#3

DUPLICATE

124th Batt.

ATTESTATION PAPER.

No. 769929

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?	Simmons
1a. What are your Christian names?	James Henry
1b. What is your present address?	108 Oak St. Toronto, Ont.
2. In what Town, Township or Parish, and in what Country were you born?	Toronto, Ont.
3. What is the name of your next-of kin?	Annie Simmons
4. What is the address of your next-of-kin?	108 Oak St. Toronto, Ont.
4a. What is the relationship of your next-of-kin?	Mother
5. What is the date of your birth?	29th September, 1897.
6. What is your Trade or Calling?	Furrier
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.	No
11. Do you understand the nature and terms of your engagement?	Yes
12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE?	Yes

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, James Henry Simmons, 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.

James Henry Simmons (Signature of Recruit)

Date 3rd January 1916 191 . A Brunlone (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, James Henry Simmons, 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.

James Henry Simmons (Signature of Recruit)

Date 3rd January 1916 191 . A Brunlone (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 3rd day of January 1916 191 .

W. A. Mays (Signature of Justice)

M. F. W. 23.
200 M.—11-15.
H. Q. 1772-39-841.

Description of James Henry Simmons on Enlistment.

Apparent Age 18 years 3 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 7¼ ins.

Chest measurement.
- Girth when fully expanded 34 ins.
- Range of expansion 2½ ins.

Complexion Fair

Eyes Brown

Hair Fair

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

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

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

CERTIFICATE OF MEDICAL EXAMINATION.

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

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

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

Date 3rd January 1916 191 .

Place Toronto

H. Hemmings Capt.
Toronto Recruiting 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.

James Henry Simmons 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.

H. Hashmark Lieut. (Signature of Officer)

Date JAN 13 1916 191 .

O.C. 124th OVERSEAS BN. C.E.F.

SIMMONS, JAMES HENRY 769929 W.B.R.D. 20039

FORM 124 BN

MED. UN.

C.E.F. REGIMENTAL DOCUMENTS
WAR SERVICE RECORDS D.V.A.

PR

Number 769929 Rank Pte

Surname SIMMONS

Christian Name James Henry

Units 18th Bn Canada Theatre of War France

Date of Service 10/10/16

Remarks

Latest Address 37 Currie St.
~~18 Bath St~~
Toronto Ont.

Roll No. B
Page 11337

200m.-2-21.M.

Next of kin

Address on leave

Address on discharge

Transportation issued Yes / No Date

Character on discharge

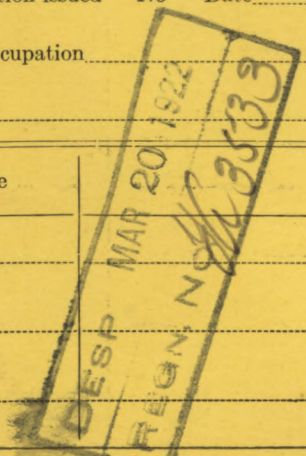
Previous occupation

Date and place of enlistment

Diagnosis

Date of Medical Boards

Date	Remarks



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

SURNAME. Simmons.

CHRISTIAN NAMES James Henry

REGL. No. 769929 RANK Pte.

UNIT 124th Batt.

FORMER CORPS Nil.

CARD NO.

SOS. Mil. 31-1-18 2

NEXT OF KIN.

NAMES IN FULL Simmons, Mrs. Annie

RELATIONSHIP TO SOLDIER Mother.

ADDRESS 108 Oak St., Toronto, Ont.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada, Toronto, Ont. DATE Sept. 29th 1897.

PLACE OF ATTESTATION Toronto, Ont. DATE Jan. 3rd, 1916.

O/S. 7-8-16 SOS 39

R/6. 14-11-17.

L. L. 94504. M. & D. 6512.

M. F. W. 22. 250M.—2-16. H. Q. 1772-39-339.

3M7

Sailed From Halifax Per S.S. Canada via Quebec 7-8-16

MARRIED SINGLE Yes. WIDOWER

TRADE OR CALLING Furrier. RELIGION C. of E.

DESCRIPTION.

APPARENT AGE 18 YEARS 3 MONTHS

HEIGHT 5 FEET 7 1/4 INCHES

CHEST MEASUREMENT 34 INCHES EXPANSION 2 1/2 INCHES

COMPLEXION Fair. EYES Brown. HAIR Fair.

DISTINGUISHING MARKS Nil.

MEDICAL EXAMINATION. PLACE Toronto, Ont. DATE Jan. 3rd, 1916.

No. 769929. RANK Pte. NAME Simmons, J. H.

T. O. S. 16-1-16. (D.O. 90/12-1-16) UNIT 124th Battalion. C.E.F.

M. D. 2.

PAID FROM	PAID TO	SIG OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916.	1916.			
Jan. 18.	Jan. 31.	⌐		
	Feb.	⌐		
	Mar.	⌐		
	apr.	⌐		
	May	⌐		
	June.	⌐		
	July.	⌐	a.w.L. 2 days. Forfeits pay.	D.O. 136 of 1-7-16.
	Aug.	W.		

REGT'L No 169929

NAME Simpson, James Henry

H. Q. FILE No. 649-

RANK AND CORPS Pte. 18th Bn Sarm 12/4th Bn

FOLLOWS No.

FOLLOWS

CABLE No.	CABLE Date	NATURE OF CASUALTY
M5739 36-4	18-7-17	Rept. wounded July 9th 1917
M5955 W5m	27-8-17	Gen Conval. Hosp Uxbridge GSW R Arm incomplete extension good use hand, though still weak. GSW R thigh healed Sailed from Liverpool for Canada per S.S. Olympic on Nov 6th 1917 (M.D. no 2)

L. L. Job 90581—M. & D. 6314.

M. F. W. 42—50M—1-16.
H. Q. 172-39 893.

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
a557	Rep from Base	9-7-17	Wounded
a559	4th Can Gen Etaples	10-7-17	Sw lt leg & lt arm
B416	Lady Lytton's 37 Charles	21-7-17	GSw L arm r. r. leg sw
B427	Can Genl. 1st 2nd Kelsey Hillingdon	16-8-17	" " "

FORM R. 149.
7106—250m—7/2/17.

Name SIMMONS James Henry *Rank* Pte. *Reg. No.* 769929

Unit 18th Battaliomn

Next of Kin Canada

Date 1917	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
9-7	Reported from Base		Wounded	A557	M5739	
10-7	2 Lt. E. Staples	Lt. L. Gun L. Leg		N559		
~~29-9~~	~~Pte. Scott G. Hand. slightly~~					
21-7	Lady Lt. Hosp.	G.S.W. ARM.				
	Charles St. Berkley Esq. W.I.	+ R. Leg.		B416.		
16-8.	C.C.H. Mitchinden	do.		B427		
18-9	Discharged.		do.	B416.		246.

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

Reg. No. 769929 Name Simmons, J. H.

Rank Pte. Corps 18th Age 20 Service 6/12 12/12 4/12

Ledger No. Serial No.

HOSPITALS	DATE	DIAGNOSIS
C.M.C.H. Toronto	13-12-17	G.S.W. Lt. Elbow
Disch. #227	18-1-18	

P. T. O.

HOSPITALS	DATE	DIAGNOSIS

M. F. W. 2553.
75M.—9-19.
1772-39-1332.

FORM D.M.S. 1313.
4682 10m 11/1/17

Canadian Convalescent Hospital,
Hillingdon House, Uxbridge.

6 111

ADMITTING CARD.

T 43249.

Regt. No. 769929 A. & D. No.
Rank Pte
Name Simmons J.
Corps 18th Bn D.
Religion C of E. Age 19
M. H. Rec'd M. H. Requested M. H. Ret'd
Disease GSW L. Arm & R. Leg
Admitted 15.8.17
Discharged Invt 18.9.17.
Place in Hospital
Transferred
Results S.W. Rt Thigh healed; no disability.

6 111

P.T.O.

Countess of Lytton's

REMARKS:

19/12 10/12 Toronto Jan 1916

Turkish

Passbook - Yes.

FORM D.M.S. 1300.
8137—50m—28/2/17.

Surname	Christian Name or Names	Reg. No.
Simmons	J. H.	769,929

Rank	Unit	Co.	Troop	Batty.
Pte.	W.D (18th Batt)			

Hospital — Date of Admission

Transferred #7. Gen. Gen. Etaples. Hosp. 10.7.17.
Lady Lytons. Charles St. Berks. Hosp. 31-7-17.
Woodcote Can Coy. Hosp. 16.8.17.
Hosp.

Diagnosis
(1) S.W. Lt. Leg & Lt. Arm. B
Later Diagnosis (if changed)
(2)
(3)

Additional Diagnosis: if more than one state present

DISPOSITION — Date

Dis 18-9-17

REMARKS

C.L. 18.7.17. A5-5-7
20.7.17. a55A R. H. B Wa 9.7.17
— 1.8.17. B416.
21.8.17 B427.
21-9-17 B16(2)

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

EPITOME OF HOSPITAL TREATMENT.

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

CANADIAN CONTINGENT EXPEDITIONARY FORCE

Military Hospitals Commission

TMB.

COMMAND "D" UNIT

M. D. 2

No. 7

LAST PAY CERTIFICATE

This form to be used for all Ranks (Vide Articles 122, 130 and 141, Financial Instructions, 25715c, C.E.F., 1916).

Regimental No. 769229 Rank Pte. Name Simmons, A.

Corps 124 Bn. who was* Discharged

On Jan. 31 191 8, to Med. Unfit

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from Jan. 1 191 8, to Jan. 31 191 8, the inclusive date of transfer or discharge.

Dr.	$	c.	Cr.	$	c.
Bal. Dr. from prev. month			Bal. Cr. from prev. month		
Advances by Cheques No.			Regt'l Pay 31 days at $ 1c	31	00
Advances by Cheques No.			Field Allow. 31 days at $ 10	3	10
Assigned Pay and Sep'n Allce. No 53438	20	00	Separation Allowances* (Monthly)		
			2 days. Subs. @80¢	1	60
Other charges			Other Allowances*		
Payment on transfer or discharge No. 54447	28	70	Other Credits* Clothing	13	00
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)		
Total	48	70	Total	48	70

*Give particulars.

A monthly stoppage of $ 20.00 (†) has (‡) been paid on account of Assigned Pay for the month of January 191 8 and Sep'n Allce. for month of 191 (to) Assignee Mrs. A. Simmons.

(Address) 108 Oak St., Toronto.

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

On Transfer of an Officer

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

REMARKS:—

State (1) date of enlistment .....

(2) if married and if a Separation Allowance Card has been submitted No.

(3) cause of discharge Medically unfit authority A.A.G. Jan. 25/18 D.O.

(4) authority for transfer .....

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

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

Date Jan. 28/18

Place Toronto.

Malcolm J. Cockburn

CAPTAIN.

PAYMASTER M.H.C.C. "D" UNIT, C.E.F. Paymaster.

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

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

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

M. F. W. 44.

100M.—12-17.
H. Q. 1772-3-903.

C.A.D.C. 909
10M-3378-1-8-17.

769929

Pte Simmons J H

DENTAL CERTIFICATE.

The following Certificates will be attached to the Medical History Sheets of all Other Ranks being returned to Canada for disposal.

WORK

Date of Examination.	Present Dental Condition.	In case of loss or decay of teeth. Is the loss due to wounds, injury or disease directly attributed to Active Service?	Has he ever declined Dental Treatment.	Recommendation.
16 12 17	S. fillings required	no	no	S. fillings recommended at Public expense R Jamieson Capt CDC

#3

ORIGINAL.

ORIGINAL

769929

MEDICAL HISTORY SHEET.

Surname Simmons *Christian Name* James Henry

Examined { on 3rd day of January 1916
at Toronto

Birthplace { City or Town Toronto
County Ontario

Apparent age 18 Yrs. 3 mos.

Trade or occupation Furrier

Height 5 Feet 7½ Inches.

Weight 126 Lbs.

Chest measurement { Minimum 31½ inches.
Maximum expansion 34 inches.

Physical development Good

Small-Pox Marks Nil

Vaccination Marks { Arm Right. Left.
Number

When Vaccinated last

(*a*) Marks indicating congenital peculiarities or previous disease

nil

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

nil

Approved by
J. A. Hughes
Capt
Rank M.O.

Toronto Recruiting Depot.

Date	Fit or Unfit	Examined for Re-engagement,
		31 JUL 1917 M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date	Result	Vaccinations.
2/8/16		J. Macpherson Capt M.O.
FA 2.10.17	WRR	M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
1/31/16		J. Macpherson Capt M.O.
2/24/16		M.O.
4/7/16		T.A.B.-8.9.16 M.O.

Enlisted on 3rd *day of* January 1916 *191* *at* Toronto

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	124th Batt'n GOVERNOR GENERAL'S BODY GUARD	769929		
Transferred to..	18th Bn			

CANADIAN

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
C C Shelbridge	11/9/17	Gastric Ulcer Duodenum L. Arm + Rt. Leg.	C III L. Arm, invalided Capt

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.

150M.—8-15.
H. Q. 1772-39-439.

Surname Simmons Christian Name James Henry

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.
COUNTESS OF LYTTON'S HOSPITAL 37, CHARLES ST. BERKELEY SQ., LONDON		21	7	17	15	8	17	S.S.W. L. arm (VIII-1) & L. leg (IX-1)	25	transferred convalescent	
Canadian Convalescent Hospital, Hillingdon House, Uxbridge.		15	8	17	18	9	17	20	35	Wounds in mid ⅓ of L. arm healed. Complete flexion at elbow - limited extension. Weakness of forearm.	

a-3

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.

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(1) Name of Overseas Unit which Soldier joins 124th Battalion C.E.F.

(2) Regimental Number 769 929

(3) Full Name of Soldier James Henry Simmons

(4) Place of Birth Toronto. Ont.

(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 ? No.

If so, give number of boys and girls

Also their names and ages

M. F. W. 67.

300M.—5-16.
1772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive ? Yes

If so, state name and address Mrs. J. H. Simmons 108 Oak St. Toronto.

(10) Is your Mother alive ? Yes

If so, state name and address Mrs. Anne Simmons

108 Oak St. Toronto, Ont.

(11) If your Mother is a widow No.

Are you her sole support, or not ? Yes

(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.

Father too old to work.

$40 per month.

(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 ? Yes

If so, in what Company ? London Life Ass.

Have you made arrangements for payment of your Insurance premium Yes

If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.

[signature]

Officer Commanding.

Date July 31/1914

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

M. F. W. 54.
15(M. 10-15.
H.Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps 124th OVERSEAS BATTALION C.E.F.

Regimental No. 769929 Rank Private Name Simmons James Stanley
C. E. F.

Enlisted (a) 3/1/16 Terms of Service (a) 1 Year or during the War Service reckons from (a) 10/1/16

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)

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.
		Embarked Canada.	Halifax	Aug 7/16.	
		Arrived England.	Liverpool	Aug 18/16.	
		Transfered for Overseas Service 1st Bn CEF	Bramshott	10-10-16	Part II Order 205 10-10-16 W W Jones MAJOR ADJUTANT, 124th BATTALION C.E.F.
11-10-16	Can Base Depot	Arr from 124 Can Res Bn England & taken on strength of 18 Can Bn	Can Base Depot	11-10-16	Nom Roll Pt.II Ord 52 d.6-11-16
5-11-16	2 Can Ent Bn	Arrived at 2 Can	Entren. Bn	5-11-16	Nom Roll
24-2-17	18 Bn	Joined Unit	In the Fld	21.2.17	B.213

CERTIFIED CORRECT. 23 OCT 1916 CAN. RECORDS, LONDON.

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

OVER

[P.T.O

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213. Army Form A. 36, or other official documents.
Date	From whom received				
9-7-17	18 Bn	WOUNDED by enemy shell bursting in billet	In the Fld	9.7.17	Letter 9-7-17 DCS.301 d-14.7.17
21-7-17	A.T. Newhaven.	S.W. arm L, leg R. (severe) (Posted to West. Ont. Regtl. Depot, Bramshott)	Adm. A.T. Newhaven	21-7-17	W.3083 (Can. Lect. No. 35d7) Pt. II Order 52, 30/7/17.
		J.W. Hogan major for Lt.-Col., A. A. G. Canadian Section, G. H. Q. 3rd Echelon, B. E. F.			
3-8-17 GJF III	WDRD	Evac (W) Posted from 18th Bn	B'shott	21-7-17	Pt II 127. C.A.M. Myers LIEUT. FOR LT: COL: I/C RECORDS, C.O.M.F.
2-10-17	W.D.R.D.	Rpt to Coy from Sunbury.	B'shott	1-10-17	Do # 178
13-10-17	W.D.R.D.	Shown on Command to the C.D.D. Buxton pending Return to Canada		13-10-17	Do # 188 A. Peterson
18/10/17	TAKEN ON STRENGTH C.D.D, BUXTON Pt. II ORDER No. 244			Commanding	R. Vue Lt Lt. Col. Canadian Discharge Depot.
6-11-17	EMBARKED FOR CANADA FROM LIVERPOOL			Commanding	R. Vue Lt Lt. Col. Canadian Discharge Depot.
6-12-17	D. Unit T. O. S.		Toronto	4-12-17	PT. 2. O. 340

R—122

J.P.

Rank | Name SIMMONS, James Henry | Reg'l No. 769929.

Unit 124th Bn. | If in perm. Corps, What Unit? | Married or Single Single.

Place and Date of Enlistment Toronto. 3rd Jan.1916. | Place of Birth Toronto.Ont.

Name and Address, Next-of-Kin Annie Simmons.

108 Oak St. Toronto. Ont. | Relationship Mother.

Assigned Pay Monthly $ | Payable to | Relationship

Separation Allowance $ | Payable to | Relationship

Discharge, Date and Place | Reason | Character

N/E. R.B. No. 3337
File R.L.
Category Can OR

H. W. & V., Ld.—7165-16.

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 S.S. "Cameronia" 18.8.16				
10.10.16	124BN	S.O.S on Tfr to.18TH.Bn Bshott			10.10.16	A.F.B. 103 CHECKED 20 OCT 1916 D.S.Ct. A.G.O. 205.
6.11.16	18th Bn	T.O.S from 124th Bn	Field		11.10.16	Pt II 52
18-7-17	—"—	Reported from Base wonded	—"—		9-7-17	C.L.a 557
20-7-17	—"—	Adm No.7. Can Gen Hos	Etaples		10-7-17	C.L.a 569. S.W.Lt leg Y Lt arm
1-8-17	—"—	—"— Lady Lytton's Hos. 36 Charles St Berkley Sq. W.1.			21-7-17	C.L.B. 416. G.S.W.L. arm R leg Sev
30-7-17	—"—	Invalided Wonded & Posted to WORD	Field	Ste	21-7-17	Pt II D.O. 52. WORD. DO 1279.3.8/17
21-8-17	—"—	Ex to C.C.H. Hillingdon House.	Uxbridge	..	16-8-17	C.L.B 427
20-9-17	WOR	Dis from above	"	..	18.9.17	—"— 16.
15-10-17	WORD	on Com C.D.D Burton pending Embarkation to Canada	Bshott	..	15-10-17	Pt II 189.

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.
		cease to be attach C.D.D. Bexsdon.			
21-11-17	W.O.R.D.	S.O.S on proc-to Canada for disposal by A.D.S.	Bramshott	6-11-17	P.D.O. 221
		Convalescent Home.	M.D.2. Toronto	14-11-17	N.R. 409

M. F. W. 41
1 0M—7-16
1772-39 889.

Col 35-4

Name Pte. Simmons. J H

Regimental No. 769929

Unit 124 Bn.

Date of enlistment

Place of "

Married (yes or no) No Pay from Sept 1st 1917 while Dale of Discharge PM 25-51-24

Amount of pay assigned monthly $ 20.00 pd for Mod.

To whom payable Mrs. A. 108 Oak St. City

Name and address of next-of-kin

Date and place discharged A.A.G. Jan 25/18

Reason for discharge Med Unfit

Character on discharge D.O 30

Job 5331—M. & D. t880.

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					
Dec 1	31	31	1	31	31	10	3 10	7 20		5-0241			20	1669		Out Dec 4/340
								7 20	4850	5-0240	11 81	Col			4850	In Dec 13/349
																Out Dec 23/361
Jan 1	31	31	1	31	31	10	3 10	1 60		5-3438			20			In Jan 3/5
								13.	48 70	5444	28 70				48 70	
Apr.								110		68210		ned 16/4-8	110 00			Sept. Oct Nov Dec 25 PM 25-51-24

M. F. W 41
1 0M—7-16
1772-39 889.

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

12865/256.

Three months pay and allowances after discharge.

016806-J-2.

Name Simmons, James Henry
Surname Christian Name

Regimental Number 769929 Rank Pte.

Unit 124th Bn.

Original Unit

District where paid M.D. 2.

Date of Discharge 31-1-18.

P. D. P. Filing Number 6-296-2.

Address (in full) 108 Oak St., Toronto, Ont.

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

L. L. 22573—M. & D. 8009.

Total Credits 91 days	FIRST PAYMENT Cheque No. A	Date	Amount 30 days	SECOND PAYMENT Cheque No. B	Date	Amount 30 days	FINAL PAYMENT Cheque No. C	Date	Amount 31 days	Balance Over-payments to be Recovered	Total Amount Paid
100 10	4993	30-1-18	33 00	4844	28-2-18	33 00	4730	30-3-18	34 10		100 10
1032 1st C	12885	25-2-19	70 00								
328a 2nd G.	38852	14/3/19	70 00								
1497 1st	428181	14/3/19	30 00								

M. F. W. 127.
50M—6 17.
1772 39-1140.

Remarks:

Dec'n No 12865/256

W. S. G. File No 166806/16

Award ..... days at $1.00 per day $ 300 00

S. A. ..... months at $ ..... per mo. $ .....

Less P, D. P. Credited $ 100 10

Less further debit balance $ .....

Net due paid as below $ 3990

TO SOLDIER TO DEPENDENT

O	Ag. No	Ch No	Amount	Ag No	Ch No	Amount
1	1037	12885	70 00	2497	42818	30 00
2	378A	38852	70 00	6000.		30 00
3	930B	421168	70 00	24200	476937	30 00
4	829C	457564	34 90	2112	481244	30 00
5					491124	30 00
6						
	T...				Total	

25/2/19
14/3/19
9/4/19
12/5/19

14/3/19

26/6/19

17-6-19

GEN'L AUDITOR
Posting checked by
.....
date 16-10-19

108 Park St
Toronto
Ont

Mrs A. Simmons
Mother
as above

M. F. W. 41
1 0M—7-16
1772-39 889

P. C. No. 3-2705

Pte Name Simmons Jas. Henry

Regimental No. 769929

Unit 124 Bn.

Date of enlistment 3.1.16

Place of " Toronto

Married (yes or no) No -

Amount of pay assigned monthly $ 20. 30 11/17 = 320

To whom payable Mrs A. Simmons 108 Oak St. Toronto Olympic 14 11/17

Name and address ~~of next of kin~~ Home 108 Oak St. Toronto

M. B. 30 11/17 Com Home

Date and place discharged

Reason for discharge

Character on discharge Cate Dr D.O. 649-5-14911

Form 6b 5351—M. & D. 6880.

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.
	29 9/17							3457								E L Rc.
30 9/17	30 11/17	62	100	62 00	62	10	6 20		10277					60 00		C D Due
					Dr Bal				1669					973		AR 13242
														973		19 boat
													4800		11946	Oct to Nov 1917
									11946						11946	L A Recd on 13/12/17 showing a/c ody to 30/11/17 and fd to D Unit

Letter to D.A.A.G. re A.R. Oct Nov 13/12/17

G.R. 12/12/17

E.A.R. 1946 - 30 9/17 = 280

Name.....

M. F. W. 41
1 0M—'-16
1772-39 889.

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					

L. L. Job 4503.—M. & D. 6822.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12.
50m.—6-16.
H. Q. 1772-39-819.

To Whom Mrs. Annie Simmons

Address 108 Oak Street
Toronto.

Rate $30.00 Aug 1st/16

By Whom Assigned Simmons James. H.

Regtl. No. 769929

Rank Pte

Corps 124th Btn C.C.

AUG 1 1916

245

PAYMENTS

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

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12a.
50m.—4-16.
1772—39—819.

Sheet No. 2.

L. L. Job 310.—Req. 6574.

Mrs. Annie Simmons

PAYMENTS.

Name of Soldier Simmons James H.

Pte 769929 124th Btn G Co.

Month.	Year.	Cheque No.	Amt.		Remarks.
			90 00		AUG 1 1916
April	1916				
May					
June					
July					
Aug.		Y15878	20		
Sept.		F 18404	20		
Oct.		G23029	20		
Nov.		H28583	20		
Dec.		T32467	20		
Jan.	1917	U40924	20		
Feb.		V42834	20		
March		H52790	20	20.L	
April		F47755	20	20 Lu	
May		F11791	20		
June		G 18904	20	S	
July		F 25162	20	C	
Aug.		V31858	20		
Sept.		E 39529	20		
Oct.		M 45339	20		
Nov.		N 53187	20	320 J	
Dec.					
Jan.	1918				
Feb.					
March					
April					
May					
June					
July					

320 00 A/c Closed 30-11-17

Ret'd per Olympic

Date 6-11-17 F. X. 30-11-17

Clerk RS

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.				

MARRIED OR SINGLE Single

PLACE OF BIRTH Toronto

NAME AND ADDRESS OF NEXT OF KIN Mrs. Annie Simmons
108 Oak Street. Toronto.

RELATIONSHIP OF NEXT OF KIN Mother

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

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

REG'L NO. 769929 RANK private NAME Simmons. James Henry

IF IN PERMT. CORPS WHAT UNIT | UNIT 124th Bn. 6.E.R. TRANSFERRED TO 18th Bn DATE 10-10-16 AUTHORITY D.C. 205

PERMANENT FORCE ALLOWANCES TRANSFERRED TO L DATE 30/9/17. AUTHORITY S.M.B. Bailey 11/7/17

PLACE OF ATTESTATION Toronto TRANSFERRED TO N.E. DATE ✓ AUTHORITY ✓

DATE OF ATTESTATION 3rd January 1916. TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY $ 20.00 DATE EFFECTIVE 1st August 1916.

PAYABLE TO Mrs Annie Simmons. 108 Oak St. Toronto RELATIONSHIP Mother

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) Stopped EFFECTIVE 1-10-17 REASON Discharge

DISCHARGE DATE AND PLACE Canada 29-9-17. REASON AND AUTHORITY Uxbridge. A.M.O. 1/9/17 Med unfit

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

Entered on N.E. Card

Checked by W. Fullerton

C1

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
1916 Aug 1														1 90	1 90																1 90 ✓				Balance from Canada
" 1-31	31	1	31	·	31	10	3	10							34 10	12	23/8							9 73 ✓				20		29 73	6 27				
Sept 1-30	30	1	30	·	30	10	3	·							33 ·	59	15/9	106	29/9					7 30 ✓	4 87 ✓			20		32 17	7 10				
Oct 1-9	9	1	9	·	9	10		90							9 90 1 8 9 0	155	15/10							2 44 ✓				20		22 44 8 4 8 4		5 44			2/c 18 Bn 10/10/16 D0205
10 31	22		22		22		2 20								24 20															18 76				
Nov	30		30		30		3								33									7464 Knollen 7/10		- 4 36 ✓									
Dec	31		31		31		3 10								34 10									8472 A.D. Thorne 7/11		- 4 36 ✓		20		28 72	23 04				
																								209 2 Infantry 31/10		- 2 62 ✓		80							
																								139 " 16/11		- 2 61 ✓									
																								1033 Jones. C.B.S. 31/10		35									
"	"		"		"		"								" "									238 2 Infantry 8/12		- 2 62 ✓		20		28 17	28 97				
			15 30				15 30																												
Jan	31	1.10	34	10											34 10									360 — 29/1/2 ✓		- 6 11 ✓		20		26 11	36 96				
Feb	28	1.10	30	80											30 80									551 — 30/1		- 2 62 ✓		20		28 24	45 52				
																								475 — 13/1		- 2 62 ✓									
March	31	1.10	34	10											34 10				A12 19/3					625 — 2/2	- 2 62 ✓	- 2 62 ✓									
																			815 1/3					577 — 9/2	- 5 23 ✓	2 62 ✓		20		33 09	43 53				
April	30		33	00											33 00				42 4/4						- 2 62 ✓			20		22 62	53 91				
			300	30										1 90	302 20									19 47	15 31	23 48		180		218 29					

Check [illegible] Robson

S.R. No 49. 6.11.17 6/- Bal £34.57 less £2

769929 Pte. Simmons Sask.

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
			300	20										1 90	302 20								19 47	15 31	33 48		180 -		240 29/48	53 91				
May	31	1.-	31	10											331 10	91	27/6						- 276 ✓				20 -		2261	65 40				
June	30		33	-											33 -	142	11/5						- 268 ✓				20		22 68	75 72				
July	31		34	10											34 10								- 267 ✓				20		20 -	89 82				
Aug	31		34	10											34 10	265	19/6						- 535 ✓			9.73 ✓	20		37 75	86 17				
Sept.	29	1.-	31	90											21 90	200	5/6						- 267 ✓				20		2267	95 40				
			469	80										1 90	469 40								35 45				780		3744 00					

Transf. to C.M.O. 30/9/17.

A3M. FORM REN'D 1/10/17. EFFEC 1/10/17.
DISCHARGED TO Can. DATE 29/9/17.
PAYBOOK VERIFIED DD.
C.E. BAL. 34 21 L.P.C. REN'D 3/10/17
AUTH Lethbridge 3/10/17

Awarded

Checked Graham Fdk

MONTH 1917	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED PAY	SEP. ALLCE. ENG.
Oct. 1	Balce	~~95 40~~							95 40		
				Dr. AR. 3496. Lethbridge Hosp.	2 44						
				" 3232 " "	2 43				90 53		
					H 87						
Nov				a/c 13242 Book 22/10/17	9 73						
				9/11 AR 3911 Lethbridge 2/10/17	48 46						
				" 1745 WORD. 2.10.17	7 87						
				" " 3763 Lethbridge 14/10/17	2 14				24 83		

Bal. transfered to Can. Liability a/c

Balance transferred to N. E. Branch. Hdl

This space to be left blank for the Chelsea Number.

Army Form B. 268.

Proceedings on Discharge.

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

No. 769929 Army Rank Pte

Name Simmons J. H

(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)

Corps W. O. R. D. 124 Bn

Battalion, Battery, Company, Depôt, &c.

(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)

Date of discharge January 31-1918

Place of discharge Ft. Whit Hosp.

1. *Description at the time of discharge.*

Age 20 years months

Height 5 feet 7 1/4 inches

Chest measurement { girth when fully expanded ins. / range of expansion ins.

Complexion Fair

Eyes Brown

Hair Light

Trade Furrier (2)

Intended place of residence (To be given as fully as practicable) Toronto

Descriptive marks.

S. W. left Arm + R. thigh

30-1-1918

(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)

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

Para. 392 Sec 13 K R & O 1914

Being no longer fit for war service

(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)

To be filled in on the soldier quitting the Colours.

3. Military character :— Good

4. Character awarded in accordance with King's Regulations :—

Certified that the above is an accurate copy of the character given by me on Army Form B. 2067* and that Army Form D. 489 was awarded in this case.

Initials of Commanding Officer.

Army Form B. 2088 has been issued to*

* Strike out if not applicable.

D. D. & L., London, E.C.
A4502 Wt. W17176/M291 500,000 2/16 Sch. 39
Forms B. 268 / 40

W. S. I. comp 6/2/19 BB

[OVER.

Sent. Dis 19-2-18 EB

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

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

Nil

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

6. Campaigns, Medals and Decorations

10 mos. France.

Certificate of education ..... _____

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

(Place) "D" Unit MAMC — J Nicholson Lieut for

(Date) Jan 31 1918 — O.C. Commanding "D" Unit Battn. MAMC Regiment.

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

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

(Place) "D" Unit MAMC — J. H Simmons (*Signature of Soldier.*)

(Date) Jan 31 - 1918 — F. J Duffy (*Signature of Witness.*)

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

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

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

_____ (*Signature of Soldier.*)

10. Jan 31-1918 *Statement of service.*

Service towards engagement to _____ (the date to which the record of service is completed) 2 years 25 days.

Further service „ „ _____ (the date of confirmation of discharge) ... ... _____ „ _____ „

Total ... _____ „ _____ „

11. *Confirmation of discharge.* Jan 31-1918

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

(Place) "D" Unit MAMC

(Date) Jan 31-1918

Signature J Nicholson Lieut

Officer in charge of Discharges

"D" Unit M.H.C. Command

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

RESERVATIONS REFERRED TO AT PARA. 8.

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

J. H. Simmons

Nil

LIST OF DISCHARGE DOCUMENTS.

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

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

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

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

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

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

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

(*a*) Discharge certificate (Army Form B. 2079 or Army Form B. 264).
(*b*) Character Certificate (Army Form B. 2067) if entitled.
(*c*) Copy company conduct sheet (Army Form B. 121) when required under King's Regulations.

The duplicate attestation and documents retained therein will be sent to the officer in charge of records, who will extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin and place them in this form.

4. The discharge documents of re-enlisted pensioners, on re-discharge, will be sent to the officer in charge of records, who will extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin, place them inside this form, and forward the whole to the Secretary, Royal Hospital, Chelsea, irrespective of the cause of discharge.

5. The original and duplicate attestations of recruits who are rejected before, or on, final approval will be retained by the approving officer for one year, when they will be destroyed.

6. In all other cases the discharge documents will be sent, directly the discharge is carried out, to the officer in charge of records of the unit concerned.

7. Postage need not be paid, and receipts are not required, in the case of documents sent to Chelsea or to the War Office,

8. When the discharge documents of men not entitled to pension are sent to the officer who will have final charge of them, they are to be accompanied by Army Form B. 279, and that officer will, if they are found to be correct, sign and return Army Form B. 279. Should any document be missing, he must at once apply for it.

9. The officers having final charge of the discharge documents will arrange them according to regimental numbers, and enter the names in the alphabetical index, Army Book No. 129.

Proceedings of Medical Board at Discharge Depot, QUEBEC, Que.

No. 769929 Rank Private Name and Corps of disabled Soldier:— SIMMONS, James Henry - 124th. Battn.

Previous civilian occupation:— Furrier.

Cause of Disability:— Limitation of extension of L.Elbow joint GSW.

MILITARY SERVICE ACT FEB 21 1918 CANADA

Condition, in detail, which prevents the soldier earning a full livelihood:—

France 10 months. Returned with GSW left arm & right thigh. Shrapnel entered left arm inner side of bisceps. Removed by operation above bisceps. Shrapnel wound of right thigh is slight. Present Condition unable to extend left elbow more than 135½ degrees. Reflexion good Shoulder movements good. Grip Good. Requires dental treatment. and breaking down of adhesions about elbow joint. Otherwise fit.

OPINION OF THE BOARD.

Degree of incapacity. (Please state in fractions) 15%

Probable duration of incapacity:— Three months.

Does it render him permanently unfit for Military Service? No.

Would operation, Special treatment, or use of appliances, etc., lessen incapacity?

Convalescent Home.

Signature:— ..... K C Cameron Capt. ..... President.

Station:— Quebec,

Date Nov. 30th. 1917. ..... Members

APPROVED.

Date 30/11/17 ..... W. L. Cameron Major ..... Asst. Director Medical Services.

Date .... Director General Medical Service.

B. P. C. FOLIO FALSE DOCKET 2

27307 - B.P.C. 27307. 649. L. 1491

B. P. C. C. R. FEB 22 1918

PROCEEDINGS OF A MEDICAL BOARD.

Dated at C.C.H. Uxbridge Sept. 11th 1917

No 769929 Rank Pte Name Simmons J H

Local Unit 124th Batt Overseas Unit 18th Batt Age 19

Examination held at C.C.H. Uxbridge

SECTION D FEB 22 1918 CANADA

DISABILITY. Overseas—Local (scratch one out). Partial Loss Function Left Arm & Right Leg.

PRESENT CONDITION.

G.S.W. Left upper arm and Right Thigh 9/7/17. Left Arm: 3" scar inner surface arm - entry of metal, 3" scar anterior surface over biceps - post. operative for removal of metal. Full movement of shoulder. Flexion at elbow good - extension not complete. Says axilliary artery was severed and ligatured. Rt. Leg: Two 3" scars outer surface right thigh entrance and exit of metal. Slight weakness of limb. Movements good.

Not likely to be raised in category within six months.

BOARD RECOMMENDS:—

1. Fit for Duty No
2. Fit for duty after No weeks' physical training.
3. Fit for Temporary Base Duty No weeks.
4. Fit for Permanent Base Duty Yes C iii
5. Discharge No

Signatures:—

J R Mennie Maj CAMC President.

Members { L M Morton Capt CAMC

Shenstone Capt CAMC

APPROVED

Dated Uxbridge Sept. 11th 1917. J R Mennie Maj CAMC

For A.D.M.S.

Address - 108 Oak St., Toronto. M.O.- F.N.Hughes, Capt.
Mother - Annie Simmons, same address

(Medical Officers will please read this Form carefully before using it. See instructions, page 4.)

FORM TO BE USED FOR WARRANT OFFICERS, N.C.O'S, AND MEN

MEDICAL HISTORY OF AN INVALID

STATION C.M.C.H. Toronto DATE Jan. 18k 1918

1. (a) Unit "D" M.H.C.C. (b) Regimental No. 769929 (c) Rank Pte.

(d) Surname SIMMONS (e) Christian name James Henry

2. Age last birthday 20 Date of birth Sept. 29, 1917

3. Enlisted at Toronto on January 3, 1916

4. Personal description :—

(a) Height 5'7½" (b) Weight 145 lbs (stripped) (c) Complexion Fair

(d) Colour of hair light (e) Colour of eyes brown (f) Identification marks two scars on left arm, upper arm, scar on right upper thigh

5. Address after discharge (for the use of the Board of Pension Commissioners.)

108 Oak St., Toronto.

6. Former trade or occupation Furrier

7. (a) Service — Years 2 — Days 16

	Periods	
	From	To
124th Bn.	Jan. 3, 1916	Oct. 9, 1916
18th Bn.	Oct. 9, 1916	July 9, 1917
Casualties	July 9, 1917	Nov. 18, 1917
"D" M. H. C. C.	Nov. 18, 1917	Present date

(b) Has he been Overseas? Yes

8. Present disease or disability (use authorized nomenclature if possible). (1)Impaired function of left Median nerve (2)Weakness Rt leg.

(a) Date of origin (1) July 9,1917 (2)July 9/17 (b) Place of origin (1) Vimy Ridge (2) " " France

(c) Cause* (1) Shrapnel (2) Shrapnel

*(Here include original disease or injury)

9. Present condition. (Important, to be a full description of the present disabling condition or conditions).

There is slight atrophy of the flexor muscles of the left forearm and of the left thenar eminence. Flexion at left elbow is complete and of about ¾ power. Extension at elbow 170 degrees and of normal power. Movements at elbow and in hand normal in range and about ½ normal power. Sensation is normal but hand feels cold. Pronation and supination of the forearm are of normal range and of about ½ normal power. (2) Has two scars on mid. 3rd right thigh 3½". These are not tender, but on walking one mile or over gets pain in leg and tires. Other systems normal.

[After describing all abnormalities, anatomical and functional, contributing to present incapacity (see section 11) state whether such incapacity is directly due to (a) weakness, (b) loss (complete or partial) of an organ or member or of its functions, or (c) to the necessity for rest of the body or of some of its parts.]

The incapacities are due to partial loss of function of the left median nerve and to weakness and pain in the right leg and thigh.

M. F. B. 227.
150M.-6-17.
1772-39-117.

5/133

10. History ;

Here give a description of wounds, scars, deformities, and signs and symptoms of abnormal conditions present and not included in answer 8. This section cannot be completed without stripping the soldier and subjecting him to a thorough physical examination

There are two scars about 3 inches long on left arm, one over the anterior surface and one over the inner surface. The median nerve was evidently injured at the time he was wounded, but has now very largely recovered. Two scars on right thigh mid third.

11. To what extent, state in percentages, is capacity to earn a livelihood in the untrained labour market reduced ? If there is more than one disabling condition, estimate the incapacity due to each, and that due to all combined.

(1) 20%) 30%
(2) 10%)

12. Did the disability arise on or off duty ? On duty (1) & (2)

13. Was a Court of Inquiry held ? No (1) & (2)

14. If the disabling condition had its origin before enlistment, has it been aggravated on service ?

Yes..... No..X..(1) & (2)

(If the answer is in the affirmative, state in percentages, to what extent the soldier is incapacitated by that aggravation.)

15. Was the disability caused or aggravated by negligence, by vice or by misconduct, or by unreasonable refusal to accept treatment ? No (1) & (2)

(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.)

16. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one ? 12 months (1) & (2)

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

Massage (1) and (2)

18. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit ?

(1) and (2) No

19. Can the former trade or occupation be resumed ? Yes

20. Recommendations That he be discharged from Army as physically unfit.

A. R. MacDonald, Captain.
Medical Officer by whom the case is brought forward.

STATEMENT OF THE SOLDIER.

(Sections 8, 9 and 10 are to be read to the soldier.)

I, the undersigned James Henry Simmons have heard the description of my disability read, and am satisfied ~~(or not satisfied)~~ with it. (If dissatisfied, statement should follow.) I complain in addition of

J. H. Simmons
Signature of soldier examined.

OPINION OF THE MEDICAL BOARD

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

We concur, except to state that section 11 should read

(1) 20% (2) 5% - 25%

22. Is the soldier fit for

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

23. It is certified that the soldier

(a) ~~Does require treatment.~~
(b) Does not require treatment.
(c) Should pass under his own control.
(d) ~~Should not pass under his own control.~~

(Strike out condition not applicable).

24. It is recommended that the soldier be discharged. (When not for discharge add special recommendation).

We recommend discharge on account of physical unfitness

C. J. Currie, Major — *President.*
F. N. Hughes, Capt. } *Members.*
J. D. Loudon, Lt. }

STATION C. M. C. H.

DATE Jan. 18, 1918

APPROVED BY

DATE 23/1/18

J. G. Bourne Capt
Assistant Director of Medical Services.

APPROVED BY

DATE

Director-General of Medical Services.

TO BE COMPLETED WHEN TREATMENT IS REFUSED

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

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

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

INSTRUCTIONS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of pages 1 and 2 of this Form. The President of the Board of Medical Officers is responsible for the proper completion of the space, of page 3, reserved for recording the Proceedings of a Board of Medical Officers.
3. In answering the questions, Medical Officers will carefully obtain and record the soldier'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 soldier concerned, from witnesses, or from documents.
4. If a complete answer to any question requires more space than that reserved for it, the answer may be continued on the blank space on this page.
5. The nomenclature of diseases to be followed is that 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 and Sons.

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

Aug 1/16

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

W.			

4L9530 B.

PARTICULARS OF SEPARATION ALLOWANCE

No. 769929

Rank Pte Promoted Reverted Discharge

Soldier's Name James H. Simmons.

Battalion 124th Battn "A" Co.,

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name Mrs. Annie Simmons.

Address 108 Oak st.

Change of Address Toronto.

1

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
1917 Dec 31	—		320	320	A.P. Paid to 30/11/17 Ape Closed 30/11/17 rtd Per Olympic 6/11/17 21 X 30/11/17

M. F. W. 128
400M.—6-17—1772-39-1141
L. L. 22930—M. & D. 7998.

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS

M. F. W. 128
400M.—6-17—1772-39-1141
L. L. 22320—M. & D. 7935.