C.E.F. REGIMENTAL DOCUMENTS

NAME BARCLAY FREDRICK Lee REGT. No. LIEUT UNIT 1 C.O.R. H. Q. FILE No. 5687

CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE
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NON-EFFECTIVE BY

DEATH

CATEGORY

DISCHARGE

CATEGORY

DESERTION

M.F.W. 2589
20M-4-46 (9113)
H.Q. 1772-39-1377

71

35 Card

ATTESTATION PAPER.

No. 59035.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name? ..... Fred Leo Barclay
2. In what Town, Township or Parish, and in what Country were you born? ..... Brockville, Ontario, Canada
3. What is the name of your next-of-kin? ..... George H. Barclay, father
4. What is the address of your next-of-kin? ..... 73 Marshalsea St., Brockville
5. What is the date of your birth? ..... April 5th, 1893
6. What is your Trade or Calling? ..... Engineer
7. Are you married? ..... No
8. Are you willing to be vaccinated or re-vaccinated? ..... Yes
9. Do you now belong to the Active Militia? ..... No
10. Have you ever served in any Military Force? ..... Yes. 41st Regiment, 21/- years
    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

F. L. Barclay ..... (Signature of Man).

W. Stughes ..... (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

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

F. L. Barclay ..... (Signature of Recruit)

Date Nov. 9th 1914. W. Stughes ..... (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Fred Leo Barclay, 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.

F. L. Barclay ..... (Signature of Recruit)

Date Nov. 9th 1914. W. Stughes ..... (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 Kingston this 9th day of November 1914.

W. Stughes ..... (Signature of Justice)

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

W. Stughes ..... (Approving Officer)

200 M.—8-14.
H.Q. 1772-1-13.

LD 14-11-62 22/63

Description of Fred P. Barclay on Enlistment.

Apparent Age 21 years 7 months.

(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 8½ ins.

Chest measurement: Girth when fully expanded 38 ins.

Range of expansion 2 ins.

Complexion Dark

Eyes Blue

Hair Dark Brown

Religious denominations:

- Church of England
- Presbyterian
- Wesleyan
- Baptist or Congregationalist Yes
- Other Protestants (Denomination to be stated.)
- Roman Catholic
- Jewish

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 right groin

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 1/11 1914. Chas Sanford Lt Col

Place Kingston

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.

F. L. Barclay 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.

W. B. Hughes (Signature of Officer)

Date Nov 1 30th 1914.

Form B. 181

CLINICAL CHART

(*To be attached to Case Sheet.*)

Corps _____ Military Hospital 4th L.G.H.

No. _____ Rank and Name Lt. Barclay F.L. Age 26 Service 1½/12

Disease April. Date of admission April 17th. Date of discharge _____ Result _____

Dates of Observation	21	22	23	24	25	26	27	28	29	30	1 May	2	3	4	5	6.	7
Days of Disease																	
Temperature Fahrenheit (Time A.M. P.M.)																	
Pulse per Minute																	
Respirations per Minute																	
Motions per 24 hours	1	0	3	2	0	1	1	1	0	0	0	0	0	0	0	0	0
			1	1			0	0	1	1	1	1	1	1	1		

Temperature scale: 107°, 106°, 105°, 104°, 103°, 102°, 101°, 100°, 99°, 98°, 97°

Operation

(6201) Wt. W. 11421/M1165 2,000,000 12/16 McA & W Ltd. A.F.B. 18[illegible]/35)

Signature _____ In charge of case.

Unit 109th Overseas Bn Rank Lieut Name F. L. Barclay

OFFICERS' DECLARATION PAPER

CANADIAN OVER-SEAS EXPEDITIONARY FORCE

ORIGINAL

QUESTIONS TO BE ANSWERED BY OFFICER

(ANSWERS)

1. (*a*) What is your Surname? Barclay

   (*b*) What are your Christian Names? Frederick Lee

2. (*a*) Where were you born? (State place and country) Brockville Ontario

   (*b*) What is your present address? Brockville Ontario

3. What is the date of your birth? 8th March 1891

4. What is (*a*) the name of your next-of-kin? Mrs Geo Barclay

   (*b*) the address of your next-of-kin? Brockville Ontario

   (*c*) the relationship of your next-of-kin? Mother

5. What is your profession or occupation? Engineer assistant

6. What is your religion? Presbyterian

7. Are you willing to be vaccinated or re-vaccinated and inoculated? yes

8. To what Unit of the Active Militia do you belong? 41st Regiment

9. State particulars of any former Military Service None

10. Are you willing to serve in the

    CANADIAN OVER-SEAS EXPEDITIONARY FORCE? yes

The undersigned hereby declares that the above answers made by him to the above questions are true.

F. L. Barclay (*Signature of Officer.*)

CERTIFICATE OF MEDICAL EXAMINATION

I have examined the above-named Officer in accordance with the Regulations for Army Medical Services.

I consider him* fit for the CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

Date Apr 25 1916

Place Lindsay Ont

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

*Insert here "fit" or "unfit".

M. F. W. 51
40m.—12-15.
H. Q. 1772-39-917.

Unit 109th Oseas Bat Rank Lieut Name F. L. Barclay

card. Ha. m. 25.5.16.

OFFICERS' DECLARATION PAPER

CANADIAN OVER-SEAS EXPEDITIONARY FORCE

DUPLICATE

QUESTIONS TO BE ANSWERED BY OFFICER

(ANSWERS)

1. (*a*) What is your Surname? Barclay

   (*b*) What are your Christian Names? Frederick Lee

2. (*a*) Where were you born? (State place and country) Brockville Ontario

   (*b*) What is your present address? Brockville, Ontario

3. What is the date of your birth? 8th March 1891

4. What is (*a*) the name of your next-of-kin? Mrs Lee Barclay

   (*b*) the address of your next-of-kin? Brockville, Ontario

   (*c*) the relationship of your next-of-kin? Mother

5. What is your profession or occupation? Engineer assistant

6. What is your religion? Presbyterian

7. Are you willing to be vaccinated or re-vaccinated and inoculated? yes

8. To what Unit of the Active Militia do you belong? 41st Regiment

9. State particulars of any former Military Service None

10. Are you willing to serve in the

    CANADIAN OVER-SEAS EXPEDITIONARY FORCE? yes

The undersigned hereby declares that the above answers made by him to the above questions are true.

F. L. Barclay (*Signature of Officer.*)

CERTIFICATE OF MEDICAL EXAMINATION

I have examined the above-named Officer in accordance with the Regulations for Army Medical Services.

I consider him* fit for the CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

Date apr 25 1916

Place Lindsay Ont

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

*Insert here "fit" or "unfit".

M. F. W. 51
40m.—12-15.
H. Q. 1772-39-917.

G. D. 19.11.62.

To be made out in duplicate.

H.Q. 54-21-23-53

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 ..... Lieut

(3) Full Name of ~~Soldier~~ Officer Frederick Lee Barcley

(4) Place of Birth Brockville Ontario Canada

(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 ?.....yes.....

If so, state name and address ...George L Barcley.....
77 Bartholmew Ave Brockville.

(10) Is your Mother alive ?.....Wilhelmina Barcley.....

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.

.....

.....

.....

(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 ?.....London Life and Great Western.....

Have you made arrangements for payment of your Insurance premium.....yes.....

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 13th 1916.

Forms
I. 1237
11

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
		Lt	Barclay	F.L.

Year	Unit.	Age.	Service.
	Canadians att RFC.	26	2½

4th LONDON GENERAL HOSPITAL, R.A.M.C. (T.) DENMARK HILL, S.E.

Station and Date. Disease

Apr 20 1917 — Fracture nasal bones as Warbough — from airplane

HC3

Marked deviation of septum to L.

Operation performed under general anesthesia

21.4.17 S.W.R. performed and uneventfully prepared

April 28th 1917 To use nasal wash — hot & cold twice daily.

Mist-Ferr Menthol.

May 4th May be discharged

7/5/17 Discharged

Major, R.A.M.C. (T.)
Registrar
4th London General Hospital.

DISCHARGED FROM HOSPITAL
17 MAY 1917

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

(06) Wt.W 4234—M 627. 1,000,000, 8/16. C.F.&S. Forms/I. 1237/11.

P.T.O.

Station and Date.

DUPLICATE. Duplicate

MEDICAL HISTORY SHEET.

Surname Barclay *Christian Name* Frederick Lee

Examined { on 25 day of April 1916 / at Lindsay

Birthplace { City or Town Brockville / County Ontario

Apparent age 25 years

Trade or occupation Engineers Asst.

Height 5 Feet 6 Inches.

Weight 138 Lbs.

Chest measurement { Minimum 32½ inches. / Maximum expansion 37½ inches.

Physical development Good

Small-Pox Marks None

Vaccination Marks { Arm Right. None Left. One / Number One

When Vaccinated last Feb. 5th 1916

(*a*) Marks indicating congenital peculiarities or previous disease

(*b*) Slight defects but not sufficient to cause rejection

Approved by J McCullock 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.

Date.	Result.	Vaccinations.
5.2.16.	Nil.	J McCullock M.O.
		M.O.
		M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.
18.4.16	Good	J McCullock M.O.
25.4.16	"	J McCullock M.O.
2.5.16	"	J McCullock M.O.

Enlisted on 25 *day of* April 1916 *at* Lindsay

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	109th Bn. C.E.F.	Lieut		25.4.16
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.

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

M. F. B. 313.

400M.—1-16.
H. Q. 1772-39-439.

Surname Barclay Christian Name Frederick Geo.

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				

Original

MEDICAL HISTORY SHEET.

Surname Barclay *Christian Name* Frederick Lee

Examined { on 25 day of April 1916
at Lindsay

Birthplace { City or Town Brockville
County Ontario

Apparent age 25 years.

Trade or occupation Engineers Asst.

Height 5 Feet 6 Inches.

Weight 138 Lbs.

Chest measurement { Minimum 32½ inches.
Maximum expansion 37½ inches.

Physical development Good

Small-Pox Marks None

Vaccination Marks { Arm Right. Left.
Number 7.

When Vaccinated last Feb. 5th 1916

(*a*) Marks indicating congenital peculiarities or previous disease

None

(*b*) Slight defects but not sufficient to cause rejection

None

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

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.
5.2.16	Vit	J McCulloch M.O.
		M.O.
		M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.
18.4.16	Good	J McCulloch M.O.
28.4.16	"	J McCulloch M.O.
2.5.16	"	J McCulloch M.O.

Enlisted on 25 *day of* April 1916 *at* Lindsay

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	109th Bn. C.E.F.	Lieut.		25.4.16
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
Transferred to R.F.C.			

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 Barclay Christian Name Ludwick Ric

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				

CONFIDENTIAL.

Army Form A. 45.

PROCEEDINGS OF A MEDICAL BOARD

assembled at Bramshott on 11/9/16

by order of A.D.M.S. Canadians

for the purpose of examining and reporting upon the present state of health of

(Rank and Name) Lieut F. L. Barclay (Corps) 109th C.E.F.

Age 25 Service 13/12 Disability no disability

Date of commencement of leave granted for present disability not applicable

Date on which placed on half-pay for present disability not applicable

The Board having assembled pursuant to order, and having read the instructions on the back of the form, proceed to examine the above-named officer and find that

his vision (including normal colour perception) is normal. That he does not suffer from deafness or any other form of middle ear disease. That his respiratory circulatory & nervous systems are normal. That he is in other respects physically fit for general service

Height 5 ft. 8 in. } Specialists report
Weight 155 lbs. } on sight & hearing attached

The opinion of the Board upon the questions herein is as follows:—

(1.) *a.* Is the officer fit for "General Service"? yes

b. If not so fit, how long is he likely to be unfit? not applicable.

(2.) *a. If unfit for General Service, is he fit for service at home?* not applicable.

b. If not so fit, how long is he likely to be unfit for service at home? not applicable

c. If unfit for General Service at home, is he fit for light duty at home? not applicable

d. If not so fit, how long is he likely to be unfit for light duty at home? not applicable

(3.) Was the disability contracted in the service? not applicable

(4.) Was it contracted under circumstances over which he had no control? not applicable

(5.) Was it caused by military service? not applicable

(6.) If caused by military service, to what specific conditions is it attributed? not applicable

(7.) If the disability was not caused by military service, was it aggravated by it? not applicable

Bramshott Camp, Hants.

11 SEP 1916

APPROVED

C. Young

Signatures { R. V. Stewart Maj — President. / H. Carruthers Maj / F. L. Peacham Capt } Members.

I concur in the findings of the Board of Medical Officers here recorded.

V. Bracken Captain, C.A.M.C. For D.M.S. Canadian Contingents.

11 SEP 1916

(5725.) W16789/M2 0. 200M. 2/16. C. P., Ltd. Forms A.45/25

Canadian Troops, Bramshott Camp.

Instructions.

1. On the occasion of an Officer's first appearance before a Medical Board for his present disability, the circumstances under which the disability was contracted will be fully detailed; whenever possible a statement of the case by his medical attendant will also be attached.

2. In recording the proceedings of subsequent Boards, the progress of the individual since his last appearance will be clearly and concisely stated so as to ensure a continuous medical history of the case being available.

3. Enteric Fever, Dysentery, Malaria, etc., contracted when on service abroad, in countries where there is a special liability to the disease, are to be regarded as caused by military service.

Army Form A. 45.

CONFIDENTIAL.

PROCEEDINGS OF A MEDICAL BOARD

assembled at Bramshott on 11-9-16

by order of A.D.M.S., Canadians

for the purpose of examining and reporting upon the present state of health of

(Rank and Name) Lieut. F.L. Barclay (Corps) 109th Batt'n C.E.F.

Age 25 Service 13/12 Disability No disability

Date of commencement of leave granted for present disability Not applicable

Date on which placed on half-pay for present disability Not applicable

The Board having assembled pursuant to order, and having read the instructions on the back of the form, proceed to examine the above-named officer and find that

his vision(including normal colour perception) is normal. That he does not suffer from deafness or any other form of middle ear disease

That his respiratory, circulatory, and nervous systems are normal

That he is in other respects ~~fit~~ physically fit for general service

Height 5 ft 8ins. Weight 155 lbs

Specialists' reports on sight and hearing attached

The opinion of the Board upon the questions herein is as follows:—

(1.) *a.* Is the officer fit for "General Service"? Yes

b. If not so fit, how long is he likely to be unfit? Not applicable

(2.) *a. If unfit for General Service, is he fit for service at home?* Not applicable

b. If not so fit, how long is he likely to be unfit for service at home? Not applicable

c. If unfit for General Service at home, is he fit for light duty at home? Not aplicable

d. If not so fit, how long is he likely to be unfit for light duty at home? Not abblicable

(3.) Was the disability contracted in the service? Not applicable

(4.) Was it contracted under circumstances over which he had no control? Not aplicable

(5.) Was it caused by military service? Not applicable

(6.) If caused by military service, to what specific conditions is it attributed? Not applicable

(7.) If the disability was not caused by military service, was it aggravated by it? Not applicable

Signatures

P.D. Stewart Major — President.

J.S. Carruthers Major — Members.

H. MacLaren Capt — Members.

(5725.) W16789/M2 0. 200M. 2/16. C. P., Ltd. Forms A.45 25

[P.T.O.

Instructions.

1. On the occasion of an Officer's first appearance before a Medical Board for his present disability, the circumstances under which the disability was contracted will be fully detailed; whenever possible a statement of the case by his medical attendant will also be attached.

2. In recording the proceedings of subsequent Boards, the progress of the individual since his last appearance will be clearly and concisely stated so as to ensure a continuous medical history of the case being available.

3. Enteric Fever, Dysentery, Malaria, etc., contracted when on service abroad, in countries where there is a special liability to the disease, are to be regarded as caused by military service.

150

ET.

Rank and Name BARCLAY, Frederick Lee Lieut.

Regimental No.

Unit 109th Battn.

Date of enlistment

Place of birth Brockville. Ontario. Canada.

Married (Yes or No) No.

If in Permanent Force

Name and Address of Next-of-Kin Mother.
also notify Mrs Geo Barclay.
" " "
~~Brockville. Ontario. Canada.~~
N. of K. Mrs Marie Josephine Barclay (Wife)
C/o Bank of Montreal
Waterloo Place London
(9-B-)

Date and place of discharge

Reason for discharge

Character on discharge

109 Bn

54 Bunbury Rd
Kings Norton
Birmingham

LEFT CANADA 23-7-16

25-8-16

Date		of promotions, reductions, casualties, etc., during active The authority to be quoted in each case.	Place	Date	REMARKS Taken from Official Documents
		Proceeded to Reading for	1st CENT ONT.		
31. 10. 16.	109. Bn.	attachment to Royal Flying Corps	Square Discharged	29.10.16 4-4-17	P. Fad. 305. C.L. 646
8-3-17	C.R.O.	Admitted Royal Flying Corps Hospital 37 Bryanston		2-3-17	C.L. 618. Dev. Nasal Septum
12-4-17.	C.R.O.	Adm Prince of Wales. Hp, Marylebone.		7-4-17.	C.L. 646
24-4-17	CRO	Adm. 2nd Gen Gen Hosp Denmark Hill		16.4.17	C.L. 656. Nasal Obstruction
25/4/17	W.O.	Med boarded & found unfit for any service for one month Requires local in No 4. Gen. Hosp.		16.4.17	121-B-1795 A.C. 3a R.L. 9.B-827.
			Discharged 4th Gen. Hosp.	7.5.17	C.L. 677. Nasal Ob
6/6/17	W.O.	Medically Boarded & Found fit for Gen. Service with 2 weeks leave		18.5.17.	121-B-1795 R.L. 9-B-827.
		from 1st Cent Ont Regt.			
13 8.17	H.Q. C.E.F.	Trans. to the 1st C.O. Regt. & posted to Reg. Depot		21.5.17	R.O. 2238
15.2.18	W.O.	To be Flying Officer		7.1.18	London Gazette 30526.
19.2.18	W.O.	Seconded for duty with R.F.C.		7.1.18	London Gazette 30532
2.4.19	W.O.	Ceases to be seconded for duty with R.A.F.		18.3.19	L.G. 31268.
		Ceases to be Secd to R.A.F.		18.3.19	

A.F.B. 109. 11 MAY 1917

A.F.B. 109. 17 SEP. 1917

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					
7.4.19	CWO.	Retired in British Isles.		22.3.19	Lon. Gaz 31278 AL.515.	
13.5.19.	"	Relinquishes Commission on ceasing to be Employed with R.A.F.		18.3.19.	L. G. 31336.	

13961

CERTIFIED CORRECT
11 MAY 1917
CANADIAN RECORD OFFICE

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

B-0-119

R.7.C.

M. F. W. 54. (A. F. B. 103.)
250M.—1-16.
H. Q. 1772-39-920.

Casualty Form—Active Service.

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

Regimental No. ..... Rank Lieut Name Barclay Frederick Lee
C. E. F.

Enlisted (a) ..... Terms of Service (a) ..... Service reckons from (a) 23-7-16

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) .....

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36. or other official documents.
Date	From whom received				
		Embarked Canada	Halifax	24.7.16	
		Disembarked England	Liverpool	31.7.16	
		attached R F. Corps	Reading	29/10/16	G.O. Part II No 305. 31/10/16 Lt. LeCrand Capt A/Adj. for O. C. 109th Overseas Battalion, C. E. F.
13.5.17	Hq C E F.	Transf to 1st C.O Regt & posted to R. Dep.		21.5.17	RO 2238
					MAJOR, FOR O. i/c RECORDS, C.E.F.
2.2.9.17	1st C.O.R.D.	T.O.S. 1st C.O.R.D. & detached to R F C auth RO 2238	West Sandling	21.5.17	Pt II D.O. No. 197.

(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.

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				
15.2.18	W.O.	To be flying Officer		7.1.18	London Gazette
5.3.18	1st C.O.R.D.	Seconded for duty with RFC Auth L.G. 19.2.18	~~West Sandling~~ Witley	7.1.18	Pt. II D.O. No. 62
					H L Cleverley Capt Adjt.
			1/W/ Crook	~~22 Jan 17~~ Feb 17	for O. C. 1st C. O. R. D.
			1/W/ Crook	~~Oct 17~~ 22 Jun 17	

Original not available

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

M. F. W. 54. (A. F. B. 103.)
350M.—5-16
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps 21st Bn.

Regimental No. 59035 Rank Pte Name Barclay. Fred. Lee.
C. E. F.

Enlisted (a) 9-11-14 Terms of Service (a) Dafw. Service reckons from (a) 9-11-14

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				
4-5-15	21st Bn.	S.O.S. Discharged. "Medically Unfit"	Kingston	5.5.15	D.O. 146

Capt for Dofte

(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. K

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				

Form R.1.51

Extract from letter regarding
next-of-kin of the undermentioned Officer

The next-of-kin of Lieut.F.L.BARCLAY.
1st C.O.R.attd R.F.C.

is changed to Mrs Maxie Josephine Barclay (wife)
c/o Bank of Montreal.
Waterloo Place. LONDON. Eng.

Authority letter dated 9-2-18.

from Lieut.Barclay.

on file R.L. 9-B-827

Extracted by 9

Form P. 812A.
7862 2m. 18/2/19 D570

War Service Gratuity

CR. FILE NO. 603

~~ASSIGNED PAY~~ and/or SEPARATION ALLOWANCE

Payable to Barclay, Fredk Lee # 35

Address ~~18 Bredton Hill, West Hampstead.~~
54 Bunbury Rd, Kings Norton

Name Dependent Mrs. M. J. Barclay
30 Lymington Rd. West Hampstead.

From Canada: No. ..... Rank ..... Unit .....

Rank	Authority	Unit

ASSIGNED PAY

Authority Final Payment to Conveyance Birmingham Gtm
Paid to Conveyance Northfield - Birmingham 55 6/8/19

Dol. ..... Effect .....
" ..... "
" ..... "
" ..... "

Month		Cheque No.	~~Assigned Pay~~ Gratuity			~~Amount Separation Allce.~~ Payments			~~Total A.P. and S.A.~~ Bal Due			✓	REMARKS
~~DEC.~~	1919												
~~JAN.~~	Mar 24	1222				8	4	4					Sep All
~~FEB.~~	" 24	1223				18	9	10	26	14	2	✓	Gratuity
MARCH	May 29		94	6	3	✓			67	12	1		
APRIL	" 29		41	1	11	✓			108	14	0		
MAY	— 30	20867				18	9	10					2 Inst.
JUNE	— 30	20868				8	4	4					2 " SA
JULY	— 30	20865				18	9	10					3 "
AUG.	— 30	20866				8	4	4	63	5	8		3 " "
SEPT.	" 31	20221				15	2	6	40	3	2		Dr Bal. 73 6/1
OCT.	June 26	33500				21	17	2					Grats 4 & 5 Instal less £15. 2. 6 Dr
NOV.	26	39740				8	4	4	10	1	8		
DEC.	July 28	57612	135	8	2	135	8	2					Final Grat.
JAN.	" 28	57613				1	17	1					Final S/A Grat.
FEB.						8	4	7					
MAR.			135	8	2	135	8	2					Paid in full.
APRIL	July 31	Grat	18	9	10	✓							Under G.R. 1 Month Grat.
MAY	31	"	8	4	4	✓							" " " "
JUNE	Aug 5	57429				18	9	10					
JULY	5	57430				8	4	4					
AUG.			26	14	2	26	14	2					

Form P. 812
n. 20/12/17

1

C.R. FILE NO. 960

ASSIGNED PAY *and/or* SEPARATION ALLOWANCE

Credit a/c

Payable to Mrs. Maxie Josephine BARCLAY (wife)

Address Bank of Montreal,
9, Waterloo Place, S.W.1.

Name BARCLAY, F L.

From Canada: No. ..... *Rank* ..... *Unit* 109 Bn

Rank	Authority	Unit
Lieut.		R.F.C.

ASSIGNED PAY

Authority ..... *Dol.* ..... *Effect* .....
" ..... " .....
" ..... " .....
" ..... " .....

Month	Cheque No.	Assigned Pay	Amount Separation Allce.	Total A.P. and S.A.	REMARKS
JAN. 191					M.C produced 29-9-17
FEB.					Married 11-8-17.
MARCH					Appt. made 29-9-17
APRIL					Pay Sh from 11-8-17
MAY					
JUNE					
JULY					
AUG.					
SEPT. iss. in Oct.	22066		50	50	
OCT.	22054		30	30	
NOV.	28500		30	30	
DEC.	31450		30	30	
JAN.	36784		30	30	
FEB.	995	-	30 -	30	£6.3.4
MARCH	3245		30	30	
APRIL	2179		30	30	
MAY	2498		30	30	
JUNE	5849		30	30	
JULY	9626		30	30	
AUG.	11993		30	30	
			380		

Name Barclay, F. L. Rank Lieut

Unit

Month	Cheque No.	Assigned Pay	Separation Allowance	Total A.P. and S.A.	
Forward			380		
SEPT.	12200	-	30	30	
OCT.	17284		30	30	
NOV.	19948		30	30	
DEC.	20197		40	40	Tady
JAN. 1919	23100		40	40	
FEB.	25652		40	40	
MARCH	28116		40		Pd 8/3/19 Retired 33/3/19.
APRIL					
MAY					
JUNE					
JULY					
AUG.					
SEPT.					
OCT.					
NOV.					
DEC.					
JAN. 1920					
FEB.					
MARCH					
APRIL					
MAY					
JUNE					
JULY					
AUG.					
SEPT.					
OCT.					
NOV.					
DEC.					

129
9
11.61

W. Sy. Branch advised 3/4/19
SA o/pd 33-31/3/19 - $11.61

Recovered by W.P.O. Br and deposited Bofm 15/4/19 F.

Barclay. F. L.

Lieut. 109th. Bn. att. RFC.

Royal Fly. Corps.Hosp.37 BryanstonSq.2-3-17.
Prince of Wales Hosp. Marylebone.N.W. 7-4-17.
4th London Gen Denmark Hill 16-4-17

Dev. Nasal septum.

N.Y.D.(Q).

Nasal Obstruction

Discharged:-. 4-4-17.
do. 7-5-17

C.L. 8-3-17. 618.2.
12-4-17. 646-4.
24-4-17 656-2.
17-5-17 676-2.

A.M.D. 2 DEPT.

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

Surname	Christian Name	Reg. No.
BARCLEY.	F. L.	10-B-880.

Rank	Unit
Lieut.	109th Battn.

MEDICAL BOARD held at	Date	Serial No.
(1) Bramshott.	11-9-16.	

Other Medical Boards at	Date	Serial No.
(2)		
(3)		
(4)		
(5)		

Condition found by Board

(No disability).

Disposition Recommended

(1) Fit for General Service.

(2)

(3)

(4)

(5)

PENSIONS & CLAIMS BOARD held at Date .....

Disposition

Remarks

Indicate by a P.T.O. if continued on other side.

H. W. & V., Ld.—3-94-15.

5

W17017 M1906 120,000 3.17 B.E.B. Forms/W3219/3.

Command Depot Treatment Card. OFFICERS.

Army Form W. 3219.

Name F.L. Barclay. Rank Lieut. Regt. No. Unit R.F.C. Can. Inf Date 22-8-17.

Sent by Cottage Hospital From Swaffham. Date 17.8.17. 21.6.17 to

Diagnosis Adductor muscles left thigh torn + left ribs badly bruised

Case History and Condition on Admission With Haemoptysis

Result of fall with aeroplane (60 feet). Scar in thigh healed but weakening of leg, knee + ankle (left) also bruised + ankle especially troubles him in the morning.

Some thickening of tissues round left knee.

Age. 26. yrs.

Service. 2½. -

How disposed of by Medical Board.

Date 27. Sep - 1917.

Condition on Discharge Fit for light duty at home.

Treatment Ordered Gr. VI. Massage + physiotherapy. 31/8/17 21/9/17

21 SEP 1917

Notes on Examination and Treatment

7.9.17. Knee has been giving some trouble — otherwise improving well

14.9.17. Very much improved. Carry on in Gr. VI on a/c massage.

For light duty by Medical Board.

27 SEP 1917

Colley Bourdon
Capt & Adjt
RAMC

28 SEP Filed

Place

M.O. in Charge.

14 SEP 1917
21 SEP 1917

COMMAND DEPOT
S M O
22 AUG. 1917
Hol. No.
THETFORD

No. 35 RANK Pte. NAME Barclay F. L.

T. O. S. UNIT 21st Battalion (2nd O/S. Contingent) M. D. 3.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1914	1914			
Nov. 11	Nov. 30	✓		
	Dec.	✓		
1915.	Jan. 1915	✓		
	Feb.	✓		
	Mar.	✓		
	Apr.	✓		
May 1	May 4	O. S.	S. O. S. M. R.	D. O. ? 4-5-15.
			a/c. carried forward. O. S.	

UNIT SAILED
MAY 20 1915

No. Rank Lieut. Name Barclay. F. L.

T. O. S. Unit 88th. Battalion.

M. D. 3

Paid From	Paid To	Sig or Rec't	Promotions, Transfers, Discharges, Etc.	
			Particulars	Authority
1915 Oct. 18	1915. Oct. 31	✓	Att. for duty & Inst.	D. O. 42. 22-11-15.
Nov 1.	Nov 22	✓	Transfered to 109th. 22-11-15	D. O. 68. 22-11-15.

No. | Rank: Lieut. | Name: Barclay. F. L.

T. O. S. | Unit: 109th Battalion.

Transfd. from 89th Bn.
23-11-15. A.O. 3. 23-11-15.

M. D. 3

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915 Nov 23	1915. Nov. 30	✓		
	Dec.	✓		
1916	Jan. 1916	✓		
	Feb.	✓		
	Mar.	✓		
	April	✓		
	May.	✓		
	June	✓		
	July.	✓		

UNIT SAILED
JUL 23 1916

Form A.G. 10425.

Name Barclay Y.L. File No. S.B. 800

Regt. No. Rank Temp. Lt.

Unit 1st C.O.R.

Sent to W.O. 11 FEB 1918 List No. 341

Action taken Recd to R.A.F.

Effective 7.1.18

Gazetted date 19-2-18. No. 30532 Page 2203

G.O.C. Orders No. Date

1st C.O.R.

Lt. — Ceases to be sec'd to R.A.F 18.3.19 1512

to WO 29.3.19. List 514. L.G 31268. P 4362. a/2.4.1919.

1st C.O.R.

Lieut — Retires in the British Isles. 22.3.1919.

List 515 to WO 31/3/19 L.G 31278. P 4561. a/7.4.1919

Checked by Date 1530

REGT'L NO

H. Q. FILE NO. 649-

NAME Barclay D. L.

RANK AND CORPS Lieut. 109th Bn. att. R. F. C.

FOLLOWS NO.

FOLLOWS

CABLE	
No.	Date

NATURE OF CASUALTY

L. L. 12767—M. & D. 7390.

M. F. W. 42—50M.—12-16.
H. Q. 1772-39-893.

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
618 (2)	Royal Flying Corps. Hosp. 37 Bryanston Square. W.	2-3-17	Dev. Nasal Septum
646 (4)	Discharged	4-4-17	
646 (4)	Bruce Hd alias Marylebone N.W.	7-4-17	" " "
65-6 (2)	To 4th London Gen. Denmark Hill S.E.	16-4-17	Nasal Obstruction
676	Disch	7-8-17	" "

Form R. 149.
106—250m—7/2/17.

Name BARCLAY *Rank* LIEUT. *Reg. No.*
Frederick Lee.
Unit 109th. Bn. att.R.F.C.
Next of Kin Canada

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
2.3.17.	R.F.C.Hosp. /	37 Bryanston, Sq.W.		618		
			Dev. nasal Septum			
4-4-17	Discharged			646		
7-4-17	Prince of Wales Hos.	Marylebone		646		
16-4-17	H th Con Gen Hos.	S E	Nasal Obs	656		
7-5-17	Discharged			676		

Date		Movement	Place	Casualty	List No.	Notified N/K O.		W.O. Lis

Born by Air Min 332-91-36
Dom Mil

Number ..... Rank LIEUT.

Surname BARCLAY.

Christian Name FREDERICK LEE.

Units ..... Theatre of War ENG.

Date of Service 23.7.16. 18.3.19.

Seed to R.F.C. 7.1.18. L.G. 30532. d. 19.2.18.
ceases to be Seed 18.3.19. L.G. 31268. d. 2.4.19.

Remarks .....

1st C.O.R. Air Force. Roll # 2 Page 25.

Latest Address A.M. 25236 1/R.O.S. Vol 10-2

.....

Roll No A. Page 5036.

35 Kingswood Rd
Moseley
Birmingham
England

P—15.

ASSIGNED PAY.

Beneficiary

Address

Amount. $

Separation Allowance issued. Yes or No.....

UNIT. NAME OF: ~~109th Bn.~~ ~~Supply Depot~~ R.F.C.

DATE

AUTHORITY

RANK. Lieut.

~~Incep.~~ DATE: 31-7-16.

AUTHORITY: From Canada D.R.O. 1225 C.J.D. d/7-8-16.

NAME. Name Barclay, Initials F.L. Bank of Montreal.

DATE 1916	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS.
Aug 16	Bank			40 60				
19	Pay Aug mess from 31/7/16		112 60					
	Ex bal from Canada		40 60					
25	Bank	7408		112 60		0		
Sept 15	Pay Sept R		108					
23	Bank			108		0		
Oct 21	Pay Oct R		111 60					
26	Bank			111 60		0		
Nov 24	Pay Nov R.		108					
27	Bank			108		0		
Dec 14	Pay Dec R		111 60					
16	Bank			111 60		0		
1917 Jan 20	Pay Jan.		111 60					
23	Bank	19288		111 60		0	~~Transfd. fr. No. 14 No. 11. Feb.~~	
Feb 15	Feb Pay		100 80					
20	Bank	21931		100 80		0		
Mar. 12	Pay Mar		111 60					
23	Bank.	24836		111 60		0		

FORM P.15
2227—10M—1/1/17

ASSIGNED PAY.	UNIT. NAME OF	DATE	AUTHORITY	RANK.	DATE	AUTHORITY	NAME.
Beneficiary	R. F. C.		Pay $2.50 Fare .60 Mess 1.00	Lieut	31.7.16	Fr. Can. D.R.O. #1225 C.T.D d/7/16	Name Barclay
Address	(late 109 Bn.)						Initials F. L.
							Bank of Montreal
Amount. $							
Separation Allowance issued. Yes or No.....							

1917-18

DATE	PARTICULARS		CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS
Apr 20	Sly. Pay. 30 10/16 - 31 3/17	Cash	1676		76 50				
21	Apr Pay (R)			108					
23	Sly. Pay 30 10/16 - 30 4/17 ($76.50 / $15.40)	V° 1250		91 50					
30		Bank	3017		123				
May 21	Adv P&A £5.	Bank	4716		24 33			Dr 14-5	2/5/17
22	May Pay R			127 10					
26		Bank	6029		102 77				
June 2	Adv P&A £5	"	6155		24 33				
20	June Pay R			123					
26		Bank	7999		98 67				
July 20	July Pay R			127 10					
26		Bank	10271		127 10				
Aug 17	Adv on ap P&A £5	"	15338		24 33				
20	Pay R			127 10					
26		Bank	17361		102 77				
Sept 21	Pay R			123					
24		Bank	21814		123				
17	Draw Allce	17 8/17.	5399					£10/-	2 43
"	" "	14 8/17.	5400					7/-	1 70
Octr 5	Pay R			127 10					
12	Adv on ap P&A £10	Bank	24093		48 67				
22		Bank	26125		78 43				
10	Rations 4-22 6/17.		6948					£1-13-3	8 09
30	Sick leave Allce 8-31 8/17.		14179					2-9-4	12 00
31	" " " 18 9/17 - 18 10/17.		7934					2-3-2	10 50

Carried Forward Overleaf

FORM P.15
2227—10M—1/1/17

ASSIGNED PAY.	UNIT. NAME OF	DATE	AUTHORITY	RANK.	DATE	AUTHORITY	NAME.
Beneficiary	R.F.C.		~~Rs Pay 2.50 Flying 1.60 Mess 1.00 4.10~~	Lieut	31/7/16	Fr. Can. DRO	Name Barclay
Address			Pay $ 6 pd.	Flying Officer	7/18.	#1225 C.T.D.	Initials F.C.
						d/7 8/16	Bank of Montreal.
Amount. $						kg 2042. 15 1/18.	
Separation Allowance issued. Yes ~~or No~~	England $ 30.00						

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS
Nov 17	Pay Nov. R		123					
19	Rations 18-31 10/17.	8983.					£1-4-6. 5 96	
22	Bank	30733		123		0		
Dec 10	Pay R. Dec		127 10					
18	Bank	35096		127 10		0		
Jany 21	Pay R. Jany		127 10					
	Bank	39459		127 10		0		
Feb 15	Feby Pay R		114 80					
20	Bank			114 80		0		
25	Adj to Flying Officers rates 7/18-28/2/18.	£1086	100 70					
	Do Cash	41089 ~~40990~~		100 70		0		
Mch	Mch Pay R.		186					
23	Bank	41516		186		0		

FORM P. 15
5986—25M—19/1/17

5

ASSIGNED PAY.	UNIT. NAME OF	RATES	AUTHORITY	RANK.	DATE	AUTHORITY	NAME.
Beneficiary	109th Bn	Pay	#6	Pd. Lieut			Name Barclay
Address	att R F C.			Flying Officer	7/18	Group, 15 2/18.	Initials F. L.
							Bank of Montreal
Amount. $							
Separation Allowance issued. Yes ~~or No~~.....	England #30.			Add. Outfit allce 1 8/8.			

DATE 1918	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS
	Resigned Commn in England 22 3/19 MS1a 8-B-800 a/c-24 3/19							
Apl 20	April Pay R		180					
23	Bank	1145		180		0		
May 13	Pay May R.		186-					
27	Bank	2645		186-		0		
June 13	Pay June R.		180-					
25	Bank	4144		180-		0		
July 17	Pay July R.		186-					
25	Bank	5607		186-		0		
Aug 20	Pay Aug R.		186-					
24	Bank	7235		186-		0		
Sept	Pay Sept R.		180-					
26	Bank	9162		180-		0		
Oct.	Pay Oct. R.		186-					
22	Bank	10393		186-		0		
Nov.	Pay Nov. R.		180-					
	Add. Outfit allce 1 8/8. V.		100-					
26	Bank			280-		0		
Dec.	Pay Dec. R.		186-					
	Bank	13770		186-		0		
1919 Jan 16	Adv Jan P & A	Bank	14940	4867				
23	Jan Pay R		186					
27	Bank	15528		137 33		0		
Feb 27	Pay R.		168					
	Bank			168		0		
Mar 6	Adv. Mar. P & A	Bank	17610	132-		4867		
20	Pay (R) 22 days @ 6.00	Bank	18622	132-			Dr. 54-	No monetary
21			Forward			137 33		

FORM P. 15
5986—25M—19/1/17

ASSIGNED PAY.	UNIT. NAME OF	DATE	AUTHORITY	RANK.	DATE	AUTHORITY	NAME.
Beneficiary	10 q Bn	Pay 6 oos PA		Lieut			Name Barclay
Address	Ant Rat			F.O.	7/1/18	G.1 2042 15/1/18	Initials F.L.
				Lieut.		Ceases to be Lieut RAF 18/3/19 hrs fr A.G. on file 26158	Bank of Montreal

Amount. $

Separation Allowance issued. Yes or No.....

Resigned Commn in England 22/3/19 Sawer

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS
1919 Dec 31	Brought Forward					Dr. 54 00	Demand Pay.	
Apl. 17	Opaid diff F.O. rate 19.22 3/19 4 days @ 2.00 hrs fr A.G. on file. No 868			8 00		Dr. 62 00	Transd to Ho to Ho 12	7/4/19
June 19	Refund of Dr. Bal recov'd from W.S.G. £15-2-6. hist 17 June No 285		73 61			Cr. 11 61		
	W. S. G. Clearance Certificate issued 24/4/19 Showing Dr Bal to be recovered - P.A. 62 00 S.A. 11.61 Total $73 61							
July 11	Ch. favor Officers S.A. & P.A. Opd S.A. 23-31 3/19 Bank			11 61		—		

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.

Concurs.

Note
Medical documents (A.F.A.-45) states.
Left testicle removed at C.C.S.
Rheumatism
and Wd. B.P.C.

19. Is the invalid fit for

(a) General service,	(Category A)	(Yes or No.)	No. six months
(b) Service abroad, not general service,	(" B)	(Yes or No.)	No - three months
(c) Home service (~~Canada only~~),	(" C)	(Yes or No.)	C 1.
(d) Temporarily unfit.	(" D)	(Yes or No.)	N.A.
(e) Unfit for service in Categories A, B and C	(" E)	(Yes or No.)	

20. It is certified that the invalid
(a) Does require treatment. (Give the nature of the condition and of the treatment required and its probable duration.)

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

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

Boarded under policy of H.Q. C.R.O. 5223 of 21-1-19.
and M.S. 1a 8-B.800 of 22-3-19.

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.

J. H. T. Betts, Major, C.A.M.C. President.

Place 13 Berners St W.1.

Date March 22nd 1919.

Frederick Upshur
Maurice.
} 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 .....

Date .....
} Members

APPROVED BY

Assistant Director of Medical Services.

Date .....

APPROVED BY

Director-General of Medical Services.

Date .....

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 London Eng. Date 22. 3. 19.

1. 1 (a) Unit 1st C.O.R. (b) Regimental No. ..... (c) Rank Pte.

(d) Surname BARCLAY (e) Christian name FREDERICK LEE

(f) Home address 30 Leamington Rd. W. Hampstead

(g) Next of Kin Mrs M. J. Barclay (h) Relationship Wife

(i) Address of Next of Kin As above

2. Age last birthday 28 years Date of birth Mar 8th 1890.

3. Enlistment, or Appointment (if an Officer) (a) Place Kingston Ont. (b) Date Oct 28th 1914

4. Personal description:

(a) Height 5 ft 8 ins (b) Weight 128 lbs (stripped) (c) Complexion Medium

(d) Colour of hair Greyish (e) Colour of eyes Blue (f) Identification marks, Scars, etc. ~~L 2~~

Transverse Scar 3" upper L thigh inner surface

5. Former trade or occupation Civil Engineer

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
	4	176.

	Statement Periods From	To
Canada	Oct 8th 1914	July 16th 1916
England	July 16th 1916	Mar 22nd 1919
France or other theatres of War		

7. Original disease, or injury (a) D.A.H.
(b) Injury to L. thigh (aeroplane crash while on duty)

(a) Date of origin (a) uncertain (Oct 1917?) (b) June 22 1917. (b) Place of origin (a & b) England.

(c) Cause (a) Rheumatism or crash (?)
(b) aeroplane crash

M. F. B. 227.

800M.—8-18.
A772-30-117.

ent 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.)

(a) (D.A.H.) Weakness, giddyness and cardiac irregularity on exertion. (b) (Injury to left thigh) Weakness of L. leg & thigh & aching pain if walks more than 2 miles.

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.)

Patient well nurished - Weight normal.

(a) Objective. Heart dullness to infile line, 4 inches from mid line. At rest pulse 84 and fairly regular. Faint systolic murmur, heard at base, probably cardio-respiratory. After moderate exercise (chair exercise one minute) Pulse 100, and marked irregularity but no extra systoles. ~~With~~ After exercise, a systolic murmur is heard at apex and basal murmur is heard more clearly. Lungs & abdomen negative. Subjective cardiac irregularity.

(b) Transverse scar 3 inches upper L thigh inner surface. No atrophy & no sensory changes. Exam. objectively normal. Subjective Weakness and "aching" of L leg & thigh if walks more than two 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.

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

No medical documents accompanying this officer. He states. Enlisted Oct 8th 1914 in 21st Bn. Inflamatory Rheumatism March 1915. Discharged from army as unfit in June 1915. Reenlisted Aug 8th 1915 still having some joint pains. Joined R.A.F. in Oct 1916. "Crashed" Feb 1917. Broken nose & concussion. Passed G.S. June 1917. Crashed same month. Wounds of L thigh & injury to knee - bruized chest. Passed G.S. Oct 1917 but with flying, developed weakness, giddyness & irregularity of heart, also weakness & loss of control of left leg and thigh. Ever since then Weakness and giddyness on exertion, and "tiredness" and "aching" of L. leg and thigh if walks more than 2 miles.

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).)

Scarlet Fever when a baby. Also measles, mumps and chicken pox during childhood. Typhoid in 1908. Recovery from all of above with no disability.

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

Transverse scar 3" upper L thigh inner surface.

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

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

N.A.

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? (a & b) Six months.

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

(a) Boarded March 1918. Given ground job, and certificate to use motor-bike. (b) Hospital 2 months, & wound dressed until healed - convalescent hospital 2 months with massage

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)

no

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

17. Recommendations: C.1.

Harry J. Wood Major Cam.
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 Frederick Les Barclay 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

F. Les Barclay 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.

C O N C U R.

NOTE. Medical documents (A.F.A.45) states -
Left testicle removed at C.C.S.
R.D.Orok. Asst. M.R. B.P.C.

19. Is the invalid fit for

(*a*) General service,	(Category A)	(Yes or No.)	No 6 months
(*b*) Service abroad, not general service,	(" B)	(Yes or No.)	No 3 months
(*c*) Home service (Canada only),	(" C)	(Yes ~~or No~~.)	C-1.
(*d*) Temporarily unfit.	(" D)	(~~Yes or No~~.)	
(*e*) Unfit for service in Categories A, B and C	(" E)	(~~Yes or No~~.)	

20. It is certified that the invalid
(*a*) Does require treatment. (Give the nature of the condition and of the treatment required and its probable duration.)

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

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

Boarded under policy of H.Q. C.R.O. 5222 of 25.1.19.
and M.S. 1a 8-B.800 of 22.3.19.

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.

J.H.M.Bell, Major, C.A.M.C. *President.*

PLACE 13, Berners St. W.1.

Frederick St. John, Major, C.A.M.C. } Members

DATE March 22nd 1919.

TO BE COMPLETED WHEN TREATMENT IS REFUSED

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

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

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

President

PLACE

} Members

DATE

APPROVED BY — *Assistant Director of Medical Services.* DATE

APPROVED BY — *Director-General of Medical Services.* DATE

MC7

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 London, Eng. DATE 22.3.19.

1. 1 (*a*) Unit 1st C.O.R. (*b*) Regimental No. ---------- (*c*) Rank Lt.

(*d*) Surname B A R C L A Y. (*e*) Christian name FREDERICK LEE.

(*f*) Home address 30 Leamington Road, W.Hampstead.

(*g*) Next of Kin 17 Mrs.M.J.Barclay. (*h*) Relationship Wife.

(*i*) Address of Next of Kin As above.

2. Age last birthday 28 years. Date of birth March 8th 1890.

3. Enlistment, or Appointment (if an Officer) (*a*) Place Kingston, Ont. (*b*) Date Oct.8th 1914

4. Personal description:

(*a*) Height 5ft. 8ins. (*b*) Weight 128 lbs. (stripped) (*c*) Complexion Medium.

(*d*) Colour of hair Greyish (*e*) Colour of eyes Blue. (*f*) Identification marks, Scars, etc.

Transverse scar. 3" upper L.thigh inner surface.

5. Former trade or occupation Civil Engineer.

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
	4	176

Statement.

	Periods From	Periods To
Canada	Oct.8th 1914	July 16th 1916
England	July 16th 1916.	March 22nd 1919
France or other theatres of War		

7. Original disease, or injury (a) D.A.H.
(b) Injury to L.thigh (Aeroplane crash while on duty).

(*a*) Date of origin (a) Uncertain (Oct.1917) (b) June 22nd 1917. (*b*) Place of origin a&b England

(*c*) Cause (a) Rheumatism or crash(?).
(b) Aeroplane crash.

M. F. B. 227.

40UM.—11-18.
1772-39-117.

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.)

(a) (D.A.H.) Weakness, giddyness and cardiac irregularity on exterior
(b) (Injury to left thigh) Weakness of L.leg and thigh and aching pain if walks more than 2 miles.

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.)

Patient well nourished. Weight normal.
(a) Objective Heart dullness to nipple line, 4 inches from mid.line At rest pulse 84 and fairly regular. Faint systolic murmur heard at base, probably cardio respiratory. After moderate exercise (chair exercise one minute.) Pulse 100, and marked irregularity but no extra systoles. After exercise, a systolic murmur is heard at apex and basal murmur is heard more clearly. Lungs and abdomen negative.
Subjective. Cardiac irregularity.
(b) Transverse scar 3 inches upper L.thigh inner surface. No atrophy and no sensory changes. Exam Objectively normal. Subjective weakenss and "aching" of L.leg and thigh if walks more than two 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 Nol Integumentary System No.

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

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

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

No medical documents accompanying this officer. He states enlisted Oct.8th 1914 in 21st Bn Inflamatory Rheumatism March 1915. Re-enlisted Aug.8th 1915 still having some joint pains Joined R.A.F.in Oct. 1916 "Crashed" Feb.1917 Broken nose and concussion Passed G.S. June 1917 Crashed same month. Wounds of L.thigh and injury to knee-bruised knee Passed G.S. Oct.1917 but with flying, developed weakness giddyness and irregularity of heart, also weakness and loss of control of left leg and thigh. Ever since then weakness and giddyness on exertion. And "tiredness" and "aching" of L.leg and thigh if walks more than 2 miles

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).)

Scarlet Fever when a baby. Also measles, mumps and chicken pox during childhood. Typhoid in 1908. Recovery from all of above with no disability.

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

Transverse scar 3" upper L.thigh-inner surface.

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

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

N.A.

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? (a and b)six months.

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

(a)Boarded March 1918, given ground job, and certificate to use motor-bike. (b) Hospital 2 months, and wound dressed until healed. Convalescent Hospital 2 months with massage.

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)

No.

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

17. Recommendations C.1.

Harry C.Wood Major C.A.M.C.
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 Frederick Lee Barclay 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

F.Lee Barclay. Lieut. Rank.
Signature of invalid examined.

(*At Station or Hospital where finally disposed of.*)

Station and Hospital } ..... Arrived from } .....

Date.....

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

Summary of causes of invaliding, or remarks as to remand to Regiment, Station or Depôt.

Date of final Medical Board or decision } .....

Administrative Medical Officer.

Militia Form B. 227.

2m-4-11.
(H. Q. 1772—39—117.

DETAILED MEDICAL HISTORY OF INVALID.

Station

Corps

Regimental No. Rank

Name

Disability

Date

Hospital or Station transferred to for final disposal. }

Date of final Disposal. }

How finally disposed of }

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

X 35 F. L. BARCLAY (60-B-367)

MEDICAL HISTORY OF AN INVALID.

1.—Station. Kingston. Ontario

2.—Regiment or Corps. 21st Battn C.E.F.

3.—Regimental No. and Rank. } 35 private

4.—Name. Fred Lee Barclay

5. Age last Birthday. 22. March 8/15

6.—Enlisted { on Oct 26/15 at Brockville

7.—Former Trade or Occupation. } Tramman

THIRD DIVISIONAL AREA
JUN 15 1915
3.D.44-3-25-7

8.—General remarks on his :—

(*a*) Conduct. good

(*b*) Habits. regular

(*c*) Temperance. yes

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

Date. June 14/15

9.—Service.	Years.	Days.
	PERIODS.	
	From	To
21st Battn C.E.F.	26/10/15	

10.—Disease or Disability. Articular Rheumatism

11.—Date of origin, cause, present condition, and whether the same is the result of service or climate. About Dec 15/14., diplococcus Rheumatism practically recovered; Condition result service and climate.

Has it been aggravated by intemperance, vice or misconduct? no.

Mil. Form B. 227.

2m-4.11.
H. Q. 1772—39—117.

[OVER]

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

✓

13.—In the event of the disability being attributed to exposure on duty, state clearly the nature of such exposure, and whether it was exceptional or otherwise.

Slight previous history of Rheumatism
Disability due to ordinary climatic
and service conditions.

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

✓

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

No.
None.

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

Admitted April 24/15
Treatment, - Rest in bed
Salicylates
Hot Baths
Rheumatic diet.

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

✓

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

yes.

Medical Officer by whom the case is brought forward.

OPINION OF THE MEDICAL BOARD.

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

The board having assembled pursuant to order proceed to examine Pte No. 36. Fwd Lee Barclay 21st Batt. C.E.F. concurs with the above report, find the man unfit for service, because of rheumatic ~~condition~~ tendency, but fully recovered, and recommend that he be discharged at once from the service

Signatures:— J. Sparks Capt AMC *President.*

Station. Kingston Ont — A. J. Keyes Capt AMC

Date. 14/6/15. — Thos Richardson Lieut AMC *Members.*

Approved.

Date 15/6/15 — R Gordine Maj AMC
Administrative Medical Officer.

Date ..... — W Duncan
Director General Medical Services.

[OVER]