

**109th OVERSEAS BATTALION, C. E. F.
ATTESTATION PAPER.**

No. *124234*

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

TRIPLICATE

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

- | | |
|---|----------------------------------|
| 1. What is your surname?..... | <i>Vaugesen</i> |
| 1a. What are your Christian names?..... | <i>Nelson
Locklin</i> |
| 1b. What is your present address?..... | <i>Locklin Haliburton County</i> |
| 2. In what Town, Township or Parish, and in what Country were you born?..... | <i>Locklin Haliburton County</i> |
| 3. What is the name of your next-of-kin?..... | <i>Albert Vaugesen</i> |
| 4. What is the address of your next-of-kin?..... | <i>Locklin</i> |
| 4a. What is the relationship of your next-of-kin?..... | <i>Father</i> |
| 5. What is the date of your birth?..... | <i>Nov 2nd 1884</i> |
| 6. What is your Trade or Calling?..... | <i>Fanner</i> |
| 7. Are you married?..... | <i>No</i> |
| 8. Are you willing to be vaccinated or re-vaccinated and inoculated?..... | <i>Yes</i> |
| 9. Do you now belong to the Active Militia?..... | <i>No</i> |
| 10. Have you ever served in any Military Force?..
If so, state particulars of former Service. | <i>No</i> |
| 11. Do you understand the nature and terms of your engagement?..... | <i>Yes</i> |
| 12. Are you willing to be attested to serve in the }
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? } | <i>Yes</i> |

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *Nelson Vaugesen*, 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..... **APR - 1 1916** 191 . *Nelson Vaugesen* (Signature of Recruit)
Gas Leeky Leek (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Nelson Vaugesen*, 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..... **APR - 1 1916** 191 . *Nelson Vaugesen* (Signature of Recruit)
Gas Leeky Leek (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 *Haliburton*, this *13th* day of *April* 191 *6*
G. M. Gotta (Signature of Justice)

Description of Nelson Vaugesen on Enlistment

Apparent Age.....27 years 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. 11 1/2 ins.

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

Complexion.....Dark

Eyes.....Grey

Hair.....Dark Brown

Contracted left little finger

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

CERTIFICATE OF MEDICAL EXAMINATION.

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

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

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

Date.....APR - 1 1916..... 191

Place.....Haliburton.....

J. McCusker
**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.

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

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

Date.....APR - 1 1916..... 191

DISCHARGE DOCUMENTS

- Proceedings of Court of Inquiry or on men reported Missing on Active Service.....
- Attestation Papers..... 1
- Declaration of change of name.....
- Authority for special enlistments.....
- Documents of re-enlisted men.....
- Regimental Conduct Sheet.....
- Compulsory Stoppages.....
- Casualty Forms..... 2
- Proceedings on discharge..... 2
- Corps History Sheet.....
- Date and No. of Deposit Receipt for Purchase Money and Amount.....
- 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..... 1
- Inventory of Kit.....
- Last Pay Certificate..... 1

97B, 22-2
 Pd Card 6045-1
 1 Pd Card.

Name, **VAN-GESSEN** ^E ~~SON~~ *M.* Nelson
 Regt. No. **724234** Rank... *Pvt*
 Corps... *109th Inf.*
M *Med Unfit*

- Index Card.....
- Casualty Card... /
- Non-Effective Card.....
- Part II Order Card.....
- Change of Address Card.....
- Honour & Award Card.....

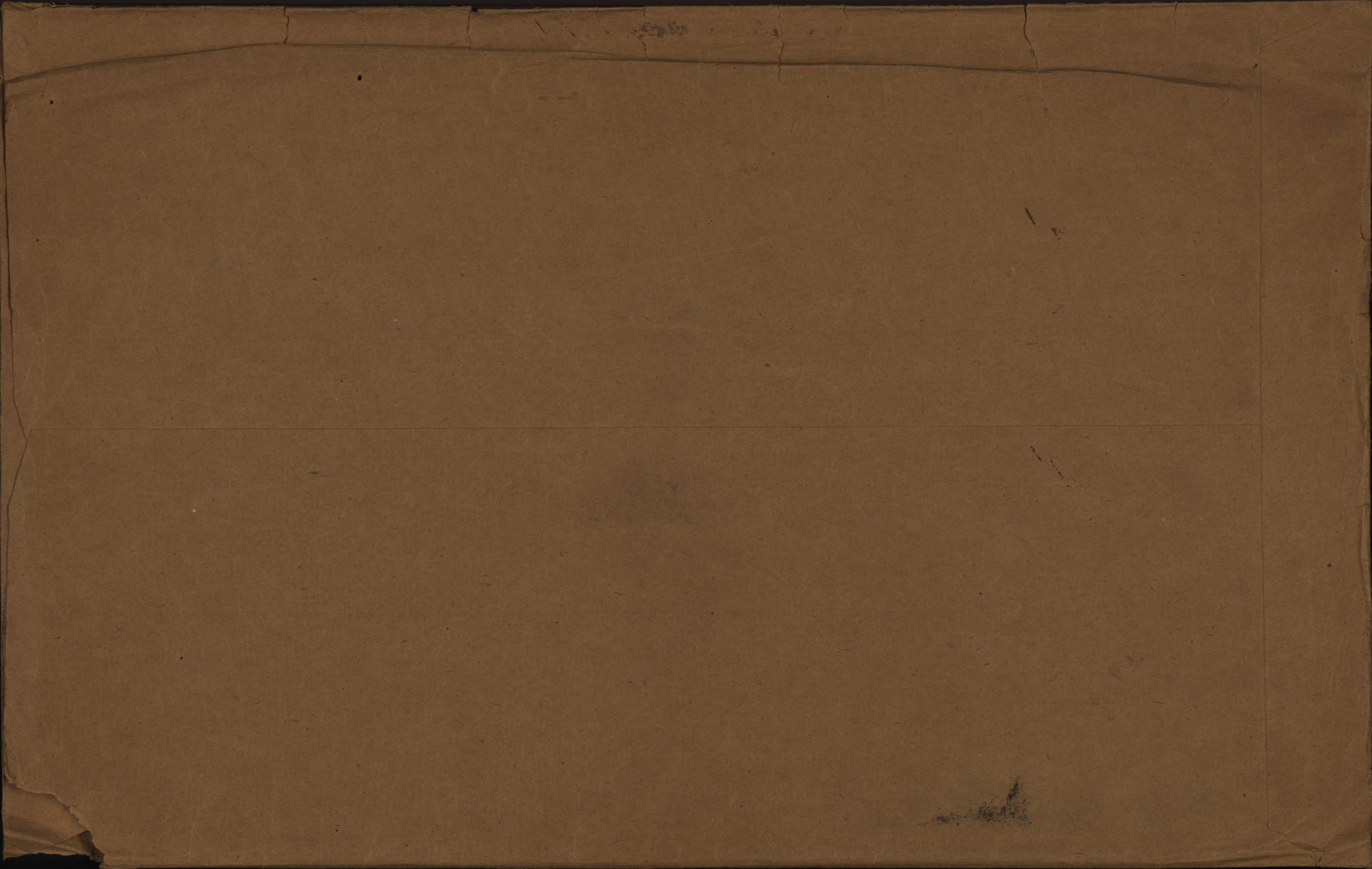
(2319)



R. O. No.....

H. Q. No.....

39-21
 17-21
 9-21



A-2.B.

Number 724234. Rank Pte.

Surname VANGENSEN

Christian Name Nelson

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

Date of Service 31-7-16.

Remarks _____

Latest Address Picton - Ont.

Roll No. A Page 2080

DESP. FEB 17 1925

REGN. NO. 10690

No. 724234. RANK *Otc.*

NAME *Vangesen, N.*

T. O. S. *1-4-16.*

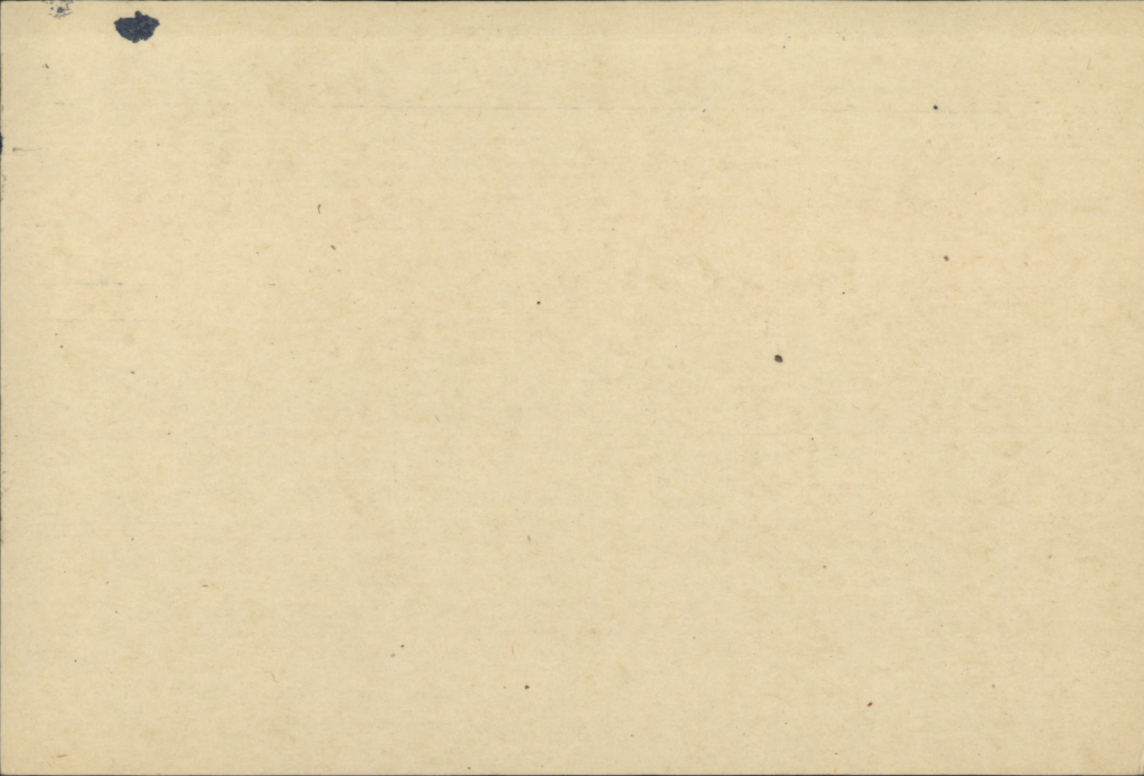
UNIT

109th Battalion.

(S. O. 127 of 17-4-16)

M. D. *3.*

			PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
PAID FROM	PAID TO	SIG. OR REC'T	PARTICULARS	AUTHORITY
<i>1916.</i> <i>April 1.</i>	<i>1916.</i> <i>April 30.</i>	<i>✓</i> <i>✓</i> <i>✓</i> <i>✓</i>		
UNIT SAILED JUL 23 1916				



SURNAME.

Vangesen

649-V 1600

CARD NO. ✓

CHRISTIAN NAMES

Nelson

FOLL.

REGL. No.

724234

RANK

Pte

UNIT

109th

Bn.

FORMER CORPS

Nil.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Vangesen Albert

RELATIONSHIP TO SOLDIER

Father

ADDRESS

Lochlin Co. Haliburton
Ont.

COUNTRY OF BIRTH

Canada Lochlin Ont.

DATE

Nov 2nd 1884

PLACE OF ATTESTATION

Haliburton, Ont.

DATE

April 13th 1916

Sailed from Halifax per S.S. Olympic

L. L. 94504. M. & D. 6512.

23/7/16. 488
36

M. F. W. 22. 250M. - 2-16. H. Q. 1772-39-339.

R/C. 7/12/17. - 3

MARRIED

SINGLE

WIDOWER

TRADE OR CALLING

Farmer

RELIGION

Yes
Methodist

DESCRIPTION.

APPARENT AGE

37

YEARS

MONTHS

HEIGHT

5

FEET

11 1/2

INCHES

CHEST MEASUREMENT

34

INCHES

EXPANSION

9

INCHES

COMPLEXION

Dark

EYES

Grey

HAIR

Dark Brown

DISTINGUISHING MARKS

Contracted left little
finger

MEDICAL EXAMINATION.

PLACE

Haliburton Ont

DATE

April 1st 1916

Present Address Locklin, Co Haliburton, Ont

Reg. No. 724234 Name Van Gesten M.
Rank Pvt Corps 29th Bn Age 36 Service -
Ledger No. _____ Serial No. _____

HOSPITALS

DATE

DIAGNOSIS

Jensen Mill Kingston

9-1-18

Defec Vision

Dis

12-1-18

HCSPITALS

DATE

DIAGNOSIS

M. F. W. 2553.
75M.—9-19.
1772-39-1332.

COPY.

Report

Jan. 30/18.

Pte. N. Vangesen,
724234,

EARS

Ears are normal in appearance.
Hearing normal.

EYES.

Jan. 29/18.

Refraction.
Hypermetropia.
Slight right; high left.

O.D. $\frac{20}{20}$ with 75 D.

O.S. $\frac{3}{200}$ to $\frac{18}{200}$ with 41 D.

Prescr. for glasses attached

Sgd. J. C. Connell,
Lt. Col. AMC.

THE UNIVERSITY OF CHICAGO

MAY 19 1954

THE UNIVERSITY OF CHICAGO

To be made out in duplicate.

DUPLICATE P.C. 51-21-23-53

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... Det. 109th O/S. Bn. C.E.F.

(2) Regimental Number... 724234

(3) Full Name of Soldier... Nelson Vangesen

(4) Place of Birth... Lockland Ont.

(5) Are you married, or not?... Single

(6) If married, state,
(a) Full name of your wife.....

(b) Present Postal Address.....

(7) Are you a widower?.....

(8) Have you any children?.....

If so, give number of boys and girls.....

Also their names and ages.....

(9) Is your Father alive? Yes

If so, state name and address Albert Vangesen, Rockland Ont.

(10) Is your Mother alive? Yes

If so, state name and address Henetta Vangesen, Rockland Ont.

(11) If your Mother is a widow No

Are you her sole support, or not? Yes (Father too old to work)

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

(13) If you have no wife, father, mother or children, state the name and relationship with full postal address of your next of kin, to whom you would desire any communication to be sent concerning you.

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

(15) Are you insured? No

If so, in what Company? _____

Have you made arrangements for payment of your Insurance premium? _____

If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.

Date JUL 19 1916

J. J. Cairns
Officer Commanding Major
109th Overseas Battalion, C. E. F.

J.M. Rank Name **VANGESSEN, Nelson.** Reg'l No. **724234**
 Unit **109th Bn.** If in perm. Corps, }
 What Unit? } Married or Single **Single.**
 Place and Date of Enlistment **Haliburton, 1st April 1916.** Place of Birth **Lochlin, Haliburton Co**
 Name and Address, Next-of-Kin **Albert Vangesen**
P.O., Lochlin, Haliburton Co, Canada. Relationship **Father.**



Assigned Pay Monthly \$

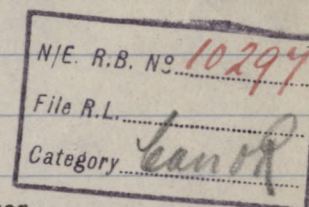
Payable to

Relationship

Separation Allowance \$

Payable to

Relationship



Discharge, Date and Place

Reason

Character

H. W. & V., Ltd.—7165-16.

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS. Taken from Official Documents.
Date.	From whom received.				
Arrived in England per H. M. T. 2810 31-7-16					
8.12.16	Ob 109 th Bn.	S.O.B. to 124 th Bn.	Whitley	8.12.16	P. I. D. 343
9.12.16	Ob 124 th Bn.	S.O.B. to 109 th Bn.	"	"	" 265.
19-12-16	"	S.O.B. to C.B.A.C. att'd to 124 th Bn.	"	5-12-16	" 276
18-1-17	"	ceases to be att'd. att'd to 105 th Bn.	"	18-1-17	" 18
21-1-17	105 th Bn.	att'd to 105 th Bn from 124 th Bn.	Whitley	18-1-17	P. I. D. 21.
3-2-17	"	ceases to be att'd to 105 th Bn. is att'd to 104 th Bn.	"	27-1-17	" 32
3. 2. 17	104 th Bn.	att'd from 105 th Bn.	"	27.1.17	" 32
12.2.17	G.D. Bn.	att'd to G.D. Bn for B.W.C. etc.	B. Short	11.2.17	" " 37
24.2.17	104 th Bn.	ceases att'd 104 th Bn & att'd G.D. Bn.	Whitley	11.2.17	" 30

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.				
27.1.17	124 Bn.	Pt 20343 amended to read Cess all 109 th Bn & att. 124 Bn.	Witley.	8.12.16	Pt 205
20.2.17	66 Ab.	Cess att 109 & d/comm. 104 th Bn.	Hastings	18.1.17	- 87
6.5.17.	do	beass to be attch 104 Bn and shown on bon Gas Duty Bn.	Hastings	11.2.17	Pt 193
13.5.17	C.G.A.C.	S.O.S. on transfer to 1st. Cent. Ant. Regiment & remain on com. G.D. Bn. B'shott.	Hastings	10.3.17	Pt. II D. O. 180 ^{1st BORD} (Pt. II 069-17) ⁵ ^{1st BORD} + 105-22 ¹⁷
8-6-17	4 A Bn.	beass to be att 4 A Bn. & on com. to Mychett 14. Camp.	B'shott	8-6-17	Pt. II 0137 + 105-22 ¹⁷
23-10-17	BORD	beass on com. Mychett 14. Camp.	W. Sandg	22-10-17	→ 228
28-11-17	"	On com. to 1st BND	"	28-11-17	→ 246
15-12-17	"	beass on com. 16ND & S.O.S. to Canada from 179.	"	7-12-17	→ 281
	Dis Depot	Class Dalis	on D. 3 Kingslon	19/12/17	7 R 418. Lindsay, Ont.

E. J. J.
POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

35926/717.

18458-N-1.

Name **Vangeson, Nelson**
Surname

Christian Name

Regimental Number **724232**

Rank **Pte.**

Address (in full) **Locklin, Ont.**

Unit **109th Bn.**

Original Unit

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

Date of Discharge **28-2-18.**

P. D. P. Filing Number **5-74-3.**

Rates:—Regimental pay \$ **1.00** per diem: Field Allowance \$ **.10** per diem. Separation Allowance \$ _____ 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		
100 10	1460	28-2-18	33 00	1432	28-3-18	33 00	1426	29-4-18	34 10		100 10

Remarks:

M. F. W. 127.
50M-617.
1972 39-1140.

724294 Nelson Vangelson
 Rockliff P.O.
 18458 71, Haliburton
 Ont,

Dec'n No	35926/717	S. G. File No	18458 71
Award	122 days at \$ 70 per day \$		280.
S. A.	months at \$ per mo. \$		\$ 7.00 100
	Less P. D. P. Credited		\$
			\$
	Less further debt balance		\$ 179.90
	Not to be paid as below		

15.7.19
 12/19

DEPENDENT			
No	Ch No	Amount	
235 14504549	140.00		
697 0498799	39.90		

GEN'L AUDITOR
 Posting once cu by
 [Signature]
 Date 8-7-19

W 129
 17 10
 19

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

To Whom *Mrs. Albert Vaugesen,*
 Address *Lochlin, Ont.*

By Whom Assigned *Vaugesen, Nelson*
 Regtl. No. *724234*
 Rank *Pte.*
 Corps *109th. Battrn. Coy*

Rate *\$15.⁰⁰*

AUG 1 1916

PAYMENTS

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



10/10/10

10/10/10

10/10/10

10/10/10

10/10/10

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

M. F. W. 12a.
 50m.-416.
 1772-39-819.

Sheet No. 2.
 L. L. Job 310.-Req. 6574.

Mrs. Albert Vaugesen
PAYMENTS.

Name of Soldier Vaugesen, Nelson
724234 Pte. Secy 109th Batta.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.		Y15198	15	
Sept.		M18809	15	
Oct.		M23647	15	
Nov.		E78638	15	
Dec.		R33738	15	
Jan.	1917	X40897	15	
Feb.		Q47016	15	
March		W54197	15	
April		M3455	15	15
May		W12311	15	
June		V18999	15	
July		K26017	15	
Aug.		Z34882	15	
Sept.		N39805	15	
Oct.		L45800	15	
Nov.		X51680	15	
Dec.		L63540	15	
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

\$15⁰⁰

AUG 1 1916

9/10/16

15

Pa

C

A/c closed 31-1-18

M.C.

257
 239
 218

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

PAYMENTS.

Name of Soldier _____

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

Casualty Form—Active Service.

Regiment or Corps 109 Overseas Battalion C 8 FRegimental No. 724234 Rank Private Name Clangston Nelson

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

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

Extended _____ Re-engaged _____ Qualification (b) _____

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
NOV 29 1917	TAKEN ON STRENGTH C.D.D, BUXTON Pt. 11 ORDER No. 283		Commanding		<i>H. W. L.</i> Lieut.-Col. Canadian Discharge Depôt.
DEC 7 1917	EMBARKED FOR CANADA FROM LIVERPOOL		Commanding		<i>H. W. L.</i> Lieut.-Col. Canadian Discharge Depôt.

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

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				

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

M. F. W. 54.

FORM. 10-15.
H.Q. 1772-30-920.

Casualty Form—Active Service.

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

Regimental No. 24234 Rank Private Name Dangesen Gelson

Enlisted (a) 1-4-16 Terms of Service (a) O. E. F. Service reckons from (a) 1-4-16

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) Farmer

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				
			Halifax	24.7.16.	
			Liverpool	31.7.16.	
8-12-16	O.C. 109 Bn.	Transferred to 124th Bn.	Whitley	8-12-16	D.O. Pt. II # ³ 443 <u>Auttsell</u> Capt. ADJUTANT 109th Overseas Battalion, C. E. F.
19-12-16	124 Bn.	Transferred to C.C.A.C.	Witley	5-12-16	Part II Order 276 <u>W. J. Stone</u> MAJOR ADJUTANT, 124th Bn.
18-1-17	124th Bn.	Attached to 105th Bn.	Witley Camp	18-1-17	Part II Order 18 <u>W. J. Stone</u> Capt. Adj. 124th Bn. C. E. F.

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

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				

104th Bn. Transferred to Labour withy Camp
 Bn. Bramshot. B.D.O II

17. 2. 17

Reattached Garr. D. Bn. Bramshot. 11. 2. 17. P.I.I. D.O
 Captain O/K

G. E. M. M. M. M. M.

ADJUTANT 104th "OVERSEAS" BATTN. C.E.F.

Ceases to be attached to 4 Drz
 on team to 1st CORD D 8.6.17. D.O. 137.

C.C.A.C. SUB-OFFICE, BRAMSHOT

W. S. Parker - Lieut. Captain
 for Asst. Adj. The Garrison Duty Battalion, Canadians
 (Bramshot, Ont.)

17-5-17 1st CORD. T.O.S. 1st C.O.R.D. G.I.D. Bn. West Sandling 10-3-17 Pt. II D.O. No. 69

22-6-17 - do - Attached to Mychett Camp - do - 27-3-17 Pt II D.O. No. 105

23-10-17 - do - Ceases to be att to Mychett Camp - do - 22-10-17 Pt II D.O. No. 228

28-11-17 - do - att to 1st CORD Bramshot - do - 28-11-17 - do - 284

W. S. Parker Lieut. & Asst. Adj. for O. C. 1st C. O. R. D.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at Bramshott. 5-12-1916.

No. 724234 Rank. Pt Name. Van Zeeu, R.

Local Unit. 109th Overseas Unit. Age. 34

Examination held at. Witley

DISABILITY. Overseas—Local. (scratch one out)

(1) Wound of left hand, (2) Slightly deep.

PRESENT CONDITION.

Plastering accident 8 years ago caused contracture of little finger. Right clavicle deformity - 15 yrs ago fracture. Deafness

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. Class C(III)
5. Discharge

Signatures:—

C. S. Cooper, Col. President. H. Marshall, Capt. Members

APPROVED

Dated at Bramshott. 5-12-1916.

For A.D.M.S. 1900

PROCEEDINGS OF A MEDICAL BOARD

Dated at Perambur 1918

No. Rank Name

Local Unit Overseas Unit Age

Examination held at

DISABILITY
Overseas—Local
(attach 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 1918

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. <i>724234.</i>	
Rank <i>Pte.</i>	
Name <i>Van Gerven. M.</i> <small>NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.</small>	
Corps (Squadron, Battery or Company) <i>109th Batt.</i>	
Date of Discharge <i>12-2-18</i>	
Place of Discharge <i>Hampton Ont</i>	
1. DESCRIPTION AT THE TIME OF DISCHARGE.	
Age <i>36</i> years <i>—</i> months.	Descriptive Marks <i>Deformed small finger left hand.</i>
Height <i>5</i> feet <i>—</i> inches.	
Complexion <i>Dark.</i>	
Eyes <i>Blue.</i>	
Hair <i>Brown.</i>	
Trade <i>Farmel.</i>	
Intended place of residence <i>Pickton Ont.</i> <small>(To be given as fully as practicable.)</small>	
2. The above-named man is discharged in consequence of <i>Being medically unfit for further service</i>	
<small>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.</small>	
<small>To be in the handwriting of the Commanding Officer, who will initials if make identical entries on the character certificate and initial them.</small>	3. Conduct and character while in the service have been, according to the records, etc. <i>good - good -</i>
	<small>N.B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldier and the Officer Commanding his Squadron, Battery or Company:</small>
4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)	

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

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

6. Medals and Decorations.....

Three horizontal dashed lines for listing medals and decorations.

To be copied by the Commanding Officer on to the parchment Discharge Certificate.

7. His account is correctly balanced, and signed by the Officer Commanding his Company. (Squadron or Battery), and I have impartially enquired into all matters brought before me in accordance with Regulations.

(Place) Kingston

[Signature] CAPT. & ADJT.

(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) Kingston, Ont. 11 years (Signature of Soldier.)

(Date) Feb 4/18 H. Giffen (Signature of Witness.)

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

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

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

..... (Signature of Soldier.)

10. Statement of Service.

Service toward Engagement to.....(the date to which the Record of Service is completed) 1 years 330 days.

Total 1 years 330 days.

11. Confirmation of Discharge.

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

(Place) Kingston

(Signature) [Signature] CAPT. & ADJT.
6th Ont. M. I. C. Co.

(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.)

Received. \$15 dollar. Jan 31st/18.

W. V. Vayen

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> <hr/> <p style="text-align: center;">In the case of recruits who are rejected on final approval, the discharge documents will consist of</p> <p>(a) Proceedings on Discharge.</p> <p>(b) Attestation.</p> <p>(c) Medical History Sheet (in the event of such having been prepared.)</p>
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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.

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

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

STATION Kingston, DATE Jan. 30/18

1. (a) Unit 51st Labor Battrn. (b) Regimental No. 724234 (c) Rank Pte.

(d) Surname Van Geseu (e) Christian name Nelson

2. Age last birthday 36 Date of birth

3. Enlisted at Haliburton on Mar. 1/1916

4. Personal description :-

(a) Height 6'1 1/2" (b) Weight 155 (c) Complexion fair

(stripped)

(d) Colour of hair medium (e) Colour of eyes brown (f) Identification marks

Deformity of brown right clavicle. Varicocoele (left).

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

Lochlin, Ont.

6. Former trade or occupation farmer

7. (a) Service

Years

Days

PERIODS

From

To

109th Battrn.

Mar. 1/1916

Nov. 1916

124th Battrn.

Nov. 1/1916

Feb. 1917

51st Battrn.

Feb. 1917

date

(b) Has he been Overseas? yes - did not get to France. (1- Contraction of little finger left hand.

8. Present disease or disability (use authorized nomenclature if possible). 2. Defective eyesight.

(a) Date of origin 1 & 2. 7 years ago. (b) Place of origin 1 & 2. Canada.

(c) Cause* 1 & 2. blasting accident.

*(Here include original disease or injury)

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

Man was in an accident while blasting 7 years ago & says his sight in left eye, & hearing in left ear have never been right since. Says also that his little finger on left hand was severely injured. (Specialist says hearing is normal). (1) Man complains of inability to straighten out his little finger on left hand. Examination shows considerable loss of muscle tissue on the ulnar side of left hand. The resultant contraction of the scar has pulled the little finger away from the ring finger & has flexed the little finger at a right angle at the 1st phalangeal joint. (T.T.O./1)

[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.]

M. F. B. 227.

150M.-6-17.
1772-39-117.

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

This man was severely injured in a blasting accident 7 years ago.

Says his hand was partly blown off & his hearing & eyesight in both eye and ear has never been good since. Complains of heart trouble but there are no objective symptoms. He has a moderate degree of flat foot which has never given any trouble, and which existed before enlistment.

11. To what extent, state in percentages, is capacity to earn a livelihood in the untrained labour market reduced? If there is more than one disabling condition, estimate the incapacity due to each, and that due to all combined.

(1) 10% not due to service. (2) 25% not due to service.

12. Did the disability arise on or off duty? 1 & 2. before enlistment

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 No No aggravation.

(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? 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? 1 & 2. Permanent.

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

No hospital treatment in England.

Queen's Military Hospital Jan. 9/18

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 That this man be discharged from the service.

H. Anger Capt
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 H. Vangosen, 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

H. Vangosen
Signature of soldier examined.

Flexion and extension at metacarpal phalangeal joint normal -
 no movement at 2nd phalangeal joint. Other fingers and the thumb
 are normal. (No-movement-at-2nd-phalangeal-joint--e) Grip about

90% normal in hand. Movements at wrist are normal. Sensation is
 diminished on the tip of the little finger X-ray report shows:-
 Several pieces of foreign body probably stone between 4th & 5th
 metacarpal bones. There is a dislocation of the proximal & second
 phalanges of the little finger. Surgical Consultant advises amputation
 which man refuses.

(2) Man complains of poor vision in the left eye. Says he can just
 recognize people he knows in good light with it.

Specialist reports under date Jan. 29/18 "Refraction. Hypermetropia.
 Slight right; high left.

O.D. = $\frac{20}{20}$ with +.75 D. O.S. = $\frac{3}{200}$ to 18 with +4 D
 Glasses have been provided.

Man complains of a "poor heart" but there are no objective symptoms
 to bear this out. Also says he is slightly deaf. Under date Jan. 30/18

Specialist reports "Ears are normal in appearance. Hearing normal."

Pulse 76. B.P.S. 120 - D. 72. Heart and lungs normal.

Urine:- S.G. 1028-R. acid-no alb.-no sugar.

TO BE COMPLETED WHEN TREATMENT IS REFUSED

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

Witness..... Signed N. Vangesen
 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. If a complete answer to any question requires more space than that reserved for it, the answer may be continued on the blank space on this page.
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.

D.
724234.

99-V.

MEDICAL HISTORY SHEET. ORIGINAL

Surname: Vaugesen Christian Name: Nelson

Examined	on <u>1</u> day of <u>April</u> 191 <u>6</u> .	Approved by	<u>J McCulloch</u>	
	at <u>Haliburton</u>	Rank M.O.	
Birthplace	City or Town <u>Lochlin</u>	Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT.
	County <u>Ontario</u>			
Apparent age	<u>37 years</u>			M.O.
Trade or occupation	<u>Farmer</u>			M.O.
Height	<u>5</u> Feet <u>11 1/2</u> Inches.			M.O.
Weight	<u>147</u> Lbs.			M.O.
Chest measurement	Minimum <u>34</u> inches.			M.O.
	Maximum expansion <u>37</u> inches.			M.O.
Physical development	<u>Good</u>			M.O.
Small-Pox Marks	<u>None</u>			M.O.
Vaccination Marks	Arm Right <u>One</u> Left <u>One</u>	Date	Result	VACCINATIONS.
	Number <u>Two</u>			
When Vaccinated last	<u>June 26 1916</u>	<u>26/6/16</u>	<u>Good</u>	<u>J McCulloch</u> M.O.
(a) Marks indicating congenital peculiarities or previous disease				M.O.
	<u>Varicocle</u>			M.O.
(b) Slight defects but not sufficient to cause rejection		Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
	<u>Slight Flat Feet</u>	<u>26/4/16</u>	<u>Good</u>	<u>J McCulloch</u> M.O.
		<u>3/5/16</u>	"	<u>J McCulloch</u> M.O.
		<u>10/5/16</u>	"	<u>J McCulloch</u> M.O.

Enlisted on 1 day of April 1916 at Haliburton

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>109th Bn. C.E.F.</u>	<u>724234</u>		<u>1.4.16</u>
Transferred to	<u>124th Bn. C.E.F.</u>	<u>18.1.17</u>		
	<u>105th Bn. C.E.F.</u>	<u>18.1.17</u>		

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>Bramshott Camp, Hants.</u>	<u>5-12-16</u>	<u>(Deformity Left Hand Class (iii)) Chloroform hypodermic</u>	<u>PRESIDENT,</u>
APPROVED		<u>D. A. D. M. S. for A. D. M. S., Canadian Troops, Bramshott Camp</u>	MEDICAL BOARD, BRAMSHOTT.
		<u>Category altered from C to B. (Under new system of Categorization) R.O. 2799.</u>	<u>P. H. H.</u>
			<u>O.C.</u>
			<u>C.D.D. Buxton</u>

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

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.	724234
Rank	Private
Name	Alan Gerson M
<small>NOTE—The name must agree strictly with that on enlistment (unless changed subsequently by authority.)</small>	
Corps (Squadron, Battery or Company)	109th Battalion
Date of Discharge	28-2-18
Place of Discharge	Kingston Ont

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age..... 36 years..... months.
 Height..... 5 feet..... inches.
 Complexion *Dark*
 Eyes *Blue*
 Hair *Brown*
 Trade *Farmer*
 Intended place of residence *Victor*
Ont
(To be given as fully as practicable.)

Descriptive Marks

Deformed small finger left hand.

2. The above-named man is discharged in consequence of *Being medically unfit for further service*

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 soldier and the Officer Commanding his Squadron, Battery or Company:

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

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

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

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

6. Medals and Decorations.....

Four horizontal lines for listing medals and decorations.

To be copied by the Commanding Officer on to the parchment Discharge Certificate.

7. His account is correctly balanced, and signed by the Officer Commanding his Company. (Squadron or Battery), and I have impartially enquired into all matters brought before me in accordance with Regulations.

(Place) Kenington

J. B. Bidsall Major
O. C. "C" Unit, M. H. C. C.

(Date) 28-2-18

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) Widson x Danvers (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 on his own request.

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

..... (Signature of Soldier.)

10. Statement of Service.

Service toward Engagement to..... (the date to which the Record of Service is completed) 1 years 33 days.

Total 1 years 33 days.

11. Confirmation of Discharge.

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

(Place) Kenington

(Signature) J. B. Bidsall Major
O. C. "C" Unit, M. H. C. C.

(Date) 28-2-18

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.)

+ No 424234,
Nelson Vangeren

List of Discharge Documents.

Reg. Conduct Sheet, Militia form B. 263. Squadron } Battery } Conduct Sheet, " B. 263a. Company }	Attestation Paper, Militia Form B. 235. Proceedings on Discharge " B. 218.
Copies of Convictions, by C. P. in MS. Med. Hist. Sheet, Militia Form B. 313 Medical Report for Invalid* " B. 227. Statement of Man's Account on Transfer and Last Pay Cer- tificate, " D. 877. *Only if discharged "Medically unfit."	<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="margin-left: 40px;">(a) Proceedings on Discharge.</p> <p style="margin-left: 40px;">(b) Attestation.</p> <p style="margin-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.

(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 Kingston DATE Jan. 30/18.

1. (a) Unit 51st Labor B'n. (b) Regimental No. 724234 (c) Rank Pte.
 (d) Surname Van Gesen (e) Christian name Nelson

2. Age last birthday 36 Date of birth _____

3. Enlisted at Haliburton on Mar. 1st, 1916.

4. Personal description:—
 (a) Height 6' 1/2" (b) Weight 155 (c) Complexion Fair.
 (d) Colour of hair medium brown (e) Colour of eyes brown (f) Identification marks _____
 (stripped)

Deformity of right clavicle. Varicocle (left).

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

Lochlin, Ont.

6. Former trade or occupation farmer.

7. (a) Service	PERIODS	
	Years	Days
<u>109th B'n,</u>	<u>Mar. 1st, 1916.</u>	<u>Nov. 1916.</u>
<u>124th B'n,</u>	<u>Nov. 1/1916.</u>	<u>Feb. 1917</u>
<u>51st B'n</u>	<u>Feb. 1917.</u>	<u>date.</u>

(b) Has he been Overseas? Yes. did not get to France (1-Contraction of little finger left hand.

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

(a) Date of origin 1 & 2. 7 years, ago. (b) Place of origin 1 & 2. Canada.

(c) Cause* 1 & 2 blasting accident.

* (Here include original disease or injury)

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

Man was in an accident while blasting 7 years ago & says his sight in left eye & hearing in left ear have never been right since. Says also that his little finger on left hand was severely injured (specialist says hearing is normal) 1. Man complains of inability to straighten out his little finger on left hand. Examination shows considerable loss of muscle tissue on the ulnar side of left hand. The resultant contraction of the scar has pulled the little finger away from the ring finger & has flexed the little finger at a right angle at the 1st phalangeal joint. Flexion and extension at metacarpal phalangeal joint normal- no movement at 2nd phalangeal joint. Other fingers and the thumb are normal. Grip about 90% normal in hand. Movements at wrist are normal. Sensation is diminished on the tip of the little finger X-ray report shows;— several pieces of foreign body probably stone between 4th & 5th metcarpeal bones. There is a dislocation of the proximal & second phalanges of the little finger. Surgical consultant advises amputation which man refuses.

[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

This man was severely injured in a blasting accident 7 years ago. Says his hand was partly blown off and his hearing & eyesight in both eyes and ears has never been good since. Complains of hearing trouble but there are no objective symptoms. He has a moderate degree of flat foot which has never given any trouble. and which existed before enlistment.

11. To what extent, state in percentages, is capacity to earn a livelihood in the untrained labour market reduced? If there is more than one disabling condition, estimate the incapacity due to each, and that due to all combined.

1. 10% not due to service. 2. 25% not due to service.

12. Did the disability arise on or off duty? 1 & 2 before enlistment

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..... No..... No aggravation.

(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? 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? 1 & 2. Permanent.

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

No hospital treatment in England.

Queen's Military Hospital, Jan. 9/18.

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 That this man be discharged from the service.

Sgd. H.S. Angrove, Capt. AMC. 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.....N. Vangesen.....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

Sgd. N. Vangesen.

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.

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

22. Is the soldier fit for

- (a) General service, (Category A) (Yes or No).
- (b) Service abroad, not general service, (" B) (Yes or No).
- (c) Home service, (Canada only), (" C) (Yes or No).
- (d) Temporarily unfit, (" D) (Yes or 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.~~
- (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).

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

TO BE COMPLETED WHEN TREATMENT IS REFUSED

.....
.....

Sgd. Wm. Gibson, Capt. AMC. *President.*

Sgd. F.X.O'Connor, Capt. AMC.

Sgd. L.N.Armstrong, Capt. AMC.

Members.

STATION Kingston,

DATE Feb. 6th, 1918.

APPROVED BY

Sgd. V. H. Craig, Capt. AMC.

DATE Feb. 16, 1918.

For. Assistant Director of Medical Services.

APPROVED BY

DATE

Director-General of Medical Services.

Man complains of poor vision in the left eye. Says he can just recognize people he knows in good light with it. Specialist reports under date of Jan. 29/18 "Refraction" Hypermetropia Slight right- high left.

O.D. 20 with 75 D. O.S. - 3 to 18 with 4 D.
20 200 200

Glasses have been provided.

Man complains of a poor heart but there is no objective symptoms to bear this out. Also says he is slightly deaf. Under date Jan. 30/18. Specialists report "Ears are normal in appearance. Hearing normal" Pulse 76. B.P.S. 120. D. 72. Heart and lungs normal.

Urine S.C. 1028 R. acid no alb. no sugar.

MILITARY HOSPITALS COMM'N
HEAD OFFICE OTTAWA
RECEIVED

MAR 2 2 20 PM '18

REFERRED TO
REFERRED TO
NOTED
AHS'D

TO BE COMPLETED WHEN TREATMENT IS REFUSED

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

Witness..... Signed..... N. Vangesen.
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. If a complete answer to any question requires more space than that reserved for it, the answer may be continued on the blank space on this page.
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.

P. 697-25M.
3989-31-10-17.

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS.

Date of Payment.	No. of Acq. Roll	A M O U N T				Place of Payment.	Name of Paymaster.	Remarks.	
		Francs	£	S.	¢				
31-5-17	158		2	0	9	74	Bramahall	G. W. Baynes	
7-6-17	250		3	10	17	03	"	J. R. Biggs Capt.	
18-8-17	311		2	0	9	73	"	J. R. Biggs	
31-1-17	383		2	0	9	74	"	J. R. Biggs	
16-7-17	467		2	0	9	43	"	J. R. Biggs	
21-7-17	511		1	10	7	30	"	J. R. Biggs	
10-9-17	572		1	10	7	30	"	J. R. Biggs	(2677)
28-9-17	635		2	0	9	74	"	J. R. Biggs	
12-10-17	686		2	0	9	72	"	J. R. Biggs	
24-10-17	367		1	10	7	30	W Sandling	G. W. Baynes	
15-11-17	416		1	0	4	87	"	W. H. Rolfe	
23-11-17	435		1	0	4	87	"	G. W. Baynes Lt.	

107.08

Jan. 30/18.

Report
Pte. N. Vangesen
724234

EARS.

Ears are normal in appearance.
Hearing normal.

EYES.

Jan. 29/18

Refraction.
Hypermetropia.
Slight right: high left.

O.D. = $\frac{20}{20}$ with +. 75 D.

O.S. = $\frac{3}{200}$ to $\frac{18}{200}$ with + 41 D

Prescr. for glasses attached.

Signed - J. C. Connell,
Lt. Col. A. M. C.

1870-1871

1870-1871
L. A. Johnson
1870-1871

1870-1871

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L. A. Johnson
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1870-1871

CANADIAN CONTINGENT EXPEDITIONARY FORCE

TRIPLICATE

LAST PAY CERTIFICATE

CASUALTIES, C. E. F.

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

Regimental No. 724234 Rank Pte. Name Van Geseu, N.

Corps. 109th Battalion who was* Discharged

On February 12th 1918, to Category "E"

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from December 1st 1917 to February 28th 1918 the inclusive date of transfer or discharge.

Dr.	\$	c.	Cr.	\$	c.
Bal. Dr. from prev. month.....	15	00	Bal. Cr. from prev. month.....		
Advances } No. <u>Amended L.P.C.</u>	15	00	Reg't Pay..... <u>90</u> days at \$..... <u>1</u> c.....	90	00
Other } <u>Charges</u> No. <u>A.P. recovered</u>	15	00	Field Allow. <u>90</u> days at \$..... c. <u>10</u>	9	00
Assigned Pay and Sep'n Allee. No. <u>8417</u>	15	00	Separation Allowances* (Monthly)		
Other charges			Other Allowances* <u>Clothing</u>	13	00
Payment on <u>transfer</u> or discharge No. <u>8418</u>	75	20	Other Credits* <u>D.O. 51 Subs</u>	23	20
Balance Cr. (to be paid by the new unit).....			Bal. Dr. (to be deducted by new unit).....		
Total.....	135	20	Total.....	135	20

* Give particulars.

A monthly stoppage of \$ 15.00 (†) has (‡) been paid on account of Assigned
 { Pay for the month of February 1918 } (to) Assignee Mrs. Albert Van Geseu,
 { and Sep'n Allee. for month of 191... }
 (Address) Locklin, Ont.

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

On Transfer of an Officer

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

REMARKS:—

- State (1) date of enlistment
- (2) if married and if a Separation Allowance Card has been submitted..... No
- (3) cause of discharge..... authority 3UD 88-V-37
- (4) authority for transfer

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

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

Date..... February 22nd, 1918

Place..... Kingston, Ont.

W. Peter & Capt.
 Paymaster, "C" Unit M. E. C. C.
 Paymaster.

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

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

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

cheque #8418 attached



UNION OF THE CONTINENTAL ARMY FORCE

GENERAL ORDER

ORDER OF THE GENERAL CONFERENCE OF THE UNION OF THE CONTINENTAL ARMY FORCE

RESOLUTION

RESOLUTION

RESOLUTION

RESOLUTION

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RESOLUTION

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

Aug 1-16

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

<i>15</i>			
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PARTICULARS OF SEPARATION ALLOWANCE

No. *724234*
 Rank *Pte* Promoted Reverted Discharge
 Soldier's Name *Nelson Vaggesen*
 Battalion *109. Battrn D Coy.*
 Beneficiary
 Relationship
 Address

PARTICULARS OF ASSIGNMENT

Name *Mrs. Albert Vaggesen*
 Address *Lochlin Ont.*
 Change of Address
 1
 2
 3
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
<i>Dec 31</i>	<i>—</i>		<i>255</i>	<i>255</i>	
<i>Jan 15</i>	<i>R 70272</i>		<i>15</i>	<i>15</i>	
<i>Feb 1</i>	<i>L 72889</i>		<i>10</i>	<i>10</i>	<i>H 92889 Cancelled g.f.</i>
					<i>Act closed 31-1-18</i>
					<i>Retra A.S. Justicia Aug 4-2-18</i>
					<i>M.D. 3/ 19-12-17</i>

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
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M. F. W. 128.
400M. 6-17-1772-39-1141
L. L. 22220-M. & D. 7993.

CASE HISTORY SHEET.

No. 724234 Rank Pte. Name N. Vangesen Age 36
 Unit 51st Labor Bn. Completed years of service Where and how long March 1/16- Present-Canada & England.
 Date of admission Jan. 8/18. Date of discharge.....
 Diagnosis defective eyesight & injury to left hand. Place of origin Canada.

CONDITION ON ADMISSION AND PROGRESS OF CASE. Man was admitted to this Hospital on Jan. 8/18., suffering from defective eyesight and loss of use of little finger on left hand, due to accident sustained 7 years ago. Man complains of pain around heart, but nothing abnormal is to be noted, except a slight degree of tachycardia. Sent to Specialist for report on eyes, Jan. 12. Man's condition remains about the same. Jan. 20th, Specialist advises glasses which have been provided, and are satisfactory. Jan. 27 - Man recommended for 227.

FAMILY HISTORY. No history of tuberculosis, or mental, or nervous disease in family.
 (Tuberculosis, mental or nervous diseases.)

TREATMENT. Man has been provided with glasses which are quite satisfactory. There is nothing that can be done with the finger condition.
 (Especially any specific or special form.)

CONDITION ON DISCHARGE. Man is quite able to carry on his farm work, as before enlistment. Would say his condition has not been altered by service.
 (and disposal made of case.)

Date Feb. 4/18. H.S. Angrove, Capt. A.M.C.
 Medical Officer i/c case.

Discharged Feb 28/18

CASE HISTORY SHEET

724234 Pte. Vangesen N. 109th Batta CEF

Will detached by Regt Paymaster.

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

79318

No 724234
Name Nelson Vangesen
Rank & Regt. Pte. 109th Bn

Military Will.

I will all my
personal effects to my
mother

Mrs. A. E. Vangesen
Locklin. Post. Office
Ontario.
Canada.

J. J. Williamson writes
Signature N. Vangesen
Rank & Regt. Pte. 109th Bn.

Date Nov 20/16

JAMES P. HENNING
1014 1/2 1st St. N. W.
Washington, D. C.

1014 1/2 1st St. N. W.
Washington, D. C.

1014 1/2 1st St. N. W.
Washington, D. C.