100TH, WINNIPEG GRENADIERS REINFORCEMENTS

CLASS A

ATTESTATION PAPER.

No. 2173466

Folio.

2173466

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1.	What is your surname?	TRAVIS,
1a.	What are your Christian names?	ALBERT EDGAR,
1b.	What is your present address?	253 Baker St., St. Paul, Minn. USA.
2.	In what Town, Township or Parish, and in what Country were you born?	Kenora, Ontario, Can.
3.	What is the name of your next-of kin?	Edith F. Travis,
4.	What is the address of your next-of-kin?	253 Baker St., St. Paul, Minn. USA.
4a.	What is the relationship of your next-of-kin?	Mother.
5.	What is the date of your birth?	May 16, 1894.
6.	What is your Trade or Calling?	Railway Construction.
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.
13.	Have you ever been discharged from any Branch of His Majesty's Forces as medically unfit?	No.
14.	If so, what was the nature of the disability?	-
15.	Have you ever offered to serve in any Branch of His Majesty's Forces and been rejected?	No.
16.	If so, what was the reason?	-

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, ALBERT EDGAR TRAVIS, 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.

Albert Edgar Travis (Signature of Recruit)

Date JUL 9 1917 191 . W. L. Burdick Lieut (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, ALBERT EDGAR TRAVIS, 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.

Albert Edgar Travis (Signature of Recruit)

Date JUL 9 1917 191 W. L. Burdick Lieut (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 Winnipeg this 10th day of July 1917.

(Signature of Justice)

Lieut. J.P.

M. F. W. 23.
750 M.—1-17.
H. Q. 1772-39-841.

N.B.—ATTENTION IS DRAWN TO THE FACT THAT ANY PERSON MAKING A FALSE ANSWER TO ANY OF THE ABOVE QUESTIONS IS LIABLE TO A PENALTY OF SIX MONTHS' IMPRISONMENT.

A A

Description of ALBERT EDGAR TRAVIS on Enlistment.

Apparent Age 22 years ..... months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height ..... 5 ft. 9 ins.

Chest measurement. Girth when fully expanded ..... 36½ ins.
Range of expansion ..... 3 ins.

Complexion ..... Fair

Eyes ..... Blue

Hair ..... Lt. 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).

Vision R. Eye 20/20
" L. Eye 20/20
Hearing R. Ear .....
" L. Ear .....

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 12, 1917. 191 . Edmondson

Place Winnipeg, Man. .....

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:

MOBILIZATION MEDICAL BOARD APPROVED FIT JUL 10 1917

..... PRESIDENT

..... MEMBER

J Ward Capt MEMBER

CERTIFICATE OF OFFICER COMMANDING UNIT.

ALBERT EDGAR TRAVIS

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

..... (Signature of Officer)

..... CAPTAIN

Date July 12, 1917. 191 . O. C. 100th. Winnipeg Grenadiers Reinforcement.

PUBLIC ARCHIVES OF CANADA
ARCHIVES PUBLIQUES DU CANADA
OTTAWA
K1A 0N3

2173466

TRAVIS

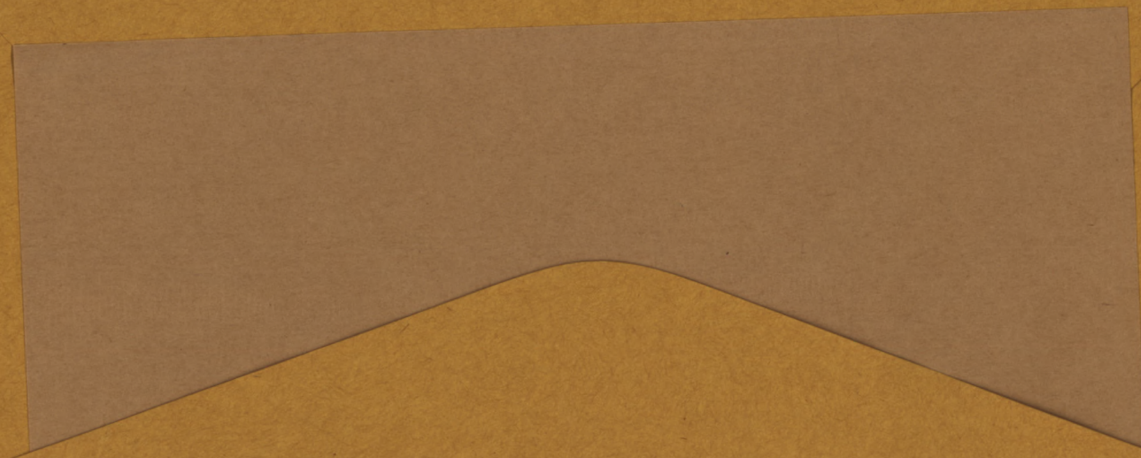
Albert Edgar

4834492

CANADIAN FORCES
RECORDS CENTRE
PERS JACKET
ROOM

A0
Box 492

ARC-111 (8-72)



Form R. 149.

Albert Edgar

Name TRAVIS Rank Pte. Reg. No. 2173466

Unit 8th Bn.

Next of Kin W.S.A.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1918						
11-8.	3 Aus. G.H. Abbeville					32619
	G.S.W. L. Thigh			A295.C.1778		
14 8	East Suffolk & Ipswich	do		B2496		24304
3-12	11 Glen Khamb Hosp	do		B3599		2412
21-12	Discharged	do		B4405		643
31-12-18	3 Rabets Seaford					

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

NAME Travis Albert Edgar

REGT'L No. 2173466.

H. Q. FILE No. 649.

RANK AND CORPS Pte. 8th Co. 1st Bn. American R.D.M.D.

FOLLOWS No. 10.

FOLLOWS

CABLE NO.	CABLE DATE	NATURE OF CASUALTY
N.O.K.		Mrs. Edith L. Travis (mother) 253 Baker St. St. Paul Minn
H.42-6. H.258.	18-8-18.	Adm. 3 Quatr. Gen. H. Abbeville U.S.A. Aug 1th 1918 G.S.W.L.Thigh.

L. L. 26438. M. & D. 8207.

M. F. W. 42—50M.—8-17.
H. Q. 1772-39-893.

LIST NO.	HOSPITAL	DATE OF ADMISSION	REMARKS
A 293	3 Aust Gen Abbeville	11-8-18	GSW L Thigh
B 296-4	East. Suffolk Ipswich	17-8-18	" " " "
B 389-3	11 Can Gen. Shorncliffe	3-12-18	" " " "
B 405-1	Discharged	21-12-18	" " "

LEDGER NO. _____ SERIAL NO. _____

REG. NO. 2173466 NAME Travis A.

RANK Pte CORPS 8th AGE _____ SERVICE _____

HOSPITALS	DATE OF ADMISSION
1 Man. Mil. Winnipeg	5-5-19
2	
3	

DIAGNOSIS G.S.W. L. thigh

TRANSFERRED TO _____

DISPOSITION G Unit S.C.R. 17.6.19. CATEGORY _____

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

P.T.O.

REMARKS:

MnB War

Number 2143466 Rank A/L/Cpl

Surname TRAVIS

Christian Name Albert Edgar

Units 8th Bn Canadian Inf. Theatre of War France

Date of Service 4.3.18

Remarks GPO

Latest Address ~~[illegible]~~

27 Britten Ave., Elmhurst,
Long Island
N.Y., U.S.A.

Roll No. B Page 12619

200m—2—21.M.

13

V

9½/26

DEPT. FEB 11 1926
REGN. No. 20479

FORM D M.S 1300

SURNAME	CHRISTIAN NAME OR NAMES	REG. NO.
TRAVIS.	A.E.	217346.
~~XXXXXXXXXX~~.		

RANK	UNIT	CO.	TROOP	BATTY.
Pte.	Man. 8.			

HOSPITAL — DATE OF ADMISSION

8. Aust, G.H. Abbeville. 11-8-18.

1. E. Suffolk H. Ipswich HOSP. 17-8-18

2. 11 C.C.S. Thorncliffe HOSP. 3-12-18.

3. HOSP.

4. HOSP.

DIAGNOSIS

1 G.S.W. L. Thigh. R.

2.

3

DISPOSITION — DATE

C.L. 16-8-18. A293/8.

19-8-18 B296-4

5-12-18. B339

24.12.18 B405

REMARKS

Disch. 21.12.18

A.M.D. 2 Dept.

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

EPITOME OF HOSPITAL TREATMENT

HOSPITAL	ADM.
1.	
2.	
3.	
4.	
5.	
6.	
7.	

100TH, WINNIPEG GRENADIERS REINFORCEMENTS

MEDICAL HISTORY SHEET

2173466

Surname ~~HAGEN~~ Travis Christian Name ~~WILLIAM LEE~~ Lewis Albert Edgar

ORIGINAL

Examined on 10 day of July 1917
at Winnipeg. Man.

Approved by [signature]

Birthplace City or Town Kenora
County Ont, Can

Rank M.O.

Apparent age 23

Trade or occupation Railway Construction

Date	Fit or Unfit	Examined for Re-Engagement	
		JUL 10 1917	M.O.
		MOBILIZATION MEDICAL BOARD APPROVED FIT	M.O.
		[signature] PRESIDENT	M.O.
		[signature] MEMBER	M.O.
		[signature] MEMBER	M.O.
			M.O.

Height 5 feet 9 Inches

Weight 150 lbs.

Chest measurement Minimum 33½ inches
Maximum expansion 36½ inches

Physical development Good.

Small-pox Marks 0.

Vaccination Marks Arm Right — Left V
Number 1

Date	Result	Vaccinations	
11/8/17		Wasmuch	M.O.
			M.O.
			M.O.

When Vaccinated last 1899.

(a) Marks indicating congential peculiarities or previous disease —

(b) Slight defects but not sufficient to cause rejection

Date	Result	Anti-Typhoid Inoculations, Etc.	
17.7.17		Wasmuch	M.O.
7.8.17		Wasm	M.O.
18.8.17		Wasm	M.O.

Vision R. Eye 20/20
" L. Eye 20/20
Hearing R. Ear

Enlisted on Par 9 day of July 1917 at Minneapolis. U.S.A.

	Corps	Regt'l Number	Habits	Date
Joined on enlistment		2173466		
Transferred to	100TH, WINNIPEG GRENADIERS #1 Bn Draft of 21/9/17	REINFORCEMENTS		JUL 9 1917 21-9-17
	18TH CAN RFS BN 8 Bn			OCT 18 1917

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

Station	Date	Disease	Result
Winnipeg Man. Canada.	25-9-17.		A2
Seaford	14-2-19	G.S.W. Left thigh	B [illegible] Rejoin Unit

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.

Trans to #1 B Draft 21-9-17. E

Surname Travis Christian Name Albert Edgar

10TH, WINNIPEG GRENADIERS REINFORCEMENTS

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
East Suffolk & Ipswich Hospital IPSWICH.		17	~~10~~ 8	18	31	10	18	GSW L Thigh	75	On admission long linear scar about 4" on outer aspect of L Thigh small sinus about middle of scar. Fairly good movement at Hip. Knee & Ankle. Joints of L side. Occasional attacks sore throat. Both tonsils fibrous.	A.B. Allen V.A. Shaw
Heathfield Aux Hosp.		31	10	18	2	12	18	"	32	Nearly healed	
No. XI CANADIAN GENERAL HOSPITAL MOORE BARRACKS, SHORNCLIFFE.		~~22~~ DEC	1918		21	~~11~~ 12	18	GSW Thigh	19	Wound healed on admission DI	R.B. Proctor Capt

DEPARTMENT OF VETERANS AFFAIRS
MINISTÈRE DES AFFAIRES DES ANCIENS COMBATTANTS

DEATH NOTIFICATION
AVIS DE DÉCÈS

TO:
À:

DATE JAN. 9, 1976

NAME
NOM TRAVIS, ALBERT E.

Service No.
Matricule Nº 2173466 ARMY WW I

CPC No.
CCP Nº 117283

WVA No.
AAC Nº —

Information Received from:
Information reçue de: NOTICE FROM FUNERAL HOME

Date of Death
Date du Décès NOV. 1, 1975

Place
Endroit N.I.S.

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

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

DVA 24 (Rev. 2/70) BIL.

To be made out in duplicate.

2173466

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..... 100TH, WINNIPEG GRENADIERS REINFORCEMENTS

(2) Regimental Number 2173466

(3) Full Name of Soldier..... Travis, Albert Edgar,

(4) Place of Birth..... Kenora, Ont., Can.

(5) Are you married, or not ? ..... Single

(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.

300M.—5-16.
1772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive ? No.

If so, state name and address ✓

(10) Is your Mother alive ? Yes

If so, state name and address Mrs. Edith Florine Travis

253 Baker St. St Paul. Minn.

(11) If your Mother is a widow Yes

Are you her sole support, or not ? No

(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 ? No

If so, in what Company ? ✓

Have you made arrangements for payment of your Insurance premium ✓

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

A. Erickson CAPTAIN

Officer Commanding.

Date AUG 8 1916

O. C. 100th. Winnipeg Grenadiers

FORM OF WILL.

I, Albert Edgar Travis (Name in full) ...TS

Regimental Number 217466 serving in 100TH, WINNIPEG GRENADIERS REINFORCEMENT

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. Edith F. Travis
253 Baker Street.
St. Paul, Minn., U.S.A.

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

absolutely, and my personal estate I bequeath to

Mrs. Edith F. Travis
253 Baker Street.
St. Paul, Minn., U.S.A.

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 10 day of July A. D. 1917

Albert Edgar Travis 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 W. E. Lunnis
Address of Witness Winnipeg, Man., Can.
Occupation of Witness Soldier
Signature of Second Witness Edward L. Titley.
Address of Witness Winnipeg, Man. Can.
Occupation of Witness Soldier.

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

L. L. Job 23216—M. & D. 8049.

ASSIGNED PAY.

MILITIA AND DEFENCE

M. F. W. 11.
15m.—6-17.
H. Q. 1772-39-818.

SEPARATION ALLOWANCE

Name Mrs E. Travis

Address 753 Baker st
St Paul
Minn U.S.A.

Relation to Soldier wife, child or mother } $15.00 Act

Name of Soldier Travis A E.

Regtl. No. 1773466

Rank Pte

Corps #1 Br Am Dpt

To what Corps belonging when called out }

OCT 17 1917

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			11/10/17 H.L.
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
Apl.				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

CONSOLIDATED ACCOUNT

ASSIGNED PAY.

MILITIA AND DEFENCE

M. F. W. 11a.
50m.—6-16.
1772—39—818.

SEPARATION ALLOWANCE

ASSIGNED PAY.

OVERSEAS CONTINGENTS

Sheet No. 2. Mrs E. Travis

Name of Soldier Travis A Cpl

PAYMENTS. Pte # 173466 #1 Br Am Dft

L. L. Job 4503.—Req. 6832.

$15.00

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept				
Oct.		E49165	15	83
Nov.		X54810	15	
Dec.		Q61910	15	
Jan.	1918		45	
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier_____

PAYMENTS.

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

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

M. F. W. 54. (A. F. B. 103.)
500M.—9-16
H. Q. 1772-39-9-20.

Casualty Form—Active Service.

Unit, Regiment or Corps #1 British Amer. Dft. 1 Man R D

Regimental No. 2173466 Rank Pte C. E. F. Name Travis, Albert, Edgar.

Enlisted (a) 9.7.17 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				
22.3.19.		T.O.S. Dispersal Station M	D.G.9.5.Pa 2		
		and Dispersed 3.4.19	D.G.9.5.Pa 3		
		Lieut. for O. C. 10 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				

2173466.

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

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

Casualty Form—Active Service.

#1. British American Dft. to Man R.D.

2173466

Unit, Regiment or Corps 100TH. WINNIPEG GRENADIERS REINFORCEMENTS

Regimental No. 2173466 Rank Private Name Travis. Albert Edgar.

C. E. F.

Enlisted (a) 9-7-17 Terms of Service (a) D.J. War Service reckons from (a) 9-7-17.

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

B.T.S. 17 INST. 7/11/10

Extended Re-engaged Qualification (b) Junior Railroad Const. Eng.

Report Date	Report From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
		Embarked Halifax N.S.		oct 4-17	R.M.R. Metagama
		Disembarked Liverpool Eng.		17/10/17	
	C/C #1 R.A.D.	Trans to 2nd Lance Corporal	St martins Plains	4/12/17	R.A.D.C.
	C/C #1 R.A.D.	Trans to 18 Res Batn no record.	St martins Plains	17/10/17	R.A.D.C. Ex Cor Lieut Draft C/C #1 Gr. Amer
OCT 30 1917	18 RES BN	TAKEN ON STRENGTH as a/Sgt	DIBGATE	18/10/17	PT II D 0288
OCT 30 1917	18 RES BN	Reverts to ranks.	DIBGATE	18/10/17	PT II D 0288
MAR 7 1918	do	Drafted to 8th Bn	do MAR	8 1918	Part II D.O. 67

CANADIAN OVERSEAS HEADQUARTERS LONDON. 6 MAR 1918

(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.

Original 1st Records Battalion (P.T.O.)

8.3.18 C. B. D. ARRIVED C. B. D. FRANCE 7.3.18 N. R. D 8.3.18

PART II ORDERS No 24 D 14.3.18

10.3.18 C. B. D. LEFT C. B. D. FOR CCRC 10.3.18 N. R. D 10.3.18

16.3.18 O. C. ....BN ARRIVED 8 BN. FIELD 11.3.18 B. 213 D 16.3.18

11.8.18. 3 Ausly. Offr. Sick L. Adm 11.8.18. G. 8040.

10.8.18. 96 Fd. Adm to Obs. 10.8.18. a/323.

14/8/18 3 Aus Gen H/S St Denis

Invalided to England and posted to Manitoba Regt. Depot, ~~Shorncliffe~~ Seaford

17/8/18 } W308 3/5766 Pt II Ord. 90 d/24/8/18

LIEUT.
FOR LT COL.
A.A.G.

23.8.18., to RD. Tos from 8th Bn Pte Seaford. 14.8.18 Pte II O. 235

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

major

27/11/19 DISCHARGED FROM 3rd C. C. D. Seaford TO RD BN. PART II O. No 49 27/11/19

for O.C. 3rd CANADIAN COMMAND DEPOT

1 MAR 1919 MRC Ceases to be on Command & Detailed to Depot Coy. Seaford 26/2/19 Pt. 2. D. O 60

1 MAR 1919 S. O. S. to Kinmel Park, Seaford 1 MAR 1919 Pt. 11. D. O. 66

Rhyl, M. D. 10. Wing

Lieut.
Manitoba Regimental Depot

Form R 122.
2353—100M—9-12-16.

CR. Rank Name TRAVIS, Albert Edgar Reg'l No. 2173466.

Unit (If in perm. Corps What Unit?) Married or Single Single.

No 1 British American Dft to Man. R.D.

Place and Date of Enlistment Winnipeg, July 9th, 1917. Place of Birth Kenora, Ont.

Name and Address, Next-of-Kin Edith. F. Travis.

253 Baker St., St. Paul, Minn., U.S.A. Relationship Mother.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

N/E. R.B. No. 18-862
File R.L.
Category C.R. Car

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.
V		Arrived in England	A.F.B. 103 CHECKED 1 MAR 1918	17-10-17	S/S Metagama
30-10-17	18th Res	Taken on strength.	a/Lc. Dibgate	18-10-17	Pte O. 288.
30-10-17	——	Reverts to ranks	—·—·—	18-10-17	Amended Pte O 304 d/15-11-17 Pte O. 288.
9-2-18	18th Res	S.O.S to 44th Bn O/Seas	Dibgate	8-2-18	Deleted Pte O 46 Pte O 40 d/15-2-18 18th Res.
8-3-18	18th Res	S.O.S to 8th Bn O/Seas	Dibgate	7-3-18	Pte O 24 Pte O 6 y d/14-3-18 8th 43rd
16-8-18	C.L. Man	Wounded.	Fld.	11-8-18.	C.L.H. A.293, G.S.W.
23-8-18	M.R.D.	D.O.S. from 8th Bn	Re Seaford	17-8-18	Pte II 235 8th 43rd Pte D 090 d/24-8-18
26-12-18	—·—	On com 3rd C.C.D	· —·—	21-12-18	—·—360 Pte D 0502 d/23-12-18
1-3-19	~·~	Ceases o/c to 3 C.C.D	" "	26-2-19	D 062
3-3-19	M.D 10	T.O.S. from M.R.D.	" "	1-3-19	D 061 & M.R.D. D 062 2-3-19

TRAVIS HILBERT EDGARD.

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.
23/3/19	MD10	Sobon trans to Can	Pte Rhyl	22/8/19	Do 81
		To. Can. 22-3-19			42-M-63

CANADIAN EXPEDITIONARY FORCE

WAR SERVICE BADGE

DISCHARGE CERTIFICATE

CLASS "A" NO. 161449 ISSUED

THIS IS TO CERTIFY that No. 2173466 (Rank) Pte

Name (in full) Travis Albert enlisted in

the 100 Bn

CANADIAN EXPEDITIONARY FORCE at Minneapolis on the 9

day of July 19 17

HE served in France

Demobilization R.O. 1420 (c)

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 25 yrs

Height 5 - 9

Complexion Fair

Eyes Blue

Hair Lt Brown

Marks or Scars GSW Lt Thigh 11-8-18

Nil

A E Travis
Signature of Soldier

W M Harvey
Issuing Officer

Lieut
Rank

Date of Discharge

Dispersal Station "M" Military District No. 10 APR 3 1919

Date 30 Apl 19

N.B.—As no duplicate of this Certificate will be issued, any person finding same is requested to forward it in an unstamped envelope to the Secretary, Militia Council, Ottawa, Canada.

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

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

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

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

P. 559
MARRIED OR SINGLE: Single

PLACE OF BIRTH: Kenora Canada

NAME AND ADDRESS OF NEXT OF KIN: Mrs Edith Travis

253 Baker St St Paul Minn U.S.A

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
Reverts to Ranks	18-10-17	B.O. 288

ADMISSIONS TO HOSPITAL, &c.

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

418

REG'L NO. 2173466 RANK ~~Lieut.~~ Pte. NAME Travis. Albert. Edgar.

IF IN PERMT. CORPS / WHAT UNIT — UNIT: 1st Bn proft. to 18th Res Bn

	TRANSFERRED TO	DATE	AUTHORITY
PERMANENT FORCE ALLOWANCES			
PLACE OF ATTESTATION: Winnipeg Canada			
DATE OF ATTESTATION: 9/7/17			

ASSIGNED PAY MONTHLY $15 00 DATE EFFECTIVE 1/10/17

PAYABLE TO Mrs Edith Travis. 253 Baker St St Paul Minn U.S.A. RELATIONSHIP Mother

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	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
1/10/17													14 00		14 00																14 00				Bal. from Canada

MONTH	PARTICULARS	CR. 1	CR. 2	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED PAY	SER. ALLCE. ENG.
								14		
Oct	L Cpl Pay 17 days Pte Pay 14 days	34 95						15 33 95		
Nov	P. Pay	33 –						15		
Dec	.	34 10		Dec AP.				15		
				Dy AR 246 MRD 26.10.17			4 87			
				AR 1152 18th Res. 24.11.17			9 73			
				" 1069 " 28.11.17			19 47	36 98 Nil		
		67 10					34 07	30		
1918 Jan	P. Pay.	34 10		AP.				15		
				AR 1305 18 Res Bn 18.12.17			9 73			
				" 1244 " 5.12.17.			9 73	36 62 Nil		
		34 10					19 46	15		

MONTH	PARTICULARS	CR. 1	CR. 2	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED PAY	SER. ALLCE. ENG.
Amts Bro Fwd.		34 10						14 00		
1918 Jan	– – – – – –									
February										
				19 46				Bal Fwd 36 98		
								15 36 62		

H 18

2173466 Pte Travis Albert Edgar. Can A. Pay. 15 00

DATE	PAY No. of Days	PAY Rate	PAY Amount $	PAY Amount c.	FIELD ALLOWANCE No. of Days	FIELD ALLOWANCE Rate	FIELD ALLOWANCE Amount $	FIELD ALLOWANCE Amount c.	WORKING OR SPECIAL PAY No. of Days	WORKING OR SPECIAL PAY Rate	WORKING OR SPECIAL PAY Amount $	WORKING OR SPECIAL PAY Amount c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No.	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		1	2			PARTICULARS						1	2	3	4	BALANCE																		
Amb Trod																	36 62. Nil																	
Febry.	9. F		30 80				A.E.										15																	
							CAR 1174 23/1/18. 1 Rec							9 73																					
							" 1359 11/1/18 "							10 70																					
							" 1504 30/1/18 "							9 73																					
							" 1574 12/2/18 "							2 43																					
																	19 83																	
			30 80											32 59			15																	
Mch	F.P.		34 10				A.E.										15																	
							CAR 1658 25/2/18 1 Rec							2 43																					
							" 1767 6/3/18 "							2 43																					
							~~AQMR 2/3/18 CAR 1767 9 73 D.~~																													
							STAR 1522 21/2/18 8 Pon							3 54																					
			34 10											8 43			15.		30 50															

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY. * ~~ENGLAND~~ OR CANADA.	SEPARATION ALLOWANCE. * ENGLAND OR CANADA.
EFFECTIVE DATE:- 1-10-17	EFFECTIVE DATE:-
AMOUNT:- 9 15 00	AMOUNT:-

NAME:- TRAVIS Albert Edgar

NUMBER:- 2173466

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.

Mrs Edith Travis
253 Baker Street, St Paul
Minn. U. S. A.
(Mother)

Stopped Effec 1.2.19

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
B028839/1/17	18/10/17	Private

UNIT AND TRANSFERS

ORIGINAL UNIT:- 1st. B. A Draft to 18th Res. Bn

DATE ACCOUNT FIRST OPENED:- 1-10-17

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			M.R.D
	1/4/18	25/4/18	8 Bn
235	1.9.18		M.A.D.

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
~~6.2.19~~	~~9752~~	~~Seaford~~	~~9 3/14~~				
~~19.2.19~~	~~10041~~	~~"~~	~~1 11 60~~				
~~24.2.19~~	~~10207~~	~~"~~	~~1 11 60~~				
			38 93				

DAILY RATES OF PAY AND ALLOWANCES

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

Discharged to Canada 28.2.19. E 3606 Seaford. 28.2.19. Seaford. M.D. 10. Dam.

PARTICULARS OF RENDERING NON-EFFECTIVE:- Rend. 28.2.19.

Ledger Bal 112.05 LPC Bal 73.15

MONTH 1918	PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Mch	Bal. fwd.								30 50		
Apl	P. Pay	33.						15.			
				A.R. 13 8 Bn. 3. 4. 18	1 78						
				" 82 " 22. 4. 18	6 25				40 47		
		33.		C.A.R.	8 03			15.			
								15.			
May	do.	34 10		A.R. 39 8 Bn. 5. 5. 18.	3 57						
				A.R. 171. " 16. 5. 18.	4 46				51 54		
		34 10			8 03			15.			
June	do.	33.						15			
				A.R. 258 10th Bn. 2. 6. 18	3 57						
				" 364 " 15. 6. 18	4 46				61 51		
		33.			8 03			15.			
July	do	34 10						15.			
				A.R. 61 8 Bn. 1. 7. 18	3 57						
				188 " 13. 7. 18	4 46						
				" 352 " 30. 7. 18	3 57				69 01		
		34 10			11 60			15.			
Aug	do	34 10						15			
				A. Rem 25699 Ipswich 29. 8. 18	9 73				78 38		
		34 10			9 73			15			
Sept	do	33.			— —			15.	96 38		
		33						15			
Oct	do	34 10						15.	115 48		
		34 10						15			
Nov. Dec.	—	67 10		C.A.R.				30			
				H.R. 58026 4.12.18 Ipswich	9 73						
Jan		34 10		A.R. 6368. 20.12.18. x Euston	48 67						
				C.A.R.	58 40			15	113 28		
		101 20			58 40			45			

NUMBER 2173466 RANK Pte NAME TRAVIS. A.E.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
1919.	Bal Fwd.								113 28		
	S.T. 21.12.18 – 31.12.18 10 days.										
	RO 302. 23.12.18 3 CCD.	7 30		@ R949. 14.1.19 3 CCD	9 73						
Feb.	P.P.	30 80		" 9450. 29.1.19 "	14 60						
				C.A.P.				15 00	~~104 95~~		
				AR 9757. 7.2.19 "	9 73				119 05		
				" 10041 20.2.19 "	14 60						
				" 2673. 8.3.19 R.C.P.K.	9 73						
				" 10147. 21.2.19 3 CCD	14 60				63 39		
		38 10			79 99			15 -			

Sailed for Canada 22.3.19.
S.L. 42 C.D.D.

11 7 05
104.75
38.93
65.82
13 12

Name Travis Enl. 9-7-17.

Date of Embarkation for England 4-10-17.

Proceeded to France. 8-3-18 Returned to England. 17-8-18 Wd.

Date returned to Canada. 22-3-19

P.R.2855.

(over)

Ethel 2-2-27

Cas. Sheer.

10-8-18 — Y. S. W. Lgr. Zligh

—— To Eng. 17-8-18

No. xi Canadian General Hospital,
Moore Barracks, Shorncliffe.

..12..1..15..... 1915.

rd. 3 No. 2/17946 Rank. Pte. Name. Travis Unit 9th Can. Bn.

I hereby certify that I have this date examined the above named soldier and find him to be free from Infectious Disease, Transmissible Skin Disease, Venereal Disease and Vermin.

.....P Prendergast Capt.....
Captain, C.A.M.C.

ing trial that fact must be stated in the remarks column.

N.C.O's ON 3380.
DRAFTS

R.O.No.3357 is cancelled and following substituted therefor:-

" Non-commissioned Officers other than acting Non-commissioned Officers, before being included in a draft for overseas, must resign their stripes in order to proceed overseas as acting Non-commissioned Officers.

M.D. 10. M

Grout 19

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

1. No. 2173466

2. Rank. Pte

3. Name. Travis A

4. Unit. C D D 1st B. A.D. Draft

5. Date of Discharge | 3. 4. 19 | Place Wpg

SAILING NO 47
S S REGINA FROM
L'POOL 22. 3. 19

6. Reason for Discharge Demob.
A
Mother

MEDICAL DOCUMENTS
FORWARDED TO
[illegible] or P.R.C.
on
14/5/19

7. Authority. D.G.D.S

8. Proposed Residence after Discharge Wpg

H

War Service Badge
Class "A" No. 161449

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.?

A E Travis
Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

[C.R.A.]

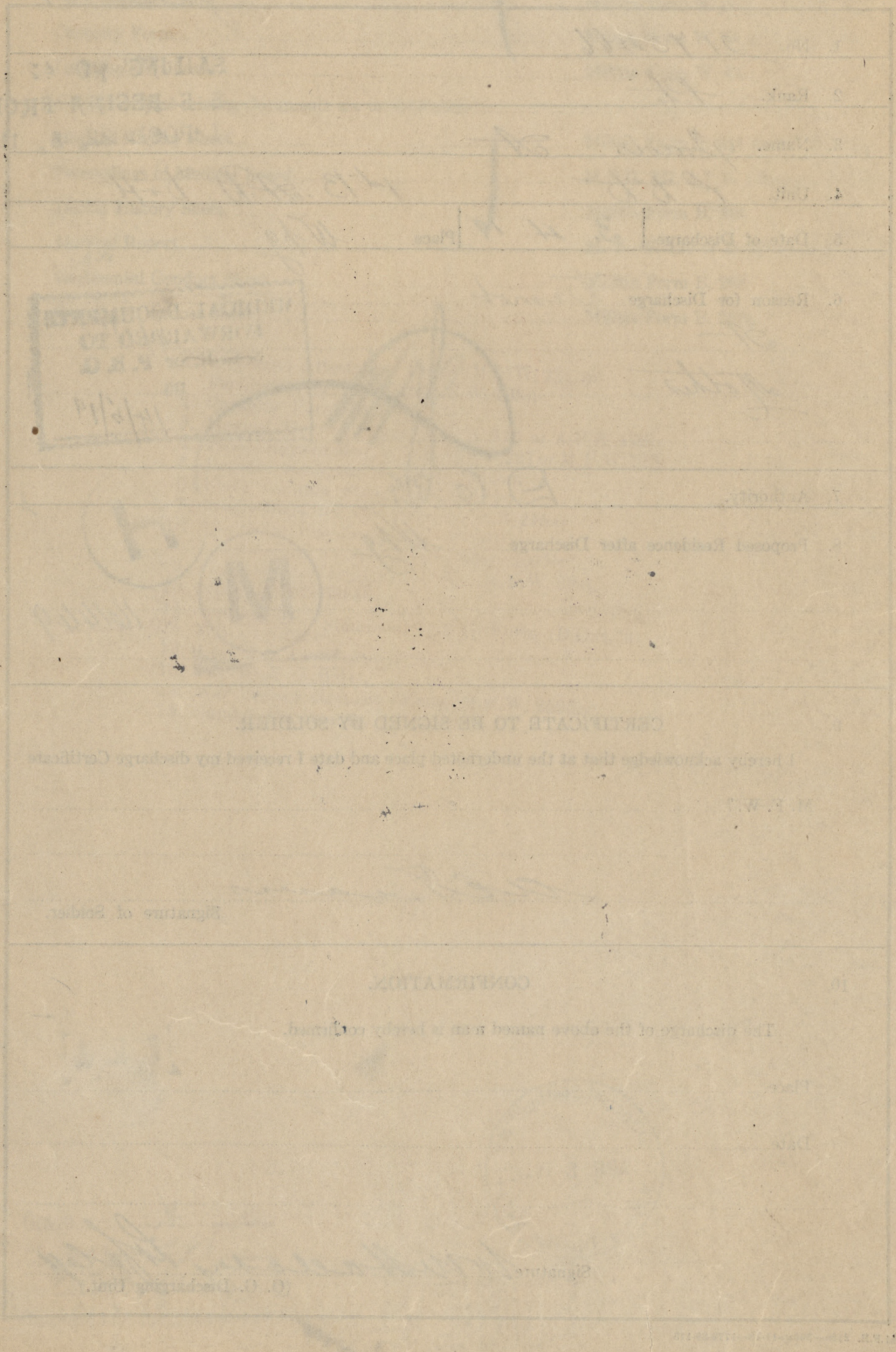
Place

Dispersal Station "M"
APR 8 1919
Military District No. 10

Date

Signature W Whitacre Capt
(O. C. Discharging Unit.)

M.F.B. 218a—300M.-11-18—1772-39-113.



LIST OF DISCHARGE DOCUMENTS.

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

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

Group.....A.....
Checked by No. 261
.....
Date 21/2/19

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 SEAFORD. DATE 14th February 1919

1. 1 (a) Unit 6-6-D. (b) Regimental No. 2173466 (c) Rank Pte.,

(d) Surname TRAVIS, (e) Christian name ALBERT, E,

(f) Home address 253 BAKER St St PAUL, MINN.

(g) Next of Kin MRS. E. F. TRAVIS, (h) Relationship MOTHER

(i) Address of Next of Kin 253 BAKER. St. St. PAUL, MINN

2. Age last birthday 24 Date of birth 16th May, 1894

3. Enlistment, or Appointment (if an Officer) (a) Place WINNIPEG MAN (b) Date 9th July 1917

4. Personal description:

(a) Height 5 ft 10 in (b) Weight 160 est. (stripped) (c) Complexion Dark.

(d) Colour of hair dark brown (e) Colour of eyes blue (f) Identification marks, Scars, etc.

5" scar mid. 1/3 anter. surface left thigh.

5. Former trade or occupation Surveyor. (Ry construction)

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
	one	219

	Periods	
	From	To
Canada	9-7-17	1-10-17
England	1-10-17	7-3-18
	17-8-18	& present date
France or other theatres of War	7-3-18	17-8-18.

7. Original disease, or injury Laceration of Thigh Muscles L.

(a) Date of origin 9-8-18 (b) Place of origin France.

(c) Cause G.S.W. + surgical operations (four)

M. F. B. 227.

300M.—8-18.
1772-39-117.

8. Present disability— (Here state the exact nature of the disability resulting from the disabling conditions: e.g. (a) Weakness—slight, moderate, marked, etc; (b) Loss, complete or partial, of an organ or member, or of its functions; (c) Necessity for rest of the body, or of some of its parts, for therapeutic reasons; (d) Any other restrictions in choice of occupation.)

Adherent scar L. Thigh (mid. ⅓ anteriorly)
myalgia + neuralgic pains radiating into knee.

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.)

General condition good; well developed + nourished.
Heart, lungs, abdomen, negative.
L. Thigh: 4" linear scar on mid. ⅓ anterior surface, adherent + tender; some shrinking of quadriceps: no limitation of movements, but pain on full flexion of leg on thigh due to deep adhesions of scar tissue.

Man states leg is weak on walking, and he limps; knee seems to give way when it tires, as he has not the control of muscles. Has some radiating pain to knee mostly when knee is flexed.

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

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

Special Senses No. Respiratory System No. Integumentary System No.

Disturbances of Mentality No. Digestive System No. Muscular System No.

Osseous and Joint Systems No. Any other general condition No.

All systems negative

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

Wounded on 9-8-18 by bullet. Operated on in France but bullet not removed. evacuated to England on 17-8-18 and bullet removed by second operation. Man states he was operated on twice subsequently during Sept./18 for hemorrhages. Left hospital with wound healed on 21-11-18.

D

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*).)

Trenchfeet in Sept. 1918. — Bowels chronically enlarged and but not at present a disability.

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

4" linear scar mid. 1/3 left thigh — anteriorly.

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

(*b*) If so, has it been aggravated by Service? (If aggravated, give a description, as far as it is possible to do so, of the disabling condition at time of enlistment.)

N. A.

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

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

Bullet removed in England — E. Suffolk Hosp.

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit?

(If the answer is "yes" state nature of treatment required and probable duration)

no.

16. Can the former trade or occupation be resumed? Yes — after a few months.

(If not, briefly state why)

17. Recommendations

nil.

J. McCulloch, Capt.

Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

(Sections 7, 8, 9 and 10 are to be read to the invalid and either "satisfied" or "not satisfied" struck out).

I, the undersigned Albert E. Travis. 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

A E Travis Rank.

Signature of invalid examined.

D

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 B ii
(*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.)

Remarked for return to Canada
with A. A. Telegram 9083 11-11-15

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.

S W Macneil Capt *President.*

PLACE Seaford

D. P. Byers capt } Members

DATE 14-2-19

TO BE COMPLETED WHEN TREATMENT IS REFUSED

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

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

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

President.

PLACE.....

DATE..... } Members

APPROVED BY

for Wallace Capt.
Assistant Director of Medical Services.

DATE.....

APPROVED BY

Director-General of Medical Services.

DATE.....

OFFICE STANDING MEDICAL BOARD
16 FEB 1919
SEAFORD, SUSSEX.

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS **T** 4702

Date of Assignment Oct 1-17

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

15			

8413-1-1

PARTICULARS OF SEPARATION ALLOWANCE

No. 173466

Rank Pte Promoted Reverted Discharge

Soldier's Name A. E. Travis

Battalion #1 Br. Am D ft.

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name Mrs E. Travis

Address 253 Baker St

Change of Address St Paul Minn U.S.A.

1

2

3

4

18181-9-7

Date	Cheque No.	Amount S/A	Amount A/P	Total		REMARKS
31 12/17			~~45.00~~	~~45.00~~		
Jan 18	66197		15	15		
Feb	N 73531		15	15	S	
Mar	W 91154		15	15	✓	
April	W 7213		15	15	✓ 54.	
May	T 18662.		15	15	✓ 54.	
June	Z 16417		15	15	✓ 54.	
July	Z 27850		15	15	✓ 54.	
Aug.	Z 40644		15	15	✓ 54.	
Sept.	Z 54811		15	15	✓	
Oct	Z 69824		15	15	—	
Nov	Z 84394		15	15	—	
Dec	Z 100585		15	15	—	
Jan	Z 114936		15	15	—	
Feb	Z 127885		15	15		
Mar	Z 139619		15	15		
~~Apr~~			~~15~~	~~15~~		
			270	270		

A/c Closed 31/3/19

Ret'd per Regina No 10

Date 31/3/19 M.F.W.187 5/4/19

Clerk 18181-a-7

No 67699 OR 1178

M. F. W. 128.
4'Om. 6-17—1772-39-1141
L. L. 22320—M. & D. 7303.

A STENCIL HAS BEEN MADE FOR THIS ACCOUNT

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

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Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

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

M. F. W. 128.
4'Ott., 6-7-1172-39-1141
L. L. 22330—M. & D. 1933.

Regina MAR 29 1919

AUDITOR | PAYMASTER

M. & S.

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

REGT. No. 2143466 RANK Pte NAME (IN FULL) Travis a (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN — RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? Nil DATE EFFECTIVE

TO WHOM PAID — RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F. 100 Bn

IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION — TRANSFERRED TO Dis Stn M — DATE MAR 22 1919 — AUTHORITY D095

DATE OF ATTESTATION — TRANSFERRED TO

ASSIGNED PAY $ 1/5 00 — DATE EFFECTIVE July 9 - 17

PAYABLE TO Mrs E Travis — RELATIONSHIP

ADDRESS 253 Baker St. St Paul. Minn. USA

ANY CHANGE IN ASSIGNEE OR ADDRESS: Merchants National Bank St. Paul Minn USA.

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

DISCHARGED — PLACE MD 10 — DATE APR 3 1919 — REASON D — AUTHORITY D095 — IF ENTITLED TO POST DISCHARGE PAY

MONTH 1919	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	C.	$	C.	TOTAL CREDITS $	C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	DATE	COL. NO. 2 NO.	DATE	COL. NO. 3 NO.	DATE	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.	$	C.	TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT																																				BAL. ENG. L. P. C.
28-2-19							73	12	73	12							9 73																		73 12	Cr 73 12
																	4 87																			Clothing Allce. 1st payment W.S.G.
																	5 00																			Advances - Boat - Train
1-3 6/12-4	42	1.0	46	20	35 70	00	73	12	224	32	329						174	73									30	00		224	32					A. P. chgd. on Eng. L. P. C. to
																																			Dr A & P March + April
					W. S. G.						War Service Gratuity,														W. S. G.										Soldiers Dependent
122 Days @ minimum			280	00			280	00																	70	00	8	80			201	20	Nil		1st Payment W. S. G. as above
30 Days			60	00																											216	20	"		Dr 8 days O.T.P.P.
4.5.19.																				563	18		40	-							146	20			Cr A Rapid not paid
June 6																				75	82	3	70	-							76	20			To 30 days
July 5																				78	33	07	76	20											76 20 Th
							295	-																	286	20	8	80			295	-			
											a/c closed 5.7.19																									

AUDITED JUL 14 1919 Auditor-General