

Original

No. 204353

ATTESTATION PAPER.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION. (ANSWERS.)

- 1. What is your surname?..... **Palmer**
- 1a. What are your Christian names?..... **Edmund**
- 1b. What is your present address?..... **Saskatoon Sask**
- 2. In what Town, Township or Parish, and in what Country were you born?..... **Newcastle-on-Tyne England**
- 3. What is the name of your next-of-kin?..... **Mary Ann Palmer**
- 4. What is the address of your next-of-kin?..... **36 Dilston Rd Newcastle-on-Tyne**
- 4a. What is the relationship of your next-of-kin?..... **Mother England**
- 5. What is the date of your birth?..... **January 18th 1893**
- 6. What is your Trade or Calling?..... **Farmer 26**
- 7. Are you married?..... **No**
- 8. Are you willing to be vaccinated or re-vaccinated and inoculated?..... **Yes**
- 9. Do you now belong to the Active Militia?..... **No**
- 10. Have you ever served in any Military Force?..... **No**
If so, state particulars of former Service.
- 11. Do you understand the nature and terms of your engagement?..... **Yes**
- 12. Are you willing to be attested to serve in the } **Yes**
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? }

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

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

Edmund Palmer (Signature of Recruit)

Date **March 1st** 191**6**. *W. J. Boden* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, **Edmund Palmer**, 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.

Edmund Palmer (Signature of Recruit)

Date **March 1st** 191**6**. *W. J. Boden* (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 **Saskatoon** this **1st** day of **March** 191**6**.

W. J. Boden (Signature of Justice)

Description of Edmund Palmer on Enlistment.

Apparent Age...**23**.....years.....**I**.....months.
 (To be determined according to the instructions given in the Regulations for Army Medical Services.)

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

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

Height.....**5**.....ft.....**4 1/2**.....ins.

Chest measurement { Girth when fully expanded.....**35**.....ins.
 Range of expansion.....**2**.....ins.

Complexion.....**Fair**

Eyes.....**Blue**

Hair.....**Fair**

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

CERTIFICATE OF MEDICAL EXAMINATION.

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

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

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

Date.....**March 1st**.....19**16**

Place.....**Saskatoon**

D. J. Bancroft
 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.

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

[Signature].....(Signature of Officer)

Date.....**March 1st**.....19**16**

REGIMENTAL DOCUMENTS

1. m
25-9-19

NAME **PALMER** *Edmund*

REGT. NO. *284553* UNIT *13th Bro* H. Q. FILE NO.

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)	M	<i>[Signature]</i>			DEATH Category
CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					
TRAINING HISTORY SHEET (M.F.W. 113)					
1 FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
3 MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE Category
DENTAL HISTORY SHEET (M.F.B. 465)					
2 MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					<i>Demob.</i>
MEDICAL EXAMINATION (M.F.W. 129)					
1 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)					
1 PROCEEDINGS ON DISCHARGE (M.F.W. 213 or A.F.B. 268)					
PARTICULARS OF CHARACTER (A.F.W. 3226)					
1 COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
2 <i>Misc</i>					
3 <i>A.F. 41237</i>					
1 <i>Form of bill</i>					
1 <i>Bill</i>					
1 <i>Card</i>					

S

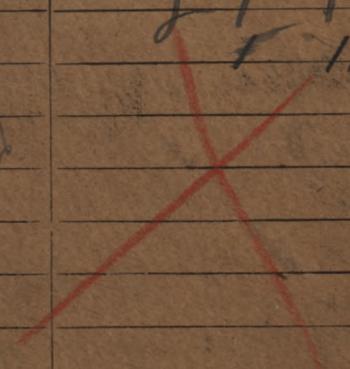
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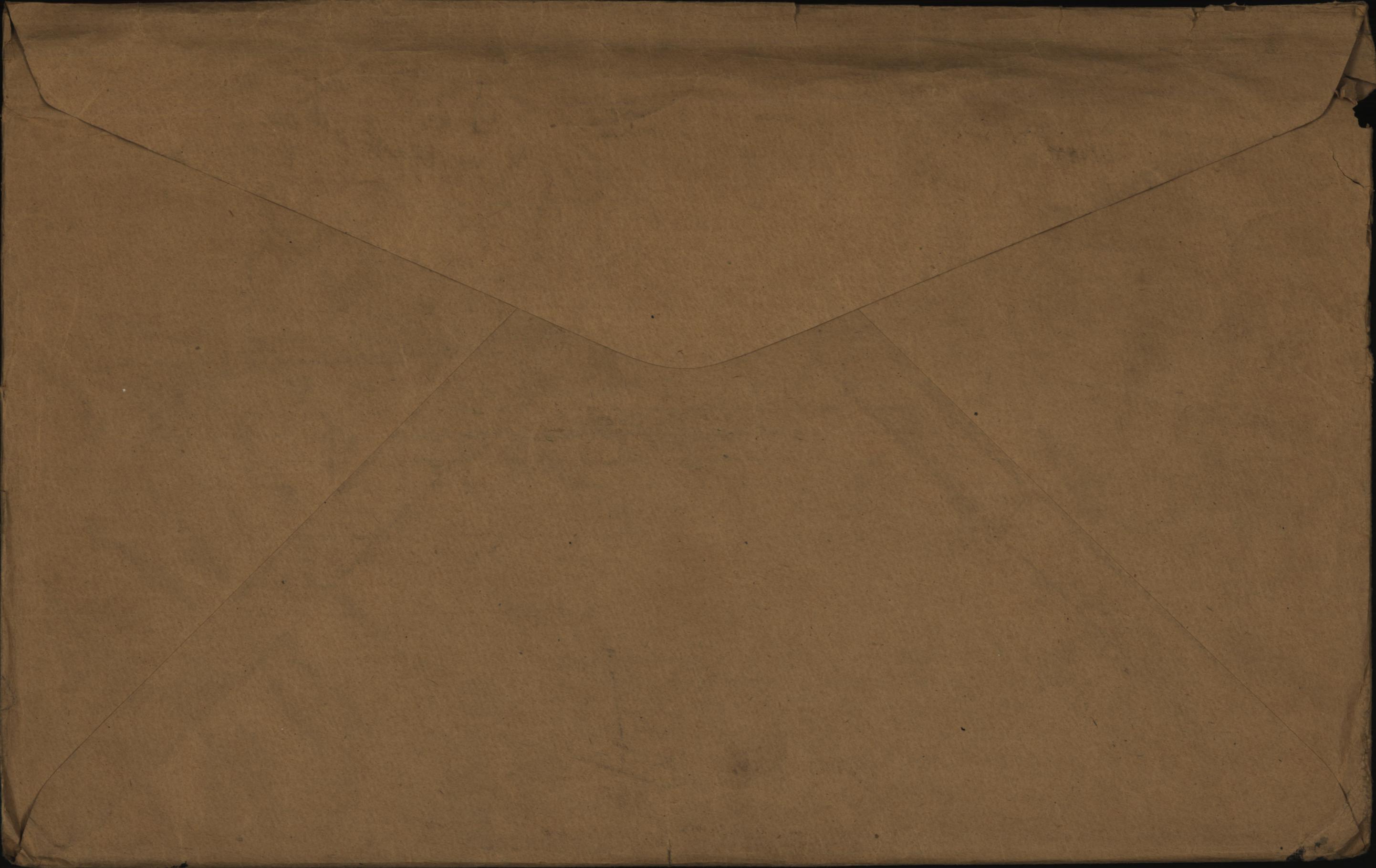
M

1226

H

2
27-10
27-10
F 11





13

Small
A

Number

204353

Rank

Pte.

Surname

PALMER

Christian Name

Edmund

Units

3rd Gen. Cav. Inf. France

Theatre of War

Date of Service

13-11-16

(D)

Remarks

Mother - Mrs Mary Palmer

36 Dilston Road

Latest Address

Newcastle on Tyne

12^{1/2} England

~~G.P.O.~~

~~Sackaton Beck.~~

Remarks

Date

Roll No.

"B Page 7795"

Pt. 2 Order No.

DEFI FEB 12 1924
RECN. NO. 1836

Remarks

Date of Medical Boards

Date and place of enlistment

Character on discharge

Date

Regtl. No. Rank
Fyle Depot
M. or S. Age Religion
Rel. H.Q.

S.O. 23-8-19. Demolition. m. D#6.

H.Q. 649-P-22324

PALMER, E. ^{Edmund} No. 204353 Pte. ^{13th Bn.}

M & D. mother Mrs. Mary A. Palmer,

(M)

36 Dilston Rd., Newcastle-on-Tyne
England.

P & S.

"

"

"

Memorial X

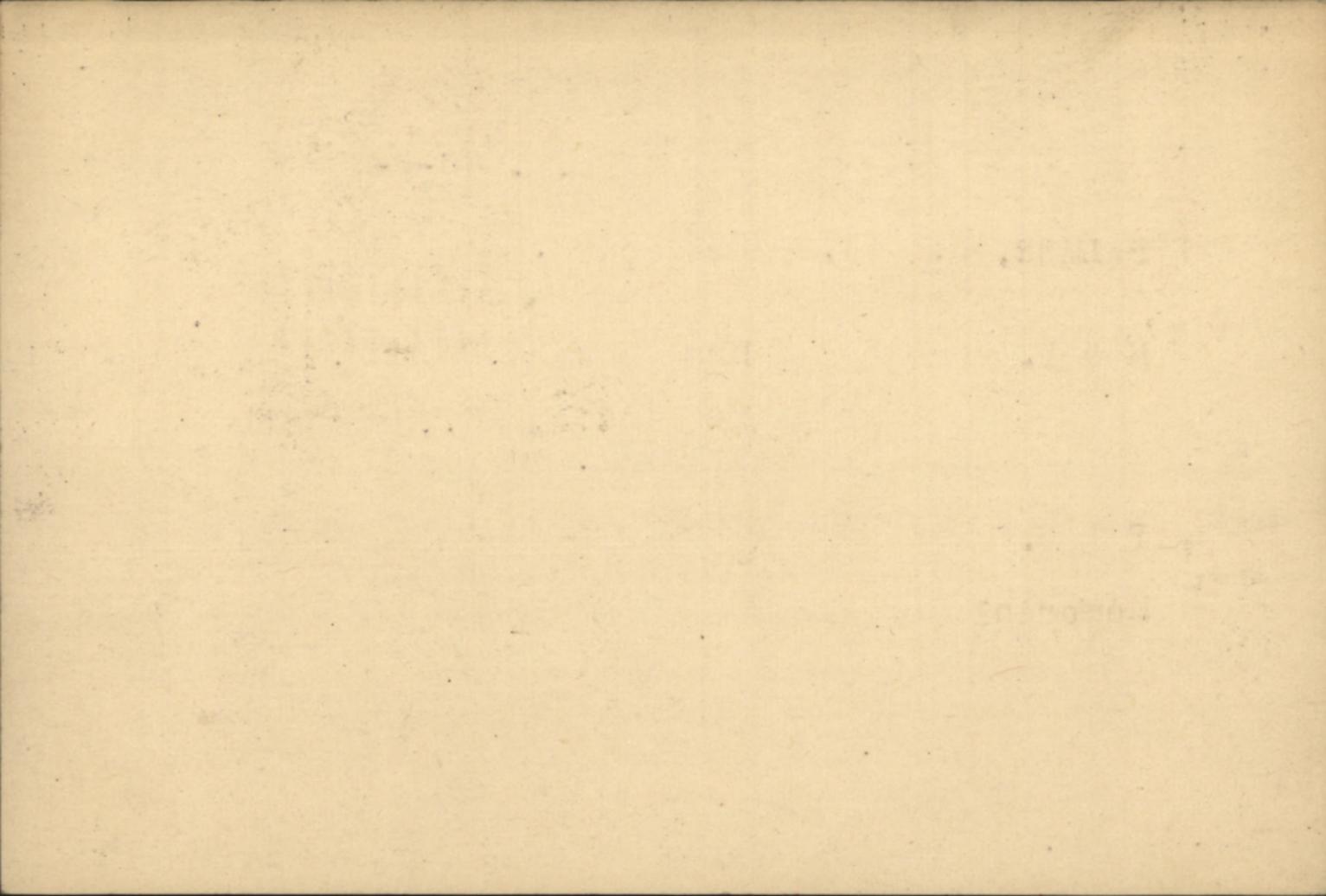
"

"

"

Gold

not eligible for 1914-15 star.
Eligible for D.M.
Eligible for B.W.M.



Edmund

Name *PALMER*

Rank

Pte

Reg. No. *204353*

Unit ~~*13 Bn BRD*~~

Next of Kin *Mary Ann Palmer 36. Telston R.^d Newcastle on Tyne*

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
<i>20-12-17</i>	<i>1 North 9th Newcastle</i>	<i>Newcastle</i>	<i>not stated</i>	<i>1399</i>		<i>8844</i>
	<i>Whitson lease from France</i>					
<i>21-1-17</i>	<i>13 Bn BRD</i>	<i>Newcastle</i>	<i>J. C. Key</i>	<i>13102</i>		<i>9410</i>
<i>16-1-18</i>	<i>13 Bn BRD</i>	<i>Bearwood</i>	<i>J. C. Key</i>	<i>13117</i>		<i>10600</i>
<i>1-2-18</i>	<i>Discharged</i>		<i>do</i>	<i>13142</i>		<i>3152</i>
<i>FT.</i>						
<i>4-6-19</i>	<i>Can Spec. Hosp</i>	<i>Witley</i>	<i>7900</i>	<i>C537</i>		<i>11112</i>
<i>20-6-19</i>	<i>Discharged</i>	<i>do</i>	<i>do</i>	<i>C549</i>		<i>4446</i>
<i>Ref. C537, C549</i>	<i>Rept 7900 a/c'd to 42"</i>			<i>C550</i>		<i>9338</i>

Date

Movement

Place

Casualty

List
No.Notified
N/K O.

W.O. List

11/15/19

A. & D.
CARD

DI

Can: Conval: Hospital..... HOSPITAL.

AT

Bear Wood

A. & D. No. UK 6244 PL. OF ACTION.....RANK elo REG No. 204355 UNIT 13th Batt C.P. SICK OR WOUNDEDNAME Palmer E AGE 24 RELIGION P.PLACE IN HOSPITAL 206 GDIAGNOSIS I CT Left legADMITTED 15 JAN 1918 FROM 1st Lt. New CastleDISCHARGED 1 FEB 1918 TO 2nd. C.C.D. Bramshott

TRANSFERRED

SERVICE AT HOME 23/12 IN FIELD ✓RESULTS Very nearly fit D.I 21/1/18.

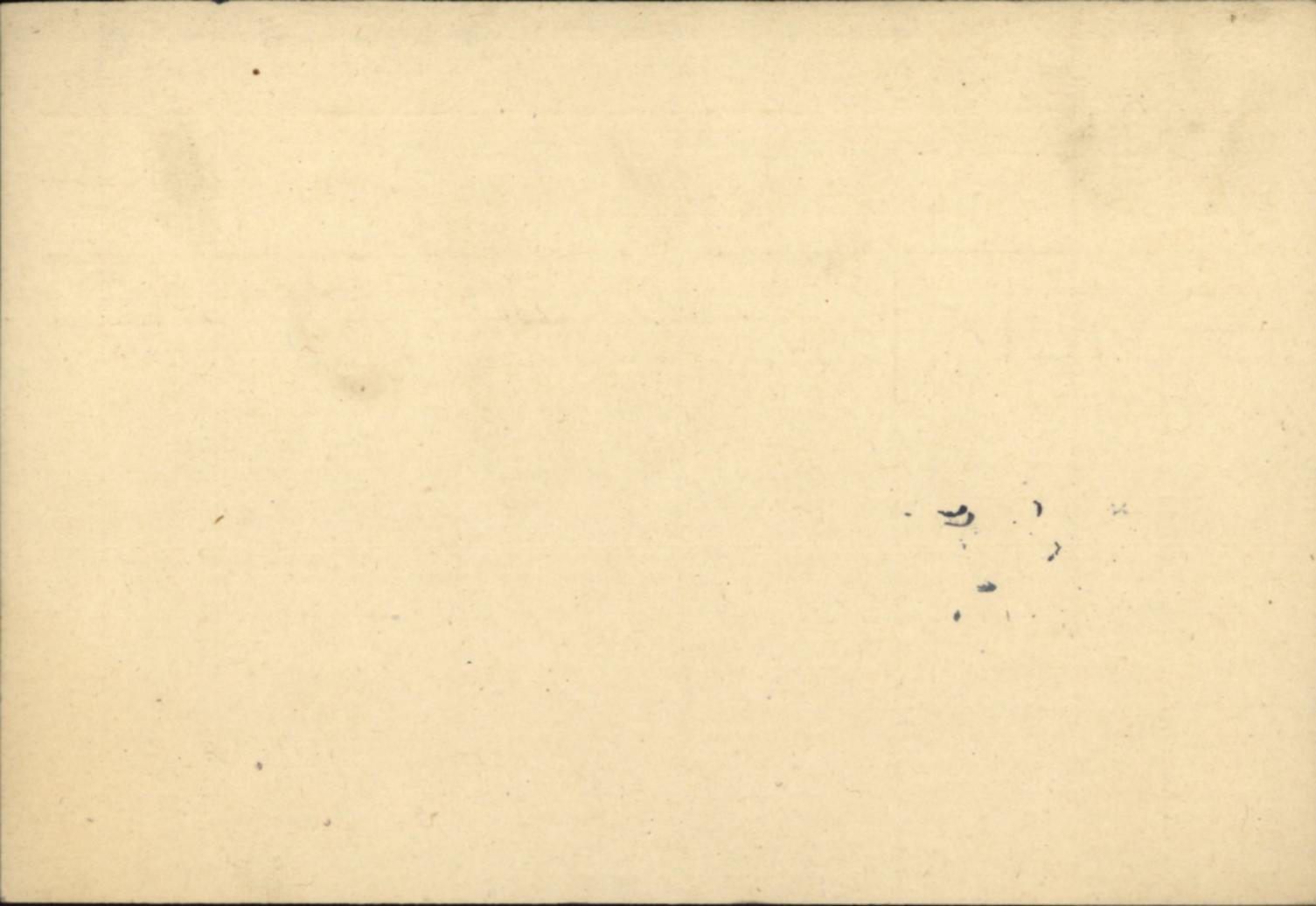
(See Document Card for M.H. Sheet and other Documents.)

No. *204353* RANK *Pte*NAME *Palmer E.*T. O. S. *2-3-16*
*Do 70/2-3-16*UNIT *96th Battalion (Canadian Highlanders)*M. D. *10*

PAID		SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
FROM	TO		PARTICULARS	AUTHORITY
<i>1916</i> <i>Mar 2</i>	<i>1916</i> <i>Mar 31</i>	<i>✓</i>		
	<i>Apr.</i>	<i>✓</i>		
	<i>May.</i>	<i>✓</i>		
	<i>June.</i>	<i>✓</i>		
	<i>July.</i>	<i>✓</i>		
	<i>Aug.</i>	<i>✓</i>		
	<i>Sept.</i>	<i>✓</i>		

UNIT SAILED

SEP 26 1916



NAME

Palmer, Edmund

S.O.S. Died (Demol) 31-8-1916
D0305 91-11-19-60

S. O. S. 1115 1115
204 35 3
Cancelled - 15/8/19
Batt.

RANK & NO.

Pte

D063 97-7-1916

CORPS

96th

D0194 15/8/19 C.C.C. Witley

Batt.

ENLISTMENT, PLACE

Saskatoon, Sask

DATE

Mar 1st. 1916

FORMER CORPS

Nil

Died 5.7.20 H-7/20
SCR 1414-5-18 7/20

COUNTRY OF BIRTH

England, Newcastle-on-Tyne

NEXT OF KIN

Palmer, Mrs. Mary Ann. (Mother.)

ADDRESS OF NEXT OF KIN

36 Dilston Rd., Newcastle-on-Tyne
Eng

DISCHARGE, PLACE

DATE

Sailed from Halifax

26/9/16

Per S.S. Laconia

R/C 23-8-19

398 21 Pte

M. F. W. 22-50m.-9-15.
H. Q. 1772-39-839.

MARRIED

SINGLE

Yes.

WIDOWER

TRADE OR CALLING

Farmer

RELIGION

Presbyterian.

DESCRIPTION.

APPARENT AGE

23 YEARS

1 MONTHS

HEIGHT

5 FEET

4 1/4 INCHES

CHEST MEASUREMENT

35 INCHES

EXPANSION

2

INCHES

COMPLEXION

Fair

EYES

Blue

HAIR

Fair

DISTINGUISHING MARKS

Nil.

MEDICAL EXAMINATION.

PLACE

Saskatoon, Sask

DATE

Mar. 1st. 1916.

REMARKS:

SURNAME

CHRISTIAN NAME OR NAMES

REG. No.

PALMER.

F.

204353.

RANK
Pte.

UNIT

Co. TROOP BATTY.
1st. Que. 13 (Dep.)

HOSPITAL

DATE OF ADMISSION

1st. N.G.H. New Castle.

20-12-17.

1. *Law. Conv. Hosp. Bearwood* HOSP. *16.1.18*
C. Sp. Witley HOSP. *4-6-19*

2. HOSP.

3. HOSP.

4. HOSP.

DIAGNOSIS n.s. "Q"

1. *I. C. T. L. leg*
~~n.g.D. "Q"~~ V.D.S.
7/5/18

2. *Misc. 1. 2. 18.*
Disc. 20-6-19 DATE

DISPOSITION

C.I. 27-12-17. B97. Adm. whilst on leave from

19.1.18 B117. France.

18. 2.18 B142.

10-6-19 C5370

24-6-19 C5490

25-6-19 C5520 *Note Ref C5-37 change Diag.*

A.M.D. 2 DEPT.

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

EPITOME OF HOSPITAL TREATMENT

HOSPITAL

ADM.

1.

2.

3.

4.

5.

6.

7.

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

M. F. W. 54.
150M. 10-15.
H.Q. 1772-39-920.

Casualty Form—Active Service.

Temporary

Unit, Regiment or Corps *13th Bn.*

Regimental No. *204353* Rank *Pte.* Name *Palmer-Edmund*

Enlisted (a) *1-3-16* Terms of Service (a) *2 of W.* Service reckons from (a) *1-3-16*

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

Extended _____ Re-engaged _____ Qualification (b) _____

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				
<i>2-2-18</i>	<i>2nd C.C.D.</i>	<i>Attached to 2nd C.C.D. Bramshott 1-2-18</i>	<i>Bramshott</i>	<i>1-2-18</i>	<i>2028</i>
<i>H. MAY 1918</i>	<i>OG, 2nd C.C.D.</i>	<i>Ceases to be attached to 2nd C.C.D. on return to G.R.A. Res. Bn.</i>	<i>Bramshott</i>	<i>3 MAY 1918</i>	<i>Pt. 2 D. O. No. 106 D. Simon List for OG, 2nd C.C.D.</i>
<i>H. 5. 18</i>	<i>TAKEN ON STRENGTH</i>	<i>Quebec Reg'l. Depot,</i>	<i>B. Shott</i>	<i>Pt. II. D.O. 256.</i>	<i>20/12/14.</i>
<i>H. 5. 18</i>	<i>Que. Reg'l. Depot. ON COMMAND TO</i>	<i>23rd Res Bn</i>	<i>B. Shott</i>	<i>Pt. II. D.O.</i>	<i>4/5/18.</i>
<i>4/5/18</i>	<i>23rd Res Bn</i>	<i>Attached from 1st G.R.A.</i>	<i>B. Shott</i>	<i>4/5/18</i>	<i>Gen. Sackett QUEBEC REG'L. DEPOT.</i>
<i>22 5 18</i>	<i>Que. Reg'l. Depot. ON COMMAND TO</i>	<i>Mychette Ranges</i>	<i>B. Shott</i>	<i>Pt. II. D.O. 124.</i>	<i>22 5 18.</i>
				<i>Cancelled.</i>	

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

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

Casualty Form—Active Service.

Regiment or Corps *46th Overseas Battalion Can High*

Rank *Pte* Surname *Palmer* Christian Name *Edmund*

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

Enlisted (a) *1/3/16* Terms of Service (a) *3 years* Service reckons from (a) *1/3/16*

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

Extended {.....} Re-engaged {.....} Qualification (b) *Farmer*
or Corps Trade and Rate.....

Signature of Officer.....

-P468

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...			
<i>4/3/18</i>	<i>28th CAN.</i>	TAKEN ON STRENGTH	<i>B'kath</i>	<i>3/5/18</i>	<i>PRO D 124</i>
<i>4/3/18</i>	<i>23rd Res Bn</i>	<i>attached to this unit</i>	<i>B'kath</i>	<i>3/5/18</i>	<i>PRO D 124</i>
<i>22/5/18</i>	<i>do</i>	<i>Attachment ceases on return to P.R.D.</i>	<i>do</i>	<i>22/5/18</i>	<i>PRO D 142</i>
<i>25.5.18</i>	<i>ceases to be shown on command to 23rd Res Bn</i>	<i>is detailed to 29th Coy.</i>	<i>Branchett</i>	<i>22.5.18</i>	<i>PRO D 126</i>
<i>30.5.18</i>	<i>One Reg'l Depot ON COMMAND TO Segregation Camp, French Bordo</i>	<i>Cancelled.</i>		<i>2/35-1-6-18</i>	<i>PRO D 126</i>

QUEBEC REG'T DEPT

(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.

204353

Palmer E.

Date	Report From whom received	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
29 JUN 1918	L. R. O.	Granted leave from 25-6-18 to 4-7-18 with free transportation warrant no. 237064/165	B. Shott	28-6-18	D.O. 157
21-12-18	do	Leave 20-12-18 to 27-12-18 By War 662706/7	do	20-12-18	D.O. 309
9-5-19	do	Leave 9-5-19 to 15-5-19	Ripon	9-5-19	D.O. 107
16-5-19	do	Extension to 17-5-19	Ripon	15-5-19	D.O. 113

S.O.S. O.M.F.C. TO O.E.F.

PT. II ORDER No. 83

DATED 17/8/19

M. P. W. Lt.

OFFICER I/O RECORDS;
"P" WING C.C.G. WITLEY

Embark S.S. BELGIO

Liverpool 13.3.19

Lieut. A. A. 16

J. Stewart

2-9-19 A/S.

T. O. S. No. 6 D. D. from

16-8-19

and posted

Sup. 13/11/23

8-19

10.0-245

2-9-19

C.O.S. on 13/11/23

13/11/23

A. A. 16

Lieut.

" 245

Officer I/O Records No. 6 D. D.

SERVICE AND CASUALTY FORM (Part I).

Army Form B.103-I.
Part I.

Army Form B. 103 (II.) to be gummed on here, if required.

Nothing to be written in this margin.

Forms/B. 103/8

HWV(R1460)

3/19

100,000

P2151

W10416

(6 28 19)

(1)*Substantive rank *Acting rank *(To be entered in pencil to facilitate alteration.) (4) Surname <i>Palmer Edward</i> (5) Christian Names (6) Army Form, number of, Attestation } Form or Record of Service paper } (7) Whether of British or of Alien origin (<i>vide</i> A.C.I. 578 of 1918) (8) Date of birth as stated on enlistment (9) (a)	(2) Regiment or Corps <div style="font-size: 2em; text-align: center;"><i>96th Batta.</i></div>	(3) Regtl. No. <div style="font-size: 2em; text-align: center;"><i>204950</i></div>
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(10) Enlistment (b) (12) Service reckons from (date) (14) Any subsequent variations (if any) } of conditions of service }	(11) Engagement (e) (13) Special conditions (if any) of enlistment (d) (Authority) _____ (date) _____	Initials and Rank of an Officer. _____
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(15) Category	Date	Medical Authority	Initials and Rank of an Officer	(16) Record of Occupation in Civil life (<i>vide</i> Army Order 93 of 1917)
				Industrial Group No.
				Trade or Calling
				Married or Single
				Particulars of Trade Test
				Occupation Cards despatched on (date)
				Second Occupation Card despatched on (date)

(17) Next of Kin (18) Demobilizer (f) _____ (Place) _____ (19) Pivotal-man (f) _____ (Date) _____ (20) Qualifications (g) _____ (22) Extended { _____	or (21) Corps trade and rate (23) Re-engaged { _____ (24) Miscellaneous entries:—	(Signature of Posting Officer) _____
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NOTES.—(a) Here enter particulars of any subsequent claim as to actual age after verification by birth certificate (*vide* A.C.I. 470 of 1918). (b) Whether direct or voluntary enlistment, or called up under the Military Service Acts. (c) Whether for specified term of years or for duration of the war. (d) Whether "for Home Service only," or "not to be transferred without the soldier's consent," &c. (e) If to be retained on Home Service, period, if specified, to be stated, also authority, and on what grounds. (f) Required for demobilization purposes. (g) Signaller, Shoing-smith, &c.

(A) Report		(B)	(C)	(D)	(E)	(F)
Date	From whom received	Authority of Part II. of Orders	Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named	Place of casualty	Date of promotion, reduction, reversion, casualty, &c.	Remarks, and initials and rank of an officer
			Arrived in England, <i>Whiconia</i> 6/10/16			
10-10-16	96 Bn	D.O. 279	SOS to 92nd Bn	Sandling	8/10/16	
20-10-16	42 Bn	D.O. 266	SOS from 96th Bn	Sandling	8-10-16	
13-11-16	92 Bn	D.O. 290	SOS to 19th Battalion	Sandling	12-11-16	
27-11-16	13 Bn	D.O. 73	SOS from England	Sandling	13-11-16	
28-12-17	GRN	D.O. 124	SOS to Aldermaston		20-12-17	GRN D.O. 253 D 26-12-17
27-3-19	GRN	D.O. 121	SOS to 2 Wing C.B.	Witley	26-3-19	

Power Capt
Ford Lieut Col 4th Record 1916

Nothing to be written in this margin.

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

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

250M.—1-16.
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps 46TH. OVERSEAS BATTALION (CANADIAN HIGHLANDERS)
 Regimental No. 204353 Rank Pte Name Edmund Palmer
 Enlisted (a) 1/3/16 Terms of Service (a) 6 2 7 Def War Service reckons from (a) 1/3/16
 Date of promotion to present rank } Date of appointment to lance rank } Numerical position on roll of N. C. Os. }
 Extended _____ Re-engaged _____ Qualification (b) Farmers

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
		Embarked Halifax arrived Liverpool		27.9.16 6.10.16	} 2nd Battalion Pl II. O. 279.
	OC. 96 th Bn	Transferred to 92 nd Bn. E. Sandling		8.10.16	
					OC. 96 th Bn.
	OC 92	Taken on Strength 92 nd Bn	E. Sandling	8/10/16	Bn Q-266. Part 2
	OC 92	Transf. to 13 th Bn France	E. Sandling	12/11/16	Bn Q-290 Part 2

CERTIFIED CORRECT.
 10.10.16
 20.24 NOV. 1916
 13/11/16
 GVN. RECORDS, LONDON.

R. Brown **LIEUT.**
 ASST. ADJUTANT 92nd, OVERSEAS BATTALION
 (48th HIGHLANDERS) C.E.F.

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

204353 Jte E Palmer

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. 38, 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. 38, or other official documents.
13/11/16	C. B. D.	ARRIVED C. B. D.	FRANCE	13/11/16	N. R. D. 13/11/16 PART II ORDERS No. 43 D. 27/11/16
29/11/16	C. B. D.	LEFT C. B. D. FOR	Unit	29/11/16	N. R. D. 29/11/16
8/11/16	O. G. 13 BN	ARRIVED 13 th BN.	FIELD	2/12/16	B. 213 D. 8/12/16
29/9/17		To 1st Army Rest Camp		29/9/17	
6/10/17		Rejoined Unit		4/10/17	
15/12/17		14 days leave UK		9/12/17	Part II O. 122 22/12/17
2/1/217	Records	Admitted to 1st N. Gen Hospital Newcastle on Tyne whilst on leave in England & posted to 1st Quebec Regt Depot Bramshott		20/1/17	R. L. 1/13/30.3 K. L. 17/295 Part II O. 124 28/12/17
26.12.17	MRD	20.S from 13th BN	B. Shott	20.12.17	DO 254 W.R. for Colonel i/c Records, <i>for M. F.</i>
15-5-18.	Qus. Regt'l	Depot. ATTACHED TO 2 3 rd Res Bn B. Shott			R. II, D. O. 110 3-5-18. Des. Duckett

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

INSTRUCTIONS.

- (a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.
- (b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.
- (c) All questions, etc., must be answered.
- (d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.
- (e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

(1) Name of Overseas Unit which Soldier joins..... **96th Overseas Battalion.**

..... **Canadian Highlanders.**

(2) Regimental Number..... **204353**

(3) Full Name of Soldier..... **Edmund Palmer**

(4) Place of Birth..... **Newcastle-on-tyne England.**

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

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

(b) Present Postal Address.....

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

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

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

Also their names and ages.....

(9) Is your Father alive?..... **No**

If so, state name and address

(10) Is your Mother alive?..... **Yes**

If so, state name and address..... **Mary Ann Palmer,**

36 Dilston Road, Newcastle-on-tyne, England.

(11) If your Mother is a widow..... **Yes**

Are you her sole support, or not?..... **no**

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

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

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

(15) Are you insured?..... **No**

If so, in what Company?.....

Have you made arrangements for payment of your Insurance premium.....

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

W. A. Massey
for Officer Commanding.

Date **24th** July 1916.....

TLH. Rank Name PALMER, Edmund. Reg'l No. 204353. *13*

Unit 96th. Bn. If in perm. Corps, } Married or Single Single. *✓*
What Unit? }

Place and Date of Enlistment Saskatoon, March 1st. 1916. Place of Birth Newcastle-on-Tyne
England. *✓*

Name and Address, Next-of-Kin Mary Ann Palmer, *✓*
36, Tilston Rd., Newcastle--on-Tyne, England. Relationship Mother. *✓*

Assigned Pay Monthly \$ Payable to Relationship

Separation Allowance \$ Payable to Relationship

Discharge, Date and Place Reason Character

N/E. R.B. No. 33269
File R.L.
Cashed CAN. DR

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.				
QUEBEC		Arrived in England S.S. Laconia 6-10-16			
10.10.16	96th. Bn	SOS to 92nd Bn.	E. Sandling	8-10-16	D, O, 279
20.10.16	92nd. Bn	TOS from 96th Bn.	E. Sandling	8-10-16	D, O, 266
13.11.16	92nd. Pn	SOS to 13th. Bn.	E. Sandling	12-II-16	D, O, 290
27.11.16	13th.	Taken on Strength	Field,	13.11.16	Pt, 2-O, 42
24.12.17	1st. Que Rgt.	Adm whilst on leave from France To. 1 Northern Gen Hoop	Pte Newcastle	20.12.17	CL B97. Not Stated
26.12.17	1st. Q.R.R.	T.O.S on posting from 13th Bn	* Bramstott	20.12.17	Po. 256. 4 P.O 1240/28-12-17
2.2.18	2nd. C.C.P.	Attached from 1st. Q.R.R.	* B'shall	1.2.18	2028 4 AD 291/12-18
4.5.18	C.R.P.	Casual on Com 2nd C.C.P. + is on Com 23rd Res Bn	" "	3.5.18	P.O 110

A.F.B. 103 CHEGONAL
22 NOV. 1916
muna

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.				
4-5-18	2nd C.E.P.	Ceases on Com here	B'Shott	2-5-18	D.O. 106
22-5-18	2 nd Reg	Ceases Attac	He	29-5-18	D.O. 126 ⁰ /23/5/18. QRD. D.O. 142
24-2-19	M.D.W. 4	T.O.S. from	148 ^d	27-6-19	P.R. Depot
27-5-19	Q.R.D.	S.O.S. to O. Wing. Witley		26-5-19	D.O. 121 "O. Wing 42d/28 ⁵ 79
27-6-19	P. Wing	T.O.S. pending R.T.C. D.A.P.	Witley	26-6-19	" 59
10-7-19	O. Wing	Sot to QRD not having reported	"	26-5-19	" 74
7-7-19	P. Wing	TOS of Pladn 10 2 - 13 - 16	"	5-7-19	- 63
16-8-19	✓	SOT to Canada	✓	16-8-19	- 83

EAR NOSE AND THROAT CLINIC.

WITLEY. 8-8 1919

No. 204353 Rank Pte. Name Palmer E

Unit P. Wing

Original Disease or injury. Otitis Media

Date of Origin May 1916.

Place " " Canada

Cause Complication of Tonsillitis.

Present Disability Slight deafness hearing perforation both M.T. discharges from left.

Right	Hearing	Left.
..... 21'	Voice 21'
.....	Weber
.....	Rinnio.....
.....	Schwabach.....
..... 2048	Upper Left..... 2048
..... 32	Lower Left 32

Category BT

Remarks.:-

Small perforation Rt. M.T. No discharges. Perforation in left with purulent discharge.

Condition was ~~not~~ present before enlistment and has ~~been~~ been caused by service. Has ~~been~~ been aggravated by service.

For LONG Board.

For SHORT Board.

J. H. Mauciel O. t. CAMC.
Ear Specialist, C.C.C. Witley, Surrey.

MCM/-

1875
No. 100

Received of
the Treasurer

of the
County of
the sum of

Five Dollars

for

the purchase of

land

of the

County of

CANADIAN ARMY DENTAL CORPS. O.M.F.C.

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

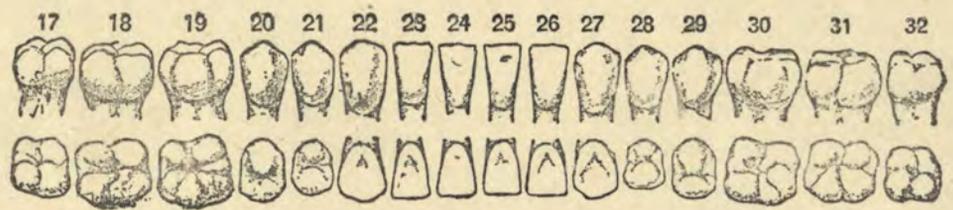
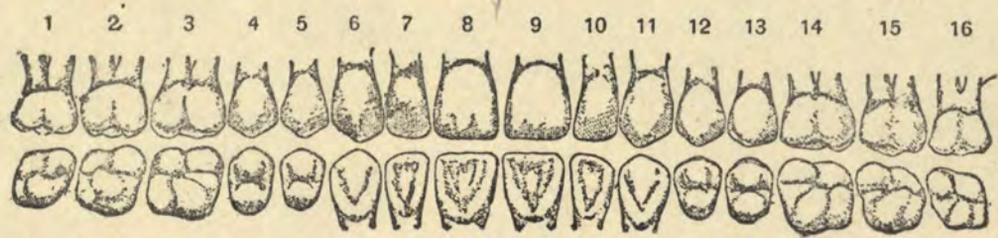
DIRECTIONS TO DENTAL OFFICERS

NAME OF SOLDIER (Block Letters) PALMER, EDMUND

REGIMENT 13 B.H.C. RANK Pte. No. 204353

Date of Examination in England 30 6 19 Date of Examination in France

- 1. This form will be made out for each individual at the time of Demobilization in England or France.
- 2. Figures as per chart will be used to designate teeth concerned.
- 3. In reference to Partial Dentures the numbers of teeth thereon will be stated.



PRESENT DENTAL REQUIREMENTS

1. FILLINGS 18

2. EXTRACTIONS

3. CROWNS

- 4. DENTURES
 - (a) Full Upper
 - (b) Part Upper
 - (c) Full Lower
 - (d) Part Lower

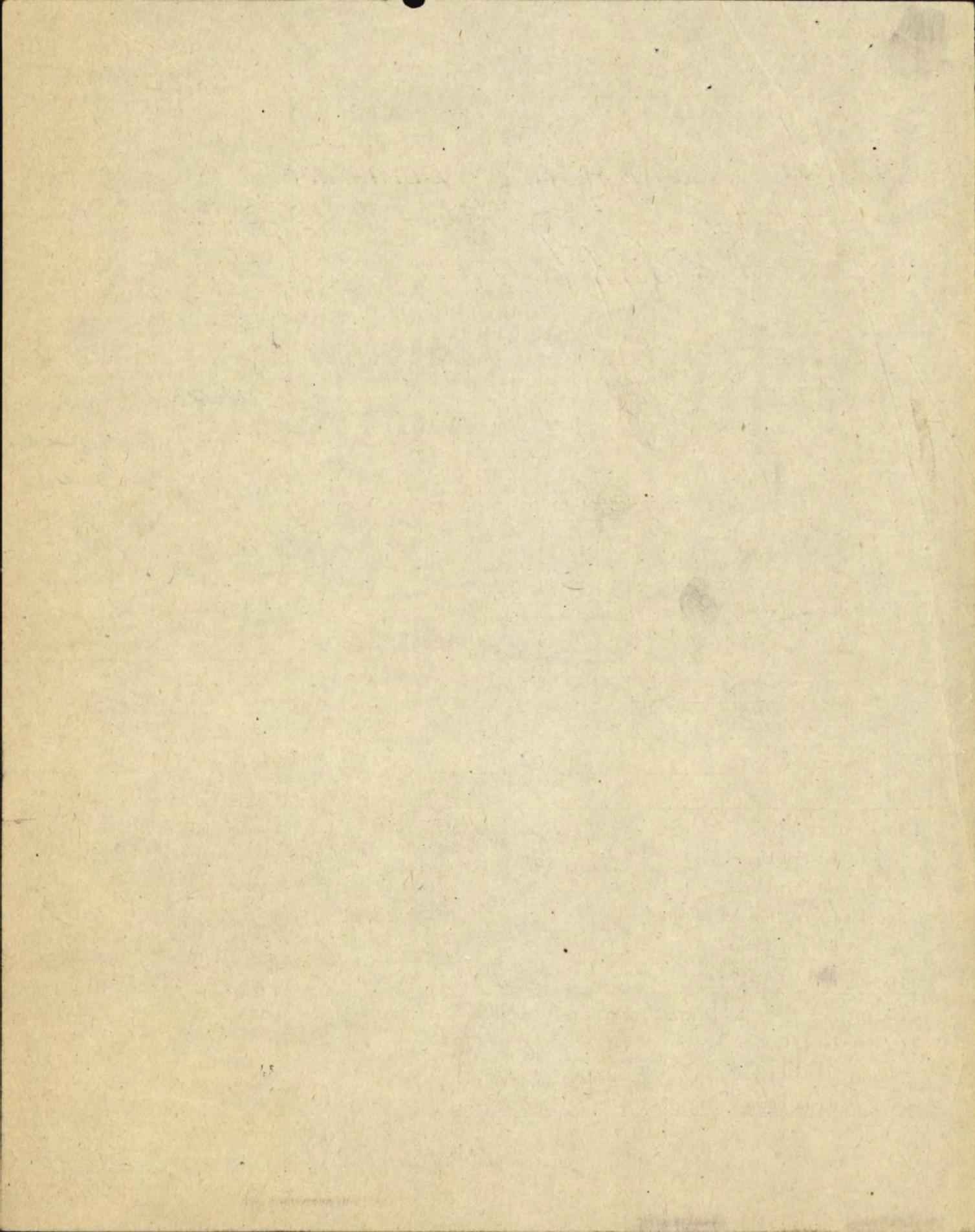


HAS HE EVER REFUSED DENTAL TREATMENT? [Handwritten mark]

HAS HE EVER RECEIVED DENTAL TREATMENT? (Reply by "Yes" where applicable to any or all of a, b or c.)

- (a) In Canada
- (b) In England [Handwritten 'yes']
- (c) In France

Signature of Dental Officer [Handwritten signature]



1073 A

FORM to be used (1) when a Soldier is placed under Medical Surveillance for Venereal Disease. (2) for furnishing information between Medical Officers when cases are transferred from one Station to another.

Corps	Company	Regimental No.	Rank and Name	* Date on which case originally came under treatment
P. wing.		204353	1ST E. PALMER E	3/6/19.
20.6.19. XX				REMARKS
27.6.19. XX				
4.7.19. XX				
11.7.19. XX				
18.7.19. XX				
25.7.19. XX				
30.7.19. waps.				
5.8.19. obs.				

To P.C.

Station and date 17/6/19.

Shukhar Lt Col

The Officer who places the man under surveillance will prepare this form in duplicate. One copy will be forwarded to the Officer Commanding, and the other to the Medical Officer who will have the surveillance of the man. When any circumstances arise likely to interfere with the regular attendance of men on the continued treatment list, such as transfer to another station, musketry courses, imprisonment, and especially furlough, their Commanding Officer will apprise the Medical Officer of the fact.

* When cases are transferred Medical Officers will be careful to insert the date on which the case was first placed on a syphilis register, irrespective of the number of registers the case may have passed through.

Army Form 113

Form to be used (1) when a Soldier is placed under Medical Surveillance for Venereal Disease (2) for furnishing information between Medical Officers when cases are

CANADIAN EXPEDITIONARY FORCE

War Service Badge 1st
Class *2* No *323029*

DISCHARGE CERTIFICATE

WAR SERVICE BADGE

CLASS "A" No _____

THIS IS TO CERTIFY that No. *204353* (Rank) *Private*

Name (in full) *Edmund Palmer* enlisted in

the *96th Battalion*

CANADIAN EXPEDITIONARY FORCE at *Saskatoon* on the

day of *March* 19 *16*

HE served in *France with the 13th Bn England*

Demobilization. *medically unfit for general service*

and is now discharged from the service by reason of

~~Medical Unfitness.~~

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

Age *26 years*

Height *5' 4 1/4"*

Complexion *Fair*

Eyes *Blue*

Hair *Fair*

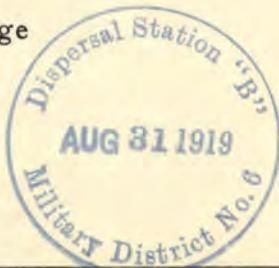
E. Palmer

Signature of Soldier.

Marks or Scars

None

Date of Discharge



H. Bellman
Dispersal Station "B"
Issuing Officer.

Rank

Date *HALIFAX, N.S. AUG 24 1919*

NB - 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.

- 1.—That discharge certificate must be carried when wearing uniform.
- 2.—That uniform can be worn only thirty (30) days after discharge, or when duly authorized in writing, and
- 3.—That wearing of uniform renders him liable to usual military discipline, as if on the strength of a unit.

n 7
38185

**MILITIA AND DEFENCE
ASSIGNED PAY.**

To whom *Mrs. Mary A. Palmer,*
Address *36 Dilston Rd.,*
Newcastle-on-Tyne. ENG.

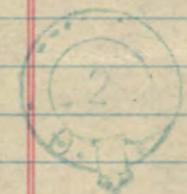
By whom assigned *Palmer, Edmund*
Regtl. No. *204353*
Rank *Pte.*
Corps, &c. *96th. Bn.*

Rate *10.00*

Date to Commence *Oct. 1st., 1916.*

PAYMENTS.

Month.	Year.	Cheque No.	Amt.	Pay Sheet Deduction.	REMARKS.
Jan.	1916				
Feb.					
March					
April					
May					
June					
July					
Aug.					
Sept.					
Oct.		<i>221896</i>	<i>10</i>	<i>X</i>	
Nov.	<i>20.00</i>	<i>247395</i>	<i>10</i>	<i>X</i>	
Dec.		<i>287718</i>	<i>10</i>	<i>X</i>	
Jan.	1917	<i>327377</i>	<i>10</i>	<i>X</i>	
Feb.		<i>343616</i>	<i>10.</i>	<i>X</i>	
March		<i>421117</i>	<i>10. 60</i>	<i>X</i>	
April					
May					
June					
July					
Aug.					



*At checked & paid correct
Gardcock*

ASSIGNED PAY.

By whom assigned

Palmer

E.

Regtl. No.

204353

PTE

96th Bn

Month.	Year.	Cheque No.	Amount.	Pay Sheet.	REMARKS.
Sept.	1917				
Oct.					
Nov.					
Dec.					
Jan.	1918				
Feb.					
March					
April					
May					
June					
July					
Aug.					
Sept.					
Oct.					
Nov.					
Dec.					
Jan.	1919				
Feb.					
March					

* Strike out whichever inapplicable.

ASSIGNED PAY. ENGLAND OR CANADA. SEPARATION ALLOWANCE. ENGLAND OR CANADA.

NAME: PALMER Edmund
NUMBER: 204353

EFFECTIVE DATE: 1-10-17
AMOUNT: 15.00

PARTICULARS OF RANK OR APPOINTMENT

NAME, ADDRESS, RELATIONSHIP & AUTHORITY

Mrs Mary A Palmer (Mother)
36 Delston Rd
Newcastle on Tyne Eng

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		<u>Plt</u>

Supp'd off 1/10/19.

UNIT AND TRANSFERS

ORIGINAL UNIT: 96 Br
DATE ACCOUNT FIRST OPENED: 1-10-16

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S F'D	UNIT TRANSFERRED TO
			<u>10 RD</u>

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
<u>16/7/19</u>	<u>9984</u>	<u>P. Jerry</u>	<u>£2 9 7 1/2</u>				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	<u>1</u>	<u>10</u>		<u>15.90</u>

PARTICULARS OF RENDERING NON-EFFECTIVE: Alan 18/19. Prop WRB 118123 Muller 18/4/19 Muller wrij P. MD. 12. LAG. 30.90.

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
<u>1918 Mar</u>	<u>Balance forward</u>								<u>76 47</u>		
				<u>april £3 1/8 a 30495</u>			<u>15</u>		<u>61 47</u>		
				<u>AR. 164 2nd CCD 10/4/18</u>	<u>2 67</u>				<u>58 80</u>		
<u>april</u>	<u>P. Pay</u>	<u>33</u>							<u>91 80</u>		
				<u>AR. 439 2nd CCD 24/4/18</u>	<u>2 67</u>				<u>89 13</u>		
		<u>33</u>			<u>5 34</u>		<u>15</u>				
<u>May</u>	<u>P. P.</u>	<u>34 10</u>		<u>B14812 - AP May - £ 3-1-8</u>			<u>15</u>		<u>74 13</u>		
									<u>108 23</u>		
				<u>AR. 380 - 23 Dec - 15/3/18</u>	<u>7 30</u>				<u>100 93</u>		
				<u>223 - B. H. A. D. Group - 29/3/18</u>	<u>7 30</u>				<u>93 63</u>		
		<u>34 10</u>			<u>14 60</u>		<u>15</u>				
<u>JUN</u>	<u>P. P.</u>	<u>33</u>							<u>126 63</u>		
				<u>A. P. June - £ 3-1-8 - B 109008</u>			<u>15</u>		<u>111 63</u>		
				<u>AR. 395 - B. H. A. D. Group - 14/6/18</u>	<u>4 87</u>				<u>106 76</u>		
				<u>579 - - - 28/6/18</u>	<u>9 73</u>				<u>97 03</u>		
		<u>33</u>			<u>14 60</u>		<u>15</u>				
<u>July</u>	<u>P. P.</u>	<u>34 10</u>		<u>AP - ck C2810, £ 3-1-8 - July</u>			<u>15</u>		<u>116 13</u>		
				<u>AR. 778 - B. H. A. D. Group - 12/7/18</u>	<u>9 73</u>				<u>106 40</u>		
				<u>978 - - - 29/7/18</u>	<u>9 73</u>				<u>96 67</u>		
		<u>34 10</u>			<u>14 46</u>		<u>15</u>		<u>115 77</u>		
<u>AUG</u>		<u>34 10</u>		<u>A. P. Aug £ 3-1-8 C39211</u>			<u>15</u>		<u>106 04</u>		
				<u>AR. 1257 - B. H. A. D. Group - 13/8/18</u>	<u>9 73</u>				<u>86 57</u>		
				<u>1427 - - - 21/8/18</u>	<u>19 47</u>				<u>104 57</u>		
		<u>33</u>			<u>29 20</u>		<u>15</u>		<u>94 84</u>		
<u>SEP</u>	<u>P. P.</u>	<u>33</u>		<u>A. P. Eng Sept - £ 3-1-8 D 12012</u>			<u>15</u>		<u>113 94</u>		
				<u>AR. 1959 - B. H. A. D. Group - 13/9/18</u>	<u>9 73</u>				<u>104 21</u>		
		<u>33</u>			<u>9 73</u>		<u>15</u>				
<u>Oct</u>	<u>P. P.</u>	<u>34 10</u>		<u>AP Eng Oct £ 3 1/8 D 63803</u>			<u>15</u>		<u>104 21</u>		
				<u>AR. 2286 B. H. A. D. Group - 14.10.18</u>	<u>9 73</u>						
		<u>34 10</u>			<u>9 73</u>		<u>15</u>				

NUMBER 204353 RANK

Pfc

NAME

PALMER E

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
	Brought Fwd.								104.21		91.49
Nov.	P.P.	33		Eng. P. 66 24802 £3-1-8			15		122.21		
				ab 2802 B.B. Dpo 14/11/18	973				112.48		
				Eng. P. 66 24131 £3-1-8			15		97.48		
				ab 2984 27-11-18	24.53				72.15		
Dec	P.P.	34.10							107.25		
				ab 3693 G.B.R. Dpo 19/12/18	48.67				58.58		
Jan	P.P.	34.10		Eng. P. 66 722804 £3-1-8			15		77.68		
		101.20			52.73		45		-		
Feb	P.P.	30.80		ab 1146 BRDG 10/1/19	973				-		
				ab 4638 Return 26-1-19	973				-		
				Eng. P. 66 675539 £3-1-8			15		-		
				ab 5764 RRDS 6/2/19	29.20				14.02		
Mar	P.P.	34.10							48.12		
				Eng. P. 66 F42729 £3-1-8			15		33.12		
				ab 7177 RRDS 26-2-19	973				22.22		
		64.90			58.59		30		54.19		
Apr	P.P.	33		Eng. P. 66 A15801 £3-1-8			15		72.19		
May	P.P.	34.10		" " A50601 £3-1-8			15		91.29		
				ab 1431 RRDS 24-4-19	24.33				66.96		
				" 2617 " 8-5-19	48.67				18.29		
		47.10			73.00		30		-		
June	P.P.	33		Eng. P. 66 A29592 £3-1-8 June			15		26.29		
				ab 2951 C.H. W. 20/6/19	16				36.13		
				1-7-56 " 19/7	487				31.26		
July	P.P.	30.10		Eng. P. 66 722972 £3-1-8 July			15		50.20		
				ab 1201 28/5/19	973				40.63		
		67.10			147.6		30		24.73		
August				B132250 £3-1-8			15		-		
				ab 9984 13 Bm 16/7	973				15.90		
					973		15		-		
				ab 97- 2-8-19 - Paving End 2	14.60				-		
				- 287- 9-8-19 " " 3	19.27				18.12		
					34.07				-		

So. Canada MD 6-16/8/19 \$1.02

40.63
 9.77

 30.90
 15

 15.90

 18/7/19
 [Signature]

P Wing

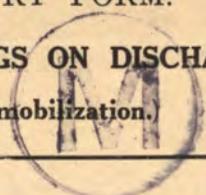
P Group

SHORT FORM.

WAR SERVICE BADGE
CLASS "A" No. 393027

PROCEEDINGS ON DISCHARGE.

(Demobilization.)



D.A.
O.C.
B
7

1. No. 204353	
2. Rank. Pte.	
3. Name. PALMER, Edmund	
4. Unit. 13th Battalion	
5. Date of Discharge 3/8/19	Place Halifax N.S.
6. Reason for Discharge Demobilization	
7. Authority R.O. 1420	
8. Proposed Residence after Discharge Saskatoon, Sask.	
9. CERTIFICATE TO BE SIGNED BY SOLDIER. I hereby acknowledge that at the undernoted place and date I received my discharge Certificate M. F. W. ?	
Signature of Soldier: E. Palmer.	
10. CONFIRMATION. The discharge of the above named man is hereby confirmed.	
Place MEDICAL DOCUMENTS FORWARDED TO Date 16-8-19 S. C. B. B. Q. ON 16-9-19 Emb S.S.	Signature: [Signature] O. C. Dispersal Station "B" (O. C. Discharging Unit.)

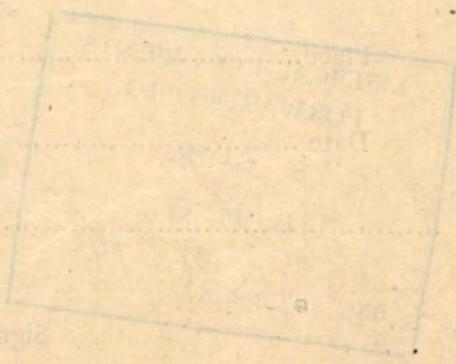


mt
14-2-24

SHORT FORM
PROCEEDINGS ON DISCHARGE

(Continuation)

1. No. 204122
2. Rank P.O.
3. Name PALMER, Edmund
4. Title 1st Lieutenant
5. Date of Discharge 11/11/1918
6. Reason for Discharge (1) <i>Resignation</i>
7. Authority R.O. 1450
8. Proposed Residence after Discharge (1) <i>Washington, D.C.</i>
9. CERTIFICATE TO BE SIGNED BY SOLDIER I hereby acknowledge that at the undersigned place and date I received my discharge Certificate M. H. W. <i>[Signature]</i> Signature of Soldier
10. CONFIRMATION The discharge of the above named man is hereby confirmed. BAKER & CO. 2111 <i>[Signature]</i> Signature O. C. Discharge Unit



LIST OF DISCHARGE DOCUMENTS

Attestation Form, Typical Form W 28
 or Testimonial of Record, Typical Form W 189
 Field Contact Sheet, Typical Form W 175 or A 1 B 1
 Capacity Form, Typical Form W 51 or A 1 B 103
 Last Pay Certificate, Typical Form W 5
 Certificate that missing documents are available
 Medical History Sheet, Typical Form H 41 or A 1 B 123
 Proceedings of Medical Board, Typical Form M 101 or A 1 B 145
 Dental History Sheet, Typical Form D 103
 Medical Report, Typical Form M 103 or D 101
 Departmental Contact Sheet, Typical Form H 201
 Company Contact Sheet, Typical Form H 203

Group
 18 000
 1918

LIST OF DISCHARGE DOCUMENTS.

Attestation Paper, Triplicate	Militia Form W. 23
or Particulars of Recruit	Militia Form W. 133
Field Conduct Sheet.....	Militia Form W. 178 or A.F.B. 122
Casualty Form	Militia Form W. 54 or A.F.B. 103
Last Pay Certificate.....	Militia Form W. 44
Certificate that missing documents are unobtainable.....	
Medical History Sheet.....	Militia Form B. 313 or A.F.B. 178
Proceedings of Medical Board.....	M.F.B. 227, A.F.B. 179 or A.F.A. 45
Dental History Sheet.....	Militia Form B. 465
Medical Report	M. F. W. 129 or D. M. S. 1375
Regimental Conduct Sheet.....	Militia Form B. 263
Company Conduct Sheet.....	Militia Form B. 263a

Triplicate Attestation Paper (M.F.W. 23), or Particulars of Recruit (M.F.W. 133).

2. Casualty Form (A.F.B. 103).
3. Medical History Sheet (M.F.B. 313 or A.F.B. 178),
4. Proceedings of Med. Board (M.F.B. 227 or M.F.W. 129)
5. Dental Certificate (C.A.D.C. 5009a),
6. Field Conduct Sheet (A.F.B. 122.)
7. Proceedings on Discharge (M.F.B. 218a)
8. Discharge Certificate (M.F.W. 39)
(Enclosed in special envelope (260M)).
9. Copy of Discharge Certificate (M.F.W. 39a).
10. Dispersal Certificate (C.D. 3).
11. Equipment and Clothing } Statement Q.M.G. Form (D.O.S. 2),
13. Last Pay Certificate (P, 851). *+ Dup*
13. Pay Book (A.B. 64).
14. War Service Gratuity (Form M.F.W. 2595),
15. Sundry Documents.

Group..... *B*

Checked by No..... *18 GSP*

Date..... *15 AUG 1919*

Belgie 23-8-19

AUDITOR *[Signature]* PAYMASTER *[Signature]*

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

REGT. No. *204353* RANK *Plt.* NAME (IN FULL) *Palmer, Edmund*

IF IN P.F. WHAT UNIT? *96th Bn.*

RELATIONSHIP *Wife* PARTICULARS *Wife* EFFECTIVE DATE *16-8-19* AUTHORITY *Leo. 245*

PLACE OF ATTESTATION *Transferred to* DATE *27-2nd Decemr 1919* AUTHORITY

DATE OF ATTESTATION *1-9-19* DATE EFFECTIVE *1-9-19* ASSIGNED PAY \$ *15.00*

PAYABLE TO *Mrs. M.A. Palmer, Mother* RELATIONSHIP *Mother* ANY CHANGE IN ASSIGNEE OR ADDRESS *Maisonnette, Montreal P.Q., Stopped by England, 960 Gas Station, Sask.*

ADDRESS *36. Dighton Rd. Montreal, Quebec*

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE *31-8-19* PLACE *Am. Wt.* DATE *31-8-19* REASON *Demob.* AUTHORITY *Leo 204* IF ENTITLED TO POST DISCHARGE PAY

MONTH	NO. OF DAYS	PAY AND F.A.		OTHER CREDITS		TOTAL CREDITS		ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY	REGI-MENTAL CHARGES	OTHER CHARGES	TOTAL DEBITS		BALANCE		PARTICULARS OR REMARKS			
		RATE	AMOUNT	\$	C.	\$	C.	\$	C.	\$	C.	\$	C.				\$	C.	\$	C.		\$	C.	
<i>31-8-19</i>	<i>31</i>	<i>1.00</i>	<i>34.10</i>	<i>15</i>	<i>90</i>	<i>40</i>	<i>00</i>	<i>35</i>	<i>00</i>	<i>155</i>	<i>00</i>	<i>4</i>	<i>89</i>	<i>5</i>	<i>00</i>	<i>111</i>	<i>06</i>	<i>34</i>	<i>07</i>	<i>155</i>	<i>00</i>	<i>1012</i>	<i>Bel. Co. Adv. W.S.G. Cr. 142 on 1300 Cr. no. 146960. Adv. Eng.</i>	
		<i>WAR SERVICE GRATUITY, W.S.G. S.A.</i>		<i>WAR SERVICE GRATUITY, W.S.G. S.A.</i>																		<i>Sol</i>	<i>1st Payment W.S.G.</i>	
	<i>183</i>		<i>420</i>		<i>420</i>		<i>420</i>		<i>420</i>		<i>420</i>		<i>70</i>		<i>70</i>		<i>70</i>		<i>70</i>		<i>70</i>		<i>70</i>	<i>14.10.19 #1307657</i>
																							<i>28.10.19 #1541379</i>	
																							<i>26-11-19 #177668A</i>	
																							<i>18/12/19 #1783309</i>	
																							<i>27/1/20 #1718337</i>	
		<i>420.00</i>		<i>420.00</i>		<i>420.00</i>																<i>420.00</i>	<i>Nil</i>	

Certified that all payments due on this acct. have been paid.

[Signature]

For Senior Officer Pay Services, M.

OCT 8 1919

THIS FORM WILL BE USED FOR ALL RANKS
MEDICAL HISTORY OF AN INVALID

ABS

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 invalid 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."
- In answering the questions, Medical Officers will carefully obtain and record the invalid'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 invalid concerned, from witnesses, or from documents, Regimental or otherwise.
4. Special care is required in answering question 9. Read the questions carefully. All questions must be answered.
 5. If space provided under any section is insufficient add another sheet. Such 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 7, 8, 9 and 10 be communicated to the invalid, 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.

13th Batt STATION Witley Camp DATE 8th August 1919.
 PALMERX 204353 Pte.

1. 1 (a) Unit..... (b) Regimental No..... (c) Rank.....
 (d) Surname..... Palmer (e) Christian name..... Edmond.
 (f) Home address..... Saskatoon Sask.
 (g) Next of Kin..... Mary Ann Palmer (h) Relationship..... Mother
 (i) Address of Next of Kin..... 36 Dilston Rd Newcastle on Tyne.

2. Age last birthday..... 26 Date of birth..... 18th Jan 1893.

3. Enlistment, or Appointment (if an Officer) (a) Place..... Saskatoon (b) Date..... 1-3-16.

4. Personal description: Est,
 (a) Height..... 5' 5" (b) Weight..... 136 (c) Complexion..... Fair.
 (d) Colour of hair..... Light (e) Colour of eyes..... Blue (f) Identification marks, Scars, etc.....
 None.

5. Former trade or occupation..... Labourer

	PERIODS	
	From	To
6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).	Years 3	Days 123.
Canada.....	1-3-16	27-9-16.
England.....	27-9-16	13-1-16.
France or other theatres of War.....	13-11-16	10-2-17.

7. Original disease, or injury..... ~~XXXXXXXXXXXXXXXXXXXX~~
 (1) V D S.
 (2) Otitis Media

(a) Date of origin (1) May 1918 (2) May (b) Place of origin (1) Newcastle Eng (2) Canada.
 (c) Cause..... (1) Sexual Intercourse. (2) Infection from Tonsillities.

8. Present disability— (Here state the exact nature of the disability resulting from the disabling conditions: e.g. (a) Weakness—slight, moderate, marked, etc; (b) Loss, complete or partial, of an organ or member, or of its functions; (c) Necessity for rest of the body, or of some of its parts, for therapeutic reasons; (d) Any other restrictions in choice of occupation.)

(1) None Apparant

(2) Slight defection hearing Perfection both M T's discharge from left.

9. Present condition—(a) (Before completing this section the invalid should be stripped, and subjected to a thorough physical examination. Important, to be a full description of the present disabling condition, or conditions only. "History" must be recorded in Section 10. Describe all abnormalities, anatomical and functional, contributing to present disability; objective findings to be stated first, then subjective findings.)

(1) Report Can Gen Lab Witley Camp 1-8-19.

Wasserman Negative P. S Williams Capt C A M C

Slight scar at junction prepuce and glans penis.

No open nor infective lesions.

(2) Report Ear Specialist 8-8-19. F A MacNeil Capt C A M C

Right Hearing Left
21' Voice 21' Small perforation Rt M T.

Minnie - No discharge Perforation.

2048 Upper Left 2048 in left with perulent

32 Lower left 32 discharge.

(2) Chronic discharge and deafness of left ear.

(b) Has the invalid now any affection of the following systems, not described in Section 9 (a) above? (Answer Yes or No.—if the answer to any part is Yes, give a brief description of the present condition.)

- Nervous System..... NO Cardio-Vascular System..... NO Genito-Urinary System..... NO
(If pulse rate is abnormal, B. P. will be taken.) (Albumen and Sugar will be excluded.)
- Special Senses..... NO Respiratory System..... NO Integumentary System..... NO
- Disturbances of Mentality..... NO Digestive System..... NO Muscular System..... NO
- Osseous and Joint Systems..... NO Any other general condition..... NO

10. (a) History (of the condition referred to in Section 9 (a).)

(1) States that contracted Syphilis in Newcastle in May 1919 Developed soe chancre Admitted to Can Spec Hospl at beginning of June 1919.

(2) First noticed ear trouble in May 1916 Had acute Tonsillitis result Otitis Media mainly in left ear Right ear also affected Almost constant x discharge from left ear since.

10.—(b) (If or give a complete history, as-obtained from invalid, with dates of origin, of any affection from which the invalid, has suffered either prior to or since enlistment, and not included in Section 10 (a).)

Measles childhood.

(c) (Here give a description of wounds, scar, and deformities.

See 4 F.

11.—(a) Did the disabling condition have its origin before enlistment? (1) No (2) No.

(b) If so, has it been aggravated by Service? (If aggravated, give a description, as far as it is possible to do so, of the disabling condition at time of enlistment.)

(1) N A. (2) N A.

12. Was the disability caused, or aggravated; (a) by intemperance, or improper conduct; or (b) by unreasonable refusal to accept treatment? (1) A Yes (b) No (2) a&b 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) Re-examine in 6 months (2) 6 months.

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

(1) 606 - 8 treatment (2) Irrigation.

Hg 8

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) Suggested that he be dealt with on arrival in Canada in accordance with P C I 47 dated 20-1-19. (2) No.

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

17. Recommendations

F W Ballantyne Cap t C A M C. Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

(Sections 7, 8, 9 and 10 are to be read to the invalid and either "satisfied" or "not satisfied" struck out).

I, the undersigned, F Palmer, 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

F Palmer Pte. Rank. Signature of invalid examined.

MEDICAL CASE SHEET.*

P

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
6244 Year	206353	Pte	Palmer	E
		Unit.	Age.	Service.
		13 ^d C	24	23/12
Station and Date.	Disease			
Bear Wood	<i>I. C. T. left leg</i>			
15/1/18	<i>very noisy fit</i>	<i>N. med.</i>		
206 C				
21-1-18.	<i>Conv. DT</i>			
- 1 FEB 1918	<i>2nd Bn Branshott DT</i>			



N. Macaulay Captain
 Med. Off., Canadian Convalescent Hospital,
 Bear Wood, Wokingham, Berks.

* The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.
 Wt. W 6604/M 2870—1,500,000—8/17—H. & Sp. (10938). Forms/I. 1237/12. (E239) [P.T.O.]

A 20.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
4344	204353	Pfc	Palmer	G
Year	Unit.	Age.	Service.	
1914	13 th Canadian 3 Bde. 1 Div G	24	1 ¹⁰ / ₁₂	
Station and Date.	Disease			
1 st Lt. H. A. Stewart	I.C.T. leg left.	Pres.		
Stewart's office	Dr. Anderson			
20-12-17	Capt			
Jan 1	1 month's duration on leave from France			
	Anno P. 2 weeks.			
	Dr. Anderson			
	Capt			
3.1.18.	Admitted 23 rd Durham V.A. Hut - Eylescliffe.			
14.1.18.	Discharged from Gournville for Transfer			
	P.P. R.H.P. Hick M.D. I.C.			

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

Station
and Date.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	204353	Pte.	Palmer	E.
Year	Unit.	Age.	Service.	
1917	13 Canadian Bde, Dis. Co.	24	1 ¹⁰ / ₁₂	
Station and Date	Disease			
1 st N. G. Hos Newcastle upon Tyne. 26.12.17.	I. C. I leg left. (Signed) W. E. Alderson bapt.			
Don 1	Aux Hos 2 wks. (Signed) W. E. Alderson bapt.			
3-1-18	admitted 23 rd Durham V. A. H. Sta. Lechliffe			
14-1-18.	Discharge from Donville for transfer (Signed) P. P. R. H. Hick md. E. C.			

2066

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

Station
and Date.

THIS FORM WILL BE USED FOR ALL RANKS
MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

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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 invalid 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 invalid'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 invalid concerned, from witnesses, or from documents, Regimental or otherwise.
4. Special care is required in answering question 9. Read the questions carefully. All questions must be answered.
5. If space provided under any section is insufficient add another sheet. Such 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 7, 8, 9 and 10 be communicated to the invalid, 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 Witley DATE 8 Aug 1916

1. 1 (a) Unit 13th Batt (b) Regimental No. 204353 (c) Rank Plt

(d) Surname PALMER (e) Christian name Edmand

(f) Home address Saskatoon Sask

(g) Next of Kin Mary Ann Palmer (h) Relationship Mother

(i) Address of Next of Kin 36 Dabston Rd Newcastle on Tyne

2. Age last birthday 26 Date of birth 18 Jan 1893

3. Enlistment, or Appointment (if an Officer) (a) Place Saskatoon (b) Date 1/3/16

4. Personal description:

(a) Height 5' 5" (b) Weight 136 lbs (c) Complexion fair
(stripped)

(d) Colour of hair light (e) Colour of eyes blue (f) Identification marks, Scars, etc. none

5. Former trade or occupation labourer

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).	Years <u>3</u>	Days <u>123</u>
---	-------------------	--------------------

	PERIODS	
	From	To
Canada	<u>1/3/16</u>	<u>24/9/16</u>
England	<u>24/9/16</u>	<u>13/11/16</u>
France or other theatres of War	<u>13/11/16</u>	<u>10/12/17</u>

7. Original disease, or injury

① U. P. S
 ② Otitis Media

(a) Date of origin ① May 1916 ② May 1916 (b) Place of origin ① Newcastle, Eng ② Canada

(c) Cause ① Sexual intercourse ② Infection from tonsillitis

27-6 4

8. Present disability— (Here state the exact nature of the disability resulting from the disabling conditions: e.g. (a) Weakness—slight, moderate, marked, etc; (b) Loss, complete or partial, of an organ or member, or of its functions; (c) Necessity for rest of the body, or of some of its parts, for therapeutic reasons; (d) Any other restrictions in choice of occupation.)

① None apparent
② slight defective hearing perforation both in L. Discharge
but left

9. Present condition—(a) (Before completing this section the invalid should be stripped, and subjected to a thorough physical examination. Important, to be a full description of the present disabling condition, or conditions only. "History" must be recorded in Section 10. Describe all abnormalities, anatomical and functional, contributing to present disability; objective findings to be stated first, then subjective findings.)

① Report. Com. Gen. Lab. with 1-8-19
Wasserman - negative P. A. Williams Capt.
slight scar at junction paper and glass pens,
no open nor infectious lesions.

② Report. Ear Specialist 8-8-19 Lt. Macneil Capt.
Right hearing left
21 ft voice 21 ft. Small perforation Rt. ear.
— time — no discharge. Perforation
20 x 8 upper left 20 x 8 in left with purulent
32 lower left 32 discharge

③ Chronic discharge and deafness of left ear.

(b) Has the invalid now any affection of the following systems, not described in Section 9 (a) above? (Answer Yes or No.—if the answer to any part is Yes, give a brief description of the present condition.)

Nervous System... no Cardio-Vascular System... no Genito-Urinary System... no
(If pulse rate is abnormal, B. P. will be taken.) (Albumen and Sugar will be excluded.)
Special Senses... no Respiratory System... no Integumentary System... no
Disturbances of Mentality... no Digestive System... no Muscular System... no
Osseous and Joint Systems... no Any other general condition... no

10. (a) History (of the condition referred to in Section 9 (a).)

① states that contracted syphilis in Newcastle, in May 1919, developed soft chancre. Admitted to Car. Lee. Hosp. at beginning of June 1919.
② First noticed ear trouble in May 1916. Had acute otitis media with resultant otitis media mainly in left ear, right ear also affected. Almost constant discharge from left ear since

10.—(b) (Here give a complete history, as obtained from invalid, with dates of origin, of any affection from which the invalid, has suffered either prior to or since enlistment, and not included in Section 10 (a).)

measles - childhood.

(c) (Here give a description of wounds, scars and deformities.)

See H & F.

11.—(a) Did the disabling condition have its origin before enlistment? no yes

(b) If so, has it been aggravated by Service? (If aggravated, give a description, as far as it is possible to do so, of the disabling condition at time of enlistment.)

U.S.
 W.A.

12. Was the disability caused, or aggravated; (a) by intemperance, or improper conduct; or (b) by unreasonable refusal to accept treatment? a - yes - b - no a - no - b - yes

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? 6 months 6 mos

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

606 - 8 treatments Strychnine
by - 8

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

(If the answer is "yes" state nature of treatment required and probable duration)
that he be dealt with on arrival in Canada in accordance with
PCI # 7 of 20-1-19 no

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

17. Recommendations

Sub alternate Captains

Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

(Sections 7, 8, 9 and 10 are to be read to the invalid and either "satisfied" or "not satisfied" struck out).

I, the undersigned, E. PALMER 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

E. Palmer Rank.
Signature of invalid examined.

ORIGINAL
MEDICAL HISTORY SHEET.

Surname Palmer. Christian Name Edmund.

Examined { on 1st. day of March. 1916
 { at Saskatoon, Sask.,
 Approved by K. Macfarquhar
 (Signed) D.G. Cameron. M.D.

Birthplace { City or Town Newcastle on Tyne. Rank Acting. M.O.
 { County England.

Apparent age 23 years 1 month.

Trade or occupation Farmer.

Height 5 Feet 4½ Inches. M.O.

Weight 135 Lbs. M.O.

Chest measurement { Minimum 33 inches. M.O.
 { Maximum expansion 2 inches. M.O.

Physical development Good. M.O.

Small-Pox Marks None. M.O.

Vaccination Marks { Arm Right 0 Left 2
 { Number

When Vaccinated last Infancy. M.O.

(a) Marks indicating congenital peculiarities or previous disease None. M.O.

(b) Slight defects but not sufficient to cause rejection Fit. M.O.

Date.	Fit or Unfit.	EXAMINED FOR RE-ENGAGEMENT.	
			27 DEC 1917
			M.O.
			M.O.
			M.O.
			M.O.
			M.O.
			M.O.
Date.	Result.	VACCINATIONS.	
<u>4.7.16</u>	<u>Good</u>	<u>was</u>	M.O.
<u>13/2/18</u>	<u>G.C.9m</u>		M.O.
Date.	Result.	ANTI-TYPHOID INOCULATIONS, ETC.	
<u>9/6/16</u>	<u>Good</u>	<u>was</u>	M.O.
<u>16/6/16</u>	<u>Good</u>	<u>was</u>	M.O.
<u>23.6.16</u>	<u>Good</u>	<u>was</u>	M.O.

Enlisted on 1st. day of March. 1916 at Saskatoon, Sask.,

	CORPS.	REG'L NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>96th O'Seas Bn</u> <u>C.H.</u>	<u>204353</u>		<u>1st. March, 1916.</u>
Transferred to	<u>13th Bn.</u>			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>Brampton</u>	<u>14. 2. 18</u>	<u>Parasitosis O.M.</u>	<u>Fit 6 mos.</u>
<u>Willy</u>	<u>18. 11. 18</u>	<u>6 lith. med. chm</u>	<u>Good</u>
	<u>8/8/19</u>		

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

298 } 4.2.18 at
 2 } 9.2.18 at

CANADIAN

Surname *Palmer* Christian Name *Edmund*

STATION.	Date of Arrival at the Station.	DATES OF						DISEASE.	Number of days in Hospital.	Remarks on nature of the disease: how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
		Admission into Hospital.			Discharge from Hospital.						
		Day	Month	Year	Day	Month	Year				
<i>1. Northern Gen. Hospital Newcastle-on-Tyne.</i>		<i>20</i>	<i>12</i>	<i>17</i>	<i>15</i>	<i>1</i>	<i>18</i>	<i>J. C. I. Lt. Leg.</i>	<i>26.</i>	<i>3. 1. 18. Aus. Hosp. 15. 1. 18. Transf. to Canadian Hospital, Kent.</i>	<i>M. J. ... Capt.</i>
<i>Dear Doag.</i>		<i>15</i>	<i>1</i>	<i>18.</i>				<i>S. Lt. Lt. Leg.</i>		<i>Has no complaints. G. & Good. kathy D. i.</i>	<i>Francis Donald</i>