

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

Attestation Papers.....

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet.....

Compulsory Stoppages.....

Casualty Forms.....

Proceedings on discharge.....

Corps History Sheet.....

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

Parchment Certificate.....

Medical Report for Invalids.....

Medical History Sheet.....

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet.....

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate.....

DISCHARGE DOCUMENTS

Name *Code, Arthur Graham*

Regt. No. *5065* Rank *Sapper*

Corps *Canadian Engineers*

Medically unfit.

R. O. No.

H. Q. No.

27110



23-17
15-19
11-20

ATTESTATION PAPER.

No. 5065

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

Folio.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name?..... Arthur Graham Code.
2. In what Town, Township or Parish, and in what Country were you born?..... Innisville, Lanark Co. Ontario Can
3. What is the name of your next-of-kin?..... John Code
4. What is the address of your next-of-kin?..... Perth Ont.
5. What is the date of your birth?..... Aug 27 1888
6. What is your Trade or Calling?..... Elec Engineer
7. Are you married?..... No
8. Are you willing to be vaccinated or re-vaccinated?..... Yes
9. Do you now belong to the Active Militia?..... No
10. Have you ever served in any Military Force?.. No
If so, state particulars of former Service.
11. Do you understand the nature and terms of your engagement?..... Yes
12. Are you willing to be attested to serve in the) CANADIAN OVER-SEAS EXPEDITIONARY FORCE?} Yes

..... (Signature of Man).
W. A. Evans (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Arthur Graham Code, 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.

Date Sept 23rd 1914. (Signature of Recruit)
..... (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Arthur Graham Code, 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.

Date Sept 23rd 1914. (Signature of Recruit)
..... (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 Valcartier this 23rd day of Sept 1914.

..... (Signature of Justice)

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

..... (Approving Officer)

Description of Arthur G. Code on Enlistment.

Apparent Age 26 years 1 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 10 1/2 ins.

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

Complexion Medium

Eyes Grey

Hair Dark

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

Scar on Back of hand between Thumb & forefinger

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 Sept 17th 1914.

Place Valcartier

W. J. Dumas
Major A.M.C. 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.

Arthur G. Code 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. J. Dumas (Signature of Officer)

Date Sept 23 1914.

Major T.E.

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

5065 Sapper	
THIS IS TO CERTIFY that No. _____ (Rank) _____	
Name (in full) <u>Cole, Arthur Graham</u> enlisted in	
the <u>1st Field Company, Canadian Engineers</u>	
CANADIAN EXPEDITIONARY FORCE at <u>Valcartier, P.Q.</u> on the <u>23rd</u>	
day of <u>September</u> <u>14.</u> 19	
HE served in <u>Canada, England, France and Belgium</u>	
and is now discharged from the service by reason of <u>his having been found medically</u>	
Demobilization.	
Medical Unfitness.	
THE DESCRIPTION OF THIS SOLDIER on the DATE below is as follows:	
Age <u>25 Years 10 Months</u>	Marks or Scars _____
Height <u>5 Feet 11 1/2 Inches</u>	<u>Scar right hand. Artificial</u>
Complexion <u>Dark</u>	<u>right eye.</u>
Eyes <u>Grey</u>	
Hair <u>Dark</u>	
Signature of Soldier _____	
Lieutenant.	
Date of Discharge <u>October 17th, 1915.</u>	Issuing Officer _____
<u>Quebec, P.Q.</u>	<u>for Director of Records.</u>
<u>Ottawa, Ontario</u>	<u>23rd</u> <u>January</u> <u>20.</u>
<u>Headquarters.</u>	Rank
<u>649-C-129.</u>	Date _____ 19

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.

DISCHARGE CERTIFICATE

5065

Sapper

Code, Arthur Graham

1st Field Company, Canadian Engineers.

608 King St., East, Hamilton, Ont.

Very Good

Electrical Engineer

Nil

Gunshot wound right eye 23-4-15.

Ottawa, Ontario

23rd

January

20.

Lieutenant.

for Director of Records.

Attestation Paper removed and sent to Sergeant MacIntosh.

.....5-10-17.....

(copy made)

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 *Arthur Graham* 2. Surname *Code*
3. Rank *Sapper* 4. Original Unit *#1 Co. C.E.* 5. Reg. No. *5065*
6. Address, in full, to which future payments of gratuity are to be forwarded
333 Davenport Road
Toronto Ontario
7. Date of enlistment in the C.E.F. *Aug. 18/14*
8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge *no applicable*
9. Relationship of such dependent *no applicable*
10. Present address, in full, of such dependent *no applicable*
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:—
1st. C.E. Sept 1914
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? *no*
14. Were you on active service only in Canada or the United States? If so, give particulars of units 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 *enlisted in Aug 18/14*
went to France with 1st Contingent in Feb 1915
wounded at Ypres April 22/15 - discharged July 20/15
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*

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*\$100.00 -*
20. Have you been issued with a War Service Badge? If so, what class? ...*Active Service*
21. Have you, during the present war, served in the Imperial Forces?*no*
22. Are you entitled to received, 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
.....*July 20/15* (b) Reason for discharge*loss of right eye*
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*with #1 Co. Caval Engineers*
27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment?*no*
- (b) If so, are you in receipt of full pay and allowances from that Department?*no*

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

Signature of Applicant: *A. B. Leode*

Place of Residence: *333 Davenport Rd. Toronto*

Declared before me at: *Toronto*

This *4th* day of *April* 19*19*

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

Charles H. Thompson

POST DISCHARGE PAY.

Date paid	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
<i>No Record P.D.P. Toronto</i>				

Certified Correct. *J. S. G. - 5 - 1919*

District Paymaster. CAPTAIN C.A.P.C., C.E.F.
for PAYMASTER, MILITARY DISTRICT No. 2

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	5065	Sp.	Code	Arthur
Year	Unit.		Age.	Service.
1915	No 1. Co. C. E.		25	
Station and Date.	Disease			
June 30, 15 Shorncliffe.	Loss of eye Struck by shrapnel in right eye; a. piece of steel lodged at base of orbit. Steel removed May 2, at #14 Gen. Hosp. Boulogne. Eye enucleated May 10, 1915 Severe secondary hemorrhage controlled by a third operation. Bagthorpe Military Hosp. Nottingham - Discharged June 28. General health good Right socket still discharging slightly. Left eye healthy - slightly myopic			
ORIGINAL.		EXHIBIT		
		PRES		
		BOARD.		

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

Station
and Date.

MEDICAL CASE SHEET

Casualty Form—Active Service.

Regiment or Corps 1st Co. Can. Engrs.Regimental No. 5065 Rank Spr. Name CODE, A. GEnlisted (a) 23/9/14 Terms of Service (a) The War Service reckons from (a) 23/9/14Date of promotion to } Date of appointment } Numerical position on }
present rank } to lance rank } 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				
<u>30/6/15</u>		<u>Reported from C.E.F.</u> <u>France</u>	<u>Shorncliffe</u>	<u>30/6/15</u>	
Discharged;- Medically Unfit for further active service. K.R. & O. 392(XVI). Verified 6-5-15. A. J. Hughes. Lieut-Colonel O.C. Canadian Engineers Training Depot					

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

Casualty Form—Active Service.

Regiment or Corps

1st Field Company Canadian Engineers.

Regimental No. 5065

Rank

Sapper.

Name

Code, Arthur Graham.

Enlisted (a) 23/9/14

Terms of Service (a)

1 year or duration

Service reckons from (a)

23/9/14

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				

24/4	No 14 Gen G. S. H. Ege	unit	23/4/15	W 3024	
17/5/15	"	Transferred to 10.8 St David	16/5/15	"	
"	Rec Office	Admitted to England Nottingham	17/5/15	21741	
10 ⁶ /15		Adm. to mil. H. H. Bagthorpe	16 ⁵ /15	lea.	Rpt. No 93
12 ⁷ /15	oc. C. G. J. D.	Disch. M. V. joined Depot awaiting disch. Thorncliffe	29 ⁶ /15	Pat.;	D.O. No 38.
13 ⁷ /15	Do.	Disch. M. V. sailed for Canada.	9 ⁷ /15	Pat.;	D.O. No 38.
	Disch	SOS med Unfit Quebec	17.10.15	Auth 649-C-129	
	Appt	raa 9(3) 13-1-20-			

CAPT.
OFFICER IN RECORDS
CANADIAN SECTION G. H. Q.(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.

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				

Rank and Name

Code Arthur Graham

Regimental No.

5065

Name and Address of Next-of-kin

Unit

Div. Engineers (1st Field Co) John Code (Father)

Date of enlistment

Sept 23rd 1914

Perth, Ontario

Place of birth

Canada

Canada

Married (Yes or No)

No

Date and place of discharge

If in Permanent Force

Reason for discharge

Character on discharge

Promotions or appointments

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				
		Embarked.			
29 th 11	W.O. E. Base	Wounded. Rpd. from Base. Wad. Eye. Adm. 1st Gen. Hpl. Boulogne	France	23 rd 11	Rpt. #4. Sail bas. Sheet #49.
6 th 11	A.D.E.	Struck off strength. Invalided to England	England	17 th 11	Part II DO Part II 38.
10 th 11	1st D.E.	Adm. Mil. Hpl. Bagthorpe.	Do	16 th 11	Rept. No. 73.
22-7-16	1st D.E.	Dis. from Mil. Hosp. Nottingham	Do	8-6-15	Cap. Hist. 220-7-16
13 th 11		Disch. M.V. sailed for Canada.		9 th 11	Hom. Roll. 9 DO Part II 38
12/4/15.	OC/C.P.D.	Joined Depot awaiting Discharge Shorncliffe		29/6/15	DO Part II #38.
6.9.15	P.G.B.	Submitted for disposition as to Pensions		6 th 15	Filed in Envelope.

En No 2107

Cry

6

4

M.H. Cow. PR

[illegible]

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

33576/670

E. J. B.

Name Code, Arthur Graham
Surname Christian Name

3371-A-1

Regimental Number 5065 Rank Spr.

Address (in full) Box 404,
Niagara Falls South,
Ont.

Unit Div. Eng.

Original Unit

District where paid Ottawa

Date of Discharge 20-7-15

P. D. P. Filing Number 16C24.

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

L. L. 22573—M. & D. 8009.

Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Over- payments to be Recovered	Total Amount Paid	
	Cheque No. A	Date	Amount 30 days	Cheque No. B	Date	Amount 30 days	Cheque No. C	Date	Amount 31 days			
100/10	5181	25/10/17	33.00	5066	26/11/17	33.00	4784	20/12/17	34/10		100/10	

M. F. W. 127.
60M-6 17.
1772 89-1140.

Remarks:

2407 rautz
10/3/19

Dec'n No	33576/670	W. S. G.	File No	3371/a/4
Award	122	days at \$	70.00	per day \$
S. A.		months at \$		per mo. \$
Less P. D. P. Credited				\$ 100.10
Less further debit balance				\$ nil
Net due paid as below				\$ 179.90
TO SOLDIER				
O	Ag. No	1	2	OU
1	5106	46986	109	90
2	38691	536612	70	00
3				
4				
5				
6				
Total				109.90

23/8/19

29/10/19

GEN'L AUDITOR
Posting checked by
Date 22/10/19

Code A G
~~333 Waverport Road~~
~~Laytons Creek~~
152 James St. S.
Hamilton Ont.

New add

17 Wentworth St. S. R 20 109
Hamilton Ont. 4-11-19

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

120

To Whom

Address

Rate

Code John

Perth Perth

Out -

1800

By Whom Assigned

Regtl. No.

Rank

Corps

Code A. G.

5065

Sp.

1st 7th Co. C.E.

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.		5603	36 -	
Dec.		7-2173	18 -	
Jan.	1915	E3376	18	
Feb.		D5294	18 -	
March		B6281	18	
Apl.		9764	18	
May		J2660	18	
June		93615	18	
July		10493	18	
Aug.		7191	18	
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

Discharged 4th Nov 1915
A.P. July paid at Quebec. File 649-B-129
Issue Cheque for July -

NAME CODE Arthur Graham

Regimental No.

5065

Sapper

Name and address of next-of-kin

Unit

Div. Engineers

(1st Field Coy)

John Code

(Father)

Date of enlistment

Sept. 23rd 1914.

Perth,

Place of

Birth

Canada

Ontario, Canada,

Married (yes or no)

No

Date and place discharged

9/7/15

Amount of pay assigned monthly \$

18⁰⁰

Reason for discharge

to Canada

To whom payable

Next of kin

Character on discharge

Mr. John. Code.

Perth Ontario Canada.

Date		PAY		Field Allowance		Other Credits		Total Credits		Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date					
22 ⁹ / ₁₄	31 ¹⁰ / ₁₄	40	1.00	40.	40	.10	4.		44.			20.	18.		38.	
1 ¹¹ / ₁₄	30 ¹¹ / ₁₄	30	1.00	30.	30	.10	3.	6.	39.			20.	18.		38.	
1 ¹² / ₁₄	31 ¹² / ₁₄	31	1.00	31.	31	.10	3.10	1.	35.10			5.	18.		23.	
1 ¹ / ₁₅	31 ¹ / ₁₅	31	1.00	31.	31	.10	3.10	12.10	46.20			12.15	18.		30.15	
1 ² / ₁₅	28 ² / ₁₅	28	"	28.	28	"	2.80	16.05	46.85			5.	18.		23.	
1 ³ / ₁₅	31 ³ / ₁₅	31	"	31.	31	"	3.10	23.85	57.95			8.	18.		26.	
1 ⁴ / ₁₅	30 ⁴ / ₁₅	30	"	30.	30	"	3.	31.95	64.95			3.	18.		21.	
1 ⁵ / ₁₅	31 ⁵ / ₁₅	31	"	31.	31	"	3.10	43.95	78.05				18.		18.	Transf'd to C.E.I.D. 31-5-15.
1/6/15	30/6/15	30	"	30	30	"	3	60.05	93.05			40	18		58	Assign. stopped 1/7/15
July 1	29	29	"	29	29	"	2.90	35.05	44.95			43			43	left for discharge in Canada
		291		291			1.95	550.10				156.15	162		318.15	Part II 38 8/7/15

NE Branch ind 16

rech

695 ce Bal.

611 611

Bal ind Transd to
"Can. Liability Disch'ge"

[illegible]

Bode Spr A. 4

P.C. 52/2692 18-10-15

L. H. Job 82314. M. & D. 5786-25-6-15-5000

Date		PAY			Field Allowance			Other Credits		Total Credits	Voucher		Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount				No.	Date					
	9-7-15							1	90								L. P. C.
10-7-15	17-7-15	8	100	8 00	8	10	80		<u>10 70</u>				10 70			<u>10 70</u>	D.O. Due Pd
18-7-15	17-10-15	92	100	92 00	4	10	40	^{Sub} 67 50	159 90				141 90	18 00		<u>159 90</u>	d.O. Due Pd Med. Board
22/7/15.	17/10/15				88.	10.	x 8.80		8 80	A 255	25/1/16		8 80 ✓			<u>8 80</u>	X Underpd Due F.A.

Pensioned

granted 18/10/15 P.C. 52/2692

2 July 15 A P 18

WARNING.—If you lose this Certificate a duplicate cannot be issued.

Certificate of discharge of No. 5065 (Rank) Sapper.
 (Name) Code, Arthur Graham.
 (Regiment) First Field Company, Canadian Engineers.
 who was enlisted at Valcartier, P.Q.
 on the 23rd Sept, 1914. 19

He is discharged in consequence of being medically
unfit for further active service,
K.R. & O. Para 392, Sec. XVI. 392. Sect. XVI
 after serving 3 years 392 days with the Colours, and
3 years 392 days in the Army Reserve.

(Place) Shorncliffe, Kent. Signature of A. J. Hughes Lt. Col
 (Date) July, 1915. Officer O.C., C.E.T.D.

*Description of the above-named man on _____ when he
 left the colours.

Age 25 yrs. 10 mos. Marks or Scars, whether on face
 or other parts of body.
 Height 5ft. 11½ in. Scar on right Hand,
 Complexion Dark.
 Eyes Grey
 Hair Dark. A. J. Hughes
Major
O. C. Discharge Depot,

* Should agree with the description on Character Certificate, Army Form B. 2067.

N.B.—Any person finding this Certificate is requested to forward it, in an unstamped envelope, to the Secretary, War Office, London, S.W.

Recruiting Agents.

The following is an extract from the Recruiting Regulations, 1912:—

“Any man, whether Soldier or Civilian, who brings a Recruit to
“a Recruiter, or to a Military Barrack, is a Recruiting Agent,
“and it is not necessary that he should have been formally
“appointed as such.”

The effect of this Regulation is that anyone, whether ex-Soldier or Civilian, bringing a Recruit under the above Regulations is entitled to the reward if the Recruit is passed into the Service.

Recruiting Rewards will not be paid for—

- (a) Boys under 17 years of age.
- (b) Re-enlisted Pensioners.
- (c) Recruits for the Armourer Section and the Machinery Artificer Section of the Army Ordnance Corps.

(d) Any Non-Commissioned Officer or Man of the Special Reserve who enlists into the Regular Army.

Recruiting Rewards will be paid to *Recruiting Agents* for each Recruit raised and finally approved for the Regular Army or the Special Reserve, at the following rates, viz. :—

5s. to 2s. 6d. Regular Army.

1s. 6d. Special Reserve.

Leaflets showing the conditions and advantages of the Army or Special Reserve are supplied gratis at every Post Office.

Men wishing to enlist should apply personally or by letter to the Officer Commanding the Regimental Dépôt nearest to their homes, or to any Serjeant Instructor of the Territorial Force or other Recruiter.

Men who have served in the Regular Army for 3 years or more are eligible under certain conditions for enlistment into the Special Reserve up to the age of 38.

Surname

Christian Name or Names

Reg. No.

Code,

A. G.

5065.

Rank

Unit

Co.

Troop

Batty.

Spr.

1st Can. Engineers1st F. Co.

Hospital

Date of Admission

Diagnosis

(1) Lost eye.

G. S. W. eye. 23.4.15.

Later Diagnosis (if changed)

(2)

(3)

Additional Diagnoses, if more than one state present

DISPOSITION (underline which)

Discharged to Duty

Permanently unfit.

Date

28.6.15.

Transferred to

Mil. Hosp. Bagthorpe

Hosp.

17.5.15

Hosp.

Hosp.

Hosp.

Discharged Invalid, England

Returned to Canada

Died

Reported from the base wounded

Dis. 28.6.15.

REMARKS

Ch. 30.4.15 # 41

Ch. 10.6.15 # 73

W.R. 4.6. + 11.6.15

" 19.6.15

W.H.R. 25.6.15

W.H.R. 2.7.15

C.L. 12.1.16. 195.1

" 22.4.16. 1384.

A.M.D. 2 Dept.

Beh. of D.G.M.S. O M.F.C. London

P.T.O.

EPITOME OF HOSPITAL TREATMENT.

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

SURNAME.

Code

CARD NO.

Y

CHRISTIAN NAMES

Arthur. Graham.

S.O.S. dis. FOLL.

20-4-15-5

REGL. No.

5065

RANK

Sapper.

UNIT

1st. Div. Eng.

FORMER CORPS

Nil

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Code, John.

RELATIONSHIP TO SOLDIER

Not stated

ADDRESS

Perth. Ont.

COUNTRY OF BIRTH

Canada. Innisvale, Ont.

DATE

Aug 27th 1888.

PLACE OF ATTESTATION

Valcartier P.Q.

DATE

Sept 23rd 1914.

L. L. 6945. M. & D. 6904.

M. F. W. 22. 100M. -8-16. H. Q. 1773-39-330. MW.

O/S 4-10-14.

From Quebeper A.S. "Zealand" 4/10/14.

MARRIED

SINGLE

Yes

WIDOWER

TRADE OR CALLING

Elec.
Engineer.

RELIGION

Church of England

DESCRIPTION.

APPARENT AGE

26

YEARS

1

MONTHS

HEIGHT

5

FEET

10 1/2

INCHES

CHEST MEASUREMENT

38

INCHES

EXPANSION

3

INCHES

COMPLEXION

Medium

EYES

Grey

HAIR

Dark.

DISTINGUISHING MARKS

Scar on back of hand.
between thumb & finger.

MEDICAL EXAMINATION.

PLACE

Valcartier P.Q.

DATE

Sept 1st 1914.

Present Address. Not stated.

NAME

Code, Arthur Graham

H. Q. FILE No. 649-

REGT'L. No.

5065

RANK AND CORPS

CABLE

Sapper

Liv. Engineers

NATURE OF CASUALTY

No.

DATE

NO.

1526

x FOLL.

C 516

30/4/15

Wounded

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

✓ 41	Rep. from Base		G.S.W. eye seen as per
✓ 73	Mil. Hosp.	16/5/15	Wounded. 14 R. 195(1)
B87	Bagthorpe Cott.		Lost eye.
	Mil. Bagthorpe. Nottingham	28-6-15	G.S.W. Eye.
	Disch.		

LEDGER No. _____ SERIAL No. _____

REG. No. 5065 NAME Code A. G.

RANK Mr. CORPS C.E. AGE 27 SERVICE _____

C HOSPITALS DATE OF ADMISSION

1 Perth Ont.

2 _____

3 _____

DIAGNOSIS Lon. Rt. Eye

TRANSFERRED TO Elmhurst Kingston 3-10-15

DISPOSITION 6-10-15 CATEGORY _____

REMARKS:

This image shows a single page of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There is no handwriting or printed text on the page.

Number *5065* Rank *Private*

Surname *Cade*

Christian Names *Arthur Graham*

Unit *C E* Theatre of War *France*

Dates of Service *23-4-15*

Remarks *My 90 John Cade Path Out*

Latest Address *608 King St E*

Roll No. *B Page 14 39*

*89 James St. E.
Brockville*

Unit.

DESP. AUG 11 1923
REGN. NO. 5273

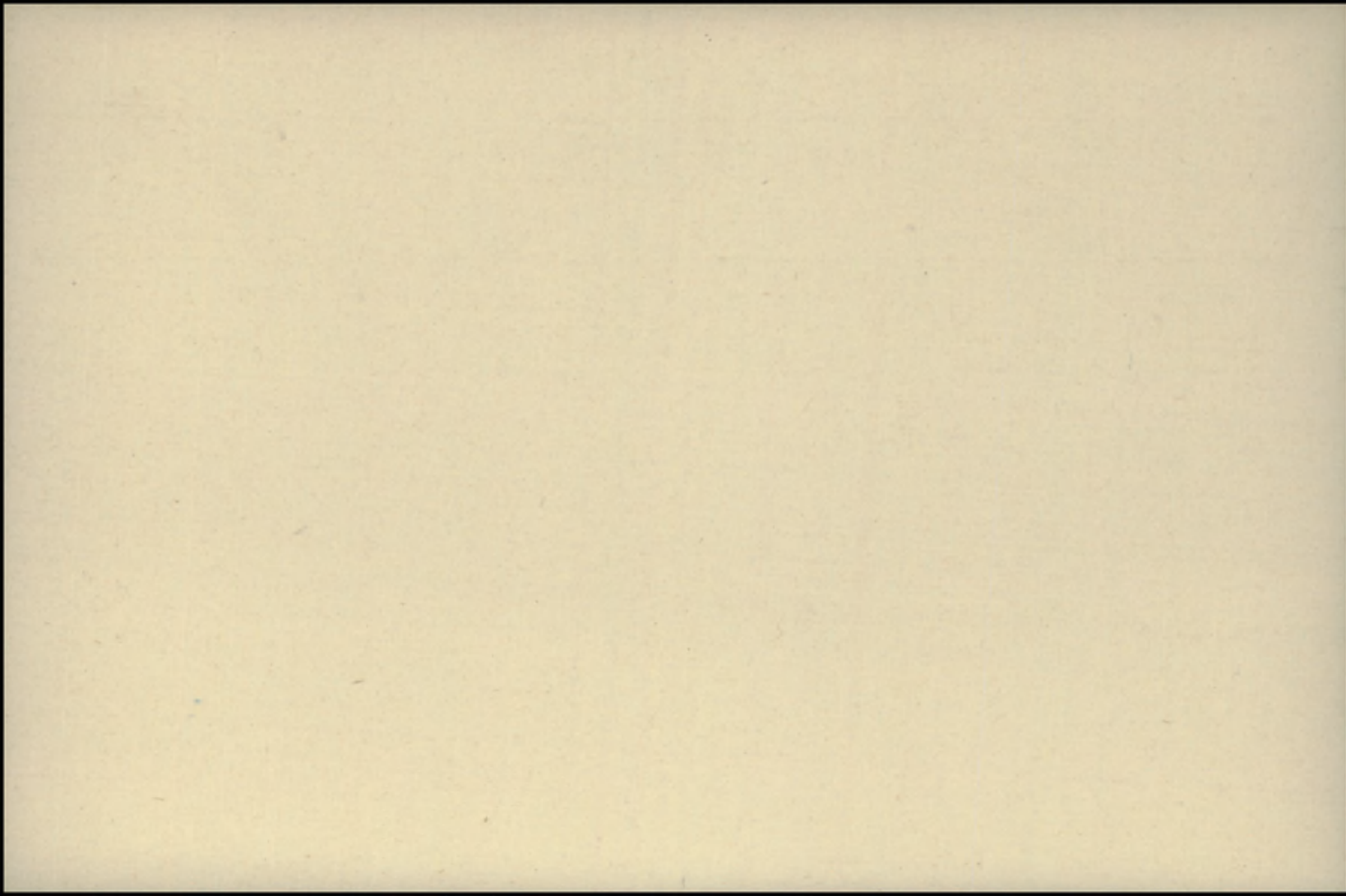
Name **Code, A. G.** Rank **Sapper** Reg. No. **5065**

Unit **1st Field Company, Divisional Engineers**

Next of Kin **Canada.**

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
30/4/15	Reptd from Base		Wounded.	41	30/4/15	
16/5/15	Mil. Hosp Bagthorpe	Notts	Lost Eye	73		
23-4	Corrected date of casualty referred to on					
	Daily brs. Sht. No. 441 diagnosis G.B.W. eye.				195.	
28-6	Discharged		" " "	B87		

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



No. 5065.

RANK

Spr. (C.E.T. Depot.)

NAME

Cde Q.

C.

T. O. S.

UNIT

Discharge Depot (Quebec.)

M. D. 65.

PROMOTIONS, TRANSFERS, DISCHARGES, ETC.

PAID
FROMPAID
TOSIG.
OR
REC'T

PARTICULARS

AUTHORITY

1915
July 10.1915
Oct. 17.

✓



No. 5065.

RANK

Pl

NAME

Coads, A.

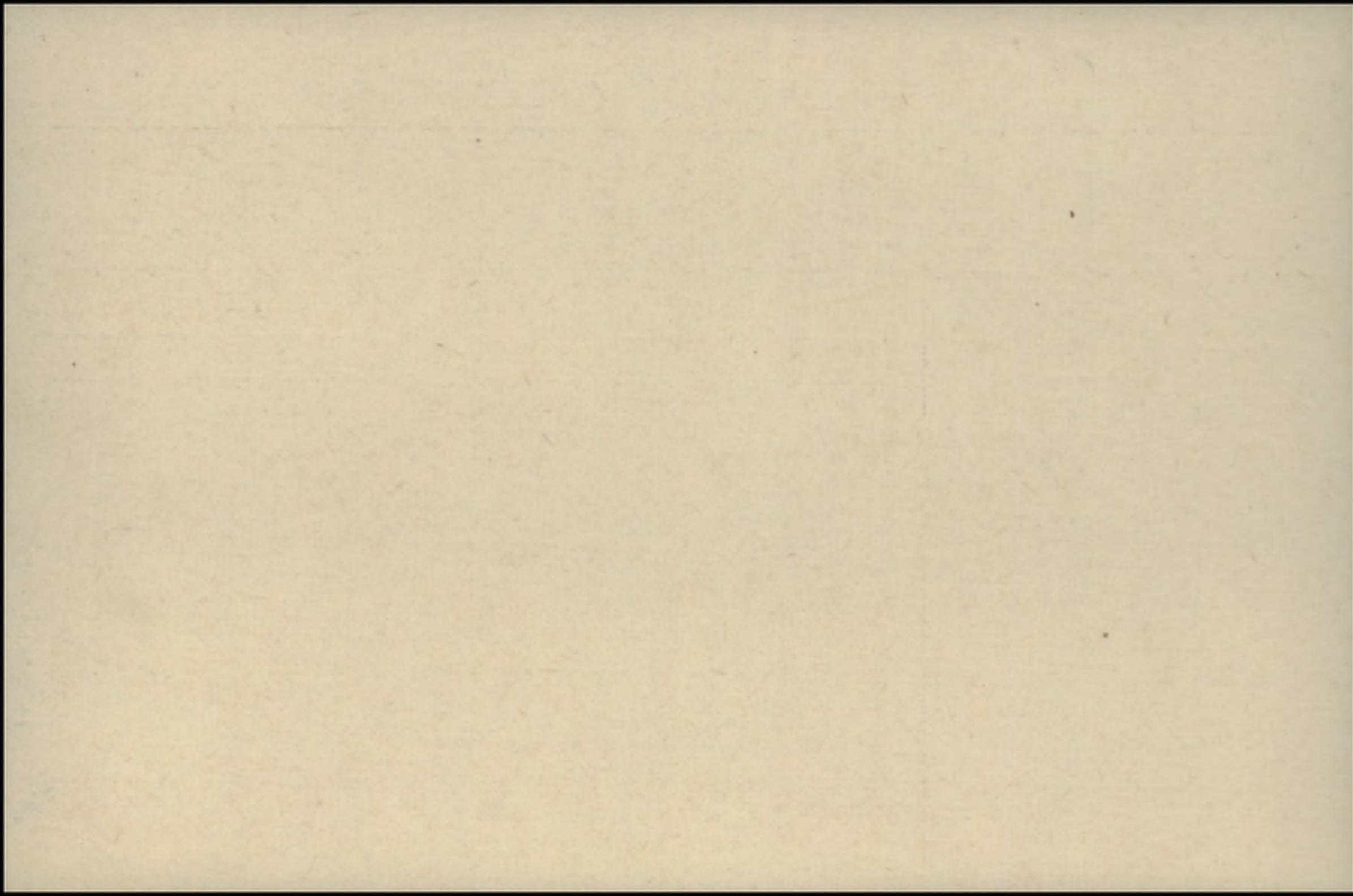
T. O. S.

UNIT

Casualties.

M. D. H. O.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915. July. 22.	1915. Oct. 17.	n.	trans. G. E. S. D.	



5065 Code, Arthur Graham
Canadian Engineers
712

W

JA10398

SPECIAL

59034 Ballard H.W.

Casualties

- 1 Proceedings of a Medical Board
- 1 Attestation Papers
- 1 Casualty Form
- 1 Field Conduct Sheet
- 1 Proceedings of a Medical Board
- 4 Confidential Information
- 2 Medical History Sheet
- 1 Discharge Document

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 in R.O. London
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 Chelsea Number.

Army Form B. 268.

Proceedings on Discharge.

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

No. 5065	Army Rank Sapper.
Name Code, Arthur Graham. (The name must agree strictly with that on enlistment, unless changed subsequently by authority.)	
Corps First Field Company, Canadian Engineers.	
Battalion, Battery, Company, Depot, &c. Canadian Engineers' Training Depot. (If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)	
Date of discharge 17.10.15	
Place of discharge QUEBEC	
1. Description at the time of discharge. Age 25 years 10 months Height 5 feet 11 1/2 inches Chest measurement { girth when fully expanded _____ ins. range of expansion _____ ins. Complexion Dark Eyes Grey Hair Dark. Trade Elec. Engineers Intended place of residence (To be given as fully as practicable) 608 King St., East, Hamilton, Ont. Canada. Descriptive marks. Scar on right wrist hand.	
2. The above-named man is discharged in consequence of being medically unfit for further active service. K.R. & O. 1912. para. 392 (XV) (The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)	
3. Military character: Very good 4. Character awarded in accordance with King's Regulations:— This man has not been employed by me as an Elec. Engineer consequently I can say nothing re. his qualifications but I can recommend him as a sober, steady and reliable man. 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. H. L. Hughes. Liut. Col. R.C.E. Initials of Commanding Officer. C.E.T.D.	
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?

Nil.

Classification for service, or proficiency pay... Class

6. Campaigns, Medals and Decorations

Nil.

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) Shorncliffe, Kent.

(Date) 5th July, 1915.

Commanding Can; Engineers Training Depot.

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

I, Sapper A. G. Code, No. 5065.
hereby acknowledge that I have received all 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) Shorncliffe JUL 20 1915 A. G. Code (Signature of Soldier.)

(Date) 5th July, 1915 QUEBEC A. G. Code (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.

A. G. Code (Signature of Soldier.)
Sapper. A. G. Code.

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) Shorncliffe.

(Date) 5th July 1915.

Signature H. E. Hughes Lieut.-Colonel,

O.C. Canadian Engineers Training Depot.

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.

J. J. Mearns
Major R. C. A.,

O. C. Discharge Depot.

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.)



Nil

A. G. Code

77

COPY. E. R.

A2171 Wt. W774/836 250,000 4/15 D. D. & L. Sch. 2

Forms
A. 2
38

Army Form A. 2.

*N.B. — The Form being applicable to any Board of Officers, or Committee, or Court of Inquiry, this blank to be filled in accordingly.

The proceedings should be signed by each Officer composing the Board, etc.

PROCEEDINGS of a Pensions & Claims Board
assembled at 3, Smiths Square, Westminster, London, S.W.
on the 6th day of September 1915.
by order of Gen. Officer Commanding Canadians
Routine orders Nos. 936 & 1174
for the purpose of dealing with claims in respect to
illness, injuries etc.,

PRESIDENT.

Lt. Col. S.G. Robertson.

I certify that the original documents on File herein were forwarded to Headquarters, Shorncliffe by order of G.O.C. dated July 1st, 1915 and that copies on File are correct copies of the same.

Styuan G. Robertson
President,
Pensions and Claims Board.

MEMBERS.

Major S.L. Thorne,
Major J.L. Todd.

IN ATTENDANCE.

Lt. Col. S.G. Robertson,
Major S.L. Thorne,
Major J.L. Todd.

No. 5065, Sapper Arthur The Board. having assembled pursuant to order, proceed to G. Code 1 Co. C.E.

consider the documentary evidence submitted in the case of the marginally named man, which is hereto attached and marked Exhibits A, B, C & D, initialled by the acting President, and forms part of these Proceedings.

P.T.O.

Finds:-

That the evidence of this man is not available here, owing to his having returned to Canada.

The Board therefore recommends:-

That this case be submitted to Ottawa for disposition as to Pension.

Struan G. Robertson Lt. Col.
A/President.

Sh. M. M. M. Major)

) Members.

J. W. S. S. Major
C.A.M.C.)

H22-C-5

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

Surname Code Christian Name Arthur Graham

Birthplace . . Parish _____ County *Innisville Ont Canada*

Examiné { on 23rd day of September 1914
at Valcartier Que Canada

Declared Age 26 years 17705 days.

Trade or Occupation .. Electrical Engineer

Height 5 feet, 10 1/2 inches.

Weight 210 lbs.

Chest	(Girth when fully Expanded	39	inches.
-------	--------------------------------	----	---------

Measurement	} Range of Expansion _____ inches.	7	

Physical Development .. Good

Vaccination Marks	Arm ..	Right	Left
	Number		

When Vaccinated October 1914

Vision	..	..	..	$\begin{cases} \text{R.E.}-V= \\ \text{L.E.}-V= \end{cases}$
--------	----	----	----	--

(a) Marks indicating congenital peculiarities or previous disease) EXHIBIT D

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

Approved by .. (Signature) _____
(Rank) _____

Enlisted { at Valcartier Que, Canada
on 23rd day of September 1911

Joined on Enlistment	Corps.	Regtl. No.
	1 st Field Company C.E	5065

Transferred to	..	..	
----------------	----	----	--

Became non-effective by

ORIGINAL. on _____ day of _____ 191____
(Signature)

(Rank) _____

[illegible]

W. P. GRIFFITH & SONS LTD., Printers, Old Bailey, E.C.
[127] W3298/600 75m 8/14sv 45 59

Forms
B. 178.
38

P.T.O.

[illegible][illegible]

ORIGINAL.

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

Surname 1 CODE. 1 Christian Name A. G.

Birthplace ...	Parish	County
Examined ...	...	{ on _____ day of _____ 191 at _____
Declared Age ...	...	_____ years _____ days.
Trade or Occupation	...	_____
Height ...	...	_____ feet, _____ inches.
Weight ...	...	_____ lbs.
Chest	{ Girth when fully Expanded. Range of Expansion	_____ inches.
Measurement		_____ inches.
Physical Development	...	_____
Vaccination Marks	{ Arm ... Number	Right Left
When Vaccinated		...
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) _____	
	(Rank) _____	
		<i>Medical Officer</i>

Medical Officer.

Enlisted { at _____
on _____ day of _____ 191

Joined on Enlistment	...	Corps.	Regtl. No.
Transferred to	...	Canadian R. E.	5065.

Became non-effective by _____
on _____ day of _____ 191____
(Signature) _____
(Rank) _____

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

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of Days in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer.
	Day	Month	Year	Day	Month	Year				
Bagthorpe Military Hospital, Nottingham.	17	5	15	28	6	15	Gunshot wound resulting in loss of R. eye.	51.	Socket discharges a little still.	Duplicate Medical History Sheet posted to here. Medical Registrar Record Office. H.G.ASHWELL. Medical Officer, of Military Hospital, Bagthorpe.

tc,

DEC 4 1960

ny. 11-3-

11-3
S/n

Surname Code Christian Name Arthur Spn

5065

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 ... _____

		Right	Left
Vaccination Marks	Arm ...		
	Number		

When Vaccinated

Vision	...	...	...	$\left\{ \begin{array}{l} \text{R.E.} - V = \\ \text{L.E.} - V = \end{array} \right.$
--------	-----	-----	-----	---

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

(b) Slight defects but not sufficient to cause rejection

Approved by (Signature) _____
(Rank) _____ Medical Officer.

Enlisted { at _____
on _____ day of _____ 191 .

Joined on Enlistment	...	{ Corps. <i>C. E.</i>	{ Regtl. No. <i>5065</i>
Transferred to	...		

Transferred to	...	...		
----------------	-----	-----	--	--

Became non-effective by being found medically unfit for
further service
on 5th day of July 1915

(Signature) H. J. Hughes.

(Rank) Lieut Col R.C.R. Command Can. Engrs Bn.

Table IV.—Service Table.

[illegible]

(On leaving Corps or Station where invalidated.)

Transfer { Date _____
Station _____ }
or
Embark- { Date _____
ation { Port _____ }
Name of { Conveyance _____
Vessel _____
Officer in }
medical charge _____

Brief remarks on case during transit, and state on transfer for final disposal.

Re-transferred { Date _____
Hospital or }
Station _____ }
Officer in medical charge.

(At Station or Hospital where finally disposed of.)

Station and }
Hospital }
Arrived from _____ Date _____

If admitted	If under treatment		Disease	How finally disposed of	Date of Discharge, &c.
	Date	From To			

Detailed statement as to condition on discharge and whether discharged as an invalid, to corps, to station, or to depôt. In cases of discharge from the service it should be stated whether the answers to questions 22, 23 and 24 are concurred in.

Date of final Medical }
Board, or decision }

Administrative Medical Officer.

Station
Corps
Regimental No.
Rank
Name
Disability
Date

Hospital or Station
transferred to for
final disposal
Date of final
disposal
How finally
disposed of

Medical Report on an
Invalid.

Army Form B. 179.

The original Report is invariably to accompany the
discharge documents of invalids.
(25) (88579) W. 1336 475M 5-15 W B & L
Forms
B. 179.
34

1-6-74

Army Form B. 179.

Medical Report on an Invalid. *H22-C-5*

Station *Shorncliffe Camp*

Date *June 20, 1915.*

1. Unit *16. C. E.*
2. Regimental No. *5065*
3. Rank *Sapper*
4. Name *Code, Arthur G.*
5. Age last birthday *25*
6. Enlisted { on *Aug 17, 1914*
at *Hamilton.*
7. Former Trade or Occupation { *Electrical Engineer.*

8. Disability.

Loss of Eye (Right)

Statement of Case.

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

9. Date of origin of disability. *April 22, 1915*
10. Place of origin of disability. *Ypres.*
11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case. *this by shrapnel in right eye; piece of steel lodged at base of orbit. Eye enucleated at #4 Gen Hosp. Boulogne, May 10, 1915.*

ORIGINAL.

12. (a) Give your opinion as to the causation of the disability.
(b) If you consider it to have been caused by active service, climate, or ordinary military service, explain the specific conditions to which you attribute it (See notes on page 3).

EXHIBIT *B*

Shrapnel wound

Active Service

13. What is his present condition?

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

General health good.

Right socket wound still discharging slightly.
Left eye - slightly myopic.

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

- (a) In action?
(b) On field service?
(c) On duty?
(d) Off duty?

Yes
Yes
Yes
No

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

- If so—(a) When?
(b) Where?
(c) Opinion?

Not applicable

16. Was an operation performed? If so, what?

Yes three ① Removal of foreign body
② Excision
③ To stop haemorrhage

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

Not applicable

18. In case of loss or decay of teeth. Is the loss of teeth the result of wounds, injury or disease, directly* attributable to active service?

Not applicable

19. Do you recommend

- (a) Discharge as permanently unfit, or
(b) Change to England?

Yes
No

W. H. Hendry, M.B.
for Officer in medical charge of case.

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

except at MOORE BARRACKS,
CANADIAN HOSPITAL,
SHORNCIFFE.

Wallace A. Scott
LIEUT.-COLONEL, C.A.M.C.
OFFICER I/C HOSPITAL.

Officer in charge of Hospital.

Station
Date 30-6-15

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

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

Opinion of the Medical Board.

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

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

(iii.) The rates of pension vary directly according to whether the disability is attributed to (a) active service, (b) climate, or (c) ordinary military service. It is therefore essential when assigning the cause of the disability to differentiate between them (see Articles 1162 and 1165, Pay Warrant, 1913).

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

(v.) A disability is to be regarded as due to climate when it is caused by military service abroad in climates where there is a special liability to contract the disease.

20. (a) State whether the disability is the result of (i.) active service, (ii.) climate, or (iii.) ordinary military service.

1 yes
" no
" no

(b) If due to one of these causes, to what specific conditions do the Board attribute it?

Shrapnel

21. Has the disability been aggravated by

- (a) Intemperance?
(b) Misconduct?

(a) no
(b) no

22. Is the disability permanent?

yes

23. If not permanent, what is its probable minimum duration?

not applicable

To be stated in months.

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

1/2

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

25. If an operation was advised and declined, was the refusal unreasonable?

not applicable

26. Do the Board recommend

- (a) Discharge as permanently unfit, or
(b) Change to England?

(a) yes in Canada.
no

Signatures:—

Station Shorncliffe
Date 20/1/15

Approved.

Station Shorncliffe
Date 2-7-15

W. H. Hendry, M.B. President.
H. J. Shields, Captain Members.

H. J. Shields, Captain Administrative Medical Officer.

MEDICAL HISTORY OF AN INVALID.

(At Station or Hospital where finally disposed of)

Station and Hospital } Arrived from } Date

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

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

Date of final Medical Board or decision. }

Administrative Medical Officer.

DETAILED MEDICAL HISTORY OF INVALID

Militia Form B. 227.
(H. Q. 1772-39-117.)

Station	Corps	Regimental No.	Rank
Name			
Disability			
Date			
Hospital or Station transferred to for final disposal.			
Date of final disposal			
How finally disposed of			

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

1.—Station. *Quebec*

2.—Regiment of Corps. *C. Eng. C. E. F.*

3. Regimental No. and Rank. *5065 Laffer*

4.—Name. *Arthur Graham Code*

5.—Age last Birthday. *25 years.*

6.—Enlisted { on *15 August 1914*
at *Hamilton Ont*

7.—Former Trade or Occupation. *Electric Engineer*

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

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

Date *18 July 1915*

9.—Service.	Years.	Days.
	33 1/2	
	PERIODS.	
	From	To
Canada		
C. Eng. C. E. F.	15.8.14	18 July 1915

10.—Disease or Disability. *Gun shot wound of eye. (1103) right
Explosion of eye ball (appendix)*

11.—Date of origin, cause, present condition, and whether the same is the result of service or climate. *Origin 22 April 1915. Cause ~~shrapnel shell~~
shrapnel shell. Right eye ball a burst
socket discharging the result of service*

Has it been aggravated by intemperance, vice or misconduct? *No*

*boarded
5' 11" 17.
7. 2. 2.*

12.—In gunshot wounds, or other injuries, state how caused; whether received in action or in Field Service, and at what place, and whether on or off duty. If not received in action, was a Court of Inquiry held?

Injury received in action,
off the Belgian -

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

Not applicable

14.—If aggravated, though not primarily caused by his service as a soldier, explain how it has been so aggravated.

Not applicable

15.—Is the disability permanent? If not, state its probable duration. To what extent will it prevent his earning a full livelihood?

yes -
Will prevent his earning a full livelihood to the extent of 75%

16.—Full particulars of medical treatment of case up to date of invaliding.

No particulars available

17.—If previously proposed for discharge on medical grounds, state the date, the disability, for which recommended for discharge, and the cause of remand of Corps.

Previously discharged by medical board held at Shorncliffe as medically unfit.

18.—State if for discharge on account of unfitness for service.

Proposed for discharge on account of unfitness for service.

W. Hamp Capt AMC

Medical Officer by whom the case is brought forward

OPINION OF THE MEDICAL BOARD.

(In which it should be stated how far the Board concurs in above Report.)

The board having assembled proceeds to examine 3065 Sapper Arthur Graham Cole & finds him suffering from Gun shot wound of right eye. The board fully concurs in the opinion of the medical officer bringing forward the case & recommends that he be given three months pay & immediately discharged as medically unfit. He is to be reported to the Director General of the Army & the board further recommends that he be supplied with an artificial eye at the public expense.

Signatures:—

W. Hamp President.

Station

Quebec

C. D. Delage Capt AMC Members.

Date

18 July 1915

Date

19 July 1915

Approved.

(For physical unfitness and discharge only)

Date

31.8.15

W. D. Delage M.D. AMC Assistant Director of Medical Services.

J. H. M. J. Major. Acting Director of Medical Services.

[OVER]

(Estimated disability considered high in view of previous Board)

(On leaving Corps or Station where invalided).

Transfer { Date _____
Station _____ } Conveyance _____
or { Date _____
Embarkation { Port _____ } Vessel _____
Name of { Officer in }
medical charge }

Brief remarks on case during transit, and state on transfer for final disposal.

Re-transferred { Date _____
Hospital or Station _____ } Officer in medical charge.

(At Station or Hospital where finally disposed of.)

Station and Hospital { _____
Arrived from _____ Date _____

If admitted	If under treatment		Disease	How finally disposed of	Date of Discharge, &c.
	Date	From To			

Detailed statement as to condition on discharge, and whether discharged as an invalid, to corps, to station, or to depôt. In cases of discharge from the service it should be stated whether the answers to questions 22, 23 and 24 are concurred in.

Date of final Medical Board, or decision { _____

Administrative Medical Officer. _____

Army Form B. 179.

MEDICAL REPORT ON AN
INVALID.

Station	Corps	Regimental No.	Rank	Name	Disability	Date
Hospital or Station transferred to for final disposal { _____ Date of final disposal { _____ How finally disposed of { _____						

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

(91632) W 10047-1884 50,000 12/14 J.J.K.

Forms B. 179 36.

Medical Report on an Invalid.

Station Military Hospital, Bagthorpe.

Date June 4th. 1915.

1. Unit F. Co. Canadian Engineers.
2. Regimental No. 5065.
3. Rank Sapper.
4. Name Code. A.G.
5. Age last birthday 25.
6. Enlisted { on August 20th 1914
at Hamilton, Canada.
7. Former Trade or Occupation Electrical Engineer.

8. Disability.

Gunshot wound, Right Eye.

Statement of Case.

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

9. Date of origin of disability. April 22nd. 1915.

10. Place of origin of disability. Ypres.

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

States that a piece of shell lodged in base of orbit.

No previous Medical History Sheet.

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

Gunshot wound of right eye.

- (b) If you consider it to have been caused by active service, climate, or ordinary military service, explain the specific conditions to which you attribute it (See notes on page 3.)

Caused by being hit by piece of shell on Active Service.

3

13. What is his present condition?

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

Good orbit has practically healed.

Vision of left eye very good, may need glasses for near work.

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

(a) In action? In action.

(b) On field service? Yes. *lo*

(c) On duty? Yes. *lo*

(d) Off duty? No.

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

If so—(a) When?

(b) Where?

(c) Opinion?

No.

16. Was an operation performed? If so, what? Yes. Excision of right eye.

17. If not, was an operation advised and declined? No.

18. In case of loss or decay of teeth. Is the loss of teeth the result of wounds, injury or disease, directly* attributable to active service? No.

19. Do you recommend

(a) Discharge as permanently unfit, or

(b) Change to England?

Permanently unfit for further War Service

R. M. Rendall Medical officer on duty
Officer in medical charge of the case. *Praythorpe*

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

Station *Military Hospital*
Birmingham
Date *June 28.15*

H. G. Ashworth
Officer in charge of Hospital.

* Loss of teeth on or immediately after, active service, should be attributed thereto, unless there is evidence that it is due to some other cause.
† Delete this word if no exceptions are to be made.

Opinion of the Medical Board.

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

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

(iii.) The rates of pension vary directly according to whether the disability is attributed to (a) active service, (b) climate, or (c) ordinary military service. It is therefore essential when assigning the cause of the disability to differentiate between them (see Articles 1162 and 1165, Pay Warrant, 1913.)

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

(v.) A disability is to be regarded as due to climate when it is caused by military service abroad in climates where there is a special liability to contract the disease.

20. (a) State whether the disability is the result of (i.) active service (ii.) climate, or (iii.) ordinary military service.

(b) If due to one of these causes, to what specific conditions do the Board attribute it?

21. Has the disability been aggravated by

(a) Intemperance?

(b) Misconduct?

22. Is the disability permanent?

23. If not permanent, what is its probable minimum duration?

To be stated in months.

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

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

25. Is the man suffering from a disability which would obviously, as far as you can judge, cause him to be rejected by an Approved Society under the National Health Insurance Act?

If an operation was advised and declined, was the refusal unreasonable?

26. Do the Board recommend

(a) Discharge as permanently unfit, or

(b) Change to England?

Signatures:—

Station

Date

Approved.

Station

Date

Active service

gunshot wound

I concur; but recommend the postponement of this man's discharge and his retention in the Service, for duty in Great Britain until the end of the War, if in your opinion this could be done without injustice to his civil opportunities.

Capt. C.A.M.C.
for D.M.S.

6.VII.15. Canadian Contingents.

3

no

yes

3/4

no

an operation not performed

Permanently unfit

H. G. Ashworth

Lieut. Colonel
R.A.M.S.

Military Hospital
Birmingham
Members.

H. G. Ashworth

Administrative Medical Officer.

(a) Fit for home service.

(b) Fit for light duty.

(c) Temporarily unfit for home service or
light duty (stating probable period)

No

No

~~*Permanently unfit*~~

12-14-1911/12-14-1911
(12-14-1911) 12-14-1911
12-14-1911/12-14-1911
12-14-1911/12-14-1911