

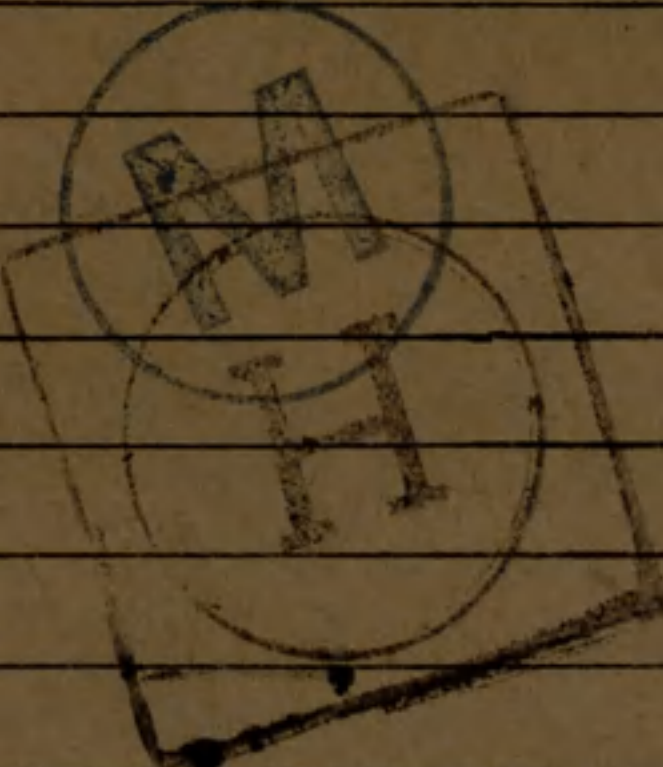
REGIMENTAL DOCUMENTS

6531

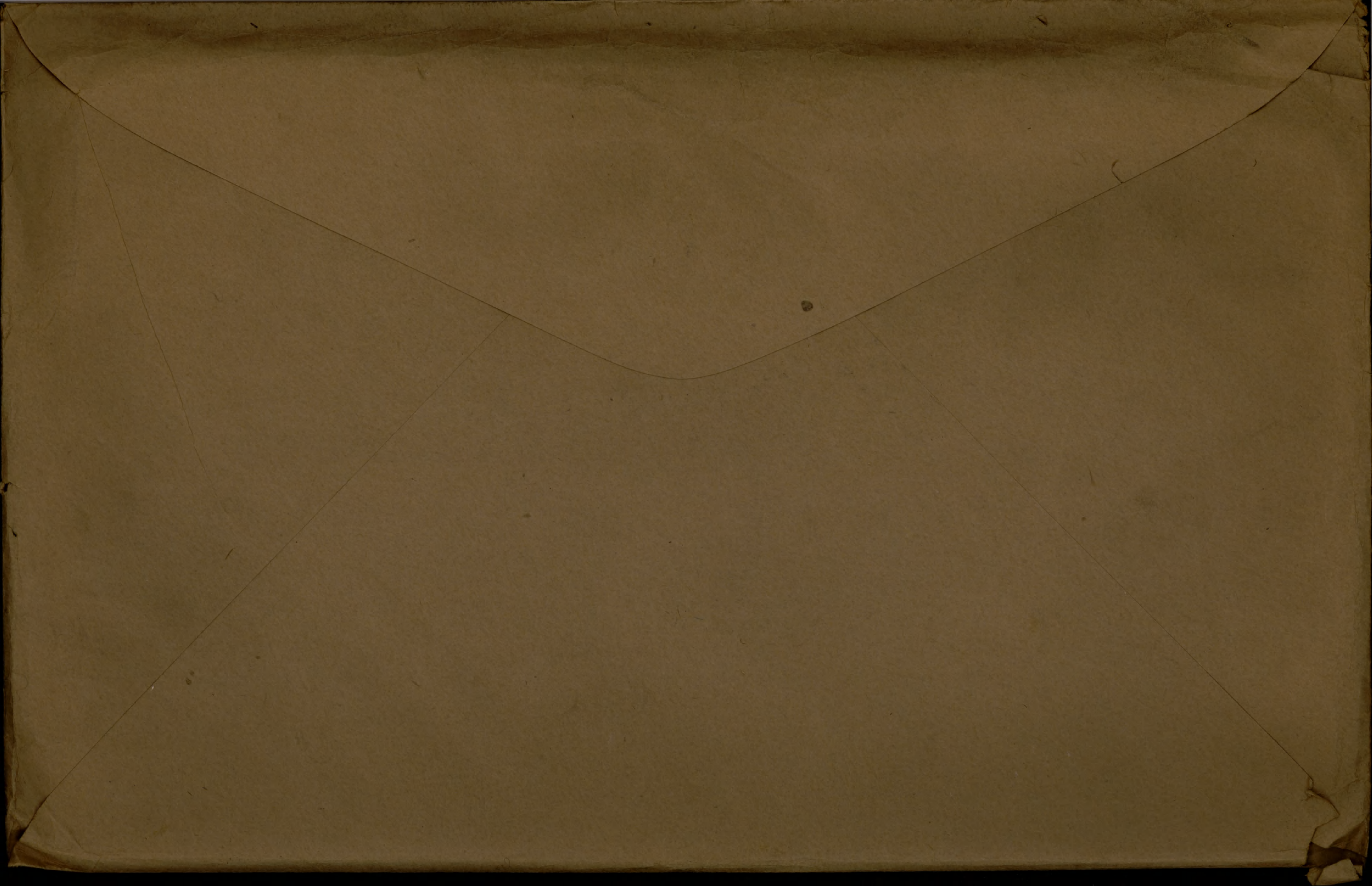
5 S

NAME **BARKWELL. WILLIAM. KINGSLEY** REG. NO. **724202**

UNIT **109<sup>th</sup> Batta** H. Q. FILE NO.

CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY				
3 ATTESTATION PAPER (M.F.W. 23, 133, or 51)		<p><i>Deceased - 15-4-56</i></p>			<p><b>DEATH</b></p> <p>Category <span style="border: 1px solid black; border-radius: 50%; padding: 5px; display: inline-block;">H</span></p>				
CASUALTY FORM (M.F.W. 54 or A.F.B. 103)									
TRAINING HISTORY SHEET (M.F.W. 112)									
FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)									
REGT. CONDUCT SHEET (M.B.W. 263 or A.F.B. 120)									
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)									<p><b>DISCHARGE</b></p> <p>Category</p> <p><i>Med. Unfit</i></p>
DENTAL HISTORY SHEET (M.F.B. 465)									
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)									<p><b>DESERTION</b></p>
LAST PAY CERTIFICATE (M.F.W. 44)									
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)									
1 M.F.B. 227									
1 M.F.W. 67									
1 cas card									
1 R 122									
1 Pay card									







*Card*  
*22-4-16*  
*C.E.C.*

# ATTESTATION PAPER.

109th OVERSEAS BATTALION, C. E. F.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

No. *724202*

Folio.

**DUPLICATE**

## QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? *Barkwell*
- 1a. What are your Christian names? *William, Kingsley*
- 1b. What is your present address? *Moreland, Ont.*
2. In what Town, Township or Parish, and in what Country were you born? *Douglas, Ont. Somerville Township.*
3. What is the name of your next-of-kin? *Mrs. Mary Ann Barkwell*
4. What is the address of your next-of-kin? *Moreland, Ont.*
- 4a. What is the relationship of your next-of-kin? *Mother*
5. What is the date of your birth? *12<sup>th</sup> July 1894.*
6. What is your Trade or Calling? *Laborer*
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, *William H. Barkwell*, 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.

*William Barkwell* (Signature of Recruit)

Date *APR 1 1916* 191*6* *W. H. C. [Signature]* (Signature of Witness)

## OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *William H. Barkwell*, 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.

*William Barkwell* (Signature of Recruit)

Date *APR 1 1916* 191*6* *W. H. C. [Signature]* (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 *Bobocant* this *4<sup>th</sup>* day of *April* 191*6*

*W. H. C. [Signature]* (Signature of Justice)

*g. B. T.*



Description of *William Barkwell* on Enlistment.

Apparent Age *19* years ..... months.

(To be determined according to the instructions given in the Regulations for Army Medical Services.)

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

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

Height ..... *5* ft. *9 1/4* ins.

Chest measurement { Girth when fully expanded ..... *34 1/2* ins.  
Range of expansion ..... *4 1/2* ins.

Complexion ..... *Dark*

Eyes ..... *Brown*

Hair ..... *Dark Brown*

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

*Scar 1 inch long on outer side of left knee*  
*scar size of 20 cent piece on middle of left shin*  
*Scar 1 in long on lower third outside of left leg.*

CERTIFICATE OF MEDICAL EXAMINATION.

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

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

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

Date ..... *APR 1* 1916

Place ..... *Cobacook*

*W. C. Culloch* .....  
Capt.  
Medical Officer  
109th Overseas Battalion, C. E. F.

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

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

CERTIFICATE OF OFFICER COMMANDING UNIT.

*William K Barkwell* 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.

..... Lt. Col. (Signature of Officer)  
O. C. 109th Overseas Battalion, C. E. F.  
Date ..... *APR 1* 1916



A.G.R. Rank Name BARKWELL, William Kingsley Reg'l No. 724202

Unit 109th Bn. If in perm. Corps, } Married or Single Single.  
 What Unit? }

Place and Date of Enlistment Cobocont, 1st April, 1916. Place of Birth Dongola, Somerville Township, Ont.

Name and Address, Next-of-Kin Mary Ann Barkwell, Morland, Ont., Canada. Relationship Mother.

Assigned Pay Monthly \$ Payable to Relationship

Separation Allowance \$ Payable to Relationship

Discharge, Date and Place Reason Character *Discharged*

H. W. & V., Ltd.—7165-16.

N/E. R.B. No. 10.687  
 File R.L.  
 Category *Can't*

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	
5-10-16	109 <sup>th</sup> Bn	S.O.S. to 20 <sup>th</sup> Bn	Bramshott	5-10-16	P <sup>II</sup> . 50.279 J.W.C.
16-10-16	20 <sup>th</sup> Bn	T.O.S. from 109 <sup>th</sup> Bn	Field	6-10-16	" II 55.
7-3-17	"	Adm No 5 ban fld Amb	"	8-2-17	8 LA 455 Tendon Abscess.
13-3-17	"	W 9 Field Ambulance	"	13-2-17	" 459 "
14-3-17	"	Canadian Rest Station	"	14-2-17	" 460 "
"	"	Rejoined Unit	"	22-2-17	" " " "
19-4-17	"	No 2 Australian Gen Hosp	Womereau	8-4-17	Ch 8 458
25-4-17	"	Clearing Hosp	Eastleigh	15-4-17	Ch B 326 P.V.O.
30-4-17	20	Evac Mil Hosp	Tooting	23-4-17	Ch B 329

A.F.B. 103 CHECKED  
 17 OCT 1916



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.				
27-4-17	20th	Inw. protecto Kent Out Regt	Field	27-4-17	P#032
27-4-17	1CORD	Taken on strength	W Sandij	27-4-17	P#049
13-6-17	20th	Can Con Hosp	Bromley	8-6-17	ChB 361
23-6-17	20-	Can Con Hosp	Bearwood	19-6-17	ChB 370
5-7-17	20th	Kings Can Redt Hosp	Boskey Park	29-6-17	ChB 379
25-8-17	1CORD	On Comm. Lt & 60	Sandling	22-8-17	P#0169 <sup>CC 15 p 40</sup> 169/4-9-17
5-9-17	20.	Dis Can Con Hosp.	Bushy Park	22-8-17	ChB 3.
29-10-17	1860.	Leasesatt Ret. to 1CORD.	Sandling	29-10-17	P#00. 224 <sup>1CORD</sup> 243 <sup>at 8/17</sup>
9-11-17	1CORD.	On Comm 1CDD <sup>Reg 23-6. Vol. XI. HR. 29-12-17</sup>	"	8-11-17	P#00 245
31-12-17	"	S.O.S. to Canada <sup>P#00372 to 16 P#.</sup>	"	23-12-17	P#00 296

No defol. In Class Duly;   
 m d. 3   
 Kingston 57/18 NR 417



(This part to be attached to file when sent out by C.R.)

For Pay 2 (Branch)

C.R. stamp and UPC Fala Pocket

No. of file 724202 Pt Barkwell WR

File to be returned as soon as done with.

*Maguel*

No C.R. file drawn should be kept more than eight days.

### REQUISITION FOR PAPERS FROM CENTRAL REGISTRY.

(To be retained by C.R. in place of file.)

For Pay 2

Office \_\_\_\_\_

No. of Paper required } UPC Fala Pocket

Subject \_\_\_\_\_

Signature H B Bell Junr.

Date 3/12/17

\* The above is required with reference to 724202 Pt Barkwell WR.

\* It is particularly requested that the purpose for which the file is borrowed may be stated or the number of the paper for which it is required may be quoted, as papers are frequently lost for want of this information.



Mr. James T. Robert







(9) Is your Father alive? *No*

If so, state name and address \_\_\_\_\_

(10) Is your Mother alive? *Yes*

If so, state name and address *Mary Ann Bartwell*

*Portland Ont.*

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

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.

*Twenty Dollars*

*Rest are all married*

(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? \_\_\_\_\_

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 *JUL 11 1916*

*[Signature]*  
Officer Commanding.  
O. C. 109th Overseas Battalion, C. E. F.



# CANADIAN CONTINGENT EXPEDITIONARY FORCE

**TRIPLICATE**

## LAST PAY CERTIFICATE

This form to be used for all Ranks (Vide Articles 122, 130 and 141, Financial Instructions, 25715c, C.E.F., 1916).

Regimental No. 724202 Rank Pte. Name Barkwell, W.K.

Corps 109th Battalion who was\* Discharged

On February 28th 1918, to Class 3, Medically unfit  
 \*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from February 1st 1918 to February 28th 1918, the inclusive date of transfer or discharge.

Dr.	\$	c.	Cr.	\$	c.
Bal. Dr. from prev. month			Bal. Cr. from prev. month		
Advances } No.			Regt'l Pay <u>28</u> days at \$ <u>1</u> c.	<u>28</u>	<u>00</u>
by } No.			Field Allow. <u>28</u> days at \$ c. <u>10</u>	<u>2</u>	<u>80</u>
Cheques } No.			Separation Allowances* (Monthly)	<u>25</u>	<u>00</u>
Assigned Pay and Sep'n Allee. No. <u>7985</u>	<u>40</u>	<u>00</u>	Other Allowances* <u>D.O. 10 Subs</u>	<u>18</u>	<u>40</u>
Other charges			Other Credits* <u>Clothing</u>	<u>13</u>	<u>00</u>
Payment on transfer or discharge No. <u>8647</u>	<u>47</u>	<u>20</u>	Bal. Dr. (to be deducted by new unit)		
Balance Cr. (to be paid by the new unit)					
<b>Total</b>	<b>87</b>	<b>20</b>	<b>Total</b>	<b>87</b>	<b>20</b>

\*Give particulars.

A monthly stoppage of \$ 15.00 (†) has ..... (‡) been paid on account of Assigned Pay for the month of February 1918 and Sep'n Allee. for month of February 1918 (to) Assignee Mrs. Mary A. Barkwell, (Address) Norland, Ont.

(†) Insert amount to be assigned, whether it has been paid or not.  
 (‡) Insert "not" if amount has not been paid for period of account.

### On Transfer of an Officer

Outfit Allowance of \$ ..... has been paid by Paymaster, Military District No. ....

**REMARKS:—**

- State (1) date of enlistment .....
- (2) if married and if a Separation Allowance Card has been submitted pd to 28/2/18
- (3) cause of discharge ..... authority 311 88-B-311
- (4) authority for transfer .....

NOTE.—Separation Allowance and Assigned pay Card and Index Card (M. F. W. 71) are to accompany the original Last Pay Certificate on transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay-list of the unit.

Date February 25th, 1918

Place Kingston, Ont.

White Capt.  
 Paymaster, "C" Unit N. H. C. C.  
 Paymaster.

N.B.—For purposes of transfer this form is to be made out in quadruplicate. Original copy to paymaster of new unit; duplicate to District Paymaster; triplicate to accompany the pay-list at the end of the month, and quadruplicate for retention as a record.

For purposes of discharge it is to be made out in triplicate. Original copy to accompany discharge papers; duplicate to accompany pay-list at the end of the month, and triplicate for retention as a record.

If a man on discharge is entitled to three months' Post Discharge Pay, Last Pay certificate will be made out in quadruplicate. The original Last Pay Certificate will be forwarded with other documents to Paymaster Post Discharge Pay and triplicate, with his discharge documents.

M. F. W. 44.

cheque #8647 attached



LAST PAY CERTIFICATE

Number of the Certificate: 1234567890  
Name of the Soldier: JOHN SMITH

Rank: Private  
Regiment: The Canadian Expeditionary Force

Service Number: 1234567890  
Date of Issue: 1st January 1918

Amount of Pay: £100.00  
Currency: British Pounds

Payable to: The Soldier's Estate  
Address: 123 Main Street, London, England

Signature of the Officer: J. H. Smith  
Signature of the Soldier: J. H. Smith

Witness: J. H. Smith  
Date: 1st January 1918

Remarks: This certificate is valid for the purpose of receiving pay and allowances.

Approved by: J. H. Smith  
Signature of the Officer

Approved by: J. H. Smith  
Signature of the Soldier

Approved by: J. H. Smith  
Signature of the Officer

Approved by: J. H. Smith  
Signature of the Soldier

Approved by: J. H. Smith  
Signature of the Officer

Approved by: J. H. Smith  
Signature of the Soldier

Approved by: J. H. Smith  
Signature of the Officer

Approved by: J. H. Smith  
Signature of the Soldier

Approved by: J. H. Smith  
Signature of the Officer

12/18  
17



RECEIVED  
OCT 24 1917

# PROCEEDINGS OF A MEDICAL BOARD

DEPT  
MILITIA & DEFENCE  
FEB 19 1918  
H.Q.  
CANADA

Dated at E. Sandling. Oct. 24th. 1917.

SECTION  
"D"

No. 724202 Rank Pte. Name BARKWELL, Wm.

Local Unit 1st. C.C.D. Overseas Unit 20th. Bn. Age 20

Examination held at East Sandling. 649-B-23988

DISABILITY.  
Overseas  Local  
(scratch one out).

D. A. H.

## PRESENT CONDITION.

Returned from France on April 7th, 1917 with Trench Fever. Since recovery has had considerable trouble with his heart. Treated in Bushy Park for D. A. H. Now gets short of breath very easily.

Pulse, at rest 122. On exertion 156; 10 minutes after rest, 128. Cardiac dullness, slightly increased to left. Systolic murmur over apex, not transmitted to axilla. In France 7 months.

BOARD RECOMMENDS:— C iii. 2 months.

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

Signatures:—

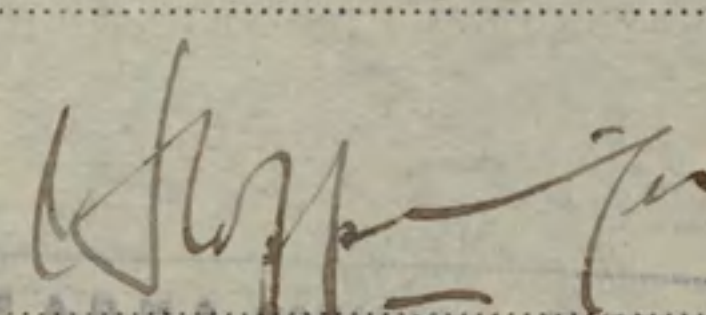
S. Members {

L. Hyttenrauch, Capt. CAMC. President.

A. E. Mackintosh, Capt. CAMC.

APPROVED

26 OCT 1917

Dated.....1917.  CAPT. L. HYTTENRAUCH For A.D.M.S.



19-2-18  
8393  
383a  
20/2/18

461720/10

PROCEEDINGS OF A MEDICAL BOARD.

Dated at \_\_\_\_\_ 1917

No. \_\_\_\_\_ Rank \_\_\_\_\_ Name \_\_\_\_\_

Local Unit \_\_\_\_\_ Overseas Unit \_\_\_\_\_ Age \_\_\_\_\_

Examination held at \_\_\_\_\_

DISABILITY  
Overseas-Local  
(attach one only)

PRESSENT CONDITION

The undersigned has been examined on the 17th day of February 1918 at \_\_\_\_\_

and has been found to be suffering from \_\_\_\_\_

and is unable to perform his duties as a \_\_\_\_\_

and is recommended for \_\_\_\_\_

BOARD RECOMMENDATIONS:-

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

Signatures

President \_\_\_\_\_

Members \_\_\_\_\_

APPROVED

Dated \_\_\_\_\_ 1917

For A.D.M.S. \_\_\_\_\_



8495

/ 168

JW

DEPARTMENT OF MILITIA AND DEFENCE.

General's Branch.

## WAR SERVICE GRATUITY.

IAN 27 1919

Militia General's Office, Ottawa.

OTTAWA, CANADA.

Declaration required of Officers, Warrant Officers and Men who claim War Service Gratuity under Order-in-Council (P.C. 3165), dated 21st December, 1918.

If the applicant will enquire at the local Branch of the Canadian Patriotic Fund he will be informed if there is an official who will take this Declaration free of charge.

A complete reply must be given to every question in this Declaration. There must be no blanks and no dashes. If any questions are not applicable, the words "NOT APPLICABLE" must be written out.

On completion this Declaration is to be returned to THE DISTRICT PAYMASTER OF THE DISTRICT IN WHICH THE SOLDIER WAS DISCHARGED.

1. Christian Names *William Kingsley* Surname *Barkwell*
3. Rank *Private* 4. Original Unit *109th Batt* 5. Reg. No. *724,202*
6. Address, in full, to which future payments of gratuity are to be forwarded  
*Norland - Ontario - Canada*
7. Date of enlistment in the C.E.F. *April 1st 1916*
8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge  
*Mrs Mary A. Barkwell*
9. Relationship of such dependent  
*Mother*
10. Address, in full, of such dependent  
*Mrs Mary A. Barkwell  
Norland, Ontario*
11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? *No*
12. Were you at any time on the strength for pay and allowances of a unit of the C.E.F. which was out of Canada or the United States when such pay and allowances were issuable? If so, give particulars of one such unit and dates of service overseas with such unit:—  
*20th Batt Can' Inf. France from 6th Oct 1916 to 8th April 1917*
13. Were you on the strength for pay and allowances of the Clearing Services Command, having been at any time on duty outside of Canada or the United States? *not applicable as I know*
14. Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service  
*On Service in England & France*
15. Give total length of time which you served on active service, whether in Canada or Overseas, setting out particulars of units on whose strength you served  
*from April 1st 1916 to Oct 6th 1916 with 109th Batt Can' Inf. from that date until discharge with 20th Bie*
16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department  
*No*
17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.? *No*



18. Have you had more than one enlistment? If so, give particulars of discharges and re-enlistments, and under what regimental numbers and units..... *No.*
19. Have you already received any payment of Post Discharge Pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid... *recd. 3 mos. post discharge pay and \$10.00 pension per month since*
20. Have you been issued with a War Service Badge? If so, what class? *A & B*
21. Have you, during the present war, served in the Imperial Forces? *No.*
22. Are you entitled to receive, or have you received any gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled..... *none*
23. (a) Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England? *No.*  
 (b) If so, was such reversion in consequence of misconduct or inefficiency? *No.*
24. Are you now serving in the C.E.F. *No.* If not, give:—(a) Date of discharge *28th Feb. 1918* (b) Reason for discharge *medically unfit for further service*
25. Are you at present a member of and in receipt of pay and allowances from any Canadian naval or land forces? If so, give unit..... *No.*
26. Did you at any time serve at the front in an actual theatre of war? If so, give particulars of one unit which you served at the front, and dates of such service with that unit..... *from April 1st Oct 6th 1916 to April 8th 1917 with 20th Bu Can Inf*
27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment? *No.*  
 (b) If so, are you in receipt of full pay and allowances from that Department? *No.*

And I make this solemn declaration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath and in virtue of the Canadian Evidence Act.

Signature of Applicant: *W. H. Baskinell*  
 Place of Residence: *Norland, Ont.*  
 Declared before me at: *Norland*  
 This *20th* day of *January* 19*19*

Signature of Barrister of the Supreme Court Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner for the Administration of Oaths.

*Wm. Adair J.P.*

**POST DISCHARGE PAY.**

Date paid	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
<i>Feb 28/18</i>	<i>33.00</i>	<i>25.00</i>		
<i>Mar 28/18</i>	<i>33.00</i>	<i>25.00</i>		
<i>April 29/18</i>	<i>32.10</i>	<i>25.00</i>		
Certified Correct.				
<i>Total amount paid</i>		<i>98.10</i>	<i>Glenns Maps</i>	
<i>Debit Balance</i>		<i>2.00</i>		
		<i>\$100.10</i>		



**CONFIDENTIAL INFORMATION**

Report No. 16493

Category D or D

No. of M. H. C. File

No. of Local File

No. of H. Q. File

Barkwell, Wm.

Norland,

Ont.

"c"

No. 724202 Rank Pte. Original Unit 1 C. C. D. Present Unit 20 En  
 Age 20 Height 5 ft. 9 1/2 ins. Complexion Dark Eyes Brown Hair Dk. Eyes Character Good  
 Date of enlistment April 1/16 Where enlisted Cobocok Where seen service Advance  
 Ship returned by Delta Date of arrival 5/1/18 Port of arrival St. Johns  
 Birthplace Sommerville Victoria Religion Baptist  
 Name and address next of kin M. A. Barkwell, (mother) as above  
 Notification of return to be sent to  
 Cause of disability D. A. S1

**649-B-23988**

E. 1. Discharge, no pensionable disability.  
 E. 2. Waiting Reclassification.  
 E. 3. Discharge with claim for pension.

Condition in detail which prevents the soldier from earning a full livelihood  
 Subjective, - Man complains of shortness of breath, suffers from dizzy spells and cannot do anything which requires much effort. sleeps poor  
 Objective, - Apex beat diffused below nipple in 5th space, rapid 100 increasing to 150 in slight exertion, systolic murmur at apex, transmitted slightly to left.

Degree of incapacity (Please state in fractions) Eng. Board Canadian Board 1/10  
 Probable duration of incapacity 6 months  
 Does it render him permanently unfit for Military Service? yes  
 Would operation, Special treatment, or use of appliances etc., lessen incapacity? yes  
 Destination to which transportation issued  
 Members of Board W. Bryan, Capt. A. B. Cooke, Capt. W. A. Jones, Capt.

**INFORMATION TO BE FURNISHED BY SOLDIER**

DEPENDENTS	NAME	AGE	WHERE-IF EMPLOYED	WAGES	STATE OF HEALTH
Wife					
Children 1					
2					
3					
4					
5					

Occupation prior to enlistment Farmer  
 Regular trade or profession Farmer  
 Average earnings previous to enlistment \$35.00 month Any other income?  
 Name and address of last employer J. T. Perkins, Norland, Ont.  
 Rent per month If purchasing property amount due and annual payment, \$  
 Taxes If Homestead, when is patent due?  
 If carrying life or accident insurance, annual premium  
 If in receipt of sick benefits or other insurance—name of society Amt. per mo. \$  
 If unable to follow previous occupation, name preference None  
 At what age soldier left school? 15 What grade, standard, &c., was he in? 2nd book  
 Has he taken any Technical or Continuation Classes, if so what?  
 Whether given Vocational Training while in Hospital in England. If so, what subjects?  
 References Last employer  
 Witness A. J. Seymour, I declare that the above statement is correct.  
 Date 9/1/18. Signature W. E. Barkwell, BM.

Recommendation by Interviewer as to classes likely to be of use, and general remarks :

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, \$  
 Transf'd to Unit—Date Transf'd Class 1—Date Transf'd Class 3—Date  
 PENSION—Class..... Amount per year, \$..... Period granted for..... Dating from.....  
 First payment date.....

C. Service in Canada.  
 D. Treatment.  
 A. General Service.  
 B. Service abroad, not general.



323 26/1/18  
No. of File  
H. Q. File

No. 1000  
Rank Pfc.  
Age 20  
Height 5 ft 10 in  
Completion Date 1/22/18  
Character Good  
Where seen service  
Port of arrival  
Date of enlistment  
Where enlisted  
Ship returned by  
Date  
Birthplace  
Name and address next of kin  
Notification of return to be sent to  
Cause of disability

81-1-62-043

1. Discharge with claim for pension  
2. Medical Examination  
3. Discharge to Department

Condition in detail which prevents the soldier from earning a full livelihood  
Subjective -  
Objective -  
Date of last examination  
Date of last examination  
Date of last examination

Members of Board  
Destination to which transportation issued  
Would operation, special treatment, or use of appliances etc., lessen incapacity?  
Does it render him permanently unfit for Military Service?  
Probable duration of incapacity  
Degree of incapacity (Please state in fractions) Eng. Board

INFORMATION TO BE FURNISHED BY SOLDIER

Table with 4 columns: DEPENDENTS, NAME, AGE, WHERE IN EMPLOYED, WAGES, STATE OF RESIDENCE. Includes rows for Wife, Children 1, 2, 3, 4, 5.

Occupation prior to enlistment  
Regular trade or profession  
Average earnings previous to enlistment  
Name and address of last employer  
Rent per month  
Taxes  
If Homestead, when is patent due?  
If carrying life or accident insurance, annual premium  
If in receipt of sick benefits or other insurance - name of society  
If unable to follow previous occupation, name preference  
At what age soldier left school? What grade, standard, etc., was he in?  
Has he taken any Technical or Continuation Classes, if so what?  
Whether given Vocational Training while in Hospital in England. If so, what subjects?  
References  
Witness

I declare that the above statement is correct.  
Signature  
Date

Recommendation by Interviewer as to classes likely to be of use, and general remarks:  
Last Pay Cert. Cr. \$  
Dt. \$  
Amount paid at Depot H.Q. \$  
Credit Clothing Allowance \$  
Amount forwarded to H. Q. Unit \$  
Trans'd to  
Unit - Date  
Trans'd Class 1 - Date  
Trans'd Class 3 - Date  
First payment date  
PENSION - Class  
Amount per year \$  
Period granted for  
Transferring from

1. Discharge with claim for pension  
2. Medical Examination  
3. Discharge to Department



Forms  
I. 1237  
10

Army Form I. 1237.

J.H.

**MEDICAL CASE SHEET.\***

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	724202	Pte.	Barkwell	W. K.
Year	Unit.	Age.	Service.	
1917	20 <sup>th</sup> Bn.	19	8 <sup>6</sup> / <sub>12</sub> 12	
Station and Date.	Disease			
Bushy Park.	D A H.			
29/6/17	Sommerville Victoria.			
	Single.			Labourer.
	Bobocomb.			1 <sup>st</sup> April 1916
	Inoc. 7.1			S.P.O.
	(mother) Mrs. Mary Barkwell.			
	Norland Ont.			
	Enlisted. 1 <sup>st</sup> April 1916. England. Aug 1916. France 7 Oct. 1916			
6 April 1917	Veiny Ridge			Reported sick.
	Pains in back chest and legs.			
	Field amb.	Temp. 100°		
	b. b. s.	marked "P. U. O."		
	Boulogne 2 Amb. General.			Bed 8 days.
	Milk diet.			medicine.
15 April.	Eastleigh Clearing Hospital			Ordinary diet.
23 April.	Footing Grove Military.			Bed 7 days.
	Rest.			Medicine.
8 June 1917	Bronley Cav. Cor.	Rest.		Ordinary diet.
	M.H.S. states. "Pains still in back head. urine normal."			
18 June 1917	Epsom M.C.H.	Rest.		Ordinary diet.
29 June 1917	Bushy Park.			
	<u>Complain.</u>			
	Præcordial pain, pain in back - lower dorsal and in legs. Hypæmia and dryness on mouth.			

at entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.



Station and Date.

Onset:

since April 6 / 17.

Family Hist:

Father died Bright's disease

Personal Hist:

Lazy strong when young, school until 15 then worked on farm. Smokes lightly, drinks a little.

Past Ill.

Had pneumonia in 1914 - had 3 wks. Trillitis frequently. Reported such in France Apr. 6 / 17 with pains in chest & legs. Had rise in temp., marked P.W.O. While in France he had Tachycardia & pain over heart.

Present Ill.

While convalescing from P.W.O he noticed dyspnea & palpitation on exertion, also some dyspnea & precordial pain. This has continued to present time.

Physical Exam.

General condition fairly good - eats well, sleep only moderately well.

Heart - R. ventr. magn. pres. wide ripple line. Systolic murmur in all areas. Pulse regular, rate 112.

Exam. urine.

*W. H. Evans*  
C. C. L. C.

20-7-17

Symptoms somewhat better, no yet disappearance of pulmonary signs. Pulse 120 after exercise. C. C. L. C. Evans



# CASE HISTORY SHEET.

No. 724202 Rank Pto Name Barbwell W R. Age 20  
 Unit 109 Bn Completed years of service            <sup>Where and how long</sup> }  
 Date of admission Jan 9-18 Date of discharge Feb 28-18  
 Diagnosis U. D. H. Place of origin           

CONDITION ON ADMISSION AND PROGRESS OF CASE.

*Valvular Disease of heart.  
 Man says effects of trench fever.*

FAMILY HISTORY

(Tuberculosis, mental or nervous diseases.)

*Negative -*

TREATMENT

(Especially any specific or special form.)

*Serics -*

CONDITION ON DISCHARGE.

(and disposal made of case.)

*Dis. 60% Re-exam. in one year  
 Due to Service  
 Cat E.*

Date.....

*L. D. Stevenson Capt.*  
 Medical Officer i/c case.  
*for*





CASE HISTORY SHEET



ORIGINAL

B-204  
ORIGINAL  
88-B-311

MEDICAL HISTORY SHEET.

Surname Barkwell Christian Name William Kingsley

Examined { on 1 day of April 1916  
at Coloconk  
Birthplace { City or Town Ship Somerville  
County Victoria

Approved by J. McCulloch Capt.  
Rank 109th Overseas Battalion, C.M.O.

Apparent age 19 years  
Trade or occupation Laborer  
Height 5 Feet 9 1/4 Inches.  
Weight 145 Lbs.  
Chest measurement { Minimum 33 inches.  
Maximum expansion 37 1/2 inches.  
Physical development Good  
Small-Pox Marks None

Date.	Fit or Unfit.	EXAMINED FOR RE-ENGAGEMENT.
		<u>28 APR 1917</u> M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Vaccination Marks { Arm Right None Left One  
Number One

Date.	Result.	VACCINATIONS.
<u>4.4.16</u>	<u>Good</u>	<u>J. McCulloch</u> M.O.
		M.O.
		M.O.

When Vaccinated last April 4<sup>th</sup> 1916  
(a) Marks indicating congenital peculiarities or previous disease None

Date.	Result.	ANTI-TYPHOID INOCULATIONS, ETC.
<u>9.5.16</u>	<u>Good</u>	<u>J. McCulloch</u> M.O.
<u>18.5.16</u>	<u>"</u>	<u>J. McCulloch</u> M.O.
<u>25.5.16</u>	<u>"</u>	<u>J. McCulloch</u> M.O.
<u>22.9.16</u>	<u>"</u>	<u>H. Boyd</u> M.O.

(b) Slight defects but not sufficient to cause rejection  
Slightly Flat Footed

Enlisted on 1 day of April 1916 at Coloconk

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>109<sup>th</sup> Bn. C.E.F.</u>	<u>724202</u>		<u>1.4.15</u>
Transferred to	<u>21st Bn</u>			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>Bushy Park</u>	<u>17-8-17</u>	<u>D.A.H.</u>	<u>C to B</u>
<u>E. Sandley</u>	<u>24-10-17</u>	<u>"</u>	<u>O.C.</u>

Category altered from (Under new system of Categorization) 2799.  
C to B  
O.C.  
G.D.D. Buxton  
18 FEB 1918  
G.A.M. 11111

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.



16130

Christian Name *William Kingsley*  
 Surname *Barkwell*

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 5 C.F.A.		8	2	17	13	2	17	Periton Abscess		A455-A459	
No 9 C.F.A.		13	2	17	17	2	17	" "		A459-A460 GH	
Can Rest Stn.		17	2	17	22	2	17	" "	Rej. Unit.	A460-A460	
INDIAN CONVALESCENT HOSPITAL, BROMLEY, KENT.		8	6	17	18	6	17	P.U.O.	11	Wounds on head & chest - <del>these quite painful</del> Pain in ribs in back and head. Urine normal.	(On the 17th 18 came
A.C.H. Epsom		18	6	17	28	6	17	DO.	11	Pain in back & legs. Tachycardia. pain over heart - Poor appetite. Sleeps poorly. Transferred to Beaumont for treatment.	J. B. Carpenter Capt.
Busby Park THE KING'S CANADIAN RED CROSS CONVALESCENT HOSPITAL		28	6	17	22	AUG	1917	I.A.H.	55	Heart to Left nipple line. Systolic at Apex in all areas transmitted to the axilla. Category II+ Dis. to the 3rd & 4th spaces	L. W. Murray Major



# POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

8495-168  
869-W-4.

Name Barkwell, William K.  
Surname Christian Name

Regimental Number 724202 Rank Pte.

Address (in full) Norland, Ont.

Unit 109th Bn.

Original Unit

District where paid M.D.3.

*Mrs. May A. Barkwell*

Date of Discharge 28-2-18.

P. D. P. Filing Number 3-74-3.

Rates:—Regimental pay \$ 1.00 per diem: Field Allowance \$ .10 per diem. Separation Allowance \$ 25.00 per month.

L. L. 22573—M. & D. 8009.

Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Over-payments to be Retovered	Total Amount Paid
	Cheque No. A	Date	Amount 30 days	Cheque No. B	Date	Amount 30 days	Cheque No. C	Date	Amount 31 days		
175 10	1458	28-2-18	58 00	1450	28-3-18	58 00	1424	29-4-18	57 10	2 00	173 10
<i>1237 1st</i>	<i>9.15100</i>	<i>1/3/19</i>	<i>70 00</i>	<i>{ Ret + Remailed 15-3-19 tr 10318. Ret + Remailed 15-3-19 tr 10317</i>							
<i>1237 1st</i>	<i>9.15101</i>	<i>1/3/19</i>	<i>30 00</i>								
<i>1194 2nd</i>	<i>9.40878</i>	<i>15/3/19</i>	<i>34 90</i>								

Remarks: Dr. Bal. Supp. L.P.C.

M. F. W. 127.  
60M-617.  
1772-39-1140.



1168

Dec'n No 8495 / W.S.G. File No 864-W-6

Award ..... days at \$ 100.00 / \$ 400.00

S. A. .... months at \$ ..... per mo. \$ ..... \$

Less P. D. P. Credited \$ 175.10

Less further debit balance \$.....

Net amt paid as below 224.90

TO SOLDIER		TO DEPENDENT		Amount	
0	Ag. No	Ch. No.	out	Ag. No	Amount
1	1237	15100	70.00	1237 15000	30.00
2	1194A	40878	34.90	29242 477831	30.00
3				266513 4777931	30.00
4				1755c 477955	30.00
5					
6					

15-3-19  
15-3-19

tr 10318 (15.3.14)  
tr 10319

Ret and remailed  
9-6-19  
19-6-19  
19-6-19

*Norland*

*Out.*

GEN'L AUDITOR  
Posting checked by  
*W. Clark*  
1917

*John*



MILITIA AND DEFENCE  
 ASSIGNED PAY  
 OVERSEAS CONTINGENTS

*"Mother"*

To Whom Mrs. Mary Ann Barkwell By Whom Assigned Barkwell, W. H.  
 Address Norland, Ont. Regtl. No. 724202  
 Rank Pte.  
 Corps D Co. 109<sup>th</sup> Batt.  
 Rate \$ 15.00 **AUG 1 1916**

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				



*Can. Army Pay Audit Ch.  
 [Signature] 2/15/19*



5.11.11

1.1.11

1.1

1.1

1.1

1.1

1.1



# ASSIGNED PAY

OVERSEAS CONTINGENTS

*Mrs. Mary Ann*  
Sheet No. 2.  
L. L. Job 310.—Req. 6574.

*Barkwell.*

*"Mother"*  
PAYMENTS.

724202.

Name of Soldier *Barkwell, W. H.*  
*Plt. "20" Co 189 Batt.*

Month.	Year.	Cheque No.	Amt.	Remarks.
				<i>\$15<sup>00</sup></i>
April	1916			
May				
June				
July				
Aug.		<i>21570</i>	<i>15</i>	
Sept.		<i>01716F</i>	<i>15</i>	
Oct.		<i>718930</i>	<i>15</i>	
Nov.		<i>N 23543</i>	<i>15</i>	
Dec.		<i>B 33961</i>	<i>15</i>	
Jan.	1917	<i>Y 37067</i>	<i>15</i>	
Feb.		<i>442357</i>	<i>15</i>	<i>15 R</i>
March		<i>24864A</i>	<i>15</i>	<i>15.6.</i>
April		<i>725</i>	<i>15</i>	<i>15 L</i>
May		<i>X 6300</i>	<i>15</i>	
June		<i>B 14136</i>	<i>15</i>	<i>15 W.</i>
July		<i>Y 19643</i>	<i>15</i>	<i>5</i>
Aug.		<i>Z 28799</i>	<i>15</i>	<i>2</i>
Sept.		<i>235822</i>	<i>15</i>	<i>with \$210.<sup>00</sup> A.R.</i>
Oct.		<i>247895</i>	<i>15</i>	<i>15</i> <i>221.<sup>00</sup></i>
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

*Can. Am. pay audit ok*  
*amford 2/5/5*



MILITIA AND DEFENCE  
**ASSIGNED PAY**  
 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.				



# SEPARATION ALLOWANCE

Sheet No. 2.

L. L. Job 310.—Req. 6574.

*Mary A. Barkwell, Mother*  
OVERSEAS CONTINGENTS  
PAYMENTS.

Name of Soldier *Barkwell, Wm. K.*  
*plc.*

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May		<i>J3406</i>	<i>40</i>	<i>40 Remained 29-5-16.</i>
June		<i>83885</i>	<i>20</i>	<i>20</i>
July		<i>59996</i>	<i>20</i>	<i>20</i>
Aug.		<i>011438</i>	<i>20</i>	<i>20</i>
Sept.		<i>M15191</i>	<i>20</i>	<i>20</i>
Oct.		<i>M18733</i>	<i>20</i>	<i>20</i>
Nov.		<i>M21367</i>	<i>20</i>	<i>20</i>
Dec.		<i>N24865</i>	<i>20</i>	<i>20</i>
Jan.	1917	<i>L25396</i>	<i>20</i>	<i>20</i>
Feb.		<i>L29282</i>	<i>20</i>	<i>20</i>
March		<i>L32415</i>	<i>20</i>	<i>20</i>
April		<i>M163</i>	<i>20</i>	<i>20</i>
May		<i>M3620</i>	<i>20</i>	<i>20</i>
June		<i>N6767</i>	<i>20</i>	<i>20</i>
July		<i>M10291</i>	<i>20</i>	<i>20</i>
Aug.		<i>O13053</i>	<i>20</i>	<i>20</i>
Sept.		<i>Q16348</i>	<i>20</i>	<i>20</i>
Oct.		<i>Y22775</i>	<i>20</i>	<i>20</i>
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

*280*

*B #360.00 Q.K*  
*20*  
*380.00*



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.				



1-14-16

MILITIA AND DEFENCE

M. F. W. 11. / 53  
50m.—4-16.  
H. Q. 1772-39-818.

SEPARATION ALLOWANCE

Name *Mary A. Barkwell.* Name of Soldier *Barkwell. Wm. H.*  
 Address *Norland. Ont.* Regtl. No. *724202.*  
 Rank *plc.*  
 Corps *109 Bthn.*  
 Relation to Soldier *Widowed.* To what Corps belonging }  
 wife, child or mother *Mother* 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.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				





11. 11. 11.  
11. 11. 11.  
11. 11. 11.  
11. 11. 11.  
11. 11. 11.  
11. 11. 11.



161306

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

M. F. W. 54.  
150M. 10-15.  
H.C. 1772-30-920.

# Casualty Form—Active Service.

109th OVERSEAS BATTALION, C. E. F.

Unit, Regiment or Corps 109th OVERSEAS BATTALION, C. E. F.  
 Regimental No. 24202 Rank Pls Name Barwell, William Kingsley  
 Enlisted (a) 1.4.16 Terms of Service (a) Gr of B. Service reckons from (a) 1.4.16  
 Date of promotion to present rank } Date of appointment to lance rank } Numerical position on roll of N. C. Os. }  
 Extended \_\_\_\_\_ Re-engaged \_\_\_\_\_ Qualification (b) Laborer.

CERTIFIED CORRECT.  
18 OCT. 1916  
CAN. RECORDS, LONDON

Date	Report From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
		Embarked Canada	Halifax	24.7.16	
		Disembarked England	Liverpool	31.7.16	
		Transferred for Overseas Service with <u>20<sup>th</sup></u> Batt'n		OCT 5 1916	Capt. D.O. Pt. 11. No. <u>279</u> 109th Overseas Battalion, C. E. F.
6/10/16	C B Dep	Arrd & taken on strength	20th Bn	6/10/16	NR Pt 2 O's 55d11/10/16
do	do	Left for	do	20/10/16	NR
27/10/16	20th Bn	Arrived	do	23/10/16	B213
10/2/17	V. C.F.A.	Peri-ton - Access adm	V. C.F.A.	8/2/17	A 36. Dcd 274d 313/17.
12/2/17	"	" " " " " " " "	9 C.F.A.	13/2/17	" " " " " " " "
18/2/17	9 C.F.A.	" " " " " " " "	C.F.A.	17/2/17	A 36 A 51 275 d 12/3/17
24/2/17	4-4-	" " " " " " " "	adm 1/2 duty.	22/2/17	A 36 A 51 274 d 17/3/17
3/3/17	20th Bn	Recd from Hosp	20th Bn	22/2/17	109th BATTALION CAN. INFANTRY.
8-4-17	2 Aust Gen	Inv (Sdck) & posted to 1st Centl Ont	adm 2 Aust Gen	8-4-17	W3034.
14-4-17	do	Regl Dep. Shorncliffe	Prin Henriette		W3083(4377) Pt 2 32D/27-4-17
			<u>M. W. G. A.</u>		Capt. for Lt-Col. A. A. G. Canadian Section, G. H. Q. 3rd Echelon, B. E. F.

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



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				
27-4-17	C. ORD. T.O.S.		Sandling	23-4-17	Pt II No 49
29-10-17	Admitted to 1st C.C.D. from Discharged from 1st G.C.D.	H. Rushey Park D.O. Pt. II. No. 169-4-9-17 C. Sandling	1st CORP		for Colonel i/c Records, Lt SA Matwin Bn. Part II D.O. No. 224-29-10-17
9-11-17	1st G.C.D. Buxton	W. Sandling		8-8-17	Pt II D.O. 245 Lieut. & Assist. Adjt. for O. C. 1st C. O. R. D.
9 NOV 1917	TAKEN ON STRENGTH C.D.D, BUXTON		Commanding		Lieut.-Col, Canadian Discharge Depôt
23 DEC 1917			Commanding		Lieut.-Col, Canadian Discharge Depôt
23 DEC 1917	EMBARKED FOR CANADA FROM LIVERPOOL		Commanding		Lieut.-Col, Canadian Discharge Depôt
<del>17 NOV 1917</del>					



Surname **Barkwell** Christian Name or Names **W.K.** Reg. No. **724202**

Rank **Pte.** Unit **20th Bn.** Co. **1<sup>st</sup> COR.** Troop Batty

Hospital **5 Can. Fld Amb.** Date of Admission **8-2-17**

**Transferred 9 Can. Fld Amb.** Hosp. **13-2-17.**

**6. R. I.** Hosp. **14.2.17.**

**No 2. A. S. H. Wimersey** Hosp. **8.4.17**

**Clearing Hosp. Eastleigh.** Hosp. **15.4.17.**

Diagnosis **Periton Abscess**

(1) **P.U.O.**

Later Diagnosis (if changed)

(2) **+ Deafness of**

(3) **Tachycardia**

Additional Diagnosis: if more than one state present

DISPOSITION Date

DISPOSITION	REMARKS
<b>CL 7 3.17 A455</b>	
<b>C.I. 13-3-17 A459</b>	
<b>14.3.17. A460.</b>	<b>Reg: amt. 22.2.17</b>
<b>19.4.17 A488.</b>	<b>Dis 22.8.17.</b>
<b>25.4.17. B326.</b>	
<b>30-4-17 B329</b>	
<b>13.6.17 B361.</b>	
<b>22.6.17. B370</b>	
<b>5-7-17 B379</b>	
<b>6.9.17. B375</b>	

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

*aw*



EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

- | Hospital                               | Adm.              |
|--|-------------------|
| 1. Grove Mel Grove Footing             | 23-4-17           |
| 2. Brouley Cow<br>Hoodcote. Rk. Epson. | 8.6.17<br>19.6.17 |
| 3. Kings Can + Hosp. Busty Park.       | 29-6-17           |
| 4.                                     |                   |
| 5.                                     |                   |
| 6.                                     |                   |
| 7.                                     |                   |



SURNAME.

*Barkwell*

CARD NO.

*v*

CHRISTIAN NAMES

*William Kingsley*

FOLL.

*L. B. x*

REGL. No.

*724202*

RANK

*Pte.*

UNIT

*109<sup>th</sup>*

*Bn.*

FORMER CORPS

*Nil*

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

*Barkwell Mrs. Mary Ann*

RELATIONSHIP TO SOLDIER

*Mother*

ADDRESS

*Norland, Ont.*

COUNTRY OF BIRTH

*Canada. Dongola, Ont.*

DATE

*July 12<sup>th</sup> 1894*

PLACE OF ATTESTATION

*Cobocook, Ont.*

DATE

*April 4<sup>th</sup> 1916*

*Sailed from Halifax 2*

L. L. 94504. M. & D. 6512

*8/5 23/7/16 488  
4*

M. F. W. 22. 250M.-2-16. H. Q. 1772-39-339.

*R. C. - 5 - 1 - 18*

*3.*



MARRIED

SINGLE

*Yes*

WIDOWER

TRADE OR CALLING

*laborer*

RELIGION

*Baptist*

DESCRIPTION.

APPARENT AGE

*19* YEARS

MONTHS

HEIGHT

*5* FEET

*9 1/4* INCHES

CHEST MEASUREMENT

*37 1/2* INCHES

EXPANSION

*4 1/2* INCHES

COMPLEXION

*Dark*

EYES

*Brown*

HAIR

*dark Brown*

DISTINGUISHING MARKS

*Scar. 1. inch long on outer side of left knee. Scar, size of 20 cent piece on middle of left shin. Scar one inch long on lower third outside of left leg.*

MEDICAL EXAMINATION.

PLACE

*Coboconk, Ont.*

DATE

*April 1<sup>st</sup> 1916.*



William Kingsley

16130

Name BARKWELL

Rank

Pte.

Reg. No. 724202

Unit 20th Battalion.

Next of Kin Canada.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1917.						
8-2	No. 5 C. F. A.		Peri-ton-Abscess	A455		
13-2	No. 9 C. F. A.		do.	A459		
17-2	Can. Rest Stat.		do.	A460		
22-2	Rep. from Base. Rej. Unit.		do.	A460		
8-4	No. 2 Aust. G. H. Wimereux.		P. U. O. Slt.	A488		
15-4	Clg. Hsp. Eastleigh.		do. (Deafness)	B326		
23-4	Grove M. H. Tooting Grove.		do.	B329		
8-6	CCH. Bromley.		do.	B361		
19-6	CCH. W. P. Epsom.		do.	B370		
24-6	Kings Can. led X Hsp Rushy PK.		Tachycardia	B379		
22-8.	Discharged		do.	B.3.		5-9-17







41059

16130

REG. NO. 724202

NAME Barkwell, W.K.  
(SURNAME FIRST)

RANK Pte

CORPS 109 Bn

AGE 20

SERVICE C 4 1/2 E. 10 1/2 F 6 5/2

NAME OF HOSPITAL Queens Military

PLACE Kingston

DATE OF ADMISSION 9-1-18

DISEASE V.D.H.

DISCHARGE to unit 28-2-18

OPERATION

DISCHARGED TO DUTY

TRANSFERRED TO

DISCHARGED BY MEDICAL BOARD class "E" 28-2-18 to unit



REMARKS .....

Lined writing area with 14 horizontal dashed lines.



No. 724202. RANK *Pte.*

NAME *Barkwell, W. S.*

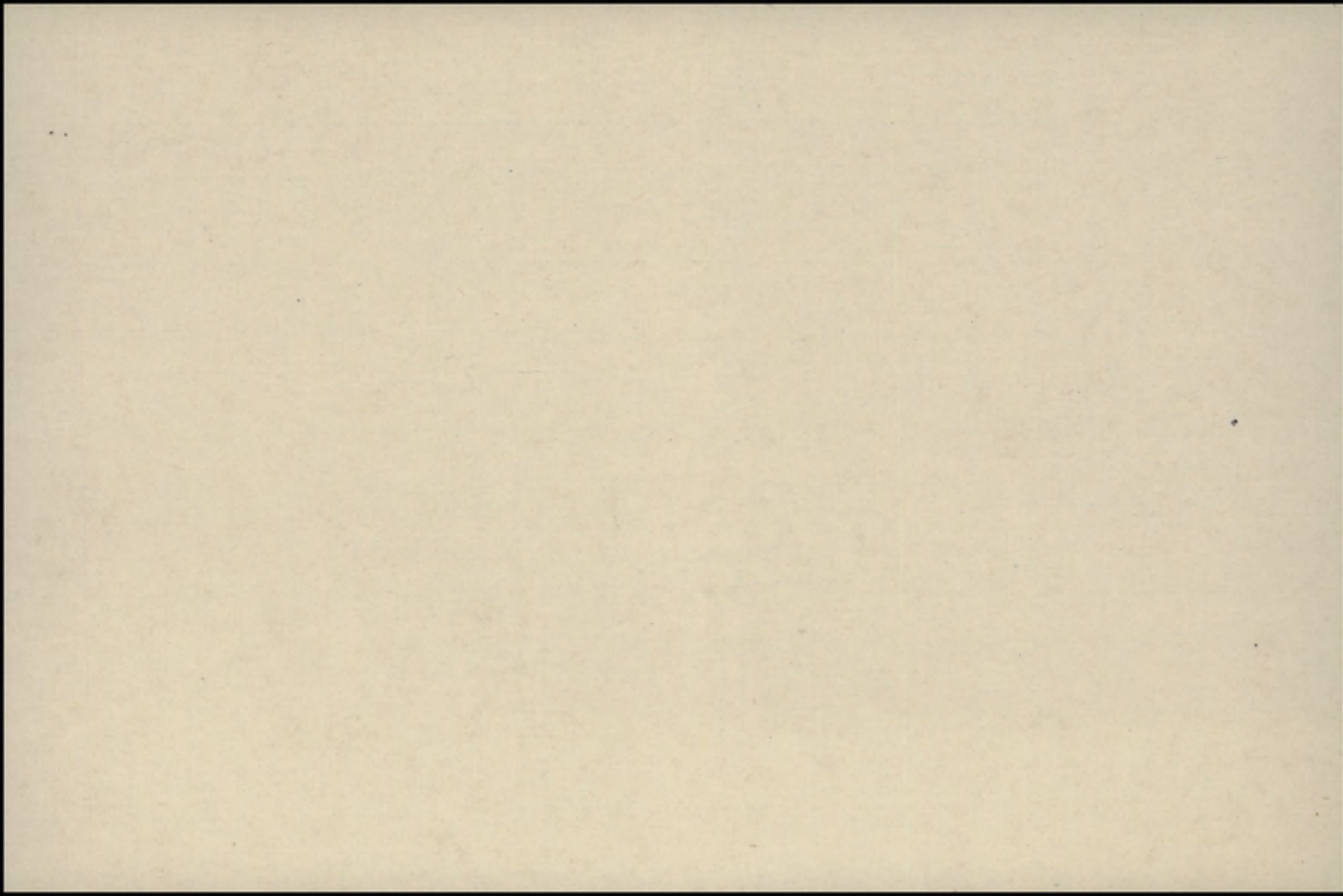
T. O. S. *1-4-16.* UNIT *109th Battalion.*  
*(S.O. 119 of 7-4-16.)*

M. D. *3.*

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1916.</i> <i>April 1.</i>	<i>1916.</i> <i>April 30</i>	<i>✓</i>		
	<i>May.</i>	<i>✓</i>		
	<i>June.</i>	<i>✓</i>		
	<i>July.</i>	<i>✓</i>		

**UNIT SAILED**  
**JUL 23 1916**







NAME

*Bar Kwell W K*

REGT'L No

*724202*

RANK AND CORPS

*Plt 20th Bn*

H. Q. FILE No 649-

FOLLOWS

No.

CABLE

NATURE OF CASUALTY

No.

DATE

FOLLOWS



LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
A 455	#5 Can Old Amb	8-2-17	Periton Abscess
A 459	#9 Can Old Amb	13-2-17	" "
A 460	Can Rest Stat	17-2-17	" "
A 460	Rept from base repaired with	22-2-17	" "
A. 488	#2 Aust. Gen. Wimmera	8-4-17	BU O. S. S.
B 326	Clearing Castleigh	15-4-17	" " leafiness ?
B. 329	Tree with footing base	23-4-17	" " " "
B 361	Gen. Conv. Bromley	8-6-17	P. U. O. "
B 370	Gen. Conv. W. Cole PK. Epson	19-6-17	" " " "
B 379	Kingila. + "Bushy" PK. H. H.	29-6-17	Lachycardia
B 315	Nisich.	22-8-17	<del>Gen. R. S. S.</del> "



Number

724202

Rank

Plt

Surname

BARWELL

Christian Name

William Kingsley

Units

20<sup>th</sup> Bn Can Inf.

Theatre of War

France

Date of Service

7 6-10-16

Remarks

Latest Address

~~Wodland, Ont.~~

BEAVERTON ONT.

Roll No.

B. Page 19043

200m.-6-21.



DEPT  
REGN. NO. 6132984  
NOV 16 1922



Date of Enlistment

1-14-16

MILITIA AND DEFENCE

Date of Assignment

Aug 1st 1916

# Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

20	25 <sup>00</sup>		
----	------------------	--	--

1/12/17  
PC 3257

RATE OF ASSIGNMENT

15-			
-----	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

No. 724202  
 Rank Pte Promoted Reverted Discharge  
 Soldier's Name W. K. Barkwell  
 Battalion "D" Co. 109th Battrn  
 Beneficiary Mary A. Barkwell  
 Relationship Widowed Mother  
 Address

PARTICULARS OF ASSIGNMENT

Name Mrs. Mary, Ann. Barkwell  
 Address Norland, Ont  
 Change of Address  
 1  
 2  
 3  
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
Oct. 31/1917		380	225	605	
Nov	D 53238	20	15	35	
Dec	B 59855	20	15	35	
1918 Jan	P 65870	30	15	45	
Feb		25	15	40	
		450	290		

app + Ha closed 31/1/18  
 ..... A/c Closed 31/1/18  
 app 270.00 Ret'd per. Metegama  
 Ha 450.00 Date 5/1/18 F. X. 24/1/18  
 ..... Clerk .....  
 Con. Ass. Pay Audit O.K.  
 Cmsd 2/10/19

M. F. W. 128  
400M-6-17-1772-38-1141  
L. L. 22320-M. & D. 7593.









### List of Discharge Documents.

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.)

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

No.	424202	
Rank	Pte.	
Name	Barkwell W. Ho.	
<small>NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.</small>		
Corps (Squadron, Battery or Company)	109 <sup>th</sup> Bn.	
Date of Discharge	28-2-18	
Place of Discharge	Kington Ont	
1. DESCRIPTION AT THE TIME OF DISCHARGE.		
Age	20 years 4 months.	Descriptive Marks One Vaccination mark left arm. Two Scars left knee Dis-56
Height	5 feet 11 inches.	
Complexion	Medium	
Eyes	Brown	
Hair	Brown	
Trade	Farmer	
Intended place of residence <small>(To be given as fully as practicable.)</small>	Worland, Ont	
2. The above-named man is discharged in consequence of <i>Surg medically unfit for further service</i>		
<small>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.</small>		
3. Conduct and character while in the service have been, according to the records, etc.		
<i>Good</i> <i>Dec 18-18</i> <i>1005-</i>		
<small>N.B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldier and the Officer Commanding his Squadron, Battery or Company:</small>		
4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)		



5. He is in possession of the following number of G. C. Badges:

No reference to G. C. Badges is to be made on either the discharge or character certificate.

6. Medals and Decorations.....

To be copied by the Commanding Officer on to the parchment Discharge Certificate.

7. His account is correctly balanced, and signed by the Officer Commanding his Company. (Squadron or Battery), and I have impartially enquired into all matters brought before me in accordance with Regulations.

(Place) Hampton ..... [Signature] CAPT. & ADJT.  
"C" Unit, M. H. C. C.  
(Date) 28-2-18 ..... 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) Kingston, W. H. Barkwell (Signature of Soldier.)  
(Date) Feb. 18<sup>th</sup> 18, [Signature] (Signature of Witness.)

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

9. Additional Certificate in the case of a Soldier who takes his discharge on his own request.

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

..... (Signature of Soldier.)

10. Statement of Service.

Service toward Engagement to.....(the date to which the Record of Service is completed) 1 years 33 days.  
Total 1 years 33 days.

11. Confirmation of Discharge.

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

(Place) Hampton ..... [Signature] CAPT. & ADJT.  
"C" Unit, M. H. C. C.  
(Date) 28-2-18 .....

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.)

*Paid to Jan. 31<sup>st</sup> 18.*

*W. H. Barkwell*



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 re-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.

Proceedings on Discharge.

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

No.	724202	Army Rank	Pte
Name	Burkewell to R. William Kingsley <small>(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)</small>		
Corps	101 <sup>st</sup> Coy R.A.		109 <sup>th</sup> BATT
Battalion, Battery, Company, Depôt, &c. <small>(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &amp;c., or to General Staff of the Army, it should be so stated.)</small>			
Date of discharge			
Place of discharge			
1. Description at the time of discharge.			
Age	20	years	months
Height	5	feet	11 inches
Chest measurement	girth when fully expanded		ins.
	range of expansion		ins.
Complexion			
Eyes			
Hair			
Trade	Farmer		
Intended place of residence <small>(To be given as fully as practicable)</small>	Cobbeconk out		
<small>(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent</small>			

Deceased - 15-1-1916

Returned to Canada, - Authority Combatant Board of Officers

held at West Saalmy Dated 28/10 1911

Category 6.11.

(Under new system of categorization)  
R.C. 2729

G.D.D. Buxton

To be filled in on the soldier quitting the Colours.

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: R. Comp 14.2.1913 AB

Army Form B. 2088 has been issued to\*

W.S. G. Comp. 3/2/1913 m.s.



5. He is in possession of the following number of G.C. badgers (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

*France 18 months*

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.)

\_\_\_\_\_



Home address - Norland.

MEDICAL HISTORY OF AN INVALID.

ORIGINAL

1. Station. Kingston. 8. General remarks on his:—  
 2. Regiment or Corps. 20th Battalion. (a) Conduct.  
 3. Regimental No. and Rank. 724202 (b) Habits.  
Pte.  
 4. Name. W.K. Barkwell (c) Temperance.  
 5. Age last Birthday. 20 (For this purpose the Company defaulter sheets will be obtained from the man's Commanding Officer.)  
 6. Enlisted on April 1/16.  
 at Coboconk  
 7. Former trade or occupation. Farmer Date. Feb. 12/18.

9. Service. Years. Days.

PERIODS

	FROM	TO
<u>109th Battalion</u>	<u>April 1/16</u>	<u>Oct. 1/16</u>
<u>20th "</u>	<u>Oct. 1/16</u>	<u>Date.</u>

10. (a) Disease or disability. Valvular disease of heart.  
 (b) Date of origin. July 1917  
 (c) Place of origin. England.  
 (d) Cause. Man says effects of trench fever.

11. Present condition. (Most Important.) This man was taken down with Trench fever in  
(To include full description of present disabling condition or conditions, and of the immediate and direct cause of incapacity, i.e., debility, breathlessness on exertion, necessity of treatment by rest, etc.) France, April 1917. Was sent to England; after 6 weeks.  
time. While convalescent he began to have trouble with his heart, shortness of breath and dizziness. Was confined in hospital till Sept. 1/1917. Returned to Canada Dec. 21/1917. At present man complains of shortness of breath and dizziness on slight exertion. Also complains of pains over the epigastium. Sleeps poorly. Man can walk about 2 miles at his own gait, but cannot hurry without becoming greatly out of breath. Examination. Man looks well nourished Lungs are normal. There is a heaving apex beat in the 5th interspace just inside the nipple line. The first sound is sharp and ringing, and ends in a murmur, Systolic in time and transmitted into the axilla. The second pulmonic is slightly accentuated. Pulse sitting - 100- regular. After running up-stairs - pulse -110, coming back to 100 in 5 minutes, rythm regular. B.P.S.-120. D-85. Urine S.G.-1028. R-acid. A-nil. S-nil.

12. (a) Is the disability the result of service or climate? Service.  
 (b) Has it been aggravated by intemperance, vice or misconduct? No.

M. F. B. 227.

200M. 8. 16. 1772-39-117.

(At Station or Hospital where finally disposed of.)

Station and Hospital } Arrived from }

Date

If admitted. Index No.	If under treatment.		Disease.	How fully disposed of.	Date of Discharge. &c.
	From	From			
Date					

Summary of Causes of invaliding, or remarks as to remand to Regiment, Stat on or Depôt.

Date of final Medical Board or decision. } Administrative Medical Officer.

DETAILED MEDICAL HISTORY OF INVALID.

Militia Form B. 227.

200M. 8. 16. H. Q. 1772-39-117.

Date  
 Disability  
 Name  
 Regimental No.  
 Corps  
 Station  
 Rank  
 Date  
 Hospital or Station transferred to for final disposal.  
 Date of final disposal  
 How finally disposed of  
 The original Report is invariably to accompany the discharge documents of invalids.



MEDICAL HISTORY OF AN INVALID

OPINION OF THE MEDICAL BOARD.

13. (a) For purpose of Identification. (Here a full description of wounds, scars, deformities, etc., is to be given.)

2 small scars over left patilla.

Does the Board concur with the preceding report? If not, give differing opinion.

10. Yes.

11. "

(b) In case of wounds, or other injuries, state whether sustained on or off duty. If not received in action, was a Court of Inquiry held?

Not applicable.

12. "

15. "

(c) In the event of the disability being attributed to exposure on duty, state clearly the nature of such exposure, and whether it was exceptional or otherwise.

Not applicable.

16. "

17. "

14. Treatment.

Australian Hospital in France.

English Hospital in England.

Queen's Military Hospital, Jan. 8/18.

18. Is he unfit for Military Service. Yes.

15. If the disabling condition had its origin before enlistment, has it been aggravated by service, and to what extent?

Not applicable.

Recommendations: On account of disability arising from Cardiac disease, man should be placed in Category "E". Man able to pass under his own control. Man requires no further Hospital treatment.

16. What is the probable duration of the disability or of each disabling condition, if more than one contributes?

Permanent, Cardiac reserve capacity considerably impaired. Will break down under physical stress.

Signatures :-

17. To what extent will it prevent his earning a full livelihood in the general labour market? Please state in fractions. When more than one disabling condition is present, the extent of the disability due to each should be stated.

60% - Re-examination in 1 year.

W.D. Cornell Lt. Col. Amc. President.

E.C.D. Macbally Captain

Station. Kingston.

Date. Feb. 15/18.

L.N. Armstrong Captain M.C. Members.

18. State if for discharge on account of unfitness for Service.

Yes.

Date FEB 19 1918

W.A. Craig Captain A.M.C. Asst. Director of Medical Services.

Approved.

Date.

W. Langford Captain

Medical Officer by whom the case is brought forward.

Director-General of Medical Services.



Table III.—Boards ; Courts of Inquiry, Vaccination, Inoculations, etc. ;  
Examinations for Field or Foreign Service, Extension, Re-engage-  
ment, or Prolongation of Service ; Issue of Surgical Appliances ;  
Particulars of Dental Treatment, etc.

Date	Brief details, and signature

Table IV.—Service Table.

Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation	Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation

*Temporary*

Army Form B. 178.

To be used for recruits enlisting direct into the Regular Army only.  
Army Form B. 178<sup>a</sup> to be used for Special Reserve recruits  
and Special Reservists enlisting into the Regular Army.

**MEDICAL HISTORY of**

Surname Barkwell. Christian Name W.K.

TABLE I.—GENERAL TABLE.

Birthplace ... Parish ... County ...

Examined ... { on ... day of ... 191  
at ...

Declared Age ... years ... days.

Trade or Occupation ...

Height ... feet, ... inches.

Weight ... lbs.

Chest Measurement { Girth when fully Expanded. ... inches.  
Range of Expansion ... inches.

Physical Development ...

Vaccination Marks { Arm ... Right Left  
Number ...

When Vaccinated ...

Vision ... { R.E.—V=  
L.E.—V=  
(a) Marks indicating congenital peculiarities or previous disease ...  
(b) Slight defects but not sufficient to cause rejection ...

Approved by (Signature) \_\_\_\_\_  
(Rank) \_\_\_\_\_ Medical Officer.

Enlisted ... { at ...  
on ... day of ... 191

Corps.	Regtl. No.
<i>20 Ban Inf</i>	<i>724202</i>

Transferred to ...

Became non-effective by \_\_\_\_\_  
on ... day of ... 191  
(Signature) \_\_\_\_\_  
(Rank) \_\_\_\_\_

The Morgan Reeve Co., Ltd., Printers, 20/22, Goldsmith St., Kingsway, W.C. (25289) Wt. W13871/604. 300m. 4/15.



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

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
BLEARING HOSPITAL, EASTLEIGH.	15	4	17				Deafness.		Transferred Grove Military H. Tooting Graveney S.W.	<i>[Signature]</i> Capt R A M C Foroy COMMANDING BLEARING HOSPITAL, EASTLEIGH.
GROVE MILITARY HOSPITAL TOOTING GROVE, S.W.	23	4	14	8	6	14	Pymia N.O.	46	with Head. Transf. Can. Com. H. Berridge	<i>[Signature]</i> MAJOR R.A.M.C. (T) REGISTRAR, GROVE MILITARY HOSPITAL, TOOTING GROVE, S.W.



MARRIED OR SINGLE *Single*

PLACE OF BIRTH *Dongola, Somerville Tenn*

NAME AND ADDRESS OF NEXT OF KIN *Mary Ann Barkwell  
Norland 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. *724202* RANK *Pte* NAME *Barkwell William Kingsley*

IF IN PERM. CORPS WHAT UNIT UNIT *109<sup>th</sup> Bn* TRANSFERRED TO *20<sup>th</sup> Bn* DATE *5/10/16* AUTHORITY *S.O. 279*

PERMANENT FORCE ALLOWANCES TRANSFERRED TO *1<sup>st</sup> B.O.R.D.* DATE *2/16/17* AUTHORITY *600.2.1326 25/1/17*

PLACE OF ATTESTATION *Cobocook* TRANSFERRED TO *P.2 F* DATE AUTHORITY

DATE OF ATTESTATION *April 1<sup>st</sup> 1916* TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY \$ *15.00* DATE EFFECTIVE *aug 1/1916*

PAYABLE TO *Mary Ann Barkwell Norland Ont.* RELATIONSHIP *Mother*

ASSIGNED PAY MONTHLY \$ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) *Stopped* EFFECTIVE *1-12-14* REASON *dis. to Canada*

DISCHARGE DATE AND PLACE *10/1/14 Canada* REASON AND AUTHORITY *A.G. 5-1-22 Disposal*

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

**P. 697. EXTRACTS FROM ACTIVE SERVICE PAY BOOKS.**

Date of Payment.	No. of Acq. Roll.	AMOUNT.					Place of Payment.	Name of Paymaster.	Remarks.
		Francs	¢	¢	¢	¢			
<del>18/6/14</del>	<del>1471</del>	<del>2</del>	<del>=</del>	<del>9</del>	<del>49</del>	<del>Byron</del>	<del>P. Lane</del>		
<del>28/6/14</del>	<del>2129</del>	<del>10</del>	<del>=</del>	<del>2</del>	<del>48</del>	<del>Muskoka</del>	<del>L. Hendrich</del>		
<del>16/7/14</del>	<del>2502</del>	<del>1</del>	<del>=</del>	<del>4</del>	<del>86</del>	<del>"</del>	<del>"</del>		
<del>30/7/14</del>	<del>2640</del>	<del>1</del>	<del>=</del>	<del>4</del>	<del>87</del>	<del>"</del>	<del>"</del>		
<del>9/8/14</del>	<del>2956</del>	<del>2</del>	<del>=</del>	<del>9</del>	<del>74</del>	<del>"</del>	<del>"</del>		
<del>16/8/14</del>	<del>2956</del>	<del>1</del>	<del>=</del>	<del>4</del>	<del>87</del>	<del>"</del>	<del>"</del>		
<del>24/8/14</del>	<del>3124</del>	<del>10</del>	<del>=</del>	<del>4</del>	<del>86</del>	<del>"</del>	<del>"</del>	<i>Chgs.</i>	
<del>12/9/14</del>	<del>1320</del>	<del>1</del>	<del>=</del>	<del>4</del>	<del>86</del>	<del>Stirling</del>	<del>R. Robinson</del>		
<del>26/9/14</del>	<del>1395</del>	<del>2</del>	<del>=</del>	<del>9</del>	<del>74</del>	<del>"</del>	<del>"</del>		
<del>16/9/14</del>	<del>1519</del>	<del>3</del>	<del>=</del>	<del>14</del>	<del>60</del>	<del>"</del>	<del>"</del>		
<del>27/10/14</del>	<del>1614</del>	<del>2</del>	<del>=</del>	<del>9</del>	<del>74</del>	<del>"</del>	<del>O. Handley</del>		
				<i>12410</i>					
				<i>25</i>					

TOTAL CREDITS	ACQUITTANCE ROLLS				CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS	
	1		2		3		4					CREDIT	DEBIT				
	No.	DATE	No.	DATE	No.	DATE	No.	DATE									
<i>370</i>																	
<i>410</i>	<i>27</i>	<i>9-8-16</i>															
<i>3</i>	<i>59</i>	<i>31-8-16</i>	<i>90</i>	<i>15/9/16</i>													
<i>550</i>																	
<i>860</i>																	
<i>3</i>	<i>1324</i>	<i>31/10/16</i>															
<i>410</i>	<i>1478</i>	<i>30/11</i>															
	<i>1378</i>	<i>27/11</i>															
<i>410</i>	<i>1577</i>	<i>16/12/16</i>	<i>1590</i>	<i>6/1/17</i>													
<i>1060</i>	<i>1661</i>	<i>24/1</i>	<i>1720</i>	<i>6/2</i>													
<i>410</i>	<i>1781</i>	<i>27/1</i>	<i>1844</i>	<i>17/3</i>													
<i>8</i>																	
<i>410</i>																	
<i>810</i>																	

*SL No. 52 d. 23/17. Bal. to #875. Av #57.50 Less \$2.00 14740. 19.46 39.34*

*Comm. on Pay audited 2/3/16*

*Jewhullany*

CT



MARRIED OR SINGLE *Single*  
 PLACE OF BIRTH *Dongola, Somerville Miss*  
 NAME AND ADDRESS OF NEXT OF KIN *Mary Ann Barkwell  
 Norland 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. *724202* RANK *Pte* NAME *Barkwell William Kingsley*  
 IF IN PERM. CORPS WHAT UNIT UNIT *109<sup>th</sup> Btn* TRANSFERRED TO *20<sup>th</sup> Bn* DATE *5/10/16* AUTHORITY *S.O. 279*  
 PERMANENT FORCE ALLOWANCES TRANSFERRED TO *10<sup>th</sup> B.O.R.D.* DATE *2/6/17* AUTHORITY *Case No. B 326 25/4/17*  
 PLACE OF ATTESTATION *Cobocook* TRANSFERRED TO *P. 2. 7* DATE AUTHORITY  
 DATE OF ATTESTATION *April 1<sup>st</sup> 1916* TRANSFERRED TO DATE AUTHORITY  
 ASSIGNED PAY MONTHLY \$ *15.00* DATE EFFECTIVE *Aug 1/1916*  
 PAYABLE TO *Mary Ann Barkwell Norland Ont.* RELATIONSHIP *Mother*  
 ASSIGNED PAY MONTHLY \$ DATE EFFECTIVE  
 PAYABLE TO  
 STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) *Stopped* EFFECTIVE *1-12-14* REASON *dis. to Canada*  
 DISCHARGE DATE AND PLACE *10/1/14 Canada* REASON AND AUTHORITY *A.G. 5-1-22 Disposal*  
 ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)  
 ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

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					
<i>July 31</i>									<i>13 70</i>	<i>13 70</i>																	
<i>Aug 31</i>	<i>31</i>	<i>1.00</i>	<i>31</i>	<i>10</i>	<i>31</i>	<i>10</i>	<i>31 10</i>		<i>34 10</i>	<i>27 98 16</i>																	
<i>Sept 30</i>	<i>30</i>	<i>30</i>					<i>3</i>		<i>33</i>	<i>59 31 8 16 90 15 9 16</i>																	
<i>Oct 15</i>	<i>5</i>	<i>5</i>					<i>50</i>		<i>550</i>																		
<i>Oct 31</i>	<i>26</i>	<i>1.26</i>	<i>26</i>	<i>10</i>	<i>26</i>	<i>10</i>	<i>26 10</i>		<i>28 60</i>	<i>1334 17/16/16</i> <i>129 34/16</i>																	
<i>Nov 30</i>	<i>30</i>	<i>1.30</i>	<i>30</i>	<i>10</i>	<i>30</i>	<i>10</i>	<i>3</i>		<i>33</i>	<i>1324 3/10/16</i> <i>1478 30/16</i>																	
<i>Dec 31</i>	<i>31</i>	<i>1.31</i>	<i>31</i>	<i>10</i>	<i>31</i>	<i>10</i>	<i>31 10</i>		<i>34 10</i>	<i>1378 27/16</i>																	
<i>1917</i>		<i>15 30</i>					<i>15 30</i>																				
<i>Jan 31</i>	<i>31</i>	<i>1.10</i>	<i>34</i>	<i>10</i>					<i>34 10</i>	<i>1517 14/1/16 1590 6/1/17</i>																	
<i>Feb 28</i>	<i>28</i>	<i>1.00</i>	<i>30</i>	<i>80</i>					<i>30 80</i>	<i>1661 29/1 1720 4/2</i>																	
<i>March 31</i>	<i>31</i>	<i>34</i>	<i>10</i>						<i>34 10</i>	<i>1781 27/2 1844 17/3</i>																	
<i>April 30</i>	<i>30</i>	<i>1.30</i>	<i>33</i>						<i>33</i>																		
<i>May 31</i>	<i>31</i>	<i>34</i>	<i>10</i>						<i>34 10</i>	<i>cp. 115</i> <i>cp. 10/5</i> <i>cp. 24/5</i>																	
			<i>334 40</i>						<i>13 70</i>	<i>348 10</i>																	

*S.L. No. 52 d 23/12/17. Balce. to \$ 8.75. Cr \$ 57.50 Less \$ 2.00 at 14740.  
 14.46  
 39.34  
 Loan. on Pay audited  
 2/5/18  
 ok. Hewhllanz*







724202

*Mc. Barkwell W K.*

*apay 15<sup>00</sup> Cas.*

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					
<i>Frid</i>			334	40				13 70	348 10					444 06	17 76	14 43	14 61	150	2 12	242 98	105 12						
<i>June 30</i>	170	22							22												19 57	107 25			<i>Transf 1<sup>st</sup> G.O.R.D. effed 21.6.17</i>		
<i>31</i>	10	11						11														118 25					
<i>July 31</i>			34	10				34 10											15	15		137 35					
<i>Aug 31</i>			34	10				34 10											15	15		156 45					
<i>Sept 30</i>			33					33											15	15		174 45					
			468	60				13 70	482 30					444 06	17 76	14 43	19 48	210	2 12	307 85	174 45						

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEPER. RED. PAY	SER. ALLGE. ENG.
1917											
Sept. 30		174	45						174 45		
Oct	3 days at 1 <sup>10</sup> .	34	10						15 193 55		
			208 55						15		
Nov	10 days P.P.	11		ban. ad.					15 189 55		
		45 10		7 days F.P. B.O. 169 4/11/17		7 70			181 85		
					48 67 8				30 124 35		
									57 30		
Nov				Anal 1430 C.C.H. 13.6.17	9 73						
				- 2672 20 <sup>th</sup> Br. 31.7.17	4 87						
				- 2502 20 <sup>th</sup> Br. 16.7.17	4 87						
				- 1395 10 <sup>th</sup> B.D. 26.9.17	9 74						
				- 2956 K.C. 16.8.17	9 73						
				- 2956 " " 16.8.17	4 87						
				- 14740 C.B.B. 20/1/17	9 73				128 31		
1918					53 54						
Jan				Drat 1522 - 10 <sup>th</sup> Dec - 16-10-17	14 60						
				- 1617 do. 27-10-17	9 73						
				- 15968. C.A. 11/12/17	9 73						
				- 1320 2 <sup>nd</sup> B.D. 12-9-17	4 87						
				✓ 3124 C.A. 30-8-17	48 67						
				✓ 2128 do 28-6-17	2 44						
					90 87						
				Time for drinker 31.9.17		2 00					
				150000 10.9.17	90 04	2 00			36 27		
June				Arv Bal to loan	36 02				36 02		
Nov					36 02				25		

A3M FORM REND *Stoppa* EFFEC *1/12/17*  
DISCHARGED TO *Canada* DATE *10/1/17*  
PAYBOOK VERIFIED *10/1/17*  
*Cr. Bal 545* L.P.C. REND *10/1/17*  
AUTHY. *AS 5-1-22*

*J. Buchanan LPL*

A3M FORM REND *EFFEC*  
DISCHARGED TO *Unit*  
PAYBOOK VERIFIED  
BAL. L.P.C. REND  
AUTHY.

*Sup 20 Cens 5.2-1918*  
*Balance last 36.04*  
*Includ End on Orig 26*