ATTESTATION PAPER.

No. 430708

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name? ..... West John Elsworth
2. In what Town, Township or Parish, and in what Country were you born? ..... Victoria B.C.
3. What is the name of your next-of-kin? ..... West Hattie E. (mother)
4. What is the address of your next-of-kin? ..... ~~Mayne Island B.C.~~ Mount Tolmie Victoria B.C.
5. What is the date of your birth? ..... July 9 1895 Att R.L. 29 d 19/5/16
6. What is your Trade or Calling? ..... Draughtsman
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? ..... Yes
10. Have you ever served in any Military Force? ..... Yes (88 Victoria Fusiliers 5 mnth)
    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

John West ..... (Signature of Man).

R. Maulevrer ..... (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, John West, 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.

John West ..... (Signature of Recruit)

Date MAR 1 8 1915 191 . R. Maulevrer ..... (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, John West, 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.

John West ..... (Signature of Recruit)

Date MAR 1 8 1915 . R. Maulevrer ..... (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 Victoria B.C. this 18th day of March 1915

J. W. Gillespie ..... (Signature of Justice)

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

W. Brebner Jr ..... (Approving Officer)

M. F. W. 23.
150 M.—12-14.
H.Q. 1772-39-841.

Description of John Elsworth West on Enlistment.

Apparent Age 19 years 9 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 8 ins.

Chest measurement:
- Girth when fully expanded 39 ins.
- Range of expansion 4 ins.

Complexion Fair

Eyes Grey

Hair Brown

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

Distinctive marks, and marks indicating congenital peculiarities or previous disease.

(Should the Medical Officer be of opinion that the recruit has served before, he will, unless the man acknowledges to any previous service, attach a slip to that effect, for the information of the Approving Officer).

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 18th 1915

Place Willows Camp

J. B. Biggar Major
Jno. A. Briggs Capt. C.A.M.C.
Geo. Nelles Capt.
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 Elsworth West 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. M. Holmes Lt. Col. (Signature of Officer)

Date March 18 1915

REGIMENTAL DOCUMENTS

NAME WEST JOHN ELSWORTH REGT. NO. Lieut UNIT 3rd C.E.R.B. H. Q. FILE NO.

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)	27-11-19	Pers.	2-9-19	Pers — 1009 Reg.	DEATH
CASUALTY FORM (M.F.W. 54 or A.F.B. 103)		Docs. to B.P.C.	22/11/19	B.P.C. Spec. 1245	Category
TRAINING HISTORY SHEET (M.F.W. 113)					M.H
1 FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
1 REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
1 COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
3 MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
1 DENTAL HISTORY SHEET (M.F.B. 465)					Category
3 MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					
MEDICAL EXAMINATION (M.F.W. 129)					
TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
LAST PAY CERTIFICATE (M.F.W. 44)					
PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)			14597		
PARTICULARS OF CHARACTER (A.F.W. 3226)					
COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
1 M. S. W 2591					
1 Med Bd.					
1 Disp Cert					
4 Route letters					
1 RSS					
1 W 138					
					3
					2 10
					2 10

S.S. Saponia 12-8-19

W. 2589
100M-11-18
1772-32-1277

NAME West John Elsworth 711 10 A.D.O. 7-1-19 0/ex 80.127 of 7-5-19 2 Orders 8 Can. Engr. Reg. Pte

RANK & No. Pte S.O.S. 2/9/19 Demob. R.O. 2/710 of 12/9/19. M.D.11 430708

CORPS 48th Battalion

ENLISTMENT, PLACE Victoria. B.C. DATE March 18. 1915 (S)

FORMER CORPS 88th Victoria Fusiliers

COUNTRY OF BIRTH Canada. Victoria. B.C.

NEXT OF KIN West Hattie. E. (Mother.)

ADDRESS OF NEXT OF KIN ~~Mayne Island. B.C.~~ Mount Tolmie P.O. Victoria Canada

DISCHARGE, PLACE B.C. DATE

(auth H.Q. 54-21-38-1 Sept 11/16).

0-9-1-7-15. 148/16

R/C 23/8/19 395 Lond

L. L. 72594—M. & D.—5342. M. F. W. 22. 50 m.—1-15. H. Q. 1772-39-839.

REMARKS:

No. 93 A30708 mar. paylist. RANK Pte. NAME West, J. E.

T. O. S. 24/10/14 (D 228/24-10-14) UNIT 88th Regt (Victoria Fusiliers)
J. O. S. of 48th Bn 19-3-15.
(D. O. No 17 of 19-3-15)

M. D. 11.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1914. Oct. 24.	1914. Oct. 31.	✓		
Nov.		✓		
1915. Dec.	1915.	✓		
Jany.		✓		
Feb.		✓		
Mar. 1.	Mar. 18.	✓	Transfd. to 48 Regt. 18-3-15.	Do 61 of 18-3-15.
Mar 19	Mar 31	—	now shewn on 48th Bn paylist.	
April.		—		
May.		—		UNIT SAILED
June.		—		
July.		no		JUL 1 1915

Number

Rank LIEUT

Surname WEST

Christian Name JOHN ELSWORTH

Unit

Theatre of War FRANCE

Date of Service 10.7.15 9.3.16 13.8.19

Remarks

6E.

Latest Address ~~Mount Holme~~

~~Victoria~~

Roll No. B

c/o Mr C. Brenton ~~B.C.~~

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American Y.M.C.A.

347 Madison Ave

New York N.Y. U.S.A.

REGT'L No 430708.

NAME West, John. E. Ellsworth.

H. Q. FILE No. 649-

RANK AND CORPS Pt. Cpl. Sgt. (3rd. Pnr.) Bn. 29th.

FOLLOWS No. Ba Dorm 48th

FOLLOWS

CABLE No.	CABLE Date	NATURE OF CASUALTY
W5988	1-9-17.	"C" Adm. 11 Gen. Hosp. Aug 22nd. 1917.
661.		Gsw "Head"

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
A.137.	No. 29 Div. Rest Stat.	26-8-16	Pleurisy
A 146	To No 17 Cas. clg. Stn	31-8-16	"
A 152	To No. 12 Cas. Cl. Station	1-9-16	Myalgia
A 155	Do " " "	13-9-16	" To duty
A 165	Rep. from Base	17-9-16	Myalgia to duty
B 60	11 Gen Camers	22-8-17.	G.S.W. Head Sev.
B 13	2nd. West. Gen. Manchester	11-9-17	" " " " " L 15-10-17
B 23	Mil. Cond. Wdcote Pk. Epsom	27-9-17	" " " " " L 22-10-17
B 97	Discharged	17-12-17	G.S.W. Head (Sev.) S.18-1-18

Form DMS 1401.
8289 100M 9/3/17.

T20141

A. & D. CARD

Convalescent Hospital
HOSPITAL.

Woodcote Park, Epsom.
AT

A. & D. No. 43071 08

PL. OF ACTION

RANK Lieut.

UNIT 29th

SICK OR WOUNDED

NAME West. L. E.

AGE 21

RELIGION C of E

PLACE IN HOSPITAL

DIAGNOSIS Shrap. Scalp. Flesh Rt Temple

ADMITTED

FROM Manch'r 25-9-17.

DISCHARGED D/T 17.12.17

TO 3 CCD Seaford

TRANSFERRED

SERVICE AT HOME 3 1/12

IN FIELD 1 4/12

RESULTS

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

(P.T.O.)

REMARKS.

27.9.17 Headaches, dizziness - L.D.
2.10.17 – 13.11.17 Sent.
27.11.17 Emb. / Sd.

J. A. Stewart
Capt.

R. 149.

Name WEST John Elsworth *Rank* L/Cpl *Reg. No.* 430708

Unit THIRD PIONEER BATTALION

Next of Kin CANADA

Date 1916		Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
Aug	26	No 29 Div.Rst.Stn		Pleurisy	A137		
"	31	No 14 C.C.S		do	A146		
Sept	1	No 12. Can Clg Stn		Myalgia	A157		
Sep	13	To Duty		Myalgia	A155		
"	17	Rptd frm Bse Rtd to Duty		do	A165		

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

Surname	Christian Name	Serial No.
WEST	J. E.	

Rank	Unit
Lieut.	C.E.

Medical Board held at	Date	Condition found by Board
Witley Area	17-7-19.	Lac.Muscles Scalp.

Fit for General service.

Remarks.

Surname Christian Name

Rank Unit

Casualty List

D.M.S.1347. 5M-10-10-18.

D.M.S. 1300.

Surname	Christian Name or Names	Reg. No.
West	J. E.	430708.

Rank	Unit	Co.	Troop	Batty
~~S/Corpl. Sgt.~~	3rd Pioneer Batt	29 Div		B.C.

Hospital: 29th Div. Rest. Station

Date of Admission: 26.8.16.

Transferred: ~~17 Gen Hosp~~ Hosp. 31.8.16

12. Cas. C. Station Hosp. 1.9.16

2 W. Gen Manchester. Hosp. 11.9.17

Mil Conv. Woodcote Park. Hosp. 27.9.17

Diagnosis: Pleurisy.

(1)
Later Diagnosis (if changed)
(2) Myalgia
(3) G.S.W. Head Sev. H.O

Additional Diagnosis: if more than one state present

DISPOSITION

	Date
C.L. 8-9-16. A137.	To Duty 13.9.16
" 19.9.16 ~~[illegible]~~	
" 26.9.16 A152	To Duty 17.9.16
ct. 29.9.16 #a155	Dis 17-12-17
" 11.10.16. a165 (2)	
1.9.17 A606 2	
18-9-17 B130 (1)	
29.9.17 B323-4	
" 28-12-17 B97 (4)	

REMARKS

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

RW.
RW

EPITOME OF HOSPITAL TREATMENT.

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

(9 38 40) W5605—742 300,000 8/15 HWV(8M1268) Forms/W3172/2

Army Form W. 3172.
(In pads of 50.)

4th General Hospital.

Ward 29 No. of Bed 45 Date 26 Sep 1917

Regt. No.	Rank and Name	Corps	Part to be X-Rayed
430708	Sgt Nash	29 Cavy	Hand

SHORT HISTORY OF CASE.
(To be completed by M.O. i/c case)

L.B.

Signature of M.O. J. J. Newton

Date

REPORT ON RESULT OF X-RAY EXAMINATION.
(To be completed by Radiographer.)

No. of Plate 2

HSR

Two foreign bodies outside the picture

Signature of Radiographer

Date

Army Form B. 103. Regimental Number 430708

Casualty Form—Active Service.

Regiment or Corps 2nd Bnk

Rank Sgt Surname West Christian Name J

Religion Age on Enlistment years months.

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

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

Extended { } Re-engaged { } Qualification (b) or Corps Trade and Rate

Temporary Original not available 3rd Bdn nwl

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...			
14/2/18		DISCHARGED FROM 3RD C.C.D. Seaford TO 1st Res BN. PART II D.O. NO. 36		15/2/18	
			R. Chevers		Lt
		TAKEN ON STRENGTH OF			
22.2.18	1st Res.	1st CAN. RES. BATTN.	Seaford	14.2.18	Pt II 45
25.2.18	1st Res	Ex Company Can Pion Sch	Seaford	14.2.18	Pt II 47
1.4.18	C.P. Sch.	Retd to first Res.	"	8.4.18	Pt II D.O. 53
					A.G. Bolton Lt & adjt. CANADIAN PIONEER SCHOOL.

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

[P.T.O.

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

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
11/4/18	1st Res Bn	Returned from Command	Seaford	9/4/18	PH 2 D 087
13/4/18	1st Res Bn	On Command 13th Res Bn	Seaford	9/4/18	PH 2 D 087
16/4/18	1st Res Bn.	Ceases to be shown as on Command to 13th Res Bn + is on Command to C E R D.	Seaford	15.4.18	PH D 091
21-10-18	1st Res Bn	S.O.S. to C E R. (C S M) (A A B 4-1-36) and ceases to be "On Command"	Seaford	21-10-18	PH D O 253
					For Adjutant, 1st Canadian Reserve Battalion. Captain,
27-1-19	C S M E.	S.O.S. on transfer to 3rd C E R B.	Seaford	25-1-19	PH D.O. 21
		S.S. Ellis	1st Cse Cse E.		
27-1-19	3rd C E R B.	T.O.S. from C S M E. previous entry cancelled,	Seaford.	15-1-19	PH 1 O O Dec 22
9/5/19	3rd C E R D	T.O.S. from C E R B on being granted a Commission	Seaford	8-1-19	PH 2 O 108.
20/6/19	3rd E R D.	S.S. to C E R Doc proceeding on leave from 20/6/19 to 3/7/19.	Seaford.	20/6/19	PH 2 O 142.

Above Lieut C E
for O.C. 3rd C E R D

SERVICE AND CASUALTY FORM (Part I).

Army Form B. 103—I.
Part I.

(1)*Substantative rank Pte
*~~Acting~~ rank Sergeant
*[To be entered in pencil to facilitate alteration.]
(4) Surname West
(5) Christian Names H.
(6) Army Form, number of, Attestation Form or Record of Service paper
(7) Whether of British or of Alien origin [*vide* A.C.I. 578 of 1918]
(8) Date of birth as stated on enlistment
(9) (*a*)

(2) Regiment or Corps

(3) Regtl. No. 430708

(10) Enlistment (*b*) 18/3/15
(11) Engagement (*c*) Dofw
(12) Service reckons from (*date*) 18/3/15
(13) Special conditions (if any) of ~~enlistment~~ (*d*)
(14) Any subsequent variations (if any) of conditions of service

(Authority) (*date*)

Initials and Rank of an Officer.

(15) Category	Date	Medical Authority	Initials and Rank of an Officer

(16) (Record of Occupation in Civil life (*vide* Army Order 93 of 1917)

Industrial Group No.
Trade or Calling
Married or Single
Particulars of Trade Test

Occupation Cards despatched on (*date*)
Second Occupation Card despatched on (*date*)

(17) Next of Kin
(18) Demobilizer (*f*) (Place)
(19) Pivotal-man (*f*) (Date)
(20) Qualifications (*g*) *or* (21) Corps trade and rate

(Signature of Posting Officer

(22) Extended
(23) Re-engaged

(24) Miscellaneous entries:—

NOTES.—[a] Here enter particulars of any subsequent claim as to actual age after verification by birth certificate [*vide* A.C.I. 470 of 1918. [b] Whether direct or voluntary enlistment or called up under the Military Service Acts. [c] Whether for specified term of years or for duration of the war. [d] Whether "for Home Service only," or "not to be transferred without the soldier's consent, &c. [e] If to be retained on Home Service, period, if specified, to be stated, also authority, and on what grounds. [f] Required for demobilization purposes. [g] Signaller, Shoeing-smith, &c.

Army Form B. 103 (II.) to be gummed on here if required.

Nothing to be written in this margin.

W1889—PP 1150 1M 5/18 G.W.P.Co (3490)

430708 West J.E.

(A) Report: Date	(A) Report: From whom received	(B) Authority of Part II. of Orders	(C) Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	(D) Place of casualty	(E) Date of promotion, reduction, reversion, casualty, &c.	(F) Remarks, and initials and rank of an officer
22/2/18	1st Res		T.O.S. from BCRD and shown on command to 3rd C.C.D.	Seaford	14/2/18	Pt 2 DO #45
25/2/18	1st Res		Ceases to be shown on command to 3rd C.C.D and will be shown on command to Can. Pioneer School Seaford	Seaford	25/2/18	Pt II DO #47
11/4/18	1st Res		Rejd from command Can Pioneer School	Seaford	9/4/18	Pt II DO #87
13/4/18	1st Res		On command to 13th Res Bn, Seaford	Seaford	9/4/18	Pt II DO #89
16/4/18	1st Res		Ceases to be on command to 13th Res Bn and shown on command to C.E.T.D. for a period of one month on probation (Auth H.Q. Letter H.Q 22-1-5 d/13-4-18)	Seaford	15/4/18	Pt II DO #91
21/10/18	1st Res		T.O.S. to C.E.T.C. and ceases to be on command accordingly	Seaford	21/10/18	Pt II DO #253

Adjutant, 1st Canadian Reserve Battalion

Nothing to be written in this margin.

(9178)—Wt. W12165—2146.—1,250,000.—2-15.—C & G. Forms B. 103/1.

Army Form B. 103.

War Service Badge Class A

Casualty Form—Active Service.

Regiment or Corps 48th Battalion C.E.F.

Regimental No. 430708 Rank Pte Name West (John Elsworth)

Enlisted (a) 18/3/15 Terms of Service (a) 1 year or duration of war. Service reckons from (a) 18/3/15

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

Extended ____ Re-engaged ____ Qualification (b) ____

CERTIFIED CORRECT. Canadian Record Office, Westminster House, 7, Millbank, S.W.

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.
		EMBARKED FOR FRANCE.			10/3/16	Auth:- 121/75442/ S.D.2.
8.7.16.	OC Unit.	Is appointed L/Cpl. vice L/Cpl. Fisher from: Cpl.		In the Field.	7.6.16.	B.213. 8/7/16 Part II O No 17 14/7/16
26.8.16.	29 D.R.S.	Pleurisy.	adm.	29 D.R.S.	26.8.16.	A36. D.C.S. 114.
26.8.16.	87th F.A.	"	adm.	87th F.A.	23.8.16.	A36. D.C.S 117.
			Trans.	29. D.R.S.	26.8.16.	
2.9.16.	29 D.R.S.	"	adm.	29 D.R.S.	26.8.16	A36 D.C.S 123.
			Trans.	17.C.C.S.	31.8.16	
2.9.16	12.C.C.S.	Myalgia.	Adm.	12.C.C.S.	1.9.16.	A.36. DCS.128.
9.9.16	" "	"	Adm.	12.C.C.S.	1.9.16	A.36. DCS. 128.
16.9.16.	" "	Myalgia	adm.	" "	1.9.16	A36 D.C.S. 130
			Trans.	To Duty.	13.9.16	
2.9.16	17CCS.	Pleurisy	adm	17CCS.	31.8.16	A36 D.C.S 134
			Trans	Hazebrouck	1.9.16	
30.9.16.	O.C.Unit	Promoted Corporal vice Cpl. Vowell.E.A.		Field	16.9.16.	B.213.30.9.16. ~~XXXXXX~~ Part II Ord. 53. 5.10.16.
23.9.16.	"	Returned to duty from Hos.		"	17.9.16.	B.213. DCS.141
23.12.16		Promoted Sergeant.		"	6.12.16	B.213. Part II 2 d. 3.1.17.

(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.

[F.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				
		Transferred 29th Bn.		8.5.17	Ch. II Gd. 63 of 6.6.17.
		TOS 29th Bn	Flo	9.5.17	SO No 47 dy. 7-6-17
26.5.17	OC 29	Gn. " "		18.5.17	B213
14.7.17	"	Granted 10 days leave	"	13.7.17	" SO No 60 dy-21-7-17
28.7.17	"	Returned from leave	"	24.7.17	"
25.8.17	"	Wd in Action		21.8.17	" CR 305
22.8.17	11 Gen	GSW head	11 Gen H	22.8.17	W3034-8186
21.8.17	5 C Hq	" " "	5 C Hq	21.8.17	Gaz. To 22 CCS 21-8-17
11.9.17	11 Gen	" " "	Eng.	11.9.17	W3034
"	"	Invalided to Eng. per BCR Spot Seaford	A.S. Ville de Liege	11.9.17	SO No 81 dy-22-9-17 Auth: W3083 (3898)
			J W Hogan	Major Canadian Section. G. H. Q. 3rd Echelon B.E.F.	for Lt.-Col., A.A.G.
20-9-17	Bch D.	T.O.S. from 29th Bn.	Seaford	11-9-17	Ch II o. 191.
					D. Dinning Lieut. for Lieut Col. i/c Records, C.E.F.
8-6-19	R Wing	T.O.S. of Bn H.Q. to	Witley	9-6-19	Do. 70
do.		do. C.E.F. in Canada.	do.	13-8-19	

G. H. Ward Capt

OFFICER i/c RECORDS,
R. WING C.O.C.,
WITLEY.

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

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

Casualty Form—Active Service.

Unit, Regiment or Corps 3rd C E

Regimental No. ..... Rank Sgt C. E. F. Name West John E.

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

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

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

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
2-9-19	M.H.Q. Ottawa	T.O.S. C.E.F. in Canada on General Demobilization	M.D. No. 11	13-8-19	C.E.F. R.O. No. 2152-19
12-9-19	M.H.Q. Ottawa	S.O.S. C.E.F. in Canada on General Demobilization	M.D. No. 11	2-9-19	C.E.F. R.O. No. 2171-19

W. Hunter Capt
for Director Personal Services

(a) In the case of a man who has re-engaged for, or enlisted into Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) e.g. Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

[P.T.O.

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				

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

M. F. W. 54. (A. F. B. 103.
500M.—9-16
H.Q. 1772-39-920.

Temporary Original not Available

Casualty Form—Active Service.

Unit, Regiment or Corps C. E.

Regimental No. ..... Rank Lieut. C. E. F. Name West John Elsworth

Adjutant, District Depot M.D.

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

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

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

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
3.9.19.	OVERSEAS	T.O.S. DISTRICT DEPOT XI S.O.S. XI DD on demob. T. Area.	VANCOUVER, B.C. " "	13.8.19 2.9.19	D. O. Pr. II 246/ 1919. Captain Adjutant, District Depot M.D.

(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				

P—56

Rank Pte Name WEST John Elsworth Reg'l No. 430708

If in perm. Corps, What Unit?

Unit 48th Bn Married or Single Single

Place and Date of Enlistment Victoria. 18th March.1915 Place of Birth Victoria. B.C.

Name and Address, Next-of-Kin Hattie E. West. Mayne Island. B.C. Relationship Mother.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

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.
1/6/15	30/6/15	30	100	30 00	30	10	3 00	10 00	43 00			29 10			29 10	13 90	
1/7/15	31/7/15	31	100	31 00	31	10	3 10	~~13 90~~	~~46 00~~ 34 10			10 00			10 00	38 00	
1/8/15	31/8/15	31	100	31 00	31	10	3 10	~~36 00~~ 27	~~12 34~~ 34 37			53 96			53 96	16 41	Adj ex 27¢ on $10
1/9/15	30/9/15	30	100	30 00	30	10	3 00		33 00			14 60 17 03			31 63	17 78	
1/10/15	31/10/15	31	1	31	31	10	3 10		34 10	744 406 468		14 60 26 77 14 60			41 37	10 57	
1/11/15	30/11/15	30	100	30 00	30	10	3 00		33 00	536		17 03			31 63	11 88	
1.12.15	31.12.15	31	100	31 00	31	10	3 10		34 10	609 725		34 06 7 30			34 06	11 92	
1.1.16	31.1.16	31	"	31 00	31	"	3 10		34 10	773		9 98		37	17 65	28 37	Lad Kit
1.2.16	29.2.16	29	"	29 00	29	"	2 90		31 90	853		7 30			7 30	52 97	
1-3-16	31-3-16	31	"	31 00	31	"	3 10		34 10			9 98			9 98	77 09	
				305 00			30 50	10 27	345 77			268 31		37	268 68		

BALANCE TRANSFERRED TO NEW LEDGER.

Date		PAY			Field Allowance			Other Credits	Total Credits	Vouchers		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						

Forms R. 150.
3232. 15 M. 14/12/16.

Surname WEST **Christian Names** John Elsworth.

Rank 430708. Sgt. **Name and Address of Next-of-Kin**

Promotion Lieut. Hattie E. West. (Mother)
Mount Tolmir, P.O.
Victoria B.C.

Unit Can. Eng.

Place of birth Victoria. B.C.

Married (Yes or No) No.

Appointments

Date of leaving Canada **Date and Cause of Resignation**

M

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				
					ENGINEERS
26.4.19	W.O.	To be T/Lieut. Can.Eng.		8-1-19.	L.G. 26-4-19.
9.5.19	3CE.R.Bn.	S.O.S.		8.1.19	Pt. II of 108.
20.6.19	do	S.O.S. to C.E.R.D.		20.6.19	Pt. II of 142.
11-7-19	C.E.R.D.	Grass leave + is S.O.S on posting to "R" wing Witley		9-7-19	Pt. 2.0.192.
9-7-19	"R" wing C.C.C.	Y.O.S. from "R" wing pending R.T.C.		8.7.19	Pt. 2.0.44.
		Sailed for Canada		13-8-19.	S.L.106.
25-8-19	CERD	SOS to CEY in Canada		13-8-19	D0237

23127

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					

R—122.

Rank L/Cpl Name WEST John. Elsworth Reg'l No. 430708

Unit 48th Bn If in perm. Corps, What Unit? Married or Single Single

Place and Date of Enlistment Victoria. 18th March. 1915 Place of Birth Victoria. B.C.

Name and Address, Next-of-Kin Hattie E. West. Mount Tolmie P.O. Victoria. B.C RL29 19-8-16.

~~Mayne Island.~~ B.C. Relationship Mother.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

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				
		Arrived	England	10-7-15	
		Embarked for France.		9 MAR 1916	
14.7.16	3rd Pion	appd L/cpl	Field	7.8.16	Pt II O. 17.
8.9.16	do	No 29. Divisional Rest Stat	do	26-8-16	CL.137 Pleurisy 66.
19.9.16	do	No 17 Cas. Clg. Station	do	31-8-16	CL146 do
26.9.16	do	No 12 Casualty Clg Stat	do	1-9-16	CL152 myalgia
29.9.16	do	To duty	do	13-9-16	CL155 & CL 165.
5-10-16	do	Promoted Corporal	do	16-9-16	Pt II O. 53.
3-1-17	do	Promoted Sgt.	do	6-12-16	Pt II O. 2.
7-6-17	29th.	T-O-S from 3rd Pion.	do	9-5-17	Pt II 47 & 3rd Pion Pt II 63 d/6-6-17

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				
1-9-17	29th Bn.	11 General Hospital	Sgt Camiers	27-8-17	GLA606 GSW. Head Sev.
17-9-17	B&Regt.	2nd. Western Gen. Hosp.	Manchester	11-9-17	GLB13 " "
20-9-17	B&RD.	Invalided & TOS from 29th Bn	Sgt Seaford	11-9-17	Pt II O. 191 & 29th Bn. ~~Pt II 81~~ D 22-9-17
28-9-17	B&Regt.	Trans. C.C. Hosp. Woodcote Pk	Epsom	27-9-17	GLB23 GSW. Head Sev.
21-12-17	B&RD	On Bound 3rd BD	Seaford	17-12-17	Pt II 027 + 3rd BD. Pt II 260 D 27-12-17
C 27-12-17	B&Regt.	Disp. Can. Mil. Hosp. WP.	Epsom	14-12-17	GLB94 "
~~19-1-18~~	~~3 CCD~~	~~Proceeded on Command to Pontchal~~	~~Seaford~~	~~15-1-18~~	cancelled by 3 CCD Pt II 39 d 15/2/18 ~~Pt II 16 + BCRD Pt II 18 d 22/1/18~~ Cancelled by Pt II 146 d 7/2/18
21-2-18	BCRD	Ceases on Com 3 CCD + SOS to 1 Res Bn	Seaford	14-2-18	+ 3 CCD Pt II 39 d 15/2/18 Pt II 44 + 1 Res Pt II 45 d 22/2/18
25-2-18	1 Res.	On Command Can Pontchal	"	"	25-2-18 Pt II 47
11-4-18	"	Ceases on Com Pioneer Sch	"	"	9.4.18 " " 87 C.P.S. Pt II 28 d 5.4.18.
13.4.18	"	On Com. 13th Res	"	"	9.4.18 " " 89
16.4.18	"	Ceases on Com 13th Res			CETD Pt II 91 d 16.4.18
		on Com CETD for one month	"	"	15.4.18 " " 91
12.5.18	CSME	TOS	"		4.5.18 " " 1
21-10-18	1 Res	Being on Com CETC + is SOS to CETC (CSME)	Seaford	21-10-18	Pt II 253 P.S.M.E.T.C. Pt II 126 d 23-10-18
~~25-1-19~~	~~CSME~~	~~SOS to 3rd BERB~~	~~Sgt~~	~~25-1-19~~	~~21 & 22 d 24/1/19 3 CERD~~ cancelled by CSME 20 1049. 3/5/19.
7-5-19	CERD	T.O.S from CSME		7.1.19.	Pt II O 127.
7.5.19	"	SOS having been appr Com. W/E + posted 3rd CERB		7.1.19	" 127 } 7/5/19.

CANADIAN EXPEDITIONARY FORCE

N.W. 11-39.
T.R.

Certificate of Service

ISSUED TO OFFICERS AND NURSING SISTERS

This is to Certify that (Rank) Lieutenant.

(Name in full) John Elsworth WEST.

Enlisted in 48th Battalion as #430708 (Private).

CANADIAN EXPEDITIONARY FORCE, on the Eighteenth

day of March 1915 AND WAS APPOINTED to COMMISSIONED RANK

in 3rd Can. Engineers Res. Battalion.

CANADIAN EXPEDITIONARY FORCE on the Eighth day

of January 1919.

He SERVED in CANADA, England and France with the 48th Bn., 29th Battn., British Columbia Regt'al Depot., 2nd C.M.R., 1st Can. Res. Battn., 13th Can. Res. Battn., 3rd C.M.R.Battn., C.R.R. Depot., D.D.M.O.

and was STRUCK OFF THE STRENGTH on the Second. day

of September 1919 by reason of General Demobilisation.

Dated at Ottawa, this Thirtieth day

of January ~~1919~~ 1920.

Wounded 21-8-17.

J.E. Langrell Lieut.
for. Director of Personal Services.

M. F. W. 2618a
30m.—4-19.
1772-39-1428.

NM

CANADIAN EXPEDITIONARY FORCE

Certificate of Service

ISSUED TO OFFICERS AND NURSING SISTERS

This is to Certify that (Rank) .....

Name in full .....

Enlisted in .....

CANADIAN EXPEDITIONARY FORCE, on the .....

day of ..... 191... AND WAS APPOINTED to COMMISSIONED RANK

in .....

CANADIAN EXPEDITIONARY FORCE on the ..... day

of ..... 191...

He SERVED in CANADA .....

and was STRUCK OFF THE STRENGTH on the ..... day

of ..... 191... by reason of .....

Dated at Ottawa, this ..... day

of ..... 191...

Director of Personal Service

Temporary

Army Form B. 178.

To be used (a) for recruits enlisting direct into the Regular Army, and (b) for men of the Territorial Force when they are admitted to Hospital. Army Form B. 178A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname West *Christian Name* J E

TABLE I.—General Table.

Birthplace { Parish ..... County .....

Examined { on ..... day of ..... 191 , at .....

Declared Age ..... years ..... days.

Trade or Occupation .....

Height ..... feet ..... inches.

Weight ..... lbs.

Chest Measurement { Girth when fully Expanded ..... inches. Range of Expansion ..... inches.

Physical Development .....

Vaccination Marks { Arm ..... RIGHT ..... LEFT ..... Number ..... RIGHT ..... LEFT .....

When Vaccinated .....

Vision { R.E.—V = ... L.E.—V = ...

(a) Marks indicating congenital peculiarities or previous disease—

.....

.....

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

.....

.....

Approved by .....

Rank .....

Medical Officer.

Enlisted { at ..... on ..... day of ..... 191.....

	Corps	Regtl. No.
Joined on enlistment		
Transferred to	430708	

Became non-effective by .....

.....

on ..... day of ..... 191.....

(*Signature*) .....

(*Rank*) .....

TABLE III.—Boards; Courts of Enquiry, 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
~~30/11/17~~	

TABLE IV.—Service Table.

Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation
30-11-17		

W. P. Griffith & Sons Ltd., Printers, Old Bailey, E.C.
[1128] W8827/M945 200m 10/16R 45 59

Forms B. 178. 48

[P.T.O.

TABLE II.—Only for admissions to Hospital or to the Sick List in 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				
McH Epson	26	9	17	~~[illegible]~~ 17 DEC 1917			Gd Wshrp at temple Flesh	~~76~~ 83	Complains of headaches & dizziness A/M B opinion is that this man is fit for D.T.	J H Stewart CAPTAIN R.A.M.C. "A" DIVISION

Attested 30/8 11. H.T.

430708 Pte West J. E.

3rd Can. Pioneer Bn.

42852

— 20 —

Perforated sheet for Will from Pay Book of Reg.

No. 430708

Name John Elsworth West

Unit 3rd Can Pioneers 48 Batt.

Military Will.

In the event of my death I give the whole of my property and effects to my mother, Mrs. Hattie Edna West, Mou[redacted] Tolmie P.O. Victoria B.C. Canada.

Signature John E. West.

Rank and Regt. Corporal, 3rd Can. Pnr.

Date Aug. 19th 1916.

(To be rendered IN DUPLICATE).

Cheque Nos. .....

CANADIAN CONTINGENTS.

REQUISITION FOR FUNDS.

£ .....

Required on advance of .....

on account of .....

.....

to be accounted for .....

.....

The amount on hand at present is £ .....

(Signature of Officer making demand .....

.....

Approved,

.....

Officer Commanding.

Place .....

Date .....

NOTE:—I.—In the case of advances on account of pay, &c., of N.C.O.'s and Men, an even sum should always be demanded, and should be limited to actual requirements as far as possible.

NOTE:—II.—Requisitions for advances of pay will as a rule be signed only by the Paymaster; but in other cases, such as advances on account of Travelling Expenses, &c., the approval of the Commanding Officer is necessary.

Married or Single: S

Place of Birth: Victoria B.C.

Name and Address of Next of Kin: Hattie E West
~~Wayne Island B.C.~~
Mount Tolmie, P.O. Victoria, B.C.

Relationship of Next of Kin: Mother

Name and Address of Next of Kin:

Relationship of Next of Kin:

Separation Allowance Monthly $ — Effective (Date)

Payable to

Relationship of Dependant

Casualties, Promotions, &c.

Particulars	Effective Date	Authority
Promoted Sgt.	6/12/16	B.O. 2. 3/1/17

Admissions to Hospital, &c.

Date Admitted	Date Discharged	V. or A.	Name of Hospital

Reg'l No. 430708 — Rank ~~Pnr.~~ "Sgt" ~~L/Cpl~~ — Name: West John Elsworth

If in Permt. Corps What Unit: 48th Bn — Unit: 3rd Res Bn — Transferred to: 29th Bn — Date: 1/2/18 — Authority: NR

Permanent Force Allowances — Transferred to — Date — Authority

Place of Attestation: Victoria B.C. — Transferred to — Date — Authority

Date of Attestation: March 18th 1915. — Transferred to — Date — Authority

Assigned Pay Monthly $ — Date Effective

Payable to — Relationship

Assigned Pay Monthly $ — Date Effective

Payable to — Relationship

Stop-Payment Form (Assigned Pay) Rendered (Date) — Effective — Reason

Discharge Date and Place — Reason and Authority

Account Transferred to Non-Effective Branch (Date)

Account Transferred to Officers' Pay Branch (Date) — 29th Bn B.O. 67

C. J.

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	Remarks
1916			305																																
31/3/16			30	50										1027	34577												268 31		37	268 68	7709				
1/30-4	30	1.00	30	00	30	.10	3	00							33 00	61	15/4							785						785	10224				
																124								255											
1/31-5	31	1.00	31	00	31	.10	3	10							34 10	122		196						262	766					1283	12351				
1/30-6	30	100	30	00	30	10	3	00							33 00																15651				
			34	55											36 85																				
1/31/7	31	108	~~34~~	00	31	10	3	10						120	~~36~~ 30	254								766						766	18570				
1/31-8	31	1.00	31	—	31	10	3	10							34 10	365	31/7	384	11/8					262	261					523	24457				
1/30-9	30	1.00	30	00	30		3	—						310	36 10			533							436					436	24631				
			255												2255																				
1/31/10			34 10		31		3	10						225	3565	547			1769					261		262				523	27898				
																66								349											
1/30-11	30	1.10	33	—	30		3	—						155	37 55	630								436						785	30868				
Dec	31		34	10	31		3	10							37 20	900			0.1603	13/9				349		261				610	33978	183			
			27	50												789	9/12		789	9/12				1657											
1917 Jan	31	135	46	50										780	54 30	804	18/12		804	18/12				436						2093	37315				
		15																																	
Feb	28		47	00											42 00	586	24/1							785						785	40730				
																953	29/2							872											
March	31		46	50											46 50	912	12/3		1020	29/3				524	523					1919	43461	24375			
			065																																
			782	10										2617	80682									7999	1986	523	268 31		37	27376					

(Cut 4,557)

24 days @ 05 812 ck in Jan
Approved C. 7.6.16. B.O. 17. 14.7.16

Pay of Rank for July & Aug

Pay of Rank L/Cpl to Cpl 16.9.16 30 days @ 10 Pay of Rank Dept vs L/C N Sld @ 5.75 From Cpl. 16.9.16 B.O. 53 4/6/16 Pay of Rank for Act Cpl.

std sgt 6/12/16 B.O. 2 3/1/17 pay of rank 26 dys at 3.12 7.80

430708 Sgt West John Elsworth

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	Remarks
		135 / 15																														243 75		
Apr	30		45												45			93 27½		9 54					523					523	474 38				
May	31		46	50											46 50			35 19/9						523 / 523						1046	510 42		284		
June	30		45												45			127 13/5						535						535	550 07				
July	31		46	50											46 50								CP 26/7/17 CP 14/7/17				48 67 / 73 00			1216	474 90		324 50		
Aug	31		46	50											46 50								226 50/5 249 50/5 29th Rev.			535 / 536				1071	510 69				
Sept	30		45												45								29th Rev 210 12/6 HR 20/9/17			892	487			1379	541 90		365		

Month	Particulars	Dr. 1	Dr. 2	Particulars	Dr. 1	Dr. 2	Dr. 3	Dr. 4	Balance	Deferred Pay	Allowance
		541 90							541 90	365	
Oct	S.P.	46 50							588 40	388	
Nov.	S. Pay	45		Drv. 39097. AR. 376. 29th Rev 30/6/17	9 14						
				Drv. 8187. AR. 417. 56 leave ak. 12/7/17	87 60						
				do do 12/7/17	9 14						
				Dr. L5387 AR. 461. 29th Rev 17/7/17	9 14						
				Dr. 27366 AR. 590 do. 17/8/17	5 35						
				Dr. 30010 AR. 3236 Epsom 27/9/17	9 14				553 29	405 50 1 wp. 425 75	
Dec. 1918	S Pay	46 50 / 91 50		Dr. 78091	126 71						
Jany.	S Pay	46 50		AR. 3810 do 23/10/17	9 73						
				Dr. 72636 AR. 4202 do 11/8/17	14 60				575 36	446 00	
		46 50			24 33						
Feb	Sergts pay III C.O. 13 d. 260 27/12/17	42 - / 42							617 36	466 25	
March	S.P. from 17/12/17 - 29/12/17	8 76		D/N 1286 30/1/18	16th Res.	12 17					
"	S.P.	46 50		D/N 1454 13/2/18	16th Res	12 17					
				D/N. 1115 17/1/18 " "		12 17					
				D/N 6838 17/12/17. CCN Eps.		48 67					
				D/N. 710 26/2/18 1st Res Bn		14 60					
				A/R 6575 17/12/17. CCN Eps		9 73			563 11	486 50	
		55 26				109 51					

P 820
12474—375M—13·2·18.

* Strike out whichever inapplicable.

ASSIGNED PAY. * ENGLAND OR CANADA.	SEPARATION ALLOWANCE. * ENGLAND OR CANADA.	NAME:- WEST. John Elsworth
EFFECTIVE DATE:-	EFFECTIVE DATE:-	NUMBER:- 430708
AMOUNT:-	AMOUNT:-	PARTICULARS OF RANK OR APPOINTMENT

NAME, ADDRESS, RELATIONSHIP & AUTHORITY | 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
B02 3/1/17.	6/12/16	Sergt

UNIT AND TRANSFERS

ORIGINAL UNIT:- 3rd Pnt Bn.

DATE ACCOUNT FIRST OPENED:-

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			29th Bn
B0 45 22/2/18.	1/4/18	25/4/18	1st Res. Bn.
Transfer	1.8.18	22.8.18	C&T.D.

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

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1 35	15		

Can 2nd Pnt Bn Pnt Ofc Lon Gaz II 522 7/2/4/19.

PARTICULARS OF RENDERING NON-EFFECTIVE:- ~~Discharge in England~~ 7/1/19 L&B & Bal $522 45 Ill D & W.R.S.

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
1918	M'Ch 3rd Bal Forwd								563 11	486 50	
Apl	S Pra	45 -		AR 95 8/4/18 13th Res	9 73						
				DNAR 1739 20/3/18 "	24 33				574 08	501 50	
		45 -			34 06						
May	S. P.	46 50		DNAR 649 29/4/18 C.E.T.D.	9 73						
				" 879 10/6/18 "	9 73				601 09	516 50	
		46 50			19 46						
June	S. P.A.	45 -		✓ 86 28-5-18 "	4 87						
				✓ 387 14.6.18 ✓	48 67						
				✓ 632 27.6.18	29 20				563 35	531 50	
		45			82 74						
July	S. Pra	46 50		" 816 15.7.18 "	24 33						
		46 50		" 979 25.7.18 "	24 33				561 19	546 50	
					48 66						
Aug	Sgt Pra	46 50							607 69		
				1203 26 C.E.R.B 9/8/18	14 60						
				1380 1st C.E.R.B 27/8/18	19 47				573 62	561 50	
		46 50			34 07						
SEP	Sgt Pra	45		AR 1489. 12/9/18. 1st C.E.R.B.	14 60				618 69		
				1734 25 9/18 ✓	14 60				589 42	576 50	
		45			29 20						
Oct	—	46 50		Overcreditted pay of Rank $3.10 for July & Aug. already cr as W.Sgt. July Obs 38. 3rd. Pnr. Bn. Sept 16.		155			634 39		
				A.R. 2050 25/10/18 1st C.E.R.B.	19 47				614 90		
				A.R 1954 15/10/18 "	14 60				600 30		
		46 50			34 07	155					
Nov	Dec Jan	138 -		2329 18/11/18 ✓	14 60				788 30		
				~~An 38 730~~ AR 1656. 27/11/18 C.S.M.E.	19 47						636 50
				3084 17/12/18 1 C.E.R.B.	29 20				675 03	~~606 50~~	
		138 -			63 27					~~621 50~~	

NUMBER RANK NAME

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
									675 03	676 50	
Feb	P. P. Sgts Pay	42 00		Dy AR 3757. 9/1/19 1 CERK	14 60						
				2088 20/1/19 ✓	48 67						
Ma	✓	46 50		auth Encr on D Pay 29/1/19 £10 }					763 53		
				BP 19391. 29.1.19 Sdn }	48 67						
				2515 14/2/19 3 CERK	14 60						
				2793. 26/2/19. ✓	14 60						
				3102 15/3/19 ✓	14.60				605 79		
		88 50			157 74						
				By over credit Sgts Pay Jan 24 days							
	Int on Def Pay to 31/12/18	41 16		Feb 28 days March 31 days total 83 days @ 1½		124 50			~~481 29~~		
									522 45		
				3394. 24/3/19. 3 CERB. NE ADVISED	24.33						
				290. 11/4/19. 3 CERB NE ADVISED	24 33						
				413. 14/4/19. ~~advised~~	14.60						
				710. 24/4/19. 3 CERB NE advised	14.60				444.59		
		41 16			77 86	124.50					
				LP 6 Commom 76	522 45				7786		
					522 45						
Oct	bn 2009 D Bal on P/C		77 86								
			77 86								

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

ASSIGNED PAY.	UNIT. NAME OF	RATE OF P. AND A.	RANK.	DATE	AUTHORITY	NAME.
				Pres		Pr. Ranks.
Beneficiary	C. E.	Pay 2/-	Lieuts.	8-1-19	D.L.G. #522 d/22/4/19.	Name West,
Address		F.A. 1/-				Initials John Ellsworth,
		Messing 1/-				Bank C.B. of Commerce Lombard St.
Amount. $						
Separation Allowance issued. Yes or No.....						

DATE 1919	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialed by P.M. in every case.	INITIALS
Apr 30	Outfit alla Spec't	1218					£30-16-5	
Apl 30	Aaron a/c May Pra £30 Direct	1256		146 -		Dr 146 -		
May 5	Pra & Mess ⊙ dto rates fr 8/4/19 - 30/4/19. Auth. D.L.G. 522 d/22/4/19 No 16768		452					
	6th Bal fr Pay II $525.45							
"	6th Bal fr Pay II. Auth L.P.S. Pay II No 221		522 45					
	Bank			828 45		— 0 —		
19	Pay R		124					
22	Bank			124		— 0 —		
June 21	Pay R		120					
24	Bank			120		— 0 —		
July 11	Adv. July & Aug. Pra Bank			248				
	Pay R July & Aug		248			— 0 —		
Aug 18	Supp. L.P.S. Pay II " 339 4 d/24/4/19 $24.33 " 290 " 11/4/19 $24.30 " 413 " 14/4/19 $14.60 " 710 " 28/4/19 $14.60			77 86		Dr 77 86		
Dec 31.	Chgd. to C.E.F.	No 48	77.86.			— 0 —		

RETURNED TO CANADA L.P.C. TO 31.8.19. Wulch TRANSFER TO N.E. LEDGER

From L 10 to L 12 19/9

Advice Note. 9/9

Dr. $77 86/100

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

ASSIGNED PAY.	UNIT. NAME OF	RATE OF P. AND A.	RANK.	DATE	AUTHORITY	NAME.
Beneficiary		Pay				Name
Address		F.A.				Initials
		Messing				Bank
Amount. $						
Separation Allowance issued. Yes or No.....						

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialed by P.M. in every case.	INITIALS

AUDITOR: RM. | PAYMASTER: L

M. OR S.

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

REGT. No. | RANK Lieut | NAME (IN FULL) WEST. J. E. (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN | RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? No | DATE EFFECTIVE

TO WHOM PAID | RELATIONSHIP

ADDRESS

Saxonia Aug 13 - 23.

PARTICULARS	EFFECTIVE DATE	AUTHORITY
English h.p.	adj	31. 8. 19.

ORIGINAL UNIT C.E.F. C. E. | IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

DATE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

ASSIGNED PAY $ Nil. | DATE EFFECTIVE

PAYABLE TO 259. Madison Ave. New York City. USA. | RELATIONSHIP

ADDRESS

ANY CHANGE IN ASSIGNEE OR ADDRESS ~~Can. Bank of Commerce Victoria, B.C.~~ 30/9/19 RM

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE 13. 1. 20.

DISCHARGED | PLACE T. | DATE 2. 9. 19 | REASON R.O 2171. | AUTHORITY | IF ENTITLED TO POST DISCHARGE PAY

Certified that all payments have been made on this account for which covering authority has been received to date. Paymaster, Demobilization Pay Lieut., M.D. No. 11

MONTH	PAY AND F.A. NO. OF DAYS	PAY AND F.A. RATE	PAY AND F.A. AMOUNT $	PAY AND F.A. AMOUNT C.	OTHER CREDITS $	OTHER CREDITS C.			TOTAL CREDITS $	TOTAL CREDITS C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	DATE	COL. NO. 2 NO.	DATE	COL. NO. 3 NO.	DATE	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.			TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	BALANCE CREDIT $	C.
BALANCE FROM PREVIOUS ACCOUNT																																				
31.8.19		3.00																																		
2.9.19	2	3.00	6	-					6	-	WSG 7528						90	-									19	-			109	-	103	-		
183 days			549	-					549	-																	103	-			103	-	446	-		
											Oct 2	1590943					80	2													80		366			
											Nov 2	1583135					93	3													93		273			
											Dec 2	1581134					90	4													90		183			
											Jan 2	1604504					93	5													93		90			
											Feb 2	1609164					12	14									7786				90		/			
									549	00																					549	00				

War Service Gratuity
Service 4 years ..... months

PARTICULARS OR REMARKS

English h.p. Clear.

Other chgs 19.00 - Housing allow paid 30.9.19 recovered from date of embarkation 13.8.19.

AR 3394 24.3.19 25.0.0 24.33
3394 11.4.19 5.0.0 24.33
3413 14.4.19 3.0.0 14.60
3410 28.4.19 3.0.0 14.60
77.86

Supplementary LOC's from N.C.S. Mess Dept not previously charged.
MMD 2's - W-294 31.12.19

I certify that all payments of War Service Gratuity have been made on this account according to the period of Service shown on the M.F.W. 2595 received. Capt. Officer i/c War Service Gratuity M.D. No. 11

549 00

200M-3-19.—L. L. 58789-L. & D. 9985.
M. F. W 2.96.
1772-39-1390.

Medical Officer: Dr. H. B. Woodcock.

40

Forms I. 1237. 12

Whether U.K. or Expeditionary Force: (If latter, state which). France.

Army Form I. 1237.

Ward: 29. B.T.E.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
#C1740	430708.	Sgt.	West,	John, E.
Year	Unit.		Age.	Service.
	29 Canadians, 6 Brig. 2 Div.	B. Co.,	21.	3 yrs. 1 7/12.

Station and Date. Disease Date of Onset

2nd WESTERN GENERAL HOSPITAL SEYMOUR PARK, OLD TRAFFORD. 1 SEP 1917

9-8-15. Head. Entry over zygoma and to ear.
21-8-17.
X-ray report:
Two small bodies outside skull.
Lt. 14. Wound healed.
Complains of headache
Stock.
H B W. H B Woodcock

Transfer Class. Canadian Convalescent

17. SEP. 1917 Transferred to- Wesleyan Schools, ~~Chalton~~, Heaton Mersey.

17 SEP 1917 AUXILIARY HOSPITAL, HEATON MERSEY.

Wound healed on admission, complains of headaches almost daily. –

23-9-17. Fit for Transfer to Canadian Convalescent Hospital
J Simonds Lt.

26-9-17 Transfd to Woodcote Park Epsom.

Next of kin: Mother, Mrs. H. W. West, Mount Tolmie, Victoria, B.C. Canada. 2nd

Antitetanus Inocn.	
Units.	Date.
3.00	12.9.17

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

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

P.T.O.

Station and Date.	

War Service Badge Class "A" No.....

O.G. 19
S.G. 18
M.D. T

24-1-33

Proceedings of an Officer or Nursing Sister Struck off Strength OF THE Canadian Expeditionary Force.

O.G. 19
S.G. 18
D.A. T

1. RANK Lieutenant
2. NAME WEST John Elsworth
3. UNIT 3rd. C. E. R. B.
4. DATE STRUCK OFF STRENGTH | PLACE Vancouver Bc
5. REASON SOS 2-9-19 RO2171-19 Demobilization
6. AUTHORITY
7. PROPOSED RESIDENCE Mount Tolmie Victoria Bc

This folder should contain the following documents :—

1. Declaration Paper, M. F. W. 51, or Attestation Paper, M. F. W. 23.
2. Casualty Form, A. F. B. 103 or M. F. W. 54.
3. Medical History Sheet, M. F. B. 313 or A. F. B. 178.
4. Proceedings of Medical Boards, A. F. A. 179 or M. F. B. 227.
5. Medical Report, M. F. W. 129.
6. Dental History Sheet, M. F. B. 465.
7. Last Pay Certificate, M. F. W. 44.
8. Certificate as to Missing Documents.

1. Triplicate Declaration Paper (M.F.W. 51), or Triplicate Attestation Paper (M.F.W. 23).
2. Casualty Form (A.F.B. 103).
3. Medical History Sheet (M.F.B.313 or A.F.B.178)
4. Proceedings of Med. Board (M.F.B.227 or M.F.W.129)
5. Dental Certificate (C.A.D.C. 5009a).
6. Proceedings on Striking off Strength (M.F.W. 2591).
7. Last Pay Certificate (P. 41)
8. War Service Gratuity Form (M.F.W. 2595).
9. Sundry Documents.

Group B
Checked by No. 10 (PW)
Date 12-8-19

M. F. W. 2591.
(923) Wt. /45P 3/19 15M D.St.

Dispersal certificate

Proceedings of an Officer or Nursing Sister Struck off Strength

OF THE

Canadian Expeditionary Force.

1. RANK Lieutenant
2. NAME WEST John Ellsworth
3. UNIT 3rd C.A.M.C.
4. DATE STRUCK OFF STRENGTH | PLACE
5. REASON Sos 2-4-19 FO 217/19
6. AUTHORITY
7. PROPOSED RESIDENCE

This folder should contain the following documents :—

1. Declaration Paper, M. F. W. 51, or Attestation Paper, M. F. W. 12.
2. Casualty Form, A. F. B. 103 or M. F. W. 51.
3. Medical History Sheet, M. T. B. 313 or A. F. B. 178.
4. Proceedings of Medical Boards, A. F. A. 179 or M. F. B. 52.
5. Medical Report, M. F. W. 123.
6. Dental History Sheet, M. F. B. 103.
7. Pay Certificate, M. F. W. 44.
8. Certificate as to Missing Documents.

Forms I. 1237 / 12

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
		Capt	West	J. W

Year	Unit.	Age.	Service.
	Canadian R. E.	29	3 2/12

READING WAR HOSPITAL.

Station and Date.	Disease Influenza
	Started 31.1.19.
Reading	
13-2-19.	F.M.C. states:— "Influenza & Bronchitis"
	Cog:— a few râles in chest.
	Sputum scanty, ~~blood~~.
	up ½ day. M. Expect.
16-2-19.	up all day.
26-2-19	Transferred to Malvern Bath,
	J. H. R. Moller Capt

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

(6365) W2944/P438 2,950,000 1/18 McA & W Ltd Forms/I. 1237/13 (E 2349)

[P.T.O.

Station and Date.	

Form R. & O 6045
1295_130M-29/11/16.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at Epsom Dec 4th 1916.

No. 430708 Rank Sgt Name West J. E.

Local Unit ——— Overseas Unit 29th Bttn Age 21

Examination held at McH Epsom

DISABILITY.
Overseas—Local.
(scratch one out)

G.S.W. Rt. TEMPLE.

PRESENT CONDITION.

DT
N.Y.D

BOARD RECOMMENDS:—

1. Fit for Duty.....
2. Fit for duty after.....weeks' physical training.
3. Fit for Temporary Base Duty.....weeks.
4. Fit for Permanent Base Duty .....
5. Discharge .....

Signatures:—

Members { .....President.
.....
.....

APPROVED

Dated at.....1916. .....

For A.D.M.S.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at Tyneham Park 1917

No. 450708 Rank Pte Name McCarthy J.

Local Unit ..... Overseas Unit 2nd Div Age 21

Examination held at McH Tyneham

DISABILITY.
Overseas—Local.
(permanent and)

G.S.W. RIGHT ARM

PRESENT CONDITION.

BOARD RECOMMENDS:—

1. Fit for Duty .....

2. Fit for duty after ..... weeks physical training.

3. Fit for Temporary Base Duty ..... weeks.

4. Fit for Permanent Base Duty .....

5. Discharge .....

Signatures:—

..... President.

..... } Members

.....

APPROVED

Dated at ..... 1918.

.....

For A.D.M.S.

Original

THIS FORM WILL BE USED FOR ALL RANKS

MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" issued by the B.P.C. and instructions issued by Militia H.Q., Ottawa, will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of Sections 1 to 17 of this Form and will obtain the signature of the invalid to the "Statement," page 3. The President of the Board of Medical Officers is responsible for the proper completion of sections reserved for recording the "Opinion of the Medical Board."
3. In answering the questions, Medical Officers will carefully obtain and record the invalid's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the invalid concerned, from witnesses, or from documents, Regimental or otherwise.
4. Special care is required in answering question 9. Read the questions carefully. All questions must be answered.
5. If space provided under any section is insufficient add another sheet. Such sheets must be initialled by the Medical Board.
6. A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board."
7. Under no circumstances may information other than that in sections 7, 8, 9 and 10 be communicated to the invalid, directly or indirectly.
8. The nomenclature of diseases must be followed, if possible, as described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London (1915), by Messrs. Harrison & Sons.

STATION Witley DATE 17-7-19.

1. 1 (a) Unit C.E. (b) Regimental No. — (c) Rank Lieut

(d) Surname WEST (e) Christian name John Ellsworth

(f) Home address Mount Tolmie. Victoria. BC.

(g) Next of Kin Mrs. H.W. West (h) Relationship Mother

(i) Address of Next of Kin Mount Tolmie Victoria BC

2. Age last birthday 22 Date of birth 19th July 1896

3. ~~Enlistment, or~~ Appointment (if an Officer) (a) Place Victoria (b) Date ~~19/10/14~~ 18/3/15.

4. Personal description:

(a) Height 5' 10" (b) Weight 160 lbs (stripped) (c) Complexion fair

(d) Colour of hair Dark (e) Colour of eyes Blue (f) Identification marks, Scars, etc. a few small scars upper of right ear. One vacc. left arm

5. Former trade or occupation Draftsman

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).	Years	Days
	4	112.

	Periods From	Periods To
Canada 48th Battn 88th Battn	18. 3. 15.	1-7-15
England 48th Battn Can Eng.	10-7-15	8-3-16
France or other theatres of War 48th Battn 29th Bat	9-3-16.	11-9-17

7. Original disease, or injury ~~Gunshot head (left temporal region)~~ LACERATION MUSCLES SCALP. - W.P.9.

(a) Date of origin 21-8-17 (b) Place of origin France

(c) Cause Shrapnel

M. F. B. 227.

400M.—11-18.
1773-39-117.

8. Present disability— (Here state the exact nature of the disability resulting from the disabling conditions: e.g. (*a*) Weakness—slight, moderate, marked, etc; (*b*) Loss, complete or partial, of an organ or member, or of its functions; (*c*) Necessity for rest of the body, or of some of its parts, for therapeutic reasons; (*d*) Any other restrictions in choice of occupation.)

Small foreign bodies beneath scalp right temporal region

9. Present condition—(*a*) (Before completing this section the invalid should be stripped, and subjected to a thorough physical examination. Important, to be a full description of the present disabling condition, or conditions only. "History" must be recorded in Section 10. Describe all abnormalities, anatomical and functional, contributing to present disability; objective findings to be stated first, then subjective findings.)

Objective signs: two small foreign bodies beneath scalp just infront of ~~the~~ right ear. One size of pea easily palpable and slightly tender to touch, a smaller one half the size of a pea just infront of this. palpable and tender to touch much more than larger one.

Subjective symptoms: On moderate exertion he has ~~for~~ temporal headaches, at times he has aching pain down the right side of face.

(*b*) Has the invalid now any affection of the following systems, not described in Section 9 (*a*) above? (Answer Yes or No.—if the answer to any part is Yes, give a brief description of the present condition.)

Nervous System: No — Cardio-Vascular System: No (If pulse rate is abnormal, B. P. will be taken.) — Genito-Urinary System: No (Albumen and Sugar will be excluded.)

Special Senses: No — Respiratory System: No — Integumentary System: No

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

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

10. (*a*) History (of the condition referred to in Section 9 (*a*).) States, he was wounded slightly in scalp 21-8-17. (2 Wks), and was sent to England to 11 gen Hosp. Several pieces of shrapnel were removed but the two present ones could not be removed at that time, healed up in about three months. At time of wound was unconscious for four days.

mths. 2nd Western gen. 11-9-17. b.s.w. Head 16 days
M.C.H. Epsom. 26-9-17. S wd. Scalp. 25 days

Condition remains about the same.

10.—(b) (Here give a complete history, as obtained from invalid, with dates of origin, of any affection from which the invalid, has suffered either prior to or since enlistment, and not included in Section 10 (a).)

Measles - child - recovered.
(10.) Pleurisy - 1916 - recovered.
(10.) Myalgia 1916. - recovered.

(c) (Here give a description of wounds, scars and deformities. a few small scars right temporal region G.S.W. the vacc. mark left arm.

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

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

not applicable

12. Was the disability caused, or aggravated; (a) by intemperance, or improper conduct; or (b) by unreasonable refusal to accept treatment? (a) no (b) no.

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

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

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

Ind Western Gen. Manchester - 11-9-17
C.C.H. Epsom. 26-9-17.

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit?
(If the answer is "yes" state nature of treatment required and probable duration)

no

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

17. Recommendations

W. Grayden Capt CAMC
Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

(Sections 7, 8, 9 and 10 are to be read to the invalid and either "satisfied" or "not satisfied" struck out).

I, the undersigned John Elsworth West have heard the description of my disability and present condition read, and am satisfied ~~(or not satisfied)~~ with it. (If dissatisfied, statement should follow.)

I complain in addition of

no

John E. West Lieut. Rank.
Signature of invalid examined.

628/6 W 119

OPINION OF THE MEDICAL BOARD

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

yes we concur. Except in section 13 we recommend re examination in six months as after S.B.s are removed disability should disappear

19. Is the invalid fit for

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

20. It is certified that the invalid

(a) ~~Does require treatment.~~ (Give the nature of the condition and of the treatment required and its probable duration.)

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

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

R.T.C. auth. ag I A/8-1-15-5 of 4-1-19

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

President.

Members

PLACE WITLEY CAMP, SURREY,

DATE 17/7/1919

TO BE COMPLETED WHEN TREATMENT IS REFUSED

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

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

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

President.

PLACE.....

DATE.....

Members

I concur in the findings of the Board of Medical Officers here recorded.
Captain, D.A.D.M.S. for D.M.S. Canadians.

APPROVED BY

Assistant Director of Medical Services.

DATE.....

APPROVED BY

Director-General of Medical Services.

DATE.....

NOT AT West Sch Cobourg

ORIGINAL

430708

Army Form B. 178.

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

MEDICAL HISTORY of

Surname West *Christian Name* J. R.

TABLE I.—GENERAL TABLE.

17 SEP 1917

Birthplace ... Parish _____ County _____

Examined ... ... on _____ day of March 1915.
at VICTORIA B.C.

Declared Age ... ... 19 years 9 mos. days.

Trade or Occupation ... _____

Height ... ... _____ feet, _____ inches.

Weight ... ... _____ lbs.

Chest Measurement { Girth when fully Expanded. _____ inches.
Range of Expansion _____ inches.

Physical Development ... _____

Vaccination Marks { Arm ... Right _____ Left _____
Number _____

When Vaccinated ... april 1915

Vision ... ... R.E.—V= _____
L.E.—V= _____

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

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

Approved by (*Signature*) Jno A Bruce
(*Rank*) Captain Lieut.
Medical Officer

CANADIAN

Enlisted ... ... at VICTORIA B.C.
on 18th day of March 1915.

	Corps.	Regtl. No.
Joined on Enlistment ...	48th BATTALION, C.E.F.	430708.
Transferred to		

Became non-effective by _____

on _____ day of _____ 191 .

(*Signature*) _____

(*Rank*) _____

The Morgan Reeve Co. Ltd., Printers, 20/22, Goldsmith St., Kingsway, W.C.
(25289) Wt.W13871/604. 300m. 4/15.

Forms B. 178.

P.T.O.

24.11.17

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Table II.—Only for Admissions to Hospital or to the Sick List in th

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks bearin[illegible]n th use. In [illegible]es o subsequent progr given in the spec
	Day	Month	Year	Day	Month	Year			
12 C.C. Stn	1	9	16	13	9	16	Myalgia	13	To duty.
2nd WESTERN GENERAL HOSPITAL, MANCHESTER.	11	9	17.	26	9	17.	G.S.W. Head.	16.	Evac: Cam Epsom.
Mch Epsom.	26	9	17	17	12	17	S.W.d. scalp (flesh)	80	Deta

r to the Sick List in the case of Warrant Officers treated in quarters.

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
13	To duty.	A152. A155.
16.	Trans: Can: Conv: Staf: Woodcote Park Epsom.	E. R. Freed CAPT. R.A.M.C. (T.F.) FOR OFFICER COMMANDING, 2nd WESTERN GENERAL HOSPITAL
80	Details gone ahead on a Th. A.S Cat D I	A Stewart CAPT. C.A.M. "B" DIVISION.

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
14-7-15	T/2 Jno. A. Briggs Capt.
23-7-15	
31.12.17	
WITLEY CAMP, SURREY. 1919	
17/7.	G.S.W. Scalp. A. [illegible]

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