

Proceedings of Court of Inquiry or on men reported Missing on Active Service.....

Attestation Papers.....

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet.....

Compulsory Stoppages.....

Casualty Forms.....

Proceedings on discharge.....

Corps History Sheet.....

Date and No. of Deposit Receipt for Purchase Money and Amount.....

Parchment Certificate.....

Medical Report for Invalids.....

Medical History Sheet.....

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet.....

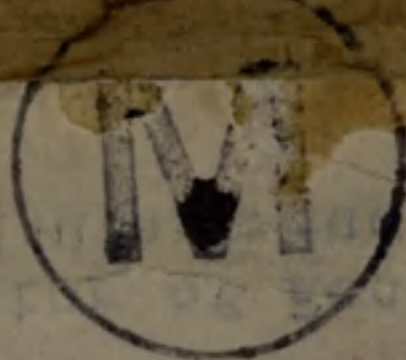
Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate.....

at 127
Copy Disch Cert
Dental Certificate - 1
circ card 79-1
ATB
R+D
6045-1

M. F. W. 62.
100m.-6-17.
H. Q. 1772-39-935.



Name *CAMERON, ALEXANDER*

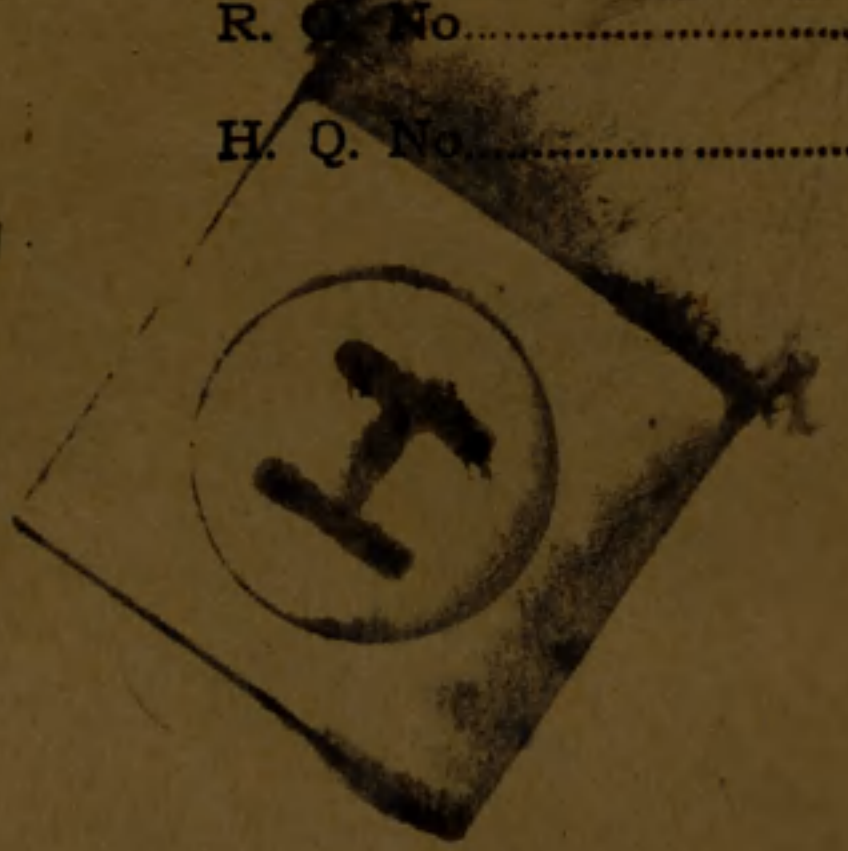
Regt. No *59137* Rank *Pvt*

Corps *4184 Batta*

01917

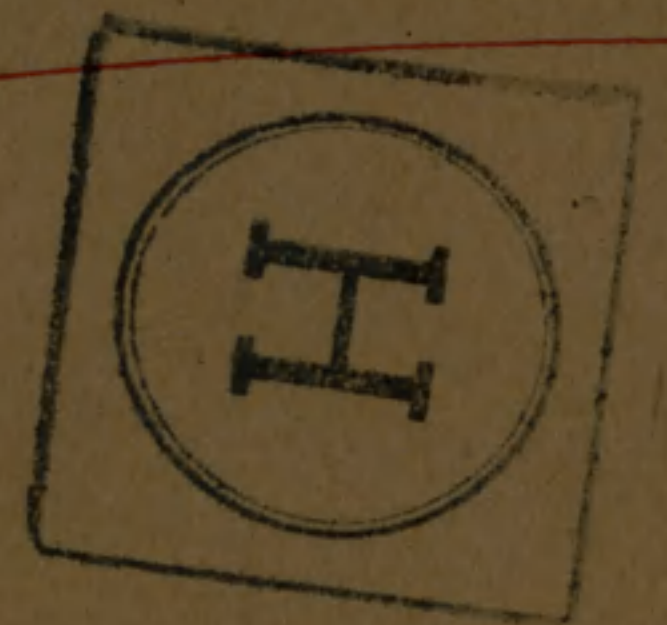
R. No.....

H. Q. No.....



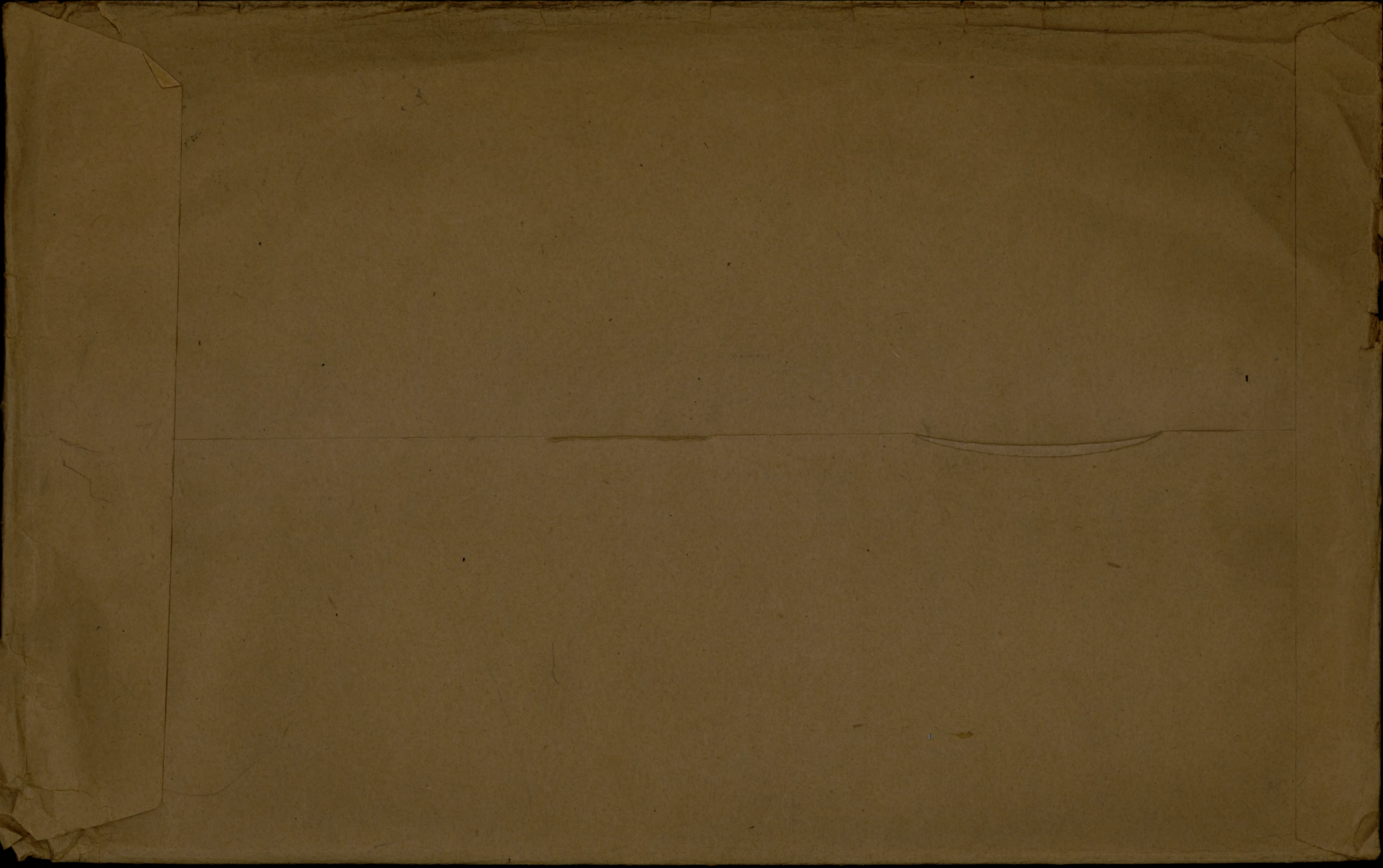
Medically Unfit

Decreased 6-2-53



14-18
14-18
1-18

J.P.



619

ATTESTATION PAPER.

No.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS)

- 1. What is your name?..... Alexander Cameron
- 2. In what Town, Township or Parish, and in what Country were you born?..... Murrayshire Scotland
- 3. What is the name of your next-of-kin?..... Maggie Cameron (wife)
- 4. What is the address of your next-of-kin?..... Bobcaygeon Ont.
- 5. What is the date of your birth?..... 22nd May 1875
- 6. What is your Trade or Calling?..... Laborer
- 7. Are you married?..... Yes
- 8. Are you willing to be vaccinated or re-vaccinated?..... 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

x. Alex Cameron (Signature of Man).
 W. O. G. Munk B. C. (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Alex Cameron, 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, 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 Nov 5 1914. x. Alex Cameron (Signature of Recruit)
 W. O. G. Munk B. C. (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Alexander Cameron, 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 Nov. 5 1914. x. Alex Cameron (Signature of Recruit)
 C. J. Summers (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 Kingston this 5 day of Nov 1914.

W. S. Hughes (Signature of Justice)

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

W. S. Hughes J. Cal. (Approving Officer)

1. 11. 14 Lindsay

Description of Alexander Cameron on Enlistment.

Apparent Age.....38 years.....6 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. 6 ins.

Chest measurement { Girth when fully expanded.....37 ins.
 Range of expansion.....3 ins.

Complexion.....fair

Eyes.....blue

Hair.....sandy

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

none

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.....5/11.....1914.

Place.....

[Signature]
 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.

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

.....[Signature].....(Signature of Officer)
[Signature]

Date.....5/11.....1914.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 59132 (Rank) Private
Name (in full) Cameron Alexander enlisted in
the 21st Battalion
CANADIAN EXPEDITIONARY FORCE at Kingston Ont on the 5th
day of December 19 14
HE served in Canada England France
and is now discharged from the service by reason of
Bung Medically unfit

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

Age 41 years
Height 5 feet 6 inches
Complexion Fair
Eyes blue
Hair sandy

Marks or Scars

Signature of Soldier

Issuing Officer

Charles Scott Capt. & Adj.
District Depot No. 8

Date of Discharge 3-5-18

Appointment

Signed at Kingston Ont this 3rd day of May 19 18

in Military District No. _____

File Reference No. 2md 88-C-372

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. 59132 (Rank) Private Name Cameron A.

Unit No 3 District Depot.

Address on Discharge Lindsay Ont

Character and Conduct Very Good

Former Occupation Labourer

Special Qualifications of Value in Civil Life

Medals and Decorations

Remarks This form is lacking signature of man as Form 39A was not available at time of his discharge

Signed at Kingston Ont this 3rd day of May 1918

[Signature] Name of Officer Capt. & Adj.
District Depot No. 3

Rank

Appointment

add. D oc. m D 3

Ref. letter 25/9/18.

H. L. file

Please fly away

Returned to Canada-Authority- ~~Comptrol~~ *Medical* Board of Officers.

held at *London* ----- Date, *18 Feb* ----- 1918

Category, ----- *B3* -----

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

ORIGINAL

This form to be used for all Ranks (Vide Articles 122, 130 and 141, Financial Instructions, 25715c, C.E.F., 1916).

Regimental No. **59132** Rank **Pte.** Name **Cameron, Alex.**Corps **21st Battalion** who was* **Discharged**On **May 3rd** 191**8**, to **Category "E"**

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from **May 1st** 191**8**, to **May 3rd** 191**8**, the inclusive date of transfer or discharge.

Dr.	\$	c.	Cr.	\$	c.
Bal. Dr. from prev. month.....			Bal. Cr. from prev. month.....		01
Advances } No.....			Regt'l Pay 3 days at \$ 1 c.....	3	00
by } No.....			Field Allow. 3 days at \$..... c 10		30
Cheques } No.....			Separation Allowances* (Monthly) \$25	2	00
Assigned Pay and Sep'n Allee. No. 462	2	00	Other Allowances* Clothing	8	00
Other charges.....			Other Credits*.....		
Payment on transfer or discharge No. 463	11	31	Bal. Dr. (to be deducted by new unit).....		
Balance Cr. (to be paid by the new unit).....					
Total.....	13	31	Total.....	13	31

* Give particulars.

A monthly stoppage of \$ **20.00** (†) has..... (‡) been paid on account of Assigned
 { Pay for the month of **April**.....191**8** } (to) Assignee..... **Mrs. M. Cameron,**
 { and Sep'n Allee. for month of.....191.... }
 (Address)..... **Bobcaygeon, Ont.**

(†) 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 **Nov. 5th, 1914**
 (2) if married and if a Separation Allowance Card has been submitted..... **pd. to date of disch.**
 (3) cause of discharge..... authority..... **3MD 88-C-372**
 (4) authority for transfer.....

NOTE.—Separation Allowance and Assigned pay Card and Index Card (M. F. W. 71) are to accompany the original Last Pay Certificate on transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay-list of the unit.

Date **May 3rd, 1918**Place **Kingston, Ont.**

W. Peters
 CAPTAIN
 PAYMASTER, NO. 3 DISTRICT DEPOT
 Paymaster.

N.B.—For purposes of transfer this form is to be made out in quadruplicate. Original copy to paymaster of new unit; duplicate to District Paymaster; triplicate to accompany the pay-list at the end of the month, and quadruplicate for retention as a record.
 For purposes of discharge it is to be made out in triplicate. Original copy to accompany discharge papers; duplicate to accompany pay-list at the end of the month, and triplicate for retention as a record.

If a man on discharge is entitled to three months' Post Discharge Pay, Last Pay certificate will be made out in quadruplicate. The original Last Pay Certificate will be forwarded with other documents to Paymaster Post Discharge Pay and triplicate, with his discharge documents.

cheque #463 attached

M. F. W. 44.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at SEAFORD 25-1-1916

No. 59132 Rank PTe Name CAMERON, A.

Local Unit 6th CRB Overseas Unit 21st Bn Age 56

Examination held at 6th CRB

DISABILITY. DEBILITY.
Overseas Local
(scratch one out)

PRESENT CONDITION.

17 mos in France. Returned for fract of foot 8-2-17.
Complains of 1) shortness of breath on exertion
2) weakness of left foot following fract.
Exam: 1) Some deformity of left foot due to
poor alignment of 2nd & 3rd Metatarsal bones
2) Pulse rate 82, slight hardening of arteries
3) States he is 56 but is fairly well preserved
for that age.

BOARD RECOMMENDS:

1. Fit for Duty Bill not likely to be raised to 6 mos
2. Fit for duty after.....weeks' physical training.
3. Fit for Temporary Base Duty.....weeks.
4. Fit for Permanent Base Duty.....
5. Discharge.....

Signatures:—

Members

T. J. GrahamPresident.
J. McKelvey
J. Sillies
T. J. Graham
 for A.D.M.S., Canadians, For A.D.M.S.

APPROVED

26 JAN 1918

Seaford, Sussex.

Dated at.....1916.

APPROVED

T. J. Graham
Captain, C.A.M.C.
For A.D.M.S., Canadians, For A.D.M.S.

PROCEEDINGS OF A MEDICAL BOARD.

Examination held at Fort Campbell
 Local Unit 1st C.A.P. Overseas Unit 1st C.A.P. Age 32
 No. 1135 Rank PT-2 Name GAMMERTON, A.
 Dated at Fort Campbell 1918

DISABILITY
 Overseas-Local
 (scratch one out)

PRESENT CONDITION.

Handwritten medical report:
 It was found that the patient returned for treatment on 10-15-18.
 Complaints of pain in the right foot following foot
 exercises. There is a definite tenderness of the right foot due to
 the exercises. The patient is unable to walk without the use of crutches.
 The patient is unable to walk without the use of crutches.
 The patient is unable to walk without the use of crutches.
 The patient is unable to walk without the use of crutches.

BOARD RECOMMENDS:

1. Fit for Duty (with medical certificate)
2. Fit for duty after weeks' physical training.
3. Fit for Temporary Base Duty weeks.
4. Fit for Permanent Base Duty.....
5. Discharge.....

Signatures:—

Handwritten signature: _____
 President

Members

Handwritten signatures of board members:

APPROVED

Dated at 1918

For A.D.M.S.

Report on Wounds or other Injuries, received otherwise than in Action.

114

Gen. No.

4269.

Certificate of Medical Officer.

No. 59132 Dr. Cameron A. 21st Batt. Amherst

was admitted to hospital on the 4-2-17 suffering from Contusion - left foot (? fracture)

†Here insert "trivial" or "serious."

†Here insert "will" or "will not."

*Here insert "claims" or "does not claim."

The disability is of a † Comparatively serious nature, and in all probability † will interfere with his future efficiency as a soldier.

*He Claims that he was in the performance of military duty at the time of the accident.

(If the soldier makes no claim that he was on duty at the time, the certificate below should be signed by him.)

Station 23rd CCS

Date 4-2-17

S. J. McMillan
Capt. R. A. Duncanson
Medical Officer in Charge.

Certificate to be signed by soldier.

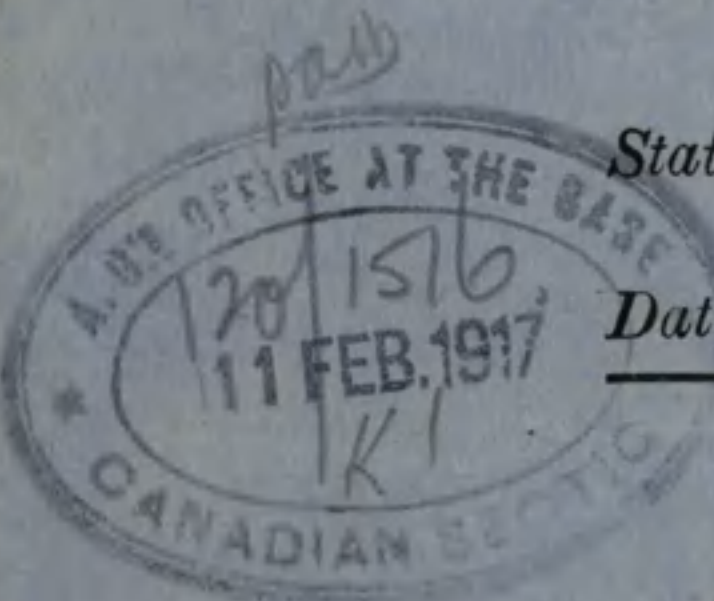
I, _____ hereby declare that the injury sustained by me on the _____ did not occur while I was in the performance of military duty.

{ Soldier's Signature.

{ Signature of Medical Officer.

Station _____

Date _____



Certificate of Commanding Officer.

(This certificate will be completed only in cases of trivial injury where the soldier claims to have been injured while on duty.)

†Here insert "occurred" or "did not occur."

I certify that the injury to the above-named soldier † occurred while he was in the performance of military duty.

†If on duty, state (a) The date of the injury. (b) The place where it occurred. (c) The nature of the duty. (d) Whether the soldier was in any way to blame.

† Yes

(a) 2-2-17.

(b) Between Auchel & Marles-Les-Mines.

(c) Drawing goal from Bouay

(d) No.

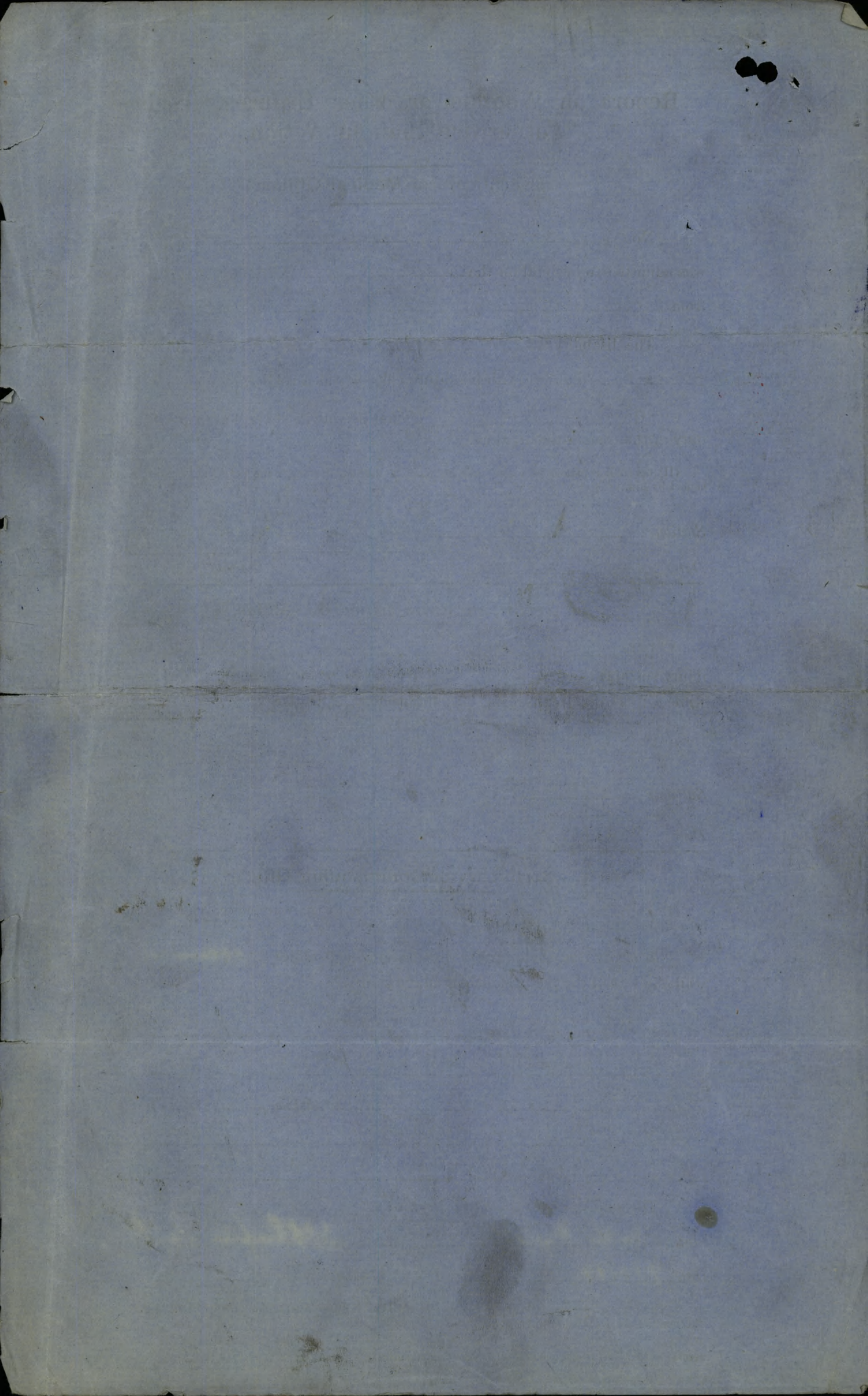
The soldier has been so informed.

Station In the Field

Date 7/2/17.

D. A. Rispin Capt.
Staff Capt., 4th Canadian Inf. Bde.
Commanding.

This Army Form will be attached to the Medical History Sheet, on which it will be recorded whether the soldier was on duty, and whether he was to blame.



DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

DISTRICT

3

NAME OF SOLDIER

Jameson, J. G.

REGIMENT

Canadly Hnd. Gde

No.

59132

Condition on first Examination	Date	Amalgam	Temporary Filling (a) G.P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhea	Synthetic Porcelain	Extracting	Dentures			Gold Clasp	Gold Filling	Crowns		Bridge Work	OPERATOR	Military Dist.	REMARKS
												U	L	P			Gold	Porcelain				
	<i>April 12 18</i>																			<i>Capt Oliver 3.</i>		<i>Complete</i>



INSTRUCTIONS

1. On examination the condition of patient's mouth to be marked on diagram in red ink.
2. On first line of report record of same to be made in red ink.

Only such entries to be made on this sheet as will show :

1. Condition on examination (in red).
2. Condition on leaving Canada.
3. Condition on discharge.

СВИДЕТЕЛЬСТВО О ВЫДАЧЕ ДИПЛОМА

186

УЧЕБНО-МЕТОДИЧЕСКИЙ ЦЕНТР

ИМЯ

ФАМИЛИЯ

Дата выдачи диплома

Подпись

Подпись

Подпись

Подпись

Подпись

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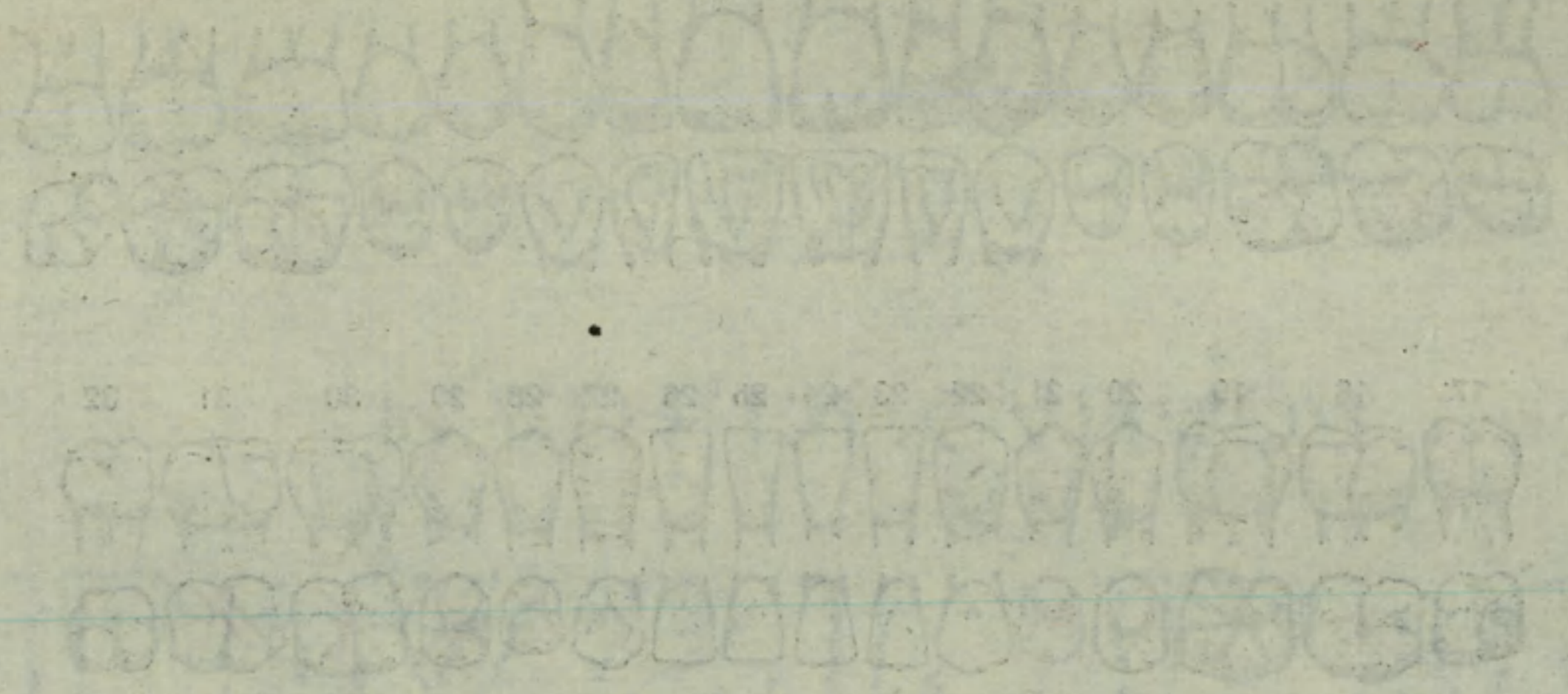
Подпись

Подпись

Подпись

Подпись

Подпись



ИНСТРУКЦИИ

1. On examination the results of papers must be marked on sheet in red ink.
2. On first page of report record of name to be given in red ink.

Only such entries to be made on this sheet as will show:

1. Conduct in examination (in red).
2. Grades on leaving Canada.
3. Remarks on discharge.

MEDICAL HISTORY SHEET.

617

Surname Lameron Christian Name Alexander

Examined on 5th day of Nov 1914

Approved by [Signature]
Rank Capt. M. B. M.O.

at Kingston
City or Town Murray Ave
Birthplace Scotland
County [Blank]

Apparent age 28 yrs
Trade or occupation labourer

Height 5 Feet 6 Inches.

Weight [Blank] Lbs.

Chest measurement { Minimum 24 inches.
Maximum expansion 27 inches.

Sexual development Good

Small-Pox Marks None

Vaccination Marks { Arm Right Left
Number 1

When Vaccinated last 1900

(a) Marks indicating congenital peculiarities or previous disease [Blank]

(b) Slight defects but not sufficient to cause rejection [Blank]

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT,
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date	Result	VACCINATIONS
6/1/15		<u>[Signature]</u> M.O.
		M.O.
		M.O.

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
11/14		<u>[Signature]</u> M.O.
23.11.14		<u>[Signature]</u> M.O.
3.8.17.	<u>J.A.B.</u>	<u>[Signature]</u> M.O.

Enlisted on 5 day of Nov 1914 at Kingston

CORPS.	REG'T NUMBER.	HABITS.	DATE.
<u>21st CANADIAN BATTALION,</u> <u>6th Res</u>	<u>59132</u>	<u>[Blank]</u>	<u>28-4-17</u>

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>Seaford</u>	<u>22/5/17</u>	<u>Fracture 2nd & 3rd metatarsal R II Lt. foot.</u>	<u>[Signature]</u>
<u>Seaford</u>	<u>25-1-18</u>	<u>Debility</u>	<u>[Signature]</u>
<u>Seaford</u>	<u>19-2-18</u>	<u>[Blank]</u>	<u>[Signature]</u>
<u>St. Idury</u>	<u>29-4-18</u>	<u>[Blank]</u>	<u>[Signature]</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.

21st Battalion (C. E. F.)

CANADIAN

[Signature]
Capt. Cairns
President
STANDING MEDICAL BOARD
[Signature]
Capt. Cairns

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

6912

1139

OTTAWA, CANADA.

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

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

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

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

1. Christian names ... *Alexander* 2. Surname *Cameron*
3. Rank ... *Private* 4. Original Unit *21st O.S. Bn.* 5. Reg. No. *59132*
6. Address, in full, to which future payments of gratuity are to be forwarded
Bobcaygeon P.O. Ont.
7. Date of enlistment in the C.E.F. ... *November 5th 1914*
8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge *Maggie Cameron*
9. Relationship of such dependent *Wife*
10. Address, in full, of such dependent *Bobcaygeon, Ont.*
11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? ... *No*
12. Were you at any time on the strength for pay and allowances of a unit of the C.E.F. which was out of Canada or the United States when such pay and allowances were issuable? If so, give particulars of one such unit and dates of service overseas with such unit:—
Yes 21st O.S. Battalion, From May 6th 1915 to Feb 8th 1917
13. Were you on the strength for pay and allowances of the Clearing Services Command, having been at any time on duty outside of Canada or the United States? ... *No*
14. Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service ... *No*
15. Give total length of time which you served on active service, whether in Canada or Overseas, setting out particulars of units on whose strength you served ... *Total Active Service 3 years 6 months 21st O.S. Battalion.*
In Canada from Nov 5th 1914 to May 6th 1915.
In England May 6th 1915 to Sept 15 1915
In France from Sept 15 1915 to Feb 8th 1917
In England 6th Reserve Battalion from Feb 8th 1917 to March 17th 1918
16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department *No*
17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.? ... *No*

Paymaster General's Branch.
JAN 24 1919
Militia Dept. Ottawa.

18. Have you had more than one enlistment? If so, give particulars of discharges and re-enlistment and under what regimental numbers and units. *no*
19. Have you already received any payment of Post Discharge Pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid. *yes*
3 months pay and separation allowance \$174.00
20. Have you been issued with a War Service Badge? If so, what class? *yes A and B*
21. Have you, during the present war, served in the Imperial Forces? *no*
22. Are you entitled to receive, or have you received any gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled. *no*
23. (a) Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England? *no*
 (b) If so, was such reversion in consequence of misconduct or inefficiency? *—*
24. Are you now serving in the C.E.F.? *no* If not, give:—(a) Date of discharge
May 3rd 1918 (b) Reason for discharge
"Being medically unfit for further service arising from overage"
25. Are you at present a member of and in receipt of pay and allowances from any Canadian naval or land forces? If so, give unit. *no*
26. Did you at any time serve at the front in an actual theatre of war? If so, give particulars of one unit which you served at the front, and dates of such service with that unit
*yes... 21st O.S. Battalion - In France from Sept 15th 1915
 Feb 8th 1917. All engagements during this period.*
27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment? *no*
 (b) If so, are you in receipt of full pay and allowances from that Department? *—*

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

Signature of Applicant:

Alexander Cameron

Place of Residence:

Bobcaygeon, Ont

Declared before me at:

Bobcaygeon, Ont

This

17th

day of

January

19*19*

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

W.W. Boyd

POST DISCHARGE PAY.

Date paid.	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
<i>May 4/1918</i>	<i>33.00</i>	<i>25.00</i>		
<i>June 4/18</i>	<i>33.00</i>	<i>25.00</i>		
<i>July 4/18</i>	<i>24.59</i>	<i>25.00</i>		
Certified Correct.				
<i>Total amount paid</i>		<i>\$ 175.59</i>		
<i>Oct. Blee</i>		<i>01</i>		
		<i>\$ 175.10</i>		

Blumenkrantz
 District Paymaster

Kingston Ont. April 23rd. 1918

The Officer Commanding
Queens Military Hospital.

Cameron Pte.A.
X-ray Exam. of L.Foot

Sir:-

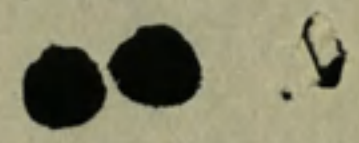
I beg to state that the X-ray Exam. of the Marg^l
inally noted man's foot shows no bony lesion.

To. President

S.M.B. Fort Henry

R.S.
for O.C.

J.P. Angus
Major C.A.M.C.



CERTIFICATE OF SERVICE.

(Issued following loss of Permanent Discharge Certificate
MFW 39)

59132

Private

THIS IS TO CERTIFY that ~~Cameron, the~~ **Cameron, the** Rank.....

(Name in full) **1st Overseas Battalion;**.....

Enlisted in..... **Fifth**.....

Canadian Expeditionary Force, on the..... day
November 4.

of.....191.....

He served in..... **England and France**.....

..... **Kingston, Ontario**.....

and was discharged at.....

Third..... **May**.....191 **8.**

on the..... day of.....191 **8.**

by reason of..... **Being Medically Unfit**.....

His conduct and character while in the Service were.. **Very Good**

A. Cameron, Esq.
 Address **8/0 D.R.O.M.D.#3.**
Kingston, Ont.

.....
 Director of **Lieutenants.**
 for **Lieut.-Col.**

Ottawa,..... day of.....191
6th **September 9.**

H.O.
649-c-9591.

Faint header text, possibly including a date or reference number.

First main paragraph of faint, illegible text.

Second main paragraph of faint, illegible text.

Third main paragraph of faint, illegible text.

Faint text at the bottom of the page, possibly a signature or footer.

Rank _____ Name **CAMERON Alexander** Reg'l No. **59132.**
 Unit **21st Bn** If in perm. Corps, }
 What Unit? } Married or Single **Married**
 Place and Date of Enlistment **Kingston. Ont. 5th Nov 1914** Place of Birth **Murrayshire. Scot**
 Name and Address, Next-of-Kin **Maggie Cameron. Bobcageon. Ont**
 Relationship **Wife.**

Assigned Pay Monthly \$ _____

Payable to _____

Relationship _____

Separation Allowance \$ _____

Payable to _____

Relationship _____



0150B.1358

N/E. R.B. No. *6534*
 File R.L. _____
 Category *Can of*

Discharge, Date and Place _____

Reason _____

Character _____

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				
19.5.15.	OC. 21 st	Arrived per Rhul. Metagama England		15.5.15.	Infirm: Form.
8.10.15	" "	Embarked for France	Folkestone	14.9.15	" "
7.9.16	" "	Attached to 4 th Inf Bde. as transport driver	Field	18.7.16	PT 38.
12.2.17	" "	Adm of 8 Stab Hosp	Wimereux	5.2.17	GA 438 Cont Foot and Leg.
15.2.17	" "	Wansstead Hosp	Margate	8.2.17	B 273 " "
20.2.17	" "	Transf to 6608.	Shoreham-on-sea	8.2.17	PT 21. S.
21.2.17	CCAC	Taken on strength.		8.2.17	" 88A
12.3.17.	EOR.	I.O.S. from CCAC	Seaford	11.3.17	" 1.
2.5.17	✓	Cases to be shown Hosp + SOS to 6 th Res	✓	28.4.17	" - 57
23.5.17	6 th Res	SOS to 6 th Res	✓	23.5.17.	" - 119.
21.9.17	EOR.	Dis. Wansstead Hosp	Margate	6.5.17	ER.B.17

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				
10.3.17	C.C.A.C.	S.O.S. on tr to C. Ont. Regt		10.3.17	P.D. 116
30.11.17	6 th Res Bn	Dis Hsp. + 105.	Seaford.	28.11.17	--- 99
26.5.17	EOR.D.	is re TOS. for 6 th Res. + Detail Depot	✓	23.5.17	--- 75 + 80
28.5.17	6 th Res.	Att. from EOR.D.	✓	23.5.17	--- 123. + 76 EOR.D. 6 th Res.
23.2.18	EOR.D.	Cases to be attached 6 th Res * on com. C.D.D. Buxton pending return to Canada	Pte ✓	23.2.18	Pt. II 54.5 Pt. II 46 d 23.2.18.
16.3.18	EOR.D.	Cases on com. C.D.D. Buxton S.O.S. to Canada for disposal by A.G.	Seaford Pte	27.2.18	Pt. II 75.

CERTIFIED CORRECT
 Army Form B. 103.
 Canadian Record Office,
 Westminster House,
 7, Millbank S.W.

Casualty Form—Active Service.

Regiment or Corps 21st Battalion.

Regimental No. 59132. Rank Plt Name Cameron, Alex.

Enlisted (a) 1. 11. 14 Terms of Service (a) Duration of war Service reckons from (a) 1. 11. 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) labourer

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>Disembarked</u>	<u>Boulogne</u>	<u>SEP 14 1915</u>	
<u>17/2</u>	<u>21 Bn</u>	<u>Att^d 4th Inf Bde as trench warden — at duty</u>	<u>In the field unit</u>	<u>4/1</u> <u>1/4</u>	<u>B-213 12</u> <u>" 6/4</u>
	<u>21st Bn</u>	<u>at duty</u>	<u>unit</u>	<u>29/5</u>	<u>B-213. 14/7.</u>
	<u>Do.</u>	<u>Attached 4th C. I. Bde as transport driver</u>	<u>In the field</u>	<u>12-7-16</u>	<u>B-213 14/7.</u> <u>G.O.C 4th C.I.B. 2/1.9.16.</u>
	<u>23 C.C.S.</u>	<u>Contusion left foot (? fracture)</u>	<u>23 C.C.S.</u>	<u>4/2/17</u>	<u>B.1117 d/4 2-17.</u>
	<u>8 Staty</u>	<u>Do. (acc) adm</u>	<u>8 Staty</u>	<u>5/2/17</u>	<u>aag/. Can. Sec. file K.I. 120/1516.</u> <u>W. 3034.</u>
<u>8/2/17</u>	<u>Do.</u>	<u>Do (acc) Do. Travels England. per H.S. "Princess Elizabeth"</u>	<u>per H.S. "Princess Elizabeth"</u>	<u>8/2/17.</u>	<u>W. 3034. W. 3083 No. 7374.</u> <u>PT. II O. 2/2/20-2-17.</u>

8 - MAR RECT

Whogau
 Capt. for Lt.-Col., A. A. G.
 Canadian Section, G. H. Q. 3rd Echelon, B. E.

(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				
21. 2. 17. 12. 3. 17.	ccac EORD.	Taken on strength TOS. from ccac	Seaford	8. 2. 17. 11. 3. 17.	Pt II 70. 88. W. W. Myers LIEUT: FOR LT: COL: I/C RECORDS, C.O.M.F.
30-4-17 23-5-17.	O.C. 6th CAN. RES. BN. 6th Res	TAKEN ON STRENGTH 6th CAN. RES. BN. S.O.S. 6th Res Bn. on posting to E.O.R.D.	Seaford	8-5-17 23-5-17	Pt II 99. P. H. 119 OFFICER I/C RECORDS 6th CAN. RES. BN.
28-5-17	6th Res	attached to 6th Res Bn from EORD.	Seaford.	23-5-17	Pt II 125.
23/2-18	O.C. 6th Res	Ceases to be attached from EORD	Seaford	23/2/18	PART II No. 46 M. W. ... OFFICER I/C RECORDS 6th CAN. RES. BN.
2.5.17.	O.C. EORD	S.O.S. EORD on posting 6th Res.	Seaford	30.4.17.	Pt II 20. 51
26.5.17.	O.C. EORD	Re. J.O.S. EORD from 6th Res.	Seaford	23.5.17.	Pt II 20. 70
27.5.17.	O.C. EORD	on com from EORD to 6th Res.	Seaford	23.5.17.	Pt II 20. 76
23.2.18.	O.C. EORD	Ceases on com to 6th Res. and on com. C.O.D. Buxton	Seaford	23.2.18	Pt II 20. 54. W. Chamberlain Adjutant, for Officer Commanding, East Ont. Reg't Depot,

924

Adjutant,
for Officer Commanding,
East Ont. Reg't Depot,

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

5-11-14

Separation and Assigned Pay Branch

May 1/15

RATE OF SEPARATION ALLOWANCE

20	25 ⁰⁰		
----	------------------	--	--

1/12/17
P.C. 3257

OVERSEAS CONTINGENTS

ANOTHER ACCOUNT IN

Special Rem. Ledger
 Ledger
 Ledger
 Ledger

RATE OF ASSIGNMENT

20			
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PARTICULARS OF SEPARATION ALLOWANCE

No. **59132**
 Rank **Pte** Promoted Reverted Discharge
 Soldier's Name **A. Cameron**
 Battalion **2nd Bn. "7" Coy**
 Beneficiary **Mrs. Maggie Cameron**
 Relationship **Wife**
 Address

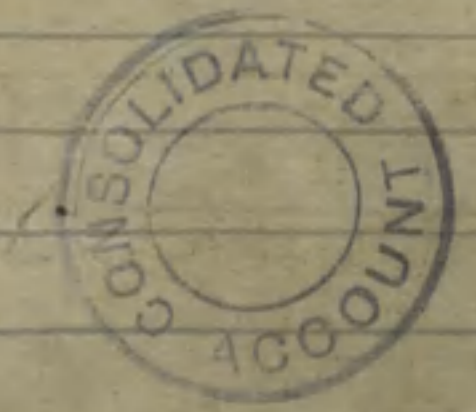
PARTICULARS OF ASSIGNMENT

Name **Mrs M. Cameron (wife)**
 Address **Bobcaygeon Ont.**
 Change of Address
 1
 2
 3
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
1917					02701-a-47
Dec. 31 st 1917		757	640	1397	
Jan ^y 1918	65881	30	20	50	a/c see also account in Spec. Rem. Ledger
Feb	100551	25	20	45	
Mar	107798	25	20	45	
Apr		25	20	45	

A/c Closed 31-3-18
 Bal. \$837⁰⁰ Ret'd per... Ougar
 a/c \$700⁰⁰ Date 21-3-18 P.X. 24-3-18 M.D. 3.
 Clerk J. Goldsmith
 M.R.O. 2-B. 24-3-18

M. F. W. 128
 400M. 6-17-177-38-1141
 L. L. 22220-M. & D. 1958.



SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

M. Cameron, (Wife)
PAYMENTS.

Name of Soldier Cameron, Alex,
Pte

Sheet No. 2.

L. L. Job 89002.—Req. 6213.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916	L 680	20	20
May		H 5390	20	20
June		D 21297	20	20
July		G 6737	20	20
Aug.		H 11779	20	20
Sept.		Q 15478	20	20
Oct.		P 18528	20	20
Nov.		R 21832	20	20
Dec.		A 24655	20	20
Jan.	1917	Q 27920	20	20
Feb.		Q 31209	20	20
March		Q 34503	20	20
April		R 337	20	20
May		Q 3657	20	20
June		S 7044	20	20
July		R 10575	20	20
Aug.		U 12534	20	20
Sept.		T 16671	20	20
Oct.		B 23795	20	T
Nov.		O 25489	20	20
Dec.		B 27120	20	20
Jan.	1918			# 757
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE
SEPARATION ALLOWANCE
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier _____

PAYMENTS.

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

5-11-14

MILITIA AND DEFENCE
SEPARATION ALLOWANCE

Name *W^o Maggie Cameron.*Name of Soldier *Cameron. Alexander.*Address *Bobcaygeon.
Ont.*

Regtl. No.

Rank *Pte.*Corps *"F" Co. 21st Batta.*Relation to Soldier *Wife*

To what Corps belonging

wife, child or mother

when called out

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.		<i>E 2571</i>	<i>20</i>	
Jan.	1915	<i>E 1071</i>	<i>37</i>	
Feb.		<i>E 2977</i>	<i>20</i>	
March		<i>E 4926</i>	<i>20</i>	
Apl.		<i>E 4846</i>	<i>20</i>	<i>20</i>
May		<i>F 6359</i>	<i>20</i>	<i>20</i>
June		<i>A 6502</i>	<i>20</i>	<i>20</i>
July		<i>H. 8086</i>	<i>20</i>	<i>20</i>
Aug.		<i>H 10846</i>	<i>20</i>	<i>20</i>
Sept.		<i>J 9919</i>	<i>20</i>	<i>20</i>
Oct.		<i>L 4366</i>	<i>20</i>	<i>20</i>
Nov.		<i>O 8836</i>	<i>20</i>	<i>20</i>
Dec.		<i>J 19069</i>	<i>20</i>	<i>20</i>
Jan.	1916	<i>W 15717</i>	<i>20</i>	<i>20</i>
Feb.		<i>N 21155</i>	<i>20</i>	<i>20</i>
March		<i>O 24951</i>	<i>20</i>	<i>20</i>



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MILITIA AND DEFENCE
ASSIGNED PAY

M. F. W. 12a.
 60m.-12-15.
 1772-39-819.

OVERSEAS CONTINGENTS

Sheet No. 2.

Mrs. M. Cameron *Wife*
PAYMENTS.

Name of Soldier *Cameron, A.*
P. Coy. 21st Battr.

L. L. Job 89002.-Req. 6213.

Month.	Year.	Cheque No.	Amt.	Remarks.
				<i>\$20⁰⁰</i>
April	1916	7198	20	
May		14274	20	
June		08199	20	
July		27270	20	
Aug.		29180	20	
Sept.		X16457	20	
Oct.		721380	20	
Nov.		24884	20	
Dec.		230568	20	
Jan.	1917	238058	20	
Feb.		243369	20	
March		B49038	20	20 P.
April		X449	20	20 6
May		W 7300	20	580
June		I 73423	20	20 Ba
July		Z 22601	20	Pa
Aug.		E 27602	20	u
Sept.		E 34380	20	s
Oct.		H 46989	20	
Nov.		248605	20	
Dec.		J 34336	20	
Jan.	1918			640
Feb.				
March				
April				
May				
June				
July				

ds. by

sb

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier _____

PAYMENTS.

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

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

(Wife)

To Whom *Mrs. M. Cameron*
Address *Bobcaygeon*
Ont.

By Whom Assigned *Cameron, A.*
Regtl. No. *59132.*
Rank *Pt.*
Corps *F Co., 21st Batt'n.*

Rate *\$20.00*

MAY 1 1915

PAYMENTS SEE ALSO ACCOUNT IN SPEC. REM. LEDGER.

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May		<i>M1436</i>	<i>20 -</i>	
June		<i>R 2733</i>	<i>20 -</i>	
July		<i>R. 4035</i>	<i>20 -</i>	
Aug.		<i>05355</i>	<i>20 -</i>	
Sept.		<i>P6636</i>	<i>20 -</i>	
Oct.		<i>Q8100</i>	<i>20 -</i>	
Nov.		<i>T7577</i>	<i>20 -</i>	
Dec.		<i>U9118</i>	<i>20 -</i>	
Jan.	1916	<i>W8866</i>	<i>20 -</i>	
Feb.		<i>X12356</i>	<i>20 -</i>	
March		<i>Z15664</i>	<i>20 -</i>	

See also Acct. Ledger in Remittance nam.



6637 see Attention Book

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

To Whom *Mrs. M. Cameron*
 Address *Bobcaygeon Ont.*

By Whom Assigned *Cameron, A.*
 Regtl. No. *59132.*
 Rank *Pte.*
 Corps *21st. Battr.*

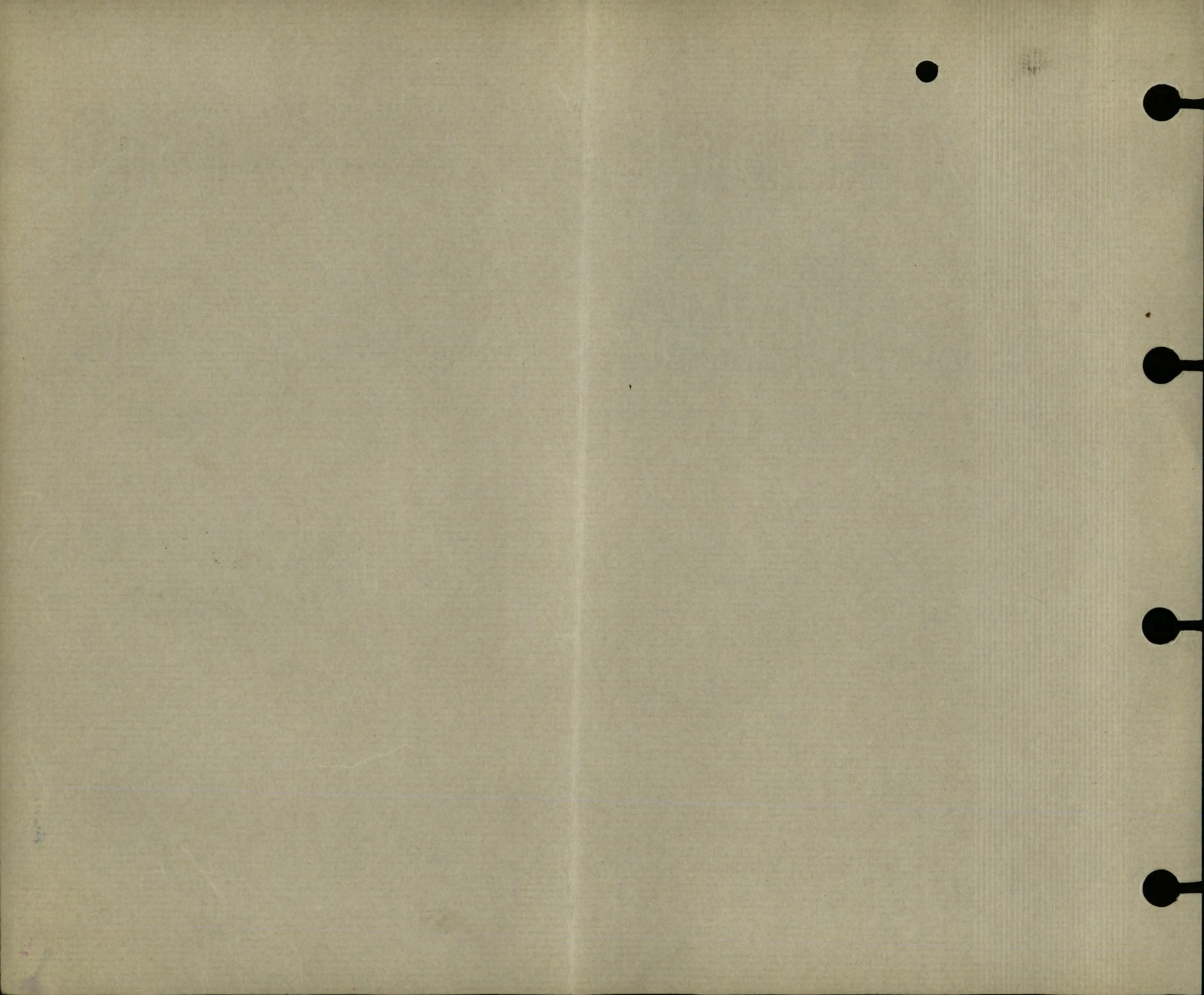
SPECIAL REMITTANCE

Rate *\$10.⁰⁰/_{XX}*
Sched. 210 9¹⁰/₁₆

PAYMENTS ALSO ACCOUNT IN CURRENT LEDGER.

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915 1916			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				<i>Also an acct in current ledger. JH</i>
Oct.				
Nov.		<i>P. 25819</i>	<i>10.00</i>	
Dec.				
Jan.	1916			
Feb.				
March				





POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

6912/139

02701-A-5

E. M. P.

Name **Cameron, Alex.**
Surname

Christian Name

Regimental Number **59132** Rank **Pte.**

Address (in full) **Bobcaygeon, Ont.**

Unit **#3 Cas. Unit**

Original Unit

District where paid **M.D.3**

Mrs M. Cameron

Date of Discharge **3-5-18**

P. D. P. Filing Number **2-117-3**

Rates:—Regimental pay \$ **1.00** per diem: Field Allowance \$ **.10** per diem. Separation Allowance \$ **25.00** per month.

L. I. 22373—M. & D. 8009.

Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Over-payments to be Recovered	Total Amount Paid
	Cheque No. A	Date	Amount 30 days	Cheque No. B	Date	Amount 30 days	Cheque No. C	Date	Amount 31 days		
175 10	2297	4-5-18	58 00	2218	4-6-18	58 00	1983	4-7-18	59 09	01	175 09
1555/1st	D.20531	7 3/19	70 00								
1555/1st	D.20532	7 3/19	30 00								
1044A 2nd	428568	7-3-19	70 00								
1848A 2nd	9403904	26-3-19	30 00								

M. F. W. 127.
60M-6 17.
1772 39-1140.

Remarks: **Deb. Bal. amended I.P.C.**

Bobcaygeon P.O.

Ont

Dec'n No. 6912/139 W. S. G. File No. 02701-a-47
 Award..... days at \$ 1.00 ^{per day} me. \$
 S. A..... months at \$ per mo. \$ \$ 600.00
 Less P, D. P. Credited \$ 175.10
 \$ 424.90
 Less further debit balance \$
 Net due paid as below \$ 424.90

Mrs. M. Cameron,
same address

7-3-19
27-3-19
8/4/19
29-4-19

TO SOLDIER		TO DEPENDENT		Amount	
O	Ag. No	Cn No	Amount	Ag No	Amount
1	1555	20531	70.00	1555 20532	30.00
2	1044	28568	70.00	1836 40390	30.00
3	455B	415634	70.00	1817B 435137	30.00
4	442C	450634	34.90	442C 450635	30.00
5				481607	30.00
6				493192	30.00
Total					

7-3-19
26-3-19
19-4-19
29-4-19

ASL

GEN'L AUDITOR
 Posting checked by *ASL*
 Date *20/4/19*

Surname
Cameron

Christian Name or Names
A.

Reg. No.
59132

Rank
Pte.

Unit
21st Bn.

Co.

Troop

Batty

CO

Hospital

8 Stat. Wimereux

Date of Admission

5-2-17.

Transferred

Wanstead H. Margate

Hosp. 8-2-17

Hosp.

Hosp.

Hosp.

Diagnosis

Cont. LFoot Acc.

(1)
Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

DISPOSITION

Dis. 6.5.17 Date

C.L. 12-2-17 A438

REMARKS

15-2-17 B273

22-9-17 B-1 7

A.M.D. 2 DEPT.

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

10/2

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm

1.

2.

3.

4.

5.

6.

7.

Name Cameron

5-11-14

Date of Embarkation for England

15-5-15

Proceeded to France.

14-9-15

Returned to England.

8-2-17 Gen Sick

Date returned to Canada.

27-2-18

P.R. 2855.

*W.H.D.
1-8-22*

Name

Date of Departure for England

Proceeded to France

Returned to England

Date returned to Canada

F. B. 2335

R. 149.

2345-5m-5/12/16.

Name **CAMERON****Alexander**

Rank

PrivateReg. No. **59132**Unit **21st Battalion**Next of Kin **Canada**

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
5-2-17	8. Stat Hosp Wimereux Cont	Lt Foot	Accid Sev			A438
8-2-17	Wanstead Hosp Margate	Do.		B273		
	8-2-16	Mil. H. Shorncliffe	ams-700	2/17-2		
6-5-17	Discharged		Do	B.17.		263

NAME

Cameron, A. J.

REGT'L No

59132.

RANK AND CORPS

Pte. 21st Bn

H. Q. FILE No. 649-

FOLLOWS

No.

FOLLOWS

CABLE

No.

DATE

NATURE OF CASUALTY

LIST No

HOSPITAL

DATE OF
ADMISSION

REMARKS

A 438

8 Pla. Kimericus

⁴ 5-2-17

Cowl. Lt. Fort. Acc. Ser.

B 273

Wanstead, Margate

8-2-17

" " " " "

B 17

Asc

6-5-17

" " " "

Number, 5, 91, 32, Rank, Pte. ~~2nd~~
Surname, CAMERON
Christian Names, Alexander
Unit, 21st Am. Cav. Inf. Theatre of War, France
Date of Service, 14. 9. 19

Remarks,

Latest Address, . . . Bob Caygeon, Ind.

Roll No. B

Page 2153

21st

Ya 8641 Corp

MAY 19 1921

Ya 43459 Corp

SEP 30 1921

SURNAME.

Cameron

CARD NO. *9-18*

auth. no. 1638²⁷ 3-578³

CHRISTIAN NAMES

Alexander

S.O.S. W. io. 0-3-18.

Part II 20 of 7-5-18.

#3 Dist. Dep.

REGL. No.

59132 RANK

pte.

UNIT

21st

Battn.

FORMER CORPS

nil.

59619. old. no.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Cameron Margaret

RELATIONSHIP TO SOLDIER

wife

ADDRESS

*Bobcaygeon, Ont.
Can.*

COUNTRY OF BIRTH

Scotland Morraiphire

DATE

May 22/875

PLACE OF ATTESTATION

Kingston

DATE

Nov. 5/1914.

sailed from Montreal Per S.S. "Metagama"

R/C. 16-3-18. $\frac{8}{8} \frac{3}{3}$

MARRIED

yes

SINGLE

WIDOWER

TRADE OR CALLING

Laborer.

RELIGION

Presbyterian

DESCRIPTION.

APPARENT AGE

39

YEARS

6

MONTHS

HEIGHT

5

FEET

6

INCHES

CHEST MEASUREMENT

37

INCHES

EXPANSION

3

INCHES

COMPLEXION

Fair

EYES

Blue

HAIR

Sandy.

DISTINGUISHING MARKS

Nil

MEDICAL EXAMINATION.

PLACE

Kingston Can

DATE

May 11/914

No. **619.**
59132 May pay list
 RANK **Pte**

NAME **Cameron A**

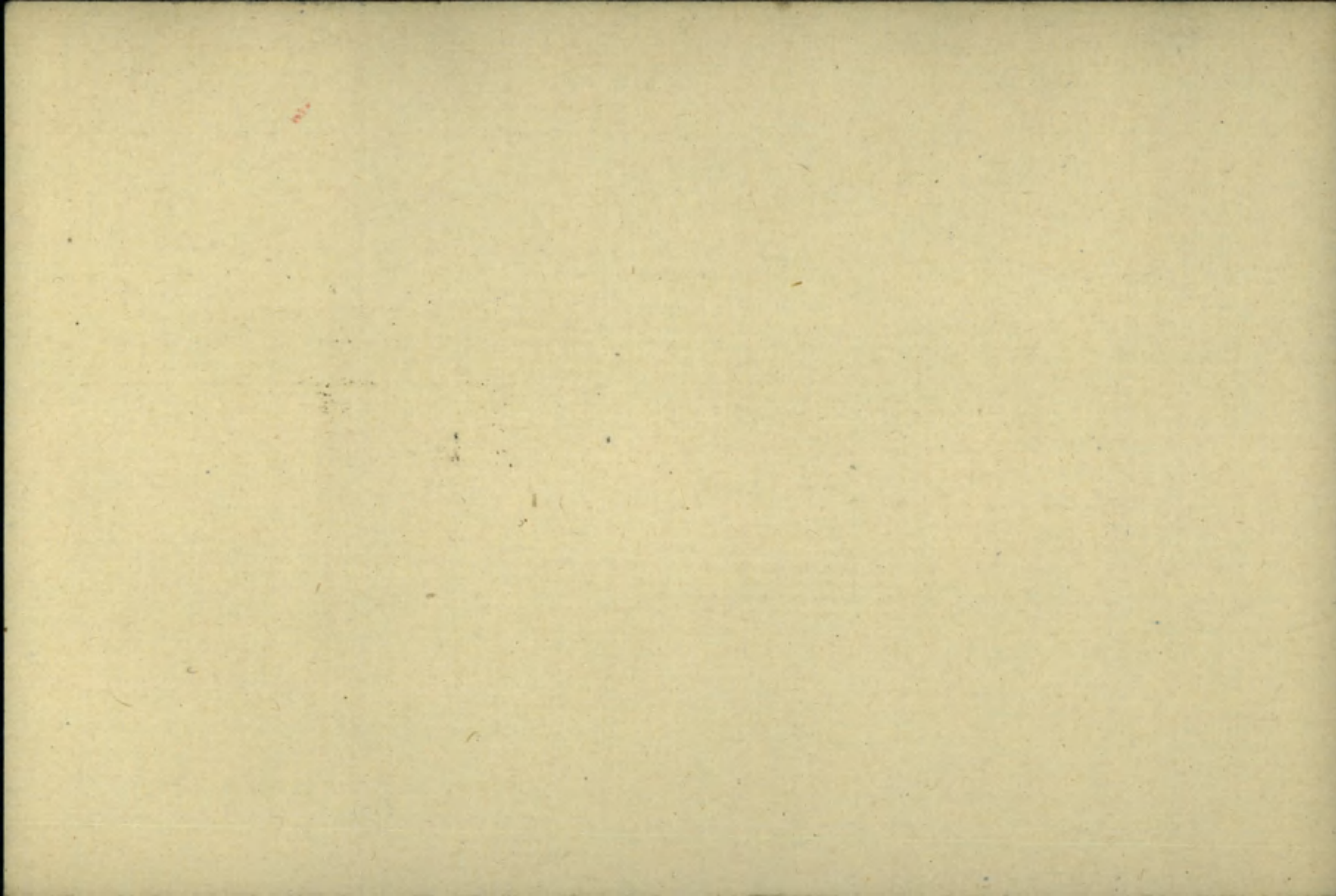
T. O. S.

UNIT **21st Battalion**
(2nd o/s Contingent)

M. D. **3**

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1914 Nov 11	1914 Nov 30	✓		
	Dec	✓		
1915 Jan	1915 Jan	✓	Forfeit 2 dep pay in Jan	Feb Paylist #3 Coy.
	Feb	✓		
	Mar	✓		
	Apr.	✓		
	May	✓		

UNIT SAILED
MAY 20 1915



PROCEEDINGS OF A MEDICAL BOARD.

Dated at Doopond May 22nd 1917

No. 59132 Rank Pre. Name Cameron, G

Local Unit 6th Res Bn Overseas Unit 2nd Bn Age 34/6

Examination held at Doopond

DISABILITY.
Overseas—Local
(scratch one out).

Fractured 2nd & 3rd Metatarsal
L. foot.

PRESENT CONDITION.

Was struck by motor lorry on
Feb. 21-1917. Says he had left
foot fractured. Was in hosp.
11 weeks for treatment in Ramsgate.
Was discharged fit to walk.
This man should be able to
carry on as noted below.

BOARD RECOMMENDS:— 13 T

- 1. Fit for Duty.....
- 2. Fit for duty after.....weeks' physical training.
- 3. Fit for Temporary Base Dutyweeks.
- 4. Fit for Permanent Base Duty.....
- 5. Discharge

Signatures:—

J. E. P. Revell Capt President.
G. W. W. Capt
M. A. Oulton Capt

Members



1917.

For A.D.M.S.

G. W. W.
 MAJOR, C.A.M.C.
 SEAFORD

1. L.P.C. issued, date 21-2-18
2. Authority L.R.O. 3451 - 17-2-18
3. Discharged to Canada
4. Pay Book verified 21-2-18
5. Balance shown on L.P.C. \$ 3-4⁴²
6. Balance shown in Ledger sheet 86⁰⁶
7. Full particulars of entries making difference between 5 and 6 if any.

No.	Date.	Unit & particulars of entries.	Amount.	
			Debit	Credit.
7053	10-1-18	Seaford	19	47
447	28-1-18	✓	4	87
521	18-2-18	✓	7	31
Net Difference \$ <u>31.64</u>			<u>31</u>	<u>64</u>

8. Assigned Pay cancelled. 1/3/18
A.S.M. Poms rendered.
- or
9. Separation Allowance and Assigned Pay continued to dependent in England and transferred to Accounts Branch for payment.

Certified correct

Office i/c Group

NIL
[Signature]
B

1870
1871
1872
1873
1874

Year
1870			
1871			
1872			
1873			
1874			

Rank

Name CAMERON Alexander

Reg'l No 59132.

Unit 21st Bn

If in perm. Corps,
What Unit?

Married or Single Married

Place and Date of Enlistment Kingston, Ont. 5th Nov 1914

Place of Birth Murrayshire, Scot

Name and Address, Next-of-Kin Maggie Cameron. Bobcageon. Ont

Relationship Wife. 30 SEP 1918

Assigned Pay Monthly \$ 20.

Payable to Next of kin.

Relationship

Separation Allowance \$

Payable to

Relationship

Discharge, Date and Place

Reason

Character

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.	
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date							
June 1	June 30	30	1 ⁰⁰	30	30	10	3	436	37	36		1250	20	✓	3250	486	P. Bal. May	
1/7	31/7	31	"	31	31	"	3 10		34	10		10	20	✓	30	896		
								60	60							956	Exchange	
1/8	31/8	31	.	31	31	.	3 10		34	10		730	20		2730	1636		
1/9	30/9	30	.	30	30	.	3		33			535	20		2535	2391		
1/10	31/10	31	.	31	31	.	3 10		34	10		262	20		2262	3539		
1/11	30/11	30	.	30	30	.	3		33			268	20		2268	4571		
1/12	31/12	31	.	31	31	.	3 10		34	10		1333	20		3333	4648		
1916																		
Jan 1	Jan 31	31	.	31	31	.	3 10		34	10		784	20		2784	5274		
1/2/16	29/2/16	29	.	29	29	.	2 90		31	90		524	20		2524	5940		
1/3/16	31/3/16	31	.	31	31	.	3 10		34	10		262	20		2524	6826		
					305				3050	4963	46		7210	200		27210	6826	Adjustment of 10 ⁶ error Sept/15 made May 1916.

Carried forward to
Large ledger sheet

5. He is in possession of the following number of G.C. badges (if the man is a N.C.O. and enlisted prior to 1st July, 1881, the number he would have been entitled to had he not been promoted should be stated).

Is it probable that he will be entitled to another good conduct badge before the confirmation of these proceedings?

Classification for service, or proficiency pay... .. Class

6. Campaigns, Medals and Decorations

France 17 months

Certificate of education

7. His accounts are correctly balanced, and I have impartially inquired into all matters brought before me in accordance with Regulations.

(Place) _____

(Date) _____ Commanding _____ Battn. _____ Regiment.

8. *Certificate to be signed by the soldier on discharge.*

I hereby acknowledge that I have received all my pay and allowances (including clothing allowance), and all just demands up to the present date, subject to the reservations of the claims noted on the 3rd page.

(Place) _____ (Signature of Soldier.)

(Date) _____ (Signature of Witness.)

(When a soldier is absent through illness or any other cause, and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned should be attached here.)

9. *Additional certificate in the case of a soldier who takes his discharge at his own request.*

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

(Signature of Soldier.)

10. *Statement of service.*

Service towards engagement to _____ (the date to which the record of service is completed) _____ years _____ days.

Further service " " _____ (the date of confirmation of discharge) " "

Total " "

11. *Confirmation of discharge.*

The discharge of the above-named man is hereby confirmed for _____ (date)

(Place) _____ Signature _____

(Date) _____

Commanding officers (or the Paymaster if at Netley) will issue to every discharged soldier whose claim to pension, either on account of service or disability, is to be brought under the consideration of the Chelsea Board, a memorandum for his guidance on Army Form D. 401, and will at the same time transmit to the Secretary, Royal Hospital Chelsea, a descriptive return of the man on Army Form D. 400.

RESERVATIONS REFERRED TO AT PARA. 8.

(To be signed by the soldier. When there are none, it is to be so stated and signed by the soldier.)

OPINION OF THE MEDICAL BOARD—(Continued).

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

Category "E". 1 Not due to service.

2. Disability due to service.

Before signing the President of the Medical Board will read the certificate signed by the soldier, to the soldier, and if no change is indicated will initial the certificate.

M. P. Logan Capt. AMC. President.

PLACE Kingston, Ont.

M. P. Logan Capt. AMC. Members.

DATE April 30th/18.

APPROVED BY

APPROVED BY

M. P. Logan Capt. AMC. For Assistant Director of Medical Services.

Director-General of Medical Services.

DATE MAY 2 - 1918

DATE

TO BE COMPLETED WHEN TREATMENT IS REFUSED

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

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

President.

PLACE

Members.

DATE

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 soldier 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 soldier's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the soldier concerned, from witnesses, or from documents.
4. Special care is required in answering question 13. Please read the questions carefully. All questions must be answered.
5. If space provided under any sections is insufficient use blank space, page 4 or add another sheet. Such entries or 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 8, 9 and 10 be communicated to the soldier, 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 Fort Henry.

DATE Apr. 30/18.

1. 1 (a) Unit # 3 Cas. Unit. (b) Regimental No. 59132. (c) Rank Pte.

(d) Surname Cameron. (e) Christian name Alexander.

2. Age last birthday 55. Date of birth 22 May 1862.

3. Enlisted at Lindsay, Ont. on Oct. 1914.

4. Personal description:-

(a) Height 5' 6 1/2". (b) Weight 150. (c) Complexion Fair.

(d) Colour of hair Brown. (e) Colour of eyes Blue. (f) Identification marks.

Scar over right eye.

5. Address after discharge (for the use of the Board of Pension Commissioners)

Bobcageon Ont.

6. Former trade or occupation Laborer.

7. (a) Service

Years Days

21st. Bn. # 3 Cas. Unit.

From Nov. 1914. Mar. 1918.

To Mar. 1918. Date.

(b) Has he been overseas? France. 8. Original disease or disability 1. Overage. 2 Pain from fracture of left foot.

(a) Date of origin 1. N/A. 2 Feb. 1917. (b) Place of origin 1. N/A. 2 France.

(c) Cause* 1. N/A. 2. Struck by wheel of truck breaking bones of arch of left foot - he says.

(d) Present disease or disability 1. Overage. 2 Contusion of left foot.

9. Present condition (a) (Important to be a full description of the present disabling condition or conditions only.) "History" must be recorded in Section 10.

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

SUBJECTIVE - Says he is lame on left foot if he does a walk a mile in length. Also this foot pains him during wet weather. otherwise man has no complaints.

OBJECTIVE - Man looks age stated 55. Lungs & Heart negative. X-Ray report shows no bony lesion of left foot.

9. Present condition.—(Continued.)

This condition possibly has been a sprain.
He walks lame in this foot.

This condition prevents this man from doing heavy manual
labor any work that would entail much walkign or heavy
work preformed on standing.

(b) Are the following systems normal? If not, briefly state abnormality.

Nervous. **Neg.** Digestive. **Neg.** Respiratory. **Neg.** Cardiac. **Neg.**
Genito-Urinary. **Neg.** Skin, Middle Ear, Eye or any other part. **Neg.**

10. History: (a) of Condition referred to in "a" section 9.

Motor truck struck him on back of leg of leg, threw him on his
face and he says broke two bones in his foot. He has pain in
this foot he says every since aggravated by exerise or damp
weather.

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

Nil.

11. If the disabling condition had its origin before enlistment, has it been aggravated on service? **N/A.**

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

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

13. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more
than one? **1. N/A. 2. At least 6 mos.**

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

Hospital England.

OPINION OF THE MEDICAL BOARD

14. (Continued).

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

No.

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

17. Recommendations

**Fit for Category "E". 1 Not due to service (average. 2 Yes
(Injury to foot).**

A. Maasveld Capt' Ame
Medical Officer by whom the case is brought forward.

STATEMENT OF THE SOLDIER.

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

A. Cameron Signature of soldier examinee.

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 criticized.

Yes.

11. If the disabling condition had its origin before enlistment, has it been aggravated on service? **N/A.**

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

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

13. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more
than one? **1. N/A. 2. At least 6 mos.**

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

Hospital England.

19. Is the soldier 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 "E".**

20. It is certified that the soldier

(a) ~~Does not require treatment.~~ (Give the nature of the condition and of the treatment required and its probable duration).

(b) Does not require treatment.

(c) Should pass under his own control.

(d) ~~Should pass under his own control.~~
(Strike out condition not applicable).

Proceedings of the Pensions and Claims Board on the Soldier mentioned in Part I

The Pensions and Claims Board, Canadian Expeditionary Force, assembled at

on the day of 1918

Members of the Board:—

The Board having considered the evidence of the soldier marginally named, together with the documents submitted, recommend:—

14. THE ENTIRE DISABILITY.—Without regard to his regular occupation, to what extent is his capacity lessened at present in securing a full livelihood in the general market for unskilled labour?

16. THE PENSIONABLE INABILITY.—(See Part I, (a).) Information on a soldier's disability during his service is to be included in the statement as to his disability as a result of his service.

17. Permanence of the Pensionable Disability.—Estimated next above in (16).

18. If an operation was advised and decided on, consider the extent to which the disability is likely to be aggravated.

19. Remarks.

20. Recommendation.—(a) Fit for duty; NO. (b) Fit for limited duty; Yes, Bill, not likely to be raised in 6 months. (c) Invalid to Canada; NO. (d) Discharge from service as permanently unfit; NO.

Dated at this day of 1918

Signatures of the Board: J.C. Wallace, Capt. Sgd., J. McKee, Capt. Sgd., J.A. Gillies, Capt. Sgd., President.

Reserved for M.H.C.

Regt. No. 59132 Rank Pte. Surname CAMERON Christian Name ALEXANDER Unit or Corps—(a) Overseas from United Kingdom 21st Batt. (b) In United Kingdom 6th Res. Born at—Town ROTHES County or Province MORAYSHIRE Country SCOTLAND Date of Birth—Day 22nd Month May Year 1864 Age 55 yrs 9 months. Joined at KINGSTON O.M. Date 5th Novr. 1914 Former Trade or Occupation Laborer. Permanent marks or peculiarities that will serve for future identification:—

Small scars over rt eye and on forehead. Scar index finger left hand. One vacc. mark on each arm.

Height—feet 5 inches 6 Colour of eyes Blue Signature of Soldier (for identification purposes) Alex Cameron

Medical Report.

The answers to the questions below are to be filled in by the Officer in medical charge of the case. He will carefully discriminate between the soldier's unsupported statements and the evidence as recorded in the medical or other military documents bearing on the case. He will plainly state the existence of any of the disability prior to the soldier joining for the present war.

1. DISABILITY (State the actual disabling conditions as distinguished from the diseases or injuries from which they resulted). (Follow the official nomenclature as far as possible.)

Disabilities Group (a). DEBILITY. PAINS AND WEAKNESS LEFT FOOT. Disabilities Group (b). Disabilities Group (c).

2. CAUSE OF DISABILITY. (Follow the official nomenclature in stating the disease or injury.)

Table with 3 columns: Disease or injury to which the disability is due, Place of origin, Date of origin. (i.) As to Group (a) above. OLD AGE. (ii.) As to Group (b) above. FRACTURE 2nd and 3rd metatarsals left foot. France Feb 1914. (iii.) As to Group (c) above.

NOTE.—By Active Service is meant Service with the Colours in Canada, United Kingdom, or elsewhere during the present war (since August 4th, 1914).

3. Is the disability due to disease contracted or injuries received prior to Active Service? (i.) As to Group (a) above? Yes If yes, has Active Service aggravated it? Yes (ii.) As to Group (b) above? - If yes, has Active Service aggravated it? (iii.) As to Group (c) above? - If yes, has Active Service aggravated it?

4. Is the disability due to disease contracted or injuries received while on Active Service— (i.) As to Group (a) above? - (ii.) As to Group (b) above? Yes. (iii.) As to Group (c) above? -

5. If a cause of disability was an injury received on Active Service, was it received—

(i.) While on duty? **Yes**

(ii.) While off duty? **No**

(iii.) Was a Court of Inquiry held? **No**

(iv.) Where? **Not applicable.**

(v.) Opinion of the Court? **No**

6. HISTORY OF THE CASE. (State concisely the essential points of the history, noting the entries made on the Medical History Sheet and other records.)

Had metatarsal bones of left foot broken in France while driving transport. Invalided to England 8-2-17, was in Mansted Hosp. 78 days, discharged with fractures united and able to walk, still has pain and weakness and walks with slight limp.

7. PRESENT CONDITION. (Give previous and present weight if likely to indicate progress of disability.)

Was in France 17 months, 56 years old. Shortness of breath, but no signs of heart trouble. Respiratory, digestive and excretory systems normal. Looks well.

8. OPERATION. (i.) Was one performed? **No.**

(ii.) If so, state what.

(iii.) Was one advised and declined? **No.**

NOTE.—Loss of teeth on or immediately after Active Service should be attributed thereto unless there is evidence to the contrary.

9. (i.) Is there loss or decay of teeth attributable to Active Service? **Yes**

(ii.) If so, describe. **Drawn by Dentist.**

10. DO YOU RECOMMEND:—

(a) Fit for duty? **No**

(b) Fit for base duty? **Yes**

(c) Invalid to Canada? **No Bill Not likely to be raised in 6 mos.**

(d) Discharge from the Service as permanently unfit? **No.**

Date of Report **18-2-18** 191**8** Signed **E. C. MICK, Capt. CAMC.**

Station **Seaford** Officer in medical charge of case.

I have satisfied myself of the general accuracy of the above Report, and concur therein *except

T. F. GRAHAM, CAPT **Officer in Charge of Hospital** Strike out one of these.

Dated at **Seaford** Station, on **Feb. 18** 191**8**

* Delete if inapplicable.

Proceedings of a Medical Board on the Soldier mentioned in Part I.

Clear and decisive answers are to be given to all questions. Such terms as "may," "perhaps," "probably," "possibly," are not to be employed. Disability due to causes arising on Active Service is to be clearly shown in order that the Pensions Authorities may deal with the case properly.

11. Is the disability fully indicated in Part I. (1)? **yes.**

If not, indicate it.

12. Is the cause of the disability, fully indicated in Part I. (2)? **yes.**

If not, indicate it.

13. Was the disability caused or aggravated by— (a) Negligence of the Soldier { Caused? **no.** Aggravated? **no.** } (b) Misconduct of the Soldier { Caused? **no.** Aggravated? **no.** }

14. THE ENTIRE DISABILITY.—Without regard to his regular occupation, to what extent is his capacity lessened at present for earning a full livelihood in the general market for untrained labour? (Estimate at none, 10%, 20%, 30%, 40%, 50%, 60%, 70%, 80%, 90%, or 100%.)

not appl.

15. THE PENSIONABLE DISABILITY—(see Part I. (3). Aggravation on Active Service of a disability existing previous to joining is to be included in the estimate.)

What part of the entire disability estimated next above in (14) is due to causes arising during Active Service? (Estimate at none, 1/3, 2/3, 3/4, or all.)

not appl.

16. Permanency of the Pensionable Disability estimated next above in (15).

(i.) Is it permanent?

not appl.

(ii.) If not permanent, what is its probable minimum duration (in months)?

17. If an operation was advised and declined, do you consider the refusal to have been unreasonable? **not appl.**

18. Remarks.

In question 3 Group vi answer should be "no".

" " 4 " ii " " " "yes".

19. Recommendation:—(a) Fit for duty? **NO.**

(b) Fit for base duty? **yes, Bill not likely to be raised in 6 months.**

(c) Invalid to Canada? **no.**

(d) Discharge from service as permanently unfit? **no.**

Classification for the Military Hospitals Commission.

Date of Board **19-2-18.**

Sgd. **N.C. Wallace, Capt. President.**
J. McKee, Capt.
J.Z. Gillies, Capt.

Station **Seaford.**

Approved **19-2-18.**

A.D.M.S. **T. F. Graham**
Station **for A.D.M.S. Canadian**

Dated at **Seaford, Sussex.**

List of Discharge Documents.

Reg. Conduct Sheet, Militia form B. 263.	Attestation Paper, Militia Form B. 235.
Squadron } Battery } Conduct Sheet, " B. 263a. Company }	Proceedings on Discharge " B. 218.
Copies of Convictions, by C. P. in MS.	In the case of recruits who are rejected on final approval, the discharge documents will consist of (a) Proceedings on Discharge. (b) Attestation. (c) Medical History Sheet (in the event of such having been prepared.)
Med. Hist. Sheet, Militia Form B. 313	
Medical Report for Invalid* " B. 227.	
Statement of Man's Account on Transfer and Last Pay Certificate, " D. 877.	

*Only if discharged "Medically unfit."

N. B.—In the case of a man discharged by purchase, the date and number of Deposit Receipt with amount of same is to be noted hereon.

This space to be for numbers.

Proceedings on Discharge.

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

No.	59132	H
Rank	Private	
Name	Cameron Alexander	
<small>NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.</small>		
Corps (Squadron, Battery or Company)	No 3 Casualty Unit	
Date of Discharge	3-5-18	
Place of Discharge	Kingston Ont	
1. DESCRIPTION AT THE TIME OF DISCHARGE.		
Age.....	41.....years.....10.....months.	Descriptive Marks
Height.....	5.....feet.....6.....inches.	
Complexion	Fair	
Eyes	Blue	
Hair	Sandy	
Trade	Labourer	
Intended place of residence	Lindsay Ont	
<small>(To be given as fully as practicable.)</small>		
2. The above-named man is discharged in consequence of		
Being medically unfit 3rd. 87-2-372		
<small>N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.</small>		
3. Conduct and character while in the service have been, according to the records, etc.		
Very good mke		
<small>N.B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldier and the Officer Commanding his Squadron, Battery or Company:</small>		
4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)		
Labourer		

M. F. B. 218.
25m.—11-15.
H. Q. 1772-39-113.

(OVER)

E/R J.

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

nil

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

6. Medals and Decorations.....

Service in France,
England and Canada

To be copied by the Commanding Officer on to the parchment Discharge Certificate.

7. His account is correctly balanced, and signed by the Officer Commanding his Company. (Squadron or Battery), and I have impartially enquired into all matters brought before me in accordance with Regulations.

(Place) Kingston

(Date) 3-5-18

W. H. S. Capt. & Adj. District Depot No. 3
Commanding

8. Certificate to be signed by the Soldier on Discharge

I hereby acknowledge that I received all my Pay, Allowances and Clothing, and all just demands, up to the present date, subject to the reservations of the claims noted on the third page.

(Place) Kingston A. Cameron (Signature of Soldier.)

(Date) 3-5-18 W. H. S. (Signature of Witness.)

When a soldier is absent through illness or any other cause and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned, should be attached here.

9. Additional Certificate in the case of a Soldier who takes his discharge on his own request.

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

A. Cameron (Signature of Soldier.)

10. Statement of Service.

Service toward Engagement to.....(the date to which the Record of Service is completed) 3 years 25 days.

Total 3 years 25 days.

11. Confirmation of Discharge.

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

(Place) Kingston

(Date) 3-5-18

W. H. S. District Depot No. 3
(Signature)

Reservations referred to at Para. 8.

(To be signed by the soldier. When there are none, it is to be so stated, and signed by the soldier.)

Has not received subsistence
while 21 day pass
A. Cameron