

REGIMENTAL DOCUMENTS

NAME COOKE WILLIAM

REGT. NO. 646246

UNIT 158th Pa

H. Q. FILE NO.

25319

(S)

CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505 REFERENCE

NON-EFFECTIVE BY

DEATH

Category

34032

DISCHARGE

Category

Med Must

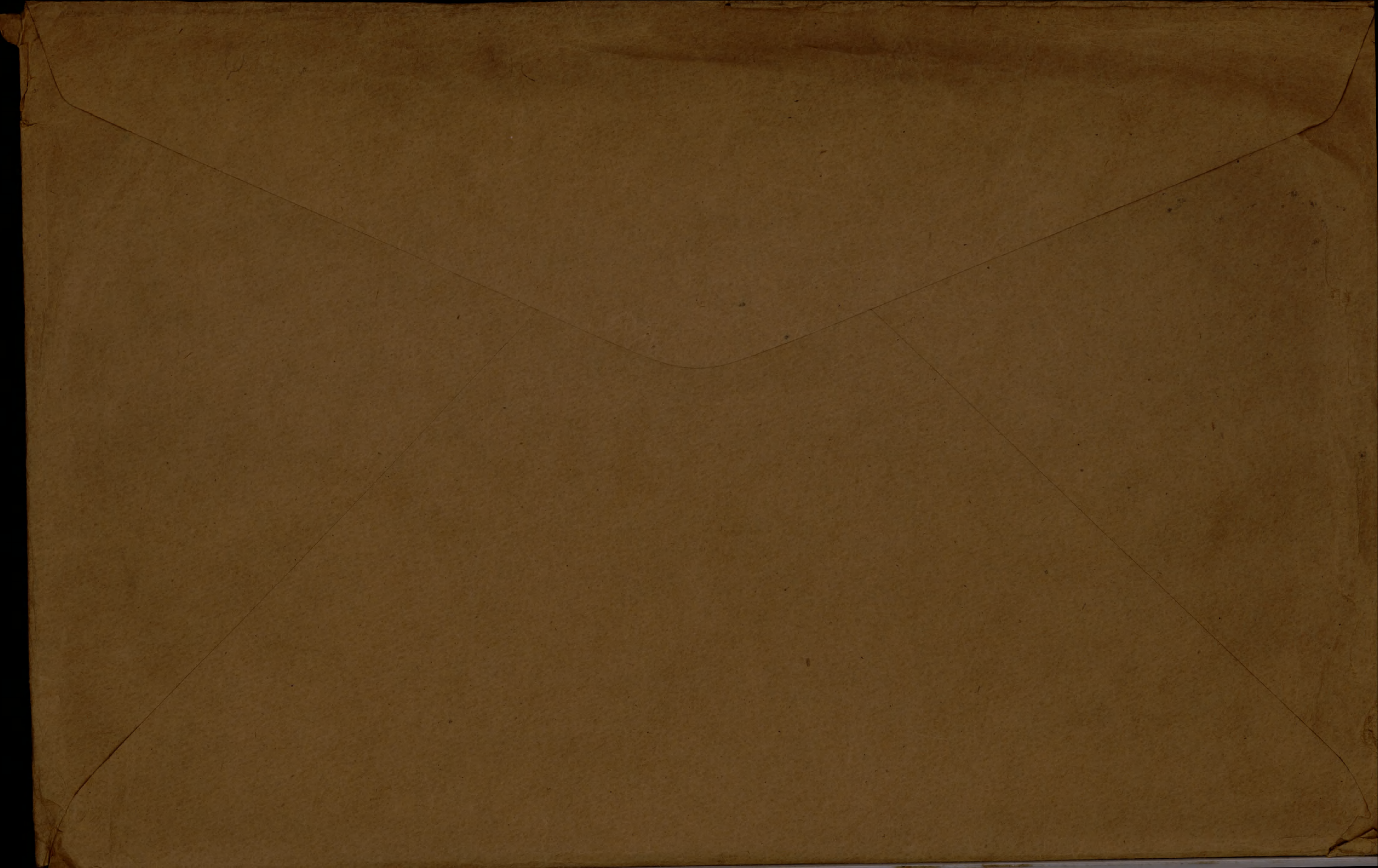
DESERTION

(M)

(H)

- 1 ATTESTATION PAPER (M.F.W. 23, 133, or 51)
- 3 CASUALTY FORM (M.F.W. 54 or A.F.B. 103)
- TRAINING HISTORY SHEET (M.F.W. 113)
- FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)
- REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)
- COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)
- MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)
- DENTAL HISTORY SHEET (M.F.B. 465)
- 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)
- 1 LAST PAY CERTIFICATE (M.F.W. 44)
- 2 PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)
- PARTICULARS OF CHARACTER (A.F.W. 3226)
- 1 COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)
- 1 M.F.W. 192
- 1 M.F.W. 2571
- 1 M.F.W. 3428
- 1 M.F.W. 67
- 1 R. 149
- 1 Cas card
- 1 R. 122

3
21 = 28
16 28
3 - 28
3



ATTESTATION PAPER.

No.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.
(ANSWERS.)

1. What is your surname? COOKE
- 1a. What are your Christian names? WILLIAM
- 1b. What is your present address? 1831 Robson St. Vancouver B.C. Canada
2. In what Town, Township or Parish, and in what Country were you born? London.. England
3. What is the name of your next-of-kin? Frederick William Cooke
4. What is the address of your next-of-kin? Glenart. Sandgate Rd. Sandgate.. England
- 4a. What is the relationship of your next-of-kin? Brother
5. What is the date of your birth? October 4th. 1873
6. What is your Trade or Calling? Civil Engineer
7. Are you married? No
8. Are you willing to be vaccinated or re-vaccinated and inoculated? Yes
9. Do you now belong to the Active Militia? No
10. Have you ever served in any Military Force? Shropshire Yeomanry 3 yrs
If so, state particulars of former Service.
11. Do you understand the nature and terms of your engagement? Yes
12. Are you willing to be attested to serve in the }
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? } Yes

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

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

Date October 6th 1916 W. Cooke (Signature of Recruit)
A G Elder (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, William Cooke, 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 October 6th 1916 W. Cooke (Signature of Recruit)
A G Elder (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 Vancouver this Sixth day of Oct 1916
Clayton (Signature of Justice)

Description of COOKE, William on Enlistment.

Apparent Age.....43.....years.....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. 7 1/2.....ins.

4 Vac. L.
Scar on forehead.

Chest measurement. { Girth when fully expanded.....38 1/2.....ins.
 Range of expansion.....2.....ins.

Complexion.....Dark.....

Eyes.....Grey.....

Hair.....D. Brown.....

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

CERTIFICATE OF MEDICAL EXAMINATION.

I have examined the above-named Recruit and find that he does not present any of the causes of rejection specified in the Regulations for Army Medical Services.

He can see at the required distance with either eye; his heart and lungs are healthy; he has the free use of his joints and limbs, and he declares that he is not subject to fits of any description.

I consider him*.....fit.....for the Canadian Over-Seas Expeditionary Force.

Date.....Oct 6th.....1916.

G. B. Murphy
Captain
 Medical Officer.

Place.....Vancouver.....

*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.

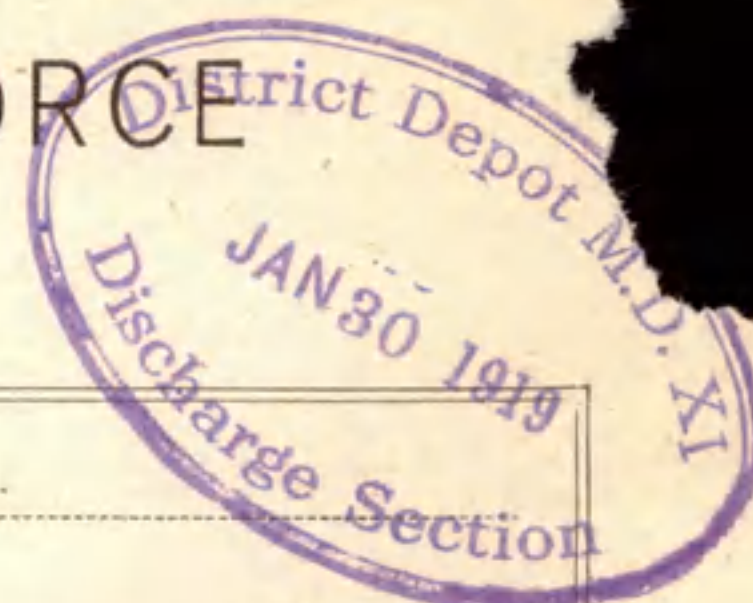
.....William Cooke.....having been finally approved and inspected by me this day, and his Name, Age, Date of Attestation, and every prescribed particular having been recorded, I certify that I am satisfied with the correctness of this Attestation.

G. B. Murphy (Signature of Officer)
 Commanding 1st-Regt.

Date.....October 6th.....1916.....The Duke of Connaught's Own
158th (Overseas) Battalion

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate



This is to Certify that No. 646246 (Rank) Pte.

Name (in full) William boome enlisted in

the 158th Batta.

CANADIAN EXPEDITIONARY FORCE at Vancouver B.C. on the 6th

day of Oct. 1916

HE served in France with the 1st Can Inf. Wks.

and is now discharged from the service by reason of medical unfitness

under A.C. 1420 (A) of 12/12/18.

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

Age 46 yrs.

Height 5' 7 1/2"

Complexion dark.

Eyes blue

Hair d. brown.

Marks or Scars Scars left eyebrow

ext. hand. 4 Vacc. marks

1 arm.

W. Cooke

Signature of Soldier

H. A. Andrews

Issuing Officer

Date of Discharge Jan'y 30/19

for C.C. D.D. no 11
Rank
Appointment

Signed at Vancouver, B.C. this 30th day of Jan'y 1919

in Military District No. X7

File Reference No. D.D. 6-4595

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

CANADIAN EXPEDITIONARY FORCE
Discharge Certificate

No. _____ (Rank) _____ Name _____

Unit _____

Address on Discharge _____

Character and Conduct _____

Former Occupation _____

Special Qualifications of Value in Civil Life _____

Medals and Decorations _____

Remarks _____

Signed at _____ this _____ day of _____ 19 _____

Name of Officer

Rank

Appointment

On demobilization in 1919
petitioners called for on
the back of this cer-
tificate will not be com-
pleted.

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

9333

Feb 1-17

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

15			
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PARTICULARS OF SEPARATION ALLOWANCE

No. *646246*

Rank *Plt* Promoted Reverted Discharge

Soldier's Name *Wm Cooke*

Battalion *158 H BATTN*

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name *Mrs Ely Jane Brewster*

Address *Stump Lake*

Change of Address *Kamloops B.C.*

1

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
<i>Dec 31-17</i>			<i>165</i>	<i>165</i>	<i>03641 a 25</i>
<i>Jan</i>	<i>V 63902</i>		<i>15</i>	<i>15</i>	<i>m</i>
<i>Feb</i>	<i>D 98039</i>		<i>15</i>	<i>15</i>	
<i>Mar</i>	<i>a 116215</i>		<i>15</i>	<i>15</i>	
<i>Apr</i>	<i>0 7647</i>		<i>15</i>	<i>15</i>	
<i>May</i>	<i>M 14711</i>		<i>15</i>	<i>15</i>	
<i>June</i>	<i>G 76252</i>		<i>15</i>	<i>15</i>	
<i>July</i>	<i>S 29659</i>		<i>15</i>	<i>15</i>	
<i>Aug</i>	<i>G 39539</i>		<i>15</i>	<i>15</i>	<i>M</i>
<i>Sep</i>	<i>J 48897</i>		<i>15</i>	<i>15</i>	
<i>Oct</i>	<i>M 49241</i>		<i>15</i>	<i>15</i>	
<i>Nov</i>	<i>D 57294</i>		<i>15</i>	<i>15</i>	
<i>Dec</i>	<i>R 65389</i>		<i>15</i>	<i>15</i>	
			<i>345</i>	<i>345</i>	

CANADIAN
ASSIGNED PAY AUDITED

OK

J. Moore
AUDIT CLERK

DATE *14/5/19*

M. F. W. 128
4000-6-17-1772-39-141
L. L. 22320-M. & D. 7483.

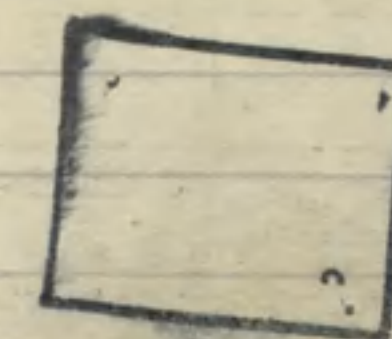
A/c Closed 31-12-18

Ret'd per. Scandinavia

M 10 10 Dal 30-11-18 6 12 18

Has

51241-6-12-18



POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

Name *Cook* *Wm*
Surname Christian Name

Regimental Number *646246* Rank *Pte.*

Unit

Original Unit *BCRP*

District where paid *MD 11*

Date of Discharge *30-1-19*

P. D. P. Filing Number

Address (in full)

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

L.L. 53961—M. & D. 9721

Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Overpayments to be Recovered	Total Amount Paid
	Cheque No. A	Date	Amount 30 days	Cheque No. B	Date	Amount 30 days	Cheque No. C	Date	Amount 31 days		

M. F. W. 127
300M-1-19
1772-39-1140

Remarks:

File No. 03649-20-141.

WAR SERVICE GRATUITY.

Register No. *Spec Reg*

33/979

Reg. No. 646246.

Dependent *Mr. E. J. Cooke.*

Name *Cooke Wm.*

Address *(Same address).*

Address *1283 Georgia St. West,
Vancouver,
B.C.*

Pay Soldier \$ *338.⁸⁰*

Pay Dependent \$ *150.⁰⁰*

*L. B. Smart,
J. Bradbury,*

Days *153* Rate *100.⁰⁰* Due *500.⁰⁰*

Clerk *G. J. McPherson.*

Less P.D.P. credited

Less further Dr. Bal. or overpayment. *11.²⁰*

Net *788.⁸⁰*

*R. 113
19-8-20*

Date	Ck. Order	Ck. No.	Amount	Remarks	Date	Ck. Order	Ck. No.	Amount
	<i>Paid by</i>	<i>11</i>	<i>338.80</i>		<i>12⁸/₂₀</i>	<i>59010</i>	<i>1880342</i>	<i>150.00</i>
			<i>5</i>					<i>5</i>
			<i>5</i>					<i>5</i>
			<i>5</i>					<i>5</i>
			<i>5</i>					<i>5</i>
			<i>338.80</i>					<i>150.00</i>

GEN'L AUDITOR
 Posting checked by
[Signature]
 Date *11/18/20*

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

M. F. W. 12.
 25m—4-17.
 H. Q. 1772-39-819.

To Whom *Mrs. Eliza Jane Drew*
 Address *Blump Lake P.O.*
Kamloops
B.C.

By Whom Assigned *Cooke Wth*
 Regtl. No. *646246*
 Rank *Plt.*
 Corps *1st. Can. Bn*

Rate *\$ 40 00*

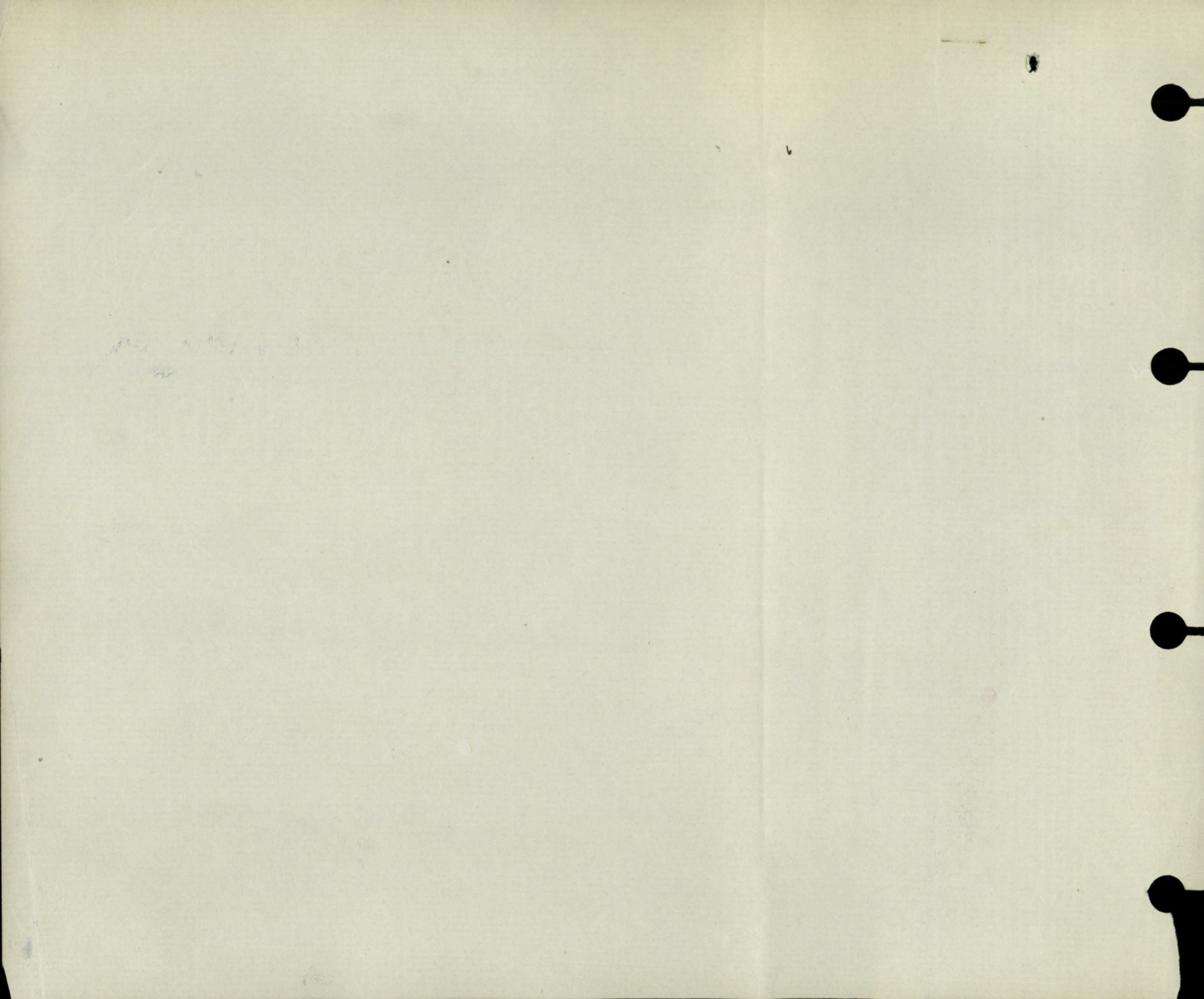
SPECIAL REMITTANCE

Sched #393. 7.7.17

PAYMENTS ALSO ACCOUNT IN CURRENT LEDGER.

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917 1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.		<i>A 16795</i>	<i>40 -</i>	
Oct.				
Nov.				
Dec.		<i>N 45286</i>	<i>20.</i>	<i>Sched. 453. 31-10-17.</i>
Jan.	1916			
Feb.				
March				





MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

To Whom *Trustee*
Mrs. Elizabeth Drew
 Address *132. 5th Ave. E.*
Stump Lake P.O. Vancouver
Kamloops B.C. BC.
 Rate *15.00* *F. Eby 1/17.*

By Whom Assigned *George J. Mc*
 Regtl. No. *646246.*
 Rank *Pvt.*
 Corps *158th Bn*

SEE ALSO ACCOUNT IN SPEC. REM. LEDGER.

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			<i>2. M. 2/1/17. JAL.</i>
Sept.				<i>2/3/17. JAL.</i>
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				



**CANADIAN
 ASSIGNED PAY AUDITED**
OK. J. W. Rose
 AUDIT CLERK
 DATE *14/2/19*

1888

STAC

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier _____

PAYMENTS.

Month.	Year.	Cheque No.	Am ^t .	Remarks.
Aug.	1918			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1919			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1920			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				

PROCEEDINGS OF A MEDICAL BOARD.

Dated at SEAFORD, OCT. 18 1918

No. 646246 Rank PTE Name COOKE WM

Local Unit B.C.R.D. Overseas Unit 1st CAN. INF. WKS. CO. Age 50

Examination held at COMB DEPOT

DISABILITY. Overseas—Local. (scratch one out)

DEBILITY

PRESENT CONDITION.

In France 21/12. Complaints - Pain legs, arms, back - mostly pronounced left leg. Exam - looks worn out. Appearance of age given - Sent back from France of no further value. General appearance fair - poor myocardial tone - pulse rate 84 - regular. looks clean - some slight arterio-sclerosis. Other systems normal.

BOARD RECOMMENDS:-

- 1. Fit for Duty. Bill not likely to be raised in six months
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 { P.W. MacNeil Capt President.
J. ...

APPROVED 19 OCT 1918

Dated at Seaford, Sussex. 1916.

U. Wallace - Captain C.A.M.S. For A.D.M.S.
for A.D.M.S., Canadians.

APPROVED.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at SEAFORD DEL. 1918

No. 11194 Rank PTE Name COOKE WM

Local Unit 100 Overseas Unit CANINEWK. CO Age 30

Examination held at COMB DEPOT

DISABILITY
Overseas-Local
(attach one out)

DEBILITY

PRESENT CONDITION.

[Handwritten medical notes describing the patient's condition, including symptoms like cough, chest pain, and general debility.]

BOARD RECOMMENDS -

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

Signatures -

[Signature] President

[Signature] Members

APPROVED

Dated at SEAFORD DEL. 1918

1/6/18

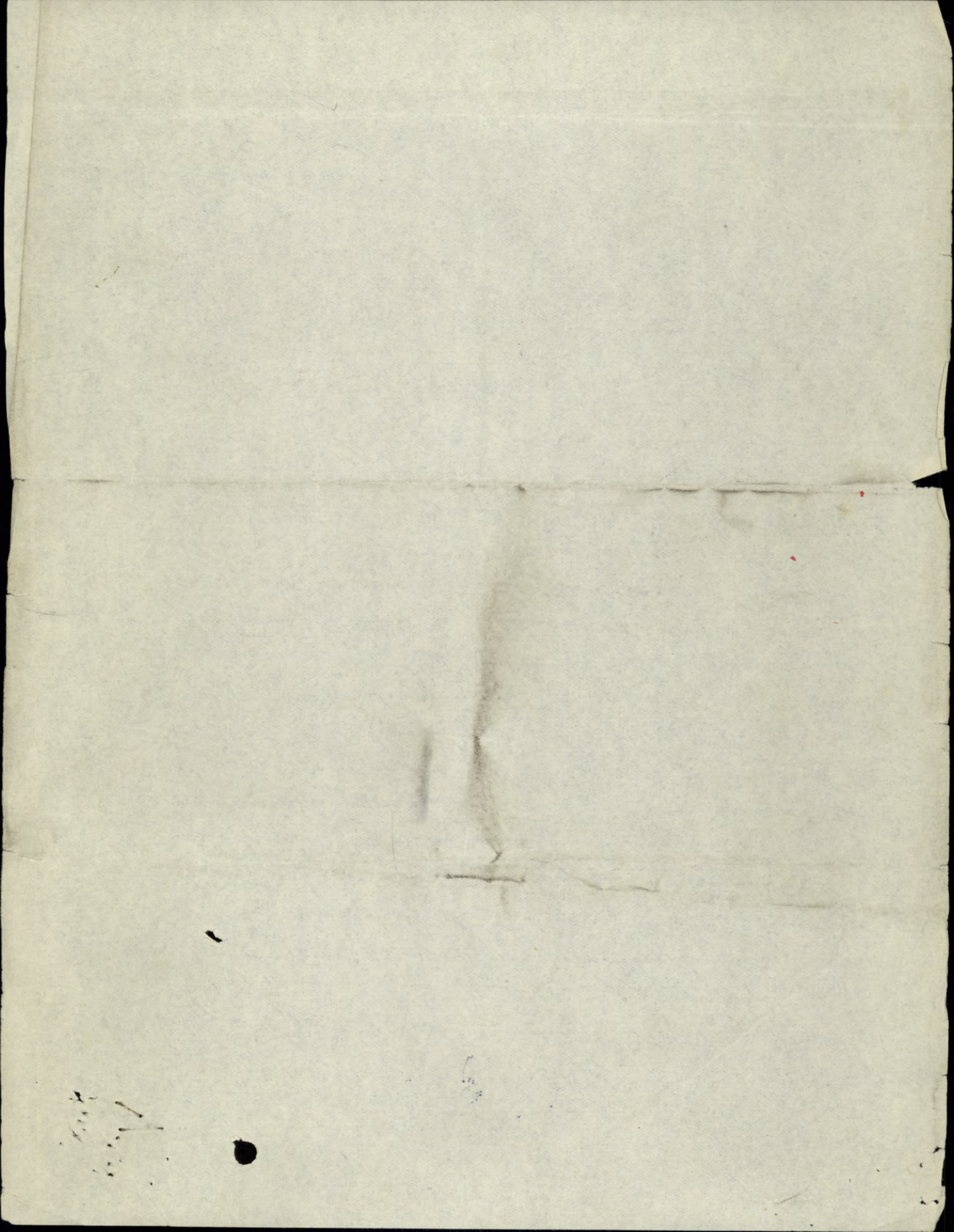
No. 1263205 Pte. Bird, C.C., 1st Canadian
Infantry works Battalion, states as follows: -

"I was working ^{directly} ~~behind~~ both Ptes,
Cook and Aiken, deepening a trench,
about 9 o'clock this morning, when I
suddenly heard Pte. Cook exclaim that
his hand was hurt. I immediately stepped
up and saw that Pte. Cook's hand had been
completely punctured by the pick, which Pte.
Aiken was using.

He had stepped back a pace
or two to properly clean up some loose chalk
near the beginning of his task, and Pte.
Aiken, who was picking away at the adjoining
end of his task, with his head down,
had accidentally struck Pte. Cook's right
hand with his pick."

1263205 Pte. Cecil Bird.

Paul Lang, Lieut.
1st Can. Inf. works Bn.



1/6/18

No. 1054305, Pte. Aiken, W.H. 1st Canadian

Infantry works Battalion, states as follows. —

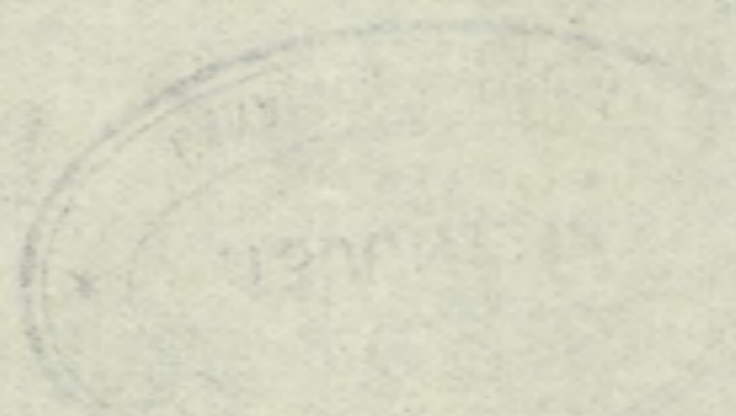
" This morning about 9 o'clock I was working about four paces behind Pte. Cook, W., and was picking away at the hard chalk in the trench. Pte. Cook was also at work in front of me and in order to get at the chalk better he stepped back a pace or two and was in the act of driving his shovel into the chalk, with his right hand back, grasping the handle, when the pick I was using struck him on the right hand puncturing it.

I was working away with my head down and did not see Pte. Cook step back, hence the accident.

Pte W.H. Aiken
1054305

Paul Lang
Lieut.
1st Can. Inf. Works Bn





Small, illegible markings and a dark spot in the bottom left corner of the page.

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

DISTRICT *11*

NAME OF SOLDIER

Cooke William

REGIMENT

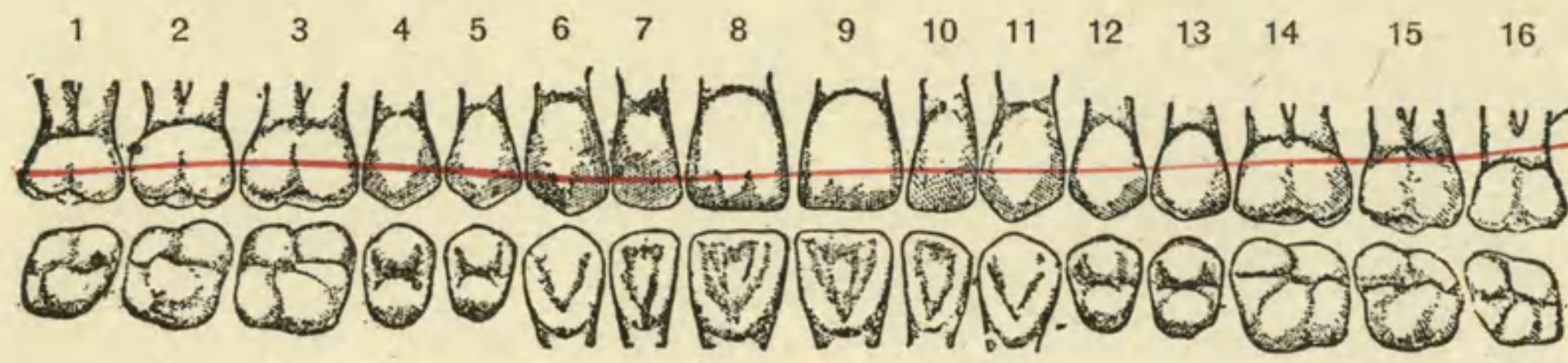
158

RANK

Plt

No.

646246

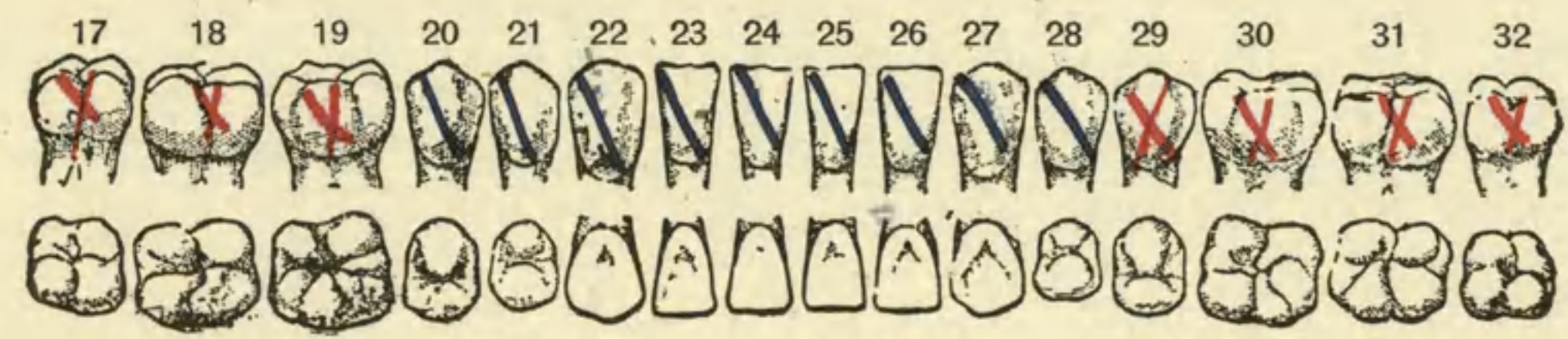


7/21 Plati

INSTRUCTIONS

1. On examination the condition of patient's mouth to be marked on diagram in red ink.
2. On first line of report record of same to be made in red ink.

Only such entries to be made on this sheet as will show:



2 P Plati

1. Condition on examination (in red).
2. Condition on leaving Canada.
3. Condition on discharge.

Condition on first Examination	Date	Amalgam	Temporary Filling (a) G. P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhoec	Synthetic Porcelain	Extracting	DENTURES			Gold Clasp	Gold Filling	CROWNS		Bridge Work	OPERATOR	Military District	REMARKS			
												U	L	P			Gold	Porcelain							
<i>Jan</i>	<i>1919</i> <i>10</i>										<i>23</i> <i>17019</i> <i>29 7032</i>												<i>Examined by</i> <i>Lieut McC James 11</i>		<i>Requires F. L. Plati</i> <i>28</i> <i>9 20 21 22 23 24 25 26 27</i> <i>Refuses Treatment</i> <i>W. Cooke</i>

MEDICAL HISTORY SHEET

Surname COOKE Christian Name William

Examined { on 6th day of Oct. 1916
at Vancouver
Birthplace { City or Town London
County England

Approved by B. Murphy
Rank Captain M.O.

Apparent age 43
Trade or occupation Civil Engineer
Height 5 feet 7 1/2 Inches
Weight 171 lbs.
Chest measurement { Minimum 36 1/2 inches
Maximum expansion 38 1/2 inches
Physical development Good
Small-pox Marks

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT
		<u>2 OCT. 1918</u>
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Vaccination Marks { Arm Right Left
Number 4

Date	Result	VACCINATIONS
<u>18-10-16</u>		<u>Allan McNair</u> M.O.
		M.O.
		M.O.

When Vaccinated last 1906
(a) Marks indicating congenital peculiarities or previous disease

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>18-10-16</u>		<u>Allan McNair</u> M.O.
		M.O.
		M.O.

Vision $\frac{20}{60}$ R $\frac{20}{50}$ L

Enlisted on 6th day of October 1916 at Vancouver B.C.

	CORPS	REG'TL NUMBER	HABITS	DATE
Joined on enlistment	<u>158th</u>	<u>880</u>	<u>646246</u>	<u>October 6th 1916</u>
Transferred to	<u>1st C.L. Bn.</u>			<u>22/12/16</u>

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

STATION	DATE	DISEASE	RESULT
<u>VANCOUVER</u>	<u>OCT 7 1915</u>		<u>Fit</u> <u>W.S. Baird Major Comd</u> <u>Lt. Buller Cap Comd</u> <u>P. H. L. Parry Major</u> <u>B. W. not + J. W. Mackenzie</u> PRESIDENT
<u>Shonchan</u>	<u>Dec 18/16</u>	<u>over age</u>	
<u>Seyford</u>	<u>Oct 12. 1918</u>	<u>deter</u>	
<u>Seyford</u>	<u>Oct 24. 1918</u>	<u>deter</u>	STANDING MEDICAL BOARD <u>B. W. not + J. W. Mackenzie</u> PRESIDENT

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

CANADIAN

Surname *Cooke* Christian Name *William*

STATION	Date of Arrival at the Station	DATES OF						DISEASE	Number of days in Hospital	Remarks on nature of the disease; how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer
		Admission into Hospital			Discharge from Hospital						
		Day	Month	Year	Day	Month	Year				
No 7 Cav Fld <i>Shaughnessy Mully Hospital</i>	Amb.	7	6	17	17	6	17	Sciatica		Discharged to Duty.	<i>Wms</i> A93-A101.GH.
		4	12	18	22	1	19	Debility	46	Discharged Category E.	<i>James Griffiths Capt</i>

A.G.S. BRANCH,
G.H.Q., 3RD ECHELON
Date 8 JUN 1918
No. 24
CASUALTIES.

4595

N/C

A.F. W. 3428.

REPORT ON ACCIDENTAL OR SELF-INFLICTED INJURIES.

To be rendered in accordance with instructions on the back of this form.

1. Number, Rank, Name, and Unit of injured man. *646246 - Pte. Cooke W.*
1st Canadian Infantry Works Bn. Date of Casualty. *June 1/18*

2. Nature, Location, and Severity of injury. (N.B. Field Ambulance to be notified at once if wound is believed to be self-inflicted.)
Right hand punctured by pick. Lacerated Wtd R hand (slight)

3. Short statement of the circumstances of the case. (Signed statements of witnesses to be attached to this form.)
While deepening a trench, Pte. Cook, W. stepped back on his task, to dig out some chalk, and was in the act of driving his shovel into it, when Pte. Aiken, W. H. who was using a pick at the adjoining end of his task, with his head down, and not noticing Pte. Cook stepping back, drove his pick down and into Pte. Cooke's right hand.

4. Commanding Officer's opinion as to whether the man was:—
(a) In the performance of military duty, *yes*
(b) To blame, *no*
(c) Whether any other person was to blame. *no*

Date *June 1/18* Commanding *Paul Lange, Lieut*
1st Co. 1st C.I.W.B.

1st
CANADIAN INFANTRY
WORKS BATTALION
No. *2*
Date *2 - JUN 1918*

5. (a) Opinion of G.O.C. Brigade. *not to blame*
(b) Disciplinary action taken or proposed, whether against injured man or another. *nil*
Date *2-6-18* Commanding *[Signature]* Brigade *[Signature]*

6. To Army "A."
Forwarded with reference to my Casualty Wire No. _____ dated _____

Date _____ Division _____

7. To D.A.G.,
G.H.Q., 3rd Echelon.

Forwarded for record. This casualty should be reported as *Injured (Accidentally).*

Date *17-6-18.*

[Signature]
Lieut.-Col., A.A.G.,
for Major-General,
Army.
DEPUTY ADJUTANT GENERAL.

G.H.Q., 3RD ECHELON
18/1305
13 JUN 1918
CANADIAN SECTION

Notes

INSTRUCTIONS.

1. These forms are to be completed in all cases of accidental or self-inflicted injuries, involving a soldier's absence from duty, whether due to the man's own act, or that of a comrade, or to other extraneous circumstances.

2. Where several casualties occur as the result of one accident, one form is to be completed for each Officer or other rank injured, but only one set of statements from the witnesses of the accident need be attached.

3. Full statements are to be taken by an Officer from the witnesses of the accident. These statements will be signed by the witnesses making them, and by the Officer who takes them, and will be forwarded with this Form. Where it is intended to take disciplinary action, copies of these statements should be retained by the Unit for use in lieu of a summary of evidence.

4. Where it is possible to obtain it, a statement from the injured man will also be forwarded. This, however, should not be used as evidence against him in any subsequent disciplinary proceedings.

Special Instructions as to Evidence in Cases of Self-Inflicted Wounds.

5. In these cases the statements mentioned in paragraphs 2 and 3 above should bring out all material points, *e.g.*, statements to the effect that the witness was with the accused standing on the fire step (or sitting in a dug-out); that the accused was cleaning his rifle; position of safety catch, magazine, etc., if known; muzzle of rifle on toe of foot; hand on muzzle; that accused pulled trigger; that the rifle was afterwards examined and an empty cartridge case was found in chamber; that accused was seen to be wounded; what accused said ("I have shot myself," "I did not know it was loaded," etc.).

6. A soldier is specially trained in the safe use of his rifle and revolver, and evidence of any neglect of the ordinary precautions as to their handling in such cases usually has considerable bearing on the question of negligence. In cases of wilful self-wounding the fullest possible evidence should be obtained; unless the evidence is conclusive this charge should not be used. The charge will therefore usually be laid under Sec. 40 Army Act—"Conduct to the prejudice of good order and military discipline in wounding himself through negligently handling a rifle," and an alternative charge to this effect should be made, even if the accused is to be tried under Section 18 for wilful maiming.

To be made out in duplicate.

L.C. 51-21-25-53

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

INSTRUCTIONS.

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

The Duke of Connaught's Own

158th (Overseas) Battalion C. E. F.

(1) Name of Overseas Unit which Soldier joins.....

(2) Regimental Number **646246**.....

(3) Full Name of Soldier **COOKE, WILLIAM**.....

(4) Place of Birth *Paddington London, England*.....

(5) Are you married, or not? *No*.....

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

(b) Present Postal Address..... ✓

(7) Are you a widower? *No*.....

(8) Have you any children?..... ✓

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

Also their names and ages..... ✓

(9) Is your Father alive? *No*
If so, state name and address *✓*

(10) Is your Mother alive? *No*
If so, state name and address *✓*

(11) If your Mother is a widow *✓*
Are you her sole support, or not? *✓*

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

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

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

(15) Are you insured? *yes*
If so, in what Company? *Prudential*
Have you made arrangements for payment of your Insurance premium? *yes*
If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.

Date *Oct 24th 1916*
Chas. Allen
Commanding *Lt.-Col.* Officer Commanding.
The Duke of Connaught's Own
158th (Overseas) Battalion

A.G.R. Rank Name COOKE, William ✓ Reg'l No. 646246 ✓
 Unit 158th Bn. ✓ If in perm. Corps, }
What Unit? } Married or Single Single. ✓
 Place and Date of Enlistment Vancouver 6th Octr. 1916. ✓ Place of Birth London, England. ✓
 Name and Address, Next-of-Kin Frederick William Cooke, ✓

Glenart, Sandgate Rd., Sandgate, England. ✓ Relationship Brother. ✓

Assigned Pay Monthly \$ Payable to Relationship

Separation Allowance \$ Payable to Relationship

N/E. R.B. No. 12,312
File R.L. _____
Category *Gen. Dpt.*

BC

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 in England. S.S. Olympic.		20-11-16.	
22-12-1916	158 th Bn. Trans to 1 st Can of 158 th Bn		Shoreham	22-12-16	DO.P.H. 262
24-12-16	1 st C.L. Bn. T O S from 158th.		Shoreham	22-12-16	DO 6 A.F.B. 103 CHECKED
8-1-17	1 st C.L. Bn. Proceeded Overseas,		Shoreham	8-1-17	DO 19 11 JAN. 1917
5-7-17	1 st C.L. Bn Disch to Duty (Cops Resl Sta N ^o 7 Cav Rd. amb)		Field	17-6-17	C.L.A. 101 (Sciatica)
16-3-18	1 st Can, Lab, Bn, Designated, 1 st Can. Inf. Wks. Bn, DO Pt 2.19				
15-9-18	1 st C.I.W.B S O Stol CIWC 13, 9, 18 Pt O* 59 & 10 w/ P+ C 1.27 9.18				
2-10-18	1 st C.I.W.B. SDS to Gen Dept, Schiff (Overage).		Field	24-9-18	Gen Dept DO 231/28-9-18
1-10-18	Gen Dept SDS to the 1 st Res Bn Sford		Schiff	28-9-18	233 DO 235/18
28-10-18	Rehd on board 600 Duxton Pt		Sford	26-10-18	258

ep

P 76

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.				
7-12-18	B. B. R. D.	beaseson command to b. D. D. Buxton & S. G. S. on return to Canada no suitable employment in England	Seaford	19-11-18	DG. 293

LAST PAY CERTIFICATE

No. 52

This form to be used for all Ranks (Vide Articles 122, 130 and 141, Financial Instructions, 25715c, C.E.F., 1914).

regimental No. 646206 Rank Pte Name COOKE - W A
 Corps #11 Dist Depot who was* Discharged
 On 30-1-19 191... to 191...
 *Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1-1-19 191... to 30-1-19 191..., the inclusive date of transfer or discharge.

Dr.			Cr.		
	\$	c.		\$	c.
Bal. Dr. from prev. month			Balance Cr. from prev. month		
Advances by Cheques } No.			Regt'l. Pay <u>30</u> days at \$ <u>1</u> c.	<u>30</u>	
Assigned Pay and Sep'n Allee. No.			Field Allow. <u>30</u> days at \$ <u>10</u> c.	<u>3</u>	
Other charges <u>1st mo. 76 and 69.</u>	<u>70</u>		Separation Allowances* (Monthly)		
Payment on transfer or discharge No.	<u>68</u>		Other Allowances* <u>clothing</u>	<u>35</u>	
Balance Cr. (to be paid by the new unit)			Other Credits* <u>see by PDP</u>		
Total	<u>138</u>		Bal. Dr. (to be deducted by new unit)	<u>70</u>	
			Total	<u>138</u>	

*Give particulars.

A monthly stoppage of \$..... (†) has..... (‡) been paid on account of Assigned Pay for the month of 191... } (to) Assignee
 and Sep'n Allee. for month of 191... }
 (Address) Mex

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

On Transfer of an Officer.

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

REMARKS:—

- State (1) date of enlistment
- (2) if married and if a Separation Allowance Card has been submitted Single
- (3) cause of discharge DO
- (4) authority for transfer

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

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

Date Jan 30/19
 Place Nauyassee Pte
[Signature]
 Captain
 Demobilization Pay M. D. No. [Number] Paymaster.

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

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

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

CASE HISTORY SHEET.

Shaughnessy Mully Hospital. Vancouver, B. C. Station.
No. 646246 Rank pte Name Cooke William Age 48
Unit 158 B^m Completed years of service

Where and how long	<u>6 1/2</u>	<u>6 5/12</u>	<u>1 9/12</u>
--------------------	--------------	---------------	---------------

Date of admission 7-12-18 Date of discharge 22-1-19
Diagnosis Debility Place of origin _____

CONDITION ON ADMISSION AND PROGRESS OF CASE

History Carried on in France 21 months
Wounded in L. hand June 1918. Hospital 3 weeks. returned to
duty after 4 weeks convalescent. Sciatica in Nov 1916 in
England. Returned to France 1917. Hospital at Post Camp Personne
3 weeks. Evacuated to England for age & Rheumatism in
Sept 1918.

C.O.A. Robust looking man well covered. Soft muscular condition.
Well preserved man for his age active. Heart enlarged to left
nipple line, no murmurs. Emphysema fairly marked. Very slight
cough & expectoration, lungs at present both dry. Mild degree of sclerosis
Pulse 80 regular. Radials not very cordy.

FAMILY HISTORY

neg
(Tuberculosis, mental or nervous diseases.)

TREATMENT

Rest & Exercise
(Especially any specific or special form)

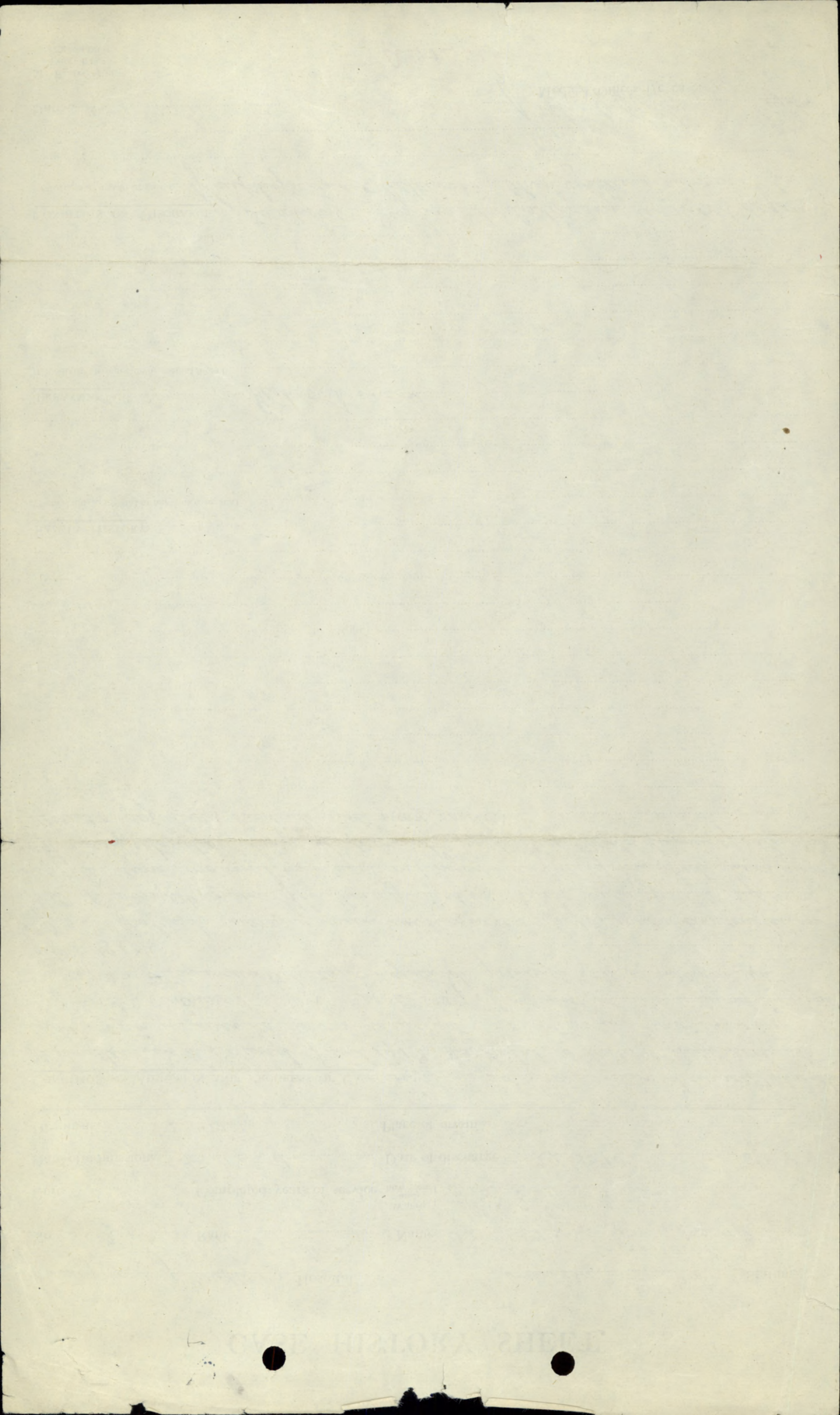
CONDITION ON DISCHARGE

(and disposal made of case.)

As above. Discharged Category E. Mild degree
of Emphysema & Sclerosis. Other systems normal

Date 22-1-19

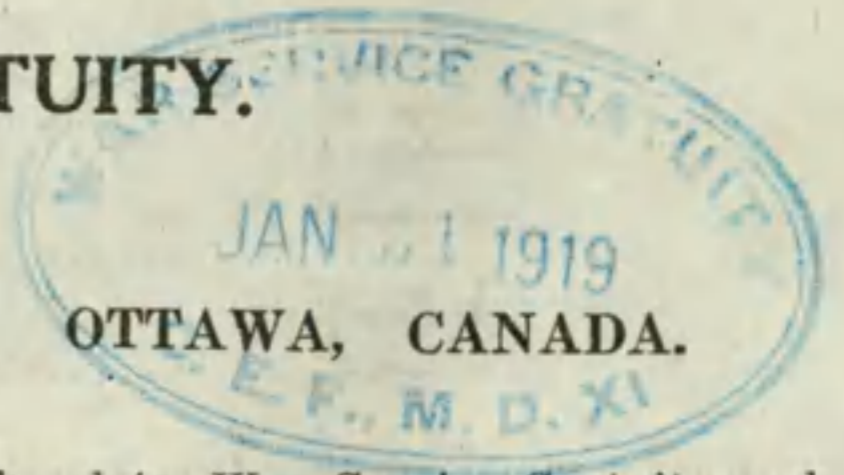
J. H. Smith Captn
Medical Officer i/c case.



Attested
Discharge
6-16-16 D Vancouver
30-1-19 2031- 2 years 3/17

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.



924

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 William 2. Surname Cooke
3. Rank Private 4. Original Unit 158th 5. Reg. No. 646246
6. Address, in full, to which future payments of gratuity are to be forwarded
1293 Leaside Street W
Vancouver
7. Date of enlistment in the C.E.F. Oct 6th 1916 *Home*
8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge Not applicable
9. Relationship of such dependent "
10. Address, in full, of such dependent "
11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? Not applicable
12. Were you at any time on the strength for pay and allowances of a unit of the C.E.F. which was out of Canada or the United States when such pay and allowances were issuable? If so, give particulars of one such unit and dates of service overseas with such unit:—
Not applicable
1st Can Inf Wks Bn. 11/1/17 to 26/9/18.
13. Were you on the strength for pay and allowances of the Clearing Services Command, having been at any time on duty outside of Canada or the United States? Not applicable
14. Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service No
15. Give total length of time which you served on active service, whether in Canada or Overseas, setting out particulars of units on whose strength you served 6/10/16 to 30/1/19
~~27 months~~ 158th Bn. 6/10/16 to 24/12/16 1st Can Inf Wks Bn
11/1/17 to 26/9/18 Gen Depot 26/9/18 to 19/1/18 22nd 19/1/18 to
30/1/19
16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department Department of Public Works
17. Were you a member of the Permanent Force, at the time of enlistment in the C.E.F.? No

W.F.

18. Have you had more than one enlistment? If so, give particulars of discharges and re-enlistments, and under what regimental numbers and units..... *No*
19. Have you already received any payment of Post Discharge Pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid..... *No*
20. Have you been issued with a War Service Badge? If so, what class?..... *No*
21. Have you, during the present war, served in the Imperial Forces?..... *No*
22. Are you entitled to receive, or have you received any gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled..... *No*
23. (a) Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England?..... *No*
- (b) If so, was such reversion in consequence of misconduct or inefficiency?.....
24. Are you now serving in the C.E.F. *Yes No*... If not, give:—(a) Date of discharge..... *30/1/19* (b) Reason for discharge..... *Medical unfitness*
25. Are you at present a member of and in receipt of pay and allowances from any Canadian naval or land forces? If so, give unit..... *No*
26. Did you at any time serve at the front in an actual theatre of war? If so, give particulars of one unit which you served at the front, and dates of such service with that unit.....
Yes 1st Canadian Infantry Works Batt. June 11th 1917 until Sept 26th 1918. France
27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment?..... *No*
- (b) If so, are you in receipt of full pay and allowances from that Department?.....

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

Signature of Applicant: *William Cooke*

Place of Residence: *1283 Georgia St. West Vancouver*

Declared before me at: *Vancouver*

This *thirteenth* day of *January* 19*19*. *J. H. Havel, JP*

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

POST DISCHARGE PAY.				
Date paid	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
.....
.....
.....

Certified Correct.

District Paymaster.

Fill Only.—Unit, Number, Rank and No.

6 207 6

M. F. W. 54. (A. 1)
250M.—1-18.
H. Q. 1772-38-920.

Casualty Form—Active Service.

The Duke of Connaught's Own

Unit, Regiment or Corps 158th (Overseas) Battalion C. E. F.

Regimental No. 646246 Rank Private Name COOKE WILLIAM
C. E. F.

Enlisted (a) 6.10.1916 Terms of Service (a) War + 6 months Service reckons from (a) 6.10.16.

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) Civil Engineer

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
		Embarked Canada 14 Nov. 16			
		Arrived England 20 Nov. 16			
	158th O.P.	Transferred to 1st Ban. Labour Bn	Shoreham	22.12.16	D.O. Pt 2, 262, Shoreham R.O. 649 54 Grenadier Lt + asst Kdys
	O.C. 1st C.L.Bn	Lakenon Strength, 1st C.L. Bn	Shoreham	24-12-16	D.O. Part II. H.G. 74. Harcourt Capt + Adjt. 1st C.L. Batt
	O.C. 1st C.L.Bn	Proceeded Overseas	Shoreham	7/1/17	H.O. Part II 2078. 19 74. Harcourt Capt + Adjt. 1st C.L. Bn
15th	C.B.D.	Disembarked	Havre	11th	L.R. 7305. R. II C.B. 4/1917

CERTIFIED CORRECT
 22-1-16
 9 FEB 1917
 1-17
 CAS. RECORD LONDON

(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.]

Book, W.

646246

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				
7.6.17	76av. 7.A.	Sciatica. Adm.	76av. 7.A.	7.6.17.	a/36/x1550, D.B.S. 30 d/26/17
7.6.17	76av. 7.A. b.R.S.	Sciatica. Adm.	76av. 7.A. b.R.S.	6.6.17	a/36/x1575 D.B.S. 31 d/21/17
9.6.17	1 st b.R. Bn.	Sciatica. To Hosp	Field	7.6.17	B. 213. D.B.S. 31 d/21/17
14.6.17	Gen. b.R.S.	" Adm.	Gen. b.R.S.	7.6.17	a/36/x1573. D.B.S. 32 d/27/17
22.6.17	76av. 7.A. b.R.S.	Sciatica. To Duty	76av. 7.A.	17.6.17.	a/36/x1686, D.B.S. 33 d/30/17
23.6.17	1 st b.R. Bn.	Rejoined Unit from Hosp.	Field	18.6.17	B. 213. D.B.S. 34
2.2.18	Unit	Granted 14 Days Leave to U.K.		1.2.18	B. 213 Pt II d/11 d/14.2.18
23.2.18	do	Returned from -do		17.2.18	B. 213.
		Designation changed to 1st Can Inf Works Bn (Auth: War Office letter 121/Overseas/4848 (A.G.12) d/11-3-18.			PT. II d/19 d/26-3-18.
1.6.18.	Unit	To Hosp.	Fld.	1.6.18	B. 213
1.6.18	1 C.C.S.	Lac. W. R. Hand (Acc)	Adm.	1.6.18.	F. 5018.
1.6.18.	72 F.A.	do. To No. 1 C.C.S.		1.6.18.	F. 5038.
3.6.18.	2 Av. Gen Hosp.	do. Adm.		3.6.18.	F. 5414.
16.6.18.	do.	Lac. W. R. Hand Rt. acc. M. To 1 st Con. Camp.		16.6.18	F. 7799.
17.6.18.	A.A.S.	Injured (Accidentally)	Fld.	1.6.18.	N. 3428. (N.I. 18/13057)
16.6.18.	1 Con. Dep.	Sick.	Adm.	16.6.18.	F. 7692.
18.6.18.	do.	Lac. W. R. Hand acc. & To 10 th Con. Dep.		18.6.18.	F. 7808.
18.6.18	10 Con. Dep.	Lac. W. R. Hand acc.	Adm.	18.6.18.	F. 7964. F. 7977.
9.7.18.	do.	do.		9.7.18.	G. 1237
12.7.18.	C. B. D.	"F.S." from Beulogre "A."		11.7.18.	N.A. 993 (R.R.)

Casualty Form - Active Service.

Regiment or Corps 1st Can. Inf. Wks. Bn. 15th

Rank *Pte* Surname *Peete* Christian Name *Heenan*

Religion *Ch. E.* Age on Enlistment *43* years *—* months

Enlisted (a) *6.10.1916* Terms of Service (a) *War 16 months* Service reckons from (a) *6.10.16*

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

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

Occupation Signature of Officer

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A.36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents
Date	From whom received				
		Embarked ...			
		Disembarked...			
<i>23.7.18.</i>	<i>C.G. S.D.</i>	<i>LEFT FOR UNIT</i>	<i>Hamples.</i>	<i>23.7.18.</i>	<i>NR. 1321D (R.R)</i>
<i>27.7.18.</i>	<i>1st Can. Inf. Works Bn</i>	<i>Rejoined Unit</i>	<i>Fld.</i>	<i>24.7.18.</i>	<i>B.213</i>
		S.O.S. of <i>1st</i> Can. Inf. Wks. Bn. on		<i>18-9-18</i>	<i>D.O. 594269.18.</i>
		Transfer to <i>1st</i> Can. Inf. Works Coy			
		T.O.S. of <i>1st</i> Can. Inf. Works Coy		<i>14-9-18</i>	<i>D.O. 1 d/57.9.18.</i>
		(Authy. War Office 121/O'seas/5940.			<i>(S.D. 2) d/27-8-18.</i>
		& O.B. 1199/3 d/3-9-18.			<i>Ref. Cdn. Sec., K. R. 2992</i>
<i>21.9.18.</i>	<i>Unit</i>	<i>To O.K. Resurf. for despatch to Eng</i>		<i>20.9.18.</i>	<i>B.213</i>
<i>22.9.18.</i>	<i>C.G. B.D.</i>	<i>L.O.S. from Unit. Disposal 'A'</i>		<i>21.9.18.</i>	<i>NR. 1338 (R.R)</i>
<i>25.9.18.</i>	<i>do.</i>	<i>L.O.S. to Gen. Dep. Honr. 'A'</i>		<i>24.9.18.</i>	<i>NR. 461 (R.R)</i>

(a) In the case of a man who has re-engaged for, or enlisted in Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered.
 (b) Signaller, Shoeing-Smith, &c. (6396) Wt. W1.89 300,000 5/18 McA & W Ltd. Form B/103 (E. 3100)

Cooke Jr.

646246

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				
24.9.18.	Col. Remif.	Transferred to England over 50 yrs of age & posted to Gen. Dep. Thorncliffe		24.9.18.	NR. D. 6/1737 Adm. file KE 24070/623/x 429.5.18. P. 11013 9/2.10.18.
					W. Johnson Capt. for Lt. Col. a.d.c. Canadian Sect.
28.9.18	Gen Depot	Taken on Strength	Schliffe	26.9.18	P. 110231 M. Han Lieut. for Colonel i/c Records, Om 7C
1.10.18.		S.O.S. To 1st Tbes Bn, Seaford.	"	28.9.18	P. 110233 Lieut. for O.C. CANADIAN GENERAL DEPOT.

Overseas Board.

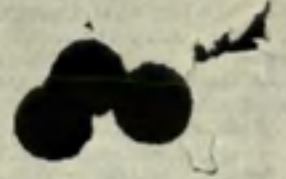
27.10.18
Seaford

646246 Pte Cooke Wm
BCRD

Disability: Debility

History: F.H. negative. P.H. born in England 50 years ago. Went to Canada 1909 enlisted in CEF 6.10.16. Went to France June.11.17 and was there for 21 months. Was in Hospital No.7 Can. Field Am. with sciatica from 7.6.17 to 17.6.17 (MHS) and in 2nd Aus. G.H. with injury to hand in June 1918 for 3 weeks (Man's statement) Returned to unit In September 1918 was sent to base on account of advanced age and unfit for further service in France and evacuated to England Sept.25th 1918 to the BCRD Seaford. Has been on light fatigues since. Boarded B3 Oct.18.18.

Present condition. Pains in legs arms and back. Shortness of breath on exertion. Pulse 84 fair quality. After slight exertion 126. Heart dulness to left of nipple line. No cardiac murmurs. Slight arteriosclerosis. Breath sound roughened, occasional rhonchi along base of each lung. Fine tremor of outstretched fingers. Knee jerks slightly increased. Skin wrinkled. Man has lost weight. All other systems normal for age.



1918
1918

1918

1918

Faint, illegible text covering the main body of the page, possibly bleed-through from the reverse side.

Name Cooke. William Rank Plt Regtl. No. 646 246.

Original unit 158th Present unit 90th Fyle Depot 90th

N. or S. N Age 43 Religion C. E. Ref. H.Q.

Port, ship and date of arrival St. John S.S. Scandinavia 30/11/18.

Next of kin Brother F. W. Cooke Glenarth Sangate Rd. Kent Eng.

Address on leave
Address on discharge 1283 Georgia St. W. Vancouver BC.

Transportation issued Yes No Date Character on discharge

Previous occupation Civil Engineer Date and place of enlistment 6/10/16 Vancouver.

Diagnosis Myalgia Over-age Date of Medical Boards 20/1/19

Date.	Remarks.	Pt. 2 Order No.
<u>11/12/18</u>	<u>T.O.S. Ops. 19/11/18. Post. Hosp. Sect. 17/12/18. leave 23/12/18.</u>	<u>238/2283</u>
<u>1-11-18</u>	<u>OTA + 14 days Sub</u>	<u>HSDO 208/2296</u>
<u>10-1-19</u>	<u>Posted To Laughness</u>	<u>HSDO 9/58</u>
<u>30-1-19</u>	<u>To Disc. Section</u>	<u>ADDO 31/53</u>

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

Date.

Remarks

Pt. 2 Order No.

M. F. W. 192

150m.—5-18

1772-39-1243

Surname	Christian Name or Names	Reg. No.
Cooke.	W.	646246.
Rank	Unit	Co. Troop Batty.
Spr. Sre	1st. Can. Lab.	1 C. I. W. B.
Hospital	Date of Admission	
7. Cav. Fld. Amb.	7-6-17.	
Transferred	1 C C C Station	Hosp. 1.6.18
2 Aus. Gen. Wimmeroux	Hosp. 3-6-18	
25 th Gen. Hosp. Baudouin	Hosp. 16.6.18	
1 Com. Boneloy	Hosp. 16.6.18	

Diagnosis Sciatica.

(1) Later Diagnosis (if changed) Lac. Wd. ^{R.W.} Rt. Hand, Acc. 1/10

(2)

(3)

Additional Diagnosis: if more than one state present

DISPOSITION	To Duty	17-6-17	Date
C.L. 20-6-17. A.93.		Res. 9-7-18	
REMARKS			
C.L. 5-7-17	A 101		
6.6.18	A 29.0		
10.6.18	A 32		
21.6.18	A 42.1		
21.6.18	A 42.2.		
17-7-18	@ 63.4		

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

AD.

(P)

Number 646246 Rank Plt

Surname COOKE

Christian Name William

Units 1st Can Inf Wks Coy Theatre of War France

Date of Service 8-1-17

Remarks

Latest Address 1283 Georgia St N.
Vancouver B.C.

Roll No. B. Page 22145

GRATUITY (IMPERIAL)

CHRISTIAN NAME

SURNAME

REG. No.

SCHEDULE No.

LINE No.

UNIT RETIRED OR DISCHARGED FROM

PLACE OF RETIREMENT OR DISCHARGE

DATE RECEIVED FROM OTTAWA

IMPERIAL DEPOT No.

DATE RECEIVED FROM REG. DEPOT.

DATE FORWARDED TO OTTAWA

WILLIAMS

Name COOKE Rank P/2

Reg. No. 646246

Unit 1st C. I Whs. R

Next of Kin Frederick, William, Cooke Element: Sandgate Rd.

Sandgate

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1916 1. 6.	1. C. C. C. Str.	Lac. Ud Pt	Head Acc		9/6 281	31182
3. 6	2. Aug 3/17	WIMEREUK	do	A 33		1809-7
16. 6	25 th Sep 17	Harōlot	do	A 42		2050
16. 6	1 Con Dep	do	do	A 42		2062/6
9. 7	Wish Rest Camp	St Martin	do	A 63		2535/6

NAME

Cooper William

REGT'L NO.

046246

H. Q. FILE NO. 649.

RANK AND CORPS

Pvt. 1st Cav Labour

FOLLOWS

NO.

CABLE

NO.

DATE

e.

NATURE OF CASUALTY

1st World War (form 158th Bn) June 1st 1918

7-3
Q 281 6-6-18

Adm. I.C.C.H. wdd. accordly hand

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
A 93 ^c	#7 Cav Reg Amb	7-6-17	Scattered
A 101	Discharged	17-6-17	
A 29 ¹	No 1 C. C. Stat.	1-6-18	Lac. wd. rt. hand acc
A 38 ¹	2 Aust. Gen. Winesey	3-6-18	Hdgt. Lat. unit Gen. Dep
A 42	25 Gen. Hosp.	16-6-18	Lac. wd. R. hand acc
A 42 ¹²¹	No 1 Com. Dep. ^{Kandelot} Boulogne	16-6-18	
A 63 ⁴	Discharged	9-7-18	" " " " "

LEDGER No. 352

SERIAL NO. AW3443

REG. NUMBER 646246 NAME Cooper W / 2

RANK Plt CORPS O/S 158th

AGE 48 SERVICE C 1/2 E 5/2 F 1 9/12

NAME OF HOSPITAL Shaughnessy PLACE Vancouver

DATE OF ADMISSION 7/12/18

DISEASE Myalgia Debility

TRANSFERRED TO OTHER HOSPITALS.....

OPERATION.....

DISCHARGED TO 22-1-19 IN CATEGORY E

No. 646246 RANK *Pte*

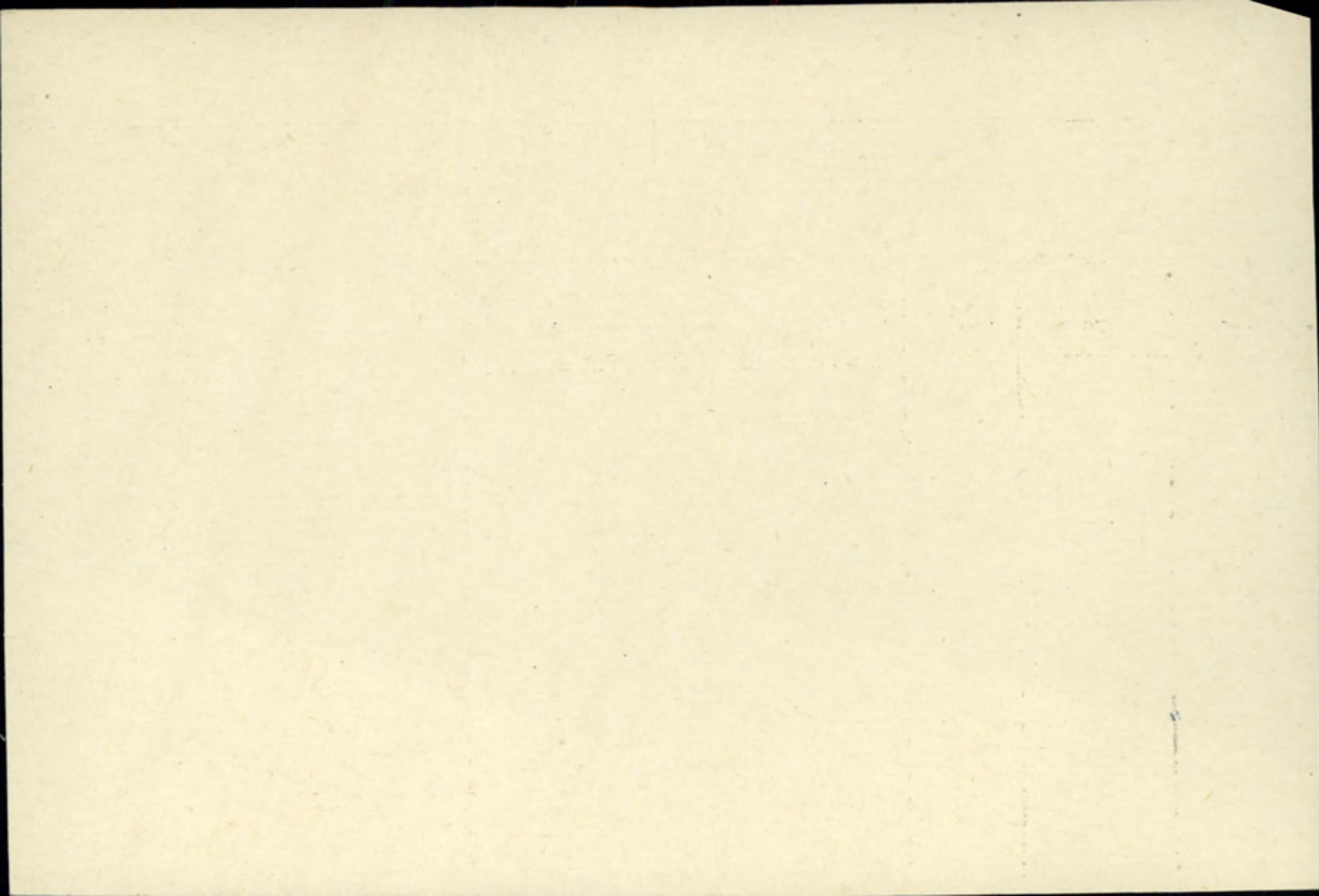
NAME *Cooke, W.*

T. O. S. 6-10-16. UNIT *15-8 th. Battalion, C. E. F.*

(B.O.# 226 of 16-10-16)

M. D. *//*

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1916</i> <i>Oct-6</i>	<i>1916.</i> <i>Oct-31</i>	<i>c</i>		
<i>Nov</i>		<i>n.</i>		



649.6-10600

11. CARD NO. ✓
S.O.S. Div 30-1-1911
D.O. No. 31-1-19
P.U. 11.20

SURNAME.

Looke

CHRISTIAN NAMES

William

REGL. NO.

646246

RANK

Pte

UNIT

158th

Bn

FORMER CORPS

Shrop Geo 3 yrs

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Looke Frederick William

RELATIONSHIP TO SOLDIER

Brother

ADDRESS

Glenest, Sandgate Rd,
Sandgate, Eng.

COUNTRY OF BIRTH

England

London

DATE

Oct 4th 1873

PLACE OF ATTESTATION

Canoeover B. & C.

DATE

Oct 6th 1916

sailed from Halifax 14/11/16

R/L 30-11-18
ph. J. J. Olympia

MARRIED

SINGLE

WIDOWER

TRADE OR CALLING

Civil Engineer

RELIGION

Church of England

DESCRIPTION.

APPARENT AGE

43

YEARS

MONTHS

HEIGHT

5

FEET

7 1/2

INCHES

CHEST MEASUREMENT

38 1/2

INCHES

EXPANSION

2

INCHES

COMPLEXION

Dark

EYES

Grey

HAIR

Dr. Brown

DISTINGUISHING MARKS

4 Scars L. Scars on forehead.

MEDICAL EXAMINATION.

PLACE

Vancouver B.C.

DATE

Oct 6th 1916

Present address. 1831 Robson St. Vancouver

B.C.

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form B. 263	Attestation Paper	Militia Form W. 23
Squadron } Battery } Company }	Conduct Sheet, " B. 263a	or Particulars of Recruit	" W. 133
Field Conduct Sheet	" W. 178	Proceedings on Discharge	" B. 218
Copies of Convictions, by C. P.	in MS.	In the case of recruits who are rejected on final approval, the discharge documents will consist of (a) Proceedings on Discharge. (b) Attestation. (c) Medical History Sheet.	
Med. Hist. Sheet,	Militia form B. 313		
Casualty Form	" W. 54		
Medical Report for Invalid§	" B. 227		
Dental History Sheet	" B. 465		
Last Pay Certificate	" W. 44		
Duplicate Discharge Certificate	" W. 39A		
‡Form of Will	" W. 82		
§Only if discharged "Medically unfit."			
‡Only if man has not been overseas.			

Documents not accompanying this form should be crossed out.

I hereby certify that the following documents are unobtainable.

Officer Commanding.

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

This space to be for numbers.

Proceedings on Discharge.

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

No.	646246
Rank	Pte.
Surname	Booke
Christian name	William
NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.	
Corps (Squadron, Battery or Company)	158 th Battr.
Date of discharge	Jan. 30/19
Place of discharge	Vancouver, B.C.
1. DESCRIPTION AT THE TIME OF DISCHARGE.	
Age	46 years — months.
Height	5 feet 7 1/2 inches.
Complexion	dark.
Eyes	blue.
Hair	d. brown.
Trade	civil engineer
Intended place of residence	1283 Georgia St. N.
(To be given as fully as practicable.)	Vancouver B.C.
2. The above-named man is discharged in consequence of <i>medical unfitness</i> under <i>Authority for discharge A.C. 1420 (A) of 12/2/18</i>	
N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.	
3. Conduct and character while in the service have been, according to the records, etc.	
N.B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldiers and the Officer Commanding his Squadron, Battery or Company.	
4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)	

M. F. B. 218.
200M.—5-18.
H. Q. 1772-39-113.

MEDICAL DOCUMENTS
FORWARDED TO
S. C. R. or B. P. C.
4/2/19

(OVER)

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

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

6. Medals and Decorations

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

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

(Place).....

(Date)..... Commanding.....

8. Certificate to be signed by the Soldier on Discharge

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

(Place)..... (Signature of Soldier.)

(Date)..... (Signature of Witness.)

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

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

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

.....(Signature of Soldier.)

10. Statement of Service.

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

Total.....years.....days.

11. Confirmation of Discharge.

The discharge of the above named man is hereby confirmed.

(Place)..... (Signature).....

(Date).....

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.)

None
W. Cooke



W. Anclreux
Capt.
for G. G. District Depot, XI

LIST OF DISCHARGE DOCUMENTS.

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

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

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

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

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

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

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

- (a) Discharge certificate (Army Form B. 2079 or Army Form B. 204).
- (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.

EMBKD LPOOL
SCANDINAVIAN 19/1/18
This space to be left blank for the Chelsea Number.

CANADIAN DISCHARGE DEPOT, B.C.F.
BUXTON, DERBYSHIRE
OCT 28 1918
FILE

4595
11489
Army Form B. 268
Shaugh 30/1/19

Proceedings on Discharge.

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

No. <u>646246</u>	Army Rank <u>Plc</u>
Name <u>Looke</u>	<u>William</u>
(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)	
Corps <u>BORD</u>	
Battalion, Battery, Company, Depot, &c. <u>158th</u>	
(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)	
Date of discharge _____	
Place of discharge _____	
1. Description at the time of discharge.	
Age <u>50</u> years _____ months	Descriptive marks. <u>ESR</u> Deceased 11-6-43 649-C-15600
Height <u>5</u> feet <u>7 1/2</u> inches	
Chest measure— girth when fully expanded _____ ins. range of expansion _____ ins.	
Complexion _____	
Eyes _____	
Hair _____	
Trade <u>Gov. Civil Servant</u>	
Intended place of residence <u>Vanoules</u>	
(To be given as fully as practicable)	
(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)	
2. The above-named man is discharged in consequence of <u>Returned to Canada in accordance with instructions under Paras. 7 & 9 of A.G. 5-1-22 of April 5th, 1918.</u>	
Category <u>D. 3.</u>	
(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:—	
4. Character awarded in accordance with King's Regulations:—	
To be filled in on the soldier quitting the Colours.	
Certified that the above is an accurate copy of the character given by me on Army Form B. 2067* and that Army Form D. 489 was awarded in this case.	
Initials of Commanding Officer. _____	
Army Form B. 2088 has been issued to*	

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

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

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

6. Campaigns, Medals and Decorations

France 21 Months

Certificate of education

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

(Place) _____

(Date) _____ Commanding _____ Battn. _____ Regiment.

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

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

(Place) _____ (Signature of Soldier.)

(Date) _____ (Signature of Witness.)

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

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

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

(Signature of Soldier.)

10. Statement of service.

Service towards engagement to _____ (the date to which the record of service is completed) _____ years _____ days.

Further service " " _____ (the date of confirmation of discharge) " " "

Total " " "

11. Confirmation of discharge.

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

(Place) _____ Signature _____

(Date) _____

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

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.)

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

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

on the _____ day of _____ 191

Members of the Board:—

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

Dated at _____ this _____ day of _____ 191

Signatures of the Board

President.

Reserved for M.H.C.

Regt. No. 646246 Rank Pte Surname Cooke Christian Name William
Unit or Corps—(a) Overseas from United Kingdom (b) In United Kingdom B.C.P.D.
Born at—Town London County or Province London Country England
Date of Birth—Day 4th Month October Year 1868 Age 50 yrs. months
Joined at Vancouver, B.C. Date 6th October 1916
Former Trade or Occupation Civil Servant
Permanent marks or peculiarities that will serve for future identification
Scar over left eye.
Four vaccination marks, left arm.
Height—feet 5 inches 7² Colour of eyes Blue
Signature of Soldier (for identification purposes) W. Cooke

Medical Report.

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

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

Group the disabilities, placing those resulting from separate causes in separate groups.

- Disabilities Group (a)
- Disabilities Group (b)
- Disabilities Group (c)

Debility.

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

	Disease or injury to which the disability is due.	Place of origin.	Date of origin.
(i.) As to Group (a) above.	Advanced age	Canada	Prior to Enlistment
(ii.) As to Group (b) above.			
(iii.) As to Group (c) above.			

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

3. Is the disability due to disease contracted or injuries received prior to Active Service?
(i.) As to Group (a) above? Yes If yes, has Active Service aggravated it? Yes.
(ii.) As to Group (b) above? — If yes, has Active Service aggravated it? —
(iii.) As to Group (c) above? — If yes, has Active Service aggravated it? —

4. Is the disability due to disease contracted or injuries received while on Active Service—
(i.) As to Group (a) above? No
(ii.) As to Group (b) above? —
(iii.) As to Group (c) above? —

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

- (i.) While on duty? *Not applicable*
- (ii.) Was a Court of Inquiry held? *Not applicable*
- (iii.) Where? *Not applicable*
- (iv.) When? *Not applicable*
- (v.) Opinion of the Court? *Not applicable*

6. HISTORY OF THE CASE. (State concisely the essential points of the history, noting the entries made on the Medical History Sheet and other records).

Family history negative
 Personal history: Born in England 80 years ago. Went to Canada 1909. Served in 6th Y. 6th Oct 1916. Went to France Jan 11 1917 and was shot for 21 months. Was in Hosp 1109 Gen Hqs. Ambulance with (Scatica) from 7-6-17 to 14-6-17 (M.H.S.), and in 2nd Australian Genl Hosp with (Surgery) to hand in June 1918 for 3 months (Main Statement). Returned to Unit. In September 1918 was sent to base on account of advanced age unfit for further service in France, and evacuated to England Sept. 25th 1918 to the B. C. R. D. Seaford. Has been on light fatigues since. Boarded P.M.H. not likely on Oct 18th 1918.

7. PRESENT CONDITION. (Give previous and present weight if likely to indicate progress of disability.)

Complaints: Pains in legs, arms and back. Shortness of breath at exertion.

Examination: (1) Pulse 84, fair quality. After slight exertion 126. Heart dullness to left of nipple line. No cardiac murmurs. Slight arterio-sclerosis. (2) Breath sounds roughened, occasional rhonchi along base of each lung. (3) Fine tremor of fingers. Nails pink slightly increased. Skin wrinkled. Man has lost weight. (4) All other systems normal for age.

- 8. OPERATION. (i.) Was one performed? *No*
- (ii.) If so, state what. *Not app.*
- (iii.) Was one advised and declined? *—*

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

- 9. (i.) Is there loss or decay of teeth attributable to Active Service? *No*
- (ii.) If so, describe. *Not app.*

10. DO YOU RECOMMEND:—

- (a) Fit for duty? *No*
- (b) Fit for base duty? *Yes P.M.H. Not likely to be raised in category in 6 months.*
- (c) Invalid to Canada? *No*
- (d) Discharge from the Service as permanently unfit? *No*

Date of Report *October 22nd 1918*

Station *B. C. R. D. Seaford*

Signature *James C. Macdonald*
 Officer in medical charge of case.
Capt. R. A. H. P.

I have satisfied myself of the general accuracy of the above Report, and concur therein except

Newcombe Capt. Officer i/c Hospital } Strike out one
 S.M.O. Brigade } of these.

Dated at *Seaford Sussex* Station, on *Oct. 24* 191*8*

* Delete if inapplicable.

Proceedings of a Medical Board on the Soldier mentioned in Part I.

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

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

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

13. Was the disability caused or aggravated by—

(a) Negligence of the Soldier	Caused? <i>No</i>	(b) Misconduct of the Soldier	Caused? <i>No</i>
	Aggravated? <i>No</i>		Aggravated? <i>No</i>

14. THE ENTIRE DISABILITY.—Without regard to his regular occupation, to what extent is his capacity lessened at present for earning a full livelihood in the general market for untrained labour? (Estimate at none, 10%, 20%, 30%, 40%, 50%, 60%, 70%, 80%, 90%, or 100%). *Not App.*

15. THE PENSIONABLE DISABILITY.—see Part I. (3). Aggravation on Active Service of a disability existing previous to joining is to be included in the estimate. What part of the entire disability estimated next above in (14) is due to causes arising during Active Service? (Estimate at none, 1/4, 1/2, 3/4, or all.) *Not App.*

16. Permanency of the Pensionable Disability estimated next above in (15).

- (i.) Is it permanent? *Not App.*
- (ii.) If not permanent, what is its probable minimum duration (in months)? *Not App.*

17. If an operation was advised and declined, do you consider the refusal to have been unreasonable? *Not App.*

18. Remarks.

19. Recommendation:—(a) Fit for duty? *No*
- (b) Fit for base duty? *Yes P.M.H. not likely to be raised in 6 months*
- (c) Invalid to Canada? *No*
- (d) Discharge from service as permanently unfit? *No*

Classification for the Military Hospitals Commission.

Date of Board *24-10-18*

Station *Seaford*

Signatures of the Board.
J. W. Mackie Capt. President.
James C. Macdonald

Approved *24 OCT 1918*

Dated at *Seaford, Sussex.*

A.D.M.S. *Newcombe*
 Station *Seaford, Sussex.*
 for A.D.M.S., Canadians, *Captain, 1914, M.C.*

APPROVED

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.

8. Sciatica.

9 a. Left thigh and leg, no atrophy, no pain on movement at present, no limitation of range or power of any movements. Is subject to attacks of sciatica during bad climatic conditions or after prolonged use of leg. No creaking in knees to-day.

19. Is the invalid fit for

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

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.)

no

- (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.)

category E for discharge

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.

PLACE Vancouver B.C.

DATE 16.1.19

A.P. Thomas President.
J. Macdonald Capr Members

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.

PLACE..... President.

DATE..... Members

APPROVED BY *[Signature]* APPROVED BY *[Signature]*
 Assistant Director of Medical Services M.D. 11 Director-General of Medical Services.
 DATE 1 JAN 20 1919 DATE.....

THIS FORM WILL BE USED FOR ALL RANKS
 MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

- 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.
- 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."
- 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.
- Special care is required in answering question 9. Read the questions carefully. All questions must be answered.
- If space provided under any section is insufficient add another sheet. Such sheets must be initialled by the Medical Board.
- A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board."
- Under no circumstances may information other than that in sections 7, 8, 9 and 10 be communicated to the invalid, directly or indirectly.
- 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 *Shaughnessy Vancouver B.C.* DATE *16.1.19.*

1. 1 (a) Unit *158th* (b) Regimental No. *646246* (c) Rank *pte*

(d) Surname *Cooke* (e) Christian name *William*

(f) Home address *1283 Georgia Street Vancouver B.C.*

(g) Next of Kin *Eliza Jane Cooke* (h) Relationship *wife*

(i) Address of Next of Kin *1283 Georgia Street Vancouver B.C.*

2. Age last birthday *48* Date of birth *4th Oct. 1870*

3. Enlistment, or Appointment (if an Officer) (a) Place *Vancouver B.C.* (b) Date *6.10.16*

4. Personal description:
 (a) Height *5'7 1/2"* (b) Weight *155* (c) Complexion *dark*
(stripped)

(d) Colour of hair *d. brown* (e) Colour of eyes *blue* (f) Identification marks, Scars, etc. *scar on left eyebrow and right hand and 4 vaccs marks l. arm.*

5. Former trade or occupation *Civil engineer* *A.D.M.S.*

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
<i>2</i>	<i>101</i>
<i>JAN 18 1919</i>	
<i>VICTORIA, B. C.</i>	

	PERIODS	
	From	To
Canada	<i>Oct. 1916</i>	<i>Nov 1916</i>
	<i>Dec 1918</i>	<i>present</i>
England	<i>Nov 1916</i>	<i>Jan 1917</i>
	<i>Sep. 1918</i>	<i>Nov. 1918</i>
France or other theatres of War	<i>Jan 1917</i>	<i>Sep 1918</i>

7. Original disease, or injury *1. Myalgia (sciatica)*
2. Overage.

(a) Date of origin *1. Nov. 1916. 2. n/a* (b) Place of origin *1. England. 2. N/A*

(c) Cause *1. Exposure. 2. n.a.*

M. F. B. 227.

300M.-8-18.
 1772-39-117.

8. Present disability— (Here state the exact nature of the disability resulting from the disabling conditions: e.g. (a) Weakness—light, 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.)

1. Myalgia. (sciatica)

2. Overage.

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.)

Robust looking man well covered. Soft muscular condition. 1. Was laid up with sciatica in France. This condition much improved but has pain along posterior aspect of left thigh and hip joint in damp weather. Occasionally keeps him awake at night. Creaking arthritis of both knees. The shoulders are free. No lumbar pains. No urinary symptoms, no nocturia. 2. Well preserved man for his age active. Heart enlarged to left nipple line, no murmurs. Emphysema fairly marked. Very slight cough and expectoration. Lungs at present both dry. Mild degree of sclerosis. Pulse 80 regular. Radials not very cordy. Can walk well, 2 or 3 miles when the sciatica is not troublesome. Can do light work as an engineer, but is liable to be laid up with sciatica in wet weather.

(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. as above Genito-Urinary System. no (If pulse rate is abnormal, B. P. will be taken.) (Albumen and Sugar will be excluded.) Special Senses. no Respiratory System. emphysema Integumentary System. no Disturbances of Mentality. no Digestive System. no Muscular System. no Osseous and Joint Systems. arthritis of Any other general condition. no knees.

10. (a) History (of the condition referred to in Section 9 (a).)

Carried on in France 21 months. Wounded in left hand June 1918. Hospital 3 weeks, returned to duty after 4 weeks convalescent. Sciatica in Nov. 1916 in England. Recurred in France 1917. Hospital at Rest Camp, Peronne, 3 weeks. Evacuated to England for age and rheumatism September 1918

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).)

Never sick before enlistment.

(c) (Here give a description of wounds, scars and deformities.)

scar of right hand.

11.—(a) Did the disabling condition have its origin before enlistment? 1. No. 2. n.a.

(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.)

1 and 2. No.

12. Was the disability caused, or aggravated; (a) by intemperance, or improper conduct; or (b) by unreasonable refusal to accept treatment? 1 and 2. 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? 1. 12 months. 2. Permanent.

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

Medicinal and rest France and England.

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? (If not, briefly state why)

no

17. Recommendations. category B for discharge

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, W. Cooke, 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

A.R.I.

W. Cooke Pte. Rank. Signature of invalid examined.

NUMBER

RANK

NAME

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
	Balfoward	3660			973			15	83 47		
				57463 4.10.18 3660	3602				4034		
		3660			4866			15			
				NR. 2146 137.1/18 6000 Boston	2920				1584		
					2920						

Posthumous 19.11.18 200293660 7.10.18

CANADIAN
 ASSIGNED PAY AUDITED
 0/12
W. J. ...
 AUDIT CLERK
 DATE 14-5-18