of Cas	Bramshot	30.6.16	P2 DO 153
10/16	C.C.A.C.		Shoreham	24.10.16	" " 467
			[Signature]		San office of Records

Army Form B. 103.

Regimental Number 163719

Casualty Form Active Service.

Regiment or Corps 75th Bn. Canadians

Rank Private Surname Reid Christian Name W. R.

Religion Age on Enlistment years months

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

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

Extended (.....) Re-engaged (.....) Qualification (b)
or Corps Trade and rate

Occupation Signature of Officer

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
Date	From whom received				
		Embarked			
		Disembarked			
15/3/18	4 C.B.D.	2.O.P. fm 6 Condep - Board	Field	15/3/18	NR 263.
14/3/18	6 Condep	7.O.S. Class A	TO 4 C.B.D.	14/3/18	W 5124 - D 8113
20/3/18	4 C.B.D.	8.O.S. to C.C.R.	Field	20/3/18	NR
do.	C.C.R.	2.O.P.	do.	do.	do.
22.5.18	20th C. & A.	Cont. Leg. (R)	Admitted	22.5.18.	73254
24.5.18	C.C.R. C	do.	to 20th C. & A.	22.5.18	DB 1361
3.6.18	20th C.B.A.	do.	to duty.	3.6.18	F 4976
14.6.18	C.C.R.	2.O. strength	Field	7.6.18.	DB 1668
12.8.18	do.	2.O. to unit	do.	12.8.18	NR 1375
17.8.18	75th Bn.	Joined unit	do.	12.8.18	B 213.
27/2/18	4th C.B.A.	Injury ankle & 1 sprain	adm 20/7/18	5/12/18	3 m 9858

(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) Signaller, Shoeing-Smith, &c.

W. 8635-M2733 2000m 9/17 (35611) C. P. & S., Ltd., Form B.103 E/1897.

P.T.O.

163419 Ote. Reid. W. A.

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
Date	From whom received				
8.12.18	26 General	Sprained ankle L	adm	8.12.18	N.482
12.12.18	do.	do	To England	12.12.18	N.1021
14.12.18	aag.	Classified as "Injured Accidentally"	Base	-	A.7.11 3428 and 316 RD (d) 18-22.60
12.12.18	Ob. AG Cambria	Invaaded (Injured) to Eng and posted to 1st Central Ontario Regt Depot, Witley	Base	12.12.18	A.7.11 3083/6612 and D.O.136
<i>[Signature]</i> Lieutenant for Lieut. Col. aag Can. Section 3rd Echelon G.12.					
20.12.18	ICORD	TOS from 45 Bn	Witley	20.12.18	DO 352 <i>[Signature]</i>
1 MAR 1919 28 FEB 1919 Ceases to be attached on proceeding to 3rd Bn D.O. No. 51 Adjutant Canadian Command Depot,					
28-2-19	OC. 3rd. Res.	T.O.S. from 1st.C.O.R.D.	Witley	28-2-19	D.O. 59

Casualty Form—Active Service.

Regiment or Corps _____ Regimental Number _____

Rank _____ Surname _____ Christian Name _____

Religion _____ Age on Enlistment _____ years _____ months.

Enlisted (a)_____ Terms of Service (a)_____ Service reckons from (a)_____

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

Extended { } Re-engaged { } Qualification (b) _____
or Corps Trade and Rate _____

Signature of Officer i/c Records.

[illegible]

(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) Signaller, Shoeing-smith, &c.

(B99130) W 15012-5136 J. P. & Co., Ltd. Forms/B103/3.

[P.T.O.]

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
		Attached C.O.C. Kinnel Park for return to Canada. Part II Orders No. _____. Ceases to be attached C.O.C. Kinnel Park on embark-ment for Canada, Part II Order No. 79. <i>W. Baynes</i> B. 4119.			
		Commanding <i>2</i> Wing, Kinnel Park Camp.			
		Embarked Liverpool S.S. 'Lapland' 3 April 1919.			
APR 3 1919	O. S. T. O. S. No. 2 DISTRICT DEPOT, TORONTO	1919	PART II D. O.	107	
APR 12 1919	S. O. S. (DISCHARGED FROM H. M. S.) No. 2 DIS. DEPOT,		PART II D. O.	107	
					<i>W. Baynes</i> For O. C. No. 2 District

TLH. Rank

Name

REID, William Robert.

Reg'l No. 163419.

Unit 84TH. BN.

If in perm. Corps, }
What Unit?

Married or Single

Single

Place and Date of Enlistment

Toronto

6th Aug 1915

Place of Birth

Belfast Ireland

Name and Address, Next-of-Kin

~~William~~ Sarah Reid

Dunmurry Belfast Co Antrim Ireland

Relationship

Mother

Assigned Pay Monthly \$

Payable to

Separation Allowance \$

Payable to

Relationship

N/E. R.B. No 21598 OS

File No.

CAN. OR

Relationship

Category

133 1338

Discharge, Date and Place

Reason

Character

H. W. & V., Ltd.—7165-16.

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.				
C/		Arrived in England	Empress of Britain	28 JUN 1916	
1-7-16	QC 84th Bn.	S.O.S. on trans. to 75th Bn	Borden	30-6-16	D.O. Pt II. #150 ✓
3 JUL 1916	75 th	Taken on strength from 84 th	Beshott	30-6-16	✓ a. 7. 103 Cnd 26/8/16 153 x
10 8-16	75th.	Embarked For France	Hamshott	II-8-16	Part 2 D.O. 189 ✓
26. 8. 16	Ch A1.	Adm 3 rd Can. Gen. Hq.	Boulogne	17/8/16	Ch A1. & SW bhest
26 8. 16	Ch B29.	Adm St Marys Hq	Paddington	20/8/16	Ch B29 & SW bhest
29. 8. 16	BB46	Taken on Str	Stone	20 8. 16	Pt II 0 364 ✓
31. 8. 16	75 th	Trans to CAC	Dorkestone	24/8/16	✓ a. 7. 3083 d. 18/8/16
23. 9. 16		Hq. Can Gen Hq	Arromb.	19. 9. 16	Ch A. 50 & SW bhest.
9. 10 16		Discharged from Hospital		3 10. 16	57 do

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.				
25.10.16	CEAC.	Left 100 lbs. from Bromley	Shoreham	24.10.16	Pt II 0 467 +
31.10.16	"	to Lini to 6 B.O. for P.T.	do	31.10.16	" 480 ✓
16.2.17	"	leaves to be attd ced. S.O.S	Hastings	31.1.17	" 80 ✓
	"	on transfer to 12th Res Bn			
31-1-17	12 Res Bn	Saken on strength	8 Sandling	31-1-17	" 25 ✓
14.2.17	12 Res Bn	S.O.S to 75 Bn overseas	do	14.2.17	Pt II 0 39 ✓
24.2.17	75th	10 S from 12th Res Bn	Dield	15.2.17	Pt II 0 29.
14.8.17	"	Adm. #8 Can. Fld. Amb.	"	26.7.17	CL A. 286 Scabies
22.8.17	"	To #11 " " "	"	15.8.17	— 293 Furunculosis R. Knee
31.8.17	"	To Duty	"	23.8.17	— 301 ✓
4.9.17	"	Sick: to Hospital	"	15.8.17	C.L. A. 2
10.9.17	1st COR. (75)	Rejoined Unit.	"	23.8.17	— 7 Sick.
21.12.18	75th	Inv (Imp) S.O.S to 1 CORO	Witley	12.12.18	Pt II 136 (1st CORO D.O. 352 d 20.12.18)
30-1-19	1 CORO	On com 1 CORO	Witley	24.1-19	00 24
28-2-19	3rd Res	J.O.S. from 1 CORO	"	28-2-19	— 59 5193.3.19 1 CORO
28.3.19	2 Res	S.O.S to M.D.V	"	28.3.19	8087 (76 81/3/19 M.D. 2)
3-4-19	M.D. 2	S.O.S to Canada.	" Phys	3-4-19	✓ 79
					37-1-40 3/4/19

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

A.D.M.S.-HEADQUARTERS
CANADIAN TROOPS.
27 MAR 1919
SURREY.

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

No. 163419 Rank Lt Surname REID
(Given name in full)
William Robert
Unit or Corps 2nd Can. Rec. Bn. Birthplace Belfast, Ireland

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

1. GENERAL DESCRIPTION:

Physique good Weight 180 lbs. Height 5 ft. 9 in. Colour of Eyes gray
Nutrition good
Pulse 72
Condition of arteries good
Vision Rt. 46 Left 46
Hearing (conversational voice) Rt. 2 ft.
Left 1 ft.

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

one wound scar on back 17.8.16
one on shoulder

Opinion as to general health and physical condition good

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

Nervous System no Genito Urinary System no Cardio-Vascular System no
Special Senses no Integumentary System no Respiratory System no
Disturbance of mentality no Muscular System no Digestive System no
Osseous and Joint System no Any other general condition no

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

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at W. H. H. (Overseas)

Date 16.3.14

Signed M. H. H. (M.O.)

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

Signature W. H. H. (M.O.)

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

THIS SECTION FOR USE IN CANADA—

Examined at (Canada)

Date

Signed M.O.

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

Signature

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

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

[OVER]

10 DEC 1916

25 OCT 1916
C.C.A.M.C.
16419

8639

ORIGINAL

ORIGINAL

MEDICAL HISTORY SHEET

84th Overseas B'n, C. E. F.

Surname Reid

Christian Name William Robert

Certified
Handy Mays
364-29-8-16

Examined { on 6 day of Aug 1915
at Toronto

Birthplace { City or Town Belfast
County Ireland

Apparent age 28

Trade or occupation car repairer

Height 5 Feet 8½ Inches.

Weight 160 Lbs.

Chest measurement { Minimum 35 inches.
Maximum expansion 37 inches.

Physical development Good

Small-Pox Marks None

Vaccination Marks { Arm Right Left.
Number 2

When Vaccinated last childhood

(a) Marks indicating congenital peculiarities or previous disease Scar above elbow on left arm

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

Approved by JW Burson M.D. M.S.
Rank Capt M.O.

Date.	Fit or Unfit.	EXAMINED FOR RE-ENGAGEMENT.
		<u>29 SEP 1916</u> M.O.
		<u>18 DEC 1918</u> M.O.
		<u>Capt. R. R. R.</u> M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date.	Result.	VACCINATIONS.
<u>25/8/15</u>		<u>S. M. Mearns</u> M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date.	Result.	ANTI-TYPHOID INOCULATIONS, ETC.
<u>18/8/15</u>		<u>S. M. Mearns</u> M.O.
<u>23/8/15</u>		<u>S. M. Mearns</u> M.O.
<u>27/8/15</u>		<u>S. M. Mearns</u> M.O.
<u>27/8/15</u>		<u>S. M. Mearns</u> M.O.
		M.O.
		M.O.
		M.O.

Enlisted on 198 day of August July 1915 at Toronto

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>109 Regt</u>		<u>TAB</u>	<u>6/8/15</u>
Transferred to	<u>84 Batta</u>	<u>163 419</u>	<u>21-1-19</u>	<u>11/8/15</u>
	<u>75th Bn.</u>			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>C.C.A.M.C. Shoreham</u>	<u>27/11</u>	<u>GSW Back.</u>	<u>Disch. P.T.</u>
<u>1st CCD Witley</u>	<u>27.2.19</u>	<u>Disch.</u>	<u>Disch. P.T.</u>
	<u>183.18</u>		

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.

Capt. C. A. M. C.
C.C.D. Shoreham.
15 DEC 1916
Date

Surname *Reid* Christian Name *William Robert*

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				
3 rd London General Hospital Barnsley		20	8	16	19	9	16	C. S. W. T. I	31	Wounded in France 16 th August. ^{Madman} Large wound left shoulder back - Burns. Convalescent.	SM Wainwright Capt R
ADAMIAN CONVALESCENT HOSPITAL, BROMLEY, KENT.		19	9	16	24	10	16	Do	36	CCAC duty	OF M. K. M. J. M. J.
R.F. Base		15	8	17	23	8	17	Sick.		Rejoined Unit.	A 2-A 2. KT. Duplicate Medical History posted to here: 902
Nesley		13	12	18	20	12	18		8		
W.C.H. Epsom		18	1	19						No Swelling, No pain, all Movements good. No disability. Fit for D. TAB-21-1-19 2	OF M. K. M. J. M. J. Capt Lane

45-

URINALYSIS REPORT
(For Board)

Reg. No. 103419 Rank..... ptc
Name..... Reed W R Unit..... 3rd Res

Sp. Gravity 1.020
Reaction Acid
Albumen nul
Sugar nul
Microscopic
.....
.....
.....



Captain, C.A.M.C.
For Major, C.A.M.C.
Canadian General Laboratory.

21307

MEDICAL CASE SHEET.

Q/R 1/52



No. in Admission and Discharge Book.	Regimental No: 163419	Surname. Reid	Christian Name. Wm R.	Age 29
Year.	Rank. Private	Unit. 75th Canadian	Service. B.M.D.	

G.S.W. VI 1.

Date and Station.	Disease
----------------------	---------

20-8-16

Guns hot Wound in left shoulder...

Patient was wounded at Ypres on Aug: 16th 1916
one large wound in left shoulder & one
small wound on rt. side of back.

The wounds have now completely
healed, and patient is quite convalescent.
& will be able to return to military
service.

J. W. Brasch.

R. M. O.

St Mary's Hosp:

Read: London W.

19/9/16 Bromley

WMS complete

PIED

CANADIAN GENERAL LABORATORY.

Bond

PARTICULARS OF CASE FOR WHICH WASSERMANN TEST IS REQUIRED.

The particulars below are required for statistical purposes and future reference.

Unless these are furnished the test will not be carried out.

Name *Fried W. B.* Regtl. No. *163419* Rank *Pt.*

Unit *3/10* Date of first Sore *15 months ago* If T. Pallidum found ... Secondaries,

if any..... Other Symptoms.....

Treatment, if any..... Arsenical *7* Mercury *8*

Previous Wassermann, date..... Result.....

Station and Date *21-3-19*

85

[Signature]

Result of Wassermann (Original) Quarter System.

Date..... Serial No..... Result.....

WASSERMANN
NEGATIVE

(270)

[Signature]
Major,

Officer Commanding,

Canadian General Laboratory.

Witley, Surrey.



CANADIAN GENERAL LABORATORY

58

PRECAUTIONS ON CASES FOR WHICH THE FOLLOWING INFORMATION IS REQUIRED

1. The patient's name, age, sex, occupation, and address, and the date of birth.

2. The date of onset of the disease, and the date of admission to the hospital.

3. The date of death, if any, and the date of burial.

4. The date of the last menstrual period, if any, and the date of the last coitus.

5. The date of the last vaccination, if any, and the date of the last inoculation.

6. The date of the last examination, if any, and the date of the last treatment.

7. The date of the last examination, if any, and the date of the last treatment.

8. The date of the last examination, if any, and the date of the last treatment.

9. The date of the last examination, if any, and the date of the last treatment.

10. The date of the last examination, if any, and the date of the last treatment.

Received of the patient or his representative the sum of \$10.00 for the examination of the specimen.

For the use of the patient or his representative.

Date of the last examination, if any, and the date of the last treatment.

Date of the last examination, if any, and the date of the last treatment.

Date of the last examination, if any, and the date of the last treatment.

Date of the last examination, if any, and the date of the last treatment.

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Date of the last examination, if any, and the date of the last treatment.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
2072	163419.	Pte	Reid	W.
Year	Unit.	Age.	Service.	
	75th Bn.	29.	1 2/12	A Coy
Station and Date.	Disease			
Bromley 19. 9. 16	ESW Back	On the 16th of Aug. at Ypres a bullet hit him in the back on the right side and came out close to the neck on the left shoulder.		
		Pres Cond. wounds healed. No disability; complains of pain in left axillary region.		
Sept 20		C.C.A. Duty		

Station
and Date.

1831

MEDICAL HISTORY of—

Surname.

Christian Names

TABLE I.—General Table.

Birthplace { Parish.....
County

Examined { on.....day of.....191 ,
 { at

Declared Ageyears.....days.

Trade or Occupation.....

Height.....feet.....inches. Weight.....lbs.

Colour of Hair..... Complexion.....

29 Eyes.....

Chest Measurement	{	Girth when fully expanded	inches
		Range of expansion	inches

Physical Development

		RIGHT	LEFT
Vaccination Marks {	Arm	_____	_____
	Number	_____	_____

When Vaccinated

Vision { R. E.—V = With Glasses { R.....
 { L. E.—V = { L.....

Identification Marks, such as Tattoo, Moles, Scars, etc :—

Defects or Ailments:—

Examined and found—

Fit for Grade { I.
II.
III.
IV.

(Strike out those which do not apply.)

Signature

Chairman of Medical Board.

Re-examined for posting at.....

On..... day of..... 191.....

Enlisted { at.....
on..... day of 191.

Joined on enlistment	Corps <i>75 Canadian</i>	Regtl. No. <i>1631412</i>
----------------------	-----------------------------	------------------------------

Transferred to _____

TABLE III.—Boards; Courts of Enquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, etc.

Date _____

Brief Details and Signature

27.2.19 1st C.C.D. Mil
G. Bull. Hare. Wapn

Special Remarks: State if a discharged Soldier

TABLE IV.—Service Table.

Station or Troopship

Date of arrival
or embarkation

Date of departure
or disembarkation

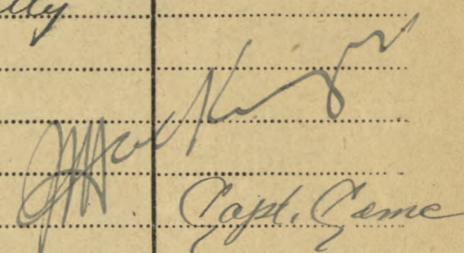
Became non-effective by

on..... day of..... 191.....

..... (Signature)

(Rank)

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				
RED CROSS HOSPITAL, NETLEY.	13	12	18	20	12	18	Gonorr. left ankle.	8.	4.12.18. Gonorr. left ankle. X ray shows no pus - Good movement of joint. Could not walk on bare feet weight on foot.	
									Canadian Hospital.	AWills am2011
M. C. H. Epsom	20	12	18	27	JAN	1919	Do	39	No swelling nor pain, all movements good, no disability TAB 2-21-19 F. A. for D.	 Capt. G. G. G.

15.00 A/Pay

ASSIGNED PAY.		ENGLAND OR CANADA.		SEPARATION ALLOWANCE.		ENGLAND OR CANADA.		NAME:- REID. William Robert																			
EFFECTIVE DATE:- 1. 7. 16				EFFECTIVE DATE:-				NUMBER:- 163419																			
AMOUNT:- 15.00				AMOUNT:-				PARTICULARS OF RANK OR APPOINTMENT																			
NAME, ADDRESS, RELATIONSHIP & AUTHORITY Sarah Reid (Mother) Dunmurry 60 Antrim Belfast Ireland Stopped off 1.5.19				AUTHORITY		DATE EFFECTIVE		RANK OR APPOINTMENT																			
								Pte																			
				UNIT AND TRANSFERS																							
				ORIGINAL UNIT:- 8th Bn																							
				DATE ACCOUNT FIRST OPENED:- 1. 7. 16																							
				AUTHORITY		DATE EFFECTIVE		DATE LEDGER SHEET T'S'D		UNIT TRANSFERRED TO																	
								7th Bn																			
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													
12/3/19		4828		3 Res. F 4.		19.47																					
				DAILY RATES OF PAY AND ALLOWANCES																							
				AUTHORITY		PAY		F.A.		P.F.A.		SUBS'CE ALL'CE															
						1		10																			
PARTICULARS OF RENDERING NON-EFFECTIVE:- Dis. to Jan. 1.4.19. NR A 4615. Witley 12.1.19 Witley and 2. Cl. 74.91. W. How																											
MONTH 1918		PARTICULARS				CR. 1		CR. 2		PARTICULARS				DR. 1		DR. 2		DR. 3		DR. 4		BALANCE		DEFERRED		SEPARATION	
Mar 31		Bal. Fwd																				50.30					
Apr.		P Pay				33				B 15 1/8 4 1/2 W 66 R 6				357				15				68.39					
						33				157 1/8 1/2				446				15				60.36					
														803													
May		P.D.				3410				B 11962 1/8 1/2				357				15				79.46					
										B 289 1/8 1/2 W 66 R 6				357													
						3410				436 1/8 1/2				446				15				71.43					
						3410								803				15									
June		P.D.				33				B 63168 1/8 1/2				357				15				89.43					
										AR 580 1/8 1/2 W 66 R 6				357													
						73				659 1/8 1/2				357				15				82.29					
						3410								714				15									
July		P.D.				3410				B 82968 1/8 1/2				357				15				101.39					
										AR 771 1/8 1/2 W 66 R 6				446													
						3410				911 1/8 1/2				357				15				93.36					
														803				15									
Aug		P.D.				3410				B 30970 1/8 1/2				357				15									
										AR 1062 1/8 1/2				357													
						3410				698 1/8 1/2 11 1/2 C 8 1/2				357				15				105.32					
														714				15									
Sept						33				B 91569 1/8 1/2				357				15									
										AR 783 1/8 1/2				357													
						33				849 1/8 1/2				357				15				116.18					

IR SERVICE BADGE CLASS A
SERVICE GROUP
OCCUPATIONAL GROUP

289542
24 SHORT FORM.
PROCEEDINGS ON DISCHARGE.
20 (Demobilization.) A.

31-7
11-10-39
Toronto
Mother
Car Repairer
3

1. No. 163419

2. Rank. pte

3. Name. REID William Robert

4. Unit. 3rd Rec. 84th Bn.

5. Date of Discharge APR 12 1919 Place

TORONTO, ONT.

6. Reason for Discharge

DEMORILIZATION

7. Authority. No. 2 District Depot, Part II, D.O. No. 107

8. Proposed Residence after Discharge. 180 Franklin Ave.
Toronto

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. ?

Discharged

W B Reid

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place. TORONTO, ONT.

Date. APR 12 1919

Embarked Liverpool

S S Lapland 3 April 1919

Disembarked Halifax 10 April 1919

Signature

For
O. C. No. 2 District Depot
(O. C. Discharging Unit.)

SHORT FORM

PROCEEDINGS ON DISCHARGE

(Demobilization)

MAY 5 1946

1. Name	
2. Rank	
3. Service Number	
4. Branch	
5. Date of Discharge	
6. Reason for Discharge	
7. Remarks	
8. Signature of Soldier	
9. Signature of Officer	
10. Date	

LIST OF DISCHARGE DOCUMENTS

Attestation Paper, Triplicate	MINIA Form W. 73
or Particulars of Receipt	MINIA Form W. 102
Field Contact Sheet	MINIA Form W. 103 or A. 1. B. 112
Casualty Form	MINIA Form W. 104 or A. 1. B. 103
First Day Certificate	MINIA Form W. 44
Certificate that missing documents are hereby made	
Medical History Sheet	MINIA Form II. 812 or A. 1. B. 118
Proceedings of Medical Board	ST. P. B. 101, A. 1. B. 112 or A. 1. B. 118
Dental History Sheet	MINIA Form II. 102
Medical Report	NO. 1. W. 119 and D. M. 2. 1012
Regimental Contact Sheet	MINIA Form II. 103
Company Contact Sheet	MINIA Form II. 104

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

Group.....

Checked by.....

Date.....

30 MAR 1919

PROCEEDINGS OF A MEDICAL BOARD.

Dated at Shurham on 27 1916.No. 163419 Rank Pl. Name Reid Wm R.Local Unit..... Overseas Unit 75th Batt Age 29Examination held at C.C.A.DISABILITY.
Overseas—Local.
(scratch one out)E.M. Back.PRESENT CONDITION.

Was in France 8 days. - wounded
on 16 Sept. 1916. - Flesh wound. - entrance
below lower angle of Rt Scapula. - Exit: above left
Shoulder joint. -
Complains of shooting pain in left
arm -

BOARD RECOMMENDS:—

1. Fit for Duty.....
2. Fit for duty after..... weeks' physical training.
3. Fit for Temporary Base Duty..... weeks.
4. Fit for Permanent Base Duty.....
5. Discharge.....

Signatures:—

Members

Robert Thompson President.
R. Henderson Capt.

APPROVED

Dated at Shurham 1916.

27 OCT 1916

For A.D.M.S.
for A.D.M.S., Canadians, London Area.

PROCEEDINGS OF A MEDICAL BOARD.

No. Rank Name
Local Unit Overseas Unit Age
Examination held at

DISABILITY
Overseas—Local
(specify one only)

PRESENT CONDITION.

BOARD RECOMMENDS:—

1. Fit for Duty.....
2. Fit for duty after..... weeks' physical training.
3. Fit for Temporary Base Duty..... weeks.
4. Fit for Permanent Base Duty.....
5. Discharge.....

Signatures:—

President.....
Members.....

APPROVED

A16-8

A.F.W. 3128.

REPORT ON ACCIDENTAL OR SELF-INFLICTED INJURIES.

To be rendered in accordance with instructions on the back of this form.

1. Number, Rank, Name and UNIT 163419 - Pte. W. Reid, 75th Canadian Infantry Battalion. : Date of casualty. Dec. 2, 1918.

2. Nature, Location, & Severity of injury. (N.B. Field Ambulance to be notified at once if wound is believed to be self-inflicted.)

Sworn sprain of left ankle
Robertson Capt
cause

3. Short statement of the circumstances of the case. (Signed statements of witnesses to be attached to this form.)

Pte. Reid was a member of the Battalion football team. During a game with the 54th Battalion team, while running out to kick the ball, he went over on his ankle, causing the above injury.

4. Commanding Officer's opinion as to whether the man was:-

- (a) in the performance of Military Duty,
(b) To blame,
(c) Whether any other person was to blame.

Yes.
No
No

A.G.'s. BRANCH.	
G.H.Q. 3RD ECHOLON.	
Date	11 DEC 1918
No.	E4
CASUALTIES.	

Robertson

Date December 4, 1918.

Lt.-Col.,
Commanding. 75th Can. Inf. Bn.

5. (a) Opinion of G.O.C. Brigade.
(b) Disciplinary action taken or proposed whether against injured man or another.

No action
Victor W. O'Brien

Date 7-12-1918

Brig Gen
Commanding 114 C I Bde
Brigade.

6. To D.A.G., 3rd Echelon Army "A"

Forwarded with reference to my casualty wire No. A.C. 112 dated 8/12/18

Date 8/12/18

for G.O.C. 4th Cdn. Division.
Major S/Capt
2449

7. To D.A.G., G.H.Q. 3rd Echelon.

Forwarded for record. This casualty should be reported as Injured Acc.

Date 16/12/18



Chamberlain
Major S/Capt
for Major General
Deputy Adm. General

(a) Whether any other person was so named.
(b) To whom.
(c) Military Duty.
(d) in the performance of
as to whether the man was:
Commanding Officer's opinion

(a) Division of C.O.C. Brigade.
(b) Disiplinary action taken
(c) Proposed whether against
(d) injured man or another.

U. S. DEPARTMENT OF AGRICULTURE

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MEDICAL CASE SHEET.*

No. in Admission and Discharge Book. <i>Sub 49</i> Year <i>1918</i>	Regimental No. <i>163419.</i>	Rank <i>Pt</i>	Surname. <i>Reid</i>	Christian Name. <i>W.R.</i>
	Unit <i>75th Can Bn.</i>	Age <i>35.</i>	Service.	
Station and Date. <i>MCN</i> <i>Epsom.</i>	Disease <i>Sprained left Ankle Acc</i>			
	<i>Left ankle somewhat swollen</i> <i>Slightly painful when walking.</i>			
<i>21 12. 18</i>	<i>R 9 x high Dress 7 1/2"</i>			
<i>9-1-19.</i>	<i>R 12 x " " 11"</i>			
<i>20-12-18.</i>	<i>No Swelling nor pain, all Movements good</i> <i>No disability,</i> <i>TAB</i> <i>2-21-19. Fit for D.O.</i>			
	<i>W. K. J. R.</i> <i>Capt Camp</i>			

Station
and Date.

PAYMASTER

12

AUTHORITY

.....
AUTHORITY

Yes.

3/4/19 107
T.O.S. D.O.
PARTICULARS OR REMARKS
SUBS. To D.O.

