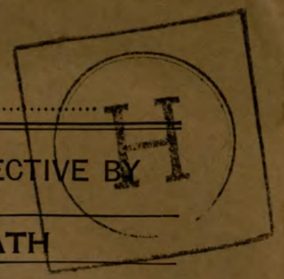
C.E.F. REGIMENTAL DOCUMENTS

NAME BAGSHAW JOHN PERCIVAL REGT. No. 41267 UNIT 18 BN H. Q. FILE No. 879



CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
ATTESTATION PAPER (M.F.W. 23, 133 or 51)					DEATH
CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					CATEGORY
TRAINING HISTORY SHEET (M.F.W. 113)					
FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
REGT. CONDUCT SHEET (M.B.W. 263 or A.F.B. 120)					
COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
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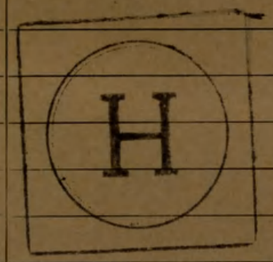


M.F.W. 2589
20M-4-46 (9113)
H.Q. 1772-39-1377

O.M.S. 26564

ATTESTATION PAPER.

No. 412671

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

	(ANSWERS).
1. What is your name?	John Percival Bagshaw
2. In what Town, Township or Parish, and in what Country were you born?	Matlock Derbyshire England
3. What is the name of your next-of-kin?	Sister Mrs Elizabeth Bagshaw
4. What is the address of your next-of-kin?	Matlock Derbyshire England
5. What is the date of your birth?	12th July 1893.
6. What is your Trade or Calling?	Labourer
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? If so, state particulars of former Service.	No
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

J P Bagshaw (Signature of Man).

H Burnaston (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, John Percival Bagshaw, 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.

J P Bagshaw (Signature of Recruit)

Date 22nd Feby 1915. H Burnaston (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, John Percival Bagshaw, 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.

J P Bagshaw (Signature of Recruit)

Date 22nd Feby 1915. H Burnaston (Signature of Witness)

CERTIFICATE OF MAGISTRATE.

The Recruit above-named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath before me, at London this 22nd day of February 1915.

(Signature of Justice)

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

LT. COL. (Approving Officer)

COM. 39TH BN. C.E.F.

M. F. W. 23.
150 M.—12-14.
H.Q. 1773-39-341.

5 - OCT Rec'd

Discharge 8-1-18 9-T

Description of John Percival Bagshaw on Enlistment.

Apparent Age 20 years 8 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 5 ins.

Chest measurement { Girth when fully expanded 33 ins. / Range of expansion 3½ ins.

Complexion Fair

Eyes Hazel

Hair Dk Brown

Religious denominations { Church of England / Presbyterian / Wesleyan / Baptist or Congregationalist / Other Protestants (Denomination to be stated.) Methodist / 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
Left Wrist

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 March 10 1915 — J McCulloch Lt.

Place Lindsay — 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.

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

J T Creelman LT. COL. (Signature of Officer)
COM. 39TH BN. C.E.F.

Date 17th April 1915.

DEPARTMENT OF MILITIA AND DEFENCE.

7151/14.

WAR SERVICE GRATUITY.

OTTAWA, CANADA.

Declaration required of Officers, Warrant Officers and Men who claim War Service Gratuity under Order-in-Council (P.C. 3165), dated 21st December, 1918.

If the applicant will enquire at the local Branch of the Canadian Patriotic Fund he will be informed if there is an official who will take this Declaration free of charge.

A complete reply must be given to every question in this Declaration. There must be no blanks and no dashes. If any questions are not applicable the words "NOT APPLICABLE" must be written out.

On completion this Declaration is to be returned to THE DISTRICT PAYMASTER OF THE DISTRICT IN WHICH THE SOLDIER WAS DISCHARGED.

1. Christian names John Percival 2. Surname Baysbaw

3. Rank Pvte 4. Original Unit 39th Reserve 5. Reg. No. 412674

6. Address, in full, to which future payments of gratuity are to be forwarded

J C Bayshaw
30 Victoria Avenue Lindsay Ont.

7. Date of enlistment in the C.E.F. Jan 15th 1915

8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge Not Applicable

9. Relationship of such dependent Not Applicable

10. Address, in full, of such dependent Not Applicable

11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? Not Applicable

12. Were you at any time on the strength for pay and allowances of a unit of the C.E.F. which was out of Canada or the United States when such pay and allowances were issuable? If so, give particulars of one such unit and dates of service overseas with such unit:—

Proceeded overseas with 39th Batt. June 1915. Transfered to 18th Batt in Eng. on 10th of Sept 1915 then proceeded sto France.

13. Were you on the strength for pay and allowances of the Clearing Services Command, having been at any time on duty outside of Canada or the United States? Yes

14. Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service No

Paymaster General's Branch.
JAN 23 1919
Militia Headquarters, Ottawa.

15. Give total length of time which you served on active service, whether in Canada or Overseas, setting out particulars of units on whose strength you served Proceeded to Eng on June 3rd 1915 39 Batt to France with 18th Batt Sept 14th 1915. Returned from France to Eng 15th Sept 1916
Full Time Served. 2 years 11 months 15 days. Enlisted Jan 1915. Discharged Dec 31st 1917. 3 years 11 months 15 days

16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department No.

17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.? No.

M.F.W. 2595.
1772—39—1389.
1160—D.P.—250M-12-18.

18. Have you had more than one enlistment? If so, give particulars of discharges and re-enlistments, and under what regimental numbers and units ..... No .....

19. Have you already received any payment of Post Discharge Pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid ..... Yes .....
P.D. Pay $99 Paid By Capt. Peters Kingston

20. Have you been issued with a War Service Badge? If so, what class ? ..... C. S. F. Fund .....

21. Have you, during the present war, served in the Imperial Forces ? ..... No .....

22. Are you entitled to receive, or have you received any gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled ..... No .....

23. (a) Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England ? ..... No .....
(b) If so, was such reversion in consequence of misconduct or inefficiency ? ..... No .....

24. Are you now serving in the C.E.F.? ..... No ..... If not, give:—(a) Date of discharge Dec. 31st 1917. ..... (b) Reason for discharge G. S. Wound Left Forearm Medically Unfit .....

25. Are you at present a member of and in receipt of pay and allowances from any Canadian naval or land forces? If so, give unit ..... No .....

26. Did you at any time serve at the front in an actual theatre of war? If so, give particulars of one unit which you served at the front, and dates of such service with that unit Served in France with 18th Batt. from Sept. 15th 1915. to Sept. 15th 1916. .....

27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment? No
(b) If so, are you in receipt of full pay and allowances from that Department ? ..... No .....

And I make this solemn declaration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath and in virtue of the Canadian Evidence Act.

Signature of Applicant: John Percival Bayshaw

Place of Residence: 20 Victoria Avenue Lindsay Ont

Declared before me at: Lindsay Ontario

This 2nd day of January 1919

Signature of Barrister of the Supreme Court Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner for the Administration of Oaths.

POST DISCHARGE PAY.

Date paid.	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
Jan 9/18	33.00			
Feb 9/18	33.00			
Mar 11/18	34.10			

Certified Correct.

Total amount paid $100.10

Skinner Knapp
District Paymaster

WEST ONT. REGT.

REGIMENTAL NUMBER 84/12671 RANK NAME INITIAL

39th Bn. UNIT Bagshaw. J.P.

DOCUMENTS

A.F.B. 268 Proceedings on discharge	TRANSFERRED TO
Proceedings of Court of Enquiry	TRANSFERRED TO
Declaration of Court of Enquiry	TRANSFERRED TO
3 Attestation Paper NP 756 C.C.A.C.	8-11-95 DATE OF DEATH
Medical History Sheet	DATE OF DISCHARGE 2/2/17
Last Pay Certificate	DATE OF DESERTION
Non-effective account	STATION
Regimental Conduct Sheet	REASON FOR DISCHARGE.
Squadron,Battery or Coy.Conduct Sheet	CAUSE OF DEATH
Field Conduct Sheet A.F.B.122	SERIOUS WOUND
Casualty Form A.F.B. 103 12 OCT 1916 C.C.A.C.	SERIOUS ILL 8-11-95.
Report on Invalid	RETURN TO CANADA
Death Certificate	CROSS REFERENCE NUMBER
Declaration of Destination	
Documents Acknowledged	
Furlough Slip A.F.W. 3016	
Ottawa Notified	
Will	
Next-of-kin Notified.	

18th Bn

412671
~~A1267~~

ATTESTATION PAPER.

No.

Folio ~~A1267~~ 412671

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name?..... John Percival Bagshaw
2. In what Town, Township or Parish, and in what Country were you born?..... Matlock, Derbyshire, Eng
3. What is the name of your next-of-kin?..... Captain Mrs Elizabeth Bagshaw
4. What is the address of your next-of-kin?..... Matlock, Derbyshire, Eng
5. What is the date of your birth?..... 10 July 1893
6. What is your Trade or Calling?..... Labourer
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

J P Bagshaw .....(Signature of Man).

H Burbottomes .....(Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, John Percival Bagshaw, 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.

J P Bagshaw .....(Signature of Recruit)

Date 29 February 1915 H Burbottomes .....(Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, John Percival Bagshaw, 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.

J P Bagshaw .....(Signature of Recruit)

Date 29 February 1915 H Burbottomes .....(Signature of Witness)

CERTIFICATE OF MAGISTRATE.

The Recruit above-named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath before me, at Ludlow this 29th day of February 1915

.....(Signature of Justice)

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

.....LT. COL.
COMD. 60TH BN. O.S.F.
.....(Approving Officer)

M. F. W. 23.
150 M.—12-14.
H.Q. 1772-29-341.

Description of John Percival Bagshaw on Enlistment.

Apparent Age 21 years 8 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height	5 ft. 5 ins.
Chest measurement — Girth when fully expanded	33 ins.
Chest measurement — Range of expansion	3½ ins.
Complexion	Fair
Eyes	Regd
Hair	D.K. Brown

Religious denominations.

- Church of England
- Presbyterian
- Wesleyan
- Baptist or Congregationalist
- Other Protestants (Denomination to be stated.) Methodist
- 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:
Left Wrist

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 March 10 1915 — J McCulloch Lt.

Place Lindsay — 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.

John Percival Bagshaw 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.

Lt. Col. (Signature of Officer)
COM. 39TH BN. C.E.F.

Date 17th April 1915

PARTICULARS OF DISCHARGE.

1. *Name* John P.Bagshaw,

2. *Regimental Number* 412671 3. *Rank* Private.

4. *Corps* 39th Battalion.

5. *Date of Discharge* Dec.31st.1917.

6. *Place of Discharge* Kingston,Ont.

7. *Place to which transport given.* (*Give street address where possible.*)

R.R.No.2.Cameron,Ont.

Enlisted at Lindsay,Ont. 22-2-15.

8. *Description at time of Discharge* :—

Age 24 *years* 4 *months.* *Descriptive marks* Gunshot wound left forearm,

Height 5 *feet* 5 *inches.* 2 Tatto marks on right Forearm,

Complexion Fair. 4 Vaccination marks on left forearm.

Eyes Grey.

Hair Brown,

Trade Laborer.

9. *The above named man is discharged in consequence of*

Medically unfit.

(*If medically unfit, state nature of disease or disability.*) Stiffness Lt.Hand.
Loss of Grip.

10. *To what extent will it prevent his earning a full livelihood?*

Total (Eng.Bd.)

11. *Character*

Very Good.

Date January 15th,1918.

i/c Records.
Lieut.,

for Director of Records.

JKW.

M. F. W. 60
100M.—8-16.
H. Q. 1772-39-928

RESERVATIONS REFERRED TO AT PARA. 8.

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

LIST OF DISCHARGE DOCUMENTS.

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 depôt 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, despatch, 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.

MISSANABIE
11 2 17

90

This space to be left blank for the Chelsea Number.

Army Form B. 268.

Proceedings on Discharge.

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

No. 412671 Army Rank Private

Name Bagshaw John

(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)

Corps 14th. Battalion, C.E.F.

Battalion, Battery, Company, Depôt, &c. C.C.A.C.

88-B-91.

(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

Place of discharge Invalided to Canada by authority of Medical Board.

1. *Description at the time of discharge.*

Age years months

Height feet inches

Chest measurement { girth when fully expanded ins. / range of expansion ins.

Complexion

Eyes

Hair

Trade

Intended place of residence (To be given as fully as practicable)

Descriptive marks.

L Hand

(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

(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.)

To be filled in on the soldier quitting the Colours.

3. Military character :—

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

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.

Initials of Commanding Officer.

Army Form B. 2088 has been issued to*

Wt. W. 13141/283 430,000 3/15 M.&C. Ld.

Forms B. 268

*Strike out if not applicable.

[OVER.

Discharge 8-1-18 9 J

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

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)_____

(Date)_____ *Commanding* _____ *Battn.* _____ *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*)_____ _____(*Signature of Soldier.*)

(*Date*)_____ _____(*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)_____ years_____ days.

Further service ,, ,, _____(the date of confirmation of discharge) ... ..._____ ,, _____ ,,

Total ..._____ ,, _____ ,,

11. *Confirmation of discharge.*

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

(Place)_____

Signature _____

(Date)_____

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.

A12671 ~~64-B-12762~~ B

MEDICAL HISTORY SHEET.

Surname Bagshaw BPC 20722 Christian Name John Percival

22.9.16

Examined on 9th day of March 1915 at Lindsay

Approved by J Morrison

Rank Maj M.O.

Birthplace City or Town Matlock County Derbyshire England

Apparent age 21 Years

Trade or occupation Labourer

Height 5 Feet 5 Inches.

Weight 116 Lbs.

Chest measurement Minimum 29½ inches. Maximum expansion 33½ inches.

Physical development Fair

Small-Pox Marks None

Vaccination Marks Arm Right. One Left Four Number Five

When Vaccinated last Feby 10th 1915

(a) Marks indicating congenital peculiarities or previous disease None

Left wrist Scar

(b) Slight defects but not sufficient to cause rejection None

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

Date	Result	Vaccinations.
1-2-15	Good	F/B C Lt M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
6-3-15	Good	F/B C Lt M.O.
16-3-15	Good	F/B C Lt M.O.
		M.O.

Enlisted on 17th day of January 1915 at Lindsay, Ont.

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	Ordnance Corps 45th Trst. Regt			
Transferred to..	18th Can Bn	412671		10-9-15

32

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
Ramsgate	13 Jan'17 15 JAN 1917	Stiff through L. wrist	Returned to Canada.
APPROVED J. Morrison CAPT. C.A.M.C		Approved W Carruthers CAPT. FOR A.D.M.S. CANADIANS, SHORNCLIFFE.	PRESIDENT STANDING MEDICAL BOARD
C.C.C. CANADIANS. Kingston	Oct.9/17	Ankylosis	Category "E".

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.

50M—8-14.
H. Q. 1772—39—439.

Discharge 8-1-18 9.T.

Surname Bagshaw Christian Name John Bernard

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.
3rd Northern General Hospital SHEFFIELD.		18	9	16	9	11	16	GSW L. Wrist	53.	On admission:- Two lacerations. Thickening of radius at ~~wrist~~ site of lacerations. No movement in wrist Slight movement in ulnar fingers Practically no movement in radial fingers Thumb has 50% of movement. Pressure over wound produces tingling in fingers. Transferred to Granville Can. Speside Hospital, Ramsgate. Cond. about same as on admission Dnw. to Can	Arfonnell Lt. Colonel, R.A.M.C. (T) O.C. 3rd Northern General Hospital
THE KING'S CANADIAN RED CROSS CONVALESCENT HOSPITAL		9	11	16.	15	11	16		6.		
								D & W L. wrist.			J. Shaw Capt. C.A.M.C.
Richardson Conv. Home		23	2	17	2	10	17	G.S.W.L.Wrist	221		J. Brenan Lieut.
Queen's Mil. Hospital		2	10	17	1	12	17	G.S.W. L.Wrist	60	Discharged from the Service with effect from December 31st.1917.	

Report No. HER 4761 C

Class II. Vocational counsellor.

Bagshaw, John
Cameron P.O.
Lindsay Ont.

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

No. 413671 Rank Pte. Original Unit 45th Present Unit 18th

Age 21-8 Height 5 ft. 5 ins. Complexion Fair Eyes Hazel Hair D.Brown Character M.R.

Date of enlistment 15-12-15 Where enlisted Lindsay Ont Where seen service France 4195

Ship returned by Missanabie Date of arrival 11-2-17 Port of arrival St.John

Birthplace England Religion Methodist

Name and address next of kin 649-B-12462
Sister, Miss M.E.Bagshaw, Matlock, Derbyshire, England.

Cause of disability Lessened function, left hand from articular adhesions.

C. DEPT. OF MILITIA & DEFENCE
MAY 27 1920
H.Q. CANADA

Condition which prevents the soldier from earning a full livelihood

A healthy man, wounded in left wrist, Sept. 15th, 1916. Bullet penetrated forearm at wrist. There was apparently no injury of nerve but X-Ray shows fracture of lower end of radius. The hand stiff. Hand grasp of large objects only possible. Fingers flex only 10%, wrist is held in plane of forearm and there is 30 deg. of flexion. Pronation and supination are performed. Sensation unimpaired. Between the extremities (lower) of radius and ulna, flex or surface, there is a movable hard body about as large as a half pea or more. An other X-Ray picture should be taken to ascertain the nature of this body. His hand is quite useless now but should improve with massage.

Degree of incapacity (Please state in fractions) Eng. Board Total Canadian Board 2/5 decreasing with 3 mos. treatment an unknown extent.

Probable duration of incapacity Permanent

Is final disability likely to prevent return to previous occupation?

Recommendation of Canadian Board Convalescent Home

Destination to which transportation issued Kingston Ont

Members of Board E.A.ROBERTSON CAPT. M.F.COGLON CAPT. T.G.BELSE CAPT. W.M.CARRICK MAJOR

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 Farming

Regular trade or profession do

Average earnings previous to enlistment $5.00 a month & Board Any other income

Name and address of last employer J.Perrin, Cameron, Lindsay Ont.

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 —

If in receipt of sick benefits or other insurance—name of society — Amt. per mo. $

If unable to follow previous occupation, name preference

At what age soldier left school? What grade, standard, &c., was he in?

Has he taken any Technical or Continuation classes, if so what? N.A.

Whether given Vocational Training while in Hospital in England. If so, what subjects?

References Last empl.

Witness J. MCDONNELL

Date 17-2-17

I declare that the above statement is correct.

Signature BAGSHAW J.P.

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

Is desirous of a chauffeurs course. Has experience. 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 .....

Form No. 5a.

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.

Class 2.—Men whose condition may be benefitted 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 3.—Men whose condition may be benefitted by further medical treatment (such disability due to or aggravated by service) and whose cases will immediately be considered by the Pensions Board with view to pension.

Form No. 28.

First payment £ .....

PENSION—Class ..... Amount per week, £ ..... Period granted for ..... Dating from .....

Transf'd to	Unit—Date	Transf'd Class I—Date	Transf'd Class 3—Date

Amount forwarded to H. Q. Unit, £	Credit Clothing allowance, £	
Last Pay Cert. Cl., £	Dr., £	Amount held at Depot H. Q., £	L. P. C. issuing Depot, £

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

Date

Witness

I declare that the above statement is correct.

Signature

Were you ever Vocational Training unit in Hospital in England. If so, what subjects?

Has he taken any Technical or Continuation classes, if so what?

At what age sold the school? What trade, if any, can he do?

It unable to follow previous occupation, name preference

If in receipt of sick benefits or other insurance—name of society. Amt. per mo. £

If carrying life or accident insurance, annual premium

Rent per month — If Homestead, what is latest value? — £

Name and address of last employer

Average earnings previous to enlistment — Any other income

Regular trade or profession

Occupation prior to enlistment

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

INFORMATION TO BE FURNISHED BY SOLDIER

Address of Board

Destination to which transportation issued

Recommendation of Canadian Board

Is final disability likely to prevent return to previous occupation?

Proportionate duration of incapacity

Degree of incapacity (Please state in fractions) Last Board — Canadian Board

Condition which prevents the soldier from earning a full livelihood

Cause of disability

Name and address next of kin

Birthplace — Religion

Ship returned by — Date of arrival — Port of arrival

Date of enlistment — Where enlisted — Where seen before

Age — Height — Chest — Complexion — Eyes — Hair — Character

No. — Rank — Original Unit — Present Unit

Report No. — Class II.

H.Q. CANADA
MAY 53 1250
DEPARTMENT

be returned at the end of two months. Class II. Certificate to be returned at the end of four months. Class III. Certificate to be returned at the end of six months. Class IV. Certificate to be returned at the end of eight months. Class V. Certificate to be returned at the end of ten months. Class VI. Certificate to be returned at the end of twelve months. Class VII. Certificate to be returned at the end of fourteen months. Class VIII. Certificate to be returned at the end of sixteen months. Class IX. Certificate to be returned at the end of eighteen months. Class X. Certificate to be returned at the end of twenty months. Class XI. Certificate to be returned at the end of twenty-two months. Class XII. Certificate to be returned at the end of twenty-four months. Class XIII. Certificate to be returned at the end of twenty-six months. Class XIV. Certificate to be returned at the end of twenty-eight months. Class XV. Certificate to be returned at the end of thirty months. Class XVI. Certificate to be returned at the end of thirty-two months. Class XVII. Certificate to be returned at the end of thirty-four months. Class XVIII. Certificate to be returned at the end of thirty-six months. Class XIX. Certificate to be returned at the end of thirty-eight months. Class XX. Certificate to be returned at the end of forty months. Class XXI. Certificate to be returned at the end of forty-two months. Class XXII. Certificate to be returned at the end of forty-four months. Class XXIII. Certificate to be returned at the end of forty-six months. Class XXIV. Certificate to be returned at the end of forty-eight months. Class XXV. Certificate to be returned at the end of fifty months. Class XXVI. Certificate to be returned at the end of fifty-two months. Class XXVII. Certificate to be returned at the end of fifty-four months. Class XXVIII. Certificate to be returned at the end of fifty-six months. Class XXIX. Certificate to be returned at the end of fifty-eight months. Class XXX. Certificate to be returned at the end of sixty months. Class XXXI. Certificate to be returned at the end of sixty-two months. Class XXXII. Certificate to be returned at the end of sixty-four months. Class XXXIII. Certificate to be returned at the end of sixty-six months. Class XXXIV. Certificate to be returned at the end of sixty-eight months. Class XXXV. Certificate to be returned at the end of seventy months. Class XXXVI. Certificate to be returned at the end of seventy-two months. Class XXXVII. Certificate to be returned at the end of seventy-four months. Class XXXVIII. Certificate to be returned at the end of seventy-six months. Class XXXIX. Certificate to be returned at the end of seventy-eight months. Class XL. Certificate to be returned at the end of eighty months. Class XLI. Certificate to be returned at the end of eighty-two months. Class XLII. Certificate to be returned at the end of eighty-four months. Class XLIII. Certificate to be returned at the end of eighty-six months. Class XLIV. Certificate to be returned at the end of eighty-eight months. Class XLV. Certificate to be returned at the end of ninety months. Class XLVI. Certificate to be returned at the end of ninety-two months. Class XLVII. Certificate to be returned at the end of ninety-four months. Class XLVIII. Certificate to be returned at the end of ninety-six months. Class XLIX. Certificate to be returned at the end of ninety-eight months. Class L. Certificate to be returned at the end of one hundred months.

MEDICAL CASE-HISTORY SHEET.

DEPT. MILITIA & DEFENCE
JAN 17 1918
H.Q. CANADA

649 B12462

Hospital Richardson Conv. Home. Station Kingston, Ont.

No. 412671. Rank Private. Name BAGSHAW, John Percival Age 23

Unit 18th. Battn., C.E.F. Service France.

Date of Admission Feb. 23rd., 1917. Date of Discharge

Diagnosis G.S.W. Left Hand. Lessened function from articular adhesions.

Date of Origin Sept. 15th. 16. Place of Origin Somme.

Cause of Illness or Injury:

Lessened function, left hand from articular adhesions, G.S.W.

History of Present Illness or Injury.
(Is Illness or Injury result of Service?)

G.S.W. left forearm on the Somme Sept. 15th. 16. Taken to Etaples, then to Calais Sept. 16th. Trans. to Sheffield to 3rd. Northern Gen. Hosp. Sent to Bushy Park Conv. Nov. 4th. 16. Trans. to Can. Special Hosp., Ramsgate, Nov. 8th. Sailed for Canada Feb. 2nd. 17 S.S. Missanabee. Reached Quebec Feb. 14th., Kingston Feb. 23rd., 1917.

Condition on Admission.

Bullet wound in left wrist entering at back of wrist just between lower ends of radius and ulna, and a little nearer radius, its exit on palmar surface same location only about 1" higher, wounds healed. Small moveable hard body about size of bean of bean, protruding slightly just below wound on palmar surface. Circulation not so good as in right hand. Pronation and supination normal. Flexion and extension of wrist very limited, flexion of four fingers all limited to about 30 degrees. Power to grip with fingers very weak.

Treatment.

QUEBEC BOARD:-- A healthy man wounded in left wrist, Sept. 15th. 16. Bullet penetrated forearm at wrist. There was apparently no injury of nerve, but X-Ray shows fracture of lower end of radius. The hand is stiff. Ha nd grasp of large objects only possible. Fingers flex only 10%, wrist is held in plane of forearm and there is 30 degrees of flexion. Pronation and supination are performed. Sensation unimpaired. Between the extremities (lower) of radius and ulna, flex or surface, there is a moveable hard body about as large as a half pea or more. An other X-ray picture should be taken to ascertain the nature of this body. His hand is quite useless now but should improve with massage.

Condition on Discharge from Hospital.

INCAPACITY:--
Eng. Board- Total.
Can. Board- 2/5 decreasing with 3 mos. treatment an unknown extent.

Duration:- Permanent/

Medical Officer i/c Case.

Date.....

M. F. B. 313a.
30M—9-16.
39-439.

Forms
I. 1237
10

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	412671	Pte	Bagshaw	
Year		Unit.	Age.	Service.

Station and Date.	Disease
11/1/17.	E B 12/1/17. recommend Inv. to Con A F B. Completed. CEB
13/1/17	To C. S. M. Bd.

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

(J 3521.) Wt. W 5606—2621. 2,000,000. 7/15. D & S.

P.T.O.

Station and Date.	

Station and Date.	
	is tender on pressure.
	Practically ~~no movement~~ ~~in~~ ~~any direction~~. Limited power of
Movements at wrist & fingers	flexion & extension at wrist joint also
	of abduction and adduction.
	Act. & act of little finger -
	Act ½ power of flexion of fingers.
	Extension of fingers good.
Sensibility	Slight impairment of sensibility of index
	finger of Rt. Land.
Electricity	Faradism. Treatment Massage.
28 NOV. 1916	X Ray of Right Wrist: joint. Antero-posteriorly and laterally.
	Report - Tuesday.
	E. C. Baths and Massage for one week. Report.
	Wrist 16-11-16 Colles Clark Ames Reaction acid Shr 4 grs. 10 3 5 Alb Nil Sug Nil Sp Gr 1.020
21 NOV. 1916	Carry on - C.S.
	X-ray report 18/11/16. "Fracture in lower part of radius with fracture of lunate and navicular". Sgt. WW Pit.
28/11/16	Continue treatment. Ot. 140 lbs. Manicure
28 NOV.	Invigilation to Rt. wrist - E.C. Bath & Massage. C.S.P.
14/12/16.	Condition shows very little improvement since admission E.B. for disposal C.E.B.
16 DEC. 1916	Treatment should be continued; Crowd Massage and Manipulation C.S.P.
20/12/16 - 5/1/17	Condition about same Cond. as before, thumb still under treatment. Present treatment. man will not improve E.B. 6/1/17. C.E.B.

Forms
I 1237
11

337/182

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
3498	412671	Pte	Bagshaw	John B.
Year	Unit.		Age.	Service.
	18th Bn		23	20/12

Station and Date.

Disease G.S.W. L. forearm

P. Dee, Farmer.

GRANVILLE CANADIAN SPECIAL HOSPITAL
15 NOV 1916
RAMSGATE

Arrived in France. Sept. 15th 1915

Wounded Sept 10th 1916.

Hospitals.

Etaples. No 1 Can. Gen. 1. 8 days

3rd Northn Gen, Sheffield 2 months

Bushey Park. 4.

6 months

Camps.

G.S.W. L. forearm

P.T. During an attack on Courcelette got a bullet in the left forearm. Shewed ~~[illegible]~~ & Later been getting massage.

Phys. Exam.

Left Forearm.

Entrance wound: small healed circular scar abt. 1/4" in diameter and situated on back of wrist 1/2" below styloid process of radius and ulna.

Exit wound on palmar surface of forearm abt 1 1/2 ins above the base of the thumb and abt. the same size as entrance wound. There is a swelling abt. the size of an almond below the exit wound. This swelling

*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.

Forms
I. 1237
10

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
Year 1916	412671	Pte	Bagshaw	J. P.
	Unit. 18th Bn.		Age. 23	Service. 8/12 – 12/12

Station and Date.

Disease GSW (Rt Forearm)

Bushy Park
Nov 9th

Born at; Matlock. Derbyshr. Single
Enlisted at; Lindsay. Ont. On Jan 15th 1915
Inoc. T. July 1916. S.P.V.I
Next of Kin. Sister) Miss. M.E. Bagshaw.
Matlock Cliff. Matlock. Derbys.
Eng

Sept 15. Wounded at the Somme Rifle Bullet.
Entrance Right forearm -wrist at back
Ext. inner aspect.
Symptoms. Compound Fracture -wrist
radius. Drop wrist.

Sept. 15. C.C.S. Dressings.

Sept 16 6 staples. ? Hosp. Dressing.

Sept 18 Eng. 3rd Northern Gen Hosp. Sheffield. X Ray
Shewed fracture.
-wrist straightened. Dressings.

Nov 9th Bushy Park.

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

(J 3521.) Wt. W 5606—2621. 2,000,000. 7/15. D & S.

P.T.O.

Station and Date.	
	On admission: —
	Wd. healed - Radius has been
	fractured.
	No movement in wrist. Slight
	movement in ulnar fingers Tracks.
	No movement in index & middle fingers
	Thumb has 5/6 No movement.
	Pressure over wound produces
	tingling in radial fingers
∫	Ramsgate
15-11-16	Trans to Granville Can' Special Hospital
	Ramsgate
	W. D. Ewes
	Captain, C. A. M. C.

MEDICAL CASE-HISTORY SHEET.

Hospital Richardson Conv. Home. Station Kingston, Ont.

No. 412671. Rank Private. Name BAGSHAW, John Percival Age 23

Unit 18th. Battn, C.E.F. Service France.

Date of Admission Feb. 23rd., 1917. Date of Discharge

Diagnosis G.S.W. Left Hand. Lessened function from articular adhesions.

Date of Origin Sept. 15th. 16. Place of Origin Somme.

Cause of Illness or Injury:

Lessened function, left hand from articular adhesions, G.S.W.

History of Present Illness or Injury. (Is Illness or Injury result of Service?)

G.S.W. left forearm on the Somme Sept. 15th. 16. Taken to Etaples, then to Calais Sept. 16th. Trans. to Sheffield to 3rd. Northern Gen. Hosp. Sent to Bushy Park Conv. Nov. 4th. 16. Trans. to Can. Special Hosp., Ramsgate, Nov. 8th. Sailed for Canada Feb. 2nd. 17 S.S. Missanabee. Reached Quebec Feb. 14th., Kingston Feb. 23rd., 1917.

Condition on Admission.

Bullet wound in left wrist entering at back of wrist just between lower ends of radius and ulna, and a little nearer radius, its exit on palmar surface same location only about 1" higher, wounds healed. Small moveable hard body about size of bean of bean, protruding slightly just below wound on palmar surface. Circulation not so good as in right hand. Pronation and supination normal. Flexion and extension of wrist very limited, flexion of four fingers all limited to about 30 degrees. Power to grip with fingers very weak.

Treatment.

QUEBEC BOARD:-- A healthy man wounded in left wrist, Sept. 15th. 16. Bullet penetrated forearm at wrist. There was apparently no injury of nerve, but X-Ray shows fracture of lower end of radius. The hand is stiff. Ha nd grasp of large objects only possible. Fingers flex only 10%, wrist is held in plane of forearm and there is 30 degrees of flexion. Pronation and supination are performed. Sensation unimpaired. Between the extremities (lower) of radius and ulna, flex or surface, there is a moveable hard body about as large as a half pea or more. An other X-ray picture should be taken to ascertain the nature of this body. His hand is quite useless now but should improve with massage.

Condition on Discharge from Hospital.

INCAPACITY:--
Eng. Board- Total.
Can. Board- 2/5 decreasing with 3 mos. treatment an unknown extent.

Duration:- Permanent/

Dis:- Anklyolis Partial left wrist 1/4

Cat. "E" Discharged Dec 31st 17.

Medical Officer i/c Case.

Date Lt D Stevenson Capt.

M. F. B. 313a.
30M—9-16.
39-439.

C
7505

Forms
I. 1237
10

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
13849	H 12641	Pte	Bagshaw	J W
Year 1916	Unit. 18: Canadians. B Camp.		Age.	Service.

Station and Date.	Disease
3rd N.Z.H. Sheffield 18.9.16	G.S.W. of L. forearm VIII. A wounded Sept 15th. A.T.J. wounds of entrance Ext on dorsal & flexor surfaces of L. forearm lower third just above wrist joint Some swelling around wounds Small amount of serous discharge X ray shows fracture of semilunar & slight fracture of lower end of Radius. Abraham Capt-
27.9.16	Splint off. Movement:
5.10.16	Movement very limited & painful
9.10.16.	Moved under Gas. Many adhesions & movement limited.
18.10.16	movement improved very little. Painful & stiff. Continue massage Abraham Capt-
25.11.16.	Admitted With Capt Garrett Wilson please take over. A Staff Major.
30.10.16	Rec for Edgar Allen treatment for machine & L'can commence treatment- Abraham Capt-
9.11.16	To Bushy Park

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

(J 3521.) Wt. W 5600 -2621. 2,000,000. 7/15. D & S. P.T.O.

Station and Date.	

M. F. W. 129.

2)M.—6-17.
1772—39—1142.

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

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

Rank Pte. Name John Percival Surname Bagshawe

Unit or Corps 45th Battalion (If a soldier) Regtl. No. 412671

Born at Matlock, Derbyshire, Eng. on, (date) July 12th 1894

Signature (for identification) J. P. Bagshaw

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

1. PHYSIQUE—Any deformity, maiming or lameness? If so, describe. Partial ankylosis left wrist.

Weight 125 lbs.

Height 5 ft. 5 in.

Colour of eyes grey

Identification Marks Scar of G.S.W. left wrist.

2. NUTRITION AND DIATHESIS?
Good

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

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

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

5. HEART?

Abnormal Sounds? no

Abnormal Size? no

Pulse Rate? 72 Intermittence or Irregularity? no Muscular Tone? good

6. ARTERIES.—(a) Any hardening or nodulation? no

(b) Blood Pressure. Syst. 110 - Diastolic 90

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

8. GENITO-URINARY SYSTEM?

Urinalysis—S.G.? 1016 Reaction? alk Albumen? nil Sugar? nil

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

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? Impaired by ankylosis wrist ~~20%~~ 2/5

Examined at Queen's Military Hospital, Signed Geo. Harper, Capt. M. O.

Date Oct. 10/17 Signed J. Wm. Anderson, Capt. M. O.

J. P. Bagshaw
Signature note of soldier.

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

II

Form to be used instead of blank space on Army Form 179

Proceedings of Medical Board at Discharge Depot.

Number 412671 Rank Pte Name and Corps of disabled soldier. Bayshaw, James 18th Batt.

Previous Civilian Occupation. Farmer.

Cause of disability - Lessened Function Left Hand articular adhesions - G S W.

Condition in detail which prevent the soldier earning a Full livelihood:-

A healthy man, wounded in left wrist Sept 15. 1916. Bullet penetrated forearm at wrist as shown on diagram. There was apparently no injury ~~to Bone~~ but X Ray shows fracture of lower End of Radius - Rt hand is stiff. Handgrasp poor objects only possible. Fingers flex only 10% PTO

Opinion of the Board.

Degree of incapacity (Please state in fractions.) 2/5 decreasing with treatment

Probable duration of incapacity:- Can not know extent.

permanent

Does it render him permanently unfit for Military Service? Yes

Would operation, special treatment or the use of appliances, etc., lessen incapacity? Convalescent Home

Signature. E A Roberton Capt President.

Members.

Station. Quebec

Date Feb 17. 1917

Approved.

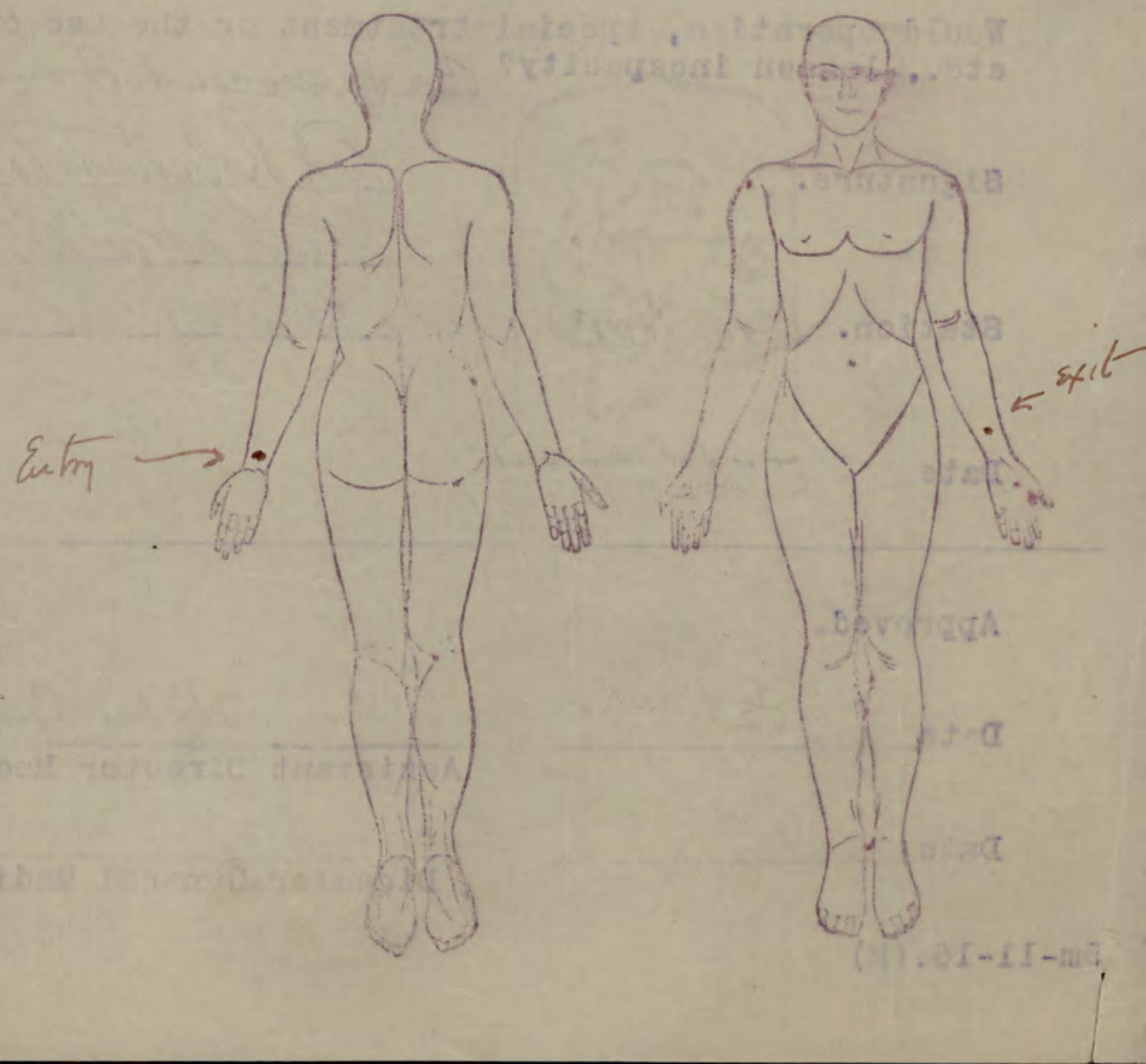
Date Feb 17/17 W. M. Carruthers Major
Assistant Director Medical Service.

Date 6/3/17 (for) D B Neely Capt
Director General Medical Service.

5m-11-16.(M)

wrist is held in plane of forearm there
is 30° of flexion. Pronation supination
are performed. Sensation unimpaired
Between the extremities (lower) of radius &
Ulna there is a movable hard body about
(bone or surface)
as large as a half pea or more
Another X Ray picture should be taken
to ascertain the nature of this body.
His hand is quite useless now but should
improve with massage.

E A Robertson Capt
W H Boyd Capt.
[illegible] Capt



Queens

This space to be for numbers.

13-2-32

Proceedings on Discharge.

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

No. 412671

Rank Pwate

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

Corps (Squadron, Battery or Company) 39th Bn

Date of Discharge Dec 31st 1917

Place of Discharge Kingston Ont

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 24 years 4 months.
Height 5 feet 5 inches.
Complexion Fair
Eyes Gray
Hair Brown
Trade Labourer
Intended place of residence (To be given as fully as practicable.) c/o J. Bowen R.R. No 2. Cameron Ont

Descriptive Marks
Gunshot wound left forearm. 2 Tattoo mks on Right forearm. 4 vaccination marks on left arm.

2. The above-named man is discharged in consequence of Being Medically unfit for further service

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

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

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

Very Good

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

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

M. F. B. 218.
25m.—11-15.
H. Q. 1772-39-113.

W. S. 9. Comp 28/1/19
I. m. S.

(OVER)

Bk Dec
8-1-18
9-1-

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

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

6. Medals and Decorations.....

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

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

(Place) Kingston

(Date) 29-12-17

L. Grant Capt. Major
O.C. "C" Unit, M.H.C.C.
Commanding .....

8. **Certificate to be signed by the Soldier on Discharge**

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

(Place) Kingston Ont L C Buckham *(Signature of Soldier.)*

(Date) Dec 21/1917 Thos A Blum *(Signature of Witness.)*

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

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

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

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

10. **Statement of Service.**

Service toward Engagement to.....(the date to which the Record of Service is completed) 2 years 350 days.

Total 2 years 350 days.

11. **Confirmation of Discharge.**

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

(Place) Kingston

(Date) 29-12-17

(Signature) L. Grant Capt. Major
O.C. "C" Unit, M.H.C.C.

List of Discharge Documents.

Reg. Conduct Sheet, Militia form B. 263.	Attestation Paper, Militia Form B. 235.
Squadron / Battery / Company } Conduct Sheet, " B. 263a.	Proceedings on Discharge " B. 218.
Copies of Convictions, by C. P. in MS.	In the case of recruits who are rejected on final approval, the discharge documents will consist of
Med. Hist. Sheet, Militia Form B. 313	*(a)* Proceedings on Discharge.
Medical Report for Invalid* " B. 227.	*(b)* Attestation.
Statement of Man's Account on Transfer and Last Pay Certificate, " D. 877.	*(c)* Medical History Sheet (in the event of such having been prepared.)
*Only if discharged "Medically unfit."	

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

Reservations referred to at Para. 8.

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

Received all pay up to and including, Oct.31/17.

J P Bagshaw

(OVER)

Vocational Counsellor

Report No. 4[illegible]61 | Class II

Bagshaw John
Cameron P.O. Lindsay Ont.

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

No. 412671 Rank Private. Original Unit 45th Present Unit 18th.

Age 21-8 Height 5 ft. 5 ins. Complexion Fair Eyes Hazel Hair D. Brown Character N.F.

Date of enlistment 15-12-15 Where enlisted Lindsay, Ont. Where seen service France 1185

Ship returned by Missanabie Date of arrival 11-2-17 Port of arrival St John

Birthplace Matlock England Religion Methodist

Name and address next of kin Sister Miss M. E Bagshaw. Matlock Derbyshire England

Cause of disability Lissened Junction Left Hand. from articular adhesions G.S.W.

Condition which prevents the soldier from earning a full livelihood

Degree of incapacity (Please state in fractions) Eng. Board Total Canadian Board 2/5 decreasing with 5 mos. treatment an unknown extent.

Probable duration of incapacity Permanent.

Is final disability likely to prevent return to previous occupation?

Recommendation of Canadian Board Convalescent Home.

Destination to which transportation issued Kingston, Ont.

Members of Board

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 Farming

Regular trade or profession

Average earnings previous to enlistment $35.00 a month any other income

Name and address of last employer J. Ferrin Cameron Lindsay Ont.

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 ———

If in receipt of sick benefits or other insurance—name of society ——— Amt. per mo. $

~~If~~ unable to follow previous occupation, ~~name preference~~ after rest and improvement

At what age soldier left school? What grade, standard, &c., was he in? } Nil.

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 Last employers

Witness Mc Donald

Date 17-2-17

I declare that the above statement is correct.

Signature Bagshaw J P

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

Lessons of a Chauffeur Course
Has received Vocational 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.....

Form No. 5c.

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.

CLASS 2.—Men whose condition may be benefitted 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 3.—Men having a pension and who-e cases will immediately by further medical treatment or hospital care be considered by the Pensions Board with a view to pension.

Office of the A.D.M.S., Canadians, Shorncliffe,
19 Westbourne Gardens,
FOLKESTONE.

Jan. 15th, 1917.

To:- Officer i/c Records,
Canadian Record Office,
LONDON.

Name Bagshaw, Jno.

No. 412671 Rank Pte.

Unit 18th. Bn.

The above noted appeared before a Medical Board on Jan. 13th. 1917 and the following entry has been made on the Medical History Sheet of this man.

Board recommends :- Invalided to Canada.
Signed. G. F. Boyer, Capt. President, S.M.B.

January 15th, 1917, Approved.
Signed. W. C. Arnold, Capt. for A.D.M.S., Canadians, Shorncliffe.

Further entries are also contained in this Sheet which are herewith copied.

3rd. Northern Genl. Hosp. Sheffield. 18-9-16, 9-11-16. G.S.W. L. Wrist,
Signed. A. McConnell, Lt.Col. RAMC.
Kings Can. Red X Hosp. 9-11-16, 15-11-16. On admission. Wound healed. Thickening of radius at site of fracture. No movement in wrist. Slight movement in ulnar fingers. Practically no movement in radial fingers. Thumb has 50% of movement. Pressure over wound produces tingling in radial fingers. Transferred to Granville Can. S. Hosp. Ramsgate.
Signed. J. W. Adamson, Capt. C.A.M.C.

Granville. G.S.W. L. Wrist. Continued about same as on admission.
Invalide to Canada. Signed. C.E. Brown, Major. C.A.M.C.

I hereby certify that the entries as above noted are true copies.

S L Walker
Captain C.A.M.C.,
for A.D.M.S., Canadians,
Shorncliffe.

CANADIAN CONTINGENT EXPEDITIONARY FORCE

QUADRUPLICATE

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. 421671 Rank Pte. Name J.P.Bagshaw

Corps 18th.Bn. who was* Discharged

On December 31st 191 7, to Class 3 Medically Unfit

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from December 1st, 191 7, to December 31st, 191 7, the inclusive date of transfer or discharge.

Dr.	$	c	Cr.	$	c
Bal. Dr. from prev. month			Bal. Cr. from prev. month		
Advances by Cheques No			Regt'l Pay 31 days at $ 1 c	31.	00
Advances by Cheques No.			Field Allow. 31 days at $ c 10	3.	10
Assigned Pay No. 4784	20.	00	Other Allowances* Clothing	13.	00
Other Charges*			Other Credits* Do. Subs 326	24.	80
Payment on transfer or discharge No. 4889	51.	90			
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)		
Total	71.	90	Total	71.	90

*Give Particulars.

A monthly stoppage of $ Nil (†) has (‡) been paid on account of Assigned Pay for the month of 191 to (Assignee)

(Address)

(†) 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 Nil

(3) cause of discharge and authority 3MD-68-B-91

If discharged from the Contingent, state if Stop Payment advice for Assigned Pay has been forwarded, and date

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

Date December 27th, 1917

Place Kingston, Ont.

Capt.
Paymaster, "C" Unit M.H.C.C.
Paymaster

N.B.—For purposes of transfer this form is to be made out in quadruplicate. One copy to Paymaster of new unit; one to District Paymaster; one to accompany the pay-list at the end of the month, and; one for retention as a record.

For purposes of discharge it is to be made out in triplicate. One copy to accompany discharge papers; one copy to accompany pay-list at the end of the month, and; one for retention as a record.

M. F. W. 44.

200M.—6-16.
H. Q. 1772-39-903

Cheque # 4889 Attached.

Paid 2/2
8-1-18
D.T.

Rank Name BAGSHAW John Percival, 414/a Reg'l No. 412671 R—122.

Unit 39th Bn If in perm. Corps, What Unit? Married or Single Single

Place and Date of Enlistment Lindsay, 22 Feb 1915. Place of Birth England

Name and Address, Next-of-Kin Miss May Elizabeth Bagshaw, Author. A/R 175-5-2 9/16. Bailey Cottages Tansley, Matlock, Derbysh, Eng. Relationship Sister

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

Nominal Roll R.B. No 1983 Cat. File R.L. Category Inst. Cases

O.S. R.1133 B.D.6

2.10.16

Report Date	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
		Arrived	England	3/7-15	
21 9/15.	O.C. 39th B	Forfeits 5 Days Pay	Shorncliffe	21 9/15	Part II D.O. No 122
10/9.15	O.C. 39th	Transfd to 18th Bn	"	10/9-15	P II " 164.
18.9.15	O.C. 18th	Embarked for France	Folkestone	14.9.15	Inform. Form
14.4.16	"	Sentenced to 10 days F.P. No 1, 7.3.16, for "Absent from fatigue" 28.2.16. (18th Bn A F B 2069, 9.3.16).			Part II No. 16
21.9.16	18th	3rd Northern Gen Hosp	Sheffield	18.9.16	Cas List B167 GSW Lft Wrist etc
27.9.16	18th	Transferred to C.C.A.C., Folkestone.		17.9.16	Part II 42 W
23.9.16	C.C.A.C.	Taken on strength.	Folkestone	18.9.16	P II O 414/a
13-11-16	18th Bn	Tfd to Kingston Red Cr Hosp	Surbey Park	9-11-16	C.L.B 212 100
21.11.16	"	Tfd to S.C.S.H.	Ramsgate	15.11.16	C.L.B 218 "
21-2-17	"	Discharged Granham Spec Hosp.	Ramsgate	2-2-17	C.L.B 288 "

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					
9.2.17	CCa.C.	S.O.S. to Can for Discharge	Hastings	2.2.17	Pt II o 68	
	Dis Dep	To Con Home.	MD #3 Kingston	11. 2/17	NR 196.	

Rank Name BAGSHAW John Percival, Reg'l No. 412671

If in perm: Corps, What Unit?

Unit 39th Bn Married or Single Single

Place and Date of Enlistment Lindsay, 22 Feb 1915 Place of Birth England

Name and Address, Next-of-Kin May Elizabeth Bagshaw,

Matlock, Derbyshire Eng. Relationship Sister

Assigned Pay Monthly $ 20.00 1/4/16 @ Payable to May Bagshaw (as above) 2 months from 1/4/16 @.

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Canada Reason Character

PAY OFFICE, N.E. BRANCH, CANADIAN CONTINGENT, FEB 7 1917

Entered on N.E. Card Index

Checked by H. Gillolson

Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
1915 July 1	July 31	31	1	31	31	.10	3 10		34 10	31		27 50		5 00	32 50	1 60	for 5 days 21-7-15
								74									adj: exch.
Aug 1	Aug 31	31	1	31	31	.10	3 10	1 60	36 44 44 85			32 85			37 71 50	1 27 9 23	for 5 days in July under charged.
Sept 1	Sept 10	10	1	10	10	.10	1 00	1 27	9 73					30	9 23	18 41 Rec'd 150	16
								Balance Sept. 10th 1915								9 73	
11/9	30/9	20	1	20	20	.10	2		22			26 4			26 4	2 33	
1/10	31/10	31		31	31		3 10		34 10	455 466		5 23			5 23	5 43	
1/11	30/11	30		30	30		3 .		33	570		2 68			2 68	8 75	
1-12	31-12	31		31	31		3 10		34 10	552 640		267 265		30 80	36 09	85 76	28 days Rec'd 18/1/16
										698		262					
1-1-16	31-1-16	31		31	31		3 10		34 10	759		261			5 34	1 46 7	
1-2-16	29-2	29		29	29		2 90		31 90	842 794		262 261			5 23	141 29	
March		31		31	31		3 10		34 10	886 934		262 261			5 23	170 16	
		275															
				275			27 50	.74	303 24 5			96 78		36 30	133 08 5	170 16	

Carried forward to Large Ledger sheet

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						

A--305.

0981

Ref. No. 15620

MILITIA AND DEFENCE

ASSIGNED PAY.

8.

To whom: May Bagshaw

Address: Matlock Cliff
Matlock
Derbyshire

Rate: $20.00 per month

Date to Commence: 1st April 1916

By whom assigned: Bagshaw Jno P.

Regtl. No.: 412671

Rank: Private

Corps &c.: 18th Battalion

C.E.A.C.

PAYMENTS.

Month.	Year.	Cheque No.	Amt.	Pay Sheet Deduction.	REMARKS.
Jan.	1916				
Feb.					
March					
Apl.					
May		24029	40		Apl & May.
June	✓	525-36.	20		
July		85544	20		
Aug.		119044	20		
Sept.		152544	20		
Oct.		188546	20		
Nov.	160 ✓	225547	20		
Dec.		266051	20		
Jan.	1917	307556.	20		
Feb.			$ 200		
March					
April					
May					payment Stopped
June					A.B.M. Form.
July					25/11/17
Aug.					Dis to Canada
					Taki

M. F. W. 41
1 0M—7-16
1772-39 889.

E

Name Bagshaw. Ste John P.

1249

Regimental No. 412671

Unit 18th Batt

Date of enlistment

Place of "

Married (yes or no) No

Amount of pay assigned monthly $ 20 Jany 1917

To whom payable Mary Bagshaw
Matlock, Derbyshire England

Name and address of next-of-kin
Cameron P.O.
Lindsay
Ont

Date and place discharged

Reason for discharge 649. B-12462.

Character on discharge Missanabie 11/3/17.

b 5351—M. & D. 6880.

Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
	25/1/17							17 22						9 73		Baal
26/1/17	28/1/17	34	1	34 -	34	.10	3 40	- -						10 6 -		Quebec
									21 162			Balder		101 89	21 162	To 6 Unit 1/3/17.

Pensioned
fr 1-1-18.

M. F. W. 41
1 0M—7-16
1772-39 889.

Name.....

Regimental No.

Unit

Date of enlistment

Place of "

Married (yes or no)

Amount of pay assigned monthly $

To whom payable

Name and address of next-of-kin

Date and place discharged

Reason for discharge

Character on discharge

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date					

7151/144

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

724-J-2

Name Bagshaw, John Percival
(Surname, Christian Name)

Regimental Number 412671 Rank Pte.

Unit 18th Bn.

Original Unit

District where paid M.D. 3.

Date of Discharge

P. D. P. Filing Number 6-46-3.

Address (in full) R.R. NO. 2.
Cameron, Ont.

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

L. L. 22573—M. & D. 8009.

Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Over-payments to be Recovered	Total Amount Paid
	Cheque No. A	Date	Amount 30 days	Cheque No. B	Date	Amount 30 days	Cheque No. C	Date	Amount 31 days		
100 10	917	9-1-18	33 00	899	9-2-18	33 00	897	11-3-18	34 10		100 10

1st G-665420-2-19 7000

M. F. W. 127.
50M—6 17.
1772 38-1140.

Remarks:

144

Dec'n No. 7151 / W. S. G. File No 726-- V-20

Award ..... days at $ 7.00 per day $ 350 00

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

Less P, D. P. Credited $100:10

$

Less further debit balance $.....

Net due paid as below 349.90

	TO SOLDIER			TO DEPENDENT		
0	Ag. No.	Ch. No.	Amount	Ag. No.	Ch. No.	Amount
1	532	6654	70 00			
2	880A	415814	70 00			
3	473B	415814	70 00			
4	420C	450362	34 90			
5						
6						
	Total			Total		

20-2-19
8-5-19
5-5-19.

RECD. AUDITOR
Posting checked by
Ed Boodle
Date 3-7-19

30 Victoria Ave.,

Lindsay

Ont.

(611)—Wt. W1751-1103. 500,000.—5-15.—C. & G. Forms B. 103/4.

Certified Correct
by Officer i/c Records 10/8/16
(KI 101/29)

18th. Canadian Bn.

Army Form B. 103.

Casualty Form—Active Service.

Regiment or Corps 39th Bn C E F.

Regimental No. 412671 Rank Pte Name J O Bagshaw

Enlisted (*a*) 11/1/15 Terms of Service (*a*) Duration of War Service reckons from (*a*) 11/1/15

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: Date	Report: From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
	18th Bn	Disembarked in France	Boulogne	15-9-15	Nominal Roll
2-12-15	18th Bn.	Sentenced to 28 days F.P. No 1, for "Absent from Fatigue."	Ridgewood,	1-12-15	B.2069, 2 12/15 Part II Order 13, 18.12/15.
9-3-16	18th Bn	Sentenced to 10 Days F.P. No 1 for "Absent from Fatigue," 28/2/16.	On The Field	7/3/16	B 2069, 9 3/16 Part II Orders 7/9, 16, 14 4/16
17-9-16	H.S. Stad Antwerpen	Gsw. f'arm r. (slt) (frac. radius)	Adm. H.S. Stad Antwerpen,	17-9-16	W 3083. Pt II Order 42, 27/9/16.

to England.

J O'Hogan Capt.
For Officer i/c Can. Records,
Canadian Section,
G.H.Q. 3rd Echelon.

1 OCT 1916

(*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. 3172.
(In pads of 50.)

3rd N Z Hospital.

Ward 24 No. of Bed _____ Date 18/9/16

Regtl. No.	Rank and Name	Corps	Part to be X-Rayed
42671	Pte J P Bagshaw	18th Canadian	L forearm

Short History of Case
(To be completed by M.O. i/c case)

S.S.W of L forearm

Signature of M.O. [illegible]

Date Sept 18/16

Report on Result of X-Ray Examination.
(To be completed by Radiographer.)

No. of Plate _____

fracture lunare & end of radius

Signature of Radiographer _____

Date _____

(938) W 8290—3262 100,000 8/15 H W V(M 163) Forms/W. 3172/1
15134—116 300,000 1/16

D.M.S. 1300.

Surname: Bagshaw Christian Name or Names: J. P. Reg. No.: 412671

Rank: Pte Unit: 18 Battn. Co. Troop Batty.

Hospital: 3rd N.G.H. Sheffield Date of Admission: 18-9-16

Transferred: Bushey Park Hosp. 9-11-16.

Granville Can Spl Hosp. 15.11.16.

Hosp.

Hosp.

Diagnosis: G.S.W.L. Wrist Comp. Fract. Radius (Sep.)

(1)
Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

DISPOSITION

C.L. 21.9.16 B.67

C.L. 13-11-16 B 242

21.11.16. B 218.

21-2-17 B 1288

Date

Dis 3-2-17

REMARKS

A.M.D. 2 DEPT.
Bch. of D.G.M.S. O.M.F.C. London.

16

EPITOME OF HOSPITAL TREATMENT.

	Hospital	Adm.
1.		
2.		
3.		
4.		
5.		
6.		
7.		

649-B-12462)

CARD NO. 231

SURNAME. Bagshaw

CHRISTIAN NAMES John Percival

REGL. No. 412641 RANK Pte

UNIT ~~39th~~ 18th

FORMER CORPS nil

.3.

S.G.S. Dis. 31-12-17.

Batt

old No a 12641

NEXT OF KIN.

NAMES IN FULL Bagshaw, May Elizabeth

RELATIONSHIP TO SOLDIER Sister

ADDRESS Matlock, Derbyshire, England

CHANGE OF ADDRESS

COUNTRY OF BIRTH England, Matlock, Derby DATE July 12/1893.

0/S 17/6/15 138/1

PLACE OF ATTESTATION Lindsay DATE Feb 22nd 1915

Sailed from Montreal Per S. S. "Missanabie" 24-6-15.

R/C 11-2-17.

ja.s.

L. L. 90 89.—M. & D. 6312.

M. F. W. 22. 100m.—1-16. H. Q. 1772-39-839.

MARRIED SINGLE yes, WIDOWER

TRADE OR CALLING Labourer, RELIGION Methodist,

DESCRIPTION.

APPARENT AGE 21 YEARS 8, MONTHS

HEIGHT 5 FEET 5, INCHES

CHEST MEASUREMENT 29½ INCHES EXPANSION 3½. INCHES

COMPLEXION Fair EYES Hazel, HAIR Dk. Brown.

DISTINGUISHING MARKS Scar, Left Wrist,

MEDICAL EXAMINATION. PLACE Lindsay. DATE Mar. 10/1915

Returned per S.S. "Missanabie" 2-2-17. Auth 7313.

No. 412671 Rank Pte, 18th B'n. Name Bagshaw J. P.

T. O. S. Unit Casualties C. E. F.

M. D. 3

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1917 Mar 1	1917 Mar 31	M.		

REGT'L NO ~~416271~~

~~H.Q. FILE NO. 649~~ 412671.

NAME Bagshaw. John Percival

RANK AND CORPS Pte. 18th Bn. (Form. 41st Bn.)

FOLLOWS NO.

FOLLOWS

CABLE No.	CABLE Date	NATURE OF CASUALTY
O.1096.	20-9-16	Adm. Third Northern Gen. Hosp. Sheffield Sept 18th 1916. (wounded severly wrist compound fracture radius).
R.2583	23-9-16	
I 313	4-2-17	Sailed for Canada per the S.S. Issanable on 2nd. Feb. 1917. S.W. left wrist.

L. L. Job 90581—M. & D. 6314.

M. F. W. 42—50M—1-16.
H. Q. 1772-39-893.

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
B.167.	3rd North Gen. Sheffield	18-9-16	GSW. L. Wrist & Comp. Frac. Radius Sev
B212.	to Kings Can + Bushey P K. Hampston Hill	9-11-16	" " " " " "
B218.	to Granville Can. Spec. Ramsgate	15-11-16	" " " " " " " "
B288	~~Gran~~ Discharged	3-2-17	G.S.W. L. Wrist Comp. Frac. Radio (Sev).
55	M.A.C.C. Kingston	23-2-17	~~Outpt~~ Outpt. S.O.L. Richardson.
191	M.A.C.C. Kingston	23-2-17	Outpt. S.O.L. Richardson Outpt. Shr. off list
69	M.A.C.C. Kingston	2. 3-17	Richardson C. Hom
2.			Outp. S.O.L. Richardson
109.	" " " " "	18-4-17	Outp S.C.L. Richardson (Rev H.
94	" " " "	4-4-1	Richardson Cord H.
118.	" " " " "	27-4-17	Outp S.O.L. Richardson H.

LIST NO.	HOSPITAL	DATE OF ADMISSION	REMARKS
136	M.M.C.C. Kingston	16-5-17	Trans. to Tellercairn
158.	M.M.C.C. Kingston	7-6-17	Trans. to Richardson
156.	" " " " "	3-6-17	Trans. to Richardson
130	" " " " "	10-5-17	Adm pd S.O.L. list "
268.	" " " " "	24-9-17	S.O.L. Richardson
265.	" " " " "	25-7-17	Trans. Richardson
276-1	" " " " "	2-10-17	Trans. Queens from Richardson
296	M.H.C.C. Kingston	12-10-17	Adm pd S.O.L. Queens
319	M.H.C.C. Kingston	14-11-17	Inpatients Queens
826	M.H.C.C. Kingston	21-11-17	Adm pd with Subs Queens
3	M.H.C.C. Kingston	31-12-17	Disch from H.M.S. Queen C.C. Conduct good.

NAME Bagshaw. John Percival

RANK AND CORPS Pte. 18th Bn.

REGT'L NO. 412671

H. Q. FILE NO. 649.

FOLLOWS NO.

FOLLOWS

CABLE

NO.	DATE

NATURE OF CASUALTY

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

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

R. 149.

Name BAGSHAW, John Percival *Rank* Pte. *Reg. No.* 412671

Unit 18th Bn

Next of Kin Miss May Elizabeth Bagshaw, Baileys Cottages, Tansley Rd. Matlock, Derbyshire.

Date 1916	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
18-9	3rd Nth. G.H.	Sheffield	GSW L.Wrist Comp. Frac. Radius sev.	B167	20-9 1096	21-9
9-11	Kings Can RCH	Bushy Pk.	-do-	B212	11-11	
16-11	Granville Can.Spl.H.	Ramsgate	-do-	B218	20-11	
3-2-17	Discharged.		-do-	B288	20-2	

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

Com.

Number 412671 Rank Pte.

Surname BAGSHAW.

Christian Name John Percival.

Units 18th. Bn. Can. Inf. Theatre of War France

Date of Service 15-9-15

Remarks

Latest Address ~~R.R. No. 2~~ 8 Caroline Street
~~Cameron Ont.~~ Lindsay, Ont.

Roll No. B. Page 20373.

200m.-6-21.

TOTAL SERVICE WHERE AND HOW LONG ..... DATE AND PLACE OF ORI

DISEASE OR INJURY .....

OPERATIONS .....

RESULT OF OPERATIONS .....

(A) DATE OF ARRIVAL AT HOSPITAL AS AN ADMISSION .....

(B) AS A TRANSFER (STATE WHERE FROM) NAME OF HOSPITAL .....

DATE OF DISCHARGE TO UNIT ..... IN CA

DATE OF DISCHARGE AS AN INVALID .....

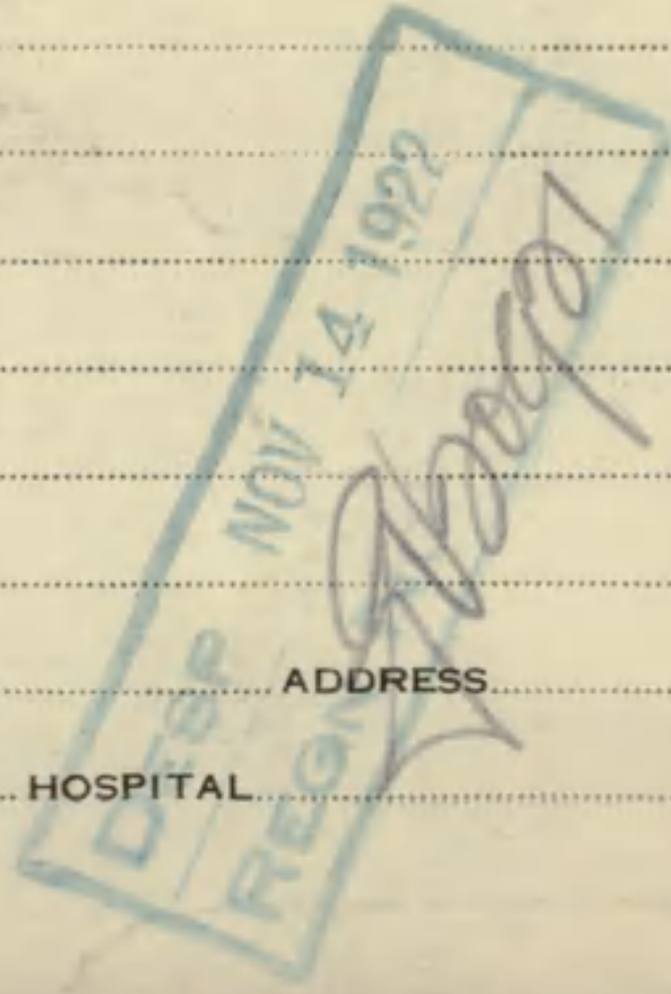
DATE OF DEATH .....

DATE OF TRANSFER (STATE WHERE TO) NAME OF HOSPITAL .....

OTHER INDEPENDENT CONDITIONS DIAGNOSED .....

NEXT OF KIN ..... ADDRESS .....

..... HOSPITAL .....



* CROSS OU

M. F. W. 142.
1772—39—1171.
50m.—2-19.

7505

REG. NO. 412671 NAME Bayshaw - John Percival 39
(SURNAME FIRST)

RANK Pte CORPS 18th Bttn C.E.F.

AGE 23 SERVICE

NAME OF HOSPITAL Queens Military PLACE Kingston

DATE OF ADMISSION 23 - 2 - 17

DISEASE G.S.W. Left hand

DISCHARGE 31 - 12 - 17

OPERATION

DISCHARGED TO DUTY Yes

TRANSFERRED TO

DISCHARGED BY MEDICAL BOARD

100M—9-17—H.Q. 1211-8-30.

REMARKS .....

No. | Rank Pte | Name Bagshaw J. P.

T. O. S. | Unit 45th Victoria Regt (3rd O/S Contingent) | M. D. 3

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915 Jan 9	1915 Jan 31	L		
Feb Mar. 1	Mar 25	L	Trans. to Belleville	Mov. part.

No. 12271 Rank Pte Name Bagshaw J. O.

T. O. S. 26/3/15 (200.26.27/3/15) Unit 39th Battalion.

M. D. 3

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915	1915			
Mar. 26	Mar. 31	✓		
Apr 1	Apr 30	✓		
May		✓		
June		✓	120 hrs detention + 6 days pay 9/6/15	June pay list.
July				

UNIT SAILED
JUN 24 1915

X-Ray Report Wrist.

"I have the honour to report that X-Ray plate of the marginally noted man's wrist taken April 23rd., 1917, shows a fracture of the Lunate bone with some ankylosis between this bone and the capitate bone."

sgd. H.A. Boyce

MARRIED OR SINGLE S

PLACE OF BIRTH England

NAME AND ADDRESS OF NEXT OF KIN Mary Elizabeth Bagshaw
Matlock. Derbyshire. Engl

RELATIONSHIP OF NEXT OF KIN Sister

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

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

J

REG'L NO. 412671 RANK Pte NAME Bagshaw, John Percival

IF IN PERMT. CORPS | WHAT UNIT UNIT 18th Bn. TRANSFERRED TO L.P.B. Grand DATE 24/1/17 AUTHORITY C.C.L. 686. 18/1/17

PERMANENT FORCE ALLOWANCES TRANSFERRED TO DATE AUTHORITY

PLACE OF ATTESTATION Lindsay TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION 22 Feby 1915. TRANSFERRED TO DATE AUTHORITY

PAY OFFICE, N.E. BRANCH FEB 7 1917 CANADIAN CONTINGENT

ASSIGNED PAY MONTHLY $ 20.10 DATE EFFECTIVE 1.4.16

PAYABLE TO May Bagshaw. Matlock, Derbyshire Eng. RELATIONSHIP

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) 24.1.17 EFFECTIVE 1.2.17 REASON Disbyd. to Canada

DISCHARGE DATE AND PLACE 25/1/17 Canada REASON AND AUTHORITY C.C.L. 686 18.1.17

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE) 26.1.17.

Entered on N.E. Card Index

Checked by H. Gillotson

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

DATE	PAY No. OF DAYS	PAY RATE	PAY AMOUNT $	PAY AMOUNT c.	FIELD ALLOWANCE No. OF DAYS	FIELD ALLOWANCE RATE	FIELD ALLOWANCE AMOUNT $	FIELD ALLOWANCE AMOUNT c.	WORKING OR SPECIAL PAY No. OF DAYS	WORKING OR SPECIAL PAY RATE	WORKING OR SPECIAL PAY AMOUNT $	WORKING OR SPECIAL PAY AMOUNT c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 NO	1 DATE	2 NO	2 DATE	3 NO	3 DATE	4 NO	4 DATE	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE CREDIT	BALANCE DEBIT	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMA
1916																																			
Mar 31st	1.75		2.75				27	50						74	303	24											96	78		36	30	133	08	170	16		
																																			B.B.L.
April 1-30	30	1.00	30		30	10	3								33		976	1019						2 62	2 62			20	11	36	24	166	92		10 days F.P. No 1 7.3.16.
May 1-31	31		31		31		3	10							34	10	162	15.5	1079	26.5				256.	255			20		25	11	175	91		
June.	30		30		30		3	00							33										523			20		20		188	91		
July	31		31		31		3	10							34	10			1150	5.7					262			20	X	37	85	185	16		
Aug	31		31		31		3	10							34	10	127	2.8	1275	54.7				26.	26.			20		25	22	194	04		
Sept 1-5	30		30		30		3								33		349	30/5						261				20		26	61	207	43		
Oct	31		31		31		3	10							34	10												20		20		218	53		
Nov	30		30		30		3	00							33	00												20		20		231	53		
Dec	31	1.00	21		21	10	2	10							34	10					3/25 R 246 24 26 36	9/11 1	415 Ramsgate	3/12 7/11			2 43	08	67	20	1	32	72	42	193	21
1917																											2 43								
Jan	28	1.00	28	00	28										25	30					1	"	7/11				4 56			20			24	29	191	27
		1.00	2	00																								200							
Jan 24/1	9	10	20	20										14	2	20			Bushy HK.	7/34	1/11						24 33		X	19	70	174	22		
	5.75		6.37	50											633	24			Ramsgate	1/9	16/11													
Balance transferred to N. E. Branch.																														174	22				
																														174 22	174 22				

Jan R 39 Batn 24/1/16

Trans to L.P.B. Branch C.C.L. 686 24.1.17 18/1/17

Dr. in extension of debit to offset 10.00 error " " " July 1916

Ck's 7134 8179 Track Grand Trunk 23 M.S.F.C. 17.1.17 Rund 25/1/17

A.I. Pay Book Verified

L.P.B. Henderson 25/1/17.

Disbyd to Can. 25/1/17. C.C.L. 686 18/1/17

Credit Bal on Disbyd 174.22

Cr Bal 174.22

Trans to "Canada"

Discharged

Small

Ledger Sheet.

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

(At Station or Hospital where finally disposed of.)

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

Date .....

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

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

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

Administrative Medical Officer.

Militia Form B. 227.
200m. 8-16.
H. Q. 1772-38-117.

DETAILED MEDICAL HISTORY OF INVALID.

Station

Corps

Regimental No. Rank

Name

Disability

Date

Hospital or Station transferred to for final disposal.

Date of final disposal

How finally disposed of

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

Address:- Cameron P.O., R.R. No.2

MEDICAL HISTORY OF AN INVALID.

1. Station. Kingston
2. Regiment or Corps. 45th Battalion 18
3. Regimental No. and Rank. #412671 Private
4. Name. Bagshaw, JnPercival (John)
5. Age last Birthday. 23
6. Enlisted on Jan. 15th 1915 at Lindsay, Ont.
7. Former trade or occupation. Fireman ry.

8. General remarks on his:—
   (a) Conduct.
   (b) Habits.
   (c) Temperance.
   (For this purpose the Company defaulter sheets will be obtained from the man's Commanding Officer.)

DEPT. MILITIA & DEFENCE NOV 16 1917 H.Q. CANADA

Date. October 9th 1917.

649-B-12462

9. Service.

	Years.	Days.	PERIODS From	PERIODS To
45th Battalion			Jan. 15th 1915	Mar. 1915.
39th Battalion			Mar. 1915	Sept. 1915.
18th Battalion			Sept. 1915	Date.

10. (a) Disease or disability. Ankylosis(partial) left wrist.
    (b) Date of origin. Sept. 15th 1916
    (c) Place of origin. Somme, France
    (d) Cause. G.S.W.

11. Present condition. (Most Important.)
    (To include full description of present disabling condition or conditions, and of the immediate and direct cause of incapacity, *i.e.*, debility, breathlessness on exertion, necessity of treatment by rest, etc.)

Subjective:- Limitation of movement of left wrist, stiffness and aching pains, numb feeling of fingers, general weakness of wrist and hand. Objective:- Scar of entry of G.S.W. back of left wrist just between lower ends of radius and ulna, nearer to radius, scar of exit on flexor surface between lower ends of radius and ulna just above anterior anular ligament. Small hard tender movable mass about size of pea, just below scar of exit on flexor surface, apparently fracture lower end of radius. Pronation and supination normal. Flexion at wrist only about 20 degrees normal. Extension 5% normal. Wrist is held in plane of forearm. Flexion of fingers at metacarpal phalangeal joint about 80%. Flexion of fingers at interphalangeal joints about 50% and quite painful. Finds it difficult to pick up small objects, grip about only 1/4 normal. Sensation normal. Movement of thumb normal. Atrophy of muscles of hand about ½" and atrophy of muscles of fingers. Otherwise man in good condition. Heart and lungs apparently normal. Pulse 72, B.P. systolic 110. Diastolic 90. Urine alkaline 1076, no albumen, no sugar.

12. (a) Is the disability the result of service or climate? Service.
    (b) Has it been aggravated by intemperance, vice or misconduct? No.

M. F. B. 227.
200M. 8-16.
1772-29-117.

13. (a) For purpose of Identification. (Here a full description of wounds, scars, deformities, etc., is to be given.)

Scar of G.S.W. on back and front left wrist. Old scar of burn over posterior surface left wrist.

Tattoo mark flexor and extensor surface right forearm.

(b) In case of wounds, or other injuries, state whether sustained on or off duty. If not received in action was a Court of Inquiry held ? In action.

(c) In the event of the disability being attributed to exposure on duty, state clearly the nature of such exposure, and whether it was exceptional or otherwise. Not Applicable.

14. Treatment. Hospital France.

Hospital England.

15. If the disabling condition had its origin before enlistment, has it been aggravated by service, and to what extent ? Not Applicable.

16. What is the probable duration of the disability or of each disabling condition, if more than one contributes ? Slight permanent disability.

17. To what extent will it prevent his earning a full livelihood in the general labour market ? Please state in fractions. When more than one disabling condition is present, the extent of the disability due to each should be stated. 2/5 for one year.

18. State if for discharge on account of unfitness for Service. Yes.

George Hooper. Capt. A.M.C.

Medical Officer by whom the case is brought forward.

OPINION OF THE MEDICAL BOARD.

Does the Board concur with the preceding report ? If not, give differing opinion.

10. Yes

11. Yes

12. Yes

15. Yes

16. Yes

17. Yes

18. Is he unfit for Military Service. Yes

Recommendations : Further treatment not indicated. That he is fit to pass under his own control, Category "E"

Signatures :—

J. B. Macaulay Capt. A.M.C. President.

J. H. Ryan Capt. A.M.C. Members.

Station. Kingston, Ont.

Date. October 9th 1917.

Date. NOV 8 - 1917

Approved.

Date.

Major, A.M.C. D/ A.D.M.S. Mil. District No. 3 Asst. Director of Medical Services. For A.D.M.S. Mil. District No. 3

Director-General of Medical Services.

Table III.—Boards; Courts of Inquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, etc.

Date	Brief details, and signature.
1.2.15	Vac. Good. F.B.C.
6.3.15	Inocs. " F.B.C.
16.3.15	" "

Table IV.—Service Table.

Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation	Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation

MD.

DUPLICATE.

412671.

Army Form B. 178.

To be used for recruits enlisting direct into the Regular Army only. Army Form B. 178[A] to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname BAGSHAW *Christian Name* John Percival

TABLE I.—GENERAL TABLE.

Birthplace ... Parish Matlock County Derbyshire, Eng.

Examined ... ... on 9th day of March 1915.
at Lindsay

Declared Age ... ... 21 years ____ days.

Trade or Occupation ... Labourer

Height ... ... 5 feet, 5 inches.

Weight ... ... 116 lbs.

Chest Measurement — Girth when fully Expanded. 33½ inches.
Range of Expansion 4 inches.

Physical Development ... Fair

Vaccination Marks — Arm ... 1 Right 4 Left
Number 5

When Vaccinated ... ... Feb. 1st 1915

Vision ... ... R.E.—V=
L.E.—V=

(*a*) Marks indicating congenital peculiarities or previous disease ... (a) Left wrist scar

(*b*) Slight defects but not sufficient to cause rejection ... ... (b) None

Approved by (*Signature*) F.B. Carron,
(*Rank*) Maj.
Medical Officer.

I certify the foregoing to be a true copy of the original entry on a Medical History Sheet of this man.
C.A.M.C.
for the Officer in Charge of Records
Canadian Contingents.

Enlisted ... ... at Lindsay, Ont.
on 11th day of Jan. 1915.

Joined on Enlistment ...	Corps.	Regtl. No.
	Overseas Co. 45th Vict. Regt.	
Transferred to	18th Can. Bn.	412671.

Became non-effective by ____

on ____ day of ____ 191 .

(*Signature*) ____

(*Rank*) ____

This Medical History Sheet has been compared with the Corresponding Attestation Paper, and entries made in red have been taken from the Attestation Paper.

W.R.WARD, P.L.O.,
Colonel in Charge of Records,
Canadian Contingents.

(1908) Wt. W2809—1662. 200000. 5/15. Sir J. C. & S.

Table II.—Only for Admissions to Hospital or to the Sick List in the Case of Warrant Officers treated in quarters.

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of Days in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer.
	Day	Month	Year	Day	Month	Year				

PENSIONS AND CLAIMS BOARD, Canadian Expeditionary Force, assembled at Prior Park, Bath, England, on the day of 191

Members of Board.

Proceedings.

The Board having considered the evidence of the man marginally noted, and the documents submitted, hereto attached, which form part of these Presents, marked

Signed at Prior Park, Bath, this day of , 191 .

President.

Members.

St. C.P., Kingsway, C.
30,000—17/4/16—16.

Army Form B. 170.
Canada.

Medical Report on an Invalid.

Ramsgate.

Station GRANVILLE CANADIAN SPECIAL HOSP.

Date January 17th 1916.

1. Unit 14th Battalion.
2. Regimental No. 41267
3. Rank Private
4. Name Bagshaw Jno.
5. Age last birthday 23.
6. Enlisted on Dec. 15th 1915. at Lindsay, Ont.
7. Former Trade or Occupation

DEPT MILITIA & DEFENCE FEB 26 1917 H.Q. CANADA

8. Disability.

Stiffness Left hand. Loss of Grip.

Statement of Case.

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.

9. Date of origin of disability. September 15th 1916.

10. Place of origin of disability. Somme.

11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.

Bullet wound left wrist, entrance on posterior surface of wrist on ulnar side, Exit on palmar surface of wrist on Radial, side. Compound fracture of radius. Wounds healed in three weeks. No operations except for straightening wrist. Hand has been stiff and circulation poor. There has been very little improvement under treatment. November 21st 1916. - X Ray shows fracture of lower end of radius with lunate and navicular.

Officer in medical charge of case.

12. (a) Give your opinion as to the causation of the disability.

(b) If you consider it to have been caused by wounds received or illness contracted (1) in the presence of the enemy (2) on active service, explain the specific conditions to which you attribute it. *(See notes on page 3.)*

G.S.W. Left forearm.

(1.) Yes.

(2.) Fracture of lower end radius and injury to soft structures of left wrist.

13. What is his present condition?

Weight should be given in all cases when it is likely to afford evidence of the disability.

Weight 128 lbs. Usual. General condition - Good. Heart and lungs - clear. Scars of entrance and exit of bullet healed. the hand is atrophied and perspires freely and Feels cold. There is very slight active movement in the left wrist joint and flexion in the matacarpo-phalangeal and inter phalangeal joints is quite limited resulting in no gripping power. Sensation to pin apparently normal.

14. If the disability is an injury, was it caused

(*a*) In the presence of the enemy? Yes.

(*b*) On active service? Yes.

(*c*) On duty? Yes.

(*d*) Off duty? No.

15. Was a Court of Inquiry held on the injury?

If so—(*a*) When?

(*b*) Where?

(*c*) Opinion? Not applicable.

16. Was an operation performed? If so, what? No.

17. If not, was an operation advised and declined? Not applicable.

18. *In case of loss or decay of teeth.* Is the loss of teeth the result of wounds, injury or disease, directly* attributable to active service? Not applicable.

19. Do you recommend

(*a*) Fit for duty? No.

(*b*) Fit for base duty? No.

(*c*) Invalided to Canada? YES.

(*d*) Discharge as permanently unfit? No.

C E Brown Surg Capt

Officer in medical charge of case.

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

~~except~~†

GRANVILLE CANADIAN SPECIAL HOSPITAL RAMSGATE 12 JAN 1917

Station Granville Canadian Special Hospital, Ramsgate. Major, C.A.M.C.

Officer in charge of Hospital.

Date

* Loss of teeth on, or immediately after, active service should be attributed thereto, unless there is evidence that it is due to some other cause.

† Delete this word if no exceptions are to be made.

Opinion of the Medical Board.

NOTES—(i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as it is essential that the Members of the Pensions and Claims Board should be in possession of the most reliable information to **enable them to decide upon the man's claim to pension.**

(ii.) Expressions such as "may," "might," "probably," &c., should be avoided.

(iii.) The rates of pensions vary according to whether the disability is attributed to wounds or injuries received or illness contracted, (1) in the presence of the enemy, (2) on active service. It is therefore essential when assigning the cause of the disability to differentiate between them (*see* Articles 641 to 648 of the Canadian Pay and Allowance Regulations).

(iv.) In answering question 20 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.

	a1	a2
20. (*a*) State whether the disability is the result of injuries received or illness contracted, (1) in the presence of the enemy, (2) on active service.	Yes.	Yes
(*b*) If due to one of these causes, to what specific conditions do the Board attribute it?	GSW	
21. Has the disability been caused or aggravated by		
(*a*) Intemperance?	No	
(*b*) Misconduct?	No	
22. Is the disability permanent?	Yes	
23. If not permanent, what is its probable minimum duration? *To be stated in months.*	Not applicable.	
24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present? *In defining the extent of his inability to earn a livelihood, estimate it at ¼, ½, ¾, or total incapacity.*	total	
25. If an operation was advised and declined, was the refusal unreasonable?	Not applicable.	
26. Do the Board recommend		
(*a*) Fit for duty?	No	
(*b*) Fit for base duty?	No	
(*c*) Invalided to Canada?	Yes	
(*d*) Discharge as permanently unfit?	No	

27. Remarks.

APPROVED
for Monison
CAPT. C.A.M.C.
for G.O.C. CANADIANS.

Signatures:—

Geo F Boyd Capt President.

Station Ramsgate 13 JAN 1917 J Canadian Capt Members.

Date 191

Approved.

Station SHORNCLIFFE— (18, Westbourne Gardens, Folkestone.)

Date 15 JAN 1917

W Carnwath Capt. President.

Administrative Medical Officer. FOR A.D.M.S. CANADIANS, SHORNCLIFFE.

PENSIONS AND CLAIMS BOARD, Canadian Expeditionary Force, assembled at Prior Park, Bath, England, on the day of 191

Members of Board.

Proceedings.

The Board having considered the evidence of the man marginally noted, and the documents submitted, hereto attached, which form part of these Presents, marked

Signed at Prior Park, Bath, this day

of , 191 .

President.

St. C.P., Kingsway, W.C.
30,009—17/4/16—10533.

Army Form B. 179.
Canada.

Medical Report on an Invalid.

Ramsgate.

Station GRANVILLE CANADIAN SPECIAL HOSP.

Date January 17th 1916.

MILITIA & DEFENCE
JAN 17 1918
CANADA

649-D-19462

1. Unit 14th Battalion.
2. Regimental No. 412671
3. Rank Private
4. Name Bagshaw Jno.
5. Age last birthday 23.
6. Enlisted { on Dec. 15th 1915. / at Lindsay, Ont.
7. Former Trade or Occupation }

8. **Disability.** Stiffness Left hand. Loss of Grip.

Statement of Case.

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.

9. Date of origin of disability. September 15th 1916.

10. Place of origin of disability. Somme.

11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.

Bullet wound left wrist, entrance on posterior surface of wrist on ulnar side, Exit on palmar surface of wrist on Radial side. Compound fracture of radius. Wounds healed in three weeks. No operations except for straightening wrist. Hand has been stiff and circulation poor. There has been very little improvement under treatment. November 21st 1916. - X Ray shows fracture of lower end of radius with lunate and navicular.

Officer in medical charge of case.

12. (*a*) Give your opinion as to the causation of the disability. G.S.W. Left forearm.

(*b*) If you consider it to have been caused by wounds received or illness contracted (1) in the presence of the enemy (2) on active service, explain the specific conditions to which you attribute it. *(See notes on page 3.)* (1.) Yes.

(2.) Fracture of lower end radius and injur to soft structures of left wrist.

Discharge
8-1-18
9.T.

13. What is his present condition?

Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.

Weight 128 lbs. Usual. General condition - Good. Heart and lungs - clear. Scars of entrance and exit of bullet healed. the hand is atrophied and perspires freely and Feels cold. There is very slight active movement in the left wrist joint and flexion in the matacarpo-phalangeal and inter phalangeal joints is quite limited resulting in no gripping power. Sensation to pin apparently normal.

14. If the disability is an injury, was it caused

(*a*) In the presence of the enemy? Yes.

(*b*) On active service? Yes.

(*c*) On duty? Yes.

(*d*) Off duty? No.

15. Was a Court of Inquiry held on the injury?

If so—(*a*) When?

(*b*) Where?

(*c*) Opinion? Not applicable.

16. Was an operation performed? If so, what? No.

17. If not, was an operation advised and declined? Not applicable.

18. *In case of loss or decay of teeth.* Is the loss of teeth the result of wounds, injury or disease, directly* attributable to active service? Not applicable.

19. Do you recommend

(*a*) Fit for duty? No.

(*b*) Fit for base duty? No.

(*c*) Invalided to Canada? YES.

(*d*) Discharge as permanently unfit? No.

E. E. Brown Lieut

Officer in medical charge of case.

I have satisfied myself of the general accuracy of this report, and concur therewith, ~~except~~†

Station Ramsgate

12 JAN 1917

Major, C.A.M.C.
For O.C. Granville Canadian Special Hospital, Ramsgate.
Officer in charge of Hospital.

Date

* Loss of teeth due to, or immediately after, active service should be attributed thereto, unless there is evidence that it is due to some other cause.

† Delete this word if no exceptions are to be made.

Opinion of the Medical Board.

NOTES—(i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as it is essential that the Members of the Pensions and Claims Board should be in possession of the most reliable information to **enable them to decide upon the man's claim to pension.**

(ii.) Expressions such as "may," "might," "probably," &c., should be avoided.

(iii.) The rates of pensions vary according to whether the disability is attributed to wounds or injuries received or illness contracted, (1) in the presence of the enemy, (2) on active service. It is therefore essential when assigning the cause of the disability to differentiate between them (*see* Articles 641 to 648 of the Canadian Pay and Allowance Regulations).

(iv.) In answering question 20 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.

	a1	a2
20. (*a*) State whether the disability is the result of injuries received or illness contracted, (1) in the presence of the enemy, (2) on active service.	Yes.	Yes
(*b*) If due to one of these causes, to what specific conditions do the Board attribute it?	GSW	
21. Has the disability been caused or aggravated by		
(*a*) Intemperance?	No	
(*b*) Misconduct?	No	
22. Is the disability permanent?	Yes	
23. If not permanent, what is its probable minimum duration?	Not applicable.	

To be stated in months.

24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present? total

In defining the extent of his inability to earn a livelihood, estimate it at $\frac{1}{4}$, $\frac{1}{2}$, $\frac{3}{4}$, *or total incapacity.*

25. If an operation was advised and declined, was the refusal unreasonable? Not applicable.

26. Do the Board recommend

(*a*) Fit for duty? No

(*b*) Fit for base duty? No

(*c*) Invalided to Canada? Yes

(*d*) Discharge as permanently unfit? No

27. Remarks.

APPROVED
H. D. Monson
CAPT. C.A.M.C.
for G.O.C. CANADIANS.

Signatures:—

Geo. F. Boyle Capt. President.

J. A. Nixon Capt.

Station Ramsgate

Date 13 JAN 1917

Members.

Approved.

Station SHORNCLIFFE—
(19, Westbourne Gardens, Folkestone.)

W. C. Arnold CAPT.
Administrative Medical Officer, SHORNCLIFFE.

Date 15 JAN 1917

R. C. MAY 3 1917

Sp264-5-5-17

(At Station or Hospital where finally disposed of.)

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

Date .....

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

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

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

Administrative Medical Officer.

DETAILED MEDICAL HISTORY OF INVALID.

Station

Corps

Regimental No. Rank

Name

Disability

Date

Hospital or Station transferred to for final disposal. }

Date of final disposal }

How finally disposed of }

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

Militia Form B. 227.
200m. 8-16.
H. Q. 1772-39-117.

MEDICAL HISTORY OF AN INVALID.

1. Station. Kingston,Ont.
2. Regiment or Corps. 39th.Reserve Batt'n.
3. Regimental No. and Rank. #412671 Private.
4. Name. Bagshawe,J.P.
5. Age last Birthday. 25 years.
6. Enlisted on January 15th.1915. at Lindsay,Ont.
7. Former trade or occupation. Ry.Fireman.

8. General remarks on his:—
   (a) Conduct.
   (b) Habits.
   (c) Temperance.

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

Date. April 26th.1917.

DEPT MILITIA & DEFENCE MAY -3 1917 CANADA

9. Service. Years. Days.

	PERIODS	
	From	To
39th.Reserve Batt'n.	Jan.15-15	Date.

10. (a) Disease or disability. Partial ankylosis of wrist.
    (b) Date of origin. Sept.15,1916.
    (c) Place of origin. At battle of Courcellette,France.
    (d) Cause. G.S.W.

11. Present condition. (Most Important.)
(To include full description of present disabling condition or conditions, and of the immediate and direct cause of incapacity, *i.e.*, debility, breathlessness on exertion, necessity of treatment by rest, etc.)

Man in good physical condition.Complains of weakness and limitation of ~~left hand~~. of movement of left hand. On examination there are scars of bullet wounds of left wrist. Hand is held in plane of fore-arm with 30 range of flexion, and 60 range of flexion of fingers.Grip 1/4 normal.

12. (a) Is the disability the result of service or climate? Service.
    (b) Has it been aggravated by intemperance, vice or misconduct? No.

4

M. F. B. 227.
200m. 8-16.
1772-39-117.

13. (a) For purpose of Identification. (Here a full description of wounds, scars, deformities, etc., is to be given.)

Scar on left wrist.

(b) In case of wounds, or other injuries, state whether sustained on or off duty. If not received in action was a Court of Inquiry held?

On duty in action. Man's statement "No Court of Inquiryheld.

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

Not applicable.

14. Treatment.

Hospital treatment for wound in England. Massage & Electricity in Conv.Home in Kingston at Richardson Home.

15. If the disabling condition had its origin before enlistment, has it been aggravated by service, and to what extent?

Not applicable.

16. What is the probable duration of the disability or of each disabling condition, if more than one contributes?

Should improve. Some permanent disability may remain.

17. To what extent will it prevent his earning a full livelihood in the general labour market? Please state in fractions. When more than one disabling condition is present, the extent of the disability due to each should be stated.

40% for three(3)months, then Boarded.

18. State if for discharge on account of unfitness for Service.

Not for discharge. W.H.Jones Capt.

Medical Officer by whom the case is brought forward.

OPINION OF THE MEDICAL BOARD.

Does the Board concur with the preceding report? If not, give differing opinion.

10. Yes.

11. Yes.

12. Yes.

15. Yes.

16. Yes.

17. Yes.

18. Is he unfit for Military Service. Yes.

Recommendations:

On account of the partial ankylosis of left wrist joint which X-ray plate shows in not bony, the Board recommends three months treatment with a view to overcome the stiffness of wrist joint.

Signatures:—

E.Kidd Lt-Col.A.M.C. President.

A.E.Ross Major A.M.C. Members.

W.H.Jones Capt.A.M.C.

Station. Kingston,Ont.

Date. April 28th.1917.

Date. April 28th.1917.

Approved.

Date.

Captain,A.M.C.
D/ A.D.M.S.
Asst. Director of Medical Services.
For A.D.M.S. Mil.District No.3.

Director-General of Medical Services.