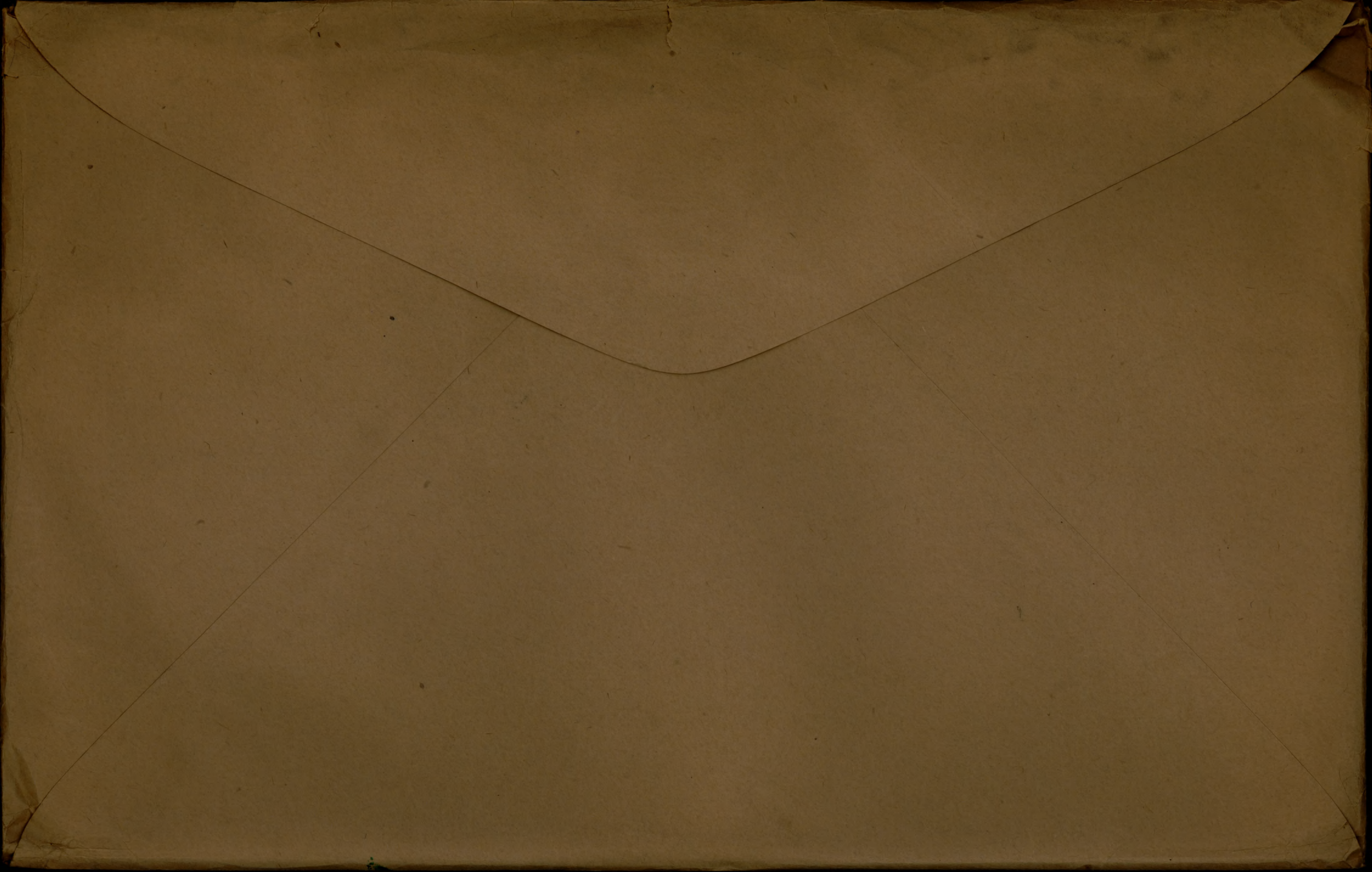


REGIMENTAL DOCUMENTS

NAME ARDEN. Walter Edward REGT. No. 424681 UNIT 109<sup>th</sup> Bn H. Q. FILE No. X2117

CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
2. ATTESTATION PAPER (M.F.W. 23, 133 or 51)		(M)			DEATH
2. CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					CATEGORY
1. <del>TRAINING HISTORY SHEET (M.F.W. 113)</del> <i>Record sheet</i>					<i>Accessed - 14-7-18.</i>
1. <del>FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)</del>		(H)			
REGT. CONDUCT SHEET (M.B.W. 263 or A.F.B. 120)					<i>M.Y. 32-2-21</i>
COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
2. MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
DENTAL HISTORY SHEET (M.F.B. 465)					CATEGORY
MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					
MEDICAL EXAMINATION (M.F.W. 129)					
TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
LAST PAY CERTIFICATE (M.F.W. 44)					
2. PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
PARTICULARS OF CHARACTER (A.F.W. 3226)					
COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
6. CARDS					
<i>Yes</i> PAY-SHEETS					
<i>2</i> <i>Wills</i>					
					1-4
					25-6
					24-6
					2



ATTESTATION PAPER.

No. *B. A. Co*  
Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

ORIGINAL

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

- 1. What is your surname? *Arden*
- 1a. What are your Christian names? *Walter Edward*
- 1b. What is your present address? *136 Bayswater Avenue Ottawa*
- 2. In what Town, Township or Parish, and in what Country were you born? *Rotherham Yorkshire Eng.*
- 3. What is the name of your next-of-kin? *Mrs Julia Arden*
- 4. What is the address of your next-of-kin? *136 Bayswater Avenue Ottawa, Ont.*
- 4a. What is the relationship of your next-of-kin? *Mother*
- 5. What is the date of your birth? *14 Jan 1874*
- 6. What is your Trade or Calling? *Weaver*
- 7. Are you married? *No*
- 8. Are you willing to be vaccinated or re-vaccinated and inoculated? *Yes*
- 9. Do you now belong to the Active Militia? *No*
- 10. Have you ever served in any Military Force? *No*  
If so, state particulars of former Service.
- 11. Do you understand the nature and terms of your engagement? *Yes*
- 12. Are you willing to be attested to serve in the }  
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? } *Yes*

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

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

Date *1st Dec* 191*5*. *Walter E. Arden* (Signature of Recruit)  
*A.R. O'Regan* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Walter Edward Arden*, 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.

Date *1st Dec* 191*5*. *Walter E. Arden* (Signature of Recruit)  
*A.R. O'Regan* (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 *Lindsay* this *7th* day of *January* 191*6*.  
*[Signature]* (Signature of Justice)

Description of Walter Edward Arden Enlistment.

Apparent Age 41 years 11 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. 2 ins.

*Birthmark on left cheek.*

Chest measurement { Girth when fully expanded 31 ins.  
 Range of expansion 2 ins.

Complexion Fair

Eyes Blue

Hair Dark Brown

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

CERTIFICATE OF MEDICAL EXAMINATION.

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

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

I consider him fit for duty for the Canadian Over-Seas Expeditionary Force.

Date Dec 1st 1915

*[Signature]* Capt.  
 Medical Officer

Place Lindsay

109th Overseas Battalion, C. E. F.  
 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.

Walter Edward Arden 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]* Lt. Col. (Signature of Officer)

Date JAN 12 1916 1916

O. C. 109th Overseas Battalion, C. E. F.

ORIGINAL

# MEDICAL HISTORY SHEET.

Surname Arden Christian Name Walter Edward

Examined on 6 day of December 1915  
at Lindsay  
Birthplace { City or Town Rotherham  
County Yorkshire Eng

Approved by J. McCulloch Capt.  
J. McCulloch Medical Officer  
Rank 109th Overseas Battalion, M.O.F.

Apparent age 41  
Trade or occupation Weaver  
Height 5 Feet 2 Inches.  
Weight 103 Lbs.  
Chest measurement { Minimum 29 inches.  
Maximum expansion 31 inches.  
Physical development Fair  
Small-Pox Marks None

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT
		<u>3-APR 1918</u>
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Vaccination Marks { Arm Right None Left Four  
Number Four  
When Vaccinated last Feb 2nd 1916

Date	Result	VACCINATIONS
<u>2-2-16</u>	<u>Good</u>	<u>J. McCulloch</u> M.O.
		M.O.
		M.O.

(a) Marks indicating congenital peculiarities or previous disease None

(b) Slight defects but not sufficient to cause rejection Little undersized

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>18-4-16</u>	<u>Good</u>	<u>J. McCulloch</u> M.O.
<u>25-4-16</u>	<u>Good</u>	<u>J. McCulloch</u> M.O.
<u>2-5-16</u>	<u>Good</u>	<u>J. McCulloch</u> M.O.
<u>2-9-16</u>	<u>"</u>	<u>Halsey</u>

Enlisted on 1st day of December 1915 at Lindsay

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>109th Batt C.E.F.</u>	<u>724681</u>		<u>1-12-15</u>
Transferred to.. ..	<u>124th OVERSEAS BATTALION C.E.F.</u>			<u>15-2-17</u>
	<u>4 Labour Battalion</u>			<u>3-3-17</u>

## EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>Witley</u>	<u>15-2-17</u>	<u>59. R 6 1/2 x h 118</u> <u>Physique</u>	<u>BS J. H. Cook Capt.</u>
<u>Rafonhurst</u>	<u>8-5-18</u>	<u>Carcinoma of Rectum</u>	<u>Discharged to Canada</u> <u>J. Mackin</u> <u>St. George</u>

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

CANADIAN

Surname *Arden* Christian Name *Walter Edward*

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.17 Div. Rest Stn.		28	3	17	14	4	17	Inf. Cont. R thigh		A.9-A.19 DT	
No.5 London Fld. Amb.		14	4	17	16	4	17	Cellulitis thigh	To duty	A.20 DT	
War Hospital, Warren Rd. Guildford.		27	3	18	3	5	18	Carcinoma of Rectum	37 Inoperable.	Hilt Kern <i>cap.</i>	
DUCHESS OF CONNAUGHT CANADIAN RED CROSS HOSPITAL Taplow, Bucks.		3	5	18	16	5	18	Carcinoma Rectum.	14 Examination under anaesthesia etc reveals carcinoma of rectum with involvement of prostate. Inoperable. Boarded to Canada To: 5 Lan. Gen. & 1 post	H. J. J. <i>capt.</i>	
To: 5 Lan. Gen. Gen. Had. Liaison post		16	5	18	25	5	18	Do	awaiting sailing for Canada.	D. McMillan <i>maj. comd.</i>	
Warrington		25	5	18	3	6	18	do	Carcinoma infiltrated into bladder causing vesico-rectal fistula. Faecal matter & gas passed by urethra	<i>W. G. G. <i>capt.</i></i>	

# MILITARY SERVICE ACT, 1917. MEDICAL HISTORY SHEET.

**M.S.A.**

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

1. Surname Arden Christian name Sydney Frank  
2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule.....  
3. Consecutive number on schedule of men reporting for service (if he appears on it).....  
4. Address (including street and number, if any)..... Box 622 Paris Ont., Canada

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 13th day of October 1917, by the undersigned medical board sitting at Brantford Ont., Canada

5. Age as stated 21 Years 6 Months. 6. Apparent age 21 Years 6 Months  
7. Height 5 Feet 2 Inches. 8. Weight 114 Pounds.

9. Chest measurement { Minimum 30 Ins. Maximum 33 Ins. 10. Complexion Fair { Eyes Grey Hair Auburn

11. Physical development Good { Good Fair Poor 12. Smallpox marks Nil

13. Number of vaccination marks { Right arm ..... Left arm 4 14. When vaccinated last 9 yrs. ago

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

16. Slight defects but not sufficient to cause rejection.....  
The man denies having had { Rheumatism Tuberculosis Syphilis We find no evidence of past { Rheumatism Tuberculosis Syphilis (Strike out disease admitted or suspected.)

We have examined the above named man in accordance with the C. E. F. Regulations for medical examinations, and he is placed in Category 2

Palmer President.

Farrice Member. Smiley Member.

Date	Result	VACCINATIONS	Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>12/2/18</u>		<u>BRNB</u> M.O.	<u>4/1/18</u>		<u>BRNB</u> M.O.
		M.O.	<u>1/2/18</u>		<u>BRNB</u> M.O.
		M.O.	<u>7/2/18</u>		<u>BRNB</u> M.O.

Joined 5th day of January 1918 at Brantford Ont.,

	CORPS	REG'TL NUMBER	HABITS	DATE
Joined on enlistment	<u>2nd Depot Bn</u>			<u>5-1-18</u>
Transferred to.....	<u>2nd C.O.R.</u>	<u>3310009</u>		
	<u>No. 2 Special Service Co'y</u>			

### EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION	DATE	DISEASE	RESULT
<u>Ex Camp. Toronto.</u>	<u>Apr 17/1918</u>	<u>Hypertrophied smi</u>	<u>E</u>
" "	<u>May 24/18</u>	<u>" " " "</u>	<u>E</u>

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

Signature of Man Sydney Frank Arden

6





73859  
not there

Perforated sheet for Will from Pay Book of

Reg. No. 724681  
Name Walter Edward Arden  
Unit 109th Bn Can Inf.

MILITARY WILL.

~~made out in Batt. orderly Room--~~  
~~Barfield July 13th 1916--~~  
~~and forwarded to Ottawa--~~  
I Walter.

570/1

Edward Arden, in  
the event of my death do  
hereby, bequeath all my  
personal belongings, to Mrs-H-  
---- Arden 265 Broom Road  
Wellgate Rotherham Yorks.  
Lt. W. T. Bredin.

Signature Walter E. Arden  
Rank and Regt. Pte. 109th Bn Can Inf  
Date 13th October 1916.

I hereby certify the above to be a true copy of the original Will  
now on file in Estates Branch.

Date 16 Aug. 1918.

*[Signature]*  
Lieut.  
for OFFICER I/C ESTATES,  
OVERSEAS MILITARY FORCES OF CANADA.

NOTE Extracted from Pay Book Page 20

Holograph

Died Auth. for Transfer. Ottawa list 90 on 80-4yE.

Transferred

No. 724681. Pte. W. E. Arden. 109th Bn

(BAC.) 27072.

ESTATES



MIL. & DEF.  
A.M. OCT 23 1918

Wre cord

D. B. Canada  
Med. Dept 25-5-18  
C. Y. 25-5-18  
C. Y. 25-5-18

REGISTERED  
ILLS-SECTION  
17 AUG 1918  
ESTATES, LIMITED, LONDON.

# FORM OF WILL.

I, Walter Edward Arden (Name in full)

Regimental Number 424681 serving in 109<sup>th</sup> C. I. Battalion

of the Canadian Expeditionary Force, do hereby revoke all former Wills by me made and declare this to be my last Will.

I bequeath all my real estate unto

	} Name and Address of person or persons to whom it is to go.
<i>W. Arden</i>	

absolutely, and my personal estate I bequeath to

<i>Julia Ann Arden</i>	} Name and Address of person or persons to receive personal estate* (See note).
<i>136 Bayswater Avenue</i>	
<i>Ottawa Ontario</i>	

**IMPORTANT NOTE**  
This must be Signed and Dated by THE SOLDIER HIMSELF.

this 19<sup>th</sup> day of July A. D. 1916,

Walter E. Arden Signature of Soldier.

\*N.B.—Personal estate includes pay, effects, money in bank, insurance policy, in fact everything except real estate.

Signed and acknowledged by the Testator as and for his last Will in the presence of us both present at the same time, who in his presence, at his request, and in the presence of each other have hereunto subscribed our names as Witnesses.

Signature of First Witness W. C. Grant

Address of Witness Bobcaygeon, Ont

Occupation of Witness Stenographer

**THE TWO WITNESSES MUST SIGN HERE**

Signature of Second Witness \_\_\_\_\_

Address of Witness \_\_\_\_\_

Occupation of Witness \_\_\_\_\_

FORM OF WILL

I, *John A. Smith*, of the County of *Jefferson*, State of *Missouri*,

do hereby certify that I am of sound mind and memory, and am capable of making this my last will and testament;

and that I have declared to the persons named in this will the contents thereof, and that they have acknowledged to me the contents thereof as my last will and testament;

and that I have signed this will, and have caused it to be signed by the persons named in this will, in my presence, and in the presence of each other, and of two or more other persons, who are not named in this will, and who are not interested in the same, and who are of legal age and sound mind and memory, and who are not interested in the same, and who are not named in this will, and who are not interested in the same;

and that I have signed this will, and have caused it to be signed by the persons named in this will, in my presence, and in the presence of each other, and of two or more other persons, who are not named in this will, and who are not interested in the same, and who are of legal age and sound mind and memory, and who are not interested in the same, and who are not named in this will, and who are not interested in the same;

and that I have signed this will, and have caused it to be signed by the persons named in this will, in my presence, and in the presence of each other, and of two or more other persons, who are not named in this will, and who are not interested in the same, and who are of legal age and sound mind and memory, and who are not interested in the same, and who are not named in this will, and who are not interested in the same;

and that I have signed this will, and have caused it to be signed by the persons named in this will, in my presence, and in the presence of each other, and of two or more other persons, who are not named in this will, and who are not interested in the same, and who are of legal age and sound mind and memory, and who are not interested in the same, and who are not named in this will, and who are not interested in the same;

and that I have signed this will, and have caused it to be signed by the persons named in this will, in my presence, and in the presence of each other, and of two or more other persons, who are not named in this will, and who are not interested in the same, and who are of legal age and sound mind and memory, and who are not interested in the same, and who are not named in this will, and who are not interested in the same;

and that I have signed this will, and have caused it to be signed by the persons named in this will, in my presence, and in the presence of each other, and of two or more other persons, who are not named in this will, and who are not interested in the same, and who are of legal age and sound mind and memory, and who are not interested in the same, and who are not named in this will, and who are not interested in the same;

and that I have signed this will, and have caused it to be signed by the persons named in this will, in my presence, and in the presence of each other, and of two or more other persons, who are not named in this will, and who are not interested in the same, and who are of legal age and sound mind and memory, and who are not interested in the same, and who are not named in this will, and who are not interested in the same;

and that I have signed this will, and have caused it to be signed by the persons named in this will, in my presence, and in the presence of each other, and of two or more other persons, who are not named in this will, and who are not interested in the same, and who are of legal age and sound mind and memory, and who are not interested in the same, and who are not named in this will, and who are not interested in the same;

WITNESSES  
The names of the witnesses  
to be written in this space

THE COUNTY OF  
STATE OF MISSOURI

*Alex!*

MEDICAL CASE SHEET.\*

No. in Admission and Discharge Book.

Regimental No. 724681

Rank. Pte

Surname. Arden

Christian Name. W. E.

Year 1918

Unit.

4<sup>th</sup> Canadian Lab.

Age.

45

Service.

27 mths

DUCHESS OF CONNAUGHT  
CANADIAN RED CROSS HOSPITAL  
Station and Date.

Disease

Diarrhoea. (N.Y.D.) Carcinoma of Rectum

Taplow, Bucks

Base

Reported sick with shooting pain in right lower abdomen & violent diarrhoea with blood & mucus in stools was in hospital a fortnight with no improvement - on milk diet.

27.3.18.

Admitted Build good was hospital.  
Complains of pain in lower abdomen & diarrhoea.

C.O.A.

Looks emaciated & ill.

Abdomen

Inspection - slightly distended - moves freely.

Palpation - slight tenderness below

appendicular region - enlarged right inguinal gland.

Percussion - note rather tympanitic all over.

No previous history of abdominal trouble except in 1900 - acute lead poisoning.

Chest

Heart & lungs show nothing abnormal.

Urine N.A.P.

W.H. Kerr. ent.

15.4.18.

Has had 9 or 10 motions (brown liquid) daily since admission with distended abdomen.

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

Station  
and Date.

20. 4. 18. B.O. not so frequent  
Per Rectum mass felt protruding  
from anterior wall of rectum about  
two inches from anus - tender to  
touch & bleeds easily
21. 4. 18. Seen by Consulting Surgeon who  
diagnoses inoperable Carcinoma  
of rectum & advises return  
to Canada.
3. 5. 18. Transferred to Taphew  
with Kerr cap

MEDICAL CASE SHEET.\*

No. in Admission and Discharge Book.

Regimental No.

Rank.

Surname.

Christian Name.

724681

PTE

ARDEN

WALTER

Year

Unit.

Age.

Service.

1918

4th CAN. LABOR BN.

45

27/12

DUCHESS OF CONNAUGHT

CANADIAN RED CROSS HOSPITAL

Station and Date.

Disease

CARCINOMA. RECTUM.

Taplow, Bucks. May 3.18

Present condition.

Patient is greatly emaciated and weak - general condition poor. Skin unhealthy dry yellow color.

Examination under anaesthesia of rectum reveals prostate to be greatly enlarged and irregular - folds of rectum pronounced & numerous tags are felt particularly over right side. Ulcerous condition at upper right corner of prostate - about size of shellfish considerable bloody discharge

W.S. Fisher

16/5/18

To Quirkdale, L. pool.

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

Station  
and Date.

705 Coe Geo  
Hospital  
16. 3. 18

ON ADMISSION

leucocytic patient frequent  
dean local stool. Exam. per. rectum  
shows mass from anterior wall of  
rectum. Sigmoid diet awaiting sailing  
Hawaii

J McEllan

Maj Case.



CLINICAL CHART.

Army Form B. 181

Corps 4th Cav Regt Coy

(To be attached to Case Sheet.)

Military Hospital Gulford

No. 224681

Rank and Name Arden W St.

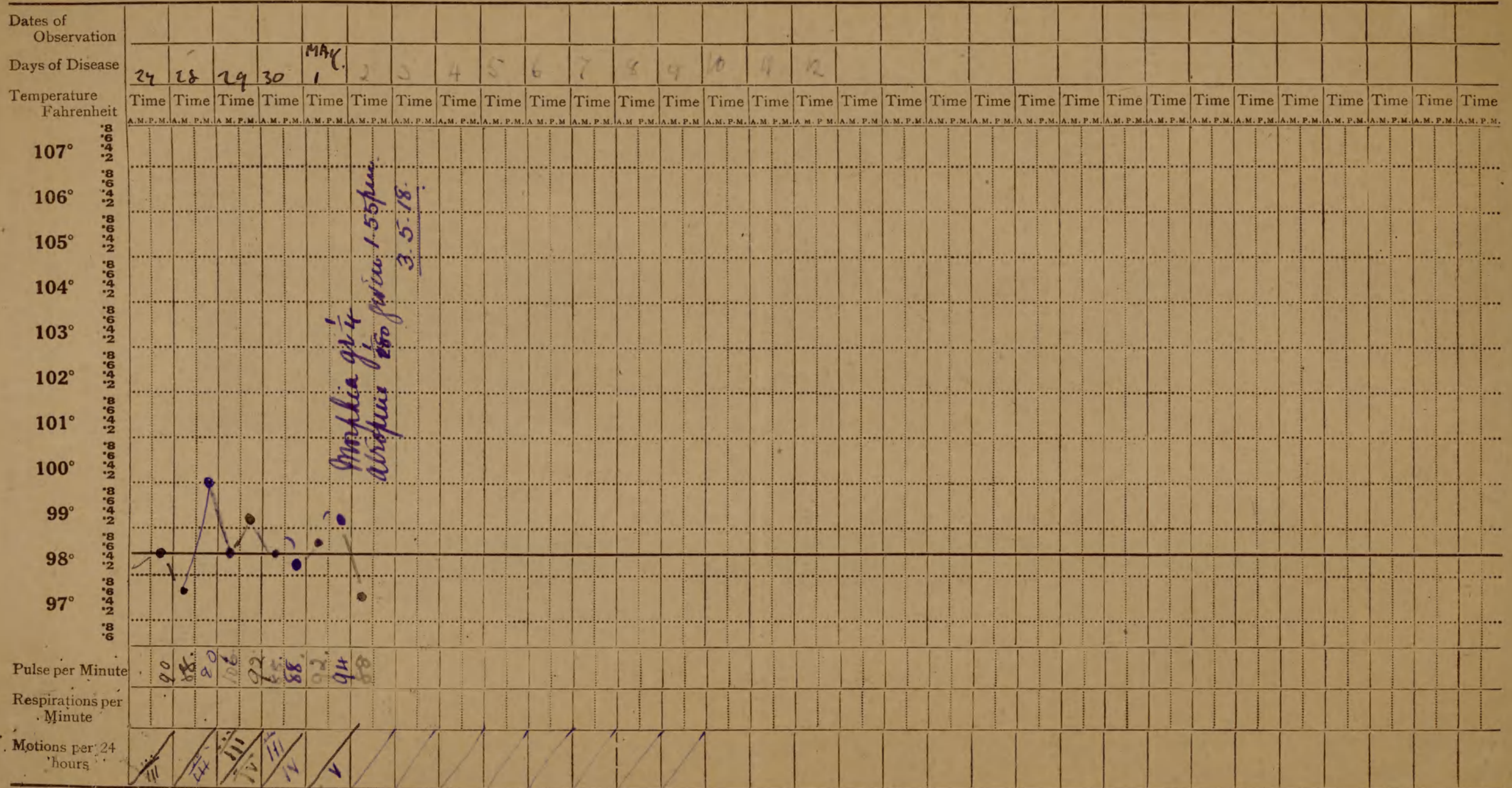
Age 45

Service 9 4/12

Disease \_\_\_\_\_ Date of admission 27-5-18

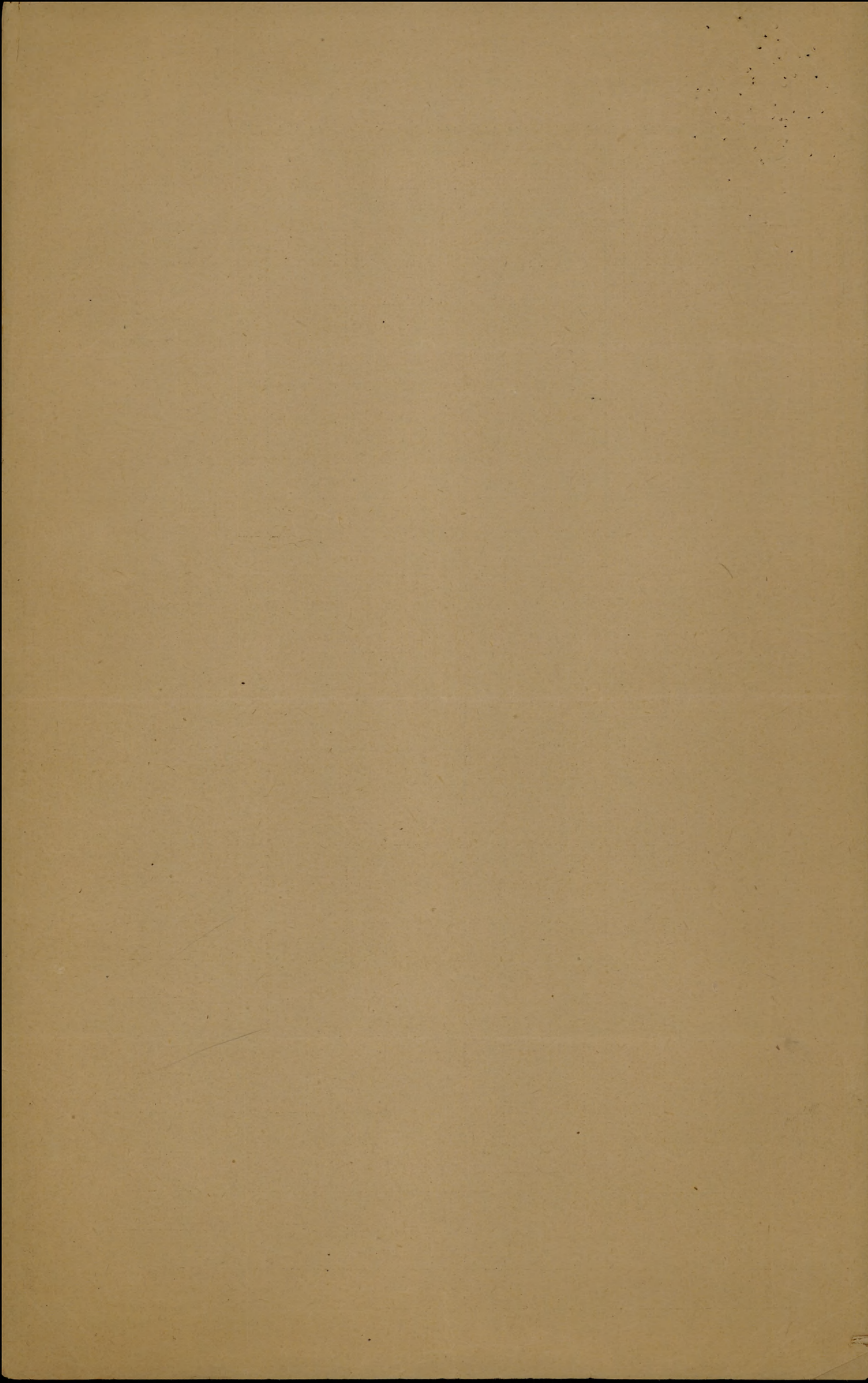
Date of discharge \_\_\_\_\_

Result \_\_\_\_\_



Signature \_\_\_\_\_

In charge of case. \_\_\_\_\_



CLINICAL CHART.

(To be attached to Case Sheet.)

Army Form B. 181.

Corps 1st Cavalry No. 2266 F1 Rank and Name Private W. L. R. Military Hospital 24/12  
 Disease \_\_\_\_\_ Date of admission 27. 3. 16 Date of discharge \_\_\_\_\_ Result \_\_\_\_\_  
 Age 45 Service \_\_\_\_\_

Temperature Fahrenheit	Days of Disease																											
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	
107°																												
106°																												
105°																												
104°																												
103°																												
102°																												
101°																												
100°																												
99°																												
98°																												
97°																												
Pulse per Minute																												
Respirations per Minute																												
Motions per 24 hours																												

*Ch. Ric. Via.*

*Hypertension of myocardium*



Signature \_\_\_\_\_

In charge of case.

INIC

**CLINICAL CHART.**  
(To be attached to Case Sheet.)

Corps L. L. A. B.

No. \_\_\_\_\_

Rank and Name PL/E Arden W.

Age \_\_\_\_\_

Military Hospital \_\_\_\_\_

Service \_\_\_\_\_

Disease Carcinoma

Date of admission 16 3 18

Date of discharge \_\_\_\_\_

Result \_\_\_\_\_

Dates of Observation	Days of Disease																													
	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	
Temperature Fahrenheit	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	
17	15	19	20	21	22	23	24																							
107°																														
106°																														
105°																														
104°																														
103°																														
102°																														
101°																														
100°																														
99°																														
98°																														
97°																														
Pulse per Minute	108	88	72	88	80	100	100	100	96	100	136	96	92	100	104															
Respirations per Minute	24	24	20	20	28	22	22	22	22	22	36	22	22	24	24															
Motions per 24 hours																														

Admission

Carcinoma 2 2 pm

6 pm

10 pm

2 pm

6 pm

10 pm

2 4 4 4

6 am

10 am

?

CLINICAL CHART.

(To be attached to Case Sheet.)

Army Form B. 181.

Corps \_\_\_\_\_

No. \_\_\_\_\_

Rank and Name \_\_\_\_\_

Age \_\_\_\_\_

Military Hospital \_\_\_\_\_

Service \_\_\_\_\_

Disease \_\_\_\_\_ Date of admission \_\_\_\_\_ Date of discharge \_\_\_\_\_ Result \_\_\_\_\_

Dates of Observation																														
	Days of Disease																													
Temperature Fahrenheit	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	
	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.
107°																														
106°																														
105°																														
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102°																														
101°																														
100°																														
99°																														
98°																														
97°																														
Pulse per Minute																														
Respirations per Minute																														
Motions per 24 hours																														

Signature \_\_\_\_\_

In charge of case.

MEDICAL CASE SHEET.\*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	724681	Lieut	Arden	A. E.
Year	Unit.	Age.	Service.	
	4th Cav. Labour Batt.	45 years	2 3/4 years	17

Station and Date. Disease Carcinoma rectum.  
*occup. leave:*

*205 Cav. Gen. Hosp Liverpool 16.5.18*

PATIENT STATES:—  
 1st Dec 1915 ENLISTED AT Liverpool  
 30th July 1916 ARRIVED IN ENGLAND  
 March 1917 ARRIVED IN FRANCE  
 Has not been WOUNDED ~~#~~

History of Present Illness.  
 Reported sick with shooting pains in right lower abdomen and violent diarrhoea with blood and mucus in stool, was in hospital a fortnight with no improvement on milk diet.

HOSPITALS.  
 27.3.18 - War Hosp. Warrington Guildford 37 days.  
 3.5.18 Division of General Hospital. Suedby x Hosp. Tappan. 13 days.  
 16.5.18 205 Cav. Gen. Hosp. Liverpool.

Illness dated 8 Feb 1918 when he was taken with severe pain in abdomen with diarrhoea - no vomiting. Since then he has been getting more emaciated and shows blue yellowish color of skin.

ON ADMISSION emaciated patient. Frequent diarrhoeal stools. Exam. per rectum shows mass from anterior wall of rectum

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

Station  
and Date.

Charles died

History of present illness

to admission. Complaint of pain in lower  
abdomen and diarrhea. S. O. A. took medicine  
and ill. Abdomen - inspection slightly  
distended, tenses freely. Palpation slight  
tenderness below appendicular region.

Palpated right inguinal gland. Per.  
cessus. No other lymphatic all over.

No previous history of abdominal trouble  
except in 1900. Acute blood poisoning.  
Chest heart and lungs show nothing abnormal.  
Review. A. A. C.

21. 4. 18. Seen by consulting surgeon who  
diagnoses inoperable carcinoma of  
rectum and advises return to Canada.

J. M. Kellan

May Case

Hunt's "Arognaya"

May 29 Patient complains of great deal  
of pain requiring hypodermic morphine  
every three hours. Examination of  
urine showed considerable amount  
of fecal matter. Goss is passed  
frequently by urethra. He had a  
temp 104° when admitted and violent  
diarrhea. Temp ran a even line 99°  
after first day of treatment.  
Left testicle enlarged a bit. Right test.  
tender. Axillary glands enlarged.



143643

# EXAMINATION

BY

*Witley*

## STANDING MEDICAL BOARD, BRAMSHOTT.

No. *724681* Rank *Plt* Name *Araca. W.E.* 15. 2 191 7.  
 Local Unit *124* Overseas Unit \_\_\_\_\_ Age *43.*

Examination held in Bramshott area.

### DISABILITY.

*V.A.*

Overseas—Local.  
(scratch one out)

*2 Physique*

### PRESENT CONDITION.

*V.A. R.E. 6/24 L.F. 6/18  
Not improved*

*L. Thor small & poorly developed  
will never be better than B<sup>3</sup>*

Board recommends :

1. Fit for Duty.
2. Fit for duty after \_\_\_\_\_ weeks physical training.
3. Fit for Base duty \_\_\_\_\_ weeks.
4. Fit for Permanent Base Duty.
5. Discharge.

*B.G.*

Signatures :

Members { *J.H. Cook Capt. Pres.*  
*T. W. ... Capt.*

Approved.

*Witley Feb 15<sup>th</sup>*

Bramshott

191

*L. S. ... Major*

for A.D.M.S. and G.O.C.,  
Canadian Troops, Bramshott.

148643

# EXAMINATION BY STANDING MEDICAL BOARD, BRAMSHOTT.

191

No. \_\_\_\_\_ Rank \_\_\_\_\_ Name \_\_\_\_\_  
Local Unit \_\_\_\_\_ Overseas Unit \_\_\_\_\_ Age \_\_\_\_\_

Examination held in Bramshott area.

### DISABILITY

Overseas - Local  
(scrub one out)

### PRESENT CONDITION

Board recommends:

1. Fit for Duty
2. Fit for duty after \_\_\_\_\_ weeks physical training
3. Fit for Base duty \_\_\_\_\_ weeks
4. Fit for Permanent Base Duty
5. Discharge

Signatures

Pres.

Members

Approved

Bramshott

Canadian Troop, Bramshott  
for A.D.M.S. and G.O.C.

\* N. B.—This Form being applicable to any Board of Officers or Committee or Court of Inquiry, this blank to be filled in accordingly.

The signature of each Officer composing the Board, &c., should be attached to the end of the proceedings.

PROCEEDINGS of a \* Medical Board.

assembled at Ottawa, Ont.

on the 15th July, 1918.

by order of The A.D.M.S., M.D., No. 3.

for the purpose of inquiring into the cause of

death of No. 724681 Pte. Walter E. Arden,

109th Battalion, C.E.F.

PRESIDENT.

Lt-Col J.F. Argue, R.M.S.

MEMBERS.

Capt, J.H. Laidlaw, Capt. A.M.C.

The Board having assembled pursuant to order, proceed to inquire into the cause of death of the above named man and find. (1) That he was transferred to the C.C.G.P., Base hospital from Queen's Military Hospital on June 18th 1918 suffering from inoperable carcinoma of the rectum. (11) He died on July 14th 1918, and cause of death given by Major T.H. Leggett, A.M.C., was, carcinoma of rectum. This board concurs in the opinion as to the cause of death.

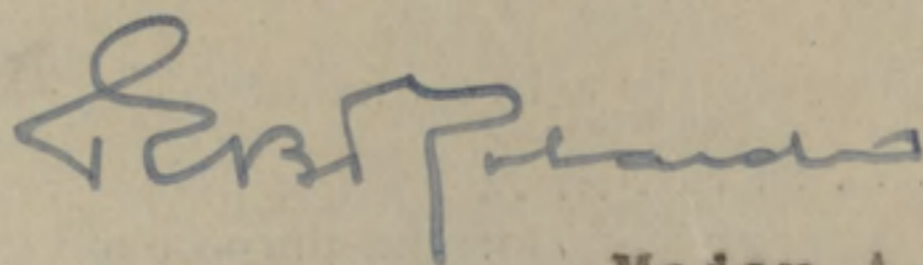
President..... *J. H. Laidlaw*  
Lt-Col R.M.S.

Member..... *J. H. Laidlaw*  
Capt. A.M.C.

The Assistant Adjutant-General, M.D.#3.

Forwarded

I concur in this report.



Major A.M.C., D/A.D.M.S.  
For A.D.M.S., Military District #3.

The Secretary, Militia Council,  
Militia Headquarters,  
Ottawa, Ontario.

Forwarded

Brig-General.  
For G.O.C., Military District #3.  
(A.O.L.).

# CASE HISTORY SHEET.

No. 724681 Rank Pte. Name Arden, Walter Age 45  
Unit 109th Batin. Completed years of service <sup>Where and how long</sup> Ca. 6 1/2/12. Eng. 13/12. France 12 1/2/12  
Date of admission June 16/18. Date of discharge June 16th to C.C.P.G. Hospital Ottawa.  
Diagnosis Carcinoma of rectum. Place of origin Etaples.

CONDITION ON ADMISSION AND PROGRESS OF CASE..... England June 15/16, France March /17.  
After being in France about a year he began to be bothered with pains in lower bowel. Reported sick but was able to carry on for 2 weeks longer, when he was sent to hospital at Base for 1 day, thence to #7 General for 10 days, thence to hospital in England remaining for 5 weeks, when he was transferred to Laplan. Boarded for leave in May 1918.  
Patient on admission appears markedly emaciated suffers a great deal of pain, which has to be controlled with morphia. Has no control over movements of bowel & passes frequent and bloody mucous stools. On palpation there is a small mass present in left inguinal region.

FAMILY HISTORY..... negative  
(Tuberculosis, mental or nervous diseases.)

TREATMENT..... Palliative treatment. Morphia to control pain,  
(Especially any specific or special form.)

CONDITION ON DISCHARGE..... Slowly growing weaker  
(and disposal made of case.)

Date June 17/18.

R. J. Tucker, Lieut. A.M.C.  
Medical Officer i/c case.



To be made out in duplicate.

H.Q. 54-21-23-53

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

INSTRUCTIONS.

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

(1) Name of Overseas Unit which Soldier joins.....

109th OVERSEAS BATTALION, C. E. F.

(2) Regimental Number ..... 724681.....

(3) Full Name of Soldier..... Walter Edward Arden.....

(4) Place of Birth..... Rotherham. Yorkshire. England.....

(5) Are you married, or not? ..... No.....

(6) If married, state,  
(a) Full name of your wife..... No.....

(b) Present Postal Address..... No.....

(7) Are you a widower? ..... No.....

(8) Have you any children? ..... No.....

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

Also their names and ages.....

(9) Is your Father alive? Yes. William Edward Arden.  
If so, state name and address 136. Bayswater Avenue. Ottawa. Ont.

(10) Is your Mother alive? Yes.  
If so, state name and address Julia. A. Arden.  
136. Bayswater Avenue. Ottawa/ Ont.

(11) If your Mother is a widow No.  
Are you her sole support, or not? Yes.

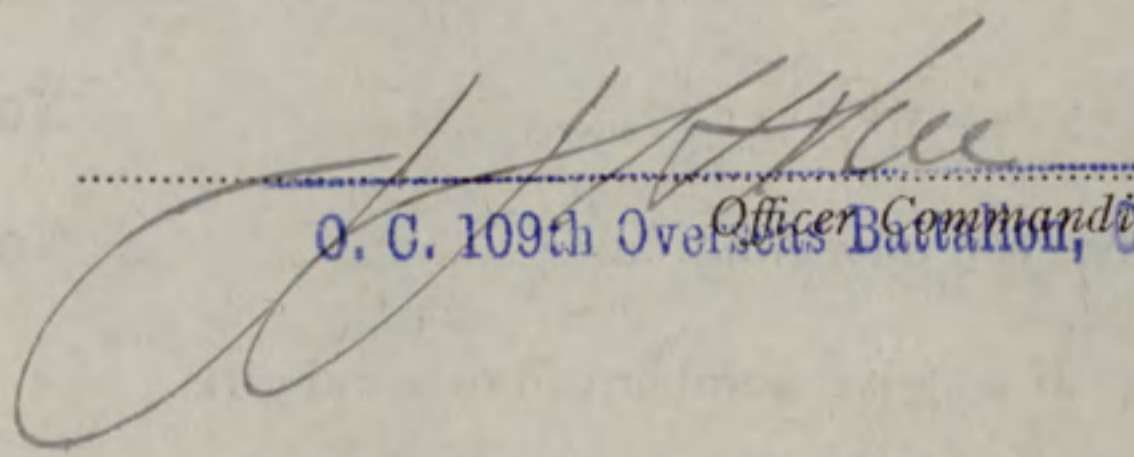
(12) If sole support of widowed mother, state what amount you have given her per month prior to your enlistment, also reason she has no other support than yourself.  
Average \$35 per month.  
Father invalid. deaf & blind.

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

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

(15) Are you insured? No.  
If so, in what Company? No.  
Have you made arrangements for payment of your Insurance premium.....  
If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.

Date July 29th. 1916.

 Lt. Col.  
O. C. 109th Overseas Battalion, C. E. F.  
*Officer Commanding*



**CONFIDENTIAL INFORMATION.**

Report No. 27041 CATEGORY Arden Walter  
 Surname Christian Name  
 Unit 3 Permanent Address 74 Retorja Street  
Q-121 Ottawa, Ont  
 M.D. No. \_\_\_\_\_  
 No. \* 724687 Rank Pte Original Unit 109 BATT Service Unit \* 4th C Lab Batt  
 Age \* 45 Height 5 ft. 2 1/2 ins. Complexion Yellow Eyes Blue Hair Brown Conduct \_\_\_\_\_  
 Date of enlistment Dec 1st 1915 Where enlisted Lindsay Ont Where seen service \* France  
 Ship returned by H S # 2 Date of arrival 4-6-18 Port of arrival Halifax  
 Birthplace \* England Religion C of E  
 Cause of disability Carcinoma Rectum  
 Condition in detail which prevents the soldier from earning a full livelihood

*Died of from above disability  
 July 14<sup>th</sup> 1918*

Reports on men returned for Discharge under Sp. Auth. on White (Black printed) Forms.  
 E. 1. Discharge, no pensionable disability. (Yellow copies).  
 E. 2. Waiting Reclassification. (Pink copies).  
 E. 3. Discharge with claim for pension. (Blue copies).

Degree of incapacity—Eng. Board \_\_\_\_\_ Canadian Board \_\_\_\_\_  
 Is disability due to or aggravated by Service? \_\_\_\_\_  
 Probable duration of incapacity \_\_\_\_\_  
 Does it render him permanently unfit for Military Service? \_\_\_\_\_  
 Is further treatment or use of appliances recommended, if so which? Transferred to  
Hospital No # 3  
 Destination to which transportation issued Kingston  
 Members of Board \_\_\_\_\_

**INFORMATION TO BE FURNISHED BY SOLDIER**

DEPENDENTS	NAME	AGE	WHERE—IF EMPLOYED	WAGES	STATE OF HEALTH
Wife	<u>Mother</u>	<u>74</u>	<u>Assigned Pay</u>	<u>15</u>	<u>Fair</u>
Children 1					
2					
3					
4					
5					

Name and address next of kin Mother Mrs J. S. Arden above address  
 Notification of return to be sent to \_\_\_\_\_  
 Occupation prior to enlistment Weaver And for how long followed 8 months  
 Regular trade or occupation Clerk  
 Average earnings previous to enlistment 40 Per Month Any other income? \_\_\_\_\_  
 Name and address of last employer Innes & Bates Colton Place Ont  
 Rent per month \_\_\_\_\_ If owner of or purchasing property amount due and annual payment, \$ \_\_\_\_\_  
 Taxes \_\_\_\_\_ If Homestead, or Farm, where located \_\_\_\_\_  
 If carrying life or accident insurance, annual premium \$ \_\_\_\_\_ Name of Society \_\_\_\_\_  
~~Unable to follow previous occupation, name preference~~ undesided

References \_\_\_\_\_ I declare that the above statement is correct.  
 Witness Connell  
 Date 4-6-18 Place Halifax Signature W. S. Arden

Remarks by Interviewer: \_\_\_\_\_  
 Last Pay Cert. Cr., \$ \_\_\_\_\_ Dr., \$ \_\_\_\_\_ Amount paid at Depot H.Q., \$ \_\_\_\_\_ L.P.C. leaving Depot, \$ \_\_\_\_\_  
 Amount forwarded to H.Q. Unit, \$ \_\_\_\_\_ Credit Clothing allowances, \$ \_\_\_\_\_  
 PENSION—Class \_\_\_\_\_ Amount per year, \$ \_\_\_\_\_ Period granted for \_\_\_\_\_ Dating from \_\_\_\_\_  
 First payment date \_\_\_\_\_

Reports on men returned for duty to be typed on White (Red printed) Forms).  
 C. Service in Canada. (White red printed forms).  
 D. Treatment. (Pink copies).  
 A. General Service.  
 B. Service abroad, not general.

Form No. 28  
 This form is to be filled out by the soldier and returned to the General Service  
 Department, Ottawa, Ontario, Canada.

I declare that the above statement is correct and true to the best of my knowledge and belief.

Name of Soldier: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Date: \_\_\_\_\_

DEPENDENTS	NAME	AGE	WHERE IS EMPLOYED	WAGES	STATE OF HEALTH

INFORMATION TO BE FURNISHED BY SOLDIER

Members of Bond: \_\_\_\_\_  
 Designation to which transportation issued: \_\_\_\_\_  
 Is further treatment or use of appliances recommended? If so, which: \_\_\_\_\_  
 Does it render him permanently unfit for military service? \_\_\_\_\_  
 Character of disability: \_\_\_\_\_  
 Is disability due to or aggravated by service? \_\_\_\_\_  
 Degree of disability—Reg. Bond: \_\_\_\_\_ Canadian Bond: \_\_\_\_\_

Condition in detail which prevents the soldier from entering the service: \_\_\_\_\_  
 Cause of disability: \_\_\_\_\_  
 Where and when received: \_\_\_\_\_  
 Date of entry into service: \_\_\_\_\_  
 Age: \_\_\_\_\_ Height: \_\_\_\_\_ Complexion: \_\_\_\_\_ Eyes: \_\_\_\_\_ Hair: \_\_\_\_\_ Complexion: \_\_\_\_\_

Unit: \_\_\_\_\_  
 Signature: \_\_\_\_\_  
 Date: \_\_\_\_\_  
 Category: \_\_\_\_\_

CONFIDENTIAL INFORMATION

PARTICULARS MARKED THIS TO BE OBTAINED FROM SOLDIER AND CHECKED FROM DOCUMENTS

Reports on men returned for duty to be filed on White (Red printed) forms.  
 Reports on men returned for discharge under 38-Auth on White (Black printed) forms.

Discharge with claim for pension. (Blue copies)  
 Discharge with pension. (Blue copies)  
 Discharge on temporary disability. (Yellow copies)  
 Discharge on White (Black printed) forms.

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Mar. 1, 1916

Separation and Assigned Pay Branch

6032

Aug 1/16

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

20.00	1/12/17		
	25		

PC 3257

RATE OF ASSIGNMENT

15.00			
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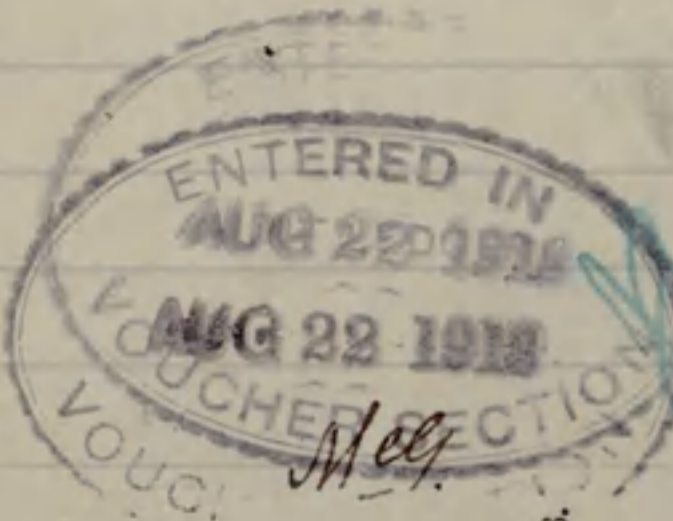
PARTICULARS OF SEPARATION ALLOWANCE

No. 724681  
 Rank *Pte.* Promoted Reverted Discharge  
 Soldier's Name *W. E. Arden*  
 Battalion *109<sup>th</sup> Bn. (B. Co)*  
 Beneficiary *Julia Arden*  
 Relationship *Widowed Mother*  
 Address

PARTICULARS OF ASSIGNMENT

Name *Mrs. Julia Arden*  
 Address *74 Pictoria Ave. Ottawa. Ont.*  
 Change of Address  
 1  
 2  
 3  
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
Sept 30-17		380 00	210 00	590 00	
Oct	D 50615	20	15	35	Handed out 15 <sup>10</sup> / <sub>17</sub> Inc. (Meter)
Nov	B 52901	20	15	35	" " 13 <sup>11</sup> / <sub>17</sub> Sector.
Dec	F 55272	20	15	35	
Jan	C 66748	30	15	45	Handed out 4 <sup>18</sup> Sector.
Feb.	U 73825	25	15	40	M.R.O-2 <sup>a</sup> 14-2-18 SHB Special Cheque Handed out
Mar	G 100548	25	15	40	Handed out 14-2-18
Apr	H 8341	25	15	40	SA 895.00
May	C 7710	25	15	40	A/c Closed 30-6-18
June	B 16120	25	15	40	Ret'd per. Araguaya
July	K 3203	25	15	40	Date 7-6-18 F.X. 10-6-18
Aug	L 219	25	15	40	Clerk S. H. Bartlett
Sept	M 5002	25	15	40	Hand 20-9-18 M.R.O-2 <sup>a</sup> returned 10-6-18
		670 00	390 00	1060 00	ACD 7507 Recd 19-9-18 S.D.



M. F. W. 128  
 4004 6-17-1772-39-141  
 L. L. 2220-M. & D. 1438.

Pensions Notified Date.. 25 July/15.  
 Killed in Action } Date.. 14 July/15.  
 Died of Wounds }  
 Missing }  
 C. 244(1) 19 July/15 Clerk J. Lellari  
 Date Noted..... 25 July 1918

Pension Granted Aug 1-18  
 B.P.C. to Recover  
 Clerk J. P. L. Date Oct 2-18

80<sup>00</sup> Refund Requested  
 8-10-18 S.D.

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

Grid for rate of separation allowance with four empty columns.

RATE OF ASSIGNMENT

Grid for rate of assignment with four empty columns.

PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

Form for separation allowance particulars including fields for No., Rank, Promoted, Reverted, Discharge, Soldier's Name, Battalion, Beneficiary, Relationship, and Address.

Form for assignment particulars including fields for Name, Address, and Change of Address (numbered 1-4).

Main table with columns: Date, Cheque No., Amount S/A, Amount A/P, Total, and REMARKS.

M. F. W. 128
400M-6-17-1772-38-1141
L. L. 22320-M. & D. 1963.

Register No. D.A. 560

WAR SERVICE GRATUITY

A.P. File No. 47974

TO  
DEPENDENTS OF DECEASED SOLDIERS

Regt'l No. 424681 Name Walter Edward Arden  
109 BN Rank Pte (Christian Name) (Surname)

Unit..... Date of enlistment.....  
Date of casualty 14-7-18 B.P.C. File No.....

Was service performed overseas? Not indicated on BPC files that

DEPENDENT

Name Mrs Julia Arden Relationship W. Mother  
Address Apt 5 Champlain Apts  
Chapel St Ottawa Ont

Amount of Special Pension Bonus \$ Nil Abstracted by Bowney

Eligible for Gratuity ..... \$ 18000

Less amount of Special Pension Bonus paid..... \$.....

Less Debit Balance of S. A. or A.P. See file.....

Total deductions \$.....

Balance due \$ 18000

Cheque No. 91795825 ✓ Date issued JUL 27 1920

Clerk Lu Pantelo

REMARKS :  
.....  
.....  
.....

Audited by  
[Signature]  
Date 27/30

M.F.W. 2652  
25M-6-20.  
H.Q. 1772-30-1473

Dec 17

# POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

Name

Surname

Christian Name

Regimental Number

Rank

Address (in full)

Unit

Original Unit

District where paid

Date of Discharge

P. D. P. Filing Number

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

L.L. 53961—M. & D. 9721

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

M. F. W. 127  
 300M-1-19  
 1772-39-1140

Remarks:

MILITIA AND DEFENCE  
 ASSIGNED PAY  
 OVERSEAS CONTINGENTS

To Whom Mrs. Julia Arden  
 Address ~~126 Baywater Ave~~  
 74 Pretoria Ave, Ottawa

By Whom Assigned Arden W. E.

Regtl. No. 724681

Rank Pte

Corps 109 Bn

Rate \$ 15<sup>00</sup>

AUG 1 1916 *Ont*

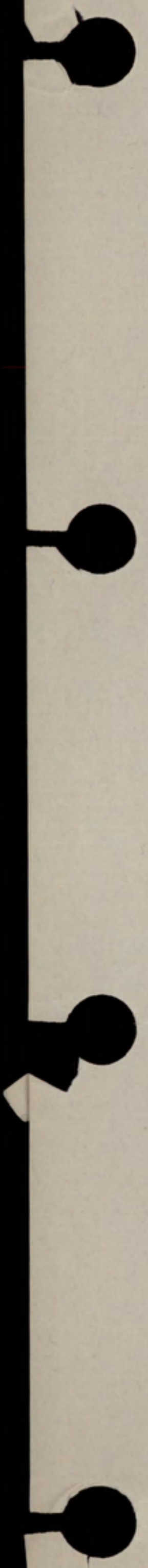
"B" Co

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				



Pensions Notified Date... 25 July/15.  
 Killed in Action } Date 14 July/15.  
 Died of Wounds }  
 Witness C. 1244(W) 19 July/15. Clerk J. H. Clair.  
 Date Noted... 25 July 1915



12  
 13  
 14  
 15  
 16  
 17  
 18  
 19  
 20  
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# ASSIGNED PAY

OVERSEAS CONTINGENTS

Mrs Julia Arden  
Sheet No. 2.  
L. L. Job 318.-Req. 6574.

## PAYMENTS.

Name of Soldier Arden W. E.  
724681 Pte 109 Bn.

Month.	Year.	Cheque No.	Amt.	Remarks.
				<b>AUG 1 1916</b>
				<b>AUG 1 1916</b>
April	1916			
May				
June				
July				
Aug.		15098	15	
Sept.		15152	15	
Oct. 23		19647	15	Handed out 23-10-16.
Nov.		74443	15	
Dec.		33143	15	
Jan.	1917	L37579	15	
Feb.		L 42661	15	15 (J.W.)
March		L 48364	15	15-1.
April		C 324	15	15-8.
May		M 6096	15	
June		N 13059	15	15-6
July		N 21127	15	5
Aug.		O 27221	15	6
Sept.		N 33511	15	03
Oct.				210 = ✓
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

\$15<sup>00</sup>

210

210 = ✓

MILITIA AND DEFENCE  
**ASSIGNED PAY**  
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier \_\_\_\_\_

**PAYMENTS.**

Month.	Year.	Cheque No.	Amt.	Remarks.
Aug.	1913			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1919			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1920			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				

1-3-16

MILITIA AND DEFENCE

140

SEPARATION ALLOWANCE

Name *Julia Arden*  
 Address ~~136 Baywater Ave.~~  
*74 Victoria Ave. Ottawa. Ont.*  
 Relation to Soldier }  
 wife, child or mother } *Widowed mother*

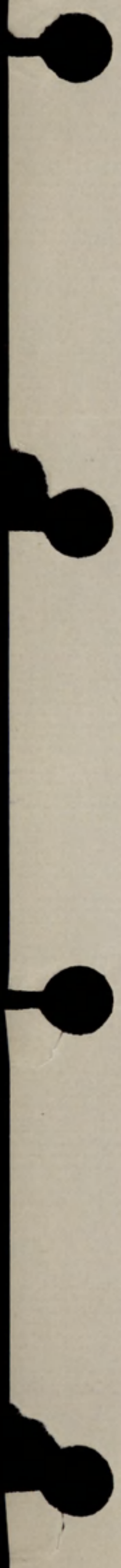
Name of Soldier *Arden Walter Ed.*  
 Regtl. No. *724681*  
 Rank *Plt.*  
 Corps *109th Battalion*  
 To what Corps belonging }  
 when called out } ✓

PAYMENTS

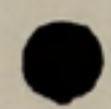
Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
Apl.				
May				
June				
July				
Aug.	1916			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.				
Feb.				
March		<i>8 34140</i>	<i>20 - 20</i>	



Pensions Notified Date... *25 July/18*  
~~Killed in Action~~  
 Died of ~~Wounds~~ } Date *14 July/18*  
~~Missing~~  
 O. *1244 (1)* July/18 } Clerk... *J. de Clair*  
 Date Noted... *25 July 1918*



20



# SEPARATION ALLOWANCE

Sheet No. 2.

*Julia Arden*

OVERSEAS CONTINGENTS  
*Widowed Mother*  
PAYMENTS.

Name of Soldier

*Arden Walter Ed.*

L. L. Job 89002.-Req. 6213.

*724681*

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916	D 44	20	20
May		J 4647	20	20
June		F 4934	20	20
July		n. N 9728	20	20 Handed Out 5-7-16
Aug.		B 10184	20	20
Sept.		F 14780	20	20 Handed Out 8-9-16
Oct.		J 18228	20	20 Handed out 12-10-16
Nov.		F 21224	20	20 Handed Out 7-11-16
Dec.		F 24700	20	20 Handed Out 5-12-16
Jan.	1917	F 28097	20	20
Feb.		F 31009	20	20
March		J 34178	20	20
April		J 146	20	20
May		J 3664	20	20
June		H 6455	20	20 Handed out 9/6/17 Jc
July		G 10155	20	20
Aug.		J 12966	20	20
Sept.		H 16560	20	20
Oct.			20	T → 380 ✓
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE  
**SEPARATION ALLOWANCE**

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier.....

**PAYMENTS.**

Month.	Year.	Cheque No.	Amt.	Remarks.
Aug.	1918			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1919			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1920			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				

A.G.R

Rank

Name

ARDEN, Walter Edward

Reg'l No.

724681

Unit

109th Bn.

If in perm. Corps,  
What Unit?

Lindsay.

Married or Single

Single.

Place and Date of Enlistment

1st Decr., 1915.

Place of Birth Rotherham,

Yorkshire, England.

Name and Address, Next-of-Kin

Mrs. Julia Arden,

136 Bayswater Ave.

Ottawa, Ont. Canada

Relationship

Mother.

Assigned Pay Monthly \$

Payable to

Relationship

Separation Allowance \$

Payable to

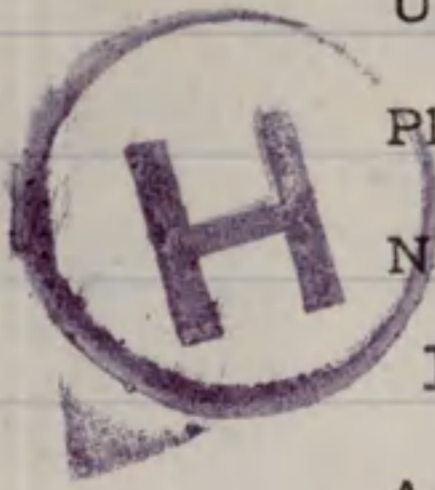
Relationship

Discharge, Date and Place

Reason

Character

H. W. & V., Ltd.—7165-16.



*M.T. 22-2-21 R.P.*

N/E. R.B. No.	1323
File R.L.	
Category	Imm. Can.

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.			
				Arrived in England per H. M. T. 2810 31-7-16
8. 12. 16	109th Bn S.O.S. on transf. to 124th Bn	Witley	8.12.16	Pt D.O. 343
11. 12. 16	124th Bn S.O.S. - fr 109th			267
<del>19. 1. 17</del>	<del>S.O.S. to G.D. Bn</del>		<del>18. 1. 17</del>	<del>19. D.O. 26.</del>
19- 2- 17	124th Bn S.O.S. to C.C.A.C. & att'd Witley	Witley	15-2-17	Pt D.O. 50
22-2-17	" cease att'd 124th & att'd G.D. Bn	"	22-2-17	53
23. 2. 17	G.D. Bn att'd to G.D. Bn for B.D. etc	B'okott	22-2-17.	47
3. 3. 17	" cease att'd to G.D. Bn on being trans from C.C.A.C. to 4th Lab Bn	"	3. 3. 17	54
5. 3. 17	4th Lab. Taken on strength.	Seaford	3.3.17	20
14. 3. 17	4th Lab. Embarked for France	Seaford	14-3-17	Pt/2 O. 29

*Lab  
C.A.C.*

**A.F.B. 103 CHECKED  
& APR 1917**  
*WJR.*

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.				
17.4.17	4 <sup>th</sup> Lab Bn	47 Divl. Rest Station		28.3.17	C.L. A 9 2nd. bon. Tis. R. Thigh
1.5.17	"	To 5 London Field Amb.		14.4.17.	Ch. A 19
3.5.17	"	To duty		16.4.17.	C.L. A 20
26.5.17	---	Reptd from Base. Rejoined unit.	Field	11.5.17	bL A 38. bell Thigh
2.6.17	---	Adm 8 Stationary Hosp.	Wimereux	26.5.17	bL A 42. Brethyma. Nodosum
5.6.17	---	Trans to. 1 bonval Depot	Boulogne	28.5.17	bL A 44. ---
5.6.17	---	Discharged to 3 Large Rest Camp	Field	29.5.17	bL A 44 ---
31.3.18. 4.th. Can, Lab, Bn, Designated, 2. n. Can. Inf, WKs. Bn Pt 2. DO. 24					
31.3.18	2nd Can Inf Worles Bn	Attached as in W.E. 6 Can. General Base Depot	the Field	19.10.17	Pt 24
2.4.18	2nd Can Inf Worles Bn	Ceases att as in W.E. 6 Can. Genl Base Depot + posted to General Depot.		27.3.18	- 25
8.4.18	Genl Depot	T. on from 2nd C. Sick Bn having been adms to Hosp as an of/c Casualty	8 <sup>th</sup> Cliffe	27.3.18	- 83
29.5.18	bL-26/WB	Invalided to Canada	9th	25.5.18	bL B 22
3.6.18	Gen. Dep.	Ceases Apl. 4 is SOS. invalided to Canada	"	25.5.18	Pt. 4 DO 131.



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

W.S.P.

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

# Casualty Form—Active Service.

Unit, Regiment or Corps 124th Bn. C.E.F.  
 Regimental No. 24681 Rank Private Name Arden Walter Edward  
 Enlisted (a) 1-12-15 Terms of Service (a) D. of W. Service reckons from (a) 1-12-15  
 Date of promotion to present rank. } Date of appointment to lance rank } Numerical position on roll of N. C. Os. }  
 Extended \_\_\_\_\_ Re-engaged \_\_\_\_\_ Qualification (b) Weaver

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
	Embarked Canada		Halifax	24.7.16	
	Disembarked England		Liverpool	31.7.16	
8.12.16	106.109 <sup>#</sup>	Transferred to 194 <sup>#</sup> Bn	Witley	8.12.16	Do Pt 2. # <del>343</del> 343
					<u>Arden Walter Edward</u> Capt. ADJUTANT 100th Overseas Battalion, C.E.F.
11 3-12-16	124th Bn.	Taken on strength of 124th Bn., C.E.F.	Witley Camp	8-12-16	Part ii Orders <del>269</del> 269
19-1-17	124th Bn.	Transferred to Garrison Duty Battalion	Witley	18-1-17	MAJOR-ADJUTANT 124th BATTALION C.E.F.
					<u>Arden Walter Edward</u> Lieut. Adj. 124th Battalion, C.E.F. Inf.

(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		KI. 12/6179. 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				
19.2.17	124 <sup>th</sup> Bn	Transferred to C.C. A.C. <i>attached</i>	Witley Camp	15.2.17	Part II Orders # 50 <i>attached</i> Lieut. Asst. Adjt. 124 <sup>th</sup> Canadian Pioneer Bn
22-2-17	124 <sup>th</sup> Bn.	<i>Cases to be attached</i> Attached to Garrison Duty Bn., Bramshott	Witley Camp	22-2-17	Part II Orders No. 53 <i>attached</i> Lieut. Asst. Adjt. 124 <sup>th</sup> Can. Bn.
<p style="text-align: center;"><i>Cases to be attached on being transferred to 4<sup>th</sup> Labour Bn, Seaford March 3<sup>rd</sup>. 1917. (Full Bn 25-2-4 A.B. 28217)</i></p>					
3/3/17.				3/3/17	Part II Orders # 54 <i>attached</i> The Garrison Duty Battalion, Canadians. (Bramshott, Hants.)
MAR 1917 4 MAR 1917	C.C. 4 <sup>th</sup> L. Bn	I.O. 4 <sup>th</sup> Lab. Bn	Seaford	3 3 17	Part - 2 D.O. 20
	"	Proceeded Overseas	"	14 MAR 1917 J.A. Pope for	Part 2 D.O. P. 50 # 29 Seaford. R.O 1201 Lt. + Adjt. 4 <sup>th</sup> Labour Bn.
15-3-17	M.L.O.	DISEMBARKED FRANCE	HAVRE	15-3-17	N.R.
31-3-17	47.D.R. Stn.	I.C.T. Thigh. R. Adm.	6th.L.F.A.	28-3-17	A 36. D.C.S. No 2.
1-4-17	O.C. Unit.	Evacuated Sick.	Field.	"	B 213. " " 2.
7-4-17	47.D.R. Stn.	I.C.T. Thigh. R. Adm.	47.D.R. Stn.	28-3-17	A 36. " " 6.
14-4-17	"	Cellulitis. Thigh. To	5.L.F.A.	14-4-17	" " " " 7.
21-4-17	5.L.F.A.	" " " Adm.	5.L.F.A.	14-4-17	} A 36. D.C.S. No 8.
		To. Duty.		16-4-17	
13.5.17	OC Unit	Rejoined Unit	Field	11.5.17	B213. DCS No 14. KI. 16/6179.
20.5.17	"	Evac. Sick.	"	18.5.17	" " " 16.
26-5-17	10.C.C. Stn.	I.C.T. Thigh. Adm.	10.C.C. Stn.	24-5-17	} A 36. D.C.S. No. 18.
		To. No. 20. Amb. Tr.		26-5-17	

CERTIFIED CORRECT.  
 3/3/17.  
 APR. 1917

**Casualty Form—Active Service.**

Regiment or Corps 4th Can. Labour Batty.

Rank Pte. Surname ARDEN. Christian Name Walter, Edward.

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

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

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

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

Occupation..... Signature of Officer.....

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A.36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents
Date	From whom received				
			Embarked ...		
			Disembarked...		
26.5.17.	6 <sup>th</sup> L.T.A.	Erythema.	Adm 6 L.T.A.	18.5.17	2 A 36
			To 10. C.C.S.	24.5.17.	DCS No 18.
27.5.17.	8. Staty. Hosp.	" (Sev)	Adm 8. Staty	26.5.17.	W3034/W1223.
30.5.17.	No 1. Con. Dep.	Unfit.	To No 3 Rest Camp.	29.5.17.	W3034/W1573.
29-5-17.	No. 1. Con. Depot.	Sick.	Adm. 1. Con. Depot.	28-5-17.	W3034/W1486.
29-5-17.	8. Staty. Hosp.	Boils. Sev.	T. No. 1. Con. Dep.	28-5-17.	W3034/W1562.
5-6-17.	O.C. C.B.D.	Arrived Class "T.B."	Boulogne.	4-6-17.	N.R.
10.7.17	O.C. C & B.D.	Classified P.U. (notified by Base 10/7/17)			CG 330/24 10/7/17
		To Red. Bd. Shd. need.			
5-7-17.	C.G.B. Depot.	Classified "P.B."	Etaples.	5-7-17.	W.3339.
26-6-17.	" "	Class "P.U." Eyes.	"	26-6-17.	W.3339.

(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.



3<sup>rd</sup> Huss

Casualty Form—Active Service.

Rank Pte Regiment or Corps 109 Bn  
 Surname Arden Christian Name Walter Edward

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

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

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

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

Occupation..... Signature of Officer.....

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B 213, Army Form A. 35, 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. 35, or other official documents.
Date	From whom received				
		Embarked ...			
		Disembarked			
<u>8.4.18</u>	<u>Genl Depot</u>	<u>To S from 2<sup>nd</sup> C I w wks, Bn</u>	<u>Schiffe</u>	<u>27.3.18</u>	<u>DD 83</u>
<u>25.5.18</u>	<u>T.O.S.</u>	<u>from Overseas</u>			<u>H.Q. 58.</u>
<u>14.7.18</u>	<u>S.O.S.</u>	<u>No. 3 D. D., Kingston</u>			<u>14-7-18 H.Q. 91</u>
		<u>(Deceased)</u>			

*[Signature]*  
 for Colonel i/c Records, Lieut.

*[Signature]* Major

(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.



Niagara Camp, Ont.  
June 20th, 1918.

From: President Standing Medical Board,  
Niagara Camp, Ont.

To: A.D.M.S., M.D.#2,  
149 College St., Toronto.

Sir:

#D3310009 Pte. S.F. Arden.  
No. 2 Special Service Co.

In answer to your 2 D 34-Ar-108,  
I have the honor to report that on  
communication with Medical Officer, he  
states that in Sect. 8(a), nearest date  
of origin obtainable is Jan. 1918.  
Symptoms were no doubt developing  
previous to this, but were not mentioned  
by the man.

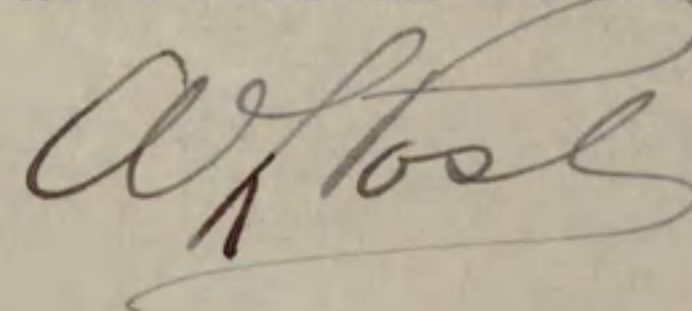
Sect. 9(2) The nervousness  
described here immediately followed the  
automobile accident. Was unconscious  
for two hours following injury. See  
history of accident under Sect. 10.

This for your information please.

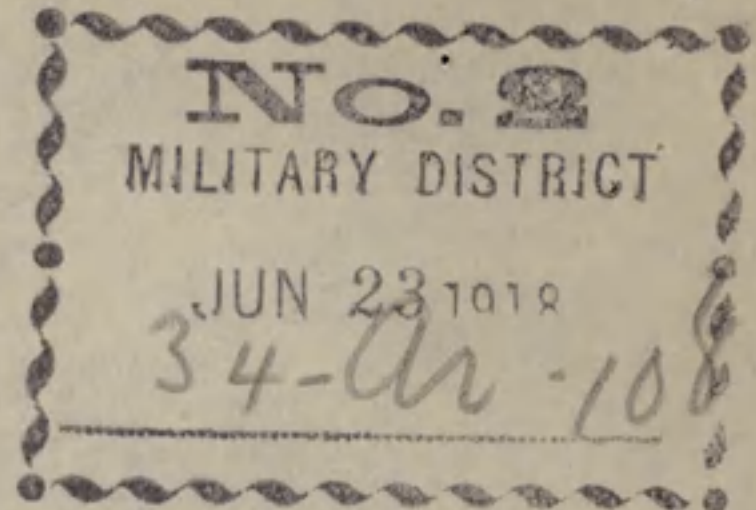
I have the honor to be

Sir

Your obedient servant,



Capt. A.M.C.  
Pres. S.M.B.







Ophthalmic Department,  
Bramshott.

Date.....

To M.O. .... *124* ..... Battn.

Rank & Name..... *Pte. W. E. Arden* ..... No. .... *724 681* .....

Unit..... *Battn.*

Visual acuity

R.E..... *6/24* .....

L.E..... *6/18* .....

" " with glasses

R.E.....

L.E.....

*not improved*

~~Unfit.~~ Fit.

Glasses not ordered.

Remarks:-

*perfect*

No.....

Sig..... *W. E. Arden* .....

Captain C.A.M.C.

*NOTE*



Surname *Arden* Christian Name or Names *W. E.* Reg. No. *724681*  
 Rank *Pte* Unit *4th Lab. Batt.* Co. *2C.I.W.B.* Troop *Misc.* Batty. *Misc.*  
 Hospital \_\_\_\_\_ Date of Admission \_\_\_\_\_

Transferred

*47 Div. Rest Str. Hosp. 28-3-17*  
*5 Gordon F. Amb. 14-4-17*  
*8 Stat. Wimereux Hosp. 26-5-17*  
*1 Conval. Boulogne Hosp. 28-5-17*  
*3 Large Rest Camp Hosp. 29-5-17*

Diagnosis

(1) Later Diagnosis (if changed)

*Inf. Con. Tho. R. Thigh Cellulitis Thigh rw.*

(2) *Erythema nodosum*

(3) *P.U.O. and Debility<sup>hu.</sup>*

Additional Diagnosis: if more than one state present

*Carcinoma Rectum a.*

DISPOSITION

*To Duty 16.4.17* Date

*Ref'd Unit 11-5-17*

REMARKS

*A9*  
*c.l. 17-4-17*  
*" 1-5-17 a19*

*3.5.17 A20*

*D. to C. per HS. Araguaya Sailing No. 57 from Avonmouth 25-5-18.*

*c.l. 2-6-17 A42*  
*A44*

*c.l. 5-6-17*  
*23-3-18 A168*

*3.4.18 B171.1*

*23.4.18<sup>B188</sup> Ser ill 23.4.18*

*2.5.18 B196. still Ser ill. 1.5.18.*

*7.5.18 B3*

*16.5.18 B133 Seriously ill 18.5.18*

*27.5.18 B20. Rem. from Ser. ill 25.5.18.*

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

EPITOME OF HOSPITAL TREATMENT.

	Hospital	Adm.
1.	7 Can. Gen. Etaples	16.3.18
2.	War Hp. Naven Rd Guildford	27.3.18
	156 G Taplow	4-5-18
3.	5 C. G. Kirkdale	18.5.18
4.		
5.		
6.		
7.		

G. L 29.5.18, B. 22, Inv to Canada 29.5.18.

\*Name *Arden W. Allen Edward* Rank *Pte.* Regtl. No. *724681*

Fyle Depot *B-A-124*

Original unit *109<sup>th</sup> M.* Present unit *4<sup>th</sup> Lt. Bn.* M. or S. Age *42* Religion *C of E* Ref. H.Q. ....

Port, ship and date of arrival *Halifax "H. 2" 4/6/18*

Next of kin *(Mother) Mrs Julia Arden, 136 Bayswater Ave Ottawa*

Address on leave .....

Address on discharge .....

Transportation issued  Yes  No Date ..... Character on discharge .....

Previous occupation *Weaver* Date and place of enlistment *Dec 1<sup>st</sup> 1915 Lindsay*

Diagnosis *Carcinoma rectum* Date of Medical Boards .....

Date	Remarks	Pt. 2 Order No.
<i>6-6-18</i>	<i>Posted to Hospital Sec'y Queens</i>	<i>H557</i>
<i>16-6-18</i>	<i>Trans from Queens to C.C.P. Coy</i>	<i>H5-69</i>
<i>14-7-18</i>	<i>Deceased</i>	<i>H591</i>

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

Date.

Remarks.

Pt. 2 Order No.

M.F.W. 192.  
60M-3-18. (D.P.) 353.  
1772-39-1243.

649-A-3155

✓ Arden, W.E., Pte. 724681 4th ~~Labour~~ Btn. ✓

#3

Med. & Dec. (Mother) Mrs. J. A. Arden, ✓  
Apt. 5, Champerlain Apt  
395 Chapel St.,  
Ottawa, Ont.

(M)

P. & S. (Mother) Address as above.

(Ser. # 806377)

Mem. Cross. (Mother) " " "

Scroll Desp. 3-5-21 Reqn. No 240872

Plague Desp. 49621 Reqn. No 26747

not eligible for 14-15 Star  
E. " " N.M.  
E. " " B.W.M.

SEP 15 1921

12 R.R.

~~M~~ 47176

MAR 4 1921

1100



Arden, W.C. pte 724681

109 Sn.

Mem Cross -

Mrs J. A. Arden (m)  
Champlain Apts.  
Chapel St.  
Ottawa,  
Ont.

3

Temp card Return X 6795.

M<sup>r</sup> Arden P.O. Bd.

M 43980

PEB 4 1921

733

SURNAME.

Arden

CHRISTIAN NAMES

Walter Edward

REGL. No.

724681

RANK

Sgt. Pte.

UNIT

109th No 3 D.D.

Batt.

FORMER CORPS

Nil.

Enl. Dec. 14-9-18.3  
FOLL  
Pt. II 91-17-7-18.

NEXT OF KIN.

NAMES IN FULL

Arden, Mrs. Julia A.

RELATIONSHIP TO SOLDIER

Mother.

ADDRESS

~~136 Bayswater Ave., Ottawa~~  
74 Pretoria Ave. Ont

Increase of Gas.  
CHANGE OF ADDRESS

notify Mr.  
Arden. Local 89

Please notify  
instead of Hoffman

COUNTRY OF BIRTH

England, Rotherham

DATE

Jan. 14<sup>th</sup> 1874

PLACE OF ATTESTATION

Lindsay, Ont.

DATE

Jan. 7<sup>th</sup> 1916.

Sailed from Halifax 23/17 16 per S.S. "Olympic"

458  
Pt 4/6/18 18.3

**MARRIED**

**SINGLE**

*Yes.*

**WIDOWER**

**TRADE OR CALLING**

*Weaver.*

**RELIGION**

*Church of Eng.*

**DESCRIPTION.**

**APPARENT AGE**

*41*

**YEARS**

*11*

**MONTHS**

**HEIGHT**

*5*

**FEET**

*2*

**INCHES**

**CHEST MEASUREMENT**

*31*

**INCHES**

**EXPANSION**

*2*

**INCHES**

**COMPLEXION**

*Fair*

**EYES**

*Blue.*

**HAIR**

*Dk. Brown.*

**DISTINGUISHING MARKS**

*Birthmark on left cheek.*

**MEDICAL EXAMINATION.**

**PLACE**

*Lindsay, Ont.*

**DATE**

*Dec. 1<sup>st</sup> 1915.*

Name **ARDEN Walter** Rank **Pte** Reg. No. **724681**  
 Unit **Edward**  
**Fourth Canadian Labour Battn**  
 Next of Kin **CANADA**

Date 1917	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
Mch 28	No 47. Div Rest Station		Inf. Con. Tis. R. Thigh.	A9		
Apr 14	No 5 Ldn F.A.		Cell. Thigh	A19		
" 16	To duty.		do	A. 20.		
May 11	Reptd. Base send Unit	do		A 38		
" 26	No 8 Staly Hosp	everment	Crithyma nodosom	942		
" 28	No 1 Con Depot	Boulagne	DO	DO		744
" 29	Dise to 3 large	Rest Camp.	DO	DO		



No. 724681. RANK

Pvt

NAME Arden W.

C.

T. O. S. 1-12-15.

UNIT

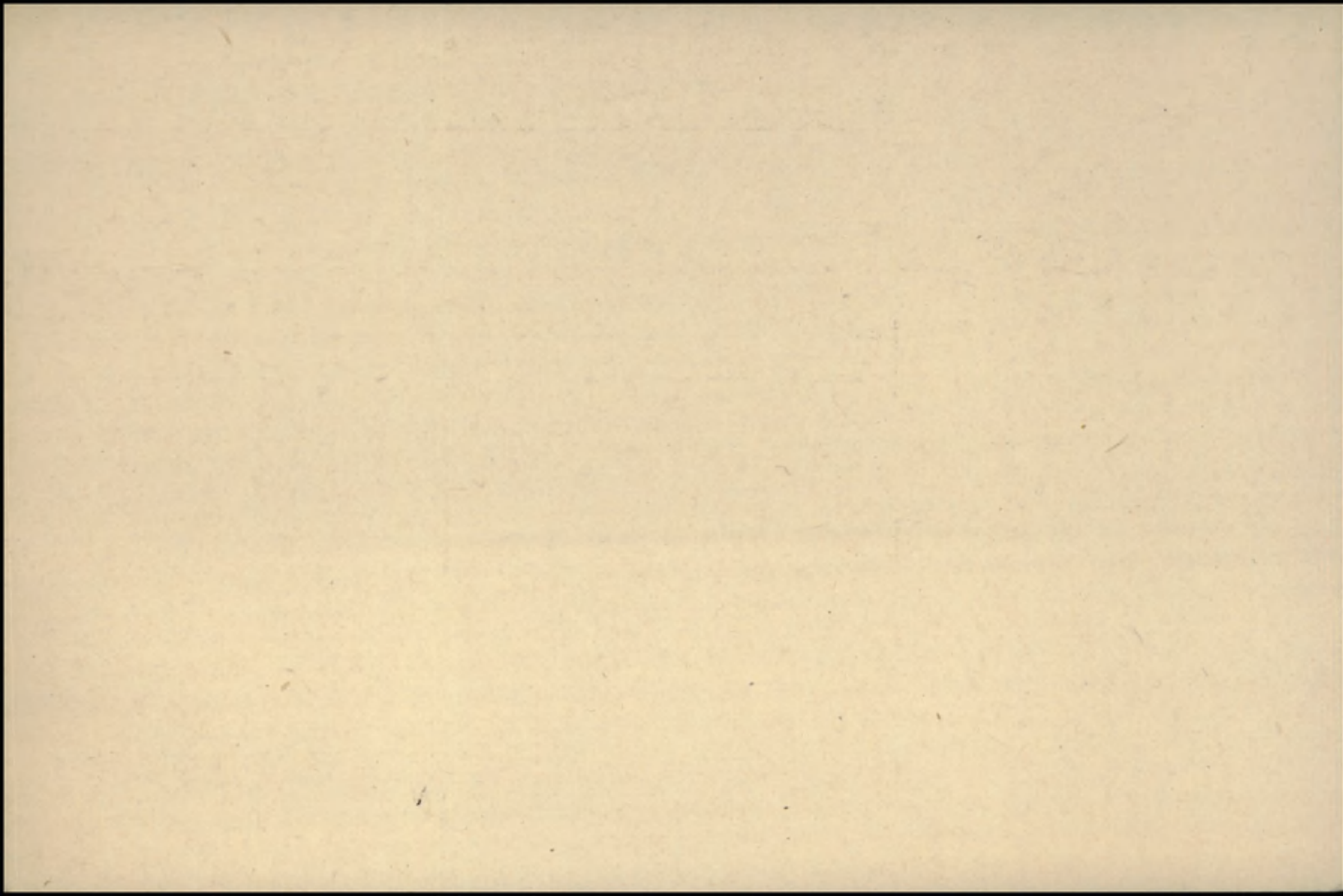
109th. Battalion

d. O. 14. 6-12-15

M. D. 3

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915 Dec.	1915 Dec 31	✓	Prom. Sgt. 18-1-16	J. O. 52. 20-1-16.
1916 Jan.	1916 Feb.	✓		
	Mar.	✓		
	April	✓		
	May	✓		
	June	✓		
	July	✓		

UNIT SAILED  
JUL 23 1916





43667

REG. NO. 724681 NAME Arden Walter (SURNAME FIRST)

RANK Pte CORPS 109th Bn

AGE 45 SERVICE 28/12, C 1/12, F 12/12

NAME OF HOSPITAL Queens Hill PLACE Kingston

DATE OF ADMISSION 6-6-18

DISEASE Carcinoma of Rectum

DISCHARGE Died 14-7-18

OPERATION

DISCHARGED TO DUTY

TRANSFERRED TO (Meningeal) To CC & P Ottawa 16-6-18

DISCHARGED BY MEDICAL BOARD

REMARKS .....

Lined area for writing remarks.

Name ARDEN

Rank Pte

Reg. No. 724681

Unit 2<sup>d</sup> C. Inf. Wh. Bn

Next of Kin Canada

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1918						
10. 3.	7. C. S. W. Staples	P. U. O. 9	Debilite	A168		378/5
27. 3.	War M. Warren R. Guildford.	do.	do.	B171		15254 3/4/18.
29. 4.	do	Sen. Ill.		B188	Qhov	7305
(30. 4.	Still Ser ill					7155
1. 5.	Still Ser ill			B196		7232
4. 5.	15. C. Ge. W. Taplow	do		B3		17515 7/1/18
18. 5.	2 <sup>d</sup> Can Gen. W. L. P. 2001	Carcinoma Pictum		B13	Q247	7890
(21. 5.	Still Ser ill			Q260		9002
		Carcinoma Pictum				11/5/18
						O. S. M.

over.

over

Date 1918	Movement	Place	Casualty	List No.	Notified N/K O?	W.O. List
25	5 Taken off Ser Old List	Liverpool	B20	Q260	9118	
25	5 Inclusive to Canada	G.M.	Carcinoma	B22	9263	

*ABDEY*

1918

25

5

Taken off Ser Old List

Liverpool

B20

Q260

9118

25

5

Inclusive to Canada

G.M.

Carcinoma

Restum B22

9263

Number

724681

Rank

Plt

~~Plt~~  
~~Plt~~

Surname

ARDEN

Christian Name

Walter Edward

Units

2nd Can.

Can. Inf. Wks. Bn.

Theatre of War

17 France

Date of Service

14-3-17

(D)

Remarks

Mother - Mrs J.A. Arden Living ap's

Latest Address

126 Bayshore Ave. Ottawa  
Ottawa Ont

Roll No.

B. Page 20441

200m.-6-21...

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

RANK

SURNAME

INITIALS

UNIT

*Reviewed by V as per  
Reviewed for this order  
Rec'd G. deary*

*24 11 / 23*

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

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

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

Railway.....

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

destination.....

(Sgd.).....

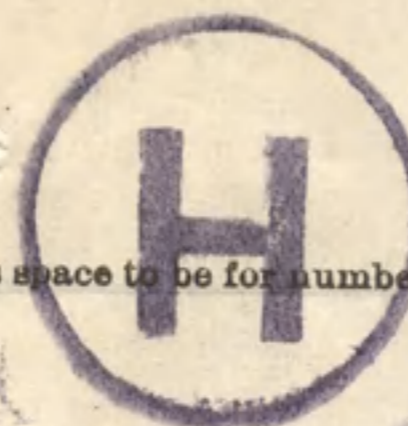
## List of Discharge Documents.

Reg. Conduct Sheet, Militia form B. 263.	Attestation Paper, Militia Form B. 235.
Squadron } Battery } Conduct Sheet, " B. 263a. Company }	Proceedings on Discharge " B. 218.
Copies of Convictions, by C. P. in MS.	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.)
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."

*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.*

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.	724681.
Rank	Private,
Surname.....	Arden,
Christian Name.....	Walter Edward
NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.	
Corps (Squadron, Battery or Company)	109th Battalion.
Date of Discharge	Deceased, July 14th, 1918.
Place of Discharge	Kingston, Ontario.
1. DESCRIPTION AT THE TIME OF DISCHARGE.	
Age.....43..... years..... months.	Descriptive Marks Birth mark on left cheek
Height.....5..... feet.....2..... inches.	
Complexion Fair	
Eyes Blue	
Hair Dark brown	
Trade Weaver	
Intended place of residence } (To be given as fully as practicable.)	136 Bayswater Ave., Ottawa, Ontario.
2. The above-named man is discharged in consequence of  Deceased.	
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.	
3. Conduct and character while in the service have been, according to the records, etc.	
N.B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldiers and the Officer Commanding his Squadron, Battery or Company.	
4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)	

M. F. B. 218.

100M.—1-17.  
H. Q. 1772-39-113.

(OVER)

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

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)..... Kingston, Ont.  
 (Date)..... July 14th, 1918.  
 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).....  
 (Date).....  
 (Signature of Witness.)  
 When a soldier is absent through illness or any other cause and it is not desirable to forward the 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)..... 2 years..... days.  
 Total..... 2 years..... 249 days.

11. Confirmation of Discharge.

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

(Place)..... Kingston, Ontario.  
 (Signature).....  
 Major  
 for O. O. Director Report No. 3  
 (Date)..... July 20th 1918.

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.)

List of Discharge Documents

Reg. Conduct Sheet	Form B. 332	Attestation Paper	Form B. 332
Company Conduct Sheet	B. 334	Proceedings on Discharge	B. 314
Company			
Battery			
Squadron			
Company of Convictions by C. P.	in M2		
Medical Report for Invalid	B. 331	Proceedings on Discharge	(a)
Medical Report for Invalid	B. 331	Proceedings on Discharge	(b)
Medical Report for Invalid	B. 331	Proceedings on Discharge	(c)
Medical Report for Invalid	B. 331	Proceedings on Discharge	(d)
Medical Report for Invalid	B. 331	Proceedings on Discharge	(e)
Medical Report for Invalid	B. 331	Proceedings on Discharge	(f)
Medical Report for Invalid	B. 331	Proceedings on Discharge	(g)
Medical Report for Invalid	B. 331	Proceedings on Discharge	(h)
Medical Report for Invalid	B. 331	Proceedings on Discharge	(i)
Medical Report for Invalid	B. 331	Proceedings on Discharge	(j)

(OVER)



LIST OF DISCHARGE DOCUMENTS.

1. Proceedings on discharge. (Army Form B. 268.)
2. Proceedings on transfer to reserve (if any). (Army Form B. 2056.)
3. Duplicate attestation.
4. Army Form B. 97 (if any).
5. Declaration of change of name (if any).
6. Re-engagement paper (if any). (Army Form B. 136.)
7. Authority for continuance, or extension, of service (if any). (Army Form B. 221.)
8. Court of Inquiry on an injury (if any). (Army Form A 2.)
9. Regimental conduct sheet. (Army Form B. 120.)
10. Company conduct sheet. (Army Form B. 121.)
11. Copies of convictions by Civil Power (if any).
12. Medical history sheet. (Army Form B. 178.)
13. Medical report on invalid (if any). (Army Form B. 179.)
14. Copy of receipt for purchase money (if any).
15. Attestation of fraudulently enlisted man for corps in which he has not been held to serve (if any).
16. Detailed statement of former service allowed to reckon towards pension (if any).
17. Copy of 3rd page attestation (in the case of men from abroad entitled to deferred pay who go to Netley or the discharge depot for discharge).
18. Descriptive return (Army Form D. 400), where required. See section 11 on second page.
19. Active service casualty form. (Army Form B. 103.)
20. Employment sheet. (Army Form B. 2066.)

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

1. Duplicate attestation. (On third page the date and cause of discharge will be entered and signed by the competent military authority).
2. Medical history sheet (if any). (Army Form B. 178.)

Instructions as to the preparation, dispatch, and custody, of discharge documents.

1. When a soldier is to be discharged, the documents retained with the duplicate attestation will be placed inside this form. Should any of the documents be missing, an explanation of the deficiency, signed by the commanding officer, must be substituted for the missing document. The officer in charge of records will then extract from the original attestation, any documents required to complete the list of discharge documents enumerated in the margin, which will then be placed in this form in the sequence given.

2. When men are discharged from the colours at home as medically unfit, or with claims to pension, Army Form B. 268 will be sent confirmed, together with the duplicate attestation and documents retained therein to the officer in charge of records 10 days in advance of the date for discharge in the case of invalids, and 14 days in other cases. This officer will then extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin, place them in this form, and after carefully checking the duplicate attestation with the original forward the whole to the Secretary, Royal Hospital, Chelsea. When such men are discharged abroad, the same procedure will be adopted as above, with the exception that the discharge documents will be sent to the officer in charge of records immediately after discharge takes place (except in the case of men who are granted gratuities on discharge from local battalions or companies, Royal Artillery).

3. When soldiers are sent home from abroad for discharge, the documents retained with the duplicate attestation will be placed inside this form and sent home with the men for transmission to the officer who carries out the discharge, together with the following additional forms:—

- (a) Discharge certificate (Army Form B. 2079 or Army Form B. 264).
- (b) Character Certificate (Army Form B. 2067) if entitled.
- (c) Copy company conduct sheet (Army Form B. 121) when required under King's Regulations.

The duplicate attestation and documents retained therein will be sent to the officer in charge of records, who will extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin and place them in this form.

4. The discharge documents of re-enlisted pensioners, on discharge, will be sent to the officer in charge of records, who will extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin, place them inside this form, and forward the whole to the Secretary, Royal Hospital, Chelsea, irrespective of the cause of discharge.

5. The original and duplicate attestations of recruits who are rejected before, or on, final approval will be retained by the approving officer for one year, when they will be destroyed.

6. In all other cases the discharge documents will be sent, directly the discharge is carried out, to the officer in charge of records of the unit concerned.

7. Postage need not be paid, and receipts are not required, in the case of documents sent to Chelsea or to the War Office,

8. When the discharge documents of men not entitled to pension are sent to the officer who will have final charge of them, they are to be accompanied by Army Form B. 279, and that officer will, if they are found to be correct, sign and return Army Form B. 279. Should any document be missing, he must at once apply for it.

9. The officers having final charge of the discharge documents will arrange them according to regimental numbers, and enter the names in the alphabetical index, Army Book No. 129.

This space to be left blank for the Chelsea Number.

2

228

H 2

Sailed May 25

Proceedings on Discharge

Army Form B. 268.

3

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

No. <u>724681.</u>		Army Rank <u>Private.</u>
Name <u>ARDEN. Walter, E.</u>		AUG 17 1918
(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)		
Corps <u>109th. Battalion.</u>		
Battalion, Battery, Company, Depot, &c. <u>General, Depot.</u>		(0)
(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 <u>Invalided to Canada for further treatment.</u>		
1. Description at the time of discharge.		
Age _____ years _____ months	Descriptive marks.	
Height _____ feet _____ inches		
Chest measurement { girth when fully expanded _____ ins. range of expansion _____ ins.		
Complexion _____		
Eyes _____		
Hair _____		
Trade _____		
Intended place of residence (To be given as fully as practicable) { _____ _____		
(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 _____ _____ _____		
(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.)		
3. Military character:— _____ _____		
4. Character awarded in accordance with King's Regulations:— _____ _____ _____ _____ _____ _____ _____ _____		
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*		

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

Four horizontal lines for listing 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) \_\_\_\_\_

(Date) \_\_\_\_\_ Commanding \_\_\_\_\_ Battn. \_\_\_\_\_ Regiment.

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

I 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.

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.)

\_\_\_\_\_

**Objective Signs:-**

Man is a very nervous type. Trembles visibly when spoken to and is very nervous when speaking. The knee jerks are ~~very~~ exaggerated, particularly on the right side. The limbs both upper and lower are a poor color and feel clammy and cold. The heart responds normally to exercise. Misses one beat occasionally. No murmurs present.

All other organs normal.

1. Incapacity is due to diseased condition of the thyroid gland.
2. Incapacity is due to a weakened condition of the nervous system.

**TO BE COMPLETED WHEN TREATMENT IS REFUSED**

I, the undersigned, understand the nature of the treatment which it is recommended that I should undergo and refuse to accept it.

Witness..... Signed.....  
Should the refusal of the soldier to accept treatment appear to be unreasonable, or should he decline to sign this statement the Board of medical officers should so state.

**INSTRUCTIONS**

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 soldier's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the soldier concerned, from witnesses, or from documents.
4. If a complete answer to any question requires more space than that reserved for it, the answer may be continued on the blank space on 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 and Sons.

N:O:K:--Sisters--Misses R. and D. Arden, Box 622, Paris, Ont.  
M's Address--Same.

Med. Exam.--Capt. R.H.Palmer.

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

FORM TO BE USED FOR WARRANT OFFICERS, N.C.O'S, AND MEN

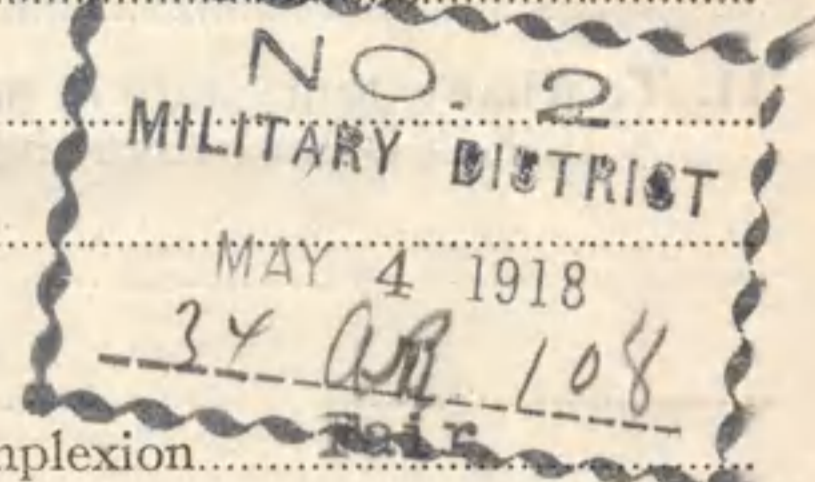
**MEDICAL HISTORY OF AN INVALID**

STATION Exhb. Camp, Toronto. DATE APR 24 1918

1. (a) Unit No. 2 S.S. Co'y (b) Regimental No. D.3310009 (c) Rank Private  
(d) Surname A-R-D-E-N (e) Christian name Sydney Frank

2. Age last birthday 21 Date of birth May 1st 1896

3. Enlisted at Brantford, Ont. on January 5th. 1918.



4. Personal description :-

(a) Height 5ft 2in (b) Weight 114 (c) Complexion Fair  
(d) Colour of hair Auburn (e) Colour of eyes Grey (f) Identification marks ○

**Four Vaccination Marks.**

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

Box 622, Paris, Ont.

6. Former trade or occupation Spinner.

7. (a) Service	PERIODS	
	From	To
<u>2nd. Depot Battn. 2nd. C.O.R.</u>	<u>Jan. 5th. 1918.</u>	<u>Feb. 25th. 1918.</u>
<u>No. 2 Special Service Co'y.</u>	<u>Feb. 25th. 1918.</u>	<u>Date.</u>

(b) Has he been Overseas? No.

8. Present disease or disability (use authorized nomenclature if possible). 1. Hyperthyroidism.  
2. Nervousness.

(a) Date of origin 1. January, 1918. 2. December, 1917. (b) Place of origin 1 and 2. Brantford.

(c) Cause\* 1. Unknown. 2. Automobile Accident.  
(Here include original disease or injury)

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

**1. Subjective Symptoms:-**

Man states he has noticed his neck getting larger since January, 1918. At present he cannot button his collar of his tunic and he has discomfort when swallowing.

**Objective Signs:-**

There is uniform enlargement of the gland (thyroid). A very marked tremor of the hands and finger also present. There is no exophthalmos or tachycardia noted.

**2. Subjective Symptoms:-**

Man states he was struck by an automobile on December 31st. 1917 and sustained a fracture of the skull. Since that time he has been extremely nervous and says he sleeps poorly. His memory is poor and he has periodical attacks of dizziness.

See Page FOUR.

[After describing all abnormalities, anatomical and functional, contributing to present incapacity (see section 1) 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.]

3

10. History ;

Here give a description of wounds, scars, deformities, and signs and symptoms of abnormal conditions present and not included in answer 8. This section cannot be completed without stripping the soldier and subjecting him to a thorough physical examination

Four vaccination marks on left arm.

On December 31st. 1917, was struck by an automobile in a funeral procession, when the car skidded going down a hill and turned over. Man was in the front seat and was found with his head pinned under the car, unconscious. Was unconscious for two hours and was unable to work again until called up for military service.

11. To what extent, state in percentages, is capacity 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.

12. Did the disability arise on or off duty? 1. On duty. 2. Off/Duty Before enlistment.

13. Was a Court of Inquiry held? 1. No. 2. Not applicable.

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

Yes. 1. and 2. Yes. No. 2. Not applicable (If the answer is in the affirmative, state in percentages, to what extent the soldier 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? 1 and 2. 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? 1 and 2. At least 6 months.

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

1 and 2. None.

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

1 and 2. No.

Rest at Home would be preferable.

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

20. Recommendations

That he be Discharged as Physically Unfit.

G. M. Bartlett Captain. Medical Officer by whom the case is brought forward.

STATEMENT OF THE SOLDIER.

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

I, the undersigned S. F. ARDEN, 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

S. F. Arden Signature of soldier 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.

We concur.

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

No. No. No. No. Yes.

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

Placed in Category B. and be discharged as physically unfit.

W. J. ... Capt. A.M.C. J. H. ... Capt. A.M.C. W. ... Capt. A.M.C. Members. President.

STATION Exhibition Camp, Toronto.

DATE May 2, 1918.

APPROVED BY

DATE 24/6/18

APPROVED BY

DATE

Assistant Director of Medical Services.

Director-General of Medical Services.

MARRIED OR SINGLE *Single*  
 PLACE OF BIRTH *Rotherham Yorkshire Eng*  
 NAME AND ADDRESS OF NEXT OF KIN *Mrs Julia Arden*  
*136 Baywater Ave Ottawa Ont*  
 RELATIONSHIP OF NEXT OF KIN *Mother*  
 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

REG'L. No. *724681* RANK *Pte* NAME *Arden Walter Edward*  
 IF IN PERM. CORPS  
 WHAT UNIT UNIT *109<sup>th</sup> Bn* TRANSFERRED TO *124 Bn.* DATE *21.1.17* AUTHORITY *11343 8.12.16*  
 PERMANENT FORCE ALLOWANCES TRANSFERRED TO *ccac.* DATE *11.2.17* AUTHORITY *6050*  
 PLACE OF ATTESTATION *Lindsay Ont* TRANSFERRED TO *Bn Hook Sub C* DATE *31.5.17* AUTHORITY *AN*  
 DATE OF ATTESTATION *Dec 1 1916* TRANSFERRED TO *4 Lab Bn* DATE *11.8.17* AUTHORITY *AN*  
*Base Depot Etaples 1-1-18 No. 31/10/17*  
 ASSIGNED PAY MONTHLY \$ *15.00* DATE EFFECTIVE *Aug 1/16* **25 SEP 1918**  
 PAYABLE TO *Mrs Julia Arden 136 Baywater Ave Ottawa Ont* RELATIONSHIP *Mother*  
 ASSIGNED PAY MONTHLY \$ DATE EFFECTIVE  
 PAYABLE TO RELATIONSHIP  
 STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) *stopped* EFFECTIVE *1-6-18* REASON *Discharged*  
 DISCHARGE DATE AND PLACE *Canada 1-6-18* REASON AND AUTHORITY *15 M 50 9/5/18.*  
 ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)  
 ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

59  
39

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		NO. OF DAYS		RATE		NO. OF DAYS		RATE					1		2		3		4		1	2	3	4				CREDIT	DEBIT				
	\$	c.	\$	c.	\$	c.	\$	c.	No.	DATE	No.	DATE				No.	DATE	No.	DATE	No.	DATE	No.	DATE													
July 31													4 10	4 10																						
Aug 31	31	1 <sup>00</sup>	31		31	10	310							34 10	13 98 10						9 74			15	24 74	13 46										
Sept 30	30	30					3							33	45 31-8-16 77 15 9 10						7 30	7 30		15	29 60	16 56										
Oct 31	31	31			31		310							34 10	117 29 1/6 161 13 10 1/10						7 30	7 30		15	29 60	21 36										
Nov 30	30	30			30		3							33	189 1/10						7 30			15	22 30	32 06										
Dec 31	31	31			31		310							34 10	236 15 1/10						9 30			15	29 16	39										
Jan 1		15 30												22							15			15	15	46										
Jan 20	10	22												12 10	447 19 482 3/11						4 86	14 60		15	19 86	29 77										
Jan 11	10	12 10												11 -	506 19 1/2						4 86			15	19 86	29 77										
Feb 10	10	11												19 80	217 50									15	44 32	39 35										
Mar 31	31	34 10													217 50	12 1/2 3 1/2 25 11 1/2 2 27 1/2 23 1/2								15	15	57 35										
Apr 30	30	33 00													53 90									15	15 00	75 35										
May 30	30	33 00													33 00									15	15 00	75 35										
Jun 31	1	1 10													1 10											76 45										
TOTAL		314 60												29 90	938 50						53 53	29 20	29 32	150	262 05											

*Old a.s.B. Filed 6/12/17*

*10343-8.12.16 26.12.16  
Off 21.1.17  
10343-8.12.16-19 days  
6.8.1920 Ptd. not in on transfer from*

424.681. J. Adams W.E.

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		NO. OF DAYS	RATE				AMOUNT		1	2	3	4	1	2				3	4				CREDIT	DEBIT
			\$	c.						\$	c.	NO.	DATE	NO.	DATE	NO.	DATE				NO.	DATE				NO.	DATE
of wd.			314	60					23 90. 998 50.					53 53 29 20 29 32.					150	262. 05. 76 45							
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Sept 30	30		33						33											6 25 126 40							
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1095 2241 5.68  
 2004 147.19  
 2007 152.19  
 2007 167 25.67  
 1779 317.4  
 2007 43 20.67

5621 29 20 58 35 46 50  
 15

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED PAY	SEP. ALLOC. ENG.	COLARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE
									87 44											52 50
Oct	P. pay								15											30 10
				AR 1763 6.60 E. pay 25/17	4 47															86 50
				AR 1477 6.30 E. pay 4/17	4 46															57 17
				AR 2279 6.60 E. pay 4/17	4 47															29 33
				D.N. AR 60. 4.00 E. pay 28/17	2 61															
				D.N. AR 1466 C.D.R. 21/17	4 46															
				D.N. AR 261 O.S.B. 9/17	1 78				15 84 29											
				AR 188 6.60 E. pay 7/17	4 46															
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				as per can					25 70											
				AR 3593 6.60 E. pay 21/17	4 46				15											
				canal					15											
				AR 2872 4.00 E. pay 16/17	4 40				49 61											
				4090 10-11-17	4 46				30											
				canal					15 64 25											
				AR 42. 8-12-17	5 35				15 95 05											
				AR 47. 10-17-17	4 46				15 44 25											
				canal					15 52 40											
				AR 44 11-11-17	12 38															
				677. 19-1-18	4 46				15 52 40											
					27 65				15 52 40											

Carried forward to Large L.C.

ASSIGNED PAY.	ENGLAND OR CANADA.	SEPARATION ALLOWANCE.	ENGLAND OR CANADA.
EFFECTIVE DATE:-	1-8-16	EFFECTIVE DATE:-	
AMOUNT:-	11.00	AMOUNT:-	
NAME, ADDRESS, RELATIONSHIP & AUTHORITY		WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.	
Mrs Ardern 136 Baywater Ave, Ottawa, Ont.			
EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS			
DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT

NAME:- **ARDEN Walter E.**

NUMBER:- **724681**

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Private
		25 SEP 1918

UNIT AND TRANSFERS

ORIGINAL UNIT:- **109 Bn.**

DATE ACCOUNT FIRST OPENED:- **1-8-16**

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S' D	UNIT TRANSFERRED TO
			EBS. Smith L. W.

DAILY RATES OF PAY AND ALLOWANCES

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

P.830-25M-21-2-18.

LAST PAY CERTIFICATE.

**724681 Ardern W.E.**

PARTICULARS.

1. L.P.C. Issued, date **15/8/16** 2. Authority **157/80. 9.5.18**
3. Discharged to **Canada 1.6.18** 4. Pay Book Verified **15.5.18**
5. Balance shown on L.P.A. \$ **12.89c** 6. Balc. shown on Ledger Sheet \$ **66.43c.**
7. Full particulars of entries making difference between 5 and 6 if any:-

No.	Date	Unit and Particulars of Entry	Amount	
			Debit	Credit
<del>75</del>	<del>1/13</del>	<del>Ardern</del>	<del>4 37</del>	
<del>157</del>	<del>15/8</del>	<del>"</del>	<del>48 67</del>	
			83 54	

8. Ass'd Pay Cancelled A3M forms rendered **10/10/18**
- or
9. Sep. Allce. and Assd. Pay continued to dependent in England and transf'd to Acc'ts Br. for payment

**C. Heath**  
Certified Correct.

**Lieut. Officer i/c Group "L"**

**nda 1-6-18 157/50 9/8/18**

DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
				29 33		
				15		
				15		
				15		
				66 43		
6.	4867			1289 ✓		
	487					
	53 54					
	12 89					
	12 89					

\* Strike out whichever inapplicable.

ASSIGNED OR ~~ENROLLED~~ OR CANADA. ENGLAND OR CANADA.

EFFECTIVE DATE: 1-8-16

AMOUNT: 1500

SEPARATION ALLOWANCE EFFECTIVE DATE: \_\_\_\_\_

AMOUNT: \_\_\_\_\_

NAME, ADDRESS, RELATIONSHIP & AUTHORITY

W/O W. J. D. ...

136 Bay Street, ...

1st Floor, ...

NAME: ARDEN Maxwell G.

NUMBER: 724681

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		<u>Private</u>
		<u>25 SEP 1918</u>

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS

UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHANGED IN RED INK

UNIT AND TRANSFERS

ORIGINAL UNIT: 109 Bn.

DATE ACCOUNT FIRST OPENED: 1-8-16

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T.S.P.D.	UNIT TRANSFERRED TO
			<u>28th</u>
			<u>Swiss L.M.S.</u>

DATE OF PAYMENT OF A.R.	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT OF A.R.	NUMBER OF A.R.	UNIT PAID BY	AMOUNT

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBSCE ALLCE

PARTICULARS OF RENDERING NON-EFFECTIVE: Nischawald, Tengen a 1-6-18 18 150 9/18.

MONTH	PARTICULARS	CR 1	CR 2	PARTICULARS	DR 1	DR 2	DR 3	DR 4	BALANCE	DETERMINED	SEPARATION
<u>Mar 31</u>	<u>bal fwd 21</u>	<u>33</u>		<u>C. &amp; P.</u>				<u>25</u>	<u>2933</u>		
<u>Apr.</u>	<u>P.P.</u>	<u>3410</u>		<u>C.M.S.</u>	<u>4867</u>			<u>15</u>	<u>4733</u>		
				<u>Coop 1075 Coop.</u>	<u>487</u>				<u>6643</u>		
				<u>Coop 495 "</u>	<u>5354</u>				<u>1257</u>		
				<u>Coop 495 "</u>	<u>1257</u>				<u>1257</u>		
				<u>Coop 495 "</u>	<u>1257</u>				<u>1257</u>		

*[Faint handwritten notes and stamps at the top of the page, including "APR 1918" and "P.P."]*





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

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

on the day of 191

Members of the Board:—

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

14. THE ENTIRE DISABILITY.—Without regard to his regular occupation, to what extent is his capacity lessened as compared with that of a man of his age and ordinary constitution in the general market for unskilled labour?

15. THE PENSIONABLE DISABILITY.—See Part I (3). Application on Active Service of a disability certificate previous to joining the Army is to be included in the estimate. What part of the entire disability estimated next above in (14) is due to causes arising during Active Service?

16. Permanence of the Pensionable Disability estimated next above in (15). (A) Is it permanent? N.A.

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

18. Remarks: This is a very typical case of carcinoma of the Rectum and it was not considered advisable to attempt to remove a piece for microscopic examination. There is not evidence that it antedated 1914.

19. Recommendation:—(a) Fit for duty? No (b) Fit for base duty? No (c) Invalid to Canada? Yes (d) Discharge from service as permanently unfit? No

Dated at this day of 191

Signatures of the Board: J.G. McKinnon Lt. Col. C.A.M. T.R. Green Capt. C.M.G. President.

Reserved for M.H.C.

Christian Name: WALTER E. Surname: ARDEN. Regt. No: 724681 Rank: Private

Unit or Corps: (a) Overseas from United Kingdom: 4th C. Labour Bn. (b) In United Kingdom: 109th Bn.

Born at—Town: Rotherham. County or Province: Yorkshire. Country: England.

Date of Birth—Day: 14th. Month: January. Year: 1872. Age: 46 yrs. 14 months.

Joined at: Windsor, Canada. Date: 1st December 1914.

Former Trade or Occupation: Clerk.

Permanent marks or peculiarities that will serve for future identification: Birth Mark Left side of Face.

Height—feet: 5. inches: 2. Colour of eyes: Blue Green.

Signature of Soldier (for identification purposes): [Signature]

Medical Report.

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

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

Table with 3 columns: Disabilities Group (a), (b), (c). Row 1: CARCINOMA RECTUM. Row 2: N.A.

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

Table with 3 columns: Disease or injury to which the disability is due, Place of origin, Date of origin. Row 1: UNKNOWN, FRANCE, 1914.

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

3. Is the disability due to disease contracted or injuries received prior to Active Service? (i) As to Group (a) above? No. If yes, has Active Service aggravated it? No. (ii) As to Group (b) above? N.A. If yes, has Active Service aggravated it? N.A. (iii) As to Group (c) above? N.A. If yes, has Active Service aggravated it? N.A.

4. Is the disability due to disease contracted or injuries received while on Active Service— (i) As to Group (a) above? Yes. (ii) As to Group (b) above? N.A. (iii) As to Group (c) above? N.A.

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

- (i.) While on duty? **N.A.**
- (ii.) While off duty? **N.A.**
- (iii.) Was a Court of Inquiry held? **N.A.**
- (iv.) Where? **N.A.** (v.) When? **N.A.**
- (vi.) Opinion of the Court? **N.A.**

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

About March 1st 1918 reported sick to M.O. complaining of pain in abdomen and rectum - and diarrhoea. Was treated by him until March 16th 1918. When he was admitted to No 7 Canadian General Hospital. Was kept there until 27-3-18 when he was admitted to Guilford War Hospital and on May 3rd 1918 was admitted here. Has been quite well previous to March 1st - but since then has lost weight. Had constant diarrhoea. Pain in abdomen. Bloody stools. Loss appetite.

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

Patient is greatly emaciated and has pasty complexion. Complains great pain in lower part abdomen, abdomen distended and veins are prominent Examination per rectum shows prostate to be greatly enlarged hard and irregular. Numerous tags attached to wall of rectum, protude into rectum. This is more marked on the right side. Upper right border of prostate shows an ulcerous condition size of a shilling which bleeds easily. Other system normal.

8. OPERATION. (i.) Was one performed? **No**
- (ii.) If so, state what. **No**
- (iii.) Was one advised and declined? **No**

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

9. (i.) Is there loss or decay of teeth attributable to Active Service? **No.**
- (ii.) If so, describe.

10. DO YOU RECOMMEND:—
- (a) Fit for duty? **No**
  - (b) Fit for base duty? **No**
  - (c) Invalid to Canada? **Yes**
  - (d) Discharge from the Service as permanently unfit? **No**

Date of Report..... **May 8th 1918** Signed..... **Henry L. Jackson Major**

Station..... **No 15 Can Gen. Hospita;**

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

W. J. Watt Col. C.M.C. { Officer i/c Hospital } Strike out one of these.

Dated at..... **8-5-18** Station, on..... **1918**

THE DUCHESS OF CONNAUGHT CANADIAN RED CROSS HOSPITAL

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

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

11. Is the disability fully indicated in Part I. (1)? **Yes**

12. Is the cause of the disability fully indicated in Part I. (2)? **Yes**

13. Was the disability caused or aggravated by— (a) Negligence of the Soldier (b) Misconduct of the Soldier

14. THE ENTIRE DISABILITY.—Without regard to his regular occupation, to what extent is his capacity lessened at present for earning a full livelihood in the general market for untrained labour?

15. THE PENSIONABLE DISABILITY.—see Part I. (3). Aggravation on Active Service of a disability existing previous to joining is to be included in the estimate.

16. Permanency of the Pensionable Disability estimated next above in (15). (i) Is it permanent? **N.A.**

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

18. Remarks.

This is a very typical case of carcinoma of the Rectum and to was not consider advisable to attempt to remove a piece for microscopical examination.

There is not evidence that it antedated 1918

19. Recommendation:—(a) Fit for duty? **No**
- (b) Fit for base duty? **No**
- (c) Invalid to Canada? **Yes**
- (d) Discharge from service as permanently unfit? **No**

Classification for the Military Hospitals Commission.

Date of Board..... **5 MAY 1918** Signatures of the Board. **J.C. Meakins Lt. Col. CAMC** President.

Station..... **T.B. Green Capt CAMC**

Approved..... **Major, O.A.M.C.** Station..... **A.D.M.S. CANADIANS. LONDON AREA. LONDON.**

Dated at..... **9 MAY 1918** Station..... **1918**