C 40756

ATTESTATION PAPER.

No.

Folio 240

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name? ..... James Drummond
2. In what Town, Township or Parish, and in what Country were you born? ..... Drumferline Scotland
3. What is the name of your next-of-kin? ..... Christine Drummond (mother) ~~Mrs Robert Drummond~~
4. What is the address of your next-of-kin? ..... 6 Cogelly Road, Bodkenteath Co. Scotland ~~Mr W J Stewart~~
5. What is the date of your birth? ..... 13th June 1896
6. What is your Trade or Calling? ..... Farmer and Butcher
7. Are you married? ..... no
8. Are you willing to be vaccinated or re-vaccinated? ..... ~~no~~ Yes.
9. Do you now belong to the Active Militia? ..... ~~no~~ yes
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

.....(Signature of Man).

James Drummond (Signature of Witness).
A. W. Taylor JP

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, James Drummond, do solemnly declare that the above answers made by me to the above questions 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~~, and 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.

I certify that the oath was taken as printed by me with JP Russell

Date Sept. 19th 1914. James Drummond (Signature of Recruit)

A. W. Taylor JP (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, James Drummond, 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.

James Drummond (Signature of Recruit)

Date Sept. 19th 1914. A. W. Taylor JP (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 Val Cartier this 23 day of Sept. 1914.

P. T. Dutton JP (Signature of Justice)

I certify that the above is a true copy of the Attestation of the above-named Recruit.

E. W. Ellsworth (Approving Officer)

100 M.—8-14.
H.Q. 1772-1-13.

3 B att (Brigade Ecole

Description of James Drummond on Enlistment.

Apparent Age 18 years 6 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 6 ins.

Chest measurement.
- Girth when fully expanded 37½ ins.
- Range of expansion 4 ins.

Complexion Dark

Eyes Brown

Hair Dark brown

Religious denominations.
- Church of England
- Presbyterian ✓
- Wesleyan
- Baptist or Congregationalist
- Other Protestants (Denomination to be stated.)
- Roman Catholic
- Jewish

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).

One vacc. scar left arm

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 Sept 2nd 1914. R. S. Gardner Lt. Col.

Place Valcartier Camp. A.M.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.

James Drummond 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.

Geo Buchanan (Signature of Officer)

1st ARTY. BDE. H.Q. ..... Divn. DEC 22 1914 CANADA

Date ..... 1914.

Lt.-Col. Com'd'g
1st Bde. C.F.A.

REGIMENTAL DOCUMENTS

Gnr, NAME Drummond James REGT. NO. 40756 UNIT 3rd Bty. H. Q. FILE NO.

CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
ATTESTATION PAPER (M.F.W. 23, 133, or 51)		Overseas 2-9			DEATH
CASUALTY FORM (M.F.W. 54 or A.F.B. 103)		R 2-12-19	4-2-19		Category
TRAINING HISTORY SHEET (M.F.W. 113)					
FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)				25793	
REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)		Medals 11-9-20		Medals 20	
COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)				15-12	
MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
DENTAL HISTORY SHEET (M.F.B. 465)					Category
MEDICAL REPORT (M.F.B. 227 or A.F.B. 179) 1			AR 2-12-19		Med. Unfit
MEDICAL EXAMINATION (M.F.W. 129)					
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
LAST PAY CERTIFICATE (M.F.W. 44)					
PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					8-8
PARTICULARS OF CHARACTER (A.F.W. 3226)					23-8.
COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					32-8
1 M.F.W. 192					5
1 Misc.					
1 Casual					
1 R.T.O.					
1 medical sheet.					
1 W.A.B. 313a					
2 A.F.I. 1237					
1 A.F.W. 3172		M.X. 3-2-21 K.R.			X

W. 2589
100M-11-18
1772-39-1327

Forms I. 1237. 14

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	40756	Gnr	DRUMMOND.	JAMES.
Year.	Unit.		Age.	Service.
1914	C.R.A.		21	5S/12

Station and Date.

Disease

No. 16 CANADIAN GENERAL (ONTARIO) HOSPITAL. ORPINGTON, KENT.

JULY. 12. 1914.

Complaints :-

Pain and soreness dorsum and outer side y right foot. Slight amount y swelling. Pain and soreness in bending right knee.

History y Present Illness :-

1.7.14. Fell while playing foot ball. and was unable to get up. on straighten right leg. Swelling appeared over patella which has now disappeared. Right foot also became swollen. but swelling has subsided. No pain in either joint — as long as immobile. x Rays of foot and knee negative.

Personal History.

Measles. & Influenza. 2.1.15 Contracted V.D.S. Went to Hospital 9.1.15. Had 6 injections y Salvarsan. in Hospital 8 weeks. 26.4.16 In Hospital with Bronchitis Right-lung and leg in Hospital 2 months. 21.1.14. Contracted V.D.S and V.D.G. Admitted to Hospital 2.2.14. in Hospital 10 weeks. 3.5.14. Admitted to Hospital with Debility following V.D. 8.6.14. Was sent

Family History Father & Mother died y Cancer. 1 Sister ~~died~~ died y TB. 1 Sister died y Cancer.

Military History :-

Enlisted 12.8.14

Canada 12.8.14 — 1.10.14

England 1.10.14 — 1.5.15

France 1.5.15 — 8.12.15 Wounded

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

(A 1014) W3081/P/1296 3,450m 7/15 Drayton Mill Forms 37/14 (E.

Station and Date.	

CASE HISTORY SHEET.

Syden[illegible]m Military Hospital. Kingston Station.

No. 40756 Rank Gnr. Name Drummond, Jas. Age 22

Unit #3 D.D. Completed years of service (Where and how long) C 2/12. E 22/12. F 36/12.

Date of admission August 19/19. Date of discharge Oct. 23/19.

Diagnosis Sprained rt. knee & ankle. Place of origin France.

CONDITION ON ADMISSION AND PROGRESS OF CASE. Reporting re an injury to right knee and right ankle was injured in Germany 3 years ago & again in England about July 1st 1919. Flexion of foot or ankle causes pain. Can see no special reason for this. Wasserman October ~~1st~~ 1st, 1919- Positive. X Ray shows - Right knee & right ankle - No bony lesion visible. Urinalysis - negative.

P-423

FAMILY HISTORY. Negative.

(Tuberculosis, mental or nervous diseases.)

TREATMENT.

(Especially any specific or special form.)

CONDITION ON DISCHARGE. Recommend further treatment under S.C.R.

(and disposal made of case.) as Outpatient.

Date October 23/19.

[illegible] Major
Medical Officer i/c case.

Adjutant & Registrar
Sydenham Military Hospital.

M. F. B. 313a.
100M.—6-18.
1772—39-439.

Forms
I. 1237
10.

Army Form I. 1237.

MEDICAL CASE SHEET.*

Drummond

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	40756	Gunner	Drummond	Jas

Year	Unit.	Age.	Service.
1915	1st Brig C.F.A.	19	6/12

Station and Date.	
	Disease Chancroid
9/1/15	History:- Exposed 6 weeks ago. Noticed sore on penis two weeks ago. Has also glymsis.
	Treatment:- ~~Cat Ig~~ Rubber, Hot Pot Perm
10/1/15	✓ ✓ ✓
11/	✓
12/1/15	✓
13/	Improving
14	✓
15	✓
16/	✓
17/	✓
18	✓
19/1/15	✓
20	✓
21	✓
22	sick in bed
23	✓
24/1/15	✓
25/1/15	✓
26	✓
27	✓
28	✓
29	✓
30	✓
31	Improving

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

(xs) 88511 Wt. W6545/622 200m 10-14 W B & L

P.T.O.

Station and Date.

1/2/15 Improving 28/2/15

1/3/15

3/2/15 2/3/15

4/2/15 18/3/15

5/2/15 19/3/15 Weak

6/2/15 20/3

7/2/15 21/3

8/2/15 24/3

9/2/15 25/3

10/2/15 26/3

11/2/15 27/3

12/2/15

13/2/15

14/2/15 28/2/15

15/2/15 29/3/15 reported.

16/2/15

17/2/15

18/2/15

19/2/15

20/2/15

21/2/15

22/2/15

23/2/15

24/2/15

25/2/15

26/2/15

To be discharged

A. H. Saunders Smith Capt

Had three Salvarsan & not discharged
five Grey Oil. F. McDavis
Capt Cessnock

27/2/15 Not to be discharged. Did
Officer of the day. Taking Salvarsan; refused
further injections. Reported to medical officer of
the day. Jos Bonney.

2/3/15 Had three + one grey oil
Second Grey Oil March 9th 15/3/15 Fourth " " 24/3/15
Third " " " 16th

CASE HISTORY SHEET.

Sydenham Military Hospital. Kingston Ont. Station.

No. 40756 Rank Gnr. Name DRUMMOND, Jas. Age 22

Unit 3 DD Completed years of service (Where and how long) C. 2/12 E. 22/12 F. 36/12

Date of admission Aug. 19/19 Date of discharge Oct. 7/19

Diagnosis Sprained rt. knee & ankle Place of origin France

CONDITION ON ADMISSION AND PROGRESS OF CASE

Reporting re an injury to right knee & right ankle was injured in Germany three years ago & again in England about Jly. 1/19 Flexion of foot & ankle causes pain. Can see no special reason for this

Wasserman Oct. 1/19 Positive

X-Ray right knee & right ankle. No bony lesion visible.

Urinalysis - negative

FAMILY HISTORY

(Tuberculosis, mental or nervous diseases.)

TREATMENT

(Especially any specific or special form)

CONDITION ON DISCHARGE,

(and disposal made of case.)

Fit for discharge

Date

Medical Officer i/c case.

M. F. B. 313a.
100M.—6-18.
1772—39-439.

g 39319

CASE HISTORY SHEET.

Sydenham Military Hospital. Kingston Station.

No. 40756 Rank Gnr. Name Drummond, Jas. Age 22

Unit #3 D.D. Completed years of service (Where and how long) C 2/12. E 22/12. F 36/12.

Date of admission ~~August 19~~ October 22/19. Date of discharge Oct. 23/19.

Diagnosis Sprained rt. knee & ankle Place of origin France.

CONDITION ON ADMISSION AND PROGRESS OF CASE. Reporting re an injury to right knee and right ankle was injured in Germany 3 years ago & again in England about July 1st 1919. Flexion of foot or ankle causes pain. Can see no special reason for this. Wasserman October ~~inst~~ 1st, 1919- Positive. X Ray shows - Right knee & right ankle - No bony lesion visible. Urinalysis - negative.

FAMILY HISTORY. Negative.

(Tuberculosis, mental or nervous diseases.)

TREATMENT.

(Especially any specific or special form.)

CONDITION ON DISCHARGE. Recommend further treatment under S.C.R. as

(and disposal made of case.) Outpatient.

339365

Date October 23/19.

Medical Officer i/c case.

Adjutant & Registrar
Sydenham Military Hospital.

M. F. B. 313a.
100M.—6-18.
1772—39-439.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 40756 (Rank) Gunner

Name (in full) DRUMMOND, James enlisted in

the 3rd Battery

CANADIAN EXPEDITIONARY FORCE at Valcartier, P.Q. on the 19th

day of September 19 14.

HE served in Canada, England and France

and is now discharged from the service by reason of

Medically unfit, K.O. 1030

THE DESCRIPTION OF THIS SOLDIER on the DATE below is as follows :—

Age 22 yrs

Height 5 ft 7½ ins

Complexion Medium

Eyes Brown

Hair Dark brown

Marks or Scars

Vaccination mark left arm

Signature of Soldier

Issuing Officer

Capt.

O. C. Casualty Company

No. 3 District Depot

Rank

Date of Discharge 7-10-191

Appointment

Signed at Kingston, Ontario this 7th day of October 19.

in Military District No. 3

File Reference No. DF3-3-D-578.

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

M. F. W. 39a
200m.—2-18.
H.Q. 1772-39-882

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

No. ..... (Rank) ..... Name .....

Unit .....

Address on Discharge .....

Character and Conduct .....

.....

Former Occupation .....

Special Qualifications of Value in Civil Life .....

.....

Medals and Decorations .....

.....

Remarks .....

.....

Signed at ..... this ..... day of 19

.....
Name of Officer

.....
Rank

.....
Appointment

On demobilization the particulars called for on the back of this certificate will not be completed.

(1001)—Wt. W8208—1278.—800,000.—11-14.—K. & K. Forms B. 103/1.

Army Form B. 103.

(166/art/5/8 d/-29-2-16.)

Casualty Form—Active Service.

Regiment or Corps 3rd Battery, 1st Arl. Bde C.F.A.

Regimental No. ~~40765~~ ~~40756~~ 40756 (~~C107~~ ~~55~~) Rank Gnr Name Jas Drummond.

Enlisted (a) Sept 22/14 Terms of Service (a) for war. Service reckons from (a) Sept 22/14

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: Date	Report: From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
		Transferred To Draft 12-5-15	A.D. Hqrs Can Corps. ADJUTANT, 6th F.A. BDE., C.E.F.		
15-5-15	O.C. D.A.C 941	Trans. to D.A.C.	In the field	13-5-15	
7-8-15	"	admitted to Hosp.	#2 F. Amb.	4-8-15	B 213.
21-8-15	"	Rejoined from Hosp.	In the field	16-8-15	B 213.
8/1/16	Unit.	Granted Leave.	England	2 1/16 11 1/16	B213
	Change of # K3-4-5 d/15-6-15. O.C. 1st C.D.A.C.				
2-1-16	Unit	5 days F. P. #1. making a false statement to a n.c.o.	Field	28 1/16	2069 P.R.H.O. d/-14-2-16
4/16	1 Can. C.C.S.	admtd. & discharged to duty Bruised hip & leg.	"	26 3/16 31 3/16	A36.

(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				
7-5-16	Unit	Att to T.M. Batty	Field	29-4-16	B213 Awards ho 30 d 16-5-16
3/6/16	Unit	Reported missing after action and struck off strength accordingly	Field	2/6/16	B213 PART II O. 14/6/16
					LIEUT. OFFICER i/c RECORDS CANADIAN SECTION G.H.Q. 3RD ECHELON
17.12.18	6 Coy D	T.O.S. from 1st D.A.C. P. of W. Repl. to Rect Camp Dover.	Bordon	9.12.18	Pte 0 351 [signature]
~~22~~.8.19	3 DD	T.O.S. 3 DD.	Kingston	8.8/19	[signature] LIEUT. FOR LT.-COL. i/c RECORDS, C.O.M.F. H.Q. 2376
8-10-19	S.O.S. on Discharge 3 DD. 7-10-19. Med. Unfit. To A.C.R. for treatment R.O. 1080. In R.B. 2-10-19.				H.Q 281 [signature] Capt. O.C. Casualty Company No. 3 District Depot

7466

MILITIA AND DEFENCE

ASSIGNED PAY.

To whom Mrs C. Veale.

Address 37, Logelly Road. Cowdenbeath. Scot.

Rate 20 00

Date to Commence 1st July/15

By whom assigned Drummond. Jas.

Regtl. No. 40756.

Rank Sr.

Corps, &c. Dvr Comm Col.

AP + SA chd Bkldahl

PAYMENTS.

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
Apl.				
May				
June				
July		15791	20	✓
Aug.		46831	20	✓
Sept.		37871	20	✓
Oct.		51453	20	✓
Nov.		68014	20	✓
Dec.		87053	20	✓
Jan.	1916			
Feb.			120	
March				

ASSIGNED PAY.

By whom assigned Drummond J.

Regtl. No. 40756 Gr. Div amm Col

Month	Year	Cheque No.	Amt.	Pay Sheet	REMARKS.
			120		
Jan.	1916	103666	20		
Feb.		125367	20		
March		149294	20		
Apl.		6138	20		
May.		32658	20		
June	√	60697	20		
July		90348	20		
Aug.		125713	20	~~Pay. Aug. then Stop.~~	
Sept.		159188	20.	~~missing in June.~~ D.D.	
Oct.		194255	40		
Nov.	√ 40.00	232256	20		
Dec.		273750	20		
Jan.	1917	314351	20.		
Feb.		355716	20		
March		401720	20		
Apl.			420		
May					
June					
July					
Aug.					
Sept.					
Oct.					
Nov.					
Dec.					

29247 THE MORTIMER SYSTEMS
OTTAWA, CANADA

NAME DRUMMOND. James.

Regimental No. 40756

Unit 1st. ~~Brigade.~~ Div Amm Col

Date of enlistment September.19th.1914.

Place of " birth. Dumferline Scotland.

Married (yes or no) No.

Amount of pay assigned monthly $ 20.00 Eff 1/7/15

To whom payable Mrs C Veale. 34 Logelly Rd Bowden Heath Scotland

Name and address of next-of-kin

Christine Drummond. (~~wife~~).

6. Logelly Road.

Godbenteath. Scotland.

Date and place discharged

Reason for discharge

Character on discharge

PAY OFFICE N.E. BRANCH AUG 7 1916 CANADIAN CONTINGENTS

Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned pay	Other Charges	Total Debits	Remarks, Casualties, etc.
1914 Sep 19	Oct 31	40	1.00	40	40	10c	4		44			40			40	
Nov 1/14	Nov 30/14	30	1.00	30	30	10	3	4	37			35			35	
Dec 1	Dec 31	31	1.00	31	31	10	3 10	2	36 10			15			15	
Jan 1	Jan 31	31	1.00	31	31	10	3 10	21 10	55 20			5			5	
Feb 1	Feb 28	28	1.00	28	28	10	2 80	50 20	81					2 55	2 55	Gmo - 17 0 15 - 2 55
Mar 1	Mar 31	31	1.00	31	31	10	3 10	78 45	112 55							
Apl. 1	Apl. 30	30	1.00	30	30	10	3	112 55	145 55			50			50	W.C. Veale Baths Laundries #2 Clothing LRC 6 Res. Bge. 30/4/15
1 5/15	31 5/15	31	"	31	31	.	3 10	95 55	129 65					12 50 90	13 40	Bal. 143.35
1 6/15	30 6/15	30	.	30	30	.	3	116 25	149 25			6			6	
1 July	31 July	31	.	31	31	-	3 10	~~145 25~~ 4 35	34 10			17 ..	20 -		37	145.35
												163 ..				149.70 Ecky 4.35 added.
1 Aug.	31 Aug	31	1.00	31 ..	31	.10	3 10		183 80			24 82	20 ..		44 82	138 98
1 Sept.	30 Sept	30	1 --	30 ..	30	.10	3 --		33 ..			4 14	20 ..		24 14	114 84
1 Oct.	31 Oct.	31	1 --	31 --	31	.10	3 10		34 10			5 22	20 ..		25 22	153 72
1 Nov.	30 Nov.	30	1.	30 --	30	.10	3 .		33 ..			14 28	20 -		34 28	152 44
1 Dec.	31 Dec	31	1 --	31 -	31	.10	3 10		34 10			121 45	20 -		141 45	44 49
1916 1 Jan	31 Jan	31	1 --	31 -	31	.10	3 10		34 10			15 69	20 .		35 69	43 20
1 Feb.	29 Feb	29	1 --	29 .	29	.10	2 90		31 90			5 24	20 -	5 50.	30 74	44 36 5 days 2/Kol Part 1/10th 8
1 Mch	31 Mch	31	1.	31 .	31	.10	3 10		34 10			4 85	20 .		24 85	50 61
BALANCE TRANSFERRED TO NEW LEDGER.		527					55 70	435	617 05			364 99	180	21 45	566 44	Checked A.W.Lowe

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date					

C

SURNAME. Drummond.

CHRISTIAN NAMES James.

REGL. No. 407560 RANK Gr.

UNIT ~~1st. Fld. Art. Bde~~. 1st Div. Am. Col.

FORMER CORPS Nil

B. CARD NO. A & Q.

Cos Dis 7-10-19
Demob FOLL
Des 281 of 8-10-19
3. Des 10.

Dvd 21-8-19 ½ 24/3/20
ACA 502 J-78

NEXT OF KIN.

NAMES IN FULL Drummond, Christine

RELATIONSHIP TO SOLDIER

ADDRESS 6 Logelly Road, Cowdenbeath Scot.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Scotland, Dunfermline DATE June 13th 1896.

PLACE OF ATTESTATION Valcartier, P.Q. DATE Sept. 22nd 1914.

O/S. 7-10-14 25/2

R/C 17-8-19 390 11.

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

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

From Quebec. per. "S.S. Manitou" 4/10/14.

MARRIED SINGLE Yes, WIDOWER

TRADE OR CALLING Farmer + Butcher RELIGION Presbyterian

DESCRIPTION.

APPARENT AGE 18 YEARS 6 MONTHS

HEIGHT 5' FEET 6 INCHES

CHEST MEASUREMENT 37½ INCHES EXPANSION 4 INCHES

COMPLEXION Dark EYES Brown HAIR Dark Brown

DISTINGUISHING MARKS 1 vacc. scar left arm.

MEDICAL EXAMINATION. PLACE Valcartier, P.Q. DATE Sept. 2nd 1914.

Present address: not stated

Reg. No. 40756 Name Drummond James

Rank Gnr Corps 3 DD Age 22 Service 6 2/12 E 22/12 7 36/12

Ledger No. 326 Serial No. 4393197-39365

31 31

HOSPITALS	DATE	DIAGNOSIS
Sydenham Kingston	19-8-19	Sprained R Knee & Ankle
Dis to 3 DD ce	7-10-19	
adm Sydenham Mil Kingston SGR	8-10-19	Sprained Rt Knee
Dis to Unit	"	
adm Sydenham Mil Kingston	22.10.19.	" " " 9/8
Dis. to. S.C.R.	23.10.19.	

P.T.O.

HOSPITALS	DATE	DIAGNOSIS

M. F. W. 2553.
50M-6-19.
1772—39-1332.

649 - 9 - 2889

1st D.A.C.

DRUMMOND, Gunner Jas. #40756 - 3rd ~~Bn.~~ Temp att to French Mortar Battty

M & D (Brother) David J. Drummond, Esq.
~~2 Coborne St.,~~
~~Kingston, Ont.~~
S.S. Trevisa
Cornwall Canal Office
Cornwall Ont

P & S (Brother) Address as above

Mem Cross (NIL) ----------

Eligible for 14-15 Star 1st D.A.C. Gnr.
E .. .. .. V.M
E .. .. .. B.W.M.

R.R.

Number 40256 Rank Gnr.

Surname DRUMMOND

Christian Names James

Unit C.F.A. Theatre of War France

Dates of Service 13-5-15

Remarks

~~72 Princess St Kingston Ont~~

Latest Address

~~Brockville Ont~~ (Brother)

David J. Drummond, Esq.
S.S. Trevisa
Cornwall Canal Office
Cornwall Ont

Roll No. Page 1173

DESP. SEP 15 1923
REGN. NO. 6841

*Name DRUMMOND James Rank Gnr. Regtl. No. 40756

Fyle Depot D 578

Original unit 3 Btty. Present unit 1 T.Mrtr. M or S. Age 22 Religion Pres. Ref. H.Q.

Port, ship, and date of arrival Araguaya, Portland, Me. 17-8-19

Next of kin Mrs. James Ferguson, 26 Dean Park St., Edinburgh, Scotland. (Sister)

Address on leave Montreal, Que.

Address on discharge

Transportation issued Yes / No Date Character on discharge

Previous occupation Butcher Date and place of enlistment Valcartier 23-9-14

Diagnosis Sprained rt. knee & foot Date of Medical Boards

Date. Tos	Remarks.	Pt. 2 Order No.
	From Clearing Depot	
19.8.19	Posted to Queen's	HS: 235
19.8.19	Granted leave with subsistance to 2.9.19	235
7-10-19	Discharged from Hosp. to SCR for treatment	

*—Name will be given in full; surname first.

[OVER]

Date	Remarks.	Pt. 2 Order No.

M.F.W. 192.
233-D.P.-209M-3-19.
1772-39-1243.

Surname: Drummond, J.

Christian Name or Names:

Reg. No.: 40756.

Rank: Dvt. 2nd Cl.

Unit: C. D. Amm. Col (W.A.C.)

Co.: #1. Gen.

Troop: C.A. Depot.

Batty.:

Hospital: 2 Fwd Amb

Date of Admission: 8.1.15.

Transferred: 1 Can Cas. Cl. St.

Hosp. 4-8-18

Rochester Row. Mil.

Hosp. 26.3.16

Hosp. 6.2.19

Hosp.

Diagnosis

(1) V.D.S.

Later Diagnosis (if changed)

(2) Bruised left leg

(3)

A.M.D. 2 Dept.
Boh. of D
G.M.S.O.M.F.C. London

Additional Diagnoses, if more than one state present

Prev rept. Missing. now Unofficially rept Pris. of War

Now ~~U.K.~~ V.D.

Debility Post V.D. 9

DISPOSITION

Debility 16 Post V.D. G.L.

V.D.G.L. Duty

3.4.18

Date

V.D.S. to Rejoined unit

16.9.18.

adbk. #1 Gen & Spr. Rt Knee & Ankle R.

REMARKS

G.L. 1.9.15 84.

" 2.5.16. A224.

" 21.6.16. A245.

ct. 13.7.16 #a/256

e.t. 23-8-16. A 286

13.9.16. A301.

7.6.17 a476

12.12.18 B423

17.2.19 C477

Discharged. 31.3.16.

Rpt. from Base: missing 2.6.16

Offic. at Dulmen 4-6-16

Unoff. change of address of official pris. not detained at Wahn Bei Coln. Rhld. Germany.

Now at Limburg-a-Lahn

Repatriated P. of W.

Arr. at Rest Camp Dover 9-12-18

Over

EPITOME OF HOSPITAL TREATMENT.

	Hospital	Adm.
1.	Mil. Conv. Epsom	4-5-19
2.	Woodcote Park Epsom	10.6.19
3.	16 b G Orpington	1.7.19
4.	5 b. G. Kirkdale	6-8-19
5.		
6.		
7.		

CL.
3-3-19. C489. Ref. C477. Diagnosis changed to V.D.G.
6-5-19 C542
20.6.19 B574 ——— Discl 9.6.19.
21.6.19 B548. Readmitted
3.4.19 B584.
8.8.19 B614

16-8-19 C618 Invalided to Cnada R 8-8-19.

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

War Service Badge Class. A.+B

SHORT FORM. No. 214863-65356. Issued

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

1. No. 40756

2. Rank Gunner.

3. Name DRUMMOND James.

4. Unit No.3 District Depot.

5. Date of Discharge | 7-10-19 | Place Kingston, Ontario.

6. Reason for Discharge Medically unfit, to S.C.R. for further treatment.

7. Authority R.O. 1089.

8. Proposed Residence after Discharge ~~26 Dean Park, Bloor Ellis~~ Brockville, Ont.

9. CERTIFICATE TO BE SIGNED BY SOLDIER.

I hereby acknowledge that at the undernoted place and date I received my discharge Certificate M. F. W. ? Drummond J

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Medical Documents Forwarded to S.C.R. ~~or B.P.C.~~ on NOV 8 - 1919 Date

Place Kingston, Ontario.

Date 7-10-19.

Signature James Peabody W Capt. O. C. Casualty Company (O.C. Discharging Unit.)

K.C.D. 20-11-19-M

M.F.B. 218a—150M-3-19—1772-39-113.

Star 2-12-19

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

1. No. 40756

2. Rank. Gunner.

3. Name. DESMARAIS James.

4. Unit. No. 3 District Depot.

5. Date of Discharge 7-10-19. Place Kingston, Ontario.

6. Reason for Discharge Medically unfit, to S.C.E. for Further Treatment.

7. Authority S.O. 1080.

8. Proposed Residence after Discharge Brockville, Ont.

9. CERTIFICATE TO BE SIGNED BY SOLDIER.

I hereby acknowledge that at the undermoted place and date I received my discharge Certificate M. F. W.

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place Kingston, Ontario.

Date 7-10-19.

Signature

(O.C. Dispersing Unit.)

LIST OF DISCHARGE DOCUMENTS.

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

ORIGINAL

40756

Army Form B. 178.

To be used for recruits enlisting direct into the Regular Army only. Army Form B. 178A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname Drummond Christian Name James

TABLE I.—GENERAL TABLE.

Birthplace .. Parish Dunfermline ~~County~~ Scotland

Examined .. .. .. on ____ day of ____ 191 .
at ____

Declared Age .. .. 19 years ____ days.

Trade or Occupation .. Farmer

Height .. .. .. 5 feet, 7½ inches.

Weight .. .. .. 151 lbs.

Chest Measurement — Girth when fully Expanded 37½ inches.
Range of Expansion 3 inches.

Physical Development .. good

Vaccination Marks — Arm .. Right ____ Left one
~~Number~~ 1

When Vaccinated .. .. 7 years ago

Vision .. .. .. R.E.—V= good
L.E.—V= good

(a) Marks indicating congenital peculiarities or previous disease .. .. (a) ____

(b) Slight defects but not sufficient to cause rejection .. .. .. (b) ____

Approved by .. (*Signature*) ____

(*Rank*) ____ *Medical Officer.*

Enlisted .. .. .. at Valcartier
on 23 day of Sept 1914.

Joined on Enlistment ..	Corps.	Regtl. No.
	1st Bde C.F.A.	40756
Transferred to		

Became non-effective by .. ____

on ____ day of ____ 191 .

(*Signature*) ____

(*Rank*) ____

Entries in Red Ink made from Attestation Sheets. P.T.O.

R.M. Shaw
for D. D. M. S.

W. P. GRIFFITH & SONS LTD., Printers, Old Bailey, E.C.
[127] W3208/600 75m 8/14 Hw 45 59
Forms B. 178. 38

Table II.—Only for Admissions to Hospital or to the Si

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	
	Day	Month	Year	Day	Month	Year			
No 1 Gen. Hospital	9	1	15	3	4	15	V. Sore	85	
No 1 Can Cas Cg Stat.	26	4	16	31	4	16	Bruised Hip & Leg	5	
Rochester Row Mily Hosp	5	2	19	3	5		Gonorrhoea (20) + Syphilis 42 D	88	
Epsom	3	5	19	30 JUN 1919			Debility following D	57	
16 CANADIAN GENERAL HOSPITAL RIPPINGTON KENT	30	6	19	~~5~~ 8 19 ~~25 7 19~~ ~~28 7 19~~			Sprain Rt Knee & Ankle	36 ~~35~~ 38	
NO. 3 CANADIAN GENERAL HOSPITAL LIVERPOOL	5	AUG	1919	8 AUG 1919			Do		
H M.A.T. Arlanza	8	8	19	18	8	19	do		
Lepd M.A. Kingston	19	8	19	7	10	19	Do	49	

ck List in the case of Warrant Officers treated in quarters.

emarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
Well Discharged	H. M. Davis 1224.
ocoeci found in smear on admission. Complement fixation test +++. Had Hi ceded dilysitis. To discharge for last 3 weeks, urine clear before + after prostatic massage reflexes to ch to touch. Treated with fort. ferney injections Wassermann 1/1 found 0 0 ++ No active Syphs Clinically. Treated w Bulford in 19 15s for tertiary Syphilis 3 inj. 3 gm Kharsivan 2 " " } 5 inj 6 x 19 gr 3/3/19 to 14/4/19 8/6/19 Wassermann positive Transfer to V.D.S. ward Bordet A. Cattaneo	A Mohan Capt C N Hills Lieut Col Capt RAMC 11-6-19
Some swelling caudle-tenderness & pain on movement of Re-caudle & knee	C Williams Capt RAMC
Improving	E D Brown Lt
Improving Boarded Oct. 1/19 Med. Unfit SCR.	A E Burns Capt. RAMC for Colonel in charge

Table III.—Boards; Courts of Inquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, etc.

Date	Brief details, and signature
26/6/19 A	
No. 10 CANADIAN GENERAL (ONTARIO) HOSPITAL, ORPINGTON, KENT. 17 JUL 1915	Sapper R. Kuss & medic - Pass to leave with blanket

Table IV.—Service Table.

Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation	Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation

Envelope 12079

Rank and Name	DRUMMOND James
Regimental No.	40756
Unit	1st Bde.
Date of enlistment	Sept 19,1914
Place of birth	Scotland
Married (Yes or No)	No
If in Permanent Force	
Promotions or appointments	

Name and Address of Next-of-kin
Christine Drummond (wife)
6 Logelly Rd.,
Cadbenteath, Scot.

Date and place of discharge
Reason for discharge
Character on discharge +391

Cambridge
M.X 3-2 8/ G.R.

P of W.

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
8-2-15	O/C 1st A.B.	Transferred to Depot Battery	England	8-2-15	Part II. O. Date 8-2-15
28-2-15	O.C. 1 A.B.	~~In Hospital~~ Not reported.	Devizes	28-2-15.	with Field return #4. #5
22-4-15		with No 1 Depot Battery	Shorncliffe	22-4-15	N Roll of Sub-Records.
12-5-15	O.C. Rs. Bde.	Drafted to France.	Shorncliffe	13-5-15	Part II. O#50 Para 1 & 2.
22-5-15	O.C. D.A.C. ~~Genl Hospl~~	Taken on Strength D.A.C.	France	13-5-15	Part II O# 13
18-8-15	W.O.	Admtd 2 Can Field Hosp	"	4.8.15	Case Sheet 75 Not Stated
1.9.15	"	Rejoined Unit from Hosp	"	16.8.15	" " 84
15.1.16	O/C 1 D.A.C.	Granted leave 2.1.16 - 11.1.16	"		Part II O# 3
14.2.16	" "	for making false statement to N.C.O. 5 days F.P. No 1.	"	28.1.16.	" " 8
2.5.16	1 D.A.C.	To 1 Can Cas Clearing Station	"	26.3.16	Case Sheet 224 Bruised Hip Leg
" "	"	Discharged	"	31.3.16	" " " " "
14.5.16	O/C 1 D.A.C.	Temporarily to T.M.B.	"	29.4.16.	P II. O#. 20
21.5.16	" "	P II O# 20 should read on Command T.M.B	"		" " 31

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
14.6.16	O/C 1 D.A.C.	Reported Missing after action +Struck off Strength	France	2.6.16	P.I.D. 2nd 244
21.6.16	1.D.A.C.	(Missing) Reported from Base	"	2.6.16	Base Sheet 245
13.9.16	"	Now unofficially rep.d Prisoner of War	"	7.6.16	" " 256 4th 20th 29
23.8.16	"	"Officially Repd P.W. at Sulmen	"	4.6.16	" " 286 4th II D 34. 31-5-16
13.9.16	"	Now unofficially repd at Wahn Bei Coln, Rhld Germany	"		" " 301 4th II D 49
7-6-17	"	Prev. repd P of W. at Wahn Bei Coln now trans. to Limburg-a-Lahn	"		C.L.A. 476
12.11.18		Repatriated Prisoner of War at Camp Dover.		9.11.18	C.L. B 423
17.12.18	C.A.R.D.	T.O.S. from 1st D.A.C. Repot. P.O.W. on Repting to Rect Camp Dover	Inv. Border	9.12.18	4th II D 351
20.2.19	"	~~T.O.S. on admission hospital~~	" "	6.2.19	— 51 Cancelled by 52 21/2/19
21.5.19	"	6 days pay for a W.Z.	" Repon	2.5.19	— 141
CANADIAN ARTILLERY					
16.8.19	C.F.A.	Dvr to Canada 5th Can Gen Hpl L'pool			
		SL 509 m D 3.	Liverpool	8.8.19	E.L.C. 618
6.9.19	C.A.R.D.	S.O.S. to Canada	Brn	8.8.19	4th II 233

THIS FORM WILL BE USED FOR ALL RANKS

MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" issued by the B.P.C. and instructions issued by Militia H.Q., Ottawa, will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of Sections 1 to 17 of this Form and will obtain the signature of the invalid to the "Statement," page 3. The President of the Board of Medical Officers is responsible for the proper completion of sections reserved for recording the "Opinion of the Medical Board."
3. In answering the questions, Medical Officers will carefully obtain and record the invalid's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the invalid concerned, from witnesses, or from documents, Regimental or otherwise.
4. Special care is required in answering question 9. Read the questions carefully. All questions must be answered.
5. If space provided under any section is insufficient add another sheet. Such sheets must be initialled by the Medical Board.
6. A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board."
7. Under no circumstances may information other than that in sections 7, 8, 9 and 10 be communicated to the invalid, directly or indirectly.
8. The nomenclature of diseases must be followed, if possible, as described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London (1915), by Messrs. Harrison & Sons.

STATION Kingston Ont. DATE Oct. 2nd 1919

1. 1 (a) Unit 3 D.D. (b) Regimental No. 40756 (c) Rank Gnr.

(d) Surname DRUMMOND (e) Christian name James

(f) Home address Brockville Ont. Box 437

(g) Next of Kin Mrs. Jas. Ferguson (h) Relationship Sister

(i) Address of Next of Kin 26. Dean Park Street, Edinboro Scotland

2. Age last birthday 22 Date of birth June 13th 1897

3. Enlistment, or Appointment (if an Officer) (a) Place Gananoque Ont (b) Date Aug. 12th 1914

4. Personal description:

(a) Height 5'7½" (b) Weight 155 (stripped) (c) Complexion Medium

(d) Colour of hair Dk. Brown (e) Colour of eyes Brown (f) Identification marks, Scars, etc. Vac. mark left arm

5. Former trade or occupation Farmer

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).	Years	Days
	5	48

	Periods	
	From	To
Canada 3rd Bty. 1st Brigade Artillery	Aug. 12/14	Dec. 1/14
England	Dec. 1/14	May 1/15
	Dec. 16/18	Aug. 19/19
France or other theatres of War	May 1/15	June 2/16
Prisoner of War	June 2/16	Dec. 4/18

7. Original disease, or injury 3 D.D. Aug. 19/19 Date

Sprain of rt. knee & ankle

2. Syphilis

(a) Date of origin 1. Jly. 1/19 2. 1915 (b) Place of origin 1. Orpington 2. England

(c) Cause 1. Accident while playing foot ball

2. Infection

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

Pain on movement of knee joint & ankle. Slight stiffness on movements of joints, ~~-improving~~ impairing function, following sprain while playing football. 2. Latent syphilis

9. Present condition—(*a*) (Before completing this section the invalid should be stripped, and subjected to a thorough physical examination. Important, to be a full description of the present disabling condition, or conditions only. "History" must be recorded in Section 10. Describe all abnormalities, anatomical and functional, contributing to present disability; objective findings to be stated first, then subjective findings.)

1. Subj. Man complains of stiffness with some limitation of movements of right knee and ankle with pain at same time.

There is some swelling over dorsum of right foot and slight tenderness on pressure in region of joint. There in only very slight limitation of movements of ankle but man holds joint stiff because of pain on movements. He can walk about one mile when ankle aches & becomes quite painful. There are no objective signs at knee except on full flexion knee pains somewhat. X-Ray of both joints show no bony lesion. No atrophy of muscles.

2. Subj. No subjective symptoms

Obj. No obj. symptoms. Wasserman positive

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

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

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

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

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

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

Taken prisoner June 2nd 1916. Remained in Germany until Dec. 4/18
While playing football in England in Jly. 1919 hurt knee and ankle
Ankle & knee have never returned to normal.
2. Had a hard chancre in 1915. Received 6 treatments at time with
7 injections of mercury. Received 7 more treatments of salvarsan
in March 1919. Wasserman still positive Oct. 1/19

10.—(*b*) (Here give a complete history, as obtained from invalid, with dates of origin, of any affection from which the invalid, has suffered either prior to or since enlistment, and not included in Section 10 (*a*).)

V.D.S. & V.D.G. 21/1/19 Received treatment for same on two different occasions

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

Nil

11.—(*a*) Did the disabling condition have its origin before enlistment? 1. No 2. No

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

1.2. - N.A.

12. Was the disability caused, or aggravated; (*a*) by intemperance, or improper conduct; or (*b*) by unreasonable refusal to accept treatment? 1. No 2. Yes

The regimental documents will be referred to.

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

13. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? 1. 3 mos. improving 2. Should receive further treatment

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

Eng. Mil. Hospitals
Q.U.M.H. since Aug. 19/19

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit?
(If the answer is "yes" state nature of treatment required and probable duration)

Yes, massage & electricity under care of S.C.R. also Salvarsan for V.D.S.

16. Can the former trade or occupation be resumed? Yes with limitations
(If not, briefly state why)

17. Recommendations That this man be discharged as medically unfit & placed under the care of S.C.R. for further treatment for ankle & leg and also for syphilis.

R.J. Tuckes Capt AMC
Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

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

I, the undersigned.....have heard the description of my disability and present condition read, and am satisfied (or not satisfied) with it. (If dissatisfied, statement should follow.)

I complain in addition of.....

Gnr Jas Drummond Rank.
Signature of invalid examined.

OPINION OF THE MEDICAL BOARD

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

Yes

19. Is the invalid fit for

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

20. It is certified that the invalid

(*a*) ~~Does require treatment.~~ (Give the nature of the condition and of the treatment required and its probable duration.)

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.)

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

as medically unfit & placed under the care of S.C.R. for further treatment.

Before signing the President of the Medical Board will read the statement signed by the invalid and differing opinions regarding Sections 7, 8, 9 and 10, as recorded in Section 18, to the invalid and if no change is indicated, will initial the statement. If, as a result of differing opinions regarding Sections 7, 8, 9 and 10 only, recorded in Section 18, the invalid is dissatisfied with the statement previously made, remarks of the Medical Board will be added here.

Wm Gibson Capt M.C. *President.*

PLACE Kingston

DATE Oct. 2nd 1919

J.P. Macdonald Capt } *Members*

TO BE COMPLETED WHEN TREATMENT IS REFUSED

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

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

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

President.

PLACE.....

DATE..... } *Members*

APPROVED BY

Captain A. M. C.
For A.D.M.S. *Assistant Director of Medical Services.*

DATE OCT 4 - 1919

APPROVED BY

Director-General of Medical Services.

DATE.....

THIS FORM WILL BE USED FOR ALL RANKS

MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" issued by the B.P.C. and instructions issued by Militia H.Q., Ottawa, will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of Sections 1 to 17 of this Form and will obtain the signature of the invalid to the "Statement," page 3. The President of the Board of Medical Officers is responsible for the proper completion of sections reserved for recording the "Opinion of the Medical Board."
3. In answering the questions, Medical Officers will carefully obtain and record the invalid's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the invalid concerned, from witnesses, or from documents, Regimental or otherwise.
4. Special care is required in answering question 9. Read the questions carefully. All questions must be answered.
5. If space provided under any section is insufficient add another sheet. Such sheets must be initialled by the Medical Board.
6. A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board."
7. Under no circumstances may information other than that in sections 7, 8, 9 and 10 be communicated to the invalid, directly or indirectly.
8. The nomenclature of diseases must be followed, if possible, as described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London (1915), by Messrs. Harrison & Sons.

No. 16 CANADIAN GENERAL (ONTARIO) HOSPITAL,

STATION ORPINGTON, KENT. DATE 14-7-1919.

1. 1 (a) Unit C.F.A. (b) Regimental No. 40756 (c) Rank Gnr.

(d) Surname DRUMMOND (e) Christian name JAMES

(f) Home address 26 Dean Park Street Edinburgh
General Delivery Kingston Ontario.

(g) Next of Kin Mrs. James Ferguson (h) Relationship Sister

(i) Address of Next of Kin 26 Dean Park Street Edinburgh

2. Age last birthday 22 Date of birth June 13th 1897

3. Enlistment, or Appointment (if an Officer) (a) Place Cananoque (b) Date 12-8-14

4. Personal description:

(a) Height 5' 7½" (b) Weight 160 Est (stripped) (c) Complexion Florid

(d) Colour of hair Brown (e) Colour of eyes Brown (f) Identification marks, Scars, etc. Vaccination mark left arm.

5. Former trade or occupation Farmer.

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).	Years	Days
PATIENT'S STATEMENT		

	Periods	
	From	To
Canada	12-8-14	1-10-14
England 1-10-14 to 1-5-15	8-12-18	
France or other theatres of War	1-5-15	8-12-18
Prisoner of war.		

7. Original disease, or injury SPRAIN OF RIGHT KNEE AND ANKLE.

(a) Date of origin 1-7-19 (b) Place of origin Orpington, Kent.

(c) Cause Accident Playing foot-ball.

M. F. B. 227.

400M.—11-18.
1773-39-117.

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

(SPRAIN RIGHT ANKLE AND KNEE) Pain in movements of both joints. Some Stiffness on movements of both joints impairing function. Rest of limb.

9. Present condition—(*a*) (Before completing this section the invalid should be stripped, and subjected to a thorough physical examination. Important, to be a full description of the present disabling condition, or conditions only. "History" must be recorded in Section 10. Describe all abnormalities, anatomical and functional, contributing to present disability; objective findings to be stated first, then subjective findings.)

OBJECTIVE SYMPTOMS :- Some swelling over dorsum of right foot and tenderness on pressure and pain on movement of ankle joint. Pain on movement of right knee joint and tenderness of joint. X-Ray shows, Negative for fracture both parts.

SUBJECTIVE SYMPTOMS:- That joints are still painful when he moves them.

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

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

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

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

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

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

DOCUMENTARY Not available. PATIENT STATES:- That on 1-7-1919 while playing foot-ball he fell and was unable to get up on account of severe pain in right knee. That night noticed swelling in right knee and ankle and pain on movement of both joints.

10.—(*b*) (Here give a complete history, as obtained from invalid, with dates of origin, of any affection from which the invalid, has suffered either prior to or since enlistment, and not included in Section 10 (*a*).)

Measles in infancy. M.H.S. 2-1-15 VoD.S. admitted to Hosp. 9-1-15 Treatment , 6 injections no disability 9-1-15. 26-4-16 In hospital with bruise of right hip. Recovery. 21-1-19 VDS & VDG No disability.

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

Vaccination mark left arm.

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

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

Not applicable

12. Was the disability caused, or aggravated ; (*a*) by intemperance, or improper conduct ; or (*b*) by unreasonable refusal to accept treatment ? (a) No. (b) No.

The regimental documents will be referred to.

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

13. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one ? 3 Weeks

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

Hospitalization.

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

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

Yes 3 Months massage. On arrival in Canada to be dealt with in accordance with P.C.I. 47 of 20-1-1919.

16. Can the former trade or occupation be resumed ? Yes on completion of treatment.

(If not, briefly state why)

17. Recommendations

Invalid to Canada.

G. Mc Cance

Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

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

I, the undersigned James Drummond have heard the description of my disability and present condition read, and am satisfied (or ~~not satisfied~~) with it. (If dissatisfied, statement should follow.)

I complain in addition of

nil

James Drummond Rank. Gunner

Signature of invalid examined.

OPINION OF THE MEDICAL BOARD

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

We concur.

See Special recommendation Sect 15.

19. Is the invalid 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.~~)	yes DBL
(*e*) Unfit for service in Categories A, B and C	(" E)	(Yes or No.)	no

20. It is certified that the invalid

(*a*) Does require treatment. (Give the nature of the condition and of the treatment required and its probable duration.)

Sprain of right knee and ankle 2 to 3 months Rest and massage.

(*b*) ~~Does not require treatment.~~
(*c*) Should pass under his own control.
(*d*) ~~Should not pass under his own control.~~
(Strike out condition not applicable.)

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

Patient be invalided to Canada.

Before signing the President of the Medical Board will read the statement signed by the invalid and differing opinions regarding Sections 7, 8, 9 and 10, as recorded in Section 18, to the invalid and if no change is indicated, will initial the statement. If, as a result of differing opinions regarding Sections 7, 8, 9 and 10 only, recorded in Section 18, the invalid is dissatisfied with the statement previously made, remarks of the Medical Board will be added here.

No. 10 CANADIAN GENERAL (ONTARIO) HOSPITAL
CAMPDEN, KENT.

PLACE

17 JUL 1919

DATE

W.H.Eby Capt. C.A.M.C. *President.*

E.N.Ballantyne Capt. C.A.M.C. } Members

TO BE COMPLETED WHEN TREATMENT IS REFUSED

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

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

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

President.

PLACE

DATE

} Members

CERTIFIED TRUE COPY

APPROVED BY

Assistant Director of Medical Services.

DATE

Captain, C.A.M.C.
for A.D.M.S., Canadians, London Area.

APPROVED BY

Director-General of Medical Services.

DATE

ASSISTANT DIRECTOR OF MEDICAL SERVICES, CANADIANS, LONDON AREA
JUL 18 1919
13, BERNERS ST. LONDON, W.1

Gnr. Drummond,J.

40756

Sept. 3,. 1919.

Reporting re an injury to right knee and right ankle. Was injured in Germany 3 years ago and again in England about July 1/19. Flexion of foot or ankle causes pain. Can see no special reason for this. Will order an X-Ray and study same.

880. CS 188 W.503/P.36. 20,000 Pads. 10/17. N.P.A. Ltd. E. 1955.

Army Form W. 3172.
(In pads of 50)

#16 C.G.H. Hospital.

Ward 19 No. of Bed Date July 9th 1919

Regl. No.	Rank and Name.	Corps.	Part to be X-Rayed.
407 56	Gnr. Drummond E.	C.R.A.	A. Ankle Joint (Rt.) B. Lower Third Femur (Rt.)

Short History of Case.

(To be completed by M.O. i/c case.)

A. Had severe arthritis right ankle joint while a P. of W. in Germany – Recurrence recently

B. Knee strained in football match Dominion Day 1919. Condition not suggesting any evidence of fissured fracture lower third right femur.

Signature of M.O. T. Lloyd Tovell Capt.

Date July 9th 1919

Report on Result of X-Ray Examination.

(To be completed by Radiographer.)

No. of Plate R^N 503)2 8½x6½ A.P. & L.

R^N 504)2 8½x6½ A.P. Repeat

N/503 – Negative.

N/504 – Negative

Signature of Radiographer O. J. Rhodes Capt. A.M.C.

Date 12/7/19

Forms I. 1237/14

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
Year.	40756	Gnr.	Drummond	J.
	Unit.		Age.	Service.
	Can Res. Art.			

Station and Date.	Disease
Duke of Yorks	
5/5/19	good nourishment somewhat anaemic pulse 96 standing. P.T. Med. H Hackney Capt.
21/5/19	Chest clear No tubercle Wassermann & urine negative
8/6/19	Wassermann Positive - Transfer to V.D. ward.
26/6/19	Wassermann negative fit for Cat. H H W Shutt Capt
6/9/19	Improving E.D. Brain Lt

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

(A 1014) W3081/P/1296 3,450m 7/18 Drayton Mill Forms/I. 1237/14 (E. 3420)

[P.T.O.

Station and Date.	

AUTHOR | PAYMASTER

M. OR S.

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

REGT. NO. 40756 RANK Grs. NAME (IN FULL) Drummond J (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN — RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? Nil

TO WHOM PAID — DATE EFFECTIVE

ADDRESS — RELATIONSHIP

PARTICULARS	EFFECTIVE DATE	AUTHORITY
1/10		
Chas. J. Drummond		
20 Kings St. Kingston	18/3/20	

ORIGINAL UNIT C.E.F. — IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

DATE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY $ 20.00 — DATE EFFECTIVE 1-9-19

PAYABLE TO Mrs James Ferguson — RELATIONSHIP — ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS 11 Chapel St. Eng. Acc. Edinburgh Scot.

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE 1-10-19.

DISCHARGED PLACE Kingston 7-10-19 DATE — REASON To SCR for Treatment — AUTHORITY 505 D.G.R. 8-1-1920 — 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																													90	89	90	89	90	89			1303 Araguaya
31-7-19																																						
																	4	87	5	00	50	00									59	87	150	76			R & T. Expenses #967
Aug.	31	1/0	34	10			12	-	46	10																							104	66			E.K. # D. 19400 3 & 50.00
Sept.	30	"	33	-					33	-							5	-					20	-			17	40			42	40	114	06			Do 235 Subs 15 days
Oct.	7	"	7	70	3d	-			42	70							5	-	25	-											40	-	111	06			Sup Pay & Allce 026-9-81-109-19 417873
																																					419142 419170
✓					18d	✓			✓								War Service Gratuity												20	-							
18-3 days Commn			20	00	-	-			20	00																					20	-	250	-			419067
																													111	06	98	64	280	-	140	-			419392 142 - 10-1-20
																																	350		70				134133 FEB 4 1920
																													70	-			420		0				18/3 out 6 - MAR 1 1920
																															181	36							
																															420	00							

200M-3-19.—L. L. 58709-I.. & D. 9985.
M. F. W. 2596.
1772-39-1390.

H. Q. FILE No. 649-

NAME Drummond James REGT'L. No. 40756

RANK AND CORPS Dvr. 1st Can. Div. Amm. Col.

CABLE NO.	CABLE DATE	NATURE OF CASUALTY
		Scotland
M 8496	20-6-16	Reported missing June 2, 1916
M 9679	12-7-16	Prev. reported missing now unofficially P of W. ✓
M115-73	22-8-16	Prev. Rep. unoff. now officially P/W at Dulmen ✓
Q 8143	73-12-18	Repat. P. of W. arrived in England Dec. 9th 1918.

NO. 1329.
FOLL.

L. L. Job 83225 —M. & D. 5842.

M. F. W. 42—50m 7-15.
H. Q. 1772—39-893.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
V75.	No. 2 Can. Fd. Amb.	4.8.15	Not stated
✓ 84.	Rejoined Unit from Hosp.	16-8-15.	
a.224.	No. 1 Can. Cas. Clg. Station	26-4-16.	Bruised Hip. & Leg.
a.224	Discharged	31-4-16.	" " &
a 245	Rep. from Base	2-6-16.	missing
a 256.	Prev. rep. missing now. unofficially rep. (7-7-16) Prisoners of War		
A 286	Prev. unoffic. Now offic. repd P of W (at Dulmen) N.K. date 23-8-16		
a 301	Unofficial change of address Official P. of W. now detained at Wahn Bei. Coln. Rhld. Germany. Nk. dated 13/9/16.		
(a 476 7-6-17)	Prev. rept P. of W at Wahn Bei Coln Rhineland Germany Now transferred to Limburg-a-Lahn		
a 423	Repat P of W from		Rest Camp Dover
a 477	Mil Rochester	6-2-19	9-2-19 to 20 a 4.50

NAME Raymond James REGT. No. 40756

RANK AND UNIT Pvt 1st Can. Div. Ammn Col.

NEXT OF KIN

CABLE		NATURE OF CASUALTY
No.	DATE	

M. F. W. 42—100M.—8-18.
H.Q. 1772 39-893.

LIST NO.	HOSPITAL	DATE OF ADMISSION	REMARKS
C 542	Millcoon Wilcox	4-5-19	Debility post 38
C 577	Dist. Epsom	9-6-19	" " "
C 578	Mil Convl. W. Epsom	10-6-19	42
C 587	#6 Gen. Gen. Orpington	1-7-19	42
C 614	#5 Gen. Gen., Kirkdale	6-8-19	42 + Sprain R. knee + ankle
C 618	Invalided to Canada (Sch 9 m 203)	8-8-19	42 + Spr. R. knee + "

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY.	* ENGLAND OR ~~CANADA~~.	SEPARATION ALLOWANCE.	* ENGLAND OR CANADA.
EFFECTIVE DATE:-	1st Sept 1914.	EFFECTIVE DATE:-	
AMOUNT:-	20 00	AMOUNT:-	

NAME:- DRUMMOND James
NUMBER:- 40756

NAME, ADDRESS, RELATIONSHIP & AUTHORITY { WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.

Mrs C. Peake
37 Lodge Rd Cowdenbeath
Scotland
£20 00

Change of payee Sept 1-3/19

Mrs James Ferguson.
11 Cheyne street
Edinburgh
Scotland
Sister

Effective 1-3-19

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Gnr

UNIT AND TRANSFERS

ORIGINAL UNIT:- 1st Bde C 7a.

DATE ACCOUNT FIRST OPENED:- 22-9-14

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			PJWar

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS { UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK

DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT
~~9/19~~	~~1354~~	~~Orpington~~	~~9 5 3~~				
~~18/1/19~~	~~1409~~	~~"~~	~~18 6 7~~				
			58 10				

DAILY RATES OF PAY AND ALLOWANCES

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

L P.B. Dr. Bal. £90.89 Ledger Bal £37.19

PARTICULARS OF RENDERING NON-EFFECTIVE:- Trans to Canada 31-7-19 Auth Lnd 4116 of 6 of 21-7-19 MD

MONTH	PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
	Balce FORWARD								329 22		
April	Gross Pay	33		A 15195			20		342 22		
		33		A 83394			20				
May	do.	34 10					20		356 32		
		34 10									
June	do.	33		B 57792 £6-2-2			20		369 52		
		33					20				
July	do.	34 10		C. 1. 90			20		383 42		
		34 10					20				
Aug	✓	34 10		C 57991			20		397 52		
		34 10					20				
SEP 1918	✓	33		C 75789			20		410 52		
		33					20				
OCT 1918	✓	34 10		L 50388			20		424 62		
		34 10					20				
NOV 1918		33		E. 18393			20		437 62		
				E 73191			20		417 62		
				A R 1 J Dover 10/5/18	9 7 33				320 29		
	Dec. & Jan.	68 20		~~A~~ 276580.			20		368 49		
1919		10 20			9733		60		66 17		
Feb.		30 80		Hamburgs 27/12.	9733				434 61		
Mar		34 10		" 68849 11/1	9467				326 06		
	Ch 6570 Unspent money CRK		122	AR 3996. 8/12. Calais	373				354 55		
				L 63396			20				
				AR 39804 24/2.	487						
				AR 42179 28/2.	973						
				G 361445.	31033		20				
				C.S. 54777 25-3-19	973				7458		5K
		690	122		32006		40				

NUMBER RANK NAME

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
				Forward					7 4 55		
Apr & May		6 7 10		Apric. a 28885			20.		141 65		
				RK 68720 B-3 Hosp Rom	9 13				137 33		
				Cash Lon. 6 or 36 Q.t.	4 8 67						
				Rem 80405 29 4/19 Lon	9 13						
				May A8 283			20				
				AR 70828 Ldn 4/19	4 87						
				AR 2609 10/5/19 Epsom	14 60						
				AR 2785 5/7/19 8	9 73				4 82		
		6 7 10			9 7 3 3		40				
				Page A 99888			20				
June	P.P.	33		July A 99983			20				
July	✓	24 10		AR 1729 = Chgs. 10/3/19	11						
				✓ 30625898 Epsom 23/5	24 33						
				✓ 3062 ✓ 17/6	19 47				12 49		
		67 10			43 91		40				
August				August - AR B 13720 3			20.		37 49		
									58 do		
				AR 7809. Orpington 18/6/19.	48 67				90 89		
				" 7257. Do 9/7/19.	9 73						
				Awarded forfeiture 4 days Pay AA 46			6 60				
				awl 09.00 23/4/19 to 11.00 24/4/19 21/5/19.							
				6 days. DO 141. CARD 21/5/19.							
				Hosp Stopp V.D. 4/6/19 to 26/6/19.							
				18 days DO. 184 CARDS. 3/7/19. P.8868 remitted			10 80				
					58 40	17 40	20.		108 29.		
				500 Canv. 8/8/19 mo 3 d L. H509							

MARRIED OR SINGLE S

PLACE OF BIRTH Dumferline Scot.

NAME AND ADDRESS OF NEXT OF KIN Christine Drummond
6 Logelly Rd. Godbentieth Scotland

RELATIONSHIP OF NEXT OF KIN

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

AP+SA cld Y.M.Cook, Sgt.

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY
Reported Missing after action	2/6/16	G.O. # 24 14/6/16
Now Prisoner of War		6Za 20 6 13/7/16

ADMISSIONS TO HOSPITAL, &c.

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

REG'L NO. 40756 RANK Gnr. NAME Drummond James

IF IN PERMT. CORPS WHAT UNIT UNIT 1st Brigade C.F.A. TRANSFERRED TO Nov Effectives DATE 3/6/16 AUTHORITY 19a.6. G.O. #24

PERMANENT FORCE ALLOWANCES TRANSFERRED TO DATE AUTHORITY

PLACE OF ATTESTATION TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION Sept 19th 1914 TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY $ 20.00 DATE EFFECTIVE 1st 1-4-16 Renewed July 1915. PAYABLE TO Mrs L. Veale 37 Logelly Rd. Bowdenheath Scot. RELATIONSHIP

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) ~~13/8/16~~ EFFECTIVE ~~1/9/16~~ REASON

DISCHARGE DATE AND PLACE REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE) 3.6.16
Ass'd to CRX. 40/- 1/8/16 1/2/17

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

PAY OFFICE C.E. BRANCH AUG 7 1916 CANADIAN CONTINGENT

Germany D

C2

DATE	PAY NO. OF DAYS	PAY RATE	PAY AMOUNT $	PAY AMOUNT c.	FIELD ALLOWANCE NO. OF DAYS	FIELD ALLOWANCE RATE	FIELD ALLOWANCE AMOUNT $	FIELD ALLOWANCE AMOUNT c.	WORKING OR SPECIAL PAY NO. OF DAYS	WORKING OR SPECIAL PAY RATE	WORKING OR SPECIAL PAY AMOUNT $	WORKING OR SPECIAL PAY AMOUNT c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 NO.	1 DATE	2 NO.	2 DATE	3 NO.	3 DATE	4 NO.	4 DATE	CASH PAYMENTS 1	2	3	4 BRX	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE CREDIT	BALANCE DEBIT	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
1916			557				5570							4 35	614 05									36499				180	21 45	586 44	50 61		A.P.C.K.No.		
April 1-30	30	1.00	30	.	30	10¢	3	.							33			456	a.29						262.				20		25 23	58 38				
May 1-31	31	"	31	.	31	"	3	10							34 10			422	a.164						261				20		20 .	72 48				
June 1-2	2	"	2	.	2	"		20							2 20													20		20	54 68				
																								Balance on transfer to N.E. Branch.							54 68				
June 3 to Sept 30	120		120		120		12								132												4 86	60			64 86	121 85				
31 Oct to Nov 21	21		21		21		3	10							34 10												2 43	20			22 43	133 49				
Nov 22 to Jan 31/17	92		92				9	20							101 20												7 29	60	5 11		72 40	162 29				Cash Payt not Pay chgd a/c 1203 Nov. a/c 682.
Feb 28	28		28		28		2	80							30 80												4 87	20				168 22				
March	31		34	10											34 10												4 87	20			24 87	177 45				
April	30		33												33												4 86	20			24 86	185 59		467 180		
May	31		34	10											34 10												4 87	20			24 87	194 82		469 198		

Checked A.M. Rose

40756 Gnr. Drummond, J.

DATE	PAY No. of Days	PAY Rate	PAY Amount $	PAY Amount c.	FIELD ALLOWANCE No. of Days	FIELD ALLOWANCE Rate	FIELD ALLOWANCE Amount $	FIELD ALLOWANCE Amount c.	WORKING OR SPECIAL PAY No. of Days	WORKING OR SPECIAL PAY Rate	WORKING OR SPECIAL PAY Amount $	WORKING OR SPECIAL PAY Amount c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE Credit	BALANCE Debit	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
																														19482				
Jan	20	1.6	33												33.												20		20	20782		A18501		
Jul	31		34 10												34 10												20		20	22192		A18810		
Aug	31		34 10												34 10												20		20	23602		A112192		
Sep	30		33												33												20		20	24902		A122993		

MONTH	PARTICULARS	CR.1	CR.2	PARTICULARS	DR.1	DR.2	DR.3	DR.4	BALANCE	DEFER-RED. PAY	SEP. ALLCE. ENG.
OCT 1917	Balce FORWARD	24902							24902		
	pots pay	34 10		B121912 £4 22			20		263 12		
		34 10					20				
Nov	"	33.		B23791			20				
Dec		34 10		C17207			20		330 22		
		67 10					40				
JAN 1918		34 10		C65198.			20		364 32		
		34 10					20				
FEB 1918		30 60		C78432			20		315. 12		
		30 80					20				
MAR 1918		34 10		B37033			20		329 22		
									329 22		

MONTH	PARTICULARS	CR.1	CR.2	PARTICULARS	DR.1	DR.2	DR.3	DR.4	BALANCE	DEFER-RED. PAY	SEP. ALLCE. ENG.