Proceedings of Court of Inquiry or on men
reported Missing on Active Service
Attestation Papers
Declaration of change of name
Authority for special enlistments
Documents of re-enlisted men
Regimental Conduct Sheet
Compulsory Stoppages
Casualty Forms
Proceedings on discharge
Corps History Sheet
Date and No. of Deposit Receipt for
Purchase Money and Amount
Parchment Certificate
Medical Report for Invalids
Medical History Sheet
Proceedings of Regt. Court Martial
Copies of Convictions by Civil Power
Company Conduct Sheet
Clothing Transfer Certificate
Inventory of Kit
Last Pay Certificate
9-1-12/22 1

M. F. W. 62. 50m.—9-18, H. Q. 1772—39—935, DISCHARGE DOCUMENTS

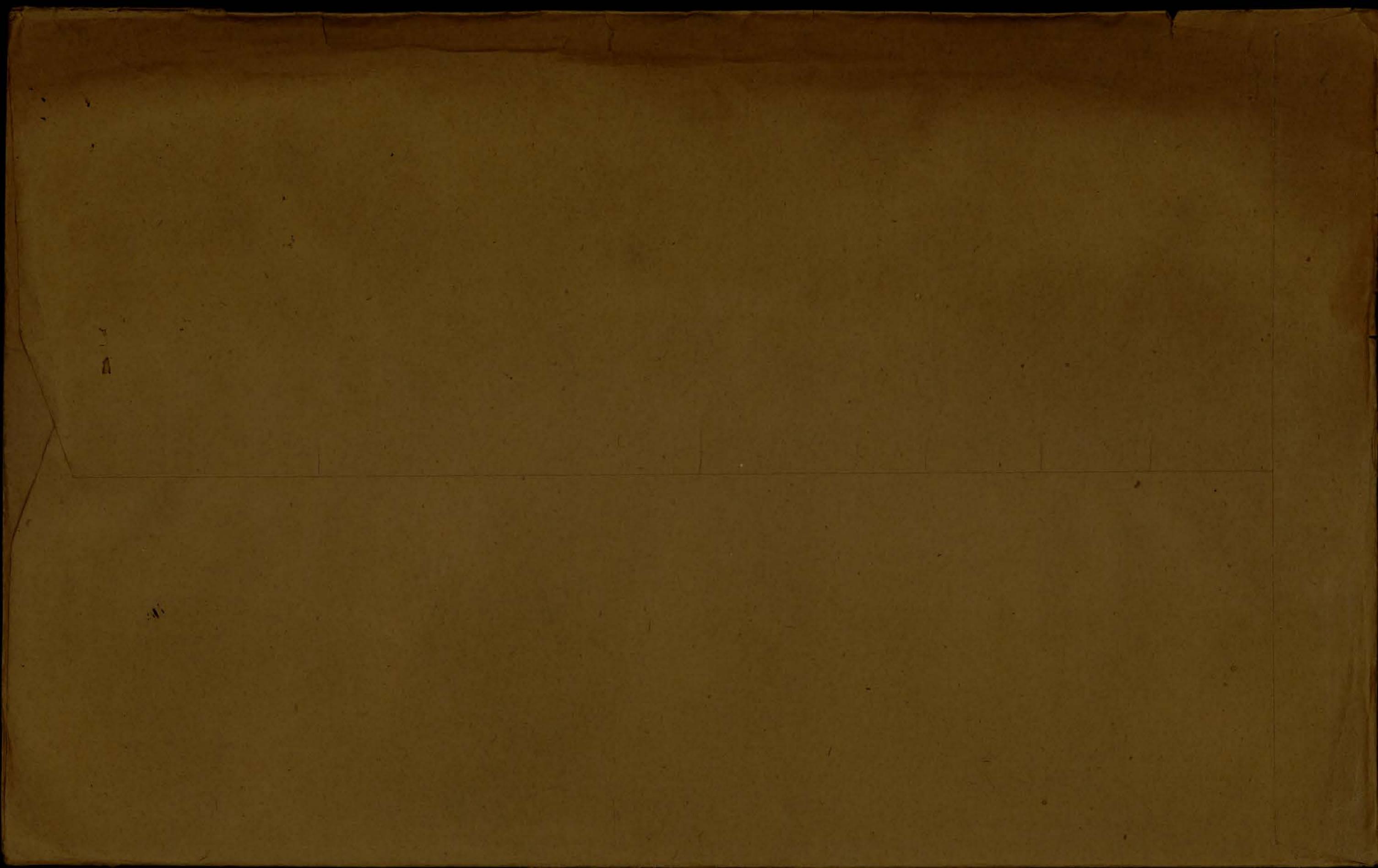
Name CORSANKENNETH, 3 RATE Regt. No. 442634 Rank Ple Corps 54 th Bn. 6.8.2 Lied of Warendo 19/6/

Toha expeddress. I Part I dider I Egowally

R. O. No.....

H. Q. No ...

37548



## ATTESTATION PAPER.

No. 4 4263 4 Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

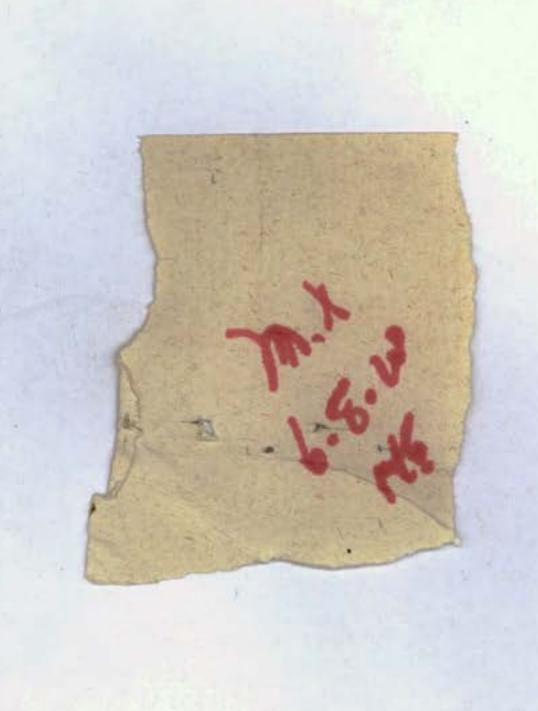
QUESTIONS TO BE PUT	BEFORE ATTESTATION.
1 TUTL-11-	Kenneth braig Corsan
1. What is your name?	Kennech braig Gorsan
2. In what Town, Township or Parish, and in what Country were you born?	montreal P. 2. lean Dr. Douglas Corsan
3. What is the name of your next-of-kin?	Dr Douglas Corsan
4. What is the address of your next-of-kin?	Fernie Bb.
5. What is the date of your birth?	
6. What is your Trade or Calling?	Bollector of Inland Re
7. Are you married?	~~~
8. Are you willing to be vaccinated or re-	
vaccinated?	All ,
9. Do you now belong to the Active Militia?	107th East Kootney Reg
10. Have you over served in any Military Force? If so, state particulars of former Service.	
11. Do you understand the nature and terms of your engagement?	JU)
12. Are you willing to be attested to serve in the)	nex-
CANADIAN OVER-SEAS EXPEDITIONARY FORCE?	R CC
	Signature of Man).
	Classe & Signature of Witness).
Date May 17 1915 Ch	(Signature of Witness)
bear true Allegiance to His Majesty King George the in duty bound honestly and faithfully defend His Ma	MAN ON ATTESTATION.  Compared to make Oath, that I will be faithful and the Fifth, His Heirs and Successors, and that I will as jesty, His Heirs and Successors, in Person, Crown and the party of His Majesty, His Heirs and Successors, help me God.
	(Signature of Recruit)
Date May 17 1915 Chas	(Signature of Witness)
CERTIFICATE O	F MAGISTRATE.
The above questions were then read to the Red I have taken care that he understands each que duly entered as replied to, and the said Recruit has n	estion, and that his answer to each question has been nade and signed the declaration and taken the oath
before me, at Lerman Camp this	encelee day of aggrest 191 5
-with	Saleman (Signature of Justice)
I certify that the above is a true copy of the A	
ma	Wrodward & (Approving Officer)
M. F. W. 23. 150 M.—12-14. H.Q. 1772-89-841	

THE SOUTH LAND PROSE OF ALMOSE

(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).
In vacamalio
mark's and mote
on expran
dian Over-Seas Expeditionary Force.  Seas Expeditionary Force.  Medical Officer.  Medical Officer.
CER COMMANDING UNIT.
CER COMMANDING UNIT.
having been finally approved and of Attestation, and every prescribed particular having
having been finally approved and
1

LIEUT,-COL

54TH O. S. KOOTENAY BATT, C. E. F.



25-0-1469

#### FIELD SERVICE.

REPORT of Death of a Soldier to be forwarded to the War Office with the least possible delay after receipt of notification of death on Army Form B. 213 or Army Form A. 36 or from other official documentary sources.

REGIMENT ) or CORPS   7th Canad	ian Battalion	Squadron, Troop, Battery or Company	
Regtl. No. 442634	Rank Private		PAYMASTER
	N. K.C.		CANADIAN OVER-SEAS BASE
Died Place 8 Stat	ionary Hospital		
By whom made of:  * Specially state if killed in action, or exp	Not stated	No.8 Stationar	Hospital  Id operations or to fatigue, privation, or
Burial Date  By whom reporter	d		
	(a) in Pay Book (Ar	my Book 64) Not	received
State whether he leaves a will or not	(b) in Small Book (		Do
	(c) as a separate do	cument	Do
			hospital, as well as the Pay orwarded to the War Office.

Any information received as to verbal expressions by a deceased soldier of his wishes as to the disposal of his estate should be reported to the War Office as soon as possible.

A duplicate of this Report is to be sent to the Fixed Centre Paymaster at Home, or to the D.F.A.G., Indian Expeditionary Force, or Field Disbursing Officer, as the case may require, together with the deceased's Pay Book (after withdrawal of any will from the latter). If the deceased's Small Book is at the Base, it should be forwarded to the War Office with this Report.

> Signature of Officer in charge Mallochshirt of Section Adjutant-General's Office at the Base

Lieut. For Lt.Col. A.A.G.

Station and Date Rouen 30-6-16.

without and with the witter of the transfer of the transfer with the land of the same of t which would not need to be and the state of the state of the section of the first the state of t beatly into the health action The state of the s in restriction of the section pro-The second secon THE RESIDENCE OF THE PARTY OF T the best of the sales of the sa with a World Will and the state of the state The Bear of White to the first of the telegraph of the party of the pa the state of the s pare to day devalue of the land to the land of the lan winger transfer and a post of the control of the co all the control to the profit live open in the scale of the live o amend with the state of the sta

### Casualty Form—Active Service.

Canadian Record Office, Westminster Hous Regiment or Corps 5411. Batter C. E.F. Ker Braig Millbenk, L.W. Regimental No. 442634 Rank Confel Pie Name Enlisted (a) 17.5.15 Terms of Service (a) Service reckons from (a) Date of appointment! Numerical position on Date of promotion ) roll of N.C.Os. to lance rank to present rank Qualification (i) Extended Re-engaged Report Record of promotions, reductions, transfers, Remarks casualties, etc., during active service, as taken from Army Form B. 213, Place Date reported on Army Form B. 213, Army Form Army Form A. 36, or other From whom A. 36, or in other official documents. The Date official documents. received authority to be quoted in each case. Irans to 7º Dalin Gorman 5.1.16 17-1-16 17-1-16 B213 DE X. 255 24-2-16, 13.213 26.2.16 4-3-16 O.C. 74Bn Returned to Duly Freed 26/2/16 B 213 NCS 269 13/5/16 Revers to ranks 6/1/16. W.O. 121/ Overseas/1360. (a. q.1) aaq. 130 d. 13/1/16. Part II Orders ho 13 8 Staty. 4-6-16. W3034. ad. 5.6-16. Tm R. & 4198. Tree 137/70 Dangerously 9cl. 5 6.16 13-6-16 Worse Cu 19-6-16. File no. 137/305 Q 15-1, 1223. PEJI Orders 19.6.16 (a) In the case of a man who has re-engaged for, or enlisted into Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered.

(b) e.g., Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

		Report	Record of promotions, reductions, transfers, casualties, etc., during active service, as			Remarks
	Date	From whom received .	A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Army Form A. 36, or other official documents.
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2				13 T. S. C. S. C. S. C.		
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						THE RESIDENCE OF THE PARTY OF T
					H. 3 17.	
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		THE STATE	The William Bearing	Mile of the land	1393-0	

R-122.

Rank Sant

Name CORSAN,

Kenneth Craig.

If in perm. Corps, What Unit?

Married or Single Single.

Reg'l No. 442634.

Place and Date of Enlistment Vernon Camp, May 17th, 1915. Place of Birth Montreal, Quebec Prov.

Name and Address, Next-of-Kin Dr. Douglas Corsan,

Fernie, B.C.

Unit 54th to 30th Bn.

Relationship

Assigned Pay Monthly \$

Payable to

Relationship

Separation Allowance \$

Payable to

Relationship N/E R.B. 3

				acronomp	LV/C. IV.D. O
Disc	harge, Date a	nd Place	Reason		Character
Report		Record of promotions, reductions,			su hy
Date	From whom received	transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place	Date	Taken from Official Documents
		Arrived in England.		2 NOV 1	115
5.1.16	0,6,301	Embarked for France yth	Johnsha	5.1.16	R-11 5
15/1/16	0673	Daken en Strength	Trance	6/1/16	" 3
21.3.16.	O.C. 7 Bu.	Reverts to rauks	Hield.		
6.6.16.	y Bu.	N. 8 Stal. Hospital	Winsreun.	5.6K.	C. Y. A380. GSW. Back. Der. Dangerously Dec. C. X. A390. do.
17.6.16.	7 Bus	Condition Worse.	NO 51 51 0 1 16	12.6.16.	C.X. A 390. do.
21. 6.16.	7Bu.	Sied of Wounds	Wineseur	19.6.16	C.Z. 4393. ou.
					+ Pt 1 026-306-16

Rep	ort	Record of promotions, reductions,			DEWARKS	
Date	From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place	Date	Taken from Official Documents	

Name CORSAN. Kenneth Craig. () Reg'l No.442634. Rank If in perm. Corps, | What Unit? Married or Single Single. Place and Date of Enlistment Vernon Camp, May 17th, 1915. Place of Birth Montreal, quebec Prov Name and Address, Next-of-Kin Dr. Douglas Corsan, Fernie, B.C. Relationship Assigned Pay Monthly \$ Payable to Relationship Separation Allowance \$ Payable to Relationship Reason Wird of Wounds Character 6 Discharge, Date and Place 19/6/16. PAY Field Allowance Voucher Other Total Cash Assigned Other Total Remarks, Baiance Credits Credits Payments Charges Casnalties, etc. 30 10 3 1.1.16 31.1.16 31 110 3410 31 10 3 10 3420 7.61 29 29 , 3190 29 . 290 3643 7123 nar 1 31 31 , 31 no 31 , 2 10 11 Sect 31 31 10 3410 31 10 3 10 523 15 70 10 18930 Carried forward to Large Leager sheet Cash Kund in Affectshe Ry

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

R. 149,

Name CORSAN (KENNETHRank PRIVATE CRAIG)

Reg. No. 442634

Unit

7th Battalion Canadians

25-C-1469

Next of Kin Canada

-			UNITED AND DEPOSIT THE AND ADDRESS OF THE PER	THE RESERVE AND DESCRIPTION OF THE PERSON.		
Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
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Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
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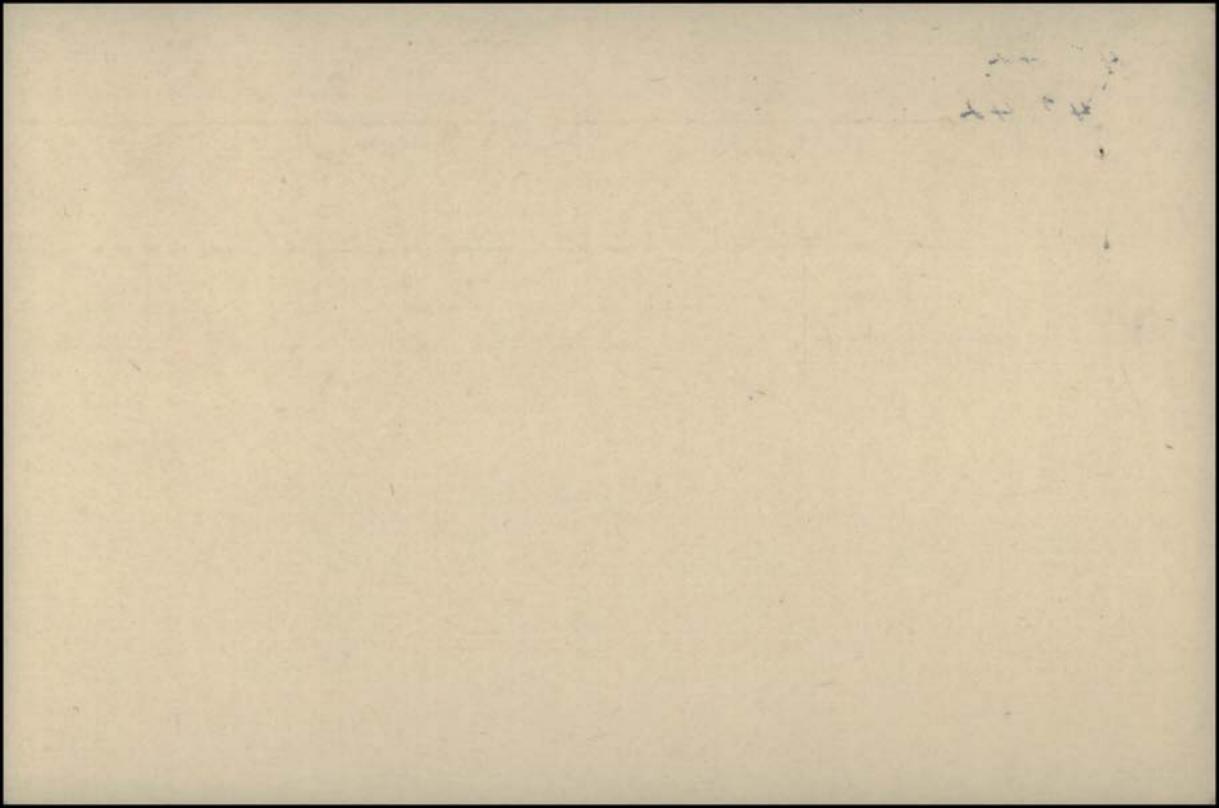
NOQ42634 RANK Cite

NAME Corsan X. C.

J.O.S. 17-5-15 UNIT 54 th Battalion 6. E. 34 Do#17917-5-15 (Dernie Delachment)

M. D. //

PAID	SIG. OR	PROMOTIONS, TRANSFE	RS, DISCHARGES, ETC.
то	REC'T	PARTICULARS	AUTHORITY
1915-			
may 31	4		
7	-	app bpl.	0074926-7-15
7	4	Extra pay 5 days as epl.	any paylist
		Trans fr. "B" loy	n al a .
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ot.	1		No 492/2-8-15-
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			NOV 2 2 1915
	то	TO OR REC'T	TO REC'T PARTICULARS  1915  May 31 L  Eight pay 5 days as ept.  Stans J. "B" by  prom. confirmed 20-7-15  Reverts t Ranks 5-8-15  Juns. I "L" by 2nd 2ft 6.8-15



NAME lorsau Kenneth braig REGT'L. NO. 442634 RANK AND CORPS Ptg. 7th. Bu. Form. 54th. 2nd. 76

CABLE

NO. DATE

NO. DATE Daugerously ill at 710.8 Stationery Hosp Winneterif on Jaine 5th. M.7443 5-6-16. 20-6-16 Died Dwounds at no. 8 Stationary Hosp. Winnerenffune 19th. 1916 2090 a 30.6:16 Died of Wounds Rec? In action June 19 1/16. M. F. W. 42-50m.-10-15. L. L. Job 86907--M. & D. 16965. H. Q. 1772-39-893.

LIST No.		HOSPITAL		DATE OF ADMISSION	REMARKS	
a380.	208SZā	Wimere	us	5-6-16	95. W. Back	
	4 4 4		"	12-6-16.	Had Wounds.	The L
					Shlds	
	A 37 Con 19					
					9 4	
			6	•		

PRNAME. Corsan (332-102-6)	CARD NO.
CHRISTIAN NAMES Kenneth Craig.	12
REGL. NO. 442634 RANK 6/2!	75
UNIT 5-4 ch. (2nd. R.D.) FORMER CORPS 107 ch. East. Kooteney Regt.	Bn.
FORMER CORPS 107 th. East. Kooteney Regt.	*
NEXT OF KIN.	CHANGE OF ADDRESS
NAMES IN FULL Corsan, Dr. Douglas.	
RELATIONSHIP TO SOLDIER	
ADDRESS Fernie B.C.	
also notify: N.P. n. Chesley, 75 barling ave, with 332-102-6)	
with 332-102-6) Ottawa, Ont	
PLACE OF ATTESTATION Vernon Camp, B. C. DATE	lug. 17 th 1915-
US. 23-10-15-247	0
L. D. 94504. M. & D. 6512. M. F. W. 22. 250	м.—2-16. H. Q. 1772-39-339.

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

Corsan, K.C. Pte. 442634 7th Bn. 332-102-6,C

Medals & Slig for 14-15 Star Pt. ) the Bullette Corsan,

Mecorations, (Mother) Mrs. Charlotte Corsan,

Fernie, B.C.

P. & S.

Memorial

Memorial

Memorial Cross.

(Mother) Same as above.

Plague Desp. 2-8-20 mm 2 45/43

Plague Desp. 2-8-20 mm 2 18-116

SHE

noted no o list 14 8 un

Mowbrey, W.N. Pte. #105853

52nd Bn.

88,

Date of Service Remarks Latest Address. Roll No ... 200m.-6-21.M.

AND HOW LONG	DATE AND PLACE OF OR
DISEASE OR INJURY	
OPERATIONS	······································
RESULT OF OPERATIONS	TITO
(A) DATE OF ARRIVAL AT HOSPITAL AS AN AD	MISSION
(B) AS A TRANSFER (STATE WHERE FROM)	2 7
DATE OF DISCHARGE TO UNIT	IN CA
DATE OF DISCHARGE AS AN INVALID	[ ]
DATE OF DEATH	20
DATE OF TRANSFER (STATE WHERE TO)	100 100
OTHER INDEPENDENT CONDITIONS DIAGNOSE	16 1 3
NEXT OF KIN	ADDRESS
***************************************	HOSPITAL
M. F. W. 142.  1772-39-1171.  50m2-19.	衆 CROSS C

Surname	Christian Name of	r Names	Reg. No.
Corsan	K.	C.	442634
Rank	Jnit A	Co.	Troop Batty.
Hospital	1 in Ru		Data of Adminstra
Hospital			Date of Admission
Transferred 40 8	? Slat hum	meren	Hosp. 5, 6, 16
			Hosp.
			Hosp.
			Hosp.
			aannan aan 20 maan ah
Diagnosis C. W.	Back. (	Ri: Shed	ur)
(1) Later Diagnosis (if change	ed) (Ba	uq. Ill)	
(2)		0	
(3)			
Additional Diagnosis: if n	nore than one state pr	esent	9.6.16
N lear of	bound	9. "	4.0.10
DISPOSITION			Date
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		A.M.D. 2	DEPT.
	Dala a		
	Don. o	Lu, d.m.o.	O.M.F.C. London.
***************************************			

RR

#### EPITOME OF HOSPITAL TREATMENT.

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

ORIGINAL mo cand fight

## MEDICAL HISTORY SHEET.

Surname &	ouen	Chr	istian	$Name_{-}$	Tenne	th Gran	<b>J</b>
Examined on 2	3 day of June	1915		oved by	Nacu	eamb	, M.O
Birthplace { City or T	Cown Instual	e.	Date	Fit or Unfit	EVANING	D FOR RE-ENGAGE	
Apparent age	29 yrs 6 mo			Unit	***********		
	Collector of Inla						M,O
	Feet 91/2						М.О
Weight		Lbs.		************			M.O
Chest measurement							
	Maximum expansion					***************************************	
	***************************************				ATTICON		М,О
	A Pight		INDER STRUMBER			**************************************	M.O
Vaccination Marks	Arm Right. Number 2	Dette A	Date	Result		VACCINATIONS.	
	t		7/7/10	Neg	Dra		M.O
(a) Marks indicatin	g congenital peculiarities	or previous					M.O
disease							M.O
			Date	Result	ANTI-TYP	HOID INOCULATION	s, ETC.
(b) Slight defects b	ut not sufficient to cau	se rejection	7/7/15	Co	Anr		MO
ETTION OF THE PROPERTY OF THE			17/7/10	Con	prat	•	м.о
*****************	***************************************		26/1/4	Con	SIM	-	M.O
			74/2		0		М.О
Enlisted on 17	day of they		1913	5at	Vem	n Rb	************
	Corps.	REGT'L NUMB	ER.	HABITS	5.	DATE.	
Joined on enlistment	54 Batt 8 8 7	442630	+			17/5/15	
Transferred to	C. Coy						
EXA	AMINED OR DISC	HARGED	BY A	MED	ICAL BO	ARD.	
STATION.	DATE		DISEASE.		14.	RESULT.	

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

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Jett. 29/12/16. V				
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PAY PAY WITHHELD AVAILABLE REMARKS	HER TOTAL BALANCE	CASH PAYMENTS  ASSIGNED OTHE	OTHER TOTAL	PAY FIELD ALLOWANCE
		ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)		
	20.6.16	ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)		
THORITY BO 26 30 Mile	19/6/16 REASON AND AUTI	DISCHARGE DATE AND PLACE Red of Lawrence		
RELATIONSHIP TO DONTINGE		PAYABLE TO	NAME OF HOSPITAL	PAYABLE TO
2 HOUR 3 1916 2	m	ASSIGNED PAY MONTHLY \$ DATE EFFECTIVE	ADMITTED DISCHARGED OR	EFFECTIVE (DATE)
RELATIONSHIP SE OFFICE, N. E. BRANCE		PAYABLE TO	ADMISSIONS TO HOSPITAL &	RELATIONSHIP OF NEXT OF KIN
	m	ASSIGNED PAY MONTHLY \$ MILL DATE EFFECTIVE		
				NAME AND ADDRESS OF NEXT OF KIN
DATE AUTHORITY	TRANSFERRED TO	DATE OF ATTESTATION May 17/19/0		RELATIONSHIP OF NEXT OF KIN
AUTHORIT	TRANSFERRED TO	· PLACE OF ATTESTATION Remon.		
DATE AUTHORITY AUTHORITY	TRANSFERRED TO	PERMANENT FORCE ALLOWANCES	Red of wounds 19616 Bosh Fother	NAME AND ADDRESS OF NEXT OF KIN Dr Douglas Cornan
a Renneth Crarg.	NAME Corran	REGIL NO. 442634 RANK ORTE.	PARTICULARS EFFECTIVE AUTHORITY	MARRIED OR SINGLE
		100	CASUALTIES, PROMOTIONS, &c.	

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		100		Brief details, and Signature		
7.7.15	17.7.15	26.8.15	Typh	noid Inoc;	Pos -M.H. J.	4. 74	
	7.7.15			oc	Neg "		
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	certif		Та	ble IV.—Se	ervice Table.		
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DUPLICATE

442634 G.C.

P.T.O.

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, 1784 to be used for Special Reserve recruits and Special Reserve recruits and Special

Surname_ CORSON		Chri	istian	$Name_{-}$	Ker	neth	Craig	
	TAB	LE I.—GE	NER.	AL TA	BLE.			
Birthplace Parish	Mont	real		_ Cour	nty	Qu	tebec	-
	(on	23rd	day	0."	Jı	ine		_191
Examined	100+	Vermon	B	C			*	
Declared Age				440			uays.	
Trade or occupation				a liber to secure				
Height	-	-	5	feet		9분		
Weight	-	-			*	100	lbs.	
Chest Girth when fully Expanded	-				-	36	inches.	
Measurement Range of Expansion	-		-5 1		-	3	inches.	
Physical Development	-			-				
Vaccination Arm				Right			Left	
Marks Number							2	
When Vaccinated	>							
	(R.E	_V==		3 -	1			
Vision	L.E	_V= _V=					A FIELD OF	
(a) Marks indicating con-	$(a)$ _		+	-		-		
genital peculiarities or previous disease	1-	-	-	-	1			
provide discussion		-	#	+				
(b) Slight defects but not	(b)		-	-	1			
sufficient to cause rejection	-		-	-				
		75 77	. 7=	20	auic	010-		
Approved by (Signature)	-	M.H.	3		the same	uou.		
(Rank)	1		Capt	A.M.	0.		Medical O	fficer
	-		-	-1				greer.
Enlisted	{at	Veri	non	B.C.				-
	(on	. 17th	day o	f	M	ау		_191 5
Joined on Enlistment			Corps.			a secondario	Re a. No.	
JOINER ON BITHSUMENT		54th Bat	tt C.	E.F?	- 1	4	142634	
Transferred to	-	C Cc	DY	7	1			
	<u></u>		-	1				
Became non-effective by				1				
dical History Sheet has been compared v	vith the (	Correct	1	9	1			
Attestation Paper, and entries made in	19th hav	e bear	day o	f	*			_191
rom the Attestation Paper. (Signature)_			-		-		*	
(Signature)_ (Rank)	1	1		1	*	1		

B 178

(4887.) W. 13090/4672 200mm dalige & Aeding Co., Ltd.
Canadian Contingent.

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

Name of Hospital	Admit	ted to I	Iospita	Dis	charged Hospit	01	Disease	Number of days	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		9/1s/Ci
Name of Hospital	Day	Month	Year	Day	Mont	Year	1	Hosp	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 sequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature	of Medical Officer
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