Original

ORIGINAL.

1084046

ATTESTATION PAPER.

25th O.S. Bn C.E.F.

No.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? — Gregg.
1a. What are your Christian names? — John William.
1b. What is your present address? — Little Bursai. Ont.
2. In what Town, Township or Parish, and in what Country were you born? — London England.
3. What is the name of your next-of kin? — Father Sarah Gregg.
4. What is the address of your next-of-kin? — 12. Basuto Rd. Parsons Green.
4a. What is the relationship of your next-of-kin? — Mother. Fulham. London. Eng.
5. What is the date of your birth? — 27. Nov. 1898
6. What is your Trade or Calling? — Painter.
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 Gregg; 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.

John William Gregg (Signature of Recruit)

Date Nov 27. 1916 191 . J. K. Roberts (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, John William Gregg, 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.

John William Gregg (Signature of Recruit)

Date Nov 27. 1916 191 . J. K. Roberts (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 27. day of Nov 1916.

Keith R Kingsley (Signature of Justice)

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

Description of Griggs John William on Enlistment.

Apparent Age 29 years = 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 35 ins.; Range of expansion ins.

Complexion Fair

Eyes Blue

Hair Light Brown

Religious denominations:
- Church of England
- Presbyterian
- Methodist X
- 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).

1 Vac & Chm

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 Nov 27 1916 191 . J C Wright

Place Lindsay Ont.

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 Griggs 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.

J Gleason Lt Col (Signature of Officer)

Date Nov 27 1916 191 .

C.E.

GRIGGS JOHN WM. 1087046 252 BN 29261

MED. UNFIT.

Deceased 12-17-54

H

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

M. F. W. 54. (A. F. 103.)
350M.—5-16
H. Q. 1772-39-920.

Casualty Form—Active Service.

✓ Unit, Regiment or Corps 25th Bn C.E.F.

Regimental No. 108 7046 Rank Private Name Griggs John William

Enlisted (a) 27/11/16 Terms of Service (a) C.E.F. W. of War Service reckons from (a) 27/11/16

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) Painter.

Report: Date	Report: 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
	O.C.				
12/3/17.	25th Bn	Appd. A/Cpl.	Lindsay.	12/3/17.	Part 2. W.O. 60.
		Embarked at Halifax N.S.		May 29. 1917.	
		Disembarked at Liverpool, Eng.		10/6/17.	
		Transferred to 6th Res. Bn	Seaford.	10/6/17.	Part 2 Order 136.
					Chas Thomson Major
12-6-17	O.C. 6TH CAN. RES. BN.	TAKEN ON STRENGTH 6TH CAN. RES. BN.	Seaford	10-6-17.	PART II No. 136.
16/6/17.	O.C. 6th Res.	Reverted to Private grade of Pte as Surplus to Establishment	Seaford	10/6/17.	Pt II 139
14-11-17.	O.C. 6TH CAN. RES. BN.	DRAFTED ~~TRANSFERRED~~ TO 21st Bn	Seaford.	14-11-17.	PART II No. 269

Chas Thomson Major

OFFICER I/c RECORDS 6th CAN. RES. BN.

CERTIFIED CORRECT. 22 NOV 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.

1087046 Griggs, J. W.

Report: Date	Report: 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
	2CD.B.D.	Arrived & Taken on Strength 21st Canadian Battalion.	2CD.B.D.	14-11-17	Part II Ord. 99 d/17-11-17
	2 C.I.B.D.	Left for C.C. Rein. C.	Field	17-11-17	N.R.
	C. C. Rein. C.	Arrived.	Can. Corps Rein. Camp.	17-11-17	N.R.
	Do	Left for Unit	Field	24-11-17	N.R.
1/12 - 21st BATTALION		Joined	21st BATTALION	24-11-17	B-213.
8/12	Do.	Attd. 182 Co. R.E.	Field	1-12-17	B-213.
29/12	Do.	Rejoined from 182 Co.	Do	21-12-17	B-213.
	58 CCS.	P.U.O. Adm	58 CCS	15-1-18	a. 6274.
12/1	5 C.F.A.	Admitted	5 C.F.A.	12-1-18	a. 6223.
19/1	58 CCS.	Trans. to	23 A.T.	18-1-18	a. 6464.
	83 General	Admitted	83 General	19-1-18	W. 627
15/1	5 C.F.A.	Trans. to	58 C.C.S.	15-1-18	A. 6525
	83 General	Invalided & posted to Eastern Out. Reg'tt. Depot per H.S. "Jan Breydel"	Seaford	8-2-18	W. 3083. Part II Ord. 13 d/19-2-18
		W Logan		Major Canadian Section, G. H. Q. 3rd Echelon B.E.F.	for Lt.-Col., A.A.G.
17.2.18	E.O.R.D. N.R.D.	Posted from 21st Bn.	Seaford.	8.2.18	P.D/048
					G. Robinson Lieut. for Lt. Col. i/c Records. O.M.F.C.
20-9-18	T.O.S.	No. 2 District Depot, Part II, D.O. No. 173			Lieut. and Asst. Adj.

COPY.

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

M. F. W. 54. (A. F. B. 103:
500M.—9-16
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps 252nd O.S. Bn. C.E.F.

Regimental No. 1087046 Rank Pte. Name GRIGGS. John Wm.

Enlisted (a) 27/11/16 Terms of Service (a) C. E. F. D. of war. Service reckons from (a) 27/11/16

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) Painter.

Report: Date	Report: 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
12/3/17	O.C. 252	Bn. App. A/Corpl.	Lindsay.	10/3/17	Pt. 2 D.O. 60
		Embkd. at Halifax		29/5/17	
		Disembkd.	Liverpool.	9/6/17	
		Trans. to 6th Res. Bn.	Seaford.	10/6/17	" 2 136.
12/6/17	O.C. 6th	T. O. S. 6th Res. Bn.	"	"	" " "
16/6/17	"	Reverts to Perm. grade as surplus to est.	"	"	" " 139.
14/11/17	"	Drafted to 21st Bn.	"	14/11/17	" " 269
	2 C.I.B.D.	Arrv. & T.O.S. 21st Bn.	2 C.I.B.D.	"	". " 99 17/11/17
	"	Left for C.C. Rein. C.	Field.	17/11/17	N. R.
	C.C.Rein.	Arrv. Corps Rein Camp		"	"
	"	Left for unit	"	24/11/17	"
1/12/17	21st Bn.	Joined 21st Bn.		"	B. 213.
8/12/17	"	Attached 182 Co. R. E.	"	1/12/17	"
29/12/17	"	Rejnd. from 182 Co.	"	21/12/17	"
	58th C.C.S.	P. U.O. Adm.	58th C.C.S.	15/1/18	A. 6274.
12/1/18	5th C.F.A.	Adm.	5th C.F.A.	12/1/18	A.6223.
19/1/18	58th C.C.S	Trans. to	23 A. T.	18/1/18	A. 6464.
	83 Gen.	Adm.	83 Gen.	19/1/18	W. 627.
15/1/18	5th C.F.A.	Trans. to 58th C.C.S.		15/1/18	A. 652 5.
	83 Gen.	Inv. and posted to E.O.R.	D. Seaford	8/2/18	W.3083 Pt. 2 O.13 19/2/18
17/2/18	E.O.R.D.	Posted from 21st Bn.	Seaford	"	Pt. 2 D.O. 48
29/9/18	T. O. S.	No. 2 D. D. Pt. 2 D. O.	#173		

(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				
		Dis.#2.D.D. Feb.8th.1919. Pt.11#37.			
		H. F. Harvey Lt. O. C. Discharge Sections, No. 2 District Depot			

No. 108 70 46 RANK Pte NAME Griggs. J Williams

T. O. S. 27-11-16 UNIT 252nd Battalion,
DUH4 of 27-11-16,

M. D. 8,

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916,	1916,			
Nov 27	Nov 30	L		
Dec		L		
1917,	1917,			
Jan 1	Jan 31	L		
Feb		L		
Mar		L		
apl		"	From Cpl 10-3-17.	DUG0 of 12-3-17.
may		"		

Form R.122.
2353—100M—9-1-16

C.R. Rank Name GRIGGS. John William. Reg'l No. 1087046.

Unit 252nd Bn. to East. Ont. Regt. If in perm. Corps, What Unit? Married or Single Single.

Place and Date of Enlistment Lindsay. Nov. 27th, 1916. Place of Birth London, England.

Name and Address, Next-of-Kin Mrs Sarah Griggs. 12 Basuto Rd., Parsons Green, Fulham, London, England. Relationship Mother.

Assigned Pay Monthly $ Payable to Relationship

Separation Allowance $ Payable to Relationship

Discharge, Date and Place Reason Character

H. W. & V., Ld.—9546-16.

N/E. R.B. No. 7853.
File R.L.
Category Can. Mil.

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.
	C.	ARRIVED IN ENGLAND 9 6 17 S/S OLYMPIC.			
12.6.17	O.Mrs. Bn.	Taken on Strength	Seaford	10.6.17	Pt. II S.O. 136 checked gs
14 11 17	"	Posted to 21st Bn. O/Seas.	Pte. "	14 11 17	21st Bn. B.O. 99 of 17 11 17. 269
14 2 18.	C.O.R.D.	Posted from 21st Bn. O/Seas.	" "	Dl. 8 2 18.	48. 21st Bn. B.O. 13 of 19 2 18.
1.10.18	EOR	Invalided to Canada	" Buxton	20.9.18	CMB 331.
10 10 18	EOR	Invalid & Can W.O.S.& CEF in Can for further Medical treatment	Pte Seaford	20 9 18	Pt II 0 254

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.				

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 1087046. (Rank) Pte.

Name (in full) GRIGGS John William. enlisted in

the 252nd. Bn.

CANADIAN EXPEDITIONARY FORCE at Lindsay, Ont. on the 27th.

day of Nov. 19 16.

HE served in England and France.

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

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

Age 30

Height 5' 1"

Complexion Fairight

Eyes Blue

Hair Brown

Marks or Scars Vacc. scars on left Arm.

Pte Griggs J.W.
Signature of Soldier

S.R. Robson Lieut
Issuing Officer

Rank

O. C. Discharge Sections,
No. 2 District Depot
Appointment

Date of Discharge Feb.8th.1919.

Signed at Toronto, Ont. this 8th day of Feb. 19 19

in Military District No. #2.

File Reference No. R.L.

No. 2
FEB 8 1919
DISTRICT DEPOT

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

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

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

No. ..... (Rank) ..... Name .....

Unit .....

Address on Discharge .....

Character and Conduct .....

.....

Former Occupation .....

Special Qualifications of Value in Civil Life .....

.....

Medals and Decorations .....

.....

Remarks .....

.....

Signed at ..... this ..... day of 19

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

.....
Name of Officer

.....
Rank

O. C. Discharge Sections
No. 2 District Depot

.....
Appointment

NAME Griggs J W

REGT'L. No. 1087046

H. Q. FILE No 649

RANK AND CORPS Pte. 21st Bn.

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 E. Ont Reg
A-115	#5 Can. Fld. Amb.	12-1-18	P. U. O.
A 117 "A"	No 58. Cas Clg. Stat.	15-1-18.	P. U. O.
A 122-2	No 83 Gen Boulogne	19-1-18	P. U. O. Slt
B137	1st West. Gen. Fazakerley Liverpool	8-2-18	P. U. O.
B188-1st	" " " Manor C. of L War Epsom Surry	13-4-18.	P. U. O.
B184-	To Mil Con't Woodcote Park Epsom Surrey	9-4-18	P. U. O.
B218-1	To Mil Con't Woodcote Park Epsom Surrey	19-5-18	Neurasthenia
B252-1	Granville Can Special Burton, Derbyshire	28-6-18	Neurasthenia
B277.	West Cliff Can Eye & Ear Folkestone	27-7-18	Neurasthenia
B. 289-2	To Gran Can. Spec	7-8-18	" "
B331-	Invalided to Can. Burton Derby	20-9-18	" "

Form R. 149.

Name Griggs. John William. Rank Pte. Reg. No. 1087046

Unit 21st Bn.

Next of Kin MRS. SARAH GRIGGS. 12. BASUTO Rd. PARSONS GREEN. FULHAM. LONDON ENG.

Date 1918	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
12-1	5 C.F.A.		P.U.O.	A-115		11885.
15-1	58. C.C.S.		Do	A/117		12019.
19-1	83. G.H. Boulogne	(Mild)	Do	A/23		18753,
8-2-18	1st W.G.H. Liverpool.		Do	B/87		12384
9-4	M(Con) H. Epsom		Do	B/188		15982
13-4	Manor (C of L) W. Epsom.		Do	B/88		16284.
13-5	M(Con) H. Epsom.	Neurasthenia.		B/[illegible]		18315
28-6	Convl Camp Camp H Buxton	do		B/[illegible]		20487
24-7	W. Cliff. E.E.H. F'stone		Do	B/[illegible]		23107
7-8	G.C.S. Hosp Buxton.		Do	B/[illegible]		23542
20-9	Invalid to Canada.		Do	B/[illegible]		2531

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

LEDGER NO. 114 SERIAL NO.

REG. NUMBER 1087046 NAME Griggs J. W.

RANK Pte CORPS 21 Can

AGE 30 SERVICE C 7/12 C 5/12 F 3/12

NAME OF HOSPITAL Central Military PLACE Toronto

DATE OF ADMISSION 25-10-18

DISEASE Neurasthenia.

TRANSFERRED TO OTHER HOSPITALS

OPERATION

DISCHARGED TO 30-1-19 IN CATEGORY

M. F. W. 2553.
50m.—6-18.
1772-39-1332.

P. T. O.

REMARKS:

FORM D.M.S. 1300

SURNAME	CHRISTIAN NAME OR NAMES	REG. NO.
GRIGGS.	J.W.	1087046.

RANK	UNIT	CO.	TROOP	BATTY.
Pte.		E.O. 21.		

HOSPITAL	DATE OF ADMISSION
5. C.F. Amb.	12-1-18.
58 Bas Clg Stat.	15.1.18.
1. 83 ~~Gen Boulogne~~	HOSP. 19-1-18
2. 1st E. Gen. Liverpool	HOSP. 8-2-18
Woodcote Park Epsom	9-4-18
3. Manor (Co. of London) Epsom	HOSP. 13.4.18
Woodcote Pk. Epsom.	19.5.18.
4. Granville Buxton.	HOSP. 28.6.18

DIAGNOSIS

1 P.U.O. Ser.

Neurasthenia a.s.

2.

3

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

DISPOSITION	DATE
C.L. 17-1-18. A115.	
19.1.18.	A 114
25-1-18	A/122-2
13-2-18	B/137.
11-4-18	B 184
18.4.18	B 188-1
21.5.18	B 218.
2.7.18	B 252 ①
31-7-18	B 277
14-8-18	B 280 2
1.10.18	B 331 ⑤

REMARKS

Inv. to Canada - 20.9.18.

EPITOME OF HOSPITAL TREATMENT

	Hospital	Adm.
1.	Westcliff E. & E.	27-7-18
	Granville Buxton	7-8-18
2.		
3.		
4.		
5.		
6.		
7.		

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

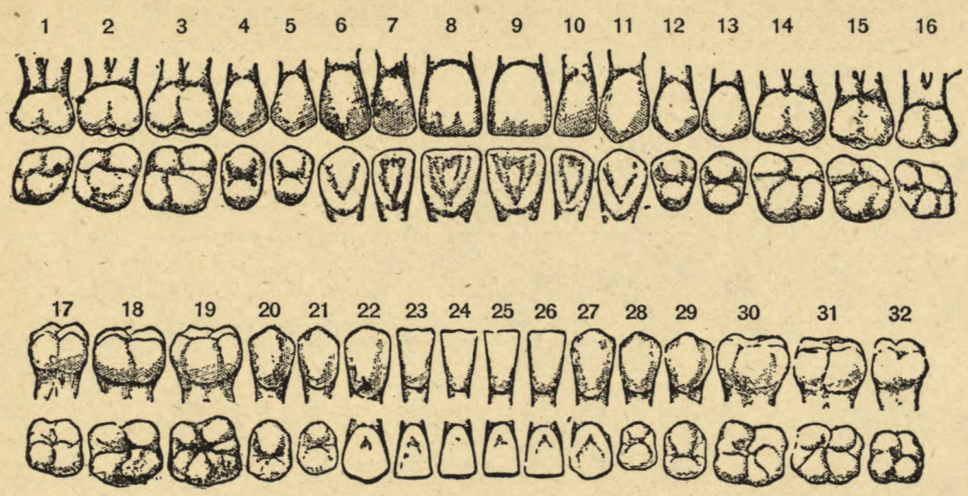
DISTRICT 2

NAME OF SOLDIER Greig J W

REGIMENT

RANK Pte

No. 108 [illegible]



INSTRUCTIONS

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

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

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

	Date	Amalgam	Temporary Filling (a) G.P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhea	Synthetic Porcelain	Extracting	DENTURES U	DENTURES L	DENTURES P	Gold Clasp	Gold Filling	CROWNS Gold	CROWNS Porcelain	Bridge Work	OPERATOR	Military District	REMARKS
Condition on first Examination																						
28-1-19		No dental history sheet																				
Discharge examination																						
at CMCH																						
	28-1-19							Filling & prophylaxis												R E Hassard Capt		Certificate issued

M.D. 465
200M—6-18
1772-39-950.

A.T. Serum Dose and date } 1st

2nd

FIELD AMBULANCE NOTES.

Morphia Dose and time }

Date of wound or onset of illness }

Religion Prot. 29 13/12 1/12.

Army Form W. 3118.

FIELD MEDICAL CARD.

No. 1087046 Rank Pte.

Name GRIGGS. J.W

Unit 21st Bde. Inf Bde.

~~Battle Casualty~~ ~~Accidentally Wounded.~~ "Sick"

(Strike out description which does not apply)

No. of F.A. 5 CDM

Date of admission 12-1-18.

F.A. diagnosis P.U.O.

W E Sinclair

Capt. C.A.M.C.

Additional F.A. Notes to be written on back of card.

C.C.S. diagnosis (if altered from above)

Base Hospital diagnosis (alterations or additional)

(1012) Wt. W15045/H3401. 1750m. 5-3-17. J.R. & C.

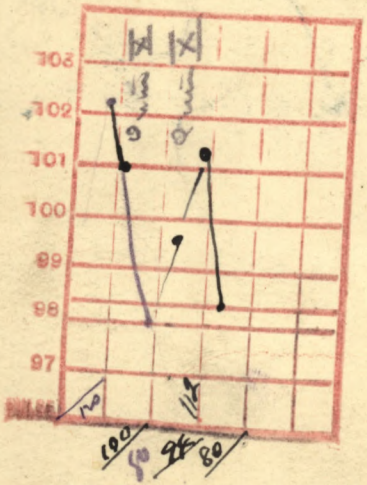
Date of entry and medical unit admitting must be recorded immediately on admission. Brief clinical notes to be added later and signed by M.O.

No. of C.C.S. 58

Date of entry 15 Jan 1918

99.6 Headache leg pain

18. Pains chest & legs



T. S. L.
W. B. Day
Capt RAMC

No. of Hospital 83 Gen. H.

Date of entry 19-1-18.

Pains in head and chest entire
not making good progress. T normal
probably Trench Fever —

L. A. Gunn. Major
R.A.M.C.

This F.M. Card must not be destroyed, and it must be transmitted with the patient if he is evacuated to U.K. Temperature charts or additional clinical notes may be sent with it, either in the same or in another envelope attached to the patient.

1112

Granville Canadian Special Hospital

PATHOLOGICAL LABORATORY

URINALYSIS:

Date 28th June 1918 Ward C. 140 Bed 630

Name Pte Greggs Regt. No. 108,404.6 Unit

Quantity in 24 hours Sp. Gr. 1026 Reaction Alkali

Consistence Clear Colour L.A. Sediment

CHEMICAL:

Albumin Approx 0 Sugar 0 Urea

Remarks

MICROSCOPICAL:

Casts

Pus

Blood

Other Elements

John M. Adams

Pathologist.

Form 16. 3,000. 12-2-18.

A.G. 10410-30M.
3479-23-8-17.

OVERSEAS MILITARY FORCES OF CANADA,

Date .....

To:- Hospital Representative,

..... Hospital.

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

For your information and necessary action please.

Officer Commanding.

Form DMS 1401.
8289 100M 9/3/17.

Granville Can. Spl. Hospital, HOSPITAL.

A. & D. CARD

AT

A. & D. No. T1992. PL. OF ACTION 1087046

RANK Pte UNIT 21st Cans SICK OR WOUNDED

NAME Griggs J.W. AGE 29 RELIGION Meth

PLACE IN HOSPITAL G 140/632

DIAGNOSIS Neurasthenia

ADMITTED 27 JUN 1918 FROM M & H Epsom

DISCHARGED 26 JUL 1918 TO

TRANSFERRED Westcliffe E. & E. R. Folkestone

SERVICE AT HOME 18/12 IN FIELD 3/12

RESULTS

30 days

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

(P.T.O.)

REMARKS.

Form DMS 1401.

WEST CLIFF CANADIAN EYE AND EAR HOSPITAL, FOLKESTONE.

HOSPITAL.

A. & D. CARD

AT O.

A. & D. No. 8334. PL. OF ACTION

RANK Pte. REG. No. 1087046. UNIT 21st Can Bn. 252nd Bn. SICK OR WOUNDED

NAME Griggs John Wm. AGE 29. RELIGION Meth

PLACE IN HOSPITAL ~~110~~ 128

DIAGNOSIS

ADMITTED 26/7/18. FROM Gran. Can Spec Hpl. Buxton.

DISCHARGED 6-8-18 TO Gran. Can. Sp. Hp. Buxton

TRANSFERRED

SERVICE AT HOME 20/12. IN FIELD 3/12.

RESULTS

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

P.T.O.

REMARKS.

Mother: Mrs. S. Griggs

12 Basuto Rd.
Parson's Green,
Fulham London.

Form DMS 1401.

Granville Can. Spl. Hospital,

HOSPITAL.

A. & D. CARD

AT Buxton

A. & D. No. T2409 PL. OF ACTION

RANK Pte REG. No. 1087046 UNIT 21 Cans SICK OR WOUNDED

NAME Gregg JW AGE 29 RELIGION Meth

PLACE IN HOSPITAL 9/40/633

DIAGNOSIS Neurasthenia

ADMITTED 6 AUG 1918 FROM Westcliffe E & E H Folkestone

DISCHARGED 20 SEP 1918 TO H M A C Newcastle

TRANSFERRED

SERVICE AT HOME 20/12 IN FIELD 3/12

RESULTS

46 days

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

P.T.O.

REMARKS.

*Name L. Griggs, John Wm. Rank Pte Regtl. No. 1087046

Original unit 21st Can Present unit M. or S. S Age 29 Religion Meth. Fyle Depot Ref. H.Q.

Po[illegible]ship, and date of arrival Halifax Neuralia 1-10-18

Next of kin MOTHER MRS. SARAH GRIGGS 12 BASUTO RD. PARSONS GREEN FULHAM LONDON. ENG.

Address on leave LITTLE BRITAIN ONT.

Address on discharge SAME LITTLE BRITAIN

Transportation issued Yes No Date 8-2-19. Character on discharge

Previous occupation Carriage Painter Date and place of enlistment Lindsay Nov. 27/16

Diagnosis Neurasthenia Date of Medical Boards 21-1-19.

Date.	Remarks.	Pt. 2 Order No.
TOS 20-9-18.	Posted to Hos. Sec. leave from 5-10-18 to 21-10-18.	173
	Subs. " " 2	173
9-10-18	Clearing Depot to C.M.C.H. 5-10-18. Leave to 21-10-18	175

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

(over)

Date.	Remarks.	Pt. 2 Order No.
		29
29.1.19	Hos. Section to C.C.P.S.	37
8-2-19	SOS DISCH. MED. UNFIT (91 days PDP & CLO ALL'CE)	

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

To be made out in duplicate. H.Q. 54-21-23-53

ORIGINAL.

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 252nd Battalion, C.E.F.

(2) Regimental Number 1087046

(3) Full Name of Soldier GRIGGS, John William

(4) Place of Birth London, England

(5) Are you married, or not? No

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

(b) Present Postal Address Little Britain, Ont.

(7) Are you a widower? No

(8) Have you any children? No

If so, give number of boys and girls --

Also their names and ages --

M. F. W. 67.

500M.—9-16.
1772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive? No

If so, state name and address --

(10) Is your Mother alive? Yes

If so, state name and address Mrs. Sarah Griggs,

12 Basuto Raod, Parsons Green, Futham, London, S?W, Eng.

(11) If your Mother is a widow Yes

Are you her sole support, or not? Yes

(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.

Fifteen Dollars.

1 brother married, not living at home

(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.

Yes

15) Are you insured? No

If so, in what Company? --

Have you made arrangements for payment of your Insurance premium --

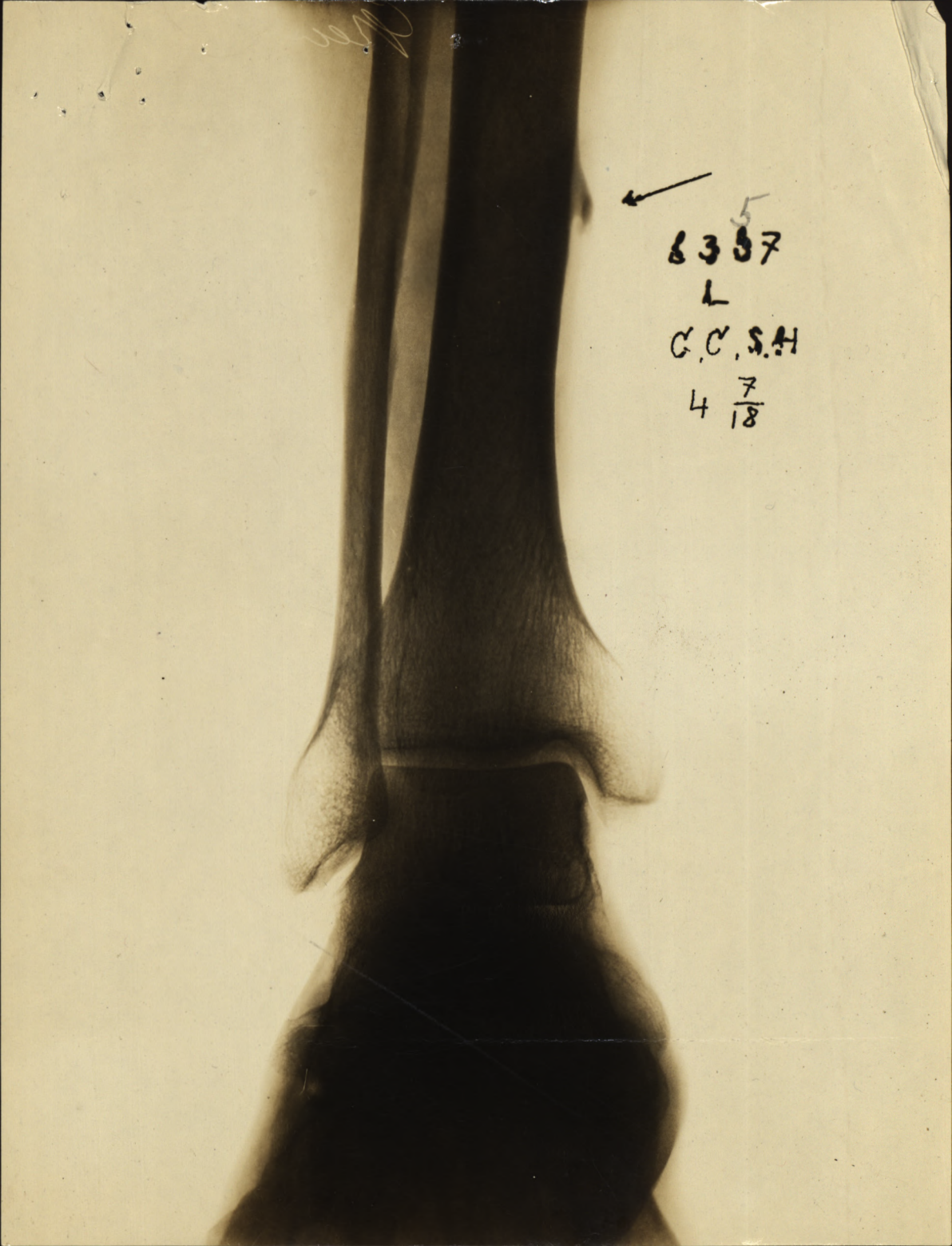
If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.

--

Major

Acting Officer Commanding.
252nd Battalion, C.E.F.

Date May 10th, 1917


5
8357
L
C.C.S.H
4 7/18

6357
Griggs
1087046.

GRANVILLE CANADIAN
SPECIAL HOSPITAL.

SURNAME. Griggs

CHRISTIAN NAMES John William

REGL. No. 1084046 RANK ~~Pte.~~ Cpl.

UNIT 25 2nd. Bn.

FORMER CORPS nil.

CARD NO.

S. O. S. dis. M.U. 8-2-19
10-D-379 FOLL. 6-2-19
#9.10.10 2

NEXT OF KIN.

NAMES IN FULL Griggs, Mrs. Sarah.

RELATIONSHIP TO SOLDIER Mother.

ADDRESS 12 Basuto Rd., Parsons Green, Fulham, London, Eng.

CHANGE OF ADDRESS

COUNTRY OF BIRTH England London DATE Nov 27th. 1888.

PLACE OF ATTESTATION Lindsay, Ont. DATE Nov 27th. 1916

R/C 1-10-18. 213/10 2

L. L. 6945. M. & D. 6904.

M. F. W. 22. 100M.—8 15. H. Q. 177-39-339.

FROM HALIFAX PER

S S 'OLYMPIC 2-6-17

MARRIED SINGLE Yes WIDOWER

TRADE OR CALLING Painter RELIGION Methodist

DESCRIPTION.

APPARENT AGE 29 YEARS — MONTHS

HEIGHT 5 FEET 1 INCHES

CHEST MEASUREMENT 35 INCHES EXPANSION 4. INCHES

COMPLEXION Fair EYES Blue HAIR Lt. Brown.

DISTINGUISHING MARKS 1 vacc. L. arm.

MEDICAL EXAMINATION. PLACE Lindsay, Ont. DATE Nov. 27th 1916.

Present Address Little Britain Ont.

M.D. 2

M.F.W. 44.
1183 (D.P. 250M-12-18.
1772-39-903.

No. 56

CANADIAN EXPEDITIONARY FORCE.

LAST PAY CERTIFICATE

Regimental No. 108 7046 Rank Pte Name Gregg DW
(Surname first)

DISCHARGED

Unit No. 2 DISTRICT DEPOT who was* .....

On 8-2-19 191....., to Med unfit

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1-2-19 to 8-2-19 191... the inclusive date of transfer or discharge.

	Dr.		Cr.	
Bal. Dr. or Cr. from prev. month				
Regimental Pay ... 8 ... days at $ 1 c.			8	—
Field Allowance ... 8 ... days at $ 10 c.				80
Separation Allowance				
Clothing Allowance			33	—
Post Discharge Pay W.29			70	—
*Other Credits				
Advances				
Separation Allowance and Assigned Pay Cheque No.				
*Other Charges				
Balance on transfer or on discharge, cheque No. 51318	113	80		
Total	113	80	113	80

*Give particulars.

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

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

(Address) .....

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

ON TRANSFER OF AN OFFICER.

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

REMARKS:—

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

(2) Separation Allowance, entitled or not No (3) Reason for discharge Med unfit

(4) Authority for discharge or transfer D037

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

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

Date 7-2-19

Place TORONTO, ONT.

C. Keane
Paymaster.

CAPT.
PAYMASTER, No. 2 DISTRICT DEPOT

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

CREDITS, ADVANCES, Etc.

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

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

SK.

B

Number 1087046 Rank Pte.

Surname GRIGGS

Christian Name John William

Units 21st Bn Can Inf. Theatre of War France

Date of Service 14-11-17

Remarks

Latest Address Little Britain Ont.

Roll No. B. Page 13080.

200m.-2-21.M.

DESP. JUL 19 1922
REGN. NO GA27884

27-11-16

L. L. Job 4503.—M. & D. 6332.

MILITIA AND DEFENCE

M. R. W. H.
50m.—6-16.
H. Q. 177-39-813.

38

SEPARATION ALLOWANCE

Name Sarah Griggs

Address 12 Basuto Rd.
Parsons Green.
Fulham, London
England

Relation to Soldier wife, child or mother } W. Mother

Name of Soldier Griggs, John Wm

Regtl. No. 1084046

Rank Pte

Corps 252nd Batt

To what Corps belonging when called out }

PAYMENTS

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

ENGLISH

Duplicate sent to England for payments

MAR 9 - 1917

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

M. F. W. 11a.
50m.—6-16.
1772—39—818.

Sheet No. 2. Sarah Griggs W. Mother

PAYMENTS.

Name of Soldier Griggs, John Wm Pte

L. L. Job 4503.—Req. 6832.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			Duplicate Sent to England for payment
May				
June				
July				MAR 9 - 1917
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept				
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier_____

PAYMENTS.

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

M. F. W. 41a.
120m. 1-18
1772-39-1213

English L.P.C. No. G - 302

Name Griggs, John Wm.

Regt'l No. 1087046 Rank Private File Numbers P.M. 25-75 / P.M. 25-Gr.

Former Units E. O.R.D. Original Unit 252nd. Battalion

Date of arrival in Canada 1-10-18 Boat Neuralia Port of Disembarkation Halifax

Rates of Pay:—Regt'l 1.00 Field .10 Date of arrival in M.D. 2

Separation Allowance. Date paid to nil Rate nil If continued by Chief Paymaster, England nil

Assigned Pay England Date paid to 31-8-18 Rate $15.00 If continued by Chief Paymaster, England no

Name and address of Beneficiary Mrs S. Griggs, (Mother) 12 Basuto Road, Parsons Green, Fulham, London, Eng

Pay claimed on English L.P.C. to 31-8-18 to be paid by new Unit from 1-9-18

Name of new Unit No. 2 District Depot Date L.P.C. forwarded to new Unit 18/10/18

A/P. charged on English L.P.C. to 31-8-18

L.L. 34682—M. & D. 8645.

Credit Balance shown on English L.P.C.	OTHER CREDITS DUE	TOTAL CREDITS	Charges to be made on account of advances since English L.P.C. made out: On Boat	~~At Cl. Depot &c.~~ A. P.	OTHER CHARGES	TOTAL DEBITS	BALANCE TO NEW UNIT: Credit	BALANCE TO NEW UNIT: Debit	REMARKS
$ c.	$ c.	$ c.	$ c.	$ c.	$ c.	$ c.	$ c.	$ c.	
27 33		27 33							CKM. 11-10-18 Fa 12/10/18
			5 00						AR18 — 1-10-18
			50 00						Halifax, 1-10-18
Debit Balance		27 67				55 00			
		55 00				55 00		27 67	

M. F. W. 41a.
120m. 1-18
1772-39-1213

English L.P.C. No.....

Name.....

Regt'l No.....Rank.....File Numbers { .....
.....

Former Units.....Original Unit.....

Date of arrival in Canada.....Boat.....Port of Disembarkation.....

Rates of Pay:—Regt'l.....Field..... Date of arrival in M.D.....

Separation Allowance. Date paid to.....Rate..... If continued by Chief Paymaster, England
.....

Assigned Pay. Date paid to.....Rate..... If continued by Chief Paymaster, England
.....

Name and address of Beneficiary { .....
.....

Pay claimed on English L.P.C. to.....to be paid by new Unit from.....

Name of new Unit.....Date L.P.C. forwarded to new Unit.....

Credit Balance shown on English L.P.C.		OTHER CREDITS DUE		TOTAL CREDITS		Charges to be made on account of advances since English L.P.C. made out				OTHER CHARGES		TOTAL DEBITS		BALANCE TO NEW UNIT				REMARKS
						On Boat		At Cl. Depot &c.						Credit		Debit		
$	c.	$	c.	$	c.	$	c.	$	c.	$	c.	$	c.	$	c.	$	c.	

Duplicate

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

M. F. W. 11a.
50m.—6-16.
1772—39—813.

Sheet No. 2. Sarah Griggs W. Mother

Name of Soldier Griggs, John Wm

L. L. Job 4503.—Req. 6832.

PAYMENTS. Pte

SEPARATION POLICE. 12 APR. 917 CANADIAN CONTINGENT

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				82
April				Not Eligible
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier

PAYMENTS.

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

Canadian Pay Office.
Received by Pay II.
APR 2 1917
and Passed for action to
Sub-Div. Date

A.		
B.		
C.		
D.		
E.		
F.		
G.		
H.		
PB's		
Obs.		

Not eligible
I am not sure
right.
2-4-17

L. L. Job 4503.—M. & D. 6832.

27-11-16 Duplicate

MILITIA AND DEFENCE

M. F. W. 11.
50m.—6-16.
H. Q. 177-39-818.

SEPARATION ALLOWANCE

SEPARATION ALLOWANCE
12 APR 1917
CANADIAN CONTINGENT

Name Sarah Griggs

Address 12 Bacuto Road.
Parsons Green, Fulham,
London, England.

Relation to Soldier wife, child or mother } W. Mother

Name of Soldier Griggs, John Wm

Regtl. No. 108 4046

Rank Pte

Corps 252nd Batt

To what Corps belonging when called out }

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
				Sep 366.
Aug.	1914			SD9 & Sent 12/4/17
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				Not Eligible
Apl.				
May				
June				
Jul[illegible]				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

Canadian Pay Office.
Received by Pay II.
APR 2 1917
and Passed for action to

Sub-Div.		Date
A.		
B.		
C.		
D.		
E.		
F.		
G.		
H.		
PB's		
Obs.		

M. F. W. 41
100M-1-18.
1772-30-832.

Name Pte Griggs J. W

Regimental No. 1087046

Unit 252 Bn

Date of enlistment

Place of "

Married (yes or no) No

Amount of pay assigned monthly $ nil

To whom payable

Name and address of next-of-kin

Date and place discharged

Reason for discharge

Character on discharge

Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
Sep 1	Oct 31	61	1.00	61 -	61	.10	6 10	13 60	80 70	40237		53 03		27 67	80 70	T.O.S. #2 A.D. 20/9/18 X posted to H.S. 1/10/18 Granted leave with Rubs 5/10 - 21/10/18 D.O. 173 Dr. Bal. 27 67 L.P.C.
Nov 1	30	30	1	30 -	30	10	3 -		33 -	41678		15				
										42419		18 -			33 -	
Dec 1	31	31	1	31 -	31	10	3 10		34 10	43365		15 -				
										44266		19 10			34 10	

TRANSFER

M. F. W. 41
100m-1-13.
1172-39-358.

Name.....

Regimental No.

Unit

Date of enlistment

Place of "

Married (yes or no)

Amount of pay assigned monthly $

To whom payable

Name and address of next-of-kin

Date and place discharged

Reason for discharge

Character on discharge

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date					

P. 558

MARRIED OR SINGLE: Single.

PLACE OF BIRTH: London. England.

NAME AND ADDRESS OF NEXT OF KIN: Mrs. Sarah Griggs.
12 Basuto Rd. Parsons Green. Fulham. London. Eng.

RELATIONSHIP OF NEXT OF KIN: Mother.

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	AUTHO
Reverts to Pte. surplus to est.	10-6-17	B.O. 1410

ADMISSIONS TO HOSPITAL, &c.

DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL

	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	No
															25 36	25 36							
Jan 1/9		9	1.10	10	80																		
Jan 10 July 31		52	1.10	57	20											68 00							
Aug 1-31		31	"	34	10											34 10	362	17/6					
																	430	30/6					
																	476	15/7					
																	494	23/7					
																	584	15/8					
Sept. 1-30		30	"	33												33			630	31/8			

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFER-RED. PAY	SER ALLCE. ENG.
Sept 30	Bal.	~~3963~~							3963		
Oct 31	1.10	34 10		A 226871			15				
				AR 678 15/9/17 6 Res	9 73						
				AR 721 30/9/17	7 30				41 70		
		34 10			17 03		15				
Nov 1/9/17		33		B 35069 £3-1-8			15				
				AR 768 15.10.17 6th Res Bn.	12 17						
Dec "		34 10		68192 £3/8			15				
		67 10			12 17		30				

&c.

IVE	AUTHORITY
17	B.O. 1140 16.6.17

, &c.

ME OF HOSPITAL

REG'L No. 1087046. RANK ~~Cpl.~~ Pte. NAME Griggs. John. William.

IF IN PERMT. CORPS WHAT UNIT } UNIT 252nd Bn. TRANSFERRED TO 6th Res. DATE 7.6.17. AUTHORITY B.O. 136.

PERMANENT FORCE ALLOWANCES TRANSFERRED TO 21. Bn. DATE E. 1.1.18 AUTHORITY 99

PLACE OF ATTESTATION Lindsay. Ont. Canada. TRANSFERRED TO E.O.R.D. DATE 1-3-18 AUTHORITY 8/3/18.

DATE OF ATTESTATION 27-11-16. TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY $ 15 xx/00. DATE EFFECTIVE 1-6-17.

PAYABLE TO Mrs. Sarah Griggs. 12 Basuto Rd. Parsons Green. Fulham. London. England. RELATIONSHIP Mother.

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)

C.S.

ANCE ROLLS 3 No.	DATE	4 No.	DATE	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE CREDIT	DEBIT	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
											25 36				Balance from Canada
				a 95059				30		30 -	63 36				Less ration Gen Reval. to Pte. off 15/6/17 B.O. 140 14/6/17
				9 144272	7.30			15		22 30	75.16				
8				A 174335	4.86 24.33 4.87 9.74	9 73		15		68 53	39 63				
					51 10	9 73									
E	DEFER-RED. PAY	SER ALLGE. ENG.													
3				~~A 276891~~				~~15~~ -							
0															

CANADIAN
ASSIGNED PAY AUDITED
W. Black
AUDIT CLERK
DATE 12.6.19

1087046. Pte. Griggs, J. W.

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
MONTH	PARTICULARS				CR. 1	CR. 2	PARTICULARS							DR. 1	DR. 2	DR.3	DR.4	BALANCE	DEFERRED PAY	SEP. ALLCE. ENCE.						
					67 10									12 17		30	30									
							aR 190 6 Res.					21.10.17		7 30												
							" 842 "					14.11.17		7 30												
							Q 180 "					29.8.17		1 01												
							Q 368 "					25.9.17		1 32												
1918					67 10									29 10		30			49 10							
Jan.	P. P.				34 10		Q 7716 £3-1-8									15										
							Form Q 597 8/11/17 6 Res							2 94												
							" " 675 - 1/12/17 " "							12												
							~~" " 597 8/11/17~~																			
							aR 600 8/12 21 Bn							3 57												
							" 415 29/11 2 CCRC							8 92												
							aR 904 23/12 21 Bn							8 03					45 77							
					34 10									23 58		15										
Feb.	P.P.				30 80		D 3656 £3-1-8									15			61 02							
					30 80											15										
Mch	"				34 10		D 43533 £1 8									15										
							aRem 7.3.18 London. 24431							HS 67												
							~~Q 591~~ already schgd.							~~[illegible]~~ 48 67		15			31 45							
					34 10																					

Loan of Pay 15 00/11

SH PAYMENTS		ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
3	4				CREDIT	DEBIT			
RS	CTS	PARTICULARS			DR. 1	DR. 2	DR.3 DR.4	BALANCE	DEFER- RED PAY

P 820
12474—375H—13-2-18.

* Strike out whichever is inapplicable.

ASSIGNED PAY. * ENGLAND OR ~~CANADA~~	SEPARATION ALLOWANCE. * ENGLAND OR CANADA.
EFFECTIVE DATE:– 1.6.17	EFFECTIVE DATE:–
AMOUNT:– 15XX	AMOUNT:–

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

Mrs Sarah Griggs
12 Basuto Road.
Parsons Green, Fulham
London Stopped Eff 1.9.18

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	
27.6.18		A.B. 51 Epsom -/4d		08					

PARTICULARS OF RENDERING NON-EFFECTIVE:– Invalided to Canada 1/9/18 – Granville

MONTH 1918	PARTICULARS	CR. 1		CR. 2.		PARTICULARS
Mch 31	Bal forward.					
Apl	P/P.	33				A.H 1255 £3.1
						AR 4213. Epsom 9.4.18
May	P/P.	33 34	10			A 65853 3.1
						A.R. 564. Epsom 9.5.18.
June	"	34 33	10			B. 51854 £3.1.8
						AR 4321. Epsom. 14.6.1
July	P.O.	33 34	10			B.76651 £3.1
						AR. 1095. Buxton – 12-7
						" 1605. Westcliffe 31.7.1
Augt	P.P.	34 34	10 10			C 62453. ~~£3~~ £3.1
	10 days S.F. 19/29.8.18	7	30			Rem. 595 – 12/8/18.
		41	40			AR. 5103. 8/8/18. Bux
		A				" 5759. 17/8/18 "
		A 1	40			
Oct.						DU. 6486 Bal to Cana
March 19						A.B. 51. Epsom 27/6/18

Checked. Apple
30.8.19

CANA
ASSIGNED P
DATE 12

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

NAME:– GRIGGS John Wm

NUMBER:– 1081046.

ATIONSHIP & AUTHORITY	WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.
uggs	
oad.	
en, Fulham	
rd Eff 1.9.18	

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Private

UNIT AND TRANSFERS

ORIGINAL UNIT:– 252 Bn

DATE ACCOUNT FIRST OPENED:– 1. 6. 17

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			E.O.R.D.
	1.9.18	20.9.18	B.N.E.
			Canada

TIVE SERVICE PAY-BOOKS { UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK

T PAID BY	AMOUNT		DATE OF PAYMENT	NUMBER OF A R	UNIT PAID BY	AMOUNT	
Epsom -/4d		08					

DAILY RATES OF PAY AND ALLOWANCES

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

NDERING NON-EFFECTIVE:– Invalided to Canada 1/9/18 – Granville 6a/85 23.8.18 – L.P.C. 27.33

PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Dard.								31 15		
	33		A.H.1255 £3.1.8			15				
			AR 4213. Epsom 9.4.18	9 73				39 72		
	33 34 10		A.65853 3.1.8	9 73		15 15				
			A.R. 567. Epsom 9.5.18.	4 87				53 95		
	34 10 33		B.51854 £3.1.8	4 87		15 15				
			AR. 4321. Epsom. 14.6.18	4 87				67 08		
	33 34 10		B.76651 £3.1.8.	4 87		15 15				
			AR. 1095. Buxton – 12-7-18.	4 87						
			" 1605. Westcliffe 31.7.18.	2 43				78 88		
	34 10 34 10		C.62453. £3.18	7 30		15 15				
9.8.18	7 30		Ren. 595 – 12/8/18.	24 33						
	41 40		AR. 5103. 8/8/18. Bux.	4 87						
			" 5759. 17/8/18 "	48 67				27 41		—
	41 40			77 87		15				
			W.U.6486 Bal to Canada	27 33				08		
				27 33						
			A.B.51. Epsom 27/6/18.		08			Nil		

CANADIAN
ASSIGNED PAY AUDITED
U Blair
AUDIT CLERK
DATE 12. 6. 19.

NUMBER 1087046 RANK NAME GRIGGS J.W.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.

NAME GRIGGS J.W.

PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION

PARK SCHOOL

G-302

No. 2 DISTRICT DEPOT

AUDITOR | PAYMASTER

8

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

M. OR S. S

REGT. No. 1087046 RANK PTE NAME (IN FULL) GRIGGS. J.W (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN | RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? | DATE EFFECTIVE

TO WHOM PAID | RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F. 252 Bn | IF IN P.F. WHAT UNIT? Little Britain, Ont.

PLACE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

DATE OF ATTESTATION 27-11-16 | TRANSFERRED TO | DATE | AUTHORITY

ASSIGNED PAY $ | DATE EFFECTIVE

PAYABLE TO | RELATIONSHIP | ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE

DISCHARGED | PLACE Toronto | DATE 8.2.19 | REASON Med. U. | AUTHORITY DO. 37 | IF ENTITLED TO POST DISCHARGE PAY yes

MONTH 1919	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	C.	$	C.	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.	$	C.	TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT Jan 1-31	31	1.10	34	10					34	10	43960				697	58	15				19	10									34	10					Dec 31
Feb 1-8	8	1.10	8	80	70																																
					35				113	80					5	13	18				113	80									113	80					1st Payment, War Service Gratuity
5 mos.									350 ~~340~~										Mar 5 810745				70								70						
																			Apr 4 75 7517				70								140						
																			May 6 350 4 17				70								210		70				
																			Feby 4 1st WSG				70								280		70				
																			Ck 71 Final 686966				70								350						
									350	00													Final 350 00								350						W.S.G. PAID IN FULL

CAPTAIN
FOR PAYMASTER WAR SERVICE GRATUITY

30M-11-18.—L.L. 50877-M. & D. 9553.

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

No 56

THIS FORM WILL BE USED FOR ALL RANKS

MEDICAL HISTORY OF AN INVALID

INTERVIEWED

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 College Military Hosp DATE 21/1/19

1. 1 (a) Unit #2 D.D. (b) Regimental No. 1087046. (c) Rank Pte.

(d) Surname GRIGGS (e) Christian name John William

(f) Home address Little Britain Ont.

(g) Next of Kin Sarah Griggs (h) Relationship Mother.

(i) Address of Next of Kin 12 Basuto Rd. Parsons Green Fulham S.W. London England.

2. Age last birthday 30. Date of birth 27 Nov 1888.

3. Enlistment, or Appointment (if an Officer) (a) Place Lindsay Ont (b) Date 27 Nov 1916.

4. Personal description:

(a) Height 5'1" (b) Weight 118 (stripped) (c) Complexion Bright

(d) Colour of hair Brown (e) Colour of eyes Blue. (f) Identification marks, Scars, etc. Operation scar 1/2"x1/4" front of each shin.

5. Former trade or occupation Painter

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 1/12	24

	Periods From	Periods To
Canada	Nov 1916.	May 1917
England	May 1917	October 1917
France or other theatres of War England & Canada	Oct 1917	Jan 1918
	Jan 1918	present date.

7. Original disease, or injury Neurasthenia.

(a) Date of origin December 1917. (b) Place of origin France.

(c) Cause General Serious Conditions under shell fire.

M. F. B. 227.

300M.—8-18.
1772-39-117.

WASSERMAN Neg 2-10-18

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.)

Partial Loss of function of Nervous 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 - Patient is rather undersized & underdeveloped
Bowels regular: Pulse 84 sitting: after exercise 108, falling to 86 in one minute afterwards. Reflexes normal.
Subjective - occasional slight headaches. Sleeps well no dreams of any account but states he dreams occasionally. Muscular coordination good. No muscular tremor: no Rhomberism.
States he has a slight cough but I can find no chest condition to account for same.

(*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: No (Albumen and Sugar will be excluded.)

Special Senses: No — Respiratory System: ~~No.~~ ary — Integumentary System: No

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

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

Lumbar puncture negative
Wassermann negative

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

Was in the front line from November until about Xmas 1917 during which time he states he was sleeping badly & was having dreams
Was finally evacuated to England in July 1918

WAR OFFICE

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*).)

None 1½" x ¼" ~~scars from Furuncles, on both shins.~~

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

Scar from Furuncles 1½" x ¼" on both shins

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

not applicable

12. Was the disability caused, or aggravated; (*a*) by intemperance, or improper conduct; or (*b*) by unreasonable refusal to accept treatment? a no 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? ~~not applicable~~ Nil

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

Hospital - France - 3 weeks
Hospital - England - 9 months
Hospital Canada. 4 months

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)

No

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

17. Recommendations

I recommend his discharge as being medically unfit

A. B. Greenwood 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 man 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 nil

Pte Griggs J. W. 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.

We concur

19. Is the invalid fit for

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

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.)

on account of medical unfitness

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.

Geo F Boyer M.D. Chairman *President.*

PLACE Amt Tomb

A. A. Fletcher Capt. C.A.M.C.

DATE 28-1-19

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

Assistant Director of Medical Services.

DATE 5-2-19

APPROVED BY

Director-General of Medical Services.

DATE.....

PART I. A.F.B. 179 Canada (Revised).

Reserved for M.H.O.

Regt. No. 1087046 Rank Pte Surname Griggs Christian Name John Wm.

Unit or Corps—(a) Overseas from United Kingdom 21st Canadians (b) In United Kingdom

Born at—Town London County or Province Country England

Date of Birth—Day 27th Month November Year 1888 Age 29 yrs. 7 months.

Joined at Lindsay Ont. Date Nov 27th 1916

Former Trade or Occupation Carriage Painter

Permanent marks or peculiarities that will serve for future identification:—
Scar, Operation, 1½" by ¼" on the front of each shin, below the centre.

Height—feet 5 inches 7 Colour of eyes Blue

Signature of Soldier (*for identification purposes*) Pte Griggs J. W.

Medical Report.

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

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

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

Disabilities Group (*a*). Neurasthenia.

Disabilities Group (*b*). N.A.

Disabilities Group (*c*). N.A

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

	Disease or injury to which the disability is due.	Place of origin.	Date of origin.
(*i.*) As to Group (*a*) above.	Nervous Instability Aggravated by General Service Conditions	Civilian Life	
(*ii.*) As to Group (*b*) above.	N.A	N.A	N.A
(*iii.*) As to Group (*c*) above.	N.A	N.A	N.A

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

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

(*i.*) As to Group (*a*) above? yes If yes, has Active Service aggravated it? yes

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

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

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

(*i.*) As to Group (*a*) above? No

(*ii.*) As to Group (*b*) above? N.A.

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

PART I. (*continued*).

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

(*i.*) While on duty? N.A. (*ii.*) While off duty? N.A.

(*iii.*) Was a Court of Inquiry held? N.A (*iv.*) Where? N.A (*v.*) When? N.A.

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

6. HISTORY OF THE CASE. (*State concisely the essential points of the history, noting the entries made on the Medical History Sheet and other records.*) Had pneumonia twice before enlistment and once after. States that he was in good average health at time of enlistment.
Arrived in England Feb 12/17. Reached France Nov 10/17. In France 7 weeks.
He never was really strong, never able for really hard prolonged work. He was in Bugle Band while in Canada, in England he could not stand the drill, and acted as hut orderly till he went to France. In France after he had been there three weeks he felt himself going to pieces. He had pains in head, legs & chest. He had poor sleep disturbed by distressing dreams of battle &c. He was shaky all the time. He was invalided to England Jan 12/18
Hospitals:- CCS. 3 days — 83rd Dublin Gen HP 3 weeks — Temple Rd. Milt. HP. 6 weeks — Woodcote Park HP 3 days — Manor War HP 3 weeks — Woodcote Park HP 3 weeks — 9.C.S. HP Buxton 27-6-18
Complains — Headaches — Poor sleep — Bad dreams — Pain in Chest — Legs ache
Eyes go blurred when he attempts to read

7. PRESENT CONDITION. (*Give previous and present weight if likely to indicate progress of disability.*)
Poorly developed, fairly nourished, undersized insipid looking man. Teeth foul and poorly cared for. Epistaxis on back of left Tibia about 4" above ankle. Heart normal in size and position, lungs clear, slightly impaired resonance at right base. Left leg a little short, slight limp in walking. Reflexes and sensation normal.
This man states that he never has been able to lead a strenuous life, his appearance is in keeping with that statement. From the commencement of his enlistment he began to go down. He was only in France three weeks when he began to have severe frontal headaches. His sleep became poor. Lying awake for long hours, and when he finally slept, was much disturbed by dreams ~~always of the war, guns & fighting. These symptoms still persist. All other systems normal.~~

8. OPERATION. (*i.*) Was one performed? No

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

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

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

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

(ii.) If so, describe. One extracted.

10. DO YOU RECOMMEND:—

(*a*) Fit for duty? No

(*b*) Fit for base duty? No

(*c*) Invalid to Canada? Yes

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

Date of Report 21-7-18 191 Signed A.K. Connolly Capt CAMC
Officer in medical charge of case.

Station G.C.S. Hospital Buxton

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

Maj. C.A.M.C. { Officer i/c Hospital / ~~S.M.O. Brigade~~ } Strike out one of these.

Registrar, for O.C.,
Granville Can. Sp. Hosp.,

Dated at Buxton 22 JUL 1918 Station, on 191

* Delete if inapplicable.

GRANVILLE CANADIAN SPECIAL HOSPITAL REGISTRAR'S OFFICE Buxton

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

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

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

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

13. Was the disability caused or aggravated by—
(a) Negligence of the Soldier — Caused? not applicable — Aggravated? not applicable
(b) Misconduct of the Soldier — Caused? not applicable — Aggravated? not applicable

14. THE ENTIRE DISABILITY.—Without regard to his regular occupation, to what extent is his capacity lessened at present for earning a full livelihood in the general market for untrained labour?
(*Estimate at none*, 10%, 20%, 30%, 40%, 50%, 60%, 70%, 80%, 90%, *or* 100%.)
not applicable

15. THE PENSIONABLE DISABILITY—(*see Part I. (3). Aggravation on Active Service of a disability existing previous to joining is to be included in the estimate*).
What part of the entire disability estimated next above in (14) is due to causes arising during Active Service? (*Estimate at none*, $\frac{1}{5}$, $\frac{2}{5}$, $\frac{3}{5}$, $\frac{4}{5}$, *or all.*)
not applicable

16. Permanency of the Pensionable Disability estimated next above in (15).
(*i.*) Is it permanent? not applicable
(*ii.*) If not permanent, what is its probable minimum duration (*in months*)? not applicable

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

18. Remarks. Patient is not feeling very well, sleeping poorly, dreaming, and wakes up scared. Pt has a poor past history.

Walking case

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

Classification for the Military Hospitals Commission.
G

Date of Board

EXAM. MED. BOARD
15 AUG. 1918
G. C. S. H.

Signatures of the Board — President.
Frank Kay Maj Cam
Chas K Graham Major Cam

ASSISTANT DIRECTOR OF MEDICAL SERVICE
20 AUG. 1918
CANADIANS
BUXTON AREA.

Station

Approved — Colonel, A.D.M.S. Canadians, Buxton. — A.D.M.S.

Dated at — Station — 191

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

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

on the day of 191

Members of the Board:—

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

Dated at this day of 191

Signatures of the Board

.....
President.

.....

.....

.....

Original

MEDICAL HISTORY SHEET

1087046

Surname: Griggs. Christian Name: John William.

Examined: on 27 day of Nov 1916 at Lindsay Ont.

Birthplace: City or Town London. County England

Apparent age 29.

Trade or occupation Painter.

Height 5 feet 1 Inches

Weight 115 lbs.

Chest measurement: Minimum 31 inches; Maximum expansion 35 inches

Physical development Good

Small-pox Marks nil.

Vaccination Marks: Arm ~~Right~~ ~~Left~~; Number 1.

When Vaccinated last Childhood

(a) Marks indicating congential peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection. Vision very slightly defective. (short sighted).

Approved by J Arbuthnot

Rank M.O.

Date	Fit or Unfit	Examined for Re-Engagement	
			14 FEB 1918 M.O.
			M.O.
			M.O.
			M.O.
			M.O.
			M.O.
3/7/18	TAB		M.O.
10/7/18	TAB		M.O.

Date	Result	Vaccinations	
4/5/13	Good	G. Graham	M.O.
			M.O.
			M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.	
25/4/13	Good	G. Graham	M.O.
4/5/13	Good	G. Graham	M.O.
10/5/13	Good	G. Graham	M.O.
7/11/17	G.A.B.	James Duxbury	M.O.

Enlisted on 27 day of November 191 6 at Lindsay Ont.

	Corps	Regt'l Number	Habits	Date
Joined on enlistment	2d Line Bn. C.E.F.	1087046.	Good.	24/11/16.
Transferred to	21st Bn.			14-11-17

6th CANADIAN RESERVE BATTALION. JUN 10 1917

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

Station	Date	Disease	Result
Bufton QCSH	15/8/18	Neurasthenia	D to C C.R. Graham Surgeon

CANADIAN

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

M. F. B. 313.
500M.—3-16.
H. Q. 1772-39-439.

Surname Christian Name

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				
Bro Hospital Birkenhead Affiliated to:- 1st Western General Hospital LIVERPOOL		8	2	18	11	2	18	P. U. O.	4.	Transferred to Temple Rd. Aux: Hospital.	S. R. Nadin
TEMPLE RD. MIL. HOSPITAL Birkenhead at 1st W. G. Liverpool		11	Feb	18	8	Mar.	18	P. U. O.		P.U.O. Had very rapid respiration abnormally.	H Bullowa Lt Colonel
McH Epsom		8	4	18	12	4	18.		5	Has been very nervous and weak should have Hospital attention Manoeuvres	G Maw Capt. C.A.M.C. No. 1 Division
Manor Hll. Epsom		12	4	18	28 MAY 1918			Remasteris		Entirely unsuited for 1st line hospital treatment & likely to be made worse by lack of occupation so entailed. Recd return to Con. Hosp:	Lindsay Capt
McC H Epsom		8	5	18	27	6	18.	Do	41	Transfer to Grenville Special Buscton	W Elliott Capt.

Continuation of Original Sheet 2 1087046

Army Form B. 178.

To be used for recruits enlisting direct into the Regular Army only. Army Form B. 178A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname Griggs. *Christian Name* John William

TABLE I.—GENERAL TABLE.

Birthplace ... Parish _____ County _____

Examined ... ... on _____ day of _____ 191 .
at _____

Declared Age ... ... _____ years _____ days.

Trade or Occupation ... _____

Height ... ... _____ feet, _____ inches.

Weight ... ... _____ lbs.

Chest Measurement { Girth when fully Expanded. _____ inches.
Range of Expansion _____ inches.

Physical Development ... _____

Vaccination Marks { Arm ... Right _____ Left _____
Number _____

When Vaccinated ... _____

Vision ... ... R.E.—V=
L.E.—V=

(*a*) Marks indicating congenital peculiarities or previous disease ... (*a*) _____

(*b*) Slight defects but not sufficient to cause rejection ... ... (*b*) _____

Approved by (*Signature*) _____

(*Rank*) _____ *Medical Officer.*

CENTRAL MILITARY MEDICAL BOARD HOSPITAL OCT 25 1916

Enlisted ... ... at _____
on _____ day of _____ 191 .

	Corps.	Regtl. No.
Joined on Enlistment ...		1087046.
Transferred to	21st Canadians	

Became non-effective by _____

on _____ day of _____ 191 .

(*Signature*) _____

(*Rank*) _____

The Morgan Reeve Co., Ltd., Printers, 20/22, Goldsmith St., Kingsway, W.C.
(25289) Wt.W13871/604. 300m. 4/15.

Forms B. 178.

P.T.O.

Table II.—Only for Admissions to Hospital or to the Sick

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Rema
	Day	Month	Year	Day	Month	Year			
GRANVILLE CAN SPECIAL HOSPITAL REGISTRAR'S 25 JUN 1918 OFFICE EXTON	27	6	18	26	7	18	Neurasthenia	30	[illegible] been going began and is st distu
ST CLIFF CANADIAN EYE AND R HOSPITAL, FOLKESTONE.	26	7	18	6	8	18	(1) Neurasthenia (2) Report on Eyes	12	[illegible]
Granville Can Spec Hosp Buxton Derbyshire	6	8	18				Neurasthenia		
Amar Kuraka	21	9	18	1	10	18	do	11	
CENTRAL MILITARY CONVALESCENT HOSPITAL TORONTO OCT 25 1918									

List in the case of Warrant Officers treated in quarters.

rks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
dmitted to hospital giving a history of having had pneumonia before enlistment and one since, and stating that he had never able to stand hard work. He was excused much duty before to France, and was only in France three weeks when he to develop symptoms of hemorrhoids. The condition grew worse at the end of seven weeks he was invalided to England. He ll troubled by severe headaches, poor sleep disturbed by ving dreams of the front, and pains in chest & stt. I.T.C.	A.K. Connolly Capt C.A.M.C.
R.V.: 6/12. L.V.: 6/9. Is in very depressed, d nervous condition and is able to carry on. Cert. "A" for eyes, ursday to Granville. Buxton. for ther treatment & disposal	Capt. C.A.M.C. Adjt. & Regr for Officer Commanding WEST CLIFF CANADIAN EYE & EAR HOSPITAL, FOLKESTONE, KENT
Condition as above unchanged. Eyes apparently not involved. I.T.C	A.K. Connolly Capt C.A.M.C
Cured sane	H.H. Lilienfeld Capt.

Table III.—Boards; Courts of Inquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, etc.

Date	Brief details, and signature
15/8/18	Burton CCSA. Neurasthenia 9 to C. CR Gyral and Major Cave

Table IV.—Service Table.

Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation	Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation

WEST CLIFF CANADIAN EYE & EAR HOSPITAL.

FOLKESTONE. 2-8-18.

INP.
TO: Officer Commanding.
~~Xxxxxxxx~~ Granville Canadian Special Hospital.
Buxton.

P. U. O.
Neurasthenia.

FOLIO. 9508/D.

Pte Griggs.JW.
No. 1087046.
252nd Battn.

The marginally named man was admitted to this Hospital 27-7-18.

He was invalided from France suffering from P.U.O. after seven weeks there.

His previous case sheets shows there is no organic trouble and that he is distinctly neurasthenic.

He is in a very depressed and nervous condition and is evidently quite unfit to carry on.

Right vision ~~6/12~~ 6/9 Fundi & media negative
Left vision 6/9.

We are transferring him to your Hospital for treatment and disposal, please.

He is fit for category A as far as eyes are concerndd.

WEA/TW/V 4.
~~xxxx~~. 2-8-18.

Captain. C.A.M.C.
for O.C. West ~~Cliff~~ Canadian Eye & Ear Hospital.

Forms
I. 1237
11

WEST CLIFF CANADIAN EYE AND EAR HOSPITAL, FOLKESTONE.

Meth

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
8334	1087046	Pte	Griggs	J.W.
Year	Unit.		Age.	Service.
	21st Can. Bn. 252nd Bn.		29	2 10/12 3/12

Station and Date.
26 7 18

Disease Neurasthenia

R.V. ~~7/12~~ 6/9. L.V. 6/9
Fundi & media - negative
Previous case sheets show no trouble
organically. He is evidently
a neurasthenic.
To be sent to Canada.

W E Tinley

6/8/18 Gran. & Sp. Hp. Buxton

*The first and last entries will [illegible]ned, and transfers from one Medical Officer to another, attested by their signatures.

(205) Wt. W 4234—M 627. 1,000 [illegible] T & S. Forms/I. 1237/11.

P.T.O.

Station and Date.	

2192. W.6520/M.2840. 10,000 Pads. 8/17. A. J. W. & Co., Ltd. E.1631.

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

G.C.S.H. Hospital.

Ward 140 Sect C No. of Bed 632 Date July 2/18

Regl. No.	Rank and Name.	Corps.	Part to be X-Rayed.
1087096	Pte Griggs	21 Can	L leg

SHORT HISTORY OF CASE.
(To be completed by M.O. i/c case.)

L tibia about 4" above ankle. Had some orthopaedic operation in Cheshire. Now has an exostosis & some aching in the region after marching.

2-8X8

Signature of M.O. W. Dey Capt.

Date

age 29

REPORT ON RESULT OF X-RAY EXAMINATION.
(To be completed by Radiographer.)

No. of Plate 6357

Spur inner & posterior side of Tibia 10 c/m above internal malleolus left

Signature of Radiographer W. A. Bagar

Date Major C.A.M.C.

LAB. No. 369 B.

GRANVILLE CANADIAN SPECIAL HOSPITAL

PATHOLOGICAL LABORATORY

Date 11-7-18 Ward C 140 Bed 63

Name Pte. Griggs Regt. No. 108 7046 Unit

Report of an Examination of Blood.

Wassermann reaction → negative

R. D. Thomas Capt.

Pathologist.

Form 15. 3,000. 12-2-18.

STATEMENT OF PAY ACCOUNT.

No.....Rank.....Name.....

Unit.....Original Unit on Enlistment in C. E. F.....

Date non-effective { Discharge / Decease / Desertion } .....Reason for discharge.....

CREDITS.	$	c.	DEBITS.	$	c.
From.....191 , to			Total Cash Payments		
.....			Total Assigned Pay @ $..... per month		
No. of days.....					

LAB. No. 353 B

GRANVILLE CANADIAN SPECIAL HOSPITAL

PATHOLOGICAL LABORATORY

Date 4th July 1918 Ward 6 140 Bed 632

Name Pte. Briggs L.W. Regt. No. 108 7046 Unit 21st Bn.

Report of an Examination of Blood

Wassermann Negative

Robt. McAdams.
Capt. A.M.C.
Pathologist.

Form 15. 3,000. 12-2-18.

Name of Witness.....

Address of Witness.....

Occupation of Witness.....

Name of Witness.....

Address of Witness.....

Occupation of Witness.....

N.B.—Personal Estate includes pay, effects, money in Bank, insurance policy, in fact everything except real Estate.

GRIGGS - JOHN WM

Griggs.
#1087046. Pte. ~~Griggs~~ Age 30. 2nd D.D. Service:

Date of admission: Oct. 1st 1918; Date of Discharge:

Diagnosis: Neurasthenia. Place of origin: France.

Unmarried. Civil occupation:- Painter. In France 3 months with 21st Btn. In lines about 6 weeks. History ofneurasthenia before enlistment.

Now complaining of headaches; general weakness;; sleeps irregularly; frequently wakes up with a start; has bad dreams of France.

Physical Examination:

Reflexes normal. Heart and chest O.K.

Nov. 22nd 1918

Not much change. P.T. in A.M. Hot bath at night. General massage 30 minutes daily.

Dec. 3rd

Making good progress.

Dec. 10th

Starting carpentering.

Jan. 18th 1919

Ready for discharge.

Estimated % of disability on admission to Centre.	30%
" "n" " " discharge from Centre.	Nil.
Duration of disability prior to admission to Centre.	Dec. 1917.

Capt. A.B. Greenwood.

CENTRAL MILITARY
CONV. HOSPITAL

Forms
I. 1237
17

Army Form I. 1237.

MEDICAL CASE SHEET.*

Sheet 2

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
1992.	1087046	Pte	Griggs	JW.

Year	Unit.	Age.	Service.
1918	21 Bn Canadians	29	1 8/12 3/c

Station and Date. Disease Neurasthenia

G.C.S. Rustin 12 JUL. 1918 Wassermann. Negative.-

Is not feeling fairly well - Sleeping poorly. dreaming - wakes up feeling scared: This man has a poor past history - He is a poor type and has gone under after a comparatively short time in France -

Recommend I. B. C. W W Barraclough.

11/7/18 ~~Urinalysis~~, Blood

Nasserman reaction → negative.

N O Thomas Capt.

EXAM. MED. BOARD
5 AUG. 1918
G. C. S. H.

IBC

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

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

[P.T.O.

Station and Date.	

Forms I. 1237/12

G 140 632

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
1992	1087046	Pte.	Griggs	J W

Unit.	Age.	Service.
21st Canadian	29.	18/12 3/12

GRANVILLE CANADIAN SPECIAL HOSPITAL
REGISTRAR'S
27 JUN 1918
BUXTON

Year

Station and Date: S.F.C.E

Disease Neurasthenia

Occupation Carriage painter

Enlisted 27 Nov 1916, Lindsay Ont.

Ar. England 12th Feb 1917,

Ar. France 10th Nov 1917

Reported Sick 4th Jan 1918

Hospital - C.C.S, 3 days, 83 Dublin Fest Bolougne, 3 weeks, Temple Rd Milt Hosp, 6 weeks, Woodcot Park Hosp. 3 days, Manor Nor Epsom, 3 weeks, Woodcot Park, 3 weeks, R.C.S.H 27 June 1918

Previous History

28 June 1918 Urinalysis

1026, Alkali, Clear, L.A., Albumin 0 Sugar 0,

Robt M Jones Capt.

For ten or more years he has been troubled by any harsh noise; scraping etc would give him a headache. Has had some headaches for years.

N.P.D. While training in England he noticed a good deal of drawing across his chest when he had his equipment on + legs ached and felt weak when he was marching, more in left leg. Says he has never stuck a route march yet. Slept well, appetite was good, no complaints except chest + legs.

To France Nov 10/17; soon began having frontal headache, legs became worse, sleep became poor, difficulty in falling asleep

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

Wt. W 6604/M 2870—1,500,000—8/17—H. & Sp. (10938). Forms/I. 1237/12. (E839)

[P.T.O.

Station and Date.

Got lost twice in France, once when Bn was moving & once on a working party, because he was unable to keep up. Second time it took him an hour to find his party & he became excited. Grew worse steadily, & was sent out Jan 12/18 & was 9 to Σ in Feb'18.

Examination

Poorly developed, fairly nourished, insipid looking man. Pale blue eyes with an unpigmented ring resembling an arcus senilis. Teeth foul & not cared for, pyorrhoea. Pharynx a little congested. Exostosis on back of left tibia about 4" above ankle. Scar of an orthopaedic operation in childhood in front of this. X-ray ordered. Wassermann ordered. Pupils round concentric equal active. No reflex disturbance found. No sensory disturbance found. Heart normal in position & size. Sounds clear. Pulmonic 2nd +1. Lungs clear. Note made in Feb 1918 gives "irregular & reduplication of 1st sound" & a note Mar 1918 "absolute dulness at l. base, voice sounds absent, exploration - no fluid" Two weeks later lungs clear. Left leg a little short; dates this from childhood. Limps in walking, favouring l. leg. Poor type.

W. Bey Capt.

1918 Says he can't walk very far because his legs get shaky. This symptom has been getting loose since patient came into hospital. Does not sleep well at night on account of dreams. These are patients of France. Return wk with Wassermann report.

W W Barraclough

Forms
I. 1237
12

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	1087046.	Pte	Griggs	J.W.
Year	Unit.		Age.	Service.
	21st Cans.		29	1 6/12.

Station and Date.

Disease P.A.O.

Manor War Hosp.
26-4-18.

To France Nov. 20th, 1917. Never had any joint trouble or illness worth noting before enlistment. During training had pain & tenderness in ankles and bones of leg after marching a mile or two, & could not do route marches. Except for this was in good condition. In France complained of pains being worse, finally on Jan. 12th 1918 sent into hospital & has been in hospitals since. He can now only walk across ward & that causes pain. Has had left inframammary pain for which a belladonna plaster has been applied. His history sheet & notes refer to occasional very rapid respiration & dyspnoea. On March 2nd said to have dulness left base, no fluid on puncture, T. was then normal.

Chest exam. negative. Ankles & calves are slender. No objective signs at all. Can walk without signs of pain & also raise himself repeatedly on his toes. Knee jerks & plantar reflex normal. Some hyperhidrosis also.

He appears to be a neurasthenic. A. J. Turner

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

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

[P.T.O.

Station and Date.	

Forms
I. 1237
12

Army Form I. 1237.

1—4

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	108 7046	Pte	Griggi	J. W.

Year	Unit.	Age.	Service.
1918	21st Can Battn	29	1 6/12

Station and Date.

19 MAY 1918

Convalescent Hospital Woodcote Park

Disease Neurasthenia Com

In France 6 week. Headache pains in small of back. Feels shaky Sleeps poorly appetite good Easily tired slight tremor of fingers Heart and lung normal Knee jerks normal speech normal pupil reflexes normal R.G. Special. Slight Rhomb. W duty

17-6-18. C.O.

23-6-18. Complains of nervousness. headaches and insomnia and weakness. Transfer to Granville Special Hospital as Progress here is not satisfactory

7/5/18 Blood (wasserman) negative

Robert M. Jones
Capt C.A.M.C.

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

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

P.T.O.

Station and Date.	

Forms
I. 1237
12

Army Form I. 1237.

I/a

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	1087046	Pte	Greggs	J. W

Year	Unit.	Age.	Service.
1918	21st Can	29	1 6/12

Station and Date. 19 APR 1918

Convalescent Hospital Woodcote Park, Epsom.

Disease P. U. O

Complains of pain & constipation in bowels & chest also dyspnoea

R.G. Camp # 11

11.4.18. Has been very nervous & weak should have hospital attention Neurasthenia.

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

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

[P.T.O.

Station and Date.	

Forms
I. 1237
2

Army Form I. 1237.

Rel. Meth:

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
*C.T. 3894	1087046	Pte	Griggs	John. W.
Year 1918	Unit. 21st Canadians		Age. 29	Service. 1 6/12 & 3/12

Station and Date. Disease PUO

TEMPLE RD. MIL. HOSPITAL all 1st W. G. Hosp. Liverpool

11th February	Sent from Borough Hosp: Has not had furlough	Treatment
	Pain in head & shins. Temperature	Fuel.
	since 15/18. Pain in chest. dyspnoea	Rj Vi Digitalis μ v
15 2 18	Ankles painful. Heart not	Ti Nucis Vom μ v
	regular.	Aq. ad ℥i ter
22 2 - 18	Pain in praecordial area. Heart not	~~Mist Rhei Co ℥ss~~ p.c.
	regular.	~~thus p.c.~~
		Bed.
25 · 2 · 18.	Reduplication of first sound - irregular	Mist Alba ℥i ter
	active heart.	
~~28 2 18~~	~~Allowed to get up~~	
28 - 2 · 18 -	Absolute dulness at left base -	Apply mustard leaf over precordial region
	voice sounds absent - fluid?	
2 · 3 · 18.	Exploratory aspiration made at left	apply hot poultices
	base - no fluid.	
4 · 3 · 18.	Dulness clearing up & breathing	
	sounds heard. Still complaining	
	pain in chest.	
11 · 3 · 18.	Pain much easier - allowed up for chair.	R. Mist acid Co ℥i ter
14 · 3 · 18.	Respiratory murmur clear - sounds somewhat	
	difficult to hear - heart still very irregular in action	
27 · 3 · 18.	Urine Test:- Sp: Gr: 1015. Alb: nil: Reaction: Acid	
30 · III · 18.	Transfer to Mr C. H.	R. Coleman Capt RAMC
		TEMPLE RD. MIL. HOSPITAL

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

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

[P.T.O.

Station and Date.	

Army Form B. 181.

CLINICAL CHART.

(To be attached to Case Sheet.)

Military Hospital WEST CLIFF CANADIAN EYE AND EAR HOSPITAL, FOLKESTONE.

Corps 21.st Bn

No. 1087046 Rank and Name Pte Griggs J.W. Age 29 Service 19/12 3/12

Disease Date of admission 26-7-18 Date of discharge Result

Dates of Observation																															
Days of Disease																															
Temperature Fahrenheit	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.
107°																															
106°																															
105°																															
104°																															
103°																															
102°																															
101°																															
100°																															
99°																															
98°																															
97°																															
Pulse per Minute																															
Respirations per Minute																															
Motions per 24 hours																															

W7204—1542. 750,000. 8/15. McA. & W. Ltd. Forms/B. 181/3.

Signature In charge of case.

CLINICAL CHART.

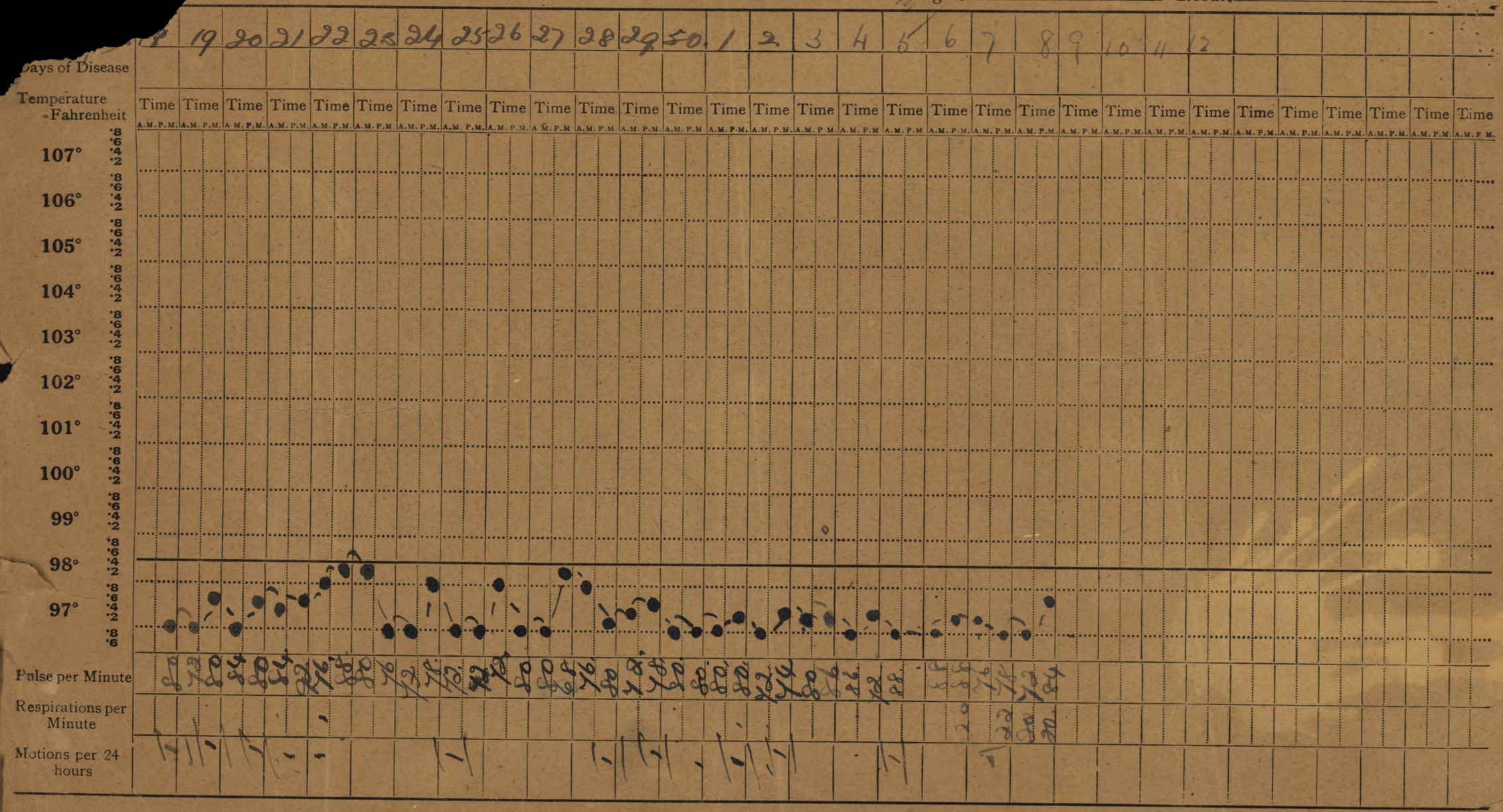
(*To be attached to Case Sheet.*)

Army Form B. 181

Military Hospital Manor

57046. Rank and Name Griggs. Pte. Age 29 yrs. Service 1 yr.

Date of admission 12-11-18. Date of discharge Result



(6201) Wt. W. 11421/M1165 2,000,000 12/16 McA & W Ltd. A.F.B. 181 (E. 735)

Signature In charge of case.

Bed 19 - A - 2.

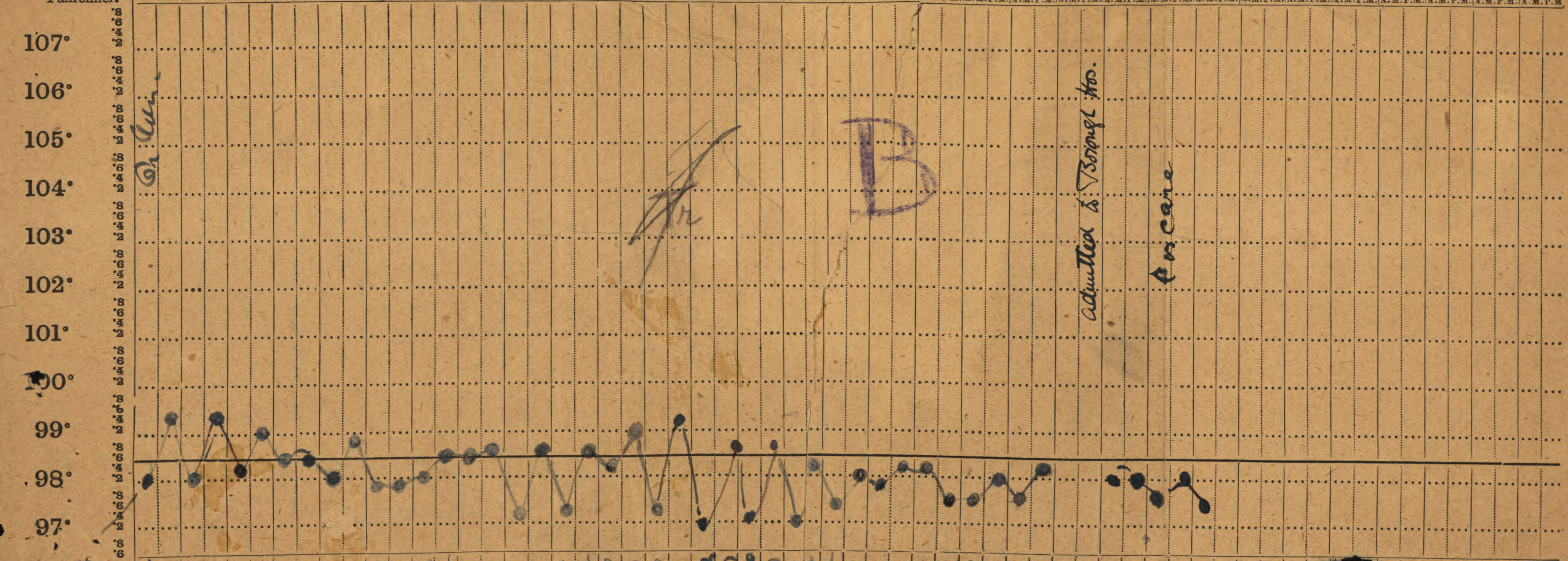
Army Form B. 181.

CLINICAL CHART.

(To be attached to Case Sheet.)

Corps
No. 1087046. Rank and Name Pte. Gregg. J. W.
Disease
Date of admission 19-1-18.
Military Hospital
Age
Service
Date of discharge
Result

Dates of Observation														Feb.																	
Days of Jan Disease	19	20	21	22	23	24	25	26	27	28	29	30	31	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
Temperature, Fahrenheit	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.



Pulse per Minute 78 96 96 96 100 88 92 76 92 76 80 84 84 88 92 84 80 84 72 88 92 88 80 96 82 80 78 80 72 88 84 92 82 76 86 92 72 80 80 70 76 76 64 80 80

Respirations per minute 20 20 20 20 20

…er 24 …rs ·/· 1/1 1/· 1/• 1/ 1/· 1/• 1/1 •/• 1/1 1/1 •/• 1/1 •/ /2 •/1 •/• •/1 •/1 2/1 • • + • 3

W8733/M2813—2,000,000—6/17—H. & Sp. (10698)—A.F.B. 181/5 (E. 735)

Signature

In charge of case.

Army Form B. 181.

CLINICAL CHART.

ttached to Case Sheet.)

Corps __________ Military Hospital __________

No. __________ Rank and Name __________ Age __________ Service __________

Disease __________ Date of ad __________ Date of discharge __________ Result __________

Dates of Observation

Days of Disease

Temperature, Fahrenheit — Time A.M. P.M. | Time A.M. P.M. | Time A.M. P.M. | …

·8 ·6 ·4 ·2 107°
·8 ·6 ·4 ·2 106°
·8 ·6 ·4 ·2 105°
·8 ·6 ·4 ·2 104°
·8 ·6 ·4 ·2 103°
·8 ·6 ·4 ·2 102°
·8 ·6 ·4 ·2 101°
·8 ·6 ·4 ·2 100°
·8 ·6 ·4 ·2 99°
·8 ·6 ·4 ·2 98°
·8 ·6 ·4 ·2 97°
·8 ·6

Pulse per Minute

Respirations per Minute

Motions per 24 Hours

W3720/M2210—2,000,000—6/17—H. & S 31/5 (F. 735) Signature

CLINICAL CHART.

(To be attached to Case Sheet.)

Army Form B. 181.

Corps 21st Canadians — Military Hospital Temple Road

No. 1087046 — Rank and Name Pte Griggs — Age 29 — Service 1 6/12 F.S. 3/12

Disease _____ — Date of admission 11-2-18. — Date of discharge _____ — Result _____

Dates of Observation	Feb. 13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	1st	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Days of Disease																															
Temperature Fahrenheit (Time A.M.P.M.)																															
Pulse per Minute	60	76	76	74	66	62	60	70	74	78	76	74	68	88	80	86	80	72	80	76	72	70	80	84	70	64	88	60	88	72	74	72	66					78	80	80	78	86	90	74	72	62	76	100	70	80	80	72	72
Respirations per Minute																																		3							26		34	30		26	22	24	40	30	30	28	
Motions per 24 hours																															

(1002.) W9043—1195. 499.500. 1/15. K. & K. Forms/B. 181/3.

Signature _____ In charge of case.

CLINICAL CHART.

(*To be attached to Case Sheet.*)

Army Form B. 181.

Military Hospital Temple Rd.

Corps 21st Canadians

No. 1084046. Rank and Name Pte: Griggs Age 29 Service 1 6/12 F.S. 3/12.

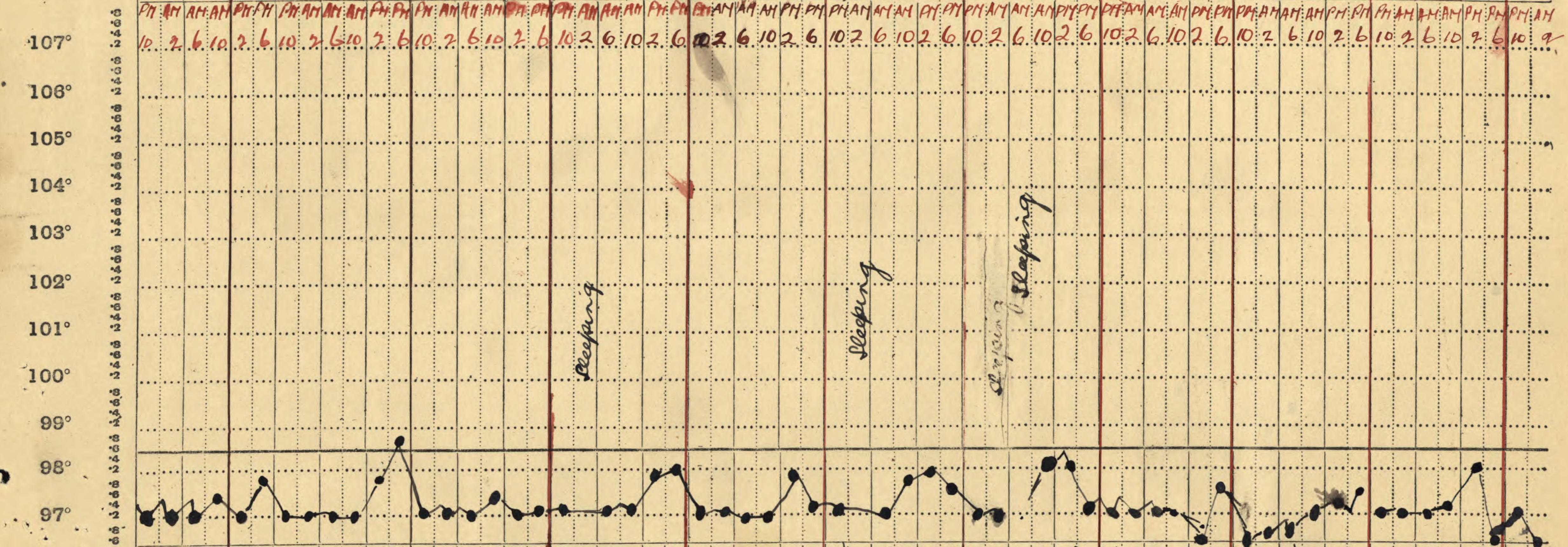
Disease

Date of admission 11-2-18

Date of discharge

Result

Dates of Observation: Watch /



Days of Disease	Time A.M. P.M.	Pulse per Minute	Respirations per Minute	Motions per 24 hours	
	PM 10	70	28		
	AM 2	68	24		
2	AM 6	50	24		
	AM 10	50	24		
	PM 2	60	24		
	PM 6	70	28		
	PM 10	86	26		
	AM 2	68	24		
3	AM 6	50	24		
	AM 10	70	24		
	PM 2	86	28		
	PM 6	80	28		
	PM 10	54	28		
	AM 2	60	36		
4	AM 6	70	26		
	AM 10	82	24		
	PM 2	70	26		
	PM 6	70	50		
	PM 10	64	36		
	AM 2				Sleeping
5	AM 6	66	36		
	AM 10	80	34		
	PM 2	86	32		
	PM 6	68	36		
	PM 10	78	32		
	AM 2	70	32		
6	AM 6	76	30		
	AM 10	88	32	●	
	PM 2	90	30	●	
	PM 6	80	32		
	PM 10	92	32		
	AM 2				Sleeping
7	AM 6	72	32		
	AM 10	90	30		
	PM 2	92	30	●	
	PM 6	86	34		
	PM 10	76	36		
	AM 2	70	30		
8	AM 6	.	-		Sleeping
	AM 10	88	36		
	PM 2	84	34		
	PM 6	80	36	●	
	PM 10	74	28		
	AM 2	76	26		
9	AM 6	90	26		
	AM 10	80	48		
	PM 2	72	46		
	PM 6	74	34		
	PM 10	70	26		
	AM 2	70	26		
10	AM 6	72	30		
	AM 10	88	44		
	PM 2	86	36		
	PM 6	62	34		
	PM 10	76	26		
	AM 2	70	24		
11	AM 6	70	24		
	AM 10	90	40	●	
	PM 2	72	32		
	PM 6	100	28		
	PM 10	72	26		
	AM 2	72	24		

(1002.) W9043—1195. 499,500. 1/15. K. & K. Forms/B. 181/3.

Signature ________________ In charge of case.

CLINICAL CHART.

(*To be attached to Case Sheet.*)

Army Form B. 181.

Corps 21st Canadians — Military Hospital Temple Rd.

No. 1087046 — Rank and Name Pte Griggs. — Age 29 — Service 1/6/12 F.B. 3/12.

Disease _____ — Date of admission 11-2-18 — Date of discharge _____ — Result _____

Days of Disease	12		13			14			15			16			17			18			19			20			21			22
Temperature Fahrenheit (Time A.M. P.M.)	10 2	6 10	2 6	10 2	6 10	2 6	10 2	6 10	2 6	10 2	6 10	2 6	10 2	6 10	2 6	10 2	6 10	2 6	10 2	6 10	2 6	10 2	6 10	2 6	10 2	6 10	2 6	10 2	6 10	2 6	10 2
Pulse per Minute	76	74 80	76	80 80	82 72	72 72	92 88	82 74	72 74	76 70		80	84	88 86	84 80		86 76	100 88	87 84	74 92	98 98	96 72	78 88	80		78 72	80		86 82	72 80	84 68	70	78 76	65
Respirations per Minute	24	34 40		30 40	42 30	28 28	36 42	38 34	32 32	30 32		26	28	26 32	36 28		26 28	32 32	30 30	30 24	32 28	24 32	26 32	30		30 32			34 30	32 36	32 32	32 24		24 24	24
Motions per 24 hours	•								•					•			•				•			•			•			•				

Signature _____ In charge of case.

(1002.) W9043—1195. 499,500. 1/15. K. & K. Forms/B. 181/3.

CLINICAL CHART.

(To be attached to Case Sheet.)

Army Form B. 181.

Corps 21st Canadians. Military Hospital Temple Road.

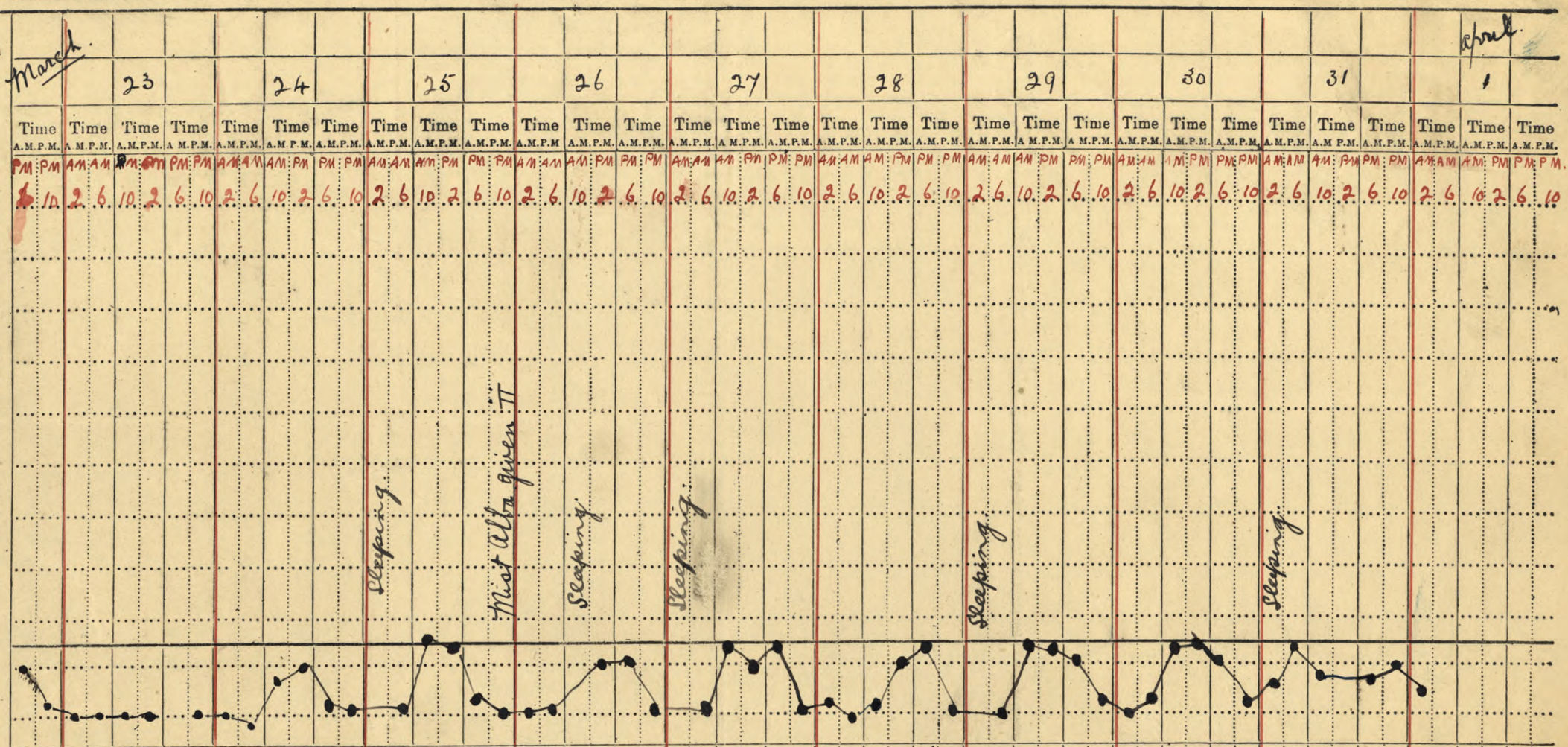
No. 1087046 Rank and Name Pte Griggs. Age 29. Service 1 6/12. F.S. 3/12.

Disease _____ Date of admission 11-2-18 Date of discharge _____ Result _____

Dates of Observation: March / April

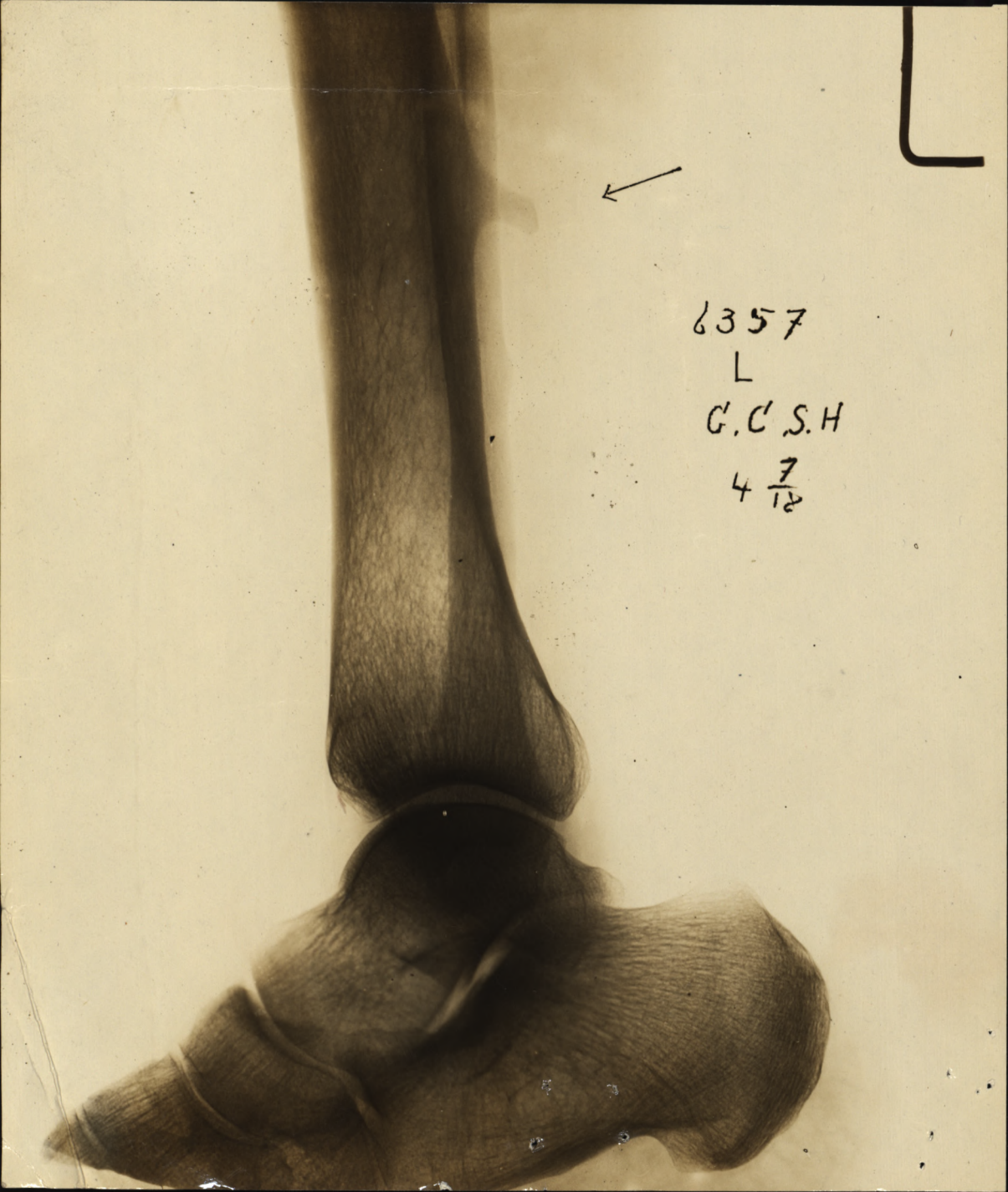
Days of Disease: 23, 24, 25, 26, 27, 28, 29, 30, 31, 1

Temperature Fahrenheit — Pulse per Minute — Respirations per Minute — Motions per 24 Hours



Signature _____ In charge of case.

(1002.) W9043—1195. 499,500. 1/15. K. & K. Forms/B. 181/3.


6357
L
G.C.S.H
4 7/12

6354
Griggs
1084046

GRANVILLE CANADIAN
SPECIAL HOSPITAL,

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

M

R.L.

1. No. 1087046.

2 Rank. Pte.

3. Name. GRIGGS Joh William.

4. Unit. 252nd. Bn. (#2.D.D.)

5 Date of Discharge FEB 8 1919 Place TORONTO

6 Reason for Discharge " Medically Unfit."

7. Authority. #2.D.D. Feb.8th.1919. Pt.11#37.

8. Proposed Residence after Discharge

Little Britain. 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.?

Pte John William Griggs

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place TORONTO

Date FEB 8 1919

Signature

O. C. Discharge Depot No. 2 Military District

(O. C. Discharging Unit.)

M.F.B. 218a—300M.-11-18—1772-39-113.

Noted Nelet 14-3-19 Km

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

NEURALIA
Sailed Sept. 20th
Arrived Oct 1st 1918

This space to be left blank for the Chelsea Number.

Army Form B. 268.

Proceedings on Discharge.

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

No. 1087046 Army Rank Private

Name Griffs John William
(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)

Corps Eastern Ontario Regt

Battalion, Battery, Company, Depôt, &c. 2nd Bn. 6th Res.
(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)

Date of discharge 3.2.19

Place of discharge Canada

1. *Description at the time of discharge.*

Age _____ years _____ months

Height _____ feet _____ inches

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

Complexion _____

Eyes _____

Hair _____

Trade _____

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

Descriptive marks.

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

2. The above-named man is discharged in consequence of being no longer fit for war service under N.R.O. 1912 Para 392. Sec 16

Passed 17-12-34

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

To be filled in on the soldier quitting the Colours.

3. Military character :—

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

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

Initials of Commanding Officer.

Army Form B. 2088 has been issued to* _____

* Strike out if not applicable.

D. D. & L., London, E.C.
A4502 Wt. W17176 M291 500,000 2/16 Sch. 39 Forms B. 268 40

[OVER.

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

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

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

6. Campaigns, Medals and Decorations

_____
_____
_____
_____
_____

Certificate of education ..... _____

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

(Place) _____ _____

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

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

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

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

(*Date*) _____ _____ (*Signature of Witness.*)

(When a soldier is absent through illness or any other cause, and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned should be attached here.)

9. *Additional certificate in the case of a soldier who takes his discharge at his own request.*

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

_____ (*Signature of Soldier.*)

10. *Statement of service.*

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

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

Total ... _____ „ _____ „

11. *Confirmation of discharge.*

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

(Place) _____

Signature _____

(Date) _____

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

RESERVATIONS REFERRED TO AT PARA. 8.

(To be signed by the soldier. When there are none, it is to be so stated and signed by the soldier.)

LIST OF DISCHARGE DOCUMENTS.

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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