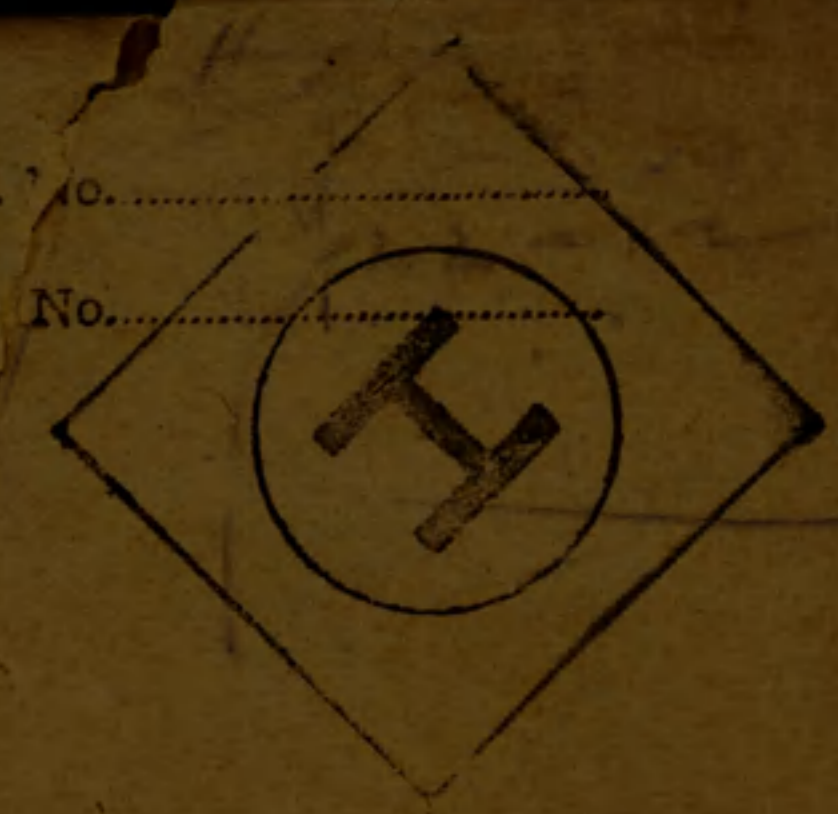


26-11-10
C.P.

DISCHARGE DOCUMENTS

R. O. No.

H. Q. No.



28320

Name BOOTH, WILLIAM

Regt. No. 72610 / Rank PTE

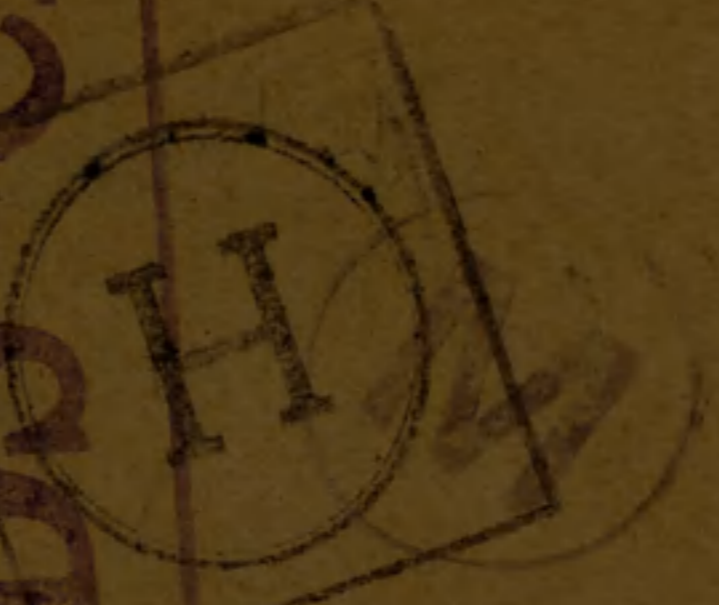
Corps 109TH BN:

MED: UNFIT

R.O. 1080

- Proceedings of Court of Inquiry or on men reported Missing on Active Service.....
- Attestation Papers..... 1
- Declaration of change of name.....
- Authority for special enlistments.....
- Documents of re-enlisted men.....
- Regimental Conduct Sheet.....
- Compulsory Stoppages.....
- Casualty Forms..... 2
- Proceedings on discharge..... 2
- Corps History Sheet.....
- Date and No. of Deposit Receipt for Purchase Money and Amount.....
- Parchment Certificate..... 39A-1
- Medical Report for Invalids..... 2
- 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..... 1

20
PUBLIC ARCHIVE
RECORDS



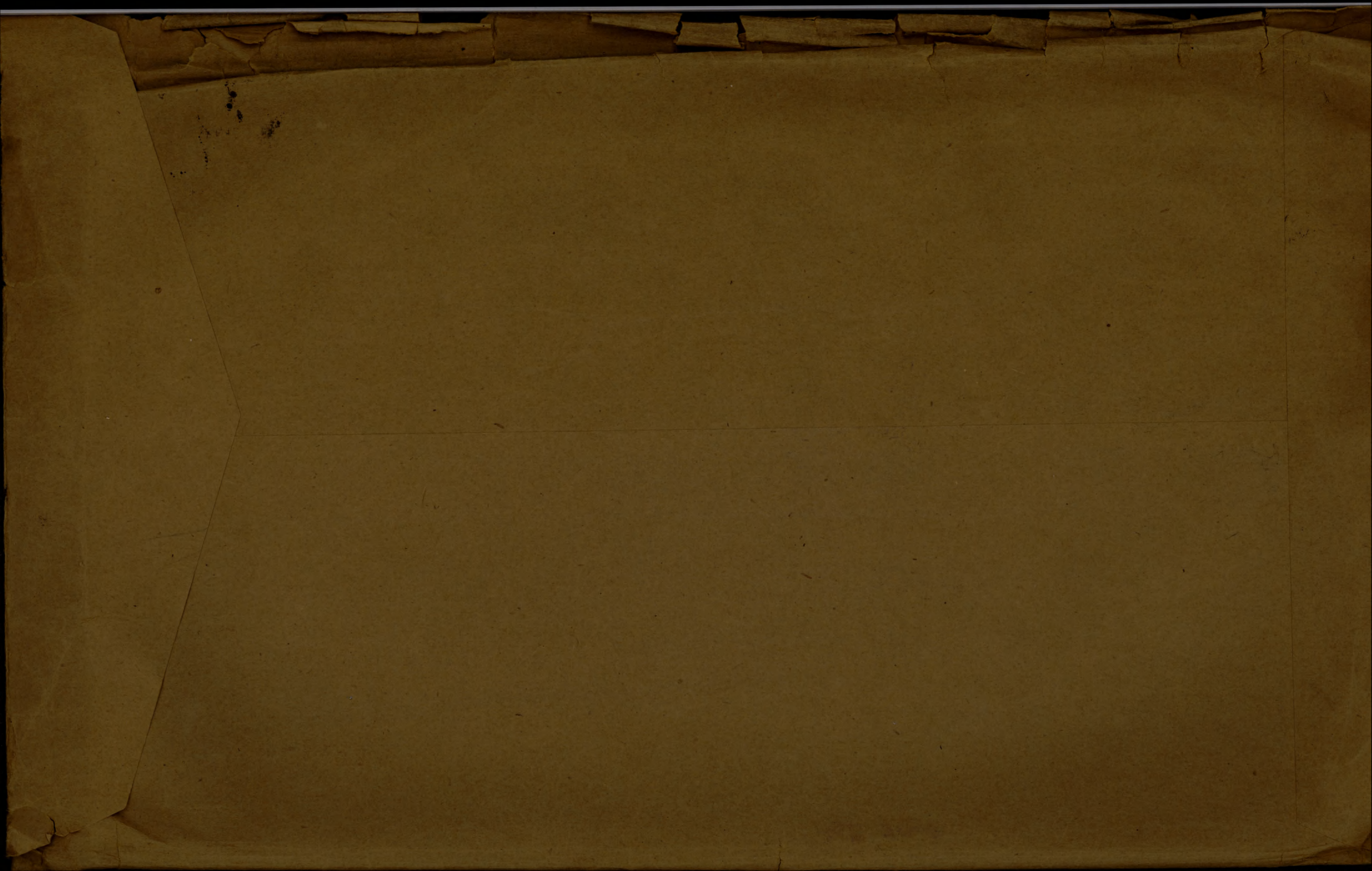
AFB 122 _____ 12

1 Cas. Serv
Memo 6043

AF 91237 X3

3
18-4
28-5
3

402805



att 17/35653

ATTESTATION PAPER.
109th OVERSEAS BATTALION, C. E. F.

No. 726101

Folio. 4

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

TRIPPLICATE

QUESTIONS TO BE PUT BEFORE ATTESTATION.
(ANSWERS.)

- 1. What is your surname?..... *Booth*
- 1a. What are your Christian names?..... *William*
- 1b. What is your present address?..... *Burnt River*
- 2. In what Town, Township or Parish, and in what Country were you born?..... *Burnt River Victoria Co. Ont.*
- 3. What is the name of your next-of-kin?..... *George Booth*
- 4. What is the address of your next-of-kin?..... *Burnt River*
- 4a. What is the relationship of your next-of-kin?..... *Father*
- 5. What is the date of your birth?..... *12th April 1897*
- 6. What is your Trade or Calling?..... *Farmer*
- 7. Are you married?..... *No*
- 8. Are you willing to be vaccinated or re-vaccinated and inoculated?..... *Yes*
- 9. Do you now belong to the Active Militia?..... *No*
- 10. Have you ever served in any Military Force?.. *No*
If so, state particulars of former Service.
- 11. Do you understand the nature and terms of your engagement?..... *Yes*
- 12. Are you willing to be attested to serve in the }
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? } *Yes*

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *William Booth*, 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 *Jan 31st* 1916 *William Booth* (Signature of Recruit)
C. D. McEneaney (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *William Booth*, 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 *Jan 31* 1916 *William Booth* (Signature of Recruit)
C. D. McEneaney (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 *Hiramont* this *31st* day of *January* 1916
C. D. White (Signature of Justice)

NOV 1916

Description of William Booth on Enlistment.

Apparent Age..... 18 years 10 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..... 34 ins.
 Range of expansion..... 3 ins.

Scar from saw cut on dorsum of left foot extending from base of second toe backward and inward about two inches

Complexion..... Fair

Eyes..... Blue

Hair..... DK Brown

Religious denominations.
 Church of England.....
 Presbyterian.....
 Methodist..... Yes
 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..... January 31st 1915

J. McCulloch
 Capt.
 Medical Officer.
 109th Overseas Battalion, C. E. F.

Place..... Kinnaird

*Insert here "fit" or "unfit."

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

CERTIFICATE OF OFFICER COMMANDING UNIT.

William Booth..... 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. H. H. H. Lt. Col. (Signature of Officer)
 O. C. 109th Overseas Battalion, C. E. F.

Date..... FEB 2 1916 1916

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 726101 (Rank) Private

Name (in full) BOOTH, William enlisted in

the 109th Overseas Battalion

CANADIAN EXPEDITIONARY FORCE at Kinmount, Ont on the 31st

day of January 1916

HE served in Canada, England and France

and is now discharged from the service by reason of being medically unfit for further

War Service. Authority Med. Board D/4-11-18 R.O. 1080

THE DESCRIPTION OF THIS SOLDIER on the DATE below is as follows:—

Age 21 yrs. 7 months Marks or Scars

Height 5 ft. 8 ins Scar left foot

Complexion Fair

Eyes Blue

Hair Dark

W. Booth

Signature of Soldier

M. P. Clarke Lient.

Issuing Officer
O. C. Discharge Section

No. 3 District Depot Rank

Date of Discharge 13-11-18

Appointment

Signed at Kington, Ont. this 13th day of November 1918

in Military District No. 3

File Reference No. 300-88-B-640

300-3-B-485

N.B.—As no duplicate of this Certificate will be issued, any person finding same is requested to forward it in an unstamped envelope to the Secretary, Militia Council, Ottawa, Canada.

CANADIAN EXPEDITIONARY FORCE
Discharge Certificate

No. 726101 (Rank) Private Name Booth, W.

Unit No. 3 District Depot.

Address on Discharge Burnt River, Ont.

Character and Conduct Very Good

Former Occupation Farmer

Special Qualifications of Value in Civil Life Farmer

Medals and Decorations nil

Remarks nil

Signed at Kingston, Ont. this 13th day of November 1918

W. B. Clarke Lieut.

O. C. Discharge Section

No. 3 District Depot

Rank

Appointment

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	726101	Pte	Booth	W
		Unit.	Age.	Service.
Year 1918	20 th Canadians	B. coy	19	1 ¹⁰ /12.
Station and Date.	Disease S. W. Rt knee (penetrating) left hand, back head (suppl)			
1/2/18	Rt knee joint had been opened & washed out in frame all the wound healed present fully healed Iodine & dry gauze to knee Fusol Joints & fingers			
9.1.18	Mange to knee			
	Dred & lower. H. H. H.			

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

Station
and Date.

MEDICAL CASE SHEET.*

I

No. in Admission and Discharge Book.

Regimental No.

Rank.

Surname

Christian Name.

726101 Pte Booth W

Unit.

Age.

Service.

20 Can Bn

Year

1918

Station and Date

2 MAR 1918

Disease

Sharp W. Rt. Knee. Lt. hand & head

(Dise. Phalangea little finger)

Wound right knee healed. Unable to flex knee more than 1. Circumference compared with left is increased by one inch. This very quickly on walking not painful. Hit also of ring & middle fingers left hand. fracture of 6th phalangea joint finger is much slater now. Wounds healed at J. Panay.

10.2.18 centimeters

18.3.18 centimeters

25.3.18. centimeters

24.18 centimeters

24.18 centimeters

18.18 centimeters

22.4.18 centimeters

29.4.18. Great amount of hyper idrosis of the hand to the board pro catagory.

8-7-18. little finger left hand ^{old} wound healed and terminal phalanx is in flexed position and cannot be extended. anaesthesia of palmar surface little finger over terminal phalanx.

Right Knee moved to angle of 80 degrees and extends completely. Has no trouble in Rt Knee except some soreness on a walk of 3 or 4 miles. Examination knee otherwise negative. Condition of Rt leg muscles good.

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

CANADIAN DIVISION, CONVALESCENT HOSPITAL, WOODCOTE PARK, EPPING

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

ORIGINAL

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

Regimental No. 726101 Rank Pte. Name Booth, W.Corps 109th Battalion who was* DischargedOn November 13th 1918, to Category "E"

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from November 1st 1918, to November 13th 1918, the inclusive date of transfer or discharge.

Dr.	\$	c.	Cr.	\$	c.
Bal. Dr. from prev. month			Bal. Cr. from prev. month		
Advances by Cheques	No.		Regt'l Pay	<u>13</u> days at \$ <u>1</u> c.	<u>13</u> 00
	No. <u>Clothing 10959</u>	<u>35</u> 00	Field Allow.	<u>13</u> days at \$ <u>10</u> c.	<u>1</u> 30
Assigned Pay and Sep'n Allce. No.			Separation Allowances* (Monthly)		
Other charges <u>A.P. Nov.</u>		<u>15</u> 00	Other Allowances*		
Payment on transfer or discharge No.			Other Credits* <u>Clothing</u>		<u>35</u> 00
Balance Cr. (to be paid by the new unit)			Post Discharge Pay		
			Bal. Dr. (to be deducted by new unit)		<u>7</u> 00
Total		<u>50</u> 00	Total		<u>50</u> 00

* Give particulars.

A monthly stoppage of \$ 15.00 (†) has ^{CHARGED} (‡) been paid on account of Assigned Pay for the month of November 1918 } (to) Assignee Mrs. Geo. Booth,
 { and Sep'n Allce. for month of by Ottawa 1918 }
 (Address) Burnt River,
Ont.

(†) Insert amount to be assigned, whether it has been paid or not.

(‡) Insert "not" if amount has not been paid for period of account.

On Transfer of an Officer

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

REMARKS:—

State (1) date of enlistment Jany. 31st, 1916(2) if married and if a Separation Allowance Card has been submitted No(3) cause of discharge..... authority MD3 88-B-640, Nov. 9/18

(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 November 12th, 1918Place Kingston, Ont.

W. Peters Captain,
 OFFICER I/C DEMOBILIZATION PAY DIV.
 MILITARY DISTRICT No. 3 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.

GONORRHEA

History.—Number of attacks, when infected, course, duration, complications, sequellæ, etc. :

V.D.G. Etchinghill Hosp. March to June 1917, 79 days.

Treatment.—Nature, when and where received :

Irrigations, massage, steels, and medicines, as above.

Examination

Penis :		Pubic region :	
Meatus :		Inguinal region :	
Cords :		Thighs :	
Epididymis :	all negative	Perineum :	all negative
Testicles :		Anus :	
Scrotum :		Reflexes :	
Anterior Urethra.—Shreds :	no	Bacteria :	no
		Cells :	no
Endoscopic {	Mucosa :	Littres Glands :	negative
	both negative	Strictures :	"
	Submucosa :		
Posterior Urethra.—Endoscopic :	negative		
		Pus :	no
		Cells :	no
		Bacteria :	no
Urine after Anterior Irrigation {	First :	Albumen :	no
	clear	Sugar :	no
	Second :		
	"		
Bladder.—Cystoscopic :	not done		
Prostate, etc. :			
Per Rectum {	Prostate :		
	negative		
	Seminal Vesicles :		
	"		
	Cowper's Glands :		
	"		
After massage, Bacteria :	no	Cells :	no

REMARKS:

Signed H. D. F. Spencer M.O.

Dated at Canadian Special Hosp. Station or Hospital Witley, Sept. 14th. 1918. 191

REPORT ON A CASE OF VENEREAL DISEASE

(The findings reported are for the date of the examination only)

Regt. No. 726101 Unit or Corps C.D.P.

Rank P/S Surname Booth Christian Name William

Report on GONORRHEA Overleaf

SYPHILIS

History.—When infected, course, duration, complications, sequellæ, etc. :

Treatment.—Nature, when and where received :

Examination

Genital Organs :

Skin :

Mucous Membranes :

Glands.—Inguinal :

Supra trochlear :

Axillary :

Cervical :

Nervous System :

Wasserman Test :

REMARKS :

Signed _____ N.O.

Dated at _____ Hospital or Station _____ 191

73

Kingston, Ont. 31-10-18

URINE ANALYSIS.

FOR DR. Medical Board
Patient's Name Baath 726101 Reaction acid
Amount voided 24 hours — Specific Gravity 1014
Amount examined 3 TC Clearness clear
Color straw Character of sediment (if any) nil.
Odor ch

CHEMICAL EXAMINATION

Albumin nil Bile nil
Sugar nil Indican nil
Acetone nil Urea nil
Diacetic Acid nil

MICROSCOPICAL EXAMINATION

Epithelium nil
Pus nil
Blood nil
Casts nil
Chemical sediments nil
Bacteria nil
Remarks nil

Ed. Page Hunt, M.D.
Examiner.

726101

S Coy

ORIGINAL

6. Inf. 356 55. 3088
471- 24 10.16

MEDICAL HISTORY SHEET.

3-1-66

3
Pte

Surname Booth Christian Name William

Examined { on 28 day of January 1916
at Winnmount
Birthplace { City or Town Burnt River
County Ontario

Approved by H. O. Boyd
Rank Capt. M.O.

Apparent age 18 years
Trade or occupation Farmer
Height 5 Feet 6 Inches.
Weight 138 Lbs.
Chest measurement { Minimum 34 inches.
Maximum expansion 2 inches.
Physical development Good
Small-Pox Marks None

Date.	Fit or Unfit.	EXAMINED FOR RE-ENGAGEMENT.
		6-DEC 1917
		M.O.
		1 OCT 1918
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Vaccination Marks { Arm Right None Left Two
Number Two
When Vaccinated last Jan. 31st 1916
(a) Marks indicating congenital peculiarities or previous disease None

Date.	Result.	VACCINATIONS.
31.1.16	Good	J McCulloch
		M.O.
		M.O.
		M.O.

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

Date.	Result.	ANTI-TYPHOID INOCULATIONS, ETC.
26.4.16	Good	J McCulloch
2.5.16	"	J McCulloch
10.5.16	"	J McCulloch
29.9.16	"	Horsford Capt.
		M.O.
		M.O.
		M.O.

Enlisted on 28 day of January 1916 at Winnmount

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	108 th Bn. C.M.F.	726101		28.1.16
Transferred to	21st Bn 2076 Bn.			
<u>Kingston Det</u>	<u>H-11-18</u>	<u>Limited function of R. hand (2) left hand (2) feet - E</u>		<u>25 AUG 1917</u>

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

STATION.	DATE.	DISEASE.	RESULT.
Shoreham by Sea	Nov 2/16.	Under age	P.B.D. Boys Battalion Capt Major
Hasleups S.M.B. Worthing - Spoon	2/1/17 Jan 5th 1917 18-7-18.	Under age Boys Battalion C.J. Growth of knee Growth of hand Down head.	ATC Pres. J.W.B. W.H. Hawre Capt Charpentier Capt. C.M.C. P.M. likely to be raised in category within in category within in category within

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.

INDIAN

W. H. Hawre
J. M. O.
A. Cannon

Booth

Christian Name William

Guthrie

Surname

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				
CANADIAN HOSPITAL, ETCHINGHILL, LYMINGE.		28	3	17	14	6	17	Gonorrhoea	79	Disch'd to duty Duplicate Medical History Sheet posted to here.	Ampeato. Capt. C.A.M.C.
AUX. MIL. HOSPITAL, TRANMERE, BIRKENHEAD.		1	12	17	1	3	17	S.W. at knee (penetrating) left hand Back head (suppl) Sharp knee hand and head.		Transferred to Law Bone Hospital. Woodcote Park Epsom all wounds healed	Robert Park Epsom Guthrie
M.A. Epsom		1	3	18						Great amount of hyper extension of the hand to be awarded for category	Guthrie Capt. C.A.M.C. No. 1 Division
M.C. & Epsom		1	3	18			9 - AUG 1918			Irregular entrance wch Rt knee - inner side - healed - now at knee - healed Excl. above - knee - healed outer side - slight swelling of joint. Two small wch outer side - B. ring & little finger left hand. grip fair hand cold. Two small Scuro occipital region healed healthy	12-7-18 7a 10 2

at Jan 726101
726048

MEDICAL HISTORY SHEET. ORIGINAL

Surname Booth Christian Name William

Examined { on 31st day of Jan. 1916
 at Kinnmount
 Birthplace { City or Town Burnt River
 County Victoria

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

Apparent age 18
 Trade or occupation Farmer
 Height 5 Feet 5 1/2 Inches.
 Weight 121 Lbs.
 Chest measurement { Minimum 31 inches.
 Maximum expansion 34 inches.
 Physical development Spare
 Small-Pox Marks None
 Vaccination Marks { Arm Right None Left One
 Number One

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT,
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

When Vaccinated last never
January 31st 1916.
 (a) Marks indicating congenital peculiarities or previous disease None

Date	Result	VACCINATIONS,
<u>31/1/16</u>	<u>Good</u>	<u>J. McCulloch</u> M.O.
		M.O.
		M.O.

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

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>26.4.16</u>	<u>Good</u>	<u>J. McCulloch</u> M.O.
<u>2.5.16</u>	<u>Good</u>	<u>J. McCulloch</u> M.O.
<u>10.5.16</u>	<u>Good</u>	<u>J. McCulloch</u> M.O.

Enlisted on 28 day of January 1916 at Kinnmount

	CORPS.	REG'T L NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>109th Batt.</u>	<u>726048</u>		<u>31.1.16</u>
Transferred to.. ..	<u>C. E. F.</u>	<u>726101</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.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at 2/11/16 1916.

No. 426101 Rank Pte Name BOOTH W

Local Unit CAC Overseas Unit # 20th B. Age 18

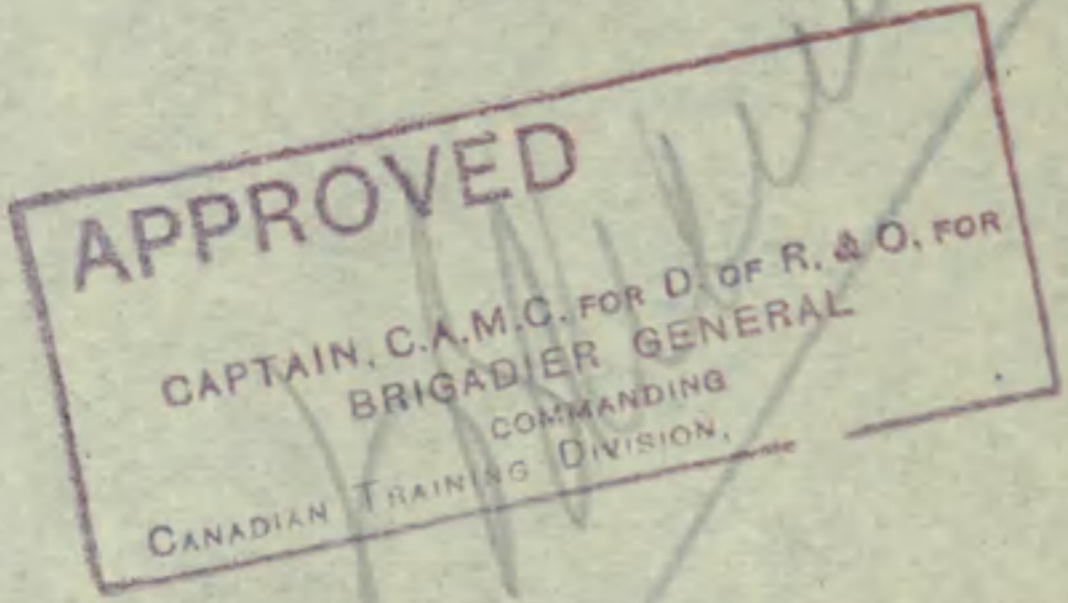
Examination held at Shoreham by Sea

DISABILITY. Under age. Overseas—Local. (scratch one out)

PRESENT CONDITION.

Aged 18 years 7 months Birthday 18th April, 1898 Looks his age

Boys Battalion



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 Yes
5. Discharge

Signatures:—

Members { AC Foster Major President.
AB Dupre Maj

APPROVED

Dated at -2 NOV 1916 1916.

111325

R O 0015 (Acute)

PROCEEDINGS OF A MEDICAL BOARD

Examined at.....
 Examination held at.....
 Local Unit.....
 Overseas Unit.....
 Name.....
 Rank.....
 Dated at..... 1916

DISABILITY.
 Overseas—Local.
 (attach one out)

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.....

Signatures:—

.....President.

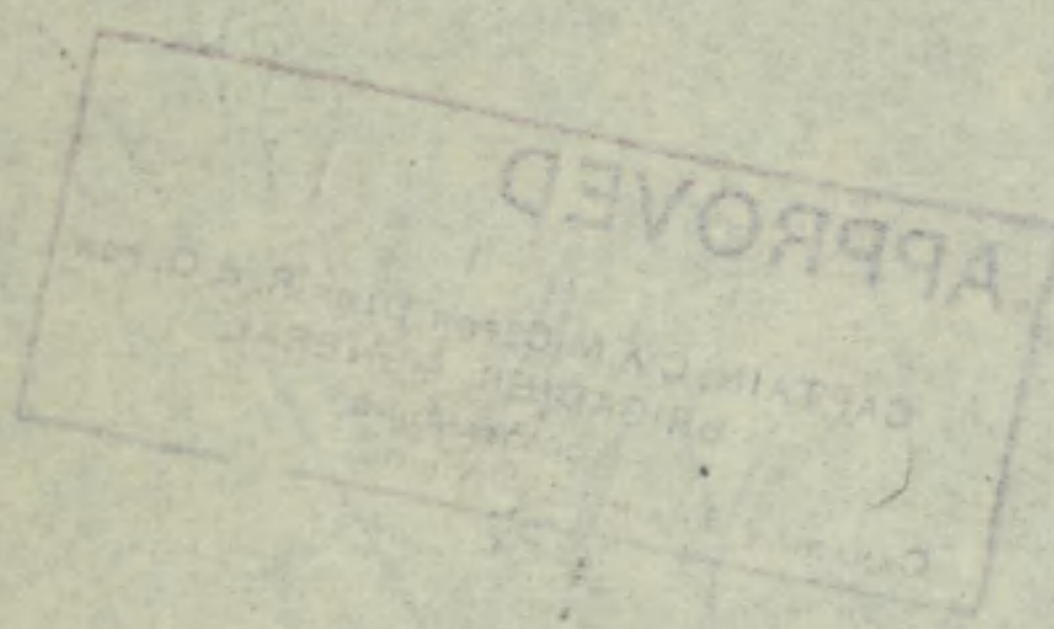
Members

APPROVED

Dated at..... 1916

For A.D.M.S.

For A.D.M.S. (Signature)



MEDICAL CASE SHEET.*

No. in Admission and Discharge Book 68	Regimental No. 726.107.	Rank. Pte	Surname. Booth	Christian Name. Wm.
Year 1914	b. O. b.	Unit. (Saddlery)	Age. 18	Service. 12/12
Station and Date.	Disease <i>Laryngitis & Otitis</i>			
<i>Ashford 12/14</i>	<i>Has had cold in head for a month & a cough 2 weeks. Deep voice awake at night. - been deaf for 10 days</i>			
<i>22.2.17</i>	<i>Has been up & out. G. Powell noted today with temp 100.2</i>			
<i>24.2.17</i>	<i>Discharged G. Powell</i>			

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

Station
and Date.

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 BN., C.E.F.

(2) Regimental Number 726101

(3) Full Name of Soldier William Richard Booth

(4) Place of Birth Burnt River Ontario

(5) Are you married, or not? no

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

(b) Present Postal Address.....

(7) Are you a widower?

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

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

Also their names and ages.....

(9) Is your Father alive? yes
If so, state name and address George Booth Burnt River Ont

(10) Is your Mother alive? yes
If so, state name and address Margaret Elizabeth Booth
Burnt River Ont

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

(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.
no

(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.
no

(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.
no

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

Date JUL 11 1916

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

3501

28

DEPARTMENT OF MILITIA AND DEFENCE.

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 *William* 2. Surname *Booth*
3. Rank *Pte* 4. Original Unit *109th* 5. Reg. No. *726101*
6. Address, in full, to which future payments of gratuity are to be forwarded
Burnt River, Ontario
7. Date of enlistment in the C.E.F. *28th January 1916*
8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge *None*
9. Relationship of such dependent *None*
10. Address, in full, of such dependent *None*
11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? *None*
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:—
*Went to England July 1916. transferred to 20th Batt Oct, 1916
was in France & Belgium with 20th until wounded
and sent back to England Dec 1917.*
13. Were you on the strength for pay and allowances of the Clearing Services Command, having been at any time on duty outside of Canada or the United States? *not applicable*
14. Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service *not applicable*
15. Give total length of time which you served on active service, whether in Canada or Overseas, setting out particulars of units on whose strength you served *28th January 1916 until
13th November 1918. 109th Battn, 5th Reserve
Co. I R.I., 20th Battn*
16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department *No*
17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.? *No*

18. Have you had more than one enlistment? If so, give particulars of discharges and re-enlistments, and under what regimental numbers and units..... *No*
19. Have you already received any payment of Post Discharge Pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid
\$99.40 total for three months
Paid by Capt. W. Peters
20. Have you been issued with a War Service Badge? If so, what class? *C. & 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? *not applicable*
24. Are you now serving in the C.E.F. *No* If not, give:—(a) Date of discharge
13th November 1918 (b) Reason for discharge
medically unfit
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.
With 20 Bant. from July 1917 to November 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: *William Booth*

Place of Residence: *Burnt River*

Declared before me at: *Burnt River*

This *Thirtieth* day of *February* 19*19*

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

POST DISCHARGE PAY.

Date paid	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
<i>Nov 13/18</i>	<i>33.00</i>		<i>153 days</i>	<i>350.00</i>
<i>Dec 3/18</i>	<i>33.00</i>		<i>Less</i>	<i>100.10</i>
<i>Jan 13/19</i>	<i>33.40</i>			<i>\$ 249.90</i>

Certified Correct. *99.40.*
 Total amount paid *99.40.*
 Debit Blue District Paymaster. *.70*
\$ 100.10

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

Name Booth William
Surname Christian Name

Regimental Number 726101 Rank Private

Unit 109th Battalion

Original Unit

District where paid M.D.#3

Date of Discharge

P. D. P. Filing Number 3-183-3

Address (in full)

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

L. L. 46038—M. & D. 9245.

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		
100 10	3590	13-11-18	33								

Remarks: Other payments shown on new Paylist.

M. F. W. 127.
25M.—8-18,
1772-39-1140.

File No.....

WAR SERVICE GRATUITY.

Register No.....

Reg. No. Dependent.....

Name Address.....

Address.....

Dec'n No. V. S. G.

Award days at \$ per day

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

Less P. D. P. credited

Less further debit balance

Net due

TO SOL			
0	Ag. No.		
1			
2			
3			
4			
5			
6			
Total			

Pay Soldier \$

Pay Dependent \$

Clerk

Days..... Rate..... Due.....

Less P.D.P. credited.....

Less further Dr. Bal.....

or overpayment.

Net.....

Date	Ck. Order	Ck. No.	Amount	Remarks	Date	Ck. Order	Ck. No.	Amount.
1					1			
2					2			
3					3			
4					4			
5					5			
6					6			

GEN'L AUDITOR
 Posting checked by

 Date.....

Mrs. Geo. Booth.

ASSIGNED PAY

OVERSEAS CONTINGENTS

Name of Soldier

Booth, William
Pte. D Co. 10th Batt

PAYMENTS.

726101

\$15.00

Remarks. *AUG 1 1916*

W.B.

Ch

W.B.



Month.	Year.	Cheque No.	Amt.
April	1916		
May			
June			
July			
Aug.		<i>J 153499</i>	<i>15.</i>
Sept.		<i>P 15554</i>	<i>15</i>
Oct.		<i>C 19971</i>	<i>15</i>
Nov.		<i>K 25104</i>	<i>15</i>
Dec.		<i>L 32296</i>	<i>15</i>
Jan.	1917	<i>N 31786</i>	<i>15</i>
Feb.		<i>W 38762</i>	<i>15</i>
March		<i>V 44588</i>	<i>15</i>
April		<i>X 138</i>	<i>15</i>
May		<i>U 6678</i>	<i>15</i>
June		<i>C 12880</i>	<i>15</i>
July		<i>W 27693</i>	<i>15</i>
Aug.		<i>Y 27130</i>	<i>15</i>
Sept.		<i>Z 33944</i>	<i>15</i>
Oct.		<i>M 47800</i>	<i>15</i>
Nov.			
Dec.			
Jan.	1918		
Feb.			
March			
April			
May			
June			
July			

JW

15-2

15-3

15. 5

li

li

li

*Can assigned Pay audited
Mr M. McCarthy 1/5/19.*

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.				

MILITIA AND DEFENCE
 ASSIGNED PAY
 OVERSEAS CONTINGENTS

M. F. W. 12.
 50m.-4-16.
 H. Q. 1772-39-819.

To Whom Mrs. Geo. Booth-
 Address Burnt-River
Cont.

By Whom Assigned Booth, William
 Regtl. No. 726101
 Rank Pte.
 Corps D Co 109th Batt.
 AUG 1 1916

Rate \$15.00 AUG 1 1916

2 m 18/9/16 ar. 13/10/16

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

11

12

13

14

A.G.R. Rank Name BOOTH, William Reg'l No. 726101

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

Place and Date of Enlistment Kinmount, 31st Jan., 1916. Place of Birth Burnt River, Victoria Co.

Name and Address, Next-of-Kin George Booth,

P.O., Burnt River, Ont., Canada. Relationship Father.

Assigned Pay Monthly \$ Payable to Relationship

Separation Allowance \$ Payable to Relationship

Discharge, Date and Place Reason Character

N/E. R.B. No. 15038
File R.L. _____
Category *Can OR*

H. W. & V., Ltd.—7165-16.

22/1/16

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.			
	Arrived in England per H. M. T. 2810		31-7-16	
5-10-16	109 th Bn S.O.S. to 20 th Batta	Bramshott	5-10-16	Pt. II. D.O. 279 J.W.C.
11-10-16	20 th Bn T.O.S. from 109 th Bn	Field Shoreham	6-10-16	" 454
13-11-16	" Classified P.B. transfr BBAB.	on-sea	25-10-16	" 67 PB.
27.10.16	bbab. Reported from Base and Taken on strength.	"	26.10.16	" 471(E)
6.11.16	T.C.A.C. On Command to Garr. Duty Depot	Shoreham	5.11.16	" 488 (I) P.B.D.
13.3.17	CCAC S.O.S. on transfer to	Hastings	10.3.17	Pt. II D.O. 119
26.2.17	coc Disch. V.A.D. Hosp		26.2.17	57
11.2.17	coc 1 Bey on Regiment		18.2.17	Pt. II
19.3.17	e.p.O.R. Ad V.A.D. Hosp	Ashford	10.3.17	Pt. II. O. 10
4-14-17	20 th Bn can Hosp Echenhall	Fideffe	29.3.17	Ch B 311 889

A.F.B. 103 CHECKED
16 OCT. 1916

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
Date.	From whom received.				
		leaves to be attach 4th			
3-5-17	100017	as a patient in Hosp	Wandling	12-4-17	Pt # 555
16-6-17	5 Res	TOS	"	14-6-17	161 9th O 106 of 23.6.17. 1000
18-6-17	do	back Elchinhill Hosp	do	15-6-17	-163 C.L.B 372
26-8-17	do.	S.O.S. to 20 Bn.	Sandling	25-8-17	Pt # 232. 20 Bn Pt # 20 600/31-8-17
16-11-17	20 Bn.	no 9. Can Field Amb.	Field	12-11-17	C.L.A. 65. S.W. knee
22-11-17	160017	no 4. Can Field Amb.	"	12-11-17	C.L.A. 70.
5-12-17	"	1st West General Hosp	Liverpool	1-12-17	C.L. 981
8-12-17	100017	T.O.S. from 20 Bn	Sandling	1-12-17	Pt # 284. 20 Bn Pt # 20 890/10-12-17
12-8-18	✓	On Command 2. C.L.D.	Pt Willey	9-8-18	Pt # 222
7-9-18	600017	leaves att 2 C.L.D.	"	6-9-18	Pt # 248
13-9-18	"	On Command C.L.D. Buxton	"	12-4-18	Pt # 254
8-10-18	"	leaves on Comm C.L.D. - 4 S.O.S. to Canada msc.	"	23-9-18	Pt # 279

28 APR 1917
 108017
 108017

Fo
 419
 R

DENTAL CERTIFICATE.

426101
 Ste. Booth W.
 1st C.6 RD

The following Certificates will
 be attached to the Medical History Sheets of all
 Other Ranks being returned to Canada for disposal.

Date of Examination.	Present Dental Condition.	In case of loss or decay of teeth. Is the loss due to wounds, injury or disease directly attributed to Active Service?	Has he ever declined Dental Treatment.	Recommendation.
13-9-18	G.K.	—	— W. H. Munn Capt base.	—

DENTAL CERTIFICATE

The following Certificates will be attached to the Medical History Sheets of all Other ranks being retained in service for disposal.

1. *[Faint handwritten text]*
2. *[Faint handwritten text]*
3. *[Faint handwritten text]*

Name of Soldier	Rank	Branch of Service	Dental Condition	Remarks
<i>[Faint handwritten name]</i>	<i>[Faint handwritten rank]</i>	<i>[Faint handwritten branch]</i>	<i>[Faint handwritten dental condition]</i>	<i>[Faint handwritten remarks]</i>

[Faint circular stamp or watermark]

Separation and Assigned Pay Branch **B**

9113

Aug. 1/16

RATE OF SEPARATION ALLOWANCE

--	--	--	--

OVERSEAS CONTINGENTS

ANOTHER ACCOUNT IN
Special Rem. Ledger
 Ledger
 Ledger

RATE OF ASSIGNMENT

15			
----	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE Ledger

No. **726101**
 Rank **Pte** Promoted Reverted Discharge
 Soldier's Name **William Booth**
 Battalion **109th Bn. "D" Coy.**
 Beneficiary
 Relationship
 Address **Oct 31/17**

PARTICULARS OF ASSIGNMENT

Name **Mr Geo Booth**
 Address **Buont River Gnt.**
 Change of Address
 1
 2
 3
 4

225 225

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
Nov	B 57151		15	15	
Dec	B 61474		15	15	
1918 Jan	B 65904		15	15	M
Feb	b 92703		15	15	
Mar	a 99975		15	15	✓
April	b 3855		15	15	✓
May	E 10638		15	15	✓
June	10 18647		15	15	✓
July	x 32999		15	15	✓
all W Aug	b 30464		15	15	✓
Sep	10 36567		15	15	✓
Oct	B 48340		15	15	✓
Nov	B 51942		15	15	✓
			420	420	

1849-10-28

Leaves *all closed* *open*
 Ret'd per. *Cardiganshire*
 Date. *9¹⁰/₁₈* ... *11¹⁰/₁₈* to *m D. 3*
 Clerk. *DoE*
 Discharged from *S.E.F. 13¹¹/₁₈*. Auth. *Abst. of Disc. 16¹¹/₁₈*
M.R.O. 22756 Destroy 18¹¹/₁₈

can assigned Pay audited
3/15/19

M. F. W. 128
 400M-617-1772-30-1141
 L. L. 22320-M. & D. 1483.



Show 2
Casualty Form - Active Service.

Regiment or Corps 20 Bn.
 Rank Plt Surname Bovth Christian Name William
 Religion Age on Enlistment years months
 Enlisted (a) Terms of Service (a) Service reckons from (a)
 Date of promotion to present rank Date of appointment to lance rank
 Extended { } Re-engaged { } Qualification (b)
 or Corps Trade and rate
 Occupation Signature of Officer

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
Date	From whom received				
		Embarked ...			
<u>14-11-17</u>	<u>20 Bn</u>	<u>wounded</u>	<u>7th</u>	<u>10-11-17</u>	<u>B 213</u>
<u>12/11/17</u>	<u>9 C.F.A.</u>	<u>St. Anne Pt hand at head</u>	<u>9 C.F.A.</u>	<u>12/11/17</u>	<u>B 4652</u>
		<u>Irish</u>	<u>CCD.</u>	<u>12/11/17</u>	
<u>12-11-17</u>	<u>4 Gen</u>	<u>Adm 4 Gen.</u>		<u>12/11/17</u>	<u>B 5930.</u>
<u>6</u>	<u>3 C. CCD.</u>	<u>Adm 36 AT.</u>			<u>B 6737.</u>
<u>30-11-17</u>	<u>4 Gen</u>	<u>Inv (Wdd) & posted to 1st</u>	<u>entl Ont Regl</u>	<u>130-11-17</u>	<u>W3083-4459.</u>
		<u>Depot, Shorncliffe per AT</u>	<u>Stadantperpen</u>	<u>pt 2 89d/10-12-17.</u>	
		<u>Whogan</u>			
<u>8-12-17</u>	<u>1. C. CCD</u>	<u>J.O.S. from 20 Bn</u>	<u>Willy</u>	<u>1-12-17</u>	<u>Plt # 284</u>
			<u>for Colonel i/c</u>		<u>Records, O.M. of.</u>

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

Date	Report From whom received	Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
	14-8-18 2nd C.O.D.	Attached to 2nd C.O.D.	Bramahatt	9-8-18	Pt. II No. 191
SEP 1918	OC. 2nd CCD	Ceases to be attached to 2nd C.C.D. on return to 1st Corp. Res. Bn.	Beloeuf	6 SEP 1918	Pt. 2 D.O. No. 211
7-9-18	RECORD	Ceases to be attached to 2nd C.C.D.	Witley	6-9-18	Pt. 2 48.
12-9-18	RECORD	Att to 1st C.C.D. Witley	Witley	12-9-18	Pt. II No 253
1 SEP 1918	23-9-18	Attached C.D.D. Buxton for return to Canada. Ceases to be attached C.D.D. Buxton on embarking for Canada.	Lt. for Lt. Col. Commanding Canadian Discharge Depot.		Pt. II
OCT 11 1918		T.O.S. Casualty Company No. 3 District Depot. for Disposal, Part Two D.O.	Kingston	OCT 10 1918	
13/11/18	D.D. Discharged	A.A.	Kingston	13/11/18	Pt. II No. 210
			M.R. Clarke		Lieut.
					O.C. Discharge Section No. 3 District Depot

Att O Inf 3565-57/16

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

M. F. W. 54. (A. F. B. 103.)
250M.—1-16.
H. Q. 1772-39-920

Casualty Form—Active Service.

Unit, Regiment or Corps 109th OVERSEAS BATTALION, C. E. F.
 Regimental No. 426101 Rank Private Name Booth William
 Enlisted (a) 31.1.16 Terms of Service (a) O of W. Service reckons from (a) 31.1.16
 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) Lammer

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				
			Halifax	24.7.16	
			Liverpool	31.7.16	
				5 1916	<u>D.O. Pt. II #279</u> Capt.
6/10/16	C B Dep	transferred for Overseas Service with 20 th Batt'n. Arrd & taken on strength	20th Bn	6/10/16	NR Pt 2 O'rs 55d 11/10/16
26/10/16	do	Classified PB Immature trsf'd To England	To England	25/10/16	NR Pt 2 O'rs 67d 13/11/16 E. F.
					<u>progan</u> Capt. for Lieut-Col. R.A.G.
				27.10.16	<u>W. Thelking</u> CAPTAIN, ADJUTANT.
					109TH BATTALION CAN. INFANTRY.
					488.23-6.11.16
					<u>H. S. Cleverley</u> C.C.A.C.

CERTIFIED CORRECT.
18 OCT. 1916

30 NOV 1916

ATTACHED

TRANSFERRED FROM C.C.A.C. TO G.D. Shoreham 5-11-16 PART II D.O. No. _____

(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.

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				
23.3.17	C.B.D.	Taken on strength Depot	Shorncliffe	23.3.17	M/TI D048 R I Stewart O. i/c Records & Dispatch, For Lt. Col. Commanding, Canadian Garrison Duty Depot.
12/11/17	C. C. A. B.	beams to be attached to	C. G. D. D.	12/11/17	Part II D.O. No 97 ✓ for J. G. G. G. O. i/c Records & Dispatch, For Lt. Col. Commanding, Canadian Garrison Duty Depot.
19.3.17	1st C.O.R.D.	Taken on strength West Sandling	W Sandling	10.3.17	Part II D010 ✓
23.6.17	1st C.O.R.D.	Ceases to be att to G.D.D.	W Sandling	14.6.17	Part II D0106 ✓ J. H. Hutton Lieut. & Asst. Adjt. for O. C. 1st C. O. R. D.
16/6/17	C. C. 5th Res.	Taken on strength from 1st BORD.	W Sandling	14/6/17	Bn of 161 ✓
26-8-17	O.C. 5th	S. Off. S. to 20th O.S. B'n	W. Sandling	25-8-17	B'n. Ord 232 W. W. W. W. 26 AOU 1917
26 AOU 1917	C.B.D.	TAKEN on STRENGHT 20 Bn.		26 AOU 1917	5th Canadian Reserve Bn N. R. West Sandling, Kent.
29 AOU 1917	"	Left for Unit	FIELD	29 AOU 1917	
SEP 1917	Unit	Joined Unit	FIELD	30 AOU 1917	B. 213. DCS.

CERTIFIED CORRECT
 3-SEP-1917
 CAN. RECORDS, LONDON

926101
 776101
 D.M.S. 1300.
 Reg. No. 9
~~776101~~

Surname Booth. Christian Name or Names W.
 Rank Pte. Unit 1st. Co. Co. 20th. Bn. Troop 1st. Co. Batty.
 Hospital Date of Admission

Transferred Etchinghill. Mil. Hosp. 29-3-17.

9 can fld amb
 # 1st. West. Gen. F.az. Liverpool. Hosp. 12-11-17.
 # 1st. West. Gen. F.az. Liverpool. Hosp. 12-11-17.
 # 1st. West. Gen. F.az. Liverpool. Hosp. 1-12-17.

Diagnosis V.D.G.
 (1)
 Later Diagnosis (if changed) sw. R. knee & hand & head, RW
 (2)
 (3)

Additional Diagnosis: if more than one state present

DISPOSITION Date
 C.L. 4-4-17. B/311. 15.6.17.
 26.6.17. B 312. 9.8.18

REMARKS
 17.11.17 a65-2.
 23-11-17- @ 70 ⑤
 6-12-17- B. 87 ①
 6.3.18 B156-1
 13.8.18 B290-2

A.M.D. 2 DEPT.
 Bch. of D.G.M.B. O.M.F.C. London.

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1. *Mr. Cowal, Woodacre, Essex 2.3.18*

2.

3.

4.

5.

6.

7.

Name Booth, William. Rank Pte. Regtl. No. 726101

Fyle Depot.....

Original unit 109th Bn Present unit 20th Bn M. or S. Age 20 Religion Meth Ref. H.Q.....

Port, ship and date of arrival Quebec, Cardiganshire. 7-10-18

Next of kin Mother, Mrs. G Booth, Burnt River, Ont.

Address on leave do

Address on discharge.....

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

Previous occupation Farmer Date and place of enlistment 20-1-16. Burnt River

Diagnosis..... Date of Medical Boards.....

Date.	Remarks	Pt. 2 Order No.
<u>11-10-18.</u>	<u>TOS. from Clearing Depot. Effect. 22-9-18.</u>	
	<u>Posted to Casualty Company Effect 7-10-18.</u>	
	<u>Granted leave with subsistence from 10-10-18. to 24-10-18 .</u>	
<u>B-11-18</u>	<u>S.O.S. Cas. Co'y No. 3 D.D. on transfer to</u>	<u>C.C.176.</u>

*—Name will be given in full ; surname first. Discharge Part Two D.O. 109 (over)

Date.

Remarks

Pt. 2 Order No.

M. F. W. 192

150m.—5-18

1772-39-1243

No. 726 101 RANK Pte

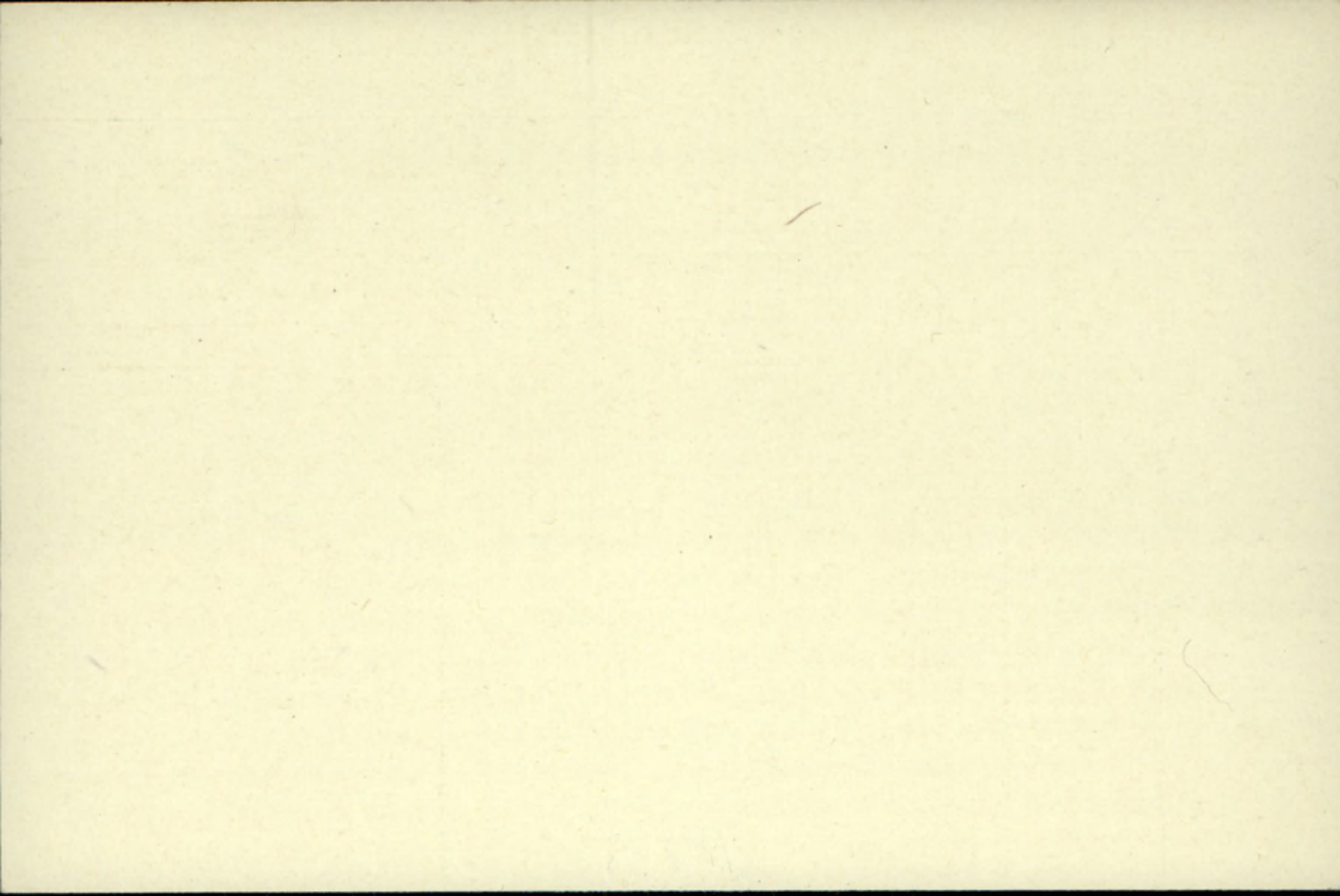
NAME Raath. Williams.

T.O.S. 28-1-16. UNIT 109th. Battalion
D.O. 64.3-2-16

M. D. 13

PAID		SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
FROM	TO		PARTICULARS	AUTHORITY
1916 Jan 28	1916. Feb. 29	✓		
	Mar.	✓		
	April	✓		
	May	✓		
	June	✓		
	July	✓		

UNIT SAILED
JUL 23 1918



Number 726101

Rank

Pt

13

Surname

BOOTH

Christian Name

William

Units

20th Bn Can Div Theatre of War France

Date of Service

6-10-16

Remarks

Latest Address

Burnt River Ent,
(G.P.O.)

Roll No.

200m.-6-21.

Page 21005

DESP NOV 22 1922
REGN. 459
912786

William

Name Booth

Rank Pte
20th BN

Reg. No. 726101

Unit

Next of Kin

Canada

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1917						
12-11	No 9 Can Fld Amb	SW knee R.		A65		4895
		Hand L. Head		A70	Nil	370
12-11	5 th Lt. Gen. A. Leamier		do			16308/2
1-12	1 W. Lt. Szakelley Pool		do	B581		757/8
2-3-18	mil bonds Vapson		do	B156	LT 207	13600
9-8	Discharged		do	B390		7262
9-8	Dis per long to n/g.	2003 Bramhott.				RE 3116

Convalescent Hospital,

Woodcote Park, Epsom

HOSPITAL.

A. & D. CARD

I

AT

A. & D. No.

T4627

PL. OF ACTION

RANK

REG. No.

726/101

UNIT

20 Gen In

SICK OR WOUNDED

NAME

Booth, W.

AGE

28

RELIGION

Meth

PLACE IN HOSPITAL

DIAGNOSIS

Shrap W Mt Thence Lt hand & head

ADMITTED

1-3-18

FROM

1st Gen & pool

DISCHARGED

B III 9 AUG 1918

TO

2nd Gen & pool

TRANSFERRED

SERVICE AT HOME

2 yrs

IN FIELD

3/12

RESULTS

(See Document Card for M.H. Sheet and other Documents.)

REMARKS.

2-3-18 Wd at knee healed Unable to flex
knee more than 1 Circumference compared
with left is increased by one inch Dies
very quickly on walking not painful Hit
also on ring & middle fingers left hand
fracture of 5th phalanges joint - Finger is much
shorter now - wd healed

B. III

B. Bahanne
Capt Edm. S.

SURNAME. *Booth*

CARD NO.

CHRISTIAN NAMES *William*

B.O.S. Dis. 13/11/18 3
P. U. FOLL.
A.O. 210 of 13/11/18 #3
A.O.

REGL. No. *726101* RANK *Pte.*

UNIT *~~109th~~ # 3 A.D.*

Batt.

FORMER CORPS *Nil*

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL *Booth, George*

RELATIONSHIP TO SOLDIER *Father*

ADDRESS *Burnt River, Victoria Co.,
Ont.*

COUNTRY OF BIRTH *Canada, Burnt River.*

DATE *April 18th 1897*

PLACE OF ATTESTATION *Kimournt, Ont.*

DATE *Jan. 31st 1916*

Sailed from Halifax 23/7/16⁴⁵⁸ per S.S. "Olympic"

MARRIED

SINGLE

Yes.

WIDOWER

TRADE OR CALLING

Farming.

RELIGION

Methodist.

DESCRIPTION.

APPARENT AGE

18

YEARS

10

MONTHS

HEIGHT

5

FEET

5 1/2

INCHES

CHEST MEASUREMENT

34

INCHES

EXPANSION

3

INCHES

COMPLEXION

Fair.

EYES

Blue.

HAIR

D. Brown.

DISTINGUISHING MARKS

Scar from saw cut on dorsum of left foot, extending from base of 2nd toe back-wards and inwards about 2".

MEDICAL EXAMINATION.

PLACE

Kennicott, Ont.

DATE

Jan 31st. 1916.

NAME *Booth William*

REGT'L NO *726101*
H. Q. FILE NO. 649-

RANK AND CORPS *Platoon (109th Bn) 20th Bn. (Regt. Repot.)*

FOLLOWS
No. *(blank)*
FOLLOWS

CABLE No. <i>41-5</i>	DATE
<i>M6370</i>	<i>18-11-17.</i>

NATURE OF CASUALTY
*l. Adm. No., 9 Fld. Amb., Nov., 12th, 1917.
SSW head, knee hand. ✓*

LIST No

HOSPITAL

DATE OF
ADMISSION

REMARKS

B311	Can, Echinghill by minge	29-3-17	V.O.G.
B372	Misch.	15-6-17	" " "
A65	#9. Can. Fl. Amb.	12-11-17	sw R knee L hand & head
A70	#4 Gen. carriers	12-11-17	" R knee " " "
B81	St. W. Gen. Jazakerley	1-12-17	sw. R. knee L. hand.
B156	Mil. Com. Walate ^{L. v. v. v. v.} R. J. J. J. J.	3-3-18	sw R knee L hand & head 29-12-17
B290-2	" " " " " " " " " "	9-8-18	" " " " " " " "
B290-2	" " " " " " " " " "	9-8-18	" " " " " " " "

30-3-18.

NOV 21 1918

Reg. Card Des. 23-11-18
A.K.

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.	In the case of recruits who are rejected on final approval, the discharge documents will consist of (a) Proceedings on Discharge. (b) Attestation. (c) Medical History Sheet (in the event of such having been prepared.)
Med. Hist. Sheet, Militia Form B. 313	
Medical Report for Invalid* " B. 227.	
Statement of Man's Account on Transfer and Last Pay Certificate, " D. 877.	

*Only if discharged "Medically unfit."

N. B.—In the case of a man discharged by purchase, the date and number of Deposit Receipt with amount of same is to be noted hereon.

Post Discharge Pay
Military District No. 3

This space to be for numbers

Proceedings on Discharge.

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

No.	726101
Rank	Private
Surname	Booth
Christian Name	Woods William
NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.	
Corps (Squadron, Battery or Company)	No. 3 District Depot.
Date of Discharge	13-11-18
Place of Discharge	Kingston, Ont.
1. DESCRIPTION AT THE TIME OF DISCHARGE.	
Age	21 years 7 months.
Height	5 feet 8 inches.
Complexion	Fair
Eyes	Blue
Hair	Dark
Trade	Farmer
Intended place of residence	Burnt River, Ont.
(To be given as fully as practicable.)	
2. The above-named man is discharged in consequence of being medically unfit for further War Service. Authority Med. Board D/4-11-18 R.O. 1080 H.Q. File 3MD-88-B-640 File 3DD-3-B-485	
N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.	
3. Conduct and character while in the service have been, according to the records, etc. <i>Very Good</i>	
N.B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldiers and the Officer Commanding his Squadron, Battery or Company.	
4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.) <i>Farmer</i>	

M. F. B. 218.

100M.-1-17.
H. Q. 1772-39-113.

ZP

(OVER)

15.4.64
K.C. Comp. 10.10.19/B.B.

Red 285

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) Kingston, Ont.

M. R. Clarke Lieut.

(Date) 13-11-18

O. C. Discharge Section
No. 3 District Depot
Commanding

8. Certificate to be signed by the Soldier on Discharge

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

(Place) Kingston, Ont. *W. Booth* (Signature of Soldier.)

(Date) 13-11-18 *H. C. Clarke* (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 287 days.

Total 2 years 287 days.

11. Confirmation of Discharge.

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

(Place) Kingston, Ont.

(Signature) *M. R. Clarke* Lieut.

(Date) 13-11-18

O. C. Discharge Section
No. 3 District Depot

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.)

None *W. Booth*

OPINION OF THE MEDICAL BOARD—(Continued).

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

Cat. E.

Disability due to service.

Before signing the President of the Medical Board will read the certificate signed by the soldier, to the soldier, and if no change is indicated will initial the certificate.

PLACE No. 3 Cas. Depot, Kingston.

DATE 4-11-18.

Capt. AMC. President.
Bevilacqua
Members.

APPROVED BY

APPROVED BY

A. L. Mendell Major
Assistant Director of Medical Services.

Director-General of Medical Services.

DATE NOV 6 1918

DATE

TO BE COMPLETED WHEN TREATMENT IS REFUSED

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

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

President.

PLACE

Members.

DATE

MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

- 1. 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.
2. 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 soldier to the "Statement," page 3.
3. In answering the questions, Medical Officers will carefully obtain and record the soldier's statements concerning his condition.
4. Special care is required in answering question 13. Please read the questions carefully. All questions must be answered.
5. If space provided under any sections is insufficient use blank space, page 4 or add another sheet. Such entries or sheets must be initialled by the Medical Board.
6. A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board."
7. Under no circumstances may information other than that in sections 8, 9 and 10 be communicated to the soldier, directly or indirectly.
8. 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.

STATION Kingston, Ont. DATE 1/11/18.

1. 1 (a) Unit 3rd. C.C.D.D. (b) Regimental No. 726101 (c) Rank Pte.
(d) Surname Booth (e) Christian name William

2. Age last birthday 20 Date of birth April 18/1898

3. Enlisted at Burnt River on Jan. 28th., 1916.

4. Personal description:—

(a) Height 5-8 (b) Weight 143 (c) Complexion fair
(d) Colour of hair dark (e) Colour of eyes blue (f) Identification marks scar left foot.

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

Burnt River.

6. Former trade or occupation Farmer.

7. (a) Service France. Years 5 months.

Table with columns: PERIODS, From, To. Rows: 109, 20, Hosp, 3rd. C.C.D.D. with dates 28/1/16, 6/10/16, 6/10/18, 27/7/17, 23/8/18, 8/10/18, To date.

(b) Has he been overseas? yes. 8. Original disease or disability G.S.W.'s Head, left hand, rt. leg.

(a) Date of origin 10-11-17 (b) Place of origin Ypres.

(c) Cause* shrapnel

(d) Present disease or disability Impaired function (1) rt. leg & (2) Left hand. (3) Headache with vertigo.

9. Present condition (a) (Important to be a full description of the present disabling condition or conditions only.) "History" must be recorded in Section 10.

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

Fairly developed and nourished man of age given. Scars of entry (inner and outer) sides of rt. knee adherent with thickening of the tissue of the joint limitation of flexion. Slight crepitation on movement. Scar palmar surface 5th. finger left hand. Contracted. Finger cold, wasted, contracted at terminal inter phalangeal joint. and out of longitudinal alignment. cannot be closed

9. Present condition.—(Continued.)

much above halfway into the palm. Hand otherwise normal, but both hands look congested and are cold. Two small scars of wounds on occipitut. All wounds healed. Walks with slight limp of rt. leg. Face and back scarred with pustulosa acne. Preenlistment and not aggravated by A.S. His statement. Finds difficulty in walking and can only go short distance on account of rt. leg. Leg is weak, painful at times, stiff in the knee and swells after exercise. Left hand deficient in power and painful in cold weather. Has occipital headache, practically all the time with occasional attacks of giddiness (slight) Heart and lungs negative.

(b) Are the following systems normal? If not, briefly state abnormality.

Nervous. yes Digestive. yes Respiratory. yes Cardiac. yes
Genito-Urinary. yes, analysis Skin, Middle Ear, Eye or any other part. skin as stated, otherwise, yes.
Has not lost any teeth on A.S.

10. History: (a) of Condition referred to in "a" section 9. Was 4 1/2 mos in France.

At place and time stated was injured by shrapnel, while in action, causing wounds described. Headaches began at that time. Rt. leg is not improving.

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

Scar on dorsum of left foot, preenlistment, not aggravated A.S.

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

Not applicable.

12. Was the disability caused or aggravated by negligence, by vice or by misconduct, or by unreasonable refusal to accept treatment? 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. & 2. Permanent 3. May improve.

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

To F.A. to 4th. Genl. Hosp to H ospit. Birkenhead, to Conv. Hosp, Epsom. Had special treatment for knee at Epsom.

OPINION OF THE MEDICAL BOARD

14. (Continued).

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit? (If the answer is "yes" state nature of treatment required and probable duration.)

no.

16. Can the former trade or occupation be resumed? Yes, with limitations. (If not, briefly state why.)

17. Recommendations E. Category.

H. B. Jackson Capt. C.M.C.
Medical Officer by whom the case is brought forward.

STATEMENT OF THE SOLDIER.

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

I, the undersigned 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 nil

W. Booth
Signature of soldier examined.

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 criticized.

yes.

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

20. It is certified that the soldier (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).

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

REGT. No. *726101* RANK *Pvt* NAME (IN FULL) *Booth, Wm* (BLOCK LETTERS SURNAME FIRST)

M. OR S.	RELATIONSHIP	PARTICULARS	EFFECTIVE DATE	AUTHORITY	ORIGINAL UNIT C.E.F.	IF IN P.F. WHAT UNIT?	(BLOCK LETTERS SURNAME FIRST)	
NEXT OF KIN					<i>109th Bn</i>			
ADDRESS					PLACE OF ATTESTATION	TRANSFERRED TO	DATE	AUTHORITY
					DATE OF ATTESTATION	TRANSFERRED TO	DATE	AUTHORITY
IS SEPARATION ALLOWANCE PAID? <i>no</i>	DATE EFFECTIVE	<i>Wm Booth</i>			ASSIGNED PAY \$	DATE EFFECTIVE		
		<i>Burnt River. Ont.</i>			PAYABLE TO	RELATIONSHIP	ANY CHANGE IN ASSIGNEE OR ADDRESS	
TO WHOM PAID	RELATIONSHIP				ADDRESS			<i>B. B. 501.</i>
ADDRESS								
					STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE	EFFECTIVE		
					DISCHARGED <i>Kingston</i>	PLACE	DATE <i>Nov. 13/18.</i>	REASON
								AUTHORITY
								IF ENTITLED TO POST DISCHARGE PAY

BALANCE FROM PREVIOUS ACCOUNT

MONTH	PAY AND F.A.		OTHER CREDITS		TOTAL CREDITS		ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY		REGIMENTAL CHARGES		OTHER CHARGES		TOTAL DEBITS		BALANCE		PARTICULARS OR REMARKS	
	NO. OF DAYS	RATE	AMOUNT				COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2	COL. NO. 3	PAY					DEBIT	CREDIT	DEBIT	CREDIT			
		\$	C.	\$	C.	\$	C.	\$	C.	\$	C.	\$	C.	\$	C.	\$	C.	\$	C.	\$	C.	\$	C.	
																								<i>28</i>
																								<i>M. 7W 2595 Rec</i>
																								<i>Dr. Acc. of P.D.P.</i>
																								<i>Adjusted first payment</i>
																								<i>ch. 4087</i>
																								<i># 236539</i>

726101 *P. Booth William*

DATE	PAY		FIELD ALLOWANCE		WORKING OR SPECIAL PAY		ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS				CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS				
	NO. OF DAYS	RATE	NO. OF DAYS	RATE	NO. OF DAYS	RATE				1	2	3	4	1	2	3	4				CREDIT	DEBIT							
																										\$	C.	\$	C.
		349 80							9 85	359 65							48 66	48 66	17 74	150	18 41	283 44	76 18						
May 1	19	1 10								1 10													47 28						
June 20	22									22										15		15	84 28						
" 10	11									11	30	30										121	94 07						
July 31		34 10								34 10										15		15	113 17						
Aug 31		34 10								34 10										15		16 22	131 05						
Sept		33								33	430 14/6									15		16 22	147 83						
		485 40								9 85	494 95												210	18 41	347 12	147 83			

No. Catehughill Patent 21-61-17

MONTH	PARTICULARS	CR.1	CR.2	PARTICULARS	DR.1	DR.2	DR.3	DR.4	BALANCE	DEFER. PAY	SEP. ALLOC. ENG.	MONTH	PARTICULARS	CR.1	CR.2	PARTICULARS	DR.1	DR.2	DR.3	DR.4	BALANCE	DEFER. PAY	SEP. ALLOC. ENG.
Sept 30	Balance Forward								147 83			1918	19 bal/nd				8 95				15	154 12	
Oct		147 83		A.P.					15			Jan	P. Pay	34 10		AR 149 19 Rem 1/18 head	9 73						
	P.P.	34 10							15				P. Pay	34 10		AR 125 10 Rem 2/17	9 73						
Nov	P. Pay	33							15				P.P.	34 10		AR 88 75 2/17 C.C. Expense	9 73					135 09	
				AR 695 30/9 20 Rem	2 68								P.P.	30 80		C.C.P.	38 14					15	15
				760 19/10	4 46								P.P.	34 10		H. Q. change to 4 140 72 1 46 R.R.	9 72					14 16	
				614 19/19	2 68								P.P.	34 10		C.P. 17/12 2/18	9 73					15	15
				827 31/10	3 57								P.P.	34 10		AR 153 76 4/18 C.C. Expense	9 73					15	150 53
				AR 472 30/6 5 Rem	4 87												9 73					15	15
				AR 154 30/11 7 E.H.	1 22																		
				AR 175 1/11 5 head	2 43																		
				AR 770 1/11	2 43																		
				AR 580 13/7	4 87																		
				AR 756 15/8	7 30																		
				AR 670 27/7 5 Rem	12 17																		
				AR 248 14/5 Book Keep	1 22																		
Dec 1918		34 10							15	154 12													
Jan 1919		67 10							30														
									15														
									49 90														
									4 08														
									4 87														
									8 95														
									8 95														

Can Assigned pay Audited 1/5/19

Lead

ASSIGNED PAY: ENGLAND or CANADA. SEPARATION ALLOWANCE: ENGLAND or CANADA.
 EFFECTIVE DATE: 1.8.16. *Stopped effec. 1/10/18*
 AMOUNT: 15^{xx}

NAME: **BOOTH Wm.**
 NUMBER: 726101

NAME, ADDRESS, RELATIONSHIP & AUTHORITY: Mrs Geo Booth (mother)
 Burret River,
 Ontario

WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.

A 3 M. FORM REN'D. *Stopped effec. 1/10/18*
 DISCHARGED TO Canada DATE 30/9/18
 PAY BOOK VERIFIED *Yes*
 Cr: BAL. 98⁶⁶ L.P.C. REN'D. 1/9/18
 AUTHY. N.R. 32 1/9/18 *RECORDED*

Checked *B. Buxley*

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		private

UNIT AND TRANSFERS

ORIGINAL UNIT: 109 BW.

DATE ACCOUNT FIRST OPENED: -

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S P'D	UNIT TRANSFERRED TO
	11/9/18		160 AD n.c.a.

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
14/9/18	519	3rd C.R. B ²	4.87				

DAILY RATES OF PAY AND ALLOWANCES

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

PARTICULARS OF RENDERING NON-EFFECTIVE: Discharge Canada 30/9/18 N.R. 32 1st CORP 1/9/18 Disposal

MONTH 1918	PARTICULARS	CR 1	CR 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
Mar 31	Balance Forward.								15053		
April	Pty pay	33		C.A.P.				15			
				AR 3519 4/4/18 C.C.H. Epsom	4 87				16366		
		33			4 87			15			
May	Pty pay	3410		C.A.P.				15			
				AR 3516 4/5/18 C.C.H. Epsom	4 87				17789		
		3410			4 87			15			
June	✓	33		C.A.P.				15			
				AR 3027 6/6/18 Epsom	4 87						
				RR 1447 26.C.6683 27/6 ✓	50.00				14102		
		33			54 87			15			
July	Pty pay	3410		C.A.P.				15	16012		
				AR 2889 8/7 Epsom	4 87				15525		
		3410			4 87			15			
Aug	C.A.P.	3410		ban a pay				15	17438		
	Luncheon 9/8 to 21/8	876		AR 2920 9/8 Epsom	48 67				13444		
				3963 28/8 26 Oct	48 91				8553		
		42 86			77 58			15			
				AR 519-14/9-3 Res	4 87						
Sep	P. Pay	33		C.A.P.				15	9866		
		33		AR 98.66 10/12/18	4 87			15			
Dec				AR 2205. Can Lab 7c	98 66				9866		
					98 66						
Dec 19	AR 153566 a b 4/12/16 Changed in error		2 43								

Can assigned pay audited 1/5/19

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

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

on the day of 191

Members of the Board:—

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

14. THE ENTIRE DISABILITY.—Without regard to his regular occupation to what extent is his capacity lessened as compared with that of a man of his age and ordinary health in the general market for unskilled 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 (14) is due to causes arising during Active Service?

(i) Is it permanent?

(ii) If not permanent, what is its probable minimum duration (in months)?

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

Signatures of the Board, President, and other officials.

Reserved for M.H.C.

Regt. No. 726101 Rank. Pte Surname Booth Christian Name William

Unit or Corps—(a) Overseas from United Kingdom 20th Bn (b) In United Kingdom 1st Bn Sandringham

Born at—Town Burnt River Province Ontario Country Canada

Date of Birth—Day 18 Month April Year 1898 Age 20 yrs 3 months

Joined at ... Date 28 Jan 1916

Former Trade or Occupation Farmer

Permanent marks or peculiarities that will serve for future identification:

Height—feet 5 inches 6 Colour of eyes Blue

Signature of Soldier (for identification purposes) W. Booth

Medical Report.

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

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

- Disabilities Group (a) IMPAIRED USE OF RIGHT LEG
Disabilities Group (b) IMPAIRED USE OF LEFT HAND
Disabilities Group (c) HEADACHES - DIZZY SPELLS

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

Table with columns: Disease or injury to which the disability is due, Place of origin, Date of origin. Includes entries for 'G.S.W. of Right knee - involving joint - flesh' and 'G.S.W. of left hand - wrist fracture'.

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

3. Is the disability due to disease contracted or injuries received prior to Active Service?

- (i) As to Group (a) above? no
(ii) As to Group (b) above? no
(iii) As to Group (c) above? no

4. Is the disability due to disease contracted or injuries received while on Active Service—

- (i) As to Group (a) above? yes
(ii) As to Group (b) above? yes
(iii) As to Group (c) above? yes

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? **Canada.** (v) When? **1918.**
(vi) Opinion of the Court? **Yes.**

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.)

St. 205. Hit by bursting shrapnel - broken membranes for several hours - taken to C.S. passed through usual medical channels transferred to Epsom - 1-2-18. on special operations for 4 months - some improvement.
notes. field card: "Considerable swelling of Right knee. Pinnerhead. Knee joint had been opened in Epsom. Knee regular."

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

sub. 205. localities right leg pain on walking far or attempted forced flexion.
ii. aneurismic pain side left hand - left hand.
iii. Headaches, dizzy spells -
iv. aneurismic pain - right knee - knee side - healed -
v. aneurismic pain - left knee - knee side - also healed -
vi. aneurismic pain - right shoulder - also healed -
vii. only slight swelling of joint - no wasting of muscles of extremity.
viii. Two small scars - outer side upper third - ring and band of finger left hand - terminal phalanx of left hand is held in flexion position - recurvum movement of fingers normal.
ix. grip fair - hand cold.
x. Vision normal - reciprocal action of eyelids - healthy.

8. OPERATION. (i) Was one performed? **Yes.**

(ii) If so, state what? **Wound cleaned & debrided MI**
(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? **Yes.**

(ii) If so, describe. **Fit of I**

10. DO YOU RECOMMEND:—

(a) Fit for duty? **No.**
(b) Fit for base duty? **Yes. But likely to be raised to category 6 in 6 months.**
(c) Invalid to Canada? **No.**
(d) Discharge from the Service as permanently unfit? **No.**

Date of Report: **15 JUL 1918** Signed: **P. Munro Capt.**
Officer in medical charge of case.

Station: **Weymouth**

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

Dated at: **Military Conv. Hospital Epsom** Station, on **16 JUL 1918** 191

* 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**
If not, indicate it.

12. Is the cause of the disability fully indicated in Part I. (2)? **Yes**
If not, indicate it.

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%) **na.**

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.) **na.**

16. Permanency of the Pensionable Disability estimated next above in (15).
(i) Is it permanent? **na.**
(ii) If not permanent, what is its probable minimum duration (in months)? **na.**

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

18. Remarks.

19. Recommendation:—(a) Fit for duty? **No**
(b) Fit for base duty? **Yes. But likely to be raised to category 6 in 6 months. Temporary in Category 6.**
(c) Invalid to Canada? **na.**
(d) Discharge from service as permanently unfit? **na.**

Classification for the Military Hospitals Commission.

Date of Board **18.7.18.**

Station **Epsom**

Approved **[Signature]** Major, O.A.M.S.
Dated at **Weymouth** Station **1 AUG 1918** 191