

# ORIGINAL MEDICAL HISTORY SHEET

Surname MacKellar, Christian Name Malcolm Ross,

Examined { on 2nd day of October 1915  
at Winnipeg, Man.

Approved by F. T. Cadham

Birthplace { City or Town Glencoe,  
County Ontario, Canada.

Rank Capt. C.A.M.C. M.O.

Apparent age 22 years 3 months,

Trade or occupation Clerk.

Date Fit or Unfit EXAMINED FOR RE-ENGAGEMENT  
24 MAY 1917

Height 5 Feet 9 Inches

 M.O.

Weight \_\_\_\_\_ Lbs. M.O.

Chest measurement { Minimum 35 inches M.O.

{ Maximum expansion 4 inches M.O.

Physical development \_\_\_\_\_ M.O.

Small-Pox Marks \_\_\_\_\_ M.O.

Vaccination Marks { Arm Right Left  
Number \_\_\_\_\_

Date Result VACCINATIONS

When Vaccinated last 18/1/16 M.O.

(a) Marks indicating congenital peculiarities or previous disease \_\_\_\_\_ M.O.

Date Result ANTI-TYPHOID INOCULATIONS, ETC.

(b) Slight defects but not sufficient to cause rejection

Birthmark on left leg just above knee

OCT 13 1915 F. T. CADHAM M.O.

OCT 27 1915 F. T. CADHAM M.O.

NOV 17 1915 F. T. CADHAM M.O.

11-10-17 1916 H. Currier

Enlisted on 2nd day of October 1915 at Winnipeg, Man.

	Corps	Reg't Number	Rank	Date
Joined on enlistment	<u>79th C.H. of C.</u>	<u>157904</u> <u>Lieut</u>		<u>2/10/15.</u>
Transferred to.....	<u>14th RESERVE BATTN. C.E.F.</u> <u>A 312 Lt.</u>			

### EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE	DIAGNOSIS	REMARKS
<u>Mallock Barr</u>	<u>16 10 15</u>	<u>G. S. Dr. ...</u>	<u>...</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 noted on next page.

CANADIAN

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				
No. 10, C.F.A.		4	6	16	27	8	16	Gastritis		A107	
No. 7, Con. Camp. B'logme		27	6	16	28	9	16	Wd. shell shock	Dis. to vase details Harfleur	A139	
Base Details		28	9	16	30	11	16	"		A167	
Div. Rest. Station		30	11	16	5	12	16	P.U.O.Z	Rejoined unit	A226A229.	
									Duplicate Medical History Sheet posted to here. <i>M60</i>		
		20	8	18	17	9	18	<i>Shp Arm</i>	<i>W<sup>d</sup> 16-8-18. Healing transfer.</i>	<i>R. W. ...</i>	
		17	9	18				<i>do</i>	<i>no disability</i>		

24 WESTERN GENERAL  
HOSPITAL, MANCHESTER.

*Close*



CAPT. R. W. ...

*[Signature]*

# MEDICAL BOARD REPORT ON A DISABLED OFFICER.

(ALSO TO BE USED FOR DISABLED NURSES.)

Station C.C.O.H. Matlock Bath, Derbys.

Date 16-10-18.

- 1. Rank and Name LIEUT. MACKELLAR; MALCOLM ROSS,
- 2. Unit 43rd Can. Bn. Man.R.D. Seaford, Sussex.
- 3. Age 26 4. Total Service 36 War Service { (a) at home 2 Mos.  
(b) abroad 31 France.
- 5. Address 11th Res. Bn. Seaford, Sussex.

STATEMENT OF CASE.

NOTE.—In answering the following questions the Board will carefully discriminate between the officer's statements and evidence recorded in his medical documents. When possible, a statement by his medical attendant should be attached.

- 6. Disability S.W. ARM. L. PEN. FLESH.
- 7. Date of origin of disability 16-8-18.
- 8. Place of origin of disability France.
- 9. Give concisely the essential facts bearing on the history of the disability (personal and family history, etc.) :—

NOTE.—Boards subsequent to the first should record here the progress of the case since the officer's last appearance.

Wound 3" long, inner aspect arm mid 3rd. F.B. removed at C.C.S.  
To 2nd Western General Hosp., Manchester 20-8-18. To C.C.O.H.,  
17-9-18.



*I concur in the findings of the Board of Medical Officers here reported.*  
*Major, D.A.M.S.*  
*For D.M.S. Canadian Contingents.*

OPINION OF THE MEDICAL BOARD.

NOTES.—(i) The Board will on no account inform the officer of its opinion on any of the following questions.

(ii.) Clear and decisive answers should be filled in by the Board to enable the Ministry of Pensions to come to a reliable decision on the officer's claim to pension, etc.

(iii.) Expressions such as "may," "might," "probably" should be avoided, if possible.

(iv.) When there is more than one disability the replies will distinguish between them.

- 10. Was the disability contracted (a) before entering the service? No.  
(b) in the service? Yes.
- 11. Was it attributable to military service? Yes.  
If so, to what specific military conditions is it attributed? Shell wound.

[Enteric Fever, Dysentery, Malaria, &c., contracted on service in countries where there is a special liability to the disease are to be regarded as attributable to military service.]

- 12. If not attributable to, was it aggravated by, military service? N.A.  
If so, by what specific military conditions? N.A.

- 13. Is it attributable to, or aggravated by, the officer's own negligence or misconduct? If so, in what way, and to what extent? No.

[R.T.O.]

14. What is the officer's present condition? Good. Wound healed and no disability therefrom. Heart and Lungs sound. Nutrition good. Again fit for G.S.



15. To what degree is the officer disabled at the present time? Nil  
(Degrees of disablement should be expressed in the following percentages—100, 80, 70, 60, 50, 40, 30, 20, under 20, or nil.)

16. Is the disability permanent? -----

17. If not permanent, how soon is re-examination recommended? ----- months.

18. Is it necessary that the officer should be re-examined by the same Board? No.

19. What treatment is the officer receiving, and where, and from whom? Baths, Dressings, Massage at Canadian Convalescent Officers' Hospital, Matlock Bath, Derbys.

20. Is the officer in need of special medical treatment of any kind, and, if so, of what nature? No.

21. Does the officer require the constant attendance of another person? No.

22. Officers will be classified by the Medical Board under one of the following categories, the probable period of unfitness for the higher categories being stated. Explanation of these categories is in para. 5 of A.C.I. 158/1918. In case of nurses, omit B. and (i) and (ii) of E.

- A.—Fit for general service Yes.
- B.—Fit for service in a garrison or labour unit abroad N.A.
- C.—Fit for home service:—
  - (i) Active duty with troops N.A.
  - (ii) Sedentary employment only N.A.
- D.—For admission to a command depot N.A.
- E.—Requiring indoor hospital treatment:—
  - (i) In an officers' military or auxiliary convalescent hospital N.A.
  - (ii) In an officers' hospital N.A.
- F.—Permanently unfit for any further military service N.A.

23. In the case of officers suffering from neurasthenia found permanently unfit, has A.C.I. 307 of 1918 been complied with? N.A.

A.C. Rankin, Lt. Col. C.A.M.C. President.  
W. J. McAlister, Major. C.A.M.C.  
E. C. Whitehouse, Capt. C.A.M.C. Members.

"C".



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

MILITARY DISTRICT 3041  
DEC 24 1918  
11920  
CENTRAL OFFICE

FORM TO BE USED FOR OFFICERS

MEDICAL HISTORY OF AN INVALID

COPIES  
1001

Station *Regina*  
Date *Dec 20 1918*  
CANADA

- 1. (a) Unit *12<sup>th</sup> Regt*
- (b) Rank *Lieutenant*
- (c) Surname *McKellar* (d) Christian name *Malcolm Ross*
- 2. Age last birthday *25* Date of birth *July 5 1893*
- 3. Date of appointment to the C. E. F. (for officers of the C. E. F.) *Sept 2 1917*
- Date of reporting for duty (for officers of the Active Militia attached to Units, for duty, or at Annual Training) *Sept 2/17*
- 4. Personal description:
  - (a) Height *5' - 5 1/2"* (b) Weight *150*
  - (c) Complexion *fair* (d) Colour of hair *light brown*
  - (e) Colour of eyes *blue* (f) Scars or tattoo marks *Scars on right arm*
- 5. (a) Address after being struck off the strength of the C. E. F. or after resignation (for use of the Board of Pension Commissioners) *609 24<sup>th</sup> St. Saskatoon*
- (b) Address of Q. C. Unit to whom notification of decision of Board of Pension Commissioners, Ottawa, is to be sent *Regina Bank*
- 6. Former trade or occupation *clerk*

7. Service  
Years *3* Days *2 mos*

C. E. F. *Sept 22 1915 to home*

- 8. Disease or disability (use authorized nomenclature) *Paralysis of function*
- (a) Date of origin *Aug 16 1918* (b) Place of origin *France*
- (c) Cause *shrapnel wound*

9. Present condition. (Important, to be a full description of the present condition or conditions.)  
*Left arm, slight atrophy of muscles circumference of arm of the left to inch smaller than right. Biceps flabby & appears to fall to the ulnar side when relaxed. Hand grip 80% lefting*

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

*power 80%. Complaint of weakness in the arm & states that it comes upon exertion. Vision Ophthalmic normal. General condition good.*  
*arms (on body)*

10. Give a full description of wounds, scars, deformities, signs or symptoms, or abnormal conditions present, but not included in answer 8.  
[Answer to this question cannot be made without stripping the officer and subjecting him to a thorough physical examination.]

4" scar in middle of arm - anterior  
commencing in the middle & running  
around internally at right angles to  
extremity



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

Y A.

12. Did the disability arise on or off duty?

on duty

13. Was a Court of Inquiry held?

no

14. If the disabling condition had its origin before enlistment, has it been aggravated on service?

Yes

(If the answer is in the affirmative, state in percentages, to what extent the pensioner is incapacitated by that aggravation.)

15. Was the disability caused or aggravated by negligence, by vice or by misconduct, or by unreasonable refusal to accept treatment?

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

16. What is the probable duration, in months, of the disability or of each of the disabling conditions if there is more than one?

Indefinite

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

Hospital

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

no

19. Can the former trade or occupation be resumed?

yes

20. Recommendations.

Category C

W. B. ... Capt. Case

Medical Officer by whom the case is brought forward

(Sections 8, 9 and 10 are to be read to the Officer.)

I, the undersigned..... have heard the description of my disability read, and am satisfied (or not satisfied) with it. (If dissatisfied, statement should follow.) I complain in addition of

M. J. MacFellar  
Signature of Officer examined.

OPINION OF THE MEDICAL BOARD

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

*yes*



22. Is the Officer fit for (a) General service (Category A) (Yes or No.)  
 (b) Service abroad (not general service) ( " B.) (Yes or No.)  
 (c) Home service (Canada only) ( " C.) (Yes or No.) *Ciii*  
 (d) Temporarily unfit ( " D.) (Yes or No.)  
 (e) Unfit for service in Categories A, B and C. ( " E.) (Yes or No.)

23. It is certified that the Officer

- (a) ~~Does require treatment.~~  
 (b) Does not require treatment.  
 (c) ~~Should pass under his own control.~~  
 (d) Should not pass under his own control.  
 (Strike out condition not applicable.)

*17*

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

*Category Ciii*

Station

*Regina Park*

Date

*Dec 23<sup>rd</sup> 1918*

*W. R. Brace Capt. SM. Palmer Capt.*  
Members.

APPROVED BY

Date

*2-1-19*

*W. R. Brace*  
Assistant Director of Medical Services.

APPROVED BY

Date

Director General of Medical Services.





1. In using this Form the instructions issued for the guidance of Medical Officers serving on Medical Boards will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of pages 1 and 2 of this Form. The President of the Board of Medical Officers is responsible for the proper completion of the space of page 3, reserved for recording the Proceedings of a Board of Medical Officers.
3. In answering the questions, Medical Officers will carefully obtain and record the officer'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 officer concerned, from witnesses, or from documents.
4. If a complete answer to any question requires more space than that reserved for it, the answer may be continued on the blank space at the foot of this page.
5. The nomenclature of diseases to be followed is that described in "List of Diseases, printed in the order in which they appear in the Annual Report on the Health of the Army", published in London, (1915) by Messrs. Harrison & Sons.

The wound was evidently large & deep lacerating the Biceps muscle & probably with the result that the muscle lacks its full contracting power and normal position for being relaxed & falling to the internal side. The sensations are normal.

*[Faint, illegible handwritten notes and signatures follow, including a signature that appears to be 'J. H. ...' and some scribbled-out text.]*

FORM TO BE USED FOR OFFICERS

MEDICAL HISTORY OF AN INVALID

Station Regina, Sask.

Date Dec 25 1918.



1. (a) Unit 12th D.D.

(b) Rank Lieutenant.

(c) Surname McKellar.

(d) Christian name Malcolm Ross.

2. Age last birthday 25

Date of birth July 5 1893.

3. Date of appointment to the C. E. F. (for officers of the C. E. F.) Sept 2 1917

Date of reporting for duty (for officers of the Active Militia attached to Units, for duty, or at Annual Training) Sept 2/17

4. Personal description:

(a) Height 5' 8 1/2"

(b) Weight 150

(c) Complexion Fair.

(d) Colour of hair Light brown.

(e) Colour of eyes Blue

(f) Scars or tattoo marks Birth mark size of thumb left thigh anterior.

5. (a) Address after being struck off the strength of the C. E. F. or after resignation (for use of the Board of Pension Commissioners) 608 24th St. Saskatoon, Sask.

(b) Address of O. C. Unit to whom notification of decision of Board of Pension Commissioners, Ottawa,

is to be sent Regina, Sask.

6. Former trade or occupation clerk.

7. Service

Years 3

Days 200.

Periods

From

C. E. F. Sept 22/1915

to date.

8. Disease or disability (use authorized nomenclature) Partial loss of function left arm

(a) Date of origin Aug 16 1918

(b) Place of origin France.

(c) Cause Shrapnel wound

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

Left arm slight atrophy of muscles, especially of the biceps, deltoid and latissimus dorsi muscles. Right arm normal. Left hand normal. Left side when relaxed. Left side of the arm is normal. In the arm is stated that it was first seen in the systems normal. General condition good.

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



- 10. Give a full description of wounds, scars, deformities, signs or symptoms, or abnormal conditions present, but not included in answer 8.  
[Answer to this question cannot be made without stripping the officer and subjecting him to a thorough physical examination.]

4" scar in middle of nose anterior commencing in the middle & running round internally at right angle to extremity.



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

N.A.

- 12. Did the disability arise on or off duty?

on duty

- 13. Was a Court of Inquiry held?

No

- 14. If the disabling condition had its origin before enlistment, has it been aggravated on service?

Yes N.A. No

(If the answer is in the affirmative, state in percentages, to what extent the pensioner is incapacitated by that aggravation.)

- 15. Was the disability caused or aggravated by negligence, by vice or by misconduct, or by unreasonable refusal to accept treatment?

No

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

- 16. What is the probable duration, in months, of the disability or of each of the disabling conditions if there is more than one?

Indefinite.

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

Keep it.

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

No

- 19. Can the former trade or occupation be resumed?

Yes

- 20. Recommendations.

*W. H. Beach*  
 Medical Officer by whom the case is brought forward

(Sections 8, 9 and 10 are to be read to the Officer.)

I, the undersigned..... have heard the description of my disability read, and am satisfied (or not satisfied) with it. (If dissatisfied, statement should follow.) I complain in addition of

*W. H. Beach*  
 Medical Officer

# OPINION OF THE MEDICAL BOARD

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

**Yes**



22. Is the Officer fit for (a) General service (Category A) **Yes or No.**  
 (b) Service abroad (not general service) ( " B.) **Yes or No.**  
 (c) Home service (Canada only) ( " C.) **Yes or No. III**  
 (d) Temporarily unfit ( " D.) **Yes or No.**  
 (e) Unfit for service in Categories A, B and C. ( " E.) **Yes or No.**

23. It is certified that the Officer

- (a) ~~Does require treatment.~~
  - (b) Does not require treatment.
  - (c) ~~Should pass under his own control.~~
  - (d) Should not pass under his own control.
- (Strike out condition not applicable.)

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

**Category III**

Station **Regina, Sask.**  
 Date **Dec 23rd 1918**

*W. R. Brack*  
*Surgeon Capt*

Members

APPROVED BY

Date **2-1-19**

*Albert D. [Signature]*  
 Surgeon General of Medical Services

APPROVED BY

Date

Director General of Medical Services



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2. The Medical Officer in charge of the case is responsible for the proper completion of pages 1 and 2 of this Form. The President of the Board of Medical Officers is responsible for the proper completion of the space, of page 3, reserved for recording the Proceedings of a Board of Medical Officers.
3. In answering the questions, Medical Officers will carefully obtain and record the officer'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 officer concerned, from witnesses, or from documents.
4. If a complete answer to any question requires more space than that reserved for it, the answer may be continued on the blank space at the foot of this page.
5. The nomenclature of diseases to be followed is that described in "List of Diseases, printed in the order in which they appear in the Annual Report on the Health of the Army", published in London, (1915) by Messrs. Harrison & Sons.

The wound was evidently large, & deep lacerating the biceps muscle & sheath with the result that the muscle lacks its full contracting power and normal position, being relaxed & falling to the internal side.  
Sensations are normal.



Man in 205

Sicut

TRIPPLICATE

# ATTESTATION PAPER.

No. 153904

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

## QUESTIONS TO BE PUT BEFORE ATTESTATION. (ANSWERS.)

1. What is your name? **Malcolm Ross MacKellar,**
2. In what Town, Township or Parish, and in what Country were you born? **Glencoe, Ontario, Canada.**
3. What is the name of your next-of-kin? **Mr Neil MacKellar, (Father)**
4. What is the address of your next-of-kin? **437 Fourth Avenue, Saskatoon, Sask.**
5. What is the date of your birth? **July 5th, 1893.**
6. What is your Trade or Calling? **Clerk**
7. Are you married? **No**
8. Are you willing to be vaccinated or re-vaccinated? **& inoculated? Yes**
9. Do you now belong to the Active Militia? **79th C.H. of G.**
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? }



*Malcolm R. MacKellar* (Signature of Man.)  
*J. D. Campbell* (Signature of Witness.)

## DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, **Malcolm Ross MacKellar,** 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.

*Malcolm R. MacKellar* (Signature of Recruit)

Date **October 2nd, 1915** *J. D. Campbell* (Signature of Witness)

## OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, **Malcolm Ross MacKellar,** 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 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.

*Malcolm R. MacKellar* (Signature of Recruit)

Date **October 2nd, -15, 1915** *J. D. Campbell* (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 **2nd** day of **October** 1915.

*[Signature]* (Signature of Justice)

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

Description of MALCOLM ROSS MacKELLAR on Enlistment.

Apparent Age 22 years 3 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. 9 ins.

Chest measurement { Girth when fully expanded 35 ins.  
Range of expansion 4 ins.

**Birthmark on left leg just above knee mark.**

Complexion Fair

Eyes Blue

Hair Fair

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



**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-Sea Expeditionary Force.

Date October 2nd, 1915 1915 *T. G. Adams*

Place Winnipeg C.A.M.C. Medical Officer.

\*Insert here "fit" or "unfit."

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

**CERTIFICATE OF OFFICER COMMANDING UNIT.**

MALCOLM ROSS MacKELLAR 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)  
**Lieut.-Colonel.**

Date October 2nd 1915.



649 M 7015

A. G. S. 104

CONFIDENTIAL REPORT FOR OFFICERS. O.H.M.C.

DEPT. MILITIA & DEFENCE

JUN 21 1919

H.Q.

CANADA

223

NAME **MacKILLAR** RANK **Lieut.**

REGIMENTAL NAMES (in full) **Malcolm Ross**

UNIT **43rd Canadian Battn. (Cameron Highlanders of Canada)**

AGE **26**



(1) How ~~is~~ he employed. **Platoon Commander.**

(2) ~~Is~~ Was he fitted in all respects for the **Yes.** Military Duties pertaining to his rank or Appointment.

(3) Do you recommend that his promotion be: -  
(a) Accelerated. **No.**  
(b) in the ordinary course, or **Yes.**  
(c) delayed. **No.**

(4) Specify his special qualifications or demerits. If the answer to para 2 is in the negative, a definite statement should be added in what respects he is inefficient (see notes a, b and c). **A good ~~strong~~ type of Officer; above the average. Efficient and keen.**

(5) Occupation in civil life **Commercial Traveller.**

STATION **In the Field.**

DATE **20-1-19.**

*L. K. Chaister*

Assistant Colonel,  
Commanding 43rd Canadian Battalion,  
Cameron Highlanders of Canada

(Signature of Commanding Officer)

NOTE :-

- (a) In reply to para 4, sufficient information should be included to serve as a guide to the authorities in determining the nature of employment to which he is best fitted.
- (b) In the case of Officers reported on as technically unqualified, it should be clearly stated in what respect the Officer lacks technical qualifications.
- (c) If the report is of an adverse nature, remarks of the Divisional Commander are required.

13  
3<sup>12</sup>/18

222 24

A.M.S. Form 73.

OVERSEAS MILITARY FORCES OF CANADA

RECORD OF SERVICE OF

DEPT.  
MILITIA & DEFENCE  
JUN 21 1918  
H.Q. CANADA

SURNAME **MackELLAR.** CHRISTIAN NAMES **Malcolm Ross**  
 RANK. **No. 153904** PROMOTION. **Lieut.**  
 UNIT. **79th Regt. C.H. of C. to 43rd Res. Bn.** DATE OF LEAVING CANADA **19.12.15.**

1. T.O.S. 43rd Bn. 29.12.15.
2. Embarked for France. 20.2.16.
3. Adm. No. 10. Can.Fld. Amb. 4.6.16.
4. Adm. No.7. Conv. Camp. Boulogne. 27.8.16.
5. Adm. Div. Rest. Stn. 30.11.16.  
Discharged and rejoined unit. 5.12.16. P.U.O.
6. Promoted Corpl. 29.11.16.
7. App. L/Sgt. Paid. 27.3.17.
8. T.O.S. Man. Reg. from 43rd Bn. 18.5.17
9. To be Temp. Lieut. Can. Inf. and T.O.S. 14th Res. Bn. 2.9.17.
10. S.O.S. 11th Res. Bn. proc. o/s to 43rd Bn. 8.11.17.
11. Adm. 8 Gen Hos. Rouen. 18.8.18.  
Adm. 2nd West. Gen. Hos. Manchester. 20.8.18.  
Adm. C.C.O.H. Matlock. Bath. 18.9.18.  
Discharged. 20;10;18. G.S.W. L.Arm.
12. S.O.S. M.R.D. posted to 11th Res. Bn. on discharge from Hosp. 20. 10. 18.
13. S.O.S. on transfer to C.E.F. in Canada upon cessation of hostilities. 3.12.18.



*McConnell  
Capt.*

9/BMM  
31.1.19.  
(A.G.1a)

for A.M.S. Canadians.

23

**RETURN, rendered in accordance with the General  
and (b) Staff and Extra-Regimental Appo**

NAME IN FULL (Surname first)	Rank and Regiment		Operations in which the Officer has taken part, showing the exact period of service in each instance.  The definitions of the spheres of operations as shown in the General Order should be strictly adhered to, and should be referred to below according to the index letter.	Details as to Staff and Extra-Regimental Appointments:— (a) In theatres of operations held during the War. (b) In England, Canada or elsewhere outside a theatre of operations, with the period of service in each case.
	C. E. F.	C. M.		
<i>MacKellar, M.H.</i>	<i>Lieut</i>	<i>79<sup>th</sup> Comms</i>	<i>(a) France &amp; Belgium. February 20<sup>th</sup> 1916 to May 15<sup>th</sup> 1917. as private N.60 Nov. 8. 1917 - August 16<sup>th</sup> 1918. as lieut.</i>	
	<i>43<sup>rd</sup> Battalion</i>			




Countersigned by

.....(Signature of Senior Officer).  
 .....(Rank and Regiment).  
 .....(Date).

or Certified that this Return is correct.

.....(Signature of Senior Officer cognizant of the service).  
 .....(Rank and Regiment).  
 .....(Date).

**Order calling for statements of (a) War Service, intments, during the War of 1914-18.**

Periods of service with a regiment or corps in a Lieut.-Colonel's command:— (a) In a theatre of operations held during the War. (b) Outside a theatre of operations.	Periods of service with a regiment or corps as Adjutant:— (a) In a theatre of operations held during the War. (b) Outside a theatre of operations.	Particulars as regards Honours and Awards, including Mentions in Despatches, or for Valuable Services.	Whether wounded, and if so, the date of the casualty.
<p>(a) Feb 20<sup>th</sup> 1916 to May 15<sup>th</sup> 1917. Nov 8<sup>th</sup> 1917 to Aug 16<sup>th</sup> 1918.</p> <p>(b) Oct 1-1915 to Dec 18-1915 with 79<sup>th</sup> Cameronia. Dec 18-1915 to Feb 20<sup>th</sup> 1916 with 113<sup>rd</sup> Reserve Bn. England. May 15<sup>th</sup> to Nov 8<sup>th</sup> 1917 at G.D.S. Bechill. Aug 16<sup>th</sup> to Dec 8<sup>th</sup> 1918 with 11<sup>th</sup> Reserve Bn England.</p>			<p>11/6/16 22/8/16 16/8/18.</p>

Certified as correct.

*Thos MacKellar*

(Signature of Officer).

Forwarded,

Commanding Military District No.....

Date.....

VERSE SIDE OF FORM.

**Casualty Form—Active Service.**

CERTIFIED CORRECT  
 6 SEP 1918  
 CANADIAN RECORD OFFICE

Regiment or Corps..... 43rd Bdn M  
 Rank Lieutenant Surname MacKellar Christian Name Malcolm Ross  
 Religion..... Age on Enlistment..... years..... months  
 Enlisted (a)..... Terms of Service (a)..... Service reckons from (a).....  
 Date of promotion to present rank 2-9-17 Date of appointment to lance rank.....  
 Extended {.....} Re-engaged {.....} Qualification (b).....  
 or Corps Trade and Rate.....  
 Occupation..... Signature of Officer.....



Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A.36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents
Date	From whom received				
			Embarked ...		
			Disembarked..		
29-7-18	43rd Bdn M		to 3rd Army Red Camp	21-7-18	#213 MS 68/18
17-8-18	" l/cpl	sw	to 4th Bn	16-8-18	A 7488
18-8-18	49 leles	"	Adm 16/18 to 21 A.T.	17-8-18	H 160
"	8 Gen	"	Adm to left Adm	18-8-18	H 391
19-8-18	"	"	" England	19-8-18	H 386
"	MS Bellemebo	"	"	"	63082/5797
			detached to W.R. Depot, Bedford		MS 79/18
			Reinstated		
			him for Lt. Col., A. A. G.		
			Canadian Section, G. H. Q. 5th Echelon, B. E. F.		

(a) In the case of a man who has re-engaged for, or enlisted in Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.  
 (b) Signaller, Shooting-Smith, &c. (17591.) Wt. W 1887-P 1124. 1,000,000. 6/18. D & B. Form B/103. (M. 1918.) (P.T.D.)



Date	Report From whom received	A record of promotions, reductions, transfers, casualties, during active service, as reported on Army Form B-213, and other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B-213, A-1, or other official documents
------	---------------------------	--	-------------------	------------------	--

28/10/18	Lt. Col. M. J. D. O.	The 1st Battalion, The Buffs (East Kent) in France.	Leopold	20/11/18	B. 213 O. 2410.
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28/10/18	Lt. Col. M. J. D. O.	The 1st Battalion, The Buffs (East Kent) in France.	Leopold	20/11/18	B. 213 O. 2410.
----------	----------------------	---	---------	----------	-----------------

28/10/18	Lt. Col. M. J. D. O.	The 1st Battalion, The Buffs (East Kent) in France.	Leopold	20/11/18	B. 213 O. 2410.
----------	----------------------	---	---------	----------	-----------------

14/7/19	Lt. Col. M. J. D. O.	The 1st Battalion, The Buffs (East Kent) in France.	Leopold	20/11/18	B. 213 O. 2410.
---------	----------------------	---	---------	----------	-----------------



1120  
 11/10/18  
 11/10/18

11/10/18  
 11/10/18

Army Form B. 103.

**Casualty Form - Active Service.**

Regimental Number 103904

Rank LIEUT Regiment or Corps 79th (43rd O.S.B.)

Surname Mac Kellar Christian Name Malcolm Ross

Religion Presby Terian Age on Enlistment 22 years 3 months

Enlisted (a) Oct 15 Terms of Service (a) 29 yr Service reckons from (a) Oct 15

Date of promotion to present rank 27.9.17 Date of appointment to lance rank 29.11.16

Extended { } Re-engaged { L.C. 30297 } Qualification (b) Clerk or Corps Trade and Rate

Signature of Officer i/c Records.

CERTIFIED CORRECT  
11 08 17  
MILITARY RECORDS OFFICE

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 ...			
2.10.17	W.R.D.	T.O.S. Inan Reg Depot	Debgate	20.8.17	R4 H DO. 72
"	"	DET to Depot Coy	"	17.8.17	" " 72
"	"	Com to 14th Res.	"	8.6.17	" " 91
"	"	as Instructor MRO to 9th			
"	"	Class Com 14th Res.			
"	"	+ Com C.T.S	Bexhill	7.7.17	" " 120
"	"	Class Com. C.T.S	"		
"	"	+ S.O.S app. Com in	CB	1.9.17	" " 191



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

[P.T.O.]

NEW: Macmillan - W: N.

Report From whom received	Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B, 218, Army Form A, 38, 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, 218, Army Form A, 38, or other official documents
13917 - ARMS	20 Be Tempo about 14th Nov 1918		9.9.17	A.S. 2017 of 17/17 and list 218 MAJOR, FOR O. & RECORDS, Q. & R.
17.9.17 14th Rec Bn	Taken on strength	DIBGATE.	9.9.17	Di. 20.2.22
15/10/17 O.C. 14th	S.O.S. posted to 14th Reserve Batt. 110th	110th Reserve Bn		
15/10/17 O.C. 11th	T.O.S. on postings from 24th Reserve Battalion	110th Reserve Bn		
17.9.17	S.O.S. posted to 11th Reserve Batt. 110th	110th Reserve Bn		
17.9.17	S.O.S. posted to 11th Reserve Batt. 110th	110th Reserve Bn		
17.9.17	S.O.S. posted to 11th Reserve Batt. 110th	110th Reserve Bn		
17.9.17	S.O.S. posted to 11th Reserve Batt. 110th	110th Reserve Bn		



17.9.17

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

# Casualty Form—Active Service.

Unit, Regiment or Corps: **7th CAMERON HIGHLANDERS OF CANADA.**

Regimental No. **1350** Rank **Private** Name **MAURICE KEELER** [2] COLM. DOSE,

Rank of promotion to **Private** Terms of Service (a) **medal obligation** Service reckons from (a) **4/17/16** **4/29/19** **4/23/16**

Date of appointment: **4/17/16** **4/29/19** **4/23/16** Numerical position on roll of N. C. Os. **307**

Re-engaged **Extended** Qualification (b) **307**

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

Embarked for Overseas Service with **43rd Bn. Battn. 20/2/16.** **43rd Bn. C. E. F., C. H. of C.** **A. I. C.**

Embarked for Overseas Service with	Unit, Regiment or Corps	Rank	Service Reckons from (a)	Numerical position on roll of N. C. Os.	Remarks			
EMBARKED FOR FRANCE.	Wounded	Private	4/17/16	307	A 36			
						4/29/19	307	A 36
						4/23/16	307	A 36
						4/23/16	307	A 36

By the order of a man who has to engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered. (P.T.O.)







Date	Reported From Whom	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.
4-6-16	10 1st Regt Cav	Spec. Vols	10 1st Regt Cav	4-6-16	A 36 101 104 of 22-7-16
22-8-16	3 Cav Gen	W. Med. Serv. Shell adn	3rd Cav Gen	22-8-16	10 3034-199
27-8-16	do	do	do	27-8-16	10 3034-204
26-8-16	12 1st Regt	do	12 1st Regt	26-8-16	A 36 134 of 7-9-16
19-8-16	do	do	do	19-8-16	A 36 135 of 9/9
20-8-16	10 1st Regt	do	10 1st Regt	20-8-16	A 36 140 of 18/9
23-8-16	10 1st Regt	do	10 1st Regt	23-8-16	A 36 140 of 18/9
27-9-16	10 1st Regt	do	10 1st Regt	27-9-16	A 36 140 of 18/9
30-9-16	10 1st Regt	do	10 1st Regt	30-9-16	A 36 140 of 18/9
14-10-16	10 1st Regt	do	10 1st Regt	14-10-16	A 36 140 of 18/9
3-12-16	10 1st Regt	do	10 1st Regt	3-12-16	A 36 140 of 18/9
12-12-16	10 1st Regt	do	10 1st Regt	12-12-16	A 36 140 of 18/9
10-12-16	10 1st Regt	do	10 1st Regt	10-12-16	A 36 140 of 18/9
2-12-16	10 1st Regt	do	10 1st Regt	2-12-16	A 36 140 of 18/9
4-3-17	10 1st Regt	do	10 1st Regt	4-3-17	A 36 140 of 18/9
1-4-17	10 1st Regt	do	10 1st Regt	1-4-17	A 36 140 of 18/9
11-5-17	10 1st Regt	do	10 1st Regt	11-5-17	A 36 140 of 18/9
20-5-17	10 1st Regt	do	10 1st Regt	20-5-17	A 36 140 of 18/9

Canadian Section, G. H. O. 3rd Echelon, B. E. F.  
 Dept. for War Dept.



# CANADIAN EXPEDITIONARY FORCE

## Certificate of Service

ISSUED TO OFFICERS AND NURSING SISTERS



This is to Certify that (Rank) ----- Lieutenant -----

(Name in full) ----- Malcolm Ross MacKELLAR -----

Enlisted in ----- 79th Battalion, (Cameron Highlanders) #153904, Pte.

CANADIAN EXPEDITIONARY FORCE, on the ----- Second -----

day of ----- October ----- 1915 AND WAS APPOINTED to COMMISSIONED RANK

in ----- 14th Reserve Battalion -----

CANADIAN EXPEDITIONARY FORCE on the ----- Second ----- day

of ----- September ----- 1917.

HE SERVED in CANADA, England and France with the 79th Bn.,  
(Cameron Highlanders), 43rd Battalion, Canadian Base Depot, Man.  
Regtl Depot, 14th Reserve Bn., and 9th Reserve Battalion. -----

and was STRUCK OFF THE STRENGTH on the ----- Sixth ----- day

of ----- January ----- 1919 by reason of General Demobilization.

Dated at Ottawa, this ----- Sixth ----- day

of ----- October ----- 1919.

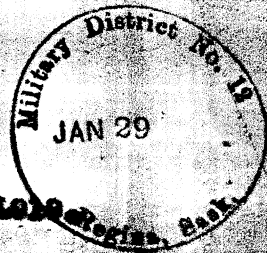
Wounded, 4-6-16.  
Wounded, 22-8-16.  
Wounded, 16-8-18.

CERTIFIED TRUE COPY

(W. E. L. Coleman), Lt.-Col.,  
Officer i/c Records, -----  
for Adjutant-General.

2-11-20

CANADIAN EXPEDITIONARY FORCE ROUTINE ORDERS.



January 23rd, 1919

STRUCK OFF.

No. 1562. The undermentioned officers are struck off the strength in the C.E.F. in Canada as shown and return to Active Militia Unit to which they formerly belonged.



M.D. No. 12. Lieut. Malcolm. Ross MacKellar. 6th January. 1919.

H.Q. 629-M-7015.

(25)

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

M. F. W. 54. (A. F. B. 103.

500M.—9-16

H. Q. 1773-30-920.

# Casualty Form—Active Service.

Unit, Regiment or Corps 43<sup>RD</sup> Bn (10)

Regimental No. \_\_\_\_\_ Rank Lieut Name A. K. MacKellar

Enlisted (a) \_\_\_\_\_ Terms of Service (a) \_\_\_\_\_ Service reckons from (a) \_\_\_\_\_

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

Extended \_\_\_\_\_ Re-engaged \_\_\_\_\_ - Qualification (b) \_\_\_\_\_

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
8-12-18		J. O. S. from Overseas			<u>Charles Cotton</u> Capt. D.C. Casualty Company, No. 12 Regt. Depot 6/14/19 RD 7/90. D.O. 10/51
9/5/19		D.O. 250-1097 Lt. E. E. F. Demobilization	Regina		



(12)

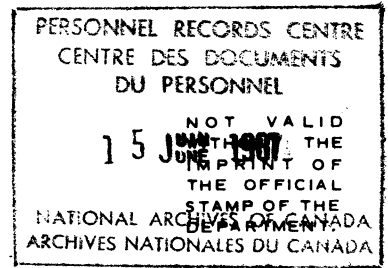
(a) In the case of a man who has re-engaged for, or enlisted into Section D. Army Reserve, particulars of such re-engagement or enlistment as, e.g. Signaller, Shooting Smith, etc., etc., also special qualifications in technical Corps duties.

tered. I.P.T.O.



Public Archives  
Canada

Archives publiques  
Canada



# STATEMENT OF SERVICE

IN THE

## CANADIAN ARMED FORCES

**Name:** Malcolm Ross MacKELLAR

**Service Rank or Number:** Lieutenant

**Branch of Service:** Canadian Expeditionary Force

**Date and Place of Birth:** 5 July 1893 Glencoe, Ont.

**Date and Place of Appointment, Enlistment or Enrolment:** 2 October 1915 Winnipeg, Man.

**Theatres of Service:** Canada, Britain and France

**Date and Place of Retirement or Discharge:** 6 January 1919 Regina, Sask.

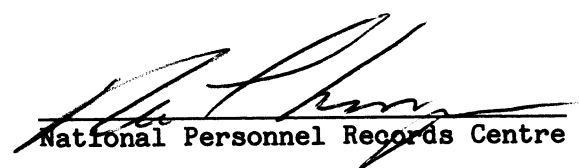
**Type of Retirement or Discharge:** Honourable

**Rank on Retirement or Discharge:** Lieutenant

**Medals and Decorations:** British War Medal and Victory Medal

**Remarks:** Nil

Date 15 June 1987

  
National Personnel Records Centre

Surname **MACKELLAR**

Christian Names **Malcolm Ross.**

Rank **153904 L/Sgt. Man. R.D.**

Name and Address of Next-of-Kin

Promotion **T/Lieut.**

**Neil MacKellar (Father)**

Unit **14th. Res. Bn.**

**437 Fourth Avenue,**

Place of Birth **Ontario.**

**Saskatoon, Sask.**

Married (Yes or No) **NO.**

Appointments



Date of leaving Canada

Date and Cause of Resignation

	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				
9	21-9-17	COO.	To be Temp. Lieut. Can. Infantry and T.O.S.		21-9-17	LG # 30297
	13.9.17.	A.M.S.	<del>To be Temp. Lieut. 14th. Res. Bn.</del>		13.9.17.	Adv. List. 248.
10	5-11-17	11 Res. Bn.	As provided in Order to 11 Res. Bn.		5-11-17	LG O. 163
	12-11-17	43 Bn.	T.O.S. as per foreman's in England		9-11-17	LG O. 105
11	20-8-18	amb.	Adm. 8 Genl. Hosp. Rouen		18-8-18	LG 1064 Gp. Larm. All.
	29-8-18	43 Bn	Invalided loaded and det. to Man. Reg. Dep.		19-8-18	LG O. 79
	28-8-18	M.R.P.	T.O.S. from 43 Bn. adm. to Hospital		20-8-18	LG O. 240
11	22-8-18	amb.	Adm. 2nd Genl. Hosp. Winchester		20-8-18	LG 1266 Gp. Larm. All.
11	19-9-18	do	Discharged adm. Can. Conv. Off. Hosp. Watlock Bath		20-10-18	LG 1152
					18-9-18	LG 1090
12	28-10-18	M.R.P.	As reported to 11 Res. Bn. on discharge from Hosp.		20-10-18	LG O. 301
	19-12-18	43 Bn	As reported to M.R.P.		8-12-18	LG O. 116
13	23-12-18	By O.M.C.	T.O.S. post transfer to 66. B. Canada upon cessation of Hostilities		7-1-18	amended by PO 5107 5178
						PO 5107

A.F.B. 103  
 1617 JUL 1917  
 17 NOV. 1917

A.F.B. 103  
 SEP 1918

10086



Access to Information Act / Access to Information Request Form

For official use only  
 FA/HL  
 PAC-A-87/14  
 APR 1987 08, 57 (CEF)

Use of this form will help speed your access to records under the Access to Information Act. Requests for federal government information can ordinarily be made by means of a telephone call, a visit, or a written request to the appropriate government information office. There is a fee of \$5.00 for making a formal request under the Access to Information Act.

**STEP 1:** Decide exactly what information you want - You can facilitate the search for records and reduce fees by defining as narrowly as you can the particular records you are looking for.

**STEP 2:** Consult the Access Register - The register contains descriptions of government records, their probable location and other information which will likely assist you in identifying the particular records you wish to see. A copy of the Access Register is available at major libraries, post offices, and government information offices.

**STEP 3:** Ask for assistance if necessary - If you are unable to identify the records you are looking for in the Access Register, contact the Access Co-ordinator of the appropriate department, either in person, by telephone or by letter at the address shown in the Register. The Co-ordinator will assist you in identifying the records.

**STEP 4:** Complete this Request Form, providing as many specific details as you can about the desired records, such as:

- subject, title and date;
- specific events, activities, individuals, corporations, products, reports, meetings, decisions, agreements, etc., of interest in the records;
- the number and title of the appropriate class of records, as listed in the Access Register.

**STEP 5:** Send in the completed Request Form or written request with an application fee of \$5.00, payable by money order or cheque to the Receiver General of Canada, to the appropriate officer identified in the Access Register. Unless you have already indicated what you are willing to pay for, you will be asked to authorize any fees that may be charged before the work is completed.

Federal Government Department, Agency or Crown Corporation  
 Public Archives

Identification number and title of class(es) of record(s) (see step 2)  
 MILITARY PERSONNEL RECORDS - PAC/NPR-165

Description of records and topics of interest (see step 4)  
 We wish photo-copies of the military records for Malcolm Ross McKEAR, SASKATOON SASKATCHEWAN. We believe he enlisted in WWI in 1915/1916 in Saskatoon and served until end of WWI. This information is sought by his immediate family (Granddaughter & family) for genealogy purposes. We wish photo-copies of all information you may have on him in addition to these war records as well.

I wish to:  
 Receive copies of the original  
 Examine original in government office  
 Other method (please specify)

REMITTED  
 REMIS \$ 5.00  
 ON LE APR 21 1987  
 TO FINANCIAL SERVICES  
 SASKATCHEWAN  
 SK.

Identification of applicant  
 Name: GARTH PETER TASTAD  
 Street address, apartment: 3417 Normandy Street  
 Province, territory or other: SASKATCHEWAN  
 Postal Code: S7M 3R1  
 Telephone number(s): H-306-382-4208 / W 306-652-35

I have a right of access to government records under the Access to Information Act by virtue of my status as a Canadian citizen, a permanent resident within the meaning of the Immigration Act, 1976, or by Order of the Governor in Council pursuant to subsection 4(2) of the Access to Information Act.

Signature: [Handwritten Signature]  
 Date: April 1987

Rank **Pte.** *Sp4* Name **MacKELLAR, Malcolm Ross.**

Reg'l No. **153904.**

R-122 ✓

Unit **79th Regt C.H. of C. to 4th Res. Bn.** If in perm. Corps, What Unit?

Married or Single **Single.**

Place and Date of Enlistment **Winnipeg, Oct 2nd 1915.**

Place of Birth **Glencoe, Ont, Can.**

Name and Address, Next-of-Kin **Mr. Neil MacKellar,**

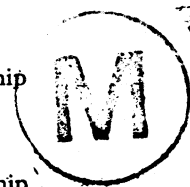
**437, Fourth Ave, Saskatoon, Sask.**

Relationship **Father.**

Assigned Pay Monthly \$

Payable to

Relationship



Separation Allowance \$

Payable to

Relationship



Discharge, Date and Place

*Left Can. 19-12-15*

Reason

Character

	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				
1	31.12.15	<i>Of B 43rd</i>	<i>Arrived in England.</i>			
2			<i>Taken on strength</i>	<i>Shorncliffe</i>	<i>29.12.15</i>	<i>Part " O # 90</i>
3	26.1.16	"	<i>Embarked for France.</i>	<i>Field.</i>	<i>26.2.16</i>	<i>N.R.</i>
4	5.9.16	"	<i>No 10 Can Field Amb</i>	<i>Boulogne.</i>	<i>4.6.16</i>	<i>Co LA 109.</i>
	10.10.16	"	<i>Adm. No 4 Convalescent Camp</i>	"	<i>29.8.16</i>	<i>" 139 W's Staff</i>
	19.10.16	"	<i>Discharge Base Depot Harfleur.</i>	"	<i>28.9.16</i>	<i>" 1672 "</i>
5	18.12.16	"	<i>No 4 Conv Depot</i>	<i>Field.</i>	<i>30.11.16</i>	<i>" 226. 126 P.U.O.</i>
6	22.12.16	"	<i>Adm. Divisional Rest Str</i>	"	<i>29.11.16</i>	<i>PT II O 76.</i>
7	9.4.17	"	<i>Promoted Corp to sergeant.</i>	<i>dis</i>	<i>5.12.16</i>	<i>Co LA 229. 128 P.U.O.</i>
8	20.5.17	<i>Man Dep</i>	<i>Returned Unit</i>		<i>27.3.17</i>	<i>PT 20</i>
			<i>App'd to 1st Lt Paird</i>	<i>Libyal</i>	<i>18.5.17</i>	<i>77 P.U.O.</i>
			<i>1.0.5. from 4th Res Bn.</i>			

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				
8.6.17	Man Dep	On Command. 14 <sup>th</sup> Regt	Dibzale	5.6.17	AF 10.91
7.7.17	"	for duty as Instructor On Command. C.T.S. Keshid	" Regt	7.7.17	120
16.9.17	"	ceases to be on comd. C.T.S. & S.O.S. comd. in C.E.F.		1.9.17	191

