ORIGINAL.

ATTESTATION PAPER

No. 150573

79th OVERSEAS BATTALION

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

cpl

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name? — John Scott
2. In what Town, Township or Parish, and in what Country were you born? — Morpeth Northumberland
3. What is the name of your next-of-kin? — Mrs L. McMorn (sister)
4. What is the address of your next-of-kin? — Morpeth Northumberland England
5. What is the date of your birth? — 28 June 1887
6. What is your Trade or Calling? — Hospital Orderly
7. Are you married? — No
8. Are you willing to be vaccinated or re-vaccinated? — Yes
9. Do you now belong to the Active Militia? — No
10. Have you ever served in any Military Force? — 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

John Scott (Signature of Man).

(Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, John Scott, 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.

John Scott (Signature of Recruit)

Date 5 Sept 1915. (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, John Scott, 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.

John Scott (Signature of Recruit)

Date 5 Sept 1915. (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 Brandon, Man. this 13 OCT 1915 day of 191 .

A J Campbell (Signature of Justice)

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

(Approving Officer)

Lt.

M. F. W. 23.
200 M.—5-15.
H. Q. 1772-89-841.

Description of John Scott on Enlistment.

Apparent Age 27 years 2 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 7½ ins.

Chest measurement: Girth when fully expanded 40 ins.; Range of expansion 3 ins.

Complexion Fair

Eyes Hazel

Hair Brown

Religious denominations: Church of England X; 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).

Mole left side of forehead

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 31 August 1915. J. H. Edmison

Place Brandon. 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.

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

(Signature of Officer)

O. C. 79th. Overseas Battalion.

ORDERLY ROOM NOV 9 1915

Date 191 .

REGIMENTAL DOCUMENTS

4-7-19 NAME Scott John REGT. NO. 150573 UNIT 79 Bn - H. Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
1	ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
2	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
	TRAINING HISTORY SHEET (M.F.W. 113)					
1	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
1	REST CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
1	COMMUNY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
2	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
	DENTAL HISTORY SHEET (M.F.B. 465)					Category Demob
3	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					
	MEDICAL EXAMINATION (M.F.W. 129)					
2	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
	LAST PAY CERTIFICATE (M.F.W. 44)					
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)					
1	CADC.					
1	CD3.					
1	Misc					
1	122					
1	[illegible]					

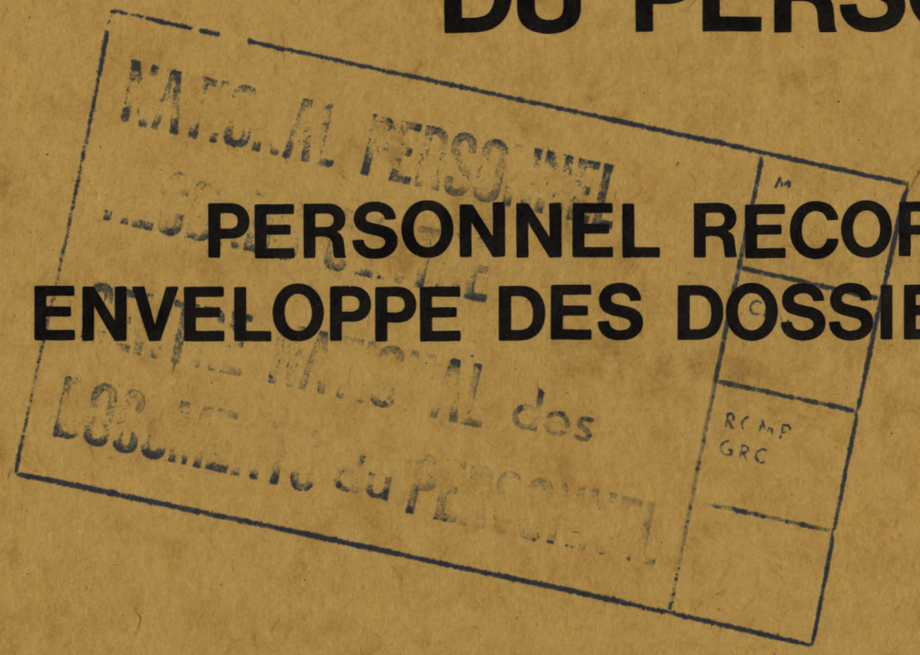
Box # 8726

09016

W 2589
100M-11-18
1772-39-1377

150573	SCOTT	JOHN
I.D. number **No. d'identification**	**Surname** **Nom de famille**	**Given names** **Prénoms**

NATIONAL PERSONNEL RECORDS CENTRE
CENTRE NATIONAL DES DOCUMENTS DU PERSONNEL



PERSONNEL RECORDS ENVELOPE
ENVELOPPE DES DOSSIERS DU PERSONNEL

Location
Lieu 8726

"CONTENTS CONFIDENTIAL"
"CONTENU CONFIDENTIEL"

ARC – 1048 (86/06)

No. 150373 RANK Pte / L. Cpl NAME Scott, John

T. O. S. 5-9-15 UNIT 79th Battalion C. E. Fr
DO 79 of 13-10-15

M. D. 10

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915-	1915-			
Sept. 5	Oct. 31	L		
Nov.		L		
Dec.		L		
1916	1916			
Jan.		L	From L Cpl 1-1-16	DO 140 of 18-1-16
Feb.		L		
Mar.		L		
April		L		
May.		In		

UNIT SAILED
APR 24 1916

Number 150573 Rank A/Sgt.

Surname Scott

Christian Name John

Units 85th Bn Can Inf Theatre of War France

Date of Service 11-9-18

Remarks

Latest Address Brandon P.O.
Man

Roll No 43
Page 10549

200m.-2-21.M.

Port, ship, and date of arrival

Next of kin

Address on leave

Address on discharge

Transportation issued Yes No Date Character on discharge

Previous occupation Date and place of enlistment

Diagnosis Date of Medical Boards

Date	Remarks

DESP. APR 13 1922
REGN. NO 26478

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

Fill in Only.—Unit, Number, Rank and Name. ~~Reg~~ 3684

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

Casualty Form—Active Service.

Unit, Regiment or Corps 79th OVERSEAS BATTALION

Regimental No. 150573 Rank Pte. Name Scott, John

Enlisted (a) 5/9/15 Terms of Service (a) C. E. F. D of W Service reckons from (a) 5/9/15

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

Extended x Re-engaged x Qualification (b) Hospital - Orderly

W. S. B. CLASS. A.

Report: Date	Report: From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
		Embarked	Canada	per R. M. S. Lapland	24/4/16
		Disembarked	England	"	" " 4/5/16
~~18/1/16~~	~~Part 2 BO 12~~	~~Promoted to Lce Corpl~~	~~Brandon Man Can~~	~~1/1/16~~	No Record. P.
~~5/4/16~~	~~Part 2 BO 81~~	~~Promoted to Corpl~~	~~Brandon Man. Can~~	~~5/4/16~~	
29/5/16	~~Part 2 BO 126~~ 79th Bn.	Promoted to a/Sergt	East Sandling	29/5/16	Pt II - 126 & 168
6/7/16	~~BO 1736~~ 79th Bn	Promoted from Private to Actg Corpl	East Sandling	5/5/16	Pt II - 163
~~4/7/16~~	~~BO 1818~~	~~Promoted to a/Sergt~~	~~East Sandling~~	~~4/7/16~~	~~Pt II 169~~
12/7/16	Part II 79th Batt	Transferred to 17th Batt	East Sandling	12/7/16	
		~~D.O. 3709 - d - 15 - 7 - 16~~			
~~15~~ 12-7-16	O.C. 17th Res. Bn	Taken on Strength of 17th co. act/Sergt "		12-~~15~~-7-16	Part II O ~~198~~ 195
		~~"On Comm, C.G.H. Epsom~~		~~26/6/16~~	~~Part II O 19~~

D. Stefansson
Lieut. Asst. Adjutant
for O.C. 79th Canadian Reserve Battalion.

A H Appleton Lieut.
Adjt. 17th Res. Bn.

(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.

150573 Sgt. H. J.

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.
10.4.18.	M.C.H. Epsom	Proceeded on Command to Garrison Gymnasium Shorncliffe.	Garrison Gym. Shorncliffe.	10/4/18.	P.T.II. Do. 100. 10-4-1918. Jas Ross Major
1-5-18	O.C.17th	T.O.S. from Can, Army, Gymnastic Staff	Bramshott	30-4-18	PT.II.Order 103
3-5-18	O.C.17th	Revert to ranks being Surplus to Establishment	Bramshott	3-5-18	PT.II.Order 105
12-7-18	O.C.17th	PROCEEDED OVERSEAS FOR SERVICE WITH 85th BATTN.	Bramshott	11-7-18	PT.II.O.163 Lieut., Asst. Adjt., 17th Canadian Res. Batt.
26-6-16	79th Bn.	ceases att. P.T. & B.G. Course	C. Sandling	24-6-16	Pt = 153
—"—	—"—	Proc: on Com. to Epsom as Instr.	—"—	26-6-16	" " 153
28-6-16	C.C. & Hp.	attached.	Epsom	—"—	" " 160

G. Harkness LIEUT.
FOR LT: COL: I/C RECORDS. C.O.M.E.

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) SCOTT J.

REGIMENT 85 Btn RANK Pte No. 130573

Date of Examination in England 4/5/19 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

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

12-13

PRESENT DENTAL REQUIREMENTS

1. FILLINGS 10
2. EXTRACTIONS
3. CROWNS
4. DENTURES
   - (a) Full Upper
   - (b) Part Upper
   - (c) Full Lower
   - (d) Part Lower

ASSISTANT DIRECTOR OF DENTAL SERVICES
JUN 9 1919
M. D. NO. 6

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 yes
- (c) ~~In France~~

BRAMSHOTT CAMP

Signature of Dental Officer R C Crosby Capt.

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

War Service Badge
Class "A" No. 224721

THIS IS TO CERTIFY that No. 150573 (Rank) Pte

Name (in full) Scott John enlisted in

the 79 Bn

CANADIAN EXPEDITIONARY FORCE at Brandon on the 5th

day of Sept 1915

HE served in 85th Bn 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 29½

Height 5 – 7½

Complexion Fair

Eyes Hazel

Hair Brown

Marks or Scars Mole Left Side of Forehead.

J Scott
Signature of Soldier

M Morrison Major
O.C. Dispersal Station "B"
Issuing Officer

Date of Discharge

Dispersal Station "B" JUN 15 1919 Military District No. 6

Rank

Date JUN 9 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.

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

1.—That discharge certificate must be carried when wearing uniform.

2.—That uniform can be worn only thirty (30) days after discharge, or when duly authorized in writing, and

3.—That wearing of uniform renders him liable to usual military discipline, as if on the strength of a unit.

L- L. Job 310—M. & D. 6574.

Bank Account.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12.
50m.—4-16.
H. Q. 1772-39-819.

Credit

To Whom Imperial Bank

Address Brandon Man.

Rate $ 15.00

By Whom Assigned Scott John

Regtl. No. 150573.

Rank L/C.

Corps a Co. 79 Bn.

MAY 1916 PAYMENTS

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

CONSOLIDATED 7 ACCOUNT

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a.
50m.—4-16.
1772—39—819.

Sheet No. 2. Imperial Bank Credit

L. L. Job 310.—Req. 6574.

Name of Soldier Scott John

150573. 79. Bn

MAY 1916

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May		M 6212	15	
June		D 5708	15	
July		10610	15	
Aug.		E 14555	15	
Sept.		W. 19546	15	
Oct.		W 24873	15	
Nov.		A 28552	15	
Dec.		V 32352	15	
Jan.	1917	41969	15	
Feb.		47050	15	
March		52331	15	156
April		W 4686	15	15. E.
May		W. 11042	15	
June		V 17871	15	15 nil
July		W 27276	15	Bn
Aug.		M 32104	15	
Sept.		T 39564	15	
Oct.		E 45456	15	
Nov.		P 52438	15	
Dec.		W 59426	15 / 300	
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier_____

PAYMENTS.

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

MARRIED OR SINGLE: Single

PLACE OF BIRTH: Morpeth, Northumberland Eng.

NAME AND ADDRESS OF NEXT OF KIN: Mr Morn Morpeth

Morpeth Northumb., England

RELATIONSHIP OF NEXT OF KIN: Sister

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
appt'd L/Cpl.	5/5/16	AO 163 4/7/16 24th bn
" Cpl.	29/5/16	AO 126 29/5/16 - 168th 79th bn

ADMISSIONS TO HOSPITAL, &c.

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

REG'L NO. 150573 RANK Corporal NAME Scott, John

IF IN PERMT. CORPS WHAT UNIT — UNIT 79 Battn. TRANSFERRED TO 17 Battn DATE 13.7.16 AUTHORITY R.O. 1826 12.7.16

PERMANENT FORCE ALLOWANCES — TRANSFERRED TO C.C.A.C. DATE 16/1/17 AUTHORITY C.M. Keller 12/10/16

PLACE OF ATTESTATION Brandon, Manitoba — TRANSFERRED TO British H/L Pat. DATE 31.5.17 AUTHORITY

DATE OF ATTESTATION September 5th, 1915 — TRANSFERRED TO Epsom DATE 21.6.17 AUTHORITY A. Rolls

N.S.R.D 1/11/17

ASSIGNED PAY MONTHLY $ 15.00 DATE EFFECTIVE

PAYABLE TO Imperial Bank of Canada, Brandon, Man. for credit of self — 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)

DATE 1916	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
														15 55	15 55															15 55 / ~~22 75~~				Balance from Canada
May 1-31	31	1.10	34 10		31	1.10	3 10								37 20	1	16 75	31						1447 730				15 00		41 77	10 98				
June 1-30	30	1.10	33		30	1.10	3								36		104 15							487						487	42 11				Ass. Pay Charged to #150574 in error. Adjusted in July.
Checked Lakeman July 1-12	12	1.10	13 20		12	1.10	1 20								14 40									24 34	730			15 00 / 15 00		46 64 / 30 00 / 76 64	26 57				Ass. Pay June charged to #150574 in error
July 13-31	19		20 90		19		1 90								22 80															49 31				
Aug 1-31	31	1.10	34 10		31	1.10	3 10								37 20													15 00		15 00	71 51				
Sept	30		33.		33.		3.								36									1460				15		29 60	77 91				
Oct. 1-31	31		34 10		31		3 10								37 20													15		15	100 11				
Nov 1-30	30		33		30		3								36									974 / 973 / 973				15		44 20	91 91				
Dec 1-31	31		34 10 / 2450		31		3 10 / 24 50								37 20 / 369 55									487				15 -		19 87 / 260 31	109 24				
Jan 1-15	15		18												18 / 387 55 / 1970									973				15		24 73 / 295 04	102 51				Trans. C.C.A.C. to Ottawa 16/1/17. Ass't P. Keller 12/10/16
Jan 16	16	1.20	19 20																											121 71				
Feb	28	1.20	33 60												33 60	578	Ex. 29/11	3213 Ex. 1/11 / 3844 Ex. 1/11						973				15 -		49 06	106 25		15 -		
			364 80											15 55	380 35									34 07	730	8273		150		274 10	106 25				

150573 Cpl. Scott. John

Ass Pay $15.00

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.	Acquittance Rolls 1 Date	Acquittance Rolls 2 No.	Acquittance Rolls 2 Date	Acquittance Rolls 3 No.	Acquittance Rolls 3 Date	Acquittance Rolls 4 No.	Acquittance Rolls 4 Date	Cash Payments 1	Cash Payments 2	Cash Payments 3	Cash Payments 4	Assigned Pay	Other Charges	Total Debits	Balance Credit	Balance Debit	Pay Withheld or Deferred	Pay Available for Issue	Remarks
Feb	28		364	80										15 55	380 35									34 07	7 30	82 73		150 -		274 10	106 25		15 -	91 25	
															37 70	777 Ep 15/2		Sp 1305. 21/3 977. 3/3		CC Ep 99. 2404 16/11 16				9 73	7 30 9 73	17 04 9 73		15 -		68 52	74 92				
Mar	31	1 20	37	20																															
Apl	30		36												36		Ep.	118 6/4							9 73			15		24 73	86 19				
May 1/30			36												36													15		15	107 19				
May	1		1	20											1 20																108 39				
June	20		24												24													15		15	117 39				Epsom Patients 21/6
"	10		12	00											12	583 28/4								9 73						9 73	119 66				
July	31		37	20											37 20													15		15	141 86				
Aug	31		37	20											37 20	1002 22/5								9 73				15		24 73	154 33				
Sept	30		36												36	1449 19/6 1232 6/6 1688 29/6								9 73 9 73 9 73				15		44 19	146 14				
			621	60										15 55	637 65									92 45	34 06	109 50		255		491 01	146 14				

Month	Particulars	Cr. 1	Cr. 2	Particulars	Dr. 1	Dr. 2	Dr. 3	Dr. 4	Balance	Pay
Sept 30	Balance	146 14							146 14	
Oct	C.P.	34 20						15	168 34	
Nov	C.M. Pay	34 20 36		Can AP				15 15		
Dec	Cpl Pay	34 20		AR 3261 28/9 CCH Eps	9 74					
				DnAR 2859 15/8 "	9 73					
				C.A.P. Dec				15		
				DnAR 3683 16/11/17 CCH Eps	9 73				182 34	
Jan	C.P.	43 20 34 20		C.A.P. Jan	29 20			30 15		
				AR 3043 18/9 Epsom	9 73					
				AR 2450 31/8 "	29 20					
				AR 2351 28/7/17 CCH Eps	9 74					
				AR 2062 13/7/17 CCH Eps	9 74					
				DnAR 4842 - CCH Eps	14 60					
				" " 3999 30/10 "	9 73				121 80	
		34 20			82 74			15		
				DnAR 1548 28/11 Epsom	14 60					

Month	Particulars	Cr. 1	Cr. 2	Particulars	Dr. 1	Dr. 2	Dr. 3	Dr. 4	Balance	Pay	Eng.
Feb									121 80		
								15	125 80		
Feb	C.P.	33 60		C.A.P.				15			
		33 60			14 60			15			
Mar	C.P.	34 20		C.A.P.				15			
				AR S119 11/1 Epsom	19 44						
				" S614 26/2 "	19 44						
				" S428 17/2 "	24 33						
				DnAR 494 18/12 "	24 33						
				AR S304 29/1 "	24 33						
				" S462 13/3 "	19 44						
				" S914 26/3 "	14 60				2 00		
		37 20			146 00			15			

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:- 15 00		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.

Imperial Bank of Canada
Brandon Man (credit of self)

Stopt Effect. 1.6.19.

NAME:- SCOTT John

NUMBER:- 150543

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		6pl
D.O. 105 3/5/18 17 Res	3-5-18	Private

UNIT AND TRANSFERS

ORIGINAL UNIT:- 79th Bn

DATE ACCOUNT FIRST OPENED:- May 1st 1916

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			MLRD
73. 14/7/18	1/8	21/8/18	85Bn "E"

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
~~7/5~~	~~2812~~	~~"F" 66 6.~~	~~£15~~ 13				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1 10	10		
D.O. 105 3/5/18 17 Res	1 00	10		

PARTICULARS OF RENDERING NON-EFFECTIVE:- Dischd to Can 1/6/19 (E8619 8/5/19 Brann & Brann M.D.6) L.P.C. 157 2b Ledger 224 2b

MONTH 1918	PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Mch 31	Bal Fwd								2 00		
April	Can A.P. C.P.	36		Can A.P.				15			
				AR. L.25 9/4 Epsom	24 33						
				" 253 26/4 "	14 60						
		36			38 93			15	15 93	117	
May	PP 2-5-18 to 2-5-18 Gpl Pay 2 days 2 40 PP 3-5-18 to 31-5-18 PP 29 days 31 90 Underwritten 29-5-16 to 2-5-18 Pay Diffs 6pl Should have been 4 Sgt. 704 days @ 30	34 30		Can A.P.				15	p.s.39 20/5/18		
				AR 363 15/5 17 Res	9 72						
	D.O. 126 29/5/16 D.O. 168. 79th Bn	21 20		AR 610 30/5	4 87				199 97		
		245 50			14 66			15			
June	PP	33		Can A.P.				15		117	
				AR 1104 26/6 17 Res	4 87						
				" 1740 27/6 17 Res.	4 87				208 23		
		33			9 74			15			
JUL 1918	"	34 10		AP				15			
				AR 1314 11/7/18 17 Res	4 87				222 46		
		34 10			4 87			15			
AUG	"	34 10		AP				15			
				AR 1105 4/8 4 CCRB	3 54						
				614 16/8 88	3 54						
				Q 4005 6/4 66	3 45				230 64		
		34 10			10 89			15			
Sept	"	33		AP				15			
				648 8/9 12 DR	3 54						
				450 14/9 "	3 54				241 53	114	
		33			7 14			15			

OVER

NUMBER 150573 RANK Private NAME SCOTT John

Month 1918	PARTICULARS	Cr. 1.	Cr. 2.	PARTICULARS	Dr. 1	Dr. 2	Dr. 3.	Dr. 4.	BALANCE	DEFERRED	SEPARATION
Oct	Balance Forward								241 53	117	
	P.P	34 10		C.A.F				15			
				A.R.827 5.10. 12 Bde	3 73						
				2034 15.10 12 "	3 73				258 17	9/4	
		34 10			7 46			15			
Nov	P.P.	33 -		912 5.11. 12 Bde.	3 73						
				C.A.F.	11 19			15 -			
				1052. 20.11. ✓	13 06						
				1148. 3.12. ✓	3 73						
Dec	✓	34 10		C.A.F.				15 -			
				1254 14.12. ✓	3 73						
Jan	✓	34 10		C.A.F				15 -	285 12		
		101 20			24 25			45 -			
Feb.	✓	30 80		C.A.F				15 -			
				1341. 1.1. 12 Bde	3 73						
				1548. 23.1. ✓	18 66						
				1440. 17.1. ✓	3 73						
Mar	✓	34 10		C.A.F				15 -			
				1746. 15.2. ✓	3 73						
				1921. 2.3. ✓	3 65						
				2031. 15.3. ✓	3 65						
				2095. 21.3. ✓	3 65				279 22		
		64 90			40 80			30 -			
Apr	✓	33 -		C.A.F				15 -			
May	✓	34 10		L.C.539. 27.3. 12 Bde	97 33						
	Int on Def Pay	10 75		2108 29.3. ✓	5 48						
				C.A.F				15 -	224 26		
		77 85			102 81			30 -			
				2812. 7.5. F.C.C.	73 -				151 26		
					73 -						

P.O.S. Loan 31.5.19 £78 85 Bn

Army Form B. 103. Sheet — II Regimental Number 150573.

Casualty Form—Active Service.

Regiment or Corps 85th Can. Inf. Battn.

Rank Pte. Surname Scott Christian Name J

Religion ..... Age on Enlistment ..... years ..... months

Enlisted (a) 5-9-15 Terms of Service (a) ..... Service reckons from (a) 5-9-15

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.

W. S. B. CLASS. A.

Report: Date	Report: From whom received	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
		Embarked ...			
		Disembarked ...			
					DO. No. 73 d/-20-7-18.
12-7-18	C. I. B. D.	T. O. S. & 5 TH BN ON ARRIVAL	FRANCE	12-7-18	N. R. A. 705.
24-7-18	C. I. B. D.	S. O. S. TO C. C. R. C.	FIELD	24-7-18	N. R. D. 1324.
24-7-18	C. C. R. C.	T. O. S.	"	24-7-18	N. R. A. 1136.
6-8/18	C. C. R. C.	S. O. S. TO UNIT	"	6-8/18	N. R.
17-8/18	UNIT	JOINED UNIT	"	14-8/18	B. 213
29-3-19	Do	Granted 14 days leave	U. K.	27-3-19	" Pt. II DO 26 d/-11 4/19.
19.4.19	Do	Rejoined		14.4.19	"
		Proceeded to England.		29 AVR 19	
				A. G. Carson	
			Capt.	for Lt-Col., A. A. G.	

(a) In the case of a man who has re-engaged for, or enlisted in Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.

(b) Signaller, Shoeing-Smith, &c

(17591.) Wt. W 1887—P 1124. 1,000,000. 6/18. D & S. Form B/103. (E. 1256.) [P.T.O.

Canadian Section, 4th Hq. 3rd Echelon, B. E. F.

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				
31-5-19		S. O.S. Om. F. C. Pt II 22			
		PROCEEDED TO CANADA	A J McLeod Lt for Adjutant, 85th C.I. Bn., B.E.F.		
	31-5-~~16~~ 19	T. O. S. No. 6 D. D. from O/S and posted Disp. Sta. B. Hfx. DO			168
	15-6-19	S. O. S. on Discharge			168
		R.S. Bellman Capt Lieut. Officer i/c Records No. 6 D.D.			

R—122

WB A.C.

17th Bn

Rank Ast Sergt. Name SCOTT, John. Reg'l No. 150573,

Unit 79th. Bn. If in perm. Corps, What Unit? Brandon, Man. Married or Single Single.

Place and Date of Enlistment Sept. 5th. 1915. Place of Birth Morpeth, Morthumberland.

Name and Address, Next-of-Kin Mrs. L.McMorn,

Morpeth, England. Relationship Sister.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

I

W/E. R.B. No. 11151
File R.L.
Category OR. CAN

Report. Date.	Report. From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS. Taken from Official Documents.
		Arrived in England	S.S. Lapland	4 MAY 1916	
6/7/16	79th Bn	App. Acting Corp.	E Sandling	5/5/16	Pt II S O #163.
29.5.16	79th	To be act'g sergt.	E Sandling	a/sgt 29.5.16	Pt II D.O. #126 & #168
26/6/16	"	Returned from command P.T. & B.F. Course.	" "	24/6/16	" " #153.
26/6/16	"	Proceeded on command to Epsom as Instructor	" "	26/6/16	" " #153.
12/7/16	"	S.O.S. on transf. to 17th Bn.	" "	12/7/16	" " #169.
12.7.16	O.C. 17th	Taken on strength.	" "	12.7.16	" " 195
2.8.16	OC Epsom	Attached to CCW	Epsom	26.6.16	P II O 160
27.3.18	17th	S.O.S. to NSRD & attached ~~Gt. to C.O.H. Epsom~~		26.6.16	— 73
9.5.18	M.C.H.P.	~~[illegible]~~	Epsom	30.4.18	— 129
1.5.18	17th	TOS from Can. Army Gymnastic Staff. Hqs. School of P & B.T. Garrison Gymnasium S'cliffe	a/sgt do	30.4.18	— 103

cancel B3

COPIED

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.
3.5.18	17th Res	Reverts to Ranks Surplus to Est.	Brphott	a/sgt	3.5.18	Pt II O. 105
12.7.18	—	SOS to 85th Bn Open	—	Pte	11.7.18	— 163 & 73 dd 20.7.18 85th Bn
6-5-19	85 Bn	Proc to England	La Havre	pte	29-4-19	- 32
30-4-19.	F. Wing C.C.C.	T.O.S. from 85th Bn	Brhott	"	30-4-19	DO #17
		Racing 78-B-45 dy 31.5.19.				
10-6-19	-"-	SOS to Canada	-"-	"	31-5-19	-23,

16 JUL 1918

COPY Archives COPY

War Service Badge
Class "A" No. 24771

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

D.A.B.
D.G. 1

1. No. 150573
2. Rank. Pte
3. Name. Scott John
4. Unit. 85th Bn.
5. Date of Discharge JUN 15 1919 Place Halifax.B.
6. Reason for Discharge Demobilization.
7. Authority. R. O. 1420
8. Proposed Residence after Discharge Brandon, P.O. Man.

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.?

J. Scott
Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

HALIFAX, N.S. JUN 9 1919
Place

Date

Signature O. C. Dispersal Station "B" Major
(O. C. Discharging Unit.)

M.F.B. 218a—300M.-11-18—1772-89-113.

LIST OF DISCHARGE DOCUMENTS.

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

1. Triplicate Attestation Paper (M.F.W. 23), or
   Particulars of Recruit (M.F.W. 133).
2. Casualty Form (A.F.B. 103),
3. Medical History Sheet (M.F.B. 313 or A.F.B. 178),
4. Proceedings of Med. Board (M.F.B. 227 or M.F.W. 129)
5. Dental Certificate (C.A.D.C. 5009a).
6. Field Conduct Sheet (A.F.B. 122.)
7. Proceedings on Discharge (M.F.B. 218a)
8. Discharge Certificate (M.F.W. 39)
   (Enclosed in special envelope (260M)),
9. Copy of Discharge Certificate (M.F.W. 39a).
10. Dispersal Certificate (C.D. 3).
11. Equipment and Clothing } Statement Q.M.G. Form (D.O.S. 2),
12. Last Pay Certificate (P. 851).
13. Pay Book (A.B. 64),
14. War Service Gratuity (Form M.F.W. 2595),
15. Sundry Documents.

Group .....

Checked by No. .....

.....

Date 30 MAY 1919

THIS FORM WILL BE USED FOR ALL RANKS

MEDICAL HISTORY OF AN INVALID

12

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 Bramshott DATE 9. 5. 19

1. 1 (a) Unit 85th Bn. (b) Regimental No. 150573 (c) Rank Pte.

(d) Surname SCOTT (e) Christian name John.

(f) Home address Brandon - Man

(g) Next of Kin Mrs J. MacMorra (h) Relationship Sister

(i) Address of Next of Kin Montpelier Northumberland. Eng.

2. Age last birthday 31 Date of birth 28 June 1887

3. Enlistment, or Appointment (if an Officer) (a) Place Brandon (b) Date 5. 9. 15

4. Personal description:

(a) Height 5' 7" estimated (b) Weight 170 (stripped) (c) Complexion Fair

(d) Colour of hair Brown (e) Colour of eyes Blue (f) Identification marks, Scars, etc. Scar on chin & mole on forehead (left)

5. Former trade or occupation Farmer.

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
	3.	224.

	Periods	
	From	To
Canada	5. 9. 15.	24. 4. 16.
England	24. 4. 16.	12. 7. 18.
France or other theatres of War	12. 7. 18.	4. 5. 19.

7. Original disease, or injury Varicocele Left.

(a) Date of origin Some months ago (b) Place of origin France

(c) Cause Anatomical

M. F. B. 227.

400M.—11-18.
1772-30-117.

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.)

Varicocele no disability.
Varicocele veins left spermatic cord

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.)

Moderate sized left varicocele.
He states that it gives no inconvenience.

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

Nervous System No — Cardio-Vascular System No (If pulse rate is abnormal, B. P. will be taken.) — Genito-Urinary System No (Albumen and Sugar will be excluded.)

Special Senses No — Respiratory System No — Integumentary System No

Disturbances of Mentality No — Digestive System No — Muscular System No

Osseous and Joint Systems No — Any other general condition No

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

Varicocele developed six months ago. Has given no trouble up to the present.

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*).)

Blood poisoning R. hand four years ago.

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

Scar on right shin from gas burn.

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.)

n a.

12. Was the disability caused, or aggravated; (*a*) by intemperance, or improper conduct; or (*b*) by unreasonable refusal to accept treatment? (a) No (b) 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~~ N.A Month

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

Nil.

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)

No

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

(If not, briefly state why)

17. Recommendations

n.a.

John D. Russell Capt

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 John Scott 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 nothing

B.H.

J Scott Rank. Pte

Signature of invalid examined.

B.H.

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.

Yes

19. Is the invalid fit for

(a) General service,	(Category A)	(Yes ~~or No.~~) Category A
(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.)

Boarded Auth A.G. 90838 J 11-11-18

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

D. Nathan Capt. President.

PLACE Bramshott

R. K. Johnston Capt } Members

DATE 9-5-19

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

I. H. McKenzie Capt
for Assistant Director of Medical Services.

DATE 9/5/19

APPROVED BY

Director-General of Medical Services.

DATE.....

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

02046

Date of Assignment May 11/16

S

RATE OF SEPARATION ALLOWANCE

Bank Account

RATE OF ASSIGNMENT

15			

92258 HM

PARTICULARS OF SEPARATION ALLOWANCE

No. 150573

Rank L/cpl Promoted Reverted Discharge

Soldier's Name John Scott

Battalion A Co. 79 Batty

Beneficiary

Relationship

Address

Credit

PARTICULARS OF ASSIGNMENT

Name Imperial Bank

Address Brandon Man

Change of Address

1

2

3

4

Date 1917		Cheque No.	Amount S/A	Amount A/P	Total		REMARKS 16406-J-239
Dec 31		—		300	300	✓	
Jan/18	M	71477		15	15	✓	
Feb.	K	72312		15	15	✓	
Mch.	S	92725		15	15	✓	
Apl	S	11419		15	15	✓	
May	V	19432		15	15	✓	
June	U	25335		15	15	✓	
July	E	24764		15	15	✓	
Aug.	U	37363		15	15	✓	
Sept.	X	47302		15	15	✓	
Oct.	L	51802		15	15		
Nov.	X	59606		15	15		
Dec.	I	68694		15	15		
Jan.	G.	72688		15	15		
Feb.	H	81435		15	15	✓	
Mar.	C.	88404		15	15	✓	
Apr.	S.	4814		15	15	✓	
MAY	O	6228		15	15		
JUNE	P.	9082		15	15		
					570	30-6-19	

A/c Closed

Ret'd per ADRIATIC

Date 8-6-19 MD 6

Clerk JPL 18-6-19

M.R.O Destroy L.P. 93862 JUD

A STENCIL HAS BEEN MADE FOR THIS ACCOUNT

M. F. W. 128.
400M.—6-17—1772 39-1141
L. L. 22320—M. & D. 7993.

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

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

M. F. W. 128.
400M.—6-17—1772 39-1141
L. L. 22320—M. & D. 7993.

S. S. adriatic 8/6/19

AUDITOR 61 PAYMASTER

PROMOTIONS, REDUCTIONS AND REVERSIONS AFFECTING DAILY RATE OF PAY AND ALLOWANCES

M. OR S. | REGT. No. 150573 | RANK Pte. | NAME (IN FULL) Scott. John. (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN — RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? — DATE EFFECTIVE

TO WHOM PAID — RELATIONSHIP

ADDRESS

LPC

PARTICULARS	EFFECTIVE DATE	AUTHORITY
Tons	31-5-19	Leo. 168

ORIGINAL UNIT C.E.F. 79th Bn. | IF IN P.F. WHAT UNIT? | PLACE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

DATE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

ASSIGNED PAY $ 15.00 ✓ | DATE EFFECTIVE 1.7.19

PAYABLE TO Imperial Bank of Canada | RELATIONSHIP

ADDRESS Brandon Man.

ANY CHANGE IN ASSIGNEE OR ADDRESS ✓

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE

DISCHARGED PLACE Halifax. DATE JUN 15 1919 REASON Demob. AUTHORITY Leo. 191- IF ENTITLED TO POST DISCHARGE PAY

Adjt

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	C.		C.	TOTAL CREDITS $	C.	ACQUITTANCE ROLLS COL. No. 1 NO.	DATE	COL. No. 2 NO.	DATE	COL. No. 3 NO.	DATE	CASH PAYMENTS COL. No. 1 $	C.	COL. No. 2 $	C.	COL. No. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.		C.	TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.	136 PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT																																			Bal. b/f. PC.
31/5/19.							151	26																											
18/6/19	15	1/-	16	50	35 70				272	76							487	50	247	89			15	00							272	76			W.S.G. & Clo. Alice. Payson Bahop x Dw CK D.76879 memo as of W.S.G.
					W.S.G. S.A.																		WAR SERVICE GRATUITY. W.S.G. S.A.												
183 days	✓				420 00	✓			420	00													70	00											P. Pays. W.S.G.
																							70									280-		#891538 23-7-19
																							70									210		H 1119785 14-8-19
																							70									140		H 1136404 11.9.19.
																							70									70		H 1507115 7-10-19
																							70									nil		H 1747484 7-11-19
			420-				420-																420-								420-				

All payments made.
H.K. Allum Lt. 13/11/19

JUL 18 1919

200M-3-19.—L. L. 58786-M. & D. 9985.
M. F. W. 2596.
1772-39-1390.

2nd Original.

MEDICAL HISTORY SHEET.

12

Surname SCOTT. *Christian Name* John.

Examined { on ..... day of ..... 191 ..... at Bramshott Hants.

Birthplace { City or Town Morpeth County North d. England

Apparent age 28.

Trade or occupation Hosp. Orderly

Height 5 Feet 7½ Inches.

Weight ..... Lbs.

Chest measurement { Minimum 37 inches. Maximum expansion 40 inches.

Physical development .....

Small-Pox Marks .....

Vaccination Marks { Arm Right. Left. Number .....

When Vaccinated last .....

(*a*) Marks indicating congenital peculiarities or previous disease .....

(*b*) Slight defects but not sufficient to cause rejection .....

Approved by A. C. Wilson

Rank Capt. M.O.

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

Date.	Result.	Vaccinations.
5.1.16	Good	Capt Jackson. M.O.
		M.O.
		M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.
15.18	JAB 1	A. C. Wilson Capt. M.O.
		M.O.
		M.O.

Enlisted on 5 *day of* September 1915 *at* Brandon, Man.

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	79th O Sea Bn. 17th Res Bn	150573.		15-9-16. 30-4-18.
Transferred to	do 85th Bn			11 JUL 1918

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
Bramshott	9-5-19	Varicocele	A R. K. Johnston Capt

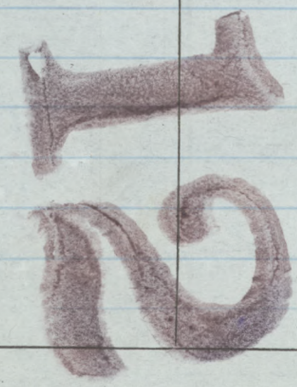
N. B.—This sheet to be disposed of in accordance with instructions in the Regulations for Army Medical Service, on the man becoming non-effective; the date and cause being stated on next page.

M. F. B. 313.

400M.—1-16.
H. Q. 1772-39-439.

Surname Scott Christian Name John

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.



Original

Army Form B. 178

To be used (a) for recruits enlisting direct into the Regular Army, and (b) for men of the Territorial Force when they are admitted to Hospital. Army Form B. 178[A] to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY OF

Surname Scott. *Christian Name* J.

TABLE 1.—General Table.

Birthplace { Parish ..... County .....

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

Declared Age .....years.....days.

Trade or Occupation.....

Height.....feet.....inches

Weight .....lbs.

Chest Measurement { Girth when fully Expanded .....inches; Range of Expansion .....inches

Physical Development .....

Vaccination Marks { Arm..... RIGHT | LEFT; Number ..... | .....

When Vaccinated .....

Vision { R.E.—V = ... L.E.—V = ...

(a) Marks indicating congenital peculiarities or previous disease—

.....

.....

(b) Slight defects but not sufficient to cause rejection—

.....

.....

Approved by .....

Rank .....

Medical Officer.

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

	Corps	Regtl. No.
Joined on enlistment	49th Batt.	150573
Transferred to		

Became non-effective by .....

.....

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

(*Signature*).....

(*Rank*).....

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

TABLE IV.—Service Table.

Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation

12

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

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				