

ATTESTATION PAPER.

No. 654132

101st Huron Battalion, C. E. F.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

- 1. What is your surname?..... *Nash*
- 1a. What are your Christian names?..... *Edward Beverly*
- 1b. What is your present address?..... *Gorrie, Ont.*
- 2. In what Town, Township or Parish, and in what Country were you born?..... *Gorrie Ont. Howick Co. Canada,*
- 3. What is the name of your next-of-kin?..... *Thomas Nash*
- 4. What is the address of your next-of-kin?..... *Gorrie Ont.*
- 4a. What is the relationship of your next-of-kin?..... *Father*
- 5. What is the date of your birth?..... *April 17 1887*
- 6. What is your Trade or Calling?..... *Farmer*
- 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?..... *no*
If so, state particulars of former Service.
- 11. Do you understand the nature and terms of your engagement?..... *yes*
- 12. Are you willing to be attested to serve in the }
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? } *yes*

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

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

Date *Dec 9* 191*5* *Beverly A. Nash* (Signature of Recruit)
P. L. Ferguson (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

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

Date *Dec 9th* 191*5* *Beverly A. Nash* (Signature of Recruit)
P. L. Ferguson (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 *Cornwall* this *9th* day of *December* 191*5*.

W. S. W. Kercher (Signature of Justice)
A Commissioner for

taking Affidavits in H. C. J. etc.

P.M. 19

1916

Description of Edward Beverly Nash on Enlistment.

Apparent Age..... 28 years 8 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

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

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

Height..... 5 ft. 11 1/2 ins.

scar on right cheek

Chest measurement. { Girth when fully expanded..... 37 ins.
 Range of expansion..... 2 1/2 ins.

Complexion..... Fair

Eyes..... Dark

Hair..... Dark

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

CERTIFICATE OF MEDICAL EXAMINATION.

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

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

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

Date..... Dec 29..... 1916.

Place..... Wroxeter Out.

Alex. McLeod
 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.

Edward Beverly Nash..... 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.B. Bonnie Druse..... (Signature of Officer)
O.C. 161st Battalion C.E.F.

Date..... Dec 29..... 1916.

Triplicate

ATTESTATION PAPER.

No. *654132*

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

- 1. What is your surname?..... *Wash*
- 1a. What are your Christian names?..... *Edward Beverly Ontario Canada*
- 1b. What is your present address?..... *Corrie, Co No 2, 2nd Cont*
- 2. In what Town, Township or Parish, and in what Country were you born?..... *Howick tp, Huron Co, Ontario Canada*
- 3. What is the name of your next-of kin?..... *Thomas Wash Ontario Canada*
- 4. What is the address of your next-of-kin?..... *Corrie Ontario Canada*
- 4a. What is the relationship of your next-of-kin?..... *Wife*
- 5. What is the date of your birth?..... *April 18 1887*
- 6. What is your Trade or Calling?..... *Farmer*
- 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?..... *no*
If so, state particulars of former Service.
- 11. Do you understand the nature and terms of your engagement?..... *yes*
- 12. Are you willing to be attested to serve in the }
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? } *yes*

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

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

Date *Dec 29* 191*5*. *Beverly Wash* (Signature of Recruit)
C. Ferguson (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

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

Date *Dec 29th* 191*5*. *Beverly Wash* (Signature of Recruit)
C. Ferguson (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 *Corrie Ontario*, this *29th* day of *December* 191*5*.
Canada. *W. S. W. Kerker* (Signature of Justice)
A Commissioner for

taking Affidavits in H. C. J. etc.

Description of Edward Beverly Nash on Enlistment.

Apparent Age.....years.....months.

(To be determined according to the instructions given in the Regulations for Army Medical Services.)

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

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

Height.....5 ft. 11 1/2 ins.

scar on right cheek.

Chest measurement { Girth when fully expanded.....37 ins.
Range of expansion.....2 1/2 ins.

Complexion.....*Fair*

Eyes.....*Dark*

Hair.....*Dark*

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

CERTIFICATE OF MEDICAL EXAMINATION.

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

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

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

Date.....*Dec. 29*.....191*5*

Place.....*Windsor, Ontario Canada*.....*Alex. McLeod* 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.

Edward Beverly Nash.....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.

[Signature] (Signature of Officer)
O.C. 16th or 17th Battalion C.F.F.

Date.....*Dec. 29*.....191*5*

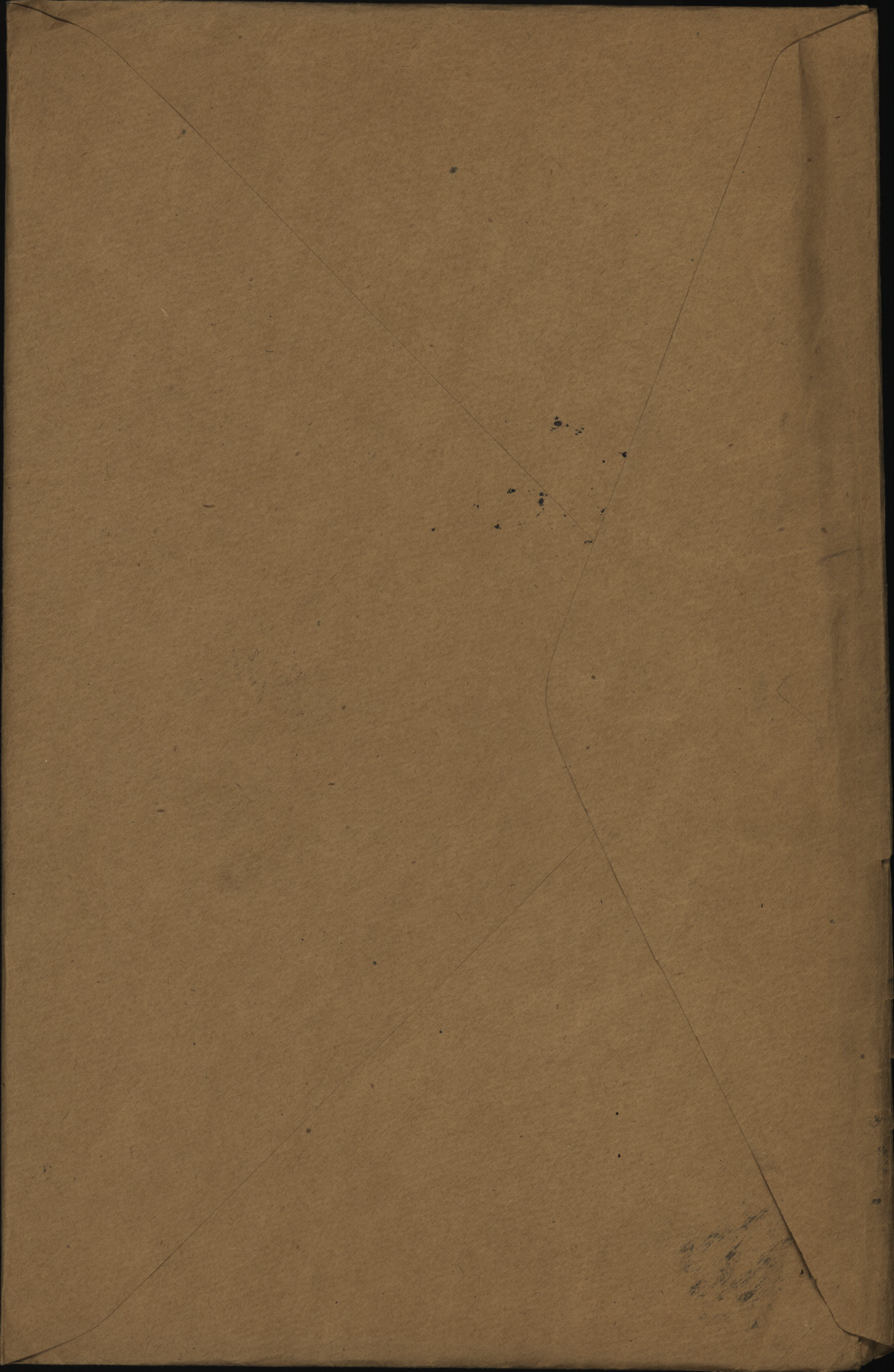
REGIMENTAL DOCUMENTS

4/19
30-419 Pte

NAME NASH, EDWARD, BEVERLY REGT. NO. 654132 UNIT 161st 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)		<i>RF 26-11-19</i>			DEATH
2 CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
TRAINING HISTORY SHEET (M.F.W. 113)					
1 FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
2 MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
1 DENTAL HISTORY SHEET (M.F.B. 465)					Category <i>Dumb</i>
1-2 MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					
MEDICAL EXAMINATION (M.F.W. 129)					
TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
LAST PAY CERTIFICATE (M.F.W. 44)				00713	
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 misc					
2 Gas card					3
1 Discharge					40-20
1 m.f.w. 67					26-20
1 pay card					5-20
					3

D
H



Hask Edward B.

Itc 161st - 654132.
P34

Declined to make
a will

Swear

H.A. - "K" SS Empress of Britain

4/19

Resp 30/4/19





Can: Conval: Hospital,
Bear Wood.

Form DMS 1401.

**A. & D.
CARD**

91

.....HOSPITAL.

AT.....

A. & D. No. 0-5. 16495 PL. OF ACTION.....

RANK St REG. NO. 654132 UNIT 3rd MG Co SICK OR WOUNDED.....

NAME Frank E B AGE 30 RELIGION M.....

PLACE IN HOSPITAL hut.....

DIAGNOSIS Hepatitis.....

ADMITTED 27 DEC 1918 FROM Lab Bath.....

DISCHARGED 17 JAN 1919 TO 3rd 660 Seaford.....

TRANSFERRED.....

SERVICE AT HOME 27/12 IN FIELD 9/12.....

RESULTS.....

Fil Di Yb good

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

[P.T.O.]

REMARKS.

See Group 26
occ 1
Des h.

NAME

RANK AND CORPS

CABLE

NO.

DATE

NATURE OF CASUALTY

REG'T'L. No. 654132

H. Q. FILE NO. 649

FOLLOWS
NO.

FOLLOWS

Nash

E

B

Pte

mac Gun Corps

LIST NO.

HOSPITAL

DATE OF
ADMISSION

REMARKS

2292 ⁽²⁾	No. 5 Can. Fld Amb.	9-8-18	P. U. O.
2292 ⁽²⁾	" " Disc. "	11-8-18	" " "
A 322	13 Can. Fld Amb.	14-9-18.	" " "
9326	Disc.	18-9-18	" " "
A 347	3 Gen. Le Report	14-10-18	Nephritis
19365	Bach Was. Bath	7-11-18.	" " "
B406-2	Can. Conv. Beauwood	Wokingham	28-12-18 Nephritis
B423 ⁽²⁾	& " " "	17-1-19	(disc)

SURNAME.

Nash.

CARD NO.

1st Lt

CHRISTIAN NAMES

Edward Beverly

505 Div 2-4-19

FOLL.

REGL. No.

654132

RANK

Plt.

Apr 93rd 3-4-19

Dem Feb 4 1918

Bn

UNIT

161st

FORMER CORPS

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Thomas Nash

RELATIONSHIP TO SOLDIER

Father

ADDRESS

Gorrie, Ont

COUNTRY OF BIRTH

Canada Gorrie Ont, ^{Up.} Toronto

DATE

Apr. 18-1887

PLACE OF ATTESTATION

Wroxeter.

DATE

Dec. 29th 1915

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

Mc 21/3/19-294 Pts.

M. F. W. 22. 100M. -3-16. H. Q. 1772-39-339.

MARRIED

SINGLE

Yes

WIDOWER

Methodist

TRADE OR CALLING

Farmer.

RELIGION

DESCRIPTION.

APPARENT AGE

28

YEARS

8

MONTHS

HEIGHT

5

FEET

11 1/2

INCHES

CHEST MEASUREMENT

37

INCHES

EXPANSION

2 1/2

INCHES

COMPLEXION

Fair

EYES

Dark.

HAIR

Dark.

DISTINGUISHING MARKS

Scar on R. Cheek

MEDICAL EXAMINATION.

PLACE

Wroxeter

DATE

Dec. 29-1915

Present Address. Gorrie, Ont..

EM
MD

~~13~~
~~X~~

Number.....654132.....Rank.....Pte.....

Surname.....NASH.....

Christian Name.....Edward Beverly.....

Units.....47 Bn Can Inf Theatre of War.....France.....

Date of Service.....29/3/18.....

Remarks.....

Latest Address.....Gourne.....

Out

Roll No
Page 6642

Y 2571 73 *Wes*

SEP 30 1873

No. 654132 RANK Pte.

NAME Nash, E. D.

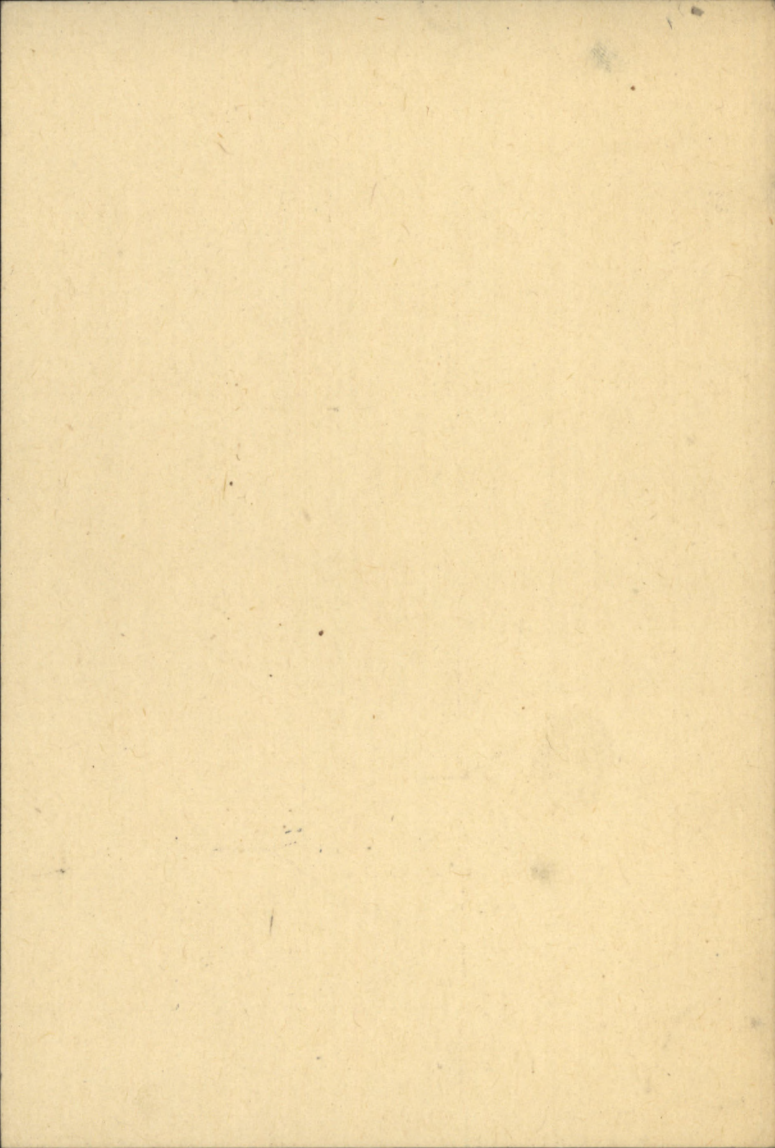
T. O. S. 29-12-15 UNIT 161 *St Battalion*
 D.O. 20 of 29-12-15

M. D. 1

PAID		SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
FROM	TO		PARTICULARS	AUTHORITY
1915 Dec 29	1916 Jan. 31	n.		
Feb. 1	Feb. 29	n.		
Mar.		✓		
Apr		n		
May		✓		
June		n		
July		n		
Aug		n		
Sept		n		
Oct		n		

UNIT SAILED

OCT 30 1916



EDWARD BEVERLY

Name *NASH.*Rank *PTE.*Reg. No. *654132.*Unit *3 RD. BN. C.M.G.C.*Next of Kin *CANADA.*

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
<i>1918</i>						
<i>7 8</i>	<i>967ct</i>	<i>P.W.O.</i>		<i>A 291</i>		<i>34657</i>
<i>9 8</i>	<i>567a</i>			<i>a 292</i>		<i>34794</i>
<i>11 8</i>	<i>leave</i>			<i>a 292</i>	<i>not</i>	
<i>14 9</i>	<i>1367ct</i>	<i>///</i>	<i>P.W.O.</i>	<i>A 322</i>		<i>36830</i>
<i>18 9</i>	<i>Dis Duty</i>			<i>A 326</i>		<i>37014</i>
<i>14 10</i>	<i>3 G. R. Le Trip.</i>	<i>Nephritis</i>		<i>A 347</i>		<i>4873-3</i>
<i>7-11-18</i>	<i>Bath w. H. Bath.</i>			<i>A 365</i>		<i>676</i>
<i>28 12</i>	<i>66th Beawood</i>			<i>B 400</i>		<i>3943</i>
<i>14-1-19</i>	<i>Discharged</i>			<i>B 423</i>		<i>1148</i>
<i>Dear N-136 on sur 17-1-29-1</i>						
<i>3 born Scotland</i>						

SURNAME

CHRISTIAN NAME OR NAMES

REG. NO.

hash.

E. B.

654132

RANK

UNIT

Co.

TROOP

BATTY

Cap

M. G. Corps

3 Bw.

HOSPITAL

DATE OF ADMISSION

9. C. F. a m b

7. 8. 18

51. ~~13. 6. 18~~

HOSP. 9. 8. 18

13. ~~6. 7. 18~~
2. 3. 9. Le Trepard

HOSP. 14. 9. 18.
14. 10. 18.

3. Bath War

HOSP. 7. 11. 18

4. C. C. H. Bearwood

HOSP. 28. 12. 18

DIAGNOSIS

P. u. o. a.

1.

P. W. O. &

2.

Nephritis

3.

DISPOSITION

DATE

6h. 15. 8. 18.

a 291.

Dis 11. 8. 18

REMARKS

16. 8. 18.

a 292

Dis: 18-9-18

19. 9. 18. 322

24. 9. 18. 326-1.

18. 10. 18. 347-2.

Dis 17-1-19.

12. 11. 18. 365

2. 1. 19. 3406/2

22-1-19. 3473 (2)

A.M.D. 2 DEPT.

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

EPITOME OF HOSPITAL TREATMENT

HOSPITAL

ADM.

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

Sheet 11
(SERVICE AND CASUALTY FORM Part II).

Army Form B, 103-II.
Part II.

Regiment or Corps _____ Regimental Number 654132

*Substantive Rank _____ Surname NASH. Christian Names Edward. Beverly

*Acting Rank _____
 (* To be entered in pencil to facilitate alteration.)

(A) Report		(B)	(C)	(D)	(E)	(F)
Date.	From whom received	Authority of Part II. of Orders	Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I, 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	Place of casualty	Date of promotion, reduction, reversion, casualty, &c.	Remarks, and initials and rank of an officer
16-11-18	6309010	261	4.0 Sfm 3 rd BATTAL C	Seaford	7-11-18	
<p><i>Edward Beverly</i> FOR Major/ C RECORDS, C.O.M.F. LIEUT.</p>						
<p>DISCHARGED FROM 3RD C.C.D. Seaford TO MDI. PART II D. O. No. 92 7.2.19</p>						
<p><i>W. Gordon H.</i> for C.O. 8th CANADIAN COMMAND DEPOT</p>						
7.2.19	6mgd.	32	I.O.S. from 6mgd	Seaford	6.2.19	D.O. sta No. 61
<p>SOS to MDI Wing Rnyl SEAFORD 12.3.19</p>						
<p><i>Edmund</i> #1 Adjutant, Concolet Machine Gun Squad</p>						

To be folded on this line.

Nothing to be written in this margin.

A1834 W.6425—P1600 5000000 10/18 G.W.P. Co.3073

MAR 13 1919

CMGD.

(A) Report		(B) Authority of Part II. of Orders	(C) Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	(D) Place of casualty	(E) Date of promotion, reduction, reversion, casualty, &c.	(F) Remarks, and initials and rank of an officer
Date.	From whom received					
12/3/19	OC MAD 1		<p><i>SOS</i> O.C.C. Kimmel Park Return to Canada. No. 7 <i>SOS</i> O.C.C. Kimmel Park ing for Canada, Part II No. 7 <i>for Maj. J. Coombes</i> Commanding MSY Wing, Kimmel Park Camp.</p>		23/3/19	
			<p>← M. T. S. EMPRESS OF BRITAIN. → EMBARKED 23-3-19 TOS No 1 Dist. Depot Dist. Sta. K. 23, 3 .19 SOS dispersed 2,4,19 E.O.N. 33 <i>R. MacLennan Capt</i> TCF O.C. DISP STA K</p>			

Nothing to be written in this margin.

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.
	SOS	To CAN ³ 25/19 MGC. After, O, *←1			

B3

Sheet 1

Fill in Only.—Unit, Number, Rank and Name.
Casualty Form—Active Service.

Unit, Regiment or Corps 161st O.S. Battalion, C.E.F.

Regimental No. 654132 Rank Pte. Name Nash, Edward Beverly
C. E. F.

Enlisted (a) Dec 29/15 Terms of Service (a) War & 6 Mos. after. Service reckons from (a) Dec. 29th, 1915.

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

		<u>Embarked - Canada</u>	<u>Halifax</u>	<u>1-11-16</u>	
		<u>Arrived - England</u>	<u>Liverpool</u>	<u>11-11-16</u>	

<u>8.3.18.</u>	<u>161st Bn.</u>	<u>Absorbed into 4th Cdn. Res. Bn, Bramshott, and S.O.S. 161st Cdn. Inf. Bn.</u>	<u>Witley.</u>	<u>8.3.18.</u>	<u>Pt II No 41.</u>
			<u>Lieut. a/Asst-Adjutant, for O.C. 161st Canadian Infantry Battalion.</u>		

<u>9-3-18</u>	<u>O.C. 4th. Res. Bn,</u>	<u>T.O.S. 4th. Can. Res. Bn.</u>	<u>Bramshott</u>	<u>8-3-18</u>	<u>Part II Order No. 58</u>
---------------	---------------------------	----------------------------------	------------------	---------------	-----------------------------

<u>29-3-18</u>	<u>O.C. 4th Res. Bn.</u>	<u>Having proceeded overseas to the 47th battalion is S.O.S. 4th Can. Res. Battn.</u>	<u>Bramshott</u>	<u>28-3-18</u>	<u>Part 2 order no. 75.</u>
			<u>Lieut. a/Adj. 4th Can. Res. Battalion.</u>		

CERTIFIED CORRECT.
24 APR. 1918
CAN. FORCES, U.K.

<u>29/3</u>	<u>4 C. B. D.</u>	<u>ON STRENGTH 47</u>	<u>BASE DEPOT</u>	<u>29/3</u>	<u>NR. Do 20 d/6. 4/18.</u>
<u>30/3</u>	<u>C.B.D.</u>	<u>Left for</u>	<u>Field</u>	<u>30/3</u>	
	<u>CCRC.</u>		<u>Field</u>		

(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				
27/4/18	C.C.R.B.	Sos 47th Batt. on Transfer to Can. H.A. Corp. (L.H.G. R. Pool)		30/4/18	Can. Co. A 38th of 25/4/18 229 bundle. H.R. 26/10. Pt. II D.O. 40. of 18.5.18
23-4-18	Can. Corp.	T.O.S. 6th R. Pool on Transfer from 47th C.I. Bn.		1/5/18	41, of 22-5-18. R-R 557. A. 3835.
29-4-18	C.C.R.B. 4th Div. Wing.	Placed under stoppages to make good the loss of Govt. Property, by neglect; - Black Knife value 1/3.		29/4/18	B. 2069. O.D. 42, of 25-5-18.
25/5/18.	C.C.R.C.	Transf. to 3rd Bn. C.M.G.	Cops.	24/5/18.	M.R. 866. P.2.O. 45. d/6 1/8.
25/5/18	do.	T.O.S. 3rd Batten. C.M.G.C.	Field	25/5/18.	P.2.O. 61. d/6 1/8.
1-6-18	02 unit	Joined unit for duty	✓	26-5-18	B213.
10-8-18	do	Adm to Hospital (S)	—	7-8-18	B213.
8-8-18	863W	P.M.O. <small>thru trous</small>	863W	7-8-18	436 - 7755.
9-8-18	563W	P.M.O. <small>thru trous</small>	563W	9-8-18	436 - H.9.
11-8-18	563W	P.M.O. <small>thru trous</small>	563W outy	11-8-18	436 - 6935
17-8-18	02 unit	Rejoined unit from Hosp	(2 dies)	14-8-18	B213
21-9-18	do	Adm to Hospital (Sick)	—	15-9-18	B213
19-9-18	1363W	P.M.O. <small>thru trous</small>	1363W outy	14-9-18 18-9-18	436 - K2472
21-9-18	02 unit	Rejoined unit from Hosp	(2 dies)	19-9-18	B213
19-10-18	do	Proc to Cas. Clg. Div. (Sick)	—	11-10-18	B213
14-10-18	23668	Nephritis <small>thru trous</small>	23668 P.T. 15	11-10-18 13-10-18	436 - 4400
5-11-18	H.S. Criswick etc	Inv. (Sick) and posted to Can M.G. Corps Depot, Saffers.		5-11-18	W3083 - 6432 P.2.O. 140/1918.

C.S. Johnson
Capt. Johnson
M.G. Corps Depot
Saffers

ORIGINAL

MEDICAL HISTORY SHEET.

654132

Surname Nash Christian Name Edward Beverly

Examined { on 29 day of Dec 1915
at Wroxeter, Ontario, Canada
Birthplace { City or Town Soville, Ont.
County Huron

Approved by J. D. Shaw
Rank Major M.O.

Apparent age 28
Trade or occupation General farming
Height 5 Feet 11 1/2 Inches.
Weight 169 Lbs.
Chest measurement { Minimum 34 1/2 inches.
Maximum expansion 2 1/2 inches.
Physical development good
Small-Pox Marks none

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT,
		11 NOV 1918 M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Vaccination Marks { Arm Right Left.
Number 0 0
When Vaccinated last 1900
(a) Marks indicating congenital peculiarities or previous disease none

Date	Result	VACCINATIONS.
<u>July 21</u>	<u>S.P.</u>	<u>J. D. Shaw</u> M.O.
		M.O.
		M.O.

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

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>April 19</u>	<u>S.P.</u>	<u>J. D. Shaw</u> M.O.
<u>Oct 19</u>	<u>MR</u>	<u>J. D. Shaw</u> M.O.
<u>Oct 25</u>	<u>MR</u>	<u>J. D. Shaw</u> M.O.
<u>Nov 1</u>	<u>MR</u>	<u>J. D. Shaw</u> M.O.

Enlisted on 29 day of Dec 1915 at Wroxeter, Ontario, Canada

	CORPS.	REG'T NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>161st Batt'n</u>	<u>654132</u>		<u>Dec. 29, 1915</u>
Transferred to.....	<u>4th CAN. RES. BATTALION.</u>			
	<u>47th Bn</u>			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>3rd Bn D. Camp</u>	<u>31-1-19</u>	<u>Subacute A + M</u>	<u>400 fibric Dowling</u>
<u>Seaford</u>	<u>27-2-19</u>	<u>Debilis</u>	<u>13 1/2 Grommet</u> <u>ant</u>

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

CANADIAN

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 654132 (Rank) Private

Name (in full) Edward Beverly Nash enlisted in
the 161st Battalion

CANADIAN EXPEDITIONARY FORCE at Wroster, Ont. on the 29th
day of December 19 15

HE served in France with the 47th Battalion

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 32 yrs.

Height 5 ft. 11 1/2 ins.

Complexion Fair

Eyes Dark

Hair Dark

Marks or Scars Scar on right cheek.

Signature of Soldier

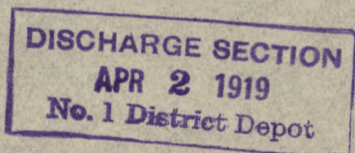
R. C. MacLennan

Issuing Officer

Cap. J.

Rank

Date of Discharge



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.

CANADIAN EXPEDITIONARY FORCE DISCHARGE CERTIFICATE

THIS IS TO CERTIFY (that No. 100000) (Rank) Private

Name (in full) John J. ... enlisted in the 1st ... CANADIAN EXPEDITIONARY FORCE at ... on the ... day of ... 19...

He served in ...

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:

<p>Age <u>...</u></p> <p>Height <u>...</u></p> <p>Complexion <u>...</u></p> <p>Build <u>...</u></p> <p>Signature of Soldier <u>...</u></p> <p>Issuing Office <u>...</u></p> <p>Rank <u>...</u></p> <p>Date <u>...</u> 19<u>...</u></p>	<p>Build <u>...</u></p> <p>Complexion <u>...</u></p> <p>Height <u>...</u></p> <p>Age <u>...</u></p> <p>Signature of Soldier <u>...</u></p> <p>Date of Discharge <u>...</u></p> <div style="border: 2px solid black; padding: 5px; text-align: center; margin-top: 10px;"> <p>DISCHARGE SECTION APR 2 1918 No. 1 Discharge Section</p> </div>
--	--

NOTE:—As no duplicate of this Certificate will be issued, any person finding same is requested to forward it in an unopened envelope to the Secretary, Military Council, Ottawa, Canada.

DUPLICATE

To be made out in duplicate.

H.Q. 54-21-23-53

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

INSTRUCTIONS.

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

(1) Name of Overseas Unit which Soldier joins..... **161st. Os. Bn. C.E.F.**

(2) Regimental Number..... **654132.**

(3) Full Name of Soldier..... **Nash, Edward Beverly.**

(4) Place of Birth..... **Gorrie Ont. Howick Tp. Canada.**

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

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

(b) Present Postal Address.....

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

(8) Have you any children?.....

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

Also their names and ages.....

(9) Is your Father alive? *yes*
If so, state name and address *Mr Thomas Nash, Gonne Ont*

(10) Is your Mother alive? *yes*
If so, state name and address *Mrs Ida Nash
Gonne Ont*

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

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

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

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

(15) Are you insured? *No*
If so, in what Company?.....
Have you made arrangements for payment of your Insurance premium.....
If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.

A. P. Condit
.....
Officer Commanding.

Date *June 16 1916*

MILITIA AND DEFENCE
 ASSIGNED PAY
 OVERSEAS CONTINGENTS

To Whom *Mrs Thos Nash*By Whom Assigned *Nash Beverly*Address *Gorrie*Regtl. No. *65-4132.**Out.*Rank *Pvt.*Corps *161 Bn.*Rate *15-*

NOV 1 1916

PAYMENTS

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



6

14.5
2

14.5
2

2

2

•



MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

M. F. W. 12a.
 50m.—7-16
 1772—39—819.

Sheet No. 2. Mrs. Thos. Nash
 (Assignee)

PAYMENTS.

Name of Soldier Nash. Beverly

65-4132 Plt.

16 N. Bn.

I. L. Job 5470—Req. 6888.

Month.	Year.	Cheque No.	Amt.	Remarks.
				<u>15.</u>
				NOV 1 1916
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.		<u>C 31806</u>	<u>15</u>	
Dec.		<u>X 34579</u>	<u>15</u>	
Jan.	1917	<u>B 40467</u>	<u>15</u>	
Feb.		<u>B 46169</u>	<u>15</u>	
March		<u>S 52652</u>	<u>15</u>	<u>15. E.</u>
April		<u>O 3833</u>	<u>15</u>	<u>15. CA</u>
May		<u>O 10249</u>	<u>15</u>	<u>15 B0</u>
June		<u>N 17529</u>	<u>15</u>	<u>s</u>
July		<u>O 24478</u>	<u>15</u>	<u>B.</u>
Aug.		<u>D 31084</u>	<u>15</u>	<u>15</u>
Sept.		<u>E 38302</u>	<u>15</u>	<u>14</u>
Oct.		<u>T 44629</u>	<u>15</u>	<u>6</u>
Nov.		<u>Q 50378</u>	<u>15</u>	
Dec.		<u>R 60214</u>	<u>15</u>	<u>210.00</u>
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier _____

PAYMENTS.

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

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters)

NASH. S. B.

REGIMENT C. M. G. D.

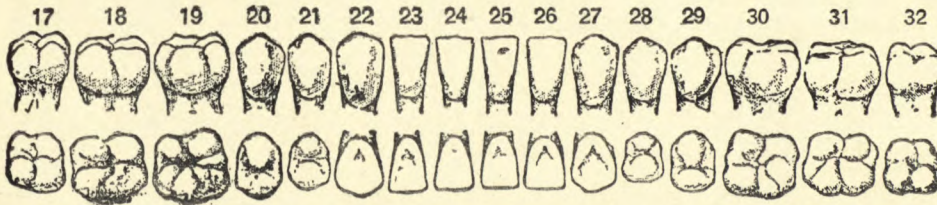
RANK PTE

No. 654132

Date of Examination in England

11 FEB 1919

Date of Examination in France



PRESENT DENTAL REQUIREMENTS

1. FILLINGS 30

2. EXTRACTIONS 31

3. CROWNS

4. DENTURES

(a) Full Upper

(b) Part Upper

(c) Full Lower

(d) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT?

NO

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

(c) In France

Signature of Dental Officer

W. B. Beaton Capt

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.

C. A. D. C., M. D. No. 1

1870
1871
1872

- 1. [illegible]
- 2. [illegible]
- 3. [illegible]
- 4. [illegible]
- 5. [illegible]
- 6. [illegible]
- 7. [illegible]
- 8. [illegible]
- 9. [illegible]
- 10. [illegible]

[Faint, illegible text]

[Faint, illegible text]

28 DEC 1918

Forms
I. 1237
12

Army Form I. 1237.

MEDICAL CASE SHEET.*

meth

No. in
Admission
and
Discharge
Book.

Regimental No.
654133.

Rank.
Pte

Surname.
Nash

Christian Name.
E. B.

OS 164 95
Year
1918

Unit.

3rd C.M.S. Coy

Age.

30

Service.

3 1/2

St. 1
Station Hospital,
and Date. *Bear Wood.*
Can: Com.

Disease
Nephritis

27/12/18.

*Some pain and tenderness of
back - Urinalysis indicates.*

Sheehan Capt

28 DEC 1918

Urinalysis

6 JAN 1919

Massage back Urinalysis.

13 JAN 1919

Fit D1.

17/1/19

Disb. Base

Wanamers Captain,
Med. Off., Canadian Convalescent Hospital,
Bear Wood, Wokingham, Berks.



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

Station
and Date.

11-1-1900

Ko

* Strike out whichever inapplicable

ASSIGNED PAY. ENGLAND OR CANADA. SEPARATION ALLOWANCE. ENGLAND OR CANADA.

NAME: **NASH Edward B.**

EFFECTIVE DATE: **1-11-16.**

EFFECTIVE DATE: -

NUMBER: **654132**

AMOUNT: **15⁰⁰.**

AMOUNT: -

PARTICULARS OF RANK OR APPOINTMENT

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

AUTHORITY DATE EFFECTIVE RANK OR APPOINTMENT

Miss Mrs Nash. (Mother)
Gottie M.
stopped 1/3/19

Plk.

UNIT AND TRANSFERS

ORIGINAL UNIT: **161st Bn.**

DATE ACCOUNT FIRST OPENED: **1-11-16**

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T S F D	UNIT TRANSFERRED TO
D	25 29-3-18	25-4-18	47th Bn.
	1/6/18	19/6/18	W&K Pool

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
17/1/19	9m charges		24 ✓				
7/2/19	7422	Canada	194 ✓				
			1971			L.P.S. Bal Cr. 55.61	22 ✓

DAILY RATES OF PAY AND ALLOWANCES

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

PARTICULARS OF RENDERING NON-EFFECTIVE **Transferred to 161st Bn. 6/28/18 2/19/19 M.D. 1 feather to Seaforth**

MONTH 1918	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
Jan	Bal Forward.								137		
Apr	Pte Pro.	33 00		" John 205 26/3/18	46						
				AR 65 7/4/18 4th Wng CCR	446						
				AR 127 16/4/18 4th Wng CCR	357						
				AP Canada				15 00	1088		
May	Pte Pro	25 00		"	849			15 00			
		34 10		"				15			
June		32 10		Quar 228 20/5/18 bulg bld	357				2641		
		33		Can A Pay	357			15			
				AR 903 4/6/18 3rd Inf Bn	446						
				" 145 4/15/18 6th Inf Bn	446						
				" 1077 17/6/18 3rd Inf Bn	357				3192		
		33			1249			15	1672		
July	P.P.	34 10		Can				15			
				" 1380 8-7-18	446						
				" 1418 13-7-18	357						
		34 10			803			15	4299		
Aug	PP.	34 10		Can				15			
				AR 138 6/9/18	4	357					
				1820 23/8/18	4	357					
		34 10			714			15	5495		
Sep	PP.	33		Can				15	7295		
				AR 2085 24/9/18	7	714			6581		
		33			714			15	6581		
Oct		34 10		Can				15			
				" 216 3rd Bn 5/10	373				8118		
		34 10			373			15			
				Forward							

M.M.D.1.

WAR SERVICE BADGE
CLASS "A" No.

84063
EB
10.

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

1. No. 654132

2. Rank. Private

3. Name. NASH; Edward Beverly

4. Unit. 161st Batt. Reserve C.M.G. W.

5. Date of Discharge 47 lat Place 161

6. Reason for Discharge Demob Category B.
 Category Result of Kin. Father
 Occupational Group
 Occupation. Group. -T-

7. Authority.

8. Proposed Residence after Discharge. Home Out.
 Casualty yes.
 Decorations Service in France
 Service in France Months

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.? E B Nash
 Signature of Soldier.

10. CONFIRMATION.
 The discharge of the above named man is hereby confirmed.
 TOS No Dist. Depot
 Place. Displ. Stn. K. 23, 3, 19
 Date. SOS dispersed
 2, 4, 19 D.O. No 93
 Signature
 FOR O.C. DISP STA K (O. C. Discharging Unit.)

Ked
26. 11.4.

SHORT FORM
PROCEEDINGS ON DISCHARGE

(Continuation)

1. Name	2. Rank	3. Grade	4. Title	5. Date of Discharge	6. Reason for Discharge	7. Authority	8. Proposed Position after Discharge
W. F. Hall	Private				Discharge		
<p>9. CERTIFICATE TO BE SIGNED BY SOLDIER</p> <p>I hereby acknowledge that at the time and place and date I received my discharge the following conditions were observed:</p> <p>Discharge</p>							
<p>10. The discharge of the above named man is hereby confirmed.</p> <p>Date: 24.9.1903</p> <p>Place: 808 dispersed</p> <p>FOR O.C. DISCHARGE</p>							

LIST OF DISCHARGE DOCUMENTS

.....	Company Command Sheet
.....	Regimental Command Sheet
.....	Medical Report
.....	Dental Health Sheet
.....	Formwork of Dental Board
.....	Medical History Sheet
.....	Certificate that military documents are irreplaceable
.....	Final Pay Certificate
.....	Casualty Form
.....	Final Discharge Sheet
.....	Statement of Service
.....	Statement from Transport

1918
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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

1. 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).
13. Pay Book (A.B. 64).
14. War Service Gratuity (Form M.F.W. 2595).
15. Sundry Documents.

Group..... *A*

Checked by No. *19*

Date..... *23-7-19*

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 Seaford DATE 27/2/19

1. 1 (a) Unit C. M. G. D. (b) Regimental No. 654132 (c) Rank Pte.
 (d) Surname Nash (e) Christian name EDYARD BEVERLY
 (f) Home address YORRIE, ONT.
 (g) Next of Kin THOMAS NASH (h) Relationship FATHER
 (i) Address of Next of Kin YORRIE ONT.

2. Age last birthday 31 Date of birth 18/4/87

3. Enlistment, or Appointment (if an Officer) (a) Place WROXETER, ONT. (b) Date 29/12/15

4. Personal description:
 (a) Height 5 ft. 11 1/2 ins. (b) Weight 170 (Ed) (c) Complexion medium
(stripped)
 (d) Colour of hair m. Brown (e) Colour of eyes Blu. (f) Identification marks, Scars, etc. Scar on rt cheek. Small mole on nose.

5. Former trade or occupation Farming

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
	<u>3</u>	<u>61</u>

	PERIODS	
	From	To
Canada	<u>29. 12. 15.</u>	<u>1. 11. 16.</u>
England	<u>{ 11. 11. 16. 29. 3. 18. }</u> <u>{ 3. 11. 18. 27. 2. 19. }</u>	<u>{ 29. 3. 18. }</u> <u>{ 5. 11. 18. }</u>
France or other theatres of War		

7. Original disease, or injury NEPHRITIS.

(a) Date of origin 10. 10. 18. (b) Place of origin FRANCE.
 (c) Cause General service conditions

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.)

Impaired function of kidneys, rendering him unfit for Cat. A.

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.)

Exam shows slight puffiness under the eyes. There is no tenderness on pressure over the area of kidneys. No oedema of the hands legs or feet. Heart & lungs normal. Pulse 84. Blood Pressure ~~108/80~~ S. 150. D. 108. P.P. 42. Other systems are normal. Complains of weakness in the back, mostly in the small of back. Has headaches lasting about 12 hours. These come on in spells. No frequency or urgency. No pyuria or haematuria. Has had no oedema since Nov. 5th

(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..... Genito-Urinary System.....+++
(If pulse rate is abnormal, B. P. will be taken.) (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

Special Urinalysis	13.2.19.	21.2.19.
Col.	amb.	amb.
React.	acid.	acid.
Sugar.	neg.	neg.
Microscopic	slig.	slig.
S.G.	1028.	1018.
albumin.	Positive +	Trace.

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

Has been 7 1/4 months.

On 13.10.18. began to have shortness of breath accompanied with chilly feeling. About this time his hands, face & legs swelled. Was sent to hospital by Battin M.D. Invalided to England. Bath War Hospital. 7.11.18. with Nephritis. Discharged from Beawood 17.1.19. & attached to M.G. Depot.

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).)

P.U.O. 8.5.18 17.2.18.

D.O. 14.9.18 18.9.18.

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

Scar on rt. cheek. small mole on nose.

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

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

N.A.

12. Was the disability caused, or aggravated; (a) by intemperance, or improper conduct; or (b) by unreasonable refusal to accept treatment? 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? NOT KNOWN.

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

Hospital treatment for nephritis.

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit? no.
(If the answer is "yes" state nature of treatment required and probable duration)

Recommend diet indicated by the disease.

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

17. Recommendations

J. Sheeman, Lieut.
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, E. Beverly Nash, 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 Nothing

E. Beverly Nash, Lt.
Signature of invalid examined.

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

N

125

Nov 1-16

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

<i>15</i>			
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PARTICULARS OF SEPARATION ALLOWANCE

No. *65-4132*
 Rank *Plt* Promoted Reverted Discharge
 (S.P.C. shows *E.B. Nash*) Soldier's Name *Beverly Nash*
 Battalion *161 Bn*
 Beneficiary
 Relationship
 Address

PARTICULARS OF ASSIGNMENT

Name *Mrs Thos Nash*
 Address *Conic, Ont*
 Change of Address
 1
 2
 3
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
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<i>1917</i>					
<i>Dec 31</i>			<i>210 00</i>	<i>210 00</i>	
<i>Jan 18</i>	<i>H 63572</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>Feb</i>	<i>B 68587</i>		<i>15</i>	<i>15</i>	
<i>Mar</i>	<i>M 44937</i>		<i>15</i>	<i>15</i>	
<i>Apr</i>	<i>O 9468</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>May</i>	<i>R 20281</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>June</i>	<i>N 24454</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>July</i>	<i>H 33906</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>Aug</i>	<i>R 35720</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>Sept</i>	<i>H 45662</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>Oct</i>	<i>H 46500</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>Nov</i>	<i>H 60095</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>Dec</i>	<i>X 69579</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>Jan</i>	<i>H 75168</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>Feb</i>	<i>H 79278</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>Mar</i>	<i>M 88376</i>		<i>15</i>	<i>15</i>	<i>✓</i>

13413 - E-10

M. F. W. 128
 4000-6-17-1772-89-141
 L. L. 2320-M. & D. 1933.

435
 A/c Closed *31-3-19*
 Ret'd per. *Emp. of Britain*
 Date... *31/3/19*... M.F.W. 18 *MS.1*
 Closed... *J. Halpin*
M.R.O "Destroy
81785

APR 7 - 19. C

