212th OVERSEAS BATTALION

ORIGINAL

ATTESTATION PAPER.

No. 461636

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? — Thomson
1a. What are your Christian names? — Williams Smille
1b. What is your present address? — St. Lina, Alta
2. In what Town, Township or Parish, and in what Country were you born? — Dumfries, Scotland
3. What is the name of your next-of kin? — Agnes Thomson
4. What is the address of your next-of-kin? — Stradishall, Newmarket, Suffolk Eng
4a. What is the relationship of your next-of-kin? — Mother
5. What is the date of your birth? — 13th May — 1897.
6. What is your Trade or Calling? — Farmer.
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. — no
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, Williams S Thomson, 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.

Wm S. Thomson (Signature of Recruit)

Date July 4th 1916. Roy C Amsden (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Williams S Thomson, 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.

Wm S. Thomson (Signature of Recruit)

Date July 4th 1916. Roy C Amsden (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 Roydminster this 4th day of July 1916

Herbert J. [illegible] (Signature of Justice)

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

Description of Wm Smillie Thompson on Enlistment.

Apparent Age 22 years 2 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	37 ins.
Chest measurement. Range of expansion	3½ ins.
Complexion	Med.
Eyes	Grey
Hair	Brown

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).

Scar 3/4" in length upward & outward above R eye.

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 July 6th 1916

Place Edmonton Can

E. J. Leavitt
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.

Smillie.
William Smillie Thompson 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.

Robert J. Baker (Signature of Officer)

Date July 10th 1916. O. C. 212th C. S. Battn, C. E. F.

Jun[illegible] 31-5-18.

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

Attestation Papers..... 1

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet.....

Compulsory Stoppages.....

Casualty Forms..... 2

Proceedings on discharge..... 2

Corps History Sheet.....

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

Parchment Certificate.....

Medical Report for Invalids..... 1

Medical History Sheet..... 2

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet.....

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate..... 1

a[illegible]3 12 2—1

Med Cert Sheets

Photo Copy of Form Field

Casualty 1

P122—1

Pay Cert 1

M. F. W. 62.
100m.—6-17.
H. Q. 1772—39 935.

Name THOMSON. Wm Smillie

Regt. No 261636. Rank Pte.

Corps 212th Batt

[illegible]ically Unfit

R. O. No.....

H. Q. No.....

[illegible] John

ICR 30-9-20/DS

Cards 1 Part II
1 Casualty

Ret 20-1-20

10989

42-5
4-5
6-5

2

(649 T-8538)

SURNAME. Thomson.

CHRISTIAN NAMES William Smith.

REGL. No. 261636. RANK Pte.

UNIT ~~212th~~ 97th.

FORMER CORPS Nil.

S.O.S. Disc 3/4/18 80/2 13

Nil.

NEXT OF KIN.

NAMES IN FULL Thomson Mrs. Agnes.

RELATIONSHIP TO SOLDIER Mother.

ADDRESS Stradishall, Newmarket, Eng.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Scotland. Dumfries DATE May. 13th 1894.

PLACE OF ATTESTATION Lloydminster Sask. DATE July 4th 1916.

R/C. 7-2-18.

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

M. F. W. 22. 250M.—2-16. H. Q. 1772-39-339.

H.K.

MARRIED SINGLE Yes WIDOWER

TRADE OR CALLING Farmer RELIGION Presbyterian

DESCRIPTION.

APPARENT AGE 22. YEARS 2. MONTHS

HEIGHT 5. FEET 7. INCHES

CHEST MEASUREMENT 37. INCHES EXPANSION 3½ INCHES

COMPLEXION Medium EYES Grey. HAIR Brown.

DISTINGUISHING MARKS Scar ¾" in length upwards above Rt. eye.

MEDICAL EXAMINATION. PLACE Claydminster Sask. DATE July 4th 1916.

Present Address- St. Lina Alta.

Number 261636 Rank Pte

Surname THOMSON

Christian Name William Neville

Units R C R Theatre of War France

Date of Service 3-11-16

Remarks 33313

Latest Address ~~Stds~~ Stradishall Suffolk England

Roll No B Page 72453

200m.-2-21.M.

DEPT. APR 14 1925
REGN. NO. 12479

R. 149.

Name Thomson, Wm., (William.) Smillie, *Rank* Pte. *Reg. No.* 261636.

Unit ~~R.C.R.~~ N.S.R.D.

Next of Kin Mrs. (Agnes) A. Thomson, Strapishall, Newmarket, Eng. (England)

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
26-12-16.	No. 9 Can. Field Amb.		Gastritis.	A.302.		
1-1-17.	Discharged.		Do.	A.302.		
13-6	No 32 Sty. Hosp. Wimereux		Pleurisy	a 416		
21-6	North. W. Hosp. Gosforth N.C.L.		Do	B309		
31-8.	C.C.H. Woodcote Park Epsom (7001-1279)		-do-	B11		
9-11-17	DISCHARGED. 226-1471.		Do	B411		
30-11-17.	No. 12 Can. G.H. Bramshott 7349-7001		N.Y.D.Q	C77		
(2166) 14-1-18	Now reported to be:- Discharged.- 1942		Pleurodynia -do	C89		

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

No. 261636. RANK Pte. NAME Thomson W. L.

T. O. S. 4—9—16. UNIT 97th Battalion C. E. F.
Sept. Paylist.

M. D. 2.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916. Sept. 16.	1916. Sept. 30.	N.		

UNIT SAILED
SEP 18 1916

NAME Thomson W. S.

RANK AND CORPS Pte. R C R

REGT'L NO 261636

H. Q. FILE No. 649-

FOLLOWS No.

FOLLOWS

CABLE

No.	Date

NATURE OF CASUALTY

L. L. 12767—M. & D. 7390.

M. F. W. 42—50M.—12-16.
H. Q. 1772-39-893.

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
A 302	No 9 Can. Fld. Amb	6-12-16	Gastritis.
A 302	" " " " "	1-1-17	" (Disch)
A 416	#32 Stat; Wimereux	13.6.17	Pleurisy
B 309	Northumberl'd War Gosforth	21-6-17	"
B 16	Can Conv. Hosp. Epsom		"
B 71. ③	" " Disdg.	9-11-17.	Pleurisy 2. 18-12-17.
C 77.	12 Can Gen Bramshott	30-11-17	N. Y. D. 2 Lt. D. Regt:
C 89	" " " Disdg.	14-12-17	Pleurodynia

D.M.S. 1300.

Surname	Christian Name or Names	Reg. No.
Thomson	W.S.	261636

Rank	Unit	Co.	Troop	Batty
Pte	N.S.R. R.C.R.		Depot.	

Hospital — Date of Admission

9 C.F. Amb 26-12-16.

Transferred 32 Stat. Wimereux Hosp. 13.6.17.
Northumberland War. Gosforth Hosp. 21.6.17
Woodcote Park Can. Convl. Hosp. 31.8.17
12 Can. Gen. Brancshott. Hosp. 30.11.17.

Diagnosis Gastritis

(1) Later Diagnosis (if changed) Pleurisy Rw.
(2)
(3) Pleurodynia. Jy

Additional Diagnosis: if more than one state present

DISPOSITION — Date

Dis 9-11-17

C.L. 30-1-17 A302 Dis 1-1-18 REMARKS
21.6.17 A416. Hlisch. 14.12.17.
26.6.17 B309
4.9.17 BX
24-11-17 B71-3
5.12.17 C77.
20.12.17 689.

A.M.D. 2 DEPT.
Bch. of D.G.M.S. O.M.F.C. London.

Rw

EPITOME OF HOSPITAL TREATMENT.

	Hospital	Adm
1.		
2.		
3.		
4.		
5.		
6.		
7.		

Army Form B. 103. Temporary. Regimental Number 261636

Casualty Form—Active Service.

Regiment or Corps 97th Battalion

Rank Pte. Surname Thomson Christian Name William Smillie

Religion _____ Age on Enlistment _____ years _____ months.

Enlisted (a) 4.7.16 Terms of Service (a) D of war Service reckons from (a) 4.7.16.

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

Extended { _____ } Re-engaged { _____ } Qualification (b) _____

or Corps Trade and Rate Farmer

_____ Signature of Officer i/c Records.

CERTIFIED CORRECT. 17 NOV. 1916 CAN. RECORDS, LONDON.

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 ...			
		Arrived in England S.S. Olympic		25.9.16.	
27.10.16	O.C. 97th Bn	S.O.S. on trans. to R.C.R.	Otterpool	27.10.16	Pt. II D.O. 273.
8.11.16	R.C.R.	Taken on Strength	Field	3.11.16	" " " 67
					L. Newcombe Lieut. for Colonel i/c Records, C.E.F.
	O.C. C.B.D.	Landed in France. Taken on strength R.C.R. 43rd Can. Bn.		3-11-16	Nom. Roll d/ Pt II D.O. 67 d/ 3/11/16
	— do. —	Left for		8-11-16.	Nom. Roll d/
	O.C. Bn.	Arrived 22nd Nov 1916			B213 d/ 25/11/16 DCS 138
30-12-16	O.C. Unit	Sick To	F.A.	25-12-16	B213 DCS 146
6-1-17	"	Rejoined from F.A.	Duty	2-1-17	B213 DCS 146
7-1-17	9 C.F.A.	Inf. of Stomach To	Duty	1-1-17	A36 DCS 147

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) Signaller, Shoeing-smith, &c.

[P.T.O.

(4 27 29) W 15012—5156 100,000 12/15 H W V(P 1977) Forms/B. 103/3

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				
16.6.17	Clinic	Sick	J.A.	10.6.17	B213 DCS308
19.6.17	32 Stat.	Fleurus Sec.	England	19.6.17	W3034/W3267
19.6.17	"	" posted to Nova Scotia,	Peter de	19.6.17	W3083 (8764)
		Regt Depot, Bramshott	Coneck		24th 069 dy. 30/6/17
28.6.17	N.S.R.D.	Too posted from R.C.R	Bramshott	21.6.17	Para. 111
20--11-17	NSRD	Reported from furlough and posted to Depot Coy.	Bramshott	19-11-17	Part 11 D.O.248
3-12-17	N.S.R.D.	Ceases to be postei to Depot Coy.and is shown a patient in C.M.Hospital Bramshott	Bramshott	29-11-17	Part 11 D.O.259
14-12-17.	N.S.R.D.	Reported from B.M.H.& is posted to Depot Coy..	Bramshott	14-12-17.	Pt.2.D.O. 269.
15-12-17.	N.S.R.D.	On command to C.D.D. Buxton	Bramshott.	15-12-17.	Pt.2.D.O. 270.

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

LIEUT.
FOR LT: COL: I/C RECORDS, C.O.M.F.

Lieut.
CAPTAIN & ADJUTANT,
FOR O.C. NOVA SCOTIA REGIMENTAL DEPOT.

44

PATHOLOGICAL LABORATORY

"A" DIVISION.
1B
CANADIAN CONVALESCENT HOSPITAL.
WOODCOTE PARK, EPSOM.

24.9. 1917.

Hut 17
Rank Pte
Number 26636
Name Thompson
Unit R.C.R.

EXAMINATION OF SPUTUM.

Remarks.

No T B found

R B Jenkins
Pathologist.

I

No. 4.

46

PATHOLOGICAL LABORATORY

"A" DIVISION,
13
CANADIAN CONVALESCENT HOSPITAL.
WOODCOTE PARK, EPSOM.

24. 9. 1917.

Hut 11.
Rank Pte
Number 261636.
Name T. Thompson.
Unit R.C.R.s

9

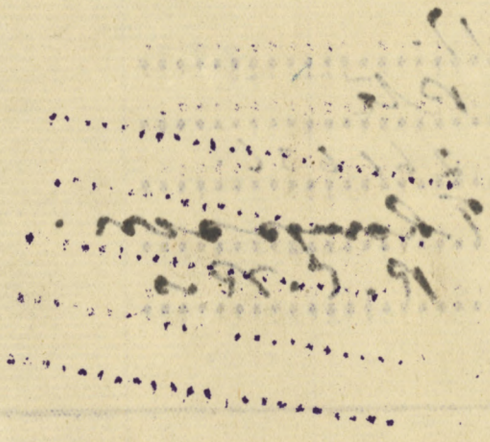
EXAMINATION OF SPUTUM.

Remarks.

No T B found.

R B Lankin

Pathologist.



4 5.

PATHOLOGICAL LABORATORY

"A" DIVISION.
18.
CANADIAN CONVALESCENT HOSPITAL.
WOODCOTE PARK, EPSOM.

24.9. 1917.

Hut 17.
Rank Pte
Number 261636
Name Thompson.
Unit R.E.R.'s

EXAMINATION OF SPUTUM.

Remarks.

No T.B. found.

R.B. Jenkins
Pathologist.

13

92431.—W6490/1535.—2,000,000—J. J. K. & Co., Ltd.—Forms B. 103/1.

Army Form B. 103.

Casualty Form—Active Service.

Regiment or Corps 47 Battalion

Regimental No. 761636 Rank Pte Name Thomson William Smelle

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				
16 DEC 1917		TAKEN ON STRENGTH C.D.D, BUXTON Pt. 11 ORDER No. 298 Commanding			R Vine Lt Lieut.-Col. Canadian Discharge Depôt.
JAN 19 1918		EMBARKED FOR CANADA FROM LIVERPOOL Commanding			R Vine Lt Lieut.-Col. Canadian Discharge Depôt.

Transferred to No. 13 Casualty Unit 15/2/18

Auth. District Order No. 50

C Eadon Lt
Officer Commanding No. 13 Casualty Unit

Discharged from the Service by No. 13 Casualty Unit 3/4/18 Auth. K R & O 392-16

C Eadon Lt
Officer Commanding No. 13 Casualty Unit

(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				

ORIGINAL

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.

---

(1) Name of Overseas Unit which Soldier joins 97th Batt. C.E.F.

(2) Regimental Number 761636

(3) Full Name of Soldier Thomson, William Smillie

(4) Place of Birth Dumfries Scotland

(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.

200M.—3-16.
I772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive? Samuel Evart Thomson

If so, state name and address Stradishall New Market England

(10) Is your Mother alive? Agnes Thomson

If so, state name and address Stradishall New Market Eng

(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? Prudential

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.

C. L. Kenton Limit
Officer Commanding.
a/adjt.

Date Sept 14 1916

FORM OF WILL.

72927

I, William Smillie Thomson (Name in full)

Regimental Number 261636 serving in 212 Batt.

of the Canadian Expeditionary Force, do hereby revoke all former Wills by me made and declare this to be my last Will.

I bequeath all my real estate unto

Mrs S. E. Thomson
Stradishall Newmarket
England

Name and Address of person or persons to whom it is to go.

absolutely, and my personal estate I bequeath to

Mrs S. E. Thomson
Stradishall Newmarket
England

Name and Address of person or persons to receive personal estate* *(See note).*

IMPORTANT NOTE
This must be Signed and Dated by THE SOLDIER HIMSELF.

this 19 day of August. A. D. 1916

Wm S Thomson Signature of Soldier.

*N.B.—Personal estate includes pay, effects, money in bank, insurance policy, in fact everything except real estate.

Signed and acknowledged by the Testator as and for his last Will in the presence of us both present at the same time, who in his presence, at his request, and in the presence of each other have hereunto subscribed our names as Witnesses.

THE TWO WITNESSES MUST SIGN HERE

Signature of First Witness Alex Connan

Address of Witness Lonesome Butte Sask.

Occupation of Witness farmer

Signature of Second Witness Wm H. Borders.

Address of Witness Avebury Sask

Occupation of Witness Farmer

M. F. W. 82
300M-5-16.
1772-39-983.

St. Lina P. O.
alta.

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

This form to be used for all Ranks (Vide Articles 122, 130 and 141, Financial Instructions, 25715c, C.E.F., 1916).

Regimental No. 261636 Rank Pte. Name Thompson. S.

Corps 97th Battn. who was* Discharged.

On 3-4-18. 191 ~~15~~

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1-4-18. 191..., to 3-4-18. 191..., the inclusive date of ~~transfer or~~ discharge.

Dr.	$	c.	Cr.	$	c.
Bal. Dr. from prev. month			Bal. Cr. from prev. month		
Advances by Cheques No.			Regt'l Pay 3 days at $ 1 c. 00	3	.00
Advances by Cheques No.			Field Allow. 3 days at $ c. 10		.30
Assigned Pay and Sep'n Allce. No.			Separation Allowances* (Monthly)		
Other charges			Other Allowances* Clothing Allce.	8	.00
Payment on ~~transfer or~~ discharge No. 260	11	.30	Other Credits*		
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)		
Total	11	.30	Total	11	.30

*Give particulars.

A monthly stoppage of $ N. I. L. (†) has (‡) been paid on account of Assigned Pay for the month of 191... and Sep'n Allce. for month of 191... (to) Assignee

(Address)

(†) Insert amount to be assigned, whether it has been paid or not.
(‡) Insert "not" if amount has not been paid for period of account.

On Transfer of an Officer

Outfit Allowance of $ has been paid by Paymaster, Military District No.

REMARKS:—

State (1) date of enlistment

(2) if married and if a Separation Allowance Card has been submitted Single

(3) cause of discharge authority D.O. #86

(4) authority for transfer

NOTE.—Separation Allowance and Assigned pay Card and Index Card (M. F. W. 71) are to accompany the original Last Pay Certificate on transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay-list of the unit.

Date April 11th, 1918.

Place Calgary, Alberta.

C. J. Everett Capt.
Paymaster No. 13 Casualty Unit, C. E. F.
Paymaster.

N.B.—For purposes of transfer this form is to be made out in quadruplicate. Original copy to paymaster of new unit; duplicate to District Paymaster; triplicate to accompany the pay-list at the end of the month, and quadruplicate for retention as a record.
For purposes of discharge it is to be made out in triplicate. Original copy to accompany discharge papers; duplicate to accompany pay-list at the end of the month, and triplicate for retention as a record.
If a man on discharge is entitled to three months' Post Discharge Pay, Last Pay certificate will be made out in quadruplicate. The original Last Pay Certificate will be forwarded with other documents to Paymaster Post Discharge Pay and triplicate, with his discharge documents.

T.D.F. 18-4-18.

S.

M. F. W. 44.

100M.—12-17.
H. Q. 1772-39-903.

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

Box 3331 3 AK 478

ORIGINAL

ORIGINAL

MEDICAL HISTORY SHEET.

THOMSON

Surname Thompson Christian Name William Snellie

Examined { on 4th day of July 1916 / at Ft Garry Winnipeg

Approved by E. J. Everett

Birthplace { City or Town Dumfries / County Scotland

Rank M.O.

Apparent age 22

Trade or occupation Farmer

Height Five Feet Seven Inches.

Weight 150 Lbs.

Chest measurement { Minimum 33½ inches. / Maximum expansion 37 inches.

Physical development Good

Small-Pox Marks None

Vaccination Marks { Arm Right. Left. Ys / Number Four

When Vaccinated last When a child

(a) Marks indicating congenital peculiarities or previous disease Nose. Identi: Scar ¾" long, upwards & outwards from rt. eye.

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

Date.	Fit or Unfit.	Examined for Re-engagement.
14.12.17	B III	27 JUN 1917 R. Glass Capt. M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date.	Result.	Vaccinations.
15-8-16		A. McMillan M.O.
Feb 14 1918		A. Grant M.O.
		M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.
5-8-16		A. McMillan M.O.
11-8-16		M.O.
16-8-16		M.O.

Enlisted on 4th day of July 191 6 at

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	~~212 Batt~~	261636		July 4 1916
Transferred to	97 Os Battalion CEF			13/9/16
	R.C.R. 4. L.R.D.	261636		21-6-17.

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
Epsom	Nov 2/17	Pleurisy Chronic.	B III unlikely to be raised in category within six months. S.S. Devitt Capt. C.A.M.C. H. Collins
Edmonton Alta	15.3.18	ditto E	

CANADIAN

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

M. F. B. 313.

400M.—1-16.
H. Q. 1772-39-439.

Surname Shrimpton Christian Name William

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.
NORTHUMBERLAND WAR HOSPITAL. GOSFORTH, NEWCASTLE-ON-TYNE.		20	6	17	29	8	17	Pleurisy	70	Exd for: T. B. none found Transfer to Canadian Hospital	J Bowes A Bowes
M.C.H. Epson		29	8	17	9 - NOV		1917	do —	83	31.8. Five weeks in bed. Weakness, pain in l. side. Cough worse in morning. Lost weight. No dirty. Sputum exam neg 10.9. L. base still dull. and breath sounds diminished. Light duty outside. Sputum exam (2nd) neg 24.9. Sputum exam (3rd). Urine exam neg 1.10. Still considerable dulness & breath sounds diminished. 15.10 Not much improved. 22.10. No improvement. L. base very dull.	J Cameron Barr
Braunstone		29	11	17	14	12	17	Pleurodynia	14	Pain in chest: dullness over base. Breath sounds diminished. Sufficiently recovered to return to duties	W.H. Greenfield. Capt. RAMC

DEPARTMENT OF VETERANS AFFAIRS
MINISTÈRE DES AFFAIRES DES ANCIENS COMBATTANTS

DEATH NOTIFICATION
AVIS DE DÉCÈS

Date Ottawa 4, Ont. Jan 6, 1970

TO:
À: Copy for HO file

Attention of:
Compétence de:

CPC No. 33313
CCP N° .....

NAME THOMSON William S. Service No. 261636 WW1 WVA No.
NOM ..... Matricule N° ..... AAC N° .....

Information received from:
Information reçue de: DVA DIST ADM London England Date Dec 22, 1969

Date of Death
Date du Décès Nov 30, 1969

Cause .....

Place England
Endroit .....

Name and address of next-of-kin (if known)
Nom et adresse du plus proche parent connu .....

Distribution: WSR - VI - ~~DO~~ - HO FRD
DASG - ASS - BD - BC

Pour le chef,
C.C. Richardson
for Chief, Central Registry Division.
Dépôt central des dossiers.

DVA 24 Bil (Rev. 7/69)

E
1201

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

31123-621

017969-W-3.

Name Thomson, William Smilie
Surname Christian Name

Regimental Number 261636 Rank Pte.

Unit 212th Bn.

Original Unit

District where paid M.D.13.

Date of Discharge 3-4-18.

P. D. P. Filing Number 14-134-13.

Address (in full) P.O. St. Lina,
Lloydminster, Alta.
Alliance, Alta. 24/4/19.
(Mrs. W. S. Thomson)

Rates:—Regimental pay $ 1.00 per diem: Field Allowance $ .10 per diem. Separation Allowance $ per month.

L. L. 22573—M. & D. 8009.

Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Over-payments to be Recovered	Total Amount Paid
	Cheque No. A	Date	Amount 30 days	Cheque No. B	Date	Amount 30 days	Cheque No. C	Date	Amount 31 days		
100 10	2260	18-4-18	33 00	2224	18-5-18	33 00	2234	18-6-18	34 10		100 10

~~Pasted in error~~ Posted in error See Previous Sheet for Right account

M. F. W. 127. 60M—6 17. 1772-39-1140.

Remarks:

6RS 24/19

Thomson William Smith

-W-302

Alliance

Alta.

Doc'n No 31123/62 W. S. G. File No. 917959

Award 122 days at $ 70.00 per day $ 280.00

S. A. ..... months at $ ..... per mo. $ ..... $

Less P, D. P. Credited 100.10 $ 179.90

$

Less further debit balance $ .....

Not due paid as below 179.90

TO SOLDIER			TO DEPENDENT		
Ac No	Ch No	Amount	Ac No	Ch No	Amount
2783	446078	179.90			
				Total	

2.5/19

GEN'L AUDITOR
Posting checked by
A. Bell
Date 1 Feb 19

P.697-25M.
3989-31-10-17.

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS.

261636. Thomson W.S. 27/12/17.

Date of Payment.	No. of Acq. Roll	AMOUNT Francs	£	S.	$	¢	Place of Payment.	Name of Paymaster.	Remarks.
~~16 Oct~~	~~3349~~		~~1~~		~~4~~	~~87~~			
~~17 Nov.~~	~~4087~~		~~1~~		~~4~~	~~87~~			
~~9~~	~~4235~~		~~10~~		~~48~~	~~67~~			
~~14 Dec.~~	~~133~~		~~1~~		~~4~~	~~87~~			
					63	28			

R—122

TLH. Rank Name THOMSON, William Smille, Reg'l No. 261636.

Unit 97th.Bn. If in perm. Corps, What Unit? Married or Single Single,

Place and Date of Enlistment Lloydminster, July 4th. 1916. Place of Birth Dumfries, Scotland.

Name and Address, Next-of-Kin Agnes Thomson,

Stradishall Newmarket, England. Relationship Mother.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

N/E. R.B. No. 3709
File R.L.
Category O.R. Can

H. W. & V., Ld.—7165-16.

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 S.S. Olympic 25-9-16			
27.10.16	W. 97th	S.O.S. on trans. to R.C.R.	Otterpool	27.10.16	Pte. II D/o.
8.11.16	R.C.R.	Taken on strength.	Field	3.11.16	Pte. II D/o.
30.1.17	"	Adm. No. 9 Can. Field Amb	"	26.12.16	C.L.A. 302. Gastritis.
30.1.17	"	Disc. " " " "	"	1.1.17	C.L.A. 302 "
26-6-17	"	Northumberland War Hospital	Newcastle	21-6-17	C.H.B. 309 Pleurisy
30.6.17	"	Inv. Sick & Posted to N.S.R.D.	Field	19.6.17	P II D.O. 69.
28.6.17	N.S.R.D.	T.O.S. from R.C.R. Specn. Co.	Bspott	21.6.17	P II D.O. 111
3.9.17	R.C.R.	Ft. C.C. Hospital	Bspom Tonbridge	31.8.17	C.A.H.B. 1
23.11.17	R.C.R.	Disch.	Pte	9.11.17	Cl. 71

A.F.B. 103 CHECKED 16 NOV. 1916

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.
4.12.17	Wh. Dept	T/O 12 Can Gen Hospital	Fsb	Bristol	30.11.17	Cle 77 TYO " "
19.12.17	"	Discl " " "	"	"	14.12.17	Cle 98. Neurodynia.
18.12.17	WSHQ	On Command Cod Barton awaiting Embk to Canada	"	"	15.12.17	Pte. 270.
8.1.18	"	Relieved on Command lst on Embk Canada for disp A.G. Ottawa	"	"	19.1.18	Pte. 21
Dis Dept	For Duty		MD 13	Calgary	1218	N.R 441

P. 559.
MARRIED OR SINGLE Single

PLACE OF BIRTH

NAME AND ADDRESS OF NEXT OF KIN Eggnes Thompson
Strathcona, Inverkindie Emy.

RELATIONSHIP OF NEXT OF KIN Mother

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. 261636 RANK Pte NAME Thomson, Wilfiam Smille

IF IN PERMT. CORPS } WHAT UNIT UNIT 97th

PERMANENT FORCE ALLOWANCES

PLACE OF ATTESTATION Weyburn Sask

DATE OF ATTESTATION 4/2/16

TRANSFERRED TO RCR DATE 21-11-16 AUTHORITY Co. O. 273 27/10

TRANSFERRED TO N. S. R. D. DATE 1-11-17. AUTHORITY N/R

TRANSFERRED TO M.C.B. Regt'd DATE 1/3/18 AUTHORITY

TRANSFERRED TO M.C.B.C.N. DATE 2/1/18 AUTHORITY N.R.D. 29/1/18

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

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

DISCHARGE DATE AND PLACE Canada 1st Jan/1918. REASON AND AUTHORITY N.R.D. 14/12/17 A.C.I. 2-1-18

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

MAR 5 1918 CANADIAN CONTINGENTS

Examined N.E. Pay Indgs.
Checked by H. Gillotson C.I.

Checked Edwards

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
														43.	43.													Balance from Canada			43 00				
Dec. 1.31	31	1st	31	00	31	.10	3	10						1	34 10	31	1/10							24 33							24 33	5277			
Nov	30	✓	30	-	30	✓	3	00						1	30 -	79	16-10							9 73							9 73	6504 ✓		16	TRANS RCR DO 273 27/10
31	30		10				1	00							91 10																34 06	7604			
Dec	31	..	31		31	.10	3	10							34 10	1099	25/11			9003 CRB 27/11		8491	8/11	8 72			4 36				17 44	9270		45	47 70
1917			9	20			9	20																										
Jan.	31	1st 10	34	10											34 10	1120	16/12	1178						3 48	3 49						6 97	11983		60	59 83
Feb	28	..	30	80											30 80	1227	24/1	5/1						3 49							3 49	14714		75	72 14
March	31	"	34	10											34 10	1312 1275	26/2 16/2	1496						3 49 3 49	1 75						8 73	17251		90	
Apl	30		33												33																20 51		105	
May	31		34	10											34 10	55	19/4	156	5/5					2 61	3 57						6 18	23343		120	
June	30		33												33 -	185	20/5							3 57							3 57	26286		135 -	127 86 97 86
July	31		34	10											34 50	207	2/6				R.I 19/7			1 79				24 33			26 12	27084		150	120 84
			334	40										43	377 40									64 70	8 81	8 72		24 33			106 56	106 56	0	810	

26136. Pte Thomson. W.S.

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
B/F			334	40										43 -	377	40								64 70	8 81	8 72	24 33			106 56	270 84		150 -	120 84	
Aug 31	10		34	10											34	10										9 74				295 20		165 -		
Sept 30			33	-											33	-									1 22				1 22	326 98		180 -	146 98	

MONTH	PARTICULARS	CR.1	CR.2	PARTICULARS	DR.1	DR.2	DR.3	DR.4	BALANCE	DEFERRED PAY	SEP. ALLCE. ENG.
Oct.		~~326 98~~							326 98	180	
	Pte Pay	~~34 10~~ 34 10							361 08	191	
Nov	Do	33		Draft 2768 3/11 Ephram	4 87				389 21		
Dec	Do	34 10							423 31		
	Int on Def Pay	6 5 6							429 87	225	
Jan/18		73 66		AR 133. 7/1/17 17 Bn	4 87						
				Draft 4084 1/11 Ephram	4 84						
				" " 3349 1/10 "	4 84						
				Draft 4336 7/1/17 Do	48 67				366 59		
					63 76						
1918 Mar 20	Endorsed Transf to "Canada Disc'ge a/c"	9 73		AR 17351. 3/1/18 Cpl Buxton Adj/o 6 B. NE 10/21	9 73	Endorsed			Nil		

Balance transferred to N.E. Branch.

Nil

A.F.W. FORM REN.B Nil EFFEC.
DISCHARGED TO Can DATE 1/4/18
PAYBOOK VERIFIED Yes
CT BAL 361 59 L.P.C. REN.B 25/2/17
AUTHY. ~~M.R.O.~~ M.R.O. 14/17 A.G. 22/1/18 29

Disposal
Checked J Bruce Pte

Buxton S.L. no. 53. 19-1-18 Cr 366.59
Endorsed AR 17351. L2.

This space to be for numbers.

Proceedings on Discharge.

(When forwarded for confirmation these proceedings should be accompanied by the documents specified on fourth page.)

No.	261636.
Rank	Private
Name NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.	Thomson (William Smillie)
Corps (Squadron, Battery or Company)	212 th. Battalion C. E/ F.
Date of Discharge	April 3rd. 1918.
Place of Discharge	~~Edmonton~~ Calgary, Alberta.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

		Descriptive Marks
Age	23 years 11 months.	
Height	5 feet 8½ inches.	
Complexion	Clear	N I L.
Eyes	Grey	
Hair	Brown	
Trade	Farmer	
Intended place of residence (To be given as fully as practicable.)	St. Lina P.O. Alberta.	

2. The above-named man is discharged in consequence of

~~Category Ex Boards at Edmonton March 15th 1918~~

Physically unfit for further war service K. R. & O para392 sec 16

N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.

To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.

3. Conduct and character while in the service have been, according to the records, etc.

---GOOD---

N. B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldier and the Officer Commanding his Squadron, Battery or Company:

4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)

N I L.

K.C.D. 2/11/19.

M. F. B. 218.

50m.—3-16.
H. Q. 1772-39-113.

W. D. S. Comp. 11-4-19 M. E. B.

K.C.D. 2-11-19

(OVER)

3 I. R. J.

5. He is in possession of the following number of G. C. Badges:

N I L.

No reference to G. C. Badges is to be made on either the discharge or character certificate.

6. Medals and Decorations.....

N I L.

To be copied by the Commanding Officer on to the parchment Discharge Certificate.

7. His account is correctly balanced, and signed by the Officer Commanding his Company. (*Squadron or Battery*), and I have impartially enquired into all matters brought before me in accordance with Regulations.

(Place) Calgary Alberta. .....

(Date) April 3rd. 1918. *Commanding* .....

District Casualty Officer, M. D. No. 13

8. **Certificate to be signed by the Soldier on Discharge**

I hereby acknowledge that I received all my Pay, Allowances and Clothing, and all just demands, up to the present date, subject to the reservations of the claims noted on the third page.

(Place) Edmonton W S Thomson (*Signature of Soldier.*)

(Date) March 15th. 1918. Thos J O'Ball (*Signature of Witness.*)

When a soldier is absent through illness or any other cause and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned, should be attached here.

9. **Additional Certificate in the case of a Soldier who takes his discharge on his own request.**

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

..... W S Thomson (*Signature of Soldier.*)

10. **Statement of Service.**

Service toward Engagement to.....(the date to which the Record of Service is completed) 1 years 276 days.

Total 1 years 276 days.

11. **Confirmation of Discharge.**

The discharge of the above-named man is hereby confirmed.

(Place) Calgary, Alberta. .....

(Signature) .....

(Date) April 3rd. 1918.

District Casualty Officer, M. D. No. 13

Reservations referred to at Para. 8.

(To be signed by the soldier. When there are none, it is to be so stated, and signed by the soldier.)

Balance of my pay as per my pay book.

W. S. Thomson

Final cheque £11 30 mailed 16/4/18

(OVER)

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form B. 263.
Squadron / Battery / Company } Conduct Sheet,	" B. 263a.
Copies of Convictions, by C. P.	in MS.
Med. Hist. Sheet,	Militia Form B. 313
Medical Report for Invalid*	" B. 227.
Statement of Man's Account on Transfer and Last Pay Certificate,	" D. 877.

*Only if discharged "Medically unfit."

Attestation Paper,	Militia Form B. 235.
Proceedings on Discharge	" B. 218.

In the case of recruits who are rejected on final approval, the discharge documents will consist of

(a) Proceedings on Discharge.

(b) Attestation.

(c) Medical History Sheet (in the event of such having been prepared.)

N. B.—In the case of a man discharged by purchase, the date and number of Deposit Receipt with amount of same is to be noted hereon.

Returned to Canada, - Authority - Medical Board held at

.....Epsom.....Dated..1-11-.....1917.

Category.....B III.....

Form R. & O 6045-
1238-180M-29/1[illegible]16.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at M.C.H. EPSOM. 1st November. 1917. 1916.

No. 261636 Rank Pte. Name THOMSON S.

Local Unit ..... Overseas Unit R.C.R. Age 22.

Examination held at M.C.H. EPSOM.

DISABILITY.
Overseas—Local.
(scratch one out)

PLEURISY. (Convl)

PRESENT CONDITION.

Dullness over left lower Lobe, with air entry much diminished and almost Nil just at the base. May improve.

BOARD RECOMMENDS:—

1. Fit for Duty .....
2. Fit for duty after ..... weeks' physical training.
3. Fit for Temporary Base Duty ... B ..... weeks.
4. Fit for Permanent Base Duty ... B.III. Unlikely to be raised in Category within six months.
5. Discharge .....

Signatures:—

S.R.D. HEWITT. Captain. ..... President.

Members { C.J.S. BIRD. Captain. C.A.M.C. .....

.....

B.P.C. FALSE DOCKET 3

APPROVED

Dated at EPSOM. 2nd Nov. 1917 1916. .....

For A.D.M.S.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at ..... 1916.

No. ..... Rank ..... Name .....

Unit ..... Overseas Unit ..... Age .....

Examination held at .....

DISABILITY.
Overseas. Local.
(write "Yes" or "No")

PRESENT CONDITION

BOARD RECOMMENDS:-

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

Signatures:-

..... President.

..... Members

.....

.....

APPROVED

Dated at ..... 1916.

For A.D.M.S.

St L[illegible]a P.O. Alberta.

MEDICAL HISTORY OF AN INVALID.

B.P.C. ORIGINAL

1. Station. Edmonton Alta.
2. Regiment or Corps. 212th Batt C.E.F.
3. Regimental No. and Rank. 261636
4. Name. Thomson, Smillie
5. Age last Birthday. 23
6. Enlisted on 4.7.16.
   at Lloydminister, Alberta.
7. Former Trade or Occupation. Farmer Date. 15.3.18.

8. General remarks on his :—
   (a) Conduct. Good.
   (b) Habits. "
   (c) Temperance. "

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

DEPT. MILITIA & DEFENCE APR 19 1918 649-7-8038 H.Q. CANADA

9. Service.

	Years.	Days.	PERIODS. From.	PERIODS. To.
212th Batt. C.E.F			4.7.16	17.9.16
97th Batt. C.E.F.			17.9.16	1.11.16
R.C.R. C.E.F.			1.11.16	date.

10. (a) Disease or disability. Pleurisy (Convalescent)
    (b) Date of origin. 10th June 1917.
    (c) Place of origin. Vimy Ridge, France.
    (d) Cause. Exposure in trenches.

11. Present Condition. (Most Important).
(To include full description of present disabling condition or conditions.)

Well nourished man. Complains of slight shortness of breath also slight cough. Marked dullness on percussion over back of L.lower lobe. Breath sounds greatly diminished. Vocal resonance and vocal fremitus also diminished over the same area. No rales. Temperature normal. Heart and other viscera normal.

12. (a) Is the disability the result of service or climate ? Service.
    (b) Has it been aggravated by intemperance, vice or misconduct ? No.

B.P.C. FALSE DOCKET 4

M. F. B. 227,
100 M—2-16.
1772-39-117.

13. (a) For purpose of Identification. (Here a full description of wounds, scars, deformities, etc., is to be given.)

Scar over R.Eyebrow.

(b) In case of wounds, or other injuries, state whether sustained on or off duty. If not received in action, was a Court of Inquiry held ?

Not applicable.

(c) 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 exceptional.

14. Treatment

Northumberland War Hosp.	20.6.17 to 29.8.17.
M.C.H. Epsom	29.8.17 to 9 .11.17.
Bramshott	9.11.17 to 14.12.17.

15. If the disabling condition had its origin before enlistment, has it been aggravated by service, and to what extent ?

Not applicable.

16. What is the probable duration of the disability or of each disabling condition, if more than one contributes ?

Probably permanent.

17. To what extent will it prevent his earning a full livelihood in the general labour market ? Please state in fractions.

18. State if for discharge on account of unfitness for Service.

Cate. ' B '.

J C Macdonald

Medical Officer by whom the case is brought forward.

Capt. C.A.M.C.

OPINION OF THE MEDICAL BOARD.

Does the Board concur with the preceding report? If not, give differing opinion.

10. Yes.

11. Yes.

12. Yes.

15. Yes.

16. Yes.

17. Yes.

19. Is he unfit for Military Service. Yes.

20. Recommendations: Class E. We recommend that this man be discharged.

Signatures:—

H. L. Collins ..... President.
Capt. C.A.M.C.

A. C. Macdonald .....
Capt. C.A.M.C.
Members.

J. J. Adamson .....
Capt. C.A.M.C.

Station. Edmonton Alberta

Date. 15.3.18.

Date. 25-3-18

..... Asst. Director of Medical Services.

Approved.

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

B. P. C. FOLIO
FALSE DOCKET
1

Militia Form B. 227.

100 m-2-16.
H. G. 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.

Military Convalescent Hospital,
Woodcote Park, Epsom, Surrey.

Date Sept 13 1917.

EXAMINATION OF SPUTUM

Division A. Aust. 17

Rank Pte

Name Thomson

Regtl. No. 261636

REMARKS

No T.B. found

R.B. Gardiner

Pathologist.

(43).

URINALYSIS

Division 1B. Hut 17.	Color Amber
Rank & Name Pte Thompson	Deposit
Regt'l No. 26/636.	Reaction Acid
Unit R.C.R.	Sp. Grav. 1023
	Albumen Neg
Examination required	Sugar Neg
Special regard to routine	Microscopic

R. B. Jenkins.
Officer i/c Laboratory.

Military Convalescent Hospital,
Woodcote Park, Epsom, Surrey.

Date.....1917.

Canadian Section,
Military Convalescent H
Woodcote Park, Epsom

Date.....

RETURN

n	Staff in Occupation	In Detention	Total	Bed Equ

Sergeant-Major " " Divisio

Forms
I. 1237
'13.

Army Form I. 1237.

MIL CNV HP.
WOODCOCK PK
EPSOM.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
671 Can.	36176	Pte.	Thomson	D.S.
Year	Unit.		Age.	Service.
	Royal Canadian Regt A Coy		22	1

Station and Date.

Disease Pleurisy.

At the Beginning of June while in trenches at Vimy Ridge patient complained of pains abt. chest & left side, losing weight, & loss of appetite, & general weakness. He was sent to 66th F. A. on June 10th & afterwards to 32nd Stat. Hos. Boulogne. He had a touch of the same complaint in April.

Has not felt well during the winter, suffered from colds etc.

On admission there are signs of Pleurisy with slight effusion at left side of chest.

Temperature remains practically normal: Appetite again normal. D Bruce.

23.6.17. Put on open air table; Sputum examined. Not T.B. forms

29.6.17. Improving: Temperature has touched normal: Feels well: Eats & sleeps well —

Ex° for T.B. none found

J Bowes.

24.8.17 Transfer to Canadian Hospital

J Bowes

*The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.

(44502) Wt.W 11203—M 1150. 1,450,000. 6/12 16. C.F.&S. Forms/I. 1237/12. (E239)

P.T.O.

Station and Date.	

MB

T-265

D

GAMMA 25
FEB 7 1918

This space to be left blank for the Chelsea Number.

Army Form B. 268.

Proceedings on Discharge.

(When forwarded for confirmation the documents named on page 4 should be enclosed.)

No. 761636 Army Rank Pte.

Name Thomson Smillie

(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)

Corps N S R D.

Battalion, Battery, Company, Depôt, &c. 212

(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)

Date of discharge

Place of discharge

1. *Description at the time of discharge.*

Age 23 years ' months

Height 5 feet 8½ inches

Chest measurement { girth when fully expanded ins. / range of expansion ins.

Complexion

Eyes

Hair

Trade Farmer (13)

Intended place of residence (To be given as fully as practicable) Edmonton Alta

Descriptive marks.

Scar. Left

(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)

2. The above-named man is discharged in consequence of

(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)

To be filled in on the soldier quitting the Colours.

3. Military character:—

4. Character awarded in accordance with King's Regulations:—

Certified that the above is an accurate copy of the character given by me on Army Form B. 2067* and that Army Form D. 489 was awarded in this case.

Initials of Commanding Officer.

Army Form B. 2088 has been issued to*

D. D. & L., London, E.C. (A8689) Wt. W7717/M2626 500,000 9/17 Sch. 32 Forms B. 268 41

* Strike out if not applicable.

[OVER.

5. He is in possession of the following number of G.C. badges (if the man is a N.C.O. and enlisted prior to 1st July, 1881, the number he would have been entitled to had he not been promoted should be stated).

Is it probable that he will be entitled to another good conduct badge before the confirmation of these proceedings?

Classification for service, or proficiency pay... ... ... Class _____

6. Campaigns, Medals and Decorations

9 mos. France

Certificate of education .....

7. His accounts are correctly balanced, and I have impartially inquired into all matters brought before me in accordance with Regulations.

(Place) _____ _____

(Date) _____ *Commanding* _____ *Battn.* _____ *Regiment.*

8. *Certificate to be signed by the soldier on discharge.*

I hereby acknowledge that I have received all my pay and allowances (including clothing allowance), and all just demands up to the present date, subject to the reservations of the claims noted on the 3rd page.

(*Place*) _____ _____ (*Signature of Soldier.*)

(*Date*) _____ _____ (*Signature of Witness.*)

(When a soldier is absent through illness or any other cause, and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned should be attached here.)

9. *Additional certificate in the case of a soldier who takes his discharge at his own request.*

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

_____ (*Signature of Soldier.*)

10. *Statement of service.*

Service towards engagement to _____ (the date to which the record of service is completed) _____ years _____ days.

Further service „ „ _____ (the date of confirmation of discharge) ... ... _____ „ _____ „

Total ... _____ „ _____ „

11. *Confirmation of discharge.*

The discharge of the above-named man is hereby confirmed for **(date)**

(Place) _____

Signature _____

(Date) _____

Commanding officers (or the Paymaster if at Netley) will issue to every discharged soldier whose claim to pension, either on account of service or disability, is to be brought under the consideration of the Chelsea Board, a memorandum for his guidance on Army Form D. 401, and will at the same time transmit to the Secretary, Royal Hospital Chelsea, a descriptive return of the man on Army Form D. 400.

143845

261636 Pte Thomson W S

R C R.

20

Perforated sheet for Will from Pay Book of Reg.

No. 261636

Name William Smillie Thomson

Unit R. C. R.

Military Will

In the event of my Death I leave all possessions both Real and Personal Estate to my Mother.

Signed.
William Smillie Thomson

Witnessed

Signature C A Olden. H Aussin

Rank and Regt. RCR - Pte - R C R.

Date 5 April 1917.

TELEGRAM AND CABLE ADDRESS:
"PAYCANEX," LONDON.

Please address all communications
"CHIEF PAYMASTER
AND OFFICER I/C RECORDS."
and quote
No.

PAY OFFICE,
Canadian Contingents,
WESTMINSTER HOUSE,
7 MILLBANK, LONDON, S.W.

.....1916.

TO.....

.....

.....

Your application for advance of pay is returned herewith for the recommendation of the Officer Commanding your Hospital.

When the request is sanctioned, please return to this office and it will receive consideration.

State clearly your Regimental No., Unit, and also the address to which you desire the remittance forwarded.

Captain,
for Chief Paymaster.