8r

UNIT 44th Batt

Regimental No. 22780

ATTESTATION PAPER.

1x

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name? — Wills William
2. In what Town, Township or Parish, and in what Country were you born? — Aberdeen Scotland
3. What is the name of your next-of-kin? — George Wills
4. What is the address of your next-of-kin? — 72 Summer St.
5. What is the date of your birth? — 1880 November 14
6. What is your Trade or Calling? — Stone cutter
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? — —
10. Have you ever served in any Military Force? If so, state particulars of former Service. — —
11. Do you understand the nature and terms of your engagement? — Yes
12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE? — Yes

W. Wills (Signature of Man).

Gawcey (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, W. Wills, 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.

W. Wills (Signature of Recruit).

Date JUL 16 1915 1915. Gawcey (Signature of Witness).

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, W. Wills, 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.

W. Wills (Signature of Recruit).

Date JUL 16 1915 1915. Gawcey (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 Shorncliffe this 16th day of July 1915.

H J Gowan (Signature of Justice).

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

(Approving Officer).

L5096 17-5-15 1,000.

Certified true copy.
L. M. Cready
for Officer i/c Records, C.E.F.

Description of William Wills on Enlistment:

Apparent Age 35 years 6 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 5 3/4 ins.

Chest measurement:
- Girth when fully expanded 36 ins.
- Range of expansion 3 1/2 ins.

Complexion Dark

Eyes Brown

Hair Brown

Religious denominations:
- Church of England Yes
- 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.)

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 JUL 17 1915 1915

Place Shornecliffe

Ulverstwaight.
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.

William Wills 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.

H J Cowan (Signature of Officer).

Date July 16th 1915.

ATTESTATION PAPER.

No. A22780.

Folio. 14

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name? ..... William Wills
2. In what Town, Township or Parish, and in what Country were you born? ..... Aberdeen, Scotland
3. What is the name of your next-of-kin? ..... George Wills (Brother)
4. What is the address of your next-of-kin? ..... 72 Summer St., Aberdeen, Scotland
5. What is the date of your birth? ..... Nov. 14th., 1880
6. What is your Trade or Calling? ..... Stonecutter
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? ..... Yes
10. Have you ever served in any Military Force? ..... 18 Mos. Volunteers
    If so, state particulars of former Service.
11. Do you understand the nature and terms of your engagement? ..... Yes
12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE? ..... Yes

W. Wills ..... (Signature of Man).

F Wasley ..... (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, William Wills, 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.

W. Wills ..... (Signature of Recruit)

Date 19th April 1915 F Wasley ..... (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, William Wills, 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.

W. Wills ..... (Signature of Recruit)

Date 19th April 191 . F Wasley ..... (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 Winnipeg this 19th day of April 1915

J J Allen J.P. ..... (Signature of Justice)

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

..... (Approving Officer)

M. F. W. 23.
150 M.—12-14.
H.Q. 1773-39-841

Description of William Wills on Enlistment.

Apparent Age 34 years 5 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 5 ins.

Chest measurement: Girth when fully expanded 36 ins.
Range of expansion 1 ins.

Complexion Dark

Eyes Brown

Hair Dark Brown

Religious denominations:
- Church of England
- Presbyterian Yes
- 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).

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 April 19th., 1915 191 .

Place Winnipeg, Man.

C M Strong
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.

William Wills 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 of Officer)

Date April 19th., 1915 191 .

Proceedings of Court of Inquiry or on men reported Missing on Active Service.....

Attestation Papers.....1.....

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet .....2.....

Compulsory Stoppages.....

Casualty Forms.....1.....

Proceedings on discharge.....2.....

Corps History Sheet.....

Date and No. of Deposit Receipt for Purchase Money and Amount.....

Parchment Certificate.....

Medical Report for Invalids.....1.....

Medical History Sheet.....1 ~~to M.D #4 3/1/19 20.~~.....

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet.....

Clothing Transfer Certificate.....1.....

Inventory of Kit.....

Last Pay Certificate.....

mise – 1

Miscellaneous – 1

M.F.B 51 3a – 1

M.F.W. 62.
50M.—9-16.
H. Q. 1772—39—935.

DISCHARGE DOCUMENTS

R. O. No.

H. Q. No. 64

Name Wills, William

Regt. No. A22780 Rank Private

Corps 44th Bn.

Medically Unfit

~~Medals 14/19~~

~~Pd 10-10-19~~

~~Pd 14/19~~

~~Plaque 192~~

25606

1 Index card –

1 – R – 122

3 to M.D 4 3/1/19 20. #484163

A & D – 1

M.X. 8/6/20

39 – 4

17 – 4

9 – 4

2

Elig for 1914-15 Star Pte. 8th Bn. 649-W-2252. H.C.P.

WILLS, William A22780 Pte. 8th Bn.

118

Medals & Dec. (brother) George Wills,
72 Summer St.,
Aberdeen, Scotland.

P. & S. (brother) As above.

Mem. Cross. Nil.

map card destroyed 7-3-21.

No. 22780 RANK Pte. NAME Wills. W.

T. O. S. UNIT Discharge Depot Quebec.

M. D. 5

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916 May	1916 no dates	on.	11th Bn	

No A 22780 RANK Pte NAME Wills W.

T.O.S. 19-4-15 UNIT 44th Battalion C.E.F.
(Bo # 61-22-4-15)

M.D. 10

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915	1915			
apr 19	apr 20	✓	Detailed to reinforcements 26-5-15	(Bo # 90-27-5-15)
	May	✓		

UNIT SAILED
OCT 23 1915

OS.

CANADIAN CONVALESCENT HOSPITAL,

AT

Can. Conval. Hospital,
Bear Wood.

A. & D. CARD.

Regt. No. 27780 A. & D. No. 1293.

Rank pte Corps 8 Bn H.

Name Wills W. Age 45 Religion C of E.

Service at Home 3/12

,, ,, Front 9/12

Diagnosis V.D.H.

Admitted 17 APR 1916

Discharged 3 - MAY 1916 C.A.A.C. Brand

Place in Hospital 223 D.

M. H. Rec'd (See Document card)

Transferred

Results

P.T.O.

Taplow,

REMARKS: Reported sick March. 1st at Gloucester with general weakness & vomiting & palpitation. To Bailleul No 1 ~~Rest~~ Station 3 days — No 3 R. Station 1 day — Rouelcourt, 3 days — Hazebrouck 10 days — Etaples 2½ hrs. — Taplow 28/3/16. — here. At present feel weak & look somewhat emaciated & have shortness of breath.

V CARD NO.

SURNAME. Wills,

CHRISTIAN NAMES William

S.O.S dis. 9-12-16. FOLL. I+

REGL. No. A 22 780 RANK Pte

UNIT ~~44th (1st R.D.)~~ 8th

Bw.

FORMER CORPS 18 mos. Volo.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL Wills, George

RELATIONSHIP TO SOLDIER Brother

ADDRESS 12 Summer St. Aberdeen, Scot.

COUNTRY OF BIRTH Scotland, Aberdeen DATE

PLACE OF ATTESTATION Winnipeg, Man. DATE April 19th. 1915

Sailed from Halifax Per S.S. "Lapland" R/6. 20-5-16.

O/S - 1-6-15 23-10-15

Bw.

MARRIED SINGLE Yes. 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

R. 149.

Name Wills W. *Rank* Private *Reg. No.* A22780

Unit 8th.Battalion

Next of Kin Mr. George Wills,72 Summer St.Aberdeen,Scotland

Date 1916	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
Mar.10	No2 Can.Fd.Amb.		Bronchitis	A316		
Mar 17	N.M.D.C.C. STN.		do	A319		
" 30.	Duchess Conn.Red X	Hosp Taplow	do.	B40.		
Apr.18	Discharge	do do	do	B.54.		
May 3.	Can. Con. Hosp. Bear Wood	PR. Wokingham	do	B.62		
3-5 16.	" " "	" "	Discharged	B166		

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

NAME Wills, William

H. Q. FILE No. 649- 3278

REGT'L. No. A 22780

RANK AND CORPS Pte 8th Batt

CABLE		NATURE OF CASUALTY
NO.	DATE	
O. 230		Returned to Canada per "S.S. Metagama" May 12th 1916. (Val. disease)

NO. 1794 x

L. L. Job 86907--M. & D. 16065.

M. F. W. 42—50m.-10-15.
H. Q. 1772—39-893.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
A.316	No 2. C. F. A.	10-3-16	Bronchitis
A 319	70 N, Mid, Dir, Ass, Clg. Stat	17-3-16	Bronchitis
B 41	Duchess Conn Can + Taplow	30-3-16	Chronic Bronchitis
B 5-4	Duchess Conn. Can + Taplow	18-4-16	Discharged
B 61	Can Convl, Bear Wd. Pk. Wokingham	3-5-16	Bronchitis.
B 166	" " " "	3-5-16	Discharged

LEDGER NO. _____ SERIAL NO. 3536

REG. NO. 22780 NAME Wells. Wm

RANK Pte. CORPS I.S.C. AGE 47. SERVICE 6 35/12. E 2/12. F 14/12.

	HOSPITALS	DATE OF ADMISSION
1	W. M. G. H. (M.G.H.) Montreal	14-12-18.
2		
3		

DIAGNOSIS Myocarditis. 2 Military. TBc. G.S.W. Rt. Humerus.

TRANSFERRED TO St. Anne We Bellevue. Montreal 1-3-19.

DISPOSITION Dis to Unit- 17-7-19. CATEGORY _____

M.F.W. 2553.
1126-D.P.-50M-12-18.
1772-39-1332.

P.T.O.

REMARKS: HOSPITALS.	DATE.	DIAGNOSIS.

Reg. No. 22780 Name Wells W

Rank Pte Corps 8 B Age Service

Ledger No. Serial No.

HOSPITALS	DATE	DIAGNOSIS
Grey Nuns Montreal	31 5 16	Endocarditis

P. T. O.

HOSPITALS	DATE	DIAGNOSIS

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

a.t.B.

LIST NO.	HOSPITAL	DATE OF ADMISSION	REMARKS

B

V

Number A22780 Rank Pte.

Surname WILLS

Christian Name William

Unit 8th Bn Can Inf. Theatre of War France

Date of Service 16-7-15

Remarks George Wills, Esq. (B) 72 Summer St., Aberdeen, Scotland.

Latest Address ~~2062 St Antoine St~~ Montreal, P.Q.

Roll No. B. Page 3801.

NAME

REGT. No.

RANK AND UNIT

NEXT OF KIN

CABLE	
No.	DATE

NATURE OF CASUALTY

M. F. W. 42—100M.—8-18.
H.Q. 1772-39-893.

D.M.S. 1300.

Surname	Christian Name or Names	Reg. No.
Wills	W.	422780

Rank	Unit	Co.	Troop	Batty.
Pte.	8th Batt.			

Hospital: #2 Can. Fld Amb.

Date of Admission: 10. 3. 16.

Transferred North Mid. W.C.C. Stat.n Hosp. 17. 3. 16

Wor. C. Can Red Cross Daplow Hosp. 30. 3. 16

Can Conv Bearwood Pk Wokingham 3. 5. 16

Hosp.

Diagnosis: Bronchitis (Chr)

(1) Later Diagnosis (if changed)

(2)

(3)

Additional Diagnoses: If more than one state present

DISPOSITION

		Date
C.L. 24. 3. 16	A316.	Dis 18. 4. 16
" 29. 3. 16	A319	
" 8. 4. 16	B40	
C.L. 27. 4. 16 #	B154	
C.L. 5. 5. 16 #	B161	
" 11-9-16	B166	

REMARKS: Disc 3-5-16

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.		

C.C.A.C. 33784.

Rank Pte. Name WILLS William Reg'l No. A22780 R—122.

Unit 44th Bn If in perm. Corps, What Unit? Married or Single Single

Place and Date of Enlistment Winnipeg, 19 April 1915 Place of Birth Scotland

Name and Address, Next-of-Kin George Wills
72 Summer Sy, Aberdeen, Scotland Relationship Brothe r

C.C.A.C.

Assigned Pay Monthly $ Payable to Relationship

N/E. R.B. No. 6894
File R.L.
Category M.U.C.

Separation Allowance $ Payable to Relationship

Discharge, Date and Place Reason Character

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
	O/C. 32nd	Taken on Strength	Shoreclifs	11.6.15	Pt II. D.O. 168.
20-7-15	"	Transfd to 8th	Field	16-7-15	Pt II O.
27. 8. 15.	O.C. 8 Bn.	Taken on Strength 8 Bn.	In the field.	22.7.15.	Part II O. 23.
24-3-16	8th Bn.	Adm # 2 Can. Fd. Amb	"	10-3-16	C. L. A 316 Bronchitis
29-3-16	"	Adm R.M.D. Cas. Clg Stn	"	17-3-16	C. L. A 319
7-4-16	"	Transfd to CCAC	Folkestone	1-4-16	Pt II O #15
11.4.16	CCAC	Taken on strength.		30.3.16	Part II. O. 104
8.4.16.	8th Bn	Adm Duchess Connaught Can Rest Hosp	Taplow	30.3.16	Ch / B 40. Chronic Bronchitis
5.5.16	do	Trans Can Conv Hosp Beaumont	Wokingham	5.5.16	Ch/B 61. "
5.5.16	do	Re-adm do	do		Ch B 61 "

m.d can [illegible]

A22780 # Kills N.

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				
11-9-16.	8th Bn.	Dis. ban. bronch. Hosp.	Bear Wood. Wokingham	3.5.16.	G.G.B. 166.
4.5.16	CCAC	Reported from Hosp	Bearwood	3.5.16.	Pt II O 143.
27.4.16	8th Bn	Dis. D of C. Can. Red x Hos.	Taplow	18.4.16	Ch/B 55 - Chronic Bronchitis
6.5.16	CCAC	Proc. of ch to CCD & ES for Disch	Jersey	5.5.16	Pt II O 147
11.5.16	GOC	L. of S. Discharge. Can.	Bath,	11.5.16	Pt II O 75
		CHECKED. 5th Dec, 1916.			CCAC Pt II O 175 dy. 21-5-16.

(9173)—Wt. W12165—2146.—1,250,000.—2-15.—C. & G. Forms B. 103/1.

Army Form B. 103.

Casualty Form—Active Service.

Regiment or Corps 44th Battalion

Regimental No. A. 22780 Rank Pte. Name Mills. J. Wilmarin

Enlisted (a) 19/4/15 Terms of Service (a) _____ Service reckons from (a) 19/4/15

Date of promotion to present rank _____ Date of appointment to lance rank _____ Numerical position on roll of N.C.Os. 15

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				
11 June 15		Transferred to 32nd Res. Batt. b. f.			
		Proceeded on draft to 8th Battalion C.E.F.		JUL 17 1915	
24/7/15.	8 Bn	Taken on strength	Field	22/7/15.	B213.
11-3-16	"	Influenza.			
12-3-16	No 2. C.G.A.	Bronchitis – remaining	No 2. C. G. Am.	9-3-16.	B213 D.C.S. 271
			No 2. C. G. Am.	10-3-16	A36 D.C.S. 271.
18-3-16	N.M.D.C.C.S.	Bronchitis – adm.	N.M.D.C.C.S.	17-3-16	A36. D.C.S. 276.
19-3-16.	No 2 C.G.A.	Bronchitis { Adm. -10-3-16		16-3-16	A36 D.C.S 276.
18-3-16	No 3. C.G.A.	Bronchitis – Trans to Transferred	"	17-3-16.	A36 D.C.S. 276.
27-3-16	No 24 Gen'l	Chron. Bronchitis { Discharged – Re-admitted	"	27-3-16	W3034.
		V. D. H. sending.	No 24 Genl.	27-3-16	
26-3-16	"	Bronchitis chronic.	No 24 Gen'l	26-3-16	W3034 No 278
1-4-16	"	V. D. H. – Transferred	H.S. St David	1-4-16	W3083. – Pt. 2 Ord. No 15 d/7/4/16
25-3-16	N.M.D.C.C.S.	Bronchitis – Transferred	No 15. C.C.S.	23-3-16	A36 D.C.S. 283.
25-3-16	No 5 C.C.S.	404. A. Bronchitis catarrhal	"	23-3-16	A36 D.C.S. 283

W. Ed. Colby Lieut.
For Lieut-Col., A.A.G.

(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				

Forms
I. 1237
10

57893

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
1293	22780	Pte.	Wills	W.
Year 1916	Unit. 8 Bn.		Age. 45	Service. 12/12

Station and Date.

Can. Conval. Hospital, Bear Wood.

17 APR 1916

Disease V. D. H.

Reported sick march 1st at Bloegsteert — To Bailleul no 2 rest station 5 days — No 3 Rest Station — To Mondescat 5 days — Hazebrook 1 day — Etaples — Taplow March 28.16 — here.

7 wks week

Discharged to C.C.A.C for Medical Board 3/5/16

T. S. D. Stay Capt

3/5/16

*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.

P.T.O.

Station and Date.	

Forms
I. 1237
10

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	22780	Pte	Wills.	Wm.
Year	Unit.		Age.	Service.
1916	8th Can.		45	18 mos.

Station and Date.	Disease Valvular Disease of Heart (Double Mitral V.D.)
Dofsench Mar 29	Complaint:- Weakness, short of breath. Cough, some expectoration. Appetite fair. Bowels regular.

Onset about Mar 1st with vomiting weakness. Rheum. F. 10 yrs ago. No trouble since.

Heart:- Syst mur. at apex. Fair regular. fair forcible.

Treat. Rest. Half diet. Mag sulph in Aq. C.A. Baraga

M. F. a & w. M. 6 bit. Cause? B. 2 a & w, 4 6 bit. 2 in army? 2 of some inflammation? S. 6 a & w. Pt. not married.

Personal History:- Pt. b 1870 in Aberdeenshire. Lived there 20 yrs - Went to USA 1891 - Vermont 13 yrs. In Winnipeg & near it since. Stonecutter & general labourer. Enlisted in Oct. 25th & 44th in Kdg. Came to Eng. as draught to 32nd May 1915. Went to France July 1915. There since. Went to Hosp. Mar 17th → No 2 R. Station → No 3 R.S. → Mont de Cats → No 15 Hazebrouck → No 24 Gen. Staple → H.S. St David → Dofsench Mar 29th 1916.

Habits:- Tobacco - v. little, alcohol moderately, stout.

Illnesses:- Rheumatic F. 10 years ago - 3 mos ill. Knees & ankles affected - swollen, painful under. Pneumonia L. Lung 3 yrs ago 2 mos ill. in Hosp. Denies Venereal disease

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

Station and Date.

but Wassermann is positive.

Present Illness: Following exposure & heavy work at time. Onset about Mar 1st with loss of appetite, nausea & vomiting after food or even water. Fasted 2 wks. Loss of strength, especially of legs, loss of weight (normal 150 lb) Shortness of breath. Headaches at first, ~~some pain~~ pronounced. no definite point. Temperature 102° and elevated more or less for some time. Bowels regular. Has to get up once at night, and possibly as often as four times ~~at night~~ to urinate

Present Condition. No short of breath. Appetite fair, some cough & expectoration good. No nausea or vomiting. Feel weak.

Physical Examination

Rather Poorly developed, emaciated.

Skin, smooth, soft, moist, warm.

Digestive System, Tongue fairly clean. Many teeth absent esp. lower jaw. - a few carious & all stained. Throat rather pale & relaxed.

Abdomen: no tender areas, liver & spleen not definitely palpable though some firmness below R. costal margin.

Cardio-vascular System:-

A.B. visible & palpable as a wide spread impulse in 4th & esp 5th I.S. out to 3/4 outside L.N. Very slight thrill felt. and appreciable shock of 1st Sound. Cardiac dullness increased to over one inch outside L.N. & inward to R. side Sternum. 1st Sound at apex preceded by rough presystolic murmur, and almost replaced by prolonged systol. murmur transmitted into Axilla. The first sound ends in a snap? 2nd Sound clear

DUCHESS OF CONNAUGHT CANADIAN RED CROSS HOSPITAL, TAPLOW, BUCKS

PATHOLOGICAL LABORATORY

Date 13/4/16 Medical Officer

Name Wills Ward Alex 2 Bed 23

URINALYSIS

Quantity in 24 hours Reaction acid

Sp.Gr. 1010 Color light amber

Consistence watery Sediment none

CHEMICAL

Albumin none Urea

Sugar None Indican

MICROSCOPICAL

Casts

Pus

Blood

Other Elements

Negative

Harry Macleod Capt AMC

Pathologist.

EAB

DUCHESS OF DONNAUGHT SAN DIAN BYD GROL HOSPITAL, TAFLOT, BUCKS

PATHOLOGICAL LABORATORY

Date _____ Medical Officer _____

Name _____ Ward _____ Bed _____

URINALYSIS

Quantity in 24 hours _____ Reaction _____

Sp.Gr. _____ Color _____

Consistence _____ Sediment _____

_____

CHEMICAL

Albumin _____ Urea _____

Sugar _____ Indican _____

_____

MICROSCOPICAL

Casts _____

Pus _____

Blood _____

Other Elements _____

_____

Pathologist.

DUCHESS OF CONNAUGHT CANADIAN RED CROSS HOSPITAL, TAPLOW, BUCKS

PATHOLOGICAL LABORATORY

Date 10/4/16 Medical Officer

Name Wills Ward Alex 2 Bed 23

URINALYSIS

Quantity in 24 hours Reaction Acid

Sp.Gr. 1018 Color light-amber

Consistence slightly turbid Sediment none

CHEMICAL

Albumin none Urea

Sugar None Indican

MICROSCOPICAL

Casts

Pus Some pus cells.

Blood

Other Elements

Harry Maule Cast MRC

Pathologist.

C.A.B.

DUCHESS OF CONNAUGHT CAN.DIAN R.C.C. HOSPITAL, TAYLOR, BUCKS

PATHOLOGICAL LABORATORY

Date _____ Medical Officer _____

Name _____ Ward _____ Bed _____

URINALYSIS

Quantity in 24 hours _____ Reaction _____

Sp.Gr. _____ Color _____

Consistence _____ Sediment _____

_____

CHEMICAL

Albumin _____ Urea _____

Sugar _____ Indican _____

_____

MICROSCOPICAL

Casts _____ _____

Pus _____ _____

Blood _____ _____

Other Elements _____ _____

_____

Pathologist.

PATHOLOGICAL LABORATORY

Date 8 Ap. A M Medical Officer Capt S Dunagan

Name Nuss. Ward Alex 2 Bed 23.

Report of an examination of Sputum

Negative for T.B.

Harry Marie Capt AMC

Pathologist.

CWB

PATHOLOGICAL LABORATORY

Date _____ A M Medical Officer _____

Name _____ Ward _____ Bed _____

Report of an examination of _____

_____

_____

_____

_____

_____

_____

_____

_____

_____

Pathologist.

PATHOLOGICAL LABORATORY.

~~Date~~ 6 Apr. A.M. Medical Officer Capt Barragar.

Name. Niles Ward. Ale 2 Bed.

Report of an examination of Blood

Wassermann Positive

Harry Marr Capt AMC

Pathologist.

cats.

DUCHESS OF CONNAUGHT CANADIAN RED CROSS HOSPITAL, TAPLOW, BUCKS

PATHOLOGICAL LABORATORY

Date 6/4/16 Medical Officer

Name Wills Ward Alex 2 Bed 23

-----oOo-----

URINALYSIS

Quantity in 24 hours Reaction Acid

Sp.Gr. 1008 Colour light amber

Consistence watery Sediment none

CHEMICAL

Albumin none Urea

Sugar None Indican

MICROSCOPICAL

Casts

Pus

Blood

Other elements Negative

Harry Marcel Cast M.B.

Pathologist.

-----oOo-----

CR

DUCHESS OF CONNAUGHT CANADIAN RED CROSS HOSPITAL, TAYLOR, BUCKS

PATHOLOGICAL REPORT

Date _____ Medical Officer _____

Name _____ Ward _____ Bed _____

---oOo---

URINALYSIS

Quantity in 24 hours _____ Reaction _____

Sp.Gr. _____ Colour _____

Consistence _____ Sediment _____

_____

CHEMICAL

Albumin _____ Urea _____

Sugar _____ Indican _____

_____

MICROSCOPICAL

Casts _____

Pus _____

Blood _____

Other Elements _____

_____

Pathologist.

DUCHESS OF CONNAUGHT CANADIAN RED CROSS HOSPITAL, TAPLOW, BUCKS

PATHOLOGICAL LABORATORY

Date 4/3/16 Medical Officer

Name Wells Ward Alex 2 Bed 23

-----oOo-----

URINALYSIS

Quantity in 24 hours Reaction Acid

Sp.Gr. 1008 Colour light amber

Consistence slightly turbid Sediment none

CHEMICAL

Albumin trace Urea

Sugar None Indican

MICROSCOPICAL

Casts

Pus

Blood

Other elements Some Spermatozoa

Harry Moore Capt RAMC

Pathologist.

---------oOo---------

C.O.R.

BUCHNER OF CONNAUGHT CAMPBELL AND GROVE HOSPITAL, TAYLOR, BUCKS

PATHOLOGICAL LABORATORY

Date _____ Medical Officer _____

Name _____ Ward _____ Bed _____

---oOo---

URINALYSIS

Quantity in 24 hours _____ Reaction _____

S.G. _____ Colour _____

Consistence _____ Sediment _____

_____

CHEMICAL

Albumin _____ Urea _____

Sugar _____ Indican _____

_____

MICROSCOPICAL

Casts _____ _____

Pus _____ _____

Blood _____ _____

Other elements _____ _____

_____

Pathologist.

---oOo---

DUCHESS OF CONNAUGHT CANADIAN RED CROSS HOSPITAL, TAPLOW, BUCKS

PATHOLOGICAL LABORATORY

Date 3/4/16 Medical Officer

Name Wills Ward Alex. 2 Bed 23

----oOo----

URINALYSIS

Quantity in 24 hours Reaction Acid

Sp.Gr. 1010 Colour light amber

Consistence slightly turbid Sediment none

CHEMICAL

Albumin none Urea

Sugar None Indican

MICROSCOPICAL

Casts

Pus

Blood

Other elements

Negative

Harry Marcellet Capt AMC

Pathologist.

--------oOo--------

CAB

DUCHESS OF COMMAUGHT CANADIAN RED CROSS HOSPITAL, TAYLOR, BUCKS

PATHOLOGICAL LABORATORY

Date _____ Medical Officer _____

Name _____ Ward _____ Bed _____

----ooo----

URINALYSIS

Quantity in 24 hours _____ Reaction _____

S.G. _____ Colour _____

Consistence _____ Sediment _____

_____

CHEMICAL

Albumin _____ Urea _____

Sugar _____ Indican _____

_____

MICROSCOPICAL

Casts _____ _____

Pus _____ _____

Blood _____ _____

Other elements _____ _____

_____

Pathologist.

----ooo----

DUCHESS OF CONNAUGHT CANADIAN RED CROSS HOSPITAL, TAPLOW, BUCKS.

PATHOLOGICAL LABORATORY.

Date. 30/3/18 Medical Officer

Name Wills Ward Aux 2 Bed 23

-----oOo-----

URINALYSIS.

Quantity in 24 hours Reaction Acid

Sp.Gr. 1012 Color. light amber

Consistence. watery Sediment. none

CHEMICAL.

Albumin. trace Urea.

Sugar. None Indican.

MICROSCOPICAL.

Casts.

Pus. A few pus cells

Blood. T.R.B. Ces.

Other elements.

Henry Marcel Capt AMC

Pathologist.

----------oOo----------

C.A.B.

[923] W15382/M128 1000m 1/16sv 29 G & S. 86

Forms I. 1202 / 31

Army Form I. 1202.

DIET AND EXTRA SHEET FOR PATIENTS IN HOSPITAL, AND EXTRA SHEET FOR DINING HALLS, AND KITCHEN SUNDRIES.

Hospital, at _____ Period from _____ to _____

Regtl. No.	RANK AND NAME (Surname first)	Corps	Squadron, Troop, Company, or Battery	Age	Service	DISEASE
22780	8th Batt - 1st Sergt. Pte Wills			45	18 mos	V D

Ward Number	Number in Admission and Discharge Book	Admitted into hospital	Discharged from hospital	Religious denomination
		Mar 29 1916	19	

If allowed up during certain hours, if fit for light hospital duty, or able to take meals in the Dining Hall, state so	Date Mar	Name of diet first time in full, afterwards abbreviated — For Dining Hall, state number of patients	EXTRAS OR KITCHEN SUNDRIES (Quantities in Words)	Initials of Medical Officer (first time name in full). All spaces in which no entries have been made must be severally obliterated by the Medical Officer thus ——— before he signs his name or initials.
Bed	29	Soft	2	Carbarage
	30	Half	2	CAB
	31	"	2	CAB
Apr	1	"	2	CAB
	2	"	2	CAB
	3	"	2	CAB
	4	"	2	CAB
	5	"	2	CAB
	6	"	2	CAB
	7	"	2	CAB
	8	"	2	CAB
	9	"	2	CAB
	10	"	2	CAB
	11	"	2	CAB
	12	"	2	CAB
	13	"	2	CAB
	14	"	2	CAB
	15	"	2	CAB
	16	Full		CAB
	17	"		CAB

TOTAL IN FIGURES

I certify that the above Diets,† Drinks,† Extras,† and Sundries† were ordered by me for* _____ and that they were necessary.

W. Beresford Officer in Charge*

NOTE.—Extras may be ordered without at the same time ordering a Diet. After Diets or Extras have been entered on the Diet Sheet, no further entry need be made until a change is considered necessary. The entries will always be written in full opposite the date when any change is made; also on the day of discharge, or when a patient is transferred from the care of one M.O. to another.

*Insert here "Patient," "Dining hall," or "Kitchen."
†Delete as required to render the certificate complete.

CLINICAL CHART.

(To be attached to Case Sheet.)

Corps 8th Batt. 1st Coy. Military Hospital D.of C. R.C.A.

No. 22780 Rank and Name Pte Wills Age 45 Service 18 mos

Disease V.D.H. Date of admission Mar 29 1916 Date of discharge 15/4/16 Result Improved

Dates of Observation	Mar 29	30	31	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Days of Disease																			
Temperature Fahrenheit (Time A.M.P.M.)																			
Pulse per Minute	72	72	94	84	84	84	80	84	78	84	72	84	90	90	100	94	90	94	92
Respirations per Minute	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18
Motions per 24 hours																			

(1002.) W9043—1195. 499,500. 1/15. K. & K. Forms/B. 181/3.

Signature C. N. Barager In charge of case.

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

No. 19469-W-1.

Name Wills, William
Surname Christian Name

Regimental Number 422780 Rank Pte.

Unit 11th Bn.

Original Unit 44th Bn.

District where paid M.D.4.

Date of Discharge 9-12-16.

P. D. P. Filing Number 3-8-4.

Address (in full) 206 A. St. Antoine St., Montreal, P.Q.

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

L. L. 22573—M. & D. 8009.

Total Credits 91 days		FIRST PAYMENT Cheque No. A	Date	Amount 30 days		SECOND PAYMENT Cheque No. B	Date	Amount 30 days		FINAL PAYMENT Cheque No. C	Date	Amount 31 days		Balance Over-payments to be Recovered		Total Amount Paid	
100	10	144	31-7-17	33	00	143	10-8-17	33	00	146	27-9-17	34	10			100	10

Remarks:

M. F. W. 127.
60M—6 17.
1772 39-1140.

File No. 19469 W 25

WAR SERVICE GRATUITY.

Register No. Spec Reg
7/2/21 HD

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

Reg. No. 422980

Name Wills Wm

Address

Less further debit balance
Net due paid as below

TO SOLDIER TO DEPENDENT

Ag. No	Ch No	Amount	Ag No	Ch No	Amount

Director of Records
Estates Dept
Ottawa
W A Ebell
6-3-23

Pay Soldier $

Clerk

Dependent

Address

Pay Dependent $

Days 1 yr Rate 70 Due 280.00

Less P.D.P. credited 100.10

Less further Dr. Bal. or overpayment.

Net 179.90

R 112 26-10-20

Date	Ck. Order	Ck. No.	Amount	Remarks.	Date	Ck. Order	Ck. No.	Amount.
1					1			
2				Not Eligible under 2/19	2			
3				Soldier died prior 1/11/19	3			
4				No Sa Paid	4			
6-3-23			179 90		5			
6					6			

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

L Ricard
13/10/20

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

M. F. W. 41.
10m.—4-16.
1772-39-889.

Name Pte Wells Wm.

Regimental No. 422788

Unit 14th & 11th Battn.

Date of enlistment 19/4/16

Place of " Winnipeg

Married (yes or no)

Amount of pay assigned monthly $ ✓

To whom payable ✓

Name and address of next-of-kin Mr Wells. Scotland

154

Date and place discharged Montreal P.Q. Dec 9th 1916

Reason for discharge Medically Unfit

Character on discharge

L. L. Job 502 M. & D. 6578.

	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	Credit. Bal For:	Remarks, Casualties, etc.
													Chg.					
1916 July	1	31	31	1.00	31 00	31	10	3 10		34 10			28 60		5 50	34 10	✓	✓ Ab. W.L. 8/7/16-12/7/16 5 Day pay Grey Nuns Conv; Hosp. 196
August	1	31	31	1.00	31 00	31	10	3 10		34 10			27 50		6 60			✓ A.W.L. July 31st 5/8/16 O.H. 13.
September	1	30	30	1.00	30 00	30	10	3 00		33 00			8.00.			33 00	25 00	25.00 Carried Forwd.
October	1	31	31	1.00	31 00	31	10	3 10	25 00	59 10			8 00			59.10	51 10	Cr From. Left.
November	1	30	30	1.00	30 00	30	10	3 00	51 10	84 10						84 10	84 10	Cr From Left.
December	1	9.	9	1.00	9 00.	9	10	90	84 10 ×	94 00			8 00			94 00		✓ Cr Clothing
								6.6.	13 00	13 00			86 00			13 00		× Cr Bal from. 9 Nov.
													13 00					

Discharged - 9.12.16.

Lt. Colonel
Officer Paying Casualties

Name.....

Regimental No.

Unit

Date of enlistment

Place of "

Married (yes or no)

Amount of pay assigned monthly $

To whom payable

Name and address of next-of-kin

Date and place discharged

Reason for discharge

Character on discharge

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

M. F. W. 41.
10m.—4-16.
1772-39-889.

Name Wills William Pte

Regimental No. 42278 X (42278H)

Unit 44th Bn.

Date of enlistment

Place of "

Married (yes or no) No

Amount of pay assigned monthly $ Nil

To whom payable

~~Name and~~ address of next-of-kin home G. Del. Montreal

32 5/16 3 mo. Conv. Home

31 5/16 ad. Grey Nuns Conv. Home Montreal

Date and place discharged

Reason for discharge Discharged 9-12/16

Character on discharge

A. S. Metagama 20/5/16 Class 2 649-W-2252

L. L. Job 502 M. & D. 6578.

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	Remarks, Casualties, etc.
8/5/16	7/5/16 30/6/16	54	1	54	54	10	540	20878	26818							L.P.C.
														x 487		x adv. England
														° 973		° Bon Boat
														100		D.D. Quebec
									Cr Balon Trans					15358	26818	
Pd by P.M.M.D. 4 to Dec 9/16 Discharged to Pension																Pd from 1-7-16 4 m.D.
Int on D.P. C.B. List #12 31/5/16									62							

Pensioned
Dec 10-16

Name.....

Regimental No.

Unit

Date of enlistment

Place of "

Married (yes or no)

Amount of pay assigned monthly $

To whom payable

Name and address of next-of-kin

Date and place discharged

Reason for discharge

Character on discharge

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

P—56

Rank Pte. Name WILLS William Reg'l No. A 22784

Unit C.C.A.C. ~~44th Bn~~ If in perm. Corps, What Unit? Married or Single Single

Place and Date of Enlistment Winnipeg, 19 April 1915 Place of Birth Scotland

Name and Address, Next-of-Kin George Wills

72 Summer Sy, Aberdeen, Scotland Relationship Brother

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place 4-5-16 Canada 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.
June 1	30	30	1	30 -	30	10a	3 -		33 -			12 50			30 -	3 -	To 8th Batt 31-7-11
												17 50					
July 1	31	31	1	31 -	31	10a	3 10		37 10			20 -			20 -	17 10	
	adjustment of exchange							1 33				50 00				18 43	
Aug.	1-31	31	1c	31	31	10	3 10	10 -	62 53			5 48			5 48	57 05	G. 10c Clothing allowance
Sept.	1-30	30	1c	30	30	10	3 -		90 05			5 36			5 36	84 69	
Oct.	1-31	31	1c	31	31	10	3 10		118 79			5 23			5 23	113 56	
Nov	1-30	30	1	30 -	30	.10	3 -		146 56			5 36			5 36	141 20	
Dec.	1-31	31	1	31 -	31	10	3 10		175 30			761 1134 761			13 95	161 35	
Jan	1-31	31	1	31 -	31	.10	3 10		195 45			4867			53 90	141 55	
Feb	1-29	29	1c	29 -	29	.10	2 90		173 45			5 22			5 22	168 23	
March	1-31	31	1.	31	31	10	3 10		202 33			26 94			26 94	175 39	Trans 66 to 15/4/16
				305			30 50	11 33	346 83			171 44			171 44		

Carried forward to Large Ledger sheet

Bce trans to New Ledger

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						

Married or Single: S

Place of Birth: Scotland

Name and Address of Next of Kin: George Wills
72 Summer Sy. Aberdeen, Scotland

Relationship of Next of Kin: Brother.

Name and Address of Next of Kin:

Relationship of Next of Kin:

Separation Allowance Monthly $ — Effective (Date):

Payable to:

Relationship of Dependant:

Casualties, Promotions, &c.

Particulars	Effective Date	Authority

Admissions to Hospital, &c.

Date Admitted	Date Discharged	V. or A.	Name of Hospital
31.5.16	15.6.16		62 cases

Reg'l No. 422784 Rank Pte. Name Wills William

If in Permt. Corps What Unit — Unit 8th Bn. — Transferred to Class — Date 16.4.16 — Authority Bo 17-2.4.16

Permanent Force Allowances — Transferred to — Date — Authority

Place of Attestation Winnipeg — Transferred to — Date — Authority

Date of Attestation Feb 19/15 — Transferred to — Date — Authority

Assigned Pay Monthly $ — Date Effective

Payable to — Relationship

Assigned Pay Monthly $ — Date Effective

Payable to — Relationship

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

Discharge Date and Place 7/5/16 Canada — Reason and Authority Cele. I 7/5/16.

Account Transferred to Non-Effective Branch (Date)

Account Transferred to Officers' Pay Branch (Date)

PAY OFFICE, M.E. BRANCH, JUN 29 1916, CANADIAN CONTINGENTS

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
															34 6 83															171 44	175 89				Balance fwd.
4/1-15	15	1=	15 -		15	10	1 50								16 50							11/4/16			4 87					4 87	187 02				Transfer to C.C. as to Pay Bo 17/2.4.16
15/4/16 to 15/5/16	22 1	22	22	10	2 20										24 20					29/4/16					2 44					2 44	208 78				L.R.C. 7/5/16. C.C. I 7/5/16. Pay Book Winnipeg.
																															208.78				
															208 78	629											487		20391	208 78					*1 adv. P.M. C.C.D. Bath Pay Con. P.M. May 1916
Sept 17														62	62														62	62					Trans. to "Canada Disc'ge a/c". 62c Lost on Sep Pay list No. 12

Also no trace to 8th Bn. Pay.

Trans.d to "Canada Disc'ge a/c".

Date	Pay				Field Allowance				Working or Special Pay				Assigned Pay Credits	Other Credits	Total Credits	Acquittance Rolls								Cash Payments				Assigned Pay	Other Charges	Total Debits	Balance		Pay Withheld or Deferred	Pay Available for Issue	Remarks
	No. of Days	Rate	Amount $	Amount c.	No. of Days	Rate	Amount $	Amount c.	No. of Days	Rate	Amount $	Amount c.				1		2		3		4		1	2	3	4				Credit	Debit			
																No.	Date	No.	Date	No.	Date	No.	Date												

a.22780 B-1

ORIGINAL.

Army Form B. 178.

To be used for recruits enlisting direct into the Regular Army only. Army Form B. 178A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

C.C.A.C.

MEDICAL HISTORY of

Surname Wills Pte. *Christian Name* William

10 APR 1916

TABLE I.—GENERAL TABLE.

Birthplace ... Parish Aberdeen County Scotland.

Examined ... ... on 19th day of April 1915. at Winnipeg

Declared Age ... ... 35. years 183. days.

Trade or Occupation ... Stone Cutter.

Height ... ... 5. feet, 5 3/4. inches.

Weight ... ... lbs.

Chest Measurement. Girth when fully Expanded. 36 inches.

Range of Expansion. 3 1/2 inches.

Physical Development ... Good

Vaccination Marks Arm ... Right Left

Number ...

When Vaccinated ... ... April 1915

Vision ... ... R.E.—V= Good L.E.—V=

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

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

Approved by (*Signature*)

(*Rank*) *Medical Officer.*

Enlisted ... ... at Winnipeg on 19 day of April 1915.

Joined on Enlistment ... Corps. 44th Batt. C.E.F. Regtl. No. A 22780.

Transferred to ... ... Transferred to 32nd Reserve Battalion C.E.F. 8th Batt.

Became non-effective by ...

on day of 191 .

(*Signature*)

(*Rank*)

Entries in Red Ink made from Attestation Sheets.

(7278.) Wt. 2869—1662. 200M. 5/15. J. T. & S., Ltd. Forms B. 178.

P.T.O.

AUG 18 1915

for D. D. M. S.

Table II.—Only for Admissions to Hospital or to the Sick

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Rem
	Day	Month	Year	Day	Month	Year			
DUCHESS OF CONNAUGHT, CANADIAN RED CROSS HOSPITAL, Taplow, Bucks.	29	3	16	17	4	16	V. D. H.	19	Ca 1st dy Ba Rh Imp
Can. Conval. Hospital, Bear Wood.	17	4	16	3	5	16	Do	16	D

[illegible]t in the case of Warrant Officers treated in quarters.

[illegible]rks bea[illegible]g 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
[illegible]set of present symptoms about [illegible] [illegible] c̄ anorexia nausea vomiting. [illegible]pnoea. Double Mitral Murmur. [illegible]ere osclerosis. Positive Wassermann. [illegible]in.[illegible] 10 yrs ago. Pneumonia 3 yrs ago [illegible]vered. Sent to Bearwood [illegible]ischarged to C.C.A.C. for Medical Board 3/5/16	A Barager Capt [illegible] J H Moore Capt

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
	Typhoid Inoc Vaccinated
May 4 1916	Board recommends "Discharge as permanently unfit" Chas. Munro Capt. President. PRESIDENT, STANDING MEDICAL BOARD
4- MAY 1916	Approved S.L. Walker Capt. for A.D.M.S. Canadian Training Division, Shorncliffe. APPROVED CAPTAIN ... for D.A.D.M.S. CANADIAN TRAINING DIVISION, SHORNCLIFFE.

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
S.S. Grampian	June 1	June 9			

D.M.S. 1312.
Army Form B. 179.
Canada.

Medical Report on an Invalid.

Station Canadian Convalescent Hospital, Bear Wood, Wokingham, Berks.

Date 26-4-16.

1. Unit. 8th. Batt. 11th Bde
2. Regimental No. A 22780
3. Rank Private
4. Name Willis W.
5. Age last birthday 45
6. Enlisted on 19th. April, 1915. at Winnipeg
7. Former Trade or Occupation Stone Cutter

8. **Disability.**

Valvular Disease of Heart. Mitral.

Statement of Case.

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.

9. Date of origin of disability. 1st. March -1916.

10. Place of origin of disability. Pleogstreet

11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.

Fainted while on duty in trenches began vomiting - Fainted again next day - Pain in Heart region - Was sent to Baillaul Rest Station for 1 week - To Mondescat 5 days - Hayesbrook 1 day - Etables 2 days - Taplow 3 weeks - Bear Wood on April 17th.1916.

12. (*a*) Give your opinion as to the causation of the disability.

Exposure & wet.

(*b*) If you consider it to have been caused by wounds received or illness contracted (1) in the presence of the enemy (2) on active service, explain the specific conditions to which you attribute it. (*See notes on page 3*).

1- yes
2- yes - wastaken ill on duty in trenches, exposed to all weathers.

13 What is his present condition?

Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.

Weak and faint - shortness of breath on exertion. Pain on left side of body and over Heart, also in legs. Cannot do any work to speak of. Tumultuous action of heart, with distinct murmur.

14. If the disability is an injury, was caused

(*a*) In action?

(*b*) On field service?

(*c*) On duty?

(*d*) Off duty?

Not Applicable

15. Was a Court of Inquiry held on the injury?

If so—(*a*) When?

(*b*) Where?

(*c*) Opinion?

Not Applicable

16. Was an operation performed? If so, what? No.

17. If not, was an operation advised and declined? No.

18. *In case of loss or decay of teeth.* Is the loss of teeth the result of wounds, injury or disease, directly* attributable to active service? Not Applicable

19. Do you recommend

(*a*) Fit for duty? No.

(*b*) Fit for light duty? No.

(*c*) Invalided to Canada? No.

(*d*) Discharge as permanently unfit? Yes.

S.R. Hay Capt. C.A.M.C.

Officer in medical charge of case.

I have satisfied myself of the general accuracy of this report, and concur therewith, ~~except~~†

Station CANADIAN CONVALESCENT HOSPITAL, ~~Bearwood, Wokingham, Berks.~~

Date 29 APR 1916

R. Woodhouse Major,

Officer in charge of Hospital.

Officer Commanding,
Canadian Convalescent Hospital,
Bearwood, Berks.

* Loss of teeth on, or immediately after, active service, should be attributed thereto, unless there is evidence that it is due to some other cause.

† Delete this word if no exceptions are to be made.

Opinion of the Medical Board.

NOTES.—(i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as it is essential that the Members of the Pensions and Claims Board should be in possession of the most reliable information to **enable them to decide upon the man's claim to pension.**

(ii.) Expressions such as "may," "might," "probably," &c., should be avoided.

(iii.) The rates of pensions vary according to whether the disability is attributed to wounds or injuries received or illness contracted, (1) in the presence of the enemy, (2) on active service. It is therefore essential when assigning the cause of the disability to differentiate between them (*see* Article 591 to 598 of the Canadian Pay and Allowance Regulations as amended G.O., 57, May 1st, 1915).

(iv.) In answering question 20 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.

20. (*a*) State whether the disability is the result of injuries received or illness contracted, (1) in the presence of the enemy, (2) on active service. — 1 Yes 2 Yes

(*b*) If due to one of these causes, to what specific condition do the Board attribute it? — General service conditions activating a latent disability. He had rheumatic Fever 10 years ago but recovered completely he says. Was well in every way till after some months in France. Began about Jan 1916 to have shortness of breath but managed to continue till March. Considerable enlargement of Heart with double mitral lesion. No signs of aortic regurgitation apart from a suggestive pulse. No history of syphilis. Is short of breath on slight exertion. G. Wassermann positive G.H.

21. Has the disability been aggravated by

(*a*) Intemperance? No

(*b*) Misconduct? No

22. Is the disability permanent? Yes

23. If not permanent, what is its probable minimum duration? — Not applicable.

To be stated in months.

24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present? — ½ for 6 months then ¼ permanently due to active service.

In defining the extent of his inability to earn a livelihood, estimate it at ¼, ½, ¾, or total incapacity.

25. If an operation was advised and declined, was the refusal unreasonable? — Not applicable.

26. Do the Board recommend

(*a*) Fit for duty?

(*b*) Fit for light duty?

(*c*) Invalided to Canada?

(*d*) Discharge as permanently unfit — Yes

APPROVED
CAPTAIN C.A.M.C. OF B. & O. FOR
ADJUTANT GENERAL
COMMANDING
CANADIAN TRAINING DIVISION, SHORNCLIFFE.

Signatures :— Chas Humphrey Capt Can C President.

Station SHORNCLIFFE—C.C.A.C. (19, Westbourne Gardens, Folkestone.) — Members.

Date 4 - MAY 1916

Approved.

Station Shorncliffe

Date 4- MAY 1916

A. L. Walker
Administrative Medical Officer.
Capt. for A.D.M.S.
Canadian Training Division, Shorncliffe.

PENSIONS AND CLAIMS BOARD, Canadian Expeditionary Force, assembled at Folkestone, Kent, England, on the day of 191

Members of Board.

LIEUT.-COL. SIR H. MONTAGU ALLAN, C.V.O., *President.*
LIEUT.-COL. W. GRANT MORDEN.
MAJOR JOHN L. TODD, C.A.M.C.
MAJOR MAURICE ALEXANDER, *Legal Adviser.*

Proceedings.

The Board having considered the evidence of the man marginally noted, and the documents submitted, hereto attached, which form part of these Presents, marked

_____ *President.*
Lt.-Col.

_____
Major.

_____
Lt.-Col.

_____
Major.

CASE HISTORY SHEET.

MILITARY Hospital. Ste Anne de Bellevue Station.

No. 22780 Rank Private Name Wells, Wm. Age 47

Unit I.S.C. Completed years of service (Where and how long) Can. 2 yrs. 11/12- E.2/12-F.1.2/12.

Date of admission March 1, 1919. Date of discharge

Diagnosis (1) Myocarditis (2) Miliary TBc. (3) G.S.W. Rt. Humerus. Place of origin France.

FILE 17/7/19

CONDITION ON ADMISSION AND PROGRESS OF CASE

Prior to enlisting always perfectly healthy except measles as a child. Enlisted in April 1915. Reached France in June '15 and spent 9 months in trenches in 8th Battalion. In Spring of 1916 he fainted in trenches whilst on Sentry. Had been feeling out of sorts for about one month prior to this. Evacuated through usual channels to D. of C. Hospital, Taplow, Eng., as a bed patient. Complained at that time of stabbing pains throughout chest on deep inspiration, and shortness of breath at rest aggravated by slight exertion and general weakness. Invalided to Canada May 31.1916. After 7 months in Grey Nuns hospital, Montreal, was able to get around but could not climb stairs or walk up a long gradient. Was discharged from the Service and did light work till Dec.15.1918 when he was re-admitted to Montreal General Hosp., with same symptoms much aggravated. Admitted to Ste Anne de Bellevue March 1,1919.

Inspection: Poorly nourished. Cyanosis lips, ears. Supra and infraclavicular fossae markedly depressed with recession of all intercostal spaces. Anxious expression. Apex beat 5th inter space, 4 inches from mid sternal line, ½ inch external to nipple, diffuse. Respirations at rest 26. Pulse at rest 80, irregular. Oedema of feet and legs, some abdominal ascites.

FAMILY HISTORY (Tuberculosis, mental or nervous diseases.)

Lungs: Anterior - On percussion no impairment percussion resonance. Vocal fremitus diminished upper left chest, vocal resonance decreased upper left chest. Breath sounds bronchial in character with marked friction rub throughout right chest. Percussion resonance posteriorly impaired both sides verging on flatness both bases. Diminished vocal fremitus and Vocal resonance posterior. On auscultation bronchial breath sounds bronchial marked friction rub along vertical border of right scapula left base. Absence breath sounds right base with moist rales angle right scapula.

TREATMENT (Especially any specific or special form.)

Heart: Relative Cardiac Dulness begins 4th rib and extends 4 inches to left mid sternal line ½ in. to right. At Apex loud blowing murmur systolic. At base p^2 + no murmur heard. Line of propogation murmur to left axilla.

CONDITION ON DISCHARGE (and disposal made of case.)

Family History: Father alive and well. Mother died in 1918 of old age

Pathological: Acid. Albumin - trace. Sugar 0. S.G.1030. Micro. Nil.

Date

Medical Officer i/c case.

-Over-

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

X-Ray: Miliary tuberculosis of both lungs.

July 14.1919: Auricular fibullation still marked with systolic murmur at apex persisting.
Liver to umbilical region.
Marked oedema of feet and legs.

16.7.19: Recommend re-transfer to I.S.C. as a bed patient.

(Col.Browne).

J. A. Carter Hall

Forms
I. 1237
10

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	22780	Pte	Wills	Wm

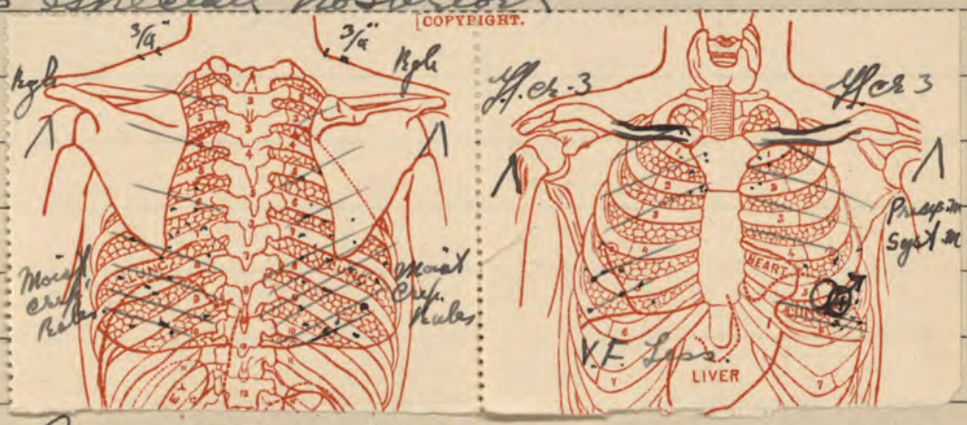
Year	Unit.	Age.	Service.
1916	8th Can.	45	8/12

Station and Date.

Disease

Dyspnea short. The presystolic definitely limited to small area. a_2 and P_2 heard, but not greatly accentuated. Pulse strikes finger rather suddenly, small between systoles. Arteries palpable, and pulsation visible in brachials & radials. Tension not high. Rhythm:- an extra systole at times. In erect posture - Presyst. mur. less marked. Rate increased.

Resp. System: Expansion only fair, V.F. generally diminished. Resonance generally somewhat impaired especially at bases posteriorly & esp. R. base. Breathing generally harsh. Crep* rales along sternum below inner end of clav. Moist rales at both bases especially posteriorly.



G.U.S. Trace of Albumin. Sp. Gr 1008-1012.

N.S. Pupils react normally. Abdom & Patellar reflexes normal. No ankle clonus.

Muscular System - Wasted. - No marked myxoedema.

*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.

P.T.O.

Station and Date.	
6/4/16	Wassermann Positive:
	Sputum examination:
	Treatt. Good diet, Rest. Pot Iodide
	℞ Pot Iodide. ℥ii
	Ammon Chloride. ʒiss
	Syr of Tolu. ℥iss
	Elix Lact. pepsin q.s. ad ℥iii
	sig. ʒi t.d.s p.c. ex aqua CAB
10/4/16.	no thrill no shock. apex well out
Sid 0 Mr Osler.	Mitral Syst. which is
	Sharp & well defined. 5th just below N. a
	rumble in Diastole. Different from
	pure Stenosis. Not a case with
	well marked thrill & no murr in Syst
	Aorta Sds clear. Definite Organic
	mitral
12/4/16.	Somewhat improved. CAB
	To ʒiss for a while
12/4/16	2 extractions + prophylaxis J.H.McA.
16/4/16.	Improved. Bear
	Sent to Bearwood Park.
	A M Forrester
	Capt RAMC

This space to be left blank for the Chelsea Number.

Army Form B. 268.

ficate Re Discharge D

Pro ceedings on Discharge.

(When forwarded for confirmation the documents named on page 4 should be enclosed.)

No. A/22750 Army Rank Pte.

Name Wills, William.
(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)

Corps C. C. A. C.

Battalion, Battery, Company, Depôt, &c. 44th Bn 19/4/15
(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)

Date of discharge

Place of discharge

1. *Description at the time of discharge.*

Age 35 years 7 months

Height 5 feet 5¾ inches

Chest measurement { girth when fully expanded 36 ins. / range of expansion 3½ ins.

Complexion Dark.

Eyes Brown

Hair Brown.

Trade Stone-Cutter.

Intended place of residence (To be given as fully as practicable)

Descriptive marks.

(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)

2. The above-named man is discharged in consequence of being no longer physically fit for war service.

K.R. 40. para 392 XVI

(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)

To be filled in on the soldier quitting the Colours.

3. Military character :— Original Documents Unavailable

Character awarded in accordance with King's Regulations :—

Original Documents Unavailable.

Certified that the above is an accurate copy of the character given by me on Army Form B. 2067* and that Army Form D. 489 was awarded in this case.

Initials of Commanding Officer.

Army Form B. 2088 has been issued to*

A1933 Wt. W. 13141/283 70,000 3/15 D. D. & L. Sch. 39

Forms B. 268 39

* Strike out if not applicable.

[OVER.

5. He is in possession of the following number of G.C. badges (if the man is a N.C.O. and enlisted prior to 1st July, 1881, the number he would have been entitled to had he not been promoted should be stated).

Is it probable that he will be entitled to another good conduct badge before the confirmation of these proceedings?

Classification for service, or proficiency pay... ... ... Class _____

6. Campaigns, Medals and Decorations _____

Certificate of education ..... _____

7. His accounts are correctly balanced, and I have impartially inquired into all matters brought before me in accordance with Regulations.

(Place) _____ E Warriot major

(Date) _____ *Commanding* The Canadian Casualty Discharge and Exercise Depot, Prior Park, Bath. *Battn.* *Regiment.*

8. *Certificate to be signed by the soldier on discharge.*

hereby acknowledge that I have received all my pay and allowances (including clothing allowance), and all just demands up to the present date, subject to the reservations of the claims noted on the 3rd page.

(*Place*) _____ _____ (*Signature of Soldier.*)

(*Date*) _____ _____ (*Signature of Witness.*)

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

9. *Additional certificate in the case of a soldier who takes his discharge at 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 towards engagement to _____ (the date to which the record of service is completed) _____ years _____ days.

Further service " " _____ (the date of confirmation of discharge) ... ... _____ " _____ "

Total ... _____ " _____ "

11. *Confirmation of discharge.*

The discharge of the above-named man is hereby confirmed for (date)

(Place) _____

Signature _____

(Date) _____

Commanding officers (or the Paymaster, if at Netley) will issue to every discharged soldier whose claim to pension, either on account of service or disability, is to be brought under the consideration of the Chelsea Board, a memorandum for his guidance on Army Form D. 401, and will at the same time transmit to the Secretary, Royal Hospital, Chelsea, a descriptive return of the man on Army Form D. 400.

Class 3

This space to be for numbers.

Proceedings on Discharge.

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

No. A22780

Rank Private

Name Wills, William

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

Corps (Squadron, Battery or Company) 44th Battalion.

Date of Discharge December 9th 1916.

Place of Discharge Montreal, P.Q.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 35 years months.

Height 5 feet 5 inches.

Complexion Dark

Eyes Brown

Hair Brown

Trade Stone-cutter

Intended place of residence (To be given as fully as practicable.) 206a St Antione St Montreal, P.Q.

Descriptive Marks

Scar over left eyebrow.

2. The above-named man is discharged in consequence of Medical Unfitness due to:- Double mitral murmur with enlarged heart. H.Q. Authority Dated November 23rd 1916. 4. D. 22-W-290.

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.

Documents not available

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.)

Light work.

M. F. B. 218.

100m.—6-16.
H. Q. 1772-39-113.

(OVER)

Stat 10/16/19

Amended 22.1.17 RS.

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.....

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).....

(Date)..... *Commanding* .....

8. **Certificate to be signed by the Soldier on Discharge**

I hereby acknowledge that I received all my Pay, Allowances and Clothing, and all just demands, up to the present date, subject to the reservations of the claims noted on the third page.

(Place) Montreal, P.Q. W. Wiles ..... *(Signature of Soldier.)*

(Date) December 9th 1916. S. Loddes ..... *(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 1 years 280 days.

11. **Confirmation of Discharge.**

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

(Place) Montreal, P.Q.

(Date) .....

(Signature) G. E. Hall

Captain,

O.C. "A" Unit,

Military Hospitals Commission's Command.

MILITARY HOSPITALS COMMISSION HEADQUARTERS DEC 22 1916 "A" UNIT

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.

W. Wills

(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.

AUDITOR | PAYMASTER

M. OR S. S.

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

REGT. No. 422784 RANK Pte NAME (IN FULL) Wills Wm.

NEXT OF KIN: George Wills — RELATIONSHIP: Brother
ADDRESS: 72 Summer Sq. Aberdeen. Scotland
IS SEPARATION ALLOWANCE PAID? — DATE EFFECTIVE
TO WHOM PAID: Nil — RELATIONSHIP
ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F.: 8th Bn. — IF IN P.F. WHAT UNIT? — BLOCK LETTERS SURNAME FIRST
PLACE OF ATTESTATION: Winnipeg — TRANSFERRED TO — DATE — AUTHORITY
DATE OF ATTESTATION: April 19. 1915 — TRANSFERRED TO — DATE — AUTHORITY
ASSIGNED PAY $: Nil — DATE EFFECTIVE
PAYABLE TO — RELATIONSHIP — ANY CHANGE IN ASSIGNEE OR ADDRESS
ADDRESS
STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE
DISCHARGED — PLACE — DATE — REASON — AUTHORITY — IF ENTITLED TO POST DISCHARGE PAY

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.	OTHER CREDITS $	OTHER CREDITS C.	$	C.	TOTAL CREDITS $	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.	BALANCE CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT					153	58			153	58																									153	58	On behalf of P & A 30.6.16
						62			154	20																									154	20	transferred to 8th Bn but not paid. Out on Def. pay.
																															154	20					L.B.C. to Estates 27.4.23

200M-3-19.—L. L. 58788-M. & D. 9985.
M. F. W. 2596.
1772-39-1398.