

ATTESTATION PAPER.

No. 725/55

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

Folio.

TRIPPLICATE

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your surname? *Stewart*
- 1a. What are your Christian names? *Charles Benjamin*
- 1b. What is your present address? *411 Young St Toronto*
2. In what Town, Township or Parish, and in what Country were you born? *Toronto, Ont.*
3. What is the name of your next-of-kin? *Mrs Westwood*
4. What is the address of your next-of-kin? *411 Young St Toronto*
- 4a. What is the relationship of your next-of-kin? *Sister*
5. What is the date of your birth? *13th May 1883*
6. What is your Trade or Calling? *Waiter*
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.

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

Date... *Jan 14* 1916 *Chas. B. Stewart* (Signature of Recruit)
Geo Downey St. (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

Charles Benjamin Stewart do make Oath, that I will be faithful and bear true Allegiance to His Majesty **King George the Fifth**, His Heirs and Successors, and that I will as in duty bound honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity, against all enemies, and will observe and obey all orders of His Majesty, His Heirs and Successors, and of all the Generals and Officers set over me. So help me God.

Date... *Jan 14* 1916 *Chas. B. Stewart* (Signature of Recruit)
Geo Downey St. (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 day of *January* 1916.
[Signature] (Signature of Justice)

*Non-official
 25-2-15
 [Signature]*

Description of Charles Benjamin Stewart on Enlistment.

Apparent Age 32 years 7 months.
 (To be determined according to the instructions given in the Regulations for Army Medical Services.)

Distinctive marks, and marks indicating congenital peculiarities or previous disease.

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

Height 5 ft. 5 1/2 ins.

None

Chest measurement { Girth when fully expanded 36 ins.
 Range of expansion 3 ins.

Complexion Fair

Eyes Blue

Hair Brown

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

CERTIFICATE OF MEDICAL EXAMINATION.

I have examined the above-named Recruit and find that he does not present any of the causes of rejection specified in the Regulations for Army Medical Services.

He can see at the required distance with either eye; his heart and lungs are healthy; he has the free use of his joints and limbs, and declares that he is not subject to fits of any description.

I consider him* fit for the **Canadian Over-Seas Expeditionary Force.**

Date Jan 14th 1916

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

Place Lindsay

* 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.

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

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

Date JAN 18 1916 1916

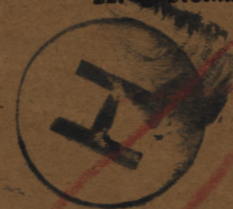
Proceedings of Court of Inquiry or on men reported Missing on Active Service.....
 Attestation Papers..... *2*
 Declaration of change of name.....
 Authority for special enlistments.....
 Documents of re-enlisted men.....
 Regimental Conduct Sheet.....
 Compulsory Stoppages.....
 Casualty Forms..... *3*
 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.....
 Proceedings of Regt. Court Martial.....
 Copies of Convictions by Civil Power.....
 Company Conduct Sheet.....
 Clothing Transfer Certificate.....
 Inventory of Kit.....
 Last Pay Certificate.....

DISCHARGE DOCUMENTS



R. O. No.

H. O. No.



Name *Stewart Charles Benjamin*
 Regt. No. *725155* Rank *Pte*
 Corps *No 3. Spec Serv. Co 7 form 109th Bn*
Services no longer required
Auth. M.D. 88-S-325. dated 7-2-18.

42369

Discovered 7-2-35



9 P.B. 122.1
P 122-1
1 Pay Card
1 Rtd will

DISCHARGE

Name

Regt. No.

Rank

Corps

Faint, illegible text visible through the paper, likely from the reverse side of the document.



red
WMC

B

Number 425 155 Rank Pte

Surname STEWART

Christian Name Charles Benjamin

Units 109th Can Int Theatre of War Eng

Date of Service 31/7/16

Remarks

Latest Address Lindsay (Box 1111)
Ont.

Roll No. A Page 2059 2 Division St

200m.-2-21.M. Toronto Ont

DESP NOV 17 1922
REGN. NO. 21814

SURNAME.

Stewart

CARD NO.

CHRISTIAN NAMES

Charles Benjamin

S.O.S. Dis 12-2-16. 5

REGL. No.

725155

RANK

Pte.

UNIT

109th

Batt.

FORMER COPPS

nil

NEXT OF KIN.

NAMES IN FULL

Westwood, Mrs

also notify -
CHANGE OF ADDRESS

RELATIONSHIP TO SOLDIER

Sister

Stewart, Mrs. C.B.
54 Cambridge,
S. Lindsay, Ont.
S. a. p. 2-6-17.
Ee.

ADDRESS

411 Yonge St., Toronto, Ont.

COUNTRY OF BIRTH

Canada, Toronto, Ont.

DATE

May 13th 1883

PLACE OF ATTESTATION

Lindsay, Ont.

DATE

Jan. 18th 1916

Sailed from Halifax



Per S.S. Olympic 23/7/16

MARRIED

SINGLE

Yes

WIDOWER

TRADE OR CALLING

Waiter

RELIGION

Church of England

DESCRIPTION.

APPARENT AGE

32 YEARS

7 MONTHS

HEIGHT

5 FEET

5 1/2 INCHES

CHEST MEASUREMENT

36 INCHES

EXPANSION

3 INCHES

COMPLEXION

Fair

EYES

Blue

HAIR

Brown

DISTINGUISHING MARKS

Nil

MEDICAL EXAMINATION.

PLACE

Lindsay, Ont.

DATE

Jan. 14th 1916

No. 725155 RANK Pte

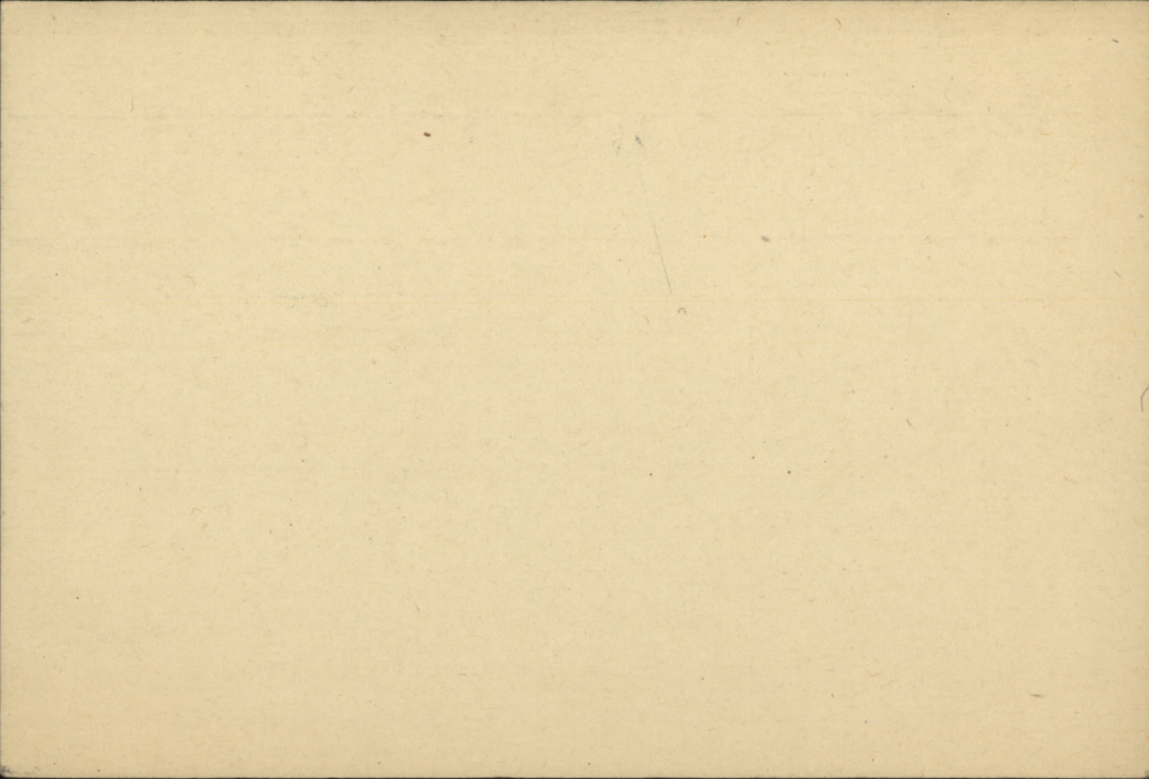
NAME Stewart. G. B.

T. O. S. 13-1-16. UNIT 109th Battalion.
D.O. 47. 14-1-16

M. D. 3

PAID		SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
FROM	TO		PARTICULARS	AUTHORITY
1916 Jan 13	1916. Jan 31	✓		
	Feb.	✓		
	Mar.	✓		
	April.	✓		
	May.	✓		
	June.	✓		
	July.	✓		

UNIT SAILED
JUL 23 1916



No. 725155 RANK *Pte*NAME *Stewart. G.* *B*

T. O. S.

UNIT

*Special Service Battalion**Transfd from Cascoatta 10-1-18*
*Nov 12 of 12-1-18**#34609*M. D. *3*

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1917</i>	<i>1918</i>			
<i>Dec 18</i>	<i>Jan 31</i>	<i>✓</i>		
<i>Feb 1</i>	<i>Feb 12</i>	<i>✓</i>	<i>LOS. 12-2-18. PUS</i>	<i>10043 of 12-2-18.</i>
<i>closed by payment 8</i>				



DENTAL CERTIFICATE.

75155
St. Stewart. C.B.

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

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.
<i>19/12/17</i>	<i>Fit</i>			

*W. J. Gunn
Cp R.C.M.C.*

DENTAL CERTIFICATE

The following certificates will
be attached to the Medical History sheets of all
Other Rank being required to qualify for discharge

Date of Examination	Present Dental Condition	In case of loss of teeth the loss due to disease directly attributed to active	Loss of teeth Dental Treatment

[Handwritten signature]

DENTAL CERTIFICATE.

The following certificate will be attached to the Medical History Sheets of all other ranks being returned to Canada for disposal.

725'183' Plc Stewart C.B.

Date of Examination.	Present Dental condition.	In case of loss or decay of teeth, is the loss due to wounds or Injury or disease directly attributed to active service,	Has he ever declined Dental Treatment.	Recommendation.
12/12/17	O.K.	—————	No	—————

(Reference; A.G. Canadians 3-1-22)

R. D. G. Bank
 Captain:
 C.A.D.C.
 Dental Officer C.A.M.C. Depot.

UNITED STATES DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

The following certificate is issued to the landowner of the land described in the following table, and is subject to the conditions and terms of the certificate.

702 102 102 102
Howard (C)

Section	Township	Range	County	State
1	N. 10	E. 10	B. K.	S. D.

(Certificate of Land Ownership)

Howard (C)

UNITED STATES DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Casualty Form—Active Service.

Regiment or Corps.....
 Rank Private Surname Stewart Christian Name Chas Benjamin
 Religion..... Age on Enlistment..... years..... months.
 Enlisted (a) 13-1-16 Terms of Service (a) Duration Service reckons from (a) 13-1-16
 Date of promotion to present rank..... Date of appointment to lance rank.....
 Extended {.....} Re-engaged {.....} Qualification (b) Waiter
 or Corps Trade and Rate.....
 Signature of Officer.....

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
			Embarked		
			Disembarked.....		
<u>20-3-17</u>	<u>1st C.O.R.D.</u>	<u>T.O.S. 1st C.O.R.D. 12th Res Bn</u>	<u>West Sandling</u>	<u>10-3-17</u>	<u>Pt. II D.O. No. 11</u>
<u>19-6-17</u>	<u>- do -</u>	<u>Ceases to be att. to 12th Res and att. to Mitchell Camp</u>	<u>- do -</u>	<u>27-3-17</u>	<u>Pt. II D.O. No. 102</u>
<u>18 DEC 1917</u>					

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
 (b) Signaller, Shoeing-Smith, &c.

[P.T.O.]

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

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

Casualty Form—Active Service.

250M.—1-16.

H. Q. 1772-39-920.

109th OVERSEAS BATTALION, C. E. F.

Unit, Regiment or Corps

Regimental No. 25155 Rank Private Name Stewart Charles Benjamin

Enlisted (a) 13.1.16 Terms of Service (a) D of W Service reckons from (a) 13.1.16

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

Extended _____ Re-engaged _____ Qualification (b) Waiter

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

Transfd to C. C. A. C.

Bramshott 1.9.16

Auth. C. C. A. C.
 Arthur CAPTAIN

21. 10. 16. Taken on strength C. C. A. C. Pt. II D. O. No. 461

17 NOV 1916

Discharged from C. C. D. Shoreham-by-Sea to CCAC

ADJUTANT,
 109th BATTALION CAN. INFAN. RY.

W. Mackintosh
 Bn. Part II D. O. No. 24

W. Mackintosh
 Adjutant,
 Canadian Command Depôt,
 Shoreham-by-Sea,

17. 11. 16. ATTACHED
 TRANSFERRED FROM C. C. A. C. TO 109th Bn.

PART II D. O. No. 3

8-12-16 O.C. 109th Transferred to 124 Bn. Whitley 8-12-16 D. O. Part II # 843

(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.

Casualty Form Active Service

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				
19-12-16	124 Bn	Transferred to CCAE	Witley	12-12-16	Part II Orders 276 <i>W. Jones</i> MAJOR ADJUTANT, 124th BATTALION C.E.F.
20-1-17	124 Bn.	Attached to Garrison Duty Battalion	Witley	19.1.17	Part II Orders 20 <i>W. Jones</i> ADJUTANT, 124th BATTALION C.E.F.
10.2.17	124th Bn.	Attached to Garrison Duty Bn.	Witley Camp	10.2.17	Part II Orders 41 <i>W. B. Kingham</i> Capt ADJUTANT, 124th BATTALION C.E.F.
124 th B.	124 th B.	Att. Gar Duty Bn Captain Officer etc	Bramshott	10/2/17	Auto 6606 P.I.D.O. C.C.A.C. SUB-OFFICE, BRAMSHOTT.
		cesses to be attached to the 124 th Bn Transfer to 1st. Coy. 8.6.17			<i>D. P. 137</i> The Garrison Duty Bn (Bramshott Camp)

Captain,
Asst. Adjt.
Cavalry.

Casualty Form—Active Service.

Regiment or Corps.....
 Rank Pvt Surname Stewart Christian Name C. B.
 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.....
 Signature of Officer.....

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
			Embarked		
			Disembarked.....		
<u>20-3-17</u>	<u>1st C.O.R.D. T.O.S. 1st C.O.R.D.</u>		<u>West Sandling</u>	<u>20-3-17</u>	<u>Pt. II D.O. No. 11</u>
<u>19-6-17</u>	<u>do - att to Mychett Camp</u>		<u>do</u>	<u>27-3-17</u>	<u>do - 102</u>
<u>23-10-17</u>	<u>do - Ceases to be attached</u>		<u>do</u>	<u>22-10-17</u>	<u>do - 228</u>
<u>8-11-17</u>	<u>do - att to Etch Hoop</u>		<u>do</u>	<u>7-11-17</u>	<u>do - 244</u>
<u>21-11-17</u>	<u>do - Ceases to be attached</u>		<u>do</u>	<u>20-11-17</u>	<u>do - 257</u>
<u>28-11-17</u>	<u>1st C.O.R.D. S.O.S. on transfer to</u>		<u>West Sandling</u>	<u>28-11-17</u>	<u>Pt. II D.O. No. 264</u>
<u>29-11-17</u>	<u>C.A.M.C Depot T.O.S. from 1st C.O.R.D.</u>		<u>Shorncliffe</u>	<u>28-11-17</u>	<u>Pt 2 333</u>

G. H. Smith Lieut. & Asst. Adjt.
 for O. C. 1st C. O. R. D.

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
 (b) Signaller, Shoeing-Smith, &c.

[P.T.O.]

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				
19-12-17	C.A.M.C. Depot	On Command to 1st C.D.D., Buxton pending return to Canada	Shorncliffe	17-12-17	Pt 2-351
18 DEC 1917		TAKEN ON STRENGTH C.D.D. BUXTON Pt. 11 ORDER No. 249	Commanding		Lieut.-Col. Canadian Discharge Depôt.
2167 23 DEC 1917		EMBARKED FOR CANADA FROM LIVERPOOL	Commanding		Lieut. Col. Canadian Discharge Depôt.

Y. B. Blayney
CAPT. ASST. ADJUTANT
C.A.M.C. DEPOT

F. W. H. H.
Lieut.-Col.
Canadian Discharge
Depôt.

F. W. H. H.
Lieut. Col.
Canadian Discharge
Depôt.

LTR Rank Name STEWART, Charles Benjamin Reg'l No. 725155
 Unit 109th. Bn. If in perm. Corps, }
 What Unit? } Married or Single Single.
 Place and Date of Enlistment Lindsay, 14th, January, 1916, Place of Birth Toronto, Ontario.
 Name and Address, Next-of-Kin Mrs Westwood.
411. Yonge St, Toronto, Ontario, Canada, Relationship Sister.
 Assigned Pay Monthly \$ Payable to Relationship
 Separation Allowance \$ Payable to Relationship

*assume
KI*

N/E R.B. No. 1956
 File R.1. _____
 Category OBilan

Discharge, Date and Place Reason Character
 H. W. & V., Ltd.—7165-16. *pte.*

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS. Taken from Official Documents.	
Date.	From whom received.					
		Arrived in England per H. M. T. 2810			31-7-16	
4.9.16	OC 109 th	S.O.S. + assigned to C.C.A.C.	Bramshott	2.9.16	Pt II S.O. 248	
21-10-16	bbab	S.O.S. + on comm to 124 th Bn	S. Ham	2.9.16	Pt II 0461	
20-11-16	"	Rept as lc Lt bbD	"	18-11-16	Pt II 510 511	
21-11-16	"	on comm SOB off B'shott, full duty	"	20-11-16	Pt II 0 513	
26.11.16	ccac.	Having Rept Clears Att C.C.A.C.	"	19.11.16	— 523	
23-11-16	109 th	Having Completed P.M. Course in Tos	Witley	21-11-16	Pt — 104 328	
8.12.16	OC 109 th Bn	and returned from bbab. SOB on trans. to 124 th Bn	do	8.12.16	— 343	
9.12.16	"	SOB on offer for 109 th Bn.	"	"	" 265	
19.12.16	"	SOB on offer to ccac r Att'd to 124 th for D.D. Pre	"	12.12.16	" 276	

SP

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
Date.	From whom received.				
19-12-16	CCAS	Pt II O 613(10) 21-11-16. In so far as it refers to this man is amended to read 'fit for full duty + SOS on terms 15.109A	Yokohama	20-11-16	Pt II O 660
11-2-17	+ Pt II O 124	Ceases at 1st Lt 2nd GDBn		10-2-17	Pt II O 42
14-3-17	CCAS	S.O.S. on transfer to 1 Cent Ont Regiment	Hastings	10-3-17	Pt II D.O. 120
20-3-17	1 CO RD	J.O.S. remains attached 12 th Reg Bn	H. Sandling	10-3-17	11.
8-6-17	J.O.S.	Ceases to be attached to 8 th Bn on trans to 1 CO RD & on comm. at Mychett.		8-6-17	127 (4102 1 CO RD 2/19/17)
23-10-17	1 CO RD	beare on comm. Mychett		22-10-17	228
8-11-17	1 CO RD	Attach. to 8 th Btn at Etchunhill Hoopst		7-11-17	244
21-11-17	1 CO RD	beare Attach. 8 th Btn at Etchunhill - Pt		20-11-17	257
28-11-17	1 CO RD	Sgt to C All C	"	28-11-17	264
29-11-17	6 amb'd	TOS from 1 st CO RD	Pt Seliffe	28-11-17	333
17-12-17	"	On com to 6 th CO RD Buxton	Pt "	17-12-17	351
2-1-18	"	S.O.S. on rep. to Canada for disposal by A.G. Ottawa.	Pt do.	23-12-17	"-2.

Dis Report: For class Duty, MA 3 Kingslin 5/1/18 NR 417

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 Pvt. Name Charles Surname Stewart
Unit of Corps Co 3 S.S. Co (If a soldier) Regt. No. 725155
Born at Toronto on, (date) May 13 1883
Signature (for identification) Charles Stewart

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

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

Weight 145 lbs. Colour of eyes Blue
Height 5 ft. 7 in. Identification Marks Scars inside left thigh.

2. NUTRITION AND DIATHESIS?

Partly well nourished

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

3. NERVOUS SYSTEM? Is there a history of previous disability?

No

4. RESPIRATORY SYSTEM? Is there a history of lung trouble?

No

5. HEART?

Abnormal Sounds? No
Abnormal Size? No
Pulse Rate? 80 Intermittence or Irregularity? No Muscular Tone? Good

6. ARTERIES.—(a) Any hardening or nodulation? No

(b) Blood Pressure.

7. DIGESTIVE SYSTEM? (Condition of teeth and tonsils to be included).

Normal

8. GENITO-URINARY SYSTEM?

Urinalysis—S.G.? 1013 Reaction? acid Albumen? nil Sugar? nil

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

Normal

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

varicose veins of both legs.

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

Good ~~and~~ Partly good except for varicose veins.

Examined at Kingston, Ont Signed W. J. Graham Capt M.O.
Date Feb 5th 1918 Signed W. J. Hayes Capt M.O.
Charles Stewart M.C. FORM 100
Signature note of Soldier.

If any disease or impairment of health or physical condition is discovered or complained of by the soldier examined, 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

6393

Medical Examination upon leaving the Service
of an Officer in General Service or a Soldier in the Line

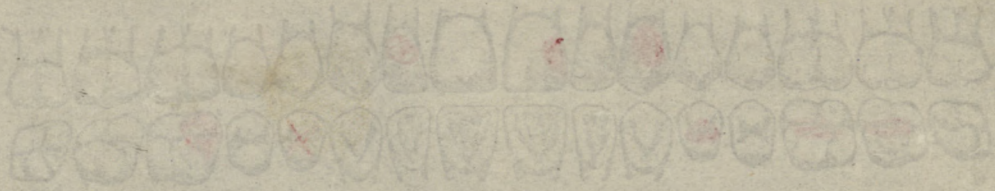
The purpose of this examination is to determine the physical condition of the person at the time of leaving the service upon being found fit for duty by a Medical Board, or to determine the physical condition of the person at the time of leaving the service upon being found unfit for duty by a Medical Board.

Name		Rank	
Unit or Service		Date	
Place of Examination		Signature of Examiner	
1. PHYSIOLOGICAL AND ANATOMICAL: (To be filled in by the Examiner)			
Weight	Height	Color of eyes	Color of hair
2. NUTRITION AND DIETETICS: (To be filled in by the Examiner)			
3. NERVOUS SYSTEM: (To be filled in by the Examiner)			
4. RESPIRATORY SYSTEM: (To be filled in by the Examiner)			
5. HEART: (To be filled in by the Examiner)			
6. BLOOD: (To be filled in by the Examiner)			
7. DIGESTIVE SYSTEM: (To be filled in by the Examiner)			
8. URINARY SYSTEM: (To be filled in by the Examiner)			
9. SKIN, MIDDLE EAR, EYE, AND OTHER PARTS: (To be filled in by the Examiner)			
10. SPECIAL TESTS: (To be filled in by the Examiner)			
11. GENERAL CONDITION: (To be filled in by the Examiner)			
12. SIGNATURE OF EXAMINER: (To be filled in by the Examiner)			

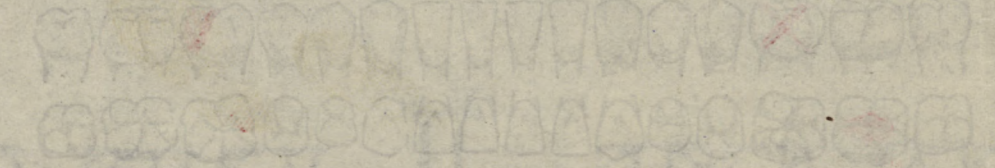
INSTRUCTIONS

1. On examination the condition of patient's teeth to be marked on patient's chart.
 2. On first visit of patient record of same teeth to be made in chart.
- 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 re-examination.

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16



17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32



OPERATOR		DENTIST	DENTAL CLINIC	PATIENT'S NAME	DENTAL NUMBER	EXAMINATION DATE	DENTAL OFFICE	DENTAL CITY	DENTAL STATE	DENTAL COUNTY	DENTAL ZIP	DENTAL PHONE	DENTAL FAX	DENTAL EMAIL	DENTAL WEBSITE	DENTAL SOCIAL MEDIA	DENTAL COMMENTS
DATE	INITIALS																

DEPARTMENT OF HEALTH AND HUMAN SERVICES
 NATIONAL INSTITUTE OF DENTISTRY
 DENTAL HISTORY SHEET

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

S. 727
017412-C-9.

46
mpd

Name **Stewart, Charles Benjamin**
Surname Christian Name

Regimental Number **725155** Rank **Pte.**

Address (in full) **1604 Queen St. E.,
Toronto, Ont.**

Unit **NO.#3. Special Service CO.**

Original Unit

District where paid **M.D. 3.**

Date of Discharge **12-2-18.**

P. D. P. Filing Number **11-81-3.**

Rates:—Regimental pay \$ **1.00** per diem: Field Allowance \$ **.10** per diem. Separation Allowance \$ **25.00** per month.

L. L. 22573—M. & D. 8009.

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		
175 10	1604	12-3-18	58 00	1572	12-4-18	59 10				58 00	117 10

Remarks: **Advance on Account Post Discharge Pay.**

M. F. W. 127.
60M - 0 17.
1772 89-1140.

File No. 017412-C 52

WAR SERVICE GRATUITY.

Register No. S 727

Reg. No. 725155

Dependent Mrs Margaret Stewart (Wife)

Name Stewart, Charles B. File No. 1411

Address 301 Spadina Ave Toronto Ont

Address 301 Spadina Ave Toronto Ont

Address 337 Spadina Ave Toronto Ont

Address 337 Spadina Ave Toronto Ont

Address 337 Spadina Ave Toronto Ont

Address 337 Spadina Ave Toronto Ont

Address 337 Spadina Ave Toronto Ont

Pay Soldier \$ 16.20

Pay Dependent \$ 150.00

Clerk D. W. Graham

Days 153 Rate 100.00 Due 500.00

Clerk W. C. Haydon

Less P.D.P. credited 175.10 175.10

Clerk G. W. Mitchell

Less further Dr. Bal. 28.00 233.10
or overpayment.

Net 324.90

R
W102
711119

Date	Ck. Order	Ck. No.	Amount	Remarks	Date	Ck. Order	Ck. No.	Amount
14/8/19	7955	508794	140.00	1st Ch. to Sold. Dep. cons. care Sold. Rehabil. Regue, Toronto, Ont	14/8/19	7950	508795	60.00
2					2			
3 15/9/19	24005	517179	34.90		3 11/9/19	17687	515368	30.00
4					4 5/9/19	24006	517180	60.00
5					5			
6					6			


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

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

SEPARATION ALLOWANCE

Name Margaret Stewart Name of Soldier Stewart. C. B.
 Address 88 William St. N. Regtl. No. 425155
Lindsay Rank Pte
57 Cambridge South Ont. Corps 109^H Batt
 Relation to Soldier }
 wife, child or mother } Wife
 To what Corps belonging }
 when called out }

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
Apl.				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				



SEPARATION ALLOWANCE

Sheet No. 2

M. Stewart

OVERSEAS CONTINGENTS

PAYMENTS.

Name of Soldier

Stewart C. B.

L. L. Job 310.—Req. 6574.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June		W 3219	50	50
July		V 11203	20	20
Aug.		Z 11313	30 -	20
Sept.		A 17583	20	30
Oct.		Z 20286	20	20
Nov.		J 22966	20	20
Dec.		G 26500	20	20
Jan.	1917	F 30793	20	20
Feb.		F 33697	20	20
March		G 36930	20	20
April		G 2838	20	20
May	30	W G 6375	20	20 57 Cambridge South Lindsay Ont.
June		G 9614	20	20
July		G 12588	20	20
Aug.		R 16330	20	20
Sept.		V 18791	20	20
Oct.		G 22005	20	20
Nov.		O 24808	20	20
Dec.		E 28910	20	20
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

1310
 410
 R
 BV

MILITIA AND DEFENCE
SEPARATION ALLOWANCE
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier _____

PAYMENTS.

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

*c/o Mrs. D. Gage,
Caroline St., North,*

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

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

To Whom *Mrs. Margaret Stewart* By Whom Assigned *C. B. Stewart*
Address *Lindsay Ont.
57 Cambridge St. South* Regtl. No. *725155*
Rank *Plt*
Corps *109 Bln*
Rate *\$ 5.00* **AUG 1 1916**

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				



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1785^o

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

M. F. W. 12a.
 50m.-4-16.
 1772-39-819.

Sheet No. 2.

L. L. Job 310.-Req. 6574.

Mrs. Margaret Stewart
 PAYMENTS.

Name of Soldier

C. B. Stewart

725 153 (Pte) 109 Bln

15.00

Remarks.

AUG 1 1916

Month.	Year.	Cheque No.	Amt.
April	1916		
May			
June			
July			
Aug.		X 15530	15
Sept.		8 19346	15
Oct.		8 24662	15
Nov.		W 29033	15
Dec.		W 33179	15
Jan.	1917	N 42024	15
Feb.		M 47475	15
March		B 53531	15
April		H 53348	15
May		W 12106	15
June		V 18480	15
July		6 24867	15
Aug.		R 32548	15
Sept.		G 39592	15
Oct.		S 46178	15
Nov.		Q 53940	15
Dec.		Q 60494	15
Jan.	1918		
Feb.			<u>255</u>
March			
April			
May			
June			
July			

B 53531 Wks

57 Cambridge St. Lindsey Out. 30/1/18

15 T

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

Toronto ont

NAME AND ADDRESS OF NEXT OF KIN

Mrs Westwood

RELATIONSHIP OF NEXT OF KIN

sister

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
<i>Pay Restricted</i>	<i>1/10/16</i>	<i>cod 158 17/0</i>

ADMISSIONS TO HOSPITAL, & C.				
DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL	

REG'L. No *725155* RANK

Pte

NAME

Stewart Charles Benjamin

IF IN PERMT. CORPS
WHAT UNIT

UNIT

109th Bn

TRANSFERRED TO

C.C.A.C.

DATE

AUTHORITY

PERMANENT FORCE ALLOWANCES

TRANSFERRED TO

DATE

AUTHORITY

PLACE OF ATTESTATION

Lindsay Ont.

TRANSFERRED TO

124th Bn

DATE

AUTHORITY

DATE OF ATTESTATION

Jan 4 1916

TRANSFERRED TO

C.C.A.C.

DATE

AUTHORITY

ASSIGNED PAY MONTHLY \$

DATE EFFECTIVE

Aug 1 at 1916

PAYABLE TO

Margaret Stewart Lindsay Ont

RELATIONSHIP

wife

ASSIGNED PAY MONTHLY \$

DATE EFFECTIVE

PAYABLE TO

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE)

stopped

EFFECTIVE

REASON

DISCHARGE DATE AND PLACE

Canada 17/12/17

REASON AND AUTHORITY

Ab. 2-1-29 Disposal.

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

P. 3^r

2/18/18
Checked *W Meyer*
Stewart

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
			1916 July 31																																			410	410
Aug 31	31	1.00	31		31	10	310					3410	18	18/16	973					15		2473	1347																
Sept 30	30		30				3					33	50	30/16	730					15		2230	2417													20248 trans C.C.A.C. 2/1/16			
Oct			31	-			310					34	10	31/14 30/9	973					15	61	973	1444												72 from Bn. 109th Bn				
Nov 30			30				2					33	-	3224 2/1/10	730	242				15	1540	4074	780												17 days CP 2. 4 days AWL 10/11/17				
Dec 31	18		18				1	50				16	50	3/11	973					15		2716	1364												Trans. 109th Bn. D.O. 328. 20/11				
Jan 16			16				1	60				19	80		730					15		15	1514												Trans. 109th Bn. D.O. 328. 20/11				
Jan 20	16		16	30			1	60				17	60		973					15		13966	3274												11/24/16 12/16/16 2/1/17				
Jan 21	11	1.00	12	10								22			730					15		15	3974													11/24/16 12/16/16 2/1/17			
Feb 28			28									12	10	449 15/1 492 20/1	487	14	60			15		1947	3237																
Mar 31			31									30	80		487	14	60			15		15	06	4811															
Apr 30			30									34	10		4136	2676	3417			15	476	5803	2118																
May 31			31									410	29140		4136	2676	3417			15	660	2487	24722																

580
340
2487

Trans. 109th Bn. D.O. 328. 20/11

28 SEP 1918

725155 Pte Stewart, C.B.

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					1	2	3	4	1	2	3	4				CREDIT	DEBIT									
	\$	C.	\$	C.	\$	C.	\$	C.	No.	DATE	No.	DATE															No.	DATE				No.	DATE	No.	DATE		
Apr 30				267																																	
May 30				33																																	
June 30				33																																	
July 31				34																																	
Aug 31				34																																	
Sep 30				33																																	
				269																																	
				10																																	

MONTH	PARTICULARS	CR.1	CR.2	PARTICULARS	DR.1	DR.2	DR.3	DR.4	BALANCE	DEPER. RED. PAY	SEP. ALICE ENG.	PARTICULARS	CR.1	CR.2	PARTICULARS	DR.1	DR.2	DR.3	DR.4	BALANCE	
Oct P.P.		34 10		Assign pay					98 19 mil												
Nov. P. Pay.		33 -		loan AR					15 119 59												
				AR. 365. 24/10/17. 1 st CORP.	130																
				AR. 511. 28/11/17. 5 th P. Proj.	130																
Dec 17 P Pay		18 70							15 124 69												
				AR. 447. 16/8/17. 5 th P. Proj.	974				117 95												
				AR. 249. 11/11/17.	243				674.												
				AR. 310. 18/11/17.	974																
				426. 29/11. 1 st CORP.	130																
				AR. 4093. 4/1/18. 3/5 P. Proj.	973																
				AR. 814. 6/1/18. 1 st CORP.	973																
				AR. 581. 27/1/18.	973																
				AR. 66. 12/1/18.	973																
				AR. 572. 10/9/17. 5 th P. Proj.	974																
				AR. 129. 12/11/17. 1 st CORP.	973																
1918. Jan.		51 70							468 20												
				Q. 1216. 13/12/17. camcd	117																
				AR. 1017. 7/11/17.	487				40 98												
				AR. 196. 15/6/17. 5 th P. Proj.	17 03																
				AR. 635. 28/9/17. 1 st CORP.	730				1645												
				AR. 13001.	973				672												
				AR. 1030. 13/12/17. camcd	973				Nik												
Feb				Camfd	672																
March					672																
July					672																

A3M FORM REND ^{Scopped} EFFEC 1/1/18
 DISCHARGED TO Canada DATE 17-12-17
 PAYBOOK VERIFIED *if*
 BAL. 6.74. L.P.C. REND 17/3/17
 ART IV. A.S. 21/129. Disposal.

Checked *[Signature]*
 C.P.S.



21-1-36

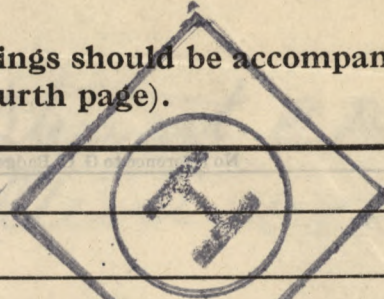


This space to be for numbers

Proceedings on Discharge.

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

No.	725155
Rank	Private
Surname	Stewart
Christian Name	Charles Benjamin
NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.	
Corps (Squadron, Battery or Company)	No 3 Spec. Serv. Co.
Date of Discharge	February 12th, 1918
Place of Discharge	Fort Henry



1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age..... 35 years..... months.
 Height..... 5 feet..... 6 inches.
 Complexion..... medium
 Eyes..... Blue
 Hair..... Brown
 Trade..... Waiter
 Intended place of residence..... Lindsay Ont.
 (To be given as fully as practicable.)..... Box 1111

Descriptive Marks

Scar on left thigh.

2. The above-named man is discharged in consequence of ~~Services no longer required~~ *Services no longer required. Amn 3ma 88-8-325 dated 8-2-18*

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

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

+ Good +

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.)

Waiter

8-15-4-55

E. B. J.

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

*non-off. Rec.
25-2-18*

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

nil

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

6. Medals and Decorations.....

nil

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).....

Fort Henry

A. B. Bunnell MAJOR

O. C. No. 3 Special Service, C. E. F.

(Date).....

12-2-18

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.

(Place).....

Fort Henry Stewart C. B.

(Signature of Soldier.)

(Date).....

13/2/18

W. J. Munro

(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.

.....

Stewart C. B.

(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).....

Fort Henry

A. B. Bunnell MAJOR

(Signature).....

O. C. No. 3 Special Service, C. E. F.

(Date).....

12/2/18

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.)

W. L. Mumford
Stewart C. B.

Reg. Conduct Sheet	Militia Form B. 206	Attestation Paper	Militia Form B. 205
Squadron Battery Company	Conduct Sheet	Proceedings on Discharge	B. 218
	"	"	"
Copies of Certificates by C. R. in MS.			
Med. Hist. Sheet	Militia Form B. 213	In the case of recruits who are rejected on final approval, the discharge documents will consist of	
Medical Report for Invalid*	B. 227	(a) Proceedings on Discharge	
Statement of Man's Account on Transfer and Last Pay Certificate	D. 877	(b) Attestation	
*Only if discharged "Medically unfit"		(c) Medical History Sheet (in the event of such having been prepared)	

V. B.—In the case of a man discharged by purchase, the date and number of Deposit Receipt and amount of same is to be noted hereon.

List of Discharge Documents.

<p>Reg. Conduct Sheet, Militia form B. 263.</p> <p>Squadron } Battery } Conduct Sheet, " B. 263a. Company }</p> <p>Copies of Convictions, by C. P. in MS.</p> <p>Med. Hist. Sheet, Militia Form B. 313</p> <p>Medical Report for Invalid* " B. 227.</p> <p>Statement of Man's Account on Transfer and Last Pay Cer- tificate, " D. 877.</p> <p>*Only if discharged "Medically unfit."</p>	<p>Attestation Paper, Militia Form B. 235.</p> <p>Proceedings on Discharge " B. 218.</p> <p style="text-align: center;">In the case of recruits who are rejected on final approval, the discharge documents will consist of</p> <p style="padding-left: 40px;">(a) Proceedings on Discharge.</p> <p style="padding-left: 40px;">(b) Attestation.</p> <p style="padding-left: 40px;">(c) Medical History Sheet (in the event of such having been prepared.)</p>
---	---

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.

109

EXAMINATION

BY

STANDING MEDICAL BOARD, BRAMSHOTT.

No. 725755 Rank Plt Name Stewart B.D. 11-12-1916
Local Unit 124th Overseas Unit Age 33

Examination held at Bramshott, Hants.

DISABILITY

Overseas--Local
(scratch one out)

(1) Chronic Bronchitis
(2) Varicose Veins (Left leg)

PRESENT CONDITION

(1) rather severe course over both lungs.
(2) Varicose Veins legs - moderate

Board recommends:

1. Fit for Duty
2. Fit for Duty after.....weeks physical training
3. Fit for Base dutyweeks
4. Fit for Permanent Base Duty Class C III
5. Discharge

Signatures :

Members

.....
 C.E. Cooper, Col. Pres. Major, C.A.M.C.
 H. Brasham, Capt.

Approved.....

Bramshott 11-12 1916

for G.O.C. & A.D.M.S.
Canadian Troops, Bramshott.

NOF 25-1-17
411
C

50384

50384

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Faint, illegible text centered on the page, possibly a title or subject line.

Large section of faint, illegible text occupying the middle and lower middle of the page, likely the main body of the document.

Faint text at the bottom of the page, possibly a footer or signature area.

Name

Stewart

Enl. 14-1-16,

Date of Embarkation for England

24-7-16.

Proceeded to France.

No.

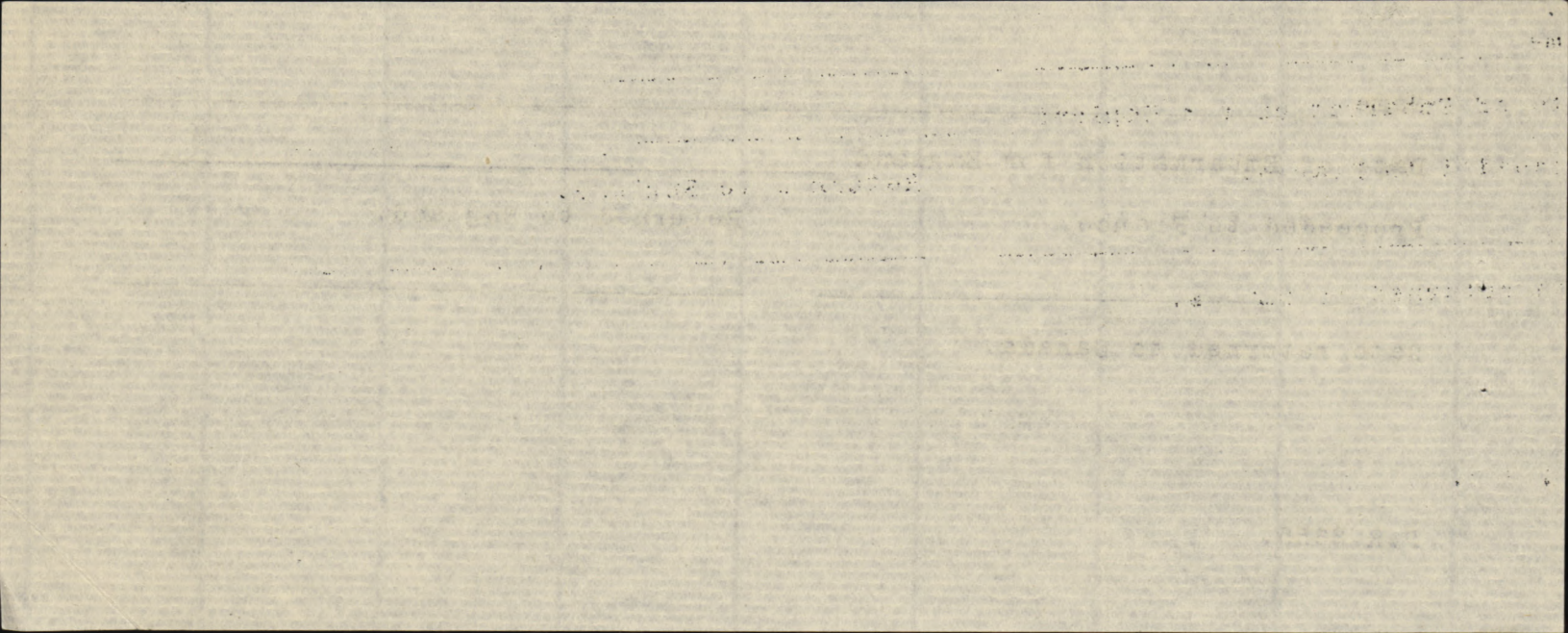
Returned to England.

Date returned to Canada.

23-12-19.

P.R. 2855.

"bhfid"
9-4-25



725155 Pte Stuart C. B. 109th Bn C.E.F.

~~Formerly~~

Will removed by Regt. Paymaster.

H. Williamson CAPT.
Paymaster, 109th Overseas Battalion, C.E.F.

79034

- 20 -

Perforated sheet for Will from Pay Book of Reg.

No. 725155

Name Pte Charles B. Stewart

Unit 109 Battalion C.E.F.

Military Will.

On the 21st 7/1916
in the event of my death I give
the whole of my property and effects
to my wife Mrs. C. B. Stewart
Lindsay Ontario Canada

H. Williamson (cont)
Witness

Signature Charles B. Stewart

Rank and Regt. Pte 725155. 109 Batt

Date Oct 21. 1916.

500 500 500
500 500 500
500 500 500

MEMORANDUM

From

From

To

To

ANSWER

.....19

.....19

Handwritten: [Signature] III + 2/1

Date of Enlistment

15-4-16

MILITIA AND DEFENCE

Date of Assignment

Aug 1/16

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

20	25 1/2		
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RATE OF ASSIGNMENT

15.			
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PARTICULARS OF SEPARATION ALLOWANCE

No. 725155.
 Rank *Pte.* Promoted Reverted Discharge
 Soldier's Name *C. B. Stewart.*
 Battalion *109th Battrn.*
 Beneficiary *Margaret Stewart*
 Relationship *wife*
 Address

PARTICULARS OF ASSIGNMENT

(wife.)

Name *Mrs. Margaret Stewart.*
 Address *57 Cambridge St. South.*
 Change of Address *Lindsay Ont.*
 1
 2
 3
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total
<i>1915</i>				
<i>Dec 31</i>	<i>-</i>	<i>410</i>	<i>255</i>	<i>665</i>
<i>Jan 18</i>	<i>P 72811</i>	<i>30</i>	<i>15</i>	<i>45</i>

REMARKS

AP 290⁰⁰
AT 440⁰⁰
 A/c Closed *3/1/18*
 Ret'd per *Metagama*
 Date *5/1/18* F. X. *18/1/18*
 Clerk *Stevens*
Trans # 3 S/S 18-12-17
Authy M D # 3 - 26-1-18
Harwith 22-2-18

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

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PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No.

Name

Rank

Promoted

Reverted

Discharge

Address

Soldier's Name

Change of Address

Battalion

1

Beneficiary

2

Relationship

3

Address

4

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

M. F. W. 128
 400M-6-17-177239-141
 L. L. 2220-M. & D. 1488.

725155

ORIGINAL

MEDICAL HISTORY SHEET.

MILITIA & DEFENCE
528 29 1918
CANADA

Surname Stewart

Christian Name Charles Benjamin

Examined { on 14th day of January 1916
at Lindsay
Birthplace { City or Town Toronto
County Ontario

Approved by
J. McCulloch Capt.
Medical Officer
Rank M.O.

Apparent age 32
Trade or occupation Waiter
Height 5 Feet 6 1/2 Inches.
Weight 133 Lbs.
Chest measurement { Minimum 33 inches.
Maximum expansion 36 inches.

Date	Ft or Unit	EXAMINED FOR RE-ENGAGEMENT,

Physical development good
Small-Pox Marks none
Vaccination Marks { Arm. Right none Left Shull
Number Shull

Date	Result	VACCINATIONS
<u>26/1/16</u>	<u>good</u>	<u>J. McCulloch</u> M.O.

When Vaccinated last January 26th 1916
(a) Marks indicating congenital peculiarities or previous disease none

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>15/4/16</u>	<u>good</u>	<u>J. McCulloch</u> M.O.
<u>25/4/16</u>	<u>good</u>	<u>J. McCulloch</u> M.O.
<u>2/5/16</u>	<u>good</u>	<u>J. McCulloch</u> M.O.

(b) Slight defects but not sufficient to cause rejection
light varicose veins on left leg

Enlisted on 14th day of January 1916 at Lindsay

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>109th Batt.</u>	<u>725155</u>		<u>14.1.16</u>
Transferred to	<u>C.E.F.</u> <u>124 Bn., C.E.F.</u> <u>C.C.A.C. - 1.9.16</u> <u>G.D.B. - 1.9.17</u>			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>Bramshott</u>	<u>28/8/16</u> <u>28 AUG 1916</u>	<u>no disability</u>	<u>fit 4 weeks Phy Training</u> <u>29m</u> <u>W. Stewart Maj</u>
<u>Approved Bramshott</u>	<u>11-12-16</u>	<u>"</u>	<u>PRESIDENT,</u> <u>MEDICAL BOARD, BRAMSHOTT</u>
<u>Major,</u>	<u>D.A.D.M.S. for A.D.M.S.</u>	<u>W. Stewart Maj</u>	<u>P. Wm Robb Esq.</u>

11 DEC 1916
APPROVED Kingston 5-2-18 Varicose veins Ciii
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.
P. C. FOLIO
M. F. B. 313.
150M.-8-15.
H. Q. 1772-39-439.

Surname

Stuart

Christian Name Charles Benjamin

STATION.	Date of Arrival at the Station.	DATES OF						DISEASE.	Number of days in Hospital.	Remarks on nature of the disease : how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
		Admission into Hospital.			Discharge from Hospital.						
		Day	Month	Year	Day	Month	Year				

A. L. B. P. O. A. M. E. D. I. C. A. L. S. E. C. Y. M. 1897

FORM TO BE USED FOR WARRANT OFFICERS, N.C.O.'S AND MEN

MEDICAL HISTORY OF AN INVALID

STATION Fort Henry DATE Feb. 4. 1918.1. (a) Unit No. 3 S.S. Coy. (b) Regimental No. 725155 (c) Rank Pte.(d) Surname STEWART (e) Christian name Charles.2. Age last birthday 34 Date of birth May 13th. 18833. Enlisted at Toronto. on Jan. 11th. 1916.

4. Personal description :-

(a) Height 5' 7in. (b) Weight 145 (c) Complexion Fresh(d) Colour of hair Brown (e) Colour of eyes Blue. (f) Identification marksScar inside left thigh.

5. Address after discharge (for the use of the Board of Pension Commissioners)

Lindsay P.O., Ontario.6. Former trade or occupation Bar-Tender.

7. (a) Service

Years

Days

PERIODS

109th. Batt.
124th. Batt.
C.A.M.C.
No. 3 S.S. Coy.Jan. 1916.
Dec. 1916.
Nov. 1917.
Jan. 1918.Dec. 1916.
Nov. 1917.
Jan. 1918.
to date.(b) Has he been overseas? England. 18 months.

8. Present disease or disability (use authorized nomenclature if possible)

Varicose veins of both legs.(a) Date of origin Previous enlistment (b) Place of origin Toronto, Ont.(c) Cause* Occupation-standing on feet all the time.

*(Here include original disease or injury)

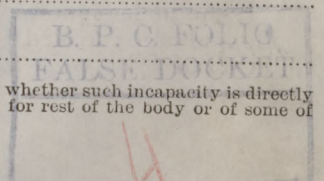
If further space is needed for this or other answer, use page 4

9. Present condition. (Important, to be a full description of the present disabling condition or conditions).

Subjective:- Complains of sharp pains in both legs but more marked in the right, if he stands for a short time in one position. Says that this leg tires easily if he has to walk even short distances. Says that he notices feet swollen in the morning. Says that pain is relieved by elevating his legs on a pillow at night. Says that only left leg was affected at time of enlistment.

Objective:- Large Varicose veins of both legs. Man pale and somewhat anaemic. Heart and lungs normal.

[After describing all abnormalities, anatomical and functional, contributing to present incapacity (see section 11) state whether such incapacity is directly due to (a) weakness, (b) loss (complete or partial) of an organ or member or of its functions, or (c) to the necessity for rest of the body or of some of its parts.]



10. History :

Here give a description of wounds, scars, deformities, and signs and symptoms of abnormal conditions present and not included in answer 8. This section cannot be completed without stripping the soldier and subjecting him to a thorough physical examination.

11. What is the extent (state in percentages) of the disability in earning a livelihood in the untrained labour market? If there is more than one disabling condition, estimate the disability, due to each, and that due to all combined.

12. Did the disability arise on or off duty?

13. Was a Court of Inquiry held?

14. If the disabling condition had its origin before enlistment, has it been aggravated on service?

If the answer is in the affirmative, state in percentages, to what extent the soldier is incapacitated by that aggravation.

15. Was the disability caused or aggravated by negligence, by vice or by misconduct, or by unreasonable refusal to accept treatment?

(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.)

16. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one?

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

18. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit?

19. Can the former trade or occupation be resumed?

20. Recommendations.

Medical Officer by whom the case is brought forward.

STATEMENT OF THE SOLDIER.

(Sections 8, 9 and 10 are to be read to the soldier.)

I, the undersigned.....have heard the description of my disability read, and am satisfied (or not satisfied) with it. (If dissatisfied, statement should follow.) I complain in addition of

Signature of soldier examined.

(Medical Officers will please read this Form carefully before using it. See instructions, page 4.)

FORM TO BE USED FOR WARRANT OFFICERS, N.C.O'S AND MEN
MEDICAL HISTORY OF AN INVALID

STATION Fort Henry DATE Feb. 6. 1918.

1. (a) Unit No. 3 S.S. Coy. (b) Regimental No. 1042884. (c) Rank Spr.
 (d) Surname Godfrey (e) Christian name Joseph G.H.L.

2. Age last birthday 35 Date of birth Jan. 3rd. 1883.

3. Enlisted at Renfrew, Ont. on January, 1917.

4. Personal description:—

(a) Height 5' 7³/₄ ins. (b) Weight 180 lbs. (c) Complexion Rudgy.
(stripped)

(d) Colour of hair Dark (e) Colour of eyes Blue. (f) Identification marks

Warty mole waist line right side of back, brown spot left hip.

5. Address after discharge (for the use of the Board of Pension Commissioners)

Box 229, Renfrew, Ontario.

6. Former trade or occupation ~~Baggage-master~~ Baggage-master.

7. (a) Service	Years	Days
	PERIODS	
	From	To
<u>257th. Battalion.</u>	<u>Jan. 1917.</u>	<u>Jan. 1918</u>
<u>No. 3 S.S. Coy.</u>	<u>Jan. 1918.</u>	<u>to date.</u>

(b) Has he been overseas? France 7 months.

8. Present disease or disability (use authorized nomenclature if possible) Myalgia.

(a) Date of origin June 19/17 (b) Place of origin Flanders.

(c) Cause* Says he strained left groin and exposure.
*(Here include original disease or injury)

If further space is needed for this or other answer, use page 4

9. Present condition. (Important, to be a full description of the present disabling condition or conditions).

Subjective:— Complains of dull pains in legs and forearms present all the time. Says they are worse in damp weather. Says he strained left groin in Flanders.

Objective:— Man walks with a slightly stiff gait. There is no swelling of joints or grating. Heart normal. No apparent trouble left groin.

[After describing all abnormalities, anatomical and functional, contributing to present incapacity (see section 11) state whether such incapacity is directly due to (a) weakness, (b) loss (complete or partial) of an organ or member or of its functions, or (c) to the necessity for rest of the body or of some of its parts.]

10. History :

Here give a description of wounds, scars, deformities, and signs and symptoms of abnormal conditions present and not included in answer 8. This section cannot be completed without stripping the soldier and subjecting him to a thorough physical examination.

Scar on inside of left thigh.

11. What is the extent (state in percentages) of the disability in earning a livelihood in the untrained labour market? If there is more than one disabling condition, estimate the disability, due to each, and that due to all combined.

10%

12. Did the disability arise on or off duty? No.

13. Was a Court of Inquiry held? No.

14. If the disabling condition had its origin before enlistment, has it been aggravated on service? Yes.

If the answer is in the affirmative, state in percentages, to what extent the soldier is incapacitated by that aggravation.

5%

15. Was the disability caused or aggravated by negligence, by vice or by misconduct, or by unreasonable refusal to accept treatment? No.

(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.)

16. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? Permanent.

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

Hospital treatment in England.

18. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit?

No.

19. Can the former trade or occupation be resumed? Yes.

20. Recommendations

Fit for Category C.III

W. J. Stuyk

Medical Officer by whom the case is brought forward.

STATEMENT OF THE SOLDIER.

(Sections 8, 9 and 10 are to be read to the soldier.)

I, the undersigned, have heard the description of my disability read, and am satisfied (or not satisfied) with it. (If dissatisfied, statement should follow.) I complain in addition of

+ *Charles Stewart*

Signature of soldier examined.

OPINION OF THE MEDICAL BOARD

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

Yes.

22. Is the soldier 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). **Yes.**
- (d) Temporarily unfit, (" D) (Yes or No). **No.**
- (e) Unfit for service in Categories A, B and C, (" E) (Yes or No). **Yes.**

23. It is certified that the soldier

- (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).

24. It is recommended ~~that the soldier be discharged.~~ (When not for discharge add special recommendation).

Fit for Category C.III.

W. W. Jones Capt. President
W. J. Graham Capt. } Members.
A. Macdonald Capt. }

STATION. **Fort Henry.**

DATE. **Feb. 5th. 1918.**

APPROVED BY

DATE. **FEB. 7. 1918**

APPROVED BY

DATE.

Captain A. M. G.
 Assistant Director of Medical Services.
 For A. D. M. S. M. District No. 36
FALSE DOCKET
 Director-General of Medical Services.

Lined area for text entry, consisting of multiple horizontal dotted lines.

- 1. (a) Un
- (d) Sur
- 2. Age las
- 3. Enlisted
- 4. Persona
- (a) Hei
- (d) Col
- Warty
- 5. Address
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- 7. (a) Serv
- (b) Ha
- 8. Present
- (a) Dat
- (c) Cau
- 9. Present

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

INSTRUCTIONS

- 1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" will be carefully followed.
- 2. The Medical Officer in charge of the case is responsible for the proper completion of pages 1 and 2 of this Form. The President of the Board of Medical Officers is responsible for the proper completion of the space, of page 3, reserved for recording the Proceedings of a Board of Medical Officers.
- 3. In answering the questions, Medical Officers will carefully obtain and record the soldier'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 soldier concerned, from witnesses, or from documents.
- 4. Special care is required in answering question 14. Please read the questions carefully. All questions must be answered.
- 5. The nomenclature of diseases to be followed is that 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 and Sons.

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M. F. B. 227
75M.-12-17.
1772-39-117.