Duplicate

5 3684 6

ATTESTATION PAPER.

No. ~~18~~ 684

Folio. 3

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

1st Battalion

		(ANSWERS)
1.	What is your name?	William Hawksbee
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?	Wm Henry Hawksbee
4.	What is the address of your next-of-kin?	London England
5.	What is the date of your birth?	13th July 1890
6.	What is your Trade or Calling?	Farmer
7.	Are you married?	no
8.	Are you willing to be vaccinated or re-vaccinated?	yes
9.	Do you now belong to the Active Militia?	no
10.	Have you ever served in any Military Force? If so, state particulars of former Service.	no
11.	Do you understand the nature and terms of your engagement?	yes
12.	Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE?	yes

J W Shaw (Signature of Witness)

William Hawksbee (Signature of Witness)

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, William Hawksbee, 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.

William Hawksbee (Signature of Recruit)

Date Nov 3rd 1914. J W Shaw (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, William Hawksbee, 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.

William Hawksbee (Signature of Recruit)

Sworn at Nov 3rd 1914. J W Shaw (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 Ottawa this 3rd day of Nov 1914.

Notary Public Eng. H Hay Lt Col (Signature of Justice)

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

Alex Wilson Lt Col O.C. 38th Regt (Approving Officer)

200 M.—8-14.
H.Q. 1772-1-13.

Description of William Hawksbee on Enlistment.

Apparent Age 24 years 3 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 8½ ins.

Chest measurement: Girth when fully expanded 38¾ ins.
Range of expansion 3¾ ins.

Complexion ruddy

Eyes Brown

Hair Brown dark

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

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

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

CERTIFICATE OF MEDICAL EXAMINATION.

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

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

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

Date Nov 3 1914.

Place Christmi

J. B. Shaw Major
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.

Wm Hawksbee 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.

E Sligh (Signature of Officer)

Date Nov 28 1914.

2nd 13-6-19.

REGIMENTAL DOCUMENTS

NAME Hawksbee, Wm. 1Pte REGT. NO. 3-36844 UNIT 18th Bn. H. Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
1	ATTESTATION PAPER (M.F.W. 23, 133, or 51)		H.Q. 1st Div.			DEATH
2	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)		Records			Category
	TRAINING HISTORY SHEET (M.F.W. 113)					
1	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
1	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)				15107	
1	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
2	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
	DENTAL HISTORY SHEET (M.F.B. 465)					Category
3 2	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					Demob.
	MEDICAL EXAMINATION (M.F.W. 129)					
	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
	LAST PAY CERTIFICATE (M.F.W. 44)					
1	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	S.C.D. 3					
1	K.A.R. 1909					
1	Vaccard					
1	473737					
1	R122					16.6
1	Pay Bk					24-6
1	A & D Book.					30 6
						2

W 2589
100M-11-18
1774 & 1377

NAME Hawkshee H.

RANK AND CORPS Pte. 18th Bn

REGT'L. No. 2-36844

H. Q. FILE No. 649

FOLLOWS
No.
FOLLOWS

CABLE

No.	Date

NATURE OF CASUALTY

L. L. 18950—M. & D. 7789

M. F. W. 42—30M.—4-17.
H. Q. 1772-39-893.

LIST NO.	HOSPITAL	DATE OF ADMISSION	REMARKS
No. 194.	Nd Can. Gen Eastaples	22-4-17	Influenza Slt.
B345	Whsndaffe var Sheffield	29-4-17.	Myalgia
B401	Mil Conv Epsom	10-7-17	Myalgia
B424	Barnwell Mil Cambridge	10-8-17	D Sed
B213	Mil Conv Woodcote Park Epsom	10-5-18	U. D. S. (Discharged

Form DMS 1001.

Local

Convalescent Hospital, Woodcote Park, Epsom.

HOSPITAL.

A. & D. CARD

11

AT

A. & D. No. T885 PL. OF ACTION

RANK Pte. REG. No. 53684 UNIT 4th Res. SICK OR WOUNDED

NAME Hawksbee W.H. AGE 27 RELIGION C of E.

PLACE IN HOSPITAL

DIAGNOSIS Gen. 20 Cured.

ADMITTED 28-3-18 FROM Barnwell. Cambridge.

DISCHARGED A. 10.5.18 TO 4th Can. Res. Bramshott.

TRANSFERRED

SERVICE AT HOME 3 6/12 IN FIELD 11/12

RESULTS

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

P.T.O.

REMARKS.

29.3.18 V.D. Gon. States he has slight discharge on mornings condition present since Aug. 17. Complains of pains in hips & legs at times. Path rep. on smear.

22.4.18 Recovered Fit for Catagory A.

K. K. Blackadder
Capt.

FORM R. 149.
7106—250m—7/2/17.

Name HAWKSBEE William Rank Pte. Reg. No. ~~53648~~ 53684

Unit 18th Battalion.

Next of Kin Henry Hawksbee, Londo n Eng.

Date 1917.	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
22-4	1 Can.G.H.Etaples.		Influenza Slt.		A494	
29-4	Wharncliffe War	H.Sheffield	Myalgia	B345		
	Erratum:- Correct Regt.No. 53684			B351		
10-7	M. Gn. Hosp Epsom.		Myalgia	B 14.01		
10-8	Barracks Sick	Hosp	[illegible]	B 14 36		
29-3-18	Warbeys Pk Epsom		do	B 3 3 13		15230
18-5	Discharged.		"			53036

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

No. 684 / 3-3684 Rank Pte Name Hawkshee, W H

T. O. S. Unit 8th Battalion.

M. D. /

Paid From	Paid To	Sig. or Rec't	Promotions, Transfers, Discharges, etc.	
			Particulars	Authority
1914	1914			
Nov 3	Nov 30	✓		
	Dec	✓		
1915	1915			
	Jan	✓	mulct - pay. 4.40	Do. 65.
	Feb	✓		
	Mar	✓		
	Apr	✓		

UNIT SAILED
APR 18 1915

NAME Hawksbee, William

RANK & No. Pte. (S.O.S. 24-5-19 Demob. 20.0.148 of 28-5-19.) 53684.

CORPS 18th Battalion.

ENLISTMENT, PLACE Clinton DATE Nov. 3rd 1914.

FORMER CORPS Nil.

COUNTRY OF BIRTH London, England.

NEXT OF KIN Hawksbee, Mrs. Henry.

ADDRESS OF NEXT OF KIN 79. Church Rd. Epsom, Surrey.

54-21-38-1 10/5/18

DISCHARGE, PLACE

Sailed from Halifax per S.S. "Grampian" 18-4-15 — 64/12

R/C. 22-5-19 329/53. Pte

REMARKS:

Number 53684 Rank Pte

Surname HAWKSBEE

Christian Names William Henry

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

Date of Service 14-9-18

Remarks

Latest Address Fordwich Ont. R.D.

Roll No. B. Page 2423

92447 Dep
JUN 1 1921
Qa 39798 Coll
SEP 14 1921

FORM D.M.S. 1300.
137—50m—28/2/17.

Surname	Christian Name or Names	Reg. No.
Hawksbee	W.	53684

Rank	Unit	Co.	Troop	Batty.
Pte	18th Bn			

Hospital — Date of Admission

Transferred 1.C.G.H. ETaples 22-4-17
Wharncliffe War Sheffield Hosp. 29.4.17.
Mil Conv. Epsom. Hosp. 10.7.17
Barnwell Mil Camb. Hosp. 10-8-17.
Mil Convl. Epsom. Hosp. 29. 3. 18.

Diagnosis Infl'za
(1) Later Diagnosis (if changed) Myalgia Rw. Rw add.
(2) V.D.G. ft
(3)

Additional Diagnosis: if more than one state present

DISPOSITION — Date

C.L.30-4-17 A494
4.5.17 B345
12.5.17 B351 Rtn.
12.7.17 B401
15-8-17 B434
2. 4. 18 B177.
15.5.18 B213.

REMARKS 10. 5. 18.

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

EPITOME OF HOSPITAL TREATMENT.

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

C.A.D.C. 5009A

Group No. 23

CANADIAN ARMY DENTAL CORPS, O.M.F.C.

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) HAWKSBEE W

REGIMENT 18th Can Bn. W.O.R RANK Pte No. 53684

Date of Examination in England April 7th 1919 | Date of Examination in France

DIRECTIONS TO DENTAL OFFICERS

1. This form will be made out for each individual at the time of Demobilization in England or France.
2. Figures as per chart will be used to designate teeth concerned.
3. In reference to Partial Dentures the numbers of teeth thereon will be stated.

1791

PRESENT DENTAL REQUIREMENTS

1. FILLINGS 12,
2. EXTRACTIONS
3. CROWNS
4. DENTURES
   - (a) Full Upper
   - (b) Part Upper
   - (c) Full Lower
   - (d) Part Lower

CONTENTS COPIED ... D. No. 1.

HAS HE EVER REFUSED DENTAL TREATMENT?

HAS HE EVER RECEIVED DENTAL TREATMENT? (Reply by "*Yes*" where applicable to any or all of *a*, *b* or *c*.)

- (a) In Canada
- (b) In England Yes
- (c) In France

Signature of Dental Officer A. R. Hynes Capt.

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

WAR SERVICE BADGE.
CLASS "A" No.....

THIS IS TO CERTIFY that No. 53684 (Rank) Pte

Name (in full) William Hawksbee enlisted in

the 18th Battalion

CANADIAN EXPEDITIONARY FORCE at Clinton on the 3rd

day of November 1914.

HE served in England and France in 18th Bn

and is now discharged from the service by reason of Demobilization.

~~Medical Unfitness~~.

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

Age 28 years

Height 5'8½"

Complexion Ruddy

Eyes Brown

Hair Brown

Marks or Scars

Nil

.....
Signature of Soldier.

Date of Discharge

DISCHARGE SECTION
MAY 24 1919
No. 1 District Depot

J. Reid Lt.
Issuing Officer.

.....
Rank

for O. C. Dispersal Area Sta. "K"

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.

M.F.B. 39A.

(9173)—Wt. W12165—2146.—1,250,000.—2-15.—C. & G. Forms B. 103/1. (Sheet No. 1) **Army Form B. 103.**

W.S.B, CLASS. "A" Casualty Form—Active Service.

CERTIFIED CORRECT.
Canadian Record Office,
Westminster [illegible],
7, Kingsway, London.

Regiment or Corps 18th Battalion, C.E.F.

Regimental No. 53684 Rank Pte Name Hawkshee William

Enlisted (a) 3rd March 1914 Terms of Service (a) D/L War Service reckons from (a) 3-11-14

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) Farmer

Report: Date	Report: From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
	18th Bn	Arr. in Emb. for France Disembarked in France	England Boulogne	29-4-16 14-9-15 15-9-15	Nom Roll
19-5-16	18th Bn.	Granted 8 days leave to	England	14-5-16	B. 213. Pt. II Order 23, 7/6/16.
26-5-16	do	Returned from leave		23-5-16	do DCS. 203.
28-11-17	18th Bn.	To Field Ambulance		20-11-17	B. 213.
22-11-17	1 Can Gen.	Influenza. Adm.	No. 1 Can. Gen.	22-11-17	W3034.
28-11-17	H.S. Stad Antwerpen	Myalgia Adm. (Posted to West. Dist. Regtl. Depot, Bramshott)	H.S. Stad Antwerpen	28-11-17	W3083 (Can. Sect. No. 9974) Pt. II Order 33, 13/5/17.

J. Hogan Capt. for Lt.-Col., A. A. G.
Canadian Section, G. H. Q. 3rd Echelon, B. E. F.

(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.

OVER [P.T.O.

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
4-5-17	18th Bn	Wharncliffe War Hosl.	Sheffield	29.4.17	Pt II 345
7-5-17	W.O.R.D.	T.O.S. from 18th Bn	Bshott	29.4.17	Pt II 0.52
Embark					FOR LT: COL: I/C RECORDS, C.O.M.F. LIEUT;
9-8-17	O.C. 2nd CCD	attached to 2nd CCD.	Bramshott.	6-8-17	Pt II DO 167
30.8.17	2nd. C.C.	D. Ceases to be attached to 2nd. C.C.D. on admission to Barnwell M. Hospital, Cambridge.	Bramshott.	9.8.17	Pt 2. D.O,#168. For OC. 2nd. CCD.
9-8-17	W.O.R.D	Discharged from Hospital on Command 2nd CCD	Bramshott	6-8-17	Do H 132
3/8/17	W.O.R.D	Ceases to be on Command 2nd CCD patient in C.M.H.D. Bshott	do	9-8-17	Do H 151
1-4-18	W.O.R.D.	Will now be shown as patient in Barnwell Mil Hospl	B'shott	28-3-18	Do H 77
	W.O.R.D	Cambridge Discharged from Hosp. Cote H. S.O.S on posting to 4th Res Bn.	Witley	10.5.18	D.O. H 112 Asst: Adjt. West Ont: Regtl. Depot
11-5-18	O/C 4th Res. Bn.	T.O.S. 4th Res. Bn. on posting from W.O.R.D. (Eps. 5506)	Witley	10-5-18	Part 2 order No 112.
5-9-18	4th. Can. Res. Bn.	Having proceeded Overseas to 18th. Battalion is S.O.S. 4th. Res. Battn.	Witley	4-9-18	Pt. 2 D.O. No. 210. A.B. Lieut. Adjt., for O.C. 4th. Can. Res. Bn.

CERTIFIED CORRECT. 18 SEP 1918 CAN. RECORDS, LONDON.

OVER

Rank | Name HAWKSBEE, William | Reg'l No. 53684

Unit 18th. Battn. | If in perm. Corps, What Unit? | Married or Single Single

Place and Date of Enlistment Clinton, Ont., 3rd. Nov. 1914 Place of Birth London, England.

Name and Address, Next-of-Kin ~~Henry~~ Mrs. E. Hawksbee, ~~London, England.~~

79 Church Rd, Epsom Surrey Relationship Mother

Assigned Pay Monthly $ Rl 29.43. 5/18 Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

N/E. R.B. No. 7741
File R.L.
Cat. Con.
CAN.OR

Report Date	Report From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place	Date	REMARKS Taken from Official Documents
29.4.15	O.C. 18th	Appointed S.S. Grampian	England	29.4.15	Information Form
1-8/5/15	do. 18th	Forfeits 1 days pay. AWL.	Shorncliffe	6-5-15	Part II orders 142.
10-7-15	" "	Forfeits 4 days pay AWL	West Sandling Camp	10-7-15	" " No 13
22-8-15	"	Forfeits 1 days pay AWL	"	22-8-15	" " 353
18-9-15	"	Embarked for France	Folkestone	14.9.15	Inform. Form
7.6.16	"	Granted 5 days leave from		14.5.16	Part II 23.
21.6.16	"				
30.4.17	"	Adm No 1 C. Gen. Hosp.	Etaples	22.4.17	Ch. A 494 Influenza
4.5.17	-	" Wharncliffe War Hosp	Sheffield	29.4.17	" B 345 Myalgia
7.5.17	W.O.R.D.	T.O.S. on adm to Hosp	Bishopstone	-	Pte 52 - 18th Bn " 33 of 13/5/17
13.7.17	18th Bn	Ext. Military Conv. Hp.	Epsom	10.7.17	Ch. B 401.
9-8-17	WORD	On Com 2nd CCD	Bishopstone	6-8-17	Pte II 132. 1st C D Pte II - 167 9/8/17

Report Date	Report From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place	Date	REMARKS Taken from Official Documents
		Reason to Grant 2 CD Adm.			2. B.B.O. Pte 168 3/8/17
					100RA. 157. 31-8-17
15-8-17	18 Bn	~~Pte~~ 15 Barnwell Mil Hosp	Cambridge	10-8-17	C.R.B. 424 VDC.
11.5.18	D.O.R.D	S.O.S. to 4th Res	with	10.5.18	Pte II O 1124 (4th Res Pte II O 1124 11.5.18
5-9-18	4 Res.	S.O.S. to 18 Bn O/S	"	Pte 4-9-18	" 2108 18 Bn 880/14 9/18
9-4-19	Pte C.C.C.	S.O.S. from 18th Bn	"	" 5-4-19	- 2
			60-VC-	15.5.19	

13 5 19 Pte Wing S O S To Canada Witley 13 5 19 D0 28

MEDICAL HISTORY SHEET.

53684

Surname Hawksbee (Hawksbee) Christian Name William

Examined on 3rd day of November 1914 at Clinton. Ontario

Approved by Dr. Hagg Major

Birthplace City or Town London

County England

Rank Pte M.O. 2nd Division

Apparent age 24 years 3 months

Trade or occupation Farmer.

Height 5 Feet 8 1/2 Inches.

Weight 6 Lbs.

Chest measurement Minimum 35 3/4 inches.

Maximum expansion 38 3/4 inches.

Physical development good

Small-Pox Marks none.

Vaccination Marks Arm Right. 6 Left.

Number 6

When Vaccinated last 6

(a) Marks indicating congenital peculiarities or previous disease none

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

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

MAY 1917

23

Date	Result	~~Vaccinations.~~ A-T-2.
9/4	good	Dr Hagg M.O.
19/4	good	Dr Hagg M.O.
		M.O.

Date	Result	~~Anti-Typhoid Inoculations, Etc.~~ Vaccination
19/4	good	Dr Hagg M.O.
23.4.18	IAB 2	Beauharnois M.O.
1.5.18		M.O.

Enlisted on 3rd day of Nov. 1914 at Niagara Camp. Ont.

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	8th Battn	53684		
Transferred to	4th Can. Res. Batt'n	"		
	18 Bn			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
Witley	7/4/19	Stiffness of the metatarso-phal. joints	A. Wm Eccleston Capt

CANADIAN

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

M. F. B. 313.

50M—9-14.
H. Q. 1772-39-439.

Christian Name.....

Surname.....

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital. Day	Month	Year	Dates of Discharge from Hospital. Day	Month	Year	DISEASE.	Number of days in Hospital.	Remarks on nature of the disease: how induced: if mild or severe: if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
Wharncliffe War Hospital, Sheffield.	29	4	'17	9	7	'17	Trench Fever.	72	Pt was brought in unconscious & Pulse rapid on Admission		H Reader Lieut RAMC
Mck. Epsom	9	7	17	6	AUG	1917	D. Do	29	Onset sudden. Pains in legs. Four weeks in bed. improved gradual training included Swedish Drill & Special Exercises. & full Physical training Now recovered & fit for D I.		H Marlow CAPT: C.A.M.C.
										"B" DIVISION.	
	9 · 8 · 17.			28 · 3 · 18			Gon. 20.	231 201	Usual Treatment. Transferred to Canadian Conv. Hospital Epsom.		W.L. Kelly Capt
McH Epsom	28	3	18	20 MAY 1918			V.D.Y.	54	On admission States he has slight discharge in mornings & dribbling present since Aug/17 Complains of pains in legs and hips at times smear is negative for G.C. Has now recovered & fit for Category "A"		B. Cahanne Capt. C.A.M.C.

DARWELL MILITARY HOSPITAL CAMBRIDGE

Army Form B. 103. (Sheet No. 2) Regimental Number 53684

Casualty Form—Active Service.

Regiment or Corps 18th Battalion, C.E.F.

Rank Pte. Surname HAWKSBEE Christian Name William

Religion ..... Age on Enlistment .....years.....months

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

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

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

or Corps Trade and Rate.....

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...			
6-9-18	C.I.B.Dep	Arr from 4 Can Res Bn &	Can I.B.D.	5.9.18	Nom Roll
		T.O.S. 18 Can Bn	ETAPLES		Pt II Ord 88 17.9.18
9-9-18	C.C.R.C.	Arr at Can Corps Reinf Camp		9.9.18	Nom Roll
14-9-18	18 Bn	Joined 18th Can Bn	In the Fld	11.9.18	AF.B.213
	Cdn. Embkn.				NR.
- 4 AVR 1919	Camp	Proceeded To	England	- 4 AVR 1919	Pt. II O.
					Lieut.
					for Lt.Col., A.A.G.,
					Canadian Section

(*a*) In the case of a man who has re-engaged for, or enlisted in Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered.

(*b*) Signaller, Shoeing-Smith, &c

(17591.) Wt. W 1887—P 1124. 1,000,000. 6/18. D & S. Form B/103. (E. 1256.)

[P.T.O.

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				
	P Wing	~~To~~ ~~27~~ 28 B.O.D. C.M.F.C. TO O.E.F. ~~21~~ 28 PT. B ORDER NO. ~~21~~ 28 DATED ~~14.5.19~~ 28.5.19	WITLEY.		
		* Sailing 37 *			
		S.S. CARONIA			
		~~Sailed L'pool 14-5-19~~			
		T.C.S No.1 Dist Depot Displ.Stn.K.13-5-19 SOS Dispersed 24,5,19 D.O.No.148			
		for O.C. Dispersal Area Sta. "K"			

Hal Saunders
Lt & ADJUTANT
FOR O.C. "P" WING O.C.D. WITLEY.

Pensions

DEPARTMENT OF PENSIONS AND NATIONAL HEALTH

To Central Registry. Date.....

The following files are required by.....Division.

Regtl. No.	Title or Name	Pension No.	Remarks (for use by C.R.)
53684	Hawkshaw	Wm.	ma 28-11
			Docs 1-12
	Kew 2/12/33		

N.B. Regimental Number must be quoted.
P & N.H. 143 60M-6-33 Req 181

Signature of Official.

Veterans Affairs | Affaires des anciens combattants

NIC

DEATH NOTIFICATION — *AVIS DE DÉCÈS*

FILE NO — *DOSSIER N°*: 2062801

NAME — *NOM*: Hawkshaw, William Henry

SERVICE NO — *MATRICULE*: 33684

DATE OF DEATH — *DATE DU DÉCÈS*: 15-12-79

CPC NO — *CCP N°*: 1383918

WVA — *AAC. N°*: CEF

PLACE OF DEATH — *ENDROIT DU DÉCÈS*: Listowel

INFORMATION RECEIVED FROM — *INFORMATION REÇUE DE*

DVA 93

FOR RECORDS MANAGER — *POUR LE GESTIONNAIRE DE POSSIERS*: L.D.

DATE: 9-7-88

DVA 24 (6-79)
7530-21-036-5730

2 — CFRC — *DAFC*

Rank Private Name HAWKSBEE, William Reg'l No. 53684

If in perm. Corps, What Unit?

Unit 18th. Battn. Married or Single Single

Place and Date of Enlistment Clinton, Ont., 3rd. Nov. 1914 Place of Birth London, England.

Name and Address, Next-of-Kin Henry Hawksbee, London, England.

Relationship

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
1/5	31/5	31	1	31	31	10	3 10		34 10			33 50		1 10	33 60	50	1 dp. #167
1/6	30/6	30		30	30		3		33			33 50			33 50	1	
1/7	31/7	31		31	31		3 10		34 10			27 50		4 40	31 90	3 50	4 dp. #321
								2 47	2 47							5 64	Cr. Exchange
1/8	31/8	31	1	31	31	10	3 10		34 10	287 331		34 06		1 10	35 16	461	1 dp. #353
1/9	30/9	30		30	30		3		33	375		2 68			2 68	34 93	
1/10	31/10	31		31	31		3 10		34 10	436 486		5 23			5 23	63 80	
1/11	30/11	30		30	30		3		33	524 566		2 68 2 67			2 68	94 12	
1-12	31-12	31		31	31		3 10		34 10	608 651		11 34 2 61			16 64	111 60	
1-1-16	31-1-16	31		31	31		3 10		34 10	771		5 23			5 23	140 47	
1-2	29-2	29		29	29		2 90		31 90	854 808		2 61 2 61			5 22	167 15	
March		31		31	31		3 10		34 10	898 946		2 67 2 61			5 28	176 02	
			336				33 60	2 47	372 07			169 45		6 60	176 05	196 02	

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

MARRIED OR SINGLE S.

PLACE OF BIRTH London. England.

NAME AND ADDRESS OF NEXT OF KIN Henry Hawksbee

27 London. Eng.

RELATIONSHIP OF NEXT OF KIN

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

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

REG'L. NO. 53684 RANK Private NAME Hawksbee. William

IF IN PERMT. CORPS WHAT UNIT — UNIT 18 Batt

TRANSFERRED TO W.O.R.D. DATE 2/9/17 AUTHORITY C.R.O. 215/45

PERMANENT FORCE ALLOWANCES — TRANSFERRED TO — DATE — AUTHORITY

PLACE OF ATTESTATION Clinton Ont — TRANSFERRED TO — DATE — AUTHORITY

DATE OF ATTESTATION November 3rd 1914. — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY MONTHLY $ nil DATE EFFECTIVE

PAYABLE TO — RELATIONSHIP

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO — RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) EFFECTIVE REASON

DISCHARGE DATE AND PLACE REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

C.1.

DATE 1916	PAY NO. OF DAYS	PAY RATE	PAY AMOUNT $	PAY AMOUNT c.	FIELD ALLOWANCE NO. OF DAYS	FIELD ALLOWANCE RATE	FIELD ALLOWANCE AMOUNT $	FIELD ALLOWANCE AMOUNT c.	WORKING OR SPECIAL PAY NO. OF DAYS	WORKING OR SPECIAL PAY RATE	WORKING OR SPECIAL PAY AMOUNT $	WORKING OR SPECIAL PAY AMOUNT c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 NO.	1 DATE	2 NO.	2 DATE	3 NO.	3 DATE	4 NO.	4 DATE	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE CREDIT	BALANCE DEBIT	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
Mar 31			32 60				32 60							2 47	372 07 ~~335 60~~											169 45		6 60	176 05	196 02 ~~56 25~~				
April 30	30	1.00	30		30	10	3								33	957		1029						262	261					523	223 79			
May 31	31		31		31		3 10								34 10	1086	13.5	1109	27.5	632	13.5			255	256	9733				10244	15545			
June	30		30		30		3 00								33 00			1128	28.6						255						255	18590			
July	31		31		31		3 10								34 10			1159	5.7						262						524	21476			
Aug	31		31		31		3 10								34 10	1220	29/7	1191	14.7	1286	13/8		FRH 3 14/8	262	262		2433			29 57	21929			
Sept	30		30		30		3								33	1333	30/8							26v						26v	24967			
Oct	31		31		31		3 10								34 10	1373	21.9							261						261	28116			
Nov	30		30		30		3								33	1396	10/10	1465	4/11					436	349					785	30631			
Dec	31		31		31		3 10								34 10	1517	26/11							11 24						11 24	32907			
			61	10			61	10																											
Jan	31	1.10	34	10											34 10	1591	20/v							2 6v						2 6v	36055			
Feby	28	1.10	30	80											30 80	1637	17/1			1701	0513 4/v			2 62		261				523	38612			
			737											2 47	737 47									3376	1707	99 94	173 78		6 60	353 25					

No 53684. Pte Hawksbee. Wm

DATE	PAY No. of Days	PAY Rate	PAY Amount $	PAY Amount c.	FIELD ALLOWANCE No. of Days	FIELD ALLOWANCE Rate	FIELD ALLOWANCE Amount $	FIELD ALLOWANCE Amount c.	WORKING OR SPECIAL PAY No. of Days	WORKING OR SPECIAL PAY Rate	WORKING OR SPECIAL PAY Amount $	WORKING OR SPECIAL PAY Amount c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE Credit	BALANCE Debit	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
			737											247	739 47			1803	7/3					33 96	19 07	99 94	193 78		6 60	353 35	386 12				
Mar	31	1/10	34	10											34 10	1746	9/7	1899	11/3					2 62	5 73 2 62					10 47	409 75		225		
April	30	"	33	00											33 00			27	4/4						2 62					2 62	440 13				
May	31	"	34	10											34 10							C/A	9/5				24 34			24 34	449 89				
June	2		33	-											33 -								1/6				48 66			48 66	434 23		270		
July	31		34	10											34 10																468 33				
Aug	31		34	10											34 10							RR	17/8/8				48 67			48 67	453 76				
Sept	20		22	-											22 -														33	- 33	475 43				AB 3425 9/8/17. Trans to W.O.R.D. 21/9/17.
"	10	"	11	-											11 -																486 43		315		
			972	40										247	974 87									36 58	29 54	99 94	315 45		6 93	488 44					

MONTH 1917	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFER-RED PAY	SEP. ALLCE. ENG.
Sept 30.		~~486 13~~							486 13	315	
Oct.	31 due Pte 1/10	34 10		R.* 2004 20-10-17 WORK	973						
	S.P. 1 day 6-8-16 8-17								518 83	330	
	L 151-2 CCD 9/8/17	8 83			973						
Nov	30 P/P.	33		K 5980. 21-11-17. WORK.	973						
Dec	31 ✓	34 10		HR. 8329. 4-12-17 ✓	9 7 3						
				DN 66 TH							
				AN 2447. 7-8-17. Exps.	48 67				517 80	360	
		67 10			68 13						
1918 Jan	31. ✓	34 10		HR 13538. 7/1/18.	487						
				V.D. Stopp. 9/8/17 to 31/8/17. 23 days.							
				AFO 1643. KCE 7 m 606. Barnwell.		13 80					
				V.D. Stopp. 1/9/17 to 28/9/17. 28 d							
				AFO 1643. KCE 7 m 689. Barnwell		16 80					
				V.D. Stopp 29/9/17. to 26/10/17. 28 d.							
				AFO 1643. KCE 7 m 785. Barnwell		16 80					
				DNAR 842. 10/9/17 CCH Epsom	974				489 89	328	
		34 10			14 61	47 40					
Feb.	28 ✓	30 80		Rem 16934. 26/1 (4)	24 33				491 49	343	
				HR 22329. 28/2 (7)	487						
		30 80			29 20						
Mar.	31 ✓	34 10		HR. 26082. 15/3/18. (10)	487				520 72	358	
		34 10			487						

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY * ENGLAND OR ~~CANADA~~.	SEPARATION ALLOWANCE. * ENGLAND OR CANADA.
EFFECTIVE DATE:- 1/6/18	EFFECTIVE DATE:-
AMOUNT:- 15 00	AMOUNT:-

NAME, ADDRESS, RELATIONSHIP & AUTHORITY { WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.

Mrs Emily Hawksbee (mother)
79 Church Road, Epsom,
Surrey.

Stop 1/6/19

NAME:- HAWKSBEE Wm.

NUMBER:- 53684

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Pte.

UNIT AND TRANSFERS

ORIGINAL UNIT:- 18 Bn.

DATE ACCOUNT FIRST OPENED.-

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
C.L.B. 345	4/5/17	21/9/17	W.O.R.D.
	1/6/19		Camiee

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS { UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK

DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT
5/4/18	24	Bch. H. Lds	73				

DAILY RATES OF PAY AND ALLOWANCES

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

PARTICULARS OF RENDERING NON-EFFECTIVE: To Canada 1/5/15. B65 28. Bch H 9/4/15 Bch H 1/5/15 Rem 1 hp £477 86

MONTH	PARTICULARS	CR 1	CR 2	PARTICULARS	DR. 1	DR 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
31/3/18	Bal Fwd								520 72	358	
Apr.	30 F.F.	33 -		a/c 3305. 2/4/18. (1) Clks.	9 73				543 99	373	
May	31 F.F.	33 34 10		a/c 3131 2/5/18 (2) V.D. Stephens 9/3/17 to 10/5/18 274 dys @ 60	9 73 487						
	0/Chgd. 99 days V.D. Chgs @ 60 & proc Chgd.	49 40		B.C. 119 20/5/18 H.M. Res		165					
				a/c. 627. 15/5/18. (13) 4 Res.	7 30					388	
				✓ 779 29/5/18 (21) ✓	12 17				438 15		
June	30 O.P.	83 50 33 -		a 53986. £3-1-8	24 34	165	15				
				a/c 983 · 17/6 · (4) ✓	9 73						
				✓ 1130 28/6/18 (16) ✓	7 30				439 12	388 403	
July	31 F.F.	33 34 10		a 68776 · £3-1-8	11 03		15 15				
				a/c 1366. 18/7 (3) 4 Res.	9 73						
				✓ 1591 30/7 (4) ✓	9 73				438 76	388 403	
		34 10			19 46		15				
Aug	31 O.P.	34 10		653797 £3-1-8			15				
				a/c 1774 15/8 (2) 4 Res	9 73						
				✓ 1919 24/8 (1) ✓	9 73				438 40	388	
		34 10			19 46		15				
Sep	30	33		D 9993 £3-1-8			15				
				a/c 2147 5.9.18 (3) 4 Res	487				451 53	388	
				1st a/c 8410 26.9.18 (25) 180 m	357				447 96		
		33			8 44		15				
		34 10		D 52270 £3-1-8			15				
				A/C 965 14/10/18 ✓ H	3 73						
				✓ 1173 26/10 ✓ 9	3 73				459 60	388	
		34 10			7 46		15				

Forward

NUMBER 53684 RANK Pte NAME Hawksbee W

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
1918									459 60	388	
Nov	D P	33		£1869 £3-1-8			15				
				£6972 £3-1-8 (Dec)			15				
				Can £35 - 23/11 - 18Bn	3	13 06					
				✓ 476 - 14/11 - ✓	3	3 73					
				£.13454 £3-1-8 Jan		16 79	15				
Dec	✓	34 10									
1919 Jan		34 10							499 01	388	
		101 20			16 79		45				
Feb	✓	30 80		AR 1465 16/12/18 18Bn ✓	1	6 49					
				✓ 1715 21/1/18 ✓	1	1 30					
				✓ 2526 12-1-19 ✓	3	3 73					
				£.6845 - £3-1-8			15				
				✓ 3191 26-1-19 18Bn	7	3 73					
				✓ 3643 10-2-19 ✓	12	3 73					
Mar	✓	34 10		£.13354 £3-1-8			15				
				✓ 2879 24-2-19	18	3 73					
				✓ 3259 18-3-19	25	7 30			503 86		
		64 90			30 05		30		77		
									580 86		
									112 73		
									468 13		
April	✓	33		Ck #A8739 £3-1-8 April			15				
	Int on Def pay	44		Ck #A8740 £3-1-8 May			15				
				AR. 319 10/4/19 P Wing	1	7 3 -					
				✓ 1574 28/4/19 ✓ Endorsed	6	9 73			468 13		
		77 -			82 76		30 -				

SOS & Tank Late 770 Pte 5805 6 Lr 1030 Dr Lpc 467.8.6

J Hawksbee 10/4/19

SOS & Can 13/5/19 £1 60 COK

1 PM 10-Ha-477

259

AUDITOR | PAYMASTER

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

M. OR S. | REGT. No. 53684 | RANK Pte | NAME (IN FULL) HAWKSBEE William (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN Mrs Emily Hawksbee RELATIONSHIP Mother

ADDRESS 79 Lehmich Road, Epsom Eng

IS SEPARATION ALLOWANCE PAID? DATE EFFECTIVE

TO WHOM PAID RELATIONSHIP

ADDRESS NIL

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F. 18th Bn. | IF IN P.F. WHAT UNIT? Bank of Hamilton Londonderich Ont

PLACE OF ATTESTATION | TRANSFERRED TO TOS DDI | DATE 13/5/19 | AUTHORITY DO 148

DATE OF ATTESTATION 3-11-14 | TRANSFERRED TO | DATE | AUTHORITY

ASSIGNED PAY $ 1/15 Paid and Closed by Ottawa | DATE EFFECTIVE England 31/5/19 Steamer 1-6-19

PAYABLE TO Mrs Emily Hawksbee Mother | RELATIONSHIP | ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS 79 Lehmich Road, Epsom England

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE

DISCHARGED PLACE London | DATE 24/5/19 | REASON Dem | AUTHORITY DO 148 | IF ENTITLED TO POST DISCHARGE PAY

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.	OTHER CREDITS $	OTHER CREDITS C.	$	C.	TOTAL CREDITS $	TOTAL CREDITS C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	DATE	COL. NO. 2 NO.	DATE	COL. NO. 3 NO.	DATE	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.	$	C.	TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	BALANCE CREDIT $	C.
BALANCE FROM PREVIOUS ACCOUNT	30 4.19								447	86																									
	1/29.5	29	1/10	31	90	33 70			136	90					3905		4	84	5	-	595	16	—				9	73			614	76				
	183 days			420	00				420	00																									

Group 23 17931 19155

D.A.G.

O.G.

4-12-55

WAR SERVICE BADGE
CLASS "A" No. 261610

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

1. No. 53684

2 Rank. Pte.

3. Name. HAWKSBEE, William

4. Unit. 18th Can Bn.

5 Date of Discharge MAY 24 1919 Place London, Ont. LONDON, ONT.

6 Reason for Discharge Demobolization.

7. Authority. P.C. 1894

8. Proposed Residence after Discharge GPO

G.P.O. Fordwich. Ont.

9. CERTIFICATE TO BE SIGNED BY SOLDIER.

I hereby acknowledge that at the undernoted place and date I received my discharge Certificate

M. F. W.? W.H. Hawksbee

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place LONDON, ONT.

Date MAY 24 1919

Signature [illegible] Capt.

(O. C. Discharging Unit.)

M.F.B. 218a—300M.-11-18—1772-39-113.

LIST OF DISCHARGE DOCUMENTS.

Attestation Paper, Triplicate	Militia Form W. 23
or Particulars of Recruit	Militia Form W. 133
Field Conduct Sheet	Militia Form W. 178 or A.F.B. 122
Casualty Form	Militia Form W. 54 or A.F.B. 103
Last Pay Certificate	Militia Form W. 44
Certificate that missing documents are unobtainable	
Medical History Sheet	Militia Form B. 313 or A.F.B. 178
Proceedings of Medical Board	M.F.B. 227, A.F.B. 179 or A.F.A. 45
Dental History Sheet	Militia Form B. 465
Medical Report	M. F. W. 129 or D. M. S. 1375
Regimental Conduct Sheet	Militia Form B. 263
Company Conduct Sheet	Militia Form B. 263a

Triplicate Attestation Paper (M F.W. 23), or
Particulars of Recruit (M.F.W. 133).
2. Casualty Form (A.F.B. 103).
3. Medical History Sheet (M.F.B. 313 or A.F.B. 178),
4. Proceedings of Med. Board (M.F.B. 227 or M.F.W. 129)
5. Dental Certificate (C.A.D.C. 5009a),
6. Field Conduct Sheet (A.F.B. 122.)
7. Proceedings on Discharge (M.F.B. 218a)
8. Discharge Certificate (M.F.W. 39)
(Enclosed in special envelope (260M)).
9. Copy of Discharge Certificate (M.F.W. 39a).
10. Dispersal Certificate (C.D. 3).
11. Equipment and Clothing } Statement Q.M.G. Form (D.O.S. 2).
12. Last Pay Certificate (P. 851). + duplicate
13. Pay Book (A.B. 64).
14. War Service Gratuity (Form M.F.W. 2595).
15. Sundry Documents.

Group 13
Checked by No. 10
(P)
MAY 5 1919
Date.....

THIS FORM WILL BE USED FOR ALL RANKS

MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

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

STATION Willey DATE 7-4-19

1. 1 (a) Unit 18 Bn (b) Regimental No. 5-3684 (c) Rank Pte

(d) Surname HAWKSBEE (e) Christian name William

(f) Home address Fredrick Ont

(g) Next of Kin Mrs Emily Hawksbee (h) Relationship mother

(i) Address of Next of Kin 79 Church Rd Epsom Surrey

2. Age last birthday 29 Date of birth July 13th 1890

3. Enlistment, or Appointment (if an Officer) (a) Place Clinton Ont (b) Date 3-11-14

4. Personal description:

(a) Height 5'-8" est. (b) Weight 165 (stripped) (c) Complexion ~~Sallow~~ medium

(d) Colour of hair brown (e) Colour of eyes brown (f) Identification marks, Scars, etc. multiple scars on back due to boils

5. Former trade or occupation farmer

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).	Years	Days
	4	158

	Periods From	Periods To
Canada	3-11-14	~~20~~ 15-4-15
England	29-4-15 / 24-4-15	14-9-15 / 5-9-18
France or other theatres of War	15-9-15 / 5-9-18	26-4-17 / 5-4-19

7. Original disease, or injury Arthritis of 1st metatarso phalangeal joint (both feet) ARTHRITIS OF 1ST METATARSO-PHALANGEAL JOINT BOTH FEET. W.E.

(a) Date of origin Prev. Dental (b) Place of origin ~~Canada~~ Canada

(c) Cause ~~Tuberculosis~~ Infection

M. F. B. 227.

400M.—11-18.
1772-30-117.

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

Pain & limitation of movement int. first metatarso phalangeal joint of both feet.

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

Objective:- Both the above joints are enlarged slightly reddened & subacutely inflammed. There is no hallux valgus. Both feet are flat & the feet are very broad. Cannot bend the above joints actively. Cannot stand on his toes. Walks rather stiffly on feet.

Subjective:- Inability to walk on 4-5 miles on rough ground. Also pain in joints when both feet walking is painful.

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

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

Special Senses no Respiratory System no Integumentary System no

Disturbances of Mentality no Digestive System no Muscular System no

Osseous and Joint Systems no Any other general condition no

V. A. G. R 0 6/12 L 0 6/12 Ears normal

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

He states he had the present condition slightly before enlistment. Always had flat broad feet due to pain in those joints. The condition has become aggravated on service. Has had 2 fall on ground route marches. Has not had a medical board on his feet. No record on M.O. sheet of condition on enlistment.

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*).)

Trench fever 29-4-17.
V.D.S. 9-8-17.

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

scars on back from boils

11.—(*a*) Did the disabling condition have its origin before enlistment? yes

(*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.)

yes

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

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

13. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? ~~permanent~~ wnl 6 mos.

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

na

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

no

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

17. Recommendations

A. H. Naylor Capt RAMC
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 William Hawkes 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

William Hawkes Pte
Rank.
Signature of invalid examined.

OPINION OF THE MEDICAL BOARD

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

Yes.

19. Is the invalid fit for

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

20. It is certified that the invalid

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

(*b*) Does not require ~~treatment.~~

(*c*) ~~Should pass~~ under his own control.

(*d*) ~~Should not~~ pass under his own control.

(Strike out condition not applicable.)

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

R.T.C. auth. A.G. 9083 (tel.) 7/4/19

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

F. Bolton Capt. — *President.*

PLACE Whitley — W. Dr. Ecclestone Capt. — Members

DATE 7/4/19

TO BE COMPLETED WHEN TREATMENT IS REFUSED

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

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

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

President

PLACE..... — Members

DATE.....

APPROVED BY

Assistant Director of Medical Services.

DATE.....

APPROVED BY

Director-General of Medical Services.

DATE.....

HEADQUARTERS 7 APR 1919 CANADIAN T.R.O.S. WHITLEY.

Forms
I. 1237
12

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
Year 1918	S36847	Pte.	Hawksbee	W. H.
	Unit.		Age.	Service.
	18th Can. Batt'n.			

Station and Date.

Disease V.D. Gonorrhoea.

States he has slight discharge in morning
contains present since aug/17.
complains of pain in testes at
times. Path. report on smear.

F 1/5

V.4.18 Feeling fine. Continue L.D.9

7.4.18. Continue

15.4.18 Recovered. Continue wk. L.D.11

22.4.18. Recovered. Fit for Draft.

Convalescent Hospital,
Woodcote Park, Epsom

P Bleaham
Capt., C.A.M.C.,
M.O., No. 2 Division.

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

(44502) Wt.W 11203—M 1150. 1,450,000. 6/14 16. C.F.& S. Forms/1. 1237/12. (E239)

P.T.O.

Station and Date.	