

Hospital

ATTESTATION PAPER.

No. *725191*

109th OVERSEAS BATTALION, C. E. F.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

TRIPPLICATE

M. D. 2

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

- 1. What is your surname?..... *Profitt*
- 1a. What are your Christian names?..... *George Francis*
- 1b. What is your present address?..... *112 Spadina Ave. Toronto*
- 2. In what Town, Township or Parish, and in what Country were you born?..... *Toronto Ont.*
- 3. What is the name of your next-of-kin?..... *Martin Profitt*
- 4. What is the address of your next-of-kin?..... *112 Spadina Ave. Toronto*
- 4a. What is the relationship of your next-of-kin?..... *Father*
- 5. What is the date of your birth?..... *Oct 24 1896*
- 6. What is your Trade or Calling?..... *Operator*
- 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?..... *R.C.M.C. 92 Days*
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, *George Francis Profitt*, 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.

G. F. Profitt (Signature of Recruit)
Profitt (Signature of Witness)

Date **JAN 28 1916** 1916

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *George Francis Profitt*, 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

G. F. Profitt (Signature of Recruit)
Profitt (Signature of Witness)

Date **JAN 28 1916** 1916

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 *28th* day of *January* 1916.
[Signature] (Signature of Justice)

Description of George Francis Rafter on Enlistment.

Apparent Age... 19... years... 3... 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 3/4 ins.

Chest measurement { Girth when fully expanded..... 31 ins.
 Range of expansion..... 3 ins.

Complexion..... Fair

Eyes..... Blue

Hair..... Dark Brown

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

Tattoo and scar on left forearm

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 declares that he is not subject to fits of any description.

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

Date..... JAN 28 1916..... 191

Place..... Reading

J. 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.

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

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

Date..... JAN 28 1916..... 191

C.E.F. REGIMENTAL DOCUMENTS
WAR SERVICE RECORDS D.V.A.

LOFTUS

GEORGE FRANCIS

725194

109THBN.

29865



MED. UNFIT

407683



649-2-6713

CARD NO. ✓

SURNAME.

Loftus,

CHRISTIAN NAMES

George Francis

REGL. NO.

725 194

RANK

Pte.

UNIT

~~109th~~ #2 D.D.~~Batt.~~

FORMER CORPS

R. C. H. A.

NEXT OF KIN.

NAMES IN FULL

Loftus, Martin

RELATIONSHIP TO SOLDIER

Father

ADDRESS

112 Spadina Ave., Toronto,
Ont.

CHANGE OF ADDRESS

COUNTRY OF BIRTH

Canada, Toronto, Ont. DATE Oct 24th 1896

PLACE OF ATTESTATION

Lindsay, Ont. DATE Jan. 28th 1916.Sailed from Halifax Per S.S. "Olympic" 23-7-16
488 R/C 26/11/17

MARRIED

SINGLE

Yes.

WIDOWER

TRADE OR CALLING

Operator.

RELIGION

R. C.

DESCRIPTION.

APPARENT AGE

19

YEARS

3

MONTHS

HEIGHT

5

FEET

6 ³/₄

INCHES

CHEST MEASUREMENT

34

INCHES

EXPANSION

3

INCHES

COMPLEXION

Fair.

EYES

Blue.

HAIR

D. Brown.

DISTINGUISHING MARKS

Tattoo and scar on left forearm.

MEDICAL EXAMINATION.

PLACE

Lindsay, Ont.

DATE

Jan. 28th, 1916.

NAME

Lofthus George Francis

REG'TL No.

725-194

H. Q. FILE No. 649.

RANK AND CORPS

Pte. 36th Bn. Form 109th

FOLLOWS

No.

FOLLOWS

CABLE

NO.

DATE

NATURE OF CASUALTY

Sailed from Liverpool for Canada
 per H. M. H. S. Glenart-Castle
 Nov. 10th 1914. Amp. R. 1 high
 (7th Res.) (E. O. R. D.) (M. D. 2)

LIST NO.

HOSPITAL

A.

REMARKS

LIST NO.	HOSPITAL	A.	REMARKS
B77-2	Dr J. Ban Don Kirkdale	15-11-17	Eastern Out Dept L.S.W. Knees. L. Leg. Ampt.
349	Invalided to Canada M.H.C.C. Toronto	13-12-17	To In-P. College ^{Pop. P.M.P.O.} Toronto
349	" " " " "	4-12-17	To. Out - P. N. Toronto
342	" " " " "	4-12-17	Adm, N. Toronto.
4-3.	" " " " "	2-1-18.	Am. " "
353	M.H.C.C. Toronto	16-12-17	Out Pat N. Toronto

REGT'L NO 425-194.

H. Q. FILE NO. 649-

NAME

Softus George Francis

RANK AND CORPS

Plt

38th Bn. (Arm 10 (4th Bn))

FOLLOWS

CABLE

No.

DATE

NATURE OF CASUALTY

FOLLOWS

No.	DATE	NATURE OF CASUALTY
m 2521	21-4-14	Adm to No 4 Gen. Hosp. Etaples April 10th 1914. G.S.W Knees ✓
m 2641	22-4-14	Previously rep. wdd. now dangerously ill Eastern Gen Hosp Brighton April 20th 1914 ✓
m 4705	18-5-14	Still dang. ill 2nd Eastern Gen. Hosp. Brighton May 15th 1914. G.S.W. Knees Amputation Left Leg. ✓
m 5752 w. 2 m.	19-7-14	Amputation left leg. Progressing satisfactorily

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
A 177	No 7. Can. Gen. Staples	10-4-17	Gsw. Knees (sev.)
B. 169	O.C. 2nd East. Gen Brighton Repts Brew rep. wold. now dang ill	20-4-14	Gsw "
B-190	O. C. 2. nd. East. Gen. Brighton Repts still dang. ill	15-5-17.	G. S. W. Knees, L. Leg Amp.
B 25-1	Granville Can Spec Ramsgate Kent	28-7-17	G S W Knees, L Leg
B 3. 2	The Lord of Derby. Was Warrington	31-8-17.	G S W. Knees L Leg. Amp.
B 23	Can. Mil. Hirkdale	27-9-17	Gsw. knees L Leg amp. 27-10-17

B1832

REG. NO. 725 194 NAME Loftus G.
(SURNAME FIRST)

RANK Pte. CORPS 109 Batt

AGE 20. SERVICE

NAME OF HOSPITAL Ongwanada Mil. PLACE Ont. (Kingston)

DATE OF ADMISSION 27.6.16.

DISEASE Infected jaw. 2) amp left thigh.

DISCHARGE 1.7.16.

OPERATION

DISCHARGED TO DUTY yes. 2)

TRANSFERRED TO

DISCHARGED BY MEDICAL BOARD

over

REMARKS

Danville Mil Toronto

²
amp left high

Dis. to Gas Co. 26/11/18

com
RF

R
X

Number, 725194 Rank. Pte

Surname, LOFTUS

Christian Name, George Francis

Units, 38th Bn Can Inf Theatre of War, France

Date of Service, 12-12-16

Remarks, 6 Argyle St

Latest Address, ~~14 Loft Ave~~
Toronto, Ont

Roll No. B. Page 5070.

NO.

RANK

NAME

AUG 15 1921

T. O. S.

UNIT

M. D.

4243936 sub

PAID FROM

PAID TO

SIG. OR REC'T

PROMOTIONS, TRANSFERS, DISCHARGES, ETC.
PARTICULARS

AUTHORITY

Granville Can. Spl. Hospital,

Ramsgate.

HOSPITAL.

A. & D. CARD

g to
14-8-17

AT _____

A. & D. No. 17223 PL. OF ACTION 725194

RANK Private UNIT 382nd Bn SICK OR WOUNDED

NAME Loftho G AGE 21 RELIGION RC

PLACE IN HOSPITAL ~~27-164~~ 12-101

DIAGNOSIS Gas L leg (amp)

ADMITTED 27 JUL 1917 FROM 2nd C. Gen Brighton

DISCHARGED _____ TO 36 days

TRANSFERRED LD War Hosp Warrington 31/8/17

SERVICE AT HOME 15/12 IN FIELD 4/12

RESULTS _____

No. 725194. RANK

Pte

NAME

Lafkus. G.

28.

Francis

T. O. S. 27-1-16.

UNIT

109th. Battalion.

D. O. S. 28-1-16

M. D. 13

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916 Jan. 27	1916. Jan 31	✓		
	Feb.	✓		
	Mar.	✓		
	April.	✓		
	May.	✓		
	June.	✓		
	July.	✓		

UNIT SAILED
JUL 23 1916



Name LOFTUS G.F. Rank Pte. Regt. No. 725194 Unit D/ 2
 Battn. 109th. Camp or O. S. 0 File M. H. C. C. H. Q. File.....
 Next of kin Mr. M. Loftus, 210 Robert St., Toronto, Ont.
 Discharged to Class..... D. of D. 50% DDS 50% Conduct.....
 Pension awarded..... Date of first payment.....
 Address on discharge 14 Lobb Av., Toronto.
 Diagnosis Amputation, Shrapnel wound lt. thigh Date boarded 28-11-17

DATE	CLASS	REMARKS	Part 2 Order
3-12-17	2	N. Toronto Outpatient	#342
13-12-17	2	N. Toronto	#351
14-12-17	2	N. Toronto Outpatient with Subs	#353
2-1-18	2	N. Toronto	#4.
4-2-18	2	N. Toronto (Outpatient Indef.)	#39
15-2-18	2	N. Toronto	#49
16-2-18	2	N. Toronto (Outpatient Indef.)	#50

*Name L. Loftus, George F Rank Lt. Regtl. No. 725194

Original unit 38th Present unit 38th M. or S. A Age 21 Religion R.C. Fyle Depot Ref. H.Q.

Port, ship, and date of arrival Halifax, 26-11-17

Next of kin Father, M. Loftus, 210, Robert St., Toronto

Address on leave 14 Lebb Ave., Toronto, Ont.

Address on discharge Same address

Transportation issued Yes ----- No ----- Date ----- Character on discharge Very good

Previous occupation Moving Pic. Operator Date and place of enlistment Toronto, Jan. 28/16.

Diagnosis amp. L. thigh Date of Medical Boards 15-11-18
M.O.H.

Date.	Remarks.	Pt. 2 Order No.
28-5-18	Leave with Sub. as from 15-4-18 to 20-5-18	42
	Entitled to wear 2 blue chevrons	#205
20-11-18.	Posted to Cas. Co.. Remaining in M.O.H.	218.
	<i>Over.</i>	

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

(over)

Date.

Remarks.

Pt. 2 Order No.

26-11-18 SOS DISCHGD. "having been found medically unfit for
service"; 91 days PDP and cl. allow.

219

Surname **Loftus** Christian Name or Names **G F** Reg. No. **725194**
 Rank **Pte** Unit **38th Batt** Co. **E. O.** Troop Batty.

Hospital **7 Can Gen Etaples** Date of Admission **10-4-17**

2 E. Gen Brighton **20-4-17**

Granville Spec. Paucgate Hosp. **28.7.17**

Lord Derby Hosp. Warrington Hosp. **31.8.17**

Can. Mil Kirkdale Hosp. **27.9.17**

Diagnosis **G.S.W. Knee sev.**
 (1) *L Leg (amp)*
 Later Diagnosis (if changed)
 (2)
 (3)

Additional Diagnosis: if more than one state present

A.M.D. 2 DEPT.

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

DISPOSITION

C.L.21-417 A 177

23-4-17 B 169

18.8.17 B 190

still Dany ill

15.5.17

Ch. 1-8-17 B 251

6.9.17 B 32

29.9.17 B 23

1.12.17 B 772 *Invalided to Canada*

15.11.17

REMARKS

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

Albm

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

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

Casualty Form—Active Service.

250M.—1-16.

H. Q. 1772-39-920.

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

Regimental No. 425194 Rank Private Name Loftus, George Francis

Enlisted (a) 28-1-16 Terms of Service (a) D of W Service reckons from (a) 28-1-16

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

Extended _____ Re-engaged _____ Qualification (b) Operator

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

	<u>Embarked Canada</u>	<u>Halifax</u>	<u>24-7-16</u>		
	<u>Disembarked England</u>	<u>Liverpool</u>	<u>31-7-16</u>		

W. H. Selting Capt.
ADJUTANT
109th Overseas Battalion, C. E. F.

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. H. Selting Capt.
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, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

725194 Laftus G.F.

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 38 th Havre		6 12/16	N. R. P. 110. nra - 12. 12. 16
1 12/17	"	Left for Unit	FIELD	1 12/17	N. R.
13. 1. 17.	Unit	Joined Unit	FIELD	9. 1. 17	B. 213. DCS. P. 0 d 22. 1. 17.
10. 4. 17.	New Haven	G.S. knees.	New Haven.	10. 4. 17.	W 3034-265.
15.4.17.	do	Inv. wounded and posted to E.Ont. Reg. Depot,	Seaford,	15.4.17.	W3083/4853 NEWHAVEN Pt. 2.0.48, d-28.4.17.
		<i>J. Madena</i>			Lieut for Major, A.A.G., Can Sec, 3rd, Ech, G.H.Q.
23.4.17	38 th Inf	No. 2. East Gen Hosp	Brighton	15.4.17	Pt. B 169 G.S. W. knees & Leg Clamp
27. 4. 17	Est. P. & Ely	Taken on Strength E. 38 th	Seaford.	15.4.17	Pt. II D.O. #5. <i>OR Myer</i>
					LIEUT FOR I.T.; COL: I/C RECORDS, C.O.M.F.

8-12-17	A. Unit	T.O.S.	Toronto	3-12-17	Pt II O. No. 342
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Taken on strength No 2 District Depot.
from April, 18th. 1918.

18-4-18 T.O.S. No. 2 District Depot, Part II, D.O. No. *J. Madena*

Dis. #2 D.D. Nov. 26th. 1918 P11 #219 *Askeem* Lieut. and Asst. Adj.

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

MEDICAL CASE SHEET.*

H. 9

No. in Admission and Discharge Book.

Regimental No.

Rank.

Surname.

Christian Name.

425194.

Pvt.

Loftis.

George.

Year

1917

Unit.

38th. Battalion. C.B.Y.

Age.

21

Service

4/12

Total

12

Station and Date.

A.Y.S.

Disease

Left Leg. Amputation.

In Ed:

4/12

Slight
Severe
Dangerous

The Lord Derby War Hospital, Warrington.

NEXT OF KIN.

Father.

INOCULATION AGAINST ENTERIC.

210 Robert St. Toronto Canada

TV
1

TV
4

TV
Nil.

Date

Cross out that which does not apply.

31.8.17.

Shop: w left knee.

Ampt part of mid. lower 1/3 femur. in May 1917.

On admission small granulating surface at extremity of stump about size of 5 cent piece.

Sept 10. 1917

Had patient in file to go to Canada A. W. Hamilton

Warrant to

Station.

RECOMMENDED FOR

Discharge
On
To
Duty
Light Duty

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

Station
and Date.

CANADIAN
MILITARY HOSPITAL,
LIVERPOOL.

GRANVILLE CANADIAN SPECIAL HOSPITAL,
RAMSGATE, KENT,

26/8

1917.

1 C.S.S.
N.H.S.

THIS IS TO CERTIFY THAT Regt. No. 725/194

Rank. Pte Name. Loftus G Unit. 38th is

free from infectious, contagious and venereal diseases and vermin.

Pharmaceutical
Capt. C.A.C.

GRANDVILLE CANTONMENT, WISCONSIN
MAY 18 1864

TO THE
CAMP

THIS IS TO CERTIFY THAT

THE

CONTAINS

OF

1864

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
17223 Year	725194	Pvt.	Jostwa	G.
	38	Unit.	# Bw.	Age.
				Service.
Station and Date.	Disease	G. S. W. St. leg amp. / stiffness rt knee		
		Occupation - Moving picture Operator.		
		Enlisted - Toronto - Jan 28. 1916.		
		Arrived in England - 1st Aug 1916.		
		Arrived in France - 22nd Dec. 1916.		
		Wounded - Vim Ridge - April 9. 1917.		
		Hospitals - C&S - a few hours.		
		- No 7. Can Gen. H. Staples 2 wks.		
		- 2nd Eastern Gen. H. Brighton 3 mths.		
		- GCHQ Ramgate 27/7/17.		
		Complaints - Amputation through middle third left thigh (2) Stiffness and swelling right knee. & wasting of the right calf muscles.		
		History and present condition -		
		At Vim Ridge on April 9. '17. was wounded by shrapnel bullet just above left knee. Was also wounded rt knee. Bullet entered inner and posterior part of knee and came to lodge under skin lower outer part of thigh.		
		Patent was removed to No 7 Gen H. Staples.		
		Staples: Was aft., & tubes put in left knee.		
		Nothing was done to right knee. Was transferred to 2nd Eastern		

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Station and Date.

In Hl Brighton. was there 3 mths.
Had several ops on left knee, for drainage & for washing out knee.
After one month at Brighton septicemia was setting in and amputⁿ was done through middle third of thigh.
Stump suppurated for some time and healed after 6 wks.
Shrapnel bullet under skin outer lower part of right thigh was removed about 12 wks ago.

At present - Amputation through middle third of left thigh. Stump healed. Hip free. Right thigh & calf muscles wasted. Small ulcer lower outer part right thigh near knee.
F. Keston Capt

July 31

Right knee extends to 150° flexion - almost normal
To have dry dressing to wound outer side of right knee
Hot fomentations ^{4 times daily} on boil in right gluteal region
E. E. Hudson.

1 Aug 1917

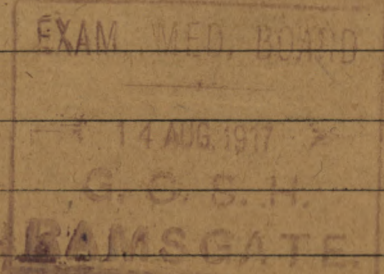
Urticalysin
boil
Acid
Sp 10 21
Sup
al
St
Calcium
Macalates
D. E. Coleman Capt

7 AUG 1917

Measure right knee - A. F. B. 179. H to C. Off

11/8/17

filled out A F B 179 H to C. Measurements
Capt.



20/8/17

Stump nearly healed. Pt by Surgeon get crutch &

24/8/17

Stump nearly healed carry on
Thompson
Thompson
Capt

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	725194	Pte	Logius	George
Year	Unit.	Age.	Service.	
1917	4 th Can. Division	21	1 $\frac{3}{12}$	
Station and Date.	Disease			
	Exposed knee. L. R.			
16.11.17.	Wounded on April. 10 th 1917			
	Perforating wound through the L. popliteal space.			
19.11.17.	Haemorrhage from popliteal artery vein. W. opened & both ligatured. Plugged.			
22.11.17.	Plugging removed. T. 103.			
28.11.17.	Now Pt's general condition very bad, Gangrene of foot. a patch over int. malleolus.			
	Amputation (circular) performed 4" above knee			
29.11.17	Pt stood off well.			
30.11.17.	Condition worse. T. 101. He is very restless & refuses treatment. W. discharging very little.			
1.12.17.	A.S. Serum 10 c.c. given			
2.12.17	A.S. Serum 10 c.c. given			
3.12.17	Pt much better. T. down. Taking food better & sleeping. W. discharging more freely. All stitches removed. the bone is showing prominently.			
8.12.17.	A.S. Serum 10 c.c. given.			
9.12.17.	T. 100.			
20.12.17	He has been improving slowly & gaining in wt. W. has been drawn together with strapping & extension. T. normal.			
20.12.17	Improvement maintained. Extension still continued. Massage for R. leg.			
8.1.17.	Small sum only. He complains of a P.B. in the R. knee. subcutaneous.			
9.1.17	F.B. removed from R. knee. L.A. Army			

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

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 **725154**.....

(3) Full Name of Soldier **George Loftus**.....

(4) Place of Birth **Toronto Ontario Canada**.....

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

(6) If married, state,

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

(b) Present Postal Address.....

(7) Are you a widower?.....

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

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

Also their names and ages.....

(9) Is your Father alive? Yes. Martin Loftus
If so, state name and address 112 Spedina Ave Toronto
ontario

(10) Is your Mother alive? No
If so, state name and address _____

(11) If your Mother is a widow? —
Are you her sole support, or not? —

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

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

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

(15) Are you insured? Yes
If so, in what Company? Metropolitan Life
Have you made arrangements for payment of your Insurance premium? No
If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.

Date 6th July
[Signature]
Lt. Col.
Officer Commanding.
O. C. 109th Overseas Battalion, C. E. F.

FORM TO BE USED INSTEAD OF BLANK SPACE ON ARMY FORM 179

PROCEEDINGS OF MEDICAL BOARD AT DISCHARGE DEPOT.

Number, Rank, Name, Name & Corps of disabled Soldier:-

725194 Pte. Loftus, G. 38th. Batt⁴

Previous civilian occupation:- assistant moving picture operator.

Is he able to resume previous civilian occupation:- no

Cause of disability:- amputation - left thigh - 9.4.17
shrapnel wound ~~Right~~ ^{left} thigh

Condition, in detail, which prevents the Soldier from earning a full livelihood:-

Origin: Shrapnel wound ~~in~~ left knee followed by sepsis, and amputation May 1917.

Pres: Condition: Left thigh amputated 8" below trochanter. (Circular method) Stump painless - Scar Terminal, painless + not tender. Movements at hip excellent. Gen: condition good - Right leg (Thigh wounded) is in good condition.

OPINION OF THE BOARD

Degree of incapacity - (please state in fractions) 50/70

Disability due to Service:- Total of above

Probable duration of incapacity:- Permanent

Does it render him permanently unfit for Military Service:- yes

Would operation, special treatment or the use of appliances etc., lessen incapacity:- yes - artificial leg.

Recommendation of Medical Board:- orthopaedic hospital

Station:- Halifax, N. S.

Category:- D III

Date 28.11.17.

J. S. Brown, M.D. President
S. P. Hampton, M.D. Member
C. J. Ellis, M.D. Member

APPROVED

Date 28-11-17

Asst. Director Medical Services.

Date

Director General Medical Services.

PROCEEDINGS OF MEDICAL BOARD AT DISCHARGE DET.

Number, Rank, Name, Name & Corps of Disabled Soldier:-

Previous civilian occupation:-

Is he able to resume previous civilian occupation:-

Cause of disability:-

Condition, in detail, which prevents the Soldier from earning a full livelihood:-

OPINION OF THE BOARD

Degree of incapacity - (please state in fractions)

Disability due to service:-

Probable duration of incapacity:-

Does it render him permanently unfit for Military Service:-

Wants operation, special treatment or the use of appliances etc., lessen incapacity:-

Recommendation of Medical Board:-

Station:- Halifax, N. S. _____

Category:- _____

Date _____

APPROVED

Asst. Director Medical Services, _____ Date _____

Director General Medical Services, _____ Date _____

725194
 ORIGINAL
 MEDICAL HISTORY SHEET. 16-4
 2 May

Surname Loftus Christian Name George Francis

Examined { on 28th day of January 1916.
 at Lindsay
 Birthplace { City or Town Toronto
 County Ontario

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

Apparent age 19 years
 Trade or occupation operator
 Height 5 Feet 6 3/4 Inches.
 Weight 114 Lbs.
 Chest measurement { Minimum 31 inches.
 Maximum expansion 34 inches.
 Physical development good
 Small-Pox Marks none

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT
		<u>24 APR 1917</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 January 25th 1916
 (a) Marks indicating congenital peculiarities or previous disease None

Date	Result	VACCINATIONS
<u>28-1-16</u>	<u>good</u>	<u>J. McCulloch</u>
		M.O.
		M.O.

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

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>18/4/16</u>	<u>good</u>	<u>J. McCulloch</u>
<u>25/4/16</u>	<u>good</u>	<u>J. McCulloch</u>
<u>2/5/16</u>	<u>good</u>	<u>J. McCulloch</u>
<u>22/9/16</u>		
		M.O.
		M.O.
		M.O.

Enlisted on 27th day of January 1916 at Lindsay

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>109th Batt.</u>	<u>725194.</u>		<u>28</u> <u>27-1-16.</u>
Transferred to.....	<u>C. E. F.</u> <u>38th Bn</u>	<u>2/12/16</u>		

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>Bramshott</u>	<u>28/8/16</u>	<u>no disability</u>	<u>no disability</u>
<u>Approved Bramshott</u>	<u>29 AUG. 1916</u>		
<u>Major</u>			
<u>D.A.D.M.S. for A.D.M.S.,</u>			
<u>Canadian Troops, Bramshott Camp.</u>			
<u>Ramsgate..</u>	<u>14 AUG. 1917</u>		
<u>Major</u>			
<u>D.A.D.M.S. for A.D.M.S.,</u>			
<u>Canadian Troops, Bramshott Camp.</u>			

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

18 AUG 1917

CANADIAN

Christian Name *George Francis*
 Surname *Loftus*

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>2nd EASTERN GENERAL HOSPITAL BRIGHTON.</i>		16	4	17	27	7	17	<i>f. s. l. leg</i>		<i>Amph. above knee</i>	<i>Lt Barry</i>
<i>Grand Canal Quarantine Hospital</i> <i>Quarantine Street</i>		27	7	17	31	8	17	<i>SSW Left Leg</i> <i>(Amph)</i> <i>SSW R. Knee</i>	<i>25</i>	<i>Amputation L leg 8" below S trochanter</i> <i>Stump not healed. Wasting of R thigh</i> <i>20 calf muscles.</i>	<i>Thomas Jones</i> <i>Capt Lane</i>
<i>THE LORD DERRY WAR HOSPITAL</i> <i>25 SEP 1917</i> <i>WARRING</i> <i>CANADIAN MILITARY HOSPITAL, LIVERPOOL.</i>		31	8	17	26	9	17	<i>" do "</i>	<i>27</i>	<i>to transfer to Kertdale.</i>	<i>H. Mearns</i>
		1	10	17				<i>Amph. l. thigh</i> <i>SSW R. knee</i>		<i>all wounds healed</i>	<i>H. W. Brown</i> <i>Capt</i>

DAVISVILLE MILITARY HOSPITAL.

Date

Nov 15/18

This is to certify that I have examined,
this day, the marginally noted man, and find him
free from ~~Venerical~~ or other Infectious Disease.

G.C.

R.M. Kuzin
Captain C.A.M.C.

DEPARTMENT OF HEALTH AND HUMAN SERVICES

UNITED STATES OF AMERICA
DEPARTMENT OF HEALTH AND HUMAN SERVICES

UNITED STATES OF AMERICA
DEPARTMENT OF HEALTH AND HUMAN SERVICES

OFFICE OF THE ASSISTANT SECRETARY FOR PUBLIC AFFAIRS
4570 Reservoir Road, Room 500
Bethesda, Maryland 20814

Telephone: (301) 427-3000
Fax: (301) 427-3001

Internet: <http://www.hhs.gov>

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A 9

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	725194	Pte.	Loftus	Geo.
Year	Unit.	Age.	Service.	
	38 th Bn	21		
Station and Date.	Disease			
CANADIAN MILITARY HOSPITAL LIVERPOOL	Amputation left thigh.			
	G.S.W. Right knee.			
26-9-17.	Amputation left thigh about middle: healthy & healed all but a very small sinus on end of stump. Discharge very slight.			
	Right knee healed. Full movement in knee joint. Says it is as strong as ever			
	Hawthorn			

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

Station
and Date.

CLINICAL CHART.

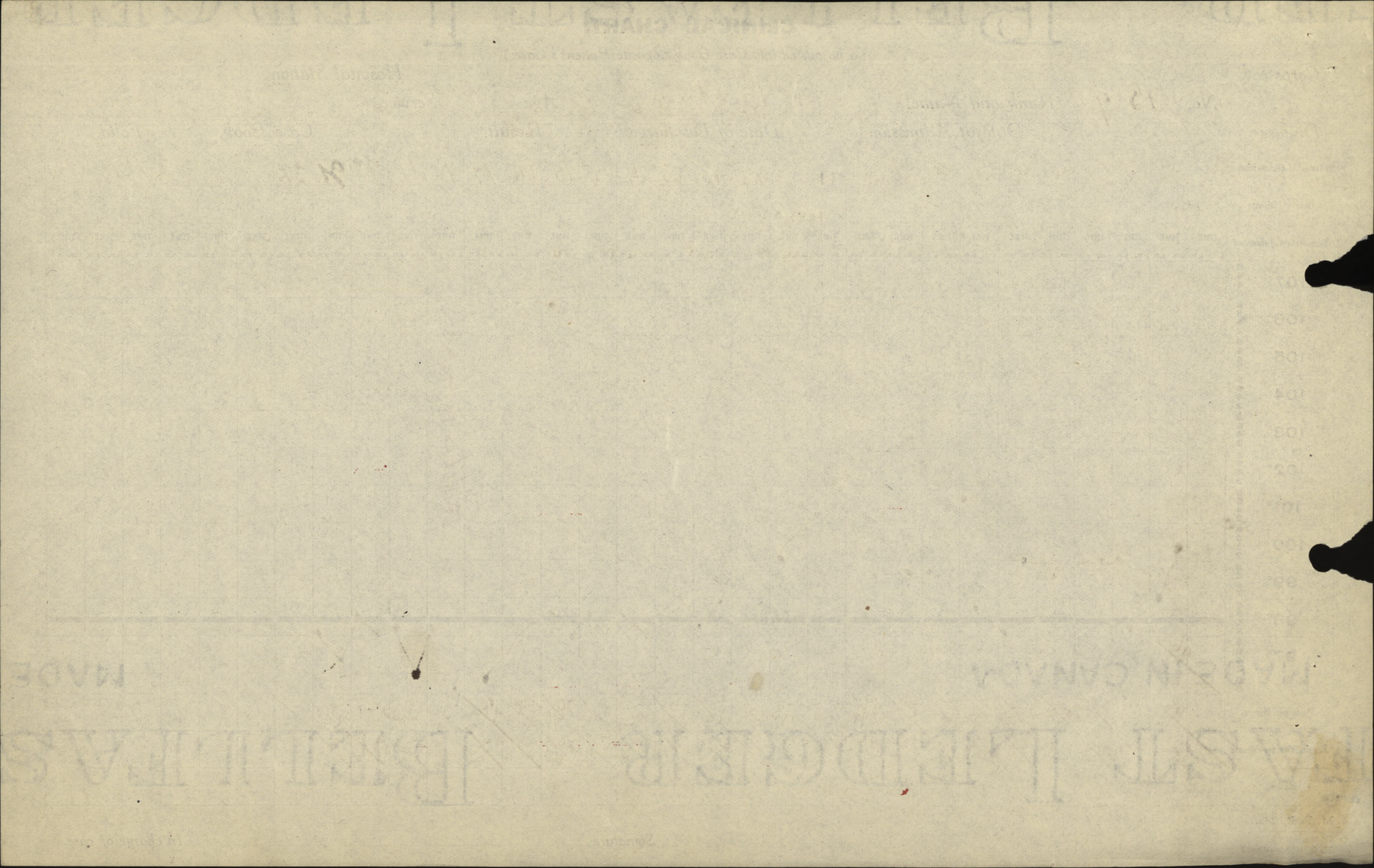
(To be pasted into Case Book opposite Patient's Case.)

Corps S No. 725199 Rank and Name Pte G. Loftus Age 27 Service _____ Hospital Station _____
 Disease _____ Date of Admission Jan 4/18 Date of Discharge _____ Result _____ Case Book _____ Folio _____

Dates of Observation	7		8		9		10		11		12		13		14		15		16		17		18		19		20		21		22	
	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.		
Days of Disease											10-10		4-10																			
Temperature Fahrenheit																																
107°																																
106°																																
105°																																
104°																																
103°																																
102°																																
101°																																
100°																																
99°																																
98°																																
97°																																
Pulse per Minute			96 84		84 96		100 108		88 96		84 92		84 96		100 100		78 104		88 86		76 84		72 84		80 84		80 84		80 84			
Respirations per Minute			20 22		18 22		20 20		20 20		20 20		20 20		20 20		22 22		22 22		22 22		22 22		22 22		22 22		22 22			
Motions																																

Stitches removed.

Signature _____ In charge of case.



100
101
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MADE IN CANADA

MADE

W. A. S. T. L. P. I. D. G. T. E. R. I. S.

MILITARY ORTHOPAEDIC HOSPITAL

M. H. C. C., D UNIT, TORONTO

ANAESTHETIC CHART

Date Jan 4th Ward C. W. Surgeon Dr. Gallie
 Name L. Collins Rank Pvt No. 425199 Unit 38 B.C.
 Age 21 years

PREVIOUS ILLNESS

Diagnosis Fracture Left thigh

Urinalysis { Reaction Acid S. G. 1.024 Albumin None
 Sugar None Microscopic None

Anaesthetic used ether Time administered _____

Amount used 3/4 Time discontinued _____

Anaesthetist J. Murray M.O.

OPERATION AND PROGRESS NOTES:

Amputation left thigh,

Jan 10th Patient doing well

KJMK

MILTON ORTHOPAEDIC HOSPITAL
110 BLOOR ST. W. TORONTO

ANESTHETIC CHART

OPERATION AND PROGRESS NOTES

724194 Pte. Loftus G. F.

P.697.

EXTRACT FROM ACTIVE SERVICE PAY BOOK.

Date of Payment	No. of Acq. Roll	A M O U N T.					Place of Payment.	Name of Paymaster	Remarks
		Francs	£	s	¢	¢			
10.7.17.	106	10			10	43	Brighton.	H. A. McKeach.	
15.8.17.	1005				10	4667	Windsor	R. Bartholomew.	
5.10.17.	P.70				5-	2134	Windsor	A. S. Burns.	

15.42

CANADIAN CONTINGENT EXPEDITIONARY FORCE

M. D. 2

No. 58

MM

LAST PAY CERTIFICATE

This form to be used for all Ranks (Vide Articles 122, 130 and 141, Financial Instructions, 25715c, C.E.F., 1916).

Regimental No. 725194 Rank Pte. Name LOFTUS, G.F.
 Corps No. 2 District Depot. who was Discharged
 On Nov. 26 1918 191... to 191...
 *Insert "discharged" or "transferred."

The following is a statement of the account of the above named from Nov. 1, 1918 191...
 to Nov. 26, 1918 191..., the inclusive date of transfer or discharge.

Dr.	\$	c.	Cr.	\$	c.
Bal. Dr. from prev. month			Balance Cr. from prev. month	10	
Advances by Cheques } No. <u>42315</u>	15		Reg'tl. Pay <u>26</u> days at \$ <u>1</u> c.	26	
Assigned Pay and Sep'n Allee. No.			Field Allow. <u>26</u> days at \$ <u>10</u> c.	2	60
Other charges <u>42316</u>	58	60	Separation Allowances* (Monthly)		
Payment on transfer or discharge No.			Other Allowances* <u>Cl. Allee</u>	35	
Balance Cr. (to be paid by the new unit)			Other Credits*		
Total	73	60	Bal. Dr. (to be deducted by new unit)		
			Total	73	60

*Give particulars.

A monthly stoppage of \$..... (†) has..... (‡) been paid on account of Assigned
 { Pay for the month of 191... }
 { and Sep'n Allee. for month of 191... } (to) Assignee
 (Address) 14 Lobb Ave., City. NIL

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

On Transfer of an Officer.

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

REMARKS:—

- State (1) date of enlistment
- (2) if married and if a Separation Allowance Card has been submitted NO
- (3) cause of discharge Physically Unfit authority D.O. 219
- (4) authority for transfer

NOTE.—Separation Allowance and Assigned Pay Card and Index Card (M.F.W. 71) are to accompany the original Last Pay Certificate on transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay List of the Unit.

Date 23.11.18
 Place Toronto.

 Capt.
 Paymaster, No. 2 District Depot.
 Paymaster.

N.B.—For purposes of transfer this form is to be made out in quadruplicate. Original copy to paymaster of new unit; duplicate to District Paymaster; triplicate to accompany the pay list at the end of the month, and quadruplicate for retention as a record.

For purposes of discharge it is to be made out in triplicate. Original copy to accompany discharge papers; duplicate to accompany pay list at the end of the month, and triplicate for retention as a record.

If a man on discharge is entitled to three months' Post Discharge Pay, Last Pay certificate will be made out in quadruplicate. The original Last Pay Certificate will be forwarded with other documents to Paymaster Post Discharge Pay and triplicate, with his discharge documents.

M. F. W. 44.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 725194 (Rank) Pte.

Name (in full) LOFTUS, George Francis enlisted in
the 109th. Bn.

CANADIAN EXPEDITIONARY FORCE at Toronto, Ont., on the 28th.
day of January 19 16

HE served in England and France

and is now discharged from the service by reason of Having been found medically
unfit for service.

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

Age 22

Height 5' 7"

Complexion Fair

Eyes Blue

Hair Brown

George Loftus
Signature of Soldier

Marks or Scars

Vacc scars left arm

G.S.W. Knees 10-4-17

J. H. B. Green

Issuing Officer Captain,
For Lieut.-Colonel,

O.C. No. 2 District Depot

Date of Discharge Nov. 26th. 1918

Appointment

Signed at Toronto, Ont., this 26th. day of November 19 18

in Military District No. #2

File Reference No. _____

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. 725194 (Rank) Pte. Name. LOFTUS, George Francis

Unit 109th. Bn.

Address on Discharge 14 Lobb, Ave., Toronto, Ont.,

Character and Conduct Very Good

Former Occupation Assistant Moving Picture Operator

Special Qualifications of Value in Civil Life

Medals and Decorations Nil

Remarks Gold Stripes One-----1

Signed at Toronto, Ont., this 26th. day of November 1918

Name of Officer J. G. Beane Captain, For Lieut.-Colonel, Rank O.C. No. 3 District Depot. Appointment

L.L.

Name

Pte Loftus G. F.

M. F. W. 41
100M-1-18.
1772-39-889.

Regimental No. 725194

Name and address of next-of-kin

Unit

109 Bn

Date of enlistment

Place of " "

Married (yes or no)

no

Date and place discharged

Amount of pay assigned monthly \$

15⁰⁰

Reason for discharge

1/2/18

To whom payable

Mr. M. Loftus

Character on discharge

3

no address

Date		PAY		Field Allowance		Other Credits	Total Credits	Voucher		Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.	
From	To	No. of Days	Rate	Amount	No. of Days			Rate	Amount						No.
Nov	26	26	1	26	-	26	10	260	10	-	423	15	-	246	10 th Sac Oct.
								35	-	73.60	423	16	58	60	73.60 5 th Sac Nov. H.I. to Cas. Co. 29/11 D.O. 218 Dis 26.11 Clack 00219.

Name

Plt. Loftis G. F.

M. F. W. 41
100M-1-18.
1772-39-882. ✓

Regimental No.

725194

Name and address of next-of-kin

Unit

109BW

Date of enlistment

Place of

Married (yes or no) no

Date and place discharged

Amount of pay assigned monthly \$

15⁰⁰

Reason for discharge

To whom payable

Mr. M. Loftis (2)

Character on discharge

not proper address 210 Robert St. Toronto

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date					
June	30	30	1	30	30	10	3	28	61	80668		15				Subs. 15.4.18-20.5.18
										83377	46				61	0048
July	31	31	1	31	31	10	310	✓	3410	2043		15				
										AR64	19				34	
														Cr Bal	10	
									34						34	
Aug	31	31	1	31	31	10	310	10		36035		15				July ch. * 2043 redeposited
									15	4920	36561	5	Sac.		4920	
Sept	30	30	1	30	30	10	3		33	37857		10 ⁰⁰				10 ⁰⁰ Sac. For Sept.
										38709		10				
										38716	13					
Oct	31	31	1	31	31	10	3	10	3410							10 ⁰⁰ Sac. For Oct.
										40549		24	10		24	10
										Cr. Bal		10	-			

Fwd

Name *R. Loftus J. F.*

M. F. W. 41
1 0M-7-16
1772-39 889.

G. J.

Regimental No. *725194*

Name and address of next-of-kin

Unit *109 Bn*

Date of enlistment

Place of " "

Married (yes or no) *No.*

Date and place discharged

Amount of pay assigned monthly \$15⁰⁰ from 1.2.18

Reason for discharge

To whom payable *Mr M. Loftus*

Character on discharge

210 Robert St. Toronto, Ont (1)

Job 5351-M. & D. 6890.

Date		PAY		Field Allowance		Other Credits	Total Credits	Voucher		Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days			Rate	Amount					
<i>Nov.</i>								<i>43546</i>	<i>15</i>				<i>15</i>	<i>out 14.12.17 D.O. 333</i>
<i>Dec</i>								<i>44810</i>	<i>20</i>			<i>15</i>	<i>35</i>	<i>In 2.1.18 D.O. 4</i>
<i>Jan 1</i>	<i>31</i>	<i>31</i>	<i>10</i>	<i>31</i>	<i>31</i>	<i>10</i>	<i>310</i>	<i>17056</i>				<i>35</i>	<i>35</i>	<i>Dr. Bal Due</i>
								<i>15 2021986</i>	<i>55463</i>	<i>18486</i>			<i>21986</i>	
<i>Feb 1</i>	<i>28</i>	<i>28</i>	<i>1</i>	<i>28</i>	<i>28</i>	<i>10</i>	<i>280</i>	<i>1760</i>	<i>57998</i>		<i>15</i>			<i>Out 4.2.18 D.O. 39</i>
								<i>4840602</i>	<i>363340</i>					<i>In 13.2.18 D.O. 49</i>
														<i>4840 out 16.2.18 D.O. 50.</i>
<i>Mar 1</i>	<i>31</i>	<i>31</i>	<i>1</i>	<i>31</i>	<i>31</i>	<i>10</i>	<i>310</i>	<i>2480</i>	<i>589063437</i>		<i>15</i>			
									<i>652894390</i>				<i>5890</i>	
<i>April 1</i>	<i>30</i>	<i>30</i>	<i>1</i>	<i>30</i>	<i>30</i>	<i>10</i>	<i>300</i>	<i>320</i>	<i>675675</i>					<i>In 5.4.18 D.O. 100</i>
									<i>3620</i>	<i>68593</i>	<i>15</i>			
									<i>695871620</i>				<i>3620</i>	
<i>May 1</i>	<i>31</i>	<i>31</i>	<i>1</i>	<i>31</i>	<i>31</i>	<i>10</i>	<i>310</i>	<i>3410</i>	<i>7367410</i>					
									<i>75554</i>		<i>15</i>			
									<i>76340</i>	<i>910</i>			<i>3410</i>	<i>forward</i>

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

Name LOFTUS **G.F.**
Surname Christian Name

Regimental Number 725194 **Rank** Pte. **Address (in full)** 14 Lobb Ave.,
Unit Toronto, Ont.
Original Unit
District where paid M.D. No. 2
Date of Discharge
P. D. P. Filing Number 7-894-2 8-894-2.
Rates:—Regimental pay \$ per diem: Field Allowance \$ per diem. Separation Allowance \$ per month.

L. L. 46038—M. & D. 9245.

Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Over-payments to be Recovered	Total Amount Paid
	Cheque No. A	Date	Amount 30 days	Cheque No. B	Date	Amount 30 days	Cheque No. C	Date	Amount 31 days		
100.10	14892	25-11-18	33.00	13886	25-12-18	33.00				34.10	66.00

M. F. W. 127.
25M.—8-18.
1772-89-1140.

Remarks: a/c transferred to ledger

Pte Name Looffus George Francis

M. F. W. 41
1 OM-7-16
1772-39 889
L. P. C. No.
L-1600

9

Regimental No. 725194

Home
~~Name and address of next of kin~~ 210 Robert St Toronto Ont

Unit 109th Tbn

Date of enlistment 28-1-16

MB 28-11-17 Com. Home

Place of " Lindsay Ont

Married (yes or no) No.

Date and place discharged

Amount of pay assigned monthly \$ $15^{00} \times 31^{18} = 230^{00}$

Reason for discharge

To whom payable Martin Looffus
210 Robert St
Glenart Co. 26¹¹⁷
Toronto Ont. Gate D.

Character on discharge

H.O. 649-L-6713.

6-5351-M. & D. 6880

Date		PAY		Field Allowance		Other Credits	Total Credits	Voucher		Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days			Rate	Amount					
30 ^{9/17}	29 ^{9/17} 31 ^{12/17}	93	1 ⁰⁰	93 ⁰⁰	93	.10	9 ³⁰							ELP D. D. Halifax 1 ¹⁷ - 31 ¹⁸ 17. 18. 70 ⁰⁰ L.P. 6 rent 170 ⁵⁶ showing a/c Adj 31 ¹⁷ 240 ⁵⁶ & Jd to D. unit.
							138 ²⁶							
							240 ⁵⁶				60 ⁰⁰			
							240 ⁵⁶							on Bal.

l
wad
23-1-18

Eng ap bhd 1-8-16 30-9-17 \$170⁰⁰

24-1-18
S.A.P. Pay 15⁰⁰ per mo
Act. Nov. Acc. 179 Jan/18

MILITIA AND DEFENCE
 ASSIGNED PAY
 OVERSEAS CONTINGENTS

194
 To Whom *M. Laftus*
 Address *210 Robert St. 712 Spadina Ave. Toronto Ont.*
W.Y. 21-11-16.

By Whom Assigned *Laftus Geo. H.*Regtl. No. *725194 724194*Rank *LP.*Corps *109 Pen "D Coy"*Rate *\$10*

AUG 1 1916

15⁰⁰ April 1916

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			<i>0 2m 12 3/4 Feb 11/4/17.</i>
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				



100

100

100

100

100

100

100

100

100

100

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

M. F. W. 12a.
 50m.-4-16.
 1772-39-818

Sheet No. 2.

L. L. Job 310.—Req. 6574.

M. Loftus

PAYMENTS.

Name of Soldier

Loftus Geo. H.

725194-1 Pte L 109 Bn.

father

Month.	Year.	Cheque No.	Amt.
April	1916		
May			
June			
July			
Aug.		J 15711	10
Sept.		C 17311	10
Oct.		e 21940	10
Nov.		A 27161	10
Dec.		d 38096	10
Jan.	1917	H 38714	10
Feb.		H 44706	10
March		Z 51607	10
April	15 ⁰⁰	E 5113	10
May		X 9588	15
June		W 18391	15
July		X 22679	15
Aug.		J 30730	15
Sept.		D 37814	15
Oct.		L 43472	15
Nov.		G 43754	15
Dec.		P 58020	15
Jan.	1918		
Feb.			215
March			
April			
May			
June			
July			

~~10~~ AUG 1 1916
 15⁰⁰ April 17

Remarks.

"10 Coy"

S
 215⁰⁰ A/c Closed 31-12-17
 Ret'd per. Element Lease
 Date 15-11-17 F. X. 10-12-17
 Clerk. R. S.

210 Robert St. W. Y. 21-11-16

X 3207 cancelled
 15⁰⁰ April & future paid 11/17

[Large handwritten checkmark]

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.				

724194 Pk Lofius S. 7.

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		NO.	DATE	NO.	DATE	NO.	DATE				NO.	DATE				NO.	DATE	1	2	3	4	CREDIT	DEBIT													
			\$	C.						\$	C.																							\$	C.											
			356	40				2	86	359	26							54	09	19	83	13	08	125	91	212	91	146	35																	
June 21/00			11							11																																				
July 1/01			34	10						34	10																																			
Aug			34	10						34	10																																			
Sept. 29 th			31	90						31	90																																			
Sept.			467	50						467	50																																			
										2895	479	25																																		

Trans. Pay 2 P. Dis. to Con. 30/9/17
 195 Labour Ref Pay 31.9.17

A3M. FORM REND. 1.10.17.
 DISCHARGED TO: Handwritten DATE 29/9/17.
 PAYBOOK VERIFIED 9. 10. 17.
 AUTH. Handwritten L.P.C. REND. 21/6/17.
 AUTHY. Handwritten 21/6/17.

Checked Graham

MONTH	PARTICULARS	CR.1	CR.2	PARTICULARS	DR.1	DR.2	DR.3	DR.4	BALANCE	DEBR. SUP. RED. ALLOE. PAY. ENG.
OCT 1917	Balance FORWARD								21370-	
Nov.				DRAR. 1005. 17/5/17. Grand A.A. 4867					16260	
				r 106 10/7/17. Rem. H. Bygn 243					5110	
1918				DRAR. 870. School 5/10/17	24	33			138 27	
Jan					24	33				
				Balance transferred to N. E. Branch						

Nit

OK

By Card Des. 3.12.18
a.k.

This space to be for numbers

M

Proceedings on Discharge.

(When forwarded for confirmation these proceedings should be accompanied by the documents specified on fourth page).

L.L.

No. 725194	
Rank Pte.	
Surname LOFTUS, George <i>Francis</i>	
Christian Name <small>NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.</small>	
Corps (Squadron, Battery or Company) 109th. Bn. (#2 D.D.)	
Date of Discharge NOV 26 1918	
Place of Discharge TORONTO, ONT.	
1. DESCRIPTION AT THE TIME OF DISCHARGE.	
Age.....22..... years..... months.	Descriptive Marks Vacc scars left arm G.S.W. Knees 1 0-4-17
Height.....5..... feet.....7..... inches.	
Complexion Fair	
Eyes Blue	
Hair Brown	
Trade Assistant Moving Picture Operator	
Intended place of residence } 14 Lobb, Ave., Toronto, Ont., (To be given as fully as practicable.)	
2. The above-named man is discharged in consequence of HAVING BEEN FOUND MEDICALLY UNFIT FOR SERVICE.	
<small>N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.</small>	
To be in the hand writing of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.	3. Conduct and character while in the service have been, according to the records, etc. <i>Very Good</i>
	<small>N.B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldiers and the Officer Commanding his Squadron, Battery or Company.</small>
To be in the hand writing of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.	4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.) Assistant Moving Picture Operator <i>K.L.D. 2/12/19</i>

M. F. B. 218.

100M.-1-17.
H. Q. 1772-39-113.

(OVER)

30 *2011*

5. He is in possession of the following number of G. C. Badges:

Nil

No reference to G. C. Badges is to be made on either the discharge or character certificate.

6. Medals and Decorations.....

Nil

To be copied by the Commanding Officer on to the parchment Discharge Certificate.

7. His account is correctly balanced, and signed by the Officer Commanding his Company. (*Squadron or Battery*), and I have impartially enquired into all matters brought before me in accordance with Regulations.

(Place)..... TORONTO. ONT.

[Signature]

(Date)..... NOV 26 1918

Commanding..... Captain,
For Lieut.-Colonel,
O.C. No. 2 District Depot.

8. Certificate to be signed by the Soldier on Discharge

I hereby acknowledge that I received all my Pay, Allowances and Clothing, and all just demands, up to the present date, subject to the reservations of the claims noted on the third page.

(Place)..... TORONTO. ONT.

George Francis Loftis (Signature of Soldier.)

(Date)..... NOV 26 1918

[Signature] (Signature of Witness.)

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

9. Additional Certificate in the case of a Soldier who takes his discharge on his own request.

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

.....(Signature of Soldier.)

10. Statement of Service.

Service toward Engagement to.....(the date to which the Record of Service is completed) 2 years 30 days.

Total 2 years 30 days.

11. Confirmation of Discharge.

The discharge of the above-named man is hereby confirmed.

(Place)..... TORONTO. ONT.

[Signature]

(Date)..... NOV 26 1918

(Signature)..... Captain,
For Lieut.-Colonel,
O.C. No. 2 District Depot.

Reservations referred to at Para. 8.

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

George Francis Loftus.

ml

Medical Report for (Initials) B 227	Medical Report for (Initials) B 227
Statement of Allowance Account on Furlough and Last Pay Certificate D 277	Statement of Allowance Account on Furlough and Last Pay Certificate D 277
Medical History Sheet (in the event of such having been prepared)	Medical History Sheet (in the event of such having been prepared)
(B) - Allegation	(B) - Allegation
(A) - Proceedings on Discharge	(A) - Proceedings on Discharge
In the case of records who are referred to and referred the discharge documents will consist of	In the case of records who are referred to and referred the discharge documents will consist of
Medical History Sheet (in the event of such having been prepared)	Medical History Sheet (in the event of such having been prepared)
Statement of Allowance Account on Furlough and Last Pay Certificate D 277	Statement of Allowance Account on Furlough and Last Pay Certificate D 277
Medical Report for (Initials) B 227	Medical Report for (Initials) B 227

In the case of a man discharged by purchase the date and number of Discharge Receipt with amount of same is to be noted hereon.

List of Discharge Documents.

<p>Reg. Conduct Sheet, Militia form B. 263.</p> <p>Squadron } Battery } Conduct Sheet, " B. 263a. Company }</p> <p>Copies of Convictions, by C. P. in MS.</p> <p>Med. Hist. Sheet, Militia Form B. 313</p> <p>Medical Report for Invalid* " B. 227.</p> <p>Statement of Man's Account on Transfer and Last Pay Cer- tificate, " D. 877.</p> <p>*Only if discharged "Medically unfit."</p>	<p>Attestation Paper, Militia Form B. 235.</p> <p>Proceedings on Discharge " B. 218.</p> <hr/> <p style="text-align: center;">In the case of recruits who are rejected on final approval, the discharge documents will consist of</p> <p style="padding-left: 40px;">(a) Proceedings on Discharge.</p> <p style="padding-left: 40px;">(b) Attestation.</p> <p style="padding-left: 40px;">(c) Medical History Sheet (in the event of such having been prepared.)</p>
---	--

N. B.—In the case of a man discharged by purchase, the date and number of Deposit Receipt with amount of same is to be noted hereon.

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

M. OR S. _____ REGT. No. *725194* RANK *PPE* NAME (IN FULL) *LOFTUS, GEORGE*

NEXT OF KIN	RELATIONSHIP	PARTICULARS	EFFECTIVE DATE	AUTHORITY	ORIGINAL UNIT C. E. F.	IF IN P. F. WHAT UNIT?	(BLOCK LETTERS, SURNAME FIRST)
ADDRESS					<i>109 Bn.</i>	TRANSFERRED TO	DATE AUTHORITY
IS SEPARATION ALLOWANCE PAID?	DATE EFFECTIVE					TRANSFERRED TO	DATE AUTHORITY
TO WHOM PAID	RELATIONSHIP					ASSIGNED PAY, \$	DATE EFFECTIVE
ADDRESS						PAYABLE TO	RELATIONSHIP ANY CHANGE IN ASSIGNEE OR ADDRESS
						ADDRESS	<i>14 Lobb Ave, Toronto, Ont.</i>
						STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE	EFFECTIVE
						DISCHARGED	PLACE DATE REASON AUTHORITY IF ENTITLED TO POST DISCHARGE PAY

Doc. Complete

#2201 *Nov 26 - 1918* *Med. Unfit.*

Balance from previous account

MONTH	PAY AND F. A.		OTHER CREDITS		TOTAL CREDITS		ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY		REGIMENTAL CHARGES		OTHER CHARGES		TOTAL DEBITS		BALANCE		PARTICULARS OR REMARKS		
	NO. OF DAYS	RATE	AMOUNT		\$	C.	COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2	COL. NO. 3	\$	C.	\$	C.	\$	C.	\$	C.	\$	C.		\$	C.
			\$	C.																					
																									<i>Unreceived P.L. 894 - Line 7</i>
																									<i>CR. mailed 25-1-19</i>
																									<i>171.00</i>
																									<i>114.50</i>
																									<i>58</i>
																									<i>50</i>
																									<i>W.S.O. PAID IN FULL</i>
																									<i>CAPTAIN</i>

350 - 70 = cheque 1883179 mailed 10/2/19 = 70 =

350 - 70 = nil

*Award file 11236-9-3
final payment of 70 paid
Soldier of Ottawa 10/2/19 PA*

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

Apr 1/17

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

<i>15</i>			
-----------	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

No. *725194 (724194)*
 Rank *Pte* Promoted Reverted Discharge
 Soldier's Name *Geo. J. Loftus*
 Battalion *109 Bn D. Coy.*
 Beneficiary
 Relationship
 Address

PARTICULARS OF ASSIGNMENT

Name *M. Loftus*
 Address *210 Robert St*
 Change of Address *Toronto Ont.*
 1
 2
 3
 4

X

Date	Cheque No.	Amount S/A	Amount A/P	Total
------	------------	------------	------------	-------

<i>Dec 31 1917</i>	<i>—</i>		<i>215</i>	<i>215</i>
<i>Jan 1 1918</i>	<i>E 58265</i>		<i>15</i>	<i>15</i>
	<i>XX</i>		<i>XX</i>	<i>XX</i>

11234-8-3.

REMARKS

A.P. \$10 Aug 1-16 \$15 April 1st 1917 (1) 2 m. 12³/₇
E.A.B. 11-4-17
ap overpayment for vet. no. order 1917 received by C.P.M. H.G. 649-2-
1913 July 34-8-3. 1915-2-15.
..... A/c Closed 31-1-18
Ret'd per Olympic
AP# 230 Date 6-11-17 12-1-18
M. Suski

M. F. W. 128
 4000-6-17-1772-39-141
 L. L. 22320-M. & D. 1188.

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.				
30-11-17	E.O.R.	Invalided to Canada ex →	St Kirkdale	15-11-17	CB 77. G.H. Knees. File 10mp1.
18-12-17	E.O.R. ^{PC}	to St Canada ex hosp.	Leaford	15-11-17	Fr 0281
	Disch. ^{PC}	To Convalescent Home	5th D ² Toronto	26/11/17	Fr R 4121

MILITARY CONVALESCENT HOSPITAL TORONTO

SECTION A.

Date **Dec 3/17**
 Name **Kofus, Geo J.** Age **21** Married or Single
 Home Address **210 Robert St** Enlisted **on Jan 28/14**
 Town or City **Toronto** Province **Ont.** at **Rindsay**
 Unit **38th** Rank and No. **Pte 725194** Previous Conduct

Diagnosis and Recommendations of previous Boards.

Amp. L. Thigh.

Complaint if any, regarding pay.

Complaint reported to

By

The above to be filled in by office when patient is admitted to hospital

Date

REPORT OF ADMITTING OFFICER

SECTION B.

DATE **24/12/17.**

WEIGHT { Present
Best

HEIGHT

CLASSIFICATION OF CASE

Indicate primary class by XX
secondary by X

1. MEDICAL
 - a. Cardiac
 - b. Pulmonary
 - c. Gas
 - d. Nervous
 - e. Gastro Intestinal
 - f. Rheumatic
 - g. Miscellaneous
2. SURGICAL
3. ORTHOPEDIC
4. SPECIAL
5. DENTAL
6. LABORATORY EXAMINATIONS REQUIRED
 - a. Wasserman
 - b. Blood
 - c. Urine
 - d. Sputum
7. PROVISIONAL FINAL BOARD

GENERAL STATEMENT REGARDING CONDITION, COMPLAINT OR DISABILITY

Military Orthopedic Hospital

[Signature]

Signature of Admitting Officer

REPORT OF MEDICAL OFFICER

SECTION C.

Date

CAPT. McKENZIE

Special questions for Soldiers' Aid Commission

1. Diagnosis
2. Degree of Disability (expressed by fraction)
Permanent or otherwise
3. Can former occupation be resumed?
If not, what class of work could be undertaken?
4. What military duty could he perform?

B1832

REPORT OF MEDICAL OFFICER
SECTION D.

Date

Dec 28 1917

1. COMPLAINT

1 Army 7 left thigh
2 Shrapnel wound right knee
April 9 1917

DATE OF ORIGIN &
CAUSE OF DISABILITY

2. PREVIOUS HISTORY

Give short history of illnesses and mention if any physical disability or disease, having a bearing on present condition ante-dated enlistment

3. PERSONAL HISTORY

Alcohol, Tobacco,
Tea and Coffee,
Narcotics, etc.
State amounts.

Veneral Infection

m

Did patient reach
England or France
or remain in Canada?

France

4. PRESENT ILLNESS

If "Gassed" what kind?
Duration of exposure.
What were immediate
effects?

If wounds or injury
how caused?

G.S.W.

Is condition due to
service or climate?
If not, was it aggravated
by them? How?

Service

On or off duty?

on duty

In action or in
field service?

in action

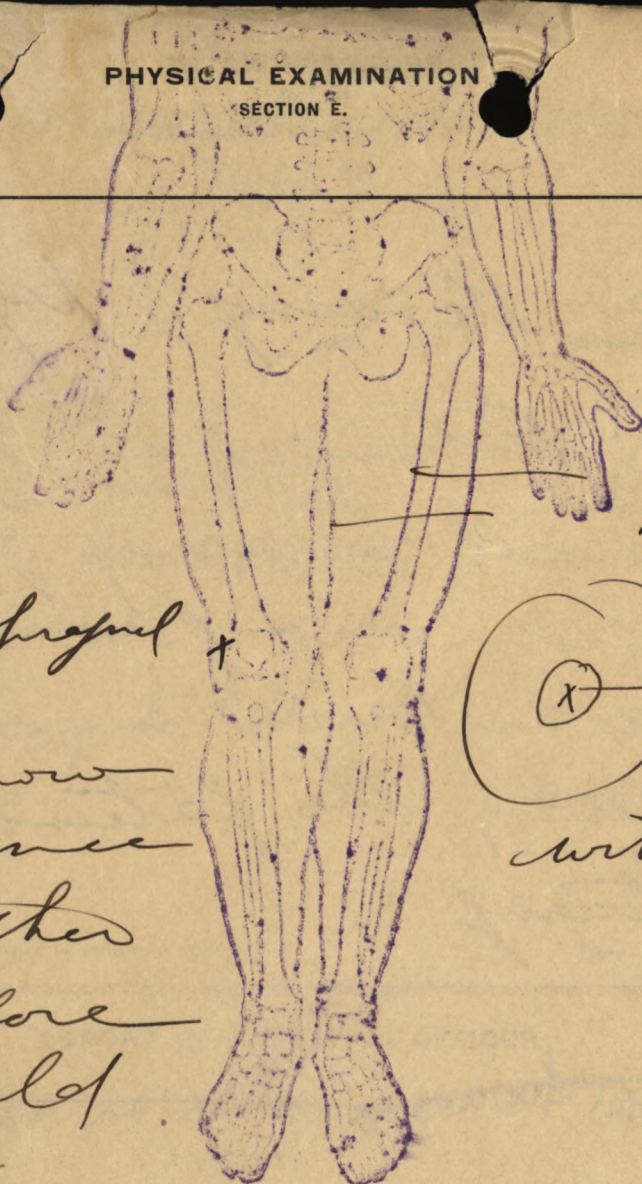
If due to exposure
on duty, what was nature?

Previous treatment and results.
Where treated?

Aug 117. Patient had a piece
of shrapnel removed from
right knee, with a perfect
result. Before the operation the
patient could not walk
Army 7 May 117 ~~at camp~~

PHYSICAL EXAMINATION
SECTION E.

Date



piece of shrapnel +
removed.
H&E + A&F now
normal. Spine
does not bother
patient, before
operation, could
not walk.

adherent
scar
with scar.

requires re-amp.

Treatment recommended

Re-amp't necessary. H. G. M. G. K.

Probable minimum duration of treatment?

Where may treatment be most satisfactorily carried out?

In your opinion is this man sufficiently recovered to return to the colors at an early date?

Does his physical condition warrant his undertaking with benefit some employment, thus supporting himself partially or entirely?

Is he likely to make further improvement under treatment in the Military Convalescent Hospital or tributary institutions?

If his case is stationary, would it be better to arrange for ultimate disposition at the present time?

No. 725194

Name Pte G. Rogers

HISTORY FORM No. 1

Month January 1918

Disease

DATE	TIME		TEMP.	PULSE	RESP.	URINE	STOOL	SLEEP	DIET	TREATMENT	REMARKS
	A.M.	P.M.									
									Fluids		Jan 7/18 Recl from operation. 1 p.m. P. 9.6 R 20 Condition good.
									Liquids	Jan. 7 th 18 - p.m. morphia grs 1/4 atropine grs 1/300	Had a fairly good night.
									Light	8 A.M. morphia grs 1/4 atropine " 1/300 4 P.M. " "	1/2 of Jan 8 th Pain very severe at times
									Liquids	Jan. 8 th 18 - 3 a.m. morphia grs 1/4 & atropine grs 1/300 (Hypo) given Jan Cal. grs 11 p.m. Magn. Sulph 30's a.m.	Doing a good deal. Complains of severe pain on awaking. Rested quietly after medication
									Half		Nauseated this a.m. 1/2 of 9 th A. fair day.
									Liquids	Jan. 9 th 3 p.m. no 9.	Had a fairly good night.

HISTORY FORM No. 1

TREATMENT

No. 723-194
 Name P. G. Refrus

HISTORY FORM No. 1

Month January 1918
 Disease _____

DATE	TIME		TEMP.	PULSE	RESP.	URINE	STOOL	SLEEP	DIET	TREATMENT	REMARKS
	A.M.	P.M.									
									Jan. 10 th 1918 pm	vernal exstn.	Slept poorly
	10.		99 ³ .84						Jan 11 — am		Easier to-day
	4		101 98						January 12. 1918.		Slept @ short intervals. more comf. night.
	10.		100 ² 78.								Light Diet
	4.		102 104								Dressings changed by m.o a little more comfortable
	8		102 104 22						January 13. 1918.		Slept well.
	4		98 ² 88 20						Jan 14th		Had a good day.

Sull
 Wise

HISTORY FORM No. 1

TREATMENT

PART I.

Reserved for M.H.C.

Regt. No. **725194** Rank **Pte** Surname **Loftus** Christian Name **George.**

Unit or Corps—(a) Overseas from United Kingdom **38th. Bn** (b) In United Kingdom **7th. Res.**

Born at—Town **Toronto.** County or Province **Ontario.** Country **Canada.**

Date of Birth—Day **24th.** Month **Oct.** Year **1895** Age **21** yrs. **10** months.

Joined at **Toronto. Ontario.** Date **28th. Jan. 1916.**

Former Trade or Occupation **Moving Picture Operator.**

Permanent marks or peculiarities that will serve for future identification:—

Amputation left thigh.
Small scar posterior internal condyle left knee.
1" scar two inches above rt. Fibula.

Height—feet **5** inches **6 $\frac{3}{4}$** Colour of eyes **Hazel.**

Signature of Soldier (for identification purposes) *Pte G. Loftus*

Medical Report.

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

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

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

Disabilities Group (a). **AMPUTATION RIGHT THIGH.**
LEFT

Disabilities Group (b). **NIL**

Disabilities Group (c). **NIL.**

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

	Disease or injury to which the disability is due.	Place of origin.	Date of origin.
(i) As to Group (a) above.	SHRAPNEL BULLET WOUND.	VIMY RIDGE.	9-4-17.
(ii) As to Group (b) above.	NIL.	---	---
(iii) As to Group (c) above.	NIL.	---	---

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

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

(i) As to Group (a) above? **No.** If yes, has Active Service aggravated it? **Not app.**

(ii) As to Group (b) above? **No.** If yes, has Active Service aggravated it? **Not app.**

(iii) As to Group (c) above? **No.** If yes, has Active Service aggravated it? **Not app.**

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

(i) As to Group (a) above? **Yes.**

(ii) As to Group (b) above? **Not app.**

(iii) As to Group (c) above? **Not app.**

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

(i) While on duty?

Yes.

(ii) While off duty?

No.

(iii) Was a Court of Inquiry held?

No.

(iv) Where?

Not app.

(v) When?

Not app.

(vi) Opinion of the Court?

Not app.

6. HISTORY OF THE CASE. (State concisely the essential points of the history, noting the entries made on the Medical History Sheet and other records.)

Hit by shrapnel in left knee, bullet going through joint. Also struck in right knee inner side, later extracted above knee on outer side. Attempts drainage were made to save left leg, but septic trouble developed and amputation was done a month after wounded. Operation done at 2ns East Gen Brighton. Hospitals:- C.C.S. few hours.

No. 7 Can. Gen. Staples. 2 weeks.

2nd. Est. Gen. Brighton. 3 months.

G.P.S. C.H. Ramsgate. 22-7-17.

7. PRESENT CONDITION. (Give previous and present weight if likely to indicate progress of disability.)

General condition good. Left leg amputated 8" below gt. trochanter. Circular method. Healed except small area - discharging. Hip movement free. Healed scar internal posterior part of rt. knee. Healed 1" incision outer side just above knee. Rt. thigh & calf muscles wasted.

8. OPERATION. (i) Was one performed?

Yes.

(ii) If so, state what.

Drainage & amputation.

(iii) Was one advised and declined?

No.

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

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

No.

(ii) If so, describe.

Not app.

10. DO YOU RECOMMEND :-

(a) Fit for duty?

No.

(b) Fit for base duty?

No.

(c) Invalid to Canada?

Yes.

(d) Discharge from the Service as permanently unfit?

No.

Date of Report



Station

Signed

J. P. ... Capt. Cause

Officer in medical charge of case.

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

Dated at



Nelson W. Cooper. Capt. Registrar for

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

Station, on

* Delete if inapplicable.

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

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

11. Is the disability fully indicated in Part I (1)? *no*

If not, indicate it *shined read left thigh*

12. Is the cause of the disability fully indicated in Part I (2)? *no*

If not, indicate it *add infection*

13. Was the disability caused or aggravated by— (a) Negligence of the Soldier { Caused? *no* Aggravated? *no* } (b) Misconduct of the Soldier { Caused? *no* Aggravated? *no* }

14. THE ENTIRE DISABILITY. Without regard to his regular occupation, to what extent is his capacity lessened at present for earning a full livelihood in the general market for untrained labour? (Estimate at none, 10%, 20%, 30%, 40%, 50%, 60%, 70%, 80%, 90%, or 100%.)

no *Sixty One hundred (100) percent will reduce to sixty percent in 6 m*

15. THE PENSIONABLE DISABILITY—(see Part I (3). Aggravation on Active Service of a disability existing previous to joining is to be included in the estimate).

What part of the entire disability estimated next above in (14) is due to causes arising during Active Service? (Estimate at none, 1/8, 2/8, 3/8, 4/8, or all).

all

16. Permanency of the Pensionable Disability estimated next above in (15).

(i) Is it permanent? *yes*

(ii) If not permanent, what is its probable minimum duration (in months)? *not applicable*

17. If an operation was advised and declined, do you consider the refusal to have been unreasonable?

not applicable

18. Remarks.

19. Recommendation:—(a) Fit for duty? *no*

(b) Fit for base duty? *no*

(c) Invalid to Canada? *yes*

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

Classification for the Military Hospitals Commission.

G+A

Date of Board

EXAM. MED. BOARD

Station

14 AUG. 1917

G. C. S. H.

BAMSGATE

Approved

Selwacker CAPT.

A.D.M.S.

Dated at

FOR A.D.M.S. CANADIANS, SHORNCLIFFE
SHORNCLIFFE—
(19, Westbourne Gardens, Folkestone.)

Station

Signatures of the Board

C. H. Dobson M.D. / Capt. Cawson resident.
W. J. Gardner
Capt. Lamb

18 AUG 1917

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

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

on the _____ day of _____ 191_____

Members of the Board :—

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

1. That the soldier mentioned in Part I. is entitled to a pension of _____ per cent of his basic pay, on the basis of _____ years of service, from the date of his discharge, to-wit: _____

2. That the soldier mentioned in Part I. is entitled to a gratuity of _____ per cent of his basic pay, on the basis of _____ years of service, on the date of his discharge, to-wit: _____

3. That the soldier mentioned in Part I. is entitled to a gratuity of _____ per cent of his basic pay, on the basis of _____ years of service, on the date of his discharge, to-wit: _____

4. That the soldier mentioned in Part I. is entitled to a gratuity of _____ per cent of his basic pay, on the basis of _____ years of service, on the date of his discharge, to-wit: _____

Classification for the
Military Hospitals
Commission

AG

Dated at _____ this _____ day of _____ 191_____

W. J. ...

...

...

Signatures of
the Board

President.

AUG 1917

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 initialed by the Medical Board.
6. A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board."
7. Under no circumstances may information other than that in sections 7, 8, 9 and 10 be communicated to the invalid, directly or indirectly.
8. The nomenclature of diseases must be followed, if possible, as described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London (1915), by Messrs. Harrison & Sons.

STATION D.M.H. Toronto. DATE 1.5/11/18

1. 1 (a) Unit D.D.#2. (b) Regimental No. 725194 (c) Rank Pte.
 (d) Surname Loftus. (e) Christian name George.
 (f) Home address 14 Lobb Ave., Toronto.
 (g) Next of Kin Mr. Martin Loftus. (h) Relationship Father
 (i) Address of Next of Kin 14 Lobb Ave., Toronto.

2. Age last birthday 22 Date of birth Oct. 24th 1896

3. Enlistment, or Appointment (if an Officer) (a) Place Toronto. (b) Date Jan. 27th 1916

4. Personal description:

(a) Height 5' 7" (b) Weight 123 (c) Complexion Fair.
(stripped)
 (d) Colour of hair Brown. (e) Colour of eyes Blue (f) Identification marks, Scars, etc. Rather
Tatoo l. f. Arm, Beaver.

5. Former trade or occupation Assistant moving Picture Operator.

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).	Years	Days
	2 yrs. 9 mths.	18 dys.

	PERIODS	
	From	To
	Canada <u>17½ mths.</u>	<u>Nov. 30th 1917</u> <u>Jan. 27th 1916</u>
England <u>10½ mths.</u>	<u>May 1st 1917</u> <u>Aug. 1st 1916</u>	<u>Nov. 15th 1918.</u> <u>Nov. 29th 1916</u>
France or other theatres of War <u>5 mths.</u> <u>Eng. & Canada. 18 mths.</u>	<u>Nov. 29th 1916</u> <u>May. 1st 1917</u>	<u>May 1st 1917</u> <u>Nov. 1918.</u>

7. Original disease, or injury (1) G.S.W. left thigh necessitating amputation (2)
G.S.W. Right Knee.

(a) Date of origin April 9th 1917 (b) Place of origin Vimy Ridge.
 (c) Cause 1 & 2 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.)

1. Amputation of left thigh 3" from perineum.
2. Partial loss of function fo right kneedue to pain.

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: Amputation of left thigh through the upper third 3" stump. Transverse Scar not adherent or tender, good movement. Supplied with a satisfactory artificial limb.
Subjective: NIL
2. Objective: No fluid or heat in knee, movement normal, but a creptation is appreciated by the hand when theknee is moved.
Subjective: Very slight pain on walking after standing for some time, pain soon passes off.

(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..... **Yes**..... 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..... **yes (as stated)**..... Other general condition..... **The patient**

has all his life been very nervous, when talking to him, ~~xxxxx~~ he appears very self conscious and shaky. He says he is no worse now than when he enlisted.

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

1. leg was amputated following gas gangrene
2. Shrapnel bullet was removed from right knee shortly after injury, healed by 1st intention.

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).)

No history of serious illness.

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

Nil

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 Not applicable.

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

The regimental documents will be referred to.

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

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

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

Canada 11 1/2 Mths. England 6 1/2 Mths. France 21 days.

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) No

17. Recommendations. That he be discharged as unfit for further service.

K. G. McHenry Capt. J. 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 S. Laflus 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.

S. Laflus Rank. Signature of invalid examined.

OPINION OF THE MEDICAL BOARD

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

We concur.

19. Is the invalid fit for

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

20. It is certified that the invalid

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

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

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

We recommend his discharge 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.

PLACE... Davisville Military Hospital *C. J. Curran* President.
J. H. G. G. G. Members
 DATE... North Toronto. Nov. 15th. 1918.

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.

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

APPROVED BY *[Signature]* APPROVED BY *[Signature]*
 Assistant Director of Medical Services. Director-General of Medical Services.
 DATE... 20-11-18... DATE.....

MEDICAL CASE SHEET.*

No. in
Admission
and
Discharge
Book.

Regimental No.

Rank.

Surname.

Christian Name.

Year

Unit.

Age.

Service.

Station
and Date.

Disease

G.S.W. left thigh Amputation
G.S.W. Rt knee

CANADIAN
MILITARY HOSPITAL,
LIVERPOOL

Jan 27. 1916. Enlisted at Toronto Ont
Aug 1. 1916. Arrived in England.
Dec 30. 1916. Arrived in France.
April 9. 1917 Wounded at Vimy Ridge
by fragments of shrapnel.
Injuries - right knee and lower
third L. thigh.
April 9. 1917. Admitted to C.C.S. where
wounds were dressed.
April 11. 1917 Transferred to No 7. Can
Gen Hpl. where he was operated upon
drainage established.
April 18. 1917 Transferred to 2nd
Eastern Gen Hpl Brighton
Two operations for drainage of
L. thigh & shrapnel removed
from R. knee.
May 1st 17 Amputation left thigh - 8"
stump.
Sept 20. 17 Transferred to Granville
Special Hpl Ramsgate - dressings
Oct 22. 17. Transferred to Warrington
Hpl. (Lord Derby).
Sept 29. 17. Transferred to no 5
Can Mil Hpl. Kettlewell L'pool

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

Station
and Date.

On admission: 8" stump L. thigh
End of femur almost uncovered
needing daily dressing. Will
require re-amputation.

Scar medial side R. knee.
— no disability.

Patient going about on crutches
general condition good.

Oct 30. Pyonhwa — Dental treatment

San McEllan
Capt. Camp.

A-T.S.

Prophylactic ~~NO~~
with E.F. YES

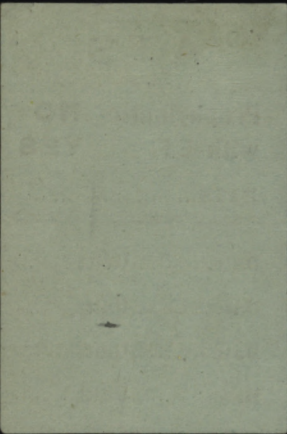
DATE..16..|..4..|..4..7..

Date 9..|..4..|..7 Units.....

Date 4..|..4..|..7 Units 500...

Date 24..|..4..|..7 Units 500...

Date..... Units.....



IMPORTANT.

DISPOSAL OF ORIGINAL MEDICAL HISTORY SHEETS.

1. Action by Officer i/c Hospital—

- (a) See that all entries are properly and fully made, and signed.
- (b) Forward to Hospital to which man is transferred, immediately it is done. If discharged to Unit—to Officer Commanding such Unit.

2. Action by Officer Commanding Unit—

- (a) On admission of man to Hospital, forward M.H.S. to such Hospital at once.
- (b) On transfer to another Unit—to Officer Commanding such Unit.
- (c) On proceeding Overseas — return to Record Office, London, without delay.

(Authority, Army Council instruction 831, April, 1916.)

