

724541

"9" Coy.

ATTESTATION PAPER.

No. 724541

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

ORIGINAL

QUESTIONS TO BE PUT BEFORE ATTESTATION. (ANSWERS.)

1. What is your name?..... **George Edward Chatten:**
 2. In what Town, Township or Parish, and in what Country were you born?..... **Norwich, Norfolk, England**
 3. What is the name of your next-of kin?..... **Wife Eleanor Isabel Chatten**
 4. What is the address of your next-of-kin?..... **Box 974 P.O. Lindsay Ont. Canada.**
 5. What is the date of your birth?..... **30th March 1887**
 6. What is your Trade or Calling?..... **Florist**
 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?..... **inoculated Yes**
 10. Have you ever served in any Military Force?..... **No**
If so, state particulars of former Service. **45th Victoria Regiment 7 months**
 11. Do you understand the nature and terms of your engagement?..... **Yes**
 12. Are you willing to be attested to serve in the } **Yes**
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? }
- George E. Chatten* (Signature of Man.)
R. H. Anderson (Signature of Witness.)

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, **George Edward Chatten**, 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.

Date *November 12* 191*5*. *George E. Chatten* (Signature of Recruit)
R. H. Anderson (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

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

Date *November 12* 191*5*. *George E. Chatten* (Signature of Recruit)
R. H. Anderson (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 **Lindsay** this *12* day of *November* 191*5*.
[Signature] (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. C. 109th Overseas Battalion, C. E. F.

Description of George Edward Challen on Enlistment.

Apparent Age 28 years 6 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 2 1/2 ins.

Scar of operation on abdomen

Chest measurement { Girth when fully expanded..... 35 ins.
 Range of expansion..... 3 ins.

Complexion Fair

Eyes Blue

Hair Brown

Religious denominations.
 Church of England..... C of E
 Presbyterian.....
 Wesleyan.....
 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..... October 29th 1915.

Place..... Lindsay

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

*Insert here "fit" or "unfit."

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

CERTIFICATE OF OFFICER COMMANDING UNIT.

George Edward Challen 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.

..... Lt. Col. (Signature of Officer)
O. C. 109th Overseas Battalion, C. E. F.
 Date..... **DEC 29 1915**

45-11 #54485 D
ATTESTATION PAPER.

No.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name?..... *George Edward Chatter*
2. In what Town, Township or Parish, and in what Country were you born?..... *Norwich Norfolk Eng.*
3. What is the name of your next-of-kin?..... *(Wife) Mrs. Eleanor Chatter*
4. What is the address of your next-of-kin?..... *3 Russell St. Lindsay. Ont.*
5. What is the date of your birth?..... *Mar. 20th. 1887.*
6. What is your Trade or Calling?..... *Florist*
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?..... *Yes*
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*

Geo. E. Chatter (Signature of Man).
G. M. Kennedy (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *George Edward Chatter*, 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.

Geo. E. Chatter (Signature of Recruit)
 Date *Feb. 17th* 191*5* *G. M. Kennedy* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *George Edward Chatter*, 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.

Geo. E. Chatter (Signature of Recruit)
 Date *Feb. 17th* 191*5* *G. M. Kennedy* (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 *Lindsay* this *17th* day of *February* 191*5*.

[Signature] (Signature of Justice)

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

H. Dawson Lt-Col (Approving Officer)

ml

Description of George Edward Chatten on Enlistment.

Apparent Age.....26 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. 3 ins.

Chest measurement. { Girth when fully expanded.....35 ins.
 Range of expansion.....3 ins.

Complexion.....Dark

Eyes.....Blue

Hair.....Dark Brown

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

Chicken pox scars on abdomen

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.....12th March 1915

Place.....Lindsay

McClach
Lieut
 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.

George Edward Chatten 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.

Date.....July 6 1915
H. J. Dawson Lt.-Col. (Signature of Officer)

3104-9-1
C 2774

DEPARTMENT OF MILITIA AND DEFENCE.

6721

WAR SERVICE GRATUITY.

P.C. 25-7-19
a.m.H.

OTTAWA, CANADA.

Declaration required of Officers, Warrant Officers and Men who claim War Service Gratuity under Order-in-Council (P.C. 3165), dated 21st December, 1918.

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

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

On completion this Declaration is to be returned to THE DISTRICT PAYMASTER OF THE DISTRICT IN WHICH THE SOLDIER WAS DISCHARGED.

1. Christian Names *George Edward* 2. Surname *Chatten*
3. Rank *Private* 4. Original Unit *109th Batt* 5. Reg. No. *424541*
6. Address, in full, to which future payments of gratuity are to be forwarded
*General Delivery, Post Office
Peterborough Ont*
7. Date of enlistment in the C.E.F. *28th October 1915*
8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge *Eleanor, Mabel, Chatten*
9. Relationship of such dependent *Wife*
10. Address, in full, of such dependent *General Delivery
Post Office Peterborough Ont*
11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? *etc*
12. Were you at any time on the strength for pay and allowances of a unit of the C.E.F. which was out of Canada or the United States when such pay and allowances were issuable? If so, give particulars of one such unit and dates of service overseas with such unit:
Yes, overseas.
13. Were you on the strength for pay and allowances of the Clearing Services Command, having been at any time on duty outside of Canada or the United States?
14. Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service *Not applicable*
15. Give total length of time which you served on active service, whether in Canada or Overseas, setting out particulars of units on whose strength you served *Enlisted 59th Batt
Jan 5th 1915 to Aug 30th 1915 reenlisted with
109th Batt. Ont. 28. 1915. to Feb. 20th 1918*
16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department *Not applicable*
17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.? *etc*

43

18. Have you had more than one enlistment? If so, give particulars of discharges and re-enlistments, and under what regimental numbers and units... *59th Batt Jan 5th 1915 (No 454480)*
Discharged Aug 30th 1915 cause Gastritis
Reenlisted 109th Batt Oct 28th 1915 (No 724541)
Discharged Feb 20th 1918 Med Unfit
19. Have you already received any payment of Post Discharge Pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid...
Three months Post Discharge at \$5.3 per month
Total \$159.00 paid by Capt. Peters Kingston
20. Have you been issued with a War Service Badge? If so, what class? ... *B*
21. Have you, during the present war, served in the Imperial Forces? ... *No*
22. Are you entitled to receive, or have you received any gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled...
Not applicable
23. (a) Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England? ... *Not applicable No*
 (b) If so, was such reversion in consequence of misconduct or inefficiency? ... *Not applicable No*
24. Are you now serving in the C.E.F. ... *No* If not, give:—(a) Date of discharge
20th Feb 1918 (b) Reason for discharge ... *Med Unfit*
25. Are you at present a member of and in receipt of pay and allowances from any Canadian naval or land forces? If so, give unit... *No*
26. Did you at any time serve at the front in an actual theatre of war? If so, give particulars of one unit which you served at the front, and dates of such service with that unit... *No*
27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment? ... *No*
 (b) If so, are you in receipt of full pay and allowances from that Department? ... *No*

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

Signature of Applicant: *George Edward. Chatton*

Place of Residence: *Peterborough Ont*

Declared before me at: *Peterborough*

This *4th* day of *July* 19*19*.

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

J. H. Dobson
 (a comm. etc.)

POST DISCHARGE PAY.

Date paid	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
<i>July 23-1918</i>	<i>33.00</i>	<i>28.00</i>		
<i>Nov "</i>	<i>33.00</i>	<i>28.00</i>		
<i>Apr "</i>	<i>34.10</i>	<i>28.00</i>		
<i>Total</i>	<i>\$117.10</i>	<i>102.00</i>		

Certified Correct.

Blumenkrantz
 District Paymaster.

CASE HISTORY SHEET.

No. 724541 Rank Plt Name Chatten G. E. Age 30

Unit 109 Bn Completed years of service _____ Where and how long

Date of admission Feb 3-18 Date of discharge Feb 5th 18

Diagnosis Analysis, Gastric Contents X Ray Place of origin _____

CONDITION ON ADMISSION AND PROGRESS OF CASE England 5 months. Report

sick August 1916. Returned to Canada Feb 11/17
Man complains of pain in the stomach, considerable
gas. Has a cough especially in the morning
considerable sputum. Nothing found on examination
of chest.

Stomach empty
Gastric Analysis - Total acidity 40 Free
HCl 25 combined 15 Muc. trace of lactic
Micro - negative

X ray Shows pylorus, stomach normal
position no b.l. residue

FAMILY HISTORY Negative
(Tuberculosis, mental or nervous diseases.)

TREATMENT
(Especially any specific or special form.)

CONDITION ON DISCHARGE
(and disposal made of case.)

Date Transferred to Elmhurst. Feb 5-18 SM. Aselski Capt. A.M.C.
Medical Officer i/c case.

11/11/11
 11/11/11
 11/11/11
 11/11/11

CANADIAN CONTINGENT EXPEDITIONARY FORCE

TRIPPLICATE

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. 724541 Rank Pte. Name Chatten, G.E.

Corps. 109th Battalion who was Discharged

On February 20th 1918, to Class 3, Medically unfit

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from February 1st 1918 to February 20th 1918 the inclusive date of transfer or discharge.

Dr.	\$	c.	Cr.	\$	c.
Bal. Dr. from prev. month.....			Bal. Cr. from prev. month.....		
Advances } No.....			Reg't Pay..... <u>20</u> days at \$ <u>1</u> c.....	<u>20</u>	<u>00</u>
by } No.....			Field Allow. <u>20</u> days at \$..... c. <u>10</u>	<u>2</u>	<u>00</u>
Cheques } No.....			Separation Allowances* (Monthly)	<u>16</u>	<u>00</u>
Assigned Pay and Sep'n Allee. No. <u>7935</u>	<u>29</u>	<u>00</u>	Other Allowances* <u>D.O. 43 Subs</u>	<u>8</u>	<u>00</u>
Other charges			Other Credits*..... <u>Clothing</u>	<u>13</u>	<u>00</u>
Payment on transfer or discharge No. <u>7936</u>	<u>30</u>	<u>00</u>	Bal. Dr. (to be deducted by new unit).....		
Balance Cr. (to be paid by the new unit).....					
Total.....	<u>59</u>	<u>00</u>	Total.....	<u>59</u>	<u>00</u>

* Give particulars.

A monthly stoppage of \$ 20.00 (†) has Pro Rata (‡) been paid on account of Assigned Pay for the month of February 1918 (to) Assignee Mrs. G.E. Chatten and Sep'n Allee. for month of 191.....

(Address) Gen Delivery,
..... Peterboro, Ont.

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

On Transfer of an Officer

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

REMARKS:—

- State (1) date of enlistment
- (2) if married and if a Separation Allowance Card has been submitted..... pd to date discharge
- (3) cause of discharge..... authority..... 3MD 88-C-76
- (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..... February 16th, 1918

Place..... Kingston, Ont.

W. Peters Capt.
Paymaster, "C" Unit M. E. C. C.
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.

cheque #7936 attached

CONFIDENTIAL EXPEDITIONARY FORCE

PART BY PART

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..... *109 Batt.*

(2) Regimental Number..... *424 541*

(3) Full Name of Soldier..... *George Edward Chatten*

(4) Place of Birth..... *Norwich Norfolk England*

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

(6) If married, state,
 (a) Full name of your wife..... *Eleanor Mabel Chatten*

(b) Present Postal Address..... *Box 974 Post Office
Lindsay Ontario Canada.*

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

(8) Have you any children?..... *3*

If so, give number of boys and girls..... *1 Boy & 2 Girls*

Also their names and ages..... *Boy 4 years
1 Girl 10 years & 1 Girl 3 years
& six months*

(9) Is your Father alive? *Yes*
If so, state name and address *Edward Chatter*

(10) Is your Mother alive? *Yes*
If so, state name and address *Mr E Chatter*

13 Chadwell St Norwich England

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

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

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

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

(15) Are you insured? *Yes*
If so, in what Company? *London Life of Canada*
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 *19 July 1916*

[Signature]

Officer Commanding. Major
109th Overseas Battalion, C. E. F.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book. 4419	Regimental No.	Rank.	Surname.	Christian Name.	66.
	724541	Pte.	Chatten	G. E.	
Year 7 SEP 1916	Unit.	Age.	Service.		
	109 th 144	29	11/12		
Station and Date. Hut 1	Disease <i>Duodenal Abdominal-ulcers.</i>				
	<i>Bramshott 21st August.</i>				
	<i>Bramshott Military Hosp. 28th August.</i>				
	<i>Bearwood 7th September.</i>				
	<i>S.T. Duet 16 August. No spec. Had it in 1912. Complaints</i>				
	<i>P.C. Poor appetite</i>				
	<i>S. Rest. M.O.</i>				
<i>31/10/16</i>	<i>Discharged to C.C. Board.</i>				
	<i>W. B. ...</i>Captain. Med. Off., Canadian Convalescent Hospital, Bear Wood, Wokingham, Berks.				



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

Station
and Date.

724541

L.L. 6868

ORIGINAL

MEDICAL HISTORY SHEET.

C.A.M.C.

Surname Challen

Christian Name George Edward

Examined { on: 29th day of October 1915
 at Ludlow
 Birthplace { City or Town Norwich
 County England

Approved by J. McCulloch Capt.
J. McCulloch
 Rank 109th Overseas Battalion C.E.F. M.O.

Apparent age 28 years
 Trade or occupation Florist
 Height 5 Feet 2 1/2 Inches.
 Weight 110 Lbs.
 Chest measurement { Minimum 32 inches.
 Maximum expansion 35 inches.
 Physical development Fair
 Small-Pox Marks None

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

Vaccination Marks { Arm Right One Left Four
 Number Five

Date	Result	VACCINATIONS.
<u>21-2-15</u>	<u>Good</u>	<u>J. McCulloch</u> M.O.
		M.O.
		M.O.

When Vaccinated last February 21 1915
 a) Marks indicating congenital peculiarities or previous disease Chickenpox marks on abdomen & marks of varicocle operation
 (b) Slight defects but not sufficient to cause rejection None

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>18-2-15</u>	<u>Good</u>	<u>J. McCulloch</u> M.O.
<u>28-2-15</u>	<u>Good</u>	<u>J. McCulloch</u> M.O.
<u>2-5-16</u>	<u>Good</u>	<u>J. McCulloch</u> M.O.

Re-enlisted on 29th day of October 1915 at Ludlow

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>Overseas Contgt.</u>	<u>45th Vict Regt</u>		<u>29. 10. 15.</u>
Transferred to.. ..	<u>109th</u>	<u>724541</u>		

APPROVED
J. McCulloch
 CAPT. C.A.M.C.
 FOR ADJ-GENERAL AND FOR
 G.O.C.

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>Hastings, Sussex</u>	<u>5. JAN 1917</u>	<u>Dyspepsia</u>	<u>Discharged</u>
			<u>Dr. H. J. May</u> Capt PRESIDENT STANDING MEDICAL BOARD.
		<u>Dr. F. M. Dulyard</u>	<u>Captain, C.A.M.C.</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.

Christian Name *George Edward*

Surname *Chalben*

STATION.	Date of Arrival at the Station.	DATES OF						DISEASE.	Number of days in Hospital.	Remarks on nature of the disease : how induced : if mild or severe : if completely recovered from ; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
		Admission into Hospital.			Discharge from Hospital.						
		Day	Month	Year	Day	Month	Year				
<i>Bramshott in H</i>		<i>29</i>	<i>8</i>	<i>16</i>	<i>7</i>	<i>9</i>	<i>16</i>	<i>Duodenal ulcer</i>	<i>16</i>	<i>Capt Cobbett surgical specialist thought operation not at present indicated</i>	<i>[Signature]</i>
<i>Capt Dearwood</i>		<i>7</i>	<i>9</i>	<i>16</i>	<i>31</i>	<i>10</i>	<i>16</i>	<i>do</i>	<i>55</i>	<i>Discharged to C.C.A. board</i>	<i>J. Lewis Capt</i>

DISCHARGED.
under
Para 392, Sec. 16, K. R. & C. 1912.
Being no longer physically
fit for war service.

W. H. Seed Capt
for Commandant.
Canadian Casualty
Discharge Depot,

CASE HISTORY SHEET.

No. 724521 Rank Bandsman Name Chetten George E. Age 30
 Unit 109th Bn Completed years of service Canada 6/2 England 10/2
 Date of admission Feb 11th 1917 Date of discharge Feb 20th 1918
 Diagnosis Gastritis & Bronchitis Place of origin 1 + 2 England

CONDITION ON ADMISSION AND PROGRESS OF CASE He was in Hospitals and convalescent homes in England 5-months. Complaints of Pain and tenderness in epigastric region worse after meals. frequently vomits after taking ordinary meals. Belches up mouthfuls of food until stomach is empty. Says vomitus is very bitter especially last of matter vomited. Occasionally vomits blood. He states he has been unable to assimilate ordinary food for years. He says he coughs considerably in the morning and raises phlegm. Holby very noticeable on percussion and auscultation. very few rales over left chest. physical condition fair is small and slight.

FAMILY HISTORY at Elmhurst he has had the ordinary gastric treatment X-ray examination and analysis of stomach contents. There has been a gradual improvement but he cannot take ordinary food without stomach disturbance. No family history available.

TREATMENT At Elmhurst he has had the usual treatment for gastric disturbance, also X-ray examination and analysis of stomach contents. There has been a gradual improvement but he cannot take ordinary food without stomach disturbance.

CONDITION ON DISCHARGE Improved but not able to take ordinary food.

Date Feb 20th 1918 W. A. Cross, Capt. R.M.C.
Medical Officer i/c case.

38796

Faint, illegible handwriting in the upper section of the page.

Faint, illegible handwriting in the middle section of the page.

Faint, illegible handwriting in the lower section of the page.

MEDICAL CASE-HISTORY SHEET.

HOSPITAL..... Blenhurst Home,..... STATION..... Kingston, Ont......
No..... 724541...... Rank Bandman...... Name CHATTEN, George Edward Age..... 29
Unit..... 109th. Battalion, C.F.C...... Service..... ENGLAND......
Date of Admission..... Feb. 11th. 1917...... Date of Discharge.....
Diagnosis..... Gastric Ulcers and Bronchitis......
Date of Origin..... Aug. 20th. 1916...... Place of Origin..... Bramshott Camp......

CAUSE OF ILLNESS OR INJURY:

Duodenal ulcer? Bronchitis not due to but aggravated by service.

HISTORY OF PRESENT ILLNESS OR INJURY.

(Is Illness or Injury result of Service?)

He reported sick at Bramshott Aug. 20th. 16 and sent to Bramshott Hosp., remained 2 weeks and was sent to Bearwood Conv. Home, remained 6 weeks and then sent to C.C.A.C. at Hastings for Board and was turned down as medically unfit, sent to Buxton C.D.D. and from there to Liverpool, sailed S.S. Scotian Jan. 26th. Arrived St. Johns Feb. 5th. Left Quebec Feb. 10th. Arrived Kingston Feb. 11th. 17.

CONDITION ON ADMISSION.

Gastric disturbance, complains of dull heavy pain in epigastrium about 2 hrs. after meals. Pelches up mouthfuls of food at this time until stomach is emptied. Says vomitus is very bitter especially last part of attack. Appears in good physical condition. Lung ~~xxxxxx~~ condition not very marked. Says he coughs considerable in the A.M. until phlegm comes up and then no trouble. Nothing noticeable on percussion and auscultation.

TREATMENT.

QUEBEC BOARD:--Invalid is slight man, looks pale. He complains of pain and tenderness in epigastric region. If he takes ordinary diet he almost invariably vomits it up after retaining it for an hour or so. Frequently has vomited blood. He states that he has been unable to assimilate ordinary diet for years. Under treatment for 2 years 1903-1904 at Norfolk Hosp. Has had bronchitis for 2 years. Few rales over left chest. No sputum analysis available. Physical condition fair.

INCAPACITY:-- Eng. Board-1/4 for 6 mos. due to service.
Can. Board:- 2/5. 1/5 bronchitis. 50% due to aggravation. 1/5 ulcer 50% due to aggravation.

Duration:- 3 mos. for each for aggravation.

CONDITION ON DISCHARGE FROM HOSPITAL.

.....
Medical Officer i/c Case.

Date.....

MEDICAL CASE-HISTORY SHEET.



STATION Hospital

Name of Patient No.

Age Sex

Date of Admission Date of Discharge

Place of Origin

Course or Nature of Injury:

History of Present Illness or Injury:

(In brief, in layman's terms or in simple English)

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Proceedings of Medical Board at Discharge Depot.

Number Rank Name and Corps of disabled soldier.

724541, Plt, Chatter George Edward. 109th Bu.

Previous Civilian Occupation. Florist.

DEPT MILITIA & DEFENCE
FEB 13 1917

Cause of disability -

Acute ulcer? Bronchitis - not due to but aggravated by service

649-6-8540

Condition in detail which prevent the soldier earning a Full livelihood:-

Invalid is slight man. looks pale. He complains of pain & tenderness in epigastric region. If he takes ordinary diet he almost invariably vomits it up after retaining it for a hour or so. Frequently has vomited blood.

He states that he has been unable to assimilate ordinary diet for years. Under treatment for 2 yrs. 1903-04 at Norfolk Hospital. Has had bronchitis for 2 yrs. Few rales over left chest. No sputum analysis available. Physical condition fair.

Opinion of the Board.

Degree of incapacity (Please state in fractions.)

2/5 - 1/5 for Bronchitis. 50% due to aggravation
1/5 - 1/5 - Acute ulcer. 50% " " "

Probable duration of incapacity:-

3 mos. each for aggravation;

Does it render him permanently unfit for Military Service? Yes.

Would operation, special treatment or the use of appliances, etc., lessen incapacity? Convalescent home.

Signature.

E.A. Robertson Capt President.
W. H. Ogden Capt Members.
W. D. Duff Capt.

Station. Que

Date Feb 7/17

Approved.

Date Feb 7/17

W. H. Carver Major
Assistant Director Medical Service.

Date Feb 21/17

W. C. Cannon Capt
Director General Medical Service.

Handed 14/2/17

Director General Medical Service.

Date

Assistant Director Medical Service.

Date

Approved.

Date

Station.

Members.

President.

Will operation, special treatment or the use of appliances, etc., lessen incapacity?

Does it render him permanently unfit for Military Service?

Probable duration of incapacity:-

Degree of incapacity (Please state in fractions.)

Opinion of the Board.

Condition in detail which prevent the soldier earning a full livelihood:-

Cause of disability -

Previous Civilian Occupation.

Rank

Name and Corps of disabled soldier.

Proceedings of Medical Board at Discharge Depot.

Form to be used instead of Blank space on Army Form 172

Report No. **4634**

Class **II** Vocational counsellor.
Chatten, G.B.
512 Sherbrooke Str.,
Peterboro Ont.

No. of M. H. C. File

No. of Local File

No. of H. Q. File

CLASS 3.—Men having a permanent disability which would not be benefited by further medical treatment (such disability due to or aggravated by service) and whose cases will immediately be considered by the Pensions Board with a view to pension.

No. **724541** Rank **Bandman** Original Unit **109th** Present Unit **14th reg**
Age **29** Height **5 ft. 2 ins.** Complexion **Fresh** Eyes **Blue** Hair **Dark** Character **H.R.**
Date of enlistment **29-10-15** Where enlisted **Lindsay** Where seen service **England**
Ship returned by **Section** Date of arrival **5-2-17** Port of arrival **St. John**
Birthplace **England** Religion **C of E.**
Name and address next of kin **Wife - Mrs. G.B. Chatten, same address.**
Cause of disability **Duodenal ulcer (?) Bronchitis not due to but aggravated by service.**
Condition which prevents the soldier from earning a full livelihood

CLASS 2.—Men whose condition may be benefited by further medical treatment or rest in a Convalescent Home, Hospital or Sanatorium. If deemed advisable, in some cases the medical officer in charge of the Convalescent Home, Hospital or Sanatorium may grant these men leave to return to their own homes and families for a definite period.

Degree of incapacity (Please state in fractions) Eng. Board **up to service.** Canadian Board **2/5; 1/5 Bron-**
Probable duration of incapacity **months for each for aggr.** **chitis 50% due to aggra-**
Is final disability likely to prevent return to previous occupation? **vation. 1/5 ulcer 50%**
Recommendation of Canadian Board **Convalescent Home** **due to aggravation.**
Destination to which transportation issued **Kingston Ont**
Members of Board **H.A. ROBERTSON CAPT. H.P. COOPER CAPT. W.G. BALDWIN CAPT. J.M. CARRICK MAJOR**

INFORMATION TO BE FURNISHED BY SOLDIER

DEPENDENTS	NAME	AGE	WHERE—IF EMPLOYED	WAGES	STATE OF HEALTH
Wife					
Children 1	wife	30			GOOD
2					
3	eldest	12			
4					
5					

Occupation prior to enlistment **Gardener**
Regular trade or profession **Florist**
Average earnings previous to enlistment **10.00 a week** Any other income
Name and address of last employer **Own business**
Rent per month **8.00** If purchasing property amount due and annual payment, \$
Taxes If Homestead, when is patent due?
If carrying life or accident insurance, annual premium **12.00**
If in receipt of sick benefits or other insurance—name of society **London Life** Amt. per mo. \$
If unable to follow previous occupation, name preference
At what age soldier left school? What grade, standard, &c., was he in?
Has he taken any Technical or Continuation classes, if so what?
Whether given Vocational Training while in Hospital in England. If so, what subjects? **H.A.**
References
Witness **H.A. J. McDONNELL** I declare that the above statement is correct.
Date **7-2-17** Signature **GEO. B. CHATTEN**

Recommendation by Interviewer as to classes likely to be of use, and general remarks:

Is desirous of obtaining any knowledge possible in the production of flowers viz. greenhouse work. V. Counsellor.

Last Pay Cert. Cr., \$ Dr., \$ Amount paid at Depot H. Q., \$ L. P. C. leaving Depot, \$
Amount forwarded to H. Q. Unit, \$ Credit Clothing allowances, \$
Transf'd to Unit—Date Transf'd Class 1—Date Transf'd Class 3—Date
PENSION—Class..... Amount per year, \$..... Period granted for..... Dating from.....
First payment date.....

AP 8

59

CLASS 1.—Men for immediate discharge without a pension.
(a) Unfit for overseas service but capable to take up their previous civilian occupation.
(b) Disability not the result of service or involving claim as the result of or aggravation by service.

Condition which prevents the soldier from earning a full livelihood

Cause of disability

Name and address next of kin

Birthplace

Ship returned by

Date of arrival

Where enlisted

When seen service

Part of arrival

Religion

Rank

Height

Complexion

Eyes

Hair

Character

Original Unit

Present Unit

INFORMATION TO BE FURNISHED BY SOLDIER

DEPENDENTS	NAME	AGE	WHERE-IF EMPLOYED	WAGES	STATE OF HEALTH
Wife					
Children	1				
	2				
	3				
	4				
	5				

Members of Board

Destination to which transportation issued

Recommendation of Canadian Board

Is final disability likely to prevent return to previous occupation?

Possible duration of incapacity

Degree of incapacity (Please state in fractions) Eng. Board

Canadian Board

Occupation prior to enlistment

Regular trade or profession

Average earnings previous to enlistment

Name and address of last employer

Rent per month

Taxes

If Homestead, when is patent due?

If carrying life or accident insurance, annual premium

If in receipt of sick benefits or other insurance—name of society

If unable to follow previous occupation, name preference

At what age soldier left school?

What grade, standard, etc., was he in?

Has he taken any Technical or Continuation classes, if so what?

Whether given Vocational Training while in Hospital in England. If so, what subjects?

References

Witness

Date

I declare that the above statement is correct.

Signature

Recommendation by interviewer as to classes likely to be of use, and general remarks.

Transferred to _____ Unit—Date _____

Transferred Class 1—Date _____

Transferred Class 3—Date _____

Amount per year \$ _____

Period granted for _____

Dating from _____

First payment date _____

Transferred to _____

Amount forwarded to H. Q. Unit \$ _____

Credit Clothing Allowance \$ _____

Dr. \$ _____

Amount paid at Depot H. Q. \$ _____

L. P. C. leaving Depot \$ _____

Form No. 52
 (a) Amount forwarded to H. Q. Unit \$
 (b) Last Pay Cert. Cr. \$
 (c) Amount per year \$
 (d) Period granted for
 (e) Dating from
 (f) Transferred to
 (g) Transferred Class 1—Date
 (h) Transferred Class 3—Date
 (i) L. P. C. leaving Depot \$
 (j) Credit Clothing Allowance \$
 (k) Dr. \$
 (l) Amount paid at Depot H. Q. \$
 (m) Amount forwarded to H. Q. Unit \$
 (n) Last Pay Cert. Cr. \$
 (o) Amount per year \$
 (p) Period granted for
 (q) Dating from
 (r) Transferred to
 (s) Transferred Class 1—Date
 (t) Transferred Class 3—Date
 (u) L. P. C. leaving Depot \$
 (v) Credit Clothing Allowance \$
 (w) Dr. \$
 (x) Amount paid at Depot H. Q. \$
 (y) Amount forwarded to H. Q. Unit \$
 (z) Last Pay Cert. Cr. \$

Army not available
Fill in only.—Unit, Number, Rank and Name.

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

500M.—9-16
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps. *59 Bn 6 E. 8.*
Regimental No. *54485* Rank *Pte* Name *Shatten G. E.*
C. E. F. *6 E. 8.*
Enlisted (a) *17.2.15* Terms of Service (a) *6 E. 8.* Service reckons from (a) *17.2.15*
Date of promotion to } Date of appointment } Numerical position on }
present rank } to lance rank } roll of N. C. Os. }
Extended. Re-engaged. Qualification (b) *Flourist*

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				
<i>30.8.15</i>	<i>59 Bn</i>	<i>Sol. in unit</i>	<i>Barrefield</i>	<i>30.8.18 D.O. 81</i>	<i>[Signature]</i>



[Handwritten signature]

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

A.G.R.

Rank

Name

CHATTEN, George Edward ✓

Reg'l No.

724541 ✓

Unit

109th Bn.

If in perm. Corps, }
What Unit? }

Married or Single

Married

Place and Date of Enlistment

Lindsay,
12th Novr., 1915. ✓

Place of Birth

Married ✓

Name and Address, Next-of-Kin

Eleanor Mabel Chatten, ✓

Norwich, Norfolk, England

Box 974 P.O. Lindsay, Ont., Canada. ✓

Relationship

Wife. ✓

Assigned Pay Monthly \$

Payable to

Separation Allowance \$

Payable to

Relationship

N/E R.B. No. 6232

File R.L. 139

Category Jan M. 45

Relationship

Discharge, Date and Place

Reason

Character

H. W. & V., Ltd.—7165-16.

PR 1330/108

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.				
		Canada		23-7-16	
		Arrived in England per H.M.T. 2810		31-7-16	
24-8-16	O.C. 109 th	Admitted to Hoopl.	B.D. Hut #3	24-8-16	Pt. II D.O. 237 X C.L. #10 X
20-9-16	Cas. Dept	Trans to Con. Strp Bearwood	Wokingham	8-9-16	C.L. 13 (Abdominal & leg). T.P.
3-11-16	109 th Bn	Disch from Can. Con. Strp Bearwood	Wokingham	31-10-16	C.L. 28
6-11-16	"	S.O.S. on Trans to C.C.A.C.	Witley	30-10-16	Pt. II D.O. 311 { Pt. II. D.O. C.C.A.C. #479-1-11-16
1-11-16	ccac	Reptd 9 SOS	Shouham	31-10-16	— 1179
10-1-17	"	Proc of Hon Lt Col for Dis	Hastings	9-1-17	— 16
1-2-17	"	Proc to Can for Dis SOS & ceas at M. B. R. D.	"	26-1-17	— 55
26-1-17	ccac	SOS to Can M. B. R. D.	Burton	26-1-17	— 22

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.				
	Dis Dep.	To Con Hosp.	M. D. 3 Kingston	5. 2. 17.	A. R. 192.
20.2.18	M.H.C.M. 3	Sol Med unfit	..	20.2.18	D.O. 51

COPY.

From Laboratories Queen's.

TO Medical Board - Elmhurst.

Pte. Chatten.

724541.

Sir: -

Report on Gastric contents of
Marginally named man:-

Total Acidity 40.
Free HCL. 25.
Lactic Acid - Slight trace.

(SGD) G.R. Reed Lt. AMC.
for W.T. Connell. Lt.-Col. A.M.C.

C.O.P.Y.

M. F. B. 440.

MILITIA AND DEFENCE

In reply please quote

No. 987.

Kingston Ont Febr 6th _____ 1918.

The Officer Commanding,
Queen's Military Hospital.

X ray report Stomach.
Pte. 724541, G.E. Chatham.

Sir: -

I beg to state that the X ray examination of the marginally noted man's stomach shows spasm of pylorus. Stomach is in normal position. No 6 hour residue.

(SGD) for H.A. Boyce, Capt. A.M.C.
(SGD) S.H.

President Standing Medical Board.

Passed for your information.

MILITIA AND DEFENCE

REPRODUCED FROM THE
OFFICIAL RECORDS OF THE
MILITIA AND DEFENCE
IN CANADA

1964

1. 3. 16

MILITIA AND DEFENCE

M. F. W. 11a.
60m.-12-15.
1772-39-818.

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2.

Blome M. Chatten

wife
PAYMENTS.

Name of Soldier

Chatten Geo Ed.

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

Rt

724541

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916	0782	20	20
May		15383	20	20
June		78398	20	20
July		69600	20	20
Aug.		13311	20	20
Sept.	<i>19th</i>	15577	20	20
Oct.		18584	20	20
Nov.	<i>23</i>	X 21813	20	20
Dec.		X 24844	20	20
Jan.	1917	X 27920	20	20
Feb.		X 30915	20	20 X 30915 Canceled
March			220	
April				Returned Scotian 26/1/17
May				
June				2/2/17 24.9.16.
July				
Aug.				Dis 13-2-17 & filed 19-6-1918 5/3/17
Sept.				
Oct.				Please issue of my next cheque from date of change to hold of British 18/2/17 19/3/17
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

Remanded 28 10/16

Acct. Closed

Returned Scotian 26/1/17
2/2/17 24.9.16.
Dis 13-2-17 & filed 19-6-1918 5/3/17
Please issue of my next cheque from date of change to hold of British 18/2/17 19/3/17

ACCOUNT CLOSED

DATE.....PER.....

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.				

1 - 3 - 16

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

1917

Name *Blome M. Chatten*

Name of Soldier *Chatten, Geo. E.*

Address ~~40 Caroline St~~

Regtl. No. *724541*

~~Louis 312 Louis St~~
~~Lindsay Ave~~
~~Peterborough~~
~~Out~~

Rank *Plt*

Corps *109th Bn*

~~Bot 944~~
~~Lindsay Ave~~

Relation to Soldier

512 Sherbrooke St
Peterborough
To what Corps belonging }
when called out }

wife, child or mother

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>074052</i>	<i>20.</i>	<i>20</i>



ACCOUNT CLOSED
DATE.....PER.....

1221

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

194 M. F. W. 12a.
50m.-7-16
1772-39-819.

Sheet No. 2
(Assignee)

Mrs Geo. E. Chatten

Name of Soldier
724541

*Chatten Geo. E.
Pte 109th Bde*

L. L. Job 5470—Req. 6883.

Month.	Year.	Cheque No.	Amt.	Remarks.
				<i>20⁰⁰ Aug '16</i>
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.		<i>H 21210</i>	<i>60⁰⁰</i>	<i>60⁰⁰ Oct. Spec Reg 11¹⁰/₁₆ F.L.</i>
Nov.		<i>H 25804</i>	<i>20</i>	<i>20⁰⁰ Future</i>
Dec.		<i>H 31664</i>	<i>20</i>	
Jan.	1917	<i>H 31994</i>	<i>20</i>	<i>Acc closed Sect Section</i>
Feb.				<i>20⁰⁰ 26/1/17</i>
March				
April				<i>\$120 FX 31/1/17</i>
May				<i>F.W.G.</i>
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

M.A.

M.A.

M.A.

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

193

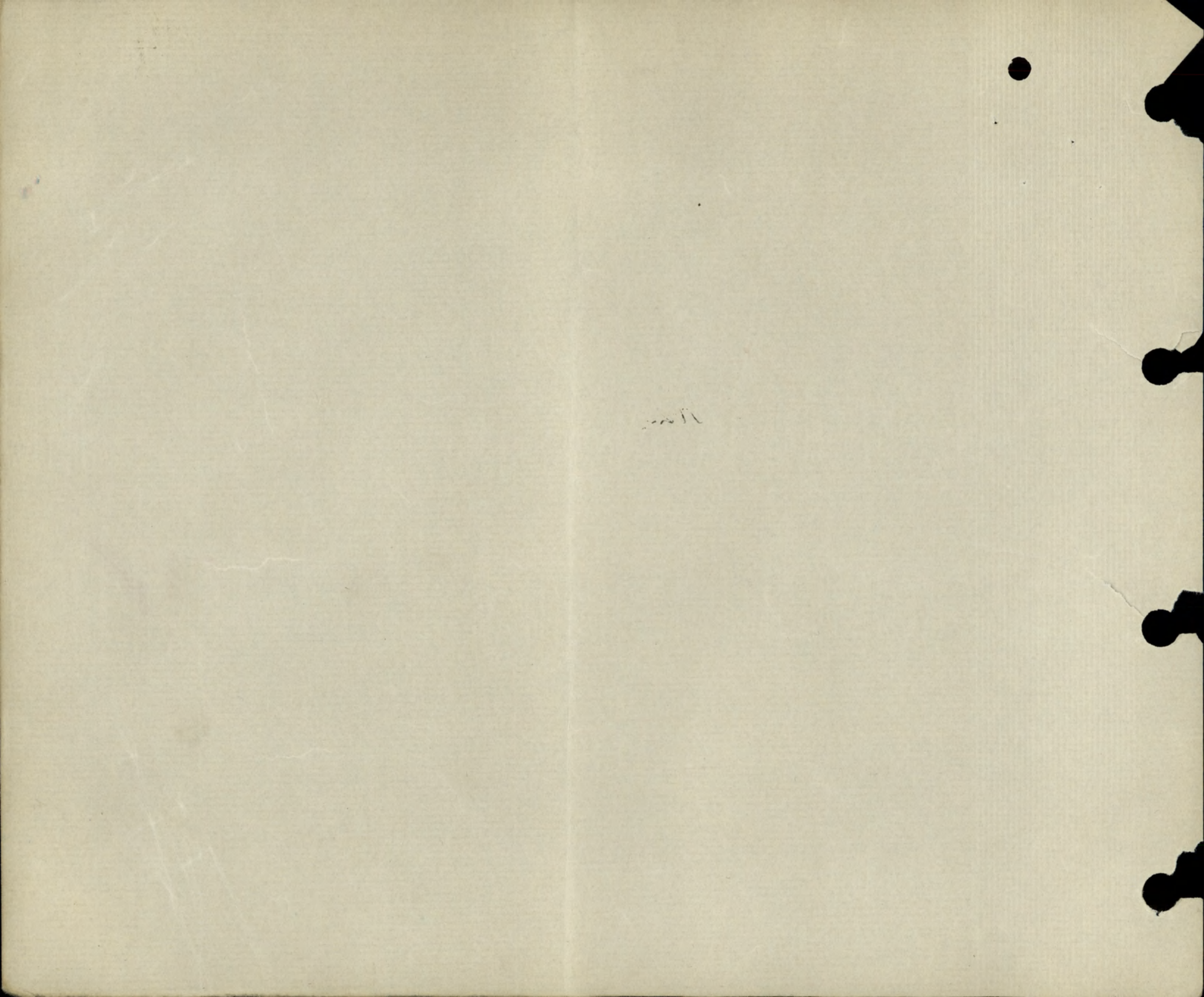
To Whom *Mrs Geo. E. Chatten* By Whom Assigned *Chatten Geo. E.*
 Address *312 Louis St.* Regtl. No. *724541*
Peterborough Rank *Pte*
Ont. Corps *109th Bn*
 Rate *20⁰⁰ Aug '16 Cable 1687.9⁰⁰/₁₀₀*

2M 27⁹/₁₀₀ 20¹⁰/₁₀₀ 46

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			<i>Dis to Canada, up closed 1²/₁₇ 3M 16¹/₁₇ APR 15²/₁₇</i>
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

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 FOR
 CASUALTIES.



6/1/15

Print

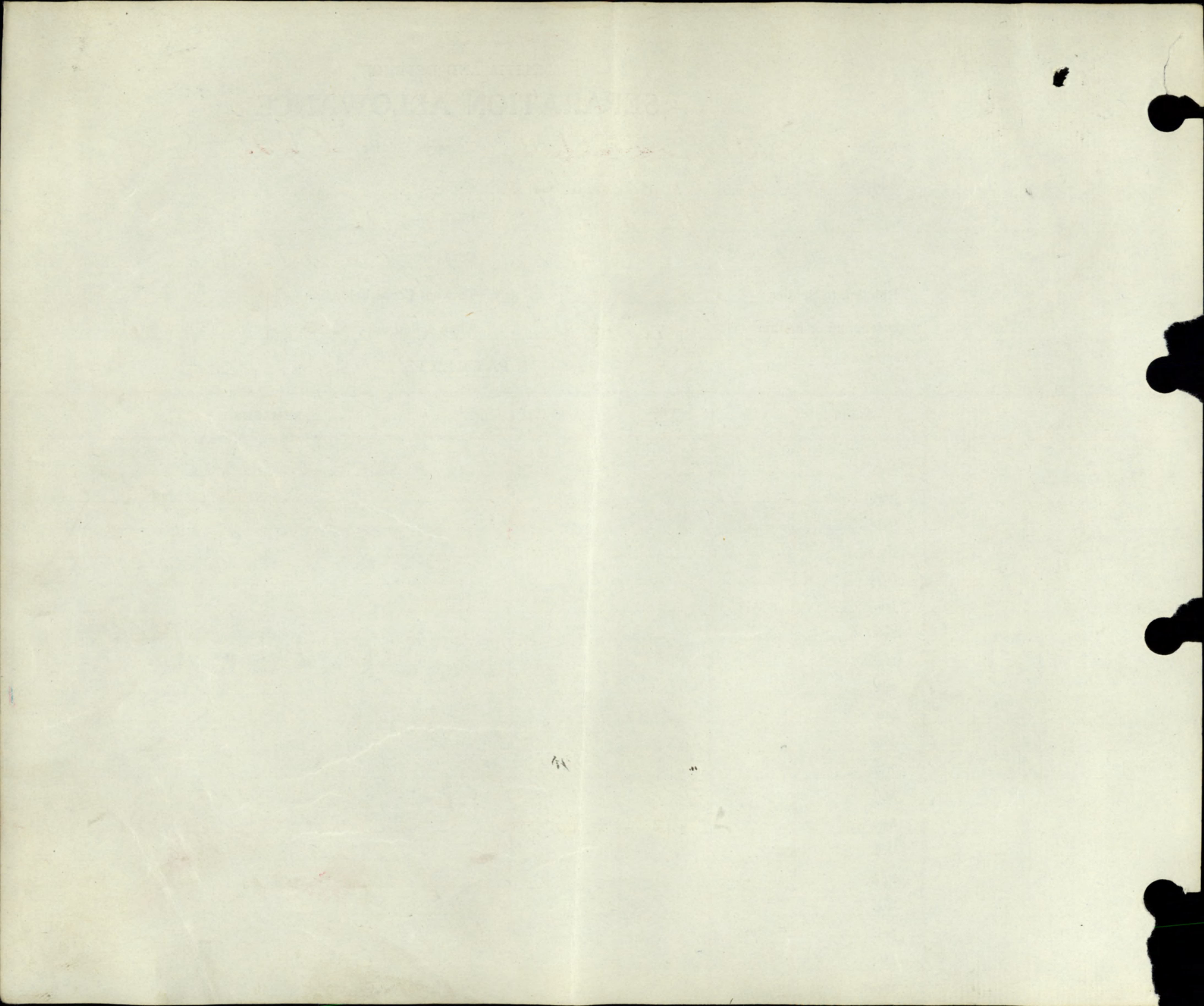
MILITIA AND DEFENCE

SEPARATION ALLOWANCE 198

Name	Mrs Eleanor M. Chatten	Name of Soldier	Chatten, Geo Edw.
Address	107 Queen St. Hurdsey Ont.	Regtl. No.	724341
Relation to Soldier	} wife	Rank	Plt.
wife, child or mother		Corps	Base Batt ^m
		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		K1295	116	- 116
July		N14 55	20	20
Aug.		F14261	20	20
Sept.		11750	20	20 (I 11750 cancelled)
Oct.				Discharged 30/8/15 (P.M.K. 17/9/15)
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				



POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

3104-G-2

Name Chatten, G.E.
Surname Christian Name

Regimental Number 724541 Rank Pte.

Address (in full) Gen. Del. Peterboro, Ont.

Unit 109th Bn.

Original Unit

District where paid M.D.3.

Date of Discharge 20-2-18.

P. D. P. Filing Number 16-72-3.

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	1431	26-2-18	58 00	1403	26-3-18	58 00	1437	29-4-18	59 10		175 10

Remarks:

M. F. W. 127.
60M-617.
1772 39-1140.

WAR SERVICE GRATUITY.

Reg. No. -7245-41-

Dependent Mrs. Eleanor Mabel Chatten (Wife)

Name Chatten Geo Edward

Address same address

Address General Delivery
P.O. Peterborough
Calais

Pay Soldier \$ 174.90

Pay Dependent \$ 150.00

Ins. Harrison
Chubb Newell

Days 153 Rate 100.00 Due 500.00

Less P.D.P. credited 175.10

Clerk H. C. Cochrane

Less further Dr. Bal. or overpayment. -

Net 324.90

R
W/31
12/11/19

Date	Ck. Order	Ck. No.	Amount	Remarks	Date	Ck. Order	Ck. No.	Amount
1/3-8-19	6099	499425	140 00	15-8-19 15-8-19	1/3-8-19	6100	499424	60 00
2					2			
3/13-9-19	21009	516750	34 90	13-9-19 13-9-19	3/13-9-19	21010	516751	30 00
4					4			30 00
5					5			30 00
6					6			

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

Debit of \$ 1.22 per Letter from
O.M. Field. on File 3104-G-1-
Passed to Sus. this date.

HWP
24.10.19

GEN'L AUDITOR
Posting checked by
[Signature]
Date 13/8/19

Name *Chatten R. Geo E*

M. F. W. 41
1 0M-7-16
1772-39 889. **998**

Regimental No. *724541*

Name and address of next-of-kin

Unit *109 Bn*

*518 Sherbrooke St
Peterboro
Ont*

Date of enlistment *|*

Place of " *|*

Married (yes or no) *Yes - S/A to 3/17*

Date and place discharged

Amount of pay assigned monthly *\$20 Jan 4 1917*

Reason for discharge

To whom payable *Geo E Chatton
312 Louis St Peterboro Ont*

Character on discharge

Scotian 5-2-17

Form 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					
<i>17 1/2</i>	<i>16 1/2</i>													<i>Adv</i>
<i>17 1/2</i>	<i>31 1/2</i>	<i>15</i>	<i>15</i>	<i>150</i>	<i>15</i>	<i>10</i>	<i>150</i>			<i>40</i>		<i>243</i>	<i>973</i>	<i>Que Boat</i>
				<i>Balce Habit</i>										<i>+ 70 Unit 17</i>
													<i>52 15</i>	<i>52 15</i>
														<i>Rec'd by P.M. C. Unit Aug. 12 1 21 1 21 A.H. 22 45 4/10/16 1 21 1 21 Sup. L. P. C. 2/18/17</i>
														<i>Letter to P.M. C. Unit to collect 21/9/17</i>

Name Chatten G.E. Rank Pte. Regt. No. 724541 Unit C
 Battn. 109th. Camp or O. S. 0 File M. H. C. C. H. Q. File
 Next of kin wife. 512 Sherbrooke St. Peterboro. Ont.
 Discharged to Class 3 D. of D. Conduct Good
 Pension awarded Date of first payment
 Address on discharge Gen. Delivery, Peterboro, Ont.
 Diagnosis Date boarded

DATE	CLASS	REMARKS	Part 2 Order
11-2-18	2	Elmhurst Outpatient	#43
20-2-18	3	DISCHARGED	#51

Name CHATTEN G.E. Rank Pte. 1 Regt. No 724541 Unit C
 Battn. 109th Camp or O.S. 0. File M.H.C.C. H.Q. File _____
 Pension awarded \$120 6 mos. Date of first payment 21-2-18
 Discharged to Class 3 Conduct on discharge Good
 Next of kin Wife, 512 Sherbrooke St. Peterboro, Ont.
 Address on discharge Gen. Del. Peterboro, Ont.

DATE	CLASS	REMARKS	PART 2 ORDER
11-2-17	2	ELMHURST	#43
12-2-17	2	Elmhurst (Outpatient)	#57
26-2-17	2	Elmhurst	#57
26-2-17		Elmhurst (outpatient)	#58
19-3--17	2	Elmhurst Outpatient 31 Days	#80
25-4-17	2	Elmhurst	#116
22-5-17	2	Ongwanada	#142
25-5-17	2	Elmhurst	#146

Elmhurst

over

DATE	CLASS	REMARKS	PART 2 ORDER
9-6-17	2	Elmhurst (outpatient)	#161
9-7-17	2	Elmhurst Military	#191
10-7-17	2	Elmhurst Outpatient	#192
10-8-17	2	Elmhurst	#223
14-8-17	2	Elmhurst (Outpatient)	#227
14-9-17	2	Elmhurst	#258
22-9-17	2	Elmhurst Outpatient	#266
23-11-17	2	Elmhurst	#328
26-11-17	2	Elmhurst Outpatient Pending Discharge	#331
3-1-18	2	Elmhurst	#4
15-1-18	2	Elmhurst Outpatient	#16
22-1-18	2	Elmhurst	#23

Surname **Chatten** Christian Name or Names **G.E.** Reg. No. **724541**

Rank _____ Unit _____ Co. _____ Troop _____ Batty. _____

Pte. **109th Bn.**
Hospital _____

Date of Admission

Bramshot Military

30.8.16

Transferred **Wokingham Conv**

Hosp. **8.9.16.**

6 ban. Jd. Amb.

Hosp. **3.5.17.**

Hosp. _____

Hosp. _____

Diagnosis

abdominal ulcers

(1) Later Diagnosis (if changed)

P.U.O. 7

(2)

(3)

Additional Diagnosis: if more than one state present

DISPOSITION

Date

C.L. **6.9.16** IO
20.9.16 13
3.11.16 #28
26.6.17 a 66

Dis 31.10.16
REMARKS **3.5.17.**

A.M.D. 2 DEPT.

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

aw.

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

No. 724541 RANK *Pte.*
109th Bn.

NAME *Chatten Geo. Ed.*

T. O. S.

UNIT

Casualties C. E. I

M. D. *3*

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1917</i> <i>Feb 1</i>	<i>1917</i> <i>Feb 28</i> <i>Mar.</i>	<i>M.</i> <i>M.</i>		

No.

RANK

Private

NAME

Chatten Geo.

T.O.S. 1-11-15-

UNIT *93rd Battalion C. I. F.**D.O.# 12-12-11-15,*M. D. *3*

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1915- Nov. 1</i>	<i>1915- Nov. 24</i>	<i>✓</i>	<i>Late 45th Regt</i>	<i>D.O.# 12-12-11-15.</i>

UNIT SAILED
JUL 15 1916



No. 724541. RANK

Pvt

NAME Challen George C.

T. O. S.

UNIT

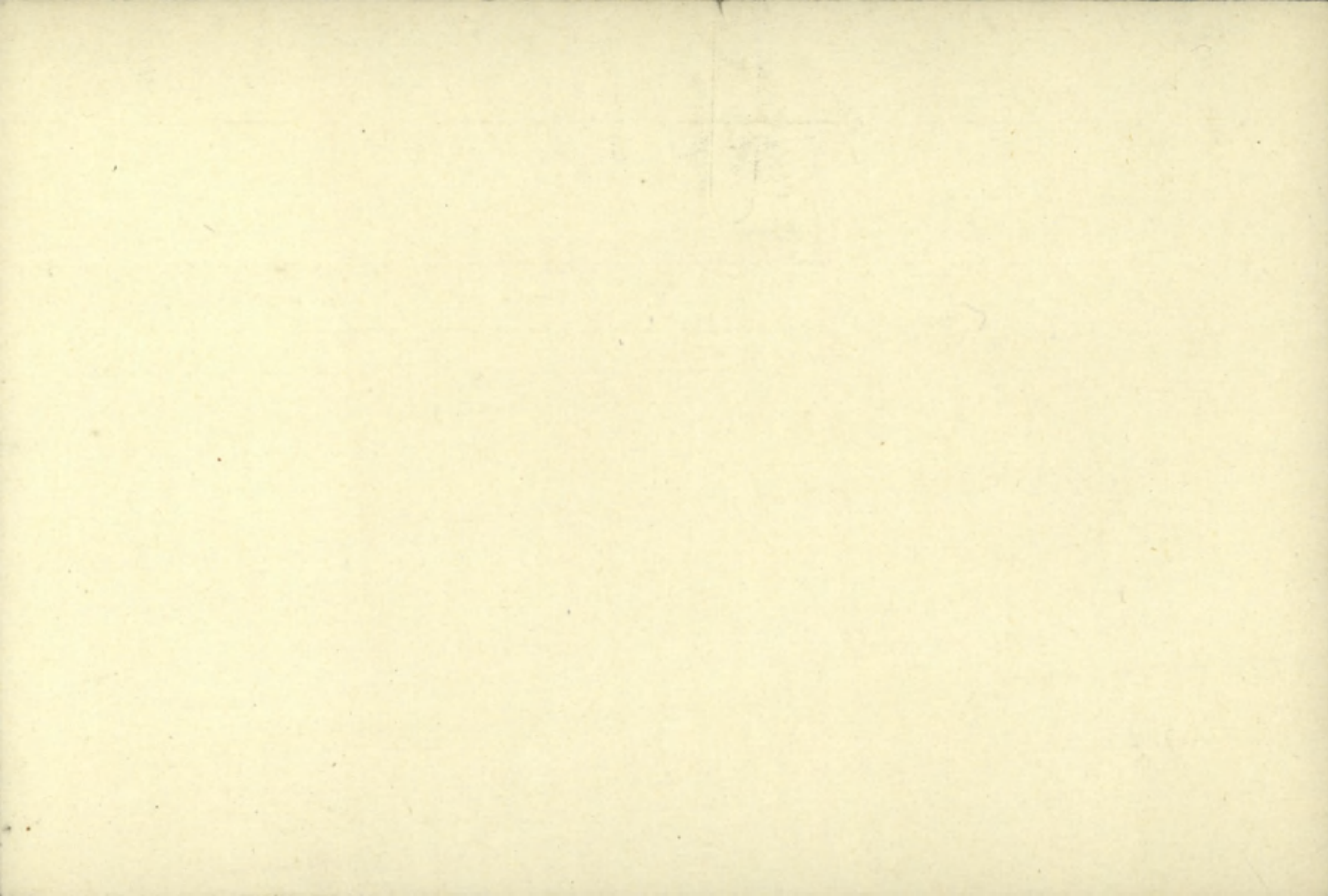
109th Battalion

Transferred from 93rd Bn.
25-11-15 D.O.S. 25-11-15.

M. D. 13

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915 Nov 25	1915 Nov 30	✓		
	Dec.	✓		
1916. Jan.	1916	✓	Prom. Prov. Cpl. 9-1-16	D.O. 5-2-20-1-16.
	Feb.	✓		
	Mar.	✓		
	April.	✓		
	May.	✓		
	June.	✓		
	July.	✓		

UNIT SAILED
JUL 23 1916



No.

RANK

Pte

NAME

Chatten George Ed.

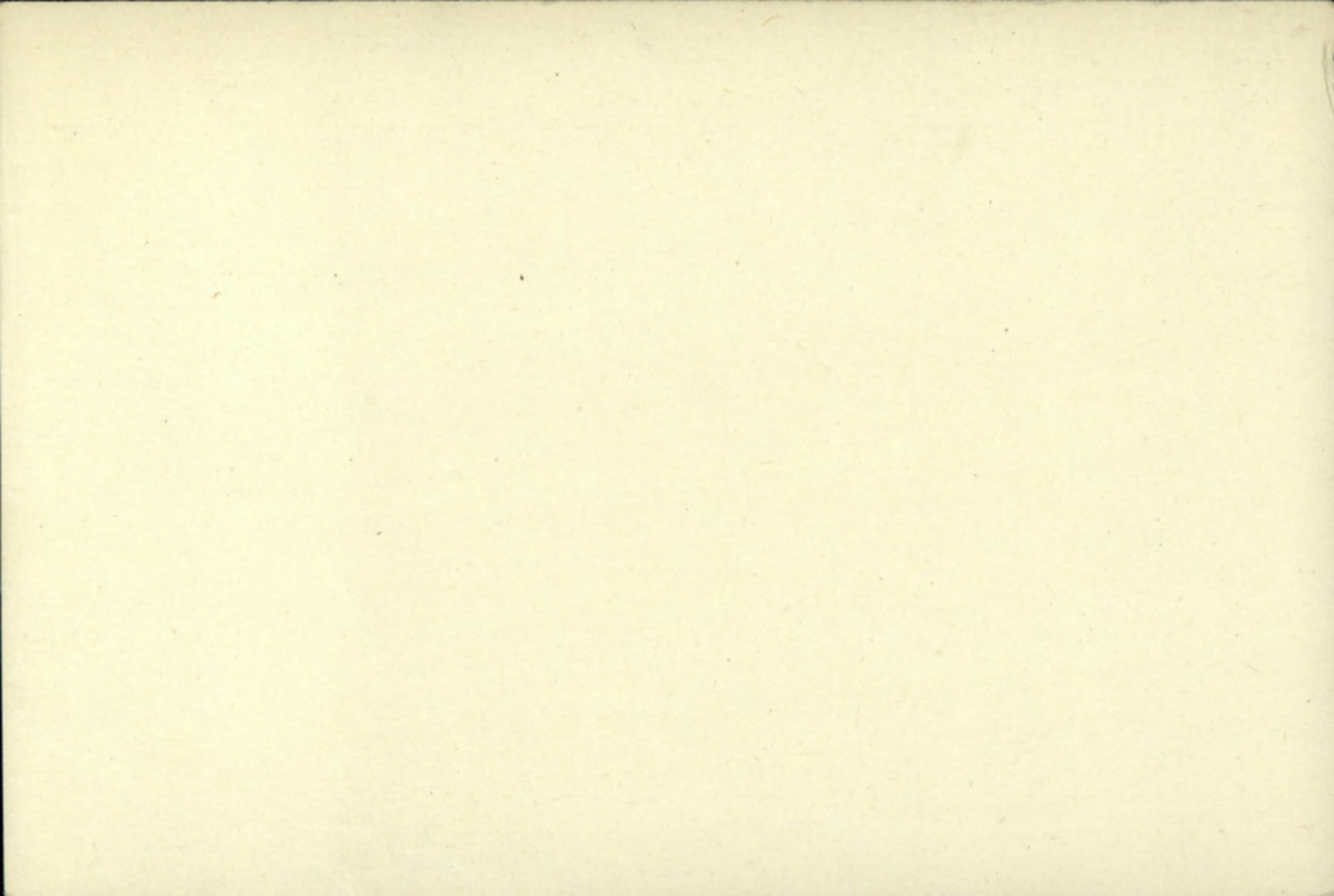
T. O. S.

UNIT

*45th Victoria Regt
(3rd O/S. Contingent)*

M. D. *3*

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1915- Jan 4</i>	<i>1915- Jan 31</i>	<i>✓</i>	<i>To Barrifield 5-7-15</i>	<i>8046 15-7-15</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>July</i>			



REG. NO. 424521 NAME Shatten, George B.
(SURNAME FIRST) 21
38496
4847

RANK Bandsman CORPS 109th Bth 22

AGE 30 SERVICE 6 1/2 years 10 1/2 Eng

NAME OF HOSPITAL General PLACE Kingston

DATE OF ADMISSION 11-2-14 3-2-18

DISEASE 1 Gastritis 2 Bronchitis x Ray Analysis Gastric

DISCHARGE 20-2-18

OPERATION

DISCHARGED TO DUTY Yes

TRANSFERRED TO Elmhurst 5-2-18

DISCHARGED BY MEDICAL BOARD.....

CANADIAN CONVALESCENT HOSPITAL,
AT

A. & D.
CARD.

Bear Wood, Wokingham, Berks.

Regt. No. *724541*

A. & D. No. *4419.*

Rank *Pvt*

Corps *109 BATT*

Name *Chatten P. E.*

Age *29.*

Religion *C of E.*

Service at Home *11/12*

„ „ *Front*

Diagnosis *Abdominal Ulcers*

Admitted

Discharged

Place in Hospital *Aut 7 5.*

M. H. Rec'd

Transferred

Results

SFD 1015

31 OCT 1916

*Military Hosp Pyramchott
Cable Board*

(See Document card)

REMARKS:

at Braunschott 21/8/16

Adm. Braunschott Military Hosp. 28/8/16
thence here

S.S. sunset 16/8/16. No operation
had in 1912

P.O. poor appetite
2 feet

Name *Chatterton* *George Edward: Plie.* Rank *724541* Reg. No.
 Unit *109 Battalion*
 Next of Kin *Canada*

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
<i>1916</i>	<i>808 Mill Brampton</i>	<i>N. Y. D.</i>	<i>10</i>			
<i>8-9-16</i>	<i>Bearwood</i>	<i>Hokingham,</i>	<i>Abdominal</i>	<i>13</i>		
<i>31-10-16</i>	<i>Dis</i>	<i>Alcers</i>	<i>28</i>			

649-6-8540

CARD NO. L

SURNAME. *Chatten*

CHRISTIAN NAMES *George. Edward.*

FOLL.

REGL. No. *724541.*

RANK *Pte. Cpl.*

UNIT *109th.*

Bm.

FORMER CORPS *45th. Regt.*

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL *Chatten, Mrs. Eleanor. Mabel*

RELATIONSHIP TO SOLDIER *Wife.*

ADDRESS *Box 974. Lindsay P.O. Ont.*

COUNTRY OF BIRTH *England. Norwich. Norfolk.*

DATE

PLACE OF ATTESTATION *Lindsay. Ont.*

DATE *Nov. 12th. 1915.*

Sailed from Halifax 23/7/16 per SS Olympic

L. L. 94504. M. & D. 6512.

O/S. 23/7-16 ⁴⁸⁸/₉

P.L. 5-2-17/5/17
M. E. W. 22. 250M. -2-16. H. Q. 1772-39-339.

MARRIED

yes

SINGLE

WIDOWER

TRADE OR CALLING

RELIGION

DESCRIPTION.

APPARENT AGE

YEARS

MONTHS

HEIGHT

FEET

INCHES

CHEST MEASUREMENT

INCHES

EXPANSION

INCHES

COMPLEXION

EYES

HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE

DATE

at L. Deceased May 28, 1960.

401

Number 7245-41 Rank Plt

Surname CHATTEN

Christian Name George Edward

Units 109th Par Can Coy Theatre of War England

Date of Service 31-7-16

Remarks _____

Latest Address Peterboro, Ont.

R

Roll No. A Page 4768

X

99

NAME

Shattam R. G. E.

RANK & No.

A544845

CORPS

59th Batt. C. R. I.

ENLISTMENT, PLACE

DATE

FORMER CORPS

COUNTRY OF BIRTH

NEXT OF KIN

ADDRESS OF NEXT OF KIN

DISCHARGE, PLACE

Kingston

DATE

30-8-15

Med unfit

documents on file

60-6-382.

M. F. W. 22. 50 m.-1-15.

H. Q. 1772 39-839.

occ. Florist,

REMARKS:

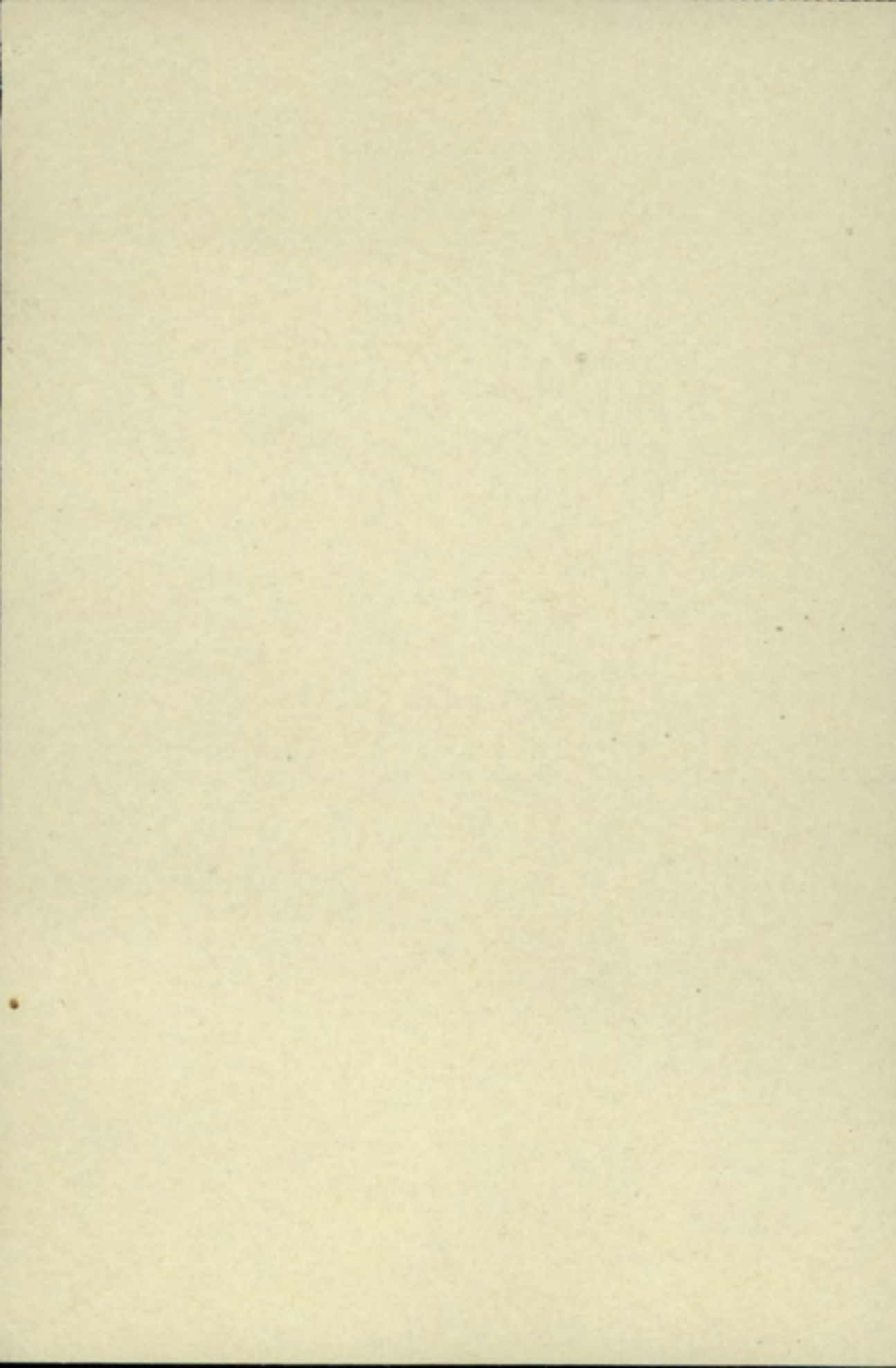


24 - 8 - 16 - Gastritis

31 - 10 - 16 - Ulcer

5 - 2 - 17 - ♀

20 - 2 - 18 - Bronchitis



1812

Prized for Canada per Lt.
"Stanton" Jan. 26, 1917
Amsterdam, N.Y.

No. DATE

NATURE OF CASUALTY

FOLLOWS

CABLE

RANK AND CORPS

Co. 109th Bn.

FOLLOWS

NAME

Watson B.

H. Q. FILE NO. 649-

724541

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
266-1	M. H. C. C. Kingston	22-9-17	Trans. Outpat. on L. Elmhurst
331	M. H. C. C. Kingston	26-11-17	Trans Elmhurst
328	" " " "	23-11-17	" "
4-1	" " " "	3-1-18	" Inpat. Elmhurst
25	" " " "	22-1-18	" Elmhurst

MEDICAL HISTORY OF AN INVALID.

1. Station. Kingston. Ont. 8. General remarks on his:—
 2. Regiment or Corps. 109 Batt'n (a) Conduct.
 3. Regimental No. and Rank. 724541 (b) Habits.
Bandsman.
 4. Name. Geo. E. Chatten. (c) Temperance.
 5. Age last Birthday. 30 (For this purpose the Company defaulter sheets will be obtained from the man's Commanding Officer.)
 6. Enlisted on Oct. 28th 1915.
 at Lindsay, Ont.
 7. Former trade or occupation. Florist. Date. Mar 27th 1917.

(At Station or Hospital where finally disposed of.)
 Station and Hospital) Arrived from }
 Date

If admitted. Index No.	If under treatment.		Disease.	How fully disposed of.	Date of Discharge, &c.
	From	From			
Date					

Summary of Causes of invaliding, or remarks as to remand to Regiment, Station or Depôt.

Date of final Medical Board or decision. }
 Administrative Medical Officer.

9. Service.	Years. Days.	
	PERIODS	
	FROM	TO
<u>109th Batt'n</u>	<u>Oct.-28-15</u>	<u>Date.</u>
<u>59th Batt'n</u>	<u>Jan 5/15</u>	<u>Aug. 15</u>

10. (a) Disease or disability. (1). Gastric ulcer. (2) Bronchitis.
 (b) Date of origin. (1) March 1903. 1st attack (2) 1915.
 (c) Place of origin. (1) Norwich Eng. (2) Canada
 (d) Cause. (1) Unknown, followed an attack (2) Unknown. of scarlet fever.

11. Present condition. (Most Important.) Subject symptoms. He complains of pain and soreness in stomach region, worse after taking food, Occasionally severe pains in back an shoulders. Vomiting about 1/2 hr. after taking food. Vomitus very bitter, occasionally contains blood. Cough in morning until he raises phleg, then stops. Has been unable to take ordinary diet fro years. On examination he is 5ft, 2 1/2 incs. in height, weight 110 lbs, fairly weel nourished. (2) Lungs apparently normal No objective symptoms. No. subjective symptoms now.

12. (a) Is the disability the result of service or climate? Aggravated by service.
 (b) Has it been aggravated by intemperance, vice or misconduct? No

DETAILED MEDICAL HISTORY OF INVALID.

Militia Form B. 227.
 200M. 8-16.
 H. Q. 1772-89-117.

Date	Station	Corps	Regimental No.	Rank	Name	Disability
Hospital or Station transferred to for final disposal.						
Date of final disposal						
How finally disposed of						

The original Report is invariably to accompany the discharge documents of Invalids.

OPINION OF THE MEDICAL BOARD.

13. (a) For purpose of Identification. (Here a full description of wounds, scars, deformities, etc., is to be given.)

Does the Board concur with the preceding report? If not, give differing opinion.

Chicken pox scars left side and back 4 vaccination left arm one on right.

10. Yes.

11. Yes.

(b) In case of wounds, or other injuries, state whether sustained on or off duty. If not received in action was a Court of Inquiry held?

Not applicable

12. Yes.

15. Yes.

(c) In the event of the disability being attributed to exposure on duty, state clearly the nature of such exposure, and whether it was exceptional or otherwise.

Not applicable.

16. Yes.

17. Yes.

14. Treatment.

English Hospital, ELMHURST Con. Home since Feb. 11th 1917.

18. Is he unfit for Military Service. Yes at present.

Recommendations: The Board recommends three months further

Convalescent treatment.

15. If the disabling condition had its origin before enlistment, has it been aggravated by service, and to what extent?

(1) 50%
(2) Not applicable.

16. What is the probable duration of the disability or of each disabling condition, if more than one contributes?

(1) Six months at least.
(2) No disability.

Signatures:—

E Kidd Lt Col. AMC

President.

R S Stevens Capt AMC

R.R. Machregor Capt. AMC

Members.

17. To what extent will it prevent his earning a full livelihood in the general labour market? Please state in fractions. When more than one disabling condition is present, the extent of the disability due to each should be stated.

(1). 75%.
(2). Nil.

Station. Kingston, Ont.

Date. June 7th 1917,

18. State if for discharge on account of unfitness for Service.

No.

Date. June 7th 1917.

B.H. Richardson
Asst. Director of Medical Services.

Approved.

Date.

Director-General of Medical Services.

R.R. Machregor Capt.
Medical Officer by whom the case is brought forward.

THIRD DIVISIONAL AREA
AUG 7 1915
3.D. 44-3-312

MEDICAL HISTORY OF AN INVALID.

- 1.—Station. *Kingston. Ont*
- 2.—Regiment of Corps. *59th Bataillon C.E.F.*
3. Regimental No. and Rank. *A 54.485 private*
- 4.—Name. *George Edward Chatten*
CHATTAN
- 5.—Age last Birthday. *26 yrs.*
- 6.—Enlisted { on *13/9/15*
at *Lindsay.*
- 7.—Former Trade or Occupation. *Tiler.*
- 8.—General remarks on his :—
(a) Conduct.
(b) Habits.
(c) Temperance.
- (For this purpose the Company defaulter sheets will be obtained from the man's Commanding Officer.)
- Date *Aug 5/15.*

(At Station or Hospital where finally disposed of)

Station and Hospital } Arrived from }
Date

Index No.	If under treatment.		Disease.	How finally disposed of.	Date of Discharge, &c.
	From	From			

SUMMARY of Causes of invaliding, or remarks as to remand to Regiment, Station or Depôt.

9.—Service.	Years.	Days.	
		From	To
<i>59th Bataillon C.E.F.</i>	<i>13/9/15</i>		

10.—Disease or Disability. *Chronic Gastritis.*

11.—Date of origin, cause, present condition, and whether the same is the result of service or climate. *Dyspepsia - congenital, - ordinary mal' diet causus dyspepsia, - not result of service.*

Has it been aggravated by intemperance, vice or misconduct?
no.

Date of final Medical Board or decision. }
Administrative Medical Officer.

Militia Form B. 227.
5m.-3-15.
(H. Q. 1772-89-117.)

DETAILED MEDICAL HISTORY OF INVALID

Date	Disability	Name	Regimental No.	Rank	Station	Corps

Hospital or Station transferred to for final disposal. }
Date of final disposal }
How finally disposed of }

The original Report is invariably to accompany the discharge documents of invalids.

12.—In gunshot wounds, or other injuries, state how caused; whether received in action or in Field Service, and at what place, and whether on or off duty. If not received in action, was a Court of Inquiry held?

13.—In the event of the disability being attributed to exposure on duty, state clearly the nature of such exposure, and whether it was exceptional or otherwise.

14.—If aggravated, though not primarily caused by his service as a soldier, explain how it has been so aggravated.

15.—Is the disability permanent? If not, state its probable duration. To what extent will it prevent his earning a full livelihood?

16.—Full particulars of medical treatment of case up to date of invaliding.

Handwritten notes:
7.3.0 ...
A ...
21/8/15
...

Handwritten notes:
yes
not at all
Admitted to Hotel ... 12/7/15
Discharged from " " 31/7/15
Admitted military Hospital 2/8/15

Handwritten notes:
Milit. Ser.
Bismark

17.—If previously proposed for discharge on medical grounds, state the date, the disability, for which recommended for discharge, and the cause of remand of Corps.

18.—State if for discharge on account of unfitness for service.

Handwritten: yes.

Signature: J. J. ...
Medical Officer by whom the case is brought forward

OPINION OF THE MEDICAL BOARD.

(In which it should be stated how far the Board concurs in above Report.)

The board having assembled pursuant to order proceed to examine and report on present physical condition of No. A 54.485 Ptz. George Edward Charley 59th Batin C. Inf., compare with the previous report, find him unfit for service as a result of Chronic Gastritis, dating from infancy, recommend his discharge from the service, since same is not a result of service.

Signatures:—

Signatures:
President.
Members.

Station

Date

Date

Approved.

Date

Signatures:
Assistant Director of Medical Services.
Director of Medical Services.

[OVER]

Members of Board.

Proceedings.

The Board having considered the evidence of the man marginally noted, and the documents submitted, hereto attached, which form part of these Presents, marked

(1) If the disability is due to one of these causes... (2) On active service... (3) Has the disability been caused or aggravated by... (4) Is the disability permanent?... (5) If not permanent, what is the probable minimum duration?... (6) To what extent is his capacity for... (7) Has an operation been performed... (8) To the Board's opinion... (9) For the past year... (10) Included in Canada... (11) Discharge as provided by... (12) Remarks...

Signed at Prior Park, Bath, this _____ day

of _____, 191

President.

Approved

Station _____

Date _____

127140

Army Form B. 179. Canada

NE.

Medical Report on an Invalid.

Station Bearwood, Wokingham, BERKS.

Date 27-10-16.

- 1. Unit. 109th Battalion
- 2. Regimental No. 724541
- 3. Rank Private
- 4. Name Chatten G.E.
- 5. Age last birthday 29 years
- 6. Enlisted on 29th October, 1915
at Lindsay, Ont.
- 7. Former Trade or Occupation Florist

8. Disability.

Duodenal Ulcer

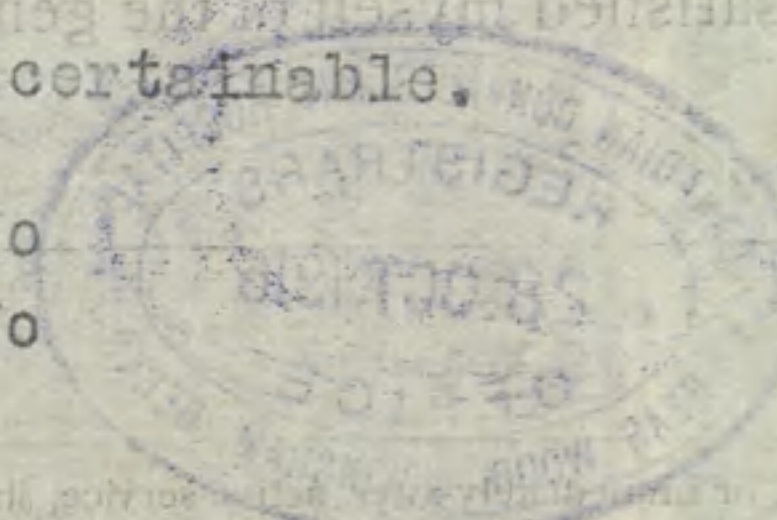
Statement of Case.

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. 1st Aug. 1916.
- 10. Place of origin of disability. Bramshott Camp
- 11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case. Patient began to have vomiting and pain after food as soon as he arrived at Bramshott and had to eat the Army rations. Reported sick about 13th August and was sent to the Sick Detention Hut for 2 weeks. Bramshott M.H. 29th Aug. to 7th Sept. Duodenal ulcer. Operation not indicated. Bearwood 7th September. No improvement. Patient was under treatment for 2 years at the Outdoor Department of Norfolk Hospital about 1903 and 1904. He has also had a cough for two years

- 12. (a) Give your opinion as to the causation of the disability. Not ascertainable.
- (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) ON
(2) ON



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.

Weight should be given in all cases when it is likely to afford evidence of the progress of the disability. Patient complains of poor appetite, vomiting after food. He has pain

immediately after food. There is tenderness over the stomach below the uniform cartilage and about the 11th rib behind on the left side.

His normal weight stripped is 120 lb. His present weight is about 100 lbs.

He has slight chronic bronchitis.

14. If the disability is an injury, was caused

- (a) In the presence of the enemy? Not applicable
- (b) On active service?
- (c) On duty?
- (d) Off duty?

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

- If so—(a) When? Not applicable
- (b) Where?
- (c) Opinion?

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

NO

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

NO

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 base duty? NO
- (c) Invalided to Canada? NO
- (d) Discharge as permanently unfit? YES

W.H. Brothers Capt.
Officer in medical charge of case.

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

Station

Date



Woodhouse Major
Officer in charge of Hospital.

* 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.

Opinion of the Medical Board.

NOTES.—(i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as it is essential that the Members of the Pensions and Claims Board should be in possession of the most reliable information to enable them to decide upon the man's claim to pension.

- (ii.) Expressions such as "may," "might," "probably," &c., should be avoided.
- (iii.) The rates of pensions vary according to whether the disability is attributed to wounds or injuries received or illness contracted (1) in the presence of the enemy, (2) on active service. It is therefore essential when assigning the cause of the disability to differentiate between them (see Articles 641 to 648 of the Canadian Pay and Allowance Regulations).
- (iv.) In answering question 20 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.

20. (a) State whether the disability is the result of injuries received or illness contracted, (1) in the presence of the enemy, (2) on active service.

1. NO 2. YES
Proceedings
Army Rations activating an old condition.

(b) If due to one of these causes, to what specific conditions do the Board attribute it?

21. Has the disability been caused or aggravated by

- (a) Intemperance? NO
- (b) Misconduct?

Yes for Military life.

22. Is the disability permanent?

23. If not permanent, what is its probable minimum duration?

To be stated in months.

Not applicable.

24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present?

quarter for six months due to service.

In defining the extent of his inability to earn a livelihood, estimate it at 1/4, 1/2, 3/4, or total incapacity.

25. If an operation was advised and declined, was the refusal unreasonable?

Not applicable.

26. Do the Board recommend

- (a) Fit for duty? _____
- (b) Fit for base duty? _____
- (c) Invalided to Canada? YES.
- (d) Discharge as permanently unfit?

APPROVED
FOR GENERAL AND FOR G.O.C.
C.A.M.C.

27. Remarks. This man states that he has always been very careful of his diet. Cannot manage Army Rations.

Signatures:—

Hony Capt. President.
Hony Capt. Members.

Station Hastings, Sussex

Date

5 - JAN 1917

Approved.

Station Hastings, Sussex

Date

5 - JAN 1917

D. F. Mc...
Administrative Medical Officer.
for A.D.M.S., Canadians, Brighton Area

FILE NO.
MILITARY HOSPITALS COMM'N
HEAD OFFICE OTTAWA
RECEIVED

FEB 25 9 47 AM '18

REFERRED TO NOTED
REFERRED TO ANS'D

(At Station or Hospital where finally disposed of.)

Station and Hospital } Arrived from }

Date

Index No.	If under treatment.		Disease.	How fully disposed of.	Date of Discharge, &c.
	From	From			
Date					

Summary of Causes of invaliding, or remarks as to remand to Regiment, Station or Depôt.

Date of final Medical Board or decision. }

Administrative Medical Officer.

Hospital or Station transferred to for final disposal. }
Date of final disposal }
How finally disposed of }

The original Report is invariably to accompany the discharge documents of Invalids.

DETAILED MEDICAL HISTORY OF INVALID.

Militia Form B. 227.

200m. 8-16.
H. Q. 1172-89-117.

COPY.

MEDICAL HISTORY OF AN INVALID.

- Station. Kingston.
- Regiment or Corps. 109th Batt.
- Regimental No. and Rank. 724541, Bandsman
- Name. George E. Chatten
- Age last Birthday. 30 (For this purpose the Company defaulter sheets will be obtained from the man's Commanding Officer.)
- Enlisted on Oct. 28/15 at Lindsay, Ont.
- Former trade or occupation. Florist Date. Feby. 9/18
- General remarks on his:—
 - Conduct.
 - Habits.
 - Temperance.

9. Service.	Years.	Days.	PERIODS	
			FROM	To
59th Batt			Jany. 5/15	Aug. 13/15
Re-enlisted 109th Batt.			Oct. 28/15	present.

- (a) Disease or disability. 1. Gastritis. 2. Brochitis.
(b) Date of origin. 1903. Sept. 1916
(c) Place of origin. England.
(d) Cause. 1. Followed attack of scarlet fever. 2. Says followed cold which contracted while Bearwood Convalescent.
- Present condition. (Most Important.) 1. Man complains of pain in epigastrium coming on shortly after taking cold. Is troubled with eructation of gas until food left stomach, also has "waterbrosh" occasionally vomits about 2 hrs. after taking food but has not done so for 5 weeks. Has seen streaks of blood in vomited matter the last occasion being 5 mos. ago. Has had the stomach trouble since 16th yrs. of age, and on account was discharged from 59th Bn. Was re-enlisted in 109th Bn. as Bandsman & went with them to Eng. Has never been in France. 2. While in Eng. contracted cold & since then is troubled with morning cough & expectoration of mucous. There is no other inconvenience. Physical examination of lungs show no evidence of disease. General condition:— man is small & slight is moderately well nourished but weighs only 107 lbs. with his clothing on. Says he weighed 125 lbs. when he enlisted. Has improved very much during past 6 mos. although has not gained in wt. Is not as strong as on enlistment.

- (a) Is the disability the result of service or climate? No.
(b) Has it been aggravated by intemperance, vice or misconduct? No.

M. F. B. 227.
200m. 8-16.
1172-89-117.

OPINION OF THE MEDICAL BOARD.

13. a) For purpose of Identification. (Here a full description of wounds, scars, deformities, etc., is to be given.)

Deep chicken pox scar left side an back.

Does the Board concur with the preceding report? If not, give differing opinion.

10. Yes.

11. "

(b) In case of wounds, or other injuries, state whether sustained on or off duty. If not received in action was a Court of Inquiry held?

Not applicable.

12. "

15. "

(c) In the event of the disability being attributed to exposure on duty, state clearly the nature of such exposure, and whether it was exceptional or otherwise.

Not applicable.

16. "

17. "

14. Treatment.

Hospital in England, convalescent in Canada.

18. Is he unfit for Military Service. Yes.

Recommendations : That he be placed in Category "E". - Further treatment not indicated. Is fit to pass under his own control.

15. If the disabling condition had its origin before enlistment, has it been aggravated by service, and to what extent?

Aggravated $\frac{1}{2}$ during service. Not applicable.

16. What is the probable duration of the disability or of each disabling condition, if more than one contributes?

- 1. Permanent but will improve.
2. Not applicable.

Signatures :-

R.S.Stevens Capt. AMC President.

17. To what extent will it prevent his earning a full livelihood in the general labour market? Please state in fractions. When more than one disabling condition is present, the extent of the disability due to each should be stated.

Permanent but will i prove.
Probably one year.

M.D.Graham Capt. AMC

Station. Kingston, Ont.

Members.

Date. Feby. 9/18

18. State if for discharge on account of unfitness for Service.

Yes.

Date. T.H.Craig Capt. AMC Asst. Director of Medical Services.

Approved.

J.S.Vrooman Capt. AMC
Medical Officer by whom the case is brought forward.

Date. Director-General of Medical Services.

MEDICAL HISTORY OF AN INVALID.

1. Station. Kingston, Ont. 8. General remarks on his:—
 2. Regiment or Corps. 109th Battalion (a) Conduct.
 3. Regimental No. and Rank. #728541 (b) Habits.
Bandsman
 4. Name. Geo. E. Chatten (c) Temperance.
 5. Age last Birthday. 30 years. (For this purpose the Company defaulter sheets will be obtained from the man's Commanding Officer.)
 6. Enlisted on Oct. 28th 1915
 at Lindsay, Ont.
 7. Former trade or occupation. Florist Date. Sept. 17th 1917.

9. Service. Years. Days.

PERIODS		
	FROM	TO
	<u>59th Batt'n disch'gd</u>	<u>Jan. 5th 1915</u>
	<u>109th Battalion</u>	<u>Oct. 28th 1915</u>
		<u>Aug. 15th 1915</u>
		<u>Date.</u>

10. (a) Disease or disability. 1. Gastric Ulcer 2. Bronchitis.
 (b) Date of origin. 1. Mar. 1903, 1st attack 2. 1915 September.
 (c) Place of origin. 1. Norwich, Eng. 2. Canada
 (d) Cause. 1. Unknown, followed an attack of scarlet fever. 2. Unknown.

11. Present condition. (Most Important.)
(To include full description of present disabling condition or conditions, and of the immediate and direct cause of incapacity, i.e., debility, breathlessness on exertion, necessity of treatment by rest, etc.)
Subjective Symptoms. 1. He complains of pain and soreness in stomach region, worse after taking food, distress from distention of gas and belching; vomiting during last three months not as severe as formerly. No blood in vomitus in last three months. 2. He says he raises phlegm in morning and coughs; then is quiet during the day.
Objective Symptoms 1. He cannot take ordinary diet but appears fairly well nourished, normal weight 124 lbs., it is now 106 lbs. This is an old condition and his weight varies. 2. On auscultation AND percussion of lungs; no abnormal condition discovered. Pulse rate 130 standing.

12. (a) Is the disability the result of service or climate? 1. Chronic condition aggravated by service. 2. Service.
 (b) Has it been aggravated by intemperance, vice or misconduct? 1 & 2 No.

(At Station or Hospital where finally disposed of.)

Station and Hospital } Arrived from }

Date

Index No.	If under treatment.		Disease.	How fully disposed of.	Date of Discharge, &c.
	From	From			
Date					

Summary of Causes of invaliding, or remarks as to remand to Regiment, Station or Depôt.

Date of final Medical Board or decision. } Administrative Medical Officer.

DETAILED MEDICAL HISTORY OF INVALID.

Militia Form B. 227.
 200M. 8 6.
 H. Q. 1772-39-117.

Station	Corps	Regimental No.	Rank
Name	Disability	Date	Hospital or Station transferred to for final disposal.
			Date of final disposal
			How finally disposed of

The original Report is invariably to accompany the discharge documents of Invalids.

OPINION OF THE MEDICAL BOARD.

13. (a) For purpose of Identification. (Here a full description of wounds, scars, deformities, etc., is to be given.)

Chicken pox scars left side and back . 4 vaccination marks left arm, one on right.

(b) In case of wounds, or other injuries, state whether sustained on or off duty. If not received in action, was a Court of Inquiry held?

Not Applicable.

(c) In the event of the disability being attributed to exposure on duty, state clearly the nature of such exposure, and whether it was exceptional or otherwise.

Not Applicable.

14. Treatment.

English Hospital.
Elmhurst Conv. Home from Feb. 11/17 to date.

15. If the disabling condition had its origin before enlistment, has it been aggravated by service, and to what extent?

1. Aggravated 50%
2. Not Applicable.

16. What is the probable duration of the disability or of each disabling condition, if more than one contributes?

1. Permanent
2. No disability.

17. To what extent will it prevent his earning a full livelihood in the general labour market? Please state in fractions. When more than one disabling condition is present, the extent of the disability due to each should be stated.

1. 75%
2. Nil

18. State if for discharge on account of unfitness for Service.

No

W.A. Coon
Capt. A.M.C.
Medical Officer by whom the case is brought forward.

Does the Board concur with the preceding report? If not, give differing opinion.

10. Yes

11. Yes

12. Yes

15. Yes

16. Yes

17. Yes

18. Is he unfit for Military Service. Yes

Recommendations :

As this man still complains of pain in pyloric region, and still shows symptoms of gastric ulcer, Board recommends he continue in Category "D" and receive three months' further treatment in Conv. Home.

Signatures :—

W.M. Goppley Capt. A.M.C. President.

R.B. Sherrin Capt. A.M.C.

Station. Barriefield Camp

Date. Sept. 20th 1917.

Date.

Approved.

Date.

W.A. Coon A.M.C.
D/ A.D.M.S. Mil. District No. 3
For A.D.M.S. Mil. District No. 3
Assoc. Director of Medical Services.

Director-General of Medical Services.

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.																			

MONTH PARTICULARS CRR1 CRR2 PARTICULARS DR1 DR2 DR3 DR4 BALANCE

1918
Nov.

Transf'd Pay II Nil.
ON apr 21/19 1/16
Beaumont. 24. 1 22
1 22

Canada 16/1/17
Paid NIL
28.8.11

Sept/19 P.O. Board Rules
 1077 X 624 1/6 39/8

1 22
1 22

Act N. ap/19 1 22
C.N.

List of Discharge Documents.

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

*Only if discharged "Medically unfit."

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

29-1

This space to be for numbers

I

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

Proceedings on Discharge.

No. <i>724541</i>	
Rank <i>Bandsman</i>	
Surname <i>Challen</i>	
Christian Name <i>George Edward</i> <small>Note—The name must agree strictly with that on enlistment unless changed subsequently by authority.</small>	
Corps (Squadron, Battery or Company) <i>109th Battalion</i>	
Date of Discharge <i>20-2-18</i>	
Place of Discharge <i>7 Wellington Park</i>	
1. DESCRIPTION AT THE TIME OF DISCHARGE.	
Age <i>30</i> years <i>11</i> months. Height <i>5</i> feet <i>2 1/2</i> inches. Complexion <i>Fair</i> Eyes <i>Blue</i> Hair <i>Light</i> Trade <i>Flourist</i>	Descriptive Marks
Intended place of residence <i>General Delivery, Peterboro' Ont</i> <small>(To be given as fully as practicable.)</small>	
2. The above-named man is discharged in consequence of <i>Being medically unfit for further service</i>	
<small>N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.</small>	
3. Conduct and character while in the service have been, according to the records, etc. <i>V.G. Very good</i>	
<small>N.B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldiers and the Officer Commanding his Squadron, Battery or Company.</small>	
4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)	

M. F. B. 218.
100M.-1-17.
H. Q. 1772-39-113.

(OVER)

W. S. G. 121 Comp. 8-8-19 K.C.A. 27-12-19

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

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

6. Medals and Decorations

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

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

(Place) Kingston [Signature] Major
O. O. "O" H. O. O.
(Date) 20-2-18 Commanding

8. Certificate to be signed by the Soldier on Discharge

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

(Place) Kingston [Signature] (Signature of Soldier.)
(Date) 19-2-18 [Signature] (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] (Signature of Soldier.)

10. Statement of Service.

Service toward Engagement to.....(the date to which the Record of Service is completed) 3 years 25 days.
Total 3 years 25 days.

11. Confirmation of Discharge.

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

(Place) Kingston [Signature] Major
(Date) 20-2-18 O. O. "O" H. O. O.

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.)

[Signature]