

726048

SIN/NAS

Booth

Surname/Nom

William Richard

Given names/Prénoms

CANADIAN FORCES  
FORCES CANADIENNES

PERSONNEL RECORDS ENVELOPE  
ENVELOPPE DES DOSSIERS DU PERSONNEL

"CONTENTS CONFIDENTIAL"  
"CONTENU CONFIDENTIEL"

Box  
889

COMPONENT  
ÉLÉMENT

CEF



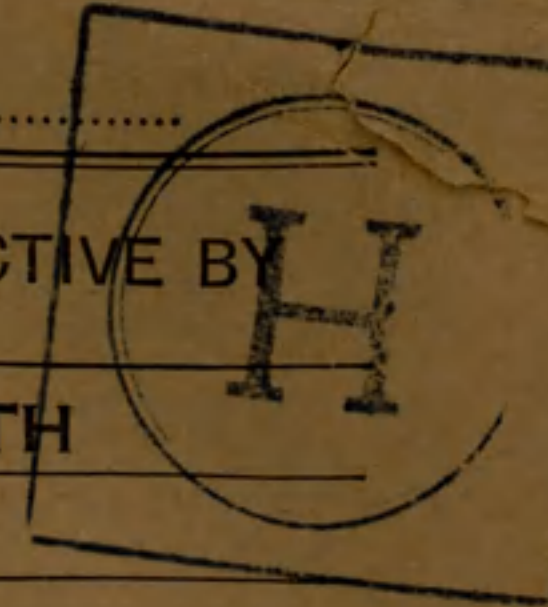
C.E.F. REGIMENTAL DOCUMENTS

NAME **BOOTH WM. RICHARD**

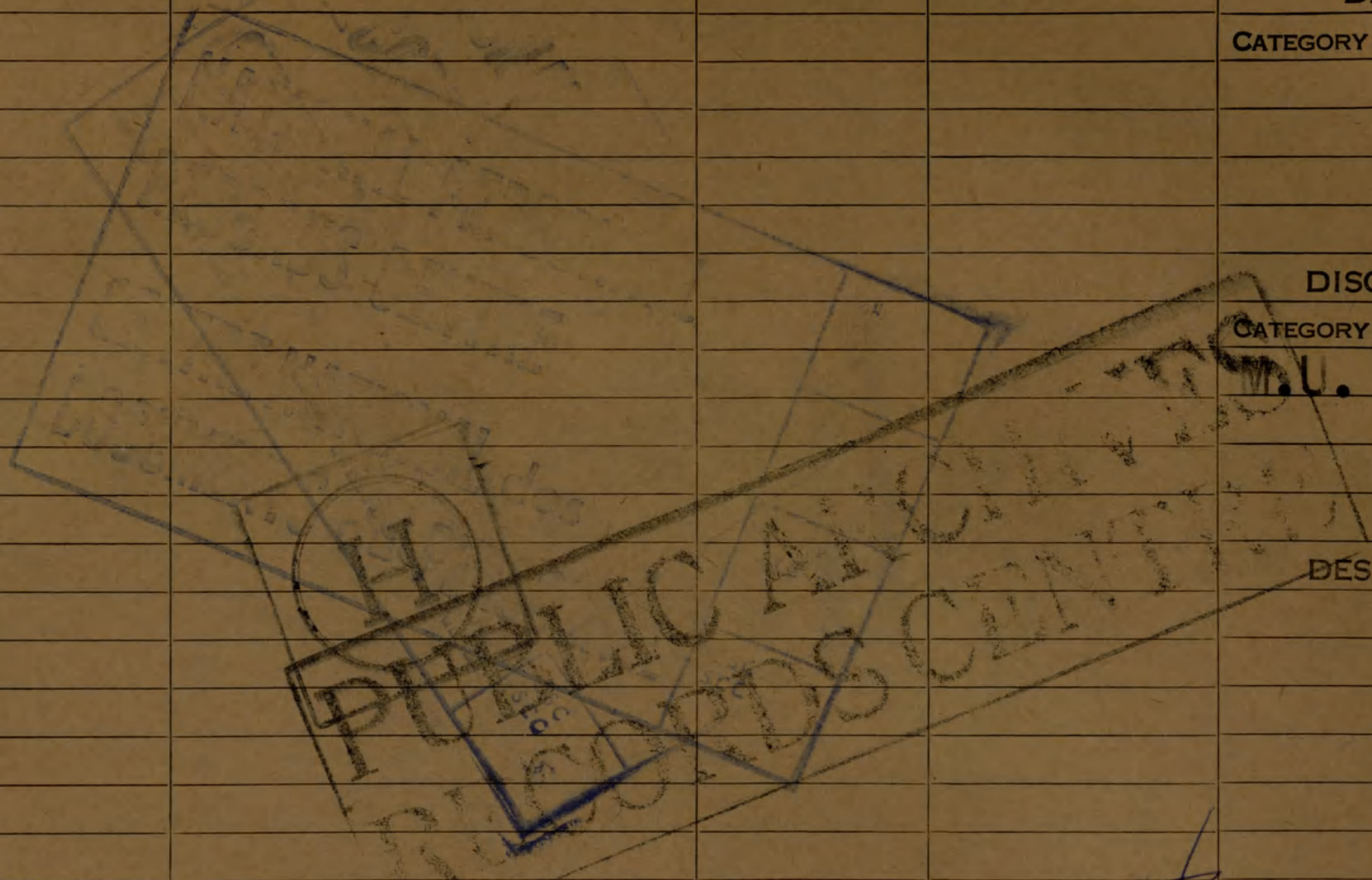
REGT. No. **726048**

UNIT **109 BN**

H. Q. FILE No. **28335**



CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
ATTESTATION PAPER (M.F.W. 23, 133 or 51)					DEATH
CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					CATEGORY
TRAINING HISTORY SHEET (M.F.W. 113)					
FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
REGT. CONDUCT SHEET (M.B.W. 263 or A.F.B. 120)					
COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
DENTAL HISTORY SHEET (M.F.B. 465)					CATEGORY
MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					M.U.
MEDICAL EXAMINATION (M.F.W. 129)					
TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
LAST PAY CERTIFICATE (M.F.W. 44)					
PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
PARTICULARS OF CHARACTER (A.F.W. 3226)					
COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
CARDS					
PAY-SHEETS					



Box A  
889

*[Handwritten signature]*

ATTESTATION PAPER.

No. 726048

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

Folio.

ORIGINAL

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

- 1. What is your surname? Booth
1a. What are your Christian names? William Richard
1b. What is your present address? Burut River
2. In what Town, Township or Parish, and in what Country were you born? Burut River Victoria
3. What is the name of your next-of-kin? Henry Edward Booth
4. What is the address of your next-of-kin? P.O. Burut River Canada
4a. What is the relationship of your next-of-kin? Father
5. What is the date of your birth? July 12th 1897
6. What is your Trade or Calling? Farmer
7. Are you 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? No
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 Richard 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 5th 1916. Signature of Recruit: William R Booth. Signature of Witness: McCulloch capt.

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, William Richard 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 5th 1916. Signature of Recruit: William R Booth. Signature of Witness: McCulloch capt.

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 Kinnouit this 5th day of January 1916. Signature of Justice: J. White.

# Description of William Richard Booth on Enlistment.

Apparent Age.....18.....years.....months.  
 (To be determined according to the instructions given in the Regulations for Army Medical Services.)

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

Height.....5 ft. 9 1/2 ins.

Chest measurement. { Girth when fully expanded.....36 1/2 ins.  
 Range of expansion.....3 1/2 ins.

Complexion.....Fair  
 Eyes.....Light Brown  
 Hair.....Brown

*Small scar on outside of right leg below the knee.*

Religious denominations.  
 Church of England.....  
 Presbyterian.....  
 Methodist.....Method.  
 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.....Jan 15<sup>th</sup>.....1916

Place.....Kinsmount

*J. McCulloch*  
*H. Boyd*.....Capt.  
 Medical Officer.

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

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

## CERTIFICATE OF OFFICER COMMANDING UNIT.

William Richard 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.

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

Date.....JAN 15 1916.....1916

# CANADIAN EXPEDITIONARY FORCE

## Discharge Certificate

This is to Certify that No. 726048 (Rank) Pte.

Name (in full) BOOTH William Richard. enlisted in  
the 109th. Bn.

CANADIAN EXPEDITIONARY FORCE at Kinnmount, Ont. on the 5th.  
day of January, 19 16.

HE served in England and France.

and is now discharged from the service by reason of  
" Medically Unfit."



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

Age 22.  
Height 5' 9½"  
Complexion Fair  
Eyes Blue  
Hair Fair

Marks or Scars  
Vacc. scars on left Arm.  
G.S.W. Right Leg. 31-10-17.  
Gold Stripe One.-----1.

Pte Wm R Booth  
Signature of Soldier

J.R. Robinson Lieut  
Issuing Officer

Date of Discharge Feb. 5th. 1919.

O. C. Discharge Sections,  
No. 2 District Depot  
Appointment

Signed at Toronto, Ont. this 5th. day of Feb. 19 19  
in Military District No. 42.

File Reference No. \_\_\_\_\_

R.L.

No. 2

FEB 5 1919

DISTRICT DEPOT

M. F. W. 39a.  
250m - 6-18.

H. Q. 1772-39-882.

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. .... (Rank) ..... Name .....

Unit .....

Address on Discharge .....

Character and Conduct .....

Former Occupation .....

Special Qualifications of Value in Civil Life .....

Medals and Decorations .....

Remarks .....

Signed at ..... this ..... day of ..... 19 .....

.....  
Name of Officer

.....  
Rank  
O. C. Discharge Sections,  
No. 2 District Depot  
Appointment

On demobilization the particulars called for on the back of this certificate will not be completed.





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

Army Form B. 181.

Corps \_\_\_\_\_

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

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

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

Age \_\_\_\_\_ Service \_\_\_\_\_

Disease \_\_\_\_\_

Date of admission \_\_\_\_\_

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

Result \_\_\_\_\_

Dates of Observation																														
	Days of Disease																													
Temperature, Fahrenheit	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time
	A.M.P.M. A.M.P.M.																													
107°																														
106°																														
105°																														
104°																														
103°																														
102°																														
101°																														
100°																														
99°																														
98°																														
97°																														
Pulse per Minute																														
Respirations per Minute																														
Motions per 24 Hours																														

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

A.G.R. Rank Name BOOTH, William Richard Reg'l No. 726048

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

Place and Date of Enlistment Kinmount, 5th Jan., 1916. Place of Birth Burut River, Victoria.

Name and Address, Next-of-Kin Henry Edward Booth,  
P.O. Burut River, Ont., Canada. Relationship Father.

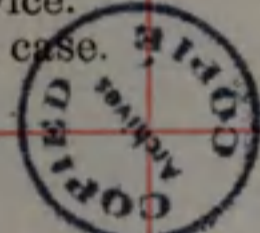
Assigned Pay Monthly \$ Payable to Relationship

Separation Allowance \$ Payable to Relationship

N/E. R.B. No. 7818  
File R.L.  
Capt. *Law M.V.*

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.				
					
		Arrived in England per H. M. T. 2810		31-7-16	
3-10-16	109 <sup>th</sup> Bn	Adm'd to B.M. Hospital	Bramsholl	1-10-16	Pt II. DD. 277. C.R. 18
9-10-16	do	Trans to Can. Con Home Beaumont by Kingham	do	5-10-16	Pt II. DD. 283. C.R. 26
10-10-16	do	Dis from B.M. Hospital	do	14-10-16	Pt II. DD. 279. C.R. 26
24-10-16	do	Cancel transfer to Beaumont	do		Pt II. DD. 298. C.R. 26
4-12-16	do	SD on tfr. to 38 <sup>th</sup> Bn	Dr. Hiley Field	4-12-16	Pt II DD. 339.
13-12-16	38th Bn	T-O-S on tfr from 109th Bn	Field	6-12-16	Pt II DD 242.
6-11-17	E.O.R.	Adm. No. 44 Cas. Clg. Str.	Field	21-10-17	CP. A. 56 SW R. Leg.
10-11-17	✓	Trans. No. 26 Gen. Hosp.	Etaples.	2-11-17	CP. A. 60 ✓ ✓
14-11-17	✓	Adm. Gen. Mil. Hosp.	Colchester	9-11-17	CP. B. 63 ✓ ✓

A.F.B. 1037 CHECKED 9 DEC. 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.				
15-11-17	38th Bn.	Posted to E.O.R.D. Seaford Field	Seaford	8-11-17	E.O.R.D. Pt. II 105 & Pt. II 251 d 18-11-17 Cancelled by Pt. II No 183 5/19-4-18.
<del>21-6-18</del>	<del>E.O.R.D.</del>	<del>Granted permission to marry</del>	<del>Seaford</del>	<del>20-6-18</del>	<del>Pt. II No 183</del>
1-10-18	E.O.R.	In. Beauville Can. Sp. Hosp & Invalided to Canada	Pt. Buxton	24-9-18	C.P. 8331. S.I.R. Reg.
10-10-18	E.O.R.D.	Invald. Home & S.O.S. C.P. in care for further Medical treatment	Pt. Seaford	24-9-18	Pt 4 0 254



# DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

DISTRICT

*Whitby*

NAME OF SOLDIER

*Booth Richard Wm.*

*28th*

REGIMENT

RANK

*Pvt*

No. *726048*



## INSTRUCTIONS

1. On examination the condition of patient's mouth to be marked on diagram in red ink.
2. On first line of report record of same to be made in red ink.

Only such entries to be made on this sheet as will show :

1. Condition on examination (in red).
2. Condition on leaving Canada.
3. Condition on discharge.

Date	Amalgam	Temporary Filling (a) (G.P.) (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhoce	Synthetic Porcelain	Extracting	Dentures			Gold Clasp	Gold Filling	Crowns		Bridge Work	OPERATOR	Military Dist.	REMARKS
											U	L	P			Gold	Porcelain				
Condition on first Examination																					
<i>Discharge Exam Whitby Jan 28-19</i>																			<i>W W Thomson Capt</i>		<i>No previous History Sheet Refused treatment</i>

THE UNIVERSITY OF CHICAGO  
LIBRARY

1900-1901  
1902-1903

Delivered to the President  
of the University of Chicago  
by the Librarian  
January 11, 1901

THE UNIVERSITY OF CHICAGO  
LIBRARY

ORIGINAL

Duplicate  
a  
a

MEDICAL HISTORY SHEET.

Surname Booth Christian Name William Richard

Examined { on 5<sup>th</sup> day of January 1916  
at Kimourat  
Birthplace { City or Town Saint Remy  
County Victoria

Approved by \_\_\_\_\_  
Rank \_\_\_\_\_ M.O.

Apparent age 18  
Trade or occupation Farmer  
Height 5 Feet 9 1/2 Inches  
Weight 148 Lbs.  
Chest measurement { Minimum 33 inches  
Maximum expansion 36 1/2 inches  
Physical development Good  
Small-Pox Marks None

Date.	Fit or Unfit.	EXAMINED FOR RE-ENGAGEMENT.
		<u>14 NOV 1917</u> M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Vaccination Marks { Arm Right 0 Left 1  
Number 1

Date.	Result.	VACCINATIONS.
<u>31.1.16</u>	<u>good</u>	<u>HOB</u> M.O.
		M.O.
		M.O.

When Vaccinated last \_\_\_\_\_  
(a) Marks indicating congenital peculiarities or previous disease None

Date.	Result.	ANTI-TYPHOID INOCULATIONS, ETC.
<u>26.4.16</u>	<u>good</u>	<u>HOB</u> M.O.
<u>2.5.16</u>	<u>good</u>	<u>HOB</u> M.O.
<u>12.5.16</u>	<u>good</u>	<u>HOB</u> M.O.
<u>2.11.17</u>	<u>good</u>	<u>HOB</u> M.O.

Enlisted on 5 day of January 1916 at Saint Remy

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>109<sup>th</sup> Bn</u>	<u>726048</u>		<u>5.1.16</u>
Transferred to	<u>88th Bn.</u>			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>Granville C.P.A</u> <u>Burton</u>	<u>July 8<sup>th</sup> 1918</u>	<u>G.S.W. right leg fracture</u> <u>tibia</u> <u>weakness &amp; pain R. leg.</u>	<u>Invalid to Canada</u> <u>with leave</u> <u>Capt. Cant</u> <u>Capt.</u> <u>N.S. Burgess Capt</u> <u>for res. S.M.B.</u>
<u>WHITBY MILITARY HOSPITAL</u>	<u>JAN 28 1919</u>		

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

CANADIAN

Christian Name *Wm Richard*

Surname *Booth*

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				
<i>S. Loran Rest Hosp</i>		<i>9</i>	<i>11</i>	<i>17</i>	<i>24</i>	<i>2</i>	<i>18</i>	<i>G.W. R. Leg.</i>	<i>108</i>	<i>Healed, but contraction of tendo-achilles, transferred to</i>	<i>J. Admin</i>
<b>ONTARIO MILITARY HOSPITAL</b> <b>ORPINGTON, KENT</b>	<i>24-2-18</i>	<i>24</i>	<i>2</i>	<i>18</i>	<i>12</i>	<i>4</i>	<i>18</i>	<i>L.S.M R. leg</i>	<i>48</i>	<i>Scar 4" long ant. surface R. leg upper third (2) Scar 8" long super ext surface leg upper &amp; middle thirds (3) Scar 8" long on int. surface leg. Partial foot drop - contusion of T.A. Foot cyanotic &amp; clammy. Very limited flexion of ankle. Complains of pain in int. plantar surface of foot. Transferred to H. 12-4-18</i>	<i>W. MacLark</i>
<b>CANADIAN CONVALESCENT HOSPITAL</b> <b>BROMLEY, KENT.</b>		<i>12</i>	<i>4</i>	<i>18</i>	<i>16</i>	<i>4</i>	<i>16</i>	<i>G.W. R. Leg</i> <i>Fract. tibia</i>	<i>5</i>	<i>Circulation in lower half of left leg not good. Some loss of sensation dorsum of foot. Foot movements very slight</i>	<i>W. MacLark</i>
		<i>16</i>	<i>4</i>	<i>18</i>						<i>Had. operation - May 9<sup>th</sup> lengthening T. Achille. put foot drop. Foot in plaster slint. 6 weeks. Plaster removed and foot and leg managed daily. followed by legs. Improving steadily.</i>	<i>Hutchinson</i> <i>Capt C.M.C.</i>





# CASE HISTORY SHEET.

Hospital.

Station.

No. 726048 Rank Pte Name Booth R. Age 19

Unit 109<sup>th</sup> Completed years of service 1 1/2 Where and how long 1 1/2

Date of admission 9-11-18 Date of discharge

Diagnosis Ulcer on leg Place of origin

### CONDITION ON ADMISSION AND PROGRESS OF CASE.

SS Ball Case

13/11/18 - There are many linear scars on calf of  
rt. leg. There is an ulcer size of a quarter on  
outer side of rt. calf of leg & have bor. ac.  
ointment dressings applied once daily

27/11/18 - Condition of ulcer slightly improved. To have  
paper treated & copper sulphate daily.

*[Signature]*

WHITEBY MILITARY HOSPITAL JAN 28 1919

227 Melina Bond Bat E

We recommend that he be discharged  
"Having been found medically unfit  
for service."

### FAMILY HISTORY

(Tuberculosis, mental or nervous diseases.)

### TREATMENT

(Especially any specific or special form.)

### CONDITION ON DISCHARGE

(and disposal made of case.)

Date

Medical Officer i/c case.

639806





CANADIAN EXPEDITIONARY FORCE.

M.F.W. 44.  
1188 (D.P.) 250M.-12-18.  
1772-39-903.

LAST PAY CERTIFICATE

Regimental No. 726048 Rank Pte Name Booth R  
(Surname first)  
Unit No. 2 Distiller Depot. who was\* DISCHARGED  
On July 5 1919, to.....  
\*Insert "discharged" or "transferred."  
The following is a statement of the account of the above named from July 1 to 5 1919  
the inclusive date of transfer or discharge.

	Dr.	Cr.
Bal. Dr. or Cr. from prev. month		
Regimental Pay..... <u>5</u> days at \$ <u>1.00</u> c.		<u>5.00</u>
Field Allowance..... <u>5</u> days at \$ <u>.10</u> c.		<u>.50</u>
Separation Allowance		
Clothing Allowance		<u>25.00</u>
Post Discharge Pay		<u>70.00</u>
*Other Credits		
Advances	<u>5.00</u>	
Separation Allowance and Assigned Pay Cheque No.		
*Other Charges		
Balance on transfer or on discharge, cheque No. <u>19632</u>	<u>105.50</u>	
Total	<u>110.50</u>	<u>110.50</u>

\*Give particulars.

A monthly stoppage of \$..... (†) has..... (‡) been paid on account of  
Assigned Pay for the month of.....191..... }  
and Separation Allce. for month of.....191..... } (to) Assignee .....

(Address) .....

(†) 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 ..... married or single.....  
(2) Separation Allowance, entitled or not No (3) Reason for discharge on unfit  
(4) Authority for discharge or transfer 2032

NOTE.—S.A. & A.P. Card and Index Card (M.F.W. 71) are to accompany Last Pay Certificate on transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay Account of the officer or soldier.

Date 3-2-19  
Place TORONTO, ONT.

[Signature]  
Paymaster.

N.B.—(A) This form is to be used for all ranks (vide Article 122-130 and 141) Financial Instructions, C.E.F., 1916.  
(B) For purposes of transfer it is to be made out in triplicate. Copies will be disposed of in accordance with instructions as laid down in Routine Order No. 1807, dated 12th Nov., 1918. Payment of the balance will not be made and the words "or on discharge cheque No." will be deleted.  
(C) For purpose of discharge it is to be made out in duplicate. One copy to accompany discharge papers, and one copy for retention as a record. As payment of the balance will have been made, the words "on transfer or" will be deleted.  
(D) If a man on discharge is entitled to Post Discharge Pay, Last Pay Certificates will be made out as in "C" with an additional copy to be forwarded to the District Paymaster.



*Jr*

**DUPLICATE**

H.Q. 54-21-23-53

To be made out in 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..... 726048

(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 Henry Booth Burnt River

(10) Is your Mother alive? yes

If so, state name and address Hephina Booth

Burnt River Ontario

(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.

15) Are you insured?..... no

If so, in what Company?.....

Have you made arrangements for payment of your Insurance premium.....

If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.



Date..... JUL 11 1916

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

Ward 1

**MEDICAL CASE SHEET.\***

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname	Christian Name.
	726048.	Pte.	Booth.	W.R.
Year	Unit.	Age.	Service.	
1917.	38 <sup>th</sup> Canadians.	21.	2 <sup>6</sup> / <sub>12</sub> .	
Station and Date.	Disease			
Sappers Walden Nov. 9 <sup>th</sup>	G.S.W.R. Leg.			
Nov 20	A.T.S. (1) France. 500. 31.10.17.	(2) Sappers Walden 500. 25.11.17.		
Jan 3.	Wound done well dressed with $\frac{1}{50}$ carbolic & irrigated with Hydrogen Perox. 20 Vol. 6 <sup>th</sup> & warm aq. Tubes still in. Plugs diminished & packed with BIPP. External dressing, sterilized gauze in Casol — Wounds much improved.			
Feb. 20.	Wounds healed: contraction of Tendo Achilles remains — slight & will improve. J.P. Atkinson M.D. 17			
24.2.18.	Transferred to Ontario Military Hospital, Ottawa, for treatment.			

\*The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.  
(44502) Wt. W 11203—M 1150. 1,450,000. 6/19,16. C.F.&S. Forms/I. 1237/12. (E229) P.T

Station  
and Date.

MEDICAL CASE SHEET.\*

*P. Booth* 27/81  
30/170-27/161

No. in Admission and Discharge Book.

Regimental No.

Rank.

Surname.

Christian Name.

726048 Pte. Booth

W.R.

Unit.

Age.

Service.

Year

1918

38 Lancashire

21

27/12 18/12

Station and Date.

Disease

L.S. W. Pt. leg. frac. Tib.

Occupation

Farmer

Enlisted

Burton River

Dec. 15/15

15 England

July 20/16

30 France

Dec 15/16

Wounded

Ypres

Dec 29/17

No. 2 C.C.S.

Oct 30/17

Genl. Staples

Oct 13/17

Saffron Walden Essex

Nov. 20.

Chelington

Feb 20/18

Bromby Giral. Home

Apr 11. 18.

G.C.S. H. Duxton

Apr. 16. 18.

Hoop

History

Wounded by machine gun bullets in the right leg. Operated on at Staples and six bullets removed. Wound healed by Feb 12/18.

Present Condition

Scar 3 1/2" long anterior aspect right tibia  
Scar 5" long inner side leg. Scar 6" calf  
of leg. Dorsiflexion of ankle limited, not  
able to, without help limp as it seems to be  
pulling in leg, can't get far enough use of  
muscles of calf same applies to dorsiflexion  
of foot. Other movements of foot seem to be  
free. Knee movements normal. Nothing  
abnormal found in the system.

J. J. Dauby Capt. Comd.



Station  
and Date.

Operation Longspur, T.A. W.T.

April 27<sup>th</sup> 1918

From operation April 29<sup>th</sup> 1918 J.A. Webb.

April 31<sup>st</sup> 1918

This man was in preparatory room for operation. He left without any authority or explanation.

J.A. Webb  
Capt.

Operation W.T.

May 8/17.

Operation - By Mag. Turner  
Tenotomy tendo Achillis by subcutaneous method. Foot put in plaster at about 15° above rt. angle. Plaster to remain on 6 wks.

J.F. Bontag

12/5/18

comfortable in bed. J.F.B.

May 23<sup>rd</sup> 1918

Foot in plaster

J.A. Webb

May 30<sup>th</sup> 1918

Foot in plaster

J.A. Webb

31/5/18

Canadian Boots

W.T.

June 6<sup>th</sup> 1918

Massage right ankle - Gymnasium trial class

J.A. Webb

June 13<sup>th</sup> 1918

making excellent progress

J.A. Webb

22 JUN. 1918

A.F.B. 179 I.C.

Deep scar involving calf muscles excludes from heavy day's work in army

W.T.

EXAM. MED. BOARD  
JUL. 1918  
G. C. S. H.

29-7-18

Transferred to Sect 13 for 10 days

J.F.B.

4-8-18

Creating Ito C.

5-9-18

wanting to go back to Canada.

W.T.

MEDICAL CASE SHEET.\*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	726048	Pte	Booth	William R.
Year	Unit.		Age.	Service.
1918	38 <sup>th</sup> Bans.		21	26 12
Station and Date.	Disease <u>G. S. W. R. Leg</u>			
Orpington. 24-2-18	<p>Next of kin - W. C. Booth (father) Glen Arm, Ontario          Enlisted 15-12-15 at Burnt River with 109<sup>th</sup> Batta          Came to England 4-7-16. France 15-12-16. Wounded          29-10-17 at Ypres. Machine Gun Bullets Rt Leg.          Patient dressed his own wounds, was then carried by stretcher          bearers to road and taken to C.C.S. by ambulance.          Wounds redressed and A.T.S. injected, then sent to 26<sup>th</sup> Gen          Hospital at Etaples. Two operations, six bullets removed          from leg and splint applied. Two A.T.S. injections, then          sent to Red Cross Hospital, Saffron Walden Essex.          Daily dressing, A.T.S. injection. Arrived at No 16 Casual          General Hospital, Orpington 24-2-18</p>			
24-2-18	<p>COB</p> <p>(1) Scar 4" long on anterior surface R. leg          in upper third (2) Scar 5" long on posterior          external surface of leg upper middle third          (3) Scar 8" long on internal surface of leg          Tends Achilles contracted. Foot drop          Foot cyanotic and clammy. Can flex foot at          ankle to very limited extent. No movement of          great toe but has limited power of flexion          in H. other toes. Complains of pain on          internal plantar surface of foot. Since          patient says to a fall he had before leaving          Saffron Walden Hosp. Put up in foot splint          (rectangular).</p>			
4-3-18	<p>Pain in foot decreasing. Crushes</p>			

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

Station  
and Date.

15-3-18

Electrical Reactions: - Paralysis: -

Patient is most intolerant of faradic current, and I had to sit on his knee to get any satisfactory results.

Normal response of: ① Tibialis anterior  
② Peronei  
③ Gastrocnemii  
④ Iliacs.

Some response of Ex. Long. Dig. But it is in area of wound, which is very tender.

Not able to get Ex. Hallucis Proximalis - but will try again.

Please have his return for faradic treatment.

C. H. Brain Esq.

25-3-18

Improving. Foot not nearly so painful

5-4-18

Condition about the same

12-4-18

Transferred to C. H. A.

admiral

Capt. Lamb

Bromley

16/4/18

Transfer to Granville for further treatment

James H. Howell.

Lieut. Col.

15-Aug-18

Sept. 13 for 14 days.

Sh

Sheet No 2

Regimental Number 726048

Casualty Form - Active Service.

Regiment or Corps 109th Coy 13th Bn C.E.F.

Rank Private Surname Booth Christian Name William Richard

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

Enlisted (a) 5-1-16 Terms of Service (a) D.F.W. Service reckons from (a) 5-1-16

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

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

Occupation ... Signature of Officer

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
Date	From whom received				
		Embarked ...			
		Disembarked ..			
15-11-17	GOR.D	Posted from 38th Bn	Seaford	8.11.17	Pt 251 dt 18-11-17 Lieut. for Lt-Col i/c Records. ONFC
21-6-18	G.O.R.D	Granted permission to marry	Seaford	20-6-18	Pt 159 Lieut. for Lt-Col i/c Records. ONFC
		Embarked for Canada		24/9/18	

(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.

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

4-9-18

T.O.S. No. 2 District Depot, Part II, D.O. No. 126

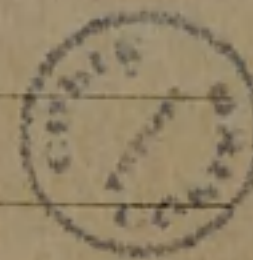
*W.M. Jupp*  
Lieut. and Asst. Adj.

For O.C. No. 2 District Depot

Dis. #2.D.D. Feb.5th.1919. Pt.11#52.

*W.M. Jupp*

O. C. Discharge Section,  
No. 2 District Depot



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

*DSBm*

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

# Casualty Form—Active Service.

Unit, Regiment or Corps 100th OVERSEAS BATTALION, C. I. F.

Regimental No. 426048 Rank Private Name Booth William Richard

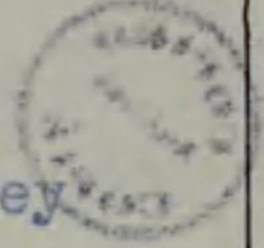
Enlisted (a) 5.1.16 Terms of Service (a) O of W Service reckons from (a) 5.12.15

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

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

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	
4-12-16	O.C. 109th.	Proceeded overseas for service with 38th. Btn.	Witley	4-12-16	D.O. Pt. 11 339

CERTIFIED CORRECT.  
 12 DEC. 1916  
 CANTON RECORDS, LONDON.



*Autthelting*  
ADJUTANT  
100th Overseas Battalion, C. I. F.

*Autthelting*  
ADJUTANT  
100th Overseas Battalion, C. I. F.

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

726048

Booth W.R.

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				
6 12 16	C.B.D.	TAKEN on STRENGTH 38 <sup>th</sup> Havre		6 12 16	N. R. Promo. 24 13. 12. 16
7 12 16	"	Left for Unit	FIELD	7 12 16	N. R.
16 12 16	Unit	Joined Unit	FIELD	9 12 16	B. 213. DCS. 69. 30 12 16
15. 1. 17	C.B.D.	T.O.S. "A" on being withdrawn from firing line of trench	Laure	15. 1. 17	NR. a.c. J. 1905-1916. Letter a.a.g. KE 184/79d 4 1/7.
2 5 17	"	Left for 1st Army Inf. School		2 5 17	NR. KR 11576.
27 6 17	1st A. Sch. of Inst.	joined unit.	1st Army Sch.	10 5 17	KE 16/11407. Dec 2 132
3 9 17	A.A.C.	Navo sep. over 19 yrs ago. dispatched to unit	to be to 1st A. S. of I. Base.	3 9 17	KE-184-79 Z. (19. 9. 17).
76 9 17	H. C.B.D.	T.O.S.		16 9 17	NR. 82.
26 9 17	C.C.R.			26 9 17	"
28 9 17	C.C.R.	Arrived "		28 9 17	" 69
11 10 17	"	To Unit		11 10 17	" 10
20 10 17	"	Joined Unit		10 10 17	B213
3 NOV 17	38 th.	Wounded in Action	Field	31 OCT 17	"
2 11 17	H. C.B.D.	SW Leg R	44 C.B.D.	21 10 17	A36/1310/658
"	26 Jan.	do	22 9 17	2 11 17	W3083/4279
"			26 Jan.	2 11 17	W3083/4279
8-11-17	"Newhaven"	WOUNDED and posted to East. Ont. Reg. Depot, Seaford,		8-11-17	W3083-4279 Pt II Ord 105 a/15-11-17



*J. Anderson* for Lieut. Col. A. A. L. Con. Sect. 3<sup>rd</sup> Echelon.

16 Canadian General Hospital.

Ward I

No. of Bed 29

Date 23-3-18

Regl. No.	Rank and Name.	Corps.	Part to be X-Rayed.
726048	Pte Beach <u>WH</u> 38th Cav.		R. Foot

**SHORT HISTORY OF CASE.**

(To be completed by M.O. i/c case.)

Nat. Canadian  
 Brigade 12th  
 Division 4th  
 Wounded at Ypres 29-10-17

Referred Red Cross Hosp.  
 Saffron Waldens  
W. MacLachlan

Signature of M.O. W. MacLachlan

Date 23-3-18

**REPORT ON RESULT OF X-RAY EXAMINATION.**

(To be completed by Radiographer.)

No. of Plate R 4238 2 8 1/2 x 6 1/2 A.P. + Lat.

**XX**  
 Negative.  
 Splint + dressing obscured  
 picture

Signature of Radiographer L. Hilalinski

Date Feb 26/18

Cap



REPORT OF THE COMMISSIONERS OF THE LAND OFFICE  
TO THE HOUSE OF COMMONS

IN THE YEAR 1851



1669 St

Hospital.

Ward I

No. of Bed 29

Date 29-3-18

Regl. No.	Rank and Name.	Corps.	Part to be X-Rayed.
726048	Pte Bishop	38th Cav	R. Foot

SHORT HISTORY OF CASE.

(To be completed by M.O. i/c case.)

Regt. Canadian

Battalion 12th

Division 4th

Wounded at Ypres 29-10-17

Referred. Red Cross Hosp  
Saffron Waldron.

Signature of M.O. W. MacLellan

Date 29-3-18

REPORT ON RESULT OF X-RAY EXAMINATION.

(To be completed by Radiographer.)

No. of Plate R 365-1<sup>2</sup> 82 x 62 A.P. 1/2

0/238

Negative

W. MacLellan

Signature of Radiographer

Date March 31/18

Cap

REPORT OF THE COMMISSIONERS OF THE LAND OFFICE  
FOR THE YEAR 1877

PRINTED BY THE GOVERNMENT PRINTER  
1878

1878



# ASSIGNED PAY

OVERSEAS CONTINGENTS

Mrs. Henry Booth.  
Sheet No. 2.  
(Assignee)

Name of Soldier: Booth. W.R.  
736 048 Pte 109th Battr.

## PAYMENTS.

L. L. Job 5470—Req. 6888.

*W.A.*

*W.A.*

Month.	Year.	Cheque No.	Amt.	Remarks.
				15 <sup>00</sup> Aug 16
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.		W31123	75	Sp. Reg. 30-12-16 L <sup>1</sup>
Jan.	1917	W31780	15	75 <sup>00</sup> Dec to adjust <u>15<sup>00</sup> Future.</u>
Feb.		W38757	15	15 (W)
March		V44582	15	15 R
April		X133	15	15 B.
May		U6672	15	Glennarm P.O. Ont. 22/5/17
June		C12874	15	15 S
July		W27687	15	Lu
Aug.		Y27124	15	Lu
Sept.		Y33938	15	Lu
Oct.		M47895	15	Lu ✓
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE  
**ASSIGNED PAY**  
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

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

**PAYMENTS.**

Month.	Year.	Cheque No.	Amnt.	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

45

Mrs. Henry Booth.  
To Whom  
Address  
Glenarm, P.O.  
22/5/17 P.O.S.  
Rate 15<sup>00</sup> Aug 16.

By Whom Assigned

Booth. W.A.

Regtl. No. 726048.

Rank

Pte.

Corps

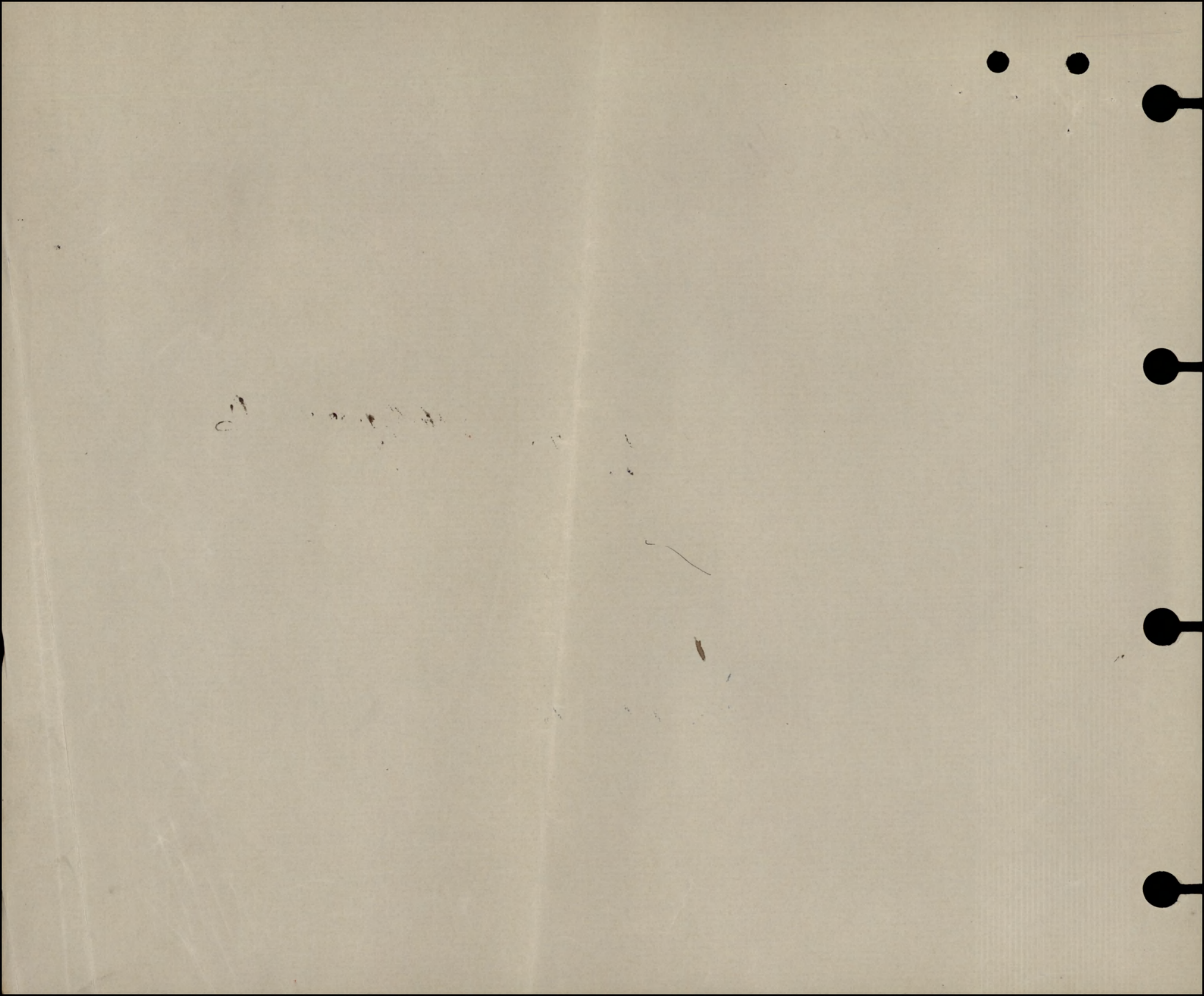
109<sup>th</sup> Batta. C.E.F.

2nd 8<sup>9</sup>/<sub>16</sub> at 30/12/16

PAYMENTS SEE ALSO ACCOUNT IN SPEC. REM. LEDGER.

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				





MILITIA AND DEFENCE  
**ASSIGNED PAY**  
 OVERSEAS CONTINGENTS

415

To Whom *A. Booth*  
 Address *Glenam P.O. Ous.*

By Whom Assigned *Booth, W. R.*  
 Regtl. No. *726048*  
 Rank *Pl.*  
 Corps *38th Bn*

Rate *\$ 19.46*

SPECIAL REMITTANCE

*Chkd #380. 15.6.17*

PAYMENTS

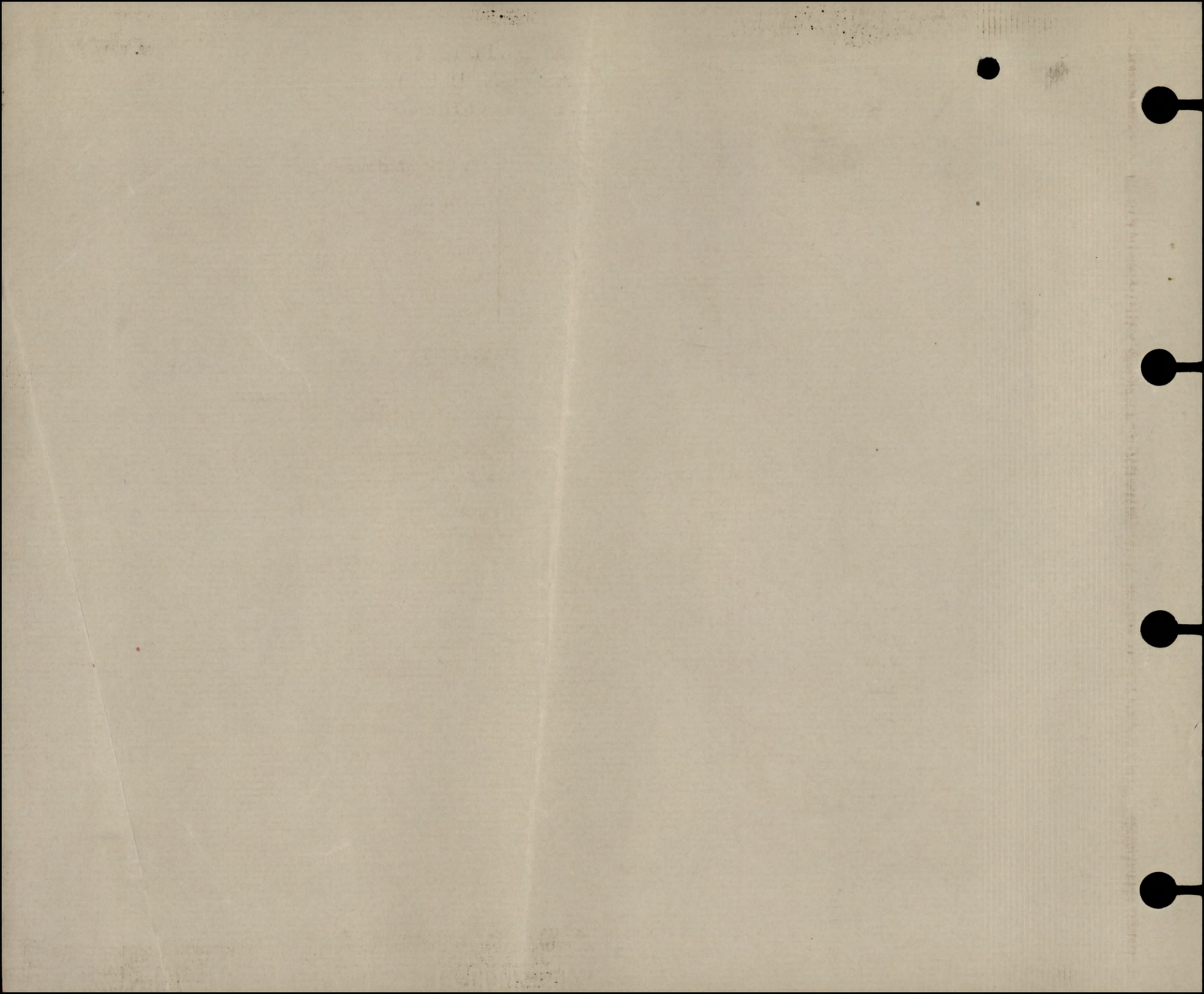
ALSO ACCOUNT IN CURRENT LEDGER.

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				

*Q 14250 19 46*











Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

# Separation and Assigned Pay Branch

# B

9122

aug. 1/16

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

15	20 <sup>00</sup> / <sub>100</sub>	
----	-----------------------------------	--

124 B7  
MAR

### PARTICULARS OF SEPARATION ALLOWANCE

No. 726048  
 Rank *Pte.* Promoted Reverted Discharge  
 Soldier's Name *W. R. Booth*  
 Battalion *109<sup>th</sup> Bn. C.E.F.*  
 Beneficiary  
 Relationship  
 Address

### PARTICULARS OF ASSIGNMENT

Name *Mrs Henry Booth (mother)*  
 Address *Glenarm P.O. Ont.*

- 1
- 2
- 3
- 4

*Oct. 31/17* *225* *225*

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
<i>Nov</i>	<i>B 57160</i>		<i>15</i>	<i>15</i>	
<i>Dec</i>	<i>B 61483</i>		<i>15</i>	<i>15</i>	
<i>1918 Jan</i>	<i>B 65913</i>		<i>15</i>	<i>15</i>	<i>M</i>
<i>Feb</i>	<i>b 92712</i>		<i>15</i>	<i>15</i>	
<i>Mar</i>	<i>a 99984</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>April</i>	<i>b 3865</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>May</i>	<i>E 10648</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>June</i>	<i>D 18656</i>		<i>20</i>	<i>20</i>	<i>✓</i>
<i>July</i>	<i>X 33008</i>		<i>20</i>	<i>20</i>	<i>✓</i>
<i>Aug</i>	<i>b 30473</i>		<i>20</i>	<i>20</i>	<i>✓</i>
<i>Sept</i>	<i>D 36576</i>		<i>20</i>	<i>20</i>	<i>✓</i>
<i>Oct</i>	<i>B 48349</i>		<i>20</i>	<i>20</i>	<i>✓</i>
<i>Nov</i>	<i>B 51951</i>		<i>20</i>	<i>20</i>	<i>✓</i>
<i>Dec</i>	<i>b 65461</i>		<i>20</i>	<i>20</i>	<i>✓</i>
			<i>450</i>	<i>450</i>	
<i>Jan 1919</i>	<i>D 75475</i>		<i>20</i>	<i>20</i>	<i>✓</i>

*1849-24-4*

*M.R.O. B issued 7-5-18.*  
*See also account in Spec. Perm. Ledger*  
*A.P. issued @ 15<sup>00</sup> from 1-8-16 to 31-5-18 & 20<sup>00</sup> from 1<sup>st</sup> 2. m. 16<sup>th</sup>*  
*Leave op Ret'd per... Tunisian*  
*Date 9-10-18 F.X. 11<sup>th</sup> 18<sup>th</sup> m. 2.*  
*Clerk... G.O.E.*  
*b 65461 cancelled per b.O. 3966*  
*No. R 059659 Destroy 13/19.*  
*D. 75475 for Jan. cancelled per b.O. 3977. -15-1-19.*

*issued*

M. F. W. 128  
 400M. -6-17-1772-38-1141  
 L. L. 22320 -M. & D. 7693.





Surname *Booth* Christian Name or Names *W.R.* Reg. No. *726048*

Rank *Plt* Unit *109 Batt (38) E.O.* Troop Batty  
Hospital *Train Div*

*Mail Thonerville* Date of Admission *3-10-16*  
Transferred Hosp.

*San. San Wingham.* Hosp. *5-10-16*

*44 C.C.S. in* Hosp. *31-10-17*

*26 Gen. Staples* Hosp. *2-11-17*

Diagnosis

(1) Later Diagnosis (if changed)

(2)

(3)

*n. u. d*

*Influenza  
S.W. R. Seq.*

Additional Diagnosis: if more than one state present

DISPOSITION

*Dis*

*4-10-16* Date

*e 210-10-16 - 18*

REMARKS

*17.10.16 # 50.*

*e. l. 31-10-16*

*7.11.16 # 29 NOTE Inw. to Canada - 24-9-18.*

*7-11-17 a 56-4*

*12.11.17 a 63-3*

*15-11-17 B 63-0*

*27-2-18 B 149-0*

*15.4.18 B 187*

*19.4.18 B 191*

*1-10-18 B 331-5*

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

*Res*

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.	Gen. Mil. Colchester	9-11-17
	16 Can Gen Orpington	25-2-18
2.	G. C. Bromley	13-4-18
3.	Granville Can. Spc. Bunting	19-4-18
4.		
5.		
6.		
7.		

Name L Booth R Rank Pte Regtl. No. 726048

Fyle Depot

Original unit 38 Present unit 6 RES M. or S. S Age 19 Religion Meth. H. Q.

Port, ship and date of arrival Halifax Tunisian 7-10-18

Next of kin FATHER HENRY EDWARD BOOTH BURNT RIVER

Address on leave SAME

Address on discharge GLENARM ONT.

Transportation issued Yes No Date Character on discharge

Previous occupation Farmer Date and place of enlistment Kinmont 5-1-16.

Diagnosis Machine gun bullet RT leg Date of Medical Boards 28-1-19.

Date.	Remarks.	Pt. 2 Order No.
24-9-18	T.O.S.#2 D.D. and posted to Hos Sec 7-10-18	H.S.190 ✓
	Granted leave from 8-10-18 till 22-10-18.	
	Subs from 8-10-18 till 22-10-18.	176
	AWL from 3 p.m. 22-10-18 to 3 p.m. 9-11-18 Admonished	(over)

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

Admonished (over)



Date.

Remarks

Pt. 2 Order No.

Forfeits-19 days P&A by R. W. (W.M.H.)

H.S. 216

30-1-19

HOS. SEC. TO C.C.P.S.

31

5-2-19 S.O.S. DISCHARGED HAVING BEEN FOUND MED. UNFIT ((1 days PDP  
& CLO' ALL'CE)

32

No. 726048

RANK

Pte

NAME

Booth, W.

M.

T. O. S. 15-12-15 UNIT

109th. Battalion.

S.O. 43. 10-1-16.

M. D. 13

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915 Dec 15	1916. Jan. 31	✓		
	Feb.	✓		
	Mar.	✓		
	April	✓		
	May	✓		
	June	✓		
	July	✓		



UNIT SAILED  
JUL 23 1916



CARD NO.

SURNAME. *Booth*

CHRISTIAN NAMES *William Richard*

REGL. NO. *726048*

RANK *Pte.*

UNIT *109th.*

*Batt.*

FORMER CORPS

*Nil*

NEXT OF KIN.

NAMES IN FULL *Booth Henry Edward*

RELATIONSHIP TO SOLDIER *Father*

CHANGE OF ADDRESS

ADDRESS

*Glenarm. P. O., Ont.*

*Auth. S.A.A.P. 26-5-14*



COUNTRY OF BIRTH *Canada, Burnt River, Ont.*

DATE *July 12th 1897.*

PLACE OF ATTESTATION *Keilmount.*

DATE *Jan. 5th 1916.*

*Sailed from Halifax 23/7 16<sup>488</sup> per S.S. "Olympic"*



MARRIED

SINGLE

*Yes.*

WIDOWER

TRADE OR CALLING

*Farmer.*

RELIGION

*Methodist*

DESCRIPTION.

APPARENT AGE

*18.*

YEARS

*0.*

MONTHS

HEIGHT

*5.*

FEET

*9 1/2.*

INCHES

CHEST MEASUREMENT

*36 1/2.*

INCHES

EXPANSION

*3 1/2.*

INCHES

COMPLEXION

*Fair.*

EYES

*L. Brown.*

HAIR

*Brown.*

DISTINGUISHING MARKS

*Small scar on outside of right leg below the knee.*

MEDICAL EXAMINATION.

PLACE

*Keimount.*

DATE

*Jan. 5th. 1916.*

649-B-10700

Pte B  
✓

Number 726048

Rank

Surname BOOTH

Christian Name William Richard

Units 38<sup>th</sup> Bn Can Inf Theatre of War France

Date of Service 6-12-16

Remarks Request

SEND ENVOYE JAN 20 1986

Latest Address Glenasmole Ont.

02724 (G.P.O.)

Roll No.

B. Page 19496  
12/11/85

200m. 6-21.

Box: 889

mom  
B

~~Red scribble~~  
B.M.V. plate no. 2 3/27

DESP. FEB 24 1927

REGN. NO. 29584

NAME

*Bookh Williams Richard*

REGT'L NO

*726048*

RANK AND CORPS

*Pte (former of the BN) 38<sup>th</sup> Bn.*

H. Q. FILE NO. 649-

FOLLOWS

CABLE

NATURE OF CASUALTY

FOLLOWS

No.

DATE

*59-8*

*M6312.*

*9-11-17*

*C.  
Adm 44. Cas. Cr. Stat. Oct 31<sup>st</sup> 1917  
G. S. Wd. right. leg. ✓*



LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
18	Mil Bramshott	3-10-16.	Moly 10 Q
20	Can. Govt. Board Wood. Work	5-10-16.	" " " "
	Mil Bramshott disch	4-10-14	<del>4-10-16</del> <span style="color: red;">do not list 24</span> <span style="color: red;">Influenza do not list 29</span>
A 56 <sup>(14)</sup>	# 44 Can. Cl. Stat,	31-10-17	SW. R. Leg (East Out,)
A 60	# 26 Gen. Staples	2-11-17	SW. R. Leg.
B 363 <sup>21</sup>	Gen. Mil Colchester	9-11-17	" " " " 8-12-17.
B 149	# 16 Can. Gen. Cupington	25-3-18	SW. Rt Leg
B 187	Can. Govt. Bromby Kent	13-4-18.	SW R. Leg.
B 191	Exanville Can. Spec		
	Buxton W. Yorkshire	17-4-18	SW. R. Leg. (East Out)
B 331-S.	Invalids to Canada	24-9-18.	" " " "

LEDGER NO. 183-40

SERIAL NO. 639806

REG. NUMBER 726048 NAME Booth W. R. 5

RANK pte CORPS 108th Bn

AGE 19 SERVICE 6 1/4 4 1/2 7 12/12

NAME OF HOSPITAL Military PLACE Whittier

DATE OF ADMISSION 22-10-18 9 11-18

DISEASE T.S.W.L Leg fr Liberia Ulcer on leg

TRANSFERRED TO OTHER HOSPITALS

OPERATION

DISCHARGED TO 30.1.19 IN CATEGORY

REMARKS:.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....



664 HOSPITAL.

AT Granville

A. & D. No. T652 PL. OF ACTION

RANK PFC REG. No. 726048 UNIT 38th Bn B Coy SICK OR WOUNDED

NAME Booth W.R. AGE 21 RELIGION bapt

PLACE IN HOSPITAL

DIAGNOSIS Sw. Right leg - Fract Fibula

ADMITTED 12. 4. 18. FROM No. 16 G.H. Oxpington

DISCHARGED To

TRANSFERRED 16. 4. 18. Granville S. Hosp. Beaton

SERVICE AT HOME 10 months IN FIELD 18 months

RESULTS

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

9-11-17







Name *Booth William Richard* Rank *Lt* Reg. No. *726048*  
 Unit *109 BATT*  
 Next of Kin *Canada*

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
3-10-16	<i>Mil. Bramshott</i>	<i>H. of D.</i>	<i>18</i>			
<i>(5-10-16)</i>	<i>Bearwood Wokingham</i>	<i>H. of D.</i>	<i>20</i>			
	<i>Should Read.</i>					
<i>4-10-16</i>	<i>Discharged.</i>	<i>H. of D.</i>	<i>26</i>			
	<i>Has now been diagnosed</i>	<i>Influenza</i>	<i>29</i>			

*See Erratum*





LIST OF DISCHARGE DOCUMENTS.

- Attestation Paper, Triplicate..... Militia Form W. 23
- or Particulars of Recruit..... Militia Form W. 133
- Field Conduct Sheet..... Militia Form W. 178 or A.F.B. 122
- Casualty Form..... Militia Form W. 54 or A.F.B. 103
- Last Pay Certificate..... Militia Form W. 44
- Certificate that missing documents are unobtainable.....
- Medical History Sheet..... Militia Form B. 313 or A.F.B. 178
- Proceedings of Medical Board..... M.F.B. 227, A.F.B. 179 or A.F.A. 45
- Dental History Sheet..... Militia Form B. 465
- Medical Report..... M. F. W. 129 or D. M. S. 1375
- Regimental Conduct Sheet..... Militia Form B. 263
- Company Conduct Sheet..... Militia Form B. 263a

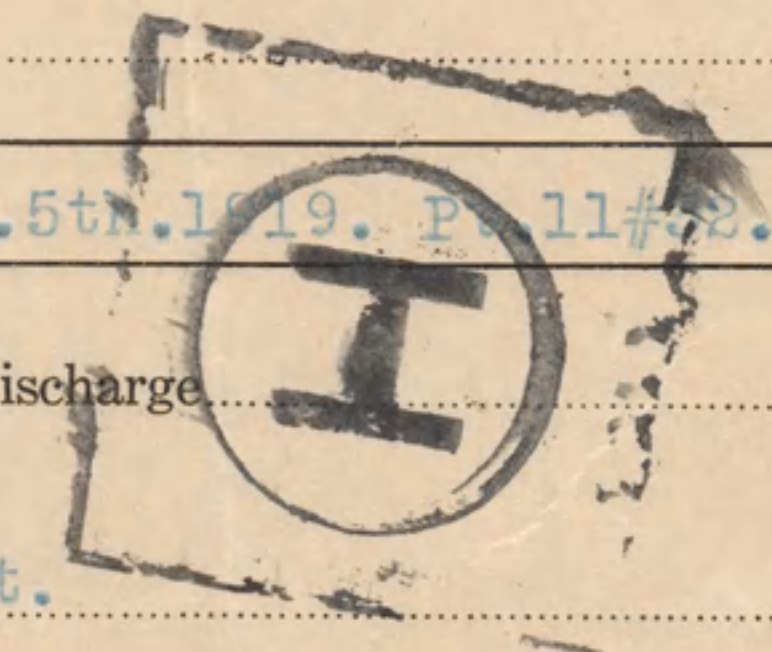
SHORT FORM.  
 PROCEEDINGS ON DISCHARGE.  
 (Demobilization.)

29-6-34  
 H. 21/2/19 P

R.I.



1. No.	726048	
2 Rank.	Pte.	
3. Name.	BOOTH William Richard.	
4. Unit.	109th. Bn. (#2.D.D. )	
5 Date of Discharge	FEB 5 1919	Place TORONTO, ONT.
6 Reason for Discharge	" Medically Unfit."	
7. Authority.	#2.D.D.Feb.5th.1919. P 11#2.	
8. Proposed Residence after Discharge	Glenarm. Ont.	
9. CERTIFICATE TO BE SIGNED BY SOLDIER. I hereby acknowledge that at the undernoted place and date I received my discharge Certificate M. F. W. ?  <div style="text-align: right; margin-right: 50px;"> <i>William Richard Booth</i>                      Signature of Soldier.                 </div>		
10. CONFIRMATION. The discharge of the above named man is hereby confirmed. Place TORONTO, ONT. Date FEB 5 1919  <div style="text-align: right; margin-right: 50px;">                       Signature O. C. Discharge Section,                      No. 2 District (O. C. Discharging Unit.)                 </div>		



15-3-2000

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.)

*We recommend that he be discharged*

*" Having been found medically unfit for service."*

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.

*J. S. Booth* President.  
*H. S. Burns Capt* Members

PLACE *WHITBY MILITARY HOSPITAL*

DATE *JAN 28 1919*

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

DATE

APPROVED BY *J. S. Booth* APPROVED BY *H. S. Burns*  
Assistant Director of Medical Services. Director-General of Medical Services.

DATE *31-1-19*

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 initialed 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.

STATION *WHITBY MILITARY HOSPITAL* DATE *JAN 28 1919*

1. 1 (a) Unit *288* (b) Regimental No. *726048* (c) Rank *Private*

(d) Surname *Booth* (e) Christian name *Richard William*

(f) Home address *Glenarm Ont.*

(g) Next of Kin *Tryphena Booth* (h) Relationship *Mother*

(i) Address of Next of Kin *Glenarm Ont.*

2. Age last birthday *27* years. Date of birth *12/7/1897*

3. Enlistment, or Appointment (if an Officer) (a) Place *Kinmount Ont.* (b) Date *5/11/16*

4. Personal description:  
(a) Height *5ft 9 1/2* (b) Weight *146 lbs* (c) Complexion *Fair*

(d) Colour of hair *Fair* (e) Colour of eyes *Blue* (f) Identification marks, Scars, etc. *Vaccina*

*2 left arm: 3 Scars RT leg.*

5. Former trade or occupation *Farmer*

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).	PERIODS	
	Years	Days
	<i>3</i>	<i>23</i>

Patients Own Statements	PERIODS	
	From	To
Canada	<i>5/11/16</i>	<i>16/7/16</i>
England	<i>23/7/16</i>	<i>15/12/16</i>
France or other theatres of War	<i>15/12/16</i>	<i>19/11/17</i>
<i>England &amp; Canada</i>	<i>19/11/17</i>	<i>28/1/19</i>

7. Original disease, or injury

*S. S. W. calf right leg*

(a) Date of origin *Oct 29-17* (b) Place of origin *France*

(c) Cause *S. S. W.*

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.)

Partial loss of function right leg

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.)

Objective OS - There are four linear scars on middle 1/2 of leg one 8"x1 1/2" on posterior aspect of leg - slightly depressed and adherent, not tender or painful. Second one 4"x2" on outside of leg, slightly adherent, not tender, painful or depressed. Third one 6"x1" on inside of leg - slightly tender, depressed and adherent but not painful. The fourth 5"x1" anterior of leg, not tender, but not painful and adherent or depressed. Atrophy none, power of leg and foot 2/3 normal. Movements of leg and foot all normal except dorsal flexion of foot which is only 95° in range. He can walk 4-5 miles further dorsal flexion causes pulling on scar attack of leg. Subjective OS - His leg gets very tired after walking for 3 miles. Has pain (slight) in region of scar on back of the leg.

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

Nervous System no Cardio-Vascular System no Genito-Urinary System no (If pulse rate is abnormal, B. P. will be taken.) (Albumen and Sugar will be excluded.) Special Senses no Respiratory System no Integumentary System no Disturbances of Mentality no Digestive System no Muscular System no Osseous and Joint Systems no Any other general condition no

Urine Analysis negative

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

On Oct 19 17 was hit by machine gun bullet which caused a flesh wound in calf muscle of leg and also fractured right tibia. Taken to CCS where six machine gun bullet were extracted from leg. Wound took 8 months to heal up.

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).)

none

(c) (Here give a description of wounds, scars, and deformities.)

none except as described in section 9

11. (a) Did the disabling condition have its origin before enlistment? no

(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.)

no

12. Was the disability caused, or aggravated; (a) by intemperance, or improper conduct; or (b) 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? 6 months

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

Corp. France & England 12 months Hospital Canada - 3 months

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 (If not, briefly state why)

17. Recommendations

discharge

[Signature]

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, 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

[Signature]

Pte M. R. Booth

Pte 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 1911

Members of the Board:—

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

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

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

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

16. Permanence of the Pensionable Disability estimated next above in (14) is it permanent?

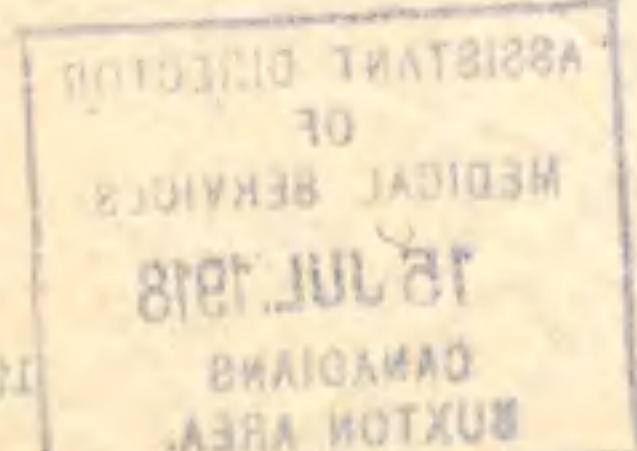
17. If an operation was advised and declined, do you consider the refusal to have been unreasonable?

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

Dated at this day of 1911

W. J. Turner M.D. Surgeon General

Signatures of the Board. President. Approved. Dated at



Reserved for M.H.C.

Regt. No. 726048 Rank. PRE Surname. BOOTH Christian Name. RICHARD

Unit or Corps—(a) Overseas from United Kingdom. 38th Bn. (b) In United Kingdom. RES.

Born at—Town. BURNT RIVER County or Province. ONTARIO Country. CANADA

Date of Birth—Day. 22 Month. JULY Year. 1899 Age. 19 yrs. 2 months.

Joined at. KINMOUNT, ONTARIO Date. DEC. 15th 1915.

Former Trade or Occupation. FARMING

Permanent marks or peculiarities that will serve for future identification

Nil

Height—feet. 5 inches. 9 1/2 Colour of eyes. Brown

Signature of Soldier (for identification purposes). P. 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.

1. DISABILITY (State the actual disabling conditions as distinguished from the diseases or injuries from which they resulted.)

- Disabilities Group (a) 1. PAINFUL SCAR RIGHT LEG 2. WEAKNESS RIGHT LEG 3. LIMITATION OF MOVEMENT RIGHT ANKLE & BIG TOE
Disabilities Group (b) N.A.
Disabilities Group (c) N.A.

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. Row 1: MACHINE GUN BULLET, VPRES, Oct. 29th 1917.

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? N.A. (iii) As to Group (c) above? N.A.

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



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

(i.) While on duty? *yes* (ii.) While off duty? *N.A.*  
(iii.) Was a Court of Inquiry held? *no* (iv.) Where? *N.A.* (v.) When? *N.A.*  
(vi.) Opinion of the Court? *N.A.*

6. HISTORY OF THE CASE. (State concisely the essential points of the history, noting the entries made on the Medical History Sheet and the records). On October 29<sup>th</sup> 1917 at YPRES was wounded in right leg by machine gun bullets which caused a leg flesh wound in calf muscle and also splintered right tibia. Taken to #2 P.C.S. 2 weeks when six machine gun bullets were extracted from the wound and leg placed in Thomas' splint. To General Hosp. Etaples 1 week. Had dressings only. To England. Saffron War Hosp. Essex 2 months when patient was kept in bed leg in splint and wound dressed daily. To Orpington 6 weeks - X-ray taken of leg. Treatment continued. Put on massage and electrical treatment for first time. To Branley Conv. Hosp 2 weeks. Transferred to S. P. S. Hosp. April 16, 1918. Had tenotomy oper<sup>n</sup> here for foot-drop. Massage & Gym. since. Is now ab<sup>l</sup> to walk about but state leg is still weak.

7. PRESENT CONDITION. (Give previous and present weight if likely to indicate progress of disability.) *Three* scars in middle third of lower leg. The first - wound of entrance about 8" long on posterior aspect of leg. deep and slightly adherent to deep tissue but well-healed not vascular and but slightly tender on pressure. The second scar 4" long on anterior surface. R. leg. upper third and the third scar about 8" long along internal surface. Both the latter are well-healed & cause no disability now. movement of knee normal. Dorsi-flexion of ankle limited. Plantar flexion slightly. all other movements of ankle. Loss of power to dorsi-flex great toe (Right). Right leg is weaker than left. Walking causes pain over calf muscle & especially scar on post. Aspt. Heart and lungs normal. Reflexes *N.A.*

8. OPERATION. Was one performed? *yes*  
(ii.) If so, state what. *For Removal of F. B.*  
(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. *N.A.*

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

Date of Report: *July 4<sup>th</sup> 1918* Signed: *W.D. Hutchinson*  
Station: *Granville Canadian Special Hospital* Officer in medical charge of case.  
*Buxton, Derbyshire*  
I have satisfied myself of the general accuracy of the above Report, and concur therein except *W.D. G. Cooper*  
Dated *4 JUL 1918* Registrar for O.C. Station, on *4 JUL 1918*

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? *No*  
(b) Misconduct of the Soldier? *No*  
(c) 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%) *N.A.*

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.) *N.A.*

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

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

18. Remarks.

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

Classification for the Military Hospitals Commission.

*G*

Date of Board: *8-JUL-1918*  
Station: *G. C. S. H.*  
Approved: *S. J. Hall* COLONEL, A.D.M.S. CANADIAN BUXTON.  
Dated at: *Buxton*  
Signatures of the Board: *W.D. Turner* President, *J.A. McWhorter* Capt. Comm.  
ASSISTANT DIRECTOR OF MEDICAL SERVICES  
15 JUL 1918  
CANADIANS BUXTON AREA.

\* Strike out whichever inapplicable

ASSIGNED PAY	ENGLAND or CANADA.	SEPARATION ALLOWANCE.	ENGLAND or CANADA.				
EFFECTIVE DATE: <del>1/8/18</del> 4/6/18		EFFECTIVE DATE: -					
AMOUNT: - \$ 20 <sup>00</sup>		AMOUNT: -					
NAME, ADDRESS, RELATIONSHIP & AUTHORITY		WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.					
Mrs Henry E Booth Mother) Glenasm P.O. Ont Stopped off 1/8/18							
PARTICULARS OF RANK OR APPOINTMENT							
AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT					
		Pte ✓					
UNIT AND TRANSFERS							
ORIGINAL UNIT - 109 Bn							
DATE ACCOUNT FIRST OPENED: - 1/8/26							
AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S'FO	UNIT TRANSFERRED TO				
			BOTH				
EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS							
UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK							
DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
29/7/18	99-183952	Buxton	48.67	29/7/18	10		
DAILY RATES OF PAY AND ALLOWANCES							
AUTHORITY		PAY	F.A.	P.F.A.	SUBS CE ALL'CE		
		1.00	10				

PARTICULARS OF RENDERING NON-EFFECTIVE: Invalidated to Canada - 1/8/18 - Granville 6 <sup>2</sup> /74 7-7-18 - L.P.C. 28.46											
MONTH 1918	PARTICULARS	CR 1	CR 2	PARTICULARS	DR 1	DR 2	DR 3	DR 4	BALANCE	DEFERRED	SEPARATION
Mar 31	Bal Fwd)								64.67		
Apr	P.O.	33		AR 456 - Orpa 10/4/18	4.87			15			
				AR 1134 Buxton G.S.H. 23/4/18	2.43						
				For 1 day pay P.W. & an additional day pay 3rd class 830 pm 13/4/18 - 7.45 am 14/4/18		2.20					
				100.106 B.O.R. 14/4/18	7.30	2.20		15			
May	✓	34	10	AR 2149 G.S.H. Buxton 9/5/18	4.87			15			
				✓ 2455 G.S.H. ✓ 23/5/18	14.60				72.80		
June	✓	34	10	C.A.P.	19.47			15			
				AR 2773 G.G.H. Buxton 11/6/18	4.87						
				D.O. 113 - 4/6/18 - Correction Case File No 26-5-18		3.30					
				to 11 AM 21/11/18 for file 2 day pay 2 day by R.W.							
				AR 3672 G.G.H. Buxton 22/6/18	14.60				68.03		
					19.47	3.30		15			
July	✓	34	10	C.A.P. 5 <sup>00</sup> up for June 1918				20			
				AR 3952 - C.S.H. Buxton - 9/7/18	48.67				28.46		
					48.67			25			
				AR 7219 19/9/18 G.G.H. Buxton	4.87						
				✓ 6268 3/9/18 ✓ ✓	4.87				18.72		
					9.74						
Oct.				Ill 6822 Bal to Canada	18.72						
					18.72						

Wheat Brown  
22.7.18

DEC 5 1918







726048 Pte. Booth. Wm R.

DATE	PAY		FIELD ALLOWANCE		WORKING OR SPECIAL PAY		ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS				CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS							
	NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE				AMOUNT		1	2	3	4	1	2				3	4				CREDIT	DEBIT					
			\$	c.						\$	c.	No.	DATE	No.	DATE	No.	DATE				No.	DATE				No.	DATE					
			367	40					60	368					48	54	14	60	54	70	19	46	165	10	82	313	12	54	88			
July 31	100/100		34	10						34	10												15		15							
Aug 31			34	10						34	10												15		24	80						
Sept 30			33						60	33													15		26	60						
			469	60						469	20				48	54	14	60	54	70	19	46	165	10	82	313	12	54	88			

3036 11/5  
3499 16/5  
3495 25/5  
4485 1/6  
4727 8/6  
4876 25/6  
6243 29/6  
6697 29/7  
7591 14/7  
8340 15/6

1917		PARTICULARS		DR.1	DR.2	DR.3	DR.4	BALANCE	DEFERRED PAY ENG.	MONTH PARTICULARS		CR.1	CR.2	PARTICULARS		DR.1	DR.2	DR.3	DR.4	BALANCE	DEFERRED PAY ENG.
								89 68						Forward					50 44		
Oct 31	100/100		Acct Pay					15		March	PP	34 10		AR 2536 Orps. 13/3/18	487				15 64 67		
			876-38 AR 10601. 1st Army School	179								34 10									
			AR 10601	267								34 10									
			AR 10276 27/7																		
			No. 8125 AR 10208 20/7	179																	
			9319 - 10725 10/8	268																	
			10070 AR 10945 17/8	179																	
			AR 689 20/9/17. 4th CD	446				93 60													
			AR 1518	1518				15													
			Rem. 5849 20/11/17	973																	
			AR 105 4/10. 4th CD & RC	357																	
			1364 AR 11681 14/9. 1st Army School	178																	
			1396 AR 11456 7/9 do	268																	
			AR 1269 16/10 38th	357																	
			AR 11282 21/8. 1st Army Sch	178																	
			AR 10536																		
			AR 11104 24/8	446																	
			Rem. 9835 17/12/17. 38th	973																	
			AR					93 40													
			R. 15963 16-1-18	58 40				15													
			R. 17923 2-2-18	973				15													
			R. 17829 9-1-18	973				15													
				1946																	

Carried forward to Large Ledger sheet  
Chg 1500 May