Jan 12 th C/K RG DCO Kinmount

ATTESTATION PAPER.

No. 726093

109th OVERSEAS BATTALION, C. E. F.

Folio.

ORIGINAL

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? — Graham
1a. What are your Christian names? — John William
1b. What is your present address? — Irondale
2. In what Town, Township or Parish, and in what Country were you born? — Penrith, England
3. What is the name of your next-of kin? — Arthur Graham
4. What is the address of your next-of-kin? — Irondale Ont.
4a. What is the relationship of your next-of-kin? — Father
5. What is the date of your birth? — March 24th, 1898
6. What is your Trade or Calling? — Farmer
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? If so, state particulars of former Service. — no
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, John William Graham, 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.

J W Graham (Signature of Recruit)

Date Jan 24th 1916. Walter Mark Lieut (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, John William Graham, 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.

J W Graham (Signature of Recruit)

Date Jan 24th 1916. Walter Mark Lieut (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 Kinmount this 24th day of January 1916

E A White (Signature of Justice)

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

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31
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31
8
T02

6

Description of John William Graham on Enlistment.

Apparent Age 37 years 10 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 6 ins.

Chest measurement: Girth when fully expanded 39 ins.
Range of expansion 4 ins.

Complexion Ruddy

Eyes Blue

Hair Dark Chestnut

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

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

Scar of deep cut on left thumb involving nail.

Two small scars over left patella.

Scar from appendicitis operation.

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 21st 1916.

Place Kinmount

J. McCulloch Capt.
J. H. Boyd Medical Officer
109th Overseas Battalion, C.E.F.
Medical Officer.

*Insert here "fit" or "unfit."

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

CERTIFICATE OF OFFICER COMMANDING UNIT.

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

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

Date JAN 27 1916 191

REGIMENTAL DOCUMENTS

NAME Graham, John William. (Spr) REGT. NO. 726093. UNIT 109th Bn. H. Q. FILE NO.

8-5-19 P.L.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
	ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
	TRAINING HISTORY SHEET (M.F.W. 113)					
	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)				21791	
2	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
	DENTAL HISTORY SHEET (M.F.B. 465)					Category
1	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					Demobilization
	MEDICAL EXAMINATION (M.F.W. 129)					
1.	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
	LAST PAY CERTIFICATE (M.F.W. 44)					
1.	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					
1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
1.	Form C.D.3.					
1	Case 5099					
4	Cascard					(1)
1	Deposit					
1	M.F.W. 67					3-26
1	P.R.12					22-29
1	Pay Card					26 30

S

M

H

No. 726093. RANK Pte NAME Graham. J. W.

T. O. S. 12-1-16. UNIT 109th. Battalion.
D. O. S. 27-1-16.

M. D. 3

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916	1916.			
Jan. 12	Jan 31	✓		
Feb.		✓		
Mar.		✓		
April.		✓		
May.		✓		
June.		✓		
July.		✓		

UNIT SAILED
JUL 23 1916

Number 726093 Rank Spr

Surname GRAHAM

Christian Name John William

Units C.E. Theatre of War France

Date of Service 9-3-17

Remarks

Latest Address ~~Irondale Cent~~
G.P.O. 11 Alton Ave
Toronto
Ontario

Roll No. B Page 14792

200m.-2-21.

Next of kin.....

Address on leave.....

Address on discharge.....

Transportation issued Yes / No Date..... Character on discharge.....

Previous occupation..... Date and place of enlistment.....

Diagnosis..... Date of Medical Boards.....

Date	Remarks

DESP. AUG 26 1922 REGN. No. 34181.

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

NAME Graham, J. H.

REGT'L. No. 726093

H. Q. FILE No. 649

RANK AND CORPS Pte. 124th Pnrs. (1st Ken. Out. Reg)

FOLLOWS No.

FOLLOWS

CABLE

No.	Date

NATURE OF CASUALTY

L. L. 31493. M. & D. 8476.

M. F. W. 42—100M.—28-11-17.
H. Q. 1772-39-893.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
A156(2)	No. 58 Gagel Stat.	27-2-18	U.D.G.
a239(2)	#51 1/2 Gen. Staples	8-6-18	Duck to duty U.D.G.

Form R. 149.

Name GRAHAM. John William Rank Pte Reg. No. 726093.

Unit 124th Bn. Pnrs.

Next of Kin Canada.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
27-2-18	58 C.C.S.		V.D.G.	A/158		14425
5-3-18	51 G.H. Etaples		do	A/161		235-7.
8-6	Discharged to Duty		do	A/239		1887/10

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

CARD NO. 2

SURNAME. Graham,

CHRISTIAN NAMES John William

REGL. No. 726093 RANK Pte.

UNIT 109th Batt.

FORMER CORPS Nil.

S.O.S. 22-3-19
D 0105 FOLL. 15-4-19
demob 2 DD

NEXT OF KIN.

NAMES IN FULL Graham, Arthur

RELATIONSHIP TO SOLDIER Father.

ADDRESS Irondale, Ont.

CHANGE OF ADDRESS

COUNTRY OF BIRTH England, Penrith. DATE March 21st 1878

PLACE OF ATTESTATION Kinmount, Ont. DATE Jan. 24th 1916

O/S 23-7-16 +88/15.

R/6.30/3/19, 293/28, "D" 2

MARRIED SINGLE Yes. WIDOWER

TRADE OR CALLING Labourer. RELIGION C. of E.

DESCRIPTION.

APPARENT AGE 37 YEARS 10 MONTHS

HEIGHT 5 FEET 6 INCHES

CHEST MEASUREMENT 39 INCHES EXPANSION 4 INCHES

COMPLEXION Ruddy. EYES Blue. HAIR D. Chestnut.

DISTINGUISHING MARKS Scar of deep cut on left thumb involving nail. 2 small scars across right patella. Scar from appendicitis operation.

MEDICAL EXAMINATION. PLACE Kinmount, Ont. DATE Jan. 24th, 1916.

D M S. 1300 50M-21-11 17.

SURNAME	CHRISTIAN NAME OR NAMES	REG. NO.
GRAHAM	J.W.	726093.

RANK	UNIT	CO.	TROOP	BATTY.
Pte.	1Co. 124p.			

HOSPITAL — DATE OF ADMISSION

58 C.C.S. — 27-2-18.

1. 51 Gen Etaples — HOSP. 5.3.18

2. — HOSP.

3. — HOSP.

4. — HOSP.

DIAGNOSIS V.D.G. Hodden

1.

2.

3.

DISPOSITION — DATE — REMARKS

CL. 6-3-18. A156.-2

Dis. to Duty 8-6-18

12.3.18 A161.3

" 13-6-18 A239(2)

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

EPITOME OF HOSPITAL TREATMENT

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

To be made out in duplicate.

DUPLICATE

H.Q. 54-21-23-53

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

INSTRUCTIONS.

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

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

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

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

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

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

(2) Regimental Number 726093

(3) Full Name of Soldier John William Graham.

(4) Place of Birth Cumberland, England.

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

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

(b) Present Postal Address —

(7) Are you a widower? —

(8) Have you any children? —

If so, give number of boys and girls —

Also their names and ages —

M. F. W. 67.

300M.—5-16.
1772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive? yes.

If so, state name and address Arthur Graham, Irondale, Ont.

(10) Is your Mother alive? no.

If so, state name and address —

(11) If your Mother is a widow —

Are you her sole support, or not? —

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

—

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

—

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

—

15) Are you insured? yes

If so, in what Company? —

Have you made arrangements for payment of your Insurance premium yes

If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.

Date July 11/16

Lt. C

Officer Commanding.

O.C. 109th Overseas Battalion, C.E.

726093.

MEDICAL HISTORY SHEET.

ORIGINAL

Surname Graham Christian Name John William

Examined on 24th day of January 1916 at Kinbrunt

Birthplace City or Town Penrith County Cumberland England

Apparent age 27 years 10 months

Trade or occupation Farmer

Height 5 Feet 6 Inches.

Weight 162 Lbs.

Chest measurement Minimum 35 inches. Maximum expansion 39 inches.

Physical development Good

Small-Pox Marks None

Vaccination Marks Arm Right. None Left. Nil Number Nil.

When Vaccinated last Childhood January 31st 1916.

(a) Marks indicating congenital peculiarities or previous disease Scar from operation for appendicitis

(b) Slight defects but not sufficient to cause rejection Somewhat irregular heart beats probably due to excitement

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

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

Date	Result	Vaccinations.	
31.1.16	Nil.	J. McCulloch	M.O.
21.2.16	Nil	J. McCulloch	M.O.
			M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.	
26.4.16	Good	J. McCulloch	M.O.
4.5.16	Good	J. McCulloch	M.O.
12.5.16	..	J. McCulloch	M.O.
13.9.16	"	H.O. Boyd	

Enlisted on 24th day of January 1916 at Kinbrunt

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	109th Batt. C.E.F.	726093.		24th 1.1.16.
Transferred to	124th OVERSEAS BATTALION C.E.F. P.O.S			9 MAR 1917

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
Seaford	14-2-19	D.A.H. + Myalgia	Bit Jonecuhot Tay

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

M. F. B. 313.

150M.—8-15.
H. Q. 1772-39-439.

Surname Graham Christian Name John William

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital.			Dates of Discharge from Hospital.			DISEASE.	Number of days in Hospital.	Remarks on nature of the disease: how induced: if mild or severe: if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
		Day	Month	Year	Day	Month	Year				

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 726093 (Rank) Pte

Name (in full) John Wm Graham enlisted in

the 109. Bn

CANADIAN EXPEDITIONARY FORCE at Kitmount on the 24

day of Jan 1916

HE served in 124 Bn

and is now discharged from the service by reason of Demobilization.
~~Medical Unfitness~~.

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

Age 41

Height 5' 6"

Complexion Ruddy

Eyes Blue

Hair Dark Chestnut

Marks or Scars

John Graham
Signature of Soldier

Date of Discharge

No. 2 DISTRICT DEPOT
APR 2 1919
TORONTO

A Ocean Lt
Issuing Officer

For
O.C. No. 2 District Depot.
Rank

Date APR 2 1919 19

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

M.F.B. 39A.
1049-D.P.-300M-11-18.
H.Q. 1772-39-882.

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. _____ (Rank) _____

Name (in full) _____ enlisted in

the _____

CANADIAN EXPEDITIONARY FORCE at _____ on the

day of _____ 19 _____

HE served in _____

and is now discharged from the service by reason of _____ Demobilization. Medical Unfitness.

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

Age	Marks or Scars
Height	
Complexion	
Eyes	
Hair	

Signature of Soldier

Date of Discharge

No. 2 DISTRICT DEPOT
MILITIA
TORONTO

Issuing Officer

No. 2 District Depot

Rank

Date _____ 19

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

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

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

Casualty Form—Active Service.

Unit, Regiment or Corps 109th BATTALION CANADIAN INFANTRY.

Regimental No. 126093 Rank Private Name Graham, John William

Enlisted (a) ~~12.1.16~~ 24/1/16 Terms of Service (a) C.E.F. D. of W. Service reckons from (a) ~~12.1.16~~ 24/1/16.

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

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

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36. or other official documents.
Date	From whom received				
		Embarked Canada	Halifax	24.7.16	
		Disembarked England	Liverpool	31.7.16	
8-12-16	OC 109 Bn.	Transfered to 124 Bn	Witley	8-12-16	D.O Part II 643.
					W. Allsellers Capt. ADJUTANT 109th Overseas Battalion, C.E.F.
9-12-16	124th. Bn.	Taken on strength of 124th. Bn., C.E.F.	Witley Camp	8-12-16	Part II Orders 265 A. W. Eastmure Major Lieut. ADJUTANT, 124th BATTALION C.E.F.
9-3-17	124th. Bn.	Proceeded for Overseas Service.	Witley Camp	9-3-17	Part II Orders No. 49 C. Hunnigh Lieut., Asst. Adjt. 124th. GGBG (Pnrs)
11-3-17	M.L.O.	Disembarked	Boulogne	11-3-17	Nom. Roll

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

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

[P.T.O.

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
31/3/17	O.C. 124 Bn	On Command 6th Class of Inst. (4th Div. Sch. of Cookery)	Field	1/4/17	B.213 D.C.S. 4 d/8/4/17
28/4/17	do	Returned from Cookery	do	26/4/17	B.213 D.C.P. 13 d. 8/5/17
27/12/17.	do.	Granted 14 days leave to	Cannes.	16/12/17.	do 155 d/
5.1.18	do.	Rejoined Unit	Field	1.1.18	B.213
28.2.18	58 C.C.S.	S/S V. D.G. (Cannes) adm.	58 C.C.S.	27.2.18	A.36/D5135
27.2.18	1/3 N.M.F.A.	do. adm. To	1/3 N.M.F.A. / 58 C.C.S.	26.2.18 / 27.2.18	A.36/D.4951
3.3.18	58 C.C.S.	do. To	35 Amb. Train	3.3.18	A.36/D5346
5.3.18	51 Gen.	do adm.	51 Gen.	5.3.18	W.3034/D.6279
9.3.18	O.C. 124 Bn.	Sick to F.A.	Field	26.2.18	B.213
29.4.18	A.A.G. Can. Gen.	Transferred to Can. Inf. Rein. Pool.	do.	30.4.18	K.R. 498; W.O. tele: 76962 S.D.2 1/3.4.18; Can. Cps. A. 3935: D.O. 29 d/3.5.18
Do	Do	TOS C,E,R,Pool 1-5-18 from 124th C,Pioneer Bn			S/46 d/1918
27.1.18.	OC 124	awarded D.C.M. Bodyr	Fld	24.1.18	B213.
8.6.18	Chkd	To C. S. A.	Chkd	8.6.18	NR 856
8.6.18.	51 Gen.	V. D.G. to	duty.	8.6.18	W.3034/3588
18.6.18	6GBD	To 6 C R C		18.6.18	NR 1274
do	6 C R C	arrived	6 C R C	18.6.18	NR 920
27.6.18	51 Gen H	Forfeits 7 days leave under Stg. Pay W.S. Staff from 5.3.18 to 8.6.18 (95 days)			1643/S.O.G.7. P/68.
6/8/18	C E R C	S.O.S. C E R POOL TO 11TH BATN CE		6/8/18	P87 d 4/18
7-8-18	do.	TOS 11TH BATN CE	Field	7-8-18	D.O. 13 d. 27-8-18
14-8-18	O.C. 11th Bn C.E.	Joined Unit	do.	16-8-18	B213

Army Form B. 103. (2.) Regimental Number 436[illegible]3

Casualty Form—Active Service.

Regiment or Corps 11 Battn C.E.

Rank Spr Surname GRAHAM Christian Name J. W.

Religion ..... Age on Enlistment ..... years ..... months

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

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

Extended { ..... } Re-engaged { ..... } Qualification (b) .....

or Corps Trade and Rate .....

Occupation ..... Signature of Officer.

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...			
18-11-18	C.G.B.D.	T.O.S. class T.B.	C.G.B.D.	14-11-18	N.R. 1714.
23-11-18	11 Bn C.E.	Proceeded to	C.G.B.D.	15-11-18	B 213
21-11-18	C.G.B.D.	Myalgia Back & Hip CLASS.	B 2.	21-11-18	W3339-838
8/12/18	G.H.Q.	T.O.S. from Grange & to detailed Depot to Coy.	Seaford	7/12/18.	pt 11 W.D. 314
1 MAR 1919		S. O. S. to Kinmel Park, Rhyl, M.D. 2 Wing	1 MAR 1919		Pt. 11. D.O. 60

Lieut.
for Officer Commanding,
Regtl. Deppt.

(a) In the case of a man who has re-engaged for, or enlisted in Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered

(b) Signaller, Shoeing-Smith, &c

(17591.) Wt. W 1887—P 1124. 1,000,000. 6/18. D & S. Form B/103. (E. 1256.)

P.T.O.

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A.36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents
Date	From whom received				
		Attached C.C.C. Kinmel Park for return to Canada. Part 11 Orders No. _____. Ceases to be attached C.C.C. Kinmel Park on embarking for Canada, Part 11 Order No: 71		25 MAR 1919	
		Commanding 7 Wing, Kinmel Park Camp.			
		SAILING NO 42 S S REGINA FROM L'POOL 22, 3, 19			
		Detail as below			
		T. O. S. No. 2 DISTRICT DEPOT, TORONTO. PART II D.O. 105			
MAR 22 1919 O. S.		T. O. S. No. 2 DISTRICT DEPOT, TORONTO. PART II D.O. 105			
APR 2 1919 S. O. S.		(DISCHARGED FROM H. M. S.) No. 2 DIS. DEPOT, PART II D.O.			

Lieut.
For O. C. No. 2 District Depot

C.A.D.C. 5009A

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

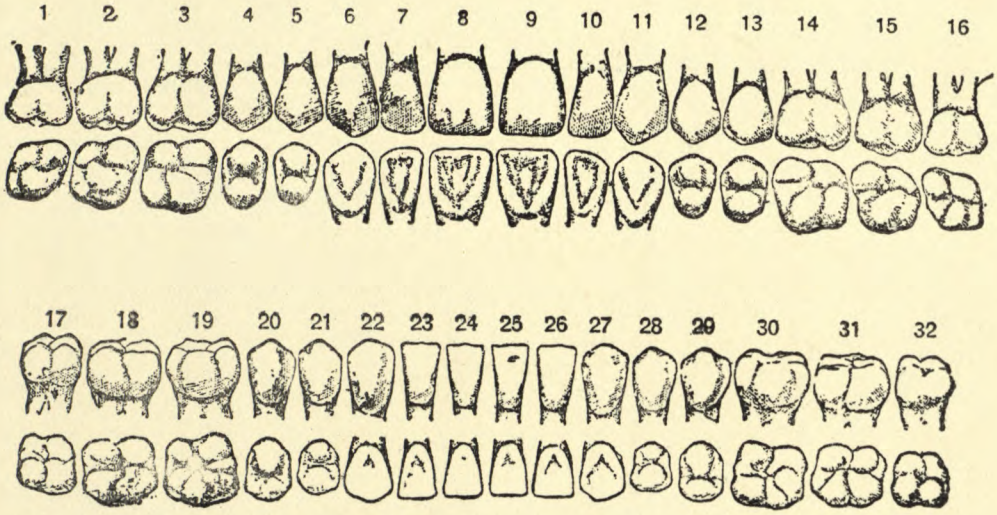
DIRECTIONS TO DENTAL OFFICERS

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.

NAME OF SOLDIER (Block Letters) GRAHAM J.W.

REGIMENT C.E.R.D. RANK SPR No. 726093

Date of Examination in England 19 FEB 1919 Date of Examination in France



PRESENT DENTAL REQUIREMENTS

1. FILLINGS 5
2. EXTRACTIONS
3. CROWNS
4. DENTURES
   - (*a*) Full Upper
   - (*b*) Part Upper
   - (*c*) Full Lower
   - (*d*) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT? NO

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

- (*a*) In Canada
- (*b*) In England
- (*c*) In France

Signature of Dental Officer B B Beaton Capt

P 820
12474—375M—13-2-18.

6

* Strike out whichever inapplicable.

* ASSIGNED PAY	* ENGLAND OR CANADA.	SEPARATION ALLOWANCE.	* ENGLAND OR CANADA.
EFFECTIVE DATE:–		EFFECTIVE DATE:–	
AMOUNT:–		AMOUNT:–	

NAME:– GRAHAM John Wm

NUMBER:– 726093

NAME, ADDRESS, RELATIONSHIP & AUTHORITY | WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Pte

UNIT AND TRANSFERS

ORIGINAL UNIT:– 109 Bn

DATE ACCOUNT FIRST OPENED:– 1-8-16

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			124 Bn
BO29 3/5/18	30/4/18	1/6/18	C&RD

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS | UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK

DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT
~~12-2-19~~	~~3323~~	~~Seaford~~	~~4 87~~				
~~20-2-19~~	~~3699~~	"	~~14 60~~				
			19 47				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1	10		

PARTICULARS OF RENDERING NON-EFFECTIVE:– To Canada 28-2-19 TR. K3540 CFRD 21-2-19 LFC. Bal. Cr 147 68 TTD 2.

MONTH 1918	PARTICULARS	CR 1	CR 2	PARTICULARS	DR. 1	DR 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
Mch 31	Bal Fwd								361 02	300	
Apr	P. P.	33							394 02	315	
		33									
May	P. P.	34 10							428 12	330	
		34 10		961. 24 6/18. 2DWCCRC.	3 54						
June		33									
		33			3 57				454 55	345	
July		34 10		1094. 5 7/18 2DW.	4 46						
				Rtn. 41. 5 7/18 CCRP. Placed under stoppages while in Hosp from 5 7/18 – 8/8/18 – 96 days @ 60		57 60					
				1259. 16 7/18 CCRC.	3 57						
				4385. 16 6/18	4 46				421 56	360	
		34 10			12 49	57 60					
Aug	Spec Pay.	34 10		AR 154 8. 2nd DWCCRC 4/8/18	3 54						
				AR 164 " 1st Bn CR 20.8.18	3 54				448 82	345	
		34 10			7 14						
Sept	Spec Pay	33		AR 287. 1st Bn CR 16.9.18	3 57				477 95	390	
		33			3 57						
Oct		34 10		AR 354 " 4 10/18	3 73						
				" 445 " 13 10/18	3 73				504 54	405	
		34 10			7 46						
Nov		33		" 530 " 9/11/18	3 73					105	$300.00 Ly. Pay V.A.L.
				" 4383 24/11/18 L.G.R.B.	13 99						
				Vic. Loan {Ly. Pay $300.00 Bal. plus 100.00}	400 00						
				AR. 665 8/12/18 R.G.D.	48 64						
Dec & Jan	Spec Pay	68 20		" 1254 R.D.G. 20/12/18	4 87						
				DN " 5360 " 8/12/18	4 66						
				" 5643 " "	4 66				125 21	135	
		101 20			480 58						

1918
War Loan
to 4th Q. 9
400.00

W.R. sent in adv. 300 from acc def Pay
100.00 from free balance

NUMBER 126093 RANK Pte NAME Graham J W

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
	Bal forward								125 21	135 -	
Feb	Pts Pay	30 80		A.R. 1888 R.D.G. 10-1-19	4 87						
	Int on Def Pay	25 74		2501 " " 24-1-19	9 73						
				3323 " " 12-2-19	4 87						
				3694 R.D.G. 20-2-19	14 60				137 95		
				6677 Kimmel Endorsed 12-3-19	9 73						
		56 54			43 80						
				S.O.S. 22-3-19 S.List 42.							

LCC

Married or Single: Single

Place of Birth: Penrith Eng.

Name and Address of Next of Kin: Arthur Graham, Irondale Ont Can

Relationship of Next of Kin: Father

Name and Address of Next of Kin:

Relationship of Next of Kin:

Separation Allowance Monthly $ — Effective (Date):

Payable to:

Relationship of Dependant:

Casualties, Promotions, &c.

Particulars	Effective Date	Authority

Admissions to Hospital, &c.

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

Reg'l. No. 726093 Rank: Pte Name: Graham John William

If in Perm. Corps What Unit: Unit: 109th Bn. Transferred to: 124th Bn. Date: 21.1.17 Authority: A0343 8.12.16.

Permanent Force Allowances — Transferred to — Date — Authority

Place of Attestation: Kenmount Ont — Transferred to — Date — Authority

Date of Attestation: Jany 24th 1916 — Transferred to — Date — Authority

Assigned Pay Monthly $ — Date Effective

Payable to — Relationship

Assigned Pay Monthly $ — Date Effective

Payable to — Relationship

Stop-Payment Form (Assigned Pay) Rendered (Date) — Effective — Reason

Discharge Date and Place — Reason and Authority

Account transferred to Non-Effective Branch (Date)

Account transferred to Officers' Pay Branch (Date)

E 9

Date	Pay No. of Days	Pay Rate	Pay Amount $	Pay Amount c.	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount $	Field Allowance Amount c.	Working or Special Pay No. of Days	Working or Special Pay Rate	Working or Special Pay Amount $	Working or Special Pay Amount c.	Assigned Pay Credits	Other Credits	Total Credits	Acquittance Rolls 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	Cash Payments 1	2	3	4	Assigned Pay	Other Charges	Total Debits	Balance Credit	Balance Debit	Pay Withheld or Deferred	Pay Available for Issue	Remarks
July 31														18 70	18 70									Bal. from Canada							18 70				
Aug 31	31	1.00	31		31	.10	3 10								34 10	29	48 16							9 73			93			10 66	42 14				Warrant 50/885137 Watulowska Bordon
Sept. 30			30				3								33	60	31/8 16	92	30/9/16					7 30	7 30					14 60	60 54				
Oct 31			31				3 10								34 10	131	30/9/16	164	15 10/16					9 73	7 30					17 03	77 61				
Nov. 30			30				3								119 90 33	192	30/10/16							26 76 9 73	14 60		93			42 29 9 73	110 88	60			
Dec 31 1917			31				3 10								34 10	307 260	30.11.16 1.11.16							4 87 7 30 48 66						12 17 62 17	122 81				A0343 8.12.16 124th Bn. 21.1.17
Jan	20	1.10	19 22	30											22 209 00																144 81				
Fany	11	1.10	12	10											17 10	438	15/4	31/1	47					4 86	19 47					24 33	132 58				
Feb	28	1.00 .10	30	80											30 80	538	15/2	5/6	26/2					4 87	9 73					14 60	148 78				
Mch	31		34	10											34 10			646	20/3	134 14 Bn. 39 10	22/12				2 62	43 80			32	46 74	136 14 169 14	120			C4005 510° 16/2
Apr	30		33												33									~~2 66~~							169 14				
May	31		34	10											34 10	129	20/4			111 Bn. Ch. Bd. 9/4				2 68		3 49				6 17	197 07	150 50			
June	30		33												33	187	18/5			219 9/6 + Bn. Eng 6°				2 67		2 62				5 29	224 78	165			
			367	40										18 70	386 10									63 74	46 42	49 91	93		32	161 32					

726093 Pte Graham John William

Date 1917	Pay No. of Days	Pay Rate	Pay Amount $	Pay Amount c.	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount $	Field Allowance Amount c.	Working or Special Pay No. of Days	Working or Special Pay Rate	Working or Special Pay Amount $	Working or Special Pay Amount c.	Assigned Pay Credits	Other Credits	Total Credits	Acquittance Rolls 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	Cash Payments 1	2	3	4	Assigned Pay	Other Charges	Total Debits	Balance Credit	Balance Debit	Pay Withheld or Deferred	Pay Available for Issue	Remarks
Forwd																															224	78			
July	31	1.00/10	34	10											34	10	275	18/6	382	5/7					2	68				2	68	256	20			
Aug	31		34	10											34	10								2	67					2	67	289	63			
Sept	30		33												33		516	4/8	667	5/9				2	68	2	68			13	38	307	25	210		
																	447	18/7	889	19/8				5	35	2	67									

Month	Particulars	Cr. 1	Cr. 2	Particulars	Dr. 1	Dr. 2	Dr. 3	Dr. 4	Balance	Deferred Pay	Sep. Allow. Eng.
		~~307 25~~							307 25	210	
Oct	P/Pay	34 10							341 35	225	
		~~34 10~~							67 10		
				A/R. 784 5/10	3 57				408 45		
Nov	"	33		727 19/9	2 68						
Dec	"	34 10		82 18/10	4 46				14 28		
				915 5/11	3 57				394 17		
		67 10			14 28						
Jan		34 10		A/R 973 18/11	13 38						
				1035 5/12	3 57						
				1100 15/12	4 46						
				1108 18/12	8 93				317 64		
		34 10			11 06 3				4 06 14	270	
									313 14		
Feb		30 80		1169 5/1	5 3 57						
				1230 18/1	4 46						
				1289 5/2	8 03 3 57						
				D/N A/R 5680 31/12 6 DP	4 46				332 38	285	
		30 80			16 06						
Mch		34 10		1347 15/3	4 46						
				~~1387~~ 1/4	1 00				361 02	300	
		34 10			5 46						

"REGINA" 29-3-19

DISPERSAL "I" G1619

AUDITOR	PAYMASTER

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

M. & R. S. REGT. No. 726093 RANK Pte. NAME (IN FULL) GRAHAM J.W. (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? Nil DATE EFFECTIVE

TO WHOM PAID RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F. 6 E. IF IN P.F. WHAT UNIT? Dom. Bank of Canada

PLACE OF ATTESTATION Lindsay Ont. TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION 24. 1. 16. TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY $ Nil DATE EFFECTIVE

PAYABLE TO RELATIONSHIP ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE EFFECTIVE

DISCHARGED PLACE Toronto. DATE 2-4-19 REASON Demob. AUTHORITY D.O. 105 IF ENTITLED TO POST DISCHARGE PAY

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.	OTHER CREDITS $	OTHER CREDITS C.			TOTAL CREDITS $	TOTAL CREDITS C.	ACQUITTANCE ROLLS COL. No. 1 No.	DATE	COL. No. 2 No.	DATE	COL. No. 3 No.	DATE	CASH PAYMENTS COL. No. 1 $	C.	COL. No. 2 $	C.	COL. No. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.			TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	BALANCE CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT							147	68	147	68																									147	68	Balance b/f
28/2/19																					9	73															Exchange
1.3.19 to 31.3.19	31	1/10	34	10																																	
1.4.19 to 6.4.19	6	1/10	6	60																																	B/d 1-4-19 to 6-4-19
					35.00																																Clothing
					7.00																																for pay W.S.G.
									145	70 ck.							487	5.00																			Train & Boat.
									5.20								275	78																			
									~~132~~	~~80~~																					295	38	2.00				
																							2/4/19	70.00													70.00 W.S.G. Pro rata above
																											4	40					Due				4.40 Dep & Provision
																											2	00					Soldier				Bal from above
	W.O.4.						4	66																													Exchange
183 days	42	00							420	00																					76.40		343	60			
																	May 12	G352408					63	60							140	00	280	00			1st W.S.G. Paid by #2 D.O.D.
																	May 29	675821					70	-							210	-	210	-			
																	AP 76 June 30	690601					70	-							280	-	140	-			
																	AP 95 Jul 21	998820					70	-							350	-	70	-			
																	AP 175 Aug 27	1378896					70	-							420	-	—				
									420	-													413	60			6	40			420	-	nil				

Final

W.S.G. PAID IN FULL

CAPTAIN FOR PAYMASTER WAR SERVICE GRATUITY

100M-1-19.—L. L. 53962-M. & D. 9723.
M. F. W. 2596.
1772-39-1390.

THIS FORM WILL BE USED FOR ALL RANKS

MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

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

STATION Seaford. DATE 13/2/19.

1. 1 (a) Unit C.E.R.D. (b) Regimental No. 726093 (c) Rank PTE.

(d) Surname GRAHAM. (e) Christian name JOHN Wm

(f) Home address Irondale. Ont Can.

(g) Next of Kin Mr. A. Graham. (h) Relationship Father.

(i) Address of Next of Kin Irondale Ont Can.

2. Age last birthday 40 yrs. Date of birth 21st March. 1878.

3. Enlistment, or Appointment (if an Officer) (a) Place Kinmount Ont (b) Date 12/1/16.

4. Personal description:

(a) Height 5' 6 1/2" (b) Weight 160 est. (stripped) (c) Complexion dark

(d) Colour of hair black (e) Colour of eyes blue (f) Identification marks, Scars, etc. abdominal scar.

5. Former trade or occupation Farmer

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).	Years	Days
	2	320

	Periods	
	From	To
Canada	24/1/16	24/7/16
England	24/7/16	11/3/17
France or other theatres of War	11/3/17	7/12/18.

7. Original disease, or injury (1) D.A.H. (2) myalgia.

(a) Date of origin (1) Aug 1915 (2) Jan 1917 (b) Place of origin (1) France (2) ~~France~~ England

(c) Cause (1) (2) Active service

M. F. B. 227.

300M.—8-18.
1772-39-117.

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

Weakness due to (1) shortness of breath and (2) pain in back.

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.)

(1) Man well nourished and apparently in good health.

Arteries somewhat hardened. Pulse 120 after slight exertion 132 and respirations 24. In one minute pulse 120. Pulse a little irregular at times. Precordial dullness 3¾" to left. First sound reduplicated at mitral area.

(2) no tenderness of muscles of back or other physical signs.

(*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 (If pulse rate is abnormal, B. P. will be taken.) — Genito-Urinary System: (Albumen and Sugar will be excluded.) no

Special Senses: no — Respiratory System: no — Integumentary System: no

Disturbances of Mentality: no — Digestive System: no — Muscular System: no

Osseous and Joint Systems: no — Any other general condition: no

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

About 6 mos ago began to have slight shortness of breath and occasionally palpitation on exertion. Had to drop out of route march once at that time because of shortness of breath and pain in back. At present gets a little short of breath on walking up grade and at times is conscious of heart beating which however causes no distress.

Man states that he had severe pain in back in Jan 1917 lasting about 2 wks. Since then he has never been entirely rid of it. Aggravated by weather, exposure and any work requiring him to stoop.

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*).)

nil

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

nil

11.—(*a*) Did the disabling condition have its origin before enlistment? I.E. no

(*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.)

n/a

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

The regimental documents will be referred to.

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

13. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? (1) (2) 3 mos

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

no entries in M.H.S.

Casualty form 21/11/15 myalgia back and hip

class B2

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

(If the answer is "yes" state nature of treatment required and probable duration)

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

(If not, briefly state why)

17. Recommendations nil

D Smachmay Capt

Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

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

I, the undersigned Pte J W Graham 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 nothing

J W Graham 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. (1) D.A.H. (2) MYALGIA.

(1) Present on enlistment as shown by M.H.S. — not aggravated.
(2) Complains of pains in lumbar muscles, but there is no rigidity or limitation of movement, nor aggravation by movement. Condition is slight, but apparently due to service.
10(b). Had Appendicitis some years before enlistment — irregular scar present. No treatment required.

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.~~) Yes Bii
(c) Home service (Canada only),	(" C)	(~~Yes or No.~~)
(d) Temporarily unfit.	(" D)	(~~Yes or No.~~)
(e) Unfit for service in Categories A, B and C	(" E)	(~~Yes or No.~~)

20. It is certified that the invalid

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

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

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

Auth: A.G. Tel: 9083 — 11-11-18

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.

J. Churchill, Capt. President.

PLACE Seaford

DATE 14-2-19.

J. Churchill Capt } Members

TO BE COMPLETED WHEN TREATMENT IS REFUSED

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

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

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

..... President.

PLACE .....

DATE ..... } Members

APPROVED BY

J. U. Wallace Capt.
for Assistant Director of Medical Services.

DATE .....

APPROVED BY

Director-General of Medical Services.

DATE .....

WAR SERVICE BADGE CLASS A

SERVICE GROUP 75

OCCUPATIONAL GROUP /

M.D.2

10-5-39

TORONTO

FATHER

FARMER

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.) B11

1. No. 726093

2 Rank. Spr

3. Name. GRAHAM John William

4. Unit. C.E.R.D. 109TH BN

5 Date of Discharge APR 2 1919 Place Toronto Ont

6 Reason for Discharge

DEMOBILIZATION

SAILING NO. 42
S S REGINA FROM
L'POOL 22. 3.

7. Authority. No. 2, D.D., ~~Part II, D.O.No.~~ 105

8. Proposed Residence after Discharge

Irondale
Ont

9. CERTIFICATE TO BE SIGNED BY SOLDIER.

I hereby acknowledge that at the undernoted place and date I received my discharge Certificate

M. F. W.?

Signature of Soldier.

Deceased 9-4-40. 64 Pte. 24901

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place Toronto Ont

Date APR 2 1919

For
O.C. No. 2 District Depot.

Signature

(O. C. Discharging Unit.)

M.F.B. 218a—300M.-11-18—1772-39-113.

LIST OF DISCHARGE DOCUMENTS.

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

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TLH. Rank Name GRAHAM, John William. Reg'l No. 726093.

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

Place and Date of Enlistment Kinmount, Jan. 24th. 1916. Place of Birth Penrith, England.

Name and Address, Next-of-Kin Arthur Graham, Irondale. Ont. Canada

Relationship Father.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

H. W. & V., Ld.—7165-16.

Report. Date.	Report. From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS. Taken from Official Documents.
		Arrived in England per H.M.T. 2810 31-7-16			
8.12.16	109th Bn	SOS on trfr. to 124th Bn	Witley	8.12.16	Pt II DO 343
9.12.16	124th	TOS. to 109th			265
9-3-17	124Bn	Emb for France	Witley	9*3*17	PtII DO68
		Now know asl 4.n Bn Can-ENG		10-3 18	
3.5.18	"	S.O.S. to R.E.R. Pool	Field	30.4.18.	Pt. II. 29. E&M. Pt. II. 46 a/4 5/18.
14.5.18	E.E.R.P.	Awded G.C. Badge	"	24.1.18.	Pt. II 50.
24.8.18	"	SOS. to 11th Bn C.E.	Spr "	6-8-18	DO87. 11th Bn 00132278/18
9-12-18	C.E.R.D.	T.O.S. from 11th Bn C.E.	" Seaford	7-12-18	DO319
3.3.19	"	S. C. & Stu D2 Cw	"	1-3-19	DO62 + TM D2 Cw. 52/3/19
		42-S—		22.3.19	

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
Date.	From whom received.				
25.3.19	W.C.D. 2 & W	S.C.S. to Canada Sail 42	Shipl.	22.3.19	D071.