ATTESTATION PAPER.

No. 348301

Folio. ~~7550~~

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name?	John Miller
2. In what Town, Township or Parish, and in what Country were you born?	Maghera, Co. Derby, Ireland,
3. What is the name of your next-of-kin?	Father - Thomas James Miller
4. What is the address of your next-of-kin?	Maghera, Co. Derry, Ireland,
5. What is the date of your birth?	March 12th, 1881
6. What is your Trade or Calling?	Miner
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? If so, state particulars of former Service.	7 yrs. R.G.A. Gosport, England,
11. Do you understand the nature and terms of your engagement?	Yes
12. Are you willing to be attested to serve in the Canadian Over-Seas Expeditionary Force?	Yes

John Miller (Signature of Man).

J. H. Power (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

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

John Miller (Signature of Recruit)

Date August 31st., 1915. J. H. Power (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, John Miller, do make Oath, that I will be faithful and bear true Allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will as in duty bound honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity, against all enemies, and will observe and obey all orders of His Majesty, His Heirs and Successors, and of all the Generals and Officers set over me. So help me God.

John Miller (Signature of Recruit)

Date August 31st., 1915. J. H. Power (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 Toronto this 31st. day of August 1915.

(Signature of Justice)

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

G. Hunter Gwatkin Colonel (Approving Officer)

Commandant R. S. A., H. & F.

M. F. W. 23.
200 M.—5 15.
H. Q. 177-39-841.

Description of John Miller on Enlistment.

Apparent Age 34 years 5 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 4 ins.

Chest measurement: Girth when fully expanded 36 ins.
Range of expansion 3 ins.

Complexion Fresh

Eyes Grey

Hair Dark brown

Religious denominations.
- Church of England
- Presbyterian Presby.
- 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).

Operation scar and ½ inch mole inside right upper arm

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 August 31st., 1915. ..... Capt.

Place Toronto, Ontario ..... Medical Officer.

*Insert here "fit" or "unfit."

NOTE.—Should the Medical Officer consider the Recruit unfit, he will fill in the foregoing Certificate only in the case of those who have been attested, and will briefly state below the cause of unfitness:—

CERTIFICATE OF OFFICER COMMANDING UNIT.

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

W. E. Steacy (Signature of Officer)

Date DEC 28 1915 191..

Capt. R.C.H.A.
Commanding "C" Battery, R.C.H.A.

MILLER JOHN 348301 1 D.A.C. 21848

DEPARTMENTAL DOCUMENTS
WAR SERVICE RECORDS D.V.A.

PHYS. UNFIT.

PUBLIC ARCHIVES
RECORDS CENTRE

H

408458

A.D.

B

Number. 348301 Rank. 9/Bdr.

Surname. MILLER

Christian Name. John

Units C.F.A. Theatre of War France

Date of Birth. 27-8-16

Regtl. Hill

Records.

Mr Robert Miller, Ballymena Brother

Co Antrim. N. Ireland 3/11/17

Latest Address. C/o Templepatrick Drummankelt

28/10/29 Military Hospital Ont.

Roll No. B Page 6266.

No. RANK NAME

T. O. S. UNIT

M. D.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY

REGN. NO. 551
DESP. DEC 3 37
Ltr. 21/11/36
DESP. DEC 1 39
7/8

MILLER, John A/Bdr. 348301 C.F.A.

649-M-10715

Medals to Brother;-Mr.Robert Miller Lyle Hill,
28/10/39 Templepatrick ~~Ballymena~~ Co Antrim
N.Ireland.

Cross Nil Not married
Mother dead.

(649-M-107167)

SURNAME. Miller

CHRISTIAN NAMES John

REGL. No. 348301 RANK Pte

UNIT ~~R.C.H.A.~~ (5th R.D.) No 2 D.D.

FORMER CORPS R.G.A. Eng.

CARD NO.

S.O.S. Dist. Dis. 24.8.18.

FOLL. No 2 D.D. D.D. 126 of 21.8.18 Jr

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL Miller. Thos James

RELATIONSHIP TO SOLDIER Father

ADDRESS Maghera. Co. Derby, Ire.

also notify: Mrs S. L. Maunsell (sister)
135 Pinewood Road. Toronts. Ont.

with letter 9-11-16

COUNTRY OF BIRTH Ireland. Derby DATE Mar. 12. 1881

PLACE OF ATTESTATION Toronto. Ont. DATE Aug. 31. 1916

Sailed as Pte SS Metagama: 1/1/16. 308/3.

Emb. R/C 4-2-18.

L. L. 6945. M. & D. 6994.

M. F. W. 22. 100M.—8-16. H. Q. 1772-39-339.

MARRIED SINGLE Yes WIDOWER

TRADE OR CALLING Miner RELIGION Presbyterian

DESCRIPTION.

APPARENT AGE 34 YEARS 5- MONTHS

HEIGHT 5- FEET 4 INCHES

CHEST MEASUREMENT 36 INCHES EXPANSION 3 INCHES

COMPLEXION Fresh EYES Grey HAIR ~~Dk~~ Brn

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE Toronto Ont. DATE Aug 31/15

FORM R. 149.
7106—250m—7/2/17.

Name MILLER John Rank DVR Reg. No. 348301 ~~348301~~

Unit 6th RA Res Bdge C.F.A.

Next of Kin Thomas James Miller Maghera Co. Derry Ireland

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1917						
1-12	12 Can G.H. Bronnshott	Pelusium	Disability	8	108	7414
6-12	Lord Derby to H. Warrington	do	do	642		7743
4-2-18	Invalided to Canada	do	do	2761		14466

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

Form DMS 1401.
8289 100M 9/8/17.

№ 12 CAN. GENERAL HOSPITAL

HOSPITAL.

A. & D. CARD

AT

A. & D. No. 7062. PL. OF ACTION 3 48 301

RANK Pr UNIT 1st Bg C.M.G. SICK OR WOUNDED

NAME Miller J. AGE 38 RELIGION Pres

PLACE IN HOSPITAL W.D.S.

DIAGNOSIS Delusional insanity

ADMITTED 30. 11. 17 FROM

DISCHARGED TO

TRANSFERRED Warrington 5. 12. 17

SERVICE AT HOME 39/12. IN FIELD

RESULTS

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

REMARKS.

REGT'L No. 348301.

H. Q. FILE No. 649.

NAME Miller, J

RANK AND CORPS Pvt.

2nd Bde. F.A.

NATURE OF CASUALTY

FOLLOWS No.

FOLLOWS

CABLE

NO.	DATE

L. L. 20497—M. & D. 7908

M. F. W. 42—50M.—5-17.
H. Q. 172-39-3/3.

Can. Art.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
B279	#2 Gen. Camiers	19-6-17	Capt. Arm. R. Frac
B279	Central Mil. Hosp. Litt. Clatham	24-6-17	Cont. R. Arm
B301	Canadian War Hosp. Orpington	26-7-17	" " "
B. 8.	Discharged	1-8-17	" " "
C. 108	#2 Can. Gen. Bramshott.	1-12-17	Delusional Insanity
C. 112.	Lord Derby War Warrington	6-12-17	Delusional Insanity
C-161.	Invalided to Canada.	4-2-18	Delusional Insanity.

FORM R. 149.
7106—250m—7/2/17.

Name MILLER. John. Rank Dvr. ~~348301~~. Reg. No. 348301

Unit 2nd Brigade. C.F.A.

Next of Kin Thomas James Miller. Maghese. Co Derry. Ireland.

Date 1917.	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
19-6.	No.20.Gen Hpl. Camiers.		Cont Arm			
			Rt Frac.	A579		
24-6.	Cent.Mil.Hpl.Fort.Pitt.		do	B279		
26-7	Con Con Hpl Wool	RR	do	B301		
1-8.	Discharged		do	D.F.		

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

L

*Name Miller, John Rank Dvr. Regtl. No. 348301

Original unit Present unit C.F.A. M. or S. / Age 38 Religion Pres, Fyle Depot Ref. H.Q.

Port, ship, and date of arrival Halifax, 2/15/18

Next of kin (Father) T.J. Miller Slatabogie, Maghera Co. Derry Ireland.

Address on leave C/O Newmarket Military Hospital

Address on discharge Same

Transportation issued Yes / No Date Character on discharge Very Good

Previous occupation Miner, Date and place of enlistment Toronto 31-8-15

Diagnosis Del. Insanity. Date of Medical Boards 4-8-18

Date.	Remarks	Pt. 2 Order No.
18.4.18	T.O.S. #2 District Depot	D.O. #1
	Admitted to Newmarket	
29-7-18	Posted to Cas Co (NR)	105
24-8-18	S.O.S. DISCHGD. "PHYS. UNFIT": to take further in-patient treatment with the ISC at Newmarket) NOK PDP or cl. allce	126

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

(over)

Date	Remarks.	Pt. 2 Order No.

M.F.W. 192.
60M-3-18. (D.P.) 353.
1772-39-1243.

FORM D.M.S. 1300.
8137—50m—28/2/17.

Surname	Christian Name or Names	Reg. No.
Miller	J.	348301

Rank: Dvr | Unit: 2nd. C. FA. | Co. | Troop | Batty.

Hospital: Can Art. R. B. | Date of Admission: 20 Gen. Camies 19-5-17

Transferred: Fort Pitt Mil Chatham Hosp. 25-6-17
Can Conv Woodcote Park Hosp. 26-7-17
12 Can. Gen. Brantwood Hosp. 1-12-17
Lord Derby War. Warrington. Hosp. 6-12-17.

Diagnosis: Cont. Rt Arm Fract. Jt

Later Diagnosis (if changed): (1) Delusional Insanity. HB
(2)
(3)

Additional Diagnosis: if more than one state present

DISPOSITION | **Date**

D/S 1-8-17.

C.L.28-6-17 A579 & B279

REMARKS

31-7-17 B301
15-8-17 B 8 Invalided to Canada.
5-12-17 C108. 4. 2. 18.
10-12-17 C112.
7. 2. 18 C161.

Dis. to Canada per H.S. Araguaya from Liverpool. 4-2-18.

EPITOME OF HOSPITAL TREATMENT.

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

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 348301 (Rank) Dvr.

Name (in full) MILLER JOHN enlisted in

the 1st D.A.C.

CANADIAN EXPEDITIONARY FORCE at Toronto Ont. on the 31st

day of 8 Aug 19 16

HE served in England and France

and is now discharged from the service by reason of Physical Unfitness

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

Age 37

Height 5' 4"

Complexion Dark

Eyes Brown

Hair Dark Brown

Marks or Scars Irregular scar on groin(Operation) Vacc scar on left arm.

Patient unable to sign

Signature of Soldier

MEDICAL SUPERINTENDENT

Issuing Officer

Captain,
Rank

For Lieut.-Colonel,
O.C. No. 2 District Depot.
Appointment

Date of Discharge Aug 24th 1918

Signed at Toronto Ont. this 24th day of Aug 19 18

in Military District No. #2

File Reference No.

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. W. 39a
200m.—2-18.
H.Q. 1772-39-882

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

No. 348301 (Rank) Dvr. Name MILLER JOHN

Unit 1st D.A.C.

Address on Discharge c-o Personnel Military Hospital

Character and Conduct Very Good

Former Occupation Miner

Special Qualifications of Value in Civil Life

Medals and Decorations Nil

Remarks

Signed at Toronto Ont. this 24th day of Aug 19 18

Robson Lieut.
Name of Officer

Captain,
For Rank Lieut.-Colonel,
O.C. No. 2 District Depot.
Appointment

.B.

CERTIFIED CORRECT.
11 SEP 1916
CAN. RECORDS, LONDON.

Cert R.L.2-2-91
R.2.C. 8117

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

Cook.

M. F. W. 54.
150M. 10-15.
H.Q. 1772-30-923.

Casualty Form—Active Service.

Unit, Regiment or Corps "C" Bty. R.C.H.A. Dft to R.B. C.H.A

Regimental No. 348301 Rank Driver C.E.F. Name Miller John

Enlisted (a) 31/8/16 Terms of Service (a) [illegible] Service reckons from (a) 31-8-16

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) Gunner

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.
	O.C. R.B.	Taken on Strength Res Bde C.H.A. Shorncliffe Drafted to 1st D.A.C. France.	England.	9/1/16	B.O. Pt II No 11 1/16 Par 1 25 AUG 1916 Adjutant.
8/7/16	O/C R. Bde.	To be A/Bdr.	Seliffe	8/7/16	Pt II O.R. 163 Reserve Brigade, C.F.A. Lieut. for Colonel i/c Records, C.F.A.
27-8-16	C.B.D.	Reinf. att. 1st D.A.C.	Field	27 8/16	on R. Pte O 34 d/- 31-8-16
10-9-16	Unit	Joined	"	10 9/16	B213.
11-9-16	1st D.A.C. Hqrs.	Posted to 2nd D.A.C.	"	11 9/16	att 9-110. Pt II O 48 d/11 9/16
13-1-16	W.O.	Automatically deprived of appointment of A/Bdr.	"	27 8/16	121/overseas/1360 (a.g.1) Pt II O. 48 d/17-9-16.
Do.	Do.	Taken on strength of 2nd Bge.		12 9/16	9-110 P II Ord 51 d 18 9/16.
21 6/17	197 A	Contusion Rt arm Kicked by Horse 13 6/17 117 Received & forwarded to London. file KT. 16-11320.	C.C.S.	16 6/17	117. Dis d

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

[P.T.O.

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form. B. 213 Army Form A. 36, or other official documents.
Date	From whom received				
17.6.17 16.6.17	2 Can. Unit	Contusion Rt. Arm 13/6/17 To hospital	CRS	13.6.17 15.6.17	A36 L4637 #C8468 B213 #C8468
23-6-17	O/C.H.S. Newhaven.	Invalided SICK and trans. to Can. Arty. Regt'l. Depot. Shorncliffe.		23-6-17.	W.3083 Pt.11 O.No.102 d/ Capt OFFICER i/c RECS CANADIAN SECTION C... 3RD ECHELON
30.6.17	CARD	S.O.S. from 2nd Bde "S"	Witley	24.6.17	Pte O. 113. 10/1/18
5.8.17	—"—	S.O.S. to 1st R. Arty.	—"—	2.8.17	—"— 149
8.8.17	1 R. Arty	S.O.S. from Regt. Depot.	—"—	2.8.17	—"— 148
21.11.17	R. Bde. CFA	S.O.S. " 1st R. Arty.	—"—	18.11.17	—"— 4 & Pte O. 150 of 18.11.17 of 1st R. Arty.
4.1.18	—"—	S.O.S. to CARD. having been boarded for Dis. to Canada	—"—	1.1.18	—"— 4 & Pte O. 6 of 6.1.18 of CARD.

D Kaye. Lieut
for A/Cl/Records Comdt

CFRO 10.1.18

Army Form B. 103. **Casualty Form—Active Service.** Regimental Number 348301

Regiment or Corps 1st Bde C.R.A.

Rank Pte Surname Miller Christian Name J.

Religion Age on Enlistment J years months.

Enlisted (a) Terms of Service (a) War + 6 mos. 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

Signature of Officer i/c Records.

Hospt

Report Date	Report From whom received	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
		M-640 Embarked ... Disembarked ...			
3.8.17	1st Bde C.R.A.	Attached from C.A.R.D. pending instructions for D.O.S.	Sceptre	2-8-17	Bolton 43
8.8.17	1st Bde C.R.A.	D.O.S. from C.A.R.D.	Sceptre	2-8-17	Bolton 48.
18.11.17	O.C. 1st Bde C.R.A.	D.O.S. to Res Bde C.R.A.	Witley	17.11.17	Bolton 150 A.E. Wodehouse LIEUT: & ASST: ADJUTANT, 1. BRIGADE, CANADIAN RESERVE ARTILLERY.
18.11.17	O.C. Res Bde C.R.A.	D.O.S. from 1st Bde C.R.A.	Witley	18.11.17	Bolton 1

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

[P.T.O.

(938). Wt. 15012/5156. 1,609,000. 1/16. P. P. Ltd. Forms/B.103/3.

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				
4-1-18	O.C. Res Bde C.F.A.	S.O.S to C.A.R.D.	Witley	1-1-18	B.O. Pt II 4.
					W.B. Dalgleish Lt. Adj. R.B.C.A.
30-6-17	CARD	T.O.S. from 2nd Bde C.F.A.	Shoeburyness	24-6-17	Pt II O.O. 113
5-8-17	Do	S.O.S 1st Bde C.R.A.	Do	2-8-17	Pt II O.O. 149
6-1-18	Do	T.O.S. from Res Bde C.F.A.	Witley	1-1-18	Pt II O.O. 6
12-2-18	Do	S.O.S. Invalided to Can	Do	4-2-18	Pt II O.O. 43
					CAPT. & ADJT. For O.C. CAN. ART. REGIMENTAL DEPOT
18.4.18	"D" Unit	T.O.S. #2 D.D.	Toronto.	18.4.18	D.O. Pt. ii No 1. Rutherford Lt C.F.C. for D.C. #2. D.D.
		Dis #2 D.D. Aug 24th 1918 Ptll #124			
		L.L. Robson Lieut			

R—122.

Rank **Driver.** Name MILLER, John Reg'l No. 348301

Unit 5th Dft R.C.H.A. to R.B. C.F.A. If in perm. Corps, What Unit? Married or Single Single

Place and Date of Enlistment Toronto, Aug. 31st 1915. Place of Birth Maghera, Co. Derry, Ireland.

Name and Address, Next-of-Kin Thomas James Miller
Maghere, Co. Derry, Ireland. Relationship Father.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

N/E. R.B. No. H129.
File R.L.
Category M.U. Band

Discharge, Date and Place Reason Character

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
		Arrived in England. per. S.S. Metagama		9-1-16	
11-1-16.	O.C. Res Bde	Taken on strength	S'cliffe	9-1-16	A.F.B. 103 CHECKED 3-JAN.1917 A.F.B. 103 CHECKED 7-SEP.1916. (N.R) HW A.F.B. 103 CHECKED A.F.B. 103 CHECKED A.F.B. 103 CHECKED

348301. Miller. John.

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
28.6.17	2nd Bde	To Central Mill Hospital	~~Chatham~~	24.6.17	C 1 B 279 Cent R Arm
3.7.17	" "	S.O.S. to Regt Depot	Field	23.6.17	PT = O 102
30.6.17	6th Regt Depot	T.O.S from 2nd Bde "S"	Schiffe	24.6.17	PT = O 113
31.7.17	2 Bde C Ta	To C.C. Hospital Woodcote Park Epsom		26.7.17	C.L. B301 "
10.8.17		Discharged		1.8.17	C X B 8
5.8.14	Regt Depot	S.O.S. to 1st Res Brty "A"	Schiffe	2.8.17	PT = O 149
8.8.14	1 Res Brty	T.O.S from Regt Depot	Schiffe	2.8.17	" " " 48
21.11.17	Res Bde C.F.A.	T.O.S from 1st Res	Witley Dvn	18.11.17	RTO 4 + PT = O 150 18/11/17
4.12.17	R.B.	Adm. to No 12 C.G. Hp	Bkett Dvt	1.12.17	C.L.C 108 Delusional Insanity
6.12.17	"	To Ld-Derby War Hp.	Warrington Dvt	6.12.17	C.L.C 112 do
11.1.18	— " —	S.O.S. to C.A.R.D. having been boarded for Ins. to Canada	Witley Dvn.	1.1.18	P = O 44 + PT = O 6 9/6 1/18 of C.A.R.D.
7.2.18	— " —	Invalided to Canada	Warrington Dvn	11.2.18	C.L.C 161 Delusional Insanity
12.2.18	C.A.R.D.	S.O.S on being Invalided to Canada	Witley Dvn	11.2.18	P = O 43.
	Dis Depot	For Ins: Asylum	No 2 Toronto	16.2.18	NR 439

MEDICAL TRANSFER CERTIFICATE.

3/12/18 Army Book 172.

(To accompany a Man Transferred from one Hospital to another.)

Extract from Admission and Discharge Book of _____ Hospital at _____ Date _____

No. of Case.	Regiment or Corps.	Troop or Company.	Regt. No.	RANK AND NAME. Surname first. If Married, write "M" under name.	Completed Years of: Age last birthday.	Service	Service in the command.	DATES. Admitted into Hospital.	Transferred.	Religion.	DISEASE. (a) Primary. (b) Secondary. (c) Operations.	Destination on Transfer, and to what Hospital or Ship Transferred.
W.K. (B) 115 (M)	1st Bg C.L.a.	C	348301	Dr Miller. J.	38	3/12		5.12.17	4/12/18	Presby	Delusional Insanity	Hospital Ship for Canada

State here briefly reasons for Transfer, and note any particulars of Case for information of Medical Officer.

Please see case sheets
Strongly objects this removal & may give trouble
R Rayer

Major, R.A.M.C. (T.)
For Officer Commanding THE LORD DERBY WAR HOSPITAL.
Medical Officer in Charge.

THE LORD DERBY WAR HOSPITAL WARRINGTON.

MEDICAL CERTIFICATE BOOK.

London: Printed for H.M. Stationery Office by John Rissen, Ltd.—82.

Newmarket Military Hospital.

Name - John Miller.

Age - 39 years.
Occupation - Miner Religion - Presbyterian.

Single. Identification Marks - Small birthmark the size of a dime on the right arm. Vaccination marks on left arm. Left thumb off at the middle joint.

Father - nothing known.
Mother - dead, cause not known.
Brothers - dead, cause not known.
Sisters - six, all alive and well.

No history of Cancer, T.B. in family.

Personal History - Born in Ireland in County of March 12/1879. Attended school for a few years; learned to read and write. He then worked at odd jobs in Ireland and England as a laborer. At the age of 34 he went to Br. South Africa and became a miner in gold mines of the Transvaal. Early in war he enlisted in South Africa and fought in German East Africa for few months. He will not tell why he left Africa. He came to Toronto in August 1915 and enlisted with the Canadian Field Artillery August 1915. He landed in England January 1916 ~~January 1916~~, went to France in August 1916; saw ten months active service in France . Never was wounded. In June 1917 a horse kicked him in right forearm and fractured his right ulna bone. Was sent to Hospital in Chatham England for treatment. While there he developed mental symptoms and complained fo gases in wards and poisons in his food. While convalescing he refused to do gas-mask drill. Said he had gone through gas in France and had never suffered whereas fellow soldiers who had worn them had died from the gas.
~~Said he had~~
He was later in several English Hospitals as a mental case. He was ent back to Canada in February 1918. He arrived at Newmarket Military Hospital February 22/18. He refuses to answer any questions relating to the use of liquor.

Physical Examination - Weight 125 pounds. Height - 5' 5".
Physical development good.
Other systems - apparently normal.

Mental Examination - Memory good, orientation goodl Insight and judgment poor. He is tidy, but will not work.
Has no hallucinations.
Delusions - says that Hospital Docotors put gas in radiators to poison him and poison in his food. This poison burns his stomach and constipates him; says that our gas and poison makes fellow patients stupid, wants this stopped, wants to go to France again. He is very stubborn and negative. Says that God will make an example of Hospital Doctors, if they do not mend their ways. He wants to do patients and doctors ~~and~~ ; but gas must be stopped first.

March 27/18. - This patient still believes that the doctors put poisonous gases in radiators, and he will do no good here until this is stopped. He is very quiet and gives little ~~or~~ trouble about hospital.

UK
aii

UK (Can) 115 (M)

MEDICAL TRANSFER CERTIFICATE.

Army Book 172.

(To accompany a Man Transferred from one Hospital to another.)

Extract from Admission and Discharge Book of No 12 CAN. GENERAL HOSPITAL Hospital at Brauushott Date 5.12.17

No. of Case.	Regiment or Corps.	Troop or Company.	Regt. No.	RANK AND NAME. Surname first. If Married, write "M" under name.	Completed Years of: Age last birthday.	Service	Service in the command.	DATES. Admitted into Hospital.	Transferred.	Religion.	DISEASE. (a) Primary. (b) Secondary. (c) Operations,	Destination on Transfer, and to what Hospital or Ship Transferred.
7 0 6 2.	10th Bg C.R.A.	C	34830/	Gnr Miller J.	38	29/12	-	30/11/17	5/12/17	P R C S.	Delusional Insanity	Lord Derby Hospt Warrington

State here briefly reasons for Transfer, and note any particulars of Case for information of Medical Officer.

D G Chm MAJOR Medical Officer in Charge.

REGISTRAR No. 12 CAN. GENERAL HOSPITAL

MEDICAL CERTIFICATE BOOK.

London: Printed for H.M. Stationery Office by John Rissen, Ltd.—82.

98

7.12

(6 36 29) W8829—M941 200,000 10/16 HWV(cP353) Forms/B117/11 Army Form B. 117.

114
Gen. No.
269

REPORT ON WOUNDS OR OTHER INJURIES RECEIVED OTHERWISE THAN IN ACTION.

Certificate of Medical Officer.

No. 348304. Dr. Miller. J. 48 Bty 2 Bge. C.F.A.
was admitted to hospital on the 13-6-17. suffering
from Contusion Rt Arm Kicked by a horse.
The disability is of a † trivial nature, and in all probability
‡ will not. interfere with his future efficiency as a soldier.
*He claims. that he was in the performance of military duty at the time of the accident.

(If the soldier makes no claim that he was on duty at the time, the certificate below should be signed by him.)

Station Field.
Date 14-6-17.

E. Barry Captain
Medical Officer in Charge. C.A.M.C.

†Here insert "trivial" or "serious."
‡Here insert "will" or "will not."
*Here insert "claims" or "does not claim."

Certificate to be signed by Soldier.

I, _____ hereby declare that the injury sustained by me on the _____ did not occur while I was in the performance of military duty.

_____ {Soldier's Signature.}
Station _____ _____ {Signature of Medical Officer.}
Date _____

A.G.'s OFFICE No. 23 JUN 1917 16/113 20 CANADIAN

Certificate of Commanding Officer.

(This certificate will be completed only in cases of trivial injury where the soldier claims to have been injured while on duty.)

I certify that the injury to the above-named soldier † occurred while he was in the performance of military duty.

‡ Dr Miller was kicked by a horse June 12/17 He was on stable parade & was grooming his horse, he was in no way to blame for the injury.

The soldier has been so informed.

Station _____
Date _____

E. L. McCaughey
Commanding 4th Hos Bty

†Here insert "occurred" or "did not occur."
‡If on duty, state—
(a) The date of the injury.
(b) The place where it occurred.
(c) The nature of the duty.
(d) Whether the soldier was in any way to blame.

This Army Form will be attached to the Medical History Sheet, on which it will be recorded whether the soldier was on duty, and whether he was to blame.

+6 C.C.S.
16-6-16

M. F. W. 41
100M-1-18.
1772-39-889.

Name Gnr. Miller J.

Regimental No. 348301

Unit C.F.A.

Date of enlistment

Place of "

Married (yes or no) No

Amount of pay assigned monthly $ 15[00]

To whom payable Thomas J. Mills

Name and address of next-of-kin

Newmarket.

Insane

Date and place discharged

Reason for discharge ~~charge from 17.7.18~~ Died 17/7/18

Character on discharge ~~D.R.~~

Castlebogis, Maghera, C. Derry. Ireland.

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	Remarks, Casualties, etc.
Jan. 16	Mar 31	75	1	75	75	10	7	50413	96496	64143			45		45	
Apr 1	30	30	1	30	30	10	3	45146	48446	68638			15		15	
May 1	31	31	1	31	31	10	3	10469	46503	56756	00		15		15	
June 1	30	30	1	30	30	10	3	48856	52136	82215			15		15	
July 1	31	31	1	31	31	10	3	10506	56540	66				C.F.	54066	
Aug 1	24	24	1	24	24	10	2	40[54066		36332	35					H.S. & Cas 29.7.18 Do 105.
								35	60206	36331	56706				60206	Disch 24.8.18 DO 126

M. F. W. 41
100M-1-18.
1772-39-339.

Name.....

Regimental No.

Unit

Date of enlistment

Place of "

Married (yes or no)

Amount of pay assigned monthly $

To whom payable

Name and address of next-of-kin

Date and place discharged

Reason for discharge

Character on discharge

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

M. F. W. 41
100M-1-18.
1772-39-889.

Gunner Name Miller, John

Regimental No. 348301

Unit 5th Draft, R.C.H.A.

Date of enlistment

Place of "

Married (yes or no) No

Amount of pay assigned monthly $15.00 pd. to 31-12-17

To whom payable Thomas J. Miller,

S.S. Aragusya, 16-2-18. Glatabogis, Maghera, C. Derry, Ireland.

Name and address of next-of-kin L P C No. M 273
File No. P M 25 Mi

Date and place discharged

~~Reason for discharge~~ and closed by England.

Character on discharge

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date					
	15-1-18							413 96	413 96							Balance from Eng. L.P.C.
												Balance Credit			413 96	Account transferred
									413 96						413 96	to "D" unit, M.H.C.C. with Credit Balance

M. F. W. 41
100M-1-18.
1772-39-389.

Name _____

Regimental No.

Unit

Date of enlistment

Place of "

Married (yes or no)

Amount of pay assigned monthly $

To whom payable

Name and address of next-of-kin

Date and place discharged

Reason for discharge

Character on discharge

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

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

Name Miller. J.
Surname Christian Name

Regimental Number 34431. Rank Sgt.

Unit

Original Unit

District where paid

Date of Discharge

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		

Remarks: Record of P.D.P

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

File No. 012 f 46. J - 13 f

WAR SERVICE GRATUITY.

Nv. 21-4-20

Register No. M2194

Reg. No. 344301

Name Miller. J.

Address

Dependent

Address

Ck drawn in favour of Asst. Sec'y, Ottawa, 14/5/20 WJL

Pay Soldier $ 420.00

C B Gayler
I P Wells.

Clerk W J Lynn

Pay Dependent $

Days 183 Rate 70. Due 420.00

Less P.D.P. credited

Less further Dr. Bal. or overpayment.

Net 420.00

R M 13 28-5-20

	Date	Ck. Order	Ck. No.	Amount	Remarks.	Date	Ck. Order	Ck. No.	Amount.
1	21/5/20	57236	1818210	420 00					
2									
3									
4									
5									
6				420 00					

495-D.P.-100M-6-19 (10248).

GEN'L AUDITOR
Posting checked by
L Stwt
Date 19/5/20

R Lynn
21/5/20

A-305

Ref. No. 39982

45461

MILITIA AND DEFENCE

ASSIGNED PAY.

Attached and found correct W.K.W.

To whom	T. J. Millar, (Father)	**By whom assigned**	Millar, J.
Address	Slatabogie, Maghera, Co. Derry, Ireland.	**Regtl. No.**	34830I.
		Rank	Dvr.
		Corps, &c.	48th Bty, 2nd Bde, C.F.A.
Rate	$I5.00		
Date to Commence	Ist Jan. I9I7.		

PAYMENTS.

Month.	Year.	Cheque No.	Amt.	Pay Sheet Deduction.	REMARKS.
Jan.	1916				
Feb.					
March					
April					
May					
June					
July					
Aug.					
Sept.					
Oct.					
Nov.					
Dec.					
Jan.	1917	338432	15 -		
Feb.		389045	15		
March		415464	15		
April					
May					
June					
July					
Aug.					

ASSIGNED PAY.

By whom assigned

Regtl. No.

Month.	Year.	Cheque No.	Amount.	Pay Sheet.	REMARKS.
Sept.	1917				
Oct.					
Nov.					
Dec.					
Jan.	1918				
Feb.					
March					
April					
May					
June					
July					
Aug.					
Sept.					
Oct.					
Nov.					
Dec.					
Jan.	1919				
Feb.					
March					

MARRIED OR SINGLE S.

PLACE OF BIRTH Maghera. Co Derry. Ireland.

NAME AND ADDRESS OF NEXT OF KIN Wm. Thos. J. Miller

Maghera. Co Derry. Ireland.

RELATIONSHIP OF NEXT OF KIN Father.

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

Cleared Journal Dept. Ottawa

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

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

REG'L. No. 348301. RANK Gunner. NAME Miller John.

IF IN PERMT. CORPS WHAT UNIT | UNIT 1st C.H.G.A. to Res: Bde C.F.A. TRANSFERRED TO 18th Lab DATE 1-9-16 AUTHORITY PTO 241 9-16

PERMANENT FORCE ALLOWANCES TRANSFERRED TO 12 Bde C.F.A. DATE 9.2.17 AUTHORITY Debit notes

PLACE OF ATTESTATION Toronto. TRANSFERRED TO 2 Bde C.F.A. DATE 22.8.17 AUTHORITY A.F.B.

DATE OF ATTESTATION Aug: 31st 1915 TRANSFERRED TO Res Bde DATE 1-11-14 AUTHORITY Com Roll

N.E. T. 15-3-18

Pay H.O. 6-9-18. Nom R. 4/9

ASSIGNED PAY MONTHLY $ 15.00 DATE EFFECTIVE January 1st 1916. D.C.

PAYABLE TO Thomas. J Miller Glatabogie Maghera County Derry Ireland. RELATIONSHIP Father

11 SEP 1918

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) Stopped EFFECTIVE 1/1/18 REASON Discharged to Canada

DISCHARGE DATE AND PLACE 15/1/18 Canada REASON AND AUTHORITY Kirkdale 20th 29 5/1/18 Invalided.

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

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
			91	00			9	10						10 00	110 10												29 20			29 20	80 90				6.9
Apl 1916	30	1.00	30		30	.10	3								33	1474	Apl	1636	Apl					14 60 / 7 30	14 60					36 50	77 40				
May "	31		31		31		3	10							34 10	1685		1817						7 30	14 60					21 90	89 60				
June "	30		30		30		3								33															127 60				
July	31		31		31		3	10							34 10	2070	July	2167	July					14 60 / 14 60	7 30				1 10	37 60	119 10				1 disPay $11.00 167 13.2.16
Aug	31		31		31		3	10							34 10	2424	July	2512	Aug					2 43	2 43					4 86	148 34		122 ·	26 34	
Sept	30		30		30		3								33					5844	29/9					4 36		2 04 / 6 29	12 69	168 65				Issue on Re Payment Q4005 7/12/16
																				CBD														" " " " 11/827 25/9/17
Oct	31		31		31		3	10							34 10					12 Bde. Sy 31/a						2 62			2 62	200 13				
Nov	30		30		30		3	00							33					12 Bde 90 22/10						2 61			2 61	230 52		167 60	63 02	
			36	60	31	8																												
Dec	31		31		31		3	10							34 10					181 12 Bde Sy						2 62			2 62	262 00		183 ✓	79 00	
Jan	31		34	10											34 10					12 Bde 177 19/11						2 62		15 00 *	17 62	278 48		183 50		New a Pay 1/1/17
Feb.	8		8	80											8 80												15		15 ·	293 28				Trans to 12 Bde C.F.A until Debit notes
															45 50																			
"	9-28		22	00											22 00															294 28		183 50		
Mar.	31		34	10											34 10					12 Bde 2133 22/1 2067 3/2 1947 7/2 1901 8/2 1708 9/2 1578 3/3							5 23 3 2 61 4 2 61 5 2 62 6 2 62 7 2 62				15		42 07	286 36		184 ·		
			501	60										10	511 60									60 83	38 93	41 85	29 20	45	9 43	225 34	Sheet.				

Small Ledger Sheet.

3 48301 Gnr Miller J AP 15 00

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
			501	60										10	511	60								60 83	38 93	41 85	29 20	45	943	225 24	286 36		184 00		
Apl	30	1 00 / 10	33												33							48 44 Bde 22 15 23 38				2 Gr 261		15		20 23	299 13		184 00		
May	31		34	10											34	10						455 305						15		15 00	318 23		184 50		
June	30		33												33							494818						15		15 00	333 23		199		
July	31		34	10											34	10						2 Bde 122 24 47 3553 a			261			15		15	348 72		214		
Aug	22		24	20											24	20						A 71669						15		15	363 92		184 50		Trans to 2 Bde 6.7.a. on a.b.
	23/31		9	90											9	90	145 w/s 231 23/5 286 7/6					160 150		268 268 268					8 04	363 48		184 50		
Sep	30		33												33							A 44812						15	08	15 08	381 40		184 50		
			402	90										10	412	90								68 84	38 93	49 69	29 20	135	9 51	331 20	381 40				

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR 3	DR 4	BALANCE	DEFER RED PAY	SEP. ALLCE. ENG.
Oct 1	Bal fwd	381 40							381 40		
Oct 31	Gnr J	34 10		A 24612			15		400 80		
		34 10					15		400 80		
Nov	GP	33 -		Ch B 24847 L 3.1.8			15				
Dec	"	34 10		AK 2811 26/9/17 CRa	9 73						
				" 2991 15/10/17 "	4 87						
				" 3163 24/10/17 "	9 73						
				" 3359 29/8/17 "	4 87						
				Dec Ch B 18500 L 3.1.8			15				
				Ch AK 2498 10/9/17 CRa	4 87						
				" 2278 26/9/17 Epsom	9 73						
				Q " 19 21/9/17 CRa	2 46						
				Ch AK 2497 14/8/17 "	7 30						
		67 10			53 56		30				
1-15/	C.P.	16 50									
	Int on bal	1 32							413 96		
		296									

1917

Feb Bal fwd.

June Receipts to close a/c
Sailing No. 51 – 4/7/18 413.96
413.96

CANADIAN
ASSIGNED PAY AUDITED
J Roy AUDIT CLERK
DATE 20 5-19

A.F.M. FORM REN'D ... EFFEC. ...
DISCHARGED TO Canada DATE 5/7/18
PAY BOOK VERIFIED ...
BAL. 413 96 P.C. REN'D ...
AUTHY ... 20 ...

Invalided.

Checked

Army Form B. 183.

Report on a Case of Mental Disability.

1. Regimental Number. 348301 Rank. Driver

Surname. Miller Christian Name. John

2. Regiment or Corps. C.F.A.

3. Age last birthday. 37 Religion. Not Known

4. Place of birth. Single

5. Married or single.

6. Names and Addresses of nearest surviving relatives. Refuses to answer

7—Service. Foreo Years. 9 1 Days.

COUNTRY	PERIODS	
	From	To
Refuses to answer		

The answers to the following questions will be in the handwriting of the Officer in medical charge of the case.

8. Character, especial regard being paid as to whether temperate or otherwise. *(For guidance in forming an opinion, the Company Conduct Sheet will be obtained from the soldier's Commanding Officer.)* Total abstainer

9. Form of mental disease. Delusional Insanity

(8 2 25) W 10941—1992 25,000 1/15 H W V (R) Forms/B. 183/10

10. Is this a first attack? No

11. Duration of present attack. Two weeks at least

12. Was the attack sudden or insidious? If the latter, mention any peculiarity of behaviour or change in habits which preceded it. Insidious, do not know

13. Was it preceded or accompanied by any particular illness, such as fever, rheumatism, syphilis, &c.? No

14. What are the supposed causes (moral or physical) of the attack? Not Known

Has the patient suffered from sunstroke, concussion, or injury of the head? Will not give any information

18. (*a*) Is the disease complicated with epilepsy, paralysis, or homicidal or suicidal impulses? No

(*b*) If suicidal tendency exists, the way in which self-destruction has been attempted should be stated. No suicidal tendency

19. (*a*) Is the patient noisy, dangerous, mischievous, or given to steal? No

(*b*) Are his habits cleanly or the reverse? Cleanly

Station Witley

Date 28/11/17.

E. D. French
Capt RAMC.
Officer in medical charge of the case.

The A. D. M. S. (or D. D. M. S.)

_____ District (or Command).

I recommend that this soldier be brought before a Medical Board, with a view to his mental condition being definitely affirmed, and his disposal determined.

Station _____

Date _____

_____
Officer in charge, Military Hospital.

15. Has the disability been caused or aggravated by his service as a soldier? If so, how? No

16. Does any hereditary predisposition exist? Do not know

17. What are the particular ideas or actions which have induced the belief of insanity?

(a) Observed by you. (a) He believes he is immune to gas and that the M.O's have tried to cause trouble for him by sending V.A.D.s and women to seduce him.

(b) Communicated to you by others. (b) 28/6/17 Began to have delusions on the subject of men going on leave

WARD NOTES. Newmarket Military Hospital.

No. 348301. Pte. Miller J.

May 30/18. - THis Patients was put into blue Hospital Uniform yesterday morning, since when he has refused to take any nourishment whatever, he also attempts to remove the blue uniform. His delusions are very prominent and of a persecutory nature; he insists that the food is doped, and that we are fastening our minds upon him, and that we are influenced in our treatment of him by the devil. He claims that he is upheld by the Lord, and all our attempts to injure him will be failures. (G.H.S.)

May 31/18. - Diagnosis - Dementia Praecox.
Condition - Retrogressing.
Prognosis - Bad.

Army Form B. 117.

Report on Wounds or other Injuries, received otherwise than in Action.

114
Gen. No.
4269.

Certificate of Medical Officer.

No. 348301 Dr. Millar J. 4th Bty. 2 Brigade C.F.A. Artillery

was admitted to hospital on the 19. 6. 17 suffering

from Fractured arm.

†Here insert "trivial" or "serious."

The disability is of a † trivial nature, and in all probability

‡Here insert "will" or "will not."

‡ will not interfere with his future efficiency as a soldier.

*Here insert "claims" or "does not claim."

*He claims that he was in the performance of military duty at the time of the accident.

(If the soldier makes no claim that he was on duty at the time, the certificate below should be signed by him.)

Station Camiers

Date 21. 6. 17

Hamilton Lt. R.A.M.C.
for. Medical Officer in Charge 2nd Gen Hosp.

Certificate to be signed by soldier.

I, _____ hereby declare that the injury sustained by me on the _____ did not occur while I was in the performance of military duty.

A.G.'s. OFFICE AT THE BASE
No. 16032.0
3-JUL 1917
CANADIAN SECTION

_____ {Soldier's Signature.

Station _____ _____ {Signature of Medical Officer.

Date _____ _____

Certificate of Commanding Officer.

(This certificate will be completed only in cases of trivial injury where the soldier claims to have been injured while on duty.)

†Here insert "occurred" or "did not occur."

I certify that the injury to the above-named soldier † occurred while he was in the performance of military duty.

‡If on duty, state
(a) The date of the injury.
(b) The place where it occurred.
(c) The nature of the duty.
(d) Whether the soldier was in any way to blame.

‡ (a) June 14th. 1917.

(b) Wagon lines 48th How Battery C.F.A. near La Faigette

(c) Stables

(d) no.

The soldier has been so informed.

Station Field

Date June 26th 1917

A. L. McKay Major
Commanding 48th How. Battery C.F.A.

This Army Form will be attached to the Medical History Sheet, on which it will be recorded whether the soldier was on duty, and whether he was to blame.

(92261) W 3725—1772 300,000 6/15 J J K & Co. Form/B. 117

3) Wt. 12893/M1408. 6,000m. 2/17. J. W. Ltd., O. (F828.)

Army Form C. 348.

Forms
C. 348
63

F.B. 35

MEMORANDUM.

O.C.,
Fort Pitt, Chatham.

From

To The O.C.,
Headquarters 1st B.D.E.
C.R.A.
Ross Barracks,
Shorncliffe.

DEFENCE MILITARY HOSPITAL
30 AUG. 1917
O. COMMANDING No. 10 COY. R.A.M.C. CHATHAM

From

To

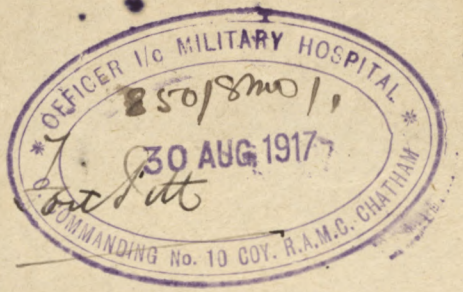
ANSWER.

30th August 191 7

191

Please see report on this case. If there are any mental symptoms which it is my duty to keep the patient under strict observation until we are quite satisfied as to his real mental state

for. Colonel
Officer i/c Military Hospital, Chatham.



To O.C. Fort Pitt.
Chatham

Pte Glovers. V.A.D.

He went to the Matron and asked her if any patients were going on leave on that particular day she replied Yes: he immediately forbade it and when questioned would give no particular reason for his conduct: he was then sent to Fort Pitt as his behaviour was so strange and kept under observation in No 3 Ward for 9 days during which period he showed no mental signs

Aug 30/17.

W. A. Phillipps
Capt RAMC.
Jno G. McDowall

From:- 348301 Dvr.
Miller J.
"B" Battery, 1st Bde., C.R.A.

To:- Officer Commanding

"B" Battery, 1st Bde., C.R.A.

Ross Barracks, Shorncliffe.
August 25th., 1917.

Sir:

I hereby state that on or about the 1st., of July 1917, while a patient in Fort Pitt Military Hospital, Chatham, I received unjust treatment in that I was placed in the Insane Ward of that hospital for about nine days when my case did not warrant such action. My only disease was a fractured right Ulna.

I have the honour to be,
Sir,
your obedient servant.

J Miller

1457.

URINE LABORATORY.

Date 1-11-1917.

Ward 8

Reg. No. 48301 Rank & Name Gnr Miller J Unit C.R.A.

Reaction acid Sp.Gr. 1027 Bile

Albumen neg Sugar neg Blood

Sediment

Capt.CAMC.
M.O. i/c Ward.

Capt.CAMC.
Officer i/c Laboratory.

W.8

~~#~~ 2H 8301.

P/E Miller

No. 12 CANADIAN GENERAL HOSPITAL,
Bramshott,
4/12/17 1917.

This is to certify that the marginally noted man is free from all Vermin, Venereal and Contagious Diseases and is fit to travel.

D Murray Capt. CAMC.

M.K. (Can) 115

2 wp

2 wp

From
The Officer-in-Charge,
The Lord Derby War Hospital,
WARRINGTON.

To Mr Miller
Alatabogie
Magherra
Co Derry. Ireland.

17. 12 1917.

Dear Sir,

I regret to inform you that your Son. No. 348301
Dvr. J. Miller C.F.A.
is now a patient in this Hospital suffering from a "Nervous Breakdown." His bodily health is fair and there is no cause for anxiety.

I should be glad if you will inform me whether there is any history of any nervous trouble in his family (including Aunts and Uncles.)

This information will considerably help the Medical Officer who has charge of the case and should also include any information with regard to any history of mental trouble intemperance or fits. We should also be glad to know whether he has had any worries or previous attacks of this kind before, and any other information you may have respecting him.

Should he not be fit to return to duty and have to be invalided from the Army, would you be willing to receive him at your address?

R Rogers

Major, R.A.M.C. (T).
for Officer-in-Charge,
THE LORD DERBY WAR HOSPITAL.

P.S. In future, please address all communications to the Officer-in-Charge of the Hospital, and not to individual Officers.

From

To The Officer-in-Charge,
The Lord Derby War Hospital,
WARRINGTON.

1917.

PLEASE REPLY HERE AND RETURN EARLY.

Dear Sir,

There has never been any trouble of this kind in the family before. They were all generally healthy. He has been abroad a good deal and I have never heard of any complaints of this kind. He had no worries as far as I know. I am living alone here and would not have a very good way of looking after him. If necessary you could write to his sister whose address

P.T.O

is

Mrs. Butt.
12 Queen's Road
(Woodslee)
Kingston Hill
Kingston
Surrey
England.

Sincerely yours
Thomas his X mark J Mullan

P.S.
I would be glad to have
him if I had any way
to attend him if he wishes
to come, I'll attend him
myself as well as I can.
T. J. M.

Witness
Willie Johnston

Army Form B. 181.

CLINICAL CHART.

(To be attached to Case Sheet.)

Corps C. R. A. Military Hospital No 12 Cairo Hospital

No. 341830 1 Rank and Name Pvt Miller J. Age 38 Service 9 1/2

Disease Delusional Insanity Date of admission 30 — 11 — 17 Date of discharge _____ Result _____

Dates of Observation	30	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30
Days of Disease																															
Temperature, Fahrenheit	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.
107°																															
106°																															
105°																															
104°																															
103°																															
102°																															
101°																															
100°																															
99°																															
98°																															
97°																															
Pulse per Minute	80	80	90	90	88																										
Respirations per Minute	18	20	18	20	20																										
Motions per 24 Hours		1	1																												

Catheterised

Wt. W6728/M2313—2,000,000—6/17—H. & Sp. (10693)—A.F.B. 181/5 (E. 735)

Signature D Murray Capt In charge of case.

Army Form B. 181.

CLINICAL CHART.

(To be attached to Case Sheet.)

Corps_____ Military Hospital_____

No._____ Rank and Name_____ Age_____ Service_____

Disease_____ Date of admission_____ Date of discharge_____ Result_____

Dates of Observation

Days of Disease

Temperature, Fahrenheit

Time A.M. P.M.

107° 106° 105° 104° 103° 102° 101° 100° 99° 98° 97°

Pulse per Minute

Respirations per Minute

Motions per 24 Hours

Wt. W3728/M2313—2,000,000—6/17—H. & Sp. (10693)—A.F.B. 181/5 (E. 735)

Signature_____ In charge of case.

PART I. A.F.B. 179 Canada (Revised).

THIS MAN HAS NOT SERVED WITH AN EXPEDITIONARY FORCE

Reserved for M.H.C.

Regt. No. 348391 Rank Driver Surname Miller Christian Name JOHN

Unit or Corps—(a) Overseas from United Kingdom ..... (b) In United Kingdom C.F.A.

Born at—Town Maghera County or Province Derby Country Ireland

Date of Birth—Day 12 Month March Year 1882 Age ..... yrs. ..... months.

Joined at Toronto Ont Canada Date Aug. 29th 1915

Former Trade or Occupation .....

Permanent marks or peculiarities that will serve for future identification:—

Brown birth mark on inner side of right upper arm. Nose deflected to the right side and small scar on left nose

Height—feet 5 inches 4½ Colour of eyes Grey

Signature of Soldier (*for identification purposes*) .....

Medical Report.

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

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

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

Disabilities Group (*a*). DELUSIONS.

Disabilities Group (*b*). Nil

Disabilities Group (*c*). Nil

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.	INSANITY		
(*ii.*) As to Group (*b*) above.	Nil		
(*iii.*) As to Group (*c*) above.	Nil		

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? Yes

(*i.*) As to Group (*a*) above? Yes If yes, has Active Service aggravated it? No

(*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? ——

PART II.

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. No. Should be Delusional Insanity

12. Is the cause of the disability, fully indicated in Part I. (2)?
If not, indicate it. No. ~~Shock Act~~ Should be Active Service and Shock following wound of Right arm

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

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

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*, $\frac{1}{5}$, $\frac{2}{5}$, $\frac{3}{5}$, $\frac{4}{5}$, *or all.*)
NA

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

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

18. Remarks.

19. Recommendation:—(*a*) Fit for duty?
(*b*) Fit for base duty?
(*c*) Invalid to Canada? Yes.
(*d*) Discharge from service as permanently unfit?

Classification for the Military Hospitals Commission.

Date of Board

The Lord Derby War Hospital
15 DEC. 1917
WARRINGTON

Station

Signatures of the Board { Rmgerms / Major, R.A.M.C. (T.) President. / Wm Paget Lt RAMC.

Approved A.D.M.S.

Dated at Station 191

PART I. (*continued*).

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

(*i.*) While on duty? Nil (*ii.*) While off duty? Nil

(*iii.*) Was a Court of Inquiry held? — (*iv.*) Where? — (*v.*) When? —

(*vi.*) Opinion of the Court? —

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

28/6/17. fracture right ulnar
28/6/17. began to behave strangely and had delusions on the subject of men going on leave.
28/6/17. He has the delusion that he has faith enough to go through gas without a respirator and claims the O.A.D. at the hospital were trying to seduce him.

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

He is very quiet and has the above mentioned delusions. He does not want to be sent to Canada His general condition is good.
Respiration, Digestive Urinary systems normal
Vessigns of tabes Wasserman not reported

8. OPERATION. (*i.*) Was one performed? No

(*ii.*) If so, state what. —

(*iii.*) Was one advised and declined? —

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

9. (*i.*) Is there loss or decay of teeth attributable to Active Service? No

(*ii.*) If so, describe. —

10. DO YOU RECOMMEND:—

(*a*) Fit for duty? —

(*b*) Fit for base duty? —

(*c*) Invalid to Canada? —

(*d*) Discharge from the Service as permanently unfit? Yes.

Date of Report 28/11 1917 Signed E. J. French Capt.
Officer in medical charge of case.

Station Witley

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

Officer i/c Hospital / S.M.O. Brigade — Strike out one of these.

Dated at Witley Station, on 28/11 1917

* Delete if inapplicable.

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.

.....

.....

.....

Forms
I. 1237.
11

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
6062	348301	Dr.	Keller	J.
Year 1917	Unit. C R a	Age. 38	Service. 09/12	

Station and Date. Disease Delusional Insanity

Ft Worth Camp Cpl Examining Board 30

Patient is quiet and well behaved. Has very pronounced delusions. Says he is persecuted by his Superior Officers

Present physical Condition is normal.

Dec 4 Removed to Waverly from Dr

I HEREBY CERTIFY that No. .....
is suffering from any Infectious Disease. He is free from ve[illegible] and is in a fit state of bodily health to allow of his transfer to .....

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

(23205) Wt. W 4234—M 627. 1,000,000. 8/16. C.F.&S. Forms/I. 1237/11.

P.T.O.

Station and Date.	

Forms
I. 1237
12

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
MK (Can) 115 (M)	348301	Dvr	Miller	J.
Year 1917	Unit. C.F.A.	Age. 38	Service. Total 2.5/12 In fd:	

Station and Date.

Disease Delusional Insanity

5·12·17 Admitted from 12th Can Genl Hosp Bram ~~Severe~~ Slight ~~Dangerous~~

The Lord Derby War Hospital, Warrington.

NEXT OF KIN.

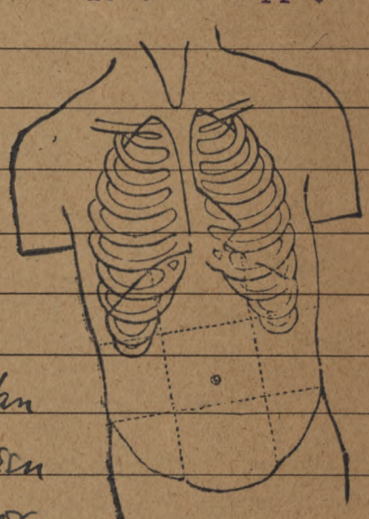
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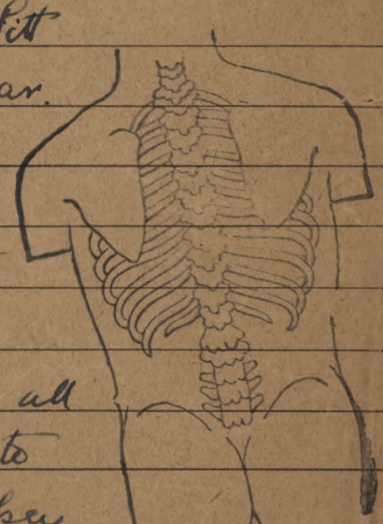
TV 1	TV 2	TV Nil.
Date		

Cross out that which does not apply.

Weight- 51·8·10

Born in Ireland. Standard II at School. Was working in German West Africa & ~~for~~ at outbreak of War & fought with Botha's force against them. No malaria. Then went to Canada & enlisted 31·8·15. Is a miner. Denies alcoholic excess & refuses to give particulars about his sexual affairs. Came from Canada Jan 1916. Went to France. Has been under fire. NW wounded nor buried. Invalided home to Fort Pitt Chatham (28.6.17) with fracture Rt Ulnar. From there he went to a VAD Hospital & was returned to Fort Pitt- because he forbade the nation to send men on leave He then appeared to carry on all right until after going back to duty when he refused to obey orders for a gas drill.





Warrant to

Station.

RECOMMENDED FOR

Discharge
On
To Duty
Light Duty.

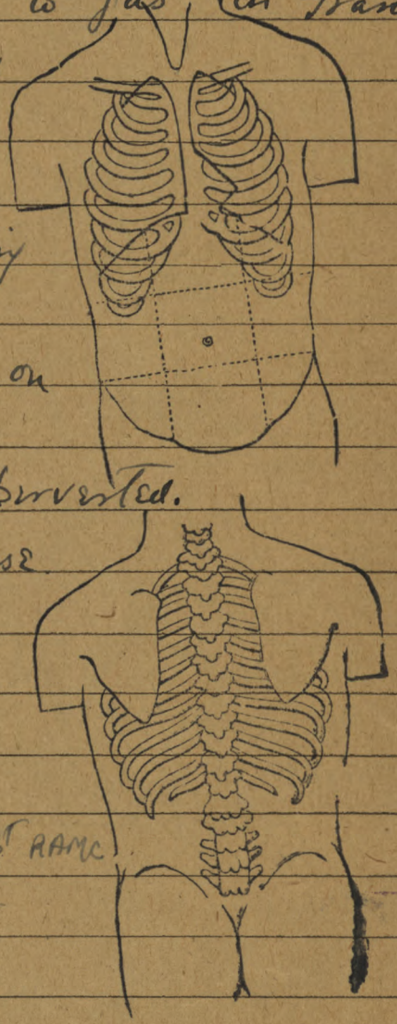
* The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.

Wt. W 6604/M 2870—1,500,000—8/17—H. & Sr. (10938). Forms/I. 1237/12. (E239)

[P.T.O.

Station and Date.

He also ~~that~~ thought that women (doctor & masseuse) were trying to seduce him at Fort Pitt & ~~also~~ He seems to think that everybody who examined his arm after a certain stage tried to ~~seduce~~ have designs upon him.
At the present time he converses well, memory & orientation good. He states that the reason he told the nation not to send men on leave was because he wanted to speak to them first. That he refused to wear a respirator because he had been exposed to gas in France & had no ill effects while others who were wearing respirators had. He has no plausible explanation to offer concerning his sexual delusions & has probably had abnormal ideas on these subjects for a long time his reasoning & judgment are perverted. No signs of organic nervous disease Old scars ~~&~~ left groin (he says non-venereal & describes a septic infection of leg) & right side of neck.



O. P. Napier Pearn Capt RAMC

I ~~HEREBY CERTIFY~~ that No. 348301 Dr Miller J is not suffering from any Infectious Disease. He is free from vermin, and is in a fit state of bodily health to allow of his transfer to Hospital Ship for Canada

E. G. Purnell Capt MRC U.S. Army.

Army Form B. 183.

Report on a Case of Mental Disability.

1. Regimental Number. 348301 Rank. driver

Surname. Millar Christian Name. John

2. Regiment or Corps. C.A.C.

3. Age last birthday. 39 Religion. ~~R.C.~~ not Known

4. Place of birth. County of Derry Ireland

5. Married or single. single

6. Names and Addresses of nearest surviving relatives.

Refuses to answer

7—Service. Two Years. 9 Days.

COUNTRY	PERIODS	
	From	To
Refuses to answer.		

The answers to the following questions will be in the handwriting of the Officer in medical charge of the case.

8. Character, especial regard being paid as to whether temperate or otherwise.
(*For guidance in forming an opinion, the Company Conduct Sheet will be obtained from the soldier's Commanding Officer.*)

~~Temperate~~ Total abstainer

9. Form of mental disease. Delusional insanity

(8 2 25) W 10941—1992 25,000 1/15 H W V (R) Forms/B. 183/10

10. Is this a first attack? no

11. Duration of present attack. two weeks at least

12. Was the attack sudden or insidious? If the latter, mention any peculiarity of behaviour or change in habits which preceded it. Insidious, do not know.

13. Was it preceded or accompanied by any particular illness, such as fever, rheumatism, syphilis, &c.? no

14. What are the supposed causes (moral or physical) of the attack? not known

Has the patient suffered from sunstroke, concussion, or injury of the head? will not give any information.

18. (*a*) Is the disease complicated with epilepsy, paralysis, or homicidal or suicidal impulses? no

(*b*) If suicidal tendency exists, the way in which self-destruction has been attempted should be stated. no suicidal tendency

19. (*a*) Is the patient noisy, dangerous, mischievous, or given to steal? no

(*b*) Are his habits cleanly or the reverse? cleanly

E. D. French
Capt Canc.
Officer in medical charge of the case.

Station Witley

Date 28/11/17

The A. D. M. S. (or D. D. M. S.)

_____ District (or Command).

I recommend that this soldier be brought before a Medical Board, with a view to his mental condition being definitely affirmed, and his disposal determined.

_____

Station _____

Date _____

_____
Officer in charge, Military Hospital.

15. Has the disability been caused or aggravated by his service as a soldier? If so, how? No

16. Does any hereditary predisposition exist? Do not know

17. What are the particular ideas or actions which have induced the belief of insanity?

(a) Observed by you. (A) He believes he is immune to gas and that the M.O.'s have tried to cause trouble for him by sending W.D.'s and women to seduce him.

(b) Communicated to you by others. (b) 28/6/17 Began to have delusions on the subject of men going on leave.

ORIGINAL.

MEDICAL HISTORY SHEET.

Surname Miller Christian Name John

Examined on 31st day of August 1915 at Toronto

Approved by Wrogde Capt Rank M.O.

Birthplace City or Town Maghera, Ireland, County Derby

Apparent age 34 yrs. 5 ms.

Trade or occupation Miner

Height 5 Feet 4 Inches.

Weight 110 Lbs.

Chest measurement Minimum 33 inches. Maximum expansion 36 inches.

Physical development Good

Small-Pox Marks None

Vaccination Marks Arm Right. 2 Left. Number 2

When Vaccinated last 1912

(a) Marks indicating congenital peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

Operation scar (irregular) for abscess on groin

Date	Fit or Unfit	Examined for Re-engagement,
19/10/17	Fit	R.S. Clegg Capt M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

27 JUN 1917

Date	Result	Vaccinations.
29/12/15		H.A. Boyce M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
10/2/15		H.A. Boyce M.O.
22/12/15		H.A. Boyce M.O.
24.2	13.1.17	Ham Iron Paff Bar M.O.

Enlisted on 31st day of August 1915 at Toronto

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	Q.O.R.	348301		
Transferred to..	1st D. of C.			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
The Lord Derby War Hospital 15 DEC. 1917 WARRING	Admitted 5/12/17	Delusional Insanity	Repatriated to Canada R Rager Major, R.A.M.C. (T.) For Officer Commanding THE LORD DERBY WAR HOSPITAL.

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.

100M.—5-15.
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.
Fort Pitt Military Hosp Chatham.		23	6	17	24	6	17		2.	Transferred to Clovers.	Lt a. Staines Lieut. Colonel Officer i/c Military Hospital, Chatham
CLOVERS HOSPITAL SITTINGBOURNE.		24	6	17	28	6	17	Frac: R. Ulnar	4	On June 28 began to behave strangely and had delusions as to the subject of men going on leave	Rebecca Pelly Lieut. RAMC
Fort Pitt Military Hosp Chatham.		28	6	17.	[illegible]			Frac R. Ulna	16	Fair union + remunerto.	A. Rich Lt
Broad Oak		[illegible]			[illegible]			"	10	Fit for furlough 4/pm	R. Lawless Lieut RAMC
CAMP DIV. FORT PITT. MIL. HOSP., CHATHAM.		24	7	17	25	7	17	"	2	Transferred to Epsom Recovered. New fit	H. Leathes Capt R.A.M.C.
Mb. H. Epsom		25	7	17						A.1.1	
										Inv.	
Bramshott		30	11	17	5	12	17		6	Transferred to Warrington	D Manny Capt
The Lord Derby War Hospital 15 DEC. 1917 WARRINGTON.		5	12	17				delusional Insanity		Recommended for Repatriation to Canada	H. Napier Pearn Capt RAMC Officer i/c

"ARAGUAYA." 4-2-18 15-2-18.

Do

Geo Cleary

Pearn Capt

This space to be for numbers

M

Proceedings on Discharge.

21/11/33

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

M.B.

No. 348301

Rank Dvr.

Surname MILLER JOHN

Christian Name

NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.

Corps (Squadron, Battery or Company) 1st D.A.C.

Date of Discharge Aug 24th 1918

Place of Discharge Toronto Ont.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 37 years months.

Height 5 feet 4 inches.

Complexion Dark

Eyes Brown

Hair Dark Brown

Trade Miner

Intended place of residence (To be given as fully as practicable.) c-o. Newmarket Military Hospital

Descriptive Marks

Irregular operation scaron groin

Vacc scaron left arm.

Released 10/10/37 649-M-10715

2. The above-named man is discharged in consequence of

physical Unfitness

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.

To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.

3. Conduct and character while in the service have been, according to the records, etc.

Very good

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.)

Miner

M. F. B. 218.

100M.—1-17.
H. Q. 1772-39-113.

(OVER)

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

Nil

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

6. Medals and Decorations.....

Nil

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) Toronto Ont.

(Date) Aug 24th 1918

A Robson Lieut
Captain,
Commanding For Lieut.-Colonel,
O.C. No. 2 District Depot.

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.

Patient refuses to sign for same.

(Place) Toronto Ont. A Stevenson *(Signature of Soldier.)*

MEDICAL SUPERINTENDENT NEWMARKET MILITARY HOSPITAL

(Date) Aug 24th 1918 H S Bennett *(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).....2 years 354 days.

Total.....3 years 354 days.

11. **Confirmation of Discharge.**

The discharge of the above-named man is hereby confirmed.

(Place) Toronto Ont.

(Date) Aug 24th 1918

(Signature) A Robson Lieut
Captain,
For Lieut.-Colonel,
O.C. No. 2 District Depot.

Reservations referred to at Para. 8.

(To be signed by the soldier. When there are none, it is to be so stated, and signed by the soldier.)

H S Beeman

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form B. 263.	
Squadron / Battery / Company } Conduct Sheet,	"	B. 263a.
Copies of Convictions, by C. P.		in MS.
Med. Hist. Sheet,	Militia Form B. 313	
Medical Report for Invalid*	"	B. 227.
Statement of Man's Account on Transfer and Last Pay Certificate,	"	D. 877.

*Only if discharged "Medically unfit."

Attestation Paper,	Militia Form B. 235.	
Proceedings on Discharge	"	B. 218.

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 (in the event of such having been prepared.)

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.

Rank Driver. Name MILLER, John Reg'l No. 348301

Unit 5th Dft R.C.H.A. to N.B. C.F.A. If in perm. Corps, What Unit? Married or Single Single

Place and Date of Enlistment Toronto, Aug. 31st 1915. Place of Birth Maghera, Co. Derby, Ireland.

Name and Address, Next-of-Kin Thomas James Miller Maghere, Co. Derry, Ireland. Relationship Father 11 SEP 1918

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance Payable to

Relationship

Discharge, Date and Place Canada 15/1/18 Reason Character

Date From	Date To	PAY No. of Days	PAY Rate	PAY Amo	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.
1916																	
1 Jan. 31		31	1·	31·	31	·10	3 10	10·	44 10			9 73			9 73	34 37	
1/2/16	29/2/16	29	1·	29	29	·10	2 90		31 90			14 60			14 60	51 67	
Year		31	.	31	31	.	3 10		34 10			4 87			4 87	80 90	
				91			91 0 10		110 10			29 80			29 80		

BALANCE TRANSFERRED TO NEW LEDGER.

Checked AM

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			No.	Date						

CANADIAN Nil
ASSIGNED PAY AUDITED

J Roy AUDIT CLERK

DATE 20-5-19

AUDITOR | PAYMASTER

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

M. OR S. | REGT. NO 348301 | RANK | NAME (IN FULL) Miller John.
(BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN | RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? | DATE EFFECTIVE

TO WHOM PAID | RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY
For adjustment purposes only.		

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

PLACE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

DATE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

ASSIGNED PAY $ | DATE EFFECTIVE

PAYABLE TO | RELATIONSHIP | ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE

DISCHARGED | PLACE | DATE | REASON | AUTHORITY | IF ENTITLED TO POST DISCHARGE PAY

MONTH	PAY AND F.A. NO. OF DAYS	PAY AND F.A. RATE	PAY AND F.A. AMOUNT $	PAY AND F.A. AMOUNT C.	OTHER CREDITS $	OTHER CREDITS C.			TOTAL CREDITS $	TOTAL CREDITS C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	ACQUITTANCE ROLLS COL. NO. 1 DATE	ACQUITTANCE ROLLS COL. NO. 2 NO.	ACQUITTANCE ROLLS COL. NO. 2 DATE	ACQUITTANCE ROLLS COL. NO. 3 NO.	ACQUITTANCE ROLLS COL. NO. 3 DATE	CASH PAYMENTS COL. NO. 1 $	CASH PAYMENTS COL. NO. 1 C.	CASH PAYMENTS COL. NO. 2 $	CASH PAYMENTS COL. NO. 2 C.	CASH PAYMENTS COL. NO. 3 $	CASH PAYMENTS COL. NO. 3 C.	ASSIGNED PAY $	ASSIGNED PAY C.	REGIMENTAL CHARGES $	REGIMENTAL CHARGES C.	OTHER CHARGES $	OTHER CHARGES C.			TOTAL DEBITS $	TOTAL DEBITS C.	BALANCE DEBIT $	BALANCE DEBIT C.	BALANCE CREDIT $	BALANCE CREDIT C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT																									70	00									70	00		Overpaid W.S.S. to D.S.C.R. Ottawa, refund requested and payment passed to Dist. Treas. Tfr. No. 649-M-10715. 19/3/29

209M-3-19.—L. L. 58788-M. & D. 9985.
M. F. W. 2596.
1772-30-1898.