

Feb 9 1916
OK [Signature]

ATTESTATION PAPER.

109th OVERSEAS BATTALION, C. E. F.

No. 724747

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

ORIGINAL

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?..... Justin
- 1a. What are your Christian names?..... Robert Charles Herald
- 1b. What is your present address?..... 13 Albert St. Rindsey
2. In what Town, Township or Parish, and in what Country were you born?..... Cartwood Ont.
3. What is the name of your next-of-kin?..... Charles Justin
4. What is the address of your next-of-kin?..... Rattle Brittain Ont.
- 4a. What is the relationship of your next-of-kin?..... Father
5. What is the date of your birth?..... May 12th 1895
6. What is your Trade or Calling?..... Barber
7. Are you married?..... No
8. Are you willing to be vaccinated or re-vaccinated and inoculated?..... Yes
9. Do you now belong to the Active Militia?..... No
10. Have you ever served in any Military Force?.. No
If so, state particulars of former Service.
11. Do you understand the nature and terms of your engagement?..... Yes
12. Are you willing to be attested to serve in the }
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? } Yes



DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Robert C. H. Justin, do solemnly declare that the above are answers made by me to the above questions and that they are true, and that I am willing to fulfil the engagements by me now made, and I hereby engage and agree to serve in the Canadian Over-Seas Expeditionary Force, and to be attached to any arm of the service therein, for the term of one year, or during the war now existing between Great Britain and Germany should that war last longer than one year, and for six months after the termination of that war provided His Majesty should so long require my services, or until legally discharged.

Date Feb 9th 1916 R. C. H. Justin (Signature of Recruit)
Per [Signature] (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Robert C. H. Justin, do make Oath, that I will be faithful and bear true Allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will as in duty bound honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity, against all enemies, and will observe and obey all orders of His Majesty, His Heirs and Successors, and of all the Generals and Officers set over me. So help me God.

Date Feb 9th 1916 R. C. H. Justin (Signature of Recruit)
Per [Signature] (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 Rindsey this 9th day of February 1916.
[Signature] (Signature of Justice)

60 [Signature]

Description of Robert Charles Harold Jenkins on Enlistment.

Apparent Age.....20.....years.....9.....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.....4 1/4.....ins.

Chest measurement { Girth when fully expanded.....37.....ins.
 Range of expansion.....3.....ins.

Complexion.....Fair.....

Eyes.....Blue.....

Hair.....Dark Brown.....

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

Mole above right shoulder blade

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.....Feb-9th.....1916.

Place.....Lindsay.....

J. McCook.....Capt.
 Medical Officer
 109th Overseas Battalion, C. E. F.
 Medical Officer.

*Insert here 'fit' or 'unfit.'

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

CERTIFICATE OF OFFICER COMMANDING UNIT.

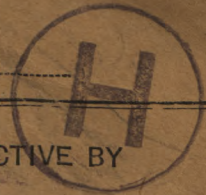
Robert Charles Harold Jenkins.....having been finally approved and inspected by me this day, and his Name, Age, Date of Attestation, and every prescribed particular having been recorded, I certify that I am satisfied with the correctness of this Attestation.

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

Date.....FEB 9.....1916.

REGIMENTAL DOCUMENTS

NAME Jenkins Robert C. H. (Pte) REGT. NO. 724747 UNIT 109th. Bn. H. Q. FILE NO.



CONTENTS

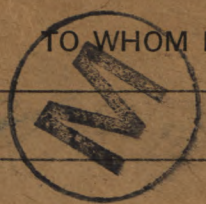
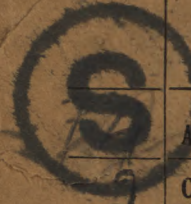
DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505 REFERENCE

NON-EFFECTIVE BY



38

~~1038~~

04705

M. U.

[Large handwritten scribble]

[Handwritten numbers and symbols]
1-23
25-23
27-23
H

1 ATTESTATION PAPER (M.F.W. 23, 133, or 51)

1 CASUALTY FORM (M.F.W. 54 or A.F.B. 103)

1 TRAINING HISTORY SHEET (M.F.W. 113)

1 FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)

1 REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)

1 COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)

1 MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)

1 DENTAL HISTORY SHEET (M.F.B. 465)

1 MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)

1 MEDICAL EXAMINATION (M.F.W. 129)

1 TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)

1 PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)

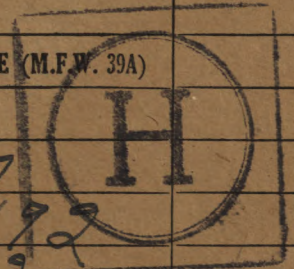
1 DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)

1 LAST PAY CERTIFICATE (M.F.W. 44)

1 PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)

1 PARTICULARS OF CHARACTER (A.F.W. 3226)

1 COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)



C-D-D-
M. P. W. 67
M. P. W. 192
S. S. C. 132

1 11/4/1917
1 12/7/19
1 Casualty
1 1919
1 1919
1 1919



Surname **JENKINS.** Christian Name or Names **R.C.H.** Reg. No. **724747.**
Rank **Jankins.** Unit **Co. Troop Batty.**

Pte. **38th. Bn. E. Out.**
Hospital **12th Can. Hd. Amb. E. Out** Date of Admission **12-3-17.**
Transferred **13th " " "** Hosp. **16-3-17**
11. C. 7. Amb. Hosp. **14.5.17**
12 C. 7. Amb Hosp. **18.6.18**
1. Can. C. C. Sta. Hosp. **4.11.18.**

Diagnosis **NS Infect Rt. Leg.**
(1) **W 410**

Later Diagnosis (if changed)

(2)

(3)

Ulcers legs

Additional Diagnosis: if more than one state present

Infect. Lt. Hand at G. SW. Head. R. Arm. R. Thigh. R. Leg. & Feet Rt. Foot.

Invalidated to Canada **14. 7. 19** Date

C.L. 31-3-17. A/161.

REMARKS

3-4-17. A163. R.F. Base. Sick. 12-3-17.
23.4.17. A178. R.F. Base Sick 14.5.17. Rq. unit. 25.3.17
5.6.17 A213. Rq. unit. 23.5.17
12.6.17 A219. Dis. 22.6.18
22.6.18 A247.
76.6.18 A250
12.11.18 @ 3690
14-11-18 @ 3710
16.11.18 A 373
16.11.18 B 379 0
16-1-19 34190

A.M.D. 2 DEPT.

Bch. of D.G.M.S. O.M.F.C. London.

Rw

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

	Hospital	Adm.
1.	23 G. Sta.	6.11.18.
2.	20 G. Camier N. Hampshire War Duster N. Hamston	10.11.18 23.11.18
3.	Granville Can Spec Buxton	14-1-19.
4.	5 G. St. Kirkdale.	20.6.19.
5.		
6.		
7.		

B.L. 24.6.19. B545.

18.7.19 B559

I.

*Name JENKINS. Robert Harold. Rank Pte. Regtl. No. 724747

Original unit CORD. Present unit CORD. M. or S. M. Age 24 Religion Meth. Ref. H.Q.

Port, ship, and date of arrival Essequibo. Portland. Me. 20-7-19.

Next of kin Father. C. Jenkins. Little Britain Ont.

Address on leave Little Britain Ont.

Address on discharge Same address

Transportation issued Yes No Date 10-10-19 Character on discharge

Previous occupation Barber. Date and place of enlistment Lindsay. Feb. 9th 1916.

Diagnosis G.S.W. rt thigh G.S.W. rt foot Date of Medical Boards 6-6-1 6-10-19

Date.	Remarks.	Pt. 2 Order No.
<u>T.O.S.</u> <u>14-7-19</u>	<u>Posted to Hosp. Sect. 25-7-19.</u>	
	<u>Leave & Subs. from 28-7-19 to 11-8-19.</u>	<u>211</u>
<u>7-10-19</u>	<u>"Essequibo to B.M.H. Leave to 11-8-19</u>	<u>H.S. 212</u>
	<u>B.M.H. to Cas. Co.</u>	<u>H.S. 279</u>

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

Date

Remarks.

Pt. 2 Order No.

10-10-19 S.O.S. Dis. Med. unfit (183 days W.S.G)

281

FIELD MEDICAL CARD.

A.T. Serum
Dose and date

1st 500 units 4-11-18

2nd 500 units. 16-11-18.

FIELD AMBULANCE NOTES.

Morphia
Dose and time

Date of wound or
onset of illness

12-11-18

Religion

Beth.

No. 724747 Rank Pte.

Name JENKINS. R.C.H.

Unit 38 lead line H 9

Battle Casualty ~~Accidentally Wounded~~ "Sick"

~~(Strike out description which does not apply)~~
No. 13 CANADIAN FIELD AMBULANCE

No. of F.A.

Date of admission 4-11-18

F.A. diagnosis S.W. Head, arm

Thighs, Leg, foot

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

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

Severe

Base Hospital diagnosis (alterations or additional)

4.10.18 4.11.18
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.

Date of entry

Adm. 4-11-18
1st Can. C.B.S.

No. of Hospital

Date of entry

20 Gen Hosp
18/11/18

Pen Wd Rt foot. Comp Comm fract -
metatarsal bone 2nd & 3rd toe, Juxta Alveolar
drained through counter incision
Pen R. Hip - deep Profundus Veni cut
this was ligated. 7th not found
Fluorine pocketed

Pen Wd arm. Injured. 7th not found
Fluorine pocketed

Wd head - dressed
500 lb. Gum Green Apt Rice.
To be retained.

2 bts
6-1-18
Eh M. B. M. map

~~Other notes~~
~~Wd. R. hip~~
~~Other notes~~

18/11/18. Rt Wd Evac B.
Wd. R. hip healthy. S. M. M. M. M.
Wd. R. temporo-frontal region. X ray
show 7th. Exploration. Depressed fract.
Tympanic & elevation of some rim of outer foramen
no injury dura. Removal of 7th, which had skidded
along bone into temporal region. Suture.
Rt Wd Evac B. S. M. M. M. M.

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.

SURNAME.

Jenkins

*M.M.
(29.31338-14-5-19.)*

M.D. 2.

CARD NO.

CHRISTIAN NAMES

Robert Charles Harold

1088 is 10-10-19

*m.u. FOLL.
24720281 18-10*

REGL. No.

724747

RANK

Pvt.

288. 1 19

UNIT

109th.

Batt.

FORMER CORPS

Nil.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Jenkins, Charles

RELATIONSHIP TO SOLDIER

Father

ADDRESS

Little Britain, Ont.

COUNTRY OF BIRTH

Canada, Oakwood, Ont.

DATE

May 12th. 1895.

PLACE OF ATTESTATION

Lindsay

DATE

Feb. 9th. 1916.

*23.7-16. 488
19.*



PP. 25-7-19 378

Sailed from Halifax 23-7-16 per S S Olympic

MARRIED

SINGLE

yes

WIDOWER

TRADE OR CALLING

Barber

RELIGION

Methodist

DESCRIPTION.

APPARENT AGE

20 YEARS

9 MONTHS

HEIGHT

5 FEET

4 1/4 INCHES

CHEST MEASUREMENT

37 INCHES

EXPANSION

3 INCHES

COMPLEXION

Fair

EYES

Blue

HAIR

Dr. Brown

DISTINGUISHING MARKS

Mole above right shoulder.

MEDICAL EXAMINATION.

PLACE

Lindsay

DATE

Feb. 9th 1916.

Reg. No. 724747 Name Jenkins R. C. H.
Rank Pte 4 Corps 109th Bn Age 24 Service C 6¹/₂ Co 1st F 1¹/₂
Ledger No. 2627 13368 Serial No. 622035 38

HOSPITALS

DATE

DIAGNOSIS

HOSPITALS	DATE	DIAGNOSIS
Engwanda Clinic Timgston	7.7.16	Influenza (C)
Duty	11.7.16	
Brook. Clinic Burlington	11.8.19	Y.P.W. Thigh and Foot (C)
Do. Cas. Co. D.D. 2 ¹	6.10.19	

HOSPITALS

DATE

DIAGNOSIS

M. F. W. 2553.
50M-6-19.
1772-39-1332.

No. 5 CANADIAN
GENERAL HOSPITAL
LIVERPOOL

DOCUMENT
CARD

HOSPITAL

A. & D. No. T13018 AT INV. TO CANADA

ADMITTED 19 JUN 1919 DISCHARGED 14 JUL 1919 WARD No. Mk.

REGTL. No. 72747 RANK Pte NAME JENKINS R.C.

UNIT 38 Bn. TRANS'D FROM Gran Buxton

DIAGNOSIS Gswkt. Arm, Leg, Thigh DIAGNOSIS CHANGED

M.H.S. WRITTEN FOR		M.H.S. RECEIVED		FINAL DISPOSAL OF M.H.S.	
DATE	To	DATE	To	DATE	TO WHOM SENT.

M.H.S. IN HOSPITAL.

SENT TO M.O. 1/0..... FLOOR..... WARD..... ON..... 191.....

RECEIVED FROM M.O. COMPLETE..... 191.....

REMARKS.

99-1373-11

OTHER DOCUMENTS (Board Papers, Charge Sheets, etc.)

MS
FV

A. & D. CARD

.....HOSPITAL.

AT.....

A. & D. No. T 5010 PL. OF ACTION.....RANK..... REG. No. 724747 UNIT 38 BussNAME Jenkins Rb. AGE 23 RELIGION MethPLACE IN HOSPITAL..... BDIAGNOSIS..... sw Head Rt Arm, slight LegADMITTED..... 13 JAN 1919 FROM..... North War & Boston

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

TRANSFERRED..... 19/6/19 5th Buss. Gen. LiverpoolSERVICE AT HOME..... 34/12 IN FIELD..... 24/12

RESULTS.....

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

REMARKS.

A series of horizontal dotted lines for writing remarks.

Name **JENKINS** Rank Pte.
 Unit **38th Battn.** Robert Charles Harold
 Next of Kin **Canada.**

Reg. No. 724747

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1917						
12-3	Reported from Base	sick	M.Y.D.	A161		
12-3	No. 12 Can. Fld. Amb.	Infect.	R. Leg.	A163		
16-3	No. 13 Can. Fld. Amb.	do		A163		
25-3	Rejoined Unit.	do		A178		
14-5	Reported from Base:	-	Sick W.D.	A213		
14-5	4 th C. F. Ambulance.	Ulcers	leg.	A219		
23-5	Discharged		-do-	A219		

Name Jenkins Rank Robert Charles Harold 1st Lt Reg. No. 724747 HRO
 Unit 38th Batta
 Next of Kin Charles Jenkins - Little Britain - Ont.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
18-6-18	12 Cav Field Amb	Inf Lt. Hank		2247		31952
22-6	Disch. to duty		Do	A. 2000		32152
4-11-18	1 st Bn 6 th S H	40 Head R. B. H. R. High R. Reg. 7 th For		2371	728	39120
6-11	23. C. C. S.					39221
10-11	20. G. M. Camier			2373		5595-12
23-11	W. H. Diaston & Champton		150	23579		1834
14-1-19	Gran. S. H. Buxton		Do	23419		4907
20-6-19	S. B. E. - Kirkdall		20	23545		7230
14-7-19	Emb. to Canada		do	23559		9477
	S. L. 508	U. D. 2				
	511	51619				

NAME

Jenkins, Robert Charles Harold

REGT. No.

724747

RANK AND UNIT

Pte.

38th Bn.

NEXT OF KIN

CABLE

No.

DATE

NATURE OF CASUALTY

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

- | | | | |
|--------------------|---|----------|---|
| B 379 ⁻ | Northamptonshire War,
Duston Northampton | 23-11-18 | SW Head, R. Arm
R thigh + foot. R. Leg. |
| B 419 ⁻ | Granville Can. Spec., Buxton | 14-1-19 | SW head R arm
R thigh R Leg + R. foot |
| B 545 | 5 Can. Gen. Kirkdale | 20-6-19 | SW. Head. Rt. arm. R. Thigh
R. Leg + foot. |
| B 559 | Invalid to Canada | 14-7-19 | SW head R. arm
R thigh, R leg + foot. |

NAME

RANK AND CORPS

CABLE

No.

DATE

NATURE OF CASUALTY

REGT'L NO

H. Q. FILE NO. 649-

FOLLOWS

No.

FOLLOWS

Jenkins
PteRobert Charles Harold
38th. Bn (former 109th Bn.)

724747

No.	DATE	NATURE OF CASUALTY
		N. of K. Jenkins, Charles (father) Little Britain, Ont.
Q728	15-11-18	Adm. #1 C.C.H. Nov. 4/18 GSW's Head R. arm R. Thigh R Leg foot.
WSM 248	18-12-18	Northamptonshire War Hosp. Druston Northampton progressing fairly Methodist Church, Lindsay, Ont.
WSM 6497	19-12-18	Rev. E. Val Tilton, B. D., Cambridge St.
WSM 6456	19-11-18	Eng. same as N. of K.

East. Ont. Regt.

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
9161	Rept from Base	12-3-14	sick N.Y.D &
9163	# 12 Cav. Old Amb.	12-3-14	Infect. R Leg
9163	# 11 Cav. Old Amb	16-3-14	" " "
9178	Rej. Unit	25-3-14	" " "
9213	Rep. from Base	14-5-14	sick N.Y.D &
9219	# 11 Cav. Old Amb.	14-5-14	Ulcers - Legs
9219	Rep. from Base	23-5-14	" " Rej. Unit
A 247.	12. Cav. Old Amb.	18.6.18	Inf. Lt. hand
A. 250	Disch.	22.6.18	Inf. Lt. hand
9371	# 23 Cav. C. Station	6.11.18	SW Head R arm & thigh
9369	# 16. C. C. Stat.	4-11-18	R leg & foot
9373-1.	20 Gen carriers	10-11-18	SW head R arm R thigh

No 724747 RANK

Pte

NAME

Jenkins Robert Charles
Harold

T. O. S. 9-2-16.

UNIT

109th. Battalion.

D.O. 70.10-2-16

M. D. 13

PAID FROM	PAID TO	SIG OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916 Feb. 7.	1916. Feb. 27	✓		
	Mar.	✓		
	April.	✓		
	May.	✓		
	June.	✓		
	July.	✓		

UNIT SAILED

JUL 23 1916



Number

T24747

Rank

90- P

Surname

JENKINS

Christian Name

Robert Charles Harold

Units

38th Div. Am. Inf.

Theatre of War

France

Date of Service

4-12-16

Remarks

Latest Address

~~Little Britain~~

101 Kent St. Oak

Lindsay Ont.

Roll No.

200m-2-21.M.

Page 18010

DESP OCT 21 1922
REGN. *MA*
85058

724747.

DUPLICATE.

DUPLICATE

MEDICAL HISTORY SHEET.

Surname Jenkens

Christian Name Robert Charles Harold

Examined { on 9th day of February 1916
at Lindsay

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

Birthplace { City or Town Oakwood
County Victoria Ontario

Apparent age 20 years

Trade or occupation Barber

Height 5 Feet 4 3/4 Inches.

Weight 142 Lbs.

Chest measurement { Minimum 34 inches.
Maximum expansion 37 inches.

Physical development Good

Small-Pox Marks None

Vaccination Marks { Arm Right None Left Two
Number Two

When Vaccinated last Feb. 9th 1916

(a) Marks indicating congenital peculiarities or previous disease

Marks of acne

(b) Slight defects but not sufficient to cause rejection

None

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT,
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date	Result	VACCINATIONS.
<u>9.2.16</u>	<u>Good</u>	<u>J. McCulloch</u> M.O.
		M.O.
		M.O.

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>25.4.16</u>	<u>Good</u>	<u>J. McCulloch</u> M.O.
<u>2.5.16</u>	<u>Good</u>	<u>J. McCulloch</u> M.O.
<u>10.5.16</u>	<u>Good</u>	<u>J. McCulloch</u> M.O.

Enlisted on 9th day of February 1916 at Lindsay

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>109th Bn</u>	<u>724747</u>		<u>9.2.16</u>
Transferred to.. ..	<u>C & F</u>			
	<u>38th Bn</u>			<u>2-12-16</u>

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>Brant Military Hospital Burlington</u>	<u>5-10-19</u>	<u>Partial loss of function of Right Leg Rt. Great Toe</u>	<u>Disch. med. unfit for service</u> <u>A. Collins</u> <u>Major B.A.M.C.</u> <u>Pres. S.M.B.</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.

Surname *Jenkins* Christian Name *Robert Charles*

STATION.	Date of Arrival at the Station.	DATES OF						DISEASE.	Number of days in Hospital.	Remarks on nature of the disease: how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
		Admission into Hospital.			Discharge from Hospital.						
		Day	Month	Year	Day	Month	Year				
<i>P. M. H. Grant Military Hospital Burlington</i>		<i>11</i>	<i>8</i>	<i>19</i>	<i>6</i>	<i>10</i>	<i>19</i>	<i>1/2 S. W. of thigh and foot.</i>	<i>56</i>	<p><i>2-10-19</i></p> <p><i>was wounded in Rt. thigh & foot 4-11-18 - wound artery and vein thought to have been severed. Thigh and foot opened & S. shaped removed. There is ankylosis of proximal joint of great toe - is swollen and enlargement of Rt. thigh & leg - tenderness in thigh and ball of toe. He also has old scar in Rt. temporal region - & much cicatricial tissue & some tenderness. All wounds healed. Has been supplied with special pair of boots. Bordered for discharge.</i></p>	<i>W. H. Jenkins</i>

724747

ORIGINAL ORIGINAL MEDICAL HISTORY SHEET.

Surname Jenkins Christian Name Robert Charles Harold

Examined { on 9th day of February 1916
at Sudbury
Birthplace { City or Town Bakewood
County Victoria Ontario

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

Apparent age 20 years
Trade or occupation barber
Height 5 Feet 4 1/4 Inches
Weight 142 Lbs.
Chest measurement { Minimum 34 inches
Maximum expansion 37 inches
Physical development Good
Small-Pox Marks None

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT
		<u>27 NOV 1918</u>
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Vaccination Marks { Arm Right None Left Two
Number Two
When Vaccinated last Feb. 9th 1916

Date	Result	VACCINATIONS
<u>9.2.16</u>	<u>Good</u>	<u>J. McCulloch</u> M.O.
		M.O.
		M.O.

(a) Marks indicating congenital peculiarities or previous disease

Marks of Acne

(b) Slight defects but not sufficient to cause rejection

None

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>25.4.16</u>	<u>Good</u>	<u>J. McCulloch</u> M.O.
<u>2.5.16</u>	<u>Good</u>	<u>J. McCulloch</u> M.O.
<u>10.5.16</u>	<u>Good</u>	<u>J. McCulloch</u> M.O.
<u>22/9/16</u>		

Enlisted on 9th day of February 1916 at Sudbury

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>109th Bn C.E.F.</u>	<u>724747</u>		<u>9.2.16.</u>
Transferred to.. ..	<u>38th Bn</u>	<u>2/12/16</u>		

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>Ge8th Buxton</u>	<u>May 27.19</u>	<u>Sw 2 Foot (Bust) + R Thigh.</u>	<u>1st Lt J. P. Jones</u> <u>Case</u>

CANADIAN

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

Christian Name *Robert Charles*

Surname *Jenkins*

STATION.	Date of Arrival at the Station.	DATES OF						DISEASE.	Number of days in Hospital.	Remarks on nature of the disease: how induced: if mild or severe: if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
		Admission into Hospital.			Discharge from Hospital.						
		Day	Month	Year	Day	Month	Year				
Northants War Hosp Duston		23	11	18	10	1	19	SW head, R. thigh R. foot, R. arm.	60	Several f.n's foot, thigh and arm. Wd arm, head, foot healed o T ^h igh wound clean and healing.	<i>R. A. M. C.</i> Major R.A.M.C. Registrar.
Gránville Can. Spec. Hosp Buxton Derbyshires		13	1	19	21	5	19	<i>do</i>	<i>158</i>	Boards papers prepared. ① Comp. comm. had of 1st melalaical and post. phalarx. articular surface destroyed arthritis complete, very sens. tissue, toe held forward very painful. compelled him to walk on outside of foot. ② adherent scar of middle third and surface of thigh. in motion over veins. prevents complete movement of thigh. cannot completely flex extended thigh. adduction and abduction slightly limited. rotation of thigh ok. for 1st o/c,	
NO. 5 CANADIAN GENERAL HOSPITAL LIVERPOOL		9	JUN	1919	14	JUL	1919	<i>do</i>		Same as above	<i>John</i> Zacarias
R. M. A. T. "ESSEQUIBO"		JUL	14	1919	16	JUL	1919	<i>do</i>		Condition unchanged	<i>J. P. Stanton</i> Capt. C.A.M.C.
Brant Mel Hosp.		11	8	19				<i>do</i>			

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book. 724747 Regimental No. Pte Rank. Jenkins Surname. R. C. H. Christian Name.
Year 1918. Unit. 38 Cdn. Bn. Sig. Age. Service.

Station and Date. 23. 11. 18. Disease S. W. Head, Arm R. Thigh R. Leg R. Foot R.

Admitted this day from Convoy from Overseas E. F. France.

Wounded 4. 11. 18. Field Card notes state:-
Penetrating wound Rt. foot, compound comminuted fracture metatarsal bones great toe. Wound cleaned & drained through counter incision.

Penetrating wound Rt. thigh - Deep Profundus vein cut, this was ligatured. F.B. not found.

Penetrating wound Rt. forearm incised. F.B. not found.

Wound of head dressed.

18. 11. 18. Wounds of limbs healthy.

Wound R. Temporo-frontal region X. Ray shows T.B. Exploration. Repressed fracture: Trephining & elevation of removal of other fragments. No injury to dura.

Removal of F.B. which had skidded along bone into temporal region. Sutured.

On admission

Head wound - stitches out, wound healthy & healed. Iodine & dry sterile dressing.

Thigh - large granulating healthy wound - H₂O₂ & Boracic dressing.

Arm - healthy fairly clean wound, H₂O₂ & Boracic dressing.

Foot - clean wound, H₂O₂ & Boracic dressing.

* The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.
(6365) W2944/P138 2,950,000 1/18 McA & W Ltd Forms/I. 1237/13 (E 2349) [P.T.O.]

Station
and Date.

- Urine 1020. acid. no albumen. no sugar.
26. 11. 18. Slight inflammation around injection area
of chest. Iodine.
1. 12. 18. Abscess burst, patient was anxious not to
be knifed. Temp. now normal after the removal
of a quantity of pus.
7. 12. 18. All wounds satisfactory. Abscess healing.
14. 12. 18. Wounds clean & healing.
4. 1. 19. Wounds healing well. Arm, foot, & head wounds healed.
9. 1. 19 Transferred to Canadian Hospital,
H.P. Bent.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
T5010 Year	724746	Pto	Jenkins	RC
	Unit.	Age.	Service.	
	3rd Can Bu.	23	34 $\frac{24}{12}$ $\frac{12}{12}$	
Station and Date.	Disease SW Head, Arm, Rt Thigh & Leg. Chest shows evidence of Proctitis			
Feb 13 th	Tt. - bed. Transfer to Isolation ward 3 rd Floor. as Influenza case. K. Green Lt Admitted to isolation -			
	Physical examination shows a few capillary rales in both bases, but no dullness.			
	Heart O.K.			
	Treatment Fluids only since 4 hours since			
14/2/19	must assume pneumonia 5.9 x 4 improving - Temperature normal			
16-2-19	Keep in bed & 8 hours since 4 hours since			
14-2-19	out of bed - ordinary diet 28 P.			
4-3-19	Ready for discharge from isolation. ELP			
3/3/19	no complaints since 4 hours since			
	Returned to ward from isolation			
	Large penetrating wound anterior surface Rt thigh. Great toe Rt foot unable to flex due to scar on tendon. Causes trouble unless wears a special boot.			
	To Surgical Beam Room Thompson			
7-MAR. 1919	This patient goes about too much in leg. Should be kept as quiet as possible. Scar is too recent to do any exercise at present. atf			
9/3/19	wound condition about same Thompson			
11/3/19	To Bed with HCl presentation discharge Thompson			
17/3/19	Wound looks cleaner keep up dress Thompson			
20/3/19	Wound to try do Thompson			

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

Station
and Date.

May 10/19
May 21.

In F 13 777 266 27 28
wounds healing.
Board papers prepared.
(#7.)

EXAM. MED. BOARD

27 MAY. 1919

G. C. S. H.

June 2/19

Rt. my. adenitis - H.V. found, today unbed

June 14

- Transfer - Kitch

PRK

Phaeolus

19-6-19

5 Can. Gen. Hosp.

Antyboris. tenderness right great toe -
Complete flexion & extension of right thigh
prevented - adduction & abduction limited.
Other acts O.K.

uniform
examine.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.

Regimental No.

Rank.

Surname.

Christian Name.

724747

Private

Jenkins

R L

Unit.

Age.

Service.

38 Canadians

23

34 1/2 24 1/2

15010
Year

Station and Date.

Disease

SW Head Arm R Thigh

+ Leg

Occupation - Barber.

Enlisted - 9-2-1916

Came to Eng 23-7-1916

Went to France - 4-12-1916

Wounded 4-11-1918 (Valenciennes)

Ret to Eng - 23-11-1918

Hospitals - 13 C.F.A. - -

- 1 C.C.S. - 6 days.

- 20 Gen Hosp. - 13 days.

- Northants West Hosp. - 60 days

- G.C. 8th Buxton (Jan 13/19)

Jan 4/19

SW. Face, Thigh, Rt Foot & Arms -
Unhealed upper 1/3 ant aspect R Thigh
Daily dressings

Jan 18/19

Head - Wound Rt Temporo-frontal region
X-ray showed FB. Exploration showed depressed
fracture. Depressed & elevation & removal of
other fragments. No injury to dura. FB removed
which had skidded along bone into temporal
region. Sutured. Wound healed in months.

Rt Foot - Penetrating wound. c.p.o. comminuted
fracture 1st metatarsal bone. Trench cleared -
drained through counter incision - Healed
in 6 weeks.

Rt Arm - Penetrating middle forearm dorsum
- wound excised - FB removed at 2 operations.

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

Station
and Date.

Healed quickly
left arm - small flesh wound outer
side antecubital fossa - removed.

Healed quickly.
Rt thigh - Penetrating wound thigh. Deep
profunda vein cut - ligated at CCS - TB
not found - 2 operations - Has never
healed.

Present condition - Head - Dressing adherent
scar at fronto parietal region healed - Complaint
of inability to open mouth beyond $\frac{1}{2}$ " inability
to bite hard food. Wound tend to pressure.
Rt left arm - Healed as heretofore -
no disability.

Rt. foot - Complaint of some pain in foot when
putting on shoe. Adhesion of extensor
tendon in scar. Leg considerably
swollen.

Rt thigh - Depressed adherent scar
front Rt thigh. Not healed. Ulcer
2" x $\frac{1}{2}$ " in center - granulating nicely
leg weak - Ambulatory with careful
dressings as required. J. W. W. H. T.

27 JAN. 1919

Jan 29/19

Care on with dressings until healed. (H. D. W. B. M.)
wound not healing satisfactorily. To rest leg
as much as possible. Dressing twice daily.

Feb 5/19

wound has cleared up & is
granulating nicely now. To carry on with
dressings. J. W. W. H. T.

Feb 11/19

Developed severe cough with considerable
expectoration. Pain in chest. Some
headache. Chilly. History of left sided
Pneumonia 14 years ago. Temp
100°. Pulse 104. Resp. 24°.

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

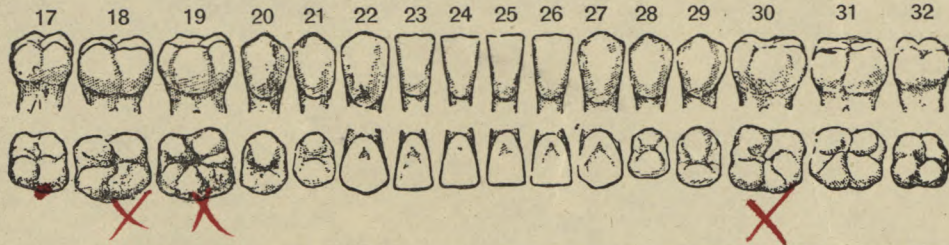
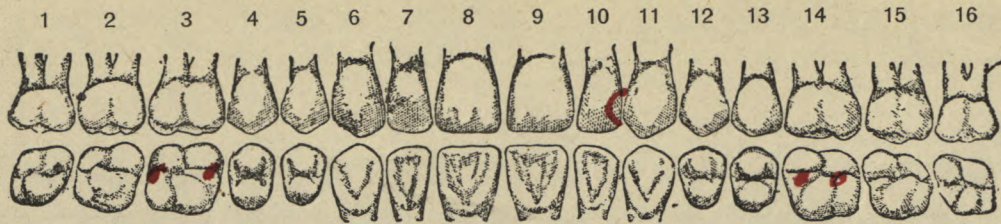
DISTRICT **2.D.D.**

NAME OF SOLDIER *Jenkins, Capt. Chas. Harold*

REGIMENT *Pte*

RANK *Pte*

No. **729797**



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.

Condition on first Examination	Date	Amalgam	Temporary Filling (a) G. P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhoea	Synthetic Porcelain	Extracting	DENTURES			Gold Clasp	Gold Filling	CROWNS		Bridge Work	OPERATOR	Military District	REMARKS
												U	L	P			Gold	Porcelain				
	<i>Aug 12/19</i>	<i>4</i>		<i>1</i>															<i>Mawji</i>		<i>J.P.H.</i>	
	<i>Oct 4/19</i>			<i>1</i>																<i>complete</i>		
<i>Discharge examination at British Military Hosp Oct 4/19 preparation lost</i>																						

RECEIVED

RECEIVED

Handwritten text, possibly a signature or name, written in cursive.

Handwritten text, possibly initials or a date.

Handwritten text, possibly a name or title.

Handwritten text, possibly initials or a date.

Handwritten text, possibly initials or a date.

CASE HISTORY SHEET

BRANT MILITARY HOSPITAL
Hospital.

Station.

No. 724747 Rank Pte Name Jenkins, R. E. H. Age 24

Unit 2 SS Completed years of service 6 1/2 Where and how long } E. 1 yr 2 1/2

Date of admission AUG 11 1919 Date of discharge OCT 6 1919

Diagnosis GSW thigh & foot Place of origin Valenciennes, 7-11-18

CONDITION ON ADMISSION AND PROGRESS OF CASE

Large adherent scar on right thigh, healed and tender. There is 1" atrophy of muscles of thigh and weakness of thigh.

Compound fracture of Rt leg bone, seen healed, some of the bone exposed between, and second joints; joint almost ankylosed

Complains of weakness in leg in walking, pain in walking, swelling of leg at night after walking very far.

Scar of wound over st. humeral region seen tender. Complains of pain on lead

Scar over Rt knee healed and adherent and tender.

20-8-19- advised that massage would do him no good. To have special pair of boots made.

25-8-19. has been measured for special pair of boots. Given, used since 1st Sept 1919

FAMILY HISTORY 10-9-19. now has special boots.

(Tuberculosis, mental or nervous diseases.) 12-9-19. granted 1 week leave

29-9-19. now ready for discharge.

2-10-19. Banded 227. For discharge. All wounds healed.

TREATMENT

(Especially any specific or special form.)

massage & electricity.

CONDITION ON DISCHARGE

(and disposal made of case.) Recovered. No further hosp. treatment required.

622035

Date Medical Officer i/c case. S. B. By Capt. Camp

BRANT MILITARY HOSPITAL

Post Office

AUG 1 1919

On August 1st, 1919, the patient was admitted to the hospital with a diagnosis of influenza. The patient had been ill for several days and had a high fever. The patient was treated with bed rest and fluids. The fever subsided on August 3rd and the patient was discharged on August 5th.

The patient returned to the hospital on August 10th with a diagnosis of influenza. The patient had been ill for several days and had a high fever. The patient was treated with bed rest and fluids. The fever subsided on August 12th and the patient was discharged on August 14th.

The patient returned to the hospital on August 17th with a diagnosis of influenza. The patient had been ill for several days and had a high fever. The patient was treated with bed rest and fluids. The fever subsided on August 19th and the patient was discharged on August 21st.

The patient returned to the hospital on August 24th with a diagnosis of influenza. The patient had been ill for several days and had a high fever. The patient was treated with bed rest and fluids. The fever subsided on August 26th and the patient was discharged on August 28th.

The patient returned to the hospital on August 31st with a diagnosis of influenza. The patient had been ill for several days and had a high fever. The patient was treated with bed rest and fluids. The fever subsided on September 2nd and the patient was discharged on September 4th.

The patient returned to the hospital on September 7th with a diagnosis of influenza. The patient had been ill for several days and had a high fever. The patient was treated with bed rest and fluids. The fever subsided on September 9th and the patient was discharged on September 11th.

The patient returned to the hospital on September 14th with a diagnosis of influenza. The patient had been ill for several days and had a high fever. The patient was treated with bed rest and fluids. The fever subsided on September 16th and the patient was discharged on September 18th.

Regtl. No. Rank and Name 224747 Pte Jenkins Corps.

Disease..... Hospital 6650

To Officer i/c Laboratory. Ward 73.69

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

Date 21/5/19

O. i/c Ward.

LABORATORY REPORT. 4184

Color. Clear. L.A.
Reaction Acid
Sp. Grav. 1024
Albumen Negative
Sugar Negative
Acetone Negative

Date of Examination 21/5/19 Kenneth Simon

Date of Examination

Hospital

to Office of Laboratory

to carry out an examination of the accompanying specimen of

the material referred to

Ward

Q. 11

LABORATORY REPORT

Date of Examination

U. S. Laboratory

U. S. Laboratory

Osborn

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

M. F. W. 54.
150M. 10-15.
H.Q. 1772-59-920.

Casualty Form—Active Service.

109th OVERSEAS BATTALION, C. E. F.

Unit, Regiment or Corps

Regimental No. *424/44th* Rank *Private* Name *Jenkins Robert Charles Harold.*

Enlisted (a) *9.2.16* Terms of Service (a) *D.O.F.* Service reckons from (a) *9.2.16.*

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) *Barber.*

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

Embarked Canada Halifax 24.7.16.

Disembarked England Liverpool 31.7.16.

4-12-16 O.C. 109th. Proceeded overseas for service with 38th.Btn. Witley 4-12-16 D.O.Pt.11 339

CERTIFIED CORRECT.
12 DEC. 1916
CAN. RECORDS, LONDON.

W. A. B. [Signature]
ADJUTANT
109th Overseas Battalion, C. E. F.

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

724747 Jenkins R.C.H.

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				
6 12 16	C.B.D.	TAKEN ON STRENGTH 39th Havre		6 12 16	N.R. P.I.D. 242-13 12.16
7 12 17	"	Left for Unit	FIELD	7 12 17	N.R.
13 1. 17	Unit	Joined Unit	FIELD	9. 1. 17	B. 213. DCS. 80d22. 1. 17
17 MAR 1917	38 th.	Evacuated Sick	Field	12. 3. 17	B. 213. DCS. 103.
"	12 C.F.A.	Infected leg R. adm	12 C.F.A.	12. 3. 17.	3036/E 30509 Des. 104 3036/E 30519 Des. 104
"	13 "	Left for Unit	FIELD	16. 3. 17.	
"	"	" " " "	" "	" "	
31 MAR 1917	Unit	Joined Unit	FIELD	25. 3. 17	B. 213. DCS. 108
18 MAI 1917	38 th.	Evacuated Sick	Field	14. 5. 17	B. 213. DCS. 125
19 5. 17	11 C.F.A.	Wlars. both legs.	11 C.F.A.	14. 5. 17.	3036/E 4184 Des. 104
26 MAI 1917	Unit	Joined Unit	FIELD	23. 5. 17.	B. 213. DCS. 127.
1 DEC 17	"	14 days leave		28 NOV 17	P.I.D. 118-15. 12. 17
DEC 17	Unit	Joined Unit	FIELD	14. 12. 17	B. 213.
9. 3. 18	"	One P.C.B.		9. 2. 18	2023-22. 3. 18.
18. 6. 18.	12 C.F.A.	S/tnj. hand. L.	12 C.F.A.	18. 6. 18.	a4263.
27 6 18	38th	Infected hand	to Duty	27 6 18	a 4476.
29 6 18	"	Rejoined	Unit.	18. 6. 18	B 213.
5. 11. 18.	13 C.F.A.	adm to	42 CCS	4. 11. 18	a 1542.
4. 11. 18.	1 CCS	Prohead Ramm R thigh	1 CCS	4. 11. 18	a 1793.
		Reg. R foot.			
6. 11. 18.	"		to 23 CCS	6. 11. 18	a 1897.
10. 11. 18.	23 CCS		adm.	6. 11. 18	a 1948.
10. 11. 18.	Wgjt.		to 10 a.T.	9. 11. 18	a 2007
23. 11. 18.	Jan Breydel.	Wounded. Posted E.O.R.D. Seaford.		10. 11. 18	W-1577
				23. 11. 18	W3083/6552. DO-123 a. 5. 12. 18

Lieut. for Lt Col. A. A. G.
Canadian Section, G. H. Q. - 3rd, Ech.

SERVICE AND CASUALTY FORM (Part I).

Army Form B.103-I.
I.

(1)*Substantive rank <i>Pli</i> *Acting rank *(To be entered in pencil to facilitate alteration.) (4) Surname <i>Jenkins</i> (5) Christian Names <i>Robert Charles Harold</i> (6) Army Form, number of, Attestation } Form or Record of Service paper } (7) Whether of British or of Alien origin (<i>vide</i> A.C.I. 578 of 1918) (8) Date of birth as stated on enlistment (9) (a)	(2) Regiment or Corps <i>109 of Sea Bn</i>	(3) Regtl. No. <i>724947</i>
---	---	-------------------------------------

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

Initials and Rank of
an Officer.

(Authority)

(*date*)

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

(17) Next of Kin	
(18) Demobilizer (<i>f</i>)	(Place)
(19) Pivotal-man (<i>f</i>)	(Date)
(20) Qualifications (<i>g</i>)	or (21) Corps trade and rate

(Signature of
Posting Officer)

(22) Extended {

(23) Re-engaged {

(24) Miscellaneous entries:—

NOTES.—(a) Here enter particulars of any subsequent claim as to actual age after verification by birth certificate (*vide* A.C.I. 4.0 of 191-). (b) Whether direct or voluntary enlistment, or called up under the Military Service Acts. (c) Whether for specified term of years or for duration of the war. (d) Whether "for Home Service only," or "not to be transferred without the soldier's consent." &c. (e) If to be retained on Home Service, period, if specified, to be stated, also authority, and on what grounds. (f) Required for demobilization purposes. (g) Signaller, Shoemaking, &c.

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

Nothing to be written in this margin.

Forms/B. 103/5

HWV(R1460)

3/19

100,000

P2151

W10416—

(5 28 19)

724747

Jenkins, Robert Charles Harold.

(A) Date	(A) From whom received	(B) Authority of Part II. of Orders	(C) Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named	(D) Place of casualty	(E) Date of promotion, reduction, reversion, casualty, &c.	(F) Remarks, and initials and rank of an officer
3-12-18	38 Bn	OO 123	Posted to EORD	Filds	23 ¹¹ / ₁₈	
29 11 18	EORD	- 246	205 from 38 Bn	Leyland	24 ¹¹ / ₁₈	
14-7-19			T.O.S. No. 2 District Depot, Part II, D.O. No. 211	<p><i>[Signature]</i> <i>[Signature]</i> Lieut. 1/o Records. 0m36</p>	<p><i>[Signature]</i> Lieut. FOR O. C. No. 2 District Depot</p>	
		AZOZZZZ	S.O.S. DIS.#2 D.D. 10th Oct. 1919 Pt. 11 D.O.#281	<p><i>[Signature]</i> Capt. FOR O. C. No. 2 D. D.</p>		
18-7-19	38 th Bn	After Orders 3	Awarded M.M. (Auth R.G. 31338 d/14.5.19)	<p><i>[Signature]</i> Lieut. to soft.</p>		

Nothing to be written in this margin.

To be made out in duplicate.

H.Q. 54-21-23-53

DUPLICATE

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

INSTRUCTIONS.

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

(1) Name of Overseas Unit which Soldier joins.....

109th OVERSEAS BATTALION, C. E. F.

(2) Regimental Number.....

724747

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

Robert Charles Herald Jenkins.

(4) Place of Birth.....

Oakwood, Ont.

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

(6) If married, state,

(a) Full name of your wife..... **Nil.**

(b) Present Postal Address..... **Nil.**

(7) Are you a widower? **No.**

(8) Have you any children? **None.**

If so, give number of boys and girls..... **Nil.**

Also their names and ages.....

(9) Is your Father alive? **Yes** **Charles Jenkins,**
If so, state name and address **Little Britian, Ont.**

(10) Is your Mother alive? **Yes** **Minnie Jenkins.**
If so, state name and address **Little Britian, Ont.**

(11) If your Mother is a widow **No.**
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.
No.

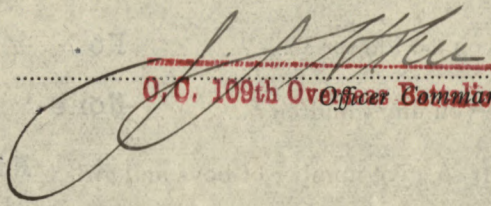
(13) If you have no wife, father, mother or children, state the name and relationship with full postal address of your next of kin, to whom you would desire any communication to be sent concerning you.
Nil.

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

(15) Are you insured? **Yes.**
If so, in what Company? **London Life Insurance Company.**
Have you made arrangements for payment of your Insurance premium **Yes.**

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

Date **June 30th. 1916.**


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

CANADIAN EXPEDITIONARY FORCE.

M.F.W. 44.
1133 (D.P. 250M-12-18.
1772-39-908.

LAST PAY CERTIFICATE

Regimental No. 724747 Rank. Pte. Name Jenkins, A. H.
(Surname first)

Unit No. 2 District Depot. who was* DISCHARGED

On 10-10 1919, to M. U.
*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1-10 to 10-10 1919
 the inclusive date of transfer or discharge.

	Dr.	Cr.
Bal. Dr. or Cr. from prev. month.....		
Regimental Pay..... <u>10</u> days at \$..... <u>1</u> c. <u>10</u>		11 -
Field Allowance..... days at \$..... c. -		35 -
Separation Allowance.....		70 -
Clothing Allowance.....		
Post Discharge Pay.....		
*Other Credits		
Advances		
Separation Allowance and Assigned Pay Cheque no.....		
*Other Charges		
Balance on transfer or on discharge, cheque No. <u>165474</u>	116 -	
Total	<u>116 -</u>	<u>116 -</u>

*Give particulars.

A.C. Rank _____ Name **JENKINS, Robert Charles Harold.** ✓ Reg'l No. **724747** ✓

Unit **109th. Bn.** If in perm. Corps, }
What Unit? }

Married or Single **Single.** ✓

Place and Date of Enlistment **Lindsay. Feb. 9th. 1916.** ✓ Place of Birth **Oakwood, Ont.,** ✓

Name and Address, Next-of-Kin **Charles Jenkins.** ✓

Little Brittain, Ont., ✓ Relationship **Father.** ✓

Assigned Pay Monthly \$ _____ Payable to _____ Relationship _____

Separation Allowance \$ _____ Payable to _____ Relationship _____

N/E. R.B. NS. **16714**

FHE R.L. _____

Category _____

Discharge, Date and Place

Reason

Character

H. W. & V., Ltd.—7165-16.

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS. Taken from Official Documents.
Date.	From whom received.				
C		Arrived in England per H. M. T. 2810 31-7-16			
4.12.16	06109th	SO on tfr. to 38th Bn.	Dritley	4.12.16	Pt II DO 339
13.12.16	38th Bn	T-O-S on tfr from 109th	Emsht field.	6.12.16	Pt II DO 242.
31.3.17.	"	Reported from base. Sick	field	12.3.17	bld 161. A. G. A. (Q)
3.4.17	"	No 12 base field amb	"	12.3.17	" 163 Inf. G. Reg
"	"	No 12 " " "	"	16.3.17	" 163 " " "
23.4.17.	"	Regained unit	"	25.3.17.	" 178 " " "
5.6.17	"	Reported from base. Sick	"	14.5.17	" 213 A. G. A.
12.6.17	"	No 11 base. field amb.	"	"	" 219 Incls. Regs.
"	"	Rep. from base by unit	"	23.5.17	" 219 " "

A.F.B. 103 CHECKED
9 DEC 1916
Dlbrm

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.				
22 3-18.	38th Bn.	Granted one G.C. Badge	Ke. Field.	9-2-18	Pt. I.D. No. 23.
C 12-11-18	EOR	Wounded	" "	14-11-18	Sur Head, R Arm ChA369, R High Rleg & Foot.
5-12-18	38th Bn.	Posted to EOR	" "	23-11-18	Pt. I.D. No. 1234 E.O. No. 50246 5/24-11-18
		M.M.		250/5/6/18 of 24-12-18	RIF 34
18-7-19	EOR	Swal to Canada	- London	14-7-19	# CLB 559
		Sailing			508 MD 2
18-4-19	- do.	Awarded The M.M.	Witley	14-5-19	Lon Gaz: 3133 ⁸
28-4-19	- do.	S/S Invalided			
		to Canada	- do.	14-4-19	- 148

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

War Service Badge.
Class A
No. 15294 issued

This is to Certify that No. 724747 (Rank) PIE

Name (in full) JENKINS, Robert, Charles, Harold. enlisted in
the 109th Battalion

CANADIAN EXPEDITIONARY FORCE at Lindsay, Ontario on the 9th.
day of February 19 16

HE served in ENGLAND & 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 24 Yrs.

Height 5' 6"

Complexion dark

Eyes Blue

Hair Dark Brown

R.C.H. Jenkins
Signature of Soldier

Marks or Scars fac. scars left arm.

scars on both arms, head, right thigh, right foot.

G.O.W. RIGHT THIGH 4-11-18

G.O.W. RIGHT FOOT 4-11-18

GOLD STRIPE ONE.....1

H. Daryeant
Issuing Officer

For O.C. No. 2 District Depot.

Date of Discharge 10th October 1919

Signed at Toronto, Ontario this 10th. day of October 19 19

in Military District No. 72. OCT 10 1919

File Reference No. TORONTO.

No. 2 DISTRICT DEPOT
this 10th. day of October 19 19
OCT 10 1919
TORONTO.

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.

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

.....
Name of Officer

.....
Rank

.....
Appointment

On demobilization the
particulars called for on
the back of this cer-
tificate will not be com-
pleted.

Uniform is not to be worn after
expiration of one month from
date of discharge, except by special
permission of G. O. C. district.

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.				

MILITIA AND DEFENCE
 ASSIGNED PAY
 OVERSEAS CONTINGENTS

To Whom *C. Jenkins*
 Address *Little Britain*
Out

By Whom Assigned *Jenkins R.C.H.*
 Regtl. No. *724747*
 Rank *Plt*
 Corps *109th Bn.*

Rate ~~*15⁰⁰*~~ *Oct 1st 16.00*
2^m 12⁹ 16 add 27¹⁰ 16
20.00 April 17 ①

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			① 2 1/2 March 12/17 10/4/17 Jelt
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				



24 00.1 2.1

1. 1. 1. 1.

1. 1. 1. 1.

1. 1. 1. 1.

DEPARTMENT OF VETERANS AFFAIRS
MINISTÈRE DES AFFAIRES DES ANCIENS COMBATTANTS

DEATH NOTIFICATION
AVIS DE DÉCÈS

TO:
À:

DATE2.3.1972.....

NAME
NOMJENKINS ROBERT CHARLES.....

Service No.
Matricule No°724747.....

CPC No.
CCP No°182544.....

HEARLD.

WVA No.
AAC No°

Information Received from: LETTER FROM WIDOW.

Information reçue de:

Date of Death

Date du Décès .. NOVEMBER. 7. 1971.

Place

EndroitNOT STATED.....

Lindsay Ont

Distribution: WSR-DASG

VI - ASS

DO - BD

HO - BC

Pour le chef,

for Chief, Central Registry Division.
Dépôt central des dossiers.

DEPARTMENT OF STATE
OFFICE OF THE SECRETARY
WASHINGTON, D. C.



Information Research
Information

Dear Sirs:
I am pleased to
hear of your
interest in
this project.

Classified, SR-100
TOP SECRET
SECRET

Very truly yours,
The Secretary

Very truly yours,
The Secretary

724747

Pte Jenkins RCH

\$20.00

DATE	PAY		FIELD ALLOWANCE		WORKING OR SPECIAL PAY		ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS				CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS				
	NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE				AMOUNT		1	2	3	4	1	2				3	4				CREDIT	DEBIT		
			\$	C.						\$	C.																	NO.	DATE
B/P			367	40					2010	387	50			61	86	19	82	22	00	150		253	68	133	82	30	103	82	
July	31	1%	34	10					24	10				268						20		25	36	142	56				
Aug.	31.		34	10					34	10										20		23	57	153	09				
Sept	30		33						33					892	10	71				20		39	63	146	46				

MONTH	PARTICULARS	CR.1	CR.2	PARTICULARS	DR.1	DR.2	DR.3	DR.4	BALANCE	DIFFER. PAY	
1917	B/P								146	46	30.00
Oct	PP	34	10	Assy Pay			20		157	88	
				AR 1023. 23/9 38th	268		20				
Nov		34	10	A.P.	268		20				
	PP	23		AR 1286. 14/10. 38th	357						
				18186. E.P. 30/11.	2433						
Dec	"	34	10	A.P.			20				
1918		67	10	AR 1188. 3/10. 38th	446		20		152	62	
Jan	"	34	10	A.P.	3236						
				AR 1430. 23/11. 38th	1249						
				AR 1457. 27/11 "	525						
				" 300 1776. 27/11 "	9733						
				" 1364. 7/11 "	406						
Feb		34	10	" 1861. 14/12 "	357		20		435	20.00	
	PP	30	80	A.P.	1203	20					
				AR 1656. 1/1/18 38th	446						
				" 1758 2/1 "	357		20		462	9 30.00	
March		30	80	A.P.	803						
	PP	34	10	AR 1842. 14/2 "	446		20				
				" 1919 20/2 "	892						
				" 2010 1/3 "	446		20		42	55 30.00	
		34	10		1784						

* Strike out whichever is applicable.

ASSIGNED PAY. ENGLAND or CANADA. SEPARATION ALLOWANCE. ENGLAND or CANADA.

NAME:- **JENKINS, Robt Chas Harold**
NUMBER:- **724747**

EFFECTIVE DATE:- **4/4/17**
AMOUNT:- **20⁰⁰**

PARTICULARS OF RANK OR APPOINTMENT

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.

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Pte

Chas Jenkins (A2M 10³/₁₇)
Little Britain, Ont.

Father

Stopped 1/1/19

UNIT AND TRANSFERS

ORIGINAL UNIT:- *109R/BW*
DATE ACCOUNT FIRST OPENED:- *1/8/16*

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S F D	UNIT TRANSFERRED TO
			<i>38R/BW</i>

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
<i>18-5-14</i>	<i>1395</i>	<i>Buxton L10</i>	<i>15.07</i>				
<i>16-6-14</i>		<i>SF 3 1/4 16 13 1/4 10 days</i>	<i>1.00</i>				
			<i>41.37</i>				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBSCE ALL'CE
	<i>100</i>	<i>10</i>		

PARTICULARS OF RENDERING NON-EFFECTIVE *(Annullage) Canada 1/1/19 HRD. A 161. HD Buxton 1/1/19 Buxton 286 128 40 286 6 87 03*

MONTH 1918	PARTICULARS	CR 1	CR 2	PARTICULARS	DR 1	DR 2	DR 3	DR 4	BALANCE	DEFERRED	SEPARATION
31 March	Sal And								42.53	30	
April	P.P.	33		AR 77.5/4/18. 38th	8.92			20			
				" 198.18/4 "	3.57				43.06	30	
May	P.P.	33		AR 349. 4/5 18 "	12.49			20			
				" 139 19/5 "	4.46				49.13		
June	P.P.	3410		AR 720. 1/6 "	3.57			20			
				" 84. 15/6 "	8.03				50.53	30	
July	P.P.	3410		AR 919. 1/7 "	11.60			20			
				" 997 1/7 "	4.46				55.91	30	
Aug	P.P.	3410		AR 1078. 1/8 "	8.92			20			
				" 1166 19/8 "	3.57				62.67	30	
Sept.	P.P.	33		AR 1268. 29/9 "	7.14			20			
				" 1343 16/9 "	3.57				68.53	30	
Oct	"	3410		AR 1472-12 6/10 18	7.46			20			
				1718. 15-10-18.	3.73				71.44		
					11.19			20			
Nov.	"	33		AR 1472-12 6/10 18				20			
Dec	"	3410		Hosp Exp 89975. 11/12/18	4.87			20			
1919	"	3410		Forward	4.87			20	107.77	30	
Jan	"	16124						60			

Awarded M.M. L. Fayette 31338 14/1/19 (803-3112-18719)

COMPILED BY *John Doug*
CHECKED BY *[Signature]*

NUMBER 724747 RANK Pte

NAME JENKINS. R. C. H.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4.	BALANCE	DEFERRED	SEPARATION
1919				Forward					107 77	30	
July	PP	30 80		13989 22.1.19 Grand St. Bus	487-						
				Cap				20			
				15065 12.2.19 ✓	487						
March	✓	34 10		Cap	974			20	122 93		
		64 90			974			40	122 93	30	
April	✓			AR 51 3/4/19 ✓	487						
	Atmny	67 10		360 14/4/19 ✓	487						
				Cap Atmny				40			
				1113 8/5/19 ✓	487						
				1228 16/5/19 ✓	2433				111 09		
		67 10			3894			40			
June	PA	33		Cap				20	124 09		
	Interest on deferred pay 30.6.19	4 31		AR 1395 28/7/19 Buxton TP	4867				128 40 30		
	S.F. 10d. 3/6 12/1/19. R.D. 140 E.O.R.D. 16.6.19	7 30		N 6192 24/6/19 (Spool Kund)	487						
		44 61		N 6596 17/6/19 ✓ ✓	1460				67 56		
		44 61			6814			20			
Aug				AR 7141 11/7 59 (Wash) (End)	487				62 69		
					487						
				Q4005 (797) 38-Bn. 11/7.9 8	578				56 91		
					578						

Balance back 508 808 14/7/19

CASUALTIES

SHORT FORM.
PROCEEDINGS ON DISCHARGE.
(Demobilization.)



War Services Badge

Class *A*

No. *152394*

EG

1. No. #724747

2. Rank PTE.

3. Name JENKINS, Robert, Charles, Harold.

4. Unit 109th Battalion (#2 D.D.)

5. Date of Discharge *OCT 10 1919* Place *TORONTO, ONT.*

6. Reason for Discharge

"MEDICALLY UNFIT"

7. Authority (*#2 D.D. Part 11 Daily Order #281*)

8. Proposed Residence after Discharge

Little Britain, Ontario.

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. ?

Robert Jenkins

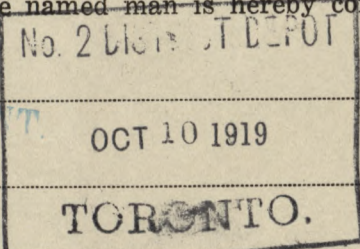
Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place *TORONTO, ONT.*

Date *OCT 10 1919*



Signature

H. A. [Signature]

(C.C. Discharging Unit.)

O.C. No. 2 District Depot.



PROGRAM OF DISCHARGE

(Continued)

1. Name of Soldier		2. Grade	
3. Unit		4. Date of Discharge	
5. Reason for Discharge		6. Proposed Discharge after Discharge	
7. Remarks			
8. Signature of Soldier			
9. Signature of Discharge Officer			
10. Date			
11. Place			
12. Remarks			

CONFIRMATION

The discharge of the above named person has been confirmed.

No. 100-1019
 1919
 TORONTO

201 13 1919

Signature of Discharge Officer

LIST OF RESEARCH DOCUMENTS

Medical Form W-100	Attention Paper, Histology
Medical Form W-100	or Pathologist's Report
Medical Form W-100 or A.F.P. 100	Field Contact Sheet
Medical Form W-100 or A.F.P. 100	Research Form
Medical Form W-100	Last Page Certificate
Medical Form W-100	Certificates that missing documents are not present
Medical Form W-100 or A.F.P. 100	Medical History Sheet
Medical Form W-100 or A.F.P. 100	Proceedures of Medical Exam
Medical Form W-100	Dental History Sheet
Medical Form W-100 or A.F.P. 100	Medical Record
Medical Form W-100	Regional Contact Form
Medical Form W-100	Company Contact Sheet

[Faint handwritten signatures and text, possibly including a name like "John Doe" and a date]

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

Cat. Wesley Lavelle Hospital.
 Ward 12 No. of Bed _____ Date _____

Reg. No.	Rank and Name.	Corps.	Part to be X-Rayed.
724747	Pt Jenkins	38 Caus.	Rt. forearm, Rt. thigh, Rt. foot.

SHORT HISTORY OF CASE.

(To be completed by M.O. i/c case.)

Wounded 4.11.17.


? F.B.


? Bony injury foot.


REPORT ON RESULT OF X-RAY EXAMINATION.


(To be completed by Radiographer.)

No. of Plate _____

R. thigh - FB -  just above level of small trochanter & about equidistant from it & from head of femur.

R. forearm - FB -  at junction upper & middle 1/3 of radius & distal & posterior to it.

R. foot - FB -  in sole at level of bases of 2nd & 3rd

metatarsals -  lies free from bone. Minute fragments of metal scattered in region of head of 1st & 2nd metatarsals.

The largest probably embedded in head of 1st metatarsal of which there is a comminuted fracture. Comminuted fracture of prox. phalanx of

Signature of Radiographer

M. J. White

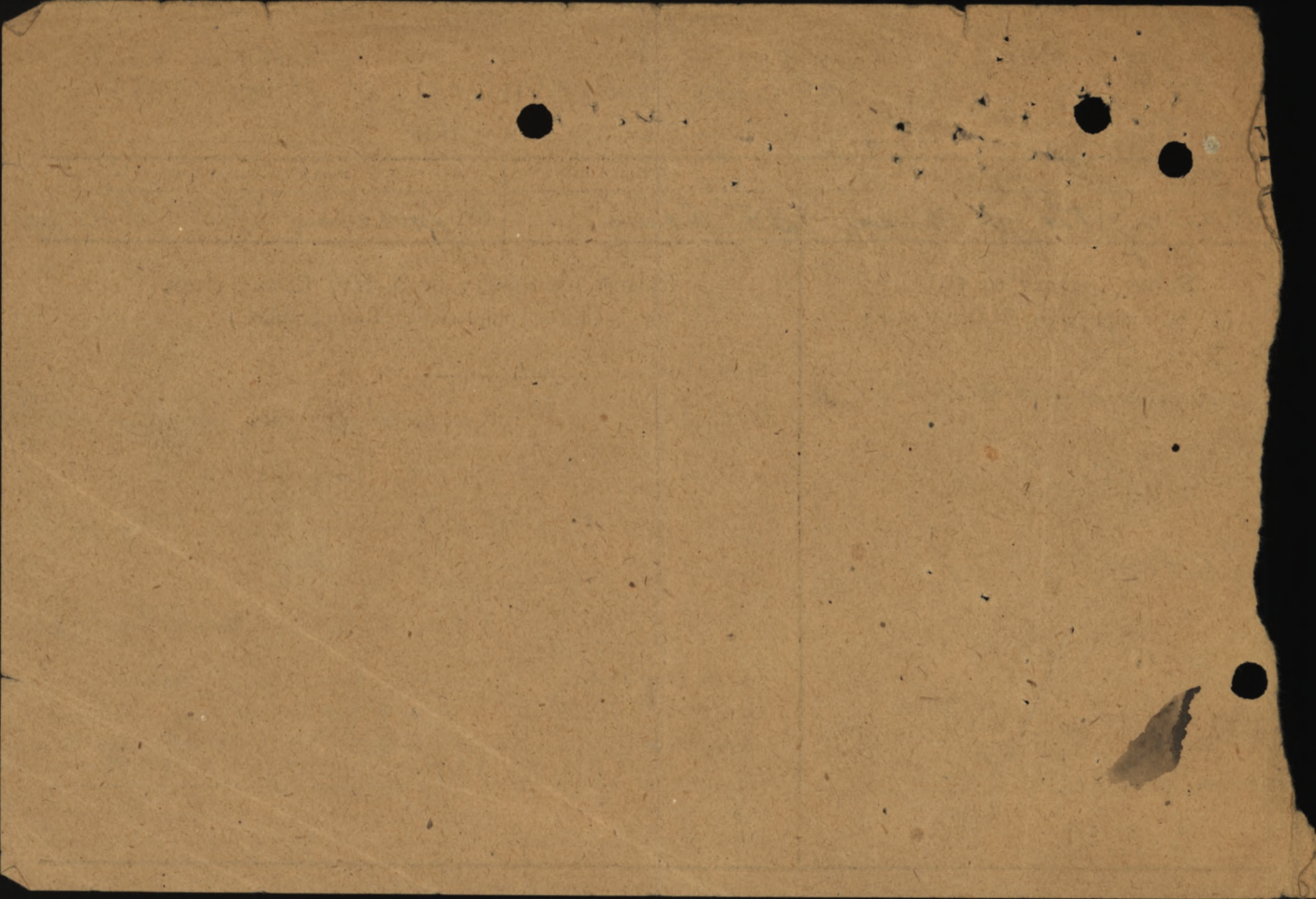
gt. toe involving articular surface - fracture of distal sesamoid.

Signature of M.O.

A.P. Dent

Date 26.11.18.

Date 2. XII. 18.



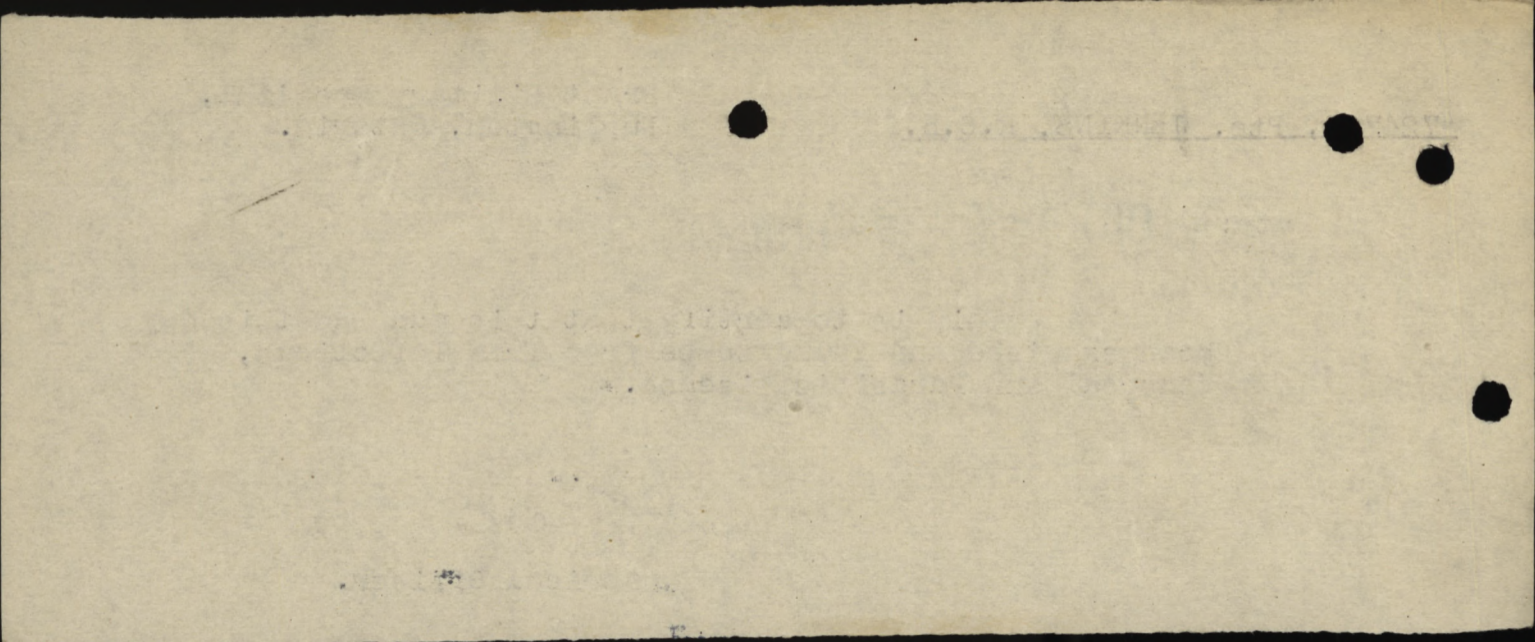
#7247, Pte. JENKINS, R.C.H.

Brant Military Hospital,
Burlington, Ontario.

Date: OCT 6 - OCT 6 - 1919

This is to certify that this man has this day
been examined and found to be free from Infectious,
Venereal and Parasitic Disease.

J. B. ...
Capt. ...
Medical Officer.



GRANVILLE CANADIAN SPECIAL HOSPITAL
TREATMENT DEPARTMENT

Buxton, *1-5-19*.....191.....

To— *B.*
Officer i/c Examining Board,
G.C.S.H., Buxton.

I would beg to draw the marginally named case to
your notice, please.

No. *224.247*
Rank. *Jenkins Plt*
Name
Ward

*Suggest leg toe being
splinted at night to
encourage flexion.*

James Patterson
Capt. C.A.M.C., Officer i-c Treatment Department.

TO BE ATTACHED TO PATIENT'S MEDICAL CASE SHEET, PLEASE.

Rowen

TREATMENT DEPARTMENT

GENERAL CLERK

MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

AW
BURLINGTON
FURLOUGH

- 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. 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."
- 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.
- Special care is required in answering question 9. Read the questions carefully. All questions must be answered.
- If space provided under any section is insufficient add another sheet. Such sheets must be initialled by the Medical Board.
- A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board."
- Under no circumstances may information other than that in sections 7, 8, 9 and 10 be communicated to the invalid, directly or indirectly.
- 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 QESH. Buxton. DATE MAY 26 1919.

1. 1 (a) Unit 38 CANV. (b) Regimental No. 724747 (c) Rank PTE
 (d) Surname JENKINS (e) Christian name R.C. HAROLD
 (f) Home address LINDSAY. ONTARIO.
 (g) Next of Kin CHARLES JENKINS. (h) Relationship FATHER.
 (i) Address of Next of Kin LITTLE BRITAIN. ONTARIO.

2. Age last birthday 24 Date of birth 12 MAY - 1895.
 3. Enlistment, or Appointment (if an Officer) (a) Place LINDSAY - (b) Date FEB 4 1916

4. Personal description:
 (a) Height 5' 6" (b) Weight 165. (c) Complexion Dark
(stripped)
 (d) Colour of hair Dark. (e) Colour of eyes Blue (f) Identification marks, Scars, etc. IN VACCINATION. LEFT ARM.

5. Former trade or occupation BARBER.

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
	<u>3 3/12</u>	<u>—</u>

PATIENTS STATEMENT	PERIODS	
	From	To
Canada	<u>FEB 4 - 1916</u>	<u>July - 24 - 1916</u>
England	<u>July - 29 - 1916</u>	<u>DEC - 4 - 1916</u>
France or other theatres of War	<u>DEC - 4 - 1916</u>	<u>Nov 24 - 1916.</u>

7. Original disease, or injury (i) FRACTURE COMPOUND COMMINUTED. RT 1st METATARSAL AND PROXIMAL PHALANX -
(ii) LACERATED WOUND RIGHT THIGH UPPER THIRD.
 (a) Date of origin 4 NOV - 1918 (b) Place of origin VALENMAYENNES
 (c) Cause (i) + (ii) SHRAPNEL.

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.)

i. Ankylosis of right 1st metatarsophalangeal joint | Partial loss function of right foot

ii. Adherent scar right thigh upper third | Limitation in movement of thigh Rt.

9. Present condition— (a) (Before completing this section the invalid should be stripped, and subjected to a thorough physical examination. Important, to be a full description of the present disabling condition, or conditions only. "History" must be recorded in Section 10. Describe all abnormalities, anatomical and functional, contributing to present disability; objective findings to be stated first, then subjective findings.)

1) Punctured scar over proximal articulation metatarsophalangeal. Scar dense. Ankylosis of joint - no sinus. The distal part of great toe is tilted forward and more or less fixed. Palpation of this area is tender no spur formation

2) There is a long dense adherent and not partially healed scar lying in middle third of right thigh in middle over vessels. There is marked interference with function of underlying muscles. Flexion of thigh 100°. Extension very slight - adduction and abduction moderate. Rotation of thigh associated with some pain and stiffness. The disability is largely due to diffuse phlebitis emanating from region of wound. Pulsation in vessels of ankle easily palpable.

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

- Nervous System..... no Cardio-Vascular System..... no Genito-Urinary System..... no
(If pulse rate is abnormal, B. P. will be taken.) (Albumen and Sugar will be excluded.)
- Special Senses..... no Respiratory System..... no Integumentary System..... no
- Disturbances of Mentality..... no Digestive System..... no Muscular System..... no
- Osseous and Joint Systems..... no Any other general condition..... no

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

Admitted 1 Cav CCS. 4-11-17. Penetrating wd. Rt foot. Comp. Com. Fract. metatarsal bone 1st. track excised. drainage established. Penetrating wd Rt thigh. deep. popliteal vein cut. this was ligated. no FB found. Penetr. wd. arm incised. FB not found. (18-11-18) (wd of head. right side - depressed fract. frontal region. decompression carried out. no dual injury - 10-11-18 admitted to 20 General.)

28 Nov. 18. North Hants war Hosp. dressings on.
Jan. 13. 19. to GHQ. Buxton dressings.

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).)

15 yrs ago infection in region of left face - cellulitis - see for 2 mos.

Opneiditis 10 yrs ago - no operation - Erysipelas & eczema four years

before enlistment - Pneumonia 1913 - no complications - depressed fracture of

(c) (Here give a description of wounds, scars, and deformities. small wds of both arm - superficial no disability)

Scars of old lacerated wd of right arm on undersurface and post surface - injury received 2 yrs prior to enlistment.

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? 1. Permanent 2) 4 mos. (will reduce)

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

Excision of wds of Rt foot. Rt thigh. Right side of head. Rt arm. Rt arm - manage epinephrine motion.

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

depressing 100% to thigh and manage and passive motion to foot.

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

17. Recommendations. For Dis.

John Luerbach Lane 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).

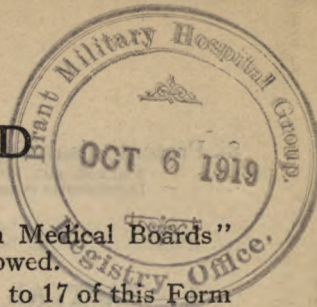
I, the undersigned, Harold Jenkins Pt have heard the description of my disability and present condition read, and am satisfied (or not satisfied) with it. (If dissatisfied, statement should follow.)

I complain in addition of nil

* R.C. Jenkins Rank. Signature of invalid examined.

THIS FORM WILL BE USED FOR ALL RANKS
MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS



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

BRANT MILITARY HOSPITAL. M.D.#2. OCT 6 1919
STATION. Burlington, Ontario. DATE.....

1. 1 (a) Unit #2 D.D. (b) Regimental No. 724747 (c) Rank Pte.
 (d) Surname JENKINS, (e) Christian name Robert C. Harold.
 (f) Home address Little Britain, Ontario.
 (g) Next of Kin Charles Jenkins. (h) Relationship Father.
 (i) Address of Next of Kin Little Britain, Ontario.
2. Age last birthday 24 Date of birth May 12, 1895.
3. Enlistment, or Appointment (if an Officer) (a) Place Lindsay. (b) Date Feb. 9, 1916.
4. Personal description:
 (a) Height 5' 6" (b) Weight 150 lbs. (c) Complexion Dark
(stripped)
 (d) Colour of hair D. Brown (e) Colour of eyes Blue (f) Identification marks, Scars, etc. Scars on both arms, head, right thigh, right foot.
5. Former trade or occupation Farmer.

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).	Years <u>3</u>	Days <u>208</u>
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	PERIODS	
	From	To
Canada	<u>Feb. 9, 1916.</u>	<u>July 25, 1916.</u>
England.....	<u>July 1916.</u>	<u>Dec. 1916</u>
France or other theatres of War.....	<u>Dec. 1916.</u>	<u>Nov. 28, 1918</u>
<u>England & Canada.</u>	<u>Nov. 1918.</u>	<u>to date.</u>

7. Original disease, or injury.....
(1) G.S.W. RIGHT THIGH.
(2) G.S.W. RIGHT FOOT.
 (a) Date of origin 1. & 2. Nov. 4, 1918. (b) Place of origin 1. & 2. France.
 (c) Cause 1. & 2. Exposure while on active service.

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.)

1. PARTIAL LOSS OF FUNCTION OF RIGHT LEG.

2. PARTIAL LOSS OF FUNCTION OF RIGHT GREAT TOE.

9. Present condition—(a) (Before completing this section the invalid should be stripped, and subjected to a thorough physical examination. Important, to be a full description of the present disabling condition, or conditions only. "History" must be recorded in Section 10. Describe all abnormalities, anatomical and functional, contributing to present disability; objective findings to be stated first, then subjective findings.)

(1) OBJECTIVE SIGNS: (1) There is a large adherent scar about six inches length in depth on ant. aspect of right thigh. There is tenderness over scar and along the inner margin of thigh, from groin to knee. There is $1\frac{1}{2}$ " enlargement of right thigh and calf. Flexion of right thigh limited to right angle 90° .

(1) SUBJECTIVE SYMPTOMS: Weakness in right leg and thigh with cramps in calf of right leg usually in mornings pain in leg and thigh in evenings after walking about on it throughout the day.

(2) OBJECTIVE SIGNS: There is a large adherent scar on superior surface right great toe, and small scar on plantar surface of foot. The metatarsophalangeal joint of great toe is ankylosed with some shortening of the great toe.

(2) SUBJECTIVE SYMPTOMS: Loss of movement of great toe with severe, sharp pain in joint upon pressure on ball of toe.

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

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

Special Senses..... NO..... Respiratory System..... NO..... Integumentary System..... NO.....

Disturbances of Mentality..... NO..... Digestive System..... NO..... Muscular System..... NO.....

Osseous and Joint Systems..... NO..... N. Any other general condition..... NO.....

No varicose veins, no varicocele, no piles, no hernia, no goitre.

10. (a) History (of the condition referred to in Section 9 (a).) Was wounded on Nov. 4, 1918 in right great toe and thigh. Was sent to hosp. where the shrapnel was removed from thigh. The femoral artery and vein were in all probability severed. The shrapnel was also removed from right foot by means of a plantar incision. Has been in hosp. recovering ever since. Had a good deal of Haemorrhage at time of wound. Was given gum arabic intravenously at C.C.S. at present time wounds are healed, and he is feeling fairly well with exception of above complaints.

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).)

1. S.W. of right temporal region with compound fracture of right temporal bone. Good recovery. No disability. at present.

2. S.W. of right forearm. Where there is a hernia at present about size of nutmeg. No disability.

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

11.-(a) Did the disabling condition have its origin before enlistment? 1. & 2. 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.)

1. & 2. Contracted on service.

12. Was the disability caused, or aggravated; (a) by intemperance, or improper conduct; or (b) by unreasonable refusal to accept treatment? 1. & 2. No. A & B.

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

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

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

Hospital since Nov. 4, 1918. Six operations. Massage treatments, etc.

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit? NO. (If the answer is "yes" state nature of treatment required and probable duration)

16. Can the former trade or occupation be resumed? NO. (If not, briefly state why)

17. Recommendations

DISCHARGE AS MEDICALLY UNFIT FOR FURTHER SERVICE.

S. P. Kirby Capt. Comd. 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, Pfc R. C. Jenkins 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

as.

R. C. Jenkins 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 but add that in 9 (a) ankylosis of great toe is in a position of slight dorsiflexion (10°)

19. Is the invalid fit for

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

20. It is certified that the invalid

(a) ~~Does not 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.)

AS MEDICALLY UNFIT FOR SERVICE.

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.

BRANT MILITARY HOSPITAL
PLACE.....

DATE..... OCT 6 1919

A. Collins M.D. President,
H. Burns M.D. 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.

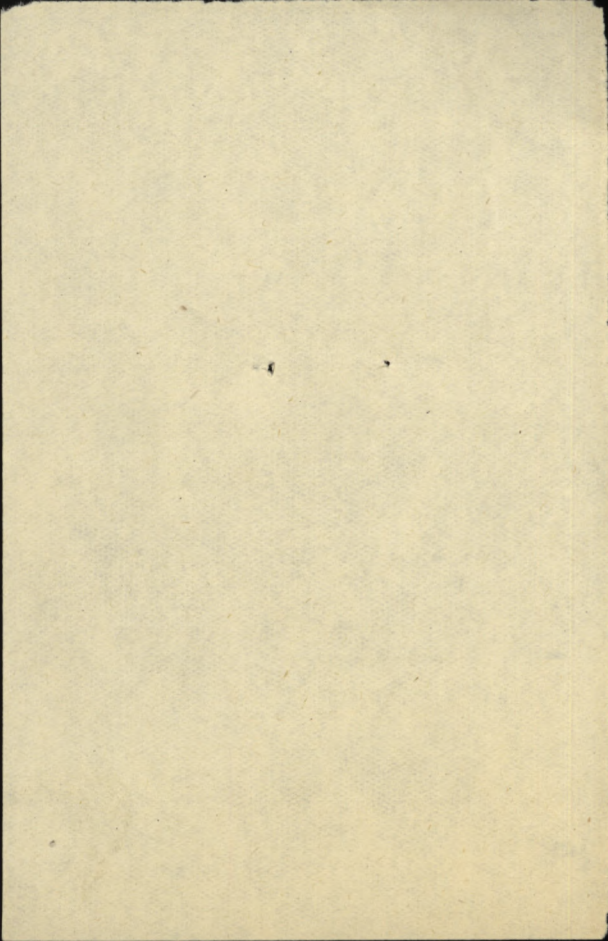
..... President.
PLACE.....
DATE..... Members

APPROVED BY
APPROVED
Assistant Director of Medical Services.
DATE..... OCT 8 1919
A. Christieau CAPT.
FOR A. D. M. S. M. D. 2

APPROVED BY
Director-General of Medical Services.
DATE.....

Shrapnel 4
Flesh
severe
Lower extremity
Thigh 20191

Shrapnel
comp fracture
Severe
Lower extremity
Loos 22198
operation
excision of bone.



Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

1427

Apr 1/17

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

<i>20</i>			
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PARTICULARS OF SEPARATION ALLOWANCE

No. *724747*
 Rank *Pvt.* Promoted _____ Reverted _____ Discharge _____
 Soldier's Name *R. C. H. Jenkins*
 Battalion *109th Bn.*
 Beneficiary _____
 Relationship _____
 Address _____

PARTICULARS OF ASSIGNMENT

Name *C. Jenkins*
 Address *Little Britain Ont.*
 Change of Address
 1 _____
 2 _____
 3 _____
 4 _____

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
<i>Dec. 31/17</i>			<i>270</i>	<i>270</i>	
<i>Jan 1/18</i>	<i>67684</i>		<i>20</i>	<i>20</i>	<i>P</i>
<i>Feb</i>	<i>E 65803</i>		<i>20</i>	<i>20</i>	<i>S</i>
<i>Mar</i>	<i>2 98946</i>		<i>20</i>	<i>20</i>	<i>S</i>
<i>Apr</i>	<i>J 13333</i>		<i>20</i>	<i>20</i>	<i>S</i>
<i>May</i>	<i>7 9185</i>		<i>20</i>	<i>20</i>	<i>✓</i>
<i>June</i>	<i>6 19227</i>		<i>20</i>	<i>20</i>	<i>✓</i>
<i>July</i>	<i>R 28932</i>		<i>20</i>	<i>20</i>	<i>✓</i>
<i>Aug</i>	<i>7 34615</i>		<i>20</i>	<i>20</i>	<i>✓</i>
<i>Sept</i>	<i>L 43242</i>		<i>20</i>	<i>20</i>	<i>✓</i>
<i>Oct.</i>	<i>J 55596</i>		<i>20</i>	<i>20</i>	<i>✓</i>
<i>Nov.</i>	<i>2 52138</i>		<i>20</i>	<i>20</i>	<i>✓</i>
<i>Dec.</i>	<i>K 65282</i>		<i>20</i>	<i>20</i>	<i>✓</i>
<i>Jan.</i>	<i>E 75669</i>		<i>20</i>	<i>20</i>	<i>✓</i>
<i>Feb</i>	<i>2 77400</i>		<i>20</i>	<i>20</i>	<i>-</i>
<i>Mar</i>	<i>9 83974</i>		<i>20</i>	<i>20</i>	<i>-</i>
<i>Apr</i>	<i>H 4350</i>		<i>20</i>	<i>20</i>	<i>-</i>
<i>May</i>	<i>U 7606</i>		<i>20</i>	<i>20</i>	<i>✓</i>
<i>June</i>	<i>R 9738</i>		<i>20</i>	<i>20</i>	<i>✓</i>
<i>July</i>	<i>2 11962</i>		<i>20</i>	<i>20</i>	<i>✓</i>
			<i>650</i>	<i>650</i>	

9508-R-18

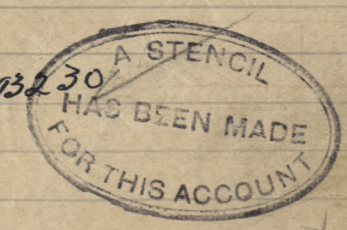
A.P. rate Oct. 1/16. 15⁰⁰ April/17. 20⁰⁰

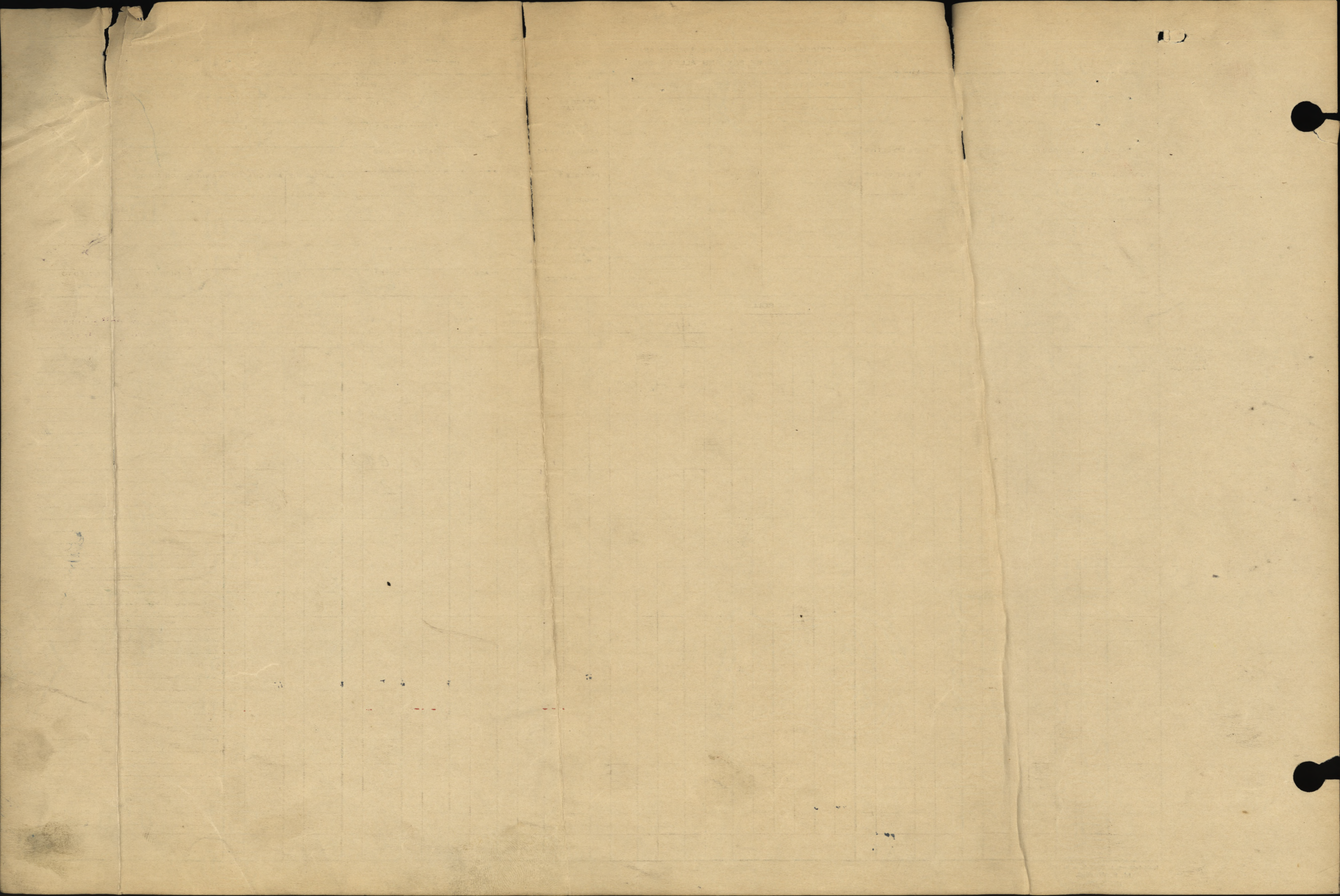
1919

M. F. W. 128
400M-6-17-1772-39-141
L. L. 23220-M. & D. 1583

31.7.19.... A/c Closed
 Ret'd per *Essequibo*
 Date *25.7.19* by *31.7.19*
 M.A.# *2* Clerk *Johnson* *MB093230*

AUDITED.





Cases _____

No. _____

Rank and Name _____

Disease _____

Date of admission _____

Dates of Observation

11 12 13 14 15 16 17 18

Days of Disease

Temperature Fahrenheit

Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time
A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.

107°

106°

105°

104°

103°

102°

101°

100°

99°

98°

97°

Dusted

Pulse per Minute

84

Respirations per Minute

Motions per 24 hours

