

ATTESTATION PAPER.

No. 724739

A. Coy.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

ORIGINAL

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

- 1. What is your surname? *Gleadall*
- 1a. What are your Christian names? *Albert*
- 1b. What is your present address? *Midland Ont.*
- 2. In what Town, Township or Parish, and in what Country were you born? *Wombwall, Yorkshire, England.*
- 3. What is the name of your next-of-kin? *Albert Gleadall*
- 4. What is the address of your next-of-kin? *44 Bartholomew St. Wombwall, Yorkshire Eng.*
- 4a. What is the relationship of your next-of-kin? *Father*
- 5. What is the date of your birth? *23 Dec. 1895*
- 6. What is your Trade or Calling? *Laborer*
- 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, *Albert 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.

Date *Jan 4* 1916. *Albert Gleadall* (Signature of Recruit)
G. W. Lancaster (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Albert 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.

Date *Jan 4* 1916. *Albert Gleadall* (Signature of Recruit)
G. W. Lancaster (Signature of Witness)

CERTIFICATE OF MAGISTRATE.

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

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

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

before me, at *Lindsay* this *12* day of *January* 191*6*.
G. W. Lancaster (Signature of Justice)

6
61
4
5
31
29
136

Description of Albert Gleadall on Enlistment.

Apparent Age 20 years 0 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

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

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

Height 5 ft. 5-3 ins.

Scar on left elbow.

Chest measurement { Girth when fully expanded 39 1/2 ins.
 Range of expansion 4 ins.

Complexion Fair

Eyes Lt Brown

Hair Lt Brown

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

CERTIFICATE OF MEDICAL EXAMINATION.

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

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

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

Date Jan 4 1916

Place Lindsay

J. McCulloch
H. Boyd Medical Officer. **Capt.**

*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.

Albert 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.

[Signature] Lt. Col. (Signature of Officer)
 O. C. 109th Overseas Battalion, C. E. F.
 Date JAN 12 1916 1916

C.E.F.

GLEADALL ALBERT LIEUT

CAN. ENG.

14598

DEMOB





724739

ORIGINAL MEDICAL HISTORY SHEET.

2nd P.M.

Surname

Gleadall

Christian Name

Albert

P

Examined

 on 4th day of January 1916
 at Lindsay

Approved by

 J. McCulloch
 J. McCulloch
 Rank 109th Overseas Battalion M.O.

Capt.

Medical Officer

Birthplace

 City or Town Wombwell
 County Yorks England

Rank 109th Overseas Battalion M.O. C. E. F.

Apparent age

20 years

Trade or occupation

Labourer

Height

5 Feet 5 ³/₄ Inches

Weight

156 Lbs.

Chest measurement

Minimum 35 ¹/₂ inchesMaximum expansion 39 ¹/₂ inches

Physical development

Good

Small-Pox Marks

None

Vaccination Marks

 Arm Right None Left 3rd Four

Number Four

When Vaccinated last

January 27th 1916

Date

Result

VACCINATIONS

27-1-16

Good

 J. McCulloch
 J. McCulloch
 M.O.

(a) Marks indicating congenital peculiarities or previous

disease

None

Date

Result

ANTI-TYPHOID INOCULATIONS, ETC.

(b) Slight defects but not sufficient to cause rejection

None

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

None

None M.O.

Enlisted on

1st day of January 1916

at

Lindsay

Joined on enlistment

CORPS

REG'TL NUMBER

HABITS

DATE

109th Batt
C.E.F.

724739

1-1-16

Transferred to.....

124th OVERSEAS BATT

ALIGN C.E.F.

P O-S

CANADIAN

9-MAR 1917

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
Seafood	3-6-18		"A" L.F. Thompson Capt
C.E.F. Montreal Batt	21-1-19	Proth	A. Johnson Captain
Bramshott	6-7-19	O.D.S.	Invalid to Canada Kallakenzil Major

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

Christian Name *Albert*
 Surname *Glendall*

STATION.	Date of Arrival at the Station.	DATES OF						DISEASE.	Number of days in Hospital.	Remarks on nature of the disease: how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
		Admission into Hospital.			Discharge from Hospital.						
		Day	Month	Year	Day	Month	Year				
<i>British Hoop London.</i>		<i>29</i>	<i>Dec</i>	<i>1918</i>	<i>Jan</i>	<i>1919</i>	<i>Small erythema (Scabies.)</i>		<i>Brit in M. Smith & L. Mullock. ward</i>	<i>W. Morby. M.D.</i>	
<i>CANADIAN RED CROSS OFFICERS HOSPITAL 17 NORTH AUDLEY STREET, LONDON W</i>		<i>7</i>	<i>1</i>	<i>19</i>	<i>20</i>	<i>1</i>	<i>19</i>	<i>Small erythema. 13 Boils</i>	<i>Boil back - formed - axilla healed. Foriamp. 16 healed. Sath. & med. Ad.</i>	<i>A. Henderson Maj. C.M.C.</i>	
<i>C.C.H. Mullock Batt</i>		<i>20</i>	<i>1</i>	<i>19</i>	<i>25</i>	<i>1</i>	<i>19</i>	<i>do</i>	<i>5</i> <i>General condition good. Heart & lungs sound. Skin perfectly clear. - 21 days</i>	<i>Prof. E. C. ...</i>	
<i>14th Can. Gen Hoop Eastbourne</i>		<i>23</i>	<i>4</i>	<i>19</i>	<i>6</i>	<i>5</i>	<i>19</i>	<i>Multiple Stricture</i>	<i>14</i> <i>when admitted unable to void structures dilated up to size of Bit sound. internal urethrotomy advisable no instruments available for this at 2004 Gen. To special hospital now able to void</i>		
<i>Wille Can. Spec. Hosp Ten Dertshire</i>		<i>6</i>	<i>5</i>	<i>19</i>	<i>10</i>	<i>6</i>	<i>19</i>	<i>V.D.G. (vo)</i>	<i>36</i> <i>Sweat. G.C. Prostat. - Prostat. enlarged. Has had irrigations, vaccines and Prostatic massages. Transferred to #12 C.G.H.</i>	<i>H. Moore Maj. Comd.</i> <i>W. S. Turner Capt. B.A.M.C.</i>	

No 12 CAN. GENERAL HOSPITAL, ¹⁰ *6* *19* *7-7-19*. *V. D. G.*
& Stricture

Found 22 E. M. ...
I ... to Canada. ...

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 *724739*

(3) Full Name of Soldier *Albert Gladall*
(Capt.)

(4) Place of Birth *Hambwell 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 *Nil*

Also their names and ages *Nil*

(9) Is your Father alive? *Yes. Albert Gladall*
If so, state name and address *Wambwell, Cambridgeshire, Eng.*

(10) Is your Mother alive? *No.*
If so, state name and address *Nil.*

(11) If your Mother is a widow *No!*
Are you her sole support, or not? *Nil.*

(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*

A. H. H. H.
Officer Commanding.
O. C. 109th Overseas Battalion, C. E. F.

CANADIAN ARMY DENTAL CORPS, O.M.F.C.
DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

**DIRECTIONS TO
DENTAL OFFICERS**

NAME OF SOLDIER (Block Letters) GLEADALL, A.

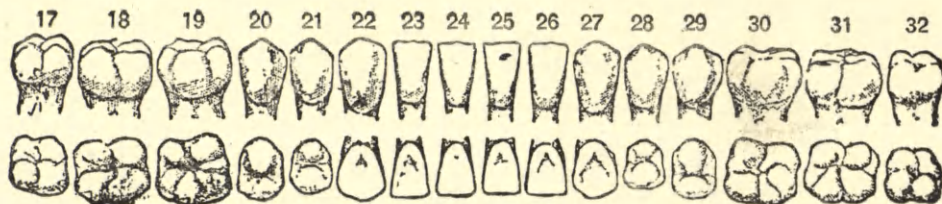
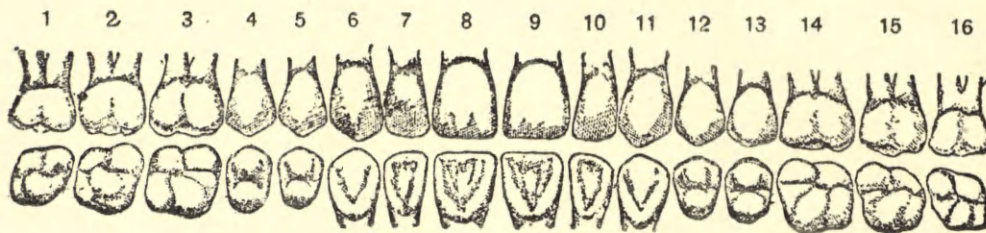
REGIMENT 3rd CERB. RANK Lieut. No. _____

Date of Examination in England 28/2/19. Date of Examination in France _____

1. This form will be made out for each individual at the time of Demobilization in England or France.

2. Figures as per chart will be used to designate teeth concerned.

3. In reference to Partial Dentures the numbers of teeth thereon will be stated.



PRESENT DENTAL REQUIREMENTS

1. FILLINGS _____

2. EXTRACTIONS _____

3. CROWNS NIL

4. DENTURES

- (a) Full Upper
- (b) Part Upper
- (c) Full Lower
- (d) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT? NO

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

- (a) In Canada Yes.
- (b) In England
- (c) In France

Signature of Dental Officer *Chastmore*
capt

G. F. R. A. D. A. L. I. A.

Client.

371 GERR.

28/9/10.

WILL

NO

Yes.

[Faint handwritten notes at the bottom of the page]

MEDICAL BOARD REPORT ON A DISABLED OFFICER.

(ALSO TO BE USED FOR DISABLED NURSES.)

Station C.P.O.H. Moulton Bath

Date 21-1-19

1. Rank and Name Lieut. Glondall, Albert

2. Unit 8th Can. Coy. E.R.D. Seaford

3. Age 23 4. Total Service 35/12 War Service { (a) at home 6/12
(b) abroad 24/12

5. Address Wentwell near Bamsley Yorks.

STATEMENT OF CASE.

NOTE.—In answering the following questions the Board will carefully discriminate between the officer's statements and evidence recorded in his medical documents. When possible, a statement by his medical attendant should be attached.

6. Disability Boils

7. Date of origin of disability Nov. 1918

8. Place of origin of disability France

9. Give concisely the essential facts bearing on the history of the disability (personal and family history, etc.):—

NOTE.—Boards subsequent to the first should record here the progress of the case since the officer's last appearance.

Developed crop of boils on above date. Came on leave shortly after. Returned to unit. Developed axillary abscess and admitted to C.P.S. 17-12-18. To 4th London Cos. 24-12-18. Abscess excised and drained. Scabies of arm scabies cured. Induration of right axilla. Boils healed. To Can. R.X. Coy, London 7-1-19. Scar in axilla (R) healed. Improvement. To C.P.O.H. 20-1-19

I concur in the findings of the Board of Medical Officers, here recorded.

OPINION OF THE MEDICAL BOARD.

NOTES.—(i) The Board will on no account inform the officer of its opinion on any of the following questions.

- (ii) Clear and decisive answers should be filled in by the Board to enable the Ministry of Pensions to come to a reliable decision on the officer's claim to pension, etc.
- (iii) Expressions such as "may," "might," "probably" should be avoided, if possible.
- (iv) When there is more than one disability the replies will distinguish between them.

10. Was the disability contracted (a) before entering the service? No

(b) in the service? Yes

11. Was it attributable to military service? Yes

If so, to what specific military conditions is it attributed? Service exposure

[Enteric Fever, Dysentery, Malaria, etc., contracted on service in countries where there is a special liability to the disease are to be regarded as attributable to military service.]

12. If not attributable to, was it aggravated by, military service? n.a.

If so, by what specific military conditions? n.a.

13. Is it attributable to, or aggravated by, the officer's own negligence or misconduct? If so, in what way, and to what extent? No.

14. What is the officer's present condition? Generally good.
Heart & Lung count. Men practically
clear now. No other complaints. Fit again.

15. To what degree is the officer disabled at the present time? ✓
(Degrees of disablement should be expressed in the following percentages—100, 80, 70, 60, 50, 40, 30, 20, under 20, or nil.)

16. Is the disability permanent? No

17. If not permanent, how soon is re-examination recommended? — months.

18. Is it necessary that the officer should be re-examined by the same Board? No

19. What treatment is the officer receiving, and where, and from whom? Truce, Barks
C. C. O. A.

20. Is the officer in need of special medical treatment of any kind, and, if so, of what nature? No

21. Does the officer require the constant attendance of another person? No

22. Officers will be classified by the Medical Board under one of the following categories, the probable period of unfitness for the higher categories being stated. Explanation of these categories is in para. 5 of A.C.I. 158/1918. In case of nurses, omit B. and (i) and (ii) of E.

- A.—Fit for general service yes
- B.—Fit for service in a garrison or labour unit abroad
- C.—Fit for home service :—
 - (i) Active duty with troops
 - (ii) Sedentary employment only
- D.—For admission to a command depot
- E.—Requiring indoor hospital treatment :—
 - (i) In an officers' military or auxiliary convalescent hospital n.a.
 - (ii) In an officers' hospital
- F.—Permanently unfit for any further military service

23. In the case of officers suffering from neurasthenia found permanently unfit, has A.C.I. 307 of 1918 been complied with? —

Major } President.
Major }
Cannon Capt. Came } Members.

MEDICAL EXAMINATION UPON LEAVING THE SERVICE OF OFFICERS AND OTHER RANKS WHO HAVE NO DISABILITY.

Officers and Other Ranks leaving the service for reasons other than medical unfitness are to be reported on this form. Where there is evidence of any undetermined or progressive disability, this form will not be used, but the case will be referred to a Medical Board for completion of M.F.B. 227.

No. Rank *Lieut.* Surname *C. LEADALL*
(Given name in full)
ALBERT
 Unit or Corps *3rd C.E.R.B.* Birthplace *Wombwell, Yorks, Eng.*

(Examination of Officer or Other Rank (stripped) to be made by one Medical Officer.)

1. GENERAL DESCRIPTION:

Physique *Good* Weight *170^{wt}* lbs. Height *5* ft. *6¹/₄* in. Colour of Eyes *brown*
 Nutrition *Good*
 Pulse *normal*
 Condition of arteries *normal*
 Vision Rt. *normal* Left *normal*
 Hearing (conversational voice) Rt. *no* ft.
 Left *no* ft.

Identification marks, scars, or deformities.
 (Give cause and date of origin.)
1 1/2" scar on outer side of left elbow. - fever.

Opinion as to general health and physical condition *Good*

2. Has Officer or Other Rank ever suffered from, or has he now, any affection of the following systems? (Answer "Yes" or "No"). (Subjective evidence may be sufficient in certain cases.)

Nervous System *no* Genito Urinary System *no* Cardio-Vascular System *no*
 Special Senses *no* Integumentary System *yes* Respiratory System *no*
 Disturbance of mentality *no* Muscular System *no* Digestive System *no*
 Osseous and Joint System *no* Any other general condition *no*

3. If the answer to any part of Section 2 above is "Yes," here give full particulars, with cause and date of origin; and also a description of the present condition.

Abscess of axilla Dec-1918 - cured.
Boils 1918 - cured.

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at Skafed.....(Overseas)

Date 1-3-19..... Signed J. M. C. [Signature] M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature [Signature] H. E. E.

(If not satisfied, M.F.B. 227 will be completed by Medical Board.)

THIS SECTION FOR USE IN CANADA—

Examined at.....(Canada)

Date SignedM.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature

(If not satisfied, M.F.B. 227 will be completed by Medical Board.)

(This space to be used, if necessary, in connection with Section 3, overleaf, only.)

[OVER]

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

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

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

On completion, if soldier discharged in Canada, this Declaration is to be returned to THE DISTRICT PAYMASTER OF THE DISTRICT IN WHICH THE SOLDIER WAS DISCHARGED, or if soldier discharged in England to be returned to Paymaster General O.M.F. of C., 7, Millbank, London, S.W.

1. Christian names Albert 2. Surname Gleadall
3. Rank Private 4. Original Unit 8th B.E.B. 5. Reg. No. _____
6. Address, in full, to which future payments of gratuity are to be forwarded.
British North American Bank Montreal
7. Date of enlistment in the C.E.F. 4-1-16
8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge NOT APPLICABLE
9. Relationship of such dependent NOT APPLICABLE
10. Address, in full, of such dependent NOT APPLICABLE
11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? NOT APPLICABLE
12. Were you at any time on the strength for pay and allowances of a unit of the C.E.F. which was out of Canada or the United States when such pay and allowances were issuable? If so, give particulars of one such unit and dates of service overseas with such unit:—

13. Were you on the strength for pay and allowances of the Clearing Services Command, having been at any time on duty outside of Canada or the United States? _____
14. Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service. _____
15. Give total length of time which you served on active service, whether in Canada or Overseas, setting out particulars of units on whose strength you served 4-1-16 unit 109th Bn.
In France 8-12-16 to 12th Bn. until 12-1-18 O.T.C. Bexhill
2-2-18 to 27-4-18 27-7-18 8th Bn. C.E. (in France)
until 29-12-18. P.O.S. 3rd C.E.R.B. 27-1-19.
16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department No
17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.? No

18. Have you had more than one enlistment? If so, give particulars of discharges and re-enlistments, and under what regimental numbers and units.....

No.

19. Have you already received any payment of Post Discharge Pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid.....

No.

~~20. Have you been issued with a War Service Badge? If so what class?.....~~

21. Have you, during the present war, served in the Imperial Forces?.....

No.

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

No.

23. (a) Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England?.....

No.

(b) If so, was such reversion in consequence of misconduct or inefficiency?.....

Not APPLICABLE

24. Are you now serving in the C.E.F.?..... If not, give:—(a) Date of discharge.....

(b) Reason for discharge.....

25. Are you at present a member of and in receipt of pay and allowances from any Canadian naval or land forces? If so, give unit.....

26. Did you at any time serve at the front in an actual theatre of war? If so, give particulars of one unit in which you served at the front, and dates of such service with that unit.....

27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment?.....

(b) If so, are you in receipt of full pay and allowances from that Department?.....

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

Signature of Applicant:

Alfred W. C. E.

Place of Residence:

Stapford, Sussex

Declared before me at:

This *twenty fifth* day of *March* 19*19*

Signature of Barrister of the Supreme Court Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner for the Administration of Oaths under P.C. 2767, dated 11th Nov., 1918.

N.B. Dumbay

POST DISCHARGE PAY.

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

Certified Correct.

District Paymaster.

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

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

Casualty Form—Active Service.

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

Regimental No. 109th

Rank LIEUT

Name Gleadall Albert

Enlisted (a) 4/1/16

Terms of Service (a) O of W.

Service reckons from (a) 4/1/16

Date of promotion to present rank. 28/4/16

Date of appointment to lance rank 28/4/16

Numerical position on roll of N. C. Os. LG 30584.

Extended

Re-engaged

Qualification (b) Laborer.

Report Date	From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B 213, Army Form A 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
		Embarked Canada	Halifax	24.4.16.	
		Disembarked England	Liverpool	31.4.16	
5/8/16		Appointed As Sgt	Quincy	5.8.16	Part II Order 218 285
31/8/16		Reverts to rank of As Cpl at own request.	Bramshott	29.8.16	Part II order 244
8-12-16		Reverts to rank of Private	Bramshott		
	O.C 109 Bn	Transferred to 124 Bn	Witley	8-12-16	D.O Part II 43.
					<u>A. D. Chelms</u> CAPTAIN, 106th BATTALION CAN. INFANTRY.
9-12-16	124th. Bn.	Taken on strength of 124th. Bn., C.E.F.	Witley Camp	8-12-16	Part III Orders 265
					<u>A. D. Chelms</u> MAJOR ADJUTANT, 124th BATTALION C.E.F.

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

CERTIFIED CORRECT.

CAN. RECORDS DIVISION.

2 MAR 1917

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.

From whom received

9-3-17

124th Bn.

Proceeded for Overseas Service.

Witley Camp

9-3-17

Part II Orders No. 69

Lieut., Asst. Adjt. 124th. CCBG (Para)

11-3-17

M.L.O.

Disembarked

Boulogne

11-3-17

N.R.

14/4/17

O.C. 124th Bn.

Confirmed in Rank of Lt. pl.

Field

9/3/17

D.O. Pt. II No. 81 d. 14/4/17.

28/4/17

do

Apppt. A/Pgt.

do

27/4/17

B.213 D.O. Pt. II No. 94 d. 7/5/17

10.6.17

do

Confirmed as Sergt.

do

27.4.17

B.213 D.O. Pt. II No. 107 d. 19.6.17

19.1.18

do

Trans. to England with a view to being granted a commission and posted to 1st Gen. Out. Regt. Depot, Shorncliffe

12.1.18

B.213 Auth. Can. Corps H.Q. M.P. 7-7-14 A.G. 9. Can. Sec. K.E. 9728/2. D.O. 5 d. 25.1.18
W. S. Raphael
 for Lt. Col. A.G. 9. Can. Sec. 9.H.Q. 3rd. Ech.

16-1-18

1st CORP

T.O.S. from 124th Bn

E.S. line

15-1-18

Pt. II D.O. 16

WS.

for Colonel 1/c Records
J. R. Hooper

4-2-18

- do -

att to C.T.S. Bechtel Sandling

2-2-18

D.O. No. 36. Capt. H. S. Cleverly Lieut. Asst. Adjt.

15-4-18

1st C.O.R.D.

S.O.S. in transfer to 66th D.

Witley

9-3-18

for O. C. 1st C. O. R. D. H. S. Cleverly

for O. C. 1st C. O. R. D.

Lieut Gleason A.

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
Date	From whom received				
3-1-19	OL. C. E. R. D.	T.O.S. on pty. ^{orphan in hosp} from service unit	Seaford	29-12-18	Pt II D.O. 3
31-1-19	OL. C. E. R. D.	S.O.S. on pty to C. E. T.C.	Seaford	25-1-19	Pt II D.O. 31
					Lieut. for Officer Commanding, C.E. Regtl, Depot.
4-2-19	1 st C. E. R. Bn.	T.O.S. from C.E.R.D.	Seaford	26-1-19	Pt II B.O. # 29
25-2-19	1 st C. E. R. Bn.	S.O.S. to 3 rd C. E. R. Bn	Seaford	27-1-19	Pt II B.O. # 47
					B. H. Dewdney Lieut. Col. C.E. Gmdg. 1 st C. E. Res. Bn, C.E.T.C.
25-2-19	3 rd C. E. R. B.	T.O.S. from 1 st C. E. R. B.	Seaford	27-1-19	Pt II D.O. 47
26-2-19	3 rd C. E. R. B.	S.O.S. to 8 th Bn. C.E.	Seaford		Lieut. C.E.
4-4-19	3 rd C. E. R. B.	The previous entry is cancelled	Seaford	4-4-19	for O.C. 3 rd C.E. RES. B.N.
4-4-19	3 rd C. E. R. B.	S.O.S. to C. E. F. in Canada.			LIEUT. C.E. FOR LT. COL. O.C. 3 rd C.E.R.B
31-5-19	3 rd C. E. R. B.	The previous entry is cancelled	Seaford	31-5-19	
31-5-19	3 rd C. E. R. B.	S.O.S. while in Hosp. to C. E. R. D. Witley	Seaford	1-6-19	Pt II D.O. 126
					Lieut. C.E. Asst Adj. 3 rd C. E. R. B.

MEDICAL BOARD REPORT ON A DISABLED OFFICER.

(ALSO TO BE USED FOR DISABLED NURSES.)

Station C.C.O.H. Matlock Bath. Derbys.

Date 21-1-19.

- 1. Rank and Name LIEUT. GLENDALL: ALBERT.
- 2. Unit 8th Can. Engrs. E.R.D. Seaford. Sussex.
- 3. Age 23 4. Total Service 35 Mos. War Service { (a) at home 6 Mos.
(b) abroad 24 Mos.
- 5. Address Wombwell near Barnsley, Yorks.

STATEMENT OF CASE.

NOTE.—In answering the following questions the Board will carefully discriminate between the officer's statements and evidence recorded in his medical documents. When possible, a statement by his medical attendant should be attached.

- 6. Disability BOILS.
- 7. Date of origin of disability November 1918.
- 8. Place of origin of disability France.
- 9. Give concisely the essential facts bearing on the history of the disability (personal and family history, etc.):—

NOTE.—Boards subsequent to the first should record here the progress of the case since the officer's last appearance.

Developed crop of boils on above date. Came on leave shortly after. Returned to unit. Developed axillary abscess and admitted to C.C.S., 17-12-18. To 4th London General Hospital, 29-12-18. Abscess excised and dressed. Scabies of arm. Scabies cured. Induration of right axilla. Boils healed. To Can. Red Cross Hospital, London, 7-1-19. Scar in axilla (R) healed. Improvement. To C.C O.H., 20-1-19.

OPINION OF THE MEDICAL BOARD

NOTES.—(i) The Board will on no account inform the officer of its opinion on any of the following questions.

- (ii) Clear and decisive answers should be filled in by the Board to enable the Ministry of Pensions to come to a reliable decision on the officer's claim to pension, etc.
- (iii) Expressions such as "may," "might," "probably" should be avoided, if possible.
- (iv) When there is more than one disability the replies will distinguish between them.

- 10. Was the disability contracted (a) before entering the service? No.
(b) in the service? Yes.
- 11. Was it attributable to military service? Yes.
If so, to what specific military conditions is it attributed? Service exigencies.

[Enteric Fever, Dysentery, Malaria, etc., contracted in countries where there is a special liability to the disease are to be regarded as attributable to military service.]

- 12. If not attributable to, was it aggravated by, military service? N.A.
If so, by what specific military conditions? N.A.

- 13. Is it attributable to, or aggravated by, the officer's own negligence or misconduct? If so, in what way, and to what extent? No.

14. What is the officer's present condition? Generally good.

Heart and Lungs sound. Skin practically clear now.

No other complaints. Fit again.

15. To what degree is the officer disabled at the present time? _____

(Degrees of disablement should be expressed in the following percentages—100, 80, 70, 60, 50, 40, 30, 20, under 20, or nil.)

16. Is the disability permanent? No.

17. If not permanent, how soon is re-examination recommended? _____ months.

18. Is it necessary that the officer should be re-examined by the same Board? No.

19. What treatment is the officer receiving, and where, and from whom? Tonic, Baths at

C.C.O.H.

Matlock Bath, Derbys.

20. Is the officer in need of special medical treatment of any kind, and, if so, of what nature? No.

21. Does the officer require the constant attendance of another person? No.

22. Officers will be classified by the Medical Board under one of the following categories, the probable period of unfitness for the higher categories being stated. Explanation of these categories is in para. 5 of A.C.I. 158/1918. In case of nurses, omit B. and (i) and (ii) of E.

A.—Fit for general service Yes.

B.—Fit for service in a garrison or labour unit abroad N.A.

C.—Fit for home service:—

(i) Active duty with troops N.A.

(ii) Sedentary employment only N.A.

D.—For admission to a command depot N.A.

E.—Requiring indoor hospital treatment:—

(i) In an officers' military or auxiliary convalescent hospital N.A.

(ii) In an officers' hospital N.A.

F.—Permanently unfit for any further military service N.A.

23. In the case of officers suffering from neurasthenia found permanently unfit, has A.C.I. 307 of 1918 been complied with? N.A.

G.H.R. Gibson, Major.C.A.M.C. President.

W.J. McAlister, Major.C.A.M.C.

Bruce Cannon, Capt.C.A.M.C. Members.

"C".

MILITARY SERVICE ACT, 1917.

MEDICAL HISTORY SHEET.

Temporary

1. Surname Gleadall Christian name Albert

Number of report for service or claim for exemption according to Postmaster's Receipt or schedule

3. Consecutive number on schedule of men reporting for service (if he appears on it)

4. Address (including street and number if any)

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the day of 19....., by the undersigned medical board sitting at

5. Age as stated.....Years.....Months. 6. Apparent age.....Years.....Month

7. Height.....Feet.....Inches. 8. Weight.....Pounds.

9. Chest measurement { Minimum.....Ins. Maximum.....Ins. 10. Complexion..... { Eyes..... Hair.....

11. Physical development { Good Fair Poor 12. Smallpox marks

13. Number of vaccination marks { Right arm..... Left arm..... 14. When vaccinated last

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

16. Slight defects but not sufficient to cause rejection

The man denies having had { Rheumatism, Tuberculosis, Nervous or Mental disorder. Epilepsy Syphilis, Asthma. We find no evidence of past { Rheumatism, Tuberculosis, Nervous or Mental disorder. Epilepsy Syphilis, Asthma

(Strike out disease admitted or suspected)

We have examined the above named man in accordance with the C. E. F. Regulations for medical examinations, and he is placed in Category

17. (a) Vision. R.....L..... (b) Hearing. R.....L.....

.....President. Member. Member.

Date	Result	VACCINATIONS	Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
		M. O.			M. O.
		M. O.			M. O.
		M. O.			M. O.

Joined.....day of.....19.....at.....

	CORPS	REG'TL NUMBER	HABITS	DATE
Joined on enlistment				
Transferred to.....				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION	DATE	DISEASE	RESULT

Signature of Man

If raised in category, record category in a square. The M. O. will initial and date.

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

Christian Name

Surname

STATION.	Date of Arrival at the Station.	DATES OF						DISEASE.	Number of days in Hospital.	Remarks on nature of the disease; how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
		Admission into Hospital			Discharge from Hospital.						
		Day	Month	Year	Day	Month	Year				
Rose Hoopl Toronto		26	7	19	29	9	19	V. D. G.	65	admitted with stricture, watery discharge. neither vesicles palpable. Rt. lobe normal in size Lt. lobe larger & tender. Wess sup Aug 15/19. Sept 12/19. Both lobes about normal in size. Sup & not tender. Discharge cured (copy) J. R. Liddle	

Regt. No. Rank. Name. *Lieut Gleadall* Unit.

Diagnosis. *Multiple Stricture*

C 11 *(1)*

Officer i/c Laboratory.

Please carry out an examination of the accompanying specimen of Urine with special regard to.

Date. *Apr 29* 1919.

Capt. Morrison
.....
Officer i/c Ward.

L. St. Gregory 7/8

LABORATORY REPORT.

Color. *Amber (cloudy)*

Reaction. *alkaline*

S.G. *1014*

Sugar. *neg*

Albumen. *Pos ++*

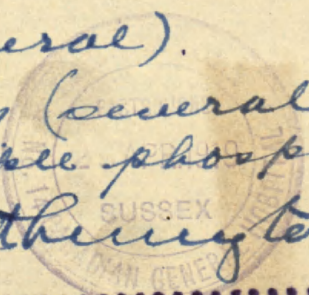
Microscopic. *Leucocytes (several)*

Red blood cells (several)

Special. *Phosphates. Triple phosphates*

Date of Exam. *Apr 29th* 1919.

R. Hetherington
.....
Officer i/c Laboratory.



Regtl. No. Rank and Name Lt Gleadowe Corps

Disease Hospital S.C.S

To Officer i/c Laboratory. Ward

Please carry out an examination of the accompanying specimen of U.D.

with special regard to G.P. & other organisms

Date 7-5-19 W. S. Burner Capt

O. i/c Ward.

LABORATORY REPORT. 2535A

My

Negative for G.C.

2

W. S. Burner

Date of Examination 7/5/19

W.3212. 50M-4-4-18.

O. i/c Laboratory.

Q. 1/6 10001010 X



ГРЕБЕВІОНА БЕЛОБИ



Reg'tl. No. Rank and Name *St Glensall* Corps

Disease Hospital

To Officer i/c Laboratory. Ward

Please carry out an examination of the accompanying specimen of *P.F*
with special regard to *G.C etc*

Date *7-5-19*

W. J. Turner apn
O. i/c Ward.

LABORATORY REPORT. *2536A*

ROY

G.C. Protein

Date of Examination *7/5/19*
W.3212. 50M-4-4-18.

Wm. J. Turner

O. i/c Laboratory.

0-140-19/00100

11/11/19

1

11/11/19

11/11/19

11/11/19

11/11/19

11/11/19

11/11/19

11/11/19

11/11/19

11/11/19

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
		LIEUT	GLEADALL.	ALBERT.
Year	Unit.	Age.	Service.	
	8 th Bn Can. Eng.	23	2 ⁶ / ₁₂	
Station and Date.	Disease Patient states - Boils.			
Can. R. X. 0/6 ²³ shop.	(a) Past occupation - fireman on G. F. R.			
	(b) Past illnesses - knows of no illness. no history of venereal always been healthy.			
	(c) Service - enlisted Jan, 1916 at Lindsay, Ont., with 109 Bn came to England July, 1916. Went to France Dec, 1916 to 38 th Bn transferred to Can. Eng. April 1918. always healthy in army.			
	<u>Present illness</u>			
	Patient's statement:- about Nov 18, got a boil in Rt axilla after five days compressing while on duty, this went away. Was on leave two weeks, rejoined Bn Dec 10, & a swelling developed in axilla in about 5 days.			
	<u>Documentation</u> admitted to 20 C.C.S. 17/12/18.			
	" Axillary abscess - for operation. Scabs of arm, abscess of R. axilla. Incised, Eusol dressing "			
	→ 25 Gen. 23/12/18. " axillary abscess (hydroadenitis) & scabs " 26/12/18. Scabs now cured			
	→ 4 th Long Gen Hosp 29/12/18. (Birkett aux. Hosp.) " Rt axilla - good deal of induration left, also a superficial boil pointing			
	Dec 31 - also boil on left crushed. Boil incised. Joints.			
	Jan 6 - Good deal of induration left in axilla still, Boil practically well			
	→ Can. Red + Officers Hosp Jan 7, 1919.			

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

Station
and Date.

Can. R. X. Off. = Hon.

9/1/19

Present Cond.

Swar in R. axilla pract. healed. Absid. and
induration.

A fresh boil low down left back, which
requires fomenting.

Put on. Ac. Sulph. dil. in XX t.i.d. pc.

General condition quite good.

Ht. + humors neg.

18-1-19.

has well. Recd for transfer to Mallocke Hall

for a med. Ad.

Attended

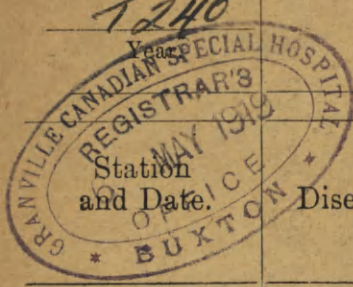
MEDICAL CASE SHEET.*

No. in Admission and Discharge Book. <i>12165</i>	Regimental No.	Rank.	Surname.	Christian Name.
	<i>Sunt</i>		<i>Glendall</i>	<i>Albert</i>
Year <i>1919</i>	Unit.	Age.	Service.	
	<i>8th Geny</i>	<i>23</i>	CANADA <i>6</i> FRANCE <i>24</i> TOTAL <i>30</i>	
Station and Date. HARLOCK BATH.	Disease	ONSET		
<i>Jun 20</i>	<i>Bois</i>	<i>Nov. 19-18</i>		
		WHERE	<i>France.</i>	
<u>HISTORY OF DISABILITY.</u>				
<i>Developed crop of boils on above date. Commenced soon shortly after. Returned to unit. Developed military abscess & ad. to C.C.S. 17-12-18. To 4th London Gen. 29-12-18. To Petrograd Hosp. 7-1-19. To C.C.S.A. 20-1-19. abscess free from Bois.</i>				
<u>PERSONAL AND FAMILY HISTORY.</u>				
<i>Good.</i>				
<u>PRESENT CONDITION</u> <i>Good</i>				
<u>DIGESTIVE SYSTEM.</u> <i>OK.</i>				
<u>CIRCULATORY SYSTEM</u> } <i>OK.</i>				
<u>RESPIRATORY SYSTEM.</u> }				
<u>NERVOUS SYSTEM.</u> <i>Sleeps well.</i>				
<u>G.U. SYSTEM.</u> <i>No vis. symptoms.</i>				
<u>LOCAL CONDITION.</u> <i>One boil on back.</i>				
<i>Treat. - alkaline mist. before meals.</i>				
<i>Diet - as indicated.</i>				
<i>21-1-19</i>	<i>Board and Cert. A</i>			<i>RL</i>

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

Station
and Date.

MEDICAL CASE SHEET.



No. in Admission and Discharge Book:

1240

Regimental No. Rank. Surname. Christian Name.

— Lieut Gladall. R.

Unit. Age. Service.

3rd C.E.R.B. 23 $\frac{42}{12}$ —

Disease

Mull. Structure V.D.G. (vo)

Series having had Gonorrhoea.

8.5.19

ON Admission:— Prostate enlarged— Urine hazy, shreds.

Several Prostatic fluid G.C. Positive

9.5.19

P.P. irrigation 1-4000 Sat. twice daily— S.M. twice weekly.

15.5.19

Urist bl. spks.

21.5.19

Vaccines 75 million

26.5.19

Aq.H.O.3 irrigation 1.5000 S. Uristens S. Hg. spks.

29.5.19

P.P. irrigation once daily

2.6.19

Aq.H.O.3 irrigation 1.5000 Dry. C. spks.

Transferred to #12 C.G.H. for further treatment

Worburner Capt. GAMB

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

CANADIAN EXPEDITIONARY FORCE

Certificate of Service

ISSUED TO OFFICERS AND NURSING SISTERS

This is to Certify that (Rank)..... **Lieutenant.**

(Name in full)..... **Albert GLEADALL.**

Enlisted in..... **109th Battalion as #124739 (Private).**

CANADIAN EXPEDITIONARY FORCE, on the..... **Fourth**

day of..... **January** 191 **6** AND WAS APPOINTED to COMMISSIONED RANK

in..... **Canadian Engineers.**

CANADIAN EXPEDITIONARY FORCE on the..... **Twenty-Eighth** day

of..... **April** 191 **8**

He SERVED in CANADA, **England and France with the 109th Bn.,**
124th Battn., 1st Cent. Ont. H. Depot., Can. Engrs. Central Depot.,
Can. Engrs. H. Depot., 2nd Can. Engrs. Res. Battn., 8th Battn. CE.,
1st. Can. Engrs. Res. Battn., 3rd Can. Engrs. Res. Battn., D.D.#2.

and was STRUCK OFF THE STRENGTH on the..... **Thirtieth** day

of..... **September** 191 **9** by reason of..... **General Demobilization.**

Dated at Ottawa, this..... **Fourth** day

of..... **February** ~~191~~ **1920.**

Albert Gleadall
..... **Lieut.**
Director of Personal Services.

for.

L.L.

CANADIAN EXPEDITIONARY FORCE

Certificate of Service

ISSUED TO OFFICERS AND NURSING SISTERS

This is to certify that (Rank) _____

(Name in full) _____

Entered in _____

CANADIAN EXPEDITIONARY FORCE on the _____

day of _____ 1917 AND WAS APPOINTED to COMMISSIONED RANK

CANADIAN EXPEDITIONARY FORCE on the _____

of _____ 1917

HE SERVED IN CANADA _____

AND WAS STRUCK OFF THE STRENGTH ON THE _____

of _____ 1917 by reason of _____

DEPT. OF QUARTERS THE _____

of _____ 1917

Director of Personnel Services

VENERICAL DISEASE CASE SHEET

(Gonorrhoea)

Reg. No. Rank: Name: Unit:

HISTORY:

No. of previous attacks

Where and when acquired

Date and character of symptoms

Handwritten signature in blue ink

VENEREAL DISEASE CASE-SHEET

(GONORRHOEA).

Reg. No. Rank *Lieut* Name *Gleadell A* Unit *#2 1110*
 Diagnosis ~~7119~~ Admitted *July 26/19* Discharged
Strickland Medical Officer i/c case

HISTORY

No. of previous attacks.....
 Where and when acquired.....
 Date and character of symptoms.....

DATE Day of disease	Smear	Urine	Urinalysis	Other Lab. Tests	Complications	Medicine	Irrigation	Operations
<i>Sept 2/19</i>	<i>Prost</i>	<i>Prostate same as last day</i>	<i>few Pus little pro fluid.</i>				<i>R.</i>	<i>++ m. 2.4.</i>
<i>Sept 5/19</i>	<i>d.d.</i>					<i>W.</i>		<i>disch 1st am</i>
<i>5th</i>	<i>K26.</i>							
<i>8th</i>	<i>d.d.</i>					<i>W.</i>		<i>slight</i>
	<i>K26 1/2</i>				<i>not irrigating</i>			
<i>10th</i>	<i>d.d.</i>					<i>W.M.</i>		<i>very of moisture</i>
<i>12th</i>	<i>sp d.</i>							<i>very of moisture</i>
	<i>K26</i>							
		<i>R.Y.N.P. and L.Y.N.P.</i>						
		<i>Both lobes about normal in size. Irreg and not tender.</i>						
		<i>Vesicular contents</i>						
		<i>Pus - few Pus. few Epiths. few gram + cocci. few gram + bacilli.</i>						
<i>15th</i>	<i>sp d.</i>							
	<i>K26</i>							
<i>18th</i>	<i>sp d.</i>					<i>W.M.</i>		
	<i>K26.</i>							
	<i>22nd ordered d.</i>					<i>W.M.</i>		<i>disch 6 days.</i>

1914 12 9 1914

100

100

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100-100-100

100-100-100

LEASE
TVE
OLMEE

NAME NAME

GENERAL INVESTMENT CO.
100-100-100



VENEREAL DISEASE CASE-SHEET

BASE (GONORRHOEA) TORONTO

Reg. No. nil Rank Lieut Name Gleadell A. Unit #2000

Diagnosis Stricture Admitted July 26/19 Discharged

Medical Officer i/c Case

HISTORY

No. of previous attacks 1 First & only attack 1913. Rest relapses
 Where and when acquired England - was admitted to
 Date and character of symptoms hospital with stricture
April 24th 1919 - boy has thin watery
discharge - never had attack before.

DATE (Day of disease)	Smear	Urine	Urinalysis	Other Lab. Tests	Complications	Medicine	Irrigation	Operations
								<u>with stricture.</u>
<u>July 29th</u>		<u>cf - cf</u>						<u>P.P. Woodh.</u>
<u>July 31st</u>		<u>1 stricture</u> <u>1 stricture in bulb of urethra</u>						<u>D. - normal</u> <u>D. - normal</u>
<u>Aug. 14 19</u>		<u>Out on 14 day leave.</u> <u>Pat on Potash 1/3.</u>			<u>Kollman's</u>			<u>H. milky head.</u> <u>am. only.</u>
<u>" 14</u>		<u>JK 2H.</u>						
<u>" 15</u>		<u>Neither vesicles palpable. Right lobe</u> <u>normal in size. sl large and tender</u>						
<u>15</u>		<u>Pros - no cellulav elements.</u>						
								Wasserman Test Aug 15 Negative
<u>18. 1400 d.</u>								<u>MM</u> <u>moisture</u> <u>only</u>
<u>18.</u>		<u>R. v. n. p. Right lobe small. Reg. sl firm.</u> <u>not tender L. v. n. p. left lobe larger than</u> <u>right. irreg. sl. firm. moderately tender.</u>						<u>Smear +</u>

M. F. W. 101.
3,500-11-16.
1772-39-1053.

18 Pros - few Pus. little pros fluid.
20th d. 0 Inden 1/12000
Hettman St clear an
wore when scripta

178
174

BRITISH

BRITISH EAST

MADE IN CANADA

17

(GONORRHEA) (R. P. 7. 101).

NO

NO

RANK

Lieut. NAME

Gleadall.

DATE OF DISEASE.	SMEAR	URINE	URINE-ALYSIS	GONORRHOEA	COMPLICATIONS	MEDICINE	IRRIGATION	OPERATIONS
Sept. 22 ^d	K. 28.	R. U. N. P. - not tender.	R. L. sl. small, sl. irreg., soft.					
		L. U. N. P. - op. / sh ^o opol ves. cont.	L. L. about the same, sl. firmer.			+++ smear.		
		<i>Pros. - few pus, few gram + cocci, few gram + bacilli</i>						
Sept 26 th 19	d. d.							o disch.
								Out to unit headquarters
								F. P. Walker Capt.

GENERAL DISMISS CASE SHEET

Reg. No. Rank Name Unit

H I S

No. of previous attacks

Where and when acquired

Date and character of symptoms

Name Gleadall Albert Rank 2 C.E.F. 2 Unit 8 Rank 2 Militia 2 Unit 6
 File No. 602-17-253 Rank 2 C.E.F. 2 Unit 8 Rank 2 Militia 2 Unit 6
 M.D. No. 2 Date 28.4.18 Reference 2256

Appointed Lieut. 124 Bn Date 28.4.18 Struck off C.E.F. 30.9.19 2256
 Promoted 2 Reason Demob.
 Transferred 9.19 Struck off C.E.F. 9.19
 Reason Demob.

TRANSFERRED TO R.O.
G.O. 26

Sailed 1.10.19 Transfer to R.O., C.E.F. 1.10.19 2370
 O.M.F.C. to C.E.F. Transfer to Active List on appt. as

Active Operations 2 Years. 124 Bn France Transfer to R.O., C.E.F. 48.38

REMARKS

Date of Birth.

23. 12. 96.

No 12 C. G. H. Bramslett.

W1809-P1225-18 HWV(P1147)

Army Form W. 3497a.
Continuation Card to A.F.W. 3497.

No. _____ Name L. Gleadall A. Regt. _____

Disease V.D.G.

Date	Treatment		Progress	Complications and their Treatment
	Local	General		
12-6-19	P.P. 1	4000.	Dry.	Hazy. Sphs.
13-6-19	P.M.			
16-6-19			Dry.	S. Hazy. Sphs.
17-6-19	P.M.	22 F. Sound.	Bleeding	
19-6-19			Moist	1 st S Hazy. Sphs.
20-6-19	P.M.			
22-6-19	Sound	26. Bleeding	moist	1 st S Hazy. Sphs 2 nd cl Sphs.
24-6-19	P.M.	Vac. 100 M.		
26-6-19	Sound.	23. Bleeding.	Moist	1 st Hazy. Sphs 2 cl phs.
27-6-19	P.M.	Vac. 100 M.		
1-7-19	Justil 4%			
<p>Transferred to Beaumont. Mil. Hospital <i>Mc Jackson</i> Capt. Callis</p>				
4-7-19	Sound 22.			
7-7-19	Invalided to Canada			
<p><i>A. P. Hony. Capt. Conn</i></p>				

VENEREAL DISEASE CASE-CARD.

Army Form W. 3497.

Granville Canadian General Hospital. *Ypres Army* Ward.

Age: *23* Service: *47* Religion: *P.E.* Disease: *V.D.S.*
 Regiment: *3rd C.E.R.B.* Coy.: _____ Reg. No.: _____ Bank: *Lieut.* Name: *Gleason*
 Date of Admission: *8-5-19* Disposal: _____ Date of Discharge: _____

This space not to be written upon by M. O. i/c case.

SUMMARY

In cases of Syphilis the particulars below must be sufficient to enable the Syphilis Case Sheet (Army Form I. 1238) to be made up from this Card.

1st, 2nd, 3rd attack or relapse _____ Dates and Places of Three last Exposures _____

Main points in history *Denies having had gonorrhoea.*

Condition on admission *Prostate enlarged - Prostatic fluid G.C. Pos. Wine hazey opaco*

[P.T.O.]

Date	Treatment		Progress	Complications and their Treatment
	Local	General		
9-5-18	P.P. irrig 1-4000 Post		Twice Daily	
	P.M. Twice weekly.			
15-5-19			moist	Cl. spks.
19			"	stazy "
21	Vacc. 75 m.			
22			"	"
23	P.M.		S.	S. "
26	AgNO ₃ irrig 1-5000		"	"
29	P.P. irrig once daily		Dry	S "
30	P.M.			
2-6-19	AgNO ₃ irrig 1-5000		"	Cl. spks.
3-	P.M.			
5.6.19				
6.6.19	8.M.			
<p>Transferred to #12 b.g.H.</p> <p>Wm. Sumner Capt. 6.A.M.6.</p>				

Surname	Christian Name
GLEADALL	A.
Rank	Unit
Lieut.	8th.Bn.C.E. 3rd.C.E.R.B.

Casualty List			
	No.25 General,Hardelot		24-12-18
27-12-18/1173	"Scabies".		
30-12-18/1175	3. HS.to Birkett Hosp.		29-12-18
	"Abscess Axilla."		
9-1-19/183	2. C.R.X.O.H., London		8-1-19.
23-1-19/1195	3. C.C.O.H.Matlock Bath		21-1-19
28-1-199/1199	2. Discharged:-		25-1-19
28-4-19/1274	4. No.14 C.G.H.Eastbourne		24-4-19
	"Mult.Stricture".	Accid.	
8-5-19/1283	2. Granville Spec. Binton		7-5-19
13-6-19/1311	12. C.G.H. Bramshott.		11-6-19
11-7-19/1334	2 16.C.G.H. Orpington.		10-7-19.
	"V.D.G"		
16-7-19/1338	Discharged.		14-7-19.

A.M.D. 2 DEPT.

Dep. of D.G.M.S. O.M.F.G. London

Surname	Christian Name	Serial No.
GLEADALL	A.	
Rank	Unit	
Lieut.	8th.C.E.	3rd.CERB.

Medical Board held at	Date	Condition found by Board
Matlock Bath	21-1-19.	Boils.

Fit for General service.

Bramshott Area. 6-7-19. Septic Urethritis
V.D.G.

Unfit any service Ret. Hospt. Canada.

Remarks.

To Canada per HMAT Essequibo V.L'pool.14-7-19



A. & D. CARD

..... HOSPITAL.

AT

A. & D. No.

1240

RANK

Lieut

REG. NO.

PL. OF ACTION

BUXTON

J. G. B. P.

SICK OR WOUNDED

NAME

Gleadall A

AGE

23

RELIGION

Cofc

PLACE IN HOSPITAL

Ward B

DIAGNOSIS

Mult Stricture acc VD

ADMITTED

6/5/19

FROM

14th Can Gen Eastbourne

DISCHARGED

10/6/19

TO

no 12 Can Gen Bramshott

TRANSFERRED

SERVICE AT HOME

H2
-12

IN FIELD

RESULTS

3 delays

(See Document Card for M.H. Sheet and other Documents.)

REMARKS.

RESULTS

(See Document Card for M.H. Sheet & other D. comments.)

NO 12 CAN. GENERAL HOSPITAL

HOSPITAL.



AT.....

A. & D. NO. **T-3** PL. OF ACTION.....

RANK *Lieut.* REG. NO. *Albert* UNIT *3rd C.E.R.B. Can.* SICK OR WOUNDED

NAME *Headall, A.* AGE *23* RELIGION *C.P.E.*

PLACE IN HOSPITAL *Ward 13*

DIAGNOSIS ~~*10-6-19*~~ *Mull. Stricture*

ADMITTED *10-6-19* FROM.....

DISCHARGED..... TO.....

TRANSFERRED *2-7-19* *13 M. H.*

SERVICE AT HOME *X* *42* IN FIELD.....

RESULTS.....

(See Document Card for M.H. Sheet and other Documents.)

A. & D. CARD

Military HOSPITAL.

Braushett

AT.....

A. & D. No. *T 19* PL. OF ACTION.....

RANK *Lieut* REG. NO. UNIT *3 66 R.D.* SICK OR WOUNDED

NAME *Headall A.* AGE *23* RELIGION *66*

PLACE IN HOSPITAL *13*

DIAGNOSIS *Mult Structure*

ADMITTED *2.7.19* FROM **NO 12 CAN. GENERAL HOSPITAL**

DISCHARGED..... To.....

TRANSFERRED *9.7.19* *Orpington*

SERVICE AT HOME *42/12.* IN FIELD.....

RESULTS.....

(See Document Card for M.H. Sheet and other Documents.)



A. & D. No. 106. PL. OF ACTION
 RANK Lieut. REG. No. UNIT 36ERB SICK OR WOUNDED
 NAME Headall A. AGE 23 RELIGION CoF E.
 PLACE IN HOSPITAL C2.
 DIAGNOSIS Multiple stricture
 ADMITTED 23-4-19. FROM
 DISCHARGED TO
 TRANSFERRED Gran Can. Spec Hosp Buxton 6/5/19
 SERVICE AT HOME 42/12. IN FIELD
 RESULTS

(See Document Card for M.H. Sheet and other Documents.)

REMARKS.

FORM DMS 140

HOSPITAL

CARD

11

11

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

Number.....

Rank.....

LIEUT.....

Surname.....

GLEADALL.....

Christian Names.....

ALBERT.....

Unit.....

Theatre of War.....

FRANCE

Date of Service.....

31.7.16.....

9.3.17.....

14.7.19

Remarks.....

66.

The offices

6 Cottonwood Wombwell

Eng.

Latest Address.....

Midland

Dist

Roll No.

B
Pages 3500

NAME

REGT. No.

RANK AND UNIT

NEXT OF KIN

CABLE

No.

DATE

NATURE OF CASUALTY

G.A. 11885-Depo

NAME

Goodall

a

REGT. No.

RANK AND UNIT

Lieut

8th Bn CE

NEXT OF KIN

CABLE

NATURE OF CASUALTY

NO.

DATE

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
1173 ¹	25. New Handelol	24-12-18	Lesions
1175 ³	Birkett, 7 Mandeville Place W.	29-12-18	Access ailla
1183 ²	Can Bed x off 17 N. Audley St. W.	8-1-19	" "
1195 ²	Can Low Officers Mattokhan	21-1-19	" "
1199	Discharged	26-1-19	" "
1274 ¹	14 Can New Gasbourne	24-4-19	Mult. Struc ^{ts}
1283 ²	Can New Spee Buxton	7-5-19	Mult. Structure 3 CERES acc.
1311 ²	12 Can New Bramshott	11-6-19	" "
1324 ²	Can Sen Org.	10-7-19	20
1338	Disch	14-7-19	20

Name **GLEADALL** ✓ Rank **Lieut** ✓
 Unit **Albert ^{Bn} 8th Can Eng** Reg. No.

Next of Kin **3 C.E.R. Bn.**

Albert Gleadall (Father)
44 Bartholomew Street
Wombwell, Yorkshire, Eng

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1918						
24-12	25th Gen Hosp	Hardelot (Tel.C.1890)	Scabies.	1113	✓	
29-12	Pinkett Hosp. 7 Wanderville			1175	✓	
8-1-19	banked off to Analyst	7001	Abscess	1183	✓	
21-7-19	banked off to Analyst	7001	Abscess	1183	✓	
25-1-19	Discharged	7003		1195		
24-7-19	4th Can Gen Hosp. Eastbourne (7001)		Multiple Stricture	1208	✓	
7-5	Franklin Spec Hosp Buxton (7001)		Multiple Stricture acc	1265	✓	

No. 724739 RANK

*Pte
Cpl.*

NAME

Gladael Albert.

T. O. S. 1-1-16.

UNIT

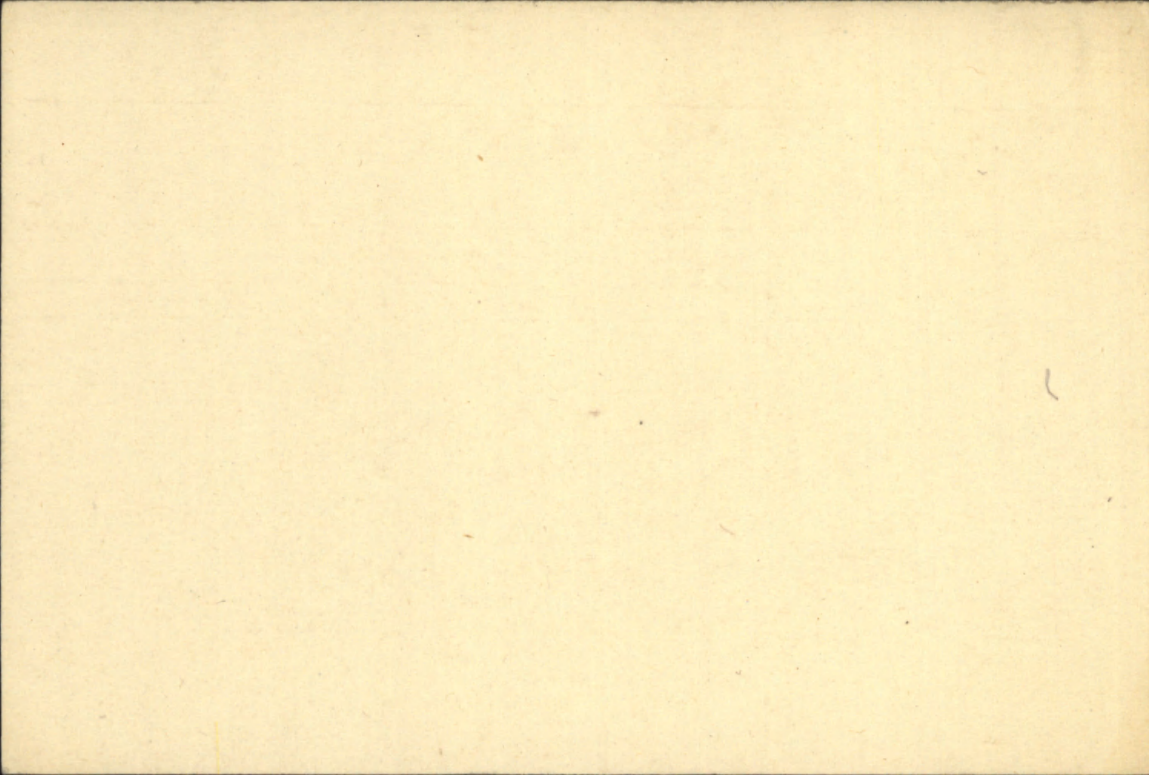
109th Battalion

D.O. 39. 5-1-16

M. D. *U*

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1916 Jan. 1.</i>	<i>1916 Jan 31</i>	<i>✓</i>	<i>Prom. Cpl. 21-2-16.</i>	<i>D.O. 80. 22-2-16.</i>
<i>Feb.</i>		<i>✓</i>	<i>Reverts to Pte (same request.)</i>	<i>D.O. 109. 27-3-16.</i>
<i>Mar.</i>		<i>✓</i>		
<i>April.</i>		<i>✓</i>		
<i>May.</i>		<i>✓</i>	<i>Pro. Corporal. (prov.) 1-4-16.</i>	<i>S.O. 119 of 7-4-16.</i>
<i>June.</i>		<i>✓</i>		
<i>July.</i>		<i>✓</i>		

UNIT SAILED
JUL 23 1916



* Strike out whichever inapplicable.

ASSIGNED PAY. ENGLAND OR CANADA. SEPARATION ALLOWANCE. ENGLAND OR CANADA.

NAME: **GLEADALL Albert**

EFFECTIVE DATE: **1.5.17**

NUMBER: **724739**

AMOUNT: **20⁰⁰**

PARTICULARS OF RANK OR APPOINTMENT

NAME, ADDRESS, RELATIONSHIP & AUTHORITY
M^r Albert Gleadall
14 Bartholomew St
Wombwell York Eng
(Father)
A.P. Stop 1/4/18 Int Army O.T.C
yes

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
D.O.G. 7/5/17	27.4.17	Sgt

20 SEP 1918

UNIT AND TRANSFERS

ORIGINAL UNIT: **109th Bn**

DATE ACCOUNT FIRST OPENED: **1.8.16**

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S'D	UNIT TRANSFERRED TO
M.R.	1.2.18		how cadets Com. C. E. F.

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBSCE ALL'CE
	1.35	.15		

PARTICULARS OF RENDERING NON-EFFECTIVE: **Discharged Commission O.M.F.C. 27th 18. Auth. List B Lt. 8/5.**

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
March	Payⁿ								13 07	19 50	
April	S-Pay 1st 18 - 27th 18.	40 50		AR 73. 5th 18. Bx hie	4 87				22 56		
	Interest on deferred pay 28th 18	1 18			4 87				23 74		
		41 68									
Aug				M. P.P. Bal.	23 74						
					23 74						

A 3 M. FORM NEN^o 8-3-18 EFFEC^o 1st 18.
 DISCHARGED TO **Com. O.M.F.C.** DATE **27th 18**
 PAY BOOK VERIFIED **10-5-18**
 BAL. **23⁷⁴** L.P.C. REN^o 10th 18.
 AUTHY. **List B. Lt. 8/5.**

Sgt. # 724739

ASSIGNED PAY.

UNIT.

RANK.

NAME.

NAME OF RATE OF P. AND A.

Mess. DATE

AUTHORITY

Beneficiary

Address

Amount. \$

Separation Allowance issued. Yes or No.....

C.E. T.D.

Pay \$2.

F.A. 60

Messing 1.

Serjeant

6/18. D.G. 375 d/4/18.

L64 B-2.

Name Gleadall

Initials Albert

Bank Union
Haymarket

Add Outfit Allowance 28/11/19

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialed by P.M. in every case.	INITIALS
April 14	Outfit Allowance							
"	" " (badet.)							
May 15	Pa F.A. fr. 28/18 - 30/18	1383	7 80					
"	Do. (Gr. Bal. fr. Pay II \$23.74)	2024		31 54				
"	May Pay. (mess. fr 6/18)		106 60					
16	Gr. Bal. fr. Pay II. 27/18	130	23 74					
22	Bank	2495		106 60				
June 12	June Pay		108					
21	Bank	4089		108				
July 17	Jul Pay		111 60					
25	Bank	5421		111 60				
Aug 12	Aug Pay.		111 60					
24	Bank	6961		111 60				
Sept 13	Sept Pay.		108					
25	Bank	8949		108				
Oct 15	Oct Pay.		111 60					
22	Bank	10671		111 60				
29	Add. Outfit Allow.							
Nov	Pay R		120					
	Appt F.A 12/9/18 31/1/18 =		20					
	Bank	12443		140				
Dec	Pay R		124					
	Bank	13486		124				
Jan	Pay R		124					
	Bank			124				Forward

42-7-5 } \$200.00
9.0.0 }

ASSIGNED PAY.

UNIT.

RANK.

NAME.

NAME OF

RATE OF P. AND A.

DATE

AUTHORITY

Beneficiary

Address

Amount. \$

Separation Allowance issued. Yes or No.....

C.E.T.D.

Pay 2

F.A. /

Messing /

Lieut

Name

Initials

Bank

*Headall
A.
Timon
Haymarket*

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialed by P.M. in every case.	INITIALS
	<i>Balance Forward</i>			<i>Nil</i>		<i>Nil</i>		
<i>Feb 21</i>	<i>Pay R. Bank 17034</i>		<i>112</i>	<i>112</i>			<i>Net to be cleared R.P. Oct 28/19 1/2 to E. Dudge</i>	
<i>Mar 15</i>	<i>Adv. Mar. P.A. Bank 18143</i>			<i>124</i>			<i>23/19 Adv. P.A. as usual</i>	
<i>May 1</i>	<i>add outfit allow 28 1/4</i>	<i>38</i>	<i>100</i>			<i>er 100</i>	<i>Rtd to bank 1/2 to 31/19 (see file) 2/2 to E. Dudge</i>	
<i>11</i>	<i>April Pay + Adv. outfit allow. Bank 2161</i>			<i>220</i>			<i>11/19 Adv. P.A. as usual</i>	
<i>15</i>	<i>May Pay. P.R.</i>		<i>124</i>					
<i>21</i>	<i>Bank 2569</i>			<i>124</i>				
<i>June 21</i>	<i>June Pay (R.)</i>		<i>120</i>					
<i>21</i>	<i>Bank</i>			<i>120</i>				
<i>July 10</i>	<i>Adv July Reg. P.R.</i>	<i>5086</i>		<i>218</i>				
<i>21</i>	<i>July Reg. Pay (R.)</i>		<i>218</i>					
<i>Aug 18</i>	<i>Widener's note of 10/19 - 11/19 Admitted Aug 10/19 to 31. b.d. 1334. Discharged 11/19. Auth. b.d. 1338.</i>	<i>Genap.</i>		<i>10</i>		<i>10</i>	<i>Admitted Aug 10/19 to 31</i>	
<i>Dec 31</i>	<i>Clgd. to C.F.F.</i>	<i>1048</i>	<i>10.00</i>				<i>Held 1/2 pd plus 2.A. Billed to bank on 10/19 11/19 to 8/19. Billing 10/19 10/19 10/19 Adv. note Dr 10 00</i>	

RETURNED TO CANADA
L.P.C. TO 31. 8. 19 405
TRANSFER TO N.E. LEDGER

War Service Badge Class A.



*O.G. 24
D.A. 1*

PROCEEDINGS OF AN OFFICER OR NURSING SISTER
STRUCK OFF STRENGTH
OF THE
CANADIAN EXPEDITIONARY FORCE

Mil. Dist. 2.

1. RANK

Lieutenant

2. NAME

Gleadall, Albert.

3. UNIT

8th. Battn. C.E.

4. DATE STRUCK OFF STRENGTH

PLACE

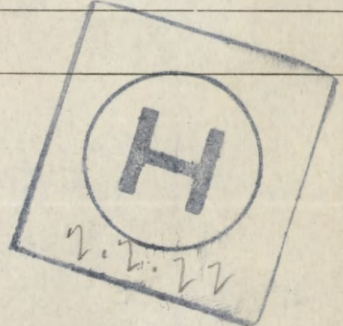
5. REASON

Cessation of Hostilities

6. AUTHORITY

7. PROPOSED RESIDENCE

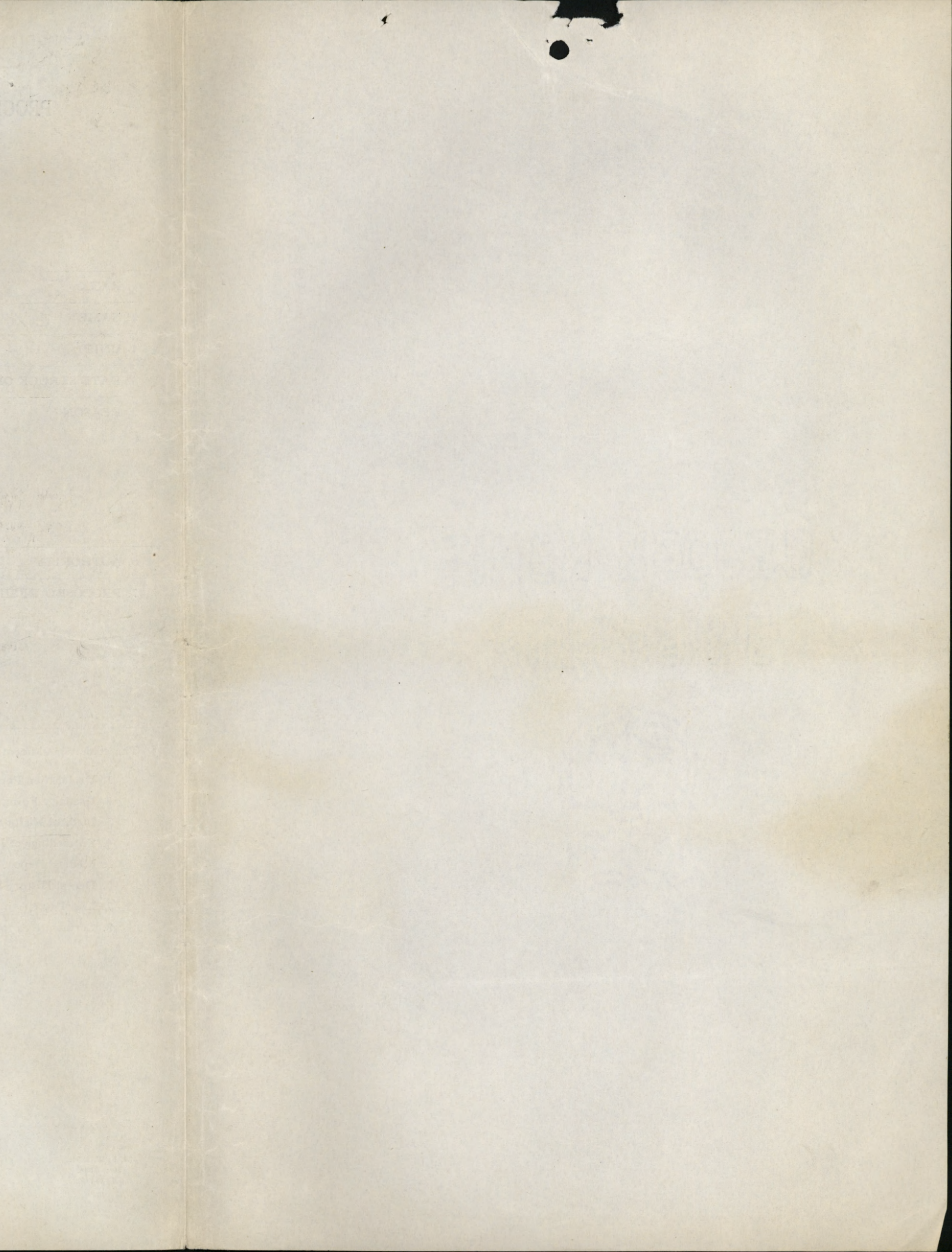
Midland, Ont



This folder should contain the following documents:

1. Declaration Paper, M. F. W. 51, or Attestation Paper, M. F. W. 23.
2. Casualty Form, A. F. B. 103 or M. F. W. 54.
3. Medical History Sheet, M. F. B. 313 or A. F. B. 178.
4. Proceedings of Medical Boards, A. F. A. 179 or M. F. B. 227.
5. Medical Report M. F. W. 129.
6. Dental History Sheet, M. F. B. 465.
7. Last Pay Certificate, M. F. W. 44.
8. Certificate as to Missing Documents.

PROCEEDINGS OF AN OFFICER OF NURSING SISTER
STRUCK OFF STRENGTH
OF THE
CANADIAN EXPEDITIONARY FORCE



2/

PROCEEDINGS

1. RANK *Lieut*
 2. NAME *Glea*
 3. UNIT *8th*
 4. DATE STRUCK OFF S
 5. REASON

Spec

6. AUTHORITY

7. PROPOSED RESIDEN

Mi

This folder should contain

1. Declaration Paper, 1
2. Casualty Form, A. 1
3. Medical History Shee
4. Proceedings of Med
5. Medical Report M.
6. Dental History Shee
7. Last Pay Certificate
8. Certificate as to Mis

Surname **GLEADALL**Christian Names **Albert.**Rank **724739 Sgt. CERD.**

Name and Address of Next-of-Kin

Promotion **T/Lieut.****Albert Gleadall, (Father)**Unit **C.E. (Tunn Co)****44 Bartholomew St. Wombwall, Yorkshire, Eng.**Place of birth **Ontario.**Married (Yes or No) **No.**

Appointments

Date of leaving Canada

Date and Cause of Resignation

Report		Record of Promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case	Place	Date	REMARKS Taken from Official Documents	
Date	From whom received					
15.5.18	WO.	To be Temp. Lieut. C.E.	28.4.18	28.4.18	Lond. Gaz 30684. A.F.B. 10 25 MAY 1918	
22.5.18	2nd CERD.	T.O.S 2nd C.E.R.B.		21.5.18	PII of 1.	
19.7.18	do	S.O.S. on proc. of seas. to France		15.7.18	Pt. II of 50. A.F.B. 10 20 JUL 1918	
22.7.18	CER Pool.	T.O.S. having arrd fr CER. C as Rein.		14.4.18	PII of 48.	
5.8.18	do	Trans to 8 Bn CE.		23.4.18	PII of 81. 408.8th Bn CE. PII of 10	
4.12.18	8 Bn CE	Granted leave to U.K.	23.11.18	6	7.12.18	Pt 30. 42
27.12.18	Am.S.	Adm. 25. Genl. Hosp. Hardebt.		24.12.18	Ch. 1173. Scabies	
30.12.18	do	Adm. Birkett Hosp. 7. Mandeville Place W.		29.12.18	Ch. 1175. Abscess Axilla	
9.1.19	-	- banked + off hosp. 17. N. Andley St W		8.1.19	Ch. 1183	
13.1.19	8 Bn. C.E.	S.O.S. on trans. to C.E.R. Pool on being		28.12.18	Pt. II of 2.	
15.1.19	C.E.R. Pool	invalided to England sick & detached to C.E.R.D.		29.12.18	Pt. II of 4.	
3.1.19	C.E.R.D.	T.O.S. on posting from 8 Bn. C.E.		29.12.18	Pt. II of 3.	

Report		Record of Promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case	Place	Date	REMARKS Taken from Official Documents
Date	From whom received				
23.1.19	A.M.S.	Adm. C.C. Officers Hosp. Matlock	Disch. 25.1.19	C. h. 1199.	Opilla abscess
4.1.19	1 C.F.R.Bn.	J.O.S. from C.E.R.D.	26.1.19	Pl. II of 29.	
25.2.19	do	S.O.S. to 3rd C.F.R.Bn.	27.1.19	Pl. II of 47.	
28.4.19	A.M.S.	Adm. 14 Can. Gen. Hosp. Eastbourne	24.4.19	C. d. 1274.	Multiple structural
8.5.19	do	Adm. Gran. Can. Spec. Hosp. Ruxton	7.5.19	C. d. 1283.	
31.5.19	3 C.F.R.Bn.	S.O.S. to C.E.R.D. Witley	1.6.19	Pl. II of 126.	
13.6.19	A.M.S.	Adm. 12 Can. Gen. Hosp. Brams.	11.6.19	C. d. 1311.	" accid
11.7.19	A.M.S.	Adm. 16 Can. Gen. Hosp. Orpington	10.7.19	C. h. 1334.	" 20"
		Discharged	14.7.19	C. h. 1338.	" 20"
9-8-19	C.F.R.D.	because Det Port of Emb & in SOS on transfer to C.S. 7 in Canada	14.7.19	Pl. 2. O. 221.	
		Sailed for Canada	14.7.19	Sail list 508.	21989

LH. Rank *Act. Sgt.* Name GLEADALL, Albert. Reg'l No. 724739.
 Unit 109th. Bn. If in perm. Corps, }
 What Unit? } Married or Single Single.
 Place and Date of Enlistment Lindsay, Jan. 4th. 1916. Place of Birth Wombwall, Yorks HIRE
England.
 Name and Address, Next-of-Kin Albert Gleadall,
44, Bartholomew Street, Wombwall, Yorks, England. Relationship Father.

Assigned Pay Monthly \$

Payable to

Relationship

Separation Allowance \$

Payable to

Relationship

Discharge Date and Place

Reason

Character

H. W. & V., Ltd.—7165-16.

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS. Taken from Official Documents.
Date.	From whom received.				
Arrived in England per H. M. T. 2810 31-7-16					
5-8-16	O.C. 109 th	App'd <i>Prov. Sgt.</i>	Oveney	5-8-16	Pt. II D.O. 218 ✓
31-8-16	✓	Reduced to <i>Cpl</i> at own request	Bramshott	29-8-16	Pt. II D.O. 244 ✓
8-12-16	-	SOS on trans. to 124 th Bn.	Witley	8-12-16	" " 343
11-12-16	O.C. 124 th	App'd <i>Sgt.</i> fr 109 th			" " 267
9-3-17	124 th Bn	Emb for France	Witley	9-3-17	Pt II DQ68
14-4-17	do	Confirmed <i>Corpl</i>	Field	9-3-17	Pt II O'81
7-5-17	do	App'd <i>act. Sgt</i> with pay	do	27-4-17	— 914
19-6-17	do	Confirmed in rank of <i>Sgt.</i>	do	27-4-17	— 109
7-6-18	1st CO RD	T.O.S on reporting from France	<i>Sgt. Sling</i>	15-1-18	— 16 (D.O. 5 th 25-1-18)

A.F.B. 103 CHECKED
 19 MAR 1917

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
Date.	From whom received.				

4-2-18	1st CORD	On Com. C.T.S. Beshill	Sgt. E. Slings	2-2-18	R. II O.O. 35 No. 6. 5. 18.
--------	----------	------------------------	----------------	--------	-----------------------------

15-4-18	✓	Closes on Com. C.T.S. Beshill & S.O.S. to C.E.R.D.	Sgt. Wides	9-3-18	— 103
---------	---	--	------------	--------	-------

4-5-18	CERD	T.O.S. on Trans. from 1st CORD recommend to LTS Beshill		9-3-18	— 123
--------	------	---	--	--------	-------

4-5-18	✓	Having been appld. to comm. in the C.E.F. is SOS on posting to CERD		27-4-18	— 123
--------	---	---	--	---------	-------

Granted Comm. B & F posted to 12 Reg 28 4 18
R L 24-1 d 30 4/18

CERTIFIED COPY
 2-MAY-1918
 CANADIAN RECORD OFFICE

Lieut. **Casualty Form - Active Service.**

Rank Lieut. Regiment of Corps 109th Bn
 Surname Gleadall Christian Name Albert
 Religion Age on Enlistment years months.
 Enlisted (a) Terms of Service (a) Service reckons from (a)
 Date of promotion to present rank 28/4/18 Date of appointment to lance rank
 Extended { } Re-engaged { } Qualification (b)
 or Corps Trade and Rate

Signature of Officer.

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				

			Embarked ...		
			Disembarked...		
<u>4-5-18</u>	<u>C. E. R. D.</u>	<u>T. O. S. of C. E. R. D.</u>	<u>Seaford</u>	<u>9-3-18</u>	<u>M. II. Do. 123.</u>
		<u>On Com. P. T. S. Bexhill.</u>			
<u>4-5-18</u>	<u>C. E. R. D.</u>	<u>Having been appointed</u>	<u>Seaford.</u>	<u>27-4-18.</u>	<u>M. II. Do. 123.</u>
		<u>to a Commission in the</u>			
		<u>Can-Forces S. O. S.</u>			
		<u>on posting to The C. E. T. D.</u>			

RECORDED
 13000

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

[P.T.O.]

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B. 213, Army Form A. 26, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 26, or other official documents
Date	From whom received				
15.5.17	W.O.	To be Temp Lieut from Congo		28/4/17	LG 30600
					CAPT
4-5-18	CPTD	T.O.S. of CPTD on reporting from CTS Bechell	Seaford	28-4-18	FOR ASET MIL SEC CN
21-5-18	CPTD	Posted to 2 CBRB from CPTD	Seaford	21-5-18	PR II 117
21-5-18	2 CBRB	T.O.S. of 2 CBRB from CPTD	Seaford	21-5-18	PR II 1
19-5-18	2 CERB	S.O.S. on proceeding of 2 to France	Seaford	15-7-18	PR II 50 CERC 351
					Lieut. C.E.
					for Lieut. Colonel, C.E.
17-7-18	CPTD	JOS CPTD	Field	17-7-18	PR 21/1918
19-7-18		To CERC		19-7-18	NR 409
	CERC	arrived	CERC		NR 1105
23-7-18		S/O 8 BATTAL		23-7-18	NR 1270 9/81
27-7-18	8 th Bn. C.E.	J.O.S. 8 th BATTAL C.E.	Field	24-7-18	B.213. Pt 2 No 10
23-11-18	do.	L.O.A. to H.K. from 23-11-18 to		7-12-18	B.213. D.O. 43
14-12-18	do.	Rejoined from leave		9-12-18	B.213
17-12-18	20 C.C.S.	Abscess (Auxiliary R)			A.4397
19-12-18	10 C.F.A.	do.	To C.C.S.	17-12-18	A.4484
23-12-18	25 Gen	Seaper in adm	25 Gen	23-12-18	N 6101
21-12-18	5 th Bn 6E	Sick to Hosp		17-12-18	B.213
28-12-18	25 Gen	abness to Bay		28-12-18	W 3030-6387
29-12-18	Telesidebank	Sick to Eng & home from to			W 3083-6667
		b. & R took		28-12-18	DO # 2 d 13. 79

DUPLICATE. Copy to replace original

SERVICE AND CASUALTY FORM (Part I).

Army Form B.103-I. Part I.

ED CORRECT
JUL 1919
RECORD OFFICE

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

Nothing to be written in this margin.

Forms/B.103/8
W10416-P2151 100,000 3/19 HWV(R1460)

(1)*Substantive rank <i>Lieut</i>	Regiment or Corps	(3) Regtl. No.
*Acting rank (To be entered in pencil to facilitate alteration.)	<i>109th Battalion</i>	
(4) Surname <i>Gleadall</i>		
(5) Christian Names <i>Albert</i>		
(6) Army Form, number of, Attestation } Form or Record of Service paper }		
(7) Whether of British or of Alien origin (<i>vide</i> A.C.I. 578 of 1918)		
(8) Date of birth as stated on enlistment		
(9) (a)		

(10) Enlistment (b) <i>4 - 1 - 16</i>	(11) Engagement (c)
(12) Service reckons from (date)	(13) Special conditions (if any) of enlistment (d)
(14) Any subsequent variations (if any) } of conditions of service }	

Initials and Rank of an Officer.

(Authority) (date)

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

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

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

(A) Report		(B)	(C)	(D)	(E)	(F)
Date	From whom received	Authority of Part II. of Orders	Record of promotions, appointments, reductions, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named	Place of casualty	Date of promotion, reduction, reversion, casualty, &c.	Remarks, and initials and rank of an officer
			Arrived in England		31.7.16	
5.8.16	109 th Batt.		Appt. Prov. Sergeant	Conny	5.8.16	Pt II 20218 + 285
31.8.16	"		Reduced to Prov. Capt. at own request	B'stoll.	29.8.16	244
8.12.16			SOS on train to 124 th Batt.	Walley	8.12.16	373
11.12.16	124 th Batt.		TOS	"	"	267
9.3.17	"		Embarked for France		9.3.17	68
14.4.17	"		Confirmed Corporal	Field	9.3.17	81
7.5.17	"		Appt. 4 th Sergt. with pay		27.4.17	94
19.6.17	"		Confirmed Sergeant		27.4.17	107
16.1.18			SOS		15.1.18	16
	1 st BOKD		TOS on reporting from France		15.1.18	5
4.2.18	"		Of band CTS Bexhill	E Sandling	2.2.18	35
15.4.18			leaves of band CTS + SOS to 6 th ERD		9.3.18	103
4.5.18	6 th ERD		TOS on trans from 1 st BOKD to			
			band CTS Bexhill		9.3.18	123
			Granted Com. + is SOS on posting CERD.		27.4.18	133
10.5.18	110.		To be T/ Lieut 6 th E ^s		28.4.18	L S 20684
22.5.18	2 nd 6 th ERD		TOS.		21.5.18	Pt II O. 1
19.7.18	"		SOS on proc of seas.		15.7.18	50
22.7.18	6 th ER Pool.		TOS. from England.		17.7.18	78
5.8.18	"		Trans to 8 th Battalion.		23.7.18	81
"	8 th Batt		TOS		"	10
4.12.18	"		Granted leave to M.K. from 23 rd 1816		7.12.18	43
27.12.18	AMS		Adm 25 Gen Hospital	Cardelot.	24.12.18	6 L 1173
30.12.18	"		" Berkitt P. 7 Mandeville Place W.		29.12.18	" 1175

Nothing to be written in this margin.

(SERVICE AND CASUALTY FORM Pa II)

Regiment or Corps Law Engineers Regimental Number _____

*Substantive Rank Lieut Surname Fleadall Christian Names Albert

*Acting Rank _____
(*To be entered in pencil to facilitate alteration.)

(A) Report.		(B) Authority of Part II. of Orders.	(C) Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	(D) Place of casualty.	(E) Date of promotion, reduction, reversal, casualty, &c.	(F) Remarks, and initials and rank of an officer.
Date.	From whom received.					
9. 1. 19	AMS		Adm Law R.X.O.P. Audley St. W.		8. 1. 19	62 1183
13. 1. 18	8 th Batt B.E.		SOS to B.E.R. Pool. Inv to Eng Sects		28. 12. 18	P.H.O. 2
15. 1. 19	B.E.R. Pool		Inv to Eng + det to B.E.R. D.		29. 12. 18	4
3. 1. 19	B.E.R. D.		TOS from 8 th Battalion		3. 1. 18	3
4. 1. 19	1 st "		TOS from B.E.R. D.		26. 1. 19	29
25. 2. 19	"		SOS to 3 rd B.E.R.B.		3. 1. 19	47
31. 5. 19	3 rd B.E.R.B.		SOS to B.E.R. D.	Witley	1. 6. 19	136

CERTIFIED TRUE COPY.

from Record Sheet
Edley

For AMS Law Major, Capt

14/7/19
S.O.S. O.M.F. of C.
ON EMBARKATION FOR CANADA.

Shankar
For MAJOR General,
Adjutant General, Canadians.

FORM B. 103 (II) TO BE PRINTED ON PAPER RECOMMENDED

To be folded on this line.

Nothing to be written in this margin.

(P26988.) Wt. W. 9639-P. 2003. 500,000. 8/10. S. & S., Ltd. E. 4692.

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

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

500M.—9-16

H. Q. 1772-39

Casualty Form—Active Service.

Unit, Regiment or Corps. 3rd Bn C. 2

Regimental No. Rank Private Name Glendall Albert
C. E. F.

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

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

Extended Re-engaged Qualification (b)

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
30 7/19	M.H.Q. Ottawa	T.O.S. C.E.F. in Canada on General Demobilization <i>Including</i>	M.I.D. No. 2	14 7/19	C.E.F. R.O. No. 2100 19
	O.M.F.C.	TOS #2 Dist. Depot	Toronto	14-7-19	Auth: R.O. 2100 Pt.11 D.O.218. <i>Sturckett</i> For O.C. No. 2 District Depot
		SOS on Gen. Demob.	Toronto	30-9-19 <i>Co. 10.19</i>	Auth: 2MD 30-G-204 dated 27-10-19 Pt.11 D.O. 303. <i>Sturckett</i> Capt For O.C. No. 2 District Depot

(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				

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

V.D.G. Partial loss of function Genito-Urinary system

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-- Stricture in Penile and Membranous portions of Urethra

at present dilated to 22 English. Prostate moderately enlarged and

slightly tender, Vesicles enlarged. 1st Urine contains hazy shreds

2nd Cloudy specks, slight morning moisture, no gluing of meatus. Improving

under prostatic massage, irrigations, vaccine and sounds

Subjective- slight moisture meatus, all times worse in mornings. Can make wat

water well with moderately large stream-- No other symptoms

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

Nervous System... No Cardio-Vascular System... No Genito-Urinary System... No (If pulse rate is abnormal, B. P. will be taken.) (Albumen and Sugar will be excluded.)

Special Senses... No Respiratory System... No Integumentary System... No

Disturbances of Mentality... No Digestive System... No Muscular System... No

Osseous and Joint Systems... No Any other general condition... No

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

M. H. S. No 14 C. G. H. 23-4-19 to 6-5-19 Multiple Stricture

Granville Special Hosp 6-5-19 to 10-6-19 V. D. G.

No 12 C. G. H. 10-6-19 to present V. D. G.

Does not know when he contracted disease. No further urethral discharge

First symptoms difficulty in voiding. sent to no 14 C. G. H.

At Granville special. Prostate enlarged massaged, smear G. C. Positive

Receiving Prostatic massage, vaccines, irrigations and instrumentation

x2x2 (Sounds)

10.—(b) (Here give a complete description of the condition to or since enlistment, or since discharge.)

M. H. S. Birke

Petr

Watl

(c) (Here give a description of the condition to or since enlistment, or since discharge.)

11.—(a) Did the disability exist at the time of enlistment?

(b) If so, has it been aggravated since that time?

12. Was the disability caused by the service?

refusal to accept treatment. The regimental doctor refused to accept treatment. (If the answer is in the affirmative to this question, conduct of the invalid should be stated.)

13. What is the probable duration of the disability?

than one year?

14. Treatment (Case reported to the medical department.)

15. Is further treatment indicated? (If the answer is in the affirmative, the nature of the treatment should be stated.)

16. Can the former trade or occupation be resumed? (If not, the reasons therefor should be stated.)

17. Recommendations.

The

(Sections 7, 8, 9 and 10 are to be filled in by the medical department.)

I, the undersigned, certify that the foregoing is a true and correct copy of the present condition read, and of the medical history of the invalid.

I complain in addition of

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

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

M. I. S. Birkett Hospital 29-12-18 to 7-1-19 Axillary abscess and scabies

Petrograd 7-1-19 to 20¹-1-19 Boils

Matlock Bath 20-1-19 to 28-1-19 Boils

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

Nil

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

(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.)

Not Applicable

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

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

13. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? 6

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

Usual Hospital

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- 4 Months

16. Can the former trade or occupation be resumed? No

(If not, briefly state why)

17. Recommendations

That he be Invalided to Canada

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, Albert Headrick, 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

Alfredall 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.) No
- (b) Service abroad, not general service, (" B) (Yes or No.) No
- (c) Home service (Canada only), (" C) (Yes or No.) No
- (d) Temporarily unfit, (" D) (Yes or No.) Yes D
- (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.)

Special Hospital Treatment 4 Months

- (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.)

Invalidated to Canada

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.

Eh Pope de la... President.
Kell Mackenzie Major... Members

PLACE.....

DATE.....

TO BE COMPLETED WHEN TREATMENT IS REFUSED

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

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

PLACE.....

DATE.....

APPROVED BY

Assistant Director of Medical Services.

DATE.....

APPROVED BY

I concur in the findings of the Board of Medical Officers here recorded. Director-General of Medical Services. Captain, B.A.D.M.S. for D.M.S. Canadians.

CERTIFIED TRUE COPY Members

DATE.....

MED

- 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 questi his condition. They state the authority whether such stater 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) UniOrd. C. H. R.

(d) Surname... GLEADA

(f) Home address... Man

(g) Next of Kin... Abra

(i) Address of Next of I

2. Age last birthday.....

3. Enlistment, or Appointm

4. Personal description:

(a) Height... 5 ft

(d) Colour of hair... Lt

Scar Left Elbow

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... AP

(c) Cause... Infe

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
89241 Ban 1 Year 1918		Lt	Gleadow	Albert
	Unit.	Age.	Service.	
	8 th Canadian Eng.	23	3 yrs	
29.12.18 Station and Date. 4th LONDON GENERAL HOSPITAL, R. A. M. C. (T.) DENMARK HILL S.E.	Disease	Axillary Abscess		
		10.12.18 at Waterloo		
		14 at F. & 10 Canadian		
		Abscess M. axilla.		
		at CES 20. Abscess M. axilla Incised.		
		Swab during		
		Scabies of arm.		
		23 at 25 Gen Hosp		
		Axillary Abscess & Scabies.		
		26 Scabies now cured.		
Dec 29. 1918 Birkett Hosp India 31		(He had 3 days Sulphur treatment at 25 Gen Hosp)		
		M. axilla good deal of Induration left.		
		also a superficial boil from leg.		
		abs Nail in L. Nubtock.		
		Boils incised. - Forments		
		Col. Many more Inj		
1919 Jan 6		Good deal of induration left in axilla still.		
		Boils practically well		
		W. Norway MO		
Jan 7		Transferred to Petrograd Hosp Ninth Cavalry Lt		

* The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.
(6365) W2914/P438 2,950,000 1/18 McA & W Ltd Forms I. 1237/13 (E 2349) [P.T.O.]

Station
and Date.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
T43 Year 1919		Lt.	Gleadall	A
		Unit.	Age.	Service.
		3 CERB.	23	3 1/2
Station and Date.	Disease <i>Gonorrhoea & Stricture</i>			
No. 12 CAN. GENERAL HOSPITAL. 10.6.19	<i>Transfer from Granville Canadian Special Hospital</i>			
	<i>Treatment</i>			
12-6-19	<i>Pat Permang 1-4000 b. l. d. Dry. Urine Hazy & shreds</i>			
13-6-19	<i>Prostatic Massage</i>			
16-6-19	<i>Dry. Urine - hazy & shreds</i>			
17-6-19	<i>Prostatic Massage Sounds 22 English B bleeding</i>			
19-6-19	<i>Moist. Urine. hazy & shreds</i>			
20-6-19	<i>Prostatic Massage</i>			
22-6-19	<i>Sounds to 26 E. Bleeding Moist. 1st hazy shreds 2nd clear shreds</i>			
24-6-19	<i>Prostatic Massage Vaccine 100 million</i>			
26-6-19	<i>Sound 22 English Bleeding Moist. 1st hazy shreds 2nd clear shreds</i>			
27-6-19	<i>Prostatic Massage. Vacc 100 million</i>			
1.7.19.	<i>Deep Irrigation AgNO₃ & Jp.</i>			
4.7.19	<i>Sounds 22</i>			
7.7.19.	<i>Invalided to Canada.</i>			
	<i>W. H. H. G. East Coast</i>			

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



MEDICAL CASE SHEET.*

No. in Admission and Discharge Book. Year	Regimental No.	Rank <i>Lt</i>	Surname. <i>Gleadall.</i>	Christian Name. <i>A.</i>
	Unit <i>3 C.E.R.B.</i>	Age <i>23.</i>	Service. <i>4 1/2</i> <i>12.</i>	
Station and Date.	Disease <i>stricture urethrae</i> <i>patient states he has never had gonorrhoea. but was kicked in the perineum when playing foot ball. but the strictures are multiple. an patient was unable to void when admitted strictures were dilated and sounds up to size 6. But were inserted the dilatation is very painful and difficult internal urethrotomy advisable no instruments available at no 14 for this operation patient transferred to special hospital for this operation patient can now void but stream is small and it is thought that stricture will contract down again unless he has internal urethrotomy and full dilatation</i> <i>J.H. Moore</i> <i>May</i>			

* The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.
 (6365) W2944/P138 2,950,000 1/18 McA & W Ltd Forms/I. 1237/13 (E2349) [P.T.O.]

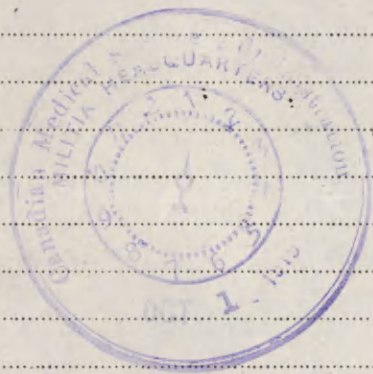
CASE HISTORY SHEET.

Hospital. BABE Station. TORONTO
 No. nil Rank. Lieut Name. Gleadall A. Age. 23
 Unit. 4200 Completed years of service 0 Where and how long C 6/12 E 7/12 F 1/12
 Date of admission July 26/19 Date of discharge Sept 29/19
 Diagnosis. Structure Place of origin England

CONDITION ON ADMISSION AND PROGRESS OF CASE

Admitted with structure + very
 clam. watery discharge.

Digestive system
 Normal
 Circulatory system
 Normal
 Respiratory system
 Normal
 Cardiovascular
 Normal
 Nervous system
 Normal



FAMILY HISTORY

(Tuberculosis, mental or nervous diseases.)

Th. row.
 M. d.
 Father 2 row.
 Bros 4 row.

Special Senses
 Eyes normal
 Ears "
 Nose "
 Throat "
 all normal

TREATMENT

(Especially any specific or special form.)

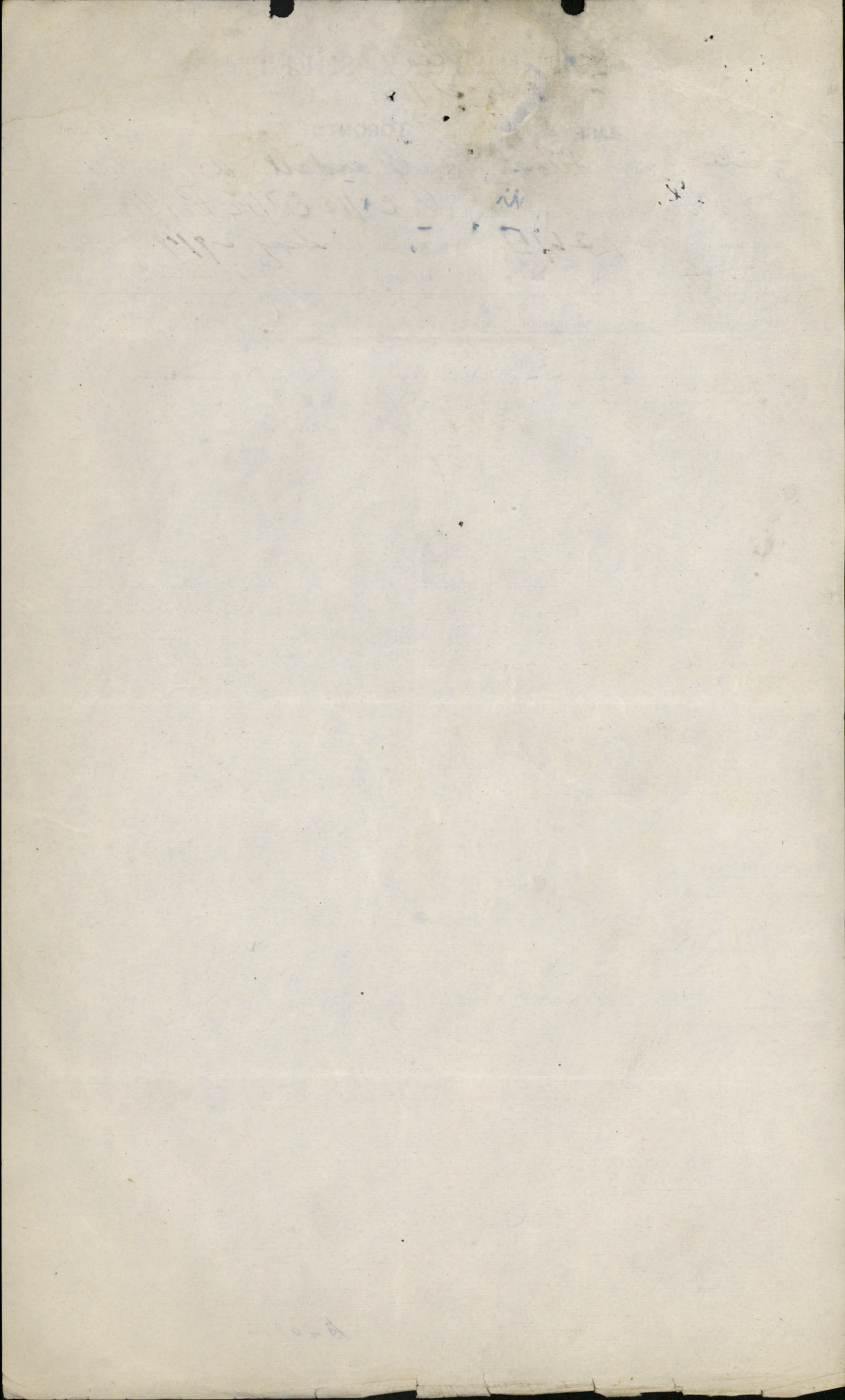
CONDITION ON DISCHARGE

(and disposal made of case.)

Discharged. Out to unit

Date Sept 26 19

F. R. [Signature]
 Medical Officer i/c case.



Esseumbo 23/7/19

AUDITOR PAYMASTER

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

M. OR S. REGT. No. RANK **LIEUT.** NAME (IN FULL) **G LEADALL, ALBERT.**

ORIGINAL UNIT C.E.F. **3. C.E.** IF IN P.F. WHAT UNIT? **Bank of Montreal** (BLOCK LETTERS SURNAME FIRST)

PLACE OF ATTESTATION **Midland** TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION **14/1/16** TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY \$ **NW** DATE EFFECTIVE

IS SEPARATION ALLOWANCE PAID? **NW** DATE EFFECTIVE

TO WHOM PAID RELATIONSHIP

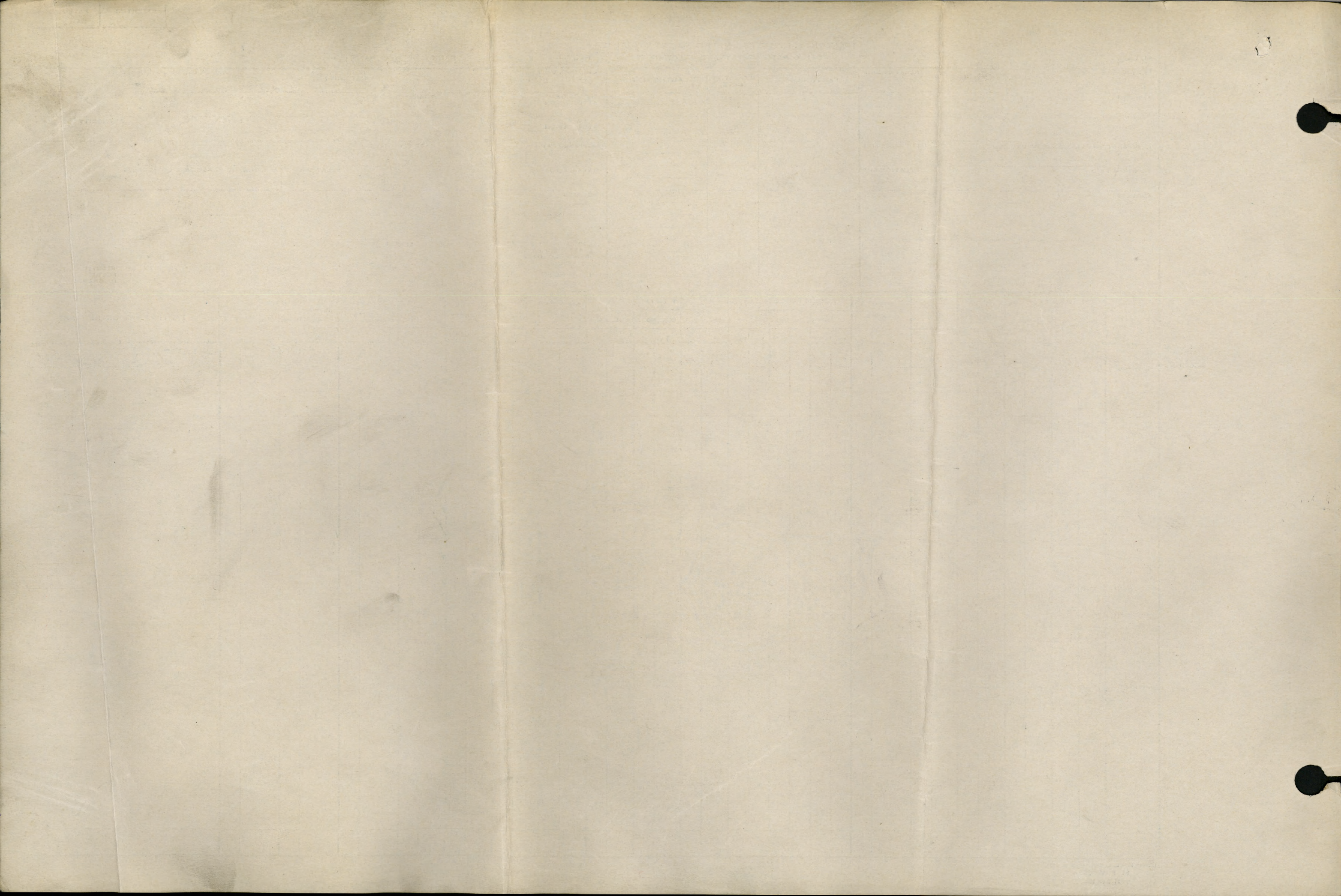
ADDRESS

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE EFFECTIVE

DISCHARGED PLACE DATE **30-9-19** REASON **Demob.** AUTHORITY **90 303** IF ENTITLED TO POST DISCHARGE PAY **yes**

BALANCE FROM PREVIOUS ACCOUNT

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		NO.	DATE	NO.	DATE	NO.	DATE	NO.	DATE				\$	C.	\$	C.		\$	C.	\$	C.
			\$	C.																				
31-8-19																						at Port. Rel missing 16/7/19 3/8/19		
Sept 1	30	3.00	90	23.90	113.80	128-3/19	142-19/19	151-30/19	25-	25-	35-				122.00	207-	122.00				T.O.S. D.O. 2.18			
183 days	3-			W.S.G. 579-	579-										93.20	93.20	455.80				Subs 31/7 to 13/8/19 10.221			
									163	10	175.00				90	183.20	365.80							
									204	29	175.35				10	193.20	255.80				18/8/19 Deductions on			
									230	29	186.40				172.80	366.00	183.00				of "20" from 10-7-19			
									252	27	186.60				93.00	459.00	190				14-7-19 2 days 32.80			
														90.00	549.00	10					17/12/19			
														549.00	549.00									



MILITIA AND DEFENCE
ASSIGNED PAY.

Ref. No. *A.R.**J.J.*

33694

To whom *Mr. Albert Cleadall.*By whom assigned *Cleadall. Albert.*Address *44 Bartholomew St. ✓*Regtl. No. *724439. ✓* *Serjeant**Wombell. Wombwell*Rank *Sgt.**Yorkshire ✓*Corps, &c. *109th Batt. ✓*Rate *15 ⁰⁰/₁₀₀ ✓*Date to Commence *1st Aug. 1916.*

PAYMENTS.

Month.	Year.	Cheque No.	Amt.	Pay Sheet Deduction.	REMARKS.
Jan.	1916				
Feb.					
Mar.					
April					
May					
June					
July					
Aug.		<i>149965</i>	<i>15</i>	<i>X</i>	
Sept.		<i>160363</i>	<i>15</i>	<i>X</i>	
Oct.		<i>193705</i>	<i>15</i>	<i>X</i>	
Nov.	<i>60 ✓</i>	<i>234231</i>	<i>15</i>	<i>X</i>	
Dec.		<i>274229</i>	<i>15</i>	<i>X</i>	
Jan.	1917	<i>316755</i>	<i>15</i>	<i>X</i>	
Feb.		<i>357722</i>	<i>15</i>	<i>X</i>	
Mar.		<i>403587</i>	<i>15</i>	<i>X</i>	
April					
May					
June					
July					
Aug.					

*a.D. checked yours correct
26.3.17 K.P.S. type*

ASSIGNED PAY.

By whom assigned

Gleadall. Albert

Regtl. No.

720739. Sgt 109th Batts.

Month.	Year.	Cheque No.	Amount.	Pay Sheet.	REMARKS.
Sept.	1917				
Oct.					
Nov.					
Dec.					
Jan.	1918				
Feb.					
March					
April					
May					
June					
July					
Aug.					
Sept.					
Oct.					
Nov.					
Dec.					
Jan.	1919				
Feb.					
March					