

OR Dec 1st

"C" Coy.

ATTESTATION PAPER.

No. 7255-37

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

ORIGINAL

(ANSWERS.)

1. What is your surname? Donaldson
- 1a. What are your Christian names? Arthur
- 1b. What is your present address? Fenelon Falls
2. In what Town, Township or Parish, and in what Country were you born? Fenelon Falls
3. What is the name of your next-of-kin? Millie Donaldson
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? 17 March 1894
6. What is your Trade or Calling? laborer
7. Are you married? no
8. Are you willing to be vaccinated or re-vaccinated and inoculated? yes
9. Do you now belong to the Active Militia? no
10. Have you ever served in any Military Force? no
If so, state particulars of former Service.
11. Do you understand the nature and terms of your engagement? yes
12. Are you willing to be attested to serve in the }
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? } yes

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Arthur Donaldson, 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.

Signature of Recruit: Arthur Donaldson
 Date: Dec 10th 1915 Signature of Witness: Wm. A. Campbell

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Arthur Donaldson, 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.

Signature of Recruit: Arthur Donaldson
 Date: Dec 11 1915 Signature of Witness: Wm. A. Campbell

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 11th day of December 1915.

Signature of Justice: Wm. A. Campbell

Description of Arthur Donaldson on Enlistment.

Apparent Age.....21 years8 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Distinctive marks, and marks indicating congenital peculiarities or previous disease.

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

Height.....5 ft. 8 ins.

Scar on left eye

Chest measurement. (Girth when fully expanded.....35 1/2 ins.
 Range of expansion.....2 1/2 ins.)

Complexion.....Dark

Eyes.....Hazel

Hair.....Black

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

CERTIFICATE OF MEDICAL EXAMINATION.

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

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

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

Date.....Dec. 11 1915.

J. McCulloch
H. Bayd..... Capt.
 Medical Officer.

Place.....Lindsay

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.

.....Arthur Donaldson.....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]..... Lt. Col. (Signature of Officer)

Date.....JAN 12 1916 1916.....O. C. 109th Overseas Battalion, C. E. F.

REGIMENTAL DOCUMENTS

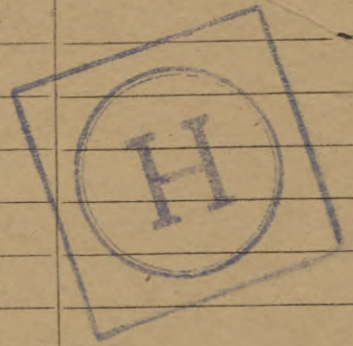
NAME *DONALDSON, Arthur*

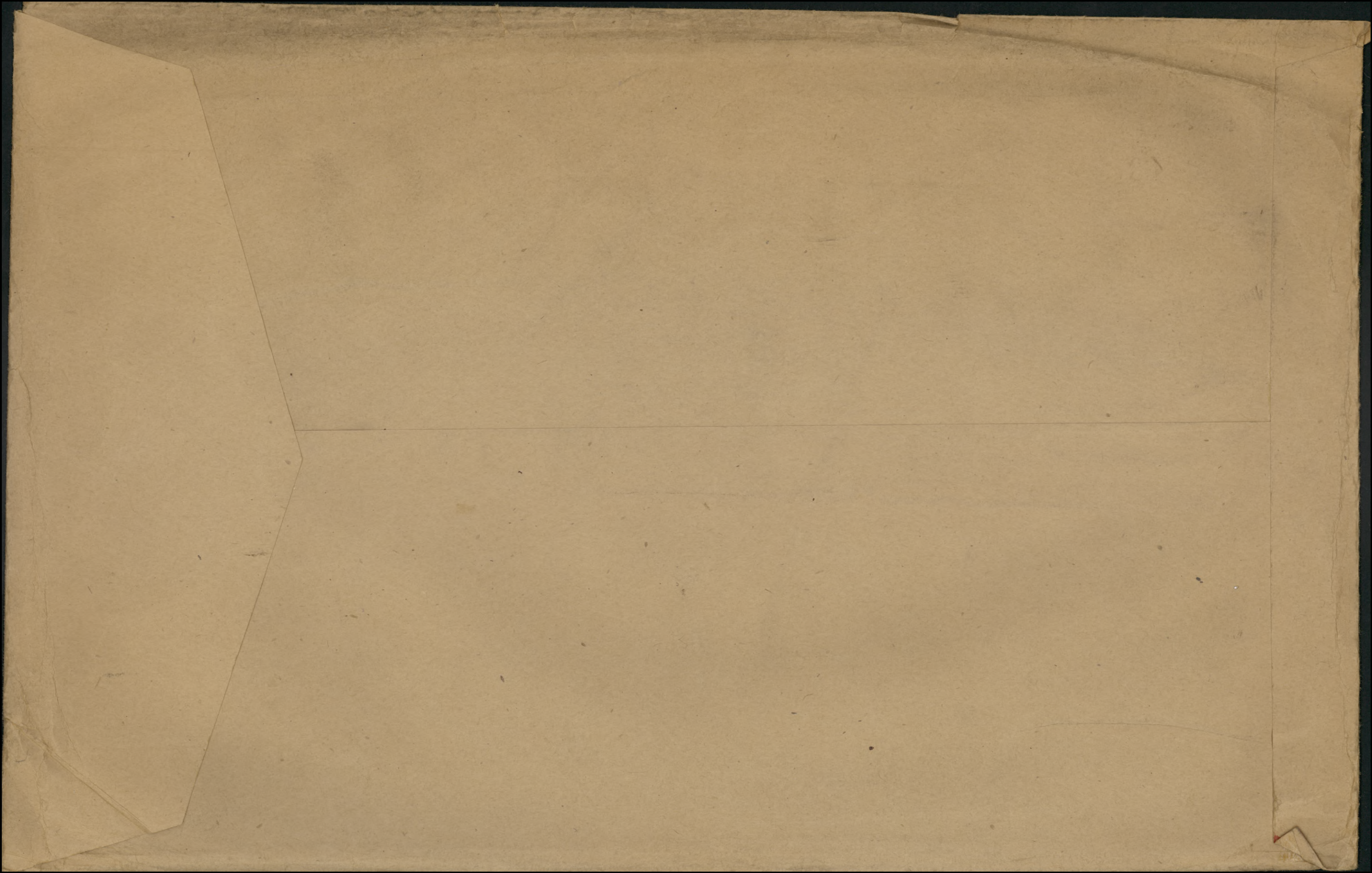
REGT. NO. *725-537*

UNIT *109th Bn*

H. Q. FILE NO.

CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY	
3/1 ATTESTATION PAPER (M.F.W. 23, 133, or 51)	<i>28</i>			<i>20244</i>	DEATH Category	
3/1 CASUALTY FORM (M.F.W. 54 or A.F.B. 103)						
1 TRAINING HISTORY SHEET (M.F.W. 113)						
1 FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)						
REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)						
COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)						
3 MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)						DISCHARGE Category <i>Remob.</i>
1 DENTAL HISTORY SHEET (M.F.B. 465)						
1 MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)						
3 MEDICAL EXAMINATION (M.F.W. 129)						
TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)						
PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)						
DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)						
1 LAST PAY CERTIFICATE (M.F.W. 44)						
1 PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)						
PARTICULARS OF CHARACTER (A.F.W. 3226)						
1 COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)						
1 <i>Call 5009</i>						
1 <i>286 132</i>						
1 <i>6103</i>						
1 <i>MFW 67</i>						
1 <i>97 21237</i>						
1 <i>MFW 192</i>						
4 <i>Misc.</i>						
1 <i>Rec Card</i>						
1 <i>Pay Card</i>						





3

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
 Regimental No. 725537 Rank pt. Name Gordon Astus
 C. E. F.

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

Date of promotion to } Date of appointment } Numerical position on }
 present rank } to lance rank } roll of N. C. Os. }

Extended Re-engaged Qualification (b)

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
<u>18.5.19.</u>					<p>T.O.S. No. 2 District Depot, Part II, D.O. No. <u>143.</u></p> <p>Dis. <u>2.D.D. June.23rd.1919. Pt.11# 171</u></p> <p><u>Graham Johnston</u> <i>O. C. Discharge Sections, No. 2 District Depot</i></p> <p><u>M. Heuman</u> Lieut- for O. G. No. 2 D. D.</p> <p><u>D & P</u> <u>H</u></p>

(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, Shoeling Smith, etc., etc., also special qualifications in technical Corps duties.

Casualty Form

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				

[Handwritten signature]

Casualty Form—Active Service.

Regiment or Corps 6th Can Res Bn

Rank Pte Surname Donaldson Christian Name Arthur

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

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			
<u>27-3-19</u>	<u>O C 6th Res</u>	<u>J.O.S. on posting from</u>	<u>Seaford</u>	<u>25-3-19</u>	<u>Pte to Pte 89</u>
<u>1-4-19</u>	<u>Obbith Res</u>	<u>Re-entrained to</u>	<u>Seaford</u>	<u>1-4-19</u>	<u>Pte to Pte 80</u>
		<u>Wing No 2</u>			
<u>23-4-19</u>	<u>Obbith Res</u>	<u>Re-entrained to</u>	<u>Seaford</u>	<u>23-4-19</u>	<u>Pte to Pte 90</u>
		<u>Wing No 2</u>			

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

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				

attached C.C.O. Kinnel Park for
return to Canada. Part II Order
No. _____ Cases to be attached
C.C.O. Kinnel Park on embark-
ing for Canada, Part II Order
No. _____

Commanding _____
Kinnel Park Camp, _____ Wing,

T. O. S. Halifax depot clearing services command, as from 7. 5. 19.
and admitted to hospital 15. 5. 19 part II order no. 136
Dated 16. 5. 19

[Signature]
S. O. S. HALIFAX DEPOT CLEARING SERVICES COMMAND

Discharged from hospital 17. 5. 19

Embl'd Lv'p! - Detic Nos 7 19

and S. O. S. Halifax depot clearing services command to dispersal area. I.
as from 18. 5. 19 part II order 138 dated 18. 5. 19

[Signature]
Lt. Col.
S. O. S. HALIFAX DEPOT CLEARING SERVICES COMMAND

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

M. F. W. 54.
160M. 10-15.
H.Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps 109th OVERSEAS BATTALION, C. E. F.
 Regimental No. 25537 Rank Private Name Donaldson Arthur
 Enlisted (a) 11.12.15 Terms of Service (a) D of W. Service reckons from (a) 11.12.15.
 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) 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				

Embarked Canada Halifax 24.7.16.
Disembarked England. Liverpool 31.7.16.

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

4.12.16 O.C. 109th. Proceeded overseas for service with 38th.Btn. Witley. 3-12-16 D.O.Pt.11 339

Arthur Selting
 ADJUTANT
 109th Overseas Battalion, C. E. F.

6.12.16.
 7.12.16
 16.12.16
 20.1.17
 24.2.17

C.B.D. TAKEN on STRENGTH 38th Havre
 " Left for Unit FIELD
 Unit Joined Unit FIELD

6.12.16 N. R. P.I.O. 722. 21312.16.
 7.12.16 N. R.
 9.12.16 B. 213. DCS. 69 - 31.12.16
 15.1.17 " " 84 - 31.1.17
 23.2.17 293482754 AOS 94

Genod Course 17
13C.F.A. Sew-both hands
4th Div Sel
13C.F.A.

(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, Shoering Smith, etc., etc., also special qualifications in technical Corps duties.

725537
Donaldson
d.

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	11 C.F.A.	S.W. both hands. adm. R.	11 C.F.A.	23.2.17	a36/82758 Dec 96.
3.3.17	38th	WOUNDED IN ACTION	FIELD	22.2.17	B213, DCS 97
10.3.17	11 C.F.A.	S.W. both hands to Duty.	"	3.3.17	a36/82939 Dec 100.
31.5.17	38th	Rejoined unit.	"	4.3.17	K1-16/6471 Dec. 128.
-1 DEC 17	"	14 days leave.		27 NOV 17	B213 PRO. 118-15.12.17
15 DEC 17	Unit	Joined Unit	FIELD	13.12.17	B. 213.
9.3.18	"	One G.C.B.		11.12.17	" 2023-22.3.18.
6.6.18.	38th Bn	STOPPAGES; -36/9 & 1 days pay		28.5.18.	for B2069/5.D.O.56,d-24.6.18.
4.9.18	"	loss of 1 great coat. 36/9 forfeits 1 G.C.B.		2.9.18	17-1300. D.O. 86-11.9.18
12.9.18	"	Missing after action			K1-17-1300. D.O. 89-
		Man reported safe with unit & <u>NOT MISSING</u>			16 SEP 18
14.12.18.	38th	14 days leave to U.K.		10.12.18.	B213, D.O.128-d-31 DEC 18
25.1.18	Records.	Sick. adm. (stop and posted to O.R.D. Seaford. (rev. esp. 24.12.18))		18.1.19.	here up 12.17/286. Dec 8/19.
					Adjutant for Lt. Col. aag. Com. Sec. 3rd Ech. G.H.A.
50.1.19.	C.O.R.D.	fasted from 38th Bn.		Sept. 18/19	PRO 25.

for Lt. Col. 1/c Records. 0m26

LTR

Rank _____ Name DONALDSON, Arthur Reg'l No. 725537
 Unit 109th, Bn. If in perm. Corps, }
 What Unit? } Married or Single Single.

Place and Date of Enlistment Fenelon Falls, 11th, Dec, 1915. Place of Birth Fenelon Falls.

Name and Address, Next-of-Kin Millie Donaldson.
P.O. Fenelon Falls, Ontario, Canada. Relationship Mother

Assigned Pay Monthly \$ _____ Payable to _____
 Relationship _____

Separation Allowance \$ _____ Payable to _____
 Relationship _____

11760
 Filed
 Category

Discharge, Date and Place Reason Character

H. W. & V., Ltd. - 7165-16.

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS. Taken from Official Documents.
Date.	From whom received.				
		Arrived in England per H. M. T. 2810		31-7-16	
4.12.16	06/109th Bn.	SOS on tfr to 38th Bn	Witley	4.12.16	Pt II DO 339
13.12.16.	38th Bn	T-O-S on tfr from 109th Bn	In the field	6.12.16	Pt II DO 242.
13.3.17	✓	Adm No 13 Can Field Amb.	In the field	23.2.17	Cr. Art. SW. Hands.
13.5.17	✓	Tfd. No 11. ✓	✓	23.2.17	Cr. Art. ✓
26.3.17	-	To Duty	-	3.3.17	1157 ✓
22.3.18	✓	Granted one P.C. Badge	✓	11.12.17	Pt II 23.
24-6-18	✓	Forfeit one P.C. "	-		Pt II 56.
16-9-18.	C.O.R	"Missing"	✓	2-9-18	Pt II 320.
11-9-18	38th Bn	Missing after action	✓	2-9-18	Pt II 86

A.F.B. 105
 9 DEC 1916
 REMARKS

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.				
16-9-18	38 th Bn	previously reported missing after action 2-9-18. now reported "Safe with unit"	Widfield	2-9-18	C.O. 2-2323 D/19-9-18 Pt 489
1.2.19	✓	not missing posted to GORD Seaford (sick)	"	18.2.19	D° 8. & GORD D° 25/30 19 6 th Bn 2069
24-3-19	GORD	posted to 6 th Bn	Seaford	25.3.19	8/0 424 5/27-3-19 } M.D. nea Wing Pt 199-26-4-19
23.4.19	6 th Bn	S.O.S. to M.D. 2. Rhyl. 50.1.5.9.	"	23.4.19	8/0 90.
13.5.19	M.D. 2.	Ward. Out of bounds. Awarded. F.P. No. 2.	Rhyl	5.5.19	D° 113
12-5-19	M.D.C.W. 2	S.O.S. to Canada	Rhyl	7-5-19	- 112

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

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

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, if soldier discharged in Canada, this Declaration is to be returned to THE DISTRICT PAYMASTER OF THE DISTRICT IN WHICH THE SOLDIER WAS DISCHARGED, or if soldier discharged in England to be returned to Paymaster General O.M.F. of C., 7, Millbank, London, S.W.

- 1. Christian names *Arthur* 2. Surname *Donaldson*
- 3. Rank *Pte.* 4. Original Unit *109th Bu.* 5. Reg. No. *425534*
- 6. Address, in full, to which future payments of gratuity are to be forwarded
P. O. Favelow Falls
Ont.
- 7. Date of enlistment in the C.E.F. *Dec 1st 1915*
- 8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge. *nil*
- 9. Relationship of such dependent */*
- 10. Address, in full, of such dependent */*
- 11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? */*
- 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:—
- 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? */*
- 14. Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service. */*
- 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. *Three Years Four Months*
109th Bu - 38th Bu - 16th Reserve
- 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*

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? *A. 7. 2nd 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?
24. Are you now serving in the C.E.F.? If not, give:—(a) Date of discharge
(b) Reason for discharge
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
26. Did you at any time serve at the front in an actual theatre of war? If so, give particulars of one unit in which you served at the front, and dates of such service with that unit
27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment? *A. 7. 2nd*
- (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: *Arthur Donaldson*

Place of Residence: *Fenelon Falls*

Declared before me at: *Seaford*

This *7th* day of *April* 19*19* *Ontario*

Signature of Barrister of the Supreme Court Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner for the Administration of Oaths under P.C. 2767, dated 11th Nov., 1918.

J. B. Hoffmann
Onagwi
6th Bro. Br.

POST DISCHARGE PAY.

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

Certified Correct.

District Paymaster.

CERTIFIED PARTY
DOCUMENTS
AGREE WITH
Hilpatrick

DEPARTMENT OF MILITIA AND DEFENCE.

DISCHARGED

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 ARTHUR 2. Surname DONALDSON
3. Rank PTE. 4. Original Unit 109 Bn 5. Reg. No. 725537
6. Address, in full, to which future payments of gratuity are to be forwarded
Fenelon Falls...Ont. G.P.O.
7. Date of enlistment in the C.E.F. 1st Dec. 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 " "
10. Present address, in full, of such dependent " "
11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier ?
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:—
LEFT CANADA JULY 20-16 & returned 15th MAY 1919.
(109 Bn)
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 units 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 3 yrs. 6 mos. 12 days
109th. Bn. 38th. Bn.
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.

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 received, 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 **June. 23rd. 1919.** (b) Reason for discharge **"~~Annex~~ Demobilization."**
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. France (9 Dec. 5-16 untill 8th Dec. 1918) (38 Bn)**
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: **Donaldson D.**

Place of Residence: **FENELON..FALLS..ONT.**

Declared before me at: **TORONTO.**

This **20th** day of **May** 19... **19.**

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

Stipendiary Magistrate

POST DISCHARGE PAY.

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

Certified Correct.

District Paymaster.

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

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

No. 72537 Rank pte Surname Donaldson
(Give name in full)
 Unit or Corps 602 Birthplace Arthur Fenelon Falls Ont.

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

1. GENERAL DESCRIPTION:

Physique good Weight 175 lbs. Height 5 ft. 9 in. Colour of Eyes brown
 Nutrition good
 Pulse 72 regular
 Condition of arteries normal
 Vision Rt. 20/20 Left 20/20
 Hearing (conversational voice) Rt. 25' ft. Left 45' ft.

Identification marks, scars, or deformities.
(Give cause and date of origin.)
Short linear scar
extending over bridge
of nose
with indentation from
anterior angle of orbit

Opinion as to general health and physical condition good

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

Nervous System No Genito Urinary System No Cardio-Vascular System No
 Special Senses No Integumentary System No Respiratory System No
 Disturbance of mentality No Muscular System No Digestive System No
 Osseous and Joint System No Any other general condition No

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

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at..... (Overseas)

Date Signed M.O.

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

Signature

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

THIS SECTION FOR USE IN CANADA—

Examined at *St. John's*..... (Canada)

Date *16. Aug. 19...* Signed *J. Chueber*..... M.O.

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

Signature *Donaldson*.....

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

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

[OVER]

General Service

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

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

No. 725537 Rank 1st Lt Surname Donaldson
(Give name in full)
Arthur
Unit or Corps no 2 A Dept Birthplace London Falls

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

1. GENERAL DESCRIPTION:

Physique Good Weight 175 lbs. Height 5-9 ft. Color of Eyes brown
Nutrition Good
Pulse 72
Condition of arteries normal
Vision Rt. 20 Left 20
Hearing (conversational voice) Rt. 25 ft. Left 25 ft.

Identification marks, scars, or deformities.
(Give cause and date of origin.)
Scar, left eyebrow - chertwood

Opinion as to general health and physical condition Good

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

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

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

Wernicke's - no albumen - no sugar
no haemorrhoids - no hernia
no varicose veins
no scabies
VD 9 Jan 1919 - good recovery
VD 10 May 1919 - good recovery

APPROVED
MAY 27 1919
R. Richardson CAPT.
FOR A. D. M. S. M. D. 2

(If space is insufficient, continue on back of form.)

[OVER]

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at.....(Canada)

Date SignedM.O.

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

Signature

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

THIS SECTION FOR USE IN CANADA—

Examined at *Park Schore*.....(Canada)

Date *May 26/19*..... Signed *J. C. Greenlee*.....M.O.
captain

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

Signature *A. Donaldson*.....

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

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

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

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

No. 795637 Rank PTE Surname DONALDSON
(Given name in full)

Unit or Corps 6th REG Birthplace Funston Falls, Ont.

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

I. GENERAL DESCRIPTION:

Physique Good Weight 172 lbs Height 5 ft. 9 in. Colour of Eyes Brown
 Nutrition Good
 Pulse 78
 Condition of arteries Good
 Vision Rt. 20/20 Left 20/20
 Hearing (conversational voice) Rt. 20 ft. Left 20 ft.

Identification marks, scars, or deformities.
(Give cause and date of origin).
 Scars at outer
 canthus left eye
 hit when a child
 Scars on left leg
 cut by a nail when a child.

Opinion as to general health and physical condition

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

Nervous System No Genito Urinary System No Cardio-Vascular System No
 Special Senses No Integumentary System Yes Respiratory System No
 Disturbance of Mentality No Muscular System No Digestive System No
 Osseous and Joint System No Any other general condition No

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

U. S. G. Jan 17th 1918. Specialists report 2/4/19. No evidence of U. S. G. sig. O. F. Eastman Camp
D. W. hands slight - Recovered

EXAMINATIONS

THIS SECTION FOR USE OVERSEAS—

Examined at Seaford (Overseas)

Date apr 30 / 19

Signed R. Donaldson M.O. Edw

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

Signature R. Donaldson

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

THIS SECTION FOR USE IN CANADA—

Examined at(Canada)

Date

Signed M.O.

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

Signature

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

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

MEDICAL HISTORY SHEET

Surname _____ Christian Name _____

Examined { on _____ day of _____ 191____
 { at _____

Approved by _____

Birthplace { City or Town _____
 { County _____

Rank _____ M.O.

Apparent age _____

Trade or occupation _____

M.O.

Height _____ feet _____ Inches

M.O.

Weight _____ lbs.

M.O.

Chest measurement { Minimum _____ inches
 { Maximum expansion _____ inches

M.O.

M.O.

Physical development _____

M.O.

Small-pox Marks _____

M.O.

Vaccination Marks { Arm Right Left
 { Number _____

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT

When Vaccinated last _____

M.O.

(a) Marks indicating congenital peculiarities or previous disease _____

M.O.

M.O.

(b) Slight defects but not sufficient to cause rejection _____

Date	Result	VACCINATIONS

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.

Enlisted on _____ day of _____ 191____ at _____

	CORPS	REG'TL NUMBER	HABITS	DATE
Joined on enlistment				
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

STATION	DATE	DISEASE	RESULT
Dart School Vermont	May 26 / 19	nil -	A J. G. Greenleaf captain

N.B.—This sheet to be disposed of in accordance with instructions in the Regulations for Army Medical Service, on the man becoming non-effective; the date and cause being stated on next page.

Surname *Dowdson* Christian Name *Arthur*

STATION	Date of Arrival at the Station	DATES OF						DISEASE	Number of days in Hospital	Remarks on nature of the disease; how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer
		Admission into Hospital			Discharge from Hospital						
		Day	Month	Year	Day	Month	Year				
		15	May	19	14	May	19	<i>Lourelitis 3</i>		<i>Subacute laryngitis fit Not recently but Lourelitis white en route to Canada G.S Centre. no evidence of ulcers. Dorsch to his aunt.</i>	<i>J. Schuchert</i> <i>D. P. P.</i>

725537.

ORIGINAL

ORIGINAL

MEDICAL HISTORY SHEET.

Surname Donaldson Christian Name Arthur

Examined { on 11 day of December 1915
at Fenelon Falls
Birthplace { City or Town Fenelon Falls
County Ontario

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

Apparent age 21 years
Trade or occupation Laborer
Height 5 Feet 8 Inches.
Weight 140 Lbs.
Chest measurement { Minimum 33 inches.
Maximum expansion 35 1/2 inches.
Physical development Good
Small-Pox Marks None

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

Vaccination Marks { Arm Right None Left Two
Number Two
When Vaccinated last March 13th 1916

Date	Result	VACCINATIONS.
		M.O.
		M.O.
		M.O.

(a) Marks indicating congenital peculiarities or previous disease None

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
		M.O.
		M.O.
		M.O.
		M.O.

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

Enlisted on 11th day of December 1915 at Fenelon Falls

	Corps.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>109th Bn</u> <u>C.E.F.</u>	<u>725537</u>		<u>11-12-15</u>
Transferred to.....	<u>38th Bn</u>	<u>2/12/16</u>		

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.

N. B.—This sheet to be disposed of in accordance with instructions in the Regulations for Army Medical Service, on the man becoming non-effective; the date and cause being stated on next page.

CANADIAN

Surname *Ronaldson* Christian Name *Arthur*

STATION.	Date of Arrival at the Station.	DATES OF						DISEASE.	Number of days in Hospital.	Remarks on nature of the disease : how induced : if mild or severe : if completely recovered from ; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of Inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
		Admission into Hospital.			Discharge from Hospital.						
		Day	Month	Year	Day	Month	Year				
No 13 C.F.A.		23	2	17	23	2	17	S.W. Hands			A147
No 11 C.F.A.		23	2	17	3	3	17	do.	To duty	Duplicate Medical History Sheet posted to here. 1923	A147-A157 VH
<u>CANADIAN HOSPITAL, ETCHINGHILL, LYMPHE,</u>		17	1	19	24	3	19	Gonorrhoea	67	An acute attack of ant. post urethritis with Epididymitis one admission - Treated with Iodine - Scotts Dressing C.F.C. vaccines - May Sulph. trioxide Progress good. Mild prostatic treated with massage + Iodine Sitz Baths - Now dry, urines clear, regular stream - Prostate regular. Apparent cure.	C. Tennant Capt. Royal
S.S. Celtic		12	5	19	15	5	19	Tonsillitis	7/10	Given 16,000 units anti-Texas (septheria) Trau. to m. Hoop m. p. 6	C. F. Purvis Capt.

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

DIRECTIONS TO
DENTAL OFFICERS

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters)

DONALDSON A

REGIMENT 6th Res

RANK Pte

No. 725597

Date of Examination in England 4/4/19

Date of Examination in France



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

PRESENT DENTAL REQUIREMENTS

1. FILLINGS

2. EXTRACTIONS

3. CROWNS

4. DENTURES

(a) Full Upper

(b) Part Upper 3 5 8 10 12 14

(c) Full Lower

(d) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT? NO

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

(a) In Canada

(b) In England

(c) In France

Signature of Dental Officer

F. Hinds
Capt.

UNITED STATES DEPARTMENT OF AGRICULTURE
BUREAU OF PLANT INDUSTRY

REPORT OF

POSTER

ETC

PLANT

PLANT INDUSTRY
BUREAU OF PLANT INDUSTRY
WASHINGTON, D. C.

PLANT INDUSTRY
BUREAU OF PLANT INDUSTRY
WASHINGTON, D. C.

PLANT INDUSTRY

PLANT INDUSTRY

Handwritten signature or initials

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

DISTRICT

M.F.B. 465.
-6-18.
338-050.

NAME OF SOLDIER

Donaldson A

REGIMENT

RANK

P G

No. *72559*



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.

	Date	Amalgam	Temporary Filling (a) G. P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhoea	Synthetic Porcelain	Extracting	DENTURES			Gold Clasp	Gold Filling	CROWNS		Bridge Work	OPERATOR	Military District	REMARKS
												U	L	P			Gold	Porcelain				
Condition on first Examination																						
DISCHARGE EXAM.																						
CASUALTY CO. No. 2 D. D. } CERTIFICATE ISSUED FOR																						
DATE <i>26/12/19</i>																						
<i>W. H. D. Denton</i>																						
<i>W. H. D. Denton</i>																						

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 726537 (Rank) Pte.

Name (in full) DONALDSON Arthur. enlisted in

the 109th. Bn.

CANADIAN EXPEDITIONARY FORCE at Penslon Falls, Ont. on the 11th.

day of December. 19 15.

HE served in ENGLAND AND FRANCE.

and is now discharged from the service by reason of

" Demobilization. "

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

Age 25. Marks or Scars

Height 5' 8" Trace scars on left arm.

Complexion Dark G.S.W. Both Hands 22-2-17.

Eyes Hazel

Hair Black Gold Stripe On c.-----1.

A. Donaldson

Signature of Soldier

Graham Robertson
Issuing Officer

Rank

Date of Discharge June. 23rd. 1919

No. 2
 JUN 23 1919
 DISTRICT DEPOT

*O. C. Discharge Sections,
No. 2 District Depot*

Signed at Toronto, Ont. this 23rd. day of June. 19 19

in Military District No. 12.

File Reference No. R.L.

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.

EXPEDITIONARY FORCE
Certificate

War Service Badge
Class A
No. 219569 Issued

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

No. _____ (Rank) _____ Name _____

Unit _____

Address on Discharge _____

Character and Conduct _____

Former Occupation _____

Special Qualifications of Value in Civil Life _____

Medals and Decorations _____

Remarks _____

Signed at _____ this _____ day of _____ 19 _____

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

Name of Officer

Rank

Appointment

[Faint purple ink stamp or scribble]

CASE HISTORY SHEET.

2290 02/1947

Hospital: Halifax U.S.
 Station: 24
 No. 25537 Rank: PTC Name: Donaldson Age: 24
 Unit: 6CD Completed years of service: 35 1/2 Where and how long: 6
 Date of admission: 15.5.1919 Date of discharge: MAY 17, 1919
 Diagnosis: granulites? Place of origin: St. Catharines, Ontario, Canada

CONDITION ON ADMISSION AND PROGRESS OF CASE

Admitted to hospital because of recent
 tonsillitis. Had a mild attack enroute
 to Canada on St. Catharines. No manifestation
 of illness at present. Apparently fit in every
 particular. No reason for detention in hospital.

FAMILY HISTORY

(Tuberculosis, mental or nervous diseases.)

TREATMENT

(Especially any specific or special form.)

Nil

CONDITION ON DISCHARGE

(and disposal made of case.)

Discharged to his unit
J. J. Church
 Medical Officer i/c case.

Date: 16.5.19

129018

CASE HISTORY SHEET

4/5/10

MAY 17 1919

Condition on Admission and Progress of Case

Examination

Examination

Examination on Discharge

Date

CLINICAL CHART.

Corps 38th Batt. G.C.D.

Hospital Station Coxwell St.

No. 725537. Rank and Name Pte Donaldson A. Age 24. Service _____

Disease Tonsillitis. Date of Admission 15-5-19 Date of Discharge 17-5-19 Result Reent Serial No. A. & D. Book

Dates of Observation	15		16		17		18																																	
	TIME		TIME		TIME		TIME		TIME		TIME		TIME		TIME		TIME		TIME		TIME		TIME		TIME		TIME		TIME		TIME		TIME		TIME		TIME			
Days of Disease	1		2		3																																			
Temperature Fahrenheit	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.
107°	.8	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
106°	.6	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
105°	.4	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
104°	.2	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
103°	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
102°	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
101°	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
100°	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
99°	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
98°	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
97°	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
Pulse per Minute	24		20		/		/		/		/		/		/		/		/		/		/		/		/		/		/		/		/		/			
Respirations per Minute	18		15		/		/		/		/		/		/		/		/		/		/		/		/		/		/		/		/		/			
Motions	1		/		/		/		/		/		/		/		/		/		/		/		/		/		/		/		/		/		/			

Signature J. H. Duncker In charge of case.

CLINICAL CHART

Corn

No.

Room

Date of Discharge

Result

Physician

Admission

Discharge

Temperature

101

100

102

104

103

102

101

100

99

98

97

M. E. R. 222

W. H. R. 222

H. J. R. 222

Signature

In charge of case

Base Hospital, Toronto, May 26 1919

To Officer Commanding,

I. I. I.

Reg. No. 1725-537 Rank: Pvt Name Donaldson Unit: I. I. I.

The above noted Soldier has been examined in accordance with instructions of D.C.M.S. Circular Letter No. 25.

The Soldier may be discharged as cured of venereal Disease within the meaning of that letter.

W. J. Johnson

Captain

For Officer Commanding Base Hospital



1917
1918
1919

163

for the purpose of
the following
of the year 1917
of the year 1918
of the year 1919

1917
1918
1919

6th Canadian Reserve Battalion
30-3
.....1919.

To: Officer i/c Clinic,
Ravenscroft, Seaford.

Donaldson R. A.

.....
.....
725537
.....

The marginally named, accompanied by his Medical Documents,
is reporting to you for special report on:-

V.O.G.

Please return this report to the above Unit on completion.

M.O.....Capt.C...M.G.

SPECIALISTS' REPORT ON ABOVE.

no evidence V O G

of Donaldson

Seaford, Sussex.

.....Capt.C...M.G.
Officer i/c Clinic, Ravenscroft.

.....
24-19.1919.
.....

P.O.

W. B. ...
P.O. ...

11-11-11

CANADIAN EXPEDITIONARY FORCE.

M.F.W. 44.
1188 (D.P.) 250M.-12-18.
1772-89-908.

LAST PAY CERTIFICATE

Regimental No. 725537 Rank Pte. Name Donaldson A.
(Surname first)
 Unit # 2 District Depot who was* discharged
 On June 23 1919, to.....
*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from May 23 to June 23 1919.
 the inclusive date of transfer or discharge.

	Dr.	Cr.
Bal. Dr. or Cr. from prev. month		
Regimental Pay <u>32</u> days at \$ <u>1.10</u> c		35 20
Field Allowance		
Separation Allowance		
Clothing Allowance		35 00
Post Discharge Pay		70 00
*Other Credits <u>Cheques deposited</u>		99 36
Advances <u>116520 for 25⁰⁰, 116317 for 5⁰⁰</u>	30	
Separation Allowance and Assigned Pay Cheque No.		
*Other Charges <u>Clothing all chgd back</u>		35 00
<u>W.S. of</u>		70 00
Balance on transfer or on discharge, cheque No. <u>118119</u>	104 56	
Total	229 56	239 56

*Give particulars.

Surname **Donaldson** Christian Name or Names **A.** Reg. No. **725537**
 Rank **Pte.** Unit **38th Bn** Co. **Co.** Troop Batty
 Hospital **13 Can. Field Amb.** Date of Admission **23-2-17.**
 Transferred **11 Can. Field Amb.** Hosp. **2-17.**
Can H. C. Kinghill. Hosp. **18.1.19**
 Hosp.
 Hosp.

Diagnosis **S.W. Hands.**
~~**W.Y.D. "L"**~~ **(auth amend 20-5-19)**
 (1) **V.D.G. h.**
 Later Diagnosis (if changed)
 (2)
 (3)

Additional Diagnosis: if more than one state present

DISPOSITION

To Duty 3-3-17 Date
Disch 25.3.19
 C. L. 13-3-17 A147
 REMARKS
 - 26-3-17 @ 157
 16-9-18 @ 390-9 Reported Missing 2-9-18
 19-9-19 A 323 now not missing (Safe with
 24-1-19 B426/1 (unit) Adm on leave from France
 28-3-19 B480
 17-5-19 B 518 Ref. B480 report N.Y.D.O.
 changed to V.D.F.

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

L. DONALDSON, Arthur

*Name Rank **Pte.** Regtl. No. **725537**

Original unit Present unit **109th. Bn** M. or S. Age **25** Religion **Meth** Fyle Depot Ref. H.Q.

Port, ship, and date of arrival

Next of kin **Mother Mrs. M. Donaldson Fenelon Falls ..Ont.**

Address on leave **same.**

Address on discharge **same.**

Transportation issued Yes No Date **23-6-19.** Character on discharge

Previous occupation **Labourer** Date and place of enlistment **Fenelon Falls 14th. Dec. 1915**

Diagnosis **DEMOB'N** Date of Medical Boards **16-6-19.**

Date.	Remarks.	Pt. 2 Order No.
<i>T.O.S.</i> 18-5-19	Posted to bas. Co. Park School from Clearing Services Command	143
23-6-19	S.O.S. DISCHARGED "DEMOB'N" (ENT'D TO W.S.G.)	171

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

Ms No 6

No. 725537 RANK

Pte.

NAME

Donaldson. R.

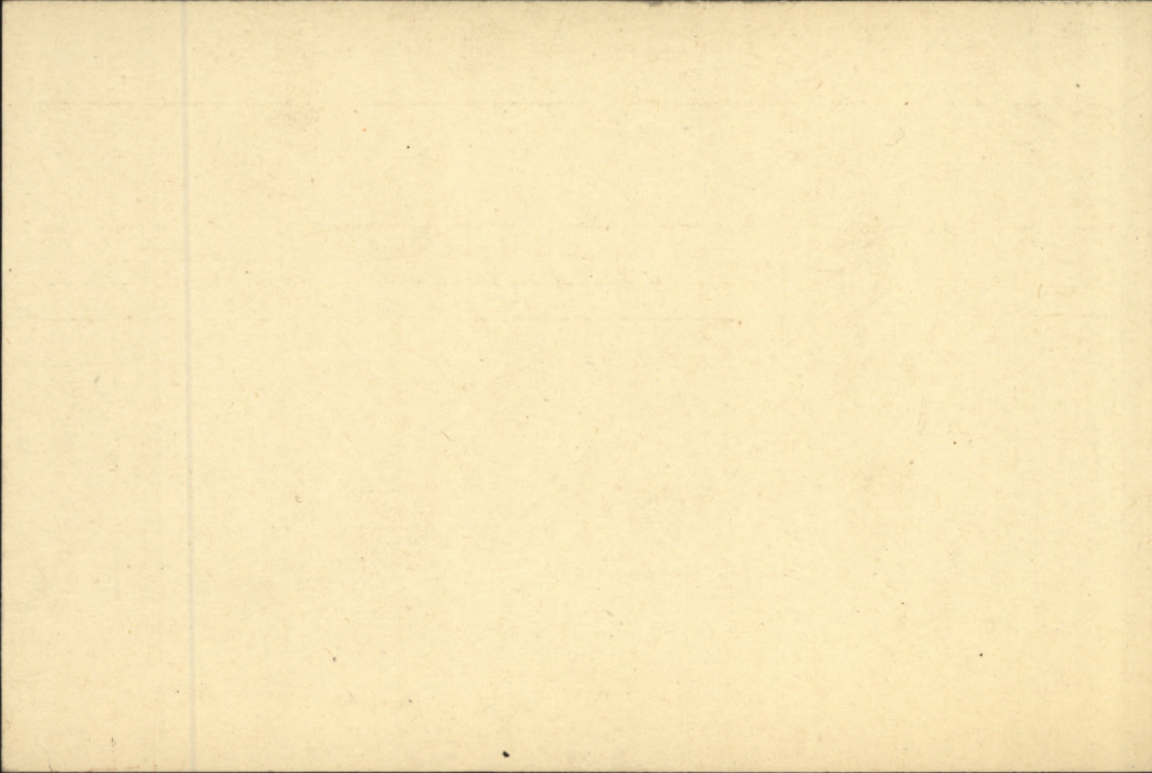
T. O. S. 1-12-15. UNIT

D. O. 20. 12-12-15. 409th. Battalion.

M. D. 3

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915 Dec 1.	1915 Dec 31	✓		
1916 Jan.	1916 Feb.	✓		
	Mar.	✓		
	April.	✓		
	May.	✓		
	June.	✓		
	July.	✓		

UNIT SAILED
JUL 23 1916



SURNAME.

Donaldson

CHRISTIAN NAMES

Arthur

REGL. No.

72 5537

RANK

Pte.

UNIT

109th.

FORMER CORPS

Nil

NEXT OF KIN.

NAMES IN FULL

Donaldson Mrs. Millie

RELATIONSHIP TO SOLDIER

mother

ADDRESS

Fenelon Falls, Ont.

CHANGE OF ADDRESS

COUNTRY OF BIRTH

Canada Fenelon Falls Ont.

DATE

Mar. 17th 1894

PLACE OF ATTESTATION

Fenelon Falls

DATE

Dec. 11th 1915

O/S. 23-7-16 $\frac{488}{12}$

R/C. 15-5-19 $\frac{323}{10}$ Pte.

2 18-5-14
100 143: 23-5-19
CARD NO. 200
XB
As. Dis 23-6-19
Emol. FOLL.
20.1717 20-6-19
#2.00
Batt.

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

MARRIED

SINGLE

WIDOWER

TRADE OR CALLING

yes,
Laborer

RELIGION

Methodist

DESCRIPTION.

APPARENT AGE

21 YEARS

8 MONTHS

HEIGHT

5 FEET

8 INCHES

CHEST MEASUREMENT

35 1/2 INCHES

EXPANSION

2 1/2 INCHES

COMPLEXION

Dark

EYES

Hazel

HAIR

Black

DISTINGUISHING MARKS

Scar on left eye.

MEDICAL EXAMINATION.

PLACE

Lindsay

DATE

Dec. 11th 1915

REGT'L No 725537

H. Q. FILE No. 649-

NAME

Donaldson Arthur

RANK AND CORPS

Pte. 38th Bn. (form. 109th Bn.)FOLLOWS
No. 1.

CABLE

No.

DATE

NATURE OF CASUALTY

FOLLOWS

No.	DATE	NATURE OF CASUALTY
m. 98.	13-3-17.	Adm. to #13 Fld. Amb. Feb. 23 rd 1917. (L.S.W. hands)
35-5.		
25-38	12-9-18	Rep. Miss Sept. 2 nd 1918
25-32	11-29-18	not. Mrs. Millie Donaldson (mother)
		Senelon Falls Ont.
25-22	20-9-18	Prev. rept. Miss. now. not. Miss.
A.F. 9325	9-9-18	Safe with unit.

LIST No

HOSPITAL

DATE OF
ADMISSION

REMARKS

a 147.	# 13 ban. fld. Amb.	23-2-17.	Sw. Hands.
a 147 (3)	to # 11 " " "	23-2-17.	" "
a 157	" " " " " " " " " "	3-3-17	" " " " " " " " " "
B 426	Can. Stehling pull	18-1-19	from road duty.
B 480	Dish	25-3-19	Sept (9) 20

Name **Donaldson** Rank **Pte.** Reg. No. **725537**
 Unit **38th Bk.**
 Next of Kin **Millie Donaldson, Fenelon Falls, Maine.**

Arthur R.L. 25. D. 2913.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1915						
2-9	<u>Missing after Action</u>					8538 ✓
	It is O.S.B.	11-9-18		2320		3317
no date	was left: Safe with unit.			2722		8552
	It is O.S.B. 89	16-9-18				3454
18.1.19	B.H. Etchingshill (M leave from France)	4 V D R				45361
25-3	Discharged		Do	3426 3480		102772
25-3	Will proceed on 25/3/19 to 6th Reg Seaforth					Etch D 391

Name **Donaldson** Rank **Art-hur Pte** Reg. No. **7 25537**
 Unit **38th Bn.** **250-2913.**
 Next of Kin **Millie Donaldson, Fenelon Falls, Ontario**

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1918						
2-9	<u>Missing after action</u>				14/5 Q538	
	Pt W. 86.	11-9-18	A 320			3319
	Now safe with unit		A 322			20/9

HOSPITALS

DATE

DIAGNOSIS

M. F. W. 2555.
75M.—9-19.
1772-39-1332.

com.

Number 725537 Rank Pfc.

~~B
U~~

~~Don~~

Surname DONALDSON

Christian Name Arthur

Units 384th Can. Inf. Theatre of War France

Date of Service 4.12.16.

~~P~~

Remarks 4 Widnes St

Latest Address ~~7 Fenelon Hall~~

Jourda Ont.

Roll No. B Page 16398

200m.-2-21.M.

(This form to be filled in by all ranks on voyage to Canada.)

DESP
SEP 1 1922
REGN. NO. 15084

.....
RANK SURNAME INITIALS UNIT

.....
al address..... (Street) (City or Town) (Province)

.....
one person to be notified of arrival.....

.....
Station in Military District to which a furlough warrant is required.....

.....
Railway.....

.....
d, is your wife on board..... Number of children on board.....

.....
tination.....

.....
(Sgd.).....

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 **725537**.....

(3) Full Name of Soldier **Arthur Donaldson**.....

(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**.....

(9) Is your Father alive? Yes
If so, state name and address Thomas Donaldson, Fenelon Falls, Ontario
Canada

(10) Is your Mother alive? Yes
If so, state name and address Millie Donaldson, Fenelon Falls,
Ontario, Canada

(11) If your Mother is a widow No
Are you her sole support, or not? Nil

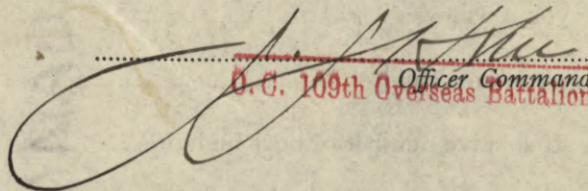
(12) If sole support of widowed mother, state what amount you have given her per month prior to your enlistment, also reason she has no other support than yourself.
Nil

(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.
Nil

15) Are you insured? Yes
If so, in what Company? North American Life Insco, Co.
Have you made arrangements for payment of your Insurance premium? No
If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.

Date 6th July 1916


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

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

M. F. W. 12
50m.—7-16
H. Q. 1772-39-819

Millie
To Whom *Mrs. Thomas Donaldson*

(mother)
By Whom Assigned *Donaldson. A.*

Address *Fenelon Falls*

Regtl. No. *7255³27.*

Rank *Private.*

Corps *109th Btn.*

Rate *15⁰⁰ Aug 1st 16.*

2 M. 8⁹/₁₆ W/O. 27¹⁰/₁₆

PAYMENTS

2nd = 4/10/16. apd 6/1/16

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				



REMITTANCE AND THE
ASSIGNED PAY
OVERSEAS CONTINENTS

To Whom Assigned
Bank No.
Bank
Code

To Whom
Address

INSTRUCTIONS

1-0-0-0-0-0

TI 28

1919

[Handwritten signature]

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

M. F. W. 12a.
 50m.-6-16.
 1772-39-819.

Sheet No. 2.

L. L. Job 4503. -Req. 6332.

Mellie
mother
 Mrs. Thomas Donaldson

PAYMENTS.

Pte. Donaldson. A.
 725527. 109th Ptn.

Month.	Year.	Cheque No.	Amt.	Remarks.
			15.00	Aug 12/16.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.		023937	45	
Nov.		329141	15	
Dec.		034520	15	
Jan.	1917	X 36170	15.	
Feb.		X 42843	15	15 R
March		Y 49702	15	15 L
April		1327	15	15. CA. Y. 1327 Can. S.F.P.
May		87474	15	15. W.
June		N 14463	15	15. CA.
July		X 20714	15	OB
Aug.		E 28524	15	OB
Sept.		E 35282	15	OB
Oct.		Q 40566	15	
Nov.		T 51078	15	
Dec.		L 57426	15	\$255.00
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

OD

lee

AA

}

223

↑

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.				

* 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:- DONALDSON Arthur.
NUMBER:- 725537.

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. Millie Donaldson
Fenelon Falls, Ont
mother

~~Stephens 1/1/18~~
Renewed eff 1/10/18

~~Stephens 1/1/19~~

PARTICULARS OF RANK OR APPOINTMENT		
AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Pte

UNIT AND TRANSFERS

ORIGINAL UNIT:- 109th Bn
DATE ACCOUNT FIRST OPENED:- 1/8/16

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S P'D	UNIT TRANSFERRED TO
			38th Bn Canada

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
1/1/19	9	Seaford apl.	17 03				
1/1/19	10	Seaford 6 days (30.62)	10 70				

DAILY RATES OF PAY AND ALLOWANCES

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

PARTICULARS OF RENDERING NON-EFFECTIVE:- *Missing 2/9/18 & 2/10/18 Safe with Unit C Pa 323 17/9/18*

MONTH 1918	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
31 March	Bal Bn								41 32		
apl.	P.P.	33	-	ap				15			
				AR 66. 5/4/18 38th	8 03						
				" 186. 15/4 "	3 57						
May	P.P.	33		ap	11 60			15	47 72		
				AR 413 7/5. 38th	4 46			15			
				4 513 18/5 "	3 57				58 79		
June	P.P.	34	10	ap	8 03			15			
				AR 692. 1/6 "	3 57						
				Imp. 1. d. pay & stoppage 36/9. for great							
				coat lost. Pro. 56. 24/6/18	3 57	11 0		15	72 12		
July	P.P.	33		ap				15			
				AR 908. 1/7. 38th	8 03						
				" 987 1/7 "	4 46						
				Donk Nov 180. 16/7 .	8 95			15	69 78		
Aug	P.P.	34	10	a.p.	21 44			15			
				AR 1068. 1/8 "	3 57			15			
				" 1156 17/8 "	3 57				81 74		
Sept.	P.P.	33		a.p.	7 14			15	99 74		
								15			
Oct.	P.P.	34	10	ell.							
								15	118 84		
Nov	✓	33		ell.				15			
				2619 1/12 38th	3 73						
				2584 27/11 ✓	13 06						
				2744 10/12 ✓	5 60						
				4 19/12 ✓	2 920						
					5 659						

F 16

NUMBER 725537

RANK

NAME DONALDSON A.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
	Prot Forward.	33			5159			15	178 81		
				22 ¹ 10/12 788	9733						
				ct 27/11 Lev	973						
Dec	P.P.	3410		leaf				15			
Jan	1919 ✓	3410		leaf				15	16 39		
		10120			15865			45			
Feb.	✓	3080		leaf				15			
Mar.	✓	3410		leaf				15			
				P. 4224 26/2. Echlinghill	487				4642		
				P. 4392 14-3 ✓	243						
				H.S/V. 17-1 to 24-3-19 S.O. 6927319		40 20			379		
		6490			7304020			30			
ap	✓	33		leaf				15			
				9 2-4. 6 Res. 1703							
				6814 Order 30-4 ✓	493				497		
		33			7676			15			

S.O.S. Canada 7-5-19 S.O. 50 ER.

Opw... 3/4/19

MARRIED OR SINGLE *Single*

PLACE OF BIRTH *Fenelon Falls Ont*

NAME AND ADDRESS OF NEXT OF KIN *Millie Donaldson
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. *725537* RANK *Pte* NAME *Donaldson Arthur*

IF IN PERM. CORPS WHAT UNIT UNIT *109th Bn* TRANSFERRED TO *38 Bn.* DATE *16.1.17* AUTHORITY *NO 539 4.12.16.*

PERMANENT FORCE ALLOWANCES TRANSFERRED TO DATE AUTHORITY

PLACE OF ATTESTATION *Fenelon Falls Ont* TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION *Dec. 11 - 1915* TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY \$ *15.00* DATE EFFECTIVE *Aug 1 - 1916*

PAYABLE TO *Mrs Millie Donaldson Fenelon Falls Ont* RELATIONSHIP *Mother*

ASSIGNED PAY MONTHLY \$ DATE EFFECTIVE *Ont*

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)

DATE	PAY		FIELD ALLOWANCE		WORKING OR SPECIAL PAY		ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS				CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS										
	NO. OF DAYS	RATE	AMOUNT \$	AMOUNT C.	NO. OF DAYS	RATE				AMOUNT \$	AMOUNT C.	NO. OF DAYS	RATE	AMOUNT \$	AMOUNT C.	1	2				3	4				1	2	3	4	CREDIT	DEBIT				
<i>July 31</i>									<i>14 10</i>	<i>14 10</i>																									
<i>Aug 31</i>	<i>31</i>	<i>1.00</i>	<i>31</i>		<i>31</i>	<i>10</i>	<i>3 10</i>		<i>34 10</i>	<i>21 98 16</i>																									
<i>Sept 30</i>	<i>30</i>		<i>30</i>				<i>3</i>		<i>33</i>	<i>53 31-31.85</i>	<i>159 16</i>																								
<i>Oct 31</i>	<i>31</i>		<i>31</i>				<i>3 10</i>		<i>34 10</i>	<i>124 116 162</i>	<i>159 16</i>																								
<i>Nov 30</i>	<i>30</i>		<i>30</i>				<i>3</i>		<i>33</i>	<i>190 70 16</i>																									
<i>Dec 31</i>	<i>31</i>		<i>31 30</i>				<i>3 10</i>		<i>34 10</i>	<i>290 30 11 16</i>																									
<i>Jan 15</i>	<i>15</i>	<i>1.10</i>	<i>16 50</i>						<i>16 50</i>																										
<i>Jan 16</i>	<i>16</i>		<i>17 60</i>						<i>17 60</i>	<i>673 15 1 16</i>																									
<i>Feb 28</i>	<i>28</i>		<i>30 80</i>						<i>30 80</i>	<i>664 10 1 17</i>																									
<i>Mar 31</i>	<i>31</i>		<i>34 10</i>						<i>34 10</i>	<i>788 7 1 17 996 20 1 17 860 15 1 17 922 8 1 17</i>																									
<i>Apr 30</i>	<i>30</i>		<i>33</i>						<i>33</i>																										
<i>May 31</i>	<i>31</i>		<i>34 10</i>						<i>34 10</i>	<i>42 18 17</i>																									
<i>June 30</i>	<i>30</i>		<i>33 00</i>						<i>33 00</i>	<i>119 13 15 254 2 15 328 2 15</i>																									
			<i>367 40</i>						<i>14 10</i>	<i>381 50</i>																									

NO 539 4.12.16. Jfd 38 Bn

Bank \$4005 2/12/16 16.1.17

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
18 Year 1918	725 537	pte	Donaldson	A
	Unit.	Age.	Service.	
	38 th Batt ⁿ	24	36	
Station and Date.	Disease <u>Tonsillitis (Follicular.)</u>			
12-5-19.	P. H.			
	Had a chill during the night reported sick complaining of headache & sore throat.			
	Present Cond.			
	T. 100.2 breath foul, tongue furred. - Complaints of headache.			
	Tonsils enlarged & whole throat highly injected. Several small white patches on tonsils.			
	Isolation given 16,000 units anti-(diphtheritic) toxine. (Two doses of 8,000 14 hrs interval)			
	antiseptic mouth wash liquid diet,			
	Transfer to mil. Hosp.			
	M. D. no. 6.			
	L. J. Purvis Capt.			

* The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.
(6365) W2944/P438 2,950,000 1/18 McA & W Ltd Forms/I. 1237/13 (E 2349) [P.T.O.]

Station
and Date.

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

D 5395

Aug 1/16

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

15			
----	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

No. **725537**
 Rank **Pte** - Promoted Reverted Discharge
 Soldier's Name **A. Donaldson,**
 Battalion **109 Batta.**
 Beneficiary
 Relationship
 Address

PARTICULARS OF ASSIGNMENT

Name **Mrs. Millie Donaldson**
 Address **Fenelon Falls, Ont.**
 Change of Address
 1
 2
 3
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
1917					4811-A-28
Dec. 21			255	255	M 3127 mailed 29 ¹⁰ / ₁₈
Jan	M 67445		15	15	M
Feb	E 96788		15	15	
March	A 125877		15	15	
April	H 8127		15	15	M
May	O 17107		15	15	M
June	A 20343		15	15	M
July	Q 32790		15	15	M
Aug	K 34806		15	15	M
Sept	M 45289		15	15	M
Oct	M 3127		15	15	M
Nov	K 56879		15	15	M
Dec. 1917	T 65816		15	15	M
Jan 1919	O 72456		15	15	M
Feb	S 78808		15	15	M
Mar	G 86373		15	15	M
Apr	M 2884		15	15	M
May	G 8252		15	15	M
			510	510	

~~Reported missing. Date. 2/9/18.....
 C. L. No 306. Folio 38. Date. 19/9/18
 1st list
 A/c D. 5395. File 4811-A-28
 B. E. or P. A. Date... 4/10/18.....
 Clerk C. E. Johnston Date 4/10/18.~~

M. R. O 14179 rendered 4¹⁰/₁₈ C. S. J.
 "Soldier now safe with unit per C. S.
 309 dated 22⁹/₁₈, on file 4811-A-29 C. S. J. 7¹⁰/₁₈"
 M. R. O 19200 sent 1¹¹/₁₈ (new stencil)

A/c Closed 31-5419
 Ret'd per.....
 Date 15/5/19 M. F. W. 187
 Closed.....

AUDITED, Alt 22/19
 ha 104483



M. F. W. 128
 400M-6-17-1772-89-141
 L. L. 2320-M. & D. 538.

7 2 5 5 3 7

a.c. 08674

NUMBER

NAME

Emulsion

UNIT

SPG

ALBUMEN

neg

SUGAR

neg

REACT

MICROSCOPIC

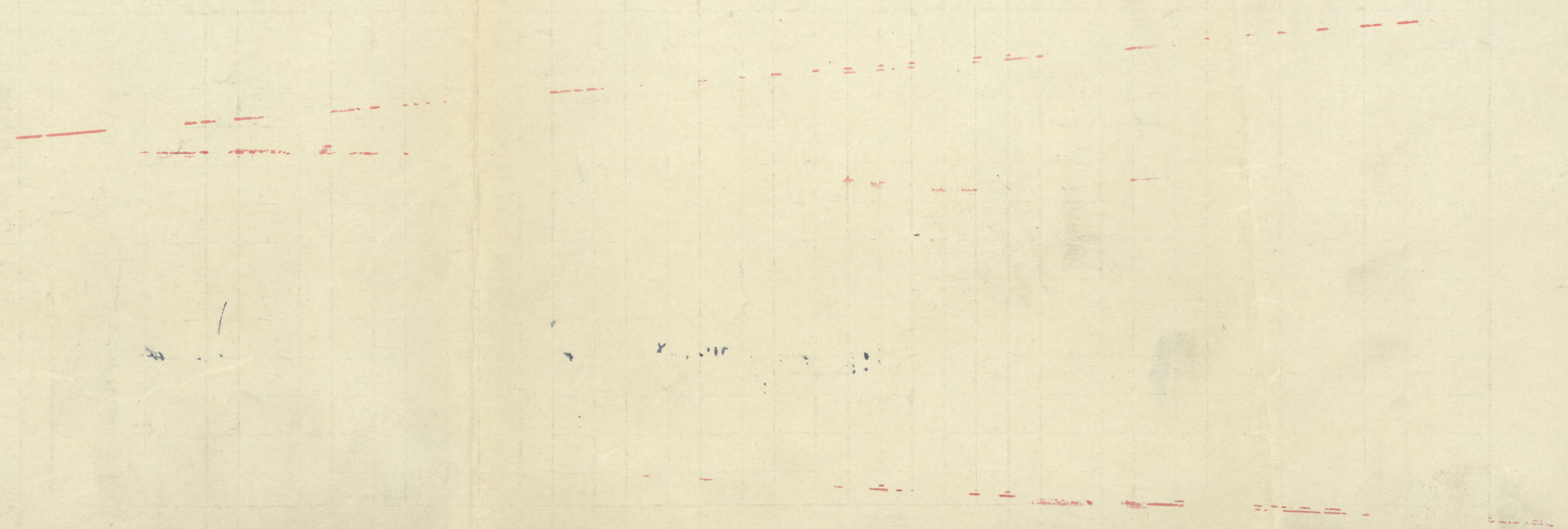
RECORDED

1911

1911

1911





17
PLANT INDUSTRY

31-7-16

War Service Badges
Class A
No. 219269 issued

SHORT FORM.
PROCEEDINGS ON DISCHARGE.
(Demobilization.)

R.L.



1. No. 725537
2. Rank Pte.
3. Name DONALDSON Arthur
4. Unit 109th. Bn. (#2.D.D.)
5. Date of Discharge JUN 23 1919 Place TORONTO, ONT

6. Reason for Discharge.....
" Demobilization."

7. Authority #2.D.D. June. 23rd.1919. Pt.11# 171

8. Proposed Residence after Discharge.....
Penelon 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. ?.....

Arthur Donaldson
Signature of Soldier.

10. CONFIRMATION.
The discharge of the above named man is hereby confirmed.
Place TORONTO, ONT.
Date JUN 23 1919

Signature Robert [unclear] (O. C. Discharging Unit.)
O. C. Discharge Sections,
No. 2 District Depot

ok.





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