

NAME LACKBURN, Charles Daniel Scott REGT. NO. 100 UNIT PPCL H. Q. FILE NO. 33331

3
1

CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505
REFERENCE

NON-EFFECTIVE BY

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

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

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

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

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

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

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

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

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

MEDICAL EXAMINATION (M.F.W. 129)

1 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)

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

1 PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 208)

PARTICULARS OF CHARACTER (A.F.W. 3226)

COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)

1 *Statement on Discharge*

1 *M 4 W 1251*

1 *Cas Card*

1 *Small Sheets*

1 *Pay Card*

1 *Form etc.*

1 *CAN C 5009*

2 *Proceeding of Med Boards*

3 *A 4 91234*

3 *A 4 B 181*

1 *B 149*

38

411100
M 29-11-70

402653

DEATH

Category

(P)

(H)

(M)
29/1/50

CANADIAN FORCES
RECORDS CENTRE
PERS JACKET
ROOM

DISCHARGE

Category

MED-UNFIT

DESERTION

402653

16-2-21

24-27

30-23

1

Surname... *BLACKBURN* Regth. No. *411100* //

Christian Names... *Charles David Cecil*

Rank... *Pte* File No. *649-B-6089*

Unit... *P.P.C.L.D.* Theatre of War... *France*

Date arr. England... .. Date arr. T. of War... *17-7-15*

(no card made previously)

Address... ..

20 $\frac{2}{34}$

Barrister Solicitor Notary Public
St. Walburg. Inst.

ROLL No. *C. 567*

DESP. MAR 8 1934

REGN. NO.

91

DEPARTMENT OF VETERANS AFFAIRS

402698

To Copy for H.O. FILE

Ottawa Ont
Date Jan 12/62

Attention of

NAME BLACKBURN, Charles David
Cecil.

SERVICE 411100 CEF
NUMBER

C.P.C. No. 27064
W.V.A. No.

NAVY
ARMY X
R.C.A.F.

The DEPARTMENT has received information from

Donnelly & Polley, Barristers Solicitors Swift Current Sask. Jan 4/62

(State authority and source of information of death)

regarding the death of the above mentioned veteran.

Particulars are as follows:

Date of Death Dec 28/61
Cause of Death
Place of Death Saskatoon, Sask.

Name and Address of next of kin (if known)

Copies to: W.S.R.
V. I.
~~PAY~~
D.O. REGINA
H.O.

} Destroy form if advice of death already received.

for *M. J. W. Jell*
Chief, Central Registry

This space to be left blank for the Chelsea Number.

H

H M T F 8261

4456.

Army Form B. 268.

Sept 25 1917

90

Proceedings on Discharge.

6/10/39

(When forwarded for confirmation the documents named on page 4 should be enclosed.)

No. 411100 Army Rank Pte

Name Blackburn, C. D. G.
(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)

Corps G. O. P. S.

Battalion, Battery, Company, Depot, &c. P. P. L. I.
(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)

Date of discharge 8. 2. 18.

Place of discharge Regina Sask

1. Description at the time of discharge.

Description at the time of discharge.		Descriptive marks.
Age <u>22</u> years <u>5</u> months		<u>Sherapnel W. R. Jaw</u> <u>2nd Finger R. Hand.</u>
Height <u>5</u> feet <u>4 1/2</u> inches		
Chest measurement { girth when fully expanded _____ ins. range of expansion _____ ins.		
Complexion <u>Fair</u>		
Eyes <u>Blue</u>		
Hair <u>Medium</u>		
Trade <u>Law Student</u>		
Intended place of residence (To be given as fully as practicable)	<u>Vanda Sask</u> <u>Saskatoon</u>	

(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)

2. The above-named man is discharged in consequence of being medically unfit: wound

(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)

3. Military character:— Good

4. Character awarded in accordance with King's Regulations:—

To be filled in on the soldier quitting the Colours.

Certified that the above is an accurate copy of the character given by me on Army Form B. 2067* and that Army Form D. 489 was awarded in this case.

P. V. M. / 3/20/18
Initials of Commanding Officer.

Army Form B. 2088 has been issued to*

U.S. 9. Comp. 30-12-1917

5. He is in possession of the following number of G.C. badges (if the man is a N.C.O. and enlisted prior to 1st July, 1881, the number he would have been entitled to had he not been promoted should be stated).

Is it probable that he will be entitled to another good conduct badge before the confirmation of these proceedings?

Classification for service, or proficiency pay... .. Class _____

6. Campaigns, Medals and Decorations

France 15 Months
1915-1916

Certificate of education

7. His accounts are correctly balanced, and I have impartially inquired into all matters brought before me in accordance with Regulations.

(Place) Regina Sash
(Date) Feb. 8th 1918

[Signature]
Commanding _____ Major _____
A/O. C. "H" Unit, M.H.C.G. _____ Regiment.

8. Certificate to be signed by the soldier on discharge.

I hereby acknowledge that I have received all my pay and allowances (including clothing allowance), and all just demands up to the present date, subject to the reservations of the claims noted on the 3rd page.

(Place) Sastatoon [Signature] (Signature of Soldier.)
(Date) July 15th 1918 [Signature] (Signature of Witness.)

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

9. Additional certificate in the case of a soldier who takes his discharge at his own request.

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

(Signature of Soldier.)

10. Statement of service.

Service towards engagement to _____ (the date to which the record of service is completed) 2 years 327 days.
Further service " " _____ (the date of confirmation of discharge) " " "
Total ... 2 " 327 "

11. Confirmation of discharge.

The discharge of the above-named man is hereby confirmed for _____ (date)

(Place) Regina Sash
(Date) Feb. 8th 1918

Signature [Signature]

Major _____
A/O. C. "H" Unit, M.H.C.G.

Commanding officers (or the Paymaster if at Netley) will issue to every discharged soldier whose claim to pension, either on account of service or disability, is to be brought under the consideration of the Chelsea Board, a memorandum for his guidance on Army Form D. 401, and will at the same time transmit to the Secretary, Royal Hospital Chelsea, a descriptive return of the man on Army Form D. 400.

RESERVATIONS REFERRED TO AT PARA. 8.

(To be signed by the soldier. When there are none, it is to be so stated and signed by the soldier.)

I hereby certify that there are
no reservations.
Chas. Blackburn

LIST OF DISCHARGE DOCUMENTS:

1. Proceedings on discharge. (Army Form B. 268.)
2. Proceedings on transfer to reserve (if any). (Army Form B. 2056.)
3. Duplicate attestation.
4. Army Form B. 97 (if any).
5. Declaration of change of name (if any).
6. Re-engagement paper (if any). Army Form B. 136.)
7. Authority for continuance, or extension, of service (if any). Army Form B. 221.)
8. Court of Inquiry on an injury (if any) (Army Form A 2.)
9. Regimental conduct sheet. (Army Form B. 120.)
10. Company conduct sheet. (Army Form B. 121.)
11. Copies of convictions by Civil Power (if any).
12. Medical history sheet. (Army Form B. 178.)
13. Medical report on invalid (if any). (Army Form B. 179.)
14. Copy of receipt for purchase money (if any).
15. Attestation of fraudulently enlisted man for corps in which he has not been held to serve (if any).
16. Detailed statement of former service allowed to reckon towards pension (if any).
17. Copy of 3rd page attestation (in the case of men from abroad entitled to deferred pay who go to Netley or the discharge depot for discharge).
18. Descriptive return (Army Form D. 400), where required. See section 11 on second page.
19. Active service casualty form. (Army Form B. 103.)
20. Employment sheet. (Army Form B. 2066.)

In the case of recruits who are rejected before, or on, final approval, the discharge documents will consist of—

1. Duplicate attestation. (On third page the date and cause of discharge will be entered and signed by the competent military authority).
2. Medical history sheet (if any). (Army Form B. 178).

Instructions as to the preparation, dispatch, and custody, of discharge documents.

1. When a soldier is to be discharged, the documents retained with the duplicate attestation will be placed inside this form. Should any of the documents be missing, an explanation of the deficiency, signed by the commanding officer, must be substituted for the missing document. The officer in charge of records will then extract from the original attestation, any documents required to complete the list of discharge documents enumerated in the margin, which will then be placed in this form in the sequence given.

2. When men are discharged from the colours at home as medically unfit, or with claims to pension, Army Form B. 268 will be sent confirmed, together with the duplicate attestation and documents retained therein to the officer in charge of records 10 days in advance of the date for discharge in the case of invalids, and 14 days in other cases. This officer will then extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin, place them in this form, and after carefully checking the duplicate attestation with the original forward the whole to the Secretary, Royal Hospital, Chelsea. When such men are discharged abroad, the same procedure will be adopted as above, with the exception that the discharge documents will be sent to the officer in charge of records immediately after discharge takes place (except in the case of men who are granted gratuities on discharge from local battalions or companies, Royal Artillery).

3. When soldiers are sent home from abroad for discharge, the documents retained with the duplicate attestation will be placed inside this form and sent home with the men for transmission to the officer who carries out the discharge, together with the following additional forms:—

- (a) Discharge certificate (Army Form B. 2079 or Army Form B. 264).
- (b) Character Certificate (Army Form B. 2067) if entitled.
- (c) Copy company conduct sheet (Army Form B. 121) when required under King's Regulations.

The duplicate attestation and documents retained therein will be sent to the officer in charge of records, who will extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin and place them in this form.

4. The discharge documents of re-enlisted pensioners, on re-discharge, will be sent to the officer in charge of records, who will extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin, place them inside this form, and forward the whole to the Secretary, Royal Hospital, Chelsea, irrespective of the cause of discharge.

5. The original and duplicate attestations of recruits who are rejected before, or on, final approval will be retained by the approving officer for one year, when they will be destroyed.

6. In all other cases the discharge documents will be sent, directly the discharge is carried out, to the officer in charge of records of the unit concerned.

7. Postage need not be paid, and receipts are not required, in the case of documents sent to Chelsea or to the War Office,

8. When the discharge documents of men not entitled to pension are sent to the officer who will have final charge of them, they are to be accompanied by Army Form B. 279, and that officer will, if they are found to be correct, sign and return Army Form B. 279. Should any document be missing, he must at once apply for it.

9. The officers having final charge of the discharge documents will arrange them according to regimental numbers, and enter the names in the alphabetical index, Army Book No. 129.

CHANGE OF ADDRESS

411100
No. _____

Rank _____

Surname *Blackburn*

Christian Names *C. D. G.*

Address _____

*404 Connaught - Block
Saskatoon
Sask*

*29
11/22*

Section _____

D-19.
LHP.

4456

*

ATTESTATION PAPER.

No. *A-11,100*

Folio. *B. 13*

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name?..... *Charles David Cecil Blackburn.*
2. In what Town, Township or Parish, and in what Country were you born?..... *Dewsbury, Yorkshire, England.*
3. What is the name of your next-of-kin?..... *David Blackburn*
4. What is the address of your next-of-kin?..... *Vonda, Sask.*
5. What is the date of your birth?..... *August 31st. 1895.*
6. What is your Trade or Calling?..... *Student.*
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?..... *No.*
If so, state particulars of former Service.
11. Do you understand the nature and terms of your engagement?..... *Yes.*
12. Are you willing to be attested to serve in the **CANADIAN OVER-SEAS EXPEDITIONARY FORCE?**..... *Yes.*

C. Blackburn (Signature of Man).
J. Macpherson (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *Charles David Cecil Blackburn*, 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.

C. Blackburn (Signature of Recruit)
J. Macpherson (Signature of Witness)

Date *March 18-15* 1915

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *C. Blackburn*, 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.

C. Blackburn (Signature of Recruit)
J. Macpherson (Signature of Witness)

Date *March 18-15*

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 *Kashanov* this *19th* day of *March* 1915

H. Ford (Signature of Justice)

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

G. Barclay (Approving Officer)

A. DeMay

4456

Description of Charles David Cecil Blackburn on Enlistment.

Apparent Age.....19 years.....7 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height.....5 ft. 3 1/2 ins.

Chest measurement { Girth when fully expanded.....34 1/2 ins.
Range of expansion.....1 ins.

Complexion.....Fair.

Eyes.....Blue.

Hair.....Medium.

Religious denominations { Church of England.....Yes.....
Presbyterian.....
Wesleyan.....
Baptist or Congregationalist.....
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.)

Scar over left eye.

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.....Nov 18th.....1915

Place.....Sasatoon

A. Stewart
Capt and
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.

.....Charles David Cecil Blackburn.....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.

.....A. Stewart.....(Signature of Officer)

Date.....15 June.....1915

No. in Admission and Discharge Book. <i>2BT1846</i>	Regimental No.	Rank.	Surname.	Christian Name.
	<i>411100</i>	<i>Private</i>	<i>Blackburn</i>	<i>C</i>
Year <i>1917</i>	Unit.	Age.	Service.	
	<i>P. P. C. L. I.</i>	<i>21</i>	<i>27/17</i>	
Station and Date.	Disease			
<i>May 18/1917</i>	<i>G. Sw R. Jaw</i>			
	ONTARIO MILITARY HOSPITAL ORPINGTON, KENT.			

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

Station
and Date.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book. 2475
Year

Regimental No. A. 11100

Rank. Pt.

Surname. Blackburn

Christian Name. C. D.

Unit. C. C. A. C.

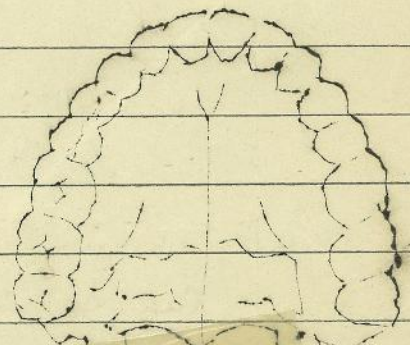
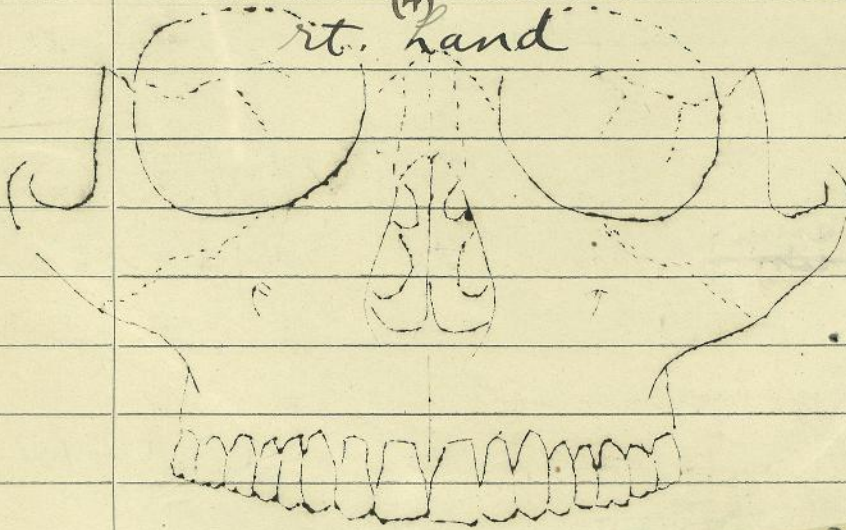
P. P. C. L. I.

Age. 21

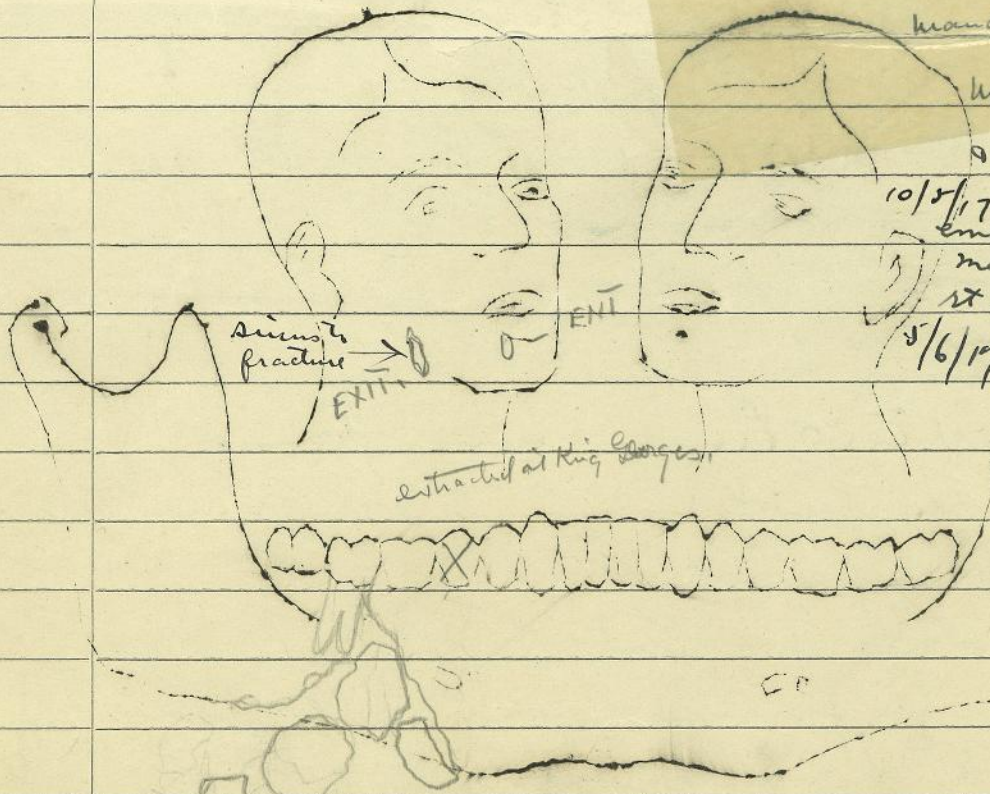
Service. 19/12
15/12

Station and Date.

Disease Face Fract. Mandible Rt.
it. hand



2331 XRay shaped fracture
mandible. non union.



Multiple displaced fragments
A sequestra present.

10/5/17 :- Small piece sharp.
embedded in angle left
mandible. Union of fract.
rt. mandible

5/6/17 R 1882/666

union for

Small fracture
EXIT

ENT

extracted at King Georges

Sept. 15. 16. Shell - Torus.

22. Gun Camiers - Dressings

King Georges. Tooth pulled, impressions. Finger amputated

Beam. Fracture Mandible Rt - Displacement Left fragment
partly & to Rt.

Pharynx leg
nose
Torus

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

Station and Date.

Orthodontia band, appliances below
above bands, hooks & wires

Jan 18. x Fibrous union, occlusion almost correct
External ~~sinus~~ ^{sinus} persists - practically
no discharge.

Feb 24 - External sinus apparently well healed.
Cap splint in place. Inserted date? Feb.

Mar 12 In Good condition

May 13 New X Ray shows bony union

18/5/17 Transferred to Orpington

May 20 Bone end good - lower (mandible), splint -
padding

June 2nd - splint removed from mandible (Cap splint)
apparently bony union -

June 5 X Ray at 2 1/2 & 1 1/2 - union firm

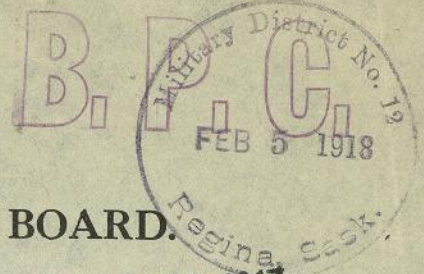
June 4-7 X-Ray Report.
Fracture of mandible.
Union has progressed.

June 30 ~~Union firm~~ - small piece of bone
like a horn projecting down - this
was removed under gen anaesth &
small scar on chin excised.

July 16th - all healed up.

July 17 Patients boarded - left on 10 days journey
Islington Capto
Cam.C

4456



PROCEEDINGS OF A MEDICAL BOARD.

ONTARIO MILITARY HOSPITAL,

11 JUL 1917

Dated at ORPINGTON, KENT. 1917.

No. 411100 Rank *PRC* Name BLACKBURN CHAS.

Local Unit _____ Overseas Unit *38th Bn* Age *21*

Ontario Military Hospital
Orpington, Kent.

Examination held at _____

DISABILITY
Overseas—Local
(scratch one off).

DIFFICULT MASTICATION

PRESENT CONDITION.

g.w. jaw right fracture bony union. Splint in place. Pain on chewing solids.

BOARD RECOMMENDS:—

- 1. Fit for Duty _____
- 2. Fit for duty after _____ weeks' physical training.
- 3. Fit for Temporary Base Duty *CTII* _____ weeks.
- 4. Fit for Permanent Base Duty _____
- 5. Discharge *will improve* _____

Signatures:—

Members { *H. W. Williams* President
W. J. ...
J. W. R. ...



APPROVED

ONTARIO MILITARY HOSPITAL,

Dated ORPINGTON, KENT. 1917.

11 JUL 1917

For A.D.M.S.

H. W. Williams
Canadian London Area

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
C.F.T 270	911100	Pte.	Blackburne	C
Year	Unit.		Age.	Service.
1916	P.P.C.L.J		21.	17 Yrs.
Station and Date.	Disease <u>l.S.W face & fractured jaw; l.S.W. fingers</u>			
19.9.16	<u>Wounded on Sept 15th on the Somme &</u>			
Sept 25th	<u>taken to No 27 General Hosp^d Camiers; given A.T.S</u>			
	<u>Admitted to K.G.H. with two wounds on the right side of the face. Not extensive & mouth cavity not involved but lower jaw fractured</u>			
	<u>There is also a wound on the middle finger of the right hand; the finger being fractured in the region of the proximal interphalangeal joint.</u>			
	<u>Finger amputated through proximal interphalangeal joint.</u>			
	<u>Given 500 units A.T.S</u>			
	<u>Stitches put from finger; stump discharging; on foment.</u>			
	<u>Impression taken for dental splint W.C.S.D.</u>			
	<u>Trans to Westcliffe Hospl</u>			
	<u>F. S. Puggott</u>			

KING GEORGE HOSPITAL
 LONDON, S.E.
 Sept 27th 1916
 4

KING GEORGE HOSPITAL
 LONDON, S.E.
 14/10

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

Station
and Date.

4456
05

TR 49

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

No. 411100 Rank Pvt Name and Corps of disabled Soldier:— 38 Bu. Blackburn, Cecil David P.P.C. LV

Previous civilian occupation: Law student.

Cause of Disability:— Difficulty in masticating (fractured jaw)
Loss of part of middle finger R. hand

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

15 mos. Wound in jaw & R. hand.

Pres. Cmd. Scar at angle of jaw. Union complete
but jaw is drawn to right teeth do not meet.
Middle finger R. hand amputated at 2nd joint.
Cannot fully flex Ring finger, other good.
Heart & lungs normal.

Has a small sore in roof of mouth
requiring treatment, probably herpes
Has difficulty in chewing meat &
solids on account of imperfect articulation
of teeth & diminished power in muscles
of jaws.

OPINION OF THE BOARD.

Degree of incapacity. (Please state in fractions) (1) 20%
(2) 5%

Probable duration of incapacity:— Permanent

Does it render him permanently unfit for Military Service? W

Would operation, Special treatment, or use of appliances, etc., lessen incapacity?

Convalescent Home

Signature:—

N. Cairns Capt
President.

Station: Quebec

A. King Capt
J. H. English Lt
Members

Date: 13-10-17

APPROVED.

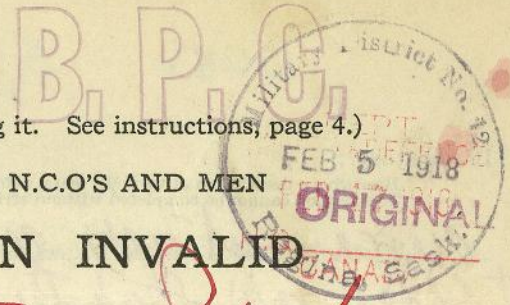
Date: 13 ¹⁰/₁₇

W. W. Carrick Major
Asst. Director Medical Services.

Date:

.....
Director General Medical Service.

4456



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

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

MEDICAL HISTORY OF AN INVALID

STATION Saskatoon DATE Feb 4/1918

1. (a) Unit PLD now H (b) Regimental No. 411100 (c) Rank PLC
(d) Surname Blackburn (e) Christian name Cheo. David Cecil

2. Age last birthday 22 Date of birth Aug 31 - 1895

3. Enlisted at Saskatoon on Mar. 19/1915
435 Ave E So Saskatoon

4. Personal description:—
(a) Height 5' 4" (b) Weight 118 (c) Complexion Fair
(d) Colour of hair Light Brown (e) Colour of eyes Blue (f) Identification marks as per nos 9-10

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

6. Former trade or occupation Student at Law

7. (a) Service	PERIODS	
	From	To
	<u>March 19/15</u>	<u>Feb 4/18.</u>

(b) Has he been overseas? Yes.

8. Present disease or disability (use authorized nomenclature if possible) Make frog Rt Hand amputated 2nd joint
Ring finger Rt Hand locks completely fractured mandible

(a) Date of origin All in Sept 15/16 (b) Place of origin Samuel

(c) Cause* G. S. W.
*(Here include original disease or injury)

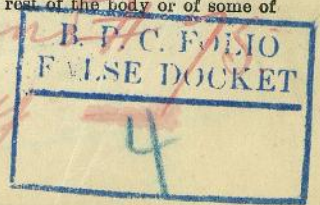
If further space is needed for this or other answer, use page 4

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

entire mandible - is confined to mandible & the Rt Hand. Every motion of mandible except for turning to the left - motion to the Right ok. The cold seems to stiffen chin muscles. Pressure about angle of mandible Rt side produces pain in same region. Teeth have all been supplied & satisfactory.
Make frog Rt Hand amputated at 2ND interphalangeal articulation
Ring finger was stayed on dorsum ^{between 1st & 2nd} proximal joints and all add flexion. That finger at 2ND joint completely first joint locks 90° - can't touch palm with same finger. Grip in Hand # 60

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

Sup in left hand
Beets well in every other way



10. History :

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

He cannot get any good satisfaction in chewing on
left side of jaw but teeth supplied fit well & he should
learn to chew on left side. No pain connected with this
disability, although he cannot chew hard substances
very well - many of the muscles of lower jaw were torn up.

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

① 6% ② 4% ③ 15%.

12. Did the disability arise on or off duty?

All on duty
no

13. Was a Court of Inquiry held?

14. If the disabling condition had its origin before enlistment, has it been aggravated on service?

no

If the answer is in the affirmative, state in percentages, to what extent the soldier is incapacitated by that aggravation.

15. Was the disability caused or aggravated by negligence, by vice or by misconduct, or by unreasonable refusal to accept treatment?

no

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

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

① ② ③ Permanent

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

none now.

18. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit?

no.

19. Can the former trade or occupation be resumed?

yes.

20. Recommendations.

Discharge - further hospital treatment
will not benefit & he is desirous of passing
under his own control and continue his studies

Geo R. Peterson
Medical Officer by whom the case is brought forward.

STATEMENT OF THE SOLDIER.

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

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

W. B. Blackburn
Signature of soldier examined.

44156

OPINION OF THE MEDICAL BOARD

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

Yes

22. Is the soldier fit for

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

23. It is certified that the soldier

- (a) ~~Does require treatment.~~ (Give the nature of the condition and of the treatment required and its probable duration).
- (b) Does not require treatment.
- (c) Should pass under his own control.
- (d) ~~Should not pass under his own control.~~
(Strike out condition not applicable).

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

That he be placed in Cat E discharge as further treatment will not materially benefit & it is advisable that he pass under his own control

G. Wright Capt President
R. G. Macdonald Members
C. K. Langford Capt

STATION *Saskatoon*

DATE *Feb 4 18*

APPROVED BY

DATE *5-2-18* *for capt see 11*

APPROVED BY

DATE

J. J. Macdonald
Assistant Director of Medical Services.

FALSE BOOK
3

Director-General of Medical Services

4456

81/2/18
9320

TO BE COMPLETED WHEN TREATMENT IS REFUSED

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

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

INSTRUCTIONS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of pages 1 and 2 of this Form. The President of the Board of Medical Officers is responsible for the proper completion of the space, of page 3, reserved for recording the Proceedings of a Board of Medical Officers.
3. In answering the questions, Medical Officers will carefully obtain and record the soldier'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 soldier concerned, from witnesses, or from documents.
4. Special care is required in answering question 14. Please read the questions carefully. All questions must be answered.
5. The nomenclature of diseases to be followed is that described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London, (1915), by Messrs. Harrison and Sons.

4456

H. Q. FILE No. 649-

NAME Blackburn Charles David *4/11/00*

RANK AND CORPS *Pte R.P.C.L. I (Corn 38th 1st RD)*

CABLE

NATURE OF CASUALTY

NO. DATE

01653 27-9-16

*adm to #22 Gen Hosp Camiers
Sept. 17th Fracture jaw*

1349 20-8-17.

*Sailed from Liverpool for Canada
per S. Transport No 82, on 13th Sept. 1917
Special authority*

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
A459	#22 Gen Chambers	17-9-16	Fract lower jaw Bone
B151	King George Stamford St. S.E.	26-9-16	Frd jaw + hand, ²³⁻¹⁰⁻¹⁶ Sw
B165	West Cliff Can. C. & C. Golkestone	15-10-16	Frd. jaw
B320	Out Mil Byington	19-5-17	Frd. R. jaw
B359	Discharged	17-7-17	Fract lower jaw. 14-8-17.
W95	M. H. C. Regina	20-10-17.	St Chad's. O.B.
326.	M. H. C. Regina	21-11-17.	Trans. St. Chad's to Saskatoon
320.	M. H. C. Regina	15-11-17.	Trans. To Inpatients St. Chad's

Name **Blackburn.** Rank **Pte.**
Charles David Cecil.Reg. No. **A11100.**Unit **P.P.C.L.I.**

4456

Next of Kin **Canada.**

Date 1916	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
17-9	Yorvallea Hosp. Caniers.	Que. Lamer	Severe.	A H59	1653.	0 28/9/16
26-9	King Geo. H. Stamford St.			B151	(2)	
15-10	West bluff. Can. C. G. H. F. Stone			B3164		
19-5	Ont. Mil. Hosp. Orpington			B320		
17-7	Ont. Mil. Hosp. Orpington. DISCHARGED.		Do	B359		

Date of Examination... *Aug 14* 1917. Present Dental Condition.

411100 P/E Blackburn CDT Good
In case of loss or decay of teeth. Is the loss due to wounds, injury
or disease, directly attributed to Active Service?.....

Has he ever declined Dental Treatment?..... *No*.....

Recommendation.....

W.D. Mc Ewen Capt CADC

4456

4456

Surname Blackburn C. D. C. Christian Name or Names Reg. No. 471100

Rank Pte. Unit P.P.C.I.D. Co. Troop Batty

Hospital No 22 G.H. Camiers. Date of Admission 17-9-16

Transferred King George Stamford Hosp. 26.9.16

Westcliff C. Coy. Tba Hosp. 15.10.16

Oulario Military Orphanage Hosp. 19.5.17

Hosp.

Diagnosis Frac Lower Jaw Bone. (1) G. S. W. Jaw & Hand sev.

Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

DISPOSITION

Disch 17.7.17 Date

C.L. 28-9-16 4459

REMARKS

29.9.16 B1512

- 23.10.16 B165

- 25.5.17 B.320.

- 21.7.17 B359

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

RW

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

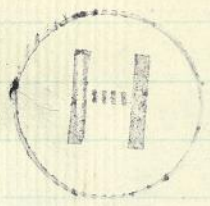
6.

7.

4456

22258

Rank Name BLACKBURN Charles David Cecil Reg'l No. A 11100
 Unit P.P.C.L.I. If in perm. Corps, What Unit? Married or Single Single
 Place and Date of Enlistment Saskatoon, Sask. 19th March, 1915. Place of Birth Yorkshire, Eng.
 Name and Address, Next-of-Kin David Blackburn, Vonda, Sask.



Assigned Pay Monthly \$ Payable to Relationship
 Separation Allowance \$ Payable to Relationship

N/E. R.B. No. 4696
 File R.L.
 Category Can. OR.

R133 B2 Oct

Discharge, Date and Place Reason Character

11-10-16

Report		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place	Date	REMARKS Taken from Official Documents
Date	From whom received				
31.7.15	O.C.P.C.L.I.	Taken on strength P.P.C.L.I.	Travis	17.7.15	M.I. 1122
28.9.16	" "	Adm. #22 Genl. Hosp.	Camiers	17-9-16	C.L. 9458 Frac. Lower Jawbone
4-10-16	" "	Travis to C.O.A.C.	Folkestone	23.9.16	69. O.N. P.I. 54
30-9-16	" "	King George Hosp	Stanford	26.9.16	C.L. B151
3.10.16	bbab	Taken on strength.	Folkestone	26.9.16	Pt. II O 431(a)
23-10-16	P.P.C.L.I.	Yfd to Westcliff	" "	15-10-16	6RB 165- J.S.W. jaw
11.3.17	O.C.A.C.	S.O.S. on transfer to East Ont Regiment	Hastings	10.3.17	Pt. II D.O. 117

4456

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				
16.3.17.	EORD	T.O.S. from CEAC	Seaford	11.3.17	Rx. 70.5
25.5.17.	49029	11d. Ontario Mil Hsp	Orpington	19.5.17	A.B. 320 + Pt. II 0.75 BOARD
21.7.17	✓	Dis. Ont. Mil. Hosp.	✓	17.7.17	Sp.B 359
29.8.17	EORD	On com. C. D. for dis.	Seaford	28.8.17	Pt. II 170.
18.9.17	✓	Cease on com. C.S.D. + S.S. to Canada for dis.	✓	15.9.17	Pt. II 191
	Dis Dept	To Cons. Home	M. J. No 12 Regina	25.9.17	N.R. 356

KRO.

Para 293 Sect. 25.

60

4456

Army Form B. 103.

29604

130 ✓

Casualty Form—Active Service.

Regiment or Corps P.P.C.I.

Regimental No. A11100

Rank Pte

Name Blackburn C. D. C.

Enlisted (a) 19-3-15

Terms of Service (a) ^{1 year or} duration of War Service reckons from (a) 19-3-15

Date of promotion to }
present rank }


Date of appointment }
to lance rank }

Numerical position on }
roll of N.C.Os. }

Extended _____

Re-engaged _____

Qualification (b) _____

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	PRINCESS PATRICIAS CANADIAN LIGHT INF.		16-7-15	
17/9/16	22 gen	frac jaw bone II 4 ser	22 gen	17/9/16	W3034
23-9-16	H/S Salta	frac-bone jaw.	H/S Salta	23-9-16	W3083 Pt II brods 4 d/-4-10-16.
					 Lieutenant for Lt Col. A. A. G.
30.09.16	P.P.Ch.I.	Adm King Gorge Hosp	Shafton St.	26.9.16	Pl. 13 151
3.10.16	ccac	Lakemore Strength	Folkestone	26.9.16	Pl II Do 431
11.3.17	ccac	S.O.S to EOR	—	10.3.17	Pl II Do. 117
16-3-17	EOR. & Ef	S.O.S from ccac	Seaford	11.3.17	Pl II Do. 5

(c) 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.
 (d) e.g., Signaller, Shoing Smith, etc., etc., also special qualifications in technical Corps duties.

26 OCT 1916

4456

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				
29-8-17 <i>capt</i>	<i>Dr. LORD.</i>	<i>On command from. BORD to Canadian Discharge Depot, Buxton.</i>	<i>Seaford</i>	<i>29.8.17.</i>	<i>Part II DO.170 dated 29.8.17. G. B. Wood, asst. Lieut & a/cy for OC. Can. Dis. Dept.</i>
29 AUG 1917	TAKEN ON STRENGTH C.D.D, BUXTON PT.	11 ORDER No.		204	<i>R. W. Mielke</i> for Lt. Col. Commanding Canadian Discharge Depot.
13 SEP 1917	EMBARKED FOR CANADA FROM	LIVERPOOL			<i>R. W. Mielke</i> for Lt. Col. Commanding Canadian Discharge Depot.

SURNAME.

Blackburn (644-B-6089)

CARD No. 8087

x P/O

CHRISTIAN NAMES

Charles David Cecil

S.O.S. Dis. 8/2/18
12

REGL. No.

A 11100

RANK

Pte

UNIT

~~384 (1st B. D.)~~ P.P.C. L.I.

Batt

FORMER CORPS

Nil

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Blackburn, David

RELATIONSHIP TO SOLDIER

ADDRESS

Vonda, Sask

Also notify: Capt Barclay. Local 121
Auth Eng Off 30-12-16

COUNTRY OF BIRTH

England Dewsbury

DATE

PLACE OF ATTESTATION

Saskatoon

DATE

March 19th 1915

Sailed from Montreal Per S.S.
018 29-30-15-93
L. L. 90589. -M. & D. 6312. "Missanabic" 24-6-15.

1142

Returned to Canada Per S. S. "Transport 8261" 13-9-17.
mat. J. 349.

MARRIED

SINGLE

yes

WIDOWER

TRADE OR CALLING

RELIGION

DESCRIPTION.

APPARENT AGE

YEARS

MONTHS

HEIGHT

FEET

INCHES

CHEST MEASUREMENT

INCHES

EXPANSION

INCHES

COMPLEXION

EYES

HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION.

PLACE

DATE

No. A 11100

RANK

pte

NAME

Blackburn, G.

D. C.

T. O. S. 19-3-15.

C April Paylist.

UNIT

38th Battalion, C. E. F.

M. D. 3

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915- March 19	1915- April 30	✓		

Name. BLACKBURN C.D. Rank. Pte. Regt. No. 411100 Unit. H.
 Battn. P.P.C.I. Camp or O.S. 0. File M. H. C. C. H. Q. File.
 Next of kin. Mr. D. Blackburn. Vemda, Sask.
 Discharged to Class. D. of D. 25% Conduct. V. Good
 Pension awarded. \$90.00 1 yr. Date of first payment. 9-9-2-18
 Address on discharge. Saskatoon, Sask.
 Diagnosis. Fracture Jaw, Loss of part of middle finger Rt. Hand. Date boarded. 13-10-17

DATE	CLASS	REMARKS	Part 2 Order
20-10-17	2	St. Chad 's Outpatient	#295
15-11-17	2	St. Chads	#320
21-11-17	2	Saskatoon from St. Chad's	#326
8-2-18		DISCHARGED	#38

760
 27
 4456

ORIGINAL

MEDICAL HISTORY SHEET.

411105
 H.I.

Surname Blackburn Christian Name Charles

Examined { on 12 day of December 1915
 at Saskatoon

Approved by [Signature]
 Rank 2nd Lieut. Amb. M.O.

Birthplace { City or Town Derosburg
 County Yorkshire, Eng

Apparent age 19
 Trade or occupation Student

Height 5 Feet 3 1/2 Inches.

Weight _____ Lbs.

Chest measurement { Minimum 33 1/2 inches.
 Maximum expansion 34 1/2 inches.

Physical development _____

Small-Pox Marks _____

Vaccination Marks { Arm _____ Right _____ Left _____
 Number _____

When Vaccinated last _____

(a) Marks indicating congenital peculiarities or previous disease _____

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

EXAMINED FOR RE-ENGAGEMENT, M.O.
 The Medical History Sheets of all men proceeding overseas, returned by the Officer commanding their unit to the Record Office when they leave England.
 M.O.
 M.O.
 M.O.
 M.O.
 M.O.
 M.O.
 M.O.
 M.O.

VACCINATIONS.
 Date Result M.O.
July 30/17. am Jeffrey Lieut. M.O.

ANTI-TYPHOID INOCULATIONS, ETC.
 Date Result M.O.
15/4/15 500 million [Signature] M.O.
26/4/15 1000 [Signature] M.O.
7/5/15 500 [Signature] M.O.
July 30/17 500 [Signature] M.O.

Enlisted on 19 day of December 1915 at Saskatoon

	CORPS.	REG'L NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>D Coy 38th Bn C.E.F.</u>	<u>411,100</u> <u>411,100</u>		<u>19 Dec 1915</u>
Transferred to..	<u>P.O.C.I.</u>			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>ONTARIO MILITARY HOSPITAL, ORPINGTON, KENT.</u>	<u>1 JUL 1917</u>	<u>[Signature]</u>	<u>[Signature]</u> <u>President, Medical Board, C.A.M.C.</u> <u>Approved. [Signature] for A.D. 193, London Area.</u> <u>LT Col. C.A.M.C.</u>

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

CANADIAN

4456

STATION	Date of Arrival at the Station	DATES OF						DISEASE	Number of days in Hospital	Remarks on nature of the disease: how induced: if mild or severe: if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of Inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
		Admission into Hospital.			Discharge from Hospital.						
		Day	Month	Year	Day	Month	Year				
KING GEORGE HOSPITAL, LONDON, S.E.		25	9	16	14	10	16	G.S.W. Face ¹¹⁻⁴ Fract L jaw G.S.W. Rt hand	20	Wounded Sept 15/16. On admission - Two wounds on the right side of face. Not extensive & mouth cavity not involved, but lower jaw fractured. Wound on the middle finger of right hand. Sept 24/16 Finger amputated through proximal interphalangeal joint. Oct 4/16 Given 500 units A.T.S. Trans to Westcliffe Hospl	<i>G. Micky</i> MAJOR., R.A.M.C.
WEST CLIFF CANADIAN EYE AND EAR HOSPITAL, FOLKESTONE.		14	10	16	18	5	17	G.S.W. jaw	21	To West Cliff Hospl. Fractured mandible - treated with cap splint - patient has bony union - slight operation for removal of displaced section of fragments - all healed some weeks.	C.A.M.C. for O.C. West Cliff Canadian Eye & Ear Hospital <i>M. T. ...</i>
ONTARIO MILITARY HOSPITAL ORPINGTON, KENT.		18	5	17	17	7	17	"	61		
Saskatoon Military Convalescent Hospital		27	11	17	?			3RD. Loss of Rt fingers G.S.W. in mandible.		to West Cliff Hospl DISCHARGE. Mandible repaired - Teeth supplied	<i>Geo R. Pelton</i> Capt. C.A.M.C.

Christian Name *Charles*

Surname *Belcher*

11100

WEST CLIFF CANADIAN EYE AND EAR HOSPITAL, FOLKESTONE.

ONTARIO MILITARY HOSPITAL ORPINGTON, KENT.

Saskatoon Military Convalescent Hospital

Geo R. Pelton
Capt.
C.A.M.C.

M.D. 12
NO. 2

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

This form to be used for all Ranks (Vide Articles 122, 130 and 141, Financial Instructions, 25715c, C.E.F., 1916).

Regimental No. 411100 Rank Pte. Name Blackburn, C.D.

Corps "H" Unit, M.H.C.O. who was *Discharged

On 8-2-18 1918, to.....
*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from Feb. 1st. 1918
to Feb. 8th. 1918, the inclusive date of transfer or discharge.

Dr.	\$	c.	Cr.	\$	c.
Bal. Dr. from prev. month.....			Bal. Cr. from prev. month.....		
Advances } No.....			Reg't Pay <u>8</u> days at \$ <u>1</u> c.	<u>8</u>	<u>00</u>
by } No.....			Field Allow. <u>8</u> days at \$ <u>10</u> c.	<u>80</u>	
Cheques } No.....			Separation Allowances* (Monthly) <u>25</u>	<u>7</u>	<u>15</u>
Assigned Pay and Sep'n Allice. No. <u>294</u>	<u>25</u>	<u>00</u>	Other Allowances* <u>C.O. Allow.</u>	<u>16</u>	<u>50</u>
Other charges			Other Credits* <u>A.P. Carr. Pwd.</u>		
Payment on transfer or discharge No. <u>293</u>	<u>70</u>	<u>30</u>	<u>Nov to Jan.</u>	<u>45</u>	<u>00</u>
Balance Cr. (to be paid by the new unit).....			Bal. Dr. (to be deducted by new unit).....	<u>17</u>	<u>85</u>
Total.....	<u>95</u>	<u>30</u>	Total.....	<u>95</u>	<u>30</u>

* Give particulars.

A monthly stoppage of \$..... (†) has..... (‡) been paid on account of Assigned
{ Pay for the month of..... 1918 }
{ and Sep'n Allice. for month of Feb. 1918 } (to) Assignee..... Patriotic Fund,
(Address)..... Childrens Guardian,
Winnipeg, Man.

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

On Transfer of an Officer

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

REMARKS:—

- State (1) date of enlistment
- (2) if married and if a Separation Allowance Card has been submitted..... Yes.
- (3) cause of discharge..... authority..... D.O. 38/177.
- (4) authority for transfer

NOTE.—Separation Allowance and Assigned pay Card and Index Card (M. F. W. 71) are to accompany the original Last Pay Certificate on transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay-list of the unit:

Date..... Feb. 8th. 1918.

Place..... Regina, Sask.

Stuart Smith
Paymaster, H. Unit, M.H.C.O. Paymaster.

N.B.—For purposes of transfer this form is to be made out in quadruplicate. Original copy to paymaster of new unit; duplicate to District Paymaster; triplicate to accompany the pay-list at the end of the month, and quadruplicate for retention as a record.
For purposes of discharge it is to be made out in triplicate. Original copy to accompany discharge papers; duplicate to accompany pay-list at the end of the month, and triplicate for retention as a record.
If a man on discharge is entitled to three months' Post Discharge Pay, Last Pay certificate will be made out in quadruplicate. The original Last Pay Certificate will be forwarded with other documents to Paymaster Post Discharge Pay and triplicate, with his discharge documents.

M. F. W. 44.

100M.—12-17.
H. Q. 1772-33-908.

O.K.

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

8134-161

86

1582-C-1.

Name **Blackburn, Charles David Cecil**
Surname Christian Name

Regimental Number **411100**

Rank **Pte.**

Address (in full) **435 Ave. E. South,
 Saskatoon, Sask.**

Unit **P.P.C.L.I.**

Original Unit

District where paid **M.D. 12.**

Date of Discharge **8-2-18.**

P. D. P. Filing Number **5-82-12.**

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

L. L. 22573—M. & D. 800P.

Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Over-payments to be Recovered	Total Amount Paid
	Cheque No. A	Date	Amount 30 days	Cheque No. B	Date	Amount 30 days	Cheque No. C	Date	Amount 31 days		
100 10	936	8-3-18	33 00	925	8-4-18	33 00	870	8-5-18	34 10		100 10
751-4	11072	2/2/19	70 00								
544^a	2nd of 39217	14-3-19	70 00								

Remarks:

M. F. W. 127.
 50M - 6 17.
 1772 89-1140.

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

Blackburn C.D.C.

To Whom *D. Blackburn*
Address *Vouदा*
Susk

By Whom Assigned *Blackburn*
Regtl. No. *411100 and A11100*
Rank *Plt.*
Corps *Corp. Pals*

Rate *\$ 50.00*

SPECIAL ASSISTANCE

Chkd 399 13-7-17

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.		<i>A 17324</i>	<i>50</i>	<i>✓</i>
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				



try 410686 Blackburn P.O.A. 38 Pm CW 015

Pte. Name *Blackburn Ches David E.*

M. F. W. 41
1 Oct-7-16
1772-39 889
P. C. No. *87825*

Regimental No. *411100*

Home
Name and address of next-of-kin *Go David T Ebbels
Saskatoon. Sask.*

Unit *P. P. C. L. I.*

Date of enlistment *19-3-15*

M.B. 13¹⁰/₁₇ Com. Home

Place of " *Saskatoon*

*S.A. #200.00 1³/₁₆ - 31¹⁰/₁₇ \$400.00
nil*

Married (yes or no) *No.*

Date and place discharged

Amount of pay assigned monthly \$ *nil*

Reason for discharge

To whom payable *Pat. Fund. (Childs. Guardian)
Justitia 2597 Winnipeg. Man.*

Character on discharge *#2. 649-B-6089
Cat. D, H.Q. no file*

Form 5351 - M. & D. 6880.

Date		PAY		Field Allowance		Other Credits	Total Credits	Voucher		Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days			Rate	Amount					
	<i>9⁸/₁₇</i>													
<i>10⁸/₁₇</i>	<i>31¹⁰/₁₇</i>	<i>83</i>	<i>1-</i>	<i>83</i>	<i>83</i>	<i>.10</i>	<i>8.30</i>							<i>S.L.P.C. L.D. Zuebel A.R. 9375 Boat Cn. Cal. 25143 370.89</i>
								<i>279.59</i>						<i>370.89</i>
														<i>100 973 97311946 Cn. Cal. 25143 370.89</i>
														<i>C.P.C. rem. on Showing re. adj. to 31¹⁰/₁₇ and H.Q. to H. Unit</i>
														<i>Letter to Laar for info regarding S.A. and to confirm same 16⁴/₁₇</i>

*J.W.M.
13¹¹/₁₇*

Eng. A.P. nil.

Rank _____ Name **BLACKBURN Charles David Cecil**

Reg'l No. **A 11100**

Unit **P.P.O.L.I.**

If in perm. Corps,
 What Unit?

Married or Single **Single.**

Place and Date of Enlistment **Saskatoon, Sask. 19th March, 1915.** Place of Birth **Yorkshire, Eng.**

Name and Address, Next-of-Kin **David Blackburn, Vonda, Sask.**

Relationship _____

Assigned Pay Monthly \$ _____

Payable to _____

Relationship _____

Separation Allowance \$ _____

Payable to _____

Relationship _____

Discharge, Date and Place **Canada**

Reason _____

Character _____



Entered on N.E. Card Index **W. J. Robertson**
Checked by **W. J. Robertson**

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date						
July	31	31	1 ⁰⁰	31	31	10 ⁴	3 10	85	144	95	15	15	29	95	+	Clothing.	
<i>Diff in Exchange 40</i>																	
Aug	31	31	1 ⁰⁰	31	31	10 ⁴	3 10	34	50	581 781 925 1032 1148	2 2 2 2 2	74 83 74 68 68	7	31	59	14	
Sept	30	30	1 ⁰⁰	30	30	10	3	33	192 1093 1148	OR	2 2 2	68 68 62	8	04	82	10	
Oct	31	31	1 ⁰⁰	31	31	10	3 10	34	10	1209 1271 1330 1386 1577 1442 1519 1496	2 2 2 2 2 2 2 2	62 68 68 62 62 67 49 49	40	12	76	08	
Nov	30	30	1 ⁰⁰	30	30	10	3	33	1577 1442 1519 1496	2 2 2 2	62 68 68 62	7	98	101	10		
Dec	31	31	1 ⁰⁰	31	31	10	3 10	34	10	1646 1703 1831 1768 1839	2 2 2 2 2	61 61 72 61 62	15	84	119	36	
<i>1916</i>																	
Jan	31	31	1 ⁰⁰	31	31	10	3 10	34	10	1839 1768 1831 1703 1646	2 2 2 2 2	62 67 61 61 61	5	22	148	24	
Feb	29	29	1 ⁰⁰	29	29	10	2 90	31	90	1839 1768 1831 1703 1646	2 2 2 2 2	62 67 61 61 61	155	09	25	05	
March	31	31	1 ⁰⁰	31	31	10	3 10	34	10	Cash 11-2-16 1839 1768 1831 1703 1646	19 2 2 2 2	117 67 61 61 61	2	62	56	53	
March	31	31	1 ⁰⁰	31	31	10	3 10	34	10	1905	2	62	2	62	56	53	
275 - ✓ 2750 11 25 31375 25722 25722																	

BALANCE TRANSFERRED TO NEW LEDGER

Checked **Guow**

MARRIED OR SINGLE *B*

PLACE OF BIRTH *Yorkshire England.*

NAME AND ADDRESS OF NEXT OF KIN *David Blackburn*
Nonda. Sask.

RELATIONSHIP OF NEXT OF KIN

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY \$ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHOR

ADMISSIONS TO HOSPITAL. &c.

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

DATE	PAY			FIELD ALLOWANCE			WORKING OR SPECIAL PAY			ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS								
	NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS				RATE	AMOUNT		1		2		3	
			\$	C.			\$	C.						\$	C.	NO.	DATE	NO.	DATE	NO.	DATE
1916 275			275			2750						11 25	212 75								
April 30	1		30 00	30	10	3 00							33 00	1975	4416	2039	23416				
1/31/16	31	1	31 00	31	10	3 10							34 10	211	15/16	2180	28/16				
1306.16	30	1	30	30	10	3							33	205	2/16	2247	15/16				
July 31			31			3 10							34 10	2316	30/16						
Aug 31			31			3 10							34 10	2394	30/16	2474	15/16	F.R. 1/16	303		
1/9/16	30		30			3							33	2551	30/16	2621	5/16				
1/10	31		31			3 10							34 10								
1/11	30		30			3							33								
1/12	31		31			3 10							34 10								
1306.17	31	100	31 10										34 10								
Feb 28			30 80										30 80	321	WC	307					
March 31			34 10										34 10								
640			704										11 25	715 25							

Checked... *Y. W. Williams*

[Handwritten notes on a separate sheet of paper, partially obscured]

Sailing List 45 12/9/17 Lt. Bal 269⁸⁶

411100 Pte. Blackburn C.D.C.

DATE	PAY		FIELD ALLOWANCE		WORKING OR SPECIAL PAY		ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS				CASH PAYMENTS				
	No. OF DAYS	RATE	AMOUNT		No. OF DAYS	RATE				AMOUNT		1	2	3	4	1	2	3
			\$	C.						\$	C.	No.	DATE	No.	DATE			
	640		704					11 25	715 25							20 75	15 58	32
Apr 30	110		33						33									
May 30			33						33									
31	1		110						110									
June 20			22						22									
June 10	10	10	11						11									
July 31	21		34 10						34 10									
Aug 9	9		9 90						9 90									
	977								10 68									

RR 126.

RR 334 Deficit

MONTH PARTICULARS CR.1 CR.2 PARTICULARS DR.1 DR.2 DR.3 DR.4 BALANCE DEFERRED PAY SERVICED ALLOWANCE PAY END.

Oct 17 Bal fwd																			401 27
Oct			Dr AR 578 Oct 23/17			4 87													
			Apr 9325 4/9/17			9 73													
			Dr AR 18. Welfie E & B. 13/4/17			2 43													
			117 EORD 7/8			4 86													
			193. Dr AR E & B. 16/5/17			2 43													
			60 Schiff. Mt. 25/4/17			48 67													328 28
			Dr AR 636. Oct 14/17			48 67													
			111. EORD. 31.7.17			4 87													
			613 Oct 20/17			4 87													269 87

balance transferred to N. E. Branch. Nil

MENTS		ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
3	4				CREDIT	DEBIT			
32	301 50			369 83	2425 43		1880		
	48 67 ✓			48 67	329 75		240		Trans Brit Work. 3/15/17
				362 75					
				363 85 ✓			255 -	108 85	Trans Brit Pat. 28/16/17 CASH R.R.
				385 85 ✓			270		
				418 50	396 85		2565		
	350 17 ✓			50	380 95				
	50			50	390 85				Trans to Pay 2 1/2 (Dist. Can) 2 1/2 S. 1375-12 5/8/17 Eff 10/8/17 Ref. Pay. 9 1/2 10/8/17 gdm chgs. 28/1/17. Seaford.
	121 64			468 50	390 85				
	400 17				401 27 ✓				
	121 68		76		121 68				
	521 83				279 59				
	590 18								
	570 18								

A3M. FORM REND. EFFEC ✓
 DISCHARGED TO *Canada* DATE *9/8/17*
 PAYBOOK VERIFIED *10/8/17*
 cr. BAL. *279.59* L.P.C. REND. *10/8/17*
 AUTH. *8 ms. 1375-12 Seaford 7/8/17*

Checked
Ridd
L.P.C.

No. HJB

1392

Blackburn, Cecil D.
c/o Davis & Ebbels.
Saskatoon Sask.

File

CR 466

No. 41100 Rank Pte. Original Unit 1st, U.C.O. Present Unit PPCLI.
Age 22 Height 5 ft. 4 1/2 ins. Complexion Fair Eyes Blue Hair Med. Character W.R.
Date of enlistment 19-3-15 Where enlisted Saskatoon. Where seen service France #14241
Ship returned by F.8261 Date of arrival 25-9-17 Port of arrival Halifax.
Birthplace England. Religion C.of E.
Name and address next of kin Father. D. Blackburn. Vonda. Sask.
Notify do

Cause of disability Difficulty in masticating (Fractured jaw)
Loss of part of middle finger, rt. hand.
Condition which prevents the soldier from earning a full livelihood

15 Months. Wound in jaw and rt. hand.
Present condition. Scar at rt. enlge of jaw. Union complete, but jaw is drawn to right teeth do not meet. Middle finger r. hand amputated and second joint. Cannot fully flex ring finger, others good.
Heart and lungs normal.
Has a small sore in roof of mouth, requiring treatment, probably necrosis.
Has difficulty in chewing meat and solids on account of imperfect articulation of teeth and diminished power in muscles of jaws.

Degree of incapacity (Please state in fractions) Eng. Board None Canadian Board 1. 20%. 2 5%
Probable duration of incapacity Permanent.

Is final disability likely to prevent return to previous occupation?

Recommendation of Canadian Board Conv. Home.
Destination to which transportation issued Regina.

Members of Board K.O. CAIRNS. CAPT. A. HAIG. CAPT. F.J. COUGHLIN. LIEUT. W.M. GARRICK. M.JR.
INFORMATION TO BE FURNISHED BY SOLDIER

DEPENDENTS	NAME	AGE	WHERE—IF EMPLOYED	WAGES	STATE OF HEALTH
Wife					
Children 1					
2					
3					
4					
5					

Occupation prior to enlistment Law student. 1s. yr.
Regular trade or profession Attending University of Saskatchewan at Saskatoon.
Average earnings previous to enlistment Also studying with firm of Davis & Ebbels. Saskatoon

Name and address of last employer
Rent per month If purchasing property amount due and annual payment, \$
Taxes If Homestead, when is patent due?
If carrying life or accident insurance, annual premium \$63.
If in receipt of sick benefits or other insurance—name of society Amt. per mo. \$
If unable to follow previous occupation, name preference Sund Life. Will resume law studies.
At what age soldier left school? What grade, standard, &c., was he in?
Has he taken any Technical or Continuation classes, if so what?
Whether given Vocational Training while in Hospital in England. If so, what subjects?

References
Witness E.M. McNaughton. I declare that the above statement is correct.
Date Quebec 13-10-17 Signature C. Blackburn.

Recommendation by Interviewer as to classes likely to be of use, and general remarks:

For advice of V. Counsellor.

Last Pay Cert. Cr., \$ Dr., \$ Amount paid at Depot H. Q., \$ L. P. C. leaving Depot, \$
Amount forwarded to H. Q. Unit, \$ Credit Clothing allowances, \$
Transf'd to Unit—Date Transf'd Class 1—Date Transf'd Class 3—Date
PENSION—Class..... Amount per year, \$ Period granted for..... Dating from.....
First payment date.....

CLASS 3.—Men having a permanent disability which would not be benefited by further medical treatment (such disability due to or aggravated by service) whose cases will immediately be considered by the Pensions Board with a view to pension.

CLASS 2.—Men whose condition may be benefited by further medical treatment or rest in a Convalescent Home, Hospital or Sanatorium. If deemed advisable, in some cases the medical officer in charge of the Convalescent Home, Hospital or Sanatorium may grant these men leave to return to their own homes and families for a definite period.

CLASS 1.—Men for immediate discharge without a pension.
(a) Unit for overseas service but capable to take up their previous civilian occupation.
(b) Disability not the result of service or involving claim as the result of or aggravation by service.

Report No. 392

Class II

D

H

Blackburn Cecil D.
90 Davis & Ebbls,
Saskatoon, Sask.

No. of M. H. C. File
No. of Local File
No. of H. Q. File

No. 411100 Rank Pte. Original Unit /st Unit Present Unit P.P.B.L.
Age 32 Height 5 ft. 4 1/2 ins. Complexion fair Eyes blue Hair Med Character NR
Date of enlistment 19-3-15 Where enlisted Saskatoon. Where seen service France
Ship returned by 78261 Date of arrival SEP 25 1917 Port of arrival #14241
Birthplace England Religion bapt. HALIFAX, N. S.
Name and address next of kin Father D Blackburn
Notification of return to be sent to Father
Cause of disability Difficulty in masticating (Fractured Jaw)
Loss of part of middle finger rt. hand.
Condition which prevents the soldier from earning a full livelihood

CLASS 3—Men having a permanent disability which will not be benefited by further medical treatment (such disability due to or aggravated by service) and whose cases will immediately be considered by the Pensions Board with a view to pension.

...entification may be benefited by further medical treatment at Convalescent Home, Hospital or Sanatorium. In some cases the medical officer in charge of the Convalescent Home, Hospital or Sanatorium may grant these men leave to return to their own homes and families for a definite period.

Degree of incapacity (Please state in fractions) Eng. Board none Canadian Board 1-20% 2-5%
Probable duration of incapacity Permanent
Recommendation of Canadian Board Conv. Home.
Destination to which transportation issued Regina
Members of Board

INFORMATION TO BE FURNISHED BY SOLDIER

Table with 5 columns: DEPENDENTS, NAME, AGE, WHERE-IF EMPLOYED, WAGES, STATE OF HEALTH. Rows include Wife, Children 1-5.

Occupation prior to enlistment Law Student first year
Regular trade or profession attending university of
Average earnings previous to enlistment Saskatoon
Name and address of last employer of Davis & Ebbls, Saskatoon
Rent per month If purchasing property amount due and annual payment, \$
Taxes If Homestead, when is patent due? \$63.00 per annum
carrying life or accident insurance, annual premium
in receipt of sick benefits or other insurance—name of society Life Assurance
unable to follow previous occupation, name preference Will resume Law Studies
what age soldier left school? What grade, standard, &c., was he in?
has he taken any Technical or Continuation classes, if so what?
has he given Vocational Training while in Hospital in England. If so, what subjects?
Signatures: Approx. Haughton, Blackburn

Recommendation by Interviewer as to classes likely to be of use and general remarks:
for advice of Vocational Officer

Art. Cr., \$ Dr., \$ Amount paid at Depot H.Q., \$ L. P. C. leaving Depot, \$
Awarded to H. Q. Unit, \$ Credit Clothing allowances, \$
Unit—Date Transf'd Class 1—Date Transf'd Class 3—Date
Amount per year, \$ Period granted for Dating from
payment date

Report No. 1392

Class II

D

H

Blackburn Cecil
Co Davis & Ebbels,
Saskatoon, Sask.

No. of M. H. C. File
No. of Local File
No. of H. Q. File

No. 411100 Rank Pte. Original Unit / Present Unit P.P.B.L.
Age 32 Height 5 ft. 4 1/2 ins. Complexion fair Eyes blue Hair Med Character NR
Date of enlistment 19-3-15 Where enlisted Saskatoon. Where seen service France
Ship returned by 78261 Date of arrival SEP 25 1917 Port of arrival #14241
Birthplace England Religion bapt. HALIFAX, N. S.
Name and address next of kin Father D Blackburn
Notification of return to be sent to Father 7000 Yonda, Sask
Cause of disability Difficulty in masticating (Fractured Jaw)
Loss of part of middle finger rt. hand.
Condition which prevents the soldier from earning a full livelihood

CLASS 3—Men having a permanent disability which would not be benefited by further medical treatment (such disability due to or aggravated by service) and whose cases will immediately be considered by the Pensions Board with a view to pension.

CLASS 2.—Men whose condition may be benefited by further medical treatment or rest in a Convalescent Home, Hospital or Sanatorium. If deemed advisable, in some cases the medical officer in charge of the Convalescent Home, Hospital or Sanatorium may grant these men leave to return to their own homes and families for a definite period.

CLASS 1.—Men for immediate discharge without a pension.
(a) Unfit for overseas service but capable to take up their previous civilian occupation.
(b) Disability not the result of service or involving claim as the result of or aggravation by service.

Degree of incapacity (Please state in fractions) Eng. Board none
Canadian Board 1-20%2-5%
Probable duration of incapacity Permanent
Recommendation of Canadian Board Conv. Home.
Destination to which transportation issued Regina
Members of Board

INFORMATION TO BE FURNISHED BY SOLDIER

Table with 5 columns: DEPENDENTS, NAME, AGE, WHERE-IF EMPLOYED, WAGES, STATE OF HEALTH. Rows include Wife, Children 1-5.

Occupation prior to enlistment Law Student first year
Regular trade or profession attending university of
Average earnings previous to enlistment Saskatoon
Name and address of last employer also studied with firm of Davis & Ebbels, Saskatoon
Taxes \$63.00 per annum
If carrying life or accident insurance, annual premium Sun Life Assoc
If in receipt of sick benefits or other insurance—name of society
If unable to follow previous occupation, name preference Will resume law studies
At what age soldier left school? What grade, standard, &c., was he in?
Has he taken any Technical or Continuation classes, if so what?
Whether given Vocational Training while in Hospital in England. If so, what subjects?
References
Witness J. M. Haughton I declare that the above statement is correct.
Date QUEBEC Signature C. Blackburn

Recommendation by Interviewer as to classes likely to be of use and general remarks.
For advice of Vocational Office

Last Pay Cert. Cr., \$ Dr., \$ Amount paid at Depot H.Q., \$ L. P. C. leaving Depot, \$
Amount forwarded to H. Q. Unit, \$ Credit Clothing allowances, \$
Transf'd to Unit—Date Transf'd Class 1—Date Transf'd Class 3—Date
PENSION—Class—Amount per year, \$—Period granted for—Dating from—
First payment date—

43.

CLINICAL CHART.
(To be attached to Case Sheet.)

Army Form B. 181.

Corps P.P. 6 L.I.

Military Hospital _____

No. 411100

Rank and Name Pvt Blackburn

Age 21

Service 27/12

Disease G.C.W. Rt. Jaw

Date of admission May 18-1917

Date of discharge 17.7.17

Result Recovery

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

Signature [Handwritten Signature] In charge of case.