C.E.F. REGIMENTAL DOCUMENTS

NAME BAKER DAVID Wm. REGT. No. 458283 UNIT 60 BN H. Q. FILE No. 2427

CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
ATTESTATION PAPER (M.F.W. 23, 133 or 51)					DEATH
CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					CATEGORY
TRAINING HISTORY SHEET (M.F.W. 113)					
FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
REGT. CONDUCT SHEET (M.B.W. 263 or A.F.B. 120)					
COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
DENTAL HISTORY SHEET (M.F.B. 465)					CATEGORY
MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					MED UNFIT
MEDICAL EXAMINATION (M.F.W. 129)					
TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
LAST PAY CERTIFICATE (M.F.W. 44)					
PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
PARTICULARS OF CHARACTER (A.F.W. 3226)					
COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
CARDS					
PAY-SHEETS					

M.F.W. 2589
20M-4-46 (9113)
H.Q. 1772-39-1377

D. Reo. ORIGINAL

ATTESTATION PAPER.

No. A 58283

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name? — David Wm Baker
2. In what Town, Township or Parish, and in what Country were you born? — Kent Eng.
3. What is the name of your next-of-kin? — Fred Baker. brother
4. What is the address of your next-of-kin? — 386 Delorimier Ave. Montreal
5. What is the date of your birth? — Jan 6 - 1875 -
6. What is your Trade or Calling? — Labourer.
7. Are you married? — no.
8. Are you willing to be vaccinated or re-vaccinated? — yes.
9. Do you now belong to the Active Militia? — no.
10. Have you ever served in any Military Force? If so, state particulars of former Service. — 9 years Queen Own West Kent served in U. A & on Regt Indian frontier.
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.

D W Baker (Signature of Man).

D Reinson (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

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

D W Baker (Signature of Recruit)

Date July 27 1915. D Reinson (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, David Wm Baker, 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.

D W Baker (Signature of Recruit)

Date July 27 1915. D Reinson (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 Montreal this 27 day of July 1915.

A Monaghan J.P. (Signature of Justice)

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

A Monaghan J.P. (Approving Officer)

M. F. W. 23.
200 M.—5-15.
H. Q. 1772-39-841.

Description of D. W. Baker on Enlistment.

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

Height 5 ft. 5½ ins.

Chest measurement: Girth when fully expanded 37 ins.
Range of expansion 2 ins.
weight 129½

Complexion Fair

Eyes Blue

Hair Grey

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

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

Vacc left arm
Tattoo left forearm anchor, ship, crossed flags, ballet girl, crossed flags
Tattoo left wrist bracelet
Tattoo Right forearm crossed flags, sailor head: anchor, cross
Tattoo left wrist bracelet
Tattoo Right forearm girl,
Tattoo breast full rigged ship, flag anchor, English shield.

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 27th July 1915.

Place Montreal

J. A. Jaine
Lieut A. M. C.
Medical Officer.

*Insert here "fit" or "unfit."

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

CERTIFICATE OF OFFICER COMMANDING UNIT.

David Wm Baker 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.

M Ruscoyne (Signature of Officer)

Date July 27 1915.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 458283 (Rank) Private

Name (in full) BAKER, David William enlisted in

the 60th. Battalion, C.E.F.

CANADIAN EXPEDITIONARY FORCE at Montreal, Que. on the 27th.

day of July 19 15.

HE served in FRANCE

and is now discharged from the service by reason of K.R. & O.377 (10) C.M.1917

DD4 19-B-312. Category "C1". Medically Unfit for General Service R.O. 1080. Para.8.

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

Age 44 years 11 months

Height 5 feet 6 inches

Complexion Fair

Eyes Gray

Hair Gray

Marks or Scars Tattoo Marks on Arm and Chest.

D W Baker
Signature of Soldier

R W Lee
Issuing Officer Lieutenant
Officer i/c Discharge Section, District Depot No. 4
Rank

Date of Discharge December 16th., 1918

Appointment

Signed at Montreal, Que this 16th day of December 19 18

in Military District No. 4.

File Reference No. DD 4. 19-B-312.

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

M. F. W. 39a
200m.—2-18.
H.Q. 1772-39-882

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

No. 458283 (Rank) Private Name BAKER David William,

Unit 60th. Battalion, C.E.F.

Address on Discharge 386 Delorimier Ave. Montreal, Que.

Character and Conduct Very Good

Former Occupation Farm Laborer

Special Qualifications of Value in Civil Life Farm Laborer

Medals and Decorations

Remarks "EUROPEAN WAR" Service In France 21-2-16 to 15-11-16 and 19-6-17 to 27-2-18

Signed at Montreal, Que. this 16th. day of December 1918

Name of Officer

Lieutenant,
Officer Ic Discharge Section, District Depot No. 4

Rank

Appointment

DISEASE.

Chronic Gastritis

Notes of Case.

Name Baker D.W. Lapper

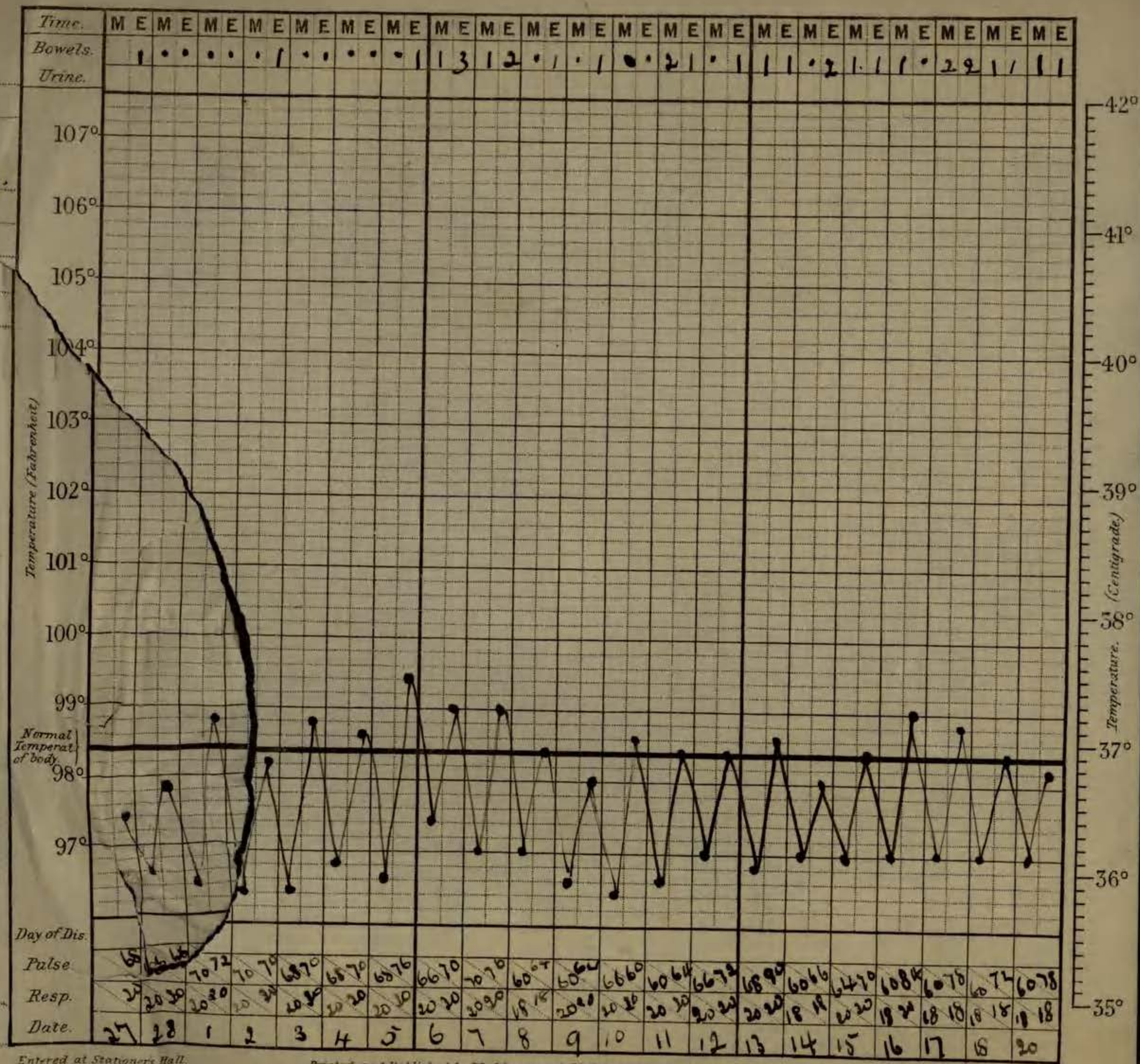
Age 44

Diet

Case Book No.

Date admission. 27. 18.

Result



Entered at Stationers Hall.

Printed and Published by Wodderspoon & Co. 6, Gate Street, Kingsway, W.C.

Gould's Clinical Chart.

458283

Army Form W. 3212. (In books of 100.)

Regtl. No., Rank and Name Baker Pte Corps 10th C.R.T.

Disease Hospital No XI Can Gen Hosp

To Officer i/c Laboratory. Ward Moore Bks

Please carry out an examination of the accompanying specimen of Blood

with special regard to Wassermann

Date April 25/18

O. i/c Ward.

LABORATORY REPORT.

(44)

NEGATIVE

No. 1 CANADIAN GENERAL LABORATORY
27 APR 1918
FOLKESTONE

E. Filar Capt Can M C

O.C. /N. MILITARY C.A.M.C.
No. 1 Canadian General Laboratory
FOLKESTONE

Date of Examination 27/4/18

O. i/c Laboratory.

W 12965—6740 200,000 11/15 H W V (M 875) Forms/W. 3212/1
1439—480 200,000 5/16

458283. Pte. David W. Baker. 60th Battn.

— 20 —

Perforated sheet for Will from Pay Book of Reg.

No. 458283

Name David William Baker

Unit 60th Battalion C E F

Military Will.

In the event of my death I leave all my property and effects to my Brother Frederick Baker 386 Delaromier Avenue Montreal Canada

Signature David William Baker

Rank and Regt. Private 60 Bn

Date 12/2/16

08944

458283.

8944

BAKER. PTE D.W.

13. 11. 1918.

Requisition Urine (1)

Date 13. 11. 18

Reg. No. 458283

Name Baker D.W. (Pte)

Unit 10th C.R.G.S.

Ward 11

Diagnosis ~~Urine~~ Gastralgia

Exam Req. Complete

Report

Colour Water

S.G. 1010

Reaction alk.

Sugar neg

Albumen neg

Microscopic ~~Urates~~ Phosphate

Mitchell

..... Capt. C.A.M.C., O. i/c Laboratory.

Phlebitis
Capt CAMC.

CASE HISTORY SHEET.

D.M.C.H. Hospital. Montreal, Que. Station.

No. 458283 Rank Pte. W. Name BAKER Age 44

Unit D.D.4. Completed years of service Where and how long } C.5/12. E12/12. F.1 7/12.

Date of admission Nov. 1/18 Date of discharge ~~Nov. 30/18~~ NOV 1 4 1918

Diagnosis Gastritis Place of origin France, Oct 1916.

CONDITION ON ADMISSION AND PROGRESS OF CASE

Complains of biliousness after meals, occasionally, especially at night about 3 hours after meals. By "Biliousness" he means that he has a burning sensation in the stomach with belching of gas, followed by relief. Food ferments and he has a bad taste in his mouth. Does not vomit, but feels nauseated. He is constipated and has to take medicine to open the bowels. Stools ~~however~~ have never been tarry and he never noticed any blood. Pain does not radiate but he states he feels sore in the right. Pain relieved by eating. Has not lost any weight. Other systems normal.

Exam. stools for occult blood: negative.

Test Meal: 100 c.c. obtained semi fluid and brownish strongly acid reaction, total acidity 80; Free Hcl present; no lactic acid; no occult blood, some undigested starch; no cells. Remarks hyperacidity.

Urinalysis: turbid, acid, no albumen, no sugar, sediment of amorphous urates.

Previous to enlistment was quite well. As an old soldier in India had enteric fever and inflammation of the liver. Enlisted July 27/15. To England Nov. 1915, to France Feb. 1916. In Oct. 1916 began to have pain in stomach some hours after food with gas. To hospital for 3 mos. Marked C I for duty in England. In June 1917 volunteered with Railway troops for service in France. Carried on till Feb. 1918 when he began to be troubled with gastric symptoms. Was admitted to Hosp. and was eventually invalided to Canada Oct. 1/18.

Lavage.

Transfer to St. Anne's for further treatment.

(Sgd) W. Templeman.

FAMILY HISTORY

(Tuberculosis, mental or nervous diseases.)

TREATMENT Nov 1st/18 Pts. 4 ounces at 8 ounces a Beef

(Especially any specific or special form.) No additions to bowel path

Rec. Discharge Cat C. W. J. McLaughlin Capt. Comdg

MS

CONDITION ON DISCHARGE,

(and disposal made of case.)

Date.

Medical Officer i/c case.

M. F. B. 313a.
200M.—5-18.
1772-39-439.

Form R. & O. 6045
1238-130M-2/11.16.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at Hastings, Sussex 12 1916.

No. 43 82 53 Rank Pte Name BAKER D. W.

Local Unit ..... Overseas Unit 60 Bn Age 42

Examination held at Hastings

DISABILITY.
Overseas—Local.
(scratch one out)

Gastritis

PRESENT CONDITION.

Has vomited in France. Returned Nov 2/16
Has had stomach trouble on 1902.
Has attacks of vomiting & diarrhoea when
he eats anything rotten. Has been in hospital
for this trouble three times since February
this week.

BOARD RECOMMENDS:— C1

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:—

Members { [illegible] ..... President.
[illegible] .....
.....

APPROVED

Hastings, Sussex
[illegible] 1917

Dated at .....1916. D. J. McIntyre
Captain,
For A.D.M.S. C.A.M.C.
for A.D.M.S., I[illegible] Hastings Area

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

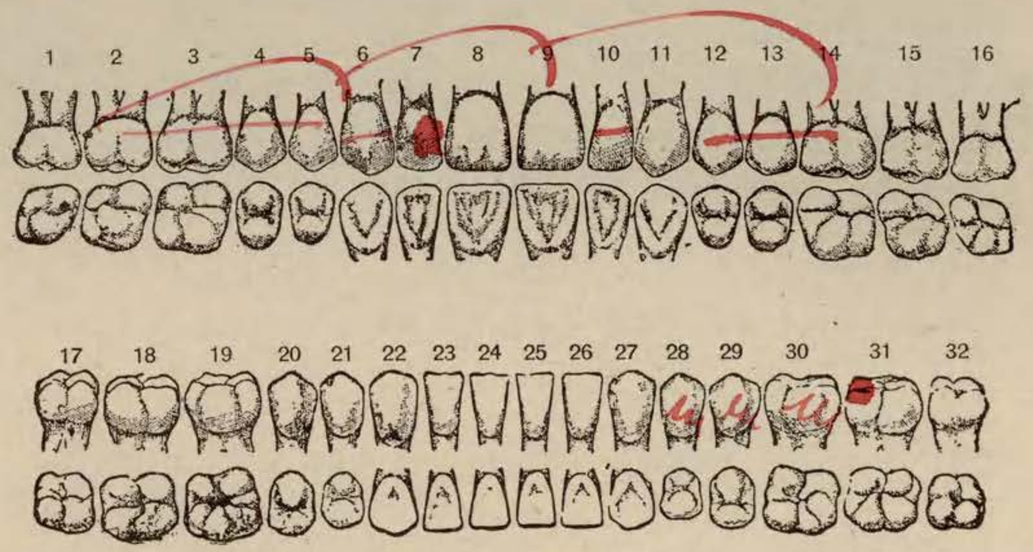
DISTRICT: Military District of Canada

No. 417283

NAME OF SOLDIER: Bogue, J. D.

REGIMENT: 60th Regt

RANK: Pte



INSTRUCTIONS

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

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

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

Good

	Date		Amalgam	Temporary Filling (a) G. P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhœa	Synthetic Porcelain	Extracting	DENTURES U	DENTURES L	DENTURES P	Gold Clasp	Gold Filling	CROWNS Gold	CROWNS Porcelain	Bridge Work	OPERATOR	Military District	REMARKS
Condition on first Examination	1918																						
Good	Nov	2/31													1/w			10			Capt Lemieux		
																							Recommended for discharge Capt Lemieux 2/12/18

M.F.B. 465.
200M.—6-18.
1772-39-950.

CASE HISTORY SHEET

Ste. Annes Military Hospital. Ste. Annes de Bellevue Station.

No. 458283 Rank Private Name Baker, W. Age 44

Unit D.D #-4 Completed years of service (Where and how long) C. 5/12 E, 16/12 F. 19/12

Date of admission Nov. 16th,1918 Date of discharge

Diagnosis Gastritis Place of origin France

CONDITION ON ADMISSION AND PROGRESS OF CASE

Complains of bilious attack after meals, especially at night about three hours after meals. By bilousness he means a burning sensation in the stomach followed by belching of Gas which relieves the pain. Does not vomit but feels nauseated. Bowels constipate and move only when pengatives. No blood was noticed in stool, never tarry. Pain relieved by eating. Other systems normal.
Exam of stools for occult blood, negative,
Test Meal. 100 c c obtained semi-fluid and brownish strongly acid, reaction, total acidity 80. Free Hcl. present. No lactic acid, no occult blood some undigested starch no cells. (This test was done in D.M.C.H. Nov.1s/18.)
Urine - negative.
Previous to enlistment was quite well. As an old soldier in India he had "Enteric Fever and inflammation of liver) Enlisted 7-27-15 went to England Nov. 1915 to France Feb.1916. In Oct. 1916 began to have pain in stomach, some hours after food with gas. To Hospital for three months . Marked C for duty in England. In June 1917 volunteered with Railway troops for France, carried on till Feb.1918 when he began to be troubled with Gastric symptoms, was admitted to Hospital and eventually invalided to Canada, Oct.1/18.
Recommended for discharge Category "C" -227.

(SIGNED) I.M.Rabinowitch, Capt.
C.A.M.C.

FAMILY HISTORY

(Tuberculosis, mental or nervous diseases.)

TREATMENT

(Especially any specific or special form)

CONDITION ON DISCHARGE

(and disposal made of case.)

Date

Medical Officer i/c case.

M. F. B. 313a.
200M.—5-18.
1772-39-139.

~~21695~~
6857

Forms I. 1237 / 10

Army Form I. 1237

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
T 10321	458283	Pte	Baker	D. W.

Year	Unit.	Age.	Service.
	10th C.R.V.	41.	48/12 15/12

Station and Date.

Disease Gastralgia.

Complaint. Duration P.H.

Pains in rt side of epigastrium
Since over last years.
Born in England. Lived in Canada 8 yrs.
Occupation. Laborer.
Enlisted July 1915 Came to Eng Nov 1915
went to France Feb 1916 c 60 Bn. Left Nov 1916.
when was sent to Eng. c Stomach trouble.
Returned to France June 1917. to Railway
Troops. where was. for 8 mos. when was
returned with stomach trouble again
Had malaria fever in India - Hot 5 mos.
In 1898. had Inflammation of liver was
6 weeks in Hosp. Otherwise has always
been healthy.

H. P. I.
France Feb 1916

Since little over this year has been
troubled c pains in right Epigastric region
Pains have no relation to food. Frequently
has pain at night. Pains come on
in attacks and in intervals in fairly free
locality pains are more constant - Thinks
has lost weight lately - Has been troubled
Same with heartburn. Bowels are constipated -
Present Condition. Of stated age. Fairly well nourished. Not anaemic
No glandular enlargement.
Chest well formed. Expansion good.
Heart & Lungs normal.

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

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

Station and Date.	
	Abdomen normal in appearance.
	There is some tenderness on palpation in the ileac region and rt. hypochondrium. Liver and spleen not palpable. No tumor to be felt.
	Nervous system normal. No anaesthesias
Blood Test	Negative
Apr 24 –	Is comparatively free from any pain while resting and on light deep.

Rec. Capt B III
H H Christmas
Capt Cav

BEDFORD COMMAND.

Completed

H.R.H.

EDMONTON MILITARY HOSPITAL.

Full Bath

Blanket Bath

Conveyance to Ward

MEDICAL CASE SHEET.

Ward Hope Religion C of E

Regtl. No.	RANK AND NAME. (Surname first).	Corps.	Squadron, Troop, Company or Battery.	Age.	Service.	Number in Admission and Discharge Book.
458283	Baker D.W. - Pte	60 Btn 3 Div Canadian Infantry.		43.	15 months 9 "	584

Admitted from Bolougne.

Name and Address of nearest known Relative or Friend Sister, Mrs Day.
(This must not be left blank, if not known, state so.)
41 Wordsworth Street, Blackfriars Road.

Date of Admission to Ward Nov 2nd 1916

Disease Chronic Gastritis.

Slight or Serious.	Convalescent Home—	Address while on leave, and name of Doctor attending.	Stretcher.	Regimental Depôt
	Name..... Date..... Return.....			

Date of Discharge or Death Uxbridge 13.12.1916

(1) Diet. Date when Ordered.	Diet.	Date when Discontinued.	(2) Initials of Medical Officer in personal charge.	(3) Extras. Date when Ordered.	Article.	Date when Discontinued.	(4) Initials of Medical Officer in personal charge.
3/11/16.	Milk. Egg.			3/11/16	Soda Water. + Milk freely		[illegible]

If the Patient is wholly dieted on Extras, the word "Nil" is to be inserted in the column for Number of Diet.
The date is to be inserted whenever the Diet is changed, or whenever any Extra is ordered or discontinued.

CASE PAPER—*continued.*

History of the Case:

Condition on Admission:
Chronic fibrosis (subsiding).

Termination of Case

In the event of Death, the date and apparent cause thereof:—

Date _____ 191 . Primary _____ Secondary _____

Date.	Record of subsequent History.	Date.	Record of Treatment.
	Discharged much improved.	3/11/16.	Mist alb (daily)

D Coy

A 58283

B-184

ORIGINAL

MEDICAL HISTORY SHEET.

Surname Baker Christian Name David William

Examined on 27th day of July 1915 at Montreal

Approved by J. A. Jarvie

Rank Lieut A.M.C. M.O

Birthplace City or Town Maidstone County Kent Eng.

Apparent age 40 yrs. 6 mths.

Trade or occupation Labourer

Height 5 Feet 5½ Inches.

Weight 129½ Lbs.

Chest measurement Minimum 35 inches. Maximum expansion 37 inches.

Physical development

Small-Pox Marks

Vaccination Marks Arm Right. Left. 1 Number 1

When Vaccinated last

(a) Marks indicating congenital peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

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

Date	Result	Vaccinations.
1/12/15		H. L. Pavey Major M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
10/6/15	TAB	
30/7/15	OK	H. L. Pavey Maj M.O.
11/8/15	"	H. L. Pavey M.O.
20/8/15	"	H. L. Pavey M.O.
13/1/17	TAB 1cc	N. McLaren

Enlisted on 27 day of July 1915 at Montreal

	Corps	Regt'l Number	Habits.	Date.
Joined on enlistment	60th	458283		
Transferred to..				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
3rd C.C.D. Seaford.	29-6-18.	Category Confirmed B III	Adjudicated Brown by Major Pierce
Hastings	Jan 12/19	Chr Tonsilitis	C. J. Fleming Capt.
No. XI CANADIAN GENERAL HOSPITAL MOORE BARRACKS SHORNCLIFFE. 21 MAY 1918			PRESIDENT, STANDING MEDICAL BOARD.
Montreal	22/10/18	Indigestion.	B III not likely to be raised within six months. Recommended for discharge. Capt. Chas Benton

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

M. F. B. 313.
100M.—5-15.
H. Q. 1772-39-439

DISTRICT DEPOT No. 4, Peel Street Barracks, MONTREAL, QUE.

APPROVED 23 MAY 1918

OCT 22 1918

CATEGORY "E"

CANADA

Surname ..... Christian Name .....

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital. Day*	Month	Year	Dates of Discharge from Hospital. Day	Month	Year	DISEASE.	Number of days in Hospital.	Remarks on nature of the disease: how induced: if mild or severe: if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer
No 3 Dw Rest Stat.		14	7	16	1	10	16	Gastritis		Rejoined Unit	A M 4178
EDMONTON MILITARY HOSPITAL EASTERN COMMAND No. LONDON N.		3	11	16	13	12	16	Gastritis (493) Hyperaemia of the Stomach	40	Much improved. Milk Diet. Condition did not appear to have been chronic. Mind. ill. ill there	
Canadian Convalescent Hospital, Hillingdon House, Uxbridge.		13	12	16	11	1	17.	Gastritis	30	Donne Front 22.10.16. Rest Bantoque 2 days. Then to Edmonton. Age. 42. Suffering from Chronic Gastritis Improved under treatment. Unfit for France. To CCRC. recommended for Base Duty. Applicant's Medical History Sheet posted to here.	Capt Winter Capt R.A.M.C. Officer Commdg Convalescent Hospital, Hillingdon House, Uxbridge.
No. XI CANADIAN GENERAL HOSPITAL MOORE BARRACKS SHORNCLIFFE.		12	4	18	28	5	18	Indigestion	116	Complr. of pain in epigastrium & loss of appetite. Test meal. Mucus +. Blood neg. Free HCl. 37.° Total acy 74°. No occult blood in stool. X-ray. Finding moderate atonic stomach. Has improved and does well on diet. No evidence of malignancy. Rec. Bitt. Massage & Electricity.	Dr Chisholm Major RAMC
Alameda Bell		16	11	18	5	12	18	Gastritis #484 Hyperchlorhydria #600		Discharged at C.C.R.	Invalided to Canada

Dr Chisholm Capt Cmdg

~~CANADIAN CONTINGENT EXPEDITIONARY FORCE~~

LAST PAY CERTIFICATE.

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

Regt. No. 458237 Rank Pte. Name Baker David H.

Corps 60th Bn. who was Discharged

On 16-12-18 191..., to

Insert "discharged" or "transfer"

The following is a statement of the account of the above named from 1-12-18 191..., to 16-12-18 the inclusive date of transfer or discharged.

Dr.		Cr.	
Bal. Dr. prev. month		Bal. Cr. prev. mth	46.75
Advances No.		Regt'l Pay 16 days 1.00	16.00
Cheques No. by		Field Allow. 16 days .10	1.60
Assigned Pay & Sep'n Allce Ottawa	20.00	Sep'n Allce	
Other charges		Other Allces	35.00
Payment on trans. or disc. 12263	121.15	Other Credits Sub. DO 232	8.80
		Bal. Dr. PDP	33.00
Bal. Cr.			
Total	141.15	Total	141.15

Give particulars.

A monthly stoppage of 20.00 has been chgd prior on account of Assigned.

Pay for the month of Dec. 191..

Sep'n Allce for the month 191...

(to) Assignee E. Baker

(Address) 386 Delorimier Ave, Montreal

Assignment paid by Ottawa

REMARKS:-

State (1) date of enlistment 27-5-15

(2) if married and if a Sep'n Allce Card has been submitted. Nil.

(3) cause of discharge R.O. 1050 auth DD/4.19.B.312

(4) auth. for transfer

NOTE.- Separation Allowance and Assigned Pay Card and Index Card (M. 4.71.) are to accompany the original Last Pay Certificate on transfer.

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

Date

CASE HISTORY SHEET.

Camp Hill. Hospital. Halifax N.S. Station.

No. 1051442 Rank P.D. Name Baird J. Age 23

Unit 6 P.D. Completed years of service (Where and how long) 6 6/12 E 1 10/12 F 7 7/12.

Date of admission 10-11-19 Date of discharge 10.12.19

Diagnosis Jaundice Place of origin Halifax

CONDITION ON ADMISSION AND PROGRESS OF CASE

Was adm'd 10/11/19 complaint jaundice. Jaundice noted on conjunctivae. Gave history of full course 606, 2 mths previously, which probably caused condition. Also complained on entry of loss of appetite & headache. Under treat. Mag. sulph. Condition cleared up.

1/12/19 General condition good. Sys. exam. of heart and lungs negative. Jaundice disappeared. Fit for duty.

FAMILY HISTORY

(Tuberculosis, mental or nervous diseases.) Unimportant

TREATMENT

(Especially any specific or special form.)

Mag. sulph. Rest & Tonics

CONDITION ON DISCHARGE

(and disposal made of case.) Boarded out 1/12/19

Date 1/12/19

Medical Officer i/c case.

M. F. B. 313a.
200M.—5-18.
1772-39-439.

C-11

A6219

CASE HISTORY SHEET.

Camp Hill Mil. Hospital. Halifax, N. S. Station.

No. 1051442. Rank Pte Name Baird, J. Age 23.

Unit S. R. D. Completed years of service Where and how long } 6 6/12. E 1 10/12. F 8/12.

Date of admission 1-11-19. Date of discharge Transfer Nov. 10/19

Diagnosis Ulcer duodenum Place of origin Burton Eng.

Colonial Immigration

CONDITION ON ADMISSION AND PROGRESS OF CASE

Left zone on purpose, no adenopathy, no induration of axilla.
Has jaundice, complains of pain in epigastrium after eating.

FAMILY HISTORY

(Tuberculosis, mental or nervous diseases.) Neg.

TREATMENT

(Especially any specific or special form.) Provocative dose of Phenomange
Wassermann 6-11-19 — neg
Rad. Rhan. Relieve for jaundice.

CONDITION ON DISCHARGE,

(and disposal made of case.) Sore healed.
Jaundice about same
Trans. Camp Hill.
Wanted advise another blood test in 2 mos.

Date Nov 10/19. [illegible] Capt
Medical Officer i/c case.

M. F. B. 313a.
200M.—5-18.
1772-39-139.

31
17
14
30
31
30
16
121
14
132

23
30
30
31
23
8

25

12
30
31
31
25
17
9
14

CASE HISTORY SHEET.

St Anne de Bellevue Hospital. St Anne de Bellevue Station.

No. 438283 Rank Pte Name Baker W. Age 44

Unit DD #4 Completed years of service Where and how long } C 5/12 E 16/12 F 19/12

Date of admission Nov 16/18 Date of discharge 5-12-18.

Diagnosis Gastritis Place of origin France.

CONDITION ON ADMISSION AND PROGRESS OF CASE

Complains of bilious attack after meals, especially at night about 3 hours after meals. By biliousness he means a burning sensation in the stomach followed by belching of gas, which relieves the pain. Does not vomit but feels nauseated. Bowels constipated & now only ½ gr. aperients. No blood was noticed in stools, never tarry. Pain relieved by eating. Other systems normal.

Exam of stools for occult blood negative.

Test Meal: 100 cc obtained semi fluid & browned strongly acid reaction, total acidity 80, free HCl present. No Lactic acid, no occult blood, some undigested starch, no cells. (This test was done in Oct 1918)

Urine: negative.

Previous to enlistment was quite well. As an old soldier in India had "Enteric Fever & inflammation of liver". Enlisted 7/7/15. Went to England Nov 1915 to France Feb 1916. In Oct 1916 began to have pain in stomach some hours after food with gas. To hospital for 3 months. Marked C. for duty in England. In June 1917 volunteered with Railway troops for service in France. Came on this Feb 1918 when he began to have troubles with gastric symptoms. Was admitted to hospital & eventually invalided to Canada Oct 1918.

Rec. discharge Cat C 2 2 7.

J. M. Robinson Capt CAMC.

FAMILY HISTORY

(Tuberculosis, Cancer or nervous diseases)

TREATMENT

(Especially any specific or special form)

CONDITION ON DISCHARGE

(and disposal made of case.)

Date

Medical Officer i/c case.

M. F. B. 313a.
200M.—5-18.
1772-39-439.

MILITARY SERVICE ACT, 1917.

MEDICAL HISTORY SHEET.

IMPORTANT.—If the man's name does not appear upon the schedule of men reporting for service, or if he has not made an application for exemption or a report for service, or, although having made one, he does not know the number, he will be instructed that the copy of this medical history sheet (which will be handed to him) must be attached by him to a report for service or claim for exemption which he may make on application to any Postmaster in Canada, or be sent by him after he has noted upon it the number on the receipt he obtained from the Postmaster to a Registrar or Deputy Registrar under the Military Service Act. In any event the duplicate medical history sheet will be sent by the Medical Board to the District Officer Commanding unless instructions have been given by the latter to forward it direct to a Registrar or Deputy Registrar.

1. Surname..... Christian name.....

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

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

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

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the.....day of.....1917, by the undersigned medical board sitting at.....

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

7. Height.....Feet.....Inches. 8. Weight.....Pounds.

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

11. Physical development..... { Good / Fair / Poor } 12. Smallpox marks.....

13. Number of vaccination marks { Right arm..... / Left arm..... } 14. When vaccinated last.....

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

16. Slight defects but not sufficient to cause rejection.....

The man denies having had { Rheumatism / Tuberculosis / Syphilis } We find no evidence of past { Rheumatism / Tuberculosis / Syphilis }

(Strike out disease admitted or suspected.)

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

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

.....*President.*

.....*Member.* .....*Member.*

Date	Result	Vaccinations	Date	Result	Anti-Typhoid Inoculations, Etc.
		M.O.			M.O.
		M.O.			M.O.
		M.O.			M.O.

Joined.....*day of*.....*191*.....*at*.....

	Corps	Reg'tl Number	Habits	Date
Joined on enlistment		458283		
Transferred to.....				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station	Date	Disease	Result

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

Signature of Man.....

M. F. B. 313.
300M.—10-17.
1772-39-439.

Surname ..... Christian Name .....

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital			Dates of Discharge from Hospital.			DISEASE.	Number of days in Hospital.	Remarks on nature of the disease; how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
		Day	Month	Year	Day	Month	Year				
D.M.C.H.		1	11	18	NOV 14 1918			Gastritis. C. Hyperacidity		Complaining burning sensation in the stomach about 3 hours after meals. Feels nauseated but does not vomit. He is markedly constipated. Pain is somewhat relieved by eating. Does not pass dark stools, & never noticed any blood. Test meal shows hyperacidity & 80% free HCl. No occult blood. Recommend transfer to St. Louis for further treatment.	A. Pennefather Capt

X. Ray Department,
No. XI Canadian General Hospital.

M.O. wd. 11.
No. 11. Can. gen. hosp.

Record No. 8437. 22.4.1917.

D.W. BAKER. 458283. 10th C.R.T., English. 44. Stomach.

15.4.18.
12.am. fundus 3" below iliac crest. Atonic cow horn shape at first moderate size. Poor peristalsis. No irregularities. Small amount passed in 5 minutes. Slight cap but did not remain.
15.4.18.
5.pm. some barium in stomach, caecum, small mass of barium evidently in small intestines.
16.4.18.
12.30.am. Barium in caecum, transverse, descending and rectum.
17.4.18.
11.45am. Barium in caecum, trace in transverse and rectum.
18.4.18.
11.30. Small amount of barium in rectum.
19.4.18.
Barium in appendix from 17th to 20th.
Findings: Moderate atonic stomach.

G R Reid Capt
MAJOR, C. A. M. C.
OFFICER i/c X RAY DEPARTMENT,
No. XI CANADIAN GENERAL HOSPITAL, MOORE BARRACKS,
SHORNCLIFFE.

LABORATORY REPORT. A.F.W. 7212.

Reg.No. Rank & Name 458283 Pte Baker D.W. Corps. 10th C.R.T.

Disease Gastralgia No.xi.Can.Gen.Hospital. Moore Bks

To: O. i/c Laboratory Ward.. 11

Please carry out an examination of the accompanying specimen of Stool with special regard to Occult Blood

Date. 20. 4. 18

A.C.Nicholson
Officer i/c Ward.
Capt CAMC

Occult Blood Negative

Date.. 20/4/18

J. Mundell
Captain C.A.M.C. Officer i/c Laboratory

C.A.D.C.5009.
20M-19-2-18.

4

458283
Pte Baker DW
N.R.T

DENTAL CERTIFICATE.

The following Certificates will be attached to the Medical History Sheets of all 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.
20/4/18	Fit			F. [illegible] Capt. C.A.D.C.

18

LABORATORY REPORT. A.F.W. 2212.

Reg.No. Rank & Name 458283 Pte Baker D.W. Corps.

Disease Gonorrhoea

No.xi.Can.Gen.Hospital. Moore Bks

To: O. i/c Laboratory

Ward.. 11

Please carry out an examination of the accompanying specimen of Stomach Test Meal with special regard to Routine

Date. 13.4.18

H.B. Johnston
Officer i/c Ward. Capt

Urines +
Blood neg.
Trichel ~~neg~~ 37
Tolaegenti 77
C.R. Church

H.B. Johnston Capt CAMC

Date.. 13-4-18

Captain C.A.M.C. Officer i/c Laboratory

8.5.0

LABORATORY REPORT A.F.W. 3212

Rg.No. Rank & Name 458283 Pte Baker J.H. Corps 10 C.R.T.S

Disease Lumbago

No. xi. Can. Gen. Hospital. Moore Barracks. Shorncliffe.

To: Officer i/c Laboratory

Ward. 11.

Please carry out an examination of the accompanying specimen

of Stool with special regard to Occult-Blood

Date 18.4-18.

H.G. Chisholm Capt. C.A.M.C.
Officer i/c Ward.

Occult Blood Neg

C. K. Church

Date.. 18/4/18

Captain C.A.M.C. Officer i/c Laboratory

DISEASE.

Chronic Gastritis

Notes of Case.

Name Baker D.W. Supper

Age 44

Diet

Case Book No.

Date of admission. 27 2 18

Result

Time.	M E	M E	M E	M E	M E	M E	M E	M E	M E	M E	M E	M E	M E	M E	M E	M E	M E	M E	M E	M E	M E	M E	M E	M E	M E	M E
Bowels.	1	1	·	1	·	1	·																			
Urine.																										

Temperature (Fahrenheit): 107° 106° 105° 104° 103° 102° 101° 100° 99° *Normal Temperat. of body.* 98° 97°

Temperature. (Centigrade): 42° 41° 40° 39° 38° 37° 36° 35°

Day of Dis.				
Pulse.	60 84	60 76	60 76	60
Resp.	18 20	18 20	20 20	18
Date.	20	21	22	23

Entered at Stationers Hall. *Printed and Published by Wodderspoon & Co. 6, Gate Street, Kingsway, W.C.* *Gould's Clinical Chart.*

18.5.21

MEDICAL EXTRACT OF INFORMATION FORM

Regt'l No 458283 NAME: Surname Baker.

Christian Names David William

	CODE No.	1	2	3	4	5	6
No. of Admissions	1	5					
Invalided to Canada		0 0					
Married or Single	2	2					
Unit	3	0 6 0					
Enlisted at	4	4 1 6					
Birth Place	5	1 3.					
Age		4 1					
Occupation	6	9 1					
Rank	7	3					
Date of Admission to Hospital		0 9 3 3					
Days off Duty		2 6 4					
W. or D.	8	0					
Wound (or Disease)	9	0 1 3 0					
(Wound or) Disease	10						
Operation	11						
Operation							
Place of Treatment	12	9					
Check							
Results	13	F					
No. of times a Casualty	14	1					

H.Q. 54—21-40-96—600m—6-8-20.

18.3.16.
1-10-16 28.5.18
11-1-17 6.12.18

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.				

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a.
60m.—12-15.
1772—39—819.

Sheet No. 2 Frederic Baker

Name of Soldier Baker, D. W.
D Co 60th. Battn

L. L. Job 89002.—Req. 6213.

Month.	Year.	Cheque No.	Amt.		Remarks.
				20.—	
April	1916	K 16	20	—	
May		L 2834	20		
June		M 6407	20		
July		B 6583	20		
Aug.		B 11755	20		
Sept.		L 15101	20		
Oct.		L 19712	20		
Nov.		L 24378	20		
Dec.		D 32421	20		
Jan.	1917	U 36278	20		
Feb.		V 38041	20		20
March		W. 44858	20		20
April		K 340	20		20.
May		U 6220	20		
June		V 13108	20	260	20
July		V 19866	20		S
Aug.		W 28872	20		B
Sept.		V 32932	20		B 460.00 - RDC
Oct.		F 46815	20		
Nov.					
Dec.					
Jan.	1918				
Feb.					
March					
April					
May					
June					
July					

L. L. JOB. 85506 M. & D. 5997.

M. F. W. 12.
20m.—9-15.
H. Q. 1772-39-819.

2nd Contingent

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

(Father)

To Whom Frederic Baker

Address 386 Delorimier Ave Montreal.

Rate $20.00

NOV 1 1915

By Whom Assigned Baker, David, W.

Regtl. No. 458283.

Rank Pte.

Corps 60th Baltn "D" Co

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.		Y5054	20	
Dec.		Y7559	20	
Jan.	1916	h12430	20-	
Feb.		014542	20-	
March		215152	20-	

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.					

Form R 122.
2353—100M—9-12-16.

2nd Sheet of Record

Rank | Name: Baker. David William | Reg'l No. 458283

Unit: 60th Bn | If in perm. Corps, What Unit? | Married or Single: Single

Place and Date of Enlistment: Montreal. July 27/1915 | Place of Birth: Kent England

Name and Address, Next-of-Kin: Fred Baker
386 Delorimer ave
Montreal. Que | Relationship: Brother

Assigned Pay Monthly $ | Payable to | Relationship

Separation Allowance $ | Payable to | Relationship

Discharge, Date and Place: Perm Grade – Sgt / actng Rank – nil | Reason | Character: o/cas

H. W. V., Ld.—9546-16.

Report. Date.	Report. From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
		On Commence at 1st C.D.D.			
19.7.18	C.R.T.S	pending Embarkation to Canada	Spr. Purfleet	17.7.18	Pt II 198
6.10.18.	"	Cassion Com. 1st C.D.D. A.O.S. on transf. from O.M.T. off. to the C.E.F. in Canada	" "	22.9.18	Pt II 277.

R—122.

Rank Pte. Name BAKER, David William Reg'l No. 458283

Unit 60th Bn. If in perm. Corps, What Unit? Married or Single Single

Place and Date of Enlistment Montreal, July 27th 1915. Place of Birth Kent. England

Name and Address, Next-of-Kin Fred Baker, 386 Delorimier Ave, Montreal.

Relationship Brother

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

16/1/16	Report Date	Report From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place	Date	REMARKS Taken from Official Documents
		C	Arrived in England.		16 NOV. 1915	
	24-11-15	a/adj. 60th	fined 2 dys pay (1) refusing to obey an order (2) Using profane lang. to an N.Co.	Bramshott	24-11-15	Part II order 158 24-11-15
			Embarked for France.		20.2.16	N.R.
	23.3.16	60th Bn.	adm. Mont. Div. Cas. Hosp.	France.	11.3.16	C.L. a. 10 "Gastritis"
	30.3.16	"	Discha: Casualt. Cl. Hosp	Do	18.3.16	C.L. a 15 "Indigestion"
	1.8.16	"	adm: 3rd Div'l rest Sta	"	14.7.16	— 11 50 "Gastritis"
	20.10.16	"	Rejoined unit. -	"	1.10.16	C.L. a 178 - Do —
	9/11/16.	"	Adm #2 Aust. Gen. Hosp.	Boulogne.	31/10/16.	C.L.a. 193. "Chr. Gastritis" 81
	11/11/16	60th/"	Sick. Transferred to C.C.A.C.	Shoreham on sea	8/11/16	Pt II 92
	11/11/16.	"	Adm. Edmonton Mil. Hosp Silver St.	Edmonton.	3/11/16.	C.L.B. 189. — "

H 58283 Spr Baker D. W.

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				
15.11.16	C.C.A.C.	Taken on strength	Shoreham	3.11.16	Pr II O. 502 A
19.12.16	60 Bn	Tfd to CCH Hillingdon House	Uxbridge	14.12.16	CLB 215 Pestritis chronic
15.1.17	"	Dis. from " "	—"—	11.1.17	" 232 Do.
14.1.17	CCAC	REPORTED TO C.C.A.C. ex Uxbr.	Hastings	11.1.17	" 23 C
15.1.17	C.C.A.C.	On Command to Garr. Duty Depot	Hastings	13.1.17	Pr II O 24 B C1
3.2.17	Hq. Cowboro	Att to Hqrs & Posted to Garr. duty Coy	Cowboro.	3.2.17.	Pr II Do. 20
8.3.17	C.C.A.C.	Ceases att. & D.D. on bond. to Duty Coy Guardhse	Hastings	14.3.17	" " 108
6.4.17	Hq Can Tps	Ceases att. on trans. to Ch. G.R.C. Depot	Crowborough	16.3.17	" 47
16.4.17.	2 Can Reg	T.O.S. from C.C.A.C. on Com. G.D.C.	✓	10.3.17.	✓ 38.
30.4.17.	2 Can R.D.	Ceases to be on Com. G.D.C.	✓	28.4.17.	✓ 52
16.5.17.	✓	Posted to C.R.T. Depot	Purfleet	16.5.17.	✓ 68. (C.R.T. Do. 125 9/16 5.17
1.6.17	C.R.T.D.	S.O.S. on posting to 10th C.R.T.	— do —	1.6.17	— 141 (10th C.R.T. Pr II Do 15 3/12 6.17
17.6.17	10th C.R.T.	Embarked for France	do	17.6.17	— 168
4.7.17	- do -	Landed in France	Field	19.6.17	— 169 ✓
5.3.18	10th C.R.T	Invalided sick & posted to C.R.T.D.	Spr Field	27.2.18	Pr II O 154 C.R.T.D. 1d/12.3.18. O.C.
29.5.18	C.R.T.D	On Comd 3d C.C.D. - deafprd.	Spr Purfleet	28.5.18	Pr II O 148 3d C.C.D. 26d/31 5/18
4.7.18	3d C.C.D	Ceases on Comd 3d C.C.D.	Spr deafprd.	4.7.18	Pr II O 155 C.R.T.D. 184d/5 7/18.

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				
16.7.16	10 C.F.A.	Gastritis	10 C.F.A.	12.7.16	Pt 6. D.O.D. 117 of 8.16.
7.10.16	OC Bat.	Can Corps Rest Mole Co.	—	1/10/16.	B 213 DES 164
17.7.16.	OC Bat.	Returned to Duty.	—	17.7.16.	N.R. OC Bat.
21.10.16	OC Bat.	Rejoined Unit.	—	17.10.16	B 213 DES 164.
2.11.16.	2 Aux Genl.	Chronic Gastritis	2 Aux Genl.	2.11.16.	H 3083 "680 pt 5 d/o" #72
"	"	Transfer to England.	H/S Jan Royal	2.11.16	" " "

G Johnston
Lieut.
for Lieut Col. A.A.G.
Can. Aux & H.Q.

C.C.A.C.
15.11.16

3/11/16

Taken on strength C.C.A.C. Pt. II D.O. No. 502 a

ATTACHED
13.1.17. TRANSFERRED FROM C.C.A.C. TO C.D.A. PART II D.O. No.

G Macklin
Lieut.
for O.i.c. C.D.A.

1/2/17 bgo D att to ~~5 Can Div~~ G.D. Coy Crowborough 1/2/17 Pt II DO 27 1/2/17

W A Lynden Lt Col
Commdg. Canadian Garrison Ltd. Depot

16.3.17. Ceases to be att to H.Q. Canadian. Crowboro on transfer to C.M.G. Reg Depot, effect 16.3.17. Auth. Pt II D.O. No 47 of 6.4.17.
V. J. Jennings Capt.
OC. C.M.G. Corps. Depot Co

29.4.17 Ceases to be attached C.M.G.D. pt II D.O. 119 of 29.4.17
V. J. Jennings
OC. C.M.G. Corps Depot Co

(641)—Wt. W1751-1403.—500,000—5-15.—C. & G. Forms B. 103/1.

Army Form B. 103.

CERTIFIED CORRECT.
Canadian Record Office,
Westminster House,
Millbank, S.W.

Casualty Form—Active Service.

60th BATTALION C.E.F.

Regiment or Corps _____

Regimental No. 458283 Rank Pte Name Baker David Williams

Enlisted (*a*) 27th July 1915 Terms of Service (*a*) Duration of War Service reckons from (*a*) July 27/15

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

Extended _____ Re-engaged _____ Qualification (*b*) Bf 38773

Report: Date	Report: From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
		Embarked for Overseas Service with 60th Bn. Feb. 20 1916			
					W Kemp Adj. for O.C. 60th Bn
		ARRIVED IN FRANCE	Havre	21+22/2/16.	L.R. 4701 4702 4710
11.3.16	N.Mid.C. Clg.Stn.	Indigestion	Adm. N.Mid.Cas. Clrg.Stn.	9.3.16	A.36 No.7414.
11.3.16	5th C.F. Amb.	Gastritis	Trans. Mont des Cats	11.3.16	A.36.
4.3.16	do.	do. Remaining at Godewaersvelde			A.36.
18.3.16	N.Mid.C. Clg.Stn.	Indigestion	Disch. To duty.	18.3.16	A.36 No.7673.
17.7.16	O.B.Bn.	Disch'd Hospital	to Duty	18.7.16	W/M 5/6/16
17.7.16		Return			
16.7.16	2nd C.C.C.P.	Gastritis	2nd C.C.C.P. 2nd D.R.Bn.	13.7.16 14.7.16	A.36 Disch. 107-25.7.16

NOV 1916

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

[P.T.O.

Report		Record of promotions, reductions, transfers, casualties, &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				
23.6.17		DISEMBARKED	HAVRE	19.6.17	Land Ret. 8975 + 8476
					D.O. 109 8/4.7.17.
21.2.18	2 Asst Gen	Gastralgia Adm	2 Asst Gen	21.2.18	W5412
20.2.18	3 N Z F A	" Adm 20/2/18 Do	3 CCCS	20.2.18	A8422
22.2.18	3 CCCS	" " 20/2/18 Do	33 A.T.	21.2.18	A8647
27.2.18	3 Asst Gen	Invalided via England per	Paris	27.2.18	W30/4843
		H.T. Cambria and posted to			D.O. 15 dy 5.3.18.
		C.R.T. Depot. Purfleet.			
				Pr Walters	
				Capt.	Lieut. for, Lt.-Col., A. A. G.
				Canadian	Section, G. H. Q. 3rd Echelon, B. E. F.
12-3-18	C R T D	To Temporary pass 10th C R T	Purfleet	27-2-18	T.10 071
					accountant
					Lieut.
				FOR	Adjt. 1st Bn. Can. Ry. Troops
4/7/18	DISCHARGED FROM 3RD C. C. D.	Seaford TO	1st BN. PART II D. O. NO. 155	4/7/18	For O.C. 3rd Canadian Command Depot
29.5.18	C R T Depot	On Command 3rd C D Seaford	Purfleet	28.5.18	pt II 148
5.7.18	do	Off Command Seaford	do	4.7.18	pt II 184
19.7.18	do	On Command CDD	do	19.7.18	pt II 198
		Buxton			J. Brown Lieut for O.C.

DEPOT CAN. RLY. TROOPS.

Army Form B. 103 (2) Regimental Number 457283

Casualty Form—Active Service.

Regiment or Corps 60th Bn

Rank Pte Surname Baker Christian Name David William

Religion Age on Enlistment years months.

Enlisted (a) 27/7/15 Terms of Service (a) Dofw Service reckons from (a) 27/7/15

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...			
16/4/17	2nd QRD	Taken on Strength from 2nd Lve Reg. Depot	~~Shorncliffe~~ Crowborough	10/3/17	P.D.O No 38
16/5/17	2nd Lve. Reg. Depot	Trans to C.R.T.D.	Purfleet	16/5/17	P.D. No 68
16/5/17	CRT Depot	Taken on Strength	Purfleet	16/5/17	
1/6/17	CRT Depot	Transferred to 10th Bn CRT	Purfleet	1/6/17	P.T.H.O. 141
2-6-17	10th C.R.T.	T.O.S. 10th C.R.T.	Purfleet	2-6-17	D.O. 153, 2-6-17
17-6-17	10th CRT	Proceeded Overseas	Purfleet	17-6-17	D.O. 168 H.P. Taylor Lt Col

CERTIFIED CORRECT 2 JUL 1917 OFFICER RECORDS

DEPOT CAN. RLY. TROOPS

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

[P.T.O.

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

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				
16-12-18.	SOS Discharged	Cat. C.1. R.O. 1880 Para. 8. Medically unfit.	DD.4.	D.O. Pt. 2. 244-P-	

Lieutenant,
Chief Discharge Section, District Depot No. 4.

Army Form B. 103. Regimental Number 458383

Casualty Form—Active Service.

Regiment or Corps 60 Btn C.E.F.

Rank Pte Surname Baker Christian Name David William

Religion ..... Age on Enlistment ..... years ..... months

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

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

Extended { ..... / ..... } Re-engaged { ..... / ..... } Qualification (b) ..... or Corps Trade and rate .....

Occupation ..... Signature of Officer

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
Date	From whom received				
		Embarked ...			
		Disembarked ...			
20-9-7-18		TAKEN ON STRENGTH C.D.D. BUXTON Pt. 11 ORDER No. ~~169~~ 170			
		EMBARKED FOR CANADA FROM LIVERPOOL			
22.9.18		Sailed from England for Canada	Lock. Lieut. for Lieut.-Col. Commanding Canadian Discharge Depot		
			W. Fulton Major, Adjt., Conducting Staff. 408		
9-10-18..		Overseas. T.O.S.District Depot No.4 Montreal, 22-9-18. D/O Pt.11 174			

(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.

W. 8635—M2733 2000m 9/17 (35611) C. P. & S., Ltd., Form B./103 E/1807.

P.T.O.

Rank Pte. Name BAKER, David William Reg'l No. 458283

Unit 60th Bn. If in perm. Corps, What Unit? Married or Single Single

Place and Date of Enlistment Montreal, July 27th 1915. Place of Birth Kent, England

Name and Address, Next-of-Kin Fred Baker, 386 Delorimier Ave, Montreal.

Relationship Brother

Assigned Pay Monthly $ 20.00 Payable to Mrs J. Baker, 386 Delorimier Ave. Montreal

Relationship Brother.

Separation Allowance $ Payable to

Relationship

DEC 2 1918

Discharge, Date and Place Reason Character

Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
Nov. 1 1915	Nov. 30	30	1.00	30 00	30	.10	3 00	10 00	43 00				20 00	10 60	30 60	12 40	18 days forfeiture Pay 7 days 2 " detention BO's #139, 141 and 142-158
Dec. 1 1915	Dec. 31 1915	31	1.00	31 00	31	10	3 10	12 40	46 50			14 60	20 00		34 60	11 90	
Jan. 1 1916	Jan 31	31	1.00	31 00	31	10	3 10	11 90	46 00			17 04	20 00		37 04	8 96	
Feb 1	Feb 29	29	1.00	29 00	29	10	2 90	8 96	40 86			5 04	20 00	13	25 17	15 69	Issue on repayment 1/6½
Mar 1	Mar 31	31	1.00	31 00	31	10	3 10	15 69	49 79			7 84	20 00		27 84	21 95	
				152 00			15 20	10 00	177 20			144 52	100 00	10 73	155 25	21 95	

BALANCE TRANSFERRED TO NEW LEDGER

Checked

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

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

Name Baker, David Wm.
Surname Christian Name

Regimental Number 458283 Rank Pte

Address (in full) 386 Delormier Ave Montreal.

Unit 60th Bn

Original Unit

District where paid

Date of Discharge 16-12-18

P. D. P. Filing Number

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

L. L. 46038—M. & D. 9215.

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

Remarks: Account opened 8-12-18

M. F. W. 127.
25M.—8-18.
1772-39-1140.

WAR SERVICE GRATUITY.

Fo..... Register No.....

R No. ..... Dependent.....

N..... Address.....

Ags..... .....

....

....

Payoldier $ ..... Pay Dependent $.....

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

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

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

Net.....

Dec'n No ..... W. S. G. File No

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

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

Less P, D. P. Credited $

$

Less further debit balance $ ....

Net due paid as below

TO SOLDIER TO DEP

O	Ag. No.	Ch. No	Amount	Ag No	Ch No	Amount
1						
2						
3						
4						
5						
6						
	Total			Total		

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

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

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

Date.	Remarks	Pt. 2 Order No.
	DMH.	
2.11.18.	S.C.S.Casualty Coy to [illegible] Sec: W/S 31.10.18.	198.P.7
20-11-18	Adm to St Annes Hospital 20-11-18.	
6-12-18.	SOS.Hosp.Se on Trans to Cas Coy. 6-12-18.	232-p-3
9-12-18	SOS.Cas. Co. to Discherge Sect. W/S. 7-12-18	232-p-3
13-12-18.	D.O.pt 2. 236 pg 2.which reads in part Cas.Co., to [redacted]. DISH.Sect.	
	Sect.is hereby cancelled.	239-p-4.
16-12-18	SOs Discharged, Cat. C.1. Med.unfit. R.O.1080. Para.8.	
	DD.4. D.O. Pt.2. 244./P-1	

M. F. W. 192
150m.—5-18
1772-39-1243

*Name BAKER David Wm Rank Pte Regtl. No. 458283

Fyle Depot 19 B/312

Original unit 60th Bn Present unit M. or S. S Age 44 Religion CE Ref. H.Q.

Port, ship and date of arrival Montreal "ex H.M.T. Llanstephen Castle" 8-10-18

Next of kin Brother - Fred Baker

Address on leave

Address on discharge

Transportation issued Yes No Date Character on discharge

Previous occupation Labourer Date and place of enlistment July 27th 1915 Montreal

Diagnosis Date of Medical Boards

Date.	Remarks	Pt. 2 Order No.
9-10-18	Taken on strength from Overseas and posted to Cas	174 P 2
	Coy 8-10-18 and granted leave with Subsistence	
	until 22-10-18	

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

(over)

EPITOME OF HOSPITAL TREATMENT.

	Hospital	Adm.
1.	Edmonton Mil Edmonton N.	3.11.16
	Uxbridge Canal.	14.12.16.
2.	3 New Zealands.	20.2.18.
	2 Aust. Gen. Wimereux	21-2-18
3.	Tankerton Hosp Whitstable	28-2-18
4.	11 C. G. Shorncliffe	13-4-18
5.		
6.		
7.		

Ch. 1-6.18 B.229.

D.M.S. 1300.

Surname	Christian Name or Names	Reg. No.
Baker	D. W.	458283

Rank	Unit	Co.	Troop	Batty
Pte.	60th. Battn	10 Cb Tps.		

Hospital — Date of Admission

Transferred 5 Can Fd Amb — Hosp.
Mont des Cats — Hosp. 11. 3. 16
3 D.R. Rouen — Hosp. 14. 7. 16.
2 Australian Gen. Boulogne — Hosp. 31. 10. 16

Diagnosis: Gastritis

(1)
Later Diagnosis (if changed): Gastralgia

(2)

(3)

Additional Diagnoses: If more than one state present

DISPOSITION — Date

Dischd 18. 3. 16
Reg Unfit 1. 10. 16
Dis. 11. 1. 17.
Mis - 28. 5. 18.

C.L. 23. 3. 16 A10
C.L. 29. 3. 16 # A15
1. 8. 16 # a111
C.L. 20. 10. 16 # 178
9. 11. 16 # a193
11. 11. 16 # B189
18. 12. 16 B213
N. 117 B232
26. 2. 18 A149 (1)
27. 2. 18 a150 (3)
9. 3. 18 B159
16. 4. 18 B189

REMARKS

A.M.D. 2 DEPT.
Bch. of D.G.M.S. O.M.F.C. London

PTO

3rd Pr.

REGT'L. No. 458283.

H. Q. FILE No 649

NAME Baker, R. W.

RANK AND CORPS

CABLE		NATURE OF CASUALTY
NO.	DATE	

FOLLOWS

No.

FOLLOWS

L. L. 31493. M. & D. 8476.

M. F. W. 42-100M.—28-11-17.
H. Q. 1772-39-893.

LIST NO.	HOSPITAL	DATE OF ADMISSION	REMARKS
B159.	Tauberton. Whitstable	28-2-18	Gastralgia
B189-1.	Ex to 11 Cav. Gen. Shorncliffe	13-4-18.	"
B229	Discharged	28/5/18	"

MARRIED SINGLE WIDOWER

TRADE OR CALLING RELIGION

DESCRIPTION.

APPARENT AGE YEARS MONTHS

HEIGHT FEET INCHES

CHEST MEASUREMENT INCHES EXPANSION INCHES

COMPLEXION EYES HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE DATE

CARD NO. 757 L.R.

SUR NAME. Baker,

CHRISTIAN NAMES David William

REGL. No. 458283. RANK Pte.

UNIT 60th " Batt.

FORMER CORPS Queens Own, W. Kent Regt.

SOS 16/12/18. 5 Pn. U.
DO. 244 FOLL. 16/12/18.
4/DD.

NEXT OF KIN.

NAMES IN FULL Baker, Fred

RELATIONSHIP TO SOLDIER Brother,

ADDRESS 386 Delorimier Ave Montreal P.Q.

CHANGE OF ADDRESS

COUNTRY OF BIRTH England, Kent DATE

PLACE OF ATTESTATION Montreal, P.Q. DATE 27/7/15

O/S 6/11/15 256/5 R/C 7/10/18 208/40

L. L. 90 89.—M. & D. 6312 Sailed from Montreal per SS Scandinavian Nov 6th/18 M. F. W. 22. 100m.—1-16. H. Q. 1772-39-839.

(This form to be filled in by all ranks on voyage to Canada.)

.....

R	RANK	SURNAME	INITIALS	UNIT
.....	.....	.....	.....	.....

l address.....
(Street) (City or Town) (Province)

one person to be notified of arrival.....

.....

Station in Military District to which a furlough warrant is required.....

..... Railway.....

l, is your wife on board.....Number of children on board.....

tination.....

(Sgd.).....

Number 458283 Rank Pte.

Surname BAKER

Christian Name David William

Units 60th Bn Can Inf Theatre of War France

Date of Service 20-2-16

Remarks (Bro) Frank Baker Esq - ~~Lib Mance~~ 2554 Jeanne Mance St., Montreal

Latest Address ~~386 Delorimier Ave~~ 27-23

Montreal

P. Q.

Roll No. B. Page 20403

200m.-6-21.

No A58283
458283

Rank Pte

Name Baker D. W.

T. O. S 27-7-15.
DO 61-3-8-15.

Unit 60th. Battalion

M. D. Val.

Paid From	Paid To	Sig. or Rec't	Promotions, Transfers, Discharges, etc.	
			Particulars	Authority
1915 July 27	1915 Aug 31	c.		
Sept.		c		
Oct.		c.		
Nov.		c	Forfeits 3 day pay	DO 139 J 11-15
			" 1 " "	DO 141 J 11-15
Dec.		c	" 2 " "	DO 142 J 11-15
			" 2 " "	DO 158 J 11-15
			awd 48 hrs det.	DO 142 J 11-15

UNIT SAILED
NOV 6 1915

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

R. 149.

Name Baker D.W. *Rank* Pte. *Reg. No.* 458283.

Unit 60th Battalion.

Next of Kin Canada.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
11-3-16.	Mont des Cats (Ex No.5.Can Fld Amb)		Gastritis.	A10.		
18-3-16.	Nor Mid Div Cas Clr. Discharged.		Indigestion.	A.15.		
14-7-16	No. 3 Div. Rest Station		Gastritis	A111		
1-10	Rejoined Unit		do	A178.		
31-10	No 2 Aus. Gen. Hos.	Boulogne	Chronic Gastritis	A193.		
3-11	Edmonton Mil Hos.	Silver St Edmonton	do	B189.		
14-12.	Can-Con. Hos.	Hillingdon House Uxbridge	do	B215		
11-1-17	Discharged		do	B232.		

REMARKS: Re Admitted to St Anne Mil Hosp St Germain de Prés

Nov 16/18

LEDGER NO. ~~415~~ 189 SERIAL NO. ~~21699~~ 22 6857

REG. NUMBER 459283 NAME Baker D W

RANK Pte CORPS D D H

AGE 44 SERVICE C 5/12 E 16/12 F. 19/12

NAME OF HOSPITAL Drummond Mil PLACE Montreal

DATE OF ADMISSION 1/11/18

DISEASE ~~N Y D~~ Stomach (2) Gastritis

TRANSFERRED TO OTHER HOSPITALS (4135) St Ann De Bellevue Mil Hosp 18-11-18

OPERATION

DISCHARGED TO ? 6.12.18 IN CATEGORY

M. F. W. 2553.
50m.—6-18.
1772-39-1332.

Over P. T. O.

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

Form R. 149.

David William

Name BAKER. Rank Spr. Reg. No. 45-82283.

Unit 10th. C.R.T.

Next of Kin Canada

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
20-2.	3 Sq. R.E. Field Regt.					
	[illegible]	Gravenstafel			A149	
21-2.	2 Reo. C.E. Pioneers					
	H.A. 20 05 3/4		do	A150		
28-2	Sankerton 3 Lobitstalle		do	B159	✓	43659
13-4.	Reinforced 3 Cliff		do	B189		16344
28-5.	Discharged		do	B229		53347
BH						

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
A 10	Bont des Chats. Ex #5 C. F. Amb.	11-3-16	Gastritis
A 15	Ex. Midland Cas. Cl. Stat Mich.	18-3-16	Indigestion
A 111	#3 Div rest Stat.	14-7-16	Gastritis
A 178	Rep. from Base	1-10-16	" " Rej. Unit.
A. 193	#2 Australian Gen. Boulogne	31-10-16	Chr. " "
B 189.	Edmonton Mil. Silver St. Edmonton N.	3-11-16	" " "
B 215	to Can. Com. Hillingdon House Uxbridge	14-12-16	Gastritis Chronic
B 232	Discharged	11-1-17	" " "
A 149.	3 New Zealand Fld. Amb.	20-2-18.	"
A 150-B	2 Aust. Gen. Hospital.	21-2-18.	"

REGT'L NO 458283

NAME Baker. D. W.

H. Q. FILE NO. 649-

RANK AND CORPS Pte 60th Batt.

FOLLOWS

No. 158x

FOLLOWS

CABLE	
No.	DATE

NATURE OF CASUALTY

L. L. Job 90581—M. & D. 6314.

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

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch B

OVERSEAS CONTINGENTS

Date of Assignment 710 Nov 1/15.

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

20.			

PARTICULARS OF SEPARATION ALLOWANCE

No. 458283.

Rank Pte. Promoted Reverted Discharge

Soldier's Name David. W. Baker.

Battalion 60th Battn. "D" coy.

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT Father.

Name Frederic Baker.

Address 386. Delorimier Ave.

Change of Address Montreal.

1

2

3

4

Date 1917.	Cheque No.	Amount S/A	Amount A/P	Total	✓
Sept.			460	460	
Oct.	F 46815		20	20	
Nov	C 53734		20	20	
Dec	D 57242		20	20	m
Jan	A 55819		20	20	m
Feb	B 95668		20	20	
Mar	A 92005		20	20	✓
Apl	D 8730		20	20	S
May	E 10144		20	20	S
June	B 18489		20	20	S
July	A 31522		20	20	✓
Aug.	B 34121		20	20	~
SEP	A 41004		20	20	a
OCT	A 44625		20	20	
NOV	A 55412.		20	20	
DEC	B 66300		20	20	
JAN	~~B 74717~~		~~20~~	~~20~~	
			760	760	

REMARKS 0753-D-5 W.D. #4.

A/c ~~Closed~~ open

Ret'd per Thunderstyle Castle

Date 10/12/18 F.X. 12/10/18

Clerk J. H. Brown

A/c closed 31-12-18 with H.D. 593-I-82 dated 23-11-18 - transferred for future payment to W.D. 4. M.R.O. 60946. H.R. 13-1-19.

B74717 is cancelled (3284) IR 10/5

M. F. W. 128
400M.—6-17—172-89-141
L. L. 22320—M. & D. 4193.

CONSOLIDATED ACCOUNT

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

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

M. F. W. 128
400M.—6-17—1772-39-1141
L. L. 22320—M. & D. 7493.

Army Form B. 103. Temp Record ... Number 45828

Casualty Form—Active Service.

Regiment or Corps 2nd Q.R.D.

Rank Pte Surname Baker Christian Name D.W.

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				
6-4-17	2 Lieut Key.	T.O.S. from Ccac + a Con to G.D.C. Having reported Embarked ...	Crowborough	10.3.17	P/m 2038
		Disembarked...			
30-4-17	2nd Q.R.D	ceases to be on Con at G.D.C. Crowborough 28.4.17			57
16-5-17	— —	S.O.S. to ~~Cavy Rail Bay~~ Trg Dep	Purfleet	16.5.17	Pte Do 68

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

[P.T.O.

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

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				

Moore Barracks Canadian Hospital,
Shorncliffe . . . . .

This is to certify that I have examined,

NO. 458283 RANK Pte NAME Baker W UNIT.

I find him dentally fit

13-4-18 J M Rogers Capt CADC

. . . . . .

LABORATORY REPORT. A.F.W. 7212.

Reg.No. Rank & Name 458283 Spr. Barker. Corps. 101st R.T.

Disease Gastralgia No.xi.Can.Gen.Hospital. Moore Bks

To: O. i/c Laboratory Ward.. XI

Please carry out an examination of the accompanying specimen of Blood with special regard to Wassermann

Date. Apr 25-18

For Diagnosis.

Officer i/c Ward.

NEGATIVE

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	458283	Pte	Baker.	D. W
Year	Unit.		Age.	Service.
	60th Bn.		42	17/10

Station and Date.	Disease Gastritis.
Uxbridge 13 Dec 16	
	Jamie Trout 22 Oct 16
	Banloque " 23 "
	Edmonton 25
	Condition good - improving steadily.
14/12/16	P.T.
19/12/16	do Good
28/12/16	do Good
4/1/17	do Good
11/1/17	C.C.A.C.
	Colette. Jany 11/17 L. M. Smith Capt Comd P. B. Duty

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

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

P.T.O.

Station and Date.	
	Med. History Book
8/1/19	Age 42 yrs – Suffering from chronic gastritis. Improved under treatment – unfit for service

P 820
12474 375:1—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY.	* ~~ENGLAND OR~~ CANADA.	SEPARATION ALLOWANCE.	* ENGLAND OR CANADA.
EFFECTIVE DATE:-	1/11/15	EFFECTIVE DATE:-	
AMOUNT:-	~~20~~ - Stopped Eff 1/8/18	AMOUNT:-	

NAME:- BAKER - David Lpr

NUMBER:- 458283

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

F Baker
386 Delormier Ave
Brother ~~Cancelled~~ Montreal

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT

UNIT AND TRANSFERS DEC 2 1918

ORIGINAL UNIT:- 6 Bn

DATE ACCOUNT FIRST OPENED:-

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			10 CRT

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS | UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK

DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT
11/7/18	642	Pinfleet	9 73				

DAILY RATES OF PAY AND ALLOWANCES

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

PARTICULARS OF RENDERING NON-EFFECTIVE:- Discharge to Canada 1.8.18 Auth. Nom Roll 78/3. 19.7.18.

MONTH	PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
31.3.18	Bal. fwd.								120 44		
apl	p.p.	33		a.p.				20	133 44		
		33						20			
								20			
				8/5.	48 67				98 87		
					48 67			20			
								20			
				3 CCD	4 87						
				CRTD	24 33				89 97		
					29 20			20			
								20			
					9 73						
				6 DD.	9 73				84 61		
					19 46			20			
				2.10. End.	9 73						
					9 73				65 15		
					19 46						
					9 73						
					65 15				9 73		
					74 88				0		

P.830-25M-21-2-18. 458183 BAKER. D.W.

LAST PAY CERTIFICATE. PARTICULARS.

1. L.P.C. Issued, date 22.7.18.
2. Authority Nom Roll 78/3 19.7.18.
3. Discharged to Canada 1.8.18.
4. Pay Book Verified 22.7.18.
5. Balance shown on L.P.A. $ ~~10~~ 94 34
6. Balc. shown on Ledger Sheet $ 104 07
7. Full particulars of entries making difference between 5 and 6 if any:-

No.	Date	Unit and Particulars of Entry		Amount Debit	Amount Credit
~~642~~	~~July 11 18~~	~~Pinfleet~~	~~£~~	~~9 73~~	
642	July 11.18	Pinfleet	£ s. d.	~~9 73~~	

8. Ass'd Pay Cancelled A3M forms rendered AP Stopped Eff 1.8.18.

or

9. Sep. Allce. and Assd. Pay continued to dependent in England and transf'd to Acc'ts Br. for payment. Nil

Certified Correct.

Officer i/c Group "L"

P 820
12474 375:1—13-2-18.

* Strike out whichever mapplicable.

ASSIGNED PAY.	* ~~ENGLAND OR~~ CANADA.	SEPARATION ALLOWANCE.	* ENGLAND OR CANADA.	NAME:- BAKER - David Wm
EFFECTIVE DATE:-	1/11/15	EFFECTIVE DATE:-		NUMBER:- 458283
AMOUNT:-	~~20~~ - Stopped 8/4/18	AMOUNT:-		PARTICULARS OF RANK OR APPOINTMENT

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

F Baker
386 Delormier Ave,
Brother Montreal
Cancelled

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT

UNIT AND TRANSFERS DEC 2 1918

ORIGINAL UNIT:- 6 Bn

DATE ACCOUNT FIRST OPENED -

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			10 CRT

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS | UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK

DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A R	UNIT PAID BY	AMOUNT
11 7/18	642	P unfleet	9 73				

DAILY RATES OF PAY AND ALLOWANCES

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

PARTICULARS OF RENDERING NON-EFFECTIVE:- Discharge to Canada 1.8.18 Auth: Nom Roll 78/3. 19.7.18.

MONTH	PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
31.3.18	Bal. fwd.								120 44		
apl	p.p.	33		a.p.				20	133 44		
		33						20			
May	p.p.	34 10		c.a.p.				20			
				968 11 6/4 28/5	48 67				98 87		
		34 10			48 67			20			
June	p.p.	33 -		b.a.p.				20			
	10 days S.A. 28/5/18 – 7/6/18 DO 126 3/5. 3 CCD	7 30		2150 16/6 3 CCD	4 87						
				2443 28/6 CRTD	24 33				89 97		
		41 30			29 20			20			
July.	p.p.	34 10		Cap.				20			
				642 12/7 "	9 73						
				5311 26/7 DDD.	9 73				84 61		
		34 10			19 46			20			
Aug.				AR. 6557 9/8/18. C.D.D. End.	9 73						
				8260 24/8/18 " "	9 73				65 15 ✓		
					19 46						
Sept				10528 9/9/18 " "	9 73						
				D.N. 6 Pol.	65 15				9 73		
					74 88						
Oct	cn. 2208		9 73						—		
			9 73								

Married or Single S.

Place of Birth Kent. England.

Name and Address of Next of Kin Fred Baker.
386 Delormier Ave. Montreal, Que.

Relationship of Next of Kin Brother

Name and Address of Next of Kin

Relationship of Next of

Separation Allowance Monthly $ Effective (Date)

Payable to

Relationship of Dependant

Depot Can. Ry. Corps A.H.

Casualties, Promotions, &c.

Particulars	Effective Date	Authority

Admissions to Hospital, &c.

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

Reg'l No. H58283 Rank Pte Name Baker, David William

If in Perm. Corps What Unit Unit 60th Battn. Transferred to CCAC Date 1/12/16 Authority B.O. #72 11/10/16 C.R.B. 189 11/10/16

Permanent Force Allowances Transferred to C.E.F.D. Date 27/4/17 Authority Asst Adjt

Place of Attestation Montreal Transferred to Dep. Can. Ry. Corps Date 11/8/17 Authority Acq R.

Date of Attestation July 27/15. ~~Transferred to~~ 10-CRT Date 1/11/17 Authority N Roll

Assigned Pay Monthly $ 20.00 Date Effective 1/11/15.

Payable to Mrs. F. Baker, 386 Delormier Ave., Montreal, Que. Relationship Brother.

Assigned Pay Monthly $ Date Effective

Payable to Relationship

DEC 2 1918

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

Discharge Date and Place Reason and Authority

Account Transferred to Non-Effective Branch (Date)

Account Transferred to Officers' Pay Branch (Date)

Date	Pay No. of Days	Pay Rate	Pay Amount $	Pay Amount c.	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount $	Field Allowance Amount c.	Working or Special Pay No. of Days	Working or Special Pay Rate	Working or Special Pay Amount $	Working or Special Pay Amount c.	Assigned Pay Credits	Other Credits	Total Credits	Acquittance Rolls 1 No	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	Cash Payments 1	2	3	4	Assigned Pay	Other Charges	Total Debits	Balance Credit	Balance Debit	Pay Withheld or Deferred	Pay Available for Issue	Remarks
			154				15 20							10	177 20												44 55	100	10 73	155 25	21 95				
1/1-31/1/16	30	1.00	30	00	30	10	3	00							33 00	139	21/1/16							261				20 00		22 61	32 34				
1/2-31/2/16	31	1.00	31	00	31	10	3	10							34 10	227	8/2/16	221	15/2/16					255	255			20 00		25 10	41 34				
1/6-30/6/16	30	1.00	30	00	30	10	3	00							33 00			276	18/6/16						5 11			20 00		25 11	49 23				
1/7-31/7/16	31	1.00	31	00	31	10	3	10							34 10	346	30/6/16	411	18/7/16					256	262			20 00		25 18	58 15				
1-31/8	31		31		31		3	10							34 10	141	31/7							262				20		22 62	69 63				
1/9-30/9/16	30	1.00	30	00	30	10	3	00							33 00	535 517	19/8 30/8	621	16/9					262 261	262			20 00		27 85	74 78				
1/10-31/10	31	1.00	31	00	31	10	3	10							34 10	672	28/9			ccac. 1230	15/10			261		524		20 00		27 85	81 03				
Checked Selection No	30	1.00	30	00	30	10	3								33 90 495 60													20 00		30 00	94 03 X		✓	94 03	Trans CCAC 1/11/16 Bo #72 11/10/16
1/1-31/1/17 Jan.	31		31	47 70	31		3	10							34 10											122		20		21 22	106 91				
1917 1-31	31	1.00	34	10											34 10													20		77 20	63 81				
Feb	28	1.00	30	80											30 80									7 30				20		27 30	7 51				
Mch	31	"	34	10											34 10											486 32 33 487		20		54 06	47 35				
Apl	20	"	22												22													20		20	49 35				Trs to 66 7 D 21/4.
			540	70										10	600 70									54 14	66 44	40 57	44 55	360	10 73	551 35					
			10	70										10	600 70									54 14	66 44	40 57	44 55	360	10 73	551 35					

Email
Leager Bleach

58283 Pte Baker D.W. a P. $20.00 per mo

Date	Pay No. of Days	Pay Rate	Pay Amount $	Pay Amount c.	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount $	Field Allowance Amount c.	Working or Special Pay No. of Days	Working or Special Pay Rate	Working or Special Pay Amount $	Working or Special Pay Amount c.	Assigned Pay Credits	Other Credits	Total Credits
			590	70										10	600 70
1916 Apr	10	1.10	11												11
May			34	10											34 10
June	30		33	00											33 00
July	31		34	10											34 10
Aug.	10		11												11
"	21		713	90										10	723 90
			23	10											23 10
Sept	30		33												33
			770	00										10	780 00

Acquittance Rolls 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date
				1784	3/7 Cm co		

Cash Payments 1	2	3	4	Assigned Pay	Other Charges	Total Debits	Balance Credit	Balance Debit	Pay Withheld or Deferred	Pay Available for Issue
29 14	66 44	40 52	44 52	360	10 73	551 35	49 35			
							60 35			
				20		20	74 45			
		4 87		20		24 87	82 58			
				20		20	96 68			
				20		20	87 68			
29 14	66 44	45 39	44 52	440	10 73	636 22	110 78			
				20		20	123 78			
29 14	66 44	45 39	44 52	460	10 73	656 22				

Remarks: Transf to Depot Can. Ry. Troops

Month 1917	Particulars	Cr. 1	Cr. 2	Particulars	Dr. 1	Dr. 2	Dr. 3	Dr. 4	Balance	Deferred Pay	Ser. Allce. Eng.
Oct	Bal.	~~123 78~~							123 78		
	PP	34 10		9 10 CRT	17 6/17	1 22		20			
				78 10 CRT	16 7/17	1 78					
				114 10 CRT 30-6-17	CRTO	2 68					
				M90 crediting 91 15-4-17 do		7 30					
				CRTO 204 30-5-17		7 30			117 60		
		34 10				20 28		20 20			
				AR 439 15/10/17 10 CRT		4 46					
				DNAR 208 15/6/17 10 Reo.		4 86					
				DNAR 324 15/9/17 10 CRT		2 68					
				AR 358 1/10/17 10 CRT		2 68					
								20			
Nov.	P.P.	33		DNAR 228 15/8/17 10 CRT		2 68					
Dec	P.P.	34 10		DNAR 147 15/7/17 10 CRT		2 67					
				DNAR 273 1/9/17 10 CRT		2 67					
				DNAR 197 1/8/17 10 CRT		2 68					
				AR 485 1/11/17 10 CRT		3 57			115 75		
1918 Jany		67 10				28 95		40			
	PP	34 10						20			
				AR 563 1/12/17 10 CRT		12 49					
				" 629 15/12/17 "		4 46			112 90		
		34 10				16 95		20			

Month	Particulars	Cr. 1	Cr. 2	Particulars	Dr. 1	Dr. 2	Dr. 3	Dr. 4	Balance	Deferred Pay	Ser. Allce. Eng.
									112 90		
Feb.	P.P.	30 80		CR 677 1.1.18 10 CRT	3 57 X				30 80		
				" 722 15/1/18 "	4 46				143 70		
									37 94		
									110 86		
				A.P.				20			
				DNAR 202 30.4.17 CM.C.D.	4 87				110 80		
		30 80			12 90			20			
Mch	P.P.	34 10									
				6 A.P.				20			
				AR 831 - 1/3 10 CRT. (11)	4 46			20	120 44		
		34 10			4 46						

Carried forward to Large Ledger sheet

AUDITOR | PAYMASTER

M. OR S.

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

REGT. NO. 4582.88 RANK Pte. NAME (IN FULL) Baker. David William (BLOCK LETTERS, SURNAME FIRST)

NEXT OF KIN RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? DATE EFFECTIVE

TO WHOM PAID RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F. 60th Batt. IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION 27/7/15. TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY, $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS 176 Mance St Montreal P.Q.

~~88 Delorimier Ave Montreal~~

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE EFFECTIVE

DISCHARGED PLACE DATE 16-12-17 REASON AUTHORITY DB 2447/1 IF ENTITLED TO POST DISCHARGE PAY

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	C.	$	C.	TOTAL CREDITS $	C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	DATE	COL. NO. 2 NO.	DATE	COL. NO. 3 NO.	DATE	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.	$	C.	TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.	PARTICULARS OR REMARKS
Balance from previous account																	War Service Gratuity																				
					Credits												Months Paid								other charges				Debits						Balance			
Date	Chg.	Rc			W.S.G.	S.A.			Total		Feb	Mch	Apl	May	June	July													W.S.G.	S.A.			Total		W.S.G.	S.A.	
					100 10				100 10																				33 00				33 00		67 10		1st pay DD
																													33 00				33 00		34 10		2nd pay 16/5/19
16/5/19	C 5049										34 10																		34 10				34 10		—	—	
					entitled to 6 mos																																2595 not in 16.3.19
					420 00				420 00																				100 10				100 10		319 90		Pd in advance
16.3.19																													70 00				870 80		249 90		225263
16.4.19																													70 00				70 00		179 90		232128
16/5/19																													70 00				70 00		109 90		303172
16.6.19																											109 90						109 90		—		Man dead. Balance reverts to Public funds. AE
2-2-23	Cr	PC 157							109 90																		109 90						109 90		0	0	CK No

Man dead see file

Non Effective

60m.-11-18 L. L. 51777. M. & D. 9585.

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

Service In France
21-2-16 to 15-11-16
and 19-6-17 27-2-18

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) Montreal, Que.

(Date) December 16th., 1918

Commanding .....

Officer i/c Discharge Section, District Depot No. 4.

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) Montreal, Que. D W Baker (*Signature of Soldier.*)

(Date) December 16th., 1918 J P Burns Sgt (*Signature of Witness.*)

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

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

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

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

10. **Statement of Service.**

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

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

11. **Confirmation of Discharge.**

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

(Place) Montreal, Que.

(Date) December 16th., 1918

(*Signature*) .....

Officer i/c Discharge Section, District Depot No. 4.

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 RESERVATIONS

D W Baker

(OVER)

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form B. 263.	Attestation Paper,	Militia Form B. 235.
Squadron / Battery / Company } Conduct Sheet,	" B. 263a.	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 Certificate,	" D. 877.		

*Only if discharged "Medically unfit."

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

(a) Proceedings on Discharge.

(b) Attestation.

(c) Medical History Sheet (in the event of such having been prepared.)

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.

B4423

244-1

This space to be for numbers.

Proceedings on Discharge.

RECORDS

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

MILITARY DISTRICT No. 4
DEC 19 1918
M. D. 4

No. 458283

Rank Private

Name BAKER, David William

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

Corps (Squadron, Battery or Company) 60th. Battalion, C.E.F.

Date of Discharge December 16th., 1918

Place of Discharge Montreal, Que.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 44 years 11 months.
Height 5 feet 6 inches.
Complexion Fair
Eyes Gray
Hair Gray
Trade Farm Laborer
Intended place of residence (To be given as fully as practicable.) 386 Delorimier Ave. Montreal, Que.

Descriptive Marks
Tatoo Marks on Arm and Chest

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

K.R. & O. 377 (10) C.M. 1917 DD 4 19-B-312. Category "C1" Medically Unfit for General Service R.O. #1080 Para.8.

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

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

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

Very 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.)

Farm Laborer

M. F. B. 218.

100m.—6-16.
H. Q. 1772-39-113.

(OVER)

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

Date	Brief details, and signature
1.12.15	Vaccination. H.L Pavey.
30.7.15	Inoculation. O.K. "
11.8.15	" " "
20.8.15	" " "
13-1-17.	T.A.B./i.c.c. N.M.GILLON.
Jan 12-17.	HASTINGS. Chronic Gastritis. C.I
	J.W.Wickware Captain. (HH)

Table IV.—Service Table.

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

I certify the foregoing to be a true copy of an original entry on a Medical History Sheet of this man.

C.A.M.C.
for the Officer in Charge of Records
Canadian Contingents.

DUPLICATE!

ARMY FORM B. 178.

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

AFD

MEDICAL HISTORY of

Surname BAKER *Christian Name* DAVID WILLIAM.

TABLE I.—GENERAL TABLE.

Birthplace ... Parish Maidstone County Kent.

Examined ... ... on 27th. day of July. 191
at Montreal.

Declared Age ... ... 40 years 6 months. days.

Trade or occupation ... Labourer.

Height ... ... 5 feet 5½ inches.

Weight ... ... 129½ lbs.

Chest Measurement { Girth when fully Expanded 37 inches.
Range of Expansion 2 inches.

Physical Development ...

Vaccination Marks { Arm ... Right Left
Number ... 1 1.

When Vaccinated ...

Vision ... ... { R.E.—V=
L.E.—V=

(*a*) Marks indicating congenital peculiarities or previous disease ... (*a*)

(*b*) Slight defects but not sufficient to cause rejection ... ... (*b*)

Approved by (*Signature*) J.A. Fairie.
(*Rank*) Lieut. A.M.C.
Medical Officer.

Enlisted ... ... at Montreal.
on 27th. day of July. 1915.

	Corps.	Regt. No.
Joined on Enlistment ...	60th.	458283.,
Transferred to		

Became non-effective by

on day of 191 .

This Medical History Sheet has been compared with the Corresponding Attestation Paper, and entries made in red have been taken from the Attestation Paper.

(*Signature*)
(*Rank*) Lieut.-Col. In Charge of Records Canadian Contingent.

(5506.) W. 14971/M. 89. 750M. 1/16. C. P., Ltd.

Forms B. 178 39

P.T.O.

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

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
No 3 Div R Station	14	7	16	1	10	16	Gastritis		Rejoined Unit	A111-178
Edmonton Military Hpl, LONDON. N.	3	11	16	13	12	16	Gastritis (493) Hypersemia of his stomach	40.	Much improved. Milk diet. Condition did not appear to have been chronic.	Murdo M.McRae.
Can Conv Hpl, Uxbridge.	13	12	16	11	1	17	Gastritis.	30.	Somme Front 22-10-16 No.2 Boulogne 2 days. Then to Edmonton. Age 42 Suffering from Chronic Gastritis. Improved under treatment. Unfit for France. To. C.C.A.C. Recommended for Base duty.	S.R.Johnston Capt. HH.

OPINION OF THE MEDICAL BOARD—(*Continued*).

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

Yes Class C-1

Before signing the President of the Medical Board will read the certificate signed by the soldier, to the soldier, and if no change is indicated will initial the certificate.

J. Browne Major AMC *President.*

PLACE Ste. Anne.

DATE 28-11-18

J. Brown Lt AMC } Members.

APPROVED BY

Assistant Director of Medical Services.

DATE DEC 4 1918

APPROVED BY

Director-General of Medical Services.

DATE

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.

President.

PLACE .....

DATE .....

Members.

MEDICAL HISTORY OF AN INVALID

B4423

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" issued by the B.P.C. and instructions issued by Militia H.Q., Ottawa, will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of Sections 1 to 17 of this Form and will obtain the signature of the soldier to the "Statement," page 3. The President of the Board of Medical Officers is responsible for the proper completion of sections reserved for recording the "Opinion of the Medical Board."
3. In answering the questions, Medical Officers will carefully obtain and record the 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 13. Please read the questions carefully. All questions must be answered.
5. If space provided under any sections is insufficient use blank space, page 4 or add another sheet. Such entries or sheets must be initialled by the Medical Board.
6. A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board."
7. Under no circumstances may information other than that in sections 8, 9 and 10 be communicated to the soldier, directly or indirectly.
8. The nomenclature of diseases must be followed, if possible, as described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London, (1915), by Messrs. Harrison & Sons.

STATION Ste. Anne de Bellevue DATE 26.11.18

1. 1 (a) Unit M.D.4 (b) Regimental No. 459264 (c) Rank Pte.

(d) Surname Baker. (e) Christian name David William

2. Age last birthday 44 years Date of birth Jan. 16th, 1874

3. Enlisted at Montreal on July 27th, 1915

4. Personal description:—

(a) Height 5' 6" (b) Weight 140 lbs. (stripped) (c) Complexion fair

(d) Colour of hair grey (e) Colour of eyes grey (f) Identification marks

Tattoo marks on arm and chest.

MEDICAL EXAMINER No. 4 DEC 5 1918 M.D. 4

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

264 Delormier Ave. Montreal.

6. Former trade or occupation Farm laborer.

7. (a) Service 3 years (Years) 120 days (Days)

	Periods From	To
Canada	July '15	Nov. '15
England	Nov. '15	Nov. '16
France	Nov. '16	Mar. '18
England	Mar. '18	Oct. '18
Canada	Oct. '18	to date

(b) Has he been overseas? Yes 8. Original disease or disability

#1. Gastritis (MS (489) #2. Hyperchlorhydria (500)

(a) Date of origin Oct. 1916 (b) Place of origin France

(c) Cause* Change in diet.

(d) Present disease or disability #1. Gastritis(489) #2. Hyperchlorhydria (500)

9. Present condition (a) (Important to be a full description of the present disabling condition or conditions only.) "History" must be recorded in Section 10.

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

White man, fairly well developed, well nourished, of apparently older age than stated, color fair. Temp. 99.2 Pulse 72, R. 18. Eyes, ears, nose and throat negative. Mouth, upper teeth, false, Lower set fair condition. Tongue moist, slightly coated. Lymph. System - Negative.

M. F. B. 227.

300M.—2-18.
1772—39—117.

9. Present condition.—(*Continued.*)

Respiratory system - Expansion fair and equal on both sides.
Percussion note in normal limits,. Breath sounds, vesicular, with expiration slightly prolonged. No adventitious sounds.
Circulatory system :- Pulse good volumn and tension, R.C.D. within normal limits, sounds good quality and regular.
G.U. System - negative, K.K. present. Abdomen - negative except slight tenderness in Epigastrium. Test Meal - Total acid 80, some undigested starch, no blood in stools.

(b) Are the following systems normal ? If not, briefly state abnormality

Nervous Yes, Digestive No Respiratory Yes Cardiac Yes

Genito-Urinary Yes Skin, Middle Ear, Eye ~~or any other part~~ Yes

10. History: (*a*) of Condition referred to in "a" section 9.

Well previous to enlistment, In Oct. 1916 began with pain in stomach following food and eructation of gas and condition same ever since, occassional vomiting, frequent vauser.
Patient has no complainst at present. Can take any diet, no loss of weight.

(*b*) 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. If the disabling condition had its origin before enlistment, has it been aggravated on service ?

#1- Not applicable
#2- " "

12. Was the disability caused or aggravated by negligence, by vice or by misconduct, or by unreasonable refusal to accept treatment ? #1 - No, #2- No.

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

13. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one ? #1, six months, #2 - six months.

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

#9 Ambulance, 2 days
C.C.A.C. Frencem 3 days
#9 Australian General, 5 days
Wasmlybury hospital, 5 weeks.
Ox Bridge, C.C.H. one month.

OPINION OF THE MEDICAL BOARD

14. (*Continued*).

Edmonton Military Hospital, one week
D.M. C.H. Montreal, 2 weeks.
Ste. Annes de Bellevue, Nov.16th, 1918 to date

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit ?
(If the answer is "yes" state nature of treatment required and probable duration.)

1+2 No.

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

17. Recommendations

Discharged to civil life,
Category C-1.

J M Rahmonder Capt CAMC
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 and either "satisfied" or "not satisfied" struck out.)

I, the undersigned have heard the description of my disability and present condition read, and am satisfied (or not satisfied) with it. (If dissatisfied, statement should follow.) I complain in addition of Nothing.

D W Baker
Signature of soldier examined.

OPINION OF THE MEDICAL BOARD

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

Concur.

19. 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).

20. 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).

PART I. (continued).

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

(i.) While on duty? not applicable (ii.) While off duty? not applicable

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

(vi.) Opinion of the Court? —

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

Passed. State. Enlisted July 1915 and came to England Nov 1915 went to France Feb 1916 c 60th Bn. where he was till Nov 1916 when was sent back to Eng. c Stomach trouble Returned to France June 1917 c Railway Troops and was there 8 mos. when was again invalided to Eng. on account of Stomach trouble. Complains of pains in rt side of epigastrium loss of appetite and heartburn.

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

Stated age. Fairly well nourished. Not anaemic no glandular enlargement. Chest Heart + Lungs normal. Abdomen normal in appearance. Some slight tenderness in rt. iliac region. Liver and spleen not palpable. no oedema of the feet. Temp. 37°. Total Ac. 77°. no occult blood in stools x ray. Finding moderate atonic stomach. Wassermann neg. Pt. has some constipation bile and nervous system normal. Has improved and does well on diet. Unaccompanied age and treatment. Recommend

8. OPERATION. (i.) Was one performed? no

(ii.) If so, state what. —

(iii.) Was one advised and declined? no

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

9. (i.) Is there loss or decay of teeth attributable to Active Service? no.

(ii.) If so, describe. —

10. DO YOU RECOMMEND:—

(a) Fit for duty? no.

(b) Fit for base duty? yes. Bill not likely to be raised in 6 mos.

(c) Invalid to Canada? no

(d) Discharge from the Service as permanently unfit? no

Date of Report May 17 1918 Signed H. G. Crichton Lieut-Colonel
Officer in medical charge of case.

Station No. XI Canadian Hospital

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

Wallace A. Scott
COLONEL, C.A.M.C.
OFFICER I/c No. XI CANADIAN GENERAL HOSPITAL
MOORE BARRACKS, SHORNCLIFFE.

Dated at Station, on 191

* Delete if inapplicable. ~~Officer i/c Hospital / A.D.M.S. / Brigade~~ Strike out one of these.

No. XI CANADIAN GENERAL HOSPITAL ORDERLY ROOM 20 MAY 1918 MOORE BARRACKS SHORNCLIFFE

PART II.

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

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

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

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

13. Was the disability caused or aggravated by— (a) Negligence of the Soldier: Caused? no Aggravated? no (b) Misconduct of the Soldier: Caused? no Aggravated? no

14. THE ENTIRE DISABILITY.—Without regard to his regular occupation, to what extent is his capacity lessened at present for earning a full livelihood in the general market for untrained labour? (*Estimate at none*, 10%, 20%, 30%, 40%, 50%, 60%, 70%, 80%, 90%, *or* 100%.)

15. THE PENSIONABLE DISABILITY.—*see Part I. (3). Aggravation on Active Service of a disability existing previous to joining is to be included in the estimate.*
What part of the entire disability estimated next above in (14) is due to causes arising during Active Service? (*Estimate at none*, $\frac{1}{5}$, $\frac{2}{5}$, $\frac{3}{5}$, $\frac{4}{5}$, *or all*.) Approved

16. Permanency of the Pensionable Disability estimated next above in (15).
(i.) Is it permanent? No
(ii.) If not permanent, what is its probable minimum duration (*in months*)?

17. If an operation was advised and declined, do you consider the refusal to have been unreasonable?

18. Remarks.

B = 27.6. 1918 Nephritis Chronic Proj. Chronic.

19. Recommendation:—(a) Fit for duty? no
(b) Fit for base duty? yes Bill not likely raised for six months.
(c) Invalid to Canada? no
(d) Discharge from service as permanently unfit? no

Classification for the Military Hospitals Commission

Date of Board 21 MAY 1918

Signatures of the Board. A. E. Macdonald Capt. President. A. Mackay Capt.

No. XI CANADIAN GENERAL HOSPITAL MOORE BARRACKS SHORNCLIFFE

Station

Approved A.D.M.S.

Dated at FOR A.D.M.S. CANADIANS, SHORNCLIFFE Station 23 MAY 1918 191

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

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

on the day of 191

Members of the Board :—

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

Dated at this day of 191

Date of Board

Signatures of the Board

President.

Approved

Station

Dated at

Form (D.M.S. 1312). A.F.B. 179 Canada (Revised) 3737. 50M.

Reserved for M.H.C.

Regt. No. 458283 Rank Pte. Surname BAKER Christian Name D. W.

Unit or Corps—(a) Overseas from United Kingdom 10th Can. Ry. Regt. In United Kingdom C.R.T. Depot.

Born at—Town Maidstone County or Province Kent Country England.

Date of Birth—Day 6th Month Jan. Year 1874 Age 44 yrs. 4 months.

Joined at Montreal Date July 27th 1915

Former Trade or Occupation Labourer.

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

Knee Lump Scar 2 in. below at Patella.

Height—feet 5 inches 5½ Colour of eyes Blue.

Signature of Soldier (*for identification purposes*) D. W. Baker

Medical Report.

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

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

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

Disabilities Group (*a*) INDIGESTION (Atonic Gastritis.).

Disabilities Group (*b*)

Disabilities Group (*c*)

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

	Disease or injury to which the disability is due.	Place of origin.	Date of origin.
(*i.*) As to Group (*a*) above.	Not able to State	France.	1916.
(*ii.*) As to Group (*b*) above.			
(*iii.*) As to Group (*c*) above.			

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

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

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

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

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

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

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

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

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