

AB 9-1-19

8399

DISCHARGE DOCUMENTS

R. O. No.....
H. Q. No.....

Proceedings of Court of Inquiry or on men reported Missing on Active Service.....

Attestation Papers..... 213

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet.....

Compulsory Stoppages.....

Casualty Forms..... 2

Proceedings on discharge..... 2

Corps History Sheet.....

Date and No. of Deposit Receipt for Purchase Money and Amount.....

Disch
Parchment Certificate..... 1

Medical Report for Invalids..... 2

Medical History Sheet.....

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet..... 1

Clothing Transfer Certificate..... 1

Inventory of Kit.....

Last Pay Certificate..... 1

m. f. w. 192-1
a. f. B 122-1
I. S. C. no 5^c - 2

cascard 1
m. f. w. 67-1
P 149-1

Name BARNETT, MOSES

Regt. No. 883579 Rank Pte

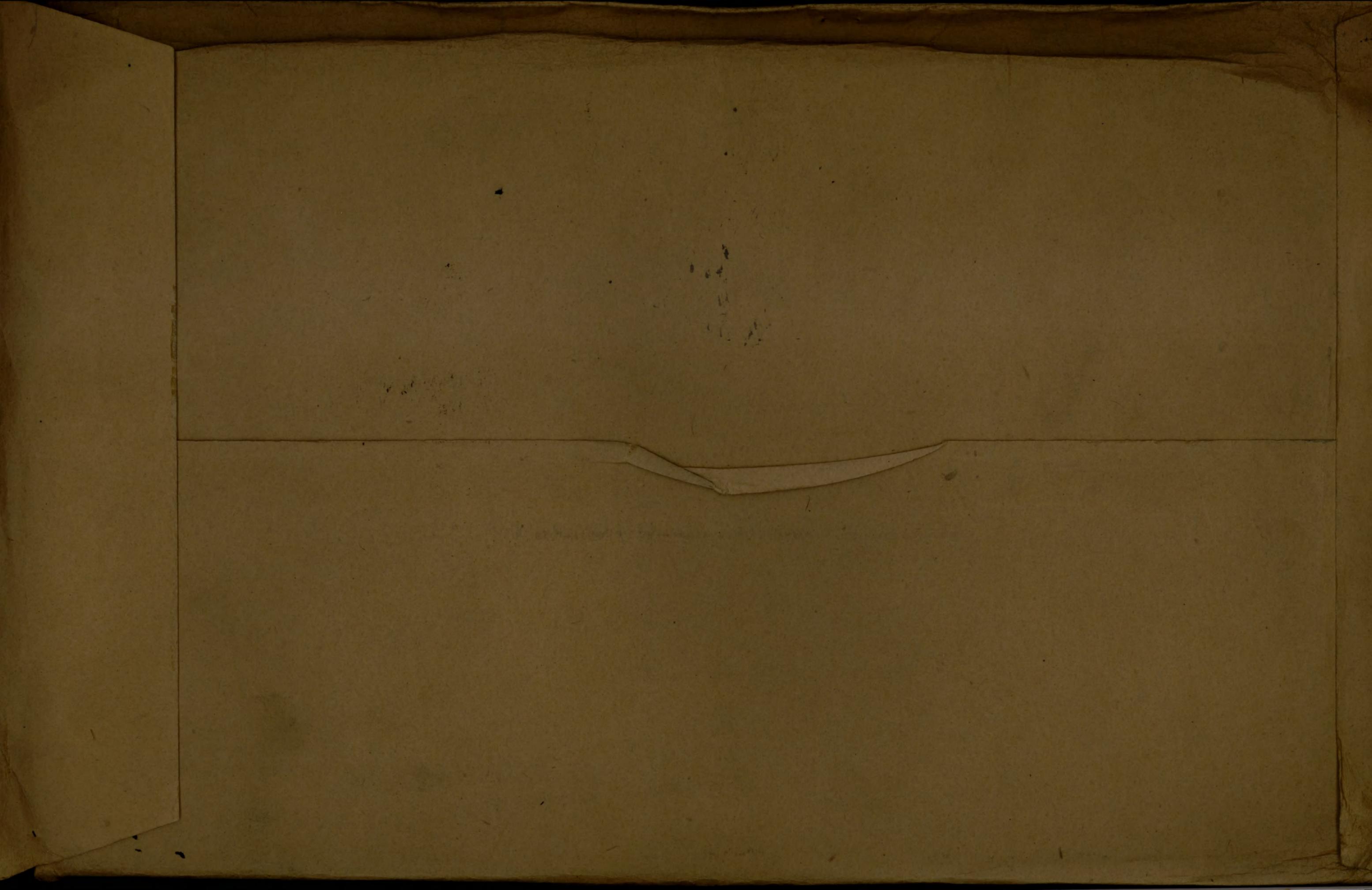
Corps 184th Bn

Med. certificate
H **W**
MH

*Proc. on Dis forwarded to
B.P.C. on m. f. w. 2505
Ref 643 of N-1-1928
W.C. Peth*

402326

2.30
21.30
33.31
2



ATTESTATION PAPER.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

- 1. What is your surname?..... Barnett
- 1a. What are your Christian names?..... Moses
- 1b. What is your present address?..... Islay, Alberta
- 2. In what Town, Township or Parish, and in what Country were you born?..... Islay, Alberta
- 3. What is the name of your next-of-kin?..... Billy Barnett
- 4. What is the address of your next-of-kin?..... Islay, Alberta
- 4a. What is the relationship of your next-of-kin?..... Brother
- 5. What is the date of your birth?..... 16th June, 1897
- 6. What is your Trade or Calling?..... Farmer
- 7. Are you married?..... No
- 8. Are you willing to be vaccinated or re-vaccinated and inoculated?..... Yes
- 9. Do you now belong to the Active Militia?..... No
- 10. Have you ever served in any Military Force?..... No
If so, state particulars of former Service.
- 11. Do you understand the nature and terms of your engagement?..... Yes
- 12. Are you willing to be attested to serve in the }
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? }..... Yes

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

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

Read over & explained ^{to} *Moses Barnett* (Signature of Recruit)
Date June 30th 191 6 *Dunlop* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, ~~Moses Barnett~~ ^{Moses Barnett} 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.

Moses Barnett (Signature of Recruit)
Date June 30th 191 6 *Dunlop* (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 Red Deer, Alberta this 30th day of June 191 6.
W. R. Onley (Signature of Justice)

Description of Moses Barnett on Enlistment.

Apparent Age.....19 years1 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

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).

Height 5 ft. 8 1/2 ins.

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

Complexion Swarthy

Eyes Brown

Hair Black

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

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..... 14 July 1916

Place..... Surrey Camp, Calgary

W. Curtis
 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.

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

..... W. Robinson (Signature of Officer)
G. C. 1870 O. BATTALION, C. E. F.

Date..... June 30th 1916.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 883579 (Rank) Sapper

Name (in full) Moses BARNETT enlisted in
the One Hundred & Eighty Seventh Overseas Battalion.

CANADIAN EXPEDITIONARY FORCE at Red Deer, Alta. on the Thirtieth
day of June 19 16

HE served in France with the 50th Battalion.

and is now discharged from the service by reason of Being Medically Unfit For Further
Service On Account Of Wounds Received In Action.

THE DESCRIPTION OF THIS SOLDIER on the DATE below is as follows:—

Age 21 Years 6 Months

Height 5 Feet 8½ Inches

Complexion Swarthy

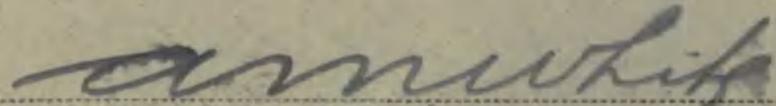
Eyes Brown

Hair Black

Marks or Scars

G.S.W. Left Ankle

Signature of Soldier



Issuing Officer

Officer i/c Discharge Section District Depot M. D. 13
Rank Capt.

Date of Discharge December 23rd, 1918.

Appointment

Signed at Calgary, Alberta. this Twenty Third day of December 1918

in Military District No. Thirteen.

File Reference No. 13-D-B-247

N.B.—As no duplicate of this Certificate will be issued, any person finding same is requested to forward it in an unstamped envelope to the Secretary, Militia Council, Ottawa, Canada.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

No. 883579 (Rank) Sapper Name Moses BARNETT

Unit 187th O. Bn.

Address on Discharge General Delivery Edmonton, Alberta

Character and Conduct **VERY GOOD**

Former Occupation Farmer

Special Qualifications of Value in Civil Life

Medals and Decorations

Remarks

Signed at Calgary, Alberta. this Twenty Third day of December 1918

W. Masmyth

Name of Officer

Lieut.-Col.
Commanding District Depot M. D. 13
Rank

Appointment

B 958

DEPARTMENT OF MILITIA AND DEFENCE.

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 *Maurice* 2. Surname **BARNETT**
3. Rank *Plt* 4. Original Unit *187th Bn* 5. Reg. No. *# 883579*
6. Address, in full, to which future payments of gratuity are to be forwarded
Hay Lakes PO
Alberta
7. Date of enlistment in the C.E.F. *30/6/16* Comd
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 *do*
10. Address, in full, of such dependent *do*
11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? *No*
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:
Yes - with 50 Bn in France from 26/6/17 - 26/10/17
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? *Not applicable*
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*
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
2 years 6 mos
With 187th Bn from 30/6/16 - 16/11/16
With 191st Bn from 16/11/16 - 21/3/17
With 21st Res Bn from 21/3/17 - 26/6/17
With 50 Bn from 26/6/17 - 26/10/17
With 2nd C.E.C. until returned to Canada
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*

S/1786
67

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. *No*
20. Have you been issued with a War Service Badge? If so, what class? *No*
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?
24. Are you now serving in the C.E.F.? *No* If not, give:—(a) Date of discharge *23/12/18*
 (b) Reason for discharge *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. *Yes*
with 50th Bn from 2/7/17 — 26/10/17
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?

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: *W. Barnett*
 Place of Residence: *Hay Lake P.O. Alberta*
 Declared before me at: *Edmonton*
 This ~~fourteenth~~ *28th* day of ~~Feb~~ *March* 19*19*
 Signature of Barrister of the Supreme Court Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner for the Administration of Oaths. *W. J. Gaudin Capt.*

| POST DISCHARGE PAY. | | |
|---------------------|--------------|----------------|
| Date paid. | Paid Soldier | Paid Dependent |
| <i>Nil</i> | | |

Certified Correct.
R.B.F.
G. Edwards
 District Paymaster.

War Service Gratuity *350⁰⁰*
 Net amount due *350⁰⁰*
 GENERAL AUDITOR'S DEPT.
 AUDITED
 MAY 15 1919
 DISTRICT AUDITOR

LOCAL CARD

Name **BARNETT Moses** Rank **Pte.** Regtl. No. **883579**

Fyle Depot **I.D. B-247**

Original unit **187th** Present unit **50th** ~~AK~~ or S. Age **22** Religion **R.C.** Ref. H.Q.

Port, ship and date of arrival **Halifax, "Neuralia, 10-11-18"**

Next of kin **Billie Barnett, Brother, - Islay, Alta.**

Address on leave **Gen. Delivery, Edmonton**

Address on discharge **Gen Delivery, Edmonton Alta.**

Transportation issued Yes No Date Character on discharge

Previous occupation **Farmer** Date and place of enlistment **30-6-16. Stettler**

Diagnosis **Painful scar left ankle, with** Date of Medical Boards **5-12-18.**

| Date. | Remarks. | Pt. 2 Order No. |
|-----------------|--|-----------------|
| T.O.S. | | |
| 30-10-18 | Posted to Hosp. Sec. Edmonton, 15-11-18 | 216 |
| | Granted leave and subsistence to 30-11-18 | 216 |
| 2-12-18 | Transferred to Cas. Co. Edmonton | 228 |

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

Date.

Remarks

Pt. 2 Order No.

23-12-18.

Discharged from H.M. Service

250.

SURNAME

CHRISTIAN NAME OR NAMES

REG. NO.

BARNETT

M.

883579

RANK

UNIT

Co.

TROOP

BATTY.

Pte,

50th dn. (Alba. Reg.) Drp.

HOSPITAL

DATE OF ADMISSION

10 C.F. Amb.

15-9-17.

1. 11 Cav. Field Amb. HOSP. 27.10.17

2. No. 22 Gen. Dannesbarnier. HOSP. 29.10.17

Edgbaston Section 10.11.17.

3. HOSP.

4. Med Conv. Hosp. WSPK Epsom HOSP. 4-12-17

SW -t. Thigh. R.

DIAGNOSIS

1.

S.W. L. fracture

2.

~~W.D. Q.~~

3.

J. E. T. Left Leg at.
Ulcers legs at

DISPOSITION

Cl. 1-9-17 A308-2.

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

DATE

REMARKS

3.10.17. A.26.11
7.11.17 A56 (B)
9-11-17 @ 57 (A)
16.11.17. B64. (D)
7-12-17 B82-2
19.3.18 B166-2
16.4.18 B.188
22.4.18 B193 (A)
3.6.18 L226
23.10.18 C341
4.11.18 C351.

Disce. to Duty. 27.9.17.
Relic. 19.4.18.

Adm whilst on leave from
Woodcote PR Epsom.
Note correct alias of B166.

Inval. to Canada 30.10.17

7

EPITOME OF HOSPITAL TREATMENT

HOSPITAL

ADM.

1. King George Stamford St S.C.

12 bl. Beshott

17.3.18

30.5.18

2. 5 bl. L'pool

19.10.18

3.

4.

5.

6.

7.

Report No. _____

Army Form W. 3212.

(In books of 100.)

Regtl. No., }
Rank and Name } 883579. Barnett M. Age _____ Corps 2nd Bld

Disease Ulcers legs Hospital 12. Can Gen

To Officer i/c Laboratory. Ward XI

Please carry out an examination of the accompanying specimen of Urine
with special regard to Microscopic

Nos. of previous Reports (if any) _____

In Pathological Reports a résumé of clinical history, treatment or progress since last report should be given.

Date 26 - 7 - 18 Dan J. Wickes Capt
O. i/c h/s. Ward.

Bed 12

LABORATORY REPORT.

Acid neg Sph. neg
Alb neg neg

Microscopic Occasional Par. cell + Epith Cell

Date of Examination. 27/7/18 35 A. Montgomery Capt
O. i/c Laboratory.

Name of patient: John Doe
 Address: 123 Main Street
 City: Anytown
 State: CA
 Date: 10/15/50
 Hospital: St. Mary's
 Physician: J. Smith
 Referring Physician: J. Smith
 Nature of illness: Chronic
 History: Chronic
 Present symptoms: Chronic
 Treatment: Chronic
 Results of previous tests: Chronic
 Date of last report: Chronic

LABORATORY REPORT

Casualty Form—Active Service.

Regiment or Corps 187th Bn C.E.F.
 Rank Pte Surname Barnett Christian Name Moses
 Religion _____ Age on Enlistment _____ years _____ months
 Enlisted (a) 30/6/16 Terms of Service (a) P.O.W. Service reckons from (a) 30/6/16
 Date of promotion to present rank _____ Date of appointment to lance rank _____
 Extended { _____ } Re-engaged { _____ } Qualification (b) _____
 or Corps Trade and Rate _____
 Signature of Officer. _____

| Report | | Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case. | Place of Casualty | Date of Casualty | Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents |
|----------------|--|---|--|------------------|---|
| Date | From whom received | | | | |
| | | | Embarked ... <u>Halifax Can</u> | <u>28-3-17</u> | <u>"Saxonia"</u> |
| | | | Disembarked... <u>Sveepool Eng.</u> | <u>7-4-17</u> | |
| | | <u>Transferred to 211th Bn C.E.F. from 26-11-16.</u> | | | |
| <u>21-4-17</u> | | | <u>21st. Res. Bn. T.O.S. or arrival from Canada Bramshott, 7-4-17 Pt. II D.O. 101.</u> | | |
| | | PROCEEDED OVERSEAS FOR SERVICE WITH <u>50th</u> BATTALION. | BRAMSHOTT. | | Pt. II D.O. No. <u>726</u> <u>W. H. Atkinson</u> Capt. & Adjutant 21st Reserve Battalion |
| <u>27.6.17</u> | <u>#4 CZ 32</u> | <u>Arrived TOS 50th Bn</u> | <u>Charles</u> | <u>26.6.17</u> | <u>Pt. II D.O. 104 d/14/17</u> |
| <u>1.7.17</u> | <u>"</u> | <u>Left to 4th Cont Bn</u> | <u>Field</u> | <u>1.7.17</u> | <u>NR</u> |
| <u>7.7.17</u> | <u>4th 50th Bn</u> | <u>Joined unit</u> | <u>do</u> | <u>4.7.17</u> | <u>B213 Dec 1917</u> |
| <u>27-8-17</u> | <u>do</u> | <u>Wounded</u> | <u>do</u> | <u>27-8-17</u> | <u>K 916 (19735) D.O. 20</u> |

VERTICAL FILE
 10 JUL 17
 SAN RICHARDS, 10 004

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

[P.T.O.]

Casualty Form - Active Service.

Regiment or Corps... 187^a - Bn C.E.F.
 Rank... Pte Surname... Barnett Christian Name... Moses
 Religion... Roman Catholic Age on Enlistment... 19 years... 1 months
 Enlisted (a)... 30/6/16 Terms of Service (a)... 5 years Service reckons from (a)... 30/6/16
 Date of promotion to present rank... Date of appointment to lance rank...
 Extended { } Re-engaged { } Qualification (b)...
 or Corps Trade and Rate...
 Occupation... Signature of Officer

| Report | | Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A.36, or in other official documents. The authority to be quoted in each case. | Place of Casualty | Date of Casualty | Remarks Taken from Army Form B.213, Army Form A.36, or other official documents |
|----------|--------------------|---|-------------------|------------------|--|
| Date | From whom received | | | | |
| | | Embarked ... | | | |
| | | Disembarked... | | | |
| 9-4-18 | O.C. A.D.D. | Admitted to Hospital | BRAMSHOTT | 16-3-18 | PART II D.O. 99 |
| | | | | | LT. O.I./e RECORDS ALBERTA REGIMENTAL DEPOT |
| 30-10-18 | | TAKEN ON STRENGTH OF DISTRICT DEPOT 13, PART 2 ORDER NO. 216. 7 Posted to Hosp. Sec. | | | |
| | | Edward S. Brett Lt. for | | | Lieut. Col. Officer Commanding District Depot No. 13 |
| 23-12-18 | | DISCHARGED FROM THE SERVICE BY DISTRICT DEPOT NO. 13, PART 2 ORDER NO. 250 | | | |
| | | AUTHORITY Routine Order #237 Dated Ottawa 22-2-18 | | | Lieut. Col. Officer Commanding District Depot No. 13 |

(a) In the case of a man who has re-engaged for, or enlisted in Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
 (b) Signaller, Shoeing-Smith, &c (17591.) Wt. W 1887-P 1124. 1,000,000. 6/18. D & S. Form B/103. (E. 1256.)

MEDICAL CASE SHEET.*

C 4

No. in
Admission
and
Discharge
Book.

Regimental No.

Rank.

Surname

Christian Name.

883579

Pvt

Barnett

H.

C 751

Year

Unit.

Barnett

Age.

Moses

Service.

1917

50th Canadians

20

1 1/2

Station
and Date.

Disease

Wound

Phan

wounded 26/10/17 at Phan

10-11-17

miss of paraly left leg

Wound

13-11-17

La. aux a

Can 1st

~~10/17~~

Wound notify when put
band on bladder

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

Station
and Date.

CLINICAL CHART.

(To be attached to Case Sheet.)

Army Form B. 181.

Corps _____

Military Hospital _____

No. _____ Rank and Name _____

Age _____ Service _____

Disease _____ Date of admission _____ Date of discharge _____ Result _____

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

Signature _____ In charge of case.

MEDICAL CASE SHEET.*

5th CAN GEN M¹
LIVERPOOL

| No. in Admission and Discharge Book. | Regimental No. | Rank. | Surname. | Christian Name. |
|--------------------------------------|---|-------|------------|------------------|
| 4111 | 883579 | Pte | Barnett | M |
| Year 1918 | Unit 2 nd (L) 50 th Batt | | Age 22. | Service 23/12 |
| Station and Date. | Disease | | | |
| Bramshott 24-5-1918 | Mucous Legs. Complaint, sores on both legs. duration 2 weeks. | | | |
| | Family history - neg. | | | |
| | Past History, farmer, never had any serious illness. Wounded by leg in France, Dec 1917. | | | |
| | Present illness, two weeks ago small sore started calf left leg. later a sore developed on scapula old wound, later sores appeared on R. leg. | | | |
| | Present touch, Res, Pulse and Temp normal, General exam neg. except for varicose veins left leg which he says he has had for 6 months, indolent looking ulcer on left leg. 7 or 8 impetiginous looking sores on R. leg. | | | |
| 4/6/18 | XRay report, shows no necrosis or foreign body | | | |
| 11/6/18 | Improving slowly. | | | |
| 20/6/18 | showing rapid improvement. | | | |
| 30/6/18 | showing some improvement | | | |
| 15/7/18 | very little improvement. | | | |

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

Station
and Date.

30/7/18 Operated on prostate

18-10-18 Trans to Kirkdale

W. H. Taylor
Esq

Present Condition

No. 56
New
Hospital

Complaints :- Pains in left leg - worse at night. There are a number of healed scars left leg - Veins varicosed slightly - all movements of ankle + knee normal. In good health. Heart + lungs normal.

PLEASE ADDRESS LETTERS

DIET AND EXTRA SHEET FOR PATIENTS IN HOSPITAL, AND
 EXTRA SHEET FOR DINING HALLS, AND KITCHEN SUNDRIES.

1ST, SOUTHERN GENERAL HOSPITAL
 EDGBASTON
 Hospital, at
 BIRMINGHAM.

Period from 1-12-17 to 2-12-17

| Regtl. No. | RANK AND NAME (Surname first) | Corps | Squadron, Troop, Company, or Battery | Age | Service | DISEASE |
|------------|----------------------------------|-------------------------------|--|-----|---------|-------------|
| 882579 | Plt Barnett | 50 th Canadians | | 20 | 11/2 | Wd l leg |

| | | | | |
|-------------------|---|------------------------------------|-------------------------------------|-----------------------------------|
| Ward Number 24 | Number in Admission and Discharge Book 6751 | Admitted into hospital 10-11-17 | Discharged from hospital 2-12-17 | Religious denomination R.C. |
|-------------------|---|------------------------------------|-------------------------------------|-----------------------------------|

| If allowed up during certain hours, if fit for light hospital duty, or able to take meals in the Dining Hall, state so | Date | Name of diet first time in full, afterwards abbreviated For Dining Hall, state number of patients | EXTRAS OR KITCHEN SUNDRIES (Quantities in Words) | | | | Initials of Medical Officer (first time name in full). All spaces in which no entries have been made must be severally obliterated by the Medical Officer thus _____ before he signs his name or initials. |
|---|-------------|--|---|--------|--------|-----|--|
| | | | GRAVY | BUTTER | APPLES | JAM | |
| Bed | 11-17 bed | | | | | | H. Wilson |
| | 2-12-17 bed | | | | | | C. Larson |

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

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

Regimental No .. 883579 Rank..... Pte Name BARNETT M.

rps 187th who was* discharged

On 23.12.1918, to
 *Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1.12.1918
 to 23.12.1918 the inclusive date of transfer or discharge.

| Dr. | \$ | c. | Cr. | \$ | c. |
|--|-----------|-----------|--|-----------|-----------|
| Bal. Dr. from prev. month | | | Balance Cr. from prev. month | | 35 |
| Advances by Cheques } No. | | | Regt'l. Pay 23 days at \$.... 1c... 00 | 23 | 00 |
| } No. A. 2632 | 35 | 00 | Field Allow. 23 days at \$.... c... 10 | | 30 |
| Assigned Pay and Sep'n Allee. No. | | | Separation Allowances* (Monthly) | | |
| Other charges <i>Dr AP Dec pd by Ottawa</i> | 15 | 00 | Other Allowances* .. Clothing | | 35 |
| Payment on transfer or discharge No. A. | 10 | 65 | Other Credits* | | |
| Balance Cr. (to be paid by the new unit) <i>2636</i> | | | Bal. Dr. (to be deducted by new unit) | | |
| Total | 60 | 65 | Total | 60 | 65 |

*Give particulars.

A monthly stoppage of \$..... 15.00 (†) has (‡) been paid on ~~the~~ ^{charged} account of Assigned
 Pay for the month of *December 1918*
 and Sep'n Allee. for month of *Nov 1 1918* (to) Assignee *Mrs. Simon*
 (Address) *Elbow Saskatchewan*

(†) 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.

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

REMARKS:—

Ottawa advised date of discharge

- State (1) date of enlistment
- (2) if married and if a Separation Allowance Card has been submitted *No.*
- (3) cause of discharge *M.U.* authority *S.M.B.*
- (4) authority for transfer

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

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

Date *18.12.18*

Place *CALGARY*

[Signature]
 Officer i/c Pay Duties D.D. 13
 Paymaster. Lieut

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

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

If a man on discharge is entitled to three months' Post Discharge Pay, Last Pay certificate will be made out in quadruplicate. The original Last Pay Certificate will be forwarded with other documents to Paymaster Post Discharge Pay and triplicate, with his discharge documents.

BT

M. F. W. 44.

So. S. M. D. 13

Billy Barnett (brother)

Delays, Alberta

FORM OF WILL.

14/2/13

I, Ernest Barnett (Name in full)

Regimental Number 883579 serving in 191st O.B. C.I.C.

of the Canadian Expeditionary Force, do hereby revoke all former Wills by me made and declare this to be my last Will.

I bequeath all my real estate unto

My brother Billy Simon
Delays P.O.
Alberta Canada

Name and Address of person or persons to whom it is to go.

absolutely, and my personal estate I bequeath to

My brother Billy Simon
Delays P.O.
Alberta Canada

Name and Address of person or persons to receive personal estate* (See note).

IMPORTANT NOTE
This must be Signed and Dated by THE SOLDIER HIMSELF.

this 15th day of February A. D. 1913

Ernest Barnett Signature of Soldier.

*N.B.—Personal estate includes pay, effects, money in bank, insurance policy, in fact everything except real estate.

Signed and acknowledged by the Testator as and for his last Will in the presence of us both present at the same time, who in his presence, at his request, and in the presence of each other have hereunto subscribed our names as Witnesses.

THE TWO WITNESSES MUST SIGN HERE

Signature of First Witness J. R. Beer

Address of Witness 191st Batt.

Occupation of Witness 191st Soldier

Signature of Second Witness J. Wilson

Address of Witness 191st Bu C.I.C.

Occupation of Witness Soldier

FORM OF WITNESSES

IN SENATE
OF THE STATE OF CALIFORNIA
I, the undersigned, do hereby certify that the following is a true and correct copy of the original of the within and foregoing instrument, as the same appears from the records of the office of the Secretary of State.

Name of witness
Address of witness
City and county

Name of witness
Address of witness
City and county

IMPORTANT
NOTE
This form is to be used
in all cases where
the original of the
instrument is
deposited in the
office of the Secretary of State.

IN WITNESS WHEREOF, I have hereunto set my hand and the seal of the office of the Secretary of State at the City of Sacramento, California, this _____ day of _____, 19____.

Secretary of State
Name of witness
Address of witness
City and county
Name of witness
Address of witness
City and county
Name of witness
Address of witness
City and county
Occupation of witness

12th Cav. General Hospital.

Ward XI

No. of Bed 12

Date June 5th 18

| Reg. No. | Rank and Name. | Corps. | Part to be X-Rayed. |
|----------|----------------|-------------------------|---------------------|
| 883079 | Barnett | 9 th Cav. D. | leg. |

SHORT HISTORY OF CASE.

(To be completed by M.O. i/c case.)

indolent ulcer.
scar of old wound.
possibility of
foreign body

REPORT ON RESULT OF X-RAY EXAMINATION.

(To be completed by Radiographer.)

No. of Plate 3218

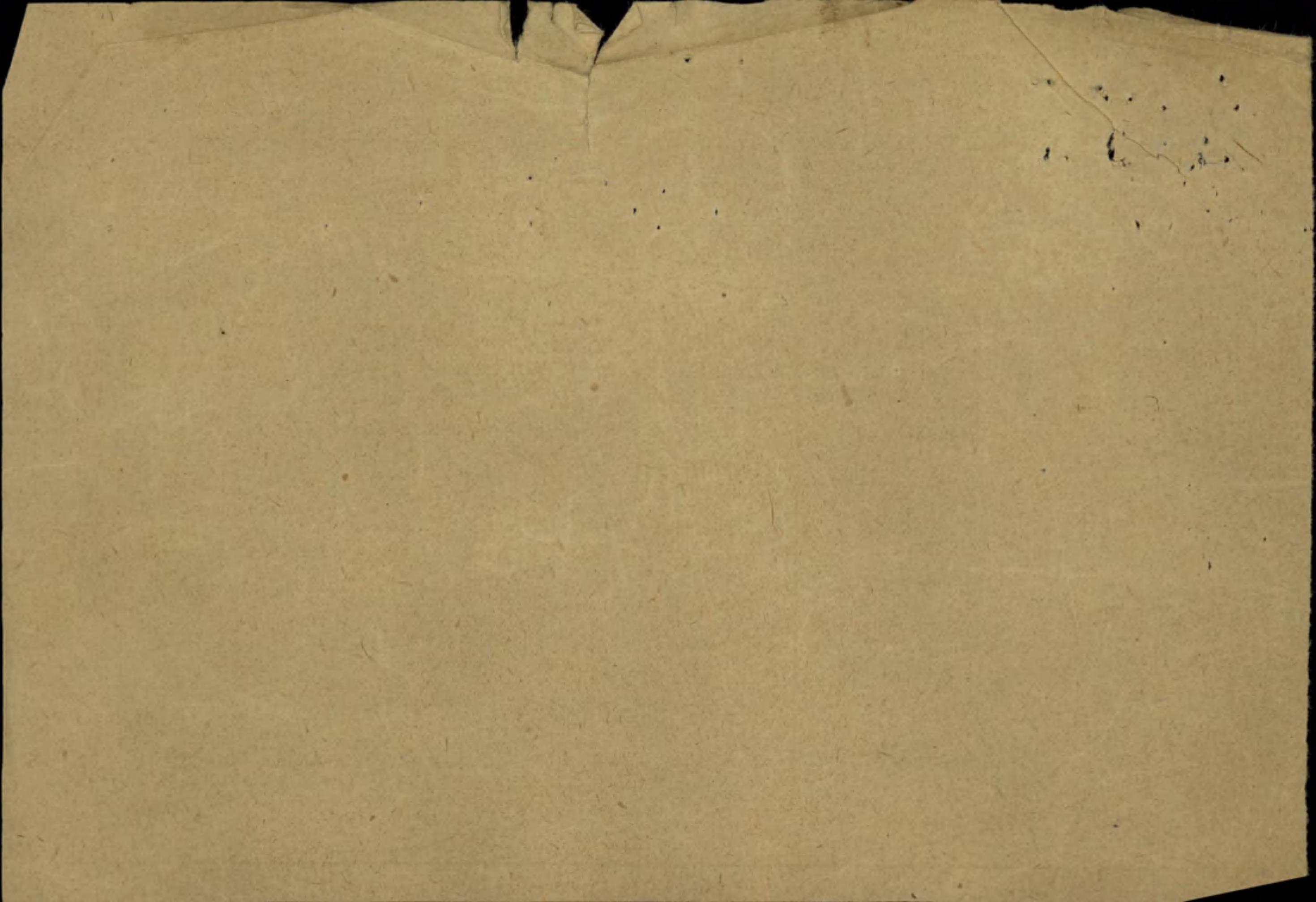
negative to some
lesion or IFTB

Signature of M.O. K. H. W. [Signature]

Date 5/6/18

Signature of Radiographer [Signature]

Date 6-6-18



PARTICULARS OF CASE FOR WHICH WASSERMANN TEST IS REQUIRED.

The particulars below are required for statistical purposes and future reference. Unless these are furnished the test will not be carried out.

Name Barnett Reg. No. 883579 Rank Pte Unit. 21st Reserve

Date of first sore _____ If T. pallidum Found _____

Secondaries if any _____

Other symptoms _____

Treatment if any _____

Arsenical.

Mercury.

Last infection of Arsenical Compound, dated,

No 12 Can. Gen. Hospital. Ward XI Date 8/7/18 Sig. Wm. Linton Capt.



RESULT OF WASSERMANN TEST.

Army School of Sanitation.

Date _____ Serial No- _____

WASSERMANN
NEGATIVE

.....
Capt. R.A.M.C.

Ward 11

[Handwritten Signature]
C.C. LABORATORY.

Barnwell

1878

30

XI

2/1/78

[Faint handwritten text]

[Faint handwritten text]

To be made out in duplicate.

H.Q. 54-21-23-53

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

INSTRUCTIONS.

- (a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.
- (b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.
- (c) All questions, etc., must be answered.
- (d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.
- (e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

(1) Name of Overseas Unit which Soldier joins 191st O. Bn., C. E. F.

(2) Regimental Number ~~885~~ 883579

(3) Full Name of Soldier Barnett Moses

(4) Place of Birth Calgary Alberta

(5) Are you married, or not? No

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

(b) Present Postal Address.....

(7) Are you a widower?

(8) Have you any children?

If so, give number of boys and girls.....

Also their names and ages.....

(9) Is your Father alive?..... No

If so, state name and address

(10) Is your Mother alive?..... Yes

If so, state name and address..... Missy

..... Alberta,

(11) If your Mother is a widow..... Yes

Are you her sole support, or not?..... Yes

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

..... No set allowance made but supported mother

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

.....
.....
.....

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

..... Receiving separation allowance

(15) Are you insured?.....

If so, in what Company?.....

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

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

Date Feb. 15/17

H. P. Gray, Capt.
Officer Commanding.

882579

MEDICAL HISTORY SHEET.

Surname Barnett Christian Name Moses

Examined { on 14th day of July 1916
at Saree Camp, Calgary
Birthplace { City or Town Calgary
County Alta, Canada

Approved by W. Curtis 13
Rank Capt. M.O.

Apparent age 19 years
Trade or occupation Farmer
Height 5 Feet 8 1/2 Inches.
Weight 160 Lbs.
Chest measurement { Minimum 38 inches.
Maximum expansion 3 inches.
Physical development Good
Small-Pox Marks None

| Date. | Fit or Unfit. | EXAMINED FOR RE-ENGAGEMENT. |
|---------------|---------------|--------------------------------|
| <u>6.3.16</u> | <u>O.</u> | <u>W. Curtis</u> NOV 1917 M.O. |
| | | M.O. |
| | | M.O. |
| | | M.O. |
| | | M.O. |
| | | M.O. |
| | | M.O. |

Vaccination Marks { Arm Right Left.
Number 0 0

| Date. | Result. | VACCINATIONS. |
|-----------------|---------|-----------------------|
| <u>10/11/16</u> | | <u>W. Curtis</u> M.O. |
| <u>10.1.17</u> | | <u>H. Groyl.</u> M.O. |
| | | M.O. |

When Vaccinated last None
(a) Marks indicating congenital peculiarities or previous disease None

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

| Date. | Result. | ANTI-TYPHOID INOCULATIONS, ETC. |
|-----------------|-------------|---------------------------------|
| <u>5/10/16</u> | <u>Good</u> | <u>W. Curtis</u> M.O. |
| <u>14/10/16</u> | <u>Good</u> | <u>W. Curtis</u> M.O. |
| <u>7/11/16</u> | <u>Good</u> | <u>W. Curtis</u> M.O. |
| <u>14/11/16</u> | <u>Good</u> | <u>W. Curtis</u> M.O. |
| <u>21/11/16</u> | <u>Good</u> | <u>W. Curtis</u> M.O. |
| <u>14/1/17</u> | <u>Good</u> | <u>E. Hamis</u> M.O. |

Enlisted on 30 day of June 1916 at Stettler, Alberta

| | CORPS. | REG'TL NUMBER. | HABITS. | DATE. |
|----------------------|---------------------------------------|----------------|---------|-----------------------|
| Joined on enlistment | <u>184th O.B.</u> | <u>883579</u> | | <u>30th June 1916</u> |
| Transferred to | <u>191st O.B.</u> | | | <u>9/12/16</u> |
| | <u>21st RES. BN.</u> | | | <u>7 APR '17</u> |
| | <u>50th Bⁿ.</u> | | | <u>25 JUN '17</u> |

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

| STATION. | DATE. | DISEASE. | RESULT. |
|------------------|----------------|---|---------------------------------|
| <u>Bransholt</u> | <u>7/10/18</u> | <u>Painful feet</u> <u>chronic</u> | <u>Unfit to</u> <u>serve</u> |
| <u>Edmonton</u> | <u>2-12-18</u> | <u>G. S. W. left ankle.</u> <u>Varicose veins E.</u> | <u>Discharged</u> |

PRESIDENT
MEDICAL BOARD, BRANSHOLT.

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

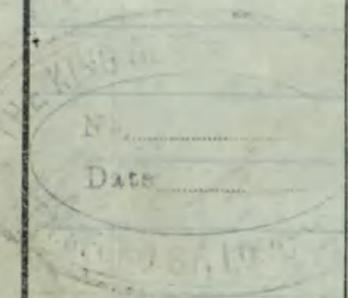
CANADIAN

187th O.B. 30-4-18
191st O.B. 30-4-18
21st RES. BN. 7-4-17

Christian Name

Surname

| STATION. | Date of Arrival at the Station. | DATES OF | | | | | | DISEASE. | Number of days in Hospital. | Remarks on nature of the disease: how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations. | Signature of Medical Officer. |
|----------------|---------------------------------|--------------------------|-------|------|--------------------------|-------|----------|----------------------------|-----------------------------|--|--|
| | | Admission into Hospital. | | | Discharge from Hospital. | | | | | | |
| | | Day | Month | Year | Day | Month | Year | | | | |
| No. 10. C.F.A. | | 25 | 8 | 17 | 27 | 9 | 17 | S.W. Lt. Thigh | | Discharged to Duty, | A308-A26 ED. |
| | | 10 | 11 | 17 | 3 | 12 | 17 | Flank wound Lip | 24 | shrapnel | <i>H. H. White</i> CAPT. R.A.M.C. (A) FOR ADMINISTRATOR 1ST S.G.H.P. |
| | <i>W. H. Eason</i> | 3 | 12 | 17 | 1 | 1 | MAR 1918 | D. | 99 | oa. Wound open. Daily Dressing until healed. Then massage and P.T. here. Now fit for D. | <i>G. Keay</i> Capt. R.A.M.C. |
| | | 16 | 3 | 18 | 19 | 4 | 18 | S.W. Leg | 35 | On admission. Small superficial ulcer about 1/2" square on outer surf. of L. leg by lower 1/3. | <i>G. Hoffmann</i> M.Lt. R.A.M.C. |
| | | 29 | 5 | 18 | 18 | 10 | 18 | S.W. Leg Chronic ulcers | 143 | April 16/18 ulcer healed. Discharged fit to Return Recd Fur Old S.W. scar which breaks down occasionally, newly below scar increases from painful after walking Old scars which ulcerated & throbs on the skin | <i>W. J. ...</i> |



18/10/18 Transferred (Kirkdale)

increases from painful after walking
Old scars which ulcerated & throbs on the skin

JM

Rank *all* Name **BARNETT, Moses.** Reg'l No. **883579**
 Unit **Dft. 19th Bn.** If in perm. Corps, }
 What Unit? } Married or Single **Single.**
 Place and Date of Enlistment **Red Deer Alta. 30th June 1916.** Place of Birth **Islay, Alberta.**
 Name and Address, Next-of-Kin **Billy Barnett.**
Islay, Alberta. Relationship **Brother.**

Assigned Pay Monthly \$ Payable to Relationship

Separation Allowance \$ Payable to Relationship

Discharge, Date and Place Reason

N/E. R.B. No. **7999**
 File R.L.
 Character *M. U. 600*

H. W. V., Ltd.—9546-16.

| Report. | | Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case. | Place. | Date. | REMARKS Taken from Official Documents. |
|-----------------|---------------------------------|--|----------------------|-----------------|--|
| Date. | From whom received. | | | | |
| <i>C.</i> | | <i>Arrived in England</i> | <i>S. S. Saxonid</i> | <i>7-4-17</i> | |
| <i>21-4-17</i> | <i>21st Res</i> | <i>T.O.S. from Canada</i> | <i>Bishop</i> | <i>7-4-17</i> | <i>Pte 50 101</i> |
| <i>26-6-17</i> | <i>—</i> | <i>A.O.S. to 50th Bn</i> | <i>—</i> | <i>25-6-17</i> | <i>167 50th No 104. 47/17.</i> |
| <i>1-9-17</i> | <i>50th Bn</i> | <i>No. 10 Can. Fld. Amb.</i> | <i>Field</i> | <i>25-8-17</i> | <i>6th 308. SW L High.</i> |
| <i>2-10-17</i> | <i>Alta Regt</i> | <i>Disch to duty</i> | <i>Pte</i> | <i>27-9-17</i> | <i>u 26</i> |
| <i>6-11-17</i> | <i>AR. (30)</i> | <i>No 11 Can Field Amb.</i> | <i>✓</i> | <i>27-10-17</i> | <i>6 L A 56 SW L Foot</i> |
| <i>8-11-17</i> | <i>✓ (✓)</i> | <i>No 22 Gen Hoep.</i> | <i>✓</i> | <i>29-10-17</i> | <i>... 58</i> |
| <i>15-11-17</i> | <i>✓ (✓)</i> | <i>1st South Gen Hos, Edgbaston</i> | <i>Birmingham</i> | <i>10-11-17</i> | <i>... 64</i> |
| <i>17-11-17</i> | <i>50th Bn</i> | <i>Empl. W. 9 SOS to ARD</i> | <i>Pte Field</i> | <i>9-11-17</i> | <i>Pte 0148 / 1st 0255 9/19-11-17</i> |
| <i>6-12-17</i> | <i>AR. (50th Bn)</i> | <i>Mil Convl Hos Wcote</i> | <i>Epsom</i> | <i>4-12-17</i> | <i>CL 281 SW L Foot</i> |

Albion

Ob. of ARD.

| 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. | | | | |
| 14.3.18 | AKW | On end 2 nd CCD | Pte Bram | 14.3.18 | R.I. 074 963 2 nd CCD 2/15/18 |
| 8.4.18 | 2 nd CCD | Ceases attch 2 nd CCD (on adm letter.) | " | 16.3.18 | " 83 999 A.R.D 19/4/18 |
| 22.4.18 | " | Attch from the former Hqs. London | " | 20.4.18 | " 95 } |
| 23.4.18 | A.R.D. | In Com. to 2 nd CCD | " | 20.4.18 | " 112 } |
| 19.6.18 | " | Ceases on Com to 2 nd CCD | " | 29.5.18 | " 163 9 143 2 nd CCD 2/14/18 |
| 4.11.18 | A.P. (rept) | Inv. to Canada ex No 5 C. G. Hqs. Liverpool | " | 30.10.18 | C.L. C 351. + ARD DO 284 2/7/18 |

Regtl. No. Rank and Name *883579 Plt Barnett* Corps *2nd CCW*

Disease *Mumps, leg* Hospital *12th Cav. General*

To Officer i/c Laboratory. Ward *XI*

Please carry out an examination of the accompanying specimen of *Urine*

with special regard to.....

Date *May 30th 18*

Capt. McPherson
O. i/c *C. Ferguson n.s.* Ward

LABORATORY REPORT.

Bed 120

Reaction - *Acid*
Albumen - *neg*

Sp Gr - 1.025 -
Sugar - neg

Date of Examination *30-5-18*

R.H. Martin

Office of the
District

Office of the Laboratory

with special regard to

the

LABORATORY REPORT

Date of Examination
5-4-18

Office of the Laboratory

SPECIALISTS' REPORT.

Ward No. VI

To:- Officer i/c.....*Surgical*.....Department.
No. 12 Can. Gen. Hospital.

Kindly Examine.....*Pte Barnes 883579*.....

With Special Regard to.....*Left leg*.....

Date.....*24/8/18*.....1918.

Gen. Quinlan Coy
.....O. i/c Ward.

REPORT.

.....advise application of
.....R. ung. Hydroarg. ammon. chlor.
.....Vaseline.....aa 3p
.....Apply daily

J. G. Johnson

.....
Officer i/c Department.

1840

Received of the
Hon. Secy of the Navy
the sum of \$1000
for the purchase of
the ship "Albatross"

11

1840

Elbow,
Sask
23/5/17
C. S. J.

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

M. F. W. 12
50m.—7-16
H. Q. 1772-39-819

To Whom *Mrs. Simon,*
Address *Islay,*
Alberta.

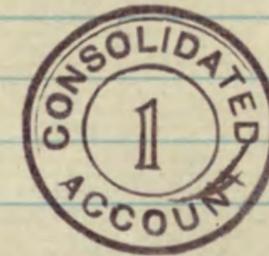
By Whom Assigned *Barnett. M.*
Regtl. No. *883579.*
Rank *Pte.*
Corps *191st Btn*

Rate *\$15.⁰⁰*

APR 1 1917

PAYMENTS

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





114

114

114

114

1

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.



Name **Barnett, Maurice**
Surname Christian Name

Regimental Number **883579** Rank **Pte.** Address (in full) **P.O. Hay Lake, Alberta.**

Unit **187th Bn.**

Original Unit

District where paid **M.D. 13.**

Date of Discharge **23-12-18.**

P. D. P. Filing Number

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

L. L. 46038—M. & D. 9243

| 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 | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |

M. F. W. 127.
25M.—8-18.
1772-39-1140.

Remarks: **Account opened 27-12-18.**

File No.

WAR SERVICE GRATUITY.

Register No.

Reg. No. Dependent

Dec'n No W. S. G. File No

Name Award days at \$ per day \$ Address

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

Less P, D. P. Credited

Less further debit balance

Net due paid as below

TO SOLDIER AND DEPENDENT

Pay Soldier \$ Pay Dependent \$

| Q | Ag No | Ch No | Amount | Month |
|---|-------|-------|--------|-------|
| 1 | | | | |
| 2 | | | | |
| 3 | | | | |
| 4 | | | | |
| 5 | | | | |
| 6 | | | | |

Days Rate Due

Less P.D.P. credited

Clerk Less further Dr. Bal. or overpayment.

Net

| Date | Ck. Order | Ck. No. | Amount | Remarks | Date | Ck. Order | Ck. No. | Amount. |
|------|-----------|---------|--------|---------|------|-----------|---------|---------|
| 1 | | | | | 1 | | | |
| 2 | | | | | 2 | | | |
| 3 | | | | | 3 | | | |
| 4 | | | | | 4 | | | |
| 5 | | | | | 5 | | | |
| 6 | | | | | 6 | | | |

GEN'L AUDITOR
 Posting checked by

 Date

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2.

Mrs Simon
(Assignee)

Name of Soldier

Barnett M.
Pte - 191st Bde.

PAYMENTS.

883579

L. L. Job 5470—Req. 6888.

| Month. | Year. | Cheque No. | Amt. | Remarks. |
|--------|-------|-----------------|-----------|-------------------------------------|
| April | 1916 | | | |
| May | | | | |
| June | | | | |
| July | | | | |
| Aug. | | | | |
| Sept. | | | | |
| Oct. | | | | |
| Nov. | | | | |
| Dec. | | | | |
| Jan. | 1917 | | | |
| Feb. | | | | |
| March | | | | |
| April | | <i>X 5766</i> | <i>15</i> | |
| May | | <i>N 10077</i> | <i>15</i> | <i>Elbow, back., 23/5/17 C.S.G.</i> |
| June | | <i>D 17478</i> | <i>15</i> | <i>15cu</i> |
| July | | <i>Y 19923</i> | <i>15</i> | |
| Aug. | | <i>Z 29070</i> | <i>15</i> | |
| Sept. | | <i>Z 36086</i> | <i>15</i> | |
| Oct. | | <i>K. 47711</i> | <i>15</i> | |
| Nov. | | | | |
| Dec. | | | | |
| Jan. | 1918 | | | |
| Feb. | | | | |
| March | | | | |
| April | | | | |
| May | | | | |
| June | | | | |
| July | | | | |

#15

APR 1 1917

\$ P O T N

Oct 16

105

1

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier _____

PAYMENTS.

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

REGT'L NO. 883579.
H. Q. FILE NO. 649.

NAME Barnett, Moses

RANK AND CORPS Pte. 50th Bn. Norm. 187th Bn.

FOLLOWS
No. _____
FOLLOWS

| CABLE | | C. | NATURE OF CASUALTY |
|----------------|--------------------------------|----|--|
| NO. | DATE | | |
| <u>M 5988.</u> | <u>1-9-17.</u> | | <u>Adm. No. 10 Ad. Amb. Aug 25th / 17</u> <u>Gsw. left. thigh. ✓</u> |
| <u>M 6312</u> | <u>9-11-17¹¹⁴⁻¹</u> | | <u>Adm. No 11 Ad. Amb. Oct 27th / 17.</u> <u>Gsw. Rt. Foot ✓</u> |

| LIST No. | HOSPITAL | DATE OF ADMISSION | REMARKS |
|----------------------|---|----------------------|-------------------------|
| A 308 ²¹ | #10. C. 7. A. | 25-8-17 | Sw. L. Thigh. |
| A 26 ⁽¹¹⁾ | Discharged to duty | 27-9-17 | Sw. L. Thigh |
| A 56-3 | No 11 Can Fld Amb | 27-10-17 | " " " Foot, Alberta Reg |
| A 58. | No. 22 Gen Danvers (Amiers) | 29-10-17 | " " " |
| B 64 | Egbaston Iection | 10-11-17 | " " " |
| B 166 | King George stamps | 17-3-18 | N. Y. 10. |
| | Adm. whilst on leave from War. Pk Epsom | | |
| B 188 | bas. should. read. | | P. L. L. Thigh |
| B 193 | Discharged | 19-4-18 | " " " " Leg. |
| C 226-1 | #12 to Gen Bramshott | 30-5-18 | Ulcers legs |
| C 341 L | 5 Cav " Kirkdale Liverpool | 19-10-18 | Sw. L. Foot & Ulcer leg |
| C 357-1. | Invalided to Canada | 30-10-18 | " " " " |

BARNETT, M. *see*

Name

Rank *Plt*Reg. No. 883549

Unit

~~50¹⁵ Bant~~ *d. R. D.*Next of Kin *Canada*

| Date | Movement | Place | Casualty | List No. | Notified N/K O. | W.O. List |
|----------|---|----------------------|----------|----------|-----------------|-----------|
| 1914 | | | | | | |
| 24-10- | 11 Jan 4. Amb. | S.W. 2 Fort | | 956 | HA 15813/ | 6902 |
| 24-10- | 22 Jan 4. James Campers | | do | 958 | | 5593 |
| 10-11- | 1 st S. Y. H. Edgerton B. Ham | | do | 964 | | 4613 |
| 4-12- | Wil. van. G. Sam | | do | 982 | | 14481 |
| 17-3-18 | Knight. Hosp. Stamford St 58 (On leave from cc of Epton) A. de. Diagnosis | L. Col. St. Leg. | 9678.9 | B166 | | 6719. |
| 19-4-18. | Welding | do | | B193 | | 4518. |
| 30-5-18. | 12 C. G. & Blamekott | Alcester Regs. | | C. 276 | | 18938. |
| 19-10- | 5 Can Gen Hosp | Liverpool | | 95974 | | 341295 |
| 30-10- | Invail to Canada | Foot & Alcester Regs | | | | 4246 |

No. 883579 RANK *Pte.*

NAME *Barnett M.*

T. O. S. 30-6-16. UNIT *187th Battalion C. E. I.*
D.O. 71 of July Paylist.

M. D. *13.*

| PAID FROM | PAID TO | SIG. OR REC'T | PROMOTIONS, TRANSFERS, DISCHARGES, ETC. | |
|-------------------------|--------------------------|---------------------|---|---------------------------------|
| | | | PARTICULARS | AUTHORITY |
| <i>1916 June 30</i> | <i>1916. July 31</i> | <i>✓</i> | | |
| | <i>Aug.</i> | <i>✓</i> | | |
| | <i>Sep.</i> | <i>✓</i> | | |
| | <i>Oct.</i> | <i>✓</i> | | |
| <i>Nov 1</i> | <i>Nov. 25</i> | <i>✓</i> | <i>Transfd to A.O.S. 25-11-16</i> | <i>D.O. 185 of Nov. Paylist</i> |

No. 883574 RANK Pte

NAME Barnett M.

T. O. S.

UNIT

Trans from 187th - ops Bn 211th ~~th~~ ops Battalion C.E.F.
25/10/16 & 23/1-12-16

M. D. //

| PAID FROM | PAID TO | SIG. OR REC'T | PROMOTIONS, TRANSFERS, DISCHARGES, ETC. | |
|----------------|---------------|---------------|---|---------------|
| | | | PARTICULARS | AUTHORITY |
| 1916 Nov 25 | 1916 Dec 4 | n | Trans to O.A.G. Md 13 4/12/16 | DO 23/1-12-16 |

No

RANK

NAME

T O S

UNIT

M. D.

TO
FROM

TO
FROM

SIG
OR
REC

PARTICULARS

AUTHORITY

PROMOTIONS, TRANSFERS, DISCHARGES, ETC.

No. 883579 RANK *Pte*

NAME *Barnett M.*

T. O. S.

UNIT *No 13. Special Service Coy.*

M. D. *13.*

| PAID FROM | PAID TO | SIG. OR REC'T | PROMOTIONS, TRANSFERS, DISCHARGES, ETC. | |
|--------------------|-------------------|---------------|---|--------------------------------|
| | | | PARTICULARS | AUTHORITY |
| <i>1916 Dec 5-</i> | <i>1916 Dec 9</i> | <i>✓</i> | <i>Trans to 191st Bn</i> | <i>auth. G. A. G. 11-12-16</i> |

No. 883579 RANK *Plt.*

NAME *Barnette M*

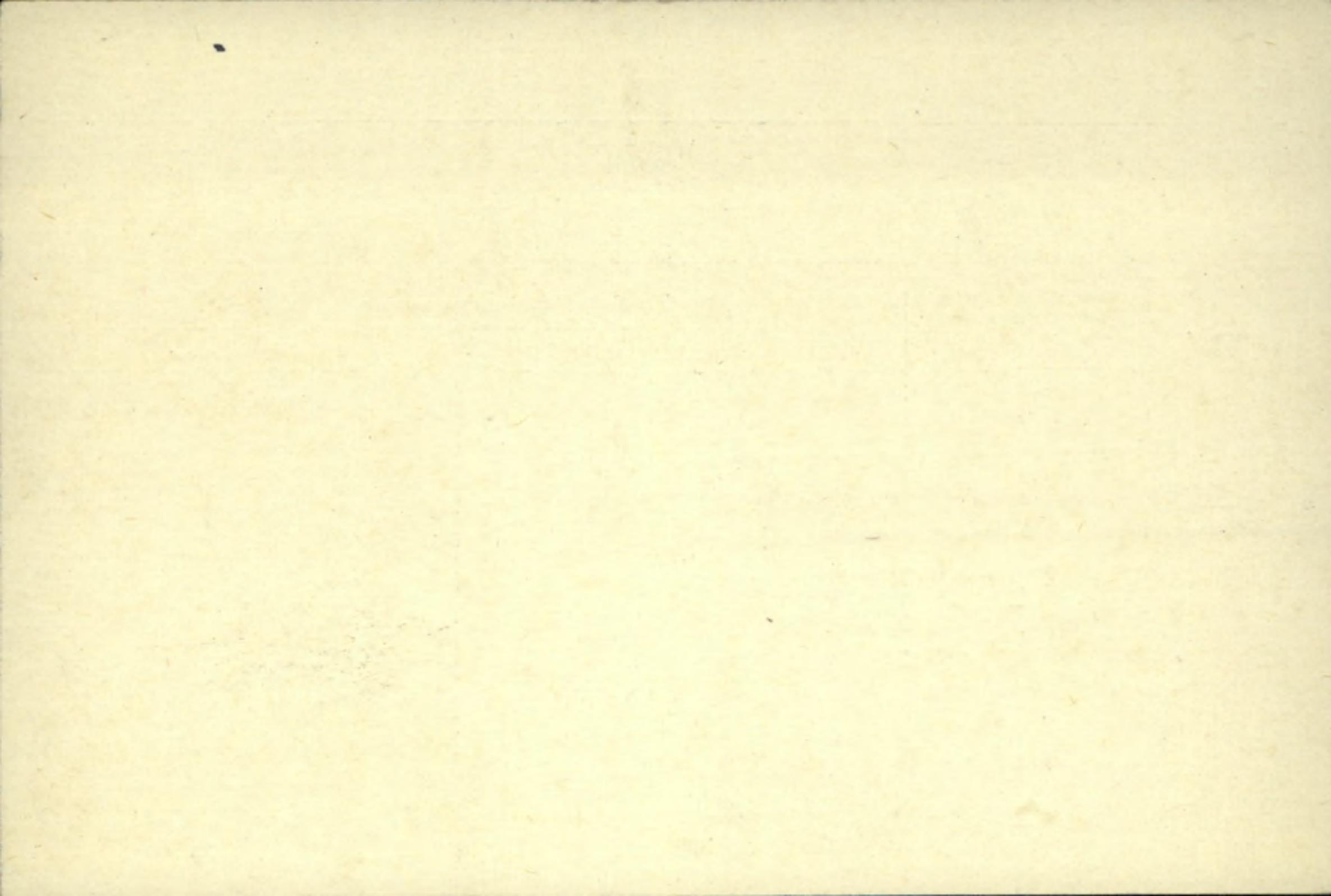
T.O.S. *Trans from:* UNIT *191st Battalion C. E. F.*

G. A. C. 9.12.16

D. O. 188 of 19.12.16.

M. D. *18.*

| PAID FROM | PAID TO | SIG. OR REC'T | PROMOTIONS, TRANSFERS, DISCHARGES, ETC. | |
|---------------|----------------|---------------|---|-----------------------------|
| | | | PARTICULARS | AUTHORITY |
| <i>1916</i> | <i>1916</i> | | | |
| <i>Dec. 9</i> | <i>Dec. 31</i> | <i>✓</i> | | |
| | <i>1917</i> | | | |
| | <i>Jan.</i> | <i>✓</i> | | |
| | <i>Feb.</i> | <i>✓</i> | | |
| <i>Mar 1</i> | <i>Mar 19</i> | <i>✓</i> | <i>S. O. S. Proc of</i> | <i>D. O. 66 of 19.2.17.</i> |



649-B-18971

13 CARD NO.
505.23/12/18. 13 V. L.
P.O. 250 of 13/20
FOLL 37/18

SURNAME. *Barnett*
CHRISTIAN NAMES *Moses*
REGL. No. *883579* RANK *Pte.*
UNIT ~~*187th*~~ *211th* *191st* (*1st P. D.*)
FORMER CORPS *Nil.*

Bn.

NEXT OF KIN.

NAMES IN FULL *Barnett Billy*
RELATIONSHIP TO SOLDIER *Brother*
ADDRESS *Islay, Alta.*

also notify:
CHANGE OF ADDRESS
Mrs. F. Simons
Neil
Didsbury
Alta.
J.R.P. 9/1/18.

COUNTRY OF BIRTH *Canada, Islay, Alta.*
PLACE OF ATTESTATION *Red Deer, Alta.*

DATE *June 16th 1897*
DATE *June 30th 1916.*

Transferred from 187th to 211th P. D. Auth. 211th Bn. M. R. 2/12/16. P. R. 10/11/18 130 33 13.
L. L. 94504. M. & D. 7612
Transferred from 211th to 191st P. D. Auth. 1st P. D. M. R. 18-5-17. H. Q. 1772-39-339.

MARRIED

SINGLE

Yes.

WIDOWER

TRADE OR CALLING

Farmer.

RELIGION

Roman Catholic

DESCRIPTION.

APPARENT AGE

19 YEARS

1 MONTHS

HEIGHT

5 FEET

8 1/2 INCHES

CHEST MEASUREMENT

38 INCHES

EXPANSION

3. INCHES

COMPLEXION

Swarthy

EYES

Brown

HAIR

Black.

DISTINGUISHING MARKS

not stated

MEDICAL EXAMINATION.

PLACE

Sarcee Camp, Calgary, Alta.

DATE

July 14th 1916

Present address: Islay, Alta.

R

B

Number 883579

Rank Pte

Surname BARNETT

Christian Name Moses

Units 50th Bn C Inf Theatre of War France

Date of Service 25.6.17

Remarks o/o Mrs Betsy Simon

Latest Address Hay Lake
Alta

Roll no. *B*

200m.-6-21. *Page 18488*

(This form to be filled in by all ranks on voyage to Canada.)

RANK

SURNAME

INITIALS

UNIT

Home address.....

(Street)

(City or Town)

(Province)

One person to be notified of arrival.....

Station in Military District to which a furlough warrant is required.....

Railway.....

Is your wife on board..... Number of children on board.....

Destination.....

(Sgd.).....

REGON. NO. 264157
DESP. SEP 4 1926

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

B

2147 *April 1917*

VERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

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

RATE OF ASSIGNMENT

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

PARTICULARS OF SEPARATION ALLOWANCE

No. *895549*
 Rank *Pte* Promoted Reverted Discharge
 Soldier's Name *M. Barnett*
 Battalion *191st Battr*
 Beneficiary
 Relationship
 Address

PARTICULARS OF ASSIGNMENT

Name *Mrs. Simon*
 Address *Elbow, Sask.*
 Change of Address
 1 *Didbury, Alta.*
 2 *Elbow, Sask.*
 3
 4

| Date | Cheque No. | Amount S/A | Amount A/P | Total |
|------------------|-----------------|------------|------------|-----------|
| <i>Sep 30-17</i> | | | <i>90</i> | <i>90</i> |
| <i>Oct</i> | <i>K 47711</i> | | <i>15</i> | <i>15</i> |
| <i>Nov</i> | <i>C 54146</i> | | <i>15</i> | <i>15</i> |
| <i>Dec</i> | <i>D 57657</i> | | <i>15</i> | <i>15</i> |
| <i>Jan</i> | <i>V 65103</i> | | <i>15</i> | <i>15</i> |
| <i>Feb</i> | <i>B. 94080</i> | | <i>15</i> | <i>15</i> |
| <i>March</i> | <i>A. 93408</i> | | <i>15</i> | <i>15</i> |
| | | | <i>65</i> | |
| <i>May</i> | <i>A. 5216</i> | | <i>45</i> | <i>45</i> |
| <i>June</i> | <i>B. 19834</i> | | <i>15</i> | <i>15</i> |
| <i>JUL</i> | <i>A. 35890</i> | | <i>15</i> | <i>15</i> |
| <i>AUG</i> | <i>B. 31176</i> | | <i>15</i> | <i>15</i> |
| <i>SEP</i> | <i>B. 35961</i> | | <i>15</i> | <i>15</i> |
| <i>Oct</i> | <i>A. 49854</i> | | <i>15</i> | <i>15</i> |
| <i>Nov</i> | <i>A. 57164</i> | | <i>15</i> | <i>15</i> |
| <i>Dec</i> | <i>B. 67240</i> | | <i>15</i> | <i>15</i> |

897-M-1 REMARKS *0894-M-1*
A.P. reopened from date suspended 28/2/18
adjustment cheque issued for \$45.00 for Mar
April & May A.P. 5/6/18 J.H.D.
June & future cheques \$15.00
A.P. account suspended per Ruling
Decn. on file 0897-M-1
Awaiting instructions from C.P.M.
Cancelled A. 93408. 9/10 + 3/18
A. 5216 mailed 6/6/18
M.R.O. 1.6. received 5/6/18
M.R.O. 11390-A-18 7/8 J/6
M.R.O. 2A. rendered 5/3/18

M. F. W. 128
 400M-6-17-1772-39-1141
 L. L. 2320-M. & D. 1903.

CANADIAN ASSIGNED PAY AUDITED
31-10-18
 AUDIT CLERK
 DATE *19/5/19*

A/c Closed open. *M.D.13 closed.*
Neurana
13-11-19 M.F.W. 15-11-18
Baver
A/c closed 31/11/18. A/c with P.M. Sel. 2/1/19

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

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

RATE OF ASSIGNMENT

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

PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion *1021*

Eeneficiary

Relationship

Address

Name

Address

Change of Address

1

2

3

4

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

M. F. W. 128
 400M-6-17-1772-39-1141
 L. L. 22520-M. & D. 1966.

16-10-40

883579

Barnett, Moses.

LIST OF DISCHARGE DOCUMENTS.

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

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

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

Instructions as to the preparation, 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.

This space to be left blank for the Chelsea Number.

1050

Sailed ^{10 days} October 30th 1915
Arrived Nov. 10th 1915

14
Calgary
Army Form B. 268.

Proceedings on Discharge.

13

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

| | |
|---|--|
| No. <u>8835-99.</u> | Army Rank <u>Private.</u> |
| Name <u>BARNETT, Moses.</u> <small>(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)</small> | |
| Corps <u>191st Bn.</u> <u>8/5. 50th Reg.</u> <u>2nd Res.</u> | |
| Battalion, Battery, Company, Depot, &c. <u>Alta Reg. Depot.</u> <small>(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.)</small> | |
| Date of discharge _____ | |
| Place of discharge _____ | |
| 1. Description at the time of discharge. | |
| Age _____ years _____ months Height _____ feet _____ inches Chest measure- ment { girth when fully expanded _____ ins. range of expansion _____ ins. Complexion _____ Eyes _____ Hair _____ Trade _____ | Descriptive marks. <div style="text-align: center; border: 1px solid black; padding: 5px; transform: rotate(-15deg);"> INVALIDED TO CANADA FOR FURTHER MEDICAL TREATMENT Whitman L. HOSPITAL REPRESENTATIVE, CANADIAN MILITARY HOSPITAL, BRAMSHOTT </div> |
| Intended place of residence <u>Calgary</u> <u>Alta</u> <small>(To be given as fully as practicable)</small> | |
| <small>(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.)</small> | |
| 2. The above-named man is discharged in consequence of <u>being no longer fit for service abroad (with Med Board, Bramshott)</u> | |
| <small>(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.)</small> | |
| 3. Military character:— | |
| 4. Character awarded in accordance with King's Regulations:— | |
| <div style="writing-mode: vertical-rl; transform: rotate(180deg); position: absolute; left: -50px; top: 50%; font-size: small;">To be filled in on the soldier quitting the Colours.</div> | |
| 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* | |

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)

W. Lukman G.
HOSPITAL REPRESENTATIVE,
Commanding *Battn.* *Regiment.*
CANADIAN MILITARY HOSPITAL, BRAMSHOTT

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.

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.)

* Strike out whichever inapplicable.

| | | | |
|-----------------------------|--------------------|------------------------|--------------------|
| ASSIGNED PAY | ENGLAND or CANADA. | SEPARATION ALLOWANCE. | ENGLAND or CANADA. |
| EFFECTIVE DATE: 1 Apr. 1917 | | EFFECTIVE DATE: 1/1/18 | |
| AMOUNT: 15.00 | | AMOUNT: - | |

NAME: BARNETT *Moses*

NUMBER: 883579

NAME, ADDRESS, RELATIONSHIP & AUTHORITY

Mrs. Simon (Mother)
Islay P.O. Alta. Canada

WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.

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

A 3 M. FORM REN'D *Stopp* EFFED. *1/1/18*
 DISCHARGED TO *Canada* DATE *2/10/18*
 PAY BOOK VERIFIED *Yes.*
 Cr BAL *112.35* L.P.C. REN'D *8/10/18*
 AUTHY *Branshott 11/99* *4/10/18*
 Checked *A. Marley* *1/16*

UNIT AND TRANSFERS

ORIGINAL UNIT: 21 Reg. Bn.

DATE ACCOUNT FIRST OPENED - 8-4-17

| AUTHORITY | DATE EFFECTIVE | DATE LEDGER SHEET T'S'D | UNIT TRANSFERRED TO |
|-----------|----------------|-------------------------|----------------------|
| | 1-11-18 | | Alta. R.D. A-N E. |

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS

UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK

| DATE OF PAYMENT | NUMBER OF A.R. | UNIT PAID BY | AMOUNT | DATE OF PAYMENT | NUMBER OF A.R. | UNIT PAID BY | AMOUNT |
|-----------------|---------------------|--------------|--------|-----------------|----------------|--------------|--------|
| 4/10/18 | 2181 | 12 C.S.H. | 24.88 | | | | |
| Sick Furl: | 4/10/18 to 14/10/18 | 10 days | 7.50 | | | | |

DAILY RATES OF PAY AND ALLOWANCES

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

PARTICULARS OF RENDERING NON-EFFECTIVE: Discharge Canada 2/10/18 Branshott 11/99 4/10/18

| MONTH 1918 | PARTICULARS | CR 1 | CR 2 | PARTICULARS | DR 1 | DR 2 | DR 3 | DR 4 | BALANCE | DEFERRED | SEPARATION |
|------------|-----------------|------|------|-------------------------------------|-------|------|------|------|---------|----------|------------|
| Mar 31 | Balance Forward | | | | | | | | 49 | | |
| Apr. | P. Pay | 33 | | Can. A.P. | | | | 15 | | | |
| | | | | AR 2320 18.4.18 | 4.87 | | | | | | |
| | | | | AR 394 24.4.18 266D | 5.11 | | | | 57.02 | | |
| | | 33 | | | 9.98 | | | 15 | | | |
| May | P. Pay | 34 | 10 | Can. A.P. | | | | 15 | | | |
| | | | | AR 950 14.5.18 266D | 7.54 | | | | | | |
| | | | | 1341 29.5.18 | 12.41 | | | | 56.17 | | |
| | | 34 | 10 | | 19.95 | | | 15 | | | |
| June | P. Pay | 33 | | Can. A.P. | | | | 15 | | | |
| | | | | AR 1315 5.6.18 12 Gen. Hoop | 4.87 | | | | 69.30 | | |
| | | 33 | | | 4.87 | | | 15 | | | |
| July | P. Pay | 34 | 10 | Can. A.P. | | | | 15 | | | |
| | | | | AR 2027 10.7.18 129H | 4.87 | | | | | | |
| | | | | AR 51/4624 19.4.18 King George Hoop | 41 | | | | 83.12 | | |
| | | 34 | 10 | | 5.28 | | | 15 | | | |
| Aug. | P. Pay | 34 | 10 | Can. A.P. | | | | 15 | | | |
| | | | | AR 2546 7/8/18 1269H | 11.71 | | | | 97.35 | | |
| | | 34 | 10 | | 4.87 | | | 15 | | | |
| SEP | | 33 | | Can. A.P. | | | | 15 | | | |
| | | | | AR 3262 11.9.18 129H | 4.87 | | | | 110.48 | | |
| | | 33 | | | 4.87 | | | 15 | | | |
| | | | | | | | | | 157.11 | | |
| | | | | | | | | | 126.18 | | |
| Oct. | P. Pay | 34 | 10 | Can. A.P. | | | | 15 | | | |
| | | | | AR 42784 5/10/18 | 24.33 | | | | | | |
| | | | | AR 2181 4/10 B Shott | 24.33 | | | | 88.22 | | |
| | | 41 | 40 | | | | | 15 | | | |
| | | | | Carried Forward | | | | | 48.66 | | |

CANADIAN ASSIGNED PAY AUDITED

31/18 *R. Thorne*

AUDIT CLERK

DATE 1.9.19

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

M. OR S. *Single* REGT. No. *883579* RANK *Plt.* NAME (IN FULL) *Barnett, W.*
 NEXT OF KIN _____ ORIGINAL UNIT C.E.F. *187 ch* IF IN P.F. WHAT UNIT? _____ (BLOCK LETTERS SURNAME FIRST)
 ADDRESS _____ PLACE OF ATTESTATION _____ TRANSFERRED TO _____ DATE _____ AUTHORITY _____
 ADDRESS _____ DATE OF ATTESTATION _____ TRANSFERRED TO _____ DATE _____ AUTHORITY _____
 IS SEPARATION ALLOWANCE PAID? *No.* DATE EFFECTIVE _____ ASSIGNED PAY \$ _____ DATE EFFECTIVE _____
 TO WHOM PAID _____ RELATIONSHIP _____ PAYABLE TO _____ RELATIONSHIP _____ ANY CHANGE IN ASSIGNEE OR ADDRESS _____
 ADDRESS _____ ADDRESS *Hay Lake P.O. Alta*
 STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE _____ EFFECTIVE _____
 DISCHARGED _____ PLACE *23/12/18* DATE _____ REASON _____ AUTHORITY _____ IF ENTITLED TO POST DISCHARGE PAY _____

Certified correct entries on the Ledger Sheet have been audited by [Signature] 12/5/19

BALANCE FROM PREVIOUS ACCOUNT

| MONTH | PAY AND F.A. | | OTHER CREDITS | | TOTAL CREDITS | | ACQUITTANCE ROLLS | | | CASH PAYMENTS | | | ASSIGNED PAY | REGIMENTAL CHARGES | | OTHER CHARGES | | TOTAL DEBITS | | BALANCE | | PARTICULARS OR REMARKS | | |
|----------------|--------------|------|---------------|----|---------------|------|-------------------|------|-----|---------------|-----|------|--------------|--------------------|----|---------------|----|--------------|----|---------|----|------------------------|---|----|
| | NO. OF DAYS | RATE | AMOUNT | | NO. | DATE | NO. | DATE | NO. | DATE | NO. | DATE | | \$ | C. | \$ | C. | \$ | C. | \$ | C. | | \$ | C. |
| | | | \$ | C. | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | |
| <i>14/1/19</i> | | | <i>350.00</i> | | | | | | | | | | | | | | | | | | | | <i>Transferred from P.P. Sta</i> | |
| <i>27/1/18</i> | | | | | | | | | | | | | | | | | | | | | | | <i>A 6003</i> | |
| <i>27/1/19</i> | | | | | | | | | | | | | | | | | | | | | | | <i>B 6003</i> | |
| <i>27/2/19</i> | | | | | | | | | | | | | | | | | | | | | | | <i>Dr 24³³ Suppl 9.69.9.19</i> | |
| | | | | | | | | | | | | | | | | | | | | | | | <i>Cheque 134324-27-3-19</i> | |
| | | | | | | | | | | | | | | | | | | | | | | | <i>Cheque 134331-15-4-19</i> | |
| | | | | | | | | | | | | | | | | | | | | | | | <i>961148-15-5-19</i> | |
| | | | <i>350-</i> | | | | | | | | | | | | | | | | | | | | <i>All Payments Due on This Account have been completed</i> | |
| | | | | | | | | | | | | | | | | | | | | | | | <i>W. Seddall</i> | |
| | | | | | | | | | | | | | | | | | | | | | | | <i>Paymaster War Service Gratuity ML</i> | |

100. 780

Proceedings of the Pensions and Claims Board on the Soldier mentioned in Part I.

The Pensions and Claims Board, Canadian Expeditionary Force, assembled at

on the day of 191

Members of the Board:—

The Board having considered the evidence of the soldier marginally named, together with the documents submitted, recommend:—

14. THE ENTIRE DISABILITY.—Without regard to his regular occupation, to what extent is his capacity lessened as present for earning a full livelihood in the general market for unskilled labour?

15. THE PENSIONABLE DISABILITY.—As Part I. (3). Application on Active Service of a disability existing previous to joining is to be included in the estimate.

16. Permanency of the Pensionable Disability estimated next above in (14) is due to causes arising during Active Service?

(a) Is it permanent?

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

18. Remarks

Reasons for awarding fully earthen.

Classification for the Military Hospitals Commission

Dated at this day of 191

Date of Board 1 OCT 1918

Signatures of the Board

1 OCT 1918

Reserved for M.H.C.

Regt. No. 883579 Rank... PTE. Surname... BARNETT Name... MOSES

Unit or Corps—(a) Overseas from United Kingdom... 50th Bn. (b) In United Kingdom... 21st Reg. Bn.

Born at—Town... Calgary County or Province... Alberta Country... Canada.

Date of Birth—Day... 16th Month... June Year... 1896 Age... 22 yrs... 3 months.

Joined at... Stettler Alberta Date... 30/6/18

Former Trade or Occupation... Farmer.

Permanent marks or peculiarities that will serve for future identification:

Deep Discolored Scar lower Third Left Leg. Ulgers legs and scabies has been cleared up, ulcers very slow to heal, wasserma negative, swelling below scar of wound which have been healing and breaking down again. Admitted No. 15 Gen. Hosp. changed 19-4-18. Says ulcers passed while in France that they leave from wound admitted King George Hosp. 15-3-18. Left leg. Discharged 27-9-17 admitted 1st Gen. Hosp. 27-9-17. Admitted No. 10, C.M. 25-8-17. Went to France June 1917. Admitted No. 10, C.M. 25-8-17. Admitted No. 10, C.M. 25-8-17.

Height—feet... 5 inches... 8 1/2 Colour of eyes... Brown.

Signatures of Soldier (for identification purposes)...

Medical Report.

The answers to the questions below are to be filled in by the Officer in medical charge of the case. He will carefully discriminate between the soldier's unsupported statements and the evidence as recorded in the medical or other military documents bearing on the case. He will plainly state the existence of any of the disability prior to the soldier joining for the present war.

1. DISABILITY (State the actual disabling conditions as distinguished from the diseases or injuries from which they resulted). (Follow the official nomenclature as far as possible.)

- Disabilities Group (a) Painful Scar Left Leg.
Disabilities Group (b) Probably removing infected tissues Chronic Ulcers.
Disabilities Group (c)

2. CAUSE OF DISABILITY. (Follow the official nomenclature in stating the disease or injury)

Table with 3 columns: Disease or injury to which the disability is due, Place of origin, Date of origin. Rows include Shrapnel Wound (France, Oct. 1917) and Infection (France, June 1917).

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

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

- (i) As to Group (a) above? NO. If yes, has Active Service aggravated it?
(ii) As to Group (b) above? NO. If yes, has Active Service aggravated it?
(iii) As to Group (c) above? If yes, has Active Service aggravated it?

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

- (i) As to Group (a) above? YES.
(ii) As to Group (b) above? YES.
(iii) As to Group (c) above?

5. If a cause of disability was an injury received on Active Service, was it received—

(i) While on duty? Yes. (ii) While off duty? No. (iii) Was a Court of Inquiry held? No. (iv) Where? (v) When? (vi) Opinion of the Court?

6. HISTORY OF THE CASE. (State concisely the essential points of the history, noting the entries made on the Medical History Sheet and other records). Family history negative. Past History, Had no serious illness in civil life, joined Army 30-6-16 Arrived in England March 1917. Went to France June 1917. Admitted No. 10, C.F.A. 25-8-17 S.W. Lt. Thigh Discharged 27-9-17 admitted 1st. South. Gen. Hosp. 10-11-17 Flesh wound left leg. Trans. M.C.H. Epsom 3-12-17 Discharged to C.G.D. 11-3-18 While on leave from Epsom admitted King George Hosp. 16-3-18. I.C.T. Left leg. Discharged 19-4-18. Says ulcers began while in France June 1917, since then they have been healing and breaking down again. Admitted No. 12 Can. Gen. Hosp. Ulcers legs. and scabies 29-5-18. Scabies has been cleared up, ulcers were very slow to heal. Wasserman negative. Swelling below scar of wound which increases and becomes painful after walking. Denies venereal Disease.

7. PRESENT CONDITION. (Give previous and present weight if likely to indicate progress of disability.) T.P.R. Normal, well developed, and nourished, mental condition normal. Dark brown depressed scar in er side of lower third, left leg, not adherent to tibia. marked swelling below scar which increases after walking. X-ray is negative to bone lesion. Five brownish scars on left leg, due to old ulcers which break down again if he is put to training for a short time. marked degree of varicosity of veins left leg. several similar scars on right leg. Respiratory system negative Cardio vascular system negative. Digestive system negative. nervous system negative, slight acne on face glands, bones, muscles and joints neg. special senses negative.

8. OPERATION. (i) Was one performed? Yes. (ii) If so, state what. Probably removing infected tissues (iii) Was one advised and declined?

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

9. (i) Is there loss or decay of teeth attributable to Active Service? No. (ii) If so, describe.

10. DO YOU RECOMMEND:— (a) Fit for duty? No. (b) Fit for base duty? No. (c) Invalid to Canada? Yes. (d) Discharge from the Service as permanently unfit? No.

Date of Report... Sept. 19-1918: 1918 Signed... Officer in medical charge of case. Station... No. 12 Can. Gen. Hosp. Bramshott.

I have satisfied myself of the general accuracy of the above Report, and concur therein except... Dated at Bramshott. Hants. Station, on 19-9-18. 1918

Proceedings of a Medical Board on the Soldier mentioned in Part I. Clear and decisive answers are to be given to all questions. Such terms as "may," "perhaps," "probably," "possibly," are not to be employed. Disability due to causes arising on Active Service is to be clearly shown in order that the Pensions Authorities may deal with the case properly.

11. Is the disability fully indicated in Part I. (1)? Yes. If not, indicate it.

12. Is the cause of the disability fully indicated in Part I. (2)? Yes. If not, indicate it.

13. Was the disability caused or aggravated by— (a) Negligence of the Soldier (b) Misconduct of the Soldier. Caused? No Aggravated? No

14. THE ENTIRE DISABILITY.—Without regard to his regular occupation, to what extent is his capacity lessened at present for earning a full livelihood in the general market for untrained labour? (Estimate at none, 10%, 20%, 30%, 40%, 50%, 60%, 70%, 80%, 90%, or 100%). N.A.

15. THE PENSIONABLE DISABILITY.—see Part I. (3). Aggravation on Active Service of a disability existing previous to joining is to be included in the estimate. What part of the entire disability estimated next above in (14) is due to causes arising during Active Service? (Estimate at none, 1/3, 2/3, 3/4, or all.) N.A.

16. Permanency of the Pensionable Disability estimated next above in (15). (i) Is it permanent? N.A. (ii) If not permanent, what is its probable minimum duration (in months)?

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

18. Remarks. Reasons for Invalidating fully confirmed.

19. Recommendation:—(a) Fit for duty? No (b) Fit for base duty? No (c) Invalid to Canada? Yes (d) Discharge from service as permanently unfit? No

Classification for the Military Hospitals Commission.

Date of Board 1 OCT 1918

Signed... Major, President. Signatures of the Board... Charles P. Jents, Capt.

Station Bramshott. Approved... A.D.M.S.

Dated at Canadian Troops, Bramshott Camp Bramshott. Station 1 OCT 1918