

DEC - 9 1915

109th OVERSEAS BATTALION, C. E. F.

ATTESTATION PAPER.

No. 26022

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

ORIGINAL

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? *Hughes*
- 1a. What are your Christian names? *William*
- 1b. What is your present address? *Kinmount*
2. In what Town, Township or Parish, and in what Country were you born? *Township of Somerville*
3. What is the name of your next-of-kin? *Annie Laura Hughes*
4. What is the address of your next-of-kin? *Kinmount*
- 4a. What is the relationship of your next-of-kin? *wife Ontario*
5. What is the date of your birth? *May 20, 1875*
6. What is your Trade or Calling? *Farmer*
7. Are you married? *yes*
8. Are you willing to be vaccinated or re-vaccinated and inoculated? *yes*
9. Do you now belong to the Active Militia? *yes*
10. Have you ever served in any Military Force? *3 years 45 Victoria Reg.*  
If so, state particulars of former Service.
11. Do you understand the nature and terms of your engagement? *yes*
12. Are you willing to be attested to serve in the }  
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? } *yes*

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *William Hughes*, 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.

*W. Hughes* (Signature of Recruit)

Date *DEC - 9 1915* 1915 *W. Markham* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *William Hughes*, 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.

*W. Hughes* (Signature of Recruit)

Date *DEC - 9 1915* 1915 *W. Markham* (Signature of Witness)

CERTIFICATE OF MAGISTRATE.

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

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

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

before me, at *Kinmount* this *DEC - 9 1915* day of *1915*

*E. A. White* (Signature of Justice)



# Description of *William Hughes* on Enlistment.

Apparent Age 45 years ..... months.  
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

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

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

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

Chest measurement { Girth when fully expanded ..... 37 ins.  
 Range of expansion ..... 4 ins.

Complexion Fair

Eyes Grey

Hair Turning Grey

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

*Birth mark resembling vaccination scar on right arm insertion of deltoid.*  
*Mark likely from chicken pox on left shoulder about caraco-clavicular articulation*

## 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 DEC - 9 1915 191

Place Keimount

*McCluskey*  
 109th Overseas 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.

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

*[Signature]* Lt. Col. (Signature of Officer)

Date DEC - 9 1915 191

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



- Proceedings of Court of Inquiry or on men reported Missing on Active Service.....
- Attestation Papers..... *23*
- Declaration of change of name.....
- Authority for special enlistments.....
- Documents of re-enlisted men.....
- Regimental Conduct Sheet.....
- Compulsory Stoppages.....
- Casualty Forms..... *1*
- Proceedings on discharge..... *1*
- Corps History Sheet.....
- Date and No. of Deposit Receipt for Purchase Money and Amount.....
- Parchment Certificate.....
- Medical Report for Invalids..... *1*
- Medical History Sheet..... *2*
- Proceedings of Regt. Court Martial.....
- Copies of Convictions by Civil Power.....
- Company Conduct Sheet.....
- Clothing Transfer Certificate..... *1*
- Inventory of Kit.....
- Last Pay Certificate.....

*a. F. B-122 1*  
*m 91267*  
*enlist*  
*Paycard*  
*11122*

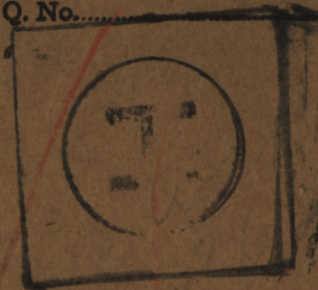
## DISCHARGE DOCUMENTS

Name *Hughes William*  
 Regt. No. *726022* Rank *Pte*  
 Corps *109<sup>th</sup> O/S Bn. C. E. F.*

**38703**

R. O. No. ....

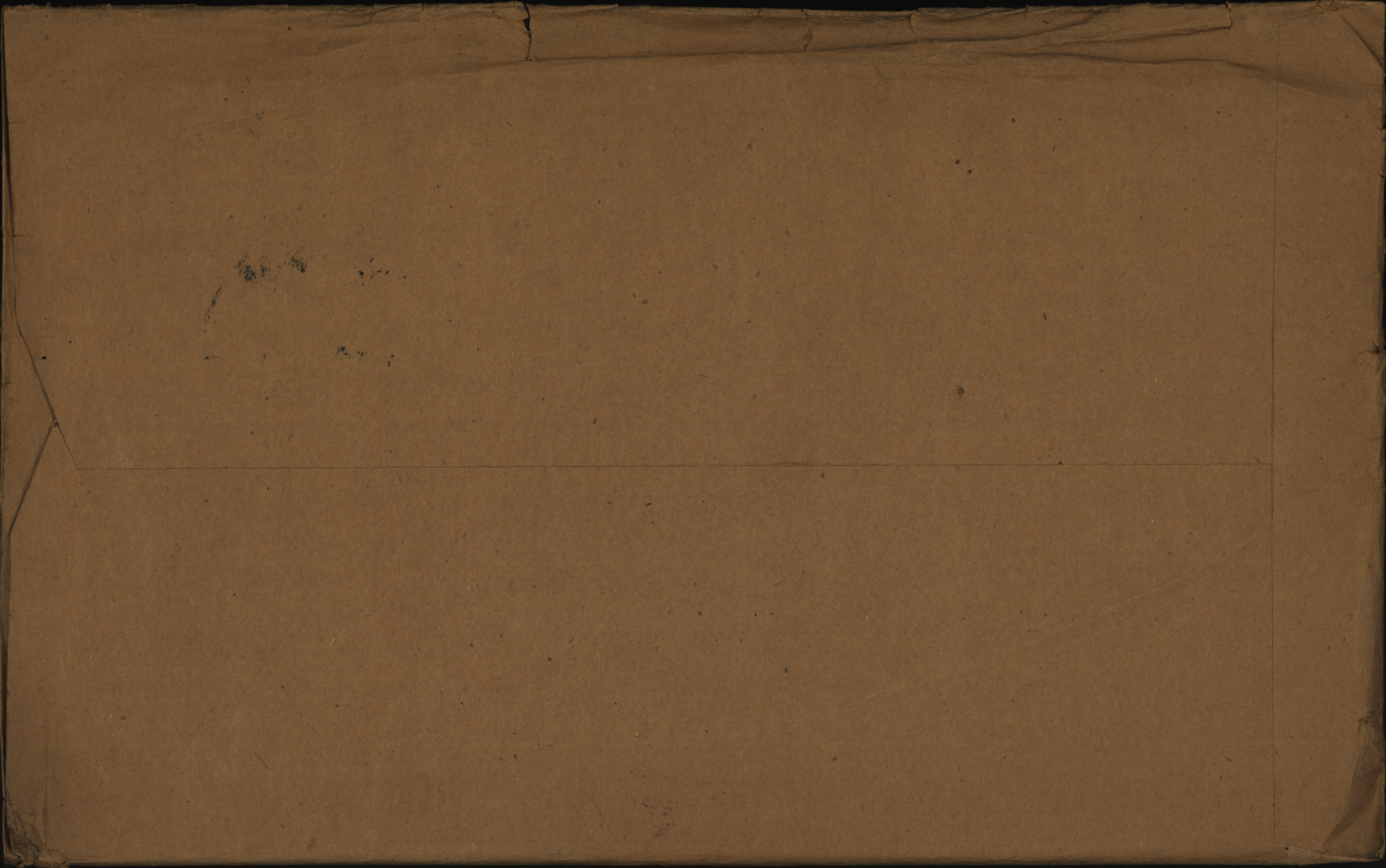
H. Q. No. ....



No longer physically fit for War Service









com. *gw*

Number 726022

Rank Pte

Surname HUGHES

Christian Name William

Units 109 U. Bn. Can. Inf. Theatre of War LING

Date of Service 31.7.16

Remarks

Latest Address 1 Kinmount

Ont.

roll No.

*a Page 3606*

200m. 2 21. M.



Next of kin \_\_\_\_\_

Address on leave \_\_\_\_\_

Address on discharge \_\_\_\_\_

Transportation issued  Yes  No Date \_\_\_\_\_

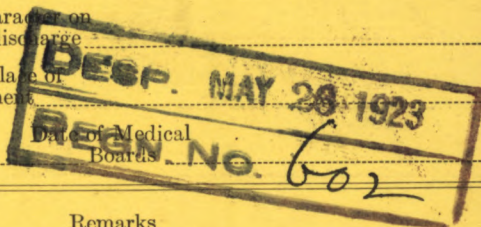
Character on discharge \_\_\_\_\_

Previous occupation \_\_\_\_\_

Date and place of enlistment \_\_\_\_\_

Diagnosis \_\_\_\_\_

Date of Medical Board \_\_\_\_\_



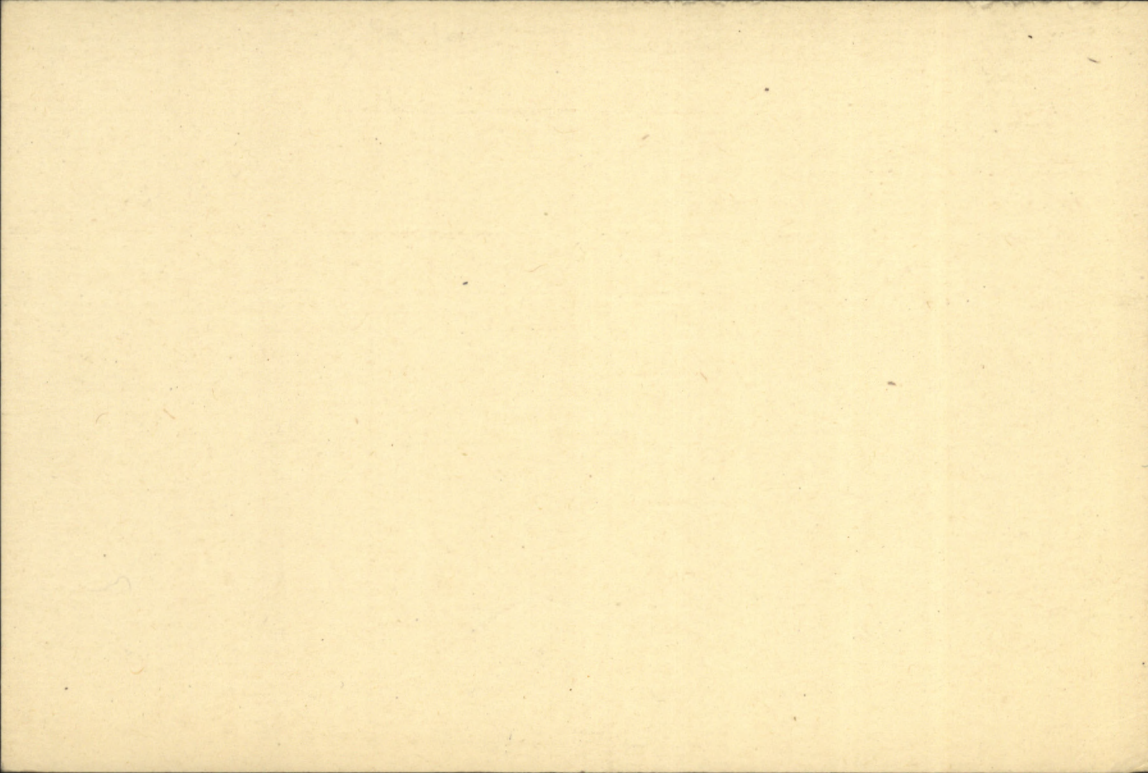
Date	Remarks

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











NAME

Hughes  
Oto.

William

REG'TL NO.

736022

RANK AND CORPS

H. Q. FILE NO. 649-

CABLE

FOLLOWS

No.

DATE

NATURE OF CASUALTY

No.

FOLLOWS

9328

9-4-17

Sailed from Liverpool for  
Canada per the troopship  
"2810" on the 4th. April.  
"Debility"



**LIST No**

**HOSPITAL**

**DATE OF  
ADMISSION**

**REMARKS**





SURNAME.

*Hughes*

CARD NO.

✓

CHRISTIAN NAMES

*William*

FOLL  
*S.O.S. Disc. 12/5/17 5.*  
*46.*

REGL. No.

*726022*

RANK

*Pte*

UNIT

*109<sup>th</sup>*

*Bn.*

FORMER CORPS

*45 Victoria Regiment (3 yrs)*

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

*Hughes Mrs Annie Laurie*

RELATIONSHIP TO SOLDIER

*Wife*

ADDRESS

*Kinnmount  
Ont.*

COUNTRY OF BIRTH

*Canada. Sp. Somerville, Ont.*

DATE

*May 20<sup>th</sup> 1875*

PLACE OF ATTESTATION

*Kinnmount, Ont.*

DATE

*Dec. 9<sup>th</sup> 1916*

*Sailed from Halifax*  
*488*  
*17.*



*per S.S. Olympic 23/7/16*  
*488*  
*17.*  
*R/C 20/4/17*



~~Returned to Canada per~~ ~~Proof ship~~ <sup>380</sup> 4/4/17. auth  
MARRIED *Yes* SINGLE WIDOWER *J. 358.*

TRADE OR CALLING *Farmer* RELIGION *Church of Eng.*  
DESCRIPTION.

APPARENT AGE *45* YEARS MONTHS  
HEIGHT *5* FEET *10* INCHES  
CHEST MEASUREMENT *37* INCHES EXPANSION *4* INCHES

COMPLEXION *Fair* EYES *Grey* HAIR *Turning Grey*

DISTINGUISHING MARKS *Bird mark resembling vaccination scar on right arm above insertion of deltoid. Chicken pox mark L. shoulder*

MEDICAL EXAMINATION. PLACE *Kimnount Ont* DATE *Dec. 9th 1915*

*Present Address Kimnount. Ont.*



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

# Casualty Form—Active Service.

M. F. W.  
150M. 10-15.  
H.Q. 1772-39-320.

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

Regimental No. 426022 Rank Private Name Hughes William

Enlisted (a) 9-12-15 Terms of Service (a) D of W. Service reckons from (a) 9-12-15

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

Extended \_\_\_\_\_ Re-engaged \_\_\_\_\_ Qualification (b) Farmer

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
			<u>Halifax</u>	<u>24.7.16</u>	
			<u>Liverpool</u>	<u>31.7.16</u>	
<u>2/12/16</u>	<u>OC 109</u>	<del><u>transferred to 124th Bn.</u></del>	<u>Witley</u>	<u>2/12/16</u>	<u>Do pt II No 43.</u>  <del><u>Adjutant</u></del> <u>Capt.</u> <u>ADJUTANT</u> <u>109th Overseas Battalion, C. E. F.</u>
<u>29.9.16</u>	<u>OC 109</u>	<u>Trans to C.C.A.C.</u>	<u>Bramshot</u>	<u>29.9.16</u>	<del><u>Adjutant</u></del> <u>Capt.</u> <u>ADJUTANT</u> <u>109th Overseas Battalion, C. E. F.</u>
<u>18-1-17</u>	<u>124th Bn.</u>	<u>Att. ch. d to 105th. Bn.</u>	<u>Witley Camp</u>	<u>18-1-17</u>	<u>Part II Order</u> <u>18</u> <u>Re-assignment</u> <u>Capt. Adj. P.T.O.</u> <u>124th. Bn. C. E. F.</u>

(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.



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				
05.10.17 Br.	Transferred to Labour Br. Bramshott.		Witley Camp		B.O.O. II <i>Gellman Hill Capt</i> ADJUTANT 104th "OVERSEAS" BATTN. C.E.F.
17.2.17	Reattached to Garr. S.B. Bramshott.			11.2.17	Part II D.O. Captain. O/C C.C.A.C. SUB-OFFICE, BRAMSHOTT.

*mar 22/17*

TAKEN ON STRENGTH C.D.D, BUXTON Pt. 11 ORDER No. 69

*Wm Buxton*  
Lieut for O/C  
C.A.D.

ENTERED FOR CANADA FROM LIVERPOOL

3 - APR 1917

*Wm Buxton*  
Lieut for O/C  
C.A.D.



726022

RCy

# MEDICAL HISTORY SHEET ORIGINAL

Surname Hughes Christian Name William

Examined { on 16<sup>th</sup> day of December 1915  
at Lindsay  
Birthplace { City or Town Sumnerville  
County Ontario

Approved by J. McCulloch Capt  
Medical Officer  
Rank 109<sup>th</sup> Overseas Battalion, C.M.C.

Apparent age 40 years  
Trade or occupation Farmer  
Height 5 Feet 9 1/2 Inches.  
Weight 135 Lbs.  
Chest measurement { Minimum 33 inches.  
Maximum expansion 36 inches.

Discharged: Owing to having been declared by Medical Board as fit for permanent duty only and no suitable employment such duty available, although fit for employment in civil life.  
EXAMINED FOR RE-EMPLOYMENT, for Col. for Col. Director of Recruiting and Organization, S.S.F.  
M.O. M.O. M.O. M.O. M.O. M.O. M.O.

Physical development Fair  
Small-Pox Marks None  
Vaccination Marks { Arm Right None Left one  
Number one

When Vaccinated last January 24<sup>th</sup> 1916 24-1-16. Good J. McCulloch M.O.  
(a) Marks indicating congenital peculiarities or previous disease None M.O. M.O.

(b) Slight defects but not sufficient to cause rejection None  
9<sup>th</sup>  
Enlisted on 16 day of December 1915 at Keenmount

ANTI-TYPHOID INOCULATIONS, ETC.  
26-4-16 Good J. McCulloch M.O.  
4-5-16 Good J. McCulloch M.O.  
10-5-16 Good J. McCulloch M.O.

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>109<sup>th</sup> Batt C.M.C.</u>	<u>726022</u>		<u>9<sup>th</sup> 16/12/15</u>
Transferred to..				

## EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>Bramshott</u>	<u>28/8/16</u>	<u>over age.</u>	<u>Per Board</u>
Approved <u>Bramshott</u>	<u>28 AUG 1916</u>		<u>J. Sturges</u> PRESIDENT, MEDICAL BOARD, BRAMSHOTT.
<u>Major,</u>			
<u>D.A.D.M.S. for A.D.M.S.,</u>			
<u>Canadian Troops, Bramshott Camp</u>			

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







# EXAMINATION BY STANDING MEDICAL BOARD, BRAMSHOTT.

28 AUG 1916 1916.

No. 726022 Unit 109th Battalion Rank Pte

Name Hughes W. Age 44

Examination held at Bramshott, Hants.

**DISABILITY.** Over age

Overseas—Local.  
(scratch one out)

Present Condition: This man gives his age as 44 but looks older.  
He states that on marching he has great difficulty with breathing.

Board recommends:

1. Fit for Duty.
2. Fit for duty after.....weeks physical training.
3. Fit for Base duty.....weeks.
4. Fit for Permanent Base Duty. **Yes**
5. Discharge.

Signatures:

Members {  
*R. Stewart Maj* Pres.  
*W. H. ... Maj*  
*W. ... Capt*

Approved.

Bramshott 29 AUG 1916 1916.

*W. ...* Major.  
D.A.D.M.S. for A.D.M.S. & for G.O.C.  
Canadian Troops, Bramshott.



EXAMINATION

STANDING MEDICAL BOARD, BRANSHOTT

BY

THE BOARD OF MEDICAL EXAMINERS

AND THE BOARD OF SURGEONS

OF THE COUNTY OF SUSSEX

IN THE YEAR 1881

AND 1882

AND 1883

AND 1884

AND 1885

AND 1886

AND 1887

AND 1888

AND 1889

AND 1890

AND 1891

AND 1892

AND 1893

AND 1894

AND 1895

AND 1896

AND 1897

AND 1898

AND 1899

AND 1900

AND 1901

AND 1902

AND 1903

2



121678

# EXAMINATION BY STANDING MEDICAL BOARD, BRAMSHOTT.

No. 726022 Rank plz Name Hughes, William  
Local Unit 109<sup>th</sup> Overseas Unit \_\_\_\_\_ Age 50

Examination held at Bramshott, Hants.

**DISABILITY.**

*own eye*

Overseas—Local.  
(scratch one out)

PRESENT CONDITION.

*Looks more than eye  
strain.*

Board recommends:

*Class C. (ii)*

1. Fit for Duty.
2. Fit for duty after \_\_\_\_\_ weeks physical training.
3. Fit for Base duty \_\_\_\_\_ weeks.
4. Fit for Permanent Base Duty.
5. Discharge.

Signatures:

Members { *C. E. Cooper* <sup>*Pres.*</sup>  
*H. Mackenzie* Capt.  
*H. ...* Capt.

Approved.

Bramshott Nov. 28 - 1916.

*W. Stewart* <sup>*for A.D.M.S.*</sup>  
Canadian Troops, Bramshott.



STANDING MEDICAL BOARD, BRAMSHOTT  
BY  
EXAMINATION

Name: \_\_\_\_\_ Rank: \_\_\_\_\_

Local: \_\_\_\_\_ Overseas: \_\_\_\_\_

Examination held at Bramshott Camp

DISABILITY

Overseas: \_\_\_\_\_  
Local: \_\_\_\_\_

PRESENT CONDITION

*Handwritten marks*

*Faint handwritten notes*

1. In the last 12 months...
2. In the last 12 months...
3. In the last 12 months...
4. In the last 12 months...
5. Discharge...

Signature: \_\_\_\_\_  
Name: \_\_\_\_\_

Approved: \_\_\_\_\_

Signature: \_\_\_\_\_

for A.D.M.S.  
Commanding Troop, Bramshott



**Casualty Form—Active Service.**

Regiment or Corps.....  
 Rank *Plt* Surname *Aughers* Christian Name *Wm.*  
 Religion..... Age on Enlistment..... years..... months  
 Enlisted (a)..... Terms of Service (a)..... Service reckons from (a).....  
 Date of promotion to present rank..... Date of appointment to lance rank.....  
 Extended {.....} Re-engaged {.....} Qualification (b).....  
 or Corps Trade and Rate.....  
 Occupation..... Signature of Officer.....

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A.36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents
Date	From whom received				
		Embarked ...			
		Disembarked...			
<i>8-4-14</i>	<i>E.O.R.D.</i>	<i>L.O.S. on form at C.D.D. Buxton pending embarkation to Canada for discharge</i>	<i>Seaford.</i>	<i>3/4/14</i>	<i>P.B. 2027</i>
<i>8-4-14</i>	<i>E.O.R.D.</i>	<i>ceases to be shown on Command at C.D.D. Buxton and S.O.S. on embarkation to Canada</i>			

*Entered  
R. 6 13h  
20th 14*

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.  
 (b) Signaller. Shoeing-Smith, & Co. (6228) W. 13863/M1477 2,400,000 1/17 McA & W Ltd Forms B./103/4 (E. 886)







**DUPLICATE**

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

INSTRUCTIONS.

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

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

(2) Regimental Number..... 726022

(3) Full Name of Soldier..... William Hughes

(4) Place of Birth..... Sumnerville Twp Ont. Canada

(5) Are you married, or not?..... yes

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

(b) Present Postal Address..... Kinnmount Ontario

(7) Are you a widower?..... no

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

If so, give number of boys and girls..... 1 girl

Also their names and ages..... Eliza Pearl Hughes 8 months



(9) Is your Father alive? *no*

If so, state name and address

(10) Is your Mother alive? *yes*

If so, state name and address *Eliza Hughes*

*Burnt River*

(11) If your Mother is a widow *yes*

Are you her sole support, or not? *no*

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

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

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

15) Are you insured? *yes*

If so, in what Company? *no*

Have you made arrangements for payment of your Insurance premium?

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

Date **JUL 11 1916**

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



# CERTIFICATE re DISCHARGE DOCUMENTS.

Reg'tl. No. 726022

Name in full Hughes, William Rank Pte

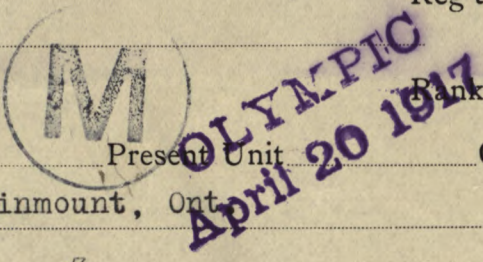
Reserve Unit East.Ont. Present Unit C.C.A.C.

Place of Residence in Canada Kinmount, Ont.

Military District 3

Classification of Disability 1

(or) Reason for Discharge Permanent Base Duty



109<sup>a</sup>

Commandant C.D.D. will assume responsibility by his initial in proper column that documents listed below have been completed, checked, and enclosed.

If original documents, initial in column on the left.

If original not available, initial in column on the right.

Initials of Commandant C.D.D. (Originals).	List of Documents required to complete Discharge, checked and enclosed.	Initials of Commandant (Originals not available).
<i>P.P.H.</i>	Proceedings on Discharge. (B. 268.) (Must be Original)	
<i>P.P.H.</i>	Proceedings of Medical Board. (B. 179.) (Must be Original)	<i>P.P.H.</i>
<i>P.P.H.</i>	Medical History Sheet. (A.F.B. 178.) (Must be Original)	
<i>P.P.H.</i>	Last Pay Certificate. (Must be Original)	
	Certificate of Discharge. (A.F.B. 2079.)	
<i>P.P.H.</i>	Casualty Form. (A.F.B. 103.)	
<i>P.P.H.</i>	Attestation Paper. (M.F.W. 54.)	
<i>P.P.H.</i>	Field Conduct Sheet. (A.F.B. 122.)	
	Company Conduct Sheet. (A.F.B. 121.)	
	Reg'tl. Conduct Sheet. (A.F.B. 120.)	
<i>P.P.H.</i>	Inventory of Kit. (W. 3068.)	
<i>P.P.H.</i>	Declaration from Dischargee.	

Commanding Lieut.-Col.  
 (Signature) Canadian Discharge  
COMMANDANT. Depôt.



**DISCHARGE DOCUMENTS**

**OFFICIAL**  
**APRIL 20 1914**

CCAC

Name in full \_\_\_\_\_  
 Reserve Unit \_\_\_\_\_  
 Place of Residence in Canada \_\_\_\_\_  
 Military District \_\_\_\_\_  
 Classification of Disability \_\_\_\_\_  
 (or) Reason for Discharge \_\_\_\_\_  
 (See also \_\_\_\_\_)

Commandant C.D.D. will assume responsibility for the truth in every column that is documented below and  
 if original documents listed in column are not available, they should be checked and checked.  
 If original documents listed in column are not available, they should be checked and checked.

Original	List of Documents to be checked and checked	Number of Documents
1000	Proceedings on Discharge (B. 200)	
1000	Proceedings of Medical Board (B. 100)	
1000	Medical History Sheet (A.R.B. 100)	
1000	Last Pay Certificate	
1000	Certificate of Discharge (A.R.B. 100)	
1000	Casualty Report (A.R.B. 100)	
1000	Witness's Report (M.P.W. 100)	
1000	Field Command Sheet (A.R.B. 100)	
1000	Company Command Sheet (A.R.B. 100)	
1000	Field Command Sheet (A.R.B. 100)	
1000	Company Command Sheet (A.R.B. 100)	
1000	Field Command Sheet (A.R.B. 100)	
1000	Company Command Sheet (A.R.B. 100)	
1000	Field Command Sheet (A.R.B. 100)	
1000	Company Command Sheet (A.R.B. 100)	

Commandant \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_



TLH. Rank Name HUGHES, William. Reg'l No. 726022.  
 Unit 109th. Bn. If in perm. Corps, } Married or Single Married.  
 What Unit? }  
 Place and Date of Enlistment Kinmout, Decr. 9th. 1915. Place of Birth Township of Somerville,  
 Name and Address, Next-of-Kin Annie Laura Hughes, Kinmount, Ontario. Relationship Wife.

Assigned Pay Monthly \$ Payable to Relationship  
 Separation Allowance \$ Payable to Relationship

ccac  
 N/E. R.B. No. 3933  
 File R.L.  
 Category Can. Mill

Discharge, Date and Place Reason Character

H. W. & V., Ltd. - 7165-16.

16710

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS. Taken from Official Documents.
Date.	From whom received.				
Arrived in England per H. M. T. 2810 31-7-16					
8-10-16	109 <sup>th</sup> Bn	S.O.S. to C.C.A.C.	Braunschott	29-9-16	Pt II DO. 427 C.C.A.C. 30-9-16
8-10-16	Do	All <sup>th</sup> P.B.D. for Pay, Rations 2 months. Discipline & Clothing	Do	30-9-16	Pt II. DO. 282 Pt II. DO. 427 30-9-16
30-9-16	C.C.A.C.	T.O.S. + Shewn <sup>109<sup>th</sup></sup> for P.B.D etc	Folkestone	29-9-16	Pt II 0427
8-12-16	124 <sup>th</sup> Bn.	Case at 109 Bn. & at 124 Bn.	Witley	8-12-16	- 343
9-12-16	124 <sup>th</sup>	Attached for all purposes	Witley	8-12-16	- 265
18-1-17	"	Case to be attached to 105 <sup>th</sup> Bn.	"	18-1-17	- 18
21-1-17	105 <sup>th</sup> Bn	Attached from 124 <sup>th</sup> Bn for P.B.D.	"	18-1-17	- 21
26-1-17	"	Case to be attached to 104 <sup>th</sup>	"	26-1-17	- 26
3-2-17	102 <sup>th</sup>	Attached from 10 <sup>th</sup> Bn	"	27-1-17	- 32



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.				
12 2 17	G D Bn	att to G D Bn for B D R Q 6 P	B'shott	11 2 17	P <sup>1</sup> / <sub>2</sub> D o 37
24 2 17	104 Bn.	Ceases att. 104 Bn. & att. G D Bn	Witley	11. 2. 17	- 30
21. 3. 17	G. D Bn.	Ceases att. G. D Bn on proct to CDD Buxton for Dis. to Canada	B'shott	21. 3 17	- 69
4-4-17	CDD	SOS to Campfordis M.U.	Buxton	3-4-17	- 80
8-4-17	SORD	To S. + m. CDD at CDD } Buxton pending Dis } to Canada	Seaford	3-4-17	- 27
8-4-17	SORD	Ceases to be shown on Com CDD SOS on diabolian	Seaford	3-4-17	- 27
	Disc Depot	Finally Discharged	Ouelles.	12 5 17.	non Roll 256 Kinnvount. Ont.



# POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

Name **Hughes, William**  
Surname

Christian Name

09129-W-3

Regimental Number **726022**

Rank **Pte.**

Address (in full) **Kinmount, Ont.**

Unit **C.C.A.C.**

Original Unit

District where paid **Ottawa**

Date of Discharge **12.5.17.**

P. D. P. Filing Number **4 H10.**

Rates:—Regimental pay \$ **1.00** per diem: Field Allowance \$ **.10** per diem. Separation Allowance \$ **20.00** per month.

L. L. 22573—M. & D. 800P.

Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Over-payments to be Recovered	Total Amount Paid
	Cheque No. A	Date	Amount 30 days	Cheque No. B	Date	Amount 30 days	Cheque No. C	Date	Amount 31 days		
16010	1920	2/8/17	53 00	1963	4/9/17	53 00	1939	5/10/17	54 10		16010

Remarks:

M. F. W. 127.  
 50M-617.  
 1772 39-1140.



File No. 09129-W-24

**WAR SERVICE GRATUITY.**

Register No. H-2248

INV 29<sup>12</sup> 1918

Reg. No. 726022 *Pto*

Dependent Annice L. Hughes wife

Name Hughes Annice *W.S.G. File No.*

Address Same

Address Reimbursement

Forward ..... days at \$ ..... per day \$  
S. A. .... months at \$ ..... per mo. \$

Less P. D. P. Credited ent.

Less further debit balance \$ .....  
Net due paid as below \$ .....

*RW 104  
5/20*

Pay Soldier \$ 119 90

Pay Dependent \$ 120 00

*May Raymond*  
*Shoarwe*

Days 177 Rate 100 Due 400 00

Less P.D.P. credited 160 10

Clerk Shoarwe

Less further Dr. Bal. or overpayment.

Net 239-90

Date	Ck. Order	Ck. No.	Amount	Remarks	Date	Ck. Order	Ck. No.	Amount
<u>31<sup>12</sup> 19</u>	<u>50063</u>	<u>546727</u>	<u>119 90</u>	<u>2 1/2</u>	<u>31<sup>12</sup> 19</u>	<u>50064</u>	<u>546728</u>	<u>120 00</u>
2					2			
3					3			
4					4			
5					5			
6					6			

GEN'L AUDITOR  
Posting checked by  
31<sup>12</sup> 19  
Date.....

*R. Shoarwe*  
30<sup>12</sup> 19











1-3-16

MILITIA AND DEFENCE

M. F. W. 11.  
20m.—11-15.  
1772-59-818.SEPARATION ALLOWANCE 46 83Name *Annie L. Hughes.*Name of Soldier *Hughes, William*Address *Kinnmount  
Ont*Regtl. No. *726022*Rank *Pte*Corps *109 Batt*

Relation to Soldier

To what Corps belonging

wife, child or mother

} *Wife*

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		<i>L 28477</i>	<i>20</i>	<i>20</i>

COPIED  
FOR  
3  
CASUALTIES.

ACCOUNT CLOSED  
DATE..... PER.....  
*W*



1000 X



# MILITIA AND DEFENCE SEPARATION ALLOWANCE

M. F. W. 11a.  
60m.-12-15.  
1772-39-818.

OVERSEAS CONTINGENTS

Sheet No. 2.

L. L. Job 89002.-Req. 6213.

*Annie L. Hughes*

*Wife*  
PAYMENTS.

Name of Soldier *Hughes William*

*726 022*

*Rta*

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916	<i>21143</i>	<i>20</i>	<i>20</i>
May		<i>X 695</i>	<i>20</i>	<i>20</i>
June		<i>R 7426</i>	<i>20</i>	<i>20</i>
July		<i>U 9428</i>	<i>20</i>	<i>20</i>
Aug.		<i>Y 12499</i>	<i>20</i>	<i>20</i>
Sept.		<i>0 15457</i>	<i>20</i>	<i>20</i>
Oct.		<i>8 19507</i>	<i>20</i>	<i>20</i>
Nov.		<i>X 22670</i>	<i>20</i>	<i>20</i>
Dec.		<i>X 25675</i>	<i>20</i>	<i>20</i>
Jan.	1917	<i>B 29765</i>	<i>20</i>	<i>20</i>
Feb.		<i>B 32569</i>	<i>20</i>	<i>20</i>
March		<i>B 35660</i>	<i>20</i>	<i>20</i>
April		<i>D 1601</i>	<i>20</i>	<i>20</i>
May		<i>A. 4888</i>	<i>8</i>	<i>mailed 28-5-17</i>
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

*280 a/c closed  
settled on no 2810-4-4-17  
20 G.I.X. P.T.B. 17-4-17*

*P.M.P. \$ 288  
24-7-17  
24-7-17*

*26/5/17 per Capt Cummonds  
letter 22/5/17 to pay to date of  
discharge*

**ACCOUNT CLOSED**  
DATE.....PER.....*W.*

*good as below*

~~8~~



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.				



MILITIA AND DEFENCE  
**ASSIGNED PAY**  
 OVERSEAS CONTINGENTS

219  
 M. F. W. 12.  
 50m.—4-16.  
 H. Q. 1772-39-819.

To Whom Mrs. Annie Laura Hughes By Whom Assigned Hughes Wm.

Address Kinnmount  
Ont

Regtl. No. 726022

Rank Pte.

Corps 109 Batt.

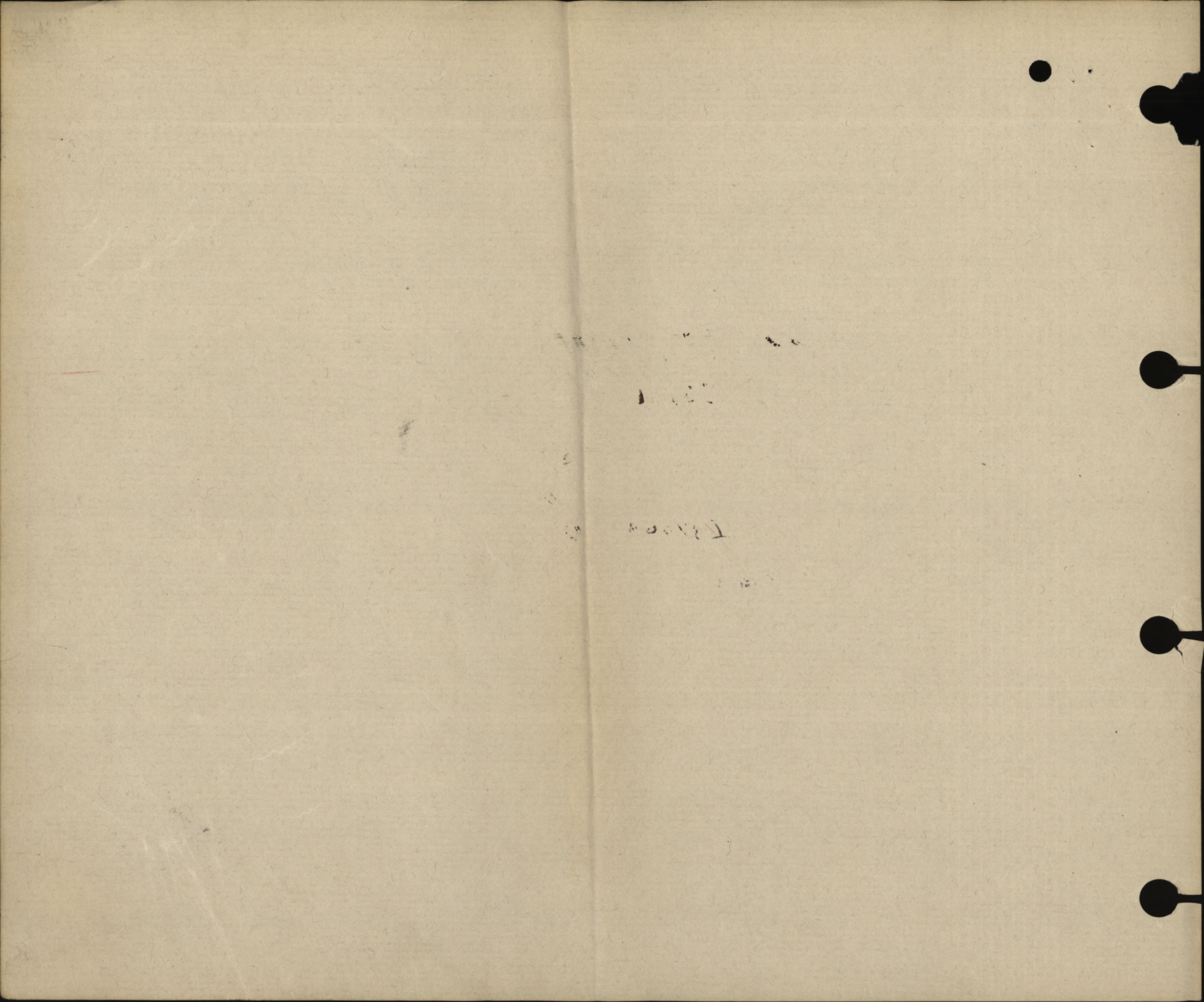
100 Batt

Rate \$ 15.00 **AUG 1 1916**  
2M 6<sup>9</sup>/<sub>16</sub> 2aB 18/10/16

**PAYMENTS**

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			<p><i>Disch to 6 ams. Stop 1/4/17</i>  <i>3M 24/3/17 add 3/5/17</i></p>
Sept.				
Oct.				
Nov.				
Dec.				<p><b>COPIED FOR 2 CASUALTIES.</b></p> <p><i>sp closed</i></p>
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				







MILITIA AND DEFENCE  
**ASSIGNED PAY**  
 OVERSEAS CONTINGENTS *Wife*  
**PAYMENTS.**

M. F. W. 12a. 220  
 50m.—4-16.  
 1772—39—819.

Sheet No. 2.

*Mrs. Annie Laura Hughes*

Name of Soldier *Hughes Wm.*

L. L. Job 310.—Req. 6574.

#726022

*"Alley" Plc. 109 Batt*

Month.	Year.	Cheque No.	Amt.	Remarks.
				<i>\$15.00</i>
				<b>AUG 1 1916</b>
April	1916			
May				
June				
July				
Aug.		<i>7 15301</i>	<i>15</i>	
Sept.		<i>8 17721</i>	<i>15</i>	
Oct.		<i>5 22865</i>	<i>15</i>	
Nov.		<i>3 26231</i>	<i>15</i>	
Dec.		<i>0 32374</i>	<i>15</i>	
Jan.	1917	<i>L 40045</i>	<i>15</i>	
Feb.		<i>L 45126</i>	<i>15</i>	
March		<i>I 37063</i>	<i>15</i>	
April		<i>8 2658</i>	<i>15</i>	<i>15 M</i>
May				<i>15 Ch. 2658 Cancelled</i>
June				<i>ap closed</i>
July				<i>Patd # 2810 4 4/14 staff.</i>
Aug.				<i>120<sup>00</sup> 7 x 12 4/14 staff</i>
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

*H70*

*Ch*

*P. D. P. 26/4/17. 03*

*15 M*  
*15 Ch. 2658 Cancelled*  
*ap closed*  
*Patd # 2810 4 4/14 staff.*  
*120<sup>00</sup> 7 x 12 4/14 staff*



MILITIA AND DEFENCE  
**ASSIGNED PAY**  
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier.....

PAYMENTS.

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











# Proceedings on Discharge.

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

No. 426022 Army Rank Private

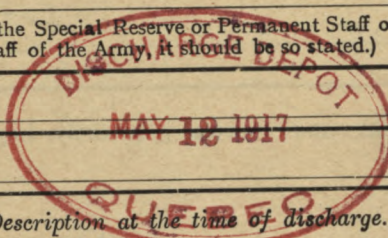
Name Dupres, William  
(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)

Corps O.C.A.O.

Battalion, Battery, Company, Depot, &c.  
(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)

Date of discharge \_\_\_\_\_

Place of discharge \_\_\_\_\_



1. Description at the time of discharge.

Age 48 years \_\_\_\_\_ months

Height 5 feet 8 inches

Chest measurement { girth when fully expanded \_\_\_\_\_ ins.  
range of expansion \_\_\_\_\_ ins.

Complexion Fair

Eyes Blue

Hair Brown

Trade Farmer

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

Descriptive marks.

3 Yacc marks on arm

(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 Para. 392, Sec. 16, K. R. & O. 1912

Being no longer physically fit for war service.

(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.)

3. Military character:— Good See A 71322 for O. C. Discharge Depot, Quebec.

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

To be filled in on the soldier quitting the Colours.

Lieut.-Col. Commanding Canadian Discharge Depot

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

Initials of Commanding Officer.

Army Form B. 2088 has been issued to\*

\* Strike out if not applicable.

*Handwritten signature and date: 1. 5. 17.*



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

*Local*

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) **CANADIAN DISCHARGE DEPOT**  
**30 MAR. 1917**  
(Date) **BUXTON**

Lieut.-Col.  
**Commanding Canadian Discharge Depot.**  
Commanding \_\_\_\_\_ Battn. \_\_\_\_\_

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) **DISCHARGE DEPOT**  
**APR 27 1917**  
(Date) **QUEBEC**

*Mr. Wilson* (Signature of Soldier.)  
*J. Luthbert* (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 **MAY 12 1917** (date)

(Place) **DISCHARGE DEPOT**  
**APR 27 1917**  
(Date) \_\_\_\_\_

*Guarrior Lt Col*  
**CAPT & ADJ.**  
Signature **for O. C. Discharge Depot Quebec**

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.)

None.

Mr. Hall



LIST OF DISCHARGE  
DOCUMENTS.

1. Proceedings on discharge.  
(Army Form B. 268.)
2. Proceedings on transfer to re-serve (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.



# Medical Report on an Invalid.

Station Erasm shoff

Orig. Unit. 109th

Date March 1st 1917.

1. Unit. Garrison Duty Battn.

5. Age last birthday 48

2. Regimental No. 726022.

6. Enlisted { on Dec, 9/15  
at Kinmount.

3. Rank Pte.

7. Former Trade {  
or Occupation { Farmer.

4. Name Hughes William.

## 8. Disability.

1 Debility.

2 Enlargement over right Sterno Clavicular.

## Statement of Case.

*Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.*

9. Date of origin of disability. 1 four or five years ago.  
2 July 1916 ( discovered)

10. Place of origin of disability: 1 Kinmount. Ont.  
2 On boat coming to England

11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.

1 He says, For last four or five years he has not felt able to carry on with hard work, haveing lost some flesh and not seeming as strong as he used to be.

2 He says, On the Boat coming over he was not able to sleep down below.

Had smothered feeling. The Doctor saw him and discovered the enlargement which was not so largethen. Had him sleep in hospital the remainder of the journey across.

Marching across from Whitley (8 miles ) with A pack on he became faint several times. The enlargement is more tender and he thinks A little larger since then.

Medical Board Nov. 28th C III

12. (a) Give your opinion as to the causation of the disability. 1 Senile  
2 Unknown.

(b) If you consider it to have been caused by wounds received or illness contracted (1) in the presence of the enemy (2) on active service, explain the specific conditions to which you attribute it. (See notes on page 3).

1 no  
2 no

1 no  
2 2 no Not aggravated by service



13. What is his present condition?

*Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.*

A man who seems to be fairly well developed. Looks 50.

Digestive, Respiratory, Systems Normal. Circulatory-Heart Normal; some hardening of Arteries. Muscular System Normal.

*above*  
2. Over the Sterno Clavicular joint (right) there is A soft mass, moveable about 1 1/2" X 1 1/2" in size.

14. If the disability is an injury, was caused

(a) In action ?

Not applicable

(b) On field service ?

(c) On duty ?

(d) Off duty ?

15. Was a Court of Inquiry held on the injury ?

Not applicable

If so—(a) When ?

(b) Where ?

(c) Opinion ?

16. Was an operation performed ? If so, what ?

Not applicable.

17. If not, was an operation advised and declined ?

Not applicable

18. *In case of loss or decay of teeth.* Is the loss of teeth the result of wounds, injury or disease, directly\* attributable to active service ?

Not applicable.

19. Do you recommend

(a) Fit for duty ? **no**

(b) Fit for light duty ? **Yes**

(c) Invalided to Canada ? **no**

(d) Discharge as permanently unfit ? **no**

T. J. Broyles Capt. *Done*  
Officer in medical charge of case.

I have satisfied myself of the general accuracy of this report, and concur therewith, *except†*

Station Braunschott.

Geo. Russell Capt. *Ca. m. c.*  
Officer in charge of Hospital.

Date 2-3-17

\* Loss of teeth on, or immediately after, active service, should be attributed thereto, unless there is evidence that it is due to some other cause.

† Delete: this word if no exceptions are to be made.







PENSIONS AND CLAIMS BOARD, Canadian Expeditionary Force, assembled at Folkestone, Kent, England, on the \_\_\_\_\_ day of \_\_\_\_\_ 191

Members of Board.

LIEUT.-COL. SIR H. MONTAGU ALLAN, C.V.O., *President.* MAJOR JOHN L. TODD, C.A.M.C.  
LIEUT.-COL. W. GRANT MORDEN. MAJOR MAURICE ALEXANDER,  
*Legal Adviser.*

Proceedings.

The Board having considered the evidence of the man marginally noted, and the documents submitted, hereto attached, which form part of these Presents, marked

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\_\_\_\_\_  
Lt.-Col. *President.* Major.  
\_\_\_\_\_  
Lt.-Col. Major.



# Medical Report on an Invalid.

Digestive. Respiratory. System Normal. Circulatory-Heart Normal: some

Station \_\_\_\_\_

Date \_\_\_\_\_

Orig. Unit. 1924  
1. Unit Garrison Duty Batta.  
2. Regimental No. 726032.  
3. Rank Pte.  
4. Name Hughes William.

5. Age last birthday 40  
6. Enlisted on Dec. 9/15 at Kinnaird.  
7. Former Trade or Occupation Farmer.

## 8. Disability.

1 Debility.  
2 Enlargement over right Sterno Clavicular.

## Statement of Case.

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.

9. Date of origin of disability.  
1 Four or five years ago.  
2 July 1916 (discovered)

10. Place of origin of disability.  
1 Kinnaird, Ont.  
2 On boat coming to England

11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.  
1 He says, For last four or five years he has not felt able to carry on with hard work, having lost some flesh and not seeming as strong as he used to be.

2 He says, On the boat coming over he was not able to sleep down below. Had another feeling. The Doctor saw him and discovered the enlargement which was not so large then. Had him sleep in hospital the remainder of the journey across.  
Marching across from Whitley (8 miles) with a pack on he became faint several times. The enlargement is more tender and he thinks a little larger since then.

Medical Board Nov. 28th C III

12. (a) Give your opinion as to the causation of the disability.  
1 Senile  
2 Unknown.

(b) If you consider it to have been caused by wounds received or illness contracted (1) in the presence of the enemy (2) on active service, explain the specific conditions to which you attribute it. (See notes on page 3).  
1 no  
2 no

1 no  
2 2 no Not aggravated by service



13. What is his present condition?

*Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.*

A man who seems to be fairly well developed. Looks 50.

Digestive. Respiratory. Systems Normal. Circulatory-Heart Normal; some hardening of Arteries. Muscular System Normal.

*above*

2. ~~Over~~ the Sterno Clavicular joint (right) there is A soft mass, moveable about 1 1/2" X 1 1/2" in size.

14. If the disability is an injury, was caused

(a) In action ?

Not applicable

(b) On field service ?

(c) On duty ?

(d) Off duty ?

15. Was a Court of Inquiry held on the injury ?

Not applicable

If so—(a) When ?

(b) Where ?

(c) Opinion ?

16. Was an operation performed ? If so, what ?

Not applicable.

17. If not, was an operation advised and declined ?

Not applicable

18. *In case of loss or decay of teeth.* Is the loss of teeth the result of wounds, injury or disease, directly\* attributable to active service ?

Not applicable.

19. Do you recommend

(a) Fit for duty ? no

(b) Fit for light duty ? Yes

(c) Invalided to Canada ?

(d) Discharge as permanently unfit ? no

*L. J. Brogden Capt. C.A.M.C.*  
Officer in medical charge of case.

I have satisfied myself of the general accuracy of this report, and concur therewith, except†

Station Braunshott

*Geo Russell Capt. C.A.M.C.*  
Officer in charge of Hospital

Date 2-3-17.

\* Loss of teeth on, or immediately after, active service, should be attributed thereto, unless there is evidence that it is due to some other cause.

† Delete this word if no exceptions are to be made.



Opinion of the Medical Board.

NOTES.—(i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as it is essential that the Members of the Pensions and Claims Board should be in possession of the most reliable information to enable them to decide upon the man's claim to pension.

(ii.) Expressions such as "may," "might," "probably," &c., should be avoided.

(iii.) The rates of pensions vary according to whether the disability is attributed to wounds or injuries received or illness contracted, (1) in the presence of the enemy, (2) on active service. It is therefore essential when assigning the cause of the disability to differentiate between them (see Article 591 to 598 of the Canadian Pay and Allowance Regulations as amended G.O., 57, May 1st, 1915).

(iv.) In answering question 20 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.

20. (a) State whether the disability is the result of injuries received or illness contracted, (1) in the presence of the enemy, (2) on active service.

(1) No. (2)

(b) If due to one of these causes, to what specific condition do the Board attribute it?

Not applicable.

Discharged: Owing to having been declared by Medical Board as fit for permanent duty only and no suitable employment of such duty available, although fit for employment in civil life.

*W. L. M. S. for C. O.*  
Director of Recruiting and Organization

21. Has the disability been aggravated by

(a) Intemperance? No.

(b) Misconduct? No.

(c) Negligence? No.

22. Is the disability permanent?

Yes - but should improve in civil life.

23. If not permanent, what is its probable duration?

Not applicable.

24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present?

40% below standard none of which is due to ~~active~~ active service conditions.

In defining the extent of his inability to earn a livelihood, estimate it at  $\frac{1}{4}$ ,  $\frac{1}{2}$ ,  $\frac{3}{4}$ , or total incapacity.

25. If an operation was advised and declined, was the refusal unreasonable?

Not applicable.

26. Do the Board recommend

(a) Fit for duty? No.

(b) Fit for <sup>base</sup> ~~light~~ duty? Yes Class Ciii..

(c) Invalided to Canada? No.

(d) Discharge as permanently unfit? No.

Signatures:—

C.E.COOPER COLE MAJOR CAMC

President.

Station Bramshott.

H.MACLAREN CAPT. CAMC

Members.

Date 15 MAR 1917

W.FRED.JACKSON CAPT. CAMC

Approved.

Station Bramshott.

*D. A. D. M. S.*  
For G.O.C. & Administrative Medical Officer.

Date 15 MAR 1917

Major,  
D. A. D. M. S. for A. D. M. S.,  
Canadian Troops, Bramshott Camp



PENSIONS AND CLAIMS BOARD, Canadian Expeditionary Force, assembled at  
Folkestone, Kent, England, on the \_\_\_\_\_ day of \_\_\_\_\_ 191\_\_\_\_

Members of Board.

LIEUT.-COL. SIR H. MONTAGU ALLAN, C.V.O., *President.* MAJOR JOHN L. TODD, C.A.M.C.  
LIEUT.-COL. W. GRANT MORDEN. MAJOR MAURICE ALEXANDER,  
*Legal Adviser.*

Proceedings.

The Board having considered the evidence of the man marginally noted, and the documents submitted, hereto attached, which form part of these Presents, marked

\_\_\_\_\_  
Lt.-Col. *President.* \_\_\_\_\_ Major.  
\_\_\_\_\_  
Lt.-Col. \_\_\_\_\_ Major.