"B." "9" Coy.

ATTESTATION PAPER

No. 724527

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE

TRIPLICATE

Lot. 7434

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS)

1. What is your name? — Stanley Shaver
2. In what Town, Township, or Parish, and in what Country were you born? — Little Britain Ontario
3. What is the name of your next-of-kin? — Stepfather Herbert Shaver
4. What is the address of your next-of-kin? — Sonya Ontario
5. What is the date of your birth? — January 15th 1897
6. What is your trade or calling? — Stenographer
7. Are you married? — No
8. Are you willing to be vaccinated or re-vaccinated? ~~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

Stanley Shaver (Signature of Man.)

D. F. Bissonnette (Signature of Witness.)

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

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

Stanley Shaver (Signature of Recruit.)

Date November 25 1915 D. F. Bissonnette (Signature of Witness.)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Stanley Shaver, 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.

Stanley Shaver (Signature of Recruit.)

Date November 25 1915 D. F. Bissonnette (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 8th day of January 1916

[illegible] (Signature of Justice.)

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

[illegible] Lt. Col. (Approving Officer.)

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

M. F. W. 23.
200 M.—3-15.
H.Q. 1772-39-841.

DESCRIPTION OF Stanley Shaver ON ENLISTMENT.

Apparent Age 18 years 10 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 6 ins.

Chest measurement:
- Girth when fully expanded 35 1/2 ins.
- Range of expansion 2 1/2 ins.

Complexion Fair

Eyes Blue

Hair Light Brown

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

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.)

None

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 November 23rd 1915

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

Stanley Shaver 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 JAN 11 1916 191

DISCHARGE DOCUMENTS

R. O. No.

H. Q. No.

Name Shaver Stanley

Regt. No. 724527 Rank Pte

Corps 109th Bn.

Minor

14199

14199

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

Attestation Papers 2

Declaration of change of name

Authority for special enlistments

Documents of re-enlisted men

Regimental Conduct Sheet

Compulsory Stoppages

Casualty Forms 1

Proceedings on discharge 2

Corps History Sheet

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

Parchment Certificate

Medical Report for Invalids

Medical History Sheet 1

Proceedings of Regt. Court Martial

Copies of Convictions by Civil Power

Company Conduct Sheet

Clothing Transfer Certificate 1

Inventory of Kit

Last Pay Certificate

A. F. B-122 2

R.S.S. B. 1

A. F. 1

Med Certificate

Pay 1

1 P 149

1-R-122

1

25-3

22-3

5-3

1

M. F. W. 62.
50M.—9-16.
H. Q. 1772—39—935.

No. 724527. RANK Pte NAME Shaver. S.

T. O. S. 23-11-15. UNIT 109th. Battalion.
D. O. 23. 23-11-15.

M. D. 3

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915 Nov 23	1915 Nov. 30	✓		
Dec.		✓		
1916 Jan	1916	✓		
Feb.		✓		
Mar.				
april.		✓.		
May.		✓.		
June.		✓.		
July.		✓.		

UNIT SAILED
JUL 23 1916

R. 149.

Name Shaver. Stanley Rank Pte. Reg. No. 724527

Unit 109th Battn.

Next of Kin Canada

Date	Movement	Place	Casualty	List No.	Notified N/K. O.	W.O. List
6.7.16	Connaught	Aldershot	N.Y.D	2.		
15-9-16	Bearwood	Wokingham	Bronchitis	14.		
30-9-16.	Woodcote	Park	"	18.		
20-11-16.	Dis.	Pneumonia & Pleurisy.		50.		

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List

D.M.S. 1313.

CANADIAN CONVALESCENT HOSPITAL

AT

Registrar, Canadian Convalescent Hospital,

Bear Wood, Wokingham, Berks.

A. & D. CARD.

Regt. No. 724527 A. & D. No. 4590

Rank Pte Corps 109th Batn

Name Shaver S Age 19. Religion M

Service at Home 2/12

" " Front –

Diagnosis Bronchitis

Admitted 14 SEP 1916 Connaught Hos Aldershot.

Discharged

Place in Hospital K 2

M. H. Rec'd (See Document Card)

Transferred 29 SEP 1916

Results

C C & Room

P.T.O.

REMARKS: At Boulogne 4-8-16

Adm. Connaught Hosp Aldershot 5-8-16
" Caen Hill Hosp. Wolverhampton 30-8-16
thence Leave.

S.T. onset 4th aug.

P.C. G.C. Hair

T. Rest.

649,8-11397

CARD NO.

SURNAME. Shaver

CHRISTIAN NAMES Stanley

FOLL. Soldiers 2-5-17. 5

REGL. No. 724527 RANK Pte.

UNIT 109th Batt.

FORMER CORPS Mil.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL Shaver Herbert

RELATIONSHIP TO SOLDIER Stepfather

ADDRESS Sonya, Ont.

COUNTRY OF BIRTH Canada Little Britain, Ont DATE Jan. 15th 1897

PLACE OF ATTESTATION Lindsay Ont. DATE Jan. 8th 1916

Sailed from Halifax per S.S. "Olympic"

23-7-16. 788/31 R.C. 9-417

L. L. 90:89.—M. & D. 6312. M. F. W. 22. 100m.—1-16. H. Q. 1772-39-339.

Returned to Canada per S.S. "Grampian" 23-3-17 T324

MARRIED SINGLE yes WIDOWER

TRADE OR CALLING Stenographer RELIGION Methodist

DESCRIPTION.

APPARENT AGE 18 YEARS 10 MONTHS

HEIGHT 5 FEET 6 INCHES

CHEST MEASUREMENT 35½ INCHES EXPANSION 2½ INCHES

COMPLEXION Fair EYES Blue HAIR Light brown

DISTINGUISHING MARKS Nil.

MEDICAL EXAMINATION. PLACE Lindsay, Ont. DATE Nov. 23rd 1915

REGT'L No 724527

NAME Shaver, Stanley

H. Q. FILE No. 649-

RANK AND CORPS Pte. 109th Battalion

FOLLOWS No.

FOLLOWS

CABLE No.	CABLE Date	NATURE OF CASUALTY
J324	25-3-17	Sailed from Liverpool for Canada per the S.S. "Grampian" on the 23rd march. (minor)

L. L. Job 90581—M. & D. 6314.

M. F. W. 42—50M—1-16.
H. Q. 1772-39-893.

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
No. 2	Connaught, Aldershot	6-7-16	N. Y. D.
No. 14	To Can. Convet. Bearwood Wokingham	15-9-16	Bronchitis.
18	" Can. Conv. Wdcote Pk. Epsom	30-9-16	"
50-	discharged	20-11-16	Pneumonia & Pleurisy

Number 724527 Rank Pte

Surname SHAVER

Christian Name Stanley

Units 109th Bn. Can. Inf. Theatre of War England

Date of Service 31-7-16

Remarks

Latest Address ~~97. Dearborn Ave~~
~~Toronto Ont~~
Little Britain,
Victoria, B.C.

Roll No a Page 1424

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.

D.M.S. 1300.

Surname	Christian Name or Names	Reg. No.
Shaver. ~~Shaver~~	S.	724527

Rank	Unit	Co.	Troop	Batty.
Pte.	109th Bn.			

Hospital	Date of Admission
Connaught Aldershott	6.7.16
Transferred Wokingham Cam.	Hosp. 15.9.16
Woodcote Park Epsom	Hosp. 30.9.16
	Hosp.
	Hosp.

Diagnosis (1) N.~~Y.D.~~ "Q" Bronchitis.

Later Diagnosis (if changed) (2) Pneumonia & Pleurisy

(3)

Additional Diagnosis: if more than one state present

DISPOSITION Dis. Date 20-12-16

		REMARKS
C.L. 10.8.16	2	
cl. 23.8.16	7	
25.9.16.	14.	
10.10.16	18	
C.L. 28-12-16	50.	

A.M.D. 2 DEPT.

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

EPITOME OF HOSPITAL TREATMENT.

	Hospital	Adm.
1.		
2.		
3.		
4.		
5.		
6.		
7.		

124th. Battalion, C.E.F.

Witley Camp,

January 18th, 1917.

724527
Pte Shaver S.

THIS IS TO CERTIFY that the marginally named man is free from Venereal, Skin or Contagious Disease. & fit to travel.

D.L. Berdan Maj

.....

.....

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. 724532 Rank Private Name Shaver Stanley

Enlisted (a) 23.11.15 Terms of Service (a) D of W Service reckons from (a) 23-11-15.

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

Extended ..... Re-engaged ..... Qualification (b) Stenographer

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
		Embarked Canada	Halifax	24.7.16.	
		Disembarked England	Liverpool	31.7.16.	
4.12.16	O.C. 109th	Transferred to C.E.A.C.	Witley	24.11.16	D.C.P. II 339 H. E. Kerr Hawes Capt. ADJUTANT 109th Overseas Battalion, C. E. F.
17.12.16	124th Bn	Attached to 124th Bn from C.E.A.C.	Witley	15.12.16	Part II Orders 274 W. W. Jones MAJOR ADJUTANT, 124th BATTALION C.E.F.
[illegible].17	124th Bn	Taken on strength of 124th Bn.	Witley	15.12.16	Part II Orders # 2 A. W. Cartmill ADJUTANT, 124th BATTALION C.E.F.
18.1.17	124th Bn	Transferred to C.E.A.C.	Witley	18.1.17	Part II Orders # 18 A. W. Cartmill ADJUTANT, 124th BATTALION C.E.F.

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

[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				
19 JAN 1917	CCAC	Sub office	attached	C.D.D	AB Laing Capt.
24.3.17	CDD	SoS to Canada	Buxton	23.3.17	pt II 71
	Dis. Depot	SoS Underage	Quebec.	2.5.17	auth payshects.

Colonel Secretary.

for DOAR

R—122

LTR

Rank | Name SHAVER, Stanley | Reg'l No. 724527

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

Place and Date of Enlistment Lindsay, 25th, November, 1915, | Place of Birth Little Britain. Ontario.

Name and Address, Next-of-Kin Herbert Shaver. Sonya, Ontario, Canada. | Relationship Step-Father.

Assigned Pay Monthly $ | Payable to | Relationship

Separation Allowance $ | Payable to | Relationship

Discharge, Date and Place | Reason | Character LR 133a/181

N/C R.B No. 7216 CCOC
File R.L.
Category Lean OR

H. W. & V., Ld.—7165-16.

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.	O.R.C. REMARKS. Taken from Official Documents.
		Arrived in England per H.M.T. 2810 31-7-16			
4.8.16	O.C. 109th	Admitted to Hospl.	Osney	4.8.16	C.L. 2 Pt. II D.O. 217
25.9.16	do	Trans to Can Con Hos Bearwood	Wokingham	15.9.16	C.L. 14 Bronchitis
10-10-16	do	Trans to Can Con Hos Epsom	Bramshott	20-9-16	C.L. 18
4.12.16	do	S.O.S. on Trans to C.C.A.C.	Witley	23.11.16	Pt. II. D.O. 339. Auth Pt II D.O. 519 C.C.A.C. of 24.11.16
6-12-16	do.	Dis from Bramshott Mil Hosp.	—	23-11-16	Pt II O 341 & CL 50
24-11-16	C.C.A.C.	~~Trans~~ Rept and SOS	Hastings	24-11-16	" 519
15-12-16	"	SOS on transfer to 109th	"	14-12-16	" 554
28.12.16	O.C. 109th B.	SOS on tafr. from C.C.A.C.	Witley	15.12.16	— 350.
28.12.16	do.	SOS on tafr. to 124th B.	do	15.12.16	— 350

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.
2. 1. 17	O.C. 124th Bn	T.O.S on strength from 109th Bn.	Witley.	15. 12. 16	Pte D.O. 2.
18-1-17	"	S.O.S. on transfer to C.B.A.C.	"	18-1-17	" 18.
24.3.17	CDD	Retd to Can under KR&O 392	Buxton	23.3.17	Pte D 71
	Res. Depot	Finally Discharged.	Quebec	2.5.17	Nil. 242. Lodge Dist C. Ont.

Pte 29/9/16. 7

TEMPORARY.

Army Form B. 178

To be used (a) for recruits enlisting direct into the Regular Army, and (b) for men of the Territorial Force when they are admitted to Hospital. Army Form B. 178A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY OF

Surname Shaw *Christian Name* S

TABLE 1.—General Table.

Birthplace { Parish..... County .....

Examined { on.....day of.....191 , at .....

Declared Age .....years.....days.

Trade or Occupation.....

Height.....feet.....inches

Weight .....lbs.

Chest Measurement { Girth when fully Expanded .....inches; Range of Expansion .....inches

Physical Development .....

Vaccination Marks { Arm..... RIGHT | LEFT; Number ..... | .....

When Vaccinated .....

Vision { R.E.—V= ..... L.E.—V= .....

(a) Marks indicating congenital peculiarities or previous disease—

.....

.....

(b) Slight defects but not sufficient to cause rejection—

.....

.....

Approved by .....

Rank .....

Medical Officer.

Enlisted { at..... on..... day of .....191...

	Corps	Regtl. No.
Joined on enlistment	104 CEF.	72452
Transferred to		

Became non-effective by .....

.....

on..... day of 23 NOV Rec'd.....191...

(*Signature*).....

(*Rank*) .....

TABLE III.—Boards; Courts of Enquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, etc.

Date	Brief Details and Signature
Oct 29/16	Epsom Schl of Stenography
	P. B. W. Keptyhain
	PRESIDENT,
	STANDING MEDICAL BOARD.

TABLE IV.—Service Table.

Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation

TABLE II.—Only for admissions to Hospital or to the Sick List in case of Warrant Officers treated in quarters.

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
CONNAUGHT ALDERSHOT.	5	8	16	14	9	16	Bronchitis		Sore throat followed by bronchitis. Signs of fluid at L. base, some withdrawn, clearing up now. No T.B. in sputum. To W.A.H. for observation. 28.8.16	Adrian Capt. R.A.M.C.
Clerk Beamwood	14	9	16	29	9	16	do	16	Transferred to Epsom	W. Brockman
									Myalgia - Complains of pains in legs & right shoulder. Worse in wet weather. Had rheumatic fever in France.	
Woodcote Pk. Epsom.	29.	9.	16	~~13.11.16~~ 30.11.16.					Has had double Pneumonia & left Pleurisy the latter still troublesome. Complains of dyspnoea. Delicate. Deafness at base of left lung. Has been on L.D. Slight improvement. Is under Military age. Discharged to Coy for P.B. duty.	H. G. Burns Capt.

B.
724527

ORIGINAL

MEDICAL HISTORY SHEET.

Surname Shaver Christian Name Stanley

Examined on 17th day of November 1915 at Lindsay

Birthplace City or Town Little Britain County Ontario

Apparent age 18 years

Trade or occupation Stenographer

Height 5 Feet 6 Inches.

Weight 134 Lbs.

Chest measurement Minimum 33 inches. Maximum expansion 35½ inches.

Physical development Good

Small-Pox Marks None

Vaccination Marks Arm Right. None Left. None Number One

When Vaccinated last Feb. 8th 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.M.O.F.

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

Date	Result	Vaccinations.
8.2.16.	Good	J. McCullock M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
12.6.16	Good	J. McCullock M.O.
19.6.16	Good	J. McCullock M.O.
26.6.16	Good	J. McCullock M.O.

Enlisted on 25th day of November 1915 at Lindsay

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	109th Batt C.E.F.	724527		25.11.15.
Transferred to..				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.

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.

100M.—5-15.
H. Q. 1772-39-439

Surname Shaw Christian Name Stanley

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				

Forms
I. 1237
10

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
4590.	724527	Pte.	Shaver	S.
Year	Unit.		Age.	Service.
	109th		19	10/12.

Station and Date.	Disease Bronchitis.
14 SEP 1916	
K2.	Army Hom Border Aug 4th 16
	Connaught Hosp. Aldershot Aug 5. 16.
	~~Bea Ha Camp~~
	Caens Hill Hosp. Weybridge Aug 30. 16
	Beaurwood Sept 14. 16
	S.T. Onset & Aug.
	P.C. G.C. fair
	T. Rest
29/9/16	Transferred to Epsom

W. B. Mullin Captain,
Med. Off., Canadian Convalescent Hospital,
Bear Wood, Wokingham, Berks.

CANADIAN CONVALESCENT HOSPITAL REGISTRARS OFFICE BEAR WOOD, WOKINGHAM, BERKS.

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

(J 3521.) Wt. W 5606—2621. 2,000,000. 7/15. D & S.

P.T.O.

Station and Date.	

Forms I. 1237/10

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
3 G R	724527.	Pte	Shaver.	Stanley
Year 1916	Unit. 109. C & F.		Age. 19. yrs.	Service. 9/12

Station and Date. Disease Bronchitis

Connaught

Aug. 4. 16 Taken ill 2 days ago.

Fauces inflamed & good deal purulent catarrh.

Nil in chest

KJ +

No Kernig.

Mild bronchitis of influenzal

El Gargon chest.

6 No signs in chest. no conjs. throat still septic

8 Throat clear. Cough. T. still up. Resp. 40.

Nil in chest.

9 Chest full of ronchi – Sputum abundant.

14 Signs of fluid at left base. Exploratory

Ziji withdrawn, yellow serous fluid.

Temperature still down.

Fluid contains pus cells, no organisms.

19.8.16 Coughing a good deal. ~~Diplococci~~ Sputum

Contains no T.B but diplococci in large

numbers resembling pneumococci.

24.8.16 Sputum – no T.B.

25.8.16 Sputum – no T.B.

Signs clearing up.

28.8.16 To M.A.H for observation.

E. Adrian Pratt

CONNAUGHT HOSPITAL 14 SEP 1916

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

(J 3521.) Wt. W 5606—2621. 2,000,000. 7/15. D & S.

P.T.O.

Station and Date.	
Sep: 28.	Admitted to Caenshill Mil Hosp. Weybridge

To be made out in duplicate.

DUPLICATE

H.Q. 54-21-23-53

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

INSTRUCTIONS.

(a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.

(b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.

(c) All questions, etc., must be answered.

(d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.

(e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

---

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

(2) Regimental Number 724527

(3) Full Name of Soldier Stanley Victor Howard Shaver

(4) Place of Birth Little Britain Ontario Canada

(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.

200M.—3-16.
1772 39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive? Yes

If so, state name and address Cyrus Herbert Shaver. Longa Ont

(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? —

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 6th 1916

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

I

Form to be used instead of blank space on Army Form 179

Proceedings of Medical Board at Discharge Depot.

Number	Rank	Name and Corps of disabled soldier.
724527	Pte	Shaver, Stanley, 24th Batt.

Previous Civilian Occupation. Schoolboy

Cause of disability:- Underage 17

Condition in detail which prevent the soldier earning a Full livelihood:-

A boy age stated.
Had Pneumonia in Feb 1915 shortly after Enlistment. Again in May 1916 he had double Pneumonia & left pleural Effusion which was aspirated. No T B were found. At present boy is in good health & there are no physical signs

Opinion of the Board.

Degree of incapacity (Please state in fractions.)

none in civil life

Probable duration of incapacity:-

not applicable

Does it render him permanently unfit for "Military Service? yes

Would operation, special treatment or the use of appliances, etc., lessen incapacity. no

Signature. E A Robertson Capt President.
M T Boylou Capt. Members.
J A Blezard Capt

Station. Quebec

Date Ap 13. 1917

10

Approved.

Date April 13/17 Wm Carrick Major. Assistant Director Medical Service.

Date 25/1/7 Director General Medical Service.

Cured 23-4-19

Form to be used instead of blank form for Army Form 179

Proceedings of Medical Board at Discharge Depot.

Number Rank Name and corps of disabled soldier.

Previous Civilian Occupation.

Cause of disability:-

Condition in detail which prevent the soldier earning a full livelihood:-

Opinion of the Board.

Degree of incapacity (Please state in fractions.)

Probable duration of incapacity:-

Does it render him permanently unfit for "Military Service"?

Would operation, special treatment or the use of appliances, etc., lessen incapacity.

Signature. President.

Members.

Station.

Date

Approved.

Date Assistant Director Medical Service.

Date Director General Medical Service.

Canadian Form 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: Stanley Victor Surname: Shaver

Unit or Corps: 124th Bn (If a soldier) Regtl. No. 724527

Born at: Little Britain Ont on, date: Jan 15th 1900

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 142 lbs.

Height 5 ft. 6 in.

2. NUTRITION AND DIATHESIS? Good

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

3. NERVOUS SYSTEM? Nil

4. RESPIRATORY SYSTEM? Base of left lung shows dulness on percussion, breath sounds prolonged.

5. HEART?

Abnormal Sounds? no

Abnormal Size? no

Pulse Rate? 72 Intermittence or irregularity? no

6. ARTERIES.—Any hardening? No

7. DIGESTIVE SYSTEM? Nil

8. GENITO-URINARY SYSTEM? Nil

Urinalysis—s.g.? — Reaction? — Albumen? — Sugar?

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

10. Is there any evidence of impairment of health or physical condition not mentioned above? If so, describe. No

11. Opinion as to the health and physical condition of the one examined? Discharge from service as unfit to S.B. + affected lung.

Examined at Witley

Date Jan 18th 1917

Signed H. L. Berdan Maj M.O.

Signed W. A. Hutton Capt & Lieut 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.

Canadian Form D.M.S. 1575

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: [illegible] Surname: [illegible]

Unit or Corps: [illegible] (If a soldier) Regtl. No.: [illegible]

Born at: [illegible] on date: [illegible]

Signature (for identification): [illegible]

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

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

Weight: 143 lbs.

Height: 5' 6 in.

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)? 78 Intermittence or irregularity?

6. ARTERIES.—Any hardening?

7. DIGESTIVE SYSTEM?

8. GENITO-URINARY SYSTEM?

Urinalysis—S.G.? Reaction? Albumen? Sugar?

9. SKIN, MIDDLE 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 health and physical condition of the one examined?

Examined at [illegible] Signed [illegible] M.O.

Date [illegible] Signed [illegible] M.O.

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

Canadian Form 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: Private Name: Stanley Victor Surname: Shaver

Unit or Corps: 134th Battalion (If a soldier) Regtl. No. 124527

Born at: Little Britain Ont. on, date: January 15/1900

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: 142 lbs.

Height: 5 ft. 6 in.

2. NUTRITION AND DIATHESIS?

good

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

3. NERVOUS SYSTEM?

Nil

4. RESPIRATORY SYSTEM? Base of left lung shows dullness on percussion, Breath sounds prolonged

5. HEART?

Abnormal Sounds? Nil

Abnormal Size? Nil

Pulse Rate? 72 Intermittence or irregularity? no

6. ARTERIES.—Any hardening? no.

7. DIGESTIVE SYSTEM?

Nil

8. GENITO-URINARY SYSTEM?

Nil

Urinalysis—s.g.? Reaction? Albumen? Sugar?

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

Nil.

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

b

11. Opinion as to the health and physical condition of the one examined? Discharge from service as tendency to T.B. & affected lung.

Examined at: Wolley

Date: January 18, 1917

Signed: O. K. Bennett Lt. M.O.

Signed: W. A. Hutton A/Capt. M.O.

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

Canadian Form D.M.S. 1336.

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

Unit or Corps ..... (If a soldier) Regt. 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. ..... in.

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?**

Urinalysis—S.G.? ..... Reaction? ..... Albumen? ..... Sugar? .....

9. **SKIN, MIDDLE 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 health and physical condition of the one examined?

Examined at ..... Signed ..... M.O.

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

19782/394

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

MB

16568-S-1.

Name Shaver, Stanley
Surname Christian Name

Regimental Number 724527 Rank Pte.

Address (in full) Sonya, Victoria Co. Ont.

Unit 109th Bn.

Original Unit

District where paid Ottawa

Date of Discharge 2-5-17

P. D. P. Filing Number 15 S.1

Rates:—Regimental pay $ 1.00 per diem: Field Allowance $ .10 per diem. Separation Allowance $ per month.

L. L. 22573—M. & D. 3000.

Total Credits 91 days		FIRST PAYMENT Cheque No. A	Date	Amount 30 days	SECOND PAYMENT Cheque No. B	Date	Amount 30 days	FINAL PAYMENT Cheque No. C	Date	Amount 31 days	Balance Over-payments to be Recovered	Total Amount Paid
100	10	92	21/6/17	33 00	154	26/7/17	33 00	152	26/8/17	33 92	18	99 92
~~1876~~	~~1st~~	~~G 31911~~	~~13-3-19~~	~~70 00~~								
~~1577~~	~~2nd~~	~~G 35407~~	~~13-3-19~~	~~70 00~~								

Remarks:

M. F. W. 127.
60M—6 17.
1772 39-1140.

Dec'n No. 19782-394 W. S. G. File No. 16568-A-26.

Award ... days at $ 70.00 per ~~day~~ mon. $ 288.00

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

Less P. D. P. Credited $ 100.10

$

Less further debit balance $ .....

Net due paid as below 179.90

TO SOLDIER TO DEPENDENTS

	Ag. No	S. No	Amount				Amount
1	1876	37911	70 00				
2	16770	35407	70 00				
3	1420B	412172	39 80				
4							
5							
6							

13-3-19
13-3-19.
8.4.19

GEN'L AUDITOR
Posting checked by
R. C. Kowalchuk
Date 14.7.49

Sonya, Ont.

V.W.

M. F. W. 41
1 0M—7-16
1772-39 889.

Name Shaver S. Pte.

Regimental No. 724527

Unit 109th Bn.

Date of enlistment

Place of "Sl - nil

Married (yes or no) no.

Amount of pay assigned monthly $ 20.00 1 8/16 to 31 1/17

To whom payable H. Saver (same add)

~~Name and~~ address ~~of next of kin~~ Sonya, Victoria Co. Ont.

Date and place discharged D. D. Que., May 2/17.

Reason for discharge Class I (underage)

Character on discharge

S.S. Metagama 8 5/17

H.Q. 649-1-11397

Enl 8

Form No. 5351—M. & D. 6880.

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.
	2 1/17							204								E.L.P.C.
3 1/17	2 5/17	120	1-	120-	120	10	1200	900 subs.	14804					243		A.R. 9585
														487		" " 10308
														487		" " 10936
														2433		" " 11555
														973		Pd. on Embarkation
														100		Canteen Charges
														10681	14804	
														18		Sup. L.P.C.
Recvd P.D.P. List No. 1									18						18	

Pension not indicated

Rendered P. D. P. 19 6/17

E.A.P. 31 1/17

M. F. W. 41
1 0M—7-16
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					

L. L. Job 310—M. & D. 6574.

533

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M F W 12.
50m.—4-16.
H. Q. 1772-39-819.

(Father)

To Whom H. Shaver

Address Sonya Ont.

Rate $20.00 AUG 1 1916

By Whom Assigned S. Shaver

Regtl. No. 724527

Rank Pte.

Corps 109 Bln Bay

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			Stop Payments Feb 1/17
Sept.				Discharged to Canada
Oct.				3M 3/1/17 C.E.C. 5/2/17
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

537

M. F. W. 12a.
50m.—4-16.
1772—39—819.

Sheet No. 2.

L. L. Job 310.—Req. 6574.

Name of Soldier S. Shaver

H Shaver (Father) 724527 (Pte) 109 Bn

20.00

Remarks. AUG 1 1916

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.		X18299	20	
Sept.		A18958	20	
Oct.		G23619	20	
Nov.		D28673	20	
Dec.		Z32497	20	
Jan.	1917	F40982	20	Stop Feb 1/17
Feb.				
March				120.00 Acct Closed [illegible] 5/4/17
April				Rets Transferred 23/3/17
May				
June				P.D.P. 7/6/17. [illegible]
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier

PAYMENTS.

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

P. 559
MARRIED OR SINGLE: Single

PLACE OF BIRTH: Little Britian Ont

NAME AND ADDRESS OF NEXT OF KIN: Herbert Shaver, Sonya Ont Can

RELATIONSHIP OF NEXT OF KIN: Step-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. 724527 RANK Pte NAME Shaver Stanley

IF IN PERMT. CORPS WHAT UNIT — UNIT 109th Bn TRANSFERRED TO N.E. Branch DATE 3/1/17 AUTHORITY P.A. 59-1-12 (minor disch to Can)

PERMANENT FORCE ALLOWANCES — TRANSFERRED TO — DATE — AUTHORITY

PLACE OF ATTESTATION Lindsay Ont — TRANSFERRED TO — DATE — AUTHORITY

DATE OF ATTESTATION Nov 25th 1915 — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY MONTHLY $ ~~20.00~~ DATE EFFECTIVE Aug 1st 1916

PAYABLE TO Herbert Shaver, Sonya Ont RELATIONSHIP Step father

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) 2/1/17 EFFECTIVE 1-2-17 REASON Discharge

DISCHARGE DATE AND PLACE Canada 2-1-17 REASON AND AUTHORITY Minor PA-59-1-2

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE) 17-2-17

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

Entered on N.E. Card Index E.N.
Checked by F.H. Gunson

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 Cr.	OTHER CHARGES	TOTAL DEBITS	BALANCE Credit	BALANCE Debit	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
July 31													Balance from Canada		886																886				
Aug 1-31	31	1.00	31		31	1.00	31	10							34 10												20		20	22 96				
Sept	30		30				3								33												20		20	35 96				
Oct	31		31		31		31	10							34 10									1 21			20		26 08	43 98				
													P5757											4 87										
													15172																						
													20315 10.10.16											4 87			20		24 87	52 11				
Nov	30		30				3								33																				
Dec	31		31				31	10							34 10												20		20	66 21				
1917			15	30									2192 24-8-16											4 87										
													3348 8-11-16											2 43										
													22-11-16											2 44										
													1433 28-11-16											2 43										
													1514 30-12-16											2 44										
													1072 13-12-16											2 43										
													406 20-12-16											2 43										
Jany 2		1.00	2	20											220												20		61 37	70 41				
															1793 6												17 39								
																								Balance transferred to N. E. Branch							7 04				
Mch. 1917																												18.	18.	6 82					
													11555 2/3/17											24 33											
													10936 20/4/17											4 07											
													10308 7/4/17											4 07											
													9585 23/4/17											2 43											
													end on LPC.																36 50		29 64				
May 1917.														29 64	29 64																				

Trans^d to Canada Disc^ge a/c^d

Checked [illegible]

Compared with Sailing List
List No:- 34
Date 23/3/17
Compared by [illegible]
Dr Bal. 29.46.

~~Dr 29.46~~

Sum.

x Extracts from A.S.F. Book Discharge to Can Minor PA-59-1-2 S.P.F. rec'd 2/1/17 Effec 1/2/17. L.P.C. 7/1/17. Cr. Bal. $7.04.

189. 1 pr socks. a.B. 51. Aldershot. 4/1/16. V2 2005. N.E.B. 7/15.

a/LPC rec'd 29/3/17 Cr Bal. 6.82.

N.Q. 649-L-2766. P.L. 25-L-2766 10-5-17. Ottawa ack: a.L.P. 6.

Date	Pay				Field Allowance				Working or Special Pay				Assigned Pay Credits	Other Credits	Total Credits	Acquittance Rolls								Cash Payments				Assigned Pay	Other Charges	Total Debits	Balance		Pay Withheld or Deferred	Pay Available for Issue	Remarks
	No. of Days	Rate	Amount		No. of Days	Rate	Amount		No. of Days	Rate	Amount					1		2		3		4		1	2	3	4				Credit	Debit			
			$	c.			$	c.			$	c.				No.	Date	No.	Date	No.	Date	No.	Date												

Reserved for M.H.C.

Regt. No. 742527 Rank Pte. Surname Shaver Christian Name Stanley Victor Howar

Unit or Corps—(a) Overseas from United Kingdom 124th. Bn. C.E.F. (b) In United Kingdom Witley

Born at—Town Little Britain County or Province Ontario. Country Canada.

Date of Birth—Day 15 Month January Year 1900 Age 16 yrs. 11 months.

Joined at Lindsay Ontario. Date Nov. 16/15.

Former Trade or Occupation Schoolboy.

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

None.

Height—feet 5 6 1/2 s Colour of eyes Blue.

Signature of Soldier (*for indentification purposes*) Stanley Victor Howard Shaver

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*). Pneumonia and pleurisy with effusion. results.

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.	Infection after influenza.	England.	Oct.4/16
(*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? To disease contracted.

(*i*) As to Group (*a*) above? Yes. If yes, has Active Service aggravated it? Yes.

(*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?

8

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

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

(*ii*) As to Group (*b*) above?

(*iii*) As to Group (*c*) above?

carded 23-4-17 DMB

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) ?

If not, indicate it.

12. Is the cause of the disability fully indicated in Part I (2) ?

If not, indicate it.

13. Was the disability caused or aggravated by— (*a*) Negligence of the Soldier { Caused ? / Aggravated ? } (*b*) Misconduct of the Soldier { Caused ? / Aggravated ? }

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%.*)

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*).

16. Permanency of the Pensionable Disability estimated next above in (15).
(*i*) Is it permanent ?
(*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 ?

18. Remarks.

19. Recommendation :—(*a*) Fit for duty ?
(*b*) Fit for base duty ?
(*c*) Invalid to Canada ?
(*d*) Discharge from Service as permanently unfit ?

Classification for the Military Hospitals Commission.

Date of Board

Station

Signatures of the Board { *President.*

Approved A.D.M.S.

Dated at Station

PART I. (*continued*).

5. If a cause of disability was an injury received on Active Service, was it received— Not applicable.

(*i*) While on duty? (*ii*) While off duty?

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

(*vi*) Opinion of the Court?

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.*)

In Feubruary 1915 had Pneumonia at Omemee Ont, amd was in bed for two weeks and dit light duty for one month. On August 1916 on arrival in England had chills and fever and was sent to Hospital. He had a double pneumonia and a left pleurisy with effusionwhich was aspirated No. T.B. found in fluid. He was discharged from Hospital 23/11/16.

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

At present looks in good health body well nourished. Marked hectic flush in cheeks. Has put on weight in last month
Circulatory system. Shows no abnormity.
Respiratory... Chest well formed. Respiratory sounds clear over anterior chest. Base of left lung shows dullness on percussion breath sounds prolonged, no crepitations.
Digestive. No abnormity.
Urine. No sugar and albuman. Nervous system normal

8. OPERATION. (*i*) Was one performed? Chest was aspirated and fluid w thdrawn.

(*ii*) If so, state what. 28/8/16.

(*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? Not applicable.

(*ii*) If so, describe.

10. DO YOU RECOMMEND:—

(*a*) Fit for duty?

(*b*) Fit for base duty?

(*c*) Invalid to Canada?

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

Date of Report Dec 22 1916 Signed A Macphersn Capt
Officer in medical charge of case.

Station Witley England

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

P A Stewart Maj {Officer i/c Hospital / S.M.O. Brigade} Strike out one of these.
Camp

Dated at Bramshott Station, on 6/1 1917

* Delete if inapplicable.

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.

Reserved for M.H.C.

Regt. No. 327 Rank Pte. Surname Shaver Christian Name Stanley Victor Howard

Unit or Corps—(a) Overseas from United Kingdom 18th Bn. C.E.F. (b) In United Kingdom

Born at—Town Little Britain County or Province Ontario. Country Canada.

Date of Birth—Day 15 Month January Year 1900 Age 16 yrs. 11 months.

Joined at Lindsay Ontario. Date Nov. 16/15.

Former Trade or Occupation Schoolboy.

Permanent marks or peculiarities for future identification :—

None.

Height—feet 5 inches 6½ Colour of eyes Blue.

Signature of Soldier (for identification purposes) Stanley Victor Howard Shaver

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*).

Pneumonia and pleurisy with effusion. results.

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.	Infection after influenza.	England.	Oct. 4/16.
(*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? Yes. If yes, has Active Service aggravated it? To disease contracted.

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

(*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? Pneumonia contracted on service.

(*ii*) As to Group (*b*) above?

(*iii*) As to Group (*c*) above?

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)?

If not, indicate it.

12. Is the cause of the disability fully indicated in Part I (2)?

If not, indicate it.

13. Was the disability caused or aggravated by— (*a*) Negligence of the Soldier { Caused? / Aggravated? } (*b*) Misconduct of the Soldier { Caused? / Aggravated? }

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%.*)

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*).

16. Permanency of the Pensionable Disability estimated next above in (15).
(*i*) Is it permanent?
(*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?

18. Remarks.

19. Recommendation:—(*a*) Fit for duty?
(*b*) Fit for base duty?
(*c*) Invalid to Canada?
(*d*) Discharge from Service as permanently unfit?

Classification for the Military Hospitals Commission.

Date of Board

Station

Signatures of the Board

President.

Approved

A.D.M.S.

Dated at

Station

PART I. (*continued*).

5. If a cause of disability was an injury received on Active Service, was it received— Not applicable.

(*i*) While on duty? (*ii*) While off duty?

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

(*vi*) Opinion of the Court?

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.*)

In Feubruary 1915 had Pneumonia at Omemee Ont, amd was in bed for two weeks and did light duty for one month. On August 1916 on arrival in England had chills and fever and was sent to Hospital. He had a double pneumonia and a left pleurisy with effusionwhich was aspirated No. T.B. found in fluid. He was discharged from Hospital 23/11/16.

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

At present looks in good health body well nourished. Marked hectic flush in cheeks. Has put on weight in last month
Circulatory system. Shows no abnormity.
Respiratory... Chest well formed. Respiratory sounds clear over anterior chest. Base of left lung shows dullness on percussion breath sounds prolonged, no crepitations.
Digestive. No abnormity.
Urine. No sugar and albuman. nervous system normal

8. OPERATION. (*i*) Was one performed? Chest was aspirated and fluid w thdrawn. 28/8/16.

(*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? Not applicable.

(*ii*) If so, describe.

10. DO YOU RECOMMEND:—

(*a*) Fit for duty?

(*b*) Fit for base duty?

(*c*) Invalid to Canada?

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

Date of Report Dec 22 1916 Signed J. Macpherson Capt
Officer in medical charge of case.

Station Witley England

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

A. A. Stewart Maj
Officer i/c Hospital / S.M.O. / Brigade — Strike out one of these.

Dated at Bramshott Station, on 6-1-1917

* Delete if inapplicable.

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.

Canadian Discharge Depot.
Empire Hotel. Buxton.

22 MAR 1917 1917.

No. 724527
Pte. Shaw S.

I hereby certify that the marginally noted man was examined by me on the above date and was not suffering from any skin, contagious infectious or venereal diseases, and that he is fit to travel.

Captain. C.A.M.C.
Canadian Discharge Depot.

McCard
C.R.94

116744

R. & O. 6045 (*Revised*).

PROCEEDINGS OF A MEDICAL BOARD.

Dated at Epsom Oct 29th 1916.

No. 724527 Rank Pte Name Shaver S

Local Unit 109 Res Bn Overseas Unit Age 16

Examination held at

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

none

PRESENT CONDITION.

Arrived in England Aug 1st 1916 & has been in hospital more & less ever since. Says he was "tapped" & fluid removed from left pleural cavity. Physical signs negative. Student at Business College

BOARD RECOMMENDS:— School of Stenography

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

APPROVED
CAPT. C.A.M.C.
FOR A/ADJ. GENERAL AND FOR
G.O.C. TROOPS,
SHOREHAM-BY-SEA.

Signatures:—

Members
Sgt W. Batty Major ..... President.
Sgt A R Farell Capt
.....

APPROVED
Shoreham Camp, Sussex. 20 NOV 1916

Dated at ..... 1916.

For A.D.M.S.
Captain, A.M.C.,
For A.D.M.S., Canadians, London Area.

B. & O. 0045 (Revised)

PROCEEDINGS OF A MEDICAL BOARD.

Dated at.....1916.

No.....Rank.....Name.....

Local Unit.....Overseas Unit.....Age.....

Examination held at.....

DISABILITY.
Overseas—Local.
(scratch one out)

PRESENT CONDITION.

BOARD RECOMMENDS:—

1. Fit for Duty.....

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.....1916.

For A.D.M.S.

R. & O. 6091.

CERTIFICATE re DISCHARGE DOCUMENTS.

Name in full Shaver, Stanley

Reg'tl. No. 724527

Rank Pte

Reserve Unit 8th

Present Unit C.C.A.C.

Place of Residence in Canada Toronto

Military District 2

Classification of Disability Being a Minor. Authority; K.R.& O ,para392,sec 6A

(or) Reason for Discharge and Army Council Instruction, 1186 of 1916.

Commandant C.D.D. will assume responsibility by his initial in proper column that documents listed below have been completed, checked, and enclosed.

If original documents, initial in column on the left.

If original not available, initial in column on the right.

Initials of Commandant C.D.D. (Originals).	List of Documents required to complete Discharge, checked and enclosed.	Initials of Commandant (Originals not available).
P.F.H.	Proceedings on Discharge. (B. 268.) (Must be Original)	
P.F.H.	Proceedings of Medical Board. (B. 179.) (Must be Original)	
P.F.H.	Medical History Sheet. (A.F.B. 178.) (Must be Original)	
P.F.H.	Last Pay Certificate. (Must be Original)	
	Certificate of Discharge. (A.F.B. 2079.)	
P.F.H.	Casualty Form. (A.F.B. 103.)	
P.F.H.	Attestation Paper. (M.F.W. 54.)	
P.F.H.	Field Conduct Sheet. (A.F.B. 122.)	
	Company Conduct Sheet. (A.F.B. 121.)	
	Reg'tl. Conduct Sheet. (A.F.B. 120.)	
P.F.H.	Inventory of Kit. (W. 3068.)	
P.F.H.	Declaration from Dischargee.	

CANADIAN DISCHARGE DEPOT,

Lieut:-Col.,

Officer Commanding,

(Signature)

COMMANDANT.

CANADIAN DISCHARGE DEPOT.

CERTIFICATE FOR DISCHARGE DOCUMENTS.

Name in full.

Reg'tl. No.

Rank

Reserve Unit

Present Unit

C.C.A.C.

Place of Residence in Canada

Military District

Classification of Disability

(or) Reason for Discharge

Commandant C.D.D. will assume responsibility by his initials in proper column that documents listed below have been completed, checked and enclosed.

If original documents, initial in column on the left.

If original not available, initial in column on the right.

Initials of Commandant C.D.D. (Originals)	List of Documents required to complete Discharge, checked and enclosed	Initials of Commandant (Originals not available)
	Proceedings on Discharge. (B. 205.) (Must be Original)	
	Proceedings of Medical Board. (B. 179.) (Must be Original)	
	Medical History Sheet. (A.F.B. 178.) (Must be Original)	
	Last Pay Certificate. (Must be Original)	
	Certificate of Discharge. (A.F.B. 207.)	
	Casualty Form. (A.F.B. 105.)	
	Attestation Paper. (M.F.W. 24.)	
	Field Conduct Sheet. (A.F.B. 122.)	
	Company Conduct Sheet. (A.F.B. 121.)	
	Reg'tl. Conduct Sheet. (A.F.B. 120.)	
	Inventory of Kit. (W. 300.)	
	Declaration from Discharge.	

(Signature)

COMMANDANT

CANADIAN DISCHARGE DEPOT.

This space to be left blank for the Chelsea Number.

Army Form B. 268.

OK

Proceedings on Discharge.

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

No. 724527 Army Rank Pte

Name Shaver, Stanley
(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)

Corps C.C.A.C.

Battalion, Battery, Company, Depôt, &c.
(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 MAY 2 1917

Place of discharge QUEBEC

DISCHARGE DEPOT

1. *Description at the time of discharge.*

Age 17 years - months

Height 5 feet 6 inches

Chest measurement { girth when fully expanded ins. / range of expansion ins.

Complexion Fair

Eyes Blue

Hair Fair

Trade School

Intended place of residence (To be given as fully as practicable)

Descriptive marks.

1 Vacc Lt Arm

(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 being a Minor
Auth. K.R.&O. Para 392. Sec VI a. & Army Council Instructions 1186 of 1916

(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 :— Good See G7812

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

CANADIAN DISCHARGE DEPÔT,

W.S.G. Comp. 15-2-19.

..... Lieut:-Col.,

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.

Officer Commanding,

Initials of Commanding Officer.

Carded 23-4-17 (W.B.)

Army Form B. 2088 has been issued to*

* Strike out if not applicable.

D. D. & L., London, E.C. Forms B. 268 40
A4508 Wt. W17176/M291 500,000 8/16 Sch. 39

[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

LOCAL CASUALTY

Certificate of education .....

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

CANADIAN DISCHARGE DEPOT, Kingston Ont.

(Place) _____ JAN 25 1917

(Date) _____ FILE

CANADIAN DISCHARGE DEPOT,

Lieut.-Col.,

Commanding _____ Battn. _____ Regiment.

Officer Commanding,

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*) _____ DISCHARGE DEPOT APR 17 1917 _____ (*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 MAY 2 - 1917 (date)

(Place) _____ DISCHARGE DEPOT QUEBEC APR 17 1917

(Date) _____

Signature _____ CAPT. & ADJT. for O. C. Discharge Depot Quebec.

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.)

None.

S. Silver,

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.