

ATTESTATION PAPER.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

No. 1373

Folio. 749a

QUESTIONS TO BE PUT BEFORE ATTESTATION.

ANSWERS.

1. What is your name?.....
2. In what Town, Township or Parish, and in what Country were you born?.....
3. What is the name of your next-of-kin?.....
4. What is the address of your next-of-kin?.....
5. What is the date of your birth?.....
6. What is your Trade or Calling?.....
7. Are you married?.....
8. Are you willing to be vaccinated or re-vaccinated?.....
9. Do you now belong to the Active Militia?.....
10. Have you ever served in any Military Force?.....
If so, state particulars of former Service.
11. Do you understand the nature and terms of your engagement?.....
12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE?.....

George Arthur Temple-Smith
Durham Co. England
Mrs G.A. Smith
370 Clowen St. Ottawa
April 15th 1882
Accountant
Yes
Yes
No
3 yrs Northumberland Fusiliers
3 yrs. Parnassus N.H.Y.
3 yrs. 4474. Ottawa. Yes

Yes
George Arthur Temple-Smith (Signature of Man).
James H. Smith (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, George Arthur Temple-Smith, 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.

Date Aug 28th 1914.

George Arthur Temple-Smith (Signature of Recruit)

James H. Smith (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, George Arthur Temple-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 Aug 28th 1914.

George Arthur Temple-Smith (Signature of Recruit)

James H. Smith (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 Ottawa this 28th day of August 1914.

James H. Smith (Signature of Justice)

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

(Approving Officer)

10 Amplified 1313

Description of George A. T. Smithson on Enlistment.

Apparent Age 32 years 4 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. 9 ins.

Chest measurement { Girth when fully expanded 40 ins.
Range of expansion 2 ins.

Complexion Dark

Eyes Grey

Hair Black

Religious denominations { Church of England ☒
Presbyterian ☐
Wesleyan ☐
Baptist or Congregationalist ☐
Other Protestants (Denomination to be stated.) ☐
Roman Catholic ☐
Jewish ☐

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 Aug 28th 1914.

Place Ottawa

Ch. Keenan
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.

G. A. T. Smithson 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.

F. Farquhar (Signature of Officer)

Date 5th Oct 1914.

Lieut. Colonel
Comd'g P. P. C. L. I.

Dec 10

6K

Staff
H. Coy.

ATTESTATION PAPER.

No. 724727

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

ORIGINAL

(ANSWERS.)

1. What is your surname?.....*Smithson*
- 1a. What are your Christian names?.....*George Arthur Temple*
- 1b. What is your present address?.....*Lindsay Ont.*
2. In what Town, Township or Parish, and in what Country were you born?.....*South Shields Durham Eng*
3. What is the name of your next-of-kin?.....*Dorice Smithson*
4. What is the address of your next-of-kin?.....*77 Victoria St Ottawa Can*
- 4a. What is the relationship of your next-of-kin?.....*Wife*
5. What is the date of your birth?.....*15th April 1882*
6. What is your Trade or Calling?.....*Accountant*
7. Are you married?.....*Yes*
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?.....*Northumberland Fusiliers 3 years*
If so, state particulars of former Service. *W. H. 5. 4. 3 yrs 55-75 3 years*
11. Do you understand the nature and terms of your engagement?.....*P.P.L. 1 year Yes*
12. Are you willing to be attested to serve in the }
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? }.....*Yes*

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *George Arthur Temple Smithson*, 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.

George Arthur Temple Smithson

(Signature of Recruit)

Date *December 10th* 191*5*.

Wm A Campbell

(Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *George Arthur Temple Smithson*, 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.

George Arthur Temple Smithson

(Signature of Recruit)

Date *December 10th* 191*5*.

Wm A Campbell

(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 *10th* day of *December* 191*5*.

E. J. [Signature]

(Signature of Justice)

Description of George Arthur Temple Smith on Enlistment.

Apparent Age 33 years 8 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 8 1/2 ins.

Chest measurement { Girth when fully expanded 39 ins.
Range of expansion 4 1/2 ins.

Complexion Dark

Eyes Hazel

Hair Black

Religious denominations { Church of England C of E

Presbyterian

Methodist

Baptist or Congregationalist

Roman Catholic

Jewish

Other denominations
(Denomination to be stated.)

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 neck
Neurosis right arm
By special request

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 December 10th 1915.

Place Lindsay Ont.

*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:—

J. M. Culloch Capt.
H. Bayd Medical Officer.
109th Overseas Battalion, C. E. F.

CERTIFICATE OF OFFICER COMMANDING UNIT.

George Arthur Temple 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.

Date JAN 17 1916

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

UNIT 109th Bn

Regimental No. 1313

card 912

ATTESTATION PAPER.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS)

1. What is your name? George Arthur Temple Smithson
2. In what Town, Township or Parish, and in what Country were you born? Durham Co. England
3. What is the name of your next-of-kin? Mrs A.T. Smithson
4. What is the address of your next-of-kin? 370 Gloucester St. Ottawa
5. What is the date of your birth? April 15th 1883
6. What is your Trade or Calling? Accountant
7. Are you married? Yes
8. Are you willing to be vaccinated or re-vaccinated? Yes
9. Do you now belong to the Active Militia? No
10. Have you ever served in any Military Force? 3 years - Northumberland Fusiliers
If so, state particulars of former Service. 3 years - Bay of Biscay N.H.I.Y.
3 years - C.E.F. Ottawa
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

(Sgd) Geo. A. T. Smithson (Signature of Man).

(Sgd) A.T. Smithson (Signature of Witness).

D.C. 5th P.D.

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, George Arthur Temple Smithson, 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.

(Sgd) Geo. A. T. Smithson (Signature of Recruit).
Date Aug 28th 1914 (Sgd) A. T. Smithson (Signature of Witness).

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, George Arthur Temple Smithson, 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.

(Sgd) Geo. A. T. Smithson (Signature of Recruit).
Date Aug 28th 1914 (Sgd) A. T. Smithson (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

Ottawa this 28th day of August 1914
(Sgd) A. T. Smithson (Signature of Justice).

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

Certified true copy

Orlando (Approving Officer).

LIEUT.

FOR LT: COL: I/C RECORDS, C.O.M.F.

Description of George M. Smithson on Enlistment.Apparent Age 32 years 4 months.
(To be determined according to the instructions given in the Regulations for Army Medical Service.)

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. 9 ins.Chest measurement. (Girth when fully expanded 40 ins.)
(Range of expansion 2 ins.)Complexion DarkEyes GreyHair BlackReligious denominations.
Church of England ✓
Presbyterian _____
Wesleyan _____
Baptist or Congregationalist _____
Other Protestants (Denomination to be stated.) _____
Roman Catholic _____
Jewish _____

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* _____ for the **Canadian Over-Seas Expeditionary Force.**Date Aug 25th 1914Place Hawa

*Insert here "fit" or "unfit."

L. J. Runney
Medical Officer.

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.

G. M. Smithson 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.(894) R. R. Argueham (Signature of Officer).Date 5th Oct 1914

Staff
A. Coy.

Carol
S.S

ATTESTATION PAPER.
109th OVERSEAS BATTALION, C. E. F.
CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

No. 724727
Folio.

QUESTIONS TO BE PUT BEFORE ATTESTATION.
(ANSWERS.)

DUPLICATE

1. What is your surname?..... Smithson
1a. What are your Christian names?..... George Arthur Temple
1b. What is your present address?..... Lindsay
2. In what Town, Township or Parish, and in what Country were you born?..... South Shields Durham Eng.
3. What is the name of your next-of kin?..... Dorice Smithson Eng.
4. What is the address of your next-of-kin?..... 77 Victoria St. Ottawa Can.
4a. What is the relationship of your next-of-kin?..... Wife
5. What is the date of your birth?..... 15th April 1882
6. What is your Trade or Calling?..... Accountant
7. Are you married?..... Yes
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?..... Northumberland Fusiliers 3 years
 If so, state particulars of former Service. W. H. I. 3 yrs G. I. F. 3 years
11. Do you understand the nature and terms of your engagement?..... P. P. L. 1 yr Yes
12. Are you willing to be attested to serve in the }
 CANADIAN OVER-SEAS EXPEDITIONARY FORCE? }..... Yes

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, George Arthur Temple Smithson, 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.

George Arthur Temple Smithson (Signature of Recruit)
Date December 10th 1915. Wm. Campbell (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, George Arthur Temple Smithson 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.

George Arthur Temple Smithson (Signature of Recruit)
Date December 10th 1915. Wm. Campbell (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 10th day of December 1915.
E. J. [Signature] (Signature of Justice)

Description of George Arthur Temple Smith on Enlistment.

Apparent Age.....33.....years8.....months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height.....5.....ft. 8 1/2.....ins.

Chest measurement { Girth when fully expanded.....39.....ins.
Range of expansion.....4 1/2.....ins.

Complexion.....Dark

Eyes.....Hazel

Hair.....Black

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

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 neck
Heuresis right arm
By special request

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.....December 10th.....1915.

Place.....Lindsay Ont.

*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:—

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

CERTIFICATE OF OFFICER COMMANDING UNIT.

George Arthur Temple 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.

JAN 17 1916

Date.....1915

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

REGIMENTAL DOCUMENTS

NAME SMITHSON, GEO. ARTHUR. TEMPLE REGT. NO. 1313 724727 UNIT 109th Batta H. Q. FILE No.

CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
3 ATTESTATION PAPER (M.F.W. 23, 133 or 51)					DEATH
1 CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					CATEGORY
TRAINING HISTORY SHEET (M.F.W. 113)					
FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
REGT. CONDUCT SHEET (M.B.W. 263 or A.F.B. 120)					
COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
DENTAL HISTORY SHEET (M.F.B. 465)					CATEGORY
MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					
MEDICAL EXAMINATION (M.F.W. 129)					
1 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)					
LAST PAY CERTIFICATE (M.F.W. 44)					DESERTION
1 PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
PARTICULARS OF CHARACTER (A.F.W. 3226)					
COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
CARDS					
PAY-SHEETS					
1 A.F.B. 122					
" " 178					
1 M.F.W. 67					
1 B 122					

Deceased 16-7-51

DEATH
CATEGORY
H

med Unfit

14-31
12-31
5-31
1



31-7-22.

MEDICAL EXTRACT OF INFORMATION FORM

Regt'l No. 724727 NAME: Surname Smithson
1313 Christian Names George Arthur Temple

	CODE No.	1	2	3	4	5	6
No. of Admissions	1	1					
Invalided to Canada		6	2				
Married or Single	2	1					
Unit	3	2	6	0			
Enlisted at	4	3	3	7			
Birth Place	5	1	3				
Age		3	2				
Occupation	6	0	9				
Rank	7	3					
Date of Admission to Hospital		2	5	1	2		
Days off Duty		1	5	1			
W. or D.	8	1					
Wound (or Disease)	9	1	0	4	1	0	
(Wound or) Disease	10						
Operation	11	4	7	2			
Operation		8	4	9			
Place of Treatment	12	9					
Check							
Results	13	E					
No. of times a Casualty	14	1					

3272

Extract of Information Coded for Hollerith

Regtl. No. 724727 Name { Surname Smithson
Christian Names George Arthur Temple

Abbreviations used:—A.P., Attestation Paper, Particulars of Recruit, Officer's Declaration Paper.
A.P.C., Attestation Paper and Pay-roll Card.
Cas., Casualty Form and Record Sheet.
P.D., Proceedings on Discharge.

Extracted by: EB Coded by: EB Checked by: BP

	SOURCE OF INFORMATION	CODE USED	LONGHAND EXTRACT	CODE NO.
A. No. of Card 1, 2, 3, 4, 5, 6			Cards to be punched.....	11
B. Professional Soldier	A.P.	1	<u>BE 8</u>	
C. Theatre of Service	Cas.	2	<u>UK</u>	7
D. Personnel Seconded to W.O., R.A.F., etc.	Cas.	3	<u>NS</u>	0
E. Rank on Discharge	P.D.	4	<u>OR</u>	1
F. Date Discharged	P.D.	5	<u>Apr 8 1917</u>	40
G. Disposition on Discharge	P.D.	6	<u>med fit</u>	21
H. Place proceeding to	P.D.	7	<u>ontario</u>	4
J. Unit Enlisted in	A.P.C.	12 (a) 12 (b)	<u>109 Bn</u>	3109
K. Country of Birth	A.P.	8	<u>Eng</u>	13
L. Occupation	A.P.	9	<u>Accountant</u>	09
M. Date of Enlistment	A.P.C.	5	<u>Dec 10 1915</u>	24
N. Place of Enlistment	A.P.C.	13	<u>Lindsay</u>	337

O. Age on Enlistment	A.P.		Years	33	33
P. Religion	A.P.		10	6 E	1
Q. Rank when left Canada		Cas.	4	0 R	1
R. Unit left Canada with		Cas.	12 (b)	109 Bn	109
S. Date left Canada		Cas.	5	July 1916	31
T. Unit in England		Cas.	12 (b)	109 Bn	109
U. Date first proceeded to Theatre of War		Cas.	5		00

Source of Information—Casualty Form.

1st Unit in T. of W.

0	0	0
---	---	---

Period of Service

Months:

0	0
---	---

2nd Unit in T. of W.

--	--	--

Period of Service

Months:

--	--

3rd Unit in T. of W.

--	--	--

Period of Service

Months:

--	--

4th Unit in T. of W.

--	--	--

Period of Service

Months:

--	--

X. Check Column

~~CHECK~~

Z. Casualties

Cas.

11

✓ W

YA. Honours and Awards

Cas.

~~1. Yes.~~
2. No.

no

1
2

YB. Married or Single

A.P.

4. M.
~~5. S.~~
~~6. W.~~

m

4
5
6

YC. Service Unit Transfer

Cas.

7. Subsequent Unit or Units.

All cards subsequent to 1st.

8. First Unit.

Last or only card.

WATCH

8

Extract of Information Coded for Hollerith

3272

Regtl. No. 1313

Name

Surname Smithson
Christian Names George Arthur Temple

Abbreviations used:—A.P., Attestation Paper, Particulars of Recruit, Officer's Declaration Paper.
A.P.C., Attestation Paper and Pay-roll Card.
Cas., Casualty Form and Record Sheet.
P.D., Proceedings on Discharge.

Extracted by: EPB Coded by: EPB Checked by: BP

	SOURCE OF INFORMATION	CODE USED	LONGHAND EXTRACT	CODE NO.
A. No. of Card 1, 2, 3, 4, 5, 6			Cards to be punched.....	11
B. Professional Soldier	A.P.	1	<u>Am</u>	6
C. Theatre of Service	Cas.	2	<u>European</u>	0
D. Personnel Seconded to W.O., R.A.F., etc.	Cas.	3	<u>ev S</u>	0
E. Rank on Discharge		P.D. 4	<u>OR</u>	1
F. Date Discharged		P.D. 5	<u>oct 3rd 1915</u>	22
G. Disposition on Discharge		P.D. 6	<u>med fil</u>	21
H. Place proceeding to		P.D. 7	<u>ontario</u>	4
J. Unit Enlisted in	A.P.C.	12 (a) 12 (b)	<u>PPCLI</u>	3260
K. Country of Birth	A.P.	8	<u>Eng</u>	13
L. Occupation	A.P.	9	<u>Accountant</u>	09
M. Date of Enlistment	A.P.C.	5	<u>Aug 1914</u>	08
N. Place of Enlistment	A.P.C.	13	<u>Ottawa</u>	355

O. Age on Enlistment	A.P.		Years	32	32
P. Religion	A.P.		10	6 E	1
Q. Rank when left Canada		Cas.	4	0 R	1
R. Unit left Canada with		Cas.	12 (b)	PP6	21260
S. Date left Canada		Cas.	5	Oct 1914	10
T. Unit in England		Cas.	12 (b)	PP6	21260
U. Date first proceeded to Theatre of War		Cas.	5	20 Dec 1914	12

Source of Information—Casualty Form.

1st Unit in T. of W. PP6 260	2nd Unit in T. of W. 	3rd Unit in T. of W. 	4th Unit in T. of W.
Period of Service Months: 1 01	Period of Service Months: 	Period of Service Months: 	Period of Service Months:

X. Check Column					CHECK
Z. Casualties		Cas.	11	W	2
YA. Honours and Awards		Cas.	1. Yes. 2. No.	no	1 2
YB. Married or Single	A.P.		4. M. 5. S. 6. W.	m	4 5 6
YC. Service Unit Transfer		Cas.	7. Subsequent Unit or Units. 8. First Unit.	All cards subsequent to 1st. Last or only card.	WATCH 8

Surname

Christian Name or Names

Reg. No.

Smithson

G.

1313

Rank

Unit

Co.

Troop

Batty.

PA

P.P.C. & J.

Hospital

No 13. Stat: Boulogne

Date of Admission

27. 1. 15

Transferred

No 2. S. Em: Bristol

Hosp.

30. 1. 15

Hosp.

Hosp.

Hosp.

Diagnosis

G. S. Head

(1)

Later Diagnosis (if changed)

(2)

(3)

Additional Diagnoses: If more than one state present

Transp:

30. 1. 15

DISPOSITION

Date

C. 23. 2. 15. #

13

.. 6. 2. 15

16.

REMARKS

A.M.D. 2 DEPT.

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

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

Number. 1313 Rank. R.B.M.S. ~~13~~

Surname. SMITHSON ~~13~~

Christian Names. George

Unit. P.P.C.L. Theatre of War. France

Dates of Service. 20.12.14

Remarks.

Latest Address.

Roll No. B. Page 1332

Received. B.W.M. & V.M.

30/9/21

~~W. H. M. M. M.~~

Reg. No. 1313 Name. Smithson Geo. A. F.
Rank. 4th Lt. Corps. I.S.C. Age. Service.
Ledger No. 1 Serial No.

HOSPITALS

DATE

DIAGNOSIS

M. F. W. 2553.

75M.—9-19.

1772-39-1332.

NAME

Smithson Geo. Arthur.

REGT'L No

124727.

RANK AND CORPS

Bqms. Garrison Bn.

H. Q. FILE NO. 649-

FOLLOWS

No.

FOLLOWS

CABLE

No.

DATE

NATURE OF CASUALTY

1317

23-2-17

Sailed from Liverpool for
Canada per S. S. "Northland".
Feb. 20th 1917.
Paresis Right Side.

LIST No

HOSPITAL

**DATE OF
ADMISSION**

REMARKS



No. 1313.

RANK

Pl

NAME

Smithson, G. A.

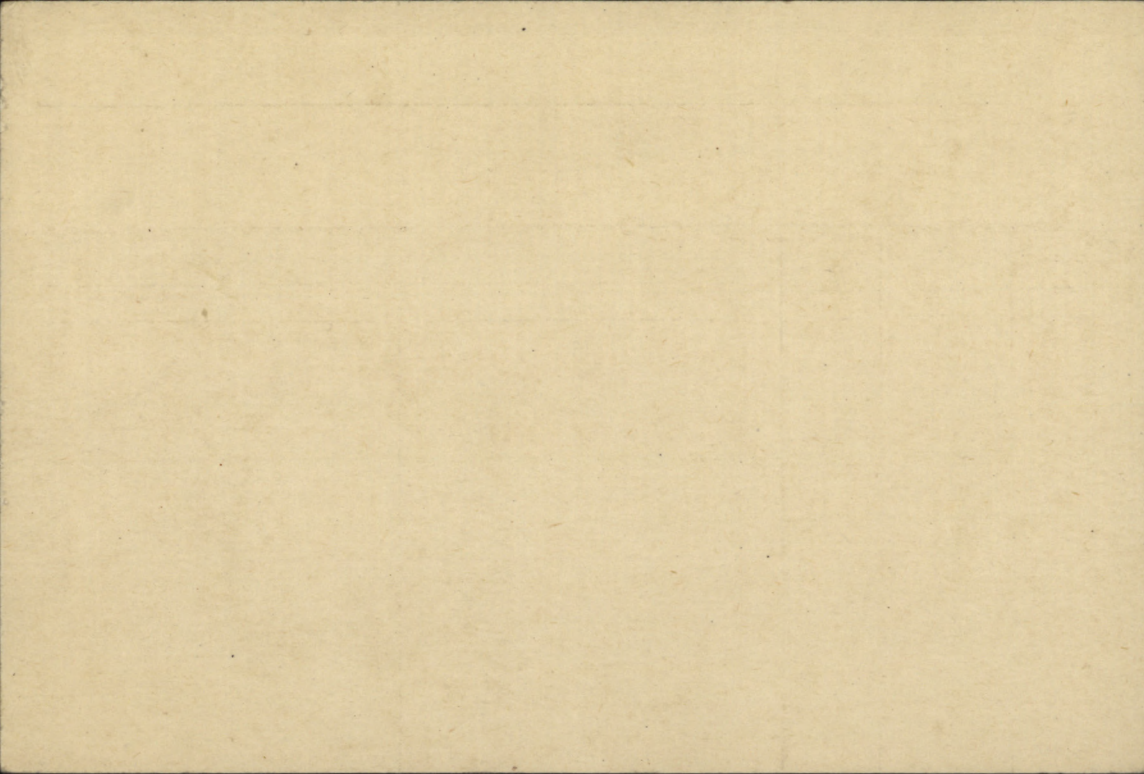
T. O. S.

UNIT

Casualties.

M. D. H. Q.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915. July, 7.	1915 Oct, 3.	N.	From 11th Bn.	



No. 1313

RANK.

Pte. (P.P.C.L.I.)

NAME

Smithson J. A.

T. O. S.

UNIT

Discharge Depot (Quebec.)

M. D. 3.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915. June 26.	1915. Oct. 3.	✓		



No. 1313

RANK

Pte

NAME

Smithson G. A. T.

T. O. S.

14-9-14

UNIT

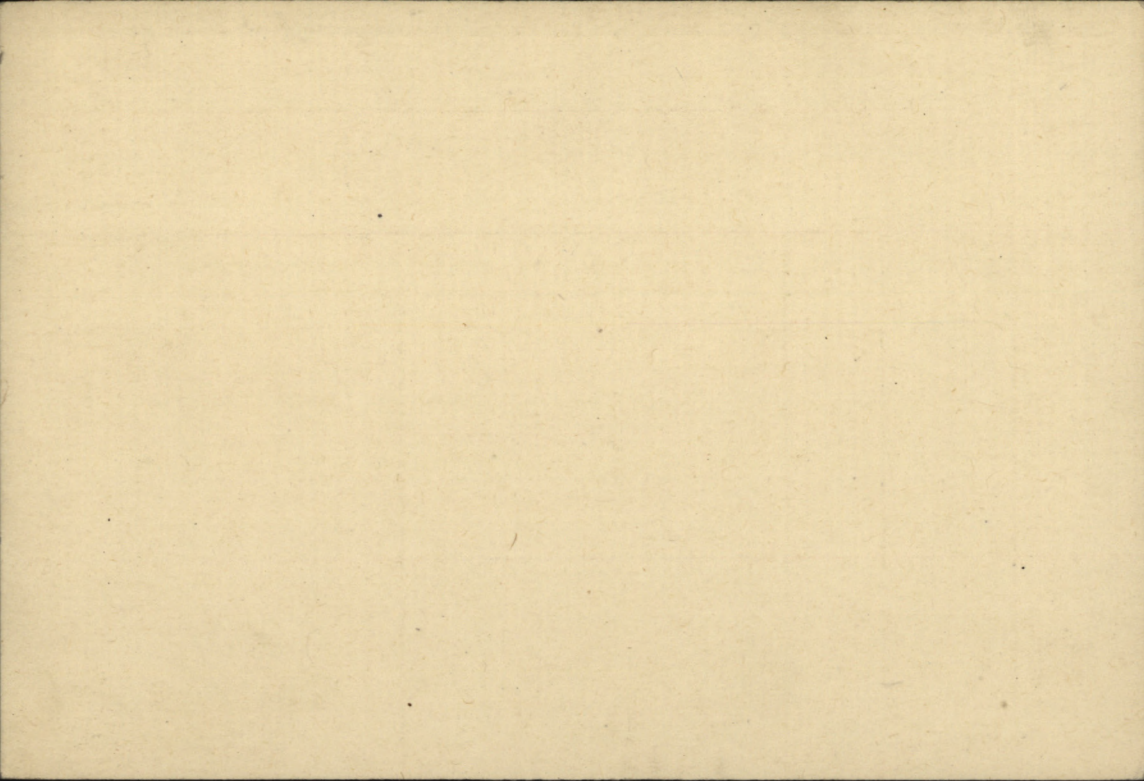
P. P. C. L. I.

M. D.

Various

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1914 Sept 1	1914 Sept 30	✓	On leave. Forfeit 1 Days Pay	
Oct		✓		
Nov.		n.		
Dec.		n.		
1915 Jan	1915	n.		
Feb		n.		
Mar		n.		

UNIT SAILED
OCT 3 1914



NAME *Smithson G. A. T.*
RANK AND CORPS *Pte - P. P. C. L. I.*

H. Q. FILE No. 649-

REGT'L. No. 1313

NO. *1864*

FOLL.

CABLE

NO.

DATE

NATURE OF CASUALTY

NO.	DATE	NATURE OF CASUALTY
<i>961.</i>	<i>3/2/15.</i>	<i>wounded. gun shot wound head. Severe, admitted ^{no. 13-} to Stationary hospital Boulogne, Jan 27th 1915</i>

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
13.	No 13. Nat. Hosp. Boulogne	27/1/15	G. S. Head Severe ✓
✓ 16.	" " " Transferred	30/1/15	" " "
✓ 16	No 2. South. Gen. Hosp. Binet	30/1/15	Sick Slight

No. 724 727

RANK

Pte

NAME

Smithson. G. J.

T. O. S. 9-12-15.

UNIT

109th. Battalion.

D.O. 19. 11-12-15-

M. D. 3

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915 Dec 9	1915 Dec 31	✓	Trans. G. M. S. 9-12-15.	D.O. 26. 19-12-15.
1916 Jan	1916 Feb.	✓		
	Mar.	✓	Prov. App. R. G. M.	D.O. 109. 27-3-16.
	April.	✓		
	May.	✓		
	June.	✓		
	July.	✓		

UNIT SAILED
JUL 23 1916



ORIGINAL

MEDICAL HISTORY OF

Surname

Smithson

Christian Name

George Arthur Temple

Examined

on 28th day of Aug 1914 at Ottawa.

Approved by

Wheeler

Birthplace

City or Town Durham Co
County England

Apparent Age

32 1/2

(Rank)

Medical Officer.

Trade or Occupation

Accountant.

Height

5 Feet 9 Inches

Weight

Lbs.

Chest measurement

Minimum 38 Inches.
Maximum expansion 40 Inches.

Examined for re-engagement

day of 191

Physical Development

Good

*Considered

Small-Pox Marks

Nil.

(Signature)

Medical Officer.

Vaccination Marks

Arm Right Left.
Number

*If unfit, state disability.

When Vaccinated last

190

(a) Marks indicating congenital peculiarities or previous disease

Re-vaccinated on day of 191

Arm Number

(b) Slight defects but not sufficient to cause rejection

Result

(Signature)

Medical Officer.

Enlisted on

28 day of August 1914 at Ottawa.

Joined on enlistment,

P.P.C.L.I.

REG'TL NUMBER.

1313

HABITS.

DATE.

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.

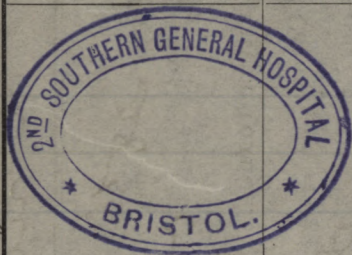
Mil. Form B. 313.

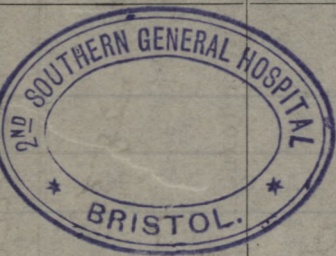
5m 8-12.
H. Q. 1772-39-439.

47

1313

1313. *Smithson* Surname *George Arthur Smith* Christian Name



STATION.	Date of Arrival at the Station.	DATES OF						DISEASE.	Number of days in Hospital.	Remarks on nature of the disease; how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of Inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
		Admission into Hospital.			Discharge from Hospital.						
		Day.	Month.	Year.	Day.	Month.	Year.				
		30	1	15	3	2	15	Scalp Wounds Slight Superficial Gunshot	5	Wounded at Ipswich on sentry + was struck by a bullet which went through a trenching spade + knocked a piece out which struck the L. side of his head. - nearly healed on discharge	J. H. Nichols Capt. R. A. M. C.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
248 Year 1915	1313	pl	Smithson	George
		Unit.	P.P.C.I.9.	Age. 32 Service. 9
Station and Date.	Disease	<p>Scalp wounds over left parietal region. Slight.</p> <p>Wounded at Ypres. Jan 25. put home on sentry go. Struck by Sniper's bullet. went through a trenching spade & knocked a piece out which struck left side of his head. nearly healed.</p> <p>Recommended for furlough.</p> <p>Robert Booklandown.</p>		

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

Station
and Date.

Company.
~~REGIMENTAL~~ CONDUCT SHEET.

Army Form B. 120.

Number of sheets } _____
(in words) }

Signature of C.O. } _____
or Adjutant }

Regiment of P.P.C.L.I.

1313. Pte SMITHSON GEORGE A.

Regimental Number }
and Name }

Attested 20th. Aug. 1914 19 . Joined AUGUST 12 th. 1914 19

P.P.C.L.I. Regiment.

Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Names of Witnesses	PUNISHMENT awarded	Date of award, or of order dispensing with trial	By whom	Date of Commencement	Date of Expiration	REMARKS
		PTE		NIL							
<p><i>Discharged.</i></p> <p><i>in</i></p> <p><i>Canada.</i></p> <p><i>Medically Unfit for</i></p> <p><i>further Service</i></p>								<p><i>[Signature]</i></p> <p>..... Lt. Colonel</p> <p>O.C. 11th. Reserve Battalion .</p>			
To be carried over											

REGIMENTAL CONDUCT SHEET.

One Army Form B. 120.

Regiment of P.P.C.L.I.
Regimental Number and Name 1313 SMITHSON GEORGE A. Attested AUG. 20th. 1914 19 . Joined Aug 12th. 1914 19 .
Signature of C.O. or Adjutant P.P.C.L.I. Regiment.

Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Names of Witnesses	PUNISHMENT awarded	Date of award, or of order dispensing with trial	By whom	Date of Commencement	Date of Expiration	REMARKS
		Pte.		NIL.							
<i>Discharged in Canada.</i> <i>Medically unfit for further service</i>											
To be carried over											

[Signature]
..... Lt. Colonel
O.C. 11th. Reserve Battalion.

WAR SERVICE BADGES.

24323

INFORMATION REQUIRED

File No.

To Director of Records.

Re Application for War Service Badge Class

& Class

No. Rank Name

Unit Address

(Strike out answer which does not apply)

Service over 3 months - ~~yes~~ - ~~no~~

Service in Canada Yes. - ~~No~~

Service in England Yes. - ~~No~~

Service in France Yes. - ~~No~~

Retained for duty)

in Canada) Yes. - No.

Discharged Yes. - ~~No~~

If discharged, state reason

APPROVED.

Med. Unfit

Age 33 Complexion Dark Eyes Grey Hair Black

Badge issued Class A No. 32280

" " " B No. 613979

Badge Refused

W.138-100m.10-17.

1772-39-1167.(M).

g.m.o.k
h.m.
17-418

24323

WAR SERVICE BADGES.

P.C. 2199.

APPLICATION.

Classes "A"- "B"- "C".

M.D. 3

4th March 1918

I hereby make application for a War Badge
Class "A" & Class B

I am in possession of Patriotic Fund Badge,
Class "—" Number lost

(A) I enlisted in the Canadian Expeditionary Force, have seen Active Service at the Front in the present War, from December 1914 to June 13th 1915, and have been honourably discharged, (~~or have been retained in Canada on duty~~), and am therefore entitled to a War Badge, Class "A", and also to a War Badge, Class "B".

(B) I enlisted in the Canadian Expeditionary Force, have seen Active Service in England in the present War, from July 1916 to February 1917, and have been honourably discharged on account of old age, Wounds, Sickness, whereby I have been rendered permanently unfit for further military service and am therefore entitled to a War Badge, Class "B".

(C) I enlisted in the Canadian Expeditionary Force and served in the Present War from 19 to 191, and have been honourably discharged from the Canadian Expeditionary Force, on account of old age, wounds, sickness, whereby I have been rendered permanently unfit for further military service.

L. A. Smithson

L. A. Smithson

(Signature)

ADDRESS 391 Daly Ave
(No. and Street)

REG. NO. 1313 RANK Pfc PPCLD

Ottawa
(Town and Province)

UNIT 424727 BDMO 109th Bn

NOTE: The applicant should strike out that part of the form which does not apply to his particular case.

M.D. 3

France
England

Casualty Form—Active Service.

Regiment or Corps P. P. C. L. 1.Regimental No. 1313 Rank Pte Name Smithson, G. A. N.Enlisted (a) Aug 1/15 Terms of Service (a) 1 Year of duration of war Service reckons from (a) Aug 12/15Date of promotion to } Date of appointment } Numerical position on }
present rank } to lance rank } 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				
		<u>Embarked Southampton</u>		<u>20.2.15</u>	
	<u>P.P.C.L. 1.</u>	<u>Wounded (slightly)</u>	<u>St. Eloi</u>	<u>25.1.15</u>	
<u>30.1.15</u>	<u>Q.C.H.P. Ship</u>	<u>To Eng² (S.W. Head)</u>	<u>H.S. St. Patrick</u>	<u>30.1.15</u>	<u>O. 3165.</u>
<u>12.4.15</u>	<u>Q.C.H.P. 1.</u>	<u>Sol as deserter by Lt Col Eng. Shomecliffe</u>		<u>12.4.15</u>	<u>Pt. II O.O. 53</u>
<u>13.4.15</u>	"	<u>Taken on strength having been struck off in error</u>	"	<u>13.4.15</u>	" " " 54
<u>15.6.15</u>	<u>11th Res Bn.</u>	<u>Granted sick furlough</u>	"	<u>3.2.15 to 13.5.15</u>	<u>Pt. II O.O. 3706</u>
<u>28.6.15</u>	"	<u>Sol. Medically Unfit</u>	<u>Shomecliffe</u>	<u>25.6.15</u>	<u>Pt. II O.O. 796</u>

CAPT.
OFFICER IN CHARGE RECORDS
CANADIAN SECTION G. H. Q.LIEUT.
FOR LT: COL: I/C RECORDS. C.O.M.E.(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, Flying Smith, etc., etc., also special qualifications in technical Corps duties.

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

Casualty Form—Active Service.

Regiment or Corps PRINCESS PATRICIAS CANADIAN LIGHT INFANTRY
Pte. SmithsonRegimental No. 1313 Rank _____ Name _____Enlisted (a) 12/8/14. Terms of Service (a) Duration of War Service reckons from (a) 12/8-14Date of promotion to } _____ Date of appointment } _____ Numerical position on } _____
present rank } to lance rank } 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				

Discharged.
in
Canada.
Medically Unfit
for
Further Service

..... Lt., Col.
O.C. 11th. Reserve Battalion.

(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, Shoemaker, Smith, etc., etc., also special qualifications in technical Corps duties.

Report		Place	Date	Remarks taken from Army Form E. 213, Army Form A. 36, or other official documents.
Date	From whom received			

Ottawa, January 24th, 1921.

TO WHOM IT MAY CONCERN.

This is to certify
that No. 1313 B. Q. M. S. Smithson,
George Arthur Temple, was vaccinated on
the 12th day of September 1914, by a
Medical Officer of the Canadian Expedi-
tionary Force.

jc

Lieutenant,
for Lieut-Volonel,
Director of Records,
for Adjutant-General.

Doc. 6

DEPT
MILITIA & DEFENCE
MAR 22 1917
649-8-10
CANADA

PARTICULARS OF DISCHARGE.

1. Name Smithson, George Arthur Temple.
2. Regimental Number 724.727. 3. Rank B. Q. M. S.
4. Corps Inf. Bn. 109th Bn. C. C. A. C.
5. Date of Discharge 8-4-17.
6. Place of Discharge Quebec Dis. Depot.
7. Place to which transport given. (Give street address where possible.)

39 Daly Ave., Ottawa Ont.
Enlisted at; Lindsay Ont. 10-12-15.

8. Description at time of Discharge:—

Age	<u>34</u> years — months.	Descriptive marks
Height	<u>5</u> feet <u>9</u> inches.	<u>Scar. Neck.</u>
Complexion	<u>Dark</u>	<u>G. S. W. Left Temple.</u>
Eyes	<u>Hazel.</u>	
Hair	<u>Dark Brown.</u>	
Trade	<u>Accountant.</u>	

9. The above named man is discharged in consequence of

Being Med. Unfit. (Paresis. rt. arm and rt. leg.
Auth. R. R. + O Para. 392 Sec. 16. 1912. due to G. S. W. head.
(If medically unfit, state nature of disease or disability.)

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

40%.

11. Character

Good.

Date 19-3-17.

D.S.

Frank Beard

i/c Records.

Noted Sg. K. E.
28/3/17

Q.233-23-3-17

PARTICULARS OF DISCHARGE

1. Name *James H. Brown*
2. Regimental Number *1042*
3. Date of Discharge *10-1-1918*
4. Place of Discharge *Quincy, Ill.*
5. Rank to which promoted *Private*
6. Date of Promotion *10-1-1918*

7. Description of wound or disease
Wound of right arm, 10-1-1918
8. Description of wound or disease
Wound of right arm, 10-1-1918
9. Description of wound or disease
Wound of right arm, 10-1-1918
10. Description of wound or disease
Wound of right arm, 10-1-1918

11. The above named man is discharged in consequence of
Wound of right arm, 10-1-1918
12. The above named man is discharged in consequence of
Wound of right arm, 10-1-1918
13. The above named man is discharged in consequence of
Wound of right arm, 10-1-1918
14. The above named man is discharged in consequence of
Wound of right arm, 10-1-1918

15. The above named man is discharged in consequence of
Wound of right arm, 10-1-1918
16. The above named man is discharged in consequence of
Wound of right arm, 10-1-1918
17. The above named man is discharged in consequence of
Wound of right arm, 10-1-1918
18. The above named man is discharged in consequence of
Wound of right arm, 10-1-1918

Q.233

724727

DUPLICATE.
MEDICAL HISTORY SHEET.Surname SmithsonChristian Name George Arthur TempleExamined { on 10th day of December 1915
at Lindsay

Approved by

J. McCulloch Capt.
Medical Officer
Rank 109th Overseas Battalion, M.C. F.Birthplace { City or Town South Shields
County Durham EnglandApparent age 33 yearsTrade or occupation AccountantHeight 5 Feet 8 ¹/₂ Inches.Weight 160 Lbs.Chest measurement { Minimum 34 ¹/₂ inches.
Maximum expansion 39 inches.Physical development GoodSmall-Pox Marks noneVaccination Marks { Arm Right none Left Two
Number TwoWhen Vaccinated last August 1914(a) Marks indicating congenital peculiarities or previous disease none

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

Date	Result	VACCINATIONS.
<u>Aug. 1914</u>	<u>Good</u>	<u>J. McCulloch</u> M.O.
		M.O.
		M.O.

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>4.9.14</u>	<u>Good</u>	M.O.
<u>12.9.14</u>	<u>Good</u>	M.O.
		M.O.

Enlisted on 10th day of December 1915 at Lindsay

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>109th B. Batt</u>	<u>724727</u>		<u>10</u>
Transferred to.. ..	<u>M.C.F.</u>			<u>7.12.15</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.

Lincoln

Christian Name.

George Arthur Sewall

[illegible]

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 C.B.*

109th OVERSEAS BATTALION, C. E. F.

(2) Regimental Number..... *724727*

(3) Full Name of Soldier..... *George Arthur Temple Smithson*

(4) Place of Birth..... *Durham England*

(5) Are you married, or not?..... *yes*

(6) If married, state,
(a) Full name of your wife..... *Dorice Jean Temple Smithson*

(b) Present Postal Address..... *77 Victoria St Ottawa*

(7) Are you a widower?..... *—*

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

If so, give number of boys and girls..... *one boy one girl*

Also their names and ages..... *George Alexander 6 yrs*

Marion Fredia 8 yrs

(9) Is your Father alive?..... *no*

If so, state name and address

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

If so, state name and address..... *Mrs G. S. Lanthorn*

..... *14 Gosforth Terrace Gosforth*

..... *Northumberland*

(11) If your Mother is a widow..... *yes*

Are you her sole support, or not?..... *yes*

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

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

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

(15) Are you insured?..... *yes*

If so, in what Company?..... *no*

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 19 1916*

[Signature]
Officer Commanding.

TRANSFER STATEMENT OF CLOTHING & NECESSARIES.

INSTRUCTIONS.—This Statement will be made out by the Depot, and will be sent to the Commanding Officer of the unit receiving the transfer, who will retain it as a voucher to the unit's clothing account. The Statement will also be forwarded in the case of men in the United Kingdom passing from Hospitals to Depots or units.

STATEMENT showing the Articles in possession of (Regimental No.,

Rank and Name) 724727 Q.M.S. Smithson G.C.

proceeding from the Canadian Discharge Depot, Buxton

to the Discharge Depot, Quebec.

Date of enlistment _____ Date of transfer _____ 191 .

FOR DETAIL OF ARTICLES, see overleaf.

Certified that this Statement, as detailed overleaf, is correct in every particular.

(1) Station Buxton. George A. Skelton
Lieut. & Q.M.
Commanding Squadron, Battery, &c.

Date 19 FEB 1917 Canadian Discharge Depot, Buxton
Name of Unit man is leaving.

(2) Station _____
Commanding Squadron, Battery,
or Company.

Date _____
Name of Unit man is joining.

ARTICLES OF CLOTHING & NECESSARIES IN POSSESSION.

Articles not in possession should be struck out of the list. Any articles not included should be inserted.

Clothing	No.	Necessaries	No.
Aprons, Kilt	1	Badge, Cap.	1
Boots, Ankle, pairs ..	1	Bag, Kitt	1
Caps, Service Dress ..	1	Braces, pairs	1
Caps, Glengarry	2	Brass, Button	1
Drawers, pairs <i>1 pair</i> ..	2	Brush, Brass	1
Frocks, Canvas	1	" Blacking <i>1 pair</i> ..	1
Greatcoat, D.M.	1	" Clothes <i>1 pair</i> ..	1
Jackets, Service Dress ..	1	" Hair	1
Kilts	1	" Polishing	1
Pantaloon, Cord, pairs ..	1	" Shaving	1
Putties, pairs <i>1 pair</i> ..	1	" Tooth	1
Spurs, Jack, pairs ..	1	Cap, Comforter	1
Trousers, Service Dress, pairs <i>1 pair</i> ..	1	Comb, Hair	1
Trousers, Canvas or Khaki } Drill Overalls, pairs ..	1	Disc, Identity, with Cord ..	1
Waistcoat, Cardigan <i>1 pair</i> ..	1	Fork	1
Coat, Waterproof	1	Garters, Highland, pairs ..	1
Gloves, Leather, pairs ..	1	Holdall	1
Gloves, Motor Cyclist, pairs ..	1	Hose Tops, pairs	1
Goggles, pairs	1	Housewife	1
VEST'S WOOLLEN <i>1 pair</i> ..	2	Knife, Clasp	1
RAZOR & CASE	1	Knife, Table	1
		Laces, Leather, Spare, pairs ..	2
		Shirts, Flannel <i>1 pair</i> ..	3
		Socks, Worsted, pairs ..	2
		Spoon	2
		Titles, Metal, pairs <i>1 pair</i> ..	2
		Towels, Hand	2
		Wax Polish, Tin	2

I certify that this statement is correct.

Date **19 FEB 1917**

Signature of the Soldier

John MacArthur

Med. Boards held at Bramshott. 21-12-16.
+ Quebec. 5-3-17.

Sent to L. R. 19-3-17

D.S.

31 JAN 1917

1917

From:-

Officer Commanding.,
Canadian Discharge Depot.
Buxton. Berbyshire.

To:-

Officer Commanding.,
Canadian Discharge Depot.
Quebec.

724727 *R. W. H. Smithson P. C.*

The following documents of the marginally noted
soldier are not available at this Depot:-

G. D. B. ~~Attestation Paper.~~

~~Casualty Form.~~

~~Field Conduct Sheet.~~

Company Conduct Sheet.

Regimental Conduct Sheet.

We cannot therefore, correctly assess the character
on Para. 3.A.F.B. 268.

His character while at this Depot has been:-

GOOD

Application has been made to the Officer i/c
Records C.E.F. London for these documents, which will be
forwarded to you immediately they are received at this Depot.

R. W. H. Smithson

Lieut.
for Officer Commanding.,
Canadian Discharge Depot.

RLH/LHB.

CANADIAN DISCHARGE DEPOT, BUXTON, DERBYSHIRE.

STATEMENT ON DISCHARGE.

STATEMENT of Name..... *Smithson G. G. T.*
Reg. No. *724 727* Rank... *B. Q. M. S.*
Unit..... *109th Battalion*
Place... *BUXTON* Date... *19 FEB 1917*
To Officer i/c Embarkation at... *BUXTON*

I hereby request my Discharge in... *Canada*

I desire to make the following remarks, on the understanding that this statement may be produced as evidence in any subsequent inquiry in regard to the following matters :-

CLOTHING -

FOOD & TREATMENT
AT DISCHARGE DEPOT -

PAY -

I understand that it is my privilege to make these remarks and with the exception of the points raised, I hereby affirm that I have no complaints to make regarding my treatment at the Canadian Discharge Depot, Buxton.

I also certify that any delay in the carrying out of my discharge has been explained to my satisfaction.

Signature..... *G. G. T. Smithson*

Rank.....

WITNESSES

H. E. MacLellan Capt
Adjutant C. D. Depot, Buxton.
Lt. Buller
O.C., C. D. Depot, Buxton.

N.B. This statement will be prepared in duplicate, and disposed of as follows :-

ORIGINAL - To be forwarded with Discharge Documents.

DUPLICATE - To be filed for reference by O.C., Canadian Discharge Depot, Buxton, Derbyshire.

No. 724727 - QMS. Smithson, G.A.T. - 109th Battn.

Will in the possession of

Stewart & Scott,

LINDSAY,

Ont.

55808

Paymaster's List, to Div. Paymaster, Aldershot Command.

No. 78475 - U.S. DEPARTMENT OF AGRICULTURE - BUREAU OF PLANT INDUSTRY

in the collection of

Stewart & Co.

LIBRARY

Out.

Examiner's list, to Div. of Plant Industry, Bureau of Plant Industry, U.S. Department of Agriculture.

Ottawa, 13-11-20

From:

The Adjutant-General,
Canadian Militia.

To:

724727 Geo. A. Temple-Smithson
391 Daly Ave
City

Sir:

Enclosed herewith please find Military
Will executed by you while in the C.E.F., and
returned, the same being your own property.

OB Thompson

Lieut., for Lt.-Col.,
Director of Records,
for Adjutant-General.

D-1a.
EBM.

THE
LIBRARY
OF THE
MUSEUM OF
ART AND
ARCHAEOLOGY
OF THE
UNIVERSITY OF
CAMBRIDGE

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OF THE
UNIVERSITY OF
CAMBRIDGE

EXAMINATION BY STANDING MEDICAL BOARD, BRAMSHOTT.

DEPT
MILITIA & DEFENCE
1916
MAR 22 1917
HQ. CANADA

No. 724727 Rank B.2.M.S. Name Smithson, G.A. 22-11-
Local Unit 109th Bn Overseas Unit _____ Age 34

Examination held at Bramshott, Hants.

DISABILITY. Paresis right arm & leg

~~Overseas~~—Local.
(scratch one out)

PRESENT CONDITION.

This man was wounded - 26-1-15 -
After treatment he was invalided to
Canada. Never recovered full use of leg
or arm - joined up a second time in Canada
but is unable to carry on except for ceremonial duties

Board recommends:

1. Fit for Duty.
2. Fit for duty after _____ weeks physical training.
3. Fit for Base duty _____ weeks.
4. Fit for Permanent Base Duty.
5. Discharge. yes, E B179.

Signatures:

Pres. C.E. Campbell

Members { L.A. Dickson Major.
H. Hughes Capt.

Approved.

Bramshott 22-11- 1916.

for A.D.M.S.
Canadian Troops, Bramshott.

Discharged: Owing to having been declared by Medical Board as fit for permanent base duty only and no suitable employment or such duty available, although fit for employment in civil life.

W. L. Simpson, Captain
for Col., C.E.
Director of Recruiting and Organization, C.E.

D 123.23-3-17

1-8-26
223

EXAMINATION

NOT CHARGE MAR 22 1917

STANDING MEDICAL BOARD

R. C. MAR 23 1917

MAR 23 1917

PRESENT CONDITION

[Faint handwritten signature]

LTER

Rank *Det.* *B.Q.M.S.* Name SMITHSON, George Arthur Temple ✓

Reg'l No. 724727 ✓

Unit 109th, Bn. If in perm. Corps, }
What Unit? }

Married or Single Married.

Place and Date of Enlistment Lindsay, 10th, December, 1915. Place of Birth South Shields. ✓

Name and Address, Next-of-Kin Dorice Smithson. ✓
Durham, England.

77 Victoria St, Ottawa, Ontario, Canada, ✓ Relationship Wife. ✓

Assigned Pay Monthly \$

Payable to

Relationship

Separation Allowance \$

Payable to

Relationship

NFB No. 4159

Discharge, Date and Place

Reason

Character *FC 315*

H. W. & V., Ltd.—7165-16.

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS. Taken from Official Documents.
Date.	From whom received				
Arrived in England per H. M. T. 2810 31-7-16					
5. 8. 16	O.C. 109 th	App'd ^{Prov} B.Q.M.S.	Deney	5-8-16	Pt. II D.O. 28 + D.O. 285
8. 12. 16	"	S.O.S. to 124 th Bn.	Witley	8. 12. 16	343
9. 12. 16	O.C. 124 th	S.O.S. on transfer from 109 th Bn.	Witley	8. 12. 16	" 2.65-
23. 3. 17	"	Pt. II D.O. 265 amended: - Attached to 124 th Bn. in capacity to be attached to 109 th Bn.	"	8. 12. 16	" 80
26. 1. 17	"	S.O.S. on transfer to CCAC.	"	25. 1. 17	26 Cancelled by Pt. II D.O. 80 27-23/3/17.
15. 1. 17	CCAC	Tost m Com 109 th for C.R.	Hastings	2. 12. 16	Pt. II D.O. 30.
1. 3. 17	109 th Bn.	S.O.S. to CCAC + att to 109 th Bn.	Witley	2. 12. 16	Pt. II D.O. 4.
1. 3. 17	"	Pt. II D.O. 343 Am to 124 th Bn. - Ceases to be att to 109 th Bn. + att to 124 th Bn. Having proceeded to Canada for discharge - Cease att to 109 th Bn.	"	8. 12. 16	" y.
24. 2. 17	CCAC	Bn. list to S.O.S.	Hastings	20. 2. 17	Pt. II D.O. 94.
P.T.O.					

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.				
6.4.17	124th Bn	Seems to be attached to the Base Co 124th Bn on proceeding to Canada for discharge with effect from 20/2/17	Witley	20.2.17	Pt 87
—	Discharge Depot	Awaiting P. & C. Board decision		2-3-17	210/391. O'Haug. Ont. Dally. Adv.

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

Casualty Form—Active Service.

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

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

Regimental No. 424/24 Rank Private Name Smithson George Arthur Temple
C. E. F.

Enlisted (a) 9.12.15 Terms of Service (a) D of W. Service reckons from (a) 9.12.15

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

Extended _____ Re-engaged _____ Qualification (b) Accountant

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	24.4.16	
		Disembarked England	Liverpool	31.7.16	
		Appointed A.P. M. Sergt.	Oxney.	5.8.16	Part II Order 216.
8/12/16	Oct 109 th	Transferred to 124 th Bn.	Witley	8/12/16	Lieut. Part II No. 443.
					Adjutant Capt. 109th Overseas Battalion, C. E. F.
9-12-16	124th. Bn.	Taken on strength of 124th. Bn., C.E.F.	Witley Camp	8-12-16	Part III Orders 265 MAJOR, ADJUTANT, 124th BATTALION C.E.F.

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

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				

C.C.A.C. SUB-OFFICE, BRAMSHOTT.

*Attached
b.D.D.*

26 JAN 1917

AB Laing Capt-

DISCHARGED.
under
Para 392, Sec. 16, K. R. & O. 1912.
Being no longer physically
fit for war service.

R. M. Hazelton

Lieut.
Officer i/c Discharges
for.- Officer Commanding,
Canadian Discharge Depot.

101113
1260

To Adjutant Gen
H. K. P.

724727.

MEDICAL HISTORY SHEET. ORIGINAL

Surname SmithsonChristian Name George Arthur Temple

Examined

on 10th day of December 1915
at Lindsay

Birthplace

City or Town South Shields
County Durham England

Apparent age

33 years

Trade or occupation

Accountant

Height

5

Feet

8½

Inches

Weight

160

Lbs.

Chest measurement

Minimum 34½ inches.Maximum expansion 39 inches.

Physical development

Good

Small-Pox Marks

None

Vaccination Marks

Arm Right None Left TwoNumber Two

When Vaccinated last

August 1914(a) Marks indicating congenital peculiarities or previous disease None

(b) Slight defects but not sufficient to cause rejection

neuritis right arm

Approved by

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

Date

Fit or Unfit

EXAMINED FOR RE-ENGAGEMENT,

M.O.

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

10th

day of

December1915 atLindsay

Joined on enlistment

CORPS.

REG'TL NUMBER.

HABITS.

DATE.

109th Batt
C.O.E.F.72472710
9.12.15

Transferred to.. ..

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
Bramshott Camp, Hants. 21 DEC. 1916 APPROVED.	22-11-16	Transferred to Bramshott Camp.	Discharge E C.O.E.F.
Bramshott Camp, Hants. 21 DEC. 1916 APPROVED.	21-12-16	As above	Class (ii) C.O.E.F.
		Colonel, A.D.M.S. Canadian Troops, Bramshott Camp.	PRESIDENT MEDICAL BOARD, BRAMSHOTT.

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.

Christian Name *George Arthur Taylor*

Samuel Johnson

STATION.	Date of Arrival at the Station.	DATES OF						DISEASE.	Number of days in Hospital.	Remarks on nature of the disease : how induced : if mild or severe : if completely recovered from ; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
		Admission into Hospital.			Discharge from Hospital.						
		Day	Month	Year	Day	Month	Year				
										<p>DISCHARGED.</p> <p>under</p> <p>Para 392, Sec. 16, K. R. & O. 1912.</p> <p>Being no longer physically fit for war service.</p> <p><i>R. M. Hazelton</i></p> <p>Lieut, Officer i/c Discharges for.,- Officer Commanding, Canadian Discharge Depôt.</p>	

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	1313	Pte	Smithson.	G.
Year	Unit.	Age.	Service.	
1915	I.P.C. 1st	32.	7 months.	
Station and Date.	Disease			
1st Northern History General Hosp! At Ypres on Jan 25 th 1915 he was shot Newcastle whilst in the trenches by a bullet which on Tyne. passing through an inserted shovel struck the left side of his head inflicting a wound. He was also struck on the left side of the head higher up by pieces of the shovel. He was unconscious with right sided hemiplegia & loss of speech. At the Base Hospital his speech recovered and his Hemiplegia gradually grew less until when he was sent to Hospital in England he only suffered from loss of power in right arm & hand.				
	(Signed) J.W. Heslop. Capt R.M.C.			
	Subsequent Progress.			
	He is now in excellent general condition but the paralytic condition of his right hand & arm persists & shows no marked improvement. Recommendation As his progress is so slow may take months to recover the power of his hand & arm and as his wife & children are in Canada, he is anxious to be given sufficient furlough to visit them.			
	(Signed) J.W. Heslop Capt R.M.C.			

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

MEDICAL CASE SHEET

Station
and Date.

Christian Name

Surname

Rank

Regimental No.

No. of
Admission
and
Discharge
Book

Year

Station
and Date

Disease

Car

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

M. F. W. 12.
50m.—6-16.
H. Q. 1772-33-819.

Mr.
~~Mr.~~ *S. M. Scott*

Address *Lindsay*
Ont.

By Whom Assigned *Smithson*

Regtl. No. *724727*

Rank *C O M S*

Corps *109*

Rate *10⁰⁰*

AUG 7 1916

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			<i>Cable 761444 Sept 11.16 C.A.K.</i>
Sept.				<i>Stop payment 1-17.</i>
Oct.				<i>Assignee has enlisted</i>
Nov.				<i>3 M Dec 7-16</i>
Dec.				<i>SM 4/1/19</i>
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				



MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12a

50m. - 8-16

1772-2-21

Sheet No. 2.

Miss S. M. Scott

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

PAYMENTS.

Name of Soldier

*Smithson G. J.**724727**60ms 109B*

Month.	Year.	Cheque No.	Amt.	Remarks.
				<i>10⁰⁰</i>
April	1916			<i>Cable 761AAA Sept 11/16 Cax.</i>
May				
June				
July				<i>Acct now open.</i>
Aug.				
Sept.		<i>720220</i>	<i>20</i>	
Oct.		<i>023738</i>	<i>10</i>	<i>acc to close after payment</i>
Nov.		<i>728627</i>	<i>10</i>	<i>of \$20⁰⁰</i>
Dec.		<i>R32177</i>	<i>10</i>	<i>Revised</i>
Jan.	1917			<i>Sir Mrs Robert's letter Oct 4/16</i>
Feb.				<i>acc closed 1/17</i>
March				<i>J. N. 4/1/17</i>
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

PAYMENTS.

Name of Soldier _____

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

10/12/15

MILITIA AND DEFENCE

M. F. W. 11.
20m.—11-15.
H. Q. 1772-39-815.

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SEPARATION ALLOWANCE

Name *Dorice Smithson*Name of Soldier *Smithson G.A. J.*Address *77 Victoria St*Regtl. No. *724 727**391 Daly Ave, Ottawa*
*Out*Rank *Pte. Serjt* (authority Mr. Hobson)Corps *109th Battr*

Relation to Soldier

To what Corps belonging

wife, child or mother

when called out

} *wife*

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
Apl.				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916	<i>425098</i>	<i>34-</i>	
Feb.				
March		<i>234381</i>	<i>25-</i>	

ACCOUNT CLOSED
DATE..... PER.....
W



10/12/15.

MILITIA AND DEFENCE

M. F.
60m.
1772-68-518

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2

Louise Smithson

PAYMENTS

Name of Soldier

Smithson G.A.T.

L. L. Job 89002.-Req. 6213

Wife

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916	E 84	58 -	58 Handed out 14-4-16.
May		S 5717	25 -	25
June		U 6229	25	25
July		X 10216	25	25
Aug.		Y 13984	25	25
Sept.		X 17484	25	25
Oct.		U 20803	25	25
Nov.	15-8 M.D.	D 23473	25	25 391 Daly Ave, Ottawa Ont.
Dec.		D 27388	25	25
Jan.	1917	A 31166	25	25
Feb.		A 34116	25	25 392
March		D 36864	25	25 36864 Can call d
April		A 39657	25	25
May		A 3177	6	6 ap closed reid on Northland mailed 21-4-17
June			398	P.D.P 13 6/7
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				



Pay S.A. to 8.4.17 per
Capt. Conger ruling
J. M. & Guin

March 12

ACCOUNT CLOSED

DATE PER

Pension granted 9/4/17.

N.P. 25/4/17.

MILITIA AND DEFENCE
SEPARATION ALLOWANCE
OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

PAYMENTS.

Name of Soldier

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

MILITIA AND DEFENCE
 ASSIGNED PAY
 OVERSEAS CONTINGENTS

M. F. W. 12.
 50m.—6-16.
 H. Q. 1772-39-319.

Wife
 To Whom *Mrs Dorice Smithson*

By Whom Assigned

Smithson G. J. J.

Address

77 Vittoria St
391 Daly Ave Ottawa Ont.

Regtl. No.

724727

Rank

C.O.M.S.

Corps

109 Bn

Rate *20.⁰⁰*

AUG 1 1916

Call 761AAA Sept 11/16 CAR

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			<i>Stop Payments March 1/17</i> <i>Discharged to Canada</i> <i>3 M 8/2/17 C.R.C. 3/4/17</i> <i>Prev noted by 7.X.</i>
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				<i>Closed</i>
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				



MILITIA AND DEFENCE

M. F. W. 128

50m-1016

1772-89819.

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2.

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

PAYMENTS.

Name of Soldier

Smithson G. J. J.

724727

COMB.

109 Bu

cat

Month.

Year.

Cheque No.

Amt.

Remarks.

Aug 1916

April

1916

20.00

Cable 761 AAA Sept 11.16 CAX

May

June

July

Aug.

Sept.

Oct.

Nov.

Dec.

Jan.

Feb.

March

April

May

June

July

Aug.

Sept.

Oct.

Nov.

Dec.

Jan.

Feb.

March

April

May

June

July

1917

1913

L 15983

L 23411

Z 28626

R 32121

F 40746

E 48098

40.00

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20

Sp Reg 12-9-16.
20 future

391 Daly Ave Ottawa

16-11-16 SKW

140.00 Acc'd Closed
Reta Northland 20/3/17 J. B. X 4/3/17Pension granted 9/4/17
J. B. X 25/4/17

P. K. F. 23/6/17 J. B. X

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

PAYMENTS.

Name of Soldier _____

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

SEPARATION ALLOWANCE

Name *Smithson Dorice*Address *77 Vittoria St.**Ottawa*

Relation to Soldier

wife, child or mother

} *Wife*

Name of Soldier

Regtl. No.

Rank

Corps

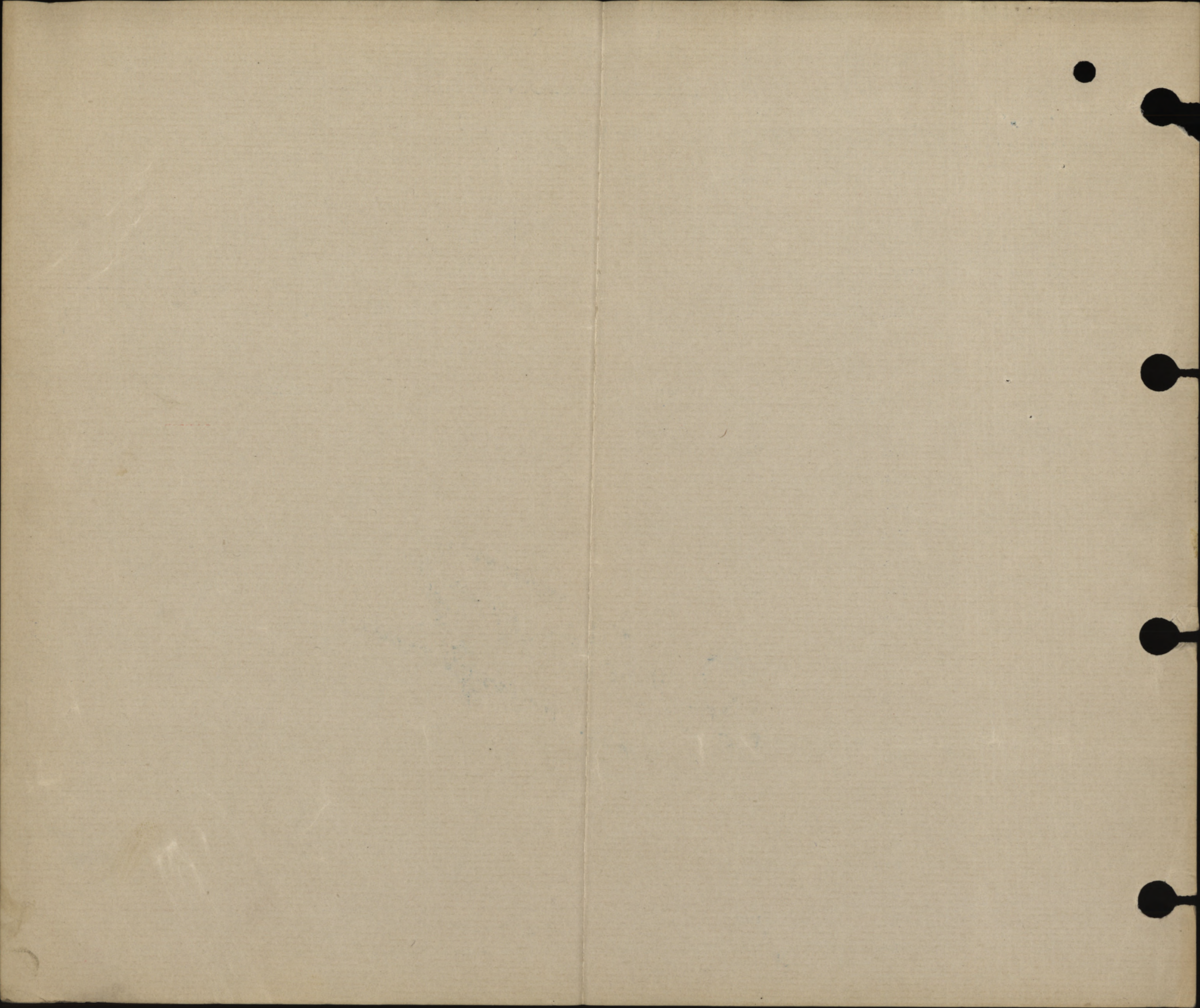
To what Corps belonging

when called out

*Smithson G. A. J.**724727**Sergeant**104th Battalion*

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			<i>See Report 12/4/16</i>
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
Apl.				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March		<i>E34381</i>	<i>25</i>	<i>25</i>



SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2.

L. L. Job 89002.-Req. 6813

Wife
PAYMENTS.

Name of Soldier

Smithson Sorce *Sgt. 724727* *Smithson G. D.*

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE
SEPARATION ALLOWANCE
OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

PAYMENTS.

Name of Soldier _____

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

Name Smithsonm Pte. I.C.

Regimental No. 1313

Name and address of next-of-kin

Unit 11th Battln P.F. C.L.G.

77 Victoria St.
Ottawa, Ont.

Date of enlistment

Place of “

Married (yes or no)

Date and place discharged

Amount of pay assigned monthly \$ 20.⁰⁰ June 15

Reason for discharge *Medically Unfit*

Sep. Alice
 To whom payable
 July 15th 20⁰⁰
 Mrs. D. Smithson
 77 Victoria St. Ottawa

Character on discharge

Ship Metegama 4-7-15 P.C. 86/2164 — 4-10-15

Date		PAY		Field Allowance		Other Credits	Total Credits	Voucher	Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount	No.	Date				
	25-6-15												L. P.C.
26-6-15	3-7-15	8	100	8 00	8	10	80		41 30			41 30	L. O. Due Pd
4-7-15	3-10-15	92	100	92 00	3	10	30	66 75	159 05			159 05	L O Due Pd.
7/7/15	3/10/15				89	10	8 90	890	387	890		890	Med Board. O.H.C. Paid underpaid due
Pensioned P.C. 86/2164													
<p>S/a adj. 1/7/15 - 3/10/15</p> <p>For to long delay ^{62 00} 1271</p> <p>Rem 28.2 amount of \$12.71 passed to Acc. Section (a.a.p.)</p> <p>same to be passed to Central Suspense Ledger</p> <p>by Acc. Section 23-1-70</p> <p>1271 1271 ⁰⁰ 62 18</p> <p>sent. P.C. rendered P.P.P. 59 7</p> <p>E.D. 15/9 P 20</p>													

[illegible]

~~1611 2/320~~

DE

Mrs. G. A. P. Smithson

M. F. W. 127.
50M -6 17.
1772 39-1140.

Total	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Over-payments to be Recovered	Total Amount Paid
Credits	Cheque No. A	Date	Amount 30 days	Cheque No. B	Date	Amount 30 days	Cheque No. C	Date	Amount 31 days		
91 days											
257 ⁰⁰	254	28/6/17	85 ⁰⁰	269	30/7/17	85 ⁰⁰	269	25/8/17	87 ⁰⁰		257 ⁰⁰
18^t	G3911	3/2/19	70⁰⁰			Bret Ford			20000		
18^t	G3912	3/2/19	30⁰⁰			1629 B 3rd G412551	29-3-19		2800 ✓		
1005^a	2nd G17505	17/3/19	70⁰⁰			1629 B 2nd G402552	29-3-19		1500 ✓		
2nd	G17506	.	20⁰⁰								
			200 ⁰⁰								

Remarks:

Strathcona Ave,
Westboro -
Ont.

ok. J. Stephens
Cavalry
68540-15

MILITIA AND DEFENCE
SEPARATION ALLOWANCEName *Smithson, Jeanne, D. Mrs*Name of Soldier *Smithson, P. E. G. A. D.*Address *370 ~~Elmwood St.~~*Regtl. No. *1313.**177 ~~St. Patrick St.~~ Ottawa, Ontario.*

Rank

Corps *P. P. C. L. D.*Relation to Soldier } *wife.*To what Corps belonging } *N. H. D. Y.*

wife, child or mother }

when called out }

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.		<i>B526</i>	<i>20 -</i>	
Oct.		<i>B941</i>	<i>20 -</i>	
Nov.		<i>B2966</i>	<i>20 -</i>	
Dec.		<i>D3755</i>	<i>30 -</i>	
Jan.	1915	<i>D4467</i>	<i>20 -</i>	
Feb.		<i>D5378</i>	<i>20 00</i>	
March		<i>D6331</i>	<i>20 -</i>	
Apl.		<i>D7236</i>	<i>20 -</i>	
May		<i>D8729</i>	<i>20 -</i>	
June		<i>B10967</i>	<i>20 -</i>	
July		<i>C11891</i>	<i>20 -</i>	<i>Cancelled 9/15</i>
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

ACCOUNT CLOSED
DATE.....
PER.....
*W**Dischgd-medl-unfit*
File #6-1-25
Recommended for Pension
Granted Pension Oct 3 1915

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2.

Jeanne D. Smithson
PAYMENTS.

Name of Soldier

Smithson G. A. T.
(wife)

L. L. Job 310.—Req. 6574

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April				
May				
June				
July		A7632	62	62 R Casualty Adjustment
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

ACCOUNT CLOSED

DATE..... PER *W*

MILITIA AND DEFENCE
SEPARATION ALLOWANCE
OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

PAYMENTS.

Name of Soldier _____

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

NAME

Smithson, George Arthur Sample

Regimental No. 1313

Unit

P. P. C. L.V.

Date of enlistment

Place of

Married (yes or no)

Amount of pay assigned monthly \$ 20.00

To whom payable

Mrs D. Smithson

Name and address of next-of-kin

Mr G. A. V. Smithson,
370, Gloucester St.
Ottawa, Ont., Can.

Date and place discharged

Discharged 25/6/15

Reason for discharge

Do 796 28/6/15

Character on discharge

Date		PAY		Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount		No.	Date					
									2 nd Sep		5 00	20 00			
									9 th		10 00				
Sep 1	Sep 30	30	1.00	30 00	30	1.00	30 00	33 00			15 00	20 00		35 00	Insurance 2.00
Oct 1	Oct 31	31	1.00	31 00	31	1.00	31 00	34 10			10 20	20 00	2 00	32 20	
Nov 1	Nov 30	30	1.00	30 00	30	1.00	30 00	2 10			15 20	20 00		35 20	
Dec 1	Dec 31	31	1.00	31 00	31	1.00	31 00	10 20			15 20	20 00	1 10	36 30	1.90 - 2 of 1 way pay 80 112
Jan 1	Jan 31	31	1.00	31 00	31	1.00	31 00	5 10			10 20	20 00	1 90	31 90	2.20 -
Feb 1	Feb 28	28	1.00	28 00	28	1.00	28 00	2 20			13 50	20 00		33 50	advance from 2 nd Southern Hospital Warwick
Mar 1	Mar 31	31	1.00	31 00	31	1.00	31 00	2 10				20 00		33 10	* Dbal Feb.
Apr 1	Apr 30	30	1.00	30 00	30	1.00	30 00	13 60			10 20	20 00		30 20	16.60
May 1	May 31	31	1.00	31 00	31	1.00	31 00	16 60			15 20	20 00		35 20	15.70
June 1	June 15	15	1.00	15 00	15	1.00	15 00	15 70			20 00	20 00		35 70	L.P. 6 issued
" 16	" 25	10	1.00	10 00	10	1.00	10 00	31 50						31 50	25.6.15 to Headquarters

10⁰⁰ to be paid this way on embarkation

Net Bal 21.50

See over

Diff in Exchange 2 89

Net Bal 32.50

108 50

Can't find Dbal 24.61

DO. 796. 28.6.15
SP. 28.6.15
Office 1.4.15

[illegible]

P. 559.		
MARRIED OR SINGLE	Married	
PLACE OF BIRTH	South Shields Durham Eng.	
NAME AND ADDRESS OF NEXT OF KIN	Sovice Smithson 77 Victoria St Ottawa Ont Can	
RELATIONSHIP OF NEXT OF KIN	Wife	
NAME AND ADDRESS OF NEXT OF KIN		
RELATIONSHIP OF NEXT OF KIN		
SEPARATION ALLOWANCE MONTHLY \$	EFFECTIVE (DATE)	
PAYABLE TO		
RELATIONSHIP OF DEPENDANT		

[illegible]

Formerly No 1313. *B.R.N.*

REG'L. No. *724727* RANK *Sgt* NAME *Smithson George Arthur* Temple

IF IN PERMT. CORPS
WHAT UNIT

UNIT *109th Bn* TRANSFERRED TO *L.P.C. Branch* DATE *2-2-17* AUTHORITY *c.c. 1/2843*
5-2-17

PERMANENT FORCE ALLOWANCES TRANSFERRED TO DATE AUTHORITY

PLACE OF ATTESTATION *Lindsay Ont* TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION *Dec 10th 1915* TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY \$ ~~*10.00*~~ *10.00* DATE EFFECTIVE *Aug 1st 1916*

PAYABLE TO *1* *Loice Smithson* *77th Victoria St* RELATIONSHIP *Wife*
Ottawa Ont

ASSIGNED PAY MONTHLY \$ ~~*10.00*~~ *10.00* DATE EFFECTIVE *Aug 1st 1916*

PAYABLE TO *2* *S M Scott* *Lindsay Ont* RELATIONSHIP *Friend*
71st Bn *11/3/17* *Discharged to Canada*

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) *15-10-16* EFFECTIVE *15/10/16* REASON *assigned has enlisted*

DISCHARGE DATE AND PLACE *July 17 Canada* REASON AND AUTHORITY *061 2843. 07/17*

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE) *12/17*

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

Entered on N.E. Card Index. *EN*

Checked by *A. J. Williston*

Report No. 5167

Class III

No. of M. H. C. File

No. of Local File

DEPT. OF DEFENSE

MAR 22 1917

H.Q. CANADA

No. 724727 Rank ~~Infantry~~ BOMS Original Unit P.P. 6th Present Unit 109th
Age 34 Height 5 ft. 9 ins. Complexion Dark Eyes Hazel Hair D Brown Character N.R.
Date of enlistment 10-12-15 Where enlisted Lindsay Ont Where seen service France
Ship returned by S. S. NORTHLAND Date of arrival 2/3/17 Port of arrival St. John's
Birthplace England Religion Baptist
Name and address next of kin Wife above address
Cause of disability Paralysis right arm & right leg due to G.S.W. head.

Condition which prevents the soldier from earning a full livelihood

None compared to capacity on enlistment.

Degree of incapacity (Please state in fractions) Eng. Board Canadian Board 40%
Probable duration of incapacity Permanent.
Is final disability likely to prevent return to previous occupation?
Recommendation of Canadian Board
Destination to which transportation issued Ottawa, Ont.
Members of Board

INFORMATION TO BE FURNISHED BY SOLDIER

DEPENDENTS	NAME	AGE	WHERE-IF EMPLOYED	WAGES	STATE OF HEALTH
Wife	Wife				
Children 1	one boy	6			
3	one girl	8			
5					Good

Occupation prior to enlistment Accountant
Regular trade or profession
Average earnings previous to enlistment 25.00 per mo Any other income
Name and address of last employer own business
Rent per month 25.00 If purchasing property amount due and annual payment, \$
Taxes 64.00 If Homestead, when is patent due? \$84.50 per ann
If carrying life or accident insurance, annual premium
If in receipt of sick benefits or other insurance—name of society Squitable Amt. per mo. \$
If unable to follow previous occupation, name preference Accounting
At what age soldier left school? What grade, standard, &c., was he in?
Has he taken any Technical or Continuation classes, if so what?
Whether given Vocational Training while in Hospital in England. If so, what subjects?
References Not necessary
Witness I declare that the above statement is correct.
Date 5/3/17 Signature [Signature]

Recommendation by Interviewer as to classes likely to be of use, and general remarks:

Last Pay Cert. Cr., \$ Dr., \$ Amount paid at Depot H. Q., \$ L. P. C. leaving Depot, \$
Amount forwarded to H. Q. Unit, \$ Credit Clothing allowances, \$
Transf'd to Unit—Date Transf'd Class 1—Date Transf'd Class 3—Date
PENSION—Class..... Amount per year, \$..... Period granted for..... Dating from.....
First payment date.....

Carded 19-12-17

Carrollton Road

INFORMATION TO BE FURNISHED BY SOLDIER

Any other income

3rd per month

1. The first question is whether the defendant is a citizen of the United States. If the defendant is a citizen of the United States, then the court has jurisdiction over the defendant. If the defendant is not a citizen of the United States, then the court does not have jurisdiction over the defendant.

It carries life or accident insurance.

It is in the case of sick benefits or other insurance - name of society

11. unable to follow previous occupant's preference.

At what age did you first learn to read?

Has he taken any Technical or Continuation courses, if so what?

Whether giving a conditional release was in financial in England. In so what subjects?

25. 04. 2017

* N.B.—This Form being applicable to any Board of Officers or Committee or Court of Inquiry, this blank to be filled in accordingly.

The signature of each Officer composing the Board, etc., should be attached to the end of the proceedings.

PROCEEDINGS of a * Medical Board
 assembled at Kingston, Ontario.
 on the April 4th, 1916 District No.3.
 by order of D.O.C., Military District No.3.
 for the purpose of Examining and reporting on
the present physical condition of No.1313.
Pte.Geo.A. Temple-Smithson, P.P.C.L.I.

PRESIDENT.

CAPT.R.B.RICHARDSON A.M.C.

MEMBERS.

CAPT.R.M.FILSON A.M.C.

CAPT. H. DUNLOP A.M.C.

CAPT.E.B.MOLES A.M.C.

BOARD

The BOARD having assembled pursuant to order, proceed to

examine and report on the present physical condition of the above named private ~~No.~~ under H.Q. 649-S-10.

Find that he has suffered from paralysis of right arm and leg due to alleged injury received in action. Find that apparently complete recovery of leg has occurred. That present paralysis of the arm is ^{apparently} not sufficient to prevent his carrying on as Quarter-Master-Sergeant of the 109th., Battalion.

PRESIDENT..

R.B. Richardson

CAPT.A.M.C.

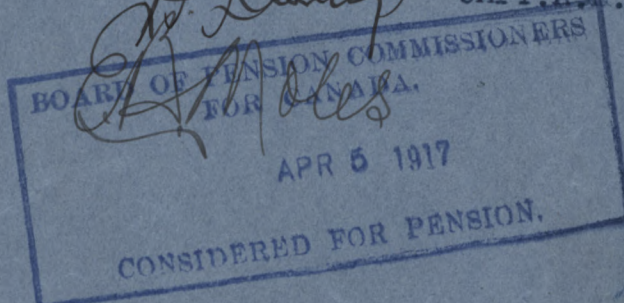
MEMBERS

R.M. Filson

CAPT.A.M.C.

H. Dunlop

CAPT.A.M.C.



31

The Asst. Adjutant-General, Mil. District No.3.

Forwarded.

I concur in this report.

DEPT
MILITIA & DEFENCE
APR -7 1916
H.Q. 649-8-10
CANADA

*ForWARDED Captain
Gammes was
fw*

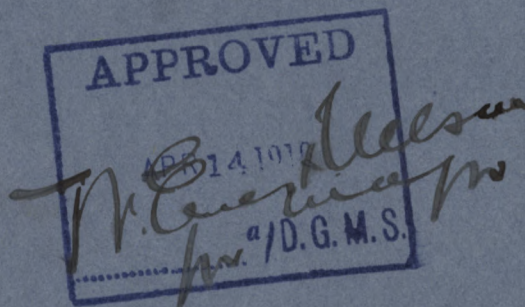
Lieut.Col. A.M.C.
A.D.M.S., Military District No.3.

Secretary Militia Council, Ottawa.

Forwarded.

[Signature]

Colonel.
Commanding Military District No.3.



The disposition of this man not known

Date

6-5-18

Clerk.

BY

P-2-12

25/1

Reserved for M.H.C.

Regt. No. 724727 Rank B.C.M.S. Surname Smithson Christian Name G.A.T.
Unit or Corps—(a) Overseas from United Kingdom 109th Bn. C.E.F. (b) In United Kingdom
Born at—Town South Shields County or Province Durham Country England
Date of Birth—Day _____ Month _____ Year _____ Age 34 yrs. _____ months.
Joined at Lindsay, Ontario Date Dec. 17th. 1915
Former Trade or Occupation Accountant
Permanent marks or peculiarities that will serve for future identification:—

Height—feet 5 inches 8½ Colour of eyes Blue
Signature of Soldier (for identification purposes) Geo. A. Smithson

Medical Report.

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

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

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

Disabilities
Group (a).

Disabilities
Group (b).

Paresis right arm and leg.

Disabilities
Group (c).

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

	Disease or injury to which the disability is due.	Place of origin.	Date of origin.
(i.) As to Group (a) above.			
(ii.) As to Group (b) above.	<u>Wounded 26.1.15.</u>	<u>Flanders.</u>	<u>26.1.15</u>
(iii.) As to Group (c) above.			

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

3. Is the disability due to disease contracted or injuries received prior to Active Service? Not applicable.

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

If yes, has Active Service aggravated it?

(ii.) As to Group (b) above?

If yes, has Active Service aggravated it?

(iii.) As to Group (c) above?

If yes, has Active Service aggravated it?

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

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

(ii.) As to Group (b) above?

Yes.

(iii.) As to Group (c) above?

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

(i.) While on duty? YES.

(ii.) While off duty? ---

(iii.) Was a Court of Inquiry held? NO.

(iv.) Where? ---

(v.) When? ---

(vi.) Opinion of the Court? ---

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

Wounded 26.1.15. In Hospital 4½ months. Invalided to Canada June 13th, 1915. Enlisted again December 10th, 1915. Has not been able to do anything but light duty ever since. Has had 4 operations in all.

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

Paresis partial of right arm and leg.
No other disability now except occasional headache.
All other systems working normally.

8. OPERATION. (i.) Was one performed? 2 in England, 2 in France.

(ii.) If so, state what. 3 Nerve operations, 1 for removal of bullet casing.

(iii.) Was one advised and declined? No.

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

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

(ii.) If so, describe. Not applicable.

10. DO YOU RECOMMEND:—

(a) ~~Fit for duty?~~

(b) ~~Fit for service?~~

(c) ~~Invalided to Canada?~~

(d) Discharge from the Service as permanently unfit? Yes.

Date of Report December 7th. 191 6

Signed H.O. Boyd, Capt.

Officer in medical charge of case.

Station Witley Camp.

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

P.D. Stewart, Major, C.A.M.C.

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

Dated at Bramshott.

Station, on December 18th. 191 6

* Delete if inapplicable.

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

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

11. Is the disability fully indicated in Part I. (1)?

Yes.

If not, indicate it.

12. Is the cause of the disability, fully indicated in Part I. (2)?

Yes.

If not, indicate it.

13. Was the disability caused or aggravated by—

(a) Negligence of the Soldier	<div>Caused? No.</div> <div>Aggravated? No.</div>	(b) Misconduct of the Soldier	<div>Caused? No.</div> <div>Aggravated? No.</div>
-------------------------------	---	-------------------------------	---

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

None compared to capacity on enlistment.

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

What part of the entire disability estimated next above in (14) is due to causes arising during Active Service? (Estimate at none, $\frac{1}{5}$, $\frac{2}{5}$, $\frac{3}{5}$, $\frac{4}{5}$, or all.)

Not applicable.

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

(i.) Is it permanent? No. Will gradually improve.

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

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

See History.

18. Remarks.

This M.C.O. states that he was boarded in Kingston, Ontario, and found fit for service as Quartermaster Sergeant, Scar above left ear and near left paracetal verten where bullet entered and escaped.
Flexion of arm is good.

19. Recommendation:—(a) ~~Fit for duty?~~

(b) ~~Fit for base duty?~~ Yes. Permanent. Class C 2.

(c) ~~Fit for Canada?~~

(d) ~~Discharge from service as pensioner only?~~

Classification for the Military Hospitals Commission.

Not classified.

Date of Board December 21st.

Signatures
of
the Board

C.E. Cooper Cole. Major. CAMC. President.

H. Macharen. Capt.

W. Fred Jackson. Capt.

Lorne Drum. Col.

Station Bramshott.

Approved December 21st.

A.D.M.S.

Dated at Bramshott.

Station Bramshott.

21.12.1916

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

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

on the _____ day of _____ 191_____

Members of the Board:—

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

Dated at _____ this _____ day of _____ 191_____

Signatures of
the Board

President.

No. <u>724707</u>	Name <u>Smithson, S.A.T.</u>	Sqn., Batty., or Company	<u>Staff</u>	Corps	100th BATTALION CANADIAN INFANTRY	Date of enlistment	<u>9/12/15</u>	G.C. Badges	<u>None</u>	Service or Proficiency Pay
Date of last entry in Company Conduct Sheet	<u>Jul</u>	No. and date of last drunk	<u>Jul</u>	Period not reckoning towards freedom from extra fine		Sheet No.	<u>1</u>	Signature O.C. Company, etc.	<u>A.R. Fairbank</u>	Character

Place	Date of offence	Rank	Cases of Drunkenness	Offence	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remarks
Widley	15/10/16	P. 12th Bn	1.	Drunken on Duty.	Capt. Elliott Sgt. Bullen	Severe Reprimand	15/10/16	Adj. G. H. Ballantyne	
				Transferred to 124 Bn D.	D. 343.	8-12-16		Adj. G. H. Ballantyne ADJUTANT 109th Overseas Battalion, C. E. F.	
	26 JAN 1917			C.C.A.C. SUB-OFFICE, BRAMSHOTT.	Attached to D. D.			AB Lang coll.	

Army Form B. 122

[P. T O.]

Place	Date of offence	Rank	Cases of Drunkenness	Offence	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remarks
				DISCHARGED. under Para 392, Sec. 16, K. R. & O. 1912. Being no longer physically fit for war service.					
				<i>R. M. Hazelton</i> Lient, Officer i/c Discharges for., - Officer Commanding, Canadian Discharge Depôt.					

121195
Reserved for M.H.C.

Regt. No. *724727* Rank *B.G.M.S.* Surname *Smithson* Christian Name *G.A.T.*
 Unit or Corps—(a) Overseas from United Kingdom *109 Bn C.E.F.* (b) In United Kingdom
 Born at—Town *Smith Shields* County or Province *Durham* Country *England*
 Date of Birth—Day Month Year Age *34* yrs. months.
 Joined at *Lindsay Ontario* Date *here 10/19/15*
 Former Trade or Occupation *Accountant.*
 Permanent marks or peculiarities that will serve for future identification:—

Height—feet *5* inches *8 1/2* Colour of eyes *Blue*
 Signature of Soldier (for identification purposes) *G.A.T. Smithson*

Medical Report.

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

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

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

Disabilities
Group (a).

Disabilities
Group (b).

Paresis right arm & leg.

Disabilities
Group (c).

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

	Disease or injury to which the disability is due.	Place of origin.	Date of origin.
(i) As to Group (a) above.			
(ii) As to Group (b) above.	<i>Wounded 26.1.15.</i>	<i>France</i>	<i>26.1.15.</i>
(iii) As to Group (c) above.			

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

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

Not applicable.

(i) As to Group (a) above?

If yes, has Active Service aggravated it?

(ii) As to Group (b) above?

If yes, has Active Service aggravated it?

(iii) As to Group (c) above?

If yes, has Active Service aggravated it?

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

(i) As to Group (a) above?

(ii) As to Group (b) above?

yes.

(iii) As to Group (c) above?

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

(i) While on duty? *Yes.*

(ii) While off duty? *No.*

(iii) Was a Court of Inquiry held? *No.*

(iv) Where? *Canada.*

(v) When? *June 13th 1915.*

(vi) Opinion of the Court? *Discharged.*

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

Wounded 26.1.15. In hospital 4 1/2 months.

Invalided to Canada. June 13th 1915.

Enlisted again Dec. 10th 1915.

Has not been able to do anything but light duty ever since.

Has had four operations in all.

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

Pain in partial of right arm & leg.

No other disability now except occasional headache all other systems working normally.

8. OPERATION. (i) Was one performed? *2 in England & 2 in Canada.*

(ii) If so, state what. *3 more operations & 1 for removal of bullet casing.*

(iii) Was one advised and declined? *No.*

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

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

(ii) If so, describe.

Not applicable.

10. DO YOU RECOMMEND:—

(a) Fit for duty?

(b) Fit for base duty?

(c) Invalid to Canada?

(d) Discharge from the Service as permanently unfit?

Yes.

Date of Report *Dec 7.* 191*6.*

Signed *H. O. Boyd, Ceph.*

Officer in medical charge of case.

Station *W. Atty Camp.*

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

Dated at

Bransford

Station, on

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

18-12-1916

* Delete if inapplicable.

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

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

11. Is the disability fully indicated in Part I (1)?

Yes.

If not, indicate it.

12. Is the cause of the disability fully indicated in Part I (2)?

Yes.

If not, indicate it.

13. Was the disability caused or aggravated by—

(a) Negligence of the Soldier

Caused?

No.

Aggravated?

(b) Misconduct of the Soldier

Caused?

No.

Aggravated?

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

None compared to capacity on ~~enlistment~~ enlistment.

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

What part of the entire disability estimated next above in (14) is due to causes arising during Active Service? (Estimate at none, $\frac{1}{5}$, $\frac{2}{5}$, $\frac{3}{5}$, $\frac{4}{5}$, or all).

Not applicable.

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

(i) Is it permanent?

No. will gradually improve.

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

Impossible to say.

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

See History.

18. Remarks.

This M. N.C.O. states that he was Board in Kingston, Ont. and found fit for service as Quartermaster Sergeant. Scar above left ear and near left paracetalverten where bullet entered and escaped. Flexion of arm is good.

19. Recommendation:—(a) ~~Fit for duty~~

(b) Fit for base duty? Yes, Permanent - Class ~~2111~~ (Cii)

(c) ~~Invalid to Canada~~

(d) ~~Discharge from Service as permanently unfit~~

Classification for the Military Hospitals Commission.

Not applicable.

Date of Board

21 NOV 1916

Station

Bramshott.

Approved

21 NOV 1916

Dated at

Bramshott.

Signatures of the Board

C. Cooper Cole ^{Pres.} President.
H. Markaren Capt
N. Markaren Capt

For G.O.C. & A.D.M.S.

Station

Bramshott.

21 NOV 1916

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

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

on the day of 191

Members of the Board :—

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

Classification for the
Military Hospitals
Commission

Dated at this day of 191

Signatures of
the Board

President.

is space to be left blank
for the Chelsea Number.

Proceedings on Discharge.

(When forwarded for confirmation the documents named on page 4 should be enclosed.)

No. <u>424 727</u>	Army Rank <u>B. I. M. S.</u>
Name <u>Smithson, Geo. Arthur Temple</u> (The name must agree strictly with that on enlistment, unless changed subsequently by authority.)	
Corps <u>C. C. A. C. 109th Bn. 10/12/15</u>	
Battalion, Battery, Company, Depot, &c.	
(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)	
Date of discharge <u>April 8, 1917.</u>	
Place of discharge <u>Canada.</u>	
1. Description at the time of discharge.	
Age <u>34</u> years _____ months	Descriptive marks. <u>Scar face</u> <u>G. S. W. Temple</u>
Height <u>5</u> feet <u>9</u> inches	
Chest measurement { girth when fully expanded _____ ins. range of expansion _____ ins.	
Complexion <u>Dark</u>	
Eyes <u>Hazel</u>	
Hair <u>Dark Brown</u>	
Trade <u>Accountant</u>	
Intended place of residence (To be given as fully as practicable) <u>391 Ballymore</u> <u>Westboro P.O. Ont.</u>	
2. The above-named man is discharged in consequence of <u>Para. 392, Sec. 16, K. R. & O. 1912.</u> <u>Being no longer physically fit for war service.</u>	
(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)	
3. Military character:— <u>Good</u>	
4. Character awarded in accordance with King's Regulations:—	
<p>for D. C. Discharge Depot Quebec.</p> <p>CANADIAN DISCHARGE DEPOT,</p> <p>Lieut.-Col.,</p> <p>Officer Commanding,</p> <p>Initials of Commanding Officer.</p>	
Certified that the above is an accurate copy of the character given by me on Army Form B. 2067* and that Army Form D. 489 was awarded in this case.	
<p>M. S. G. Comp.</p> <p>13-2-19-6-15</p> <p>Army Form B. 2088 has been issued to*</p>	

5. He is in possession of the following number of G.C. badges (if the man is a N.C.O. and enlisted prior to 1st July, 1881, the number he would have been entitled to had he not been promoted should be stated).

Is it probable that he will be entitled to another good conduct badge before the confirmation of these proceedings?

Classification for service, or proficiency pay... .. Class

6. Campaigns, Medals and Decorations

Certificate of education

7. His accounts are correctly balanced, and I have impartially inquired into all matters brought before me in accordance with Regulations.

(Place)

(Date)

Commanding Bttn. Regiment.

Officer Commanding

8. Certificate to be signed by the soldier on discharge.

I hereby acknowledge that I have received all my pay and allowances (including clothing allowance), and all just demands up to the present date, subject to the reservations of the claims noted on the 3rd page.

(Place)

(Date)

(Signature of Soldier.)

(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 at 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 towards engagement to (the date to which the record of service is completed) years days.

Further service " " (the date of confirmation of discharge) " ..

Total " ..

11. Confirmation of discharge.

The discharge of the above-named man is hereby confirmed for April 8, 1917, (date)

(Place)

(Date)

Signature Lt. Col.

Commanding officers (or the Paymaster if at Netley) will issue to every discharged soldier whose claim to pension, either on account of service or disability, is to be brought under the consideration of the Chelsea Board, a memorandum for his guidance on Army Form D. 401, and will at the same time transmit to the Secretary, Royal Hospital Chelsea, a descriptive return of the man on Army Form D. 400.

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.)

W. L.

John H. Smith

LIST OF DISCHARGE DOCUMENTS.

1. Proceedings on discharge.
(Army Form B. 268.)
2. Proceedings on transfer to reserve (if any).
(Army Form B. 2056.)
3. Duplicate attestation.
4. Army Form B. 97 (if any).
5. Declaration of change of name (if any).
6. Re-engagement paper (if any).
Army Form B. 136.
7. Authority for continuance, or extension, of service (if any).
Army Form B. 221.)
8. Court of Inquiry on an injury (if any).
(Army Form A 2.)
9. Regimental conduct sheet.
(Army Form B. 120).
10. Company conduct sheet.
(Army Form B. 121.)
11. Copies of convictions by Civil Power (if any).
12. Medical history sheet.
(Army Form B. 178).
13. Medical report on invalid (if any).
(Army Form B. 179).
14. Copy of receipt for purchase money (if any).
15. Attestation of fraudulently enlisted man for corps in which he has not been held to serve (if any).
16. Detailed statement of former service allowed to reckon towards pension (if any).
17. Copy of 3rd page attestation (in the case of men from abroad entitled to deferred pay who go to Netley or the discharge depot for discharge).
18. Descriptive return (Army Form D. 400), where required.
See section 11 on second page.
19. Active service casualty form.
(Army Form B. 103).
20. Employment sheet.
(Army Form B. 2066).

In the case of recruits who are rejected before, or on, final approval, the discharge documents will consist of—

1. Duplicate attestation.
(On third page the date and cause of discharge will be entered and signed by the competent military authority).
2. Medical history sheet (if any).
(Army Form B. 178).

Instructions as to the preparation, dispatch, and custody, of discharge documents.

1. When a soldier is to be discharged, the documents retained with the duplicate attestation will be placed inside this form. Should any of the documents be missing, an explanation of the deficiency, signed by the commanding officer, must be substituted for the missing document. The officer in charge of records will then extract from the original attestation, any documents required to complete the list of discharge documents enumerated in the margin, which will then be placed in this form in the sequence given.

2. When men are discharged from the colours at home as medically unfit, or with claims to pension, Army Form B. 268 will be sent confirmed, together with the duplicate attestation and documents retained therein to the officer in charge of records 10 days in advance of the date for discharge in the case of invalids, and 14 days in other cases. This officer will then extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin, place them in this form, and after carefully checking the duplicate attestation with the original forward the whole to the Secretary, Royal Hospital, Chelsea. When such men are discharged abroad, the same procedure will be adopted as above, with the exception that the discharge documents will be sent to the officer in charge of records immediately after discharge takes place (except in the case of men who are granted gratuities on discharge from local battalions or companies, Royal Artillery).

3. When soldiers are sent home from abroad for discharge, the documents retained with the duplicate attestation will be placed inside this form and sent home with the men for transmission to the officer who carries out the discharge, together with the following additional forms:—

- (a) Discharge certificate (Army Form B. 2079 or Army Form B. 264).
- (b) Character Certificate (Army Form B. 2067) if entitled.
- (c) Copy company conduct sheet (Army Form B. 121) when required under King's Regulations.

The duplicate attestation and documents retained therein will be sent to the officer in charge of records, who will extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin and place them in this form.

4. The discharge documents of re-enlisted pensioners, on re-discharge, will be sent to the officer in charge of records, who will extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin, place them inside this form, and forward the whole to the Secretary, Royal Hospital, Chelsea, irrespective of the cause of discharge.

5. The original and duplicate attestations of recruits who are rejected before, or on, final approval will be retained by the approving officer for one year, when they will be destroyed.

6. In all other cases the discharge documents will be sent, directly the discharge is carried out, to the officer in charge of records of the unit concerned.

7. Postage need not be paid, and receipts are not required, in the case of documents sent to Chelsea or to the War Office,

8. When the discharge documents of men not entitled to pension are sent to the officer who will have final charge of them, they are to be accompanied by Army Form B. 279, and that officer will, if they are found to be correct, sign and return Army Form B. 279. Should any document be missing, he must at once apply for it.

9. The officers having final charge of the discharge documents will arrange them according to regimental numbers, and enter the names in the alphabetical index, Army Book No. 129.

Rank and Name

(TEMPLE) SMITHSON, George Arthur

14.

Regimental No.

1313

Name and Address of Next-of-kin

Unit

P.P.C.L.I.

Mrs. G.A.T. Smithson

Date of enlistment

Aug. 28th, 1914

370 Gloucester St.,
Ottawa

Place of birth

England

Married (Yes or No)

Yes

Date and place of discharge

If in Permanent Force

Reason for discharge

Character on discharge

Promotions or appointments

N/E. R.B. No.

File R.L.

Category *mu Can*

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				
20/Dec/14	W.O.	Embarked.	Southampton.		
27/Jan/15	W.O.	Adm. 13 th Slaty H (G.S.W. severe).	Boulogne.		
30 Jan 1915 3/2/15.	O.C. Hosp	Left 2 nd Southen Genl Hll.	Bristol	3/2/15	Med. Dir. Slett.
12-4-15	O.C. Depot	Discharged from Hosp. Struck off as deserter by Lt. of B.	Shorncliffe	12-4-15	Part II orders # 53
13-4-15.	✓ "	Taken on strength, having been struck off in error.	"	13-4-15	Part II orders # 54.
15. 6. 15.	O.C. 11 Bn.	Granted sick furlough.		3. 2. 15	Part II O. 8706.
25. 6. 15		Returned to Canada per per S.S. Matigama for discharge Medically unfit.		13. 5. 15.	Part II O. 8706.
28. 6. 15.	O.C. 11 Bn.	Struck off strength. Med. Unfit.	Shorncliffe.	25. 6. 15.	Part II O. 8706.

Rank and Name

[illegible]

S. 14 P.P.C.L.I.

On His Majesty's Service.

No. 1313 Private Smithson G.A. 7.

Report of illness

Admitted 27. 1. 15. 13th Stth Boulogne G.S.W. Severe.
/ Report on an Invalid.

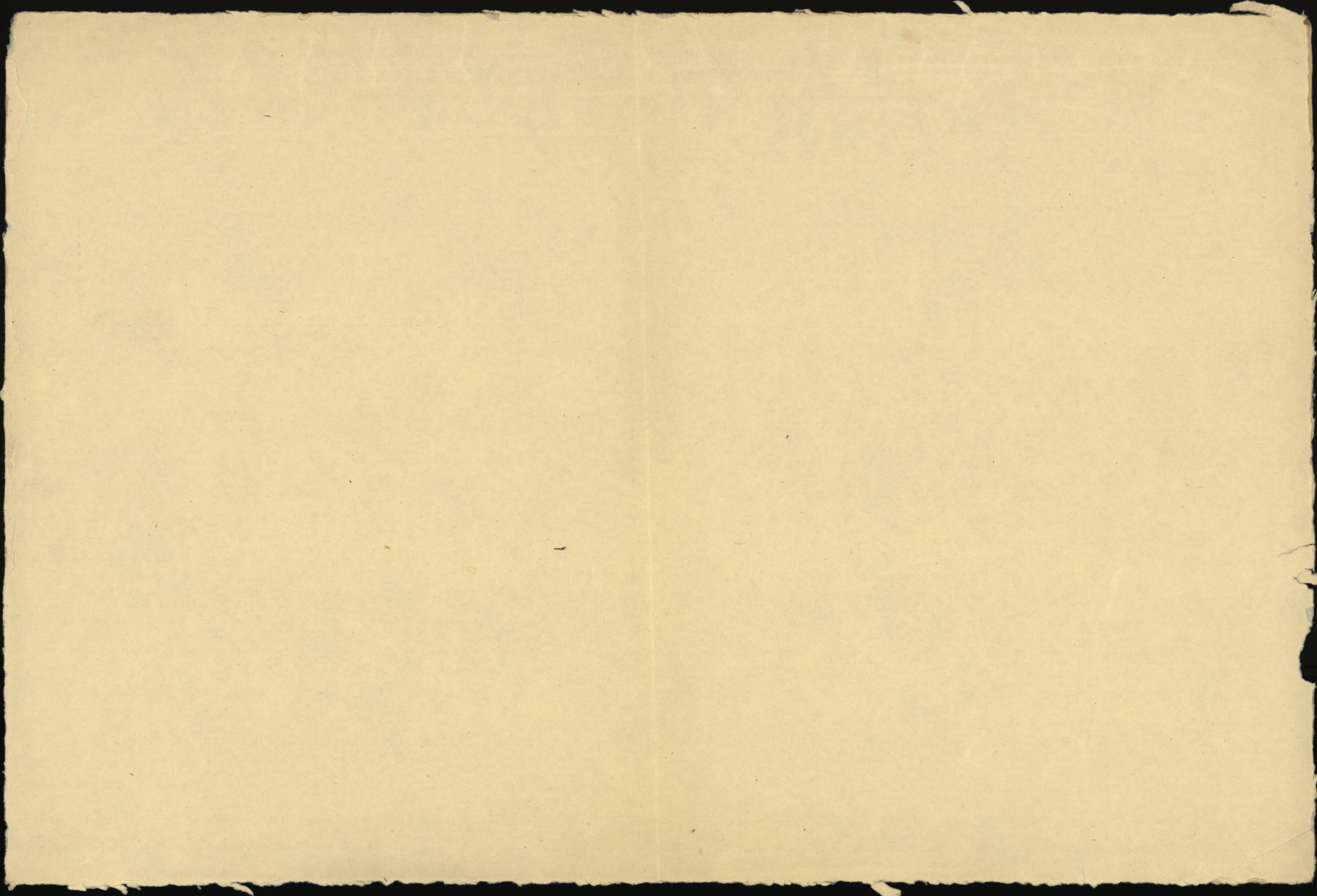
Refused.

Information Envelope.

S. 13.

Notifications -

Ottawa. Yes.



ATTESTATION PAPER for No. *1313 Pte. Smithson G.*

PP.P.C.L.I. is with Record's London

as per Instructions

H. Deane
Lieut . Colonel

O.C. 11th. Reserve Battalion

.....

P.O. I. 12 with record's London

re presentation

Lieut. Colonel

P.O. I. 12. Reserve Battalion

Army Form B. 178.

To be used for recruits enlisting direct into the Regular Army only.
 Army Form B. 178^A to be used for Special Reserve recruits and
 Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname SMITHSON Christian Name George Arthur Temple,

TABLE I.—GENERAL TABLE.

Birthplace ...	Parish <u>Durham Co.</u>	County <u>England.</u>
Examined ...	<div> <div>on <u>28th</u> day of <u>August</u> 191 <u>4.</u></div> <div>at <u>Ottawa.</u></div> </div>	
Declared Age ...	<u>32</u> ^{<u>4</u>} / _{<u>12</u>} years <u>4</u> / _{<u>12</u>} mm days.	
Trade or Occupation ...	<u>Accountant.</u>	
Height ...	<u>5</u> feet, <u>9</u> inches.	
Weight ...	lbs.	
Chest {	Girth when fully Expanded. <u>40</u> inches.	
Measurement {	Range of Expansion <u>2</u> inches.	
Physical Development ...	<u>Good.</u>	
Vaccination Marks {	Arm ... Right Left	
	Number	
When Vaccinated ...		
Vision ...	<div>R.E.—V=</div> <div>L.E.—V=</div>	
(a) Marks indicating con- genital peculiarities or previous disease ...	(a)	
(b) Slight defects but not sufficient to cause re- jection ...	(b)	
Approved by (Signature)		?
(Rank)		<u>Major.</u>
		<u>Medical Officer.</u>

Enlisted { at Ottawa.
 on 28th day of August 191 4.

Joined on Enlistment ...	Corps.	Regtl. No.
	<u>P. P.C.L.I.</u>	<u>1313</u>
Transferred to ...		

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

49

Table II.—Only for Admissions to Hospital or to the Sick

[illegible]

List in the case of Warrant Officers treated in quarters.

Records 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 must 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.

Wounded at Ypres on sentry and was struck by a bullet which went through a trenching spade and knocked a piece out which struck the left side of his head - nearly healed on discharge.

J. Nichols, Capt.

R.A.M.C. (T.)

Table III.—Boards; Courts of Inquiry, 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.

Date.	Brief details, and signature.
1902.	Vaccination.

Table IV.—Service Table.

[illegible]

8685

To be used for recruits enlisting direct into the Regular Army only.
Army Form B. 178^A to be used for Special Reserve recruits
and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname Smithson Christian Name G. George A.

TABLE I.—GENERAL TABLE.

Birthplace .. Parish South Shields County Durham

Examined { on 2 day of 191 .
at

Declared Age 33 years 60 days.

Trade or Occupation .. Accountant

Height 5 feet, 9 inches.

Weight 160 lbs.

Chest { Girth when fully Expanded 40 inches.
Measurement { Range of Expansion 3 inches.

Physical Development .. Good

Vaccination Marks { Arm .. Right 2 Left ..
Number 2

When Vaccinated 1912

Vision { R.E.—V =
L.E.—V =

(a) Marks indicating congenital peculiarities or previous disease { (a) ✓

(b) Slight defects but not sufficient to cause rejection { (b) (Duplicate. Original not available)

Approved by .. (Signature) ..
(Rank) .. Medical Officer.

Enlisted { at Ottawa
on 12th day of August 191 ..

Joined on Enlistment ..	Corps. <u>S.P.C.L.I.</u>	Regtl. No. <u>1313</u>
Transferred to ..		

Became non-effective by ..

on 12th day of August 191 ..
(Signature) A. Duemagel R.C.M.
(Rank) ..

List in the case of Warrant Officers treated in quarters.

marks 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

Table III.—Boards; Courts of Inquiry, 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.

Date	Brief details, and signature
May 1 st 1915	<p>Parcels of right arm, resulting from bullet wound in skull.</p> <p>Medical Board Newcastle-on-Tyne recommends discharge in Canada, medically unfit</p>
<p>Shorncliffe</p> <p>June 11th 1915</p>	<p>Hudwigs of Medical Board approved.</p>
	<p><i>M. S. Rennie</i> LT. COL. ADMS CANADIAN TRAINING DEPOT.</p>

Table IV.—Service Table.

[illegible]

MEDICAL HISTORY OF AN INVALID.

1.—Station.

Quebec

8.—General remarks on his :—

2.—Regiment of Corps.

P. P. C. L. I.

(a) Conduct.

good

3. Regimental No. and Rank.

1313. Private

(b) Habits.

good

4.—Name.

George A. Smithson

(c) Temperance.

temperate.

5.—Age last Birthday.

33 years

(For this purpose the Company defaulter sheets will be obtained from the man's Commanding Officer.)

6.—Enlisted

{ on
at

*August 12th 1915—
Ottawa*

7.—Former Trade or Occupation.

Auditor

Date

July 4th 1915

9.—Service.	Years.	Days.
<i>Canada</i>	PERIODS.	
	From	To
<i>P. P. C. L. I.</i>	<i>12. 8. 14</i>	<i>July 4th 1915.</i>

10.—Disease or Disability.

*Paralysis. Hemiplegia (1106)
Gunshot wound of scalp (10890)*

11.—Date of origin, cause, present condition, and whether the same is the result of service or climate.

*Jan. 26th 1915 Rifle bullet.
Scar on left temple, partial hemiplegia right arm and leg.*

Has it been aggravated by intemperance, vice or misconduct?

The result of service

no.

12.—In gunshot wounds, or other injuries, state how caused; whether received in action or in Field Service, and at what place, and whether on or off duty. If not received in action, was a Court of Inquiry held?

Caused by rifle bullet in action at Ypres, on duty

13.—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 applicable

14.—If aggravated, though not primarily caused by his service as a soldier, explain how it has been so aggravated.

not applicable

15.—Is the disability permanent? If not, state its probable duration. To what extent will it prevent his earning a full livelihood?

yes

will prevent his earning a full livelihood to the extent of 50%.

16.—Full particulars of medical treatment of case up to date of invaliding.

no particulars of treatment in England.

17.—If previously proposed for discharge on medical grounds, state the date, the disability, for which recommended for discharge, and the cause of remand of Corps.

*Previously proposed for discharge
by a medical board held at Shorncliffe England
January 11th 1915*

18.—State if for discharge on account of unfitness for service.

*Proposed for discharge on account
of unfitness for service*

H. J. Emry

Lieut A M C

Medical Officer by whom the case is brought forward

OPINION OF THE MEDICAL BOARD.

(In which it should be stated how far the Board concurs in above Report.)

*The Board having assembled proceeds to examine 1313
Private George A. Smithson P.P.C.L.D. and find him suffering
from partial ^{right} hemiplegia the result of a bullet wound
of the scalp. The Board fully concurs in the opinion
of the medical officer bringing forward the case and
recommends that he be given three months pay and
discharged immediately as medically unfit and that
his case be reported to the pensioning board.*

Signatures :—

A. H. Hubbard

President.

Station

Quebec

C. A. Delage

Capitaine

Members.

Date

July 4th 1915.

Date

5th July 1915.

W. H. Delancey

Assistant Director of Medical Services.

Approved.

Date

Director of Medical Services.

[OVER]

17.—If previously proposed for discharge on medical grounds, state the date, the disability, for which recommended for discharge, and the cause of removal of Corps.

(At Station or Hospital where finally disposed of)

Station and Hospital } Arrived from }
Date

If admitted.		If under treatment.		Disease.	How finally disposed of.	Date of Discharge, &c.
Index No.		From	From			
Date						

SUMMARY of Causes of invaliding, or remarks as to remand to Regiment, Station or Depot.

(In which it should be stated how far the Board concurs in above Report.)

Date of final Medical Board or decision. }

Administrative Medical Officer.

Militia Form B. 227.

5m.—3.15.
(H. Q.—1772-89-117.)

DETAILED MEDICAL HISTORY OF INVALID

Station	Corps	Regimental No.	Rank	Name	Disability	Date	Hospital or Station transferred to for final disposal.	Date of final disposal	How finally disposed of
The original Report is invariably to accompany the discharge documents of invalids.									

This space to be left blank
the Chelsea Number.

Proceedings on Discharge.

Spec 57
12-6-15
Army Form B. 268. NOV
CENTRAL REGISTRY.
RECEIVED

JUL 20 1915

649.8-10

NO.

(When forwarded for confirmation the documents named on page 4 should be enclosed.)

No. 1313 Army Rank PRIVATE

Name SMITHSON GEORGE A.

(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)

Corps PRINCESS PATRICIAS CANADIAN LIGHT INFANTRY
SHORNCLIFFE DEPOT

Battalion, Battery, Company, Depot, &c.

(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)

Date of discharge

DEC 3 1915

Place of discharge

1. Description at the time of discharge.

Age 33 years 2 months

Height 5 feet 9 inches

Chest measurement { girth when fully expanded 40 ins.
range of expansion 3 ins.

Complexion Dark

Eyes Grey

Hair Black

Trade ACCOUNTANT

Intended place of residence
(To be given as fully as practicable)

77 Victoria St
Ottawa
Canada

Descriptive marks.

(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)

2. The above-named man is discharged in consequence of

BEING MEDICALLY UNFIT FOR FURTHER SERVICE

Auth: 392 (XVI) K.R.&O.

(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)

3. Military character:—

Character awarded in accordance with King's Regulations:—

To be filled in on the soldier quitting the Colours.

Certified that the above is an accurate copy of the character given by me on Army Form B. 2087* and that Army Form D. 489 was awarded in this case.

Initials of Commanding Officer.

W. S. G. Comp.
13-2-1916
Army Form B. 2088 has been issued to*

5. He is in possession of the following number of G.C. badges (if the man is a N.C.O. and enlisted prior to 1st July, 1881, the number he would have been entitled to had he not been promoted should be stated).

Is it probable that he will be entitled to another good conduct badge before the confirmation of these proceedings?

Classification for service, or proficiency pay... .. Class

6. Campaigns, Medals and Decorations

Certificate of education

7. His accounts are correctly balanced, and I have impartially inquired into all matters brought before me in accordance with Regulations.

(Place) SHORNCLIFFE

(Date) JUNE 13th 1915

W. Cunningham
Officer
Commanding 11th. Regt. Battalion Regiment.

8. *Certificate to be signed by the soldier on discharge.*

hereby acknowledge that I have received all my pay and allowances (including clothing allowance), and all just demands up to the present date, subject to the reservations of the claims noted on the 3rd page.

(Place) DISCHARGE DEPOT

JUL 6 1915

(Date) QUEBEC

W. Cunningham (Signature of Soldier.)
Bennett, Sgt. R.C.A. (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 at his own request.*

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

W. Cunningham (Signature of Soldier.)

10. *Statement of service.*

Service towards engagement to _____ (the date to which the record of service is completed) _____ years _____ days.

Further service " " _____ (the date of confirmation of discharge) " "

Total " "

11. *Confirmation of discharge.*

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

(Place) DISCHARGE DEPOT

JUL 6 1915

(Date) QUEBEC

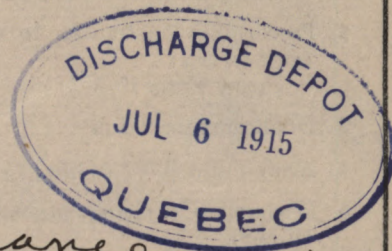
Signature

J. J. Samples (date)
Major R. C. A.
C. C. Discharge Depot.

Commanding officers (or the Paymaster, if at Netley) will issue to every discharged soldier whose claim to pension, either on account of service or disability, is to be brought under the consideration of the Chelsea Board, a memorandum for his guidance on Army Form D. 401, and will at the same time transmit to the Secretary, Royal Hospital, Chelsea, a descriptive return of the man on Army Form D. 400.

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.)



I complain that a Balance of \$15.00 is due me for month of Dec. 1914, and \$5.00 for Feb. 1915. A payment is shown on R.P. Cut (C.E.7) of \$20.00. I only received £3.0.0 for which I hold voucher, there is also an outstanding balance of 15[¢] on every \$5.00 charged to me since arrival in England.

W. H. Southon

LIST OF DISCHARGE DOCUMENTS.

1. Proceedings on discharge (Army Form B. 268)
2. Proceedings on transfer to reserve (if any) (Army Form B. 2056)
3. Duplicate attestation
4. Army Form B. 97 (if any)
5. Declaration of change of name (if any)
6. Re-engagement paper (if any) (Army Form B. 136)
7. Authority for continuance, or extension, of service (if any) (Army Form B. 221)
8. Court of Inquiry on an injury (if any) (Army Form A. 2)
9. Regimental conduct sheet (Army Form B. 120)
10. Company conduct sheet (Army Form B. 121)
11. Copies of convictions by Civil Power (if any)
12. Medical history sheet (Army Form B. 178)
13. Medical report on invalid (if any) (Army Form B. 179)
14. Copy of receipt for purchase money (if any)
15. Attestation of fraudulently enlisted man for corps in which he has not been held to serve (if any)
16. Detailed statement of former service allowed to reckon towards pension (if any)
17. Copy of 3rd page attestation (in the case of men from abroad entitled to deferred pay who go to Netley or the discharge dépôt for discharge)
18. Descriptive return (Army Form D. 400), where required
See section 11 on second page
19. Active service casualty form (Army Form B. 103)
20. Employment sheet (Army Form B. 2066)

In the case of recruits who are rejected before, or on, final approval, the discharge documents will consist of—

1. Duplicate attestation.
(On third page the date and cause of discharge will be entered and signed by the competent military authority)
2. Medical history sheet (if any)
(Army Form B. 178)

Instructions as to the preparation, despatch, and custody, of discharge documents.

1. When a soldier is to be discharged, the documents retained with the duplicate attestation will be placed inside this form. Should any of the documents be missing, an explanation of the deficiency, signed by the commanding officer, must be substituted for the missing document. The Officer in charge of records will then extract from the original attestation, any documents required to complete the list of discharge documents enumerated in the margin, which will then be placed in this form in the sequence given.

2. When men are discharged from the colours at home as medically unfit, or with claims to pension, Army Form B. 268 will be sent confirmed, together with the duplicate attestation and documents retained therein to the officer in charge of records 10 days in advance of the date for discharge in the case of invalids, and 14 days in other cases. This officer will then extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin, place them in this form, and after carefully checking the duplicate attestation with the original forward the whole to the Secretary, Royal Hospital, Chelsea. When such men are discharged abroad, the same procedure will be adopted as above, with the exception that the discharge documents will be sent to the officer in charge of records immediately after discharge takes place (except in the case of men who are granted gratuities on discharge from local battalions or companies, Royal Artillery).

3. When soldiers are sent home from abroad for discharge, the documents retained with the duplicate attestation will be placed inside this form and sent home with the men for transmission to the officer who carries out the discharge together with the following additional forms:—

- (a) Discharge certificate (Army Form B. 2079 or Army Form B. 264).
- (b) Character certificate (Army Form B. 2067) if entitled.
- (c) Copy company conduct sheet (Army Form B. 121) when required under King's Regulations.

The duplicate attestation and documents retained therein will be sent to the officer in charge of records, who will extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin and place them in this form.

4. The discharge documents of re-enlisted pensioners, on re-discharge, will be sent to the officer in charge of records, who will extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin, place them inside this form, and forward the whole to the Secretary, Royal Hospital, Chelsea, irrespective of the cause of discharge.

5. The original and duplicate attestations of recruits who are rejected before, or on, final approval will be retained by the approving officer for one year, when they will be destroyed.

6. In all other cases the discharge documents will be sent, directly the discharge is carried out, to the officer in charge of records of the unit concerned.

7. Postage need not be paid, and receipts are not required, in the case of documents sent to Chelsea or to the War Office.

8. When the discharge documents of men not entitled to pension are sent to the officer who will have final charge of them, they are to be accompanied by Army Form B. 279, and that officer will, if they are found to be correct, sign and return Army Form B. 279. Should any document be missing, he must at once apply for it.

9. The officers having final charge of the discharge documents will arrange them according to regimental numbers, and enter the names in the alphabetical index, Army Book No. 129.

Medical Report on an Invalid.

649-S-10

Station

Newcastle.

Date

May 1st 1915.

1. Unit

P. P. C. L. S.

2. Regimental No.

1313.

3. Rank

Pte

4. Name

Smithson G.

5. Age last birthday

32.

6. Enlisted

on

Aug 12th 1914.

at

Ottawa Canada.

7. Former Trade or Occupation

Manager

DEPT. OF DEFENCE

JUN 13 1918

H.Q. CANADA

8. Disability.

Gunshot wound of Skull.

Paresis of right arm & hand.

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.

Jan 25th 1915.

10. Place of origin of disability.

Ypres.

Date

11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.

Bullet wound on left side of head with unconsciousness subsequent right sided Hemiplegia & loss of speech. Loss of speech & Hemiplegia gradually recovered leaving paresis of right arm & hand.

12. (a) Give your opinion as to the causation of the disability.

Bullet wound, extra dural hemorrhage

(b) If you consider it to have been caused by active service, climate, or ordinary military service, explain the specific conditions to which you attribute it (See notes on page 3).

Active Service

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, in the event of the man being invalided, it is essential that the Commissioners of Chelsea Hospital 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 pension vary directly according to whether the disability is attributed to (a) active service, (b) climate, or (c) ordinary military service. It is therefore essential when assigning the cause of the disability to differentiate between them (see Articles 1162 and 1165, Pay Warrant, 1913).

(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.

(v.) A disability is to be regarded as due to climate when it is caused by military service abroad in climates where there is a special liability to contract the disease.

20. (a) State whether the disability is the result of (i.) active service, (ii.) climate, or (iii.) ordinary military service.

Active Service

(b) If due to one of these causes, to what specific conditions do the Board attribute it?

Bullet wound of skull, (left side) skull fractured, resulting in right-sided hemiplegia affecting speed arm & leg. Speech & leg completely recovered.

21. Has the disability been aggravated by

(a) Intemperance?

(b) Misconduct?

Marked paralysis of right arm. Persists in spite of treatment by electricity massage &c.

22. Is the disability permanent?

Yes

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

see 22.

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 incapacity

In defining the extent of his inability to earn a livelihood, estimate it at $\frac{1}{4}$, $\frac{1}{2}$, $\frac{3}{4}$, or total incapacity.

- 24A. Is the man suffering from a disability which would obviously, as far as you can judge, cause him to be rejected by an Approved Society under the National Health Insurance Act?

No

25. If an operation was advised and declined, was the refusal unreasonable?

No operation advised.

26. Do the Board recommend

(a) Discharge as permanently unfit, or

(b) Change to England?

Yes. (Canada)

Signatures:—

(Signed) Thomas Beattie Lt Col R.A.M.B.
President.

Station

Newcastle on Tyne

Dr. G. Richardson, Lt Col R.A.M.B.
Members.

Date

May 1st 1915.

Dr. Frank Watson, Capt R.A.M.B.

Approved.

Station

York.

A. Chambers Major R.A.M.B.
Administrative Medical Officer.
for S.D.M.S. N.C.

Date

3. 5. 15.

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.

*Excellent general condition
Paresis of right arm; hand*

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

(a) In action?

Yes

(b) On field service?

Yes

(c) On duty?

Yes

(d) Off duty?

—

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

If so—(a) When?

No

(b) Where?

(c) Opinion?

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

No

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

Twice prepared but no operation performed.

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?

None.

19. Do you recommend

(a) Discharged as permanently unfit, or

(b) Change to England?

Recommend 3 months furlough

(Signed)

J. A. Heslop Capt. R.A.M.C.

Officer in medical charge of case.

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

Station

*1st Northern General Hospital & Gowans St. Col.
Newcastle on Tyne.*

Date

May 1st 1915

*1st Northern General Hosp.
Officer in charge of Hospital.*

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

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

(On leaving Corps or Station where invalided.)

Transfer { Date _____
Station _____ }
or
Embark- { Date _____
ation { Port _____ }
Name of { Conveyance _____
Vessel _____
Officer in }
medical charge _____

Brief remarks on case during transit, and state on transfer for final disposal.

366-17-1 8

Re-transferred { Date _____
Hospital or }
Station } _____
Officer in medical charge.

(At Station or Hospital where finally disposed of.)

Station and }
Hospital } _____
Arrived from _____ Date _____

If admitted	If under treatment		Disease	How finally disposed of	Date of Discharge, &c.
	From	To			
Date					

Detailed statement as to condition on discharge and whether discharged as an invalid, to corps, to station, or to depôt. In cases of discharge from the service it should be stated whether the answers to questions 22, 23 and 24 are concurred in.

Date of final Medical }
Board, or decision }

Administrative Medical Officer.

Army Form B. 179.

MEDICAL REPORT ON AN
INVALID.

Station _____
Corps _____
Regimental No. _____
Rank _____
Name _____
Disability _____
Date _____
Hospital or Station }
transferred to for }
final disposal }
Date of final }
disposal }
How finally }
disposed of }

The original Report is invariably to accompany the
discharge documents of Invalids.

(s) (38534) Wt. 10047/1884 200,000 1-15 W B & L

Forms
B. 179
35.

Canadian Discharge Depot
Empire Hotel, Buxton.

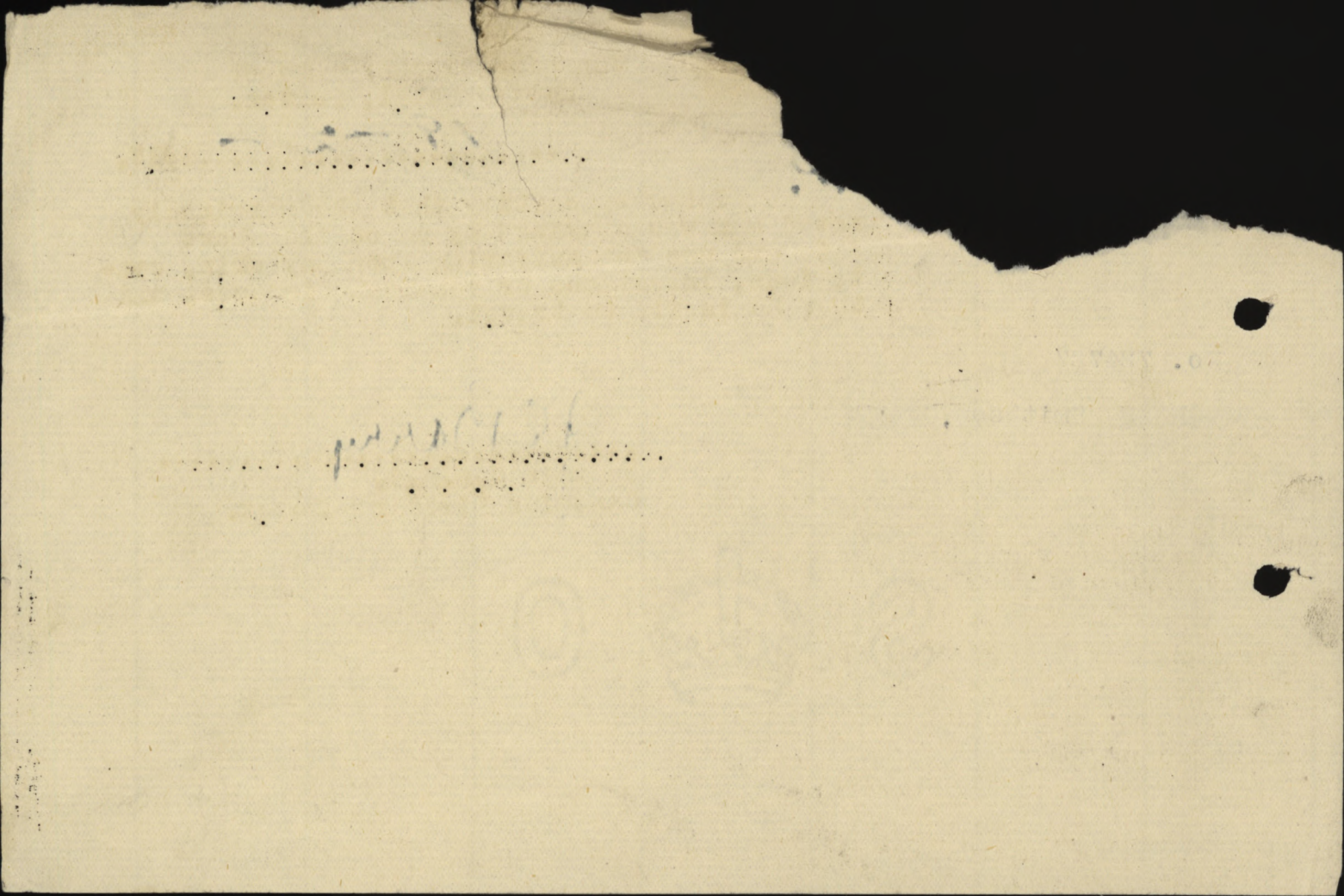
.....19-2-1917.

I hereby certify that the marginally
noted man was examined by me on the above
date and was not suffering from any skin, con-
tagious, infectious or venereal diseases, and
that he is fit to travel.

No. 724727

B\$Q\$M\$S\$ Smithson, G\$A\$T\$

J. E. Barry
.....
Captain C.A.M.C.
Canadian Discharge Depot.



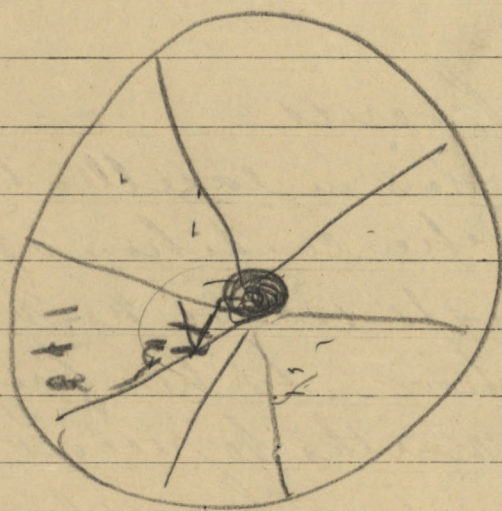
MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No. 1313	Rank. Pte	Surname. Smithson	Christian Name. G.
Year 1915	Unit R.R.C. I.	Age. 32.	Service. 7 months	
Station and Date. 1st Northern General Hosp. Newcastle on Tyne.	<p>Disease <i>Bullet wound of skull, Paresis of right arm & hand.</i></p> <p>History At Ypres on Jan 25th 1915, he was shot whilst in the trenches by a bullet which passing through an inverted shovel struck the left side of his head inflicting a wound. He was also struck on the left side of the head higher up by pieces of the shovel. He was unconscious with right sided hemiplegia & loss of speech. At the Base Hospital his speech recovered and his Hemiplegia gradually grew less until when he was sent to Hospital in England he only suffered from loss of power in right arm & hand.</p> <p>(Signed) J W Heslop Capt Same.</p> <p>Subsequent Progress. He is now in excellent general condition but the parietic condition of his right hand & arm persists & shows no marked improvement. Recommendation As his progress is so slow & may take months to recover the power of his hand & arm, and as his wife & children are in Canada he is anxious to be given sufficient furlough to visit them.</p> <p>(Signed) J W Heslop Capt Same.</p>			

*The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.
 (Hse. No.) W 10373-1916. 800M (E) 1/15. Mc. & W. P.T.O.

Station
and Date.

MEDICAL CASE SHEET



Medical Report on an Invalid.

DEPT
MILITIA & DEFENCE
649-S-10
JUN 30 1915
H.Q. 62-5-327
CANADA

Station

Newcastle

Date

May 1st 1915

1. Unit

P.P.C.L.I.

2. Regimental No.

1313

3. Rank

Pte

4. Name

Smithson G.

5. Age last birthday

32

6. Enlisted

on

Aug 12th 1914

at

Ottawa Canada

7. Former Trade

or Occupation

Manager

8. Disability.

Gunshot wound of Skull.

Paresis of right arm & hand

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.

Jan 25th 1915

10. Place of origin of disability.

Ypres

11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.

Bullet wound on left side of head with unconsciousness subsequent right sided Hemiplegia & loss of speech. Loss of speech & Hemiplegia gradually recovered leaving paresis of right arm & hand.

12. (a) Give your opinion as to the causation of the disability.

(b) If you consider it to have been caused by active service, climate, or ordinary military service, explain the specific conditions to which you attribute it (See notes on page 3).

Bullet wound & extra dural hemorrhage.

Active Service.

Noted Sgt. E.
19/4/16

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.

Excellent general condition
Paresis of right arm & hand

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

(a) In action?

(b) On field service?

(c) On duty?

(d) Off duty?

Yes

Yes

Yes

—

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

If so—(a) When?

(b) Where?

(c) Opinion?

No

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

No

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

Twice prepared but no operation performed.

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?

None.

19. Do you recommend

(a) Discharged as permanently unfit,

or

(b) Change to England?

Recommend 3 months furlough

(Signed) J. A. Heslop. Captain R.A.M.C.

Officer in medical charge of case.

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

Station

1st Northern General Hosp. Newcastle on Tyne.

Date

May 1. 1915.

Officer in charge of Hospital.

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

† 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, in the event of the man being invalided, it is essential that the Commissioners of Chelsea Hospital 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 pension vary directly according to whether the disability is attributed to (a) active service, (b) climate, or (c) ordinary military service. It is therefore essential when assigning the cause of the disability to differentiate between them (see Articles 1162 and 1165, Pay Warrant, 1913).

(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.

(v.) A disability is to be regarded as due to climate when it is caused by military service abroad in climates where there is a special liability to contract the disease.

20. (a) State whether the disability is the result of (i.) active service, (ii.) climate, or (iii.) ordinary military service.

Active Service

- (b) If due to one of these causes, to what specific conditions do the Board attribute it?

Bullet wound of skull, (left side) skull fractured resulting in right sided hemiplegia affecting speech & leg.

21. Has the disability been aggravated by

- (a) Intemperance?
(b) Misconduct?

} No

Speech & leg completely recovered. Marked paresis of right arm. Persists in spite of treatment by electricity massage &c.

22. Is the disability permanent?

Yes.

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

See 22.

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 incapacity

In defining the extent of his inability to earn a livelihood, estimate it at $\frac{1}{4}$, $\frac{1}{2}$, $\frac{3}{4}$, or total incapacity.

- 24A. Is the man suffering from a disability which would obviously, as far as you can judge, cause him to be rejected by an Approved Society under the National Health Insurance Act?

No.

25. If an operation was advised and declined, was the refusal unreasonable?

No operation advised

26. Do the Board recommend

- (a) Discharge as permanently unfit,
or
(b) Change to England?

Yes.

Signatures:—

(Signed) Thomas Beattie Lt Col Rame
President.

Station

Newcastle on Tyne

Date

May 1st 1915

Approved.

Station

York.

Date

8. 5. 15

A. Chambers Major
Administrative Medical Officer.
for D.D. M.D. Rame

(On leaving Corps or Station where invalidated.)

Transfer or Embark- ation	{ Date Station Date Port	Name of	Conveyance
			Vessel
			Officer in medical charge

Brief remarks on case during transit, and state on transfer for final disposal.

Re-transferred	{ Date Hospital or Station	
		Officer in medical charge.

(At Station or Hospital where finally disposed of.)

Station and Hospital	
Arrived from	Date

If admitted	If under treatment		Disease	How finally disposed of	Date of Discharge, &c.
	From	To			
Date					

Detailed statement as to condition on discharge and whether discharged as an invalid, to corps, to station, or to depôt. In cases of discharge from the service it should be stated whether the answers to questions 22, 23 and 24 are concurred in.

Date of final Medical
Board, or decision

Administrative Medical Officer.

Army Form B. 179.

MEDICAL REPORT ON AN
INVALID.

Station	
Corps	
Regimental No.	
Rank	
Name	
Disability	
Date	
Hospital or Station transferred to for final disposal	
Date of final disposal	
How finally disposed of	

The original Report is invariably to accompany the
discharge documents of Invalids.

(*) (88534) Wt. 10047/1884 2:0,000 1-15 W B & L

Forms
B. 179
35.

649-5-10.

CARD NO.

S. S. E.

Smithson

CHRISTIAN NAMES

George Arthur Temple

REGL. NO.

724727

RANK

Q.M. Sgt.

UNIT

109th

FORMER CORPS

N. Cumberland Fus; 26.14.97; G.G.F.F. Batt.

NEXT OF KIN.

NAMES IN FULL

Smithson. Mrs Dorice

RELATIONSHIP TO SOLDIER

Wife.

ADDRESS

391 Daly Ave, Ottawa, Ont

CHANGE OF ADDRESS

COUNTRY OF BIRTH

England. South Shields, Durham.

DATE

Apr. 15th 1882

PLACE OF ATTESTATION

Lindsay, Ont.

DATE

Dec. 10th 1915

L. L. 90589.-M. & D. 6312.

Sailed from Halifax per S.S. Olympic 23-7-16

R.C. 2-2-17

M. F. W. 22. 100m.-1-16. H. Q. 1772-89-89.

100m

Returned to Can per. St. Northland (Feb. 20/17 anch J. - 317.)

MARRIED

Yes

SINGLE

WIDOWER

TRADE OR CALLING

Accountant

RELIGION

Church of England

DESCRIPTION.

APPARENT AGE

33 YEARS

8 MONTHS

HEIGHT

5 FEET

8 1/2 INCHES

CHEST MEASUREMENT

39 INCHES

EXPANSION

4 1/2 INCHES

COMPLEXION

Dark

EYES

Hazel

HAIR

Black

DISTINGUISHING MARKS

Scar on neck. neuritis right arm. By special request.

MEDICAL EXAMINATION.

PLACE

Lindsay, Ont

DATE

Dec. 10th 1915

Smith 649-S-10

CARD NO.

SURNAME.

Smithson 649-S-10

CARD NO.

CHRISTIAN NAMES

George

808.3-10-15 (Rec.)

FOLL.

5

REGL. NO.

1313

RANK

Pte.

UNIT

P.P.C. L. I.

FORMER CORPS

NEXT OF KIN.

NAMES IN FULL

Smithson Mrs. G. A. I.,

RELATIONSHIP TO SOLDIER

ADDRESS

*77 Vittoria St, Ottawa,
Ont.*

Old N & K Card 24/12/17

COUNTRY OF BIRTH

England

DATE

PLACE OF ATTESTATION

DATE

Aug. 12th 1914

*018.7-10-14-26
17.*

From Quebec per.

S. S. Royal George 4/10/14.

MARRIED

SINGLE

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

649-5-10.

CARD NO.

Reserved for M.H.C.

Regt. No. 724727 Rank *B.G.M.S.* Surname *Smithson* Christian Name *G.A.T.*
 Under Corps—(a) Overseas from United Kingdom *109th Bn C.E.F.* (b) In United Kingdom
 Born at—Town *South Shields* County or Province *Durham* Country *England*
 Date of Birth—Day Month Year Age *34* yrs. months.
 Joined at *Lindsay Ontario* Date *Dec 10/1915*
 Former Trade or Occupation *Accountant*
 Permanent marks or peculiarities that will serve for future identification:—

Height—feet *5* inches *8 1/2* Colour of eyes *Blue*
 Signature of Soldier (for identification purposes) *G.A.T. Smithson*

Medical Report.

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

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

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

Disabilities Group (a).

Disabilities Group (b).

Disabilities Group (c).

Paralysis right arm & leg

BOARD OF PENSION COMMISSIONERS FOR CANADA.

APR 5 1917

CONSIDERED FOR PENSION.

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

	Disease or injury to which the disability is due.	Place of origin.	Date of origin.
(i) As to Group (a) above.			
(ii) As to Group (b) above.	<i>Wounded 20.1.15</i>	<i>Haudas</i>	<i>20.1.15</i>
(iii) As to Group (c) above.			

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

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

Not applicable

(i) As to Group (a) above?

If yes, has Active Service aggravated it?

(ii) As to Group (b) above?

If yes, has Active Service aggravated it?

(iii) As to Group (c) above?

If yes, has Active Service aggravated it?

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

(i) As to Group (a) above?

(ii) As to Group (b) above?

(iii) As to Group (c) above?

Received 19-3-17

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

(i) While on duty? *yes.*

(ii) While off duty? *no.*

(iii) Was a Court of Inquiry held? *No.*

(iv) Where? *England*

(v) When? *1915*

(vi) Opinion of the Court? *no*

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

Wounded 26.1.15. In Hospital 4 1/2 mths.

Invalided to Canada June 13th 1915.

Enlisted again 10th Dec. 1915.

Was not been able to do anything but light duty ever since.

Was had four operations in all.

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

Pain in partial of right arm & leg.

No other disability now except occasional headache

all other systems working normally.

8. OPERATION. (i) Was one performed? *2 In England & 2 in Canada.*

(ii) If so, state what. *3 more operations & 1 for removal of bullet casing*

(iii) Was one advised and declined? *No.*

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

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

(ii) If so, describe.

not applicable

10. DO YOU RECOMMEND:—

(a) Fit for duty?

(b) Fit for base duty?

(c) Invalid to Canada?

(d) Discharge from the Service as permanently unfit?

yes

Date of Report *Dec 4.* 191*6.*

Signed

H O Boyle Capt

Officer in medical charge of case.

Station *Viller Camp.*

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

Dated at

Bramshatt

Station, on

P. D. Stewart Maj (Officer i/c Hospital) Strike out one of these.

Caulb (S.M.O. Brigade)

18.12.16

* Delete if inapplicable.

There is no Permanent Base Duty at which I can profitably employ this Man.

24727 B.Q.M.S., Smithson G.A.T.

Andrew
Capt. Adj.
Officer Commanding.
 Q. C. 109th Overseas Battalion, C. E. F.
 Unit.

13. Was the disability caused or aggravated by— (a) Negligence of the Soldier { Caused? } no Aggravated? } (b) Misconduct of the Soldier { Caused? } no Aggravated? }
14. THE ENTIRE DISABILITY. Without regard to his regular occupation, to what extent is his capacity lessened at present for earning a full livelihood in the general market for untrained labour? (Estimate at none, 10%, 20%, 30%, 40%, 50%, 60%, 70%, 80%, 90%, or 100%)
None compared to capacity on enlistment
15. THE PENSIONABLE DISABILITY—(see Part I (3). Aggravation on Active Service of a disability existing previous to joining is to be included in the estimate).
 What part of the entire disability estimated next above in (14) is due to causes arising during Active Service? (Estimate at none, $\frac{1}{5}$, $\frac{2}{5}$, $\frac{3}{5}$, $\frac{4}{5}$, or all).
not applicable
16. Permanency of the Pensionable Disability estimated next above in (15).
 (i) Is it permanent? *no. will gradually improve*
 (ii) If not permanent, what is its probable minimum duration (in months)? *Impossible to say*
17. If an operation was advised and declined, do you consider the refusal to have been unreasonable? *See History*
18. Remarks.
This M.C.O. states that he was boarded in Kingston but found fit for service as G.M.S. He has made Sergeant. Scar above left ear & near left parietal region where bullet entered & escaped. Flexion of arm is good

19. Recommendation:—(a) ~~Fit for duty?~~

(b) Fit for base duty? *yes permanently Class C(ii)*

(c) ~~Invalid to Canada?~~

(d) ~~Discharge from Service as permanently unfit?~~

Classification for the Military Hospitals Commission.

not applicable

Date of Board *see* 21 NOV 1916

Station Bramshott.

Approved

see 21 NOV 1916

Dated at Bramshott.

Signatures of the Board

C.R. Cooper
H. Machareu
N. S. Jackson
For G.O.C. & A.D.M.S.

Station Bramshott.

President.

see 21 NOV 1916 191

Discharged: owing to having been declared by Medical Board as fit for permanent base duty only and no suitable employment in such duty available although fit for employment in civil life.

Director of Recruiting and Organization, C.E.F.

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

Answers are to be given to all questions. Such terms as "may," "perhaps," "probably," "possibly," are not to be employed. The cause of the disability arising on Active Service is to be clearly shown in order that the Pensions Authorities may deal with the case properly.

Is the disability fully indicated in Part I (1)?

State it.

Yes

Is the disability fully indicated in Part I (2)?

State it.

Yes

13. Was the disability caused or aggravated by—

(a) Negligence of the Soldier

Caused?

Aggravated?

no

(b) Misconduct of the Soldier

Caused?

Aggravated?

no

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

None compared to capacity on enlistment

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

What part of the entire disability estimated next above in (14) is due to causes arising during Active Service? (Estimate at none, $\frac{1}{5}$, $\frac{2}{5}$, $\frac{3}{5}$, $\frac{4}{5}$, or all).

not applicable

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

(i) Is it permanent?

no. will gradually improve

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

Impossible to say

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

See History

18. Remarks.

This M.C.O. states that he was boarded in Kingston but found fit for service as G.M.S. Heater Master Sergeant. Scar above left ear & near left parietal vertebra where bullet entered & escaped. Flexion of arm is good.

Discharged: Having been declared by Medical Board as fit for permanent base duty only and no suitable employment such duty available although fit for employment in civil life.

Director of Recruiting and Organization, C.E.F.

19. Recommendation:—(a) Fit for duty?

(b) Fit for base duty?

(c) Invalid to Canada?

(d) Discharge from Service as permanently unfit?

yes permanently Class C(ii)

Classification for the Military Hospitals Commission.

not applicable

Date of Board

21 NOV 1916

Station

Bramshott.

Signatures of the Board

C.R. Cooper M.D. President.
H. Macharen Capt.
H. Smythman Capt.

For G.O.C. & A.D.M.S.

Approved

21 NOV 1916

Dated at

Bramshott.

Station

Bramshott.

21 NOV 1916

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

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

on the day of

191

Members of the Board:—

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

Not applicable

no further evidence required

See history

It is recommended that the soldier be granted a pension of \$10.00 per month, with effect from the date of his discharge, on the basis of his service in the Canadian Expeditionary Force, and that he be granted a gratuity of \$100.00, with effect from the date of his discharge, on the basis of his service in the Canadian Expeditionary Force.

Dated at this day of 191

Signatures of the Board

President

B. Q. M. S. W. O. II

5-8-16

Add: Westboro P. O.
Ont.

W. O. II



WARRANTS

ACTING RANKS

Encl

WarrantsCertificates

1st CO RD
naive 109 Bn

	: Date	: Warrant	: Date	: Cert.
	: effective:	No.	: effective:	No.
W.O. Class 1 (Substantive):	:	:	:	:
W.O. Class 11 " "	: 5-8-16	: 4997	:	:

(Previous Substantive
 Rank (for A/W.O. only)

Name, *Smithson*
 Christian, *George Arthur*
 Names, *Temple*

Regt. No. *724727*

Unit *109th Bn.*

Rank on Discharge *B. P. M. S.*

Address on Discharge *Westboro P.O. Ont.*

Date Despatched *5-4-21*

To whom Despatched *W 2445*

Checked by (H&A) *SR* (DOCS) (A3) (H&A)

LHP

