

2nd enlistment

DISCHARGE DOCUMENTS

R. O. No.....

H. Q. No.....

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

Attestation Papers.....

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet.....

Compulsory Stoppages.....

Casualty Forms.....

Proceedings on discharge.....

Corps History Sheet.....

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

Parchment Certificate.....

Medical Report for Invalids.....

Medical History Sheet.....

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet.....

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate.....

3

2  
2

*Handwritten scribble*

Name Bonham, Herbert

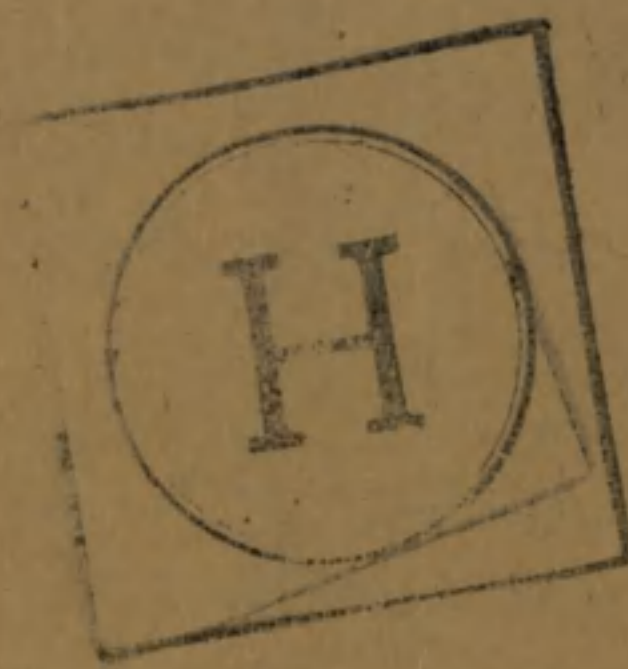
Regt. No. 725235 Rank Pte.

Corps 123<sup>rd</sup> Batt. G.E.F., Royal Grenadiers

27481



*Not likely to become an efficient soldier*  
*Physically unfit*



*Handwritten scribbles and signatures*

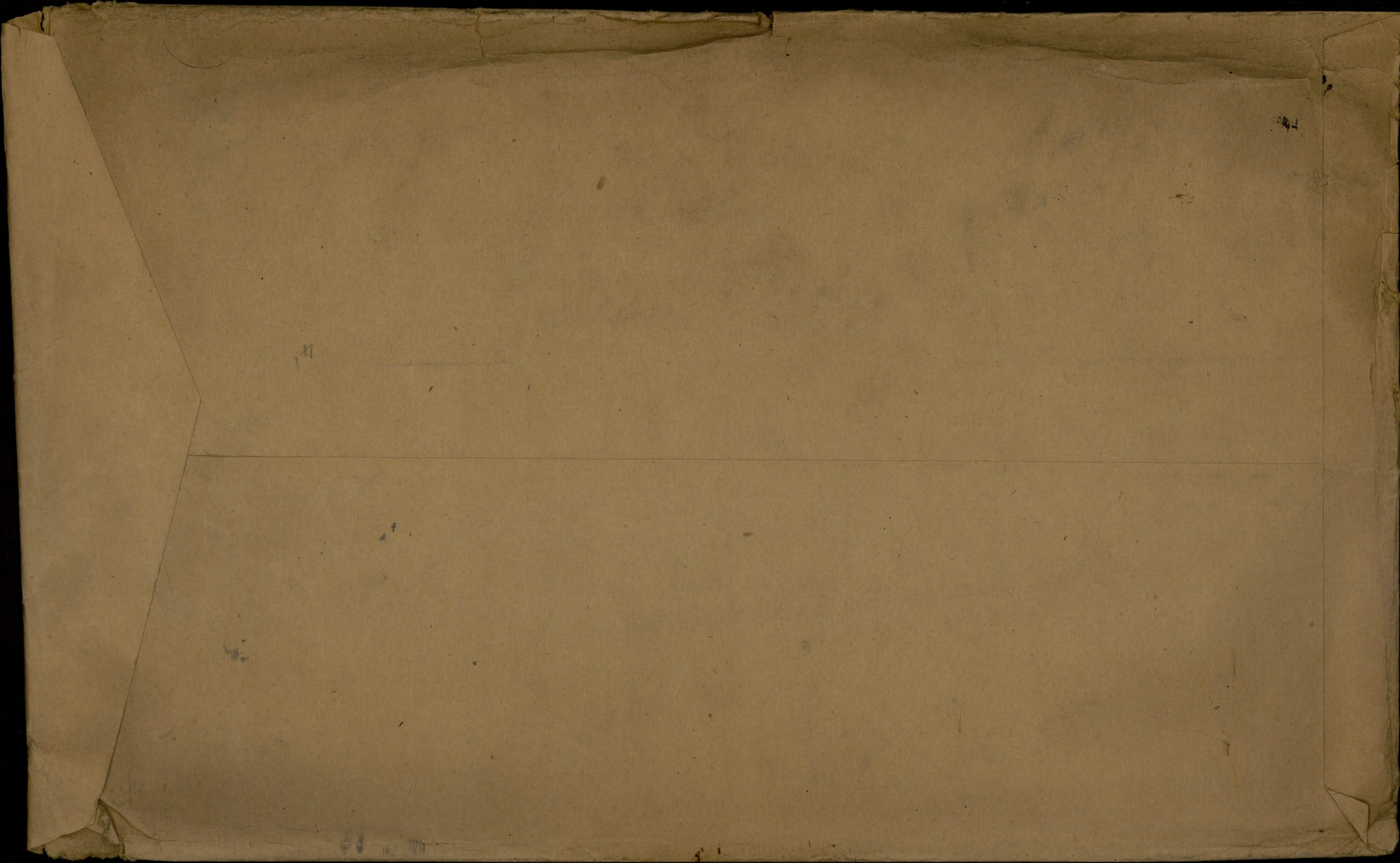
*402790*

*2*  
*9-11*  
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*11-11*

*dt/B 123*  
*B.P.C. 167*  
*Noc. 17-1*

*4021277-2*  
*4021277-1*

*Beas card*  
*R 122*  
*2 pay cards*



Feb. 10/16  
OK HLL

1151

B.

# ATTESTATION PAPER.

No. 725235

109th OVERSEAS BATTALION, C. E. F.

Folio.

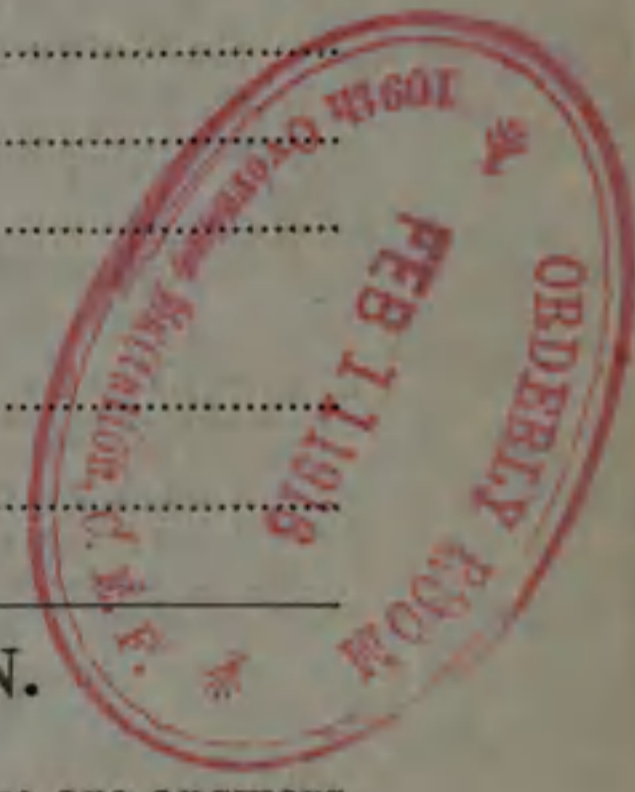
CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

ORIGINAL

## QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?..... Bourham
- 1a. What are your Christian names?..... Herbert
- 1b. What is your present address?..... 312 McRoberts Ave. Toronto Ont
2. In what Town, Township or Parish, and in what Country were you born?..... Leamington Ontario
3. What is the name of your next-of-kin?..... Mrs. John Alice Elizabeth Bourham
4. What is the address of your next-of-kin?..... no address Toronto 312 McRoberts Ave.
- 4a. What is the relationship of your next-of-kin?..... Mother Wife Toronto, Ont.
5. What is the date of your birth?..... 15<sup>th</sup> October 1891
6. What is your Trade or Calling?..... Farmer
7. Are you married?..... Yes.
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, Herbert Bourham, 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 10<sup>th</sup> Feb 1916. Herbert Bourham (Signature of Recruit)  
Geo Dawson (Signature of Witness)

## OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Herbert Bourham, 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 10<sup>th</sup> Feb 1916. Herbert Bourham (Signature of Recruit)  
Geo Dawson (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 Rindsey this 11<sup>th</sup> day of February 1916.  
[Signature] (Signature of Justice)

6  
HLL

1157

Description of Herbert Bonham on Enlistment.

Apparent Age 21 years 8 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. 5 ins.

Chest measurement { Girth when fully expanded 36 ins.  
Range of expansion 3 ins.

Complexion Fair

Eyes Blue Brown

Hair Light brown

*Scar on right knee cap  
Scar on under side of  
right elbow.*

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

CERTIFICATE OF MEDICAL EXAMINATION.

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

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

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

Date February 11<sup>th</sup> 1916

Place Sunday

*J. M. ...* 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.

Herbert Bonham 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.

*J. J. ...* Lt. Col. (Signature of Officer)  
O. C. 109th Overseas Battalion, C. E. F.

Date FEB 11 1916



1151

PROCEEDINGS OF A MEDICAL BOARD.

Dated at ETCHINGHILL 24<sup>th</sup> Nov. 1917.

No. 725235 Rank PTE Name BONHAM H

Local Unit 1<sup>st</sup> CORD Overseas Unit 20<sup>th</sup> Bn. Age 30

Examination held at .....

DISABILITY.  
Overseas—Local  
(scratch one out).

G. S. W. LEFT LEG

PRESENT CONDITION.

*was a healed G.S.W. of left leg, on posterior +  
outer side, just below the belly of the calf muscles.  
Does not seem to involve deep structures to any extent  
but he is developing a contracture of calf muscles  
& apex cavus probably due to weakness of opposing  
anterior muscles*

BOARD RECOMMENDS:—

- 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:—

Members { .....President.  
 .....  
 .....

APPROVED

Dated.....1917. ....

MEDICAL CASE SHEET.\*

1151 F C J Bed 18

No. in Admission and Discharge Book. FC 1258	Regimental No. 725235	Rank. Pte	Surname. Bonhau	Christian Name. Herbert
Year 1914	Unit. 20th Canadians	Age. 29	Service. 19 mths	

2nd S. G. Station and Date  
Bristol  
2nd S. G. Southmead  
21-8-17.

Disease gstr. l. leg.  
 Due to }  
~~rod. due~~ } trauma  
 Aggravated by }  
 Apr 8th 1917. Very Pains  
Wid. over L. fibula.      F.B. removed  
 May 1.      Healed

12/5/14 W. G. H. G. M. S.

Cannore.  
CAPT. R.A.M.C.

DATE OF DISCHARGE:- 8-6-17  
 DESTINATION:- W. G. H. G. M. S.

Station  
and Date.



## DECLARATION OF DISABLED MEMBER OF FORCES RE WIFE AND CHILDREN.

Form to be filled in and signed by a disabled man at the time he is medically examined for discharge and pension.

(Note:—At the time of medical examination this form is to be handed to the Officer or Soldier and when filled in is to be attached to completed M.F.B. 227 or other form used for medical examination.)

I, 725233- Private  
(Regimental Number) (Rating or Rank)  
Herbert Bonham  
(Full Name)  
20th Batta # 7 Casualty unit  
(Ship or Unit)

hereby declare as follows:—

1. That I am married and my wife is alive. *yes*  
 (Attach marriage certificate if possible.)

(If you are not married write the words "NOT MARRIED" on next line.)

2. And that the following are the true particulars of my living children, boys under sixteen and girls under seventeen years of age. (Attach birth certificates if possible.)

Names of Children	Sex	Dates of Birth	Place of Residence	By whom Maintained
<i>Erilyn Stone</i>	<i>Female</i>	<i>Oct 2/1910</i>	<i>312 McBride Ave</i>	<i>myself</i>

(NOTE:—If you have no children write the words "NO CHILDREN" across the above space.)

*Herbert Bonham*  
Signature of Officer or Soldier.

Witness:

*M. B. Sexton Capt.*  
Member of Medical Board.

NOTE:—If the marriage and birth certificates mentioned above are not forwarded with this form you will be requested to secure and forward them at a later date. The certificates will be returned to you after perusal.)

REGULATION OF DISABERED MEMBER OF POLICE OR WIFE  
AND CHILDREN

1. This regulation shall apply to a member of the force who is disabled or to his wife or children.

2. The term "disabled member" shall mean a member of the force who is unable to perform his duties on account of physical or mental infirmity.

REGULATION 1

1. This regulation shall apply to a member of the force who is disabled or to his wife or children.

2. The term "disabled member" shall mean a member of the force who is unable to perform his duties on account of physical or mental infirmity.

3

3. The term "wife" shall mean the wife of a member of the force who is disabled or the wife of a member of the force who is the husband of a disabled member.

4. The term "children" shall mean the children of a member of the force who is disabled or the children of a member of the force who is the husband of a disabled member.

5. The term "disabled member" shall mean a member of the force who is unable to perform his duties on account of physical or mental infirmity.

6. The term "disabled member" shall mean a member of the force who is unable to perform his duties on account of physical or mental infirmity.

7. The term "disabled member" shall mean a member of the force who is unable to perform his duties on account of physical or mental infirmity.

8. The term "disabled member" shall mean a member of the force who is unable to perform his duties on account of physical or mental infirmity.

No.	Name	Rank	Grade
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			

9. The term "disabled member" shall mean a member of the force who is unable to perform his duties on account of physical or mental infirmity.

10. The term "disabled member" shall mean a member of the force who is unable to perform his duties on account of physical or mental infirmity.

11. The term "disabled member" shall mean a member of the force who is unable to perform his duties on account of physical or mental infirmity.

12. The term "disabled member" shall mean a member of the force who is unable to perform his duties on account of physical or mental infirmity.

B-

To be made out in duplicate.

E.O. 5-2122-53  
**DUPLICATE**

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..... 725235

(3) Full Name of Soldier..... Herbert Bonham

(4) Place of Birth..... Lamington Ontario

(5) Are you married, or not?..... Yes

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

(b) Present Postal Address..... 312 McRoberts Ave .

Toronto Canada

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

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

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

Also their names and ages.....

(9) Is your Father alive?.....**Yes**.....~~John xx Bonham #1 x 312 x McRoberts~~.....  
Toronto Canada  
If so, state name and address .....**John Bonham 312 McRoberts Ave.**.....

(10) Is your Mother alive?.....**Yes**.....  
If so, state name and address.....**Ida Matilda Bonham**.....  
.....**312 McRoberts Ave. Toronto**.....

(11) If your Mother is a widow.....  
Are you her sole support, or not?.....

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

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

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

(15) Are you insured?.....**Yes**.....  
If so, in what Company?.....**Toronto Corporation**.....  
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 9th 1916**.....

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

ATTESTATION PAPER.

No. 766334

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

- |   |                                       |
|---|---------------------------------------|
| 1. What is your surname?  | Bonham                                |
| 1a. What are your Christian names?  | Herbert                               |
| 1b. What is your present address?   | 176 1/2 Sackville St. Toronto. Canada |
| 2. In what Town, Township or Parish, and in what Country were you born?                           | Essex Count. Ont. Canada              |
| 3. What is the name of your next-of kin?  | Alice E Bonham                        |
| 4. What is the address of your next-of-kin?   | 176 1/2 Sackville St. Toronto, Canada |
| 4a. What is the relationship of your next-of-kin?   | Wife                                  |
| 5. What is the date of your birth?  | October 15th 1891                     |
| 6. What is your Trade or Calling?   | Farmer                                |
| 7. Are you married?   | Married                               |
| 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?<br>If so, state particulars of former Service.    | No                                    |
| 11. Do you understand the nature and terms of your engagement?                                    | Yes                                   |
| 12. Are you willing to be attested to serve in the }<br>CANADIAN OVER-SEAS EXPEDITIONARY FORCE? } | Yes                                   |

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Herbert Bonham, 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 December 3rd 1915 Herbert Bonham (Signature of Recruit)  
A. Malone (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Herbert Bonham, 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 December 3rd 1915 Herbert Bonham (Signature of Recruit)  
A. Malone (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 Toronto, Canada this 3rd day of December 1915.

[Signature] (Signature of Justice)

# Description of Herbert Bonham on Enlistment.

Apparent Age 24 years 2 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. 5 1/2 ins.  
 Chest measurement { Girth when fully expanded ..... 35 1/2 ins.  
 { Range of expansion ..... 1 1/2 ins.  
 Complexion ..... Medium  
 Eyes ..... Brown  
 Hair ..... Brown

Scar on left knee  
Scar on back of right hand  
Scar on right elbow

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

## CERTIFICATE OF MEDICAL EXAMINATION.

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

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

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

Date..... December 3rd 191 5

*J. W. Hughes*

Place..... Toronto, Canada

*Capn*

Medical Officer.

Toronto Recruiting Depot

\*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.

Herbert Bonham 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.

**123rd BN C.E.F.**  
**ROYAL GRENADIERS**

*M. W. Smith*

(Signature of Officer)

Date..... DEC 10 1915 191 .

Lieut Col.  
O.C. 123rd Bn. C.E.F.  
Royal Grenadiers

**ORDERLY ROOM**

# CANADIAN CONTINGENT EXPEDITIONARY FORCE.

M. D. 2  
No. 23

## 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. 725235 Rank Pte. Name H. Bonham

Corps #2 Cas. Unit who was\* Discharged

On Apr. 17, 1918 1918, to.....

\*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from Feb. 20, 1918 1918 to Apr. 17, 1918 1918, the inclusive date of transfer or discharge.

Dr.	\$	c.	Cr.	\$	c.
Bal. Dr. from prev. month.....	24	48	Bal. Cr. from prev. month.....		
Advances } No.....			Reg'tl Pay <u>57</u> days at \$ <u>1</u> c.....	57	
by } No.....			Field Allow. <u>57</u> days at \$..... c <u>10</u>	5	70
Cheques } No.....			Separation Allowances* (Monthly) <u>Apr.</u>	14	15
Assigned Pay and Sep'n Allee. No. <u>19977</u> .....	14	15	Other Allowances* <u>Sub.</u>	12	
Other charges.....			Other Credits* <u>Clothing</u>	8	
Payment on transfer or discharge No. <u>19978</u> .....	116	22	Bal. Dr. (to be deducted by new unit).....	58	
Balance Cr. (to be paid by the new unit).....					
Total.....	154	85	Total.....	154	85

\* Give particulars.

A monthly stoppage of \$ 15.00 (†) has..... (‡) been paid on account of Assigned Pay for the month of Mar. 1918 1918 and Sep'n Allee. for month of Apr. 1918 1918 (to) Assignee Mrs. John Bonham, (Address) 16 Innes Ave., Toronto.

(†) 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:—**

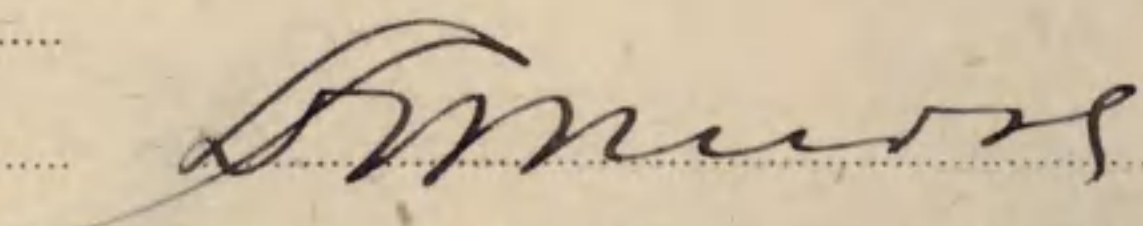
- State (1) date of enlistment.....
- (2) if married and if a Separation Allowance Card has been submitted Yes.....
- (3) cause of discharge..... authority D.O. 104.....
- (4) authority for transfer.....

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 15/4/18.....

Place Toronto.....

  
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.

16



WAR SERVICE GRATUITY.

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 *Herbert* 2. Surname *Bonham*
3. Rank *Private* 4. Original Unit *109* 5. Reg. No. *725235*
6. Address, in full, to which future payments of gratuity are to be forwarded .....  
*173 John St Toronto*
7. Date of enlistment in the C.E.F. *Feb 10<sup>th</sup> 1916*
8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge *Mrs. J. Bonham*
9. Relationship of such dependent *Mother (Guardian) WWI 19<sup>th</sup> 1919*
10. Address, in full, of such dependent .....  
*293 McRoberts Ave. Toronto*
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:—  
*20<sup>th</sup> Battr. France*  
*Nov 28<sup>th</sup> - Apr 8<sup>th</sup> 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? *~~C.C.D. Buxton~~*  
*No*
14. Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service .....  
*No*
15. Give total length of time which you served on active service, whether in Canada or Overseas, setting out particular of units on whose strength you served *Feb 10<sup>th</sup> 1916 - Apr 18<sup>th</sup> 1918*  
*109<sup>th</sup> - drafted to 20<sup>th</sup> Battr in France*  
*1<sup>st</sup> C.O.R.D & C.C.D. Buxton. C.C.D. Toronto*
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: *123 Battrn. Reg # 766334*  
*Dec 3<sup>rd</sup> 1915 to Feb 7<sup>th</sup> 1916. discharged.*

*109 Battrn. Feb 10<sup>th</sup> 1916*

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 *Yes*

*Three months post-discharge pay \$174<sup>00</sup> No 2*

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

*No*

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

*April 18<sup>th</sup> 1918*

(b) Reason for discharge *Physically unfit caused by gun shot wound in left leg*

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

*20<sup>th</sup> Battrn France. Nov 28<sup>th</sup> 1916 - Apr 8<sup>th</sup> 1917*

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: *Herbert Bonham*

Place of Residence: *173 John st Toronto*

Declared before me at: *Toronto*

This *8<sup>th</sup>* 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.

*[Signature]*

**POST DISCHARGE PAY.**

Date paid.	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
<i>Subst P.D.P.</i>	<i>\$58.</i>			
<i>12-5-18</i>	<i>58.</i>			
<i>17-6-18</i>	<i>5910</i>			
	<i>\$175.10</i>			

*No over payment*

Certified Correct.

*[Signature]*  
 District Paymaster.  
 CAPTAIN C.A.F.C., C.E.F.  
 for PAYMASTER, MILITARY DISTRICT No. 2

ORIGINAL 1157 ORIGINAL  
**MEDICAL HISTORY SHEET.**

7. C. T.  
 258  
 S.

230-B

Surname Borham Christian Name Herbert

Examined { on 11<sup>th</sup> day of February 1916.  
 { at Lindsay  
 Birthplace { City or Town Seamington  
 { County Ontario

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

Apparent age 24 years  
 Trade or occupation Farmer  
 Height 5 Feet 5 Inches.  
 Weight 131 Lbs.  
 Chest measurement { Minimum 33 inches.  
 { Maximum expansion 36 inches.  
 Physical development Good  
 Small-Pox Marks None

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT.
		<u>27 APR 1917</u>
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Vaccination Marks { Arm Right None Left Two  
 { Number Two

Date	Result	VACCINATIONS.
<u>10-2-16</u>	<u>Good</u>	<u>J. McCulloch</u> M.O.
		M.O.
		M.O.

When Vaccinated last January 10<sup>th</sup> 1916  
 (a) Marks indicating congenital peculiarities or previous disease None

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.

(b) Slight defects but not sufficient to cause rejection None

Enlisted on 10<sup>th</sup> day of February 1916 at Lindsay

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>109<sup>th</sup> Bn. C.F.F.</u>	<u>425235</u>		<u>10-2-16</u>
Transferred to.....	<u>20th. Bn</u>	<u>B.</u>		

**EXAMINED OR DISCHARGED BY A MEDICAL BOARD.**

STATION	DATE.	DISEASE.	RESULT
<u>Russian Bn</u>	<u>Apr 6/18</u>	<u>Suppression</u>	<u>W.T. M. Corp. M.B.</u>
<u>East Sandling</u>	<u>18-9-17</u>	<u>G. N. N. Lt. leg</u>	<u>Dr H. A. Culham</u>
<u>Ettringham</u>	<u>Nov 11-17</u>	<u>W. W. Lt. leg</u>	<u>Dr H. A. Culham</u>
<u>E. Sandling</u>	<u>11-2-18</u>	<u>G. S. W. Lt. leg</u>	<u>Dr H. A. Culham</u>
<u>SHORNCLIFFE</u>	<u>12 FEB 1918</u>	<u>APPROVED</u>	<u>J. R. Goodall M.B.</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.

1918  
 1781  
 1857

1151

Robert

Christian Name

Surname Bonham

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				
2nd S. G. Bristol.		21	4	17	8	6	17	S. W. a. 2 <sup>d</sup> Leg.	49	Healed -	Caunoon CAPT., R.A.M.C.
Resolvent Hospital, Hillingdon House, Uxbridge.		8	6	17	28	6	17	20	21	To Ipswich for leave	W. J. Munnell for O.C. Canadian Conv. Hospital, Hillingdon House, Uxbridge
	M. H. E. Bonham	18	6	17			5 SEP 1917	do	19 80	Wound discharging on admission. Daily dressing until healed. Followed by massage and p.t. treatment: marked improvement. Now fit for physical training D7	W. J. Munnell
CANADIAN HOSPITAL, ETCHINGHILL, LYMINGE,		31	10	17	23	11	17	Generalized Syphilis	24	Discharged to unit as out patient.	Appleby Capt.

1151

# PROCEEDINGS OF A MEDICAL BOARD.

Dated at 24/11/17 1917.

No. 25235 Rank Pte. Name BONHAM, H.

Local Unit 1st C.O.R.P. Overseas Unit 20th Bn. Age 31

Examination held at Springhill

**DISABILITY**  
Overseas  Local  
(scratch one out).

G.S.W. LEQ LEFT.

April 8. 1917.

### PRESENT CONDITION.

Submitted Feb. 1916. France. Nov. 1916. There 6 mos.  
Evacuated April 21. 1917. Wounded as above.  
now has a scar on left side of calf muscle  
- left leg.  
walks with limp. Has some contracture of calf  
muscles and muscles atrophied somewhat.  
Condition should improve

### BOARD RECOMMENDS:-

B III 4 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:-

Members { H. Inspector C.M.M. President.  
Arthur Hipwell Lt

APPROVED

Dated 26 NOV 1917 1917.

Charles DeLain CAPT  
FOR A.D.M.S. CANADIANS, SHORNOLIFFEJ  
For A.D.M.S.

PROCEEDINGS OF A MEDICAL BOARD

dated at \_\_\_\_\_ 1917

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

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

DISABILITY  
Overseas Local

PRESENT CONDITION

BOARD RECOMMENDS

- 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

Signature

Member

APPROVED

Dated

1917

For A.D.M.S.

# PROCEEDINGS OF A MEDICAL BOARD.

Dated at Etchinghill. Nov. 24th, 1917.

No. 725235 Rank Pte. Name BONHAM, H.

Local Unit 1st. C.O.R.D. Overseas Unit 20th. Bn. Age 30

Examination held at Etchinghill Can. Hospital.

DISABILITY.  
Overseas—~~Local~~  
(scratch one out).

G.S.W. LEG - LEFT.

Apr. 8th/17.

## PRESENT CONDITION.

Enlisted Feb. 1916. France Nov. 1916. There 6 months.  
Evacuated Apr. 21st, 1917. Wounded as above.

Now has adherent scar 2" long on left side of calf  
muscles - left leg.

Walks with limp. Has some contracture of calf muscles,  
and muscles atrophied somewhat.

Condition should improve.

BOARD RECOMMENDS:— B iii. 4 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:—

W. FRED JACKSON, Capt. CAMC. President.

S.

Members

FRED W. W. HIPWELL, Lt. CAMC.

APPROVED

26 NOV 1917

Dated..... 1917.

*Charles Wheeler*  
CAPT  
FOR A.D.M.S. CANADIANS, SHORNOLIFFEJ  
For A.D.M.S.

PROCEEDINGS OF A MEDICAL BOARD.

Date at \_\_\_\_\_

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

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

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

Disability Overseas \_\_\_\_\_

PRESENT CONDITION

... limited to ...  
... at ...  
... on ...  
... - ...  
... the ...  
... and ...  
... 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

Date \_\_\_\_\_ 1917  
For ADMS



1151

# MEDICAL HISTORY SHEET.

Surname Bonham Christian Name Herbert

Examined	on <u>3rd</u> day of <u>December</u> 191 <u>5</u>	Approved by <u>J. Hughes</u>	
	at <u>Toronto, Canada</u>	Rank <u>Capt</u> M.O.	
Birthplace	City or Town <u>Essex County</u>	<u>Toronto Recruiting Depot</u>	
	County <u>Ontario, Canada</u>	Date	Fit or Unfit
Apparent age	<u>24 years 2 months</u>	EXAMINED FOR RE-ENGAGEMENT,	
Trade or occupation	<u>Farmer</u>		M.O.
Height	<u>5</u> Feet <u>5 1/2</u> Inches.		M.O.
Weight	<u>118 1/2</u> Lbs.		M.O.
Chest measurement	Minimum <u>34</u> inches.		M.O.
	Maximum expansion <u>35 1/2</u> inches.		M.O.
Physical development	<u>Good</u>		M.O.
Small-Pox Marks	<u>None</u>		M.O.
Vaccination Marks	Arm <u>Right</u> Left <u>1</u>	Date	Result
	Number <u>1</u>	VACCINATIONS.	
When Vaccinated last	<u>1902</u>		M.O.
(a) Marks indicating congenital peculiarities or previous disease	<u>None</u>		M.O.
(b) Slight defects but not sufficient to cause rejection	<u>None</u>		M.O.
		Date	Result
		ANTI-TYPHOID INOCULATIONS, ETC.	
			M.O.
			M.O.
			M.O.

Enlisted on 3rd day of December 1915 at Toronto, Canada

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>9th Battery</u>			
Transferred to.. ..	<u>C. F.A.</u>			
		<u>766334</u>		

### EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.

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.



Name 725235 Pte. H. Bonham.

M. F. W. 41  
100M-1-18.  
1772-39-889.

*GWR*

Regimental No. 725235

Name and address of next-of-kin

Unit 109 Bn

Date of enlistment

Place of

Married (yes or no) *yes*

Date and place discharged *Rep allce from Apr 1*

Amount of pay assigned monthly \$ *1500 pd ruck*

Reason for discharge

To whom payable *Mrs John Bonham  
CPC 16 Innes Ave Toronto*

Character on discharge

APR 20 1918

Date		PAY		Field Allowance		Other Credits	Total Credits	Voucher		Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days			Rate	Amount					
<i>Feb 20</i>	<i>Apr 17</i>	<i>57</i>	<i>1</i>	<i>57</i>	<i>57</i>	<i>10</i>	<i>57012</i>	<i>9685</i>					<i>244858</i>	<i>D.O. 91. Sub. Mar. 19-Apr. 2. dis D0104 1415 Sep Allce</i>
							<i>8</i>		<i>19977</i>		<i>1415</i>			
							<i>1415</i>		<i>19978</i>	<i>11622</i>				

*Bal clothing Allce \$27<sup>00</sup> paid Jan payroll -  
see new ledger sheet*



POST DISCHARGE PAY OFFICE

13062/260

Three months pay and allowances after discharge.

*[Handwritten signature]*

Name **Bonham, Herbert**  
Surname

Christian Name

1815-H-4

Regimental Number 725235

Rank Pte.

Address (in full) 312 MacRoberts Ave.,

Unit # 2 Cas. Unit.

Toronto,

Original Unit

Ont.

District where paid M.D.2.

Date of Discharge 17-4-18.

*Mrs. J. Bonham*

P. D. P. Filing Number 10-487-2.

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 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		
175 10	8073	17-5-18	58 00	7788	17-6-18	59 10				58 00	117 10
	<del>1st 910499</del>	<del>21-2-19</del>	<del>70 00</del>								
	<del>1st 910500</del>	<del>21-2-19</del>	<del>30 00</del>								
	<del>928a. 2nd 923299</del>	<del>3-3-19</del>	<del>70 00</del>								

Remarks: Advance payment by Casualty Unit # 2.

M. F. W. 127.  
50M-617.  
1779-39-1140.

Dec'n No 13062/260 W. S. G. File No 1815-H-17  
 Award ..... days at \$ 20<sup>00</sup> per day \$  
 S. A. .... months at \$ 30<sup>00</sup> per mo. \$ ..... \$ 500.00  
 Less P. D. P. Credited \$ 175.10  
 \$  
 Less further debit balance \$ .....  
 Net due paid as below 324.90

173 John St.  
 Toronto

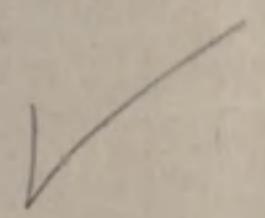
TO SOLDIER TO DEPENDENT						
	Ag. No	Ch No	Amount	To	Ch No	Amount
1	835	10499	20 00	835	10500	30 00
2	928a	23299	20 00	2403	424485	30 00
3	966B	422323	34 90	926A	436415	30 00
4				884c	457865	30 00
5					445713	30 00
6						
	Total		174 90	Total		150 00

21.2.19.  
 3/3/19  
 10.4.19

21.2.19  
 7.4.19  
 19-4-19  
 2-5-19

Mrs J. Bonham  
 293 McRoberts Ave  
 Toronto Ont

GEN'L AUDITOR  
 Posting checked by  
*R. H. ...*  
 Date 25-9-19



CAH

MILITIA AND DEFENCE  
**ASSIGNED PAY**  
 OVERSEAS CONTINGENTS

*Wife*

To Whom Mrs. John Bonham, By Whom Assigned Bonham, Herbert,  
 Address ~~312 McRobert Ave.~~ Regtl. No. 725-235-  
(16 Innes Ave) Toronto, Ont. Rank Pte.  
22-8-17 P.M. Corps 109th Batt. "B" Coy  
 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				

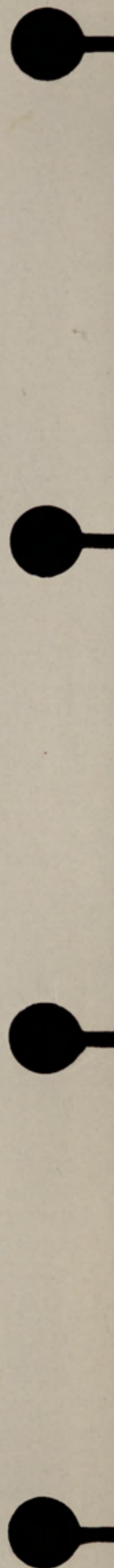


10-10-10

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10-10-10  
10-10-10  
10-10-10





ASSIGNED PAY

Mrs. John Bonham. *Wife*  
OVERSEAS CONTINGENTS  
PAYMENTS.

Name of Soldier Bonham, Herbert.  
*Plt - "B" Coy 109<sup>th</sup> Batt*

Sheet No. 2.

L. L. Job 310.-Req. 6374.

720235-  
\$15.00

Remarks. **AUG 1 1916**

Month.	Year.	Cheque No.	Amt.
April	1916		
May			
June			
July			
Aug.		15386	15
Sept.		15406	15
Oct.		19811	15
Nov.		24949	15
Dec.		32146	15
Jan.	1917	36725	15
Feb.		38496	15
March		45305	15
April		851	15
May		6634	15
June		13439	15
July		20401	15
Aug.		X 26453	15
Sept.		W 35909	15
Oct.		L 47714	15
Nov.			
Dec.			
Jan.	1918		
Feb.			
March			
April			
May			
June			
July			

15 R  
15 E  
15 W

15 Cu

01210

16 Innes Ave, Toronto, Ont  
22-8-17  
Taly

*W.B.*

*W.B.*

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

OVERSEAS CONTINGENTS

Sheet No. 2.

*Mr John Bonham*

*Guardian*  
PAYMENTS.

Name of Soldier

*Bob Bonham Herbert*  
*725235*  
*Plt*

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

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916	J 328	20	20 adj
May		J 4918	40	40 adj
June		A 8592	20	20
July		C 5216	20	20
Aug.		E 12583	20	20
Sept.		<del>F 1793-124 14931</del>	<del>20</del>	<del>72 cancelled by 14931</del>
Oct.		V 21297	12	12
Nov.		G 24742	12	12
Dec.		K 24633	12	12
Jan.	1917	Y 28395	12	12
Feb.		Y 31381	12	12
March		Y 34070	68	68 (W)
April		Y 213	20	20
May		G 3424	20	20 Y 3424 Remailed 16 Imms Toronto 27617-24
June		Z 6374	20	20
July		Y 10117	20	20
Aug.		C 14162	20	R
Sept.		C 17578	20	B
Oct.		Y 22886	20	380 ✓ B
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.				

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

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

# Casualty Form—Active Service.

Unit, Regiment or Corps 123rd Bn. C.E.F., ROYAL GRENADIERS

Regimental No. 766334 Rank Pte Name Dorham Herbert  
C. E. F.

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

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

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

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

(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				



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G.R. Rank Name <sup>N</sup> BOWHAM, Herbert Reg'l No. 725235  
 Unit 109th Bn. If in perm. Corps, What Unit? Married or Single Married  
 Place and Date of Enlistment Lindsay, 10th Feb., 1916. Place of Birth Leamington, Ontario.  
 Name and Address, Next-of-Kin <sup>Mrs John</sup> Alice Elizabeth Bowham, ~~Toronto.~~ 312 McRoberts Ave Toronto, Can. Relationship Wife. Mother

Assigned Pay Monthly \$ Payable to Relationship  
 Separation Allowance \$ Payable to Relationship

N/E. R. B. No. 12395  
 File R. L. *lower*  
 Category *Operated.*

Discharge, Date and Place Reason Character

H. W. & V., Ltd.—7165-16.

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.				
<i>6.</i>		Arrived in England per H. M. T. 2810		31-7-16	
28.11.16	O.C. 109 <sup>th</sup>	S.O.S. on trans to 20 <sup>th</sup> Bn	Witley	28.11.16	P <sup>L</sup> II D.O. 333
11.12.16	20 <sup>th</sup> B <sup>n</sup>	<i>Taken on strength.</i>	Field	29.11.16	" 75
20.4.17	✓	Liverpool Merchants Hoop	Etaples	10.4.17	Ch A484 <i>g/b Leg Ser</i>
30.4.17	✓	2 South Gen Hoop	Bristol	21.4.17	Ch B 329
4.5.17	✓	Liverpool to 16 ORD	Field	20.4.17	P <sup>L</sup> 034 P <sup>L</sup> 054 / <i>CORD</i> <sup>2.5.17</sup>
14.6.17	✓	Can Con Hoop Hillington	Uxbridge	10.6.17	Ch B 362
5.7.17	✓	Can Con Hoop Woodcote	Epsom	29.6.17	Ch B 379
10.9.17		6 ORD. on command 6 C.D.	Landing	5-9-17	P <sup>L</sup> 20 85 <i>CCPTAD 1820/17-9-17</i>
12.9.17		16 ORD. Dis. Can Con Hoop	Epsom	5-9-17	Ch B 15 <i>2030</i>

A.F.B. 103 CHECKED  
 11 Dec 16

*N.J.D.*

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.				
3-11-17	160RD	Can. Hosp. Etchinghill	Lynge	1-11-17	Ch 654. NYD.
22-11-17	166D	ceases att 166D.	Handling	31-10-17	PT# 248 160RD PT# 40 263D/27-11-17.
5-12-17	160RD	Dis. Can Hosp Etchinghill	Lynge.	30-11-17	Ch 681
18-2-18	"	On Comm 166D	Pli. Siding	13-2-18	PT# 44 { 166D PT# 10 43D/14-2-18
18-2-18	"	On Comm 166D Buxton	Pli.	18-2-18	PT# 49 { 166D PT# 10 48D/19-2-18
9-3-18	"	S.O.S. to Canada for disp by A.G.	Pli. Nitely	23- <sup>2</sup> 18	PT# 66

1.3.16

MILITIA AND DEFENCE

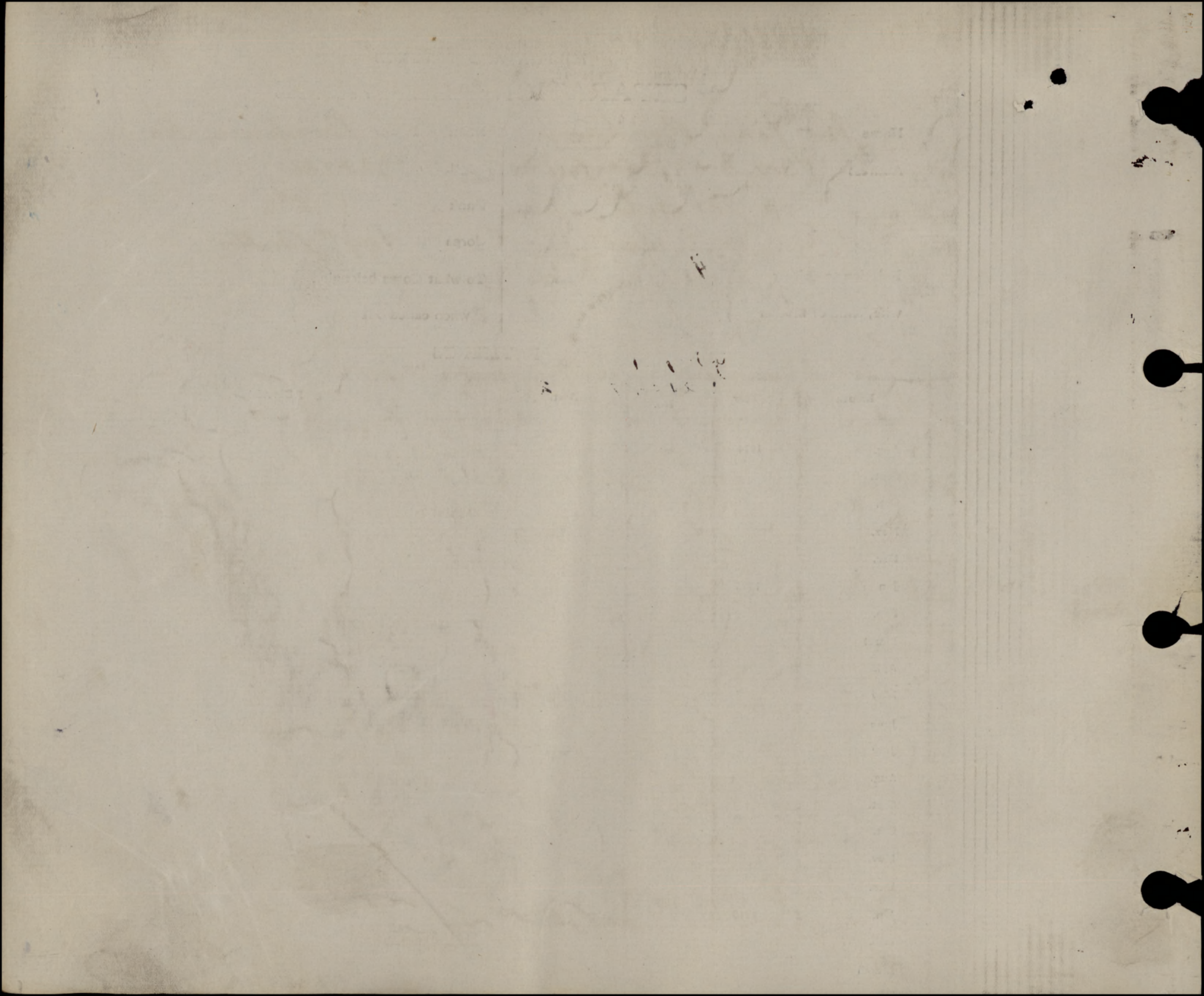
SEPARATION ALLOWANCE

Name Mr John Bonham Name of Soldier Bonham, Herbert.  
 Address 312 Mc Roberts Ave. Regtl. No. 725235  
Toronto Rank Plc  
#16 Innis Ave, Ont. Corps 109<sup>th</sup> Batta<sup>n</sup>  
 Relation to Soldier } Children's To what Corps belonging }  
 wife, child or mother } Guardian 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				

*[Large handwritten signature or scribble across the table columns]*



SEPARATION ALLOWANCE

1-3-16

Name *Mrs John Bonham*, Name of Soldier *Bonham Herbert*  
 Address *16 Innes ave.* Regtl. No. *725235*  
*Toronto, Ont.* Rank *Plt*  
 Relation to Soldier *Childrens* Corps *709th Bu*  
 wife, child or mother *Guardian* 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.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				



1871

1872

1873

1874

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				
					<p><i>Whogan</i> Capt. for Lt.-Col., A. A. G. Canadian Section, G. H. Q. 3rd Echelon, B. E. F.</p>
2-5-17	1st C.C.D.	J. O. S.	Sandling	20-4-17	Pt II DO 54. <i>E.C.R.</i>
17-9-17	1st C.C.D.	Attached from Epsom with effect from 5-9-17	E. SANDLING	17-9-17	<p><i>1st Lt Pratum</i> Capt for Colonel, i/c Records, <i>Com 7</i></p>
22-11-17	1st C.C.D.	Having been in hospital over 21 days Ceases to be attached with effect from 22-10-17	E. SANDLING	22-11-17	<p>Pt II DO 182</p> <p>Pt II DO 248</p> <p><i>Shannon Lt</i> Officer i/c Records, 1st CANADIAN COMMAND DEPOT.</p>
27.11.17	1st C.C.D.	ceases to be att. to 1st C.C.D.	E. Sandling	3/10/17	Pt II DO 263
13.2.18	1st C.C.D.	att. to 1st C.C.D. <del>Buxton</del>	Sandling	13.2.18	Pt II DO 44
18.2.18	do	Ceases to be att 1st C.C.D. & att 1st C.C.D. Buxton	S. P.	18.2.18	<p><i>A. S. Buxton</i> Capt. &amp; Adjt. for O. C. 1st C. O. R. D.</p> <p><i>A. S. Buxton</i> Capt. for O. C. 1st C. O. R. D.</p>

1157

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

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

250M.—1-16.  
H. Q. 1772-35-920.

# Casualty Form—Active Service.

Unit, Regiment or Corps 109th OVERSEAS BATTALION, C. E. F.

Regimental No. 25-235 Rank Private Name Bosham Herbert

Enlisted (a) 10.2.16 Terms of Service (a) 9 of W. Service reckons from (a) 10.2.16

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) Lawyer.

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	

*AW Aseltine* Capt.  
ADJUTANT  
109th Overseas Battalion, C. E. F.

CERTIFIED CORRECT,  
14 DEC. 1916  
CAN. RECORDS, LONDON

28-11-16		Proceeded overseas for service with 20th. Btn.	Witley		
----------	--	--	--------	--	--

27-11-16	Witley	<del>Transf'd to 20th Bn.</del>	<del>Overseas</del>	28-11-16; D.O. 333-28-11-16.	
----------	--------	---------------------------------	---------------------	------------------------------	--

*AW Aseltine* CAPTAIN,  
ADJUTANT,  
109TH BATTALION CAN. INFANTRY.

29/11/16	CB Depot	Arrived taken on strength	20 Bn	29/11/16	Nr Pt. 2. Ord. 75	11/12/16
do	do	Left for Unit	Fia d	1/12/16	NR	
8/12/16	20th Bn	Joined Unit	do	4/12/16	B213	
16-4-17	Liv Merchts	CSW L leg sev. adm Livpl Merchts	slo-4-17	W3034.		
18-4-17	do	Inv(Wdd) & posted to 1st Centl Ont. Regl Dep. Shorncliffe per HS HMT Antrim	20-4-17	W3083(8896) Pt 2 34D/4-5-17		

(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.]



1151

Surname **Bonham** Christian Name or Names **H.** Reg. No. **725235**  
 Rank **Pk** Unit **20 Batt. A.C.O.** Co. Troop Batty.  
 Hospital Date of Admission

Transferred **Liverpool Merchants Mobile Hosp. Staples 10.4.17**  
**2nd South Gen. Bristol Hosp. 21.4.17.**  
**Upbridge Cow Hosp. 10.6.17**  
**Can Cow. Woodcote Park Hosp. 29.6.17**

Diagnosis  
 (1) Later Diagnosis (if changed) **L.S.W. Lt leg sev. Ho**  
 (2) **V.D.S. Ho**  
 (3)

Additional Diagnosis: if more than one state present

DISPOSITION

Date  
**Dis 5.9.17**  
**- 30-11-17**

**6.2.20.4.17 9489**  
**30.4.17 B. 329.**  
**14.6.17 B 362**  
**5-7-17 B 379**  
**24.9.17 B 18**  
**5.11.17 654<sup>I</sup>**  
**6.12.17 681-2**

REMARKS

A.M.D. 2 DEPT.

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

P.T.O.

1151

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1. *Can Mil Ettringhill*

*1.11.17*

2.

3.

4.

5.

6.

7.

B  
V

com.  
Number 725-235-

Rank P6.

Surname BONHAM.

Christian Name Herbert.

Units 20th. Bn. Can. Inf. Theatre of War France.

Date of Service 28-11-16.

Remarks

Latest Address ~~312~~ 385 Mc Roberts Ave.  
Toronto Ont.

Roll No. Page 20608

DESP  
NOV 30 1922  
REGN. NO. 11  
4444

649-B-14630.

CARD NO. ✓

SURNAME. *Bonham*

CHRISTIAN NAMES *Herbert*

REGL. NO. *725235* RANK *Pte.*

UNIT *109th.*

*Batt.*

FORMER CORPS *Nil.*

*505 dis. 17-4-18 auth Pt II  
104 of 14-4-18 #2 Cor. Unit*

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL *Bonham, Mrs. Alice Elizabeth*

RELATIONSHIP TO SOLDIER *Wife*

ADDRESS *Toronto, Ont.*

*also notify: Ida Bonham (mother) 10 2<sup>nd</sup> Street Ave,  
(auth Letter 5-5-17) Toronto Ont*

COUNTRY OF BIRTH *Canada, Leamington, Ont.*

DATE *Oct. 15<sup>th</sup>. 1891.*

PLACE OF ATTESTATION *Lindsay*

DATE *Feb. 11<sup>th</sup>. 1916.*

*Sailed from Halifax 23/7/16<sup>488</sup> per S.S. "Olympic"  
R/c 17-3-18 6.2*

MARRIED

*Yes*

SINGLE

WIDOWER

TRADE OR CALLING

*Farmer*

RELIGION

*Methodist*

DESCRIPTION.

APPARENT AGE

*24* YEARS

*8* MONTHS

HEIGHT

*5* FEET

*5* INCHES

CHEST MEASUREMENT

*36* INCHES

EXPANSION

*3* INCHES

COMPLEXION

*Fair*

EYES

*Brown*

HAIR

*Lt. Brown*

DISTINGUISHING MARKS

*Scar on right knee. Scar on under side of right elbow.*

MEDICAL EXAMINATION.

PLACE

*Lindsay*

DATE

*Feb. 11<sup>th</sup> 1916.*

No. 725235. RANK *Pte*

NAME *Bonham. H.*

T. O. S. *10-2-16.*

UNIT *109th Battalion*

*D.O. 71. 11-2-16*

M. D. *13*

PAID FROM	PAID TO	SIG. CR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1916 Feb. 10</i>	<i>1916. Feb. 29</i>	<i>✓</i>	<i>28 days detention.</i>	<i>D.O. 204.</i>
<i>Mar.</i>		<i>✓</i>		
<i>April.</i>		<i>✓</i>		
<i>May.</i>		<i>✓</i>		
<i>June.</i>		<i>✓</i>		
<i>July.</i>		<i>✓</i>		

UNIT SAILED  
JUL 23 1916





SURNAME.

Bonham.

CHRISTIAN NAMES

Herbert

REGL. No.

766334

RANK

Pte.

UNIT

123<sup>rd</sup>

Batt.

FORMER CORPS

Nil.

S. O. S. Dis ✓  
CARD NO.  
8/2/16-2  
FOLL.

NEXT OF KIN.

NAMES IN FULL

Bonham, Mrs Alice E.

RELATIONSHIP TO SOLDIER

Wife

ADDRESS

176 1/2 Sackville St., Toronto,  
Ont.

CHANGE OF ADDRESS

COUNTRY OF BIRTH

Canada, Essex Co, Ont.

DATE

Oct. 15<sup>th</sup> 1891.

PLACE OF ATTESTATION

Toronto, Ont.

DATE

Dec. 3<sup>rd</sup> 1915.

MARRIED

*Yes.*

SINGLE

WIDOWER

TRADE OR CALLING

*Farmer.*

RELIGION

*Methodist.*

DESCRIPTION.

APPARENT AGE

*24*

YEARS

*2*

MONTHS

HEIGHT

*5*

FEET

*5 1/4*

INCHES

CHEST MEASUREMENT

*35 1/2*

INCHES

EXPANSION

*1 1/2*

INCHES

COMPLEXION

*Medium.*

EYES

*Brown.*

HAIR

*Brown.*

DISTINGUISHING MARKS

*Scar on left knee. Scar on back of right hand. Scar on right elbow.*

MEDICAL EXAMINATION.

PLACE

*Toronto, Ont.*

DATE

*Dec. 3<sup>rd</sup>, 1915.*

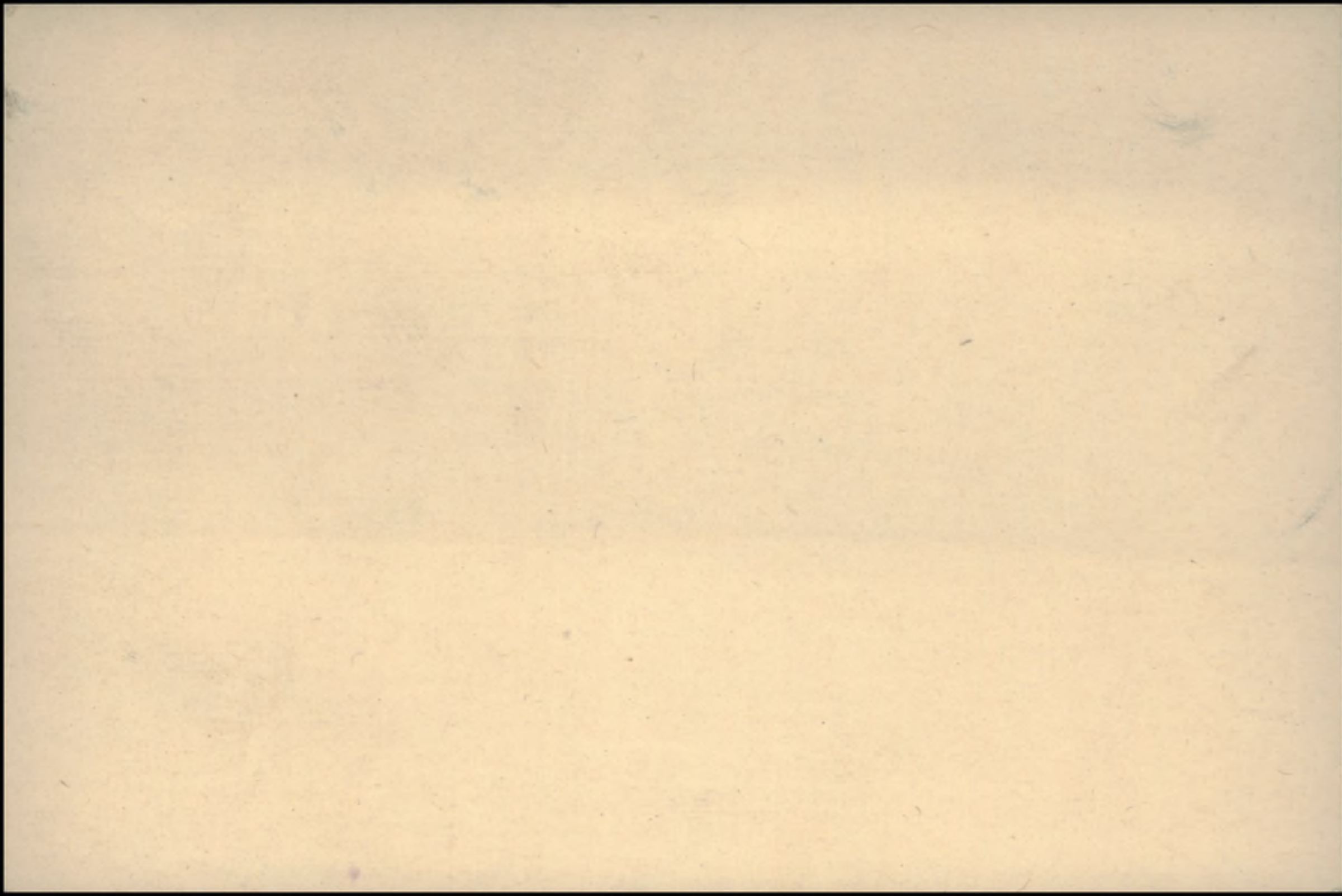
No. 766334 RANK *Olt.*

NAME *Bonham H.*

*T.O.S. Transfd from Base Bu UNIT 123<sup>rd</sup> Battalion  
Announced Toronto 8-12-15  
DO 7 of 10-12-15*

M. D. *2*

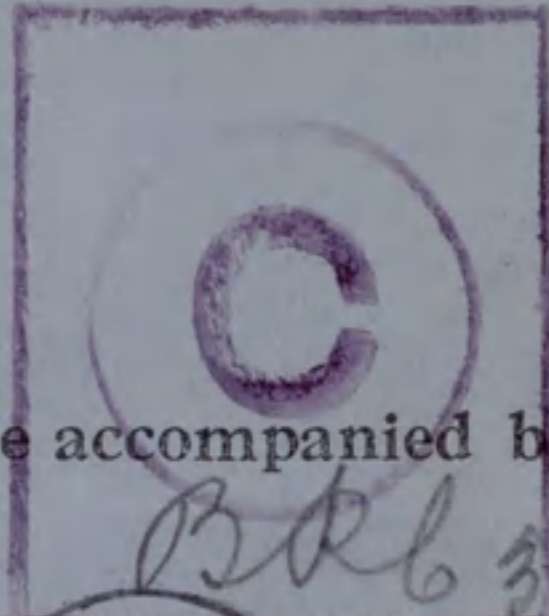
PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1915- Dec 10 1916</i>	<i>1915- Dec 31 1916</i>	<i>✓</i>		
<i>Jan 1</i>	<i>Jan 20</i>	<i>✓</i>		
<i>Jan 21</i>	<i>Jan 31</i>	<i>✓</i>		
<i>Feb 1</i>	<i>Feb 8</i>	<i>✓</i>	<i>Dischd 8-2-16 Not likely to become an efficient soldier</i>	<i>DO 25 of 8-2-16</i>
				<b>UNIT SAILED</b> <b>AUG 7 1916</b>
			<i>W.C. Closed by payment</i>	



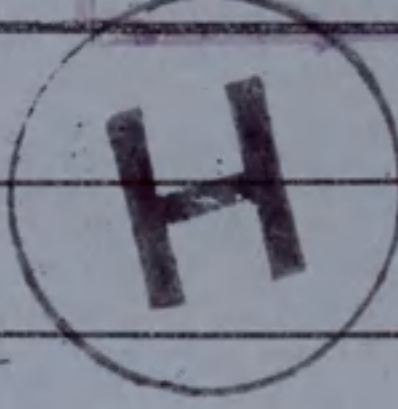
This space to be for numbers.

# Proceedings on Discharge.

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



BBB 33052



No.	766334.
Rank	Private
Name	Bonham, Herbert.
<small>NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.</small>	
Corps ( <del>Squadron, Battery or Company</del> )	123rd Bn. C.E.F., ROYAL GRENADIERS
Date of Discharge	February 8th. 1916.
Place of Discharge	TORONTO

### 1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age	24 years 2 months.	Descriptive Marks Scar on left knee Scar on back of right hand. Scar on right elbow.
Height	5' 5 1/4 inches.	
Complexion	Medium	
Eyes	Brown	
Hair	Brown	
Trade	Farmer	
Intended place of residence <small>(To be given as fully as practicable.)</small>	176 1/2 Sackville St. Toronto Canada	

2. The above-named man is discharged in consequence of "Not likely to become an efficient Soldier" Camp Orders. February 8/1916

N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.

To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.

3. Conduct and character while in the service have been, according to the records, etc.

Bad.

*W. H. [Signature]* Lieut Col.  
O.C. 123rd Bn. C.E.F.  
Royal Grenadiers

N. B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldier and the Officer Commanding his Squadron, Battery or Company:

4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)

M. F. B. 218.

15m.—10-15.  
H. Q. 1772-39-113.

(OVER)

k.e.  
19.12.19  
com.

Carded  
23-9-16  
BT

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

*Nil*

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

6. Medals and Decorations.....

*Nil*

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) **TORONTO**.....

*G. F. Lumsden*.....

(Date) *Feb 8/16*.....

Commanding *Base Co.*.....

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) **TORONTO** *H. Bohannon*..... (Signature of Soldier.)

(Date) *Feb 8/16* *G. F. Lumsden*..... (Signature of Witness.)

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

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

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

..... (Signature of Soldier.)

10. Statement of Service.

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

Total.....years.....days.

11. Confirmation of Discharge.

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

(Place) **TORONTO**.....

(Signature) *M. B. King*..... Lieut. Col. ....

(Date) *Feb 8/16*.....

*O.C. 123rd Bn. C.E.F.*  
*Royal Grenadiers*

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.)

Herbert Borham

20  
23-9-16

## List of Discharge Documents.

<p>Reg. Conduct Sheet, / Militia form B. 263.</p> <p>Squadron } Battery } Conduct Sheet, / " B. 263a. Company }</p>	<p>Attestation Paper, 2 Militia Form B. 235.</p> <p>Proceedings on Discharge / " B. 218.</p>
<p>Copies of Convictions, by C. P. in MS.</p> <p>Med. Hist. Sheet, 2 Militia Form B. 313</p> <p>Medical Report for Invalid* " B. 227.</p> <p>Statement of Man's Account on Transfer and Last Pay Certificate, " / D. 877.</p> <p>*Only if discharged "Medically unfit."</p>	<p>In the case of recruits who are rejected on final approval, the discharge documents will consist of</p> <p>(a) Proceedings on Discharge.</p> <p>(b) Attestation.</p> <p>(c) Medical History Sheet (in the event of such having been prepared.)</p>

*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.*



Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

*124 B5  
MER*

*1-3-16*

# Separation and Assigned Pay Branch

*Aug 1/16*

OVERSEAS CONTINGENTS

### RATE OF SEPARATION ALLOWANCE

<i>20</i>	<i>1/12/17</i>		
	<i>25</i>		

*P.C. 3257.*

### RATE OF ASSIGNMENT

<i>15</i>			
-----------	--	--	--

### PARTICULARS OF SEPARATION ALLOWANCE

No. *225235*

Rank *Pte.* Promoted Reverted Discharge

Soldier's Name *Herbert Bonham*

Battalion *109th Batta "B" Co.*

Beneficiary *Mrs. John Bonham*

Relationship *Mother.*

Address *Oct 31/17*

### PARTICULARS OF ASSIGNMENT *(Mother)*

Name *Mrs. John Bonham*

Address *16 Innis Ave, Toronto Ont.*

Change of Address

1

2

3

4

*1815-76-12*

Date	Cheque No.	Amount S/A	Amount A/P	Total
<i>Nov. '17</i>	<i>B 56887</i>	<i>20</i>	<i>15</i>	<i>35</i>
<i>Dec</i>	<i>B 61221</i>	<i>20</i>	<i>15</i>	<i>35</i>
<i>1918 Jan</i>	<i>B 65656</i>	<i>30</i>	<i>15</i>	<i>45</i>
<i>Feb.</i>	<i>L 92458</i>	<i>25</i>	<i>15</i>	<i>40</i>
<i>Mar</i>	<i>A 99732</i>	<i>25</i>	<i>15</i>	<i>40</i>

**REMARKS**

*These two ac's have been consolidated per file 1815-76-12 20/8/17. Ref'd by M.R.O. 2. B issued 22-3-18*

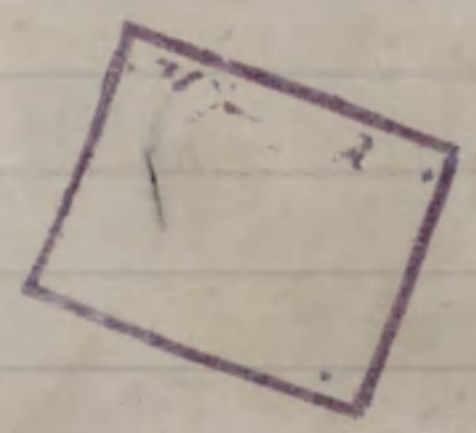
*A/c Closed 31-3-18*

*\$ 300.00 Ret'd per A.S. Munroe*

*S.A. Date 20-3-18 F.X. 22-3-18 to M.D. 2*

*\$ 520.00 Clerk G. E. Lundy*

*Closed*





**MEDICAL CASE SHEET.\***

No. in Admission and Discharge Book.	Regimental No. 725-235	Rank. Pt	Surname. Bohann	Christian Name. H.
Year 1917	Unit. 20 <sup>th</sup> Bata		Age. 29	Service. 19/12
Station and Date. <i>Gen. Conv Hosp Usbridge</i>	Disease <i>Glw. Left Leg.</i>			
	<i>S.S.W. of the left leg. left leg muscles contracted. He has to walk on the anterior part of his left foot. Wound healing and improving.</i>			
	<i>Rec Lt class D1 massage of leg.</i>			
<i>18/6/17</i>	<i>Improving</i>			
<i>27/6/17</i>	<i>Transf to Epson</i>			

*18 Bell Capt.*

*18 Bell Capt.*

Station  
and Date.

*Crew Driver*

### Casualty Form—Active Service.

Regiment or Corps \_\_\_\_\_  
 Regimental No. 725-235 Pte Rank Pte Name Bonham Herbert  
 Enlisted (a) \_\_\_\_\_ Terms of Service (a) \_\_\_\_\_ Service reckons from (a) \_\_\_\_\_  
 Date of promotion to present rank } \_\_\_\_\_ Date of appointment to lance rank } \_\_\_\_\_ Numerical position on roll of N.C.Os. } \_\_\_\_\_  
 Extended \_\_\_\_\_ Re-engaged \_\_\_\_\_ Qualification (b) \_\_\_\_\_

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
19 FEB 1918	TAKEN ON STRENGTH C.D.D, BUXTON Pt.	11 ORDER No.			<i>Lock L. J.</i> Commanding Canadian Discharge Depot. Lieut.-Col.
23 FEB 1918	EMBARKED FOR CANADA FROM LIVERPOOL				<i>Lock L. J.</i> Commanding Canadian Discharge Depot. Lieut.-Col.
	T.O. S. #2 Casualty Unit Toronto with effect from 19-3-18 Pt.2.91.				
	Dis. #2 Cas. Unit, Toronto, Ont. April 17, 1918 Part 11, #104				
					<i>H. Beumer</i> Lieutenant for O.C. #2 Cas. Unit.

(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				

# List of Discharge Documents.

Reg. Conduct Sheet, Militia form B. 263.	Attestation Paper, Militia Form B. 235.
Squadron } Battery } Company } Conduct Sheet, " B. 263a.	Proceedings on Discharge " B. 218.
Copies of Convictions, by C. P. in MS.	<p>In the case of recruits who are rejected on final approval, the discharge documents will consist of</p> <p>(a) Proceedings on Discharge.</p> <p>(b) Attestation.</p> <p>(c) Medical History Sheet (in the event of such having been prepared.)</p>
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. 725235	
Rank	Pte.
Name BONHAM, Herbert	
<small>NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.</small>	
Corps (Squadron, Battery or Company) #2 Cas. (119th Bn) (20 Bn)	
Date of Discharge April 17, 1918	
Place of Discharge Toronto, Ont.	
1. DESCRIPTION AT THE TIME OF DISCHARGE.	
Age... 31..... years..... 6mos. months.	Descriptive Marks
Height..... 5..... feet..... 5..... inches.	Vacc. 1. Lwft Arm
Complexion Fair	Scar Left Calf
Eyes Brown	Scar Right Knee
Hair Lt. Brown	Scar Right Elbow
Trade Engineer	
Intended place of residence } 312 McRoberts Ave. Toronto	
(To be given as fully as practicable.)	
2. The above-named man is discharged in consequence of	
PHYSICAL UNFITNESS.	
<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 HGB</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.)	
Engineer.	

M. F. B. 218.

100m.—6-16.  
H. Q. 1772-30-115.

(OVER)

79406969

1151-6963-3-3-3  
BPC 33052  
H/W

*K.E.  
1912/19  
com.*

*W S Geomp  
6/2/19 ER*

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

Nil

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

6. Medals and Decorations.....

Nil

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).....Toronto, Ont.....

(Date).....April 17, 1918.....

Commanding *H. Beumer* Lieut.  
For O. C. Gasuldas, C. E. F., M. D. No. 2

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).....Toronto, Ont. *H. Bonham* (Signature of Soldier.)

(Date).....April 17, 1918 *Mohor* (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)..2 years. 66 days.

Total..2 years. 66 days.

11. Confirmation of Discharge.

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

(Place).....Toronto, Ont.....

(Date).....April 17, 1918.....

(Signature) *H. Beumer* Lieut.  
For O. C. Gasuldas, C. E. F., M. D. No. 2

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.)



OPINION OF THE MEDICAL BOARD

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

We concur.

19. Is the invalid fit for

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

20. It is certified that the invalid

(a) Does require treatment. (Give the nature of the condition and of the treatment required and its probable duration.)

- (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.)

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

That he be placed in Cat. "E" and be discharged as Physically unfit.

Before signing the President of the Medical Board will read the statement signed by the invalid and differing opinions regarding Sections 7, 8, 9 and 10, as recorded in Section 18, to the invalid and if no change is indicated, will initial the statement. If, as a result of differing opinions regarding Sections 7, 8, 9 and 10 only, recorded in Section 18, the invalid is dissatisfied with the statement previously made, remarks of the Medical Board will be added here.

PLACE	Ravina Barracks. West Toronto, Ont.	Sgd.	President.
DATE	April 6th, 1918	Sgd.	Members

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 invalid to accept treatment appear to be unreasonable, or should he decline to sign this statement the Board of medical officers should so state.

PLACE	.....	Sgd.	President
DATE	.....	Sgd.	Members

APPROVED BY ..... APPROVED BY .....  
 Sgd. Assistant Director of Medical Services. Director-General of Medical Services.  
 DATE 12.4.18 DATE

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

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

- In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" issued by the B.P.C. and instructions issued by Militia H.Q., Ottawa, will be carefully followed.
- The Medical Officer in charge of the case is responsible for the proper completion of Sections 1 to 17 of this Form and will obtain the signature of the invalid to the "Statement," page 3. The President of the Board of Medical Officers is responsible for the proper completion of sections reserved for recording the "Opinion of the Medical Board."
- In answering the questions, Medical Officers will carefully obtain and record the invalid's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the invalid concerned, from witnesses, or from documents, Regimental or otherwise.
- Special care is required in answering question 9. Read the questions carefully. All questions must be answered.
- If space provided under any section is insufficient add another sheet. Such sheets must be initialled by the Medical Board.
- A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board."
- Under no circumstances may information other than that in sections 7, 8, 9 and 10 be communicated to the invalid, directly or indirectly.
- The nomenclature of diseases must be followed, if possible, as described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London (1915), by Messrs. Harrison & Sons.

Ravina Bks. Toronto Apr. 2/18

STATION..... DATE.....

1. 1 (a) Unit #2 Cas. (b) Regimental No. 725235 (c) Rank Pte.  
 (d) Surname BONHAM (e) Christian name Herbert.  
 (f) Home address 312 McRoberts Ave., Toronto  
 (g) Next of Kin..... (h) Relationship.....  
 (i) Address of Next of Kin.....

2. Age last birthday 31 Date of birth Oct. 15. 1886  
 Lindsay Feb. 11. 1916

3. Enlistment, or Appointment (if an Officer) (a) Place..... (b) Date.....

4. Personal description:  
 (a) Height 5' 5" (b) Weight 145 (c) Complexion Fair  
(stripped)  
 (d) Colour of hair L. Brown (e) Colour of eyes Bfown (f) Identification marks, Scars, etc.  
 Vacc. 1 on left arm.

5. Former trade or occupation Engineer.

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).	Years	Days
	2	21

	PERIODS	
	From	To
Canada	109 th Bn. Feb. 11/16	Nov. 28/17
	20th Bn. Nov. 28/17	Mar. 19/18
England	#2 Cas. Mar. 19/18	To date.
France or other theatres of War	Has he been overseas?.....Yes.	

7. Original disease, or injury 1. Shortness of breath on exertion 2. Limitation movement left leg.

(a) Date of origin 1. Apr. /17 a. Apr. 8/17 Place of origin 1. 2. France.  
 (c) Cause 1. D.A.H. 2. GSW left leg.

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

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

Subjective:- Short of breath on exertion such as walking up hill or stairs. Pain in left side of chest after walking. Palpitation on walking 50 or 100 yds.

Objective:- Maximum apical impulse 6th interspace, 1/2" outside nipple line. Left border of heart 1/2" outside nipple line in 6th interspace. P. 60R. 2. Pulse slow and irregular. No adventitious sounds in heart. After touching toes 6 times. R. 30. P. 84. In 2 mins. R. 24. P. 64. B.P. Apparent normal. Breath sounds in left axilla harsh. No rales. Otherwise normal. Measurement 34-36". Expansion 2" equal. Slight occasional cough. Anaemic in appearance.

2. Subjective. Limp when walking. Cannot put heel to ground without pain and pulling on scar. Leg weak after walking 50 yds. Walks with cane. W. Swelling around ankle after walking. Acnes in wet weather. Feels normal at times.

Objective:- Large adherent scar middle 3rd left calf posteriorly. Some loss of muscle tissue. Walks with heel raised. Some contraction of calf muscle. Tendons achilles tense. Foot cannot be flexed at ankle. Causes severe pain.

Measurements of legs around ankle. S. 7 1/2" L. 7 1/2" around calf. R. 11" L. 10 1/2" Just below knee. R. 11 1/2" L. 11 1/2" Slight amount of wasting. No limitation of movement at knees or hips. Reflexes normal. Other systems apparently normal.

Incapacity due to limitation of movement left leg and impairment function of

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

- Nervous System..... Cardio-Vascular System..... Genito-Urinary System..... (If pulse rate is abnormal, B. P. will be taken.) (Albumen and Sugar will be excluded.)
Special Senses..... Respiratory System..... Integumentary System.....
Disturbances of Mentality..... Digestive System..... Muscular System.....
Osseous and Joint Systems..... Any other general condition.....

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

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

2" scar left calf. Small scar right knee. Small scar right elbow. 1" scar left arm M.R. states generalised syphilis in Nov. 1917 Wasserman Neg.

(c) (Here give a description of wounds, scars and deformities. No evidence now of disease. Reflexes normal. Pupils normal.)

11.—(a) Did the disabling condition have its origin before enlistment? 1. & 2. on duty.

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

12. Was the disability caused, or aggravated; (a) by intemperance, or improper conduct; or (b) by unreasonable refusal to accept treatment? 1. and 2. no.

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

13. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? 1. six months. 2. Permanent.

14. Treatment (Case reports, general or special, should be secured and attached where possible.) Bristol. 21/4/17 8/6/17 Epsom 18/6/17- 5/9/17 Uxbridge 8/6/17 - 28/6/17

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit? 1. 2. No.

16. Can the former trade or occupation be resumed? No. (If not, briefly state why)

17. Recommendations. That he be placed in Cat. E.

W.B. Seaton Capt. (Sgd.) Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

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

I, the undersigned Herbert Bonham. have heard the description of my disability and present condition read, and am satisfied (or not satisfied) with it. (If dissatisfied, statement should follow.)

I complain in addition of

Sgd. Herbert Bonham. Rank. Signature of invalid examined.

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 present for earning a full livelihood in the general market for untrained labour?

15. THE PENSIONABLE DISABILITY.—see Part I (3). Application 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).

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

18. Remarks.

19. Recommendation:—(a) Fit for duty? (b) Fit for base duty? (c) Invalid to Canada? (d) Discharge from service as permanently unfit?

Dated at ... this ... day of ... 191...

Signature of the President.

Signatures of the Board.

Reserved for M.H.C.

Regt. No. 725235 Rank PTE Surname BONHAM Christian Name HERBERT

Unit or Corps—(a) Overseas from United Kingdom, 20th BATTN. (b) In United Kingdom 1st CORPS

Born at—Town LEAMINGTON County or Province ONT Country CANADA

Date of Birth—Day 15 Month OCT Year 1887 Age 31 yrs 9 months

Joined at LINCOLN ONT Date FEB 10/16

Former Trade or Occupation FARMER

Permanent marks or peculiarities that will serve for future identification:—

DEPRESSED SCAR HATCHET SHAPED LEFT EAR

Height—feet 5 inches 5 Colour of eyes BROWN

Signature of Soldier (for identification purposes) Herbert Bonham

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.

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), Disabilities Group (b), Disabilities Group (c). Handwritten entries include WEAKNESS AND DEFORMITY and LEFT LEG.

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. Handwritten entry: G. S. W., FRANCE, APRIL 8/17.

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? (ii) As to Group (b) above? (iii) As to Group (c) above?

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

5. If a cause of disability was an injury received on Active Service, was it received—
- (i.) While on duty? Yes
  - (ii.) While off duty? No
  - (iii.) Was a Court of Inquiry held? No
  - (iv.) Where? France
  - (v.) When? April 8/17
  - (vi.) Opinion of the Court? not applicable

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.)

Entered hospital, Oct. 20/16, Arr. in Camp, Aug. 1916. To France Nov. 1916. Carried on full duty with 20th Bn. till wounded April 8/17 at King Ridge G. S. W. Left Camp for hospital and 1st C. O. R. H. till end of Oct. 1917. Then to 1st C. O. R. H. On 31-10-17 to Canadian Hospital Fyninge and discharged to unit as an out-patient generalized Syphilis. Leg has undergone some wasting and this has been followed by contracture and tendency to pes equinus.

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

At present time the man's general appearance is fairly good. He complains of nothing but weakness and limited movements of leg and foot. There is apparent shortening of the right leg. There is a depressed scar in the middle of calf left, but no tenderness around it. The whole leg is smaller than the left, takes more pressure on walking. His erect posture is to walk on the toes with left heel elevated, and this is becoming permanent. Other symptoms are none.

8. OPERATION. (i.) Was one performed? Yes.
- (ii.) If so, state what. removal of Stropuel
- (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? Yes, with 6 months
  - (c) Invalid to Canada? No
  - (d) Discharge from the Service as permanently unfit? No

Date of Report: 9-2-18 Station: East Sandling

Signed: H. K. Tall Lieutenant  
 Officer in medical charge of case.

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

Dated at: East Sandling Station, on: 9/2/18

\* Delete if inapplicable.

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: Caused? No Aggravated? No
  - (b) Misconduct of the Soldier: Caused? No Aggravated? No
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? (Estimate at none, 10%, 20%, 30%, 40%, 50%, 60%, 70%, 80%, 90%, or 100%.) not applicable
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. What part of the entire disability estimated next above in (14) is due to causes arising during Active Service? (Estimate at none, 1/2, 2/3, 3/4, or all.) not applicable
16. Permanency of the Pensionable Disability estimated next above in (15).
- (i.) Is it permanent? not applicable
  - (ii.) If not permanent, what is its probable minimum duration (in months)? not applicable
17. If an operation was advised and declined, do you consider the refusal to have been unreasonable? not applicable

18. Remarks. General condition is good. Man has been forming up and leg. Condition of scar is good and man should soon be fit for higher category

19. Recommendation:—
- (a) Fit for duty? No
  - (b) Fit for base duty? Yes, with 6 months
  - (c) Invalid to Canada? No
  - (d) Discharge from service as permanently unfit? No

Date of Board: 11 Feb 1918

Station: East Sandling

Approved: J. R. Padaly A.D.M.S.

Dated at: East Sandling Station, on: 12 FEB 1918

Classification for the Military Hospitals Commission: not applicable

Signatures of the Board: C. H. Dickson D. C. P. President  
John W. Hignell Capt.

**SYPHILIS CASE-SHEET.**

Regtl. No. *725235* Rank and Name *Bonham Pl. H.* Corps *1st C.C.D.*  
 Placed on Syphilis Register at *CANADIAN HOSPITAL,* on *31-10-17* No. in Register  
*ETCHINGHILL, LYMINGE.* Disease contracted at Primary sore appeared on (date) *Oct. 29<sup>th</sup> 1917*

**CONDITION WHEN PLACED ON REGISTER.**

Primary sore—character and site *papulo-ulcerative (2) on prepuce. slightly indurated and inflamed base dirty.*  
 Lymphatic glands *+ Inguinal*  
 Skin (nature and distribution of rash) *Negative*  
 Mucous membranes *Negative*  
 Other symptoms *Had chancres 3 years ago.*

Examination of exudate from sore—Spirochaeta Pallida (present or absent) *present*  
 Examination of blood serum—Method employed (original or modification) *original*  
 Wassermann reaction (Result (positive or negative)) *Positive +*

Station *CANADIAN HOSPITAL,* Date *31-10-17* Signature of M.O. *J.P. [Signature]*  
*ETCHINGHILL, LYMINGE.*

Struck off Syphilis Register at \_\_\_\_\_ on \_\_\_\_\_  
 Cause of being struck off Register { (a) Recovered }  
 { (b) Transferred to Army Reserve }  
 { (c) Discharged from Army }  
 Station \_\_\_\_\_ Date \_\_\_\_\_ Signature of M.O. \_\_\_\_\_

Station	Date	Symptoms and progress (Date of admission to hospital, and date of discharge from hospital, to be entered in red ink.)	Weight clothed, without boots—lbs.	Urine Normal (N.) Albumen (Alb.)	Wasser- mann Reaction Method (Original (O.) Modification (M.)) Result (Positive (+) Negative (-))	Arsenical Intravenous Injection. Dose in grammes Salvarsan Neo-Salvarsan	Mercurial Intramuscular injection. Dose of Metallic Mercury in grains	Other Methods	Signature of M.O. (Each M.O. will sign his name in full on the first occasion; subsequent entries may be initialled)

N.B.—On completion of a course of treatment a red line to be drawn across the page, and the date when the next blood test is due to be entered in red ink below the line, e.g., "Blood test due 15.5.14."  
The date and result of the blood test to be entered; and if negative, the date on which the next blood test is due to be also entered.

CANADIAN HOSPITAL  
ETCHINGHILL LYNNINGE.

Station	Date	Symptoms and progress (Date of admission to hospital, and date of discharge from hospital, to be entered in red ink.)	Weight clothed, without boots—lbs.	Urine		Wasser- mann Reaction		Treatment			Signature of M.O.  (Each M.O. will sign his name in full on the first occasion; subsequent entries may be initialled)
				Normal (N.) Albumen (Alb.)	Method (Original (O.) Modification (M.)	Result (Positive (+) Negative (-)	Arsenical	Mercurial	Other Methods		
	31-10-17	Admitted to Hospital Full Course Treatment (W.O.)									
	1-11-17			N				.45			J.P. Glenn
	2-11-17										m
	5-11-17			N				.45			m
	9-11-17			N						.4	m
	16-11-17										m
	23-11-17			N				.6			m
	3-12-17			N				.75			m
	14-12-17			N				.75			m
	21-12-17			N				.75			m
	27-12-17	Wassermann Negative									m

*Handwritten notes in red ink:*  
Intravenous Injection. Dose in grammes  
Neo-Salvarsan  
Intramuscular injection. Dose of Metallic Mercury in grains.  
Injections or Oral (Preparation and dose)  
Early

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

REGT. No. *425325* RANK *Pte* NAME (IN FULL) *BONHAM. H*

M. OR S. *M*

ORIGINAL UNIT C. E. F. <i>109<sup>th</sup> Bn.</i>	IF IN P. F. WHAT UNIT?	(BLOCK LETTERS, SURNAME FIRST)
PLACE OF ATTESTATION	TRANSFERRED TO	DATE AUTHORITY
DATE OF ATTESTATION	TRANSFERRED TO	DATE AUTHORITY
ASSIGNED PAY, \$	DATE EFFECTIVE	
PAYABLE TO <i>15<sup>00</sup> paid March</i>	RELATIONSHIP	ANY CHANGE IN ASSIGNEE OR ADDRESS
ADDRESS <i>Mr John Bonham,</i>		
STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE	PLACE	DATE REASON AUTHORITY
DISCHARGED		<i>D.O.#14</i>

MONTH	PAY AND F. A.		OTHER CREDITS		TOTAL CREDITS		ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY	REGI-MENTAL CHARGES	OTHER CHARGES	TOTAL DEBITS	BALANCE		PARTICULARS OR REMARKS
	NO. OF DAYS	RATE	AMOUNT		CREDITS		COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2	COL. NO. 3					DEBIT	CREDIT	
			\$	C.	\$	C.	\$	C.	\$	C.	\$	C.							
<i>Jan</i>																			<i>24<sup>00</sup> Bal bldk. allow. adjusted</i>
																			<i>Dec. D.O.#14</i>

Balance from previous account







