6K
Dec 16

"C" Coy.
Fenelon Falls

ATTESTATION - PAPER.

No. 725543.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.) ORIGINAL

1. What is your surname?	Dennis
1a. What are your Christian names?	Gordon
1b. What is your present address?	Fenelon Falls. Ont.
2. In what Town, Township or Parish, and in what Country were you born?	Fenelon Falls Ont.
3. What is the name of your next-of kin?	Annie Dennis
4. What is the address of your next-of-kin?	P.O. Fenelon Falls. Ont. Canada
4a. What is the relationship of your next-of-kin?	Mother
5. What is the date of your birth?	Jan 30th 1898
6. What is your Trade or Calling?	Laborer. 29
7. Are you married?	No
8. Are you willing to be vaccinated or re-vaccinated and inoculated?	Yes.
9. Do you now belong to the Active Militia?	No
10. Have you ever served in any Military Force? If so, state particulars of former Service.	45th Regt. Volunteers 1 year.
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, Gordon Dennis, 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.

Gordon Dennis (Signature of Recruit)

Date 15th December 1915. Wm McCampbell (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Gordon Dennis, 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.

Gordon Dennis (Signature of Recruit)

Date 15th December 1915. Wm McCampbell (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 Fenelon Falls this 31st day of December 1915.

Wm McArthur (Signature of Justice)

M. F W. 23.
200 M.—11-15.
H. Q. 1772-39-841.

6

Description of Gordon Dennis on Enlistment.

Apparent Age 17 years 10 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft 6½ ins.

Chest measurement: Girth when fully expanded 33½ ins.
Range of expansion 2½ ins.

Complexion Dark

Eyes Blue

Hair Black

Religious denominations:
- Church of England
- Presbyterian
- Methodist
- Baptist or Congregationalist
- Roman Catholic R.C.
- Jewish
- Other denominations (Denomination to be stated.)

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

Scar on inside front left arm

CERTIFICATE OF MEDICAL EXAMINATION.

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

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

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

Date Dec. 15 1915.

Place Lindsay

J. McCullock Capt.
H. Boyd. Medical Officer.
Medical Officer
109th Overseas Battalion, C. E. F.

*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.

Gordon Dennis 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.

Lt. Col. (Signature of Officer)
O.C. 109th Overseas Battalion, C. E. F.

Date JAN 12 1916 191

C.E.F.

DENNIS, GORDON, 725543 109 BN 11451

DEMOB

725543 D258 ORIGINAL TO A.H.Q. C Coy Fenelon Falls

MEDICAL HISTORY SHEET. ORIGINAL

Surname: Dennis Christian Name: Gordon

Examined on 16 day of December 1915 at Lindsay

Birthplace: City or Town Fenelon Falls; County Ontario

Apparent age 17 10/12 years

Trade or occupation Laborer

Height 5 Feet 6 1/2 Inches.

Weight 115 Lbs.

Chest measurement: Minimum 31 inches. Maximum expansion 33 1/2 inches.

Physical development Good

Small-Pox Marks None

Vaccination Marks: Arm Right None Left One; Number One.

When Vaccinated last March 29th 1916.

(a) Marks indicating congenital peculiarities or previous disease None

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

D258

Approved by J. McCullock Capt. Medical Officer M.O. 109th Overseas Battalion, C. E. F.

Date	Fit or Unfit	Examined for Re-engagement,	
7/5/18	B2	L.H. Roberts Capt	M.O.
4/4/18	B2	J.S. Munro	M.O.

9 APR 1918

Date	Result	Vaccinations.	
29.3.16.	Nil	J.McCullock.	M.O.
3.4.16	Good	J.McCullock.	M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.	
29/4/16	Good	J.McCullock	M.O.
8/5/16	Good	J.McCullock	M.O.
16/5/16	Good	J.McCullock	M.O.
T.A.B. 29.9.16 9/11/18		C.H.O. Board	

Enlisted on 15th day of December 191 at Lindsay

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	109th Batt C.E.F.	725543.		15.12.15.
Transferred to	21st Bn			

CANADIAN

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
Derrenut Bks	24/4/18	neurasthenia	T.S.O. George Cooper Capt
Summerdale	26-11-18	neurasthenia + D.A.H.	B.1 J.Miller Capt cause
Barrufield Ont.	18-1-19	Neurasthenia Chr. Bronchitis	C1 [illegible] Capt cause

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.

M. F. B. 313.

50M—8-14. H. Q. 1772—39—439.

Surname Dennis Christian Name Gordon

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital. Day	Month	Year	Dates of Discharge from Hospital. Day	Month	Year	DISEASE.	Number of days in Hospital.	Remarks on nature of the disease: how induced: if mild or severe: if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
No 12 CAN. GENERAL HOSPITAL											
		21	6	18	29	10	18	V. D. 1.	131	Soft mitral systolic murmur, not transmitted. Heart not enlarged. Opx. heat to normal. Sensation normal. Pulse. normal rate and rhythm.	[illegible] Capt. D.O.

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

CANADIAN EXPEDITIONARY FORCE.

/HVW

LAST PAY CERTIFICATE ORIGINAL

Regimental No. 725543 Rank Pte. Name Dennis, G.
(Surname first)

Unit C. F. C. who was* Discharged

on January 23rd 191 9, to Category "CI"
*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1/1/19 to 23/1/19 191...
the inclusive date of transfer or discharge.

	Dr.		Cr.	
Bal. Dr. or Cr. from prev. month L.P.C.			16	09
Regimental Pay 23 days at $ 1 c			23	00
Field Allowance 23 days at $ c 10			2	30
Separation Allowance				
Clothing Allowance			35	00
Post Discharge Pay				
*Other Credits D.O. 257 Subs.			12	00
Advances Cheque #2341	15	00		
Separation Allowance and Assigned Pay Cheque No.				
*Other Charges				
Balance on ~~transfer or on~~ discharge, cheque No. 2365	73	39		
Total	88	39	88	39

*Give particulars.

A monthly stoppage of $ 15.00 (†) has (‡) been paid on account of
Assigned Pay for the month of December 191 8
and Separation Allce. for month of 191
(to) Assignee Mrs. A. Dennis,
(Address) Fenelon Falls, 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 ..... married or single .....
(2) Separation Allowance, entitled or not NO (3) Reason for discharge .....
(4) Authority for discharge ~~[illegible]~~ 3DD. 3-D-362.

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 22nd, 1919.

Place Kingston, Ont.

W. Peters 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.

CREDITS, ADVANCES, Etc.

Credits, Advances, Forfeitures, Issues on Repayment, etc., since issue of this L.P.C. are to be entered hereunder:

Date	Place	Cheque No. A.R. No. or Other Particulars.	AMOUNT				Signature of Officer Making Payment.
			Dr.		Cr.		

To be made out in duplicate.

H.Q. 54-21-23-53

DUPLICATE

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 ....725543....

(3) Full Name of Soldier....Gordon Samuel Abraham Dennis....

(4) Place of Birth....Fenelon Falls, Ontario, Canada....

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

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

(b) Present Postal Address....Nil....

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

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

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

Also their names and ages....Nil....

M. F. W. 67.

300M.—5-16.
1772 39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive? Yes

If so, state name and address Lincoln Dennis, Fenelon Falls, Ontario Canada

(10) Is your Mother alive? Yes

If so, state name and address Annie Dennis, Fenelon Falls, Ontario Canada

(11) If your Mother is a widow No

Are you her sole support, or not? Yes

(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.

$30.00 per month

(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.

Nil

(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.

Yes

(15) Are you insured? Yes

If so, in what Company? Metropolitan Life Assoc.

Have you made arrangements for payment of your Insurance premium Yes

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

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

Date 6th July 1916

[redacted].A.D.C.5009.
20M-19-2[redacted].

3

125543

Pte Dennis G.S.

A.A.A.

DENTAL CERTIFICATE.

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

Date of Examination.	Present Dental Condition.	In case of loss or decay of teeth. Is the loss due to wounds, injury or disease directly attributed to Active Service?	Has he ever declined Dental Treatment.	Recommendation.
	Nil	—	—	—

H Cowan
Capt. A.D.C.

Form R. 149.

Name DENNIS Gordon. Rank PTE. Reg. No. 725543

Unit CFC. 54 Bdy.

Next of Kin Canada.

Date		Movement	Place	Casualty	List No.	Notified N/K O.		W.O. List
22.6	18.	W. 12 BGH. B'ham	Fm	SDH.	C			20205
29.10	18.	Disc		"	C359			90140

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

Form R. 149.
7106—250m—7/2/17.

Gordon

Name DENNIS *Rank* Pte. *Reg. No.* 725543

Unit 20th Bn.

Next of Kin Canada.

Date 1917.	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
17-5	7 G.H.St.Omer.		Mumps slt.	A518		
18-6	7 Con.Dep. Boulgoen.		do.	A544		
21-6	10 Con.Dep.Ecault.		Debility after do.	A545		
31-7	Disch. 3 Rest Camp.		do	A579		

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

Number 125543 Rank Pte

Surname DENNIS

Christian Name Gordon

Units 20th Bn. C Inf Theatre of War France

Date of Service 5.10.16

Remarks

Latest Address Fenelon Falls, Ont.

Roll No.

200m.-2-21.M.

Page 20820

AND HOW LONG

DISEASE OR INJURY .....

OPERATIONS.....

RESULT OF OPERATIONS.....

(A) DATE OF ARRIVAL AT HOSPITAL AS AN ADMISSION.....

(B) AS A TRANSFER (STATE WHERE FROM).....
NAME OF HOSPITAL

DATE OF DISCHARGE TO UNIT..... IN CAT

DATE OF DISCHARGE AS AN INVALID.....

DATE OF DEATH.....

DATE OF TRANSFER (STATE WHERE TO).....
NAME OF HOSPITAL

OTHER INDEPENDENT CONDITIONS DIAGNOSED.....

NEXT OF KIN..... ADDRESS.....

..... HOSPITAL.....

* CROSS O

M. F. W. 142.

1772—39—1171.
50m.—2-19.

REGT'L. No. 725543.

H. Q. FILE No. 649

NAME Dennis G.

RANK AND CORPS Pte 20th Bn.

FOLLOWS

No.

FOLLOWS

CABLE		NATURE OF CASUALTY
No.	Date	

L. L. 18950—M. & D. 7789

M. F. W. 42—30M.—4-17.
H. Q. 1772-39-893.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
a518	7 Gen St Omer	17-5-17	Mumps Slt
a544.	to 7 Conv. Depot B'logne	18-6-17	Mumps
a545.	to 10 Conv. Depot Calais	21-6-17	Debility after mumps
a579.	Disch. 3 Rest Camp Marlboro	31-7-17	Debility post Mumps
C247 1	13 Can. Gen. Bramshott	22-6-18	V.D. Pt.
C3590	12 " " " Disch.	29-10-18	V.D. Pt.

Reg. No. 723343 Name Dennis G. S

Rank Pte Corps S. L. R. Age 22 Service C 4/12 E 2/12 F 9/12

Ledger No. Serial No.

HOSPITALS	DATE	DIAGNOSIS
C. M. C. H. Toronto	27-3-19	Neurasthenia
Trans Danville	31-5-19	

P. T. O.

HOSPITALS	DATE	DIAGNOSIS

M. F. W. 2553.
75M.—9-19.
1772-39-1332.

Form DMS 1401.

B 11/11

12 Gen Hos HOSPITAL.

A. & D. CARD

AT

A. & D. No. 12 S&D PL. OF ACTION

RANK Pte REG. No. 425543 UNIT C. F. C. 114th Bn. SICK OR WOUNDED

NAME Dennis G. B. AGE 21 RELIGION R. C.

PLACE IN HOSPITAL Ward 8. A X

DIAGNOSIS V. D. H.

ADMITTED 21. 6. 18 FROM

DISCHARGED OCT 29 1918 TO Home

TRANSFERRED

SERVICE AT HOME 30/12. IN FIELD

RESULTS 1/12.

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

P.T.O.

REMARKS.

Form D.M.S. 1300.
8137—50m—28/2/17.

Surname	Christian Name or Names	Reg. No.
Dennis.	G.	725543.

Rank	Unit	Co.	Troop	Batty.
Pte.	20th. Bn.	C. L. C. (54D)		

Hospital	Date of Admission
7. Gen. St Omer.	17-5-17.

Transferred		
7 Conv Depot B'logne	Hosp.	18 6 17
10 Conv Dep Etaples	Hosp.	21 6 17
12 C. G. Bramshott	Hosp.	22-6-18
	Hosp.	

Diagnosis Mumps. R

(1) Later Diagnosis (if changed) Debility after Mumps R. add.

(2) V.D.H. 40

(3)

Additional Diagnosis: if more than one state present

DISPOSITION	Date
Dis to 3 Rest. Camp.	31. 7. 17

REMARKS

Dis 29-10-18

C. L. 24-5-17. A.518.
" 26. 6. 17 A 544
28. 6. 17 A 545
16. 8. 17 A 579
26-6-18 C/247.
5-9-18 C 359

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.		

*Name Dennis, Gordon Rank Pte Regtl. No. 925543

Original unit 109 Bn Present unit C.L.C. M. or S. Age 21 Religion R.C. Fyle Depot 3-D-362 Ref. H.Q.

Port, ship, and date of arrival St John Conician 25-12-18

Next of kin (R.) Freedom Falls Ont

Address on leave same

Address on discharge

Transportation issued Yes No Date Character on discharge

Previous occupation Laborer Date and place of enlistment 15-12-15 Lindsay

Diagnosis Date of Medical Boards

Date.	Remarks	Pt. 2 Order No.
31-12-18.	T.O.S. Casualty Company No. 3 District Depot. from O/S.	
	for Disposal, Part Two D.O. 257 Eff. 27-12-18.	
	Leave to Lab. 27-12-18 to 10-1-19.	

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

(over)

Date.	Remarks.	Pt. 2 Order No.

M.F.W. 192
150M—6-18.
1772-39-1243.

R—122

LTR

Rank | Name DENNIS Gordon | Reg'l No. 725543

Unit 109th, Bn. | If in perm. Corps, What Unit? | Married or Single Single.

Place and Date of Enlistment Fenelon Falls, 15th, December, 1915 | Place of Birth Fenelon Falls, Ont.

Name and Address, Next-of-Kin Annie Dennis.
P.O. Fenelon Falls, Ontario, Canada. | Relationship Mother.

Assigned Pay Monthly $ | Payable to | Relationship

Separation Allowance $ | Payable to | Relationship

Discharge, Date and Place | Reason | Character

N/E. R.B. No. 3,889
File R.L.
Category Lanc OR.

A.F.B. 103 CHECKED 17 OCT 1916

H. W. & V., Ld.—7165-16.

Report. Date.	Report. From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS. Taken from Official Documents.
		Arrived in England per H.M.T. 2810 31-7-16			
5-10-16	109th Bn	S.O.S. to 20th Battn	Bramshott	5-10-16	Pte II D0.279.
11-10-16	20th "	T.O.S. from 109th Bn	Field	6-10-16	" II 55.
28-11-16	"	attch 4th fld Coy Engrs	"	12-11-16	" 71.
2-12-16	2nd Div Engrs	do	do	12-11-16	" 64
31.12.16	"	Ceases to be attch'd from 20th Bn	"	16.12.16	" 71
3.1.17	20th Bn	do. do.	"	16.12.16	" 1
3-3-17	"	attch 4th C.I. Bde French Mortar Batty	do	29-1-17	" 18.
24.5.17	"	Adm. # 7 Gen. hosp.	St. Omer	17.5.17	C.L. A518 Mumps Slt
26-6-17	"	To 7 Cont. Depot	Boulogne	18-6-17	" 544 "

Report. Date.	Report. From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
28-6-17	20th BN.	To No 10 Convalescent Depot	E'caust	21-6-17	C.L.A 545 DEBILITY after MUMPS
16-8-17	—"—	Disch. 3 Rest Camp.	Marlboro	31-7-17	C.L.A.579 —"—
10.10.17	—"—	Ceases att. 4th T.M.B.	Field	16.5.17	P.II O-69
13.10.17	—"—	Class "P.B." & S.O.S. to 2nd. Cdn. Div. Amp. Coy.	Pte. "	1.10.17	— 70
18.10.17.	2nd D.E.C.	T.O.S. from 20th BN	✓ "	2.10.17.	— 15
29.3.18	Can Lab Pool	TOS from 2nd Can Div Amp Co	✓ ✓	21.3.18	-40 2nd Can Div Amp Co Pt II 18/31-3-18
5.4.18	Can Lab Pool	SOS to General Depot	✓ ✓	2.4.18	-44 & Gen Depot Pt II 80/4-4-18
3-5-18	Gen Depot	SOS on trans to C.F.C. Selffe	Pte Selffe	2-5-18	—105 C.F.C. B.D. T.C.S. Pt II. 109 of 7/5/18 Pte
17.5.18	C.F.C.B.D.	S.O.S. to Dist. 54.	Pte Sdale.	16.5.18	- 118 Dist 54. T.O.S. Pt II. 22 of 24/5/18 Pte
18.7.18	54 Dist CFC	SOS on posting to B D C.F.C	" Sampton	21.6.18	- 311 TOS. BDCFC Pt II O. 172. 20.7.18
7 11 18	BDCFC	SOS to 55 Dist CFC	" Sdale	6 11 18	- 266 TOS 55 Dist pte Pt II O. 54. 13 11 18
20.11.18	55 Dist	SOS to BDCFC	✓ Sterling	19-11-18	✓ 55 Pt II O 282 of 26-11-18 BDCFC TOS
2.12.18	BDCFC	On Com to CDD Buxton	✓ Sdale	2.12.18	✓ 287

✠ Ceases Com Buxton ✠
SOS to Canada 12.12.18 ✠
B.D. CFC. Pt II O-305 23 12.18

2nd Sheet

Army Form B. 103.

Regimental Number 725543

Casualty Form - Active Service.

AA. HQ. LIEUT. & ADJT. For O.C. BASE DEPOT, CANADIAN FORESTRY CORPS.

Regiment or Corps 109th Bn AA HQ

Rank Surname Dennis Christian Name Gordon

Religion Age on Enlistment years months

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

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

Extended Re-engaged Qualification (b) or Corps Trade and rate

Occupation Signature of Officer

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			
4-4-18	Genl Depot	Taken on strength	S'cliffe	3.4.18	DD 80
			Chas W Shaw Lieut. for Colonel i/c Records, Ottawa		
3/5/18	Gen Depot.	S.O.S. Gen Depot Trans to C.F.C. S'dale. M. F. Willcocks Captain For O.C. Can. General Depot	S'cliffe	2/5/18	PA II 0105 3/5/18
7.5.18.		O.C. C.F.C. T.O.S. Base Depot, C.F.C. Sunningdale 2.5.18 Pt. II D.O. 109.			
17.5.18	O.C. C.F.C.	S.O.S. BASE DEPOT C.F.C. SUNNINGDALE 16.5.18 PT. II. DO. NO. 118 posting to Dist. 54 (Co 114) Major for O.C. C.F.C.			

(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, Shoeing-Smith, &c.

W. 8635 M2733 2000m 9/17 (3011) C. P. & S., Ltd., Form B./103 E/1807.

P.T.O.

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				
24-5-18	O.C. 54 Dist	T.O.S. Dist 54 Coy 114 from Base Depot.	Seaton	17-5-18	Pt II Do. 22 Dist 54
18-7-18	Do	S.O.S. Dist 54 Coy 114 on posting to Base Depot	Do	12-7-18	Pt II Do. 31 Dist 54.
					CAPTAIN & D.J.T. NUMBER 4 DISTRICT, CANADIAN FORESTRY CORPS.
20-7-18		O.C. C.F.C. T.O.S. Base Depot, C.F.C. Sunningdale from Dist 54. Coy 114.		12-7-18	Pt. 11 D.O. 172
7-11-18	B.D.C.F.C.	S.O.S. BASE DEPOT C.F.C. on posting to 109 Co. Dist 55	SUNNINGDALE	6-11-18	Pt. II D.O. 266
					Lt. for O.C. B.D.C.F.C.
10-11-18	O.C. 55 Dist. C.F.C.	S.O.S of 55 Dist C.F.C at 109 Coy from Base Depot C.F.C	Sterling	7-11-18	D.O. Pt. II No. 4 d/13-11-18 Capt. Adjt. 55 Dist C.F.C
20-11-18	O.C. 55 District C.F.C.	S.O.S 55 Dist C.F.C at 109 Coy on posting to Base Depot C.F.C.	Sterling	20-11-18	D.O. 55 d/20-11-18 Capt & Adjt 55 Dist C.F.C
	26.11.18	O.C. C.F.C. T.O.S. Base Depot, C.F.C. Sunningdale from 109 Co Dist 55		20-11-18	Pt. 11 D.O. 82
3-12-18	Attached C.D.D. Buxton for return to Canada, Part 11 Order No. 286. Ceases to be attached C.D.D. Buxton on embarking for Canada.				Lt. & A/Adjt. O.C. Base Depot, Canadian Forestry Corps.

J. W. Rock. Lt. for Lt. Col.
Commanding Canadian Discharge Depot.

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

M. F. W. 54. (A. F. B. 103.)
350M.—5-16
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps. 109 Battn

Regimental No. 725543 Rank Pte Name Dennis Gordon

Enlisted (a). 15-12-15 Terms of Service (a). D. of C. E. F. W. Service reckons from (a). 15-12-15

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). Laborer

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				
23-1-19	SOD	Discharged	Kingston	23-1-19	H Q 24 F. J. Moore Capt. for O. C. Discharge Section No. 3 District Depot

(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				

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

M. F. W. 54. (A. F. W. 103.) 250m.—1-16. H. Q. 177-2-39-920.

Casualty Form—Active Service.

FOR O.C. BASE DEPOT, CANADIAN FORESTRY CORPS.

Unit, Regiment or Corps 109th OVERSEAS BATTALION, C.E.F.

Regimental No. 125543 Rank Private C.E.F. Name Dennis Gordon

Enlisted (a) 15.12.15 Terms of Service (a) G of W. Service reckons from (a) 15.12.15

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) Laborer

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36. or other official documents.
Date	From whom received				
		Embarked Canada	Halifax	24.7.16	
		Disembarked England	Liverpool	31.7.16	
Transferred for Overseas Service with 20th Battn					D.O. Pt. II No. 279
6/10/16	C B Dep	Arrd & taken on strength	20th Bn	6/10/16	NR Pt 2 O'rs 55d11/10/16
do	do	Left for	do	20/10/16	NR
27/10/16	20th Bn	Arrived	do	23/10/16	B213
17/11/16	4th FCCE	Attached for duty	Field	12/11/16	Letter 2 Div G13 26/8/16 Pt.2 Ord.71 d/28/11/16
23/12/16	do	Ceases to be attached	do	16/12/16	B213.Pt.2.O. ~~70.31/12/16~~
3-2-17	20th Bn	Att to 4th C I B T.M.Batty	do	29-1-17	B213 Pt-2 no 80.3/1/17
16-5-17	4 C F.A.	Mumps	adm 16/5 Trsfd	12 C F A	16-5-17 A 36. 24-5-17
19.5.17.	11 — —	— —	adm 16/5 Trsfd	4 Gen	17.5.17 A 36. (20 31)
17.5.17	4 Genl.	— —	sev. adm	4 Genl	17.5.17
18.6.17	— —	— —	Trsfd	4 Con Dep	18.6.17 — —
18.6.17.	4 Con Dep.	Debility after mumps	adm	4 Con Dep.	18.6.17 — —
21.6.17	— —	— —	Trsfd	10 — —	21.6.17 — —
— —	10 — —	— —	adm	10 — —	21.6.17 — —
31-7-17	10 — —	— —	Trsfd	3 Pen. Ck	31-7-17 — — 2071

(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.

Capt.
ADJUTANT
109th Overseas Battalion C.E.F.
OCT 5 1916
CAPTAIN,
ADJUTANT,
109TH BATTALION CAN. INFANTRY.

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				
2-8-17	2 DBD.	T.B from Boulogne	2 DBD	2-8-17	N.R.
13-8-17.	— " —	D.A.H. and Mumps		13-8-17	N.R. no. 60
		Classified P. B by Med Bd.	— " —	20-9-17	N.R. " 135.
20-9-17	— " —				
25-9-17	— " —	Leaving for 2 Div Employ: Coy.		26-9-17	N.R. 93.
16-5-17.	4 C.F.A.	Ceases to be att. on adm. to Hosp.		16-5-17	Auth. A36 Pt 2. 69d 10/10/17.
26-5-17	20 Bn.	4 T. M. Batty. —			B213.
6-10-17.	2 Div Employ Coy.	Lsld to 2 Div Employ: Coy		1-10-17.	Auth. KR 17497 Pt 2 70d 13/10/17.
"	"	T.O.S. do		2-10-17	" " 15 18-10-17
21-12-17	C.E.B.D.	T.O.S. T.B. from A.D.M.S		20-12-17	N.R. 485
24-12-17	"	Classified B.3 by med. board (also B.3. 22-18 N.R. 344)		24-12-17	N.R. 288 Pt. 2 1. 12/18
5-1-18	"	Granted 14 days leave		4-1-18	B213 Pt. 2 ord. 5 5-2-18
26-1-18	"	Rejd from leave		20-1-18	B213
20-3-18	"	Infd to Can Labor Pool and T.O.S. 2nd C.D. Employ Co		20-3-18	K.R. 26372. N.R. Pt. 2 ord No
21-3-18	A.A.G.	T.O.S Can Lbr Pool from 2 C.D Emp Coy.		21-3-18	P.III 040. d 29-3-18.
2/4/18.	A.A.G. Can. Sect.	Transferred to England (U.S.F.) and posted to Gen Depot. Shorncliffe.		2/4/18.	P.III.O.44. 5-4-18.
31/12/18		T.O.S. Casualty Company No. 3 District Depot. for Disposal, Date This D.O. 257	80 Kingston	27/12/18	

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

LIEUT.
for O.C. Casualty Co., No. 3 District Depot

No. 725v-43 RANK Pte. NAME Dennis, George S.

T. O. S. 16-12-15. UNIT 109th. Battalion
D.O. 23. 16-12-15.

M. D. 3

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915 Dec 16	1915 Dec 31	✓		
1916 Jany.	1916	✓		
Feb.		✓		
Mar.		✓		
April.		✓		
May.		✓		
June.		✓		
July		✓		

UNIT SAILED
JUL 23 1916

3	CARD NO.
S.O.S.D's. 23-1-19. Demob. Aut. D.O. 24	FOLL. 24-1-19

SURNAME. Dennis.

CHRISTIAN NAMES Gordon

REGL. No. 725543 RANK Pte.

UNIT 109th. Batt. #30.D.

FORMER CORPS 48th. Regt. Volunteers

NEXT OF KIN.

NAMES IN FULL Dennis Annie Mrs.

RELATIONSHIP TO SOLDIER Mother

ADDRESS Fenelon Falls, Ont.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada. Fenelon Falls, Ont. DATE Jan. 30th. 1898

PLACE OF ATTESTATION Fenelon Falls. Ont. DATE Dec. 31st. 1915

P/S 23-]-16,488/11.

R/C. 25-12-18 245/14

Sailed from Halifax per S.S. "Olympic" 23/7/16

MARRIED SINGLE Yes WIDOWER

TRADE OR CALLING Labourer RELIGION Roman Catholic

DESCRIPTION.

APPARENT AGE 17 YEARS 10 MONTHS

HEIGHT 5 FEET 6 1/2 INCHES

CHEST MEASUREMENT 38 1/2 INCHES EXPANSION 2 1/2 INCHES

COMPLEXION Dark EYES Blue HAIR Black

DISTINGUISHING MARKS Scar on inside left arm.

MEDICAL EXAMINATION. PLACE Lindsay Ont. DATE Dec 15th 1915

CANADIAN EXPEDITIONARY FORCE
Discharge Certificate

This is to Certify that No. 725543 (Rank) Private

Name (in full) DENNIS, Gordon enlisted in

the 109th Overseas Battalion

CANADIAN EXPEDITIONARY FORCE at Fenelon Falls, Ont. on the 15th

day of December 1915

HE served in Canada, England and FRANCE

and is now discharged from the service by reason of in accordance with R.O. 1343

Demobilization. Auth. 3DD 3.D.362. D.20.1.19

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

Age 21 years	Marks or Scars
Height 5 feet 6½ inches	Scar inside left arm
Complexion Dark	
Eyes Blue	
Hair Black	

G S Dennis
Signature of Soldier

R C Rapple
Issuing Officer

Q. O. Discharge Section
No. 3 District Depot

Rank

Appointment

Date of Discharge 23.1.19

Signed at Kingston, Ont. this 23rd day of January 1919

in Military District No. 3

File Reference No. 3DD 3.D.362.

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

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

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

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

Unit .....

Address on Discharge .....

Character and Conduct .....

.....

Former Occupation .....

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

.....

Medals and Decorations .....

.....

Remarks .....

.....

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

.....
Name of Officer

.....
Rank

.....
Appointment

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

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 11a.
50m.—6-16.
1772—39—818.

Sheet No. 2. Annie Dennis Mother

Name of Soldier Dennis G. S. Pte

L. L. Job 4503.—Req. 6832.

Month.	Year.	Cheque No.	Amt.		Remarks.
April	1916				
May					
June					
July					
Aug.					
Sept.					
Oct. 26		L 21320	120		120
Nov. ~~26~~		P 24458	20		20
Dec.		~~Q 27355~~	~~20~~		20
Jan.	1917	U 27842	20		20
Feb.		U 31164	20		20
March		~~U 34249~~	~~20~~		20 U 34249 Cancelled H. Rewrite
April		V 596	20		20
May		V 3851	20		20
June		Y 7190	20		20
July		X 10244	20		20
Aug.		E 15375	20		M
Sept.		H 18928	20		X
Oct.		H 19873	20		T
Nov.		E 26410	20		B
Dec.		X 25384	20		Bo 400
Jan.	1918				
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.				

L- L. Job 310—M. & D. 6574.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12.
50m.—4-16.
H. Q. 1772-39-819.

To Whom Mrs Annie Dennis
Address Fenelon Falls Ont.

Rate 15-00 AUG 1 1916

By Whom Assigned Dennis G.S.
Regtl. No. 725-5-43.
Rank Pte
Corps 109th Batt. "C" Coy

PAYMENTS

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

CONSOLIDATED 2 ACCOUNT

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a.
50m.—4-16.
1772—39—819.

Sheet No. 2. Mrs Annie Dennis

L. L. Job 310.—Req. 6574.

Name of Soldier Dennis G S
725543 "Clery" Pte 109th Batt.

15-00

AUG 1 1916

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.		U15349	15	
Sept.		9 15826	15	
Oct.		1 20306	15	
Nov.		U 21667	15	
Dec.		U 31606	15	
Jan.	1917	P 37738	15	
Feb.		P 43837	15	15 R
March		Q 48963	15	15 L
April		~~S 1434~~	~~15~~	15 Ca 1434 canc. (m)
May		~~M 7416~~	~~30 15~~	30.00 L.dgr 7416 Cancelled
June		17987	15	C 15 future
July		L 26562	15	
Aug.		B 32280	15	
Sept.		X 37293	15	
Oct.		15 40915	15	
Nov.		G 49856	15	
Dec.		A 48748	15	255 —
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

T12462 30 W.

225.

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.					

1-5-16

L. L. Job 4503.—M. D. 6832

MILITIA AND DEFENCE

M. F. W. 11.
50m.—6-16.
H. Q. 1772-39-818.

SEPARATION ALLOWANCE

Name Mrs Annie Dennis

Address Fenelon ~~Fanton~~ Falls
Ont

Relation to Soldier wife, child or mother } Widowed Mother

Name of Soldier Dennis G. S.

Regtl. No. 725543

Rank Pte

Corps 109 Bn

To what Corps belonging when called out }

PAYMENTS

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

X

Married or Single: Single

Place of Birth: Fenelon Falls. Ont

Name and Address of Next of Kin: Annie Dennis Fenelon Falls. Ont

Relationship of Next of Kin: Mother

Name and Address of Next of Kin:

Relationship of Next of Kin:

Separation Allowance Monthly $ Effective (Date)

Payable to

Relationship of Dependant

Casualties, Promotions, &c.

Particulars	Effective Date	Authority

Admissions to Hospital, &c.

Date Admitted	Date Discharged	V. or A.	Name of Hospital

Reg'l. No. 725543 Rank Pte Name Dennis Gordon

If in Perm. Corps What Unit Unit 109th Bn Transferred to 20th Bn Date 5/10/16 Authority D.O. 279

Permanent Force Allowances Transferred to 2D. Emp. Co. Date 1/11/17 Authority Nom. Roll

Place of Attestation Fenelon Falls Transferred to Date Authority

Date of Attestation Dec. 15-1916 Transferred to Date Authority

Assigned Pay Monthly $ 15.00 Date Effective Aug 1-1916

Payable to Mrs Annie Dennis Fenelon falls. ont. Relationship Mother

Assigned Pay Monthly $ Date Effective

Payable to Relationship

Stop-Payment Form (Assigned Pay) Rendered (Date) Effective Reason

Discharge Date and Place Reason and Authority

Account transferred to Non-Effective Branch (Date)

Account transferred to Officers' Pay Branch (Date)

Checked G.W. Williams

Date	Pay No. of Days	Pay Rate	Pay Amount $	Pay Amount c.	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount $	Field Allowance Amount c.	Working or Special Pay No. of Days	Working or Special Pay Rate	Working or Special Pay Amount $	Working or Special Pay Amount c.	Assigned Pay Credits	Other Credits	Total Credits	Acquittance Rolls 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	Cash Payments 1	2	3	4	Assigned Pay	Other Charges	Total Debits	Balance Credit	Balance Debit	Pay Withheld or Deferred	Pay Available for Issue	✓	Remarks
July 31														1 05	1 05									Bal. from Canada							105 b/					
Aug 31	31	1.00	31		31	10	3	10							34 10	21	9-8-16							973				15		2473	1042				
Sept.	30		30				3								33	53	31/8/16	88	15/9/16					730	730			15		2960	1382				
Oct	1-5		5					50							550					733 1	17/10/16					436		15		15	432				D0279 Jan 20 14/2 5/9/16
6/31	26	1.	26		26	10	2	60							28 60					124	31/9/16					730				11 66	21 26				
Nov	30	1.10	30		30	10	3								33 00	1324	31/10/16							262				15		1762	3664				
																1439	30/11							1133											
Dec	31	1.10	34		31	10	3	10							34 10	1377	27/11							262				15		28 95	4179				
			1500				1530																													
1917																																				
Jan	31	1.10	34	10											34 10	1518	16/12/16			1597	6/1/17			524	262			15		2286	5303				
Feb	28	1.10	31	80											30 80	1663	24/1			1733	6/2			261	262			15		2023	6360				
			233	20										1 05	234 25									41 45	12 54	11 66		105		170 65					
Mch	31		34	10											34 10	1763	27/2							261				15		1761	8009			✓	
Apl	30	1.10	33												33													15		15	9809			✓	
May	31		34	10											34 10	61	17/4							524				15		2024	11 95			✓	
			334	40										105	335 45									49 30	1254	11 66		150		223 50	11 95				

725543 Pte Dennis G.

Date	Pay No. of Days	Pay Rate	Pay Amount $	Pay Amount c.	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount $	Field Allowance Amount c.	Working or Special Pay No. of Days	Working or Special Pay Rate	Working or Special Pay Amount $	Working or Special Pay Amount c.	Assigned Pay Credits	Other Credits	Total Credits	Acquittance Rolls 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date
			334	40										1 05	335	45							
June	30	1 00/10	33												33		179	21/5					
July	31		34	10											34	10							
Aug	31		34	10											34	10					2363 87 6 68 2787 22/7 CAB 2450 31/7 " 2581 15/7 351 4/8 2 BBD.		
Sept	30		33												33								
			~~468~~	60										1 05	~~469~~	65							

Date	Cash Payments 1	2	3	4	Assigned Pay	Other Charges	Total Debits	Balance Credit	Balance Debit	Pay Withheld or Deferred	Pay Available for Issue	Remarks
	49 30	12 54	11 66		150		223 50	111 95				
June	535				15		20 35	124 60				
July					15		15	143 70				
Aug			4 46 2 68 2 68 3 57		15		19 46	158 34				
Sept					15		25 71	165 63				
	54 65	12 54	1 78		210		304 02					
	54 65	12 54	26 83		210		304 02					

Month	Particulars	Cr. 1	Cr. 2	Particulars	Dr. 1	Dr. 2	Dr. 3	Dr. 4	Balance	Deferred Pay	Sec. Allot. Ens.
1917 Sept 30	Balance	~~165 63~~							165 63		
Oct	P pay	34 10					15				
				458 22/8 2nd BBD.	4 46						
				417 15/8 do	4 46						
				569 14/9 do	4 46						
				714 25/9 do	4 46				166 88		
		34 10			17 85		15		17 10		
				bal			15		233 98		
Nov	PP	33							47 49		
				AR 1203 30/10 2 BBCo	3 54						
Dec	PP	34 10							191 49		
				✓ 1516 5/11 ✓	4 46						
				✓ 1652 15/10 ✓	4 46						
				bal			15		191 49		
1918 Jan	PP	64 10		bal	12 49		30				
		34 10					15				
				AR 20662 26/11 2 DSig Co	13 38						
				✓ 6151 31/12 GBD	4 46						
				✓ 2209 15/2 2 DSig	4 46						
				bm 60401 4/1	146 00						
					169 30 168 30						
		34 10					15		42 29		
Feb	PP	30 80		bal			15				
				HR 6521 13/1/18 BJ BD	4 46						
				✓ 7018 26/1 GBD	4 46						
		30 80			8 92		15		49 17		

Month	Particulars	Cr. 1	Cr. 2	Particulars	Dr. 1	Dr. 2	Dr. 3	Dr. 4	Balance	Deferred Pay
1918	Brought Forward								49 17	
									34 10	
	PP	34 10		bal			15		83 27	
									32 81	
				AR 7555 9/2 GBD	4 46					
				✓ 7949 24/2 ✓	4 46					
				✓ 8615 9/3 ✓	4 46					
				AR 9177 24/3 ✓	4 46				50 43	
					17 84					
		34 10			17 84		15		50 43	

P 820
12474—375M—13-2-18.

★ Strike out whichever inapplicable.

ASSIGNED PAY	★ ~~ENGLAND or~~ CANADA.	SEPARATION ALLOWANCE.	★ ENGLAND or CANADA.
EFFECTIVE DATE:– 1-8-16		EFFECTIVE DATE:–	
AMOUNT:– 15.00		AMOUNT:–	

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

Mrs Annie Dennis
Fenelon Falls Ont
Mother
Stop 1/1/19

NAME:– DENNIS 41 Gordon

NUMBER:– 425543

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Pte

UNIT AND TRANSFERS

ORIGINAL UNIT:– 109 Bn

DATE ACCOUNT FIRST OPENED:– 1-8-16

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			2 D & Bn
DO 40	21/3/18	1/4/18	Lab Pool
	1.6.18		H.T.B. Eng

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
~~5.11.18~~	~~463~~	~~Q.H.O.S 2/034~~	~~.50~~				
~~28.11.18~~	~~478~~	~~" 1/5~~	~~.34~~				
~~30.11.18~~	~~4751~~	~~B.D. C.F.C 26.0.0~~	~~29 20~~				
			30 54				

DAILY RATES OF PAY AND ALLOWANCES

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

PARTICULARS OF RENDERING NON-EFFECTIVE:– Res to Canada 6/31.12.18 N.R. 232 30/11 AR 232 30/11

MONTH 1918	PARTICULARS	CR 1	CR 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Mch 31	Bal forward								50 43	nil	
	P Pay	33		Can A.P.				15	68 43		
				Dn AR 59. Can Ord 4.4.18	9 73				58 70		
				" 1487 " 15.4.18	9 73				48 97		
		33		Dn AR. B591 - H.T.B. Eng 14.5.18	19 46 / 9 73			15	39 24		
May				" B191 - " 17.5.18	7 30				31 94		
				" 949. Det Schiffe 29.4.18	7 30				24 64		
	P. Pay	34 10		Can. A.P.				15	43 74	✓	
		34 10			24 33			15			
JUN 1918	P.P.	33		Can A.P.				15			
				AR 5315 7-6-18 114 Coy	24 33						
				" 1710 25-6-18 12 C.G. Hosp	4 87				32 54	✓	
		33			29 20			15			
July	P.P	34 10		Can A.P.				15			
				AR 2292 24-7-18 12 C.G. Hosp	4 87				46 77	✓	
		34 10			4 87			15			
Aug	P.P	34 10		Can A.P.				15			
				AR 2860 21-8-18 12 C.G. Hosp	4 87				61		
		34 10			4 87			15			
Sept	P.P	33		Can A.P.				15			
				AR 3451. 18.9.18. 12.C.G. Hosp.	4 87				74 13		
		33			4 87			15			
Oct	P.P.	34 10		Can A.P.				15			
				B4050. 31.10.18. B.D.	24 33				68 90		
		34 10			24 33			15			
				~~Can A.P.~~				~~15~~			
Nov	P.P.	33		C.A.P.				15			
		33						15			

NUMBER RANK NAME

MONTH	PARTICULARS	Cr. 1.	Cr. 2.	PARTICULARS	Dr. 1	Dr. 2	Dr. 3.	Dr. 4.	BALANCE	DEFERRED	SEPARATION
		33						15	88 96		
				AR 4751. 30.11.18 B.D.	29 20						
Dec	P.P.	31 10		b.f.p.				15	104 86		
		87 10			29 20			30			
Feb/19				Q.4005/46 5.11.18		50					
				" /478 28.11.18		34 84			75 96		
	A.B.M. FORM-REN'S Stopped EFFEC. 1/1/19										
	DISCHARGED TO Canada Disposal DATE 31/5/18										
	PAY BOOK VERIFIED 2/15/18										
	Crdt BAL. 75 96 AT PRES. REN'S 2/15/18										
	AUTHY. C.F.C. NR.232. 30/11/18										

S.O.S Canada 12.12.18.
Auth. B.D 305 23.12.18.

75.96

4-6

26-5-41

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

1. No. 725543

2 Rank. Private

3. Name. Dennis, Gordon

4. Unit. No. 3 District Depot

5 Date of Discharge 23.1.19. Place Kingston, Ont.

6 Reason for Discharge Demobilization

7. Authority. 3DD 3. D.362, D.20.1.19.... ~~R.O.1333~~

8. Proposed Residence after Discharge Fenelon Falls, 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

G H Dennis

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place Kingston, Ont.

Date 22.1.19.

Medical Documents Forwarded to ~~S.C.R. or~~ B.P.C. on Date 28-1-19

Signature R. C. Rapple Lieut. for O. C. Discharge Section No. 3 District Depot

(O. C. Discharging Unit.)

DEPT. MILITIA & DEFENCE JAN 31 1919 H.Q. CANADA

H.A.D. 23/9/19 ac

M.F.B. 218a—300M.-11-18—1772-39-113. MM

Cancel 6-8-19

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

ERS COPY

THIS FORM WILL BE USED FOR ALL RANKS

MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

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

STATION Kingston, Ont. DATE Jan. 16th, 1919.

1. 1 (a) Unit 3rd C.C.D.D. (b) Regimental No. 725543 (c) Rank Pte.

(d) Surname DENNIS (e) Christian name Gordon

(f) Home address Fenelon Falls, Ont.

(g) Next of Kin Mrs. A. Dennis (h) Relationship Mother

(i) Address of Next of Kin Fenelon Falls, Ont.

2. Age last birthday 21 Date of birth Jan. 30th, 1897

3. Enlistment, or Appointment (if an Officer) (a) Place Lindsay (b) Date 16-12-15

4. Personal description:

(a) Height 5' 7" (b) Weight 145 (stripped) (c) Complexion Dark

(d) Colour of hair Black (e) Colour of eyes Blue (f) Identification marks, Scars, etc.

5. Former trade or occupation Laborer

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

	Years	Days

	Periods From	Periods To
Canada	16/12/15	20/7/16
England	20/7/16 4/10/16	4/10/16 4/4/18
France or other theatres of War England Canada	4/4/18 27/12/18	27/12/18 To Date

7. Original disease, or injury 1. D.A.H. 2. Chronic Bronchitis 3. Neurasthenia

(a) Date of origin 1. 12/5/17 2. Pre-enlistment 3. 12/5/17 (b) Place of origin 1. France 2. Canada 3. France

(c) Cause 1 and 3 Blown over by gun explosion 2. Unknown

M. F. B. 227.

300M.—8-18.
1772-39-117.

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

Neurasthenia. Chronic Bronchitis

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

Objective:- Man of fairly good physique and fairly well nourished, but is nervous and restless. Knee jerks are slightly exaggerated. There is slight tremor extended fingers and tongue. Face is flushed and hands slightly cyanosed. Heart rapid, rate 98 lying and increasing to 140 on squatting on his heels 12 times, and returns to original rate slowly 4 or 5 minutes. No abnormal sounds audible, size and position normal. There are few scattered sibilant rales and rhonchi heard. Most evident over left chest. Report on ears:- Nose and ears approximately normal. No disability.

(SGD) J.G.Connell, Lt-Col. AMC

Subjective:- Complains of shortness of breath, dizziness, especially if in a close room. Fainted three times from this cause since enlistment. States that eyes get blurred and he sees "specks". Has pain in chest most noticeably left chest. Urination frequent, 4 or 5 times in day, and 2 to 3 times at night. Sometimes sleeps poorly. Wakes up in fir fright dreaming that he is falling into the water.

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

Nervous System: as stated — Cardio-Vascular System (If pulse rate is abnormal, B. P. will be taken.): as stated — Genito-Urinary System (Albumen and Sugar will be excluded.): as stated

Special Senses: No — Respiratory System: No — Integumentary System: No

Disturbances of Mentality: No — Digestive System: No — Muscular System: No

Osseous and Joint Systems: No — Any other general condition: No

Urinalysis. Sp. gr. 1024; alkaline; Sugar-neg; alb. neg.

Hearing-nromal.

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

When on duty in France was blown up by explosion of a gun, after which the above train of symptoms of neurasthenia developed. Had bronchitis before enlistment, but man states that condition is now worse than on enlistment.

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

xxHadxmxxxx Had measles in childhood. Swelling in ankles at age of 3 yrs.

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

11.—(*a*) Did the disabling condition have its origin before enlistment ?

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

1. Not applicable 2. Man states yes.

12. Was the disability caused, or aggravated ; (*a*) by intemperance, or improper conduct ; or (*b*) 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 ? 6 months for each. Then impossible to say.

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

Hospitals in France and England.

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 limitations.
(If not, briefly state why)

17. Recommendations Fit for C-1.

(SGD) M. F. Coglon, Capt. AMC
Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

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

I, the undersigned G. S. Dennis 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 Nothing

(SGD) G. S. Dennis Rank.
Signature of invalid examined.

OPINION OF THE MEDICAL BOARD

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

Yes

19. Is the invalid fit for

(*a*) General service,	(Category A)	~~(Yes~~ No.)
(*b*) Service abroad, not general service,	(" B)	~~(Yes~~ No.)
(*c*) Home service (Canada only),	(" C)	(Yes ~~No~~ C-1.
(*d*) Temporarily unfit.	(" D)	~~(Yes~~ No.)
(*e*) Unfit for service in Categories A, B and C	(" E)	~~(Yes~~ No.)

20. It is certified that the invalid

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

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

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

Fit for duty C-1. 1. Disability due to service.
2. Disability aggravated by service.

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

(SGD) R.G.Stevens, Capt. AMC *President.*

PLACE Barriefield, Ont. " W.Fred Jackson, Capt. CAMC } Members

DATE Jan. 18th, 1919.

TO BE COMPLETED WHEN TREATMENT IS REFUSED

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

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

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

.....*President.*

PLACE..... } Members

DATE.....

APPROVED BY

(SGD) E. M. McCay, Lieut.
For *Assistant Director of Medical Services.* M.D. #3

DATE 18-1-19.

APPROVED BY

Director-General of Medical Services.

DATE.....

B7

A.F.B. 179 Canada (Revised 1918). 4182 100m. 16/11/18 D.495

Reserved for M.H.C.

Regt. No. 725543 Rank Pte Surname Hennis Christian Name Gordon.

Unit or Corps—(a) Overseas from United Kingdom 20th BATT (b) in United Kingdom C.F.C

Born at—Town Fenelon Falls County or Province Ont. Country Canada.

Date of Birth—Day 30th Month JANUARY Year 1897 Age 21 yrs. 10 months.

Joined at Lindsay Ont. Canada (Date 15.12.18)

Former trade or occupation Labourer

Permanent Marks or any peculiarity that will serve for future identification :—

SCAR L ARM

Height—feet 5 inches 6½ Colour of eyes BLUE

Signature of Soldier (*for identification purposes*) G. H. Hennis

Medical Report

☞ *Read carefully the instructions on last page of this form.*

1. DISABILITY.

Group the disabilities, placing those resulting from separate causes in separate groups.

Disabilities Group (a): NEURAESTHENIA.

Disabilities Group (b): NA

Disabilities Group (c): NA

2. CAUSE OF DISABILITY

		Place of origin.	Date of origin.
(i.) As to Group (a) above.	SERVICE CONDITIONS	France	9/5/1917
(ii.) As to Group (b) above.	NA		
(iii.) As to Group (c) above.	NA		

3. Is the disability due to disease contracted or injuries received prior to Active Service ?

(i.) As to Group (a) above ? No If yes, has Active Service aggravated it ? NA

(ii.) As to Group (b) above ? NA If yes, has Active Service aggravated it ?

(iii.) As to Group (c) above ? If yes, has Active Service aggravated it ? NA

4. Is the disability due to disease contracted or injuries received while on Active Service ?

(i.) As to Group (a) above ? yes.

(ii.) As to Group (b) above ?

(iii.) As to Group (c) above ? NA

5. MEDICAL HISTORY.

Patient's Statement - Had bronchitis 1910. Made good recovery and remained in good health until of enlistment 16/12/15. Went to France 4/10/16, served 18 mos. in France. At Vimy Ridge 9/5/17 a gun blew up near him, was not hit but became nervous. Evacuated to England 12/4/18 on account of nervousness & D.A.H. Treated in No. 12 Can. Gen. 4 mos. Returned to duty in England, B two, 30/10/18.

"Passes water frequently at night in last 6 mos."

6. PRESENT CONDITION.

Subjective — Feels nervous, disturbed by noises and crowds, cannot carry on with drill, feels weak. Heart "palpitates and jumps". Has sharp pains (momentary) in right axillary line. Breathless on walking fast 200 yds.

Objective - Well developed young man. Somewhat worried appearance. Slight occasional quick tremor. Knee reflexes increased. Cardiac impulse forcible, but praecordial wave not marked. Heart not enlarged, sounds clear, no bruits, no auricular flutter. Rate lying 110. Standing 140 - 150. Excitable. Rate easily raised. Lungs and other systems except eyesight normal.

Vision R. 6/9.
" L 6/9.

There is unky loss of the terminal phalangeal joint of the Rt. angle - middle toe left foot - same as before enlistment.
24/11/18 Urinalysis negative.

7. 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.

8. (i.) Is there loss or decay of teeth attributable to Active Service? No

(ii.) If so, describe.

9. DO YOU RECOMMEND:—

(a) Fit for duty? (*state category*) B two

(b) Invalid to Canada?

(c) Discharge from the Service as permanently unfit?

Date of Report Nov. 26th 1918

Station Dunningdale.

Signed H. V. Maclaurin Capt. Officer in medical charge of case.
Comc

I have satisfied myself of the general accuracy of the above Report, and concur therein *except not in hospital (Officer i/c Hospital / S.M.O. Brigade) Strike out one of these

Dated at ..... Station, on ..... 191.....

*Delete if inapplicable.

PART I

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

10. Is the disability fully described in Part I. (1)? no
If not, describe it.
add D.A.H.

11. Is the cause of the disability fully described in Part I. (2)? yes
If not, describe it.

12. From the medical information now adduced, was the disability caused or aggravated by:—
(a) Negligence of the Soldier { Caused? No / Aggravated? }
(b) Misconduct of the Soldier { Caused? No / Aggravated? }

13. 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? 20 %
(Estimate at none, 5%, 10%, 15%, 20%, etc.)

14. THE DISABILITY DUE TO SERVICE.—*(See Part I. (3). Aggravation on Active Service of a disability existing previous to joining is to be included in this estimate.)*
What part of the entire disability estimated next above (13) is due to causes arising during Active Service? all
(Estimate at none, 1/10, 2/10, 3/10, etc., or all.)

15. Permanency of the Disability due to Service estimated next above in (14).
(i.) Is it permanent? no
(ii.) If not permanent, what is its probable minimum duration (*in months*)? Six months –

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

17. Can the former trade or occupation be resumed? no.

18. REMARKS:—
Apex beat diffuse, maximum intensity in 5th I.C.S. within nipple line & quite forcible – Pulse at rest 100 – after exercise 150. No murmurs –
This man is very nervous. complains of Palpitations & Dyspnoea on taking exercise.
Authority for Board A.G. Telegram 2083 – 11/11/18

19. RECOMMENDATION:—
(a) Fit for duty? (*state category*) B2 –
(b) Invalid to Canada? –
(c) Discharge from Service as permanently unfit? –

Date of Board 26-11-18

Signatures of the Board { J. Ellis Capt. Chairman / Frederick Major } President.

Station Summerdale Emp.

Approved Frederick Major ADMS.
Major, C.A.M.C.
for A.D.M.S., Canadians, London Area

Dated at ..... Station

ASSISTANT DIRECTOR OF MEDICAL SERVICES, CANADIANS, LONDON AREA. NOV 27 1918 13, BERNERS ST. LONDON, W.1

Statement of the Soldier

(This is to be completed only in the case of the Soldier taking his ~~Discharge in England~~.)
(Sections 1, 2, 5, and 6 are to be read to the Soldier.)

I, the undersigned Gordon Dennis #725543 have heard the description of my disability read, and am satisfied (or not satisfied) with it. (If dissatisfied, statement should follow.) I complain in addition of :—

Gordan Samel Dennis
Signature of Soldier examined.

Instructions to Medical Officers

Question 1.—State the disability in terms of a diagnosis, that is, a diagnosis of the existing condition as distinguished from the disease or injury which caused it. It should be noted that in medical cases the disability may be the actual disease; for example, Tubercle of Lung, Chronic Bronchitis, Myalgia, Gastric conditions and so forth. (Follow the nomenclature as laid down in the "List of Diseases" of 1915, and amended by A. C. I. No. 1587 of 1917.)

Question 2.—The cause of the disability when known should be stated and care should be taken to establish as correctly as possible the place and date of origin. This is important in view of the relationship of Questions 3 and 4 to Question 5.

Questions 3 and 4.—*NOTE*—By Active Service is meant Service with the Colours in Canada, the United Kingdom or elsewhere during the present war, (since the 4th August, 1914.)

Question 5.—MEDICAL HISTORY.—State concisely the essential points of the history of the case as supported by documentary evidence. If further evidence is considered necessary to complete the Medical History, the same not being supported by documents, this should be obtained by questioning the soldier, but should be distinctly shown as "Patient's Statement." It is considered advisable that these latter statements be grouped apart from the evidence supported by documents available to the Medical Officer.

Extracts should be made from all entries on the Medical History Sheet.

If answers to Nos. 2, 3 or 4 show that the Soldier is suffering from some condition which pre-existed enlistment, it is advisable that these answers be substantiated as far as possible by statements obtained from the Soldier showing history of previous illness or injury.

Question 6.—PRESENT CONDITION.—As this question is primarily intended for the Medical Officer's report, in answering show clearly the condition of the Soldier at the time of examination.

It is directed that the objective and subjective matter be arranged in separate groups. The objective matter is considered to be the more important, in that it consists of a statement of the Medical Officer's actual finding.

Specialists' reports bearing on the PRESENT CONDITION should be attached.

In addition to description of the disability, a report on "all systems" is required in order that the whole when completed may be a true pen portrait of the Soldier's condition.

The Medical Officer in charge of the case will fill out pages 1 and 2 of this Form. The original must be wholly in the handwriting of the Medical Officer. The copies may be typewritten but must be signed by the Medical Officer who must be responsible that these are true copies of the original.

Finally the O. C. Hospital or S. M. O. or an Officer delegated for such duty by the A. D. M. S., is required to sign a certificate at the bottom of page 2, which reads as follows :—

"I have satisfied myself of the general accuracy of this report and concur therewith, except....."

This is a most important part of the paper and one to which the attention of the Officers concerned should be frequently drawn as it is by such strict supervision that the accuracy and good results of Medical Board work can be assured.

ENTRIES OF RECATEGORIZATION

Date	Station	Category	Signature of M. O.	Date	Station	Category	Signature of M. O.

Forms
I. 1237
11

Army Form I. 1237.

SHEET.*

No. in Inspection Discharge Book.	Regimental No.	Surname.	Christian Name.
12 550	425543	Dennis	G. S.
Year 1916	Unit. C7C	Age. 21	Service. 30/12

Station and Date.	Disease ~~D.D.H.~~ Neuralgia Intercostal
21.6.18	Complaint: Pain over heart, Palpitation, weakness Duration. 14 months P.H. Mumps infancy Bronchitis 1915. States in boyhood laid up 4 wks with Rheumatism. States left ankle joint was swollen Denies V.D. Alcohol moderately. Took active part in sports. H.P.I. Blown up May 17th 1917 To Base where he was marked "P.B." Did work with Employment company. Boarded Dec 1917 B3 for Heart trouble. To England in April. To Forestry corps May 1918. couldn't carry on. Since being blown up complains of shortness of breath on exertion, pains over heart and palpitation. For last 3 months has slept poorly Dreams a lot - of France and Canada States he has ~~very~~ become very nervous excitable and weak.
27.10.18	P.C. Young man, average size. not very robust. Lungs neg. Heart III rib 1 middle line P.M.I. 5th space inside nipple Rapid. sds ~~alto~~ regular. 2nd aortic accentuated No murmurs heard.

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

Abd. Thos. Weg.

256.1 arme weg.

24/7/18 Transfer to Annex.
Finnicheos capt

Station
and Date.

Rank and Name 725643 Pte. Dennis. J. Corps C. F. C.

Case 2. D. H. Hospital 12th C. C. H.

Officer i/c Laboratory. Ward 8

Please carry out an examination of the accompanying specimen of Urine

with special regard to

Date 24/6/18 Capt Laing
O. i/c Ward.

LABORATORY REPORT.

Reaction acid
Alb neg

Sp Gr 1020
Sugar neg

Date of Examination 24/6/18 9 A. Montgomery Capt
O. i/c Laboratory.

W. 3212. 50M-4-4-18.

SPECIALIST'S REPORT.

Ward No. 68

To: Officer i/c Nose & Throat Department.
No. 12 Canadian General Hospital.

Kindly examine Pte. Dennis (725443)

with special regard to Nose

Date 1-7 1918.

G. J. Lavin Capt.
M.O. i/c Ward.

REPORT. Complaints - headaches & discharge from nose - 3 mos -
Septal Deflect in to left. -

J. Patterson Capt.
Officer i/c Department.

Annex 20

SPECIALIST'S REPORT.

Ward No. _____

To:- Officer i/c Nose & Throat Department.
No. 12 Can. Gen. Hospital.

Kindly Examine 725-3-43 Dennis G.S. Pte

With Special Regard to Treatment Nasal Condition

Date 4-6 - 1918.

R.R. Porter
M.O. i/c Ward.

REPORT.

Septal Deflection
Excoriation Lt. Nostril (Sac Rhinitis)

Officer i/c Department.

Army Form

CLINICAL CHART.

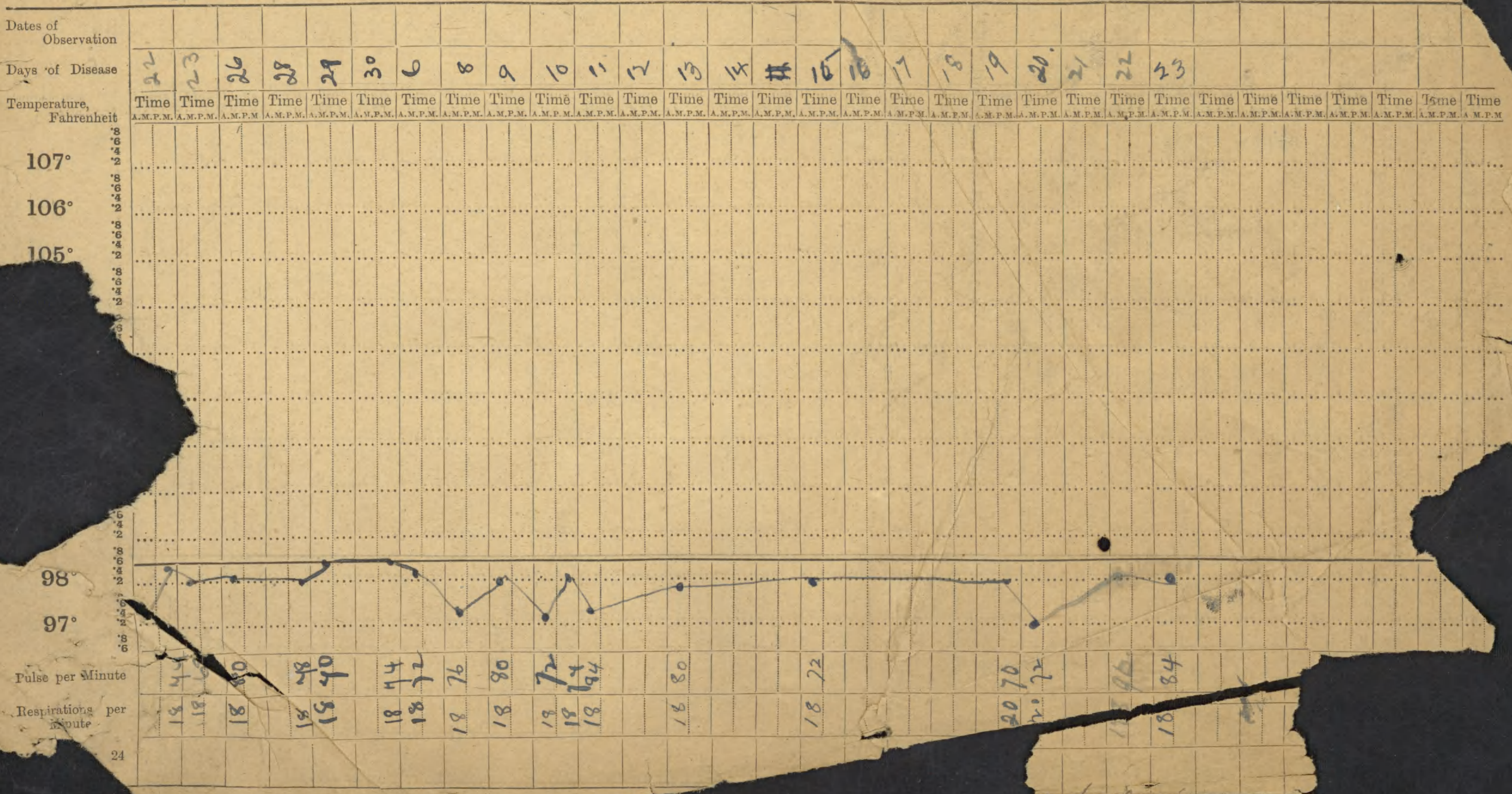
(To be attached to Case Sheet.)

Corps C. F. C.

No. 725543 Rank and Name Pte Dennis G. S Age 21 Service 30/12

Military Hospital No 12 C. G. H.

Disease O. D. H. Date of admission 21-12-18 Date of discharge Result



3/M2313—2,000,000—6/17—H. & Sp. (10693)—A.F.B. 181/5 (E. 735)

Army Form B. 181.

CLINICAL CHART.

(To be attached to Case Sheet.)

Military Hospital _____

No. _____ Rank and Name _____ Age _____ Service _____

Disease _____ Date of admission _____ Date of discharge _____ Result _____

Days of Observation

Days of Disease

Temperature, Fahrenheit

Time A.M. P.M.

107° 106° 105° 104° 103° 102° 101° 97°

In charge

H. & Sp. (10683)—A.F.B. 181/5

Form R. & O. 6045.
1233-130M-29/11/16.

C Z C

Knights
3 D-362
Discharged
23-1-19

PROCEEDINGS OF A MEDICAL BOARD.

Dated at April 24th, 1918 1916.

No. 725543 Rank Pte. Name DENNIS, G.S.

Local Unit C.G.D. Overseas Unit 2nd Div.Emp. Age 21

Examination held at Somerset Barracks, Shorncliffe.

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

NEURASTHENIA

D.A.H.

PRESENT CONDITION.

Previous to enlistment good health, could carry on in all sports but noticed tendency to get short of wind. Enlisted December 1915. France 18 months. Evacuated April 1918. Complains Praecordial pain and distress, shortness of breath after exertion, also dizzy, but never fainted.
Examination Well developed young man. Apex beat 6th interspace inside nipple line, slight increase cardiac dullness, pulse full and bounding. 110 rest, 140 after exercise with tendency to dyspnoea, returned to 120 in 4 minutes. Soft blowing murmur systolic nature heard in pulmonic area. Slight degree cyanosis of hands. Man appears nervous. Reflexes active. Lungs and other systems normal. West Cliff 18-4-18 "A" for eyes and ears.

B.II

BOARD RECOMMENDS:—

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

Signatures:—

Fred, W. W. Hipwell, Captain, CAMC ..... President.

D. Members { George Hooper, Captain, CAMC

APPROVED

Dated at 26 APR 1918 1916. O.J.O. Dwyer CAPT.
FOR A.D.M.S. CANADIANS, SHORNCLIFFE
For A.D.M.S.

18. Have you had more than one enlistment? If so, give particulars of discharges and re-enlistments, 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 ... No.

20. Have you been issued with a War Service Badge? If so, what class? ... No.

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? ... No.

24. Are you now serving in the C.E.F.? ... No. If not, give:—(a) Date of discharge ... Jan. 23/1918 (b) Reason for discharge ... Demob.

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 ... Not applicable.

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 ... Unit in France - 20th Bn. Oct. 14th 1916 till April 4th - 1918

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? ... No.

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: G. S. Dennis

Place of Residence: Ferguson Falls Ont

Declared before me at: Kingston, Ont

This 23rd day of January 1919.

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

J. E. Day

POST DISCHARGE PAY.

Date paid.	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
			183	4 20

Certified Correct.

District Paymaster.

20-345

183

335

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

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 Gordon 2. Surname Dennis

3. Rank Pte 4. Original Unit 109th Bn. 5. Reg. No. 726343

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

7. Date of enlistment in the C.E.F. Dec. 11th - 1915 ✓

8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge not applicable

9. Relationship of such dependent not applicable

10. Address, in full, of such dependent not applicable

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

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

109th Bn. Aug. 10th - 1916

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

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

15. Give total length of time which you served on active service, whether in Canada or Overseas, setting out particulars of units on whose strength you served Canada - all Eng. - July 31th 1916 - to - 109th Bn. - to - France Oct. 4th - 1916 - to - 28th Bn. until April 4th - 1918 to Eng. to Canada Dec 11/18

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.

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

H.Q. Reference

No. 725543 Rank PRIVATE Unit 109 BATT

Surname DENNIS.

Christian names GORDON, SAMUEL

Kindly forward Medals, to which I am entitled by reason of my service in Canada England and FRANCE
(Theatre of War)

with 20 BATT. & 2 Employment Co.
(Unit with which served in Theatre of War)

No.

Street

Town Fenelon Falls Ont.

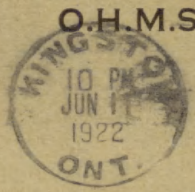
County Victoria

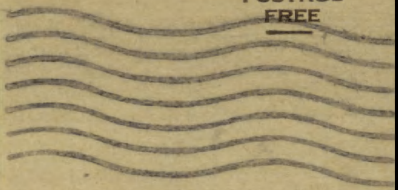
JUN 12 1922

G S Dennis
(Signature)

(WRITE IN BLOCK LETTERS AND IN INK)

O.H.M.S.





SECRETARY, MILITIA COUNCIL,

DIRECTOR OF RECORDS,

OTTAWA, ONT.

200M-10-20

Date of Enlistment 31.12.15.

1-5-16

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

D

3103

Date of Assignment

Aug 1-16.

RATE OF SEPARATION ALLOWANCE

~~20~~	25		

1-12-17
P.C.-3257.

RATE OF ASSIGNMENT

15.			

PARTICULARS OF SEPARATION ALLOWANCE

No. 725543-

Rank pte. Promoted Reverted Discharge

Soldier's Name G. S. Dennis

Battalion 109- th. Batn. C. Coy.

Beneficiary Mrs. Annie Dennis

Relationship Mother

Address

PARTICULARS OF ASSIGNMENT

Name Mrs. Annie Dennis

Address Fenelon Falls. Ont,

Change of Address

1

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total		REMARKS
1917						4524 55
Dec. 31		400 -	255 -	655 -		S.A. closed 31/18 ruling S.B. 15 2/18. Soldier
Jan. B	67122	30	15	45	G	not sole support. Dt. Nolan 18 2/18.
Feb 9	96514	~~430~~ 4mo	15	15		
March a	123782		15	15		
April B	6134		15	15		
May O	14894		15	15	R	
June I	25978		15	15	R	
July Q	30653		15	15	R	
Aug I	34900		15	15	Q	
Sept K	42849		15	15	Q	
Oct O	51881		15	15	Q	
Nov J	59961		15	15	R	OK Held
Dec J	64084		15	15	O	
		430	435	865		

A/c Closed 31-12-18

Ret'd per Corsican

Date 25-12-18 M.F.W.187 30-12-18

Closed Snodell

Dest. 1-1-19 #59906.

M. F. W. 128.
4'OM., 6-7-17 72-30-1141
L. L. 22320—M. & D. 1993.

CONSOLIDATED ACCOUNT

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

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

M. F. W. 128.
4'OM. 6-7—1772-39-1141
L. L. 22820—M. & D. 7903.

AUDITOR 2FM | PAYMASTER

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

M. OR S. | REGT. No. 725543 | RANK Pte | NAME (IN FULL) Dennis G. (BLOCK LETTERS, SURNAME FIRST)

NEXT OF KIN | RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? No | DATE EFFECTIVE

TO WHOM PAID | RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY
Pte. Dennis, Gordon, Fenelon Falls, Ont.		

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

PLACE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

DATE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

ASSIGNED PAY, $ 15— | DATE EFFECTIVE

PAYABLE TO Mrs Annie Dennis | RELATIONSHIP | ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS Fenelon Falls Ont.

D-343

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE

DISCHARGED | PLACE Kingston | DATE 23.1.19 | REASON | AUTHORITY | IF ENTITLED TO POST DISCHARGE PAY

335

	MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	C.	$	C.	TOTAL CREDITS $	C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	DATE	COL. NO. 2 NO.	DATE	COL. NO. 3 NO.	DATE	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.	$	C.	TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.	PARTICULARS OR REMARKS
Balance from previous account	Dec 31/18																																					
	Jan 1/19	23	1 10/100	25	30	12 — 35 —		16	09	88	39							15 —		73	39											88	39					2341 Do 257 Sabs 15 days
																																						Discbyd Clothing 2360
	Jan 23/19	183 days.		W. S. G.				420	00			15438						70	00																			
	Mar. 4/19											G234569						70	00																			
	Mar. 25/19											G238680						70	00																			
	Apr. 24/19											G321519						70	00																			
	May 21/19											G328480						70	—																			
	June 16/19											927989						70	—																			
																		420	00																			

W. S. G. form received

MONTH	PAY AND F. A.				OTHER CREDITS				TOTAL CREDITS		ACQUITTANCE ROLLS						CASH PAYMENTS						ASSIGNED PAY		REGI-MENTAL CHARGES		OTHER CHARGES				TOTAL DEBITS		BALANCE				PARTICULARS OR REMARKS
	NO. OF DAYS	RATE	AMOUNT								COL. NO. 1		COL. NO. 2		COL. NO. 3		COL. NO. 1		COL. NO. 2		COL. NO. 3												DEBIT		CREDIT		
			$	C.	$	C.	$	C.	$	C.	NO.	DATE	NO.	DATE	NO.	DATE	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$		

ON HIS MAJES

NATIONAL ECONOMY.

FASTEN E
OPEN by cu

MEDICAL CERTIFICATE

(For Information of Separation Allowance Board).

1.	Name and regimental number of soldier in respect of whom Separation Allowance is claimed.	Pte. Samuel Gordon Dennis No 725543 20 Bn Canadian
2.	Name and age of of said soldier,	Pte Samuel Gordon Dennis aged 20
3.	Is said Soldier a chronic invalid and totally incapacitated?	Yes is on active service in France
4.	Of what nature is disability?	—
5.	From what date has this total incapacity been existent?	—
6.	How long is total incapacity likely to continue and what will be effect on earning power?	—
7.	If not totally incapacitated by what per cent in your opinion is capacity for work reduced, and from what date?	—
8.	Are you the regular attending physician?	Yes

Assigned Pay Branch
OCT 23 1917

I certify that the above statements are correct.

H. H. Graham M.D.
Physician.

Fenelon Falls .....Place.

October 20th..Date. 1917