109th OVERSEAS BATTALION, C. E. F.

Original

ATTESTATION PAPER.

No. 657347

162nd ~~O. S. Batt'n, C. E. F.~~ ORIGINAL

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? — Russell
1a. What are your Christian names? — Thomas Albert
1b. What is your present address? — Dorset, Ontario
2. In what Town, Township or Parish, and in what Country were you born? — Haliburton Dist. Ontario
3. What is the name of your next-of kin? — James Russell
4. What is the address of your next-of-kin? — Dorset, Ontario Canada
4a. What is the relationship of your next-of-kin? — Father
5. What is the date of your birth? — Decr. 22nd 1895
6. What is your Trade or Calling? — Bushman
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? If so, state particulars of former Service. — No
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, Thomas Albert Russell, 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.

Thos A Russell (Signature of Recruit)

Date Jan 15th 1916. W. J. Haight (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Thomas Albert Russell, 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.

Thos A Russell (Signature of Recruit)

Date Jan 15th 1916. W. J. Haight (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 Parry Sound this 15th day of January 1916.

J Arthur (Signature of Justice)

A Coe

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

Description of Thomas A. Russell on Enlistment.

Apparent Age 20 years 1 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 6 3/4 ins.

Chest measurement.
- Girth when fully expanded 37 ins.
- Range of expansion 4 ins.

Complexion fair

Eyes blue

Hair dark brown

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

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

no.

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 January 15th 1916.

Place Camp Sarnia

R. S. Porley Capt. & Adjt.
Medical Officer.

*Insert here "fit" or "unfit."

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

CERTIFICATE OF OFFICER COMMANDING UNIT.

Thos. A. Russell 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. Williams Capt.
(Signature of Officer)

Date Jan 15th 1916.

RUSSELL THOMAS ALBERT Pte 105-7347 162nd Bn. (2 Ld.)

O. H. M. S.

Med. Unfit.

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2 PROCEEDINGS ON DISCHARGE (M. F. W. 218 OR A. F. B. 268)
PARTICULARS OF CHARACTER (A. F. W. 3226)
1 COPY OF PARCHMENT DISCHARGE CERTIFICATE (M. F. W. 39A)
DENTAL CERTIFICATE ON DISCHARGE (C. A. D. C. 5009)
UNIT INDEX CARD (M. F. W. 71 OR 192)

1 Misc - 1
2 Eng Med Bds
1 MFW 67
1 B 192
Medical Sheets
A.F.B. 1237 - 1
2 ADD
Hearing Bds
1/9/22

M. F. B. 270.
850M-5-18
H. Q. 1772-39-67

28964

482279

39 - 15
12 - 15
9 - 16
3

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

CASUALTY
READMITTED
O.S.

ADMITTING CARD.

Regt. No. 653347 A. & D. No. T 26

Rank Pte

Name Russell J. A.

Corps 3rd Aust. M. Depot (21st Aust. B.)

Religion Pres Age 23

M. H. Rec'd M. H. Requested M. H. Ret'd

Disease Painful Stump 2nd Finger Rt Hand

Admitted 9-NOV 1917 10+

Discharged 14 JAN 1918 Di 3rd C.C.D.

Place in Hospital 12

Transferred –

Results

24/12 10/12

P.T.O.

Yes

REMARKS:

MEDICAL HISTORY SHEET.

Requested			
From	Date	Reply	Date
1			
2			
3			
4			

Orig. Dup. Recd. from Gen. C.C.D. 9/11/1917

Orig. Dup. Sent to 11/1/19 18

Dup. from Regr. this Orig. Dup. / /19

Ward

WILLIAM 1918

Frederick Shirley

649-R-48D3

Co/

SURNAME. Russell

CHRISTIAN NAMES Thomas Albert

REGL. No. 657347 RANK Pte.

UNIT ~~162nd~~ ~~109th~~ 21st Bn.

FORMER CORPS Nil.

CARD NO. 2

505 Dis 5-3-19
Dmed. Medit
D.O 62 of 3-3-19
#2 Disch Depo

NEXT OF KIN.

NAMES IN FULL Russell, James.

RELATIONSHIP TO SOLDIER Father.

ADDRESS Dorset, Ont.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada. Haliburton Dist. DATE Dec. 22nd 1895.

PLACE OF ATTESTATION Parry Sound, Ont. DATE Jan. 15th 1916.

Transf. from 162nd Bn. to 109th Bn. Auth. O/S. 28/7/16. 488/30

N.R. 109th Bn. 13/7/16.

R16. 9/2/19

369/44 Ote.

Sailed from Halifax 23-7-16. Per S.S. Olympic

MARRIED SINGLE Yes. WIDOWER

TRADE OR CALLING Bushman. RELIGION Presbyterian.

DESCRIPTION.

APPARENT AGE 20. YEARS 1. MONTHS

HEIGHT 5. FEET 6 3/4. INCHES

CHEST MEASUREMENT 37. INCHES EXPANSION 4. INCHES

COMPLEXION Fair EYES Blue HAIR Dark Brown.

DISTINGUISHING MARKS nil.

MEDICAL EXAMINATION. PLACE Parry Sound. DATE Jan. 15th 1916.

Present address. not stated.

93P.

Number 657347 Rank Pte

Surname RUSSELL

Christian Name Thomas Albert

Units 21st Bn. Can. Inf. Theatre of War France.

Date of Service 6-10-16.

Remarks Cutler.

Latest Address ~~Dorset~~, Ont

Roll No B. Page 9699

200m.-2-21.M.

Port, ship, and date of arrival

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

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

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

Readmitted O.S. Disability

ADMITTING CARD.

Regt. No. 657347 A. & D. No. T 2570

Rank Pte

Name Russell L. A.

OPERATION 6/9/17

Corps 6th Res. Bde B

Religion Pres Age 22

M. H. Rec'd M. H. Requested M. H. Ret'd

Disease S.W. Middle finger Rt

Admitted 1 - AUG 1917 Atti

Discharged 13 OCT 1917 D + 3rd Lab Co

Place in Hospital Ravens Croft 1/11

Transferred

Results

P.T.O.

REMARKS:

MEDICAL HISTORY SHEET.

	Requested From	Date	Reply	Date
1				
2				
3				
4				

Orig. ~~Dup.~~ Recd. from 6th Resbn 1/8/1917

Orig. ~~Dup.~~ Sent to AK 13/10/17

Recd. from Regr. this Orig. Dup. / /19

Ward

13 OCT 1917

Orig Rec'd

R. 149.

Name RUSSELL Thomas Albert Rank Private Reg. No. 657347 JWS

Unit 21st Battalion R.L-25-R-3161

Next of Kin Canada James Russell, Dorset, Ontario, Canada

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
21-1-17	4. Gen Hosp Camiers		GSW Rt Arm & Lt Leg	A428		8225
6-2-17	Bradford War Hosp	Bradford	Do.	B273.		31-1
8-3-17	Do Can Con Hosp W.P.	Epsom	Do.	B295.		
20-4-17	Discharged		Do	B413.		
2-8-17	Can Inf Hosp	Eastbourne	SW. middle finger Rt. (old wd)	112.	6th Res. Bn	
13-10-17	Discharged JWS		do	C37		164
10-11-17	14 Can C.H.	Eastbourne	Wounded Gunshot 2nd Finger	C.63.		5767
14-1-18	Discharged JWS		do. Rt Hand	C112.		2548
29-5-18	5. Can Field Amb		Dermatitis	C233		31103.
2-6	Disch. to duty. JWS		Do	C235		31255

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
28-8-18	Wounded & Missing			A352		PL 1100.
Now rptd.	Prisoner of War		Sound	A352	4666	82-16-10-18 PW 78
6-12	Released & Arrived at					
	Rest Camp	Dover.		B394	9816	PW 402

Delay 223 to Pase 14-10-18

No. 637347 RANK Pte NAME Russell Thos. A.

T. O. S. 15-1-16 (DO 15/18-9-16) UNIT 162nd Battalion

M. D. 2

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915 Jan 16	1916 Jan 31	✓		
	Feb	✓		
	Mar	✓		
	Apr	✓		
May 1	May 28	✓	Trans to 109th Bn 25/5/16	DO 55 of 29-5-16

D.M.S. 1300.

Surname	Christian Name or Names	Reg. No.
Russell	T.A.	657347

Rank	Unit	Co.	Troop	Batty
Pte	Depot. 21st Bn	(21) 6	12th Res.	E. Ont. (6R.)

Hospital: 4 Gen Ca,iers 21-1-17 — Date of Admission: 21 E O R

Transferred: Bradford War Hosp. — Hosp. 6-2-17

Epsom Conv. — Hosp. 8.3.17.

Eastbourne Can. Mil. — Hosp. 2.8.17.

14 Can Gen. Eastbourne. — Hosp. 10.11.17.

Diagnosis: G.S.W Rt Arm & Lt Leg

(1) Later Diagnosis (if changed): S.W. Mid. Finger Rt. (Old)

(2)

(3) Painful stumps, 2nd finger R Hand, Ho

Additional Diagnosis: if more than one state present

Dermatitis ad.

DISPOSITION — Date

C.L. 31-1-17 A428

" 15-2-17 B243

13.3.17. B295.

7.8.17. B413.

" 17-10-17 C.37

16.11.17. C 63.

18.1.18 C 112.

6.6.18 a 233

8.6.18 a 235

23.10.18 a 302 ① Rpt ~~wounded missing 28.8.18~~

Now. Repr. Prisoner of War (Sound)

13.12.18 B394 Now repatriated and arrived at Dover - 6.12.18.

Wisdr 20.4.17.

REMARKS

Dis. 13-10-17

Dise. 14.1.18.

Dis. 2.6.18

A.M.D. 2 DEPT.

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

R.

EPITOME OF HOSPITAL TREATMENT.

	Hospital	Adm
1.	5. 6. 7. Aust.	29. 5. 18.
2.		
3.		
4.		
5.		
6.		
7.		

*Name RUSSELL Thomas Albert Rank Pte. Regtl. No. 657347

Fyle Depot 24-Ru-85-

Original unit Present unit 21 Res. M. or S. Age 22 Religion Presb. Ref. H.Q.

Port, ship and date of arrival Halifax Carmania 8-2-19

Next of kin Father James Russell Dorset Ont.

Address on leave Same

Address on discharge Same

Transportation issued ~~No~~ Yes Date 5.3.19 ~~Dorset Ont.~~ Huntsville Character on discharge

Previous occupation Bushman Date and place of enlistment Parry Sound Jan 15-16

Diagnosis G.S.W. right middle finger G.S.W. left thight, Date of Medical Boards 27.2.19

Date.	Remarks.	Pt. 2 Order No.
T.O.S.	Posted to Cas Co (Ex Camp) 8-2-19	
1-2-19	Leave & Subs from 13-2-19 to 27-2-19	45
5-3-19	SOS DISCHARGED "MED.UNFIT" entitled to 183 days WSG	62

*—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

Forms
I. 1237
11

7-3-17

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
T.C.26	657347.	Pte.	Russell.	Thomas.
Year	**Unit.**		**Age.**	**Service.**
1917.	21st Canadians.		22.	1 yr. 4/12.

Station and Date. War Hospital, Bradford.

Disease G S wound rt arm & finger 2nd & left thigh

Feb 7/17 Went to France Dec/16, wounded Jan 17/17 by shrapnel while advancing

Exam. (1) Wound of entry (Supine) 3rd of rt elbow & exit 2 inches below olecranon of ~~[illegible]~~ ulna.
(2) Lacerated wound over terminal joint 3rd digit left hand, joint involved. (3) Three other wounds posterior side of middle of left thigh to back of upper third.
per H and Dressed CHP

For X ray 2nd finger rt hand. X Ray report copy "Fracture of 2nd phalanx. Third phalanx & joint not involved, but portion of bone missing in 2nd phalanx." (See diagram.)

Feb. 16. Transferred to Convalescent Camp, Weybridge

Mch/17 Sound healed

For Canad. Conv Hosp.

Mar 1st Seen HO. J Phillips Major RAMC

Mar 4th Transferred to Canadian Convalescent Hosp. Epsom

Certificate of return Case-Sheet to Bradford War Hospital.

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

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

P.T.O.

Station and Date.	

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

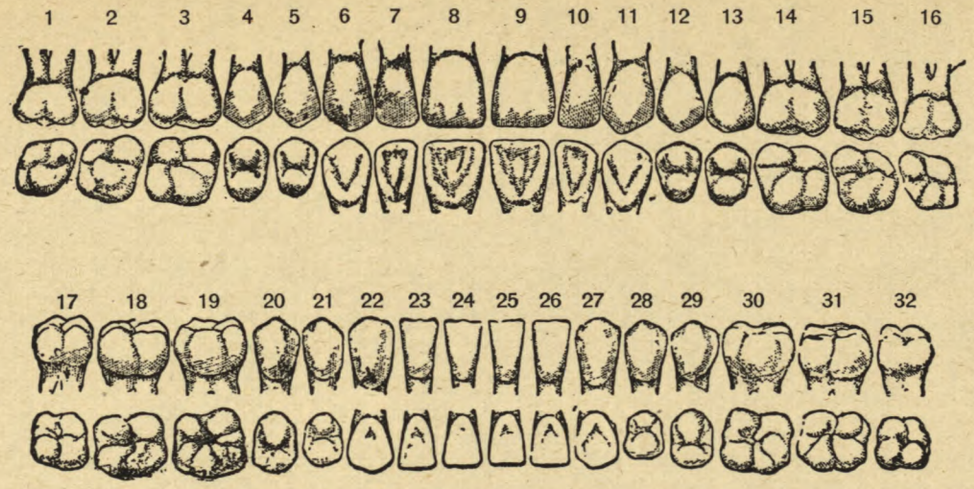
District 2

Name of Soldier Russell Thomas Albert

Rank Pte.

Regiment

No. 65-7347



INSTRUCTIONS

1. On examination the condition of patient's mouth to be marked on diagram in red ink.
2. On first line of report record of same to be made in red ink.

Only such entries to be made on this sheet as will show:

1. Condition on examination (in red).
2. Condition on leaving Canada.
3. Condition on discharge.

	Date		Amalgam	Temporary Filling (a) G. P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhœa	Synthetic Porcelain	Extracting	Dentures U	Dentures L	Dentures P	Gold Clasp	Gold Filling	Crowns Gold	Crowns Porcelain	Bridge Work	Operator	Military District	Remarks
Condition on first Examination																							
Discharge Exam. At Exhibition Camp																							
FEB 27 1919																							
Date.																							
											Filling												
																					W A Semple Major		

Certificate issued for

M.F.B. 2000a.—6-18. 1772-39-950.

C.A.[redacted]5009 A

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

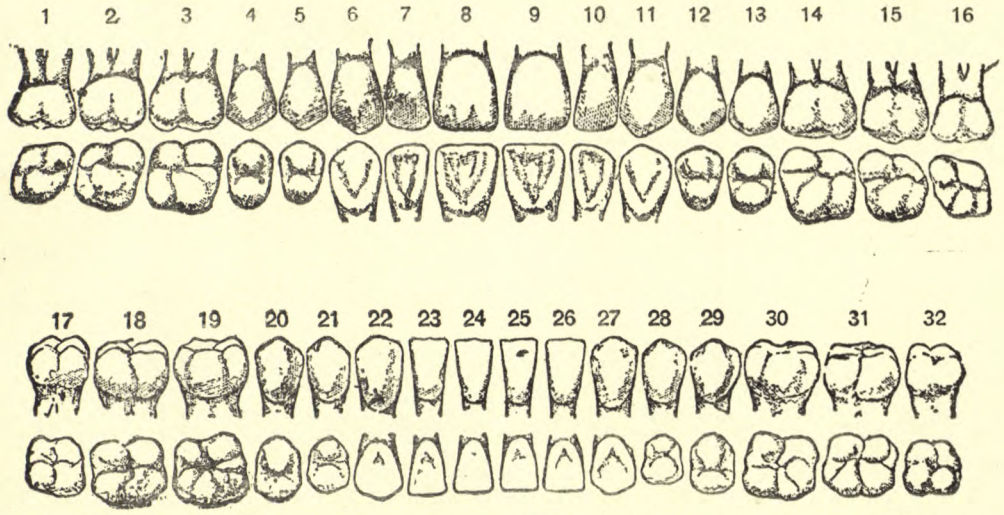
DIRECTIONS TO DENTAL OFFICERS

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

NAME OF SOLDIER (Block Letters) RUSSELL, T. A. MD2

REGIMENT 109 BN RANK PTE No. 657347

Date of Examination in England 16/1/19 | Date of Examination in France



PRESENT DENTAL REQUIREMENTS

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

HAS HE EVER REFUSED DENTAL TREATMENT?

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

- (a) In Canada
- (b) In England
- (c) In France No.

KINMEL PARK, NORTH WALES.

Signature of Dental Officer C C Graham Capt

M. D. 2

No. 56

M.F.W. 44.
1188 (D.P.) 250M.-12-18.
1772-39-903.

CANADIAN EXPEDITIONARY FORCE.

LAST PAY CERTIFICATE

Regimental No. 657347 Rank Pte. Name Russell T. A.
(Surname first)

DISCHARGED

Unit #2 D.D. who was*

On March 5 1919, to

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from Mch 1 to Mch 5 1919 the inclusive date of transfer or discharge.

	Dr.	Cr.
Bal. Dr. or Cr. from prev. month		8-60
Regimental Pay 5 days at $ 1 c. 10		5.50
Field Allowance days at $ c.		
Separation Allowance		
Clothing Allowance		35 -
Post Discharge Pay		70 -
*Other Credits		
Advances		
Separation Allowance and Assigned Pay Cheque No.		
*Other Charges		
Balance on transfer or on discharge, cheque No. 156385	119-10	
Total	119-10	119-10

*Give particulars.

A monthly stoppage of $ 15.00 (†) has (‡) been paid on account of

Assigned Pay for the month of Feb 1919
and Separation Allce. for month of 191

(to) Assignee Mrs Jennie Russell

(Address) Dorset Ont.

(†) Insert amount to be assigned, whether it has been paid or not. (‡) Insert "not" if amount has not been paid for period of account.

ON TRANSFER OF AN OFFICER.

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

REMARKS:—

State (1) date of enlistment married or single

(2) Separation Allowance, entitled or not No (3) Reason for discharge

(4) Authority for discharge or transfer D062

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

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

Date 4/3/19

Place TORONTO.

Paymaster.

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

CREDITS, ADVANCES, Etc.

Credits, Advances, Forfeitures, Issues on Repayment, etc., since issue of this L.P.C. are to be entered hereunder:

Date	Place	Cheque No. A.R. No. or Other Particulars.	AMOUNT		Signature of Officer Making Payment.
			Dr.	Cr.	

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 657347 (Rank) Pte.

Name (in full) RUSSELL THOMAS ALBERT enlisted in

the 162nd Batt.

CANADIAN EXPEDITIONARY FORCE at Parry Sound on the 15th

day of January 19 16

HE served in England and France.

and is now discharged from the service by reason of

Medically Unfit.

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

Age 22

Height 5' 6½"

Complexion Fair

Eyes Blue

Hair Dk. Brown

Marks or Scars Vacc. Scar Left Arm.

U.S.W Rt. Arm. 21.1.17

Prisoner of War.

Thos A Russell
Signature of Soldier

Issuing Officer

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

Date of Discharge Mar 5. 1919

Appointment

Signed at Toronto Ont this 5th day of March 19 19

in Military District No. 2

File Reference No.

No. 2
MAR 5 1919
DISTRICT DEPOT

B.S

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

M. F. W. 39a.
250m —6-18.
H. Q. 1772-39-882.

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

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

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

SERVICE AND CASUALTY FORM (Part I).

Army Form B. 103—I.
Part I.

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

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

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

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

Initials and Rank of an Officer.

(Authority) (*date*)

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

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

Industrial Group No.

Trade or Calling

Married or Single

Particulars of Trade Test

Occupation Cards despatched on (*date*)

Second Occupation Card despatched on (*date*)

(17) Next of Kin

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

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

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

(22) Extended { (23) Re-engaged {

(24) Miscellaneous entries:—

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

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)

657347 Russell. T. A.

(A) Report: Date	(A) Report: From whom received	(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
23.10.18.	EOR	CLA.352.	Reported Wounded & Missing Now reported P. of War (wound).	Field	28-8-18	
13.12.18	EOR	C.L.B.394	Repatriated P. of War arr. at	Dover	6-12-18	
16.12.18	EORD KED	D/0310	T.O.S. Repatriated P. of War on arrival at Dover	Witley	6-12-18	

D D Lurie
for Mgr. i/c Records. OMS 76

16.1.19 EORD Do 13. Ord Conv to C.C. Camp Rhyl. Witley 15-1-19

J W Pearse LIEUT.
OFFICER i/c RECORDS.

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: 21+32 6-7/2/19

16 JAN 1919

N. McIntosh Lt.
for Commanding M.D. 2 Wing,
Kinmel Park Camp,

Embarked S.S Carmania
Liverpool Feb, 1 1919

Nothing to be written in this margin.

R—122

CHS Rank Name RUSSELL Thomas Albert Reg'l No. 657347

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

Place and Date of Enlistment Parrysound Jan. 15th.1916 Place of Birth Haliburton Dist. Ont.

Name and Address, Next-of-Kin James Russell

Dorset Ontario Canada Relationship Father

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

H. W. & V., Ld.—7165-16.

Report. Date.	From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS. Taken from Official Documents.
		Arrived in England per H. M. T. 2810 31-7-16			
5-10-16	109th Bn	S.O.S. to 21st Battn	Bramshott	5-10-16	Pt II. D.O. 267
9-10-16	21st Bn	T.O.S. from 109th Bn	Fields	6-10-16	" 58.
31-1-17	"	Adm No 4 Gen Hosp	Camiers	21-1-17	CLA 428 GSW R Arm L Leg OTV
15-2-17	"	Bradford War Hosp	Bradford	6-2-17	B 273 " "
17/2/17	"	Wd transf to CCAC.	Shoreham-on-sea	7-2-17	Pt II O 20 W.
21.2.17	CCAC.	Taken on Strength	Hastings	6.2.17	" 88
11.3.17	C.C.A.C.	S.O.S. on transfer to E. Ont. Regiment	Hastings	10.3.17	Pt. II D.O. 117
16.3.17.	E ORR.	T.O.S. from CCAC	Seaford	11.3.17.	Pt. II D.O. 5.

Report. Date.	Report. From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Rank.	Place.	Date.	REMARKS Taken from Official Documents.
						G.S.W.
13-3-14	21st Bn	trans. Can. Con. Hosp.		Epsom	8-3-14	C.L. B295 RT arm & Lt Leg.
25-4-14	E.O.R Dep.	Ceases to be shown in Hosp & is on Command to 3rd C.C.D.		Seaford	20-4-14	Pt II Do 44 & 3rd CCD Pt II 57 d 26/4/17
4-7-14	3rd CCD.	Ceases to be attached on dis. to Reserve Unit		St Leonards	5-7-14	" 116 } & EORD. Pt II Do 119 d/9-7-17
5-7-14	6th Res Bn.	T.O.S. from EOR. Dep. on reporting from 3rd CCD.		Seaford	5-7-14	" 156 }
4-8-14	21st Bn.	Dis. C.C.H. Woodcote Pk.		Epsom	20-4-14	G.S.W. C.L. B.413. RT arm & Lt leg.
4-8-14	6th Res Bn.	Adm. Can. Mil Hosp.		Eastbourne	2-8-14	S.W. Mid finger RT. (old) C.L. 112
C 16-10-14	EOR.	Dis. do.		do.	13-10-14	" C37 do.
15-10-14	6th Res Bn.	Posted to EOR Depot.	Pte.	Seaford	13-10-14	Pt II 243 & EOR.D. Pt II Do 218 d/16-10-14
16-10-14	3rd CCD	Reattached for P.T etc	Pte	"	13-10-14	" 202 & EORD. Pt II Do 218 d/16-10-14
C 15-11-14	EOR.	No 14 Can Gen Hosp		Eastbourne	10-11-14	Painful stump 2nd finger R. hand C.L.C. 63.
15-12-14	3rd CCD.	Ceases to be att. on being in Hosp. over 21 days.	Pte	Seaford	10-11-14	& EORD. Pt II Pt II Do 252. 8 d/8-1-18
16-1-18	"	Re att. for P.T etc	Pte	"	14-1-18	" 13
21-2-18	6th Res Bn	Posted from EOR Depot, on reporting from 3rd CCD	Pte	"	20-2-18	" 44. & EORD. Pt II 57 d/26-2-18 & 3rd CCD Pt II 44 d/21-2-18
7-3-18	"	Awarded 1 G.C. Badge	Pte	"	6-3-18	Pt II Do 56
11-4-18	"	Posted to 21st Butt opens	Pte	"	11-4-18	" 86 & 21st Bn. Pt II. 27 d/16-4-18
C 16-10-18	21st Bn.	Having been reported Wounded & missing 28-8-18 & now reported a Prisoner of War, is SOS accordingly, effect 28-8-18	Pte	Field	28-8-18	Pt II Do 82

Form R 122.
10287—65M—28-7-17.

2nd Page

Opens Casualty

Rank | Name RUSSELL, THOMAS ALBERT | Reg'l No. 657347

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

Place and Date of Enlistment Parry Sound. Jan. 15th 1916 | Place of Birth Haliburton Dist. Ont.

Name and Address, Next-of-Kin James Russell

Dorset. Ont. Canada | Relationship Father

Assigned Pay Monthly $ | Payable to

Relationship

Separation Allowance $ | Payable to

Relationship

Discharge, Date and Place | Reason | Character

N/E. R.B. No. ~~8262~~ 10477
File R.L.
Category ~~Dep~~ Ops.

N/E. R.B. No.
File R.L.
Category Can OR

Report. Date.	From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Rank	Place.	Date.	REMARKS Taken from Official Documents
						Permanent Grade Pte
First page of record filed in Envelope					28-10-18	Acting Rank NIL
23-10-18	E.O.R.	Reported Wounded & Missing		Field	28-8-18	C.L.A. 352
"	"	Now Reported Prisoner of War (Sound)		—	—	" 352
16-10-18	21st Bn.	Having been reptd. Wounded & missing 28-8-18 & now Reptd. a Prisoner of War is SOS.	Pte		28-8-18	P.T.II 00 82
13.12.18.	E.O.R.	Repatriated P of W. Arrived at Dover.			6.12.18.	C.L.B. 394.
16.12.18.	E.O.R. Dep.	T.O.S. Repatriated P of W. on arrival at Dover.	"	Witley.	6.12.18.	Pt. II Dep. 310.

Report. Date.	Report. From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place	Date.	REMARKS Taken from Official Documents.
16-1-19	EORD	on Comd Rhyl MD 2	Pt Witley	15-1-19	Pt II 13
4-3-19	"	ceases on Comd v is SOSTO	" Seaford	1-2-19	" 52
		CEF. in Canada			
		MD. 2. Sailing 13			
6-2-19	MD-2.	leave to be attached w.o	Rhyl	19-2-19	-31
		SOS to Canada			

D.M.S.-1375.

Medical Examination upon leaving the Service of an Officer fit for general service or a Soldier fit for duty.

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

Rank Pte Name THOMAS ALBERT Surname RUSSELL

Unit or Corps 21 Bn — Gen Depot (If a soldier) Regtl. No. 652347

Born at Hornet Cent Can on, date 22-12-1895

Signature (for identification) Thos A Russell

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

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

Weight 152 lbs.

Height 5 ft. 6 5/4 ins.

2. **NUTRITION AND DIATHESIS?** normal

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?** normal

4. **RESPIRATORY SYSTEM.** normal

5. **HEART?** normal

Abnormal Sounds? nil

Abnormal Size? nil

Pulse Rate? 80 Intermittence or irregularity? nil

6. **ARTERIES.**—Any hardening? No

7. **DIGESTIVE SYSTEM?** normal

8. **GENITO-URINARY SYSTEM?** normal

Urinalysis—S.G.? 1022 Reaction? ~~Nil~~ acid Albumen? nil Sugar? nil

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

V.R. 6/6 Ears—hearing normal
O.C. 6/6

R Latimer Capt. C.A.M.C.

A.D.M.S.-HEADQUARTERS CANADIAN TROOPS, 7 JAN. 1919 SURREY.

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

11. Opinion as to the health and physical condition of the one examined? Health & Physical condition good

Examined at Witley

Date Jan. 7th 1919

Signed E. W. Nolan Capt. C.A.M.C. M.O.

Signed M K Boe Lt. C.A.M.C. 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.

D.M.S.-1275.

Medical Examination upon leaving the Service

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

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 ..... Name ..... Surname .....

Unit or Corps ..... (If a soldier) Regtl. No. .....

Born at ..... on, date .....

Signature (for identification) .....

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

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

Weight

..... lbs.

Height

..... ft. ..... ins.

2. NUTRITION AND DIATHESIS?

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?

4. RESPIRATORY SYSTEM.

5. HEART?

Abnormal Sounds?

Abnormal Size?

Pulse Rate?

Intermittence or irregularity?

6. ARTERIES.—Any hardening?

7. DIGESTIVE SYSTEM?

8. GENITO-URINARY SYSTEM?

Urine Albumen? ..... Reaction? ..... Albumen? ..... Sugar? .....

9. SKIN, LIMBS, EAR, EYE or any other part?

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

11. Opinion as to the mental and physical condition of the case examined?

Examined at ..... Signed .....

Date ..... Signed .....

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.

Public Archives Records Centre

WAR VETERANS ALLOWANCE DISTRICT AUTHORITY

Address _____

Mark your reply:

For attention of:

Head,
Reference Section,
Public Archives Records Centre,
Ottawa 3, Ontario.

Re: RUSSELL (Surname) Thomas Albert (Christian Names) Service No 657347

Veteran is stated to have served during INWI (State War or Wars)

in the following Units 162nd Bn

To enable this WAR VETERANS ALLOWANCE DISTRICT AUTHORITY to determine the eligibility of the above-named, will you kindly furnish the following particulars concerning his services:

1. THEATRES OF SERVICE.

(1) South African War
Date and port of disembarkation _____

(2) World War I — (If Canada only, state if with territorial limitations).
CANADA - UK - FRANCE

If Canada and U.K. Only
Date(s) disembarked in U.K. _____
Date(s) S.O.S. in U.K. for Canada _____
Period(s) of desertion in U.K. _____

(3) World War II — (If Canada only, state if with territorial limitations).

Date of embarkation _____

2. Date and place of all enlistments. 15 Jan. 1916 - Parry Sound, Ont

3. Date of all discharges and reason. 5 Mar 1919 - Med. Unfit

4. Date and place of birth as per attestation paper. 22 Dec 1895 - Haliburton Dist. Ont.

5. Marital status; if married, name in full of wife. Single

6. Any other military service. Nil

7. Decorations, if any. Nil

ARC-94(WVA-18)

Head, Reference Section

P. 559

Married or Single: Single

Place of Birth: Haliburton Ont

Name and Address of Next of Kin: James Russell, Dorset Ont.

Relationship of Next of Kin: Father

Name and Address of Next of Kin:

Relationship of Next of Kin:

Separation Allowance Monthly $ Effective (Date)

Payable to

Relationship of Dependant

Casualties, Promotions, &c.

Particulars	Effective Date	Authority

Admissions to Hospital, &c.

Date Admitted	Date Discharged	V. or A.	Name of Hospital

Reg'l No. 657347 Rank Pte Name Russell Thomas Albert

If in Permt. Corps What Unit — Unit 109th Bn. Transferred to 21st Bn Date 5/10/16 Authority 20279

Permanent Force Allowances — Transferred to CCAC Date 11/3/17 Authority B273 15/3/17

Place of Attestation Parry Sound Ont — Transferred to 3 Bde Rpt Hqs Date 31/5/17 Authority

Date of Attestation Jan 15 1916 — Transferred to EORD Date 1.11.17 Authority

EORD

Assigned Pay Monthly $ 15.00 Date Effective May 1st 1918. 8/6

Payable to Mrs Jennie Russell, Dorset, Ontario Can Relationship Mother

Assigned Pay Monthly $ Date Effective

Payable to Relationship

Stop-Payment Form (Assigned Pay) Rendered (Date) Effective Reason

Discharge Date and Place Reason and Authority

Account Transferred to Non-Effective Branch (Date)

Account Transferred to Officers' Pay Branch (Date)

Date 1916	Pay No. of Days	Pay Rate	Pay Amount $	Pay Amount c.	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount $	Field Allowance Amount c.	Working or Special Pay No. of Days	Working or Special Pay Rate	Working or Special Pay Amount $	Working or Special Pay Amount c.	Assigned Pay Credits	Other Credits	Total Credits	Acquittance Rolls 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	Cash Payments 1	2	3	4	Assigned Pay	Other Charges	Total Debits	Balance Credit	Balance Debit	Pay Withheld or Deferred	Pay Available for Issue	Remarks
July 31													Balance from Canada																		1770				
														1770	1770																				
Aug 1-31	31	1.00	31		31	10	310								3410	31	9/8/16														973	4207			
Sep.	30		30		30		3								33	62	31/8/16	94	17/9/16					730	730						1460	6047			
Oct 1-5	5		5		5			50							250																	6597			20279 Trans to 21st Bn 5/10/16
" 6-31	26		26		26		260								2860	20	30/10			7339	17/10 CASH					436					24 33 1410	8047			
																				133	30/9	1.04	Bon			974									
Nov.	30		30		30		3								33			1771	12/11										262		248	510	10837		Leave on Repay 4/10/16
Dec.	31		21		31		210								3410	1635	4/12							872							872	13375			
			1530																																
1917																1947	8/1/17																		
Jan	31	1.10	341	10											3410	1881	17/1/17							261							522	16563			
																								261											
Feb	28	"	3080												3080																	19343			
March	10	"	1100												1100																	20443			Transferred to C.C.A.C. Eff 11-3-17
Mar	31		2310												2310			1377	6/5/17	383					1460						1460	21293			
Apr	30		33												33																	84593			

Checked W.P.H.

gn

657347 Pte Russell T A

Date	Pay No. of Days	Pay Rate	Pay Amount $	Pay Amount c.	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount $	Field Allowance Amount c.	Working or Special Pay No. of Days	Working or Special Pay Rate	Working or Special Pay Amount $	Working or Special Pay Amount c.	Assigned Pay Credits	Other Credits	Total Credits	Acquittance Rolls 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	Cash Payments 1	2	3	4	Assigned Pay	Other Charges	Total Debits	Balance Credit	Balance Debit	Pay Withheld or Deferred	Pay Available for Issue	Remarks
																															245 93				To Bnk Hol 31/5/17.
May	30		33												33																278 93				
	1		1 10												1 10																280 03				
June	20		22												22																302 03				To 3 C.D. 21/6/17
Jun	30		33												33	390	14/5							19 59						19 59	282 44				
July			34 10												34 10							6Pl.	30/4/17			9 73			3 51	13 24	314 30				#3 Qmrs Hwy 6/6/17
Aug	31		34 10												34 10																348 40				
Sept			33												33	608	14/6.							9 86						19 60	361 80				
																704	30/6							4 87											
																470	30/5							4 87											

Month	Particulars	Cr. 1	Cr. 2	Particulars	Dr. 1	Dr. 2	Dr. 3	Dr. 4	Balance	Deferred Pay	Ser. Allce. Eng.
1917		361 80							361 80		
Oct	P. Pay	34 10							395 90		
		34 10									
Nov	QP	33		AR 2611. 2/10/17. 10 B/at H.	4 87						
Dec		34 10		AR 2513 21/9/17 10 Stat Hpl	2 43						
				WO 44547 AR 501 27/7/17 6 Res Bn	19 47						
				NOM 38844 6 CH 6-6 H AR 410 6 from 6 from	48 67						
				AR 2467 26/7/17 14 C G H 6 M H	2 43						
				AR 2556 28/7/17 Eastbourne	2 43						
				4675 15/10/17 "	2 44						
1918 Jan.	P.P.	67 10		R 8557 12/1/17 6 P M	73 26				307 33		
		34 10			155 64						
				AR 3184. 21/2/17 14 C.G. Hosp.	9 73						
				Dfn. AR 2870. 15/10/17 14 G Hosp.	2 43						
				Dfn. AR 3032 12/12/17 " "	2 43						
				" " 1429. 29/10/17. 3 C.E.R.	4 87						
				" " 1393. 16/10/17 " "	9 73						
				" " 468. 15/7/17 6 Res R.	9 73				302 44	270 00	
Feb.	P.P.	34 10			38 42						
		30 80		3303 AR. 14/1/18 14 Can Gen Elec	7 30						
				AR 2424 30/1/18. 3 C.E.R.	48 67						
				AR 2395. 30/1/18 " "	4 87						
		30 80		AR 2479 10/2/18 " "	19 47						
					80 31				252 93	285 00	

Month	Particulars	Cr. 1	Cr. 2	Particulars	Dr. 1	Dr. 2	Dr. 3	Dr. 4	Balance	Deferred Pay	Ser. Allce. Eng.
	Ford.								252 93	285 00	
March	P.P.	34 10		AR 1464 7/3/18 6 Res	7 30						
				AR 1539 13/3/18 "	19 47				260 26	300 00	
		34 10			26 77						

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY.	* ~~ENGLAND~~ OR CANADA.	SEPARATION ALLOWANCE.	* ENGLAND OR CANADA.
EFFECTIVE DATE:– 1/5/18		EFFECTIVE DATE:–	
AMOUNT:– 15.00		AMOUNT:–	

NAME:– RUSSELL, Thomas Albert

NUMBER:– 657347

NAME, ADDRESS, RELATIONSHIP & AUTHORITY | WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.

Mrs. Jennie Russell
Dorset, Ont.
Mother

Stopped off 1/5/19

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Pte.

UNIT AND TRANSFERS

ORIGINAL UNIT:– 109th Bn.

DATE ACCOUNT FIRST OPENED:– 1/8/16

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			E.O.R.D.
B027 16/4/18	1/5/18	31/5/18	21st Bn

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
2/19	14331	Witley	~~9 93~~				

DAILY RATES OF PAY AND ALLOWANCES

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

Drawn to Can 1/2/19. MR B1895 Witley 17/9 Witley. MO 2.

PARTICULARS OF RENDERING NON-EFFECTIVE: P. of War A 352 23-10-18

L.Pte 280 40

MONTH 1918	PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Mar 31	Bal Brot Fwd								260 26	300	
Apr	Pte Pay	33		AR 91 10/4/18 6th Res Bn	4 87						
				AR 9 9/4/18 " " "	14 60						
				On AR 221 23/4/18 2 66 RC	3 57				270 22	315	
		33			23 04						
										315	
May	"	34 10		AR 140 19-5-18 21 Bn	3 57				300 75	~~336~~	
		34 10			3 57						
June	"	33 –		c a p				15 –			
				Can u P not chgd for May				15 –			
				AR 221 8/6 21 Bn	4 46						
				✓ 284 23/6 " –	3 57				295 72	315 –	
July	"	33 – 34 10		a p	8 03			30 15			
				AR 31 8/7 21 Bn	4 46						
				✓ 629 21/7 ✓	3 57				306 79	315 –	
Aug	"	34 10 34 10		a p	8 03			15 15			
				AR 720 2/8 ✓	3 57						
				✓ 963 24/8 ✓	3 57				318 75	315	
Sep	"	34 10 33		a p	7 14			15 15	336 75	315 –	
Oct.	✓	33 – 34 10		c. a. p.				15 15			
				355 85					355 85	315	Brought forward 31/10/18 TAR
Nov	"	34 10 33		✓				15 15			
				Audy granted 20/12/18 issue £10. from D.P.					Bal for	48 67	
Dec	"	34 10		Cap 9/12/17				15		266 33	
				AR 79570. 9/12. C.P.M.	63 24						
				✓ 80106 – ✓ ✓	73						
				✓ 5287 – 8/12. Can. det. B'ogne	1 87						
				auth. granted 7/1/19 – to issue £5 from Def. Pay						24 33	
										242 –	
	Forward	67 10		Forward	138 14			30			

NUMBER 657347 RANK Pte. NAME RUSSELL J A

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
1919 Jan	Forward	64 10		Balance 1/8	138 14			30 -	355 85	242 -	
	P/P	34 10		C.A.P.				15 -			
				DN. CA. 4218. 8/12. C.A.S.C. Sicliffe	9 73				264 18	242 -	
		101 20			144 87			45 -			
	Int Def Pay 31/1/19	25 95							290 13	242 -	
		127 15			144 87			45 -			
				14331 - 2/1/19. Gen. Depot.	9 73				280 40		
				K. 2698. 27/1 (LPC END) ~~Hennice~~	9 73	19 46			270 67		
					19 46						
				S.D.S. "Canada" 1/2/19 (S.L. 13. 21 Res.)							

Checked: A Katon 17.1.19.

162 B. CEF

7/3/7

ORIGINAL

657347

MEDICAL HISTORY SHEET.

ORIGINAL

Surname Russell Christian Name Thomas Albert

Examined on 15th day of January 1916 at Parry Sound

Birthplace City or Town Hamilton District County

Apparent age 20-1

Trade or occupation Fireman

Height 5 Feet 6 3/4 Inches.

Weight 145. Lbs.

Chest measurement Minimum 33 inches. Maximum expansion 37 inches.

Physical development good

Small-Pox Marks no.

Vaccination Marks Arm Right. Left. Number no

When Vaccinated last no

(a) Marks indicating congenital peculiarities or previous disease no

(b) Slight defects but not sufficient to cause rejection no.

Approved by T S Parker Major

Rank Capt M.O.

Date.	Fit or Unfit.	Examined for Re-engagement.	
17/10/17	D I	[illegible]	M.O.
Boarded 8/12/17	Category D I	[illegible] Capt.	M.O.

14 FEB 1917 — Major C.A.M.C. — For Lt. Col. i/c Hospital, No. 14 Canadian General Hospital, Eastbourne, Suss.

Capt. C.A.M.C. Pres. Board for O.C. Hospital.

Date.	Result.	Vaccinations.	
11.7.16	Good	H. O. Boyd	M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.	
7 typ#	good	T S Parker	M.O.
16# 15-10-17	TAB	Bell	M.O.
TAB 22.9.16	good	H O Boyd.	M.O.

Enlisted on 15th day of January 1916 at Parry Sound.

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	162	657347		15. Jan 1. 16
Transferred to	108th Bn.	657347.		5-7-17
	21st Bn 6th Can. Res. Bn. 6th Res. 21st Bn			26-2-18. 11.4.18

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
3rd C.C.D.	7-2-18.	Fit for Duty. A.	[illegible] Major C.A.M.C.
Camp Witley	7-1-19	nil	A. Cameron
Camp	27-2-19	Old Gsw of L. Post + R. Shoulder	Bro F. L. Fuller Capt Cavc

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

M. F. B. 313.

400M.—1-16.

H. Q. 1772-39-439.

CANADIAN

Surname Russell Christian Name Thomas Rank Lieut

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital. Day	Month	Year	Dates of Discharge from Hospital. Day	Month	Year	DISEASE.	Number of days in Hospital.	Remarks on nature of the disease: how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
War Hospital,	Bradford	6	2	17	4	3	17	G.S.W. Rt Arm & Thigh	29	G.S.W. Rt arm & finger; Rt thigh; finger is very unhealthy on admission with Comp. fr of 3rd phalanx & remains somewhat diffused & stiff, the other is healed without incident	per Handwell Capt
Mcx. Prem		7	3	17				Gsw. L thigh & Sciatic nerve		Wounds healed & moderable	J. Bassett Capt
CANADIAN MILITARY HOSPITAL, EASTBOURNE.		1	8	17	12	10	17	Sh. Middle Finger Rt	74	Amputation through middle 2nd phalanx middle finger rt hand. to Duty	Thos Russell Capt Comm
CANADIAN MILITARY HOSPITAL, EASTBOURNE.		9	11	17	14	1	18	Lacerations Thumb & 2nd Semper Rt Hand	66	Discharged Fit	J. Bayne Capt.

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 Exhibition Camp DATE Feb 27th 1919

1. 1 (a) Unit #2 D.D. (b) Regimental No. 657347 (c) Rank Pte.

(d) Surname RUSSELL (e) Christian name Thomas Albert

(f) Home address Dorset Ont Box 423

(g) Next of Kin Mrs Jennie Russell (h) Relationship mother

(i) Address of Next of Kin Dorset Ont Box 423

2. Age last birthday 24 Date of birth Dec 22nd 1895

3. Enlistment, or Appointment (if an Officer) (a) Place Parry Sound (b) Date Jan 15th 191

4. Personal description:

(a) Height 5' 7" (b) Weight 145 (stripped) (c) Complexion fair

(d) Colour of hair Brown. (e) Colour of eyes blue (f) Identification marks, Scars, etc. 1 vacc.

5. Former trade or occupation Carpenter.

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).	Years	Days
	3	43

162nd Batt	Periods From	Periods To
Canada	Jan 15th 1916	Aug 1 th 1916
England	Aug 11th 1916	Dec 13th 1916
France or other theatres of War	Dec 13th 1916	Dec 9th 1918
England and canada.	Dec 9th 1918	To date.

7. Original disease, or injury (1) G.S.W. left thigh. (2) G.S.W. right middle finger

(a) Date of origin 1 and 2 Jan 1917 (b) Place of origin 1 and 2 France

(c) Cause 1 and 2 shrapnel ball.

M. F. B. 227.

300M.—8-18.
1772-39-117.

M.B.

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.)

(1) Partial loss of function of the left leg.

(2) Partial loss of middle finger right hand.

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.)

(1) Objective:- 2 scars 1" diameter one on inner and one on posterior aspect of left thigh, just below buttock. Inner scar slightly tender to pressure, scars non-adherent, no atrophy, no limitation of movement of left thigh or leg, left leg is as strong as right.

(1) Subjective:- After walking 5 miles at his own pace or 2 miles quickly patient has dull aching pain in region of scars and down the hamstring muscles. These pains are aggravated by damp cold weather and relieved by resting for 1 hour or more. Sometimes pains are present at bed time and prevent sleep for a few hours.

(2) Objective:-Distal phalanx middle finger right hand missing, good stump well padded, end of the stump slightly tender to pressure.

Subjective:-Slight tenderness on pressure to end of stump or when he occasionally ~~accidentally~~ strikes stump.

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

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

Special Senses ..... no ..... Respiratory System ..... no ..... Integumentary System ..... no

Disturbances of Mentality ..... no ..... Digestive System ..... no ..... Muscular System ..... no

Osseous and Joint Systems ..... no ..... Any other general condition ..... no

Urinalysis negative for albumen and sugar.

No haemorrhoids, hernia, varicocele, varicose veins or goitre.

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

Wounded in leg and hand. Jan. 17th 1917, In Hospitals in France and England until Jan. 14th 1918. Thigh healed well, but finger was painful until amputated Aug. 1917, since then there has been gradual improvement and less pain in bothleg and hand.

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*).)

G.S.W. right arm at elbow Jan. 1917 Flesh wound only, healed healed in one month no disability or loss of function now. pneumonia 1913, ill 6 weeks, good recovery, no disability.

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

Distal phalanx right middle finger missing, 2 small scars right elbow result of G.S.W. 2 scars left thigh result of G.S.W.

11.—(*a*) Did the disabling condition have its origin before enlistment? 1 and 2 no

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

1 and 2 not applicable.

12. Was the disability caused, or aggravated; (*a*) by intemperance, or improper conduct; or (*b*) by unreasonable refusal to accept treatment? 1 and 2 no

The regimental documents will be referred to.

(If the answer is in the affirmative, state in percentages, to what extent the patient is incapacitated by that causation or aggravation. In answering this question, conduct sheets should be considered. If treatment has been refused, the circumstances surrounding the refusal should be described on page 4.)

13. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? (1) 6 months (2) Permanent.

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

one year in hospitals France and England during which time leg was massaged and finger amputated.

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)

1 and 2 no

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

17. Recommendations

That he be returned to duty in category B.2.

J. A. Richardson, Capt.
Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

(Sections 7, 8, 9 and 10 are to be read to the invalid and either "satisfied" or "not satisfied" struck out).

I, the undersigned T.A. Russell. 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 Ears

Thos Russell Rank.
Signature of invalid examined.

OPINION OF THE MEDICAL BOARD

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

We conur, and in addition #9A 2 Objective, should read

" No ~~limitation~~ diminution of gripping power in right hand as result of injury.

19. Is the invalid fit for

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

20. It is certified that the invalid

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

zxzxzxzxzxzx zxzxz

(b) Does not require treatment.

(c) Should pass under his own control.

~~(d) Should not pass under his own~~ control.

(Strike out condition not applicable.)

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

Placed in category B.2.

Before signing the President of the Medical Board will read the statement signed by the invalid and differing opinions regarding Sections 7, 8, 9 and 10, as recorded in Section 18, to the invalid and if no change is indicated, will initial the statement. If, as a result of differing opinions regarding Sections 7, 8, 9 and 10 only, recorded in Section 18, the invalid is dissatisfied with the statement previously made, remarks of the Medical Board will be added here.

Jas. W. Barton President.
Major

Members

PLACE Exhibition Camp Toronto Ont.

DATE Feb 27th 1919

TO BE COMPLETED WHEN TREATMENT IS REFUSED

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

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

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

..................................President.

PLACE.................................. Members

DATE..................................

APPROVED BY

APPROVED

MAR 1 1919

Assistant Director of Medical Services.

DATE R. L. Richardson CAPT.
FOR A. D. M. S. M. D. 2

APPROVED BY

Director-General of Medical Services.

DATE..................................

Forms I. 1237 11

Army Form I. 1237.

ADMITTED 9 NOV 1917

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book: 726

Year: 1917

Station and Date: 9 NOV 1917

No. 14 CANADIAN GENERAL HOSPITAL MEADS, EASTBOURNE, SUSSEX

Regimental No.	Rank.	Surname.	Christian Name.
657347	Pte	Russell	J. A

Unit.	Age.	Service.
3rd Reserve Depot	23	24/12

Disease Painful Stump 3rd Finger Rt Hand

Patient has finger no. 3 Rt hand amputated here in wound 10 at middle of metacarpal

Now complains of pain in the cold & stiff

Patient

Condition on admission

Resp. & circ. heart & G.U. systems normal

The metacarpal of right hand has been amputated at middle of middle phalanx. Wound cicatrized healed

Complains of pain & cold feet & count of it going blue.

Nov 13th Patient seen by Col Leathes who recommended he be sent Capt Young for massage.

Dec 7/17 Condition improved. Fit for short Board

J. O. Zalke
Capt & Capn.

Jan 8/18. Condition good

J. O. Zalke
Capt.

DISCHARGED 4 JAN 1918

Master Gunner Russell

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

W. P. Griffith & Sons Ltd., Printers, Old Bailey, E.C.
[1185] W11203/M1150 50m 12/16v 5 89 Forms/I. 1237/12

P.T.O.

Station and Date.	

CLINICAL CHART.

(*To be attached to Case Sheet.*)

Army Form B. 181.

Corps 2nd Canadians

Military Hospital 404 Gen Hosp.

No. 657347 Rank and Name Russell

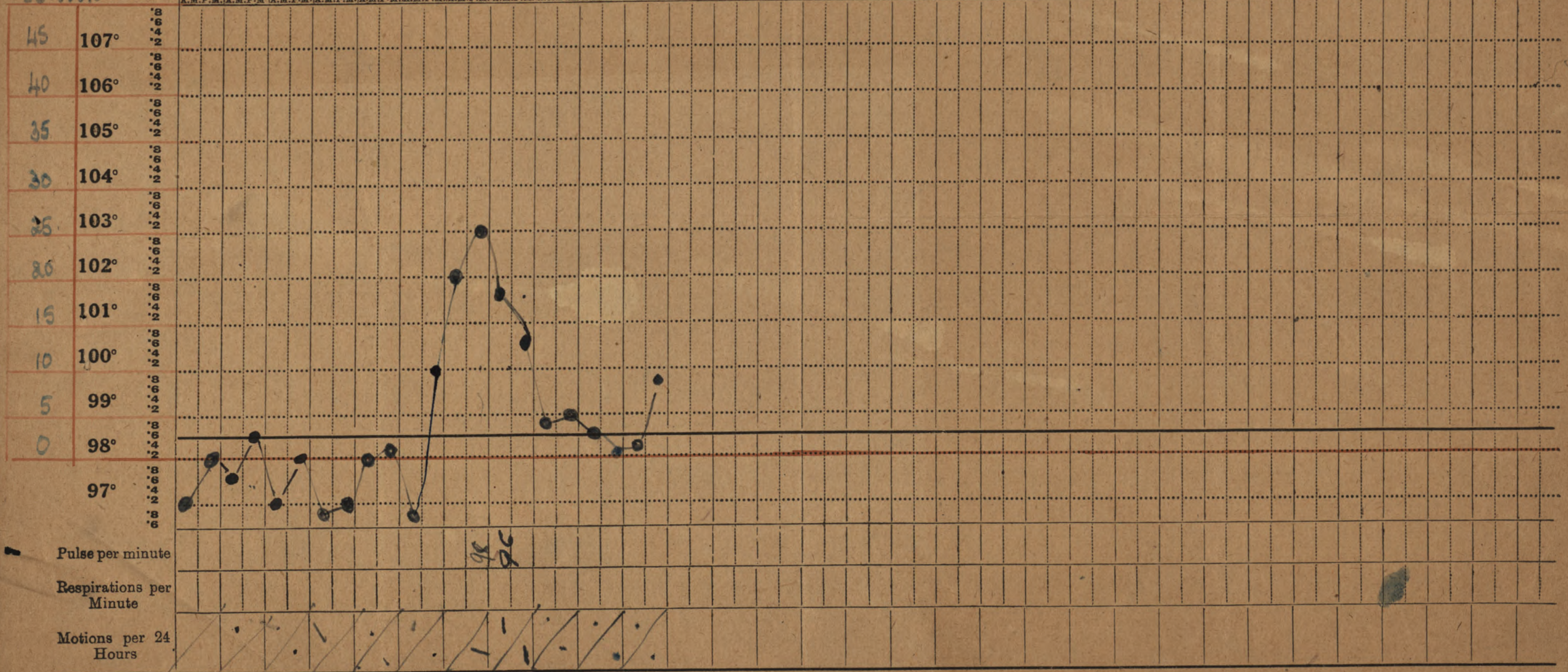
Age 22. Service 12 months

Disease _____ Date of admission 21. 1. 17 Date of discharge March 7th/17. Result _____

Jaundice

Dates of Observation	21	22	23	24	25	26	27	28	29	30	31	1 (Feb)	2	2
Days of Disease														

Temperature Fahrenheit — Time A.M.P.M.



(29342) W6465—M789. 1,000,000. 9-16. D.P.W. A.F.B. 181/4. (373)

Signature Wm Handwell CMP In charge of case.

CLINICAL CHART.

(To be attached to Case Sheet.)

Army Form B. 181.

Corps 21st Canadians. Military Hospital Bradford War Hospital.

No. 657347. Rank and Name Pte. Russell. Thomas. Age 22. Service 1 yr. 7 m.

Disease G. W. Right arm. Date of admission February 6th/17. Date of discharge March 4th/17. Result

Dates of Observation	Feb. 6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	March 1	2	3	4	5	6	7	8
Days of Disease																															
Temperature Fahrenheit (Time A.M.P.M.)																															
Pulse per minute	80	72	80	84	86	88	92	90	102	100	98	92	94	96	84	88	80	90	80	90	88	96		80	80	80					
Respirations per Minute	20	20	18	18	20	16	20	18	20	18	20	18	18	20	18	18	18	18	16	18	20	20		20	20	20					
Motions per 24 Hours			1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1

Temperature scale: 107°, 106°, 105°, 104°, 103°, 102°, 101°, 100°, 99°, 98°, 97°

(29342) W6465—M789. 1,000,000. 9-16. D.P.W. A.F.B. 181/4. (373)

Signature Wm Randall CMV In charge of case.

CLINICAL CHART.

(To be attached to Case Sheet.)

Army Form B. 181.

Corps: 6 Cavalry Bn

Military Hospital: Raven's Croft, Military Hpl. Seaford, Suss.

No. 657347 Rank and Name: Pte Russell T.R. Age: 22 Service: 1912

Disease: Sub Pulmonary Date of admission: 1 AUG 1917 Date of discharge: 13 OCT 1917 Result:

Dates of Observation	Aug 1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18			19												
Days of Disease	on admission																																
Temperature Fahrenheit (Time A.M. P.M.)	99.5	99.6	99.6	99.6	99.7	99.7	99.2	99.8	99.6	99.8	99.6	99.6	99.6	99.5	99.6		99.6	99.4	99.6	99.6			99.4	99.0									
Pulse per minute	60	68	60	68	66	64	68	70	64	68	64	66	68	68	72	64	68	72	64	78	68	76	72	68	72		64	88					
Respirations per Minute	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18		18	18					
Motions per 24 Hours		2																															

Urine 1.024 albumin trace

Urine 1.024 albumin trace

K 23-20

(29342) W6465—M789. 1,000,000. 9-16. D.P.W. A.F.B. 181/4. (373)

Signature _____ In charge of case.

RECORD NO. 409

X-RAY DEPARTMENT,
Canadian Military Hospital,
Eastbourne, Sussex.

~~S.M.H.E.~~ Ward Raven's Croft H. Flaxford

9 AUG 1917 1917.

Reg. No. 657347 Rank Pte. Name Russell T.A. Unit 6th Res. Batt.

Old fracture through middle of second phalanx middle finger - right - some over riding of fragments - callous formation present.

R. D. Harding Cpl.

~~Capt.~~ C.A.M.C.,
~~Officer~~ i/c X-Ray Department.

K2570

Regl. No., Rank & Name. Pte Russell Corps.....

Disease.....Hospital.....

To Officer i/c Laboratory. Ward. 2W

Please carry out an examination of the accompanying specimen of urin

with special regard to.....

Date..... .....
Officer i/c Ward.

Laboratory Report.

Colour Sheen

Odour

Reaction Acid

S. G. 1018

Sugar

Albumen

Microscopic

Special

T 2570

Date of Examination. 2-8-17 C. H. V. Smith
Officer i/c Laboratory.

Reg. No., Rank & Name P. W. Pinard Corps

Disease Hospital

To Officer i/c Laboratory. Ward 3 B

Please carry out an examination of the accompanying specimen of urine

with special regard to

Date

Officer i/c Ward.

Laboratory Report.

Colour Green

Odour

Reaction Acid

S. G. 1017

Sugar

Albumen

Microscopic

Special

Date of Examination 9-8-15 G. H. M. C.

Forms
I. 1237
11

Adm Aug 1st 1917

Army Form I. 1237.

MEDICAL CASE SHEET.*

14 CAN HP.
EASTBOURNE

No. in Admission and Discharge Book	Regimental No.	Rank.	Surname.	Christian Name.
	657347	Pte	Russell	J.A.
Year 1-AUG 1917	Unit. 6 Can Res Bn		Age. 22	Service. 1 1/2

Station and Date.
Raven's Croft, Military Hpl. Seaford, Suss.
1-AUG 1917

Next of kin Mrs J. Russell Mother Dorset Ontario Canada

Disease Sh. Lungs Rt.

Enlisted Jan 1916 at Barrie Ontario. Occupation - Carpenter. Overseas Sept 1916 wounded 17th Jan. Rt. middle lungs. Laid up 2 months. Also Rt. hearing & light busts.

P.S. Rt. middle lungs has never been right since he was wounded complains of pain in lungs after using rifle.

P.C. Jaw & arm looks perfectly well. Over the distal joint Rt. middle finger is a healed wound. Can only move the joint by passive movement, the dist. phalanx is held in a position of partial flexion circulation is poor in affected member. There is a hooking of the flesh over the dist. joint.

No disability from wound in rt. pneumo

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

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[1185] W11203/M1150 50m 12/16 5 89 Forms/I. 1237/12

P.T.O.

Station and Date.	
	Wound middle outer side of left index finger healed complain of pain on marching behind left knee. Vascular Respiratory & Digestive normal Nervous
20-8-17	Transferred to Cadham C. H. V. Smith M.D.
28-8-17	He complains of disease of the terminal phalanx of middle finger of rt hand he claims that the condition of the finger bothers him in executing ordinary motions and causes him pain — There is fracture of the middle phalanx of the finger almost the center with a good deal of limitation of motion in the distal interphalangeal joint — He is unable to flex or extend the terminal phalanx — Rt amputation — Jm —
7-9-17	amputation done thru the middle of 2nd phalanx under local anesthesia — one flap made — Jm
19/9/17	Stitches removed body wd healed.
3/10/17	Finger under otherwise looks well Thomas
6/10/17	Finger healed Thomas
12/15/17	~~Discharge~~ & DT Thomas Gould Capt Canc

Form D.M.S. 594
50M-114 8-17-4-17.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at Eastbourne, December 8th, 1917. 1917.

No. 657347 Rank Pte. Name Russell T. A.

Local Unit 3rd C.C.D. Overseas Unit 21st Can. B'N. Age 23

Examination held at 14th Canadian General Hospital.

DISABILITY.
Overseas-~~Local~~
(SCRATCH ONE OUT).

Painful stump 2nd Finger Rt. Hand.

PRESENT CONDITION.

No disability other than some tenderness of stump

No. 14 CANADIAN GENERAL HOSPITAL
8 DEC 1917
EASTBOURNE, SUSSEX

BOARD RECOMMENDS:-

1. Fit for Duty D. 1.
2. Fit for duty after ..... weeks' physical training.
3. Fit for Temporary Base Duty ..... weeks
4. Fit for Permanent Base Duty
5. Discharge

Signatures:-

E C Beer Capt. C.A.M.C. President.

Members: J. O. Burke Capt. C.A.M.C.

C. Douglas Newell Capt. C.A.M.C.

APPROVED

Dated 8 DEC 1917 1917 W. Curtis Capt. C.A.M.C.

For A.D.M.S.

Form [illegible]
SOM-[illegible]

PROCEEDINGS OF A MEDICAL BOARD

Dated at [illegible], September 8th, [illegible] 1917.

No. [illegible] Rank [illegible] Name [illegible]

Local Unit [illegible] Overseas Unit [illegible] Age [illegible]

Examination held at [illegible] Canadian General Hospital.

DISABILITY
Overseas (Date)
(Date of one day)

Rheumatism and Lumbago [illegible]

PRESENT CONDITION

BOARD RECOMMENDS:

1. Fit for Duty
2. Fit for duty after [illegible] weeks' physical training.
3. Fit for Temporary Base Duty [illegible] weeks
4. Fit for Permanent Base Duty
5. Discharge

Signatures:

[illegible] President.

[illegible] Members

[illegible]

APPROVED

Dated [illegible] 1917.

[illegible]

For A.D.M.S.

FORM OF WILL.

I, Thomas Albert Russell (Name in full)

Regimental Number 65-2347 serving in 109th OVERSEAS BN., 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. Jennie Russell
Dorset
Ontario

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

absolutely, and my personal estate I bequeath to

Mrs. Jennie Russel
Dorset
Ontario

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 9 day of July A. D. 191

Thos A Russell 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 A. M. Scott Sergt.

Address of Witness Gelert

Occupation of Witness Soldiering

Signature of Second Witness Percy C. Peck

Address of Witness Muidrew

Occupation of Witness Sergt. 109th Bn C.E.F.

F. W. 82
00M-5-16.
1772-39-983.

H

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. 657347 Rank Pte C. E. F. Name Russell Thomas Albert

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		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				
FEB 1 1919	O. S.	T. O. S. No. 2 DISTRICT DEPOT, TORONTO		1919	PART II D. O. 45
					Lieut. For O. C. No. 2 District Dep.
25/3/19		S.O.S. (Discharged) No. 2 District Depot Part II, D.O. No. 62			
					O. C. Discharge Sections, No. 2 District Depot

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

[P.T.O.

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				

Russell Thomas Albert — TOS 88-21-2-17

109th OVERSEAS BATTALION, C. E. F.

Shed No. 1

O.Mf. 44248 WZR.

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 162nd O. S. Batt'n, C. E. F.

Regimental No. 657347 Rank Pte. Name Thomas Albert Russell

Enlisted (a) ~~29.3.16~~ 15-1-16 Terms of Service (a) D. of W. Service reckons from (a) ~~29.3.16~~ 15-1-16

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) Bushman.

Report Date	Report From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
		Embarked Canada	Halifax	24.7.16.	
		Disembarked England.	Liverpool	31.7.16.	
5.10.16	109th Bn	Transferred for Overseas Service with 21st. Batt'n OCT 5 1916			G.O. Pt. 11 No. 279 Capt. ADJUTANT 109th Overseas Battalion, C. E. F.
	C.B.D.	Arrived & Taken on Strength	C.B.D.	6/10.	Pt. II. O. 58. 9-10-16.
	Do.	Left for unit.	en route.	20/10	N.R. 20-10-16. A W Aselline CAPTAIN, ADJUTANT, 109TH BATTALION CAN. INFANTRY.
	21st BATTALION	Joined unit	21st BATTALION	22/10.	B. 213. 27/10.
	21st BATTALION	Wounded to Fld. Amb.		17-1-17	B-213 19/1. D.C.S. 259. 27-1-17.
21-1-17.	4. Gen Hosp:	G.S.W. Ram. L. leg.	4 Gen Hosp.	21-1-17.	W.S. 3034.
20-1-17.	5 C.F.A.	Do Do to	26 C.C.S.	7/1/17	a 36. D.C.S. 261. 3/2/17.
	6 C.C.S.	Do Do to	12. G.T.	20/1/17	" 21/1/17. D.C.S. 263.

OVER

CERTIFIED CORRECT. 12 OCT. 1916 CAN. PAYROLL 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.

[P.T.O.

657347 Russell, J. A.

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				
	4 General	Invalided to England on H.S.	"Dieppe"	7-2-17	W30,83 No. 7203. PC. II O. 20 d/17-2-17.
					J Whogan Capt. for Lt.-Col., A. A. G. Canadian Section, G. H. Q. 3rd Echelon, B. E. F.
17-2-17	21st Bn	Transd to CCAC. (Wd)	Field	7-2-17	PT II Do. 20
21-2-17	CCAC	Taken on strength	Hastings	6-2-17	" 88
11-3-17	CCAC.	SOS to E.O. Regt.	"	10-3-17	" 114
16-3-17	E.O.R Depot	Taken on strength	Seaford	11-3-17	" 5
25-4-17	"	On command from Eokd. to 3rd CCD	"	20-4-17	" 44
JWS					R H W Clowes. LIEUT: FOR LT: COL: I/C RECORDS, C.O.M.F.
7/11/17	3rd CCD	Discharged from 3rd C.C.D. St Leonards to Bn. Part II D.O. No. 116		6/7/17	For O.C. 3rd Canadian Command Depot
5-7-17	O.C. 6th Can. Res. Bn.	TAKEN ON STRENGTH 6th CAN. RES. BN.	Seaford	5-7-17	PART II No. 156
15-10-17	Off. 6th Res.	S.O.S. 6th Res. on posting to Eokd.	Seaford.	13-10-17	Pt II Do 203
9-7-17	OC Eokd	SOS of Eokd on posting to 6th Res	Seaford	9-7-17	Pt II Do 119 OFFICER I/c RECORDS 6th CAN. RES. BN.
16-10-17	OC Eokd.	Retaken on strength of Eokd. & on command to 3rd CCD	Seaford	16/10/17 31/10/17	Pt II Do 218. F. R. Houedice Capt. Adjutant for
15-12-17	3rd CCD	DISCHARGED FROM 3RD C. C. D. Seaford TO Eokd BN. PART II D		30/11/17	252 15/12/17 PC Eokd depot Tom Hammond Lt. For O.C. 3rd Canadian Command Depot.

(9 38 40) W5605—742 300,000 8/15 HWV(8M1268) Forms/W3172/2

Army Form W. 3172.
(In pads of 50.)

_____ **Hospital.**

Ward Y. I. No. of Bed _____ Date _____

Regl. No.	Rank and Name	Corps	Part to be X-Rayed
	Pte Russel Thomas		left hand

SHORT HISTORY OF CASE.
(To be completed by M.O. i/c case)

Terminal joint of 3rd digit - lt hand. joint involved

REPORT ON RESULT OF X-RAY EXAMINATION.
(To be completed by Radiographer.)

No. of Plate 2122 whole pl.

Fracture of 2nd phalanx.

3rd phalanx & joint not involved, but portion of bone missing in 2nd ph. at A.

Signature of M.O. [illegible]

Date _____

Signature of Radiographer J. E. Barnworth

Date Feb 12.

Army Form B. 103. Sheet -2 Regimental Number 657347.

Casualty Form—Active Service.

Regiment or Corps 109th Bn

Rank Pte Surname Russell Christian Name Thomas Albert

Religion Pres. Age on Enlistment 20 years 1 months.

Enlisted (a) 15-1-16 Terms of Service (a) Dofw Service reckons from (a) 15-1-16

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

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

or Corps Trade and Rate

Signature of Officer.

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
		Embarked ...			
		Disembarked...			
8/1/18	OC Ld	admitted hospital	Seaford	15/12/17	P.II Do 8
26/2/18	OC Ld	Recommended Lance	Seaford	14/1/18	P.II Do 57
26/2/18	OC Ld	SOS Ld on posting to Lett Res Bn	Seaford	30/2/18	P.II Do 57
					H. S. Stone. Capt. & Asst. Adjutant, for Officer Commanding East. Ont. Regt'l Depot.
21-2-18	OC 6th Bn	SOS 1st Reinforcements	Seaford	26-2-18	P.II No 49.
16.10.17	3rd CCD	Re attached for P.T. etc	Seaford.	13.10.17	P.II 6th 202
16.1.18.	do	do do do.	do	14.1.18	— 13.
8.1.18.	Ld RD	Ceased att 3rd CCD	do.	30.11.17	— 8.
26.2.18	do	Ceases att 3rd CCD & SOS to 6th Res. Bn	do	20.2.18	— 57 of 3rd CCD P.II 444 of 21.2.18

(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.

[P.T.O.

[M1101] W6135/M768 1000m 9/16s 153 G & S Forms/B.103/4. E./354.

657347 Russell T. A

CERTIFIED CORRECT
23 APR. 1918
CAN. RECORDS, LONDON

Date	Report: From whom received	Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
7.3.	6th Res Bn	Awarded 1 G.C Badge	Seaford.	6.3.18	P II O #56
11.4	do	Posted to 21st Bn o/seas	do	11.4.18	P II O 86
					J.A. [illegible] LIEUT: FOR LT: COL: I/C RECORDS. C.O.M.F.
	2 C.I.B.D	Arrived & Taken on Strength ~~21st Canadian Battalion.~~	2 C.I.B.D.	11-4-18	Part II Ord. 27 d/ 16/4/18
	2 C.I.B.D.	Left for C.C. Re C	Field	14-4-18	N.R
	C C Rein. C.	Arrived. Can. Corps	Rein. Camp.	16-4-18	N.R.
	Do	Left for	Unit	5/5/18	N.R 632
11/5	21st BATTALION	Joined	21st BATTALION	7-5-18	B-213.
	5 C.F.A.	Dermatitis Adm	5 C.F.A.	29-5-18	W.3391- F 4416.
	4 C.F.A.	Adm & trans	C.C.S	28-5-18	Do Do
	5 C.F.A	Discharged to	Duty	2-6-18	Do F 5001.
8/6	21st Bn	Rejoined Unit	Field	2-6-18	B-213.
13/10	Do	Wounded	Field	28-8-18	Telegram A.J. 87.
11-10-18	Canrecords	Prisoner of WAR and struck off strength accordingly.	Do	28-8-18	Telegram S. 323. Pt. II O. 82 d/16-10-18

W.W. Hogan Major for Lt.-Col., A.A.G.
Canadian Section. G.H.Q. 3rd Echelon B.E.F.

IF NOT DELIVERED IN 10 DAYS
RETURN TO
H.O. P.O.D. No. 2
Ottawa, Ont., Toronto

O. H. M. S.

TORONTO
FEB 24
8 PM
1920

Mr. T. A. Russell, (657347)
~~Dorset~~, Ont.

Bracebridge

Jailsburg

Sound

NOT CALLED FOR

M. F. B. 299.
500M.—9-19.
H. Q. 1772-39-278.

PARRY SO
MR 2
20

AM
FE 26
20
ONT

Branch D.L.O.
JUL
8

SVILLE
FE 24
2
ONT

BRACEBRIDGE
AM
JUL 7
20

BRACEBRIDGE
PM
MR 20
20
ON

Form D.M. [illegible] 394.
7004.—100M.—5/2/17.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at Eastbourne 9th October 1917.

No. 657347 Rank Pte Name Russel, T.A.

Local Unit 6th Res. Bn. Overseas Unit Age 22

Examination held at Canadian Military Hospital, Eastbourne.

DISABILITY
Overseas ~~Local~~
(scratch one out).

S.W. Middle Finger, Rt.

PRESENT CONDITION.

Amputation 5 weeks ago
Good result - requires Extension
for hand & left leg

CANADIAN MILITARY HOSPITAL
12 OCT. 1917
EASTBOURNE.

BOARD RECOMMENDS:—

1. Fit for Duty Command Depot Dr
2. Fit for duty after ..... weeks' physical training.
3. Fit for Temporary Base Duty ..... weeks.
4. Fit for Permanent Base Duty
5. Discharge

Signatures:—

Major CAMC
President.

Members

Capt. CAMC

Capt. CAMC

APPROVED

12 OCT 1917

Dated ..... 1917.

Capt. CAMC
For A.D.M.S.

To be made out in duplicate.

H.Q. 54-21-23-53

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 BN., C.E.F.

(2) Regimental Number 65-7347

(3) Full Name of Soldier Thomas Albert Russell

(4) Place of Birth Dorset

(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? No

If so, give number of boys and girls

Also their names and ages

M. F. W. 67.

300M.—5-16.
1772-39-954.

(SEE OTHER SIDE.)

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

If so, state name and address .....

(10) Is your Mother alive ?.....

If so, state name and address.....

.....

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

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.

.....

.....

(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.

.....

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

If so, in what Company ?.....

Have you made arrangements for payment of your Insurance premium.....

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 1916

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

No. 2 DISTRICT DEPOT

"CARMANIA" 8.2.19 R 943 EXHIBITION

AUDITOR | PAYMASTER

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

M. OR S. | REGT. No 657347 | RANK Pte. | NAME (IN FULL) RUSSELL, T.A.

NEXT OF KIN | RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? | DATE EFFECTIVE

TO WHOM PAID | RELATIONSHIP

ADDRESS Nil

PARTICULARS	EFFECTIVE DATE	AUTHORITY
Sdl. Rcd.		

ORIGINAL UNIT C.E.F. 109 Bn. E.O.R.R. | IF IN P.F. WHAT UNIT? | (BLOCK LETTERS, SURNAME FIRST) Same

PLACE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

DATE OF ATTESTATION 15/1/16 | TRANSFERRED TO | DATE | AUTHORITY

ASSIGNED PAY, $ 15.00 | DATE EFFECTIVE 1-3-19

PAYABLE TO Mrs Jennie Russell | RELATIONSHIP (mother) | ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS Orillia Ontario

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE

DISCHARGED PLACE Toronto | DATE 5/3/19 | REASON Mo W. | AUTHORITY DO 62 | IF ENTITLED TO POST DISCHARGE PAY Yes.

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	C.	$	C.	TOTAL CREDITS $	C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	DATE	COL. NO. 2 NO.	DATE	COL. NO. 3 NO.	DATE	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.	$	C.	TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.	PARTICULARS OR REMARKS
Balance from previous account																																					
31-1-19		1 10					280	40																													
									280	40		18-1-19	2698	Kinmel			9	73																			
												5-2-19		Boat			4	87																			
													2787	Boat			30	00																			
												8-2-19		Halifax			5	00																			
																							13	60													28 Feb 19
																															64	60	215	80			
1-2-19	28	1 10	30	80	120 00	214	80	258	60	93359.							250	-													250	00	8	60			
March	5	1 10	5	50	8	60	35	00																													183 Days W.S.G. Do 62.
							70	00	119	10			156385						119	10											119	10					
183 dys		W.S.G. 420							420																												

Date		W.S.G.		Saddler	
Mar 5		70			
Apr. 3	271659	70	70	850	1st W.S.G. Paid by #2 D.D.
May 3	279835	70	140	280	
May 30	715390	70	210	210	
W.R.77 Jul. 2	725526	70	280	140	W.S.G. PAID IN FULL
~~CK100~~ July 31	1027867	70	350	70	
		420	420		

FOR PAYMASTER WAR SERVICE GRATUITY — LIEUT.

60m.-11-18. L. L. 81777. M. & D. 9585.

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		
			$	C.	$	C.	$	C.	$	C.	NO.	DATE	NO.	DATE	NO.	DATE	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	

Date of Enlistment: Not Stated

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

R

Date of Assignment: May 1st 1918

08164

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

15-00			

5 R 1183 A.B.

PARTICULARS OF SEPARATION ALLOWANCE

No. 657347

Rank Pte. Promoted Reverted Discharge

Soldier's Name Thomas, Albert Russell

Battalion 162nd Bn.

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name Mrs. Jennie Russell.

Address Dorset, Ont.

Change of Address

1 MRS.JENNIE RUSSELL
DORSET
2 ONT 15 15.00
% 657347 PTE.THOMAS ALBERT RUSSELL
3 FIFTEEN DOLLARS
4

Date	Cheque No.	Amount S/A	Amount A/P	Total	
					Folio 015819. S.14.
May.	V 17048		15	15	
apr.	~~X 16480~~		~~15~~	~~15~~	Cancelled 25/4/18
June	U 23044		15	15	
July	E 22420		15	15	
Aug	U 34932		15	15	
Sept	X 44732		15	15	
Oct.	L 49218		15	15	S
Nov.	X 57024		15	15	S
dec	966858		15	15	S
Jan.	G 70326		15	15	S
FEB	H 79241		15	15	
			150	150	

REMARKS N.R. 162.

X 16480 Cancelled. 4.3.C. 24-4-18.
Rep. prisoner of War & Wdd. 28/8/18 per. C.L. 348. Folio 24. dated 31-10-18. a/c to remain open
C.F.X. rend. 13-11-18 showing 90.10 a.P.A. 31.10/9 Z.13.5/18
Prev. reported P. of W. now repatriated Dec. 6th/18 per C.L. #396. folio 9. dated 18.12/18. on file. E.S. 24-12-18

A/c Closed 28-2-19
Ret'd per Germania
Date 8-2-19 To 28/2/19
M.F.W. 1ST
M D # 2

MRO Destroy 57335 ok. 14/2/19 F.h.
Ren^d 14-2-19
C.H.B. 14-2-19

AUTHORITY FOR NEW ACC'T. L.M. 5-3-18.
M.K. Thorne 22.4.18.

AUTHORITY FOR NEW ACC'T.

M. F. W. 123.
400m.—-17—1772 39-1141
L. L. 22320—M. & D. 7993.

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS

M. F. W. 128.
4'Om. 6-7-1 72-39-1141
L. L. 22320—M. & D. 1931.

NAME Russell Thomas Albert

REGT'L No. 657347

H. Q. FILE No. 649.

RANK AND CORPS Pte, 21st Bn E. O. Reg.

FOLLOWS No.

FOLLOWS

NATURE OF CASUALTY (Germ 2nd Bn.)

CABLE NO.	DATE	
	N of K.	James Russell (father) Dorset, Ont.
Q 6 6 6 8-5	27-10-18	Rept. wdd. & mpsing Aug 28th. now
10-5		P. of W: wound.
Q 816	16-12-18	Repat P. of W. arrived Eng Dec 6th 1918.
HLDB 3941	13-12-18	

L. L. 26438. M. & D. 8207.

M. F. W. 42—50M.—8-17.
H. Q. 1772-39-893.

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
A428	No. 4 Gen. Cavalier	21-1-17	G.S.W. Rt. Arm left leg
B273	Bradford War Bradford	6-2-17	G.S.W. Rt. Arm & lt. leg
B295	Can. Conv. Ashcote Pk. Epsom	8-3-17	" " " " " " " "
B413	" " " " "	29-4-17	G.S.W. Rt. Arm & lt. leg (disch)
112	Can. Mil. Eastbourne	2-8-17	S.W. Mid. Finger Rt. (Old)
637	Discharged	13-10-17	S.W. Mid. Finger " L. 4-11-17
C63	No. 14 Can. Gen. Eastbourne	10-11-17	Painful Stumps 2nd
C112	" " Discharged	15-1-18	Finger Rt. Hand. 9-8 (Co. Regt.)

REGT'L No 657347

NAME Russell Thomas Albert

H. Q. FILE No. 649-

RANK AND CORPS Pte. 21st Bn. form. 162nd.

FOLLOWS No.

FOLLOWS

CABLE No.	CABLE DATE	NATURE OF CASUALTY
		C.
08225	31-1-17.	Adm. to No. 4 General Hosp Camiers Jan. 21st 1917. G.S.S.W. right arm. and G.S.S.W. left Leg Sev ✓

L. L. 12767—M. & D. 7390.

M. F. W. 42—50M.—12-16.
H. Q. 1772-39-893.

E.O.R.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
A 233	No 5 Can Fd. Amb.	29-5-18	Dermatitis
A 235	" " "Disch."	2-6-18	" "
A 352-1	Rept wounded & missing		28-8-18.
A 352-1	now rept P. of W. (sound)		

This space to be for numbers.

War Service Badge
Class
No. issued
War Service Badge
Class
No. issued

Proceedings on Discharge.

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

No. 657347

Rank Pte.

Surname RUSSELL THOMAS ALBERT

Christian name

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

Corps (Squadron, Battery or Company) 162nd Batt. (D.D.#.2)

Date of discharge MAR 5 1919

Place of discharge TORONTO, ONT.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 22 years months.
Height 5 feet 6¾ inches.
Complexion Fair
Eyes Blue
Hair Dk. Brown
Trade Bushman
Intended place of residence (To be given as fully as practicable.) Dorset Ont

Descriptive marks
Vacc. Scar Left Arm.
G.S.W Rt. Arm 21.1.17
Prisoner of War.

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

HAVING BEEN FOUND MEDICALLY UNFIT FOR SERVICE

Authority for discharge D.O.D.D.#.2 Pt 11 No 62

N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.

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

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

N.B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldiers and the Officer Commanding his Squadron, Battery or Company.

4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)

E.S.M.

M. F. B. 218.

200M.—5-18.
H. Q. 1772-39-113.

(OVER)

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

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

6. Medals and Decorations.....

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. John Russell *(Signature of Soldier.)*

(Date) MAR 5 1919 [illegible] Capt *(Signature of Witness.)*

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

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

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

.....*(Signature of Soldier.)*

10. **Statement of Service.**

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

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

11. **Confirmation of Discharge.**

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

(Place) TORONTO, ONT.

(Date) MAR 5 1919

(Signature) [illegible] Capt

For

O.C. No. 2 [illegible]

Reservations referred to at Para. 8.

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

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form	B. 263
Squadron / Battery / Company } Conduct Sheet,	"	B. 263a
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.