

REGIMENTAL DOCUMENTS

NAME ANDERSON, JAMES

REGT. NO. 718779

UNIT 107th Co

H. Q. FILE NO. \_\_\_\_\_

8667

(H)

2/19/19  
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TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505  
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87  
res. card pay sheets  
1/9/20  
2/25

1/10/20  
1/14/20

m.x se  
11/9/20

M  
H

DEATH

Category

1 killed in  
action  
9-5-17.

DISCHARGE

Category

DESERTION

15-28  
23-28  
31-28  
2



Original

ATTESTATION PAPER.

No. 718779

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

- 1. What is your surname? *Anderson*
- 1a. What are your Christian names? *James*
- 1b. What is your present address? *Refract man*
- 2. In what Town, Township or Parish, and in what Country were you born? *Isle of Man (Town. unknown)*
- 3. What is the name of your next-of-kin? *Ami Eriksson Vigfisson*
- 4. What is the address of your next-of-kin? *(BIFROST) Refract man*
- 4a. What is the relationship of your next-of-kin? *father*
- 5. What is the date of your birth? *5 April 1892*
- 6. What is your Trade or Calling? *Farmer*
- 7. Are you married? *no*
- 8. Are you willing to be vaccinated or re-vaccinated and inoculated? *yes*
- 9. Do you now belong to the Active Militia? *no*
- 10. Have you ever served in any Military Force? *no*  
If so, state particulars of former Service.
- 11. Do you understand the nature and terms of your engagement? *yes*
- 12. Are you willing to be attested to serve in the }  
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? } *yes*

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *James Anderson*, 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.

Date *March 13th* 1916 *James Anderson* (Signature of Recruit) *Belbraith* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *James Anderson*, 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.

Date *March 13th* 1916 *James Anderson* (Signature of Recruit) *Belbraith* (Signature of Witness)

CERTIFICATE OF MAGISTRATE.

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

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

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath

before me, at *Winnipeg* this *13th* day of *March* 1916.

*Ronald Wood* (Signature of Justice)

Description of James Anderson on Enlistment.

Apparent Age 23 years ..... months.  
 (To be determined according to the instructions given in the Regulations for Army Medical Services.)

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).

Height ..... 5 ft. 8 1/2 ins.

Vertical scar over left temple

Chest measurement { Girth when fully expanded ..... 40 ins.  
 Range of expansion ..... 5 ins.

Complexion Fair

Eyes Blue

Hair Dark brown

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

CERTIFICATE OF MEDICAL EXAMINATION.

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

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

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

Date March 13<sup>th</sup> 1916 Hull

Place Winnipeg Medical Officer.

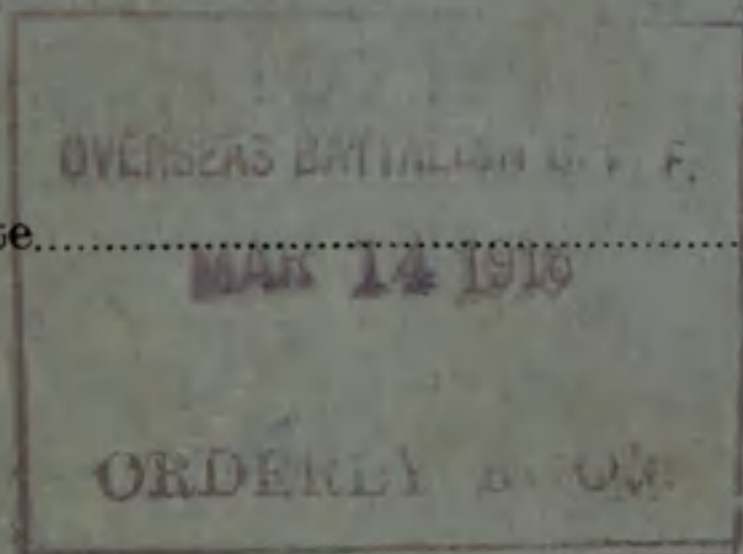
\*Insert here "fit" or "unfit."

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.

James Anderson 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.

Date MAR 14 1916 1916 Geo Campbell (Signature of Officer)  
 O. C. 107th Overseas Batt. C. E. F.



# FORM OF WILL.

I, James Anderson (Name in full)  
Regimental Number 718779 serving in 107th Battalion  
of the Canadian Expeditionary Force, do hereby revoke all former Wills by me  
made and declare this to be my last Will.

I bequeath all my real estate unto

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

absolutely, and my personal estate I bequeath to

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

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

this ..... day of ..... A.D. 191

.....  
Signature of Soldier.

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

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

Signature of First Witness .....

Address of Witness .....

**THE TWO  
WITNESSES  
MUST  
SIGN HERE**

Occupation of Witness .....

Signature of Second Witness .....

Address of Witness .....

Occupation of Witness .....

Continued on reverse  
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LOUISIANA STATE

# ORIGINAL

## MEDICAL HISTORY SHEET.

Surname Anderson Christian Name James

Examined { on 13 day of March 1916  
 at Winnipeg

Approved by Hubannon

Birthplace { City or Town \_\_\_\_\_  
 County Iceland

Rank Capt M.O.

Apparent age 23

Trade or occupation Farmer

Height 5 Feet 8 1/2 Inches. M.O.

Weight 155 Lbs. M.O.

Chest measurement { Minimum 35 inches. M.O.

Maximum expansion 5 inches. M.O.

Physical development Fair M.O.

Small-Pox Marks none M.O.

Vaccination Marks { Arm Right Left  
 Number none

When Vaccinated last \_\_\_\_\_ M.O.

(a) Marks indicating congenital peculiarities or previous disease none 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. |
|----------------|----------|---------------|
| <u>15/6/16</u> | <u>-</u> | M.O.          |
| <u>21/6/16</u> | <u>-</u> | M.O.          |
| <u>1/7/16</u>  | <u>-</u> | M.O.          |

| Date.          | Result.  | ANTI-TYPHOID INOCULATIONS, ETC. |
|----------------|----------|---------------------------------|
| <u>2/6/16</u>  | <u>R</u> | M.O.                            |
| <u>10/6/16</u> | <u>R</u> | M.O.                            |
| <u>15/6/16</u> | <u>R</u> | M.O.                            |

Enlisted on 13 day of March 1916 at Winnipeg

|                      | CORPS.                              | REG'TL NUMBER. | HABITS.     | DATE.              |
|----------------------|-------------------------------------|----------------|-------------|--------------------|
| Joined on enlistment | <u>107th Overseas Batt C. E. F.</u> | <u>718779</u>  | <u>Good</u> | <u>March 13/16</u> |
| Transferred to       | <u>44th Dpn.</u>                    |                |             |                    |

### 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 Service, on the man becoming non-effective; the date and cause being stated on next page.

Surname *Anderson* Christian Name *James*

| STATION.                           | Date of Arrival<br>at the<br>Station. | DATES OF                    |           |           |                             |           |           | DISEASE.       | Number of<br>days in<br>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<br>of Medical Officer. |
|------------------------------------|---------------------------------------|-----------------------------|-----------|-----------|-----------------------------|-----------|-----------|----------------|----------------------------------|--|----------------------------------|
|                                    |                                       | Admission<br>into Hospital. |           |           | Discharge<br>from Hospital. |           |           |                |                                  |  |                                  |
|                                    |                                       | Day                         | Month     | Year      | Day                         | Month     | Year      |                |                                  |  |                                  |
| <i>Isolation Hq.<br/>Aldershot</i> |                                       | <i>20</i>                   | <i>11</i> | <i>16</i> | <i>30</i>                   | <i>11</i> | <i>16</i> | <i>Rubella</i> | <i>11</i>                        | <i>Cured</i>   | <i>J. P. Howe</i>                |
|                                    |                                       |                             |           |           |                             |           |           |                |                                  |  |                                  |
|                                    |                                       |                             |           |           |                             |           |           |                |                                  |  |                                  |
|                                    |                                       |                             |           |           |                             |           |           |                |                                  |  |                                  |
|                                    |                                       |                             |           |           |                             |           |           |                |                                  |  |                                  |
|                                    |                                       |                             |           |           |                             |           |           |                |                                  |  |                                  |
|                                    |                                       |                             |           |           |                             |           |           |                |                                  |  |                                  |
|                                    |                                       |                             |           |           |                             |           |           |                |                                  |  |                                  |
|                                    |                                       |                             |           |           |                             |           |           |                |                                  |  |                                  |
|                                    |                                       |                             |           |           |                             |           |           |                |                                  |  |                                  |
|                                    |                                       |                             |           |           |                             |           |           |                |                                  |  |                                  |
|                                    |                                       |                             |           |           |                             |           |           |                |                                  |  |                                  |
|                                    |                                       |                             |           |           |                             |           |           |                |                                  |  |                                  |
|                                    |                                       |                             |           |           |                             |           |           |                |                                  |  |                                  |
|                                    |                                       |                             |           |           |                             |           |           |                |                                  |  |                                  |
|                                    |                                       |                             |           |           |                             |           |           |                |                                  |  |                                  |
|                                    |                                       |                             |           |           |                             |           |           |                |                                  |  |                                  |

Duplicate Medical History Sheet posted to here.

*J. P. Howe*



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

M. F. W. 54. (A. F. B. 103.)

250M.—1-16.  
H. Q. 1772-39-920.

713

# Casualty Form—Active Service.

Unit, Regiment or Corps 107th Overseas Battalion C.I.F.,

Regimental No. 718779 Rank Private Name Anderson, James

Enlisted (a) 13/3/16 Terms of Service (a) C.I.F. Dep. W. 13/3/16 Service reckons from (a) 13/3/16

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) \_\_\_\_\_

| 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 |  |       |      |  |

*Embarked <sup>Canada</sup> Halifax 18/9/16*  
*Arrived (England) Liverpool 23/9/16*  
~~*Appointed a/L/corp. Witley camp 18/9/16 Part II, Order # 226.*~~

CERTIFIED CORRECT.  
 20 DEC. 1916  
 CAN. REC. OFF. LOYDSON.

*29/9/16 107*

*O.C.,  
107th Bn.*

Proceeded Overseas being transferred to 44th Bn C.I. Witley 13-12-16 Part II B.O. 295  
*Capt & Adj  
For O.C. 107th Battalion C.I.*

14-12-16 C.B.D. Arrived in France and taken on strength of 44th Battalion 14-12-16 Nom. Roll Pt. II. O. 317/20-12-16.

JAN 16 1917 do. Proceeded to join Field JAN 16 1917 Nom. Roll

19 JAN 1917 OC. 44th. Joined Unit Field 19 JAN 1917 B.213. D.C.S. 107

(a) In the case of a man who has re-engaged for, or enlisted into Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered.  
 (b) e.g. Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

[P.T.O.]

| Report  |                    | Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case. | Place        | Date          | Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents. |
|---------|--------------------|---|--------------|---------------|--|
| Date    | From whom received |   |              |               |  |
| 10-2-17 | 10 Fd.Co.          | Attached to 10th Fd.Co. Can. Engineers<br>(Auth: 10th C.I.B.10-6-1 d/-23-1-17)  | Field        | 8-2-17        | B.213.<br>Pt.II.O.31/21-2-17.  |
| 8-3-17  | do.                | 14 days' F.P.No. 2 for "Quitting ranks without leave from his C.O."   | Field        | 5-3-17        | A.F.B.2069<br>Pt.II.O.42/16-3-17.  |
| 10/3/17 | do.                | <i>leaves to be attd</i>  | <i>Field</i> | <i>4.3.17</i> | <i>B.213. Pt II 44.21.3.17.</i>  |
| 19-5-17 | O/C.44th           | Killed in action<br><br><i>J.M. Anders</i><br>Lieut.<br>for Major, A.A.G.<br>CANADIAN SECTION.  | Field        | 9-5-17        | A.F.B.213.<br>Pt.II.O.75 d/28-5-17   |

TR

Rank \_\_\_\_\_ Name **ANDERSON, James** Reg'l No. **718779** ✓  
 Unit **107th, Bn.** If in perm. Corps, }  
 What Unit? } Married or Single **Single.** ✓  
 Place and Date of Enlistment **Winnipeg, 13th, March, 1916.** Place of Birth **Iceland,** ✓  
 Name and Address, Next-of-Kin **Arni Vigfeisson.** ✓  
**Bifrost, Manitoba, Canada.** Relationship **Father.**  
 Assigned Pay Monthly \$ \_\_\_\_\_ Payable to \_\_\_\_\_ Relationship \_\_\_\_\_  
 Separation Allowance \$ \_\_\_\_\_ Payable to \_\_\_\_\_ Relationship \_\_\_\_\_



N/E. R.B. No. 4997  
 File R.L. 25-A-1229  
 Category K.A.

Discharge, Date and Place Reason Character

H. W. & V., Ltd.—7165-16.

| Report.                                   |                            | Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case, | Place.      | Date.    | REMARKS.<br>Taken from Official Documents. |
|---|----------------------------|--|-------------|----------|--|
| Date.                                     | From whom received.        |  |             |          |  |
| ARRIVED IN ENGLAND S.S. "OLYMPIC" 25-9-16 |                            |  |             |          |  |
| 20.11.16                                  | O.C. 107 <sup>th</sup> Bn. | Admitted to Hospital   | Witley Camp | 20.11.16 | Pt II DO 272 "German Affected" C.L.#20     |
| 1.12.16                                   | O.C. 107 <sup>th</sup> Bn. | Discharged from Hosp.  | Witley Camp | 30.11.16 | Pt II DO 283 C.L.#20                       |
| 17.12.16                                  | O.C. 107 <sup>th</sup> Bn. | S.O.S. on transfer to 44 <sup>th</sup> Bn.   | Witley Camp | 13/12/16 | Pt II DO 295                               |
| 20.12.16                                  | 44 <sup>th</sup> Bn.       | T.O.S. from 107 <sup>th</sup> Bn.  | Field       | 14.12.16 | " - - 317                                  |
| 21 2 17                                   | 44 Bn                      | att to 10 Coy CE   | "           | 8 2 17   | " 31                                       |
| 24 2 17                                   | 10 Coy CE                  | "  | "           | "        | " 10                                       |
| 21-3-17                                   | 44 <sup>th</sup> Bn        | ceases to be att'd to 10 Coy CE on return to unit.   | "           | 7-3-17   | " 44 (19. Field Co)                        |
| 2.6.17                                    | "                          | killed in action   | "           | 9.6.17   | C.L. 231.A                                 |
| 28.5.17                                   | "                          | S.O.S. killed in action  | "           | 9.6.17   | Pt II DO 75                                |

103 CHECKED  
 18 DEC. 1916



SURNAME

CHRISTIAN NAME OR NAMES

REG. NO.

*Cann*

*R.*

*J*

*277,038*

~~*279038*~~

RANK

UNIT

Co.

TROOP

BATTY

*Plé.*  
HOSPITAL

*Sask Depot  
(15 Res.)*

DATE OF ADMISSION

1. *Cannought Aldershot.* HOSP. *4.9.18.*

2. HOSP.

3. HOSP.

4. HOSP.

DIAGNOSIS

1. *Broncho Pneumonia a.t.*

2.

3.

*Died 9-9-18 a.t.*

*Unverified*

DISPOSITION

DATE

*at 5.9.18 6299 Dang ill.*

REMARKS

*" 9-9-18 C302*

*" 26.5.19. C508 Note. Correct No is 277038  
" Unit " 15<sup>th</sup> Res.*

**A.M.D. 2 DEPT.**

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

# EPITOME OF HOSPITAL TREATMENT

HOSPITAL

ADM.

1.

2.

3.

4.

5.

6.

7.

Surname *Anderson* Christian Name or Names *J* Reg. No. *718779*  
 Rank *Pte.* Unit *107 Bath.* Co. Troop Batty.  
 Hospital *Mil Isolation Aldershot* Date of Admission *21.11.18*

Transferred

Hosp.

Hosp.

Hosp.

Hosp.

Diagnosis

*Bubella*

(1) Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

*Killed in Action 9-5-17.*

DISPOSITION

Date

*6L 24.11.16 #20.*

*5. 12. 16 #28*

*2. 6. 17. #231.*

*Dis. 30. 11. 16*  
REMARKS

A.M.D. 2 DEPT.

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

*Q*

# EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.



NAME *Corn John*

REGT'L. No. *277038*  
H. Q. FILE No. 649

RANK AND CORPS

*Sasts Regl Dep*

FOLLOWS  
No.

CABLE

NATURE OF CASUALTY

FOLLOWS

NO. DATE

*Npfto John Corn/father*  
*#296 9/9/18*  
*76-2*

*Oakshella Sasts*  
*Wangill Connaught H. Aldershot*  
*Sept 4 th 18 Broncho pneumonia*  
*Name & Regl. no. not verified*

LIST No.

HOSPITAL

DATE OF  
ADMISSION

REMARKS

1306

Admitted 14/11/41  
to 1st ward

14/11/41  
Admitted to 1st ward  
due

*Unit Name + 25 507 1000*

NAME *Conn R.*  
RANK AND CORPS *Plt Sask Regt*

REGT'L. No. *277038*  
H. Q. FILE No 649

FOLLOWS  
NO. *15 Res*  
FOLLOWS

| CABLE                     |                |
|---------------------------|----------------|
| NO.                       | DATE           |
| <i>302</i><br><i>58-4</i> | <i>11-9-18</i> |

NATURE OF CASUALTY

*John Conn Oakshela Sask.*  
*Waf Broncho Pneumonia Connaught*  
*H. Aldershot Sept 9th 118.*

LIST No.

HOSPITAL

DATE OF  
ADMISSION

REMARKS

| LIST No. | HOSPITAL            | DATE OF<br>ADMISSION | REMARKS                   |
|----------|---------------------|----------------------|---------------------------|
| 6229     | Connaught Aldershot | 4-9-18               | Wang M. Broncho-Pneumonia |
| 6302     | " "                 | died 9-9-18          | died " "                  |

No. 718779

RANK

*pte*

NAME

*Anderson, J*

T. O. S. 13-3-16  
20062-14-3-16

UNIT

*10.7th Battalion*

M. D. 10

| PAID FROM     | PAID TO       | SIG. OR REC'T | PROMOTIONS, TRANSFERS, DISCHARGES, ETC. |           |
|---------------|---------------|---------------|---|-----------|
|               |               |               | PARTICULARS                             | AUTHORITY |
| <i>1916</i>   | <i>1916</i>   |               |   |           |
| <i>Mar 13</i> | <i>Mar 31</i> | <i>✓</i>      |   |           |
| <i>April.</i> |               | <i>✓.</i>     |   |           |
| <i>May.</i>   |               | <i>✓.</i>     |   |           |
| <i>June.</i>  |               | <i>✓.</i>     |   |           |
| <i>July.</i>  |               | <i>✓.</i>     |   |           |
| <i>Aug.</i>   |               | <i>✓.</i>     |   |           |
| <i>Sept.</i>  |               | <i>n.</i>     |   |           |

UNIT SAILED

SEP 18 1916



LIST No.

HOSPITAL

DATE OF  
ADMISSION

REMARKS

20.

Mil. Isol. Aldershot.

21-11-16

Rebelle 9

28.

Busch.

30-11-16

4

A.231

Killed in action

9-5-17

718279  
~~7106779~~

REGT'L. No.

H. Q. FILE NO. 649

N. E. *Andersson James*

RANK AND CORPS *Plt. 44th (In Form 7th)*

FOLLOWS  
No. *107th*  
FOLLOWS ✓

| CABLE          |                |
|----------------|----------------|
| NO.            | DATE           |
| <i>M. 5570</i> | <i>2-6-17</i>  |
| <i>R 5478</i>  | <i>6-6-17</i>  |
| <i>B 2090a</i> | <i>28-5-17</i> |
|                | <i>Rouen</i>   |

NATURE OF CASUALTY

*Killed in action May 9<sup>th</sup> 1917*  
*" " " " " "*  
*" " " " " "*  
*(Rec'd 7-8-17)*











NAME *Anderson P. James.* REG. NO *718779* FILE NO *692 4643.*  
 DATE IN DATE OUT P.A. OR B.F. DATE REQUIRED *44th Dec.* REMARKS *✓*

*Medals & Decorations - Father - A. Vigfusson.*  
*Bifrost. Man.*  
 BIFROST

*P.S. Ditto.*

*Serial No 491668*

*9 <sup>2</sup>/<sub>20</sub>*

*Coys. Mrs. J. E. Vigfusson*  
*same address.*

Scroll Desp. *MAY 1 1921* Reg. No. *2-28905*

Plague Desp. *AUG 8 1921* Reg. No. *P1480*

*se*  
*in*

M 1258

*Envelope*

MILITIA AND DEFENCE  
ASSIGNED PAY  
OVERSEAS CONTINGENTS

To Whom *Ms. A. Higfuson* By Whom Assigned *Anderson*

Address *Bifrost* Regtl. No. *418449*

*man* Rank *pte*

Rate *\$ 15<sup>00</sup> xx Sep 1<sup>st</sup> 1916* Corps *104 Bn*

PAYMENTS

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

Pensions Notified Date *15-6-14*  
 Killed in Action }  
 Died of Wounds } Date *9-5-14*  
 Missing }  
 C. L. *10-2/6/14* Clerk *Hewarth*  
 Date Noted *15/6/14* 191

Handwritten scribbles or faint markings at the top center of the page.

Handwritten scribbles or faint markings in the middle of the page.

Handwritten scribbles or faint markings on the left side of the page.

Handwritten scribbles or faint markings on the right side of the page.



# ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2  
(Assignee)

*Mrs. A. Sigfusson*

Name of Soldier

*Anderson J*

PAYMENTS.

L. L. Job 5470—Req. 6888.

*418449 A/c*  
*107 Bn*  
*15<sup>00</sup> SEP 1916*

| Month | Year | Cheque No.                | Am't.                |
|-------|------|---------------------------|----------------------|
| April | 1916 |                           |                      |
| May   |      |                           |                      |
| June  |      |                           |                      |
| July  |      |                           |                      |
| Aug.  |      |                           |                      |
| Sept. |      | <i>R 1618</i>             | <i>15</i>            |
| Oct.  |      | <i>E 19534</i>            | <i>15</i>            |
| Nov.  |      | <i>E 24508</i>            | <i>15</i>            |
| Dec.  |      | <i>A 34955</i>            | <i>15</i>            |
| Jan.  | 1917 | <i>I 36070</i>            | <i>15</i>            |
| Feb.  |      | <del><i>I 42424</i></del> | <del><i>15</i></del> |
| March |      | <i>F 48813</i>            | <i>15</i>            |
| April |      | <i>J 149</i>              | <i>15</i>            |
| May   |      | <del><i>M 4208</i></del>  | <del><i>15</i></del> |
| June  |      | <del><i>B 17984</i></del> | <del><i>15</i></del> |
| July  |      |                           |                      |
| Aug.  |      |                           |                      |
| Sept. |      |                           |                      |
| Oct.  |      |                           |                      |
| Nov.  |      |                           |                      |
| Dec.  |      |                           |                      |
| Jan.  | 1918 |                           |                      |
| Feb.  |      |                           |                      |
| March |      |                           |                      |
| April |      |                           |                      |
| May   |      |                           |                      |
| June  |      |                           |                      |
| July  |      |                           |                      |

*15 (JW) I 42424 Cancelled R.R. 1/2/17*  
*15 L.*  
*15 E.*  
*of 6440 Canc'd R.R.*  
*15 C. chk B17984 cl'd.*  
*Cfx 31/5/14 - 135<sup>00</sup> = J Stewart 6*  
*A/c closed 31/5/14 J Stewart 124.*  
*135 EFX 21-11-17 SH*

*B*

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.   |       |            |      |          |

P. 559.  
MARRIED OR SINGLE

Single

PLACE OF BIRTH

Iceland

NAME AND ADDRESS OF NEXT OF KIN

Mrs. A. Vigfusson  
Bifrost Manitoba

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

A.P. checked found correct.  
R.S. Booth

CASUALTIES, PROMOTIONS, &c.

| PARTICULARS      | EFFECTIVE DATE | AUTHORITY        |
|------------------|----------------|------------------|
| Killed in action | 9/5/17         | C.L.A. 231-26/17 |

| ADMISSIONS TO HOSPITAL, &c. |                 |          |                  |
|-----------------------------|-----------------|----------|------------------|
| DATE ADMITTED               | DATE DISCHARGED | V. OR A. | NAME OF HOSPITAL |

REG'L. NO.

718779

RANK

Pvt.

NAME

Anderson James.

IF IN PERM. CORPS  
WHAT UNIT

UNIT 107<sup>th</sup> Bn

TRANSFERRED TO

7 JUL 1917

DATE 12-16

AUTHORITY P. 20-295

PERMANENT FORCE ALLOWANCES

TRANSFERRED TO

44<sup>th</sup> Batt  
Pay. 2<sup>nd</sup> K

DATE 1/6/17

AUTHORITY C.L.A. 231-26/17

PLACE OF ATTESTATION

Winnipeg.

TRANSFERRED TO

DATE

AUTHORITY

DATE OF ATTESTATION

13-Mch. 1916

TRANSFERRED TO

DATE

AUTHORITY

ASSIGNED PAY MONTHLY \$

15<sup>00</sup>

DATE EFFECTIVE

20 Sept 1916

PAYABLE TO

Mrs. Anne Vigfusson Bifrost Manitoba

RELATIONSHIP

Mother

ASSIGNED PAY MONTHLY \$

DATE EFFECTIVE

PAYABLE TO

RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE)

5/6/17

EFFECTIVE

7/7/17

REASON Killed in action 9/5/17 C.L.A. 231-26/17

DISCHARGE DATE AND PLACE

REASON AND AUTHORITY

Entered on N.E. Card Index

Checked by H. J. Sillitson

C.F.

| DATE      | PAY         |                 |        |  | FIELD ALLOWANCE |                  |        |  | WORKING OR SPECIAL PAY |      |        |  | ASSIGNED PAY CREDITS | OTHER CREDITS | TOTAL CREDITS | ACQUITTANCE ROLLS |          |     |          | CASH PAYMENTS |   |   |   | ASSIGNED PAY | OTHER CHARGES | TOTAL DEBITS | BALANCE |       | PAY WITHHELD OR DEFERRED | PAY AVAILABLE FOR ISSUE | REMARKS |  |  |                      |  |  |  |
|-----------|-------------|-----------------|--------|--|-----------------|------------------|--------|--|------------------------|------|--------|--|----------------------|---------------|---------------|-------------------|----------|-----|----------|---------------|---|---|---|--------------|---------------|--------------|---------|-------|--------------------------|-------------------------|---------|--|--|----------------------|--|--|--|
|           | No. OF DAYS | RATE            | AMOUNT |  | No. OF DAYS     | RATE             | AMOUNT |  | No. OF DAYS            | RATE | AMOUNT |  |                      |               |               | 1                 | 2        | 3   | 4        | 1             | 2 | 3 | 4 |              |               |              | CREDIT  | DEBIT |                          |                         |         |  |  |                      |  |  |  |
| 1916      |             |                 |        |  |                 |                  |        |  |                        |      |        |  |                      |               |               |                   |          |     |          |               |   |   |   |              |               |              |         |       |                          |                         |         |  |  |                      |  |  |  |
| Sept      |             |                 |        |  |                 |                  |        |  |                        |      |        |  | 25                   |               | 25            |                   |          |     |          |               |   |   |   |              |               |              |         |       |                          |                         |         |  |  | Balance from Canada. |  |  |  |
| Oct 31    | 31          | 1 <sup>00</sup> | 31 00  |  | 31              | 10 <sup>00</sup> | 3 10   |  |                        |      |        |  |                      |               | 34 10         | 1                 | 10/16    | 123 | 31-10-16 |               |   |   |   |              |               |              |         |       |                          |                         |         |  |  |                      |  |  |  |
| Nov 30    | 30          | 1 <sup>00</sup> | 30     |  | 30              | 10               | 3      |  |                        |      |        |  |                      |               | 33            | 186               | 6/11/16  | 247 | 30-10-16 |               |   |   |   |              |               |              |         |       |                          |                         |         |  |  |                      |  |  |  |
| Dec 13    | 13          | 1 <sup>00</sup> | 13     |  | 13              | 10               | 1 30   |  |                        |      |        |  |                      |               | 14 30         | 285               | 10-12-16 |     |          |               |   |   |   |              |               |              |         |       |                          |                         |         |  |  |                      |  |  |  |
| Dec 31    | 18          | 1               | 18     |  | 18              | 10               | 1 80   |  |                        |      |        |  |                      |               | 19 80         |                   |          |     |          |               |   |   |   |              |               |              |         |       |                          |                         |         |  |  |                      |  |  |  |
| 1917      |             |                 | 9 20   |  |                 |                  | 9 20   |  |                        |      |        |  |                      |               |               |                   |          |     |          |               |   |   |   |              |               |              |         |       |                          |                         |         |  |  |                      |  |  |  |
| 1-31/17   | 31          | 1 <sup>00</sup> | 31 10  |  |                 |                  |        |  |                        |      |        |  |                      |               | 34 10         |                   |          |     |          |               |   |   |   |              |               |              |         |       |                          |                         |         |  |  |                      |  |  |  |
| 1-28/2/17 | 28          |                 | 30 80  |  |                 |                  |        |  |                        |      |        |  |                      |               | 30 80         | 646               | 29/1/17  |     |          |               |   |   |   |              |               |              |         |       |                          |                         |         |  |  |                      |  |  |  |
| 1-31/3/17 | 31          |                 | 34 10  |  |                 |                  |        |  |                        |      |        |  |                      |               | 34 10         | 701               | 2/2/17   | 793 | 2/2/17   |               |   |   |   |              |               |              |         |       |                          |                         |         |  |  |                      |  |  |  |
| 1-30/4/17 | 30          |                 | 33     |  |                 |                  |        |  |                        |      |        |  |                      |               | 33            |                   |          |     |          |               |   |   |   |              |               |              |         |       |                          |                         |         |  |  |                      |  |  |  |
| 1-31/5/17 | 31          |                 | 34 10  |  |                 |                  |        |  |                        |      |        |  |                      |               | 34 10         | 793               | 1/11/17  |     |          |               |   |   |   |              |               |              |         |       |                          |                         |         |  |  |                      |  |  |  |
| June 1917 |             |                 |        |  |                 |                  |        |  |                        |      |        |  |                      |               |               |                   |          |     |          |               |   |   |   |              |               |              |         |       |                          |                         |         |  |  |                      |  |  |  |
|           |             |                 | 264 30 |  |                 |                  |        |  |                        |      |        |  | 25                   |               | 290 30        |                   |          |     |          |               |   |   |   |              |               |              |         |       |                          |                         |         |  |  |                      |  |  |  |

Statement of  
SEP 27 1917  
Account rendered

Statement of  
FEB 9 1918  
Account rendered

\$135<sup>00</sup> A.P. checked found correct. 2/30. 15.6.17  
R.S. Booth

Carried forward



Regtl. No. *291953* Rank *Pvt* *M.D. 10*  
 Name *Atwood - Chas. Samuel*  
(Christian Names in full) (Surname)  
 Unit *15<sup>th</sup> Regt.* Regt. *22nd.*  
 or  
 Corps

*A.*

*Matthias*

*Winnipeg*

*Farmer*

**COVER**  
**FOR**  
**DISCHARGE DOCUMENTS.**

*Faint illegible stamp*

H. M. T. 'AQUITANIA'  
 EMBK. LYP'L. JAN. 13. 1919  
 DEBKD. HALIFAX. N. S.  
 JAN. 24. 1919

FILE NO. 649-A-4643

718779 ANDERSON. JAMES

107th. BATTALION. C. D. F.