MAR 14 1916

109TH·BN

# ATTESTATION PAPER.

No. 724080

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

DUPLICATE

## QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? — Upton
1a. What are your Christian names? — Thomas Gordon
1b. What is your present address? — Newmarket, Ontario
2. In what Town, Township or Parish, and in what Country were you born? — Aldershot, England
3. What is the name of your next-of kin? — Mrs. Alice Kennedy
4. What is the address of your next-of-kin? — 172 Mare St., London, Eng.
4a. What is the relationship of your next-of-kin? — Mother
5. What is the date of your birth? — April 26, 1896
6. What is your Trade or Calling? — Laborer
7. Are you married? — No
8. Are you willing to be vaccinated or re-vaccinated and inoculated? — Yes
9. Do you now belong to the Active Militia? — No
10. Have you ever served in any Military Force? — No
If so, state particulars of former Service.
11. Do you understand the nature and terms of your engagement? — Yes
12. Are you willing to be attested to serve in the Canadian Over-Seas Expeditionary Force? — Yes

## DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Thomas Gordon Upton, 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.

Thomas Gordon Upton (Signature of Recruit)

Date March 14, 1916 191 . W. H. Elliot Lieut. (Signature of Witness)

## OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Thomas Gordon Upton, 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.

Thomas Gordon Upton (Signature of Recruit)

Date March 14 1916 . W. H. Elliot 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 Lindsay this MAR 14 1916 day of 191 .

(Signature of Justice)

M. F. W. 23.
200 M.—11-15.
H. Q. 1772-39-841.

## Description of Thomas Gordon Yeton on Enlistment.

Apparent Age 19 years 11 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 8 ins.

Chest measurement: Girth when fully expanded 38 ins.
Range of expansion 3 ins.

Complexion Fair

Eyes Hazel

Hair D K Brown

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

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

Mole just above left shoulder blade

### 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 MAR 14 1916 191 .

Place Lindsay

J. McCulloch Capt.
Medical Officer
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.

Thomas Gordon Yeton 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. Lee (Signature of Officer)

Date MAR 14 1916 191 .

ULATON Thomas Gordon # 724880 **O. H. M. S.** 189th Bn. Med Unit

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UNIT INDEX CARD ( M. F. W. 71 OR 192 ) /

Misc 1
S.S.L. 132 1
Eng Med Bd -1
M.F.W. 67 -1
R 149 -1
Med Cas 1
1 Clear Card
1 B 122
1 pay card

M. F. B. 270.
850M-5-18
H. Q. 1772-39-67

0552

24-19
14-19
1-19
1

483601

15

HeB

Number 724080 Rank L/cpl

Surname UPTON

Christian Name Thomas Gordon

Units 2 Can Inf WB Theatre of War France

Date of Service 14-3-17

Remarks

Latest Address Armitage P.O. Ont.

Roll No. B. Page 18455.

200m.-2-21.M.

No. 724080 RANK Pte NAME Upton. Thomas. G.

T.O.S. 14-3-16. UNIT 10th Battalion.
D.O. 100. 16.3-16

M.D. 3

| PAID FROM | PAID TO | SIG. OR REC'T | PROMOTIONS, TRANSFERS, DISCHARGES, ETC. | |
|---|---|---|---|---|
| | | | PARTICULARS | AUTHORITY |
| 1916 | 1916. | | | |
| Mar 14 | Mar 31. | ✓ | | |
| April | | ✓. | | |
| May. | | ✓. | | |
| June. | | ✓. | | |
| July. | | ✓. | | |

UNIT SAILED
JUL 23 1916

H. Q. 449-B-527

M. D. No.

Surname Upton

Christian names Thomas Gordon

Regtl. No. 724080 Rank Pte

Unit 109th Bn

T. O. S. 19

D. O. Pt. II of

S. O. S. 21-3-19 19

Reason ~~Demob~~ Medl Unfit

Auth. D. O 78 07 19.3.19

200

Next of kin Kennedy, Mrs Alice

Relationship Mother

Address 172 Mare St.,
London, Eng

Also notify:

BORN—Place England

Date Apr. 26th 1896

ATTESTED—Place Lindsay

Date Mar 14th 1916

O/S 23-7-16

R/C 25-2-19 $\frac{270}{43}$ $\frac{2}{}$ Pte

W. 22—100M-7-18. 1772-39-839.

NAME Upton S. G.

RANK AND CORPS Pte. 2. C. S. W. B.

REGT'L No. 724080

H. Q. FILE No. 649.

FOLLOWS

No.

FOLLOWS

| CABLE | |
|---|---|
| NO. | DATE |

NATURE OF CASUALTY

L. L. 26438. M. & D. 8207.

M. F. W. 42—50M.—8-17.
H. Q. 1772-39-893.

| LIST NO. | HOSPITAL | DATE OF ADMISSION | REMARKS |
|---|---|---|---|
| a 55-1 | No 7. Cas. Clg. Stn. | 29-6-18 | P. U O. |
| a 56-2 | No 12. Stat. St Pol. | 1-7-18 | " " " |
| a 61-3 | Discharged | 6-7-18 | P U O |

Form R. 149.

Name Upton Thomas Gordon Rank Pte. Reg. No. 724080

Unit 2/Hrs Bn.

Next of Kin Mrs Alice Kennedy 172 Moore St. London Eng.

| Date | Movement | Place | Casualty | List No. | Notified N/K O. | W.O. List |
|---|---|---|---|---|---|---|
| 1918. | | | | | | |
| 29 6 | Ty Bas Clg Stn. | | HWO | A 55 | | 32653 |
| 1 7 | 12 Ty Hosp. St Pol. | | Do | A 56 | | 239511 |
| 6 7 | Discharged to Duty | | Do | A 61 | 44/4 | 244817 |

| Date | | Movement | Place | Casualty | List No. | Notified N/K O. | | W.O. List |
|---|---|---|---|---|---|---|---|---|
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*Name Upton Thomas Gordon Rank Pte. Regtl. No. 724080

Fyle Depot 24-Up-14

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

Port, ship and date of arrival Halifax, Empress of Britain 25-2-19.

Next of kin Mrs. Alice Kennedy, 172 Mare St., London, Eng.

Address on leave same

Address on discharge Armitage P.O. Ont.

Transportation issued Yes — No — Date Character on discharge

Previous occupation Laborer Date and place of enlistment Lindsay, Mar.14/16.

Diagnosis Hallux valgus & flat feet & hammer toes. Date of Medical Boards 18-3-19.

| Date. | Remarks. | Pt. 2 Order No. |
|---|---|---|
| T.O.S. 17-2-19 | Posted to Cas Co (Ex Camp) 25-2-19<br>Leave & Subs from 3-3-19 to 17-3-19 | 63 |
| 21-3-19. | S.O.S.DISCH."MED.UNFIT" TO TAKE OUT/PAT.TREATMENT,WITH THE DEPT. OF S.C.R. 183 DAYS W.S.G. | 78 |

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

(over)

| Date. | Remarks | Pt. 2 Order No. |
| --- | --- | --- |
| | | |

M. F. W. 192
150m.—5-18
1772-39-1243

D.M.S. 1300 50M-21-1 17.

| SURNAME | CHRISTIAN NAME OR NAMES | REG. NO. |
|---|---|---|
| Upton | T. G. | 724080 |

| RANK | UNIT | CO. | TROOP | BATTY. |
|---|---|---|---|---|
| Pte. | H.Q. L.U. | | (2 C (W B) | |

| HOSPITAL | DATE OF ADMISSION |
|---|---|
| 1. 12 Sta. Sc. Pol. | 7 G. G. Stat. 29.6.18. HOSP. 1.7.18 |
| 2. | HOSP. |
| 3. | HOSP. |
| 4. | HOSP. |

DIAGNOSIS p.u.o. R.

1.

2.

3.

DISPOSITION

6.L.8.7.18 a/55.
9.7.18 a/56.
" 15-7-18 a 61 (3)

DATE Dis. 6-7-18.

REMARKS

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

# EPITOME OF HOSPITAL TREATMENT

| HOSPITAL | ADM. |
|---|---|
| 1. | |
| 2. | |
| 3. | |
| 4. | |
| 5. | |
| 6. | |
| 7. | |

# CANADIAN EXPEDITIONARY FORCE

## Discharge Certificate

**This is to Certify** that No. 724080 (Rank) Pte.

Name (in full) UTTON Thomas Gordon enlisted in

the 109th. Bn.

CANADIAN EXPEDITIONARY FORCE at Lindsay on the 14th.

day of March 19 16

HE served in England and 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 21

Height 5'8"

Complexion Fair

Eyes Hazel

Hair D.Brown

Marks or Scars

Vacc. scars on left arm.

T.G. Upton
Signature of Soldier

Issuing Officer

O.C. No. 2 District Depot.
Rank

Appointment

Date of Discharge Mar. 31st. 1919

Signed at Toronto Ont. this 31st. day of March 19 19

in Military District No. 2.

File Reference No.

No. 2
MAR 21 1919
DISTRICT DEPOT

JB.

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.

M. F. W. 39a.
250m —6-18.
H. Q. 1772-39-882.

# CANADIAN EXPEDITIONARY FORCE

## Discharge Certificate

No. ..... (Rank) ..... Name .....

Unit .....

Address on Discharge .....

Character and Conduct .....

.....

Former Occupation .....

Special Qualifications of Value in Civil Life .....

.....

Medals and Decorations .....

.....

Remarks .....

.....

Signed at ..... this ..... day of ..... 19

.....
Name of Officer

.....
Rank

.....
Appointment

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

On demobilization the particulars called for on this certificate will be entered. Place of birth ..... Date of birth ..... Trade or occupation ..... Next of kin ..... Address ..... Relationship ..... Date of enlistment ..... Date of discharge ..... Length of service ..... Signature of holder ..... Signature of witness ..... Date ..... Place ..... Signature of officer ..... Rank ..... Appointment .....

M. D. 2

No. 56

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

CANADIAN EXPEDITIONARY FORCE.

# LAST PAY CERTIFICATE

Regimental No. 724080 Rank Pte Name Upton J. G.

DISCHARGED (Surname first)

Unit No. 2 District Depot who was*

On Mar 21 1919, to Out Pat S.C.

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from Mar 1 to Mar 21 1919 the inclusive date of transfer or discharge.

| | Dr. | Cr. |
|---|---|---|
| Bal. Dr. or Cr. from prev. month | | 5 69 |
| Regimental Pay 21 days at $ / c. | | 21 |
| Field Allowance 21 days at $ c. 10 | | 2 10 |
| Separation Allowance | | |
| Clothing Allowance | | 35 |
| Post Discharge Pay | | 70 |
| *Other Credits | | |
| Advances | | |
| Separation Allowance and Assigned Pay Cheque No. | | |
| *Other Charges A.P. Feb & Mar | 30 | |
| Balance on transfer or on discharge, cheque No. 158751 | 103 79 | |
| Total | 133 79 | 133 79 |

*Give particulars.

A monthly stoppage of $ 10 (†) has — (‡) been paid on account of Assigned Pay for the month of Mar 1919 and Separation Allce. for month of Nil 1919 (to) Assignee Mrs Alice Kennedy

(Address) Mill Cottage Mill Lane Aintree Liverpool Eng

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

Paid by J. H. McEng

ON TRANSFER OF AN OFFICER.

Outfit Allowance of $ ..... has been paid by Paymaster, Military District No. .....

REMARKS:—

State (1) date of enlistment ..... married or single .....

(2) Separation Allowance, entitled or not Nil (3) Reason for discharge M.H.

(4) Authority for discharge or transfer D.O.78.

NOTE.—S.A. & A.P. Card and Index Card (M.F.W. 71) are to accompany Last Pay Certificate on transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay Account of the officer or soldier.

Date 20-3-19.

Place TORONTO,

CAPT.

PAYMASTER, No. 2 DISTRICT DEPOT

Paymaster.

N.B.—(A) This form is to be used for all ranks (vide Article 122-130 and 141) Financial Instructions, C.E.F., 1916.

(B) For purposes of transfer it is to be made out in triplicate. Copies will be disposed of in accordance with instructions as laid down in Routine Order No. 1307, dated 12th Nov., 1918. Payment of the balance will not be made and the words "or on discharge cheque No." will be deleted.

(C) For purposes of discharge it is to be made out in duplicate. One copy to accompany discharge papers, and one copy for retention as a record. As payment of the balance will have been made, the words "on transfer or" will be deleted.

(D) If a man on discharge is entitled to Post Discharge Pay, Last Pay Certificate will be made out as in "C" with an additional copy to be forwarded to the District Paymaster.

## CREDITS, ADVANCES, Etc.

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

| Date | Place | Cheque No. A.R. No. or Other Particulars. | AMOUNT | | Signature of Officer Making Payment. |
|---|---|---|---|---|---|
| | | | Dr. | Cr. | |
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215.30
52.13
267.43

4280

175.60
52.13
227.73

B 1

To be made out in duplicate.

I.O. 5-21-20-53

DUPLICATE

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

INSTRUCTIONS.

(a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.

(b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.

(c) All questions, etc., must be answered.

(d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.

(e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

---

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

(2) Regimental Number 724080

(3) Full Name of Soldier Thomas Gordon Upton

(4) Place of Birth Aldershot Hampshire England

(5) Are you married, or not? No

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

(b) Present Postal Address

(7) Are you a widower? NO

(8) Have you any children?

If so, give number of boys and girls

Also their names and ages

M. F. W. 67.

300M.—5-16.
1772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive? No

If so, state name and address

(10) Is your Mother alive? Dont Know

If so, state name and address

(11) If your Mother is a widow

Are you her sole support, or not?

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

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

Edward Owens

Armitage Ontario

Canada

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

(15) Are you insured? Yes

If so, in what Company? Mutual Life & I. O. F.

Have you made arrangements for payment of your Insurance premium No

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

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

Date July 10th 1916

D.M.S. 1348 (Revised).

120306

# EXAMINATION
BY
# STANDING MEDICAL BOARD, BRAMSHOTT.

22-11- 1916.

No. 724080 Rank Pte. Name Upton, J. G.

Local Unit 109th Bn. ~~Overseas Unit~~ Age 20

Examination held at Bramshott, Hants.

**DISABILITY.** Flat feet.

~~Overseas~~—Local.
(scratch one out)

**PRESENT CONDITION.**

Mr. manubrium both arches down and also Hallux valgus left foot. Cannot take route marches.

Board recommends:

1. ~~Fit for Duty.~~
2. ~~Fit for duty after~~ ..... weeks physical training.
3. ~~Fit for Base duty~~ ..... weeks.
4. Fit for Permanent Base Duty. yes - B II - C.S.C.C.
5. ~~Discharge.~~

Signatures:

C. E. Campbell Major C.A.M.C. Pres.

Members { C. A. Dickson Major
H. Macfarlane Capt.

Approved.

Bramshott 22-11- 1916. R. R. Stewart Maj

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

B. 724080.

ORIGINAL

# MEDICAL HISTORY SHEET.

ORIGINAL

Surname Lipton Christian Name Thomas Gordon

Examined on 14th day of March 1916 at Lindsay

Birthplace City or Town Aldershot County England

Apparent age 19 years

Trade or occupation Laborer

Height 5 Feet 8 Inches.

Weight 146 Lbs.

Chest measurement Minimum 35 inches. Maximum expansion 38 inches.

Physical development Good

Small-Pox Marks None.

Vaccination Marks Arm Right. None Left. Four Number Four.

When Vaccinated last March 15th 1916.

(a) Marks indicating congenital peculiarities or previous disease None.

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

Approved by J McCulloch Capt. Medical Officer

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

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

| Date. | Result. | Vaccinations. |
|---|---|---|
| 15.3.16 | Good | J McCulloch M.O. |
| | | M.O. |
| | | M.O. |

| Date. | Result. | Anti-Typhoid Inoculations, Etc. |
|---|---|---|
| 18/4/16 | Good | J McCulloch M.O. |
| 25/4/16 | Good | J McCulloch M.O. |
| 2.3.16 | " | J McCulloch M.O. |
| 2/11/16 | 2nd | H. C. Boyd |

Enlisted on 14th day of March 1916 at Lindsay

| | Corps. | Regt'l Number. | Habits. | Date. |
|---|---|---|---|---|
| Joined on enlistment | 109th Bn. C.E.F. | 724080. | | 14.3.16 |
| Transferred to | 124th Bn. C.E.F. | | | |
| | 3rd Pioneer Bn. | 11-1-17 | | |
| | 3rd Can. Lab. Bn. | | | 28.1.17. |
| | 4th Can. Lab. Bn. | | | 17-2-17 |

## EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Bramshott Camp, Hants.

22 NOV. 1916

APPROVED.

| Station. | Date. | Disease. | Result. |
|---|---|---|---|
| [illegible] | 22-11-16 | Flat feet | R.B.D. B(II) C.E. Cooper Capt. Medical Officer President |
| P. D. Stewart Maj Dr A.M.S. | | | |
| Wotten | 16-12-18 | " Hallux valgus Hammer toes | B — R. Parker Major |
| E. Cant | 18/3/19 | Flat feet Hallux valgus | Sick for out patients J McCulloch |

MEDICAL BOARD, BRAMSHOTT.

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

M. F. B. 313.

400M.—1-16.
H. Q. 1772-39-439.

Surname Upton Christian Name Thomas Gordon

| STATION. | Date of Arrival at the Station. | Dates of Admission into Hospital. | | | Dates of Discharge from Hospital. | | | DISEASE. | Number of days in Hospital | Remarks on nature of the disease: how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations. | Signature of Medical Officer. |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | | Day | Month | Year | Day | Month | Year | | | | |

C.A.D.C. 5009 A

CANADIAN ARMY DENTAL CORPS, O.M.F.C.

# DENTAL CERTIFICATE FOR DEMOBILIZATION

M.D2.

Canadian Printing and Stationery Services, London

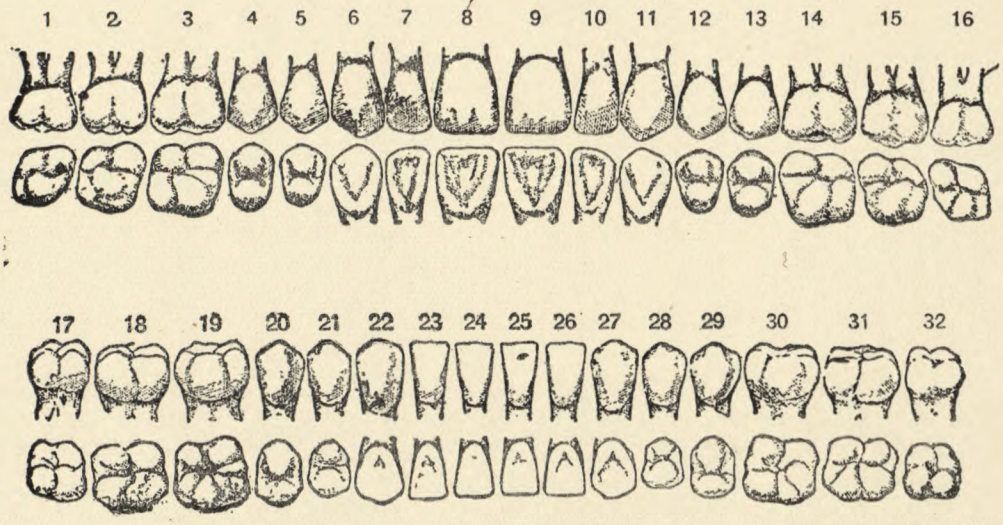
**DIRECTIONS TO DENTAL OFFICERS**

1. This form will be made out for each individual at the time of Demobilization in England or France.
2. Figures as per chart will be used to designate teeth concerned.
3. In reference to Partial Dentures the numbers of teeth thereon will be stated.

NAME OF SOLDIER (Block Letters) UPTON N. T. G.

REGIMENT 6th A. Em. Co. RANK PTE No. 724.080

Date of Examination in England 20/1/19 Date of Examination in France




## PRESENT DENTAL REQUIREMENTS

1. FILLINGS 19
2. EXTRACTIONS 1
3. CROWNS
4. DENTURES
   - (a) Full Upper
   - (b) Part Upper
   - (c) Full Lower
   - (d) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT?

HAS HE EVER RECEIVED DENTAL TREATMENT? (Reply by "*Yes*" where applicable to any or all of *a*, *b* or *c*.)

- (a) In Canada
- (b) In England No
- (c) In France

KINMEL PARK, NORTH WALES.

*Signature of Dental Officer* H W Reid Capt.

# DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

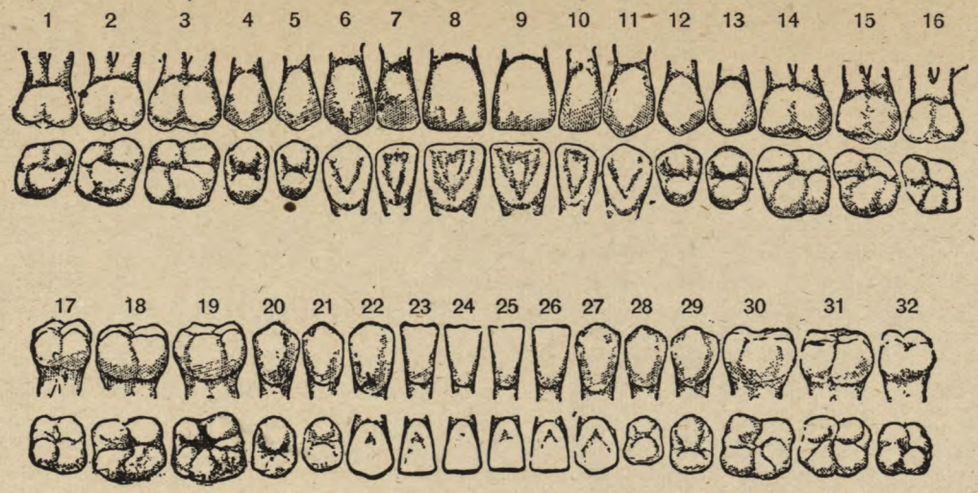
District 2

Name of Soldier Alpha, Thomas

Rank Pte.

Regiment

No. 724080




## INSTRUCTIONS

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

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

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

| | Date | | Amalgam | Temporary Filling (a) G. P. (b) Cement | Cement | Treatment Putrescent Pulp | Root Filling | Pulp Cap | Devitalization | Pyrrhœa | Synthetic Porcelain | Extracting | Dentures U | Dentures L | Dentures P | Gold Clasp | Gold Filling | Crowns Gold | Crowns Porcelain | Bridge Work | Operator | Military District | Remarks |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Condition on first Examination | | | | | | | | | | | | | | | | | | | | | | | |
| Discharge Exam. At Exhibition Camp Date. | MAR 18 1919 | | | | | | | | | | | | | | | | | | | | H A Simple Major | | |
| Certificate issued for | | | | | | | | | | | | | DENTALLY FIT | | | | | | | | | | |

M.F.B. 465. 200M—6-18. 1772-39-950.

R—122

J.M. Rank Name UPTON, Thomas Gordon. Reg'l No. 724080

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

Place and Date of Enlistment Lindsay, 14th March 1916. Place of Birth Aldershot, England.

Name and Address, Next-of-Kin Mrs Alice Kennedy.

172 Mare St, London, England. Relationship Mother.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character FCR 1334193

N/E. R.B. No. 8120. ~~792~~
File R.L.
Category OR. CANADA

H. W. & V., Ld.—7165-16.

| Report. Date. | Report. From whom received. | Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case. | Place. | Date. | REMARKS. Taken from Official Documents. |
|---|---|---|---|---|---|
| 6 | | Arrived in England per H.M.T. 2810 31-7-16 | | | |
| 5.8.16 | D.C. 109th | Apptd Prov. L/Cpl | Witley | 5-8-16 | Pt. II D.O. 218 + D.O. 285 |
| 21-11-16 | " | Reverts to Rank to meet Establishment | Witley | 2.11.16 | —— 326 |
| 6.12.12 | " | SOS on trf. to C.C.A.C. | " | 21-11-16 | Pt II DO 341 |
| 12.1.17 | C.C.A.C. | SOS on loan to 109th Bn. | Hastings | 22.11.16 | " 20 |
| 6.12.16 | O/C 109th Bn | Attached from C.C.A.C. | Witley | 22.11.16 | Pt II DO. 341 |
| 11.12.16 | O/C 124th " | Attd to 124th Bn for all purposes | " | 8.12.16 | " 267 |
| 13.1.17 | " | Ceases to be att & attd to 3rd Labor Bn | " | 13.1.17 | " 13. |
| 28-1-17 | C.C.A.C. | ~~Bn~~ Ceases att 109th + SOS to 3rd LB | Hastings | 28-1-17 | Pt II 047 |
| 29-1-17. | 3rd Lbr Bn. | T.O.S. from C.C.A.C. | Bramshott. | 28-1-17. | Pt II. D.O. 1. C.C.A.C. 47. |
| 8.12.16 | 109. Bn. | Ceases att. 109 Bn - att. 124. Bn. | Witley | 8.12.16 | Pt II D.O. 343. |

| Report. Date. | Report. From whom received. | 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. |
|---|---|---|---|---|---|
| 9-2-17 | 3rd Lab | Attd G.ar D Bn | Bs Shott | 9-2-17 | Pt II D O 11 |
| 18-2-14 | 4th Lab | T.O.S from 3rd Lab | Seaford | 17-2-14 | ——— 5 |
| 14-3-14 | " | Embarked for France | " Aurora | 14-3-14 | ——— 29 |
| 31.3.18. 4th. Can. Lab. Bn. Designated, 2nd Can. Inf. WKs. BnPt2. D0. 24 | | | | | |
| 5.8.18 | 2nd C.I.W.M. | S.O.S. to 6th Cas. Coy. | Pte | Field | 26.7.18 Pt II O. 78. & Pt II O 42 7/6 8/18. 6th Cas Coy |
| 18.12.18 | 6 CAEC | Tfd. to Eng Rest. to Gen Dep | " | " 13.12.18 | To Gen Dep D0298 d/16.12.18 D0 56 |
| 27-1-19 | Gen Dep | S.O.S. having procured to ~~Canada~~ Phyl | Pte | Witley | 19-1-19 D0 21 |
| | | | | | Pt Pte 39 9/7/19 |
| 3/2/19 | 2MD. Cdng | T O Spending ret Can. | Pte | K.Pk | 19/1/19 — 28. |
| 24.2.19. | 2MD.L.W. | S.O.S. to MD 2 in Canada | Pte | Phyl | 17.2.19. — 46. |

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

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

# Casualty Form—Active Service.

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

Regimental No. 124080 Rank Private Name Upton Thomas Gordon

Enlisted (a) 14.3.16 Terms of Service (a) D of W. Service reckons from (a) 14.3.16

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) Laborer.

| Report: Date | Report: 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 | |
| 6-12-16 | | Appointed A/L Cpl. | Oxney | 5.8.16 | Part II Order 216. |
| 6-12-16 | | O.L. 1094 Trans. to C.L.A.C. | Witley | 21-11-16 | Part II D.O. 341 |
| 12-1-17 | | C.C. A.C. Attached P.B.D from C.C.A.C. | Witley | 22-11-16 | Part II D.O. 20 |
| ~~2/12/16.~~ | | ~~O.L. 109 Transferred to 124th B.~~ | ~~Witley~~ | ~~2/12/16~~ | ~~Dept II No 443.~~ |
| | | | | | A W Aselline Capt. ADJUTANT 109th Overseas Battalion C.E.F. |
| ~~13-1-17~~ | | ~~124th Bn. Transferred to 3rd Pioneer Bn.~~ | ~~Witley~~ | ~~11-1-17~~ | ~~Part II Orders 13~~ |
| | | | | | ADJUTANT, 124th BATTALION C.E.F. |
| 28-1-17 | | CCAC. ~~Struck off strength~~ Posted to 3rd Lab. | Hastings | 28-1-17 | Part II D 047. |
| | | Taken on strength 4th Can. Lab. Bn. Part II D.O. 12-2-17 with effect 12-2-17 | | | |

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

[P.T.O.

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

| 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 | | | | |
| 18 FEB 1917 | 4th Lab Bn | T.O.S. with C.L. Bn | Seaford | 17.2.17 | Pt. II. D.O. 5 |
| 14-3-17 | do | Proceeded Overseas | do | 14-3-17 | ~~Pt. II. D.O.~~ |
| 29.1.17 | 5th Lab | T. O. S. | Bishott | 28.1.17 | Pt II O. 1. |

CERTIFIED CORRECT. 18 JUN 1917 CAN. REC. OFFICE, LONDON.

Lieut. for Lieut Col. i/c Records, C.O.M.F.

| | | | | | |
|---|---|---|---|---|---|
| 15-3-17. | M.L.O. | DISEMBARKED FRANCE | HAVRE | 15-3-17. | Nom.Roll. |
| 24-6-17. | O.C.4th.Lab. | Granted 11 days Leave of Absence. | Field. | 23-6-17. | B.213. Pt.11.D.O. No 59. |
| 8.9.17 | O/C 4th Labour | Returned from Leave | | 8.9.17 | B213 Pt. II O. #65 |
| 21.11.16 | O/C 109th Bn | Reverted to ranks to meet Estab. | | 22.11.16 | Pt. II O #326 |
| 10.2.18 | 4th Lab Bn | Granted 14 days leave. | | 5.2.18 | B213. Pt 11. No 12 d/18.2.18. |
| 24.2.18 | do | Retd from leave | Field. | 21.2.18 | B213. Pt 11. No 24. d/31.3.18. |
| | | Designation changed to 2nd Can Inf Works Bn (Auth: War Office letter 121/Overseas/4840 (A.G.12) d/11-3-18. | | | |
| 29.6.18 | 7 6 6 S | P.U.O | adm 7 6 6 S. | 29.6.18 | 5th 4812. |
| 21.6.18 | a 25 | class- | B2. 12 Staty | 1.7.18 | |
| 1.7.18 | 12 Staty | P.U.O | adm 12 Staty | 21.6.18 | W 3339/578 |
| 6.7.18 | do | do | do Staty | 1.7.18 | W 6415 |
| 14.7.18 | 2 Lots Bn | Rejoined Unit | Fld | 6.7.18 | W 6401 |
| 25.7.18 | Lab Cdl Can Cps | SOS on transfer to 6 Can Area Empl Coy. | | 6.7.18 | B213. |
| | | | | 26.7.18 | P.S.S. KR 25502/5 do 78. d/5.8.18. |

Army Form B. 103. Regimental Number 724080

## Casualty Form—Active Service.

Regiment or Corps

Rank Pte. Surname Upton Christian Name Thomas Gordon

Religion Age on Enlistment years months

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

Date of promotion to present rank Date of appointment to lance rank

Extended { } Re-engaged { } Qualification (b)

or Corps Trade and Rate

Occupation Signature of Officer.

| Report Date 1918 | From whom received | Record of promotions, reductions, transfers, casualties, &c., 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 of Casualty | Date of Casualty | Remarks Taken from Army Form B.213, Army Form A.36, or other official documents |
|---|---|---|---|---|---|
| | | Embarked ... | | | |
| | | Disembarked... | | | KR 25502/5 |
| 25-7-18 | A.A.G. | T.O.S. 6th Andrea Imp 6 | Fld. | 27-7-18 | Pt II 0.42 d. 6-8-18 |
| 18-12-18. | C.G.B.D. | Classified B & posted C | Can Gen Dep't. Whitley | 13-12-18 | G/R.G. |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| 20-4 | Gen Dep't | Gen Cont C.C. Camp Rhyl | Witley | 19-4 | Corr. |

O. A. Hewett
Lieut. for Lt.-Col. A. A. G.
Canadian Section, G. H. Q. 3rd Echelon, B. E. F.

J. H. Pease
.....LIEUT.
OFFICER i/c RECORDS.

(a) In the case of a man who has re-engaged for, or enlisted in Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) Signaller, Shoeing-Smith, &c

(17591.) Wt. W 1887—P 1124. 1,000,000. 6/18. D & S. Form B/103. (E. 1256.)

P.T.O.

| Report | | Record of promotions, reductions, transfers, casualties, &c., 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 of Casualty | Date of Casualty | Remarks. Taken from Army Form B.213, Army Form A.36, or other official documents |
|---|---|---|---|---|---|
| Date | From whom received | | | | |
| | | Attached C.C.C. Kinmel Park for return to Canada. Part 11 Orders No. _____. Ceases to be attached C,C,C, Kinmel Park on embarking for Canada, Part 11 Order No: ~~22+23~~ 46.47 ~~24.25~~ T-F/2/19 J.M. Inglis Lt. for Commanding MDA Wing, Kinmel Park Camp. | 20 JAN 1919 | | |
| | | EMPRESS OF BRITAIN | SAILED FEB 17 1919 ARRIVED FEB 25 1919 | | |
| FEB 17 1919 | O. S. | T. O. S. No. 2 DISTRICT DEPOT, TORONTO | | 1919 PART II D. O. 63 | |
| 21/3/19 | S.O.S. (Discharged) No. 2 District Depot Part II, D.O. No. 78 | | | | |

A.C. Kolbert Lieut.
For O. C. No. 2 District Dep.

A. Longant Capt
For
O.C. No. 2 District Depot.

L. L. Job 4503.—M. & D. 6332.

MILITIA AND DEFENCE

# ASSIGNED PAY

OVERSEAS CONTINGENTS

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

To Whom Edward Owens

Address Armitage. Ont

By Whom Assigned Upton. T. G.

Regtl. No. 724080

Rank L/Cpl.

Corps 109th Bn.

Rate 15.00 Oct 1st. 16

2m. 16 9/16 WB 4 4/16

PAYMENTS

| Month | Year | Cheque No. | Amt. | REMARKS |
|---|---|---|---|---|
| Aug. | 1914 | | | |
| Sept. | | | | |
| Oct. | | | | |
| Nov. | | | | |
| Dec. | | | | |
| Jan. | 1915 | | | |
| Feb. | | | | |
| March | | | | |
| April | | | | |
| May | | | | |
| June | | | | |
| July | | | | |
| Aug. | | | | |
| Sept. | | | | |
| Oct. | | | | |
| Nov. | | | | |
| Dec. | | | | |
| Jan. | 1916 | | | |
| Feb. | | | | |
| March | | | | |

CONSOLIDATED ACCOUNT 6

CANADIAN ASSIGNED PAY AUDITED
OK
AUDIT CLERK
DATE 4 6 19

MILITIA AND DEFENCE

# ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12a.
50m.—7-16
1772—39—819.

Sheet No. 2. Edward Owens (Assignee)

L. L. Job 5470—Req. 6888

PAYMENTS.

Name of Soldier L/Cpl. Upton. T. G. 724080. 109th Btn.

15.00 Oct 1st 16

| Month. | Year. | Cheque No. | Amt. | Remarks. |
|---|---|---|---|---|
| April | 1916 | | | |
| May | | | | |
| June | | | | |
| July | | | | |
| Aug. | | | | |
| Sept. | | | | |
| Oct. | | | | |
| Nov. | | P 07523 | 30 | |
| Dec. | | Z 36722 | 15 | |
| Jan. | 1917 | W 37180 | 15 | |
| Feb. | | O 47976 | 15 | |
| March | | Z 53577 | 15 | |
| April | | U 57439 | 15 | 15 |
| May | | U 12168 | 15 | |
| June | | T 19888 | 15 | B. |
| July | | I 25515 | 15 | |
| Aug. | | X 32008 | 15 | |
| Sept. | | L 40495 | 15 | |
| Oct. | | J 46403 | 15 | |
| Nov. | | V 52016 | 15 | |
| Dec. | | G 60622 | 15 | |
| Jan. | 1918 | | | |
| Feb. | | | 225 | |
| March | | | | |
| April | | | | |
| May | | | | |
| June | | | | |
| July | | | | |

CANADIAN
ASSIGNED PAY AUDITED
OK
AUDIT CLERK
DATE 4 6 19

MILITIA AND DEFENCE

# ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier

## PAYMENTS.

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

Form P. 812A.
7777 15m. 12/12/18 D509

C.R. FILE NO. ~~2301~~ 2330

# ASSIGNED PAY and/or SEPARATION ALLOWANCE

Payable to Mrs A. Kennedy

Address Mill Cottage, Mill Lane, Aintree Liverpool

Name UPTON. T. G.

From Canada: No. 724080 Rank Pte Unit 6th E.C.

| Rank | Authority | Unit |
|---|---|---|
| | | |

ASSIGNED PAY AND SEPARATION ALLOWANCE BEING PAID IN ENGLAND BY ADVICE FROM OTTAWA OF DISCHARGE OF SOLDIER NAMED HEREIN.

Noted on L/P&C

## ASSIGNED PAY

| Authority | Dol. | Effect |
|---|---|---|
| ASSIGNED PAY SEPARATION ALLOWANCE | " | " |
| 15 | " | " |
| 1-2-19 | " | " |

| Month | Cheque No. | Assigned Pay | Amount Separation Allce. | Total A.P. and S.A. | REMARKS |
|---|---|---|---|---|---|
| DEC. 1919 | | | | | DISCHARGED TO CANADA. |
| JAN. | | | | | NR 2168 Witley-Witley M D 2 |
| FEB. | F59139 | 15 - | | | |
| MARCH | G.35565 | 15 - | | | |
| APRIL | | | | | Final Payment. |
| MAY | Discharged 21-3-19. | | | | |
| JUNE | Auth Ottawa 1T. 545 d. 5-4-19. | | | | |
| JULY | | | | | |
| AUG. | | | | | |
| SEPT. | | | | | |
| OCT. | | | | | |
| NOV. | | | | | |
| DEC. | | | | | |
| JAN. | | | | | |
| FEB. | | | | | |
| MAR. | | | | | |
| APRIL | | | | | |
| MAY | | | | | |
| JUNE | | | | | |
| JULY | | | | | |
| AUG. | | | | | |

7240

Date Pay

Jany 1

P. 559.

MARRIED OR SINGLE: Single

PLACE OF BIRTH: Aldershot Eng.

NAME AND ADDRESS OF NEXT OF KIN: Mrs Alice Kennedy 172 Mare st. London Eng.

RELATIONSHIP OF NEXT OF KIN: Mother

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 |
|---|---|---|
| From Lance Cpl | 5/8/16 | D0218 |
| Reverts to Pte | 16-10-16 | D0326 |
| Reverts to Pte | 2-11-16 | D0330 |

**ADMISSIONS TO HOSPITAL, &c.**

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

REG'L. No. 724080 RANK: Pte ~~Lance Cpl~~ ~~Pte~~ NAME: Upton Thomas Gordon

IF IN PERMT. CORPS WHAT UNIT — UNIT: 109th Bn — TRANSFERRED TO: 6 Cdn Cab — DATE: 1-2-17 — AUTHORITY: D0341 6-12-16

PERMANENT FORCE ALLOWANCES — TRANSFERRED TO: 3rd Cdn Cab Bn — DATE: 16-2-17 — AUTHORITY: D01-29/1/17

PLACE OF ATTESTATION: Lindsay Ont. — TRANSFERRED TO: HH Labor — DATE: 21/4/17 — AUTHORITY: D0119/2/17

DATE OF ATTESTATION: Mar 14 1916 — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY MONTHLY $ 15.00 — DATE EFFECTIVE: Oct. 1st

PAYABLE TO: Mrs Edward Owens — RELATIONSHIP

ASSIGNED PAY MONTHLY $ — DATE EFFECTIVE: Armitage Ont. Can.

PAYABLE TO — RELATIONSHIP

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

DISCHARGE DATE AND PLACE — REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

C. 62

| DATE 1916 | PAY No. of Days | PAY Rate | PAY Amount $ | PAY Amount c. | Field Allowance No. of Days | Field Allowance Rate | Field Allowance Amount $ | Field Allowance Amount c. | Working or Special Pay No. of Days | Working or Special Pay Rate | Working or Special Pay Amount $ | Working or Special Pay Amount c. | Assigned Pay Credits | Other Credits | Total Credits | Acquittance Rolls 1 No | 1 Date | 2 No. | 2 Date | 3 No. | 3 Date | 4 No. | 4 Date | Cash Payments 1 | 2 | 3 | 4 | Assigned Pay | Other Charges | Total Debits | Balance Credit | Balance Debit | Pay Withheld or Deferred | Pay Available for Issue | REMARKS |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| July 31 | | | | | | | | | | | | | Balance from Canada | | | | | | | | | | | | | | | | | | 29 10 | | | | |
| Aug 5 | 1-14 | 1.00 | 4 00 | | | | | | | | | | | 29 10 | 29 10 | | | | | | | | | | | | | | | | | | | | |
| | 31 | 1.05 | 28 | 35 | 31 | 10 | 3 | 10 | | | | | | | 32 45 | 18 | 9/8/16 | | | | | | | 9 73 | | | | | | 9 73 | 54 82 | | | | D0218 Promt L/Cpl |
| Sept | 30 | .05 | 31 | 50 | | | 3 | | | | | | | | 34 50 | 50 | 30/9/16 | 31 | 15/10/16 | | | | | 7 30 | 7 30 | | | | | 14 60 | 74 72 | | | | 326 Reverts to Pte 16-10-16 |
| Oct | 31 | | 32 | 55 | | | 3 | 10 | | | | | | | 35 65 | 117 | 30/9/16 | 56 | 15/10/16 | | | | | 9 73 | 7 30 | | | 15 | | 32 05 | 78 34 | | | | |
| | 1 | | 1 | 05 | | | | | | | | | | | 13 40 | | | | | | | | | 26 16 | 14 60 | | | 15 | | 56 36 | | | | | |
| Nov | 29 | | 29 | | | | 3 | | | | | | | | 33 05 | 185 | 31/10/16 | | | | | | | 9 73 | | | | 15 | | 24 73 | 86 66 | | 33 | | |
| | | | | | | | | | | | | | | | | 299 | 30.11.16 | | | | | | | 4 87 | | | | | | | | | | | |
| Dec. | 31 | | 31 | | | | 3 | 10 | | | | | | | 34 10 | 296 | 30-11-16 | | | | | | | 7 30 | | | | 15 | | 27 17 | 93 59 | | | | D0341-6-12-16 Off to 6 Cdn Cab eff 6-2-17 |
| 1917 | | | 15 | 30 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Jany | 31 | 1.00 | 31 | 10 | | | | | | | | | | | 34 10 | | | | | | | | | | | | | 15 | | 18 | 112 59 | x 10 26 error | 33 | 79 | 59 | |
| | | | | | | | | | | | | | | | 23 69 | | | | | | | | | | | | | | | 12 3 26 | | | | | |
| Feb 15 | 15 | | 16 | 50 | | | | | | | | | | | 16 50 | | | | | | | | | | | | | 15 | | 15 | 114 09 | | | | Trans to 3rd Cdn Bn D01 29/1/17 |
| 16-28 | 13 | " | 14 | 30 | | | | | | | | | | | 14 30 | 23 | 31/1/17 | | | | | | | 4 87 | | | | | | 4 87 | 123 52 | | | | |
| | | | | | | | | | | | | | | | | | | 24 | 13/3 | | | | | | | 9 44 | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | 4 | 13/3 | | | | | | | 14 03 | | | | | | | | | |
| Mar 31 | 31 | | 34 | 10 | | | | | | | | | | | 34 10 | | | 405 | 22/12 | | | | | | | 34 07 | | 15 | | 15 84 | 81 18 | | | | To HH Labor A10 11 2/14. |
| Apr 20 | 20 | " | 22 | 00 | | | | | | | | | | | 22 00 | | | | | | | | | | | | | 15 | | 15 00 | 88 18 | | | | |
| | | | 24 | 75 | | | | | | | | | | 29 10 | 32 2 85 | | | | | | | | | | | | | 105 | | | 10 | | | | 10th Credit Blue Cd. Adjustment of error in Credit Balance as Jan 31/17 |
| "21-30 | 10 | " | 11 | | | | | | | | | | | | 11 | | | To | 21/3/17 | w/Labor Bn | | | | | | 2 62 | | | | | 2 62 | 97 26 | | 30 | 67 26 | |
| Mar 1-31 | 31 | " | 34 | 10 | | | | | | | | | | | 34 10 | 42 | 30.4.17 | | | | | | | 2 61 | | | | 15 | | 20 23 | 111 13 | | 30 | 81 13 | |
| | | | | | | | | | | | | | | | | 39 | 14.4.17 | | | | | | | 2 62 | | | | | | | | | | | |
| June 1-30 | 30 | " | 33 | | | | | | | | | | | | 33 | 126 | 30.5.17 | | | Lethbridge Bde | | | | 2 67 | | | | 15 | | 27 65 | 116 48 | | 30 | 86 48 | |
| | | | | | | | | | | | | | | | | 84 | 14.5.17 | | | 37 | 12/7/17 | | | 2 68 | | 7 30 | | | | | | | | | | |
| | | | 371 | 85 | | | | | | | | | | 29 10 | 400 95 | | | | | | | | | 66 11 | 14 60 | 70 76 | | 135 | | 284 47 | | | | | |
| | | | 371 | 85 | | | | | | | | | | 29 10 | 400 95 | | | | | | | | | 64 11 | 14 60 | 70 76 | | 135 | | 284 47 | | | | | |

724080. Pte, Upton, Thomas Gordon.

| Date | Pay No. of Days | Pay Rate | Pay Amount $ | Pay Amount c. | Field Allowance No. of Days | Field Allowance Rate | Field Allowance Amount $ | Field Allowance Amount c. | Working or Special Pay No. of Days | Working or Special Pay Rate | Working or Special Pay Amount $ | Working or Special Pay Amount c. | Assigned Pay Credits | Other Credits | Total Credits | Acquittance Rolls 1 No. | 1 Date | 2 No. | 2 Date | 3 No. | 3 Date | 4 No. | 4 Date | Cash Payments 1 | 2 | 3 | 4 | Assigned Pay | Other Charges | Total Debits | Balance Credit | Balance Debit | Pay Withheld or Deferred | Pay Available for Issue | Remarks |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | 371 | 85 | | | | | | | | | | 29 | 10 | 400 | 95 | | | | | | | | 64 11 | 14 60 | 70 76 | | 135 | | 284 87 | 116 48 | | | | |
| July | | | | | | | | | | | | | | | | | | | | | | R.R. 30 | 16/7/17 | | | | 4 86 | | | | | | | | R.R. 30 14/7/17 To. Mrs A Kennedy (mother) 16 Lockspur St, Atherton St, Liverpool |
| 1-31 | 31 | 1 00/70 | 34 | 10 | | | | | | | | | | | 34 | 10 | 208 | 30/6/17 | | | | Cash | 2/7/17 | 3 57 | | | 4 87 | 15 | | 28 30 | 122 28 | | | | |
| Aug | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1-31 | 31 | | 34 | 10 | | | | | | | | | | | 34 | 10 | 168 | 15/6/17 | | | | | | 2 68 | | | | 15 | | 17 68 | 138 70 | | | | |
| | | | | | | | | | | | | | | | | | 388 | 30-8-17 | | | | | | 2 68 | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | 745 | 15-9-17 | | | | | | 2 68 | | | | | | | | | | | |
| Sept | | | | | | | | | | | | | | | | | 304 | 30-9-17 | | | | | | 2 68 | | | | | | | | | | | |
| 1-30 | 30 | | 33 | | | | | | | | | | | | 33 | | 837 | 15-7-17 | | | | 946 | 31-6-17 | Paid Leave See Leave | | 73 | | 15 | | 98 41 | 42 99 | 3/- | | | |

| Month | Particulars | Cr. 1 | Cr. 2 | Particulars | Dr. 1 | Dr. 2 | Dr. 3 | Dr. 4 | Balance | Deferred Pay | Sec. Allce. Eng. |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | | | |
| | | ~~40 00~~ | | | | | | | 42 99 | 3/- | |
| Oct | P.P | 34 10 | | | | | | 15 | | | |
| | | | | a.R. 432 4th Lab Co 15/8/17 | | 2 68 | | | 89 41 | 3/- | |
| | | 34 10 | | | | 2 68 | | 15 | | | |
| Nov | P.Pay | 33 | | " 534 do 7/10/17 | | 3 57 | | | | | |
| | | | | " 566 do 9/10/17 | | 5 35 | | | | | |
| | | | | a.P. | | | | 15 | | | |
| | | | | a.R. 473 4th Lab Co 30/9/17 | | 2 68 | | | | | |
| | | | | " 570 " 29/10/17 | | 7 14 | | | 107 77 | | |
| Dec | P.Pay | 34 10 | | ban a.P. | | | | 15 | 107 77 | | |
| | | 67 10 | | | | 19 74 | | 30 | | | |
| Jan | do | 34 10 | | Can Ash | | | | 15 | | | |
| | | | | 4th Lab. a.R. 616. 15/11 | | 3 57 | | | | | |
| | | | | " " 658. 30/11/17 | | 10 71 | | | | | |
| | | | | " " 696 15/12 | | 3 57 | | | | | |
| | | | | " " 719 31/12 | | 4 46 | | | 104 56 | | |
| | | 34 10 | | | | 22 31 | | 15 | | | |
| Feb | do | 30 80 | | ban a/P | | | | 15 | | | |
| | | | | 4th Lab. a.R 751 30/1 | | 3 57 | | | | | |
| | | | | C.P. 94922 19/2 | | 24 33 | | | 92 46 | | |
| | | 30 80 | | | | 27 90 | | 15 | | | |
| Mch | do | 34 10 | | ban a/P | | | | 15 | | | |
| | | | | 4th Lab. a.R. 3231 5/2 | | 63 27 | | | | | |
| | | | | " " 803 5/2 | | 3 57 | | | 44 72 | 32 | |
| | | | | | | 66 84 | | | | | |
| | | 34 10 | | | | 66 84 | | 15 | | | |

| Month | Particulars | Cr. 1 | Cr. 2 | Particulars | Dr. 1 | Dr. 2 | Dr. 3 | Dr. 4 | Balance |
|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | |

CANADIAN ASSIGNED PAY AUDITED
OK
AUDIT CLERK
DATE 4.6.19

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

| ASSIGNED PAY | * ~~ENGLAND~~ ENGLAND OR ~~CANADA~~ CANADA. | SEPARATION ALLOWANCE. | * ENGLAND OR CANADA. | NAME:- UPTON Thomas Gordon. |
|---|---|---|---|---|
| EFFECTIVE DATE:- | ~~1.10.16~~ 1.9.18. | EFFECTIVE DATE:- | | NUMBER:- 724080. |
| AMOUNT:- | 15.00 | AMOUNT:- | | |

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

~~Mrs Edward Owens Armitage~~
~~Del Can~~
Mrs Alice Kennedy
Mill Cottage Mill Lane
(Mother) Aintree Liverpool
Ass Pay Checked. OTTAWA Ledger Sheet 1 to 5.
S.L. Jones 1/2/19.
Change address Sept 1918 Office Eng. Acct.

PARTICULARS OF RANK OR APPOINTMENT

| AUTHORITY | DATE EFFECTIVE | RANK OR APPOINTMENT |
|---|---|---|
| | | Pte |

UNIT AND TRANSFERS

ORIGINAL UNIT:- 109th Bn.
DATE ACCOUNT FIRST OPENED:- 1.8.16.

| AUTHORITY | DATE EFFECTIVE | DATE LEDGER SHEET T'SF'D | UNIT TRANSFERRED TO |
|---|---|---|---|
| | | | 2 C.D.W. |
| 42. | 1.8.18. | 21.8.18. | Labour Bn. Co |
| | 1.2.19 | | Can Section |

DAILY RATES OF PAY AND ALLOWANCES

| AUTHORITY | PAY | F.A. | P.F.A. | SUBS'CE ALL'CE |
|---|---|---|---|---|
| | 1 00 | 10 | | |

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS. | UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK

| DATE OF PAYMENT | NUMBER OF A.R | UNIT PAID BY | AMOUNT | DATE OF PAYMENT | NUMBER OF A.R | UNIT PAID BY | AMOUNT |
|---|---|---|---|---|---|---|---|
| 11/1/19 | 15246 | Willty £2-0-0 | 9 73 | | | Led Bal | 57 22 |
| | | | | | | L P & Bal | 47 49 |

PARTICULARS OF RENDERING NON-EFFECTIVE: Discharged to Canada 31/1/19 MR. 2168. Willty 23/1/19. Willty. MD. 2.

| MONTH 1918 | PARTICULARS | CR 1 | CR. 2. | PARTICULARS | DR. 1 | DR 2 | DR. 3. | DR. 4. | BALANCE | DEFERRED | SEPARATION |
|---|---|---|---|---|---|---|---|---|---|---|---|
| Mch 31. | Balce fwd. | | | | | | | | 84 72 | 32 | |
| apl. | P. Pay | 33 | | Can a/P. | | | | 15 | 62 72 | 32 | |
| | | 33 | | | | | | 15 | | | |
| May | do | 34 10 | | Can a/P | | | | 15 | 81 82 | 32 | |
| | | 34 10 | | | | | | 15 | | | |
| June | do | 33 | | Can a/P | | | | 15 | 99 82 | 32 | |
| | | | | 2 C.D.W. AR 330 30/6/18 | 8 03 | | | | 91 79 | | |
| | | 33 | | | 8 03 | | | 15 | | | |
| July 5 | do | 34 10 | | Can a/P | | | | 15 | 110 89 | | |
| | | | | 2 C.D.W. AR 349 9/7 | 3 57 | | | | 107 32 | 32 | |
| | | 34 10 | | | 3 57 | | | 15 | | | |
| AUG | do | 34 10 | | Can a/P. | | | | 15 | | | |
| | | | | AR 1036 3 CRT 5.8.18 | 8 03 | | | | 118 39 | 32 | |
| | | 34 10 | | | 8 03 | | | 15 | | | |
| Sept. | ✓ | 33 | | D.3381 £3.1.8. | | | 15 | | | | |
| | | | | AR 694 18/8/18 23 Lab: Group | 3 57 | | | | | | |
| | | | | " 745. 8.9.18 ✓ ✓ | 4 46 | | | | 128 36 | 32 | |
| | | 33 | | | 8 03 | | 15 | | | | |
| | | | | D.26528 £3.1.8. | | | 15 | | 113 36 | | |
| Oct. | ✓ | 34 10 | | | | | | | 147 46 | | |
| | | | | 16. AR 797 22/9/18 6th Emp Coy | 3 73 | | | | 143 73 | 32 | |
| | | 34 10 | | | 3 73 | | 15 | | | | |
| Nov. | ✓ | 33 | | D 99877 £3.1.8. | | | 15 | | 161 73 | | |
| | | | | 837 6 Emp Coy 5/10/18 " | 4 66 | | | | | | |
| | | | | 20388 OSB 30/10/18 " | 3 73 | | | | | | |
| | | | | 342 C.L. Group 16/11/18 " | 16 79 | | | | | | |
| Dec | | 34 10 | | No 859509 | 25 18 | | 15 | | 155 65 | 32 | |
| | | 67 10 | | Carried forward | 25 18 | | 30 | | | | |

COMPARED BY
CHECKED BY

NUMBER 124080 RANK NAME UPTON Thomas Gordon

| MONTH | PARTICULARS | CR. 1. | CR. 2. | PARTICULARS | DR. 1 | DR. 2 | DR. 3 | DR. 4. | BALANCE | DEFERRED | SEPARATION |
|---|---|---|---|---|---|---|---|---|---|---|---|
| Dec 18 | Brought Forward | 67 10 | | | 25 18 | | 20 | | 155 65 | 32 | |
| | | | | 218740 SB 5/10/18 2. 29 84 | 4 66 | | | | | | |
| | | | | CP 89851 22/12/18 2. | 87 60 | | | | | | |
| Jany | PP | 34 10 | | cheque no 70705 | | | 15 | | 82 49 | | |
| | | | | 12742 20.12.18 GD 2. | 9 73 | | | | | | |
| | | | | | 19 46 | | | | 53 29 | | |
| | | 101 20 | | 12455 GD no bal | 146 64 | | 45 | | | | |
| | Int - on Dep Rec | 3 93 | | | | | | | 57 22 | | |
| | | | | 15246 GN 11/1/19 | 9 73 | | | | | | |
| | | | | 686 8/2/19 Eurosia FPC | 9 73 | | | | 37 76 | | |
| | | 3 93 | | | 19 46 | | | | | | |
| | | | | Sep/Stt to bal 19/1/19 B021 GD | 27-1-19 | | | | | | |

PART I.

A.F.B. 179 Canada (Revised 1918). 4182 100m. 16/11/18 D.495

Reserved for M.H.C.

Regt. No. 724080 Rank Pte Surname UPTON Christian Name THOMAS GORDON

Unit or Corps—(a) Overseas from United Kingdom 2 Inf Bde (b) in United Kingdom Gen Depot

Born at—Town Aldershot County or Province Country Eng

Date of Birth—Day 26 Month April Year 1896 Age 22 yrs. months.

Joined at Windsor Ont Date 14-3-1916

Former trade or occupation Fabrier

Permanent Marks or any peculiarity that will serve for future identification :—

Height—feet 5 inches 8 Colour of eyes Brown

Signature of Soldier (*for identification purposes*) T. G. Upton

## Medical Report

☞ *Read carefully the instructions on last page of this form.*

1. DISABILITY.

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

Disabilities Group (*a*) FLAT FEET.

Disabilities Group (*b*) HALLUX VALGUS (DOUBLE)

Disabilities Group (*c*) HAMMER TOES.

2. CAUSE OF DISABILITY

| | | Place of origin. | Date of origin. |
|---|---|---|---|
| (*i.*) As to Group (*a*) above. | Poor strain | Canada | Prior to Enlistment |
| (*ii.*) As to Group (*b*) above. | Left ~~Right~~ Hallux Valgus Chr. Myelosis<br>Right ~~Left~~ Hallux Valgus. Active Service. | Canada<br>C.E.F. France | Prior to Enlistment<br>Sept 1916. |
| (*iii.*) As to Group (*c*) above. | Unknown. | England. | Prior to Enlistment |

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

(*i.*) As to Group (*a*) above ? Yes If yes, has Active Service aggravated it ? yes.

(*ii.*) As to Group (*b*) above ? The left Hallux valgus - yes If yes, has Active Service aggravated it ? yes.

(*iii.*) As to Group (*c*) above ? yes. If yes, has Active Service aggravated it ? ~~yes~~ No. Nyt

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

(*i.*) As to Group (*a*) above ? No.

(*ii.*) As to Group (*b*) above ? The Rt Hallux Valgus yes.

(*iii.*) As to Group (*c*) above ? No.

PART I. (*continued*).

5. MEDICAL HISTORY. This man's M.H.S. shows him to have had "slight flat feet" on enlistment 14 3/16. He states his left great toe was displaced outward on enlistment and that the right great toe joint became inflamed about Sept. 1916: he had subsequently considerable trouble with this toe and it gradually became displaced outwards. His flat foot condition has become worse on service and has rendered marching painful. His left hallux valgus has also grown worse. He had hammer toe on enlistment. They have not grown worse. In June 1917 he had influenza. Was in Hosp. in France from 20th 6/17 - 21 6/17. Has changed Bn by A.I.D. from Med Bd. Bramshott 22 11/16 B.H. flat feet.

6. PRESENT CONDITION. There is extreme flat foot both feet. The weight of body is thrown somewhat on inner margin of feet. Both great toes are hallux valgus. 30 degrees of eversion in each case and the hallux-lateral phal is enlarged. No 2, 3 & 4th toes each foot are hammer toes. There is no overlapping of toes, the smaller ones being pushed outwards to accomodate the great toe. There is tenderness over spine of scaphoid both feet.

The Cardio-Vasc, Respiratory, Nervous, Gastro-intestinal & Genito urinary systems are normal: the special sense are normal.

The man complains pain in arches of feet and great-toe joints:—

7. OPERATION. (*i.*) Was one performed? No. (*ii.*) If so, state what.

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

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

8. (*i.*) Is there loss or decay of teeth attributable to Active Service? No.

(*ii.*) If so, describe.

9. DO YOU RECOMMEND:—

(*a*) Fit for duty? (*state category*) B1 unlikely to be raised

(*b*) Invalid to Canada?

(*c*) Discharge from the Service as permanently unfit?

Date of Report 16/12/19 18

Station: Witley Eng.

Signed W. J. Grant
Officer in medical charge of case.
Capt RAMC

I have satisfied myself of the general accuracy of the above Report, and concur therein *except Not in Hospital

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

Dated at ..... Station, on ..... 191.....

*Delete if inapplicable.

PART II.

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

10. Is the disability fully described in Part I. (1)? If not, describe it. Yes'

11. Is the cause of the disability fully described in Part I. (2)? If not, describe it. Yes'

12. From the medical information now adduced, was the disability caused or aggravated by :— (a) Negligence of the Soldier { Caused? Aggravated? } M. (b) Misconduct of the Soldier { Caused? Aggravated? } M

13. THE ENTIRE DISABILITY.—Without regard to his regular occupation, to what extent is his capacity lessened at present for earning a full livelihood in the general market for untrained labour? (*Estimate at none, 5%, 10%, 15%, 20%, etc.*) Ten per cent.

14. THE DISABILITY DUE TO SERVICE.—(*See Part I. (3). Aggravation on Active Service of a disability existing previous to joining is to be included in this estimate.*) What part of the entire disability estimated next above (13) is due to causes arising during Active Service? (*Estimate at none, 1/10, 2/10, 3/10, etc., or all.*) Five-tenths.

15. Permanency of the Disability due to Service estimated next above in (14).
(*i.*) Is it permanent? Yes.
(*ii.*) If not permanent, what is its probable minimum duration (*in months*)? N.A.

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

17. Can the former trade or occupation be resumed? Yes

18. REMARKS :— Authority A.G. 1 (9083) d. 11-11-18

19. RECOMMENDATION :—
(a) Fit for duty? (*state category*) B II
(b) Invalid to Canada? M.
(c) Discharge from Service as permanently unfit? }

Date of Board 16-12-18

Signatures of the Board { R. Henderson, President. [illegible] Major, C.A.M.C.

Station Witley

Approved [illegible] CAPTAIN, For A.D.M.S. CANADIAN TROOPS, WITLEY. A.D.M.S.

Dated at Station 191

HEADQUARTERS A.D.M.S. 17 DEC. 1918 File..... CANADIAN TROOPS, WITLEY.

## Statement of the Soldier

*(This is to be completed only in the case of the Soldier taking his Discharge in England.)*
(Sections 1, 2, 5, and 6 are to be read to the Soldier.)

I, the undersigned.....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 :—

.....
*Signature of Soldier examined.*

## Instructions to Medical Officers

**Question 1.**—State the disability in terms of a diagnosis, that is, a diagnosis of the existing condition as distinguished from the disease or injury which caused it. It should be noted that in medical cases the disability may be the actual disease; for example, Tubercle of Lung, Chronic Bronchitis, Myalgia, Gastric conditions and so forth. (Follow the nomenclature as laid down in the "List of Diseases" of 1915, and amended by A. C. I. No. 1587 of 1917.)

**Question 2.**—The cause of the disability when known should be stated and care should be taken to establish as correctly as possible the place and date of origin. This is important in view of the relationship of Questions 3 and 4 to Question 5.

**Questions 3 and 4.**—*NOTE*—By Active Service is meant Service with the Colours in Canada, the United Kingdom or elsewhere during the present war, (since the 4th August, 1914.)

**Question 5.**—MEDICAL HISTORY.—State concisely the essential points of the history of the case as supported by documentary evidence. If further evidence is considered necessary to complete the Medical History, the same not being supported by documents, this should be obtained by questioning the soldier, but should be distinctly shown as "Patient's Statement." It is considered advisable that these latter statements be grouped apart from the evidence supported by documents available to the Medical Officer.

Extracts should be made from all entries on the Medical History Sheet.

If answers to Nos. 2, 3 or 4 show that the Soldier is suffering from some condition which pre-existed enlistment, it is advisable that these answers be substantiated as far as possible by statements obtained from the Soldier showing history of previous illness or injury.

**Question 6.**—PRESENT CONDITION.—As this question is primarily intended for the Medical Officer's report, in answering show clearly the condition of the Soldier at the time of examination.

It is directed that the objective and subjective matter be arranged in separate groups. The objective matter is considered to be the more important, in that it consists of a statement of the Medical Officer's actual finding.

Specialists' reports bearing on the PRESENT CONDITION should be attached.

In addition to description of the disability, a report on "all systems" is required in order that the whole when completed may be a true pen portrait of the Soldier's condition.

The Medical Officer in charge of the case will fill out pages 1 and 2 of this Form. The original must be wholly in the handwriting of the Medical Officer. The copies may be typewritten but must be signed by the Medical Officer who must be responsible that these are true copies of the original.

Finally the O. C. Hospital or S. M. O. or an Officer delegated for such duty by the A. D. M. S., is required to sign a certificate at the bottom of page 2, which reads as follows :—

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

This is a most important part of the paper and one to which the attention of the Officers concerned should be frequently drawn as it is by such strict supervision that the accuracy and good results of Medical Board work can be assured.

### ENTRIES OF RECATEGORIZATION

| Date | Station | Category | Signature of M. O. | Date | Station | Category | Signature of M. O. |
|---|---|---|---|---|---|---|---|
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

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 Exhibition Camp ..... DATE April 16th 1919

1. 1 (*a*) Unit 42 B.B. ..... (*b*) Regimental No. 79600 ..... (*c*) Rank Pte

(*d*) Surname Hutton ..... (*e*) Christian name Thomas Gordon

(*f*) Home address Armitage P.O. Ont.

(*g*) Next of Kin Mrs. A. Hutton ..... (*h*) Relationship Mother.

(*i*) Address of Next of Kin Mill Lane Anfield Liverpool England.

2. Age last birthday 22 ..... Date of birth April 20th 1896

3. Enlistment, or Appointment (if an Officer) (*a*) Place Kingston Ont ..... (*b*) Date 14-6-16

4. Personal description:

(*a*) Height 5' 8" ..... (*b*) Weight 140 (stripped) ..... (*c*) Complexion Fair

(*d*) Colour of hair Brown ..... (*e*) Colour of eyes Hazel ..... (*f*) Identification marks, Scars, etc. 4 wounds left arm, one just above left shoulder blade.

5. Former trade or occupation Labourer farm.

| 6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted). | Years | Days |
|---|---|---|
| | 3 | 4 |

| | Periods | |
|---|---|---|
| | From | To |
| Canada | March 14th 1916 | July 31st 1916 |
| England | July 31st 1916 | March 15th 1917 |
| France or other theatres of War | March 15th 1917 | Dec 13th 1918 |
| England and Canada. | Dec 13th 1918 | To date. |

7. Original disease, or injury Hallux Valgus and flat foot and hammer toes.

(*a*) Date of origin Prior to enlistment ..... (*b*) Place of origin Canada

(*c*) Cause Congenital

M. F. B. 227.

400M—11-18.
1772-39-117.

M.B.

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

Partial loss of function of both feet.

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:-Both feet flat, rigid type, both transverse and longitudinal arches are flattened and are not restored by standing on toes. Cannot stand on outside of feet backs of feet like, right foot left foot. The astragalus is quite prominent in inside of feet. There is hallux valgus on each foot, more marked on leftfoot, the 2nd, 3rd and 4th, toes of each foot are hammer toes. and 2nd and 3rd toes on each foot has a callus at the base of 2nd and 3rd toes of the sore of each foot.

Subjective:-Pain and weakness in the arch of the feet on walking a half mile with a good fitting boot, he can walk 3 or 4 miles.

(*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 (If pulse rate is abnormal, B. P. will be taken.) Genito-Urinary System no (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 for albumen and sugar.
No hernia, piles, goitre, varicose veins or varicocele.

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

Prior to enlistment had flat feet, hallux both feet and hammer toes both feet, feet caused him no trouble. Enlisted March 14th 1916, carried on with training in Canada till 20-7-16. Went to England, carried on in training in England till Oct 1916, when he was transferred to work battalion, carried on ~~transferred~~ in transport duty till the end.

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*).)

None.

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

None.

11.—(*a*) Did the disabling condition have its origin before enlistment? Yes

(*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.)

Yes, caused no inconvenience before enlistment but was aggravated with training.

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? Permanent

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

None

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, he should be fitted with proper fitting shoes.

16. Can the former trade or occupation be resumed? Yes
(If not, briefly state why)

17. Recommendations

I.S.C. as out patient for proper fitting shoes.

J. A. Evans Capt.
*Medical Officer by whom the case is brought forward.*

---

## STATEMENT OF THE INVALID

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

I, the undersigned T.G. UPTON 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

T.G. Upton Pte. Rank.
*Signature of invalid examined.*

## OPINION OF THE MEDICAL BOARD

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

.....

.....

..... We concur. .....

.....

.....

.....

.....

.....

19. Is the invalid fit for

| | | | |
|---|---|---|---|
| (*a*) General service, | (Category A) | (Yes or No.) | yes |
| (*b*) Service abroad, not general service, | ( " B) | (Yes or No.) | no |
| (*c*) Home service (Canada only), | ( " C) | (Yes or No.) | no |
| (*d*) Temporarily unfit. | ( " D) | (Yes or No.) | no |
| (*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.)

..... Deformed foot, orthopedic to be to 1 month. .....

(*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.)

..... to the I.O.D. for treatment as an out door 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.

.....

.....

..... *President.*

PLACE ..... Exhibition Camp Toronto Ont. ..... J. Duncan Allison Captain

DATE ..... March 10th 1919 ..... ..... R. Lauritsen Capt. } Members

### TO BE COMPLETED WHEN TREATMENT IS REFUSED

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

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

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

.....

.....

.....

..... *President.*

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

DATE..... .....

APPROVED BY

APPROVED

*Assistant Director of Medical Services.*

MAR 19 1919

DATE.....

T. Gourley CAPT.

FOR A. D. M. S. M. D. 2

APPROVED BY

*Director-General of Medical Services.*

DATE.....

WSB Class A

M.D. 2

Regl No. 724080 Rank Pte

Surname UPTON Christian Names Thomas Gordon

Regl Depot Gen. Dep. 109/24

Toronto
Mother
Farmer

EMPRESS OF BRITAIN

SAILED
FEB 17 1919
ARRIVED
FEB 25 1919

25

63

War Service Badge.
Class W
No. 234678 Issued

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.)

JB.

No. 724080

Rank Pte.

Surname UPTON

Christian name Thomas Gordon

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

Corps (Squadron, Battery or Company) 109th. Bn. (2.DD.)

Date of discharge MAR 21 1919

Place of discharge TORONTO, ONT.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

| | |
|---|---|
| Age 21 years months. | Descriptive marks |
| Height 5 feet 8 inches. | Vacc. scars on left arm. |
| Complexion Fair | |
| Eyes Hazel | |
| Hair D.Brown | |
| Trade Labourer | |
| Intended place of residence (To be given as fully as practicable.) Armitage P.O. Ont. | |

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

HAVING BEEN FOUND MEDICALLY UNFIT FOR SERVICE.

Authority for discharge D.O. D.D. #2. Pt.11 #78

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

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

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

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.)

M. F. B. 218.

200M.—5-18.
H. Q. 1772-39-113.

Rep. 2 6/20

(OVER)

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

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

6. Medals and Decorations.....

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

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

(Place).....

(Date).....

.....

*Commanding*.....

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, and that I have received my permanent discharge certificate.

(Place) TORONTO, ONT. Thomas Gordon Cyster *(Signature of Soldier.)*

(Date) MAR 21 1919 H Sargeant Cpl *(Signature of Witness.)*

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

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

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

.....*(Signature of Soldier.)*

10. **Statement of Service.**

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

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

11. **Confirmation of Discharge.**

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

(Place) TORONTO, ONT.

(Signature) H Sargeant Cpl

(Date) MAR 21 1919

For O.C. No. 2 Discharge Depot.

## 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.)

# List of Discharge Documents.

| | | |
|---|---|---|
| Reg. Conduct Sheet, | Militia form | B. 263 |
| Squadron / Battery / Company } Conduct Sheet, | " | B. 263a |
| or | | |
| Field Conduct Sheet | " | W. 178 |
| Copies of Convictions, by C. P. | | in MS. |
| Med. Hist. Sheet, | Militia form | B. 313 |
| Casualty Form | " | W. 54 |
| Medical Report for Invalid§ | " | B. 227 |
| Dental History Sheet | " | B. 465 |
| Last Pay Certificate | " | W. 44 |
| Duplicate Discharge Certificate | " | W. 39A |
| ‡Form of Will | " | W. 82 |

§Only if discharged "Medically unfit."

‡Only if man has not been overseas.

| | | |
|---|---|---|
| Attestation Paper | Militia Form | W. 23 |
| or | | |
| Particulars of Recruit | " | W. 133 |
| Proceedings on Discharge | " | B. 218 |

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.

Documents not accompanying this form should be crossed out.

*I hereby certify that the following documents are unobtainable.*

*Officer Commanding.*

*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.*

Date of Enlistment

MILITIA AND DEFENCE

# Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment ~~Oct 1-16~~ Sept 1-18

RATE OF SEPARATION ALLOWANCE

| | | | |
|---|---|---|---|
| | | | |

U 163

RATE OF ASSIGNMENT

| | | | |
|---|---|---|---|
| 15 | | | |

PARTICULARS OF SEPARATION ALLOWANCE

No. 724080

Rank L. Cpl. Promoted Reverted Discharge

Soldier's Name T G Upton

Battalion 109th Battn

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name ~~Edward Owens~~

Address ~~Armitage Ont.~~

Change of Address

1 Mrs Alice Kennedy mother

2 Mill Cottage, Mill Lane

3 Aintree, Liverpool, Eng.

4

| Date 1917 | Cheque No. | Amount S/A | Amount A/P | Total | |
|---|---|---|---|---|---|
| Dec 31 | — | | 225 | 225 | |
| Jan 18 | Q 11392 | | 15 | 15 | |
| Feb. | 072774 | | 15 | 15 | 15 |
| Mar | W 92717 | | 15 | 15 | |
| Apr | W 87933 | | 15 | 15 | |
| May | T 20359 | | 15 | 15 | ✓ |
| June | P 27153 | | 15 | 15 | ✓ |
| July | D 24204 | | 15 | 15 | ✓ |
| Aug | T 39027 | | 15 | 15 | ✓ |
| | | | 345 | 345 | |

REMARKS 18389-T-3

# ENGLISH

Duplicate sent transferred to England for payment from 1-9-18, per A2 M 8-7-18, file 18389-T-3. R.S. 28-8-18.

A/c Closed

Bal'd per E of Britain

Date 25/2/19 M.F.W. 187 7-3-18

Checked In N#2 P.E.S.

CANADIAN ASSIGNED PAY AUDITED

OK

AUDIT CLERK

DATE 4 6 19

A PENCIL MAS BEEN MADE FOR THIS ACCOUNT

MRO. L.S. 5634, "Destroy" Rendered. 28-8-18, R. Smith

M. F. W. 128.
400M.—5-17—1772 39-1141
L. L. 22320—M. & D. 7993.

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

# Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

| | | | |
|---|---|---|---|
| | | | |

RATE OF ASSIGNMENT

| | | | |
|---|---|---|---|
| | | | |

## PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

## PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

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

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

Date of Enlistment

MILITIA AND DEFENCE

# Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS U 163

Date of Assignment Sept 1-18. Oct 1-16

RATE OF SEPARATION ALLOWANCE

| | | | |
|---|---|---|---|
| | | | |

RATE OF ASSIGNMENT

| | | | |
|---|---|---|---|
| 15 | | | |

Duplicate

## PARTICULARS OF SEPARATION ALLOWANCE

No. 724080

Rank L/Cpl. Promoted Reverted Discharge

Soldier's Name T. G. Upton

Battalion 109th. Bn.

Beneficiary

Relationship

Address

## PARTICULARS OF ASSIGNMENT

Name Mrs Alice Kennedy "mother"

Address Mill Cottage, Mill Lane

Change of Address Aintree, Liverpool, Eng

1

2

3

4

| Date | Cheque No. | Amount S/A | Amount A/P | Total |
|---|---|---|---|---|
| Aug 31/18 | | | 345 | 345 |

File 18389-T-3

REMARKS

Transferred to you for payment from 1-9-18, per A 2 M. 8-7-18, file 18389-T-3.
R.S. 28-8-18

A. Pay. Checked with Ledger Sheet. 1.10.18.

Capt.

A. Hogg Pay Sgt

M. F. W. 128.
400m.—5-17—1772 39-1141
L. L. 22330—Mc. & D. 7993.

Date of Enlistment

MILITIA AND DEFENCE

# Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

RATE OF SEPARATION ALLOWANCE

| | | | |
|---|---|---|---|
| | | | |

RATE OF ASSIGNMENT

| | | | |
|---|---|---|---|
| | | | |

## PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Eattalion

Eeneficiary

Relationship

Address

## PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

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

M. F. W. 128.
400M.—4-17—1772 39-1141
L. L. 222329—M. & D. 7993.

"EMPRESS OF BRITIAN" 23:2:19 No. 2 DISTRICT DEPOT

E 42. | AUDITOR | PAYMASTER

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

M. OR S. | REGT. No. 724080 | RANK Pte. | NAME (IN FULL) UPTON T. G. (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN | RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? No. | DATE EFFECTIVE

TO WHOM PAID Nil. | RELATIONSHIP

ADDRESS

| PARTICULARS | EFFECTIVE DATE | AUTHORITY |
|---|---|---|
| Complete | | |

ORIGINAL UNIT C.E.F. 6th Emp. Coy. | IF IN P.F. WHAT UNIT? Cumitage D.O. Ont. 3/4/19

PLACE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

DATE OF ATTESTATION 14/3/16 | TRANSFERRED TO | DATE | AUTHORITY

ASSIGNED PAY $ 15.00 | DATE EFFECTIVE 1-2-19 continued by Emp.

PAYABLE TO Mrs Alice Kennedy | RELATIONSHIP Mother | ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS Mill Cottage Mill Lane Aintree Liverpool Eng.

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE Out Patient Use

DISCHARGED PLACE Toronto | DATE 31/3/19 | REASON M.A. | AUTHORITY D078 | IF ENTITLED TO POST DISCHARGE PAY Yes

| MONTH | PAY AND F.A. NO. OF DAYS | RATE | AMOUNT $ | C. | OTHER CREDITS $ | C. | $ | C. | TOTAL CREDITS $ | C. | ACQUITTANCE ROLLS COL. NO. 1 NO. | DATE | COL. NO. 2 NO. | DATE | COL. NO. 3 NO. | DATE | CASH PAYMENTS COL. NO. 1 $ | C. | COL. NO. 2 $ | C. | COL. NO. 3 $ | C. | ASSIGNED PAY $ | C. | REGIMENTAL CHARGES $ | C. | OTHER CHARGES $ | C. | $ | C. | TOTAL DEBITS $ | C. | BALANCE DEBIT $ | C. | CREDIT $ | C. | PARTICULARS OR REMARKS |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| BALANCE FROM PREVIOUS ACCOUNT | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 31-1-19 | | $1.10 | | | | | 47 | 49 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | 47 | 49 | 864 2/9 | | | | | | 9 | 78 | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | Boat | | | | | | 4 | 87 | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | Train | | | | | | 5 | 00 | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | Cheque | | | | | | 40 | 00 | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 59 | 60 | 12 | 11 | | | |
| 1-2-19 | 28 | 1c | 30 | 80 | 12 | - | | | 42 | 80 | | | 15 | 05 | | | | | 25 | 00 | | | | | | | 12 | 11 | | | 37 | 11 | | | 5 | 69 | T.O.S. 117 D.O. 63 SUBS. 213 TO 213 D.O. 63 |
| Mar. | 21 | 1c | 23 | 10 | | | 5 | 69 | | | | | | | | | | | | | | | | | | | 15 | | | | | | | | | | Out Patient Use |
| | | | | | 35 | | 70 | | 137 | 79 | | | 15 | 51 | | | | | 103 | 79 | | | | | | | 15 | | | | 137 | 79 | | | | | at Pat. Eng. 15c at March Eng. 15c |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Over Soldier |
| 183 days | | | W.S.G. 420 | | | | | | 420 | | | | | | | | Date | | W.S.G. | | | | | | | | | | | | 70 | | 850 | | | | 1st W.S.G. Paid by D.D. |
| | | | | | | | | | | | | | | | | | Mar 21 | | 70 | | | | | | | | | | | | 70 | | | | | | |
| | | | | | | | | | | | | | | | | | apl 18 | 283216 | 70 | | | | | | | | | | | | 140 | | 280 | | | | |
| | | | | | | | | | | | | | | | | | May 15 | 288517 | 70 | | | | | | | | | | | | 210 | | 210 | | | | |
| | | | | | | | | | | | | | | | | | June 13 | 380944 | | | 70 | | | | | | | | | | 280 | | 140 | | | | |
| | | | | | | | | | | | | | | | | | July 11 | 738699 | | | 70 | | | | | | | | | | 350 | | 70 | | | | AK 85 |
| | | | | | | | | | | | | | | | | | Aug 11 | 746604 | | | 70 | | | | | | | | | | 420 | | 0 | | | | AP 09 |
| | | | 420 | | | | | | 420 | | | | | | | | | | 210 | | 210 | | | | | | | | | | 420 | | 420 | | | | |

FOR PAYMASTER WAR SERVICE GRATUITY CAPTAIN

A.K.S.C. PAID IN FULL

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