

ATTESTATION PAPER.
109th OVERSEAS BATTALION, C. E. F.

B. Coy.
No. 725049

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

Folio. **DUPLICATE**

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

- | | |
|---|---------------------------------------|
| 1. What is your surname?..... | <i>Taylor</i> |
| 1a. What are your Christian names?..... | <i>John</i> |
| 1b. What is your present address?..... | <i>Oakwood</i> |
| 2. In what Town, Township or Parish, and in what Country were you born?..... | <i>Ramalley Marlborough Wiltshire</i> |
| 3. What is the name of your next-of-kin?..... | <i>Chas Taylor</i> |
| 4. What is the address of your next-of-kin?..... | <i>Ramalley Marlborough Wiltshire</i> |
| 4a. What is the relationship of your next-of-kin?..... | <i>Father</i> |
| 5. What is the date of your birth?..... | <i>8 July 1887</i> |
| 6. What is your Trade or Calling?..... | <i>Labourer</i> |
| 7. Are you married?..... | <i>No</i> |
| 8. Are you willing to be vaccinated or re-vaccinated and inoculated?..... | <i>Yes</i> |
| 9. Do you now belong to the Active Militia?..... | <i>No</i> |
| 10. Have you ever served in any Military Force?..
<small>If so, state particulars of former Service.</small> | <i>No</i> |
| 11. Do you understand the nature and terms of your engagement?..... | <i>Yes</i> |
| 12. Are you willing to be attested to serve in the }
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? } | <i>Yes</i> |

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *John Taylor*, do solemnly declare that the above are answers made by me to the above questions and that they are true, and that I am willing to fulfil the engagements by me now made, and I hereby engage and agree to serve in the Canadian Over-Seas Expeditionary Force, and to be attached to any arm of the service therein, for the term of one year, or during the war now existing between Great Britain and Germany should that war last longer than one year, and for six months after the termination of that war provided His Majesty should so long require my services, or until legally discharged.

Date *Dec 18* 191*5*. *John Taylor* (Signature of Recruit)
Wm Campbell (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *John Taylor*, do make Oath, that I will be faithful and bear true Allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will as in duty bound honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity, against all enemies, and will observe and obey all orders of His Majesty, His Heirs and Successors, and of all the Generals and Officers set over me. So help me God.

Date *Dec 18* 191*5*. *John Taylor* (Signature of Recruit)
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 *Worceville* this *Thirtieth* day of *January* 191*6*.

Reuben W Thomas (Signature of Justice)

Description of John Taylor on Enlistment.

Apparent Age 28 years 5 months.
 (To be determined according to the instructions given in the Regulations for Army Medical Services.)

Distinctive marks, and marks indicating congenital peculiarities or previous disease.

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

Height 5 ft 5 1/2 ins.

*Mark of varicose
Operation*

Chest measurement { Girth when fully expanded 35 ins.
 Range of expansion 2 ins.

Complexion Dark

Eyes Brown

Hair Black

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

CERTIFICATE OF MEDICAL EXAMINATION.

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

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

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

Date Dec. 18 1915.

Place Lindsay

James Mac
 Medical Officer. Capt.
 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 those parts which have been attested, and will briefly state below the cause of unfitness:—

CERTIFICATE OF OFFICER COMMANDING UNIT.

John Taylor 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.

J. H. Allen Lt. Col. (Signature of Officer)
 O.C. 109th Overseas Battalion, C. E. F.

Date FEB 1 1916.

REGIMENTAL DOCUMENTS

NAME

Taylor John

REGT. NO.

725049

UNIT

109th Div

M. F. W. 2505
REFERENCE

H. Q. FILE NO.

NON-EFFECTIVE BY

DEATH

Category

DISCHARGE

Category

DESERTION

CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

ATTESTATION PAPER (M.F.W. 23, 133, or 51)

CASUALTY FORM (M.F.W. 54 or A.F.B. 103)

TRAINING HISTORY SHEET (M.F.W. 113)

FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)

REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)

COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)

MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)

DENTAL HISTORY SHEET (M.F.B. 465)

MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)

MEDICAL EXAMINATION (M.F.W. 129)

TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)

PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)

DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)

LAST PAY CERTIFICATE (M.F.W. 44)

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)

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2-2

2

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7x
boxed
med

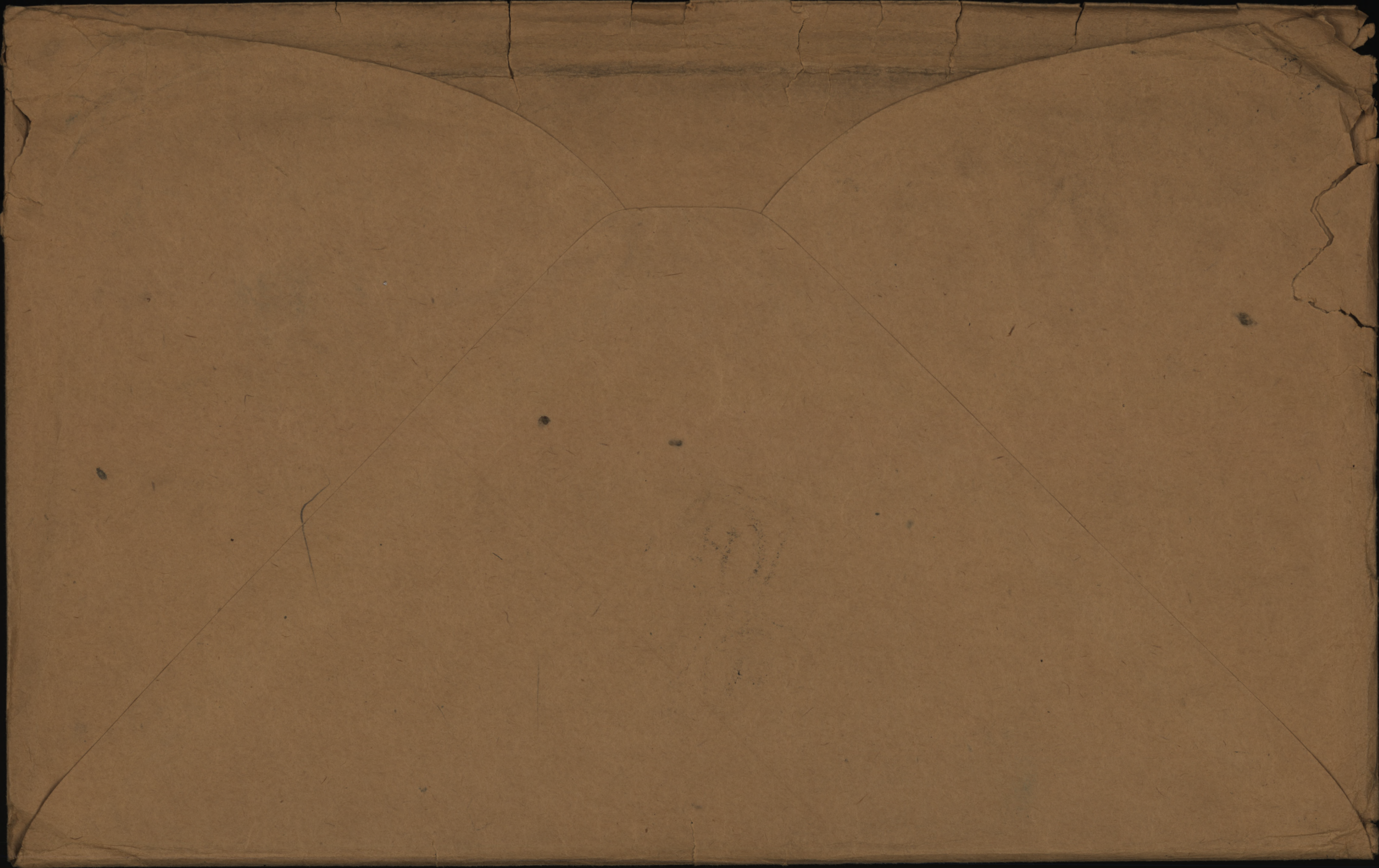
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26-22
4-22
6-22
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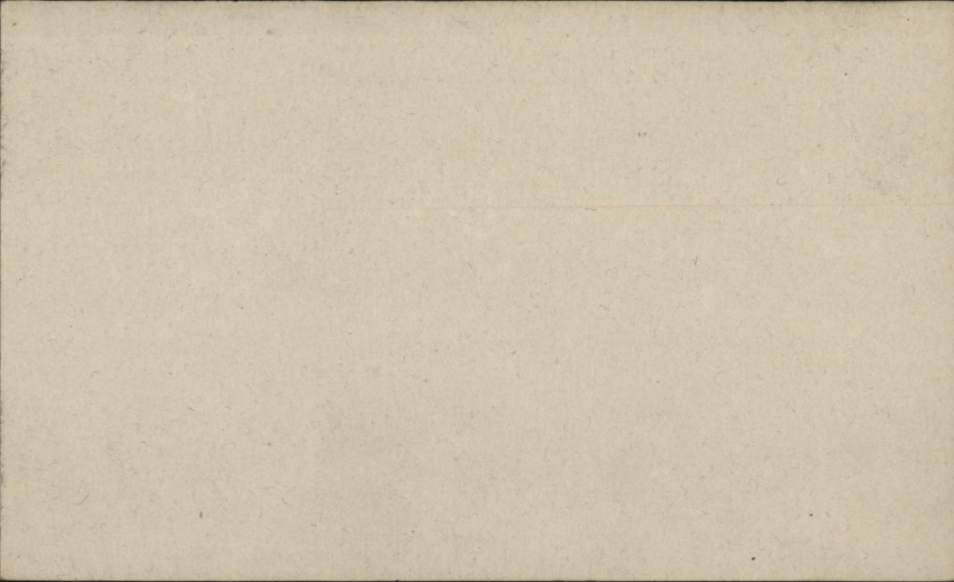
Name. Taylor
J.

Military Medal.

Rank. Pte. 725049. Date. 2-11-17.

Unit. Can. Infy. Auth. L.G. # 30364.

Index the Index ^{see}
30/4/18.



C

Taylor,

MD2
CARD NO.

✓

SURNAME.

M.M. 2/11/17. Auth

29 30364

CHRISTIAN NAMES

John

S.O.S No 8-12-19

D0339 FOR 3-12-19

REGL. NO.

725 049

RANK

Pte.

Mu. # 20W

UNIT

109th

Batt.

FORMER CORPS

Pil.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Taylor, Charles

RELATIONSHIP TO SOLDIER

Father

ADDRESS

1 Ramalley St., Burbage, Marlborough,
Wilts., Eng.

COUNTRY OF BIRTH

England, Marlborough, Wilts.

DATE

July 8th 1887.

PLACE OF ATTESTATION

Woodville, Ont.

DATE

Jan. 30th 1916.

Sailed from Halifax per



S.S. Olympic 23/7/16 488
Ric 17-8-19 390/34

Awarded "M. M." for bravery in field. (Auth. PRO-Turner - 2/9/17.)

MARRIED

SINGLE

Yes.

WIDOWER

TRADE OR CALLING

Labourer.

RELIGION

Methodist.

DESCRIPTION.

APPARENT AGE

28

YEARS

5

MONTHS

HEIGHT

5

FEET

5 1/2

INCHES

CHEST MEASUREMENT

35

INCHES

EXPANSION

2

INCHES

COMPLEXION

Dark.

EYES

Brown.

HAIR

Black.

DISTINGUISHING MARKS

Mark of Varicocele operation.

MEDICAL EXAMINATION.

PLACE

Lindsay, Ont.

DATE

Dec. 18th, 1915

NAME *Taylor John*

REGT'L No. *725-049*
H. Q. FILE No. 649.

RANK AND CORPS *Pvt. (21st. Bn.) E. D. R.*

FOLLOWS
No.

CABLE

NATURE OF CASUALTY

FOLLOWS

No.

DATE

No.	DATE	NATURE OF CASUALTY
		<i>7. of K. England.</i>
<i>Q 35-07</i>	<i>7-9-18</i>	<i>Adm. 1st. West. Gen. H. Fazakerley</i>
	<i>18-1</i>	<i>Liverpool Sept. 1st. 18. G. S. W. Head.</i>
		<i>Frac. Jaw.</i>

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
B309-2	St. West Gen. Liverpool	^{1.8} 1-9-18	new head fract. jaw
B377b	11 Can. Gen. Shornce	16-11-18	" " " "
B382-1	Duke	22-11-18	" " " "
C469	No. 14 Can. Gen. Eastbourne	²⁰ 21-3-19	Myalgia —
C500	Gran. Can. Spec. Buxton	1-5-19	" "
C551	No. 16 Can. Gen. Orpington	5-7-19	" "
C568	105 Can. Gen. Kirkdale	30-7-19	Myalgia Gen
C577	Low D Canada	8-8-19	" "

SL509 ms2

Reg. No. 725049 Name Taylor. J
 Rank Pvt Corps 2 DSO Age 33 Service 6/12 E 9/14 8 24/17
 Ledger No. _____ Serial No. 79050

HOSPITALS

DATE

DIAGNOSIS

HOSPITALS	DATE	DIAGNOSIS
College Mt Toronto	18 8 19	Osteo arthritis 9 0
Spaul St Andrews	3 9 19	8 SW Face.
Donortho	18 9 19	Tonsillitis
The DSO.	8 12 19	

HOSPITALS

DATE

DIAGNOSIS

M. F. W. 2553.
75M.—9-19.
1772-39-1332.

Name *Taylor John* Rank *Cpl* Reg. No. *725049*
 Unit *21 Buss Coy*
 Next of Kin *Chas Taylor, Hamalley Burbage, Marlborough Wilts Eng*

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
<i>1.9.18</i>	<i>1st W.I. Liverpool</i>	<i>Edw Head</i>				<i>26577</i>
<i>16-11</i>	<i>16th B. Thompson</i>	<i>Street New B.</i>	<i>100</i>	<i>133700</i>	<i>50</i>	<i>1371</i>
<i>12-11</i>	<i>Discharged</i>		<i>50</i>	<i>13582</i>		<i>9922</i>
<i>22-19</i>	<i>65th Witley</i>		<i>20</i>	<i>C419</i>		<i>5519</i>
<i>note</i>	<i>6419/27.1.19 correct</i>	<i>Reg. No.</i>				
<i>725049</i>	<i>and not 725649</i>			<i>6426</i>		<i>p.m. 1</i>
<i>14-3</i>	<i>Discharged</i>		<i>Do</i>	<i>C462</i>		<i>7554</i>
<i>21-3</i>	<i>14th B. H. & Bourne</i>	<i>Myalgia</i>		<i>C470</i>		<i>6003</i>
<i>1-5</i>	<i>from 65th Buxton</i>		<i>Do</i>	<i>C000</i>		<i>10305</i>

over

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
5-7-19	16 S.S. H. Arington		do	C 551		11527
30-7	5 S.S. Parkdale	Myalgia	gen.	C 568		11747
8-8	Inwarded to Canada					
	S-L. 509	M.D. 2		C 577		9576



A. & D.
CARD

..... HOSPITAL.

AT

A. & D. No. 1478

RANK Pte REG. No. 725049 UNIT 6th Can. Res. SICK OR WOUNDED

NAME Saylor J. Age 32 RELIGION Meth

PLACE IN HOSPITAL B. P.

DIAGNOSIS Myalgia

ADMITTED 30-4-19 FROM 14th Can. Gen. Eastbourne

DISCHARGED To

TRANSFERRED 4/9/19 16th G.H. Oxyington

SERVICE AT HOME 40/12 IN FIELD

RESULTS

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

66

Reg. No. 725048	Rank. Pfc	Surname TAYLOR	Category. A111	Dentally Unfit.
Christian Names (1) (2) (3)		Date		
Place of Enlistment:	Date of	Taken on from CORD	Religion	Inoculations
Province:	Age on	Date 19/12/18	Vaccination	
On Command	Hospital Rampersall Gran. Con. Spec. 1.5.19	Permanent Cadre Date taken on	Employed as	
Date Proceeding	Date Admitted 20/3/19			
Record of Overseas Service: 21st Bn	Profession or Trade (Civil)		Transferred or Posted to, Date	
Reason for Return:	LEAVE.			
Married or Single	No. of Pass Issued	FROM	To	Free Transportation
Address of Next of Kin		26/12/18	2/1/19	Free
Country				

Part 2 Order Entries.

No.	Date	Ref.	No.	Date	Ref.
298	19/12/18	S.D.			
20	24-1-14	H.A.			
58	14.3.19	H.D.			
67	25/3/19	H.A.			
103	8.3.19	H.A.			
124	2.6.19	S.D.			

Sumis 25

accyp 1

Disprocharge
in England

NAME

Taylor

J.

REGT. No.

725649

RANK AND UNIT

Pte

East Ont Reg 6R

NEXT OF KIN

CABLE

No.

DATE

NATURE OF CASUALTY

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
6 419	Can. Spec. Witley	22-1-19	20
6 426	Ref 6 419 report; soldier's number	should read 72564	
6 462	Discharged	14-3-19	20

A. & D.
CARD

AT.....
 A. & D. No. 8331 PL. OF ACTION.....
 RANK Pte REG. No. 75049 UNIT 6 Can Res SICK or ~~WOUNDED~~
 NAME Taylor J. AGE 32 RELIGION Meth
 PLACE IN HOSPITAL C1/F1
 DIAGNOSIS Myalgia
 ADMITTED 20-3-19 A FROM.....
 DISCHARGED..... TO.....
 TRANSFERRED From Can Spec Hosp Buxton 30/4/19
 SERVICE AT HOME 42/12 IN FIELD.....
 RESULTS.....

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

No

725049.

RANK

Plt

NAME

Taylor. John.

T. O. S.

18-12-15.

UNIT

10th. Battalion.

D. O. 26. 20-12-15.

M. D. 3

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915 Dec 18	1915 Dec 31	✓		
1916 Jan.	1916 Feb.	✓		
	Mar.	✓		
	April.			
	May	✓		
	June	✓		
	July	✓		

UNIT SAILED
JUL 23 1916



H.S.B.

B

Number 725049 Rank Plt

Surname TAYLOR

Christian Name John

Units 21st Bn Can Inf Theatre of War France

Date of Service 5-10-16

Remarks

Latest Address 98 Hazeldon Ave. Toronto Ont

Roll No.

Page 10258
200m.-2-21.M.

DESP. FEB 16 1922

REGN. NO.

Y/11739

SURNAME

CHRISTIAN NAME OR NAMES

REG. NO.

Taylor.

J.

725049 ✓

RANK

UNIT

Co.

TROOP

BATTY

Rse. HOSPITAL

E0(21) 6R

DATE OF ADMISSION

- 1. 1st Wlsen Liverpool HOSP. 1. 9. 18.
- 2. 11. E. G. Dickiffe 16. 11. 18
- 3. Can. Spec. W. H. HOSP. 22. 1. 19
- 4. H. C. G. Eastbourne HOSP. 21. 3. 19.
- Granville Spec. Buxton HOSP. 1. 5. 19.

DIAGNOSIS

- 1.
- 2.
- 3.

G Sw Head. Inact jaw.
 v. w. s. R
 Myalgia - 2.

DISPOSITION

DATE

C 45th 9-18 B309, Dis 22-11-18

REMARKS

- 23. 11. 18 B377 ✓
- 29. 11. 18 B382 T ✓
- 27-1-19 C419 x
- 4. 2. 19 C426 Note C419 correcting Regt. no.
- 18. 3. 19 C462
- 26. 3. 19 C469
- 5. 5. 19 C501
- 9. 7. 19 C551
- 1-8-19 C568
- 15. 8. 19 C577

Dis - 14. 3. 19.

Invalidee to Canada P. 8. 19

A.M.D. 2 Dept.

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

EPITOME OF HOSPITAL TREATMENT

HOSPITAL

ADM.

1.

16. Cam. Gen. P. Arpington
5 G. S. Kirkdale

5-7-19.
30-7-19

2.

3.

4.

5.

6.

7.

*Name TAYLOR. JOHN Rank _____ Pte. _____ Regtl. No. 725049
 Fyle Depot _____
 Original Present
 Unit 109th unit _____ M. or S. Age 32 Religion Meth Ref. H.Q. _____
 Port, ship, and date of arrival Portland Araguayal7-8-19
 Next of kin (F) Chas Taylor. 1 Ramalley Buddadge Marlboro Wiltshire Eng.
 Address on leave Same
 Address on discharge 98 Hazeldon Ave., Toronto, Ont.
 Transportation issued Yes _____ No _____ Date _____ Character on discharge _____
 Previous occupation laborer. Date and place of enlistment Dec. 18th Woodville. 15.
 Diagnosis Chr-Osteo-Arthritis Date of Medical Boards 1-12-19

T.O.S.	Date.	Remarks.	Pt. 2 Order No.
	7-8-19	Posted to HOSP SECT. 17-8-19	233.
	18-8-19	Clearing Dept to C.M.H.	H.S. 233
	3-9-19	C.M.H. to St. And.	H.S. 248
	18-9-19	D.O.H. to St. And.	H.S. 262

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

[OVER]

Date

Remarks.

Pt. 2 Order No.

3-12-19

D.O.H. to Cas. Co. (Rem. in.)

H.S. 337

8-12-19

S.O.S. DIS. "MEDICALLY UNFIT"(TO TAKE FURTHER OUT-PAT'T

TREAT'T WITH THE DEPT. OF S.C.R.) 183 days W.S.G. 339

No. XI. G.G.H. Moore Barracks.

.....1918

Requisition Urinalysis

Report

Date 16.11.16. 72504g

Colour

amber

Reg. No. 72504g

S. G.

1022

Name Taylor P. J.

Reaction

acid

Unit 27th Coy. Bn.

Sugar

neg

Ward. 4

Albumen

neg

Diagnosis 1. & 1. Wd. Chest Microscopic.

Exam. Req. Routine

..... E. Brown Rpt for Capt. GAMB. C. I/c Lab.

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1910

55954

Taylor, J. Pte. 725049 21st Battalion,

Will detached by Paymaster 109th Batt'n, C.E.F.

H. J. Williamson (Capt)
P. M. 109th Batt'n C.E.F.

- 20 -

Perforated sheet for Will from Pay Book of Reg.

No. *725049*

Name *John Taylor*

Unit *"B" Coy. 109th Bn. Can. Inf.*

Military Will.

I hereby give and bequeath
all my personal belongings
and effects to my mother
Mrs Fanny Taylor, 1 Ram Alley
Burbage Marlborough, Wilts,
England

H. J. Williamson
Witness

Signature *J Taylor*

Rank and Regt. *Pte 109th Bn. Can. Inf.*

Date *1st Oct 1916*

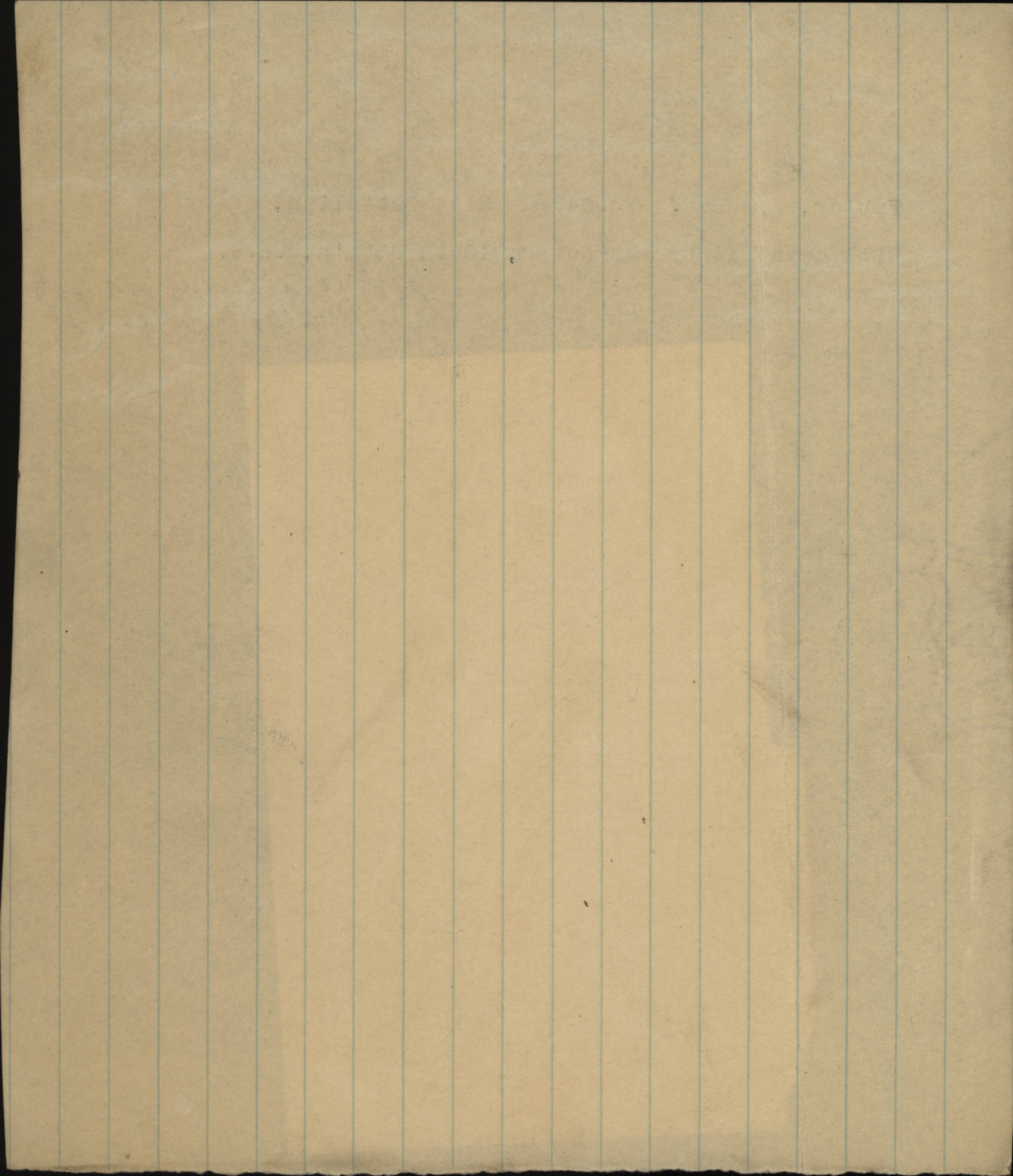


Plate No. 1312

X - Ray Dep't D. O. H.
Toronto

Reg~~s~~ No. 725049 Rank- Pte Name- TAYLOR

Date- 14-11-19

Referred from
Capt Casserley

Part affected -

Radiographs show no bone lesion in shoulder,
Elbow, Ankles, or Dorsal Vertebrae.

G. R. Reid Capt.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

War Service Badge
No: 121288

EG

This is to Certify that No. #725049 (Rank) PTE

Name (in full) TAYLOR, John. (MILITARY MEDAL) enlisted in
the 109th Battalion

CANADIAN EXPEDITIONARY FORCE at Lindsay, Ont. on the 18th.
day of December 19 15

HE served in ENGLAND & FRANCE::::

and is now discharged from the service by reason of "MEDICALLY UNFIT"

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

Age 33 Yrs.

Height 5' 6"

Complexion Dark

Eyes Brown.

Hair Dark

J Taylor
Signature of Soldier

Marks or Scars Vacc. scars left arm.

Scar left Cheek, Left side of head

G.S.W. HEAD 29-8-18

GOLD STRIPE ONE.....1

AWARDED: MILITARY MEDAL

AUTHORITY: /Lon. Gaz. #30364 (6th Supp)

date 14-12-17

H. J. [Signature]
Issuing Officer

Date of Discharge 8th December 1919

For Rank
2nd District Depot
Appointment

Signed at Toronto, Ontario this 8th day of December 19 19

in Military District No. #2.

File Reference No.

N.B.—As no duplicate of this Certificate will be issued, any person finding same is requested to forward it in an unstamped envelope to the Secretary, Militia Council, Ottawa, Canada.

CANADIAN EXPEDITIONARY FORCE
Discharge Certificate

No. (Rank) Name

Unit Uniform is not to be worn after

Address on Discharge expiration of one month from date of

Character and Conduct discharge, except by special permission
of G. O. C. District.

Former Occupation

Special Qualifications of Value in Civil Life

Medals and Decorations

Remarks On demobilization the

Signed at this day of 19

Name of Officer

Rank

Appointment

(SERVICE AND CASUALTY FORM Part II).

509

Regiment or Corps 109th Bn Regimental Number 725049
 *Substantive Rank PTE Surname TAYLOR Christian Names John
 *Acting Rank _____
 (*To be entered in pencil to facilitate alteration.)

To be folded on this line.

Nothing to be written in this margin.

(226388.) Wt. W. 9533-F. 2008. 500,000. 3/19. S. & S., Ltd. E. 4602.

(A) Report.		(B)	(C)	(D)	(E)	(F)
Date.	From whom received.	Authority of Part II. of Orders.	Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	Place of casualty.	Date of promotion, reduction, reversion, casualty, &c.	Remarks, and initials and rank of an officer.
			arrived in England per A.M. 2810	31.7.16		
5.10.16	109 th Bn	Pt. II 279	SOS 6.21 st Bn overseas	Branshott	5.10.16	
9.10.16	21 st Bn	" 58	T.O.S. from 109 th Bn	Field	6.10.16	
14.12.17	"	" 107	Awarded the Military Medal for bravery in the field	"		auth. London Gazette (6 th Sup) dt. 2.11.17
13.7.18	"	" 50	awarded Good Conduct-Badge	"	18.12.17	
			wounded	"	30.8.18	3736-6 of 4 th 18
10.9.18	EOR D	" 228	Posted from 21 st Bn on adm l: 1 st W. G. St Liverpool (wounded)	Seaforth	1.9.18	21 st Bn Pte 69 dt. 12.9.18
25.11.18	"	" 292	On Comm L. 1 st G Co D	Witley	22.11.18	1 st G Co D Pt. II 333 dt. 2.12.18
19.12.18	6 th Res	" 298	Posted from EOR D ex 1 st G Co D	"	18.12.18	6 th Res Pt. II 315 dt. 21.12.18
5.6.19	EOR D	" 131	T.O.S. from 6 th Res (sick)	"	1.6.19	6 th Res Pte 12 dt. 2.6.19

certified correct
 J. O'Brien
 for Lt. Col in Charge Records. Lieut. DMFC

(A) Report.		(B) Authority of Part II. of Orders.	(C) Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	(D) Place of casualty.	(E) Date of promotion, reduction, reversion, casualty, &c.	(F) Remarks, and initials and rank of an officer.
Date.	From whom received.					
7-8-19		T.O.S. No. 2 District Depot, Part II, D.O. No. 233				
			<i>Shinick</i> Captain & Adjutant, No. 2 District Depot.			
		S.O.S. DIS.#2 D.D. 8th Dec. 1919 Pt. 11 D.O.#339				
			<i>Shinick</i>Capt. FOR O. C. No. 2 D. D.			

Nothing to be written in this margin.

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

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

250M.—1-16,
H. Q. 1772-39-920.

Casualty Form—Active Service.

109th OVERSEAS BATTALION, C. E. F.

Unit, Regiment or Corps

Regimental No. 25049 Rank Private Name Taylor John

Enlisted (a) 18.12.15 Terms of Service (a) D of W. Service reckons from (a) 18.12.15

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

Extended _____ Re-engaged _____ Qualification (b) Laborer

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

Report Date	From whom received	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.
		Embarked Canada	Halifax	24.7.16	
		Disembarked England	Liverpool	31.7.16	
		Transferred for Overseas Service with <u>21st Batt'm</u>		OCT 5 1916	O.Pt.11. No. <u>279</u>
	C.B.D.	Arrived & Taken on Strength	C.B.D.	6/10.	Pt. II O. 58. 9-10-16.
	Do.	Left for unit.	en route.	20/10.	<u>Adjutant</u>
					ADJUTANT. → N.R. <u>20</u>
					109TH BATTALION CAN. INFANTRY. <u>10</u>
	21st BATTALION	joined unit.	21st BATTALION	22/10.	B. 213. 27/10.
	24/11.	Do. granted 14 days leave	Field	19-11-17	B213. Pt. II O. 107 d/14-12-17.
15.12.17	do	Rejoined from Leave	do	6.12.17	B213
	2/11	Awarded MILITARY MEDAL for bravery.	In the Field		No. 30364 (6 th Sup.)
	10/3	GRANTED 14 DAYS LEAVE.	Do	15-3-18	Pt. II O. 107 d/14-12-17.
	6/4	Rejoined from Leave	Field	3-4-18	Part II Ord. 22 d/ 31-3-18
	6/7	Awarded Good Conduct Badge	Do	18-12-17	B-213.
	12 Slaty	S.W. head - Adm & trans	23 A. IT.	29-8-18	Part II Ord. 50 d/ 13-7-18
	18 Slaty		England	1/9	W. 3034

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

[P.T.O.]

J.M. Rank Name TAYLOR, John. Reg'l No. 725049

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

Place and Date of Enlistment Woodville, 18th Dec 1915. Place of Birth Ramalley, Marlborough, Wiltshire, Eng. ✓

Name and Address, Next-of-Kin Chas. Taylor. Relationship Father. ✓

1 Ramalley Burbage, Marlborough, Wiltshire, Eng.

Assigned Pay Monthly \$ Payable to Relationship X428

Separation Allowance \$ Payable to Relationship

Handwritten initials/signature

Discharge, Date and Place Reason Character

H. W. & V., Ltd. - 7165-16.

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Rank	Place.	Date.	REMARKS Taken from Official Documents.
Date.	From whom received.					
C		Arrived in England per H. M. T. 2810 31-7-16				
5-10-16	109th Bn	S.O.S. to 21st Battalion	Branscott	5-10-16	PT II 150-279	WSR
9-10-16	21st Bn	T.O.S. from 109th Bn	Field	6-10-16	" II 58.	
14. 12. 17.	21st Bn.	Awarded the <u>Military Medal for Bravery in Field.</u>	"	"	PT II 107	Confirmation Log. 30364 (6th Sub.) d/11/17
13-4-18	21st Bn.	Awarded G.C. Badge	PT	"	18-12-17 PT II 80-50	
		Wounded	"	"	30-8-18 3736-6 of 4-9-18	3. SW. head sq.
10-9-18	CORD.	Posted from 21st Bn France on adm. to 1st W.S.H. Liverpool (Warrs)	PT	Seaford	1-9-18 PT II 228	
25-11-18	"	On land 1st 669	"	Witley	22-11-18 PT II 292	d/21st Bn. PT II 69 d/12-9-18 d/1st W.S.H. PT II 333 d/2-12-18

A.F.B. 103 CHECKED
11 OCT 1916

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.				
19-12-18	6 th Res	Posted from EORD. ex 1 st CCD	Pte Witley	18-12-18	E.O.R. 315 Pr 298 1st CCD No 349 dt/18.12.18
5-6-19	S.O.R.D. E.O.R.	TOS from (Mrs (wid))	" "	1-6-19	- 131 6 Res 15 Dec 26.19
15-8-19	5 C th H	Invalided to Canada AZ# 509 M D # 2.	Pa Witley	8-8-19	ELC 577
6-9-19	E.O.R	S.O.S CANADA	WITLEY	8-8-19	% 214

33888.

MILITIA AND DEFENCE ASSIGNED PAY.

Ref. No. NR

To whom Mrs. Charles Taylor,
Address Ranally, Marlboro',
Wiltshire.

By whom assigned Taylor, John
Regtl. No. 725049
Rank Pte.
Corps, &c. 109th. Battalion

Rate \$15.00Date to Commence August 1st., 1916.

PAYMENTS.

Month.	Year.	Cheque No.	Amt.	Pay Sheet Deduction.	REMARKS.
Jan.	1916				
Feb.					
March					
April					
May					
June					
July					
Aug.		150267	15	X	
Sept.		180100	15	X	
Oct.		220632	15	X	
Nov.	60 ✓	241697	15	X	
Dec.		298071	15	X	
Jan.	1917	359667	15	X	
Feb.		383262	15	X	
March		431757	15	X	
April					
May					
June					
July					
Aug.					

*A.P. Checked & found correct
by Blatney*

ASSIGNED PAY.

By whom assigned *Taylor John (Pte)*
 Regtl. No. *725649* *109th Bn*

Month.	Year.	Cheque No.	Amount.	Pay Sheet.	REMARKS.
Sept.	1917				
Oct.					
Nov.					
Dec.					
Jan.	1918				
Feb.					
March					
April					
May					
June					
July					
Aug.					
Sept.					
Oct.					
Nov.					
Dec.					
Jan.	1919				
Feb.					
March					

ORIGINAL ORIGINAL

MEDICAL HISTORY SHEET

Surname Taylor Christian Name John 2173

Examined { on 18th day of December 1915
 at Lindsay

Birthplace { City or Town Ramally
Marlborough
 County Wiltshire England

Apparent age 28 years

Trade or occupation Laborer

Height 5 Feet 5 1/2 Inches

Weight 119 Lbs.

Chest measurement { Minimum 33 inches
 Maximum expansion 35 inches

Physical development Good

Small-Pox Marks None

Vaccination Marks { Arm Right None Left Five
 Number Five

When Vaccinated last February 19th 1916

(a) Marks indicating congenital peculiarities or previous disease None

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

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

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT
		4 SEP 1918
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date	Result	VACCINATIONS
<u>19.2.16</u>	<u>Good</u>	<u>J. McCulloch</u> M.O.
		M.O.
		M.O.

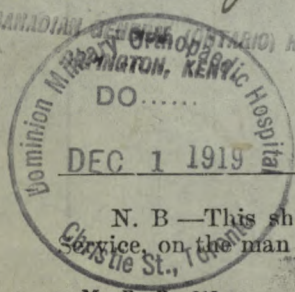
Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>9/5/16</u>	<u>Good</u>	<u>J. McCulloch</u> M.O.
<u>25.5.16</u>	<u>"</u>	<u>J. McCulloch</u> M.O.
<u>4.6.16</u>	<u>"</u>	<u>J. McCulloch</u> M.O.
<u>22.9.16</u>	<u>"</u>	<u>J. McCulloch</u> M.O.

Enlisted on 18th day of December 1915 at Lindsay

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>109th Batt</u> <u>C.E.F.</u>	<u>725049</u>		<u>18.12.15</u>
Transferred to.....	<u>21st Bn</u>			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>1st. C. C. D. Witley</u>	<u>13. 12. 17</u>	<u>Nil</u>	<u>'A'</u>
<u>1st. C. C. D. Witley</u>	<u>9 JUL 1918</u>	<u>Myalgia</u>	<u>Discharged</u>



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

J. H. W. Davis
 Capt. M.C.

CANADIAN

Christian Name John

Surname Taylor

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					
MERSEY PARK MIL. HOSPITAL De Roncheud NO. XI CANADIAN GENERAL HOSPITAL MOORE BARRACKS SHORNCLIFFE.		2	9	15	15	11	15	G.S.W. Head.	74	Transferred to Can: Mil Hosp. Shorncliffe.	Puze	
		7	5	NOV	1918	22	11	18	do.	7	On Aug. 26/18 S.W. left cheek knocking out 2 teeth, also sh. red. left parietal region. Wds. healed on admission. DI	It was Capt. J. B. Bantister REGISTRAR.
CANADIAN SPECIAL HOSPITAL WITLEY, GURSEY.		21	11	1914	3	19		Gonorrhoea	53	APPARENTLY CURED. IRRIGATIONS, LOCAL TREATMENT AND MEDICINES. STOPPAGES AS PER DATES.		
14th Can. M. Hosp. Eastbourne		20	4	19	30	4	19	Myalgia	42			
Granville Can. Spec. Hosp Derbyshire		30	4	19	4	7	19	Myalgia	66	2/6/19. Considerable wasting left shoulder require and upper arm muscles 1" less than right. All movements of left shoulder passively full but he cannot raise arm above head. All muscles respond to paraffin. Holds left shoulder same stiffly. Condition greatly improved under treatment transfer to Gurney		
Deington		4	7	19	25	7	19	Myalgia	21	Improved under treatment transfer to Gurney	Edward Handley Capt M.B. Registrar	
					29	7	19		25	Consider the same. I.T.C.		

1874
33

James T. ...
of ...
...

The ...

James T. ...

...

...

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...

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...

...

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
Year	Unit.	Age.	Service.	
72713	775049	Plt	Taylor	J.
1918	22nd Loan Bn.		32	47-12
Station and Date.	Disease W. w. ^{left} cheek			
Moxt. G. H.	On Aug 25/18 P. W. left			
Shorncliffe	cheek knocking out 2 teeth.			
16-11-18	Also o. w. left parietal region			
	Healed on admission			
	To Linn			
	D. Swan left			

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

Station
and Date.

ASSIGNED PAY	ENGLAND or CANADA	SEPARATION ALLOWANCE	ENGLAND or CANADA	NAME: TAYLOR John 78			
EFFECTIVE DATE: 1-8-16		EFFECTIVE DATE: 9/19		NUMBER: 725049			
AMOUNT: £15.00		AMOUNT: -		PARTICULARS OF RANK OR APPOINTMENT			
NAME, ADDRESS, RELATIONSHIP & AUTHORITY		WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.		AUTHORITY			
Mrs Char Taylor (Mother) 1 Ranalley Marlborough Wiltshire Eng				DATE EFFECTIVE			
				RANK OR APPOINTMENT			
				UNIT AND TRANSFERS			
				ORIGINAL UNIT: 1094 Bn			
				DATE ACCOUNT FIRST OPENED: 1-8-16			
		AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S F O			
			1/9/18	UNIT TRANSFERRED TO			
		21 Bn CORD					
EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS							
DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
DAILY RATES OF PAY AND ALLOWANCES							
AUTHORITY		PAY	F.A.	P.F.A.	SUBS'CE ALL'CE		
		1	10				

21/79 L.P.C. Balce @ £16.49
 10. Canada, 8/19 N.R. Org A. 188 v. 79, Orpington to Orpington M.D. - Comp. 7/9

MONTH	PARTICULARS	CR 1	CR 2	PARTICULARS	DR 1	DR 2	DR 3	DR 4	BALANCE	DEFERRED	SEPARATION
8/19	Bal Ford								4756		
Apr	P.P.	33		Cheque A 41965 £3-1-8			15				
				AR 27 9/18 21 Bn	446				6110		
		33			446		15				
May	P.P.	3410		A66568 £3-1-8			15				
				AR 96 3-5-18 21 B	803						
				' 133 19-5-18 ✓	357				6860		
		3410			1160		15				
June	"	33		B52754 £3-1-8			15				
				AR 228 8/6 21 B	446						
		33		' 291 23/6 ✓	357				7887		
July	"	3410		B77351 £3-1-8	863		15				
				AR 24 8/4 21 Bn	446						
				- 636 21/4 ✓	357				8964		
Aug	"	3410		251351 £3-1-8	808		15				
				AR 728 2/8 21 Bn	357				10517		
		3410		D8094 3-1-8	357		15				
Sept	✓	33							12317		
Oct	"	3410		D 6094 ✓			15				
				AR 12103 16/10 5. B. Lt.	972				13260		
		3410		8. 3793 - £3-1-8	972		15				
Nov	"	33		" 4966 21/11 XI Gen Lt	4867						
				£. 68394 (Dec) £3-1-8			15				
				✓ D 300. 4/11 2' post	487						
				✓ 4805 14/11 M. Oxs.	487						
Dec	"	3410		" 7312 25/12 14 ccs.	972						
				" 6798 17/12 "	487						
				Totals found	7301		30				

NUMBER 725049 RANK Pte NAME TAYLOR John

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4.	BALANCE	DEFERRED	SEPARATION
				Balance 8/8					132 54		
1919				Totals forward	73 01		30				
Jan	PP	34 10		212971 £3-1-8			15		115 73		
	Totals forward	67 10									
Feb	PP	15 70		a.R. 4649 9/1/19 6 Res	73 01		45				
		30 80		267017 £3-1-8	9 73		15				
Mar		34 10		917930 £3-1-8			15				
	Sick Furlor (110 days) 1 st ced. 22-11-19. 2. 12. 18 th (D.D. 333. 2/12/19)	7 30		H.G. 53 days. Yr. 1. 19. 6 th 11. 3. 19. @ 50 th D.O. 60. 17. 3. 19. (1957) 6 Res.	26 50	31 80					
Apr	P.O.D.	17 70		a.R. 7041. 14/13/19. 6 Res.	51.				115 89		
		33 -		A. 8148 £3-1-8	10 74	31 80	30				
May		34 10		OR 36 7/4/19. 6 Res.	2 43						
				214. 25. 4. 19. ✓	2 43						
				A90492. £3-1-8			15				
				1013. 8. 5. 19. 9CSH Burton	4 87				143 26		
June		67 10			9 73		30		210 34		
		33 -		a. 89717 June £3-1-8			15		34 87		
				a.R. 1477 3/6 Boston	4 87						
July		34 10		a. 65699 July £3-1-8			15		175 49		
		67 10			4 87		30				
				£126884 Aug £3-1-8.			15				
				7791 18. 7. 19 16 C.G.H.	48 67				111 82		
					48 67		15				

Sos. Canada 8/8/19.

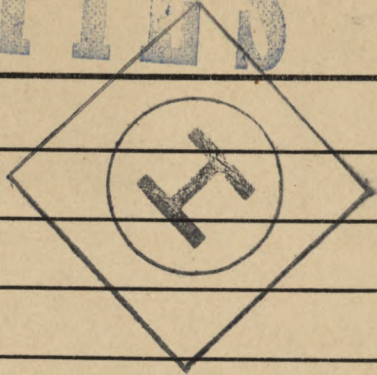
4-3-46

①

CASUALTIES

SHORT FORM.
PROCEEDINGS ON DISCHARGE.
(Demobilization.)
EG

War Service Badge
Class... **M**
No. 121 288



1. No. #725049

2. Rank PRIVATE.

3. Name TAYLOR, John. (MILITARY MEDAL)

4. Unit 109th Battalion (#2 D.D.)

5. Date of Discharge DEC 8 1919 Place TORONTO, ONT.

6. Reason for Discharge.....
"MEDICALLY UNFIT"
.....
.....

7. Authority (#2 D.D. Part 11 Daily Order #339)

8. Proposed Residence after Discharge.....
98 Hazeldon Ave., Toronto, Ontario.
.....

9. CERTIFICATE TO BE SIGNED BY SOLDIER.

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

J Taylor

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place TORONTO, ONT.....

Date DEC 8 1919.....

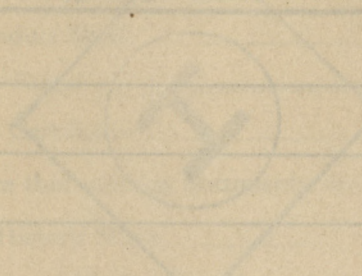
NO. 3
DEC 8 1919
DISTRICT DEPOT.

Signature.....

H. Dargatzis

(O. C. Discharging Unit.)

SWIFT FORM
PROCEEDINGS ON DISCHARGE



Blank lined area for recording details of the discharge proceedings.

CERTIFICATE TO BE SIGNED BY SOLDIER

I hereby acknowledge that at the underlined place and date I received my discharge Certificate

CONFIRMATION

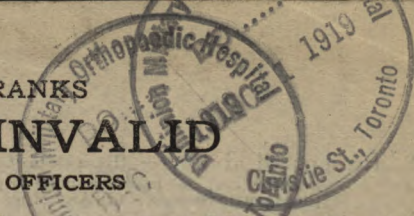
The discharge of the above named man is hereby confirmed.

LIST OF DISCHARGE DOCUMENTS.

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

THIS FORM WILL BE USED FOR ALL RANKS
MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS



1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" issued by the B.P.C. and instructions issued by Militia H.Q., Ottawa, will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of Sections 1 to 17 of this Form and will obtain the signature of the invalid to the "Statement," page 3. The President of the Board of Medical Officers is responsible for the proper completion of sections reserved for recording the "Opinion of the Medical Board."
3. In answering the questions, Medical Officers will carefully obtain and record the invalid's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the invalid concerned, from witnesses, or from documents, Regimental or otherwise.
4. Special care is required in answering question 9. Read the questions carefully. All questions must be answered.
5. If space provided under any section is insufficient add another sheet. Such sheets must be initialled by the Medical Board.
6. A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board."
7. Under no circumstances may information other than that in sections 7, 8, 9 and 10 be communicated to the invalid, directly or indirectly.
8. The nomenclature of diseases must be followed, if possible, as described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London (1915), by Messrs. Harrison & Sons.

STATION Dom. Orth. Hospital..... DATE December 1st/19.....

1. 1 (a) Unit D.D. #2..... (b) Regimental No. 725049..... (c) Rank Pte......
 (d) Surname TAYLOR..... (e) Christian name John.....
 (f) Home address 98 Hazeldon Avenue, Toronto, Ont......
 (g) Next of Kin Fanny Taylor..... (h) Relationship Mother.....
 (i) Address of Next of Kin Ram Alley, Burbage, Nr. Marlborough, Wilts, England.....

2. Age last birthday 33..... Date of birth July 8th/1886.....

3. Enlistment, or Appointment (if an Officer) (a) Place Lindsay, Ont...... (b) Date Dec. 18th/15.....

4. Personal description:

(a) Height 5ft. 6"..... (b) Weight 130..... (c) Complexion Dark.....
(stripped)
 (d) Colour of hair Dark..... (e) Colour of eyes Brown..... (f) Identification marks, Scars, etc.
Scar left cheek -left side of head.

5. Former trade or occupation Farmer.....

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).	Years 3	Days 11 mos. 16 dys.
---	-----------------------	------------------------------------

	PERIODS	
	From	To
Canada.....	Dec. 18th/15	July 20th/16
England.....	August 1st./16	Oct. 6th/16
France or other theatres of War..... <u>England & Canada</u>	Oct. 6th/16 Sept. 2nd./18	Sept. 2nd/18 To date.

7. Original disease, or injury Chronic Osteo-Arthritis.....

(a) Date of origin April 15th/18..... (b) Place of origin Witley, England.....
 (c) Cause Conditions of active service......

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

(1)
Partial loss of function left ankle from pain and weakness. (2) left shoulder - (3) left elbow - (4) spine - (5) left tarsus

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

1- Objective :- Tenderness on firm pressure just posterior to external malleolus - X-Ray shows no abnormality -

Subjective :- He can walk one half mile with the aid of a stick, He experiences some pain when walking all the time, the pain becomes worse as the exercise is prolonged.

2. Objective :- Limitation of movement left shoulder- He cannot raise the left arm straight above the shoulder. The arm falls short of assuming a perpendicular position by 30° - X-Ray shows no abnormality.

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

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

Special Senses... No Respiratory System... No Integumentary System... No

Disturbances of Mentality... No Digestive System... No Muscular System... No

Osseous and Joint Systems... No Any other general condition... No

Urinalysis negative.

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

April 15th/18 he had a severe attack of pain in the back and was admitted to Hospital- He has been under treatment ever since. The tenderness spread to other joints referred to- Tonsils were removed and teeth were repaired - Since then his joints have improved - He contracted Gonorrhoea Jan. 1918- Hospital treatment - Discharged as cured early in March 1918.

OPINION OF THE MEDICAL BOARD

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

We concur

19. Is the invalid fit for

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

20. It is certified that the invalid

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

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

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

We recommend that he be discharged "Having been found medically unfit for further service" for further treatment under S.C.R. as out-patient

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

PLACE Dominion Orthopaedic Hospital

DATE December 1st/19

[Handwritten signatures]
President.
Members

TO BE COMPLETED WHEN TREATMENT IS REFUSED

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

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

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

APPROVED BY *[Signature]* APPROVED BY *[Signature]*
Assistant Director of Medical Services. Director-General of Medical Services.
DATE 12-4-19 DATE.....

10T 2002 vol 13

THIS FORM WILL BE USED FOR ALL RANKS
MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" issued by the B.P.C. and instructions issued by Militia H.Q., Ottawa, will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of Sections 1 to 17 of this Form and will obtain the signature of the invalid to the "Statement," page 3. The President of the Board of Medical Officers is responsible for the proper completion of sections reserved for recording the "Opinion of the Medical Board."
3. In answering the questions, Medical Officers will carefully obtain and record the invalid's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the invalid concerned, from witnesses, or from documents, Regimental or otherwise.
4. Special care is required in answering question 9. Read the questions carefully. All questions must be answered.
5. If space provided under any section is insufficient add another sheet. Such sheets must be initialled by the Medical Board.
6. A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board."
7. Under no circumstances may information other than that in sections 7, 8, 9 and 10 be communicated to the invalid, directly or indirectly.
8. The nomenclature of diseases must be followed, if possible, as described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London (1915), by Messrs. Harrison & Sons.

STATION Orpington DATE 17-7-19

1. 1 (a) Unit 6th Res. (b) Regimental No. 725 049 (c) Rank PTE
 (d) Surname TAYLOR (e) Christian name JOHN
 (f) Home address 1 Ramalley, Berbage near Marlborough, Wilts
 (g) Next of Kin Mr Chas Taylor (h) Relationship father
 (i) Address of Next of Kin same address.

2. Age last birthday 33 Date of birth 8th July - 1887

3. Enlistment, or Appointment (if an Officer) (a) Place Thimbury (b) Date 18-12-15

4. Personal description:
 (a) Height 5' 5 1/2 (b) Weight 125 ^{blus} _(stripped) estimated (c) Complexion dark

(d) Colour of hair black (e) Colour of eyes hazel (f) Identification marks, Scars, etc.

Scar (wd) left parietal region size of 6d.

5. Former trade or occupation Farm laborer

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

Statement	PERIODS	
	From	To
	Canada <u>18-12-15</u>	<u>20-7-16</u>
England <u>1-8-16, 6-9-16</u>	<u>2-9-18</u>	
France or other theatres of War <u>FRANCE 6-9-16</u>	<u>2-9-18</u>	

7. Original disease, or injury MYALGIA.

(a) Date of origin MAR pub APR - 1919 (b) Place of origin ENGLAND
 (c) Cause CONDITIONS OF ACTIVE SERVICE

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

(M.Y.A.L.G.I.A) Partial loss of function left arm & forearm, difficulty in stooping, pain in left heel.

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

OBJECTIVE. Muscles of left ~~arm~~ shoulder girdle, upper arm and to less extent forearm wasted. Cannot raise left arm above level of shoulder. Marked weakness of extending and flexing forearm, some weakness left hand.

Back: Inability to stoop beyond an angle of 35° degrees from perpendicular. Left heel. Pain on pressure, some redness.

Electrical reactions from Spec. all muscles respond to Faradism.

Temp. 100 7/5 July 11th - since then 99 to 99 1/5 - pulse 90 to 94.

SUBJECTIVE. Weakness of left arm and shoulder, weakness of back and pain in left heel & hips. Some pain in left shoulder.

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

Nervous System... no Cardio-Vascular System... no Genito-Urinary System... no
Special Senses... no Respiratory System... no Integumentary System... no
Disturbances of Mentality... no Digestive System... no Muscular System... no
Osseous and Joint Systems... yes A Any other general condition... yes B

A. GSW Head & neck 25-8-18. Mumps/Park Hosp. 2-9-18 to 15-11-18. More
Dandruff 15-11-18 to 22-11-18. 2 teeth knocked out - otherwise no disability

B. French feet he states Nov/17. Since then feet feel cold & hurt when he walks. Did not go to hospital with this condition

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

States - Pain started in small of back Apr/19 - then both hips (left worse) - then left shoulder & elbow - left heel. Weakness & wasting started at same time. Improved at Granville Spec. - now stationary.

Documentary: 14th CGH Myalgia 20-3-19 to 30-4-19 - functional paralysis leg.
Gran Spec. 20/1/19 to 4-7-19. Considerable wasting shoulder girdle & left arm. All muscles respond to Faradism. Temp at Exeter & Boston 99 to 100 - pulse 80 to 100.

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

French Feet low / 109 -
rns.

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

Scar size of 6d. left parietal region

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

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

Not applicable

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

The regimental documents will be referred to.

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

13. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? 6 months

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

Hospitalization - electrical treatment, radiant heat, exercises etc

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit? (If the answer is "yes" state nature of treatment required and probable duration)

yes - observation, general & special treatment - 6 months

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

17. Recommendations:

ITC

M. S. Barber Capt. C. A. M.
Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

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

I, the undersigned..... have heard the description of my disability and present condition read, and am satisfied (or not satisfied) with it. (If dissatisfied, statement should follow.)

I complain in addition of.....

with

Pte J Taylor Rank.
Signature of invalid examined.

OPINION OF THE MEDICAL BOARD

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

See answer

19. Is the invalid fit for

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

20. It is certified that the invalid

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

myalgia - 6 months - massage - electricity

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

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

Returned to invalided to Canada

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

PLACE *100 TO CANADIAN GENERAL (ONTARIO) HOSPITAL*

W. H. ...
E. N. Ballantyne } President.
Members

DATE *9 JUL 1919*

TO BE COMPLETED WHEN TREATMENT IS REFUSED

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

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

PLACE..... } President.

DATE..... } Members

APPROVED BY *[Signature]*
Assistant Director of Medical Services
Captain, C.A.M.C.

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

DATE.....
for A.D.M.S. Canadians London Area.

DATE *9 JUL 21 1919*
13 BERNERS ST. LONDON, W.1

725049 Pt Taylor J.
.....
(No.) (Rank) (Name in full)

M.F.W. 2595 has been submitted, showing total
Service of 3 years 9 months "Canada" England &
"France."

Date 22-10-19 Signature J. Hecker

N.B. "Erase where does not apply. #2 District Depot.

H.B. Please note does not apply. District Dept.

Date

[Handwritten signature]

22-10-19

Service of 3 years
M. 1. 1884 has been submitted, showing total

[Handwritten signature]
72047
22047
8

DOMINION ORTHOPAEDIC HOSPITAL

W. J. Taylor
No. 421049

Date

Nov. 28th 1919

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

J. W. Casserly
Captain C.M.D.

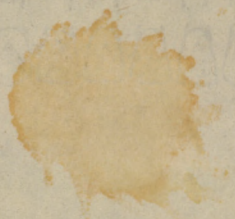
W. L. Garrison

1852

W. L. Garrison

X X V W X X X

X X X

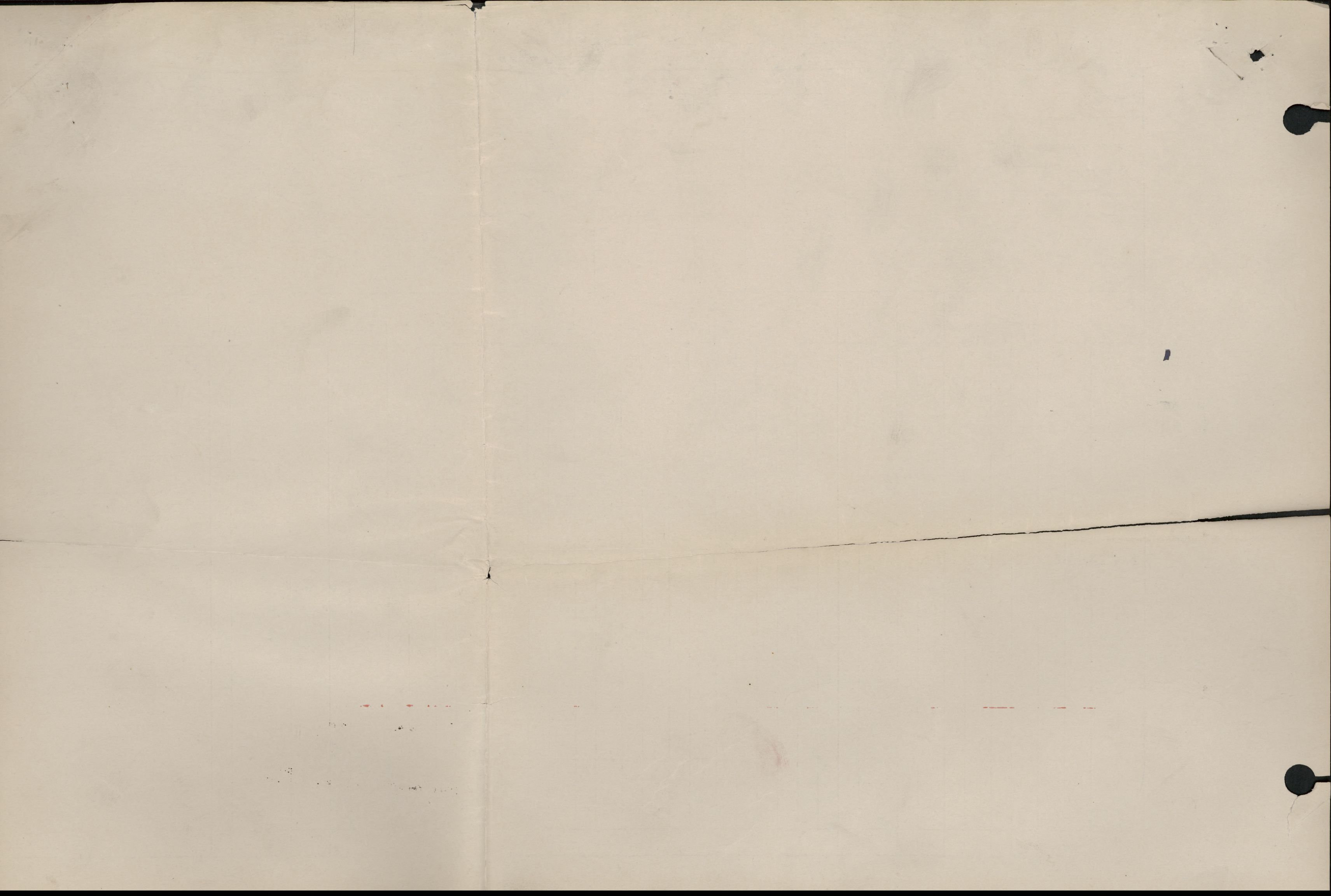


DEPT. OF THE ARMY
WASHINGTON, D. C.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	425049	Pte.	Taylor	J
Year	Unit.	Age.	Service.	
1918	21 st Canadian	32	2 ^{1/2}	
Station and Date.	Disease			
Wesley Park. Sept 2nd. 17.10.18	S. W. Head.	191 wound of cheek.		
	Five months further New			
	Hospital Canadian Hospital New			

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



"ARAUAY A" 18-3-19

No. 2 DISTRICT DEPOT

AUDITOR PAYMASTER

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

(1) REGT. NO. 725049

RANK Pte. NAME (IN FULL)

TAYLOR, J.

M. OR S.

NEXT OF KIN RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? DATE EFFECTIVE

TO WHOM PAID *nil* RELATIONSHIP

ADDRESS

ORIGINAL UNIT C.E.F.

PLACE OF ATTESTATION TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY \$ DATE EFFECTIVE

PAYABLE TO *15 - 31/8/19 closed by England* RELATIONSHIP ANY CHANGE IN ASSIGNEE OR ADDRESS

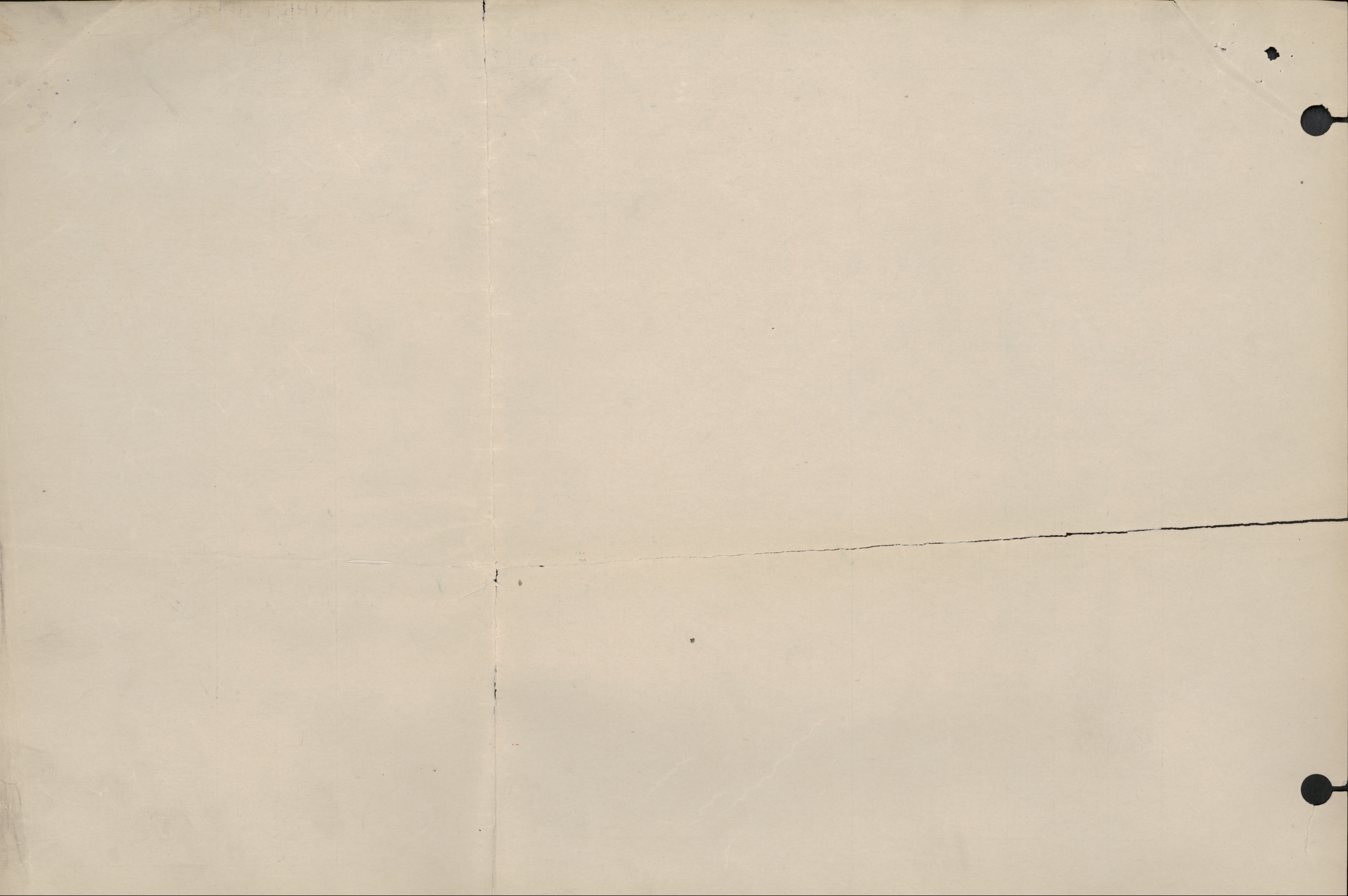
ADDRESS *Mrs Chas Taylor 1 Banally Marlborough Wiltshire Eng*

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE EFFECTIVE

DISCHARGED *bsch out patient Toronto 8/1/19* PLACE DATE REASON AUTHORITY IF ENTITLED TO POST DISCHARGE PAY

MONTH	PAY AND F.A.		OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY	REGI-MENTAL CHARGES	OTHER CHARGES	TOTAL DEBITS	BALANCE		PARTICULARS OR REMARKS
	NO. OF DAYS	RATE			AMOUNT	COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2					COL. NO. 3	DEBIT	
2/1/19		110		160 49													
				160 49				48 67	48 75	20 -				108 54			Boots & Train money
1/8/19	31	1 ¹⁰	34 10	51 95				86 05						108 54	51 95		
1/9/19	30	1 ¹⁰	33 -	86 05				119 05		18 -		15 -		119 05			Cr Bal from above
1/10/19	31	1 ¹⁰	34 10					34 10		19 10		15 -		34 10			15 Ad. Sept. 6 th advice 7 th 10/19
1/11/19	30	1 ¹⁰	33 -					33 -		18 -		15 -		33 -			15 Ad. Oct. 6 th advice 7 th 10/10
1/12/19	8	1 ¹⁰	8 80	35 -				43 80		35 -		15 -		50 -	6-20		15 Ad. Nov 1 st 10/11
			75 90	35 -				110 90		37 10		45 -		117 10	6-20		15 Ad. Dec 1 st 10/12

J. M. ... CAPT. PAYMASTER, No. 2 DISTRICT DEPOT



VENEREAL DISEASE CASE CARD

DIVISION

Ward 12

Disease

V.D.G.

Name

Gray, J.

Date of Discharge

14 MAR 1919

This space not to be written upon by M. O. i/c case.

SUMMARY

Date of Admission

31-1-19

Regiment

6th Regt

Coy.

Reg. No.

725049

Rank

Pvt

Religion

Methodist

Age

32

Service

38/12

HOSPITAL SPECIAL HOSPITAL WITH

In cases of Syphilis the particulars below must be sufficient to enable the Syphilis Case Sheet (Army Form L 1238) to be made up from this Card.

Plus - Yes

Dates and

Places of Three

last Exposures

Jan. 15/19, Home

Main points in history

P.M. before and after? Incubation in days: 5

Prostitute? +

Other social data: Richmond House

Gen. Rel. as a Particular: +

Moetal discharge: +

Character: P.P.D.


Scabies - Pediculosis: Structural Abnormalities:

Complications: (a) Local: (b) Metastatic:

Nature of any co-existing venereal disease:

Woman's name and address:

REMARKS: Note or suggestions from Officer i/c Treatment. [P.T.O.]

Date	Treatment		Progress	Complications and their Treatment
	Local	General		
22/1	hyp 200 gm of	i	P.R.D.	Smear. 21.1.19 many pus cells - g/o x x x
23/1	"	i	S.P.D. Ph.	
29/1	"	T	L.P.D.	
1/2	"	II	L.M.P.D.	
5/2	"	T	F.M.P.D.	
8/2	"	2.	L.M.P.D.	Smear. J.P. X
12/2	"	24.	M.P.D.	10-2-19
14/2	"	.	M.P.D.	
17/2	"	2.	P.D.	
20/2	"	24+2.	M.P.D.	
24/2	~~~~~	10A	50. mm.	 24.2.19
27/2	Spec used	24+2.	P.D.	num pus cells no g/o
1/3/19	Drug bed.	Trans. Sel. 2		
1/3/	"	24		
1/3/	"	2483	S.P.D.	1/2 1/2 1/2

VENEREAL DISEASE CASE-CARD.

Army Form W. 3497.

Age	Service	Hospital.	Ward.
Regiment	Coy.	Reg. No.	Rank
Date of Admission	Disposal	Date of Discharge	

SUMMARY

{

This space not to be written upon by M. O. i/c case.

In cases of Syphilis the particulars below must be sufficient to enable the Syphilis Case Sheet (Army Form I. 1238) to be made up from this Card.

1st, 2nd, 3rd attack or relapse	Dates and Places of Three last Exposures
---------------------------------	--

Main points in history

Condition on admission

[P.T.O.]

2-19
16

Taylor J

Date	Treatment		Progress	Complications and their Treatment
	Local	General		
6.3.	p.p. Aug b-d	2-7-3 10	Dry	W. 3 1/2 1. Cloudy 2. clear p.m.
7.2.	-	10	Dry	W. 3 1. > cloudy p.m.
4/3/	.	10	Dry	W. 3 1. fine 2. clear p.m.

DISCHARGED
SERVICE No. 3

Guilford

NAME
 R
 64
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 AREA
 0.10.11

CASUATORY SHEET.

College Military Hospital. Toronto Station.
No. 725049 Rank Pte Name Taylor Jno. Age 32
Unit 2012 Completed years of service Where and how long | Enltd Dec 1915 E 7/12 E 2/12 F 24/12
Date of admission Aug 18 1919 Date of discharge
Diagnosis Place of origin

CONDITION ON ADMISSION AND PROGRESS OF CASE. Complain of pain in left shoulder left elbow lumbar region, left hip and left ankle. Stiff and painful on first getting up in morning improves through the day and gets worse toward evening. If he sits down for some hours stiffness and pain is marked on getting up but wears off after walking for a time. No other complaint. Worse on wet weather.

Pupils active to light
No strabismic
Deep and superficial reflexes active
Tongue enlarged, cryptic and adherent to anterior pillar
One bad tooth
Considerable atrophy of left arm
Some grating on movement of left shoulder left arm can not be elevated actively above shoulder
No grating of left elbow or hip
No tenderness of left hip
Complain of pain in left heel and ankle
Heart no murmurs

FAMILY HISTORY. To have history of left shoulder and heel and to be seen by Miss Robertson when English papers arrive.
(Tuberculosis, mental or nervous diseases.)

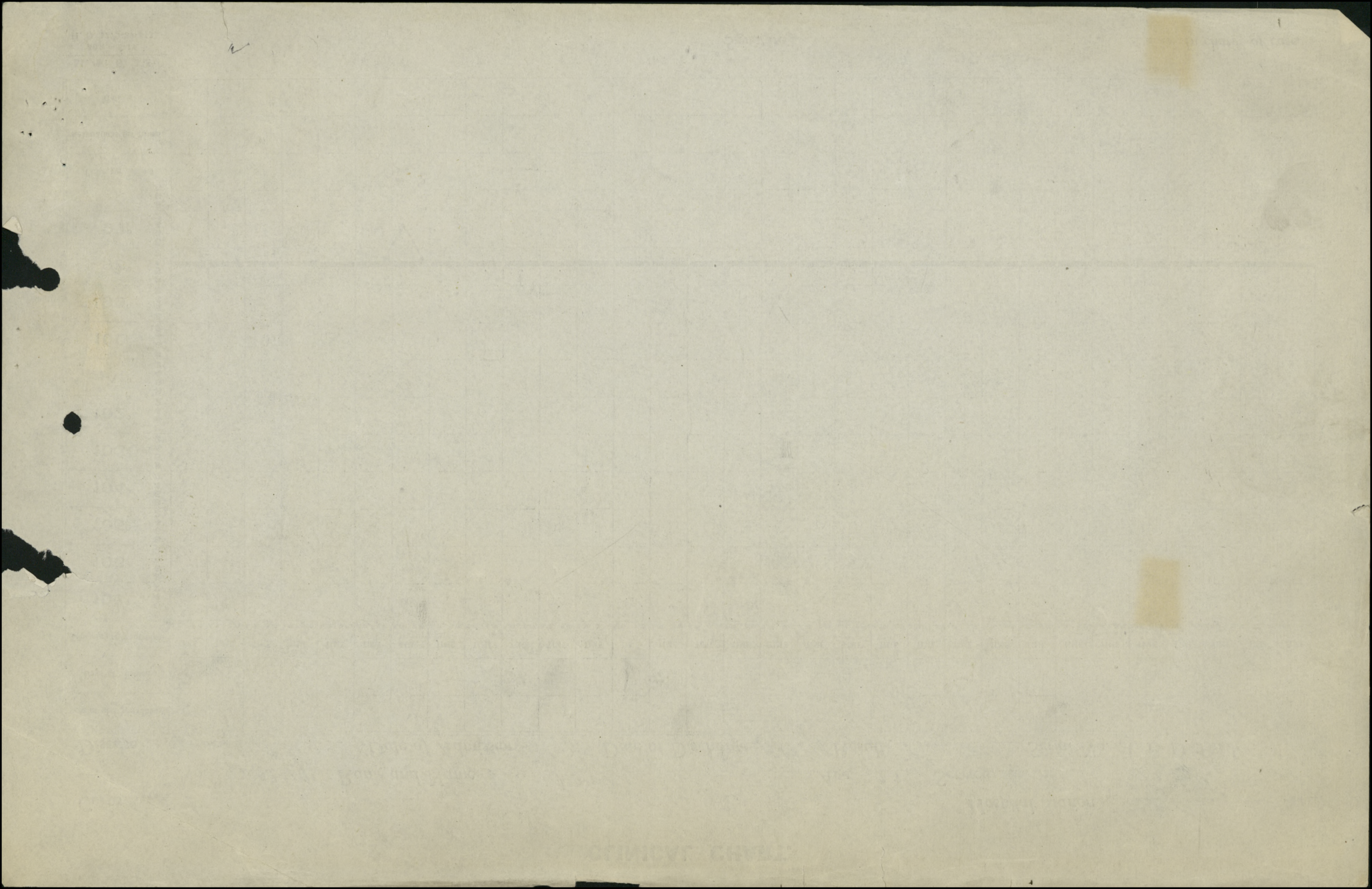
TREATMENT 29/8/19
(Especially any specific or special form) Has some degree of stiffness & upper arm, cramping of left shoulder on movement. Marked rigidity of spine with some hyperaesthesia. Tongue not swollen. Teeth good, tonsils enlarged & undoubtedly inflamed. This man

CONDITION ON DISCHARGE. For few observations of infectious origin. Should have notices removed & well-treated after this treatment. He is bound up to R.H.
(and disposal made of case.)

Date..... F. F. Fordall, Capt. R.A.M.C.
Medical Officer i/c case.



[Faint, illegible handwriting throughout the page, likely bleed-through from the reverse side.]



December 1st/19

Condition when finally boarded for discharge

April 15th/18 he had a severe attack of pain in the back and was admitted to Hospital. He has been under treatment ever since. The tenderness spread to other joints referred to - Tonsils were removed & teeth were repaired - Since then his joints have improved - He contracted Gonorrhoea Jan. 1918 - Hospital treatment - discharged as cured early in March 1918 -

1. Objective :- Tenderness on firm pressure just posterior to external malleolus. X-Ray shows no abnormality -
 Subjective :- He can walk one half mile with the aid of a stick - He experiences some pain when walking, all the time, the pain becomes worse as the exercise is prolonged.

2. Objective :- Limitation of movement left shoulder - He cannot raise the left arm straight above the shoulder. The arm falls short of assuming a perpendicular position by 30° - X-Ray shows no abnormality.

1-Rheumatism at Barbiefield, Kingston, June 1916- Duration 3 weeks- Recovery, 2-Rheumatism May 1917- two weeks- Recovery- 3- Gonorrhoea 1919- (January-) Duration 7 weeks. Recovery.

R. P. P.
 Major & Registrar
 For O. C. Dominion Orthopaedic Hospital

79050.

CASE HISTORY SHEET.

Hospital. Dom. Orth Station. Toronto
 No. 725049 Rank. Pte Name. Taylor John Age. 33
 Unit. 22nd Inf Completed years of service } F. 2 E 1 1/2 C 8 1/2
Where and how long
 Date of admission. 18.9.19 Date of discharge. 8.12.19
 Diagnosis. GSW Head of face Place of origin. Arras
myalgia

CONDITION ON ADMISSION AND PROGRESS OF CASE.

Oct 7 3/19 No change.
 Oct 30 1/19 Improving slowly JMC.
 Nov 6 1/19 He complains of pain
 in left foot and ankle, when walking
 or standing. He is
 Nov 11 1/19 Transfer to S.C.R

FAMILY HISTORY.

(Tuberculosis, mental or nervous diseases.)

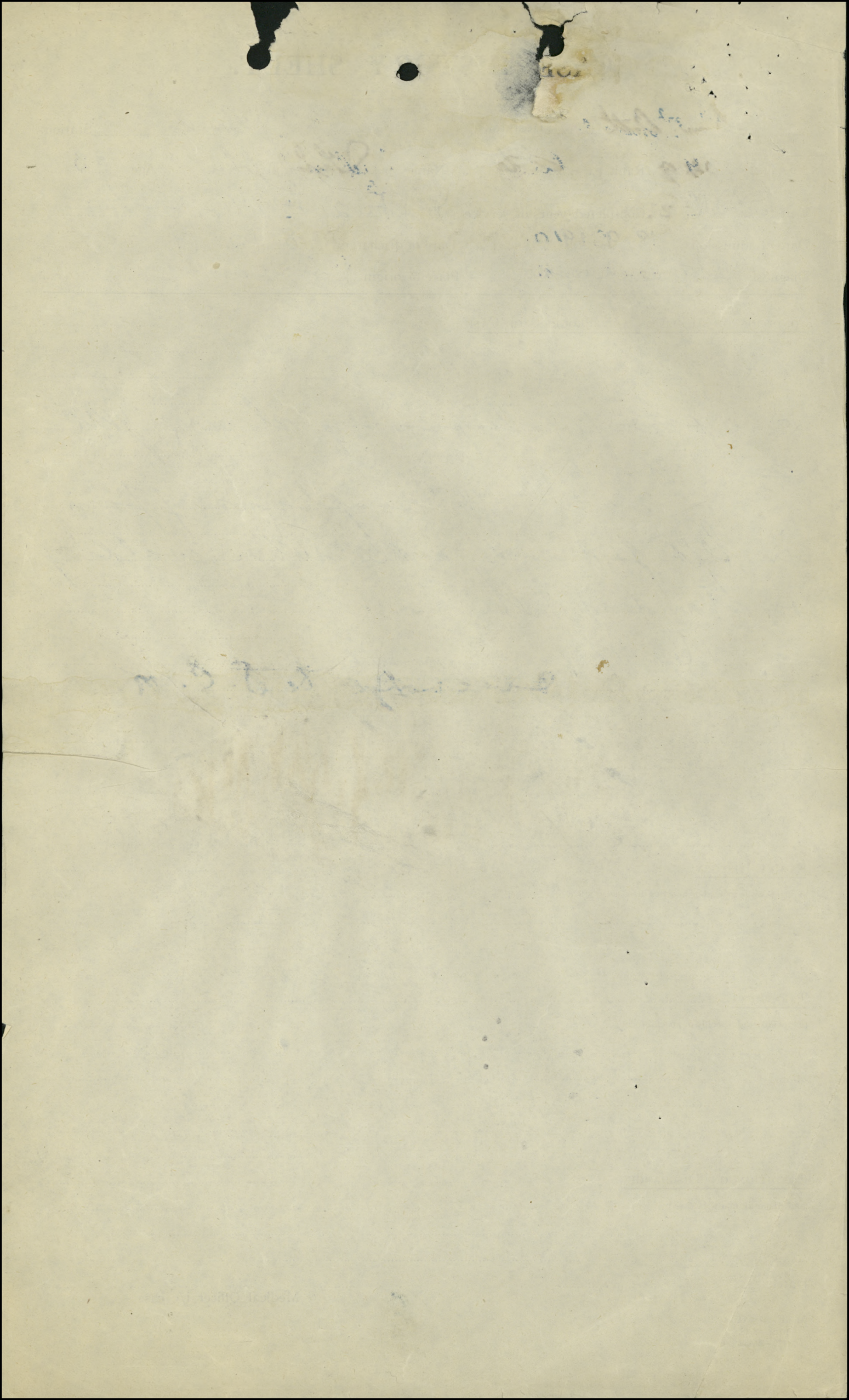
TREATMENT.

(Especially any specific or special form.)

CONDITION ON DISCHARGE.

(and disposal made of case.)

Date..... Medical Officer i/c case.



31-20

CASE HISTORY SHEET.

Don Orthopaedic Hospital. London Station.

No. 725049 Rank Pte. Name Taylor, John Age 33

Unit DD#2 Completed years of service F 2 E 1 1/2 C 8 1/2 Where and how long

Date of admission 18-9-19 Date of discharge

Diagnosis Myalgia - G.S. of Head & Face Place of origin Arras 28-8-18

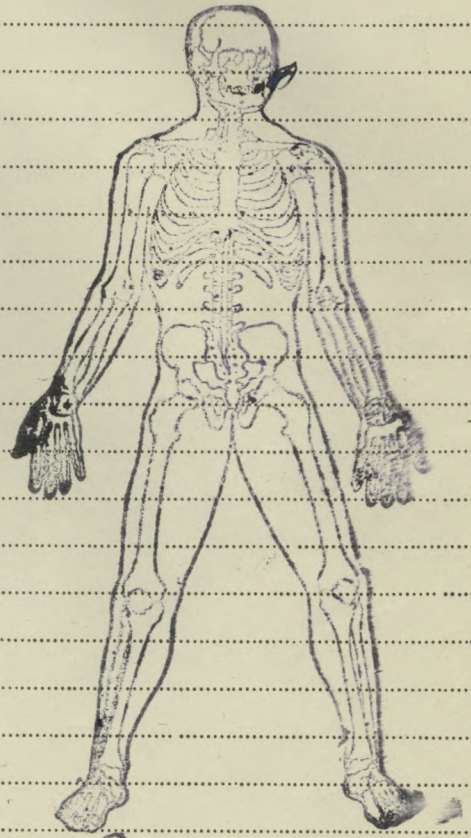
CONDITION ON ADMISSION AND PROGRESS OF CASE

Sept 8th

Healed wound left cheek.

Complains of pains in the back legs and left heel.

Duration Five months.



Sept 25/19

Back tender on

pressure over area of Kyphosis in

FAMILY HISTORY mid-dorsal region.
(Tuberculosis, mental or nervous diseases.)

Sept 30 Latex X-ray taken

TREATMENT Oct 3/19 He is improving here
(Especially any specific or special form.) tenderness in back.

Oct 8/19 tenderness has almost
disappeared.

CONDITION ON DISCHARGE, Oct 16/19 left heel is sore when
(and disposal made of case.) he walks a mile.

Date

J. Casserly Capt
Medical Officer i/c case.

21H 32

1st
2nd

3rd 4th

5th 6th

2

Melt
CASE HISTORY SHEET.

St. Andrews Military Hospital

Hospital.

Toronto

Station.

No. 725049 Rank Pte Name Taylor John Age 33

Unit 200 Completed years of service 6 7/12 6 13/12 7 24/12

Date of admission 3-9-19 Date of discharge 18-9-19

Diagnosis Tonsillitis Place of origin 3-9-19 Canada

CONDITION ON ADMISSION AND PROGRESS OF CASE

History of rheumatism and poor health -
Col Starr said to have advised tonsillectomy
and cleaning up of bad teeth.

Tonsils removed. - Both nasal diseased -
and poles very high - especially on left -
throat now healing satisfactorily

FAMILY HISTORY

(Tuberculosis, mental or nervous diseases.)

TREATMENT

(Especially any specific or special form.)

CONDITION ON DISCHARGE

(and disposal made of case.)

Pains in muscles & joints. Throat
healing well. Requires dental treatment
returned to previous ward at C. & G. H.

Date

Dr. Stoddart
Medical Officer i/c case.

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