

NAME BROTHERSTON WILLIAM JOHN REGT. NO. 725528 UNIT Co. 1st Dep. Bn. 1st H. Q. FILE NO. _____

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DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505
REFERENCE

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1 msw67

1 Disp Cert.

1 ...

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1 ...

1 ...

1 ...

42133

DEATH

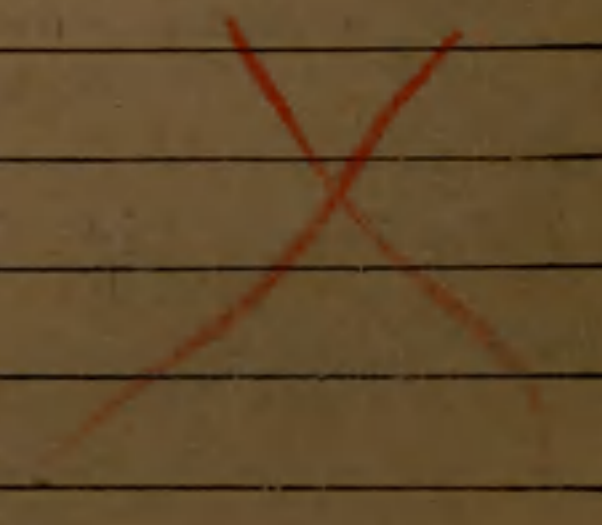
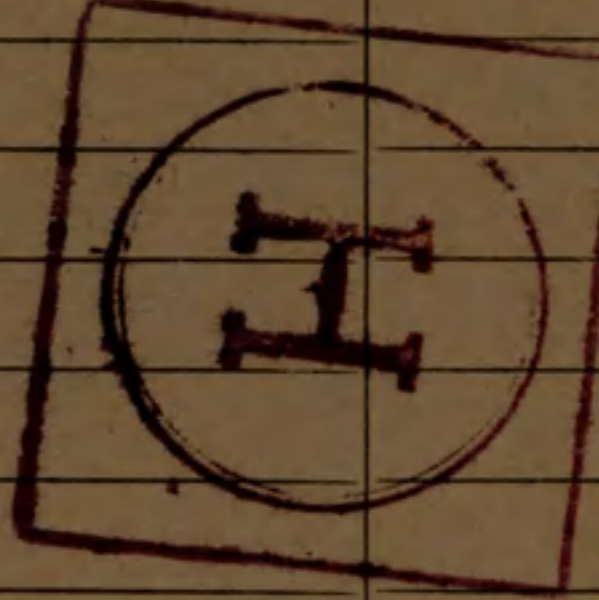
Category

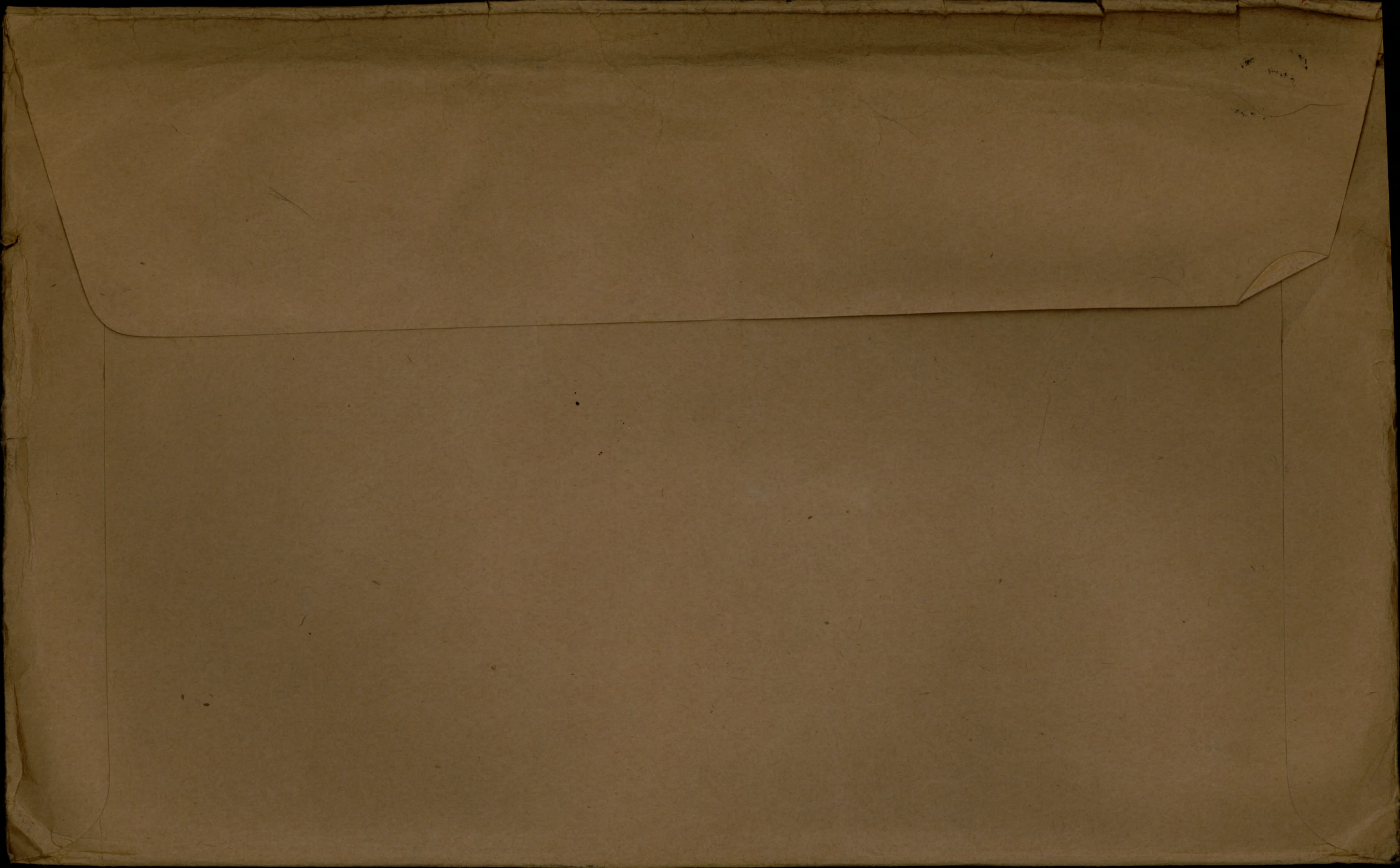
DISCHARGE

Category

Demor.

DESERTION





ATTESTATION PAPER.

C. Coy.
No. 725528

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

Folio. ORIGINAL

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your name?..... *William John Broderston*
 2. In what Town, Township or Parish, and in what Country were you born?..... *Harvey Ontario Canada*
 3. What is the name of your next-of kin?..... *Mother Margaret Broderston*
 4. What is the address of your next-of-kin?..... *P.O. Bobcaygeon Ont Canada*
 5. What is the date of your birth?..... *January 11th 1897*
 6. What is your Trade or Calling?..... *Clerk*
 7. Are you married?..... *No*
 8. Are you willing to be vaccinated or re-vaccinated?..... *enoculated* *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*
- William J. Broderston* (Signature of Man.)
Richard Garratt (Signature of Witness.)

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

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

William J. Broderston (Signature of Recruit)
Date *2nd December* 1915. *Richard Garratt* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *William John Broderston*, do make Oath, that I will be faithful and bear true Allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will as in duty bound honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity, against all enemies, and will observe and obey all orders of His Majesty, His Heirs and Successors, and of all the Generals and Officers set over me. So help me God.

William J. Broderston (Signature of Recruit)
Date *2nd December* 1915. *Richard Garratt* (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 *Bobcaygeon* this *2nd* day of *December* 1915.
W. Nixon (Signature of Justice)

I certify that the above is a true copy of the Attestation of the above-named Recruit.

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

Description of William John Brotherton on Enlistment.

Apparent Age 18 years 11 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

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

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

Height 5 ft. 7 1/4 ins.

Chest measurement { Girth when fully expanded 38 ins.
 Range of expansion 2 ins.

None.

Complexion Fair

Eyes Brown

Hair Brown

Church of England C of E

Presbyterian

~~Wesleyan~~ Methodist

Baptist or Congregationalist

Other Protestants
(Denomination to be stated.)

Roman Catholic

Jewish

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 2nd Dec. 1915

Place Lindsay Ont.

[Signature] Capt.
[Signature] 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 John Brotherton 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 12 1916 1916

CANADIAN EXPEDITIONARY FORCE

War Service Badge
Class "A" No. *318739*

DISCHARGE CERTIFICATE

WAR SERVICE BADGE CLASS "A"

THIS IS TO CERTIFY that No. 725528 (Rank) Pte

Name (in full) BROTHERSTON William John enlisted in

the 109th Battalion

CANADIAN EXPEDITIONARY FORCE at Lindsay Ont on the 2nd

day of December 19 15

HE served in 109th Batta, 20th Batta and C.A.B.C France

and is now discharged from the service by reason of Demobilization.
Medical Unfitness.
~~XXXXXXXXXX~~

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

Age 22 years 4 mos

Marks or Scars _____

Height 5 ft 7 1/2 ins

Complexion Fair

Nil

Eyes Brown

Hair Brown

William John Brotherton
Signature of Soldier

Luce Thompson
Issuing Officer

Date of Discharge

No. 2 District Depot
Toronto, Ont.
JUL 4 1919

For
O.C. No. 2 District Depot.
Rank

Date JUL 4 1919 19

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

THIS IS TO CERTIFY that No. _____ (Rank) _____

Name (in full) _____ enlisted in _____

the _____

CANADIAN EXPEDITIONARY FORCE at _____ on the _____

day of _____ 19 _____

HE served in _____

and is now discharged from the service by reason of _____ Demobilization _____

Medical Unfitness _____

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

Age _____	Marks or Scars _____
Height _____	
Complexion _____	
Eyes _____	
Hair _____	

Signature of Soldier _____

Issuing Officer _____

Rank _____

Date _____ 19 _____

Date of Discharge _____

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.

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

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

500M.—9-16

H. Q. 1772-39-9.0.

Casualty Form—Active Service.

3

Unit, Regiment or Corps.....

Regimental No. 725528 Rank pte Name Brotherton W. J.
C. E. F.

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

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

Extended..... Re-engaged..... Qualification (b).....

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B 213, Army Form A. 36, or other official documents
Date	From whom received				
JUN 25 1919		U. S. T. O. S. No. 2 DISTRICT DEPOT, TORONTO		1919	PART II D. O. 189
JUL 4 1919		S. O. S. (DISCHARGED FROM H. M. S.) No. 2 DIS. DEPOT,			PART II D. O. 189
23.7.19	CASC. Co.	S. O. S. On H. M. S. pro. to Canada	Landon	25.6.19	Pro. 1

W. C. Roberts

Lieut.
For O. C. No. 2 District Depot.

D. Guthrie
Capt for D. K.

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

[P. T. 1]

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

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

250-16.

H. Q. 1772-39-920.

Casualty Form—Active Service.

109th OVERSEAS BATTALION, C. E. F.

Unit, Regiment or Corps

Regimental No. 425528 Rank Private Name Brotherston William John

Enlisted (a) 2.12.15 Terms of Service (a) G. of W. Service reckons from (a) 2.12.15

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

Extended W.S.B. class "A" Re-engaged W.S.B. class "A" Qualification (b) Clerk.

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.
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Date	From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
		Embarked Canada	Halifax	24.7.16	
		Disembarked England	Liverpool	31.7.16	
		109th Bn			
		Transferred for Overseas Service with	20th Batt'n	5-1916	
6/10/16	C B Dep	Arrd & taken on strength	20th Bn	6/10/16	NR Pt 2 O'rs 55d11/10/16
do	do	Left for	do	20/10/16	NR
27/10/16	20th Bn	Arrived	do	23/10/16	NR
7-3-17	2 Can Gen	Trench feet.	adm 2 Can Gen	7-3-17	W3034
3-3-17	6 C.P.A.		adm 6 C.P.A.	3-3-17	W3036
10-3-17	2 Can Gen	do	To Eng.	10-3-17	W3034
10-3-17	do	do To Eng.	per HS Panama	11-3-17	W3033 (9291) Pt 2 O'rs 22 D/19-3-17.

D.O. Pt. 11. No 279 Capt.

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

W3034
W3036
W3034
109th BATTALION CAN. INFANTRY.

Whogau Capt.
for Lieut-Col. A.A.G.

CERTIFIED CORRECT,
18 OCT. 1916
C.N. RECORDS, LONDON

(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.

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				
11.3.17	CCMC	LOS to RECORD	Hastings	10.3.17	PH 0117 No Record
14.3.17 19-	ICORD	LOS from CCMC 20 th Bn.	W Sandling	13- 3.17	n 5 10 Lieut. for Colonel i/c Records, C.E.F.
22/5/17.	Discharged from	1st C.G.D. St Leonards	to 5th Res.	Bn. Part II D.O. No.	79 23/5/17
22/10/17	1 st Bn	S. Off. S. to 5 th Res.	W Sandling	22/5/17	for Adjutant, Canadian Command Depot,
23/5/17.	O.C. 5 th Res.	Taken on Strength from 1 st C.G.D.	W Sandling	22/5/17	Bn Ord 137 ✓
1-12-17	O.C. 5th	S. Off. S. on Transfer to 20th. Battn. France	W Sandling.	30-11-17	Bn. Ord 329 ✓ Jameson
30-11-17	2 I B D	Arred & taken on strength	20th Battn	30-11-17	N. (PT. 2) 90d/14-12-17.
4-12-17	do	Classified B2 by Med Bd (Def. Arm)		4-12-17	NR. 260.
6-12-17	do	Classified B2 & trsf'd to Cdn Labour Pool		6-12-17.	NR. Pt 2 90d/14-12-17.
	a.a.g.	S.O.S. ban hab. Pool from 20th Can Inf Bn.		7.12.17	KR. 16276. Pt 2 90d/14-12-17.
14.12.17.	C.G.B.D.	Proceeding to Supp Depot Etaples		14.12.17.	N/R 820. (M.O.)
	No 5 th H.Q. of Supply a.a.g.	Transferred to No 5 J.U. of S. from Cdn Labour Pool		14/12/17.	KR. 16276. Pro. 14. 2/2/18.

Casualty Form—Active Service.

Regiment or Corps *5 Cdn. D. U. I. S.*

Rank *Pte* Surname *Brotherston* Christian Name *W. J.*

Religion Age on Enlistment years months

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

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

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

Occupation Signature of Officer

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
Date	From whom received				
			Embarked ...		
			Disembarked ...		
	<i>A.A.G.</i>	<i>Taken on strength 5 Cdn.</i>		<i>15-12-17</i>	<i>K.R. 16276</i>
		<i>D.U.I.S. on being transferred from Cdn. Inf. Pool</i>			<i>P.1302 27th Feb 1918</i>
<i>3-3-18</i>	<i>De 5 Bnops.</i>	<i>Awarded 1 Good Conduct Badge</i>		<i>27-2-18</i>	<i>B213 P.1505 11th 1918</i>
<i>29-11-18</i>	<i>5 Bnops.</i>	<i>Granted 14 days leave D.U.H.</i>		<i>25-11-18</i>	<i>B213 P.150.26 1918</i>
<i>13-12-18</i>	<i>do.</i>	<i>Returned from leave</i>		<i>11-12-18</i>	<i>B213</i>
<i>25-1-19</i>	<i>7 Cdn. Genl.</i>	<i>Tonsillitis</i>	<i>Adm. 7 Cdn. Genl.</i>	<i>25-1-19</i>	<i>W/3034 W 6390</i>
<i>14-2-19</i>	<i>7 Cdn. Genl.</i>	<i>U.S.</i>	<i>to 9 Cdn. Genl. Hosp</i>		<i>W 9141</i>
<i>14.2.19</i>	<i>9 C.S.H.</i>	<i>Admitted</i>	<i>N.S.</i>	<i>14.2.19</i>	<i>W 3034 / W 8013</i>
<i>24/2/19</i>	<i>5 Bnops.</i>	<i>S.O.S. on reporting to</i>	<i>3</i>		<i>W 24 19</i>
		<i>Cy. Butchery</i>		<i>14/2/19</i>	<i>B213</i>

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

(b) Signaller, Shoeing Smith, &c.

3 Butchery S.O.S. on being reported from 5 Bnops. 15/2/19 B213 P.150 7 19

port

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

2/3/19

3. Butchery

Held on command Etaples

4.4.19

CGBD

To S from 9 CSH.

2.4.19

in 367

3.4.19

9 CSH
CGBD

To CGBD

2.4.19

W 34 / P 1934

Proceeded to England 17.11.19

C 27

St. Beason
Captain
for Lt. Col. a. alt.,
Com Section 442
3rd Battalion

19/4/19

Caseco

To S from Field

Witley

21/4/19

P 95

23.5.19

80

Lt. Col. D Wing Witley

Bford

25/5/19

DQ 124

O. I/C RECORDS,
CORPS DEPOT, C.A.S.C.

~~21/5/19~~

600

14/6/19

O Wing

To S from base

Witley

P 4. Do. 55

"O" WING

PROCEEDING TO CANADA

WITLEY

WIMBORNE, DORSET.

56
F. J. Ballantyne

36
L.R.

PARTICULARS OF CASE FOR WHICH WASSERMANN TEST IS REQUIRED.

The particulars below are required for statistical purposes and future reference.

Unless these are furnished the test will not be carried out.

Name... *Brotherton 49* Regl. No. *421525* Rank *Rt.*
 Unit... *C.A.S.C.* Date of first sore If 1. Pallidum found
 Secondaries, if any Arsenical *Y.M.* Mercury *course*
 Previous Wassermann, date Result
 Admission and Date... *12-5-19*

J. Blockhagen

RESULT OF WASSERMANN (ORIGINAL) QUARTER SYSTEM.

Serial No. Result

WASSERMANN
NEGATIVE

Lawrence
..... Major,
Officer Commanding,
Canadian General Laboratory.

WITLEY, SURREY.

.....1919.



367

11

36

Handwritten text, possibly a signature or name, located in the lower-left quadrant of the page.

Handwritten text, possibly a signature or name, located in the lower-middle section of the page.

CANADIAN ARMY DENTAL CORPS, O.M.F.C.

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

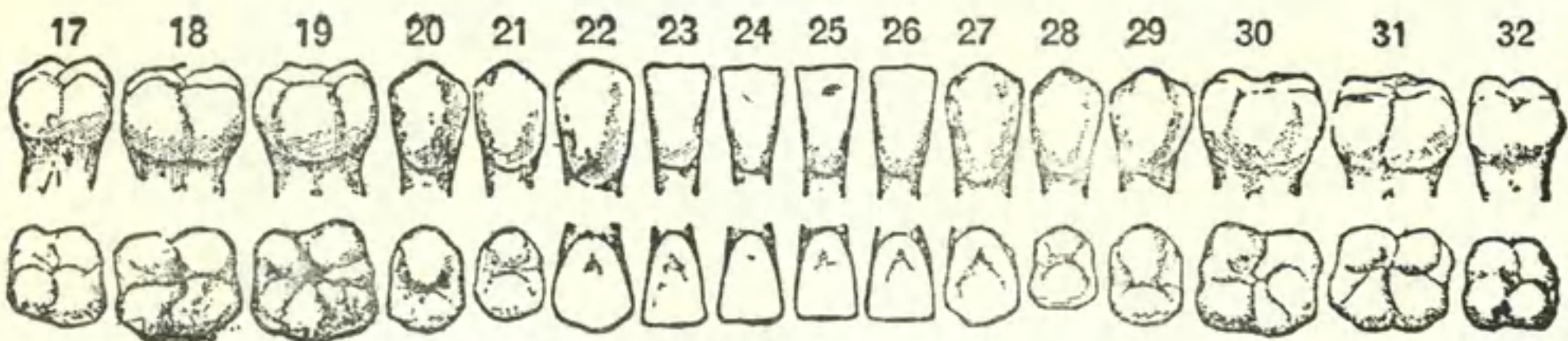
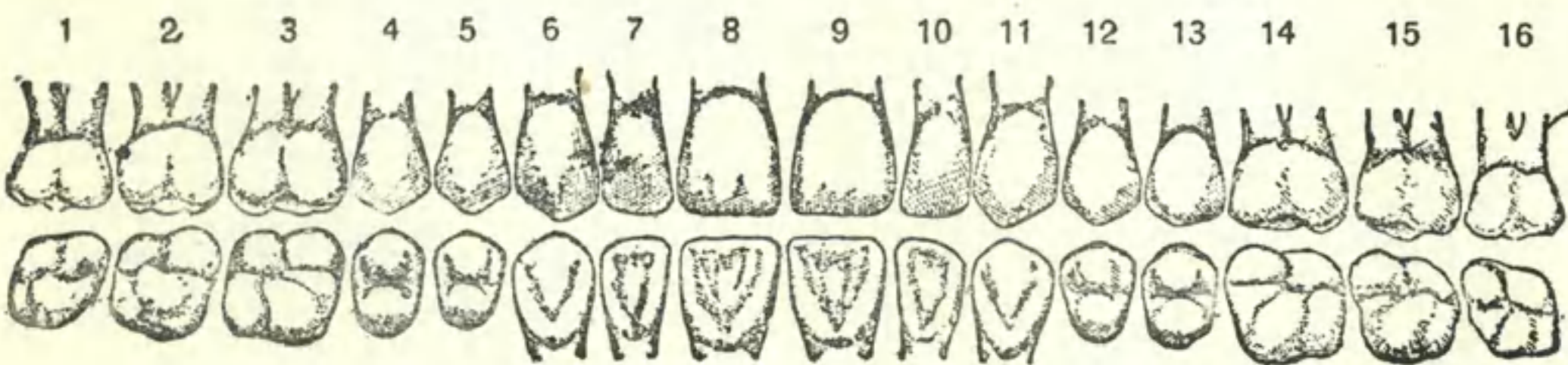
NAME OF SOLDIER (Block Letters) BROTHERTON, W.J.

REGIMENT CORPS DEPOT C.A.S.G. RANK PTE No. 725528

Date of Examination in England 5-5-19 Date of Examination in France _____

DIRECTIONS TO DENTAL OFFICERS

1. This form will be made out for each individual at the time of Demobilization in England or France.
2. Figures as per chart will be used to designate teeth concerned.
3. In reference to Partial Dentures the numbers of teeth thereon will be stated.



PRESENT DENTAL REQUIREMENTS

- 1. FILLINGS 4-18
- 2. EXTRACTIONS No
- 3. CROWNS No
- 4. DENTURES No
 - (a) Full Upper
 - (b) Part Upper
 - (c) Full Lower
 - (d) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT? No

- HAS HE EVER RECEIVED DENTAL TREATMENT? (Reply by "Yes" where applicable to any or all of a, b or c.)
- (a) In Canada No
 - (b) In England Yes
 - (c) In France No

Signature of Dental Officer J. Adams
Capt

BROTHERTON W.J.
PTE 29222

425528

ORIGINAL ORIGINAL MEDICAL HISTORY SHEET.

613/17

Surname Brotherston Christian Name William John

Examined { on 2nd day of December 1915
at Bobcaygeon
Birthplace { City or Town Narvey
County Ontario

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

Apparent age 18 years
Trade or occupation Clerk
Height 5 Feet 7 1/4 Inches
Weight 150 Lbs.

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT,

Chest measurement { Minimum 33 inches.
Maximum expansion 35 inches.

Physical development Good

Small-Pox Marks none

Vaccination Marks { Arm Right none Left 0
Number 0

When Vaccinated last March 2nd 1916

Date	Result	VACCINATIONS.
<u>2.3.16</u>	<u>Good</u>	<u>J. McCulloch</u>

(a) Marks indicating congenital peculiarities or previous disease none

(b) Slight defects but not sufficient to cause rejection

Emaciation left arm

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>5.5.16</u>	<u>Good</u>	<u>J. McCulloch</u>
<u>15.6.16</u>	<u>Good</u>	<u>J. McCulloch</u>
<u>26.5.16</u>	<u>Good</u>	<u>J. McCulloch</u>
<u>22.9.16</u>	<u>"</u>	<u>Lt & Bryd</u>

Enlisted on 2nd day of December 1915 at Bobcaygeon

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>109th Bn</u>	<u>725528</u>		<u>2.12.15</u>
Transferred to.. ..	<u>21st Bn</u> <u>20th Bn.</u>			<u>30/1/17</u>

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>West Sandling</u>	<u>14. 11. 17</u>		<u>A III S.H.S.</u>
<u>Manford</u>	<u>17-5-19</u>	<u>W.D.S.</u>	<u>Cat A.</u> <u>W. J. C. Campbell</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.

J. M. O.

CANADIAN

Surname *Brotherston* Christian Name *William John*

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				
		12	3	17	20	3	17	<i>Trench feet</i>	9	<i>Cured. Transferred to Bushey Park</i>	<i>W. H. ...</i>
		20	MAR	1917	30	MAR	1917		10	<i>on admission No signs Ankles ache when he walks much Dis. to No 1 C.C.D. Hastings</i>	<i>G. A. M. C.</i>



THE KING'S CANADIAN RED CROSS
CONVALESCENT HOSPITAL

10

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No. <u>725528</u>	Rank. <u>Pte.</u>	Surname. <u>Brotherston</u>	Christian Name. <u>W.</u>
Year <u>1917</u>	Unit. <u>20th Bn.</u>		Age. <u>20</u>	Service. <u>10 5/12</u>
Station and Date. <u>Bushy Park</u>	Disease <u>Trench Feet</u>			
	BORN AT <u>Harvey Ont.</u>			
	SINGLE OR MARRIED		OCCUPATION: - <u>clerk.</u>	
	ENLISTED AT <u>Bobcaygeon Ont.</u> ON <u>2 Dec. 1915</u>			
	INOC. T. /		S.P.V. /	
	NEXT OF KIN: - <u>(Mother) Mrs. Margt. Brotherston.</u> <u>Bobcaygeon Ont.</u>			
<u>3 Mch 1917</u>	<u>Arms</u> Reported sick. <u>Feet swollen and discoloured.</u> <u>G.B.S.</u> Marked "Trench Feet." <u>he reports 2 bear General.</u> Bed 5 days. Dressings.			
<u>17 Mch 1917</u>	<u>Huddersfield War Hospital</u> Bed 1 day Massage.			
<u>20 Mch 1917</u>	<u>Bushy Park</u>			
<u>W.H.</u>	<u>On Admission: -</u> <u>no signs.</u> <u>Ankles ache when he</u> <u>walks much.</u>			
<u>30/3/17</u>	<u>Discharged to 5th Reserve 1st C. Ont. Reg. 1st C.C.D.</u> <u>Hastings</u> <div style="text-align: right;"><u>(Di) ✓</u> <u>Major Clure.</u></div>			

*The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.
(J 3521.) Wt. W 5606-2621. 2,000,000. 7/15. D & S.

Station
and Date.

To be made out in duplicate.

H.Q. 54-21-23-53

DUPLICATE

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

INSTRUCTIONS.

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

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

50th OVERSEAS BATTALION, C. E. F.

(2) Regimental Number.....

725528

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

William John Bradthorpe

(4) Place of Birth.....

Boboygeon, Ontario, Canada

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

No

(6) If married, state,

(a) Full name of your wife.....

N11

(b) Present Postal Address.....

N11

(7) Are you a widower?.....

No

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

N11

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

N11

Also their names and ages.....

N11

(9) Is your Father alive?.....No.....

If so, state name and address.....Nil.....

(10) Is your Mother alive?.....Yes.....

If so, state name and address.....Margaret Brotherton.....

.....Lebanycroft, Ontario, Canada.....

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

Are you her sole support, or not?.....Yes.....

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

.....\$30.00 per month. Only son.....

(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.

.....Nil.....

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

.....Yes.....

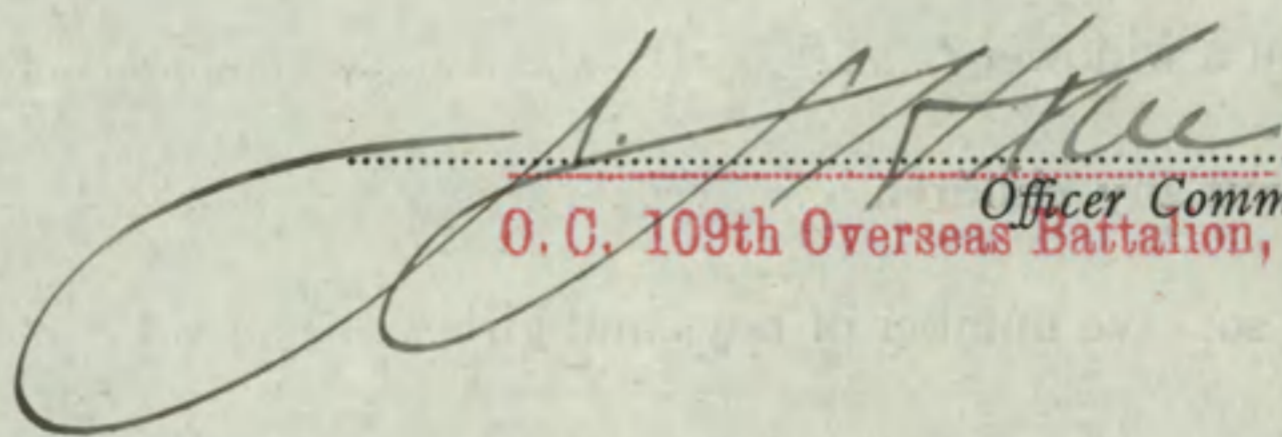
(15) Are you insured?.....Yes.....

If so, in what Company?.....Metropolitan Life Assoc......

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

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

Date.....5th July 1916.....

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

William John

Name **BROTHERSTON**. Rank
 Unit *b.a. S. Co. 5. D. U. of Supply.*
 Next of Kin **Canada.**

Reg. No. **725528.**

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W. O. List
1919 25.	<i>1/2/19</i> <i>5/1/19</i> yban G.H.	Etaples	Tonsillitis	42		7032.6
14	2 to S.H.	Camiers	42	} <i>A 493</i>		7267.3
	Ref A 426 Reg Chgd to 42					7267.3
3-4	4 disch	do	do	A 493		7729-12

Name **BROTHERSTON** ^{William John} *Rank* **Pte.**

Reg. No. 725528

Unit **20th Battalion,**

Next of Kin **Canada.**

Date 1917	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
13-3	War Hsp	Huddersfield.	Trench Feet.	B296		
21-3	K.C.R.C.H.	Bushy Park.	do.	B303		
30-3	<i>Discharged</i>		<i>do.</i>	<i>B.3.</i>	<i>5-9-17</i>	

NAME *Brookerston W.*

REGT'L No

725528

RANK AND CORPS

Pte

H. Q. FILE No. 649-

J. 20th Bn

FOLLOWS

No.

FOLLOWS

CABLE

No.

DATE

NATURE OF CASUALTY

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
B296	Warr, Huddersfield	13-3-17	Trench Feet
B303	to King; Can + Busby Pk. Addington	21-3-17	" "
B3(57)	Discharged	30-3-17	Trench Feet
A436	7 Cantle & Staples	26-1-19	For allites
A454-1	9 " " Camiers	14-2-19	42. as per H.L. 6454
A493	Dessch 49 Camiers	3-4-19	42
	Stab Camiers		

~~VA~~ LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

B
4

Number. 725,528 Rank. Pte

Surname. BROTHERSTON

Christian Name. William John

Unit. 20th Bn Law Inf Theatre of War. France

Date of Service. 6-10-16

Remarks

Latest Address

P.O. Bobcaygeon, Ont.

Roll No. B. Page 3656

NAME

REGT. No.

RANK AND UNIT

NEXT OF KIN

CABLE

NATURE OF CASUALTY

NO. 3

DATE

9.2.115-81499p

MAY

1954

SURNAME. *Brotherston.*

CHRISTIAN NAMES *William John.*

REGL. No. *725528*

RANK *Pte.*

UNIT *109th.*

FORMER CORPS *Nil.*

CARD NO. *2*
FOLL. *20-189 8-7-19 20th Batt.*

NEXT OF KIN.

NAMES IN FULL *Brotherston Mrs. Margaret*

RELATIONSHIP TO SOLDIER *Mother.*

ADDRESS *Bobcaygeon, Ont.*

CHANGE OF ADDRESS

COUNTRY OF BIRTH *Canada. Harvey, Ont.*

DATE *Jan. 11th, 1897.*

PLACE OF ATTESTATION *Bobcaygeon.*

DATE *Dec. 2nd, 1915.*

Sailed from Halifax 23 7/16 per S.S. "Olympic"

488 / 7. R/B. 2-7-19 54. etc.

MARRIED

SINGLE

Yes.

WIDOWER

TRADE OR CALLING

Clerk.

RELIGION

Church of England.

DESCRIPTION.

APPARENT AGE

18,

YEARS

11.

MONTHS

HEIGHT

5

FEET

7 1/4.

INCHES

CHEST MEASUREMENT

35,

INCHES

EXPANSION

2.

INCHES

COMPLEXION

Fair

EYES

Brown.

HAIR

Brown.

DISTINGUISHING MARKS

Nil.

MEDICAL EXAMINATION.

PLACE

Lindsay, Ont.

DATE

Dec. 2nd. 1915

No 725528 RANK

Pfc

NAME

Buckner W. J.

T. O. S. 2-12-15, UNIT

D. O. 12. 3-12-15-

109th Battalion

M. D. 3

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915 Dec 2	1915 Dec 31	✓		
1916 Jan.	1916 Feb.	✓		
	Mar.	✓		
	April.	✓		
	May.	✓		
	June.	✓		
	July.	✓		
UNIT SAILED JUL 23 1916				



Surname *Brotherston.* Christian Name or Names *W. J.* Reg. No. *725,526.*
 Rank *Pvt* Unit *20th Btn. 1st Coy* Troop *5 DU of S. C.* Batty. *Case*
 Hospital *was Muddersfield.* Date of Admission *13-3-17.*

Transferred *King's Ban. Busby Pk.* Hosp. *21. 3. 17.*
7 Col. Gen. No. Elaples Hosp. *25-1-19*
Flav. Sta. Ammer Hosp. *14-2-19*
 Hosp.

Diagnosis

French Feet.

(1) Later Diagnosis (if changed)

Tonsillitis & V.D.S.

(2)

(3)

Additional Diagnosis: if more than one state present

DISPOSITION

Dis 30. 3. 17.
Date

Dis: 3. 4. 19

REMARKS

Cl. 17. 3. 17. 3296.

" 26. 3. 17 B. 303.

" 6. 9. 17. B 303

3. 2. 19 A 436. ①

24-2-19 @ 4514 Ref. @ 426 Diag: changed

10. 4. 19 A 4932. to read V.D.S.

A.M.D. 2 DEPT.

Bch. of D.G.M. & D.M.F.C. London.

R.

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

	Hospital	Adm.
1.		
2.		
3.		
4.		
5.		
6.		
7.		

A.G.R. Rank Name BROTHERSTON, William John Reg'l No. 725528

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

Place and Date of Enlistment Bobcaygeon, 2nd Decr., 1915. Place of Birth Harvey, Ontario, Canada

Name and Address, Next-of-Kin Margaret Brotherston, P.O., Bobcaygeon, Ont., Canada. Relationship Mother.

Assigned Pay Monthly \$ Payable to Relationship

Separation Allowance \$ Payable to Relationship

Discharge, Date and Place

Reason

Character

H. W. & V., Ltd.—7165-16.

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	109th Bn	S.O.S. to 20th Bn	Bramhall	5-5-16	Pt. II. 150.279 I.W.C.
11-10-16	20th Bn	T.O.S. from 109th Bn	<u>Field</u>	6-10-16	" II 55.
17-3-17	"	Adm. War Hospital	Huddersfield	13-3-17	C.L. B296 trench feet.
19-3-17	"	Invalided sick and posted to 1st Gen. Out. Regt. Depot	Shorcliffe	11-3-17	Pt. II O. 22
19-3-17	1st CORP.	T.O.S. on posting from 20th Bn	W Sandling	13-3-17	10
26-3-17	20th Bn	To King's Can Red X Hospital	Buckey Park	21-3-17	Ch B309.
2-4-17	1 CORP	on command 1 CCD	W Sand	30-3-17	Pt II 24

A.F.B. 103 CHECKED

16 OCT. 1916

725528 Brotherton William John

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.				
23.5.17	5 Ke. BN	To S from 1 CORB ^{on reporting from 1000}	Wandling	22.5.17	18 APR 11 27/22-10-17 -137 (80/83/17100)
5-9-17	20.	Dis ban on keep	Bushy Park	30-3-17	L. B. 33
1-12-17	510s	SOS. to 20 snops.	Wandling	30-11-17	PT 132
14-12-17	20.	SOS. to Can. Nat. Post.	Field	6-12-17	PT 90.
17.12.17	6 L Pool	108 from 20 Bn.	-	7.12.17	PT 23
2.2.18	510s Pool	S.O.S to S.D.U. of Supply	"	1st 12-17	5 CDU - 5 PT 2d/15.2.18.
31-3-18	5 DU of Sup	Awarded Good Conduct Badge.	-	24.2.18	PT 5.
12.3.19	"	S.O.S. to 3 C. Y. Butchery	-	14.2.19	114 bogd/12/19 3 Hld Butchery.
24.4.19	3 C. Y. But	S.O.S. to Case ex	Lower	17.4.19	18 D.O. 95 d/21-4-19 C.A.S.C.C.O.
28.5.19	Olding C.C.	To S from C.A.S.C. depot <i>Canada 84-1-61.</i>	Wesley	23.5.19	20 4 2 DO 125 C.A.S.C.C.O. SOS to Wey
23-7-19	O. H. Rec	S.O.S. of O.M. F.C. having sailed to Canada	London	25-6-19	A.O.I. C.A.S.C. Personnel to Wey 1.19 26.1.19

CHECKED
 A.F.B. 108
 DEC 1917
 20 11 20
 90d/14.2-17

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

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

Sheet No. 2.

L. L. Job 310.-Req. 6574.

Name of Soldier Brotherston W. J.
 425528 (Pte) 109 Bn

Mrs M. Brotherston
PAYMENTS.

Month.	Year.	Cheque No.	Amt.	Remarks.
				AUG 1 1916
April	1916			
May				
June				
July				
Aug.		15498	15	
Sept.		15476	15	
Oct.		20132	15	
Nov.		25299	15	
Dec.		34405	15	
Jan.	1917	36623	15	
Feb.		3837	15	
		42981	15	
March		46166	15	
April		129	15	
May		6861	15	
June		13399	15	15.8.
July		20538	15	OB
Aug.		27665	15	OB
Sept.		37080	15	W
Oct.		48492	15	\$225.00 -
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

WAP

BH

WAP

*412981 Cancelled Au
 15.8. R 46166 cancelled 1/3/17 mth.*

012210

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

To Whom *Mrs M. ^{Marquet} Brotherston* By Whom Assigned *Brotherston H. J.*
 Address *Bobcaygeon, Ont.* Regtl. No. *425528.*
 Rank *Pte.*
 Corps *109 Btn.*
 Rate *15.* **AUG 1 1916**

PAYMENTS

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



13:00

* i

10.0

4-013-9

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2. Mrs. Margt. Brotherton

Name of Soldier Brotherton Wm J.
725528 Pte

PAYMENTS.

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

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916	L 486	20	20
May		M 4908	20	20 M 4908 Cancelled rewrite
June		M 7962	20	20
July		A 6403	20	20
Aug.		S 11489	20	20
Sept.		F 15752	20	20
Oct.		F 18588	20	20
Nov.		L 21873	20	20
Dec.		L 24934	20	20
Jan.	1917	F 28525	20	20
Feb.		F 31439	20	20
March		F 34606	20	20
April		H 506	20	20
May		G 4062	20	20 300
June		I 6934	20	20 I 6934 cancelled RE-WRITE
July		A 10558	20	20
Aug.		K 13587	20	13
Sept.		J 16598	20	13
Oct.		I 23116	20	20 400.00 /
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE
SEPARATION ALLOWANCE
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier _____

PAYMENTS.

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

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

1-3-16

Separation and Assigned Pay Branch

B

12766

Aug 1/16

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

20	25-12-17	30	1/9/18
----	----------	----	--------

P.C. 2753
M.O. 42986

RATE OF ASSIGNMENT

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

PARTICULARS OF SEPARATION ALLOWANCE

No. 725-5-28
 Rank *Plt* Promoted Reverted Discharge
 Soldier's Name *W. J. Brotherton*
 Battalion *109th Bn*
 Beneficiary *Mrs Margaret Brotherton*
 Relationship *mother*
 Address

PARTICULARS OF ASSIGNMENT

Name *Mrs Ingt Brotherton*
 Address *Bobbaygunn*
 Change of Address *Cut*

- 1
- 2
- 3
- 4

infir 2.5.54
2.8.16
22 1118

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
Oct. 31/17		400	225	625	
Nov	B 54624	20	15	35	
Dec	D 60359	20	15	35	<i>Bn.</i>
Jan/18	E 54182	20	15	40	<i>hd</i>
Feb	C 96045	25	15	40	
Mar	A 103335	25	15	40	
Apr	A 553	25	15	40	
May	B 18131	25	15	40	<i>✓</i>
June	E 14261	25	15	40	<i>✓</i>
July	V 29819	25	15	40	<i>✓</i>
Aug.	C 33993	25	15	40	<i>✓</i>
Sept.	D 46374	25	15	40	<i>✓</i>
Oct	F 44198	25	15	40	
Nov	B 55763	25	15	40	<i>✓</i>
Dec	A 68152	45	15	60	
Jan	H 71585	30	15	45	
Feb	I 80568	30	15	45	
MAR	F 86851	30	15	45	
APR	G 2118	30	15	45	
May	J 7145	30	15	45	
June	B 10431	30	15	45	
July	C 11187	30	15	45	
		975	540		

2249-N-7

M.S.
 A/c Closed *3.7.19*
 Ret'd *Carson*
 Date *12/19*
 Clerk *Smith*

86 mds. 96339 Des. KB. 12/19
Other

AUDITED



M. F. W. 128
 400M-617-172-89-141
 L. L. 2220-M. & D. 1483.

925 B3
[Handwritten signature]

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

11/42

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

--	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No.

Name

Rank

Promoted

Reverted

Discharge

Address

Soldier's Name

Change of Address

Battalion

1

Beneficiary

2

Relationship

3

Address

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
------	------------	------------	------------	-------	---------

M. F. W. 128
 400M. 6-17-1772-89-1141
 L. L. 22320-M. & D. 1983.

11/42

1-3-16

MILITIA AND DEFENCE

236

SEPARATION ALLOWANCE

Name *Margaret Brotherton*

Name of Soldier *Brotherton, Wm J.*

Address *Bobcaygeon
Ont*

Regtl. No. *725528*

Rank *Rt.*

Corps *109th Bn*

Relation to Soldier } *Mother*
wife, child or mother }

To what Corps belonging }
when called out }

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
Apl.				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March		<i>029008</i>	<i>20</i>	<i>20</i>



*

~~Handwritten text, possibly "H 200"~~

H 200

~~Handwritten text, possibly "H 200"~~

Handwritten text

Handwritten text

~~Handwritten text, possibly "H 200"~~

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2. Mrs. Margt. Brotherton

Name of Soldier Brotherton Wm J.
725628 Pte *

PAYMENTS.

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

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916	L 486	20	20
May		M 4908	20	20 M 4908 Cancelled rewrite
June		M 7962	20	20
July		A 6403	20	20
Aug.		S 11489	20	20
Sept.		F 15752	20	20
Oct.		F 18588	20	20
Nov.		L 21873	20	20
Dec.		L 24934	20	20
Jan.	1917	F 28525	20	20
Feb.		F 31439	20	20
March		F 34606	20	20
April		H 506	20	20
May		G 4062	20	20 300
June		I 6934	20	20 I 6934 Cancelled RE-WRITE
July		N 10558	20	20
Aug.		K 13587	20	B
Sept.		J 16598	20	B
Oct.		I 23116	20	20 400.00 /
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE
SEPARATION ALLOWANCE
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier.....

PAYMENTS.

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

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

1. Triplicate Attestation Paper (M.F.W. 23), or Particulars of Recruit (M.F.W. 133).
2. Casualty Form (M.F.W. 54).
3. Medical History Sheet (M.F.B. 313 or A.F.B. 178).
4. Proceedings of Med. Board (M.F.B. 227 or M.F.W. 129).
5. Dental Certificate (C.A.D.C. 5009a).
6. Field Conduct Sheet (A.F.B. 122).
7. Proceedings on Discharge (M.F.W. 218a).
8. Discharge Certificate (M.F.W. 39)
(enclosed in special envelope (260M)).
9. Copy of Discharge Certificate (M.F.W. 39a).
10. Dispersal Certificate (D.D.S).
11. Equipment Statement (Q.M.G. Form (D.O.S. 2), and Clothing).
12. Last Pay Certificate (P. 851).
13. Pay Book (P. 861).
14. War Service Certificate (Form M.F.W. 2595).
15. Sundry Papers.

Group.....
 Checked by No. 9.....
 Date. 16 JUN 1919.....

M Occupational Group 3
 Dispersal Area
 SHORT FORM.

War Service Badge 318779
 Class "A" No.
 PROCEEDINGS ON DISCHARGE.
 (Demobilization.)

HM T-CARCTIA

1. No.	725528	3 ALLING, No 84
2. Rank.	Lt	Embarked: 25.9.19.
3. Name.	Brotherston William John	
4. Unit.	CORPS DEPOT C.A.S.O.	
5. Date of Discharge	JUL 4 1919	Place Toronto Ont.
6. Reason for Discharge	DEMobilisation	
7. Authority.	No. 2, D.D., Part II, D.O. No. 189	
8. Proposed Residence after Discharge	Bobcaygeon Ont P.O. Bobcaygeon 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. ?	
	WJB Brotherton Signature of Soldier.	
10. CONFIRMATION.	The discharge of the above named man is hereby confirmed.	
Place	No. 2 District Depot Toronto, Ont.	
Date	JUL 4 1919	
	Bruce Thompson Signature (O. C. Discharging Unit.)	

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.

The Board concurs with 19

19. Is the invalid fit for

- (a) General service,
- (b) Service abroad, not general service,
- (c) Home service (Canada only),
- (d) Temporarily unfit.
- (e) Unfit for service in Categories A, B and C

(Category A) (Yes or No.) *ye. Cat. A*
 (" B) (Yes or No.) *N.A*
 (" C) (Yes or No.)
 (" D) (Yes or No.)
 (" E) (Yes or No.)

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.)

*Discharged for Return to Canada - Auth. G. P. Chapman
 for 3 1/2 months*

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

PLACE *Man Am* President *W. Buch*
 DATE *17-5-19* Members

TO BE COMPLETED WHEN TREATMENT IS REFUSED

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

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

PLACE President
 DATE Members

APPROVED BY *W. Buch Major* Assistant Director of Medical Services.
 DATE *17-5-19*

ASSISTANT DIRECTOR OF
 Director-General of Medical Services.
 DATE *MAY 20 1919*
 13 BERNERS ST. LONDON, W.1

THIS FORM WILL BE USED FOR ALL RANKS
 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 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."
3. 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.
4. Special care is required in answering question 9. Read the questions carefully. All questions must be answered.
5. If space provided under any section is insufficient add another sheet. Such sheets must be initialed 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 7, 8, 9 and 10 be communicated to the invalid, 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 *BLANFORD* DATE *17-5-19*

1. 1 (a) Unit *CORPS DEPOT C.A.B.G.* (b) Regimental No. *725528* (c) Rank *PTE*
 (d) Surname *BROTHERSTON* (e) Christian name *WILLIAM J.*
 (f) Home address *BOBCAYGEON ONT.*
 (g) Next of Kin *MRS. M. BROTHERSTON* (h) Relationship *MOTHER*
 (i) Address of Next of Kin *AS ABOVE*
 2. Age last birthday *23* Date of birth *11-1-18 1896*
 3. Enlistment, or Appointment (if an Officer) (a) Place *BOBCAYGEON* (b) Date *2-12-15*
 4. Personal description:
 (a) Height *5' 10"* (b) Weight *146* (c) Complexion *DARK*
 (d) Colour of hair *BROWN* (e) Colour of eyes *BROWN* (f) Identification marks, Scars, etc. *Amputated
 stump left arm 1/2 size right*
 5. Former trade or occupation *CLERK*

	Years		Days	
	From	To	From	To
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).			<i>3</i>	<i>165</i>

	PERIODS	
	From	To
<i>Patient Statement</i>		
Canada	<i>2. 12. 15</i>	<i>23. 7. 16</i>
England	<i>25. 7. 16</i>	<i>5. 10. 16</i>
	<i>10. 3. 17</i>	<i>1. 12. 17</i>
	<i>5. 10. 16</i>	<i>10. 7. 17</i>
France or other theatres of War	<i>1. 12. 17</i>	<i>17. 4. 19</i>

7. Original disease, or injury *A.D.D.S.*
 (a) Date of origin *FEB. 1919* (b) Place of origin *FRANCE*
 (c) Cause *INFECTION*

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.)

V.P.S. No symptoms of any kind.

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.)

No symptoms of any kind.

(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
Special Senses... No Respiratory System... No Integumentary System... No
Disturbances of Mentality... No Digestive System... No Muscular System... Yes
Osseous and Joint Systems... No Any other general condition... No

Conjunctival underdeveloped left eye. Eye is about 1/2 size of right. All movements normal 60% of strength of right eye. Has been like this since birth, is no disability

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

Documentary - Casualty Form
14.7.19 - 2.4.19 V.P.S.

Man states he became infected during Feb + was in Hosp on above dates. No worse symptoms. First positive test one 12.5.19 - it was neg.

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).)

First fit March 1917. Hosp two weeks. sent on Discharge Certificate Jan + Feb 1919. Two weeks Hosp.

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

see 9B.

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.)

N.A.

12. Was the disability caused, or aggravated; (a) by intemperance, or improper conduct; or (b) by unreasonable refusal to accept treatment? Improper conduct

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 mos.

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

Specific for V.P.S.

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)

Suggest that the patient be kept with on arrival in Canada in accordance with P.C. 9.47. dated 20.1.19

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

17. Recommendations

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 of invalid examined. Rank.

* Strike out whichever inapplicable.

ASSIGNED PAY.	ENGLAND or CANADA.	SEPARATION ALLOWANCE.	ENGLAND or CANADA.
EFFECTIVE DATE:-	1-8-16	EFFECTIVE DATE:-	
AMOUNT:-	15 00	AMOUNT:-	

NAME:- **BROTHERSTON, W^m J^r**
 NUMBER:- **725528**

NAME, ADDRESS, RELATIONSHIP & AUTHORITY

Margaret Brotherton
Bob Caygeon, ON.
Cancelled Apr 16/19

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

PARTICULARS OF RANK OR APPOINTMENT		
AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		<i>P/O</i>

UNIT AND TRANSFERS

ORIGINAL UNIT:- **100 Bau**

DATE ACCOUNT FIRST OPENED:-

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S'F'D	UNIT TRANSFERRED TO
			<i>5 CAUJ</i>

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
12/18/19	275	<i>£1-10-0</i>	730			<i>Ldg</i>	<i>25.66</i>
10/15/19	177	<i>£10-00</i>	48.67			<i>Rtc</i>	<i>20.91</i>

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	<i>100</i>	<i>10</i>		

PARTICULARS OF RENDERING NON-EFFECTIVE: *Dis to Bau 31/19, MA 9263 Belford to Belford 20/5/19 MA. 2*

MONTH 1918	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
Mar	<i>Bau 75</i>								<i>6081</i>		
Apr	<i>PP</i>	<i>33</i>		<i>CAP</i>				<i>15</i>	<i>78 81</i>		
				<i>473 7/4 FIELD IC9BA @</i>	<i>446</i>				<i>74 35</i>		
		<i>33</i>		<i>1258 20/4</i>	<i>446</i>			<i>15</i>	<i>69 89</i>		
May	<i>PP</i>	<i>3410</i>		<i>CAP</i>				<i>15</i>	<i>54 89</i>		
				<i>2264 12/5 AUGA @</i>	<i>446</i>				<i>88 99</i>		
		<i>3410</i>		<i>2756 15/5 C9BA</i>	<i>446</i>			<i>15</i>	<i>84 53</i>		
June	<i>PP</i>	<i>33</i>		<i>CAP</i>				<i>15</i>	<i>11 307</i>		
				<i>4561 15/6 C9BA</i>	<i>446</i>				<i>98 07</i>		
				<i>4001 1/6 Staples</i>	<i>446</i>				<i>89 15</i>		
		<i>33</i>		<i>5365 30/6</i>	<i>446</i>			<i>15</i>	<i>84 69</i>		
July	<i>PP</i>	<i>3410</i>		<i>CAP</i>				<i>15</i>	<i>118 79</i>		
				<i>6158 12/7 C9BA</i>	<i>446</i>				<i>103 79</i>		
		<i>3410</i>		<i>7091 27/7 2/10 CAUJ @</i>	<i>446</i>			<i>15</i>	<i>99 33</i>		
Aug	<i>PP</i>	<i>3410</i>		<i>CAP</i>				<i>15</i>	<i>97 57</i>		
				<i>7834 11/8 C9BA</i>	<i>446</i>				<i>128 97</i>		
		<i>3410</i>		<i>8741 15/8</i>	<i>446</i>			<i>15</i>	<i>113 97</i>		
Sept	<i>PP</i>	<i>33</i>		<i>CAP</i>				<i>15</i>	<i>109 57</i>		
									<i>105 05</i>		
									<i>123 05</i>		

NUMBER 725528

RANK

P6

NAME

BROTHERSTON, W.J.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
		33						15	12305		Nil
				9367 9/9 CGBA	1	446			11859		
				10543 22/9	8	446			11413		aka 900
		33				872		15			
Dec	PP	34/10		bal				15	13323		
				551 2/10 CGBA	2	466			12857		
				1576 16-10 CGBA	27	466			12391		25/1
				2451 30/10/10	49	466			11925		sar 10/10
		34/10				1398		15			
Nov	PP	33		bal				15	13725		
				3710 13/11 CGBA	70	1399			12325		10/10
				1007 10/11 78/11	23	11650			646		10/11/18
		34/10						15	2556		
				7167 11/12 CGBA	59	466			2090		
Jan	PP	34/10		bal		13545		15	4000		
		10/12				13545		45			
Feb	PP	30/80		bal				15	5580		
				8822 24/12 CGBA	3	933			4647		
				1003 8/1	13	466			4181		
				2603 22/1	44	466			3715		
Mar	PP	34/10				1865		15	5625		
		6/190				1865		30			
Apr	PP	33		bal				15	7425		
				HSY 14/2/19 - 21/1/19 HSDay @ 60¢			2880		4545		
				2019 21/1/19 3 CG BA					4089		
				448 5/1 6/10	9	456			1656		
				122 24/1 Bfd	39	452	2433		3566		
May	PP	34/10		bal				15	2836		
				375175 based on	96	730			2031		
				1471 16/5 Bfd	81	4867					
		67/10				8486	2880	30			
				6154 1/6 wit	13	973			30.04		
				7082 2/6 ✓	16	973			3977		
				9105 22/6 ✓	32	973			4950		
						2919					

A.O.A to Canada list 84 - 28/10/19