

copy to [unclear]

MAR 3 1916

A

C

ATTESTATION PAPER.

No. 724042

109th OVERSEAS BATTALION, G. E. F.



CANADIAN OVER-SEAS EXPEDITIONARY FORCE

DUPLICATE

QUESTIONS TO BE PUT BEFORE ATTESTATION.
(ANSWERS.)

- 1. What is your surname?..... *Gilmour*
- 1a. What are your Christian names?..... *Percy Hadden*
- 1b. What is your present address?..... *R.M.C. #5 Woodville Ont*
- 2. In what Town, Township or Parish, and in what Country were you born?..... *Weyhill, N. City, Victoria Co Ont*
- 3. What is the name of your next-of-kin?..... *John Gilmour*
- 4. What is the address of your next-of-kin?..... *R.M.C. #5 Woodville, Ont*
- 4a. What is the relationship of your next-of-kin?..... *Father*
- 5. What is the date of your birth?..... *August 16th 1882*
- 6. What is your Trade or Calling?..... *Flaming*
- 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 } *Yes*
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? }

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I *Percy Hadden Gilmour*, do solemnly declare that the above are answers made by me to the above questions and that they are true, and that I am willing to fulfil the engagements by me now made, and I hereby engage and agree to serve in the Canadian Over-Seas Expeditionary Force, and to be attached to any arm of the service therein, for the term of one year, or during the war now existing between Great Britain and Germany should that war last longer than one year, and for six months after the termination of that war provided His Majesty should so long require my services, or until legally discharged.

Date *MAR 3 1916* 1916. *P. H. Gilmour* (Signature of Recruit)
[Signature] (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I *Percy Hadden Gilmour*, do make Oath, that I will be faithful and bear true Allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will as in duty bound honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity, against all enemies, and will observe and obey all orders of His Majesty, His Heirs and Successors, and of all the Generals and Officers set over me. So help me God.

Date *MAR 3 1916* 1916. *P. H. Gilmour* (Signature of Recruit)
[Signature] (Signature of Witness)

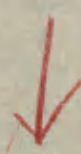
CERTIFICATE OF MAGISTRATE.

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 *Woodville* this *Third* day of *March* 1916.

Reuben W Thomas (Signature of Justice)



BA 1000

Description of Percy Hadden Culman on Enlistment.

Apparent Age..... 23 years 6 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

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

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

Height..... 5 ft. 6 7/8 ins.

Mole on left breast near nipple

Chest measurement. { Girth when fully expanded..... 41 ins.
 Range of expansion..... 5 ins.

Complexion..... Fair

Eyes..... Gray

Hair..... Brown

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

CERTIFICATE OF MEDICAL EXAMINATION.

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

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

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

Date..... MAR 3 1916..... 191

Place..... Woodville

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

*Insert here "fit" or "unfit."

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

CERTIFICATE OF OFFICER COMMANDING UNIT.

..... Percy Hadden Culman..... 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.

..... A. J. [Signature]..... Lt. Col. (Signature of Officer)

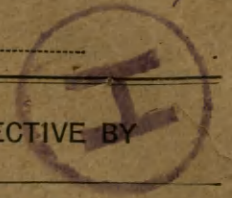
Date..... MAR 3 1916..... 191
 O. C. 109th Overseas Battalion, C. E. F.

REGIMENTAL DOCUMENTS

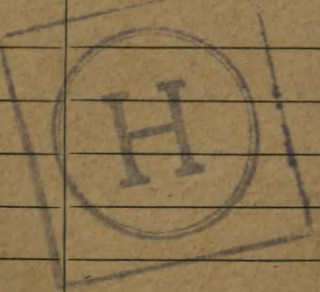
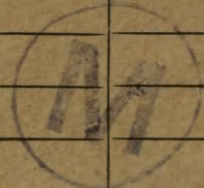
NAME GILMOUR Percy H

E.N. ^{Pte.} REGT. NO. 724042 UNIT 109th Bn. H. Q. FILE NO.

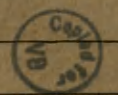
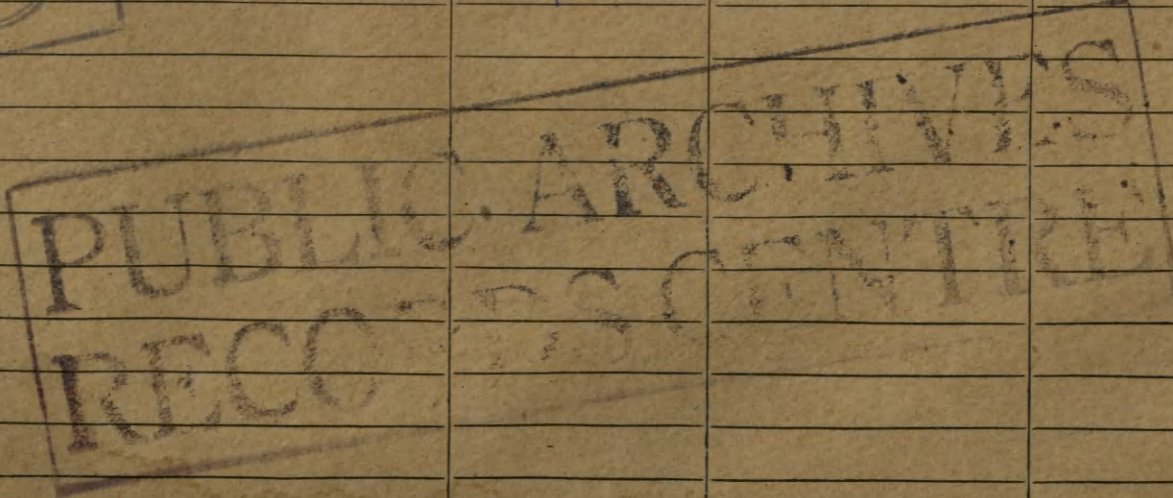
13/3/19



CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
1 ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
2 CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
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)					
2 MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)				13029	DISCHARGE
2 DENTAL HISTORY SHEET (M.F.B. 465)					Category
MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					<i>Demob.</i>
2 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)					DESERTION
1 LAST PAY CERTIFICATE (M.F.W. 44)					
2 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)					
3 misc.					
m.f.w. 192.					
m.f.w. 67					
Form B-149					
1237					



405 488



13

MARRIED OR SINGLE

Single

PLACE OF BIRTH

Uphill Legby Twp. Ont

NAME AND ADDRESS OF NEXT OF KIN

*Mary Esch
John Gilmore
Cambridge
Woodville 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

Checked *Newton*

DATE	PAY				FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS					
	NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT					1		2		3	
			\$	c.			\$	c.			\$	c.				No.	DATE	No.	DATE	No.	DATE
<i>July 31</i>															10 10						
<i>Aug 31</i>	31	1.00	31		31	10	310								34 10	22	98	16			
<i>Sept 30</i>	30		30				3								33	53	34	16	8	15	16
<i>Oct 1-5</i>			5				50								5 50						
<i>6/30</i>	26	1.	26		26	10	260								28 60					125	3/4/16
<i>Nov 30</i>	30	1.	30		30	10	3								33 00						
<i>Dec 31</i>	31	1.	31		31	10	310								34 10					9050	30/11
<i>1917</i>			15 30				15 30													8769	1/11
<i>Jan 31</i>	31	1.10	34 10												24 10						
<i>Feb 28</i>	28	1.10	30 80												30 80					28	1/11
<i>Mar 10</i>	10		11												11						
<i>1/31</i>	31		23 10												23 10					2326	2/2/16
<i>Apr 30</i>	30		33												33					314	1/3/16
<i>Land Bud.</i>	300		30												10 10					1760	2/2/16
															310 40					1506	2/2/16
																				1566	2/2/16

2326 2/2/16
314 1/3/16
1760 2/2/16
1506 2/2/16
1566 2/2/16

Pay 30⁰⁰

CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
2	3	4	CREDIT				DEBIT				
7 30	38 87			180	230	240 54	69 86				
				20 .		20 .	83 96				
				4 84	20 .	24 84	92 09				
				4 84	20 .	24 84	101 32				Remit. to Hosp.
				20 .		20 .	115 42				
				20 .		20 .	128 42				

7 30	38 87	9 74 280	2 20	350 28							
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date	b ¹	b ² Particulars	b ¹	b ²	Tot	Bal
	42 86		19.52			20
		CR 3103-20 ³ / ₈ - 3rd BDD	24.33			
		DR 1142-8 ⁹ / ₁₁ - Grande St.	2 43			91.52
	42 86		46 28			20

* Strike out whichever inapplicable.

ASSIGNED PAY	ENGLAND CANADA	SEPARATION ALLOWANCE	ENGLAND or CANADA	NAME:-
EFFECTIVE DATE:-	1-8-16 1-11-18	EFFECTIVE DATE:-		NUMBER
AMOUNT:-	\$ 2000 15 ⁰⁰ .	AMOUNT:-		
NAME, ADDRESS, RELATIONSHIP & AUTHORITY		WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.		
Mrs. Mary Gilman, Woodville, Ont R.M.D.S.		Mother		

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
18 ⁷⁸	6541	Comp	9 ⁷²				
21⁷⁸	6601		1⁸⁷				

PARTICULARS OF RENDERING NON-EFFECTIVE: *Trans to Can 1/1/19 Ref NR 219 24/1/18*

MONTH 1918	PARTICULARS	CR 1	CR 2	PARTICULARS
And 31	Bal forward			
April	P. P. 30 Days	33		b.a.p. AR 49-11/4/18-34 cen 289-29/4/18-Comp
		33		
May	P. P.	34 10		b.a.p. AR 800-14/5/18-Comp 1250-29/5/18 ✓
		34 10		
June	P. P.	33		" 1715 14.6.18 b.a.p. " 1919 25.6.18
		33		
July	P. P.	34 10		b.a.p. AR 3559 15 ⁷⁸ Comp London 6 ⁷⁸ # 14967 AR 5897 26 ⁷⁸ Comp
		34 10		
Aug	Ptis Pay	34 10		a.p. 3077 14/8 AR 3867 28/8/18 Comp
		34 10		
Sept	Ptis Pay	33		a.p. AR 4141 14/9/18 Comp " 4605 26/9/18 Bross 892 7/9/18 Comp
		33		
	Carry Forward			

NUMBER 724042

RANK

Pte.

NAME

GILMOUR P.H.

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFER
				Brought forward					16 86	
Oct.	Ptes Pay.	34 10		ap				20		
				AR 5056 12.10.18. Crub 8	4 87					
				AR 5202 26.10.18	4 87				21 22	
		34 10			9 44			20	67 10	
Nov	✓	39		cap				16	82 32	
Dec		34 10		AR 5719 13.11.	4 87				54 33	
				" 5935 27.11.18.	9 73					
				cap				15		
				" 6541 21.12.18.	9 73				33 99	
		67 10			2 433			30		
				AR. 6601 2 1/2/18	4 87					
					4 87				29 12	

Pte.

NAME GILMOUR. P.H.

CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
		Brought forward					16 86		
34	10	ap				20			
		AR 5056 12-10-18. Cml 2	4 84						
		AR 5202 26-10-18	4 84				21 22		
34	10		9 44			20	67 10		
39		cap				15	82 32		
34	10	AR 5719 13-11. ✓	4 87				54 33		
		" 5935 27-11-18. "	9 73						
		cap				15			
		" 6541. 21-12-18. "	9 73				3399		
67	10		2433			30			
		AR. 6601 2 1/2 1/18	4 87						
			4 87				2912		

ORIGINAL MEDICAL HISTORY SHEET.

Surname Williamson Christian Name Percy Hadden

Examined { on 3rd day of March 1916
 at Woodville
 Birthplace { City or Town Sp. J. Highy
 County Victoria

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

Apparent age 25
 Trade or occupation farmer
 Height 5 Feet 6 7/8 Inches.
 Weight 148 1/2 Lbs.
 Chest measurement { Minimum 36 inches.
 Maximum expansion 41 inches.
 Physical development good
 Small-Pox Marks none

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT
		28 APR 1917
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Vaccination Marks { Arm Right none Left one
 Number one

Date	Result	VACCINATIONS
<u>3.3.16</u>	<u>good</u>	<u>J. McCulloch</u> M.O.
		M.O.
		M.O.

When Vaccinated last 3/3/16
 (a) Marks indicating congenital peculiarities or previous disease none

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

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>28.5.16</u>	<u>good</u>	<u>J. McCulloch</u> M.O.
<u>4.6.16</u>	<u>✓</u>	<u>J. McCulloch</u> M.O.
<u>3.6.16</u>	<u>✓</u>	<u>J. McCulloch</u> M.O.
<u>11.2.18</u>	<u>TAB</u>	<u>W. Bayly</u> do

Enlisted on 3rd day of March 1916 at Woodville

	CORPS.	REG'T L NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>109th Bn C.E.F.</u>	<u>724042.</u>		<u>3.3.16.</u>
Transferred to.....	<u>21st Bn</u> <u>14th M.G. Coy</u>			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>Monts Horton</u>	<u>22-9-17.</u>	<u>Trench fever</u>	<u>Hampstead</u>
<u>3rd C.C. O. Seaford</u>	<u>4-4-18</u>	<u>Sit for duty A iii</u>	<u>to line</u>
<u>Ex Camp Toronto</u>	<u>8-2-19</u>	<u>W. Bayly</u>	<u>Major Galt</u>

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

over

D

CANADIAN

(Hospital Record)

Christian Name: Wesley
 Surname: Graham

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				
General's Military Hospital, WHALLEY, Lancs.		22	Apr	17	27	July	17	Trend Fever.	107	Reported sick April with pain in lead back. On admission he complained of pains in limbs and aching in body generally. No pyrexia. Heart & lungs normal. 3/5/17 Now convalescent. 7-5-17. Developed pains in lead limbs and pyrexia, a typical Influenza attack. 25-5-17. Scabies. 16-6-17. Seen by Dental Specialist and one molar extracted.	(signed) F. W. Pollard C.M.P.
Canadian Convalescent Hospital, Monks Horton, Kent.		27	7	17	28	7	17	Trend fever & Scabies.	1	Trans to Mease Bks. Hosp.	O. Christ, Captain Registrar Capt. C.A.M.C. Canadian Conv. Hospital Monks Horton, Kent.
Military Hospital, Shorncliffe.		28	7	17	29	7	17	Trend fever	1	Trans. to Mease Bks. Hosp.	R. A. Kennedy Captain
do		29	7	17	31	7	17	do	2	To Camp. B.	J. Wacker
Dame John Hospital Canterbury		31	7	17	10	8	17	" "	"	Well	
The Military Hospital Shorncliffe		10	8	17	11	8	17	" "	1	Transferred to Monks Horton	
Canadian Convalescent Hospital, Monks Horton, Kent.		11	8	17	9	10	17	" "	58	Disch. to Army Rep. Category D.I.	M. Owen Registrar Capt. C.A.M.C.

D
Pres.
MEDICAL CASE SHEET.*



No. in Admission and Discharge Book.
3-885

Regimental No. Rank. Surname. Christian Name.

724042 *Dr.* *Gilmour* *Jerry W.*

Unit.

Age.

Service.

Year

1917

14th M.G.C. *24*

16/12
France
6/12

Station and Date.

Disease *French Fever Scabies*

CAN. CONV. HOSPITAL,
MONKS HORTON, KENT

Reported sick 12/4/17 at Vimy Ridge sent to No 3 Can Gen Boulogne sent to Whaller

22/4/17 to Monks Horton 27/7/17

Shins sore pain in legs.

Present Condition up patient 6 weeks has scabies

Transfer to ^{Shom. Hill Hosp.} Moore Barracks for treatment scabies

MDM Ewen Capt CMCC

29.7.17

Discharged 30.7.17

Transfer to medical Dep.

Monks Horton Convalescent Hospital

31.7.17

Cured

S. Wacker

Shins still painful

For 2 weeks convalescence

MDM Ewen

CANADIAN WAR HOSPITAL
THE BEACH, WALSHER.

16/8/17

Slow March - drill Ordinary diet Still complains of pain in shins & back

J. Woodward

20-9-17

For short form Board

MDM Ewen Capt

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

Station
and Date.

22/9/17

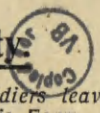
Bonnet Station

Findings [I]



Medical Examination upon leaving the Service

of an Officer fit for general service or a Soldier fit for duty



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

Rank *Pte* Name *Gilmour* Surname *Percy A.*
Unit or Corps *109th Inf. C.M. & P. Seaforth* (If a soldier) Regtl. No. *724042*
Born at *Uphill Ont Canada* on, date *Aug 16th 1892*
Signature (for identification) *P. W. Gilmour*

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

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

Weight *170* lbs.
Height *5* ft. *8* ins.

2. NUTRITION AND DIATHESIS? *Good*

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

3. NERVOUS SYSTEM? *No.*

4. RESPIRATORY SYSTEM. *No.*

5. HEART? *No.*
Abnormal Sounds? *None.*
Abnormal Size? *No.*
Pulse Rate? *74.* Intermittence or irregularity? *No.*

6. ARTERIES.—Any hardening? *No.*

7. DIGESTIVE SYSTEM? *No.*

8. GENITO-URINARY SYSTEM? *No.*
Urinalysis—s.g.? *1.026.* Reaction? *alkaline.* Albumen? *0.* Sugar? *0.*

9. SKIN, MIDDLE EAR, EYE
or any other part? *No.*

10. Is there any evidence of impairment of health or physical condition not mentioned above? If so, describe. *None.*

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

Examined at *Kinnaird Pk* Signed *J. H. Locke Capt* M.O.
Date *3/12/18* Signed *P. W. Gilmour Capt* M.O.

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



Medical Examination upon entry into the service

and an officer in the regular service of the United States Army

1864

Aug 11th 1864

Wm. H. ...
17th ...
18th ...
19th ...

110

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



A²

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. 924042 Rank P.T. 5 Surname GILMOUR
(Give name in full)

Percy Haddon

Unit or Corps No. 4 D.D. Birthplace Uphill out Canada

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

1. GENERAL DESCRIPTION:

Physique Good Weight 154 lbs.

Height 5 ft 6 1/2 in. Colour of Eyes Gray

Nutrition Good

Pulse 70

Condition of arteries Good

Vision Rt. 20 Left 20

Hearing (conversational voice) Rt. 2 ft. Left 2 ft.

Left 2 ft.

Identification marks, scars, or deformities.
 (Give cause and date of origin.)

Mole left Breast
~~near Little~~

Opinion as to general health and physical condition Fit A²

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.

French Fever April 19 about 6 months treatment
No after effects.

~~Gonorrhoea~~ Nov 19 3 months treatment No after effects

Scarific 19 No after effects

No Hernia No Haemorrhoids

No Varicose No Varicose Veins

No Gout

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

[OVER]

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...*Toronto*.....(Canada)

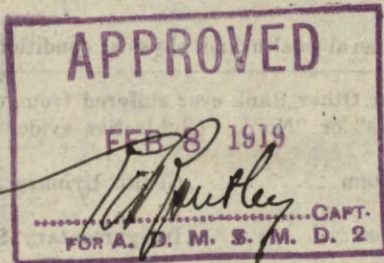
Date *Feb 8th 1919* Signed *W. D. Neal, Capt.* M.O.

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 *T. H. Johnson*

(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]

CANADIAN EXPEDITIONARY FORCE.

M.F.W. 44.
1188 (D.P. 250M-12-18.
1772-39-908.

LAST PAY CERTIFICATE

M. D. 2
No. 56

Regimental No. 724043 Rank Pte Name Gilmour P.H.
(Surname first)
Unit who was* DISCHARGED
On 11-2-19 191....., to.....
*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1-2-19 to 11-2-19 191... the inclusive date of transfer or discharge.

	Dr.	Cr.
Bal. Dr. or Cr. from prev. month.....		22.75
Regimental Pay..... days at \$..... c.....		11
Field Allowance..... days at \$..... c.....		11.0
Separation Allowance.....		3.5
Clothing Allowance.....		7.0
Post Discharge Pay.....		
*Other Credits		
Advances	504.91	22.75
Separation Allowance and Assigned Pay Cheque No.....		
*Other Charges		
Balance on transfer or on discharge, cheque No.....	516.00	117.10
Total		<u>139.85</u> / <u>139.85</u>

*Give particulars.

A monthly stoppage of \$ 15.00 (†) has..... (‡) been paid on account of Assigned Pay for the month of Jan 191 9 } (to Assignee Mary Gilmour and Separation Allee. for month of..... 191..... }
(Address) R.M.D #5, Woodville, Ontario
(†) Insert amount to be assigned, whether it has been paid or not. (‡) Insert "not" if amount has not been paid for period of account.

ON TRANSFER OF AN OFFICER.

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

REMARKS:—

State (1) date of enlistment..... married or single s
(2) Separation Allowance, entitled or not No (3) Reason for discharge Demob
(4) Authority for discharge or transfer 2040

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

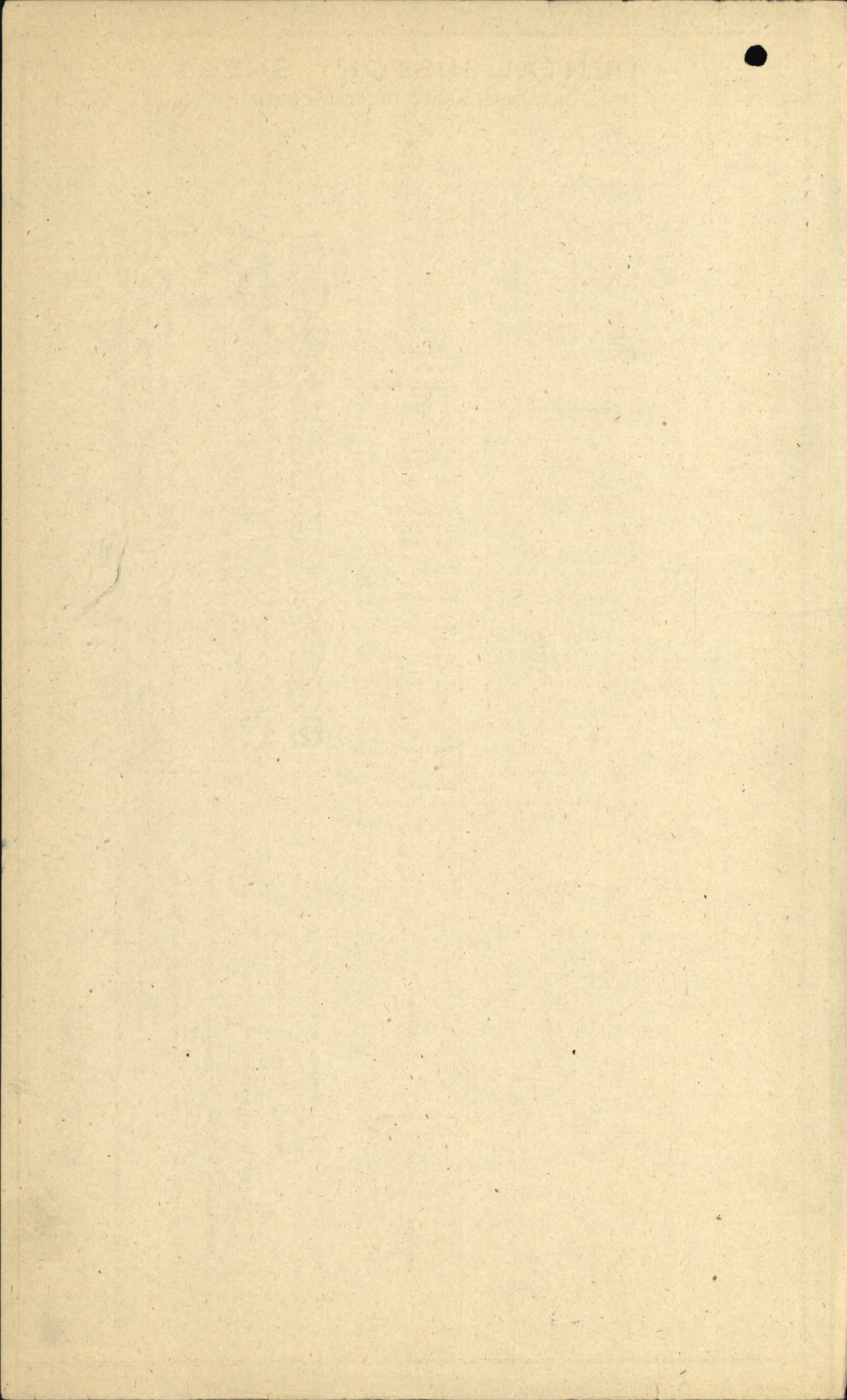
I have carefully examined this statement of account and find it to be a correct extract from the Pay Account of the officer or soldier.

Date 10-2-19

Place TORONTO, ONT.

C. H. Reave
Paymaster. CAPT.
PAYMASTER, No. 2 DISTRICT DEPOT

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



6

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.

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

OVERSEAS BATTALION, C. E. F.

(2) Regimental Number..... **724042**.....

(3) Full Name of Soldier..... **Percy Haddon Gilmour**.....

(4) Place of Birth..... **Uphill, 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**.....

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) GILMOUR, P.H. M.D. No II
REGIMENT 14 M.C. Co. RANK Pte No. 724042

Date of Examination in England 2/1/19 Date of Examination in France _____



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.

PRESENT DENTAL REQUIREMENTS

1. FILLINGS 18

2. EXTRACTIONS 19, 20,

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

KINMEL PARK,
NORTH WALES.

Signature of Dental Officer

A. C. Goodshand
Capt

W.M.G. Co. Pte Gilmore, P.H. MD No 12

11/11

[Faint handwritten text]

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

M. F. W. 54.
150M. 10-15.
H.Q. 1772-50-920.

Casualty Form—Active Service.

109th OVERSEAS BATTALION, C. E. F.

Unit, Regiment or Corps

Regimental No. 24042 Rank Private Name Gilmour Percy Addow

Enlisted (a) 3. 3. 16 Terms of Service (a) D of W. Service reckons from (a) 3. 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) Lanner

CERTIFIED CORRECT.
8 OCT. 1916
CAN. INF.

Report Date	From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	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	
		Transferred for Overseas Service with <u>20th</u> Batt'n		OCT 5 1916	<u>D.O. Pt. 11. No 279</u> Capt.
6/10/16	C B Dep	Arnd & taken on strength	20th Bn	6/10/16	NR Pt 2
13/10/16	do	Classified 'A'	7 S. Hosp	13/10/16	NR <u>109th Overseas Battalion</u> C. E. E.
22/10/16	7 Can Staty	Indigestion	do	12/10/16	W3034
28/10/16	do	Influenza	Con Dep	28/10/16	W3034
28/10/16	4 Con Dep	do	4 Con Dep	28/10/16	W3034
6/11/16	do	Rheumatism	To Hospl	6/11/16	W3034
6/11/16	7 Can Staty	do	7 Can Staty	6/11/16	W3034
15/11/16	do	Myalgia & scabies	59 enl	15/11/16	W3034
15/11/16	39 Gen.	N.Y.D. slt	adm 39 Genl	15/11/16	W3034
22/11/16	do	Scabies	trans CBD	22/11/16	W3034
23/11/16	CBD	Taken on strength class A	CBD	23/11/16	NR
30/11/16	2nd Ent Bn	Arrived	Field	28/11/16	NR
30/11/16	do	Forfeits 2 days pay under for absent from draft arriving 28/11/16, 1 am to 12 noon 29/11/16 35 hours	R.W?		
24/11/16	CBDepot	Left for 2nd Ent Bn	Field	30/11/16	B2069
20-1-17	AG.G.H.Q.	Trsf'd to 14th Mach Gun Coy.	Field	24/11/16	NR

ADJUTANT
109th Overseas Battalion C. E. E.
CAPTAIN,
ADJUTANT,
109th BATTALION CAN. INFANTRY.

Pt 2 O'rs 78d26/12/16.
16-1-17 .Auth, CGS. OB/181 & 19-1-17.
AG.G.H.Q.A/6864. K.A.8575
Part II Ors. 19.8.3-17

(a) In the case of a man who has re-engaged for, or enlisted into Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) e.g. Signaller, Shoering Smith, etc., etc., also special qualifications in technical Corps duties.



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

Do.	A.G.	Taken on strength of Coy?	Field	17/I/17	A.G. Pt.2 Ord.No. No.27 dated 12/3/17
13-4-17	OC unit	sick to hospital	not stated	11-4-17	13213 Dec 16/1
16-4-17	3 Can. Gen.	P V O. adm.	3 Can. Gen.	16-4-17	W3034-284-
22-4-17	Princess Elizabeth	trench fever. posted to Can. In. g. Depot Crouborough	Princess Elizabeth	22-4-17	W3083-9700-PT 20rd 60 d/9-5-17 u l loekshot #.

Lieut. for Major, A. A. G.
Canadian Section, G. H. Q. 3rd Echelon, B. E. F.

18.5.17	M.G. Reg. Depot	Taken on strength	Seaford	22.4.17	PT 10 70. M/G M/G Lewis For Lt. Col. 118 RECORDS COME.
14/12/17	DISCHARGED FROM 3RD C. C. D.		Seaford TO	75970	BN. PART II D. O. No. 257. 15/12/17 F. M. Hammond For O.C. 3rd Canadian Command Depot.
15-10-17	C.M.G.C.D.	On Com to 3rd C.C.D.	Seaford	12-10-17	PT II D.O. No 220
26-11-17	C.M.G.C.D.	Ceases 3rd C.C.D. in Hosp	Seaford	26-11-17	PT II D.O. No 278
2-2-18	C.M.G.C.D.	Ceases in Hosp & on Com to 3rd C.C.D.	Seaford	2-2-18	PT II D.O. No 331
11/4/18	DISCHARGED FROM 3RD C. C. D.		Seaford TO	75970	BN. PART II D. O. No. 340. 11/4/18 Lieut. Adj. Gen. R. H. H. For O.C. 3rd Canadian Command Depot.

Casualty Form - Active Service.

Regiment or Corps C.M. & S.
 Rank Pte Surname Gilmour Christian Name P. N.
 Religion _____ Age on Enlistment _____ years _____ months.
 Enlisted (a) 3-3-16 Terms of Service (a) C. of A. Service reckons from (a) 3-3-16
 Date of promotion to present rank _____ Date of appointment to lance rank _____
 Extended { _____ } Re-engaged { _____ } Qualification (b) Farmer
 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				
<u>13-4-18</u>	<u>Com. C.M.G.D.</u>	<u>Embarked</u> <u>Disembarked</u> <u>On Com. to C.M. & S. Seaford</u>		<u>12-4-18</u>	<u>D.O. Pt. 2 No 103</u>
<u>9. 12. 18</u>	<u>Com. C.M.G.D.</u>	<u>Orders on Command, Baresfield</u>	<u>Seaford</u>	<u>7. 11. 18</u>	<u>D.O. Pt. 11 No 321</u>
<u>31-12-18</u>	<u>Com. C.M.G.D.</u>	<u>On Com. Rhyl</u>	<u>Seaford</u>	<u>30-12-18</u>	<u>D.O. Pt. 11 No 338</u> <u>H. Hanson</u> <u>ASSISTANT ADJUTANT GEN. C.M.G.D.</u>
		<u>Attached C.C.C.K. Part 2 Orders pending transfer to C.E.F. Canada.</u>			
		<u>Orders to be attached on transfer to C.E.F. Canada. Part 2 Orders...</u>			
		<u>12/1/19.</u> <u>Officer Comd'g M.D.2 C.W.</u> <u>Kinnel Park Camp. Rhyl,</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, Shoeing-Smith, &c.



Date	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
JAN 11 1919	O. S.	T. O. S. No. 2 DISTRICT DEPOT, TORONTO		1919 PART II D. O. 24	
					<p style="text-align: right;"><i>W. C. Roberts</i> Lieut. For O. C. No. 2 District Dep.</p>
11-2-19		S.O.S. (Discharged) No. 2 District Depot		Part II, D.O. No. 40	
		O. C. Discharge Section, No. 2 District Depot			

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate



This is to Certify that No. 724042 (Rank) Pte.

Name (in full) GILMOUR. PERCY HADDEN enlisted in
the 109th Bn.

CANADIAN EXPEDITIONARY FORCE at Woodville, Ont. on the 3rd
day of March 19 16

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 26 yrs. 6 mo.
Height 5' 6 7-8"
Complexion Fair
Eyes Gray
Hair Brown

Marks or Scars
Vacc. M. L. ARM

P. H. Gilmore
Signature of Soldier

W. H. [unclear]
Issuing Officer

Date of Discharge Feb. 11th, 1919

For Rank
O.C. No. 2 District Depot.
Appointment

Signed at Toronto, Ont. this 11th day of February 19 19

in Military District No. 2 No. 2

File Reference No. FEB 11 1919
DISTRICT DEPOT

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.

LS.



CANADIAN EXPEDITIONARY FORCE
Discharge Certificate

No. (Rank) Name

Unit

Address on Discharge

Character and Conduct

Former Occupation

Special Qualifications of Value in Civil Life

Medals and Decorations

Remarks

Signed at this day of 19

.....
 Name of Officer

.....
 Rank

.....
 Appointment

Uniform is not to be worn after
 expiration of one month from
 date of discharge, except by special
 permission of G. O. C. district.

*On demobilization the
 particulars called for on
 the back of this cer-
 tificate will not be com-
 pleted*

MILITIA AND DEFENCE
 ASSIGNED PAY
 OVERSEAS CONTINGENTS

To Whom *Mrs Mary Gilmore*
 Address *R. In. Co. #5 -
 Hoodville*

By Whom Assigned *Percy A. Gilmore*
 Regtl. No. *724042*
 Rank *Pte.*

Rate *\$20⁰⁰* *Out -*
AUG 1 1916

Corps *109 Btm "C Coy"*

PAYMENTS

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



1. 1. 1.

1. 1. 1.

1. 1. 1.

1.

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

M. F. W. 12a.
 50m.-4-16.
 1772-39-819.

Sheet No. 2.

L. L. Job 310.-Req. 6574

Mrs. Mary Gilmore

PAYMENTS.

Name of Soldier *Percy A Gilmore*
"6 Coy" 724042 (pt) 109 Bw

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.		<i>L 15765</i>	<i>20</i>	
Sept.		<i>L 16566</i>	<i>20</i>	
Oct.		<i>L 21306</i>	<i>20</i>	
Nov.		<i>J. 26133</i>	<i>20</i>	
Dec.		<i>7 33013</i>	<i>20</i>	
Jan.	1917	<i>2137833</i>	<i>20</i>	
Feb.		<i>P 41272</i>	<i>20</i>	
March		<i>q 50802</i>	<i>20</i>	
April		<i>P 1888</i>	<i>20</i>	<i>20 R</i>
May		<i>A 2415</i>	<i>20</i>	<i>20-6 of 1888 cancelled 12/88. 2/4/17</i>
June		<i>N 14978</i>	<i>20</i>	<i>20. Ch</i>
July		<i>R 21618</i>	<i>20</i>	<i>B.</i>
Aug.		<i>R 28738</i>	<i>20</i>	<i>Lu</i>
Sept.		<i>Y 35351</i>	<i>20</i>	<i>D</i>
Oct.		<i>J 42457</i>	<i>20</i>	
Nov.		<i>H 49368</i>	<i>20</i>	
Dec.		<i>A 48089</i>	<i>20</i>	
Jan.	1918		<u><i>340</i></u>	
Feb.				
March				
April				
May				
June				
July				

\$20

AUG 1 1916

300

to

lot

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

PAYMENTS.

Name of Soldier _____

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

72042. Gilmore J H

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.				
23.4.17	2nd Lt. MGC	Adm #3 Can Gen Hosp	Boulogne	16.4.17	CL A 258 PUO
1.5.17	"	Queen Mary Milk Hosp	Willet	23.4.17	CL B 222 French Fever
9.5.17	"	(Sick) Posted to CMGH	Field	22.4.17	PRO 604/10709/12-5-17/CM 9 CD
1.8.17	✓	Adm. Mil Hosp	Shorncliffe	28.7.17	Ch. 5 282
2.8.17	✓	2nd. C.C. H. Works	Horton Kent.	28.7.17	- 6283
16.10.17	✓	Disc	Ke	11.10.17	58 French fever.
15.10.17	M. Reg. Dep't.	Disc from Hosp & on Com to no 3 ccd.	Seaford	12.10.17	M. 3 C.C.D. 202. P. no 220. 2/16/17.
2.11.17	Comd.	Adm. Can. Spec. Hosp.	Witley	1.11.17	Ch. C. V.D. G.
15.12.17	no 3 ccd	In. Hosp over 21 days ceases to be attached.	Seaford	26.11.17	M. 5. 6. Depot P. no 252. & 278 1/17.12.17.
5-2-18.	M. Hospo Depot.	Disc. hosp. on command & ccd	do.	2-2-18	3. 6. 6. P. no 32 & R. 5. 90. 32 4/2 18.
12-4-18.	do.	ceases att. 3 rd ccd; Sol. to C.M.S.D.	do.	11-4-18.	3. 6. 6. P. no 86. & *101 1/11-4-18. & *84 1/11-4-18.
13-4-18.	C.M.S.D.	On command. Cav. M.S. 16, Mansfield.	do.	12-4-18.	P. no 103.
9-12-18	C.M.S.D.	ceases to be from to Mansfield	Seaford	7-12-18	P. no 321
22.1.19	Comd.	So. Hosp. in Canada	Seaford	9.1.19	P. no 16.

*Name. L GILMOUR, Percy Haddon Rank. Pte. Regtl. No. 724042
 Original unit CMG Present unit CMG M. or S. Age 26 Religion Presb Fyle Depot.....
 Port, ship, and date of arrival Halifax Olympic 17-1-19. Ref. H.Q.....
 Next of kin Father, John Gilmour R MD 5 Woodville Ont.
 Address on leave Same
 Address on discharge Same
 Transportation issued Yes 11-2-19 Date Carrville Character on discharge.....
 Previous occupation Farmer. Date and place of enlistment Woodville March 3/16.
 Diagnosis Demobilization Date of Medical Boards 8-2-19

Date. T.O.S.	Remarks	Pt. 2 Order No.
11-1-19	Posted to Cas. Co. (Ex. Camp) 17-1-19.	
11-2-19	Leave & Subs. from 21-1-19 to 7-2-19.	24
11-2-19	SOS DISCHARGED "DEMOBN" 91 days PDP& CA	40

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

Date.

Remarks.

Pt. 2  er No.

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

Surname *Gilmour* Christian Name or Names *P. H.* Reg. No. *724042*
 Rank *Pte.* Unit *20th. Bn. 2 C.D.M.G. Coy.* Co. Troop Batty.
 Hospital *no 7 Can. Sta. H. Havre* Date of Admission *12-10-16*



Transferred = *4 Bowd. Dep. Havre.* Hosp. *28.10.16*
7 Can. Sta. Havre Hosp. *6.11.16*
39 Gen. Havre, Hosp. *15.11.16*
no 3 Can. Gen. Boulogne. Hosp. *16-4-17*

Diagnosis *Indigestion.*
 (1) Later Diagnosis (if changed) *Phlegmatism*
 (2) *Scabies*
 (3) *P.V.O. Sth.*
 Additional Diagnosis: if more than one state present *Trench Fever. P.*
20 U.D. G. 40

DISPOSITION

Date

<i>O.S. 23-10-16 A351</i>	<i>(1)</i>	<i>Des 22.11.16</i>
<i>" 7.10.16 A364</i>	<i>(2)</i>	<i>" " 11-10-17</i>
<i>15.11.16 A370</i>		<i>Disch 6.2.18.</i>
<i>27.11.16 A377</i>		
<i>29.11.16 A381</i>		
<i>" 28-4-17 A258</i>		
<i>1-5-17 B222</i>		
<i>1-8-17 B282</i>		
<i>17-10-17 B38</i>		
<i>3.11.17 C46</i>		
<i>8-2-18 C107</i>		

A.M.D. 2 Dept.
 Sch. of D.G.M.S. O.M.F.C. London

*Rev.
 Rev.*

EPITOME OF HOSPITAL TREATMENT.



Hospital

Adm.

1. Queen Mary's Mil. Whallet

23-4-17

Mil Hosp. Shorncliffe

28-7-17

2. Can Conval Monks Horton

28-7-17

3. Can Spec Hosp Witley Camp.

1-11-17

4.

5.

6.

7.

No. 724042 RANK

Pte

NAME

Gilman P. H.

T. O. S. 3-3-16

UNIT

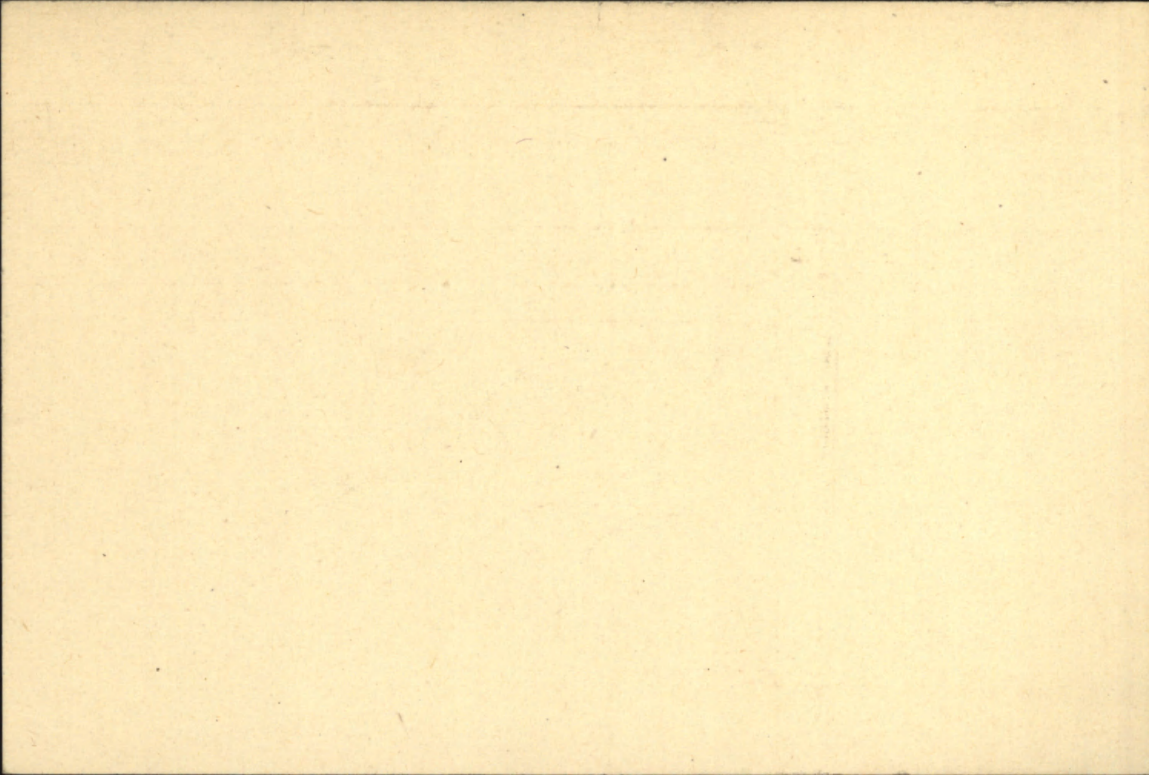
109th. Battalion

D.O.B. 10-3-16

M. D. 6

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

UNIT SAILED
JUL 23 1916



Wor
Only

Number

724042

Rank

P15 *B*

Surname

GILMOUR

Christian Name

Percy Haddon

Units

20th Bn Can Coy

Theatre of War

France

Date of Service

5-10-16

Remarks

Eldon Station

Latest Address

Woodville Ont
4. P. O.

Roll No.

200m. - 2 - 21

Page 17468

Next of kin.....

Address on leave.....

Address on discharge.....

Transportation issued.....

Previous occupation.....

Diagnosis.....

Date

Yes
No

Date

DESP. SEP 29 1924

REGN. NO. 5597

Character on

discharge.....

Date and place of

enlistment.....

Date of Medical

Boards.....

Remarks

* Name will be given in full; surname first.

649-4-7386
2 S.O.S. 11-2-19
Proc. Demob.
D.O. 49-9-18-2-19
124042
222

NAME *Gilmour, Percy Hadden*

RANK & No. *Plt*

CORPS *109th 2nd Div.*

ENLISTMENT, PLACE *Woodville*

DATE *March 3rd. 1916.*

FORMER CORPS *nil*

COUNTRY OF BIRTH *Canada, Highby Victoria Ont.*

NEXT OF KIN *Gilmour John (Father)*

ADDRESS OF NEXT OF KIN *R. W. 5 Woodville Ont.*

DISCHARGE, PLACE

DATE

*also notify Ethel Taylor (Kins.)
603 Dominion Bank Bldg.*

auth C.P.R. Tel 143, 9/3/18 Toronto, Ont.

*O/S 23-7-16 488
14.*

L. L. 85779-M. & D.-6011.

M. F. W. 22. 100 m.-9-15.

*1916 17-1-19 254 Plt.
47. H. Q. 1772-39-839.*

MARRIED

SINGLE *yes*

WIDOWER

TRADE OR CALLING

Farming

RELIGION

Presbyterian

DESCRIPTION.

APPARENT AGE

23 YEARS

6 MONTHS

HEIGHT

5 FEET

6 7/8 INCHES

CHEST MEASUREMENT

41 INCHES

EXPANSION

5 INCHES

COMPLEXION

Fair

EYES

Grey

HAIR

Brown

DISTINGUISHING MARKS

Mole on left breast near nipple

MEDICAL EXAMINATION.

PLACE

Woodville

DATE

March 3rd. 1916.

REMARKS:

NAME

Gilmour, Percy Wadden.

REG'T L NO 724042

H. Q. FILE NO. 649-

RANK AND CORPS

Pte (20th Battalion) Can. Mtd. Gun

FOLLOWS



CABLE

No.

DATE

NATURE OF CASUALTY

on command 3 follows

No.	DATE	NATURE OF CASUALTY
631 w.s.m	6-3-18	Discharged from Hospital Feb. 6th. 1918
6394 w.s.m	8-4-18	According to records with unit no record of casualty.

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
A 351 ¹	no 7 law Stat Havre	12-10-16	Indigestion
A 364	4. Com Depot Havre	28-10-16	"
A 370	no 7 law Stat Havre	6-11-16	Rheumatism
A 377.	to 39 Gen. Havre	15-11-16	"
A 381	Discharged	22-11-16	Scabies.
A 258	no 3 Can. Gen. Boulogne	16-4-17	P. U. O. st
B 222.	Queen Mary's Mil. Whalley	23-4-17	French. fever
B. 282.	Mil. Hosp. "Stomc."	28-7-17	French fever & Scabies
B 283	to C. C. Monks Horton	28-7-17	" " (2nd C. Div. Mach
B 38	Discharged Kent	11-10-17	" " machine
C 46.	Can. Spec. Witley Camp	1-11-17	V. D. Y
C 107.	Discharged	6-2-18	V. D. G.



Name **Gilmour.** Percy Haddon.
Rank Pte.

Reg. No. 724042.

Unit ~~20th Batt.~~ now 14th Co, C.M.G.

Next of Kin Canada.



Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1916.						
12.10.	No.7.Can.Stat.Hosp	p.Havre.	Indigestion.	A351.		
28-10-16.	Do. 4. Con Depot	Havre	Do.	A364.		
6-11.	No.7 Can.Stat.H.	Havre	Rheumatism	A370		
15-11.	No.39 Gen.H.	Havre	do.	A377		
22-11.	Discharged		do.	A381		
16-4-17.	No.3 C.G.H.B'	logne.	P.U.O.Slt.	A258		
23-4	Queen Mary's Mil.Hsp.	Whalley	Trench Fever	B222.		
28-7	Mil H. Shorncliffe		do + scabies	B 28	2	
28-7	Can. C. St. Monks	Storton	Trench Fever.	B 28	3.	
11-10	Discharged:- Serial No 746.		Do	B38.		

DEPARTMENT OF VETERANS AFFAIRS
MINISTÈRE DES AFFAIRES DES ANCIENS COMBATTANTS

DEATH NOTIFICATION
AVIS DE DÉCÈS

TO:
À:

DATE 23.2.1972.....

NAME GILMOUR PERCY H. Service No.
NOM GILMOUR PERCY H. Matricule No 724042./R 88548. CPC No.
CCP No 750889.....

WVA No.
AAC No

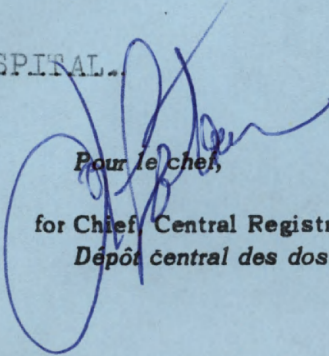
Information Received from:

Information reçue de: STMO. LONDON, ONT. DIST.

Date of Death
Date du Décès ... FEB. 18. 1972.

Place
Endroit WESTMINSTER HOSPITAL..

Distribution: WSR-DASG
VI - ASS
~~DOX-BDXXXX~~
HO - BC


Pour le chef,

for Chief, Central Registry Division.
Dépôt central des dossiers.

This space to be for numbers.

40P

Proceedings on Discharge.



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

No. 724042	
Rank Pte.	
Surname GILMOUR, PERCY HADDEN	
Christian name	
NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.	
Corps (Squadron, Battery or Company) 109th Bn. (#2 D.D.)	
Date of discharge Feb. 11th, 1919	
Place of discharge TORONTO, ONT.	
1. DESCRIPTION AT THE TIME OF DISCHARGE.	
Age..... 26 years..... 6 months.	Descriptive marks Vacc. M. L. Arm
Height..... 5 feet..... 6 7-8 inches.	
Complexion Fair	
Eyes Gray	
Hair Brown	
Trade Farmer	
Intended place of residence Woodville, Ont. (To be given as fully as practicable.)	
2. The above-named man is discharged in consequence of	
Authority for discharge..... D.D. #2 Pt. 11 #40	
N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.	
To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.	3. Conduct and character while in the service have been, according to the records, etc.
	N.B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldiers and the Officer Commanding his Squadron, Battery or Company.
	4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)

M. F. B. 218.
200M.—5-18.
H. Q. 1772-39-113.

Index 2k
10-2-19
(OVER)

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

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

6. Medals and Decorations.....

Four horizontal dashed lines for listing medals and decorations.

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

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

(Place).....

(Date)..... Commanding.....

8. Certificate to be signed by the Soldier on Discharge

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

(Place) Toronto, Ont. Percy Haddson Gilman (Signature of Soldier.)

(Date) Feb. 11th, 1919 [Signature] (Signature of Witness.)

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

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

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

..... (Signature of Soldier.)

10. Statement of Service.

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

Total..... years..... days.

11. Confirmation of Discharge.

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

(Place) Toronto, Ont.

(Signature) For W.H. Greville

O.C. No. 2 District Depot

(Date) Feb. 11th, 1919

Reservations referred to at Para. 8.

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

List of Discharge Documents.

Serial Number	Description of Document	Form Number
1	Statement of Service	Form 104
2	Statement of Character	Form 105
3	Statement of Awards	Form 106
4	Statement of Medical History	Form 107
5	Statement of Discharge	Form 108
6	Statement of Discharge	Form 109
7	Statement of Discharge	Form 110
8	Statement of Discharge	Form 111
9	Statement of Discharge	Form 112
10	Statement of Discharge	Form 113
11	Statement of Discharge	Form 114
12	Statement of Discharge	Form 115
13	Statement of Discharge	Form 116
14	Statement of Discharge	Form 117
15	Statement of Discharge	Form 118
16	Statement of Discharge	Form 119
17	Statement of Discharge	Form 120
18	Statement of Discharge	Form 121
19	Statement of Discharge	Form 122
20	Statement of Discharge	Form 123

I hereby certify that the following documents are included:

Other Documents:

In the case of a new discharge, the date and number of former discharges, and amount of same is to be stated.

List of Discharge Documents.

<p>Reg. Conduct Sheet, Militia form B. 263</p> <p>Squadron } Battery } Conduct Sheet, " B. 263a Company }</p> <p style="text-align: center;">or</p> <p>Field Conduct Sheet " W. 178</p> <p>Copies of Convictions, by C. P. in MS.</p> <p>Med. Hist. Sheet, Militia form B. 313</p> <p>Casualty Form " W. 54</p> <p>Medical Report for Invalid§ " B. 227</p> <p>Dental History Sheet " B. 465</p> <p>Last Pay Certificate " W. 44</p> <p>Duplicate Discharge Certificate " W. 39A</p> <p>‡Form of Will " W. 82</p> <p>§Only if discharged "Medically unfit."</p> <p>‡Only if man has not been overseas.</p>	<p>Attestation Paper Militia Form W. 23</p> <p style="text-align: center;">or</p> <p>Particulars of Recruit " W. 133</p> <p>Proceedings on Discharge " B. 218</p> <hr/> <p style="text-align: center;">In the case of recruits who are rejected on final approval, the discharge documents will consist of</p> <p style="margin-left: 40px;">(a) Proceedings on Discharge</p> <p style="margin-left: 40px;">(b) Attestation.</p> <p style="margin-left: 40px;">(c) Medical History Sheet.</p>
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Documents not accompanying this form should be crossed out.

I hereby certify that the following documents are unobtainable.

Officer Commanding.

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

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

G

3437 Aug 1/16 1/1/18

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

20.	15		
-----	----	--	--

824 24
J

PARTICULARS OF SEPARATION ALLOWANCE

No. 724042
 Rank *pte* Promoted Reverted Discharge
 Soldier's Name *Percy H. Gilmour*
 Battalion *109th Batta. "C" Coy.*
 Beneficiary
 Relationship
 Address

PARTICULARS OF ASSIGNMENT

Name *Mrs. Mary Gilmour*
 Address *R.M.D #5, Woodville. Out*
 Change of Address
 1
 2
 3
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total
1917				
Dec 31			340	340
Jan	J 65350		20	20
Feb	G 90068		20	20
Mar	H 90714		20	20
Apr.	H 9922		20	20
May	S 17260		20	20
June	M 27547		20	20
July	K 28419		20	20
Aug	O 35764		20	20
Sept	J 46091		20	20
Oct	U 54069		20	20
Nov	Y 58018		15	15
Dec.	X 62488		15	15
Jan	Y 69684		15	15
			<u>585</u>	<u>585</u>

REMARKS

06948-P-H

\$15⁰⁰ - 1.11.18 per 2m. 23902. Destroy 64514

M. F. W. 128
400M.-6-17-1772-38-1141
L. L. 22320-M. & D. 7483.

A/c Closed 31. 1.19
 Ret'd per. *C. Gimpic*
 Date 17. 1.19 M.F.W. 187 22-1-19
 Clerk *M. Nolan* M.O. # 2



