

D. Coy.
at. Schum

Report H/3/16

MAR 1 1916

ATTESTATION PAPER.

109th OVERSEAS BATTALION, C. E. F.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

No. 724037

Folio.

ORIGINAL

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

- 1. What is your surname?..... *Kingsborough*
- 1a. What are your Christian names?..... *James Cleveland*
- 1b. What is your present address?..... *Dunford*
- 2. In what Town, Township or Parish, and in what Country were you born?..... *Bobcaygeon*
- 3. What is the name of your next-of-kin?..... *Thomas Kingsborough*
- 4. What is the address of your next-of-kin?..... *Dunford Ont Canada*
- 4a. What is the relationship of your next-of-kin?..... *Father*
- 5. What is the date of your birth?..... *Sept. 20 1886*
- 6. What is your Trade or Calling?..... *Farmer*
- 7. Are you married?..... *no*
- 8. Are you willing to be vaccinated or re-vaccinated and inoculated?..... *Yes*
- 9. Do you now belong to the Active Militia?..... *no*
- 10. Have you ever served in any Military Force?..... *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, *James Cleveland Kingsborough*, 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..... *MAR 1 1916*..... *James C. Kingsborough* (Signature of Recruit)
W. C. [unclear] (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *James Cleveland Kingsborough*, 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..... *MAR 1 1916*..... *James C. Kingsborough* (Signature of Recruit)
W. C. [unclear] (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..... *Friday*..... this..... *MAR 1 1916*..... day of..... *Mar*..... 191.....
[Signature] (Signature of Justice)

Description of James Cleveland Kingsborough on Enlistment.

Apparent Age.....29 years.....6 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.....6 ins.

Chest measurement { Girth when fully expanded.....42 ins.
 Range of expansion.....4 ins.

Complexion.....Fair

Eyes.....Blue

Hair.....Light Brown

End of middle finger right hand off.

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

CERTIFICATE OF MEDICAL EXAMINATION.

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

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

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

Date.....MAR 1 1916 1916.

Place.....Sunday

.....James McCulloch Capt.
 Medical Officer
 109th Overseas Battalion, C. E. F.

*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.

James Cleveland Kingsborough 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. C. King Lt. Col. (Signature of Officer)
 O. U. 109th Overseas Battalion, C. E. F.
 Date.....MAR 1 1916 1916.

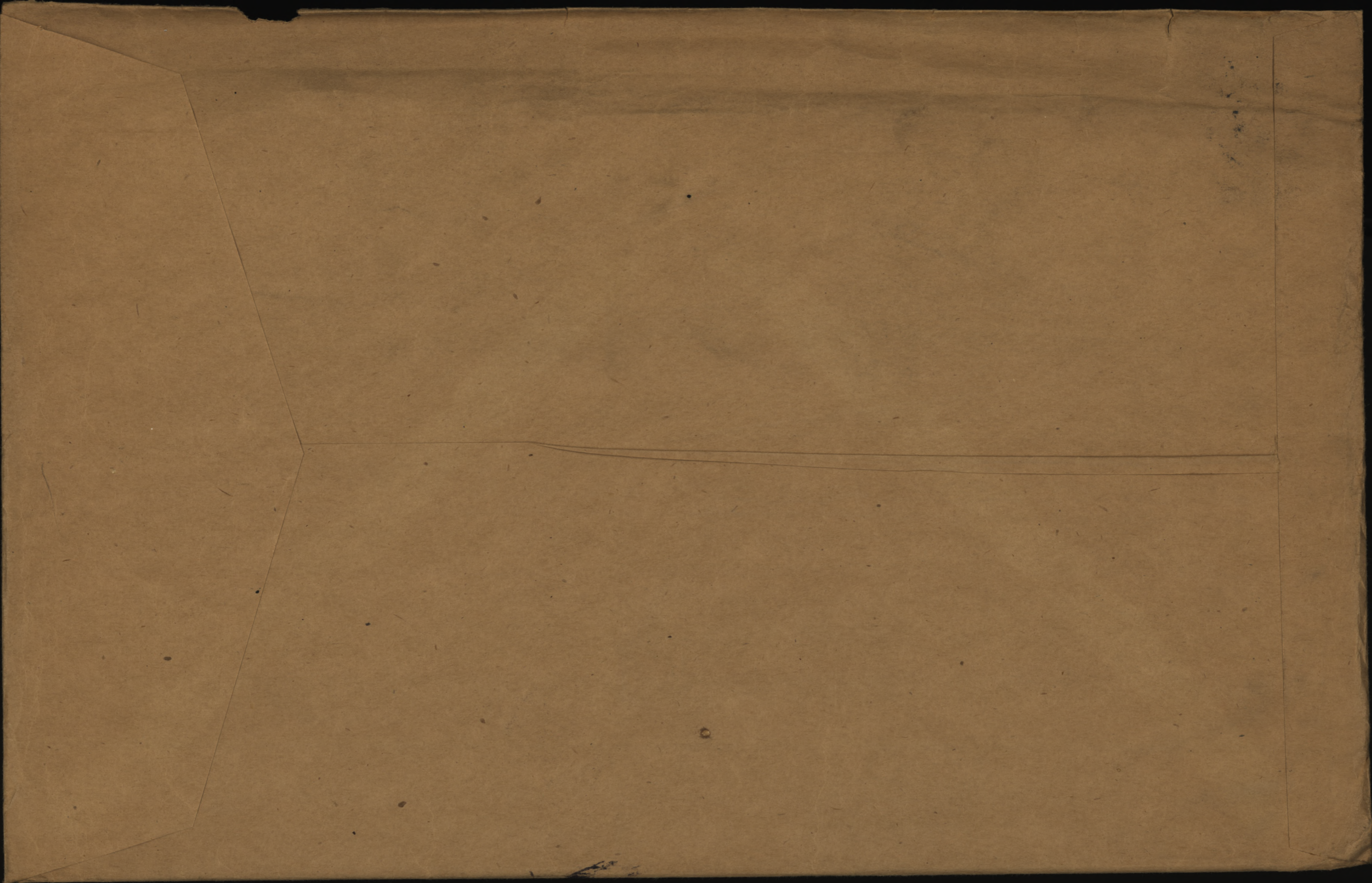
REGIMENTAL DOCUMENTS

NAME *Kingsborough James C (Sgt)* REGT. NO. *724037* UNIT *10th Inf Bn 68* H. Q. FILE NO. _____

CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
1 TESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
2 CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
TRAINING HISTORY SHEET (M.F.W. 113)					
1 FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
2 MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
1 DENTAL HISTORY SHEET (M.F.B. 465)					Category
1 MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)				09931	<i>Smith</i>
MEDICAL EXAMINATION (M.F.W. 129)					
TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
LAST PAY CERTIFICATE (M.F.W. 44)					
1 PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
PARTICULARS OF CHARACTER (A.F.W. 3226)					
1 COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
<i>7467</i>					
<i>7643</i>					
<i>pay cards R122</i>					

(M)

(H)



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 724037

(3) Full Name of Soldier James Beavilana Kingsborough

(4) Place of Birth Bobcaygon 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? No

If so, give number of boys and girls nil

Also their names and ages nil

(9) Is your Father alive? *Yes Thomas Kingborough*
If so, state name and address *Durford Ont.*

(10) Is your Mother alive?
If so, state name and address *Leticia Kingborough*

(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.
nil

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

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

(15) Are you insured? *yes*
If so, in what Company? *Manufacturers Life*
Have you made arrangements for payment of your Insurance premium? *yes*
If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.

Date *July 11/16*
[Signature]
Officer Commanding.
O.C. 109th Overseas Battalion, C.E.F.

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MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

To Whom ~~Mr~~ John Carew
 Address Lindsay
Unit

By Whom Assigned Kingsborow J. C.

Regtl. No. 724037

Rank Pte.

Corps 109th Bn. "A Coy"

Rate ~~22⁵⁰/₈₈~~ 20⁰⁰/₁₀₀ Oct 1/16

2^m 19/9/16. app 3/11/16.

PAYMENTS

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



1941
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1941
1



1

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

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

Sheet No. 2.

Mr John Carew

PAYMENTS.

Name of Soldier

Kingsbrow J. G.

724037 "A Coy" Pte.

109th B'n

L. L. Job 310.-Req. 6574.

Month.	Year.	Cheque No.	Amt.	Remarks.
				22.00 20 ⁰⁰ oct. 1st '16 AUG 1 1916
April	1916			
May				
June				
July				
Aug.		P15549	22	
Sept.		L17137	22	
Oct.		L21923	22	
Nov.		S28760 1818	1818	Nov chq. 18 ⁰⁰ overpaid for Oct.
Dec.		F33265	20	20 ⁰⁰ + return
Jan.	1917	M39073	20	
Feb.		M44946	20	
March		P1005	20	20 <i>OK</i>
April		B2757	20	20 <i>OK</i>
May		C9549	20	
June		C15080	20	OK
July		E23015	20	C
Aug.		O30085	20	
Sept.		Q36547	20	OK
Oct.		O42850	20	
Nov.		P48902	20	
Dec.		S3576520	20	
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

OK

OK

344⁰⁰ *J.G.*

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

PAYMENTS.

Name of Soldier _____

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.				

A. C Rank *Private* Name KINGSBOROUGH, James Cleveland, Reg'l No. 724037
 Unit 109th. Bn. If in perm. Corps, }
 What Unit? } Married or Single Single.
 Place and Date of Enlistment Lindsay. Mar. 1st. 1916. Place of Birth Bobcaygeon.
 Name and Address, Next-of-Kin Thomas Kingsborough,
Dunsford, Ont., Canada. Relationship Father.

Assigned Pay Monthly \$ _____ Payable to _____
 Relationship _____

Separation Allowance \$ _____ Payable to _____
 Relationship _____

N/E. R.B. No. 14907
 File R.L. CAN.O
 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.				
Arrived in England per H. M. T. 2810 31-7-16					
5. 8. 16	D.C. 109 th	apptd Prov. Cpl	Odency	5-8-16	Pt II D.O. 28 + D.O. 285
29-9-16	Do	Appld Act Sergt	Bramshott	28-9-16	Pt II D.O. 273
8. 12. 16	Do.	SD Son transf. to 124 th Bn	Witley	8.12.16	" " 343
9. 12. 16	D.C. 124 th	70.S. fa-109 th Deprived of pay & appointment for allowing to escape a person committed to his charge.	"	"	" " 265
3. 1. 17	"	"	"	3. 1. 17	" " " "
9-3-17	124Bn	Emb for France	Witley	9*3*17	PtII DQ68
26.12.17	—	apptd as L/C with pay	Pt Field	26.10.17	— 154
25.1.18	—	Comprsed L/C. Now known as 124 th Bn	" "	26.10.17	— 5
Etn Can-ENG 10-318					

A.F.B. 103 CHECKED
 19 MAR 1917

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
Date.	From whom received.				
13.5.18	124 th P.N.K.	Appointed Cpl (pay)	L.C. Field	29.3.18.	P.I.D.O. 33.
8.6.18	—	CONFIRMED IN RANK of Corp'l	Cpl —	29.3.18	P.I.D.O 38.
2-7 18	10th, Bn' C.E.	T.O.S. from 124th P.N.K	Field	30.5.18	DO-1, 124th DO, 42.2 / 7, 18
2.8.18	"	appt'd A/Serjt paid	Cpl Field	24.5.18	P.I. 11.
5.8.18	"	Confirmed Sergeant	A/Sgt "	19.7.18	- 12.
21-5-19.	P. Wing C.C.C.	T.O.S. from 10 Bn' C.E.	Sgt. Whitley	20-5-19.	D.O. 33.
6-6-19	P. Wg CCC	SOS TO CANADA	Witley	6.6.19	DO 44.
			83 - I	6-6-19.	

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

WAR SERVICE BADGE.

CLASS "A" No. _____

THIS IS TO CERTIFY that No. 724037 (Rank) Sgt

Name (in full) James Cleveland Kingsborough enlisted in
the 109th Battalion

CANADIAN EXPEDITIONARY FORCE at Lindsay on the 1st
day of March 1916

HE served in France with 124th Bn and 10th C.E. Bn.

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

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

Age 32 years

Height 5 ft 6 ins

Complexion Fair

Eyes Blue

Hair Light Brown

Marks or Scars _____

Middle right hand
amputated.

J. C. Kingsborough
Signature of Soldier

G. J. Gurnell
Issuing Officer

Date of Discharge **No 2 DISTRICT DEPOT**

For
O.C. No. 2 District Depot.

Rank _____

JUN 15 1919

TORONTO

Date **JUN 15 1919** 19____

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

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

3400

No. 10

THIS IS TO CERTIFY that No. 10 (Rank) [illegible]

has been [illegible] in [illegible]

the [illegible]

CANADIAN EXPEDITIONARY FORCE at [illegible] on the [illegible]

day of [illegible] 1915

1915

[illegible]

and he has now been discharged from the service by reason of [illegible]

[illegible] Demobilization [illegible]

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

Mark or Scars [illegible]

[illegible]

[illegible]

[illegible]

[illegible]

[illegible]

[illegible]

Issuing Officer [illegible]

For [illegible]

[illegible]

Rank [illegible]

[illegible]

Date [illegible]

TORONTO DISTRICT DEPOT

If the holder of this certificate will be issued, any person finding same is requested to forward it to the [illegible] Office, Ottawa, Canada.

24

W. S. B. Glass A.
 Fill Only.—Unit, Number, Rank and Name.

24

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

Casualty Form—Active Service.

250a.—1-16.
 H. Q. 1772-39-920.

Unit, Regiment or Corps 100th BATTALION CANADIAN INFANTRY.

Regimental No. 424034 Rank Private Name Kingsborough James Cleveland

Enlisted (a) 1.3.16 Terms of Service (a) D of W Service reckons from (a) 1.3.16

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

Extended 100 Re-engaged 100 Qualification (b) Farmer

Report Date	From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
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		Embarked Canada	Halifax	24.7.16.	
		Disembarked England	Liverpool	31.7.16.	
5/8/16	169 th Bn	Appointed A/Sgt	Oscney	5.8.16.	Part II Order 218 & 285
29/9/16	169 th Bn	Appointed A/Serjt	Bramshott	28.9.16	Part II Order 324/3.
8.12.16	OC 109	Transferred to 124 th	Witley	8.12.16	D.O. Pt II #43
					<p><i>W. S. B. Glass</i> CAPTAIN, ADJUTANT, 100th BATTALION CAN. INFANTRY.</p>
9-12-16	124th. Bn.	Taken on strength of 124th. Bn., C.E.F.	Witley Camp	8.12.16	Part II Orders 265
					<p><i>W. S. B. Glass</i> MAJOR ADJUTANT, 124th BATTALION C.E.F.</p>
3.1.17	124 th Bn.	Reduced to Permanent Grade allowing a person committed to his charge	Witley	3.1.17	Part II Orders #3

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

724037 Kingsborough, J. B.

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
9-3-17	124th Bn.	Proceeded for Overseas Service,	Witley Camp	9-3-17	Part II Orders No. 69 <i>Smith</i> Lieut. Asst. Adjt 124th. GCBG (Para)
11-3-17	M.L.O.	Disembarked	Boulogne	11-3-17	N.R.
15/12/17	OC 124 Bn	Appnt. Act. Lt. / Cpl. (With Pay) vice Lt. Cpl. Prev. 669760.	Field	26/10/17	B.213. D.O. 154 d.
22/12/17	do.	Granted 14 days leave	St. Dennis	18/12/17	B.213. D.O. 155 d.
5.1.18	do.	Rejoined Unit	Field	3.1.18	B.213
12.1.18	do.	Confirmed as Lce. Corpl.	do.	26.10.17	B.213 D.O. 5 d. 25.1.18
12.1.18	do.	To Gen. Course - Marcell Bouche	Field	6.1.18	B.213
2.2.18	do.	Rejoined Unit	Field	27.1.18	B.213
4.5.18	do.	Appnt. Act. Cpl. (With Pay)	do.	29.3.18	B.213 D.O. 33 d. 4.5.18
18.5.18	do.	Confirmed in Rank (pl.)	do.	29.3.18	B.213 D.O. 38 d. 8.6.18
	W.O.	TOS 124 BN TO 10 BN C.E.		29.5.18	D.O. 42 d. 27.18
	do.	TOS 10 BN C.E FROM 124 I.		30.5.18	D.O. 42 d. 7.18
13/7/18	OC 10 BN	To be act / Sgt. (Paid)	do	24/5/18	B.213 D.O. 11 d. 1/8
20/7/18	do	Confirmed in Rank, Sgt.	do	19/7/18	B.213 D.O. 2 d. 5-8-18
23/11/18	do	14 Days L.O. a. to U.K.	do	22/12/18	D.O. 42 d. 22-12-18
14/12/18	do	Rejoined	do	12/12/18	B.213
	W.O.	Proceeded to England.		1/5/19	N.R.

CERTIFIED CORRECT.

27 MAR 1917
CAN. RECORDS, LONDON.

Arrived Halifax 6/12/18
 Sailed for England 11/12/18
 D. Y. R. P. O.
 619 9666
 619 9666

[Signature]
 OFFICER IN CHARGE
 CANADIAN RECORDS
 G. H. Q. WITLEY

[Signature]
 for Lt.-Col., A. A. G.
 Canadian Section, G. H. Q. 3rd Echelon, B. E. F.

2

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

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

500M.—9-16

H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps.....

Regimental No. 724037

Rank Sgt

Name Kingborough James C

C. E. F.

Enlisted (a).....

Terms of Service (a).....

Service reckons from (a).....

Date of promotion to present rank }.....

Date of appointment to lance rank }.....

Numerical position on roll of N. C. Os. }.....

Extended.....

Re-engaged.....

Qualification (b).....

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
JUN 6	1919 O. S.	T. O. S. No. 2 DISTRICT DEPOT	TORONTO	1919	PART II D 171
JUN 15	1919 S. O. S.	(DISCHARGED FROM H. M. S.)	No. 2 DIS. DEPOT,		PART II D 171

W. C. Roberts
L. Lt.
For O. C. No 2 District Depot.

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

(b) e.g. Signaller, Shoing Smith, etc., etc., also special qualifications in technical Corps duties.

724037

MEDICAL HISTORY SHEET.

Surname Kingsborough Christian Name James Cleveland

Examined { on 1st day of March 1916
 at Lindsay

Birthplace { City or Town Bobraygon
 County Ontario

Apparent age 29 years

Trade or occupation Farmer

Height 5 Feet 6 Inches

Weight 171 Lbs.

Chest measurement { Minimum 38 inches
 Maximum expansion 42 inches

Physical development Good

Small-Pox Marks None

Vaccination Marks { Arm Right None Left Two
 Number Two

Approved by J. McCulloch **24** Capt.
 Rank Medical Officer M.O.
109th Overseas Battalion C.E.F.

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

When Vaccinated last March 4th 1916

(a) Marks indicating congenital peculiarities or previous disease None

(b) Slight defects but not sufficient to cause rejection None

Date	Result	VACCINATIONS.
4.3.16	nd	McCulloch M.O.
8.5.16	Good	McCulloch M.O.
		M.O.

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
18.5.16	Good	McCulloch M.O.
25.5.16	"	McCulloch M.O.
4.6.16	"	McCulloch M.O.
16/10/16	"	McCulloch

Enlisted on 1st day of March 1916 at Lindsay

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>109th Bn. C.E.F.</u>	<u>724037</u>		<u>2.8.16.</u>
Transferred to.. ..	<u>124th OVERSEAS BATTALION C.E.F.</u>			
	<u>P O-S</u>			

9 MAR 1917

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>WITLEY CAMP, SURREY</u>	<u>May 21 1919</u>	<u>Old injury with R. eye (A)</u>	<u>Discharged</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.

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

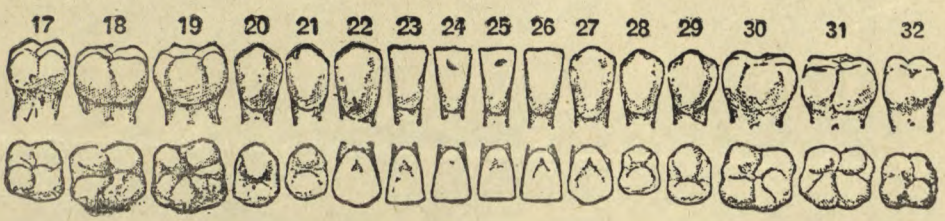
DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) KINGSBOROUGH, J.C.

REGIMENT 10th Bn. C.E. RANK Sergeant No. 724037

Date of Examination in England 20/5/19 Date of Examination in France _____



DIRECTIONS TO DENTAL OFFICERS

1. This form will be made out for each individual at the time of Demobilization in England or France.
2. Figures as per chart will be used to designate teeth concerned.
3. In reference to Partial Dentures the numbers of teeth thereon will be stated

PRESENT DENTAL REQUIREMENTS

1. FILLINGS 23. 29.
2. EXTRACTIONS 4. 12. 20. 28.
3. CROWNS _____
4. DENTURES _____
 - (a) Full Upper _____
 - (b) Part Upper _____
 - (c) Full Lower _____
 - (d) Part Lower _____

HAS HE EVER REFUSED DENTAL TREATMENT? No

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

Signature of Dental Officer J. Rossi Capt.

REPORT OF DENTAL EXAMINATION

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32

PRESENT DENTAL REQUIREMENTS

- 1. Teeth
- 2. Periodontia
- 3. Gums
- 4. Dentures
 - (a) Full Upper
 - (b) Part Upper
 - (c) Full Lower
 - (d) Part Lower

- 5. Has he worn dentures?
 - (a) In Canada
 - (b) In England
 - (c) In France

com.

Number 724037

RR

Rank Sgt.

B

Surname KINGSBOROUGH

V

Christian Name James Cleveland

Units C E Theatre of War France

Date of Service 9.3.17

Remarks Lindsey, Out. 26/25.

Latest Address Darnford

Roll No. B Page 16748.

200m. -2-21. vi.

Next of kin.....

Address on leave.....

Address on discharge.....

Transportation issued

Yes

Date

Previous occupation.....

Character on discharge.....

Date and place of enlistment.....

Diagnosis.....

Date of Medical Boards.....

Date.....

Remarks

DESP. SEP 29 1925	REGN. NO. 10548
-------------------	-----------------

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

No. 724037. RANK *Plt*

NAME *Kingmaoceph J*

C

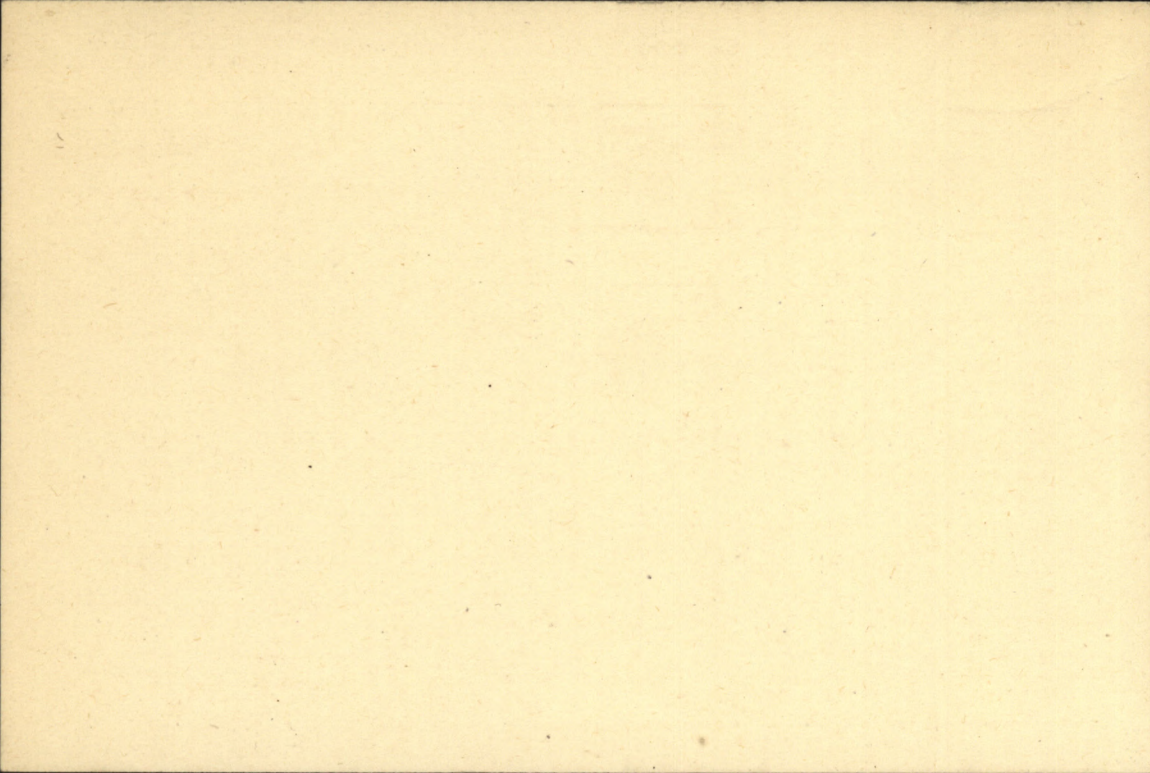
T.O.S. 1-3-16.
D.O. 95. 10-3-16

UNIT *109th Battalion*

M. D. *13*

			PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
PAID FROM	PAID TO	SIG. OR REC'T	PARTICULARS	AUTHORITY
<i>1916</i> <i>Nov 1</i>	<i>1916.</i> <i>Nov 31</i>	<i>✓</i>		
<i>April.</i>		<i>✓</i>		
<i>May.</i>		<i>✓</i>		
<i>June.</i>		<i>✓</i>		
<i>July.</i>		<i>✓</i>		

UNIT SAILED
JUL 23 1916



NAME

Kingsborough, James Cleveland

*SSS Dis 15.6-19 "J" 2
Danda
auth. 201719
20-6-19. 2018*

RANK & No.

Off

724037

CORPS

109th

Batt

ENLISTMENT, PLACE

Lindsay

DATE

March 1st. 1916.

FORMER CORPS

nil

COUNTRY OF BIRTH

Canada, Bobcaygeon Ont.

NEXT OF KIN

Kingsborough Thomas

(Father)

ADDRESS OF NEXT OF KIN

Lindsay Ont.

DISCHARGE, PLACE

DATE

Sailed from Halifax 23-7-16 per SS Olympic

488

M. F. W. 22. 100 m.-9-15.

*P/C. 13-6-19. 347 1st
110.*

MARRIED

SINGLE

yes

WIDOWER

TRADE OR CALLING

Farmer

RELIGION

Presbyterian

DESCRIPTION.

APPARENT AGE

29 YEARS

6 MONTHS

HEIGHT

5 FEET

6 INCHES

CHEST MEASUREMENT

42 INCHES

EXPANSION

4 INCHES

COMPLEXION

Fair

EYES

Blue

HAIR

Lt. Brown

DISTINGUISHING MARKS

*End of middle
hand off.*

finger of right

hand off.

MEDICAL EXAMINATION.

PLACE

Lindsay

DATE

March 1st 1916

REMARKS:

* Strike out whichever inapplicable.

ASSIGNED PAY	ENGLAND or CANADA.	SEPARATION ALLOWANCE.	ENGLAND or CANADA.
EFFECTIVE DATE:-	1/8/16	EFFECTIVE DATE:-	
AMOUNT:-	2000	AMOUNT:-	

NAME: **KINGSBOROUGH** James Cleveland
 NUMBER: **724037**

NAME, ADDRESS, RELATIONSHIP & AUTHORITY

M^r John Barnes friend no
Lindsay, Ont.
Stopped Eff 1-6-19

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
5.	25/1/18	L. Corp
13033	14/5/18	A/Cpl
" 38.	8/6/18	Comp ^d in Rank of Corp.
Do. 11. 10. 90. C.E. 7. 9/8	24. 5. 18	at Sgt.
Do. 12. 10. 07. C.E. 5. 8/8	19. 7. 18	Comp. Sgt.

UNIT AND TRANSFERS

ORIGINAL UNIT:- **109**

DATE ACCOUNT FIRST OPENED:- **1. 8. 16**

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S P'D	UNIT TRANSFERRED TO
			<i>109</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>6/5</i>	<i>2481</i>	<i>Bshott</i>	<i>1667</i>				
<i>20/5</i>	<i>3414</i>	<i>v</i>	<i>933</i>				
			<i>5840</i>				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	<i>1 05</i>	<i>10</i>		
	<i>1 10</i>	<i>10</i>		
<i>Do. 11-10. 90. C.E. 5/8/18 eff 24/18</i>	<i>1 35</i>	<i>10</i>		

PARTICULARS OF RENDERING NON-EFFECTIVE: *Train from Eff 1/19 Bshott to 15 Jan 23/19. K. 9576. In D # 2*

MONTH	PARTICULARS	CR 1	CR 2	PARTICULARS	DR 1	DR 2	DR 3	DR 4	BALANCE	DEFERRED	SEPARATION
<i>1918</i>				<i>L.S.B 97.09 L.S.B 38.69</i>							
<i>Mar 31</i>	<i>Balt. 2d</i>								<i>3 64</i>		
<i>Apr</i>	<i>R/Cpls Pay</i>	<i>34 50</i>		<i>Cap</i>				<i>20</i>			
				<i>A.R. 24 5/4</i>	<i>3 57</i>						
				<i>87 16/4</i>	<i>1 78</i>						
				<i>546 Inst CYWL C1245</i>	<i>40</i>				<i>34 49</i>		
		<i>34 50</i>			<i>45 35</i>			<i>20</i>			
<i>May</i>	<i>App A/Cpl 29/3/18 16033 14/5/18. Pay of rank</i>			<i>Cap</i>				<i>20</i>			
	<i>29/3/18 to 30/4/18 33 days at 54</i>	<i>1 65</i>		<i>AR 170 5/5</i>	<i>1 78</i>						
<i>31</i>	<i>Cpls Pay</i>	<i>37 20</i>		<i>231 17/5</i>	<i>1 78</i>				<i>19 20</i>		
		<i>38 85</i>			<i>3 56</i>			<i>20</i>			
<i>June</i>	<i>A/Cpls Pay</i>	<i>36</i>		<i>6 a.p</i>				<i>20</i>			
				<i>A.R. 289 12 C.E. 12m 4/6/18</i>	<i>5 35</i>						
				<i>AR 262 10 " 2016</i>	<i>5 35</i>				<i>13 90</i>		
		<i>36</i>			<i>10 70</i>			<i>20</i>			
<i>July</i>	<i>Cpl Pay</i>	<i>37 20</i>		<i>Cap</i>				<i>20</i>			
				<i>AR 296 10 C.E. 12m 1/7/18</i>	<i>5 35</i>						
				<i>" 445 " 14/74</i>	<i>6 25</i>				<i>8 30</i>		
		<i>37 20</i>			<i>11 60</i>			<i>20</i>			
<i>Aug</i>	<i>Cpl Pay</i>	<i>37 20</i>		<i>Cap</i>				<i>20</i>			
	<i>Diff Cpl 15/9/18 to 31/8/18 100 w 30</i>	<i>30 00</i>		<i>AR 507 10 C.E.B</i>	<i>15 78</i>	<i>7 14</i>					
				<i>" 569 " 20 78</i>	<i>20 78</i>	<i>5 35</i>			<i>26 41</i>		
		<i>67 20</i>				<i>12 49</i>		<i>20</i>			
<i>Sep</i>	<i>Sgt Pay</i>	<i>45</i>		<i>Cap</i>				<i>20</i>			
				<i>AR 631 10 C.E.B</i>	<i>3 78</i>	<i>5 35</i>					
				<i>" 711 " 15 78</i>	<i>15 78</i>	<i>5 35</i>			<i>40 71</i>		
		<i>45</i>				<i>10 70</i>		<i>20</i>			
<i>Oct</i>		<i>46 50</i>		<i>Cap</i>				<i>20</i>			
				<i>AR 789 " 15 78</i>	<i>15 78</i>	<i>5 60</i>					
				<i>" 889 " 15 78</i>	<i>15 78</i>	<i>5 60</i>			<i>56 01</i>		
		<i>46 50</i>				<i>11 20</i>		<i>20</i>			

COMPILED BY *A.S. Stewart*
 CHECKED BY *Nora...*

acct. agreed by
30/9/18

NUMBER

724037.

RANK

Sgt.

NAME

KINGSBOROUGH, James Cleveland.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
									56 01		
Nov. Dec.	Sgts. Pay	91 50		AK 988 10 86 15 1/8	5 60						
				" 1108 " 15 1/8	14 93						
				" LC 130 " 22 1/8	38 93				194 01		
				" 1314 " 16-31 1/8	5 60				125 06		
1919				EdP. 1/2 1/2.					40 -		
Jan.	" "	46 50		EdP					20 -	68 95	
		138 -			65 06				60 -		
				1414 10 66 1-15 1/9	5 60				137 42		
				1563 " 16-31 1/9	18 66						
				1516 " 16-31 1/9	5 60				99 91		
				1669 " 115 1/9	5 60						
				1765 " 16 31 1/9	5 60						
Feb	" "	42		cap					20		
Mar	" "	46 50		cap					20		
				1896 10 66 15 3/9	5 48						
				2077 " 15 3/9	5 48						
				2038 " 16-31 1/9	5 48				59 95		
		88 50			57 50				40		
Apr	Sgt Pay	45		10784 10 66 30-3	9 13						
May	" "	46 50		224 " 27-4-19	5 23						
				cap	14 26				20		
				cap					20		
				3414 666 20 1/5	9 73						
		91 50			24 09				40	87 36	
				ZH 51. 6 5/9. F Wing	48 17						
				H 028 21 1/9. 10 66 Ed	24 33					143 6	
					73 00						

Sgt Canada 6 1/9.
Sailing List. 83. 66

Group 24.

17-10-39

WAR SERVICE BADGE.

CLASS "A" No. 141466

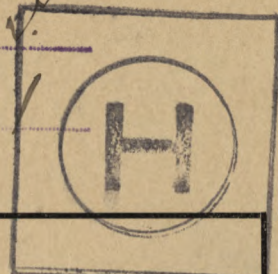
SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization)

D. A.

P. G.



1. No. 724037

2. Rank. Sgt.

3. Name. KINGSBOROUGH James Cleveland

4. Unit. 10th Datto B.C.

5. Date of Discharge JUN 15 1919 Place Toronto

6. Reason for Discharge Demobilization.

7. Authority. No. 2, D.D., Part II, D.O. No. 171

8. Proposed Residence after Discharge Dunford ont.

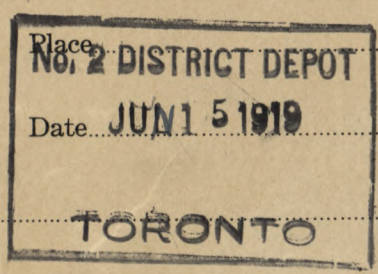
9. CERTIFICATE TO BE SIGNED BY SOLDIER.

I hereby acknowledge that at the undernoted place and date I received my discharge Certificate M. F. W.?

James Cleveland Kingsborough
Signature of Soldier

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.



For John Russell
Signature O.C. No. 2 District Depot
(O. C. Discharging Unit.)

ak.

D.A.

PROCEEDINGS ON DISCIPLINE
of the
[illegible]

<p>[illegible text]</p>	<p>[illegible text]</p>
<p>[illegible text]</p>	<p>[illegible text]</p>
<p>[illegible text]</p>	<p>[illegible text]</p>
<p>[illegible text]</p>	<p>[illegible text]</p>
<p>[illegible text]</p>	<p>[illegible text]</p>
<p>[illegible text]</p>	<p>[illegible text]</p>

[illegible text]

[illegible text]

LIST OF DISCHARGE DOCUMENTS

1. Medical History Sheet	2. Physical Examination Report
3. Laboratory Test Results	4. Radiology Reports
5. Pathology Reports	6. Specialist Consultations
7. Medication List	8. Discharge Summary
9. Referral Letters	10. Patient Education Materials
11. Insurance Claims	12. Billing Statements
13. Consent Forms	14. Advance Directives
15. Social Work Assessment	16. Case Management Plan
17. Care Coordination Notes	18. Follow-up Schedule
19. Patient Contact Information	20. Discharge Instructions

LIST OF DISCHARGE DOCUMENTS.

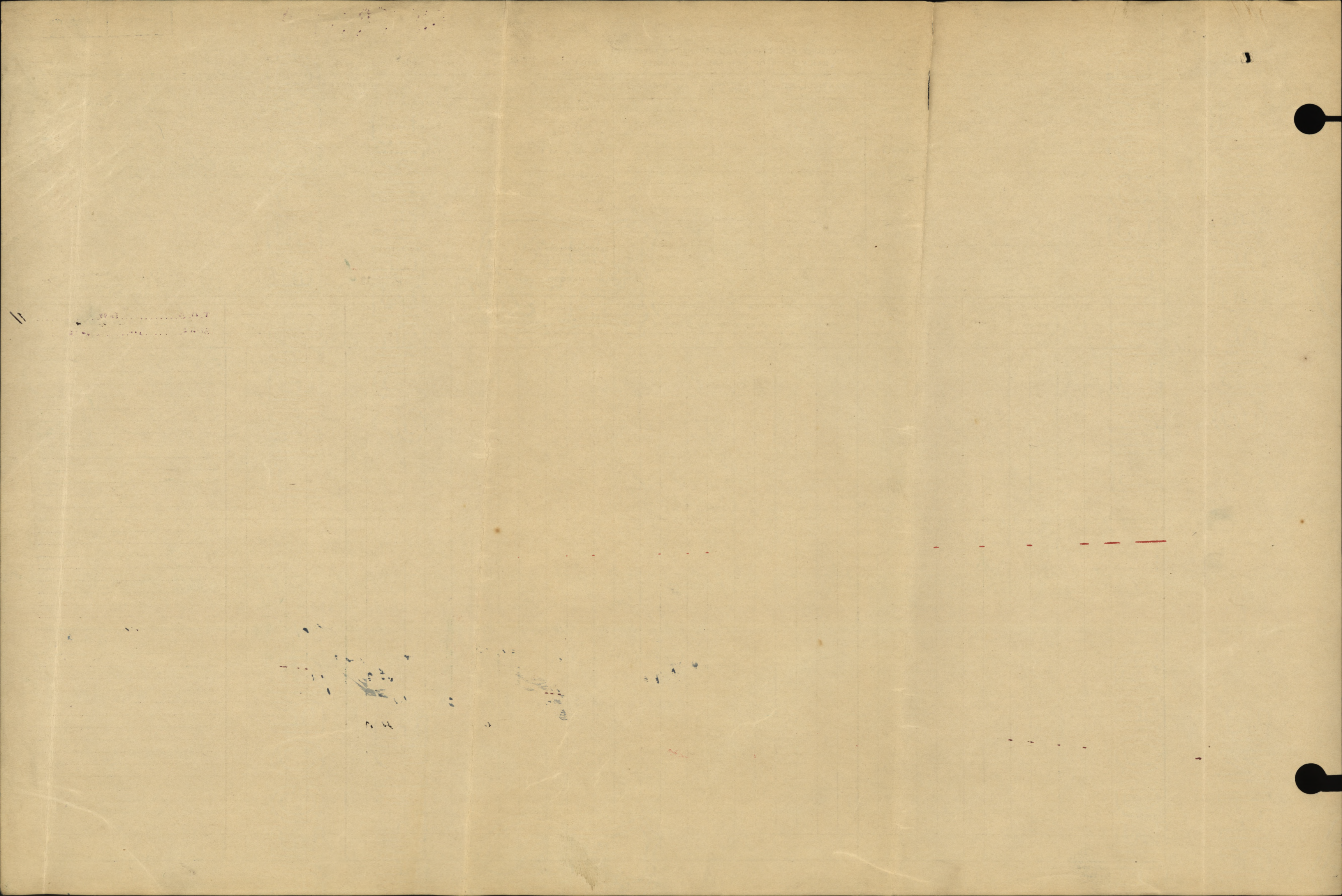
Attestation Paper, Triplicate.....	Militia Form W. 23
or Particulars of Recruit.....	Militia Form W. 133
Field Conduct Sheet.....	Militia Form W. 178 or A.F.B. 122
Casualty Form.....	Militia Form W. 54 or A.F.B. 103
Last Pay Certificate.....	Militia Form W. 44
Certificate that missing documents are unobtainable.....	
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

1. Triplicate Attestation Paper (M.F.W. 23), or Particulars of Recruit (M.F.W. 133).
2. Casualty Form (A.F.B. 103).
3. Medical History Sheet (M.F.B. 313 or A.F.B. 178).
4. Proceedings of Med. Board (M.F.B. 227 or M.F.W. 129)
5. Dental Certificate (C.A.D.C. 5009a).
6. Field Conduct Sheet (A.F.B. 122).
7. Proceedings on Discharge (M.F.B. 218a)
8. Discharge Certificate (M.F.W. 39)
(Enclosed in special envelope (260M)).
9. Copy of Discharge Certificate (M.F.W. 39a).
10. Dispersal Certificate (C.D.3).
11. Equipment and Clothing | Statement Q.M.G. Form (D.O.S, 2).
12. Last Pay Certificate (P. 851). *Dup*
13. Pay Book (A.B.64).
14. War Service Gratuity (Form M.F.W, 2595).
15. Sundry Documents.

Group..... B

Checked by No..... 18 *[Signature]*

Date..... 4/6/19



Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

K

2925

Oct 1-16

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

20			
----	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

No. **724037**
 Rank **Pte. Promoted** Reverted Discharge
 Soldier's Name **J. C. Kingsbow**
 Battalion **109th. Battr. "A" Coy**
 Beneficiary
 Relationship
 Address

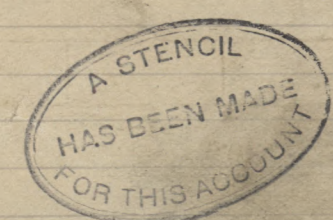
PARTICULARS OF ASSIGNMENT

Name **Mr. John Carew**
 Address **Lindsay Ont.**
 Change of Address
 1
 2
 3
 4

Date 1917	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS	
Dec 31			344 00	344 00	✓	
Jan	S 68404		20 00	20 00	✓	
Feb	F 71137		20 00	20 00	✓	
March	K 93443		20 00	20 00	✓	
April	K 10961		20 00	20 00	✓	
May	G 18887		20 00	20 00	✓	
June	F 16831		20 00	20 00	✓	
July	P 27458		20 00	20 00	✓	
Aug	H 39790		20	20 00	✓	
Sept.	K 42380		20	20 00	✓	
Oct	N 13445		20	20	✓	
Nov	E 58018		20	20	-	
Dec	O 62545		20	20	-	
1919 Jan	K 73709		20	20	✓	
Feb	L 276486		20	20	✓	
March	G 88508		20	20	✓	
Apr	H 2896		20	20	✓	
May	O 6286		20	20	✓	
June	R 11598		20	20	✓	
A/c Closed				704	704	
Ret'd per						
Date				12-6-19	19-6-19	
Closed				M. Nolan	M. Nolan	

10096-2-5

M. F. W. 128
 400M.-6-17-1772-88-1141
 L. L. 22320-M. & D. 7988.



AUDITED
 129227
 22/6/19

9K 10K 11
 29

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

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

- 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 *Witley* DATE *May 20th 19*

1. 1 (a) Unit *10th B.C.* (b) Regimental No. *424037* (c) Rank *SGT*
 (d) Surname *KINGSBOROUGH* (e) Christian name *James Cleveland*
 (f) Home address *Dunford Ontario*
 (g) Next of Kin *Thomas Kingsborough* (h) Relationship *Father*
 (i) Address of Next of Kin *Dunford Ont.*

2. Age last birthday *32* Date of birth *20.9.1886*

3. Enlistment, or Appointment (if an Officer) (a) Place *Lindsay* (b) Date *March 1st 16*

4. Personal description:
 (a) Height *5' 6"* (b) Weight *190* (c) Complexion *Fair*
(stripped)

(d) Colour of hair *Light* (e) Colour of eyes *Blue* (f) Identification marks, Scars, etc. *not*

absence of nail on middle finger of hand
 5. Former trade or occupation *Farmer*

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).	Years	Days
	<i>3</i>	<i>81</i>

	PERIODS	
	From	To
Canada	<i>March 1st 16</i>	<i>July 24th 16</i>
England	<i>July 24th 16</i>	<i>March 9th 17</i>
France or other theatres of War	<i>March 9th 17</i>	<i>May 20th 19</i>

7. Original disease, or injury *LACERATED FINGER MIDDLE RT.*

(a) Date of origin *1904* (b) Place of origin *Canada*

(c) Cause *accident in Lathstrick machine.*

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.)

(absence of nail on middle right finger)
No disability-

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.)

amputation of nail and distal phalanx of middle finger right-hand. Healthy nail matrix of nail partially present. man says he has no disability.

(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 urine normal.*

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

In 1908 got finger caught and crushed in machinery. amputated as above, no further trouble.

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

nil

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

Distal phalanx middle Rt finger amputated

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

Yes

(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.)

no

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

(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?

Permanent

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

Records not available

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

no

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

Yes

17. Recommendations

maoulton Capt-Came
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, *James Cleveland Kingborough* 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

JKM

724052 James C. Kingborough Rank. *Sergeant*
Signature of invalid examined.

OPINION OF THE MEDICAL BOARD

18. Does the Board concur with the preceding report? If not, give differing opinions, with reasons, quoting the number of the answer criticised.

Yes

19. Is the invalid fit for

- (a) General service, (Category A) (Yes or No.) *Yes A*
- (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 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.)

RFC and adj Tel 90837 11-11-18

Before signing the President of the Medical Board will read the statement signed by the invalid and differing opinions regarding Sections 7, 8, 9 and 10, as recorded in Section 18, to the invalid and if no change is indicated, will initial the statement. If, as a result of differing opinions regarding Sections 7, 8, 9 and 10 only, recorded in Section 18, the invalid is dissatisfied with the statement previously made, remarks of the Medical Board will be added here.

[Signature]
President.

PLACE..... WITLEY CAMP, SURREY
DATE..... *May 21* 1919

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.

A.D.M.S. HEADQUARTERS
CANADIAN CORPS CAMP.
21 MAY 1919
WITLEY SECTION.

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

APPROVED BY *[Signature]* APPROVED BY
For, Assistant Director of Medical Services. Capt CAMC.
Director-General of Medical Services.
IAH. DATE..... 21.5.19. DATE.....