[redacted] Field Company Canadian Engineers

ATTESTATION PAPER.

No. [redacted]

Folio. 200525 D

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

Triplicate

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

94

1. What is your surname? ..... SCOTT
1a. What are your Christian names? ..... Sydney Dunn
1b. What is your present address? ..... 395-14th ave West Vancouver B.C.
2. In what Town, Township or Parish, and in what Country were you born? ..... St Johns New Brunswick Canada
3. What is the name of your next-of kin? ..... S. D. Scott
4. What is the address of your next-of-kin? ..... 395-14th ave west Vanc B.C.
4a. What is the relationship of your next-of-kin? ..... Father
5. What is the date of your birth? ..... April 3rd 1890
6. What is your Trade or Calling? ..... Newspaper man
7. Are you married? ..... no
8. Are you willing to be vaccinated or re-vaccinated and inoculated? ..... yes
9. Do you now belong to the Active Militia? ..... no
10. Have you ever served in any Military Force? If so, state particulars of former Service. ..... 3 years Ottawa Collegiate Cadets 43rd D.C.O.R 3 years
11. Do you understand the nature and terms of your engagement? ..... yes
12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE? ..... yes

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Sydney Dunn Scott, do solemnly declare that the above are answers made by me to the above questions and that they are true, and that I am willing to fulfil the engagements by me now made, and I hereby engage and agree to serve in the **Canadian Over-Seas Expeditionary Force**, and to be attached to any arm of the service therein, for the term of one year, or during the war now existing between Great Britain and Germany should that war last longer than one year, and for six months after the termination of that war provided His Majesty should so long require my services, or until legally discharged.

(D) Syd Scott X (Signature of Recruit) OK

Date Sept 14th 1916. A. Cullarton (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Sydney Dunn 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. OK.

(D) Syd Scott (Signature of Recruit)

Date Sept 14th 1916. A. Cullarton (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 Vancouver this fourteenth day of Sept 1916.

C. C. Cunningham (Signature of Justice)

M. F. W. 23.
600M.—2-16.
H. Q. 1772-39 841.

6V 155 453 116/9551

APPLICATION OF N.C.O'S TO REVERT TO THE RANKS.

I. 205250 a/2/corp. Scott S.D. have the honour to apply for permission to revert to the ranks on account of transferring to A Coy.

S.D. Scott

Recommended,

Major, C.E.,
Commanding, "B" Co'y., C.E.T.D.

Approved,

Major, C.E.,
Commanding, Canadian Engineers Training Depot.

Date July 10th 1917.

Religious denominations.	
	Presbyterian
	Methodist —
	Baptist or Congregationalist
	Roman Catholic
	Jewish
	Other denominations (Denomination to be stated.)

CERTIFICATE OF MEDICAL EXAMINATION.

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

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

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

Date Sept. 14 1916.

Place Vancouver.

J. Butler Capt. CAMC
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.

Sydney Dunn 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.

J. Cade Ward MAJOR C. E. D. S. O. Fort Garry Canadian Engineers (Signature of Officer)

Date December 19th 1916.

Description of Scott. Sydney. Dunn on Enlistment.

Apparent Age 26 years ..... months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

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

Chest measurement.
- Girth when fully expanded ..... 35 1/2 ins.
- Range of expansion ..... 3 ins.

Complexion ..... Light

Eyes ..... Brown

Hair ..... Brown

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

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

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

1 Vac L

Brown pigmentation of trunk + arms

Scar back of L forefinger

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 Sept. 14 1916.

Place Vancouver.

H. Butler Cassidy
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.

Sydney Dunn 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.

J. Cade Ward MAJOR C. E.
O. C. 6th Field Company Canadian Engineers (Signature of Officer)

Date December 19th 1916.

Desc

Apparent

(To be determ
lations fo

Height ....

Chest measurement. { Girt
Ran

Complex

Eyes .....

Hair .....

Ch

9-7-19
PAP

REGIMENTAL DOCUMENTS

NAME SCOTT. Sydney Dun REGT. NO. 2005250. UNIT 10 E. S. 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	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)					
	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
	DENTAL HISTORY SHEET (M.F.B. 465)					Category
1	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					Demob.
	MEDICAL EXAMINATION (M.F.W. 129)					
	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
	LAST PAY CERTIFICATE (M.F.W. 44)					
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)			09521		
2/	Prise					2
1	[illegible]					
1	[illegible]					
1	[illegible]					4/9 - 26
1	[illegible]					11 - 26

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

NAME Scott. S. W. REGT. No. 2005250

RANK AND UNIT L/C. 10 C.E.R.

NEXT OF KIN

CABLE	
No.	DATE

NATURE OF CASUALTY

M. F. W. 42—100M.—8-18.
H.Q. 1772 39-893.

LIST NO.	HOSPITAL	DATE OF ADMISSION	REMARKS
9369-1.	12 State St Pol.	3-11-18	Boils
9378-3.	Nurse. W duty.	12-11-18	" "

SURNAME. Scott

CARD No. 615252

CHRISTIAN NAMES Sydney Dunn.

S.O.S. 20-6-19 Demob.

FOLL.

A.D. 1920 21/6/19

REGL. No. 2005250 RANK ~~Sapper~~ 2nd Cpl.

UNIT Can. Eng. Training Depot (247th. R. D.)

FORMER CORPS Nil

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL Scott S. D.

RELATIONSHIP TO SOLDIER Father

ADDRESS 395 - 14th Ave., West, Vancouver, B.C.

COUNTRY OF BIRTH Canada St. John N. B. DATE April 3rd 1890.

PLACE OF ATTESTATION Vancouver, B.C. DATE Sept. 14th, 1916.

M/L 13-6-19 3417 L/Cpl

L. L. 10437. M. & D. 7253.

M. F. W. 22. 100M.-21.15. H. Q. 17 2-39-339.

Sailed from Halifax per S.S. Justicia 3-3-17.

MARRIED SINGLE yes WIDOWER

TRADE OR CALLING Newspaper Man RELIGION Methodist

DESCRIPTION.

APPARENT AGE 26 YEARS MONTHS

HEIGHT 5 FEET 10 INCHES

CHEST MEASUREMENT 35 1/2 INCHES EXPANSION 3 INCHES

COMPLEXION Light EYES Brown HAIR Brown

DISTINGUISHING MARKS 1 vacc L. Brown pigmentation of trunk and arms.

MEDICAL EXAMINATIO PLACE Vancouver, B.C. DATE Sept. 14th, 1916.

Present Address 395 - 14th Ave., West, Vancouver, B.C.

Reg. No. 200.5.250 Name Scott. S. D

Rank L/Cpl Corps C.E. Age 26 Service 6/12

Ledger No. 69 Serial No.

HOSPITALS	DATE	DIAGNOSIS
Mil Montreal	10-3-17	C. Anemia
Duty	16-3-17	

P. T. O.

HOSPITALS	DATE	DIAGNOSIS

M. F. W. 2553.
50M-6-19.
1772—39-1332.

Form R. 149.

Name Scott. Sydney Dunn. Rank L/Cpl. Reg. No. 200250.

Unit 10th Bn. C.E.

Next of Kin Canada

Date 1918	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
3-11-	12 Sty H. St. Pol		Boils	A369		5431-13
12-11-	Disch to Duty		do	A377		5-6-19-11

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

E. M. W.

Number 2005250 Rank 2nd/Cpl

Surname SCOTT

Christian Name Sydney Dunn

Units C. E. Theatre of War France

Date of Service 31/10/17

Remarks

Latest Address [redacted]
Vancouver B C

Roll No B

200m.-2-21.M. Page 1117

Next of kin

Address on leave

Address on discharge

Transportation issued Yes / No Date Character on discharge

Previous occupation Date and place of enlistment

Diagnosis Date of Medical Boards

Date	Remarks

DESP. MAR 6 1922
REGT. NO. W 13284

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

Surname	Christian Name or Names	Reg. No.
SCOTT	S.D.	2005250

Rank: L/Cpl.

Unit: 10 CEB ~~XXQQEB~~

Cas. List.		
	12 Stat. St. Pol.	3-11-18
12-11-18 A369	Boils.	
22-11-18 A378	Do to Duty	12-11-18

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.

W. S. B. Class A.

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

M. F. W. 54. (A. F. B. 103.)
350m.—5-16
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps ENGINEER TRAINING DEPOT

Regimental No. 2005250 Rank Sapper Name Scott Sydney Dunn

C. E. F.

Enlisted (a) 14/9/16 Terms of Service (a) Dep War — Service reckons from (a) September 14th 1916

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) Newspaper Man

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
15. 17-5-17	C.E.T.D.	Embarked. Disembarked. Taken on Strength of C.E.T.D. from Canada.	Canada England. Crowborough	3-5-17. 14-5-17 15-5-17	Part II Order No. 116.
6.6.17	C.E.T.D.	To be A/Cpl without pay while doing duty as Bdy	Crowboro	6.6.17	Part II Order No 134
11.7.17	C.E.T.D.	Reverts to rank & (Sapper) at own request.	Crowboro	10.7.17	Part II Order No 164
1 NOV 1917	C.E.T.D.	Struck off Strength of C.E.T.D. having Proceeded to C Pool France	Seaford	31/10/17	Part II Order No 234 Fred W. Tuck Lieut. C.E. Adjutant, C.E.T.D. for
2.11.17.	C.E.T.D.	To Le Havre		2-11-17	Ltr. 2/81

(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.

2005250 Scott. A.S.

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
11-11-17.	C&RL	L of t to 107th Co		11-11-17	NR. 63 P/88
Do.	Do.	T. O. S. Do		12-11-17.	Do. D/72.
1-12-17.	O.C.	James	Mint	27-11-17	B. 213.
6-12-17.	O.C.	Placed under stoppages to make good value of lost. properly lost by neglect. Knife, table, Fork & table. value 8¾D.			B. 289. P/2. 76.
			Died	29-11-17.	
		S. O. S. to 10th Battn C. E		29 5 18	D O. 28
		T. O. S. 10TH BATT C E		30 5 18	D O No 1
19/10/18	Oc 10 Bn.	To R. E. Bridging School		15/10/18	B 213
do	do	Appointed L/Cpl. Paid		11/10/18	B 213 D. O. 40 d/31-10-18
3/11/18.	12 Stat.	Boots		3/11/18	W 790
9/11/18.	OC.	Appointed a/2/Cpl. Paid		4/11/18	D. O. 45 d/20-11-18
12/11/18	12 Stat.	Boots	to Duty.	12/11/18	W 1810
16/11/18	10 Bn.	Reported		13/11/18	B 213
11/1/19	do	14 Days L. a/c Nice		24/1/19	D. O. 4 d/1919
8/2/19	do	Reported		24/2/19	B 213
5/4/19.	do	Confirmed 2/Cpl.		23/4/19	D. O. 23a/1919
				9/5/19	

Sub Camp Proceeded to

for Lt.-Col., A. A. G.
Canadian Section, G. H. Q. 3rd Echelon, B. E. F.

N.R.
Pt. 2 O.N.

OLYMPIC Southampton

WITLEY.

B.O.S. O.M.F.C. TO C.E.F.
PT. II ORDER No. DATED

OFFICER I/c RECORDS,
"O" WING C.C.C. WITLEY.

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

WAR SERVICE BADGE
CLASS "A" No.

THIS IS TO CERTIFY that No. 2005250 (Rank) 2nd Corporal
Name (in full) Sydney Dunn Scott enlisted in
the 6th Field Co. Can. Engrs.
CANADIAN EXPEDITIONARY FORCE at Vancouver B.C. on the 14th
day of September 1916
HE served in France - 10th Battalion C.E.

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 29 years.
Height 5'-11.- 10½ in
Complexion Dark
Eyes Brown
Hair Brown.

S.D. Scott
Signature of Soldier.

Marks or Scars Nose bridge tipped to left of median line.

Date of Discharge

No. 2 DISTRICT DEPOT
JUN 20 1919
TORONTO

E.G. Whitelaw Lt-
Issuing Officer.
For
O.C. No. 2 District Depot.

Rank

JUN 20 1919
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.

WAR SERVICE BADGE

CLASP "A" No.

C.A.D.C. 5069A Group 24

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) Scott S.D

REGIMENT 10th C.E. Bn. RANK 2nd Cpl. No. 200520

Date of Examination in England 23-5-19 | Date of Examination in France

Repair bridge

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 6. 14.
2. EXTRACTIONS
3. CROWNS
4. DENTURES
   - (a) Full Upper
   - (b) Part Upper
   - (c) Full Lower
   - (d) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT?

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

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

Signature of Dental Officer H A Simmons

2

M. F. W. 54. (A. F. B. 103)
500M.—9-16
H. Q. 177-30-0-0.

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

Casualty Form—Active Service.

Unit, Regiment or Corps .....

Regimental No. 200525 Rank 2/Cpl. C. E. F. Name Scott S. D.

Enlisted (*a*) ..... Terms of Service (*a*) ..... 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		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				
JUN 6 1919	O. S.	T. O. S. No. 2 DISTRICT DEPOT,	TORONTO 1919	PART II D. 172	
JUN 20 1919	S. O. S.	(DISCHARGED FROM H. M. S.)	No. 2 DIS. DEPOT,	PART II D. 172.	

W. C. Roberts
Lieut.
For O. C. No. 2 District Depot.

(*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				

To be made out in duplicate. H.Q. 54-21-23-53

24

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

INSTRUCTIONS.

(a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.

(b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.

(c) All questions, etc., must be answered.

(d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.

(e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

---

(1) Name of Overseas Unit which Soldier joins..... Canadian Engineers, ENGINEER TRAINING DEPOT

(2) Regimental Number 2005250

(3) Full Name of Soldier..... Scott Sydney Dunn

(4) Place of Birth..... St. John N B

(5) Are you married, or not ? ..... No

(6) If married, state,
(a) Full name of your wife..... —

(b) Present Postal Address.....

(7) Are you a widower ? ..... —

(8) Have you any children ?.....

If so, give number of boys and girls.....

Also their names and ages.....

M. F. W. 67.

500M.—9-16.
1772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive? Yes

If so, state name and address Snowden Dunn Scott 395 14th avenue West Vancouver BC

(10) Is your Mother alive? Yes

If so, state name and address Emma Wood Scott same address

(11) If your Mother is a widow —

Are you her sole support, or not? —

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

—

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

—

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

—

(15) Are you insured? Yes

If so, in what Company? Sun Life of Canada

Have you made arrangements for payment of your Insurance premium Yes

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

Alan Gimbell Lt C.E.

Officer Commanding.

Date January 29th 1917

ORIGINAL

MEDICAL HISTORY SHEET

~~2445~~ 200525

Surname Scott Christian Name Sydney Dunn

Examined { on 14 day of Sept. 1916 / at Vancouver

Approved by J Bullen 24

Rank Captain M.O.

Birthplace { City or Town St Johns / County New Brunswick Can

Apparent age 26

Trade or occupation Reporter

Height 5 feet 10 Inches

Weight 140 lbs.

Chest measurement { Minimum 32½ inches / Maximum expansion 35½ inches

Physical development Good

Small-pox Marks

Vaccination Marks { Arm Right Left / Number 1

When Vaccinated last 1907

(a) Marks indicating congential peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

Vision 20/20 Each Eye

20/20 S. 10/7 20/20

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
19.4.17		J Campbell Capt RAMC M.O.
		M.O.
		M.O.

Date TAB	Result	Anti-Typhoid Inoculations, Etc.
15/11/16	1cc bright 1cc	[illegible] PROV. LIEUT. C.A.M.C. M.O.
22/11/16	bright	M.O.
26-1-17	" Double	J Campbell Capt RAMC M.O.

Enlisted on 14th day of Sept 1916 at Vancouver BC

	Corps	Regt'l Number	Habits	Date
Joined on enlistment	6th Field Co Eng Canadian Engineers	200525 ~~2445~~		14-9-16
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

Station	Date	Disease	Result
VANCOUVER ST. JOHNS, P.Q.	DEC 19 1916 MAR 31 1917	Ft Ind	Lt Murphy Capt RAMC J Rankin Capt RAMC Ft D Downey Capt RAMC

WITLEY CAMP, SURREY. May 24 1919

Actly (Sd) J Campbell Capt

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

M. F. B. 313.
500M.—3-16.
H. Q. 1772-39-439.

J.Mo

Surname Scott Christian Name Sydney Dunn

STATION	Date of Arrival at the Station	Dates of Admission into Hospital			Dates of Discharge from Hospital			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
		Day	Month	Year	Day	Month	Year				
Saint Jean		10	3	16	16	3	17	Anemia	7	Recovered	W.A. Lecocq

Form R 122
2353—100M—9-12-16.

G.C. Rank Name SCOTT. Sydney Dunn. Reg'l No. 2005250.

Unit 24th Dft C.E. to C.E.T.D. If in perm. Corps, What Unit? Married or Single Single.

Place and Date of Enlistment Vancouver. 14th. Sept. 1916. Place of Birth St. John. N.B.

Name and Address, Next-of-Kin S.D. Scott.

395. 14th. Ave., West, Vancouver. B.C., Relationship Father.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

N/E. B.B. No. 14803
File R.L.
Cate... CAN.OR

H. W. V., Ld.—9546-16.

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 14 5 17. S/S. JUSTICIA.				
15.5.17	C.E.T.D.	T.O.S	Crowboro.		15.5.17	P.H.D.O. 115.
6.6.17	—	To be A/L/Cpl without pay while doing duty with B Coy.	—	—	6.6.17	— A.F.B. 103 CHECKED 6th NOV. 1917
12.7.17	—	Reverts to Rank of Spr at own request.	—	—	18.7.17	— 164 Release Certificate
1.11.17	—	S.O.S. Fro Y Coast to C.E. Pool	Seaford	Spr	31.10.17	— 25 4 + T.O.S C.E.P. P.H. 81 d. 5.11.17
26.11.17	C.E.R.C.	S.O.S. To 10th Fld Co.	Field	"	11.11.17	— 88 T.O.S 107246 P.H. 80 72d 27 11/17
2.7.18	10th Fld Co.	O.S. from 10th Fld Co.	"	"	30.5.18	— 1 & 1076 28 9 27 8
31.10.18	"	Appointed L/Cpl. paid	"	"	1.10.18	— 40
20.11.18	"	Appointed A/2/Cpl. paid	L/C	Killed	4.11.18	" 45.
18.4.19	—	Confirmed as Actg. A/2/C	Le Havre		29.3.19	" 16

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.
15.5.19	P Wg C C/C	TOS FROM 10BnCE	10.5.19	DO 27	
12.5.19	10 Bn L.E.	Pro. to Eng	Hawk	3/Cpl 9.5.19	D.O. 29.
6-6-19	P. WgCCC	SOS TO CANADA	Witley	6.6.19	DO 44.

83-1-154. 6-6-19.

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY. * ENGLAND OR ~~CANADA.~~	SEPARATION ALLOWANCE. * ENGLAND OR CANADA.
EFFECTIVE DATE:- 1-5-17.	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.

Mr. G. Sallas
1 The Crescent Plymouth

Stopped & Ppd 1-7-19

NAME:- SCOTT Sydeny Dunn
NUMBER:- 2005250 K

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Spr
D.O. 40 31/10/18 10 bk	11-10-18	L. bk.
D.O. 45 20/11/18 do	4-11-18	A/2/bpl.
D.O. 23. 18/4/19 "	29/5/19	2/Cpl.

UNIT AND TRANSFERS

ORIGINAL UNIT:- C.G.T.D. 24th Draft
DATE ACCOUNT FIRST OPENED:- 1-5-1917.

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
	1-1-18.		4th D Engrs

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
~~28/4~~	~~236~~	~~Brussels 40~~	~~6 98~~				
~~12/5~~	~~3246~~	~~Pming £7~~	~~3 07~~				
			41 05				
						L 2 6 Bal Cr	10 63
						L 3 Bal Cr	51 68

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1 -	10		
	1 05	10		

PARTICULARS OF RENDERING NON-EFFECTIVE

Invested 5/11/19 Ref K. 8946 15/5/19 M.D. v Brampton

MONTH 1918	PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR. 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Mch 31	Balance Forwards								64 91		
Apl	Spr Pay	33 ..		* A16730 £3.1.8			15 .				
				AR 21. 1-10 4/18. 4th D.E.	4 46						
				" 72 15-20 4/18 —	3 57				74 88		
		33 ..			8 03		15 ..				
May	" "	34 10		A 81730.			15 .				
				AR 113. 1-10 5/18. 4th D.E.	4 46						
				" 152 15-20 5/18 —	3 57				85 95		
		34 10			8 03		15 ..				
June	" "	33 ..		B43725			15 .				
				AR 192 1-10/6 4DE	4 46						
				~~AR 268 20-6-18 10 C&B~~ Wdrn	~~5 35~~						
				AR 268 20-6-18 10 C&B	5 35				94 14		
		33 .			9 81		15 .				
July	P P	34 10		CK C 13428 £3.1.8			15 .				
				302 10 C&B 1.7.18	4 46				108 78		
		34 10			4 46		15 .				
Aug	Spay	34 10		C. 60040			15 -				
				AR 573 C.E. Serv 15/10	3 57						
				AR 585 10 C.E. 15-20/8	3 57				120 74		
		34 10			7 14		15 .				
Sept.	Spay	33 -		C 94598			15 -				
				AR 647 10 C.E. 10/9	3 57						
				" 726 do 20/9	3 57				131 60		Pte Agreed
		33			7 14		15 .				
Oct	Spay	34 10		D 44446			15 -				
	Dif in pay of L Cpl to Spr from 11/10 to 31/10/18 21 days @ 5	1 05		806 10 C.E. 12 15/10	3 73						
				905 do 38 20/10	11 19				136 83		
		35 15			14 92		15 .		over		

COMPILED BY C. Hollis
CHECKED BY Morgan

NUMBER RANK a/2 bpl. NAME

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
				Bal Forward					136 83		
Nov & Dec	L & Pay	7015		E 19447			15-		2 52 63		
				E. 20588 £ ~~3 0 5 8 8~~ 3-1-8			15-				
				1175 10 b.r. 20/11	13 06						
				1227 " 15/12	3 73						
				1331 " 31/12	3 73						
Jan	L & Pay	3565		F 28441 £3-1-8			15		177 11		
		10580			7057		45				
				1731 10 b.r. 15/1	373				7 44 96		
				2036 Paris 17/1	111 93						
				1159 10 b.E. 10/1	933						
				1070 Brussels 12/1	1866						
				F 68835			15-				
				aB 3753. D. Pouis 29/1	1399						
				1780 10 b.r. 28/2	373						
				S. 29537			15-				
				1911 " 15/3.	365						
				1990 " 9/3.	12 78 ~~13 35~~						
				2053 " 31/3.	365						
Feb & March	L/C Pay	6785							33 51		
		6785			18145		30				
Apl & May	L.C Pay	7015		a 31636 £3-1-8			15		103 66		
				36 " 15/4	349						
				130 " 15/4	349						
				May a 86833.			15-				
				June a 84834			15-		51 68		
				2736 " 27/4	698						
				3246 P. Moung 17/5	3407				1063		
		7015			4803		45				
				4894 " 20/5-	2433				1370		
					2433						

S.S. Canada 4/4/19
Sailing List 83 6E

P. 559

MARRIED OR SINGLE: Single

PLACE OF BIRTH: St John

NAME AND ADDRESS OF NEXT OF KIN: S. D. Scott

395. 14th Ave W. Vancouver Can.

RELATIONSHIP OF NEXT OF KIN: Father

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

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

REG'L NO. 200250 RANK Spr. NAME Scott. Sydney. Dunn.

IF IN PERMT. CORPS WHAT UNIT (UNIT C.E.F.D. 24th Batt.) TRANSFERRED TO 4 Dw Eng DATE 1/1/18 AUTHORITY GR 3/11/17

PERMANENT FORCE ALLOWANCES TRANSFERRED TO DATE AUTHORITY

PLACE OF ATTESTATION Vancouver. TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION 14th Sept 1916. TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY $15.00 DATE EFFECTIVE 1/5/17.

PAYABLE TO Mrs E Saltau 1. The Crescent. Plymouth RELATIONSHIP England

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 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
																															19 70				L.P.C. Canada.
May.	31	1½	37	20											37 20							A9008					15.		15	41 90				
June	30		33												33			1150	31/5			A87381.		24 33			15.		39 33	35 57				
July	31		34	10											34 10							A73385		9 73			15.		15	54 67				
Aug			34	10											34 10	149	31/					A156393		9 73			15		34 46	52 31				
Sep			33	.											33	855	15/6					A183842		9 73	24 33		15		49 04	38 24		2/12		
																654								9 73	9 74									

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	CR. 3	DR. 4	BALANCE	DEFERRED PAY	SEP. ALLCE. ENG.
6dt		~~38 24~~							38 24 2/12		
				A24838			15				
				1006 15/9 9 73							
	Spro Pay	34 10		1134 C.E.F. Witherham 30/9 9 73							

2000250 Pte Scott J. D. 15.00/100 1-5-17.

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
MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS										DR. 1	DR. 2																	DEFER. SER. FED. ALLCE. PAY ENS.	BALANCE			
Oct	Forward	31 10		Oct Furlough										19 46		15	28 21																	
		31 10												19 46		15	31 88																	
Nov	Pay	31																																
				59054												15																		
				AR 1225 14/10/17										9 73																				
				B 86 fq 2												15																		
				AR 1305 31/10/17										9 73																				
Dec	Pay	34 10		AR 1354 14/11										12 49																		43 03		
		67 10												31 95		30																		
Jan 1918	"	34 10		C 19526												15																		
				AR 821 4/1/18										4 46																		57 67		
		34 10												4 46		15																		
Febry	"	30 80		C 81325												15																		
				AR 897 "										15/1/18 3 57																				
				AR 955 "										1/18 4 46																				
				AR 998 "										15/1/18 3 57																				
		30 80		AR 1036 "										~~4 66~~ 1/2/18 4 46		15																57 41		
														16 06																				
March	"	34 10		D 21727												15																		
				AR 1084 "										20/2/18 3 57																				
				AR 1135 "										1/10/3/18 4 46																				
				AR 1188 "										18/3/18 3 57																				
		34 10												11 60		15																64 91		

Group 24

WAR SERVICE BADGE
CLASS "A" NO 200053

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

D. A. I
O. G. 19

1. No. 2005250

H M T OLYMPIC
Sailed Sthmpton 6 6 19
Arr Halifax 6 12 9

2 Rank. 2nd CPL.

3. Name. SCOTT SYDNEY DUNN

4. Unit. 10th BATT CANADIAN ENGINEERS

5 Date of Discharge JUN 20 1919 Place Toronto

H

6 Reason for Discharge Demobilization

7. Authority. No. 2. D.D., Part II, D.O.No. 172

8. Proposed Residence after Discharge

S. D. Scott 375 14th Ave W.
Vancouver B.C.

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.?

S D Scott
Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place No. 2 DISTRICT DEPOT

Date JUN 20 1919

TORONTO

Signature R Whitelaw Lt
(O. C. Discharging Unit.)

M.F.B. 218a—300M.-11-18—1772-39-113.

K.C. 3/20

For
O.C. No. 2 District Depot.

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 13

Checked by No. 1 [illegible]

Date 5/6/19

original.

THIS FORM WILL BE USED FOR ALL RANKS

MEDICAL HISTORY OF AN INVALID

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 Witley Camp DATE May 24/1919

1. 1 (a) Unit 10th Can Engrs (b) Regimental No 2005250 (c) Rank 2nd Corporal

(d) Surname Scott (e) Christian name Sydney Dunn

(f) Home address 395 Fourteenth Ave W. Vancouver BC.

(g) Next of Kin S. D. Scott (h) Relationship Father

(i) Address of Next of Kin 395 Fourteenth Ave W. Vancouver BC,

2. Age last birthday 29 Date of birth April 3-1890

3. Enlistment, or Appointment (if an Officer) (a) Place Vancouver (b) Date Sept 14 1916.

4. Personal description:

(a) Height 5' 10½" (b) Weight 145 Est (stripped) (c) Complexion Dark

(d) Colour of hair Brown (e) Colour of eyes Brown (f) Identification marks, Scars, etc. Nose bridge tipped to left - 2 mid-arm line.

5. Former trade or occupation Journalist

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
	2	238

	Periods	
	From	To
Canada Can. Engineers	Sept 14 - 1916	May 3 - 1917
England	May 14 1917	Oct 31 1917
France or other theatres of War Can Engrs	Oct 31 1917	May 12 1919

7. Original disease, or injury BOILS

(a) Date of origin Oct 1918 (b) Place of origin France

(c) Cause Unknown.

M. F. B. 227.

490m.—11-18.

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.)

Debility. Man feels easily fatigued.

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.)

Heart- action shows no abnormalities. Lungs clear. Multiple Scars present over right- shoulder, right- side and left- Buttock all in healing condition. Man's general condition fair. Man says he becomes tired easily when [illegible] duty.

(*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..nil.. Cardio-Vascular System..nil.. (If pulse rate is abnormal, B. P. will be taken.) Genito-Urinary System..nil.. (Albumen and Sugar will be excluded.)

Special Senses..nil.. Respiratory System..nil.. Integumentary System..nil..

Disturbances of Mentality..nil.. Digestive System..nil.. Muscular System..nil..

Osseous and Joint Systems..nil.. Any other general condition..Urine normal

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

During October 1918 Multiple Scars appeared on back of neck and on Shoulders these have spread and multiplied to the present time. Man says he has felt rather weak during this interval

10.—(*a*) (Here give a comp... to or since enlistme...

11.—(*a*) Did the disal...

(*b*) If so, has it b... condition at time of...

12. Was the disability...

refusal to accept...

The regimental doc...
(If the answer is in the af... this question, condu...

13. What is the proba...

than one?...

14. Treatment (Case rep...

15. Is further treatme...
(If ...

16. Can the former tr...
(If ...

17. Recommendations...

(Sections 7, 8, 9 and 1...

I, the undersigned... present condition read,...

I complain in addition...

Weakness—slight, moderate,
dy, or of some of its parts, for

fatigued.

hysical examination. Import-
" must be recorded in Section
be stated first, then subject

nalities.

ls present-
side
ding
dition fair
) cataly

(a) above ?

System.....nil.....
ugar will be excluded.)

stem.....nil.....

System.....nil.....

ve

to Bails
and an
hand
ment-
ild-
interval.

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).)

10.3.17 Anaemia

3.1.18 Boils

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

multiple Boil scars over body.

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 ?.....(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 ? Six months.

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

Records not available.

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit ? no
(If the answer is "yes" state nature of treatment required and probable duration)

16. Can the former trade or occupation be resumed ? Yes
(If not, briefly state why)

17. Recommendations

M. A. Oulton Capt- RAMC
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 Sydney D. 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

2005 25 0

2nd Lt Scott SD 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.

Yes

19. Is the invalid fit for

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

R.F.C. until of Tuberculosis 8 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.

WITLEY CAMP, SURREY.
May 24 1919

PLACE.....

DATE.....

A. Archibald Capt. *President.*

J. D. Macdonald Capt. Canada
} Members

TO BE COMPLETED WHEN TREATMENT IS REFUSED

I, the undersigned.....understand the nature of the treatment which it is recommended that I should undergo and refuse to accept it.

Witness..... Signed.....

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

A.D.M.S. HEADQUARTERS
CANADIAN CORPS CAMP
24 MAY 1919
WITLEY SECTION.

PLACE.....

DATE.....

President.
} Members

APPROVED BY

Assistant Director of Medical Services.

DATE.....

APPROVED BY

Director-General of Medical Services.

DATE.....

"OLYMPIC" 12.6.19

DISPERSAL "T"

AUDITOR | PAYMASTER

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

M. OR S.

REGT. No. 2005250 RANK 2/Cpl NAME (IN FULL) SCOTT, S.D. Sc. 5760

(BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN — RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? — DATE EFFECTIVE

TO WHOM PAID — RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY
		D

ORIGINAL UNIT C.E.F. 4 D. Engineers

IF IN R.F. WHAT UNIT? Royal Bank Can. Vancouver B.C.

PLACE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

DATE OF ATTESTATION 14-8-16 — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY $ 15.00 — DATE EFFECTIVE 30-6-19 closed by England.

PAYABLE TO Mrs G. Saltam — RELATIONSHIP — ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS The Crescent, Plymouth Engl.

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

DISCHARGED — PLACE Toronto — DATE 20.6.19 — REASON Demob. — AUTHORITY D.O.172 — IF ENTITLED TO POST DISCHARGE PAY yes

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.	OTHER CREDITS $	OTHER CREDITS C.	$	C.	TOTAL CREDITS $	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.	BALANCE CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT																																					T.O.S. 6.6.19 D.O.172 SUBS
31-5-19							10	63	10	63											24	33	Endorsed on C.P.C.											10	63	Bal C.P.C.
21-6-19	21	1st	24	15																																	Pr A 1-6-19 to 21-6-19
					35	00																															Clothing allce
					70	00																															W.S.G. payment
																	4	87	5	00																	Boat & Train money
							129	15	Tch.								105	58													139	78					
		D.S.M.																									W.S.G.					AMOUNT DUE SOLDIER DEPENDENT					
																											70	00									W.S.G. payment
																											1	15									1 day Pr A over ct UE
153 days			350	00			350	00									June 20														71	15	278	85			
											AR88	July 15	1020785														68	85			140	00	210	00			AOR
											113	Aug 15	1633769														70	-			210		140		PW		
											136	Sept 12	1441603														70	-			280	-	70	-	Pd		
											163	Oct 15	1451437														70	-			350	-	0				W.S.G. PAID IN FULL
			350	-			350	-																			350	-			350	-	0				LIEUT. FOR PAYMASTER WAR SERVICE GRATUITY

100M-1-19.—L. L. 53962-M. & D. 9723.
M. F. W. 2596.