MAR 5 1916

ATTESTATION PAPER.

No. 72 1 0 1 8.

109th OVERSEAS BATTALION, C. E. F.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

ORIGINAL

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? ..... Firman
1a. What are your Christian names? ..... George Alfred
1b. What is your present address? ..... Allandale Ont.
2. In what Town, Township or Parish, and in what Country were you born? ..... Beaverhead Ont.
3. What is the name of your next-of kin? ..... Jesse Firman
4. What is the address of your next-of-kin? ..... P.O. Allandale Ont. Canada
4a. What is the relationship of your next-of-kin? ..... Father
5. What is the date of your birth? ..... May 16th 1897
6. What is your Trade or Calling? ..... Machinist
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, George A. Firman, 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.

G A Firman (Signature of Recruit)

Date MAR 5 1916 191 . A W Caulting Lieut (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, George A. Firman, 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.

G A Firman (Signature of Recruit)

Date MAR 5 1916 191 . A W Caulting Lieut (Signature of Witness)

CERTIFICATE OF MAGISTRATE.

The Recruit above-named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath before me, at Lindsay this MAR 5 1916 day of March 191 .

(Signature of Justice)

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

Description of George Alfred Firman on Enlistment.

Apparent Age 18 years 10 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 11 ins.

Chest measurement: Girth when fully expanded 36 ins.
Range of expansion 3 ins.

Complexion Fair

Eyes Blue

Hair Light Brown

Religious denominations:
- Church of England C. of E.
- Presbyterian
- Methodist
- Baptist or Congregationalist
- Roman Catholic
- 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 just below left knee cap.

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 MAR 5 1916 191 .

Place Sudbury

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

*Insert here "fit" or "unfit."

NOTE.—Should the Medical Officer consider the Recruit unfit, he will fill in the foregoing Certificate only in the case of those who have been attested, and will briefly state below the cause of unfitness:—

CERTIFICATE OF OFFICER COMMANDING UNIT.

George Alfred Firman 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.

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

Date MAR 5 1916 191 .

C.E.F.

FIRMAN GEORGE ALFRED 724048 109 BN 07367

DEMOB.

Deceased 31-12-54

H

FORM D.M.S. 1300.

SURNAME	CHRISTIAN NAME OR NAMES	REG. No.
XX FIRMAN.	E.A.	724048

RANK	UNIT	CO.	TROOP	BATTY.
Pte.		1. C.O. ~~Depot~~. 20		

HOSPITAL — DATE OF ADMISSION

Hastings. C.Mil. 7-9-17.

1. Cash Mil. Eastbourne HOSP. 16.10.18
2. Woodcote Pk Epsom HOSP 5.12.18
3. HOSP.
4. HOSP.

DIAGNOSIS

1 Tonsillitis. Qw.

G.S.W. W. Foot. A

2.

3

DISPOSITION

C.L. 12-9-17. C8.

his. 3.10.17.

bi. 14.2.19. DATE

REMARKS

10.10.17. C32.
19.10.18 B349-2
9.12.18 B392 (3)
20.2.19 B.452/2.

A.M.D. 2 Dept.

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

EPITOME OF HOSPITAL TREATMENT

	Hospital	Adm.
1.		
2.		
3.		
4.		
5.		
6.		
7.		

NAME Firman, George Alfred

REGT'L No. 724048

H. Q. FILE No. 649.

RANK AND CORPS Pte. / 1st. Cent. Ont. Regt.

FOLLOWS 20th Bn. No. form 109 b.

FOLLOWS

CABLE NO.	CABLE DATE	NATURE OF CASUALTY
Q65-7-4	20-10-18	Adm. Mil. H. Eastbourn, Oct 16/18
HL.B349/2	19-10-18	G.S.W.L. foot.
N. of K.	Geke	Firman "Father"
		Box 17 Allandale, Ont.

L. L. 20497—M. & D. 7908

M. F. W. 42—50M.—5-17.
H. Q. 1772-39-893.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
C. 8.[I]	Can. Mil. Hastings	7-9-17	Tonsillitis
C 32	Discharged	7-10-17	Tonsillitis
B 992(a)	Mil. Hom. W. Colo.	5-12-18	G.S.W. L. Foot.
B 452	Discharged	14-2-19	" " "

C

648-7-41742 ✓

NAME Firman, George Alfred sos. demob 6-4-19 DD 106 16-4-19

RANK & No. Pte 124048

CORPS 109th Nos. 2 D.D. Batt.

ENLISTMENT, PLACE Lindsay DATE March 8th 1916.

FORMER CORPS Nil.

COUNTRY OF BIRTH Canada, Gravenhurst Ont.

NEXT OF KIN Firman Zeke (Father)

ADDRESS OF NEXT OF KIN Box 17 Allandale. Ont.

DISCHARGE, PLACE DATE

Sailed from Halifax Per S.S. Olympic 23/9/16

488/13

M. F. W. 22. 100 m.—9-15.

L. L. 85779—M. & D.—6011.

R 16 4-4-19 296 Pte. 32 H. Q. 1772-39-839.

MARRIED SINGLE yes WIDOWER

TRADE OR CALLING Machinist RELIGION Church of England

DESCRIPTION.

APPARENT AGE 18 YEARS 10 MONTHS

HEIGHT 5 FEET 11 INCHES

CHEST MEASUREMENT 36 INCHES EXPANSION 3 INCHES

COMPLEXION Fair EYES Blue HAIR Lt. Brown

DISTINGUISHING MARKS Scar just below left knee cap.

MEDICAL EXAMINATION. PLACE Lindsay DATE March 8th 1916

REMARKS:

ATV
ATV

Form D.M.S. 1313.
7065 20m 6/2/17.

ADMITTING CARD.

Regt. No. 724048 A. & D. No. 3000

Rank Pte

Name Furman Geo

Corps Boys Bn

Religion C of E Age 18

M. H. Rec'd 18/2 M. H. Requested 3/12 M. H. Ret'd ATV

Disease Tonsilitis

Admitted 6 - SEP 1917

Discharged Dis to Duty 3 - OCT 1917

Place in Hospital FI

Transferred

Results

P.T.O.

REMARKS:

FORM R. 149.
7106—250m—7/2/17.

George Alfred

Name FIRMAN Rank Pte. Reg. No. 724048

Unit 9 1st C.O.R.D.

Next of Kin Canada

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
7.9.17	left H Hastings (1712)		Trench fever	C8		
7.10.17	Discharged	(509)	"	C32		

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

Form DMS 1401.

Convalescent Hospital,
Woodcote Park, Epsom.

HOSPITAL.

A. & D. CARD 11

AT

A. & D. No. 126231 PL. OF ACTION

RANK Pte REG. No. 224048 UNIT 20th Lancs Bn SICK OR WOUNDED

NAME Simman G.A. AGE 19 RELIGION C of E

PLACE IN HOSPITAL

DIAGNOSIS Case left foot flat

ADMITTED 4 DEC 1918 FROM Central Mil. Eastbourne

DISCHARGED 14/2/19 BT TO I.C.D.R.D. Witley

TRANSFERRED

SERVICE AT HOME 2 8/12 IN FIELD 6/12

RESULTS

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

[P.T.O.

REMARKS.

T+T wd. leg to pass under current pat weight on fact. who sealed Mess nothing.

J. M. Street
Lieut

No. 724048. RANK Pte NAME Norman G. A.

T. O. S. 5-3-16. UNIT 109th. Battalion
D.O.S. 10-3-16.

M. D. 3

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916	1916.			
Mar 5	Mar 31	✓		
April		✓		
May		✓		
June		✓		
July		✓		

UNIT SAILED
JUL 23 1916

Can

Fam

Number 724048 Rank Pte.

Surname FIRMAN

Christian Name George Alfred

Units 20th Bn. Can. Inf. Theatre of War France

Date of Service 28-11-16

Remarks

Latest Address ~~40 Burton Ave.~~

25 William St. ~~Allandale~~

Box 552, Barrie, Ont.

Roll No. B. Page 18346

200m.-2-21.M.

DATE HISTORY

CASUALTY BRANCH

(FILES)

NAME _____ H. Q. _____

NO. _____ RANK _____ M. D. _____

UNIT (C.E.F.) _____ UNIT _____

ADDRESS _____

NEXT OF KIN _____

ADDRESS (KIN) _____

HISTORY	DATE

M. F. W. 2536
100m.-5-18. 1772-39-1311

No. 2

Certified this document checked with Regimental documents

P. 880.

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 George Alfred 2. Surname Firman

3. Rank Ste. 4. Original Unit 109th Batt. 5. Reg. No. 724048

6. Address, in full, to which future payments of gratuity are to be forwarded Post Office Allandale. Ont. Canada

7. Date of enlistment in the C.E.F. 5 Mar 1916.

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:—

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

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

5434. Wt. /30P. 250,000(8). 2.19. S.O.,F.Rd.

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?

21. Have you, during the present war, served in the Imperial Forces?

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? Not applicable

24. Are you now serving in the C.E.F.? If not, give:—(a) Date of discharge APR 6 1919 (b) Reason for discharge 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

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?

(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: G. A. Firman

Place of Residence: Allandale Ont.

Declared before me at: Witley Camp Surrey

This 8 day of Mar. 19 19

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.

POST DISCHARGE PAY.

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

Certified Correct.

District Paymaster.

To be made out in duplicate.

DUPLICATE

H.Q. 54-21-23-53

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

INSTRUCTIONS.

(a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.

(b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.

(c) All questions, etc., must be answered.

(d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.

(e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

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(1) Name of Overseas Unit which Soldier joins.....109th.Battalion.C.E.F.

(2) Regimental Number.....724948.

(3) Full Name of Soldier.....George Alfred.Firman.

Pte.

(4) Place of Birth.....Gravenhurst. Ont.Canada.

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

(6) If married, state,

(a) Full name of your wife...No.

(b) Present Postal Address..Nil

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

(8) Have you any children?..No.

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

Also their names and ages.....

M. F. W. 67.

300M.—5-16.
1772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive ?...Yes. Zeke. Firman.

If so, state name and address ...Allandale. Ont. Canada

(10) Is your Mother alive ?...Yes. Emily Firman.

If so, state name and address...Allandale. Ont Canada.

(11) If your Mother is a widow...No.

Are you her sole support, or not ?...No.

(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 ?...Grand Trunk.

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

Date JUL - 8 1916

C.A.D.C. 5009A

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

2

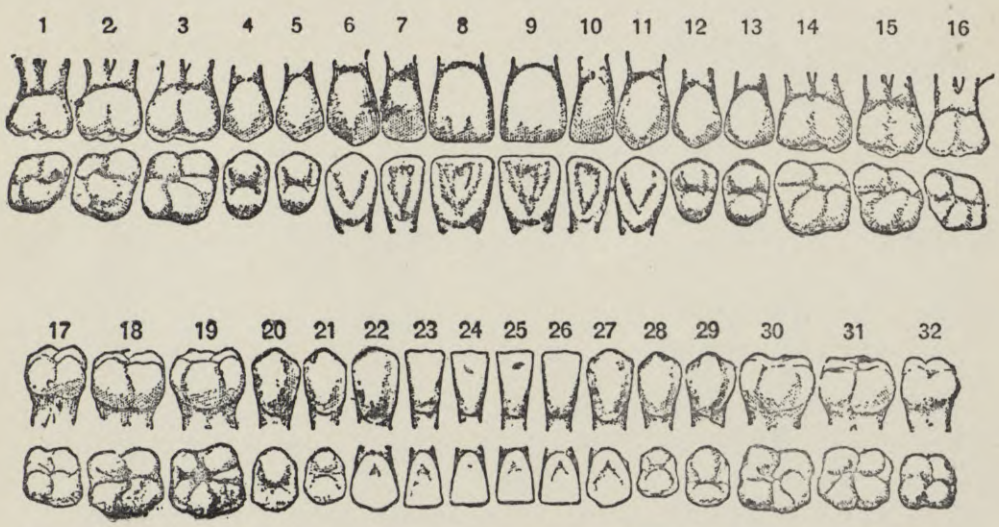
DIRECTIONS TO DENTAL OFFICERS

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.

NAME OF SOLDIER (Block Letters) FIRMAN. G A

REGIMENT 1st CORD RANK Pte No. 724048

Date of Examination in England 27/2/19 | Date of Examination in France



PRESENT DENTAL REQUIREMENTS

1. FILLINGS
2. EXTRACTIONS
3. CROWNS
4. DENTURES
   - (*a*) Full Upper
   - (*b*) Part Upper
   - (*c*) Full Lower
   - (*d*) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT?

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

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

Signature of Dental Officer C Mitchell Capt

Not to be sent overseas until 19 years of age

F.61

G-61

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

Date of Birth 16-5-1899

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

Casualty Form—Active Service.

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

Regimental No. 124048 Rank Private Name Furman George Alfred

Enlisted (a) 5-3-16 Terms of Service (a) D. of W. C. E. F. Service reckons from (a) 5-3-16

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

Extended ..... Re-engaged ..... Qualification (b) Machinist

Report: Date	Report: From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
		Embarked Canada	Halifax	24.7.16.	✓
		Disembarked England.	Liverpool	31.7.16.	
					A W Aselline Capt. ADJUTANT 109th Overseas Battalion, C. E. F.
28-11-16	109th Bn.	~~Proceeded overseas for service with 20th. Btn.~~ transf. to 20th Bn. Oseas	Witley Witley		✓
27-11-16	~~Witley~~ Ore. 109th.	~~Transf'd to 20th Bn,~~	Overseas	28-11-16; D.O.333-~~28-11-16.~~	A W Aselline CAPTAIN. ADJUTANT, 109TH BATTALION CAN. INFANTRY.
29/11/16	CBDepot	Arrived taken on strength	20Bn	29/11/16	NR.Pt.2.0.75 11/12/16
do	do	Left for Unit	Field	1/12/16	NR
8/12/16	20th Bn	Joined Unit	do	4/12/16	B213 ✓
3/3/17	— " —	Sent to R.B. (Minor)	CBDep.	1/3/17	B 213.
6/3/17	CBDep	Classified 'A' from Unit	— " —	6/3/17	NR.
14/3/17	"	Struck off strength	To England	14/3/17	NR. Pt 20 to 23 d 22/3/17.

J. Mogan for Capt. D. A. A. G.

(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.

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

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				
16. 3. 17	1st CORD	T.O.S from 20th Bn	W. Sandling	15.3.17	Part II O 7. ✓
19. 4. 17	do	On Command. C.O.C. Ashford	"	19.4.17	Part II O 41 ✓
					Lieut. for Colonel i/c Records, ~~C.E.F.~~ COMF.
20.4.17	O.C. hol Det. C.O.C.	Attached from 1st C.O.R.D.	Ashford	19.4.17	St II 110 ✓
26.5.17	do	Ceased to be attached on return 1st C.O.R.D.	"	24.5.17	St II 146 ✓
					R.E.N. Barron Lieut. for Capt. O. C. Detachment C. O. C., C. E. F.
5.6.17	1st CORD	S.O S in reporting to 5th Res Bn	W Sandling	4.6.17	Ch II D.O. No. 88 ✓ Lieut. & Assist. Adjt. for O. C. 1st C. O. R. D.
5/6/17	O.C. 5th Res.	Taken on strength from 1st CORD.	W Sandling	5/6/17	Bn of 151 ✓
4/7/17.	O.C. 5th Res	S. Off. S. on being posted to 1st CORD	W Sandling	4/7/17	Bn of 179 ✓ Lieut. O.i/c Records, 5th Canadian Reserve Battalion, West Sandling, Kent.
5.7.17	1st C.O.R.D.	T.O.S. 1st C.O.R.D.	West Sandling	4.7.17	Pt. II D.O. 118 ✓
~~3.8.17~~	"	Att. E. Boys Bn	"	3.8.17	" 147
22.9.17	1st C.O.R.D.	S.O.S. on transfer to Young Soldiers Bn.	West Sandling	28.9.17	Pt. II D.O. No. 187. ✓ Lieut. & Assist. Adjt. for O. C. 1st C. O. R. D.

(A) Report		(B)	(C)	(D)	(E)	(F)
Date	From whom received	Authority of Part II. of Orders	Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	Place of casualty	Date of promotion, reduction, reversion, casualty, &c.	Remarks, and initials and rank of an officer
			Attached C.C.C. Kinmel Park for return to Canada. Part II Orders No._____. Ceases to be attached C.C.C. Kinmel Park on embarking for Canada, Part II Order No: 75		18/3/19	
			Commanding 2 Wing, Kinmel Park Camp.		29/3/19	

Sailing No. 36 HMT 'Scotian'
Liverpool 25 3 19
St John 4 4 19

MAR 25 1919 O.S. T.O.S. No. 2 DISTRICT DEPOT, TORONTO. 1919 PART II D.O. 106
APR 6 1919 S.O.S. (DISCHARGED FROM H.M.S.) No. 2 DIS. DEPOT, PART II D.O. 106

Lieut.
For O.C. No. 2 District Depot.

Nothing to be written in this margin.

SERVICE AND CASUALTY FORM (Part I).

Army Form B. 103—I.
Part I.

Army Form B. 103 (II.) to be gummed on here if required.

Nothing to be written in this margin.

W1889—P2 1150 1M 5/18 G.W.P.Co (3490)

(1)*Substantative rank *Acting rank *[To be entered in pencil to facilitate alteration.]	(2) Regiment or Corps	(3) Regtl. No.
(4) Surname		
(5) Christian Names		
(6) Army Form, number of, Attestation Form or Record of Service paper		
(7) Whether of British or of Alien origin [*vide* A.C.I. 578 of 1918]		
(8) Date of birth as stated on enlistment		
(9) (*a*)		

(10) Enlistment (*b*) (11) Engagement (*c*)

(12) Service reckons from (*date*) (13) Special conditions (if any) of enlistment (*d*)

(14) Any subsequent variations (if any) of conditions of service

(Authority) (*date*)

Initials and Rank of an Officer.

(15) Category	Date	Medical Authority	Initials and Rank of an Officer

(16) (Record of Occupation in Civil life (*vide* Army Order 93 of 1917)

Industrial Group No.

Trade or Calling

Married or Single

Particulars of Trade Test

Occupation Cards despatched on (*date*)

Second Occupation Card despatched on (*date*)

(17) Next of Kin

(18) Demobilizer (*f*) (Place) (Signature of Posting Officer

(19) Pivotal-man (*f*) (Date)

(20) Qualifications (*g*) *or* (21) Corps trade and rate

(22) Extended (23) Re-engaged

(24) Miscellaneous entries:—

NOTES.—[a] Here enter particulars of any subsequent claim as to actual age after verification by birth certificate [*vide* A.C.I. 470 of 1918. [b] Whether direct or voluntary enlistment or called up under the Military Service Acts. [c] Whether for specified term of years or for duration of the war. [d] Whether "for Home Service only," or "not to be transferred without the soldier's consent, &c. [e] If to be retained on Home Service, period, if specified, to be stated, also authority, and on what grounds. [f] Required for demobilization purposes. [g] Signaller, Shoeing-smith, &c.

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

War Service Badge
Class
No. 148866
issued.

THIS IS TO CERTIFY that No. 724048 (Rank) Pte

Name (in full) George Alfred Firman enlisted in

the 104 Batt

CANADIAN EXPEDITIONARY FORCE at Lindsay on the 5

day of March 1916

HE served in France

and is now discharged from the service by reason of Demobilization.
~~Medical Unfitness~~.

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

Age 21

Height 6'

Complexion Fair

Eyes Blue

Hair Light Brown

Marks or Scars Scar below left knee cap

G. A. Firman
Signature of Soldier

F. McPhee
Issuing Officer
For Captain
O.C. No. 2 District Depot.
Rank

Date of Discharge

No. 2 DISTRICT DEPOT
APR 6 1919
TORONTO

Date APR 6 1919 19

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.B. 39A.
1049-D.P.-300M-11-18.
H.Q. 1772-39-882.

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 78 510 (Rank) Pte

Name (in full) [illegible] enlisted in

the

CANADIAN EXPEDITIONARY FORCE at [illegible] on the

day of [illegible] 19 16

HE served in

and is now discharged from the service by reason of Demobilization / Medical Unfitness.

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

Age	Marks or Scars
Height	
Complexion	
Eyes	
Hair	

Signature of Soldier

Date of Discharge

Issuing Officer

for

O.C. No. 2 Dispersal Depot

Rank

Date APR 6 1919 19

No. 2 DISPERSAL DEPOT

O.C. CAMP

N.B. — Keep a duplicate of this Certificate with it. Should any person finding same be requested to forward it in an unstamped envelope to the Secretary, Militia Council, Ottawa, Canada.

S.F.R. 488
100-D.T. 1918-11-15
H.O. 1177-2-48

URINALYSIS REPORT.
(for Board)

5-1

Reg. No. 42440 Rank Pte.

Name Furman M. A. Unit R.M.R.

Sp. Gravity 1004

Reaction neutral

Albumen Nil

Sugar Nil

Microscopic

Canadian General Laboratory
12 MAR 1919
WITLEY

Captain, C.A.M.C.
for Major, C.A.M.C.
O.C., Canadian General Laboratory.

[illegible]

R—122

TLH. Rank | Name FIRMAN, George Alfred. ✓ | Reg'l No. 724048. ✓

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

Place and Date of Enlistment Lindsay, March. 5th.1916. | Place of Birth Gravenhurst, Ont ✓

Name and Address, Next-of-Kin Zeke Firman, ✓
P.O, Allandale, Ont. Canada. | Relationship Father. ✓

Assigned Pay Monthly $ | Payable to | Relationship

Separation Allowance $ | Payable to | Relationship

Discharge, Date and Place | Reason | Character

N/F R.B No. 20491
File No.
Category CAN.OR

1 CORPS

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			A.F.B. 103 CHECKED 11 DEC.1916 NGD
28.11.16	O.C. 109th	S.O.S. on Transfer to 20th Bn	Witley	28.11.16	Pte II. D.O. 333
11.12.16	20th Bn	Taken on strength.	Field	29.11.16	" 75
23.3.17	do	Minor, posted to 1st CORD	do	14.3.17	Pte II O 23
16.3.17	1 CORD	T.O.S from 20th Bn	W. Sandling	15.3.17	Pte II O 110
19.4.17	do	On Command C.O.C. Ashford	"	19.4.17	Pte II O 41 dy 20.4.17 COC
25.5.17	do	Ceases to be att COC	"	24.5.17	Pte II O 146 dy 26.5.17 COC
5.6.17	do	S.O.S to 5 Res Bn	do	4.6.17	Pte II O 151 dy 6.6.17. 5 Res
5-7-17	do	Re T.O.S. from 5th Res.	do	4-7-17	— 118 (D.O. 179 dy 4-7-17) 5th Res.
3-8-17	do	On Com. Boy's Bn. Bexhill	do	3-8-17	— 147 Pte II D.O. 1/4.8.17. Boys Bn

Report. Date.	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.
11-9-17	1st. CORD.	Adm. Can. Mili. Hosp.	Hastings	7-9-17	G.L. C8 (Tonsillitis)
9-10-17	✓	Disch. " " "		7-10-17	G.L. C32
22-9-17	✓	Ceases on Com. Boy Bn. & S.O.S. to Young Soldiers Bn.	Pte. W. Sling	18-9-17	Pte II D.O. 197
22.9.14.	Y.S. Bn	T.O.S. from 1st C.O.R.D.	Pte Beschill	18.9.14	Pte I.D.41.
30.5.18	12 Res.	T.O.S. from Y.S. Bn.	" Whitley	30.5.18	Pte No 128 & 128d/30 5 18. Y.S.B
29 8 18	12 Res	S.O.S. to 20 Bn ofs	✓	28 8 18	Pte 205 P.(82 11/9/18 20 Bn
	20	wounded	Field	13.10.18	A.A. 4909 O/C
24.10.18	20 Bn	Struck off to C.O.R.D	Pte ✓	15.10.18	Pte 103 (294 23/10/18 1 C.O.R.D
		Forfeits 2 days pay at W.S.			
18-3-19	1 C.O.R.	S.O.S. to C.M.D. 2 Phyl	" Whitley	17-3-19	Pte D.O. 62 (D.O. 67 MD 2 d/20-3-19)
29-3-19	MD 2	S.O.S. to Canada	" Phyl	25-3-19	D.O. 75 — S.L. 36 — D.C.G.S. 36-1-23 MD 2 25-3-19

"SCOTIAN" 4-4-19

H.1330

DISPERSAL "I"

AUDITOR | PAYMASTER

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

M. OR S. | REGT. No. 724048 | RANK Pte. | NAME (IN FULL) FIRMAN G.A. (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN | RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? | DATE EFFECTIVE

TO WHOM PAID | RELATIONSHIP

ADDRESS

Nil

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F. 1 CoRD. | IF IN P.F. WHAT UNIT? Box 17 PO Allandale Ont

PLACE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

DATE OF ATTESTATION 5 March 1916. | TRANSFERRED TO | DATE | AUTHORITY

ASSIGNED PAY $ 15 | DATE EFFECTIVE 30.4.19 Closed by Ottawa

PAYABLE TO Mrs. E. Firman | RELATIONSHIP | ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS Box 17-90 Burton Ave Allandale Ont

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE

DISCHARGED | PLACE Toronto. | DATE 6-4-19 | REASON Demob. | AUTHORITY D.O. 106 | IF ENTITLED TO POST DISCHARGE PAY OS

T.O.S. 25.3.19 D.O. 106 SUS. 10 D.O.

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 31.3.19							45	14	45	14																									45	15	Ex rec from A.P.A
9.4.19	9	1.10	9	90																	24	33	End. on Lapse														1.4 to 9.4 pro
					30 90																																Checking allow
																																					1st payment
																	48	75																			
							114	90									125	84													160	04					Boat + Train allow
																							70	-													W.S.G. pd as above
																											15						Due				overcharged as pay
			W S G																								3	30					Soldier				PO PO
183 days			420	-			420	-																							88	30	331	70			
																	May 5	349703					51	70							140		280				
																	June 2	677249					70								210		210				
																	OR 76	June 30	690534				70								280		140				
																	1 96	July 25	9993 9				70								350		70				
																	1 127	Aug 25	1278267				70								420		—				
							420	-															401	70			18	30			420	-					

Final

1st W. S. Certificate issued
W.S. Card in file
Firman Captain
For Paymaster War Service Gratuity

100M-1-19.—L. L. 53962-M. & D. 9722.
M. F. W. 2596.
1772-39-1300.

Married or Single: Single

Place of Birth: Gravenhurst Ont

Name and Address of Next of Kin: Zeke Furman Allandale Ont. Can

Relationship of Next of Kin: Father

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. 724048 Rank Pte Name Furman George Alfred

If in Permt. Corps What Unit | Unit 109th Bn | Transferred to 20th Bn | Date 1-1-17 | Authority DO 333 28-11-16

Permanent Force Allowances | Transferred to C.O.C. Eng. | Date 21/8/17 | Authority Juniel Request

Place of Attestation Lindsay Ont | Transferred to Young Sol Bn | Date 23-11-17 | Authority Schedule

Date of Attestation March 5th 1916 | Transferred to | Date | Authority

Assigned Pay Monthly $ 15.00 Date Effective Aug. 1st 1916

Payable to Emily Furman Allendale Ont. Relationship

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)

C

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	1									Bal. from Canada							700				
Aug 31	31	1.00	31		31	10	310								3410	8486								974				15		2474	1636				
Sept 30			30				3								33	40	31/8/16	72	15/9/16					730	730			15	73 770	3803	1133				Issued on repayment A4005-55-29/8/16
Oct 31			31				310								3410	112	30/9/16	151	15/10/16					244	730			15	69	2543	20				D0259 7 days P.P.2. = 7.20
Nov. 30			30				3								33	180	31/10/16	267	30/11/16					487				15	467	2554	2846				A4005-103-25/9/16
Dec 31			31				310								3410	228	1/11/16	243						487				15	90	2320	3936				A4005-184-21/10/16
1917			1530				1530																												A4005-290. 25-11-16 D0333-28-11-16 3rd to 20th Bn eff 1-1-17
Jan 31	1.00		34	10											3410	1494 / 1567	16/2/16 / 16/2/16	1678	6/1/17					175 / 523	523			15		2721	4625				
Feb 28	1.10		30	80										7 -	30 80	240	24		7.00					15 / 261	261			15	14 69	1761	5944				
			233	20																				38 63	22 44			135		180 76					
Mch 31			34	10											3410	1817	27/2							261		697		15		2488	6896				
Apl 30	1.10		33												33											487		15		1987	8209				
May 31			34	10											3410													15		15	101 19				
June 30			33												33											486		15		1986	1143 3				
			367	40										7	374	40								41 24	22 44	16 70		165	14 69	260 07					

724048 Pte Firman G.A.

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
			367	40										7	374	40								41 24	22 44	16 70		165	14 69	260 07	114 33				
July	31	1.00/10	34	10											34	10												15		15	133 43				
Aug 20	20		22												22													15		15	140 43				Journ to C O Chg 21/8/17
			423	50										7	430	50								41 24	22 44	16 70		195	14 69	290 07					
"	11		12	10											12	10	141	15/5						14 60						14 60	137 93				
Sept	30		33												33							96	30/4	Coc		9 73		18		24 73	146 20				

Month	Particulars	Cr. 1	Cr. 2	Particulars	Dr. 1	Dr. 2	Dr. 3	Dr. 4	Balance	Deferred Pay	Ser. Allce. Eng.
Sept.		~~146 20~~							146 20		
Oct.	P.P.	34 10		RR 518 3-7-17. 5th Res Bn	24 33						
"				356 15/6/17 - do.	9 73			15			
"				570 13/7/17 do	9 74						
				1012 29/8/17 Boys Bn	9 73				111 77		
		34 10			33 33			15			
								15			
				1436 1/10 YPBn.	9 73						
				8. 31/10 "	7 20						
				DN. 121. 30/7 1 C.O.R.D.	2 43						
				" 505. 28/5. 3 Res Bn.	9 73						
				" 710. 31/3. 3 Res Bn	12 17						
Nov.	P.R.	32 00		" 20. 25/9 6 G.N. Hastings	2 43						
Dec.	"	34 10						15	105 08		
		67 10			43 79			30			
					~~34~~			15			
				AR 106 20/11 YPBn.	7 20						
				DN. 1074. 12/9. CMH.H.	2 43						
Jan.	"	34 10		" 794. 10/8. C.T.S	7 20						
				AR 156 17/12 YPB.	17 03						
				DN. 52. 15/11. "	7 20						
				" 109. 8/10. 13 G.H.	4 87				77 95		
		34 10			46 23			15			

Month	Particulars	Cr. 1	Cr. 2	Particulars	Dr. 1	Dr. 2	Dr. 3	Dr. 4	Balance	Deferred Pay	Ser. Allce. Eng.
									77 95		
Feb.	P.P.	30 80		AR 237. 12/1/18 YPBn	9 73						
								15	84 02		
		30 80			9 73			15	118 12		
								15	29 11		
				AR 546. 15/2/18 "	17 03				59 01		
Mar	"	34 10		Quots B18. 13/1/18 "	32						
				AR 644. 26/2/18 "	9 73						
				" 764 20/3/18 "	17 03				59 01		
		34 10			44 11			15			

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:- FIRMAN. Geo. Alfred. a

NUMBER:- 724048.

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.

Emily Furman.
Allendale Ontario -
Stopped 1/4/19

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
	1/11/17		YSBn
128-30/5/18	1/6/18		12 Res

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
25/3/19	920	Witley	9 73				

DAILY RATES OF PAY AND ALLOWANCES

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

PARTICULARS OF RENDERING NON-EFFECTIVE Dis to Can 31/3/19 NR 4092 Witley 5/3/19 Witley MD 2 LPC Cr Bal 45.14 Ledger Bal 54.87

MONTH	PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
1918				Forward 31/3/18.					59 01		
Apl	P/P	33						15			
				AR 69 13/4/18 JSBn	24 33						
				" 172. 26.4.18 "	9 73				42 95		
		33			34 06			15			
May	P.P.	34 10						15			
				AR 265 14/5/18 YPB	7 30						
				AR 367 28/5/18 YPB	9 73						
		34 10			17 03			15	45 02		
June	P. Pay	33		Can a P				15			
				AR 811. 7/6/18. 12 Res.	38 93						
				" 1047 26/6 "	7 30				16 79		
		33			46 23			15			
July	P Pay	34 10		Can a P.				15			
				AR 1265. 11/7/18 12 Res	9 73						
				" 1451 24/7 "	9 73				16 43		
					19 46						
		34 10			19 46			15			
Aug	P Pay	34 10		Can a P				15			
				AR 1941. 24/8 "	9 73						
				" 1977 27/8 "	9 73				16 07		
		34 10			19 46			15			
Sept	P. Pay	33		Can a P				15	34 07		
				AR. 781. 8/9/18 20 Bn	3 57				30. 50		
				" 887. 27/9 18 + 20 Bn	3 57				26. 93		
		33			7 14			15			
				Bp w d.							

COMPILED BY F. Berrington

CHECKED BY [illegible]

NUMBER 72048 RANK Pte NAME FIRMAN Geo. alfred.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
				Fwd.					26 93		
Oct	P – Pay	34 10						15			
				H.R. 47078 26/10	9 73				36 30		
Nov	✓	67 10		✓ J 4908 23/11	9 73						
Dec											
Jan	✓	34 10		9148 26/10 Cen. Mil. Hosp Southbourne	8 57						
				a. c.	10 48			30			
				12291 5/12 c.c.H. E.P.	9 73						
								15	72 19		
		101 20			20 31			45			
Feby	P Pay	30 80		3584 13/1 1 COR	4 87						
				10745 Ta 58.2. 8/11 Hro Eastbrne	4 26						
Mar	✓	34 10		7823. #M1134 – 13187. 26/12. "	85						
	5/7414 – 26/2/19 12d. 39. 18/2/19	8 76		Q 4005 14/2 90R # 2451	9 33						
				520 14/2 1 COR	4 86						
				AP. Feby + Mar	60 98			30	54 87		
				AR 920 25/2. 1 COR	9 73						
				~~72048~~ Awarded 2 days P. by AC).							
				Awarded 6/3/19 WR. 58. 13/3/19 1 COR		2 20					
				DO. 58. 15/3/19 1 COR	70 71						
				AR 3400 15/3. 1 COR	14 60				28 34		
	43 66				85 31	2 20		30			
				880 2 20/3 K.P.K.	9 73				18 61		
					9 73						

S.O.S. 25/3/19
5/R 36 – 1 COR

WAR SERVICE BADGE CLASS A

SERVICE GROUP 25

OCCUPATIONAL GROUP 27

6329 BBC 130040

M.D.2

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

B1

Toronto Mother Machinist

1. No. 724048 148866

2. Rank. Pte

3. Name. FIRMAN George Alfred

4. Unit. 1st CORD 169th Batty

5. Date of Discharge APR 6 1919 Place TORONTO, ONT.

6. Reason for Discharge

DEMOBILIZATION

7. Authority. No.2 District Depot, Part II, D.O.No. 106

8. Proposed Residence after Discharge 90 Burton Ave. Allandale (Ont)

FMP Depot 25 3 19
FM. 'Soldier' - Sail. 36

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.?

G. A. Firman
Signature of Soldier.

Deceased 31-12-19

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place TORONTO, ONT.

Date APR 6 1919

F. McShane Capt

For
O.C. No. 2 District Depot

Signature
(O. C. Discharging Unit.)

M.F.B. 218a—300M.-11-18—1772-39-113.
21816/2/20

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

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch F

OVERSEAS CONTINGENTS

2148 ~~2253~~ Date of Assignment Aug 1/16

7175 S.K.

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

15			

PARTICULARS OF SEPARATION ALLOWANCE

No. 724048

Rank Pte. Promoted Reverted Discharge

Soldier's Name G. A. Firman

Battalion 109 Bn. "A"

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name Mrs Emile Firman

Address Box 17, 90 Burton Ave., Allandale, Ont.

Change of Address

1

2

3

4

Date 1917		Cheque No.	Amount S/A	Amount A/P	Total		REMARKS 5974-G-1.
Dec. 31				255	255		
Jan	V	66835		15	15	P	
Feb	F	93842		15	15		
Mch	A	13371		15	15		
Apr.	G	11036		15	15	a	
May	Q	17621		15	15	a	
June	M	20397		15	15	a	
July	M	27726		15	15	a	
Aug	M	35704		15	15	a	
Sept	R	47355		15	15	a	
Oct	R	51786		15	15	✓	
Nov	L	60124		15	15	✓	
Dec.	V	65135		15	15	✓	
Jan.	Q	73331		15	15	✓	
FEB	U	80418		15	15	L	
MAR	L	83389		15	15	✓	
APR	O	3532		15	15	✓	
				495	495		

A/c Closed 30-4-19

Ret'd per S. Cotian

Date 4-4-19 M.F.W.187 R-end.

Clerk A. J. B. 10-4-19

M.R.O. 88960 M.D. 2

AUDITED.

CONSOLIDATED ACCOUNT

M. F. W. 128
400M.—6-17—1772-39-1141
L. L. 22320—M. & D. 7593.

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
400M.—6-17—1772-39-141
L. L. 22330—M. & D. 1593.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12a.
50m.—4-16.
1772—39—819.

Sheet No. 2. Mrs. Emily Firman

L. L. Job 310.—Req. 6574.

PAYMENTS.

Name of Soldier Firman, G. A.
124048 Pte "Alex" 109th Bde

$15.00

Remarks. AUG 1 1916

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.		V 15580	15	
Sept.		Q 16559	15	
Oct.		A 21060	15	
Nov.		R 27288	15	
Dec.		Q 32119	15	
Jan.	1917	P 38295	15	
Feb.		V 39740	15	
March		W 46552	15	15 M
April		X 1667	15	15 6
May		P 7819	15	
June		D 14769	15	15 Ch
July		V 21762	15	B.
Aug.		D 28984	15	
Sept.		D 35902	15	
Oct.		Q 40941	15	
Nov.		G 42598	15	
Dec.		M 58248	15	
Jan.	1918			255
Feb.				
March				
April				
May				
June				
July				

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.				

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. Emily Firman,
Address Box. 17. 90 Burton Ave. Allandale,
Ont.

Rate $15 00

AUG 1 1916

By Whom Assigned Firman, G. A.
Regtl. No. 124048
Rank Pte.
Corps 109th Batt'n. "D" 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				

sheet 2

Army Form B. 103. Regimental Number 724048

Casualty Form—Active Service.

Regiment or Corps 109th Bn. ~~Young Soldiers Bn~~

Rank Pte Surname Fairman Christian Name George Alfred

Religion ..... Age on Enlistment ..... years ..... months

Enlisted (a) 5.3.16 Terms of Service (a) Dy W Service reckons from (a) 5.3.16

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

Extended { ..... } Re-engaged { ..... } Qualification (b) Machinist

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...			
22.9.17	Y.S.B. O.C.	T.O.S Young Soldiers Bn	Bemblebb	18 22.9.17	Pt II DO. 41
30.5.18	G.S.Bn.	S.O.S to 12th Res Bn	Bishott	30.5.18	Pt II DO. 128
					LIEUT. ASSISTANT ADJUTANT, YOUNG SOLDIERS' Bn. CANADIANS.
30-5-18	12th Res Bn	T.O.S. 12th Res Bn	Witley	30-5-18	Pt II 128
29.8.18	O.C. 12th Res. Bn. C.E.F.	Transferred to 20 Q Battn.	do	28.8.18	Part II 205
					Lieut i/c Records 12th Res. Bn. C.E.F.

(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. 11814—M1188 1000m 1/17 (27227) S P & Co, Ltd. Forms B./103/4 E./354. [P.T.O.

W. S. B. CLASS A.

CERTIFIED CORRECT 15 SEP 1918 CAN. RECORDS, LONDON.

Date	Report From whom received	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.
25-3-17	1st C.O.R.D.	ceases att. C.O.C. Ashford	W. Sandling	19-4-17	P.R. - 77
3-7-17	— " —	on "Com." Boys Bn. Beckhill	— " —	3-8-17	" " 147
7-8-17	Boys Bn.	att. from 1st C.O.R.D.	Beckhill	3-8-17	" " 1
					LIEUT: FOR LT: COL: I/C RECORDS, C.O.M.F.
29 AOU 18	~~C.I.B.D.~~	~~Arrived A.T.O.S. 20th Bn.~~		20 AOU 18	~~Part II Ord.~~ 82
2 SEP 18	C.I.B.D.	~~Left for C.C. Rein. C.~~		2 SEP 18	"
2 SEP 18	C.C. Rein. C.	Arrived.		2 SEP 18	"
5 SEP 18	— " —	~~Left for Unit~~	Field	5 SEP 18	"
14 SEP 18	20th Bn.	~~Arrived~~	Field	7 SEP 18	B213.
15-10-18	20 Genl	GSW Foot L. Inv(Wdd) & posted to 1st Regl Depot, Witley per AT Brighton 15-10-18.			Cntl Ont. W3083 - 6254. Pt 2 No.103-1918
		WHogan Major for Lt. Col., A.A.G. Canadian Section G.H.Q. 3rd Echelon B.E.F.			
23-[illegible]-1[illegible]	1st CORD	T[illegible]S from 20th Bn.	Witley	15-10-18	D.O. 294
ws					LIEUT: FOR LT: COL: I/C RECORDS, C.O.M.F
18-3-19	1st CORD	S.O.S. to 666 Rhyl MD2	Witley	17-3-19	D062
					LIEUT. OFFICER i/c RECORDS,

Forms
I. 1237
11

3000

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
3000	424048	Pte	Fraser	George

Year	Unit.	Age.	Service.
1917	2nd Batt. Boys Batt.	20	18/12

Station and Date.	Disease Tonsilitis
Can. Mil Hosp. Hastings	sore throat for 3 days before admission on left side.
3.9.17.	At present he has a quinsy on this side.
5.9.17	Quinsy opened & pus formed
15.9.17.	The quinsy has cleared up & the patient being subject to tonsilitis a tonsilectomy was done.
27.9.17.	throat clear & well.
1.10.17.	Well
	W E Clowley Capt
	Dis to Duty
	3 - OCT 1917

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

(23205) Wt. W 4234—M 627. 1,000,000, 8/16. C.F.&S. Forms/I. 1237/11.

P.T.O.

Station and Date.	

CLINICAL CHART.

(To be attached to Case Sheet.)

Army Form B. 181.

Corps 2nd Bat. Boys Batt. Military Hospital Cure Hill Hosp. Harlington Middlesex

No. 74048 Rank and Name Pte Firman Geo Age 20 Service 18/12

Disease Tonsilitis Date of admission 6-9-14 Date of discharge 3-10-17. Result Cured.

Dates of Observation	1	2	3	4	5	6	7	8	9	10	11	13	14	15	16	17	18																
Days of Disease	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27											
Temperature Fahrenheit	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time
Pulse per minute	96		92								80				72	76	71	70	68	72	84	78	84	108									
Respirations per Minute	20		20												20	20	20	18	18	20	20	20	20	20									
Motions per 24 Hours																																	

Calomel gr iv

Mag. Sulph

Quinatum Tonsilitis

(19342) W6465—M789. 1,000,000. 9-16. D.P.W. A.F.B. 181/4. (373)

Signature W Elmley Capt In charge of case.

C/sea

Jw 2

Forms
I. 1237
12

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	724048	Pte	Furman	G A.
Year	Unit.		Age.	Service.
	70th Bn AIF			

Station and Date.	Disease G S W left foot flesh T and T wound big toe - scar under, cannot put weight on foot - wounds healed - mass + no D. H W Scott Capt
Convalescent Hospital, No. ..... Date ..... Woodcote Park, Epsom. 5 DEC 1918	
1 DEC 1918	C.O. Mas.
18 DEC 1918	Disc Mas. State no trouble. H W S 1-5
28 DEC 1918	~~Stat~~ Foot swells on walking. Improving. C.O.
30 DEC 1918	Says foot still swells on walking. For Board.
21/1/19	Rec. B I by S.M.B.
30/1/19	Approved by A.D.M.S. W Turner Capt

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

(6365) W2944/P138 2,950,000 1/18 McA & W Ltd Forms/I. 1237/13 (E 2349) [P.T.O.

Station and Date.	

Forms
I. 1237
12

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
T504	424048		Firman	G. A.
Year	Unit.		Age.	Service.
C. G.	20th Canadians		19 6/12	2 6/12

Station and Date.

Disease GSW. left foot IX.

15. 10. 18.

Perforating wound at tele. Sft. M. tarso-phal-joint. Septic.

A-T.S.

Prophylactic with E.F. NO YES

DATE 11.10.18

Date 11.10. Units 750

Date 22.10. Units 500.

Date 3.11. Units 500

Date ..... Units .....

4.12.18 To Eastbourne

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

(6365) W2944/P.38 2,950,000 1/18 McA & W Ltd Forms/I. 1237/13 (E 2349)

[P.T.O.

Station and Date.	

724048 11 ORIGINAL ORIGINAL

MEDICAL HISTORY SHEET.

Surname Firman Christian Name George Alfred

Examined on 5th day of March 1916 at Lindsay

Birthplace City or Town Gravenhurst County Ontario

Apparent age 18 years

Trade or occupation Machinist

Height 5 Feet 11 Inches

Weight Lbs.

Chest measurement Minimum 33 inches. Maximum expansion 36 inches.

Physical development Good

Small-Pox Marks None

Vaccination Marks Arm Right None Left Two Number Two

When Vaccinated last March 5th 1916

(a) Marks indicating congenital peculiarities or previous disease

None

(b) Slight defects but not sufficient to cause rejection

None.

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

Date	Fit or Unfit	Examined for Re-engagement,
		9 MAY 1917 M.O.
		19 OCT 1918 M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date	Result	Vaccinations.
8.3.16	Inf	J. McCulloch M.O.
12.4.16		J. McCulloch M.O.
TAC 3.1.19		W. Kerr M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
18.4.16	Good	J. McCulloch M.O.
25.4.16	Good	J. McCulloch M.O.
2.5.16	Good	J. McCulloch M.O.
		Jan 25 5.18 LMC

Enlisted on 5th day of March 1916 at Lindsay

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	109th Bn C.E.F.	724048		5.3.16
Transferred to	20th Bn 12th Res Bn 20th Bn 28-8-18			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
M. C. D. Epsom Witley	21 JAN 1919 12-3-19	G.S.W. Post. Painful adherent scar great toe Lft	BL D. E. Patterson Major Jas. E. Hammond Capt.

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.

150M.—8-15.
H. Q. 1772-39-439.

CANADIAN CANADIAN

Surname Tuman Christian Name George Alfred

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.
C.M.H. Hastings		6	9	17.	3	10	17.	Tonsilitis	27.	Tonsilectomy	[illegible] Cleuley Capt
West Dene S. Deonaves.		15	10	18	4	12	18	G.S.W. L. foot 1X (perf.) Thd		Perf. wound at site of 1st M. tarsal joint. Septic on ad. Healed.	Thos Fredericks
M. C. H. Epson		4	12	18	4 FEB 1919			X.O. -	73	There is a small adherent scar over metatarsal-phalangeal joint great toe left and a larger one on ball of great toe. There is limitation of movement of great toe and the underneath scar appears to be tender on pressure. Heart and lungs negative. Other Systems and urinalysis negative	F. E. Dawson Maj. CAMC

MINOR.

RECORD OF BIRTH.

Number.	Rank.	Name	Unit.	Date of Birth.	Date available for Overseas Duty.
724048.	Private.	G.A.Firman.	20th Battalion.	16th May 1899.	16th May 1918.

IMPORTANT

(a) This record is to be attached to the man's Casualty Form B. 103.

(b) He is not to be drafted Overseas prior to date stated.

to be attached to Casualty form.
N.S. Sly.

DENTAL CERTIFICATE

Number 124648 Rank Pte Name Ferman G.A. Unit 20th

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.
	Fit	—	—	—

.....
Captain, C. A. D. C.

PART II

RT-0-21/1

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

Reserved for M.H.C.

Regt. No. 724048 Rank PTE Surname FIRMAN Christian Name GEORGE ALFRED

Unit on Corps—(a) Overseas from United Kingdom 20th BATT^N (b) in United Kingdom 12th RES.

Born at—Town GRAVENHURST County or Province ONTARIO Country CANADA

Date of Birth—Day 16th Month MAY Year 1899 Age 19 yrs. 8 months.

Joined at LINDSAY Date MARCH 5th 1916

Former trade or occupation MACHINIST

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

SMALL SCAR LEFT FOOT.

Height—feet 5 inches 11 Colour of eyes GRAY

Signature of Soldier (*for identification purposes*) G A Firman

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*)	ADHERENT SCAR LEFT FOOT.
Disabilities Group (*b*)	NIL
Disabilities Group (*c*)	NIL

2. CAUSE OF DISABILITY

		Place of origin	Date of origin.
(*i.*) As to Group (*a*) above.	G S W	FRANCE	11-10-18
(*ii.*) As to Group (*b*) above.	NA	NA	NA
(*iii.*) As to Group (*c*) above.	NA	NA	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? NA

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

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

5. MEDICAL HISTORY. He states he was over in France about six months when he was wounded in left foot and sent to base hosp and evacuated to England.

Notes. 9th Can. F.A. 11-10-18. GSW. foot. left. 1 CCS. 12-10-18. To G.H. 13-10-18. T & T W. region metatarsal-phalangeal joint great toe L wound fairly clean. West Dean H. St Leonards. 15-10-18 GSW. L foot. (perf). perf wound at site of 1st metatarsal joint. Septic on ad. Epsom. 5-12-18. GSW. left foot flesh. Scars tender. Foot swells on walking.

6. PRESENT CONDITION.

Subjective Symptoms. He states he has pain in ball of left great toe when walking, and after walking a mile or more the foot swells underneath just behind the toes.

Objective Symptoms. There is a small adherent scar over metatarsal-phalangeal joint great toe left. and a larger one on ball of great toe. There is limitation of movement of great toe and the underneath scar appears tobe tender on pressure.

Heart and lungs negative. Other systems and urinalysis negative.

7. OPERATION. (i.) Was one performed? No (ii.) If so, state what. Na.

(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. Fit.

9. DO YOU RECOMMEND:—

(a) Fit for duty? (state category) B1

(b) Invalid to Canada? No

(c) Discharge from the Service as permanently unfit? No

Date of Report 21 JAN 1919 191...

Signed F. E. Pettman Maj. Officer in medical charge of case.

Station Mil. C.P. Epsom

I have satisfied myself of the general accuracy of the above Report, and concur therein *~~[illegible]~~

Jas. G. Burton Capt. Adjt. Can. Gov. {Officer i/c Hospital / ~~[illegible]~~} Strike out one of these

Dated at Can. Mil. Hosp. Epsom Station, on 21 JAN 1919 191.....

*Delete if inapplicable.

PAR

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

10. Is the disability fully described in Part I. (1)? If not, describe it. Yes

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

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

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

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? (*Estimate at none, 1/10, 2/10, 3/10, etc., or all.*) Na.

15. Permanency of the Disability due to Service estimated next above in (14).
(*i.*) Is it permanent? Na.
(*ii.*) If not permanent, what is its probable minimum duration (*in months*)? Na.

16. If an operation was advised and declined, do you consider the refusal to have been unreasonable? Na.

17. Can the former trade or occupation be resumed? Yes.

18. REMARKS :—

Authority A.D.S. telegram 9083 11-11-18

19. RECOMMENDATION :—
(a) Fit for duty? (*state category*) B1.
(b) Invalid to Canada? No
(c) Discharge from Service as permanently unfit? No

Date of Board 21 JAN 1919

Signatures of the Board { F. E. Pettman Maj. C.A.M.C. President. W. Kennedy Capt. CAMC

Station Mt. C. H. Epsom.

Approved [illegible] Major

A.D.M.S.

Dated at Epsom. Station

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

ASSISTANT DIRECTOR OF MEDICAL SERVICES, CANADIANS LONDON AREA. JAN 30 1919 13, BERNERS ST. LONDON, W.1

PART III.

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 G. A. Firman 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 :—

G. A. Firman
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.

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: Witley DATE: 11-3-19

1. 1 (a) Unit: 1st C.D.R.D. (b) Regimental No. 324048 (c) Rank: Pte

(d) Surname: Firman (e) Christian name: George A

(f) Home address: Allendale Ont

(g) Next of Kin: Mrs E H Firman (h) Relationship: Mother

(i) Address of Next of Kin: same

2. Age last birthday: 19 Date of birth: 16-5-1899

3. Enlistment, or Appointment (if an Officer) (a) Place: Lindsay (b) Date: 5-3-16

4. Personal description:

(a) Height: 6- (b) Weight: 175 (stripped) (c) Complexion: Ruddy

(d) Colour of hair: Fair (e) Colour of eyes: Grey (f) Identification marks, Scars, etc.: small scar L. foot

5. Former trade or occupation: Machinist

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
	3	—

	Periods From	Periods To
Canada	5-3-16	26-7-16
England	26-7-16	20-11-16
France or other theatres of War	20-11-16	15-10-18

7. Original disease, or injury: Laceration of left great toe

(a) Date of origin: Oct 11, 1918 (b) Place of origin: France

(c) Cause: Active Service Conditions - G.S.W.

M. F. B. 227.

400M.—11-18.
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.)

Incapacity due to
① Partial loss of function of left foot.
(Tender & adherent scar great toe)

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.)

Obj. - Small adherent scar over the left first metatarso-phalangeal articulation - joint is slightly swollen and tender to pressure. Passive movement is normal but active movement is entirely lost. Foot is very cold.
Subj. - After walking a mile or so foot swells up and becomes painful. is very susceptible to the cold and pain is aggravated by inclement weather.

R.B. 6/6 L.B. 6/6 Eyes 20-20

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

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

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

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

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

Urine - 1004 - Neutral - No albumen No sugar

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

Left foot wounded by M.G. bullet on Oct. 11th 1918.

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*).)

Chn H. Hastings - Tonsilitis - Tonsilectomy 6/9/17 - 3/10/17

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

None

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

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

N a -

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? Permanent.

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

St Leonards - 15/10/18 - 4/12/18.

Mt H. Epsom 4/12/18 - 14/2/19.

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

No.

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

17. Recommendations

G. Routh Capt.

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 424048 Fireman G.A. 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

G. A. Firman PTE Rank.

Signature of invalid examined.

OPINION OF THE MEDICAL BOARD

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

yes

19. Is the invalid fit for

(*a*) General service,	(Category A)	(~~Yes~~ or No.)
(*b*) Service abroad, not general service,	(" B)	(Yes or ~~No~~) B2/11
(*c*) Home service (Canada only),	(" C)	(~~Yes~~ or No.)
(*d*) Temporarily unfit.	(" D)	(~~Yes~~ or No.)
(*e*) Unfit for service in Categories A, B and C	(" E)	(~~Yes~~ or No.)

20. It is certified that the invalid

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

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

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

Boarded for return to Canada
Authority Telegram A.G. 1/9083 3/11-21-18

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.

N. J. Bowlin Major C.A.M.C. *President.*

PLACE Witley

DATE 12-3-19

Jas. L. Hammond Capt. C.A.M.C. } Members

TO BE COMPLETED WHEN TREATMENT IS REFUSED

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

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

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

President

PLACE.....

DATE..... } Members

APPROVED BY

H. H. Tinney CAPTAIN,
Assistant Director of Medical Services.

DATE.....

APPROVED BY

Director-General of Medical Services.

DATE.....

Form A.G. 10410 5M-10238-25-2-17.

OVERSEAS MILITARY FORCES OF CANADA.

DATE Feb. 4 1919.

2/2

To:- Hospital Representative,
Military Convalescent Hospital,
Woodcote Park, Epsom, Surrey.

724048 Pte.
Firman G.A.
20th Bn.

The marginally named soldier has this day been Medically examined and placed in Category B1 and is now available to be discharged.

I hereby certify that this man has been found at this inspection this day free from Vermin, Venereal and Infectious Diseases.

FURLOUGH ADDRESS.

28 Warrender Rd
Edinburgh
Scot

NEAREST STATION.

Edinburgh.

Scot.

12 16 OR
Wtng

Captain, C.A.M.C.,
for Commandant,
Military Convalescent Hospital,
Woodcote Park, Epsom, Surrey.

MSG.
1000.