Original
M.G.S.

80th Battalion, C.E.F.
ATTESTATION PAPER

No. 72425-7
Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS)

1. What is your name? — John Pearson
2. In what Town, Township, or Parish, and in what Country were you born? — Lindsay Ont
3. What is the name of your next-of-kin? Father — John Pearson
4. What is the address of your next-of-kin? — Haliburton Ont
5. What is the date of your birth? — August 9th 1897
6. What is your trade or calling? — Laborer
7. Are you married? — No
8. Are you willing to be vaccinated or re-vaccinated? and inoculated — J.P. 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

John Pearson (Signature of Man.)
R H Anderson (Signature of Witness.)

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, John Pearson, do solemnly declare that the above answers made by me to the above questions 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.

John Pearson (Signature of Recruit.)

Date September 2nd 1915. R H Anderson (Signature of Witness.)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, John Pearson, 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.

John Pearson (Signature of Recruit.)

Date September 2nd 1915. R H Anderson (Signature of Witness.)

CERTIFICATE OF MAGISTRATE.

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

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

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath before me, at Lindsay this 2nd day of September 1915.

E. F. Jordan (Signature of Justice.)

I certify that the above is a true copy of the Attestation of the above-named Recruit.

C. H. Jarvis Capt (Approving Officer.)

M. F. W. 23.
200 M.—3-15.
H.Q. 1772-39-841.

DESCRIPTION OF John Pearson ON ENLISTMENT.

Apparent Age 18 years 1/2 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 5 3/4 ins.

Chest measurement:
- Girth when fully expanded 35 1/2 ins.
- Range of expansion 3 ins.

Complexion Fair

Eyes Blue

Hair Dk Brown

Religious Denominations:
- Church of England
- Presbyterian
- Methodist Methodist
- Baptist or Congregationalist
- Other Protestants (Denomination to be stated.)
- Roman Catholic
- Jewish

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.)

Scar on right shin

CERTIFICATE OF MEDICAL EXAMINATION.

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

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

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

Date August 29th 1915. J McCulloch

Place Lindsay Lieut

Medical Officer.

*Insert here "fit" or "unfit."

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

CERTIFICATE OF OFFICER COMMANDING UNIT

John Pearson 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.

E W G Hutcheson (Signature of Officer.)

Date OCT 6 1915 191 . COLONEL

O. C. 80th Battalion, C.E.F.

REGIMENTAL DOCUMENTS

NAME Pearson John M. REGT. NO. 724257 UNIT D.O.S. H. Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
4	ATTESTATION PAPER (M.F.W. 23, 133, or 51)	28/4/20	28	20-11-19		DEATH
	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
	TRAINING HISTORY SHEET (M.F.W. 113)					
1	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
3	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					
2	DENTAL HISTORY SHEET (M.F.B. 465)				031	DISCHARGE
1	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					Category
	MEDICAL EXAMINATION (M.F.W. 129)					
	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
1	LAST PAY CERTIFICATE (M.F.W. 44)					
1	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					
1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
1	M.F.W. 144					36 — 21
2	Mins.					24 — 21
1	Will.					10 — 21
1	Cas Card					

H

3

P. 559

MARRIED OR SINGLE: Single

PLACE OF BIRTH: Lindsay Ont

NAME AND ADDRESS OF NEXT OF KIN: John Pearson Haliburton Ont Can Father

RELATIONSHIP OF NEXT OF KIN:

NAME AND ADDRESS OF NEXT OF KIN:

RELATIONSHIP OF NEXT OF KIN:

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO:

RELATIONSHIP OF DEPENDANT:

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL

REG'L NO. 724257 RANK Pte NAME Pearson John

IF IN PERMT. CORPS WHAT UNIT } UNIT 109th Bn TRANSFERRED TO 38th Bn DATE 16-1-17 AUTHORITY D0339

PERMANENT FORCE ALLOWANCES TRANSFERRED TO DATE AUTHORITY

PLACE OF ATTESTATION Lindsay Ont TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION Sept 2nd 1915 TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY $ 15 00/100 DATE EFFECTIVE Aug 1st 1916

PAYABLE TO Mrs John Pearson Haliburton Ont RELATIONSHIP Mother

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

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

DISCHARGE DATE AND PLACE REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

C1

DATE 1916	PAY No. of Days	PAY Rate	PAY Amount $	PAY Amount c.	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount $	Field Allowance Amount c.	Working or Special Pay No. of Days	Working or Special Pay Rate	Working or Special Pay Amount $	Working or Special Pay Amount c.	Assigned Pay Credits	Other Credits	Total Credits	Acquittance Rolls 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	Cash Payments 1	2	3	4	Assigned Pay	Other Charges	Total Debits	Balance Credit	Balance Debit	Pay Withheld or Deferred	Pay Available for Issue	Remarks
													Balance from Canada																		85				
July 31														85	85																				
Aug 31	31	1.00	31			10	3	10							34 10	3	9/6/16							973				15		24 73	10 22				
Sep	30		30				3								33	36	31/8/16	67	15/9/16					730	730			15	36	29 96	13 26				Issue on report C.400549 - 29/8/16
Oct	31		31		31		3	10							34 10	107	30/9/16	146	15 10/16					486	730			15		27 16	20 20				
Nov	30		30				3								33	175	31/10/16							730				15		22 30	30 90				
																277	30/11/16							487											
Dec	31		31				3	10							34 10	221	15/11/16							730				15		27 17	37 83				D0339-4-12-16 Tfd to 38th Bn Eff 16-1-17
1917 Jan	15	1.10	16	50											16 50													15		15	39 33				
Jan 16-31	16	1.00 / .10	17 / 2.02	60 / 40											17 60 / 20 32 5					9750 / 10013	14/2/17 / 28/2/17	4 36 / 4 36						—		4 36 / 150 68	52 57			
Feb 1-28	28		30	80											30 80	760 / 814	19/1/17 / 7/2/17			10495	1/1/17	Rouillard		261 / 262			4 36	15		26 33	57 04				
Mar	31	"	34	10											34 10	889	16/2/17	950	5/3/17	556	16/3/17	4 Dir Sig Co		261	262	262		15		25 47	65 67				
April	30	-	33	00											33 00													15		15 00	83 67				
May	31		34	10											34 10	73 / 281	15/4/17 / 20/5							5 23 / 5 35 / 2 68				15		20 23	97 54				
June	30		33	00											33 00	355	2/6											15		23 03	107 51				
			367	40										85	368 25									62 46	17 22	15 70		165	36	260 74	107 51				

CANADIAN
ASSIGNED PAY AUDITED
O.K. Hawhilleau
AUDIT CLERK
DATE 8/5/19

724257 Pte Pearson J.

Date	Pay: No. of Days	Pay: Rate	Pay: Amount $	Pay: Amount c.	Field Allowance: No. of Days	Field Allowance: Rate	Field Allowance: Amount $	Field Allowance: Amount c.	Working or Special Pay: No. of Days	Working or Special Pay: Rate	Working or Special Pay: Amount $	Working or Special Pay: Amount c.	Assigned Pay Credits	Other Credits	Total Credits
1917			367	40										85	368 25
July	31	1/10	34	10											34 10
Aug	31		34	10											34 10
Sept	30		33												33
			468	60										85	469 45

Acquittance Rolls 1: No.	1: Date	2: No	2: Date	3: No.	3: Date	4: No.	4: Date
435	20/6						
		893	30.8	353	4.7.	72 Bn	
652	17.7	956	5.9	2550	5.7	CBD.	Bmd

Cash Payments 1	2	3	4	Assigned Pay	Other Charges	Total Debits	Balance Credit	Balance Debit
62 46	17 22	15 70		165	36	260 74	107 51 ~~260 74~~	~~107 51~~
2 68				15		17 68	123 93	
				15		15	143 03	
267	5 36	13 38						
	2 68	5 35		15		44 44	131 59	
67 81	25 26	34 43		210	36	337 86		

Month	Particulars	Cr. 1	Cr. 2	Particulars	Dr. 1	Dr. 2	Dr. 3	Dr. 4	Balance	Deferred Pay	Sep. Allce. Eng.
1917		~~131 59~~							131 59		
Oct. 31	1/10	34 10		Asgd. Pay			15				
									148		
				CR.1046 23/9/17 38 Bn.	2 68				145 01 Cr.		
		34 10			2 68		15				
Nov.	P.P.	33		A.P. Can.			15				
				CR. 114 18-10-17 4 CD TR Arc.	3 57						
				CR. 984 17-9-17 38 Bn.	2 68						
				C.R. 2677 14-12-17 "	24 33						
Dec.	P.P.	34 10		A.P. Can.			15				
				CR1195. 3/10. 38th Bn	4 46				150 07		
		67 10			35 04		30				
1918 Jan.	P.P.	34 10		A.P. Can.			15				
				CR.1432 23/11/17 38 Bn.	12 49						
				CR.1509 5/12/17 "	4 46						
				CR.1525 5/12/17 "	5 35						
				T.C.D. 1931 7/12/17 "	97 33						
				CR.376 4-11-17 4 D. Wing CCRC	4 46		15		45 08		
		34 10			124 09						
Feb.	P.P.	30 80		A.P. Can.			15				
				CR.1678 1/1/18 38 Bn.	4 46						
				CR.1769 22/1/18 "	3 57				52 85		
		30 80			8 03		15		34 10		
Mar.	P.P.	34 10		A.P. Can.			15		86 95		
				CR.1854 14/2/18 "	6 25				29 28		
				CR.1931 20/2/18 "	3 57						
					9 82						
				CR.2028 2/3/18 "	4 46				57 67		
		34 10			14 28		15				

Pay Withheld or Deferred	Pay Available for Issue	Remarks

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY	* ~~ENGLAND~~ OR CANADA.	SEPARATION ALLOWANCE.	* ENGLAND OR CANADA.
EFFECTIVE DATE:- 1-8-16		EFFECTIVE DATE:-	
AMOUNT:- 15 00		AMOUNT:-	

NAME:- PEARSON John

NUMBER:- 724257

NAME, ADDRESS, RELATIONSHIP & AUTHORITY | WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.

Mrs. John Pearson
Halibarton Ont.
Mother
Stopped off 1/12/18.

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Private

UNIT AND TRANSFERS

ORIGINAL UNIT:- 109 Bn.

DATE ACCOUNT FIRST OPENED:- 1-8-16

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			38 Bn.
94	1-4-18	25-4-18	E of R D
			Canada Section

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
27/11/18	10313	Witley 17/12/18 £2	9 73				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1	10		

PARTICULARS OF RENDERING NON-EFFECTIVE:- Trans to Canada for Disposal 1/12/18 MR 18 23/11/18 E of D Cr 91.72

MONTH 1918	PARTICULARS	CR 1	CR 2	PARTICULARS	DR. 1	DR 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
march	Bal Brot. fwd								57 67		
April	P.P.	33		Can a.p.				15			
				Rem. 3146. 15/4/18. 38 Bn.	4 87				70 80		
May	P.P.	33 / 34 10			4 87			15 / 15			
				Can a.p.							
				AR. 3083. 1/5/18. Epcom.	9 73				80 17		
June	P.P.	34 10 / 33			9 73			15 / 15			
				Can. a.p.							
				AR. 2814. 4/6/18. Epcom	4 87						
				AR. 1222. 28/6/18. W.B.B. Ex & Hosp.	2 43				90 87		
July	P.P.	33 / 34 10			7 30			15 / 15			
				Can. a.p.							
				AR. 1395. 12/7/18. W.B. Ex & Hosp.	2 43				107 54		
Aug	P.P.	34 10 / 34 10			2 43			15 / 15			
				Can a.p.							
				✓ 2619 2/8/18 PICR + Hosp.	9 73						
				O.R. 3962. 30/8/18.	9 73				107 18		
Sept.	P.P.	34 10			19 46			15 / 15	125 18		
Oct	S.T. 14/10/18 - 24/10 B.O. 290 30/10/18 1 CCD	33 / 7 30		AR 8023 14/10/18 P ✓	48 67			15			
	P.P.	34 10		Can				15			
				✓ 6320 30/9/18 ✓	9 73						
				✓ 5228 29/10/18 1st CCD	9 73				83 48		
		41 40			68 13			15			
Nov		33		Can				15			
				✓ 10313 21/11/18. C Gen Dep.	9 73				91 72		
		33			9 73			15			
				18							
				Canada 7/12/18 RO 304 9/12/18 E of D							

checked
E. Davey
21/11/18

CANADIAN
ASSIGNED PAY AUDITED
O.K. Hewhellows
AUDIT CLERK
DATE 8/5/19

NUMBER RANK NAME

Month	Particulars	Cr. 1.	Cr. 2.	Particulars	Dr. 1	Dr. 2	Dr. 3.	Dr. 4.	Balance	Deferred	Separation

To be made out in duplicate.

I.Q. 51-21-20-53

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.

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

(2) Regimental Number 724257

(3) Full Name of Soldier John Morris Pearson

(4) Place of Birth Lindsay, Ontario

(5) Are you married, or not? No

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

(b) Present Postal Address

(7) Are you a widower? No

(8) Have you any children? No

If so, give number of boys and girls

Also their names and ages

M. F. W. 67.

300M.—5-16.
1772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive? Yes

If so, state name and address John James Pearson, Haliburton, Ont.

(10) Is your Mother alive? No.

If so, state name and address

(11) If your Mother is a widow

Are you her sole support, or not?

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

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

John James Pearson,
Haliburton,
Ontario

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

(15) Are you insured? 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 July 10th 1916

J. F. Kerr Lt. Col.
Officer Commanding.
O. C. 109th Overseas Battalion, C. E. F.

LEDGER No. 2141-754 SERIAL No. B22007.38

REG. No. 724257 NAME Pearson John M.

RANK Pte CORPS W A S. AGE 20 SERVICE 6/5/12. E 14/12: F 16/12.

HOSPITALS		DATE OF ADMISSION
1 Queens Military	Kingston	9. 1. 19
2		
3		

DIAGNOSIS G/S W Rt thigh Ulcers legs

TRANSFERRED TO Dom Ortho Hosp 15. 4. 19

DISPOSITION 10. 7. 19 CATEGORY

M.F.W. 2553.
1126-D.P.-50M-12-18.
1772-39-1332.

P.T.O.

REMARKS:

HOSPITALS.	DATE.	DIAGNOSIS.

N/E

Reg. No.	Rank.	Surname	Category.	Dentally Unfit.
72257	Pte.	Christian Names (1) John (2) (3)	B iii Date	

Place of Enlistment:	Date of	Taken on from	Religion	Inoculations	Company
Kingsway					
Province:	**Age on**	**Date**		**Vaccination**	
Nat.	18				

On Command	Hospital	Permanent Cadre	Employed as
		Date taken on	
Date Proceeding	Date Admitted		

Record of Overseas Service:	Profession or Trade (Civil)
	Labourer.
	Transferred or Posted to
Reason for Return:	Date

Married or Single

Address of Next of Kin

Country

LEAVE.

No. of Pass Issued.	From.	To.	Free Transportation.

A.G 10434

Part 2 Order Entries.

No.	Date	Ref.	No.	Date	Ref.

TRAINING.

Weeks of Training.

1	2	3	4	5	6	7	8	9	10	11	12	13	14	Over.

Nature of Training	Date passed test
Drill	
Musketry	
Bombing	
Rifle Bombing	
Bayonet Training	
Anti-Gas	
Lewis Gun	
Rapid Wiring	

Special Training Courses, etc.

No. 219761. RANK Pte NAME Pearson John

124257

T. O. S. 27-8-15 UNIT 45th Victoria Regt
DO 76 27-8-15 O.S. Cont.

M. D. 3

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915 Aug 27	1915 Aug 31	✓		
~~Sept~~	~~Sept~~ 28	✓	Transfd to 80th Bn 28-9-15	DO 92 28-9-15
Sept 29	Sept 30	✓	~~Shown on 80th Bn paylists~~	
	Oct.	✓		
	Nov	✓		
Dec 1.	Dec 23	✓	Transfd to 10th Bn. 23.12.15	D.O. 96. 23-12-15.

No. 724208 RANK Pte NAME Pearson. J.
724257.

T. O. S. UNIT 109th. Battalion
Transferred from 80th Bn
24-12-15 DO.33 29-12-15.

M. D. 3

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915 Dec 24	1915 Dec 31	✓		
1916 Jan.	1916	✓		
Feb.		✓		
Mar.		✓		
April		✓		
May		✓		
June		✓		
July		✓		

UNIT SAILED
JUL 23 1916

Form DMS 1401.

Princess Patricia Canadian Red Cross Hospital. B 111

Cooden Camp, Bexhill. HOSPITAL.

A. & D. CARD

J 339

Regt'l

AT

A. & D. No. 724257. PL. OF ACTION St Pierre. France

RANK Pte REG. No. UNIT 38th Lon Batty. SICK OR WOUNDED

NAME Pearson J. AGE 19. RELIGION Meth.

PLACE IN HOSPITAL Dw. 1.

DIAGNOSIS E.W. R. Prattock

ADMITTED 31-7-1918. FROM Westcliffe Lon Eye & Ear Hospl Folkestone.

DISCHARGED 14-10-18 TO 3rd Cdl Seaford

TRANSFERRED

SERVICE AT HOME 34/12. IN FIELD 16/12.

RESULTS

DISCHARGED TO DUTY.

Cat B III

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

P.T.O.

REMARKS.

Farmer

Form R. 149.

Name Pearson John Rank Pte Reg. No. 724257

Unit 38th Battn

Next of Kin Canada 993.

Date	Movement	Place	Casualty	List No.	Notified N.K.O.	W.O. List
17-3-18.	6 Cas Clg Stat.		Shell Wd R. Buttock		Q145	15281
31-3-18	Pte H. Colpitts		do	13071		15364
1-5-18	Pte Cay H. Cayem		do	13262		17282.
20-6-18	Wetcliffe E.E. & E.H. Stone		do Gas & Obstruction	13246		20043.
1-8-18	Pte R. Berhill		do	13280		23262
11-10	Pte Pearson wounded		Do	13352		8262
11-10	Still gunshot on 24.10.18 to 16 C.D. Hosp					

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List

REGT'L No 724257

H. Q. FILE No. 649-

NAME Pearson, John

RANK AND CORPS Pte, 109th Battn 38th Bn Lgm

FOLLOWS No. 8 Mil Div. FOLLOWS

CABLE

No.	Date
2145 9-10	23.3.18

NATURE OF CASUALTY C. Can. Eng. Div.

Adm Chas & Ch Ftn War. 17th 1918.

GSW. Rt Buttock (L

Correct.

L. L. Job 90581—M. & D. 6314.

M. F. W. 42—50M—1-16.
H. Q. 1772-39-893.

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
6.	Connaught Aldershot	15-8-16	N.Y.D.
29.	" "	26-8-16.	" " De now diagnosed as "Follicular tonsilitis" (as per H.L. No. 32)
a141	#6 Cas Clg Stat	14-3-18	Sev. R. Bullock
B177	Gen. Mil. Colchester	31-3-18	S.W. R. Buttock
B202	Mil. Conv. Wdcte Pk Epsom	Surrey 1-5-18	Sev R. Buttock
B246	To West Cliff Cas Clg Folkestone	20-6-18	Nasal Obstruction
B280	P.P. Can. R.C. Spec. Bexhill on Sea	1-8-18	Sev. R. Buttock & Nasal Obs.
B352-2	Discharged	14-10-18	" " " " "

Can.

B

Number 724257 Rank Pte

Surname PEARSON

Christian Name John

Units 48th 75th Can Inf Theatre of War France

Date of Service 6/12/16

Remarks 11 Cover Rd.

Latest Address ~~P.O. Lindsay~~ London Ont

Roll No. B Page 9532

Next of kin _____

Address on leave _____

Address on discharge _____

Transportation issued Yes / No Date _____ Character on discharge _____

Previous occupation _____ Date and place of enlistment _____

Diagnosis _____ Date of Medical Boards _____

Date		Remarks

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

C.

SURNAME. Pearson.

CHRISTIAN NAMES John.

REGL. No. 219761 RANK Pte.

UNIT ~~80th.~~ 109th.

FORMER CORPS Nil

CARD NO. 2 8 11-4-19 auth. DCO/07 ~~8~~ 17-4-19

FOLL.

S.O. 8 dis 14-7-19 "M.O." auth DCO 120/11-7-19 Bn. #2010.

NEXT OF KIN.

NAMES IN FULL Pearson, John.

RELATIONSHIP TO SOLDIER Father

ADDRESS Haliburton, Ont.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada, Lindsay Ont. DATE

PLACE OF ATTESTATION Lindsay, Ont. DATE Sept 2nd. 1915

Sailed from Halifax per S.S. Olympic 458/28

23-7-16 R/e 14-12-18 5932 189

L. L. 94504. M. & D. 6512. M. F. W. 22. 250M.-2-16. H. Q. 1772-39-339.

MARRIED SINGLE Yes WIDOWER

TRADE OR CALLING RELIGION

DESCRIPTION.

APPARENT AGE YEARS MONTHS

HEIGHT FEET INCHES

CHEST MEASUREMENT INCHES EXPANSION INCHES

COMPLEXION EYES HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE DATE

R. 149.

Name Pearson John Rank Pte Reg. No. 724257

Unit 109th Battn

Next of Kin

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
15. 8. 16	Connaught-Aldershot		N. Y. R	6.		
26-8-16	D is			29.		
Has now been diagnosed – Tonsillitis				32.		

Date		Movement	Place	Casualty	List No.	Notified N/K O.		W.O. List

D.M.S. 1309.

Surname	Christian Name or Names	Reg. No.
Pearson	J.	724257

Rank	Unit	Co.	Troop	Batty.
Pte.	109th Bn.	38		

Hospital: Connaught Aldershot

Date of Admission: 15.8.16

Transferred — Hosp.

6 Cas Cly Station — Hosp. 17.3.18

General Mil. Colchester — Hosp. 31.3.18

Woodcote Pk. Epsom — Hosp. 1-5-18

Diagnosis: ~~N.Y.D.~~ Follicular Tonsillitis

(1)

Later Diagnosis (if changed)

(2) S.W.R. Buttock.

(3) Nasal Obstruction Rw. LKD

Additional Diagnoses: If more than one state present

DISPOSITION	Date	REMARKS
		dis 20.8.16.
		dis. 14.10.18
C.L. 22.8.16	6	
7.11.16	29	
13.11.16 #32		
23.3.18 a	171.	
3.4.18 B177	-1	
2-5-18 B	202	
24.6.18 B	246.1	
3.8.18 B	280.	
24.10.18 B	359.2	

A.M.D. 2 Dept.

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

EPITOME OF HOSPITAL TREATMENT.

Hospital	Adm.
1. Westcliff — E. & E.	20-6-18
P. P. & R. C. Bexhill.	1. 8. 18.
2.	
3.	
4.	
5.	
6.	
7.	

C.C. A/V

MILITIA AND DEFENCE

Park School Barracks,
Toronto.

Field Conduct Sheet

~~CASUALTY FORM~~

724257 Pte Pearson J M

The above mentioned document for the marginally noted, has not been received ~~from Company~~.

Lieut.
for O.C. Casualty Company "A",
#2 District Depot.

LH.

724257 Pte. Pearson, J. 109th Battalion, C.E.F.

Will detached by Regt. Paymaster.

78131

G. J. Williams CAPT.
Paymaster, 109th Overseas Battalion, C.E.F.

— 20 —

Perforated sheet for Will from Pay Book of Reg.

No. 724257

Name Pte. J. M. Pearson

Unit 109 Battalion

Military Will.

In the event of my death I give the whole of my property and effects to my Father Mr. J. J. Pearson Haliburton Ontario Canada

Signature J. Pearson

Rank and Regt. Pte. 109 Batt

Date Sept. 30/16

Witness Pte R. Sandercock

War Service Badge,
Class B
No. 273682
issued.

CANADIAN EXPEDITIONARY FORCE

TEMPORARY DISCHARGE CERTIFICATE

E.G.

This is to Certify that No. #724257 Rank Pte.

Name (in full) PEARSON, John, Maurice

Enlisted in 80th BN.

CANADIAN EXPEDITIONARY FORCE on the 21st.

day of September 1915

HE SERVED IN ENGLAND & FRANCE:::::::

and is hereby discharged from the Service by reason of "MEDICALLY UNFIT"

and is free to accept CIVILIAN EMPLOYMENT.

HIS DESCRIPTION ON THE DATE BELOW IS AS FOLLOWS

Age	19 Yrs.	Marks or Scars	
Height	5' 5¾"	Vacc. scars left arm.	
Complexion	Medium	G.S.W. Rt. Buttock, 16-3-18	
Eyes	Blue	Gold Stripe One.....1	
Hair	Dark		

Former Occupation Labourer

Signature of Soldier J. M. Pearson

Issuing Officer Guy Thompson
For
O.C. No. 2 District Depot.

Date of Discharge 14th July 1919

Rank G.P.O. Lindsay

Appointment

Signed at Toronto this 14th. day of July 1919.

Military District No. #2 D.D.

Reference No.

M. F. W. 39c
100M.—2-18
1772-39-882

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

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

M. F. W. 54. (A. F. B. 103.
350M.—5-16
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps 109th Battalion C.E.F.

Regimental No. 724257 Rank Pte C. E. F. Name Pearson John

Enlisted (a) 29/8/15 Terms of Service (a) D. of War Service reckons from (a)

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

Extended Re-engaged Qualification (b)

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
11-4-19	#3. D. D	Transferred from Hosp and #3. D. D to #2. D. D Toronto	Kingston	14-4-19	H. D. Pt. II - 105
					Major For O. C. No. 3 District Depot.
	11-11-19	T.O.S. No. 2 District Depot, Part II, D.O. No. 107			
					Major, For Lieut.-Colonel, O.C. No. 2 District Depot.
		Dis. #2 D.D. 14th July 1919 Pt. 11 #192			For O.C. No. 2 District Depot.

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

[P.T.O.

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				

MEDICAL HISTORY SHEET.

Surname ..... *Christian Name* .....

Examined { on ..... day of ..... 191 .....
at .....

Birthplace { City or Town .....
County .....

Apparent age .....

Trade or occupation .....

Height ..... Feet ..... Inches.

Weight ..... Lbs.

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

Physical development .....

Small-Pox Marks .....

Vaccination Marks { Arm ..... Right. ..... Left.
Number .....

When Vaccinated last .....

(*a*) Marks indicating congenital peculiarities or previous disease .....

(*b*) Slight defects but not sufficient to cause rejection .....

Approved by

.....

Rank ..... M.O.

Date.	Fit or Unfit.	Examined for Re-engagement.
		..... M.O.
		..... M.O.
		..... M.O.
		..... M.O.
		..... M.O.
		..... M.O.
		..... M.O.

Date.	Result.	Vaccinations.
		..... M.O.
		..... M.O.
		..... M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.
		..... M.O.
		..... M.O.
		..... M.O.

Enlisted on ..... *day of* ..... *191* ..... *at* .....

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment				
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.

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.

M. F. B. 313.

200M—11-15.
H. Q. 1772 39-459.

Surname Pearson Christian Name John

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital. Day	Month	Year	Dates of Discharge from Hospital. Day	Month	Year	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.
A.U.M.H. Kingston		9	1	19	11	4	19	Ulcers of legs	91.	Transferred to D.O.M.H. Toronto	Stevenson Capt. A.M.C.
D.O.H.	Toronto	15	2	19				G.S.W. Rt Buttock		Some limitation of hip movement due to wound. Back is weak & he complains of pain after standing or walking. Discharge as medically unfit.	R.B. Gordon Capt. Can. C.

Forms
I 1237
H

Army Form I. 1237.

Meth. **MEDICAL CASE SHEET.***

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
8086.	724257.	Pte	Pearson.	J.
Year 1918.	Unit. 38th Can Bn 109th Bn.		Age. 19.	Service. 33/12. 10/12. O.

Station and Date. 19/6/18.

Disease Nasal Obstruction.

To have Rx Col alk for nose tid.

Transferred from Epsom for S.M.R. Submucous Resection performed.
Nose now healed — Transfer to ~~Manks Horton~~ for convalescence and for disposal re hip wound.

A. Ballantyne Capt.

31-7-18 P.P.C.R.C. Hosp.
1339. Cooden Camp Bexhill

Princess Patricia Canadian Red Cross Hospital,
Cooden Camp, Bexhill,
31 JUL 1918

6/9/18 Good result of nasal operation, some scabs. Nasal douche B.I.D. L. Gebert

9.9.18. Scar 10" long right buttock, severe flesh wd. which apparently involved muscle deeply. Back strained at same time. Had massage for five weeks at Epsom no improvement. Is unable to walk as he cannot put weight on leg.

F. Phillips Capt

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

(23205) Wt.W 4234—M 627. 1,000,000. 8/16. C.F.&S. Forms/I. 1237/11.

P.T.O.

Station and Date.	

J.P.

R—122

Rank Pte Name PEARSON, John Reg'l No. 724257.

Unit 109th Bn. If in perm. Corps, What Unit? Married or Single Single.

Place and Date of Enlistment Lindsay. 2nd Sept.1915. Place of Birth Lindsay.Ont.

Name and Address, Next-of-Kin John Pearson.

Haliburton.Ont. Relationship Father.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

N/E, R.B. No. 8684.
F/Ib R.L.
Category can. ok.

Discharge, Date and Place Reason Character

H. W. & V., Ld.—7165-16.

Report. Date.	Report. From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Rank	Place.	Date.	REMARKS. Taken from Official Documents.
C		Arrived in England per H. M. T. 2810 31-7-16				
14.8.16	O.C. 109th	Admitted to Hospl	Convalescent		13.8.16	Pt. II DO 227 x C.L. 6 x
24.9.16	do	Dis from Connaught Hos	Bramshott		26-8-16	Pt II D.O. 268 x C.L. 29. Dlbm
4.12.16	do	SOS on tfr. to 38th Bn	Witley		4.12.16	Pt II DO 339
13.12.16	38th Bn	T-O-S on tfr from 109th Bmsht		Field	6.12.16	Pt II DO 2.142.
23.3.18	EOR.	Wounded		"	17-3-18	CL a.171 S.W.R Battrick
22.3.18	38th Bn.	Granted I.S.C. Badge	Pte	"	2.9-17	Pt II 23.
6.4-18	EOR Dep.	Posted from 38th Batt. France on adm. to G.M. Hosp. Colchester (W)	Pte	Seaford	31-3-18	" 94
						r 38th Bn Pt II 33 d/18.4-18
19-10-18	EORD	on Can. to ~~3rd CCD~~ 1st CCD.	Pte	Seaford	14-10-18	Pt II 262. d 1st CCD. Pt II 290 d/20-10-18
						Amd r Pt II 264 d/22-10-18

103 CHECKED
19 DEC.1916

Report. Date.	Report. From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Rank	Place.	Date.	REMARKS Taken from Official Documents.
17-11-18	1st CCD	Ceases attached	Pte	Witley	14-11-18	Pte 316. 2864/18-11-18 ACORD. Pte
9-12-18	EORD.	S.O.S. to C.E.F. Canada	"	"	7-12-18	— 304.

*Name Pearson J.M. Rank Pte. Regtl. No. 724257

Fyle Depot

Original unit 109th Present unit 28th M. or S. Age 21 Religion Ref. H.Q.

Port, ship, and date of arrival

Next of kin John James, Pearson, Haliburton, Ont.

Address on leave Halibutton Ont.

Address on discharge Lindsay, Ont.

Transportation issued Yes No Date Character on discharge

Previous occupation Labourer Date and place of enlistment 2-9-15 Lindsay

Diagnosis Med. Unfit Date of Medical Boards

Date.	Remarks	Pt. 2 Order No.
~~20-12-18~~	~~T.O.S. Cas. Co. #3 D.D. leave & subs 17-12-18 to 3-1-19~~	
9-1-19	T.O.S from Cas. Posted to Hos. Sec. Queens H.S. 21	
4-4-19	leave & subs. to 18-4-19	H.S. 98
11-4-19	Trans. from Hos. Sec. #3 D.D. to D.D. #2 Toronto H.S. 105	

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

(over)

Date.	Remarks.	Pt. 2 Order No.
	T.O.S. from D.D.#3 postedto Hos. Sec. (to be transferred	
	to D.D.#3 on completion of treatment)	#107
	D.D.#3 to D.O.H. 15-4-19-	H.S. 107
28-6-19	HOSP. SECT. TO CAS. CO PARK SCHOOL	H.S.179
14-7-19	S.O.S.Dis. Med.Unfit(183 days W.S.G.)	192
TEMPORY	(Vecs to be Disch in WD 2)	

M.F.W. 192
150M—6-18.
1772-39-1243.

L. L. Job 310—[illegible] & D. 6574.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

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

To Whom J. Pearson

Address Haliburton Ont

Rate $15.00 AUG 1 1916

By Whom Assigned Pearson J.

Regtl. No. 724257

Rank Pte

Corps 109 Bn

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				

CANADIAN
ASSIGNED PAY AUDITED
AUDIT CLERK
DATE 9/5/19

CONSOLIDATED ACCOUNT 3

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a.
50m.—4-16.
1772—39—819.

Sheet No. 2. J. Pearson

L. L. Job 310.—Reg. 6374.

Name of Soldier Pearson J. 724257 Pte 109th ~~106~~ Bn

$15.00

AUG 1 1916

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.		W 15484	15	
Sept.		Q 19778	15	
Oct.		Q 26561	15	
Nov.		Q 26691	15	
Dec.		I 33858	15	
Jan.	1917	U 40186	15	
Feb.		~~V 42087~~ 42088	~~15~~ 15	V 42087 Can
March		~~J 52168~~	~~15~~ 15	15 15 J. 52168 Cav. Mch 11/17 Cl. 16
April		~~H 3481~~ E 54432	~~15~~ 15	#3481 Cancelled 2000
May		W 10878	15	15 Ba
June		G 17600	15	Ba
July		H 24352	15	
Aug.		L 30960	15	
Sept.		Y 38538	15	6
Oct.		R 44391	15	
Nov.		V 50816	15	255 B.
Dec.		X 58451	15	
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

T 52206

15th

GD

MC

CANADIAN
ASSIGNED PAY AUDITED
OK
AUDIT CLERK
DATE 9/5/19

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.					
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.					

M.F.W. 44.
1133 (D.P. 250M-12-18.
1772-39-903.

CANADIAN EXPEDITIONARY FORCE.

LAST PAY CERTIFICATE

Regimental No. 724257 Rank Pte Name Pearson J M
(Surname first)

DISCHARGED

Unit No. 2 District Depot. who was*

On 14/7/19 191....., to

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1/7/19 to 14/7/19 191... the inclusive date of transfer or discharge.

	Dr.		Cr.	
Bal. Dr. or Cr. from prev. month 10				
Regimental Pay 14 days at $ 1 c				
Field Allowance 14 days at $ 1 c			15	40
Separation Allowance				
Clothing Allowance			35	—
Post Discharge Pay			70	—
*Other Credits				
Advances 145252	10	—		
Separation Allowance and Assigned Pay Cheque No.				
*Other Charges				
Balance on transfer or on discharge, cheque No. ~~145251~~ 145808	110	40		
Total	120	40	120	40

*Give particulars.

CREDITS, ADVANCES, Etc.

Credits, Advances, Forfeitures, Issues on Repayment, etc., since issue of this L.P.C. are to be entered hereunder:

Date	Place	Cheque No. A.R. No. or Other Particulars.	AMOUNT		Signature of Officer Making Payment.
			Dr.	Cr.	

Forms
I. 1237
10

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
1092	72425	Pte	Pearson	J
Year 1916	Unit. 10th Div. C.E.F.		Age. 18	Service. 7/12.

Station and Date. Disease Tonsilitis.

14.8.16. H.P.D.

2 days ago. shivering
headache (frontal)
~~tor~~ pain in back
no vomiting
next morning sore throat.

now complains of severe headache & throat.

C.O.A.

Both tonsils much inflamed + membranous exudate.
large & tender cervical glands.
Throat swabbing for ~~[illegible]~~ K.L.B. but probably only follic. tons.
Nothing else.

C. Symmers
Capt RAMC.

No. K. L. B. seen

19.8.16 Urine. S.G. 1018. Acid, albumin nil, sugar nil.
22nd Has had abdominal pain since throat got better at first in front, then over lower two ribs post^ly and for last two days only in right hypochondrium region. Is constipated. ~~Pil~~ Calomel & Saline alb. tonight

Fit for duty.

W. Lee Donald Capt RAMC

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

(J 3521.) Wt. W 5606—2621. 2,000,000. 7/15. D & S.

P.T.O.

Station and Date.	

ORIGINAL

TEMPORARY

Army Form B. 178

To be used (*a*) for recruits enlisting direct into the Regular Army, and (*b*) for men of the Territorial Force when they are admitted to Hospital. Army Form B. 178A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY OF

Surname Pearson, *Christian Name* Jos

TABLE 1.—General Table.

Birthplace { Parish ..... County .....

Examined { on ..... day of ..... 191 , at .....

Declared Age ..... years ..... days.

Trade or Occupation .....

Height ..... feet ..... inches

Weight ..... lbs.

Chest Measurement { Girth when fully Expanded ..... inches; Range of Expansion ..... inches

Physical Development .....

Vaccination Marks { Arm ..... RIGHT / LEFT; Number ..... / .....

When Vaccinated .....

Vision { R.E.—V= ..... L.E.—V= .....

(*a*) Marks indicating congenital peculiarities or previous disease—

.....

.....

(*b*) Slight defects but not sufficient to cause rejection—

.....

.....

Approved by .....

Rank .....

Medical Officer.

Enlisted { at ..... on ..... day of ..... 191...

	Corps	Regtl. No.
Joined on enlistment	109 C. S. T	72425
Transferred to		
	38th Bn.	

Became non-effective by .....

.....

on ..... day of ..... 191...

(*Signature*) .....

(*Rank*) .....

TABLE III.—Boards; Court ... ion, Inoculations, etc.; Exami ... oreign Service, Extension, Re-en ... ngation of Service; Issue of Surgical App ... rticulars of Dental Treatment, etc.

Date	Brief Details and Signature

TABLE IV.—Service Table.

Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation

TABLE II.—Only for admissions to Hospital or to the Sick List in case of Warrant Officers treated in quarters.

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
CONNAUGHT. ALDERSHOT.	14	8	16	26	8	16	Follicular tonsilitis	12	Had in convalescence pain after gall bladder	W. Lund Capt RAMC
East Suffolk & Ipswich Hospital IPSWICH.	31	3	18	15	4	18	S.W. Buttock R	15	16.3.18 Wounded by shell W. buttock 17.3.18 S.E. ground R. buttock Wound operated on. F.B. removed track secondary suture 28.3.18. W. of butt. pyogenic infection mild - sutures not disturbed On admission Wound discharging. It extends in curve, convex it towards downwards & post. part R. hip. Treated & verified Green 9.4.18 Good progress all along. Now no discharge & is almost entirely healed over	
Heathfields	15	4	18	30	4	18	"	15	Healed	H. Mearns Lane
Mt. Epson	30	4	18	19	6	18	do. Rheumatism	51	Suffered wd. r. buttock healed. Back sprained in same time. Has had massage treatment 10/8. Has Rheumatism & specialist recommends transfer to Radcliffe for research & opinion	V. A. Shaw. D. Moller Capt
WEST CLIFF CANADIAN EYE AND HOSPITAL, FOLKESTONE.	19	6	18.	31	7	18	Nasal Obstruction	43	Submucous resection performed with good result. Now unfitted. Transfer R.P.C.A.C. Hyd. Benfill for convalescence Cat. A for nose	[illegible] Capt. C.A.M.C. Adjt. & Registrar Officer Commanding WEST CLIFF CANADIAN EYE & EAR HOSPITAL, FOLKESTONE, KENT

724257 ORIGINAL 549961 P7

MEDICAL HISTORY SHEET.

1092 ORIGINAL

Surname Pearson Christian Name John

Examined on 29th day of August 1915 at Lindsay

Birthplace City or Town Lindsay Ontario County Ontario

Apparent age 18 years

Trade or occupation Labourer

Height 5 Feet 5 3/4 Inches.

Weight 141 Lbs.

Chest measurement Minimum 32 inches. Maximum expansion 35 1/2 inches.

Physical development Good

Small-Pox Marks None

Vaccination Marks Arm Right None Left Two Number Two

When Vaccinated last Sept 9th 1915

(a) Marks indicating congenital peculiarities or previous disease None

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

Approved by J. McCullock Capt. Medical Officer

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

Date	Fit or Unfit	Examined for Re-engagement,
14.10.18	Fit III	4 - APR 1918 C.H. Best Capt. M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date	Result	Vaccinations.
9/9/15	Good	J. McCullock Capt. M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
29/11/15	Good	H. H. Algie Maj. M.O.
9/12/15	Good	H. H. Algie Maj. M.O.
1 5 18 / 10 5 18	TAB	Hewarm M.O.

Enlisted on 29th day of September 1915 at Lindsay

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	Overseas Contingent 45th Victoria Regt.	724257		29.9.15
Transferred to.....	38th Bn.			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
Cooden	2.10.18	S to Hil R.	1 to C.
Cooden	2-10-18	S W. Hip Rt	Bill not + in sick [illegible]
		S.W. Hip	Discharged med. unfit. [illegible] Capt. 3rd Area S.M.B.

PRESIDENT, STANDING MEDICAL BOARD

Dominion Military Orthopaedic Hospital DO JUL 27 1919 Charles St. Toronto

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

M. F. B. 313.

50M—8-14.
H. Q. 1772—39—439.

CANADIAN

21976

Surname Pearce Christian Name John

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital.			Dates of Discharge from Hospital.			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.
		Day	Month	Year	Day	Month	Year				

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

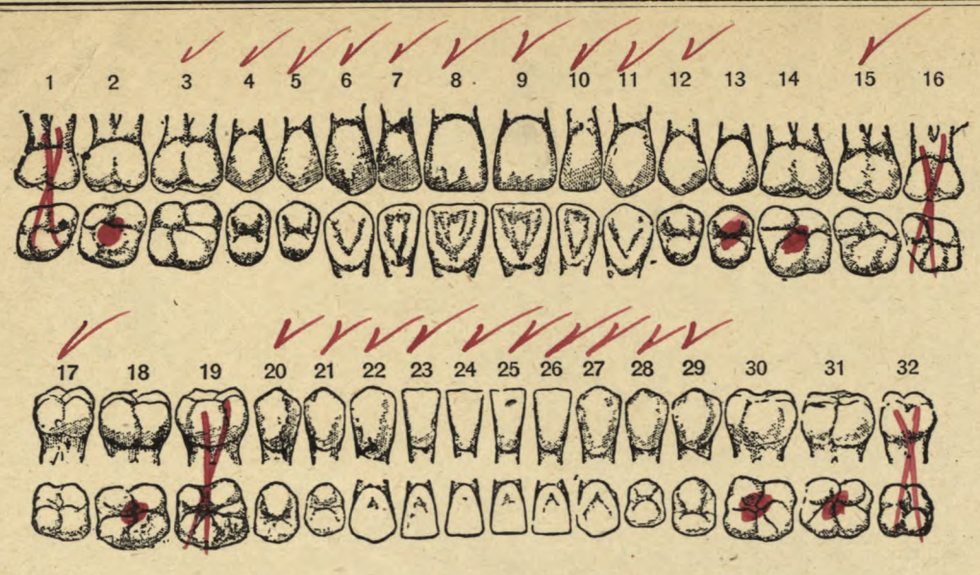
DISTRICT ...

NAME OF SOLDIER Pearson J. M.

RANK Pte.

No. 7.4.2.3.7

REGIMENT 38th



INSTRUCTIONS

1. On examination the condition of patient's mouth to be marked on diagram in red ink.
2. On first line of report record of same to be made in red ink.

Only such entries to be made on this sheet as will show:

1. Condition on examination (in red).
2. Condition on leaving Canada.
3. Condition on discharge.

	Date		Amalgam	Temporary Filling (a) G.P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhœa	Synthetic Porcelain	Extracting	DENTURES U	DENTURES L	DENTURES P	Gold Clasp	Gold Filling	CROWNS Gold	CROWNS Porcelain	Bridge Work	OPERATOR	Military District	REMARKS
Condition on first Examination																							
	April 30/19		Exam								Dentally fit												
	July 5/19		Final Board Exam																		D. O. H. Toronto		
					Failed to report for Exam																		
																					H. S. Thomson Major C.A.D.C.		Complete

M... 465. 2... 6-18. 17,... 39-950.

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

E.G.

1. No. #724257
2. Rank Pte.
3. Name PEARSON, John, Maurice
4. Unit 80thBn. (#2 D.D.)
5. Date of Discharge JUL 14 1919 Place TORONTO
6. Reason for Discharge "MEDICALLY UNFIT"
7. Authority (#2 D.D. Part 11 Daily Order #192)
8. Proposed Residence after Discharge Lindsay, Ont.

9. CERTIFICATE TO BE SIGNED BY SOLDIER.

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

J. M. Pearson

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place TORONTO

Date JUL 14 1919

Signature Lieut Thompson

(O. C. Discharging Unit.)

M.F.B. 218a—50M.-2-19 1772-39-113.

K.C.D.
9.12.19 ems

LIST OF DISCHARGE DOCUMENTS.

Attestation Paper, Triplicate	Militia Form W. 23
or Particulars of Recruit	Militia Form W. 133
Field Conduct Sheet	Militia Form W. 178 or A.F.B. 122
Casualty Form	Militia Form W. 54 or A.F.B. 103
Last Pay Certificate	Militia Form W. 44
Certificate that missing documents are unobtainable	
Medical History Sheet	Militia Form B. 313 or A.F.B. 178
Proceedings of Medical Board	M.F.B. 227, A.F.B. 179 or A.F.A. 45
Dental History Sheet	Militia Form B. 465
Medical Report	M. F. W. 129 or D. M. S. 1375
Regimental Conduct Sheet	Militia Form B. 263
Company Conduct Sheet	Militia Form B. 263a

Pte. Pearson J.M. #724257 Hon.Orth.Hosp. July 7th/1.

Condition when finally boarded for discharge

Sustained a flesh wound of right buttock. The wound was stitched a few hours after he was hit. He has not been operated since. He has been having massage & gymnasium treatment.

Objective :- Scar 8" long across right buttock- This causes some restriction of movement at hip joint, limb otherwise causes no trouble- It was purely a flesh wound. Patient walks with a moderate limp- but can walk a mile or so without inconvenience. Flexion of hip to 90°

Subjective :- Patient states that he has some pain in region of hip after walking a short distance. He also complains of pain and tiredness of back after walking or standing. Nothing found in back upon examination

Tonsillitis in 1916

WEST CLIFF CANADIAN EYE & EAR HOSPITAL.

FOLKESTONE. JULY 22nd 1918.

INF.
TO: ~~President Medical Board~~ Officer Commanding
P.P.C.L.I.R.C.M. ~~Camp Hospital~~ Camden Camp
Bexhill

NASAL OBSTRUCTION.

The marginally named man was transferred to this Hospital from Epsom suffering with nasal obstruction.

Sub-mucous resection has been performed, nose is now healed and we are transferring him to your Hospital for convalescence and disposal re hip wound.

Pte. Pearson.J.
No. 724257.
109th Battn.
58th Battn.

Cat A for nose — CLB

BAL/V 4.
22718.

N. Ballantyne Captain.C.A.M.C.
for O.C. West Cliff Canadian Eye & Ear Hospital.

CASE HISTORY SHEET.

Q.U.M.H. Hospital. Kingston, Station.

No. 724257 Rank Pte. Name Pearson, John, M. Age 20

Unit D.D. Completed years of service (Where and how long) 30/12 Overseas

Date of admission Jan. 9/19. Date of discharge April 11/19.

Diagnosis Ulcers of legs. Place of origin

CONDITION ON ADMISSION AND PROGRESS OF CASE 3 small ulcers on left leg and one abscess (small) on right leg near ankle. Duration one month. History of ulcers on legs in France for a period of 2 months. Wounded in right hip and has had some weakness in the hip since. Heart no P.S. Lungs - a few scattered rales in various situations which cleared up on coughing Man has a cold at present. Wassermann - negative. X Ray report shows:- Nothing abnormal visible.

FAMILY HISTORY Negative.
(Tuberculosis, mental or nervous diseases.)

TREATMENT Lotio Rubra applied on compresses to ulcers. Abscess incised & carbolic & alcohol applied to edges.
(Especially any specific or special form.)

CONDITION ON DISCHARGE, Ulcers healed. Requires a special splint for which he will be transferred to Toronto.
(and disposal made of case.)

Date April 11/19.

Stevenson Capt. A.M.C.
Medical Officer i/c case.

M. F. B. 313a.
100M.—6-18.
1772—39-439.

THIS FORM WILL BE USED FOR ALL RANKS

MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" issued by the B.P.C. and instructions issued by Militia H.Q., Ottawa, will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of Sections 4 to 15 of this Form and will obtain the signature of the invalid to the "Statement," page 3. The President of the Board of Medical Officers is responsible for the proper completion of sections reserved for recording the "Opinion of the Medical Board."
3. In answering the questions, Medical Officers will carefully obtain and record the invalid's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the invalid concerned, from witnesses, or from documents, Regimental or otherwise.
4. Special care is required in answering question 9. Read the questions carefully. All questions must be answered.
5. If space provided under any section is insufficient add another sheet. Such sheets must be initialled by the Medical Board.
6. A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board."
7. Under no circumstances may information other than that in sections 7, 8, 9 and 10 be communicated to the invalid, directly or indirectly.
8. The nomenclature of diseases must be followed, if possible, as described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London (1915), by Messrs. Harrison & Sons.

D.O.H STATION Toronto DATE July 7th 1919

1. 1 (a) Unit ~~38th~~ D.O.#2 (b) Regimental No. 724257 (c) Rank PTE

(d) Surname PEARSON (e) Christian name JOHN. M.

(f) Home address Haliburton Ontario

(g) Next of Kin John James Pearson (h) Relationship Father

(i) Address of Next of Kin Haliburton Ontario

2. Age last birthday nineteen Date of birth Aug 9th 1899

3. Enlistment, or Appointment (if an Officer) (a) Place Lindsay, Ont (b) Date Sept 2nd 1915

4. Personal description:

(a) Height 5'-5-3/4" (b) Weight 141 (stripped) (c) Complexion medium

(d) Colour of hair Dark (e) Colour of eyes Blue (f) Identification marks, Scars, etc. 1 vaccination mark left arm

5. Former trade or occupation Laborer

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).	Years	Days
	3.	297.

	Periods From	Periods To
Canada	2-9-15 — 8-12-18	24-7-16 — Date
England	24-7-16 — 1-4-18	2-12-16 — 8-12-18
France or other theatres of War ~~England & Canada~~	2-12-16	1-4-18

7. Original disease, or injury G.S.W. - Rt Buttock

(a) Date of origin Jan 16/18 (b) Place of origin Lens.

(c) Cause Shrapnel

M. F. B. 227.

400M—11-18.
1772-39-117.

8. Present disability— (Here state the exact nature of the disability resulting from the disabling conditions: e.g. (a) Weakness—slight, moderate, marked, etc; (b) Loss, complete or partial, of an organ or member, or of its functions; (c) Necessity for rest of the body, or of some of its parts, for therapeutic reasons; (d) Any other restrictions in choice of occupation.)

Partial loss of function of right ~~hip~~ thigh due to wound of buttock, preventing full movement at hip.

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

Objective ~~Wound~~ Scar 8" long across right buttock. This causes some restriction of movement at hip joint but otherwise causes no trouble. It was merely a flesh wound. Patient walks with a slight limp but can walk a mile or so without inconvenience. Flexion of hip to 90°.

Subjective Patient states he has some pain in region of hip after walking a short distance. He also complains of pain and tiredness of back after walking or standing. Nothing found on back upon examination.

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

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

Special Senses: ~~No~~ Error of refraction. See Optometrist report attached — Respiratory System: No — Integumentary System: No

Disturbances of Mentality: No — Digestive System: No — Muscular System: No

Osseous and Joint Systems: No — Any other general condition: No

Urine normal

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

Sustained a flesh wound of right buttock. The wound was stitched a few hours after he was hit. He has not been operated upon since. He has been having massage and gymnasium treatment

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

Tonsilitis in 1916.

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

nil

11.—(*a*) Did the disabling condition have its origin before enlistment? no

(*b*) If so, has it been aggravated by Service? (If aggravated, give a description, as far as it is possible to do so, of the disabling condition at time of enlistment.)

not applic.

12. Was the disability caused, or aggravated; (*a*) by intemperance, or improper conduct; or (*b*) 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? 6 mos.

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

France 15 days
England 5 mos.
Canada 6 mos.

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

16. Can the former trade or occupation be resumed? no, on account of condition as in Section 9. Especially shock condition.
(If not, briefly state why)

17. Recommendations. Discharge from army as medically unfit.

W B Gordon Capt
Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

(Sections 7, 8, 9 and 10 are to be read to the invalid and either "satisfied" or "not satisfied" struck out).

I, the undersigned J M Pearson 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. Pearson Rank.
Signature of invalid examined.

OPINION OF THE MEDICAL BOARD

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

We concur

19. Is ~~the~~ invalid fit for

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

20. It is certified that the invalid

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

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

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

We recommend that he be discharged "Having been found medically unfit for service."

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

Canadian Military Convalescent Hospital DDO July 1919 JUL 23 1919 Fort Frederick

PLACE ..... President.

DATE ..... Members

TO BE COMPLETED WHEN TREATMENT IS REFUSED

I, the undersigned ..... understand the nature of the treatment which it is recommended that I should undergo and refuse to accept it.

Witness ..... Signed .....

Should the refusal of the invalid to accept treatment appear to be unreasonable, or should he decline to sign this statement the Board of medical officers should so state.

President.

PLACE ..... Members

DATE .....

APPROVED BY ..... *Assistant Director of Medical Services.*

DATE 11-7-19

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

DATE .....

MEDICAL CASE SHEET (OPHTHALMOLOGY)

MILITARY WARDS
TORONTO GENERAL HOSPITAL

MILITARY HOSPITAL Eye Clinic

DATE June 20th 1918

NAME Pearson J M RANK Pte NUMBER — UNIT Dov. AGE 20

HISTORY For past 3 weeks.

SYMPTOMS Both eyes sore especially O D

GLASSES WORN no

OBJECTIVE EXAMINATION

EXTERNAL APPEARANCE

OD 

Conjunctival vascular injection and scaly blepharitis

OS 

Same as above but less marked.

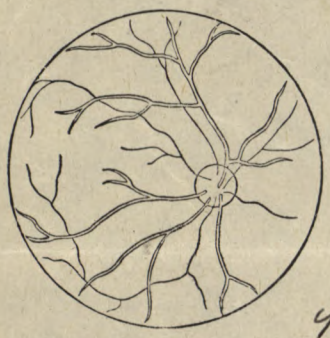
RETINOSCOPY AND OPHTHALMOMETER

OD +2.25 / +3 +1.25 - +75 x 90 6/6

OS +2.75 / +3. +1.25 - +75 x 90 6/6

OPHTHALMOMOSCOPE

FUNDUS	LENS	CORNEA



FIELDS

Diagnosis — Blepharo conjunct. + Hyperm with astigmatism.

Duration — Conjunctivitis 3 weeks. Hyperm for years.

Probability — nil

MUSCLE BALANCE Dist D Reversed No TENSION

Accom Reversed.

to return for post mydriatic test Monday.

SUBJECTIVE EXAMINATION

TRIAL CASE

		BEFORE	SPH.	CYL.	AX.		AFTER
OD	V	6/6				V	
OS	V	6/6				V	

P.P. P.R. A. ACC. PRESBYOPIA

GLASSES PRESCRIBED

OD Glasses D

OS

TREATMENT:—

J P Rykowski
Ophthalmic Surgeon
Military Wards
T. G. H.

M. F. W. 144
20M.—8-18.
1172-39-1173.

CLINICAL CHART.

(To be attached to Case Sheet.)

Army Form B. 181.

Corps 38th Bn 109th Bn Military Hospital

No. 724257 Rank and Name Pte Pearson J. Age 19 Service 3 3/12 1 1/12

Disease Nasal Obstruction Date of admission 19/6/18. Date of discharge Result

Dates of Observation	19/June.	20.	21	22	23.			5	6.	7.	8	9.	10	16	17.	19.
Days of Disease								July								
Temperature Fahrenheit																
Pulse per Minute		76	100	96	100	92	64		72	80	86	100	60	88	80.	100	92	94	76	96.	80	80.
Respirations per Minute		18.	20	20	20	20	20		24	20. 18.		16.	16	20.	20.	20	20	—	26.	18	18.
Motions per 24 hours		Castor oil m.s.						Nat.			Calomel m.s.			Cascara	Cascara		Castor oil m.s.	

Operation

Complaining freely

Cascara

(3253) W7204—1542. 750,000. 8/15. McA. & W. Ltd. Forms/B. 181/3.

Signature _____ In charge of case.

Report No. 210

Army Form W. 3212.
(In books of 100.)

724257

Regtl. No., Rank and Name Pearson J. Age 20 Corps 38th Bn

Disease Hospital Borden Camp

To Officer i/c Laboratory. Ward K. Bed 137

Please carry out an examination of the accompanying specimen of Urine

with special regard to

Nos. of previous Reports (if any)

In Pathological Reports a résumé of clinical history, treatment or progress since last report should be given.

Date 18/9/18

H J Porter Capt
O. i/c Ward.

LABORATORY REPORT.

Color = Pale & Clear
S.G. = 1012
Litmus = alk.
Albumen = Neg
Sugar = Neg.
20/9/18

Geo Fennell
Capt

Report No. _____ Army Form W. 3212

(In books of 100.)

Regt. No., Rank and Name _____ Age _____ Corps _____

Disease _____ Hospital _____

To Officer in Laboratory _____ Ward _____

I have carry out an examination of the accompanying specimen of _____

with special regard to _____

No. of previous Reports (if any) _____

In Pathological Reports a return of clinical history, treatment or progress since last report should be given.

Date _____

O. i/c _____ Ward _____

LABORATORY REPORT.

DENTAL CERTIFICATE

Regt. No. 724207. Rank Pte. Name Pearson. J. Unit 38th Batt.

Date of Examination	Present Dental Condition	In case of loss or decay of teeth is the loss due to wounds, injury or disease directly attributed to active service
18/4/18.	3 fillings required	NO.

Has he ever declined Dental Treatment	Recommendation
NO.	Completion in England or Canada

E.H. Herring ..... Capt C.D.S.

20

P.697-25M.
3989-31-19-17.

38th Bn

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS.

724257. Pte Jearson J

Date of Payment.	No. of Acq. Roll	AMOUNT Francs	£	S.	$	¢	Place of Payment.	Name of Paymaster.	Remarks.
15/9/17	984	15					Field	RBO's	
2/10/17	1195	25					"	"	
18/10/17	224	20					"	J Riley	
4/11/17	370	25					"	"	
22/11/17	1432	70					"	RBO's	
4/12/17	1509	25					"	"	
6/12/17	1535	30					"	"	
6/12/17	538/11/5/14		20				"	"	
		210							

AUDITOR | PAYMASTER

M. OR S. S.

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

REGT. No. 724257 RANK PTE NAME (IN FULL) PEARSON. J. M. (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN | RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? No. | DATE EFFECTIVE

TO WHOM PAID | RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F. 28 Bn | IF IN P.F. WHAT UNIT? P.O. Lindsay, Ont.

PLACE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

DATE OF ATTESTATION 2/9/15 | TRANSFERRED TO | DATE | AUTHORITY

ASSIGNED PAY $ 15.00 | DATE EFFECTIVE 1/4/19

PAYABLE TO Mrs J. Pearson | RELATIONSHIP | ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS Haliburton Ont.

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE

DISCHARGED | PLACE Toronto | DATE 14/7/19 | REASON Mu | AUTHORITY DO 192 | IF ENTITLED TO POST DISCHARGE PAY 183

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	C.	$	C.	TOTAL CREDITS $	C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	DATE	COL. NO. 2 NO.	DATE	COL. NO. 3 NO.	DATE	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.	$	C.	TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT																																					
Apl 12	19	1.10	20	90	18	40			39	30			139131										15	-							15	-			24	30	TOS from #3 DD 1/4 DO 107.
May	31	1.10	34	10			24	30	58	40			140688		141616						43	40	15	-							58	40					18 40 O.D.R.
June	30	1.10	33	-					33	-			142772		143519		144188	10			8	-	15	-							33	-					1st Payment, War Service Gratuity
July	14	1.10	15	40	35	-					84 1072		145252					10	-																		
					70	-			120	40							145608				110	40									120	40					
					W.S.G.																						W.S.G.						AMOUNT DUE SOLDIER DEPENDENT			
183 Dys					420	00			420	00							July 14										70	00			70	00	350	00			
																	OR 101 July 31										70				140		280				
																	OR 133 Sept 9										70				210		210				
																	OR 159 Oct 9										70				280		140				
																	OR 185 Nov 10										70				350		70				
																	210 Dec 9										70	-			420						W.S.G. PAID IN FULL
					420				420	-																	420	-			420	-					

W.S.G. PAID IN FULL

FOR PAYMASTER WAR SERVICE GRATUITY

100M-1-19.—L. L. 53962-M. & D. 9723.
M. F. W. 2596.
1772-39-1390.

Military Convalescent Hospital,
Woodcote Park Epsom. Surrey.

Division 1/B Hut 23 B. 6 1918

CASES FOR EXAMINATION AND REPORT BY:-

{OPHTHALMIC SURGEON.
{AURAL SURGEON.

AT COUNTY OF LONDON WAR HOSPITAL, HORTON, ELSON.

Reg.No. 72457 Rank and Name Pte Pearson J.

Complains of for nasal boy an please

D. P. Miller Captain
C.A.M.C.

QUESTIONS	ANSWERS BY {OPHTHALMIC SURGEON. {AURAL SURGEON.
(1) Does he need Hospital treatment?	(1) Yes.
(2) Will he be fit for Overseas?	(2) Yes so far as nose is concerned.
(a) With glasses.	(a)
(b) With treatment.	Submucous resection of septum.
(c) Is any prescription given for glasses?	
(3) Is condition due to service	not so caused
(4) Or aggravated by service	aggravated by.
(5) Prognosis	

REMARKS

Rhinitis. small anterior ulcer septum due to nasal obstruction

Alexander Seale

Signature of M.O. examining case

AUDITOR | PAYMASTER

M. OR S.

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

REGT. No. 42254 RANK Pte NAME (IN FULL) Pearson J. (BLOCK LETTERS, SURNAME FIRST)

NEXT OF KIN | RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? NO | DATE EFFECTIVE

TO WHOM PAID | RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F. 28 Bn | IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION # 2 D.D. | TRANSFERRED TO | DATE 11-4-19 | AUTHORITY D.O. 105

DATE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

ASSIGNED PAY, $ 15 44/100 | DATE EFFECTIVE

PAYABLE TO Mrs. J. Pearson | RELATIONSHIP

ADDRESS Haliburton Ont

ANY CHANGE IN ASSIGNEE OR ADDRESS

P-278

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE

DISCHARGED | PLACE | DATE | REASON | AUTHORITY | IF ENTITLED TO POST DISCHARGE PAY

	MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.	OTHER CREDITS $	OTHER CREDITS C.			TOTAL CREDITS $	TOTAL CREDITS C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	DATE	COL. NO. 2 NO.	DATE	COL. NO. 3 NO.	DATE	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.			TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.	PARTICULARS OR REMARKS
Balance from previous account	30/11/18							36	42	36	42																									36	42	
1/12/18	1/1/19	62	1.10	68	20	14	65	36	42	119	84							40		64	84			15								119	84					Do 2nd. #451 #2043. #2204
	Feby	28	1.10	30	80					30	80							5	-	10	80			15	-							30	80					#3933. #5035 #7240.
	March.	31	1.10	34	10					34	10							19	10					15								34	10					92 85
	April	11	"	12	10	12	-			24	10																									24	10	20 98 Subs 15 days to 18/4/19
																												5	60			5	60			18	50	6 1/2 7 days subs Trans 11/4/19

OK

MONTH	PAY AND F. A.				OTHER CREDITS				TOTAL CREDITS		ACQUITTANCE ROLLS						CASH PAYMENTS						ASSIGNED PAY		REGI-MENTAL CHARGES		OTHER CHARGES				TOTAL DEBITS		BALANCE				PARTICULARS OR REMARKS
	NO. OF DAYS	RATE	AMOUNT								COL. NO. 1		COL. NO. 2		COL. NO. 3		COL. NO. 1		COL. NO. 2		COL. NO. 3												DEBIT		CREDIT		
			$	C.	$	C.	$	C.	$	C.	NO.	DATE	NO.	DATE	NO.	DATE	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

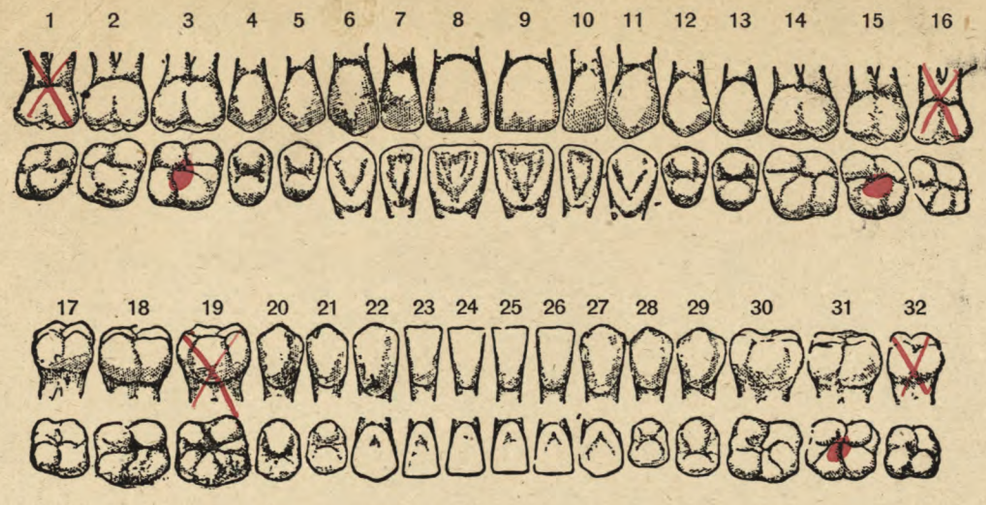
DISTRICT 3.

NAME OF SOLDIER Pte. J. M. D.D.

RANK Pte.

REGIMENT

No. 724257



INSTRUCTIONS

1. On examination the condition of patient's mouth to be marked on diagram in red ink.
2. On first line of report record of same to be made in red ink.

Only such entries to be made on this sheet as will show:

1. Condition on examination (in red).
2. Condition on leaving Canada.
3. Condition on discharge.

	Date	Amalgam	Temporary Filling (a) G.P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhœa	Synthetic Porcelain	Extracting	DENTURES U	DENTURES L	DENTURES P	Gold Clasp	Gold Filling	CROWNS Gold	CROWNS Porcelain	Bridge Work	OPERATOR	Military District	REMARKS
Condition on first Examination	1919																					
	Jan 6.	3/31 5, 31									4/11 6, 19,	32								A. Chambers Capt.	3	4 Cav # 2, 12, 18, 30.
		4/2, 12, 18, 30					1/12													F.J. Beckely	3	~~Incomplete.~~ Complete

District Depot
Hospital Section

June 25/19. Final Board Exam. D.A.H. Fronts

Failed to report for Board Examination

H.J. Thomson
Major
Pr. R.A.M.C.

3-12-30 8

M.D.B. 465
200m.—6-18.
1772-39-950.

Forms
I. 1237
12

Army Form I. 1237.

No. 1 Division.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	72457	Pte	Pearson	J
Year	Unit.		Age.	Service.
	28th Bn		19	5 yrs

Station and Date.

Disease GSW. Rt Buttock Flesh

1 MAY 1918

Convalescent Hospital, Woodcote Park, Epsom.

Severe flesh wd. r. buttock – just healed. Back sprained at same time. Marked no duty.

12.5.18 Imp slowly. Co.

23.5.18 Imp slowly no healing Co.

30 MAY 1918 Healed under sent. Imp cont.

6.6.18 Improving

13.6.18 Discharged Hospital R. G.

16.6.18 Ear report

(1) Does disease Hospital treatment — Yes

(2) Will be fit for overseas — Yes (after ear treatment)

(3) Is condition caused by active Service — No

(4) Aggravated by active Service — Yes

(5) Prognosis, Rhinitis, small anterior ~~[illegible]~~ ulcer septum due to nasal obstruction.

Transfer to Westcliff Hosp.

[illegible] C/A

H. Clearlow Capt. C.A.M.C.,
No. 1 Division.

[illegible] 9/12/15 (2)

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

(44502) Wt. W 11298—M 1159. 1,150,000. 6/12 18. G.F.& S. Forms/1. 1237/12. (E239)

Station and Date.	

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment Aug 1/16

RATE OF SEPARATION ALLOWANCE

P 002777

RATE OF ASSIGNMENT

15			

PARTICULARS OF SEPARATION ALLOWANCE

No. 72425-7

Rank Pte Promoted Reverted Discharge

Soldier's Name J. Pearson

Battalion 189 Battn.

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name J. Pearson

Address J. Haliburton. Ont.

Change of Address

1

2

3

4

014336 J. 22

Date 1917	Cheque No.	Amount S/A	Amount A/P	Total		REMARKS
Dec 31	—		255	255		MRS 45618 Rend to destroy 19.12.18
Jan 1918	W 68944		15	15		
Feb 18	Q 73249		15	15		
Mar 18	P 95903		15 ✓	15	✓	
Apr 18	P 11565		15 ✓	15	✓	
May 18	U 14388		15	15	✓	
June 18	O 27302		15	15	✓	
July	J 29332		15	15	✓	
Aug	Q 36143		15	15	✓	
Sept	E 37485		15	15		
Oct	C 44253		15	15	✓	
Nov	G 59371		15	15	✓	
Dec	9 63886		15	15	✓	
			435	435		

A/c Closed 31.12.18

Ret'd per Olympia

Mdo. 3

Date 14.12.18

Clerk G. Whitelaw

CANADIAN ASSIGNED PAY AUDITED

AUDIT CLERK

DATE 9/1/19

A STENCIL HAS BEEN MADE FOR THIS ACCOUNT

M. F. W. 128
400M.—6-17—1772-39-141
L. L. 22520—M. & D. 1493.

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

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

M. F. W. 128
400M.—6-17—1772-39-1141
L. L. 22320—M. & D. 7993.

CASE HISTORY SHEET.

D.O.H. Hospital. Toronto Station.

No. Rank Name Age

Unit Completed years of service (Where and how long)

Date of admission Date of discharge

Diagnosis Place of origin

CONDITION ON ADMISSION AND PROGRESS OF CASE

May 13th Gymnasium treatment. getting results.

May 23rd Two weeks further treatment suggested. Leg doing well.

May 29/19 Strength of limb improving Carry on with gym. and work shops.

9/6/19 Still walks with a marked limp. To carry on for a couple of weeks in gym. NBH. NBH.

17/6/19 Good movement at hip. Can walk well without stick Ready for discharge. NBH. Concurred PH M

FAMILY HISTORY (Tuberculosis, mental or nervous diseases)

Pte. Pearson J.M. #724257 Hon.Orth.Hosp. July 7th/19

Condition when finally boarded for discharge

Sustained a flesh wound of right buttock. The wound was stitched a few hours after he was hit. He has not been operated since. He has been having massage & gymnasium treatment.

TREATMENT (Especially in Medical Cases)

Objective :- Scar 8" long across right buttock- This causes some restriction of movement at hip joint, limb otherwise causes no trouble- It was purely a flesh wound. Patient walks with a moderate limp- but can walk a mile or so without inconvenience. Flexion of hip to 90°

Subjective :- Patient states that he has some pain in region of hip after walking a short distance. He also complains of pain and tiredness of back after walking or standing. Nothing found in back upon examination

CONDITION ON DISCHARGE (and disposal made of case.)

Tonsillitis in 1916

Date Medical Officer i/c case.

M. F. B. 313a.
10'm.—6-18.
1772—39-18.

B22007

CASE HISTORY SHEET.

D. O. H. Hospital. Toronto Station.

No. ..... Rank ..... Name ..... Age .....

Unit ..... Completed years of service (Where and how long) .....

Date of admission ..... Date of discharge .....

Diagnosis ..... Place of origin .....

CONDITION ON ADMISSION AND PROGRESS OF CASE

May 13th Gymnasium treatment. getting results.

May 23rd Two weeks further treatment

May 29/19 Strength of trunk improving. Carry on with gym and work-shops.

9/6/19 Still walks with a marked limp. To carry on for a couple of weeks in gym.

17/6/19 Good movement at hips. Can walk well without stick. Ready for discharge.

(Especially any specific or special form)

CONDITION ON DISCHARGE

(and disposal made of case.)

Date .....

Medical Officer i/c case.

M. F. B. 313a.
100M.—6-18.
1772—39-439.

CASE HISTORY SHEET.

Dominion Orthopaedic Hospital. Christie St., Toronto Station.

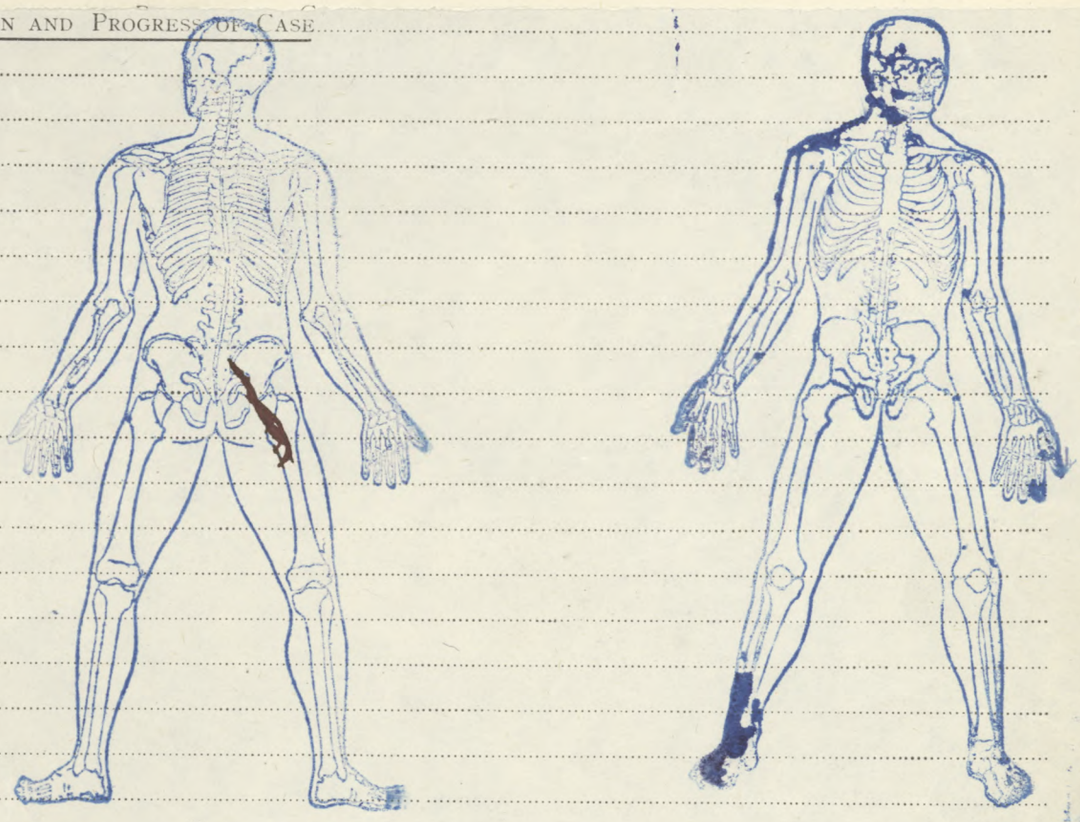
No. 724257 Rank Pte. Name Pearson, J. M. Age 19

Unit D. D. #2 Completed years of service (Where and how long) F. 16/12 E. 14/12 C. 15/12

Date of admission 15-4-19 Date of discharge 10-7-19

Diagnosis G.S.W. R. Thigh Place of origin Lens, 16-3-18

CONDITION ON ADMISSION AND PROGRESS OF CASE



April 16/19 Healed wound posterior aspect right buttock Scar 10" x 1"

X. Ray ordered.

April 23rd Improving

April 30th Improving

FAMILY HISTORY

(Tuberculosis, mental or nervous diseases.)

TREATMENT

(Especially any specific or special form.)

CONDITION ON DISCHARGE

(and disposal made of case.)

May 6th Learning Printing trade.

Date

Medical Officer i/c case.

Capt

M. F. B. 515a.
100M.—6 18.
1772—39 4.59.

SHEET

NUH Hospital. Christie St Station.

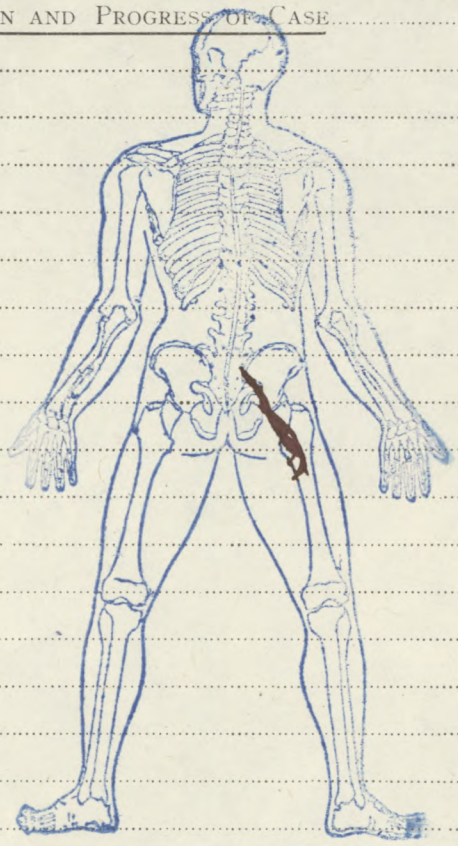
No. 724257 Rank Pte Name Pearson J. M. Age 19

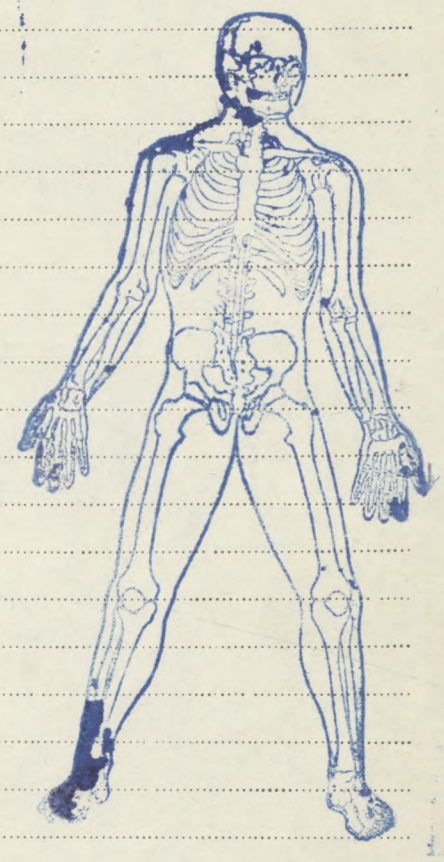
Unit R.R. #2 Completed years of service (Where and how long)

Date of admission Date of discharge

Diagnosis G.S.W. Right Thigh Place of origin Lens 16/3/18

CONDITION ON ADMISSION AND PROGRESS OF CASE





April 16/19 Healed wound posterior aspect right buttock

Scar 10" x 1"

X. Ray ordered.

FAMILY HISTORY

(Tuberculosis, mental or nervous diseases.)

TREATMENT

(Especially any specific or special form.)

April 23rd Improving

April 30th Improving

CONDITION ON DISCHARGE

(and disposal made of case.)

May 6th Learning Printing trade.

Date

Medical Officer i/c case.

Capt

M. F. B. 513a.
100M.—6 18.
1772—39 459.