

ATTESTATION PAPER.

No. 725131

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

TRIPPLICATE

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

9

- 1. What is your surname?..... *McLean*
- 1a. What are your Christian names?..... *Stanley Lachlan*
- 1b. What is your present address?..... *Lindsay Ont.*
- 2. In what Town, Township or Parish, and in what Country were you born?..... *Lindsay Ont.*
- 3. What is the name of your next-of-kin?..... *Mary McLean*
- 4. What is the address of your next-of-kin?..... *5 B. Bay St. Lindsay Ont.*
- 4a. What is the relationship of your next-of-kin?..... *Mother*
- 5. What is the date of your birth?..... *11 Nov. 1890*
- 6. What is your Trade or Calling?..... *Druggist*
- 7. Are you married?..... *No*
- 8. Are you willing to be vaccinated or re-vaccinated and inoculated?..... *Yes*
- 9. Do you now belong to the Active Militia?..... *No*
- 10. Have you ever served in any Military Force?..... *No*
If so, state particulars of former Service.
- 11. Do you understand the nature and terms of your engagement?..... *Yes*
- 12. Are you willing to be attested to serve in the }
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? }..... *Yes*

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *Stanley Lachlan McLean* 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 *Jan 10* 1916. *S. L. McLean* (Signature of Recruit)
Rev. Downey M. (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Stanley Lachlan McLean*, 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 *Jan 10* 1916. *S. L. McLean* (Signature of Recruit)
Rev. Downey M. (Signature of Witness)

CERTIFICATE OF MAGISTRATE.

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

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath

before me, at *Lindsay* this *14* day of *January* 1916.

[Signature] (Signature of Justice)

Description of Stanley Lachlan McLean Enlistment.

Apparent Age.....25 years7 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 7 1/2 ins.

scar on left hip

Chest measurement. { Girth when fully expanded.....37 ins.
 Range of expansion.....3 ins.

Complexion.....Dark

Eyes.....Blue

Hair.....Black

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.....Jan 10 1916:

Place.....Lindsay

J. 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.

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

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

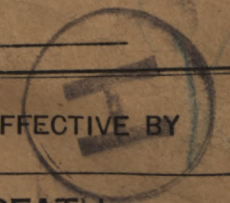
JAN 15 1916

Date.....1916

REGIMENTAL DOCUMENTS

20-6-19
llb.

NAME *McLEAN, STANLEY, HICKMAN* REGT. NO. *725-131* UNIT *109th CB* H. Q. FILE NO.



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DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505
REFERENCE

NON-EFFECTIVE BY

ATTESTATION PAPER (M.F.W. 23, 133, or 51)

CASUALTY FORM (M.F.W. 54 or A.F.B. 103)

TRAINING HISTORY SHEET (M.F.W. 113)

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)

MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)

DENTAL HISTORY SHEET (M.F.B. 465)

MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)

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)

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PARTICULARS OF CHARACTER (A.F.W. 3226)

COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)

MM

Sept 17-9-19

Comp 3/10/19

Sept 9-19

3/11/19

DISCHARGE

Category

Memole

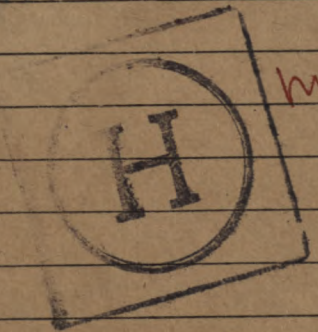
26656

Deceased

144, 332-45-37

DESERTION

3. misc
1 Disp card
1 gas card
1 pay



m7
12-1-21
g.A.S.

1-9
20-9
29-9
1

27
307

634
39

2

1915
187

3

13
000000
010000
000000

13

* Strike out whichever inapplicable.

ASSIGNED PAY. EFFECTIVE DATE:- AMOUNT:-	ENGLAND or CANADA * ENGLAND	SEPARATION ALLOWANCE. EFFECTIVE DATE:- AMOUNT:-	ENGLAND or CANADA * ENGLAND	NAME:- McLEAN Stanley Hughlan	NUMBER:- 725131
---	--------------------------------	---	--------------------------------	--------------------------------------	------------------------

NAME, ADDRESS, RELATIONSHIP & AUTHORITY <i>Mary McLean Mother Sunday Ontario</i>	WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.	
	AUTHORITY	RANK OR APPOINTMENT
<i>Stopped 1.5.19.</i>	DATE EFFECTIVE	RANK OR APPOINTMENT
	DATE EFFECTIVE	RANK OR APPOINTMENT

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
<i>1st / 4</i>	<i>109</i>		<i>29.20</i>				

MONTH 1918	PARTICULARS	CR. 1	CR. 2	DR. 1	DR. 2	DR. 3	BALANCE	DEFERRED	SEPARATION
31st Mar	Balance forward						<i>17 19</i>	<i>til</i>	
Apr	<i>at</i>						<i>15</i>		
	<i>at</i>	<i>33</i>					<i>35 19</i>		
	<i>at</i>						<i>31 62</i>		
	<i>at</i>						<i>27 16</i>		
May	<i>A.P.</i>	<i>33</i>					<i>15 -</i>		
	<i>at</i>	<i>34 10</i>					<i>15</i>		
	<i>at</i>						<i>46 26</i>		
	<i>at</i>						<i>41 80</i>		
	<i>at</i>						<i>34 23</i>		
June	<i>P.P.</i>	<i>34 10</i>					<i>15 -</i>		
	<i>at</i>	<i>33 00</i>					<i>15</i>		
	<i>at</i>						<i>56 23</i>		
	<i>at</i>						<i>52 66</i>		
	<i>at</i>						<i>48 20</i>		
July	<i>P.P.</i>	<i>33</i>					<i>15 -</i>		
	<i>at</i>	<i>34 10</i>					<i>15</i>		
	<i>at</i>						<i>67 30</i>		
	<i>at</i>						<i>62 84</i>		
	<i>at</i>						<i>59 27</i>		
Aug	<i>P.P.</i>	<i>34 10</i>					<i>15 -</i>		
	<i>at</i>	<i>34 10</i>					<i>15</i>		
	<i>at</i>						<i>93 37</i>		
	<i>at</i>						<i>78 37</i>		
	<i>at</i>						<i>71 23</i>		
Sep	<i>P.P.</i>	<i>34 10</i>					<i>15 -</i>		
	<i>at</i>	<i>33</i>					<i>15</i>		
	<i>at</i>						<i>104 23</i>		
	<i>at</i>						<i>89 23</i>		
	<i>at</i>						<i>85 66</i>		
	<i>at</i>						<i>62 09</i>	<i>agreed</i>	
Oct	<i>P.P.</i>	<i>34 10</i>					<i>15 -</i>		
	<i>at</i>	<i>34 10</i>					<i>15</i>		
	<i>at</i>						<i>101 19</i>		
	<i>at</i>	<i>34 10</i>					<i>15</i>		
	<i>at</i>						<i>93 73</i>		

COPIED BY *Imran*
Boyd

(65)

Dis to Can 1.5.19 MR 97045 Bram 18 1/2 Bram mid. 3.

NUMBER 125131

RANK

Plc

NAME

McLEAN STANLEY L.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
				food					9373	✓	
Nov	PP	33-		a.f.				15	11143		
Dec	P.P.	3410		at.				15-	13083		
				at 1627 20/11 2122 46	1306				11777		
Jan	"	3410		at.				15	13687		
Feb	"	3080		at.		1506		15	15267		
				at 1821 5/1 " 32	1509				13758		
				1968 28/1 " 62	373				13385		
				3509 9.7 HCB 95	2239				11146		
Mar	"	3410		at.				15-	13056		
				2147 28/7 220 121	373				12683		
				H512 4/3 HCB 129	1973				11770		
				1091 4/3 " 135	9733				2087		
Apr	"	6140 33			15140			30 15	3837		
				109. 14/4 moving 20	2020				917		
				1116 5.5 " 62	973				5		
				1609 9.5 " 78	2973				1029		
		33			4866			15			

38.37
29.20
9.17

had 13/5 th by came

⋮

NAME

RANK AND CORPS

CABLE

NO.

DATE

NATURE OF CASUALTY

REG'TL No.

H. Q. FILE NO.

FOLLOWS

No.

FOLLOWS

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

3	Can. Mil. Bramshott	21-5-17	U.F.D. I.
20	Co. Woodcote Pk. Epsom (and)	9-6-17	Appendicitis. ac.
A377	Discharged	29-6-17	Appendicitis

SURNAME. *McLean,*
CHRISTIAN NAMES *Stanley Lachlan*
REGL. NO. *725131* RANK *Sgt.*
UNIT *109th*
FORMER CORPS *nil.*

CARD NO.

M.D. 3, 14
509. 24/5. 19 Remot
001620/11/19 #480

Batt.

NEXT OF KIN.

NAMES IN FULL *McLean, Mrs Mary*
RELATIONSHIP TO SOLDIER *mother*
ADDRESS *5 Bay St. Lindsay, Ont.*

CHANGE OF ADDRESS

COUNTRY OF BIRTH *Canada, Lindsay Ont* DATE *Nov. 11th 1890*
PLACE OF ATTESTATION *Lindsay* DATE *Jan 14th 1916*

Sailed from Halifax for S.S. 448 R.C. 22-5-19 330
Olympic. 23-7-16 - M.F.W. 22. 100m.-1.16. H. Q. 1772-39-839.
23

MARRIED

SINGLE

Yes

WIDOWER

TRADE OR CALLING

Druggist

RELIGION

Presbyterian

DESCRIPTION.

APPARENT AGE

25-

YEARS

MONTHS

HEIGHT

5-

FEET

7 1/2

INCHES

CHEST MEASUREMENT

37

INCHES

EXPANSION

5-

INCHES

COMPLEXION

Dark

EYES

Blue

HAIR

Black

DISTINGUISHING MARKS

Scar on left hip.

MEDICAL EXAMINATION.

PLACE

Lindsay

DATE

Jan 10th 1916

No. 725-121. RANK

Pte

NAME

McLean S. L.

T. O. S. 20-12-N^o UNIT

D. O. 13. 10-1-16.

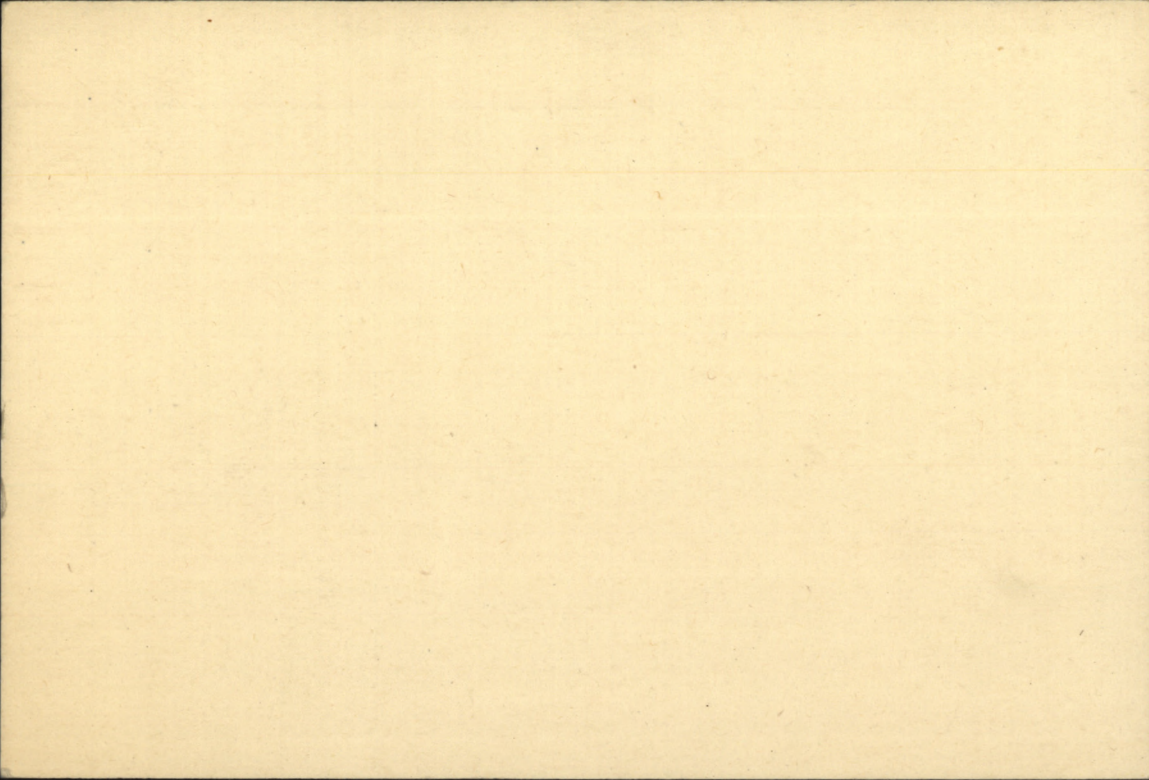
109th. Battalion.

M. D. 3

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915. Dec 20	1916. Jan 31	✓	Trans. Trov. Sgt. 15-1-16	D. O. 50. 18-1-16.
	Feb.	✓		
	Mar.	✓		
	April.	✓	Det. filed for duty in M. O. Office.	D. O. 116 of 4-4-16.
	May.	✓		
	June.	✓		
	July.	✓		

UNIT SAILED

JUL 23 1916



Name **McLean Stanley Rank Pte.**Reg. No. **725131**Unit **Lachlan
C.A.M.C. 14th. C.F. Amb.**Next of Kin **Canada**

Date 1917	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
21-5	Cam. Mil. Hosp. Bramshott		N.Y.D. 9		3	
9-6	Gen. Hosp. Woodcote St. Epsom		Appendicitis 20			
29-6	Discharged:-		Do.	38		

Tanley
ask for 25731. 6th fld ambul. C.A.M.C.

McLean, Pte. S. L. #721351 - C. E. F.

Med & D (Mother) Mrs. Mary McLean,
11 Bay Street
Lindsay, Ontario.

P & S (Mother) Address as above

Mem Cross (Mother) Address as above

*Death not
due to service*

*Not Eligible for 14-15 Star,
" " " " V.M.
" " " " B.W.M.*

135
ok
B
J.A.S.

M. G. 91636 JAN 18 1921

1007

EM
Down

Number 725131 Rank Pte. B

Surname McLEAN

Christian Name Stanley Lashlan

Units 6amc Theatre of War France

Date of Service 20/3/18

Remarks (brother) ~~Prince De Melean Esq.~~

Latest Address 508 Charlotte St. Peterborough Ont.
Box 1026 Lindsay

Auth. Est. Card Date

ROLL No "B" Page 695-6 Mrs Mary McLean
11 Bay St.
Lindsay Ont.

Surname
McLean.

Christian Name or Names
S. L.

Reg. No.
725131.

Rank

Unit

Co.

Troop

Batty.

Pte. CAMC. Eng.

Hospital

Date of Admission

Bramshott Mil.

21-5-17.

Transferred

Hosp.

Epan Cowal

Hosp. 9-6-17

Hosp.

Hosp.

Diagnosis

NYD.

(1)
Later Diagnosis (if changed)

appendicitis (ac)
aw

(2)

(3)

Additional Diagnosis: if more than one state present

DISPOSITION

Dis. 29.6.17
Date

REMARKS

C.L. 25-5-17. 3.

14-6-17 20

6.7.17 38.

A.M.D. 2 DEPT.

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

EPITOME OF HOSPITAL TREATMENT.

Hospital .

Adm.

1.

2.

3.

4.

5.

6.

7.

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) Mc. LEAN, S. L.
 REGIMENT 6 Cdn Field Amb. RANK Pte No. 725131
 Date of Examination in England 11-4-19 Date of Examination in France _____

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



PRESENT DENTAL REQUIREMENTS

1. FILLINGS 29 - 21
2. EXTRACTIONS _____
3. CROWNS _____
4. DENTURES
 - (a) Full Upper _____
 - (b) Part Upper _____
 - (c) Full Lower _____
 - (d) Part Lower _____

HAS HE EVER REFUSED DENTAL TREATMENT? No

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

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

E. J. Stenken
 Lieut. Col.
 A. D. D. S., M. D. 4

Signature of Dental Officer *W. R. Fraser*
 Capt.

FORM OF WILL.

I, Stanley Lockhart Maclean (Name in full)

Regimental Number 725131 serving in P. R. M. C.

of the Canadian Expeditionary Force, do hereby revoke all former Wills by me made and declare this to be my last Will.

I bequeath all my real estate unto

Ms. Mary Maclean
Lindsay
Montreal Quebec

Name and Address of person or persons to whom it is to go.

absolutely, and my personal estate I bequeath to

Ms. Mary Maclean
Lindsay
Montreal Quebec

Name and Address of person or persons to receive personal estate* (See note).

IMPORTANT NOTE
This must be Signed and Dated by THE SOLDIER HIMSELF.

this 15th day of April A. D. 1917.

Stanley Maclean Signature of Soldier.

*N.B.—Personal estate includes pay, effects, money in bank, insurance policy, in fact everything except real estate.

Signed and acknowledged by the Testator as and for his last Will in the presence of us both present at the same time, who in his presence, at his request, and in the presence of each other have hereunto subscribed our names as Witnesses.

THE TWO WITNESSES MUST SIGN HERE

Signature of First Witness Samuel Wallis

Address of Witness 47 Addington Ave Notre Dame de Grace Montreal Canada

Occupation of Witness clerk

Signature of Second Witness George Edwin Hubbard

Address of Witness 67 Fulbrey Rd south Woodford Eng

Occupation of Witness Commercial Traveller

DUPLICATE

9

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.

109th OVERSEAS BN., C.E.F.

- (1) Name of Overseas Unit which Soldier joins.....
- (2) Regimental Number..... 725131
- (3) Full Name of Soldier..... *Flanery Lachlan Maclean*
- (4) Place of Birth..... *Lindsay - Ont.*
- (5) Are you married, or not?..... *no*
- (6) If married, state,
 - (a) Full name of your wife.....
 - (b) Present Postal Address.....
- (7) Are you a widower?..... *no*
- (8) Have you any children?.....
 - If so, give number of boys and girls.....
 - Also their names and ages.....

(9) Is your Father alive?.....

If so, state name and address *no*

(10) Is your Mother alive?..... *Yes - Mrs from a Maclean*

If so, state name and address..... *5 Bay Street Lindsay*

(11) If your Mother is a widow..... *Yes*

Are you her sole support, or not?..... *Yes*

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

\$40.00 *Father dead*

(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.

.....
.....
.....

(14) If you have a wife, or children, or a widowed mother who depends on you as her sole support, have you applied to the Paymaster of your unit for Separation Allowance? If not, this must be done.

..... *Yes - arranged*

(15) Are you insured?..... *Yes*

If so, in what Company?..... *Sun Life - Standard 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..... *JUL 11 1910*

[Signature]
.....
U. S. 109th Over Officer Commanding, O-E. F.

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. 725131 Rank Pte.; Surname McLean
(Given name in full)

Stauley; LACHLAN

Unit or Corps 6th Cdn. Field Amb. Birthplace Lindsay, Ont. Canada

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

1. GENERAL DESCRIPTION:

Physique good Weight 155 lbs. Height 5.8 ft. Colour of Eyes blue

Nutrition good

Pulse 74 regular

Condition of arteries app

Vision Rt. 12 Left 12

Hearing (conversational voice) Rt. 20 ft.

Left 20 ft.

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

vacc mark one Lt an
upper scar 20-5-17
scar Rt eyebrow post-war

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 yes

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.

20-5-17 Appendicitis Op

Rec

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at Witley Camp (Overseas)

Date 14-4-19

Signed [Signature] 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 [Signature]

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

THIS SECTION FOR USE IN CANADA—

Examined at (Canada)

Date

Signed M.O.

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

Signature

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

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

[Signature]

[OVER]

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

WAR SERVICE BADGE

CLASS No. A

THIS IS TO CERTIFY that No. 725131 (Rank) Private

Name (in full) McLean Stanley Jackson enlisted in

the 169th Canadian Infantry Battalion

CANADIAN EXPEDITIONARY FORCE at Lindsay on the 1st

day of January 19 15

HE served in 6th Canadian Field Ambulance
In France

Demobilization.

and is now discharged from the service by reason of

~~Medical Unfitness.~~

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

Age 29

Marks or Scars

Height 5 ft 4 1/2 in

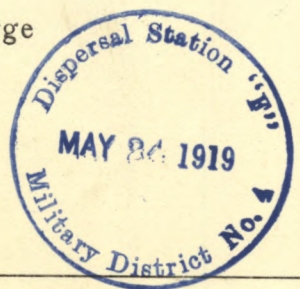
Complexion Sark

Eyes Blue

Hair Black

A. L. McLean
Signature of Soldier.

Date of Discharge



L. J. Dawson
Issuing Officer
Commanding Dispersal Station Maj

Rank

Date 24 May 19 19

N.B. AS NO DUPLICATE OF THIS CERTIFICATE WILL BE ISSUED, ANY PERSON FINDING SAME IS REQUESTED TO FORWARD IT IN AN UNSTAMPED ENVELOPE TO THE SECRETARY, MILITIA COUNCIL, OTTAWA, CANADA.

NO. 1

A

The following is a list of the names of the
 members of the American Expeditionary Force
 who were killed in action during the
 campaign in France, from the beginning
 of the war to the end of the year 1918.
 The names are arranged in alphabetical
 order of the surnames.

The following is a list of the names of the
 members of the American Expeditionary Force
 who were wounded in action during the
 campaign in France, from the beginning
 of the war to the end of the year 1918.
 The names are arranged in alphabetical
 order of the surnames.

The following is a list of the names of the
 members of the American Expeditionary Force
 who were missing in action during the
 campaign in France, from the beginning
 of the war to the end of the year 1918.
 The names are arranged in alphabetical
 order of the surnames.



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

Casualty Form—Active Service.

M. F. W. 54.
150M. 10-15.
H.Q. 1772-89-920.

Unit, Regiment or Corps 109th OVERSEAS BATTALION, C. E. F.
 Regimental No. 25131 Rank Private Name McLean Stanley Graham
 Enlisted (a) 10/1/16 Terms of Service (a) D of W. Service reckons from (a) 10/1/16
 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) Druggist

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	
7-8-16		Appointed <u>A/Sergt</u>	Orney	7.8.16	Part II Order <u>220</u>
8.12.16	OC 109 th	Transferred to 124 th	Witley	8.12.16	D.O. Pt II # <u>43</u>
9-12-16	124 th Bn.	Taken on strength of 124 th Bn., C.E.F.	Witley Camp	8-12-16	Part II Orders 265 <u>Adjutant</u> ADJUTANT, 109TH BATTALION CAN INFANTRY.
25.7.17	124 th Bn.	Transferred to C.A.M.B. Training School, S. Cliff	Witley Camp	20.1.17	Part II Orders # <u>26</u> <u>Adjutant</u> MAJOR ADJUTANT, 124th BATTALION C.E.F.

(a) In the case of a man who has re-engaged for, or enlisted into Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered.
 (b) e.g. Signaller, Shoeing 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				
27.1.17	124 th Bn.	Reverts to Permanent Grade on transfer to C.A.M.C. J.R.	Witley Camp	20.1.17 ✓	Part II Orders # 24
26/1/17	CAMC 35	Taken on strength on transfer from 124 th Bn.	Westenhanger	20/1/17 ✓	Rt II D.O. 6
21-2-17	CAMCTS	S.O.S. on transfer to the A.D.M.S. Witley 14 th H.A. Amb.	Westenhanger	21-2-17 ✓	pt. 2 D.O. 52 Gillmore CAPT. ASST. ADJUTANT FOR O.C. C.A.M.C. TRAINING SCHOOL
28/2/17.	14 th H.A. Amb.	J.O.S. of 14 th H.A. Field Ambulance.	Witley	21/2/17 ✓	Part II D.O. no 1. 28/2/17. J. P. Thomas 14 th CANADIAN FIELD AMBULANCE
4.3.18	14 th H.A. Amb.	S.O.S. 14 th H.A. Field Amb. on posting to Camp Depot.	Shorncliffe	4.3.18 ✓	Part II D.O. # 5 of 4.3.18 J. J. ... 14 th CANADIAN FIELD AMBULANCE.
5 MAR 1918	C.A.M.C.D	TAKEN ON STRENGTH	Schliff	MAR 1918 ✓	Rt 2 - D.O. 64
21 MAR 1918	CAMCD	S.O.S. to Overseas	Shorncliffe	20-3-18 ✓	Part 2 D.O. 80 C. ... CAPT. ASST. ADJUTANT FOR O.C. C.A.M.C. UNIT
28-2-17.	14 th H.A. Amb.	From 14 th H.A. Amb. to Camp Depot. Having arrived	HAVRE	25-2-17 ✓	Pt II D.O. 1. J. P. ... LIEUT. FOR ST. ... RECORDS ... O.M.F.

CORRECTED
 5 MAR 1918
 21 MAR 1918
 RECEIVED LONDON.

DISEMBARKED
 From 14th H.A. Amb. to Camp Depot
 Having arrived
 as Reinforcement is taken
 on the strength of 6 AMB.

Field 20-3-18
 J. P. ...
 LIEUT.
 FOR ST. ... RECORDS ... O.M.F.

FORM OF WILL.

I, Stanley Lachlan McLean (Name in full)

Regimental Number 25131 ~~25135~~ serving in 109th OVERSEAS BATTAL C.E.F.

of the Canadian Expeditionary Force, do hereby revoke all former Wills by me made and declare this to be my last Will.

I bequeath all my real estate unto

Mrs. Joan A. McLean
5 Bay Street
Lindsay Ont } Name and Address of person or persons to whom it is to go.

absolutely, and my personal estate I bequeath to

Mrs. Joan A. McLean
5 Bay Street
Lindsay - Ont } Name and Address of person or persons to receive personal estate* (See note).

IMPORTANT NOTE

This must be Signed and Dated by THE SOLDIER HIMSELF.

this 10th day of July A. D. 1916

Stanley L. McLean Signature of Soldier.

*N.B.—Personal estate includes pay, effects, money in bank, insurance policy, in fact everything except real estate.

Signed and acknowledged by the Testator as and for his last Will in the presence of us both present at the same time, who in his presence, at his request, and in the presence of each other have hereunto subscribed our names as Witnesses.

THE TWO WITNESSES MUST SIGN HERE

Signature of First Witness W. J. Fairfull
Address of Witness 426 Gladstone Ave Ottawa
Occupation of Witness Lieutenant - 109th Bata C.E.F.
Signature of Second Witness P. L. Peck
Address of Witness Mauder
Occupation of Witness Supt. 109th Bata C.E.F.

FORM OF WILL

I, the undersigned, of the County of ... State of ... do hereby make and declare this to be my last Will -

I possess of my real estate and

personal property

as follows to-wit:

...

to-wit, and my personal estate I bequeath to

...

...

IMPORTANT NOTE
This must be signed
and dated by
THE SOLDIER
HIMSELF.

THE TWO
WITNESSES
MUST
SIGN HERE

Occupation of Witness

Signature of second Witness

Address of witness

Occupation of Witness

U.S. ARMY
REGULATION
113-10

J.M. Rank *O/Sgt* Name **McLEAN, Stanley Lachlan.** Reg'l No. **725131**
 Unit **109th Bn.** If in perm. Corps, }
 What Unit? } Married or Single **Single.**
 Place and Date of Enlistment **Lindsay, 10th Jan 1916.** Place of Birth **Lindsay, Ont.**
 Name and Address, Next-of-Kin **Mary McLean.**
5 Bay St, Lindsay, Ont, Canada. Relationship **Mother.**

H

*M.A. 20
12.1.20
J.A.S.*

Assigned Pay Monthly \$ Payable to

Separation Allowance \$ Payable to

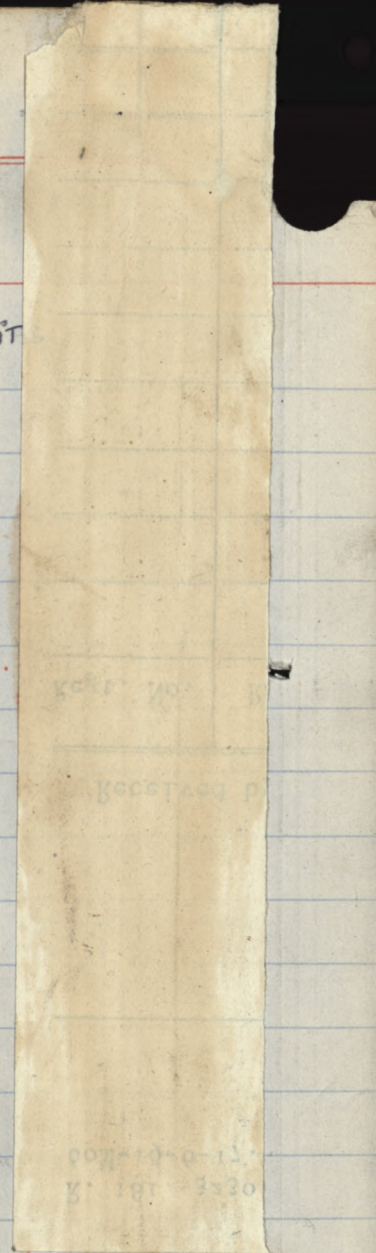
Relationship **WE. R.B. No. 8362**
 File R.L. **pte**
 Relationship **Category OR CAN**

Discharge, Date and Place Reason Character

H. W. & V., Ld.—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					
7-8-16	<i>O.C. 109th</i>	<i>App'd Prov. Sgt.</i>	<i>Osney</i>	7-8-16	<i>P.I. D.O. 220</i>
8-12-16	<i>..</i>	<i>S.O. on trans. to 124th Bn.</i>	<i>Whitby</i>	8-12-16	<i>P.I. D.O. 343</i>
9-12-16	<i>O.C. 124th</i>	<i>J.O.S. "for 109th"</i>	<i>"</i>	<i>"</i>	<i>" 265</i>
26-1-17	<i>"</i>	<i>S.O. on trans. to C.A.M.C. I.A.</i>	<i>"</i>	20-1-17	<i>" 26</i>
24-1-17	<i>"</i>	<i>Rev. to perm. grade on trans. to camp. 24th Bn.</i>	<i>"</i>	20-1-17	<i>" 24</i>
26-1-17	<i>Camp 93</i>	<i>T.O. on trans. from 24th Bn. and reported 25-1-17</i>	<i>Wed. hgt.</i>	20-1-17	<i>P.I. " 76</i>
21-2-17	<i>Do</i>	<i>S.O.S. to 14th Field Amb.</i>	<i>Do</i>	21-2-17	<i>" " 52</i>
28-2-17	<i>14th Field Amb.</i>	<i>T.O. on trans. from C.A.M.C. I.S.</i>	<i>Whitby</i>	21-2-17	<i>P.I. D.O. 81</i>
28-2-17	<i>"</i>	<i>From 14th Field Amb. for temporary duty as No 4 Sign Detachment H.Q.</i>	<i>"</i>	25-2-17	<i>" " 1</i>

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.				
25-5-17	Camb. Eng	Adm. Can. Mil. Hosp.	Bramshot	21-5-17	Pte. ^{b.h.} 39 60. N.Y.I. APPENDIX
14.6.17.	"	Adm. Woodcote Pk to b. m. Dep. B'shott	Checked	9.6.17	" 62.20 "
6.7.17.	"	Discharged "	A.F.B. 103 CHECKED 20 MAY 1916	29.6.17	" " 38 "
28 2 18	14 th Std Amb	Granted Good Conduct	Witley	10.1.18	67 1/2 13
5 3 18	bamb Gen	TOS from 14 th Std Amb.	"	Schiff 4 3.18	64 + 14 th Std Amb 61 1/2 15 of 4 3.18
21 3.18	"	sos proc O'ceas	Pt	"	20 3.18 " 80
3 4.18	bamb Gen	TOS on arrival in France	Field	20 3 18	" 20
22 4 18	6 th Std Amb	TOS from bamb Gen	Pt	"	8 4 18 " 21 bamb Gen 61 1/2 25 of 23 4 18
23.5.18	"	Granted Good Conduct Badge	"	10.1.18	" 27.
18.6.19	N.Wing ccc wit	TOS from 6 th Amb for demob	"	Witley 10.4.19	" 5
Sailing 62-F-8 d/13-5-19					
13-5-19	N.Wing ccc wit	ALL to Canada.	Pt. Witley	13-5-19	" 26
11-4-19	6 C 7 Amb	Proc to Eng	Pt. Le Havre	9-4-19	" 17.



MILITIA AND DEFENCE
 ASSIGNED PAY
 OVERSEAS CONTINGENTS

To Whom Mrs Mary McLean
 Address 5 Bay St.
Lindsay. Ont.

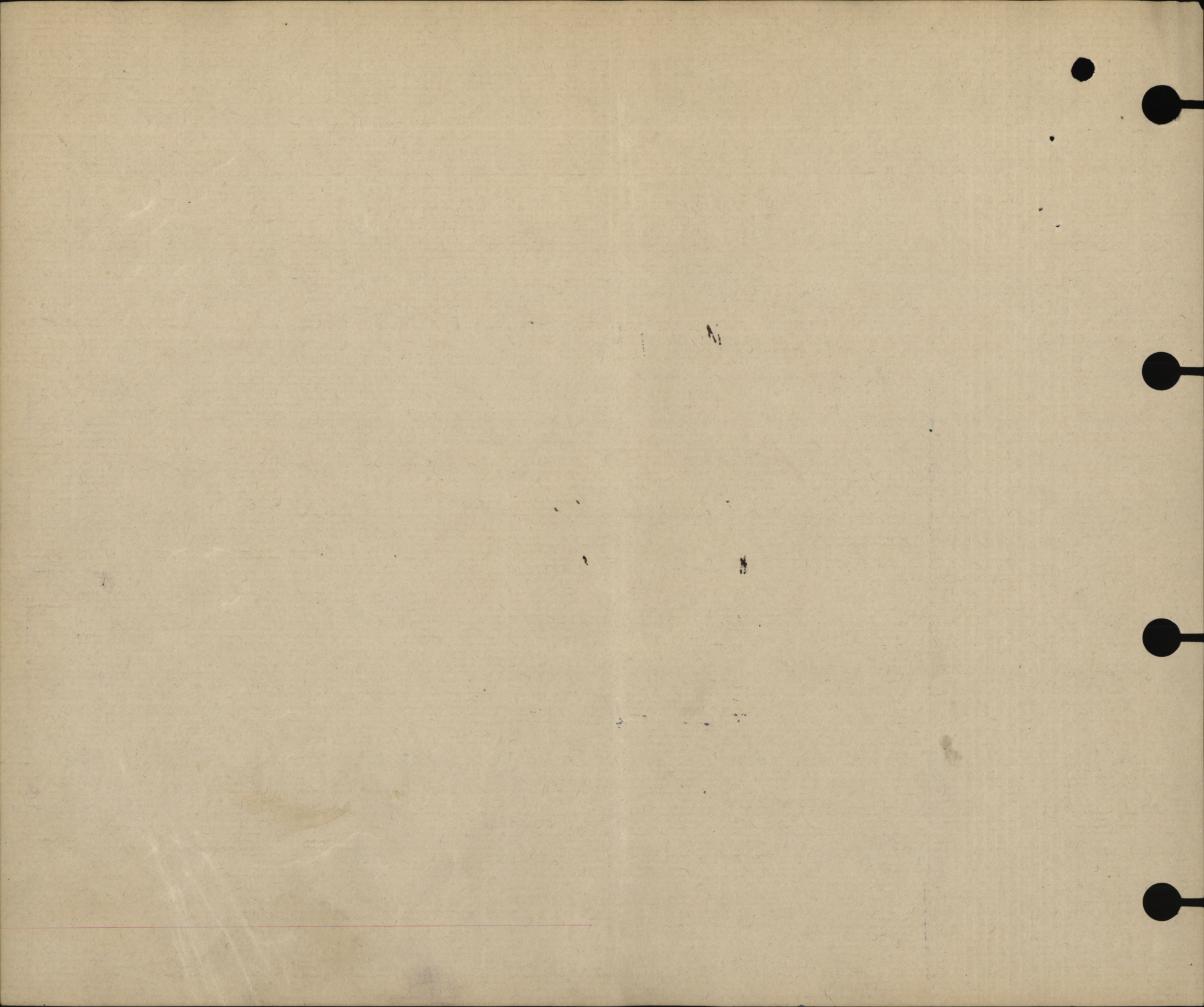
By Whom Assigned McLean. S. J.
 Regtl. No. 725131
 Rank Sgt. D. Co.
 Corps 109 Btn.

Rate \$ 15.00 **AUG 1 1916**

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				





SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2.

Mrs Mary McLeanWidowed Mother

Name of Soldier

McLean, Stanley L.
72 5137

L. L. Job 89002.-Req. 6213.

Month.	Year.	Cheque No.	Amt.	Remarks.
			25	
April	1916	J2464	25	25
May		Q. 6412	25	25
June		R5532	25	25
July		F11064	25	25
Aug.		M 14321	25	25
Sept.		E. 16324	25	25
Oct.		U 20159	25	25
Nov.		B23391	25	25
Dec.		D 26911	25	25
Jan.	1917	M 28364	25	25
Feb.		N 32123	25	25
March		m 35345	25	25
April		M 2128	25	25
May		M5493	25	25
June		N 8783	25	25
July		N 11982	25	
Aug.		V 15103	25	B
Sept.		F 19481	25	B
Oct.		J 21024	25	Hd
Nov.		T. 23716	25	B
Dec.		Z 25250	25	Bu
Jan.	1918		25	
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE
SEPARATION ALLOWANCE
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier.....

PAYMENTS.

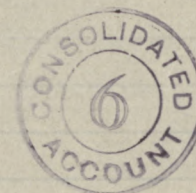
Month.	Year.	Cheque No.	Amt.	Remarks.
Aug.	1918			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1919			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1920			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				

SEPARATION ALLOWANCE

Name *Mrs Mary McLean* Name of Soldier *McLean, Stanley L*
 Address *5 Bay Street* Regtl. No. *725731,*
Lindsay Rank *Serjt.*
Ont. Corps *109th Battaⁿ*
 Relation to Soldier } *Widowed* To what Corps belonging }
 wife, child or mother } *Mother* when called out } *✓*

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
Apl.				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March		<i>m2896</i>	<i>25 - 25</i>	



SECRET

1. [Illegible]

2. [Illegible]

3. [Illegible]

4. [Illegible]

5. [Illegible]

6. [Illegible]

SECRET 21 12-01-44

SECRET

7. [Illegible]

8. [Illegible]

9. [Illegible]

10. [Illegible]

11. [Illegible]

12. [Illegible]

13. [Illegible]

14. [Illegible]

15. [Illegible]

16. [Illegible]

17. [Illegible]

18. [Illegible]

19. [Illegible]

20. [Illegible]

21. [Illegible]

22. [Illegible]

23. [Illegible]

SECRET

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2

Mrs Mary McLean

PAYMENTS.

Name of Soldier

725731

McLean. S. J.
Sgt. "D Coy" 109 Btn.

L. L. Job 310.—Req. 6574.

\$ 15.⁰⁰

Remarks. AUG 10 1916

A.S.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.		W 15195	15	
Sept.		U 18745	15	
Oct.		U 23999	15	
Nov.		J 28887	15	
Dec.		T 30325	15	
Jan.	1917	J 39799	15	
Feb.		J 45805	15	
March		B 51693	15	15-E (813- end)
April		X 3303	15	15-B
May		X 9684	15	15-R
June		W 18485	15	D
July		X 22779	15	C2
Aug.		K 30495	15	W
Sept.		J 37670	15	6
Oct.		P 43254	15	
Nov.		J 50328	15	
Dec.		Z 58869	15	256
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

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.				

O.G. 3
D.A. H

M 1083

WAR SERVICE BADGE,
CLASS No. *1*

SHORT FORM.
PROCEEDINGS ON DISCHARGE.
(Demobilization.)

298626

1. No.	725131	
2. Rank.	Private	
3. Name.	MCLEAN STANLEY LACHLAN	
4. Unit.	No 6 Canadian Field Ambulance	
5. Date of Discharge	24-5-19	Place Montreal
6. Reason for Discharge	Demobilization	
7. Authority.	R.O. 1420 DD#4 D.O. Pt. II-162.	
8. Proposed Residence after Discharge	Box 1026 Lindsay, Ont.	
9.	CERTIFICATE TO BE SIGNED BY SOLDIER.	
	I hereby acknowledge that at the undernoted place and date I received my discharge Certificate	
M. F. W.?	999 Montreal	
	MAY 24 1919	
	<i>St. McLean</i> Signature of Soldier.	
10.	CONFIRMATION.	
	The discharge of the above named man is hereby confirmed.	
Place	H.M.T. NORTHLAND	
Date	EMB. LIVERPOOL 13 MAY 24 1919	
	DISEMB. HALIFAX 23 5-19	
Signature	<i>L. G. ...</i> O. C. Discharging Unit Major Commanding Dispersal Station "F"	

SHORT FORM
PROCEDURES ON DISCHARGE
(Demobilization)

1. Name of Soldier: _____

2. Grade: _____

3. Unit: _____

4. Date of Discharge: _____

5. Place of Discharge: _____

6. Reason for Discharge: _____

7. Authority: _____

8. Proposed Discharge after Discharge: _____

CERTIFICATE TO BE SIGNED BY SOLDIER

I hereby acknowledge that at the date and place I received my discharge Certificate

M. E. W. J.

MAY 21 1919

Signature of Soldier

CONFIRMATION

The discharge of the above named man is hereby confirmed.

Place

Date

(O. C. Discharge Unit)

LIST OF DISCHARGE DOCUMENTS

Medical Report	1
Medical History Sheet	2
Procedure of Medical Board	3
Dental History Sheet	4
Medical Report	5
Medical History Sheet	6
Medical Report	7
Medical History Sheet	8
Medical Report	9
Medical History Sheet	10
Medical Report	11
Medical History Sheet	12
Medical Report	13
Medical History Sheet	14
Medical Report	15
Medical History Sheet	16
Medical Report	17
Medical History Sheet	18
Medical Report	19
Medical History Sheet	20
Medical Report	21
Medical History Sheet	22
Medical Report	23
Medical History Sheet	24
Medical Report	25
Medical History Sheet	26
Medical Report	27
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Medical History Sheet	88
Medical Report	89
Medical History Sheet	90
Medical Report	91
Medical History Sheet	92
Medical Report	93
Medical History Sheet	94
Medical Report	95
Medical History Sheet	96
Medical Report	97
Medical History Sheet	98
Medical Report	99
Medical History Sheet	100

LIST OF DISCHARGE DOCUMENTS.

Attestation Paper, Triplicate.....	Militia Form W. 23
or Particulars of Recruit.....	Militia Form W. 133
Field Conduct Sheet.....	Militia Form W. 178 or A.F.B. 122
Casualty Form.....	Militia Form W. 54 or A.F.B. 103
Last Pay Certificate.....	Militia Form W. 44
Certificate that missing documents are unobtainable.....	
Medical History Sheet.....	Militia Form B. 313 or A.F.B. 178
Proceedings of Medical Board.....	M.F.B. 227, A.F.B. 179 or A.F.A. 45
Dental History Sheet.....	Militia Form B. 465
Medical Report.....	M. F. W. 129 or D. M. S. 1375
Regimental Conduct Sheet.....	Militia Form B. 263
Company Conduct Sheet.....	Militia Form B. 263a

1. Triplicate Attestation Paper (M.F.W. 23), or Particulars of Recruit (M.F.W. 133).
2. Casualty Form (A.F.B. 103).
3. Medical History Sheet (M.F.B. 313 or A.F.B. 178).
4. Proceedings of Med. Board (M.F.B. 227 or M.F.W. 129)
5. Dental Certificate (D.A.D. 5009a).
6. Field Conduct Sheet (M.F.B. 122)
7. Proceedings of Medical Board (M.F.B. 218a)
8. Discharge Certificate (M.F.W. 129) (Enclosed in special envelope (260M)).
9. Copy of Discharge Certificate (M.F.W. 39a).
10. Dispersal Certificate (D.D. 2)
11. Equipment Statement Q.M.G. Form (D.O.S. 2) and Clothing.
12. Last Pay Certificate (P. 851).
13. Pay Book (P.B. 64)
14. War Service Grantee (Form M.F.W. 2595).
15. Sundry Documents.

Group B
 Checked by No. 3
 Date 11/5/19

725131 Sgt. McLean, S.L. 109th Battalion, C.E.F.

Will detached by Regt. Paymaster.

J. J. Williams
CAPT.
Paymaster, 109th Overseas Battalion, C.E.F.

77354

no card

- 20 -

Perforated sheet for Will from Pay Book of Reg.

No. 725131

Name Stanley Jackson MacLean

Unit 109th Bn. C.E.F.

Military Will.

*at the event of my death
I hereby bequeath all my
personal belongings and
effects to my mother
(Mrs. Mary MacLean #5 Bay St.
London Ontario Canada.*

(Witness)

Pete R. Sandcock

725131.

Signature *Stanley J. MacLean*

Rank and Regt. *Lt. 109th Bn.*

Date *11-10-16.*

Faint, illegible text at the top of the page, possibly bleed-through from the reverse side.

A large, rectangular, yellowish-tan area in the center of the page, possibly a piece of tape or a large stain. It contains very faint, illegible markings.

Casualty Form—Active Service.

Regiment or Corps C.A.M.C.

Rank Pte Surname McLean Christian Name Stanley Lachlan

Religion Age on Enlistment years months

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

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

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

Occupation Signature of Officer

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
		Embarked ...			
		Disembarked			
<u>23-3-18</u>	<u>66RD</u>	<u>Left Base for 66RB.</u>		<u>23-3-18</u>	<u>MR</u>
<u>23-3-18</u>	<u>66RB</u>	<u>arrived at 66RB</u>		<u>23-3-18</u>	<u>MR</u>
<u>13-4-18</u>	<u>6CF Amb.</u>	<u>Posted to 6CF Amb.</u>		<u>7-4-18</u>	<u>B213 Pt 26</u>
<u>13-4-18</u>	<u>6C7 Amb</u>	<u>705. 6th C7 Amb from C.A.M.C. Gen</u>		<u>8/4/18</u>	<u>B213 423 4/18</u>
		<u>Auth 9DMS 9909 of 8/4/18</u>			<u>R12 or 21/4/24</u>
<u>11-5-18</u>	<u>do</u>	<u>Awarded G. C. Badge</u>		<u>10/1/18</u>	<u>B213 P203 1/18</u>
<u>8-3-19</u>	<u>—</u>	<u>Granted 14 days leave to UK</u>		<u>7 3/4</u>	<u>B 213 6.0.0.13 8/19/19</u>
<u>9/4/19</u>	<u>O C Emb</u>	<u>Proceeded to England</u>		<u>9/4/19</u>	<u>P 1/17/1919</u>
	<u>Cam</u>	<u>Embarked Hrs</u>			

Stanley Lachlan
for Lt.-Col., A. A. G.
Canadian Section, G. H. Q. 3rd L.

(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.

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				
13-5-19	<i>J. G. W. W. W.</i>	S. O. S. ON PROCEEDING TO CANADA	<i>W. W. W.</i>	13-5-19	<i>H. H. 27 G. W. W.</i>
<p>T. H. M. T. → NORTHLAND → EMB. LIVERPOOL 13-5-19 DISEMB. HALIFAX 23 5 19</p>					
11-6-19	o/s	T.O.S. DD#4 Disp. Stn. "F"	Montreal	13-5-19	D.O. Pt. II-162
11-6-19		S.O.S. DD#4 Demob.	"	24-5-19	D.O. Pt. II-162 R.O. 1420.
			<p><i>G. W. W. Pletcher</i> Lieutenant <i>of</i> Assistant Adjutant, District Depot No. 6.</p>		

W. W. W.
H. H. 27
G. W. W.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book. 210	Regimental No.	Rank.	Surname.	Christian Name.
	725131	Plt	McLean	J. F.
Year 1917	Unit.		Age.	Service.
	C. A. M. C.		27	1 1/2

Station and Date.
B. M. H.
May 20/17

Disease Acute Appendicitis.

Complaint - (1) Pain in abdomen.
(2) Nausea & vomiting.

Onset sudden - May 20/17.

Previous History - had one similar attack, year ago - ill 3 weeks.

Present Illness began suddenly May 20/17 with pain in abdomen, nausea and vomiting. These became more severe during the day and he was sent to B. M. H. in evening of May 20/17.

Physical Examination.

Patient well nourished. Tongue clean.

Abdomen distended slightly. Resonance fairly freely with respiration but it is less than left. Rigidity of it rectus & tenderness in lower part. No vomiting since admission but patient nauseated.

No pain upper half abdomen operation.

Other anaesthesia. Rt. Rectus incision. Exposed 1 1/2" of appendix inflamed. Distal 1 1/2" contracted & more anemic. Serosal thick, many old adhesions & Serosal oil.

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

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

Appendectomy. Abdomen closed. P. McLean P.T.O.

Station
and Date.

Os 24 H

May 21/17

Condition satisfactory.

Given S. S. evans good result

May 23/17

Alt. F. in 3 i. Good result.

May 27/17

H as pain and injection - L. eye

Seen by Capt Wright.

TX 3M. Also Puffin to 2.1.17

May 26/17

Very much improved.

Eye much better.

General condition satisfactory.

June 4/17

Wound healed well.

Rec. transfer to Comalcount

Hospital at Exeter.

R.F. Slater

Capt. C.A.M.C.

CLINICAL CHART.

Army Form B. 181

Corps 14th Can. Field Amb.

(To be attached to Case Sheet.)

Military Hospital Bramshott

No. 725131

Rank and Name Plt. McLean

Age 25

Service 17/12

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

Dates of Observation	20		21		22		23		24		25		26		27		28		29		30		31		1		2		3		4		5		6	
	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time		
Days of Disease																																				
Temperature Fahrenheit	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.		
107°																																				
106°																																				
105°																																				
104°																																				
103°																																				
102°																																				
101°																																				
100°																																				
99°																																				
98°																																				
97°																																				
Pulse per Minute	22	60	60	68	76	78	76	86	88	81	80	76	80	96	85	84	68	74	76	76	76	68	68	76	76	76	68	68	70	70	72	72	70			
Respirations per Minute	20	18	18	18	20	20	20	20	20	20	20	20	20	24	20	20	18	18	18	20	20	18	18	18	18	18	18	18	18	18	18	18	18			
Motions per 24 hours	op.	0				0					7		7		7		7		7		7		7		7		7		7		7		7			

Opium
Opium

Castor oil 3/4

June

Signature _____ In charge of case.



725.131

ORIGINAL MEDICAL HISTORY SHEET ORIGINAL

4476M^c

Surname McLean

Christian Name Stanley Jackson

Examined { on 10th day of January 1916
at Sudbury

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

Birthplace { City or Town Sudbury
County Ontario

Apparent age 25 years

Trade or occupation Druggist

Height 5 Feet 7 1/2 Inches

Weight 133 Lbs.

Chest measurement { Minimum 32 inches.
Maximum expansion 37 inches.

Physical development good

Small-Pox Marks none

Vaccination Marks { Arm Right none Left Two
Number Two

When Vaccinated last Feb. 2nd 1916

(a) Marks indicating congenital peculiarities or previous disease none

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

Date	Result	VACCINATIONS.
2.2.16	Good	J. McCulloch M.O.
19.4.17		Capt. O.A. M.O.

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
18.4.16	Good	J. McCulloch M.O.
25.4.16	Good	J. McCulloch M.O.
2.5.16	Good	J. McCulloch M.O.

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

Enlisted on 22nd day of Jan. 1915 at Sudbury

	CORPS.	REG'T NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>109th Batt.</u> <u>C.F.F.</u>	<u>725131</u>		<u>10.7.15</u>
Transferred to.....	<u>124th OVERSEAS BATTALION C.E.F.</u> <u>C.A.M.C.</u> <u>14th Canadian Field Ambulance.</u>			<u>20.1.17</u>

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>Witley</u>	<u>19.4.17</u>	<u>SAB</u>	<u>IdH per W.C.S. 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.

Surname *McLean* Christian Name *Stanley Jackson*

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>Biaurichott.</i>		<i>20</i>	<i>5</i>	<i>17</i>	<i>8</i>	<i>6</i>	<i>17</i>	<i>Appententia</i>	<i>19</i>	<i>Acute Appententia. Mercury. Free. transfer to Epsom.</i>	<i>R.F. Slater Capt. C.A.M.C.</i>
<i>M & Co Epsom</i>		<i>8</i>	<i>6</i>	<i>17</i>	<i>29</i>	<i>6</i>	<i>17</i>	<i>do.</i>	<i>27</i>	<i>Convalescence since June 8th has done well discharged to Command Depot D.I.</i>	<i>Amstrong "G" DIVISION. CAPT. C.</i>

Date of Enlistment

1-3-16

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

Aug 1/16

OVERSEAS CONTINGENTS



8743

RATE OF SEPARATION ALLOWANCE

25	30 ⁰⁰		
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RATE OF ASSIGNMENT

15			
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FL 9 Mc 21 SK.

PARTICULARS OF SEPARATION ALLOWANCE

No. 725131.
 Rank Sgt. Promoted Reverted Discharge
 Soldier's Name S. L. McLean.
 Battalion 109 Battn. D. Co.
 Beneficiary Mrs Mary McLean
 Relationship Widowed Mother
 Address

PARTICULARS OF ASSIGNMENT

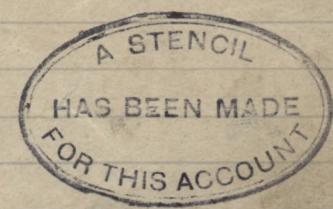
Name Mrs Mary McLean.
 Address 5 Bay St, Lindsay. Ont.
 Change of Address
 1
 2
 3
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
1917				12478.57	
Dec 31		550	255	805	
Jan 18	G 61749	25	15	40	F
Feb	A 71270	25	15	40	
Mar	M 92994	25	15	40	
Apr	J 1557	25	15	40	
May	B 13794	25	15	40	
June	J 26082	25	15	40	
July	L 32845	25	15	40	M. A. W. 2554 returned OK 21-11-18
Aug	M 36173	25	15	40	
Sept	A 48669	25	15	40	
Oct	J 55914	25	15	40	
Nov	P 61392	25	15	40	
Dec	L 67864	45	15	60	
Jan.	V 70226	30	15	45	
Feb.	Z 81893	30	15	45	
Mar	K 84414	30	15	45	
Apr	N 891	30	15	45	
May	E 5481	30	15	45	
		1020	510	1530	
A/c Closed 31-5-19					
Ret'd per Montreal					
Date 23/5/19 M.F.W. 187 29/5/19					
Clerk J. M. M. M.					

M. F. W. 128
400M-6-17-1772-89-1141
L. L. 22220-M. & D. 7493.

M 8# 4

MRO L.P. 86970 to Destroy 29/19 RW



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

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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
------	------------	------------	------------	-------	---------

M. F. W. 128
400M-6-17-1772-38-1141
L. L. 22220-M. & D. 7493.

Mc 988
gld

AUDITOR PAYMASTER

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

M. OR S. *Mc*

REGT. NO. *125131* RANK *Pte* NAME (IN FULL) *MCLEAN STANLEY*

ORIGINAL UNIT C.E.F. *109th Bn* IF IN P.F. WHAT UNIT? *109th Bn*

RELATIONSHIP *MOTHER*

DATE EFFECTIVE *1-6-19*

ASSIGNED PAY \$ *15.00* DATE EFFECTIVE *1-6-19*

PAYABLE TO *Mrs Mary McLean* ADDRESS *11 Bay St. Lindsay Ont.*

RELATIONSHIP ANY CHANGE IN ASSIGNEE OR ADDRESS *MOTHER*

DISCHARGED *Montreal 24/5/19* PLACE *Demol* DATE *24/5/19* REASON *Demol* AUTHORITY *Dat 62 P-10-B SUPP 2 N/R 58* IF ENTITLED TO POST DISCHARGE PAY



MONTH	PAY AND F.A.		OTHER CREDITS		TOTAL CREDITS		ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY	REGIMENTAL 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	\$	\$	\$	\$	\$	\$	\$	
<i>11/3/19</i>				<i>35.00</i>													<i>929</i>	<i>929</i>	<i>929</i>	<i>Northland</i>
<i>28/2/19</i>	<i>28</i>	<i>1.00</i>	<i>30.80</i>	<i>70.00</i>		<i>135.80</i>	<i>BOAT TRAVEL</i>	<i>268.13</i>	<i>4.87</i>	<i>5.00</i>	<i>101.64</i>	<i>15.00</i>		<i>440</i>		<i>1309</i>	<i>440</i>	<i>1309</i>	<i>Demol</i>	
			<i>SA 24.00</i>	<i>24.00</i>		<i>24.00</i>									<i>SA 30.00</i>	<i>30.00</i>	<i>6.00</i>	<i>6.00</i>	<i>TBR</i>	
						<i>159.80</i>										<i>170.20</i>	<i>11.20</i>	<i>11.20</i>	<i>Balance</i>	
			<i>Other Credits</i>	<i>W. S. C. S. A.</i>	<i>Total</i>				<i>War Service Gratuity</i>					<i>Other Charges</i>	<i>W. S. G. S. A.</i>	<i>Total</i>		<i>Balance Soldier Dependant</i>		
			<i>430</i>	<i>180</i>	<i>600</i>									<i>100</i>	<i>70</i>	<i>70</i>	<i>1353</i>	<i>180</i>		
														<i>440</i>		<i>540</i>				
														<i>600</i>		<i>600</i>	<i>34460</i>	<i>174</i>		
<i>24.6.19</i>														<i>70</i>	<i>60</i>	<i>130</i>	<i>37460</i>	<i>114</i>	<i>918513</i>	
<i>24.7.19</i>														<i>70</i>	<i>30</i>	<i>100</i>	<i>40460</i>	<i>84</i>	<i>1079472</i>	
<i>24.8.19</i>														<i>70</i>	<i>30</i>	<i>100</i>	<i>131160</i>	<i>51</i>	<i>1288292</i>	
<i>24.9.19</i>														<i>64</i>	<i>24</i>	<i>8860</i>	<i>70</i>	<i>130</i>	<i>1538447</i>	
<i>24.10.19</i>														<i>70</i>	<i>30</i>	<i>100</i>			<i>1538448</i>	
															<i>600</i>				<i>1644367</i>	

"Man Deceased"
Have all future payments made payable to Mrs. Mary McLean (auth. A.P.-12478-5-7 dated 15/9/19)

Final

Cheques for 24/7/19 sent to 11 Bay St. and Soldier's mate payable to Mrs. Mary McLean.

