

"9" Coy.

ATTESTATION PAPER.

No. 724553

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUADRUPPLICATE

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your name? *Albert Arthur Kinnmore*
 2. In what Town, Township or Parish, and in what Country were you born? *Douglas Isle of Man England*
 3. What is the name of your next-of-kin? *Friend C. L. Trager*
 4. What is the address of your next-of-kin? *Childrens Home Douglas Is of Man*
 5. What is the date of your birth? *December 21st 1896*
 6. What is your Trade or Calling? *Farmer*
 7. Are you married? *No*
 8. Are you willing to be vaccinated or re-vaccinated? *Yes inoculated*
 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*
- Albert A. Kinnmore* (Signature of Man.)
R. Anderson (Signature of Witness.)

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

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

Date *October 21st 1915* *Albert A. Kinnmore* (Signature of Recruit)
R. Anderson (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Albert Arthur Kinnmore*, 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 *October 21st 1915* *Albert A. Kinnmore* (Signature of Recruit)
R. Anderson (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 *Rudsay* this *21st* day of *October* 1915.

[Signature] (Signature of Justice)

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

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

Description of Albert Arthur Kinnison Enlistment.

Apparent Age 18 years 10 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. 5 ins.

Mark of varicocela operation

Chest measurement (Girth when fully expanded) 34 ins.
 Range of expansion 3 ins.

Complexion Fair
 Eyes Grey
 Hair Dark Red

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

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 September 28 1915.

J. McCulloch

Place Sunday

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

*Insert here "fit" or "unfit."

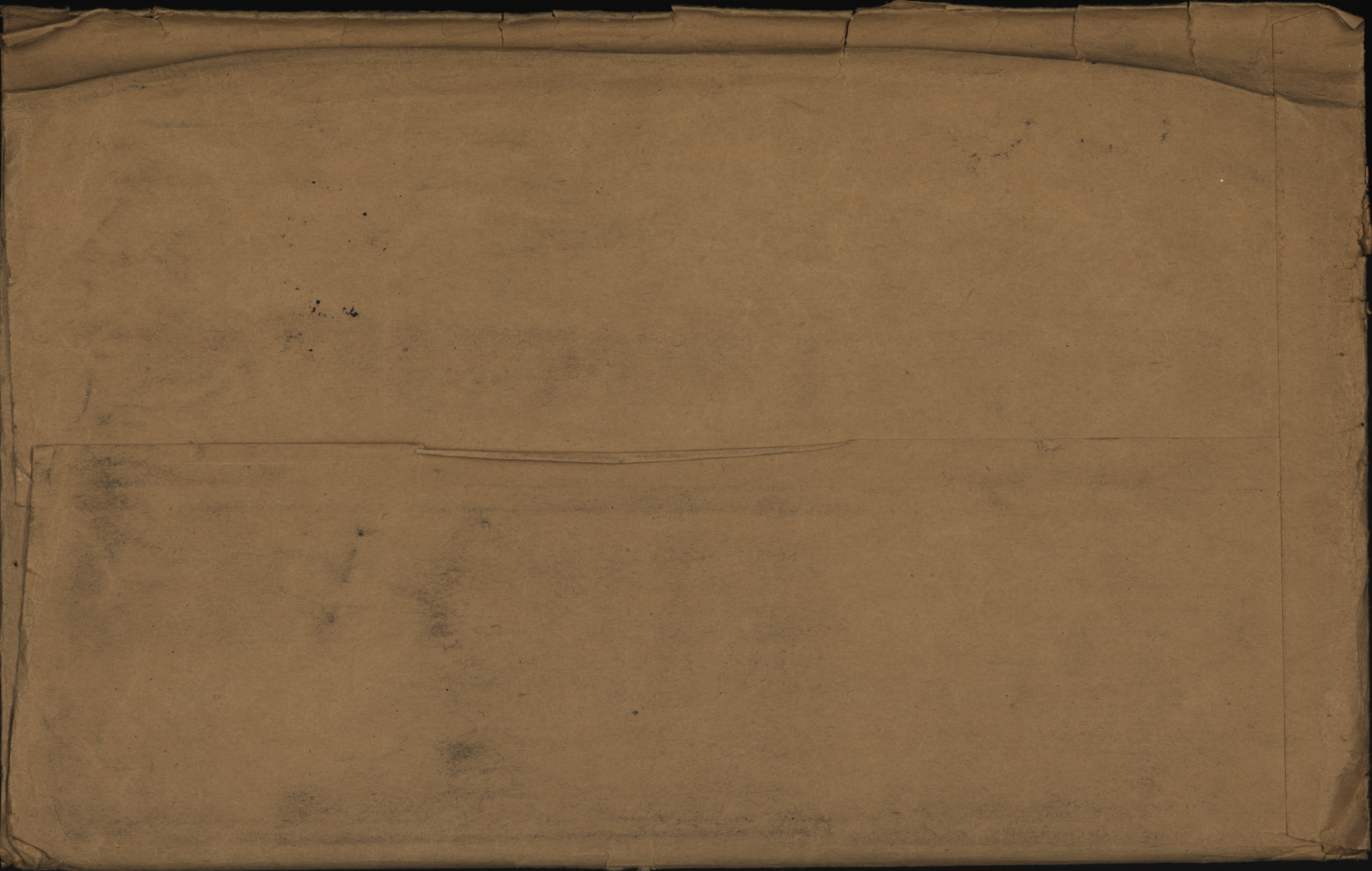
NOTE.—Should the Medical Officer consider the Recruit unfit, he will fill in the foregoing Certificate only in the case of those who have been attested, and will briefly state below the cause of unfitness:—

CERTIFICATE OF OFFICER COMMANDING UNIT.

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

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

Date DEC 29 1915



No. *724553* RANK
724533.

Pvt

NAME

Kinnison A. A.

T. O. S.

UNIT

Transferred from 93rd Bn
25-11-15. D. O. S. 25-11-15. *109th. Battalion.*

M. D. *13*

PROMOTIONS, TRANSFERS, DISCHARGES, ETC.

PAID FROM	PAID TO	SIG OR REC'T	PARTICULARS	AUTHORITY
<i>1915</i>	<i>1915</i>			
<i>Nov 25</i>	<i>Nov. 30</i>	<i>✓</i>		
	<i>Dec.</i>	<i>✓</i>		
<i>1916.</i>	<i>Jan. 1916</i>	<i>✓</i>		
	<i>Feb.</i>	<i>✓</i>		
	<i>Mar.</i>	<i>✓</i>		
	<i>April.</i>	<i>✓</i>		
	<i>May.</i>	<i>✓</i>		
	<i>June.</i>	<i>✓</i>		
	<i>July.</i>	<i>✓</i>		

UNIT SAILED
 JUL 23 1916



No.

RANK

Pte

NAME

*Kinnore A.*T. O. S. *1-11-15*UNIT *93rd Battalion C. I. F.*D. O. # *12-12-11-15*M. D. *3*

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1915</i> <i>Nov. 1</i>	<i>1915</i> <i>Nov. 24</i>	<i>✓</i>	<i>Late 45th Regt</i>	<i>D. O. #12-12-11-15</i>

UNIT SAILED.
JUL 15 1916



1918
Number

724553

Rank

Pte.

Surname

KINMORE

Christian Name

Albert Arthur.

Units

38th Bn Candef

Theatre of War

France

Date of Service

6-12-16

Remarks

Latest Address

P. O. Amenee,

Aut.

Roll No.

Page 16688

200m.-2-21

Next of kin _____

Address on leave _____

Address on discharge _____

Transportation issued Yes No Date _____ Character on discharge _____

Previous occupation _____ Date and place of enlistment _____

Diagnosis _____ Date of Medical Boards _____

Date	Remarks

DESP SEP 23 1922
WTEGN. *[Signature]*

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

C
NAME

RANK & No.

CORPS

ENLISTMENT, PLACE

FORMER CORPS

COUNTRY OF BIRTH

NEXT OF KIN

ADDRESS OF NEXT OF KIN

DISCHARGE, PLACE

DATE

DATE

(649-K-7171)
Albert Arthur

2
Soldis 22-3-19
Demor Auth 8879.
22-3-19, 200
7245-5-3.
Batt.

Lindsay, Ont.

Oct. 21st, 1915. S.

Nil.

England, Douglas, Isle of Man.

Frazer, C. L. (Friend)

Childrens Home Douglas,
Isle of Man, Eng.

Op 23-7-16 $\frac{488}{20}$

R/C 1-3-19 $\frac{272}{21}$ Pte.

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

REMARKS:

Albert Arthur R.L. 25. K. 1377

Name **KINMORE** Rank **Pte** Reg. No. **724 553**
 Unit **38th Bn.** **MRS. AMY KINMORE**
24 BERRY ST. BIRKENHEAD, ENG.
 Next of Kin ~~**G. S. Trayer, Childrens Home**~~ (File)
~~**Douglas, Isle of Man**~~ 70

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1918						
10-8	<u>MISSING</u> after action			A301	0447	2650
	P.I.D 73 d/20-8-18				24/8/19	
	now rpt.:- <u>Prisoner of War</u>	(Sound)		A336	0.600	P.W. 17.
	" " "	" Soltau Blanche		A350	27/8/19	P.W. 20.
	" " "	" Dulmen Westphalia		A353	20/8/19	P.W. 115.
30-11-18	<u>Release</u> and arrival					
	at # 36 Camp Dover.			B387	0798	341
					5/12	

REGT'L NO 724553

NAME

Kinnow Albert Arthur

H. Q. FILE NO. 649-

RANK AND CORPS

Pte

38th Bn Royal 109th Bn

CABLE

FOLLOWS

NO.

No.

DATE

E¹

NATURE OF CASUALTY

FOLLOWS

m2337

19-4-17

Adm # 3 Gen Hosp Boulogne
Apr 17th 1917 Genit arm ✓

23-12

Q467

26-8-18

Rept missing Aug 10th 1918

13-3

Q560

24-9-18

Rept miss. P. of W

11-4

Q575

28-9-18

Prev. rept. P. of W, now at Soltan

4-8

Q677(8-6)

27-10-18

P. of W Soltan, trans to Dulmen

Q798

6-12-18

Repat. P. of W. arrived in England
Nov 30/18.

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
A175	No 3 Can. Gen. Boulogne	11-4-17	Gsw. right Arm slt.
B176	Central Military H ⁴ Pitt Chatham	16-4-17	G.S.W. Rt. Forearm
B246	G. G. Woodcote Park Epsom Surrey	10-7-17	Gsw. R. Arm.
A301-2	Rept from Base	10-8-18	Missing after action (2012)
A326	Prew. ref miss, now ref.		P. of W. sound. H.L. dated 23/9/18
A330	Prew. ref. P. of W. now ref. Hanover.		P. of W. at Soltaw H.L. dated 27/9/18.
A355	Prew. ref. P. of W. at Soltaw, now ref. trans to		Hanover. Dulmen Westphalia
B387	Rept P. of W. arrived at Dover	30-11-18.	H.L. dated 26-10-18

HOSPITALS**DATE****DIAGNOSIS**

M. F. W. 2553.

50M-6-19.

1772-39-1332.

(15)

F36

Corps.	Unit.	Rank.	Reg. No.	Surname.	Christian Names.
Canadian	38 Batt	Pfc	424553	KINMORE	Arthur

Date of Capture.	Place Captured.	Last Place of Internment.	Born in the year	Term of Service.	Date of Enlistment.	Married or Single.
11.8.18	Haltu	Friedrichsfeld Rhineland Germany	1895	NA	25.9.15	S

Medical Category.	Address.	Date of Arrival at the Camp.	Date of Departure from the Camp.	Industrial Group.	Trade or Occupation.
B1	24 Berry St Birkenhead	29/11/18	1.12.18.	1	Farmer

For Repatriation Overseas after the War.

Yes

Ontario

Birkenhead

LH
724553

Name **KINMORE Albert Arthur** Rank **Pte.** Regtl. No. **24-Ki-182**

Original unit **109th Bn** Present unit **M. or S.** Age **21** Religion **Meth** Fyle Depot **24-Ki-182** Ref. H.Q. **-**

Port, ship and date of arrival **Scotian St. John 1-3-19**

Next of kin **Friend C.L. Franser, Childrens Home.**

Address on leave **Same**

Address on discharge **P.O. Omemees Ont.**

Transportation issued Yes No Date **Omemees** Character on discharge **22-3-19**

Previous occupation **Farmer.** Date and place of enlistment **Lindsay, Oct. 21-15**

Diagnosis **Demobilization** Date of Medical Boards **19-3-19**

Date.	Remarks.	Pt. 2 Order No.
T.O.S.		
19-2-19	Posted to Gas Co (Ex camp) 1-3-19 Leave & Subs from 3-3-19 to 17-3-19	64
22-3-19	SOS DISCHGD. "DEMOB'N" ENTH LED TO WSG	79

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

(over)

Date.

Remarks

Pt. 2 Order No

M. F. W. 192
150m - 5-18
1772-39-1243

Surname **Kinmore** Christian Name or Names **A A** Reg. No. **724553**
Rank **Pte** Unit **38th Batt** Co. **E.B. Coy** Troop Batty.

Hospital **3 Can Gen Boulogne** Date of Admission **11-4-17**

Transferred to **Central Milit. Fort Pitt.** Hosp. **16.4.17**

Woodcote Park Epsom. Hosp. **10.7.17.**

Hosp.

Hosp.

Diagnosis **G.S.W. rt Arm. slt.** *L*

(1) **R.F.D. missing after action 10.8.18**

(2) **now Prisoner of War (sound)** *R*

(3) **now at Sollau, Hanover**

Additional Diagnosis: if more than one state present

transferred to Balnear, Westphalia.

DISPOSITION

C.L. 19-4-17 A 175

1.5.17 B176

Date

Dis. 16.7.17.
REMARKS

26.7.17 B246.

24.8.18 A 301 (2)

23.9.18 @ 326 (1)

30.9.18 A 330

26.10.18 @ 355

5-12-18 B387

Repatriated arrived at Dover 30-11-18

A.M.D. 2 DEPT.

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

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

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)*Substantive rank <i>Private</i> *Acting rank [To be entered in pencil to facilitate alteration.] (4) Surname <i>Sinmore</i> (5) Christain Names <i>Albert. Arthur.</i> (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)	(2) Regiment or Corps	(3) Regtl. No. <div style="text-align: right; font-size: 2em; font-weight: bold;">724583</div>
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(10) Enlistment (b) <i>21. 10. 15</i>	(11) Engagement (c) <i>D of W.</i>
(12) Service reckons from (date) <i>21. 10. 15</i>	(13) Special conditions (if any) of enlistment (d)
(14) Any subsequent variations (if any) of conditions of service	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)
(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, Shoing-smith, &c.

(A) Report		(B) Authority of Part II. of Orders	(C) 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.	(D) Place of casualty	(E) Date of promotion, reduction, reversion, casualty, &c.	(F) Remarks, and initials and rank of an officer
Date	From whom received					
23. 9/18.	J 8 it.		Crew. Reptd. Missing	Xield		G.L.A. 326.
27 9/18.	C.O.R.		Reptd. Pris of war.			
			Crew. Reptd. Pris of war.			
			Now Reptd. P of W at	Seltau.		" 330.
				Hanover.		
25 10/18	"		Reptd. P of W. at	Dulmen		" G.L.A. 355
				Westphalia		
5 12/18.	"		Repatriated P of W.			
			Arrived at Dover.		30 11/18.	G.L.B. 387.
10-12-18	EORD NRD		TOS Repatriated P of War	Witley	30-4-18	PTD/0308

PD usual
 for Major i/c Records, DMFC
 Lieut.

22-1-19 EORD 19 On command to C.C.
 Camp Rhye Witley 21-1-19 D.O. 19

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: 30

R.W. Schulson
 Commanding *M.D. Wing*
 for Kinmel Park Camp.

22 JAN 1919

Embarked S.S. Scotian
 L'pool 19.2.19
 Disembarked *Hfy*
St John

1 - MAR 1919

Nothing to be written in this margin

DUPLICATE

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

INSTRUCTIONS.

- (a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.
- (b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.
- (c) All questions, etc., must be answered.
- (d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.
- (e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

(1) Name of Overseas Unit which Soldier joins.....**109th OVERSEAS BATTALION, C. E. F.**.....

(2) Regimental Number.....**724553.**.....

(3) Full Name of Soldier.....**Albert Arthur Kinmore.**.....

(4) Place of Birth.....**Douglas. Isle of Man.**.....

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

(6) If married, state,
 (a) Full name of your wife.....**No.**.....

(b) Present Postal Address.....

(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.....

.....

.....

.....

.....

(9) Is your Father alive?..... No.
If so, state name and address

(10) Is your Mother alive?..... No.
If so, state name and address

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

(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.
No.

(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.

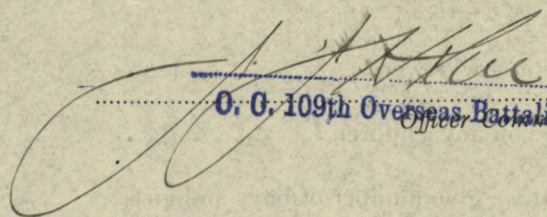
Brother. Bertie Kinmore. (Address unknown)
.....
.....

(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.
No.

(15) Are you insured?..... Yes.
If so, in what Company?..... London Life.

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.

Date..... June 30th. 1916......


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

ORIGINAL

CANADIAN EXPEDITIONARY FORCE.

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

LAST PAY CERTIFICATE

Regimental No. 724553 Rank Ole Name Kinnison aa
Unit No. 2 DISTRICT DEPOT who was* DISCHARGED (Surname first)
On 22 1913 to 9
*Insert "discharged" or "transferred."

MAR 22 1919

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

	Dr.	Cr.
Bal. Dr. or Cr. from prev. month		13.77
Regimental Pay <u>22</u> days at \$ <u>1</u> c/10		24.20
Field Allowance <u>22</u> days at \$ <u>1</u> c		35
Separation Allowance		70
Clothing Allowance		
Post Discharge Pay <u>1029</u>		
*Other Credits		
Advances <u>131.50</u>	10	
Separation Allowance and Assigned Pay Cheque No.		
*Other Charges		
Balance on transfer or on discharge, cheque No. <u>133132</u>	132.97	
Total	142.97	142.97

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

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

No. 724553 Rank Pte Surname KINMORE
(Given name in full)
Albert Arthur
 Unit or Corps No 2 D D Birthplace England

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

1. GENERAL DESCRIPTION:

Physique Good Weight 138 lbs. Height 5 5" ft. Colour of Eyes Blue
 Nutrition Good
 Pulse 74
 Condition of arteries Good
 Vision Rt. D30 Left D30
 Hearing (conversational voice) Rt. 21 ft. Left 21 ft.

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

oblique scar over
rt forearm near elbow
April 1917

Opinion as to general health and physical condition Good

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

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

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

No hemorrhoids
varicocele
varicose veins
hemorrhoids
poth
urine impurities
 Soldier has wound scar extending from
 rt olecranon downward and upward
 obliquely for 3". no loss of power or movement
 of arm

(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 (Canada)

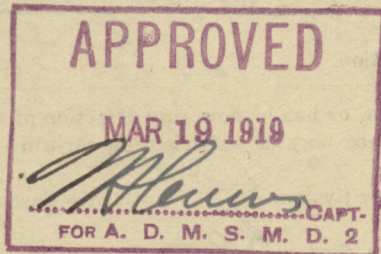
Date *Mar 19-19* Signed *W. Brown* M.O.

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 *A. A. Kinross*

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

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



Medical Examination upon leaving the Service of 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 P.T.E. Name ALBERT ARTHUR Surname KENMERE
Unit or Corps 38 BATT. GEN. DEPOT. (If a soldier) Regtl. No. 724553
Born at DOUGLAS I. OF MAN. on, date 23 August 1917
Signature (for identification) Arthur Kenmore

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

1. **PHYSIQUE**—Any deformity, maiming or lameness? If so, describe.

Weight
140 2/3 lbs.
Height
5 ft 5 ins.

*Partly adherent
scar upper & outer
part left elbow.*

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?**

Abnormal Sounds? *No.*
Abnormal Size? *No.*
Pulse Rate? *44*

Intermittence or irregularity? *No.*

6. **ARTERIES.**—Any hardening?

No.

7. **DIGESTIVE SYSTEM?**

No.

8. **GENITO-URINARY SYSTEM?**

Urinalysis—s.g.? 1024 Reaction? ac Albumen? nil Sugar? no

9. **SKIN, MIDDLE EAR, EYE**
or any other part?

*Skin No.
VRE 6/6 ears - healthy
VRE 6/6 nasal*

Thalmer Sept. C.A.E.C.

A.D.M.S.- HEADQUARTERS
CANADIAN TROOPS,
15 JAN 1919
WITLEY, SURREY.

10. Is there any evidence of impairment of health or physical condition not mentioned above? If so, describe.

No.

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

Good.

Examined at Witley
Date 14-1-19

Signed W. R. Jones M.O.
Signed H. Wagner 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.

General Examination upon the Service

to those of the General Service of the Army

REWARDS

AVANCE

ABSENT

PTE

DEPT

1st Regt

1st Regt

[Handwritten signature]

[Faint handwritten text]

CANADIAN ARMY DENTAL CORPS, O.M.F.C.
DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

**DIRECTIONS TO
DENTAL OFFICERS**

NAME OF SOLDIER (Block Letters) KINMORE A.A.

REGIMENT 38th Bn RANK Pte No. 724553

Date of Examination in England 22/1/19 Date of Examination in France _____

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



PRESENT DENTAL REQUIREMENTS

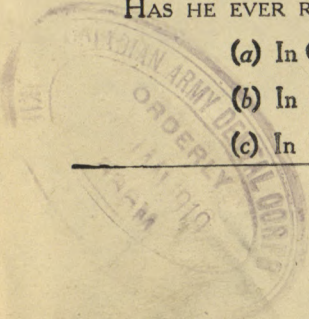
1. FILLINGS 13-15
2. EXTRACTIONS 12
3. CROWNS _____
4. DENTURES _____
 - (a) Full Upper _____
 - (b) Part Upper _____
 - (c) Full Lower _____
 - (d) Part Lower _____

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 Yes
- (b) In England Yes
- (c) In France _____

Signature of Dental Officer Wm Sinclair
 Capt



AMERICAN ARMY DENTAL CORPS G.M.F.C.

DENTAL CERTIFICATE FOR DEMONSTRATION

Name of Patient: *ROBERT A. ...*
 Rank: *Private*
 Date of Birth: *12/15/1918*

1. *100*
 2. *100*
 3. *100*
 4. *100*
 5. *100*
 6. *100*
 7. *100*
 8. *100*
 9. *100*
 10. *100*

TREATMENT RECEIVED

1. *Examination*
2. *Extraction*
3. *Orthodontics*
4. *Dentures*

- (a) *Full Denture*
- (b) *Partial Denture*
- (c) *Full Denture*
- (d) *Full Denture*
- (e) *Partial Denture*

Name of Dentist: *Dr. ...*

Name of Hospital: *...*

- (a) *...*
- (b) *...*
- (c) *...*

ORIGINAL
MEDICAL HISTORY SHEET.

Surname Kumors Christian Name Albert Arthur

Examined { on 28th day of September 1915
 { at Lindsay
 Birthplace { City or Town Douglas
 { County Isle of Man

Approved by J. McCulloch
 Rank Capt M.O.

Apparent age 18 years
 Trade or occupation Farmer
 Height 5 Feet 5 Inches
 Weight 123 Lbs.
 Chest measurement { Minimum 31 inches
 { Maximum expansion 34 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.

Vaccination Marks { Arm Right None Left Three
 { Number Three

Date	Result	VACCINATIONS.
<u>21-10-15</u>	<u>Nil</u>	<u>J. McCulloch Capt</u> M.O.
<u>24-1-16</u>	<u>Good</u>	<u>J. McCulloch</u> M.O.
		M.O.

When Vaccinated last October 21 1915
January 24th 1916
 (a) Marks indicating congenital peculiarities or previous disease mark of operation for varicocels

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>18-4-16</u>	<u>Good</u>	<u>J. McCulloch</u> M.O.
<u>25-4-16</u>	<u>Good</u>	<u>J. McCulloch</u> M.O.
<u>2-5-16</u>	<u>Good</u>	<u>J. McCulloch</u> M.O.

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

Enlisted on 28th day of September 1915 at Lindsay

Joined on enlistment	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
	<u>Overseas Contd</u>	<u>45th West Regt. 724553.</u>		<u>28.8.15.</u>
Transferred to.. ..	<u>88th Bn.</u>	<u>7TH RESERVE BATTALION, 724553</u>		<u>16.6.17</u>
	<u>88th Bn</u>			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

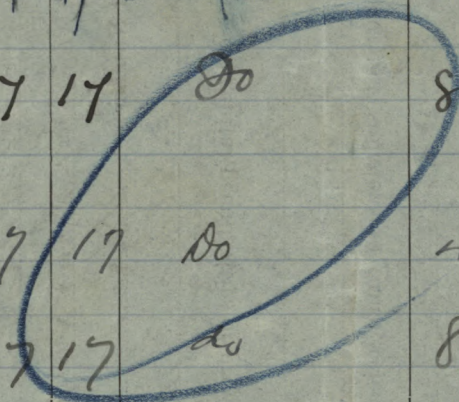
STATION.	DATE.	DISEASE.	RESULT.
<u>Camp with Exhibition</u>	<u>14-1-19</u>	<u>nil</u>	<u>"A" Bro. J. S. Fullerton.</u>
	<u>May 19-19</u>	<u>—</u>	<u>A W. Brown Capt</u>

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.

J. Mc
 A 11

Surname *Summers* Christian Name *Albert Arthur*

STATION.	Date of Arrival at the Station.	DATES OF						DISEASE.	Number of days in Hospital.	Remarks on nature of the disease: how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
		Admission into Hospital.			Discharge from Hospital.						
		Day	Month	Year	Day	Month	Year				
<i>Fort Pitt Chatham</i>		<i>15</i>	<i>4</i>	<i>17</i>	<i>16</i>	<i>4</i>	<i>17</i>	<i>S.W.P. Forearm</i>	<i>2</i>	<i>Transferred to Rust Hall & a</i>	<i>W. J. ...</i>
<i>Kent 154 Rust Hall Hospital, Tunbridge Wells.</i>		<i>16</i>	<i>4</i>	<i>17</i>	<i>6</i>	<i>7</i>	<i>17</i>	<i>Do</i>	<i>81</i>	<i>Enrol. ...</i>	<i>B. ...</i>
<i>CAMP DIV. FORT PITT, MIL. HOSP., CHATHAM.</i>		<i>6</i>	<i>7</i>	<i>17</i>	<i>9</i>	<i>7</i>	<i>17</i>	<i>Do</i>	<i>4</i>	<i>Transferred to Epison</i>	<i>W. ...</i>
<i>M.C. H Epison</i>		<i>9</i>	<i>7</i>	<i>17</i>	<i>16</i>	<i>7</i>	<i>17</i>	<i>do</i>	<i>8</i>	<i>Recovered now bit A</i>	<i>W. ...</i>



Duplicate Medical History sheet posted to here. 7-5.

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

M. F. W. 54. (A. F. B. 103:

500M.—9-16

H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps.....

Regimental No. 724553

Rank.....

Name Kenmore A.P.

C. E. F.

Enlisted (a).....

Terms of Service (a).....

Service reckons from (a).....

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).....

Report		Rec. rd. 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				
FEB 10 1919	O. S.	T. O. S. No. 2 DISTRICT DEPOT, TORONTO		1919 PART II D. O. 64	
					<p><i>[Signature]</i> Lieut. For O. C. No. 2 District Dep.</p> <p>22/3/19 S.O.S. (Discharged) No. 2 District Depot <i>[Signature]</i> Part II, D.O. No. <u>79</u></p> <p>O.C. No. 2 District Depot. For</p>

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

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

M. F. W. 54. (A. F. B. 103.)

250M.—1,16.
H. Q. 1772-39-920.

Casualty Form—Active Service.

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

Regimental No. 424553 Rank Private Name Kimmore Albert Arthur

Enlisted (a) 21-10-15 Terms of Service (a) C of W. Service reckons from (a) 21-10-15

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

Extended _____ Re-engaged _____ Qualification (b) Farmer.

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
		Embarked Canada	Halifax	24.7.16	
		Disembarked England	Liverpool	31.7.16	
4-12-16	O.C. 109th.	Proceeded overseas for service with 38th.Btn.	Witley	4-12-16	D.O.Pt.11 339 F.

W. W. Seltman Capt.
ADJUTANT
109th Overseas Battalion, C. E. F.

W. W. Seltman Capt.
ADJUTANT
109th Overseas Battalion, C. E. F.

CERTIFIED CORRECT.
12 DEC. 1916
P.W. RECORDS, LONDON.

(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.

724553 Kinmore Ad.

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				
6 12 16	C.B.D.	TAKEN on STRENGTH 23 rd Havre		6 12 16	N. R. <i>Pr II O. nr 2 - 13. 12. 16</i>
1 12 16	"	Left for Unit	FIELD	1 12 16	N. R.
13. 1. 17	Unit	Joined Unit	FIELD	9. 1. 17	B. 213. DCS. 80 d 22. 1. 17
14 AVR 1917	38 th.	Wounded in Action	Field	9. 4. 17	B. 213. DCS. 114
15. 4. 17	3 Can. In.	Sec. firearm R.	to England	15. 4. 17	W3034-274
15. 4. 17.	do	ditto posted to E. Ont. Reg. Depot	SEAFORD	15. 4. 17	W3083/7976 HS ST DENIS
		<i>J. M. Anderson</i>	Lieut for Major, A.A.G.		Pt. 2. 0. 50, d-1. 5. 17.
			Can, Sec, 3rd, Ech, G. H. Q.		
11- 5 - 17	E.C.R.D.	Taken on Strength.	Seaford.	16-4-17.	<i>Pr 053</i> <i>P. H. Harrison</i> <i>LIEUT.</i>
23-7-17	<i>SO. P. S.</i>	S. Q. S. to 7 th Res.	Seaford	16-6-17.	FOR LT: COL: I/C RECORDS, C.O.M.F. <i>Pr 0-132.</i>
23-7-17	<i>7th Res.</i>	J. Q. S. from E.C.R.D.	Seaford	16/6/17	B. Q. Pt 2. - 175
11-11-17	<i>7th Res.</i>	PROCEEDED OVERSEAS TO 38 th Bn.	Seaford	10-11-17	Pt 2 P.O. - 272
			<i>S. H. T. Harrison</i>		LIEUT. & ASST. ADJT. 7 TH RESERVE BATTALION.
11-11-17	C.B.D.	TAKEN on STRENGTH 38 th		11-11-17	NR RAR366 Pt II 6107 d/144
14-11-17	"	Left for Unit	FIELD	14-11-17	NR/A3815
14-11-17	Unit	Joined Unit	FIELD	14-11-17	
17-11-17	CCRC	Left for Unit		17-11-17	NR-40-341
24-11-17	38 Bn.	Joined Unit		23-11-17	B213
9. 3. 18	"	One S. C. B.		21. 10. 17	" <i>2023 - 22. 3. 18</i>
14 AOU 18	"	<i>Mission after Nelson</i>		10. 8. 18	<i>Letter R. S. 17. 1800 207320/18</i>
17. 9. 18	"	<i>and P. S. accordingly</i>		"	<i>5 P.O. 87 - 13. 9. 18</i>
		<i>J. M. Anderson</i>	Lieut. for Lt Col. A. A. G.		Canadian Section, G. H. Q. - 3 rd Ech

CERTIFICATE CORRECT.
 1917
 LONDON

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 724553 (Rank) Pte.

Name (in full) KINMORE ARTHUR ALBERT enlisted in
the 109th Batt.

CANADIAN EXPEDITIONARY FORCE at Lindsay Ont on the 21st
day of October 19 15

HE served in England and France.
and is now discharged from the service by reason of
Remobilization

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

Age 22
Height 5' 5"
Complexion Fair
Eyes Grey
Hair Dk. Red

Marks or Scars
Vacc. Scar Left Arm.
Prisoner of War.

Arthur Albert Kinmore
Signature of Soldier

James [Signature]
Issuing Officer

O.C. No. 2 Lindsay Depot
Rank

Date of Discharge Mar 22, 1919

Appointment

Signed at Toronto Ont this 22nd day of March 19 19

in Military District No. MAR 22 1919

File Reference No. 33

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

CANADIAN EXPEDITIONARY FORCE
Discharge Certificate

No. (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. C. C. district.

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

A.C. Rank Name **KINMORE, Albert Arthur.** Reg'l No. **724553**

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

Place and Date of Enlistment **Lindsay. Oct. 21st. 1915.** Place of Birth **Douglas Isle of Man**

Name and Address, Next-of-Kin **Mr. Amy Kinmore,
C. I. Fraser,** England.

24. Berry St. Birkenhead. England. Relationship **Friend.**

Assigned Pay Monthly \$ Payable to

Separation Allowance \$ Payable to

N/E. R.B. No. **11240**
Relationship
File R.L.
Category **Oan OR**
Relationship

N/E. R.B. No. **7245**
File R.L.
Category **Missing POW**

Discharge, Date and Place Reason Character

H. W. & V., Ltd.—7165-16.

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS. Taken from Official Documents.
Date.	From whom received.				
		Arrived in England per H. M. T. 2810		31-7-16	<i>DBM.</i>
4.12.16	0610942	SO on tfr. to 38 th Bn	Whitley	4.12.16	Pt I D 339.
13.12.16	38 th Bn	T-O-S on tfr from 109 th Bn	Lmsht	6.12.16	Pt II D 242.
19.4.17	"	No 3 Gen Hospital	Goulogne	11.4.17	Pt I 175. S.S.W. & Ann St.
1.5.17	"	General Military Hosp	Fort Pitt	16.4.17	Pt I 176. " " "
"	"	Posted to 60RA	Seaford	15.4.17	Pt I 175. 60RA 53 4.5.17
23-7-17	1 st Pres.	Trans. to:-		16-7-17	Pt I 175. 60RA 132 1/22-7-17
26 7 17	38 th Bn.	Can. Conv. Hosp. W.Pk.	Epsom	10 7 17	C. L. B. 246. G.S.W. R. Ann.
26 7 17	38 th Bn.	Dis. Can. Conv. Hosp. W.Pk.	Epsom	16 7 17	C. L. B. 246. G.S.W. R. Ann.
11-11-17	1 st Pres.	Posted to 38 th Bn. Opleas.	Pt I	10-11-17	Pt I 02724 38 th Bn 107 1/19-11-17

A.F.I.D. 100 CHECKED
9 DEC 1917

A.F.I.D. 100 CHECKED
NOV 1917

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.				
22 ³ / ₁₈	38 th Br.	Granted one G.C. Badge	W. Field	21 ¹⁰ / ₁₇	Pt. II No. 23.
20.8.18	"	Missing after action	"	10-8-18	— 73.C.L.A301d/21-8-18
13.9.18	"	S.O.S. Missing after action	"	10-8-18	— 87
23.9.18	"	Prev. Rept'd Missing Now Rept'd Prisoner of War.	"	"	— G.A. 326.
27 ⁹ / ₁₈	Cot.	Prev. Rept'd P. of War. Now Rept'd. Prisoner of War at Soltau.	Hanover.	"	— 330
25 ¹⁰ / ₁₈	"	Now Rept'd P of War at.	Dulmen Westphalia	"	— G.A. 355
5 ¹² / ₁₈	Cot.	Repatriated P. of War. Arrived at Dover.	"	30 ¹¹ / ₁₈	— C.A. 387.
10 ¹² / ₁₈	Cot. Sep.	T.O.S. Repatriated P of War. Arrived at Dover.	Witley.	30 ¹¹ / ₁₈	— Pt. II No. 305.
22.1.19	CO RD	On Comd. 86 Camp Rhye MD2	"	21.1.19	— 18
24.1.19	"	At 8018 is amended to SOS to MD2 Wing Rhye	"	21.1.19	— 20
28.2.19	MD2	SOS to Canada MD2 Sailing (18)	Rhye	19.2.19	— 50

MILITIA AND DEFENCE
ASSIGNED PAY

Bank of Toronto OVERSEAS CONTINGENTS
For Credit.

To Whom ~~Manager of The~~
Address ~~Standard Bank of Canada~~
Omeamee
Ont.

By Whom Assigned *Kimmore A.A.*
Regtl. No. *724553.*
Rank *Pte.*
Corps *109th Bn "A Coy"*

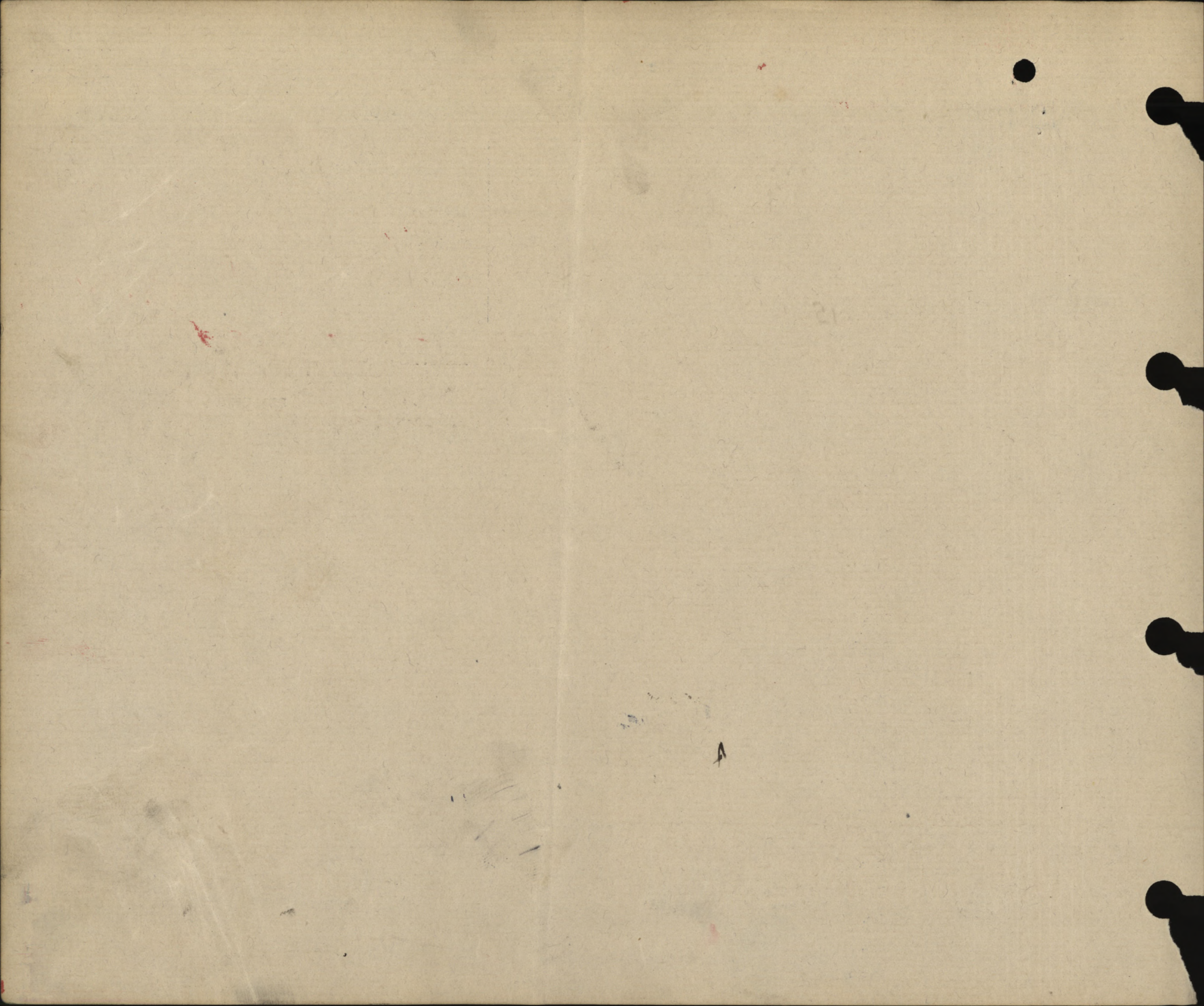
Rate *15 ⁰⁰/_{XX}*

AUG 1 1916

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			<i>02 m 18/9/17 19/8/17 S.H.S.</i>
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				





Bank of Toronto

MILITIA AND DEFENCE

M. F. W. 12a.

Orkney

ASSIGNED PAY

50m.-4-16.

1772-39-819.

Sheet No. 2.

L. L. Job 310.—Req. 6574.

OVERSEAS CONTINGENTS

For credit.
PAYMENTS.

Name of Soldier Kinnore A. C.

724553.

Pte "A Coy" 109th B'n

Month.	Year.	Cheque No.	Amt.	Remarks.
			15 ⁰⁰ / _{XX}	AUG 1 1916
April	1916			
May				
June				
July				
Aug.		P 15554 75		O. P. M. Notified re stoppage of account. <i>g.d. & b. 13-4-17</i>
Sept.				Cancelled Issue no further cheques till better address 7/9/16. <i>T. J.</i>
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				<i>0 2m 18/9/17 19/9/17 9/11/17</i>
March				
April				
May				
June				
July				
Aug.				
Sept.		X 434 32 210		<i>\$ 210 00</i>
Oct.		P 46093 15		<i>15 future</i>
Nov.		A 42344 15		
Dec.		T 60812 15		
Jan.	1918			<i>255 00</i>
Feb.				
March				
April				
May				
June				
July				

Handwritten initials/signature in green ink.

Handwritten initials/signature in blue ink.

Handwritten initials/signature in black ink.

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier _____

PAYMENTS.

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

* Strike out whichever inapplicable.

ASSIGNED PAY. ENGLAND or CANADA. SEPARATION ALLOWANCE. ENGLAND or CANADA.

NAME: **KINMORE Albert Arthur**
NUMBER: **724553**

EFFECTIVE DATE: **1/8/16 ?**
EFFECTIVE DATE: **1/8/16 ?**
AMOUNT: **#1500**
AMOUNT: **---**

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

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.

Bank of Toronto (A2M 17/9/17)
Omemece, Ont.
Stopped off 1/9/18
Renewed Exp. 1-9-18
AX 7000

UNIT AND TRANSFERS
ORIGINAL UNIT: **109th Bn**
DATE ACCOUNT FIRST OPENED: **1/8/16**

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S'F'D	UNIT TRANSFERRED TO
			38th
CLA 301.	24/8/18	1/9/18	20/9/18 BME Miss
		1-10-18	22/10/18 Pay 2 K (Ref 10)

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS { UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
1/1/19	16200	Witley	4 60				
		Correct amount	9 73				
		Budget. P868. 22/4/19.	4 87				
			14 60				

DAILY RATES OF PAY AND ALLOWANCES				
AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1 00	10		

PARTICULARS OF RENDERING NON-EFFECTIVE: *Trans to Canada 3/1/19 21/2/19 21/4/19 21/6/19 21/8/19 21/10/19 21/12/19 22/2/20 22/4/20 22/6/20 22/8/20 22/10/20 22/12/20 23/2/21 23/4/21 23/6/21 23/8/21 23/10/21 23/12/21 24/2/22 24/4/22 24/6/22 24/8/22 24/10/22 24/12/22 25/2/23 25/4/23 25/6/23 25/8/23 25/10/23 25/12/23 26/2/24 26/4/24 26/6/24 26/8/24 26/10/24 26/12/24 27/2/25 27/4/25 27/6/25 27/8/25 27/10/25 27/12/25 28/2/26 28/4/26 28/6/26 28/8/26 28/10/26 28/12/26 29/2/27 29/4/27 29/6/27 29/8/27 29/10/27 29/12/27 30/2/28 30/4/28 30/6/28 30/8/28 30/10/28 30/12/28 31/2/29 31/4/29 31/6/29 31/8/29 31/10/29 31/12/29 32/2/30 32/4/30 32/6/30 32/8/30 32/10/30 32/12/30 33/2/31 33/4/31 33/6/31 33/8/31 33/10/31 33/12/31 34/2/32 34/4/32 34/6/32 34/8/32 34/10/32 34/12/32 35/2/33 35/4/33 35/6/33 35/8/33 35/10/33 35/12/33 36/2/34 36/4/34 36/6/34 36/8/34 36/10/34 36/12/34 37/2/35 37/4/35 37/6/35 37/8/35 37/10/35 37/12/35 38/2/36 38/4/36 38/6/36 38/8/36 38/10/36 38/12/36 39/2/37 39/4/37 39/6/37 39/8/37 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1084

1084

RECEIVED
RECORDS OFFICE
APR 5 1919
REFERRED TO
ACTION TAKEN

Service Badge
#1574

This space to be for numbers.

M

Proceedings on Discharge.

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

No. **724553**

Rank **Pte.**

Surname **KINMORE ARTHUR ALBERT**

Christian name

NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.

Corps (Squadron, Battery or Company) **109th Batt (D.D.#.2)**

Date of discharge **Mar 22.1919**

Place of discharge **TORONTO, ONT**

I

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 22 years.....months.	Descriptive marks Vacc. Scar Left Arm.
Height 5 feet.....inches.	Prisoner of War.
Complexion Fair	
Eyes Grey	
Hair Dk. Red	
Trade farmer	
Intended place of residence (To be given as fully as practicable.)	P.O. Omemeo Ont

2. The above-named man is discharged in consequence of

ON GENERAL DEMOBILIZATION

Authority for discharge..... **D.O.D.#.2 Pt 11 No 78**

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.

3. Conduct and character while in the service have been, according to the records, etc.

To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.

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.)

E.S

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

(OVER)
(Date)

20-5-4
A-2-11-19

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.....

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.* *Arthur Albert Zimmerman* (Signature of Soldier.)

(Date) *22.3.19* *James Simpson* (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).....

(Signature) *James Simpson*

(Date) *22.3.19*

For
O.C. No. 2 District Depot

Reservatio 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

Medical History Sheet	W 42	Medical Report for Invalide	W 43
Report of Discharge (Medical)	W 44	Report of Discharge (Medical)	W 45
Report of Discharge (Medical)	W 46	Report of Discharge (Medical)	W 47
Report of Discharge (Medical)	W 48	Report of Discharge (Medical)	W 49
Report of Discharge (Medical)	W 50	Report of Discharge (Medical)	W 51
Report of Discharge (Medical)	W 52	Report of Discharge (Medical)	W 53
Report of Discharge (Medical)	W 54	Report of Discharge (Medical)	W 55
Report of Discharge (Medical)	W 56	Report of Discharge (Medical)	W 57
Report of Discharge (Medical)	W 58	Report of Discharge (Medical)	W 59
Report of Discharge (Medical)	W 60	Report of Discharge (Medical)	W 61
Report of Discharge (Medical)	W 62	Report of Discharge (Medical)	W 63
Report of Discharge (Medical)	W 64	Report of Discharge (Medical)	W 65
Report of Discharge (Medical)	W 66	Report of Discharge (Medical)	W 67
Report of Discharge (Medical)	W 68	Report of Discharge (Medical)	W 69
Report of Discharge (Medical)	W 70	Report of Discharge (Medical)	W 71
Report of Discharge (Medical)	W 72	Report of Discharge (Medical)	W 73
Report of Discharge (Medical)	W 74	Report of Discharge (Medical)	W 75
Report of Discharge (Medical)	W 76	Report of Discharge (Medical)	W 77
Report of Discharge (Medical)	W 78	Report of Discharge (Medical)	W 79
Report of Discharge (Medical)	W 80	Report of Discharge (Medical)	W 81
Report of Discharge (Medical)	W 82	Report of Discharge (Medical)	W 83
Report of Discharge (Medical)	W 84	Report of Discharge (Medical)	W 85
Report of Discharge (Medical)	W 86	Report of Discharge (Medical)	W 87
Report of Discharge (Medical)	W 88	Report of Discharge (Medical)	W 89
Report of Discharge (Medical)	W 90	Report of Discharge (Medical)	W 91
Report of Discharge (Medical)	W 92	Report of Discharge (Medical)	W 93
Report of Discharge (Medical)	W 94	Report of Discharge (Medical)	W 95
Report of Discharge (Medical)	W 96	Report of Discharge (Medical)	W 97
Report of Discharge (Medical)	W 98	Report of Discharge (Medical)	W 99
Report of Discharge (Medical)	W 100	Report of Discharge (Medical)	W 101

Documents not accompanying this form should be crossed out

I hereby certify that the following documents are indispensable

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

Reservist's Certificate to Part 8.
(To be signed by the soldier. When there are more than one, it is to be so stated, and signed by the soldier.)

List of Discharge Documents.

Reg. Conduct Sheet, Militia form B. 263

Squadron }
Battery } Conduct Sheet, " B. 263a
Company }

or
Field Conduct Sheet " W. 178

Copies of Convictions, by C. P. in MS.

Med. Hist. Sheet, Militia form B. 313

Casualty Form " W. 54

Medical Report for Invalid§ " B. 227

Dental History Sheet " B. 465

Last Pay Certificate " W. 44

Duplicate Discharge Certificate " W. 39A

‡Form of Will " W. 82

§Only if discharged "Medically unfit."

‡Only if man has not been overseas.

Attestation Paper Militia Form W. 23

or
Particulars of Recruit " W. 133

Proceedings on Discharge " B. 218

In the case of recruits who are rejected on final approval, the discharge documents will consist of

(a) Proceedings on Discharge

(b) Attestation.

(c) Medical History Sheet.

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.

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..... *Ex Camp* DATE..... *March 19 1919*

1. 1 (a) Unit..... *B Depot no 2* (b) Regimental No..... *724553* (c) Rank..... *Pte*
 (d) Surname..... *KINMORE* (e) Christian name..... *Albert Arthur*
 (f) Home address..... *Omemeo Ont. P.O.*
 (g) Next of Kin..... *Mrs Amy Kinmore* (h) Relationship..... *Sister in Law*
 (i) Address of Next of Kin..... *24 Barry St Birkenhead. England*

2. Age last birthday..... *23* Date of birth..... *Aug 23 1895*

3. Enlistment, or Appointment (if an Officer) (a) Place..... *Lindsay Ont* (b) Date..... *Sept 25 1915*

4. Personal description:
 (a) Height..... *5 5 in* (b) Weight..... *138* (c) Complexion..... *Fair*
(stripped)
 (d) Colour of hair..... *DK Red* (e) Colour of eyes..... *grey* (f) Identification marks, Scars, etc.

5. Former trade or occupation..... *Farmer*

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
	<i>3</i>	<i>175</i>

	PERIODS	
	From	To
<i>109th Bn. C.E.F.</i>		
Canada	<i>Sept 25 1915</i>	<i>July 31 1916</i>
England.....	<i>July 31 1916</i>	<i>Dec 4 1916</i>
France or other theatres of War.....	<i>Dec 4 1916</i>	<i>April 15 1917</i>
	<i>England & Canada</i>	<i>April 15 1917 to Date</i>

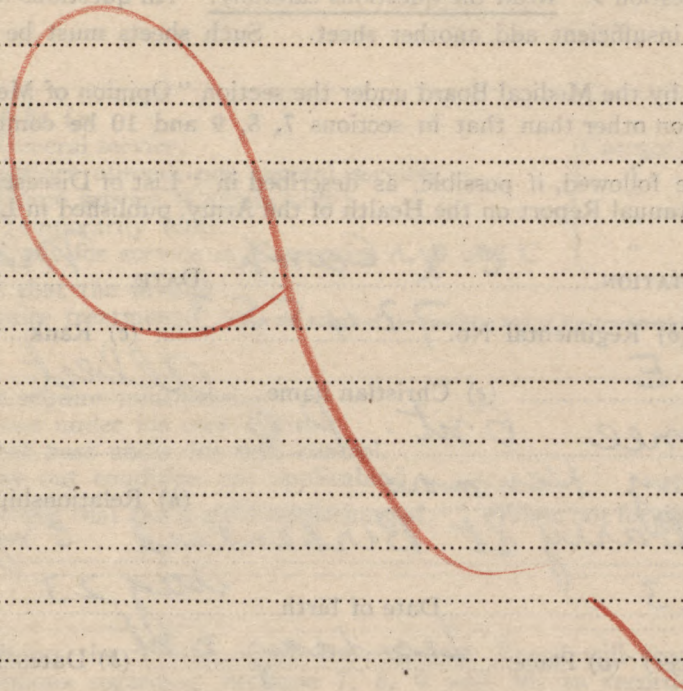
7. Original disease, or injury.....

(a) Date of origin..... (b) Place of origin.....

(c) Cause.....

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.)

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.)



(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..... Cardio-Vascular System..... Genito-Urinary System.....
(If pulse rate is abnormal, B. P. will be taken.) (Albumen and Sugar will be excluded.)
- Special Senses..... Respiratory System..... Integumentary System.....
- Disturbances of Mentality..... Digestive System..... Muscular System.....
- Osseous and Joint Systems..... Any other general condition.....

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

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).)

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

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

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

12. Was the disability caused, or aggravated; (a) by intemperance, or improper conduct; or (b) by unreasonable refusal to accept treatment?

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?

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

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)

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

17. Recommendations

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, 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

Signature of invalid examined. Rank.

CASE HISTORY SHEET.

Sydenham Military Hospital. Kingston Station.
No. 724553 Rank Ex-Pte. Name Kinmore, Albert, A. Age 24
Unit S.C.R. Completed years of service ^{Where and how long} }
Date of admission October 1st, 1919 Date of discharge October 21st, 1919.
Diagnosis G.S.W. right forearm Place of origin France.

CONDITION ON ADMISSION AND PROGRESS OF CASE G.S.W. of back of right forearm,
evidently a glancing blow which entered 1/2" below & external to olecranon
Scar extends to outer side of forearm about 3" below head of radius,
injuring back of ulna, he states scar has broken down 3 times & discharges
pus. Scar tissue looks delicate. Needle inserted shows bloody serous
fluid but no pus. Urinalysis - negative.

X Ray shows: - One small fragment of
shrapnel lies buried in the olecranon process of ulna quite close to
its posterior surface. Another tiny F.B. lies in the soft tissues
posterior and lateral to lower end of the upper 3rd of radius.

FAMILY HISTORY Negative.

(Tuberculosis, mental or nervous diseases.)

TREATMENT October 4/19 - Piece of scar resected at elbow. Wound closed.

(Especially any specific or special form.)

CONDITION ON DISCHARGE Wound healed.

(and disposal made of case.)

Date October 22nd/19..

W. L. ...
Medical Officer i/c case.

CASE HISTORY SHEET

[Faint, illegible text on a lined page, possibly bleed-through from the reverse side]

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	724553	Pte	Keimore	Albert
Year	Unit.	Age.	Service.	
1917	35. Canadian	21	1 1/2	
Station and Date.	Disease			
Kent 154 Rust Hall Hospital Tunbridge Wells. 16.4.17	S. W. R. Forearm. Electric Treatment. + pole to wound in saline bath. Indifferent pad between shoulders.			
May 23 rd	April 20 th First Treatment.			
	Treatment continued steadily. Wound healing very satisfactorily.			
June 14 th	Wound going well.			
" 29 th	Wound healed.			
		P. J. Conway		

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

Station
and Date.

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

K

2995

Aug 1/16

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

<i>15</i>			
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Bank Account Credit

PARTICULARS OF SEPARATION ALLOWANCE

No. *124553 (724533)*
 Rank *Pte* Promoted Reverted Discharge
 Soldier's Name *A.A. Kinnore*
 Battalion *109th Battn "A" Coy*
 Beneficiary
 Relationship
 Address

PARTICULARS OF ASSIGNMENT

Name ~~*Manager of the Standard*~~
 Address ~~*Bank of Canada Toronto*~~
 Change of Address *Ont*
 1 *Bank of Toronto, Toronto, Ont.*
 2
 3
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
<i>1917</i>					<i>10091-a-28, m no. 13889^{19/17}</i>
<i>Dec 31</i>			<i>255 00</i>	<i>255 00</i>	<i>2m 18/9/17.</i>
<i>Jan</i>	<i>568466</i>		<i>15 00</i>	<i>15 00</i>	
<i>Feb</i>	<i>K 75021</i>		<i>15 00</i>	<i>15 00</i>	<i>19/1/18 CK ordered to replace. F71196 can. by CK writ. Feb</i>
<i>March</i>	<i>K 93503</i>		<i>15 00</i>	<i>15 00</i>	
<i>April</i>	<i>K 11023</i>		<i>15 00</i>	<i>15 00</i>	<i>Rept. Missing Aug 10-18, per C.L. 20 283</i>
<i>May</i>	<i>G 18949</i>		<i>15 00</i>	<i>15 00</i>	<i>fol 6. Aug 27-1918, file 10091-a-28,</i>
<i>June</i>	<i>F 16891</i>		<i>15 00</i>	<i>15 00</i>	<i>acc. closed Aug 31-18, JAB.</i>
<i>July</i>	<i>P 28023</i>		<i>15 00</i>	<i>15 00</i>	<i>Total A.P. \$375⁰⁰ app. reopened. Prisoner of War</i>
<i>Aug</i>	<i>H 39856</i>		<i>15 00</i>	<i>15 00</i>	<i>now Rept at 30/11/18 per Gas Int-387, 7/12/18</i>
<i>Sept</i>	<i>K 42447</i>		<i>15 00</i>	<i>15 00</i>	<i>L-H 5319-16-9-18 sab. Can. 18-9-18 sab</i>
			<i>\$ 375 00</i>	<i>\$ 375 00</i>	
<i>Nov</i>	<i>m 660</i>		<i>15</i>	<i>15</i>	<i>add 7/10/18 m 9/10/18</i>
<i>Oct</i>	<i>m 2071</i>		<i>15</i>	<i>15</i>	<i>ord 2/10/18 m 23/10/18</i>
<i>Nov</i>	<i>E 58082</i>		<i>15</i>	<i>15</i>	
<i>Dec</i>	<i>O 62454</i>		<i>15</i>	<i>15</i>	
<i>Jan</i>	<i>K 73767</i>		<i>15</i>	<i>15</i>	
<i>Feb</i>	<i>K 76542</i>		<i>15</i>	<i>15</i>	
<i>March</i>	<i>G 88562</i>		<i>15</i>	<i>15</i>	
			<i>480</i>	<i>480</i>	
					<i>A/c Closed 3/3/19</i>
					<i>Ret'd per. <i>Seohan</i></i>
					<i>Date. 2/3/19 M.F.W. 187 4/3/19</i>
					<i>Clerk. <i>Brook</i></i>

Reported missing. Date *25/9/18*
 C. L. No. *312* Folio *6* Date *25/9/18*
 A/c *2995* File *10091-a-28*
 B.I. or P. A. Date
 Clerk *Rob. Jeff.* Date *7/1/18*

A STENCIL
 HAS BEEN MADE
 FOR THIS ACCOUNT

MRO # 2
MRO Destroy 694198

MRO 2 @ 12-9-18 B.

M. F. W. 128
 400M-6-17-1722-88-1141
 L. L. 22520-M. & D. 7198.

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

--	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No.

Name

Rank

Promoted

Reverted

Discharge

Address

Soldier's Name

Change of Address

Battalion

1

Beneficiary

2

Relationship

3

Address

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
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M. F. W. 128
 400MC-6-17-1772-88-1141
 L. L. 22520-M. & D. 7993.

3333

1386

22

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

REGT. No. 724553

RANK Pte.

NAME (IN FULL)

MINMORE

A. A.

M. OR S.

NEXT OF KIN

ADDRESS

IS SEPARATION ALLOWANCE PAID?

TO WHOM PAID

ADDRESS

RELATIONSHIP

PARTICULARS

EFFECTIVE DATE

AUTHORITY

DATE EFFECTIVE

RELATIONSHIP

ORIGINAL UNIT C.E.F.

IF IN P.F. WHAT UNIT

(BLOCK LETTERS SURNAME FIRST)

PLACE OF ATTESTATION

TRANSFERRED TO

DATE

AUTHORITY

DATE OF ATTESTATION

TRANSFERRED TO

DATE

AUTHORITY

ASSIGNED PAY \$

DATE EFFECTIVE

PAYABLE TO

RELATIONSHIP

ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE

EFFECTIVE

DISCHARGED

PLACE TORONTO,

DATE MAR 22 1919

REASON

Demot

AUTHORITY

2079

IF ENTITLED TO POST DISCHARGE PAY

yes

BALANCE FROM PREVIOUS ACCOUNT

MONTH	PAY AND F.A.		OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY	REGI-MENTAL CHARGES	OTHER CHARGES	TOTAL DEBITS	BALANCE		PARTICULARS OR REMARKS	
	NO. OF DAYS	RATE			AMOUNT	COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2					COL. NO. 3	DEBIT		CREDIT
31-1-19	8110			70 57														
				7059				973										
								487										
								5 00										
								30 00										
										30 00								
1-2-19	28	110	3080	12	4280								2903		9960	2903	Feb. march 1919	
1-3-19	22	110	2420	70	131802			10									T.O.S. 1919	
				35	14297										14297		SUBS. 1919	
183 days		W.S.G.	420		420													1st W.S.G. Paid by #2 D.D.
																		OK mailed 20/4/19
																		14/6
																		FOR PAYMASTER WAR SERVICE GRATUITY
																		OK 16500/10/19 W.S.G. copies
																		14 60 W.S.G. 8973
																		OK 10096. a. 25. 20/1/19
																		W.S.G. PAID IN FULL

