94th OVERSEAS BATTALION

ATTESTATION PAPER.

No. 198426

ORIGINAL

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your surname? ..... Sim
1a. What are your Christian names? ..... Gordon
1b. What is your present address? ..... Kenora Ont.
2. In what Town, Township or Parish, and in what Country were you born? ..... Aberdeen, Scotland
3. What is the name of your next-of-kin? ..... John Sim
4. What is the address of your next-of-kin? ..... Kenora Ont.
4a. What is the relationship of your next-of-kin? ..... Son
5. What is the date of your birth? ..... 1st May 1872
6. What is your Trade or Calling? ..... Teamster
7. Are you married? ..... No Widower
8. Are you willing to be vaccinated or re-vaccinated and inoculated? ..... yes
9. Do you now belong to the Active Militia? ..... No
10. Have you ever served in any Military Force? ..... No
If so, state particulars of former service.
11. Do you understand the nature and terms of your engagement? ..... yes
12. Are you willing to be attested to serve in the Canadian Over-Seas Expeditionary Force? ..... yes

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Gordon Sim, 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.

Gordon Sim (Signature of Recruit)

Date Dec 6 1915 Margaret Kelly (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Gordon Sim, 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.

Gordon Sim (Signature of Recruit)

Date Dec 6 1915 Margaret Kelly (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 Kenora, Ont. this 6 day of Dec 1915

J. Earnfry (Signature of Justice)

M. F. W. 23
200 M—9-15
H. Q. 1772-39-841

Medically Unfit 25-6-16 Valcartier

cardex 4-7-16

Description of Gordon Sim **on Enlistment.**

Apparent Age 43 years 7 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 7 ins.

Chest measurement: Girth when fully expanded 39½ ins.
Range of expansion 3½ ins.

Complexion Clear

Eyes Blue

Hair Gray

Religious denominations:
- Church of England
- Presbyterian Yes
- 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.)

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 declares that he is not subject to fits of any description.

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

Date Dec 4 1915 H. T. Emmet

Place Kenora Ont. Kenora
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.

Gordon Sim naving 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] Lieut. (Signature of Officer)
O.C. 94th Overseas Battalion

Date 22 December 1915

S

Proceedings of Court of Inquiry or on men reported Missing on Active Service.....

Attestation Papers.....2✓.....

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet.....1✓.....

Compulsory Stoppages.....

Casualty Forms.....1✓.....

Proceedings on discharge.....

Corps History Sheet.....

Date and No. of Deposit Receipt for Purchase Money and Amount.....

Parchment Certificate.....

Medical Report for Invalids.....

Medical History Sheet.....2✓.....

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet.....1✓.....

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate.....

M.F.W 67 — 1✓

1 Pay card

M. F. W. 62.
25m.—12-15.
H. Q. 1772-39-935.

O

DISCHARGE DOCUMENTS

Name Sim, Gordon

Regt. No. 198426 Rank Pte

Corps 94th O'Bn

Med: Unfit.
6-11-18

R. O. No.....

H. Q. No. 649-S-4021

H

19409

H

649.8-4021

NAME Sim, Gordon SOSHlis 25-6-16 5/

RANK & No. Pte 198426.

CORPS 94th. Batt.

ENLISTMENT, PLACE Kenora, DATE Dec. 6th. 1915 Wid.

FORMER CORPS Nil

COUNTRY OF BIRTH Scotland, Aberdeen,

NEXT OF KIN Sim, John (Son)

ADDRESS OF NEXT OF KIN Kenora, Ont., Can.

DISCHARGE, PLACE DATE

M. F. W. 22. 100 m.—9-15.

L. L. 85779—M. & D.—6011. H. Q. 1772-39 839. 3117

REMARKS:

No. 198426 Rank Pte Name Sim Gordon

T.O.S. 6-12-15 (D.O. 24 of 7-12-15) Unit 94th Battalion C.E.F.

M.D. 10

Paid From	Paid To	Sig. or Rec't	Promotions, Transfers, Discharges, etc. Particulars	Authority
1915 Dec 6	1915 Dec 31	✓		
1916 Jan.	1916	✓		
Feb.		✓		
Mar.		✓		
April		✓		
May		✓		
June 1	June 25	✓	S.O.S. Until 25-6-16	D.O. 192 of 24-6-16
			A/c closed by payment ✓	

UNIT SAILED
JUN 28 1916

COPY

94th OVERSEAS BATTALION

MEDICAL HISTORY SHEET.

Surname: Sim Christian Name: Gordon

Examined: on 4 day of Decr 1915 at Kenora

Birthplace: City or Town: Aberdeen; County: Scotland

Apparent age: 44

Trade or occupation: Teamster

Height: 5 Feet 7 Inches.

Weight: 153 Lbs.

Chest measurement: Minimum 36 inches. Maximum expansion 39½ inches.

Physical development: Good

Small-Pox Marks: None

Vaccination Marks: Arm Right. Yes Left.; Number: Very faint

When Vaccinated last: Childhood

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

(b) Slight defects but not sufficient to cause rejection: teeth need repairs

Approved by (c) W. J. Gunne

Rank ..... 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.
		M.O.
		M.O.
		M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.
15/5/16	Good	H B MacEwan M.O.
26/5/16	Good	H B MacEwan M.O.
		M.O.

Enlisted on 6 day of December 1915 at Kenora

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	94th O/S	198426		6 Decr 1915
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
Valcartier	23/VI/16	Deformity of back	Discharged as medically unfit approved [illegible] A.D.M.S. Valcartier Camp, P.Q.

I hereby certify that this is a true copy of original Document

F. G. Harcourt
Captain & Adjutant 94th Overseas Battalion

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 Sim Christian Name Gordon

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				

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

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.

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(1) Name of Overseas Unit which Soldier joins 94th Overseas Battalion.

(2) Regimental Number 198426

(3) Full Name of Soldier Gordon Sim.

(4) Place of Birth Aberdeenshire Scotland.

(5) Are you married, or not? Widower

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

(b) Present Postal Address

(7) Are you a widower? Yes

(8) Have you any children? One

If so, give number of boys and girls One boy

Also their names and ages John, 28

M. F. W. 67.

200M.—3-16.
1772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive ? No.

If so, state name and address

(10) Is your Mother alive ? No.

If so, state name and 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.

Mr. John Sim, Kenora, Ont.

(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 ? The United Workmen.

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.

May 15th 1916

C M Schmoor Lieut.-Col.
for O.C. 94th Overseas Battalion Officer Commanding.

Date

DEPT
MILITIA & DEFENCE
JUL 26 1916
H.Q. 649 & 4021
CANADA

MEDICAL HISTORY OF AN INVALID.

1.—Station. Valcartier Que

2.—Regiment of Corps. 94th O S Batt

3.—Regimental No. and Rank. 198426 Private

4.—Name. Sim Girdin

5.—Age last Birthday. 44

6.—Enlisted on Dec 16/15 at Kenora Ont

7.—Former Trade or Occupation. Teamster

8.—General remarks on his :—

(a) Conduct. Good

(b) Habits. Good

(c) Temperance. Good

(For this purpose the Company defaulter sheets will be obtained from the man's Commanding Officer.)

Date June 23/16

9.—Service.	Years. 189	Days.
	PERIODS.	
	From	To
94th O S Batt.	Dec 16/15	June 23/15

10.—Disease or Disability. (1) Deformity of back (2) Orbrio-scleroses

11.—Date of origin, cause, present condition and whether the same is the result of service or climate. 1 2 3 bright 1. in childhood 2 unknown 3. lateral deviation of spine 4. no.

Has it been aggravated by intemperance, vice or misconduct?

No.

4

M. F. B. 227.
20m.—10-15.
H. Q. 1772-39-117.

[OVER]

12.—In gunshot wounds, or other injuries, state how caused ; whether received in action or in Field Service, and at what place, and whether on or off duty. If not received in action, was a Court of Inquiry held ?

Not applicable

13.—In the event of the disability being attributed to exposure on duty, state clearly the nature of such exposure, and whether it was exceptional or otherwise.

Not applicable

14.—If aggravated, though not primarily caused by his service as a soldier, explain how it has been so aggravated.

Not applicable

15.—Is the disability permanent ? If not, state its probable duration. To what extent will it prevent his earning a full livelihood ?

yes
Nil

16.—Full particulars of medical treatment of case up to date of invaliding.

Nil

17.—If previously proposed for discharge on medical grounds, state the date, the disability, for which recommended for discharge, and the cause of remand of Corps.

~~medically unfit for service~~
not applicable

18—State if for discharge on account of unfitness for service.

discharge as physically unfit

C. C. Delahaye Capt.

Medical Officer by whom the case is brought forward.

OPINION OF THE MEDICAL BOARD.

(In which it should be stated how far the Board concurs in the above Report.)

We concurr with the above report and recommend that he be discharged as medically unfit.

Signatures :— J. W. Dorsey Capt. President.

Station Valcartier

Date 23/VI/16

Members.

R. T. Rutherford Capt. Amc

Date 25/6/16

Assistant Director of Medical Services.

Approved.

Date 28/6

Director of Medical Services.

[OVER]

Militia Form B. 227.
20m.—10-15.
H. Q. 1772-39-117.

DETAILED MEDICAL HISTORY OF INVALID.

Station

Corps

Regimental No. Rank

Name

Disability

Date

Hospital or Station transferred to for final disposal.

Date of final disposal

How finally disposed of

The original Report is invariably to accompany the discharge documents of invalids.

(At Station or Hospital where finally disposed of.)

Station and Hospital ..... Arrived from .....

Date .....

If admitted.	If under treatment.		Disease.	How fully disposed of.	Date of Discharge, &c.
Index No.	From	From			
Date					

Summary of Causes of invaliding, or remarks as to remand to Regiment, Station or Depôt.

Date of final Medical Board or decision. .....

Administrative Medical Officer.