ATTESTATION PAPER.

No. 53 613

Folio. E

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name? — Peter Ross
2. In what Town, Township or Parish, and in what Country were you born? — Eddleston Scotland
3. What is the name of your next-of-kin? — Jas Ross
4. What is the address of your next-of-kin? — 438 South Mutton St Sarnia
5. What is the date of your birth? — 31 Jan 1889
6. What is your Trade or Calling? — Laborer or farm keeper
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 27 Reg
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

Peter Ross (Signature of Man).

Cyril Smith (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, P Ross, 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.

Peter Ross (Signature of Recruit)

Date Oct 31 1914. Cyril Smith (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, P Ross, 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.

Peter Ross (Signature of Recruit)

Date Oct 31 1914. Cyril Smith (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 Sarnia this 31 day of Oct 1914.

E S Wigle W W Mackenzie (Signature of Justice)

a Notary Public

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

W W Mackenzie (Approving Officer)

E S Wigle major

200 M.—8-14.
H.Q. 1772-1-13.

Description of P Ross on Enlistment.

Apparent Age 25 years 9 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 6 3/4 ins.

Chest measurement.
- Girth when fully expanded 37 ins.
- Range of expansion 3 ins.

Complexion ruddy

Eyes dark blue

Hair dark blue-Brown

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

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

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

CERTIFICATE OF MEDICAL EXAMINATION.

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

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

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

Date Oct 31 1914. A R McMillan Lt

Place Sarnia Lieut No 10 Dn Ont

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.

Peter Ross 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.

Elsie (Signature of Officer)

Date 28 Nov 1914.

H.Q. 3-9-19

REGIMENTAL DOCUMENTS

NAME ROSS Peter REGT. NO. 536123 UNIT 18th Battn H. Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
	ATTESTATION PAPER (M.F.W. 23, 133, or 51)	2/2/[illegible]	Medals 3/10/19 ne			DEATH
	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)		Ptn 4-11-19			Category
1	TRAINING HISTORY SHEET (M.F.W. 113)					
1	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
1	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
1	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
2	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)		Med 16/10/19 ne			DISCHARGE
1	DENTAL HISTORY SHEET (M.F.B. 465)					Category Med-Unfit.
1	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					
	MEDICAL EXAMINATION (M.F.W. 129)					
	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
1	LAST PAY CERTIFICATE (M.F.W. 44)					
1	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					
1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					21 - 12
2	Nine			24157		21 - 12
1	C.A.D.C. 5009A					8 12
1	Identity Disc					
1	Pay Card					1

W. 2889
100M-11-18
1772-39-1377

NAME Ross Peter

RANK AND CORPS Pte. 18th Bn

REGT'L. No. 536109

H. Q. FILE No. 649

FOLLOWS No.

FOLLOWS

CABLE NO.	DATE	NATURE OF CASUALTY
auth letter	No of 17/10/18	James Ross (RMS.) 277 Cupina ~~438 South Shelton St~~, Sarnia, Ont. Can.
10-7 Q 631 17-3	15-10-18	Dang. wdd. 30 C.C.S. Oct-11th 1918.
H 418	24-10-18	Repd- dang ill 26 Gen H Etaples 6/c 20th
1-4		1918 G.S.W. Back Buttks.
Wom. 6218	2-11-18	26 Gen. Hsp. Etaples, improving.
4-1 W.S. m 222	3-12-18	Bethnal Green Mil Hosp Cambridge Heath E. Condition fairly Satisfactory

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

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

H.S.Q.R

LIST NO. 2	HOSPITAL	DATE OF ADMISSION	REMARKS
A 346-2	30 C.C. Stat. Hang. Wards	11-10-18	G.S.W. Back
A 345	26 Gen. Staples	13-10-18	G.S.W. Back
A 348-1	Dang. ill	20-10-18	S.W. Back & Buttock
B362	Mil. Bethnal Green	8-11-18	S.W. " " "
B425	Ex. I.C. Cav. Gen. Orpington	25-1-19	G.S.W. Frac. L. Pelvis
B532	5 Cav. Gen. Kirkdale	17-6-19	G.S.W. Frac. L. Pelvis
B543	Invalided to Canada	30-6-19	G.S.W. Fr. L. Pelvis
	S.L. 505 M.D. 1		

No. 613 (5-3613) Rank Pte Name Ross, P

T. O. S. Unit 18th Battalion

M. D. /

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1914	1914			
Oct 31	Nov 30	L		
1915-	Dec 1915-	L		
	Jan	L		
	Feb	L		
	Mar	L		
	Apr.	L		

UNIT SAILED
APR 18 1915

B/

SOS 25-8-14 m&l
m ll
do 235 of 23-8-14 18 S

NAME Ross, Peter

RANK & No. pte. 53613.

CORPS 18th Battalion,

ENLISTMENT, PLACE Sarnia, DATE 31st Oct. 1914. S

FORMER CORPS 27th Regt.

COUNTRY OF BIRTH Eddleston, Scot.

NEXT OF KIN Ross, James. (Father)

ADDRESS OF NEXT OF KIN 277 Emma St, (auth L. 17-10-18.)
Sarnia, Ont., Can.

DISCHARGE, PLACE DATE

Sailed from Halifax 18-4-15 R.M.S.S. Grampian

M/6 11-7-19 366 Pte

64/21

L. L. 72594—M. & D.—5342.

M. P. W. 22. 50 m.—1-15.
3 H. Q. 1772 39-839.

REMARKS:

Form R. 149.

Peter

Name ROSS Rank Pte Reg. No. 53613

Unit 18 Bn

Next of Kin Can

Date 1918	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
11-10-18	30 C C S.		Dangerously Wounded (2)	A345	06/31	145449
13.10	26 Fd Ambl		Sh Back & Buttock	A345	4	4874/13
20-10	Dang. Ill.			A348	4/8	147667
2 11	to 6 Bn Mal Siege		do	B362		738
25-11	Unit Nap. Repatriation C.S.		Fract	B425		
			Lt. Pelvic Bone.			5431
17-6	Can. Hosp Kirkdale		do	B532		11269
30-6	Invalid to Canada			B543		9407
	S.S. 405 mls		do			

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

LEDGER NO. 2395 SERIAL NO. B 22282 38

REG. NO. 53613 NAME Ross P

RANK Pte CORPS 100 AGE 30 SERVICE E 9/12 E 5/12 F 37/12

HOSPITALS DATE OF ADMISSION

1 W. O. Mil London 13-7-19

2

3

DIAGNOSIS 05 G.S.W. Lt. Hip

TRANSFERRED TO

DISPOSITION Dis to unit 21-8-19 CATEGORY C

M.F.W. 2553.
1126-D.P.-50M-12-18.
1772-39-1332.

P.T.O.

REMARKS:	HOSPITALS.	DATE.	DIAGNOSIS.

Number 53613 Rank Pte.

Surname Ross

Christian Names Peter

Unit 18th Bn. Can. Inf. Theatre of War France

Date of Service 14/9/15

Remarks 2 Dene Cottages Shieldhill Biggar Lanarkshire Scotland

16389

Latest Address 277 Emma St Sarnia Ont

Roll No. B. Page 2463.

DEP. MAR 19 1925
REGN. No 11706
Receipt rec 16-4-25

*Name ROSS, Peter Rank Pte. Regtl. No. 53613

Fyle Depot 10-R-419

Original unit 18th Bn Present unit 18th Bn M. or S. S Age 30 Religion Pres. Ref. H.Q.

Port, ship, and date of arrival Portland, Maine. U.S.A. Araguaya, 11-7-19

Next of kin Jas. Ross, 438 South Mutton St. Sarnia, Ont.

Address on leave

Address on discharge 277 Emma St., Sarnia, Ont.

Transportation issued Yes / No Date Character on discharge

Previous occupation Laborer or Joint Keeper Date and place of enlistment Oct. 31, 1914, Sarnia, Ont.

Diagnosis Comp. fracture of ilium and great trochanter. Date of Medical Boards 15-8-19.

Date. T.O.S.	Remarks	Pt. 2 Order No.
30-6-19	No. 1 D.D.	
13-7-19	Posted to Hosp. Sect. (W.O.M.H.) and granted furlough with subs. to 27-7-19	199
AUG 21 1919	Posted to Casualty Coy.	234

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

(over)

Date.	Remarks.	Pt. 2 Order No.
25-8-19	Discharged from H.M.S. Medically unfit. (P.D.P.)	235

M.F.W. 192
150M—6-18.
1772-39-1243.

Surname	Christian Name or Names	Reg. No.
ROSS.	P.	53613.

Rank	Unit
Pte.	W.O. 18.

Cas. List.	
	26. G.H. Etaples. 13-10-18.
19-10-18. A345/2	G.S.W. Back. & Buttock.
19-10-18. A345-2	30. C C Stn (Dang Wded) 11-10-18.
23-10-18 A348	Dangerously ill 20-10-18.
13.11.18 B362	Bethnal Green Mil. 8.11.18.
30.1.19 B425/1	16 Can Gen. Dep't on 25.1.19
	G S W. F. L. Pelvis Bone & arm
19.6.19 B532	5 Can G. Sta Hedall 17.6.19.
8.7.19 B543	Invalided to Canada
	30.6.19

A.M.D. 2 Dept.

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

D.M.S. 1300. 50M-30-8-18.

Cas. List.

Rank | Name ROSS Peter. | Reg'l No. 53613.

Unit 18th Batt. | If in perm. Corps, What Unit? | Married or Single Single.

Place and Date of Enlistment Sarnia Ont 31st Oct: 1914 | Place of Birth Eddleston Scotland.

Name and Address, Next-of-Kin Jas Ross

438 SouthMutton St. Sarnia. | Relationship

Assigned Pay Monthly $ | Payable to | Relationship

Separation Allowance $ | Payable to | Relationship

Discharge, Date and Place | Reason | Character

N/E. R.B. No. 898
File
Category
CAN MIL

Report Date	Report From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place	Date	✓ REMARKS Taken from Official Documents
29-4-15	O.C. 18	Arrived per S.S. Grampian	England	England	Supn Form
16.7.15	O/C 18th	Forfeits 1 dys pay = abs. w.l.	to Sandling C.	16.7.15	Pt. II - 335
18-9-15	"	Embarked Overseas (6'6")	Folkestone	14-9-15	Supn Form
17.9.16	"	Attached to 2nd Can. Divn Salvage Co. from 27.9.15	Field		Part II 39.
14.9.16	2nd Div. Train	Attached to 2nd Sal. Co.	Field	27.9.15	Part II 45.
18.1.17	"	Ceases to be attached	"	3.1.17	" " 6.
22.1.17	18th	" " " 4th T.C. Ct.	"	3.1.17	" 2.
19.10.18	W.O. R.	Wounded.		Pte. 11-10-18	C.R.A. 345.
18-11-18	-"-	D.T.O.S from 18th Bn Witley (Ours) P.T.O		8-11-18	O.C. PT II O. 241 #118 d/29-11-18 18th Bn.

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				
6.6.19.	WPD.	adm & forfeits 6 days pay by P & A. Reg for. C & W.L.	Witley P6	29.3.19.	AO 122.
8-7-19	WOR(18)	Inv to Can GR 1056 GH SL 505 MDI	Liverpool..	30-6-19	CL B 543 WOR D. 144/12 7/19

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

Army Form B. 103.

Casualty Form—Active Service.

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

Regiment or Corps 18th Battalion, C.E.F.

Regimental No. 53613 Rank Pte Name Rose Peter

Enlisted (a) 31st Oct/14 Terms of Service (a) War Service reckons from (a)

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

Extended Re-engaged Qualification (b)

Report: Date	Report: From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
	18th Bn	Disembarked in France	Boulogne	15-9-15	Nom Roll
9-9-16	2nd Can. Div Salv. Coy.	Attached to 2nd. Can. Div. Salvage Company.	In the Fld.	27-9-15	Nom. Roll. (Can. Sect. No. 147/399) Pt. II Order 39, 17/9/16.
6-1-17	2 Can Div Train	Ceases to be att. to 2nd Can Divnl. Salv. Coy. on return to Bn.	do	3-1-17	B.213. Pt. II Order 2, 22/1/17.
15-9-17	18 th Bn.	Granted 10 days leave to England		9-9-17	B.213. Pt. II Ord. 68, 30/9/17.
24-8-18	18 th Bn.	Granted 14 days leave	to U.K.	22-8-18	B.213. Pt. II Ord. 84, 9/9/18.
15-10-18	18 Bn	WOUNDED	In the Fld	10.10.18	Letter
13-10-18	26 Gen.	GSW. back (M) Adm.	26 Gen.	13-10-18	W. 30 34 (No. W. 8083)
30-10-18	do	Improving	26 Gen.	30-10-18	Telegram 30/10/18 (Can. Sect. No. T. 20720)
7-11-18	do	Transferred to	England.	7-11-18	W 3034 (Lond M 3920)

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

[P.T.O.

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
7.11.18.	A. T. Stad. Antwerpen	Invalided to England wounded Posted to Western Ontario Regtl Depot WITLEY		7.11.18.	W3083. Can Lee No 6484 Part II Order No. 118 d/29.11.18
					W Hogan Major for Lt.-Col., A.A.G. Canadian Section G.H.Q. 3rd Echelon B.E.F.
18.11.18	W.O.R.D.	T. O.S. from 18th Bn	Witley	8.11.18	Pt 2 A.O. 271
					L E Cumming LIEUT: FOR LT: COL: I/C RECORDS. C.O. C.F.
30.6.19	O/S	Taken on strength No. 1 District Depot London A.O. 199 Jones No. 1 DISTRICT DEPOT			Capt.
LONDON, ONT. DISCHARGED AUG 25 1919 MEDICALLY UNFIT					
					O.C. Discharge Section, No. 1 D.D.

CASE HISTORY SHEET.

Woodcote Hospital. London Station.

No. 3-3613 Rank Pte Name Ross P. Age 30

Unit 1 DS Completed years of service Where and how long } @ 6/12 & 5/12 7 37/12

Date of admission 13-7-19 Date of discharge 21-8-19

Diagnosis G.S.W. Lt Hip Place of origin France

CONDITION ON ADMISSION AND PROGRESS OF CASE

Wounded 8th October by shrapnel on left hip scar about a foot long scar not tender but adherent in places. Worth loss of function of ilium was sealed for one month Adt 24/7/19 started to discharge again practically no limitation in movements. Dressing daily

20-8-19. Board at once. Cert.

14-8-19. Patient Improving

16-8-19. Patient feels much better & claims he is getting better

FAMILY HISTORY

(Tuberculosis, mental or nervous diseases.)

TREATMENT

(Especially any specific or special form) Dressings to wound.

CONDITION ON DISCHARGE, Improved.

(and disposal made of case.) For discharge from Hosp.

Date 21-8-1919 C&C. W Whittick

Medical Officer i/c case.

M. F. B. 313a.

50M.—3-18.

1772—39-439.

B22252

1 P.M.

ORIGINAL

1D 30-R-1383 LAST PAY CERTIFICATE

Regt.No. 53613 Rank Pte Name Ross Peter

Corps 18 Bn who was Disoharged

on 25-8- 1919 to

The following is a statement of the account of the above named from 1-8-19 to 25-8-19

from mon. of Bal Dr from L.P.C.	from mon. of Bal Cr from L.P.C. 76.143
ASSIGNED PAY:	Regt.Pay dys. @ $ F'ld All. 25 dys. @ $ 1.10 27.50
SEPARATION ALLOWANCE:	SEPARATION ALLOWANCE:
	OTHER CREDITS: WSS 70.00 Clothing Allowance 35.00
OTHER CHARGES: #503733 10.00	
PAYMENTS: #503189 883.93	Subsistence @ 80¢ per day
Bal.Credit (to be pd.) 893.93	Bal.Dr.(to be deducted) (from soldier $) (from Dependent $) 893.93

SEPARATION ALLOWANCE	ASSIGNED PAY	VICTORY BND
at $ per month has been to by this Unit Nil	at $ per month has been to by this Unit Nil	Subscribed $ Pd.by $ other Units pd.by this Unit $ Nil

Dependent or Beneficiary : Nil

Address:

REMARKS: D.O. 235 Discharged on Demobilization. 25-8-19 Mcd Unfit

Date of Enlistment: 31-10-14
If married and if Separation Allowance card submitted. No

I have carefully examined this statement of account and find it to be a correct extract from the Paylist of this Unit.

Payment Approved District Depot

Date:: AUG 25 1919
London, Ontario.

No. 1
LONDON, ONT.

Captain.
Paymaster, No.1 District Depot.

CANADIAN OVERSEAS EXPEDITIONARY FORCE.

NOMINAL ROLL.

(Unit)..... **(Headquarters)**.....

NOTE.—Four copies of Nominal Roll to be prepared. One copy to accompany each of the three sets of Attestation Papers. The fourth copy to be handed to D.A.A.G., C.T.D., Shorncliffe, for filing as reference.

First page of Nominal Roll to contain list of Officers in order of rank. Christian names in all cases to be in full. Other ranks to follow on succeeding pages in ALPHABETICAL ORDER.

Regimental No.	Rank.	NAME IN FULL (Surname first). (To be Typewritten.)

Place and Date..... Signed.....C. i/c.

M. F. W. 20

300M—5-16.

H. Q. 1772—39—837.

C.A.D.C. 5009A

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) ROSS P

REGIMENT 18 Inf Bn RANK Pte No. 53613

Date of Examination in England 19/6/19 | 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

PRESENT DENTAL REQUIREMENTS

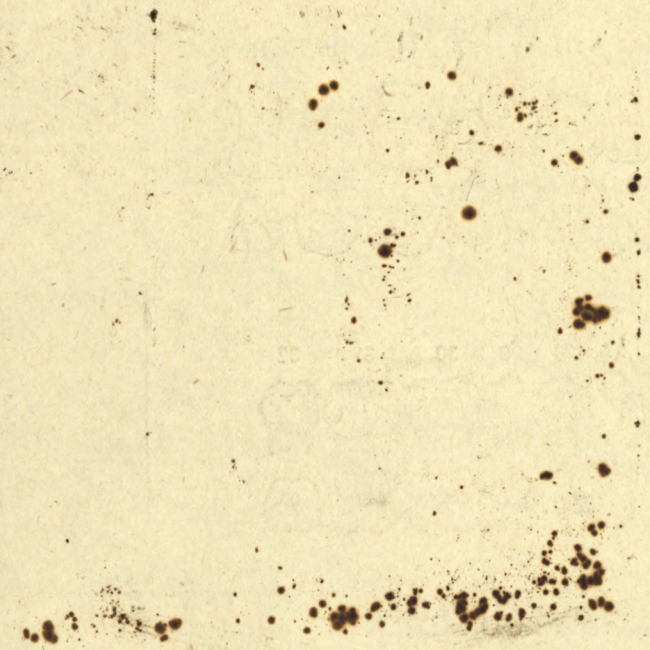
1. FILLINGS
2. EXTRACTIONS
3. CROWNS
4. DENTURES
   - (a) Full Upper
   - (b) Part Upper
   - (c) Full Lower
   - (d) Part Lower

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
- (c) In France

Signature of Dental Officer W. Kennedy Capt



DENTAL HISTORY SHEET.

CANADIAN ARMY DENTAL CORPS

DISTRICT No. 2 Dist.

NAME OF SOLDIER James Peters

REGIMENT 15th Bn. RANK Pte. No. 23.6.13

INSTRUCTIONS

1. On examination the condition of patient's mouth to be marked on diagram in red ink.
2. On first line of report record of same to be made in red ink.

Only such entries to be made on this sheet as will show:

1. Condition on examination (in red).
2. Condition on leaving Canada.
3. Condition on discharge.

	Date	Amalgam	Temporary Filling (a) G. P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhœa	Synthetic Porcelain	Extracting	DENTURES U	DENTURES L	DENTURES P	Gold Clasp	Gold Filling	CROWNS Gold	CROWNS Porcelain	Bridge Work	OPERATOR	Military District	REMARKS
Condition on first Examination	22/8/19.										5 13 14. 19.									G.S. Atkinson Capt	1	Can 31.
																						For Discharge

M. Forms. 465.
200M.—6-18.
1772-39-950.

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

COPY ONLY

THIS IS TO CERTIFY that No. 53613 (Rank) PRIVATE

Name (in full) ROSS, Peter, enlisted in

the 18TH BATTALION, C.O.M.F.

CANADIAN EXPEDITIONARY FORCE at SARNIA, ONT. on the THIRTY-FIRST.

day of OCTOBER 19 14.

HE served in CANADA, ENGLAND & FRANCE (WITH 18TH BATTALION)

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	5' 7"	Marks or Scars	G.S.W. LEFT HIP.
Height	FAIR		
Complexion	BLUE		
Eyes	BROWN		
Hair			

Peter Ross
Signature of Soldier

J. H. Lewis
Issuing Officer

Date of Discharge

DISCHARGE SECTION
AUG 25 1919
No. 1 District Depot

LIEUT.
O.C. DISCHARGE SECTION, NO. 1 D.D.
Rank

AUGUST 25TH 19
Date 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.

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

DISCHARGE CERTIFICATE

CANADIAN EXPEDITIONARY FORCE

7/11/18

ORIGINAL B 36/3

MEDICAL HISTORY SHEET.

Surname Ross. Christian Name Peter

FC 225

Examined on 31st day of October 1914 at Sarnia Ontario

Approved by D. H. Hogg Major

Rank A.D.M.S. 1st Div

Birthplace: City or Town Eddleston. County Scotland

Apparent age 25 Years 9 Months

Trade or occupation Labourer or Game Keeper

Height 5 Feet 6 3/4 Inches.

Weight None Lbs.

Chest measurement: Minimum 34 inches. Maximum expansion 37 inches.

Physical development good

Small-Pox Marks none

Vaccination Marks: Arm Right. ✓ Left. Number ✓

When Vaccinated last ✓

(a) Marks indicating congenital peculiarities or previous disease none

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

Date	Fit or Unfit	Examined for Re-engagement.
		12 NOV 1918 M.O
		M.O.
		M.O.
		ML M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date	Result	Vaccinations.
18/12/14	good	D. H. Hogg M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
10/11/14	good	D. H. Hogg. M.O.
20/11/14	good	D. H. Hogg M.O.
Enlisted 11/9/14	3AB	Rt. 6.42.18 M.O.

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

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	1st Batt	53613		
Transferred to..				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
No. 16 CANADIAN GENERAL (ONTARIO) HOSPITAL, ORPINGTON, KENT.	8 MAR 1919	G. Sw. L. Hip	Rtd. to Invalid Establishment
London, Ont. 18-8-1919.		Cmpd. Facture of ilium and great trochanter. Medically unfit. pres. SMB.	A. Capt.

CANADIAN

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

M. F. B. 313.

50M—9-14.
H. Q. 1772-39-439.

Christian Name

Surname

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital. Day	Month	Year	Dates of Discharge from Hospital. Day	Month	Year	DISEASE.	Number of days in Hospital.	Remarks on nature of the disease: how induced: if mild or severe: if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
Bethnal Green Military Hospital, Cambridge Road, E.		7	11	18	24	1	19	G.S.W. Buttock. L.	78	G.S.W. Left buttock, injuring iliac crest, right trochanter. Improved. Requires attention Optic &c. Do Operations	B.W. Whitehead Howell Capt. R.A.M.C.
16 Canadian General Hosp Bexley Heath Kent	24	1	19.					do		Scar almost healed. Progressing favorably. Invalid to Canada	Wm. Beggs Capt. C.A.M.C.
No 5 CANADIAN GENERAL HOSPITAL LIVERPOOL.		26 JUN	1919		30 JUN	1919		do		Wd healed. Good movement Lt. Hip.	Oldham Capt.
"ARAGUAYA."		30	6	19	6	7	19	Do		No change	E.G. Arthur Capt.
								Do.		Discharged as Med. unfit.	Wm Oldham Capt.

DEPARTMENT OF VETERANS AFFAIRS

Dept. of Veterans Affairs
War Service Records
NOV 22 1961
Referred to

Ottawa Ont

To Copy for H.O.FILE

Date Nov 21/61

Attention of

NAME ROSS, Peter. SERVICE NUMBER 53613 CEF C.P.C. No. 162389 W.V.A. No. NAVY ARMY x R.C.A.F.

The DEPARTMENT has received information from

Mary R. Ross. 25 Davidson Terrace Haddington E. Lothian Scotland. Nov 16/61

(State authority and source of information of death)

regarding the death of the above mentioned veteran.

Particulars are as follows:

Date of Death Nov 10/61
Cause of Death
Place of Death Lothian Scotland.

Name and Address of next of kin (if known)

Copies to: W.S.R.
V. I.
~~PAY~~
D.O. LONDON ENGLAND.
H.O.

} Destroy form if advice of death already received.

for
Chief, Central Registry

DVA 24

Rank ~~Private~~ Name ROSS Peter. Reg'l No. 53613.

Unit 18th Batt. If in perm. Corps, What Unit? Married or Single Single.

Place and Date of Enlistment Sarnia Oct 31st Oct: 1914 Place of Birth Eddleston Scotland.

Name and Address, Next-of-Kin Jas Ross

438 SouthMutton St. Sarnia. Relationship

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
1/5	31/5	31	1	31	31	10	3 10		34 10			31 50			31 50	160	
1/6	30/6	30		30	30		3		33			31 50			31 50	210	
1/7	31/7	31		31	31		3 10		34 10			31 50		110	33 60	260	1 dep. #335
								2 60	2 60							5 20	Br. Exchange
1/8	31/8	31	1	31	31	10	3 10		34 10	304 347		34 07			34 07	553	
1/9	30/9	30		30	30		3		33	391 Dep. Sal. #3		2 68			2 68	3555	
1/10	31/10	31		31	31		3 10		34 10			4 36			4 36	6529	
1/11	30/11	30		30	30		3 -		33 -	Div Sub 15		2 68			2 68	9561	
1-12	31-12	31		31	31		3 10		34 10			19 31			19 31	11040	
1-1-16	31-1-16	31		31	31		3 10		34 10			5 22			5 22	13928	
	Feb	29		29	29		2 90		31 90	Sal Ch 97		2 62			2 62	16856	
Mch	1.31	31		31	31		3 10		34 10			7 83			7 83	19483	
				336			33 60	2 60	372 20			176 27		1 10	177 37	19483	

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

MARRIED OR SINGLE S.

PLACE OF BIRTH Eddlestone, Scotland.

NAME AND ADDRESS OF NEXT OF KIN Jas. Ross, 438 Southampton St. Sarnia.

RELATIONSHIP OF NEXT OF KIN

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

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

REG'L NO. 53613 RANK Private NAME Ross, Peter. OK

IF IN PERMT. CORPS WHAT UNIT UNIT 18th Batt'n TRANSFERRED TO 2nd Div Salvage DATE 1.5.17 AUTHORITY Cable Nov 5

PERMANENT FORCE ALLOWANCES TRANSFERRED TO DATE AUTHORITY

PLACE OF ATTESTATION Sarnia, Ont. TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION October 31st 1914. TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY $ Nil DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

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

DISCHARGE DATE AND PLACE REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE) C.1 LMR

DATE	PAY No. OF DAYS	PAY RATE	PAY AMOUNT $	PAY AMOUNT c.	FIELD ALLOWANCE No. OF DAYS	FIELD ALLOWANCE RATE	FIELD ALLOWANCE AMOUNT $	FIELD ALLOWANCE AMOUNT c.	WORKING OR SPECIAL PAY No. OF DAYS	WORKING OR SPECIAL PAY RATE	WORKING OR SPECIAL PAY AMOUNT $	WORKING OR SPECIAL PAY AMOUNT c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE CREDIT	BALANCE DEBIT	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
1916																																			
Mar 31			336				33	60						260	37 20									176 27					1 10	177 37	194 83				
Apl 1-30	30	1.10	30	-	30	1.10	3								33 -									261							277 83				
																144 2.85																			
																157 F.C.3								261											
May 31	31		31		31		3	10							34 10	735 8.5								97 33						10255	157 38				
June.	30		30		30		3								33 00																192 38				
July	31		31		31		3	10							34 10	205								767							767	958 81			
Aug	31		31		31		3	10							34 10	216 28.7								262							523	24 768			
																228 15.7								261											
																251 [illegible]								262											
Sept.	30		30		30		3								33 00	239 15.8								261							784	272 84			
																263 199 RR								261											
Oct	31		31		31		3	10							34 10	283 15.10	9	2						262	73 00						756	231 32			
																321 204 Sailed	15/11							261											
																476 — —	23/11							261							7	83 256 49			
																387 — —								261											
																350 —	11/12																		
																334 —	26/11																		
Nov	31		31		31		3	10							34 10									1134							13 95	276 64			
			61	10			61	10																											
Jan	31	1.10	34	10											34 10	364	23/1/17	7	RC.7.					261	97 33						99	94 210 80			
																2 Div Salvage	15/1																		
			706	80										260	708 80									356 57	170 33				1 10	498 -	210 80				

Transferred to the 2nd Div Salvage Co. Effective 1/1/19 Authority Debert Nov 5

53613 Pte. Ross, Peter

DATE 1917	PAY No. of Days	PAY Rate	PAY Amount $	PAY Amount c.	FIELD ALLOWANCE No. of Days	FIELD ALLOWANCE Rate	FIELD ALLOWANCE Amount $	FIELD ALLOWANCE Amount c.	WORKING OR SPECIAL PAY No. of Days	WORKING OR SPECIAL PAY Rate	WORKING OR SPECIAL PAY Amount $	WORKING OR SPECIAL PAY Amount c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE Credit	BALANCE Debit	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
~~Last Bal~~			706	80										2 00	708										346 57	170 33		1 00	498 -	210 80				
~~Jan~~ V	~~31~~		~~24~~	~~10~~											~~24 10~~										~~2 67~~	~~99 33~~			~~99 91~~	~~2 00~~				
Feby	28		30	80											30 80	1645	13/1				025 1/10	37	261		262				523	236 87				
March	31	1½	34	10											34 10	1744	11/1	1877	17/3 1779	17/3			261	261 5 24					1046	260 01		225 -		
April	30		33	00											33 00				4/4					262					262	290 39				
May	31		34	10											34 10	86	7/4						262						262	321 87		255 ·	66 87	
June	30		33	·											33 ·	156 104	4/5 14/5	159	5/6		RR 92 8/6		268 268	535		24 33			35 04	319 83		270 ·		
July	31		34	10											34 10														- -	353 93				
Aug	31		34	10											34 10	223 381 333 1136	19/6 8/9 2-11-17 4/3	550 527 571	8/9 8/9 2/4/18				268 268 267 268	268					2 68	385 35		300		
Sept.	30		33	·											33 ·								268	268					1607	402 28		315		

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR 3	DR 4	BALANCE	DEFERRED PAY	SER. ALLOE. ENG.
1917 Oct.	·	~~402 28~~							402 28	315	
" 31	PP	34 10		ar 611 23/9. 18 Bx	2 68				433 70	330 ·	
Nov 30	✓	34 10			2 68						
		33 -		ar. 921. 9/9 3 C 2.	97 33						
				" 658 17/10 18 Bx.	4 46						
					101 79						
Dec 31 1918	✓	34 10		711 28/10 "	3 57				395 44	360.	
		67 10			105 36						
Jan	✓	34 10		ar 807 26.11.17 "	12 49						
				✓ 767 19.11.17 "	4 46						
				✓ 921 28.12.17 "	3 57						
				✓ 862 21.12.17 "	4 46				404 56	375	
		34 10			24 98						
Feb.	✓	~~30~~ 80		✓ 984 18.1.18 "	4 46						
				✓ 1030 29-1-18 ✓	3 57						
				✓ 1061 5-2-18 ✓	4 46				422 87	390	
		30 86			12 49						
Mch	✓	34 10		✓ 1169 7-3-18 ✓	4 46					405⁰⁰	
				✓ 1223 18-3-18 ✓	3 57				448 94	405⁰⁰	
		34 10			80 32						

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY. * ENGLAND OR CANADA.	SEPARATION ALLOWANCE. * ENGLAND OR CANADA.
EFFECTIVE DATE:–	EFFECTIVE DATE:–
AMOUNT:–	AMOUNT:–

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

Cpl. Hos.

New ASPB^re 111233 issued 2/12/18.

NAME:– ROSS PETER

NUMBER:– 53613

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Private

UNIT AND TRANSFERS

ORIGINAL UNIT:– 18th Bn

DATE ACCOUNT FIRST OPENED:– 1.5.15

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			18th Bn
		21/7/19	Can Sec

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1 00	10		

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
18/3/19	1390	Orpington £6.00	48 67				

PARTICULARS OF RENDERING NON-EFFECTIVE: Transferred to Canada 1/4/19 AR 42.16 C.C.H. Orpington M.D. – 2 I.C. Bel £686 03

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
31/3/18	Balance Ford								448 94	405 –	
April	P.P.	33		AR 5 7.4.18 18th Bn	4 46						
				✓ 58 17.4.18 ✓	3 57				473 91	420	
May	P.P.	33 34 10		✓ 123 16.5.18 ✓	8 03 4 46				502 55	435	
June	P.P.	33 34 10		✓ 184 4.6.18 ✓	4 46 8 03						
				✓ 237 22.6.18 ✓	3 57				524 95	450	
July	P.P.	33 34 10		✓ 370 9.7.18 ✓	11 60 4 46						
				✓ 483 24.7.18 ✓	3 57				551 02	465 –	
Aug	P.P.	34 10 34 10		✓ 595 19.8.18 ✓	8 03 3 57					480	
				✓ 359 20.8.18 ✓	9 33				484 22		
Sept	P.P.	34 10 33		✓ 839 26.9.18 ✓	160 90 2 14				528 68	495 –	
Oct		33 34 10			2 14				544 18	510	
Nov		34 10 33 –		AR. 57955. 4/12/18. 4	9 73 –						
Dec		34 10			–				601 55	540	
Jan		34 10			–				635 65	555	
		101 20			9 73						
Feby		30 80		HK 68209. (Jan) 1	9 73						
Mar		34 10		AR. 14532 – 5.3.19. 16 Bn. 2d	4 87				685 95 690 82		
	Ord. on Def Pay 31/3/19.	48 75.		✓ 15390. 18.3.19 16 – 34	4 87 63 24				686 03		
		113 65		✓ 2860. 30.4.19. ✓ End 1	9 73				676 30		
				2	9 73						
				Auth. from 23.00. 22/5/19 – 19.00. 28/5/19.							
				Forfeits 6 days Pay by P.R.O. for Wood S. DD 122. N.E. Section advised 6/6/19 23/6/19.		660					
				AR 4995 4/6. Orpington Bnd. 1	9 73						
				✓ 6002 20/6 5^C C# Bnd 6	4 87				653 10		
				S.S. Canada 30/6/19 1460	14 60	660					
				8/2 #505.							

Examined
15.3.19

NUMBER 53613 RANK NAME Ross. P.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION

Military Hospital, M. D. No. 1
Wolseley Barracks

THIS FORM WILL BE USED FOR ALL RANKS

MEDICAL HISTORY OF AN INVALID

18-8-1919.
1D.

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

1. 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.
2. 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."
3. 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.
4. Special care is required in answering question 9. Read the questions carefully. All questions must be answered.
5. If space provided under any section is insufficient add another sheet. Such sheets must be initialled by the Medical Board.
6. A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board."
7. Under no circumstances may information other than that in sections 7, 8, 9 and 10 be communicated to the invalid, directly or indirectly.
8. 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.

STATION London, Ont. DATE 14-8-1919.

1. 1 (a) Unit No. 1. D.D. (b) Regimental No. 53613 (c) Rank Pte.

(d) Surname ROSS (e) Christian name Peter.

(f) Home address 277 Emma St. Sarnia, Ont.

(g) Next of Kin Mrs. J. Ross. (h) Relationship Mother.

(i) Address of Next of Kin 277 Emma St. Sarnia, Ont.

2. Age last birthday 30 Date of birth 31-1-1889.

3. Enlistment, or Appointment (if an Officer) (a) Place Sarnia, Ont. (b) Date 31-10-14.

4. Personal description:

(a) Height 5' 7" (b) Weight 128 (stripped) (c) Complexion Fair.

(d) Colour of hair Brown (e) Colour of eyes Blue (f) Identification marks, Scars, etc. 12" scar left hip linear.

5. Former trade or occupation Stoker.

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
	4	287

	Periods	
	From	To
Canada 18 Battn. London,	1- 7-19. 31-10-14.	to date. 15- 4-15.
England 18 Battn. West Sandling.	29-4-15. 8-12-18.	15- 9-15. 1- 7-19.
France or other theatres of War 18 Battn France.	15- 9-15.	8-12-18.

7. Original disease, or injury Compound fracture of ilium and great trochanter. "Left"

(a) Date of origin 8-10-18. (b) Place of origin Cambria.

(c) Cause G. S. W.

M. F. B. 227.

300M.—8-18.
1772-39-117.

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 scar left groin and thigh with extensive loss of mucle and osseus tissue b. Partial loss of hip function C. No occupation involving strenuous use of limb.

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.)

OBJECTIVE. General condition good. There is a linear scar about 1 ft long beginning in loin level of crest of ilium transverse for 3" decending obliquely terminating 2" below tip of great Trochanter. There is loss of origin of muscle. Rectus and Femoris and Sartorius. an part of anterior origin of gluteal which have been carried away with crest of ilium. Also loss of part of insertion of glutæus maximus part of minimus and medius muscles. with general adherence of scar to aponeurotic and osseus tissues. Ilium and grt " Trochanter free movement of hip joint but limited by destruction of muscle involved. Sligh wasting of thigh muscles. SUBJECTIVE. Complains of weakness of part affected Can walk five miles a day with stick without paining. G.S.W. completely healed.

(*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 (If pulse rate is abnormal, B. P. will be taken.)	NO	Genito-Urinary System (Albumen and Sugar will be excluded.)	NO
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.		

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

Patient got hit "G.S.W." In Cambrai 8-10-18. on left groin and thigh was sent to 26- C.G.H. was there 1 month then sent to Eng. to Bethnel Green for two months then to 16 C.G.H. for five months until he was invalided home. There is a scar of about 1 ft. long in level of crest of ilium transverse for 3" descending obliquely terminating 2" below tip of great trochanter. muscles effected Rectus Femorus and Satorusl and pt of anterior origin of gluteal Patient has made good progress and seems to have fairly good use of joint wound all healed. Had operation at 29 C.C.S.

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*).)

NIL.

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

As described in 9a.

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

(*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.)

not applicable.

12. Was the disability caused, or aggravated; (*a*) by intemperance, or improper conduct; or (*b*) by unreasonable refusal to accept treatment? 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? Permanent.

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

He has had dressings and massage.

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)

Massage and gym. for 3 months.

16. Can the former trade or occupation be resumed? No Injury too extensive.

(If not, briefly state why)

17. Recommendations

W. A. Fitlick Capt CAMC

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 ..... 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 .....

..... Rank.

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.

Agrees but add # 9. Man walks with a marked limp. Scar is 2½" in width, adherent and depressed. Movements of hip are flexion active 140o Passive 130o. Extension normal. Abduction 30o adduction 30o. Circumduction ½ ltd Atrophy of left thigh ½" Strength extension 1/3 less flexion 2/3 less than right. There is 1" apparent shortening of left leg. # 9 b add right undescended testicle. # 15 No. # 17 Medically unfit. The disability is marked and permanent.

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.
(*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.)

As medially unfit.

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.

A F Laird Capt. C.A.M.C. *President.*

PLACE London, Ont. J Mosiac Capt. C.A.M.C. } Members

DATE 15-8-1919.

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.

.....*President.*

PLACE..... } Members

DATE.....

APPROVED BY

for D J McKay Major C.A.M.C.
Assistant Director of Medical Services.

DATE 18-8-1919.

APPROVED BY

.....
Director-General of Medical Services.

DATE.....

War Service Badge
Class A No. 256914 Issued

War Service Badge.
Class B No. 61750 Issued.

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

M

I

1. No. 53613

2 Rank. PRIVATE

3. Name. ROSS, Peter,

4. Unit. 18TH BATTALION, C.O.M.F.

5 Date of Discharge AUG 25 1919 Place LONDON, ONT.

6 Reason for Discharge MEDICALLY UNFIT

7. Authority. R. O. 1894 D.O. #235 d/ 23. 8. 19.

8. Proposed Residence after Discharge 277 EMMA ST.,
SARNIA, ONT.

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.? 39

Peter Ross
Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place LONDON, ONT.

Date AUGUST 25TH, 1919.

Signature [signature] (O. C. Discharging Unit.)
O.C. Discharge Section, No. 1 D.D.

ICOOSE 2/8/20

M.F.B. 218a—300M.-11-18—1772-39-113.

Stad 3/11/19 mk

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

ID 30-R-1383

AUDITOR | PAYMASTER

M. OR S. | PROMOTIONS, REDUCTIONS AND REVERSIONS AFFECTING DAILY RATE OF PAY AND ALLOWANCES | REGT. No. 53673 | RANK Pte | NAME (IN FULL) ROSS Peter

NEXT OF KIN | RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? | DATE EFFECTIVE

TO WHOM PAID | RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F. 18 Bn | IF IN P.F. WHAT UNIT? | (BLOCK LETTERS SURNAME FIRST)

PLACE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

DATE OF ATTESTATION 31-10-14 | TRANSFERRED TO | DATE | AUTHORITY

ASSIGNED PAY $ | DATE EFFECTIVE

PAYABLE TO | RELATIONSHIP | ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE

DISCHARGED PLACE LONDON, ONT. | DATE 25-8-19 | REASON Med Staff | AUTHORITY DO 235 | IF ENTITLED TO POST DISCHARGE PAY Yes

MONTH	PAY A/C.C. NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.	OTHER CREDITS $	OTHER CREDITS C.		TOTAL CREDITS $	TOTAL CREDITS C.	ACQUITTANCE ROLLS COL. NO. 1	ACQUITTANCE ROLLS COL. NO. 1 DATE	ACQUITTANCE ROLLS COL. NO. 2	ACQUITTANCE ROLLS COL. NO. 2 DATE	ACQUITTANCE ROLLS COL. NO. 3	ACQUITTANCE ROLLS COL. NO. 3 DATE	CASH PAYMENTS COL. NO. 1 $	CASH PAYMENTS COL. NO. 1 C.	CASH PAYMENTS COL. NO. 2 $	CASH PAYMENTS COL. NO. 2 C.	CASH PAYMENTS COL. NO. 3 $	CASH PAYMENTS COL. NO. 3 C.	ASSIGNED PAY $	ASSIGNED PAY C.	REGIMENTAL CHARGES $	REGIMENTAL CHARGES C.	OTHER CHARGES $	OTHER CHARGES C.		TOTAL DEBITS $	TOTAL DEBITS C.	BALANCE DEBIT $	BALANCE DEBIT C.	BALANCE CREDIT $	BALANCE CREDIT C.	PARTICULARS OR REMARKS
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100M-1-19.—L. L. 53962—M. & D. 9723.
M. F. W. 2596.
1772-39-1890.