

REGIMENTAL DOCUMENTS

9 NAME **BROWN. PETER. HASTY.**

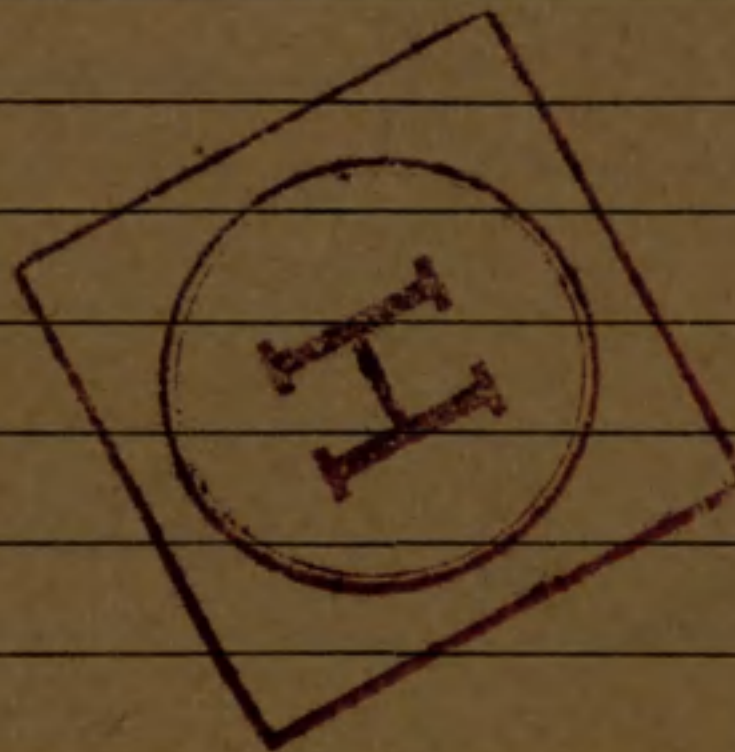
REGT. NO. **775744**

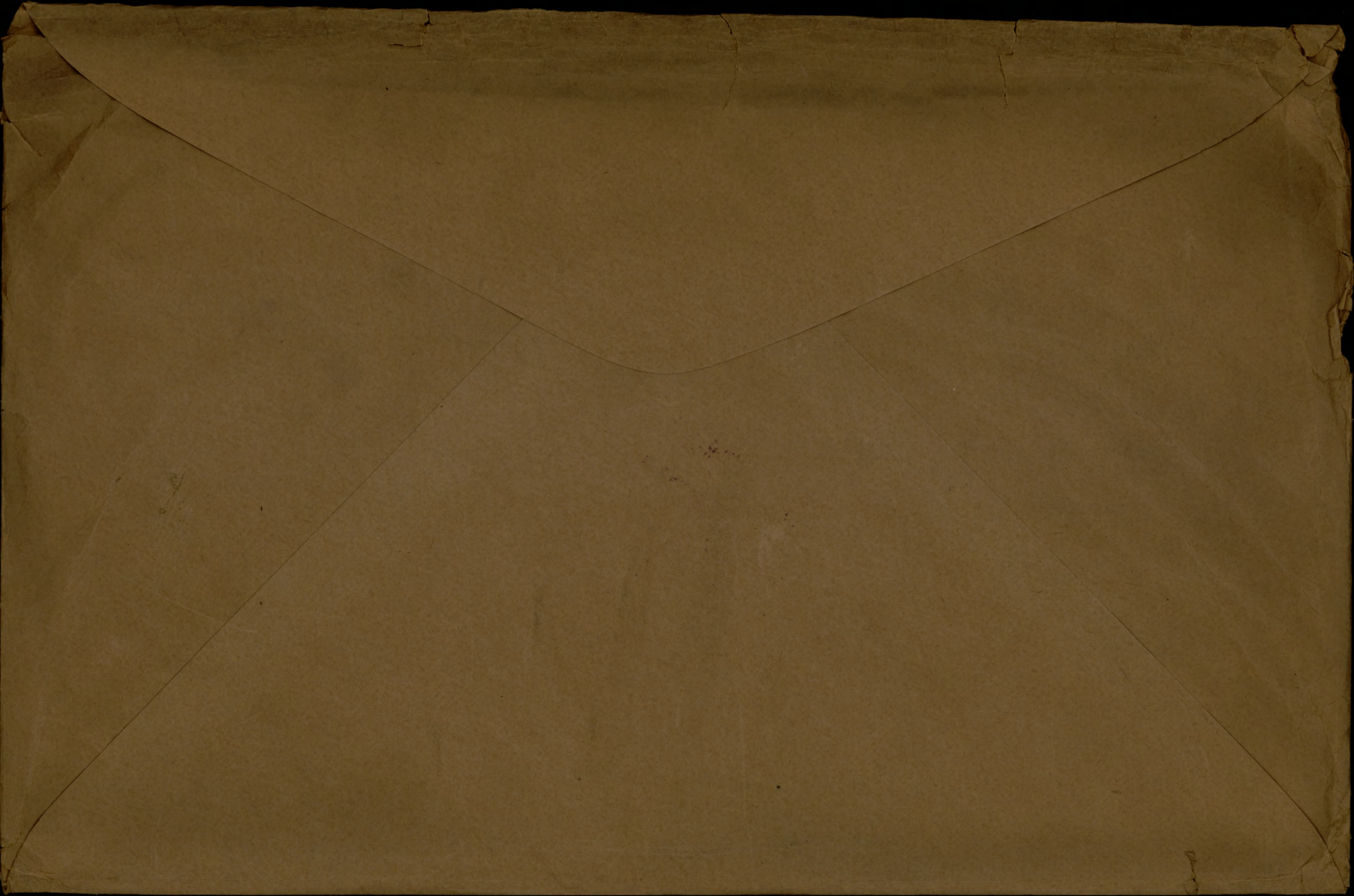
UNIT **#2 Gas Unit**

(126th Baltn) (2nd E.O.R.D.)

H. Q. FILE NO.

CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
2 ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
2 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)				45230	
COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
3 MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
DENTAL HISTORY SHEET (M.F.B. 465)					Category
5 MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					
MEDICAL EXAMINATION (M.F.W. 129)					overage
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
1 LAST PAY CERTIFICATE (M.F.W. 44)					
2 PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
PARTICULARS OF CHARACTER (A.F.W. 3226)					
COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
1 A.F.B. 122					
2 M.F.W. 125					
1 " " 67					





123TH OVERSEAS BATTALION
ATTESTATION PAPER.
CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

ORIGINAL

No. 775744

Folio.

QUESTIONS TO BE PUT BEFORE ATTESTATION.
 (ANSWERS).

1. What is your name?.....Peter Hasty Brown.....
2. In what Town, Township or Parish, and in what Country were you born?.....Ottawa.....
3. What is the name of your next-of-kin?.....Mrs. V. Brown,.....
4. What is the address of your next-of-kin?.....37 Beaconsfield Ave. Toronto. Ont.....
5. What is the date of your birth?.....Sept. 20, 1873.....
6. What is your Trade or Calling?.....Baker.....
7. Are you married?.....Yes.....
8. Are you willing to be vaccinated or re-vaccinated?.....Yes.....
9. Do you now belong to the Active Militia?.....No.....
10. Have you ever served in any Military Force? If so, state particulars of former Service. 3 Years Ottawa Field Battery.....
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.....

.....*P. H. Brown* (Signature of Man).
*J. Hamilton* (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Peter Hasty Brown, 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.

.....*P. H. Brown* (Signature of Recruit)

Date: Jan. 5 1916.
*J. Hamilton* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Peter Hasty Brown, 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.

.....*P. H. Brown* (Signature of Recruit)

Date Jan. 5 1916.
*J. Hamilton* (Signature of Witness)

CERTIFICATE OF MAGISTRATE.

The Recruit above-named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath

before me, at Toronto this 5 day of Jan. 1916.

.....*J. Hamilton* (Signature of Justice)
 O. C. 126th O. S. "Pool" Batta. C. E. F.

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

.....*J. Hamilton* (Approving Officer)
 O. C. 126th O. S. "Pool" Batta. C. E. F.

Description of Peter Hasty Brown on Enlistment.

Apparent Age.....42 years.....4 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. 8½ ins.

Chest measurement { Girth when fully expanded.....39 ins.
 Range of expansion.....1½ ins.

Tattoo on each forearm

Complexion.....Fair

Eyes.....Blue

Hair.....L. Brown

Religious denominations. { Church of England.....
 Presbyterian.....
 Wesleyan..... X
 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.....Jan. 5.....1916

B. G. McKay

Place.....Toronto

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.

.....Peter Hasty Brown.....having been finally approved and inspected by me this day, and his Name, Age, Date of Attestation, and every prescribed particular having been recorded, I certify that I am satisfied with the correctness of this Attestation.

J. J. Hamilton
 Lt. Colonel

(Signature of Officer)

O. C. 126th O. S. "Peel" Battn., C. E. F.

Date.....Jan. 5,.....1916

Medical Report on an Invalid.

Station Bramshott

Date Feb 9th, 1919.

- 1. Unit. Gen Hely's Bat.
- 2. Regimental No. 275744
- 3. Rank Pte
- 4. Name Brown Peter Hely
- 5. Age last birthday 47.
- 6. Enlisted { on 5th of Jan 1916
at Toronto
- 7. Former Trade or Occupation { Baker.

8. Disability.

- 1. Myalgia
- 2. Flat feet
- 3. Deformed right hand.

Statement of Case.

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.

- 9. Date of origin of disability. Previous to enlistment.
- 10. Place of origin of disability. Toronto Canada.

11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.

He states he had rheumatic pains previous to enlistment. The second finger of right hand has been contracted since he was six months old. He claims to have been bothered with flat feet for the past twenty years having to have boots made to order.

Medical boards 3/12/16 class CIII
 5/12/16 class CII
 3/11/16 "Efficient permanent bandage"

- 12. (a) Give your opinion as to the causation of the disability. Constitutional
- (b) If you consider it to have been caused by wounds received or illness contracted (1) in the presence of the enemy (2) on active service, explain the specific conditions to which you attribute it. (See notes on page 3).
1. no
1. no. not aggravated by active service

13. What is his present condition?

Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.

nervous system - normal.
muscular system - good
Heart & circulatory - good.

Respiratory system - fair. Bronchial breath sounds present.

His feet are flat both arches have broken down, bunions on both feet.

The second finger right hand is contracted

He complains of rheumatic pains in left shoulder and leg.

14. If the disability is an injury, was caused

not applicable

- (a) In action?
- (b) On field service?
- (c) On duty?
- (d) Off duty?

15. Was a Court of Inquiry held on the injury?

not applicable

- If so—
- (a) When?
 - (b) Where?
 - (c) Opinion?

16. Was an operation performed? If so, what?

not applicable

17. If not, was an operation advised and declined?

not applicable

18. In case of loss or decay of teeth. Is the loss of teeth the result of wounds, injury or disease, directly* attributable to active service?

not applicable

19. Do you recommend

- (a) ~~Fit for duty?~~ no
- (b) Fit for light duty? yes.
- (c) Invalided to Canada? no
- (d) ~~Discharge as permanently unfit?~~ no

K. H. Mayhew Capt. C.A.M.C.
Officer in medical charge of case.

I have satisfied myself of the general accuracy of this report, and concur therewith, except†

Station Bramshott

J. W. Russell Capt. C.A.M.C.
Officer in charge of Hospital.

Date 12-2-17

* Loss of teeth on, or immediately after, active service, should be attributed thereto, unless there is evidence that it is due to some other cause.

† Delete this word if no exceptions are to be made.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at Bramshott 5-12- 1916.

No. 775744 Rank..... Name Brown Peter H

Local Unit ~~C.C.A.B~~ Overseas Unit..... Age 45

Examination held at G.D.B. Nyfeth

DISABILITY.
Overseas—Local.
(scratch one out)

Over Age

PRESENT CONDITION.

Reboard
Condition same

Class 6th

BOARD RECOMMENDS:—

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

Signatures:—

Members {
 P. J. Stewart Maj President.
 J. J. Farwell Maj
 Jas. F. H. Hammond Capt.

APPROVED

Dated at Bramshott 6/12/ 1916. [Signature]

Dated at 1919

APPROVED

Members

President

Signatures

- 2. Discharge
- 4. Fit for Permanent Base Duty
- 3. Fit for Temporarily Base Duty weeks
- 5. Fit for duty after weeks, physical training
- 1. Fit for Duty

BOARD RECOMMENDS —

PRESENT CONDITION

Research one only
Overseas — Local
DISABILITY

Examination held at

Local Unit Overseas Unit Age

No. Rank Name

Dated at 1919

PROCEEDINGS OF A MEDICAL BOARD

1919

125189

EXAMINATION BY STANDING MEDICAL BOARD, BRAMSHOTT.

Dec 3

1916.

No. 775744 Rank PLI Name Brown P I +

Local Unit 51st Overseas Unit _____ Age 42

Examination held at Bramshott, Hants.

DISABILITY.

Overseas—Local.
(scratch one out)

Deformed right hand

+

Flat Feet

PRESENT CONDITION.

The second finger of the right hand is contracted and joint displaced under skin the feet are flat

Board recommends:

1. Fit for Duty.
2. Fit for duty after _____ weeks physical training.
3. Fit for Base duty _____ weeks.
4. Fit for Permanent Base Duty. *Class C III*
5. Discharge.

Signatures:

Members { *Pres.*
[Signature]
[Signature]
[Signature]

Approved.

Bramshott 3/12- 1916.

for A.D.M.S. + 900
Canadian Troops, Bramshott.

DATE

1916

NAME

RESIDENT

ADDRESS

1. Diagnosis

2. Etiology, Pathogenesis, and Course

3. Etiology, Pathogenesis, and Course

4. Etiology, Pathogenesis, and Course

5. Etiology, Pathogenesis, and Course

6. Etiology, Pathogenesis, and Course

PRESENT CONDITION

7. Etiology, Pathogenesis, and Course

8. Etiology, Pathogenesis, and Course

9. Etiology, Pathogenesis, and Course

10. Etiology, Pathogenesis, and Course

11. Etiology, Pathogenesis, and Course

12. Etiology, Pathogenesis, and Course

13. Etiology, Pathogenesis, and Course

STANDARD MEDICAL BOARD EXAMINATION

BY

EXAMINATION

1916

EXAMINATION BY STANDING MEDICAL BOARD, BRAMSHOTT.

No. 775744 Rank plc Name Brown Peter H ^{3/11/} 1916.
Local Unit 109 Overseas Unit _____ Age 45-

Examination held at Bramshott, Hants.

DISABILITY. own eye

Overseas—Local.
(scratch one out)

PRESENT CONDITION.

Has hallux valgus both feet
He states he has rheumatic pains
in right arm & leg. 2nd finger of
right hand contracted on to the
palm of hand since he was six
months old

Board recommends :

1. Fit for Duty.
2. Fit for duty after _____ weeks physical training.
3. Fit for Base duty _____ weeks.
4. Fit for Permanent Base Duty. — yes
5. Discharge.

Signatures :

C. E. Coopelle ^{Major} Pres.
 Members { H. MacLaren Capt.
 H. [unclear] Capt.

Approved.

Bramshott 3-11 1916. H. Stewart May
for H.C.C. for A.D.M.S. Calver
Canadian Troops, Bramshott.

STANDARD BOARD

1. Name of Candidate
2. Name of Institution

3. Date

4. Signature

- 1. _____
- 2. _____
- 3. _____
- 4. _____

5. Remarks

GENERAL CONDITIONS

1. _____

2. _____

3. _____

4. _____

5. _____

STANDARD BOARD
 IN
 EXAMINATION

EXAMINATION BY STANDING MEDICAL BOARD, BRAMSHOTT.

Dec 3

1916.

No. *776744* Rank *Plt* Name *Brown P Lt.*

Local Unit *51st* Overseas Unit _____ Age *42*

Examination held at Bramshott, Hants.

DISABILITY.

Deformed right hand

Overseas—Local.
(scratch one out)

Flat feet

PRESENT CONDITION.

The second finger of the right hand is contracted and joint displaced under this the feet are flat

Board recommends :

1. Fit for Duty.
2. Fit for duty after _____ weeks physical training.
3. Fit for Base duty _____ weeks.
4. Fit for Permanent Base Duty. *Class C III*
5. Discharge.

Signatures :

A. Stewart Maj Pres.

Members {

James H. Hammond Capt.

Approved.

Bramshott *3/12* 1916.

W. P. G. G. G.
for A.D.M.S. & G.O.C.
Canadian Troops, Bramshott.

NAME

RESIDENCE

EDUCATION

EXPERIENCE

REMARKS

1. For the purpose of this examination, the candidate must have been a resident in the Province of British Columbia for at least one year immediately preceding the date of the examination.

1890-1891

Handwritten notes in the middle section, possibly describing a candidate's background or the board's requirements.

PHYSICAL CONDITION

Height

Weight

General appearance

Age

Sex

STANDARD MEDICAL BOARD, VANCOUVER

OR

EXAMINATION

EXAMINATION

BY

STANDING MEDICAL BOARD, BRAMSHOTT.

Feb 15 1917

No. 775744 Rank *Plt* Name *Brown J. D.*

Local Unit *57 G.D.B. 126* Overseas Unit _____ Age *47*

Examination held in Bramshott area.

DISABILITY.

*Deformed right hand
&
Bunion*

Overseas—Local.
(scratch one out)

PRESENT CONDITION.

This man has deformed right hand - There is a shortening of middle metacarpal bone due to small pox (arthritis) when a child. He can only extend middle finger to a right angle with hand but can fully flex it. The arches have not fallen but there are marked bunions on both feet. He is quite able to march if he has suitable boots

Board recommends :

②

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

Signatures :

Members

C.E. Cooper Cole ^{*high*} Pres.

J.P. Irvine Capt

W. H. Jackson Capt.

Approved.

Bramshott *15 2* 1917

John Russell Capt. C.A.M.C.
for A.D.M.S. and G.O.C.,
Canadian Troops, Bramshott.

Brampton

101

Approved

Members

Signature

2. Discharge

1. For Permanent Base Data

3. For Base Data

4. For Data

5. For Data

Board Recommendation

PRESENT CONDITION

(Signature) Local

DISABILITY

Examination held in Brampton area

Local Date

Overseas Date

No.

Rank

Name

101

STANDING MEDICAL BOARD: BRAMPTON

BY

EXAMINATION

4

M.D. 2
No. 23

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

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

Regimental No. 775744 Rank pte Name P. H. Brown

Corps #2 Cas. Unit who was* discharged

On Feb 11 1918, to.....
*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from Feb 1 1918,
to Feb 11 1918, the inclusive date of transfer or discharge.

Dr.	\$	c.	Cr.	\$	c.
Bal. Dr. from prev. month.....			Bal. Cr. from prev. month.....		
Advances } No.....			Regt'l Pay <u>11</u> days at \$ <u>1</u> c.....	<u>11</u>	
by } No.....			Field Allow. <u>11</u> days at \$ <u>10</u> c.....	<u>110</u>	
Cheques } No.....			Separation Allowances* (Monthly) <u>Feb</u>	<u>890</u>	
Assigned Pay and Sep'n Allee. No. <u>16807</u>	<u>990</u>		Other Allowances*		
Other charges			Other Credits* <u>clothing</u>	<u>13</u>	
Payment on transfer or discharge No. <u>16808</u>	<u>83</u>	<u>10</u>	Bal. Dr. (to be deducted by new unit).....	<u>58</u>	
Balance Cr. (to be paid by the new unit).....			Total.....	<u>93</u>	<u>00</u>
Total.....	<u>93</u>	<u>00</u>	Total.....	<u>93</u>	<u>00</u>

*Give particulars.

A monthly stoppage of \$ 2.00 (†) has..... (‡) been paid on account of Assigned
{ Pay for the month of Jan 1918 }
{ and Sep'n Allee. for month of Feb 1918 } (to) Assignee Mrs P H Brown
(Address) 45 Dewson st, Toronto

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

On Transfer of an Officer

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

REMARKS:—

- State (1) date of enlistment
- (2) if married and if a Separation Allowance Card has been submitted Yes
- (3) cause of discharge..... authority oo 39
- (4) authority for transfer

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

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

Date 8/2/18
Place Toronto
[Signature]
Paymaster.

N.B.—For purposes of transfer this form is to be made out in quadruplicate. Original copy to paymaster of new unit; duplicate to District Paymaster; triplicate to accompany the pay-list at the end of the month, and quadruplicate for retention as a record.
For purposes of discharge it is to be made out in triplicate. Original copy to accompany discharge papers; duplicate to accompany pay-list at the end of the month, and triplicate for retention as a record.
If a man on discharge is entitled to three months' Post Discharge Pay, Last Pay certificate will be made out in quadruplicate. The original Last Pay Certificate will be forwarded with other documents to Paymaster Post Discharge Pay and triplicate, with his discharge documents.

11

RUSSIAN SERVICE

STAFF OFFICER'S EXPEDITIONARY FORCE

To be made out in duplicate.

H.Q. 54-21-23-53

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..... *176 Pal 08 Batta*

(2) Regimental Number..... *775744*

(3) Full Name of Soldier..... *Peter Hasty Brown*

(4) Place of Birth..... *Ottawa Canada*

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

(6) If married, state,
(a) Full name of your wife..... *Victoria Hastie Brown*

(b) Present Postal Address..... *37 Beaconsfield Ave
Toronto*

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

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

If so, give number of boys and girls..... *One Boy*

Also their names and ages..... *Percy - Sixteen*

(9) Is your Father alive?.....

Yes

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

*Peter Brown, Somerset Street
Ottawa*

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

No

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

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

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

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

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

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

Yes

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

Yes

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

Osafellow

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.

L. J. Hamilton
.....
Officer Commanding.

Date *10th Aug 1916*.....

105 Grace St.
Toronto Ont.

FORM OF WILL.

I, Peter Hasty Brown (Name in full)

Regimental Number 775744 serving in 126th Regt Bn

of the Canadian Expeditionary Force, do hereby revoke all former Wills by me made and declare this to be my last Will.

I bequeath all my real estate unto

nil

Name and Address of person or persons to whom it is to go.

absolutely, and my personal estate I bequeath to

Mrs. Victoria Hasty Brown
37 Beaconsfield Ave
Toronto Ont

Name and Address of person or persons to receive personal estate* (See note).

IMPORTANT NOTE
This must be Signed and Dated by THE SOLDIER HIMSELF.

this 9 day of Sept A. D. 191 6

Peter Hasty Brown Signature of Soldier.

*N.B.—Personal estate includes pay, effects, money in bank, insurance policy, in fact everything except real estate.

Signed and acknowledged by the Testator as and for his last Will in the presence of us both present at the same time, who in his presence, at his request, and in the presence of each other have hereunto subscribed our names as Witnesses.

THE TWO WITNESSES MUST SIGN HERE

Signature of First Witness [Signature]
Address of Witness 92 Isabella St Toronto
Occupation of Witness Banker
Signature of Second Witness [Signature]
Address of Witness Wingham, Ont
Occupation of Witness Com. Trav.

1875

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BOOK OF MTT

A.G.R. Rank Name **BROWN, Peter Hasty** Reg'l No. **775744**
 Unit **126th Bn.** If in perm. Corps, }
 What Unit? } **Married or Single** **Married**
 Place and Date of Enlistment **Toronto,**
5th Jan., 1916. Place of Birth **Ottawa.**
 Name and Address, Next-of-Kin **Mrs. V. Brown,**
37 Beaconsfield Ave., Toronto, Ont. Relationship
 Assigned Pay Monthly \$ Payable to Relationship
 Separation Allowance \$ Payable to Relationship

N/E. R.B. No. 3052
 File R.L.
 Category *Imm Can.*

Discharge, Date and Place Reason Character *SPR 1330171*

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 S.S. Empress Of Britain 24th. AUG. 1916					
14-10-16	126 th Bn	S.O.S on Trans to 109 th Bn	Bramshott	15-10-16	Pt II D.O. 38
19.10.16	109th Bn	T.O.S from 126th Bn	B'shott	16.10.16	Pt II D.O 293
14. 11. 16	.	S.O.S. to C.C.A.C.	Witley	13 11-16	319
16.11.16	CCAC	TOS & of com 109th Bn	Hastings	3-11-16	505
14.11.16	109th Bn	Attd 109th Bn etc	Bramshott	3.11.16	12
16.4.17	CCAC	S.O.S. on transfer to Cancelled Pr 10166	Hastings	10.3.17	Pt. II D.O. 153
		2 cent out Regiment			cancelled GORD AD 42
3.5.17	2nd B.O.B.W	Pt II D.O. 42 is cancelled	E. Sandling	10.3.17	Pt II 55 (auth. G.O.A.C. 166)
8.6.17	"	T.O.S from G.O.B.W salted myself Rq	do	27.3.17	91

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.				
25.4.17	CCAC	ceases to be alt: to 501st Bn via SOS to 3rd Labour Batta	Hastings	28.1.17	Pr II O 162
18.7.17	"	NO. 162 amended to S.O.S to 2nd B O R B		27.8.17	" 244
14-11-17.	2nd B.O.R.B.	ceases on comm Mitchell Ranges.	E. Sand 'g.	Pte	13-11-17. D.O. 250.
10-12-17.	- 1 -	On comm to C.D.S. Buxton.	- 1 -	Pte	10-12-17. D.O. 273.
2-1-18	- " -	cease to be on Com CDD + S.O.S. Inv to Gen	- " -	Pte	23-12-17 D.O.
	Dis depot	In Class Decly	3rd Bn Toronto	57/1/18	NR 417

SEPARATION ALLOWANCE

1-3-16

Name *V. Brown* Name of Soldier *Brown. P.H.*
 Address ~~*37 Beaconsfield*~~ Regtl. No. *775 744*
Toronto Rank *Pte*
45 Dawson St Ont Corps *126th BAm*
 Relation to Soldier }
 wife, child or mother } *Wife*
 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				



113

111
110

95

111
110
109

96

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2.

V. Brown

Wife
PAYMENTS.

Name of Soldier

Brown P.H.
P.H.

L. L. Job 89002.—Req. 6213.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916	517	40	40
May		<i>N 7090</i>	20	20
June		<i>E 4404</i>	20	20
July		<i>B 5671</i>	20	20
Aug.		<i>C 11874</i>	20	20
Sept.		<i>G 15269</i>	20	20
Oct. <i>26</i>		<i>H 18427</i>	20	20
Nov.		<i>J 20754</i>	20	20
Dec.		<i>L 24361</i>	20	20
Jan.	1917	<i>I 27824</i>	20	20
Feb.		<i>H 31014</i>	20	20
March		<i>H 34150</i>	20	20
April		<i>G 372</i>	20	20
May		<i>J 23512</i>	20	20 <i>300</i>
June		<i>K 6978</i>	20	20
July		<i>I 10047</i>	20	20
Aug.		<i>M 13769</i>	20	T
Sept.		<i>L 16817</i>	20	20
Oct.		<i>K 23168</i>	20	20 <i>40000</i>
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.				

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

M. F. W. 12a.
 50m.-6-16.
 1772-39-819.

Sheet No. 2.

L. L. Job 4503. - Req. 6332.

Victoria Brown

Wife
 PAYMENTS.

Name of Soldier

Brown P. H.
775744 *Pte* *126 Bn*

Month.	Year.	Cheque No.	Amt.	Remarks.
				<i>20.00</i>
				<i>AUG 1 1916</i>
April	1916			
May				
June				
July				
Aug.		<i>K15504</i>	<i>20</i>	
Sept.		<i>O17420</i>	<i>20</i>	
Oct.		<i>N 19210</i>	<i>20</i>	
Nov.		<i>F 25827</i>	<i>20</i>	
Dec.		<i>B34808</i>	<i>20</i>	
Jan.	1917	<i>L38127</i>	<i>20</i>	
Feb.		<i>L 43208</i>	<i>20</i>	<i>20</i>
March		<i>M. 48834</i>	<i>20</i>	<i>20</i>
April		<i>Z 372</i>	<i>20</i>	<i>20.8</i>
May		<i>K6862</i>	<i>20</i>	
June		<i>S13907</i>	<i>20</i>	<i>20 W.</i>
July		<i>N 20164</i>	<i>20</i>	<i>W.</i>
Aug.		<i>Q 2737</i>	<i>20</i>	<i>W.</i>
Sept.		<i>P 34010</i>	<i>20</i>	<i>200.00</i>
Oct.		<i>E48408</i> <i>O 48449</i>	<i>20</i> <i>20</i>	<i>O 48449 cancelled 15/17 annam</i>
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

1207/118

JGR

200.00

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

Victoria Brown

By Whom Assigned

Brown P.H.

Address

~~*37 Beaconsfield*~~
45 Dawson St.
105 Grace St.
Toronto Ont

Regtl. No.

775 744

Rank

Plt

Corps

126 Bn

Rate

20⁰⁰

AUG 1 1916

2 M 4 ¹¹/₁₆ Q.P.D 7 ¹²/₁₆

PAYMENTS

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



1900
1901
1902

1903

1904
1905
1906

1907
1908

1909

File No. 02258 P. 33

20/8/19

WAR SERVICE GRATUITY.

Register No. B 1265

Reg. No. 775744

Dependent Mrs H.V. Brown

Name Brown Peter Hasky

Address Same add.

Award 799 days at \$ 799 months at \$ 799
Less P. D.P. Credited \$
For out \$
Less further debit balance \$
Net due paid as below \$

TO SOLDIER		DEPENDENT	
Clk. No.	Amount	Clk. No.	Amount
1			
2			
3			
4			
5	AS Raymond.		
6	SB Smart		
Total	174 90	Total	

Pay Dependent \$ 150 00

Days 153 Rate 70 Due 300 00

Less P.D.P. credited 175 10

Less further Dr. Bal. or overpayment.

Net 324 90

P 9109
12-11-19

Date	Ck. Order	Ck. No.	Amount	Remarks	Date	Ck. Order	Ck. No.	Amount
23-9-19	9744	510590	140 00		23-9-19	9745	510587	60 00
			34 90					30 00
18-9-19	26236	520789						30 00
					18-9-19	26237	520788	30 00
			174 90					150 00

495-D.P.-100M-6-19 (10248).

GEN'L AUDITOR
Posting checked by
Date 26/8/19

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

170

2208-P-8

Name **BROWN PETER HASTY**
Surname Christian Name

Regimental Number **775744** Rank **PTE.**

Address (in full) **105 GRACE ST.,
 TORONTO, ONT.**

Unit **126th BN.**

Original Unit

District where paid **M.D. 2.**

Date of Discharge **11-2-18.**

P. D. P. Filing Number **8-365-2.**

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

L. L. 22573—M. & D. 8009.

Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Over- payments to be Recovered	Total Amount Paid
	Cheque No. A	Date	Amount 30 days	Cheque No. B	Date	Amount 30 days	Cheque No. C	Date	Amount 31 days		
175 10	6104	11-3-18	58 00	5982	11-4-18	5910				58 00	117 10

M. F. W. 127.
50M-6 17.
 1772 33-1140.

Remarks: DEBIT POST DISCHARGE PAY #2. CAS. UNIT.

Name Pte. P.H. Brown.

M. F. W. 41
1 OM-7-16
1772-39 889.

Regimental No. 775744

Name and address of next-of-kin

Unit 126 Bn

Date of enlistment

Place of

Married (yes or no) Yes.

Date and place discharged

Amount of pay assigned monthly \$ 20.07 per pay

Reason for discharge

To whom payable Mrs P. H. Brown

Character on discharge

SPC
45 Dawson St. Toronto

FEB 9 1918

b 5351-M. & D. 6880.

Date		PAY		Field Allowance		Other Credits	Total Credits	Voucher		Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days			Rate	Amount					
Dec 15	Jan 31	48	1 48	480	48	10	480	12	16470	1459		5021	D.O. 17 Sub. Jan. 8-22.	
Feb 1	11	11	1 11	110	11	10	110	✓	3500	16807	990	58	<u>Orbal</u> Dis 0039 9.90 sep allowance	
								990		16808	8310			
								13						

C.A.D.C. 5009-10M.

3494-30-8-17.

775444

Pte Brown P/A

DENTAL CERTIFICATE.

The following Certificates will

be attached to the Medical History Sheets of all

2nd Lt R.D.

Other Ranks being returned to Canada for disposal.

Date of Examination.	Present Dental Condition.	In case of loss or decay of teeth. Is the loss due to wounds, injury or disease directly attributed to Active Service?	Has he ever declined Dental Treatment.	Recommendation.
12-12-19	Fit			G. Murray Dental Officer

DENTAL CERTIFICATE

The following Certificate will be attached to the Medical History Sheet, and all Other Ranks being returned to Canada for disposal.

Date of Examination	Present Dental Condition	Cause of loss or decay of teeth, is the loss due to wounds, injury or disease directly attributed to Active Service?	Is eye affected?

26/11 8

From

Office Eye Clin
Base Hosp

To

BC Casualties - MD # 2
Lawna Bhs

Special report on eyes of

No. *775744* Rank *Pvt*

Name *Iron P.H.*

In or Out Patient

Unit *126th Bu*

RIGHT VISION-without glasses *6/12* with glasses *6/60*

LEFT VISION-without glasses *6/12* with glasses *6/60*

He is.....fit for Category *A (correct)* Glasses have.....been ordered. Condition was.....present previous to enlistment and is *not apparent*.....by Service.

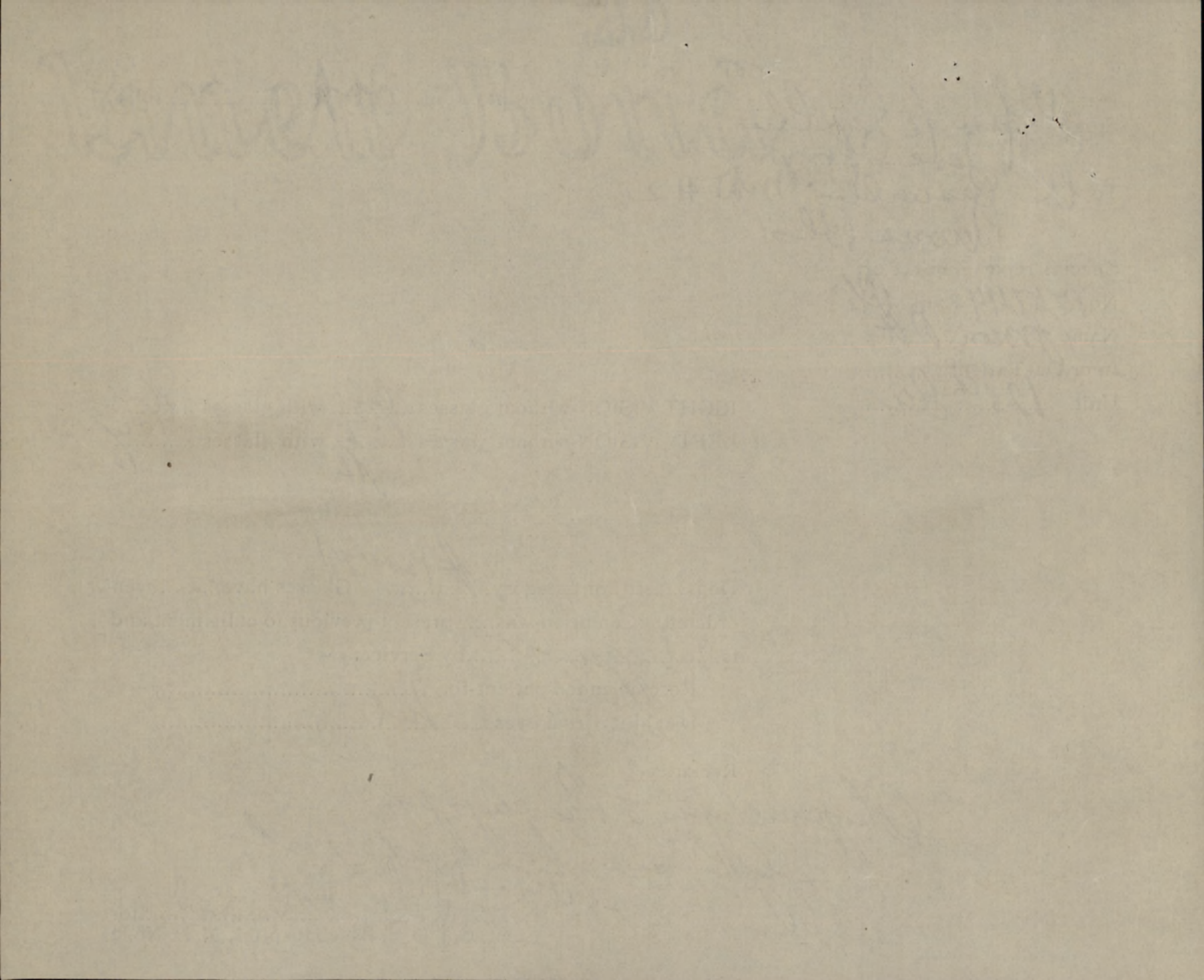
Recommended patient for

Disability from eyes *nil*

Remarks:-

Hypometropia & Presbyopia.
Glasses for reading only

H.D. Burtch Capt for
Lieut.-Col. O. C. Base Hospital, M. D. No. 2



CERTIFIED COPY

BASE HOSPITAL M.D.#2
Toronto. Ont. Jan 26th 1918

From. Officer i/c Eye Clinic
Base Hospital

To O.C. Casualties M.D.#2
Ravina Barracks.

Special report on eyes
or No. 775744 Rank Pte
Name Brown P.H. Out -
patient Unit 126th Batt.

RIGHT VISION	without glasses	6/12
	With glasses	6/10
LEFT VISION	without glasses	6/12
	With glasses	6/6

He is fit for category "A" Overage. Glasses
have been ordered. Condition was present
previous to enlistment and was not aggrav-
ated by service.
Disability from eyes nil.

Remarkâ;-Hypermetropia and Presbyopia.
Glasses for reading only.

(Signed) H.D. Welch, Capt. A.M.C. For
Lieut-Col. O.C. Base Hospital. M.D.#2

1910

Faint, illegible text, possibly bleed-through from the reverse side of the page.

Additional faint, illegible text, likely bleed-through from the reverse side of the page.

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				
		be attached to the G.D.B. On Trans to the 2nd. Cen. Ont. R. Depot.			Captain, Adjutant, The Garrison Duty Battalion, Canadians. (Bramshott, Hants.)
8/6/17	2 COR	L.O.S. & shown on Aedersholt Command at Mitchell		8/6/17	Part II D.O. 91
14-11-17	---	Detailed to Depot Coy / Sandling		13-11-17	DD 250 James Edmunds Capt & Adj 2nd COR
10/12/17	260 RD	On Command to 600 Buxton		10/12/17	DD 273 Capt. & Adj. 2nd Cent, Ont, Reg. Depot.
11 DEC 1917		TAKEN ON STRENGTH C.D.D, BUXTON		Pt. 11 ORDER NO. 293	B. V. Voie Lieut.-Col Canadian Discharge Depôt.
23 DEC 1917		EMBARKED FOR CANADA FROM LIVERPOOL			B. V. Voie Lieut.-Col Canadian Discharge Depôt.
	L.O.S	# 2 Casualty Unit		8/1/18	Part 2 order #17

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

Casualty Form—Active Service.

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

Unit, Regiment or Corps 126th Overseas Bn

Regimental No. 775744 Rank Pte Name Brown Peter Hasty
C. E. F.

Enlisted (a) Jan 5/16 Terms of Service (a) War + Six months Service reckons from (a) Jan 5/16

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

Extended _____ Re-engaged _____ Qualification (b) (Baker)

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
		Embarked Canada	Halifax N.S.	14/8/16	
		Disembarked England	Liverpool	24/8/16	
Transf'd to			Bramshott	15-10-16	Co. 38 Part 2 - 15-10-16 J. J. Hamilton Lt. Colonel O. C. 126th O. S. "Peel" Batta., C. E. F.
			Witley	13-11-16	Part II Order 318. 13-11-16 <u>Autbelting</u> CAPTAIN, ADJUTANT, 109TH BATTALION CAN. INFANTRY.
		<p>The Unit known as the 51st Battalion will be designated "The Garrison Duty Battalion" (Authority: Bramshott Divisional Order No. 785, dated 13-11-16.)</p> <p><u>Geo R Collier</u> Captain, & Adj. for Lieut. Col. Commanding, "The Garrison Duty Battalion." (Bramshott, Hants.)</p>			

(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.

MARRIED

yes

SINGLE

WIDOWER

TRADE OR CALLING

Baker

RELIGION

Wesleyan

DESCRIPTION.

APPARENT AGE

42 YEARS

4 MONTHS

HEIGHT

5 FEET

8 1/2 INCHES

CHEST MEASUREMENT

39 INCHES

EXPANSION

1 1/2 INCHES

COMPLEXION

Fair

EYES

Blue

HAIR

L. Brown

DISTINGUISHING MARKS

Tattoo on each forearm.

MEDICAL EXAMINATION.

PLACE

Toronto.

DATE

Jan 5th 1916

Present Address. Not stated

SURNAME.

Brown

CARD NO.

CHRISTIAN NAMES

Peter Hasty

S.I. S. Dis 11/2/18
FOLL.
2

REGL. NO.

445744

RANK

Pte

UNIT

126th

Bu

FORMER CORPS

3 yrs O. F. Bty

NEXT OF KIN.

NAMES IN FULL

Brown Mrs V.

RELATIONSHIP TO SOLDIER

Not stated

ADDRESS

*105 Grace St.
Toronto Ont.*

CHANGE OF ADDRESS

S.O.A.P. 1/5/17

COUNTRY OF BIRTH

Canada! Ottawa. Ont.

DATE

Sept 20th 1873

PLACE OF ATTESTATION

Toronto. Ont.

DATE

Jan 5th 1916

Op. 14-8-16 $\frac{509}{3}$

R/C 5/1/18



No. 775744 RANK *Pte.*

NAME *Brown, P.* *A.*

T. O. S. 5-1-16.
(DO. 6 of 7-1-16)

UNIT *126th Reel Battalion, C. E. F.*

M. D. 2

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1916</i> <i>Jan 5</i>	<i>1916</i> <i>Jan 31</i>	<i>✓</i>	<i>168 has detention 5-2-16</i>	<i>DO. 31 of 5-2-16.</i>
<i>Feb.</i>		<i>✓</i>		
<i>Mar.</i>		<i>✓</i>		
<i>Apr.</i>		<i>✓</i>		
<i>May</i>		<i>✓</i>		
<i>June</i>		<i>✓</i>		
<i>July</i>		<i>✓</i>		
<i>Aug</i>		<i>✓</i>	<i>Forfeits 3 days' pay a. W.L.</i>	<i>no. O. 181 of 8-16</i>

UNIT SAILED
AUG 14 1916



M.B.P.
M.J.

B

LIST NO.	HOSPITAL	DATE OF ADMISSION	REMARKS
Number. <i>775744</i>	Rank.	Pte.
Surname.	<i>BROWN</i>		
Christian Name.	<i>Peter Hasty</i>		
Unit.	<i>126th Bn, Can. Inf. Theatre of War. England.</i>		
Date of Service.	<i>24-8-16</i>		
Remarks.		
Latest Address.	<i>105 Grace St. Toronto, Ont.</i>		
Roll No.	<i>A Page H/6</i>		

NAME

REGT. No.

RANK AND UNIT

NEXT OF KIN

CABLE

NATURE OF CASUALTY

No.

DATE

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

1-3-16

Separation and Assigned Pay Branch

Aug 1/916

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

20	1-12-17		
	25		

P.O. 3254

RATE OF ASSIGNMENT

20			
----	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

No. 775744
 Rank Pte. Promoted Reverted Discharge
 Soldier's Name P. H. Brown
 Battalion 126 Battn
 Beneficiary Victoria Brown
 Relationship Wife
 Address ~~75 Dawson St~~ Toronto Ont.
 105 Grace St

PARTICULARS OF ASSIGNMENT

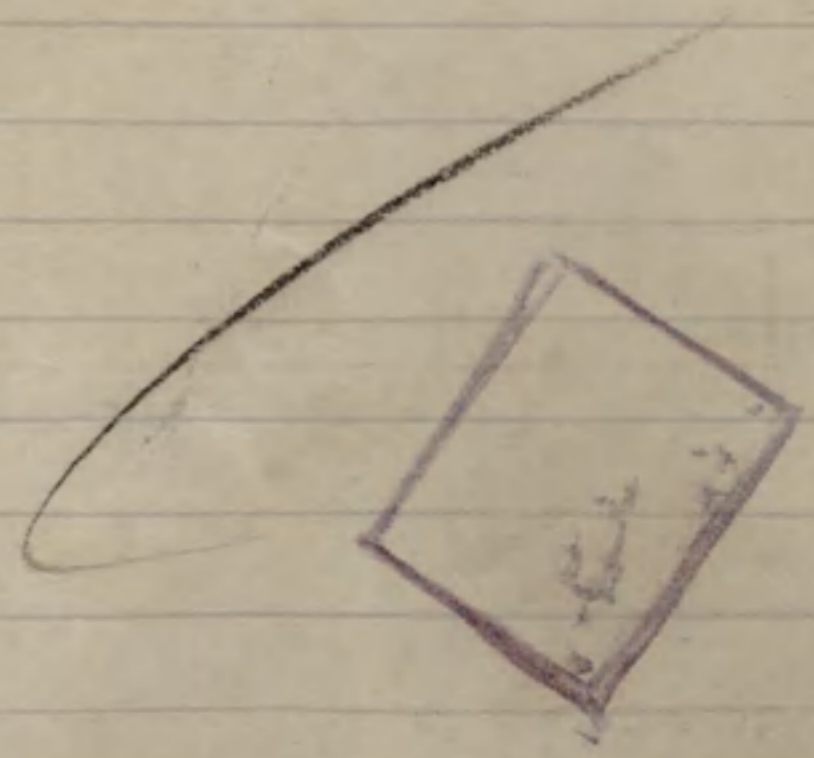
Name Victoria Brown (Wife)
 Address 105 Grace St. Toronto.
 Change of Address Ont.
 1
 2
 3
 4

X

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
Oct 31.17		400 ⁰⁰	300 ⁰⁰	700 ⁰⁰	
Nov	C 57117	20	20	40	
Dec	B 62487	20	20	40	
Jan	N 65890	30	20	50	
		XX	XX	XX	

S/A & A/P A/c Closed 31-1-18
 S/A # 470 Ret'd per. Metagama
 A/P # 360 Date 5-1-18 F. X 19-1-18
 Clerk M. Sucki

Dis 11-2-18 HQ 649-B-20688. Saved 16-4-18



Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

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.-6-17-1772-39-1141
 L. L. 22320-M. & D. 7533.

MEDICAL HISTORY SHEET.

Surname Brown Christian Name Peter Hasty

Examined { on 5 day of Jan. 1916
 at Toronto
 Birthplace { City or Town Ottawa
 County _____

Approved by H. E. McKay
 Rank Capt. M.O.

Apparent age 42
 Trade or occupation Baker
 Height 5 Feet 8 1/2 Inches.
 Weight 175 Lbs.
 Chest measurement { Minimum 37 1/2 inches.
 Maximum expansion 39 inches.
 Physical development Good
 Small-Pox Marks slightly on face

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

Vaccination Marks { Arm Right Left
 Number X
 When Vaccinated last X 21/3/16

Date	Result	VACCINATIONS.
<u>21/3/16</u>	<u>X</u>	M.O.
		M.O.
		M.O.

(a) Marks indicating congenital peculiarities or previous disease X

(b) Slight defects but not sufficient to cause rejection
Excession 3rd Head Finger
joint on right hand

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>15/3/16</u>	<u>X</u>	M.O.
<u>21/3/16</u>	<u>X</u>	M.O.
<u>25/3/16</u>	<u>X</u>	M.O.
<u>29/3/16</u>	<u>X</u>	M.O.

Enlisted on 5 day of Jan. 1916 at Toronto

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>126th Battn.</u>	<u>775744</u>		
Transferred to..	<u>100th BATTALION CANADIAN INFANTRY.</u>		<u>OCT 15 1916</u>	<u>13-11-16</u> <u>*8.6.17</u>

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>Bramshott Camp, Hants.</u>	<u>3 NOV. 1916</u>	<u>over age</u>	<u>permanent base duty</u>
<u>Bramshott Camp, Hants.</u>	<u>5-12-16</u>	<u>Overage Myalgia and arthritis flat feet</u>	<u>Medical Board, Bramshott.</u>
<u>Ravina Bks, Toronto</u>	<u>Jan 29/18</u>	<u>Deformed rt. hand Hallux valgus both gt. toes Nervous debility</u>	<u>Medical Board, Bramshott.</u>

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

MARRIED OR SINGLE *Marr.*
 PLACE OF BIRTH *Ottawa Can.*
 NAME AND ADDRESS OF NEXT OF KIN *Victoria Brown*
37 Beaconsfield Ave. Toronto
 RELATIONSHIP OF NEXT OF KIN *Wife*
 NAME AND ADDRESS OF NEXT OF KIN
 RELATIONSHIP OF NEXT OF KIN
 SEPARATION ALLOWANCE MONTHLY \$ EFFECTIVE (DATE)
 PAYABLE TO

CASUALTIES, PROMOTIONS, & C.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL & C.

DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL

REG'L No. *775744* RANK *Pte.* NAME *Brown Peter Hasty*
 IF IN PERM. CORPS WHAT UNIT UNIT *126th* TRANSFERRED TO *109. Ban.* DATE *15.10.16* AUTHORITY *P#0.38*
 PERMANENT FORCE ALLOWANCES TRANSFERRED TO *b.b.a.b.* DATE *16.12.16* AUTHORITY *DD 334*
 PLACE OF ATTESTATION *Toronto* TRANSFERRED TO *51 Ban* DATE *11/3/17* AUTHORITY *subd. notes*
 DATE OF ATTESTATION *5/1/16* TRANSFERRED TO *1st C.O. R.D.* DATE *1/1/17* AUTHORITY
Min Off. A. 14/1/17
 ASSIGNED PAY MONTHLY \$ *20^{xx}* DATE EFFECTIVE *AUG 1 - 1916*
 PAYABLE TO *Mrs P. H. Brown* *45 Newson St.* RELATIONSHIP *Wife*
37 Beaconsfield Ave. Toronto
 ASSIGNED PAY MONTHLY \$ DATE EFFECTIVE
 PAYABLE TO RELATIONSHIP
 STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) *Stopped* EFFECTIVE *1-1-18* REASON *Discharge*
 DISCHARGE DATE AND PLACE *Canada 14-12-17* REASON AND AUTHORITY *A.G. 5-1-22. Disposal*
 ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)
 ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)



P. 697-25M.
3989-31-19-17.

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS.

Date of Payment.	No. of Acq. Roll	AMOUNT				Place of Payment.	Name of Paymaster.	Remarks.
		Francs	£	S.	¢			
14/6/17	198	1	2	-	9 73	Brown	2/2/18	
17/7/17	251	1	1	-	4 87	Chgd		
18/7/17	312	1	10	-	7 30	Chgd		
21/7/17	322	1	10	-	7 30	Chgd		
Aug 16	448	1	2	10	12 19		22/2/18	
25/8/17	512	1	10	-	2 43		22/2/18	
10/9/17	595	1	1	-	4 87	Chg 2/2/18		
28/9/17	636	1	1	10	7 30	Chg 22/2/18		
12-10-17	697	1	1	-	4 87	Chg 22/2/18		
26-10-17	703	1	2	-	9 73			
15-11-17	144	1	1	10	7 30	E Sanderson & Gibson	22/2/18	
25-11-17	148	1	1	-	4 87			
May 1-31		31	34	10	34 10			
Total			300	30	300 30			

TOTAL CREDITS	ACQUITTANCE ROLLS				CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS	
	1		2		3		4					CREDIT	DEBIT				
	No.	DATE	No.	DATE	No.	DATE	No.	DATE									
8 80												8 80					
33 00	37	1/9	43	15/9				730	243	20 00	146	2119	1061				A.P. is payable by off. Br. from Aug 1. deduction for payal is made in Aug Pfd. fund
15 40	130	13/10						487		20 00		2487	114				Ord. repay. # 23.
18 70								1217	249		146	1984					Pfd 109th Ban 15.10.16
33	203	1/16						487		20		2487	2909				
16 50										20		20	2447				
125 40	5873	8/11	5 50							20		18093					
17 60	805	30/11	77	15/11				4 87	4 87	20		974	3233				
34 10										20		29 73	36 70				
30 5										20		22 44	45 06				
11										20		20	36 06				
23 10	1208	28/2						4 99				4 99	54 14				
33 00										20		57 64	35 53				
34 10	67	25/4						4 80		20		29 30	42 33				
8 80	309	10						34 20	14 60	36 51	180	1 46	266 77				Carried forward

Selling Lot #52 Payment d/23/12/17 L.P.C. 14³⁹ End. AR 16337 £8

775744 Pte Brown P.H.

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		NO. OF DAYS	RATE	AMOUNT					1	2	3	4	1	2	3	4				CREDIT	DEBIT												
			\$	C.			\$	C.			\$	C.																				NO.	DATE	NO.	DATE	NO.	DATE	NO.	DATE	
1917																																								
June 30	1 st	33	00																																					
July 31		34	10																																					
Aug 31		34	10																																					
Sept 30		33																																						
434 50																																								

MONTH	PARTICULARS	CR.1	CR.2	PARTICULARS	DR.1	DR.2	DR.3	DR.4	BALANCE	REFER. PAY	SER. AMOUNT
Sept 30									74 63		
Oct	P.P. Pay 31 days	34	10						20 88 73		
Nov	P.P.	33							20 101 73		
Dec	14 days P.P.	15	40						20 97 13		
									14 39		
									73 0		
									7 30		
									4 87		
									19 47		
									40		
									44 66		
									14 39		
									14 39		
									68 27		

Balance transf. to Canadian Liab. Account

Balance transferred to N. E. Branch.

1918	Feb.	AR 573d/10/17/17 6 th C.M.E.	Voucher 727 N.E. 7/11	4 87	1/2 L.P.E. Pay	4 87
"	"	AR 687d/10/17/17 5 th New Eny	V th 68 G. N.E. 8/15	4 87	1/2 L.P.E. Pay	9 74
"	"	AR 626d/25/17/17 5 th New Eny	V th 68 9 N.E. 8/15	7 30	1/2 L.P.E. Pay	17 04
"	"	AR 195d/14/17 5 th New Eny	V th 87 9 N.E. 9/11	9 73	1/2 L.P.E. Pay	26 77
"	"	AR 448d/16/17/17 5 th New Eny	V th 61 G. N.E. 8/25	12 17	do	38 94
"	"	AR 512d/24/17/17 5 th New Eny	V th 24 9 N.E. 8/11	2 43	do	
"	"	AR 144d/11/17/17 12 Rec Eny	V th 39 G. N.E. 8/21	7 30	do	46 24
"	"	AR 1637d/17/17/17 C.M.E. Reunion	V th 67 G. N.E. 8/19	9 73	Endorred	55 97
"	"	AR 148d/25/17/17 12 Rec	V th 83 9 N.E. 8/12	4 87	Exhibit	60 84
Mar.	Apr.	AR 703d/14/17/17 5 th New Eny	V th 93 0 N.E. 12/45	9 73	o/e	70 57

A3M. FORM HEND. 11/12/17 EFFEC. 1/1/18
 DISCHARGED TO Canada DATE 11/12/17
 PAYBOOK VERIFIED A. J. Homey
 BAL. 11/39 L.P.C. REN'D
 AUTH. A. 9.5-1-35

Checked R. Burby L.P.E.

Original L.P.E. 14 39
 Exhibit outstanding 68 27
 77 66

Exhibit outstanding 68 27

02258-P-33

B1265

*Notes from
handed to...*

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

OTTAWA, CANADA.

*P.C. 19/8/19
amst.*

Declaration required of Officers, Warrant Officers and Men who claim War Service Gratuity under Orders-in-Council (P.C. 3165), dated 21st December, 1918, as amended by P.C. 285, dated 8th February 1919, and P.C. 1168, dated 23rd June 1919.

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

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

On completion this Declaration is to be returned to THE ASSISTANT DIRECTOR PAY SERVICES OF THE DISTRICT IN WHICH THE SOLDIER WAS DISCHARGED.

- 1. Reg. No. *775744* 2. Rank *plc* 3. Original C.E.F. Unit *134 fuel Bn*
- 4. Christian Names *Brown* 5. *Peter Hardy*
- 6. Address, in full, to which future payments of gratuity are to be forwarded
*Peter Hardy Brown
799 College St Toronto Ont*
- 7. Give the following particulars of service with Pay and Allowances for each enlistment which you have had in the Naval or Land Forces of Canada or the British Empire on or since the 4th August, 1914. Answer in the following order in space allotted.

	Regt. No.	Rank on Enlistment.	Unit. (State whether Active Militia, Permanent Force, C.E.F. or Naval. If R.A.F. state Wing.)
1st Enl.	<i>775744</i>	<i>plc</i>	<i>CANADIAN SERVICE C.E.F. 126790</i>
2nd Enl.			
3rd Enl.			
4th Enl.			
Imp. Enl.			<i>IMPERIAL SERVICE.</i>

	Date of Enlistment.	Date of Discharge.	Rank on Discharge.	Unit from which discharged	Place of Discharge.	Reason for Discharge.
1st Enl.	<i>Jan 6 1914</i>	<i>Feb 1918</i>	<i>plc</i>	<i>CANADIAN SERVICE Co RD</i>	<i>Toronto</i>	<i>over age</i>
2nd Enl.						
3rd Enl.						
4th Enl.						
Imp. Enl.				<i>IMPERIAL SERVICE.</i>		

8. (a) Did you revert overseas to a rank lower than the temporary substantive rank held by you on your arrival in England? No. (b) If so, give date and ranks and state if such reversion was in consequence of misconduct or inefficiency Not applicable.

9. Were you at any time on the strength for pay and allowances of a unit of the C.E.F. which was out of Canada or the United States when such pay and allowances were issuable? If so, give particulars of one such unit and dates of service overseas with such unit: 126 Bally - Pub Oct 18th Sep. 14/14

10. Were you on the strength for pay and allowances of the Clearing Services Command, having been at any time on duty outside of Canada or the United States? No.

11. Have you been issued with a War Service Badge? If so, give number and class. Yes. 10901

12. Are you at present a member of and in receipt of pay and allowances from any Canadian Naval or Land Forces? If so, give unit. No.

13. Have you already received any payment of Post Discharge Pay or War Service Gratuity? If so, state amount you and your dependents have already received, from where paid, and on what dates. 58.00 Feb. 11th Mar. 11 April 11

14. Are you entitled to receive, or have you received any payment in the nature of Post Discharge Gratuity from the Imperial Forces? If so, state amount received, or to which you are entitled.

15. Were you at the time of enlistment a civil employee of the Dominion or a Provincial Government? If so, state what Government, what Department, and whether civil pay was issued on your account while you were on active service No.

16. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-Establishment? (b) If so, are you in receipt of full pay and allowances from that Department?

17. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge. Mr. Hester Victoria Brown

18. Relationship of such dependent. Wife
19. Present address, in full, of such dependent. 799 College St. City

20. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? If so, give his regimental number, rank, unit and full name. No.

REMARKS

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

Signature of applicant: P.H. Brown

Place of Residence: 799 College St. Toronto

Declared before me at: Toronto Ont

This 29th day of July 1919.

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

George [unclear]

NOTICE.—If the dependent has not forwarded a Statutory Declaration to Ottawa, in connection with Separation Allowance, it will be necessary to forward one with this application. These are for wife, M.F.W. 148, mother, M.F.W. 147, and guardian, M.F.W. 149, and may be obtained from the Assistant Directors Pay Service, or the Patriotic Fund. Guardian forms must be completed by the present guardian.

Space below this line to be used only by the Assistant Directors Pay Service.

POST DISCHARGE PAY.

Dates paid.	Amounts paid soldier.	Amount paid dependent.
11-2-18	58.00	
11-3-18	58.00	
11-4-18	59.10	
	\$175.10	
<u>No overpayments.</u>		

REMARKS

Certified correct.

for [unclear]
Assistant Director Pay Services, Mil. Dist. No. 12

Date

81 '18
464
APR 9 - 1918

List of Discharge Documents.

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

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

This space to be for numbers.

M

649-B-20688

Proceedings on Discharge.

DEPT
MILITIA DEFENCE
APR - 3 1918
H.Q.
CANADA

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

No.	775744	
Rank	Pte	
Name	BROWN Peter Hasty <small>NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.</small>	
Corps (Squadron, Battery or Company)	#2 Cas Unit (126th Bn) (2nd CORD)	
Date of Discharge	11th Feb 1918.	
Place of Discharge	Toronto Ont.	
1. DESCRIPTION AT THE TIME OF DISCHARGE.		
Age.....48.....years.....4 ³ / ₄months.	<p>Descriptive Marks</p> <p>Tattoo both Arms</p>	
Height.....5.....feet.....8 ¹ / ₂inches.		
Complexion		Fair
Eyes		Blue
Hair		L. Brown
Trade		Baker
Intended place of residence } (To be given as fully as practicable.)	105 Grace St Toronto Ont	
2. The above-named man is discharged in consequence of		
Over Age		
<small>N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.</small>		
3. Conduct and character while in the service have been, according to the records, etc.		
Good steps.		
<small>N.B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldier and the Officer Commanding his Squadron, Battery or Company:</small>		
4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)		
Baker		

M. F. B. 218.

100m.—6-16.
H. Q. 1772-39-113

W. J. G. L. G. H. G.

(OVER)

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

Nil

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

6. Medals and Decorations.....

Nil

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

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

(Place) Toronto Ont.

(Date) 11th Feb 1918.

Commanding J. B. Beumer
For O. O. Casualties, O. E. F., M. D. No. 2

8. Certificate to be signed by the Soldier on Discharge

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

(Place) Toronto Ont. P. G. Brown (Signature of Soldier.)

(Date) 11th Feb 1918. J. B. Beumer (Signature of Witness.)

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

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

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

.....(Signature of Soldier.)

10. Statement of Service.

Service toward Engagement to.....(the date to which the Record of Service is completed) 2 years 37 days.

Total 2 years 37 days.

11. Confirmation of Discharge.

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

(Place) Toronto Ont.

(Date) 11th Feb 1918.

(Signature) J. B. Beumer
For O. O. Casualties, O. E. F., M. D. No. 2

Reservations referred to at Para. 8.

(To be signed by the soldier. When there are none, it is to be so stated, and signed by the soldier.)

(4) Subjective; - Has a pain in 3rd. metacarpal bone, Right hand in corresponding metacarpal phalangeal joint. Has had deformoty there since a child on account of small ~~px~~, through ~~artere~~ ^{osteo-myelitis} myelitis

Objective; - Third metacarpal bone is $\frac{1}{2}$ " to $\frac{3}{4}$ " short. The meta carpal phalangeal joint is tender. Strength of finger is $\frac{1}{2}$ of normal.

(5) Subjective; - Metatarsal phalangeal joints of both toes are enlarged and painful ~~since enlistment~~ Eversion and tenderness worse since enlistment

Objective; - Both toes are everted by 30 deg. The joints are x tender but there is no sign of present or past suppuration. Second toes of each foot overpaw great toes.

(6) Subjective; - At times he takes weak spells and he feels like fainting and sweat runs right off him, at these times his heart flutters.

Objective; - Heart action regular, no enlargement, no murmurs.

(7) Subjective; - Cannot see as well as he could before enlistment. Eyes run water badly when he goes out in cold.

Objective; - See specialists Report attached.

All other systems apparently normal.

Incapacity due to overage, partial loss of function of muscles and joints, arches, finger, great toes, nervous system and eyes.

TO BE COMPLETED WHEN TREATMENT IS REFUSED

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

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

INSTRUCTIONS

- In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" will be carefully followed.
- The Medical Officer in charge of the case is responsible for the proper completion of pages 1 and 2 of this Form. The President of the Board of Medical Officers is responsible for the proper completion of the space, of page 3, reserved for recording the Proceedings of a Board of Medical Officers.
- In answering the questions, Medical Officers will carefully obtain and record the soldier'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 soldier concerned, from witnesses, or from documents.
- If a complete answer to any question requires more space than that reserved for it, the answer may be continued on the blank space on this page.
- The nomenclature of diseases to be followed is that 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 and Sons.

Next of Kin. Wife Mrs N. Brown
105 Grace St. Toronto. Ont

Examined by D. McKay
Toronto

(Medical Officers will please read this Form carefully before using it. See instructions, page 4.)

mans address same
FORM TO BE USED FOR WARRANT OFFICERS, N.C.O'S, AND MEN

MEDICAL HISTORY OF AN INVALID

STATION Ray. Bks. Toronto. DATE Jan 22nd 1918

1. (a) Unit #2 Casualty (b) Regimental No. 775744 (c) Rank Pte
(d) Surname BROWN (e) Christian name Peter Hasty
2. Age last birthday 48 Date of birth Sept 20th 1869
3. Enlisted at Toronto on Jan 5th 1916
4. Personal description: -
(a) Height 5' 8 $\frac{1}{2}$ " (b) Weight 160 (c) Complexion Fair
(d) Colour of hair L. Brown (e) Colour of eyes Blue (f) Identification marks Tattoo
on each forearm Vaccinations nil
5. Address after discharge (for the use of the Board of Pension Commissioners.)
105 Grace St. Toronto
6. Former trade or occupation Baker

7. (a) Service	PERIODS	
	From	To
<u>Peel Batt</u>	<u>Jan 5th 1916</u>	<u>Jan 8th 1918</u>
<u>#2 Casualty Unit</u>	<u>Jan 8th 1918</u>	<u>to date</u>

- (b) Has he been Overseas? Yes. England (1) Overage (2) Myalgia and Arthritis (3) Flat feet (4) Deformity (5) Right hand (6) Nervous debility (7) Impaired vision
8. Present disease or disability (use authorized nomenclature if possible). ed Right hand (5) Hallux Valgus both great toes (6) nervous debility (7) impaired vision
- (a) Date of origin (1) Born 1870 (2) (3) (6) (7) 1917 (4) Child (5) 1907 (b) Place of origin (1) Does not apply (2) (3) (4) (5) (6) Canada (7) England
- (c) Cause* (1) Boen 1870 (2) (3) Exposure (4) Small pox (5) (7) Unknown (6) Sun stroke
(Here include original disease or injury)

9. Present condition. (Important, to be a full description of the present disabling condition or conditions).

- (1) Subjective; - States he is 48 yrs of age
Objective; - Looks age stated
- (2) Subjective; - Has pain in both ankles, knees, calves, wrist and right hip and shouoder blade, aggravated by cold and wet weather and walking. Can hardly walk half a mile. Never did marching or drill.
Objective; - No tenderness today in areas mentioned.
- (3) Subjective; - Has pains in insteps when he stands for $\frac{1}{2}$ hr. or when he walks for $\frac{1}{2}$ hr. No pain in these localities before enlistment.
Objective; - Arches do not appear to be fallen.

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

M. F. B. 227.

15/M-6-17.
1772-39-117.

10. History;

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

Slight left varicocele same as before enlistment

11. To what extent, state in percentages, is capacity to earn a livelihood in the untrained labour market reduced? If there is more than one disabling condition, estimate the incapacity due to each, and that due to all combined.

(1) Nil (2) 10% (3) 5% (4) 5% (5) Nil (6) 5% (7) 0% Total 25%

12. Did the disability arise on or off duty? (1)(2)(3)(6) On duty (4)(5)(7) Off duty

13. Was a Court of Inquiry held? (1)(2)(3)(4)(5)(6)(7) No

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

Yes (1)(2)(3)(6) Does not apply (5) 0% (4)(5) No; & (7) Yes, not permanent

15. Was the disability caused or aggravated by negligence, by vice or by misconduct, or by unreasonable refusal to accept treatment? (1)(2)(3)(4)(5)(6)(7) No

16. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? (1) Does not apply (2) 6 mos decreases (3)(4)(5)(7) Permanent (6) 6 mos decreasing

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

No Hospital treatment

18. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit?

No

No, not at present.

19. Can the former trade or occupation be resumed?

20. Recommendations

That he be placed in category "E"

Perceval Heam M.B.

Medical Officer by whom the case is brought forward.

STATEMENT OF THE SOLDIER.

(Sections 8, 9 and 10 are to be read to the soldier.)

I, the undersigned P.H. Brown, have heard the description of my disability read, and am satisfied (or not satisfied) with it. (If dissatisfied, statement should follow.) I complain in addition of

P.H. Brown

Signature of soldier examined.

OPINION OF THE MEDICAL BOARD

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

#11. We do not concur. Should be (1) 0% (2) 10% reducing to 5% in 6 months (3) 0% (4) 5% (5) 5% (6) 5% reducing to nil in 6 months (7) 0% Total 25% reducing to 15% in 6 months

22. Is the soldier 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

23. It is certified that the soldier

- (a) Does require treatment.
(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).

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

That he be placed in Category E, and be discharged for a physical disability pre-existing enlistment and not due to nor aggravated by service, and as over age

W.F. McLean Major President.
C. G. Lacey Capt.
D.H. Johnson M.D. Members.

STATION Ravina Barracks, Toronto

DATE January 29, 1918.

APPROVED BY

DATE Feb 5/18

APPROVED BY

DATE

Assistant Director of Medical Services.

Director-General of Medical Services.