Jan 1st
C.K.R.G.

"A" Coy.

ATTESTATION PAPER.

No. 124738.

Folio.

ORIGINAL

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? Gleadall
1a. What are your Christian names? Abraham
1b. What is your present address? Midland, Ont.
2. In what Town, Township or Parish, and in what Country were you born? ~~England~~ Wombwell Yorks England
3. What is the name of your next-of kin? Albert Gledall Yorkshire
4. What is the address of your next-of-kin? 44 Bartholomew St. Wombwell England
4a. What is the relationship of your next-of-kin? Father
5. What is the date of your birth? 28th of May ~~1890~~ 1892
6. What is your Trade or Calling? Labourer
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, Abraham Gleadall, 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.

Abraham Gleadall (Signature of Recruit)

Date 4/1/16 ~~191~~ . E. W. Lancaster Capt. (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Abraham Gleadall, 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.

Abraham Gleadall (Signature of Recruit)

Date Jan 4 1916. E. W. Lancaster Capt. (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 20 day of January 1916.

(Signature of Justice)

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

M. F. W. 23.
200 M.—11-15.
H. Q. 1772-39-841.

6

Description of Abraham Gleadall on Enlistment.

Apparent Age 23 years 7 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 6 ins.

Chest measurement: Girth when fully expanded 37½ ins.; Range of expansion 3½ ins.

Complexion Fair

Eyes Brown

Hair Light Brown

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

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).

Faint scar on left hip

CERTIFICATE OF MEDICAL EXAMINATION.

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

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

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

Date Jan 4 1916.

Place Lindsay

J. McCullock Capt.
Medical Officer.

*Insert here "fit" or "unfit."

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

CERTIFICATE OF OFFICER COMMANDING UNIT.

Abraham Gleadall 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 JAN 20 1916 191

C.S.W. 13-7-19

S

Proceedings of Court of Inquiry or on men reported Missing on Active Service.....

Attestation Papers.....1.....

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet.....

Compulsory Stoppages.....

Casualty Forms.....1.....

Proceedings on discharge.....2.....

Corps History Sheet.....

Date and No. of Deposit Receipt for Purchase Money and Amount.....

Parchment Certificate.....1.....

Medical Report for Invalids.....

Medical History Sheet.....

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet.....

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate.....1.....

A.F.B. 122-1
M.F.W. 192-1.

Cascade 2 M.F.W. 67
a791237-2
a791172-2

M. F. W. 62.
50m.—9-16.
H. Q. 1772—39—935.

DISCHARGE DOCUMENTS

R. O. No.....

H. Q. No.....

H

Name GLEADALL ABRAHAM

Regt. No. 724738 Rank Corporal

Corps 3 District Depot

Demobilization

(2) (Comp) to B.P.C
on M.F.W. 2/05

14597 Spec. 802 d/25-9-19 BD.
Retd. 4.10.19

M

H

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 724738 (Rank) Corporal

Name (in full) GLEADALL, Abraham. enlisted in

the 109th Overseas Battalion

CANADIAN EXPEDITIONARY FORCE at Lindsay, Ont. on the 4th

day of January 19 16.

HE served in Canada, England and France

and is now discharged from the service by reason of being medically unfit for further War Service. Authority Med. Board D/ 8-1-19 R.O. 1080

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

Age 26 yrs. 8 months.	Marks or Scars
Height 5 ft.6 ins.	Four vaccina ion marks left arm
Complexion Fair	
Eyes Brown	
Hair Light.	

Abe. A. Gladall.
Signature of Soldier

A. E. Kaye Lieut.
O. C. Discharge Section
No. 3 District Depot
Issuing Officer

Rank

Appointment

Date of Discharge 22-1-19

Signed at Kingston, Ont. this 22nd day of January 19 19

in Military District No. 3

File Reference No. 3DD-3-G-162

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.

M. F. W. 39a
200m.—2-18.
H.Q. 1772-39-882

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

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

..... Name of Officer

..... Rank

..... Appointment

M.F.W. 44.
1133 (D.P. 250M-12-18.
1772-39-903.

/HVW

CANADIAN EXPEDITIONARY FORCE.

LAST PAY CERTIFICATE

ORIGINAL

Regimental No. 724738 Rank Cpl. Name Gleadall, A.
(Surname first)

Unit 109th Battalion who was* Discharged, Category "

On January 22nd 191 9, to I.S.C. for further treatment.

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1/1/19 to 22/1/19 191... the inclusive date of transfer or discharge.

	Dr.		Cr.	
Bal. Dr. or Cr. from prev. month			37	45
Regimental Pay 22 days at $ 1 . 10			24	20
Field Allowance 22 days at $ c. 10			2	20
Separation Allowance				
Clothing Allowance			35	00
Post Discharge Pay				
*Other Credits Subs.			6	40
Advances Cheque #928	37	45		
Separation Allowance and Assigned Pay Cheque No.				
*Other Charges				
Clothing Cheque #1803	35	00		
Balance on ~~transfer or~~ discharge, cheque No. 1804	32	80		
Total	105	25	105	25

*Give particulars.

A monthly stoppage of $ NIL (†) has (‡) been paid on account of

Assigned Pay for the month of 191 ... and Separation Allce. for month of 191 ... (to) Assignee

(Address)

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

ON TRANSFER OF AN OFFICER.

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

REMARKS:—

State (1) date of enlistment ... married or single

(2) Separation Allowance, entitled or not NIL (3) Reason for discharge

(4) Authority for discharge or ~~transfer~~ 3. DD. 3-G-162.

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

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

Date January 21st, 1919

Place Kingston, Ont.

W. Peters Capt.
OFFICER I/C DEMOBILIZATION PAY DIV.
MILITARY DISTRICT No. 3
Paymaster.

N.B.—(A) This form is to be used for all ranks (vide Article 122-130 and 141) Financial Instructions, C.E.F., 1916.
(B) For purposes of transfer it is to be made out in triplicate. Copies will be disposed of in accordance with instructions as laid down in Routine Order No. 1307, dated 12th Nov., 1918. Payment of the balance will not be made and the words "or on discharge cheque No." will be deleted.
(C) For purposes of discharge it is to be made out in duplicate. One copy to accompany discharge papers, and one copy for retention as a record. As payment of the balance will have been made, the words "on transfer or" will be deleted.
(D) If a man on discharge is entitled to Post Discharge Pay, Last Pay Certificate will be made out as in "C" with an additional copy to be forwarded to the District Paymaster.

CREDITS, ADVANCES, Etc.

Credits, Advances, Forfeitures, Issues on Repayment, etc., since issue of this L.P.C. are to be entered hereunder:

Date	Place	Cheque No. A.R. No. or Other Particulars.	AMOUNT		Signature of Officer Making Payment.
			Dr.	Cr.	

To be made out in duplicate.

DUPLICATE

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

INSTRUCTIONS.

(a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.

(b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.

(c) All questions, etc., must be answered.

(d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.

(e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

---

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

(2) Regimental Number 724738

(3) Full Name of Soldier Abraham Gladall (Cpl.)

(4) Place of Birth Wombwell - near Barnsley, Yorks, Eng.

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

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

(b) Present Postal Address Nil

(7) Are you a widower? No

(8) Have you any children? No

If so, give number of boys and girls

Also their names and ages

M. F. W. 67.

300M.—5-16.
1772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive? Yes. Albert G. Gladall

If so, state name and address Wanbrell near Barnsley, Eng.

(10) Is your Mother alive? No.

If so, state name and address Nil.

(11) If your Mother is a widow Nil.

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.

Nil.

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

Nil.

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

Nil.

(15) Are you insured? Yes.

If so, in what Company? Pearl Life

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 July 11/16

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

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

M. F. W. 54. (A. F. B. 103.)
250M.—1-16.
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps 109th OVERSEAS BATTALION, C. E. F.

Regimental No. 124738 Rank Private C. E. F. Name Gleadall. Abraham.

Enlisted (a) 4-1-16 Terms of Service (a) D of W. Service reckons from (a) 4-1-16.

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

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

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36. or other official documents.
Date	From whom received				
	Embarked Canada		Halifax	24.7.16	
	Disembarked England		Liverpool	31.7.16	
5/8/16.	Appointed A/Cpl. 109th Bn		Dancy	5.8.16.	Part II Order 216.
8.12.16	OC 109th	Transferred to 124th	Witley	8.12.16	D.O. 343 Capt. ADJUTANT 109th Overseas Battalion C.E.F. A.W. Gilbertson CAPTAIN, ADJUTANT 109th BATTALION C.E.F. INFANTRY
9-12-16	124th. Bn.	Taken on strength of 124th. Bn., C.E.F.	Witley Camp	8-12-16	Part III Orders 265 A.W. Eastmure MAJOR ADJUTANT, 124th BATTALION C.E.F.
9-3-17	124th. Bn.	Proceeded for Overseas Service.	Witley Camp	9-3-17	Part II Orders No.49 Lieut., Asst.Adjt. 124th. CCBG (Pors)

CERTIFIED CORRECT. 27 MAR. 1917 CANADIAN RECORDS, LONDON.

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

P.T.O.

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213 Army Form A. 36, or other official documents.
Date.	From whom received				
11-3-17	M.L.O.	Disembarked	Boulogne	11-3-17	N.R.
14/4/17	O.C. 124 Bn.	Confirmed in Rank of Cpl.	Field	9/3/17	D.O. Pt. 11 No. 81 d. 14/4/17
28/4/17	do	Wounded evac.	do	24/4/17	B.213 D.C.O. 13 8/5/17
28/4/17	11 C.F.A.	Comp. frac. R. Knee Cap frac. R. Femur GW. R. Finger	adm. 11 C.F.A. To 22 C.C.S.	24/4/17	A.36 E.3742 D.C.O. 16.
28.4.17	22 C.C.S.	do. adm.	22 C.C.S	24.4.17	A.36 E.3723 D.C.O. 20 d. 5.6.17
27.5.17	do.	do. Ser. III.	do.	24.4.17	A.36 E. ~~5389~~ 4301 D.C.O. 22 d. 12.6.17
3.6.17	do.	do. Ser. III.	do.	24.4.17	A.36 D.C.O. 25 d. 26.6.17
8.6.17	20 Gen. Hp.	Knee R. & Femur frac. Sev. adm.	20 Gen. Hp.	8.6.17	W.3034/W.2615
19.6.17	O.C. H.S. "Princess Elizabeth"	do. To Posted to 1st. Ont. Regt Depot, Shorncliffe. J M Anderson Lieut. for Lt-Col. A.A.G., Can.Sec.G.H.Q. 3rd. Ech.	England	19.6.17	W.3083/A.8395 D.O. Pt.11 No.110 d/30.6.17.
28.6.17	1st CORD	T.O.S. from 124th Bn.	E. Siling	19-6-17	Pt. II D.O. 111
22/1/19	D.O.S.	Discharged	Kingston	22/1/19	R.O. 23

R Hooper Lieut
for Colonel i/c Records.

R Chapel Lieut.
O.C. Discharge Section
No. 3 District Depot

Forms
I. 1237
12

Copy

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	724738	Cpl	Gladall	A

Year	Unit.	Age.	Service.
1918	124th Bn	25	2/12

Station and Date.

Disease G.S.W. Both legs, Comp fract. femur & patella, rt.
24-4-17 wounded by shell at Vimy
Five operations at C.C.S. for removal F.B., incisions
& drainage.

NO. 5 CANADIAN GENERAL HOSPITAL LIVERPOOL

Taplow
20/11/17 15/6/17 to 20th Gen'l
To Roby Th., Manchester
Two operations for drainage & removal of sequestra.
To Longford Hall, Stratford.
On arrival Taplow - 2 sinuses anterior to R knee joint.
Scar of entry lower ⅓ thigh - anterior aspect. Exit over
patella. Three operative scars around knee - discharge slight
Left leg Comp. fract. Tibia & fibula ~~upper~~ ⅓. Entry wound
inner aspect. Sinus inner aspect - discharging freely.
Small wound middle ⅓ left thigh - Movements of leg
fairly good - able to walk on crutches.
Liverpool - X ray prints & reports accompany patient.
J Taylor

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

Wt. W 6604/M 2870—1,500,000—8/17—H. & Sp. (10938). Forms/I. 1237/12. (E239)

[P.T.O.

Station and Date.	

724738.

DUPLICATE.

DUPLICATE

MEDICAL HISTORY SHEET.

Surname Gleadall Christian Name Abraham

Examined on 4th day of January 1916 at Lindsay

Birthplace City or Town Wombwell York County England

Apparent age 23 years

Trade or occupation Labourer

Height 5 Feet 6 Inches

Weight 140 Lbs.

Chest measurement Minimum 34 inches. Maximum expansion 37½ inches.

Physical development good

Small-Pox Marks none

Vaccination Marks Arm Right. none Left. Four Number Four

When Vaccinated last January 27th 1916

(a) Marks indicating congenital peculiarities or previous disease none

(b) Slight defects but not sufficient to cause rejection none

Approved by J. McCulloch Capt. Medical Officer

Rank 109th Overseas Battalion C. E. F.

Date	Fit or Unfit	Examined for Re-engagement,
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date	Result	Vaccinations.
27.1.16	good	J. McCulloch M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
18.4.16	Good	J. McCulloch M.O.
25.4.16	Good	J. McCulloch M.O.
2.5.16	good	J. McCulloch M.O.
22/9/16	T&B	H.O. Boyd

Enlisted on 1st day of January 1916 at Lindsay

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	109th Batt. C.E.F.	724738.		1.1.16.
Transferred to...				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.

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.

M. F. B. 313.

150M.—8-15.
H. Q. 1772-39-439.

Surname Gilchrist Christian Name W. Graham

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital.			Dates of Discharge from Hospital.			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.
		Day	Month	Year	Day	Month	Year				

4738.

M.R.I.

ORIGINAL

MEDICAL HISTORY SHEET.

ORIGINAL

Surname: Gleadall Christian Name: Abraham (F)

Examined on 4th day of January 1916 at Lindsay

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

Birthplace: City or Town Wombwell York; County England

Apparent age: 23 years

Trade or occupation: Laborer

Height: 5 Feet 6 Inches.

Weight: 140 Lbs.

Chest measurement: Minimum 34 inches; Maximum expansion 37½ inches.

Physical development: Good

Small-Pox Marks: None

Vaccination Marks: Arm Right. None Left. Four; Number Four.

When Vaccinated last: January 27th 1916.

(a) Marks indicating congenital peculiarities or previous disease: None

(b) Slight defects but not sufficient to cause rejection: None

Date	Fit or Unfit	Examined for Re-engagement.
		23 JUN 1917
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date	Result	Vaccinations.
27.1.16	Good	J. McCullock M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
18.4.16	Good	J. McCullock M.O.
25.4.16	Good	J. McCullock M.O.
2.5.16	Good	J. McCullock M.O.
22.9.16		Nasyd

Enlisted on 1st day of January 1916 at Lindsay

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	109th Batt C.E.F.	724738.		1.1.16.
Transferred to	124th OVERSEAS BATTALION C.E.F. PpCo-S			

CANADIAN

9 MAR 1917

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
THE DUCHESS OF CONNAUGHT TAPLOW BUCKS CANADIAN RED CROSS HOSPITAL	24 JAN. 1918	Impaired function Rt. hand.	Invalided to Canada. Abraham Gleadall

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.

M. F. B. 313.

150M.—8-15.
H. Q. 1772-39-439.

Surname Gleadall Christian Name Albert

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital. Day	Month	Year	Dates of Discharge from Hospital. Day	Month	Year	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.
2nd WESTERN GENERAL HOSPITAL, MANCHESTER. Manchester Royal Central Brand		19	6	17	20	11	17	# Left Tibia Right Femur and Patella	155.	Most of Patellae excised. Fractures quite united. Discharging wounds from Patella. X Ray not definite. 22.7.17. Sinus in of above drainage	A B Platt Lt.Col., R.A.M.C., T.F. Officer Commanding 2nd WESTERN GENERAL HOSPITAL.
DUCHESS OF CONNAUGHT CANADIAN RED CROSS HOSPITAL. Taplow, Bucks.	20	11	14	21	2	18	Do.	94	Trans: Can: Cadw Hosp Taplow. Woman's right leg healed after operation for removal bone debris. Knee joint & ankle free. Left leg. Sinus internally below knee & healed, still discharging slightly. Invalid to Canada 15.2.18. To: Kirkdale.	F Burwell Capt Can. Med.
No. 5 CANADIAN GENERAL HOSPITAL LIVERPOOL	21 FEB 1918				8 MAR 1918			Do.		Ankylosis right knee. Cannot flex thigh on abdomen. Movement of ankle good. Discharging wd left leg upper third. Thigh wound healed.	
H. M. H. S. LLANDOVERY CASTLE Kingston.	28-3-18				8-4-18					unchanged	J C Blezard Capt. R Moshell for Capt.
Queen's Univ Mil Hosp.	11	4.	18.		23.	1.	19.	- do -	287.	To Discharge Section	Stevenson Capt. A.M.C.

C.A.D.C.5009.
20M-1[illegible]-18.

724738 - G Headall - A - Cpl - 124 Bn

DENTAL CERTIFICATE.

The following Certificates will be attached to the Medical History Sheets of all Other Ranks being returned to Canada for disposal.

Date of Examination.	Present Dental Condition.	In case of loss or decay of teeth. Is the loss due to wounds, injury or disease directly attributed to Active Service?	Has he ever declined Dental Treatment.	Recommendation.
19/3/18	ok -		no	
		T. E. Robins capt RADC		

C.A.D.C. 4000.
10-1-18.

Copied 8-8-23

CASE HISTORY SHEET.

J M H Hospital. Rouglan Station.

No. 744436 Rank Cpl. Name Gledhill G. Age 25

Unit 109 Batt. Completed years of service (Where and how long) 4 Jan 1916 - 6 Mos France

Date of admission May 9/18 Date of discharge

Diagnosis Multiple Shrapnel Wounds Head Rt Hand Place of origin Vimy Ridge
Both thighs & Legs. Cpd fracture L. Leg & Rt femur & Patella etc.

CONDITION ON ADMISSION AND PROGRESS OF CASE Man enlisted 4 Jan 1916 went to England July 1916 - to France Oct 1916 - Was wounded at Vimy Ridge 24 Apr 1917 by Shrapnel causing cpd fract Rt Thigh & Patella & Left leg also injurie to left femur right hand and Right side of head
There is a sinus on inner border of left tibia in its upper third still some discharge Union of left tibia & fibula - apparently good - no evidence of shortening of left leg. Rt patella fractured and rt knee swollen no flexion at knee joint Rt femur healed and union good, man can bear weight on both legs - and walks slowly with the aid of cane
Tenderness over right knee. Good movement of hips ankles and feet Injury to ring finger of right hand - scars healed, Extension & flexion - normal. Small fragment of shrapnel on right jaw 1½" in front of external meatus. Occasional head ache on right side. Sight & hearing normal.
Lungs & Heart - normal

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

TREATMENT
(Especially any specific or special form.) Daily dressing Eusol & dodin gauze.

CONDITION ON DISCHARGE
(and disposal made of case.) Wound still open - daily dressing.

Date

L. N. Armstrong Capt.
Medical Officer i/c case.

M. F. B. 313a.
50M.—3-18.
1772—39-439.

CASE HISTORY SHEET.

Queen's Univ., Military Hospital. Kingston, Ontario. Station.

No. 724738 Rank X-Cpl. Name Gleadall, Abraham, Age

Unit S.C.R. Completed years of service (Where and how long)

Date of admission 1-9-19. Date of discharge 8-9-19.

Diagnosis G.S.W. left leg. Place of origin France.

CONDITION ON ADMISSION AND PROGRESS OF CASE

This patient is suffering from sinus in his left leg, due to G.S.W.

FAMILY HISTORY

(Tuberculosis, mental or nervous diseases.) Negative.

TREATMENT

(Especially any specific or special form) Daily dressing.

CONDITION ON DISCHARGE, (and disposal made of case.) Condition of this wound very much improved and needs dressing every three (3) days only. It is recommended that he be discharged from this Hospital and treated as an out-patient at his own home.

Date Sept. 8th, 1919.

LDS-HW.

Medical Officer i/c case.

M. F. B. 313a.
200M. 5-18.
1772-39-439.

CASE HISTORY SHEET.

Queen's Military Hospital. ~~Quebec~~ Kingston, Station.

No. 724738 Rank Bpl. Name Gleadall, A. Age 25

Unit 109th. Bn. Completed years of service Where and how long } 4th. Jan.1916 - 6 mos. France.

Date of admission May 9th/18. Date of discharge July 20 to Sick Dol

Diagnosis Multiple shrapnel Place of origin

CONDITION ON ADMISSION AND PROGRESS OF CASE

Man enlisted 4th. Jan.1916, went to Eng. July 1916, and to France October 1916. Was wounded at Vimy Ridge 24th April, 1917 by shrapnel causing compound fracture right thigh, patella and left leg. Also injuries to left femur right hand, and right side of head. There is a sinus on inner border of left tibia, in its upper third. Still some discharge. Union of left tibia and fibula - apparently good, no evidence of shortening of left leg. Rt. patella fractured and rt. knee swollen. No flexion at knee joint. Rt. femur healed and union good. Man can bear weight on both legs and walks slowly with the aid of cane. Tenderness over right knee. Good movement of hips ankles and feet. Injury to ring finger of right hand. Scars healed, extension and flexion - normal. Small fragment of shrapnel on right jaw 1½" in front of external meatus. Occasional headache on right side. ~~Slightxx~~ Sight and hearing normal. Lungs and heart normal.

FAMILY HISTORY Negative.

(Tuberculosis, mental or nervous diseases.)

TREATMENT Daily dressing eusol and iodiform gauze.

(Especially any specific or special form.)

CONDITION ON DISCHARGE, Wound still requires a daily dressing.

(and disposal made of case.)

Date Aug. 8th/18. L.N. Armstrong, Capt. AMC.

HW. Medical Officer i/c case.

M. F. B. 313a.
200M.—5-18.
1772-39-439.

B7061.

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

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS.

Date of Payment.	No of Acq. Roll	AMOUNT Francs	£	S.	$	¢	Place of Payment.	Name of Paymaster.	Remarks.
20/12/17	61597			10	2	43	Taplow	A J Campbell	
Jan 8 18	61848			10	2	43	"	"	
" 16	62047			10	2	43	"	"	
" 18	62120		3		14	60	"	"	
Feb 5	62266			10	2	43	"	"	
7	2381		10		48	67	"	"	
7	176		10		48	67	Remittance	"	
					121	66			

FORM D.M.S. 1300.
8137—50m—28/2/17.

Surname	Christian Name or Names	Reg. No.
Gleadall.	A.	724738.

Rank	Unit	Co.	Troop	Batty.
Cpl.	124 Pion 1st	G.O.	R.E.	

Hospital	Date of Admission
22 Cas. Clg. Station	24-4-17

Transferred		
#20 Gen Dannes Camiers	Hosp.	8.6.17
2 W. G. H. Manchester	Hosp.	19.6.17
15 Can. Gen Taplow.	Hosp.	21-11-17
5 Can. Gen. Kirkdale	Hosp.	22.2.18

Diagnosis Comp. Fract. R. Knee Cap. R
(1) Later Diagnosis (if changed), Fract R Femur S.W. R Finger S.W. Both Legs Frac. not ent
(2) S.W. Legs, Frac. R. Patella Femur & not ent
(3) L.T. Tibia & Fibula. add.
Additional Diagnosis: if more than one state present

DISPOSITION Date

REMARKS

Cl. 14.5.17. A35. R.F.B. W. 24.4.17.
— 25-5-17 @43 Dis
28.6.17 A61.
25.6.17 B.105
22-11-17 B71-3
26-2-18 B.149. (1)
4.4.18. B179-II

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

Dis. to Canada per H.S.Llandovery Castle from L'pool. 28-3-18.

EPITOME OF HOSPITAL TREATMENT.

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

*Name Gleadall Abraham Rank Cpl Regtl. No. 724738

Original unit 109th Present unit 24th Bn M. or S. Age 26 Religion Meth Fyle Depot 3-G-162 Ref. H.Q.

Port, ship, and date of arrival Halifax Olandovery 8-4-18

Next of kin (Father) Albert Gleadall 44 Bartholomew St Wambwell Yorks Eng

Address on leave

Address on discharge

Transportation issued Yes No Date Character on discharge

Previous occupation Asst. Loco. Foreman Date and place of enlistment Jan 4th 1916 Lindsay 849 D.T.E

Diagnosis G.S.W. Mult Date of Medical Boards 23-1-18 Cat D t 19/10/18

Date. TOS	Remarks.	Pt. 2 Order No.
18-4-18	Posted to Hospital Sec'n - Queen's M.H	HS1
7-5-18	Ceases to draw subsistence on returning from leave	HS33
7-6-18	Granted leave with subsistence to 14-6-18	HS55
20-7-18	Trans from Queens to Leek Island	HS97

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

(over)

Date.	Remarks.	Pt. 2 Order No.
4-9-18	Granted leave with Subsistence to 14-9-18	HS 143
24-9-18	Transferred from Rock Island to Queen's HH	HS 162
23-12-18	Granted leave with Subsistence to 30-12-18	HS 253
22-1-19	Discharged H.M Service (To T.S.C for Treatment)	HS

M.F.W. 192.
60M-3-18 (D.P.) 353.
1772-39-1243.

HPB

Number 124738 Rank cpl

Surname GLEADALL

Christian Name Abraham

Units 124 Bat Pnr Pn Theatre of War France

Date of Service 9-3-17

Remarks 368. Russell St

Latest Address Box 154 Midland Ont.

Roll No. B Page 14169

200m.-2-21.M.

REGT'L. No. 724738

NAME Gleadall, Abraham

H. Q. FILE No. 649

RANK AND CORPS Cpl. 124th Bn (form 109th Bn)

FOLLOWS No.

CABLE

No.	Date	NATURE OF CASUALTY
M 4351	13-5-17	E. Reported wounded April 24th 1917

FOLLOWS

L. L. 18950—M. & D. 7789

M. F. W. 42—30M.—4-17.
H. Q. 1772-39-893.

LIST NO.	HOSPITAL	DATE OF ADMISSION	REMARKS
A 35	Rep. from Base	24-4-17	wounded (not stated)
A 43	# 22 Cas Clearing stat	24-4-17	Comp. fract. R. Knee Cap.
A 61	to No 20 Gen. Dannes Camiers	8-6-17	GSW Knee R Femur fract. sev.
B 105	2nd Western Gen. Manchester	19-6-17	Shn. both legs frac L Tibia & Fibia & R. arm
B 71.	Exc 15 Can. Gen. Taplow	21.11.17	Sw both legs frac.
B 149 (1)	5 Can. Gen Kirkdale	22-2-18	S.W. legs, frac R Patella
~~B 149 (2)~~	Ex " " " "		Femur & L Tibia & Fibula (st. & ev. lnt leg)
B 179 (2)	Invalided to Canada	28-3-18	" " " "

FORM R. 149.
7106—250m—7/2/17.

Name GLEADALL.Abraham *Rank* SPL *Reg. No.* 724738

Unit 124th.PIONEERS C. E.

Next of Kin Albert Gleadall.44.Bartholomew St.Wombwall Yorkshire Eng

Date 1917	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
Apr.24.	Reported from Base WOUNDED Not Stated				A.35.M.6174 12-5-17	4351
	~~Remained at Duty~~					
24.	No.22.C.C.S.		Comp Frac R.Knee.Cap Frac		R.Femur	
June 8.	No. 20 Gen Hosp	D. Camiers	do.	A 61	R.Fgr.A.43	
19.	2nd West Gen	A. Rouen	Sh. 1st Lep. Fract		Gleadall A.	B 110
21-11-17	15 C.C.S.	Taylor	Tetanus	B 71		6595
22-2-18	5 C.G.H.	Liverpool	SW Legs Frac R. Patella & Femur & L. Tibia & Fibula	B 144		13133
28	3	Invalided to Canada	do	13179		6265
		HP				

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List

MD2
S.O.S. Demob. 30/9/19
BB. 2256 & 3818 5-11-19 [illegible]

NAME Gleadall, Albert

RANK & No. Pte. ~~Cpl~~. Temp Lieut. (28-4-19, Turner. 4057) 724739.

CORPS 109th Batt.

ENLISTMENT, PLACE Lindsay, Ont. DATE Jan. 12th, 1916. S.

FORMER CORPS Nil.

COUNTRY OF BIRTH England, yorkshire.

NEXT OF KIN Gleadall, Albert (Father),

ADDRESS OF NEXT OF KIN 44 Bartholomew St., Wombwell, yorks. Eng.

DISCHARGE, PLACE DATE

O/S 23-7-16 488/14.

M. F. W. 22. 100 m.—9-15.

L. L. 85779—M. & D.—6011.

R/6 25/7/19 37/6 Leave.

H. Q. 1772-39 839.

REMARKS:

No. 724 738 RANK Pte ~~L/Corpl.~~ ~~Corpl.~~ NAME Gleadall Abraham

T. O. S. 1-1-16. UNIT 109th. Battalion.

D. O. Sq. 5-1-16

M. D. 3

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916	1916.			
Jan 1.	Jan 31	✓		
Feb.		✓		
Mar.		✓		
April.		✓		
May.		✓	Pro. L. Corpl. 12-5-16.	S.O. 149 of 12-5-16.
			Pro. Corpl. 14-5-16.	S.O. 153 of 14-5-16.
June.		✓		
July.		✓		

UNIT SAILED
JUL 23 1916

Married or Single: Single

Place of Birth: Wombwell Yorks. Eng.

Name and Address of Next of Kin: Albert Gleadall
44 Bartholomew St Wombwell Yorks Eng

Relationship of Next of Kin: Father

Name and Address of Next of Kin:

Relationship of Next of Kin:

Separation Allowance Monthly $ — Effective (Date):

Payable to:

Relationship of Dependant:

A.P. checked & found Correct 26.3.17 [illegible]

Casualties, Promotions, &c.

Particulars	Effective Date	Authority
Reverts Corporal confirmed France	9.3.17	8081 1414

Admissions to Hospital, &c.

Date Admitted	Date Discharged	V. or A.	Name of Hospital

Reg'l. No. 724738 Rank: Cpl Name: Gleadall Abraham

If in Perm. Corps What Unit: Unit: 109th Bn

Transferred to	124 Bn.	Date 21.1.17	Authority 21034/3
Transferred to	16 RR	Date 1/4/17	Authority 8.12.17 Mustr. Roll
Transferred to	Non Eff "a"	Date 1/3/18	Authority Dis to Canada
Transferred to		Date	Authority

Permanent Force Allowances

Place of Attestation: Lyndsay Ont

Date of Attestation: Jany 4th 1916

Assigned Pay Monthly $ 15.00 Date Effective: Aug 1st 1916

Payable to: Mrs. Albert Gleadall 44 Bartholomew St Wombwell Yorks Eng — Relationship: Mother

Assigned Pay Monthly $ — Date Effective:

Payable to: — Relationship:

Stop-Payment Form (Assigned Pay) Rendered (Date) Stopped 13/2/18 Effective 1/2/18 — Reason: Discharged to Canada

Discharge Date and Place: Canada 14/2/18 — Reason and Authority: Invalided Taplow 9/2/18 15 R 36

Account Transferred to Non-Effective Branch (Date):

Account Transferred to Officers' Pay Branch (Date): P Ronald

Date	Pay No. of Days	Pay Rate	Pay Amount $	Pay Amount c.	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount $	Field Allowance Amount c.	Working or Special Pay No. of Days	Working or Special Pay Rate	Working or Special Pay Amount $	Working or Special Pay Amount c.	Assigned Pay Credits	Other Credits	Total Credits	Acquittance Rolls 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	Cash Payments 1	2	3	4	Assigned Pay	Other Charges	Total Debits	Balance Credit	Balance Debit	Pay Withheld or Deferred	Pay Available for Issue	Remarks
July 31														6 80	6 80									Bal. from Canada							6 80				
Aug 31	31	1.10	34 10		31	10	3 10								34 10 / 7 20													15		15	29		1 50		
Sept	30		33				3								36			39	31/8/16	70	15/9/16			21 90 ✓	7 30			15		44 20	20 80		3		
Oct	31		34 10				3 10								37 20 / 1 10 / 2 20			30/9/16		147	15/10/16			9 24 ✓	7 30			15		32 04	25 96		4 50		
Nov.	30		33				3								36			173	30/10/16					9 73 ✓				15		24 93	37 23		6 00		
Dec 1917	31		34 10 / 1 30				3 10								37 20			215	30/11/16					7 30 ✓				15		27 17	47 26		7 50		21034 3 R 12.16 124 Bn. 21.1.17
Jan	20	1.20	24												24													15		15	46 26				
Jan	11	1.20	20 / 13 20	60											21 40 / 13 20			460	15/1	459	31/1			7 30 ✓	14 60			90		21 90	47 56		9 00		
Feb	28	1.10 / .10	33	60											33 60			565	15/2	562	28/2			7 30 ✓	14 60			15		36 90	44 26		10 50		
Mch	31		37	20											37 20					614	20/3	1 2 4 5 6 7 383	29/2		3 49 ✓	29 20		15		47 69 / 13 49	33 77 / 51 28		12 ·		
April	30		36	·											36 ·			14	5/4					44506 ✓	3 49			15		18 49	51 28		12 50		
May	31		37	20											37 20			58	20/4					15521 ✓	3 49			15		18 49	69 99		15 00		
June	30		36	·											36 ·									41005				15		15 ·	90 99		16 50		
			400	80										6 80	407 60									75 12	47 29	29 20		165		316 61					

Spoth 2L no 7. 28-3-18, b 111-63.
Endorsed AR 6483 - 17

724738 Cpl Gleadall Abraham

(Allty 15.00)

DATE 1917	PAY No. of Days	PAY Rate	PAY Amount $	PAY Amount c.	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount $	Field Allowance Amount c.	Working or Special Pay No. of Days	Working or Special Pay Rate	Working or Special Pay Amount $	Working or Special Pay Amount c.	Assigned Pay Credits	Other Credits	Total Credits	Acquittance Rolls 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	Cash Payments 1	2	3	4	Assigned Pay	Other Charges	Total Debits	Balance Credit	Balance Debit	Pay Withheld or Deferred	Pay Available for Issue	Remarks
Forwd			400	80										6 80	407 60									75 12	47 29	29 20		165 -		316 61	90 99				
July	31	1.10	34	3 10 / 10											3 10 / 34 10							A80182					15		15	110 09		18		
Aug	31		37	70											37 70							A142253					15		15	135 39		19	50	
Sept	30		36												36	48 15						Lia-Remb 17/9	74469	5 35		4 87	15		25 22	146 17		21		
			511	20										6 80	518 00									80 42	47 29	29 20	4 87	210		371 83	146 17				

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED PAY	SER. ALLCE. ENG.
		~~146 17~~							146 17		
Oct	Cpl Pay	37 20		a/c 773371			15 00		168 37	22 50	
Nov.	Cpl Pay	37 20					15 00				
		36.		465011			15				
Dec	" "	37 20		396012 f 3-15 Dec 1917			15				
				A.R. 3114 1/11/17	9 73 / 9 73		30		201 84	25 50	
1918 Jany	Cpl Pay	37 20		L 3/9/18 f 3-18 Jan 1918.			15				
				C.R. 6 865 27/11/17 Napland	4 87						
				" 61259 5/12/17 "	2 43						
		37 20			7 30		15		216 74	27	
Feb 1/13	" "	15 60									
Int on Deferred Pay		95							233 29		
				aR. C2120. 15/1/18 #15 C.G. Hosp		14 60			111 63		
				" 620417 16/1/18 #15 C.G. Hosp		2 43					
				Gen Rem. 178 9/2/18 London		48 67					
				~~Gr. 62 aR 115 17/1/18 1st Batt.~~		~~6 08~~					
				~~Gr. 1140 5/1/18~~		~~7 24~~					
				aR C1597 20/12/17 #15 C.G. Hosp		2 43					
				aR C1848 8/1/18 " "		2 43					
				aR C2166. 5/1/18 " "		2 43			160 30	27	
		16 55				72 99					

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED PAY	SER. ALLCE. ENG.
Apl 1918				aR 864383 86544 15.3.18 mkt 17/8 ann		2H3 End					
"				aR 43815 86544 7.X.18 mkt 17/20 ann		48 67 ok					
June			5110								Nil

Balance transf'd. to Canadian Liability Account

Balance transferred to N. E. Branch nil

A3M. FORM REN'D 13/7/18 EFFED 1/7/18
DISCHARGED TO Canada DATE 24/7/18
PAYBOOK VERIFIED a & m
Credit BAL. $111.63 L.P.C. REN'D 13/7/18
AUTHY. Sahlow 4/7/18. 15 6/6

Checked

Form W. 23

Form W. 133

Form W. 178 or A.F.B. 122

Form W. 54 or A.F.B. 103

Form W. 44

.....

Form B. 313 or A.F.B. 178

227, A.F.B. 179 or A.F.A. 45

Form B. 465

V. 129 or D. M. S. 1375

Form B. 263

Form B. 263a

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

1. No. 724738

2 Rank. Corporal

3. Name. GLEADALL, Abraham

4. Unit. No. 3 District Depot.

5 Date of Discharge 22-1-19 Place Kingston, Ont.

6 Reason for Discharge being medically unfit for further Service and in order that further treatment may be carried on by the S.C.R.

7. Authority. Med.. Board D/ 8-1-19 R.O. 1080

8. Proposed Residence after Discharge Box 104 Midland, 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.? 39

A. Gleadall

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place Kingston, Ont.

Date 22-1-19

Medical Documents Forwarded to S.C.R. ~~or B.P.C.~~ on Date 30-1-19

Signature

(O. C. Discharging Unit.)

O. C. Discharge Section No. 3 District Depot

M.F.B. 218a—300M.-11-18—1772-39-113.

LIST OF DISCHARGE DOCUMENTS.

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

1. No. 724738

2 Rank. Corporal

3. Name. GLEADALI

4. Unit. No. 3 Dis

5 Date of Discharge

6 Reason for Discharge

in order that fur

7. Authority. Med..

8. Proposed Residence a

9. CER

I hereby acknowledg

M. F. W.? 39

10.

The discharge of t

Place Kingston, Ont

Date 22-1-19

M.F.B. 218a—300M.-11-18—1772-39-113.

Z/

paration, dispatch,
ge documents.

ed, the documents retained
placed inside this form.
ng, an explanation of the
fficer, must be substituted
r in charge of records will
n, any documents required
ments enumerated in the
this form in the sequence

n the colours at home as
n, Army Form B. 268 will
duplicate attestation and
er in charge of records 10
ge in the case of invalids,
will then extract from the
ed to complete the list of
margin, place them in this
duplicate attestation with
Secretary, Royal Hospital,
ed abroad, the same pro-
the exception that the
fficer in charge of records
except in the case of men
from local battalions or

abroad for discharge, the
attestation will be placed
en for transmission to the
gether with the following

9 or Army Form B. 264).
67) if entitled.
rm B. 121) when required under

ents retained therein will
who will extract from the
ed to complete the list of
argin and place them in

nlisted pensioners, on re-
arge of records, who will
documents required to
numerated in the margin,
e whole to the Secretary,
cause of discharge.

tions of recruits who are
will be retained by the
vill be destroyed.

documents will be sent,
the officer in charge of

eipts are not required, in
the War Office,

of men not entitled to
ave final charge of them,
B. 279, and that officer
and return Army Form
g, he must at once apply

the discharge documents
l numbers, and enter the
ok No. 129.

This space to be left blank for the Chelsea Number.

266.

Army Form B. 268.

Proceedings on Discharge.

(When forwarded for confirmation the documents named on page 4 should be enclosed.)

No. 724738. Army Rank Corporal.

Name G L E A D A L L. Abraham.
(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)

Corps 109th. Battalion.

Battalion, Battery, Company, Depôt, &c. 1st, C. O. R. D. (O)
(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)

Date of discharge

Place of discharge Invalided to Canada for further treatment

1. *Description at the time of discharge.*

Age _____ years _____ months

Height _____ feet _____ inches

Chest measurement { girth when fully expanded _____ ins. / range of expansion _____ ins.

Complexion

Eyes

Hair

Trade

Intended place of residence (To be given as fully as practicable)

Descriptive marks.

(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)

2. The above-named man is discharged in consequence of

(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)

To be filled in on the soldier quitting the Colours.

3. Military character :—

4. Character awarded in accordance with King's Regulations :—

Certified that the above is an accurate copy of the character given by me on Army Form B. 2067* and that Army Form D. 489 was awarded in this case.

Initials of Commanding Officer.

Army Form B. 2088 has been issued to*

* Strike out if not applicable.

D. D. & L., London, E.C.
(A8689) Wt. W7717/M2626 500,000 9/17 Sch. 39 Forms B. 268 4t

[OVER.

5. He is in possession of the following number of G.C. badges (If the man is a N.C.O. and enlisted prior to 1st July, 1881, the number he would have been entitled to had he not been promoted should be stated).

Is it probable that he will be entitled to another good conduct badge before the confirmation of these proceedings?

Classification for service, or proficiency pay... ... ... Class _____

6. **Campaigns, Medals and Decorations** _____

Certificate of education ..... _____

7. His accounts are correctly balanced, and I have impartially inquired into all matters brought before me **in accordance with Regulations.**

(Place) _____ _____

(Date) _____ *Commanding* _____ *Battn.* _____ *Regiment.*

8. *Certificate to be signed by the soldier on discharge.*

I hereby acknowledge that I have received all my pay and allowances (including clothing allowance), and all **just demands up to the present date, subject to the reservations of the claims noted on the 3rd page.**

(Place) _____ _____ *(Signature of Soldier.)*

(Date) _____ _____ *(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 at his own request.*

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

_____ *(Signature of Soldier.)*

10. *Statement of service.*

Service towards engagement to _____ (the date to which the record of service is completed) _____ years _____ days.

Further service " " _____ (the date of confirmation of discharge) ... ... _____ " _____ "

Total ... _____ " _____ "

11. *Confirmation of discharge.*

The discharge of the above-named man is hereby confirmed for **(date)**

(Place) _____

Signature _____

(Date) _____

Commanding officers (or the Paymaster if at Netley) will issue to every discharged soldier whose claim to pension, either on account of service or disability, is to be brought under the consideration of the Chelsea Board, a memorandum for his guidance on Army Form D. 401, and will at the same time transmit to the Secretary, Royal Hospital Chelsea, a descriptive return of the man on Army Form D. 400.

(To be signed by the

s _____

_____
_____
_____
_____
_____
_____

all matters brought before me

_____

_____ *Battn.* _____ *Regiment.*

ing clothing allowance), and all
ted on the 3rd page.

_____ (*Signature of Soldier.*)

_____ (*Signature of Witness.*)

proceedings to him for signature, a

his own request.

Majesty's Service.

_____ (*Signature of Soldier.*)

leted) _____ years _____ days.

... _____ " _____ "

_____

tal ... _____ " _____ "

_____

scharged soldier whose claim to
deration of the Chelsea Board,
ime transmit to the Secretary,

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.)

_____

LIST OF DISCHARGE DOCUMENTS.

1. Proceedings on discharge. (Army Form B. 268.).
2. Proceedings on transfer to reserve (if any). (Army Form B. 2056.)
3. Duplicate attestation.
4. Army Form B. 97 (if any).
5. Declaration of change of name (if any).
6. Re-engagement paper (if any). Army Form B. 136).
7. Authority for continuance, or extension, of service (if any). Army Form B. 221.)
8. Court of Inquiry on an injury (if any) (Army Form A 2.)
9. Regimental conduct sheet. (Army Form B. 120).
10. Company conduct sheet. (Army Form B. 121.)
11. Copies of convictions by Civil Power (if any).
12. Medical history sheet. (Army Form B. 178)
13. Medical report on invalid (if any). (Army Form B. 179).
14. Copy of receipt for purchase money (if any).
15. Attestation of fraudulently enlisted man for corps in which he has not been held to serve (if any).
16. Detailed statement of former service allowed to reckon towards pension (if any).
17. Copy of 3rd page attestation (in the case of men from abroad entitled to deferred pay who go to Netley or the discharge depot for discharge).
18. Descriptive return (Army Form D. 400), where required. See section 11 on second page.
19. Active service casualty form. (Army Form B. 103).
20. Employment sheet. (Army Form B. 2066).

In the case of recruits who are rejected before, or on, final approval, the discharge documents will consist of—

1. Duplicate attestation. (On third page the date and cause of discharge will be entered and signed by the competent military authority).
2. Medical history sheet (if any). (Army Form B. 178).

Instructions as to the preparation, dispatch, and custody, of discharge documents.

1. When a soldier is to be discharged, the documents retained with the duplicate attestation will be placed inside this form. Should any of the documents be missing, an explanation of the deficiency, signed by the commanding officer, must be substituted for the missing document. The officer in charge of records will then extract from the original attestation, any documents required to complete the list of discharge documents enumerated in the margin, which will then be placed in this form in the sequence given.

2. When men are discharged from the colours at home as medically unfit, or with claims to pension, Army Form B. 268 will be sent confirmed, together with the duplicate attestation and documents retained therein to the officer in charge of records 10 days in advance of the date for discharge in the case of invalids, and 14 days in other cases. This officer will then extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin, place them in this form, and after carefully checking the duplicate attestation with the original forward the whole to the Secretary, Royal Hospital, Chelsea. When such men are discharged abroad, the same procedure will be adopted as above, with the exception that the discharge documents will be sent to the officer in charge of records immediately after discharge takes place (except in the case of men who are granted gratuities on discharge from local battalions or companies, Royal Artillery.

3. When soldiers are sent home from abroad for discharge, the documents retained with the duplicate attestation will be placed inside this form and sent home with the men for transmission to the officer who carries out the discharge, together with the following additional forms :—

(*a*) Discharge certificate (Army Form B. 2079 or Army Form B. 264).
(*b*) Character Certificate (Army Form B. 2067) if entitled.
(*c*) Copy company conduct sheet (Army Form B. 121) when required under King's Regulations.

The duplicate attestation and documents retained therein will be sent to the officer in charge of records, who will extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin and place them in this form.

4. The discharge documents of re-enlisted pensioners, on re-discharge, will be sent to the officer in charge of records, who will extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin, place them inside this form, and forward the whole to the Secretary, Royal Hospital, Chelsea, irrespective of the cause of discharge.

5. The original and duplicate attestations of recruits who are rejected before, or on, final approval will be retained by the approving officer for one year, when they will be destroyed.

6. In all other cases the discharge documents will be sent, directly the discharge is carried out, to the officer in charge of records of the unit concerned.

7. Postage need not be paid, and receipts are not required, in the case of documents sent to Chelsea or to the War Office,

8. When the discharge documents of men not entitled to pension are sent to the officer who will have final charge of them, they are to be accompanied by Army Form B. 279, and that officer will, if they are found to be correct, sign and return Army Form B. 279. Should any document be missing, he must at once apply for it.

9. The officers having final charge of the discharge documents will arrange them according to regimental numbers, and enter the names in the alphabetical index, Army Book No. 129.

This space to be left blank for the Chelsea Number.

266.

(When forwarded for

No. 724738.

Name G L E A
(The name must agree strict

Corps 109th. Ba

Battalion, Battery, Company,
(If attached to the Regular Estab

Date of discharge

Place of discharge In

1.

Age years

Height feet

Chest measurement { girth when fully / range of expans

Complexion

Eyes

Hair

Trade

Intended place of residence (To be given as fully as practicable)

(The measurements and descri
home from abroad for discharge, th
confirms the discharge at home.)

2. The above-named mar

(The cause of discharge must
certificate. If discharged by superi

To be filled in on the soldier quitting the Colours.

3. Military character :—

4. Character awarded i

Certified that the above is an

Army Form B. 2088 has been

D. D. & L., London, E.C.
(A8689) Wt. W7717/M2626 500,000 9/17 Sch. 39

h reasons, quoting the

ration.)

ecommendation.)

igned by the invalid
to the invalid and if
regarding Sections 7,
ent previously made,

AMC ..... *President.*

apt. AMC } Members

the treatment which

statement

President.

} Members

l of Medical Services.

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 Kingston DATE 9-1-19

1. 1 (*a*) Unit 124th Bn (*b*) Regimental No. 724738 (*c*) Rank Cpl

(*d*) Surname Gleadall (*e*) Christian name Abraham

(*f*) Home address

(*g*) Next of Kin (*h*) Relationship

(*i*) Address of Next of Kin

2. Age last birthday 28 Date of birth Jan 4, 1916

3. Enlistment, or Appointment (if an Officer) (*a*) Place (*b*) Date

4. Personal description:

(*a*) Height ~~5'8"~~ 5' 6" (*b*) Weight (stripped) 140 (*c*) Complexion fair

(*d*) Colour of hair light (*e*) Colour of eyes brown (*f*) Identification marks, Scars, etc.

4 vaccination marks left arm

5. Former trade or occupation assistant locomotive foreman

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).		Years	Days

		Periods From	Periods To
Canada	109th Bn	Jan 4/16	Oct. 1916
	124th Bn	Oct 1916	Apr 4-18
England	#3 DD	Ap4, 1918	To date
France or other theatres of War	4 months		

7. Original disease, or injury GSW rt knee, GSW left thigh

(*a*) Date of origin April 24, 1917 (*b*) Place of origin Vimy Ridge

(*c*) Cause Shrapnel

M. F. B. 227.

300M.—8-18.
1772-39-117.

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.)

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- Man claims of complete loss of movement of right knee. with weakness of leg.

A scar running from centre of healed scar upwards and outwards for 4"- 2 other scars on outer aspect of leg for drainage of leg. All scars healed. Complete bpny ankylosis of knee joimt Union of bones good.

2. Subjective- Left thigh slightly weak.

2. Objective- ℄ S.W.Left leg-point of entry indicated by a scar on anterior surface 1½" above upper border of patella.Just grazing the bone. several scars for drainage above knee, all healed and sound with no disability.

3. Objective- Man claims weakness of left leg, with discharging sinus.

3 Subjective- S.W inner aspect of left leg 3" below line of joint a freely discharging sinus present in scar about 2" deep. Compound fracture of tibia and fibula at junction of upper and middle thirds-union good. Bones in good position.Knee normal Man gets around with aid of cane but leg tires easily

(*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 yes Cardio-Vascular System yes (If pulse rate is abnormal, B. P. will be taken.) Genito-Urinary System yes (Albumen and Sugar will be excluded.)

Special Senses Respiratory System yes Integumentary System yes

Disturbances of Mentality yes Digestive System yes Muscular System yes

Osseous and Joint Systems Any other general condition

Exray report as follows- right knee- comminuted fracture of patella with 3 large and a numberof small fragments of bone visible Fracture incomplete of outer anterior part of lower end of femur between the 2 condilues and involving the lateral condilue to a slight extent.There is some bony ankolosis on anterior aspect of knee joint- the synovial membrain is thickened Left knee- There is a fracture of the tibia about 3" below knee joint-a large perforation of the bone is visible,which is partly filled by 2 masses of bismuth paste. There is a small FB inbedded in the medial condyle of the femur and large FB distinctly past the upper end of lower third of femur not far beneath the skin.Several minute FB's are visible in the tissue of the lower third of the thigh-some anterior and some posterior to knees.

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

Went to France in Jan.1917,wounded April 24,1917- past through several Eng.hospitals, returned to Canada April 1918, admitted to Q M H April 11,1918.

ns: e.g. (*a*) Weakness—slight, moderate, est of the body, or of some of its parts, for

thorough physical examination. Import- "History" must be recorded in Section findings to be stated first, then subjective

ent of right knee.

scar upwards and
of leg for
bpny ankylosis

ated by a scar on
tella. Just grazing
ee, all healed and

with discharging

elow line of joint
ut 2" deep.
ion of upper and
on. Knee normal
easily
Section 9 (*a*) above?

Urinary System yes
men and Sugar will be excluded.

tary System yes

scular System yes

acture of patella
f bone visible
lower end of
he lateral
y ankolosis on
embrain is thickened
about 3" below knee
ble, which is partly
a small FB inbedded
FB distindly
t far beneath the
issue of the lower
terior to knees.

,1917- past through
ril 1918, admitted to

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 Service enlistment, and not included in Section 10 (*a*).)

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

11.—(*a*) Did the disabling condition have its origin before enlistment? N/A

(*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.)

12. Was the disability caused, or aggravated; (*a*) by intemperance, or improper conduct; or (*b*) by unreasonable refusal to accept treatment? 1 & 2 not applicable

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? 1 permanent, 2 nil, 3 six months improving

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

English Military Hospitals

Queens Military Hospital since Apl 11, 1918

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit?
(If the answer is "yes" state nature of treatment required and probable duration)

Yes, daily dressing and remedial exercise

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

17. Recommendation That this man be discharged frm the Army and placed under care of SCR for further hospital treatment.

(SGD) R.J. Tucker, Capt, A.M.C.
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 .....

(Sgd) Cpl. A. Gleadall ..... Rank.
Signature of invalid examined.

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.

Yes

19. Is the invalid fit for

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

20. It is certified that the invalid
(*a*) Does require treatment. (Give the nature of the condition and of the treatment required and its probable duration.)

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

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

Placed under care of S.C.R.

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.

(SGD) Wm. Gibson Capt. AMC *President.*

PLACE Kingston (SGD) S. Asselstine, Capt. AMC } Members

DATE Jan 8, 1919

TO BE COMPLETED WHEN TREATMENT IS REFUSED

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

Witness..... Signed.....

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

President.

PLACE..... } Members

DATE.....

APPROVED BY

Assistant Director of Medical Services.

DATE Jan. 13, 1919.

APPROVED BY

Director-General of Medical Services.

DATE.....

MED

INS

1. In using this Form the issued by the B.P.C.
2. The Medical Officer in c and will obtain the Medical Officers is the Medical Board."
3. In answering the questio his condition. They state the authority whether such staten Regimental or other
4. Special care is required i
5. If space provided under Medical Board.
6. A note will be made of a
7. Under no circumstances invalid, directly or in
8. The nomenclature of di order in which they Messrs. Harrison &

1. 1 (*a*) Unit.....124th.
(*d*) Surname.....
(*f*) Home address.....
(*g*) Next of Kin.....
(*i*) Address of Next of
2. Age last birthday.....
3. Enlistment, or Appointm
4. Personal description:
(*a*) Height.....
(*d*) Colour of hair....
5. Former trade or occupa
6. Service (The informatio documents, but if docum statement may be take effect. Periods of servi elsewhere should be not

Canada .....
England.....
France or other theatres of

7. Original disease, or inju
(*a*) Date of origin.....
(*c*) Cause.....

M. F. B. 227.

300M.—8-18.
1772-39-117.

8/5

Corp. A. Glendall 124738

R. Rice

Forms
I. 1237
12

Army Form I. 1237.

V. CAN. GENERAL HOSPITAL LIVERPOOL

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
1110	724738	CPL	LEADALL	ABRAHAM
Year 1917	Unit. 124th. CANADIANS.		Age. 25	Service. 18/12

Station and Date. Taplow 20-11-17

Disease G.S.W. R. Knee left leg.

Battle Casualty 24-4-17 By shrapnel at Vimy.

Five operations at (C.C.S. #22) - for removal of B. incisions and drainage.

To 18-6-17 20 General.

To Roby St Manchester
Two operations for drainage and removal sequestra.
To Longford Hall Stratford

Arrived here in fair general condition. Two sinuses anterior to R. Knee joint. Joint ankylosed. Free drainage. Scar of entry lower 1/3 thigh anterior aspect - Exit over patella. Three operative scars around knee. Shortening slight left leg - Compound fracture tibia & fibula upper 1/3 Entry wound inner aspect. Sinus inner aspect draining well. Discharging freely. Small wound middle 1/3 left thigh. Movements of left leg fairly good. Able to walk on crutches.

C. Shawcee Captain
RAMC

22-11-17. Discharge free.

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

(41502) Wt. W 11203—M 1150. 1,450,000. 6/12 16. C.F.& S. Forms/I. 1237/12. (E239)

P.T.O.

Station and Date.	
29-11-17	Discharge less. Improving. GBW
	X ray. Old comm. frac. up 1/3 tibia partial union. No displacement. Probable sequestrum in centre of shaft. Six in below joint. R Knee. Com. fracture of patella. Some inflam. changes of arthritis surfaces of femur & tibia. JDM.
6-12-17	Small piece of sequestra removed. GBW.
13-12-17.	Taken to OR. Ether given. Sinus in R. leg opened up and bone removed. Sinus left leg curetted and packed with B.I.P. GBW.
20-12-17.	Beginning to heal. Considerable discharge still. GBW.
27-12-17	Both legs doing well. GBW.
10-1-18.	Right leg healing well. Left sinus healing slowly. GBW.
21-2-18	To Kirkdale for Invalid to Canada. GBW. well capt Cama

Forms
I. 1237
12

Medical Officer: Dr Clarke

Whether U.K. or Expeditionary Force: F E F

(If latter, state which).

Wounded Seven.

Army Form I. 1237.

Case a

MEDICAL CASE SHEET.*

Ward: A 1

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
FC 1033	724738	Cpl	Gleadall	Abraham
Year 1917	Unit. 124th Canadians Pioneers 4 C. Div.		Age. 25	Service. 18 months

Station and Date. 2nd W. G. Hosp Leaf Square 20.6.17

Transfer Class. C 7. 1

Disease Shrapnel wounds both legs. Fracture left Tibia and fibula & right patella & compound.

Date of Onset 24-4-17.

Left leg. wound of entry inner side below knee. Abscess formed in thigh & incised at No 22 CCS on 7-5-16.

Rt leg. wound of entry (healed) on inner side a little above upper margin of tibia.

Semi lunar incision made below patella on April 24th, and pieces of patella removed

Eusol dressing and splint to right leg

Jt + Ray Right leg.

12.7.17 For transfer. Andrew Clarke M O i/c

13.7.17 Transferred to Manchester R. Infirmary C.B.

22.7.17 Incision & abscess & drainage. A.C.

25/10 Fit for Rel X.

To return for requisitioning later if necessary S/S Trefor Capt

Transfd to Longford Hall Stretford

Father. Mr Albert Gleadall

44 Bartholomew St

Wombwell

Yorkshire

Next of kin:

20.11.17. Transferred to No 15 Canad. Gen: Hosp Taplow.

Antitetanus Inocn.	
Units.	Date.
500	22.6.17

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

(44502) V/t W 11203—M 1150. 1,450,000. 6/12 16. C.F.& S. Forms/I. 1237/12. (E239)

P.T.O

Station and Date.	

6

2nd WESTERN GENERAL HOSPITAL,
LEAF Sq., PENDLETON.

Hospital.

Army Form W. 3172.
(In pads of 50.)

Ward A1. No. of Bed . Date 6.7.17.

Regtl. No.	Rank and Name	Corps	Part to be X-Rayed
724738.	Cpl. Gleadall. A.	124th Canadians	Right leg.

Short History of Case.
(To be completed by M.O. i/c case)

Shrapnel wounds both legs.
? Condition of Right Knee
? Fracture lower end of Rt-femur.
? FBs or Sequestra.

Signature of M.O. Andrew C Clark
Date 6.7.17.

Report on Result of X-Ray Examination.
(To be completed by Radiographer.)

No. of Plate 12348

B Post
C Ext

Fract. of patella with dead bone at its upper part. No FB.
Probably arthritic changes in joint.

Signature of Radiographer W S Bythell
Date 9 JUL 1917 CAPT. R.A.M.C., T.F.

(9 38 40) W 8290—3262 100,000 8/15 H W V(M 163) Forms/W. 3172/1
15134—116 300,000 1/16

TELEGRAPHIC ADDRESS:
"MEDSERCAN LONDON."

C 19

OVERSEAS MILITARY FORCES OF CANADA,

TELEPHONE: MUSEUM 4470 - 5.

PLEASE ADDRESS ALL COMMUNICATIONS TO

DIRECTOR OF MEDICAL SERVICES,
PEMBROKE HOUSE,
133 OXFORD STREET
LONDON, W. 1

TO:-

10th October 1917.

and quote A.M.D. 2/22-1-2-G

The Officer Commanding,
Manchester Royal Infirmary,
MANCHESTER.

RECEIVED
11 OCT 1917

No.724738.,Cpl.
Gleadall.,
124th Canadians.

Referring to your communication of the 8th October, transmitting report on the marginally named N.C.O., will you be kind enough to advise this Office when this man is in a fit condition to transfer, in order that the necessary instructions regading his disposal may be sent to you.

.....Major.,
D/A.D.M.S.,
for D.M.S., Canadian Contingents.

WD/CG.

TELEGRAPHIC ADDRESS:
"MOSSRICAN, LONDON."

OVERSEAS MILITARY FORCES OF CANADA.

TELEPHONE, MUSEUM 4470-5.

PLEASE ADDRESS ALL COMMUNICATIONS TO
DIRECTOR OF MEDICAL SERVICES,
PEMBROKE HOUSE,
183 OXFORD STREET
LONDON, W. 1

TO:-

10th October 1914.

A.M.D. 2/22-1-2

The Officer Commanding,
Manchester Royal Infirmary,
MANCHESTER.

No. 72472 Cpl.
Gladall.,
12th Canadians.

Referring to your communication of the 8th October, transmitting report on the marginally named N.C.O., will you be kind enough to advise this Office when this man is in a fit condition to transfer, in order that the necessary instructions regarding his disposal may be sent to you.

.....
A.D.M.S.,
For D.M.S., Canadian Contingents.

A/CC.

Army Form W. 3172.
(In pads of 50.)

_____ Hospital.

J-2 No. of Bed _____ Date 21-11-17

No.	Rank and Name	Corps	Part to be X-Rayed
	Cpl. Glendall	124 Coy	Right Knee Joint 1/1 a.p. Fibula T.T. Left 1/3 left leg 1/1 a.p. T.T.

Short History of Case.
(To be completed by M.O. i/c case)

Wounded 24-4-17 by shrapnel at Ovillers.
R. Knee - Joint disorganised patella fractured. Septic. For sequestra etc please.
L. Leg. Comp. fra. Tibia & fibula. For sequestra please.

Signature of M.O. G. Blowie
Date 21-11-17.

Report on Result of X-Ray Examination.
(To be completed by Radiographer.)

No. of Plate 5581

Old comm. frac. up 1/3 tibia. Partial union. No displacement. Probable sequestrum in centre of shaft - some six inches below the joint.

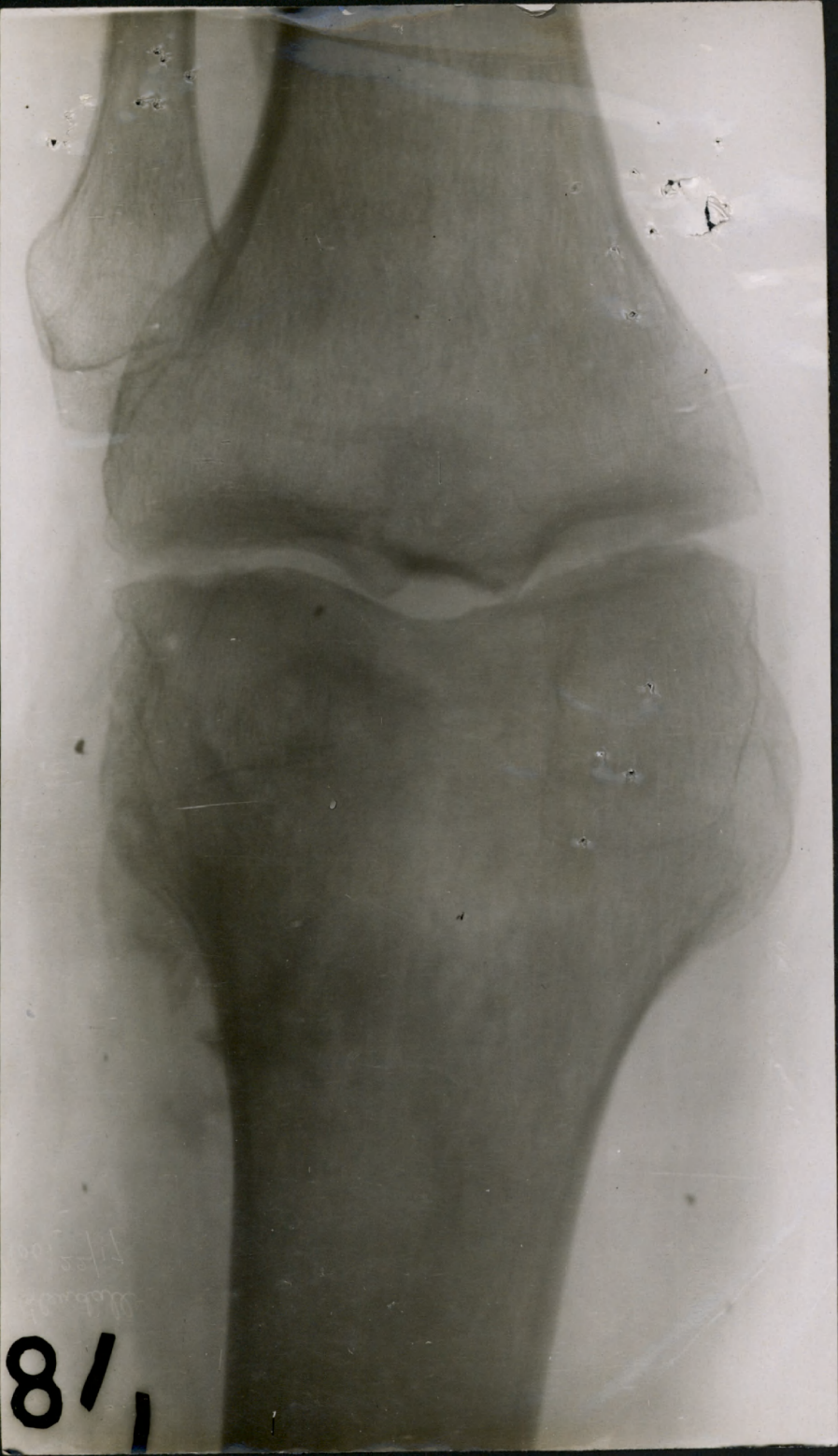
Signature of Radiographer [illegible]
Date _____

(9 38 40) W 8290—3262 100,000 8/15 H W V(M 163) Forms/W. 3172/1
15134—116 300,000 1/16

over

Rt Knee. Comm. fracture of patella –
Some inflammatory changes of articular
surfaces of femur & tibia.

JBM

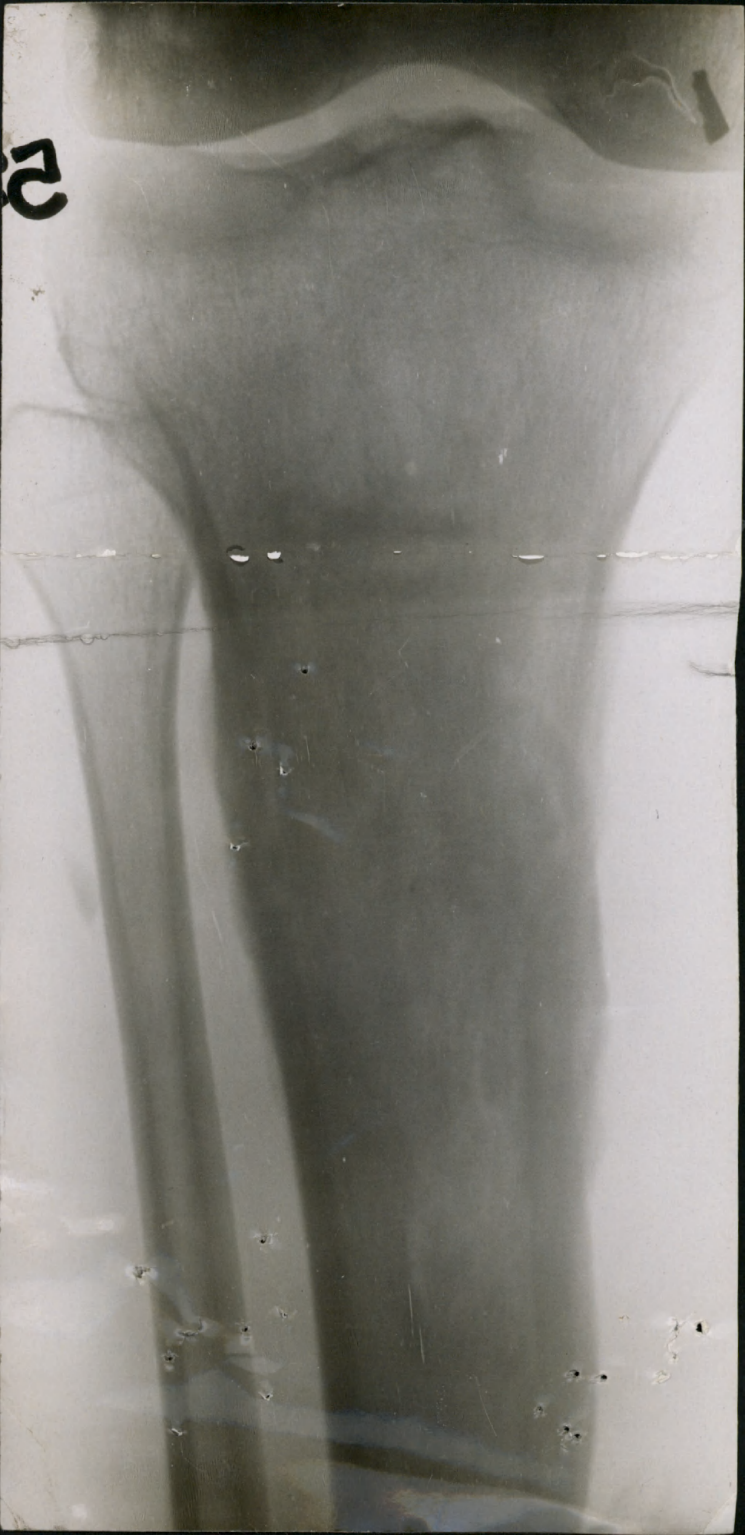

81

Corp. A. Glendall. 724738.

R. Ruce

J2

5-5-8-1



J2

Corp. A. Clendale 721738

L. leg

*PARTICULARS MARKED * TO BE OBTAINED FROM SOLDIER AND CHECKED FROM DOCUMENTS.

CONFIDENTIAL INFORMATION.

Report No. 18874 Unit C M.D. No.

CATEGORY D

Surname Gleadall Christian Name A.

Permanent Address Midland, Box 154 Ont.

No. of M.H.C. File	No. of Local File	No. of H.Q. File
3	162	

No.* 7247 38 Rank Cpl. Original Unit 109th Service Unit* 124

Age* 25 Height 5 ft. 8 ins. Complexion Fair Eyes Brown Hair Brown Conduct

Date of enlistment 4/1/16 Where enlisted Lindsay Where seen service* France

Ship returned by Leandovery Date of arrival 7/4/18 Port of arrival Halifax

Birthplace* Wombell, Yorkshire Religion C, of E.

Cause of disability Disability: Partial loss of function of right & left leg. Cause:- G. S. W. right and left leg.

Condition in detail which prevents the soldier from earning a full livelihood

Present condition, Generally good, Heart lungs normal Slight aneamic and has lost weight since being wounded. Good appetite improving generally. Right leg knee joint ankle Deagonal scar with loss of tissue over patella region, vertical scar external aspect of thigh in middle 1/3. 1 deagonal anteriorly above patella. All healed. Slight atrophy lower leg with weakness of ankle joint, can take weight slight. Circulation and senation normal Left knee joint normal tellate scar intern upper third with bone sinus healed scar of exictexternally. Two 3" vertical scars lower 1/3 thigh. (internally and externally) Two anteriorly. Function of leg good. Sensation and circulation normal.

Disability due to service . English Board.

~~Condition in detail which prevents the soldier from earning a full livelihood~~

Degree of incapacity—Eng. Board Canadian Board

Is disability due to or aggravated by Service?

Probable duration of incapacity Permanent

Does it render him permanently unfit for Military Service? Yes

Is further treatment or use of appliances recommended, if so which?

Destination to which transportation issued 2 M.R.

Members of Board J. C. Meakins Lt. Col. AMC. Geo R. Johnson Capt. AMC.

Taplow 2 4-1-18

INFORMATION TO BE FURNISHED BY SOLDIER

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

Name and address next of kin Albert Gleadall, 44 Bartholomew St., Wombwell, Yorkshire.

Notification of return to be sent to "

Occupation prior to enlistment Asst. Loco. Foreman. And for how long followed

Regular trade or occupation "

Average earnings previous to enlistment $95 month Any other income?

Name and address of last employer R. D. Preston for G. T. R.

Rent per month If owner of or purchasing property amount due and annual payment, $ $

Taxes If Homestead, or Farm, where located

If carrying life or accident insurance, annual premium $ 16 per year Name of Society

If unable to follow previous occupation, name preference

References R. D. Preston, Midland Box6211 I declare that the above statement is correct.

Witness J. D. Wilson.

Date 4/6/18. Place Kingston Signature Cpl. A. Gleadall. ~~Gleadall~~

Remarks by Interviewer: N.D.

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, $

PENSION—Class Amount per year, $ Period granted for Dating from

First payment date

Form No. 5a.

Reports of men returned for duty to be typed on White (Red printed) Forms.
A. General Service. B. Service abroad, not general. C. Service in Canada. D. Treatment. (Pink copies).

Reports on men returned for Discharge under Sp. Auth. on White (Black printed) Forms.
E. 1. Discharge, no pensionable disability. (Yellow copies).
E. 2. Waiting Reclassification. (Pink copies).
E. 3. Discharge with claim for pension. (Blue copies).

PARTICULARS MAY BE REQUIRED TO BE OBTAINED FROM SOLDIER AND CHECKED FROM DOCUMENTS

CONFIDENTIAL INFORMATION.

Unit	CATEGORY	No. of M.H.C. File	No. of Local File	No. of H.Q. File
185T4	D			
C	Surname Gibsonhill Christian Name(s)			
	Informant's address Midland, Box 184 Ont.			

No. 72427 SB Rank Pl. Original Unit 105th Service Unit 184

Age 25 Height 5 ft. 8 in. Complexion Fair Eyes Brown Hair Brown

Date of enlistment 4/1/16 Where enlisted Midway Where seen service France

Ship returned by Discharge Date of arrival 7/4/18 Port of arrival Halifax

Birthplace Cobbell, Yorkshire Religion C. of E.

Cause of disability Disability: Partial loss of function of right & left leg.
Causes:- C. & . right and left leg.

Condition in detail with a view to preventing the condition from entailing a full livelihood

Present condition. Generally good. Heart lungs normal. Right amputation has lost weight since being wounded. Good appetite improving generally. Right leg knee joint shows peripheral scar with loss of tissue over patella region, vertical scar external aspect of thigh in middle 1/3. 1 transverse anteriorly above patella. All healed. Right atrophy lower leg with weakness of ankle joint, can take weight fairly. Circulation and sensation normal left knee joint normal. Tibiate scar inner upper third with bone sinus healed scar of existexternally. Two 3" vertical scars lower 1/3 thigh. (Internally and externally) Two anteriorly. Function of leg good. Sensation and circulation normal.

Disability due to service . English Board.

~~Description in detail which proved the soldier from making a full livelihood~~

Degree of incapacity—Eng Board Canadian Board

Is disability due to or aggravated by service?

Probable duration of incapacity Permanent

Does it render him permanently unfit for Military Service? Yes

Is further treatment or use of appliances recommended, if so which?

Destination to which transportation issued

Members of Board J. C. Hastings Lt. Col. A.M.C. Geo. A. Johnson Capt. AMC.

Taplow 2-1-18

INFORMATION TO BE FURNISHED BY SOLDIER

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

Name and address next of kin

Notification of return to be sent to

Occupation prior to enlistment Asst. Loco. Foreman.

Regular trade or occupation and for how long followed

Average earnings previous to enlistment $65 month Any other income?

Name and address of last employer G. T. Ireson for G. T. R.

Rent per month If owner of or purchasing property amount due and annual payment $

Taxes If Homestead, or Farm, where located

If carrying life or accident insurance, annual premium $ 16 per year of Society

If unable to follow previous occupation, name preference

References H. D. Ireson, Midland Box621 declare that the above statement is correct.

Witness D. Gibson.

Date 4/5/18. Place Kingston Signature Cpl. A. Gibsonhill.

Remarks by interviewer

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 $

PENSION—Class Amount per week $ Period granted for Dating from

First payment date

Form No. 5a.

CONFIDENTIAL INFORMATION

Report No. 18874 C

Category D

Gleadall, A.
Midlands, Box 154
Ont.

No. of M. H. C. File	No. of Local File	No. of H. Q. File
	39	162

No. 724738 Rank Cpl. Original Unit 109th Present Unit 124

Age 25 Height 5 ft. 8 ins. Complexion Fair Eyes Brown Hair Brown Character

Date of enlistment 4/1/16 Where enlisted Lindsay Where seen service France

Ship returned by Llandovery Castle Date of arrival 7/4/18 Port of arrival Halifax

Birthplace Nombwell, Yorkshire, Religion C of E.

Name and address next of kin Albert Gleadall, 44 Bartholomew St, Wombwell, Yorkshire.

Notification of return to be sent to

Cause of disability Disability:/ Partial loss of function of right & left leg. Cause:- G.S.W. right and left leg.

Condition in detail which prevents the soldier from earning a full livelihood

Present Condition, Generally good, Heart lungs normal Slight anaemic and has lost weight since being wounded. Good appetite improving generally. Right leg knee joint ankylo Diagonal scar with loss of tissue over patella region, vertical scar external aspect of thigh in middle 1/3. 1 diagonal anteriorly above patella. All healed. Slight atrophy lower leg with weakne of ankle joint. can take weight slight. Circulation and sensation normal Left knee joint normal Stellate scar intern upper third with bone sinus Healed scar of exictexternally. Two 3" vertical scars lower 1/3 thigh. (internally and externally) Two anteriorly. Function of leg good. Sensation and circulation normal.

Disability due to service. English Board.

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

Probable duration of incapacity Permanent

Does it render him permanently unfit for Military Service? Yes

Would operation, Special treatment, or use of appliances etc., lessen incapacity? 2 M.H.

Destination to which transportation issued

Members of Board J.C.Meakins Lt. Col. AMC. Geo R. Johnson Capt. AMC.

Taplow 24-1-18

INFORMATION TO BE FURNISHED BY SOLDIER

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

Occupation prior to enlistment Asst Loco Foreman.

Regular trade or profession "

Average earnings previous to enlistment $95; a month. Any other income? —

Name and address of last employer R.D. Preston for G.T.R.

Rent per month — If purchasing property amount due and annual payment, $ — $

Taxes — If Homestead, when is patent due?

If carrying life or accident insurance, annual premium $16 per year

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

References R.D. Preston, Midland Box 621,

Witness J.D. Nelson I declare that the above statement is correct.

Date Kingston 4/6/18 Signature Cpl. A. Gleadale.

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

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.....

Form No. 5c.

E. 1. Discharge, no pensionable disability.
E. 2. Waiting Reclassification.
E. 3. Discharge with claim for pension.
C. Service in Canada.
D. Treatment.
A. General Service.
B. Service abroad, not general.

Disability:- Partial loss of function of right & left leg.
Cause:- G.S.W. right and left leg.

Present Condition. Generally good. Heart lungs normal Slight anaemia and has lost weight since being wounded. Good appetite improving generally. Right leg knee joint ankle Diagonal scar with loss of tissue over patella region, vertical scar external aspect of thigh in middle 1/3. 1 diagonal anterior ly above patella. All healed. Slight atrophy lower leg with weakness of ankle joint. can take weight slight. Circulation and sensation normal left knee joint normal Stellate scar inter upper third with bone sinus Healed scar of exterior ly. Two 3" vertical scars lower 1/3 thigh. (inter ly and exter ly) Two anterior ly. Function of leg good. Sensation and circulation normal.

Disability due to service. English Board.

Degree of incapacity (Please state if in opinion) Can. Board Canadian Board

Probable duration of incapacity Permanent

Does it render him permanently unfit for Military Service?

Would operation, Special treatment, or use of appliances etc., lessen incapacity?

Destination to which transportation issued

Members of Board J.C. Meadins Lt. Col. AMC. Geo H. Johnson Capt. AMC.

Teplow 24-1-18

INFORMATION TO BE FURNISHED BY SOLDIER

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

Occupation prior to enlistment

Regular trade or profession

Average earnings previous to enlistment Any other income?

Name and address of last employer

Rent per month If purchasing property amount yrly and annual payment $

Taxes If Homestead, when is patent due?

If carrying life or accident insurance, amount & premium

If in receipt of sick benefits or other insurance, name of society Amt. per mon. $

If unable to follow previous occupation name preference

At what age soldier left school? What grade, studied & how well?

Has he taken any Technical or Continuation Classes? If so where?

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

References

Witness I do certify that the above statement is correct

Date Signature Corp. L. Thomas

Recommendation by Inspector as to employs ability or special aptitude and general fitness

Last Pay Cert. Cr. $ Dr. $ Amount paid at Depot H.Q. $ L.T.C. Issued Depot $

Amount forwarded to H.Q. Unit $ Clothing allowance $

Transfd to Date—Date Invalid Class—Date Invalid Class 1 Dep

N.B. Class Amount per year $ Medal or ribbon to Medical Board on Pensions

Sum payment made

Remarks

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

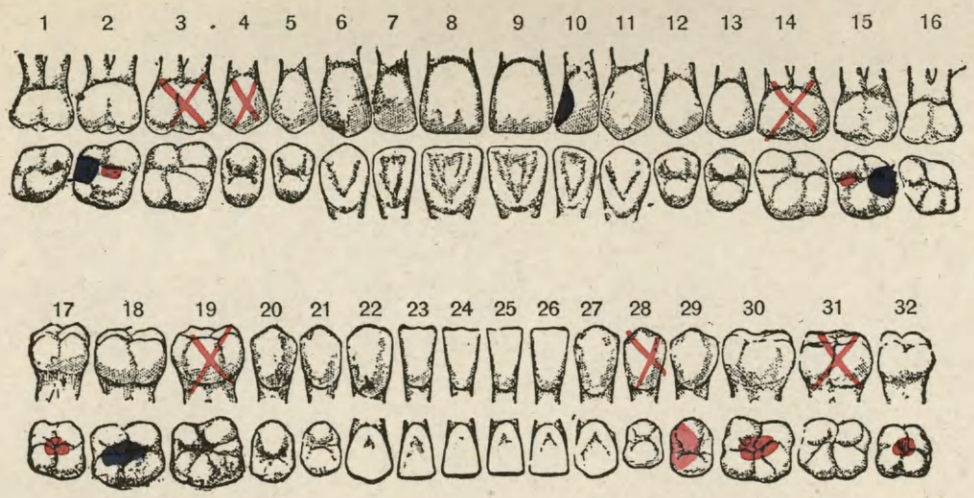
District 3

Name of Soldier Gladdall A.

Rank Corp

Regiment

No. 724738



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 U	DENTURES L	DENTURES P	Gold Clasp	Gold Filling	CROWNS Gold	CROWNS Porcelain	Bridge Work	OPERATOR	Military District	REMARKS
Condition on first Examination	1918		6 / 2.13 17.29 30.32									6 / 3.4.14. 19.28.31									S.H. Simpson major	3	
	Nov	1																					
	Nov	2	3 / 2.15 18		1 / 10																S.H. Simpson major	3	Complete.

M.F.B. 4
200M.—6-
1772-39-950.

ientioned in Part I.

with the documents submitted,

191

President.

PART I. Form (D.M.S. 1312). A.F.B. 179 Canada (Revised). 3737. 50M.

766

Reserved for M.H.C.

Regt. No. 724738 Rank Cpl Surname GLEADALL Christian Name ABRAHAM

Unit or Corps—(a) Overseas from United Kingdom 124 Can Batty (b) In United Kingdom 12 Res

Born at—Town Wombwell County or Province Yorkshire Country England

Date of Birth—Day 25th Month May Year 1892 Age 25 yrs 8 months.

Joined at London Ontario Date 1-1-16

Former Trade or Occupation Locomotive Foreman

Permanent marks or peculiarities that will serve for future identification :—

Small Scars distal ends 3 & 4 fingers left Hand
Battle Scars. Right leg. Two diagonal 3 in above downward across patellar region. One vertical 3 in internally lower 1/3 thigh
Left leg. Healthy, unit within, without affect this lower leg
Two horizontal internal & external lower 1/3 thigh. Two anterior

Height—feet 5 inches 8 Colour of eyes Brown

Signature of Soldier (*for identification purposes*) Cpl. Abr. Gleadall.

Medical Report.

☞ *The answers to the questions below are to be filled in by the Officer in medical charge of the case. He will carefully discriminate between the soldier's unsupported statements and the evidence as recorded in the medical or other military documents bearing on the case. He will plainly state the existence of any of the disability prior to the soldier joining for the present war.*

1. DISABILITY (*State the actual disabling conditions as distinguished from the diseases or injuries from which they resulted*). (*Follow the official nomenclature as far as possible.*)

Group the disabilities, placing those resulting from separate causes in separate groups.

Disabilities Group (*a*): PARTIAL LOSS OF FUNCTION RIGHT LEG

Disabilities Group (*b*): PARTIAL LOSS OF FUNCTION LEFT LEG

Disabilities Group (*c*): N.A.

2. CAUSE OF DISABILITY. (*Follow the official nomenclature in stating the disease or injury.*)

	Disease or injury to which the disability is due.	Place of origin.	Date of origin.
(*i.*) As to Group (*a*) above.	G.S.W Right Leg Comp. fracture Condyle femur and patella	Vimy Ridge	24-4-17
(*ii.*) As to Group (*b*) above.	G.S.W. Left Leg Comp. fracture: head of tibia.	Vimy Ridge	24-4-17
(*iii.*) As to Group (*c*) above.	N.A.		

NOTE.—By Active Service is meant Service with the Colours in Canada, United Kingdom, or elsewhere during the present war (since August 4th, 1914).

3. Is the disability due to disease contracted or injuries received prior to Active Service ?

(*i.*) As to Group (*a*) above ? No If yes, has Active Service aggravated it ? N.A.

(*ii.*) As to Group (*b*) above ? No If yes, has Active Service aggravated it ? N.A.

(*iii.*) As to Group (*c*) above ? N.A. If yes, has Active Service aggravated it ? N.A.

4. Is the disability due to disease contracted or injuries received while on Active Service—

(*i.*) As to Group (*a*) above ? Yes

(*ii.*) As to Group (*b*) above ? Yes.

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

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

(*i.*) While on duty? Yes (*ii.*) While off duty? No

(*iii.*) Was a Court of Inquiry held? No (*iv.*) Where? N.A. (*v.*) When? N.A.

(*vi.*) Opinion of the Court? N.A.

6. HISTORY OF THE CASE. *(State concisely the essential points of the history, noting the entries made on the Medical History Sheet and other records).*

Battle Casualty 24-4-17 by shrapnel. To C.C.S. Two operations for removal debris wounds, drainage, splinting. To 20 General 15-6-17. To Manchester 19-6-17. Two operations for removal sequestra wounds thigh. Right thigh and drainage. To Tidworth 20-11-17. Operation 18-12-17. Sequestra, debris removed from right leg. Sinus left leg curetted. General condition good. Family history negative.

X ray Report – Left knee – Old comminuted fracture upper 1/3 tibia – partial union no displacement. Probable sequestrum in centre of shaft. R. knee – comp. fracture patella. Some inflammatory changes of articular surface of femur. Albert

7. PRESENT CONDITION. *(Give previous and present weight if likely to indicate progress of disability.)*

Generally good. Heart, lungs normal. Slight anaemia. Not big. Lost weight since being wounded. Good appetite. Improving generally. Right leg. Knee joint ankle good. Stay sinus scar with loss of tissue over patella region. Vertical scar external aspect of thigh in mid 1/3. One diagonal internally above patella. Not healed. Slight atrophy lower leg with weakness of ankle joint. Can take weight slightly. Circulation and sensation normal. Left leg – Joints normal. Stellate scar internally upper third with bone sinus. Healed scar of exit externally. Two 3" vertical scars low 1/3 thigh (internally, externally) Two anteriorly – Amputation of leg good. Sensation & circulation normal.

8. OPERATION. (*i.*) Was one performed? Yes. Several for removal debris, drainage and removal sequestra both legs.

(*ii.*) If so, state what.

(*iii.*) Was one advised and declined? – No.

NOTE.—Loss of teeth on or immediately after Active Service should be attributed thereto unless there is evidence to the contrary.

9. (*i.*) Is there loss or decay of teeth attributable to Active Service?

(*ii.*) If so, describe. Upper molar R. side upper molar left side lower molar R. side lower molar left side.

10. DO YOU RECOMMEND:—

(*a*) Fit for duty? No

(*b*) Fit for base duty? No

(*c*) Invalid to Canada? Yes

(*d*) Discharge from the Service as permanently unfit? No

Date of Report 15-1-18 191 Signed G. B. Winwell Capt Canadian

Station Can. Mil. Hosp. Taplow Bucks. Officer in medical charge of case.

I have satisfied myself of the general accuracy of the above Report, and concur therein *except

THE DUCHESS OF CONNAUGHT TAPLOW 23-1-18 BUCKS CANADIAN RED CROSS HOSPITAL

A. W. Meubrun Lt. Col. R.A.M.C. Officer i/c Hospital / S.M.O. Brigade / Strike out one of these.

Commanding THE DUCHESS OF CONNAUGHT CANADIAN RED CROSS HOSPITAL

Dated at Station on 191

* Delete if inapplicable.

. Proceeding

☞ *Clear and decisive an*
not to be employed.
Authorities may deal

11. Is the disability fully in
If not, indicate it.

12. Is the cause of the disab
If not, indicate it.

13. Was the disability cause
or aggravated by—

14. THE ENTIRE DISAB
present for earning a
(*Estimate at none,* 10%,

15. THE PENSIONABLE
joining is to be includ
What part of the e
(*Estimate at none,* $\frac{1}{5}$, $\frac{2}{5}$

16. Permanency of the Pens
(*i.*) Is it permane
(*ii.*) If not perman

17. If an operation was ad
consider the refusal t

18. Remarks.

19. Recommendation :—(*a*)
(*b*)
(*c*)
(*d*)

Date of Board STANDING ME 24 JAN DUCHESS OF CANADIAN RED TAPLOW

Station

Approved

Dated at M.S.

) When? Nil.

de on the Medical History

s for removal debris
ter 19-6-17. Two
drainage. To Taplow
g. Sinus left leg curetted
ment.

artial union to
mp. fracture patella
tibia

y.)

. Left weight since
Knee Joint ankle fixed
internal aspect of left
oplay. Crown leg with
ensation normal.
s. Healed scar of exit
tonsly - & inversion of

Recent drainage
both legs

vidence to the contrary.

de
ide

well Capt Came
medical charge of case.

c Hospital } Strike out one
Brigade } of these.

.....191.....

Proceedings of a Medical Board on the Soldier mentioned in Part I.

☞ *Clear and decisive answers are to be given to all questions. Such terms as "may," "perhaps," "probably," "possibly," are not to be employed. Disability due to causes arising on Active Service is to be clearly shown in order that the Pensions Authorities may deal with the case properly.*

11. Is the disability fully indicated in Part I. (1)? yes
If not, indicate it.

12. Is the cause of the disability fully indicated in Part I. (2)? yes
If not, indicate it.

13. Was the disability caused or aggravated by— (*a*) Negligence of the Soldier { Caused? No / Aggravated? No } (*b*) Misconduct of the Soldier { Caused? No / Aggravated? No }

14. THE ENTIRE DISABILITY.—Without regard to his regular occupation, to what extent is his capacity lessened at present for earning a full livelihood in the general market for untrained labour?
(*Estimate at none*, 10%, 20%, 30%, 40%, 50%, 60%, 70%, 80%, 90%, *or* 100%.)
one hundred percent at present

15. THE PENSIONABLE DISABILITY.—*see Part I.* (3). *Aggravation on Active Service of a disability existing previous to joining is to be included in the estimate*).
What part of the entire disability estimated next above in (14) is due to causes arising during Active Service?
(*Estimate at none*, $\frac{1}{5}$, $\frac{2}{5}$, $\frac{3}{5}$, $\frac{4}{5}$, *or all.*)
all

16. Permanency of the Pensionable Disability estimated next above in (15).
(*i.*) Is it permanent? No
(*ii.*) If not permanent, what is its probable minimum duration (*in months*)? 9 months

17. If an operation was advised and declined, do you consider the refusal to have been unreasonable? Not applicable

18. Remarks.

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

Classification for the Military Hospitals Commission

Date of Board STANDING MEDICAL BOARD 24 JAN 1918 DUCHESS OF CONNAUGHT CANADIAN RED CROSS HOSPITAL TAPLOW, BUCKS.

Signatures of the Board. J. Mackie Lt Colonel President. George R. Johnson Capt Lieut. G. Green Capt Lieut. R.A.M.C.

Station

Approved ..... Major, C.A.M.S. A.D.M.S. A.D.M.S. CANADIANS. LONDON AREA. LONDON. 24 JAN 1918

Dated at ..... M.S., Canadians, London Area Station 191

Proceedings of the Pensions and Claims Board on the Soldier mentioned in Part I.

The Pensions and Claims Board, Canadian Expeditionary Force, assembled at

on the day of 191

Members of the Board :—

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

Dated at this day of 191

Signatures of the Board

.....
President.

.....

.....

.....

Regt. No. 724738 Rank...

Unit or Corps—(a) Overseas fr

Born at—Town... Wombw

Date of Birth—Day... 25th

Joined at... Winnipeg

Former Trade or Occupation...

Permanent marks or peculiariti

Small S

Battle Scars. Rig

Left

Height—feet... 5 ... inches... 8

Signature of Soldier (*for identifi*

☞ *The answers to the question between the soldier's unsupported case. He will plainly state the*

1. DISABILITY (*State the ac*

Group the disabilities, placing those resulting from separate causes in separate groups.

Disabilities Group (*a*)	1-
Disabilities Group (*b*)	R
Disabilities Group (*c*).	

2. CAUSE OF DISABILITY

	Diseas
(*i.*) As to Group (*a*) above.	G.S.W
(*ii.*) As to Group (*b*) above.	G.S.W.
(*iii.*) As to Group (*c*) above.	N.A.

NOTE.—By Active Service is

3. Is the disability due to dise

(*i.*) As to Group (*a*) a

(*ii.*) As to Group (*b*) a

(*iii.*) As to Group (*c*) a

4. Is the disability due to disea

(*i.*) As to Group (*a*) a

(*ii.*) As to Group (*b*) a

(*iii.*) As to Group (*c*) a

R—122

TLH. Rank Act Cpl Name GLEADALL, Abraham, Reg'l No. 724738.

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

Place and Date of Enlistment Lindsay, 4th.Jany.1916. Place of Birth Wombwall, Yorks. England.

Name and Address, Next-of-Kin Albert Gledall,
44, Bartholomew Street, Wombwall, Yorkshire, Eng. Relationship Father.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

N/E. R.B. No. 2656
File R.L.
Category Can M.U.

H. W. & V., Ld.—7165-16.

Report. Date.	Report. From whom received.	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.
6.		Arrived in England per H.M.T. 2810 31-7-16			
5. 8. 16	OC 109th	Appt'd Prov. Cpl	Bexley	5-8-16	Pt II D.O. 218 & D.O. 225
8. 12. 16	"	SOS on trfr to 124th Bn	Witley	8.12.16	" " 343
11. 12. 16.	OC 124th	308 " fr 109th "	"	"	" " 28
9-3-17.	124Bn	Emb for France	Witley	9*3*17	PtII DQ68
14. 4. 17	do	Confirmed in rank of Corpl	Field	9. 3. 17	Pt II O 81
14. 5. 17	do	Wounded	Base	24. 4. 17	Cas Rept 35 Not Stated
26. 5. 17	do	Adm'd 22 Cas Clearing Station		24. 4. 17	" " 43 Comp fract Knee Cap
22-6-17	do	Tfd. No. 20 Gen. Hosp.	Dannes Camiers	8-6-17	B.L. A61 S. W. R finger " "
25-6-17	do	Adm. 2nd Western Gen. Hosp.	Manchester	19-6-17	B.L. B105

A.F.B. 103 CHECKED 19 MAR 1919

A5 Jan

Report. Date.	Report. From whom received.	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.
28-6-17	1st C.O.R.D.	T.O.S. from 124th Bn.	W. Sandling	19-6-17	Pt II D.O. 111 (124th Bn. D.O. 110)
23-11-17	1st COR (124)	Tfd. No 15 Can. Gen. Hosp.	Taplow	21-11-17	G.L. B71 (S.W. Both Legs)
31-3-18	1st CORD	S.O.S. to C.E.R.D.	Cpl. Widey	10-3-18 ~~30-3-18~~	amended in Fwd C.O.R.D Pt II 096 of 3-4 D.O. 88
4-4-18	CE (124 Pioneers)	(Invalided to Canada)	" Liverpool	28-3-18	C.L. B179.
3-4-18	CERD	S.O.S. from 1st C.O.R.D. 5th G. Hosp. Kirkdale	Cpl Seaford	9-3-18	Pt II 092
7-4-18	-"-	S.O.S. Invalided to Can.	" -	28.3.18.	D.O. 96.
	Dis Depot For Further Treatment		MD 3 Kingston	7.4.18	NR 443

Shrapnel 10
Frac Comp
Severe
Lower 22191
Femur Rt

O:

Shrapnel
Comp Frac 22192
Severe
Lower
Knee Rt

O:

AUDITOR JWM | PAYMASTER

PROMOTIONS, REDUCTIONS AND REVERSIONS AFFECTING DAILY RATE OF PAY AND ALLOWANCES

M. OR S.

REGT. No. 724738 RANK Cpl. NAME (IN FULL) Gleadall A. (BLOCK LETTERS, SURNAME FIRST)

NEXT OF KIN RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? DATE EFFECTIVE

TO WHOM PAID RELATIONSHIP

ADDRESS Mrs. Hannah Gleadall - wife
Midland, Ont.

auth. to pay S. A. from Aug. 1/18 to discharge
& W. S. G. - auth A.P. 6991-A-16- Nov. 21/19.

PARTICULARS	EFFECTIVE DATE	AUTHORITY
Cpl. A. Gleadall		
Midland P.O. Ont.		

ORIGINAL UNIT C.E.F. 109th Battn IF IN P. F. WHAT UNIT?

PLACE OF ATTESTATION TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY, $ -Nil- DATE EFFECTIVE

PAYABLE TO RELATIONSHIP ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE EFFECTIVE

Discharged from SCR. 27/10/19

DISCHARGED PLACE ~~To S.C.R.~~ ~~Toronto~~ - DATE Jan 22/19. REASON Demob - AUTHORITY 3DD-3-G-162 IF ENTITLED TO POST DISCHARGE PAY

27.10.19.

1187

MONTH	PAY AND F. A. NO. OF DAYS	RATE	AMOUNT	OTHER CREDITS		TOTAL CREDITS	ACQUITTANCE ROLLS COL. NO. 1	COL NO. 2	COL. NO. 3	CASH PAYMENTS COL. NO. 1	COL. NO. 2	COL. NO. 3	ASSIGNED PAY	REGIMENTAL CHARGES	OTHER CHARGES		TOTAL DEBITS	BALANCE DEBIT	BALANCE CREDIT	PARTICULARS OR REMARKS
Balance from previous account 1919					37.45	37.45													37.45	928 1803 1804 Clothing
1/1/19 Jan	22	1.20	26.40	6.40	35.—	67.80				37.45	35 32.80						105.25			40.253 Subd 8 days
105.25 War Service Gratuity														W.S.G.						
Jan 22/19	183		days W. S. G.			420 00 A5368 canc.								70 00	—		70	350	~~350~~ 180	1st payment W.S.G. ck.
"			SA.			352 00								70	—		140	280		1323798 Oct. 30th 1919 ~~1337302 - Nov. 25/19~~
						772								—	232		372	280	120	1337389 - Nov. 25/19
											OK			70	30		472	210	90	1851479-80 DEC 22 1919
														70	30		572	140	60	1841688 9 JAN 22 1920
														70	30		672	70	30	1842440. 41 FEB 18 1920
														70	30		772	0		1843562-3 MAR 2 1920
																				MFW 2595 B. sent 20/10/19

60m.-11-18. L. L. 51777. M. & D. 9585.

MONTH	PAY AND F. A.				OTHER CREDITS				TOTAL CREDITS		ACQUITTANCE ROLLS						CASH PAYMENTS						ASSIGNED PAY		REGI-MENTAL CHARGES		OTHER CHARGES				TOTAL DEBITS		BALANCE				PARTICULARS OR REMARKS
	NO. OF DAYS	RATE	AMOUNT								COL. NO. 1		COL. NO. 2		COL. NO. 3		COL. NO. 1		COL. NO. 2		COL. NO. 3												DEBIT		CREDIT		
			$	C.	$	C.	$	C.	$	C.	NO.	DATE	NO.	DATE	NO.	DATE	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	