

ATTESTATION PAPER.

No. 724625

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

ORIGINAL

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).



- 1. What is your surname? *Mills*
- 1a. What are your Christian names? *John Walter*
- 1b. What is your present address? *Antler, Saskatchewan*
- 2. In what Town, Township or Parish, and in what Country were you born? *Sheffield, England*
- 3. What is the name of your next-of-kin? *George Mills*
- 4. What is the address of your next-of-kin? *Antler, Saskatchewan*
- 4a. What is the relationship of your next-of-kin? *Brother*
- 5. What is the date of your birth? *27th May 1885*
- 6. What is your Trade or Calling? *Hospital Orderly*
- 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, *John Walter Mills*, 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 *30th Nov* 1915 *J W Mills* (Signature of Recruit)

F. H. Godson Capt. (Signature of Witness)

ADJUTANT

109th Overseas Battalion, C. E. F.

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *John Walter Mills*, 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 *30th Nov* 1915 *J W Mills* (Signature of Recruit)

F. H. Godson Capt. (Signature of Witness)

ADJUTANT

109th Overseas Battalion, C. E. F.

CERTIFICATE OF MAGISTRATE.

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

The above questions were then read to the Recruit in my presence. I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath

before me, at *Lindsay* this *5th* day of *January* 1916.

[Signature] (Signature of Justice)

158

Description of John Walter Mills on Enlistment.

Apparent Age. 30 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. 5 ins.

Tattoo mark left arm
Cross

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

Complexion..... Fair

Eyes..... Blue

Hair..... Brown

Religious denominations { Church of England.....
 Presbyterian.....
 Methodist.....
 Baptist or Congregationalist.....
 Roman Catholic..... RC
 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 declares that he is not subject to fits of any description.

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

Date..... Nov. 30th 1915

J. McCulloch..... Capt.
H. Boyd..... Medical Officer.
 109th Overseas Battalion, C. E. F.

Place..... Hudson

* Insert here "fit" or "unfit."

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

CERTIFICATE OF OFFICER COMMANDING UNIT.

..... John Walter Mills..... 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.

JAN 10 1916

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

Date..... 1915

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

MILLS JOHN W.

724625

12 BN

23295

PHY.U.

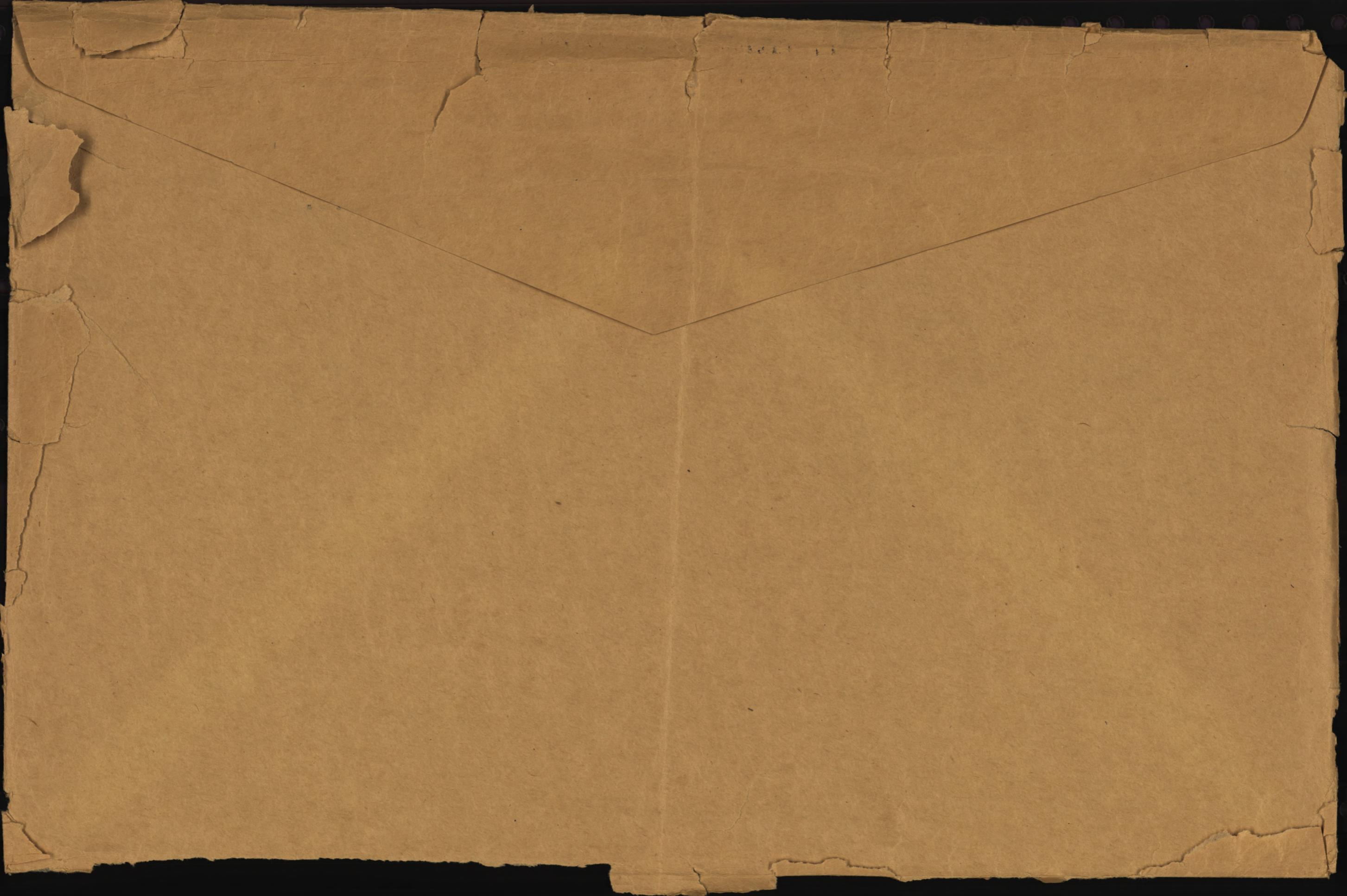
NATIONAL PERSONNEL
RECORDS CENTRE
CENTRE NATIONAL des
DOCUMENTS du PERSONNEL

55C
55C

504
0217

304
0217

H



724625
I.D. number
No. d'identification

MILLS
Surname
Nom de famille

John Walter
Given names
Prénoms

deceased 2/12/70

PERSONNEL RECORDS CENTRE
CENTRE DES DOCUMENTS DU
PERSONNEL

PERSONNEL RECORDS ENVELOPE
ENVELOPPE DES DOSSIERS DU PERSONNEL

Location
Lieu

Box : 6217

« CONTENTS CONFIDENTIAL »
« CONTENU CONFIDENTIEL »



SENT
ENVOYE

MAY 27 1958

Pt

B. ✓

Number. 724625

Rank.

Surname. MILLS

Christian Name. John Walter

Units. 38th Bu. @ Au Inf. Theatre of War, France

Date of Service. 6/12/16

Remarks. 168 Mushroom Lane

Latest Address. ~~Antler~~ Sheffield
Eng.

~~Sask~~

Roll No.

B. Pages 619.
15/3/8

No.

RANK

NAME

T. O. S.

UNIT

DESP. MAY 28 1928
M. D.

REGN. NO. 742

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC. PARTICULARS	AUTHORITY

Name **MILLS. John Walter** *Bank Pte.*Reg. No. **724625**Unit ~~38th. BATTALION~~
CANADA*7th Riv. Batta*

Next of Kin

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1917						
11-4	13 Staty. Hos.	Boulogne	S.W.L. Leg. Jaw.	A176M-2408	20-4	
16-4	2nd Wtn. G. H. Manchester	do	do	B169		
1-9-17	<i>1st Cav Hosp. Exeter</i>	do	do	A-3.		1378
21-9-17	<i>1st Cav Hosp. Exeter</i>	do	do	B19		2445-
13-11-17	<i>Discharged</i>	do	do	B64		1338.
14-1-18	<i>1st Cav Hosp. Exeter</i>	do	do (old)	C113		10569
6-2-18	<i>Discharged</i>	do	do	C130		3015.

REGT'L NO 724625NAME Mills John Walter

H. Q. FILE NO. 649-

RANK AND CORPS Pte 38th Bn 200m 109th Bn

FOLLOWS

NO.

FOLLOWS

CABLE

No.

DATE

NATURE OF CASUALTY

c.

M 2408 20-4-17

Adm to 13 Stat Hosp Boulogne
April 11th 1917 Issued leg. jaw. ✓

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
a 176	No 13 Stat., Boulogne	11-4-17	sw. L. Leg. Jaw.
B 169	2nd Western Gen., Manchester	16-4-17	sw. L. Leg. & Jaw.
B 3	Can. Com. Wd. of P. G. S. S. S. S.	1-9-17	sw. L. Leg & Jaw
B 19-1	Brit Mil Dispensing ^{Kent.}	21-9-17	sw. L. Leg. & Jaw. E. Ant. Reg.
B 64-3	Discharged	13-11-17	sw. L. Leg. & Jaw ¹⁴⁻¹³⁻¹⁷
C 112.	#14 Can. Gen. Eastbourne	14-1-18	" " " " " " ¹²⁻²⁻¹⁸ Old.
C. 130	Discharged "	6-2-18	" " " " " "

22018

REG. NO. 724625

NAME Mills J.W.
(SURNAME FIRST)

RANK Pte

CORPS 12. 10. 10

38

AGE 33.

SERVICE 40/12.

NAME OF HOSPITAL St. Chad's.

PLACE Regina Sack

DATE OF ADMISSION 13-6-18

DISEASE Wound of Neck.

DISCHARGE 23/7/18.

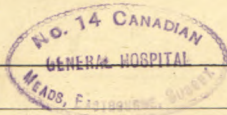
OPERATION

DISCHARGED TO DUTY ✓

TRANSFERRED TO

DISCHARGED BY MEDICAL BOARD

109



A. & D. CARD

AT _____ HOSPITAL _____

A. & D. No. 146 PL. OF ACTION 724625

RANK Pfc UNIT 7th Can Reg (38th Bn) SICK OR WOUNDED

NAME Mills J. Hatter AGE 32 RELIGION Re.

PLACE IN HOSPITAL B2.

DIAGNOSIS G.S.W. Neck

ADMITTED 13 JAN 1918 FROM _____

DISCHARGED _____ TO E.O.R.D.

TRANSFERRED _____

SERVICE AT HOME 26/12 IN FIELD _____

RESULTS _____

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

(P.T.O.)

Dill *Ro*

REMARKS.

MEDICAL HISTORY SHEET.

Requested			
From	Date	Reply	Date
1			
2			
3			
4			

Orig Dup. Recd. from *7th. Res. Dep.* 13/1/1918

Orig. Dup. Sent to *HR* 4/12/1918

Recd. from Regr. this Orig. Dup. 1/19

Ward

orig. regd. 4 FEB 1918

J. J. Madson

No. 724625. RANK

Pte

NAME

Mills. J.

W.

T. O. S. 30-11-15.

UNIT

109th. Battalion.

D. O. G. 30-11-15.

M. D. 13

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915 Nov 30	1915. Nov 30	✓		
	Dec.	✓		
1916	Jan. 1916	✓		
	Feb.	✓		
	Mar.	✓		
	April	✓		
	May	✓		
	June	✓		
	July	✓		

UNIT SAILED

JUL 23 1916



SURNAME.

Mills

CHRISTIAN NAMES

John Walter

REGL. NO.

724625

RANK

Pte.

UNIT

109th

FORMER CORPS

Nil

CARD NO.

4

Pop. Dis. 7. 26/8/18 12/8/18

FOLL.

will do 12³ 9/26/18

Batt

NEXT OF KIN.

NAMES IN FULL

Mills, George

RELATIONSHIP TO SOLDIER

Brother

ADDRESS

Gutler, Sask.

CHANGE OF ADDRESS

COUNTRY OF BIRTH

England, Sheffield.

DATE

May 27th. 1885

PLACE OF ATTESTATION

Lindsay, Ont.

DATE

Jan. 5th. 1916.

Filed from Halifax Per. S.S.

R/C 20/5/18 ¹⁷⁶/₃₄ ¹²/₁₂

"Olympic" 23-7-

16 ⁴⁸⁸/₂₅



MARRIED

SINGLE

Yes.

WIDOWER

TRADE OR CALLING

Hospital Orderly

RELIGION

Roman Catholic.

DESCRIPTION.

APPARENT AGE

30 YEARS

6 MONTHS

HEIGHT

5 FEET

5 INCHES

CHEST MEASUREMENT

37 INCHES

EXPANSION

3 INCHES

COMPLEXION

Fair.

EYES

Blue.

HAIR

Brown.

DISTINGUISHING MARKS

Tattoo marks left arm, cross.

MEDICAL EXAMINATION.

PLACE

Lindsay, Ont.

DATE

Nov. 30th 1915.



Surname Mills Christian Name or Names J W Reg. No. 724625
Rank Pte Unit 38th Batt Co. E. O. Troop 7. Res. Batty.
Hospital 13 Sta Boulogne Date of Admission 11-4-17

2 W. Gen Manchester ^{Transferred} Hosp. 16-4-17
Can Cow. Epison. Hosp. 1-9-17
Ontario Hq. Orington. Hosp. 21-9-17
14. *Can Gen. Eastbourne.* Hosp. 14. 1. 18.
S.W. Lt Leg & Jaw

Diagnosis *S.W. Lt Leg & jaw. Old.*
(1) Later Diagnosis (if changed)
(2)
(3)

Additional Diagnosis: if more than one state present

DISPOSITION

C.L. 20-4-17 A 176
23-4-17 B 169
6-9-17 B 32
25-9-17 B 19
16-11-17 B 64 (3)
18-1-18 B 112
9-2-18 C 130

hls 13.11.17. Date
Dis. 6.2.18

REMARKS

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

*Name Mills, J.W. Rank Pte. Regtl. No. 724625
 Original unit 109th Bn. Present unit 38th Bn. M. or ~~NS~~ Age 33 Religion R.C. Fyle Depot
 Port, ship, and date of arrival Halifax, Mauretania, 20-5-18
 Next of kin (Wife) 75 Montgomery Terrace Rd. Sheffield, England
 Address on leave Fertile, Sask.
 Address on discharge
 Transportation issued Yes No X Date 24-5-18 Character on discharge
 Previous occupation Farm-Labourer Date and place of enlistment Lindsay 15-3-15
 Diagnosis G.S.W. Neck & Leg. Date of Medical Boards

Date.	Remarks.	Pt. 2 Order No.
24-5-18	T.O.S. and Posted to Casualty Coy. with leave to 10-6-18	D.O. 38/170
12-6-18	<i>Transferred to Hospital Section</i>	<i>DDO. 66/1245</i>
12-6-18.	Posted to St. Chad's Hosp.	DDO. 57/197.

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

Date.

Remarks.

Pt. Order No.

20-7-18. Transferred to #12 Garrison Regiment.

DDO.96/442

MEDICAL CASE SHEET (OPHTHALMOLOGY)

MILITARY HOSPITAL

Ceely 50/18
Regd

NAME John Walker Miller RANK pt

DATE 7/24/25
NUMBER

12 Garrison
UNIT

AGE

HISTORY - Rt. Internal Strabismus

SYMPTOMS Inability to see up at eye
now

GLASSES WORN

OBJECTIVE EXAMINATION

EXTERNAL APPEARANCE



Anisometropia
E

Anisophoria
not due to
strabismus

RETINOSCOPY AND OPHTHALMOMETER

OD

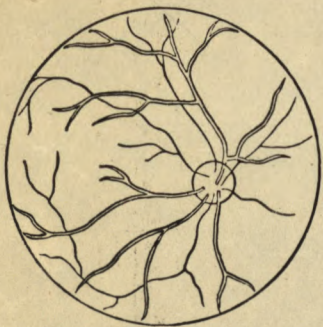
OS

OPHTHALMOMOSCOPE

FUNDUS

LENS

CORNEA



FIELDS

Rt. Absence of fixation
Outer edges of field markedly
narrow

MUSCLE BALANCE

TENSION

SUBJECTIVE EXAMINATION

TRIAL CASE

BEFORE
V 200
20/20

SPH CYL AX AFTER
No improvement with glasses
not required

P.P.

P.R.

A. ACC.

PRESBYOPIA

GLASSES PRESCRIBED

OD

OS

Full time
O.S.C.

TREATMENT:-

MEDICAL CASE SHEET (OPHTHALMOLOGY)

MILITARY HOSPITAL

DATE

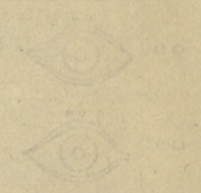
NAME _____ RANK _____ NUMBER _____ UNIT _____

HISTORY

SYMPTOMS

GLASSES WORN

OBJECTIVE EXAMINATION
EXTERNAL APPEARANCE



RETINOSCOPY AND OPHTHALMOSCOPY

OPHTHALMOSCOPY



TENSION

MUSCLE BALANCE

SUBJECTIVE EXAMINATION

TRIAL CASE

GLASSES PRESCRIBED

TREATMENT

DATE

INITIALS

To be made out in duplicate.

H.Q. 54-21-23-53



DUPLICATE

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

INSTRUCTIONS.

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

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

(2) Regimental Number..... 724625.

(3) Full Name of Soldier..... John Walter Mills.
..... Pte.

(4) Place of Birth..... Sheffield.
..... England.

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

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

(b) Present Postal Address.....

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

(8) Have you any children?..... No.

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

Also their names and ages.....



(9) Is your Father alive? No.
If so, state name and address

(10) Is your Mother alive? Yes.
If so, state name and address.....Sarah Storey.

.....Fairvale Hartsill nr. Sheffield England.

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

Date JUL - 8 1916

.....
[Signature]
.....
Officer Commanding.
O. C. 109th Overseas Battalion, C. E. F.

J.P

Rank *Pl* Name **MILLS. John Walter** ✓ Reg'l No. **724625** ✓
 Unit **109th Bn.** If in perm. Corps, }
 What Unit? } Married or Single **Single** ✓
 Place and Date of Enlistment **Lindsay. 30th Nov. 1915.** ✓ Place of Birth **Sheffield, England.** ✓
 Name and Address, Next-of-Kin **George Mills.** ✓ Relationship **Brother** ✓
Antler. Saskatchewan Canada. ✓ Relationship
 Assigned Pay Monthly \$ Payable to Relationship
 Separation Allowance \$ Payable to Relationship



N/E. R.B. No. **7008**
 File R.L.
 Category **Case of**

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					
4.12.16	OC 109th	SOS on tfr. to 38th Bn.	Whitley	4.12.16	Pt II DO 339
13.12.16	38th Bn	T-O-S on tfr from 109th	Field.	6.12.16	Pt II DO 442.
20.1.17	"	No 13 Stationary Hospital	Boulogne	11.1.17	b/f 176 SW Leg. Jaw.
23.1.17	"	2nd Western General Hospital	Manchester	16.1.17	b/f 169 " " "
28.1.17	"	Posted to EORA	Seaford	14.1.17	Pt 4048. + b/f 4 + s/f 6 1/4
5-9-17	EO R.	Transf to Cam Corn Hosp. Woodlee Pk.	Epsom.	1-9-17	Ed B 3241. d. Leg + jaw.
24-9-17	"	Transf to Cnd Trily Hosp.	Orpington	21-9-17	Ed B 19. "
15-11-17	"	Adm'd to 16 Cam Gen Hosp.	"	13-11-17	Ed B 64 " "
15-11-17	"	Dis. do.	"	13-11-17	" 64 " "
19-11-17	4th Rec.	Posted from E.O.R.D.	Seaford	13-11-17	Pt 0279, GORD. 2HQ 16-11-17

A.F.B. 103 CHECKED
11 DEC 1916
Dsbm

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.				
27-11-17	7 th Reg	Post marriage approved of	Tiepleford.		
7 th 18.	80th B.	Posted from 7 th Reg. Bn.	"	6 th 18.	FO 286 7 th Reg. Bn. No. 32. 21/7 th 18
19 th 18.	6 th Reg. Bn.	Attached from 80th B.	"	19 th 18.	80th B. No. 51 of 20 th 18. H.
26 th 18.	"	Ceases to be attached from 80th B.	"	28 th 18.	80th B. No. 88 of 29 th 18. H.
29 th 18.	80th B.	In Comm. C.O. B. on pending Disch.	"	28 th 18.	88.
22 nd 18.	"	Ceases on Comm. C.O. B. his S.O.S. on being returned to Canada for disposal by A. Gen'l.	"	13 th 18.	13H.



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

Casualty Form—Active Service.

M. F. W. 54.
150M. 10-15.
H.Q. 1772-39-920.

Unit, Regiment or Corps 6th Reg.
 Regimental No. 724625 Rank Pte Name Mills John Walter
 Enlisted (a) 30-11-15 Terms of Service (a) Dep't. Service reckons from (a) 30-11-15
 Date of promotion to present rank } Date of appointment to lance rank } Numerical position on roll of N. C. Os. }
 Extended _____ Re-engaged _____ Qualification (b) Hospital attendant



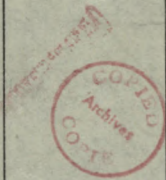
Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
19.2.18	6th Reg.	Attached from the EORD	Seaford	19.2.18	Pte B.D. 42.
28.3.18	6th Reg.	Ceases to be attached	Seaford	28.3.18	Pte B.D. 74
29.3.18	EORD	Ceases on Com. to 6th and on Com. C.D.D. Buxton	Seaford	28.3.18	Pte B.D. 88
30 MAR 1918		TAKEN ON STRENGTH C.D.D. BUXTON Pt. 11 ORDER No. 75			
		EMBARKED FOR CANADA FROM LIVERPOOL			

R. Radford
 OFFICER IN CHARGE
C. S. Brown
 Adjutant,
 for Officer Commanding,
 East Ont. Reg't Depot.

J. Lock
 Commanding
 Lieut.-Col.
 Canadian Discharge
 Depot
 [P.T.O.]

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

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
15/4/18	622	S.O.S to EORD	Buxton	Part II 88	15/4/18
24/5/18	38/170	D.D.O. Part II T.O.S. No. 12 DISTRICT DEPOT From <i>Clemens</i>	REGINA		<i>Munroe</i> CAPTAIN & ADJUTANT 24/5/18 <i>John</i> Capt. H. Sec.
20-7-18	12 Dis Dep.	T.O.S. 12 th B.C.G.R.	Regina	20-7-18	D.O. 89/427
16/8/18		Discharged.	Regina	16/8/18	D.O. 123



St. Anthony
Lt. Col,
O.C. 12th Battalion Can. Garrison Regiment

NOV 20 1917 2107
2178 *ASBm*



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

M. F. W. 54
1500, 10-15.
S.O. 1772-29-920.

Casualty Form—Active Service.

109th OVERSEAS BATTALION, C. E. F.

Unit, Regiment or Corps

Regimental No. *24625* Rank *Private* Name *Mills John Walter*

Enlisted (a) *30-11-15* Terms of Service (a) *D of W.* Service reckons from (a) *30-11-15.*

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

Extended Re-engaged Qualification (b) *Hospital Attendant*

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

Embarked Canada Halifax 24.7.16.

Disembarked England. Liverpool 31.7.16.

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

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

4/12/16 O.C. 109th Battn. Proceeded overseas for service with 38th Bn. *Witley* *5/12/16.*

D.O. Pt. 11.339.

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

6 12 16 C.B.D. TAKEN on STRENGTH 38th Havre *6 12 16* N. R. *H.O. 242-13.12.16*

7 12 16 » Left for Unit FIELD *7 12 16* N. R.

13.1.17 Unit Joined Unit FIELD *9.1.17* B. 213. DCS. 80422.17

14.4.17 11 C.F.A. *S/O Jaw & Ldg.* *11 C.F.A. & C.C.S.* *9.4.17* 393683495 R.C.D. 113.

(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.

[P.T.O.]

724625
Mills
G.W.

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				
11. 4. 17. 14.4.17.	13 Staty. do	Sto Jaw reg. L. Inv. wounded and posted to E.Ont. Reg. Depo <i>J.M. Anderson</i>	13 Staty. Seaford,	11.4.17. 14.4.17.	W3034-272. W3083/5073 St. Andrew, Pt. 2.0.48, d-28.4.17. Lieut for Major, A.A.G. Com Sec, 3rd, Ech, G.H.Q.
26-4-17 BH	E.O.R.D	Posted from 38th Bt ⁿ	Seaford.	16-4-17	Pt 10 45 <i>W.M. Myers</i> LIEUT: 1 FOR LTI COL: I/C RECORDS, C.O.M.F.
16.11.17	E.O.R.D	Soft of E.O.R.D on posting to 7th Res Bn.	Seaford	13/4/17	Pt 12 249. <i>W. Chamberlain</i> Asst Staff, adj for R.E.O.R.D.
19/11/17	<i>cc</i> 7th Res:	T.O.S from E.O.R.D	Seaford	13/11/17	100 279
7-2-18	O.O. 7th RESERVE BATTALION	O.B.S. to E.O.R.D having been lat. Bii.	Seaford	6-2-18	Pt 11 190-32 <i>W. Chamberlain</i> LIEUT. & ASST. ADJ 7TH RESERVE BATTALION
7-2-18	O.E. E.O.R.D	Re J.O.S. E.O.R.D and posted to Depot Coy.	Seaford	6-2-18	Pt 11 190-38.
20-2-18.	O.E. E.O.R.D	on command from E.O.R.D. to 6th Res. Bn.	Seaford	19-2-18	Pt 11 190-38. <i>W. Chamberlain</i> Adj for R.E.O.R.D.



CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 724625 (Rank) Private

Name (in full) John Walter Mills enlisted in

the 109th Battalion

CANADIAN EXPEDITIONARY FORCE at Lindsay. on the 10th

day of January 19 15

HE served in France. Three months with 38th Battalion Canadians
and is now discharged from the service by reason of Physically Unfit

wounds. Auth 12. M.D. 28-M-449.

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

Age 35 Years

Height 5ft 5 inches

Complexion Fair

Eyes Blue

Hair Brown

J W Mills
Signature of Soldier

Marks or Scars

O.C.W. Jaw.

" I Leg.



J. P. [Signature]
Issuing Officer

Date of Discharge 26-8-18

1st Lt B. G. [Signature]
Rank
Appointment

Signed at Regina. Sask this 26th day of August 19 18

in Military District No. twelve

File Reference No. M.D. 12. 28-M-449

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. 724625 (Rank) Private Name John Walter Mills

Unit 12th Battalion Canadian Garrison Regt

Address on Discharge Antler Sask

Character and Conduct "GOOD"

Former Occupation Hospital Orderly

Special Qualifications of Value in Civil Life

Medals and Decorations

Remarks Entitled to wear one gold casualty stripe 9-4-17.

Signed at Regina. Sask this 26th day of August 1918

J. P. Bradley
Name of Officer

1st Lt B. G. R.
Rank
Appointment



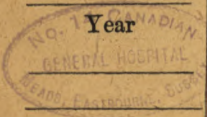
21

Forms
I. 1237
11

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book	Regimental No.	Rank.	Surname.	Christian Name.
	724 625	SGT	Mills J. R.	
Year	Unit.	Age.	Service.	
1918	7th Reg.	32	26/12	



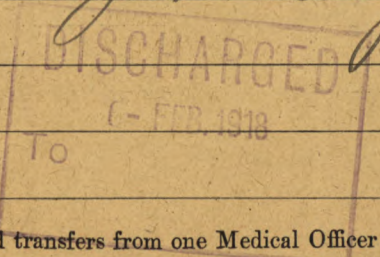
Station and Date.	Disease
Jan 14	G.I.W. Neck 146

This man had been treated in Orpington Hospital for Gun shot of Neck & discharged to his Batt^y. Examination: Scar about 4" long just anterior sterno cleido mastoid muscle Rt side adherent at lower angle, some traction on turning head to opposite side also some enlargement of glands anterior chain left side. Other systems Normal. This man should be placed in a low category temporarily at least. Fit for categorizing board. J. Baker

Jan 28 X Ray reveals no fracture Capt of Jaw some loss of bone along lower surface. a few scattered particles of FB present. J. Baker

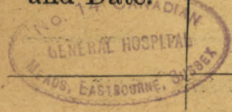
Feb 1 Fit for Categorizing board Capt All other Systems Normal

6/2/18. Disch. B. J. Baker Capt



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

Station
and Date.



RECORD NO.,...906...

X-RAY DEPARTMENT,
No. 14 Canadian General Hospital,
Eastbourne, Sussex.

23 JAN 1918
.....1917.

Ward B

Regl. No. 724625 Rank. Pte. Name. MILLS J.W. Unit. 7th Res....

Small...
Multiple foreign bodies seen in
region of right lower jaw, & a few
down the side of neck. No fracture
of lower jaw, right, can be made out,
but there is some loss of bone about
midway along lower border of body
of bone.

146

Swinden.

Capt. C.A.M.C.,
Officer i/c X-Ray Department.

X-RAY DEPARTMENT
No. 14 Canadian General Hospital
Wastbury, Sussex
1914

RECORD NO.

Regt. No. Rank Name Unit

[Faint, mostly illegible handwritten text, possibly a medical report or letter.]

Office of X-Ray Department
Capt. C.A.M.G.

[Faint handwritten text at the bottom of the page.]

Regl. No., Rank & Name. *5724625. Pte Mills J. H.*..... *7th Res*

Diagnosis. *G.S. w. thick*..... 14th Canadian General Hosp. Eastbourne.

To Officer i/c Laboratory, Ward. *B. 2*.....

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

Date... *14.1.18.*..... *Capt Baker*.....
Officer i/c Ward.

Laboratory Report

Color. *amber*

Odor.

Reaction. *acid*

S.G. *10.20*

Sugar *neg*

Albumen. *neg*

Miscoscopic *✓*

Special.

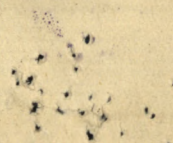
Date of Examination... *14/1/18.* *N.B. Hetherington*.....
Capt. C.A.M.C. Officer i/c Laboratory.



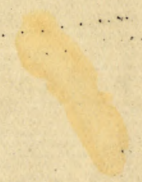
146

1890

14



1890



1890



1890

1890

Ward 3

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	424 625	Pt.	Hills	J.W.
Year	Unit.		Age.	Service.
1917	38 Cav. Batt.		32	2/12
Station and Date.	Disease G.S.W. Jaw Lower Rt. (Fract.)			

ORRINGTON
20 SEP 1917

Oct 5/17

bone which was removed and small amount of pus evacuated. Further dissection or attempt to remove mass was not attempted on account of presence of infection. Packed with sterile gauze and stitched up skin with silk. J.W.P.

Capt Sutherland:-

Will you kindly examine his vision.

Oct 30.17

Patient complains of poor vision, especially in right eye, but never had good vision in this eye. Was wounded at Vimy Ridge Apr. 9.17. Thinks vision worse since was unconscious for about 20 minutes the day he was wounded. (R.V. $\frac{4}{60} = \frac{1}{60}$ with $+1.00 DS = +2.00$ at 90° L.V. $\frac{6}{6} = 2 = \frac{1}{6}$ with $+1.00 DS$. Patient has internal Strabismus of right eye, which has existed since childhood when he was cut in the right eye with a knife.)

J.G. Sutherland,
Capt. Cav.

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

Station
and Date.

THESE ARE THE

1883

Hurlough Rectory

Old Cross St

PATHOLOGICAL REPORT.

Ontario Military Hospital.
Orpington Kent.

Examination required *Coe Mallak*

Capt Ross

Date *Oct 5th* Ward No. *9*

Name *Mill's* Rank *Pte*

Reg. No. *724625* Unit *38th Can's*

Clinical Diagnosis *Fran's gland in neck*

Brief History.....

Laboratory No. *536*

Report ~~to~~ *Many lymphocytes, a few degenerated polymorphs and endothelial cells. No bacteria found in direct smear or in 24 hr culture on serum agar or plain agar*
R. Mack.

Handwritten text, likely bleed-through from the reverse side of the page. The text is extremely faint and illegible due to fading and the texture of the paper. Some words are barely discernible, such as "The House" at the top, "of the" in the middle, and "and" at the bottom. The rest of the text is too light to transcribe accurately.

Ward ward 3 Q mtt Hospital. Date Sept 27

Regl. No.	Rank and Name	Corps	Part to be X-Rayed
724625	Private Mills, J.W.	38 th Can	Region of long neck

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

He is 4th
 B ind 12th
 Nat - England
 wound - Vauxy
 Transf - Epsom

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

No. of Plate R 513 2 82 x 62 A.P. 26

Trail of particles of metal $\frac{1}{8}$ " x $\frac{1}{8}$ " in size, from the right border of the seventh Cervical Vertebrae upwards to immediately below the mandible

Signature of M.O. Read
 Date Sept 27

Signature of Radiographer L. Schreiber
 Date Sept 27/17
 capot



CLINICAL CHART.

Army Form B. 181 Bed 8

Corps 7 38. Cam.

(To be attached to Case Sheet.)

Military Hospital ORRINGTON

No. 424 625 Rank and Name Mills J.W.

Age 32 Service 21/12

Disease gum jaw lower front. Date of admission 20 SEP 1917

Date of discharge ~~20~~ 13/17 Result duty

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

Signature W.D. [unclear] In charge of case.

N-3

English

Medical
13 11 17

Pub 8.

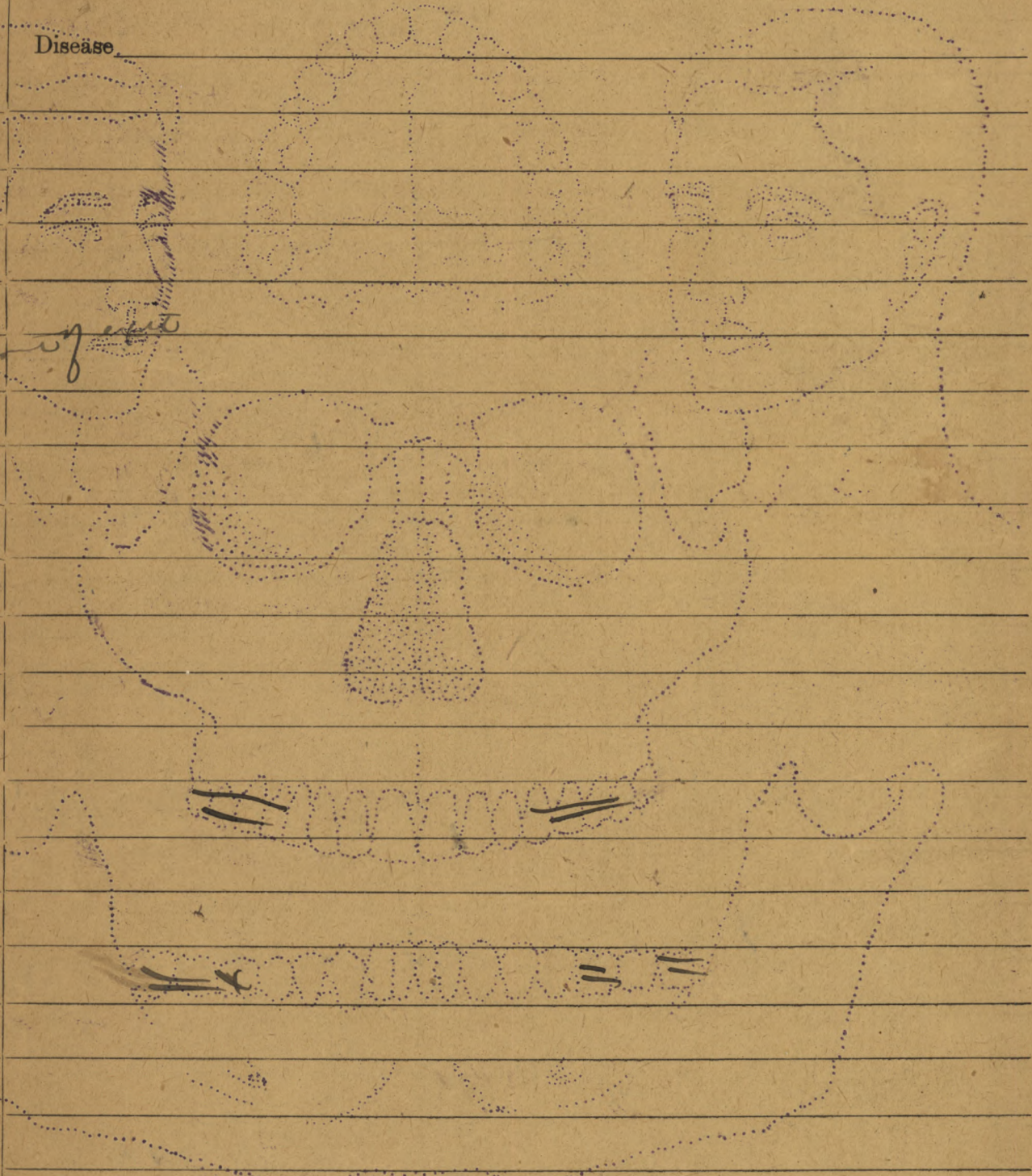
MEDICAL CASE SHEET.*

Original

No. in Admission and Discharge Book. 273206	Regimental No. 72462	Rank. Pvt	Surname. Mills.	Christian Name. J.W.
Year 1917	Unit. 38 th Cann	Unit. Bgn 12 Div 4.	Age. 32	Service. 2 1/2

Station and Date
O.M.H.
20-9-17

Disease



Wounded Apr 9/17. Vimy Ridge - shrapnel & Bullet -
to dressing station - to 13th Plat. (Boulogne) - removed shrapnel from
leg. etc - (1 week) - to Hosp. Mil. Alfred St - Manchester - 20/4/17
(1 week) - to 6 Blakeney Inst. Manchester - (7 weeks) - then to
Ducie Avenue Hosp. Manchester - (3 weeks) then to Ditchingham Collyer Hosp.
Manchester (7 weeks) - to Osparm Woodcote Pk (3 weeks) O.M.H. 20/9/17

*The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.
(44502) Wt. W 11203-M 1150. 1,450,000. 6/12 16. C.F. & S. Forms/I. 1237/12. (E239) P.T.O.

Station
and Date.

Exam - Ent. - Ear wants healed. Firm swell, R²
side of neck involving Sternomastoid Muscle, (anterior
belly) tender and cephalic
Opening Mouth normally - lateral movement good - no
evidence fracture
Pharynx - neg.
Nose - Div. space - swollen Turbinates
Ear - Drum intact, cerumen.

Sept 23^d - Less pain on palpation over
swell in neck right - feel
like a fibrous band running from
angle of jaw to middle of scapula
same line as external jugular vein
It may be a rupture of sternomastoid
into Platysma muscle or thrombosis jugular vein
Point of exit in Plat^{muscle} triangle just to
Sternomastoid muscle
No other injuries now had slight
abrasion wound in region left knee

Sept 27 slight swell in lower portion of
fibrous band still present - slightly tender

Sept 29 Col Mallock makes case transferred
to surgery General Service.

To ward #9 - Dragn Fisher

by Reab
cancel

Oct 5/1917

Operation - Ether - Col Mallock

hair bare the mass by 3" incision over
anterior border of Sternomastoid. Found
the sheath of Sternomastoid torn and
on opening the mass which was in the
ant border of sheath found spicula of

MEDICAL OFFICER

MEDICAL CASE SHEET.*

WARD A 66

J. J. Benthall

No. in Admission and Discharge Book. *16495*
Year *1917*

Regimental No. *724625* Rank *Pte.* Surname *Mills* Christian Name *J. W.*

Unit *38th Can. Inf. 4th Div. A boy* Age *32* Service *17/12 5/12*

Station and Date.

Disease *R. b. w. neck + jaw, sh. wd. lt. leg*

AUX. MILITARY HOME HOSPITAL
THE INSTITUTE, BLACKLEY.

DATE OF ONSET
INJURY OR DISEASE

*Bullet wound (perforating)
R. side neck + throat
from front P.R. to jaw*

*Granulating superficial wounds outer side
left leg sh. wd.*

May 21st *wounds almost healed.*

2nd WESTERN GENERAL HOSPITAL,
DUCIE AVENUE, MANCHESTER.

4-6-17. Admitted Ducie Avenue.

17-6-17 1. Ext. also No 3 Ext.

30-6-17 Transfer Dids. Coll. Report Ducie on July 11th

2nd WESTERN GENERAL HOSPITAL,
DUCIE AVENUE, MANCHESTER.

9-7-17 Transferred from Ducie due to Dids College.

Brother

Next of Kin.

*Antler
Lask
Canada*

FOR TRANSFER CLASS.

IMMUNIZATION AGAINST TETANUS

TV	TV	TV
-	2	4

DATE - *last Dec 1916*

GROSS OUT THAT WHICH DOES NOT APPLY

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

24 JUL 1917

No. 18526

Manchester Royal Eye Hospital

Oxford Road, Corner of Nelson Street.

OPEN FOR THE RECEPTION OF PATIENTS EVERY MORNING, EXCEPT SUNDAY,
BETWEEN NINE AND HALF-PAST TEN O'CLOCK.

Under the care of

DR. HILL GRIFFITH,

On TUESDAY and FRIDAY MORNINGS.

DATE 1917	NAME	AGE
July 24	Mr. J. W. Mills	33
ADDRESS	OCCUPATION	
Alfred St. Redbourn		
DISEASE		
Myopia		

Myopia

Diop. undilated

R + 3 dpt = +1.25 Cuv = $\frac{6}{60} J 20$.

R. $\frac{6}{60}$ not imp.



L. $\frac{6}{9} C + 0.50 dpt = \frac{6}{60} J 1$,



TAKE CARE OF THIS PAPER. *Bring it with you if you need to come again AT ANY FUTURE TIME.*

YOU ARE REQUESTED TO CONTRIBUTE EACH VISIT.

THE UNIVERSITY OF CHICAGO

DEPARTMENT OF CHEMISTRY

LABORATORY OF ORGANIC CHEMISTRY

CHICAGO, ILLINOIS

DR. HILL GRIFFITH

DR. WENDELL M. PATTERSON

DR. J. H. HARRIS

DR. R. M. WOOD

DR. J. W. COOPER

DR. J. H. HARRIS

DR. R. M. WOOD

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DR. J. H. HARRIS

DR. R. M. WOOD

DR. J. W. COOPER

DR. J. H. HARRIS

DR. R. M. WOOD

DR. J. W. COOPER

TAKE CARE OF THIS PAPER

IT IS YOURS TO KEEP

YOU ARE REQUESTED TO CONTRIBUTE

TO THE MAINTENANCE OF THIS

PROCEEDINGS OF A MEDICAL BOARD.

Dated at February 2nd, 1918, Eastbourne, 1917.

No. 724625 Rank Pte. Name Mills J.W.

Local Unit 7 Can. Res. Overseas Unit 38th Batta. Age 32

Examination held at 14th Canadian General Hospital,
G.S.W. Neck Apr. 8/17 at Vimy Ridge.

DISABILITY: ~~Overseas~~ ~~Local~~ Under treatment about 6 1/2 months.
(scratch one out).

Overseas
(Re Admitted)

PRESENT CONDITION.

Subjective Symptoms. Stiffness rt. side of neck on rotating head to left.
Says he cannot carry anything on shoulder.
Jaw gets painful on eating solid food.

Objective Findings. X-ray - F.B.s neck and region of lower jaw. Loss substance lower jaw rt.
Scar of entrance rt. lower jaw. Scar of exit about 2" below mastoid process. Operation scar about 5" long extending from angle of jaw downwards.
Adhesions of scar to cervical fasciae.
All other systems normal.

No. 14 CANA
GENERAL HOSPITAL
2 - FEB. 1918

BOARD RECOMMENDS:- B.2.

1. Fit for Duty.....
2. Fit for duty after.....weeks' physical training.
3. Fit for Temporary Base Dutyweeks.
4. Fit for Permanent Base Duty.....
5. Discharge

Signatures:-

Members

E.C. Beer Capt President
J.O. Baker Capt.
J.H. Sauley Capt

APPROVED

Dated Eastbourne, Feb. 2nd, 1918 1917.

James A. Syde Maj.
For A.D.M.S.

CANADIAN CONTINGENT EXPEDITIONARY FORCE

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. **724625** Rank **Private** Name **Mills, J.W.**

Corps **12th Battalion, C.G.R.** who was * **Discharged**

On **August 26th** 1918, to

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from **August 1st** 1918 to **August 26th** 1918, the inclusive date of transfer or discharge.

Dr.	\$	c	Cr.	\$	c
Bal. Dr. from prev. month			Bal. Cr. from prev. month	4	10
Advances } No. 10	4	10	Reg'l. Pay..... 26 days at \$ 1 c	26	00
by } Cheques } No.	5	00	Field Allow..... 26 days at \$ 10	2	60
Assigned Pay No. A.P. Aug. chgd.	20	00	Other Allowances* Civ. Clo. Allow	35	00
Other Charges* Overpaid S.A.	3	00	Other Credits*		
Payment on transfer or discharge No. 194	35	98	Bal. Dr. (to be deducted by new unit)	60	30
Balance Cr. (to be paid by the new unit)					
Total	128	00	Total	128	00

*Give Particulars **1st Payment of P.D.P.**

A monthly stoppage of \$ **20.00** (†) has (x) been ~~paid~~ on account of Assigned Pay for the month of **August** 1918 to (Assignee) **Mrs. J. Mills,** (Address) **75 Montgomery Terrace, Sheffield, England.**

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

On Transfer of an Officer

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

REMARKS :—

- State (1) date of enlistment
- (2) if married and if a Separation Allowance Card has been submitted **Yes S.A. & A.P. paid by England.**
- (3) cause of discharge and authority **D/O 123**

If discharged from the Contingent, state if Stop Payment advice for Assigned Pay has been forwarded and date

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

Date **August 31st, 1918**

Place **Regina, Sask.**

J. Campbell Capt. Paymaster, 12th Batta, Canadian Garrison

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

AMERICAN CONTINGENT EXPEDITIONARY FORCE

EAST PAY CERTIFICATE

This is a certificate of the amount of pay and allowances due to the undersigned for the month of _____ 1918.

Name: _____
 Grade: _____
 Branch: _____
 The following is a statement of the amount of the above named from _____ to _____ 1918; the amount of the balance on discharge is _____.

Item	Amount	Item	Amount
Bal. D. from prev. month	10.00	Bal. D. from prev. month	10.00
Regt. Pay	3.00	Regt. Pay	3.00
Field Allow.	2.00	Field Allow.	2.00
Other Allowance	25.00	Other Allowance	25.00
Other Credits		Other Credits	
Bal. D. (to be deducted by new unit)	10.00	Bal. D. (to be deducted by new unit)	10.00
Total	50.00	Total	50.00

A monthly allowance of \$ _____ has _____
 Pay for the month of _____ 1918 to _____
 (Address) _____
 (X) Insert amount to be assigned, whether it has been paid or not.
 (Y) Insert "not" if amount has not been paid for period of account.

On Transfer of an Officer

Quota allowance of \$ _____ has been paid by Paymaster, Military District No. _____

REMARKS

(1) State (if) date of enlistment
 (2) If married and if a Separation Allowance Card has been submitted
 (3) Cause of discharge and authority
 If discharged from the Contingent, state if Stop Payment advice for Assigned Pay has been forwarded and date
 I have carefully examined the statement of account and find it to be a correct extract from the Pay list of the unit.

Date _____
 Place _____

CASE HISTORY SHEET.

St Chad's Hospital. Regina Station.
No. 724625 Rank Pte Name J. Mills Age 33
Unit 12 D.D. Completed years of service 7/12 C 2 1/2 to 7/27 }
Date of admission 13-6-18 Date of discharge 23-7-18 }
Diagnosis wound of neck Place of origin France

CONDITION ON ADMISSION AND PROGRESS OF CASE

Large scar about 4" long right
side of neck unable to do complete
movements

FAMILY HISTORY

Nil
(Tuberculosis, mental or nervous diseases.)

TREATMENT

None
(Especially any specific or special form.)

CONDITION ON DISCHARGE

neck
(and disposal made of case.) Movements limited to about 75%

Date.....

Reddick
Medical Officer i/c case.

Number of Pages: _____
Date of Issue: _____
Name of Author: _____
Name of Editor: _____
Name of Publisher: _____

11020

11020

28. m. 449

Form D.M.S. 1394
23-20M-1-22/17

PROCEEDINGS OF A MEDICAL BOARD.

Dated at February 2nd, 1918, Eastbourne. 1917.

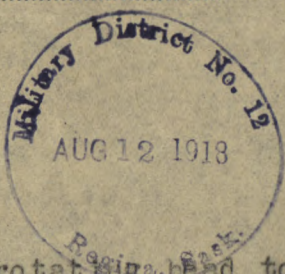
No. 724695 Rank Pte. Name Mills J.W.

Local Unit 7 Can. Res. Overseas Unit 38th Batta. Age 32

Examination held at 14th Canadian General Hospital,
G.S.W. Neck Apr. 8/17 at Vimy Ridge.

DISABILITY: Overseas Local (scratch one out).
Under treatment about 6 1/2 months.

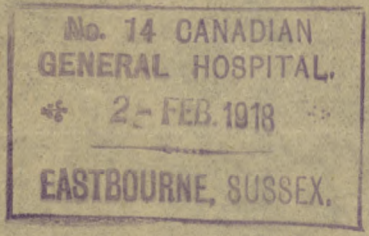
Overseas
(Re Admitted)



PRESENT CONDITION.

Subjective Symptoms. Stiffness rt. side of neck on rotation, head to left.
Says he cannot carry anything on shoulder.
Jaw gets painful on eating solid food.

Objective Findings. X-ray - F.B.s neck and region of lower jaw. Loss substance lower jaw rt.
Scar of entrance rt. lower jaw. Scar of exit about 2" below mastoid process. Operation scar about 5" long extending from angle of jaw downwards.
Adhesions of scar to cervical fasciae.
All other systems normal.



BOARD RECOMMENDS:-
B.2.

1. Fit for Duty.....
2. Fit for duty after.....weeks' physical training.
3. Fit for Temporary Base Dutyweeks.
4. Fit for Permanent Base Duty.....
5. Discharge

Signatures:-

Members { J.C. Beer Capt President
..... Capt Capt.
..... Capt

APPROVED

Dated Eastbourne, Feb. 2nd, 1918 1917. James C. Beer
For A.D.M.S.

PROCEEDINGS OF A MEDICAL BOARD

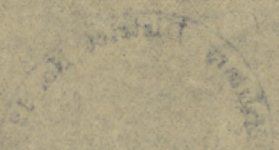
Dated at 1917

No. Rank Name

Local Unit Overseas Unit Age

Examination held at

DISABILITY.
Overseas List
Form 1000 (1917)



PRESIDENT'S CONDITION

BOARD RECOMMENDS:-

- 1. Fit for Duty
- 2. Fit for duty after weeks' physical training
- 3. Fit for Temporary Base Duty week
- 4. Fit for Permanent Base Duty
- 5. Discharge

Signatures:-

..... President

..... Members

APPROVED

Dated 1917

For A.D.M.S.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at SEAFORD JAN 10 1918

No. 724625 Rank PTE Name MILLS JW

Local Unit 7th RES BATT Overseas Unit 38 BATT N Age 32

Examination held at SEAFORD SUSSEX 7th RES BATT

DISABILITY. G.S.W. Neck RT Side. Overseas Local (scratch one out)

PRESENT CONDITION.

In France 5 1/2 wounded in neck Apr 1917 & returned to England. Wounded head but he complains of old wound hurting him in moving his head.

There is a hard smooth mass over the anterior border of sternus marked two inches below angle of jaw (rt side). Postcard wound cutting him to his 13 can be seen through for treatment.

BOARD RECOMMENDS:-

- 1. Fit for Duty. 2. Fit for duty after... weeks' physical training. 3. Fit for Temporary Base Duty... weeks. 4. Fit for Permanent Base Duty. 5. Discharge.

Signatures:-

Members { Surgeon Capt President. Gullies Capt

APPROVED 11 JAN 1918

Seaford, Sussex.

Dated at 1916.

T. J. Graham Captain C.A.M.C. For A.D.M.S., Canadians, For A.D.M.S.

PROCEEDINGS OF A MEDICAL BOARD.

..... Dated at..... 1916.

..... Rank..... Name.....

..... Local Unit..... Overseas Unit..... Age.....

..... Examination held at.....

DISABILITY.
 Overseas—Local,
 (attach one out)

PRESENT CONDITION.

BOARD RECOMMENDS:—

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

Signatures:—

..... President.

Members

APPROVED

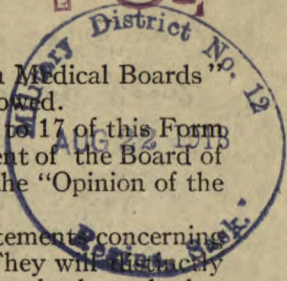
..... Dated at..... 1916.

21-8-18

28. m 449

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 soldier 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 soldier'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 soldier concerned, from witnesses, or from documents.
- Special care is required in answering question 13. Please read the questions carefully. All questions must be answered.
- If space provided under any sections is insufficient use blank space, page 4 or add another sheet. Such entries or 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 8, 9 and 10 be communicated to the soldier, 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.

1. 1 (a) Unit *12 Garrison Batt* STATION *Regina Sask* DATE *August 19th 1918*
 (b) Regimental No. *724625* (c) Rank *Pte*
 (d) Surname *Mills* (e) Christian name *John Walker*
 2. Age last birthday *33 years* Date of birth *May 27th 1885*
 3. Enlisted at *Lindsay Ont* on *Nov 30th 1915*

4. Personal description:—
 (a) Height *5-5 1/2* (b) Weight *130* (c) Complexion *Fair*
 (d) Colour of hair *D Brown* (e) Colour of eyes *Blue* (f) Identification marks *Scars*
G.S.W. on left leg & on Right side of neck & Jaws on L. arm

5. Address after discharge (for the use of the Board of Pension Commissioners) *Anttel Sask*
 6. Former trade or occupation *Farm Labour*

7. (a) Service	PERIODS	
	From	To
	<i>1915</i>	<i>1918</i>
	<i>Nov 30</i>	<i>Aug 20</i>

(b) Has he been overseas? *Yes* 8. Original disease or disability *Pain & stiffness*
Rt side jaw and neck
 (a) Date of origin *Apr 9th 1917* (b) Place of origin *Poring Ridge - France*
 (c) Cause* *G.S.W. Rt side neck*
 (d) Present disease or disability *Pain & stiffness Rt side Jaw & neck*

9. Present condition (a) (Important to be a full description of the present disabling condition or conditions only.) "History" must be recorded in Section 10.
 [After describing all abnormalities, anatomical and functional, contributing to present disability (see section 11) state whether such disability is directly due to (a) weakness, (b) loss (complete or partial) of any organ or member of its functions, or (c) to the necessity for rest of the body or of some of its parts.]
about Pain, stiffness, and weakness Rt side of jaw & neck. Has difficulty in masticating food. Has long scar on Rt side of neck & on Rt Lower jaw. Vision in Rt. Eye 6/40. Left eye normal excepting at night

9. Present condition.—(Continued.)

Has scar on left leg below knee externally from shrapnel but is no disability at present. Other systems are normal.

X Ray - 7. B's neck & region of lower jaw. Loss substance lower jaw Rt. Adhesions of scar to cervical fasciae.

(b) Are the following systems normal? If not, briefly state abnormality.

Nervous. *Yes* Digestive. *No* Respiratory. *Yes* Cardiac. *Yes*
Genito-Urinary. *Yes* Skin, Middle Ear, (Eye) or any other part. *Yes*

Digestive - Interference with mastication
Eye - $\frac{6}{40}$ in Rt Eye

10. History: (a) of Condition referred to in "a" section 9.

On apr of the G.S.M. Rt side Neck & Jaw also in Left leg. In Hosp in France 2 mos. Hosp in Eng for 9 mos during which time two operations on jaw & neck performed. Sent to Canada May 1918

(b) Here give a description of wounds, scars, deformities, and signs and symptoms of abnormal conditions present and not included in answer 8. This section cannot be completed without stripping the soldier and subjecting him to a thorough physical examination.

Was at St Chads Hosp Regina to present

11. If the disabling condition had its origin before enlistment, has it been aggravated on service?

Na.

12. Was the disability caused or aggravated by negligence, by vice or by misconduct, or by unreasonable refusal to accept treatment?

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?

Indefinite. No improvement in last 6 mos.

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

*Hosp & Convalescent Hosp, massage
Heat & passive movements.*

OPINION OF THE MEDICAL BOARD

14. (Continued).

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

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

17. Recommendations
E category for discharge

Dr Henry Cuff
Medical Officer by whom the case is brought forward.

STATEMENT OF THE SOLDIER.

(Sections 8, 9 and 10 are to be read to the soldier and either "satisfied" or "not satisfied" struck out.)

I, the undersigned..... 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.....

J. M. Mills
Signature of soldier examinee.

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 criticized.

*Specialist report on eye attached
Rt. Absence of fixation. outer edge of field moderate vision
L. 20. Max claim. Condition pre-
existed enlistment but aggravated by service.
Says our jaw. quite tender. Cannot rotate head to left
beyond median line.*

English Medical Board 11/11/20

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

20. It is certified that the soldier
(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).

OPINION OF THE MEDICAL BOARD—(Continued).

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

yes

Before signing the President of the Medical Board will read the certificate signed by the soldier, to the soldier, and if no change is indicated will initial the certificate.

PLACE... Regina.
DATE... 26-8-18

[Signature] President.
[Signature] } Members.

APPROVED BY *[Signature]*
Assistant Director of Medical Services.
DATE... 22.8.18

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

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 soldier 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.....
..... President.
..... } Members.

Mrs. J. Mills
wife
 402 Glossop Rd.
 Sheffield, Yorkshs.
Bank Account

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

To Whom *Mgr. Bank of Montreal*
 Address *Lindsay*
Ont.

By Whom Assigned *Mills, J. W.*
 Regtl. No. *724625*
 Rank *Plt.*
 Corps *109th Batten*

Rate ~~*15.00*~~ **AUG 1 1916**

\$20.00 Nov 1/17

PAYMENTS

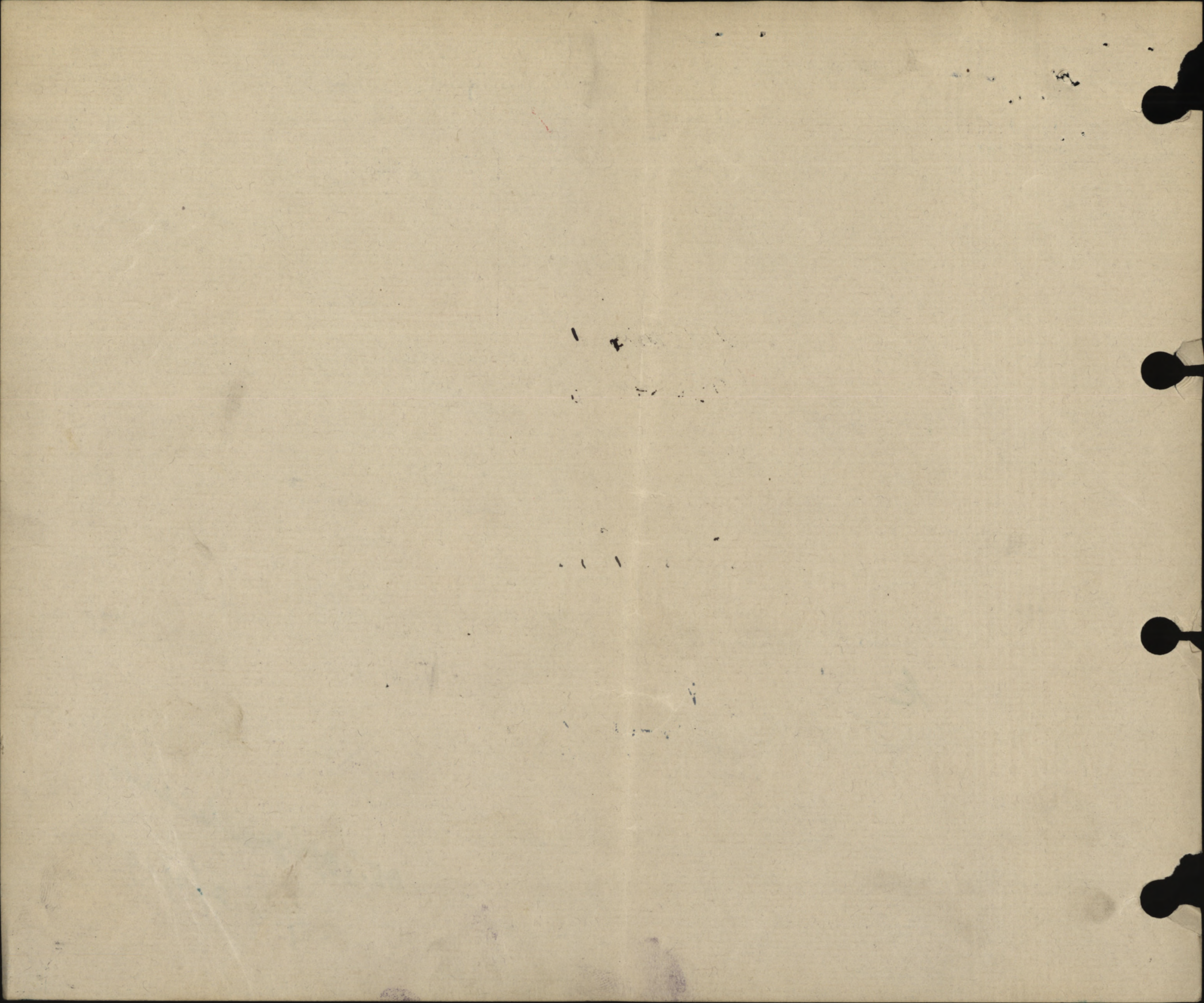
Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			<i>0 I m 30710717 5ab 6/11/17</i>
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				



Duplicate sheets sent to England

ENGLISH

NOV 13 1915
CANADIAN ASSIGNED PAY AUDIT
OK. J. W. Mills
 AUDIT CLERK
 DATE *2/6/19*



Wife
Jas. J. Mills

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2. *Mgr. Bank of Montreal, Canada*

Name of Soldier *Mills J. W.*

L. L. Job 310.-Req. 6574

PAYMENTS.

724625 *Pte 109th Battrn*

15.00 *8.00* *20-nov-17* *AUG 1 1916*

Month.	Year.	Cheque No.	Amt.
April	1916		
May			
June			
July			
Aug.		<i>7 15924</i>	<i>15</i>
Sept.		<i>19587</i>	<i>15</i>
Oct.		<i>Op 24396</i>	<i>15</i>
Nov.		<i>0 27390</i>	<i>15</i>
Dec.		<i>R 30374</i>	<i>15</i>
Jan.	1917	<i>2 40988</i>	<i>15</i>
Feb.		<i>2 46081</i>	<i>15</i>
March		<i>E 51724</i>	<i>15</i>
April		<i>Z 53571</i>	<i>15</i>
May		<i>2 10120</i>	<i>15</i>
June		<i>4 16423</i>	<i>15</i>
July		<i>L 26036</i>	<i>15</i>
Aug.		<i>N 30961</i>	<i>15</i>
Sept.		<i>N 32720</i>	<i>15</i>
Oct.		<i>C 44408</i>	<i>15</i>
Nov.		<i>N 50986</i>	<i>15</i>
Dec.			
Jan.	1918		
Feb.			
March			
April			
May			
June			
July			

15-0
15.8
15-Bu
S
Dr
L.

Duplicate sheets sent to England
N50986 cancelled

CANADIAN
ASSIGNED PAY AUDIT
OK. J.W. Hillars
AUDIT CLERK
DATE *2/6/19*

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.	1919			
Jan.				
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.	1920			
Jan.				
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				

B. wife Duplicate
MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

To Whom *Mrs. J. Mills.*
Address *402 Glossop Road*
Sheffield, Yorkshire
England

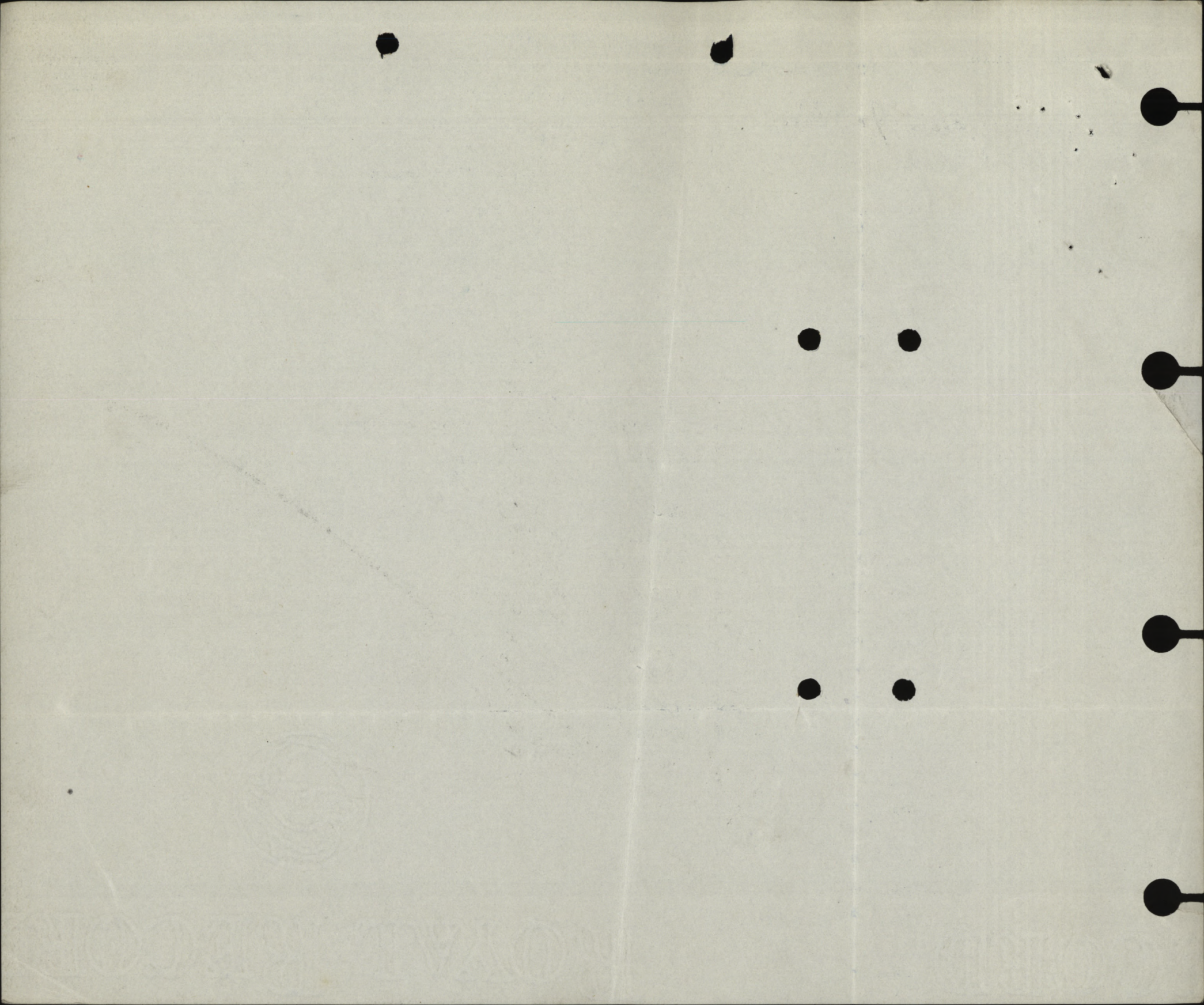
By Whom Assigned *Mills, J. W.*
Regtl. No. *724625*
Rank *Pte*
Corps *109th Bn.*
38th Bn. (Present unit)

Rate *\$20.00 nov/17*
\$15.00 aug/18

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				

Paid *S.A. granted from 12/8/17*



SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2.

Mrs. J. Mills

Name of Soldier

Mills, J. W.

PAYMENTS.

Pte # 724623-109 1st Bn

L. L. Job 4503. - Req. 6832.

Month.	Year.	Cheque No.	Amt.	Remarks.
			<i>\$20.00</i>	<i>Nov/17</i>
April	1915			
May				
June				
July				
Aug.		<i>F 18924</i>	<i>15 ✓</i>	<i>Paid in Canada to Mgr. Bank of Montreal. Lindsay. out.</i>
Sept.		<i>J 19587</i>	<i>15 ✓</i>	
Oct.		<i>P 24396</i>	<i>15 ✓</i>	
Nov.		<i>O 27390</i>	<i>15 ✓</i>	
Dec.		<i>R 30374</i>	<i>15 ✓</i>	
Jan.	1917	<i>L 40998</i>	<i>15 ✓</i>	
Feb.		<i>L 46081</i>	<i>15 ✓</i>	
March		<i>E 51724</i>	<i>15 ✓</i>	
April		<i>Z 3351</i>	<i>15 ✓</i>	
May		<i>Z 10121</i>	<i>15 ✓</i>	
June		<i>Y 16423</i>	<i>15 ✓</i>	
July		<i>Z 26036</i>	<i>15 ✓</i>	
Aug.		<i>N 30961</i>	<i>15 ✓</i>	
Sept.		<i>N 37720</i>	<i>15 ✓</i>	
Oct.		<i>C 44408</i>	<i>15 ✓</i>	
Nov.				<i>found correct.</i>
Dec.				<i>a/p. checked 17/12/17 Little pay Sgt EORD.</i>
Jan.	1918			<i>\$225.00</i>
Feb.				
March				
April				
May				
June				
July				

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier _____

PAYMENTS.

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

Record

Canadian Pay Office.
Received by Pay II.
DEC 17 1917
and Passed for Action to
Date

Sub-Div.	Accts.
A. ✓	Bank
B. ✓	Discl.
C.	Invest
D.	Obs.
E.	P. Bks
F.	P.H.S.S.
G.	Sep/C
H.	
I.	
J.	
K.	
L.	
M.	
N.	
P.	

ASSIGNED PAY.

List 508 "B"

PAID IN CANADA.

To whom *M^{rs} J. Mills*
 Address *75 Montgomery Terrace Rd.*
402 Clarendon Road
Sheffield. Yorks

By whom assigned *Mills J. W.*
 Regtl. No. *724625*
 Rank *Pte.*

ASSIGNED PAY
 SEPARATION ALLOWANCE

Rate *\$20⁰⁰* *\$25⁰⁰*

Date to Commence *1 April 1918*
May

Corps, &c. *109 Btn. E.O.R. B.*
 ASSIGNED PAY AND SEPARATION ALLOWANCE
 BEING PAID IN ENGLAND UNTIL ADVICE
 FROM OTTAWA OF DISCHARGE OF SOLDIER
 NAMED HEREIN. *Noted on L.P.C.*

Month.	Cheque No.	ASSIGNED PAY Amt.	SEPARATION ALLOWANCE Amt. Debited.	REMARKS.
1914.				
Oct.				
Nov.				
Dec.				
1915				
Jan.				
Feb.				
March				
April				
May	<i>A 40194</i>	<i>20</i>	<i>25</i>	
June	<i>B 17679</i>	<i>20</i>	<i>25</i>	
July	<i>B 69976</i>	<i>20</i>	<i>25</i>	
Aug.	<i>C 19655</i>	<i>20</i>	<i>25</i>	
Sept.				<i>Stop discharged 26.8.18</i>
Oct.				<i>Auth Ottawa cable 5766</i>
Nov.				<i>Separate</i>
Dec.				
1916.				
Jan.				
Feb.				
March				

DISCHARGED TO CANADA.

R.O. 3451 5/3/18 28/4/18
Sailed 13-5-18 no 11

ASSIGNED PAY.

Month	Cheque No.	ASSIGNED PAY Amt.	REPARATION ALLOWANCE Amt. Debited.	REMARKS.
1916.				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
1917.				
Jan.				
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
1918.				
Jan.				
Feb.				
March				
April				
May				
June				

List 361 B

ASSIGNED PAY.

PAID IN CANADA.

To whom

Mrs Mills J.

By whom assigned

Mills J.W.

Address

~~402 Glassop Rd~~
75 Montgomery Terrace Road
Sheffield

Regtl. No.

724625.

Rank

Plt

Corps, &c.

109th Bn

Rate

ASSIGNED PAY 20⁰⁰ SEPARATION ALLOWANCE 25⁰⁰

Date to Commence

1. 3. 18

ASSIGNED PAY AND SEPARATION ALLOWANCE
BEING PAID IN ENGLAND UNTIL ADVICE
FROM OTTAWA OF DISCHARGE OF SOLDIER
NAMED HEREIN.
Noted on L.P.C.

Month.	Cheque No.	ASSIGNED PAY Amt.	SEPARATION ALLOWANCE Amt. Debited	REMARKS.
1914 Oct.				Discharge to Canada 9.3.18 L.R.O. 3451.
Nov.				
Dec. 1915 Jan.				
Feb.				
March	C 83692	20	25	Inch. Supp. L.P.C. cancelled Debit note to "B" 25/4/18
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec. 1916 Jan.				
Feb.				
March				

749 0101224
ASSIGNED PAY.

Month.	Cheque No.	ASSIGNED PAY Amt.	SEPARATION ALLOWANCE Amt. Debited.	REMARKS.
1916.				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
1917.				
Jan.				
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
1918.				
Jan.				
Feb.				
March				
April				
May				
June				

P. 559
MARRIED OR SINGLE

PLACE OF BIRTH

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY \$

PAYABLE TO

RELATIONSHIP OF DEPENDANT

Single
Sheffield Eng.
Geo. Mills
Antler Sask. Can.
Brother

5
20.00
EFFECTIVE (DATE) 12/8/17.

ms. J. Mills
same as assignee
wife

a.P. checked found correct 3/18/18

CASUALTIES, PROMOTIONS, &c.

Table with columns: PARTICULARS, EFFECTIVE DATE, AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

Table with columns: DATE ADMITTED, DATE DISCHARGED, V. OR A., NAME OF HOSPITAL

REG'L. No 724625 RANK Pte

IF IN PERM. CORPS
WHAT UNIT

PERMANENT FORCE ALLOWANCES

PLACE OF ATTESTATION

DATE OF ATTESTATION

ASSIGNED PAY MONTHLY \$

PAYABLE TO

ASSIGNED PAY MONTHLY \$

PAYABLE TO

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE)

DISCHARGE DATE AND PLACE

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

NAME Mills John Walter
UNIT 109th Bn
TRANSFERRED TO 38 Bn
DATE 16-1-17
AUTHORITY 50339
4-12-16
L.P.B. 1917

TRANSFERRED TO Pay II S. B.O.R.D. DATE 21/6/17 AUTHORITY
TRANSFERRED TO Pay 2 B. R. C. DATE 6/3/18 AUTHORITY

TRANSFERRED TO DATE AUTHORITY

DATE EFFECTIVE Nov. 1 1917
DATE EFFECTIVE 1910
PAYABLE TO Mgr Bank of Montreal
RELATIONSHIP Wife

DATE EFFECTIVE Lindsay Ont
RELATIONSHIP SEP 30 1918

RENDERED (DATE) Stopped EFFECTIVE 1. 2. 18. REASON Discharged
DISCHARGE DATE AND PLACE 9. 2. 18. Can. REASON AND AUTHORITY L.P.B. 3451
Cancelled
Buxton B.S. 89 16/4/18
Disposal Act.

Main ledger table with columns: DATE, PAY, FIELD ALLOWANCE, WORKING OR SPECIAL PAY, ASSIGNED PAY CREDITS, OTHER CREDITS, TOTAL CREDITS, ACQUITTANCE ROLLS (1-4), CASH PAYMENTS (1-4), BALANCE (CREDIT/DEBIT), PAY WITHHELD OR DEFERRED, PAY AVAILABLE FOR ISSUE, REMARKS

CANADIAN
ASSIGNED PAY AUDITED
5-31/10/17
C. M. M. R. D.
AUDIT CLERK
DATE 7/6/19

724625 Pli Mills J. W.

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. OF DAYS	RATE	AMOUNT	1	2	3	4	1				2	3			
June 2/30	10		356 40					17 10	373 50					51 63	19 84	13 08	53 54	165	7 70	310 79	62 71				
July 1/31	31		11						11												73 71				
Aug 31	31		34 10						34 10									68 13	15	83 13	24 68				
Sept 30	30		34 10						34 10									15		15	43 78				
			38						33									15		15	61 78				
			465 60					17 10	485 70					51 63	19 84	13 08	121 69	210	7 70	423 92					

MONTH	PARTICULARS	CR.1	CR.2	PARTICULARS	DR.1	DR.2	DR.3	DR.4	BALANCE	DEFER. PAY	SEP. ALLG. ENG.
			61 78						61 78		
Oct 31	110	34 10		Sent in Oct in error nov. not sent to adj B9677			20		75 88		
Nov	P.P.	33		CPM 5834 14/11/17	24 33						
	S.F. 13.11.17 - 23.11.17. BR. 286 1/2	7 30		Comm. 1/2 for October not paid. chgd.			15				
Dec	31 P.P.	34 10		B1225 & 14-19-7 (12/9/17-20/11/17)					72 90		
				C-7820 1/9/11 (Dec)			20		25		
				23253 AR 2516 3/9/17 Eps.	4 87						
				AR 824-7 th Rcs. 29.11.17.	9 73						
1918		74 40		D.N. 63977. AR. 790. O.T.M.H. 2-9-17	4 86						
				C50417 1/9-11	43 79		20 15	71 49	97 90		
Jan 31	P.P.	34 10		AR 856. 7 Rcs. Bn. 6/12/17	9 93				25		
				AR 891 O.M. Hoops 13/11/17	24 33						
				SR AR 863 14/11/17 7 920	9 73						
				" 844 24/1/17 O.M. Hoops	4 87				36 93	25	
Feb 31	P.P.	34 10		S3822 1/9-11	48 66		20		25		
		3080		AR 3306 14/1/18 14 Rcs	2 43						
				AR 3602 29/1/18 "	2 43		20		42 87	25	
		3080			4 86						
Mar 31	P.P.	990							53 77		
				AR 542 13/2/18 6 Rcs	9 73						
				v 566 21/2/18 v	4 87						
				v 602 7/3/18 v	4 87						
		990			19 47			33 30			

Carried forward to Lorne Ledger sheet

ASM. FORM REND. E.F.F. DISCHARGED TO Canada 9/1/18 PAYROLL VERIFIED [Signature] C. [Signature] L.P.C. REND. 9/1/18 ATTORNEY GENERAL

ASSIGNED PAY AND SEPARATION ALLOWANCE BEING PAID IN ENGLAND UNTIL ADVICE FROM OTTAWA OF DISCHARGE OF SOLDIER NAMED HEREIN

* Strike out, whichever inapplicable.

ASSIGNED PAY.	ENGLAND or CANADA.	SEPARATION ALLOWANCE.	ENGLAND or CANADA.	NAME: MILLS John Walker			
EFFECTIVE DATE: 1/11/17		EFFECTIVE DATE: 1/12/17		NUMBER: 724625			
AMOUNT: 20.00		AMOUNT: 25.00		PARTICULARS OF RANK OR APPOINTMENT			
NAME, ADDRESS, RELATIONSHIP & AUTHORITY				AUTHORITY			
Mrs J Mills (Wife) 75 Montgomery Terrace Sheffield Stopped off 1/5/18 <i>RM</i>				DATE EFFECTIVE			
Same				RANK OR APPOINTMENT			
				Pte			
				UNIT AND TRANSFERS			
				SEP 30 1918			
				ORIGINAL UNIT: 109 Bn			
				DATE ACCOUNT FIRST OPENED: 1/8/16			
				AUTHORITY			
				DATE EFFECTIVE			
				DATE CLOSER SHEET T'S P D			
				UNIT TRANSFERRED TO			
				CORD			
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
161	2/4/18	Buxton (29/4/18)	11.60				
DAILY RATES OF PAY AND ALLOWANCES							
AUTHORITY				PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
				1	-	-	10

PARTICULARS OF RENDERING NON-EFFECTIVE: **Disch'd to Canada 1/5/18 R03451 9/3/18 Disposal Feb. 3590**

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
1918	Mar			Brot Forward					33 30		
	Apr			Went P.A. 1/3/18 3/3/18 22 days @ 1.10	24 20						
				P. Pay	33 00						
				Went P.A. C 82692 9-4-11 (supp) charged			20				25 00
				Went P.A. A 0320 9-4-11 Suppl			20		50 50		25 00
				AR 161 2/4/18 Buxton	11 60						
				AR 1345 16/4/18 Buxton	9 73						
				AR 213 25/4/18 <i>CORD</i>	5 61						
				AR 213 26/18 <i>CORD</i>	9 78						
				Forfeit 5 days pay R.W. A.M.L.M.N. 5/4/18							
				6630 P.M. 10/4/18 D.O. 85 11/4/18 G.D.D. Pay	34 62	5 50	5 50	40	10 38		50 -
	June			Spl DN	10 38						
					10 38						

ASSIGNED PAY AND SEPARATION ALLOWANCE BEING PAID IN ENGLAND UNTIL ADVICE FROM OTTAWA OF DISCHARGE OF SOLDIER NAMED HEREIN

CANADIAN ASSIGNED PAY ADDED
 DATE 2/6/18
 AUDIT CLERK

CLINICAL CHART.

(To be attached to Case Sheet.)

Army Form B. 181.

Corps 7th Can Res.

Military Hospital _____

No. 724625

Rank and Name Pte Mills J H

Age 32

Service 26/12

Disease S.H. Peck

Date of admission 13/1/18

Date of discharge _____

Result _____

Dates of Observation	13			14			15			16			17			18			19			20			21			22			23			24		
	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time			
Days of Disease																																				
Temperature Fahrenheit	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.	A.M.	P.M.	A.M.	P.M.		
107°																																				
106°																																				
105°																																				
104°																																				
103°																																				
102°																																				
101°																																				
100°																																				
99°																																				
98°																																				
97°																																				
Pulse per Minute																																				
Respirations per Minute																																				
Motions per 24 hours																																				

146

Signature J. Baker

In charge of case.

MEDICAL OFFICER.

Ed Bretherton

Dr. Rust

MEDICAL CASE SHEET.* *RC.*

WARD *35*

No. in Admission and Discharge Book.

Regimental No.

Rank.

Surname.

Christian Name.

7C 495.

724625

Pte.

Mills

John Walter

Year

Unit.

Age.

Service.

1917.

38 Canadian Inf 4 Div

32.

19 5/12

Station and Date

Disease

*Rifle G. wd neck & jaw
Shrapnel wd left leg*

2nd WESTERN GENERAL HOSPITAL
ALFRED ST., HARPERHEY.
16 4.17

DATE OF ONSET
INJURY OR DISEASE.
9 17

*Jaw not fractured
flesh wds by open Rami's
Bleeding
Steady case*

24.4.17

Blackley Inst.

2nd WESTERN GENERAL HOSPITAL,
DUCIE AVENUE, MANCHESTER.

7-6-17

Admitted Ducie Avenue.



Admitted July 2. 1917

*July 3
- 1917*

Index 3i

To see eye specialist

*Fit for discharge
for reclassification*

*Build 300 lbs.
no. 4c.*

*Brother/
Antler
Lask
Canada*

FOR TRANSFER
CLASS

*3 23 17
at all*

INOCULATION AGAINST		TYPHOID	
TETANUS		TYPHOID	
UNITS	DATES	TV	TV
<i>500</i>	<i>17.4.17</i>	<i>1</i>	<i>2</i>
DATE:		<i>apl 1917</i>	

*August 31st Trans. to Woodcote Park
Epsom*

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

Station
and Date.

July 21st / 14

Convergent Squint R eye
R-eye amblyopic
Refract R +2.00 = +1.00
Does not require glasses.
? Operation after war

Reserved for M.H.C.

Regt. No. 724625 Rank PTE Surname MILLS Christian Name JOHN W.
Unit or Corps—(a) Overseas from United Kingdom 38th BN (b) In United Kingdom E.D.R.D.

Born at—Town SHEFFIELD County or Province YORKSHIRE Country ENGLAND

Date of Birth—Day 27th Month MAY Year 1885 Age 32 yrs 9 months

Joined at LINDSAY ONTARIO Date 30th NOVEMBER 1915

Former Trade or Occupation FARM LABOURER

Permanent marks or peculiarities that will serve for future identification—

Long scar right neck scar lower jaw.
Two scars left knee
Four vacc. marks left arm

Height—feet 5 inches 5 Colour of eyes BLUE

Signature of Soldier (for identification purposes) J. W. Mills

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)

Pain and stiffness rt side jaw and neck.

Disabilities Group (b)

Disabilities Group (c)

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.	G. S. W. rt neck.	France	April 1917
(ii.) As to Group (b) above.			
(iii.) As to Group (c) above.			

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

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

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

If yes, has Active Service aggravated it?

(ii.) As to Group (b) above? —

If yes, has Active Service aggravated it?

(iii.) As to Group (c) above? —

If yes, has Active Service aggravated it?

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? —

(iii.) As to Group (c) above? —

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? *not applicable*

(iv.) Where? *not applicable*

(v.) When? *not applicable*

(vi.) Opinion of the Court? *not applicable*

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).

G.S.W. right side of neck and right jaw April 1917 at Vimy Ridge. Invalided to England 16/4/17. Has been in Hospital 203 days with same condition. Complains of piles but not troubling him at present. Some weakness in left leg following G.S.W.

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

Pain and weakness in the jaw. Unable to masticate food properly. Right eye blind. 40 perception of light only. Heart and Lungs normal. Digestive, respiratory, and excretory systems normal.

8. OPERATION. (i.) Was one performed? *yes*

(ii.) If so, state what. *Two in jaw. one on left leg*

(iii.) Was one advised and declined?

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

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

(ii.) If so, describe. *Six drawn by dentist.*

10. DO YOU RECOMMEND:—

(a) Fit for duty? *no*

(b) Fit for base duty? *yes*

(c) Invalid to Canada? *no Bill not likely to improve in 6 mos*

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

Date of Report... *1/3/18* 191

Station... *Scunthorpe*

Signed... *E. Elliot* Capt
Officer in medical charge of case.

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

T. J. Graham

(Officer i/c Hospital) Strike out one
(S.M.O. Brigade) of these.

Dated at... *Scunthorpe* Station, on... *March 2* 191

* 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)?
If not, indicate it.

No
Defective Vision

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

Yes

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%.)

not aff

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, 1/5, 2/5, 3/5, 4/5, or all.)

not aff

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

(i.) Is it permanent?

not aff

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

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

not aff

18. Remarks.

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

(b) Fit for base duty? Yes Bill not likely to be raised

(c) Invalid to Canada? No

(d) Discharge from service as permanently unfit? No

Classification for the Military Hospitals Commission.

Date of Board 23-18

Station Seaford

Approved 2-MAR-1918

Dated at Seaford, Sussex.

Signatures of the Board.

W. Wallace Capt. President.
J. M. McLean
J. G. Gullies Capt.
T. J. Graham
A.D.M.S.
Station for A.D.M.S. Candidates, 191

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

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

on the _____ day of _____ 191_____

Members of the Board :—

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

- 1. The soldier named in the marginally named is entitled to a pension for service in the Canadian Expeditionary Force on the basis of the evidence submitted.
- 2. The pension to be granted is \$_____ per month.
- 3. The pension to be granted is to be paid from the date of the soldier's discharge from the Canadian Expeditionary Force.
- 4. The pension to be granted is to be paid from the date of the soldier's discharge from the Canadian Expeditionary Force.
- 5. The pension to be granted is to be paid from the date of the soldier's discharge from the Canadian Expeditionary Force.
- 6. The pension to be granted is to be paid from the date of the soldier's discharge from the Canadian Expeditionary Force.
- 7. The pension to be granted is to be paid from the date of the soldier's discharge from the Canadian Expeditionary Force.
- 8. The pension to be granted is to be paid from the date of the soldier's discharge from the Canadian Expeditionary Force.
- 9. The pension to be granted is to be paid from the date of the soldier's discharge from the Canadian Expeditionary Force.
- 10. The pension to be granted is to be paid from the date of the soldier's discharge from the Canadian Expeditionary Force.

Classification for the Medical Department

Dated at _____ this _____ day of _____ 191_____

[Handwritten signatures and notes]

Signatures of the Board

President.

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 soldier 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 soldier'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 soldier concerned, from witnesses, or from documents.
- Special care is required in answering question 13. Please read the questions carefully. All questions must be answered.
- If space provided under any sections is insufficient use blank space, page 4 or add another sheet. Such entries or 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 8, 9 and 10 be communicated to the soldier, 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 Repua DATE 26-6-18
 1. 1 (a) Unit 12 DD (b) Regimental No. 724625 (c) Rank Pte
 (d) Surname Mills (e) Christian name John Walter
 2. Age last birthday 33 Date of birth May 27-1885
 3. Enlisted at Fussay out on Nov 30-1915

4. Personal description:-
 (a) Height 5-5 (b) Weight 130 (c) Complexion Fair
 (d) Colour of hair Brown (e) Colour of eyes Blue (f) Identification marks
Linear scar on rt side of the neck.

5. Address after discharge (for the use of the Board of Pension Commissioners) Autter, Sagk.
 6. Former trade or occupation Farming

7. (a) Service	PERIODS	
	From	To

(b) Has he been overseas? Yes. 8. Original disease or disability Dist of Neck.
Depehne Vision.
 (a) Date of origin Apr 9, 1916, Compental (b) Place of origin France 2. Compental
 (c) Cause T. Aclue Service. 2 Compental
 (d) Present disease or disability T. Giffness of neck 2 Depehne Vision

9. Present condition (a) (Important to be a full description of the present disabling condition or conditions only.) "History" must be recorded in Section 10.

[After describing all abnormalities, anatomical and functional, contributing to present disability (see section 11) state whether such disability is directly due to (a) weakness, (b) loss (complete or partial) of any organ or member of its functions, or (c) to the necessity for rest of the body or of some of its parts.]

Fairly well developed and fairly well nourished man. He has a scar on rt side of the neck. Descending from angle of the jaw for 4 inches. The scar is well

9. Present condition.—(Continued.)

healed but he complains that it hurts his face and has a straining effect when he turns his head to the rt.

There is a marked internal squint in rt eye and the eye is almost nil, the eye can discern light from darkness and can see ~~objects~~ objects ^{close} at hand but cannot discern what they are. The left eye is normal.

The squint in the eye was present on enlistment.
(b) Are the following systems normal? If not, briefly state abnormality.

Nervous... *yes* Digestive... *yes* Respiratory... *yes* Cardiac... *yes*
Genito-Urinary... *yes* Skin, Middle Ear, Eye or any other part... *(No eye)*

10. History: (a) of Condition referred to in "a" section 9.

wounded in rt jaw in France

(b) Here give a description of wounds, scars, deformities, and signs and symptoms of abnormal conditions present and not included in answer 8. This section cannot be completed without stripping the soldier and subjecting him to a thorough physical examination.

Linear scar on rt side of neck well healed. Small soft scar on face over middle of horizontal ramus of chin. Movable. A small scar also on rt side of neck following.

11. If the disabling condition had its origin before enlistment, has it been aggravated on service?

It has 2 yes.

12. Was the disability caused or aggravated by negligence, by vice or by misconduct, or 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. 6 mos. 2 permanent.

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

In hospital for wound nil for eye.

OPINION OF THE MEDICAL BOARD

14. (Continued).

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.)

Yes

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

Yes

17. Recommendations

Category CIII

M. Roberts Cooper
Medical Officer by whom the case is brought forward.

STATEMENT OF THE SOLDIER.

(Sections 8, 9 and 10 are to be read to the soldier and either "satisfied" or "not satisfied" struck out.)

I, the undersigned..... 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.....

J. W. Mills

Signature of soldier examinee.

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 criticized.

Yes

English Medical Board Attached

19. Is the soldier fit for

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

20. It is certified that the soldier

(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).

OPINION OF THE MEDICAL BOARD—(Continued).

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

Placed in Category
C III

Before signing the President of the Medical Board will read the certificate signed by the soldier, to the soldier, and if no change is indicated will initial the certificate.

PLACE.....

DATE.....

[Signature] President.
[Signature] Members.

APPROVED BY

APPROVED BY

[Signature]
Assistant Director of Medical Services.

Director-General of Medical Services.

DATE.....

DATE.....

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 soldier 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.....

President.

Members.

This space to be for numbers.

M 11/10/09



Proceedings on Discharge.

28-M-449

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

No.	724625
Rank	Private
Name	John Walter Mills
<small>NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.</small>	
Corps (Squadron, Battery or Company)	12th Battalion Canadian Garrison Reg
Date of Discharge	26-8-18 D.O.123-605
Place of Discharge	Regina Sask

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age.....	years.....	months.	Descriptive Marks
33			
Height.....	5	feet.....	5
			inches.
Complexion	Fair		Tattoo Marks left Arm
Eyes	Blue		Cross.
Hair	Brown		
Trade	Hospital Orderly		
Intended place of residence	Antler		
(To be given as fully as practicable.)	Sask		

*Declassified 12/12/40
649-M-16480*

2. The above-named man is discharged in consequence of **Physically Unfit**
Wounds. Auth 29-C-39

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.

3. Conduct and character while in the service have been, according to the records, etc.

To be in the hand writing of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.

W. S. G. Camp, Lt. Col. O.C. 12th Battalion Canadian Garrison Regiment
Good

N.B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldier and the Officer Commanding his Squadron, Battery or Company:

4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)

Hospital Orderly

M. F. B. 218.

100m.—6-16.
H. Q. 1772-39-113

Rec

*KLD
9-10-19
mro*

(OVER)

E. R. 4

*W. S. G. Camp,
30-1-19, D.O.B.*

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

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

6. Medals and Decorations.....

Entitled to wear one Gold Casual
Stripe 9-4-17

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) Regina. Sask

[Signature] Lt. Col.
O.C. 12th Battalion Can. Garrison Regiment

(Date) 26-8-18

Commanding

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) Regina. Sask

J. W. Mills (Signature of Soldier.)

(Date) 26-8-18

S. Chroy (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) 3 years 228 days.

3 228
Total.....years.....days.

11. Confirmation of Discharge.

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

(Place) Regina. Sask

[Signature] Lt. Col.
(Signature) O.C. 12th Battalion Can. Garrison Regiment

(Date) 26-8-18

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.)

J. W. Mills

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 Certificate, " 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> <p style="text-align: center;">In the case of recruits who are rejected on final approval, the discharge documents will consist of</p> <p>(a) Proceedings on Discharge.</p> <p>(b) Attestation.</p> <p>(c) Medical History Sheet (in the event of such having been prepared.)</p>
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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.

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

Aug 1/16

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

<i>75</i>	<i>20⁰</i>		
-----------	-----------------------	--	--

*Bank Account
For Credit*

PARTICULARS OF SEPARATION ALLOWANCE

No. *724625*
 Rank *Pte* Promoted Reverted Discharge
 Soldier's Name *J W. Mills*
 Battalion *109 Bn.*
 Beneficiary
 Relationship
 Address

PARTICULARS OF ASSIGNMENT

Name *Mgr Bank of Montreal*
 Address *Lindsay*
 Change of Address *Chc*
 1 *W. J. Mills, 402 Glossop Rd. Sheffield, Yorks England*
 2 *3515-75th Ave. Regina Sask S 49 W 1 S*
 3
 4

ENGLISH

Date	Cheque No.	Amount S/A	Amount A/P	Total
<i>1917 Dec 31</i>			<i>225</i>	<i>225</i>

REMARKS
① Duplicate check sent to England, Nov. 13/1917 - 2 M 30/10/17 fac 6 1/2
Payments in Canada to 31/10/17

Ret'd per *M. J. Mettania*
 Date *23-5-18* F. X. *27-5-18*
 Clerk *W. J. Young*

CANADIAN
 ASSIGNED PAY AUDITED
OK. McWhillans
 AUDIT CLERK
 DATE *7/19*

M. F. W. 128
 4000c-6-17-1772-38-1141
 L. L. 22520-M. & D. 7868.

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

8216-163

Name **Mills, John Walter**
Surname Christian Name

F 99

J-8

Regimental Number **724625** Rank **Pte**

Address (in full) **Autler, Sask.**

Unit **38th Bn**

Mrs Julia Mills

Original Unit

District where paid **M.D. 12**

Date of Discharge

P. D. P. Filing Number **10-191-12 and 11-191-12**

Rates:—Regimental pay \$ per diem: Field Allowance \$ per diem. Separation Allowance \$ per month.

L. L. 46033—M. & D. 9243.

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	2369	26-9-18	33 00	2255	26-10-18	34 10				33 00	67 10
75 00	2370	"	25 00	2256	"	22 90				25 00	47 70
516-1 st	96014	4-3-19	70 00								
1 st	96015	" "	30 00	<i>cancelled 24-4-19</i>							
363 ^A	939781	14-3-19	70 -	<i>11722</i>							

M. F. W. 127.
25M.-8-18.
1772-39-1140.

Remarks: **S.A. remitted direct to Mrs. J. Mills.**

**75 Montgomery Terrace,
Sheffield, England.**

96015 cheque cancelled, wife's misconduct 24-4-19

3515- 5th Ave Regina
 Sask

Mrs Julia Mills
same address

New address

1832 Halifax Street
Regina Sask

W. S. G. File No 012866-21

Award days at \$ 100⁰⁰ per day \$ 500⁰⁰
S. A. months at \$ per mo. \$ \$ 175¹⁰
Less P. D. P. Credited \$
Less further debit balance \$
Net due paid as below \$ 324⁹⁰

TO SOLDIER		TO DEPENDENT				Amount
O	Ag. No	Ch No	Amount	Cr No	Ch No	
						30 00
1	376	6014	70 00	576	6015	30 00
	363A	39781	70 00			17 30
3	735B	418798	70 00			
4	547C	452646	37 60			
5						
6						
Total						

4-3-19
14-3-19
19-4-19
7-5-19

78

4-3-19 cancelled 24-4-19

23-5-19

Dependent's
Account
suspended.

See file HLR.

012866-8-21

6015 cheque cancelled wife's misstatement.

Dept not eligible for W.S.G.,
Unworthy to receive same.
P.R. ruling 31. 12/19

MW

MEDICAL HISTORY SHEET.

Surname Mills Christian Name John Walter

Examined { on 1 day of December 1915
 { at Lindsay
 Birthplace { City or Town Sheffield
 { County England
 Apparent age 30 years
 Occupation Hospital Orderly

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

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT,
		<u>23 APR 1917</u> M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date	Result	VACCINATIONS,
<u>24 1/16</u>	<u>Nil</u>	<u>J. McCulloch</u> M.O.
<u>3-3-16</u>	<u>Good</u>	<u>J. McCulloch</u> M.O.
		M.O.

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

Form—R. 190 8528-25M-25/10/16.
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.)

Enlisted on 30 day of November 1915 at Lindsay

Corps.	REG'TL NUMBER.	HABITS.	DATE.
<u>109th Bn</u> <u>C 87</u>	<u>724625</u>		<u>30-11-15</u>
<u>88th Bn.</u>			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>Sheffield</u>	<u>10-1-18</u>	<u>Edw. rh. side neck</u>	<u>D III J. McCulloch</u> PRESIDENT
<u>Sheffield</u>	<u>Feb 2/18</u>	<u>G.S.W. Neck</u>	<u>B II J. Beer</u> STANDING MEDICAL BOARD.
<u>Sheffield</u>	<u>2-3-18</u>	<u>Defect Vision + S. side neck</u>	<u>Capt. C. P. B. M. Board.</u>
<u>Sheffield</u>	<u>11-6-18</u>	<u>Stiffness of neck</u>	<u>D III J. McCulloch</u> PRESIDENT
<u>Sheffield</u>	<u>24-6-18</u>	<u>Defect Vision</u>	<u>C III M. C. Roberts</u> PRESIDENT
<u>Sheffield</u>	<u>20-8-18</u>	<u>Wound + jaw</u>	<u>E. J. ...</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

IMPORTANT

DISPOSAL OF ORIGINAL MEDICAL HISTORY SHEETS

Action by Officer in Charge

- (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.

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 General Instruction 87, April 1948

MEDICAL HISTORY SHEET.

Surname Mills Christian Name John Walter

Examined on 1st day of December 1915
 at Lindsay
 Birthplace { City or Town Sheffield
 County England

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

Apparent age 30 years
 Trade or occupation Hospital Orderly

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT,
		23 APR 1917 M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Height 5 Feet 5 Inches.
 Weight 133 Lbs.
 Chest measurement { Minimum 34 inches.
 Maximum expansion 37 inches.

Date	Result	VACCINATIONS,
<u>24.1.16</u>	<u>Nil</u>	<u>J. McCulloch</u> M.O.
<u>3.3.16</u>	<u>Good</u>	<u>J. McCulloch</u> M.O.
		M.O.

Physical development Good
 Small-Pox Marks None

Vaccination Marks { Arm Right None Left Five
 Number Five

When Vaccinated last January 24 1916

(a) Marks indicating congenital peculiarities or previous disease None

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>18.4.16</u>	<u>Good</u>	<u>J. McCulloch</u> M.O.
<u>25.4.16</u>	<u>Good</u>	<u>J. McCulloch</u> M.O.
<u>2.5.16</u>	<u>Good</u>	<u>J. McCulloch</u> M.O.

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

Enlisted on 30th day of November 1915 at Lindsay

Joined on enlistment	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
	<u>109th Bn.</u>	<u>724625</u>		<u>30.11.15</u>
Transferred to..	<u>88th Bn.</u>			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>Draps</u>	<u>10-1-18</u>	<u>GBW rhoid neck</u>	<u>D III J. McCulloch</u> PRESIDENT
	<u>Feb 2/18</u>	<u>GBW Neck</u>	<u>B II J. Beer</u> STANDING MEDICAL BOARD.
	<u>2-3-18</u>	<u>Defect Vision + S. SW neck</u>	<u>Capt. Chene</u> Pres Med Board. <u>B III J. Beer</u> cap
<u>Reyn</u>	<u>11-6-18</u>	<u>Stiff neck</u>	<u>D III J. McCulloch</u> PRESIDENT
<u>Reyn</u>	<u>24-6-18</u>	<u>Defect Vision</u>	<u>C III McCulloch</u> cap
	<u>20-8-18</u>	<u>Wound + Jaws</u>	<u>E. J. ...</u>

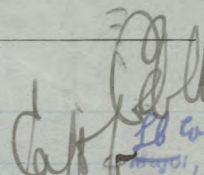
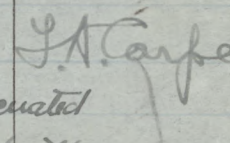
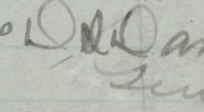
N. B.—This sheet to be disposed of in accordance with instructions in the Regulations for Army Medical Service, on the man becoming non-effective; the date and cause being stated on next page.

CANADIAN

WESTERN GENERAL HOSPITAL, MANCHESTER.

Christian Name John Mills

Surname Mills

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				
		16	4	14	31	8	14	R.B.W. neck & jaw sup wt L. Leg	138	W - 9.4.14. Jaw not fractured - flesh w th lead. op ⁿ removal I.B. 19.4.14. Bleeding hemorrhoids old standing case. 21.5.14. Almost healed. Eye Lead 24.7.14. Current squint R. Eye Amphlyopic. skin undiluted + 3 ddp. = +1 Cur. $\frac{6}{40}$ J 20 L. $\frac{6}{9}$ C + 0. 5 ddp = $\frac{6}{6}$ J 1, does not require glasses. 17.6.14 Es of also 20 5 Oct. 31.8.14. Fw transfer	 Secretary and Registrar, 2nd WESTERN GENERAL HOSPITAL
	McEwan	31	8	17	20	9	17	Do.	21	2.9.17. Swell on side of jaw. Weakness in mastication & pain in rt. side of jaw. Loss of vision in rt. eye - also internal strabismus. Some weakness in lt. leg following G.S.W. Transfer to Orpington for jaw condition.	 Capt.
ONTARIO MILITARY HOSPITAL ORPINGTON, KENT.		20	9	17	13	11	17	G.S.W. Lower jaw Rt.	54	8.8.17 Bone removed & small amount of pus evacuated Packed with sterile gauze & skin stitched with silk 30.8.17. R.V. $\frac{4}{60}$ = $\frac{6}{60}$ with +1 ⁰⁰ DS = +2 ⁰⁰ cyl ax 90° L.V. $\frac{4}{60}$ 2 = $\frac{6}{60}$ -1 with +1 ⁰⁰ D.S. Patient has internal strabismus of rt. eye which has existed since childhood when he was cut in right eye with knife 12.11.17. Discharged to furlough & duty.	 Capt.