REGIMENTAL DOCUMENTS

NAME BREDIN, WILLIAM THOMAS REGT. NO. Lieut UNIT 6th Ran. Ches. HQ. FILE NO. 332-36-17.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
				37566		DEATH
1	ATTESTATION PAPER (M.F.W. 23, 133, or 51)		Pers	7-6-19	Pers – 656 Sw	
2	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)		Field	28-6-19		Category
1	TRAINING HISTORY SHEET (M.F.W. 113)		3rd D.P.	30/6/19	2 709 (Sw)	
	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)		Ret.	16/10/19		
	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
2	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
1	DENTAL HISTORY SHEET (M.F.B. 465)					Category
5	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					Med. Unfit
	MEDICAL EXAMINATION (M.F.W. 129)					
	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
	LAST PAY CERTIFICATE (M.F.W. 44)					
	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					2
	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					4-19
17	A.G. Form 324	1a & D	10			11-19
9	Misc.	Miscellaneous				
1	M.F.W. 2509.					
1	A.F.I. 1238.					
1	C.A.D.C. 5009.					
1	I.S.C. Form 132.					
1	Doc. L. F. 10.					

Ref. Essequibo 5.5.19.

W 2589
100M-11-18
272-39-1377

Unit 109th Batt. C.E.F. Rank Lieut. Name Wm. T. Bredin.

Card. H.a.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? Bredin.

   (b) What are your Christian Names? William Thomas.

2. (a) Where were you born? (State place and country) Toronto, Ontario.

   (b) What is your present address? 4 Glenelg St. Lindsay.

3. What is the date of your birth? October 26th 1881.

4. What is (a) the name of your next-of-kin? Mark Bredin Sr.

   (b) the address of your next-of-kin? 26 De Lisle Ave. Toronto.

   (c) the relationship of your next-of-kin? Father.

5. What is your profession or occupation? Bread Manufacturer.

6. What is your religion? Anglican.

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

8. To what Unit of the Active Militia do you belong? 109th Battalion C.E.F.

9. State particulars of any former Military Service Nil.

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.

W. T. Bredin Lieut. (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. McCullock Capt.
Medical Officer
109th Overseas Battalion C.E.F.
Medical Officer.

*Insert here "fit" or "unfit".

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

ORIGINAL

Original

MEDICAL HISTORY SHEET.

Surname Bredin Christian Name William Thomas

Examined on 25 day of April 1916 at Sudbury

Birthplace City or Town Toronto County Ontario

Apparent age 28 years.

Trade or occupation Bread Manufacturer

Height 5 Feet 5½ Inches.

Weight 130 Lbs.

Chest measurement Minimum 32 inches. Maximum expansion 35 inches.

Physical development Good

Small-Pox Marks None

Vaccination Marks Arm Right. None Left. Two Number Two

When Vaccinated last March 12th 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 109th Overseas Battalion, C. E. F. M.O.

Date	Fit or Unfit	Examined for Re-engagement.
		27 APR 1917 M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date	Result	Vaccinations.
12.3.16	Good	J McCulloch M.O.
		M.O.
		M.O.

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

Enlisted on 25 day of Apl. 1916 at Sudbury

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	109th Bn. C.E.F.	Lieut.		25-4-16.
Transferred to	150th Bn. 6th Educ. Res. Bn.			24-11-17.

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
Witley.	21-1-18.	Syphilis (chronic)	Cat. - one month
Mattoon Scott	14/4/19	Symptoms Relapse V.D.S.	Cat. D. unable to be treated
		~~G.S.W.~~ Injury Right Knee. V.D.S.	Discharge as medically unfit. To attend O.C.R. for treatment of V.D.S. Harry Brown Capt. for Press Cont. B.

Dominion Military Orthopaedic Hospital DO..... SEP 10 1919 Christie St., Toronto

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.

150M.—8-15.
H. Q. 1772-39-439.

CANADIAN

Surname Christian Name

Brudin William Hodder

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital. Day	Month	Year	Dates of Discharge from Hospital. Day	Month	Year	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.
13 C&H Hastings	6.9.18	6	9	18	28	12	18	V.D.S (42)	114	Relapse. had primary sore Aug 16. Was treated as out patient at Aldershott. had 7 or 8 606 + Hgi followed by Hg. internally (pills) On leave from France rupial ulcers appeared on legs + arms. B.T. Rochester Row Pos. first weeks in August 1918 Late secondaries Rupial ulcers on legs + arms, cervical glands enlarged. See N.A.B 33 + 9 Hgi with rubs ~~with~~ and K.I. First N.A.B 14-9-18. Last N.A.B 14-12-18. Last Wassermann 16/12/18 Pos ++	~~W. Wardrumer Capt~~ W.K. Dunn Capt Chief
14 Gen Hosp Eastbourne	1	3	19	3	3	19	Contusion Knee Left	3	Transferred 13 Cdn. Gen Hp.	~~C.H. Young~~ Capt.
13 C&H Hastings	3	3	19	2	4	19	do do	31	Slowly improving Transfer to Middle Bates	R Donnelly
C.C.D.C. Knutsford Bath	2	4	19	5	5	19	do	33	do Port of Embarkation	J.H. Dunn Capt R.A.M.C.
							do	11	Condition unchanged	R Thorogood Capt
St. Andrews Military Hospital	18	5	19	17	6	19	do	30	Condition gradually improved.	R.D. Mantlemie Capt. Cadre.
D.O.H	17	6	19				do.			J. L. Robinson Capt

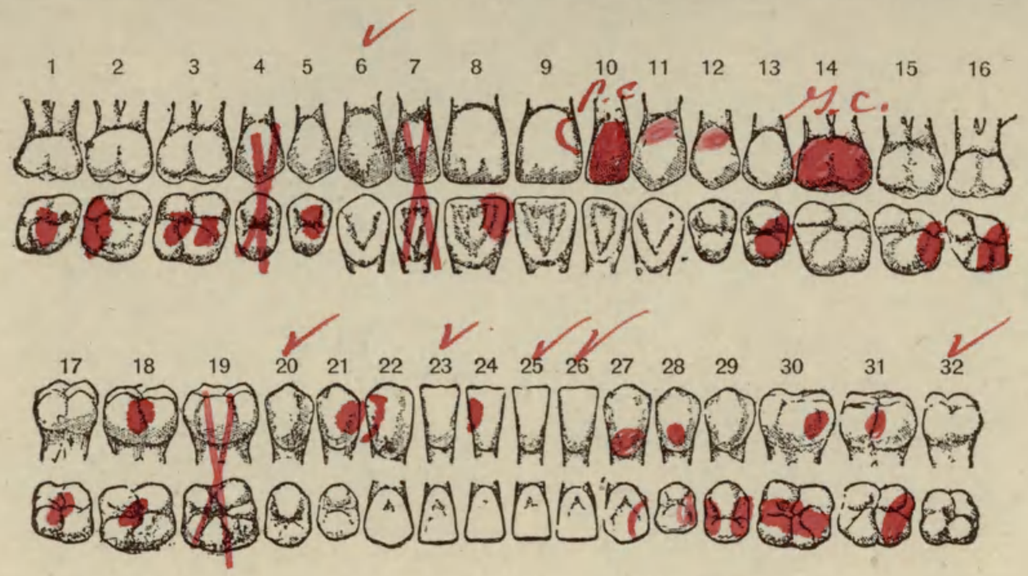
DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

DISTRICT .....

NAME OF SOLDIER William Thomas Bracken

REGIMENT 21st Batt. RANK Lieut. No. .....



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																							
June 18/19. Examination																							I am having work done outside H. T. Bradin
Sept 10/19	Final Board Exam																						
									Mentally Fit														
															H. S. Thomson Major R.A.M.C.								

M.D. 465. 200,000-18. 177,950.

Army Form A. 45.

CONFIDENTIAL.

MEDICAL BOARD REPORT ON A DISABLED OFFICER.

(ALSO TO BE USED FOR DISABLED NURSES.)

Station Witley.

Date 21-1-19

1. Rank and Name Lieut. BREDIN. William Thomas.
2. Unit. 6th. Cdn. Reserve Battalion.
3. Age 31 4. Total Service 33/12 War Service { (a) at home 7/12 (b) abroad 26/12 France 9/12
5. Address 6th. Cdn. Reserve Battalion.

STATEMENT OF CASE.

NOTE.—In answering the following questions the Board will carefully discriminate between the officer's statements and evidence recorded in his medical documents. When possible, a statement by his medical attendant should be attached.

6. Disability Syphilis. (~~[illegible]~~) Chronic.
7. Date of origin of disability August 1916.
8. Place of origin of disability England.
9. Give concisely the essential facts bearing on the history of the disability (personal and family history, etc.) :—

NOTE.—Boards subsequent to the first should record here the progress of the case since the officer's last appearance.

Contracted syphilis in August 1916 and was treated at Connaught Hosp. Aldershot with 606 and Hg. Secondary rupial ulcers appeared in Aug. 1918 and was treated 13th. Cdn. Gen. Hosp. Hastings with N.A.B.s and Hg.T and K.I. States he has no symptoms at present and feels perfectly well. Was in France wi with infantry nine months during which time had no serious illness nor was wounded.

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

Captain, D.M.S. for D.M.S. Canadians.

OPINION OF THE MEDICAL BOARD.

NOTES.-(i.) The Board will on no account inform the officer of its opinion on any of the following questions.

(ii.) Clear and decisive answers should be filled in by the Board to enable the Ministry of Pensions to come to a reliable decision on the officer's claim to pension, etc.

(iii.) Expressions such as "may," "might," "probably," should be avoided, if possible.

(iv.) When there is more than one disability the replies will distinguish between them.

10. Was the disability contracted (a) before entering the service ? No.
(b) in the service ? Yes.
11. Was it attributable to military service ? No.
If so, to what specific military conditions is it attributed ? N.A.

[Enteric Fever, Dysentery, Malaria, &c., contracted on service in countries where there is a special liability to the disease, are to be regarded as attributable to military service.]

12. If not attributable to, was it aggravated by, military service ? N.A.
If so, by what specific military conditions ? N.A.

13. Is it attributable to, or aggravated by, the officer's own negligence or misconduct ? If so, in what way, and to what extent ? Attributable to misconduct.

[P.T.O.

14. What is the officer's present condition ? General condition fair. Heart and lungs normal. Has some pigmented lesions varying in size from a pea to a halfpenny. No open lesions to be found. Specialist's report 21-1-19"No open lesions. He has been throughly treated up to present time. He may be returned to Canada but should report for further treatment in about a month". Sgd. Major Lockhart. Wasserman 16-12-18. Positive ++. Urinalysis 20-1-19:- Sg.1002, Alb. Nil. Sugar, Nil.

15. To what degree is the officer disabled at the present time ? Under twenty per cent.
(Degrees of disablement should be expressed in the following percentages—100, 80, 70, 60, 50, 40, 30, 20 under 20, or nil.)

16. Is the disability permanent ? No.

17. If not permanent, how soon is re-examination recommended ? one months.

18. Is it necessary that the officer should be re-examined by the same Board ? No

19. What treatment is the officer receiving, and where, and from whom ?

Taking one grain daily of Hg.

20. Is the officer in need of special medical treatment of any kind, and, if so, of what nature ?

See above report.

21. Does the officer require the constant attendance of another person ? No.

22 Officers will be classified by the Medical Board under one of the following categories, the probable period of unfitness for the higher categories being stated. Explanation of these categories is in para. 5 of A.C.I. 158/1918. In case of nurses, omit B. and (i) and (ii) of E.

A.—Fit for general service No. one month.

B.—Fit for service in a garrison or labour unit abroad No. One month.

C.—Fit for home service :—

(i) Active duty with troops Yes. One month.

(ii) Sedentary employment only

D.—For admission to a command depot

E.—Requiring indoor hospital treatment :—

(i) In an officers' military or auxiliary convalescent hospital

(ii) In an officers' hospital

F.—Permanently unfit for any further military service

Not applicable.

23. In the case of officers suffering from neurasthenia found permanently unfit, has A.C.I. 307 of 1918 been complied with ?

R. S. Pentecost. Lt-Col. C.A.M.C. President.

N. J. Barton. Major. C.A.M.C. } Members.

(C.S. 2342) Wt. W.764—P. 955 500m. 19/4/18 3025 H.S. & Co.

CLINICAL CHART.

(To be attached to Case Sheet.)

Army Form B. 181.

Corps________________

No.________________ Rank and Name______________________________ Age________ Service________________

Military Hospital____________________

Disease________________ Date of admission________________ Date of discharge________________ Result________________

Dates of Observation																															
Days of Disease																															
Temperature Fahrenheit	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.
107° ·8 ·6 ·4 ·2																															
106° ·8 ·6 ·4 ·2																															
105° ·8 ·6 ·4 ·2																															
104° ·8 ·6 ·4 ·2																															
103° ·8 ·6 ·4 ·2																															
102° ·8 ·6 ·4 ·2																															
101° ·8 ·6 ·4 ·2																															
100° ·8 ·6 ·4 ·2																															
99° ·8 ·6 ·4 ·2																															
98° ·8 ·6 ·4 ·2																															
97° ·8 ·6 ·4 ·2																															
·8 ·6																															
Pulse per Minute																															
Respirations per Minute																															
Motions per 24 hours																															

(6378) Wt. W4612/P566 2,000,000 2/18 McA & W Ltd A.F.B. 181/5 (E. 2565)

Signature________________________ In charge of case.

Army Form B. 181.

CLINICAL CHART.

(To be attached to Case Sheet.)

Corps ____________

No. ____________ Rank and Name Lieut. Deccan. Age ____________ Military Hospital ____________ Service ____________

Disease ____________ Date of admission 1-3-19 Date of discharge ____________ Result ____________

Dates of Observation	1st	2	3																											
Days of Disease		"	"																											
Temperature Fahrenheit	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.
Pulse per Minute	84	74	90 80																											
Respirations per Minute	20	20	20																											
Motions per 24 hours																														

(6378) Wt. W4612/P566 2,000,000 2/18 McA & W Ltd A.F.B. 181/5 (E. 2565)

Signature ____________ In charge of case.

D.M.S. 1375.

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

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

Rank Lieut Name Dredin Surname William Thomas

Unit or Corps 6th Res (If a soldier) Regtl. No.

Born at Toronto, Ont on, date 26 Oct 1887.

Signature (for identification)

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

1. PHYSIQUE—Any deformity, maiming or lameness? If so, describe. No.

Weight 135 lbs.

Height 5 ft. 6 ins.

2. NUTRITION AND DIATHESIS? Good.

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

3. NERVOUS SYSTEM? Normal

4. RESPIRATORY SYSTEM. Normal

5. HEART? Normal

Abnormal Sounds? no

Abnormal Size? no

Pulse Rate? regular Intermittence or irregularity? no

6. ARTERIES.—Any hardening? No.

7. DIGESTIVE SYSTEM? Good.

8. GENITO-URINARY SYSTEM? Normal

Urinalysis—s.g.? 1002 Reaction? Acid Albumen? Nil Sugar? Nil

9. SKIN, MIDDLE EAR, EYE or any other part? Ears - hearing normal. Robertson Jones Capt. C.A.M.C.

OSE 6/6
OSE 6/6

10. Is there any evidence of impairment of health or physical condition not mentioned above? If so, describe. No.

11. Opinion as to the health and physical condition of the one examined? Good.

Examined at Milford Camp Signed M.O.

Date Jan 20-19 Signed J W McGregor Lt Camp M.O.

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

Army Form A. 45.

CONFIDENTIAL.

MEDICAL BOARD REPORT ON A DISABLED OFFICER.

(ALSO TO BE USED FOR DISABLED NURSES.)

Station WITLEY.

Date 21-1-19

1. Rank and Name LIEUT. BREDIN. William, Thomas
2. Unit. 6th Cdn Res. Batt.
3. Age 31. 4. Total Service 3 3/12 War Service { (a) at home 7/12 (b) abroad 26/12 France 9/12
5. Address 6th Cdn Res Battab

STATEMENT OF CASE.

NOTE.—In answering the following questions the Board will carefully discriminate between the officer's statements and evidence recorded in his medical documents. When possible, a statement by his medical attendant should be attached.

6. Disability Syphilis. (chronic)
7. Date of origin of disability Aug - 1916.
8. Place of origin of disability England.
9. Give concisely the essential facts bearing on the history of the disability (personal and family history, etc.) :—

NOTE.—Boards subsequent to the first should record here the progress of the case since the officer's last appearance.

Contracted syphilis in Aug 1916 and was treated at Connaught Hospital aldershot with bob. & Hg. Secondary inguinal ulcers appeared in Aug 1918 & was treated 13th Cdn Gen Hosp Hastings with N.A.B's, Hg. & K.I. States he has no symptoms at present and feels perfectly well. Was in France with Inf. nine mos during which time had no fevers illness nor was wounded.

OPINION OF THE MEDICAL BOARD.

NOTES.-(i.) The Board will on no account inform the officer of its opinion on any of the following questions.

(ii.) Clear and decisive answers should be filled in by the Board to enable the Ministry of Pensions to come to a reliable decision on the officer's claim to pension, etc.

(iii.) Expressions such as "may," "might," "probably," should be avoided, if possible.

(iv.) When there is more than one disability the replies will distinguish between them.

I concur in the findings of the Board as recorded here. Captain, D.A.D.M.S. for D.M.S. Canadian Forces

10. Was the disability contracted (a) before entering the service? No
(b) in the service? Yes.
11. Was it attributable to military service? No
If so, to what specific military conditions is it attributed? Na

[Enteric Fever, Dysentery, Malaria, &c., contracted on service in countries where there is a special liability to the disease, are to be regarded as attributable to military service.]

12. If not attributable to, was it aggravated by, military service? Na
If so, by what specific military conditions?

13. Is it attributable to, or aggravated by, the officer's own negligence or misconduct? If so, in what way, and to what extent? attributable to misconduct

[P.T.O.

14. What is the officer's present condition ? General condition fair. Heart & lungs normal. Has some pigmented lesions varying in size from a pea to a half penny. No open lesions to be found. Specialist report. 21-1-19. "No open lesions, he has been thoroughly treated up to present time. He may be returned to Canada but should report for further treatment in about a month." Sgd. Major Lockhart.

Wassermann 16-12-18 - Positive ++.
Urinalysis. 20-1-19 - S.G. 1012. Alb. Nil. Sugar Nil.

15. To what degree is the officer disabled at the present time ? under twenty

(Degrees of disablement should be expressed in the following percentages—100, 80, 70, 60, 50, 40, 30, 20 under 20, or nil.)

16. Is the disability permanent ? No.

17. If not permanent, how soon is re-examination recommended ? One months.

18. Is it necessary that the officer should be re-examined by the same Board ? No

19. What treatment is the officer receiving, and where, and from whom ?

Taking 1 grain daily of Hg.

20. Is the officer in need of special medical treatment of any kind, and, if so, of what nature ?

see above report.

21. Does the officer require the constant attendance of another person ? No

22. Officers will be classified by the Medical Board under one of the following categories, the probable period of unfitness for the higher categories being stated. Explanation of these categories is in para. 5 of A.C.I. 158/1918. In case of nurses, omit B. and (i) and (ii) of E.

A.—Fit for general service No - one month.

B.—Fit for service in a garrison or labour unit abroad No - one month.

C.—Fit for home service :—

(i) Active duty with troops Yes - one month

(ii) Sedentary employment only

D.—For admission to a command depot

E.—Requiring indoor hospital treatment :—

(i) In an officers' military or auxiliary convalescent hospital } No

(ii) In an officers' hospital

F.—Permanently unfit for any further military service

23. In the case of officers suffering from neurasthenia found permanently unfit, has A.C.I. 307 of 1918 been complied with ? }

R. Mynfeurt Lt Col CAMC President.

J. F. Barlow Surgeon Capt. CAMC

Members.

(C.S. 2342) Wt. W.764—P. 955 500m. 19/4/18 3025 H.S. & Co.

CONFIDENTIAL.

Army Form A. 45.

38

PROCEEDINGS OF A MEDICAL BOARD

assembled at Bramshott Hants on Sept

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. Wm S. Bredin (Corps) 109

Age 28 Service 9/12 Disability none

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

He fulfils the conditions of Army Order No 350 1912 Vy – His Vision (including normal color perception) is normal That he does not suffer from deafness or any form of middle ear disease That his respiratory, circulatory, and nervous systems are normal And that he is in other respects fit for general service,

Height 5' – 6

Weight 140 lbs

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

Signatures

H. Forrester Major. President.

A. Maclaren Capt } Members.

W. Fraser Capt }

Bramshott Camp, Hants.
7- SEP 1916
APPROVED
A. Fleming. Major.
D.A.D.M.S. for A.D.M.S., & for G.O.C.
Canadian Troops, Bramshott Camp.

I concur in the findings of the Board of Medical Officers here recorded.
W. Macdermott
Captain, C.A.M.C.
For D.M.S.
Canadian Contingent
9 SEP 1916

(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.

(9) Is your Father alive? Yes

If so, state name and address Mark Bredin, 26 De Lisle Ave. Toronto.

(10) Is your Mother alive? Yes

If so, state name and address 26 De Lisle Ave. Toronto, Ont

(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? Imperial Life, Sun Life, North American Life

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.

J. J. Hall
Officer Commanding.

Date July 23/16.

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 104th Battalion C.E.F.

(2) Regimental Number —

(3) Full Name of Soldier William Thomas Breslin.

(4) Place of Birth Toronto Ontario.

(5) Are you married, or not? Not married.

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

(b) Present Postal Address 26 De Lesle Ave. Toronto.

(7) Are you a widower? No.

(8) Have you any children? No.

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.)

Forms
I. 1237
'12

No. 14 CANADIAN GENERAL HOSPITAL
EASTBOURNE, SUSSEX.

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
91	—	Lt.	BREDIN.	W. J.
Year	**Unit.**		**Age.**	**Service.**
1919.	6 Res.		31	3 4/12

Station and Date.

1.3.19

Disease Contusion/knee Rt.

Reported Sick 27.3.19 Taken Sick. 27.2.19
Enlisted. Previous Occ.
To England.
France.
Invalided from France.
Complaints: Onset Duration. Pain & swelling rt. leg.

Previous Illness.

Present Illness. Two days ago, fell while vaulting a horse struck lt. knee on ground very forcibly. Could not stand. Whole leg became swollen, black & was very sore in region of knee.

Physical Exam.
Eyes. Neg. Ears. Neg. Nose Neg.
Tonsils Neg. Teeth. Neg. Throat. Neg.
Upper Extremity. Neg.
Lower Do. see overleaf.
Skin. do.
Urinalysis.

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

Wt. W 6604/M 2870—1,500,000—8/17—H. & Sr. (10938). Forms/I. 1237/12. (E239)

[P.T.O.

Station and Date.	
	Rt. knee swollen; marked ecchymosis from above knee to middle of leg. Whole leg oedematous. Knee joint distended with fluid. Several small blisters on upper 1/3rd leg caused by application of blister.
	For X-Ray: Transf. to Hastings. Jerrichan. Maj.
13 Can Gen Hosp	No. 13 CANADIAN GENERAL HOSPITAL HASTINGS, SUSSEX.
6. 3. 19	Leg very ~~[illegible]~~ discolored. Painful over internal lateral lig of left knee. Knee painted with Iodine and leg bandaged
10. 3. 19	Leg improving. Swelling less and discoloration still continuing
20. 3. 19	Allowed up still some swelling in lower arm & knee but nearly all pain and tenderness gone.
11. 3. 19	Improvement has been slow but continuous. Sent to Mobile Bath
	S. M. Connolly Maj RAMC

Station and Date.	
1919	Boarded 14/4/19 Cat. D. Invalided to Canada
5 May	To Port of Embarkation. J. Lamm Capt Comd

Forms
I. 1237
12

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
1939		Lieut	Bredin	Wm John
Year 1919	Unit. 6 Ches		Age. 31	Service. CANADA. FRANCE TOTAL

Station and Date. D.O.C. ATLOCK BATH.

Disease Contusion Knee (left)
ONSET. 27/2/19.

April 2

HISTORY OF DISABILITY.
accidental admitted Castlecrag March/19. then to Hastings 3/3/19. treatment - compresses and bandages. e e o H. 2/4/19.

PERSONAL AND FAMILY HISTORY.
V.D. S.

PRESENT CONDITION. O R
DIGESTIVE SYSTEM. O R
CIRCULATORY SYSTEM. O R
RESPIRATORY SYSTEM. O R
NERVOUS SYSTEM. O R
G.U. SYSTEM. History. urine.
LOCAL CONDITION.
Knee (left) swollen - unable to fully extend same. no redness not tender, very little tenderness. Becoming enlarged after exertion.
Other systems negative.

7th Knee still swollen, fluid present. [illegible]
10th Knee slowly improving [illegible]

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

(44502) Wt.W 11203—M 1150. 1,450,000. 6/12/16. C.F.&S. Forms/I. 1237/12. (E239)

P.T.O.

Forms
I. 1237
11

3 Canadian General Hospital
Hastings, Sussex.

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	—	Lieut	Bredin	W. J.
Year 1916	Unit. 21st Can. Bn.		Age. 30.	Service. 3 4/12

Station and Date. 13 G.H. 6-9-18

Disease V.D.

First felt ill — Reported Sick.

Complaint — Onset — Duration

Developed chancre Aug./16, later sore throat and rash, Sept./16. Received out patient treatment at Aldershot Sept./16. 7 or 8 "606" + Hg i. ~~No treatment~~

Family History. For 8 months took Pills. B.T. Neg. No symptoms until, about 1st Week

Personal History. of August/18. when ulcers

(a) Previous occupation & ENVIRONMENT. developed on legs and arms. Returned to England on leave. B.T. when Rochester Row. +

(b) Previous illness.

Gonorrhoea, Tropical ulcers, on ~~Thighs, Calf~~ legs, and arms.

(c) Present illness. Cervical glands +.

11/9/18	Hg i	Recurrent Cause (Full). Conjunctivitis.
14.9.18	VIII. 6 N.A.B.	Rash nodular. Elevated Temp
18/9/18	Hg i	
21/9/18	IX N.A.B. 6	Rals. 6. Urine N
25/9/18	Hg i	Urine N
5/10/18	~~Physical Examination~~ Genital Sensitive	Rals + Urine N
	X General Inspection, Skin. No Reaction	
	Hands.	
	Eyes.	
	Nose & Throat.	
	Teeth & Gums.	

Dis to Duty 28/12/18

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

(23205) Wt.W 4234—M 627. 1,000,000, 8/16. C.F.&S. Forms/I. 1237/11.

P.T.O.

Station and Date.		
28-9-18	Well. Ulcers improving Pols 3 lines	N
	X. N.A.B. 6. Discharged cubbing.	
5-10-18.	Well. Gums sensitive	Urine N
	XII N.A.B. 6. No reaction	" N
9/10/18	No Treatment Gums sensitive	
12/10/18	Well. Gums sensitive	Urine N.
	XIII N.A.B. 6.	N
16/10/18	Gums sensitive No treatment.	No treatment
19/10/18	XIII NAB. 9 - gums sensitive	N
21/10/18	B T Strongly Positive ++	
26/10/18	To ~~Duty~~ well	
2.11.18	Advise Hg i weekly KI gr x tid well	
6.11 18	Hg i	
9.11.18	Hg i K.I. increased to gr xx doing well	
16.11.18	Recurrent course of N.A.B to begin next week	
20.11.18	Hg i	
23.11.18	I N.A.B 6 well Recurrent Course	
27.11.18	Hg i	
30.11.18	II N.A.B. 6	Neg
4.12.18	Hg i	
7.12.18	III N.A.B. 75	Neg
14.12.18	IV N.A.B. 75	Neg
16.12.18	Wassermann Pos. ++	
21.12.18	Advised to continue K.I. + Hg.	
	for 3 months.	
	Discharged as out patient	
	to reserve	
	W.S.D. Turner Capt.	

Pres/S

CASE HISTORY SHEET.

St. Andrews Military Hospital,
Hospital. Toronto Station.

No. Rank Lieut Name Bredin Wm. Age 31

Unit 200 Completed years of service Where and how long } 6 7/12 8 19/12 7 10/12

Date of admission 18-5-19 Date of discharge 17-6-19

Diagnosis Synovitis (L Knee) Place of origin 27-2-19 England
1st D.S.L Hill 2.6.19

CONDITION ON ADMISSION AND PROGRESS OF CASE

Complaint - Partial loss of function of Left Knee

Duration - During P.T. Feb 27/19 patient twisted knee (left). It became swollen and painful. Was in Hosp. in Eng. 3 months for treatment. Sent to Canada for further treatment.

Present Condition - L. Knee is slightly swollen on each side of patella and some swelling above patella. Slight fluctuation present.

Patient complains of some tenderness on each side of knee joint when attempting full extension, and also upon pressure on these parts. After walking 1 mi. knee becomes stiffened and weak. No sharp pain.

Past History - Pneumonia 6 years ago
V.D.S. Sept 1916.

June 5. - Knee not painful but cannot straighten it. Some swelling yet.

FAMILY HISTORY June 8. Condition stationary.

(Tuberculosis, mental or nervous diseases.) June 10. " "

June. 14. Having massage and passive movement.

TREATMENT

(Especially any specific or special form.)

CONDITION ON DISCHARGE,

(and disposal made of case.)

Date 17-6-19

R D MacKenzie Capt CAMC
Medical Officer i/c case.

M. F. B. 313a.
100M.—6-18.
1772—39-439.

CASE HISTORY SHEET.

X Ray
853

D.O.H. Hospital. Toronto Station.

No. Rank Lieut. Name Bredin, W.J. Age 31

Unit D.D. #2 Completed years of service Where and how long } F. 10/12 E. 24/12 C. 8/12

Date of admission 17-6-19 Date of discharge Sept 11th 1919

Diagnosis Synovitis L. Knee Place of origin ~~Toronto, 4-10-18~~ England. 27-2-19.

CONDITION ON ADMISSION AND PROGRESS OF CASE Following Strain - L knee joint - became swollen, fluid in it - gradually disappeared.

L.C. - L leg held flexed at joint - Flexion normal - Extension to 170° - Knee becomes sore on walking. Otherwise negative

Testing of Syphilis -

X ray shows fracture of Spine of Tibia.

Canadian Medical Service MILITIA HEADQUARTERS

FAMILY HISTORY Neg.

(Tuberculosis, mental or nervous diseases.)

TREATMENT Massage, Light Re-thermy - Bandages

(Especially any specific or special form.)

19/6/19. Carry on. — PKM

July 2. 1919 Carry on - Not Ready for Board. J.F.C.

To see Major Robertson to have a Wassermann made Lt.

" 2. 1919. Blood taken from Left Arm for Wassermann Test. Sent to Base for report. D.R.

" 3. 1919. To post Knee in plaster & wedge out to 180°. then Gym. D.P.

Col Mazier - J.P.

CONDITION ON DISCHARGE (and disposal made of case.) " 7/1919. Plaster Splint put on for wedging. To have 6 days leave and report back every 2nd day for wedging. J.P. Belgrove

" 9/1919 Wedge - 1" inserted

" 12/1919 Plaster broken at Knee - removed. Exercises made improved

Date 18-6-19. W. Chapman Capt.

" 15/1919 - New Plaster Splint applied. Medical Officer i/c case.

M. F. B. 513a. 100m. 7-6 18. 1772—39-459.

" 17/19 - one half inch wedge inserted. — J.P. D.P.S.

" 19/19 - one inch wedge inserted. — J.P.

" 22/19 - Further wedging done — J.P.

" 24/19 " " " — J.P.

817881

July 29. 19. Plaster splint removed. Angle S.E. Knee now nearly 180°. To receive massage & hydro.

30-7-19. Left Knee swollen moderately, no particular painful spot, but aches when walking. Rest advised & bandage ordered J.R.C.

30/7/19 Report from Base Hosp. re Wassermann Test:- Mod. Positive. 430. J. Pulgrave Capt

1-8-19 Sent to out patient clinic at Base Hosp for treatment. J.R.C.

Sept. 3rd. Reported on request from office, 8-8-19 was granted month's leave.

Exam. shows 1+ swelling of L. Knee; some fluid in joint; attitude of standing at 170° flex. can be extended beyond that degree, without causing pain; can walk one mile without pain, but beyond that distance the knee swelling becomes painful. Is taking injections at Base (Dr Todd 3). Wassermann positive. Recommended Radiant Heat.

J.R.R.

R 150

ET.

Rank and Name BREDIN, William Thomas Lieut. 25-8-16

Regimental No.

Unit 109th Battn. 2

Date of enlistment 25-4-16.

Place of birth Toronto. Ontario. Canada.

Married (Yes or No) No.

If in Permanent Force D

Promotions or appointments

Name and Address of Next-of-Kin Father.
Mark Bredin Sr.
26, De Lisle Ave, Toronto.
Ontario. Canada, NR 156 Bn 25-3-17
" 28.4.17

Date and place of discharge

Reason for discharge

Character on discharge

A.F.B. 103

LEFT CANADA 23-7-16

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
			Discharged	5.10.16	Pt II Ord 284
10-10-16	109th Bn.	Admit to Hospital	Bramshott.	2-10-16	Pt II Ord 284.
20-2-17	5th Div.	Posted to 156th Battn		18-2-17	RO. 748 Pt II O. 51. 156th Bn Ord O. 64. Pt 6th Bn
1-3-17	do	Granted Certificate on Completing Course 23.	C.M.S.		RO. 859 (RO. 630 Hqs B & A)
24.11.17.	156th Bn	S.O.S. to 6th R. Bn.	T.O.S. 6th R. Bn	24.11.17	Pt II Ord 289
2.1.18.	6th R. Bn	S.O.S. to 21st Bn overseas		24.11.17.	Pt II Ord 327.
12.1.18.	21 Bn	T.O.S. from England		29.12.17	Pt II Ord (3)
				31.12.17	Pt II Ord 3
24 4 18	BAMS	Adm 45 Casualty Clearing Station		19.4.18	Ch 964 Impetigo
26-4-18	"	Adm 25 Stationary Hosp Boulogne		22-4-18	Ch 966 Scabies
30 5 18	"	Adm 8 General Hosp Rouen		27 5 18	Ch 995 Dermatitis
21-9-18	21st BN	Granted 14 days leave	Discharged of absence	12.6-18	Ch 1010
				29.8.18	Pt II 72
9. 9 18	A.G.	Granted extension of leave to cover period in Hospital		from 13.9.18 to 4.10.18	Auth AG 1A 453
12. 9 18	BAMS	Adm 13 Can General Hosp Hastings		7. 9. 18	Ch 1084 V.D.G.
			Discharged	28 12 18	Ch 1176

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			36	
3 10 18	Adj.	Sol S unit in the field (21st Bn) + det to EORD unfit to return to unit		4/10/18	Ad/1 a 443
4 10 18	EORD	TOS whilst on leave from France from 21 Bn ~~7.9.18~~ and shown patient in hospital		4 10 18	Pt II 251 amended by Pt II 264 d 22 10 18
12 10 18	21 Bn	Having been granted leave to UK & declared unfit to return to Unit is detached to E.O.R. Depot		4 10 18	Pt II 60
13.2.19	21 Bn	S.O.S & Establishment		30.12.18	Pt II 8
15.2.19	EORD	SOS on posting to 6th Res Bn		14.2.19	Pt II 39 + 6th Res Pt II 38 d/15.2.19
5.3.19	AMS	Adm 14 Can Gen Hosp, Eastbourne		2.3.19	CL 1230 Contusion L. Knee
6.3.19	"	Adm 13 Can Gen Hosp, Hastings		4.3.19	CL 1231 " " "
4.4.19	"	Adm Can Conv. Hosp, Matlock Bath		3.4.19	CL 1256 " " "
5.5.19	EORD.	TOS from 6 Res + Shown in Hosp.	Discharged.	5.5.19	CL 1281 " " "
				1.5.19	Pt II 104
		Sailed for Canada		5.5.19	S.L. 502.
13.5.19	EORD	SOS To Canada		5.5.19	Pt II 111.

C.A.D.C. 5009 A.

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

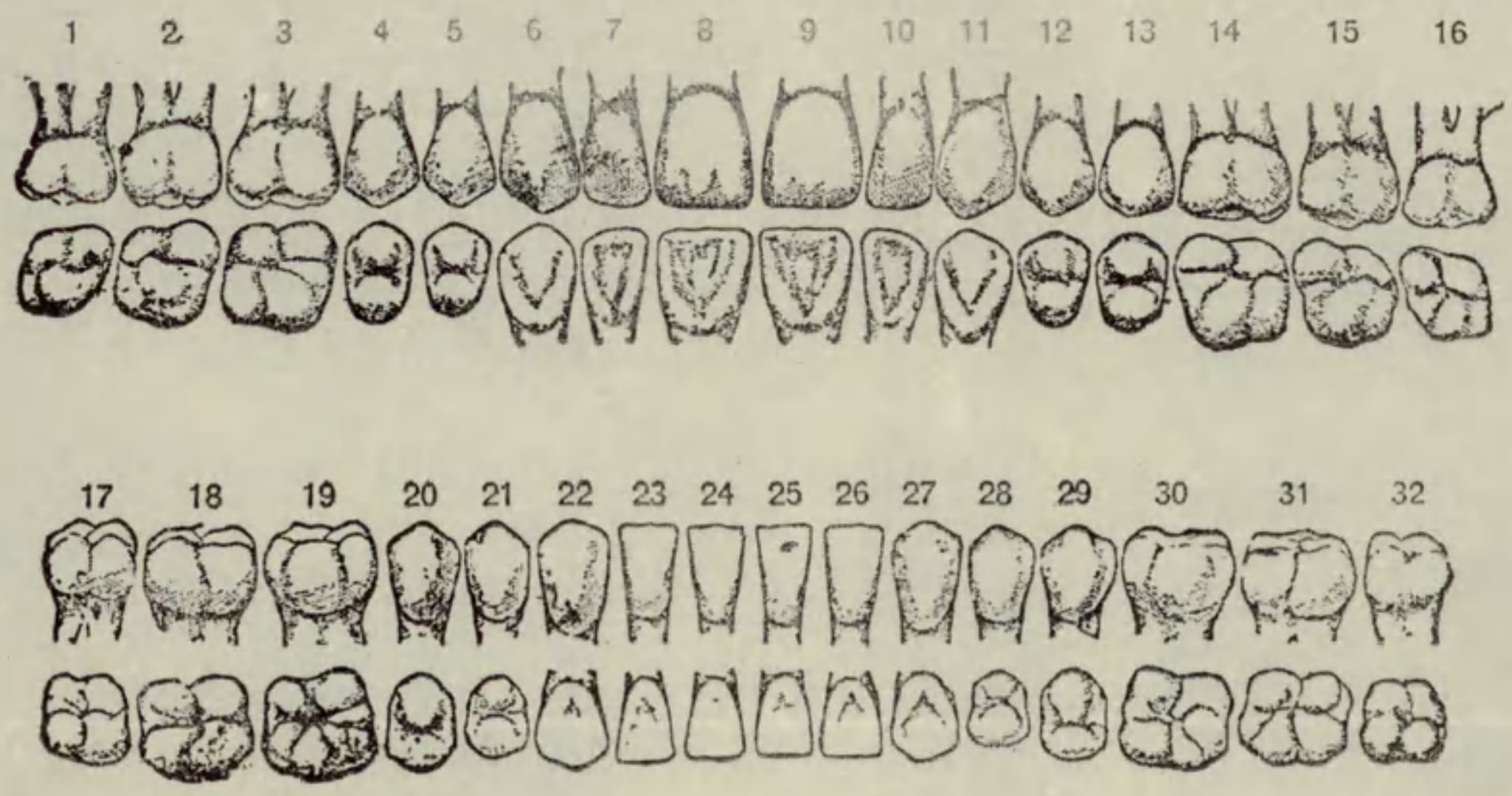
DIRECTIONS TO DENTAL OFFICERS

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) BREDIN. W. J.

REGIMENT 109th Bn RANK Lnce No.

Date of Examination in England 31/12/18. Date of Examination in France



PRESENT DENTAL REQUIREMENTS

1. FILLINGS 11. 12.
2. EXTRACTIONS Nil
3. CROWNS
4. DENTURES
   - (a) Full Upper
   - (b) Part Upper
   - (c) Full Lower
   - (d) Part Lower

   Nil

HAS HE EVER REFUSED DENTAL TREATMENT? No.

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

(a) In Canada No
(b) In England Yes
(c) In France Yes.

Signature of Dental Officer M. R. Thomas Capt

C.A.D.C. 5009 A

Matthews Printing

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

M.D 2.

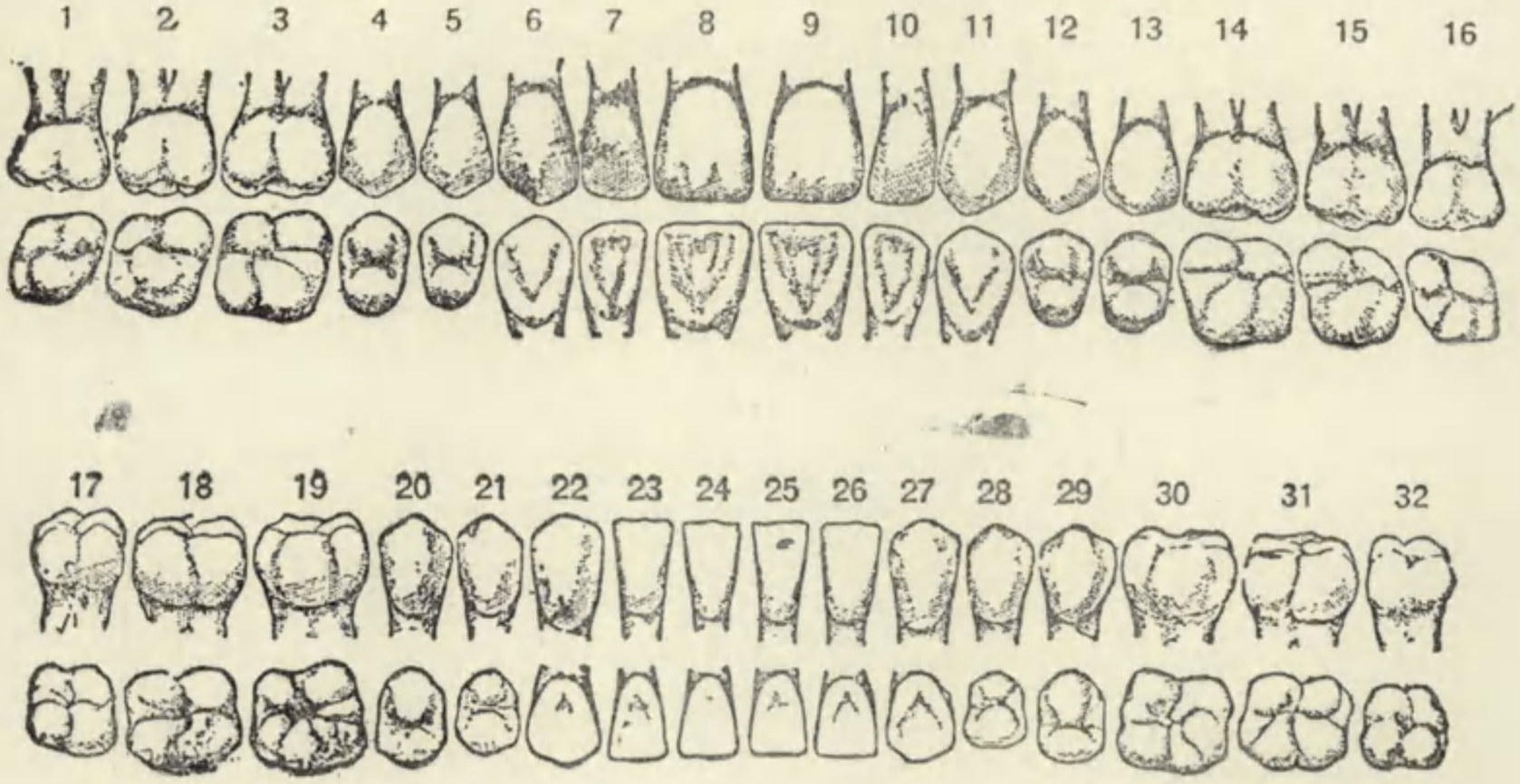
DIRECTIONS TO DENTAL OFFICERS

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) BREDIN. W.T

REGIMENT C.E. RANK Lieut No.

Date of Examination in England 28/4/19 | Date of Examination in France



PRESENT DENTAL REQUIREMENTS

1. FILLINGS Fit
2. EXTRACTIONS
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 Yes.
- (*c*) In France Yes.

C.C. Hosp.
Matlock Bath
England

Signature of Dental Officer E.D. Madden
Capt. C.A.D.C.

Army Form B. 103.

Casualty Form—Active Service.

Regiment or Corps 109th Can Bn. Regimental Number

Rank Lieut Surname Bredin Christian Name William Thomas

Religion Age on Enlistment years months.

Enlisted (a) 25/9/16 Terms of Service (a) D.F.W. Service reckons from (a) 23-7-16

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

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

or Corps Trade and Rate

Signature of Officer i/c Records.

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				
20.2.17.	109 Bn	Posted to 156 Bn Embarked...		18.2.17	Pt of 51. Ro 74 5 Div
		Disembarked...			
27-11-17.	O.C. 6th Res	T.O.S. 6th Res Bn on posting from 156 Bn.	Seaford.	24-11-17	Pt II 290
2/1/18	O.C. 6th Res Bn.	S.O.S. 6th Res on posting to 21st Can. Battalion	Seaford.	29/12/17	Pt II B.D. 1
					for Lt Mitchell Lt. OFFICER i/c RECORDS 6th CAN. RES. BN.
	2C.D.B.D	Arrived & T.O.S. 21st Battn	2C.D.B.D.	31-12-17	Pt. II O.3 d/12-1-18
	Do	Left for CCRC	Field	5-1-18	N.R.
	CCRC	Joined	CCRC	5-1-18	N.R.
16/3	21st Bn	Joined Unit	Field	14-3-18	B-213.
	45 CCS.	Scabies Adm	45 CCS	19-4-18	W.39 - E 559

(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) Signaller, Shoeing-smith, &c.

[P.T.O.

(B99130) W 15012—5156 J. P. & Co., Ltd. Forms/B103/3.

Lieut. BREDIN, W. J.

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				
	45 C.C.S.	Scabies Trans to	42 A.T.	20-4-18	W.3391 - F 5599
	6 C.F.A.	Impetigo - Adm & trans to	C.C.S.	19-4-18	Do. F 4947.
	25 Staty.	Scabies - Adm	25 Staty	21-4-18	Do W.3034.
	8 General	Dermatitis - Adm	8 General	27-5-18	Do F 3947.
25/5	25 Staty.	Discharged to	Duty	25/5/18	Do W.3034.
	Cyclists Base Depot	Arrived	Cyclists Base Depot	13-6-18	N.R. 26.
	8 General	Discharged to	Rein. Dep.	12-6-18	W.3391 - F 6835.
	C.D.B.D.	Arrived	C.D.B.D.	15-6-18	Do B.E. 1652.
	Cyclist Base Depot	Left for	Etaples	15-6-18	N.R. 28
	C.D.B.D.	Left for	C.C.R.C.	23-6-18	N.R. 364.
	C.C.R.C.	Arrived	Do	23-6-18	N.R. 954
	Do	Left for Unit	Field	16-7-18	N.R. D.1239.
20/7	21st Battn.	Rejoined from hospital	Do	17-7-18	B-213.
7/9	Do.	Granted 14 days Leave	Field	29-8-18	Part II Ord. 72 @ 21-9-18
9/9	A.G. Canadians	Granted extension of Leave 13-9-18 to 4-10-18 to cover time in hospital.	England	13-9-18	AG 1a 453 Part II Ord. 72 @ 21-9-18
3/10.	A.G. Canadians	Detached to Eastern Ontario Regt Depot, on being declared still unfit to return to his Unit in the Field.	Seaford	4-10-18	AG.1a 473 (R&R. 624). Part II Ord. 80 @ 12-10-18

J. W. Hogan Major for Lt.-Col., A.A.G.
Canadian Section, G.H.Q. 3rd Echelon B.E.F.

Army Form B. 103. Sheet Two Regimental Number.....

Casualty Form—Active Service.

Regiment or Corps.....EORD.....

Rank.....Lieut..... Surname.....BREDIN..... Christian Name.....W T.....

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.....

.....Signature of Officer.

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				
		Embarked ...			
		Disembarked...			
7.10.18	EORD	TOS from Mat Bn to Hosp	Seaford	4-10-18	RO 251
2-1-19	—	Ceases Hosp & Det. to 6th Res	Leatle	31-12-18	RO 1
13-1-19	—	Ceases Det. & SOS to 6th Res	"	10-1-19	RO 1
					AW Asellus Capt. Adjt. for OC. EORD
1-1-19	O/6th Res.	Attached to Batn from EORD	Seaford	31-12-18	PA II RO #1
18-2-19	O/6th Res	Ceases to be Attached from EORD	Seaford	14-2-19	PA II RO #38
18.2.19	O/6th Res	T.O.S. on posting from EORD	Seaford	14-2-19	PA II RO #38

(*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*) Signaller, Shoeing-Smith, &c.

[P.T.O.

[M1101] W6135/M768 1000m 9/16s 153 G & S Forms/B.103/4. E./354.

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			Inq. 3.19	
1-8-19	Dc 6th Res.	Sold on transfer to Regt Depot	Seaford	1-8-19	Pt II B 0 97

Office in Charge of Records

M. F. W. 54. (A. F. B. 1[illegible])
500M.—9-16
H. Q. 1772-39-920.

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

Casualty Form—Active Service.

Unit, Regiment or Corps 6th Res

Regimental No. ..... Rank LIEUT. C. E. F. Name BREDIN W. T

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

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

Extended ..... Re-engaged ..... Qualification (*b*) .....

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
22/5/15	M.H.Q. Ottawa	T.O.S. C.E.F. in Canada on Gen. Demobilization Invaliding	M.D. No. 2	4/5/15	C.E.F. R.O. No. 1979-5
			W. Winter. Capt for Director Personal Services		

(*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				

R# 1162
9-10-19.

30-B-223

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

M. F. W. 54. (A. F. B. 1
350M.—5-16
H. Q. 1772-39-920.

R62196

Casualty Form—Active Service.

Unit, Regiment or Corps 109th Bn.,

Regimental No. ..... Rank Lieut. C. E. F. Name BREDIN, William Thomas

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

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

Extended ..... Re-engaged ..... Qualification (*b*) .....

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
	O/S	T.O.S. # 2 D.D. from Overseas and posted to Hosp. Section.	Toronto	5-5-19	Auth:- R.O.1977 Part II D.O. 147 [signature] Capt. For O.C. No. 2 District Depot
		S.O.S. as medically unfit, further treatment with D. S.C.R.	Toronto,	20-9-19	Auth:- 2MD 30-B-223 d/ 17-9-19 Part II Daily Order No 263 [signature] Capt. For O.C. No. 2 District Depot

(*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				

Army Form W. 3212. (In books of 100.)

Regtl. No., Rank and Name Lieut Bredin Corps

Disease V. U. S. Hospital No. 13 C. G. H.

To Officer i/c Laboratory. Ward F 1

Please carry out an examination of the accompanying specimen of Blood

with special regard to Hanedman

Date 21-10-18

O. i/c Ward.

LABORATORY REPORT.

Fate Sacrosanctus
2nd Course of H.A.B.

Strongly positive (++)

LABORATORY No. 14 CANADIAN GENERAL HOSPITAL EASTBOURNE 24 OCT. 1918 SUSSEX

30

Date of Examination 23/10/18

N B Kilburn Capt

O. i/c Laboratory.

W9915—M1029 200,000 11/16 HWV(M1276) Forms/W3212/2

OC

Special Hospital.

Specialists' report is requested please, stating if any evidence of syphilis (active) is present and also saying recommend appropriate treatment.

Wasserman?

W Hunter
Med Officer

21-1-19

Miss II Mayor Lockhart
Please for your information & action if necessary

No.13 Canadian General Hospital,
Hastings, Sussex.

16th January,1919.

To :- Officer Commanding,
East Ontario Regtl. Depot,
Witley Camp, Surrey.

Lt. Bredin W.T.
E.O.R.D.

The marginally noted Officer was discharged as having had sufficient anti-syphilitic treatment (606) but advised to take" K I." and Mercury internally for a period of three months before resuming another course of "606".

For your information, please.

Lieut. Col.
Officer Commanding.
No.13 Canadian General Hospital.

HCSE/GHW

W.S.S. Turner Capt-Camo.
O. i/c Venereal Clinic

O.K.
J. Blackburn Capt.
Off. V.D.S. Clinic
Carlton

5.

URINALYSIS REPORT
(for Board)

Reg. No. . . . . Rank. Lieut.

Name. Bredin W. T. . . Unit. 6th Can Res Bn.

- - - - - - - - - - - - - -

Sp. Gravity . . . 1002

Reaction. . . . Acid

Albumen. . . . Nil

Sugar. . . . Nil

Microscopic. . . . . .

Canadian General Laboratory
20 JAN. 1919
WITLEY

Captain, C.A.M.C. for
Major, C. A. M. C.,
O.C., Canadian General Laboratory.

Plate No. 853

D.O.H., Toronto HOSPITAL

REQUISITION FOR TREATMENT OR EXAMINATION. Date 21/6/19

Reg'tal No. -------- Rank Lieut. Name Bredin Unit

Bed Ward

Injury or disease Part affected Lt. knee

Treatment or Exam.

Referred from,- Capt. Chipman

Report Radiograph of knee shows traces of an old T shaped fracture of head of tibia into the joint. Position and union are good. There is a very small loose body seen in the joint and the head of the tibia in the centre is slightly rougher than usual.

Signed G R Reid Capt.

M. F. W. 2509.

50M.—4-18.
1772—39—1276.

O.C., C.S.H. Welly
21-1-19

Sir,-

Lieut. Bredin W.D. The Ex. M. Officer has no open lesions of Syphilis and he has been thoroughly treated up to the present time.

He may be returned to Canada, but should report for further treatment in about a month.

J. Hawkshaw Major
O/c Syphilis Clinic

D.M.S. 1394-20M.
3958-19-10-17.

To adjt

PROCEEDINGS OF A MEDICAL BOARD.

Dated at ..... 191 .

No. ..... Rank ..... Name .....

Local Unit ..... Overseas Unit ..... Age .....

Examination held at .....

DISABILITY.
Overseas-Local
- SCRATCH ONE OUT. -

PRESENT CONDITION.

To adjt
from MO

Lt Bredin –

My opinion has been cleared by VHS clinic who advise his early return to Canada

H W McGregor Lt.

D.O.H. Lieut. Bredin, W.T. September10th,1919.

Condition when finally boarded for discharge.

1.Had primary sore Aug.1916; was treated as out-patient at Aldershott receiving 7 or 8, 606 & Hg., followed by Hg. Internally. Recurrence, with rupeal ulcers on arms & legs in Aug. 1918. On 18/12/18 Wassermann positive - - On July 2-19 Wassermann taken and still present. Has had four injections at the Base Hosp. and is still under treatment there. 2. On Feb. 27,1919,while at P.T. at Seaforth jumped off spring-board,catching toe on horse and struck on flexed knee,sustaining contusion of joint and T.Fracture (X-Ray plate D.O.H.#853) of head of tibia, into joint.Treated at 14th Can.Gen.Hosp. 1-3-19 to 3-3-19 and transferred to 13th Can.General till 2-4-19, thence to Matlock till 5-5-19. Hospital 18-5/19 to 17-6-19 and was admitted to D.O.H. 17-6-19. Knee slowly improving and is now as above described.

Had Pneumonia both lungs 1912; no disability.

1.Objective: Four superficial scars on Rt.Forearm; one on L.Forearm; numerous pigmented scars on both thighs.Subjective - Nil. 2. Objective - Slight thickening about the lt.knee; shows ½" greater circumference than (normal) Rt.knee; full flexion 10° limitation in full extension; slight limp in walking; no grating in joint on active and passive movements; no tenderness on pressure; no redness Thigh, calf, ankle and foot normal. The thickening is of the soft tissues on each side of patella, no bony enlargement. Can walk up and down stairs using this knee. Subjective - On walking 3 or 4 blocks, knee becomes weak;continuing to walk it would become painful and swollen by time one mile was travelled. Limps slightly always. No aching at night.

Walker Capt
A.Regr.Staff

D.O.H. Lieut. Bredin, W.T. September 10th, 1919.

Condition when finally boarded for discharge.

1. Had primary sore Aug. 1916; was treated as out-patient at Aldershott receiving 7 or 8, 606 & Hg., followed by Hg. Internally. Recurrence, with rupoal ulcers on arms & legs in Aug. 1918. On 18/12/18 Wassermann positive - - On July 2-19 Wassermann taken and still present. Has had four injections at the Base Hosp. and is still under treatment there. 2. On Feb. 27, 1919, while at P.T. at Seaforth jumped off spring-board, catching toe on horse and struck on flexed knee, sustaining contusion of joint and T. Fracture (X-Ray plate D.O.H. #855) of head of tibia, into joint. Treated at 14th Can. Gen. Hosp. 1-3-19 to 3-3-19 and transferred to 12th Can. General till 2-4-19, thence to Matlock till 5-5-19. Hospital 10-5/19 to 17-6-19 and was admitted to D.O.H. 17-6-19. Knee slowly improving and is now as above described.

Had Pneumonia both lungs 1912; no disability.

1. Objective: Four superficial scars on Rt. Forearm; one on L. Forearm; numerous pigmented scars on both thighs. Subjective - Nil. 2. Objective - Slight thickening about the lt. knee; shows ½" greater circumference than (normal) Rt. knee; full flexion 10° limitation in full extension; slight limp in walking; no grating in joint on active and passive movements; no tenderness on pressure; no redness. Thigh, calf, ankle and foot normal. The thickening is of the soft tissues on each side of patella, no bony enlargement. Can walk up and down stairs using this knee. Subjective - On walking 3 or 4 blocks, knee becomes weak; continuing to walk it would become painful and swollen by time one mile was travelled. Limps slightly always. No aching at night.

W. Ahoes Capt
for Registrar

W1869 P1225 200,000 5/18 HWV (P1147)

Army Form W. 3497A.
Continuation Card to A.F.W. 3197.

No. _____ Name _____ Regt. _____ Disease _____

Date	Treatment		Progress	Complications and their Treatment
	Local	General		Urine
30.11.18	Well	II NaB. .6.		N
4.12.18	Hg. gr.	I		
7.12.18	Hg. gr	III NaB .75	Well.	N
14.12.18	Hg. gr	IV NaB .75	Well.	N
16.12.18		B.T. Positive ++		
23.12.18	K.T. gr x	V 4. i.d.p.c.	Injections Hg.	N

Is now reporting at this clinic of Eastman.

Discharged as out patient

Signed. W.K. Turner
Capt

W1809—P1225 200,000 5/18 HWV(P1147)

Army Form W. 3497A.
Continuation Card to A.F.W. 3497.

No. _____ Name _____ Regt. _____ Disease _____

Date	Treatment		Progress	Complications and their Treatment
	Local	General		

Date	Treatment		Progress	Complications and their Treatment	Urine
	Local	General			
11-9-18		Hg T Intramuscularly.			N
14.9.18		VIII NAB .6 gm.	Some reaction. elevation of Temp.		N.
18.9.18		Hg T			N.
21.9.18	IX	NAB .6 gm. Rubs 6.			N.
25.9.18		Hg T			N
28.9.18	X	NAB .6 gm. Rubs 3.	Well. Ulcers improving		N
5.10.18	XI	NAB. .6 gm.	No reaction. Gums sensitive.		N
9.10.18		No treatment.	Gums Sensitive		N.
12.10.18	XII	NAB. .6 gm.	Gums Sensitive		N.
16.10.18		No treatment	Gums Sensitive		N.
19.10.18	XIII	NAB .9 gm. Rubs 4	Gums Sensitive		N.
21.10.18		B.T. Strongly	Positive ++.		
26.10.18		To rub.	Well.		N.
3.11.18		Advise Hg. gr T weekly. KT gr xx. 2 p.c.	Well. Rubs 4		N.
6.11.18		Hg. T			
9.11.18		Hg. gr. T weekly.	KI gr. xx.	Well. Rubs 2.	N
13.11.18		Hg. T			N
16.11.18		Recurrent course	KI next week	Rub.	N
20.11.18		Hg T			N
23.11.18	T	NAB .6	Well		N
27.11.18		Well. Hg. grs	T.		

VENEREAL DISEASE CASE-CARD.

Army Form W. 3497.

No. 13 Canadian General Hospital. F1 Ward.

Age	Service	Religion	Disease
30	34/12		V.D.S. (H.S.)

Regiment	Coy.	Reg. No.	Rank	Name
2nd Can. Bn.			Lieut.	Bredin, W.T.

Date of Admission	Disposal	Date of Discharge
6-9-18	Discharged to Duty.	28-12-18

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

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

1st, 2nd, 3rd attack or relapse: Relapse

Dates and Places of Three last Exposures:

Main points in history: Developed Chancre Aug./16. Later sore throat & rash. Received out-patient treatment at Aldershot Sept./16. For 8 "606" + Hg.T. For 8 months took pills. No symptoms until 1st week August/18. ulcers on legs and arms. Returned to England on leave. B.T. Rochester Row +.

Condition on admission: Lupial ulcers on legs and arms. Cervicle glands +.

[P.T.O.

W210—P1 200,000 10/17 HWV(P360) Forms W. 3497/3

BREDIN W. T.

Lieut. 21st. Batt'n. 6th Res. Bn.

No.45 Casualty Clg. Station. 19-4-18
No.25 Stationary Hospital, Boulogne. 22-4-18.
No.8 General Hospital, Rouen. 27-5-18
No.13 Canadian Gen.Hosp.Hastings. 7-9-18.
(Admitted whilst on leave from France.)
14 C.G.Hspl. Eastbourne 2-3-19.
13 C.G.Hspl. Hastings 4-3-19.
Canadian Conval.Offs.Hosp.Matlock 3-4-19

Impetigo.
Scabies.
Dermatitis.
V. D. S.
Cont. L. Knee.
Syno.lt.Knee.

Discharged:-12-6-18.
do. 28-12-18
do. 5-5-19

C.L.	24-4-18	964.	
	26-4-18	966.	
	30-5-18	995-2.	
	17-6-18	1010.	
	12-9-18	1084-5.	
	31-12-18	1176-4.	
	5-3-19	1230-3.	
	6-3-19	1231-3	
	4-4-19	1256-3.	

6-5-19 1281-2.

Surname	Christian Name	Reg. No.
BREDIN.	W.T.	10-B-873. 4-B-610

Rank	Unit
Lieut.	~~108th Battn.~~ 6th.Res.Bn.

MEDICAL BOARD held at	Date	Serial No.
(1) Bramshott.	7-9-16.	

Other Medical Boards at	Date	Serial No.
Witley Area	21-1-19.	
(2) Matlock Bath	14-4-19	
(3)		
(4)		
(5)		

Condition found by Board

(None). Syphilis Chr. Contus.lt.Knee lt.

Disposition Recommended

(1) Fit for General Service.

(2) Fit Home ser.unfit G.D.&.G.S. 1 month.

(3) Unfit any service 6 months, returned to Hospital in Canada.

(4)

(5)

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

Disposition

To Canada per HMAT "Essiquibo"V.L'pool.5-5-19

Remarks

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

H. W. & V., Ld.—3594-15.

*Name BREDIN W.T. Rank LIEUT. Regtl. No. D.D.2.

Fyle Depot

Original unit ..... Present unit ..... M. or S. Age ..... Religion ..... Ref. H.Q. .....

Port, ship, and date of arrival .....

Next of kin .....

Address on leave .....

Address on discharge 21 DeLisle Ave. Toronto Ontario

Transportation issued Yes No Date ..... Character on discharge .....

Previous occupation ..... Date and place of enlistment .....

Diagnosis ..... Date of Medical Boards .....

Date.	Remarks.	Pt. 2 Order No.
T.O.S. 5-5-19	Posted Hosp. Sect. R.O. 1977b	147a
20-9-19	S.O.S.M.U. For further treatment with DSCR	262a

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

[OVER]

Date	Remarks.	Pt. 2 Order No.

M.F.W. 192.
233-D.P.-200M-3-19.
1772-39-1243.

P

Number ..... Rank LIEUT

Surname BREDIN

Christian Names WILLIAM THOMAS

Unit ..... Theatre of War FRANCE

Date of Service 23.7.16. 29.12.17 5.5.19

Remarks .....

Latest Address 26 De Dale Ave

Toronto

Roll No. B

Page 4048

LEDGER No. 49 SERIAL No. A17881

REG. No. NAME Bredin. W.

RANK Lt. CORPS 2.D.D. AGE 31 SERVICE 6 8/12 6 2/12 7 10/12

HOSPITALS	DATE OF ADMISSION
1 St Andrews. Mil Toronto	18-5-19.
2	
3	

DIAGNOSIS 09) Synovitis Lt. Knee.

TRANSFERRED TO Dom Orthop 17.6.19

DISPOSITION Unit 11.9.19 CATEGORY

M.F.W. 2553.
1126-D.P.-50M-12-18.
1772-39-1332.

P.T.O.

REMARKS:

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
964	45 Cavell Stat	19-4-18	Impetigo
966-1	No 25 Stat H Boulogne	22-4-18	Scabies
995	8 Gen Rouen	27-5-18	Dermatitis
1010	Disch	12-6-18	
1084	13 Canadian Hosp	7-9-18	U D S
1176	Disch	28-12-18	42

NAME Breden J W

RANK AND CORPS Lieut 21st Con

REGT'L. No.

H. Q. FILE No. 649

FOLLOWS No.

FOLLOWS

CABLE

NO.	DATE

NATURE OF CASUALTY

L. L. 31493. M. & D. 8476.

M. F. W. 42—100M.—28-11-17.
H. Q. 1772-39-893.

2 CARD NO.

SURNAME. Bredin

CHRISTIAN NAMES William, Thomas.

FOLL. SoS 20 9-19 R.O. 2196 29/9/19 M.W.

REGL. NO. RANK Lieut.

O.O. 262 19/9/19. 200 (Lieut) Bn.

UNIT 109th.

FORMER CORPS Nil.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL Bredin, Mark, Sr.

RELATIONSHIP TO SOLDIER Father.

ADDRESS 26 De Lisle Ave., Toronto, Ont

COUNTRY OF BIRTH Canada, Toronto, Ont. DATE Oct. 26th. 1887.

PLACE OF ATTESTATION DATE

Sailed from Halifax 23/7/16 per S.S. "Olympic"

484 R/6 17-5-19 319 Lieut.

L. L. 94504. M. & D. 6512. M. F. W. 22. 250M.—2-16. H. Q. 1772-39-339.

MARRIED SINGLE WIDOWER

TRADE OR CALLING Bread manufacturer. RELIGION Anglican.

DESCRIPTION.

APPARENT AGE YEARS MONTHS

HEIGHT FEET INCHES

CHEST MEASUREMENT INCHES EXPANSION INCHES

COMPLEXION EYES HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE Lindsay, Ont. DATE Apr. 25th. 1916

Present Address: 4 Glenelg St. Lindsay, Ont.

No. Rank Lieut. Name Bredin. R. W. J.

T. O. S. Unit 109th. Battalion

M. D. 3

Paid From	Paid To	Sig. or Rec't	Promotions, Transfers, Discharges, etc.	
			Particulars	Authority
1916 Jan 17	1916 Jan 31	✓	Ast. for. Duty & Inst. 17-1-16	D.O. 5-2. 20-1-16.
Feb.		✓		
Mar.		✓		
April.		✓		
May.		✓	Prov. app Lieut 4-4-16.	D.O. 1174 of 5-4-16
June.		✓		
July.		✓		

UNIT SAILED
JUL 23 1916

Form R. 149.

Name BREDIN William F. *Rank* Lieut. *Reg. No.*

Unit ~~21st Bn.~~ 6th Res Bn

Next of Kin Canada

Date 1918	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
19-4	~~S~~ 45 C.C.Stn.(17048)		Impetigo			
22-4-18	25 Stat Hos Bloom (W.O.)		Scabies	466		
27-5	8 Gen Hos Rouen (W.O.)		Dermatitis	995		
12-6	Discharged (Ala 1977)		—	1010		
7-9-15	13 C.G.H. Hastings. (Ams 7001)					
	Whilst on Leave from France			1056		B2
28-12-15	Discharged	7003	42	1176		
2-3-19	14 Gen Gen Hos Eastbourne 7001		Contusion L Knee	1230		
4-3	13 Gen Gen Hos Hastings 7001		—	1231		
3-4	Convalescent Off Hos Millbank (W.O.)		Syn L Knee	1256		

Date	Movement	Place	Casualty	List No.	Notified N/K O.		W.O. List
5-5-19	Discharged 7008		—	1281			

No. Rank Lieut. Name Bredin W.

T. O. S. Unit 109th Battalion

M. D. 3

Paid From	Paid To	Sig. or Rec't	Promotions, Transfers, Discharges, Etc.	
			Particulars	Authority
			see Bredin N. T.	

Form DMS 1401.

CASUALTY

No. 14 CANADIAN GENERAL HOSPITAL

HOSPITAL.

A. & D. CARD

AT

A. & D. No. 91 PL. OF ACTION

RANK Lieut. REG. No. UNIT 6 Can. Res. SICK ~~OR WOUNDED~~

NAME Bredin W.J. AGE 31 RELIGION Cofe

PLACE IN HOSPITAL bs.

DIAGNOSIS Contusion Knee Lt.

ADMITTED 1-3-19 FROM

DISCHARGED TO

TRANSFERRED 13th Can Gen Hosp to duty 3 MAR 1919

SERVICE AT HOME 24/12 IN FIELD

RESULTS

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

[P.T.O.

REMARKS.

NAME Bredin. W. J. REGT. No. —

RANK AND UNIT Lieut. 6th. Res. Bn.

NEXT OF KIN

CABLE		NATURE OF CASUALTY
No.	DATE	

M. F. W. 42—100M.—8-18.
H.Q. 1772 39-893.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
1230-(3)	14 C. G. E. Bourne	2-3-19.	Cont. Rt. Knee.
1231-(3)	13 " " Hastings	4-3-19	" " "
1256	Can Cont Off Mattock Pitt	3-4-19	Sup L Knee
1281-(2)	" " " Lis	5-5-19	" " "

Station	Date	Symptoms and progress (Date of admission to hospital, and date of discharge from hospital, to be entered in red ink.)	Weight clothed, without boots—lbs.	Urine: Normal (N.) Albumen (Alb.)	Wassermann Reaction: Method (Original (O.) Modification (M.))	Wassermann Reaction: Result (Positive (+) Negative (—))	Treatment: Arsenical: Intravenous Injection. Dose in grammes: Salvarsan	Treatment: Arsenical: Intravenous Injection. Dose in grammes: Neo-Salvarsan	Treatment: Mercurial: Intramuscular injection. Dose of Metallic Mercury in grains	Treatment: Mercurial: Inunctions or Oral (Preparation and dose)	Treatment: Other Methods	Signature of M.O. (Each M.O. will sign his name in full on the first occasion; subsequent entries may be initialled)

Army Form I. 1238.

SYPHILIS CASE-SHEET.

Regtl. No. — Rank and Name Bredin W.J. Pte. Corps 109 C.E.F.

Placed on Syphilis Register at Aldershot on 2.10.16 No. in Register 905/16

Disease contracted at Toronto Canada 12.7.16. Primary sore appeared on (date) 20.8.16.

CONDITION WHEN PLACED ON REGISTER.

Primary sore—character and site Ulcerative Sore in Sulcus of Penis.

Lymphatic glands Groin glands shotty. No Inguinal bubos

Skin (nature and distribution of rash) Roseolar & papular rash on head trunk & limbs

Mucous membranes fauces slightly injected on condylomata on haemorrhoids

Other symptoms

No headaches
no chills
no loss of hair
no pain in joints or bones
Eyesight normal

Examination of exudate from sore—Spirochaeta Pallida (present or absent)
Examination of blood serum—Method employed (original or modification)
Wassermann reaction Result (positive or negative)
} Not Examined.

Station Aldershot Date 2.10.16 Signature of M.O. [signature]
Captain, R.A.M.C.
Specialist in Dermatology,
Aldershot Command.

Struck off Syphilis Register at on

Cause of being struck off Register { (a) Recovered / (b) Transferred to Army Reserve / (c) Discharged from Army }

Station Date Signature of M.O.

(9 38 38) W 1621—1106 100,000 5/15 H W V(R) Forms I. 1238 8

N.B.—On completion of a course of treatment a red line to be drawn across the page, and the date when the next blood test is due to be entered in red ink below the line, *e.g.*, "Blood test due 15.5.14."
The date and result of the blood test to be entered; and if negative, the date on which the next blood test is due to be also entered.

Station	Date	Symptoms and progress (Date of admission to hospital, and date of discharge from hospital, to be entered in red ink.)	Weight clothed, without boots—lbs.	Urine: Normal (N.) Albumen (Alb.)	Wassermann Reaction: Method {Original (O.) Modification (M.)}	Wassermann Reaction: Result {Positive (+) Negative (—)}	Treatment: Arsenical: Intravenous Injection. Dose in grammes: Salvarsan	Treatment: Arsenical: Intravenous Injection. Dose in grammes: Neo-Salvarsan	Treatment: Mercurial: Intramuscular injection. Dose of Metallic Mercury in grains.	Treatment: Mercurial: Inunctions or Oral (Preparation and dose)	Treatment: Other Methods: Galyl	Signature of M.O. (Each M.O. will sign his name in full on the first occasion; subsequent entries may be initialled)
Aldershot	2.10.16	Admitted hospital.										
	4.10.16	Kharsivan injection	136	N	—	—	·5K	—	1gr	—	—	[illegible] Capt.
	6.10.16	Discharged hospital No Active Signs.										
	7.10.16	Galyl injection	136	N	—	—	—	—	—	—	·4G	
	10.10.16	Galyl injection	134	N	—	—	—	—	1gr	—	·4G.	
	14.10.16								1gr.			
	21.10.16	Galyl injection	134	N	—	—	—	—	—	—	·4G	
	28.10.16								1gr			
	31.10.16	Galyl injection	134	N	—	—	—	—	—	—	·4G	
	4.11.16								1gr.			
	11.12.16	Galyl injection	136	N	—	—	—	—	1gr	—	·3G.	
	5.9.17	Wassermann Test. No Active Signs. Result—Negative			O	—						
		Finished 1st Course of Treatment										

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.

Yes.

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 6 Months.
(*c*) Home service (Canada only),	(" C)	~~(Yes~~ or No.)	No 6 Months.
(*d*) Temporarily unfit.	(" D)	(Yes ~~or No.~~)	Yes.
(*e*) Unfit for service in Categories A, B and C	(" E)	(Yes or No.)	N.A.

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.)

Remedial treatment to knee 6 Months. Also treatment for V.D.S.

(*b*) ~~Does not require treatment.~~ N.H.A.
(*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.)

invalided to Canada.

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

W.J.McAlister Major C.A.M.C. *President.*

PLACE C.C.O.H.Matlock Bath.

D.S.Lewis Capt. C.A.M.C.
W.H.Avery Capt. C.A.M.C.
} Members

DATE 14-4-19.

"W". **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.....

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 C.C.O.H.Matlock Bath DATE 14-4-19.

1. 1 (*a*) Unit 6th. Can Reserve (*b*) Regimental No. ---- (*c*) Rank Lieut.

(*d*) Surname BREDIN. (*e*) Christian name WILLIAM THOMAS.

(*f*) Home address 26 De Isle Avenue. Toronto. Ont.

(*g*) Next of Kin Mark Bredin. (*h*) Relationship Father.

(*i*) Address of Next of Kin Same Address.

2. Age last birthday 31. Date of birth 26 Oct. 1887.

3. Enlistment, or Appointment (if an Officer) (*a*) Place Lindsay. (*b*) Date Nov. 12-15.

4. Personal description:

(*a*) Height 5' 7" (*b*) Weight 128 (stripped) (*c*) Complexion Fair.

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

Scar on right forearm- Left Forearm- outer side. Both knees (Specific Ulcus) Old.

5. Former trade or occupation Breadmanufacturer.

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.	145.

	Periods From	Periods To
Canada (Officers Statement.)	Nov. 12-15.	July 23-16.
England	July. 31-16.	Dec. 27-17.
France or other theatres of War	Dec. 27-17.	Sept.12-18.

7. Original disease, or injury CONTUSION OF JOINT (KNEE LEFT).

(*a*) Date of origin 27-2-19. (*b*) Place of origin England.

(*c*) Cause Traumatism (accidental) fall from Horse.

M. F. B. 227.
400M.—11-18.
1775-39-522.

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.)

(Synovitis left knee) Chr. Marked weakness of the left knee, associated with partial loss of function, with necessity of rest of the part for therapeutic reasons.

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:- General condition fair. No emaciation or apparent anaemia. Chest and lungs negative. Other systems:- Heart negative.
Exam:- The left knee exhibits marked thickning, partially due to fluid in the synovial sheaths and bursae. The patella is not free when leg is relaxed in extension. The joint cannot be(actively) fully flexed or extended, although there is a good range of movement improving with treatment. Subjective:- That the leg is weak- becomes tired on walking a short distance associated with pain and marked swelling.

(*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: Yes. (Albumen and Sugar will be excluded.)

Special Senses: No. Respiratory System: No. Integumentary System: Yes.

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

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

Skin on forearms and legs exhibit old scars from secondary luetic infection. Wasserman (Dec. 14/1918.) Positive.

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

While exercising in gm. at Seaforth 27-2-19. accidentally struck knee. Became swollen. Admitted to Eastbourne 3-3-19 rest: transferred to Hastings 3-3-19 where counterirritations and bandages were applied. Improvement marked: Transferred to C.C.O.H. 2-4-19. Remedial exercises and electrical treatment instituted..

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*).)

Contracted V.D.S. July 1916 Course of treatment. Scabies and Dermatitis. France April 1918. Good recovery. 13th C.G.Hosp. Hastings V.D.S. 6-9-18. one relapse with recurrence of ulcus: Course of treatment finished. requires further treatment. No evidence of active (Dec.1918. lesions now. Last Wasserman 16-12-18. Positive.

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

Scars of Legs and Arms.(V.D.S.)
Enlargement left knee.

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

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

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? 6 Months.

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

Routine Hospital. Remidial exercises, and 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)

Yes remedial exercises and massage. Also treatment for V.D.S.

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

17. Recommendations. That he be invalided to Canada for further treatment to knee: Also that he may receive further treatment for his luetic infection.

W.H. Avery Capt. 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 Wm. T. Bredin. 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

W.J.McAlister Major C.A.M.C. W. T. Bredin. Lieut. Rank.
Signature of invalid examined.

Essequibo 17/5/19

B 207

AUDITOR	PAYMASTER

20

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

M. OR S. REGT. No. RANK LIEUT, NAME (IN FULL) BREDIN WILLIAM THOMAS (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? No. DATE EFFECTIVE

TO WHOM PAID RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F. 6th Res Bn IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION TRANSFERRED TO 21 Delisle ave DATE AUTHORITY

DATE OF ATTESTATION 12/11/15 OK TRANSFERRED TO Toronto DATE AUTHORITY

ASSIGNED PAY $ NIL DATE EFFECTIVE

PAYABLE TO RELATIONSHIP ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE EFFECTIVE

DISCHARGED PLACE DATE 20/9/19 REASON Demob AUTHORITY D0262 IF ENTITLED TO POST DISCHARGE PAY Yes

MONTH	PAY AND F.A. NO. OF DAYS	PAY AND F.A. RATE	PAY AND F.A. AMOUNT $	PAY AND F.A. AMOUNT C.	OTHER CREDITS $	OTHER CREDITS C.	$	C.	TOTAL CREDITS $	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																																					
31/5/19					NIL												15	00									13	00									17/5/19 adv Clg before maiden Res Messg 6-31/5/19
																																	28	00	28	00	
June	30	3	90	00	27	20			117	20	25/6/19 114924						76	20									28	00			117	20					T.O.S., D.O. 147 Sub 18-5-19 — 2-6-19 AD149 Res messg
																											13	00									
July	31	3	93	-					93	-	31-7-19 133438						93	-													93	-					
Aug 1	31	3	93		54	40			147	40	26/8 146801						147	40													147	40					Subs 9/8 to 9/9/19 AD724
Sept 1	20	3	60	-					60	-	20/9 148357						60	-													60	-					
183 days		3	-		549	-			549	-			AR 46	Oct	21	1464847											183	-			183	-	366	-			
													171	Nov	19	1780737											90	-			273		276				
													195	Dec	17	1752994											93				366		183				
													222	Jan	20	1754600											90				456		93				
													249	Feb	20	1865892											93				549		0				
					549	00			549	00																	549	00			549	00					

100M-1-19.—L. L. 53962-M. & D. 9723.
M. F. W. 2596.
1772-39-1890.

FORM P. 15. 12519—16M—1-3-18 H.W.V.Ld.—3717-18.

ASSIGNED PAY.	UNIT. NAME OF	RATE OF P. AND A.	RANK.	~~DATE~~ mess.	AUTHORITY	NAME. 14
Beneficiary	156 Bn	Pay $2.00 P.D.	Lieut	31 7/16	7 Can DRO	Name Bredin
Address	21 Bn	F.A. $0.60			1225 G.T.D. 7/16	Initials W. T.
		Messing $1.00				Bank of Montreal Trafalgar Sq.
Amount. $						
Separation Allowance issued. Yes or No.....		add'l Outfit all^ce 1/8/18 $100.				

1918-19 1919-20

DATE 1918	PARTICULARS		CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialed by P.M. in every case.	INITIALS
apl 3	Balance Forward						Nil.		
.12	Pay R.			108.					
.22		Bank	0959		108.		0		
May 6	Pay R.			111 60					
.22		Bank	~~274~~ 2474		111 60		0		
June 22	Pay R.	Bank	4063	108.	108.		0		
July	Pay R.	Bank	5404	111 60	111 60				
Aug 16	Pay (R)	Bank	6953	111 60	111 60				
Sep 23	Pay R.	Bank	8930	108	108.		0	Admitted 9 Ho. V. 28. 7/18 1 Hold 1.60 p.d. Ch 1084 Vo 11658	
Oct 21	Pay R	Bank	10667	111 60	23 60		Cr. 88 00		
31	Add. Outf. all. 1/8/18	Bank	10997	100	100		Cr 88		
Nov	Pay Reg. adj from 12/9/18	Bank	12623	140 -	80		Cr. 148	Discharged Nov 28 12/18 "42" bl. 1176 80 21460	
Dec 17	Pay R	Bank	13485	124.	62		Cr 210.		
1919 Jan 13	Adv^ce Jan Pta bal^ce Deaf^ce on a/c of '42' from 7/8 to 28/12/18	Bank	14735		110				
20	bl. 1084 + 1176 80 1760				224				
21	Pay (R) Jan			124			0	Retro to Can L.S. to 31/1/19 1 fr Ledger	

FORM P. 15. H.W.V.Ld.—3717-18.
12519—16M—1-3-18

ASSIGNED PAY.	UNIT. NAME OF	RATE OF P. AND A.	RANK.	DATE	AUTHORITY	NAME.
Beneficiary Address Amount. $ Separation Allowance issued. Yes or No.....	21 Bn	Pay 200 F.A. 100 Messing 100	Lieut	31/7/16		Bredin Name Initials W. J. Bank of Montreal Trafalgar Square

DATE 1919	PARTICULARS		CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialed by P.M. in every case.	INITIALS
Feby	Pay (R) Feby.			112 -				31/1/19 Dep Sta as usual	W
20		Bank	17006		112 -				
Mch	Pay (R) March			124					
		Bank	18394		124				
Apl	Pay (R)			120 -					
24		Bank	1044		120 -			Retd to bank	
May 1	Advance Pay H/A	Bank			124	Dr 124		L P6 to 31/5/19 (HQ)	
16	Pay (R)			124 -				Jfr to N.B. ledger	12 6
								Trom ledger 14.	10/19

P—15.

ASSIGNED PAY.	UNIT. NAME OF	DATE	AUTHORITY	RANK.	~~DATE~~	AUTHORITY	NAME. 9 B-824
Beneficiary	109th Bn.			Lieut.	31-7-16	From Canada	Name Bredin, W.J.
Address	156 "					O.R.O. #1225 C.A.D. d/7-8-16.	Initials
							Bank of Montreal.
Amount. $							
Separation Allowance issued. Yes or No.....							

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	Avg bal from Canada		40 60					
	Pay Aug mess from 31/7/16		112 60					
25	Bank			112 60		0		
Sept	Pay Sept R		108					
25	Bank			108		0		
Oct	Pay Oct R		111 60					
26	Bank			111 60		0		
Nov 23	Deductions V.D. from 2/10/16 – 6/10/16 Gen Ge.	3490		5				
24	Pay Nov R		108					
28	Bank.			103		11		
Dec 4	Pay Dec R		111 60					
15	Bank			111 60		0		
1917 Jan 22	P & A Jan.		111 60					
23	Bank	19288		111 60		0		
Feb 16	Feb P & A.		100 80					
21	Bank	21931		100 80		0		
Mar 12	P & A Mar		111 60					
23	Bank	24836		111 60		0		

2227—10M—1/1/17

ASSIGNED PAY.	UNIT. NAME OF	DATE	AUTHORITY	RANK.	DATE	AUTHORITY	NAME.
Beneficiary Address Amount. $ Separation Allowance issued. Yes or No.....	156-Bn.		Pay $2.00 P.D. Pa. $0.60 " Messg $1.00 "	Lieut	31.7.16	In Can DRO #1225 C/D d/7/16	Name Bredin Initials W. J. Bank of Montreal Traf Sq Bch 1/18

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 22	Apr Pay R.			108					
		Bank	3017		108		—		
May 22	May Pay R			111 60					
26		Bank	6039		111 60		—		
June 9	Pay R.			108					
"	Bank		7999		108				
July 10	Pay R			111 60					
17	Ded^n V.D. 2-6/16 Less $5.00 alr. recv'd.	V^o	1403		3				
27		Bank	13082		108 60		—		
Aug 9	Pay R.			111 60					
24		Bank	17394		111 60		—		
Sept 15	Pay R.			108					
25		Bank	21863		108		—		
Oct 11	Pay (R)			111 60					
19		Bank	26190		111 60		—		
Nov 14	Pay (R)			108					
20		Bank	30662		108		—		
Dec 7	Rations 10 days 6/7		7418					13/4	
10	Pay (R)			111 60					
1918		Bank	35096		111 60		—		
Jan 10	Pay (R)			111 60					
21		Bank	39272		111 60		—		
Feb 8	Pay (R)			100 80					
19		Bank	40800		100 80		—		
Mch 8	Pay R			111 60					
21		Bank	42423		111 60		—		

FORM P.15
2227—10M—1/1/17

ASSIGNED PAY.	UNIT. NAME OF	DATE	AUTHORITY	RANK.	DATE	AUTHORITY	NAME.
Beneficiary Address Amount. $ Separation Allowance issued. Yes or No.....	15b Bn			Lieut.			Name Bredin Initials W. T. Bank of Montreal 7 flg. Sqr 1/18

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