ATTESTATION PAPER.

109th OVERSEAS BATTALION, C. E. F.

No. 725213

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

DUPLICATE

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? ..... Savage
1a. What are your Christian names? ..... George Robert
1b. What is your present address? ..... 145 Richmond St W. Toronto
2. In what Town, Township or Parish, and in what Country were you born? ..... London, England
3. What is the name of your next-of kin? ..... George Savage
4. What is the address of your next-of-kin? ..... Unknown
4a. What is the relationship of your next-of-kin? ..... Father
5. What is the date of your birth? ..... July 9th 1875
6. What is your Trade or Calling? ..... Labourer
7. Are you married? ..... No
8. Are you willing to be vaccinated or re-vaccinated and inoculated? ..... Yes
9. Do you now belong to the Active Militia? ..... No
10. Have you ever served in any Military Force? ..... No
If so, state particulars of former Service.
11. Do you understand the nature and terms of your engagement? ..... Yes
12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE? ..... Yes

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, George Robt Savage, 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.

Geo. R. Savage (Signature of Recruit)

Date February 3rd 1916. Geo J Downey Lt (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, George Robt Savage, 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.

Geo. R. Savage (Signature of Recruit)

Date February 3rd 1916. Geo J Downey Lt (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 3rd day of February 1916.

Geo. A. Balfour (Signature of Justice)

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

Description of George Robert Savage on Enlistment.

Apparent Age 40 years 6 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 2 ins.

Chest measurement: Girth when fully expanded 35 ins.
Range of expansion 3 ins.

Complexion Fair

Eyes Blue

Hair DK Brown

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

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

Scar on back of neck

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 February 3rd 1916.

Place Lindsay

J. McCullock 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.

George Robert Savage 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.

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

Date February 4th 1916.

10-1-19
AD

Proceedings of Court of Inquiry or on men reported Missing on Active Service.....

Attestation Papers.....1.....

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet.....

Compulsory Stoppages.....

Casualty Forms.....2.....

Proceedings on discharge.....2.....

Corps History Sheet.....

Date and No. of Deposit Receipt for Purchase Money and Amount.....

Disc
Parchment Certificate.....1.....

Medical Report for Invalids.....4

Medical History Sheet.....1

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet.....

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate.....2.....

Form* 2.D.D.10-1 R122
A.7.B.122-1
J.S.C.32-1
M.7.W.2571-1
R+O 6045-1
C.A.D.C. 5019-1
M.7.B 465-1
1 Pay-Card

M. F. W. 62.
100m.—6-17.
H. Q. 1772—39—935.

DISCHARGE DOCUMENTS

M

R. O. No.....
H. Q. No.....

Name SAVAGE, GEORGE ROBERT

Regt. No. 725213 Rank A/Cpl.

Corps *2 D.D. Form. 109th. Bn.
Med. Unfit

Rest 7.10.19

Discharged - 14-1-19
644-S.2973

05313

H

649-S-29732 CEF

SAVAGE, George Robert 725213 Pte.

Medals: Prev. Despd.

Cross: Widow: A-2-70A
to landlady

Mother:

S.O.S. 23-12-18

Number 725213 Rank Pte

Surname SAVAGE

Christian Name George Robert

Units 38th Co Inf Theatre of War France

Date of Service 6-12-16

Remarks

Latest Address

91 University Ave
Toronto

Roll No B. Page 9006

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.

649.8-29732.

CARD No. 2

SURNAME. Savage,

CHRISTIAN NAMES George Robert

REGL. No. 725 213 RANK Pte.

UNIT 109th Batt.

FORMER CORPS Nil.

FOLL. 2.D.S.M.4.23-12-18. 2 A.D. 246 G.14-12/18. 2.AP.

NEXT OF KIN.

NAMES IN FULL Savage, George

RELATIONSHIP TO SOLDIER Father.

ADDRESS Unknown.

CHANGE OF ADDRESS

COUNTRY OF BIRTH England, London. DATE July 9th 1875.

PLACE OF ATTESTATION Lindsay, Ont. DATE Feb. 3rd 1916.

Sailed from Halifax per S.S. "Olympic"

23-7-16. 488/31 R | C 30-11-18 238/14

L. L. 90589.—M. & D. 6312. M. F. W. 22. 100m.—1-16. H. Q. 1772-39-839.

MARRIED SINGLE Yes. WIDOWER

TRADE OR CALLING Labourer. RELIGION C. of E.

DESCRIPTION.

APPARENT AGE 40 YEARS 6 MONTHS

HEIGHT 5 FEET 2 INCHES

CHEST MEASUREMENT 35 INCHES EXPANSION 3 INCHES

COMPLEXION Fair. EYES Blue. HAIR D. Brown.

DISTINGUISHING MARKS Scar on back of neck.

MEDICAL EXAMINATION. PLACE ~~Lindsay, Ont.~~ DATE ~~Feb. 3rd, 1916.~~

Present Add. 91 University Ave. Toronto Ont.

Letter 18-9-19

No. 725 213. RANK Pte NAME Savage. H. R.

T. O. S. 1-2-16. UNIT 109th Battalion.
D.O.B. 5.4-2-16

M. D. 3

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916	1916.			
Feb 1.	Feb. 29	✓		
		✓		
Mar.				
April.				
May.		✓		
June.		✓		
July.		✓		
		✓		

UNIT SAILED
JUL 23 1916

L.

*Name: Savage, Geo. Robert Rank: ~~Pte~~ Cpl Regtl. No. 725213

Fyle Depot:

Original unit: Present unit: 109th Bn. M. or S. ✓ Age: 43 Religion: C.E. Ref. H.Q.:

Port, ship and date of arrival: Scandinavian. St. John N.B. 30-11-18.

Next of kin: Father. Geo. Savage. 145 Richmond St., W., Toronto.

Address on leave: 145 Richmond St. W., Toronto.

Address on discharge: Same address

Transportation issued Yes / No Date: ---------- Character on discharge: No record

Previous occupation: Labourer. Date and place of enlistment: Lindsay. Ont. Feb. 3rd 1916.

Diagnosis: Emphysema, Rheumatism Date of Medical Boards: Dec. 16th/18.

Date.	Remarks.	Pt. 2 Order No.
T.O.S.		
19-11-18	Posted to Cas. Co. (Park School) 30-11-18.	
	Leave from 2-12-18 to 16-12-18.	
	Subs. from " " 2	232

(over)

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

(over)

Date.	Remarks	Pt. 2 Order No.
23/12/18	S.O.S DISCHARGED "HAVING BEEN FOUND MED. UNFIT"	
	(to take further OUT-Patient treat(t with the ISC)	
	(91 days PDB & clo' all'ce)	246

M. F. W. 192
150m.—5-18
1772-39-1243

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 725213. (Rank) A/Cpl.

Name (in full) SAVAGE GEORGE ROBERT. enlisted in

the 109th. Bn.

CANADIAN EXPEDITIONARY FORCE at Lindsay, Ont. on the 3rd.

day of Feb. 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 43

Height 5' 8"

Complexion Fair.

Eyes Grey

Hair Brown

Marks or Scars Vacc. scars on Left Arm.

G. R. Savage
Signature of Soldier

J. R. Robson Lt
Issuing Officer

O. C. Discharge Sections,
No. 2 District Depot
Rank

Appointment

Date of Discharge Dec. 23rd. 1918.

Signed at Toronto, Ont. this 23rd. day of Dec. 19 18

in Military District No. 2.

File Reference No. R.L.

No. 2
DEC 28 1918
DISTRICT DEPOT

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

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.

C.A.D.C.5009.
20M-1[illegible]18.

2

725213
Pte Savage G.R

DENTAL CERTIFICATE.

The following Certificates will be attached to the Medical History Sheets of all Other Ranks being returned to Canada for disposal.

C O R.D

Date of Examination.	Present Dental Condition.	In case of loss or decay of teeth. Is the loss due to wounds, injury or disease directly attributed to Active Service?	Has he ever declined Dental Treatment.	Recommendation.
CANADIAN DISCHARGE DEPOT OCT 28 1918	Lit		H Cowan Capt.	C.A.D.C

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

District 2

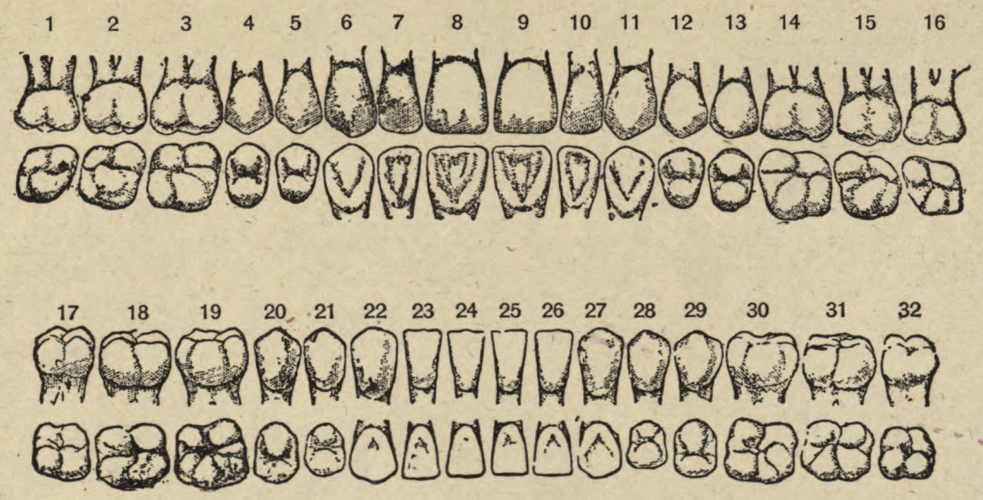
Name of Soldier Lavoye - George - Robert

Rank Gte.

No. 722213

Regiment

Cas. Co. No. 2 D.D.



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.
CASUALTY Co. # 2 D.D.
Date DEC 17 1918

Certificate issued for Dentures

A B Temple
Major

725213.

ORIGINAL

ORIGINAL

MEDICAL HISTORY SHEET.

Surname: Savage Christian Name: George Robert

Examined: on 3rd day of February 1916; at Lindsay

Birthplace: City or Town: London; County: England

Apparent age: 40 years.

Trade or occupation: Labourer.

Height: 5 Feet 2 Inches.

Weight: 117 Lbs.

Chest measurement: Minimum 32 inches; Maximum expansion 35 inches.

Physical development: Good

Small-Pox Marks: None.

Vaccination Marks: Arm Right. None Left. Nine; Number: Nine

When Vaccinated last: Feb. 3rd 1916.

(a) Marks indicating congenital peculiarities or previous disease: None

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

Approved by J. McCullock Capt. Medical Officer

Rank 109th Overseas Battalion, C. E. F.

Date	Fit or Unfit	Examined for Re-engagement.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

17 SEP. 1918

Date	Result	Vaccinations.
3.2.16	Nil	J. McC. J. McCullock M.O.
3.3.16	Nil	J. McCullock M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
15/4/16	Good	J. McCullock M.O.
25/4/16	Good	J. McCullock M.O.
2/5/16	Good	J. McCullock M.O.

Enlisted on 3rd day of February 1916 at Lindsay

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	109th Batt. C.E.F.	725213.		3.2.16.
Transferred to	38th Bn.			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
Seaford	18-10-18	Debility	Bttn. Ind + F.W. Macleod President, Standing Medical Board
Seaford	21-10-18	ditto	Bttn. Ind + F.W. Macleod President, Standing Medical Board

Park School Bks, Tornto. Dec. 14/18. Emphysema. & Rheumatism.
B.3. Major.
President, SMB.

CANADIAN

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

M. F. B. 313.

150M.—8-15.
H. Q. 1772-39-439.

Surname [illegible]

Christian Name [illegible]

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital.			Dates of Discharge from Hospital.			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.
		Day	Month	Year	Day	Month	Year				

DBM

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

M. F. W. 54. (A. F. B. 103.)
250M.—1-16.
H. Q. 1772-39-920.

Casualty Form—Active Service.

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

Regimental No. 425213 Rank Private Name Savage George Robert

Enlisted (a) 3-2-16. Terms of Service (a) D of W. Service reckons from (a) 3-2-16.

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) Laborer.

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.	
	O.C. 109th Bn	Proceeded overseas for service with 38th Bn.	with leg	4/12-16	D.O. Part 2 - 339.
					A W Haselting CAPTAIN, ADJUTANT, 109TH BATTALION CAN. INFANTRY.
6 12 16	C.B.D.	TAKEN on STRENGHT 38th Havre		6 12 16	N. R. PII O. 42 - 13 12 16
13. 1. 17.	ac C.T. Sch.	Classified "P.B" attached to Central Training School	Havre	12.1.17.	N. R. PII O. 27 d. 6. 3. 17. B. 213. DCS.
13. 1. 17.	C.B.D.	S.O.S. - "P.B" attchd Central. Trng Camp.	Havre	13.1.17.	N.R. PII O. 11 d. 20.1.17. {See PII O. 27 for date correct.

(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.

725213
Savage
G R

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				
5. 7. 17.	Can. Eng. Sch. House.	Proceeded to #1 Training School.	Etaples	3.6.17.	KJ/16/4553
9. 6. 17.	#1 Trg. Cp. Etaples	T.O.S. from C.T.S. Ceases to be att to C.T.S. on being att #1. T. Cp.	Etaples	5.6.17.	B213 ~~D.O. 139~~ PII 0.73 d-24.7.17
26. 8. 17.	"	Classified T.B. Training underweight.	Etaples	26.8.17	W3339-93.
30. 8. 17.	4 C.B.D.	T.O.S. Gas Board.	Base.	30.8.17	KR68.
5. 9. 17.	"	Classified P.B. unarmed weight		5.9.17	W3339/109.
11. 10. 17.	"	" "	"	11.10.17	" /169
3. 11. 17.	"	Granted 14 days leave of absence.		3.11.17	B.213.
24-11-17	"	Rejoined from leave.		20 11-17	B213
3. 12. 17.	"	B.3. underweight	Base	3.12.17	W.3339-259-264 D.O. 15-28 2/18.
		General duty.	"	28.11.17.	KR-16-32359
15. 12. 17	"	Class. B3. ditto.	"	15.12.17	W3339-279
19. 1. 18	"	" " "	"	19.1.18.	" 326.
16. 2. 18	"	" " "	"	16.2.18	" 372
27. 4. 18	C.I.B.D.	S.O.S. 38th Bn. Ty. to C.I.B. Depot. (W.O. 121/05/#480(S.D.2).		20.4.18.	B213. D.O. 43-1918.
"	"	T.O.S. Can Inf Base Depot.	Etaples	21.4.18	Part II 1. 8/5/18
29.8.18	"	Proceeded to Lab Pool.		29.8.18.	KR463
8.9.18.	aaf.	S.O.S Can Inf Base Depot. on transfer to Can Lab. Pool	"	8.9.18.	KR. 33406. Part II 30. 1918.
	NHS	T.O.S Can Lab Pool. from K.D. BD.		9.9.18.	KR 33406, PII 145. 13/9/18.
	aaf CG-BD	Transferred to England. Surplus auth and posted to Gen Depot Shorncliffe		10/9/18.	KR 33406 NR 446 PII 145 13/9/18.

218 C.B. Johnston Captain for Lt Col. a.a.g. Canadian Troops S.O.S. 3rd Echelon

2nd Sheet

Army Form B. 103. Regimental Number 725213

Casualty Form—Active Service.

Regiment or Corps: Can Lab Pool

Rank: Pte Surname: Savage Christian Name: George Robert

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...			
13.9.17	Genl Depot	Tot from Can Lab Pool	Seaford	4.9.18	DOR 18
					Pt. for Colonel i/c Records Lieut.
21.9.18.	"	S.O.S to S.O.R.D. Seaford		10.9.18	PTO. 225
					Lieut. for O.C. CANADIAN GENERAL DEPOT
	1st C.O.R.D.	T.O.S. 1st C.O.R.D.			Pt. II D.O. No.

(a) In the case of a man who has re-engaged for, or enlisted in Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.

(b) Signaller, Shoeing-Smith, &c

(17591.) Wt. W 1887—P 1124. 1,000,000. 6/18. D & S. Form B/103. (E. 1256.)

[P.T.O.

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				
28/9/18	Gen Depot	TOS from General Depot rattached to Depot Co	Seaford	19/9/18	Pt II Do 244
28/10/18	E of R D	beases in Depot on command to lt D Buxton.	Seaford	26/10/18	Pt II Do 269
					for Officer Commanding, East Ont. Regt'l Depot.
28 OCT 1918	Attached C.D.D. Buxton for return to Canada, Part II Order No. 255 Ceases to be attached C.D.D. Buxton on embarking for Canada. J. W. Loch. Lt. for Lt. Col. Commanding Canadian Discharge Depot.				
19/11/18	Lpool	Embkd Scandinavian			Capt
NOV 19 1918	O/S	T.O.S. No.2 District Depot, Part II, D.O. No. 232			Lieut. Capt For O.C. No. 2 District Depot
		Dis. #2.D.D. Dec. 23rd.1918. Pt11#246. O. C. Discharge Sections, No. 2 District Depot			

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.

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

(2) Regimental Number 725 2183

(3) Full Name of Soldier George Robert Savage

(4) Place of Birth London England

(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

M. F. W. 67.

300M.—5-16.
1772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive? Yes

If so, state name and address Don't Know

(10) Is your Mother alive? No

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? No

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 July 20th 1916

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

R—122

LTR

Rank | Name SAVAGE, George Robert | Reg'l No. 725213

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

Place and Date of Enlistment Lindsay, 3rd, February, 1916. Place of Birth London, Enhgland.

Name and Address, Next-of-Kin George Savage. c/o Mrs K. Tabrar 116 Reville Rd., Stoke Newington, London, N. Relationship Father.

Assigned Pay Monthly $ | Payable to | Relationship

Separation Allowance $ | Payable to | Relationship

Discharge, Date and Place | Reason | Character

N/E. R.D. No. 8529.
File R.L.
Category Can. O.R.

H. W. & V., Ld.—7165-16.

A.F.B. 103 CHECKED 11 DEC

Report. Date.	Report. From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS. Taken from Official Documents.
		Arrived in England per H.M.T. 2810 31-7-16			
4.12.16	O/109th Bn	SOS on tfr to 38th Bn	Witley	4.12.16	Pt II DO 339
13.12.16	38th Bn	T-O-S on tfr from IC9th ~~Bmsht~~	Field	6.12.16.	Pt II DO 242.
20.1.17	✓	Att for duty to Central Training Camp	In the Field.	13.1.17	Pt II D.O. 11.
6.3.17	✓	Pt II D.O. 11 cancelled. following substituted Class. P.B. att for Duty with Central Training School Havre	✓	12.1.17	Pt II D.O. 27.
24-4-17	✓	ceases att 4 C.T.S. Havre & is att 4 No 1 Training Camp. Etaples & classified "P.B"	Pte ✓	5-6-17	" 73
8-5-18	38th Bn.	SOS to Can. Inf. Base Depot	Pte ✓	20-4-18	" 43, C I B D 1d/15/5/18
13-9-18	Inf Pool	T.O.S. from C.I.B.D.	Pte Field	9-9-18	Pt II O. 145 & (C.I.B.D 20d/17.9.18) S.O.S
13.9.18	Gen. Depot	T.O.S from Labour Pool	Pte Sheffe	11.9.18	D.O. 218

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.
13-9-18	Lab Pool.	Trans. to England surplus unfit				
		& posted to Fuel Depot, Selliff	Pte	Field	10-9-18	Pt II O. 145.
21-9-18	Gen. Depot	SOS to ~~CORD.~~ CORD		Seaford	19-9-18	" 225 amdt in Pt II 233d/1-10-18
28-9-18	CORD.	TOS from Gen. Dep. Selliff	Pte	Seaford	19-9-18	Pt II 244.
28-10-18	CORD.	on Cum^d to 1st COD Buxton	Pte	"	26-10-18	" 269
6-12-18	"	leave on com to C.D.D. & to S.O.S. to C.E.F. in Canada	"	Witley	19-11-18	— 302

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

Name Savage, G. R
Surname Christian Name

Regimental Number 725213 Rank Private

Address (in full) 145 Richmond St.W., Toronto, Ont.

Unit #2. D. D.

Original Unit

District where paid Military District #2.

Date of Discharge 23rd. December, 1918.

P. D. P. Filing Number

Rates:—Regimental pay $ per diem: Field Allowance $ per diem. Separation Allowance $ per month.

L. L. 46038—M. & D. 9245.

Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Over-payments to be Recovered	Total Amount Paid
	Cheque No. A	Date	Amount 30 days	Cheque No. B	Date	Amount 30 days	Cheque No. C	Date	Amount 31 days		

Remarks: Account opened 21st. December, 1918.

M. F. W. 127.
25M.—8-18.
1779-39-1140.

File No.....

WAR SERVICE GRATUITY.

Register No.....

Reg. No. .....

Name.....

Address.....

.....

.....

Pay Soldier $.....

Clerk .....

Dependent.....

Address.....

.....

.....

Pay Dependent $.....

Days..... Rate..... Due.....

Less P.D.P. credited.....

Less further Dr. Bal. or overpayment.....

Net.....

W. S. G. File No .....

Dec'n No .....

Award..... days at $ .... per day $

S. A..... months at $ .... per mo. $.....

Less P, D. P. Credited $.....

$.....

Less further debit balance $.....

Net due paid as below

PS SOLDIER TO DEPENDENT

O	Ag. No	Ch No	Amount	A. No	Ch No	Amount
1						
2						
3						
4						
5						
	Total			Total		

Date	Ck. Order	Ck. No.	Amount		Remarks.	Date	Ck. Order	Ck. No.	Amount.	
1						1				
2						2				
3						3				
4						4				
5						5				
6						6				

495-D.P.-100M-6-19 (10248).

GEN'L AUDITOR
Posting checked by
.....
Date.....

a. P. 16034 - G - 18

M. F. W. 41a.
120m. 1-18
1772-39-1213

English L.P.C. No. S. 826

Name Savage George Robert

Regt'l No. 725213 Rank Pte. File Numbers { P.M. 25. 86 / P. M. 25 - Sa.

Former Units E. O. R. D. Original Unit 109 Bn.

Date of arrival in Canada 30 - 11 - 18 Boat Scandinavian Port of Disembarkation St. John

Rates of Pay:—Regt'l. $1.00 Field 10 cts. Date of arrival in M.D. 2

Separation Allowance. Date paid to Nil Rate Nil. If continued by Chief Paymaster, England Nil

Assigned Pay. Date paid to Nil Rate Nil. If continued by Chief Paymaster, England Nil

Name and address of Beneficiary { Nil / Nil

Pay claimed on English L.P.C. to 31 - 10 - 18 to be paid by new Unit from 1 - 11 - 18

Name of new Unit No. 2 District Depot Date L.P.C. forwarded to new Unit 16 - 12 - 18

a. P. Charged on English L. P. C. to Nil

L.L. 34682—M. & D. 8645.

N.S.D. 13-12-18
RGS. 14/12/18

Credit Balance shown on English L.P.C.	OTHER CREDITS DUE	TOTAL CREDITS	Charges to be made on account of advances since English L.P.C. made out: On Boat	a. P. ~~At Cl. Depot~~ &c.	OTHER CHARGES	TOTAL DEBITS	BALANCE TO NEW UNIT: Credit	BALANCE TO NEW UNIT: Debit	REMARKS
$ c.	$ c.	$ c.	$ c.	$ c.	$ c.	$ c.	$ c.	$ c.	
55588		55588							
					943				14-11-18 a.R. 2402
			487						21-11-18 On Boat
			500						30-11-18 St. John
			5000						30-11-18 St. John
						6960			
			Credit Balance			48628			
		55588				55588	48628		

M. F. W. 41a.
120m. 1-18
1772-39-1213

English L.P.C. No.....

Name.....

Regt'l No.....Rank.....File Numbers { .....
.....

Former Units.....Original Unit.....

Date of arrival in Canada.....Boat.....Port of Disembarkation.....

Rates of Pay:—Regt'l.....Field..... Date of arrival in M.D.....

Separation Allowance. Date paid to.....Rate.....If continued by Chief Paymaster, England
.....

Assigned Pay. Date paid to.....Rate.....If continued by Chief Paymaster, England
.....

Name and address of Beneficiary { .....
.....

Pay claimed on English L.P.C. to.....to be paid by new Unit from.....

Name of new Unit.....Date L.P.C. forwarded to new Unit.....

Credit Balance shown on English L.P.C.		OTHER CREDITS DUE		TOTAL CREDITS		Charges to be made on account of advances since English L.P.C. made out				OTHER CHARGES		TOTAL DEBITS		BALANCE TO NEW UNIT				REMARKS
						On Boat		At Cl. Depot &c.						Credit		Debit		
$	c.	$	c.	$	c.	$	c.	$	c.	$	c.	$	c.	$	c.	$	c.	

M. F. W. 41
100M-1-18.
1772-39-889.

Name a/Cpl Savage GR

Regimental No. 725213

Unit CoRD 109th Bn

Date of enlistment

Place of "

Married (yes or no) No

Amount of pay assigned monthly $ Nil

To whom payable

Name and address of next-of-kin

Scandinavian 30/11

Date and place discharged

Reason for discharge

Character on discharge

Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
Nov 1	Dec 23	53	1	53	53	10	5 30	12 00								Dis 19/11 Can 30/11
								48 28								leave 2/12 - 16/12 / 232
								35 00	591 58	83360		591 58			591 58	Drs 23/12 Po 246.
																Out Dec
																(7)

M. F. W. 41
100M-1-18.
1772-39-889.

Name.....

Regimental No.

Unit

Date of enlistment

Place of "

Married (yes or no)

Amount of pay assigned monthly $

To whom payable

Name and address of next-of-kin

Date and place discharged

Reason for discharge

Character on discharge

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date					

P. 559

Married or Single: Single

Place of Birth: London Eng.

Name and Address of Next of Kin: George Savage

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. 725213 Rank: Pte Name: Savage George Robert

If in Permt. Corps What Unit } Unit: 109th Bn Transferred to: 38th Bn Date: 16-1-17 Authority: D0339 4-12-16

Permanent Force Allowances Transferred to Date Authority

Place of Attestation: Lindsay Ont Transferred to Date Authority

Date of Attestation: Feby 3rd 1916 Transferred to Date Authority

Assigned Pay Monthly $ Date Effective

Payable to Relationship

Assigned Pay Monthly $ Date Effective

Payable to Relationship

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

Discharge Date and Place Reason and Authority

Account Transferred to Non-Effective Branch (Date)

Account Transferred to Officers' Pay Branch (Date)

C1

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																		2386				
														2386	2386																				
Aug 31	31	1.00	31			10	3	10							34 10	18	9/8/16							- 924						924	4822				
Sep	30		30				3								33	50	31/8/16	81	15/9/16					- 730	- 730					1460	6662				
Oct	31		31		31		3	10							34 10	114	30/9/16	160	15 10/16					- 973	- 730					1703	8369				
Nov	30		30				3								33	188	31 10/16							- 973						973	10696		60		
																291	30.11.16							- 486											
Dec	31		31				3	10							34 10	241	15.11.16							- 730						1216	12890				D0339-4-12-16 Apd to 38th Bn Eff 16-1-17
1917			15 30																																
Jan	15	1.10	16 50												16 50																14540				
Jan. 15-31	16	1.00 .10	17 60												17 60											- 4 36		—		4 36	15864		90	6864	
Feb.			262 40												226 26											- 4 36				6762					
1-28	28	"	30 80												30 80											- 4 36		—		15 69	17375		105	6875	
																										- 6 97									
																										- 5 23									
																										- 5 23									
Mar	31	"	34 10												34 10											- 4 36		—		20 05	18780		120	6780	
																										- 5 23									
Apr.	30	"	33 00												33 00													-			220 80		135	8580	
May	31		34 10												34 10											- 5 23		-		10 46	244 44		150	9444	
																										- 5 23									
																										- 5 35									
June	30		33 00												33 00											- 5 35		-		10 70	266 74		165	101 74	
			367 40											23 86	391 26									48 66	14 60	61 26				124 52	266 74				

725213 Pte Savage G R

DATE	PAY No. of Days	PAY Rate	PAY Amount $	PAY Amount c.	FIELD ALLOWANCE No. of Days	FIELD ALLOWANCE Rate	FIELD ALLOWANCE Amount $	FIELD ALLOWANCE Amount c.	WORKING OR SPECIAL PAY No. of Days	WORKING OR SPECIAL PAY Rate	WORKING OR SPECIAL PAY Amount $	WORKING OR SPECIAL PAY Amount c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE Credit	BALANCE Debit	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
			367	40										23 86	391 26									48 66	14 60	61 26				124 52	266 74		165		
July	31	1/10	34	10											34 10																300 84		180		
Aug	31		34	10											34 10																334 94		195		
Sept	30		33												33							704	29.6	CQBD Estab		- 4 46				8 92	359 02		210		
			468	60										23 86	492 46							1970	18.7.18	1st Gen Hosp.		- 4 46				133 44					
																								48 66	14 60	70 18									

MONTH	PARTICULARS		CR. 1	CR. 2	PARTICULARS		DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED PAY	SEP. ALLCE. ENG.
1917													
			~~359 02~~								359 02	210	
Oct.	31	1/10	34 10		CR. 2734	22/8/17	12th C.G.Hosp.	4 46					
					"	"	"	2 68			385 98		
			34 10					7 14					
Nov.		P.P.	33		CR. 740	10/10/17	4 CSBD	7 14					
Dec.		P.P.	34 10		CR. 843	1-11-17	"	7 14			438 80		
			67 10					14 28					
1918 Jan		P.P.	34 10		CR. 1971	2/11/17	2CSBD	97 33					
					CR. 914	10/11/17	"	1 78					
					CR. 1419	2/1/18	"	4 46			369 33	270	
			34 10					103 57					
Feb.		P.P.	30 80		CR. 566	19/1/18	"	4 46			395 67	285	
			30 80					4 46					
Mar.		P.P.	34 10		CR. 1830	16/2/18	"	4 46					
					CR. 1964	9/3/18	"	4 46			420 85	300 00	
			34 10					8 92					

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY	* ENGLAND OR CANADA.	SEPARATION ALLOWANCE.	* ENGLAND OR CANADA.
EFFECTIVE DATE:–		EFFECTIVE DATE:–	
AMOUNT:–		AMOUNT:–	

NAME:– SAVAGE George Robert

NUMBER:– 725213

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.

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Private

UNIT AND TRANSFERS

ORIGINAL UNIT:– 109 Bn.

DATE ACCOUNT FIRST OPENED:– 1-8-16

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			38 Bn.
1	1/6/18	19/6/18	C.J.B.D.
Do. 244. 28/9/18.	19.9.18		E.O.R.D.
	1/11/18	26/11/18	B.E.F. Cogn 26 Canada

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
10.10.18	6609	Seaford £1	~~4 67~~				
24.10.18	7226	" £1	~~4 87~~				
			9 74				

DAILY RATES OF PAY AND ALLOWANCES

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

PARTICULARS OF RENDERING NON-EFFECTIVE Transferred to Canada E.O.R.D. NR. 59 d/24.10.18 Disposal L.P.C. 555 88

MONTH 1918	PARTICULARS	CR 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Mar 31	Bal Fwd								420 85	300	
Apl	P.P	33		AR. 3 6/4/18 2 C 1 B D	4 46						
				AR 202 21/4/18 "	4 46				449 93	315	
		33			8 92						
May	P.P.	34 10		" 393, 11/5/18, C.J.B.D.	4 46						
		34 10		" 515, 18/5, "	4 46				470 11	330	
					8 92						
June	P.P.	33		759 3/6 C J B D	4 46						
				884 15/6 "	4 46						
				1092 29/6 "	4 46				489 73	345	
		33			13 38						
July	P.P.	34 10		1323 16/7 "	4 46				519 37	360	
		34 10			4 46						
Aug	P.P.	34 10		1520 2/8/18 C.J.B.D.	4 46						
				1635 14/8/18 "	4 46				544 55	375	
		34 10			8 92						
Sept.	P.P	33		9615 8.9.18 G.B.D.	4 46						
				6173 23.9.18 C.J.B.D.	48 67					390	
				6206 23.9.18 3rd C.C.D.	4 87						
				1693 13.9.18 Gen Depot.	9 97				509 58		
		33			67 97						
Oct.		34 10		AR 6609. 3 C.C.D 10.10.18.	4 87						
		21 94		" 7226. " 28.10.18	4 87				555 88	405	
		56 04		555 88	9 74						
Nov				AR 2402 14/11/18. C.R.D. Bux Eur	9 73						
					9 73				546 15		

Int. on Def Pay

CANADIAN
ASSIGNED PAY AUDITED
No Augmt
Johnson
AUDIT CLERK
DATE 27/5/19

Checked Gill
30-10-18

NUMBER RANK NAME

Month	Particulars	Cr. 1.	Cr. 2.	Particulars	Dr. 1	Dr. 2	Dr. 3.	Dr. 4.	Balance	Deferred	Separation

COPY

ALS

MILITARY SERVICE ACT, 1917.

MEDICAL HISTORY SHEET.

1. Surname SAVAGE Christian name George Robert

2. Number of report for service or claim for exemption according to Postmaster's Receipt or schedule .....

3. Consecutive number on schedule of men reporting for service (if he appears on it) .....

4. Address (including street and number if any) .....

The following are accurate particulars with re ard to the above named man as ascertained by the medical examination on the 3rd day of February, 1916, by the undersigned medical board sitting at Lindsay, Ont.

5. Age as stated ..... Years ..... Months. 6. Apparent age 40 Years ..... Month

7. Height 5 Feet 2 Inches. 8. Weight 117 Pounds.

9. Chest measurement { Minimum 32 Ins. / Maximum 35 Ins. } 10. Complexion ..... { Eyes ..... / Hair ..... }

11. Physical development Good { Good / Fair / Poor } 12. Smallpox marks None

13. Number of vaccination marks { Right arm None / Left arm Nine } 14. When vaccinated last Feb. 3, 1916

15. Distinctive marks and marks indicating congenital peculiarities or previous disease None

16. Slight defects but not sufficient to cause rejection None

The man denies having had { Rheumatism, Tuberculosis, Nervous or Mental disorder. } Epilepsy Syphilis, Asthma.

We find no evidence of past { Rheumatism. Tuberculosis, Nervous or Mental disorder. } Epilepsy Syphilis Asthma

(Strike out disease admitted or suspected)

We have examined the above named man in accordance with the C. E. F. Regulations for medical examinations, and he is placed in Category [ ]

17.
(a) Vision. R. ..... L. .....
(b) Hearing. R. ..... L. .....

APPROVED: J. McCulloch, Capt. ..... President.

..... Member. ..... Member.

Signature of Man .....

Date	Result	Vaccinations	Date	Result	Anti-Typhoid Inoculations, Etc.
3-2-16	Nil	J.McCulloch M. O.	1916 18-4.	Good	J. McCulloch M. O.
3-3-16	Nil	J.McCulloch M. O.	25-4	Good	J. McCulloch M. O.
		M. O.	2-5	Good	J. McCulloch M. O.

Joined 3rd *day of* February *19*16 *at* Lindsay

	Corps	Reg'tl Number	Habits	Date
Joined on enlistment	109th Batt. C.E.F.	725213		3-2-16
Transferred to	38th Bn.			

If raised in category, record category in a square. The M. O. will initial and date.

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station	Date	Disease	Result
Seaford	18-10-18	Debility	Biii not - G.W.MacNeil, Capt.
Seaford	21-10-18	ditto	Biii not - G.W.MacNeil, Capt.
Park School Bks. Toronto	17-12-18	Emphysema & Rheumatism. D.3.	Ira ---------- Major. President SMB

N.B.—This sheet is 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.

300M.—6-18.

1772-39-439.

Christian Name.....

Surname.....

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital			Dates of Discharge from Hospital.			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.
		Day	Month	Year	Day	Month	Year				

This space to be for numbers.

M

Proceedings on Discharge.

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

R.L.

T

No. 725213.

Rank A/Cpl

Surname SAVAGE.

Christian name GEORGE ROBERT.

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

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

Date of discharge DEC 23 1918

Place of discharge TORONTO, ONT.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 43 years months.

Height 5 feet 2 inches.

Complexion Fair

Eyes Grey

Hair Brown

Trade Labourer.

Intended place of residence (To be given as fully as practicable.) ~~145 Richmond St. W. Toronto, Ont.~~ # 94 University Ave, Toronto

Descriptive marks

Vacc. scars on Left Arm.

Discharged 4-4-19 P.29 732

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

" Medically Unfit."

Authority for discharge D.D. Daily Orders 246

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.)

K.C.D. 11.2.21.

K.C.D. 6-10-1920

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. George Robert Savage ..... *(Signature of Soldier.)*

(Date) DEC 23 1918 A. F. Harvey Lt. ..... *(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.

DEC 23 1918

(Date).....

(Signature) R. Robertson

O. C. Discharge Depot,
No. 2 District Depot

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.)

Nil

G. R. Savage

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.

EMBKD
19-11-18

This space to be left blank for the Chelsea Number.

Army Form B. 268.

Proceedings on Discharge.

(When forwarded for confirmation the documents named on page 4 should be enclosed.)

No. 925213 Army Rank Gnr

Name Savage George Robert
(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)

Corps C. O. R. R.

Battalion, Battery, Company, Depôt, &c. 109 Bn
(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)

Date of discharge

Place of discharge

1. *Description at the time of discharge.*

Age 43 years months
Height 5 feet 2 inches
Chest measurement { girth when fully expanded ins. / range of expansion ins.
Complexion
Eyes
Hair
Trade Labourer
Intended place of residence (To be given as fully as practicable) { Toronto / Ont.

Descriptive marks.
Scar on back of Neck.

2

(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)

2. The above-named man is discharged in consequence of
Returned to Canada in accordance with instructions under Paras. 7 & 9 of A.G.5-1-22 of April 5th, 1918.

Category D. 3.

(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)

To be filled in on the soldier quitting the Colours.

3. Military character :—

4. Character awarded in accordance with King's Regulations :—

Certified that the above is an accurate copy of the character given by me on Army Form B. 2067* and that Army Form D. 489 was awarded in this case.

Initials of Commanding Officer.

Army Form B. 2088 has been issued to*

* Strike out if not applicable.

D. D. & L., London, E.C.
(A8689) Wt. W7717/M2626 500,000 9/17 Sch. 39 Forms B. 268 41

[OVER.

5. He is in possession of the following number of G.C. badges (If the man is a N.C.O. and enlisted prior to 1st July, 1881, the number he would have been entitled to had he not been promoted should be stated).

Is it probable that he will be entitled to another good conduct badge before the confirmation of these proceedings?

Classification for service, or proficiency pay... ... ... Class _____

6. **Campaigns, Medals and Decorations** (21 Months France)

Certificate of education ..... _____

7. His accounts are correctly balanced, and I have impartially inquired into all matters brought before me **in accordance with Regulations.**

(Place) _____ _____

(Date) _____ *Commanding* _____ *Battn.* _____ *Regiment.*

8. *Certificate to be signed by the soldier on discharge.*

I hereby acknowledge that I have received all my pay and allowances (including clothing allowance), and all **just demands up to the present date, subject to the reservations of the claims noted on the 3rd page.**

(Place) _____ _____ *(Signature of Soldier.)*

(Date) _____ _____ *(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 at 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 towards engagement to _____ (the date to which the record of service is completed) _____ years _____ days.

Further service " " _____ (the date of confirmation of discharge) ... ... _____ " _____ "

Total ... _____ " _____ "

11. *Confirmation of discharge.*

The discharge of the above-named man is hereby confirmed for (date)

(Place) _____

Signature _____

(Date) _____

Commanding officers (or the Paymaster if at Netley) will issue to every discharged soldier whose claim to pension, either on account of service or disability, is to be brought under the consideration of the Chelsea Board, a memorandum for his guidance on Army Form D. 401, and will at the same time transmit to the Secretary, Royal Hospital Chelsea, a descriptive return of the man on Army Form D. 400.

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.

1. Proceedings on discharge. (Army Form B. 268.)
2. Proceedings on transfer to reserve (if any). (Army Form B. 2056.)
3. Duplicate attestation.
4. Army Form B. 97 (if any).
5. Declaration of change of name (if any).
6. Re-engagement paper (if any). Army Form B. 136).
7. Authority for continuance, or extension, of service (if any). Army Form B. 221.)
8. Court of Inquiry on an injury (if any) (Army Form A 2.)
9. Regimental conduct sheet. (Army Form B. 120).
10. Company conduct sheet. (Army Form B. 121.)
11. Copies of convictions by Civil Power (if any).
12. Medical history sheet. (Army Form B. 178).
13. Medical report on invalid (if any). (Army Form B. 179).
14. Copy of receipt for purchase money (if any).
15. Attestation of fraudulently enlisted man for corps in which he has not been held to serve (if any).
16. Detailed statement of former service allowed to reckon towards pension (if any).
17. Copy of 3rd page attestation (in the case of men from abroad entitled to deferred pay who go to Netley or the discharge depot for discharge).
18. Descriptive return (Army Form D. 400), where required. See section 11 on second page.
19. Active service casualty form. (Army Form B. 103).
20. Employment sheet. (Army Form B. 2066).

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

1. Duplicate attestation. (On third page the date and cause of discharge will be entered and signed by the competent military authority).
2. Medical history sheet (if any). (Army Form B. 178).

Instructions as to the preparation, dispatch, and custody, of discharge documents.

1. When a soldier is to be discharged, the documents retained with the duplicate attestation will be placed inside this form. Should any of the documents be missing, an explanation of the deficiency, signed by the commanding officer, must be substituted for the missing document. The officer in charge of records will then extract from the original attestation, any documents required to complete the list of discharge documents enumerated in the margin, which will then be placed in this form in the sequence given.

2. When men are discharged from the colours at home as medically unfit, or with claims to pension, Army Form B. 268 will be sent confirmed, together with the duplicate attestation and documents retained therein to the officer in charge of records 10 days in advance of the date for discharge in the case of invalids, and 14 days in other cases. This officer will then extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin, place them in this form, and after carefully checking the duplicate attestation with the original forward the whole to the Secretary, Royal Hospital, Chelsea. When such men are discharged abroad, the same procedure will be adopted as above, with the exception that the discharge documents will be sent to the officer in charge of records immediately after discharge takes place (except in the case of men who are granted gratuities on discharge from local battalions or companies, Royal Artillery.

3. When soldiers are sent home from abroad for discharge, the documents retained with the duplicate attestation will be placed inside this form and sent home with the men for transmission to the officer who carries out the discharge, together with the following additional forms :—

(*a*) Discharge certificate (Army Form B. 2079 or Army Form B. 264).
(*b*) Character Certificate (Army Form B. 2067) if entitled.
(*c*) Copy company conduct sheet (Army Form B. 121) when required under King's Regulations.

The duplicate attestation and documents retained therein will be sent to the officer in charge of records, who will extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin and place them in this form.

4. The discharge documents of re-enlisted pensioners, on re-discharge, will be sent to the officer in charge of records, who will extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin, place them inside this form, and forward the whole to the Secretary, Royal Hospital, Chelsea, irrespective of the cause of discharge.

5. The original and duplicate attestations of recruits who are rejected before, or on, final approval will be retained by the approving officer for one year, when they will be destroyed.

6. In all other cases the discharge documents will be sent, directly the discharge is carried out, to the officer in charge of records of the unit concerned.

7. Postage need not be paid, and receipts are not required, in the case of documents sent to Chelsea or to the War Office,

8. When the discharge documents of men not entitled to pension are sent to the officer who will have final charge of them, they are to be accompanied by Army Form B. 279, and that officer will, if they are found to be correct, sign and return Army Form B. 279. Should any document be missing, he must at once apply for it.

9. The officers having final charge of the discharge documents will arrange them according to regimental numbers, and enter the names in the alphabetical index, Army Book No. 129.

C O P Y

Park School, Toronto.
16-12-18

No.725213, Pte. Savage Gr.

Chest Report by Lt. Col. Elliott.

"The chest is asymmetrical, the right costal cartilages being more prominent than those on the left. Superficial cardiac, dulness is lost and percussion resonanae generaly increased. Adventitious sounds are absent.

He is subject to recurring bronchitis, the present attach ~~having~~ having persisted two months.

DIAGNOSIS. Bronchitis, due to service.
Emphysema, doubtless antedating service.

R. George.

Capt. C.A.M.C. for
District Chest Consultant.

M.D. 2

No. 56

CANADIAN CONTINGENT EXPEDITIONARY FORCE

Oc

LAST PAY CERTIFICATE

This form to be used for all Ranks (Vide Articles 122, 130 and 141, Financial Instructions, 25715c, C.E.F., 1916).

Regimental No. 725213 Rank. A/cpl Name Savage G.R.

Corps #2 D.D. who was* Discharged

On Dec. 23 1918, to Out I.S.O.

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from Nov. 1st. 1918

to Dec. 23 191..., the inclusive date of transfer or discharge.

Dr.	$	c.	Cr.	$	c.
Bal. Dr. from prev. month			Balance Cr. from prev. month	486	28
Advances by Cheques No.			Regt'l. Pay 53 days at $ 1 c.	53	
Advances by Cheques No.			Field Allow. 53 days at $ c. 10	5	30
Assigned Pay and Sep'n Allce. No.			Separation Allowance* (Monthly)		
Other charges			Other Allowances* Cloth	35	
Payment on transfer or discharge No. 83560	591	58	Other Credits* Subs	12	
Bal. Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)		
Total	591	58	Total	591	58

*Give particulars.

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

Pay for the month of 191... and Sep'n Allce. for month of 191... (to) Assignee

(Address)

(†) 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.

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

REMARKS:—

State (1) date of enlistment

(2) if married and if a Separation Allowance Card has been submitted No

(3) cause of discharge authority D.O. 245

(4) authority for transfer

NOTE.—Separation Allowance and Assigned Pay Card and Index Card (M.F.W. 71) are to accompany the original Last Pay Certificate on transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay List of the Unit.

Date 20/12/18

Place Toronto, Ont.

CAPT. PAYMASTER, No. 2 DISTRICT DEPOT

Paymaster.

N.B.—For purposes of transfer this form is to be made out in quadruplicate. Original copy to paymaster of new unit, duplicate to District Paymaster, triplicate to accompany the pay list at the end of the month, and quadruplicate for retention as a record.

For purposes of discharge it is to be made out in triplicate. Original copy to accompany discharge papers; duplicate to accompany pay list at the end of the month, and triplicate for retention as a record.

If a man on discharge is entitled to three months Post Discharge Pay, Last Pay certificate will be made out in quadruplicate. The original Last Pay Certificate will be forwarded with other documents to Paymaster Post Discharge Pay and triplicate, with his discharge documents.

M. F. W. 44

H.Q. 1772-39-903.
100M-9-18. D.P. 874.

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

This form is used for all Units (Vide Articles 122, 130 and 131, Pay Regs) pertaining to the C.E.F. 1916.

Rank ..... Name .....

Who was .....

.....191 ... to .....

*Insert "discharged" or "transferred".

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

Dr.	$	c.	Cr.	$	c.
Balance Dr. from last month			Balance Cr. from last month		
Advance of Pay			Regular Pay ..... days at $		
Deposit			Field Allow. ..... days at $		
Assigned Pay and Separation Allw. No.			Separation Allowance (Monthly)		
Other expenses			Other Allowances		
Deposit on transfer or discharge No.			Other Credits		
Cash (to be paid by the new unit)			Pay (to be delivered by new unit)		
			Total		
Total					

*Give particulars.

A month's stoppage of $ ..... (a) has been paid on account of Assigned Pay for the month of ..... 191 ... and for ..... 191 ... (b) Allowance

(a) Insert amount to be assigned whether it has been paid or not.
(b) Insert "nil" if allowance has not been paid for period of account.

(In Transfer of an Officer)

Out Allowance ..... has been paid by Paymaster, Military District No.

CERTIFICATE

(1) Authority for transfer .....

(2) Date of enlistment .....

(3) Date of arrival and departure from any area Card has been submitted .....

(4) Name of previous unit .....

(5) Authority for transfer .....

NOTE.—Separation allowance and Assigned Pay Card and Pay Card (M.F.W. 1) are to accompany the original Last Pay Certificate on transfer.

I have carefully examined the statement of account and find it to be a correct extract from the Pay List of the Unit.

Date .....

Place .....

Rank .....

Name .....

Pay out in .....

Signature .....

N.B.—For Purposes of transfer this form is to be made out in quadruplicate. Original copy to payments of new unit; duplicate to Director Pay Services, triplicate to accompany the Pay list at the end of the month, and quadruplicate for retention as a record.

For purposes of discharge it is to be made out in triplicate. Original copy to accompany discharge papers; duplicate to company pay list at the end of the month and triplicate for retention as a record.

If a man on discharge or retired is entitled to three months Post Discharge Pay, Last Pay certificate will be made out in quadruplicate. The original Last Pay Certificate will be forwarded with other documents to Paymaster Post Discharge Pay and triplicate with the discharge papers.

COPY Ex. by J.McMullock, Lindsay, Feb. 3-1916.

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 Park School Bks. DATE Dec. 16-1918

1. 1 (a) Unit No. 2 D.D. (b) Regimental No. 725213 (c) Rank Pte.

(d) Surname SAVAGE (e) Christian name George, Robert.

(f) Home address 145 Richmond St. W. Toronto. Ont.

(g) Next of Kin George, Savage (h) Relationship Father

(i) Address of Next of Kin Kings Land Road, London, England.

2. Age last birthday 43 Date of birth July 9th 1875

3. Enlistment, or Appointment (if an Officer) (a) Place Lindsay (b) Date Feb. 3/16

4. Personal description:

(a) Height 5' 2" (b) Weight 110 (stripped) (c) Complexion fair

(d) Colour of hair Brown (e) Colour of eyes grey (f) Identification marks, Scars, etc. Vacc. four marks on left arm.

5. Former trade or occupation Laborer.

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
	2	316

	Periods	
	From	To
Canada	Feb. 3, 1916	July 1916
England	July 1916	Dec. 1916
France or other theatres of War	Dec. 1916	Sept. 1918
England & Canada.	Sept. 1918	Date.

7. Original disease, or injury 1. Emphysema 2. Rheumatism.

(a) Date of origin 1. Pre-enlistment. 2. Dec. 18, 1916 (b) Place of origin 1. Canada. 2 France

(c) Cause 1. Continuous colds in the chest, 2 Exposure to damp and cold weather.

M. F. B. 227.

300M.—8-18.
1772-39-117.

8. Present disability— (Here state the exact nature of the disability resulting from the disabling conditions: e.g. (*a*) Weakness—slight, moderate, marked, etc; (*b*) Loss, complete or partial, of an organ or member, or of its functions; (*c*) Necessity for rest of the body, or of some of its parts, for therapeutic reasons; (*d*) Any other restrictions in choice of occupation.)

Slight weakness of the lungs resulting from previous chronic Bronchitis. Also weakness of legs and arms on exposure to damp weather since in France, Dec. 18, 1916. 1 Partial loss function of chest. 2. Partial loss function of legs and joint systems.

9. Present condition—(*a*) (Before completing this section the invalid must 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: Chest asymmetrical, expansion, equal on both sides, slight impairment of resonance over the base of right lung. Some moist rales heard over the front of the chest mostly on the right side. Man's voice is very hoarse. See Specialist's report.

OBJECTIVE 2. Free control of joints both active and passive. No inflamation no swelling marked.

SUBJ:(1) Occasionally coughs early in the mornings. No expectoration. Occasional night sweats. Has not lost very much weight. 3 or 4 lbs.

SUBJECTIVE (2) On exposure to damp weather soldier complains of shooting pull pain in his legs and lumbar region of the back.

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

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

Special Senses no Respiratory System See Sec. 9 Integumentary System no

Disturbances of Mentality no Digestive System no Muscular System no

Osseous and Joint Systems See Sect. 9 Any other general condition no

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

In France, about the middle of December 1916, soldier suffered from cold in chest and rheumatism. This was brought on from exposure to damp weather. On Sept. 1918, when soldier returned to Seaford, Sussex, England, where he thought he would get some treatment, but from there he was transferred to Canada, Nov. 30th 1918, with this condition not much improved.

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*).)

Nil.

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

Nil

11.—(*a*) Did the disabling condition have its origin before enlistment? 1. Yes. 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. Yes. Before enlistment had a slight cough on catching cold but had no dyspnoea. 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 & 2, 6-9 mos. with treatment, indefinite without.

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

1 and 2 None.

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. 2. Yes, Medicinal hydro therapeutic 6-9 months.

16. Can the former trade or occupation be resumed? No. too much exposure.
(If not, briefly state why)

17. Recommendations D 3 for treatment with the I.S.C. as an outpatient.

Wm. P. Turhlester, Lt. A.M.C.
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 C.R.Savage, 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

Sgd. George Robert Savage, 725213 Rank. Pte.
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 concur.

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.) no
(*c*) Home service (Canada only),	(" C)	(Yes or No.) no
(*d*) Temporarily unfit.	(" D)	(Yes or No.) yes
(*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.)

(*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.)

That he be placed in Category D. 3. and be given hospital treatment as an outpatient under the I.S.C.

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.

B. ? Major. *President.*

PLACE Park School Bks. Toronto.

DATE Dec. 17-18

Members

TO BE COMPLETED WHEN TREATMENT IS REFUSED

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

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

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

President.

PLACE.....

DATE.....

Members

APPROVED BY

E.A. Carr, Capt.
Assistant Director of Medical Services.

DATE 18-12-18

APPROVED BY

Director-General of Medical Services.

DATE.....

O. 6045 (*Revised*).

PROCEEDINGS OF A MEDICAL BOARD.

Dated at SEAFORD OCT. 18 1918

No. 725213 Rank PTE Name SAVAGE GEO. ROBERT

Local Unit EORD Overseas Unit C.I.B.D. Age 43

Examination held at COMB. DEPOTS.

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

DEBILITY

PRESENT CONDITION.

In France 21/12

Complain - Weakness. pain - legs back & arms.

Exam - Very poor physical condition - looks under weight - only five feet tall. Pulse rate 110 standing - myocardial bruit fair - never got past the Base - France. Was boarded December 1917. & marked B iii Other systems normal.

BOARD RECOMMENDS:—

1. Fit for Duty B iii not likely to be passed in six months
2. Fit for duty after ..... weeks' physical training.
3. Fit for Temporary Base Duty ..... weeks.
4. Fit for Permanent Base Duty .....
5. Discharge .....

Signatures:—

L. M. MacNeil Capt. President.

Members { Greenshol Capt

APPROVED 19 OCT 1918

Dated at Seaford, Sussex 1916.

APPROVED.

U. Wallace Captain, C.A.M.C.
for A.D.M.S., Canadians, For A.D.M.S.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at STAFORD 3rd 1918

No. 73 5313 Rank PTE Name SAVAGE GEO. ROBERT

Local Unit FORD Overseas Unit C.L.B. Age 43

Examination held at COMB. DEPOTS.

DISABILITY
Overseas—Local
(scratch one out)

DEFINITE

PRESENT CONDITION

Lt. Hernia — 21/12

Complaints — Lumbar pain, pain in left back & groin

Examination — Slight tenderness over lumbar region — no muscular spasm, pain in left groin. No tenderness in scrotal contents. Hernia by palpitation & cough impulse. Hernia reduced & truss applied.

BOARD RECOMMENDS—

1. Fit for Duty — Fit and likely to be found — [illegible]
2. Fit for duty after ..... weeks' physical training.
3. Fit for Temporary Base Duty ..... weeks
4. Fit for Permanent Base Duty .....
5. Discharge .....

Signatures—

..... President

..... Members

APPROVED

Dated at 1918

For A.D.M.S.

AUDITOR | PAYMASTER

5-826

M. OR S. D. L.

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

REGT. No. 725213 RANK 9/Cpl. NAME (IN FULL) Savage, G. R. (BLOCK LETTERS, SURNAME FIRST)

NEXT OF KIN | RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? No. | DATE EFFECTIVE

TO WHOM PAID | RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY
S.D. Form Rec.		

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

PLACE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

DATE OF ATTESTATION Feb. 3. 1916 | TRANSFERRED TO | DATE | AUTHORITY

ASSIGNED PAY, $ | DATE EFFECTIVE

PAYABLE TO | RELATIONSHIP | ANY CHANGE IN ASSIGNEE OR ADDRESS ~~145 Richmond St. W.~~ 91 University Ave Toronto. 22/9/19

ADDRESS

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE

DISCHARGED | PLACE #2 D.D. | DATE 23/12/18 | REASON Med. Unfit. | AUTHORITY | IF ENTITLED TO POST DISCHARGE PAY

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	Trust				350	00			350	00																	33	00	~~33~~	~~00~~	33	00					Dr. 121 P.D.P., P.L. 973 line 19
																	Jan 30	D1797					63	40					~~96~~		96	40					
																	Feb 27	D217535					63	40							159	80					
																	Mar 27	270971					63	40							223	20					Out Pat. S.C.R. Guelph 17.3.19.
																	May 1	278161					63	40							286	60					
																	May 26	374523					63	40							350	00					
					350	-																	317	-			33	-			~~350~~						

W. S. G. PAID IN FULL

LIEUT.
FOR PAYMASTER WAR SERVICE GRATUITY

60m.-11-18 L. L. 51777. 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.	

Reserved for M.H.C.

Regt. No. 725213 Rank PTE Surname SAVAGE Christian Name GEO. ROBERT

Unit or Corps—(a) Overseas from United Kingdom C.I.B.D. (b) In United Kingdom E.O.R.D

Born at—Town LONDON County or Province — Country ENGLAND

Date of Birth—Day 9 Month JULY Year 1875 Age 43 yrs 3 months.

Joined at LINDSAY, ONT. Date FEB 3rd 1916

Former Trade or Occupation LABORER

Permanent marks or peculiarities that will serve for future identification :—

SCAR - BACK OF NECK

Height—feet 5 inches 2 Colour of eyes BLUE

Signature of Soldier (*for identification purposes*) Geo. Robt. Savage

Medical Report.

☞ *The answers to the questions below are to be filled in by the Officer in medical charge of the case. He will carefully discriminate between the soldier's unsupported statements and the evidence as recorded in the medical or other military documents bearing on the case. He will plainly state the existence of any of the disability prior to the soldier joining for the present war.*

1. DISABILITY (*State the actual disabling conditions as distinguished from the diseases or injuries from which they resulted*). (*Follow the official nomenclature as far as possible.*)

Group the disabilities, placing those resulting from separate causes in separate groups.

Disabilities Group (*a*)	DEBILITY
Disabilities Group (*b*)	
Disabilities Group (*c*)	

2. CAUSE OF DISABILITY. (*Follow the official nomenclature in stating the disease or injury.*)

	Disease or injury to which the disability is due.	Place of origin.	Date of origin.
(*i.*) As to Group (*a*) above.	ACTIVE SERVICE CONDITIONS	FRANCE	DEC 1917.
(*ii.*) As to Group (*b*) above.			
(*iii.*) As to Group (*c*) above.			

NOTE.—By Active Service is meant Service with the Colours in Canada, United Kingdom, or elsewhere during the present war (*since August 4th*, 1914).

3. Is the disability due to disease contracted or injuries received prior to Active Service ?

(*i.*) As to Group (*a*) above ? NO If yes, has Active Service aggravated it ? —

(*ii.*) As to Group (*b*) above ? — If yes, has Active Service aggravated it ? —

(*iii.*) As to Group (*c*) above ? — If yes, has Active Service aggravated it ? —

4. Is the disability due to disease contracted or injuries received while on Active Service—

(*i.*) As to Group (*a*) above ? YES

(*ii.*) As to Group (*b*) above ? —

(*iii.*) As to Group (*c*) above ? —

PART I. (*continued*).

5. If a cause of disability was an injury received on Active Service, was it received—

(*i.*) While on duty? N A (*ii.*) While off duty? NA

(*iii.*) Was a Court of Inquiry held? NA (*iv.*) Where? NA (*v.*) When? NA

(*vi.*) Opinion of the Court? NA

6. HISTORY OF THE CASE. (*State concisely the essential points of the history, noting the entries made on the Medical History Sheet and other records*).

To France ~~Sept~~. Dec. 1916 — Was burned down at the Base and marched permanent Base — Rejoined France Dec. 1917 and marched B III — Returned from France Sept. 1918 as of no further use for service in France. During past year has been gradually going "down hill"

7. PRESENT CONDITION. (*Give previous and present weight if likely to indicate progress of disability.*)

Complaints — Weakness, pain in legs back and arms

Exam: General condition very poor looks under weight — Only five feet tall only weighs 112 lbs — Pulse rate 110 at rest myocardial tone poor — tremor of fingers — tongue clear

Other Ailments [illegible]

8. OPERATION. (*i.*) Was one performed? No

(*ii.*) If so, state what. —

(*iii.*) Was one advised and declined? —

NOTE.—Loss of teeth on or immediately after Active Service should be attributed thereto unless there is evidence to the contrary.

9. (*i.*) Is there loss or decay of teeth attributable to Active Service? Yes

(*ii.*) If so, describe. Ten — extracted

10. DO YOU RECOMMEND:—

(*a*) Fit for duty? No

(*b*) Fit for base duty? Yes B III not likely to be raised in next months

(*c*) Invalid to Canada?

(*d*) Discharge from the Service as permanently unfit?

Date of Report Oct 21 1918 Signed J W Macneil Capt

Station Seaford Officer in medical charge of case.

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

H C Wallace Capt. Officer i/c ~~Hospital~~ S.M.O. Brigade } Strike out one of these.

Dated at Seaford Sussex Station, on 21-X-18 1918

* Delete if inapplicable.

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

☞ *Clear and decisive answers are to be given to all questions. Such terms as "may," "perhaps," "probably," "possibly," are not to be employed. Disability due to causes arising on Active Service is to be clearly shown in order that the Pensions Authorities may deal with the case properly.*

11. Is the disability fully indicated in Part I. (1)? Yes.
If not, indicate it.

12. Is the cause of the disability fully indicated in Part I. (2)? Yes.
If not, indicate it.

13. Was the disability caused or aggravated by— (*a*) Negligence of the Soldier { Caused? No. Aggravated? No. } (*b*) Misconduct of the Soldier { Caused? No. Aggravated? No. }

14. THE ENTIRE DISABILITY.—Without regard to his regular occupation, to what extent is his capacity lessened at present for earning a full livelihood in the general market for untrained labour?
(*Estimate at none*, 10%, 20%, 30%, 40%, 50%, 60%, 70%, 80%, 90%, *or* 100%.)
Not app.

15. THE PENSIONABLE DISABILITY.—*see Part I.* (3). *Aggravation on Active Service of a disability existing previous to joining is to be included in the estimate*).
What part of the entire disability estimated next above in (14) is due to causes arising during Active Service?
(*Estimate at none*, $\frac{1}{5}$, $\frac{2}{5}$, $\frac{3}{5}$, $\frac{4}{5}$, *or all.*)
Not app.

16. Permanency of the Pensionable Disability estimated next above in (15).
(*i.*) Is it permanent? Not app.
(*ii.*) If not permanent, what is its probable minimum duration (*in months*)?

17. If an operation was advised and declined, do you consider the refusal to have been unreasonable? Not app.

18. Remarks.

19. Recommendation :—(*a*) Fit for duty? No.
(*b*) Fit for base duty? Yes. But not likely to be raised in sup. mos.
(*c*) Invalid to Canada? No.
(*d*) Discharge from service as permanently unfit? No.

Classification for the Military Hospitals Commission

Date of Board 21-10-18

Station Seaford

Signatures of the Board. J. M. Nicholl, Capt. — President. James A. Macdonald, Capt.

Approved 24 OCT 1918 Seaford, Sussex. APPROVED

A.D.M.S. N. Wallace Captain, C.A.M.C. for A.D.M.S., Canadians.

Dated at Station 191

Proceedings of the Pensions and Claims Board on the Soldier mentioned in Part I.

The Pensions and Claims Board, Canadian Expeditionary Force, assembled at

on the day of 191

Members of the Board :—

The Board having considered the evidence of the soldier marginally named, together with the documents submitted, recommend :—

Dated at this day of 191

Signatures of the Board

President.