








3/8/39 *LP*

SHORT FORM.  
 PROCEEDINGS ON DISCHARGE.  
 (Demobilization.)

1. No.	XXX 725098	DEPT. MILITARY SERVICE FEB -7 1919 H.Q. CANADA
2. Rank.	Private	
3. Name.	Anderson, William Edward	
4. Unit.	No. 3 District Depot.	
5. Date of Discharge	25.1.19.	Place Kingston, Ont.
6. Reason for Discharge	Demobilization	
7. Authority.	3DD 3. A. 203, D. 21.1.19.....R.O. 1343	
8. Proposed Residence after Discharge	50, Queen St., Lindsay, 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.? 39	
	 Signature of Soldier.	
10.	CONFIRMATION. The discharge of the above named man is hereby confirmed.	
	Place.....Kingston, Ont.	
	Date.....25.1.19.	
	Signature.....  (O. C. Discharging Unit.)	



0622  
10/2/19

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



A.G.R. Rank Name ANDERSON, William Edward Reg'l No. 725098  
 Unit 109th Bn. If in perm. Corps, }  
 What Unit? } Married or Single Single.  
 Place and Date of Enlistment Lindsay, 3rd Jan., 1916. Place of Birth Chippewa, Ont., Canada.

Name and Address, Next-of-Kin Peter Anderson, 150 Queen St. Lindsay, Ont., Canada Relationship Father.

Assigned Pay Monthly \$ Payable to Relationship

Separation Allowance \$ Payable to Relationship

N/E P 5166  
 File R.L.  
 Date CAN.C.R.

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. Taken from Official Documents.
Date.	From whom received.				
b. Arrived in England per H. M. T. 2810 31-7-16					
28. 11. 16	O.C. 109 <sup>th</sup> Bn	S.O.S. on Trans to 20 <sup>th</sup> Bn	Witley	28. 11. 16	Pt II, D.O. 333.
11. 12. 16	20 <sup>th</sup> Bn	Taken on strength.	Field	29. 11. 16	75
20-4-17	20BN	No 3 Can Gen Hosp	Boulogne	12-4-17	Ch A 489 French feet
24-4-17	-	out Mil Hospital	Orpington	16-4-17	Ch B 325
27-4-17	20	Insp post to 1 bent out Reg Sp.	Field	15-4-17	Pt # 032 Pt # 048 (COR) 2.52 d. 30 417
1-5-17	20BN	Can Gen Hosp	Burley	20-4-17	Ch B 330 dish 29-4-17 Ch B 337
4-4-17	1COR	2 <sup>nd</sup> on Com to 1C CD	Wandling	27-4-17	Cancelled in P 50 119 d 296 17 -11-1000 27-6-17
27-6-17	1CED	Proc to 3 CED	Lemard	26-6-17	-100
8-5-17	1CED	Attach. for Pay. 79 <sup>th</sup>	do	27-4-17	66 (112-296-17) (COR)

A.F.B. 103 CHECKED

17 DEC. 1917

*[Handwritten signature]*

*wife*



Report.		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.
Date.	From whom received.				
27.6.17	5 5 Res	Taken on strength from <del>beast to be attached</del> 3 ECD	Wandig	26.6.17	173 (112.29.6.17) (CORD)
19.9.17	5 Res.	S.O.S. to <sup>CETD</sup> Gen. Engrs.	"	19.9.17	PI# 256 (PT# O. 221 CETD d/21.9.17)
21.5.18	1st CERB	T.O.S. From CETD	- Seaford	21.5.18,	DO 1 & CETD #117
19.8.18	366.D.	Attached for P.T.	"	17.8.18	DD. 194 + 68 RD. 228 p 4 1/2
24.8.18	689.D.	S.O.S. from 1st Lt. R.B.	"	17.8.18	D.O. 229 + 68 RD. 74 d 26 1/2
7.10.18	---	Causes/cause 3 ECD + S.O.S. to 2 CERB	"	3.10.18	3 E.C.D. 233/3 10 DD. 265 + 2 E.C.R.B. 10/19 18
9.10.18	2689.B.	S.O.S. to 1 CERB.	"	3.10.18	DD. 120 + 1 CERB 123/10 18
11.12.18	1689.B.	On com Tunnel P.A. 1	"	10.12.18	DD 176 + 1689 B 15/18 19
6-1-19	W.D. 260	beast attached	Phyl	21-12-18	DD 4 + 1689 B 15/18 19
18-1-19	1689.B.	S.O.S. to Canada W.D.	Seaford.	21-12-18	DD 15



Jan 3/16  
OK R.S.

72509

B. Coy.

# ATTESTATION PAPER.

No. 25098

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

**ORIGINAL**

## QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?..... Anderson
- 1a. What are your Christian names?..... William Edward
- 1b. What is your present address?..... Lindsay
2. In what Town, Township or Parish, and in what Country were you born?..... Chippewa, Ont. Canada
3. What is the name of your next-of-kin?..... Peter Anderson
4. What is the address of your next-of-kin?..... 50 Queen St. Lindsay, Ont. Canada
- 4a. What is the relationship of your next-of-kin?..... Father
5. What is the date of your birth?..... 13th Feb. 1898
6. What is your Trade or Calling?..... Blacksmith
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, William E 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 Jan 3 1916. William E Anderson (Signature of Recruit)  
Geo. J. Sauney (Signature of Witness)

## OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, William E 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 Jan 3 1916. William E Anderson (Signature of Recruit)  
Geo. J. Sauney (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 Lindsay this 5th day of January 1916.

Geo. J. Sauney (Signature of Justice)

6  
HAT



# Description of William Edward Anderson on Enlistment.

Apparent Age.....17 years 11 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. 3½ ins.

*Scar on left thumb*

Chest measurement. { Girth when fully expanded.....33½ ins.  
 Range of expansion.....2 ins.

Complexion.....Fair

Eyes.....Blue

Hair.....Dark Brown

Religious denominations. { Church of England.....C of E  
 Presbyterian.....  
 Methodist.....  
 Baptist or Congregationalist.....  
 Roman Catholic.....  
 Jewish.....  
 Other denominations.....  
 (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.....Jan 3 1916

Place.....Lindsay

*W. Boyd*  
*J. M. McCulloch* Capt.  
 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.

William Edward 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.

**JAN 17 1916**

Date.....1916

*J. M. McCulloch* Lt. Col. (Signature of Officer)  
 O. C. 102<sup>nd</sup> Overseas Battalion, C. E. F.



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

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

250M.—I-16,  
H. Q. 1772-39-920.

# Casualty Form—Active Service.

Unit, Regiment or Corps

**109th OVERSEAS BATTALION, C. E. F.**

Regimental No. 425098 Rank Private Name Anderson William Edward

Enlisted (a) 3.1.16 Terms of Service (a) D. of W. Service reckons from (a) 3.1.16

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) Blacksmith

Report Date	From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
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*Embarked Canada  
Disembarked England*

*Halifax 24.7.16  
Liverpool 31.7.16*

CERTIFIED CORRECT.  
 14 DEC 1916  
 CAN. RECORDS, LONDON.

28-11-16

Proceeded overseas for service with 20th. Btn.

Witley

28-11-16

*Adjutant Capt.*  
 ADJUTANT  
 109th Overseas Battalion, C. E. F.  
 D.O.Pt.11.333.28-11-16.  
 333-28-11-16.

~~Transfd to 20th Bn.~~

~~Overseas,~~

28-11-16; D.

333-28-11-16.

*Witley  
oe.109d*

*Adjutant Capt.*  
 ADJUTANT,  
 109TH BATTALION CAN. INFANTRY.

29/11/16  
do  
8/12/16  
12-4-17  
15-4-17

C.B.Depot Arrived taken on 20 Bn  
do do Left for Unit  
20th Bn Joined Unit  
3 Cdn Gen *Trench feet*  
3 Cdn Gen *Inv. (Sick) & posted to 1st Centl Ont.*

Havre  
Field  
do  
*adm 3 Cdn Gen*

29/11/16 NR  
1/12/16 NR  
4/12/16 B213  
12-4-17 N.3034.

Regl Dep. Shorncliffe per HS St Andrew

15-4-17 W3083(4959)  
Pt 2 32D/27-4-17.

(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.



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				
4 417.	ICORD	Taken on strength	W Sandling	27.4.17	PK 052, Hf Lieut <del>W. M. M. M. M.</del> Capt Genl Colonel i/c Records, C.O.M.F.
26/6/17.	Discharged from	1st C.C.D. St Leonards	to 5th Res. Bn. Part II D.O.		1102/17 for Adjutant, 1st Canadian Command Depôt,
28/6/17.	O.C. 5 <sup>th</sup> Res.	Taken on Strength	W Sandling	27/6/17	Pen 07173
19/9/17.	O.C. 5 <sup>th</sup>	S. off on transfer	W Sandling	19/9/17	Pen ord 256 Lieut. O. I/a Records
21.9.17.	CEFD	S.O.S of CEFD from	5th Res Bn Shoreham	20.9.17	5th Canadian Reserve Battalion, West Sandling, Kent. Part II Ord. 221
29.11.17	CEFD	Two Months Restriction of Pay	Seaford	27.11.17	Part II Ord 278 Spec RO 31
21.3.18	CEFD	SOS to 1st CERB	Seaford	21.3.18	Do Part II 117 of 16.3.18
22.3.18	1st CERB	SOS from CEFD	Seaford	21.3.18	Do Part II 1 of 16.3.18 for order sent for O.C. 1st CERB.



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

# Casualty Form—Active Service.

M. F. W. 54.  
150M. 10-15.  
H.Q. 1772-39-920.

Unit, Regiment or Corps 109 ofs Bn  
 Regimental No. 725091 Rank Pte Name Anderson W. E.  
 C. E. F.  
 Enlisted (a) \_\_\_\_\_ Terms of Service (a) \_\_\_\_\_ Service reckons from (a) \_\_\_\_\_  
 Date of promotion to present rank. } Date of appointment to lance rank } Numerical position on roll of N. C. Os. }  
 Extended \_\_\_\_\_ Re-engaged \_\_\_\_\_ Qualification (b) \_\_\_\_\_

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
<u>9/1/19</u>		<u>T.O.S. Casualty Company No. 3 District Depot.</u> <u>for Disposal, Part Two D.O. 9</u>	<u>Kingston</u>	<u>2.1.19</u>	<u>[Signature]</u> LIEUT. <u>for T.O.S. Casualty Co. No. 3 District Depot</u>
<u>25/1/19</u>	<u>S.O.S.</u>	<u>Discharged</u>	<u>Kingston</u>	<u>25/1/19</u>	<u>H. 827</u> <u>[Signature]</u> Lieut. <u>G. O. Discharge Section</u> <u>No. 3 District Depot</u>

(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				



MILITIA AND DEFENCE  
**ASSIGNED PAY**  
 OVERSEAS CONTINGENTS

To Whom

Address

*Miss P. C. Anderson*  
*Lindsay Ont.*

By Whom Assigned

Regtl. No.

Rank

Corps

*Anderson W. E.*

*725098*

*Pte*

*109 Bn*

*"B" Co*

Rate *\$15.<sup>00</sup>*

**AUG 1 1916**

**AUG 1 1916**

**PAYMENTS**

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			<i>Consolidated account</i>
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				



MILITIA AND DEFENCE  
**ASSIGNED PAY**  
 OVERSEAS CONTINGENTS

M. F. W. 12a.  
 50m.-4-16.  
 1772-33-310.

*Miss P. C. Anderson*  
 Sheet No. 2.

L. L. Job 310.—Req. 6574.

PAYMENTS.

Name of Soldier

*Anderson W. E.*

725098

*Pte*

*109 Bn.*

*\$15<sup>00</sup>*

Remarks.

*AUG 1 1916*

*AUG 1 1916*

Month.	Year.	Cheque No.	Amt.
April	1916		
May			
June			
July			
Aug.		<i>15080</i>	<i>15</i>
Sept.		<i>F16111</i>	<i>15</i>
Oct.		<i>F20422</i>	<i>15</i>
Nov.		<i>H25057</i>	<i>15</i>
Dec.		<i>B33197</i>	<i>15</i>
Jan.	<i>1917</i>	<i>D37358</i>	<i>15</i>
Feb.		<i>J42668</i>	<i>15</i>
March		<i>J49001</i>	<i>15</i>
April		<i>K64</i>	<i>15</i>
May		<i>K6201</i>	<i>15</i>
June		<i>K12849</i>	<i>15</i>
July		<del><i>K19816</i></del>	<del><i>15</i></del>
Aug.		<del><i>K19816</i></del>	<del><i>15</i></del>
Sept.		<i>L33741</i>	<i>15</i>
Oct.			
Nov.			
Dec.			
Jan.	<i>1918</i>		
Feb.			
March			
April			
May			
June			
July			

*Jan*

*60*

*15  
15-L  
15-L*

*(J.W.)*

*15 B.*

*K 19816*

*6*

*6*

*210. ✓*

*1917*

CANADIAN  
 ASSIGNED PAY AUDITED  
*W. Binko.*  
 AUDIT CLERK  
 DATE *20/5/19*



MILITIA AND DEFENCE  
**ASSIGNED PAY**  
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

**PAYMENTS.**

Name of Soldier \_\_\_\_\_

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.				



Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

# Separation and Assigned Pay Branch

# A

# 2788

*Aug 1<sup>st</sup> / 16*

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

<i>15-</i>			
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### PARTICULARS OF SEPARATION ALLOWANCE

No. *725098*

Rank *Pte* Promoted Reverted Discharge

Soldier's Name *W. C. Anderson*

Battalion *109 Battn. "B" Co.*

Beneficiary

Relationship

Address

### PARTICULARS OF ASSIGNMENT

Name *Miss P. G. Anderson*

Address *Lindsay Ont*

Change of Address

1

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
<i>30/9/17</i>			<i>210</i> ✓	<i>210</i>	
<i>Oct</i>	<i>C 51566</i>		<i>15</i>	<i>15</i>	
<i>Nov</i>	<i>C 82808</i>		<i>15</i>	<i>15</i>	<i>T</i>
<i>Dec.</i>	<i>F 55122</i>		<i>15</i>	<i>15</i>	<i>m</i>
<i>Jan</i>	<i>A 54413</i>		<i>15</i>	<i>15</i>	<i>B</i>
<i>Feb</i>	<i>B 92640</i> ✓		<i>15</i>	<i>15</i>	
<i>Mar</i>	<i>G 99871</i>	—	<i>15</i>	<i>15</i>	✓
<i>April</i>	<i>A 7664</i>		<i>15</i>	<i>15</i>	
<i>May</i>	<i>A 12622</i>		<i>15</i>	<i>15</i>	
<i>June</i>	<i>B 15465</i>		<i>15</i>	<i>15</i>	✓
<i>July</i>	<i>Y 28445</i>		<i>15</i>	<i>15</i>	
<i>Aug</i>	<i>A 30972</i>		<i>15</i>	<i>15</i>	
<i>Sept.</i>	<i>A 37675</i>		<i>15</i>	<i>15</i>	
<i>Oct.</i>	<i>A 44316</i>		<i>15</i>	<i>15</i>	<i>M</i>
<i>Nov</i>	<i>A 52599</i>		<i>15</i>	<i>15</i>	<i>M</i>
<i>Dec.</i>	<i>B 64012</i>		<i>15</i>	<i>15</i>	<i>M</i>
<i>Jan</i>			<i>15</i>	<i>15</i>	<i>M</i>
			<i>435</i>	<i>435</i>	<i>M</i>

*0379-6-143*

CANADIAN  
ASSIGNED PAY AUDITED  
*W. Binka*  
AUDIT CLERK  
DATE *20/5/19*

M. F. W. 128  
400M-617-17743-1141  
L. L. 22320-M. & D. 7493.

Account Closed 31-12-18  
Ret'd per *Barmann*  
Date *30-12-18* *MD 2*  
*PhM 4ay WRS batt 14*









\* Strike out whichever inapplicable.

ASSIGNED PAY.	ENGLAND or CANADA.	SEPARATION ALLOWANCE.	ENGLAND or CANADA.
EFFECTIVE DATE:- <u>8/16</u>		EFFECTIVE DATE:-	
AMOUNT:- <del>1000</del>		AMOUNT:-	

NAME:- ANDERSON William E  
NUMBER:- 728098

PARTICULARS OF RANK OR APPOINTMENT		
NAME, ADDRESS, RELATIONSHIP & AUTHORITY	AUTHORITY	DATE EFFECTIVE
<u>Miss S. C. Anderson Lindsay Ontario</u>		
RANK OR APPOINTMENT		
<u>Pt 2</u>		

UNIT AND TRANSFERS			
ORIGINAL UNIT:- <u>109<sup>th</sup> Regt</u>			
DATE ACCOUNT FIRST OPENED:-			
AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S F O	UNIT TRANSFERRED TO
	<u>11/17</u>		<u>160th</u>

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			
<u>11/1/18</u>	<u>218</u>	<u>Same Regt</u>	<u>540</u>							
<u>14/1/18</u>	<u>2330</u>	<u>166 R 13</u>	<u>973</u>							
<u>26/1/18</u>	<u>2667</u>		<u>487</u>							
<u>9/12/18</u>	<u>2890</u>		<u>1460</u>							

PARTICULARS OF RENDERING NON-EFFECTIVE: Trans Canada Engineers 12/1/18 h.R. 6/936 Lt Dal 1898

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
<u>March</u>	<u>Balance Forward</u>								<u>41/11</u>		
<u>April</u>	<u>P.T.</u>	<u>33</u>		<u>Cap</u>				<u>15</u>	<u>59/11</u>		
<u>May</u>	<u>Pt's pay</u>	<u>34/10</u>		<u>Cap</u>				<u>15</u>			
				<u>AN Act 301 13/4/18 C.E.T. 15</u>	<u>973</u>						
				<u>AN Act 292 25/4/18 14 C.E.T. 15</u>	<u>243</u>						
				<u>AN Act 493 13/5/18</u>	<u>730</u>				<u>58/15</u>		
		<u>34/10</u>			<u>1946</u>			<u>15</u>			
<u>June</u>	<u>P.T.</u>	<u>33</u>		<u>Cap</u>				<u>15</u>			
				<u>AN Act 704 29/5/18 14 C.E.T. 15</u>	<u>730</u>						
				<u>AN Act 1000 18/6-13/7/18 14 C.E.T. 15</u>		<u>220</u>					
				<u>AN Act 921 13/6-24/6/18 14 C.E.T. 15</u>	<u>730</u>						
				<u>AN Act 1116 27/6/18 14</u>	<u>730</u>				<u>52/15</u>		
		<u>33</u>			<u>2190</u>	<u>230</u>		<u>15</u>			
<u>July</u>	<u>do</u>	<u>34/10</u>		<u>Cap</u>				<u>15</u>			
				<u>AN Act 1329 15/7 14 C.E.T. 15</u>	<u>730</u>						
				<u>AN Act 1552 29/7</u>	<u>730</u>				<u>60/15</u>		
		<u>34/10</u>			<u>1460</u>			<u>15</u>	<u>57/15</u>		
<u>Aug</u>	<u>P.T.</u>	<u>34/10</u>		<u>Cap</u>				<u>15</u>	<u>76/25</u>		



Stopper 1/1/19

*(Large handwritten initials)*

UNIT AND TRANSFERS

ORIGINAL UNIT:-	109 <sup>a</sup> 191 <sup>n</sup>		
DATE ACCOUNT FIRST OPENED:-			
AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S F'D	UNIT TRANSFERRED TO
	1 11 17		16010

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
11/1/18	218	same Repayment	540 ✓				
14/1/18	2330	1 C.T.R. 13	973 ✓				
16/1/18	2667	"	487 ✓				
2/1/18	2890	"	1460 ✓				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	100	10		

PARTICULARS OF RENDERING NON-EFFECTIVE

*Trans Canada Engineers 12/1/18 h.R. 6/936 C.R. 1898*

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
March	Balance forward								41 11		
April	P.T.	33		cap				15	59 11		
May	P.T. pay	34 10		cap				15			
				Arak 301 13/4/18 C.T.H.	973						
				Arak 292 25/4/18 14 C.T.H.	243						
				Arak 493 13/5/18	730				58 75		
June	P.T.	34 10		cap	1946			15			
		33		bat				15			
				Arak 704 29/5/18 14 C.T.H.	730						
				Arak 1020 15/6-13/6 am 16/6. Breeding out of Hospital. Quarantined 18/6 - 2 days		220					
				Arak 921 13/6 24/6/18 14 C.T.H.	730						
				Arak 1116 27/6/18 14	730				52 65		
July	do	34 10		bat	2190	220		15			
				Arak 1329 17/7 14 C.T.H.	730						
				Arak 1552 29/7	730				62 65		
Aug	P.T.	34 10		cap	1460			15	76 25		
				Arak 4951 29/8 3 b. b. P.	487				71 38		
Sept	do	34 10		bat	487			15	89 38		
				Ar. 227 24/9/18. and 14 days P.P.2 sentences and 1/2 30 C.T.H.		440					
				Ar. 5465 13/9 3 b. b. P.	487				80 11		
				Ar. 5904 23/9	2920				50 91		
Oct	P.T.	33		bat	3407	440		15			
		34 10		Ar. 2066 29/10/18 1 b. b. P.	4380						
				Ar. 1841 15/10/18 1 C.T.H.	973				16 48		

F4.(9)



NUMBER 725098.

RANK

*Plt.*

NAME ANDERSON.

*78.*

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4.	BALANCE	DEFERRED	SEPARATION
<i>Nov</i>	<i>Brought f'd</i>								<i>16 48</i>		
		<i>33</i>		<i>cap</i>				<i>15</i>			
<i>Dec</i>	<i>cap</i>		<i>34 10</i>	<i>cap</i>				<i>15</i>			
				<i>Dr/ AR 2890. 9/12/18. 1<sup>st</sup> b.e.b.B.</i>	<i>14 60</i>						
				<i>Ar/ AR 2667. 26/11/18. do.</i>	<i>4 87</i>						
				<i>Q218 (R337) 11/11/18. do.</i>	<i>5 40</i>						
		<i>67 10</i>			<i>24 87</i>			<i>30</i>	<i>28 71</i>		
				<i>ANAL 2320 13/11/18 ICERA</i>	<i>9 73</i>						
					<i>9 73</i>				<i>18.98</i>		

CANALIAN  
 ASSIGNED PAY AUDITED  
*E.S. Bradley*  
 AUDIT CLERK  
 DATE *20/5/19*



67 10

AK 2667	26/11/18	do.	4 87
Q218 (R337)	11/11/18	do.	5 40
			24 87
ANAK 2320	13/11/18	ICERA	9 73
			9 73

30 28 71

18.98

CANADIAN  
 ASSIGNED PAY AUDITED

*E. M. Bradley*  
 AUDIT CLERK

DATE *20/5/19*







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

REGT. No. **725098** RANK *Pte* NAME (IN FULL) **ANDERSON, W. E.**

SHIP	PARTICULARS	EFFECTIVE DATE	AUTHORITY	ORIGINAL UNIT C.E.F. <i>G.O.R.</i>	IF IN P.F. WHAT UNIT?	(BLOCK LETTERS, SURNAME FIRST)			
				PLACE OF ATTESTATION	TRANSFERRED TO	DATE	AUTHORITY		
TIVE	<i>1.10</i>			DATE OF ATTESTATION	TRANSFERRED TO	DATE	AUTHORITY		
				ASSIGNED PAY, \$ <i>15.00</i>	DATE EFFECTIVE <i>1-1-19</i>				
SHIP	<i>Dr. Anderson, William, 50 Queen St., Lindsay, Ont.</i>			PAYABLE TO <i>Miss F.C. Anderson, Lindsay, Ont</i>	RELATIONSHIP <i>W.S.</i>	ANY CHANGE IN ASSIGNEE OR ADDRESS			
				STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE	EFFECTIVE				
				DISCHARGED	PLACE <i>Kingston</i>	DATE <i>25-1-19</i>	REASON	AUTHORITY	IF ENTITLED TO POST DISCHARGE PAY

*A-67*

L	ACQUITTANCE ROLLS						CASH PAYMENTS						ASSIGNED PAY	REGI-MENTAL CHARGES	OTHER CHARGES	TOTAL DEBITS	BALANCE				PARTICULARS OR REMARKS	
	COL. NO. 1		COL. NO. 2		COL. NO. 3		COL. NO. 1		COL. NO. 2		COL. NO. 3						DEBIT		CREDIT			
	C.	NO.	DATE	C.	NO.	DATE	C.	NO.	DATE	C.	NO.	DATE					\$	C.	\$	C.		\$
<i>98</i>		<i>20</i>	<i>12/18</i>		<i>20</i>	<i>12/18</i>															<i>1898</i>	
<i>30</i>	<i>✓</i>																					<i>2352</i>
<i>28</i>	<i>✓</i>																					<i>Do 8 subs 16 days</i>
																						<i>Discharge 2396</i>
<i>00</i>	<i>✓</i>	<i>A5552</i>	<i>✓</i>																			<i>MFW 2595 Rec'd</i>
		<i>9235506</i>																				<i>#315556 sub 27/19</i>
																						<i>sub 21/19 # 320765</i>
																						<i>27/5/19 # 333931</i>
																						<i>24/6/19 # 935247</i>

*GM*



















725098

The

Anderson

W. E.

DATE	PAY		FIELD ALLOWANCE		WORKING OR SPECIAL PAY		ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS				CASH PAYMENTS					
	NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE				AMOUNT		1	2	3	4	1	2	3	
			\$	C.						\$	C.	NO.	DATE	NO.	DATE				NO.
Food			356	40				17	10	373	50					48	54	27	68
June 30	10	1 <sup>00</sup>	11	-						11	-								
July 31			34	10						34	10								
Aug. 10			11							11									
" 13			23	10						44	60								
" 21			23	10						23	10								
Sept 30			33							33	-								

MONTH	PARTICULARS	CR.1	CR.2	PARTICULARS	DR.1	DR.2	DR.3	DR.4	BALANCE	DEPT. REG. PAY	SER. ALLOW. ENG.	MONTH	PARTICULARS	CR.1	CR.2	
									118			1918	Men			34
Oct 31	pld pay	5	10						15				P. Pay.			34
Nov.	P.P.	34	10						15							
Dec	P.P.	34	10						15							
				C.A.P.												
				AN 69030												
				AR. 735 15.8.17 5 Res	7	30										
				AN 27506												
				AR 508 30.6.17 "	4	87										
				AN 39469												
				AR 791 30.8.17 "	12	17										
				AN 19804												
				AR 604 23.7.17 "	4	87										
				AN 17921												
				AR 228 18.4.17 O.M.H. Op	4	87										
				AN 24833												
				AR 422 20.5.17 1000	9	74										
				AN 92742												
				529 12/7 75 R.D.	7	30										
				AN AR 1144 3/9 6.2.17	4	87										
				AN AR 1393 9/11 6.2.17	9	73										
				AR 868 12/17 5 Res	7	30										
				AR 1188 14/10 6.2.17	24	33										
				AN AR 1314 30/10 "	9	73										
				D.N.A.R. 1486 30/11 116.2.17	2	43										
				C.A.P.												
				C.A.P.												
1918	P.P.	67	10						15							
Jan		34	10						30							
				AN AR 1568 6/12/17 1000	2	43										
				AN AR 1683 20/12/17 "	4	87										
				C.A.P.												
Feb	P.P.	34	10						15							
		30	80						15							
		30	80						15							

ASSIG  
DATE



PAYMENTS		ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
3	4				CREDIT	DEBIT			
18		165	12 29	253 51	119 99				
					130 99				
		15		15	150 09				
		15		15	146 09				1st bld. ar.
				283 51	169 19				
48 66		15	35 83	73 118 46					Q40057/3096 23/7/17

CR.1	CR.2	PARTICULARS	DR.1	DR.2	DR.3	DR.4	BALANCE	DEFER. PAY	SER. ALLOC. ENG.
------	------	-------------	------	------	------	------	---------	------------	------------------

34 10		CAP		15					
		7 days 7/ Nov for 3 days pay by R.V. 5024 21-11-17 CEJD. <i>Placed on restricted</i>		9 90					
		Pay for 2 mos from 27/4/17 (6m R.V. 31) 202 298 CEJD 29-11-17							
		Ar ar 2059 31-1-18 CEJD	4 87						
		Ar ar 1802 15/1/18 "	4 87						
		Ar ar 2277 14/2/18 "	4 87						
		" 2493 22/2/18 "	4 87						
		Ar 27939 26/7/17 5 hrs	24 33						
		Ar ar 2721 13/3/18 CEJD	9 73						
		Ar ar 4538 27/3/18 14 hrs	7 43						
		Ar ar 2896 22/3/18 CEJD	4 87						
34 10			60 84	9 90	15	41 11			
			84						

CANADIAN ASSIGNED PAY AUDITED

*Est. Bradley*  
AUDIT CLERK

DATE ..... *20/5/19* .....



**ORIGINAL**  
**MEDICAL HISTORY SHEET.**

Surname Andersen Christian Name William Edward

Examined { on 3<sup>rd</sup> day of January 1916  
 { at Sunday  
 Birthplace { City or Town Chippewa  
 { County Ontario  
 Apparent age 17 years  
 Trade or occupation Blacksmith  
 Height 5 Feet 3 1/2 Inches.  
 Weight 126 Lbs.

Approved by J. McCulloch Capt.  
J. McCulloch Medical Officer  
 Rank 109th Overseas Battalion, M.O. F.

Date	Fit or Unit	EXAMINED FOR RE-ENGAGEMENT
		<b>19 APR. 1917</b>
<u>24.9.17</u>	<u>A 1st</u>	<u>L. G. Dawley Capt M.O.</u>
<u>8-18</u>	<u>D</u>	<u>Jewickham M.O.</u>
		<u>109 M.O.</u>
		<u>M.O.</u>
		<u>M.O.</u>
		<u>M.O.</u>

Date	Result	VACCINATIONS.
<u>26.1.16</u>	<u>Good</u>	<u>J. McCulloch M.O.</u>
		<u>L. G. M.O.</u>
		<u>Capt. C. A. M. O.</u>
		<u>C.C.D.</u>
<u>9.5.16</u>	<u>Good</u>	<u>J. McCulloch M.O.</u>
<u>18.5.16</u>	<u>Good</u>	<u>J. McCulloch M.O.</u>
<u>28.5.16</u>	<u>Good</u>	<u>J. McCulloch M.O.</u>

Form-R. 190 8528-25M-25/10/16.  
**IMPORTANT.**  
**DISPOSAL OF ORIGINAL MEDICAL HISTORY SHEETS.**  
 Action by Officer /c Hospital—  
 (a) See that all entries are properly and fully made, and signed.  
 (b) Forward to Hospital to which man is transferred, immediately it is done. If discharged to Unit—to Officer Commanding such Unit.  
 2. Action by Officer Commanding Unit—  
 (a) On admission of man to Hospital, forward M.H.S. to such Hospital at once.  
 (b) On transfer to another Unit—to Officer Commanding such Unit.  
 (c) On proceeding Overseas—return to Record Office London, without delay.  
 (Authority, Army Council Instruction 831, April,

Examined on 3<sup>rd</sup> day of January 1916 at Sunday

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>109th Batt.</u>	<u>725098.</u>		<u>3.1.16.</u>
Transferred to..	<u>C.F.7.</u>			
	<u>25th Bn</u> <u>Gen. Engineers</u>			<u>19/9/17.</u>

**EXAMINED OR DISCHARGED BY A MEDICAL BOARD.**

STATION.	DATE.	DISEASE.	RESULT.
<u>3<sup>rd</sup> C.B.D. Traps</u>	<u>25-9-18</u>	<u>Fit for Duty A.M.</u>	<u>Major D. D. D. D. D.</u>
<u>Barnefield O.V.</u>	<u>20-1-19.</u>	<u>Fit for A.I.</u>	<u>Major D. D. D. D. D.</u>

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.

**CANADIAN**



**ORIGINAL MEDICAL HISTORY SHEET.**

**ORIGINAL**

Surname Andersen Christian Name William Edward

Examined { on 3<sup>rd</sup> day of January 1916  
 { at Sunday  
 Birthplace { City or Town Chippewa  
 { County Ontario

Approved by J. McCulloch Capt.  
J. McCulloch Medical Officer  
 Rank 109th Overseas Battalion, C. E. F.

Apparent age 17 years  
 Trade or occupation Blacksmith  
 Height 5 Feet 3 1/2 Inches.  
 Weight 126 Lbs.  
 Chest measurement { Minimum 31 1/2 inches.  
 { Maximum expansion 33 1/2 inches.  
 Physical development good  
 Small-Pox Marks none

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT
		<b>19 APR. 1917</b>
<u>24.9.17</u>	<u>A fit</u>	<u>L. G. Dwyer Capt</u> M.O.
<u>8-18</u>	<u>D</u>	<u>Jewickham</u> M.O.
		<u>noy</u> M.O.
		M.O.
		M.O.
		M.O.

Vaccination Marks { Arm Right none Left one  
 { Number one

Date	Result	VACCINATIONS.
<u>26.1.16</u>	<u>good</u>	<u>J. McCulloch</u> M.O.
		<u>L.G.</u> M.O.
		<u>Capt. C.A.M.C.</u> M.O.

When Vaccinated last January 26<sup>th</sup> 1916  
 (a) Marks indicating congenital peculiarities or previous disease none

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>9.5.16</u>	<u>Good</u>	<u>J. McCulloch</u> M.O.
<u>18.5.16</u>	<u>Good</u>	<u>J. McCulloch</u> M.O.
<u>25.5.16</u>	<u>-</u>	<u>J. McCulloch</u> M.O.

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

Enlisted on 3<sup>rd</sup> day of January 1916 at Sunday

	CORPS.	REG'T NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>109<sup>th</sup> Batt.</u>	<u>725098.</u>		<u>3.1.16.</u>
Transferred to.....	<u><del>C.E.F.</del></u> <u>2<sup>nd</sup> Bn</u> <u>Gen. Engineers</u>			<u>19/9/17.</u>

**EXAMINED OR DISCHARGED BY A MEDICAL BOARD.**

STATION.	DATE.	DISEASE.	RESULT.
<u>3<sup>rd</sup> C. B. D. Troops</u>	<u>25-9-18</u>	<u>Fit for Duty A fit</u>	<u>Major Dwyer</u>
<u>Barnefeld O.V.</u>	<u>20-1-19.</u>	<u>Fit for. A fit</u>	<u>Major Dwyer</u> <u>Major Dwyer</u> <u>Major Dwyer</u>

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.



**CANADIAN**

18

D



Surname *Anderson* Christian Name *William Edward*

STATION.	Date of Arrival at the Station.	DATES OF						DISEASE.	Number of days in Hospital.	Remarks on nature of the disease: how induced: if mild or severe: if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
		Admission into Hospital.			Discharge from Hospital.						
		Day	Month	Year	Day	Month	Year				
ONTARIO MILITARY HOSPITAL DRPINGTON, KENT.		15		17					Both feet very much on fessan & painful. but not discoloured. Cardiac & Resp. system normal	<i>R. Greenwood Capt. AMC.</i>	
CANADIAN CONVALESCENT HOSPITAL, BROMLEY, KENT.		19	4	17	27	4	17	9	Still some pain in left foot. but improving rapidly. Disq. H.R. A-1	<i>Qued. Class D,</i>	
		16	3	18	22	3	18	7	Mild infection of hands & fingers from infection wound during. Cured. Cate for "A"	<i>On the cap course</i>	
		12	4	18	17	8	18	128	Numerous boils on neck. Trt. with vaccine. Have cleared up well. Discharged but to T	<i>J. Wickham Major AMC.</i>	



No. 725098 RANK Pte

NAME Anderson. Wm Edward

T. O. S. 3-1-16. UNIT 109th Battalion  
D. O. 29.V-1-16

M. D. 3

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916 Jan 3	1916 Jan 31	✓		
Feb.		✓		
Mar.		✓		
April.		✓		
May.		✓		
June.		✓		
July.		✓		

UNIT SAILED  
JUL 23 1916



\*Name. *Anderson William Edward* Rank. *Pfc* Regtl. No. *225-098*  
 Original unit *109 Bn* Present unit. *Halifax Germania* M. or S. Age. *21* Religion *C. of E.* Fyle Depot. *3A-203*  
 Port, ship, and date of arrival *Halifax Germania 30-12-18.*  
 Next of kin. *7) Peter Anderson Lindsay Ontario*  
 Address on leave *50 Queen St Lindsay Ont.*  
 Address on discharge.....  
 Transportation issued Yes No Date..... Character on discharge.....  
 Previous occupation *Blacksmith* Date and place of enlistment *3-1-16 Lindsay Ont.*  
 Diagnosis..... Date of Medical Boards.....

Date.	Remarks	Pt. 2 Order No.
<i>9-1-19</i>	<i>T.O.S. Casualty Company No. 3 District Depot. for Disposal, Part Two D.O. <u>9</u> Leave &amp; Sub <del>2</del> <i>2</i> <i>1-19</i> to <i>17-1-19</i></i>	<i>From ops. Eff. 2-1-19.</i>



Date.

Remarks.

Pt. 2 Order No.

M.F.W. 192  
150M-6-18.  
1772-39-1243.



Surname *Anderson* Christian Name or Names *W. E.* Reg. No. *725098*  
 Rank *Plt.* Unit *20 Batt. C. C. I. D.* Troop *6. C. I. D.* Batty. *6. C. I. D.*  
 Hospital *36. Gen. Boulogne.* Date of Admission *12.4.17*  
 Transferred *Ont. mil. Exnington* Hosp. *16.4.17*  
*Dromley Can bon.* Hosp. *20.4.17*  
*14 ban. Gen. Eastbourne* Hosp. *13-4-18*  
*14 ban. Gen. Eastbourne* Hosp. *13-4-18*

Diagnosis

(1) Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

*Trench Feet. R.*  
*Sty L. Eye abscess R. Hand*  
*Bails - R* H0

DISPOSITION

Date

*Dis 29.4.17*

REMARKS

*Dis - 22.3.18.*  
*Dis. 17.8.18*

*6.4.20.4.17 04890*  
*24.4.17 0325.*  
*1.5.17 0330*  
*10.5.17 0337.*  
*20.3.18 0164*  
*28.3.18 0171.*  
*17-4-18 0186*  
*18.8.18. 0289.*

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



EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.





..... HOSPITAL.....

<b>A. &amp; D. CARD</b>
-----------------------------

AT.....

A. & D. No. 1016 PL. OF ACTION.....RANK Driver REG. NO. 725098 UNIT C.E.T.D. SICK OR WOUNDEDNAME Anderson W.E. AGE 19 RELIGION CoF E.PLACE IN HOSPITAL E1/A1DIAGNOSIS I.C.T. Eye. Lt. / sty eye Lt. & Abscess Hand Rt.ADMITTED 16 MAR 1918 FROM ADISCHARGED 22/3/18 TO ~~1st Lt. D. Seaford~~TRANSFERRED C.E.T.D.SERVICE AT HOME 27/12 IN FIELD.....

RESULTS .....

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



REMARKS.

MEDICAL HISTORY SHEET.

Requested			
From	Date	Reply	Date
1			
2			
3			
4			
Orig. <del>Req.</del> Recd. from		Dr. W	16/3/1918
Orig. <del>Req.</del> Sent to		A.R.	21/3/1918
Recd. from Regr. this Orig. Dpp.			/ / 19
Ward			

Aug 21/3/18  
Dr. W. Phelan





HOSPITAL.

  
**A. & D.  
CARD**


AT.....

A. & D. No. 1410 PL. OF ACTION.....RANK Dr REG. NO. 725098 UNIT 6 C.C.D. SICK OR WOUNDEDNAME Anderson W.R. AGE 19 RELIGION NonePLACE IN HOSPITAL C1 / A2 / TentDIAGNOSIS BoilsADMITTED 12 APR 1918 FROM 17DISCHARGED 17 AUG 1918 TO 3 C.C.D.

TRANSFERRED.....

SERVICE AT HOME 27/12 IN FIELD.....

RESULTS.....

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

*See last Quarter*



REMARKS.

MEDICAL HISTORY SHEET.

Requested		Reply	Date
From	Date		
1			
2			
3			
4			

Orig. ~~Recd.~~ Recd. from *L. G. J. L.* 12/11/18.

Orig. ~~Dup.~~ Sent to *H. R.* 1 6 AUG 1918 / 19

Recd. from Repr. this Orig. Dup. / / 19

Ward

*Orig. recd. from 6 AUG 1918*



William, Edward

Name ANDERSON Rank DirReg. No. 725098Unit C. E. J. D.Next of Kin Canada

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1919						
Jan 14	3	14 Can. G. Eastbourne	Sgt Lt Gen?			5844
			Alteem R. Ward	C168		14575
22	3	Discharged	do	C171		3980
13	4	14 C. E. J. D. Eastbourne	Boils	C168		16302
14	5	Discharged	do	C168		4419
Letter to 40k 23/4/18						



Date

Movement

Place

Casualty

List  
No.Notified  
N/K O.

W.O. List

121



SURNAME.

*Anderson,*

3 CARD NO. ✓  
80. S. D. is 25-1-19  
Demol FOLL.  
20.27 of 27-1-19  
3rd D.

CHRISTIAN NAMES

*William Edward*

REGL. No.

*725098*

RANK

*Pte.*

UNIT

*109th*

*Batt.*

FORMER CORPS

*Nil.*

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

*Anderson, Peter.*

RELATIONSHIP TO SOLDIER

*Father.*

ADDRESS

*Lindsay, Ont.*

COUNTRY OF BIRTH

*Canada, Chippawa, Ont.*

DATE

*Feb. 13th. 1898.*

PLACE OF ATTESTATION

*Lindsay, Ont.*

DATE

*Jan. 5th 1916.*

*Sailed from Halifax 23/7/16 per 55" Olympic*  
*9/e 30-12-18 348*  
L. L. 8033—M. & D. 6312 M. F. W. 22. 100m.—1-16. H. O. 1772-39-538



MARRIED

SINGLE

Yes

WIDOWER

TRADE OR CALLING

Blacksmith

RELIGION

Church of Eng.

DESCRIPTION.

APPARENT AGE

17

YEARS

11

MONTHS

HEIGHT

5

FEET

3½

INCHES

CHEST MEASUREMENT

33½

INCHES

EXPANSION

2

INCHES

COMPLEXION

Fair

EYES

Blue.

HAIR

Dark Brown.

DISTINGUISHING MARKS

Scar on left thumb.

MEDICAL EXAMINATION.

PLACE

Lindsay, Ont.

DATE

Jan. 3rd. 1916.











**Casualty Form—Active Service.**

Regimental Number 725098

Regiment or Corps 1st Can Eng Reg Batty

Rank Sapper Surname Andersson Christian Name William Edward

Religion Church of England Age on Enlistment 18 years 11 months.

Enlisted (a) 3.1.16 Terms of Service (a) Duration Service reckons from (a) 3.1.16

Date of promotion to present rank \_\_\_\_\_ Date of appointment to lance rank \_\_\_\_\_

Extended { \_\_\_\_\_ } Re-engaged { \_\_\_\_\_ } Qualification (b) Blacksmith  
or Corps Trade and Rate \_\_\_\_\_

Signature of Officer i/c Records.

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
		Embarked ... Disembarked ...			
<u>17.8.18</u>	<u>1st CERB</u>	<u>SOS to C.E.R.B.</u>	<u>Seaford</u>	<u>17.8.18</u>	<u>PT II NO 489</u>
			<u>Asst. Adj. 1st CERB</u>		
<u>24.8-18</u>	<u>CERD</u>	<u>T.O. on Com 3 CERD</u>	<u>Seaford</u>	<u>17.8.18</u>	<u>M.H. No. 228</u>
			<u>Mr Walker</u>		
			<u>OF O.C. CERD</u>		
<u>3-10-18</u>	<u>DISCHARGED FROM 3rd C. C.D.</u>	<u>Seaford</u>	<u>TO 6th BN. PART II D.C.</u>	<u>23rd</u>	<u>3-10-18</u>
			<u>Ches...</u>		<u>For O.C.</u>

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



Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
7.10.18	C.E.R.D.	Bdd Cat. "A" ceases on 3rd C.C.V. & is SOS on post'g to 2nd C.E.R.B.	Seaford	3.10.18	D.O. 265 <i>M. Walker</i> Lieut of O.C. GERD
9-10-18	2 GERB	2 O.S. of 2 GERB from GERD.	Seaford	3.10.18	Pt 11 Ord 120.
9-10-18	2 GERB	2 O.S. of 2 GERB to 1st GERB	Seaford	3.10.18	Pt 11 Ord 120 <i>M. Walker</i> Lieut. C.E. for Lieut. Colonel, C.E. Commanding 2nd Canadian Engineers Reserve Bn.
15.10.18	1st GERB	1 O.S. from 2nd GERB	Seaford	3.12.18	pt 11 D O # 123
6.12.18	1st GERB	1 O.S. from Kimmel Park	Seaford	19.12.18	Pt 2 D O # 176 Att. C.C. Kimmel Park Part 13 # 44
21-12-18	1st GERB	Ceases to be attached on Trans C.E. Fl.			<i>W. H. Bay</i> Hon O.C. on 12.24



LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
A 168.	14 <sup>#</sup> Can Gen; Eastbourne	17-3-18.	Staph. Eye + Abscess R Hand
C 171.	" " Disc "	22-3-18.	Abscess R. Hand.
C 186.	14 Can. Gen; Eastbourne	13-4-18.	Boils
C 289.	Disc	17-8-18	"



NAME

RANK AND CORPS

CABLE

NO.

DATE

NATURE OF CASUALTY

REGT'L. No.

H. Q. FILE No. 649

FOLLOWS

No.

FOLLOWS



1016

MEDICAL CASE SHEET.\*

No. in Admission and Discharge Book 1016 Year	Regimental No.	Rank.	Surname.	Christian Name.
	725098	Don.	Anderson	J E.
		Unit.	Age.	Service.
		C E L D	19	27/12

Station and Date.	Disease
	D C T Eye St. Sty Eye St. Abscess H. O. N.

19.3.18 Small styg near the ext. angle of left eye, lower lid. improved contacts. Small abscess dorsal surface of ext. hand opposite base of 5<sup>th</sup> metacarpal bone, soft. expressed thick pus. Some induration of the surrounding tissues, & stiffness of extensor tendons. Moist traumatic desquama. Pt to be discharged to lines Category A. *W. J. M. J.*

Mrs J Anderson (Mother)  
50 Dundas St  
Dundee

DISCHARGED  
22 MAR 1918  
To  
Category A.

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







Corps *le 97D*

CLINICAL CHART.

Army Form B. 181.

(To be attached to Case Sheet.)

Military Hospital \_\_\_\_\_

No. *725098*

Rank and Name *Dr. Anderson*

Age *19*

Service *27/12*

Disease *St. Abscess Hand Rt.*

Date of admission \_\_\_\_\_

Date of discharge \_\_\_\_\_

Result \_\_\_\_\_

Dates of Observation	Time																											
	A.M.		P.M.		A.M.		P.M.		A.M.		P.M.		A.M.		P.M.		A.M.		P.M.		A.M.		P.M.		A.M.		P.M.	
Days of Disease	<i>16 17</i>																											
Temperature Fahrenheit	<div style="display: flex; flex-direction: column; align-items: center;"> <div style="display: flex; flex-direction: column; align-items: center; width: 20px;"> <span>107°</span><span>106°</span><span>105°</span><span>104°</span><span>103°</span><span>102°</span><span>101°</span><span>100°</span><span>99°</span><span>98°</span><span>97°</span> </div> <div style="display: flex; flex-direction: column; align-items: center; width: 20px;"> <span>8</span><span>6</span><span>4</span><span>2</span><span>8</span><span>6</span><span>4</span><span>2</span><span>8</span><span>6</span><span>4</span><span>2</span><span>8</span><span>6</span><span>4</span><span>2</span><span>8</span><span>6</span><span>4</span><span>2</span><span>8</span><span>6</span><span>4</span><span>2</span><span>8</span><span>6</span><span>4</span><span>2</span><span>8</span><span>6</span><span>4</span><span>2</span> </div> </div>																											
Pulse per Minute	<i>70</i>																											
Respirations per Minute	<i>18</i>																											
Motions per 24 hours																												

*See admission*

*10/10*



Regl. No., Rank & Name..... *413118. Plt Riggs* .....

Diagnosis..... *Gaenitri* ..... 14th Canadian General Hosp. Eastbourne.

To Officer i/c Laboratory ..... Ward. *AT* .....

Please carry out an examination of the accompanying specimen of *Ure* with special regard to.....

Date..... *Mar 17* ..... 1918

*Majr Mackham*  
Officer i/c Ward.  
*Dr. M. Hocker*

Laboratory Report

*Blood. negative (guaiacum test)*

*10/6*



*JTB J. Hetherington*

Capt. C. L. H. C.

Officer i/c Laboratory.

Date..... *17/3* ..... 1918

Register  
*4*



11  
Regl. No., Rank & Name... *Dr Anderson W B.* 725098  
Diagnosis... *Itis on eye. Infected hand.* Can. Mil. Hospital, Eastbourne.  
To Officer i/c Laboratory Ward... *A.*

Please carry out an examination of the accompanying specimen of... *Urine*... with special regard to...

Date... *17-3-18*...

*Chapin Wickham*  
Officer i/c Ward

Laboratory Report.

*Color Light amber  
React. acid  
S.S. 1016  
sugar. neg.  
albumen. neg.  
Micro*

*1016*



*NB Wetherington*

11.

Capt. C.A.M.C.  
Officer i/c Laboratory.



CANADIAN ENGINEERS REGIMENTAL DEPT

SEAFORD. SUBSEK.

Date:- **APR 11 1918** .....

Serial No. ....

Regimental No. **725098** .....

The marginally noted man is in  
Category ..... **A** .....

Rank **Div Anderson W. E** .....

Name .....

**G. J. Alley**  
..... Capt CANC  
M.O. G.E.T.D.



5

14 CAN HP,  
EASTBOURNE

MEDICAL CASE SHEET.\*

No. in  
Admission  
and  
Discharge  
Book

Regimental No.

Rank.

Surname.

Christian Name.

725098 Dr

Anderson

W.E.

Unit.

Age.

Service.

C.E.T.W.

19

27/12

Year  
1918.

Station  
and Date.

Disease Boils

12 Oct 18

Prev. History

Enlisted Jan-1916

France - Nov-1916

In Apr 1917 at Vimy developed  
Trench Feet & was invalided  
to England - was in hospital  
3 weeks & made a good re-  
covery as a result of being  
in feet in cold weather  
Prev. Illness

Boils started bothering  
him in Nov-1917, & have  
been present ever since  
always on neck & back of  
head.

On exam - numerous  
small boils & pustular  
pimples present. Other  
systems normal.

Staphylococcus vaccine  
ordered every 5 days  
E.C. Beer Capa

2-5-18

Boils nearly all healed.

4-8-18

Healed. Discharged to his  
Mickham.

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

Major P.T.O.  
Cawg







## MEDICAL CASE SHEET.\*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
2-7.15 <sup>36</sup>	725098	Plk.	Anderson	W. E.
Year 1917	Unit. 20 Canadian		Age. 18	Service. 17/12
Station and Date.	Disease French Feet.			
15 APR 1917	Complaint - Pain & soreness in feet. Slight pain in the hip.			
Previous Sickness -	none			
Present Sickness -	on April 11 <sup>th</sup> began to complain. Paraded sick April 12 <sup>th</sup> & 13 <sup>th</sup> . Sent to F. Co then C. C. S. then to # 3 S. H. Boulogne, then sent to hospital 15/11/17.			
Present Condition	Both feet very tender to pressure. Suffer more or less severe pain constantly. Feet are not discoloured. Cardiac system normal. Respiratory System normal. Appetite good. Sleep disturbed by pain in the feet. A. Greenwood Capt.			

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



Station  
and Date.

2



# CANADIAN EXPEDITIONARY FORCE

## Discharge Certificate

This is to Certify that No. 725098 (Rank) Private

Name (in full) ANDERSON, William Edward enlisted in  
the 109th Overseas Battalion

CANADIAN EXPEDITIONARY FORCE at Lindsay, Ont. on the 3rd  
day of January 19 16

HE served in Canada, England and FRANCE  
and is now discharged from the service by reason of in accordance with R.O. 133  
Demobilization. Auth. 3DD 3. A. 203, D. 21.1.19

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

Age <u>20 years 11 months</u>	Marks or Scars
Height <u>5 feet 3 1/4 inches</u>	<u>Scar on left thumb</u>
Complexion <u>Fair</u>	
Eyes <u>Blue</u>	
Hair <u>Dark Brown</u>	

W. E. Anderson  
Signature of Soldier

J. J. Rooney Capt  
Issuing Officer  
O. C. Discharge Section  
No. 3 District Depot  
Rank

Date of Discharge 25.1.19

Appointment

Signed at Kingston, Ont. this 25th day of January 19 19

in Military District No. 3

File Reference No. 3DD 3.A.203

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.



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 .....

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

.....  
Name of Officer

.....  
Rank

.....  
Appointment



**DUPLICATE**

To be made out in duplicate.

H.Q. 54-21-23-53

**PARTICULARS OF FAMILY OF AN OFFICER OR MAN ENLISTED IN C. E. F.**

**INSTRUCTIONS.**

- (a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.
- (b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.
- (c) All questions, etc., must be answered.
- (d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.
- (e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

(1) Name of Overseas Unit which Soldier joins.....

**109th OVERSEAS BATTALION, C. E. F.**

(2) Regimental Number ..... **725098** .....

(3) Full Name of Soldier..... **William Edward Anderson** .....

(4) Place of Birth..... **Niagra Falls Ontario** .....

(5) Are you married, or not? ..... **No** .....

(6) If married, state,  
(a) Full name of your wife.....

(b) Present Postal Address.....

(7) Are you a widower? ..... **No** .....

(8) Have you any children?.....

If so, give number of boys and girls.....

Also their names and ages.....



(9) Is your Father alive?.....**Yes**.....

If so, state name and address **Peter Anderson 50 Queen Street Lindsay**

(10) Is your Mother alive?.....**Yes**.....

If so, state name and address **Caroline Anderson**

**50 Queen Street Lindsay Ontario**

(11) If your Mother is a widow.....

Are you her sole support, or not?.....

(12) If sole support of widowed mother, state what amount you have given her per month prior to your enlistment, also reason she has no other support than yourself.

.....  
.....

(13) If you have no wife, father, mother or children, state the name and relationship with full postal address of your next of kin, to whom you would desire any communication to be sent concerning you.

.....  
.....  
.....

(14) If you have a wife, or children, or a widowed mother who depends on you as her sole support, have you applied to the Paymaster of your unit for Separation Allowance? If not, this must be done.

.....

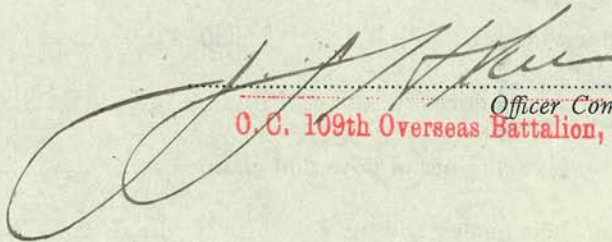
15) Are you insured?.....**No**.....

If so, in what Company?.....

Have you made arrangements for payment of your Insurance premium.....

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

Date.....**July 14th 1916**.....

  
.....  
**Lt. Col.**  
**Officer Commanding.**  
**O. C. 109th Overseas Battalion, C. E. F.**



# MEDICAL EXAMINATION UPON LEAVING THE SERVICE OF OFFICERS AND OTHER RANKS WHO HAVE NO DISABILITY.

50 Queen St. Lindsay Ont

Officers and Other Ranks leaving the service for reasons other than medical unfitness are to be reported on this form. Where there is evidence of any undetermined or progressive disability, this form will not be used, but the case will be referred to a Medical Board for completion of M.F.B. 227.

No. 725798 Rank Rte Surname A. N. D. E. R. S. O. N.  
(Given name in full)

William Edward  
 Unit or Corps 30028 Birthplace Niagara Falls Ont.

(Examination of Officer or Other Rank (stripped) to be made by one Medical Officer).

1. GENERAL DESCRIPTION:

Physique ... good ... Weight 164 lbs. Height 5 ft. 4 in. Colour of Eyes Grey  
 Nutrition ... good ...  
 Pulse ... 72 ... b.p.m. ...  
 Condition of arteries ... good ...  
 Vision Rt. normal Left normal  
 Hearing (conversational voice) Rt. N ft.  
 Left N ft.

Identification marks, scars, or deformities.  
 (Give cause and date of origin).  
Scar left index finger

Opinion as to general health and physical condition... Good Fd for Qi

2. Has Officer or Other Rank ever suffered from, or has he now, any affection of the following systems? (Answer "Yes" or "No"). (Subjective evidence may be sufficient in certain cases.)

Nervous System ... no ... Genito Urinary Sytem ... no ... Cardio-Vascular System ... no ...  
 Special Senses ... no ... Integumentary System ... no ... Respiratory System ... no ...  
 Disturbance of mentality no ... Muscular System ... no ... Digestive System ... no ...  
 Osseous and Joint System no Any other general condition ... yes ... Scar left index finger

3. If the answer to any part of Section 2 above is "Yes," here give full particulars, with cause and date of origin; and also a description of the present condition.

Scar left index finger causing no disability



# EXAMINATIONS.

## THIS SECTION FOR USE OVERSEAS—

Examined at ..... (Overseas)

Date ..... Signed ..... M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature .....

(If not satisfied, M.F.B. 227 will be completed by Medical Board.)

## THIS SECTION FOR USE IN CANADA—

Examined at Downfield (Canada)

Date Nov-1-19 Signed McGowan M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to, or during service.

Signature E. Anderson .....

(If not satisfied, M.F.B. 227 will be completed by Medical Board.)

(This space to be used, if necessary, in connection with Section 3, overleaf, only.)



CANADIAN ARMY DENTAL CORPS, O.M.F.C.

DENTAL CERTIFICATE FOR DEMOBILIZATION

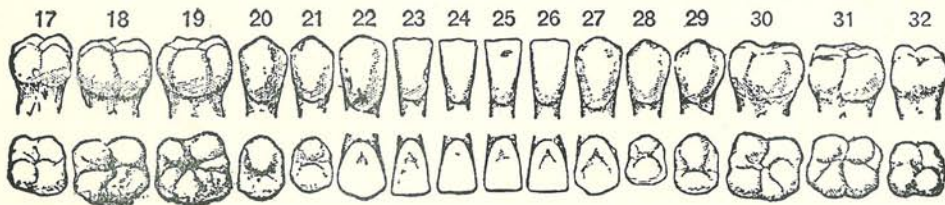
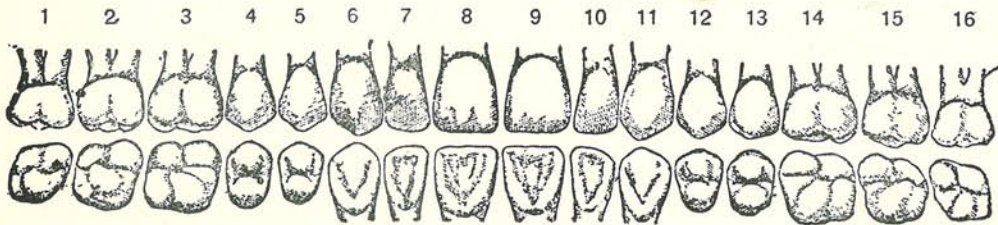
Canadian Printing and Stationery Services, London

DIRECTIONS TO DENTAL OFFICERS

NAME OF SOLDIER (Block Letters) ANDERSON W.E.

REGIMENT 20 BN. RANK PTE No. 425098.

Date of Examination in England 18/12/18 Date of Examination in France \_\_\_\_\_



1. This form will be made out for each individual at the time of Demobilization in England or France.
2. Figures as per chart will be used to designate teeth concerned.
3. In reference to Partial Dentures the numbers of teeth thereon will be stated.

PRESENT DENTAL REQUIREMENTS

1. FILLINGS

2. EXTRACTIONS

3. CROWNS

4. DENTURES

- (a) Full Upper
- (b) Part Upper
- (c) Full Lower
- (d) Part Lower

*Fil*

HAS HE EVER REFUSED DENTAL TREATMENT ?

HAS HE EVER RECEIVED DENTAL TREATMENT ? (Reply by "Yes" where applicable to any or all of a, b or c.)

- (a) In Canada
- (b) In England
- (c) In France

KINMEL PARK,  
NORTH WALES.

Signature of Dental Officer

*H. G. Goodhead*  
Capt



**Medical Examination upon leaving the Service  
of an Officer fit for general service or a Soldier fit for duty.**

Officers leaving the Service upon being found unfit for general service by a Medical Board, and Soldiers leaving the Service upon being found otherwise than fit for duty by a Medical Board, are not to be reported on this Form.

Rank 1st Lieut. Name Anderson, William Edward  
 Unit or Corps 1st C.E.R.B. (If a soldier) Regt. No. 725098  
 Born at Niagara Falls on, date Feb. 13, 1899  
 Signature (for identification) W.E. Anderson

The examination is to be made jointly by two Medical Officers.

1. **PHYSIQUE**—Any deformity, maiming or lameness? If so, describe. None

Weight 145 lbs.  
 Height 5-6 ft. 6 ins.

2. **NUTRITION AND DIATHESIS?**

Good

After searching inquiry and thorough examination is any evidence found of disease or impairment of the parts indicated below? If so, describe.

3. **NERVOUS SYSTEM?**

No.

4. **RESPIRATORY SYSTEM.**

No.

5. **HEART?**

No.

Abnormal Sounds? None

Abnormal Size? No.

Pulse Rate? 70.

Intermittence or irregularity? No.

6. **ARTERIES.**—Any hardening? No.

7. **DIGESTIVE SYSTEM?**

No.

8. **GENITO-URINARY SYSTEM?**

No.

Urinalysis—s.g.? 1020. Reaction? Acid. Albumen? 0. Sugar? 0.

9. **SKIN, MIDDLE EAR, EYE**  
or any other part?

No.

10. Is there any evidence of impairment of health or physical condition not mentioned above? If so, describe.

None.

11. Opinion as to the health and physical condition of the one examined?

Good

Examined at Keim and Park Signed J.A. Locke Capt. M.O.  
 Date 16/12/18 Signed W. H. Hayward M.O.

If any disease or impairment of health or physical condition is discovered, this report should be sent at once to the O.C. concerned for the Officer or Soldier to be sent before a Medical Board for regular boarding.



CANADIAN EXPEDITIONARY FORCE.

M.F.W. 44.  
1133 (D.P.) 250M.-12-18.  
1772-39-903.

LAST PAY CERTIFICATE

ORIGINAL

Regimental No. 725098 Rank Pte. Name Anderson, W.E.  
(Surname first)  
Unit C.O.R. who was\* Discharged  
On January 25th 1919, to Category "A2"  
\*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from Jan. 1st to Jan. 25th 1919.  
the inclusive date of transfer or discharge.

Table with columns Dr. and Cr. containing financial entries: Bal. Dr. or Cr. from prev. month, Regimental Pay, Field Allowance, Separation Allowance, Clothing Allowance, Post Discharge Pay, \*Other Credits, Advances, Separation Allowance and Assigned Pay Cheque No., \*Other Charges, Balance on transfer or on discharge, cheque No. 2396, Total.

A monthly stoppage of \$ 15.00 (†) has... (‡) been paid on account of  
Assigned Pay for the month of December 1918... } (to) Assignee Mrs. P.C. Anderson,  
and Separation Allee. for month of 191... } Lindsay, Ont.  
(Address) ...  
(†) Insert amount to be assigned, whether it has been paid or not. (‡) Insert "not" if amount has not been paid for period of account.

ON TRANSFER OF AN OFFICER.

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

REMARKS:—

State (1) date of enlistment ... married or single...  
(2) Separation Allowance, entitled or not No... (3) Reason for discharge...  
(4) Authority for discharge or transfer 3DD. 3-A-203

NOTE.—S.A. & A.P. Card and Index Card (M.F.W. 71) are to accompany Last Pay Certificate on transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay Account of the officer or soldier.

Date January 24th, 1919  
Place Kingston, Ont.

W. Peters 9. Captain,  
OFFICER I/C DEMOBILIZATION PAY DIV.  
MILITARY DISTRICT No. 3 Paymaster.

N.B.—(A) This form is to be used for all ranks (vide Article 122-130 and 141) Financial Instructions, C.E.F., 1916.  
(B) For purposes of transfer it is to be made out in triplicate. Copies will be disposed of in accordance with instructions as laid down in Routine Order No. 1307, dated 12th Nov., 1918. Payment of the balance will not be made and the words "or on discharge cheque No." will be deleted.  
(C) For purpose of discharge it is to be made out in duplicate. One copy to accompany discharge papers, and one copy for retention as a record. As payment of the balance will have been made, the words "on transfer or" will be deleted.  
(D) If a man on discharge is entitled to Post Discharge Pay, Last Pay Certificates will be made out as in "C" with an additional copy to be forwarded to the District Paymaster.

cheque #2396 attached











Number

725098

Rank

Pte

Surname

ANDERSON

Christian Name

William Edward

Units

20th En C Coy Theatre of War France

Date of Service

29-11-16

Remarks

Latest Address

50 Queen St

Sunday, Ont.

Roll No.

200m.-6-21.

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DESP. MAR 31 1923  
REGN. NO. 24072