

APR 11 1916

109th OVERSEAS BATTALION, C. E. F.

ATTESTATION PAPER.

No. 724233

ORIGINAL

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

- 1. What is your surname?..... *Bornell*
- 1a. What are your Christian names?..... *Salem*
- 1b. What is your present address?..... *Haliburton*
- 2. In what Town, Township or Parish, and in what Country were you born?..... *Sweed. Ont.*
- 3. What is the name of your next-of-kin?..... *Nelson Bornell*
- 4. What is the address of your next-of-kin?..... *Wilberforce Ont Canada*
- 4a. What is the relationship of your next-of-kin?..... *Father*
- 5. What is the date of your birth?..... *25th December 1894*
- 6. What is your Trade or Calling?..... *Lumberman*
- 7. Are you married?..... *No*
- 8. Are you willing to be vaccinated or re-vaccinated and inoculated?..... *Yes*
- 9. Do you now belong to the Active Militia?..... *No*
- 10. Have you ever served in any Military Force?.. *No*
If so, state particulars of former Service.
- 11. Do you understand the nature and terms of your engagement?..... *Yes*
- 12. Are you willing to be attested to serve in the }
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? } *Yes*

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

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

Date *APR 11 1916* 191 *Salem Bornell* (Signature of Recruit)
Jos Lecky Leuit (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Salem Bornell*, 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 *APR 11 1916* 191 *Salem Bornell* (Signature of Recruit)
Jos Lecky Leuit (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 *Haliburton* this *13th* day of *April* 191 *6*
G. H. G. G. (Signature of Justice)

Description of Salem Cornell on Enlistment.

Apparent Age.....27.....years.....months.
 (To be determined according to the instructions given in the Regulations for Army Medical Services.)

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

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

Height.....5 ft. 10 ins.

Scar on top of Right Foot.

Chest measurement { Girth when fully expanded.....40 1/2 ins.
 Range of expansion.....3 ins.

Complexion.....Dark

Eyes.....Brown

Hair.....Dark Brown

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

CERTIFICATE OF MEDICAL EXAMINATION.

I have examined the above-named Recruit and find that he does not present any of the causes of rejection specified in the Regulations for Army Medical Services.

He can see at the required distance with either eye; his heart and lungs are healthy; he has the free use of his joints and limbs, and he declares that he is not subject to fits of any description.

I consider him*.....fit.....for the Canadian Over-Seas Expeditionary Force.

Date.....APR 11 1916.....191

[Signature].....**Capt.**

Place.....Haliburton, Ont

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.

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

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

Date.....APR 11 1916.....191

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 724233 (Rank) Cpl.

Name (in full) CORNELL, Salem enlisted in
the 109th. Bn.

CANADIAN EXPEDITIONARY FORCE at Haliburton, Ont. on the 11th.
day of April 19 16

HE served in England and France

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

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

Age 25

Marks or Scars

Height 5' 10"

Vacc. scars left arm.

Complexion Dark

Eyes Brown

Hair Black

Salem Cornell.
Signature of Soldier

Robertson
Issuing Officer
O. C. Discharge Sections,
No. 2 District Depot

Date of Discharge May 7th, 1919

Appointment

Signed at Toronto, Ont. this 7th. day of May 19 19

in Military District No. 42

J.S.

File Reference No. No. 2

MAY 7 1919
DISTRICT DEPOT

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

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

No. (Rank) Name

Unit

Address on Discharge

Character and Conduct

Former Occupation

Special Qualifications of Value in Civil Life

Medals and Decorations

Remarks

Signed at this day of 19

Name of Officer

Rank

Appointment

On demobilization the particulars of this certificate will not be completed.

WHITBY MILITARY HOSPITAL

APR 29 1919

724233

This is to certify that the marginally noted man is free from Venereal and other infectious diseases.

Cpt. Cornell S.

Smith Capt

Medical Officer

Whitby Military Hospital, Whitby, Ont.

APR 29 1919

1855

J. W. ...

1855

1855

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

INSTRUCTIONS.

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

(1) Name of Overseas Unit which Soldier joins.....109th OVERSEAS BN., C.E.F.

(2) Regimental Number.....724233.....

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

(4) Place of Birth.....Bridgewater, Ont, Canada.....

(5) Are you married, or not?.....No.....

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

(b) Present Postal Address.....

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

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

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

Also their names and ages.....

(9) Is your Father alive? *yes*
If so, state name and address *Nelson Cornell Wilburforce Out*

(10) Is your Mother alive? *yes*
If so, state name and address *Mary Cornell
Wilburforce Out*

(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? *No*
If so, in what Company? /
Have you made arrangements for payment of your Insurance premium? /
If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.

Date **JUL 11 1916**

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

CERTIFIED PARTICULARS AGREE WITH DOCUMENTS

DISCHARGED

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

OTTAWA, CANADA.

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

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

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

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

1. Christian Names Salem..... 2. Surname Cornell.....
3. Rank Cpl...... 4. Original Unit 109th BN...... 5. Reg. No. 724233.....
6. Address, in full, to which future payments of gratuity are to be forwarded
Wilberforce, Ont......
7. Date of enlistment in the C.E.F.11-4-16.....
8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge NOT APP.....
9. Relationship of such dependent".....
10. Present address, in full, of such dependent ".....
11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier ?".....
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:—
109th BN. 20-7-16 returned 6-3-19.....
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 ? NO.....
14. Were you on active service only in Canada or the United States ? If so, give particulars of units and dates of such serviceNO.....
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 served3 Yrs. 26 Days.....
109th Bn......
16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state DepartmentNO.....
17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.?NO.....

18. Have you had more than one enlistment? If so, give particulars of discharges and re-enlistments, and under what regimental numbers and units. **NO**
19. Have you already received any payment of Post Discharge Pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid **NO**
20. Have you been issued with a War Service Badge? If so, what class? **NO**
21. Have you, during the present war, served in the Imperial Forces? **NO**
22. Are you entitled to receive, or have you received any gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled **NO**
- 23 (a) Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England **NO**
- (b) If so, was such reversion in consequence of misconduct or inefficiency?
24. Are you now serving in the C.E.F. **No** If not, give:—(a) Date of discharge
 **May 7th. 1919.** (b) Reason for discharge
 **Medically Unfit.**
25. Are you at present a member of and in receipt of pay and allowances from any Canadian naval or land forces? If so, give unit **NO**
26. Did you at any time serve at the front in an actual theatre of war? If so, give particulars of one unit which you served at the front, and dates of such service with that unit
 **Yes 4th D.H.Q. 15-11-17 till 3-11-18**
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: *J. Cornell*

Place of Residence: **Wilberforce Ont.**

Declared before me at: **Park School Bars. Toronto**

This **1** day of **May** 19**19**

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

aw Cranmer

POST DISCHARGE PAY.

Date paid	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
.....
.....
.....

Certified Correct.

District Paymaster.

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS DISTRICT

NAME OF SOLDIER *Cornell S*
REGIMENT *109th Batta*

No. *724233*

RANK



INSTRUCTIONS

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

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

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

Date	Amalgam	Temporary Filling (a) G.P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhea	Synthetic Porcelain	Extracting	DENTURES			Gold Clasp	Gold Filling	CROWNS		Bridge Work	OPERATOR	Military District	REMARKS
											U	L	P			Gold	Porcelain				
Condition on first Examination																					
																					<i>No previous history</i>
																					<i>Dentally fit</i>
																					<i>H. J. Aulgin - capt</i>

Disch
Exam
Whitby
capt 29-19



DUPLICATE. D.
724233.

MEDICAL HISTORY SHEET **DUPLICATE**

Surname Cornell Christian Name Salem

Examined { on 11 day of April 1916.
at Haliburton

Approved by J McCulloch

Birthplace { City or Town Sweed
County Hastings

Rank _____ M.O.

Apparent age 27 years

Trade or occupation Sumberman

Height 5 Feet 10 Inches

Weight 170 Lbs.

Chest measurement { Minimum 37 1/2 inches

{ Maximum expansion 40 1/2 inches

Physical development Good

Small-Pox Marks None

Vaccination Marks { A r m Right None Left One
Number One

When Vaccinated last April 11th 1914

(a) Marks indicating congenital peculiarities or previous disease None

(b) Slight defects but not sufficient to cause rejection

Slight Flat Foot

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

Date.	Result.	VACCINATIONS.
<u>11-4-16</u>	<u>Good</u>	<u>J McCulloch</u> M.O.
		M.O.
		M.O.

Date.	Result.	ANTI-TYPHOID INOCULATIONS, ETC.
<u>26-4-16</u>	<u>Good</u>	<u>J McCulloch</u> M.O.
<u>3-5-16</u>	<u>Good</u>	<u>J McCulloch</u> M.O.
<u>9-5-16</u>	<u>Good</u>	<u>J McCulloch</u> M.O.

Enlisted on 11 day of April 1916 at Haliburton

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>109th Bn C.E.F.</u>	<u>724233</u>		<u>11-4-16</u>
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>Wiley</u>	<u>29-1-19</u>	<u>Tub</u>	<u>Alpha Bone</u> <u>Cap</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.

Surname Conell Christian Name Salmon

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				
2092		3	4	1925	4	19		30	Large exostosis in parietal oss of right Rt. Malarbone. Foot was injured 8 years ago - Has no lump for 2 years. Exostosis removed off 7.4.19. Wounds healed. Thompson for carelessness.	A. J. Smith M.D.	

6072

ORIGINAL SHEET. ORIGINAL

Surname: Cornell Christian Name Salun

Examined { on 11 day of April 1916.
 at Haliburton
 Birthplace { City or Town Suedd
 County Hastings

Approved by J McCulloch
 Rank _____ M.O. _____

Apparent age 27 years
 Trade or occupation Sumbaman
 Height 5 Feet 10 Inches.
 Weight 170 Lbs.
 Chest measurement { Minimum 37 1/2 inches.
 Maximum expansion 40 1/2 inches.
 Physical development Good
 Small-Pox Marks None

Date.	Fit or Unfit.	EXAMINED FOR RE-ENGAGEMENT.	M.O.
<u>15/12/18</u>	<u>A</u>	<u>Wiley Capt.</u>	<u>14 NOV 1918</u>

Vaccination Marks { Arm Right None Left On
 Number On

Date.	Result.	VACCINATIONS.	M.O.
<u>11.4.16</u>	<u>Good</u>	<u>J McCulloch</u>	

When Vaccinated last April 11th 1916
 (a) Marks indicating congenital peculiarities or previous disease None

(b) Slight defects but not sufficient to cause rejection
Slight Flat Foot

Date.	Result.	ANTI-TYPHOID INOCULATIONS, ETC.	M.O.
<u>26.4.16</u>	<u>Good</u>	<u>J McCulloch</u>	
<u>3.5.16</u>	<u>Good</u>	<u>J McCulloch</u>	
<u>9.5.16</u>	<u>Good</u>	<u>J McCulloch</u>	

Enlisted on 11 day of April 1916 at Haliburton

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>109th Am C.E.F.</u>	<u>724233</u>		<u>11.4.16</u>
Transferred to	<u>124th OVERSEAS BATTALION C.E.F.</u> <u>H.Q. Sub Staff Wiley</u> <u>H.Q. 124</u>	<u>7/12/16</u>		<u>2.1.17</u>

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>Wiley</u>	<u>29.1.17</u>	<u>nil</u>	<u>A. C. Wiley</u>
<u>Whitby Military Hospital</u>	<u>APR 29 1917</u>	<u>nil</u>	<u>DISCHARGE</u> <u>Category 1</u> <u>for PRESIDENT</u> <u>STANDING MEDICAL BOARD</u>

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

CANADIAN

Medical Examination report for the purpose of a Soldier in the Army

CORNWELL
1893
12-12-1893

SALEM
H. H. H. H.
James H. H. H.
John H. H. H.

[Faint, illegible handwritten notes and markings]

1012
1013
1014
1015
1016
1017
1018
1019
1020

C. W. Lewis

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
<i>924733</i>	<i>109th Bn.</i>	<i>ajpl</i>	<i>Cornell</i>	<i>S</i>
Year	Unit.		Age.	Service.
<i>1918</i>	<i>att. 4th Div: H.Q. Sub Staff</i>	<i>C. E. Y.</i>	<i>24</i>	<i>3 yrs.</i>

Station and Date.	Disease
<i>Southport. 7.11.18.</i>	<i>Influenza.</i>
<i>12.12.18</i>	<i>Recovered.</i>

H. Rawstone, Res. Surg. Off.

ST JOHN HOSPITAL,
THE GRANGE, SOUTHPORT.

INOCULATION

Mother

Wilberforce.

Ontario.

Canada

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

Station
and Date.

Station
and Date.

152400

EXAMINATION

BY

STANDING MEDICAL BOARD, BRAMSHOTT.

2-4-1917

No. 724283 Rank Capt Name Cornell G.S.
 Local Unit Princess Louise Hosp Overseas Unit _____ Age 23

Examination held in Bramshott area.

DISABILITY. (Recent/absence of foot)

Overseas—Local.
(scratch one out)

PRESENT CONDITION.

*Requires short period ~~concessions~~ for
 observation - prior to being finally classified -
 will make his*

Board recommends :

1. Fit for Duty. Crit *(for one month's observation)*
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. Longdale Pres.
D. Dickson
H. [unclear]

Approved.

Bramshott 2-4-1917 Geo Russell Capt. C.A.M.C.
 for A.D.M.S. and G.O.C.,
 Canadian Troops, Bramshott.

153400

EXAMINATION BY STANDING MEDICAL BOARD, BRAMSHOTT

101

No. Name Rank

Local Unit Overseas Unit Age

Examination held in Bramshott area.

DISABILITY

Overseas—Local
(scrub one-out)

PRESENT CONDITION

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
5. Discharge

Signatures

Pres

Members

Approved

Bramshott

191

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
1382	724233	Cpl.	Counce	C. S.
Year	Unit.	Age.	Service.	
1917	a. P. M. Counce	23	12/12	
Station and Date.	Disease <u>abscess foot</u>			
Bramshott 24-3-17	<p><u>Previous history</u> - right foot was cut with axie about 2 yrs ago. Since then has not bothered till this winter. Shortly after Xmas began to discharge about the old cut. Has healed over and ^{dis}recharged several times. Has had many</p>			
	<p><u>Present condition</u> - abscess over anterior instep right foot. Very blue and inflamed.</p>			
	<p><u>Treatment</u> - Incision & dress</p>			
2-4-17	<p>Well recovered Transfer to. Epsom Discharge to line</p>			
	<p>Cabulow capt.</p>			

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

EXAMINATION BY STANDING MEDICAL BOARD, BRAMSHOTT.

No. 724283 Rank Capt Name Cornell G.S ²⁻⁴⁻ 1917
Local Unit Princess Louise Hosp Overseas Unit _____ Age 23

Examination held in Bramshott area.

DISABILITY (Recent) absence of foot.

Overseas—Local.
(scratch one out)

PRESENT CONDITION.

*Requires short period ~~conclusion~~ for
observation - from to being finally classified -
will make it*

Board recommends:

1. Fit for Duty. Crit (for one month observation)
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. Longdale Pres.
G. A. Dickson Major
H. H. Jackson Capt
J. J. J.

Approved.

Bramshott 2-4- 1917 Geo Russell Capt. 2A M C.
for A.D.M.S. and G.O.C.,
Canadian Troops, Bramshott.

EXAMINATION BY STANDING MEDICAL BOARD, BRAMSHOTT.

1917

No. Rank Name

Local Unit Overseas Unit

Examination held in Bramshott area.

DISABILITY

Overseas—Local
(scribble one out)

PRESENT CONDITION

W. O. D. P.

Board recommendations

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

Signature

Press

Members

Approved

Bramshott

1917

Fyle No.

PRECIS OF MEDICAL HISTORY OF PENSIONER.

THE BOARD OF PENSION COMMISSIONERS FOR CANADA.

REVIEW.

OTTAWA, Canada.

Date

Regimental No.

Rank

Name

Unit

Date of enlistment

Apparent Age

On

Marks of Identification:

Height

Colour of Eyes

Colour of Hair

Complexion

Build

Weight

CONTINUED.

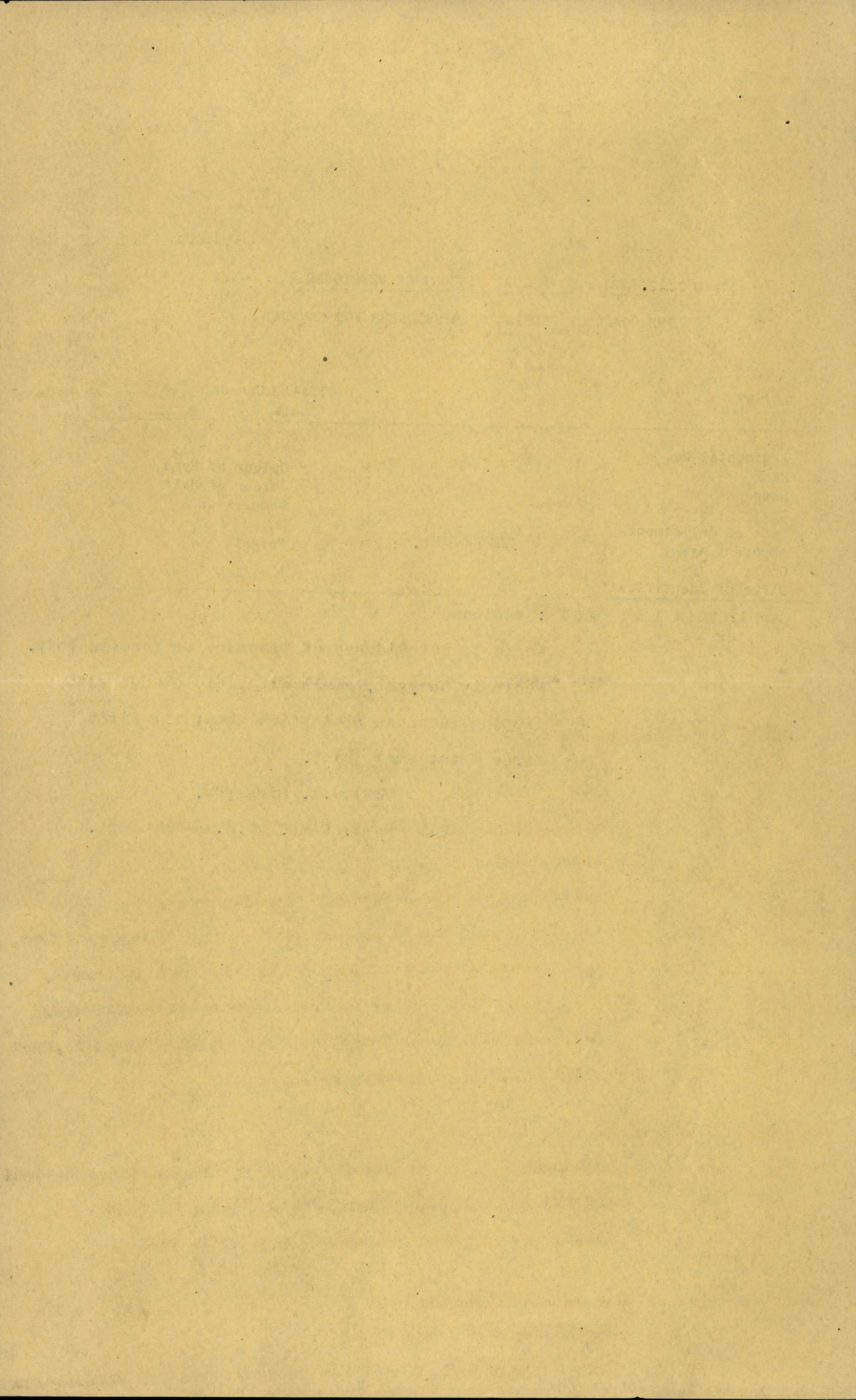
April 10th 1919 X-RAY :Continued :

There is no evidence of fracture or foreign body.

There is however, small arthritic change with
lipping and bone production about the first
tarse metatarsal joint.

(SGP) G.E. Richards.

Capt. CMC. C.C. X-Ray Dept.



PRECIS OF MEDICAL HISTORY OF PENSIONER.

THE BOARD OF PENSION COMMISSIONERS FOR CANADA.

REVIEW.

OTTAWA, Canada.

Date July 16 1919.

Regimental No.		Height	
Rank	724233	Colour of Eyes	5'10"
Name	Cpl.	Colour of Hair	Brown
Unit	Salem Corneli.	Complexion	Black
Date of enlistment	109th Bn.	Build	Dark
Apparent Age	11-4-16	Weight	170 lbs.
On	25		
Marks of Identification:	25-12-18		

1 Vacc. left. 1 Scar rt. foot. 1 right hip.

Discharged May 7th 1919 - (Extract from B.P.C. Form 865)

April 29th 1919 M.F.B. 227

Record of Service Section 6

Canada from 11-4-16 - 20-7-16
 England " 26-7-16 - 15-11-17
 France " 15-11-17 - 10-11-18
 Eng. & Can. 10-11-18 - 29-4-19

April 11th 1916 M.F.B. 313

Section (b) Slight flat feet.
 Weight 170 lbs.

Disease & Wounds : Witley 29-1-19 Nil. "A"

Whitby Mil. Hosp. Apr. 29th/19 Nil.

Bramshott 24-3-17 to 10-4-17 Abscess Foot.

Conv. Hosp. Woodcote Park. 10-4-17 to 19-4-17 Abscess Foot.

St. Johns Hosp. Southport 7-11-18 to 13-12-18 Influenza.

M.C.H. Epsom 13-12-18 to 8-1-19 Influenza Convalescent.

St. Andrews Mil. Hosp. 27-3-19 to 2-4-19 Excostosis Rt. foot

Whitby Mil. Hosp. 22-4-19 Nil.

April 2nd 1917 A.F.B. 178 Bramshott.

Bramshott 24-3-17 to 3-4-17 Abscess Foot. Abscess incised
 and drained - Good recovery. Transferred to Epsom.

M.C.H. Epsom 10-4-17 Abscess Foot. Recovered.

April 2nd 1917 D.M.D. 1348 Bramshott.

B.P.C. Form 800 Mult.
 50M-7-19.

Disability - Abscess of foot.

Present Condition : Requires short period for observation

Continued.

Present Condition Continued : Prior to to being finally classified. Will make A-2. Recommended C-3 for one month's observation.

April 29th 1919 M.F.B. 227

Section 4 (b) Weight 170 Lbs (See description of Pensioner)

Section 8 Disability : Nil.

Section 9 Present Condition : Objective - There is a slight elevation, hard over proximal end of 1st. metatarsal bone of right foot. swelling is 1" wide and 1½" long and 1/6" high skin over it soft and not tender. There is a scar (surgical) 1½" long over its centre where exostosis was removed. There is no pain or tenderness on pressure over elevation.

Subjective - Nil.

Section 9 (b) All other systems normal.

Section 10 History : In Sept. 1914 he was hit on top of foot with an axe causing cut down to bone. Cut was 1½" long and required 5 stitches. Never had any trouble till Abscess formed in March 1917. Abscess was opened, drained and healed.

When abscess was healed he noticed lump on bone which gradually enlarged for a few months, but remained stationary.

On April 2nd 1919. exostosis was removed from bone at T.G.Hosp.

Section 10 (b) Spanish Influenza in Nov. 1918 No disability.

Inflammatory Rheumatism in France Sept. 1918 No disability.

Broken Left arm in June 1917 - No disability.

Section 12 : No.

Section 18 : The Beard Concurs.

Section 20 : Does not require treatment.

Section 21 : Recommended that he be placed in Category C-1.

March 31st 1919 Examination :

Has an exostosis over the base of first metatarsal. Advise admission to hospital for removal.

(SGD) J.R. Smith. Lieut. AMC.

April 10th 1919 X-RAY REPORT:

Plates were made of the right foot antero-posterior and lateral
continued.

10
EXAMINATION

BY

STANDING MEDICAL BOARD, BRAMSHOTT.

No. 724233 Rank Corp Name Cornell C.S. 2-4-1917

Local Unit Poram line Hoops Overseas Unit _____ Age 23

Examination held in Bramshott area.

DISABILITY Recent/absence of foot.

Overseas—Local.
(scratch one out)

PRESENT CONDITION.

*Requires short period. ~~conclusion~~ for
observation. prior to being finally classified—
will make it if*

Board recommends :

1. Fit for Duty. *Citi (for one month's observation)*
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. Cooper Cole Pres.*
L. A. Dickson Major
H. H. Jackson Capt

Approved.

Bramshott 2-4 1917 *John Russell Capt, C.A.M.E.*
for A.D.M.S. and G.O.C.,
Canadian Troops, Bramshott.

EXAMINATION BY STANDING MEDICAL BOARD, BRAMSHOTT

No. 101 Name [Faint] Rank [Faint]
 Local Unit [Faint] Overseas Unit [Faint] Age [Faint]

Examination held in Bramshott area

DISABILITY [Faint]

Overseas—Local
(attach one out)

PRESENT CONDITION

[Faint handwritten notes]
[Faint handwritten notes]
[Faint handwritten notes]

Board recommendations

1. Fit for Duty

2. Fit for duty after

Fit for Base duty

Fit for Permanent Base Duty

3. Discharge

Signatures

[Faint signature]
[Faint signature]
 Pres

Members

Approved

Bramshott

101

CASE HISTORY SHEET



Whitby Military Hospital. Station.

No. 724233 Rank Cpl. Name Cornell S. Age 25

Unit..... Completed years of service } Where and how long } 3/12 14/12 1/12

Date of admission 22-4-19 Date of discharge MAY - 1 1919

Diagnosis Exostosis of foot Place of origin.....

CONDITION ON ADMISSION AND PROGRESS OF CASE 21-4-19 J.A.H.

APR 24 1919

In March 1917 developed an abscess on top of foot. It was opened & drained & healed up. After swelling went down he had a swelling on lower and it pained him on pressure. On 4/19 the exostosis was removed at 21st. The scar is now healed up. The experience is pain or discomfort. I have board now.

WHITBY MILITARY HOSPITAL APR 29 1919

227 Medical Board

We recommend that he be placed in Cat C -
"Having been found medically unfit for service."

WHITBY MILITARY HOSPITAL MAY - 1 1919

Discharged to #2 99 f/w
Disposal

FAMILY HISTORY

(Tuberculosis, mental or nervous diseases.)

TREATMENT

(Especially any specific or special form.)

CONDITION ON DISCHARGE

(and disposal made of case.)

Date..... Medical Officer i/c case.

217649



MAY - 1 1918

MAY 1 1918

WHITBY MILITARY HOSPITAL APR 29 1918

We received your letter of the 24th inst. regarding the matter of the 1st class medical board for you.

WHITBY MILITARY HOSPITAL MAY 1 - 1 1918

CASE HISTORY SHEET.

No. 724233 Rank Cpl. Name Salem Cornell Age 26
 Unit 2 S.S. Completed years of service France - 1 1/2
England - 1 8/12 yr.
Canada - 4/12 yr.
 Date of admission April 2 9 Date of discharge 4/12 yr.
 Diagnosis Exostosis Right Foot - Place of origin England

CONDITION ON ADMISSION AND PROGRESS OF CASE.

Complaint - Pain on top of foot caused by a projection on the top of the foot & by pressure of boot on this projection.

Duration - 2 yrs.

Annot - Started with an abscess which was opened. When it had cleared up this hard projection was left.

History - In August 1914 his top of foot with sharp edge of axe causing cut down to bone. Cut was 1 1/2" long & required 5 sutures. There had any trouble till abscess formed just above the old scar. The abscess was opened & considerable pus drained. Healed in one month. When abscess was healed he noticed lump on bone which has gradually enlarged ~~there~~ for a few months but has been stationary since.

Exams. shows a hard projection from the proximal end of 1st metatarsal of right foot. This swelling is 1/2 inch wide & 1/2 inch high. The skin over it is ~~red~~ ^{red} & stiffened. The swelling is attached to the bone & seems to be bony in character.

FAMILY HISTORY

(Tuberculosis, mental or nervous diseases.)

TREATMENT

(Especially any specific or special form.)

Other systems - normal.

Oper. - 7-4-19 - Incision over growth, oval removing skin over growth. Bone stripped & periosteal elevator. The exostosis removed & chisel. The wound closed & silkworm gut. Kath's dressing.

CONDITION ON DISCHARGE

(and disposal made of case.)

15-4-19 - Wound clean - sutures removed.

18-4-19 - Result good - All toes fully movable. Transfer to
Whitby for convalescence.

Medical Officer i/c case.

Thos Mullen Major

18-11-11 - Mrs. E. J. ...
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18-11-11 - Mrs. E. J. ...

Mark

CASE HISTORY SHEET.

S. St Andrews Hospital. Toronto Station.

No. 424233 Rank. lpl Name. Corneil Salem Age. 25

Unit. 268 Completed years of service } 6 $\frac{3}{12}$ 8 $\frac{20}{12}$ 7 $\frac{13}{12}$
Where and how long

Date of admission. 2-7-3-19 Date of discharge. 2-4-19

Diagnosis. Exostosis Rt Foot. Place of origin. France

CONDITION ON ADMISSION AND PROGRESS OF CASE

Present Condition - Patient has a tumour on the dorsum of the right foot - not tender - it is firm - not adherent to the skin but adherent to the underlying metatarsal. Patient has been recommended for operation.

FAMILY HISTORY

(Tuberculosis, mental or nervous diseases.)

TREATMENT

(Especially any specific or special form.)

CONDITION ON DISCHARGE

(and disposal made of case.)

Other systems are normal
 Plans to get for operation

Date. 2-4-19

J. McKewen Capt.
 Medical Officer i/c case.

CASE HISTORY SHEET

112433
188

[Faint, illegible handwriting]

[Faint, illegible handwriting]

[Faint, illegible handwriting]

CLINICAL CHART.

Corps 2 DD

Hospital Station St. Andrew

No. 7 24 233 Rank and Name Cpl. Connel

Age 25 Service 6 1/2 E 2 1/2 2 1/2

Disease Erysipelas Foot Date of Admission 27.3.19 Date of Discharge 2.4.19 Result Unimproved Serial No. A. & D. Book 13274

Dates of Observation	27		28		29		30																																	
	TIME		TIME		TIME		TIME		TIME		TIME		TIME		TIME		TIME		TIME		TIME		TIME		TIME		TIME		TIME		TIME		TIME		TIME		TIME			
Days of Disease	1		2		3		4																																	
Temperature Fahrenheit	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.				
107°	.8			
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106°	.8			
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	.2			
	.6			
	.4			
	.2			
Pulse per Minute	74	72																																						
Respirations per Minute	18	18																																						
Motions																																								

Signature J. M. Brown Capt. In charge of case.

CLINICAL CHART

724233 Cpl - Cornell - S.

(A) Report Date.	(B) Authority of Part II. of Orders	(C) Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I, 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	(D) Place of casualty	(E) Date of promotion, reduction, reversion, casualty, &c.	(F) Remarks, and initials and rank of an officer
------------------------	---	--	--------------------------	---	---

11.2.19 ~~1919~~ D034 Lt S. S. Noble Witley 10.2.19
Phyl M.D. 2

At C.C.C. Kinmel Park for
return to Canada. Part II Orders
No. 34. Copies to be attached
C.C.C. Kinmel Park of embarking
for Canada. Part II Order
No. 34
for Commanding 3 Wing,
Kinmel Park Camp,

J. Pearce
.....LIEUT.
OFFICER i/o RECORDS,

SS → CASSANDRA
EMBARKED 22-2-19
DISEMBARKED . 3-19
J. J. Allen
for Capt. O. G. No. 13 T.A.C.S.

FEB 22 1919 O. S. T. O. S. No. 2 DISTRICT DEPOT, TORONTO 1919 PART II D. O. 71

Disch May 7th. 1919. #2D.D.Pt. 11#125.

William Robertson
O. C. Discharge Sections,
No. 2 District Depot

W. C. C. C. C.
Lieut.
For O. G. No. 2 District Dep.

Nothing to be written in this margin.

SERVICE AND CASUALTY FORM (Part I).

Army Form B, 103—I.
Part I.

(1)*Substantive rank *Acting rank *[To be entered in pencil to facilitate alteration.] (4) Surname (5) Christian Names (6) Army Form, number of, Attestation } Form or Record of Service paper } (7) Whether of British or of Alien origin [vide A.C.I. 578 of 1918] (8) Date of birth as stated on enlistment (9) (a)	(2) Regiment or Corps	(3) Regt. No.
--	-----------------------	---------------

(10) Enlistment (b)	(11) Engagement (c)
(12) Service reckons from (date)	(13) Special conditions (if any) of enlistment (d)
(14) Any subsequent variations (if any) } of conditions of service }	
(Authority)	(date)

Initials and Rank of
an Officer.

(15) Category	Date	Medical Authority	Initials and Rank of an Officer	(16) (Record of Occupation in Civil life (vide Army Order 93 of 1917)
				Industrial Group No. Trade or Calling Married or Single Particulars of Trade Test Occupation Cards despatched on (date) Second Occupation Card despatched on (date)

(17) Next of Kin			
(18) Demobilizer (f)	(Place)		{ Signature of { Posting Officer
(19) Pivotal-man (f)	(Date)		
(20) Qualifications (g)	or (21) Corps trade and rate		
(22) Extended {		(23) Re-engaged {	
(24) Miscellaneous entries:—			

NOTES.—[a] Here enter particulars of any subsequent claim as to actual age after verification by birth certificate [vide A.C.I. 470 of 1918. [b] Whether direct or voluntary enlistment or called up under the Military Service Acts. [c] Whether for specified term of years or for duration of the war. [d] Whether "for Home Service only," or "not to be transferred without the soldier's consent, &c. [e] If to be retained on Home Service, period, if specified, to be stated, also authority, and on what grounds. [f] Required for demobilization purposes. [g] Signaller, Shoeing-smith, &c.

Army Form B. 103 (II.) to be gummed on here if required.

Nothing to be written in this margin.

W1889—PP 1150 IM 5/18 G.W.P.Co.(3490)

CANADIAN EXPEDITIONARY FORCE

TEMPORARY DISCHARGE CERTIFICATE

This is to Certify that No. 724233 Rank Cpl.

Name (in full) Cornell, Salem.

Enlisted in 109th Bn.

CANADIAN EXPEDITIONARY FORCE on the 11th.

day of April 1916

HE SERVED IN England and France.

and is hereby discharged from the Service by reason of

Medically Unfit.

and is free to accept CIVILIAN EMPLOYMENT.

HIS DESCRIPTION ON THE DATE BELOW IS AS FOLLOWS

Age 25Yrs.

Height 5'10"

Complexion Dark.

Eyes Brown.

Hair Black.

Marks or Scars

Vacc Scar on left Arm.

Former Occupation Lumberman.

Signature of Soldier S. Cornell

Issuing Officer [Signature]

Date of Discharge May 7th. 1919.

Rank O. & Discharge Sections, No. 2 District Depot

Appointment

Signed at Toronto. this 7th. day of May 1919

Military District No. 2 Reference No.

No. 2
MAY 7 - 1919
DISTRICT DEPOT

T.T.A.

War Service Badge.

Class A

No. 286528 issued 7-5-19.

EXPEDITIONARY FORCE
TEMPORARY DISCHARGE CERTIFICATE

HIS DESCRIPTION IN THE BELOW IS AS FOLLOWS

Name of Soldier

Rank

Appointment

Days

Place of Discharge

Remarks

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

2

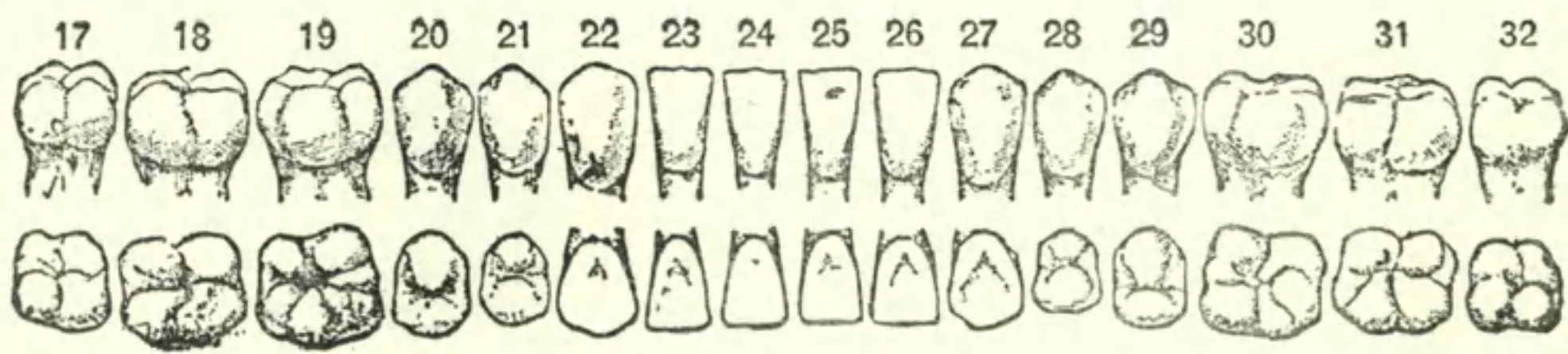
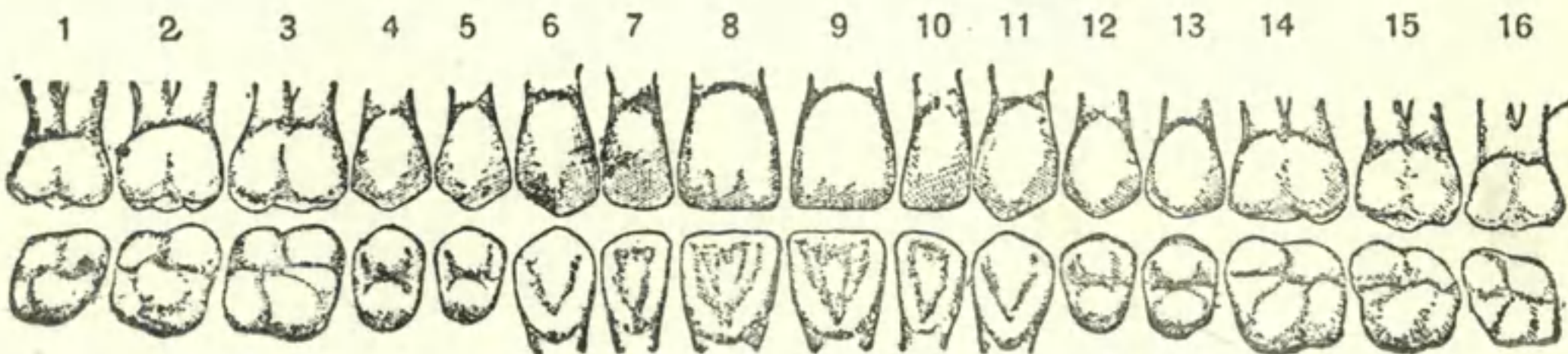
DIRECTIONS TO DENTAL OFFICERS

NAME OF SOLDIER (Block Letters) CORNELL S.D.

REGIMENT Gen Reg RANK Pte No. 410063

Date of Examination in England _____ Date of Examination in France _____

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



PRESENT DENTAL REQUIREMENTS

1. FILLINGS _____

2. EXTRACTIONS _____

3. CROWNS _____

4. DENTURES
- (a) Full Upper
 - (b) Part Upper
 - (c) Full Lower
 - (d) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT? no

HAS HE EVER RECEIVED DENTAL TREATMENT? (Reply by "Yes" where applicable to any or all of a, b or c.)

- (a) In Canada
- (b) In England yes
- (c) In France "

Signature of Dental Officer [Handwritten Signature]

- () 1st class
- () 2nd class
- () 3rd class

1st class

- () 1st class
- () 2nd class
- () 3rd class

2nd class

3rd class

4th class

5th class

6th class

7th class

8th class

9th class

Replacing Original

Casualty Form - Active Service.

Regiment or Corps 109th Batt'n

Rank Pte Surname Cornell Christian Name Salem

Religion Age on Enlistment..... years months

Enlisted (a) 11-4-16 Terms of Service (a) 9 yll as Service reckons from (a) 11-4-16

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

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

Occupation Signature of Officer.

Date	Report From whom received	Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
			Embarked ...		
			Disembarked...	<u>England 31-7-16</u>	
<u>8-12-16</u>	<u>109th Bn.</u>	<u>S.O.S. to 124th Bn.</u>	<u>Witley</u>	<u>8-12-16</u>	<u>Pte - 343</u>
<u>11-12-16</u>	<u>124th "</u>	<u>T.O.S. from 109th Bn.</u>	"	"	" " 267
<u>5-1-17</u>	<u>H.Q. C. T.O.</u>	<u>T.O.S. for duty with M.P.</u>	<u>B'shott</u>	<u>2-1-17</u>	<u>Pte - 5726</u>
<u>27-5-17</u>	<u>H.Q. Cans.</u>	<u>To be 1. Corp.</u>	"	<u>27-3-17</u>	" " 147
<u>16-12-17</u>	"	<u>S.O.S. / seas. to Police</u>	"	<u>14-12-17</u>	" " 295
<u>31-12-17</u>	<u>M.P. C.C.</u>	<u>T.O.S. on arrival in France</u>	<u>Field</u>	<u>15-12-17</u>	" " 19
<u>18.5.18.</u>	<u>Mrs. Brandst</u>	<u>Reverts to Private on proc. O/seas.</u>		<u>14-12-17</u>	<u>D.O.50, File KX191770</u>

CERTIFIED CORRECT.
 19 FEB. 1918
 CAM. RECORDS, LONDON

J. Lewis LIEUT.
 FOR LT. COL: I/C RECORDS, C.O.M.F.

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
 (b) Signaller, Shoeing-Smiths, &c. W. 11814-M1188 1000m 1/17 (27227) SP & Co, Ltd. Forms B./103/4 E./354. I.P.T.O.

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
Date	From whom received				
8-12-17.	Adcanef.	Having arrived in France as reinforcement is T.O.S. MILITARY POLICE. (CAN. CORPS) with effect from.		15-12-17	AUTHY=(Adcanef. Ldn Tel. CR 769 d/8-12-17. CGBD Nom.Roll dated 15-12-17. Ref. CanSec 15-12-17. R & R 422). P 11 Ord. 19 d/31-12-17
21.1.18	Qc. B.G. B.D.	To airm. Etapes.		21.1.18	N.R. (914).
6.2.18.	"	Arrived B.G. B. Depot	Died.	6.2.18.	" (644).
25.3.18	"	Left CIBD for Cdn Corps HQ		25.3.18	NR. (R & R 1084)
27.3.18.	A.P.M. Cdu lps.	Posted to ^{4th} 2nd Station.	"	27.3.18	^{mPCC} _{m24} Dile 21706
6.10.18.	Qc. 9 th Ldn Hd Amb.	Myalgia legs.	Adm. 9. 6. F. Amb.	6-10-18	Bar 2 of 14 d.
			To CCS	6-10-18	A 36. 629
9.10.18.	Qc. 2. Aust. Gen.	Myalgia legs	Adm. 2. Aust. Gen.	9-10-18.	W3034.
12.10.18.	Qc. 30. CGS	do.	30 C. CGS	7-10-18	
			To 25. H T.	9-10-18.	A. 36. 7016.
23.10.18.	Qc. 6. B.D.	Arrived B.B.D. from 7 th Gen Depot 'A'.		22-10-18	N.R. (1593).
18-10-18	Qc. 2. Aust Gen.	Myalgia legs	To 7 th Gen Dep.	18-10-18.	W3034. (8042).
20.10.18.	Qc. 7 th Gen Dep.	do.	To #5 Rest Camp	20.10.18	W3034. (7220).
28-10-18.	Qc. 6. B.D.	From B.B.D. to 7 th Gen Gen Hosp.		28-10-18.	N.R. (B6. 3155).
22-10-18	Qc. St Martin's Camp.	To B.B.D. 'A'.		22-10-18	NR. (3/5).
28-10-18.	Qc. 7 th Gen Gen.	P. W. O.	Adm. 7 th Gen Gen Hosp.	28-10-18.	W. 3034. (322).
16. 10-18.	Qc. 7 th Gen Dep.	Adm. 7 th Gen Camp. to 2. Aust Gen.		18-10-18.	N. 1005. KA. 16/15813.
6. 11.18.	Qc. 7 th Gen Gen Hosp.	Sick. Invalided & posted to 6 th Gen Gen Dep.		6. 11.18.	W3033. (6473). P.D. 33. 29/11/18.

Witley. per. A.T. ST. DENIS.

C.B. Johnson

for Lt. Col. Captain
A.A.G.
Ldn Sect. CHQ 3rd Ldn

TORONTO GENERAL HOSPITAL
DEPARTMENT OF RADIOLOGY
G. E. RICHARDS M.B., DIRECTOR
REPORT OF THE ROENTGEN EXAMINATION OF

Date April 3/19 Name Cpt. Cornell #724233
Address St. Andrews College
Referred by Dr. R. Gaby Case No. 47226

Plates were made of the right foot antero-posterior and lateral. There is no evidence of fracture or foreign body. There is, however, small arthritic change with lipping and bone production about the first tarso metatarsal joint.

G. E. Richards

Capt. C.A.M.C.,
O.C., X-Ray Dept.

EC.





OFFICE OF THE DIRECTOR
GENERAL INVESTIGATIVE
DIVISION
UNITED STATES DEPARTMENT OF JUSTICE
WASHINGTON, D. C.

CANADIAN EXPEDITIONARY FORCE.

M.F.W. 44.
1188 (D.P.) 250M.-12-18.
1772-89-903.

LAST PAY CERTIFICATE

Regimental No. 724233 Rank Pte Name Cornell S. (Surname first)
 Unit No. 2 District Depot who was* **DISCHARGED**
 On 7.5.1919, to.....
 *Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1.5.19 to 7.5.19 191...
 the inclusive date of transfer or discharge.

	Dr.	Cr.
Bal. Dr. or Cr. from prev. month		
Regimental Pay..... <u>7</u> days at \$..... <u>1</u> <u>c.</u>		<u>7</u> <u>70</u>
Field Allowance..... <u>7</u> days at \$..... <u>1</u> <u>c.</u> <u>10</u>		
Separation Allowance		
Clothing Allowance		<u>3</u> <u>5</u>
Post Discharge Pay		<u>70</u>
*Other Credits		
Advances		
Separation Allowance and Assigned Pay Cheque No.		
*Other Charges		
Balance on transfer or on discharge, cheque No. <u>112590</u>	<u>112</u> <u>70</u>	
Total	<u>112</u> <u>70</u>	<u>112</u> <u>70</u>

*Give particulars.

URINALYSIS REPORT.
(for Beard).

12

Regtl. No. 724233 Rank Cpl.
Name Cornell Unit Rdy

Sp. Gravity 1022

Reaction acid

Albumen nil

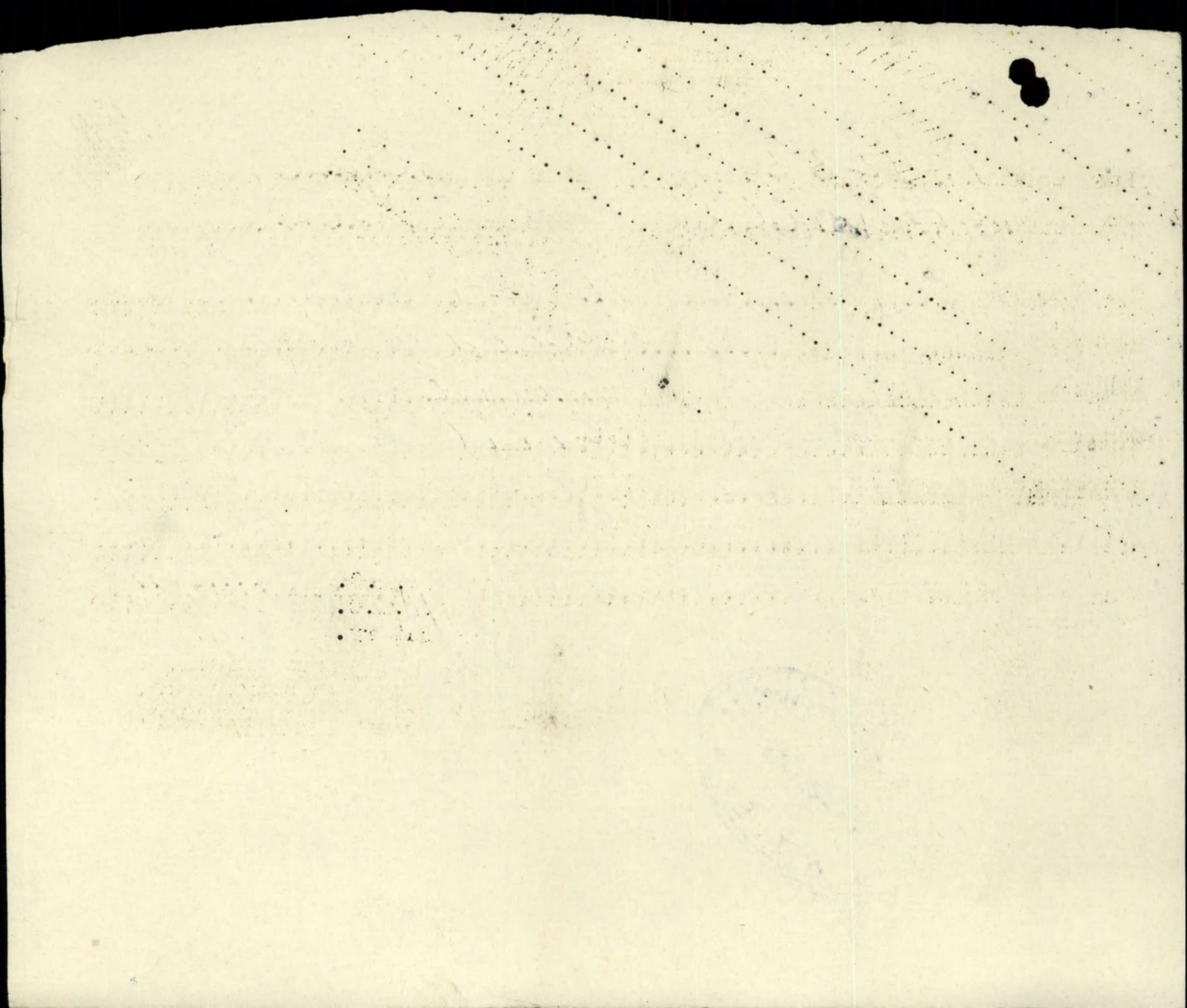
Sugar nil

Microscopic

urine



Captain C.A.M.C.
for Major C.A.M.C.
O.C. Canadian General Laboratory.



Toronto, Ont. March 31st. 1919

Jy H

From: O.C. Military Wards,
Toronto General Hospital.

To: O.C. St. Andrews Mil. Hosp.
North Rosedale, Toronto, Ont.



Cpl. Cornell
#724233

Marginally noted NCO was examined at the
Surgical Clinic today and the following report
made by Major Gaby:

Has an exostosis over the base of first
metatarsal. Advise admission to hospital
for removal.

J. J. Smith

Lieut. A.M.C.
Registrar,
for O.C. Military Wards, TGH.

JS.



40

URINALYSIS REPORT
(for board)

Regtl. No. 724233 Name. *Cornell S*
Rank *Cpl* Unit *R.D.S.*

Sp. Gravity 1015

Reaction *Acid*

Albumen *Trace +*

Sugar

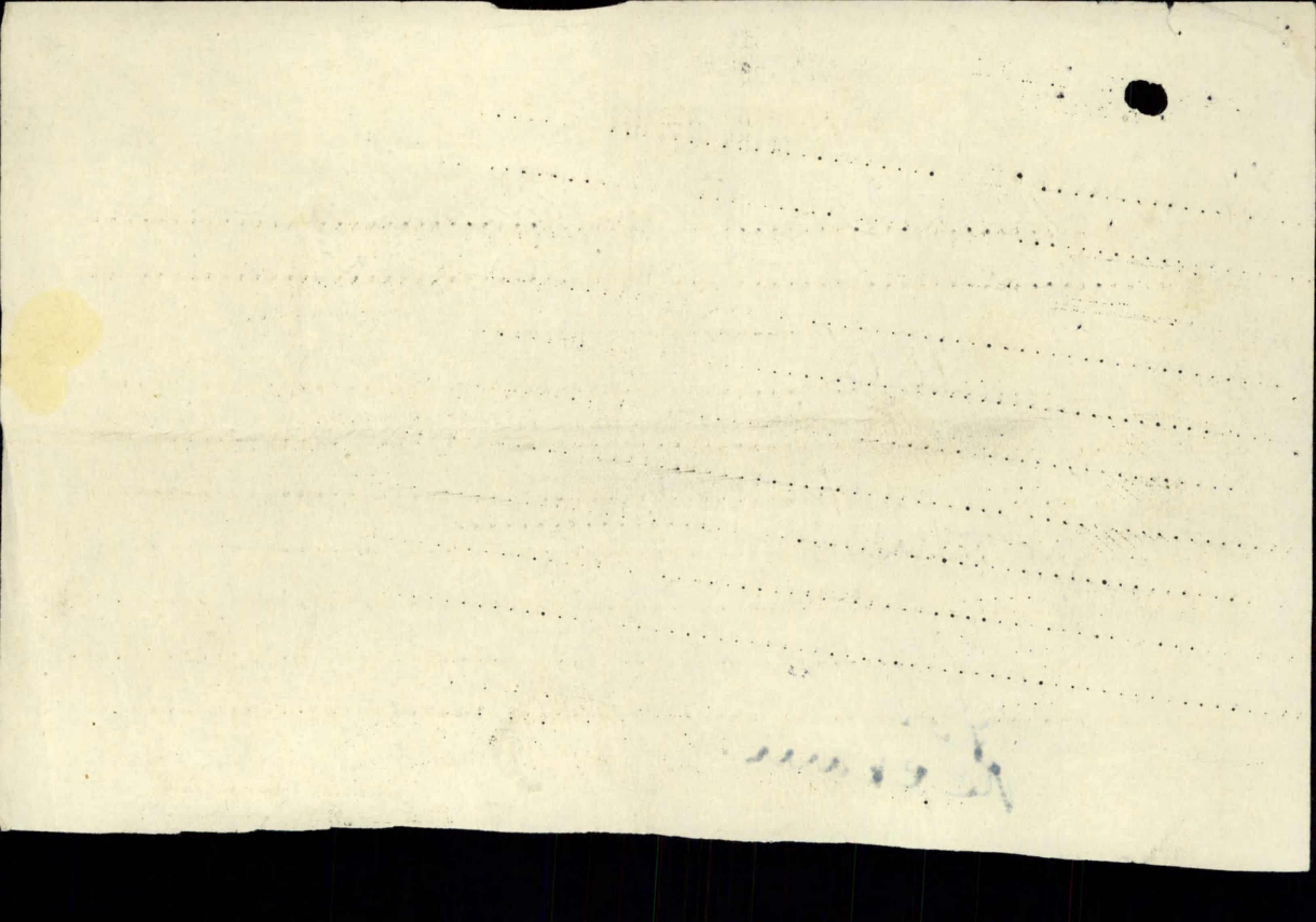
Microscopic *occasional epithelial cells*
no casts observed



for reexam.

[Signature]

Captain C.A.M.C.
for Major C.A.M.C.



OVERSEAS MILITARY FORMS OF CANADA.

DATE: 11/10/18

191 .

To: Hospital Representative,
Military Convalescent Hospital,
Woodcote Park, Epsom, Surrey.

NO

The marginally named soldier has this day been medically examined and placed in Category and is now available to be discharged.

I hereby certify that this man has been found at this inspection this day free from Venereal, Venereal and Infectious Diseases.

FURLOUGH ADDRESS.

*724 233
Cpl. Cornell S.
4 Can Div. Hdqts
Y.M.C.A.
Portsmouth
Eng.*

*W. H. W. White
May*

NEAREST STATION.

*Portsmouth
Commander*

Captain, C.M.C.,
for Commandant,
Military Convalescent Hospital,
Woodcote Park, Epsom, Surrey.

V.J.

100-10000-22-2-17

OVERSEAS MILITARY NUMBER ON CARD

DATE

100-10000-22-2-17
Military Government Hospital,
Windsor Park, Guyana

The surgically named soldier has this
been medically examined and placed in Category
and is now available to be discharged.
I hereby certify that this man has
found at this inspection this day free from
Venereal, Venereal and Intestinal Diseases.

REPORT

Colonel G. M. G.
For Commandant
Military Government Hospital,
Windsor Park, Guyana

REPORT

U R I N E S P E C I M E N .

00000000000000000000000000000000

Ward. 3.....

Date. Mex 25th 1917.....

Reg. No. 724233 Name & Rank. Capt. Connell Unit. 9 P.M.....

Disease.....

Sp. Gr. 1036.....

Reac. acid.....

Albumen. negative.....

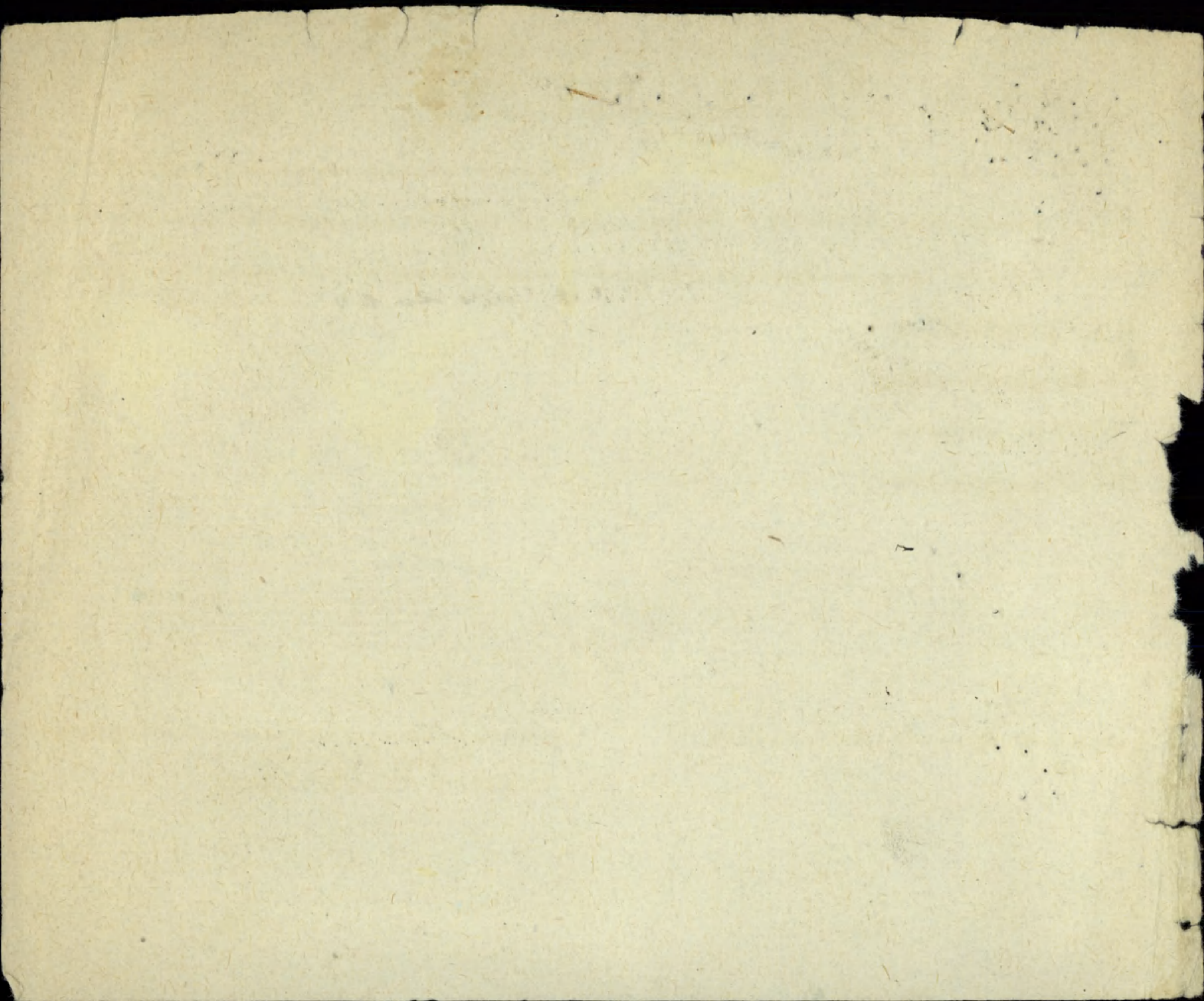
Sugar. negative.....

Capt. Puhlman.....

M.O. i/c Ward

Capt. C.A.M.C. Officer i/c Laboratory.

for



MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier _____

PAYMENTS.

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

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

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

Sheet No. 2. Mrs Nelson Cornell

Name of Soldier Cornell, S.
794 233 "D Coy" Pte. 109th Batta

L. L. Job 310.-Req. 6374.

PAYMENTS.

Month.	Year.	Cheque No.	Amt.	Remarks.
				<i>15.00</i>
				AUG 1 1916
April	1916			
May				
June				
July				
Aug.		<i>V 15176</i>	<i>15 -</i>	
Sept.		<i>V 17073</i>	<i>15</i>	
Oct.		<i>V 21932</i>	<i>15</i>	
Nov.		<i>E 25661</i>	<i>15</i>	
Dec.		<i>L 30699</i>	<i>15</i>	
Jan.	1917	<i>V 38080</i>	<i>15</i>	
Feb.		<i>Y 43374</i>	<i>15</i>	<i>Y 43374, cancelled. S.F.B.</i>
March		<i>Z 49575</i>	<i>15</i>	
April		<i>X 978</i>	<i>15</i>	<i>15-OK</i>
May		<i>U 7228</i>	<i>15</i>	
June		<i>K 14068</i>	<i>15</i>	<i>15-OK</i>
July		<i>J 20895</i>	<i>15</i>	<i>OK</i>
Aug.		<i>E 28218</i>	<i>15</i>	<i>OK</i>
Sept.		<i>E 34982</i>	<i>15</i>	<i>OK</i>
Oct.		<i>R 47302</i>	<i>15</i>	
Nov.		<i>X 53152</i>	<i>15</i>	
Dec.		<i>K 55942</i>	<i>15</i>	<i>253 ER</i>
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

OK

OK

L95

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

To Whom *Nelson* Mrs Nelson Cornell
 Address *Wilberforce*
Ont.

By Whom Assigned Cornell, S.
 Regtl. No. 724233
 Rank *Pte.*
 Corps *D. Co. 109th Battr.*

Rate *4/5⁰⁰ =*

AUG 1 1916

PAYMENTS

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



21 21 11 11
21 21 11 11
21 21 11 11

60 11 11 11
1 1 1 1

11 11 11 11
11 11 11 11
11 11 11 11

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

C

Aug 1/16

OVERSEAS CONTINGENTS

10259

RATE OF ASSIGNMENT

RATE OF SEPARATION ALLOWANCE

--	--	--	--

15.			
-----	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

No. 72.4233
 Rank Pte. Promoted Reverted Discharge
 Soldier's Name S. Cornell
 Battalion 1st Coy. 109. Battn.
 Beneficiary
 Relationship
 Address

PARTICULARS OF ASSIGNMENT

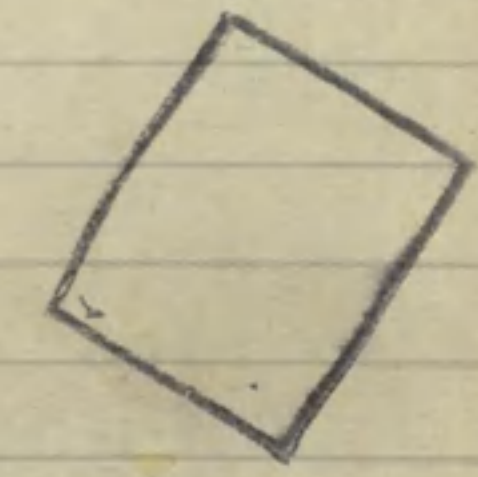
Name Mrs Deborah Cornell
 Address Orkneyforce Unit
 Change of Address
 1
 2
 3
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
1917					
Dec 31			255	255	
1918					
Jan	D 64794		15	15	c
Feb	S 98903		15	15	H
March	A 117068		15	15	✓ H
April	D 8306		15	15	
May	M 15604		15	15	
June	S 27106		15	15	
July	S 30579		15	15	
Aug	S 40418		15	15	
Sept	L 42248		15	15	
Oct	M 50165		15	15	
Nov	D 58325		15	15	
DEC	R 66034		15	15	
JAN	M 70720		15	15	
Feb	M 81894		15	15	
MAR	H 88671		15	15	
			480	480	

3728 83

M. F. W. 128
400M-617-1772-33-141
L. L. 2230-M. & D. 1583.

A/c Closed 31-3-19
AUDITED. Ret'd per Cassandra
 Date 6/29 F.X. 11/19
 Clerk Mal
76260



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

M.O. 2002

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

M. F. W. 128
 400M-6-17-1772-38-141
 L. L. 22220-M. & D. 7193.

724233

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.				
18. 5. 18.	Hq. 6.5. Rivers	to Lt. and S. O. J. Williams	14. 12. 17.	Pt. 050.	
21. 5. 18.	M. P. C. C. P. P. to 4th B. D. Hq.	4th B. D. Hq.	27. 3. 18.	14.	Rank amended by MPCC Pt. 037 of 28. 11. 18
23. 5. 18.	4th B. D. Hq. J. O. I. from M. P. C. C.	"	27. 3. 18.	20	
21. 11. 18.	4th B. D. Hq. Sick, invalided and to Gen. Deh.	"	6. 11. 18.	Amended Pt. 037 of 21/11/18. Pt. 037.	Gen Deh 705 Pt. 027 of 20-11-
28. 11. 18.	M. P. C. C. Sick, invalided and to Gen. Deh. Willey	"	6. 11. 18.	33.	
20/2/19	2nd M. D. B. W. To Spending ret. Can.	"	10/2/19	8.05 Gen Deh 10055 of 12/2/19 - 43.	11/3/19
11-3-19	" " SOS on proc to Canada	"	21-2-19	Do 59	

G.R. Rank Name CORNELL, Salem ✓ Reg'l No. 724233 ✓
 Unit 109th Bn. If in perm. Corps, }
 What Unit? }
 Haliburton, }
 Married or Single Single. ✓
 Place and Date of Enlistment 11th April, 1916. Place of Birth Tweed, Ont. ✓
 Name and Address, Next-of-Kin Nelson Cornell, ✓
 P.O., Wilberforce, Ont., Canada. ✓ Relationship Father. ✓

Assigned Pay Monthly \$ Payable to Relationship

Separation Allowance \$ Payable to Relationship

N/E. R.B. No. 6928
 File R.L.
 Category ORC 6a

Discharge, Date and Place Reason Character

H. W. & V., Ltd.—7165-16.

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS. Taken from Official Documents.
Date.	From whom received.				
8.12.16	Ob 109th Bn	S.O. on transf. to 124th Bn	Witley	8.12.16	Pt II DD 343
11.12.16	Ob 124th Bn	S.O. on transf. to 109th Bn			267
5.1.17	HQ CTD	165 for duty with M.P.	Bramshott	2.1.17	" 5 & 26
29.3.17	Do	Cellulitis	Com Mil Hosp B'shott	25.3.17	C.L. 44 Pt II DD 87
27.5.17	HQ Cans	Tobacco Corporal	B'shott	27.3.17	Pt II DD 147 <i>Cancelled</i>
16.12.17	do	S.O.S. 2 years to Police	do	14.12.17	291 <i>Amended</i>
31.12.17	M.P.C.C.	S.O.S. on arrival in France	Field	15.12.17	Pt II DD 19 <i>Cancelled</i>
7.5.18	Hq. C.S.	Applied for 1/2 Btl with pay	Pte Bram	27.5.17	46 <i>Cancelled</i>

gnc

49
042

Cancelled
 Per 040 27/5/18
 Amended
 Per 50 of 18/5/18
 (Pt) 1 cancelled
 in file 072/3/18
 cancelled
 in file 100.33
 4.9.11.18

Barnell

*Name *L. CORNVILL* *Salen* Rank *A/Cpl* Regtl. No. *724233* ES.

Fyle Depot *24 Co-731*

Orig unit Present unit *109th Bn.* M. or S. *S* Age *29* Religion *Meth* Ref. H.Q.

Port, ship and date of arrival *St. John Cassandra 6-3-19*

Next of kin *Nelson Cornwall Wilberforce Ont.*

Address on leave *SAME.*

Address on discharge *SAME. KINNY MOUNT*

Transportation issued No *Yes* Date *7-5-19* Character on discharge

Previous occupation *Lumberman* Date and place of enlistment *Haliburton Apr. 13-16*

Diagnosis *CUT WITH AN AX DORSUM RT FOOT.* Date of Medical Boards *29-4-19.*

Date T.O.S.	Remarks.	Pt. 2 Order No.
<i>22-2-19</i>	<i>Posted to Gas. Co. (Ex. Camp) 6-3-19.</i>	
	<i>Leave & Subs. from 8-3-19 to 22-3-19.</i>	<i>71</i>
<i>27-3-19</i>	<i>Posted to Hosp. Sect. (ST. ANDREWS)</i>	<i>87</i>
	<i>St. Andrews to T.G.H. 2-4-19</i>	<i>H.S. 94</i>

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

Date.

Remarks

Pt. 2 Order No.

T.G.H. to W.M.H. 22-4-19

H.S.115

1-5-19

HOS. SECT. TO CASUALTY COY. PARK SCHOOL.

121

7-5-19

S.O.S. DISCHARGED "MED. UNFIT" (183 days W.S.G.)

125

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1. *Military Co. A Woodcock & Co. 14-12-18*

2.

3.

4.

5.

6.

7.

Surname

Christian Name or Names

724233
Reg. No.

Cornell,
Rank

S.
Unit

Co.

~~744233.~~
Troop

Batty.

Hospital

Pte. HDQ. Sub-Staff. C.T.D.
misc 4 OHQ
Bramshott.

Date of Admission

Bramshott Mil.

25.3.17.

Transferred

Hosp.

2 Aust G. H. Bogue

Hosp. 9.10.18.

7 Corp. D. Bogue

Hosp. 18.10.18.

1 W. G. L'pool

Hosp. 7.11.18.

Diagnosis

Cellulitis.

(1)
Later Diagnosis (if changed)

Influenza
myalgia legs. E.
Influenza

(2)

(3)

Additional Diagnosis: if more than one state present

DISPOSITION

Date

C.L.29.3.17. 44.

Dis 20.10.18.

REMARKS

15.10.18 A 141-2.

Dis 8-1-19

26.10.18 A 151

16.11.18 B 169

6.12.18 A 186-2 note this entry precedes entry on A 151

18.12.18 B 196

10-1-19 B 213

A.M.D. 2 DEPT.

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

MARRIED

SINGLE

Yes

WIDOWER

TRADE OR CALLING

Lumberman

RELIGION

Methodist

DESCRIPTION.

APPARENT AGE

27

YEARS

MONTHS

HEIGHT

5

FEET

10

INCHES

CHEST MEASUREMENT

40 1/2

INCHES

EXPANSION

3

INCHES

COMPLEXION

Dark

EYES

Brown

HAIR

Dark brown

DISTINGUISHING MARKS

Scar on top of right foot

MEDICAL EXAMINATION.

PLACE

Haliburton Ont

DATE

April - 11th - 1916

Present Address

Haliburton, Ontario

18-3-11

2 CARD NO. ✓
SOS Des 7-5-19
D 0125 FOLL. 8-5-19
M. W. Temple 9. 20
10/12/19 230

SURNAME. *Cornell*

CHRISTIAN NAMES *Salem*

REGL. NO. *724233*

RANK *Pte*

UNIT *109th*

Bn.

FORMER CORPS *Nil*

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL *Cornell Nelson*

RELATIONSHIP TO SOLDIER *Father*

ADDRESS *Wilberforce
Ont.*

COUNTRY OF BIRTH *Canada, Tweed, Ont*

DATE *Dec. - 25th - 1894*

PLACE OF ATTESTATION *Haliburton Ont.*

DATE *April - 13th - 1916*

ailed from Halifax

*23/7/10 see Lt. Symonds 488
R/C M. F. W. 22 250M - 216. 1172-29-339. 10*

No. 724233. RANK *Pte.*

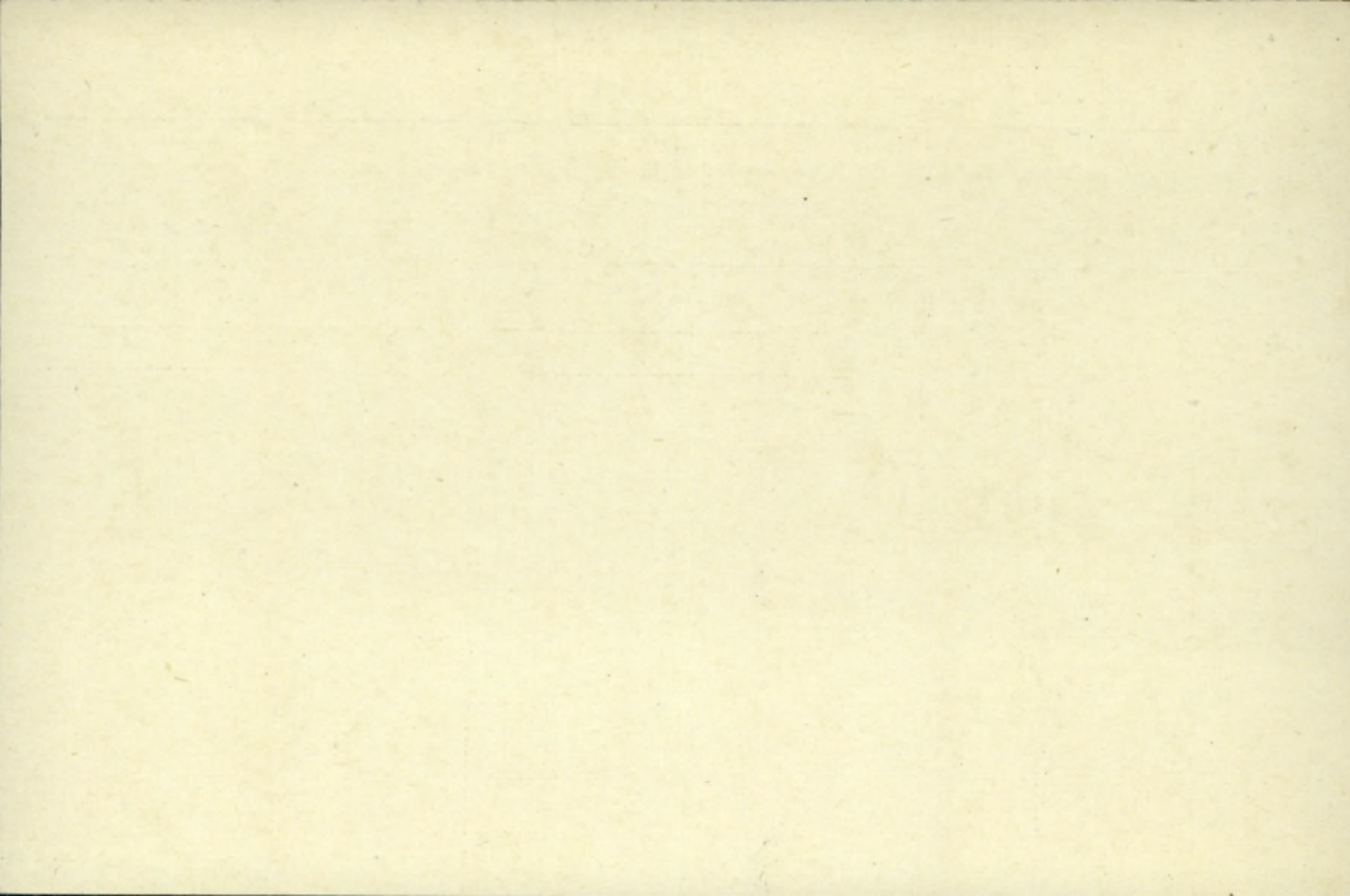
NAME *Cornell, S.*

T. O. S. 11-4-16. UNIT 166th Battalion.
(S.O. 127 of 17-4-16)

M. D. 3.

			PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
PAID FROM	PAID TO	SIG. OR REC'T	PARTICULARS	AUTHORITY
1916. <i>April 11.</i>	1916. <i>April 30.</i>	<i>✓</i>		
	<i>May.</i>	<i>✓</i>		
	<i>June.</i>	<i>✓</i>		
	<i>July.</i>	<i>✓</i>		

UNIT SAILED
JUL 23 1916



LEDGER No. 445

SERIAL No. 017649

REG. No. 724233 NAME Cornell Salem

RANK 6pl. CORPS 2DD. AGE 25 SERVICE 3/12

29
16/12 '13

HOSPITALS

DATE OF ADMISSION

1 St. Andrew's Mil. Toronto

27-3-19.

2

3

DIAGNOSIS Exostosis Rt. Ft.

TRANSFERRED TO Military Hosp. 2 G. H. 2419 Whithy Hill 22-4-19

DISPOSITION LEP 1-5-19

CATEGORY 2³

NAME

Cornell S.

REGT. NO.

724233

RANK AND UNIT

Plt

Engine Sqd units Gen Dpt

NEXT OF KIN

CABLE

NATURE OF CASUALTY

No.

DATE

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

B169
A188
B196
B213.

1st West Gen Hospital	7-11-18	Influenza
7 Co. 1st Gen Hospital	18-10-18	Myalgia Legs
Mil Cont W. Gen Hospital	14-12-18	Influenza
Mil Cont. " " " " " " " "	8-1-19	" "

SALEM.

Name: CORNELL Rank PTE,

Reg. No. 724233.

Unit 4th C.D. Hq.RIBY
Wm.

Next of Kin CANADA.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1918						
9-10	2 Aust. G. Hq. Bloone	MYALGIA	LEGS	A 141		4773-5
18-10	7. C. D. Bonlogne			A. 186	letter in file	
20-10	Disch'd to 5th C. H. M.			Do. A 157		5062-1
23-10	7 C. G. Hq. Staples		P.U.O.	A 5K		3251/10
7-11	1. H. Gen Hq. Liverpool		Influenza	B 169		785
14-12	Mil (Gen) H. Epsom		Do (Conc)	B 196		3174
8-1-19	Discharged.			B 213		933
(8-1-19)	Will proceed 18-1-19 to Gen. Dep't. Witley.					5062947

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
44.	Can. Mil. Bramshot,	25-3-17	Cellulitis.
Q141	2 Aust. Gen. Callogne	9-10-18	Myalgia Legs.
Q157	7 Convo Dep Callogne discharged	20-10-78	Myalgia Legs.

.....HOSPITAL.

A. & D. No. Ward *I.*Unit *109* Sick or Wounded.Regtl. No. *724 233* Pl. of Act'nRank *Cpl* Name *Cornell S*Age *23* Religion *Meth*Service Compl'd *1 yr* Time with Field Force *4 1/2 Eng*Diagnosis *Abscess Rt foot*Admitted *Bramshott Mil.* Discharged *Am 19.4.17*

Transferred

11.4.17 A III.

J. M. Boies

Capt. Comd.

all.

R

Number 724233

Rank *all/cpl*

Surname CORNE *ht*

P

Christian Name Salem

Units *lean lean Bde* Theatre of War *France*

Date of Service 15-12-17

Remarks

Latest Address ~~Wilberforce, Ont~~
RR#1

Roll No. *B Page 195-09* *New Husband*
Out

GRATUITY (IMPERIAL)

CHRISTIAN NAME

SURNAME

REG. No.

SCHEDULE No.

LINE No.

UNIT RETIRED OR DISCHARGED FROM

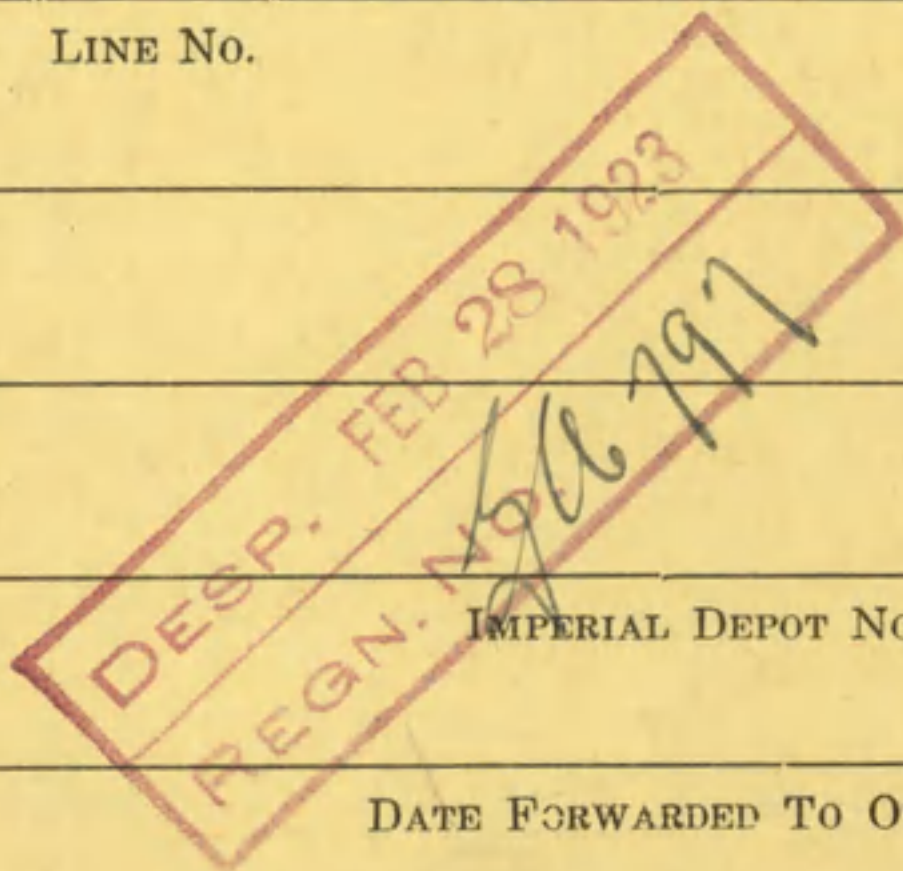
PLACE OF RETIREMENT OR DISCHARGE

DATE RECEIVED FROM OTTAWA

IMPERIAL DEPOT No.

DATE RECEIVED FROM REG. DEPOT.

DATE FORWARDED TO OTTAWA



LIST OF DISCHARGE DOCUMENTS.

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

26/3/47
 JUN 17 1948

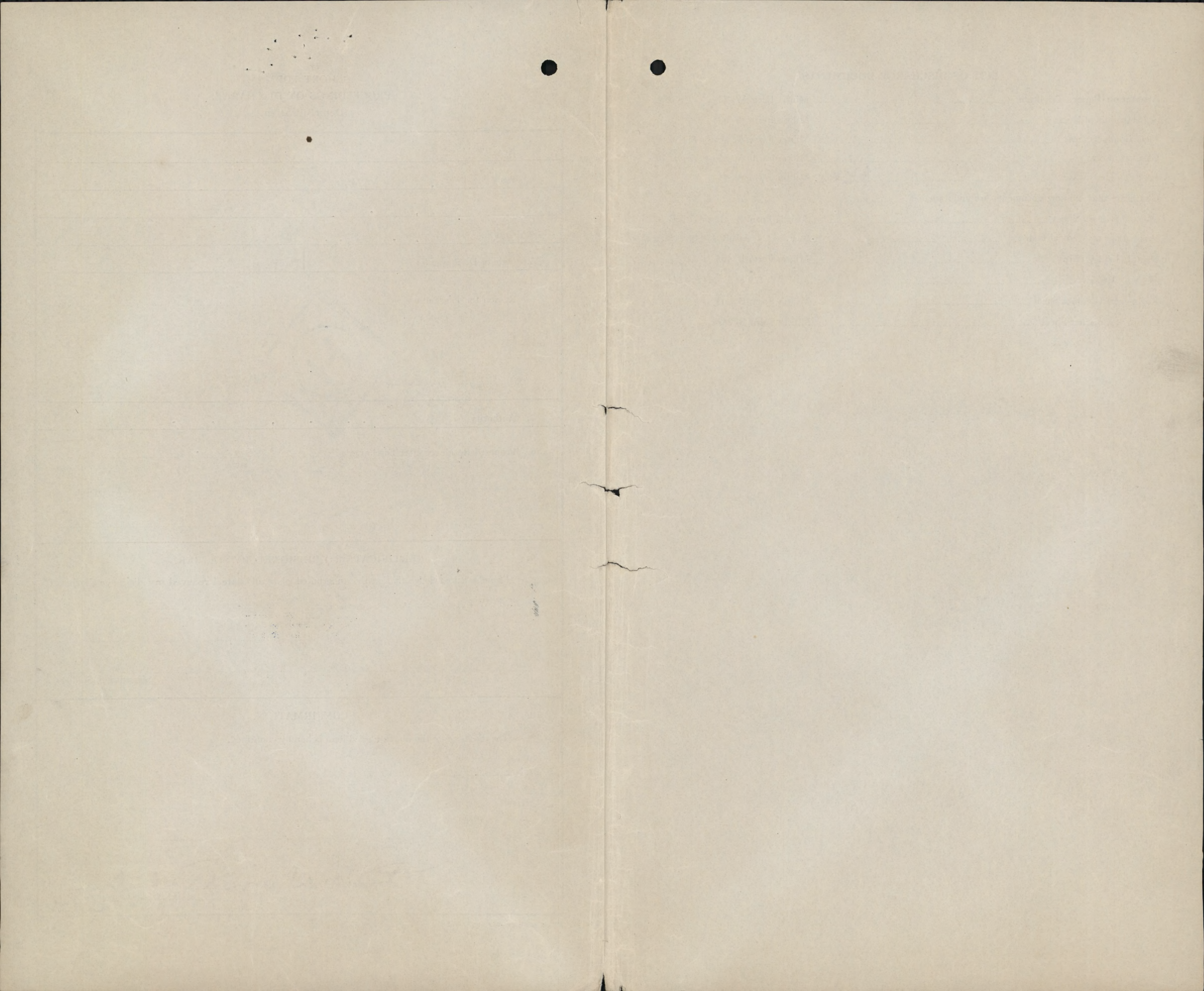
16.6.
 S. Cassandra
 22-2-19

28, 77 War Service Badge.
 Class A
 No. 286128 Issued 7-5-19

SHORT FORM.
 PROCEEDINGS ON DISCHARGE.
 (Demobilization.)

1. No. 724233		
2. Rank Cpl.		
3. Name Cornell, Salem.		
4. Unit 109th. Bn. (#2D.D.)		
5. Date of Discharge	MAY 7 1919	Place TORONTO, ONT
6. Reason for Discharge Medically unfit		
7. Authority #2D.D. Ptll. #125, May 7th. 1919.		
8. Proposed Residence after Discharge Wilberforce Ont.		
9. CERTIFICATE TO BE SIGNED BY SOLDIER. I hereby acknowledge that at the undernoted place and date I received my discharge Certificate M. F. W. ? Salem Cornell. Signature of Soldier.		
10. CONFIRMATION. The discharge of the above named man is hereby confirmed. TORONTO, ONT Place Date MAY 7 1919 Signature Graham Roberts O. C. Discharging Unit. O. C. Discharge Sections, No. 2 District Depot		

10-8-45
 22698



OPINION OF THE MEDICAL BOARD

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

No concur

19. Is the invalid fit for

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

20. It is certified that the invalid

(a) Does require treatment. (Give the nature of the condition and of the treatment required and its probable duration.)

- (b) Does not require treatment.
(c) Should pass under his own control.
(d) Should not pass under his own control. (Strike out condition not applicable.)

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

We recommend that he be placed in Category C.

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

PLACE WHITBY MILITARY HOSPITAL

DATE APR 29 1919

C. J. ... President
Members

TO BE COMPLETED WHEN TREATMENT IS REFUSED

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

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

PLACE
DATE
APPROVED BY

APPROVED
Assistant Director of Medical Services.
MAY 2 1919
R. Richardson CAPT.
FOR A. D. M. S. M. D. 2

APPROVED BY
Director-General of Medical Services.
DATE

THIS FORM WILL BE USED FOR ALL RANKS
MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

- 1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" issued by the B.P.C. and instructions issued by Militia H.Q., Ottawa, will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of Sections 1 to 17 of this Form and will obtain the signature of the invalid to the "Statement," page 3. The President of the Board of Medical Officers is responsible for the proper completion of sections reserved for recording the "Opinion of the Medical Board."
3. In answering the questions, Medical Officers will carefully obtain and record the invalid's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the invalid concerned, from witnesses, or from documents, Regimental or otherwise.
4. Special care is required in answering question 9. Read the questions carefully. All questions must be answered.
5. If space provided under any section is insufficient add another sheet. Such sheets must be initialled by the Medical Board.
6. A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board."
7. Under no circumstances may information other than that in sections 7, 8, 9 and 10 be communicated to the invalid, directly or indirectly.
8. The nomenclature of diseases must be followed, if possible, as described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London (1915), by Messrs. Harrison & Sons.

STATION Whitby Mil. Hospital DATE April 29th, 1919.

- 1. 1 (a) Unit #2 D. D. (b) Regimental No. 724233 (c) Rank Cpl.
(d) Surname CORNELL (e) Christian name Salem
(f) Home address Wilberforce, Ont.
(g) Next of Kin Mary Cornell (h) Relationship Mother.
(i) Address of Next of Kin Wilberforce, Ont.
2. Age last birthday 25 years. Date of birth 25-12-1893.
3. Enlistment, or Appointment (if an Officer) (a) Place Haliburton, Ont. (b) Date 11-4-16.
4. Personal description:
(a) Height 5 ft. 10 in. (b) Weight 170 (stripped) (c) Complexion Dark.
(d) Colour of hair Black (e) Colour of eyes Brown (f) Identification marks, Scars, etc.
1 Scar - vaccination. 1 Scar right foot - 1 right hip.
5. Former trade or occupation Lumberman.

Table with 2 columns: Years, Days. Row 1: 3, 18

PATIENT'S OWN STATEMENTS.

Table with 2 columns: From, To. Rows for Canada, England, France or other theatres of War.

7. Original disease, or injury Cut with an ax dorsum right foot.

- (a) Date of origin Sept. 1914. (b) Place of origin Canada.
(c) Cause Accidental.

8. Present disability— (Here state the exact nature of the disability resulting from the disabling conditions: e.g. (a) Weakness—slight, moderate, marked, etc; (b) Loss, complete or partial, of an organ or member, or of its functions; (c) Necessity for rest of the body, or of some of its parts, for therapeutic reasons; (d) Any other restrictions in choice of occupation.)

Nil.

9. Present condition—(a) (Before completing this section the invalid should be stripped, and subjected to a thorough physical examination. Important, to be a full description of the present disabling condition, or conditions only. "History" must be recorded in Section 10. Describe all abnormalities, anatomical and functional, contributing to present disability; objective findings to be stated first, then subjective findings.)

Objective Signs: There is a slight elevation found over proximal end of 1st. metatarsal bone of right foot. Swelling is 1" wide and 1 1/2" long and 1/6" high. Skin over this is soft and not tender. There is a scar (surgical) 1 1/2" long over its centre where exostosis was removed. There is no pain or tenderness on pressure over elevation.

Subjective Symptoms: Nil.

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

Nervous System... No Cardio-Vascular System... No Genito-Urinary System... No
Special Senses... No Respiratory System... No Integumentary System... No
Disturbances of Mentality... No Digestive System... No Muscular System... No
Osseous and Joint Systems... No Any other general condition... No

In Sept. 1914 he was hit on top of foot with an axe causing cut down to bone. Cut was 1 1/2" long and required 5 stitches. Never had any trouble till abscess formed in March 1917. Abscess was opened, drained and healed. When abscess was healed he noticed lump on bone which grad-

10. (a) History (of the condition referred to in Section 9 (a).) usually enlarged for a few months but remained stationary. On April 7th., 1919 exostosis was removed from bone at Toronto General Hospital.

10.—(b) (Here give a complete history, as obtained from invalid, with dates of origin, of any affection from which the invalid, has suffered either prior to or since enlistment, and not included in Section 10 (a).)

Spanish Influenza November 1918 - No disability.

Inflammatory Rheumatism in France Sept. 1918 - No disability.

Broken left arm - June 1917 - No disability.

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

Nil.

11.—(a) Did the disabling condition have its origin before enlistment? Yes

(b) If so, has it been aggravated by Service? (If aggravated, give a description, as far as it is possible to do so, of the disabling condition at time of enlistment.)

Yes

12. Was the disability caused, or aggravated; (a) by intemperance, or improper conduct; or (b) by unreasonable refusal to accept treatment? No

The regimental documents will be referred to. (If the answer is in the affirmative, state in percentages, to what extent the patient is incapacitated by that causation or aggravation. In answering this question, conduct sheets should be considered. If treatment has been refused, the circumstances surrounding the refusal should be described on page 4.)

13. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? N. A.

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

Hospitals Canada - 1 month.

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit? No

16. Can the former trade or occupation be resumed? Yes

17. Recommendations.

Discharge.

Smith Capt Medical Officer by whom the case is brought forward.

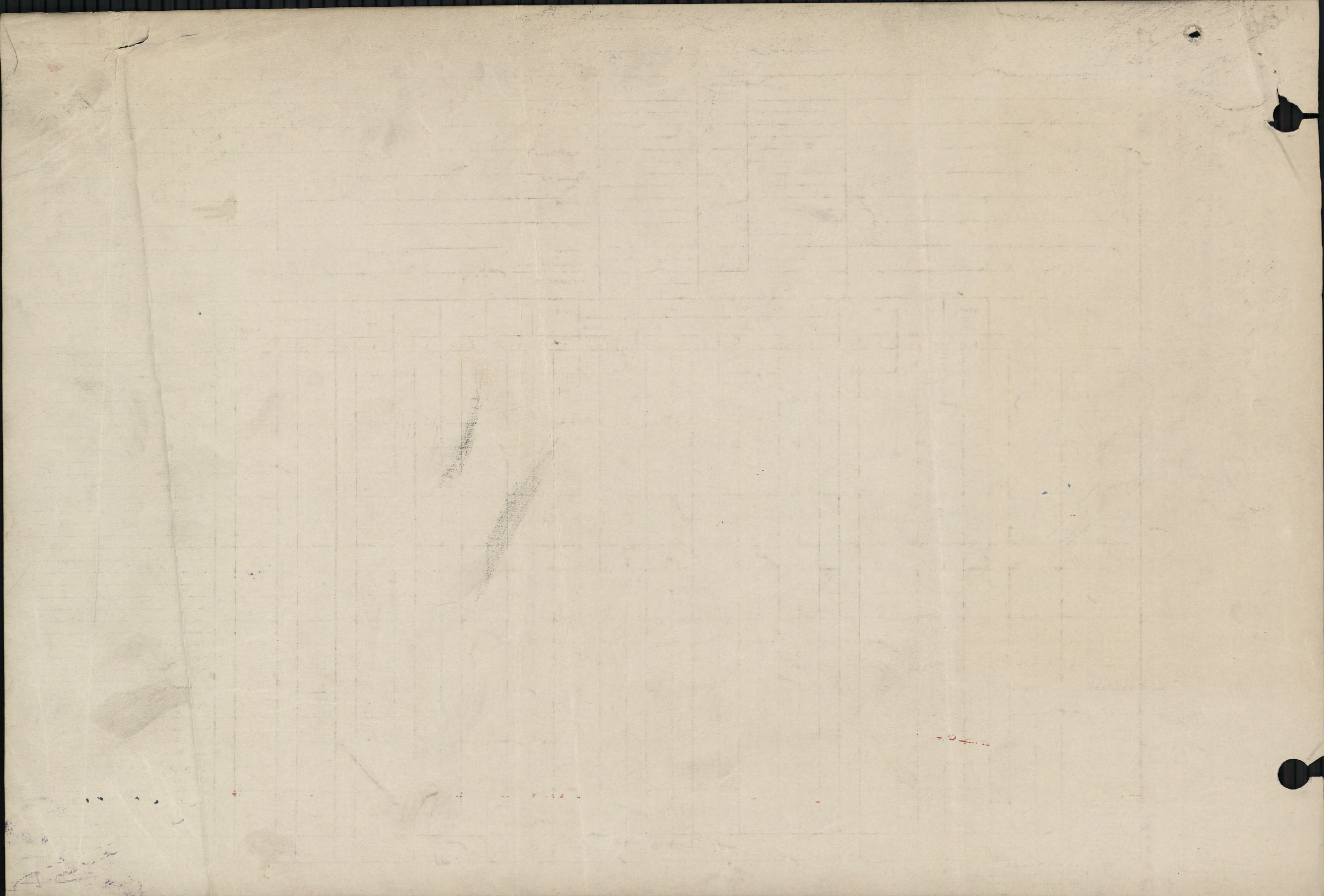
STATEMENT OF THE INVALID

(Sections 7, 8, 9 and 10 are to be read to the invalid and either "satisfied" or "not satisfied" struck out).

I, the undersigned, have heard the description of my disability and present condition read, and am satisfied (or not satisfied) with it. (If dissatisfied, statement should follow.)

I complain in addition of.

Signature of invalid examined. Rank. J. Carnell



* Strike out whichever inapplicable.

ASSIGNED PAY	ENGLAND or CANADA.	SEPARATION ALLOWANCE.	ENGLAND or CANADA.				
EFFECTIVE DATE: - 1.8.16		EFFECTIVE DATE: -					
AMOUNT: - 15.		AMOUNT: -					
NAME, ADDRESS, RELATIONSHIP & AUTHORITY		WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.					
Mrs H Cornell Windsor Ont		Mother					
EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS							
DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
4/1/19	312	Epson	24 33			Ledger	151 43
8/1/19	v	v	24 33			L.P.C.	102 77
			48 66				

NAME: - CORNELL, Janet Helen

NUMBER: - 724233

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
DO 50 HQ B. Regt	14.12.17	L/C PTE

UNIT AND TRANSFERS

ORIGINAL UNIT: - 109

DATE ACCOUNT FIRST OPENED: - 1.8.16

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S O	UNIT TRANSFERRED TO
DO 20	1.6.18	19.6.18	CMR FRANCE H Div HQ 5/5

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
DO 50	1 05	10		
DO 50	1 00	10		

Discharge to Canada N/R 2616 2/21/19 to 2/21/19 to 2/21/19 M.D.2

MONTH	PARTICULARS	CR 1	CR 2	PARTICULARS	DR 1	DR 2	DR 3	DR 4	BALANCE	DEFERRED	SEPARATION
1918											
Mar 31	Bal Forward								83 37		
APRIL	1/10 Pay	34 50		CAP				15			
				A.R 3960 22/3/18 A.P.M	7 14						
				66 6/14/18 46 B"	4 46				91 27		
		34 50			11 60			15			
MAY	Life Pay	35 65		C.A.P				15			
				A.R 374 4/1/18 H Div Sig Co	5 35						
				res to Pte 14/2/17 14/12 31/5 1642425	8 45	8 45		15	98 12		
		35 65			8 45	8 45		15			
June	Step Pay	33 00		Cap				15			
				Dual R. 250 16/5/18 3 A.L. C.S.A	5 35						
				Dual 4662 24/5/18 O.S.B	8 92						
				ad 54 6 6 18 4 2nd Lt	8 92				92 93		
		33			23 19			15			
July	P. Pay	34 10		Cap				15			
				WR 1245 12/7/18 C.C.Sch	5 35						
				" 1622 26/7/18	5 35						
				" 48 28.6.18 4th 6 April	8 92						
				Dual 4106 20/6/18 O.S.B	8 92				83 49		
		34 10			28 54			15			
Aug	P Pay	34 10		Cap				15			
				AR 1931 5/8/18 C.C.Sch	3 54				99 02		
		34 10			3 54			15			
Sept	P.P.O	33		Cap				15			
				AR 1612 3/9 H.D. Sig	3 54				113 45		
		33			3 54			15			

NUMBER

724233

RANK

plé

NAME

CORNELL

5

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
1918									113 45		
Oct		34 10		Cap				15	132 55		
				1022 10/18 H. D. L. 6 ③	✓ 3 73				128 82		
				1917 27.10.18 G. Post ②	✓ 5 60				123 22		
Nov		34 10		Cap	9 33			15	141 22		
		33		Rem ②	✓ 9 73			15	131 49		
				3041 19/11/18 H. D. L. 6 ③ N. L.	--						
	Del Pay.	34 10		Cap Pay				15	150 59		
				3885 12/18. Rem ②	9 73				140 86		
Jan 19.		34 10		Cap				15	159 96		
		101 20			19 46			45			
July		30 80		Cap				15	175 76		
				5832. 24/12/18 do 10	✓ 24 33				151 43		
				312 8/1/19 do 18	24 33				127 10		
				Capm. 8/1/19 17	24 33				102 77		
					72 99				110 07		
	S.F. 8/1/19 to 15/1/19. 10 days @ 73 1/2	730						15			
		38 10			72 99						

100 to Canada 27/1/19 DO. 12. G.D.