

D. Coy.

No. 726044

Folio.

ATTESTATION PAPER.

109th OVERSEAS BATTALION, C. E. F.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

TRIPPLICATE

INVALIDATED TO CANADA FOR FURTHER MEDICAL TREATMENT
MAN
CANADIAN MILITARY HOSPITAL, REPRESENTATIVE, KINGSTON, ONT.
caph

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? *Smith*
- 1a. What are your Christian names? *John Richard*
- 1b. What is your present address? *Kinmount Ont.*
2. In what Town, Township or Parish, and in what Country were you born? *Sommerville Township.*
3. What is the name of your next-of-kin? *Mrs. Harold Smith.*
4. What is the address of your next-of-kin? *Kinmount Ont.*
- 4a. What is the relationship of your next-of-kin? *Mother*
5. What is the date of your birth? *15-Sept. 1882*
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? *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 Richard Smith*, 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 *Dec. 30* 191*5*. *John R. Smith* (Signature of Recruit)
Rev. J. Downey (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *John Richard Smith*, 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 *Dec. 30* 191*5*. *John R. Smith* (Signature of Recruit)
Rev. J. Downey (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 *Kinmount* this *18th* day of *January* 191*6*
E. H. White (Signature of Justice)

Description of John Richard Smith Enlistment.

Apparent Age 33 years 3 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Distinctive marks, and marks indicating congenital peculiarities or previous disease.
(Should the Medical Officer be of opinion that the recruit has served before, he will, unless the man acknowledges to any previous service, attach a slip to that effect, for the information of the Approving Officer.)

Height 5 ft. 7 ins.

Chest measurement { Girth when fully expanded 34 ins.
 Range of expansion 2 ins.

Complexion Dark

Eyes Brown

Hair Black

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

scar on right jaw.

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 Dec. 30 1911 ✓

Place Lindsay

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

*Insert here "fit" or "unfit."

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

CERTIFICATE OF OFFICER COMMANDING UNIT.

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

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

Date JAN 26 1916 1916



R. O. No.

H. Q. No.

DISCHARGE DOCUMENTS



Name *Smith, John, Richard*

Regt. No. *726044* Rank *Pte.*

Corps *C.O.R.D. Form 109th Bn. 21st Bn.*

Physically unfit.

Disced 30-11-52

29356



*40-26
15-26
6, 26*

Wally

Proceedings of Court of Inquiry or on men reported Missing on Active Service.....

Attestation Papers..... *12*

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet.....

Compulsory Stoppages.....

Casualty Forms..... *1*

Proceedings on discharge..... *2*

Corps History Sheet.....

Date and No. of Deposit Receipt for Purchase Money and Amount.....

Parchment Certificate.....

Medical Report for Invalids..... *1*

Medical History Sheet..... *1*

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet.....

Clothing Transfer Certificate.....

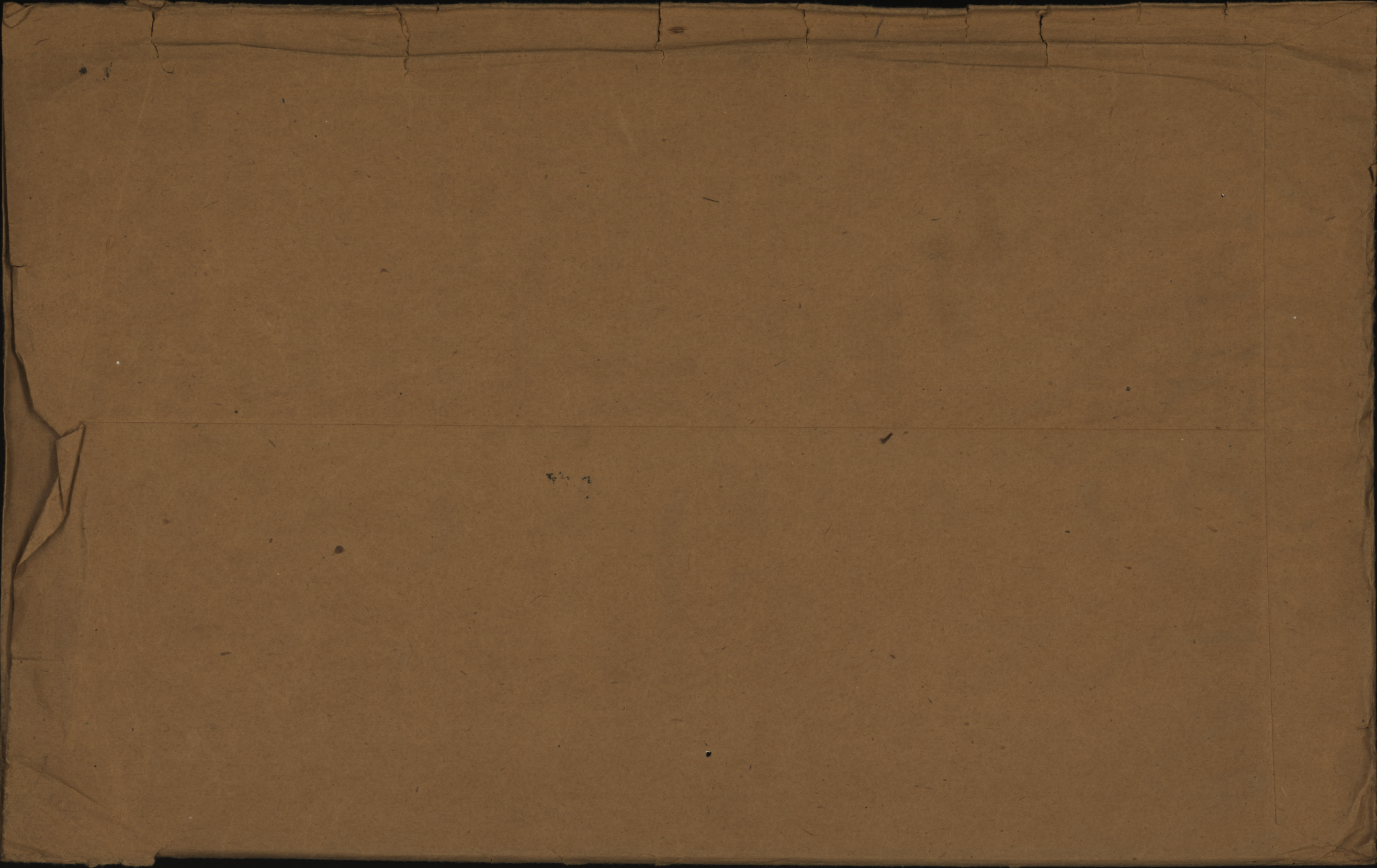
Inventory of Kit.....

Last Pay Certificate..... *1*

A. J. B. 122-1

M 71060 - 1

casca
1-149
R 122



NAME

Smith John Richard

RANK AND CORPS

Pvt 71st Bn.

REG'T L NO

736 Otht.

H. Q. FILE NO. 649-

FOLLOWS

No.

FOLLOWS

CABLE

No.

DATE

NATURE OF CASUALTY

M3863

9-5-17

Can. Mil. Hosp. Hastings
Pulmonary Tuberculosis.

W.S.M.

M3960

14-5-17

Slightly improved

W.S.M.

F353

17-5-17

Sailed from Liverpool for
Canada per U.S. "Leticia" on
May 13th 1917
Tuberculosis

SURNAME.

Smith,

649-S-12722.

CARD NO.

over

CHRISTIAN NAMES

John Richard

S. O. S. Dis/ 31-8-17-3
FOLL.

REGL. NO.

726044

RANK

Pte.

UNIT

109th

Batt.

FORMER CORPS

Nil.

NEXT OF KIN.

NAMES IN FULL

Smith Mrs Harold

RELATIONSHIP TO SOLDIER

Mother.

ADDRESS

Kinmount, Ont.

CHANGE OF ADDRESS

COUNTRY OF BIRTH

Canada, Somerville, Ont.

DATE

Sept. 15th 1882.

PLACE OF ATTESTATION

Kinmount, Ont.

DATE

Jan. 18th 1916

L. L. 90589.—M. & D. 6312.

Sailed from Halifax per

S. S. Olympic 23-7-16

R/B. 22-5-17.

M. F. W. 22. 100m.—1-16. H. Q. 1772-39-839.

Returned to Canada ● Pn S. S. "Petitia" 13/5/14
Aust. J. 330

MARRIED

SINGLE

Yes.

WIDOWER

TRADE OR CALLING

Labourer.

RELIGION

C. of E.

DESCRIPTION.

APPARENT AGE

23

YEARS

3

MONTHS

HEIGHT

5

FEET

7

INCHES

CHEST MEASUREMENT

34

INCHES

EXPANSION

2

INCHES

COMPLEXION

Dark.

EYES

Brown.

HAIR

Black.

DISTINGUISHING MARKS

Scar on right jaw.

MEDICAL EXAMINATION.

PLACE

Lindsay, Ont.

DATE

Dec. 30th, 1915.

6m
C-211
Number

726044

Rank

PT

Surname

SMITH

Christian Name

John Richard

Units

21st (Inf)

Theatre of War

France ~~B~~

Date of Service

6-10-16

Remarks

Latest Address

Kinmount
Oxt

"B"
Page 12771.
Roll No.

200-2-21.M.

DESP. MAY 4 1922

YJ 30810

No. 726044 RANK

Pte

NAME

Smith. J. P.

T. O. S. 23-12-15. UNIT

109th. Battalion

D. O. B. 4. 23-12-15.

M. D. 13

PAID		SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
FROM	TO		PARTICULARS	AUTHORITY
1915	1915			
Dec 23	Dec 31	✓		
1916	Jan. 1916	✓		
	Feb.	✓		
	Mar.	✓		
	April	✓		
	May	✓		
	June	✓		
	July	✓		

UNIT SAILED
JUL 23 1916



LEDGER No. _____

SERIAL No. _____

REG. No. 726 044

NAME Smith J.R.

RANK Pvt

CORPS 21

AGE 34

SERVICE —

HOSPITALS

DATE OF ADMISSION

1

W. Wood Memorial

Kingston

5-6-17

2

3

DIAGNOSIS T.B.

TRANSFERRED TO _____

DISPOSITION 31. 8. 17 Invalid

CATEGORY _____

M.F.W. 2553.

1126-D.P.-50M-12-18.

1772-39-1332.

P.T.O.

Surname *Smith* Christian Name or Names *J. R.* Reg. No. *726044*
 Rank *Re* Unit *21 Bn* Co. Troop Batty

Hospital *6 Can Fld Amb.* Date of Admission *16.3.17*
Transferred to Red Cross Hospide Touquet Hosp. 31.3.17
Moore Sts Hosp. Shorncliffe (Can) Hosp. 7.4.17
Margate. Waulead, Red X Hosp. 5.4.17
Can. Mil Hosp. Hastings Hosp. 14.4.17

Diagnosis *P. M. O. not ent*
 (1) Later Diagnosis (if changed) *T. B. Pulmonary Rv.*
 (2)
 (3)

Additional Diagnosis: if more than one state present

A.M.D. 2 Dept.
 Beh. of D.Q.M.S. O.M.F.C. London

DISPOSITION

Date *Dis 11-5-17*

REMARKS

09.3.17 A478
10.4.17 2482
13.4.17 B320
18.4.17 B324
28.4.17 B326
4.7.17 B386

*To Canada per H. S. Sclitia
 from Liverpool 11-5-17*

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

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

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

Casualty Form—Active Service.

250M.—1-16.
H. Q. 1772-39-920.

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

Regimental No. 26044 Rank Private Name Smith John Richard

Enlisted (a) 30.12.15 Terms of Service (a) D of W. Service reckons from (a) 30.12.15

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) Laborer.

CERTIFIED CORRECT.
12 OCT. 1916.
CAN. RECORDS LONDON.

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	
Transferred for Overseas Service with <u>21st Batt'n</u> <u>OCT 5 1916</u> , O. Pt. 11. No. <u>279</u>				
	C.B.D.	Arrived & Taken on Strength	C.B.D.	6/10. Pt. II. O. 58. 9-10-16. <u>Ad. Assting</u> CAPTAIN, ADJUTANT, 109TH BATTALION CAN. INFANTRY.
	C.B.D.	Left to join unit.	C.B.D.	2/11/16. <u>NR. 2/11.</u>
21st BATTALION	Arrived Unit	Field	5/11	<u>B213 10911 PCS 235. 27/16</u>
6 C.F.A.	P.U.O.	Adm	6 C.F.A.	16-3-17 A36. 17b D.C.S. 282 d/29-3-17.
2 C.F.A.	Influenza	Adm	2 C.F.A.	14-3-17 { A36 18b.
Do.	Transferred to	CC.R.S.	16-3-17	{ D.C.S. 284 d/3-4-17.
8 Red Cross	Suberde of Lung	Adm	8 Red Cross	28-3-17 W. 3034.
Do.	Invalided (SICK) & posted to Eastern Ontario Regt. Depot, per H.S. "Stad Antwerpen"	Seaford	1-4-17	W. 3083 No. 825. W. 3034. Pt. II. O. 39 d/10-4-17.

(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.

Whogam Captain, for,
Lieut. Col., A.A.G., Canadian Section.

LTR

Rank _____ Name SMITH, John Richard ✓ Reg'l No. 726044 ✓
 Unit 109th, Bn. If in perm. Corps, }
 What Unit? } Married or Single Single.
 Place and Date of Enlistment Kinmount, 30th, December, 1915. Place of Birth Sommerville Tsp.
 Name and Address, Next-of-Kin Mrs Harold Smith.
P.O. Kinmount, Ontario, Canada. Relationship Mother. ✓

Assigned Pay Monthly \$ _____ Payable to _____

Relationship _____

N/E R.B. No. 3044

Separation Allowance \$ _____ Payable to _____

Relationship _____

File R.L. _____

Category MH-Can.

Discharge, Date and Place

Reason

Character

H. W. & V., Ld.—7165-16.

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS. Taken from Official Documents.	
Date.	From whom received.					
		Arrived in England per H. M. T. 2810			31-7-16	
5-10-16	109 th Bn	S.O.S. to 21 st Bn	Bramhall	5-10-16	Pt II. 50-279. <i>W.S.P.</i>	
9-10-16	21 st Bn	T.O.S. from 109 th Bn	Field	6-10-16	" #58.	
3-4-17	"	No 6 Can. Field Amb.	"	16-3-17	C.L.A. 478 P.U.O.	
18-4-17	"	Red X Hospital	Le Touquet	31-3-17	" 482 T.B. Pulmonary	
13-4-17	"	Moore Bk. Hsp.	Sciffe	7-4-17	" B. 320 do"	
16-4-17	E.O.R. Dep. T.O.S. from 21 st Bn on adm title.		Sciffon	7-4-17	PTII 80 35-	
18-4-17	21 st Bn	Trans. Waverstead Red X Hos.	Margate	5-4-17	C.L. B 324 T.B. Pul.	
10-4-17	"	S.O.S. to E.O.R. Dept (back)	Field	1-4-17	PTII 80 39	
20-4-17	"	Trans Can. Mil Hos.	Hunting	14-4-17	C.L. B. 326 T.B. Pul.	

A.F.B. 103 CHECKED

11 OCT. 96

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.				
4-7-17	21st. Pm.	Disch'd. from Can. Mil. Hosp. Hastings, —		11-5-17	C. No. B 386.
25-5-17	EOR Dep.	Causes to be shown in Dep't 16 SOS. on embarking for discharge to Canada	Seaford	11-5-17	PT II 8074
	Kis Dep	To Corvul Home	MD3 Kingston	21. 5. 17	NR 280

Form to be used instead of blank space on Army Form 179
Proceedings of Medical Board at Discharge Depot.

Number 726077 Rank Pte Name and Corps of disabled soldier Smith, James Richard. 21st Bn.
Previous Civilian Occupation Cooper.

Cause of disability - Tuberculosis of lung.

Condition in detail which prevent the soldier earning a Full livelihood:-
Cough & expectoration slight shortness of breath on exertion. Has had some temp. & occasional night sweats. Last one about a month ago.
On exam. - chest symptoms are not marked. There is some impairment of vesicular breath sounds left base anteriorly & posteriorly but other signs of lung lesion not evident.
In view of T.B. having been found in sputum in Mar. /17 at No 8. Red Cross Hospital. It is ad-
Opinion of the Board. P.T.O

Degree of incapacity (Please state in fractions.)
Total

Probable duration of incapacity:-
8 mos then impossible to say.

Does it render him permanently unfit for Military Service? yes

Would operation, special treatment or the use of appliances, etc., lessen incapacity? Sanatorium for T.B.

Signature. E. Robertson Capt. President.
Shubert Major Members.
Station. Que McFadden Capt.

Date June 2/17

Approved.

Date June 2/17 W. W. Cameron Major
Assistant Director Medical Service.

Date _____
Director General Medical Service.

R188

Form to be used instead of blank space on Army Form 178

Proceedings of Medical Board at Discharge Depot.

Number Rank Name and Corps of disabled soldier.

Previous Civilian Occupation.

Cause of disability -

Condition in detail which prevent the soldier earning a full
*Physical condition is good. case seems
to be improving*

*William Major
in Colonel Capt.
E. Robertson Capt-*

Members of the Board.

Degree of incapacity (Please state in fractions).

Probable duration of incapacity:-

Does it render him permanently unfit for Military Service?

Would operation, special treatment or the use of appliances,
etc., lessen incapacity?

Signature. _____ President.

Members. _____

Station.

Date.

Approved.

Date _____ Assistant Director Medical Service.

Date _____ Director General Medical Service.

Office of the A.D.M.S. Canadians, Shorncliffe,
19, Westbourne Gardens,
Folkestone.

April 11th 1917.

To: Officer i/c Records,
Canadian Record Office,
London.

649. S. 12722

Name. Smith, J.R.

No. 726044 Rank. Pte

Unit. 21st Battalion

The above noted appeared before a Medical Board
on April 10th 1917, and the following entry has been made
on the Medical History Sheet of this man:-

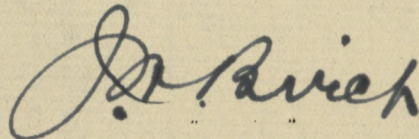
Moore Barracks- Board recommends- Invaliding to Canada
(Sgd) H.J. Stephens Capt. C.A.M.C. President of S.M. Board
April 11th 1917 - APPROVED
(Sgd) S.L. Walker Capt C.A.M.C. for A.D.M.S. Canadians Shorncliffe
Further entries are also contained in this sheet,

which are herewith copied.

Moore Barracks Hospital 6-4-17 Tubercle of Lung Admitted with
shortness of breath, weakness, loss of weight, cough. Sputum positive
for T.B. -In France. Board Papers prepared and Invaliding to Canada
recommended (Sgd) H.J. Stephens Capt.

FG

I hereby certify that the entries as above noted
are true copies.



Capt. C.A.M.C.,
for A.D.M.S. Canadians,
Shorncliffe.

Office of the Surgeon General
Washington, D.C.

April 1918

YBOD

April 1918

Board of Health - Board of Health - Investigating to J. had
... ..
... ..
... ..

Board of Health - Board of Health - Investigating to J. had
... ..
... ..
... ..

J. B. Jones

Surgeon General
U.S. Department of Health
Washington, D.C.

MEDICAL HISTORY--CASE SHEET.

Mowat Memorial Sanitarium. Kingston, Ont.
SMITH, John Richard. Pte. #728044. Age- 34.
109th. Battn. Service-France.
Admission:- June 5.17.
Diagnosis:- Tuberculosis of lung.
Origin:- Since enlistment.

Cause of Disability:- Tuberculosis of lung.

History:- Eng. Board.- Father living and well. Mother has bronchitis. 1B h and w. 2S. 1 and w. pers. History:- Born in Canada. Worked in box factory. Enlisted Dec. 27. 15. Eng. end of Aug. 1916. France end of Sept. 1916. Carried on in trenches till Mar. 14. 17. Sent to 22nd. C.C.S. Mar. 28. To No. 8 Red Cross, Eng. Apr. 5. To Highgate M.B.C.H. 6.4.17. Past illness:- inflammatory rheum. 7 yrs. ago. Diphtheria at 18. Scarlet fever 5 yrs. ago. pres. illness:- Had some cough in Eng. which got worse in France. Two mos. ago noticed he was getting short of breath. Cough and shortness of breath got worse till he reported sick Mar. 14. 17. T.B. found in sputum Mar. 30 at No. 8 Red Cross Hosp. Had high temp. Mar. 18-22 about 103-102.

Present Condition:- Quebec Board--Cough and expectoration, slight shortness of breath on exertion. Has had some temp. and occasional night sweats. Last one about a month ago. On exam:- Chest symptoms are not marked. There is some impairment of vesicular breath sounds left base anteriorly and posteriorly but other signs of lung lesion not evident. In view of T.B. having been found in sputum in Mar. 1917 at No. 9 Red Cross Hospital, it is advisable to continue Sanitarium treatment. Physical condition is good. Case seems to be improving.

Incapacity:- Eng. Board- Total 6 mos.
Can. Board- Total.

Duration:- 6 mos. then impossible to say.

726044.

DUPLICATE MEDICAL HISTORY SHEET DUPLICATE

Surname Smith Christian Name John Richard

Examined { on 30th day of December 1915
 at Sindsay
 Birthplace { City or Town Somerville
 County Ontario

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

Apparent age 33 years
 Trade or occupation Saboteur
 Height 5 Feet 7 Inches
 Weight 135 Lbs.
 Chest measurement { Minimum 32 inches
 Maximum expansion 34 inches
 Physical development good
 Small-Pox Marks none

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

Vaccination Marks { Arm Right none Left One
 Number one
 When Vaccinated last January 24th 1916
 (a) Marks indicating congenital peculiarities or previous disease none

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

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

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>26/4/16</u>	<u>Good</u>	<u>J. McCulloch</u> M.O.
<u>2/5/16</u>	<u>"</u>	<u>J. McCulloch</u> M.O.
<u>12/5/16</u>	<u>"</u>	<u>J. McCulloch</u> M.O.

Enlisted on 30th day of December 1915 at Hiunmount

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>109th Batt.</u>	<u>726044.</u>		<u>30</u> <u>23.12.15.</u>
Transferred to..	<u>C. E. F.</u>			

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.

Chlor

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. 178^A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

INVESTED IN CANADA FOR FURTHER MEDICAL TREATMENT. HOSPITAL FOR INFANTRY OFFICERS. CANADIAN MILITARY HOSPITALS. Duplicate

DEPT. MILITARY DEFENCE SEP 12 1917 4.0 CANADA

MEDICAL HISTORY OF

Surname Smith Christian Name J R

TABLE I.—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 ...

Joined on enlistment Corps. Regtl. No. 21 BATT 726044
Transferred to

Became non-effective by ... on ... day of ... 191 ... (Signature) ... (Rank) ...

TABLE III.—Boards; Courts of Enquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, etc.

Table with 2 columns: Date, Brief Details and Signature. Includes handwritten entries: 10-4-1917, 12 APR 1917, and signatures of medical officers.

TABLE IV.—Service Table.

Table with 3 columns: Station or Troopship, Date of arrival or embarkation, Date of departure or disembarkation.

34

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

1351
C. 17

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				
Moore Barracks Hpt, Sharncliffe.	6	4	17				Tubercle of Lung		Admitted with shortness of breath, weakness, lost of weight, cough. Sputum positive for T.B in France. Board papers prepared for invaliding to Canada recommended.	<i>[Signature]</i>
CANADIAN MILITARY HOSPITAL, HASTINGS, SUSSEX.										
	13	4	17				Tubercle of Lung		Boarded Lt C Awater Salary	
HMHS Letitia	11	5	17	22	5	17	T.B.		same as on admission	<i>[Signature]</i> D. R. Wark capt comd
Mowat Sanitorium Kingston, Ont.	5	June	17	31	Aug	17	Pulmonary Tuberculosis	87	Discharged by Medical Board as disease is now quiescent.	<i>[Signature]</i> C. Thompson Capt Med

356-12-9-17

CANADIAN CONTINGENT EXPEDITIONARY FORCE

TRIPLICATE

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. 726044 Rank Pte. Name J.R. Smith.

Corps 21st. Battn. who was* discharged

On August 31st. 1917, to Medically Unfit Class 3

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from August 1 1917,
to Aug. 31st. 1917, the inclusive date of transfer or discharge.

Dr.	\$	c	Cr.	\$	c
Bal. Dr. from prev. month			Bal. Cr. from prev. month		
Advances } No.			Reg'tl Pay <u>31</u> days at \$ <u>1</u> c	<u>31</u>	<u>00</u>
by } No.			Field Allow. days at \$ c <u>10</u>	<u>3</u>	<u>10</u>
Assigned Pay No.			Other Allowances*		
Other Charges*			Other Credits* <u>Sub. D.O. 216</u>	<u>18</u>	<u>60</u>
Payment on transfer or discharge No. <u>8450</u>	<u>60</u>	<u>70</u>	<u>Clothing</u>	<u>8</u>	<u>00</u>
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)		
Total	60	70	Total		
			*Give Particulars.	60	70

A monthly stoppage of \$ Nil. (†) has _____ (‡) been paid on account of Assigned Pay for the month of _____ 1917 to (Assignee) _____
(Address) _____

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

On Transfer of an Officer.

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 _____ No. _____
(3) cause of discharge and authority M.D. #3-88-S-108.

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 Aug. 31st. 1917.

Place Kingston, Ont.

[Signature]
Paymaster, "C" Unit M. H. O. C.

N.B.—For purposes of transfer this form is 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.

M. F. W. 44.

150M.—1-17.
H. Q. 1772-39-903.

Cheque Attached. #8450

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

This form to be used for all ranks (Vide Articles 122, 130 and 141 Financial Instructions 27115, C.E.F. 1916)

Regimental No. _____

Rank _____

Name _____

Corps _____

who was _____

1917 to _____

Insert "discharged" or "transferred"

The following is a statement of the account of the above named from _____ to _____ the inclusive date of transfer or discharge.

Particulars	£	s	d
Balance brought forward			
Pay for the month of _____			
Gratuity			
Field Allowance			
Other Allowances			
Other Credits			
Balance to be deducted by new unit			
Total			

(Particulars)

A monthly stoppage of \$ _____ has _____ for the month of _____ 1917 to _____ assigned _____

Insert amount to be assigned, whether it has been paid or not. If amount has not been paid for period of account.

On transfer of an Officer _____

_____ has been paid by Paymaster, Military District No. _____

REMARKS:

- (1) date of enlistment
 - (2) if issued and if 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 this statement of account and find it to be correct and find it to be a correct statement of the Paymaster of the unit.

Date _____

For purposes of this form, this form is to be made out in triplicate. One copy to Paymaster of new unit and one for District Paymaster, one to accompany the pay for the month and one for retention as a record. The copy to accompany the discharge form and one copy to accompany pay for the end of the month and one for retention as a record.

481

PARTICULARS OF DISCHARGE.

1. Name *Smith, John Richard*
2. Regimental Number *426044* 3. Rank *Lie*
4. Corps *C.O.R.D. form 109^a 27th Bn.*
5. Date of Discharge *31-8-17*
6. Place of Discharge *Kingston Ont.*
7. Place to which transport given. (Give street address where possible.)

Kenmount, Ont
enlisted at Kenmount 18-1-16

8. Description at time of Discharge:—

Age *34* years months. Descriptive marks

Height *5* feet *6* inches.

Complexion *Dark*

Eyes *Brown*

Hair *Black*

Trade *wood worker.*

Scar on right jaw.

9. The above named man is discharged in consequence of

Med unfit Para 392 Sec 16 R.C.D. 1912.

(If medically unfit, state nature of disease or disability.)

10. To what extent will it prevent his earning a full livelihood?

Subsistence of living.
Total for six months.

11. Character

Very good.

Date *8-9-17*

L.S.

i/c Records.

PARTICULARS OF DISCHARGE

1. Name of the person discharged
2. Regimental Number
3. Corps
4. Date of Discharge
5. Place of Discharge
6. Place to which transported (if any) (the more address the better)

7. Description of time of Discharge
8. Cause of Discharge
9. Height
10. Complexion
11. Age
12. Hair
13. Trade

14. The above named man is discharged in consequence of

15. (If the above named man is discharged in consequence of disease or disability)

16. Signature

17. Remarks

DUPLICATE

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

INSTRUCTIONS.

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

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

(2) Regimental Number.....726044.....

(3) Full Name of Soldier.....John Richard Smith.....

(4) Place of Birth.....Kimmount Ont.....

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

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

(b) Present Postal Address.....Kimmount, Ont.....

(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?..... Yes

If so, state name and address..... Richard Smith Kimmount

(10) Is your Mother alive?..... yes

If so, state name and address..... Harold Smith

..... Kimmount Ark

(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.

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

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

(15) Are you insured?..... —

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 11 1916**

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

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

31423-627

16966-J-23

Copy

Name **Smith, John Richard**
Surname Christian Name

Regimental Number **726044** Rank **Pte.**

Address (in full) **Kimmount, Ont.**

Unit **21st & 109th Bn.**

Original Unit **109th Bn.**

District where paid **M.D.3.**

Date of Discharge **31-8-17.**

P. D. P. Filing Number **20-16-3.**

Rates:—Regimental pay \$**1.00** per diem: Field Allowance \$ **.10** per diem. Separation Allowance \$ per month.

L. L. 22573—M. & D. 8009.

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	325	27-9-17	33 00	320	30-10-17	33 00	324	27-11-17	34 10		100 10

Remarks:

M. F. W. 127.
50M-6 17.
1773-39-1140.

W.F.

7

Dec'n No 31423/627 W. S. G. File No 116966 J-825
 Award 122 days at \$ 70 per day \$ 280.⁰⁰
 S. A. months at \$ per mo. \$ \$ 280.⁰⁰
 Less P, D. P. Credited \$ 100.¹⁰
 \$ 179.⁹⁰
 Less further debit balance \$
 Net due paid as below 179.⁹⁰

TO SOLDIER			TO DEPENDENT			
0	Ag. No	Ch No	Amount	Ac No	Ch No	Amount
1						
2						
3	<u>2948</u>	<u>112951</u>	<u>179.⁹⁰</u>			
4						
5						
6						
	Total			Total		

19 ⁴/₁₉

GEN'L AUDITOR
 Posting checked by
J. N. Alpin
 Date 1.8.19

Warat

21-7-52

25-2-36

This space to be for numbers.

Proceedings on Discharge.

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

No.	726044
Rank	Private
Name	John Richard Smith
<small>NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.</small>	
Corps (Squadron, Battery or Company)	21st Battalion
Date of Discharge	31.8.17.
Place of Discharge	Kingston

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age..... 34 years..... months.
 Height..... 5 feet 6 inches.
 Complexion..... Dark
 Eyes..... Brown
 Hair..... Black
 Trade..... Wood Worker
 Intended place of residence..... Kimmount
 (To be given as fully as practicable.)..... Ont.

Descriptive Marks

Scar on right jaw



2. The above-named man is discharged in consequence of *Being medically unfit for further service*

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.

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

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

Very 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.)

Decreed 30-11-52

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.....

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) Kingston Cont.

A. Biddall Major

(Date) 31.8.17.

Commanding "C" Unit M.A.C.C.

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) John Richard Smith (Signature of Soldier.)

(Date) H. Handley (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).....years.....days.

Total 1 years 246 days.

11. Confirmation of Discharge.

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

(Place) Kingston Cont.

(Signature) A. Biddall Major

(Date) 31.8.17.

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.)

no *John Richard Smith*

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> <hr/> <p style="text-align: center;">In the case of recruits who are rejected on final approval, the discharge documents will consist of</p> <p style="padding-left: 40px;">(a) Proceedings on Discharge.</p> <p style="padding-left: 40px;">(b) Attestation.</p> <p style="padding-left: 40px;">(c) Medical History Sheet (in the event of such having been prepared.)</p>
---	--

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

Pte. Smith. ~~James~~ Richard 726044 - 21st Bn.

Proceedings of Medical Board

held at *Moore Bks. Hosp.* Date *10-4-17*

Sent to C.R. Date *20-2-18*

N.E.
~~Discharge~~ Section. *al.*

dier marginally noted is to the effect that he

2. The Officer in charge of Records, London, England, has been requested to furnish all available information relative to his death. Owing, however, to the difficulty of obtaining full particulars under the conditions prevailing at the front, from three to four months may elapse before the report is received

Moore Barracks Canadian Hospital,
Stoneliffe, Kent.

Date:1917.....

quisition.

REPORT.

DATE. Apr 7/17.

COLOUR. *Amb.*

REG. NO. 726044

S.G. 1020

NAME. *Smith, Pte J.R.*

REACTION. *Acid*

UNIT. 21 Base

SUGAR. *neg*

WARD. 32

ALBUMEN. *neg*

DIAGNOSIS. *Ratnie*

MICROSCOPIC.
E. Campbell.

EXAM REQUIRED.

Capt. C. A. M. C.

Officer i/c Laboratory.

7

Handwritten text, possibly a list or notes, including words like "Lamb.", "the", "Lamb", "Lamb", "Lamb".

Handwritten text, possibly a list or notes, including words like "Lamb.", "the", "Lamb", "Lamb", "Lamb".

I *J.R. Smith* do solemnly declare

that I have answered all questions most truthfully and to
the best of my knowledge and belief. That I have not withheld
any information whatsoever.

Witness,

..... *A. A. Ryman*

Sgd. *J.R. Smith*

.....
.....

.....

.....

.....

.....

.....

15400

DEPT. MILITIA & DEFENCE
FEB 21 1918
MOORE BARRACKS;
CANADIAN ARMY
SHORNOLIFFE

Medical Report on an Invalid.

Station _____

Date _____

April 8/17

649, 8-12722

1. Unit **21st Batt**

5. Age last birthday **34**

2. Regimental No. **726044**

6. Enlisted ^{on} **27th Dec 1915**
_{at}

3. Rank **Pte**

Kenmount

4. Name **SMITH James R**

7. Former Trade or Occupation **Worked in box factory**

8. Disability.

Taberle of lungs

Statement of Case.

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.

9. Date of origin of disability. **Uncertain - since enlistment**

10. Place of origin of disability. **Uncertain**

11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.
Fam. Hist. Father living and well. Mother has bronchitis I B h&w. 2 S l&w
Pers. Hist. Born in Canada. Worked in box factory. Enlisted 27th Dec 1915

England end of Aug 1916 France end of Sept 1916 Carried on in trenches till March 14/17 Sent to 22nd C.C.S. March 28 to No 8 Red Cross. England April 5th to Highgate. M.B.C.H. E/11X 6/4/17.
Past illnesses. Inflammatory rheumatism 7 years ago. Diphtheria at 18. Scarlet fever 5 years ago
Present illnesses. Has some cough in England which got worse in France. Two months ago noticed he was getting short of breath. Cough and shortness of breath got worse till he reported sick Mar 14/17.
T.B. found in sputum Mar 30 at No 8 Red Cross Hosp. Had high temp. Mar 18 to 22 about 103-102

12. (a) Give your opinion as to the causation of the disability. **Infection.**
(b) If you consider it to have been caused by wounds received or illness contracted (1) in the presence of the enemy (2) on active service, explain the specific conditions to which you attribute it. (See notes on page 3).
(1) Yes
(2) Yes. Exposure and infection on active service in France.

Handwritten signature

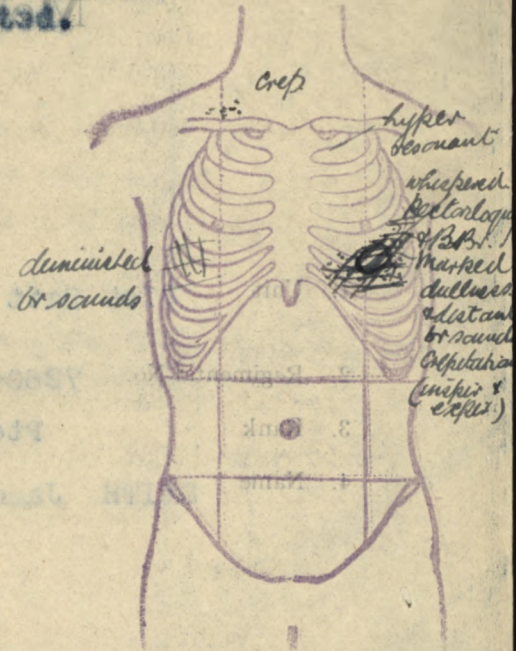
18 APR 1917

13. What is his present condition ?

Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.

Temp. here about 100 and pulse 88 to 100
Has general weakness and has lost weight.
Has marked shortness of breath.
Physical signs as charted.

Sputum positive T.B. at Ho S Red Cross Hosp.
Other organs apparently normal.



14. If the disability is an injury, was it caused

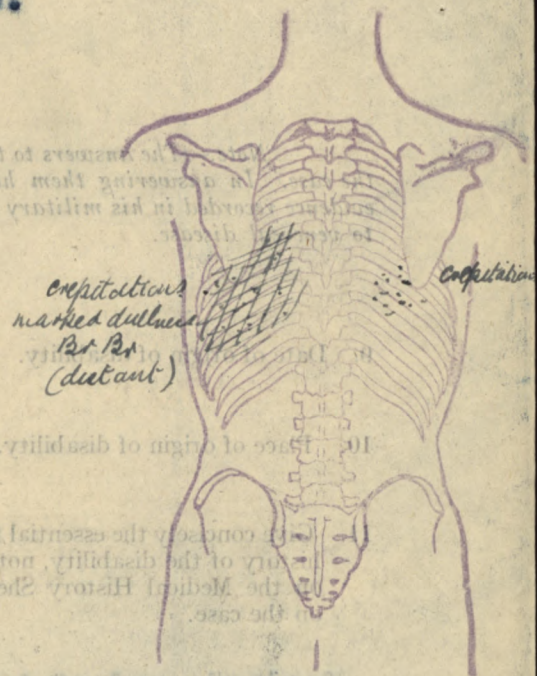
- (a) In action ?
- (b) On field service ?
- (c) On duty ?
- (d) Off duty ?

Not applicable.

15. Was a Court of Inquiry held on the injury ?

- If so—
- (a) When ?
 - (b) Where ?
 - (c) Opinion ?

Not applicable.



16. Was an operation performed ? If so, what ?

No

17. If not, was an operation advised and declined ?

Not applicable.

18. In case of loss or decay of teeth. Is the loss of teeth the result of wounds, injury or disease, directly* attributable to active service ?

No

19. Do you recommend

- (a) Fit for duty ? No
- (b) Fit for light duty ? No
- (c) Invalided to Canada ? Yes
- (d) Discharge as permanently unfit ? No

(Sgd) Pto Barthe, Major
Officer in medical charge of case.

I have satisfied myself of the general accuracy of this report, and concur therewith, except†

Station Moore Barracks

(Sgd) Wallace A. Scott
Colonel, Amb
Officer in charge of Hospital.
Moore Barracks, Red Cross
Chorncliffe

Date Apr 8/17

* Loss of teeth on, or immediately after, active service, should be attributed thereto, unless there is evidence that it is due to some other causes.

† Delete this word if no exceptions are to be made.

Opinion of the Medical Board.

NOTES.—(i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as it is essential that the Members of the Pensions and Claims Board should be in possession of the most reliable information to enable them to decide upon the man's claim to pension.

(ii.) Expressions such as " may," " might," " probably." &c., should be avoided.

(iii.) The rates of pensions vary according to whether the disability is attributed to wounds or injuries received or illness contracted, (1) in the presence of the enemy, (2) on active service. It is therefore essential when assigning the cause of the disability to differentiate between them (see Article 591 to 598 of the Canadian Pay and Allowance Regulations as amended G.O., 57, May 1st, 1915).

(iv.) In answering question 20 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.

20. (a) State whether the disability is the result of injuries received or illness contracted, (1) in the presence of the enemy, (2) on active service. (1) Yes (2) Yes.

(b) If due to one of these causes, to what specific condition do the Board attribute it? Infection and exposure.

1. Has the disability been aggravated by
(a) Intemperance? No
(b) Misconduct? No

22. Is the disability permanent? Yes

23. If not permanent, what is its probable minimum duration? Not applicable

To be stated in months.

24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present? Total for six months

In defining the extent of his inability to earn a livelihood, estimate it at 1/2, 1/3, 1/4, or total incapacity.

25. If an operation was advised and declined, was the refusal unreasonable? Not applicable

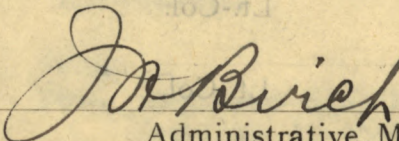
26. Do the Board recommend
(a) Fit for duty? No
(b) Fit for light duty? No
(c) Invalided to Canada? Yes "F"
(d) Discharge as permanently unfit? No

Signatures:— (Sgd) W. Bethune Capt. President.

Station Moore Barracks Hospital (Sgd) H. J. Stephens Capt. Members.

Date 10-4-17

Approved.
Station SHORNCLIFFE—
(19, Westbourne Gardens, Folkestone.)


Administrative Medical Officer.

Date _____ CAPT.
FOR A. D. M. S. CANADIANS, SHORNCLIFFE.

12 APR 1917

81.2.18

383a
2/2/18

PENSIONS AND CLAIMS BOARD, Canadian Expeditionary Force, assembled at

England, on the _____ day of _____ 1918

74-21-2-18
Members of Board.

- LIEUT.-COL. SIR H. MONTAGU ALLAN, C.V.O., *President*. MAJOR R. RAIKES, C.A.M.C.
- LIEUT.-COL. W. GRANT MORDEN. MAJOR HUME BLAKE.
- LIEUT.-COL. D. MCLEAN. MAJOR T. H. MACDONALD, C.A.M.C.

Proceedings.

The Board having considered the evidence of the man marginally noted, and the documents submitted, hereto attached, which form part of these Presents, marked

Infection and exposure.

1. Has the disability been explained by

(a) Infection? No

(b) Disinfection? No

2. Is the disability permanent? Yes

3. If not permanent, what is its probable minimum duration? Not applicable

4. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present? Total for six months

5. In defining the extent of his inability to earn a livelihood, estimate it at $\frac{1}{2}$, $\frac{1}{3}$, or total incapacity. Not applicable

6. If an operation was advised and declined, was the refusal unreasonable? Not applicable

7. Do the Board recommend

(a) Fit for duty? No

(b) Fit for light duty? No

(c) Invalided to Canada? Yes

(d) Discharge as permanently unfit? No

President: Capt. W. Bethune (Sgd)

Members: Capt. E. J. Stephens (Sgd)

President.
Lt.-Col. _____

Major, C.A.M.C.

Lt.-Col. _____

Major.

Major, C.A.M.C.

12 APR 1918

LN/

88-108

Address:- Kirmount, Ont.

BAC

MEDICAL HISTORY OF AN INVALID.

- 1. Station. Kingston, Ont. 8. General remarks on his:—
- 2. Regiment or Corps. 21st Battalion (a) Conduct.
- 3. Regimental No. and Rank. Private (b) Habits.
#726044
- 4. Name. John Richard Smith (c) Temperance.
- 5. Age last Birthday. 34 (For this purpose the Company defaulter sheets will be obtained from the man's Commanding Officer.)
- 6. Enlisted on 27th Dec. 1915
- at Kirmount, Ont.
- 7. Former trade or occupation. Wood-worker Date. July 19th 1917

MILITIA & DEFENCE
JUL 25 1917
H.J. CANADA

9. Service.	Years.	Days.	PERIODS	
			FROM	To
<u>109th Battalion</u>	<u>Dec. 27th 1917</u>	<u>Sept. 15th 1916</u>		
<u>21st Battalion</u>	<u>Sept. 15. 1916</u>	<u>Date.</u>		

- 10. (a) Disease or disability. Pulmonary tuberculosis.
- (b) Date of origin. After enlistment Mar. 14.1917-man's statement.
- (c) Place of origin. France.
- (d) Cause. Unknown.

11. Present condition. (Most Important.) Complains " I am a little weak but feel as good as I ever did". Positive "T.B." in England Mar. 30th 1917. Negative here June 6th 1917 and unobtainable July 16/17. Constitutional reaction normal, usual weight 135 lbs., now 135 lbs. Chest 33-34 1/2". No history of hemorrhages. Chest found clear, there is a feeble type of respiration however. No other objective symptoms.

- 12. (a) Is the disability the result of service or climate? Man says service.
- (b) Has it been aggravated by intemperance, vice or misconduct? No.

13. (a) For purpose of Identification. (Here a full description of wounds, scars, deformities, etc., is to be given.)

Scar on right side of cheek at angle of jaw.

(b) In case of wounds, or other injuries, state whether sustained on or off duty. If not received in action, was a Court of Inquiry held? **Not Applicable.**

(c) In the event of the disability being attributed to exposure on duty, state clearly the nature of such exposure, and whether it was exceptional or otherwise. **Not Exceptional.**

14. Treatment.

English & French Hospitals.

Mowat, Kingston June 5th 1917 to date.

15. If the disabling condition had its origin before enlistment, has it been aggravated by service, and to what extent? **Not Applicable. acc. to man's statement.**

16. What is the probable duration of the disability or of each disabling condition, if more than one contributes? **Returned to normal.**

17. To what extent will it prevent his earning a full livelihood in the general labour market? Please state in fractions. When more than one disabling condition is present, the extent of the disability due to each should be stated. **1/2 for 6 months.**

18. State if for discharge on account of unfitness for Service. **For discharge.**

Prognosis with or without sanatorium treatment good.

R. Thompson **Capt. AMC**
Medical Officer by whom the case is brought forward.

OPINION OF THE MEDICAL BOARD.

Does the Board concur with the preceding report? If not, give differing opinion.

10. Yes

11. Yes

12. Yes

15. Yes

16. Yes

17. Yes

18. Is he unfit for Military Service. Yes

Recommendations : On account of a history of Pleurisy and the existence of a lesion in right apex which is inactive at present, the Board recommends that the man be discharged as medically unfit. No further treatment required at present. Fit to pass under his own control. Category E. Disability 50% for six months.

Signatures :—

E. Kidd

Lt-Col, A.M.C.
President.

A. Rossalquin

Major A.M.C.
Members.

Station. Kingston, Ont.

Date. 20th July 1917

Date. JUL 21 1917

Approved.

Date.

J. M. Atley Captain, A.M.C.
A.D.M.S. Mil. District No. 1
Assc. Director of Medical Services.
For A.D.M.S. MIL. DISTRICT NO. 1

Director-General of Medical Services.

