

109th OVERSEAS BATTALION C.E.F. **SPECIAL**
ATTESTATION PAPER.

No. *724213*

CANADIAN OVER-SEAS **TRIPPLICATE** EXPEDITIONARY FORCE. Folio.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?..... *Tough*
- 1a. What are your Christian names?..... *Wilbert-Hugh*
- 1b. What is your present address?..... *Kitchfield*
2. In what Town, Township or Parish, and in what Country were you born?..... *Eldon Township, Ont. Canada*
3. What is the name of your next-of-kin?..... *William Tough*
4. What is the address of your next-of-kin?..... *Kitchfield*
- 4a. What is the relationship of your next-of-kin?..... *father*
5. What is the date of your birth?..... *24 March 1891*
6. What is your Trade or Calling?..... *Farmer*
7. Are you married?..... *no*
8. Are you willing to be vaccinated or re-vaccinated and inoculated?..... *yes*
9. Do you now belong to the Active Militia?..... *no*
10. Have you ever served in any Military Force?..... *no*
If so, state particulars of former Service.
11. Do you understand the nature and terms of your engagement?..... *yes*
12. Are you willing to be attested to serve in the }
 CANADIAN OVER-SEAS EXPEDITIONARY FORCE? } *yes*

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *Wilbert Hugh Tough*, 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: *APR 6 1916* 1916. *Wilbert-Hugh Tough* (Signature of Recruit)
Frank Webster Lieut (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Wilbert Hugh Tough*, 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: *APR 6 1916* 1916. *Wilbert-Hugh Tough* (Signature of Recruit)
Frank Webster Lieut (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 *Kitchfield* this *APR 6 1916* day of *1916*.

John W. Lindsay (Signature of Justice)

Description of Wilbert Hugh Tough on Enlistment.

Apparent Age.....25 years 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 3/4 ins.

Chest measurement { Girth when fully expanded.....38 ins.
 Range of expansion.....4 ins.

*scar on right kneecap
 scar of burn on left wrist*

Complexion.....Dark

Eyes.....Brown

Hair.....Black

Religious denominations.
 Church of England.....
 Presbyterian.....Yes
 Methodist.....
 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.....APR 6 1916 191 .

[Signature] Capt
 Medical Officer

Place.....Kirkcaldy

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



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

[Signature] (Signature of Officer)

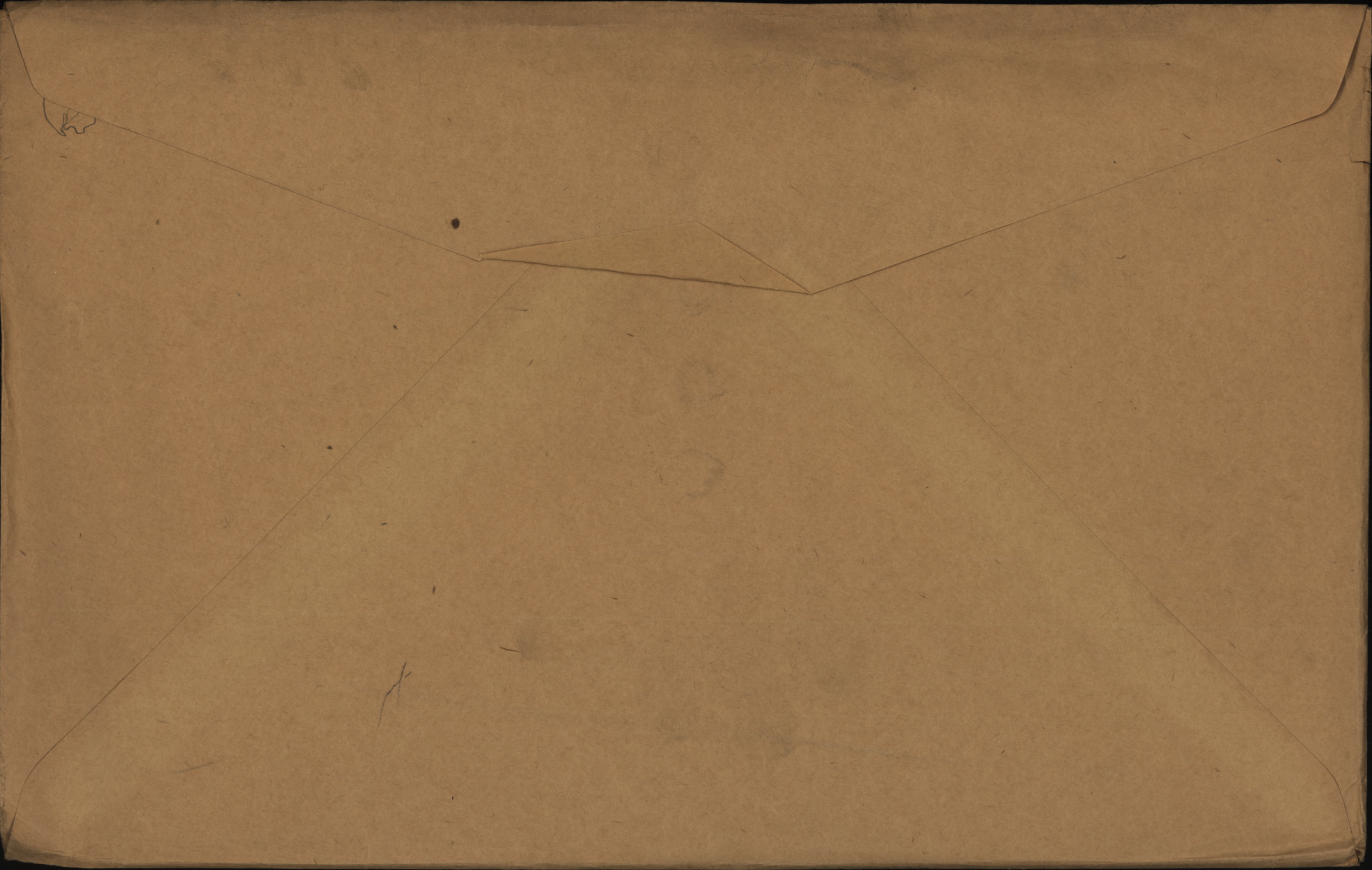
Date.....APR 6 1916 191 .

C.E.F. REGIMENTAL DOCUMENTS

NAME *TOUGH, WILBERT HUEN* REGT. No. *724213* UNIT *1st C.O.R.D.* H. Q. FILE No. *1094 Pm*

CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
ATTESTATION PAPER (M.F.W. 23, 133 or 51)					DEATH
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)	<i>(M)</i>			<i>(5)</i>	CATEGORY
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)					DESERTION
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)			<i>15235</i>		
COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
CARDS					
PAY-SHEETS					

M.F.W. 2559
 20M-4-46 (9113)
 H.Q. 1772-39-1377



SURNAME.

Tough.

CARD NO. ✓

CHRISTIAN NAMES

Wilbert Hugh.

Q. S. No
19-2-18 FOLL. 3

REGL. No.

724213.

RANK

Pte.

UNIT

201st.

Bn.

FORMER CORPS

Gil.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Tough Williams.

RELATIONSHIP TO SOLDIER

Father.

ADDRESS

Kirkfield, Ont.

COUNTRY OF BIRTH

Canada Eldon Twp Ont.

DATE

March 23 1891.

PLACE OF ATTESTATION

Kirkfield, Ont.

DATE

Apr 6th 1916.

*o/s 23-7-16 488
35*

R/c. 26-9-17.

MARRIED

SINGLE *yes.*

WIDOWER

TRADE OR CALLING

Farmer

RELIGION

Presbyterian.

DESCRIPTION.

APPARENT AGE

25.

YEARS

MONTHS

HEIGHT

6.

FEET

5 3/4

INCHES

CHEST MEASUREMENT

38.

INCHES

EXPANSION

4.

INCHES

COMPLEXION

Dark.

EYES

Brown.

HAIR

black.

DISTINGUISHING MARKS

*Scar on right kneecap.
scar of burn on left wrist.*

MEDICAL EXAMINATION.

PLACE

Kirkfield Ont.

DATE

Apr 6th 1916.

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NAME *Tough W. H.*

REG'T'L. NO. *724213*

RANK AND CORPS *Pvt 20th Br*

H. Q. FILE NO 649

FOLLOWS
No.

FOLLOWS

CABLE

NATURE OF CASUALTY

NO.

DATE

T351

24-9-17

Sailed from Liverpool for Canada per H.S. Metagama on Sept 15 1917 (Special authority)*

LIST NO.

HOSPITAL

DATE OF
ADMISSION

REMARKS

A490	No 3 Can Gun Boulogne	14-4-17	J.C.T. R. Hand
B329	Mil. Yank.	22-4-17	J.C.T. R. Hand
B389	Can't remember depression	14-7-17	J.C.T. R. Hand
B407	Discharged	1-8-17	J.C.T. R. Hand

and Ham

Number 724213 Rank 2/cpl

Surname TOUGH

Christian Name Erilbert-Hugh

Units 20^E Bn. Con. Div. Theatre of War France

Date of Service 29-11-16

Remarks

Latest Address Kirkfield
Suff.

Roll No. B Page 11630

DEEP. MAR 7 1922
REGN. NO. 24476

No. 724213. RANK Pte.

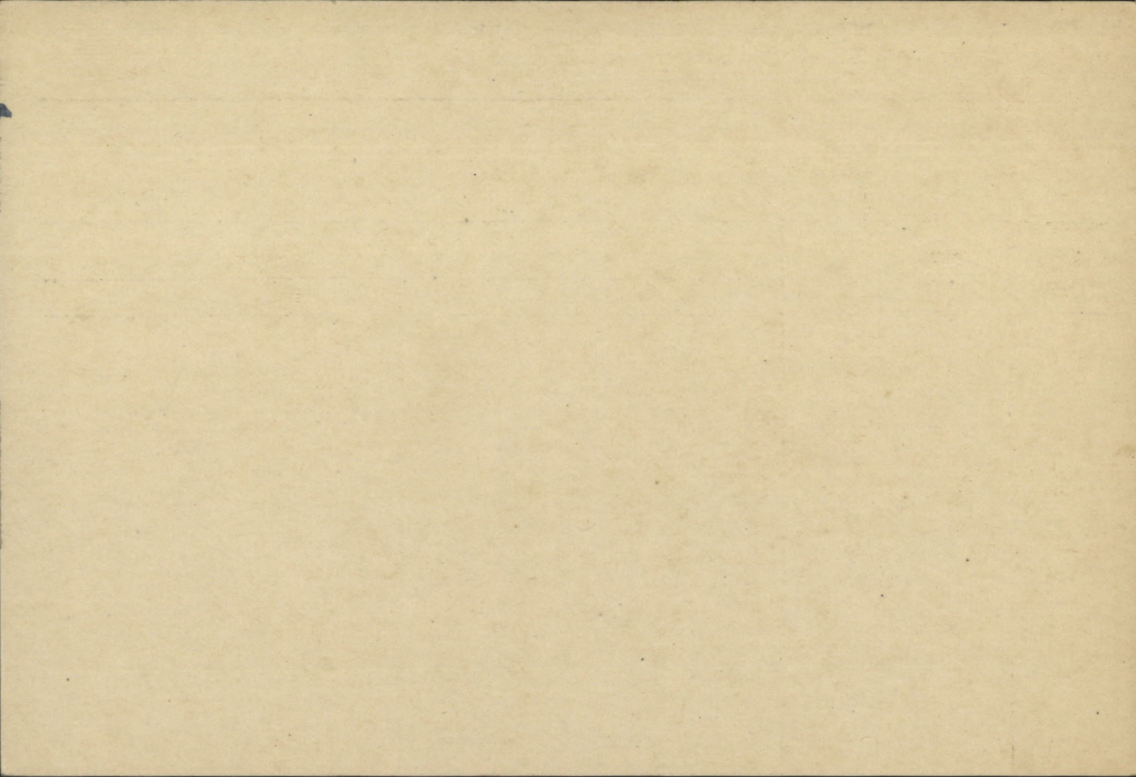
NAME Tough, W. H.

T.O.S. 6-4-16. UNIT 109th Battalion.
(S.O. 131 of 10-4-16)

M. D. 3.

			PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
PAID FROM	PAID TO	SIG. OR REC'T	PARTICULARS	AUTHORITY
1916 April 6.	1916 April 30.	L		
	May.	L		
	June.	L		
	July.	L		

UNIT SAILED
JUL 23 1916



No. 724213 RANK Pte

NAME Tough. W. H.

T. O. S.

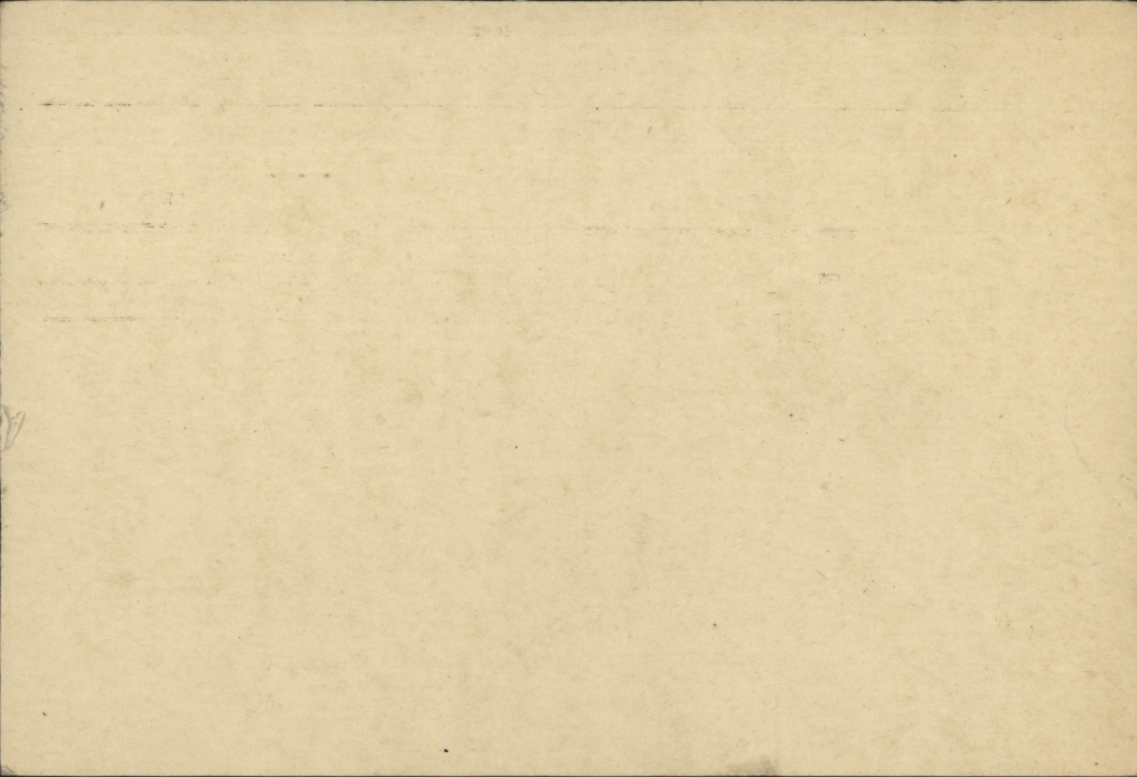
UNIT Special Service Battalion

Transfd from Casualties 1-11-17.
no 296 of 6-12-17.

#34604

M. D. 3

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1917 Nov	1917 Dec 31	✓		
1918 Jan	1918 Feb 14	✓		
Feb 1	Feb 14	✓	nos 19-2-18. Rec.	no 51 of 20-2-18.
closed by payment s.				



81

HOSPITAL.

A. & D. No. _____ Ward 4

Unit 20 Sick or Wounded.

Regtl. No. 724213 Pl. of Act'n _____

Rank Pte Name Lough W.H.

Age 26 Religion P.

Service Compl'd 13 1/2 Time with Field Force 5 1/2

Diagnosis 952 Rhana.

Admitted 10 JUL 1917 in OX York Discharged CTU 1-8-17

Transferred 1600 Sandling

RECORD FURTHER REMARKS ON BACK.

13-7-17

Complains of pains in back
headache & dyspnoea. Urine Analysis

23.7.17 Still has some pain
in back, occasional headaches
Urine Analysis & Contents of U

M G Brown
Capt

81

81

Surname *Lough* Christian Name or Names *W. Ho.* Reg. No. *724213*
 Rank *1st* Unit *20 Batt.* Co. *Ho.* Troop *724213* Batty. *724213*
 Hospital *1st*

Date of Admission *14.4.17*
 Transferred *36. Gen. Boulogne* Hosp. *22.4.17*
Metz 20th Jork.
Can. Conv. Woodcote Park. Hosp. *14.7.17*
 Hosp. *.*
 Hosp. *.*

Diagnosis

(1) *J. b. J. R. Hand slt.*
 Later Diagnosis (if changed) *av.*
 (2)
 (3)

Additional Diagnosis: if more than one state present

DISPOSITION

Date

6.4.21.4.17 A490

REMARKS

30.4.17 B. 329.
19.7.17 12389
10.8.17 B. 20.7 Dis. 1-8.17.

A.M.D. 2 Dept.

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

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

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

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

350M.—5-18

H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps. 20 Battalion C. E. F.

Regimental No. 724213 Rank Pte Name Tough Wilbert Hugh
C. E. F.

Enlisted (a) 6.4.16 Terms of Service (a) Service reckons from (a)

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

Extended Re-engaged Qualification (b)

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
<u>1.11.17</u>	<u>Quereas</u>	<u>TAKEN ON STRENGTH NO. 3 SPECIAL SERVICE CO.</u>	<u>Kingston</u>	<u>1.11.17</u>	<u>Auth 3.M.D. 88-1-18.</u> <u>Dated 15.10.17</u>
<u>19-2-18</u>	<u>#3. S.S.Co.</u>	<u>DISCHARGED & STRUCK OFF STRENGTH</u>	<u>Kingston</u>	<u>19.2.18</u>	<u>Auth 3.M.D. 88-7-129</u> <u>Dated 15-2-18.</u>

[Signature]
Lieut. & Adjutant
No. 8 Special Service Company, C.E.F.

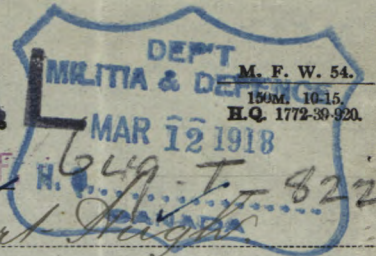
(a) In the case of a man who has re-engaged for, or enlisted into Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) e.g. Signaller, Shoing Smith, etc . etc., also special qualifications in technical Corps duties. (P.T.O.)

Casualty Form - Active Service

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				

81
 Fill in Only.—Unit, Number, Rank and Name.

SPECIAL
Casualty Form—Active Service.



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

Regimental No. 24213 Rank Private Name Tough Wilbert Wright

Enlisted (a) 6.4.16 Terms of Service (a) D of W Service reckons from (a) 6-4-16

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) Farmer

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.
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Embarked Canada Halifax 24.7.16

Disembarked England Liverpool 31.7.16

Appointed A/L C P Oxney 5-8-16 Part II Order 2/16.

~~27-11-16. Witley Transferred to 20th Bn. Overseas 27-11-16. D.O. Pt. 11. 333-28-11-16~~

28-11-16 Proceeded O/S. for service with the 20th. Bn. Witley 28-11-16.

109th Permits to ranks to meet establishment Witley 2/11/16
ADJUTANT
CAPTAIN,
109th BATTALION CAN. INFANTRY.
W. A. SELLING Capt.
ADJUTANT
109th Overseas Battalion, C. E. F.

29/11/16 CB Depot Arrived taken on strength 20 Bn Havre 29/11/16 NR Pt. 2.0.75 11/12/16
 do do Left for Unit Field 1/12/16 NR
 8/12/16 20 Bn Joined Unit do 4/12/16 B213

CERTIFIED CORRECT.
 28/10/16
 17 DEC 1916
 CAN. RECORDS, LONDON

1232

(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.]

7/8/17
12/3/17
2/20

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				
14-4-17 20-4-17	3 Collyer Lt. T. P. hand do	adm 3 Collyer Inv (Sick) & posted to 1st Regl Dep. Shorncliffe per HS	3 Collyer entl Ont St Denis	14-4-17 20-4-17	W. 3034 W3083(9202) Pt 2 34D/4-5-17.
			<i>Whogau</i>		Capt. for Lt.-Col., A. A. G. Canadian Section, G. H. Q. 3rd Echelon, B. E. F.
2-5-17	160RS	To Transport for 20th	W Sandj	22-4-17	PT I O 54 LMG
4-9-17	150RS	At H. W. B. Buxton	W Sandling	4-9-17	PT I D O 179
					<i>Mattar</i> Lieut. & Assist. Adjt. for O. C. 1st C. O. R. D.
- 5 SEP 1917		TAKEN ON STRENGTH C.D.D, BUXTON	Pt. 11	ORDER No. 210.	<i>F. W. White</i> Lt. Col. Canadian Discharge Depot.
15 SEP 1917		EMBARKED FOR CANADA FROM LIVERPOOL			<i>F. W. White</i> Lt. Col. Canadian Discharge Depot.
1-12-17	<i>Quereas</i>	TAKEN ON STRENGTH NO. 3 SPECIAL SERVICE CO.			<i>F. W. White</i> Lt. Col. Canadian Discharge Depot.
13-2-18		DISCHARGED & STRUCK OFF STRENGTH	Fort Henry	15-2-18	auth. 3 M. D. 88-1-18. Dated 17. 11. 17. <i>F. W. White</i> Lieut. & Adjutant No. 8 Special Service Company, C.E.F. auth. 3 M. D. 88-C-299 Dated 8. 2. 18

ORIGINAL
724213

ORIGINAL

MEDICAL HISTORY SHEET.

Surname Tough Christian Name Wilburh Hugh

Examined { on 6 day of April 1916.
at Kirkfield
Birthplace { City or Town Eldon Twp.
County Victoria Ontario

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

Apparent age 25 years
Trade or occupation Farmer
Height 5 Feet 5 3/4 Inches.
Weight 136 Lbs.
Chest measurement { Minimum 34 inches.
Maximum expansion 38 inches.

Date.	Fit or Unfit.	EXAMINED FOR RE-ENGAGEMENT.
		<u>27 APR 1917</u> M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

SPECIAL

Physical development Good
Small-Pox Marks None
Vaccination Marks { Arm Right None Left One
Number One

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

When Vaccinated last April 7th 1916
(a) Marks indicating congenital peculiarities or previous disease None
(b) Slight defects but not sufficient to cause rejection None

Date.	Result.	ANTI-TYPHOID INOCULATIONS, ETC.
<u>4/5/16</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.

Enlisted on 6 day of April 1916 at Kirkfield

	CORPS.	REG'L NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>109th Bn. C.E.F.</u>	<u>724213</u>		<u>6.4.16</u>
Transferred to	<u>20th. Bn</u>			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>Epsom</u>	<u>24.7.17</u>	<u>Nephritis</u>	<u>Ciii H. L. Pavey Maj</u>
<u>Kensington, Ont</u>	<u>22/1/18</u>	<u>Convalescing from Nephritis</u>	<u>Ciii for 3 months H. J. Fisher. Capt</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.

B. P. C. FOLIO
FALSE DOCKET

CANADIAN

81

Surname

Jough

Christian Name

William Wright

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 Ho-pital.			Discharge from Hospital						
		Day	Month	Year	Day	Month	Year				
The Military Hospital, York		20	4	17	13	7	17	J.C.T. Left hand.	85	admitted with J.C.T. hand and albuminuria. Hand now all right and no trace of albumen in urine now. Transferred to Canadian camp.	Pomphret F. R. M. C.
McEpson		13	7	17	30	JUL	1917	Neuritis	18	Complains of general weakness. Headaches spain in back urine clear Hes bed at white line	W. P. M. M. Y. all

DUPLICATE

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

INSTRUCTIONS.

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

(1) Name of Overseas Unit which Soldier joins.....

109th OVERSEAS BATTALION, C. E. F.

(2) Regimental Number **724213**.....

(3) Full Name of Soldier **Wilbert H. Tough**.....

(4) Place of Birth **Kirkfield, Ontario, Canada**.....

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

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

(b) Present Postal Address **Nil**.....

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

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

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

Also their names and ages **Nil**.....

(9) Is your Father alive? **Yes**.....

If so, state name and address **William Tough, Kirkfield, Ontario, Canada**

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

If so, state name and address **Catherine Tough, Kirkfield, Ontario, Canada**

(11) If your Mother is a widow **No**.....

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

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

Nil

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

Nil

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

Nil

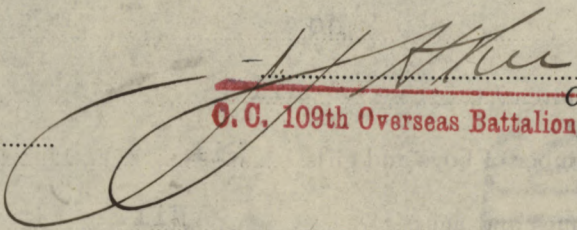
(15) Are you insured? **No**.....

If so, in what Company? **Nil**.....

Have you made arrangements for payment of your Insurance premium? **Nil**.....

If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.

Date **12th July 1916**.....


J. H. Allen
Officer Commanding.
C. C. 109th Overseas Battalion, C. E. F.

Medical Examination upon leaving the Service of an Officer fit for general service or a Soldier fit for duty.

Officers leaving the Service upon being found unfit for general service by a Medical Board, and Soldiers leaving the Service upon being found otherwise than fit for duty by a Medical Board, are not to be reported on this Form.

Rank pte Name Dwelbert Surname Tough
Unit of Corps SS Coy No 3 (If a soldier) Regtl. No. _____
Born at Kirkfield on, (date) March 25th 1891
Signature (for identification) W. H. Tough

The examination is to be made jointly by two Medical Officers.

1. PHYSIQUE—Any deformity, maiming or lameness? If so, describe.

Weight 140 lbs. Colour of eyes Brown
Height 5 ft. 7 in. Identification Marks Scar on tip of middle finger of right hand

2. NUTRITION AND DIATHESIS?
Good

After searching enquiry and thorough examination is any evidence found of disease or impairment of the parts indicated below? If so, describe.

3. NERVOUS SYSTEM? Is there a history of previous disability?
No

4. RESPIRATORY SYSTEM? Is there a history of lung trouble?
No

5. HEART?
Abnormal Sounds? No
Abnormal Size? No
Pulse Rate? 80 Intermittence or Irregularity? No Muscular Tone? Good

6. ARTERIES.—(a) Any hardening or nodulation? No
(b) Blood Pressure.

7. DIGESTIVE SYSTEM? (Condition of teeth and tonsils to be included).
Says that appetite is good.

8. GENITO-URINARY SYSTEM?
Urinalysis—S.G.? 1025 Reaction? acid Albumen? nil Sugar? nil

9. SKIN, MIDDLE EAR, EYE or any other part?
Normal

10. Is there any evidence of impairment of health or physical condition not mentioned above? If so, describe.
Complains of backache, headaches + swelling beneath eyelids + of orbits at times.

11. Opinion as to the health and physical condition of the one examined?
Generally good. At present complaining from rheumatism.

Examined at Kingsley, Ont Signed W. A. Jones, Capt M. O.
Date July 22nd /18 Signed W. H. Tough, Capt M. O.

If any disease or impairment of health or physical condition is discovered or complained of by the soldier examined, this report should be sent at once to the O. C. concerned for the Officer or Soldier to be sent before a Medical Board for regular boarding

RECEIVED
FALSE DOCKET
4

Medical Examination upon leaving the Service
of an Officer in General Service or a Soldier in Duty

Object of this examination is to determine the physical condition of the applicant and to report thereon to the Medical Board and the War Department. The service upon which the applicant is being examined shall be stated in the report.

Name: *John A. Smith*
Rank: *Private*
Company: *1st Regt. Cavalry*
Regiment: *1st Cavalry*
Branch: *Cavalry*
Service: *1st Cavalry*

1. PHYSICAL AND GENERAL CONDITION: (General appearance, height, weight, color of eyes, color of hair, color of skin, etc.)
The examination is to be made solely by the Medical Officer.

2. NUTRITION AND DIETARY: (How nourishing, energy and general condition, etc.)

3. NERVOUS SYSTEM: (Is there a history of nervous debility?)

4. RESPIRATORY SYSTEM: (Is there any evidence of tuberculosis?)

5. HEART: (Abnormal sounds, abnormal size, position, etc.)

6. BLOOD: (Color, consistency, etc.)

7. DIGESTIVE SYSTEM: (Is there any evidence of indigestion?)

8. UROGENITAL SYSTEM: (Is there any evidence of disease?)

9. SKIN: (Is there any evidence of disease?)

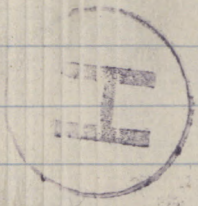
10. TOOTH AND GUMS: (Is there any evidence of disease?)

11. SPECIAL TESTS: (If any are required, specify here.)

12. OTHER: (If any other conditions are noted, specify here.)

81

J.M. Rank *Private* Name **TOUGH, Wilbert HUGH** Reg'l No. **724213**
 Unit ~~XXXX~~ **109th Bn.** If in perm. Corps, }
 What Unit? } Married or Single **Single.**
 Place and Date of Enlistment **Kirkfield, 6th Apr 1916.** Place of Birth **Eldon Township, Ont, Canada.**
 Name and Address, Next-of-Kin **William Tough.**
P.O., Kirkfield, Ont, Canada. Relationship **Father.**



Assigned Pay Monthly \$ Payable to Relationship
 Separation Allowance \$ Payable to Relationship
 Discharge, Date and Place Reason Character **Went cas**

N/E. R.B. No *8245*
 File R.L. *Genl*
 Category *Genl*

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	Oxney	App'd Prov. L. Col	Oxney	5-8-16	PT. II S.O. 28 + D.O. 285
21.11.16	O.C. 109 th	Revert to Rank to meet	Witley	2.11.16	A.F.B. 103 CHECKED
28.11.16	"	Establishment S.O.S. on Trans to 20 th Bn	"	28.11.16	11 DEC. 1916 <i>ADJ.</i>
11.12.16	20 th Bn	Taken on strength.	Field	29.11.16	75
21-4-17	"	Adm. #3 can. Gen. Hpl.	Boulogne	14.4.17	C.L. A490 I.C.T.R. Hand
30-4-17	"	To Mtl. Hpl.	Yark.	22.4.17	" B379 "
4-5-17	"	Invt Sick & posted to Board	Field	20-4-17	Px. D.O. 34 11st BORD D.O. 54-2517
19-7-17	"	To can. C. Hpl. Woodcote	Epsom	14-7-17	C.L. B389
10-8-17	"	Such " "	"	1-8-17	" B407 I.C.T.R. Hand.

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
Date.	From whom received.				
4-9-17	160 R.A.	On board to 1st B.N. D.S.M. Pt. N. Landj.		4-9-17	PT 10 179.
16-9-17	"	Ceases to be on Com. 16 N.S. 1505. to Canada K.R. 10 Para. 392-25	"	15-9-17	1-193
	Dis Dep	Found fit for Duty	MD 3 Kingston	26 ⁹ / ₁₇	NR 368.

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

27045/541
18139-W-15

Handwritten initials

Name Tough, Wilbert H.
Surname

Christian Name

Regimental Number 724213

Rank *4te.*

Address (in full) Kirkfield, Ont.

Unit # 3 S.S.Co

Original Unit

District where paid M.D.3.

Date of Discharge 19-2-18.

P. D. P. Filing Number 9-76-3.

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

L. L. 22573—M. & D. 8009.

Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Over- payments to be Recovered	Total Amount Paid
	Cheque No. A	Date	Amount 30 days	Cheque No. B	Date	Amount 30 days	Cheque No. C	Date	Amount 31 days		
100 10	1502	6-3-18	33 00	1474	6-4-18	34 10				33 00	67 10
<i>2556</i>	<i>1st 9404702</i>	<i>3.4.19</i>	<i>70</i>								
<i>21942</i>	<i>2nd 9403660</i>	<i>2.4.19</i>	<i>70 00</i>								
				<i>Over</i>							

Remarks: Advance on a/c P.D.P.

M. F. W. 127.
50M-617.
1772 39-1140.

Dec'n No 27145/54 W. S. G. File No 8139-W-2

Award days at \$ 70.00 per day \$

S. A. months at \$ per mo. \$ 280.00

Less P. D. P. Credited 100.10

Less further debit balance \$.....

Net due paid as below 179.90

TO SOLDIER TO DEPENDENT						
0	Ag. No	Ch. No	Amount	Ag. No	Ch. No	Amount
1	2556	404702	70 00			
2	2194	903660	70 00			
3	16703	428876	39 90			
4						
5						
6						
	Total			Total		

Kirkfield

Ant.

3/4/19
2/4/19
19.4.19

GEN'L AUDITOR
Posting checked by
W. Black
Date 20.10.19

Sub

The Name *Tough W.H.*

M. F. W. 41
1 0M-7-16 L. P. O. No.
1772-39 889
1908

Regimental No. *724.213*

Name and address of next-of-kin *Home Kirkfield. Ont.*

Unit *109 Bn*

M. B. 12.10.17. Duty.

Date of enlistment *6.4.16*

Place of *Kirkfield.*

Married (yes or no) *No.*

Date and place discharged

Amount of pay assigned monthly \$ *No.*

Reason for discharge

To whom payable

Character on discharge

Metajama 26.9.17.

capt C II N.S.

Job 5351-M. & D. 6880.

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					
	<i>6.9.17</i>							<i>30834</i>								<i>Ed Plc.</i>
<i>7.9.17</i>	<i>31.10.17</i>		<i>55.100</i>	<i>55.00</i>	<i>55</i>	<i>.10</i>	<i>5.50</i>		<i>36884</i>					<i>100.00</i>		<i>P.D. Que.</i>
														<i>4.87</i>		<i>8/9/17 adv AK 10562.</i>
														<i>9.73</i>		<i>20/9/17 Boat.</i>
														<i>114.60</i>		<i>L.P. bond 26-11-17.</i>
										<i>Ex Balance</i>				<i>254.24</i>		<i>show up adv to 31.10.17</i>
									<i>36884</i>					<i>36884</i>		<i>offd to M.D. 3.</i>

ORK
56.11.17

Ed Plc

P. 559.
MARRIED OR SINGLE

PLACE OF BIRTH

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY \$

EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

Single
Eldon Twp Ont.
Wm Tough
Kirkfield Ont Can
Father

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY
Prom Lancepl	2/8/16	D0218
Reverts to Pte	16-10-16	20306
Reverts to Pte	2-11-16	D0330

ADMISSIONS TO HOSPITAL, &c.

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

REG'L. No. *724213* RANK *Pte* NAME *Tough Wilbert Hugh*

IF IN PERM. CORPS
WHAT UNIT

UNIT

NAME

109th Bn TRANSFERRED TO *20th Bn* DATE *1-1-17* AUTHORITY *D0333*

PERMANENT FORCE ALLOWANCES

TRANSFERRED TO

DATE

AUTHORITY

PLACE OF ATTESTATION

Kirkfield Ont

TRANSFERRED TO

DATE

AUTHORITY

DATE OF ATTESTATION

Apr 6th 1916

TRANSFERRED TO

DATE

AUTHORITY

ASSIGNED PAY MONTHLY \$

DATE EFFECTIVE

PAYABLE TO

ASSIGNED PAY MONTHLY \$

DATE EFFECTIVE

PAYABLE TO

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

EFFECTIVE

REASON

DISCHARGE DATE AND PLACE

Canada 6/9/17

REASON AND AUTHORITY

B.CO. 2578/17

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)



RELATIONSHIP *Entered on N.E. Card Index*

Checked by *T. J. Sullivan*

RELATIONSHIP

P. 697.

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS.

Date of Payment.	No of Acq. Roll	AMOUNT					Place of Payment.	Name of Paymaster.	Remarks.
		francs	£	S.	¢	¢			
<i>16.7.17</i>	<i>2094</i>			<i>9 73</i>			<i>Epsom</i>	<i>R. Kane</i>	
<i>10.7.17</i>	<i>2390</i>		<i>10</i>	<i>48 67</i>					
<i>17.8.17</i>	<i>176</i>		<i>2</i>	<i>9 73</i>			<i>W. Sand.</i>	<i>W. Lorimer</i>	
<i>24.8.17</i>	<i>204</i>		<i>2</i>	<i>9 73</i>					
				<i>7786</i>					

ACQUITTANCE ROLLS

1		2		3		4	
No	DATE	No	DATE	No	DATE	No	DATE

CASH PAYMENTS

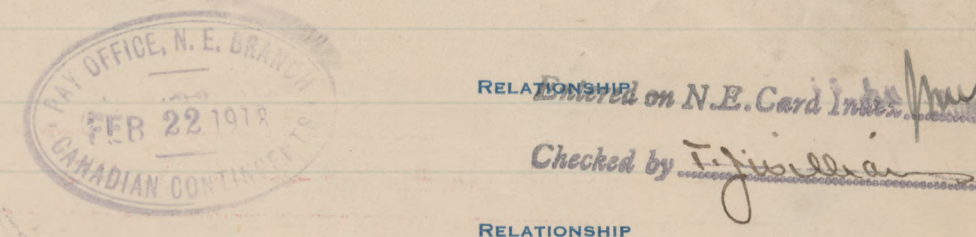
1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
							CREDIT	DEBIT			
						<i>18101</i>					
				<i>973</i>		<i>973</i>	<i>4382</i>				<i>D0218 Prom Lancepl</i>
				<i>730</i>	<i>730</i>	<i>1460</i>	<i>6372</i>				<i>326 Reverts to Pte 16-10-16</i>
				<i>973</i>	<i>730</i>	<i>1703</i>	<i>8234</i>				
				<i>973</i>		<i>973</i>	<i>10566</i>		<i>63</i>		<i>Trf to 30th Bn</i>
				<i>973</i>		<i>973</i>	<i>13003</i>				<i>Eff 1-1-17 D0333, 381</i>
				<i>174</i>		<i>174</i>					<i>Err of 10^{cs} in Blee corrected on June 19, 17 paylist</i>
				<i>523</i>	<i>523</i>	<i>1220</i>	<i>14193</i>				
				<i>262</i>		<i>262</i>	<i>17011</i>				
				<i>785</i>		<i>785</i>	<i>19636</i>		<i>122</i>		
						<i>229</i>	<i>36</i>		<i>137</i>		
						<i>7</i>	<i>26</i>				<i>10^{cs} adjustment of Blee to adjust exp of 10^{cs} in Jan 1917 balance from 5-1-60.R.D. effed 21.6.17</i>
						<i>295</i>	<i>46</i>				
				<i>53</i>	<i>30</i>	<i>83</i>	<i>49</i>				

P. 559. MARRIED OR SINGLE *Single*
PLACE OF BIRTH *Eldon Ont*
NAME AND ADDRESS OF NEXT OF KIN *Wm Tough
Kirkfield Ont Can*
RELATIONSHIP OF NEXT OF KIN *Father*
NAME AND ADDRESS OF NEXT OF KIN
RELATIONSHIP OF NEXT OF KIN
SEPARATION ALLOWANCE MONTHLY \$ EFFECTIVE (DATE)
PAYABLE TO
RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.		
PARTICULARS	EFFECTIVE DATE	AUTHORITY
<i>Prom Lancepl</i>	<i>5/1/16</i>	<i>20218</i>
<i>Reverts to Pte</i>	<i>2-11-16</i>	<i>20330</i>

ADMISSIONS TO HOSPITAL, &c.				
DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL	

REG'L. No. *724213* RANK *Pte* NAME *Tough Wilbert Hugh*
IF IN PERM. CORPS WHAT UNIT UNIT *109th Bn* TRANSFERRED TO *20th Bn* DATE *1-1-17* AUTHORITY *50333 28-11-16*
PERMANENT FORCE ALLOWANCES TRANSFERRED TO *P.C.O.R.D.* DATE *21.6.17* AUTHORITY *PL 13 229*
PLACE OF ATTESTATION *Kirkfield Ont* TRANSFERRED TO *Paych Disloan* DATE *7.9.17* AUTHORITY *860 2178*
DATE OF ATTESTATION *Apr 6th 1916* TRANSFERRED TO *non eff* DATE *7.9.17* AUTHORITY
ASSIGNED PAY MONTHLY \$ DATE EFFECTIVE
PAYABLE TO
ASSIGNED PAY MONTHLY \$ DATE EFFECTIVE
PAYABLE TO
STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) EFFECTIVE REASON
DISCHARGE DATE AND PLACE *Canada 6/9/17* REASON AND AUTHORITY *P.C.O. 257 9/17*
ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE) *for disposal*
ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE) *61.*



QUARTER MASTER
APPROVED
CORRECT
PLEASE DELIVER THE ABOVE RATIONS ON DAY, THE DAY OF
* These issues are only Equivalents in lieu of Oats if demanded by Units.
RATIONS REQUIRED
NUMBER OF RATIONS ON HAND
RATIONS AUTHORIZED AS ABOVE
LIGHT DRAFT, RIDING HORSES AND MULES
RATIONS REQUIRED
NUMBER OF RATIONS ON HAND
RATIONS AUTHORIZED AS ABOVE
HEAVY DRAFT HORSES
RATIONS REQUIRED

DATE	PAY				FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS								CASH PAYMENTS				BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS									
	NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT					1		2		3		4		1	2	3	4	ASSIGNED PAY	OTHER CHARGES				TOTAL DEBITS	CREDIT	DEBIT						
			\$	C.			\$	C.			\$	C.				\$	C.	No.	DATE	No.	DATE	No.	DATE													No.	DATE				
1916																																									

Balance from Canada

*50218 Prom Lancepl
326 Reverts to
Pte 16-10-16*
*Plt to 20th Bn
Eff 1-1-17 20333, 3816*
*Err of 10⁰⁰ in Balce corrected on
June 1917 Paylist*
*10⁰⁰ adjustment office to adjust
error of 10⁰⁰ in Jan 1917 balance
from 67th C.O.R.D. effed 21.6.17*

724213

The Tough W. H.

DATE	PAY		FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS								CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS		
	NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE				AMOUNT		1		2		3		4		1	2				3	4				CREDIT	DEBIT
			\$	C.			\$	C.						\$	C.	NO.	DATE	NO.	DATE	NO.	DATE	NO.	DATE												
Food			360	86								18	10	378	95							53	19	30	30			83	49	295	46				
21-30	10		11											11																					
July			34	10										34	10																				
Aug 31			34	10										34	10																				
Sept 6			6	60										6	60																				
			46	65								18	10	464	75																				
												4	94	4	94																				

Have to pay 1/2 of the bank
Bco 2578.
Int Def Pay 6/31/17

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFER. PAY	SER. ALLOC. PAY
1917	1/1			1/1					381 20		
	AR. 10562			Quinton	4 87				381 33		
	2094			Expense 16 37	9 73						
	176			ICORA 21 217	9 93				313 20		
					68 13						
1918	1/1			1/1					303 47		
					9 93						
					9 73						

Balance transferred to N. E. Branch. Nil

3M. FORM REND. EFFEC. DATE 6.9.17
 DISCHARGED TO: Can DATE 6.9.17
 PAYBOOK VERIFIED 7.9.17
 BAL 308.34 L.P.C. REND 7.9.17
 AUTH. BCO 257.9.17

for answer

Checked Graham L.P.C.

less 4.87 interest
303.47

Form D.M.S. 1394
7004.-100M.-5/2/17.

SPECIAL

PROCEEDINGS OF A MEDICAL BOARD.

Dated at Epsom, Surrey, 23rd July 1917.

No. 724813 Rank Pte Name Tough, W.H.

Local Unit Overseas Unit 20th Battalion Age 26

Examination held at Epsom, Surrey

DISABILITY. NEPHRITIS.
Overseas Local
(scratch one out)

PRESENT CONDITION.

Pains in the back.
Urine now free from ~~albumen~~ Alb.



BOARD RECOMMENDS:—

- 1. Fit for Duty.....
- 2. Fit for duty after.....weeks' physical training.
- 3. Fit for Temporary Base Dutyweeks.
- 4. Fit for Permanent Base Duty..... C 111 for three months.
- 5. Discharge

Signatures:—

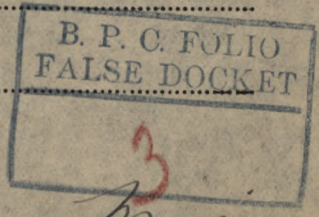
Members { H.L. Pavey, Maj.President.

 { C.K. Dowson, Capt.

APPROVED

Dated Epsom 24.7 1917.

H.L. Pavey, Maj.
For A.D.M.S.



SPECIAL

PROCEEDINGS OF A MEDICAL BOARD

Dated at 1917
No. Rank Name
Local Unit Overseas Unit Age

DISABILITY
Overseas-Local

REPORTS

PRESENT CONDITION

Urine now free from ketones. A.D.
Prisms in the back.

BOARD RECOMMENDS:-

- 1. Fit for Duty
- 2. Fit for duty after weeks' physical training
- 3. Fit for Temporary Base Duty weeks
- 4. Fit for Permanent Base Duty 0 III for three months
- 5. Discharge

Signatures:-

H.A. Fevry, Maj. President

O.K. Dowson, Capt. Members

APPROVED

Dated 1917
For A.D.M.S.

20-1-32 81

This space to be for numbers

Proceedings on Discharge.

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

No. *724213*

Rank *Private*

Surname *Lough*

Christian Name *Wilbert*

NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.

Corps (Squadron, Battery or Company) *# 3. Special Service Coy.*

Date of Discharge *February 19th 1918.*

Place of Discharge *D. O. H. Henry.*

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age <i>27</i> years <i>11</i> months.	Descriptive Marks <i>Scar on index finger right hand.</i>
Height <i>5</i> feet <i>7</i> inches.	
Complexion <i>Fair</i>	
Eyes <i>Brown</i>	
Hair <i>Brown</i>	
Trade <i>Farmer</i>	
Intended place of residence (To be given as fully as practicable.)	

2. The above-named man is discharged in consequence of *Services no longer required auth. 3rd Div. 88. J. 129. dated February 15th 1918.*

N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.

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

Very Good

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

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

Farmer

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

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

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

6. Medals and Decorations.....

Such as may be authorized for service in France, England & Canada.

To be copied by the Commanding Officer on to the parchment Discharge Certificate.

7. His account is correctly balanced, and signed by the Officer Commanding his Company. (Squadron or Battery), and I have impartially enquired into all matters brought before me in accordance with Regulations.

(Place) *Fort. Henry.*

A. B. Purvis MAJOR
O. C. No. 3 Special Service, C. E. F.
Commanding

(Date) *February 9th-18*

8. Certificate to be signed by the Soldier on Discharge

I hereby acknowledge that I received all my Pay, Allowances and Clothing, and all just demands, up to the present date, subject to the reservations of the claims noted on the third page.

(Place) *Fort. Henry, 10th Trench* (Signature of Soldier.)

(Date) *February 9th-18* (Signature of Witness.)

When a soldier is absent through illness or any other cause and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned, should be attached here.

9. Additional Certificate in the case of a Soldier who takes his discharge on his own request.

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

10th Trench (Signature of Soldier.)

10. Statement of Service.

Service toward Engagement to..... (the date to which the Record of Service is completed).....years.....days.

Total.....years.....days.

11. Confirmation of Discharge.

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

(Place) *Fort. Henry.*

A. B. Purvis MAJOR
O. C. No. 3 Special Service, C. E. F.

(Date) *February 9th-18* (Signature) *10th Trench*

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. Lough
W. J. Moore

Attestation Paper Military Form B. 272	Reg. Conduct Sheet Military Form B. 265
Proceedings on Discharge B. 272	Conduct Sheet B. 265 Squadron Battery Company
In the case of recruits who are rejected on final approval, the discharge documents will consist of: (a) Proceedings on Discharge. (b) Attestation. (c) Medical History Sheet (in the event of such having been prepared).	Copies of Convictions, by C. F. in MS. Med Hist Sheet Military Form B. 213 Medical Report for Invalids* B. 237 Statement of Man's Account on Transfer and Last Pay Certificate D. 277 *Only if discharged "Medically unfit."

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

Reservations referred to at Paragraph 8, are not to be signed by the soldier. When there are none, it is to be so stated, and signed by the soldier.

List of Discharge Documents.

<p>Reg. Conduct Sheet, Militia form B. 263.</p> <p>Squadron } Battery } Conduct Sheet, " B. 263a. Company }</p> <p>Copies of Convictions, by C. P. in MS.</p> <p>Med. Hist. Sheet, Militia Form B. 313</p> <p>Medical Report for Invalid* " B. 227.</p> <p>Statement of Man's Account on Transfer and Last Pay Certificate, " D. 877.</p> <p>*Only if discharged "Medically unfit."</p>	<p>Attestation Paper, Militia Form B. 235.</p> <p>Proceedings on Discharge " B. 218.</p> <p style="text-align: center;">In the case of recruits who are rejected on final approval, the discharge documents will consist of</p> <p style="margin-left: 40px;">(a) Proceedings on Discharge.</p> <p style="margin-left: 40px;">(b) Attestation.</p> <p style="margin-left: 40px;">(c) Medical History Sheet (in the event of such having been prepared.)</p>
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N. B.—In the case of a man discharged by purchase, the date and number of Deposit Receipt with amount of same is to be noted hereon.

10. Statement of Service.

11. Confirmation of Discharge.

88.T.109

LN/

B.P.C. 21964
81

B.P.C. ORIGINAL

(Medical Officers will please read this Form carefully before using it. See instructions, page 4.)

FORM TO BE USED FOR WARRANT OFFICERS, N.C.O'S AND MEN

MEDICAL HISTORY OF AN INVALID

STATION Fort Henry DATE 22/1/18

1. (a) Unit S.S. Coy. #3 (b) Regimental No. 724213 (c) Rank Private

(d) Surname Tough (e) Christian name Wilbert

2. Age last birthday 27 Date of birth March 25th 1891

3. Enlisted at Lindsay on April 4th 1915

4. Personal description:—

(a) Height 5' 7" (b) Weight 140 (c) Complexion Fair

(stripped)

(d) Colour of hair Lt. Brown (e) Colour of eyes Brown (f) Identification marks Small

scar about size of pea on tip of middle finger of rt. hand

5. Address after discharge (for the use of the Board of Pension Commissioners)

Kirkfield, Ont.

6. Former trade or occupation Farmer

7. (a) Service

Years Days

PERIODS

From

To

109th Batt'n
20th "
S.S. Co. No. 3

April 1915
Nov. 1916
Nov. 1917

November 1916
November 1917
Date.

(b) Has he been overseas? France— six months.

8. Present disease or disability (use authorized nomenclature if possible) Nephritis.

(a) Date of origin April 9th 1917 (b) Place of origin France.

(c) Cause* Exposure to wet and cold.

*(Here include original disease or injury)

If further space is needed for this or other answer, use page 4

9. Present condition. (Important to be a full description of the present disabling condition or conditions).

Subjective Feels much improved. Still has headaches; feels weak and lacks energy. Has occasional pains in back. Says that ankles sometimes seem to swell and that he is frequently "puffy beneath the eyes".

Appetite only fair. Has no trouble with micturition.

Objective No objective signs of any disease.

Urinalysis report shows urine normal.

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

M. F. B. 227.

75M.-12-17.
1772-39-117.

B. P. C. FOLIO
FALSE DOCKET

10

10. History :

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

Scar on tip of middle finger of right hand.

11. What is the extent (state in percentages) of the disability in earning a livelihood in the untrained labour market? If there is more than one disabling condition, estimate the disability, due to each, and that due to all combined.

15% decreasing.

12. Did the disability arise on or off duty? Duty.

13. Was a Court of Inquiry held? No.

14. If the disabling condition had its origin before enlistment, has it been aggravated on service? If the answer is in the affirmative, state in percentages, to what extent the soldier is incapacitated by that aggravation.

Not Applicable.

15. Was the disability caused or aggravated by negligence, by vice or by misconduct, or by unreasonable refusal to accept treatment? No.

(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.)

16. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? Three months at least.

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

Hospital treatment England & France.

18. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit? No.

19. Can the former trade or occupation be resumed? Not at present.

20. Recommendations Fit for Category "C" III.

W. H. Tough Capt

Medical Officer by whom the case is brought forward.

STATEMENT OF THE SOLDIER.

(Sections 8, 9 and 10 are to be read to the soldier.)

I, the undersigned W. H. Tough have heard the description of my disability read, and am satisfied (or not satisfied) with it. (If dissatisfied, statement should follow.) I complain in addition of

W. H. Tough

Signature of soldier examined.

OPINION OF THE MEDICAL BOARD

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

Yes.

22. Is the soldier 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). **Yes.**
- (d) Temporarily unfit, (" D) (Yes or No). **No.**
- (e) Unfit for service in Categories A, B and C, (" E) (Yes or No). **No.**

23. It is certified that the soldier

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

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

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

Fit for Category "C" III for three months.

TO BE COMPLETED WHEN TREATMENT IS REFUSED

W. W. Jones
G. Graham

Capt. A.M.C. President

Capt. A.M.C. Members

Capt. A.M.C.

STATION Fort Henry.

DATE January 22 nd, 1918.

APPROVED BY

DATE JAN 28 1918

APPROVED BY

DATE

J. Weatherhead
A.D.M.S. District No. 5

For A.D.M.S. Mil. Dis. Br. C. No. 310

FALSE DOCKET

Director-General of Medical Services.

TO BE COMPLETED WHEN TREATMENT IS REFUSED

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

Witness Signed

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

INSTRUCTIONS

- 1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of pages 1 and 2 of this Form.
3. In answering the questions, Medical Officers will carefully obtain and record the soldier's statements concerning his condition.
4. Special care is required in answering question 14. Please read the questions carefully. All questions must be answered.
5. The nomenclature of diseases to be followed is that 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 and Sons.

EPSOM MEDICAL CASE SHEET.*

No. in Admission and Discharge Book. c.v. 182 Year 1914	Regimental No. 194215	Rank. Pte	Surname. Tough	Christian Name. S. H.
		Unit. 20 Canadian Inf	Age. 26	Service. 1 yr
Station and Date. 20 APR 1917	Disease <u>S.C.T. hand and albuminuria</u> Admitted to Military Hospital, York.			
complaining of Pains in legs, and back, with swelling of face, and limbs.				
History. Wounded on April 9 th by shrapnel, on 2 nd finger of right hand. Had his wound dressed till 10 th , as it was so slight, but started a swell. during the night of the 9 th and became sick. Sent to No 9 Dressing Station, then to No 3. Gen Hosp. Rouen, and transferred to England. No history of nephritis. Confuse.				
Present condition. The hand is quite healed now, but his movements are stiff. His face is greatly swollen, and has a puffy appearance. His legs & feet are very much swollen and put on pressure. Has marked albuminuria, and in his card. from No 3. Canadian Hospital, marked pus, and casts found.				
24.4.17	Urine contains a very distinct cloud of albumin. The face is very puffy & the ankles are a little swollen. He is passing a good quantity of urine.			
27.4.17	distinct cloud of albumen. Quantity of urine in 24 hours 3 pts 3 oz.			
1.5.17	Albumen less, cloud distinct but not nearly so dense. 6 pts urine passed in last 24 hours.			
4.5.17	Cloud of albumen is diminishing. Urine passed in 24 hours 3 pts 6 oz.			
12.5.17	Albumen diminishing only faint cloud. Urine passed in 24 hours 4 pts 8 oz.			
17.5.17	Albumen mere trace & with nitric acid it takes a short time before the faint trace appears.			
9.6.17	Amount of albumen slightly increased but not much.			

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

Station
and Date.

- 12.6.17 ~~Urine~~ Urine quite free from albumen - no ha trace after strong turic acid test.
- 19.6.17 Not a trace of albumen. He is well -
- 22.6.17 Quite convalescent.
- 30.6.17 Waiting to be transferred to Campden Camp.
- 13.7.17 Transferred to Canadian Convalescent Hosp. Epsom. ~~Urine~~.

Military Convalescent Hospital,
Woodcote Park, Epsom, Surrey.

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Date.....1917.

URINALYSIS

Division <i>F. Htt</i> <i>30</i>	Color <i>Amber</i>
Rank & Name <i>Pte. Doughty</i>	Deposit
Regt'l No. <i>124213</i>	Reaction <i>Acid</i>
Unit	Sp. Grav. <i>1028</i>
	Albumen <i>None</i>
Examination required	Sugar <i>None</i>
	Microscopic
Special regard to	

[Signature]
Micro Laboratory.

Duty

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@ 11

Proceedings of Medical Board at Discharge Depot,
QUEBEC, Que.

No. *724213* Rank *Rte* Name and Corps of disabled Soldier:—
Songu Wilbert H. 109th Batt
 Previous civilian occupation:— *Farmer.*
 Cause of Disability:— *nil*

Condition, in detail, which prevents the soldier earning a full livelihood:—

*Complains of headaches & backache
 following an attack of nephritis in France
 He is a well developed man.
 Last examination showed no albumin.
 All organs are apparently normal*

SPECIAL

OPINION OF THE BOARD.

Degree of incapacity. (Please state in fractions) *nil*

Probable duration of incapacity:— *not applicable*

Does it render him permanently unfit for Military Service? *no*

Would operation, Special treatment, or use of appliances, etc., lessen incapacity? *no.*

Signature:—

E. A. Robertson Capt
 President.

Station:— *Quebec*

W. P. Grant Capt
H. Martin Burns Capt
 Members

Date..... *Oct 11, 1917*

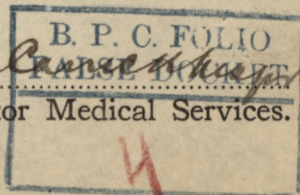
APPROVED.

Date..... *11th / 17*

W. W. Causey M.D.
 Asst. Director Medical Services.

Date.....

Director General Medical Service.



Proceedings of Medical Board of District of Columbia
October 1913

Case No. 117413
Dr. J. H. [unclear]
[unclear]

[Faint, illegible text, possibly a report or summary]

SPECIAL

OPINION OF THE BOARD

[Faint, illegible text, likely the beginning of the board's opinion]

[Faint, illegible signatures and names]

[Faint, illegible signatures and names]

[Faint, illegible text at the bottom left, possibly a stamp or official note]