REGIMENTAL DOCUMENTS

NAME Acteson Earl REGT. NO. 911917 UNIT 46th Bn H. Q. FILE NO. 871

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
1	ATTESTATION PAPER (M.F.W. 23, 133, or 51)	46	H			DEATH
2	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
	TRAINING HISTORY SHEET (M.F.W. 113)					
2	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
1	REGT. CONDUCT SHEET (M.B.W. 263 or A.F.B. 120)					
1	COMPANY CONDUCT SHEET (M.F.B. 263A or A F.B. 121)					
2	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
	DENTAL HISTORY SHEET (M.F.B. 465)					Category
2	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					
	MEDICAL EXAMINATION (M.F.W. 129)					MED UNFIT.
	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
1	LAST PAY CERTIFICATE (M.F.W. 44)					
	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					
	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
1	Small Sheet.					
1	Statment on Discharge.					
1	Dental Certificate					
1	M. 7 W 125.					
1	M. 7 W 67					
5	Form dB 5					
4	Proceeding of Med. Board.					
2	A 7 2. 1234.					
1	A. and D Card.					
2	Cas Cards.					

Dec'd 30-10-19

W 2509
1C0M-11-19

6719 196 Can.

Original

ATTESTATION PAPER.

No. 911917

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

196TH OVERSEAS BATTALION Canadian Expeditionary Force WESTERN UNIVERSITIES B. C. COMPANY ORDERLY ROOM

CANADIAN RECRUITING DEPOT 5/6/16 VANCOUVER B.C.

196TH OVERSEAS BATTALION Canadian Expeditionary Force WESTERN UNIVERSITIES ORDERLY ROOM

QUESTIONS TO BE PUT BEFORE ATTESTATION.

	(ANSWERS)
1. What is your surname?	Acteson,
1a. What are your Christian names?	Earl.
1b. What is your present address?	2129 Arbutus St. Vancouver B.C.
2. In what Town, Township or Parish, and in what Country were you born?	Quebec Can.
3. What is the name of your next-of kin?	Mrs. Earl Acteson mary
4. What is the address of your next-of-kin?	2129 Arbutus St. Vancouver B.C.
4a. What is the relationship of your next-of-kin?	Mother.
5. What is the date of your birth?	10 October 1897.
6. What is your Trade or Calling?	Clerk.
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, Earl Acteson, 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.

Earl Acteson (Signature of Recruit)

Date June 5th 1916 G. Drew (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Earl. Acteson, 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.

Earl Acteson (Signature of Recruit)

Date June 5th 1916 G. Drew (Signature of Witness)

CERTIFICATE OF MAGISTRATE.

The Recruit above-named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath before me, at Vancouver this 5th day of June 1916.

C. Kenneth Mc (Signature of Justice)

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

6719

Description of Acleson Earl on Enlistment.

Apparent Age 18 years 8 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height		5 ft 4 1/2 ins.
Chest measurement.	Girth when fully expanded	34 ins.
	Range of expansion	3 ins.
Complexion		fair
Eyes		brown
Hair		Auburn
Religious denominations.	Church of England	✓
	Presbyterian	
	Methodist	
	Baptist or Congregationalist	
	Roman Catholic	
	Jewish	
	Other denominations (Denomination to be stated.)	

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

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

1 Vac. h.

Scar op. varicocele h.

Vision 20/30 both eyes.

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 June 5 1916. J. Macdonald Capt. C.A.M.C.

Place Vancouver B.C. 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.

Earl Acleson 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.

R. V. Brock (Signature of Officer)

Major O. C. B. C. Company,
196th O.S. Batt., C.E.F.
Western Universities

Date June 5th 1916.

4

n D.M.S. 1394.
100M.—5/2/17.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at Epsom. Surrey. Sept. 18th 1917.

No 911917 Rank Pte. Name Acteson E.

Local Unit ½ Overseas Unit 46th Bn. Age 19

Examination held at Epsom½ Surrey.

DISABILITY.
Overseas—Local (scratch one out).

WEAKNESS OF RIGHT HIP

PRESENT CONDITION.

Large vertical scar over left buttock, adherent to Ileum.
Can walk two or three miles if he takes his time.

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 C III Unlikely to be Remanded in Category within 6 months.

5. Discharge ..... Clerk in Wholesale Dry Goods Student.

Signatures:—

Members { A. L. Garvey Maj ..... President.
S. C. D. Wyatt Capt.
.....

APPROVED

Dated Oct 18th 1917. A. L. Garvey Maj
For A.D.M.S.

Date of Enlistment

June 5. 1916.

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

Nov. 1st 1916

RATE OF SEPARATION ALLOWANCE

~~20~~	25. 1-12-17. P.C. 3257.		

RATE OF ASSIGNMENT

$18-			

12 1a 2 1 45

PARTICULARS OF SEPARATION ALLOWANCE

No. 911917

Rank Ste. Promoted Reverted Discharge

Soldier's Name E. Acteson

Battalion ~~196th Batt. C. E. F.~~ No 11 S.S.Co.

Beneficiary Mrs. Mary E. Acteson

Relationship Widowed Mother.

Address

PARTICULARS OF ASSIGNMENT

Name Mrs. Mary E. Acteson

Address 2141. Arbutus St. Vancouver B.C.

Change of Address

1

2

3

4

Date		Cheque No.	Amount S/A	Amount A/P	Total	
Sept 30-17.			317	198	515	
Oct	B	50241	20	18	38	
Nov.	B	51941	20	18	38	
Dec.	B	52538	20	18	38	
~~Jan/18~~	~~B~~	~~63984~~	~~20~~	~~18~~	~~38~~	
			377	252		

REMARKS

S.A. 31-12-17

A/c Closed A.P. 31-12-17

A.P. $252.00

S.A. $377.00

Ret'd per Saxonia

Date 17-11-17 F. X. 16-12-17

Clerk G.R. A.P.

Trans to No 11 S.S. Co. 8-1-18
auth MD 11 of 8-2-18 weekly File 73-E-2

M. F. W. 128
400M.—6-17—172-589-1141
L. L. 22320—M. & D. 7693.

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

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

M. F. W. 128
400m.—6-17—177-39-1141
L. L. 22320—M. & D. 7693.

CONFIDENTIAL INFORMATION

Report No.	Class	Category	No. of M.H.C. File	No. of Local File	No. of H.Q. File
HEH 2640 J	Duty	C-111			

Acteson, Earl F.
2141 Arbutus Street,
Vancouver, B.C.

No. 911917 Rank Pte. Original Unit 196thn Present Unit 46th

Age 19 Height ft 5 ins. 7 Complexion N O Eyes R E C O R D S. Hair Character

Date of enlistment 5-6-16 Where enlisted Vancouver Where seen service Frande.

Ship returned by Gamma 25 Date of arrival 30-11-17 Port of arrival Hfx.

Birthplace Canada Religion C of E.

Name and address next of kin Mother, Mrs.M.E.Acteson, above address.

Notification of return to be sent to -do-

Cause of disability Loss of tissue of left ilium and muscle tissue of glutens, GSW.

Condition which prevents the soldier from earning a full livelihood

2 months in France. Wounded Apr.12-17 in left hip and buttock, fracturing he says the pelvis. Pres.cond:- Gen. appear. good. Says he was 19 on Oct.19th,1917. Has a long 7" scar from crest of left ileum backwards and downwards to sacrum, adherent to bone. Some of the bone tissue of illeum is gone and fibres of the glutens have been severed. Backward movement of left leg is limited as well as flexion on thigh (about 90 deg) Heart and lungs normal. Complains of tenderness about scar. Can walk about 2 miles. Denture recommended.

Degree of incapacity (Please state in fractions) Eng. Board -- Canadian Board 20% decreasing

Probable duration of incapacity 6 months. Does it render him perm. unfit for Military

Is final disability likely to prevent return to previous occupation? Service? No.

Recommendation of Canadian Board Duty

Destination to which transportation issued Vancouver.

Members of Board K.C.CAIRNS CAPT. A. HAIG CAPT. R.B.COX CAPT. W.M.CARRICK MAJOR

INFORMATION TO BE FURNISHED BY SOLDIER

DEPENDENTS	NAME	AGE	WHERE—IF EMPLOYED	WAGES	STATE OF HEALTH
Wife					
Children 1	Mother	48			Poor
2					
3	Sep.allowance				
4	Assigned pay				
5					

Occupation prior to enlistment Dry goods clerk

Regular trade or profession Student High School.

Average earnings previous to enlistment 25.00 a mo (2nd term) Any other income?

Name and address of last employer J.B.Thompson, & Sons.

Rent per month If purchasing property amount due and annual payment, $ $

Taxes If Homestead, when is patent due?

If carrying life or accident insurance, annual premium 25.00 Prudentisl.

If in receipt of sick benefits or other insurance—name of society Amt. per mo. $

If unable to follow previous occupation, name preference Undecided.

At what age soldier left school? What grade, standard, &c., was he in?

Has he taken any Technical or Continuation Classes, if so what?

Whether given Vocational Training while in Hospital in England. If so, what subjects?

References Last empl.

Witness E.M.McNaughton

Date Quebec 5-12-17.

I declare that the above statement is correct.

Signature E. Acteson

Recommendation by Interviewer as to classes likely to be of use, and general remarks:

Last Pay Cert. Cr., $ Dr., $ Amount paid at Depot H. Q., $ L. P. C. leaving Depot, $

Amount forwarded to H. Q. Unit, $ Credit Clothing allowances, $

Transf'd to Unit—Date Transf'd Class 1—Date Transf'd Class 3—Date

PENSION—Class..... Amount per year, $..... Period granted for..... Dating from.....

First payment date.....

Form No. 5c.

CLASS 1.—Men for immediate discharge without a pension.
(a) Unfit for overseas service but capable to take up their previous civilian occupation.
(b) Disability not the result of service or involving claim as the result of or aggravation by service.

CLASS 2.—Men whose condition may be benefitted by further medical treatment or rest in a Convalescent Home, Hospital or Sanatorium. If deemed advisable, in some cases, the medical officer in charge of the Convalescent Home, Hospital or Sanatorium may grant these men leave to return to their own homes and families for a definite period

CLASS 3.—Men having a permanent disability which would not be benefitted by further medical treatment (such disability due to or aggravated by service) and whose cases will immediately be considered by the Pensions Board with a view to pension.

CONFIDENTIAL INFORMATION

REGT. No.	Class ..... Category	M.H.C. Ltr. No. & Date	Last Pay Ltr. No. & Date	H.Q. Ltr. No. & Date

Name ..... Rank .....

Unit ..... Trade .....

Date of enlistment ..... Where enlisted ..... Date of arrival .....

Ship returned by ..... Port of arrival .....

Birthplace ..... Religion .....

Name and address next of kin .....

Notification of return to be sent to .....

Cause of disability .....

Condition which prevents the soldier from earning a full livelihood .....

Degree of incapacity (Please state in fractions) Ent. Board ..... Canadian Board .....

Probable duration of incapacity .....

Is final disability likely to prevent return to previous occupation? .....

Recommendation of Canadian Board .....

Description to which transportation issued .....

Stamps of Board .....

INFORMATION TO BE FURNISHED BY SOLDIER

STATE OF HEALTH	WAGES	WHERE EMPLOYED	AGE	DEPENDENTS NAME
				Wife
				Children 1
				2
				3
				4
				5

Occupation prior to enlistment .....

Regular trade or profession .....

Average earnings previous to enlistment ..... Any other income? .....

Name and address of last employer .....

Rent per month ..... If mortgaged, when is bayment due? .....

If mortgaging property amount due and annual payment? $ ..... $ .....

Taxes ..... If Homestead, when is bayment due? .....

If carrying life or accident insurance, annual premium .....

If in receipt of sick benefits or other insurance—name of society ..... Amt. per mo. $

If receiving pension—Class ..... Amount per year, $ ..... Period granted for ..... Dating from .....

First payment date .....

Form No. 8c.

Last Pay Cert. Cr., $	Dr., $	Amount paid at Depot H. Q., $	L. P. C. leaving Depot, $
Amount forwarded to H. O. Unit, $		Credit Clothing allowance, $	
Transf'd to	Unit—Date	Transf'd Class I—Date	Transf'd Class 3—Date

Recommendation by Interviewer as to classes likely to be of use, and general remarks: .....

Date .....

Witness .....

References .....

Was after any Vocational Training while in Hospital in England. If so, what exploits;

Has he taken any Technical or Continuation Classes, if so what;

At what age left school; What grade, standard, &c., was he in;

If unable to follow previous occupation, name briefly

If in receipt of sick benefits or other insurance—name of society ..... Amt. per mo. $

If carrying life or accident insurance, annual premium .....

Taxes ..... If Homestead, when is bayment due? .....

Rent per month ..... If mortgaging property amount due and annual payment? $ ..... $

Name and address of last employer .....

Average earnings previous to enlistment ..... Any other income? .....

Occupation prior to enlistment .....

Regular trade or profession .....

DEPENDENTS NAME	AGE	WHERE EMPLOYED	WAGES	STATE OF HEALTH
Wife				
Children 1				
2				
3				
4				
5				

INFORMATION TO BE FURNISHED BY SOLDIER

Stamps of Board .....

Description to which transportation issued .....

Recommendation of Canadian Board .....

Is final disability likely to prevent return to previous occupation? .....

Probable duration of incapacity .....

Degree of incapacity (Please state in fractions) Ent. Board ..... Canadian Board .....

Condition which prevents the soldier from earning a full livelihood .....

Cause of disability .....

Notification of return to be sent to .....

Name and address next of kin .....

Birthplace ..... Religion .....

Ship returned by ..... Date of arrival ..... Port of arrival .....

Date of enlistment ..... Where enlisted ..... Where seen service .....

No.	Rank	Original Unit	Present Unit	Character
Age	Height	Hair	Complexion	Eyes

Form D.M.S. 1394.
7004.—100M.—5/2/17.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at Epsom. Surrey. Sept. 18th 1917.

No 911917 Rank Pte. Name Acteson B.

Local Unit 46th Bn. Overseas Unit Age 19

Examination held at Epsom, Surrey.

DISABILITY.
Overseas—~~Local~~
(scratch one out).

WEAKNESS OF RIGHT HIP.

PRESENT CONDITION.

Large vertical scar over left buttock adherent to Ilium.
Can walk two or three miles if he takes his time.

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 C 111. Unlikely to be raised in category within six months.

5. Discharge Clerk in wholesale dry-goods- Student.

Signatures :—

Members { H. L. Pavey Maj. President.
S. R. D. Hewitt Capt.

APPROVED

Dated October 18th 1917. H. L. Pavey Maj

For A.D.M.S.

PRESENT CONDITION

PROCEEDINGS OF A MEDICAL BOARD

Duplicate Copy

28663

GR487

MEDICAL HISTORY SHEET

Surname Acteson Christian Name Earl

Examined { on 5th day of June 1916
at Vancouver BC

Birthplace { City or Town Quebec
County Canada

Apparent age 18

Trade or occupation Clerk.

Height 5 feet 4 1/2 Inches

Weight 145 lbs.

Chest measurement { Minimum 31 inches
Maximum expansion 3 inches

Physical development Good

Small-pox Marks None

Vaccination Marks { Arm Right Left
Number 1

When Vaccinated last 1908

(a) Marks indicating congential peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

Approved by J.A.M. Macdonald
Rank Capt CAMC M.O.

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

Date	Result	Vaccinations	
1916 Sep:22	Nil	JW Walker	M.O.
Octg		JW Walker	M.O.
			M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.	
1916 July 2	Good	JW Walker	M.O.
" 9	"	JW Walker	M.O.
" 16	None	JW Walker	M.O.

Enlisted on 5th day of June 1916 at Vancouver BC

	Corps	Regt'l Number	Habits	Date
Joined on enlistment	196th Btn C.E.F.	911917		
Transferred to	46th Btn			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

Station	Date	Disease	Result
Epsom	Oct: 18/17	GSW Left Buttock	C III HR Gavey Major

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.

Surname Acklesm Christian Name Earl

STATION	Date of Arrival at the Station	Dates of Admission into Hospital			Dates of Discharge from Hospital			DISEASE	Number of days in Hospital	Remarks on nature of the disease; how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer
		Day	Month	Year	Day	Month	Year				
Asburne Sunderland		21	7	17	30	8	17	GSW L Buttock	40	Wd Healed	W Robinson
MCH Epsom.		30	8	17	29	10	17	"		Boarded C III	MC Mins Capt.

C A N A D I A N E X P E D I T I O N A R Y F O R C E

L A S T P A Y C E R T I F I C A T E

Regimental Number 911917 Rank Pte Name Acteson, E. (1964)

Corps "X" Special Service boy who was (z) Discharged

on 16th Feb. 1918 to .....

(z) Insert "Discharged" or "transferred"

The following is a statement of the account of the above named from 1-2-18 to 16-2-1918 the inclusive date of transfer or discharge.

DEBIT		CREDIT	
Bal. Dr. from previous month		Bal. Cr. from prev. month	
Advances by cheque P.A. 987	22.38	Reg'l Pay 16 days at 1-00	16.00
Assigned Pay ~~and Sepn. Allce Number~~		Field Allce 16 days at 10c	1.60
Other charges R.C. Sep. All. Jan 8/12	.25	Sepn Allce monthly	
Payment on transfer or discharge Number 988	30.00		
	79.35	Other allowances Clothing S.A. ~~Kit~~	13.00
Bal Cr. (to be paid by new unit)			43.38
		Other credits	
		Bal. Dr. (to be deducted by new unit)	58.00
TOTAL	131.98	TOTAL	131.98

A monthly stoppage of 9.00 has been paid on account of Assigned Pay for the month of Feb. A/P 18.00 1918) and Separation Allce. for month of Jan. - Feb 16th 1918) (to)

Assignee

Address: Mrs M. E. Acteson

2141 Arbutus St. Vancouver B.C.

~~Night letter gram. Paymaster General Ottawa 2-18-2-18~~

Insert amount to be assigned, whether it has been paid or not.

Insert "not" if amt. has not been paid for period of acct

~~Service~~ State (1) Date of enlistment 5.6.16

(2) If married and if separation allce. card has been submitted S.A.

(3) Cause of discharge D.C.O. 1117 Authority 34-A:148.

(4) Authority for transfer ..... Dated 12.2.18.

Note: Separation allce. and assigned pay card and index card (~~A.F.~~ 71) are to ~~xxx~~ 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 Lists of the Unit.

Date 19-2-18

Place Vancouver B.C.

R.G. Monteith Major

for ..... Paymaster

DUPLICATE
B. C. Co.
196 O/S Batt. Western Universities

MEDICAL HISTORY SHEET

Surname Ackeson Christian Name Earl

Examined on 5th day of June 1916 at Vancouver B.C.

Approved by J. W. Macdonald

Rank Capt. C.A.M.C. M.O.

Birthplace: City or Town Leeds; County Canada

Apparent age 18

Trade or occupation Clerk

Height 5 feet 4 1/2 Inches

Weight 145 lbs.

Chest measurement: Minimum 31 inches; Maximum expansion 3 inches

Physical development Good

Small-pox Marks None

Vaccination Marks: Arm Right Left; Number 1

When Vaccinated last 1908

(a) Marks indicating congential peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

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

Date 1916	Result	Vaccinations	
Sep 22	Nil	J.W. Walker	M.O.
Oct 9		J.W. Walker	M.O.
			M.O.

Date 1916	Result	Anti-Typhoid Inoculations, Etc.	
July 2	Good	J.W. Walker	M.O.
" 9	"	J.W. Walker	M.O.
" 16	None	J.W. Walker	M.O.

Enlisted on 5th day of June 1916 at Vancouver B.C.

	Corps	Regt'l Number	Habits	Date
Joined on enlistment	196th Bn C.E.F.	~~911917~~ 911917		
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

Station	Date	Disease	Result

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.

Surname ..... Christian Name .....

STATION	Date of Arrival at the Station	Dates of Admission into Hospital			Dates of Discharge from Hospital			DISEASE	Number of days in Hospital	Remarks on nature of the disease; how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer
		Day	Month	Year	Day	Month	Year				

911917

Acteson

To be made out in duplicate.

H.Q. 54-21-23-53

196th OVERSEAS BATTALION
WESTERN UNIVERSITIES
ORDERLY ROOM
Canadian Expeditionary Force

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 196th (Western Universities) Battalion

(2) Regimental Number 911917

(3) Full Name of Soldier Acteson, Earl

(4) Place of Birth Quebec.

(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? No.

(8) Have you any children? No.

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 Mary Ellen Acteson,
2129 Arbutus St., Vancouver.

(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 ? 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.

W. W. Lougheed
Officer Commanding.
MAJOR & ADJUTANT
196 O/S BATTALION C E F

Date OCT 10 1916

No. 911917 Name Acteson, Earl. Sqn., Batty., or Company } D Corps 196th O. Bn. C.E.F. Date of enlistment } 5/6/16 G.C. Badges } Service or Proficiency Pay }

Date of last entry in Company Conduct Sheet } nil No. and date of last drunk } — Period not reckoning towards freedom from extra fine } — Sheet No. 1 Signature O.C. Company, etc. } O.C. Rec. J. W. Lowe Capt. Character } Good

Place	Date of offence	Rank	Cases of Drunkenness	Offence	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remarks
Seaford	16.2.17	Drafted to 46th Batt. O'Leans. Part 2 1047						W.M. Gouveneur Lt	
				Wounded Sask. Reg. Dup. 16-4.17. auth.		Part 2 H 66.	28.4.17.		
								46th Can. Infantry	Capt

Seaford 1/6/17 absorbed into 19th Reserve Battalion

Army Form B. 122

[P.T.O.

W. 16575/M, 237. 2,000M. J. P. & Co., Ltd. (C 1309). Forms/B122/4.

Place	Date of offence	Rank	Cases of Drunkenness	Offence	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remarks

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 11a.
50m.—6-16.
1772—39—818.

Sheet No. 2. M. E. Acteson W/ Mother Name of Soldier Acteson Earl

L. L. Job 4503.—Req. 6832.

Month.	Year.	Cheque No.	Amt. Pte.		Remarks.
April	1916				
May					
June					
July					
Aug.					
Sept.					
Oct.		L 21300	97		97
Nov.		P 24387	20		20
Dec.		U 27010	20		20
Jan.	1917	A 28526	20		20
Feb.		A. 31469	20		20
March		A 34673	20		20
April		B 103	20		20
May		B 3558	20		20
June		C 7130	20		20
July		B 11440	20		20
Aug.		L 13779	20		20
Sept		C. 17230	20		20
Oct.			20		
Nov.					
Dec.					
Jan.	1918				
Feb.					
March					
April					
May					
June					
July					

317 00

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.				

L. L. Job 4503.—M. & D. 6334.

5/6/16

MILITIA AND DEFENCE

M. F. W. 11.
50m.—6-16.
H. Q. 177-39-818.

SEPARATION ALLOWANCE

Name Mary E. Acteson

Address ~~2129~~ 2141 Arbutus St Vancouver B.C.

Relation to Soldier wife, child or mother } Widowed Mother

Name of Soldier Acteson Earl

Regtl. No. 911917

Rank Pte

Corps 196 Bn

To what Corps belonging when called out }

PAYMENTS

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

CONSOLIDATED 1 ACCOUNT

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a.
50m.—7-16
1772—39—819.

L. L. Job 5470—Req. 6888.

Sheet No. 2. Mrs Mary E. Acteson
(Assignee)

Name of Soldier. Acteson, E. #911917 - 196 Batt.

$18.-

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			NOV 1 1916
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.		a 33422	18	
Dec.		V 34764	18	
Jan.	1917	a 38454	18	
Feb.		a 43430	18	
March		a 49353	18	
April		B 201	18	
May		B 6180	18	
June		B 14180	18	
July		O 21261	18	
Aug.		C. 26222	18	
Sept.		C 33494	18	
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier_____

PAYMENTS.

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

L. L. Job 4503.—M. & D. 6332.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

17/4/17
P. ASW

M. F. W. 12.
50m.—6-16.
H. Q. 1772-39-819.

Mrs

To Whom Mary E. Acteson

Address ~~2121~~ 2129 Arbutus St
Vancouver.
B.C.

Rate $18.—

By Whom Assigned Acteson, E.

Regtl. No. 911917

Rank Pte

Corps 196th Batt. C.E.F.

NOV 1 1916

PAYMENTS

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

File No. 37890

WAR SERVICE GRATUITY.

Reg. No. 911917

Name Acteson Jno E

Address 2429 Carnarvon V. Vancouver BC

Pay Soldier $ 103.80

Clerk J.M. Carse

Doc'k No. ... V.S.G. File No. ...
Award ... days at $ ... per day $
S. A. ... months at $ ... per mo $
Less P. D. P. Credited
Less further debit balance
Net due paid as below

SOLDIER TO DEPENDENT					
	Ag. No.	Ch. No.	Amount	Ag. No.	Ch. No.	Amount
1						
2						
3						
4						
5						
Total						

Dependent Mary E Acteson - Same -

Address Rw 1/94 27/20

Amended 23/12/19
R.J.C. Moore
W.A. Turner
Com Gregor

Pay Dependent $ 120.00

Days 112 Rate ~~70~~ #100. Due ~~280.00~~ #400.

Less P.D.P. credited 178.10

Less further Dr. Bal. or overpayment. 1.10

Net ~~223.80~~ 223.80

Date	Ck. Order	Ck. No.	Amount	Remarks.
31/10/19	39243	538306	103 80	9-11-19

	Date	Ck. Order	Ck. No.	Amount.
2	23/12/19	48677	24/12/19 545957	120.00
3				
4				
5				
6				

GEN'L AUDITOR
Posting checked by
Date 31-10-19

W.J.W.C. 23/12/19

00M-6-19 (10248).

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

73-E-2

Name Acteson, Earl
Surname Christian Name

Regimental Number 911917 Rank Pte.

Address (in full) 2141 Arbutus St.,
Vancouver, B.C.

Unit 196th Bn.

Original Unit

District where paid M.D.11.

Date of Discharge 16-2-18.

P. D. P. Filing Number 11-145-11.

Rates:—Regimental pay $ 1.00 per diem: Field Allowance $ .10 per diem. Separation Allowance $ 25,99 per month.

L. L. 22573—M. & D. 8000.

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		
175 10	1777	18-3-18	58 00	1743	18-4-18	59 10				58 00	117 10

M. F. W. 127.
50M—6 17.
1772 39-1140.

Remarks:

Advance payment by Casualty Unit # 11.

Soldier Ineligible (WSC) at present S.C.R Auth File 73-E-2 23/5/19 BH

6719

R—122
8,401—50,000—21-10-16

A.G.R. Rank Name ACTESON, Earl × Reg'l No. 911917 ✓

Unit 196th Bn. If in perm. Corps, What Unit? Married or Single Single. ✓

Place and Date of Enlistment Vancouver, 5th June, 1916. ✓ Place of Birth Quebec, Canada. ✓

Name and Address, Next-of-Kin Mrs. Mary Acteson, ✓

2129 Arbutus St., Vancouver, B.C. ✓ Relationship Mother. ✓

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

N/E. R.B. No 5134
File R.L.
Category Can. O.R.

Discharge, Date and Place Reason Character

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.		11-11-16	*per S.S. "Southland"*
31-12-16	196thBn.	S.O.S, To 19thRes. Bn.	Seaford	31-12-16	Pt, 2, D.O. 184
1-I-17	19 Res	T.O.S FROM 196Bn.	Seaford	1-1-17	Pt, 2, D.O. A.F.B. 103 CHEC
16-2-17	"	*S.O.S. to 46th B. France.*	"	16-2-17	*D.O. #47.* 23 FEB.1917
20-2-17.	46th Bn	*2.O.S. from 19. Res. Bn.*	*Field.*	17.2.17	*—"— 34.*
23-4-17	"	*adm. No-14 Gen. Hosp.*	*Wimereux*	7-4-17	*C-2. a-194 Gen-2-Engle-*
28-4-17	"	*W. Posted to R.A.P. Depot*	*Brandshat*	16-4-17	*R.A.P. C.66. 91- 3-5-17 S.R.C.*
28-5-17.	"	*adm. Royal-infirmary*	*Sunderland*	17-4-17.	*C-2-B 349* "
2.9.17.	✓	*Invalided Worcester Park*	*Epsom*	31.8.17.	*R.L.B 429. G. SW Hospl*
5-11-17.	✓	*Dis. from Hosp.*	✓	29.11.17	*C.L. B58* ✓

6719

9/11/917 Acteson

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.
5.11.17.	S.R.D.	Du com D. C.D.D. Burton	Brara	4.11.17	A.F.C. 25 Dis.
26.11.17	✓	Cases to Hon Com D.C.D.D. & L.O.L. on Return to Can. for Dis by A.G.	✓	17.11.17	✓ 271.
	Dis Depot	Tel. for Daily	H.D.C. 11 Victoria	30/11/17	N.R. 416. Vancouver. B.C.

M. F. B. 440.

MILITIA AND DEFENCE

In reply please quote

*No.*_____

_____ 191

FOLLOWING DOCUMENTS SENT TO A/A.D.M.S. Victoria. M.D.No.X1

on February 5, 1918.

1 English Medical Board (Epsom)

1 Quebec Medical Board

In reply to their letter Feb.2. 11 MD 34-A-148

our file SSC 555-6.

92431.—W6490/1535.—2.000.000—J. J. K. & Co., Ltd.—Forms B. 103/1. 6719

Army Form B. 103.

Casualty Form—Active Service.

Regiment or Corps Sask. Reg. Depôt

Regimental No. 911917 Rank Pte Name Acteson Earl

Enlisted (a) 5/6/16 Terms of Service (a) D.W.W. Service reckons from (a) Enlistment

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) Clerk

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				
		Temporary Sheet.	Original applied for		
30.5.17	O.C. S.R.D.	T.O.S. on Posting from 4th Bn	Bramshott	17.4.17	D.O. 91
30.10.17	Do — Do.	Posted to Depot Company	do.	29.10.17	D.O. 244
5/11/17	" "	On Cond. to C.D.D Buxton	"	4/11/17	D.O. 250

Thos. H. Burns Capt & ADJT.
FOR O.C. SASK. REGTL. DEPOT.

5 NOV 1917 TAKEN ON STRENGTH C.D.D, BUXTON Pt. 11 ORDER No. 262

R Vuie Lt
Commanding Lieut.-Col. Canadian Discharge Depôt.

17 NOV 1917 EMBARKED FOR CANADA FROM LIVERPOOL

R Vuie Lt
Commanding Lieut.-Col. Canadian Discharge Depôt.

(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.

6719

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				
14/12/17	Halifax C.D.	T. on S. Part II order No 37 of Dec 15th/1917	Vancouver BC	14/12/17.	L. A. Elliott Capt for O.C. No. XI. CASUALTY UNIT C.E.F.
8/1/18	Vancouver	S. off Strength. on Tsfr to No XI S S Coy. Part II order No 8 of Jan 8/1918 Auth XI. M.D.99-4-118-9. Date 5/1/18.			L. A. Elliott Capt for O.C. No. XI. CASUALTY UNIT C.E.F.
9-1-18	Vancouver No XI Casualty Unit C.E.F.	Taken on Strength of No XI Special Service Co. Eleven Special Service Co. C. E. F.	Vancouver BC	9-1-18	Daily Orders Part II No 9 — dated 9-1-18 James Wanderhill Lt. & Adj. for O.C. No. XI Special Service Co'y C.E.F.
16-2-18	No XI S.S.Co C.E.F. Vancouver BC	Struck off Strength No XI Special Service Coy C.E.F. Discharged.	Vancouver BC	16-2-18	Daily orders Part II No 49 dated 18-2-18 James T. Wanderhill Lt. & Adj. for O.C. No. XI Special Service Co'y C.E.F.

Fill in Only.—Unit, Number, Rank and Name. 6719 NW

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

Casualty Form—Active Service.

Unit, Regiment or Corps ~~196th OVERSEAS~~ BATTALION, C. E. F. 19th Res. Bn.

Regimental No. 911917 Rank Private C. E. F. Name ~~Acteson, Earl~~

Enlisted (a) June 5/16 Terms of Service (a) 6 mths after war ceases Service reckons from (a) June 5/16

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) Clerk

Report Date	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	Canada	1/11/16	
		arrived in ~~England~~ Liverpool	England	11/11/16.	
31/12/16	196th Res Bn	Absorbed by 19th Res Bn	Seaford	31/12/16	Part 2 Orders 184
1/1/17	19th Res Bn	Taken on strength	Seaford	1/1/17	Part 2 Orders
16.2.17	19th Res. Bn.	Drafted 46th Batt. O/seas	Seaford	16.2.17	Part. 2 D.O. 47
17/2/17.	CRD	Arrived in France 46th Bn		17/2/17.	N.R. 1202 24. 20/2/17
24/2/17.	Unit	Joined Taken on strength		21/2/17	B213. 12
16/4/17	do	Wounded		12/4/17	Letter Can. Sect file 16/25 Ot + DBS14.5
16-4-17.	O.C. H/S. "ST DENIS"	Invalided wounded and posted to Sask.Regtl.Depot, Bramshott.		16-4-17.	A.F.W 3083/6919. Pt 11 Order No 66 d/28/4/17 J Mackenzie Major., D.A.A.G. Lieut. for Can.Sec.

CERTIFIED CORRECT. 24 FEB. 1917 CANADIAN LEGION

(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.

6719

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				
3-5-17.	S.R.D.	Taken on Strength	Bishott	16-4-17	Pt-II. O. 91.
26-11-17	"	S.O.S. on return to Canada for Dis. of a.l.g.	"	17-11-17	Pt-II. O. 271.

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

9/11/17 6719

Pte. Acteson E.

DENTAL CERTIFICATE.

Date of Examination.	Present Dental Condition.	In case of loss or decay of Teeth is loss due to wounds injury or disease directly attributed to Active Service	Has he ever declined Dental treatment.	Recommendation.
21/11/17	Good	No	No	Nil

Lorne Laurie Capt
C.A.D.C.

.....
for Sask. ~~Dept~~ 1 ~~Depot~~.

Form S. & T.—70
7109—25m—7/2/17.

CLAIM FOR BILLETING ALLOWANCE.

(TO BE SUBMITTED IN TRIPLICATE.)

Unit..... Station.....

Month.....

Officers claiming Billeting Allowance must sign Certificate in column provided opposite their names.

HEADQUARTERS, D. C. of S. & T. OVERSEAS CANADIANS.

RANK.	NAME.	Authority. Routine Order.	Period. From	Period. To	No. of Days.	Rate.	Amount.	CERTIFICATE. I hereby certify that I have not drawn rations for the period of this claim, nor the allowance in lieu thereof.

C.A.D.C.5009-10M.
3494-30-8-17.

B.P.C. 2 8 6 6 3 3 C.R.R.C.

9/19/17

Acteson C

DENTAL CERTIFICATE.

6719

The following Certificates will be attached to the Medical History Sheets of all Other Ranks being returned to Canada for disposal.

2 RW

Date of Examination.	Present Dental Condition.	In case of loss or decay of teeth. Is the loss due to wounds, injury or disease directly attributed to Active Service?	Has he ever declined Dental Treatment.	Recommendation.
10-1-17	Filling			at Public expense Edwards Capt A.D.C.

FORM D.M.S. 1300.

SURNAME	CHRISTIAN NAME OR NAMES	REG. NO.
ACTESON.	E.	911917.

RANK	UNIT	CO.	TROOP	BATTY.
Pte.	46th.Bn.			

HOSPITAL — DATE OF ADMISSION

14 Gen. Wimereux. 14.4.17
Royal Inf.Sunderland. 17.4.17.

1. Mil.Con.Woodcote Pk.Epsom. HOSP. 31.8.17.

2. HOSP.

3. HOSP.

4. HOSP.

DIAGNOSIS — G.S.W.L.Thigh. R.

1

2-

3

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

23.4.17. A194
DISPOSITION 26.5.17. B349.
C.L.3.9.17.B429.
6-11-17 B. 552

DATE
Disch. - 29.10.17

REMARKS

EPITOME OF HOSPITAL TREATMENT

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

Form DMS 1401.
8289 100M 9/3/17.

6719
1.17428

Convalescent Hospital
HOSPITAL.
AT Woodcote Park, Epsom.

A. & D. CARD

III

A. & D. No. _____ Pl. of Action _____

Rank 9/11917. Pte Unit 46. Sick or Wounded

Name Acheson E. Age 19. Religion C.E.

Place in Hospital _____

Diagnosis G.S.W. L.L. Buttock. (frac)

Admitted 30-8-17. From Sutherland Hosl.

Discharged C/M 29.10.17 To Dask. R.D Bramshott

Transferred _____

Service at Home 1 3/12 In Field 2/12

Results _____

(See Document Card for M.H. Sheet and other Documents.)
(P.T.O.)

REMARKS.

6719

31-8-17.
Long healed scar along supra crest of Ilium (Rt) Fracture pieces of Bone remove Stands with Rt side of Pelvis Filled up. Limitation of Movement at Hip Massage
13-9-17. Employment
29-9-17. ~~Clean~~ Open small packet of Just. Liberty & Dressing.
12-10-17. Substance like bismuth paste squeezed out from lower end of wound
Employment

A. C. Wallace Capt

SURNAME. Acteson

CHRISTIAN NAMES Earl.

REGL. No. 911917. RANK Pte.

UNIT 196th "

FORMER CORPS Nil.

L.O.L. Dis. 16/2/18

M.U. D.H.Q. 18/2/18 # II

Spec. Svce Coy

Bn.

NEXT OF KIN.

NAMES IN FULL Acteson, Mrs Mary

RELATIONSHIP TO SOLDIER Mother

ADDRESS 2141 Arbutus St. Vancouver B.C.

S.A.A.P. 12-7-17

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada Quebec, P.Q. DATE Oct 29, 1897.

PLACE OF ATTESTATION Vancouver B.C. DATE June 5, 1916

Sailed from Halifax Per. S.S. "Southland." 31/10/16.

R/to. 30-11-19.

L. L. 94504. M. & D. 6512. M. F. W. 22. 250M.—2-16. H. Q. 1772-39-339.

MARRIED SINGLE Yes. WIDOWER

TRADE OR CALLING Clerk RELIGION Church of England.

DESCRIPTION.

APPARENT AGE 18 YEARS MONTHS

HEIGHT 5 FEET 4½ INCHES

CHEST MEASUREMENT 34 INCHES EXPANSION 3. INCHES

COMPLEXION Fair EYES Brown HAIR Auburn

DISTINGUISHING MARKS 1 Vac. L.
Scar op. varicosile
Vision 20/20, Both eyes.

MEDICAL EXAMINATION. PLACE Vancouver, B.C. DATE June 5, 1916

Present Address 2129 Arbutus St. Vancouver. BC

6719

REGT'L No 911917

NAME Acteson Earl

H.Q. FILE No. 649-

RANK AND CORPS Pte. 46th Bn Born 1896

FOLLOWS No. Bn

FOLLOWS

CABLE No.	CABLE DATE	"C" NATURE OF CASUALTY
M2648	24-4-17	Adm to #14 Gen Hosp Etaples April 14th 1917 G.S.W. right shldr severe ✓
M 3637 W&M.	7-5-17.	Rep. rec'd from Can. Red Cross Society begins Royal Hosp. Sunderland. Seems better & brighter. Sailed from Liverpool per the S.S. Saxonia 17-11-17 M.D. #11 Disp of A.G.

L. L. 12767—M. & D. 7390.

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

6719

LIST NO	HOSPITAL	DATE OF ADMISSION	REMARKS
A194'''	#14 Gen Wimereux	14-4-17	GSW Left Thigh Sev.
B349.	Royal Infirmary Sunderland	17/4/17	" " " "
B429.	Aux. Convt. Woodcote Pk. Epsom.	31-8-17	GSW L. Thigh
B56-2	Discharged	29-10-17	G S W. L. Thigh (Sev)

FORM R. 149.
7106—250m—7/2/17.

R149

Name ACTESON, Earl *Rank* Pte. *Reg. No.* 9119[redacted]

Unit 46th. Battn.

Next of Kin Canada

6719

Date 1917	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
14-4.	No.14 Gen. Hosp.	Wimereux	GSW. L. Thigh (Sev)	A194		M.2648 23-4
17-4.	Royal Inf. Hosp.	Sunderland	do	B349		
31.8.	M.C.H. Hosp. Sar K. Epsom		do	B429		
29.10.17.	Discharged (11E1)		do	B33[illegible]		

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

Number 911917 Rank Pte

Surname ACTESON

Christian Name Earl

Unit 46th Bn. Can Inf Theatre of War France

Date of Service 16/2/17

Remarks

Latest Address 2141 Arbutus St.
Vancouver B.C.

Roll No. D

Page 3015

c/o Sterling Trust Corp.
372 Bay St
Toronto Ont

G. A 2290- Alleg

LEDGER NO. _____ SERIAL NO. 13 B19632

REG. NO. 911917 NAME Acteson J. E.

RANK Ex Pte CORPS C.E.F. AGE 20 SERVICE _____

HOSPITALS	DATE OF ADMISSION
1 Shaughnessy Mil Vancouver	20-5-19
2	
3	

DIAGNOSIS (6) Hysteria

TRANSFERRED TO _____

DISPOSITION Discharged to S.C.R. 11-6-19 CATEGORY _____

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

P.T.O.

REMARKS:	HOSPITALS.	DATE.	DIAGNOSIS.
	a.d.m. Shaughnessy Mil	?	Fd. A.H.
	Trans. Esquimalt Mil. Dis	16-6-19	
	Discharged to S.C.R	12.8.19	

No. 911917 Rank Pte. Name Acteson Earl.

T. O. S. 5-6-16 Unit 196th Battalion
D. O. 71 of 5-6-16

M. D. 11

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916	1916			
June 5	June 30	V		
July		V		
Aug.		N		
Sep.		V		
Oct.		V		
Nov.		N		

No. 911917 RANK Pte. NAME Acteson Earl

~~T.O.S.~~ Trans. from UNIT #11 Special Service Coy. C.E.F.
#11 Casualty Unit C.E.F.
9-1-18 D.A. 9/3 9-1-18.

M. D. 11

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1918	1918			
Jan. 5	Jan. 31	W	Orig. T.O.S. 5-6-16	Jan. Paylist.
Feb. 1	Feb. 16	V	Discharged 16-2-18.	
			M. A.	O.O. 493 18-2-18.
			A/c closed by payment S.	

Forms
I. 1237
12

6719

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	911917.	Pte	Acteson	Earl. E & E
Year	Unit.		Age.	Service.
	46th Canadians		19.	1 2/12 F 2/12

Station and Date.	Disease Gsw. Lt. buttock. G.B. Robinson.
21-7-17.	Admitted to Ashburne Hospital.
	February 16th 1917 — France.
	April 12th 1917 — Vimy Ridge.
	17-4-17 R Infirmary Sunderland.
	Wound not healed on admission to Ashburne.
	Over the crista ilii (left) an 8th of parahon wound:
	for drainage & removal of P.B. Quite healed
	but with one spot which is scabbing over.
29. 7. 17.	Practically healed.
12. 8. 17	W. Healed.
19. 8. 17.	Granulation at one end of wound
30. 8. 17	Transferred to Woodcote Canadian camp Epsom

W.G. Robinson Maj

*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. (K239)

P.T.O.

Station and Date.	

Forms
I. 1237
11

6719

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
104	911917.	Pte	Dobson.	Earl.
Year	Unit.		Age.	Service.
1914.	16th Canadians. D. Coy.		19.	11 mths.

Station and Date.

THE ROYAL INFIRMARY
SUNDERLAND.

Disease Gun Shot - Wound Left Buttock. N.O.

Wounded. 12th April at Vimy Ridge. —
Qualed on at Casc hospital on the same day
Tubes inserted for drainage.

17/4/17 Condition on admission.

General condition - good.
Locally on left buttock are two dirty looking wounds
(entrance scint) - the right of which is much larger
exposing ragged muscles & bare bone - much discharge
present.
Temp. normal.

25.4.17. Small left wound closed -
Posterior end of iliac crest bare, discharge less in qty.
2.5.17 Sinus deep leading down to bone, walls covered
with healthy granulations - discharge purulent.
General condition improving.
15.5.17 Sinus not closing - Slight purulent discharge
22.5.17 Effects.
Wounds & sinus entrance laid open, exposing
necrosed bone which was chiselled away - Pus seen
under outer compact layer - Sequestrum which was
loose was found lying under compact bone - This
was removed & sodden gran. tissue curetted - Wound
swabbed out with methylated Ether Spirit & Zeoform &
Hg Ammoniation & Paraffin paste applied - Skin under
-mined & brought together over wound.

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

(23205) Wt. W 4234—M 627. 1,000,000, 8/16. C.F.&S. Forms/I. 1237/11.

P.T.O.

6719

Station and Date.	
ROYAL INFIRMARY SUNDERLAND.	Part subsequently to be dressed fortnightly
5.6.17.	Stitches removed. Wound looking very well, scar
	area very small. Dressed with same paste.
20.6.17.	Wound much shallower. Surface healthy.
	Granulations firm. very slight amt. of discharge.
5.7.17.	No bone felt when healing.
15.7.17.	Wound almost healed - able to walk without
	difficulty - General condition much improved.

H. C. Moore.
Lt. Surg.

B. C. Co.
B. C. Western Universities

46th Batt. O'seas. 16.2.17

MEDICAL HISTORY SHEET

19th Reserve Batt. 1-1-17

Surname Acleson Christian Name Earl

Examined { on 5th day of June 1916
at Vancouver B.C.

Birthplace { City or Town Quebec.
County Canada.

Apparent age 18.

Trade or occupation Clerk.

Height 5 feet 4½ Inches

Weight 145. lbs.

Chest measurement { Minimum 31. inches
Maximum expansion 3 inches

Physical development good

Small-pox Marks none.

Vaccination Marks { Arm Right Left
Number 1

When Vaccinated last 1908.

(a) Marks indicating congential peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

Approved by Edwin Arnold

Rank Capt. C.A.M.C. M.O.

Date	Fit or Unfit	Examined for Re-Engagement	
		26 JUL 1917	M.O.
			M.O.
			M.O.
			M.O.
			M.O.
			M.O.

Date	Result	Vaccinations	
1916			
Sep 22	Nil	H.S. Walker	M.O.
Oct 9		H.S. Walker	M.O.
			M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.	
1916			
July 2	Good	H.S. Walker	M.O.
" 9	"	H.S. Walker	M.O.
" 16	None	H.S. Walker	M.O.

Enlisted on 5th day of June 1916 at Vancouver B.C.

	Corps	Regt'l Number	Habits	Date
Joined on enlistment	196th Bn. C.E.F.	911917		
Transferred to	46th Bn			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

Station	Date	Disease	Result
Gibson	Oct 18/17	S.D.W. Left Buttock	Cl. IV. A. Convalescent

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.

CANADA

Surname ..... Christian Name .....

6719

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
Ashburne. Sunderland.		21	7	17	30	8	14	G.S.W. l. buttock.	40	Wd healed	W. R. Robinson
W. C. H. Egerton		20	8	17	29 OCT 1917			Do	61	Compound comminuted fracture of inferior articular process with fractured pieces removed. Glands with right side of pelvis tubes up. Wd healed by granulation. Sutures removed. Boarded 6th Nov 17 A.P.M.	

Daly

6719

Proceedings of Medical Board at Discharge Depot,
QUEBEC, Que.

No. 911917 Rank Pte Name and Corps of disabled Soldier:— 196 Bn.
Acleson, Earle

Previous civilian occupation:— Clerk.

Cause of Disability:— Loss of tissue of left Illeum & Gluteus Muscle tissue of Gluteus. & G.S.W.

Condition, in detail, which prevents the soldier earning a full livelihood:—

2 mos. in France. Wounded April 12-17 in left hip & buttock. Fracturing he says the pelvis.
Pres. Cond. Gen. appear good. Says he was 19 on Oct. 19-17.
Has a long 7" scar from crest of left Illeum backwards & downwards to sacrum, adherent to bone. Some of the bone tissue of Illeum is gone and fibres of the Gluteus have been severed - backward movement of left leg is limited as well as flexion on thigh (about 90°)
Heart & lungs normal.
Complains of tenderness about scar.
Can walk about 2 miles.
Duties recommended -

OPINION OF THE BOARD.

Degree of incapacity. (Please state in fractions) 20% decreasing

Probable duration of incapacity:— 6 mos

Does it render him permanently unfit for Military Service? no

Would operation, Special treatment, or use of appliances, etc., lessen incapacity? no

Signature:— ..... K C Cairns Capt
President.

Station:— Quebec.

Date 5-12-17

..... A Stacy Capt
..... Ralph B Cox Capt
} Members

APPROVED.

Date 5/12/17

..... W W Carnegie Major
Asst. Director Medical Services.

Date .....

.....
Director General Medical Service

Form D.M.S. 1394.
7[illegible] 100M.—5/2/17.

6719

DEP'T
MILITIA & DEFENCE
MAR 5 1918
H. Q. [illegible]

PROCEEDINGS OF A MEDICAL BOARD.

Dated at Epsom. Surrey. Sept. 18th 1917.

No. 911917 Rank Pte. Name Acteson E.

Local Unit 46th Bn. Overseas Unit Age 19

Examination held at Epsom Surrey.

DISABILITY.
Overseas—Local
(scratch one out).

WEAKNESS OF RIGHT HIP.

PRESENT CONDITION.

Large vertical scar over left buttock adherent to Ilium.
Can walk two or three miles if he takes his time.

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 C 111. Unlikely to be raised in category within six months.

5. Discharge Clerk in wholesale dry-goods- Student.

Signatures :—

Members { H. L. Pavey Maj. President.
S. R. D. Hewitt Capt.
.....

B. T. C. FOLIO
FALSE DOCKET
1

APPROVED

Dated October 18th 1917. H L Pavey Maj

For A.D.M.S.

283-7--3-18

PROCEEDINGS OF A MEDICAL BOARD.

MAR 7 1918

Dated at 1917

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

Local Unit ..... Overseas Unit .....

Examination held at .....

DISABILITY.
Overseas—Local.
(Strike out one).

PRESENT CONDITION.

Large varicosed scar over left buttock adherent to ilium.
Can walk two or three miles if he takes his time.

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:—

H. L. GREY ..... Pres. ..... President.

S. E. D. Hewitt ..... Capt. .....

..... Members.

.....

Dated 1917

For A.D.M.S.

Address your reply to:—

DISTRICT PAYMASTER M. D. No. 11

VICTORIA, B. C.

and mark letter For "C" SECTION

34650

District Paymaster
M. D. 11
MAR 21 1919
VICTORIA, B. C.

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

WAR SERVICE GRATUITY
MAR 21 1919
C. E. F. M. D. XI

OTTAWA, CANADA.

District Paymaster
M. D. 11
VICTORIA, B. C.

Declaration required of Officers, Warrant Officers and Men who claim War Service Gratuity under Order-in-Council (P.C. 3165), dated 21st December, 1918.

If the applicant will enquire at the local Branch of the Canadian Patriotic Fund he will be informed if there is an official who will take this Declaration free of charge.

A complete reply must be given to every question in this Declaration. There must be no blanks and no dashes. If any questions are not applicable, the words "NOT APPLICABLE" must be written out.

On completion this Declaration is to be returned to THE DISTRICT PAYMASTER OF THE DISTRICT IN WHICH THE SOLDIER WAS DISCHARGED.

ACTESON

1. Christian Names Frederick, Earl 2. Surname Acteson

3. Rank Private 4. Original Unit 196th Battalion 5. Reg. No. 911217

6. Address, in full, to which future payments of gratuity are to be forwarded

2129, Arbutus St.

Vancouver, B. C.

7. Date of enlistment in the C.E.F. June 5, 1916

8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge Mrs. Mary E. Acteson

9. Relationship of such dependent Mother

10. Address, in full, of such dependent 2129 Arbutus St.,

Vancouver, B. C.

11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier ? Not Applicable

12. Were you at any time on the strength for pay and allowances of a unit of the C.E.F. which was out of Canada or the United States when such pay and allowances were issuable? If so, give particulars of one such unit and dates of service overseas with such unit:—

196th Batt. Left Canada Nov. 1. 1916

joined 16th Batt 16. 2. 1917. Left England Nov. 18. 1917

13. Were you on the strength for pay and allowances of the Clearing Services Command, having been at any time on duty outside of Canada or the United States ? Not Applicable

14. Were you on active service only in Canada or the United States ? If so, give particulars of unit and dates of such service Not Applicable

15. Give total length of time which you served on active service, whether in Canada or Overseas, setting out particulars of units on whose strength you served 196th Batt from June 5. 1916 to Feb. 16. 1917 16th Batt. from Feb 16. 1917 to Feb 16. 1918

16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department Not Applicable

17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.? Not Applicable

M.F.W. 2595.
1772—-39—1389.
1160—D.P.—250M-12-18.

22 12/19

18. Have you had more than one enlistment? If so, give particulars of discharges and re-enlistments, and under what regimental numbers and units ... Not Applicable

19. Have you already received any payment of Post Discharge Pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid ... Received $175.10 from No. 7 District Paymaster ~~Special Service Co.~~

20. Have you been issued with a War Service Badge? If so, what class? Class A.

21. Have you, during the present war, served in the Imperial Forces? Not Applicable

22. Are you entitled to receive, or have you received any gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled ... Received $175.10 Entitled to further sum of $224.90

23. (a) Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England? ... Not Applicable
(b) If so, was such reversion in consequence of misconduct or inefficiency? Not Applicable

24. Are you now serving in the C.E.F. Not Applicable If not, give:—(a) Date of discharge Feb. 16 1918 (b) Reason for discharge ... Wounds received on Active Service

25. Are you at present a member of and in receipt of pay and allowances from any Canadian naval or land forces? If so, give unit. Invalided Soldier's Commission

26. Did you at any time serve at the front in an actual theatre of war? If so, give particulars of one unit which you served at the front, and dates of such service with that unit ... 16th ... Feb. 16 1917 to April 17 1917

27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment? Yes
(b) If so, are you in receipt of full pay and allowances from that Department? Yes

And I make this solemn declaration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath and in virtue of the Canadian Evidence Act.

Signature of Applicant: Frederick, Carl Acteson

Place of Residence: 2129 Arbutus St, Vancouver, B. C.

Declared before me at: Vancouver

This 15th day of April 1919

~~Signature of Barrister~~ of the ~~Supreme Court~~ Stipendiary Magistrate, Notary Public, ~~Justice of the Peace, or Commissioner f. the Administration of~~ Oaths.

James G. Bowie

POST DISCHARGE PAY.

Date paid	X	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
1918 Feb 18		175.10			
Mar 18					
Apr 18					

Certified Correct

A. D. Cameron

District Paymaster.

DEPARTMENT OF SOLDIERS' CIVIL RE-ESTABLISHMENT.

INVALIDED SOLDIERS' COMMISSION

MEDICAL HISTORY SHEET

(To be used for all cases under observation or treatment by the I.S.C.)

Station. Fairmont Section Shaughnessy Military Hospital

Date admitted. May 20th. 19 19

Name Acteson, Frederick, Earl.

Home Address 2129 Arbutus St., Vancouver, B.C.

Former Reg. No. 911917 Age 20 Weight 130 Occupation Clerk.

Diagnosis

Complication

Result

Physician in Charge. Major Manchester.

Family History Neg.

Previous Illness Always healthy before enlistment. G.S.W. Left Buttock Apr./12 ~~Carried on until wounded in Buttock April 12~~

Present Illness Enlisted June 6/16. To England Oct. 26/16. To France Feb./17 Carried on until wounded in Buttock Apr.12/17. In hospitals in England April 1917 to Nov. 1917. ToCanada May 1917. Discharged from Army Feb.16/18

PHYSICAL EXAMINATION

Under following headings :—

(a) Circulatory (b) Respiratory (c) Digestive (d) Muscular

(e) Osseous (f) Genito-Urinary (g) Nervous (h) Special

COMPLAINTS :

Weakness, gets tired if he walks one mile. Palpitation. Gets excited in crowds and noises. Was in General Hospital for 6 months. June 24th. to Dec. 6 1918. Out patient until admitted May 25/17. Also says he has Gas on stomach if he gets upset.

PRESENT CONDITION: Well nourished, good color. Tongue clear. Teeth , some need attention. Lungs neg. Heart, no enlargement. Slight D.A.H. Pulse 78 Slightly irregular. Slight impediment in speech. Other systems Neg.
26-5-19 To attend Dental clinic.

11-6-19 Transferred to Tuberculosis

J. P. Bicknell
Capt. C.A.M.C.

DEPARTMENT OF SOLDIERS' CIVIL RE-ESTABLISHMENT.

INVALIDED SOLDIERS' COMMISSION

MEDICAL HISTORY SHEET

(To be used for all cases under observation or treatment by the I.S.C.)

LABORATORY REPORTS

URINALYSIS

BLOOD

X-RAY

SPECIAL

Signature of attending
Physician or Surgeon.

6719

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

INSTRUCTIONS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of pages 1 and 2 of this Form. The President of the Board of Medical Officers is responsible for the proper completion of the space, of page 3, reserved for recording the Proceedings of a Board of Medical Officers.
3. In answering the questions, Medical Officers will carefully obtain and record the soldier'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 soldier concerned, from witnesses, or from documents.
4. If a complete answer to any question requires more space than that reserved for it, the answer may be continued on the blank space on this page.
5. The nomenclature of diseases to be followed is that 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 and Sons.

6719 34a148

Mother. Mary Ellen Acteson
2141 Arbutus St.,
Vancouver, B.C.

(Medical Officers will please read this Form carefully before using it. See instructions, page 4.)

FORM TO BE USED FOR WARRANT OFFICERS, N.C.O'S, AND MEN

B.P.C. Original

MEDICAL HISTORY OF AN INVALID

DEPT. OF MILITIA & DEFENCE
MAR 5 1918
N.O.
CANADA

S/S.Co. STATION Vancouver, B. C. DATE Jan.14th 1918

1. (a) Unit 196th.Batt.C.E.F. (b) Regimental No. 911717 (c) Rank Pte.
   (d) Surname Acteson (e) Christian name Earl
2. Age last birthday 19 Date of birth Oct.19-1898
3. Enlisted at Vancouver, B. C. on June 5-1916
4. Personal description :—
   (a) Height 5' 7" (b) Weight 130 lbs (stripped) (c) Complexion Fair.
   (d) Colour of hair Auburn (e) Colour of eyes Brown (f) Identification marks G.S.W. L. hip. 1 vac.L.arm
5. Address after discharge (for the use of the Board of Pension Commissioners.) 2141 Arbutus St., Vancouver, B. C.
6. Former trade or occupation Clerk
7. (a) Service — Years 1 7/12 — Days 9

	PERIODS From		To	
Canada	June.	1916	Nov.	1916
England.	Nov.	1916	Feb.	1917
France.	Feb.	1917	Apr.	1917
England.	Apr.	1917	Nov.	1917
Canada	Nov.	1917	Present.	

   (b) Has he been Overseas ? Yes to France.
8. Present disease or disability (use authorized nomenclature if possible). 1. Impaired function L.Hip & L.leg. 2 General debility
   (a) Date of origin April 12th 1917 (b) Place of origin Vimy Ridge Pimple Hill
   (c) Cause* G.S.W. L.crest of iluim.
   *(Here include original disease or injury)
9. Present condition. (Important, to be a full description of the present disabling condition or conditions).

Has large scar adherent in part extending from 1" behind Ant Sup Spine of ilium just above crest backwards.and downwards for a distance of 8" and ending just above lower part of Sucro iliac Synchondrosis. Scar is tender throughout entire extent(to touch) Motion of thigh on abdomen. Voluntarily cannot flex thigh on abdomen to a fight angle, can be flexed about 115°. Passively, can flex thigh on abdomen to a right angle. Extension. Voluntarily can extend leg to an angle of 160° with the body passively cannot extend leg beyond that point owing to pain at Ant.Sup.Sp. probably due to tension in sartorious muscle. Power of flexion and extension of l.thigh on abdomen diminished by 30% power of adduction and abduction normal. Range of abduction and adduction of thigh almost normal. Movements of knee normal in range diminished 10% in power. There is fairly well marked general debility. Pulse rate 116.rather poor Volume & tension.perspires freely. There is some tenderness over course of l.Sciatic nerve.

[After describing all abnormalities, anatomical and functional, contributing to present incapacity (see Section 11) state whether such incapacity is directly due to (a) weakness, (b) loss (complete or partial) of an organ or member or of its functions, or (c) to the necessity for rest of the body or of some of its parts.]

M. F. B. 627.
30M—6-18.
1772-39-117

PENSION FILE
FALSE DOCKET
3

6719

10. History ;

Here give a description of wounds, scars, deformities, and signs and symptoms of abnormal conditions present and not included in answer 8. This section cannot be completed without stripping the soldier and subjecting him to a thorough physical examination

Scar described under Sec.9. There is fairly well marked general debility. Sweats a great deal, especially at nights No Cough or Expectoration. Eats fairly well. Sleeps rather poorly.

11. To what extent, state in percentages, is capacity to earn a livelihood in the untrained labour market reduced? If there is more than one disabling condition, estimate the incapacity due to each, and that due to all combined.

(1) 15%. (2) 20%. Total 35%, due to service.

12. Did the disability arise on or off duty? Yes. 1 & 2.

13. Was a Court of Inquiry held? no

14. If the disabling condition had its origin before enlistment, has it been aggravated on service?

Yes..... No..... n.a. 1. & 2.

(If the answer is in the affirmative, state in percentages, to what extent the soldier is incapacitated by that aggravation.)

15. Was the disability caused or aggravated by negligence, by vice or by misconduct, or by unreasonable refusal to accept treatment? No

(If the answer is in the affirmative, state in percentages, to what extent the patient is incapaci ated by t at 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.)

16. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? Six months to one year for 1. & 2.

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

Hospital Surgical etc.

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

no.

19. Can the former trade or occupation be resumed? partially

20. Recommendations

Class. "E" for discharge.

By the Medical Board.

Medical Officer by whom the case is brought forward.

STATEMENT OF THE SOLDIER.

(Sections 8, 9 and 10 are to be read to the soldier.)

I, the undersigned E Acteson have heard the description of my disability read, and am satisfied (or not satisfied) with it. (If dissatisfied, statement should follow.) I complain in addition of

E Acteson

Signature of soldier examined.

6719

DEP'T MILITIA & DEFENCE MAR 5 1918 H.Q. CANADA

OPINION OF THE MEDICAL BOARD

21. Does the Board concur with the preceding report? If not, give differing opinions, with reasons, quoting the number of the answer criticized.

Yes.

22. Is the soldier fit for

(a) General service,	(Category A)	(Yes or No).	No
(b) Service abroad, not general service,	(" B)	(Yes or No).	No
(c) Home service, (Canada only),	(" C)	(Yes or No).	No
(d) Temporarily unfit,	(" D)	(Yes or No).	No
(e) Unfit for service in Categories A, B and C,	(" E)	(Yes or No).	Yes

23. It is certified that the soldier

~~(a) Does require treatment.~~ a.

(b) Does not require treatment.

(c) Should pass under his own control.

~~(d) Should not pass under his own control.~~ d.

(Strike out condition not applicable).

24. It is recommended that the soldier be discharged. (When not for discharge add special recommendation).

Yes. Class "E"

J Clinton Capr President.
Members.

STATION Vancouver, B. C.

DATE Jan. 15th. 1918.

APPROVED BY

DATE JAN 31 1918

Lieut. Colonel M.D. 11
Assistant Director of Medical Services.

APPROVED BY

DATE

Director-General of Medical Services.

B. P. C. FOLIO FALSE DOCKET 2

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

INSTRUCTIONS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of pages 1 and 2 of this Form. The President of the Board of Medical Officers is responsible for the proper completion of the space, of page 3, reserved for recording the Proceedings of a Board of Medical Officers.
3. In answering the questions, Medical Officers will carefully obtain and record the soldier'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 soldier concerned, from witnesses, or from documents.
4. If a complete answer to any question requires more space than that reserved for it, the answer may be continued on the blank space on this page.
5. The nomenclature of diseases to be followed is that 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 and Sons.

Mrs.
(Mother) Mary E. Acteson, 2141 Arbutus St., Vancouver, B.C.

34-A-133

(Medical Officers will please read this Form carefully before using it. See instructions, page 4.)

FORM TO BE USED FOR WARRANT OFFICERS, N.C.O'S, AND MEN

MEDICAL HISTORY OF AN INVALID

No. X1, C/c. STATION VANCOUVER, BC. DATE Dec. 29th. 1917.

1. (a) Unit 46th. Battn. (b) Regimental No. 911917. (c) Rank Pte.
   (d) Surname Acteson (e) Christian name Frederick Earl
2. Age last birthday 19 Date of birth Oct. 19th. 1898.
3. Enlisted at Vancouver on June 5th. 1916.
4. Personal description :—
   (a) Height 5' 5¾" (b) Weight 150 (stripped) (c) Complexion Fair
   (d) Colour of hair Lt. Brown (e) Colour of eyes Brown (f) Identification marks
   Vaccination one left, large scar left hip
5. Address after discharge (for the use of the Board of Pension Commissioners.)
   2141 Arbutus St., Vancouver, B.C.
6. Former trade or occupation Student
7. (a) Service — Years 1 6/12 — Days 22

	Periods	
	From	To
Canada	June 5, 1916	Nov. 1st. 1916.
England	Nov. 1, 1916	Feb. 1917
France	Feb. 1917	Apl. 17th. 1917
England	Apl. 17, 1917	Nov. 19th. 1917
Canada	Nov. 19, 1917.	Present

   (b) Has he been Overseas? Yes
8. Present disease or disability (use authorized nomenclature if possible). Impaired function L. hip.
   (a) Date of origin April 12/1917. (b) Place of origin France
   (c) Cause* Machine Gun Bullet
   *(Here include original disease or injury)
9. Present condition. (Important, to be a full description of the present disabling condition or conditions). Impaired function L. hip.
   Point of entry at highest part of crest of left Ilium, travelling inward & downward about 6 inches. Has not discharged for two and a half months. Fracture & loss of substance of Ilium, and some fibres of Glutens Maximus severed. Very little impaired movement, but distinct loss of power. Flexion decreased 10 degrees. Incapacity due to partial loss of function on account of injury to various muscles. He cannot walk more than two miles, and has lost, I should say, 50% of the power of the limb.

[After describing all abnormalities, anatomical and functional, contributing to present incapacity (see section 11) state whether such incapacity is directly due to (a) weakness, (b) loss (complete or partial) of an organ or member or of its functions, or (c) to the necessity for rest of the body or of some of its parts.]

M. F. B. 227.
150M -6-17.
1772-39-117.

10. History ;

Here give a description of wounds, scars, deformities, and signs and symptoms of abnormal conditions present and not included in answer 8. This section cannot be completed without stripping the soldier and subjecting him to a thorough physical examination

Vaccination one left. Large scar left hip extending from crest of Ilium to sacrum.

11. To what extent, state in percentages, is capacity to earn a livelihood in the untrained labour market reduced? If there is more than one disabling condition, estimate the incapacity due to each, and that due to all combined.

25% Should decrease to nil in six months.

12. Did the disability arise on or off duty? On duty

13. Was a Court of Inquiry held? No

14. If the disabling condition had its origin before enlistment, has it been aggravated on service? Not applicable

Yes..... No.....

(If the answer is in the affirmative, state in percentages, to what extent the soldier is incapacitated by that aggravation.)

15. Was the disability caused or aggravated by negligence, by vice or by misconduct, or by unreasonable refusal to accept treatment? No

(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.)

16. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? Six months

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

Received surgical treatment at Base Hospital in France, and a General Hospital in England.

18. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit? No

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

20. Recommendations C3.

By the Medical Board.
Medical Officer by whom the case is brought forward.

STATEMENT OF THE SOLDIER.

(Sections 8, 9 and 10 are to be read to the soldier.)

I, the undersigned Pte. E. Acteson have heard the description of my disability read, and am satisfied (or not satisfied) with it. (If dissatisfied, statement should follow.) I complain in addition of

Pte. E. Acteson
Signature of soldier examined.

OPINION OF THE MEDICAL BOARD

21. Does the Board concur with the preceding report? If not, give differing opinions, with reasons, quoting the number of the answer criticized.

Concurs

22. Is the soldier fit for

(a) General service,	(Category A)	(Yes or No).	No
(b) Service abroad, not general service,	("	B) (Yes or No).	No
(c) Home service, (Canada only),	("	C) (Yes or No).	Yes
(d) Temporarily unfit,	("	D) (Yes or No).	No
(e) Unfit for service in Categories A, B and C,	("	E) (Yes or No).	No

23. It is certified that the soldier

(a) ~~Does require~~ ~~treatment~~.
(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).

24. It is recommended that the soldier be discharged. (When not for discharge add special recommendation).

Duty C3.

V.B. Coerselman Capt. *President.*
Alton Herald Capt
B.E. Lang Capt } *Members.*

STATION VANCOUVER, B.C.

DATE Dec. 29th. 1917.

APPROVED BY

DATE JAN 24 1918

R.L. Maller, Capt.
for *Assistant Director of Medical Services.*

APPROVED BY

DATE .....

Director-General of Medical Services.

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

INSTRUCTIONS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of pages 1 and 2 of this Form. The President of the Board of Medical Officers is responsible for the proper completion of the space, of page 3, reserved for recording the Proceedings of a Board of Medical Officers.
3. In answering the questions, Medical Officers will carefully obtain and record the soldier'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 soldier concerned, from witnesses, or from documents.
4. If a complete answer to any question requires more space than that reserved for it, the answer may be continued on the blank space on this page.
5. The nomenclature of diseases to be followed is that 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 and Sons.

Mother. Mary Ellen Acteson
2141 Arbutus St.,
Vancouver, B.C.

B.P.C

(Medical Officers will please read this Form carefully before using it. See Instructions, page 4.)

FORM TO BE USED FOR WARRANT OFFICERS, N.C.O'S, AND MEN ~~Copy~~ Duplicate

MEDICAL HISTORY OF AN INVALID

S/S.Co. STATION Vancouver, B. C. DATE Jan.14th 1918

1. (a) Unit 196th.Batt.C.E.F. (b) Regimental No. 911717 (c) Rank Pte.
   (d) Surname Acteson (e) Christian name Earl
2. Age last birthday 19 Date of birth Oct.19-1898
3. Enlisted at Vancouver, B. C. on June 5-1916

4. Personal description :—
   (a) Height 5' 7" (b) Weight 130 lbs (stripped) (c) Complexion Fair.
   (d) Colour of hair Auburn (e) Colour of eyes Brown (f) Identification marks G.S.W. L. hip. 1 vac.L.arm
5. Address after discharge (for the use of the Board of Pension Commissioners.) 2141 Arbutus St., Vancouver, B. C.
6. Former trade or occupation Clerk

7. (a) Service

	Years	Days
	1 7/12	9

	Periods	
	From	To
Canada	June. 1916	Nov. 1916
England.	Nov. 1916	Feb. 1917
France.	Feb. 1917	Apr. 1917
England.	Apr. 1917	Nov. 1917
Canada	Nov. 1917	Present.

   (b) Has he been Overseas ? Yes to France.

8. Present disease or disability (use authorized nomenclature if possible). 1. Impaired function L.Hip & L.leg. 2(General debility
   (a) Date of origin April 12th 1917 (b) Place of origin Vimy Ridge (Pimple Hill
   (c) Cause* G.S.W. L.crest of iluim.
   *(Here include original disease or injury)

9. Present condition. (Important, to be a full description of the present disabling condition or conditions).
   Has large scar adherent in part extending from 1" behind Ant Sup Spine of ilium just above crest backwards.and downwards for a distance of 8" and ending just above lower part of Sucro iliac Synchondrosis. Scar is tender throughout entire extent(to touch) Motion of thigh on abdomen. Voluntarily cannot flex thigh on abdomen to a right angle. about 115°. Passively, can flex thigh on abdomen to a right angle can be flexed Extension. Voluntarily can extend leg to an angleof 160° with the body passively cannot extend leg beyond that point owing to pain Ant. Sup. Sp. probably due to tension in sartorious muscle. Power of flexion and extension of l.thigh on abdomen diminished by 30% power of adduction and abduction normal. Range of abduction and adduction of thigh almost normal. Movements of knee normal in range diminished 10% in power. There is fairly well marked general debility. Pulse rate 110.rather poor cVolume & tension.perspires freely.There is some tenderness over course of l.Sciatic nerve.

[After describing all abnormalities, anatomical and functional, contributing to present incapacity (see section 11) state whether such incapacity is directly due to (a) weakness, (b) loss (complete or partial) of an organ or member or of its functions, or (c) to the necessity for rest of the body or of some of its parts.]

M. F. B. 227.

150M.-6-17.
1772-39-1-17.

10. History ;

Here give a description of wounds. scars, deformities, and signs and symptoms of abnormal conditions present and not included in answer 8. This section cannot be completed without stripping the soldier and subjecting him to a thorough physical examination

Scar described under Sec.9. There is fairly well marked general debility. Sweats a great deal. especially at nights No Cough or Expectoration. Eats fairly well. Sleeps rather poorly.

11. To what extent, state in percentages, is capacity to earn a livelihood in the untrained labour market reduced? If there is more than one disabling condition, estimate the incapacity due to each, and that due to all combined.

(1) 15%. (2) 20%. Total 35%, due to service.

12. Did the disability arise on or off duty? Yes. 1 & 2.

13. Was a Court of Inquiry held? no

14. If the disabling condition had its origin before enlistment, has it been aggravated on service?

Yes..... No..... n.a. 1. & 2.

(If the answer is in the affirmative, state in percentages, to what extent the soldier is incapacitated by that aggravation.)

15. Was the disability caused or aggravated by negligence, by vice or by misconduct, or by unreasonable refusal to accept treatment? No

(If the answer is in the affirmative, state in percentages, to what extent the patient is incapaci ated by t at causation or aggravation. In answering t.is question, conduct sheets should be considered. If treatment has been refused, the circumstances surrounding the refusal should be described on page 4.)

16. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? Six months to one year for 1. & 2.

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

Hospital Surgical etc.

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

no.

19. Can the former trade or occupation be resumed? partially

20. Recommendations

Class. "E" for discharge.

By the Medical Board.

Medical Officer by whom the case is brought forward.

STATEMENT OF THE SOLDIER.

(Sections 8, 9 and 10 are to be read to the soldier.)

I, the undersigned E Acteson have heard the description of my disability read, and am satisfied (or not satisfied) with it. (If dissatisfied, statement should follow.) I complain in addition of

E Acteson

Signature of soldier examined.

OPINION OF THE MEDICAL BOARD

21. Does the Board concur with the preceding report? If not, give differing opinions, with reasons, quoting the number of the answer criticized.

Yes.

22. Is the soldier fit for

(a) General service,	(Category A)	(Yes or No). No
(b) Service abroad, not general service,	(" B)	(Yes or No). No
(c) Home service, (Canada only),	(" C)	(Yes or No). No
(d) Temporarily unfit,	(" D)	(Yes or No). No
(e) Unfit for service in Categories A, B and C,	(" E)	(Yes or No). Yes

23. It is certified that the soldier

~~(a) Does require treatment.~~ a.
(b) Does not require treatment.
(c) Should pass under his own control.
~~(d) Should not pass under his own control.~~ d.

(Strike out condition not applicable).

24. It is recommended that the soldier be discharged. (When not for discharge add special recommendation).

Yes. Class "E"

J Rhutun Capt. *President.*
[illegible] } *Members.*
[illegible]

STATION Vancouver, B. C.

DATE Jan. 15th. 1918.

APPROVED BY

DATE

Assistant Director of Medical Services.

APPROVED BY

DATE

Director-General of Medical Services.

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

INSTRUCTIONS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of pages 1 and 2 of this Form. The President of the Board of Medical Officers is responsible for the proper completion of the space, of page 3, reserved for recording the Proceedings of a Board of Medical Officers.
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4. If a complete answer to any question requires more space than that reserved for it, the answer may be continued on the blank space on this page.
5. The nomenclature of diseases to be followed is that 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 and Sons.

BR428663 cR486 B.C.

Mother. Mary Ellen Acteson
2141 Arbutus St.
Vancouver, B.C.

(Medical Officers will please read this Form carefully before using it. See Instructions, page 4.)

FORM TO BE USED FOR WARRANT OFFICERS, N.C.O'S, AND MEN Copy Triplicate

MEDICAL HISTORY OF AN INVALID

S/S.Co. STATION Vancouver, B. C. DATE Jan.14th 1918

1. (a) Unit 196th.Batt.C.E.F. (b) Regimental No. 911717 (c) Rank Pte.

(d) Surname Acteson (e) Christian name Earl

2. Age last birthday 19 Date of birth Oct.19-1898

3. Enlisted at Vancouver, B. C. on June 5-1916

4. Personal description :—

(a) Height 5' 7" (b) Weight 130 lbs (stripped) (c) Complexion Fair.

(d) Colour of hair Auburn (e) Colour of eyes Brown (f) Identification marks C.S.W. L. hip. 1 vac.L.arm

5. Address after discharge (for the use of the Board of Pension Commissioners.) 2141 Arbutus St., Vancouver, B. C.

6. Former trade or occupation Clerk

7. (a) Service

	Years	Days
	1 7/12	9

	Periods	
	From	To
Canada	June. 1916	Nov. 1916
England.	Nov. 1916	Feb. 1917
France.	Feb. 1917	Apr. 1917
England.	Apr. 1917	Nov. 1917
Canada	Nov. 1917	Present.

(b) Has he been Overseas ? Yes to France.

8. Present disease or disability (use authorized nomenclature if possible). 1. Impaired function L.Hip & L.leg. 2. General debility

(a) Date of origin April 12th 1917 (b) Place of origin Vimy Ridge (Pimple Hill

(c) Cause* G.S.W. L.crest of iluim.

*(Here include original disease or injury)

9. Present condition. (Important, to be a full description of the present disabling condition or conditions).

Has large scar adherent in part extending from 1" behind Ant Sup Spine of ilium just above crest backwards and downwards for a distance of 8" and ending just above lower part of Sucro iliac Synchordrosis. Scar is tender throughout entire extent (to touch) Motion of thigh on abdomen. Voluntarily cannot flex thigh on abdomen to a right angle, about 115°. Passively, can flex thigh can be flexed on abdomen to a right angle. Extension. Voluntarily can extend thigh leg to an angle of 160° with the body passively cannot extend leg beyond that point owing to pain at Ant. Sup. Sp. probably due to tension in sartorious muscle. Power of flexion and extension of l.thigh on abdomen diminished by 30% power of adduction and abduction normal. Range of abduction and adduction thigh almost normal. Movements of knee normal in range diminished 10% in power. There is fairly well marked general debility. Pulse rate 116. rather poor volume & tension. perspires freely. There is some tenderness over course of l. Sciatic nerve.

[After describing all abnormalities, anatomical and functional, contributing to present incapacity (see section 11) state whether such incapacity is directly due to (a) weakness, (b) loss (complete or partial) of an organ or member or of its functions, or (c) to the necessity for rest of the body or of some of its parts.]

M. F. B. 227.
150M.—6-18.
1772-39-117.

10. History ;

Here give a description of wounds, scars, deformities, and signs and symptoms of abnormal conditions present and not included in answer 8. This section cannot be completed without stripping the soldier and subjecting him to a thorough physical examination

Scar described under Sec.9. There is fairly well marked general debility. Sweats a great deal. especially at nights No Cough or Expectoration. Eats fairly well. Sleeps rather poorly.

11. To what extent, state in percentages, is capacity to earn a livelihood in the untrained labour market reduced? If there is more than one disabling condition, estimate the incapacity due to each, and that due to all combined.

(1) 15%. (2) 20%. Total 35%, due to service.

12. Did the disability arise on or off duty? Yes. 1 & 2.

13. Was a Court of Inquiry held? no

14. If the disabling condition had its origin before enlistment, has it been aggravated on service?

Yes..... No..... n.a. 1. & 2.

(If the answer is in the affirmative, state in percentages, to what extent the soldier is incapacitated by that aggravation.)

15. Was the disability caused or aggravated by negligence, by vice or by misconduct, or by unreasonable refusal to accept treatment? ..... No

(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.)

16. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? Six months to one year for 1. & 2.

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

Hospital Surgical etc.

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

no.

19. Can the former trade or occupation be resumed? partially

20. Recommendations

Class. "E" for discharge.

By the Medical Board.
Medical Officer by whom the case is brought forward.

STATEMENT OF THE SOLDIER.

(Sections 8, 9 and 10 are to be read to the soldier.)

I, the undersigned E. Acteson have heard the description of my disability read, and am satisfied (or not satisfied) with it. (If dissatisfied, statement should follow.) I complain in addition of

E. Acteson
Signature of soldier examined.

OPINION OF THE MEDICAL BOARD

21. Does the Board concur with the preceding report? If not, give differing opinions, with reasons, quoting the number of the answer criticized.

Yes.

22. Is the soldier fit for

(a) General service,	(Category A)	(Yes or No).	No
(b) Service abroad, not general service,	(" B)	(Yes or No).	No
(c) Home service, (Canada only),	(" C)	(Yes or No).	No
(d) Temporarily unfit,	(" D)	(Yes or No).	No
(e) Unfit for service in Categories A, B and C,	(" E)	(Yes or No).	Yes

23. It is certified that the soldier

~~(a) Does require treatment~~ a.
(b) Does not require treatment.
(c) Should pass under his own control.
~~(d) Should not pass under his own control~~ d.

(Strike out condition not applicable).

24. It is recommended that the soldier be discharged. (When not for discharge add special recommendation).

Yes. Class "E"

J. Clinton Capr *President.*
Paul Lemmon Capt. } *Members.*
W. P. Dawkins Lt.

STATION Vancouver, B. C.

DATE Jan. 15th. 1918.

APPROVED BY

DATE JAN 21 1918

Harrison Lt. Colonel
Assistant Director of Medical Services. M. D. 11

APPROVED BY

DATE .....

Director-General of Medical Services.

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form B. 263.	Attestation Paper,	Militia Form B. 235.
Squadron / Battery / Company } Conduct Sheet,	" B. 263a.	Proceedings on Discharge	" B. 218.
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."

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.

6719

This space to be for numbers

25/11/18

Proceedings on Discharge.

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

No. 911917

Rank Private

Surname Acteson

Christian Name Earl

NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.

Corps (Squadron, Battery or Company) No XI Special Service Coy C.E.F.

Date of Discharge 16th February 1918

Place of Discharge Vancouver B.C.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 19 years months.
Height 5 feet 7 inches.
Complexion Fair
Eyes Brown
Hair Auburn
Trade Clerk
Intended place of residence (To be given as fully as practicable.) 2141 Arbutus St. Vancouver B.C.

Descriptive Marks
Gun Shot wound left hip
Trace left arm

2. The above-named man is discharged in consequence of Medically unfit for Service under K.R.&O. for the C.M. 1910 148 Para 322 (9) auth D.C.O. 11 M.D. 34-A ~~H.6~~ dated 12-2-18

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.

— Very Good —

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

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

— Clerk —

Discharged 30.12.18

M. F. B. 218.

100M.—1-17.
H. Q. 1772-39-113.

(OVER)

MGS 13/1/20 HK

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

Nil

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

6. Medals and Decorations..... Nil

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) Vancouver B.C

(Date) 16th February 1918

R.G. Mounteich Major

Commanding Commanding No. XI Special Service Co'y C.E.F.

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) Vancouver B.C Earl Acteson *(Signature of Soldier.)*

(Date) 16th February 1918 John H. Nichol *(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.

..... *(Signature of Soldier.)*

10. **Statement of Service.**

Service toward Engagement to.....(the date to which the Record of Service is completed)...1...years...256...days.

Total...1...years...256...days.

11. **Confirmation of Discharge.**

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

(Place) Vancouver B.C

(Date) 16th February 1918

R.G. Mounteich Major

(Signature) Commanding No. XI Special Service Co'y C.E.F.

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.)

No Reservations

Earl Acteson

(OVER)

AUDITOR	PAYMASTER
GW	

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

M. OR S. C REGT. No. 911917 RANK Plt NAME (IN FULL) Acteson E (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN: Mrs M. E. Acteson RELATIONSHIP: mother

ADDRESS: 2141 Arbutus St. Vancouver B.C.

IS SEPARATION ALLOWANCE PAID? DATE EFFECTIVE

TO WHOM PAID RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F.: Vancouver B.C. IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION: 5-6-1916 TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP: Last address S/o.

ADDRESS

ANY CHANGE IN ASSIGNEE OR ADDRESS: Mrs Acteson, 2141 Arbutus St. Vancouver B.C.

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE EFFECTIVE

DISCHARGED PLACE: Vancouver B.C. DATE: 16/2/1918 REASON: Mar. Lngel. AUTHORITY IF ENTITLED TO POST DISCHARGE PAY

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.	OTHER CREDITS $	OTHER CREDITS C.			TOTAL CREDITS $	TOTAL CREDITS C.	ACQUITTANCE ROLLS COL. No. 1 NO.	COL. No. 1 DATE	COL. No. 2 NO.	COL. No. 2 DATE	COL. No. 3 NO.	COL. No. 3 DATE	CASH PAYMENTS COL. No. 1 $	COL. No. 1 C.	COL. No. 2 $	COL. No. 2 C.	COL. No. 3 $	COL. No. 3 C.	ASSIGNED PAY $	ASSIGNED PAY C.	REGIMENTAL CHARGES $	REGIMENTAL CHARGES C.	OTHER CHARGES $	OTHER CHARGES C.			TOTAL DEBITS $	TOTAL DEBITS C.	BALANCE DEBIT $	BALANCE DEBIT C.	BALANCE CREDIT $	BALANCE CREDIT C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT																																					Balance from January Pay.
Feb.					1	10			1	10																			1	10	Bal		1	10			
					1	10			1	10																			1	10	1	10	—				Old Balance from 11.5.5 Coy. C.M.R.s 1 January, 1918.
																																					Passed to Lusitania. Sailed 5.2.18. 26.5.18
																																					A.O.B. Recovered by Ottawa 3/7 PM 4055

Certified that all payments of War Service Grats and Separation Allowance have been made accordingly to the particulars shown on the M.F.W. 2596 received.

A. Acteson Capt.
Capt.
Officer i/c War Service Gratuities
P.O. Office M.D. No. 11

Certified that all payments have been made on this account for which covering authority has been received to date.

A. Acteson Capt.
Paymaster, Demobilization Pay
M.D. No. 11

100M-1-19.—L. L. 53962-M. & D. 9723.
M. F. W. 2596.
1772-39-1390.

P. 559
MARRIED OR SINGLE S.

PLACE OF BIRTH Quebec, Can

NAME AND ADDRESS OF NEXT OF KIN Mrs Mary Acteson
2129, Arbutus St. Vancouver B.C. Can.

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. 911917 RANK Private NAME Acteson Earl.

IF IN PERMT. CORPS WHAT UNIT } UNIT 196th Bn. B.C. TRANSFERRED TO 19th Res. Bn DATE 1/2/17 AUTHORITY

PERMANENT FORCE ALLOWANCES TRANSFERRED TO 46th Bn. DATE 21/3/17 AUTHORITY

PLACE OF ATTESTATION Vancouver B.C. Can. TRANSFERRED TO Sask. R.D. DATE 31/7/17 AUTHORITY 3066. 29/11/17

DATE OF ATTESTATION 5/6/16. TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY $18.00 DATE EFFECTIVE 1/11/16

PAYABLE TO Mrs M.E. Acteson. 2129, Arbutus St Vancouver B.C. RELATIONSHIP M

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) Stopped EFFECTIVE 9/12/17 B REASON Discharged

DISCHARGE DATE AND PLACE Canada. 5/11/17. REASON AND AUTHORITY B of E.O. 1/11/17. Med Unfit.

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE) Entered on N.E. Card Index

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE) Checked by K Wolfe

911917
Acteson E

EXTRACTS FROM ACTIVE SERVICE PAY BOOK.

f	No. of Acc. Roll	AMOUNT Francs	£	s	d	Place of Payment.	Name of Paymaster	Remarks.
			2		9	Shorncliffe		7
			11		10	"		Inactivated A/Ju/18
		20	4	6	9	Branston	H.W. Selby	
		13	5	19				

P. 559

MARRIED OR SINGLE S.

PLACE OF BIRTH Quebec, Can

NAME AND ADDRESS OF NEXT OF KIN Mrs Mary Acteson
2129, Arbutus St. Vancouver B.C. Can.

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. 911917 RANK Private NAME Acteson Earl.

IF IN PERMT. CORPS WHAT UNIT } UNIT 196th O.Bn.B.C.R. TRANSFERRED TO 19th Res. Bn DATE 1/2/17 AUTHORITY

PERMANENT FORCE ALLOWANCES TRANSFERRED TO 46th Bn DATE 21/3/17 AUTHORITY

PLACE OF ATTESTATION Vancouver B.C. Can. TRANSFERRED TO Sask., R.D. DATE 21/7/17 AUTHORITY B.O.66. 29/11/17

DATE OF ATTESTATION 5/6/16. TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY $18.00 DATE EFFECTIVE 1/11/16

PAYABLE TO Mrs M.E. Acteson. 2129, Arbutus St. Vancouver B.C. RELATIONSHIP M.

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) Stopped EFFECTIVE 1/12/17 REASON Discharged

DISCHARGE DATE AND PLACE Canada. 5/11/17. REASON AND AUTHORITY B of C.O. 1/11/17. Med. Unfit

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

Entered on N.E. Card Index

Checked by

DATE 1916	PAY No. OF DAYS	PAY RATE	PAY AMOUNT $	PAY AMOUNT C.	FIELD ALLOWANCE No. OF DAYS	FIELD ALLOWANCE RATE	FIELD ALLOWANCE AMOUNT $	FIELD ALLOWANCE AMOUNT C.	WORKING OR SPECIAL PAY No. OF DAYS	WORKING OR SPECIAL PAY RATE	WORKING OR SPECIAL PAY AMOUNT $	WORKING OR SPECIAL PAY AMOUNT C.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 NO	1 DATE	2 NO	2 DATE	3 NO	3 DATE	4 NO	4 DATE	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE CREDIT	BALANCE DEBIT	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
														10	10																10				Bal from Canada
Nov 30	30	#1	30		20	10d	3								33	35	10.17							1460				18		32 60	10 40				
Dec 31 1916	31	1.	31		31	10	310								34 10	89	18/12/16							1460				18		32 60	11 90				
Jan 1-15	15	1.	16 10	16 50											16 50													18		18	10 40				
16-31	16	1.	17 60												17 60													18							Trans to 19th Res Bn effect 1/2/17 Auth R.O. #31. 22-1-17
Feb 1-28	28	1.00 .10	30 80												30 80	15	25/1							973				18		27 73	31 07				
Mar 1-20	20	1.00 .10	22 00												22 00	115	19/4							973				18		27 73	25 34				Trans to 46th Bn Ep 21/3/17 BO 117
Mar. 21-31	11		12 10												12 10	1616	21/3	1522	10/3	1428	26/3	46th Bn		2 62	2 62	2 61				7 85	29 59				
Apl. 1-30	30		33 -												33		37 5/4							2 62				18		20 62	11 97				
May 1-31	31		34 10												34 10													18		18 -	58 07				
June 1-30	30		33 -												33 -												4 87	18		22 87	68 20				London 5/6/17 Hosp 17/4/17 to 2 B 3rd Q 25/5/17 Trans to LRD 21/7/17
July 1-20	20		22												22													18		18 48	72 20				
July 11			17 10												17 10																84 30				
July 11			13 16																																
			300 90.											10.	310 30.									1946	37 06	2 61	4 87	162		226 00					

Sailing List #50 Buxton. d. 17/11/17 LFC 55[73] AB 14080 £ 2 Endorsed V

911.913 Pte. Acteson E.

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
Fwd.	300	30.												10	310 30.
Aug 31	1.10		$4 10												$4 10
Sept 30	33														33.
	367	40.												10	377 40

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
19	46 37	06	2 61	4 87	162	226 00
					18 -	18 -
					18.	18.
19	46 37	06	2 61	4 87	198	262 00

BALANCE Credit	BALANCE Debit	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
84 30				
100 40				
115 40				

MONTH PARTICULARS	CR 1	CR 2	PARTICULARS	DR 1	DR 2	DR 3	DR 4	BALANCE	DEFERRED PAY	SEE ALLOT. ENG.
Balance Forward	~~115 40~~							115 40		
Oct 1st pay	34 10		A.P.			18		131 50		
	34 10					18				
Nov 5 days A.P.	5 50							137 00		
						18		119 00		
			A/C 1049 15 Dec 31/10/17	48 67						
			Draft 2755 Epsom 30/8/17	9 74						
	5 50			58 41		18		60 59		

4 87 Deferred
53 73
60 60

Extracts outstanding. 4.87

Balance transferred to Canada ~~5573~~

Balance transferred to N. E. Branch. — Nil. 487

N.E. Febry 28		A/C Remitted 6/11/17	C.D.C. Buffalo	V/M 629 N.E. 5/18	973	Endorsed ~~973~~
March do	Transf to "Canada" Disc'ge a/c 1	1-3336 1-10/17	G.G.H. Epsom	168 N.E. 10/36	4 87 14 60	c/f 973
	973					Nil.

33M. FORMS — Stopped 1/12/17
DISCHARGE — Canada 3/11/17
PAYBOOK VERIFIED 6/11/17
Ct. BAL 5573 6/11/17
AUTH: B of CO 1/11/17
Med Unfit
Checked