

Copied for VB

4
A15099
No.
Folio.

ATTESTATION PAPER

CANADIAN OVER-SEAS EXPEDITIONARY FORCE

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS)

1. What is your name?.....
2. In what Town, Township, or Parish, and in what Country were you born?.....
3. What is the name of your next-of-kin?.....
4. What is the address of your next-of-kin?.....
5. What is the date of your birth?.....
6. What is your trade or calling?.....
7. Are you married?.....
8. Are you willing to be vaccinated or re-vaccinated?.....
9. Do you now belong to the Active Militia?.....
10. Have you ever served in any Military Force?.....
If so, state particulars of former Service.
11. Do you understand the nature and terms of your engagement?.....
12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE?.....

John Leo Sutherland
 Sydney Mines C. B.
 Michael Sutherland father
 Sydney Mines C. B.
 16 Sep 1894
 mines
 no
 Yes
 no
 no
 Yes
 Yes

John Leo Sutherland (Signature of Man.)
 Wm R Penny (Signature of Witness.)

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

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

Date July 13 1915 John Leo Sutherland (Signature of Recruit.)
Wm R Penny (Signature of Witness.)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, John Leo Sutherland, 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 July 13 1915 John Leo Sutherland (Signature of Recruit.)
Wm R Penny (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 Sal-Coches this 13 day of July 1915

Edmund Jones # Col (Signature of Justice.)

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

MAJOR (Approving Officer.)
 COM. 40th. BATTN. C. E. F.

MAJOR
 LIEUT. COL.

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DESCRIPTION OF John L. Sutherland ON ENLISTMENT.

Apparent Age 20 years 10 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. 6 1/2 ins.

Chest measurement { Girth when fully expanded..... 33 1/2 ins.
Range of expansion..... 3 ins.

Complexion..... Fresh

Eyes..... Blue

Hair..... Brown

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

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 July 13th 1915

Place Walcourt

R. Douglas
Capt. M.C.
Medical Officer.

*Insert here "fit" or "unfit."

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

CERTIFICATE OF OFFICER COMMANDING UNIT

John Leo Sutherland 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.

Date July 13 1915

[Signature] MAJOR (Signature of Officer.)

COM 40th BATTN C.E.F.

Proceedings of Court of Inquiry or on men reported Missing on Active Service.....

Attestation Papers.....

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet.....

Compulsory Stoppages.....

Casualty Forms.....

Proceedings on discharge.....

Corps History Sheet.....

Date and No. of Deposit Receipt for Purchase Money and Amount.....

Parchment Certificate.....

Medical Report for Invalids.....

Medical History Sheet.....

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet.....

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate.....

M. F. W. 39- / IR 149
A F B 122- /
A G 10434- /
R & O 6048- /

M. F. W. 62.
50m.-9-16.
H. Q. 1772-39-935.
1 case
Payroll

DISC
Name *Sutherland, John Leo*
Regt. No. *415099* Rank. *Pte.*
Corps. *6th Bn. C. S. R.*
Med cert 7

R. O. No.....
H. Q. No.....

INDEXED
PUBLIC ARCHIVE
M
INDEXED
PUBLIC ARCHIVE

Index Card.....
Quality Card.....
Name Receive Card.....
Part II Order Card.....
Change of Address Card.....
Honorary Award Card.....

49913

483161

1200
1/4/20

R 114

28-12
16-12
3-13
1

HE 13

~~HE 13~~

Plc-~~B~~

Number 415-099 Rank

Surname SUTHERLAND

Christian Name John Leo

Units 25th Am Cav Inf Theatre of War France

Date of Service 20-1-16

Remarks

Latest Address Sydney Mines. N.S.

"B" Roll No.

Page 13415

200m.-2-21.M.

DESP. JUN 1 1922

REGN. NO. *18578*

No 415099 RANK

Plt.

NAME

Sutherland John L.

T. O. S. 12-5-15

UNIT

40th Battalion C. E. F.

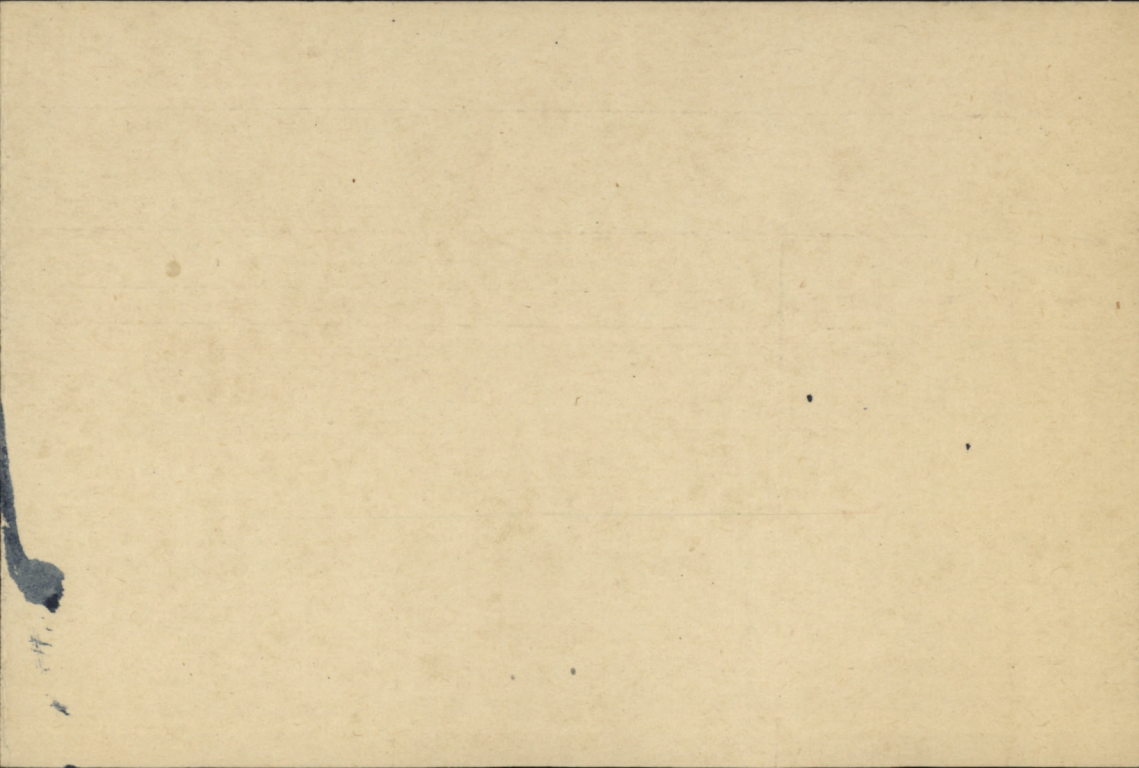
(2074 of 10-6-15)



M. D. 60 Val

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915	1915			
May 12	May 31	✓		
June		✓		
July		✓		
Aug.		✓		
Sep.		✓		

 UNIT SAILED
 OCT 18 1915



SURNAME.

Sutherland

CARD NO.

V

CHRISTIAN NAMES

John Leo

REGL. No.

415099

RANK

Pte

UNIT

40th (2nd R. W.)

Bn.

FORMER CORPS

Nil

*S.O.S. Dis. 29-6-18. 6
Pt. II FOLL. 6291-7-18
(Par. 4.) 6th B. 269 R.*

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Sutherland, Michael

RELATIONSHIP TO SOLDIER

Father

ADDRESS

Sydney Mines, C. B. N. S.

COUNTRY OF BIRTH

Canada, Sydney Mines, C. B. N. S.

DATE

PLACE OF ATTESTATION

Valcartier, P. Q.

DATE

July 13th 1918

Sailed from Montreal

S.S. "Missanabie"

8-10-15 per 226

A/C 21-3-18 4 1/2 T

MARRIED

SINGLE

yes

WIDOWER

TRADE OR CALLING

RELIGION

DESCRIPTION.

APPARENT AGE

YEARS

MONTHS

HEIGHT

FEET

INCHES

CHEST MEASUREMENT

INCHES

EXPANSION

INCHES

COMPLEXION

EYES

HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE

DATE

Name *SUTHERLAND John Leo* Rank *Private* Reg. No. *415099*
 Unit *25th Battalion*
 Next of Kin *Canada*

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1916						
19-9 13-11	Queen Mary M.H. Whalley	Lancs	GSW Foot	B168	01181	22-9
	CC H Woodcote Park	Epsom	do	B216		
1917						
5-1-	Discharged		do	B261		

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

II- I

Reg. No. 415099	Rank. Pvt	Surname SUTHERLAND	Christian Names (1) JOHN (2) LEO (3)		Category. E III	Dentally Unfit.
Place of Enlistment: Kilcartney	Date of 13/7/15	Taken on from 1988	Religion RC	Inoculations 4	21/7/17	Company
Province: Que	Age on 20.	Date 19/1/17		Vaccination 23/7/17		
On Command	Hospital		Permanent Cadre	Employed as		
			Date taken on			
Date Proceeding	Date Admitted					
Record of Overseas Service: POS 25th Bin 20/1/16 to Eng 18/9/16			Profession or Trade (Civil) Miner			
Reason for Return: Wounded			Transferred or Posted to CASE. E.D. Date 22/2/18			
Married or Single Single	LEAVE.					
Address of Next of Kin Michael Sutherland Cydny Mines C.B.	No of Pass Issued	FROM	To	Free Transportation		
	None at CASE Leafed					
Country						

NAME *Sutherland John. Leo.*

REG'TL NO *415-099*

RANK AND CORPS *Pte 25th Bn form 40th Bn 2nd PD.*

H. Q. FILE NO. 649-

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VD

FOLLOWS

No.

FOLLOWS

CABLE

No.

DATE

NATURE OF CASUALTY

01181

22-9-16

*C. Adm Queen Mary Military Hosp.
Whalley Lancashire Sept 19th
1916. G.S. W. Foot. ✓*

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LIST No

HOSPITAL

DATE OF
ADMISSION

REMARKS

B 168. Queen Mary Mil Whalley 19-9-16 G. S. 10-foot
Lanchester

B 216 Mil. Com. Can. Woodcote 13-11-16 S. S. W. foot
Park Epsom

B 261 Can Conwl, Woodcote Plk Epsom 5-1-17 " " " " (Disch.)

Surname

Christian Name or Names

Reg. No.

Sutherland

J. L.

415099



Rank

Unit

Co.

Troop

Batty.

Pte

25th Battrn

Hospital

Date of Admission

Queen Mary Mil. Hosp. Whalley Lancashire. 19. 9. 16

Transferred

Can Con Epsom.

Hosp. *13 11 16*

Hosp.

Hosp.

Hosp.

Diagnosis

(1)

gsw. foot.

Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

DISPOSITION

Date

Disch 5-1-17

CL 27-9-16 # B168

REMARKS

- 17-11-16 B 216

- 12-1-17 B 261

A.M.D. 2 DEPT.

Dep. of D.G.M.S. O.M.F.C. London.

16

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.


5.

6.

7.

DEPARTMENT OF VETERANS AFFAIRS

Ottawa Ont

To  Copy for H.O. FILE

Date Nov 26/62

Attention of

NOV 27 1962

NAME	SUTHERLAND, John L.	SERVICE	415099 GEF	C.P.C. No.	43127	NAVY
		NUMBER		W.V.A. No.	228475	ARMY <input checked="" type="checkbox"/>
						R.C.A.F.

The DEPARTMENT has received information from

S.T.M.O. TEL MEMO. Camp Hill Hospital Halifax, N.S. Nov 23/62

(State authority and source of information of death)

regarding the death of the above mentioned veteran.

Particulars are as follows:

Date of Death Nov 22/62
 Cause of Death _____
 Place of Death Camp Hill Hospital Halifax, N.S.

Name and Address of next of kin (if known) _____

Copies to: W.S.R.
 V. I.
~~NAVY~~
~~DOC~~
 H.O.

} Destroy form if advice of death already received.

for *my wyell*
 Chief, Central Registry

NO
DOX
DOX
DOX

Department of Defense

Office of the Secretary

Department of Defense

Department of Defense
Office of the Secretary
Date of Birth

Department of Defense

Department of Defense

Department of Defense

Department of Defense

Department of Defense

NAME

DATE OF BIRTH

NO

DOX

DOX

Department of Defense

Department of Defense

Department of Defense

Rank

Name

SUTHERLAND, Eohn Leo.

Reg'l No.

415099

P-56

Unit

10th Bn. to 17th Bn.

If in perm. Corps,
What Unit?

Married or Single

Single

Place and Date of Enlistment

Valcartier, July 13th 1915.

Place of Birth Sydney Mines, C.B.

Name and Address, Next-of-Kin

Michael Sutherland, Sydney Mines, C.B.

Relationship

Father

Assigned Pay Monthly \$

20⁰⁰
effect. 1/2/16

Payable to

M^{rs} M. Sutherland, Sydney Mines N.S.

Relationship

Separation Allowance \$

Payable to

Relationship

Discharge, Date and Place

Reason

Character

Date		PAY			Field Allowance			Other Credits		Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc			
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date										
1915	Nov 1	Nov 30	30	1	30	30	10	3	10	00	43	519	9	73		9	73	33	27	on file	
	Dec 1	Dec 31	31		31		3	10		34	10		53	53		53	53	13	84	#	
	Jan 16	Jan 16	31		31		2	10		24	10		19	47		19	47	28	47	20-30	
	Feb 1	Feb 29	29		29		2	90		31	90		6	97	20	26	97	33	40		
	Mar 1	Mar 31	31	1	31	31	10	3	10	34	10		5	73	20	35	75	58	41	92	2. Fry stopped pay B.O. 13. 5/13/16
			152		152		15	20	10	147	20		94	93	40	35	135	28	41	92	

BALANCE TRANSFERRED TO NEW LEDGER

Can. Assigned Pay a/c.
Audited & found OK.
- R Beach
Can. A.P. Audit.
7-5-19

a

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

M. F. W. 12a.
 60m.-12-15.
 1772-39-819.

Sheet No. 2. *Mrs. M. Sutherland,*

PAYMENTS.

Name of Soldier *Sutherland, J. L.*
 #415099

L. L. Job 89002.-Req. 6213.

Month.	Year.	Cheque No.	Amt.	Remarks.
				<i>20⁰⁰</i>
April	1916	<i>Q 2417</i>	20	
May		<i>Q 4865</i>	20	
June		<i>J 5655</i>	20	
July		<i>30 10657</i>	20	
Aug.		<i>H 14582</i>	20	
Sept.		<i>W 19805</i>	20	
Oct.		<i>W 25159</i>	20	
Nov.		<i>C 29253</i>	20	
Dec.		<i>S 33164</i>	20	
Jan.	1917	<i>U 41338</i>	20	
Feb.		<i>V 43244</i>	20	
March		<i>J 52318</i>	20	
April		<i>20 10061 25385</i>	20	<i>20 R 5385 Case -</i>
May		<i>W 11787</i>	20	
June		<i>C 18832</i>	20	<i>B.</i>
July		<i>K 25562</i>	20	<i>C</i>
Aug.		<i>Z 34751</i>	20	
Sept.		<i>L 40316</i>	20	
Oct.		<i>L 45265</i>	20	
Nov.		<i>V 51577</i>	20	
Dec.		<i>V 59852</i>	20	
Jan.	1918			<i>46.0</i>
Feb.				
March				
April				
May				
June				
July				

2000

2nd aft 40 Bn

*Canadian assigned pay for
 audited and found O.K.
 copy to
 Comd. A.P. Audit
 7-5-19.*

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

PAYMENTS.

Name of Soldier _____

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.				

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

To Whom *Mrs W. Sutherland*
Address *Sydney Mines*
C. B. N. S.

By Whom Assigned *Sutherland J. L.*

Regtl. No. *415099*

Rank *Pte*

Corps *2nd Draft 40th Batts.*

Rate *\$ 20.⁰⁰ Feb 1st 1916*

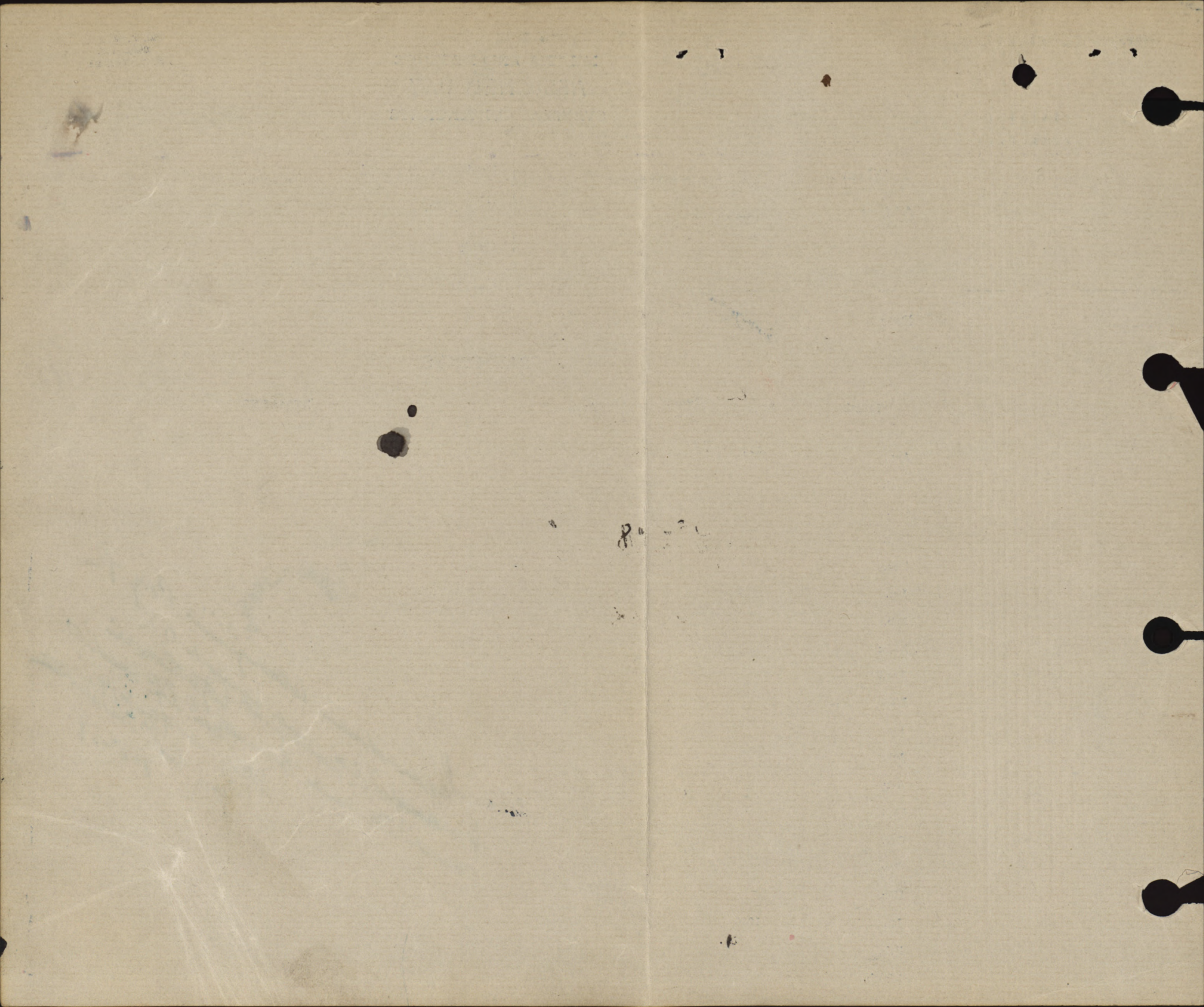
27m 12 1/2 by

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.		<i>K 13346</i>	<i>20</i>	
March		<i>N 16494</i>	<i>20</i>	



*Canadian Assigned Pay of
audited and found O.K.
W. J. H. H. H. H. H.
Cm A. P. Audit
7-5-19*



POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

22491/448

MW

517666-J-10

Esh

Name **Sutherland, J.D.**
Surname

Christian Name

Regimental Number **415099**

Rank **Pte.**

Address (in full) **Crescent St.,**

Unit **40th Bn.**

Sydney Mines,

Original Unit

C. B.

District where paid **M.D.6.**

Date of Discharge **29-6-18.**

P. D. P. Filing Number **16-157-6.**

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			SECOND PAYMENT			FINAL PAYMENT			Balance Over-payments to be Recovered	Total Amount Paid
	Cheque No. A	Date	Amount 30 days	Cheque No. B	Date	Amount 30 days	Cheque No. C	Date	Amount 31 days		
100 10	2075	25-7-18	33 00	1986	25-8-18	34 10				33 00	67 10
	2494	405127	4/4/19	70 00							
	217142	9403719	2/4/19	70 00							

M. F. W. 127.
60M-617.
1772-83-1140.

Remarks: **Advance 6th C.G.R.**

Dec'n No. 22491/448 W. S. G. File No. 17666/2767
 Award.....days at \$ 70. per day \$ 4200
 S. A....6 months at \$ per mo. \$ \$42000
 Less P, D. P. Credited \$10000
 \$
 Less further debit balance \$.....
 Net due paid as below 319.80

#-583-Crescent Street
 Sydney Miss C. B. M. J.

TO SOLDIER TO DEPENDENT						
O	Ag. No	Ch. No	Amount	To	Ch No	Amount
4-4-19	2484	405129	7000	✓		
2-4-19	2728	403714	7000	✓		
18-7-19	27442	505699	7000			
20-5-19	1387	4111173	7000	✓		
		488554	39900			

4-4-19
 2-4-19
 18-7-19
 20-5-19

LL

GEN'L AUDITOR
 Posting date by
J. J. Breen
 at 9-7-19

416-A-708

49432



Rank

Pte

Name

SUTHERLAND, John Leo.

Reg'l No. 415099

Unit 40th Bn. to 17th Bn.

If in perm. Corps,
What Unit?

Married or Single *Single*

Place and Date of Enlistment *Valcartier, July 13th 1915.*

Place of Birth *Sydney Mines, C.B.*

Name and Address, Next-of-Kin *Michael Sutherland, Sydney Mines, C.B.*

Relationship *Father*

N/E. R.B. No. *2555*

File R.L.

Category *O.K. ban*

Assigned Pay Monthly \$

Payable to

Relationship *Ops*

R133B Su.

Separation Allowance \$

Payable to

Relationship

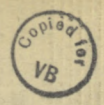
Discharge, Date and Place

Reason

Character *of S Cas.*

13-10-16

Report		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place	Date	REMARKS Taken from Official Documents
Date	From whom received				
		<i>Arrived in England</i>			
				<i>25-10-15</i>	
<i>3-11-15</i>	<i>O.C. 17th</i>	<i>Taken on strength of 17th Shoudeffe</i>		<i>3-11-15</i>	<i>M.II 239</i>
<i>19-1-16</i>	<i>O.C. 14th</i>	<i>Embarked for France to 25th Bn. Overseas.</i>		<i>19-1-16</i>	<i>P.II 0.25</i>
<i>29-1-16</i>	<i>O.C. 25th</i>	<i>Taken on str. 25th</i>	<i>In the Field</i>	<i>20-1-16</i>	<i>P.II 0.5</i>
<i>21-3-16</i>	<i>25th Bn</i>	<i>Stopp. of pay for 1 Mess Lin</i>	<i>D.O</i>	<i>21-3-16</i>	<i>" -13</i>
<i>22-9-16</i>	<i>CR 25th</i>	<i>lost by wreck value 2 francs Queen Mary Mil Hosp</i>	<i>Whalley Lanes</i>	<i>19-9-16</i>	<i>CRB 168 G.S.W. Foot ON</i>
<i>29-9-16</i>	<i>25th Bn</i>	<i>Transf to 25th Folkestone</i>	<i>In Id</i>	<i>18-9-16</i>	<i>P.II 52 W</i>
<i>25-9-16</i>	<i>bbal</i>	<i>Taken on strength.</i>	<i>Folkestone</i>	<i>19-9-16</i>	<i>P.II 414 a</i>
<i>17-11-16</i>	<i>25th Bn</i>	<i>Spd Can Mil Hosp</i>	<i>Epsom</i>	<i>13-11-16</i>	<i>CLB 216 G.S.W. Foot</i>
<i>6-1-17</i>	<i>ccac</i>	<i>Reported from Epsom.</i>	<i>Hastings</i>	<i>6-1-17</i>	<i>P.II 10 B</i>



Sutherland J. L. 415099

Report		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.			Place	Date	REMARKS Taken from Official Documents
Date	From whom received						

10-1-17	CCAC	Embarrasment GDD	Hastings	9-1-17	Pt # 17/E	
12-1-17	25 th Bn	Dis CC Hosp Woodcote Pk	Epsom	5-1-17	CLB 261 GS. W Foot	
4-3-17	C.C.A.C.	Case Attch. G.D.D. S.O.S to ^{Case} Seaford	Hastings	21-12-16	P. II, O. 107. B.	
20-1-17	C.A.S.C.	T.O.S. on trans. from G.D.D.	Seaford.	19-1-17	Pt. II. S.O. 120.	
6-6-17	Naval Rep	S.O.S. on Yfert to C.A.C.	Manuslett	20-5-17	II. 89	Cancelled by Pt. 057 d. 4.3.18
25-5-17	Naval Rep	beast to be shown in Command at G.D.D. & will be shown in Command at C.A.C. Seaford		25-5-17	II. 77	
22-2-18	C.A.S.C	S.O.S to C.A.S.C Corp Dep	Seaford	Pt 22-2-18	Pt 0.53.	
22-2-18	Corps Dep	T.O.S from Seaford	Seiff	Pt 22-2-18	— 53	
26-2-18	—	On Com to CDD Buxton	—	Pt 26-2-18	— 57	
25-3-18	—	Causes on Com to Buxton & is S.O.S to Canada for disposal of a.g. Ottawa	Seiff	Pt 12-3-18	Pt 0.84	

0514 27494

Casualty Form—Active Service.

Canadian Record Office
Westminster House,
Millbank, S.W.

Regiment or Corps 17th Reserve Battalion

Regimental No. L15099 Rank Pte Name J. L. Sutherland

Copied for VB

Enlisted (a) 12-5-15 Terms of Service (a) War period Service reckons from (a) 12-5-15

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		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				

19 JAN 1916

14th Batt

Trans. to 25th Bn.

OVERSEAS

19 JAN 1916 J. M. Dawson Lieut.

Can Base Depot.

Arrived from 17th Reserve Bn, Shorncliffe, & taken on strength of 25th Can Bn.

Can Base Depot

20-1-16

Asst. Adj. 17th Res. Bn.
Nom Roll
Part II orders - 5-29-1-16

4-2-16

do
25th Bn Joined Unit

On route
25th Battn

2/2/16
3/2/16

101/BD/3/209
B.213
Des-74-11-2-16

10-3-16

do
Stopped 2 Frames to replace one Mess Tin lost by neglect

Field
10-3-16

B213- Part II order 13-21-16

16-9-16

8th Sta Hqs
Lys w Foot L.

Adm 8th Sta Hqs
16-9-16

W3034

18-9-16

do

1 Com Depot
18-9-16

W3034

18-9-16

HQ St David

HQ St David
18-9-16

W3033-489
Part II order 52-29-9-16

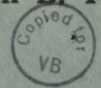
J. Whelan Capt.
For Officer i/c Can. Records,

21 OCT Recd

(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.

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				
		Taken on strength G.C.A.C. Pt. II D.O. No. 416		25/9/16	
8/1/17	ATTACHED TRANSFERRED FROM C.C.A.G. TO	<i>G.D.D.</i> <i>J. H. H. H. H. H.</i> <i>for ceccae</i>			PART II D.O. NO.
18/1/15	C.S.D.D. Transferred to C.A.D.C.	Seaford.	19/1/15		Part II No 16 Jan 19th.
		W.A. Lyndon Lt. Col. Commdg. Canadian Garrison Duty Depot.			<i>J. H. H. H. H.</i> <i>C.C.A.D.A.</i>
	<i>ceccae</i> to <i>ceccae</i>	Seaford	19/1/17		Part II Order No 20 20/1/17
22-2-18.	C.A.S.C. Seaford.	S.O.S. on posting to C.A.S.C. Corps Depot Shorncliffe	Seaford.	22-2-18.	Part II. W.O. No 53 <i>J. H. H. H. H.</i> For Major, O.C., C.A.S.C., SEAFORD.
22-2-18	C.A.S.C. CD	Took on strength from Seaford C.A.S.C.	Shorncliffe	22-2-18	PI 53
26-2-18.	"	On Command. 1. CD Buxton	"	26-2-18	PI 57 <i>ceccae</i> For O.C. C.A.S.C. CD



Casualty Form - Active Service.

Regiment or Corps 14th Reserve Bn
 Regimental No. 415099 Rank Pte Name Sutherland J. L.

Enlisted (a) _____ Terms of Service (a) _____ Service reckons from (a) _____

Date of promotion to present rank } _____ Date of appointment to lance rank } _____ Numerical position on roll of N.C.Os. } _____

Extended _____ Re-engaged _____ Qualification (i) _____

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				
FEB 27 1918					
		TAKEN ON STRENGTH C.D.D, BUXTON	Pt. 11 ORDER NO. 48		
					<i>Lock, Lt. Col.</i> Commanding Canadian Discharge Depot.
12 MAR 1918		EMBARKED FOR CANADA FROM	LIVERPOOL		
<i>20/3/18</i>	<i>O/S.</i>	<i>Taken on strength # 6 Casualty Unit.</i>	<i>Halifax N.S.</i>		<i>W. Whidden</i> LIEUT. O. i/c Casualty Unit, M. D. 6
		<i>Transferred to # 6 District Depot.</i>	<i>Halifax N.S. 14/5/18</i>		<i>W. Whidden</i> LIEUT. O. C. CASUALTY COMPANY NO. 6 DISTRICT DEPOT

(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, Shoing Smith, etc., etc., also special qualifications in technical Corps duties.



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				
10-5-18.		STRUCK OFF STRENGTH NO. 6 DISTRICT DEPOT On transfer to 6th C. G. R.	Halifax	10-5-18	Go Shawsd CAPTAIN ADJUTANT NO. 6 DISTRICT DEPOT
		Taken on strength 6th. Batt. C.G.R. C.E.F.	HALIFAX, N. S.	11.5.18	George H. Mason Lieut Ass. Adj. 6th Batt. C.G.R. C.E.F.
		Struck off strength 6th. Batt. C.G.R. C.E.F. Mis. med unfit.	HALIFAX, N. S.	29.6.18	George H. Mason Lieut Ass. Adj. 6th. Batt. C.G.R. C.E.F.

CANADIAN

B. Pte
13/4/16

43127
415099
78



ORIGINAL MEDICAL HISTORY SHEET.

Surname Netherland Christian Name John Leo

25 SEP 1916

Examined { on 13 day of July 1915
 at Valcartier

Birthplace { City or Town Sydney Mines
 County Coape Breton

Apparent age 20

Trade or occupation Miner

Height 5 Feet 6 1/2 Inches.

Weight _____ Lbs.

Chest measurement { Minimum 30 1/2 inches.
 Maximum expansion 33 1/2 inches.

Physical development _____

Small-Pox Marks _____

Vaccination Marks { Arm _____ Right _____ Left _____
 Number _____

When Vaccinated last _____

Approved by E. Douglas

Rank Cap. M.O.

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT.

Date	Result	VACCINATIONS.
<u>July 23rd /17</u>		<u>Cochlear</u> M.O.

(a) Marks indicating congenital peculiarities or previous disease _____

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

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>2/9/15</u>		<u>E. Douglas</u> M.O.
<u>11/9/15</u>		<u>E. Douglas</u> M.O.
<u>9/1/17</u>	<u>TAB</u>	<u>amblyon</u> M.O.
<u>21/5/17</u>	<u>TAB</u>	<u>g/h. Shirts</u> M.O.
<u>1915</u>	<u>at</u>	<u>Valcartier P.Q.</u>

Enlisted on 13 day of July 1915 at Valcartier P.Q.

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>40th Batt</u>	<u>415099</u>		<u>7/13/15</u>
Transferred to.. ..				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>Hastings</u>	<u>07/1/17</u>	<u>G.S.W. left foot</u>	<u>C. 3 Ft. Man Cott.</u>
<u>Snares</u>	<u>28.6.17</u>	<u>B.S.W. Left-Heel</u>	<u>C. 3. will improve in 6 mos</u>
<u>St. Martins Place</u>	<u>24/2/18</u>	<u> </u>	<u> </u>
<u>SHORNCLIFFE</u>	<u>15 FEB 1918</u>	<u> </u>	<u> </u>

APPROVED

George Hooper

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

M. F. B. 313.

100M.—1-15.
H. Q. 1772-39-439.

W.S. 18-4-18
29-V-18

Impaired Suction
left foot
Impaired Function
left foot

Cat. CIII
Cat. I
John Murdoch
St. Martins

MILITARY



Christian Name

Surname

REGIMENT.	Date of Arrival at the Station.	DATES OF						DISEASE.	Number of days in Hospital.	Remarks on nature of the disease: how induced: if mild or severe: if completely recovered from: whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of Inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
		Admission into Hospital.			Discharge from Hospital.						
		Day	Month	Year	Day	Month	Year				
Queen Mary's Military Hospital. WHALLEY, Lanes.	19	Sept.	1916	13	Nov.	1916	l/s W foot left	56	Wounded Sept 15/1916 on the Somme attacking Courselette. l/s W. Entry behind external malleolus. No exit. Operation 23/10/16 piece of substance removed from inner side of heel. 11/11/16. Wounds healed. Walks with the aid of a stick. Foot swollen. Ankle joint movements normal. (Spd) A. F. Ramswell.		
Woodcote Park	13	11	16	9 ⁵	12	17	do do.		To C.C.A.C. for Lent to Ramsgate Per. Base Duty for Treatment. To G. Richardson To 6 Colb for P.B.		

CANADIAN CONTINGENT EXPEDITIONARY FORCE

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. 415099 Rank Pte. Name J.D. Sutherland

Corps. 6th Batt'n, C.G.R., C.E.F. who was* Discharged

On 29-6-18 1918, to.....
 *Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1-6-18 1918, to 29-6-18 1918, the inclusive date of transfer or discharge.

Dr.	\$	c.	Cr.	\$	c.
Bal. Dr. from prev. month.....	3	07	Bal. Cr. from prev. month.....		
Advances } No. <u>Cash</u>	10	00	Regt'l Pay <u>29</u> days at \$ <u>1</u> c. <u>00</u>	29	00
Cheques } No.....			Field Allow. <u>29</u> days at \$ <u>10</u> c.	2	90
Assigned Pay and Sep'n Allce. No.....			Separation Allowances* (Monthly).....		
Other charges.....			Other Allowances* <u>Cloth. Allce.</u>	8	00
Payment on transfer or discharge No. <u>2006</u>	59	83	Other Credits*.....		
Balance Cr. (to be paid by the new unit).....			Bal. Dr. (to be deducted by new unit).....	33	00
Total.....	72	90	Total.....	72	90

* Give particulars.

A monthly stoppage of \$ Nil (†) has..... (‡) been paid on account of Assigned Pay for the month of..... 1918 } (to) Assignee.....
 and Sep'n Allce. for month of Nil 1918 }
 (Address)

(†) 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 12-5-15
 (2) if married and if a Separation Allowance Card has been submitted No.
 (3) cause of discharge Medically unfit authority 6D.59-S-555
 (4) authority for transfer.....

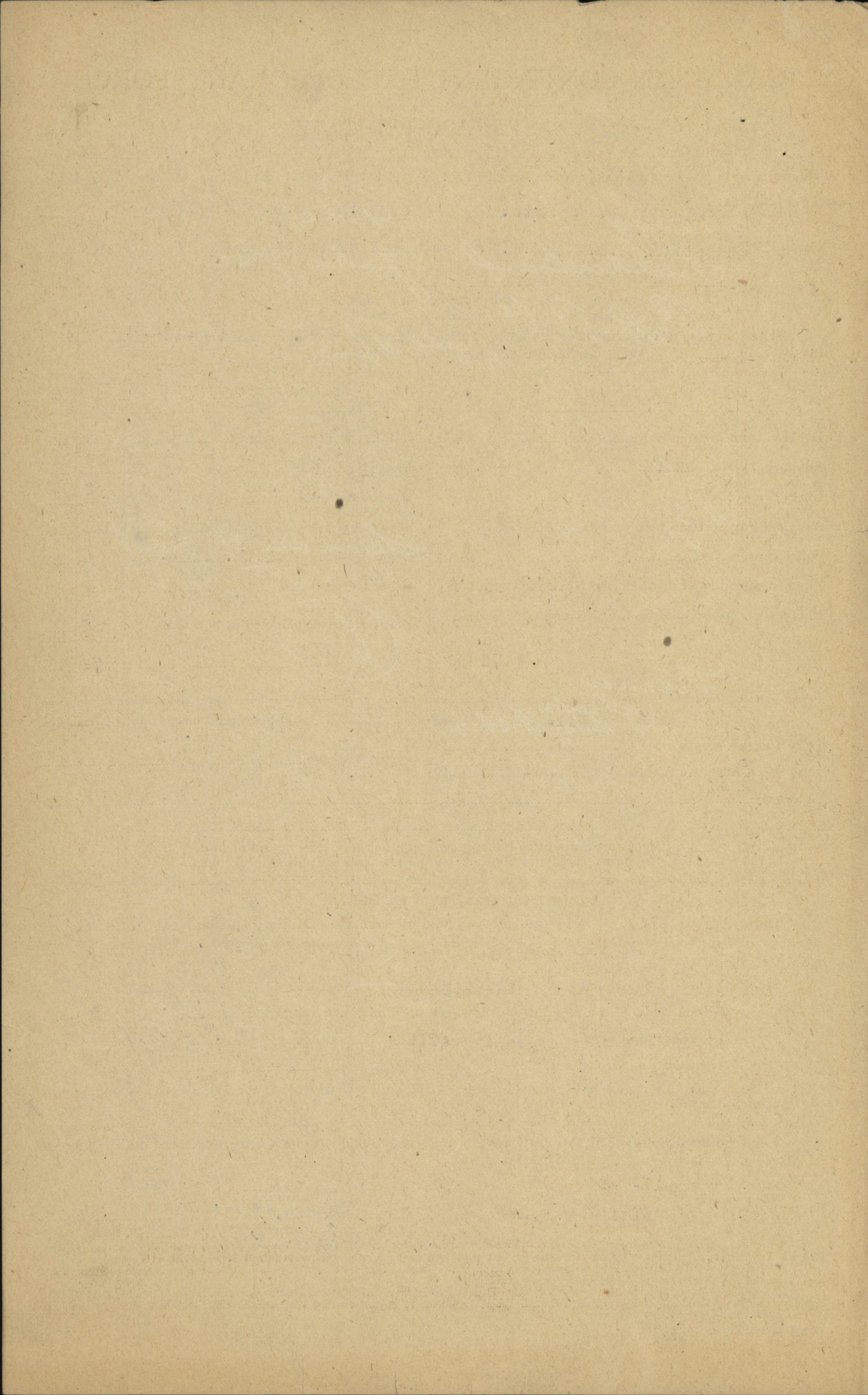
NOTE.—Separation Allowance and Assigned pay Card and Index Card (M. F. W. 71) are to accompany the original Last Pay Certificate on transfer.

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

Date 17-7-18 [Signature] LIEUT. Capt.,
 Place Halifax N. S. for Paymaster No. 6 Battalion.

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.



DUPLICATE

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 415099 (Rank) Private
 Name (in full) John Leo Sutherland enlisted in
 the 40th. Batt.
 CANADIAN EXPEDITIONARY FORCE at Talcahuano on the 13th.
 day of July 19 15
 HE served in France
 and is now discharged from the service by reason of being medically
unfit. (Auth 610.3. 830. 24.6.18)

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

Age 23 9/12 yrs.
 Height 5' 6 3/4" in.
 Complexion Fresh
 Eyes Grey
 Hair Brown

Marks or Scars
wound on left
foot.

J. L. Sutherland
 Signature of Soldier

L. A. Drummond
 Issuing Officer

Date of Discharge 29th June 18

Reur. Colonel
 Rank
O.C. 6 Batt. C.E.F.
 Appointment

Signed at Halifax this 29th day of June 1918

in Military District No. six

File Reference No. 16. 3. 324

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.

DUPLICATE
CANADIAN EXPEDITIONARY FORCE

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

No. H15099 (Rank) Private Name J. C. Sutherland

Unit 6 Batt. C. G. F.

Address on Discharge Sydney Mines N.S.

Character and Conduct Very good

Former Occupation Miner

Special Qualifications of Value in Civil Life

Medals and Decorations

Remarks Entitled to wear One Gold Bar, wounded 16 Sept. '16

Signed at Halifax N.S. this 29th day of June 1918

H. W. Mumford
Name of Officer

Lieut. Colonel
Rank

C. G. F. 6 Batt.
Appointment



MARRIED OR SINGLE *S.*

PLACE OF BIRTH *Sydney Mines C.B.*

NAME AND ADDRESS OF NEXT OF KIN *Michael Sutherland
Sydney Mines C.B.*

RELATIONSHIP OF NEXT OF KIN *Father*

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY \$ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY
		<i>SLW / 30/16</i>
		<i>20/11</i>

ADMISSIONS TO HOSPITAL, &c.

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

REG'L No. *415099* RANK *Pvt.* NAME *Sutherland Jno. Leo*

IF IN PERM. CORPS | UNIT *25th Bn. Transferred to C.C.A.C.* DATE *1/10/16* AUTHORITY *Ch. 168.*

WHAT UNIT | TRANSFERRED TO *C.C.A.C.* DATE *31-3-17* AUTHORITY *22/9/16*

PERMANENT FORCE ALLOWANCES | TRANSFERRED TO *1st Lt. Sutherland* DATE *15/3/18* AUTHORITY *2057 26-2 297*

PLACE OF ATTESTATION *Valcartier* TRANSFERRED TO *Nor-Eppe Beh* DATE *15/3/18* AUTHORITY

DATE OF ATTESTATION *July 13th 1915* TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY \$ *20.00* DATE EFFECTIVE

PAYABLE TO *Jno M Sutherland Sydney Mines N.S.* RELATIONSHIP

ASSIGNED PAY MONTHLY \$ DATE EFFECTIVE

PAYABLE TO

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) *Stopped 1/3/18* EFFECTIVE REASON *Discharged to Canada*

DISCHARGE DATE AND PLACE *28/2/18, Canada* REASON AND AUTHORITY *Reg. 3451*

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

DATE	PAY				FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS				CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS			
	NO. OF DAYS	RATE		AMOUNT		NO. OF DAYS	RATE		AMOUNT		NO. OF DAYS	RATE				AMOUNT		1	2	3	4	1	2				3	4				CREDIT	DEBIT	
		\$	C.	\$	C.		\$	C.	\$	C.																								
	<i>152</i>			<i>152</i>				<i>15</i>	<i>20</i>					<i>10</i>	<i>147 20</i>																			
<i>April 30</i>	<i>1</i>		<i>30</i>		<i>30</i>	<i>10</i>	<i>3</i>								<i>33</i>	<i>934 9/16 984 25/16</i>					<i>2 62</i>	<i>2 62</i>			<i>20</i>	<i>38</i>	<i>25 62</i>	<i>41 92</i>	<i>49 30</i>		<i>Clothing Chgs 14th Bn.</i>			
<i>May 31</i>	<i>1</i>		<i>31</i>		<i>31</i>	<i>10</i>	<i>3 10</i>								<i>34 10</i>	<i>1035 9/16 1085 25/16</i>					<i>2 56</i>	<i>2 56</i>			<i>20</i>		<i>25 12</i>	<i>58 28</i>						
<i>June 30</i>			<i>30</i>		<i>30</i>		<i>3</i>								<i>33</i>	<i>1138 15/16</i>						<i>2 58</i>			<i>20</i>		<i>22 53</i>	<i>65 73</i>						
<i>July 31</i>			<i>31</i>		<i>31</i>		<i>3 10</i>								<i>34 10</i>	<i>1193 30/16 1229 15/16</i>					<i>2 56</i>	<i>2 62</i>			<i>20</i>		<i>25 18</i>	<i>77 65</i>						
<i>Aug 31</i>			<i>31</i>		<i>31</i>		<i>3 10</i>								<i>34 10</i>	<i>1253 22/16 1337 8/8</i>					<i>2 62</i>	<i>2 61</i>			<i>20</i>		<i>25 23</i>	<i>86 52</i>						
<i>Sept 30</i>			<i>30</i>		<i>30</i>		<i>3</i>								<i>33</i>	<i>1885 25/8</i>					<i>2 62</i>				<i>20</i>		<i>22 62</i>	<i>96 90</i>		<i>74 to C.C.A.C. 1/10/16. Ch. 168. 22/9/16</i>				
<i>Oct 31</i>			<i>31</i>		<i>31</i>		<i>3 10</i>								<i>34 10</i>	<i>25th 1434 9/7 29th 19/10</i>						<i>262</i>	<i>487-20</i>			<i>20</i>		<i>27 49</i>	<i>103 51</i>					
<i>Nov 30</i>			<i>30</i>		<i>30</i>		<i>3</i>								<i>33</i>										<i>20</i>		<i>20</i>	<i>116 51</i>						
<i>Dec 31</i>			<i>31</i>		<i>31</i>		<i>3 10</i>								<i>34 10</i>	<i>30th 354 2/11 31st 369 1/12</i>						<i>4 87</i>				<i>20</i>		<i>29 7/4</i>	<i>120 87</i>					
<i>Jan 31</i>			<i>31</i>		<i>31</i>		<i>3 10</i>								<i>34 10</i>	<i>1198 6/11 1212 20/12 1250 14/1</i>						<i>2 43</i>				<i>20</i>		<i>37 04</i>	<i>117 93</i>	<i>15</i>	<i>102 93</i>			
<i>Feb 28</i>			<i>28</i>		<i>28</i>		<i>30 80</i>								<i>30 80</i>										<i>20</i>		<i>20</i>	<i>128 73</i>	<i>15</i>	<i>113 73</i>				
<i>Mar 30</i>			<i>30</i>		<i>30</i>		<i>34 10</i>								<i>33 00</i>										<i>20</i>		<i>20</i>	<i>141 73</i>		<i>Have case closed 26-2-17</i>				

Checked *H. Blount*

over

dy

415099, Sutherland Jno Leo.

DATE	PAY		FIELD ALLOWANCE		WORKING OR SPECIAL PAY		ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS				CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
	NO. OF DAYS	RATE	AMOUNT	NO. OF DAYS	RATE	AMOUNT				NO. OF DAYS	RATE	AMOUNT	1	2	3	4	1				2	3			
Mar 31-31	1	10	10						1 10		41 24/3			24 72	20 26	12 36	99 80			73	1947	12736	1500		
Apr 1-30	30	10	30						33 -		353 26.2 297 13.2 246 24.1 96 14.3 90 13.4	Saunders Bristol Shoukhan Seaford					487 24 33 487 1460 973	20		7840	7796				
May 31	31	10	34 10						34 10		193 21/11 368 15/12 366 31/15						24 33 487 4 30	20		20	9206				
June 30			33 00						33 00									20		20	5650	6856			
July 31			34 10						34 10									20		20		8266			
Aug 31			34 10						34 10									20		20		9676	15 - 8176		
Sept 30			33 -						33 -		430 12/16 438 23/16 352 23/17							20	2 20	5146	7836			220 2 days P.P. No 2. P.O. 234. 20/8/17.	

MONTH	PARTICULARS	CR.1	CR.2	PARTICULARS	DR.1	DR.2	DR.3	DR.4	BALANCE	DEFERRED	SER. PAY ENG.	PARTICULARS	CR.1	CR.2	PARTICULARS	DR.1	DR.2	DR.3	DR.4	BALANCE	DEFERRED	SER. PAY ENG.
1917.									7836.15			1918.								40 20.		
Oct	P. Pay	34 10							20			Oct								30 47		
				981 13 Der Seaford	487																	
				1031 24/9 do	730																	
				723 13/8 do	487																	
				Car	17 64																	
				Dec to a P																		
				840 24/8 Der Seaford	730																	
				1104 10/10	487																	
				1179 24/10	730																	
				1283 13/11	487																	
				1376 24/11	730																	
				14005	31 64																	
				147 A503 5/12/17 Seaford	2 03																	
				Car																		
				1471 4/14/17 Der Seaford	487																	
				1603 7/12/17	1217																	
				Car	19 07																	
				Can a Pay																		
				1716 10 5/12	484																	
				30 80	484																	
				30 80																		
				1828 24/11/18	730																	
				2020 N 11-28 Seaford	487																	
				2072 Der Seaford	487																	
				" 2263. Car	114 60																	
					31 64																	

Can. assigned pay 11/11
Audited & found OK
B. Beach
Can. A.P. Audit
7-5-19

Net Cash in hand

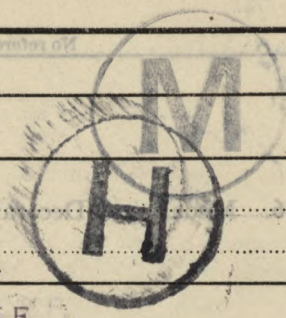
Balance 30.36
7/6/18

This space to be for numbers

Proceedings on Discharge.

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

No.	415099.
Rank	Private
Surname	Sherburne
Christian Name	John Leo
NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.	
Corps (Squadron, Battery or Company)	6th, Batt, Can. Garrison Regt, C.E.F.
Date of Discharge	29th June 18
Place of Discharge	HALIFAX, N. S.



1. DESCRIPTION AT THE TIME OF DISCHARGE.

	Descriptive Marks
Age..... 23 years..... 9 months.	
Height..... 5 feet..... 6 3/4 inches.	
Complexion..... Fresh.	Wound on left foot.
Eyes..... Grey	
Hair..... Brown	
Trade..... Miner	
Intended place of residence..... Sydney Mines	
(To be given as fully as practicable.)..... S.S.	

2. The above-named man is discharged in consequence of *being medically unfit.*
Auth. 60. 59. 5. 830. 24. 6. 18.

N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.

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

N.B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldiers and the Officer Commanding his Squadron, Battery or Company.

4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)

U.S. G. Comp.

M. F. B. 218. *21-3-19. A.D.*

*Red
1/4/20
H.K.*

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

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

6. Medals and Decorations.....

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

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

(Place).....

(Date).....

Commanding

8. Certificate to be signed by the Soldier on Discharge

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

(Place)..... HALIFAX, N. S. *I. L. Sutherland* (Signature of Soldier.)

(Date)..... *29th June 18* *B. Snook Sgt.* 6th Batt. Can. Garrison Regt. C.E.F. (Signature of Witness.)

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

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

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

..... (Signature of Soldier.)

10. Statement of Service.

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

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

11. Confirmation of Discharge.

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

(Place)..... HALIFAX, N. S.

(Date)..... *29th June 18*

(Signature)..... *L. J. Mumford* LT. COL. O. C. 6th. Batt. Canadian Garrison Regt. C. E. F.

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.)

I claim subsistence while on
Sanding furlough from 7th March to
8th April 1918.

H. Sutherland

Sgt.

6th Batt, Can. Garrison Regt, C.E.F.

Militia Form B. 313

Militia Form B. 313

Reg. Conduct Sheet

B. 318

Proceedings on Discharge

Conduct Sheet

Squadron
Battery
Company

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

Militia Form B. 313

Med. Hist. Sheet

(a) Proceedings on Discharge.

B. 317 " Medical Report for Invalids

(b) Attestation.

D. 817 " Statement of Man's Account on Transfer and Last Pay Certificate

(c) Medical History Sheet (in the event of such having been prepared).

"*Only if discharged "Medically unfit."

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

Very Obedt

6th Batt, Can. Garrison Regt, C.E.F.

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.)

List of Discharge Documents.

<p>Reg. Conduct Sheet, Militia form B. 263.</p> <p>Squadron } Battery } Conduct Sheet, " B. 263a. Company }</p> <p>Copies of Convictions, by C. P. in MS.</p> <p>Med. Hist. Sheet, Militia Form B. 313</p> <p>Medical Report for Invalid* " B. 227.</p> <p>Statement of Man's Account on Transfer and Last Pay Certificate, " D. 877.</p> <p>*Only if discharged "Medically unfit."</p>	<p>Attestation Paper, Militia Form B. 235.</p> <p>Proceedings on Discharge " B. 218.</p> <p style="text-align: center;">In the case of recruits who are rejected on final approval, the discharge documents will consist of</p> <p>(a) Proceedings on Discharge.</p> <p>(b) Attestation.</p> <p>(c) Medical History Sheet (in the event of such having been prepared.)</p>
-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

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

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

I hereby declare that I do of my own free will request to be discharged from the Militia.

10. Statement of Service.

Service toward Engagement to (the date to which the Record of Service is completed) _____

11. Confirmation of Discharge.

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

(Place) _____

(Date) _____

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

Feb. 1, 1916.

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

<i>20</i>			
-----------	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

No. *415-099*
 Rank *Pte.* Promoted Reverted Discharge
 Soldier's Name *J. L. Sutherland.*
 Battalion *2nd Draft. 40 Batta.*
 Beneficiary
 Relationship
 Address

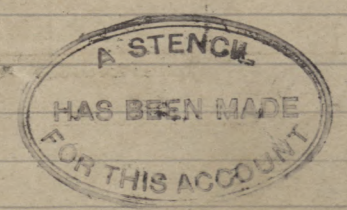
PARTICULARS OF ASSIGNMENT

Name *Mrs. M. Sutherland.*
 Address *Sydney Mines, C. B. N. S.*
 Change of Address
 1
 2
 3
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
<i>Dec 31</i>			<i>460</i>	<i>460</i>	
<i>Jan</i>	<i>A 64172</i>		<i>20</i>	<i>20</i>	<i>OB</i>
<i>Feb</i>	<i>69687</i>		<i>20</i>	<i>20</i>	<i>W</i>
<i>March</i>	<i>92184</i>		<i>20</i>	<i>20</i>	<i>W</i>
			<i>520</i>	<i>520</i>	

31-3-18
 A/c Closed
 Ret'd per *Olympic*
 Date *23/3/18* AFW 187
 Clerk *W. J. ... 26-3-18*
M. P. D. B. rendered.

*Sanction assigned pay
 audit found O.K.
 W. J. ...
 C. ...
 7-5-19*



M. F. W. 128
 400M.-6-17-1772-38-141
 L. L. 22220-M. & D. 7933.

Date of Enlistment _____

MILITIA AND DEFENCE

Date of Assignment _____

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

--	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No.

Name

Rank

Promoted

Reverted

Discharge

Address

Soldier's Name

Change of Address

Battalion

1

Beneficiary

2

Relationship

3

Address

4

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

M. F. W. 128
 4008c-6-17-1772-39-141
 L. L. 2320-M. & D. 1493.

129528

NE.



PROCEEDINGS OF A MEDICAL BOARD.

Dated at Jan 6 1918

No. 415099 Rank PLC Name SUTHERLAND, J.

Local Unit 25-05 Overseas Unit - Age 20

Examination held at Hastings

GSW left foot Sept 15th 16

DISABILITY.
Overseas—Local.
(scratch one out)

PRESENT CONDITION.

8 months duty in France. Wound healed. Ankle and foot slightly enlarged. Extension and flexion movements slightly limited - but foot inverted and cannot be everted. So full weight comes on external part of foot. He is unable to walk very far without pain.

BOARD RECOMMENDS:— 0-3.

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

Signatures:—

Members { Edwards Capt President.
Adams Capt

APPROVED

Hastings, Sussex

Dated at.....1918

JAN 1917

A. J. McIntyre

For A.D.M.S.
Captain, C.A.M.C.
for A.D.M.S., Canadians, Brighton Area

N.E.

PROCEEDINGS OF A MEDICAL BOARD

No. Name Rank
Local Unit Overseas Unit
Age Examination held at

DISABILITY
Overseas - Local
(Specify the one)

PRESENT CONDITION

BOARD RECOMMENDATIONS

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

Signatures:—

..... President

..... Members

APPROVED



PROCEEDINGS OF A MEDICAL BOARD.

Dated at l.a.s.c. Seaford, June 18 1917.

No. 415099 Rank Pte Name Sutherland, John Geo.

Local Unit l.a.s.c. Overseas Unit 25 Bn Age 22 yrs.

Examination held at Seaford, Sussex.

DISABILITY:
Overseas—Local
(scratch one out).

G.S.W. LEFT HEEL.

PRESENT CONDITION.

This man was 10 months in trenches and wounded in left heel with shrapnel. Heel is everted.

BOARD RECOMMENDS:— C III will improve in six mos.

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

Signatures:—

McPrest Capt.....President.

Gorwood Capt

Mason Capt

Members

APPROVED

Dated.....1917.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at 1917

No. Rank Name

Local Unit Overseas Unit Age

Examination held at

DISABILITY.
Overseas - Local
(Section on duty)

PRESENT CONDITION.

BOARD RECOMMENDS -

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

Signatures -

President

Members

APPROVED

Dated 1917. For A.D.M.S.

Reserved for M.H.C.

Copied in VB

Regt. No. 410 099 Rank pt Surname SUTHERLAND Christian Name John L.

Unit or Corps—(a) Overseas from United Kingdom 25th Bn (b) In United Kingdom CASB

Born at—Town Waterford County or Province Cape Breton N.S. Country Canada

Date of Birth—Day 16 Month September Year 1894 Age 23 yrs. 5 months.

Joined at Sydney Mine N.S. Date 12 May 1915 (He state)

Former Trade or Occupation Miner Valg. No. 12 July 1915 (m H.S. state)

Permanent marks or peculiarities that will serve for future identification: Scar below only mottled and star shaped

Height—feet 5 inches 7 Colour of eyes Blue

Signature of Soldier (for identification purposes) J. L. Sutherland

Medical Report.

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

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

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

Disabilities Group (a) INJURED LEFT FOOT
Disabilities Group (b) "
Disabilities Group (c) "

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

	Disease or injury to which the disability is due.	Place of origin.	Date of origin.
(i.) As to Group (a) above.	<u>G.S.W.</u>	<u>France</u>	<u>15-9-16</u>
(ii.) As to Group (b) above.	<u>"</u>	<u>"</u>	<u>"</u>
(iii.) As to Group (c) above.	<u>"</u>	<u>"</u>	<u>"</u>

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

3. Is the disability due to disease contracted or injuries received prior to Active Service?
(i.) As to Group (a) above? no If yes, has Active Service aggravated it? not applicable
(ii.) As to Group (b) above? " If yes, has Active Service aggravated it? "
(iii.) As to Group (c) above? " If yes, has Active Service aggravated it? "

4. Is the disability due to disease contracted or injuries received while on Active Service—
(i.) As to Group (a) above? yes
(ii.) As to Group (b) above? "
(iii.) As to Group (c) above? "



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

(i.) While on duty? *YES*

(ii.) While off duty? *Not applicable*

(iii.) Was a Court of Inquiry held? *NO*

(iv.) Where?

(v.) When?

(vi.) Opinion of the Court?

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

State health was always good prior to enlistment at Sydney June 12th May 1915. He also states he was reattested at Valcartier 13 July 1915. This latter date appears on M.T.S. He arrived England September 1915. 507 range Jan 1916. Served there 9 months Infantry Bn. Wounded in left heel 15 Sept 1916. Evacuated to England 19. 9. 16 In Hospital until 5-1-17. S.M.B. Hastings Category within C III 6-1-17. S.M.B. Seaford 28-6-17 affirmed. He now complains of pain and swelling of foot on walking over one mile, and inability to place foot flat on ground without causing pain.

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

Is a well nourished and developed man appearing not older than age given 23 years. There is a scar below outer malleolus left heel and one on sole of heel, where shrapnel wounded him now healed and not tender. He walks on the outer side only of the left foot and there is a bulging below inner malleolus. Walking in this manner causes a slight hump in his gait. The foot requires more time to accustom him to use it properly and am of opinion that a further period in Category B is necessary before he is sent to command and Dept for P.T. He is otherwise well and all systems and organs are normal.

8. OPERATION. (i.) Was one performed? *yes*

(ii.) If so, state what.

Removal piece of substance from inner side heel 23/10/16 as on M.T.S.

(iii.) Was one advised and declined?

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

9. (i.) Is there loss or decay of teeth attributable to Active Service? *yes*

(ii.) If so, describe.

3 teeth extracted

10. DO YOU RECOMMEND:—

(a) Fit for duty? *no*

(b) Fit for base duty? *yes*

(c) Invalid to Canada? *yes*

(d) Discharge from the Service as permanently unfit?

But likely to be raised in Category within six months.

Date of Report *24-2-18* 191

Station *St. Martin's Plain*

Signed *Hythevauch Capt*
Officer in medical charge of case.

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

R. Scott Capt

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

Dated at *St. Martin's Plain* Station, on *July 24/18* 191

* Delete if inapplicable.

Copied to
VB

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

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

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

Yes

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

Yes

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

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

not applicable

15. THE PENSIONABLE DISABILITY.—see Part I. (3). Aggravation on Active Service of a disability existing previous to joining is to be included in the estimate.
What part of the entire disability estimated next above in (14) is due to causes arising during Active Service?
(Estimate at none, 1/8, 2/8, 3/8, 4/8, or all.)

not applicable

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

not applicable

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

not applicable

18. Remarks.

19. Recommendation :—(a) Fit for duty? no
(b) Fit for base duty? Yes
(c) Invalid to Canada? no
(d) Discharge from service as permanently unfit? no

Yes Bin likely to be raised in 6 mos

Classification for the Military Hospitals Commission.

Date of Board

Feb 24 1918

Station

St Martin's Plain

Signatures of the Board.

Andrew W. Hipwell Capt President.
George Cooper Capt

Approved

Burton

A.D.M.S.

Dated at

Station

3 FEB 1918

191

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



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

on the _____ day of _____ 191_____

Members of the Board:—

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

[Faint, illegible handwritten text and notes, possibly including names and dates.]

Read and approved for the Military Hospital Commission

[Faint handwritten signatures and notes in the middle section.]

Dated at _____ this _____ day of _____ 191_____

[Faint handwritten signatures and notes at the bottom of the page.]

Signatures of the Board

President.

ASSISTANT DIRECTOR
63-1156
APR 22 1918
MEDICAL OFFICERS.

MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

Coded for
48

- In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" issued by the B.P.C. and instructions issued by Militia H.Q., Ottawa, will be carefully followed.
- The Medical Officer in charge of the case is responsible for the proper completion of Sections 1 to 17 of this Form and will obtain the signature of the soldier to the "Statement," page 3. The President of the Board of Medical Officers is responsible for the proper completion of sections reserved for recording the "Opinion of the Medical Board."
- In answering the questions, Medical Officers will carefully obtain and record the 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.
- Special care is required in answering question 13. Please read the questions carefully. All questions must be answered.
- If space provided under any sections is insufficient use blank space, page 4 or add another sheet. Such entries or sheets must be initialled by the Medical Board.
- A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board."
- Under no circumstances may information other than that in sections 8, 9 and 10 be communicated to the soldier, directly or indirectly.
- The nomenclature of diseases must be followed, if possible, as described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London, (1915), by Messrs. Harrison & Sons.

STATION Halifax U.S. DATE April 18/18

1. 1 (a) Unit 40th Batta (b) Regimental No. 415099 (c) Rank Private
 (d) Surname Sutherland (e) Christian name John Leo
 2. Age last birthday 23 Date of birth Sept 16 1894
 3. Enlisted at Valcartier P.Q. on July 13, 1915

4. Personal description:—
 (a) Height 5' 6 3/4 (b) Weight 125 (c) Complexion Fair
 (d) Colour of hair Black Brown (e) Colour of eyes Grey (f) Identification marks Scar on left foot.

5. Address after discharge (for the use of the Board of Pension Commissioners) Bessent St., Sydney Mines, C.B.
 6. Former trade or occupation miner

7. (a) Service	Years	Days
	PERIODS	
	From	To
<u>40th Batta</u>	<u>July 13, 1915</u>	

(b) Has he been overseas? yes to France 8. Original disease or disability G. S. W. of Left Foot
 (a) Date of origin Sept 15-16 (b) Place of origin Beaucelette
 (c) Cause* shrapnel
 (d) Present disease or disability Impaired Function of Left Foot

9. Present condition (a) (Important to be a full description of the present disabling condition or conditions only.) "History" must be recorded in Section 10.
 [After describing all abnormalities, anatomical and functional, contributing to present disability (see section 11) state whether such disability is directly due to (a) weakness, (b) loss (complete or partial) of any organ or member of its functions, or (c) to the necessity for rest of the body or of some of its parts.]
Scar 1/2 in long immediately below outer malleolus left foot. Scar 1/2 in in length on dorsal surface of heel. No lacerations on



9. Present condition.—(Continued.)

pressure over either of these scars. ~~no~~ ^{no} impairment of flexion and extension left ankle, ext. rotation of foot (left) 20% short of right. internal rotation 10% short of normal. slight tendency to walk on outer side of foot. after walking a mile ankle begins to pain and feel weak. foot is slightly swollen in region of ankle. a well developed young woman

(b) Are the following systems normal? If not, briefly state abnormality.

Nervous. yes Digestive. yes Respiratory. yes Cardiac. yes
Genito-Urinary. yes Skin, Middle Ear, Eye or any other part. yes

10. History: (a) of Condition referred to in "a" section 9.

due to (b)

(b) 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.

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

not applicable

12. Was the disability caused or aggravated by negligence, by vice or by misconduct, or 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?

six months

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

hospital.

OPINION OF THE MEDICAL BOARD



14. (Continued).

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

no

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

yes

17. Recommendations

I recommend that no 415-099 Pte John Leo Sutherland be placed in Category C III

APPROVED BY

J. M. Mendoça
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 and either "satisfied" or "not satisfied" struck out.)

I, the undersigned John L. Sutherland 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

J. L. Sutherland
Signature of soldier examinee.

OPINION OF THE MEDICAL BOARD

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

The Board concurs

19. Is the soldier fit for

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

20. It is certified that the soldier

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

- (b) Does not require treatment.
- ~~(c) Should pass under his own control.~~
- (d) Should not pass under his own control.
(Strike out condition not applicable).



OPINION OF THE MEDICAL BOARD—(Continued).

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

That he be retained in the service category C-III

Before signing the President of the Medical Board will read the certificate signed by the soldier, to the soldier, and if no change is indicated will initial the certificate.

PLACE *Halifax N.S.* *J. Rankine Capt. Comd.* President.
DATE *April 18th 1918* *R. F. Brown M.D.* Members.

APPROVED BY *E. H. Moore M.D.* Assistant Director of Medical Services. APPROVED BY _____ Director-General of Medical Services.
DATE *22.4.18* DATE _____



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.

OPINION OF THE MEDICAL BOARD

PLACE _____ President.
DATE _____ Members.

20. It is certified that the soldier _____
(a) Does not require treatment.
(b) Should pass under his own control.
(c) Should not pass under his own control.
(Strike one condition not applicable.)

BPC required

MEDICAL HISTORY OF AN INVALID



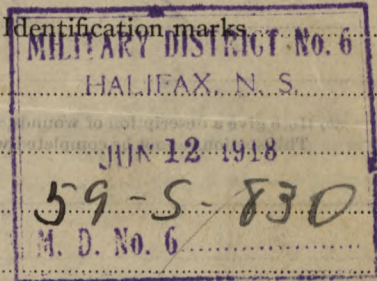
INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

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 soldier 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 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. Special care is required in answering question 13. Please read the questions carefully. All questions must be answered.
5. If space provided under any sections is insufficient use blank space, page 4 or add another sheet. Such entries or 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 8, 9 and 10 be communicated to the soldier, 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. Halifax N.S. DATE. May 1918

1. 1 (a) Unit 25th Batt. (b) Regimental No. 415099 (c) Rank Pte.
 (d) Surname Sutherland (e) Christian name John Leo
 2. Age last birthday 23 Date of birth September 16th 1895
 3. Enlisted at Aldershot on May 12th 1915

4. Personal description:—
 (a) Height 5 ft 6 3/4 (b) Weight 138 (c) Complexion Fresh
 (d) Colour of hair Brown (e) Colour of eyes Grey (f) Identification marks
wound on left foot.



5. Address after discharge (for the use of the Board of Pension Commissioners) Sydney Mines C. B.
 6. Former trade or occupation Miner

7. (a) Service	Years	Days
		<u>3</u>

	PERIODS	
	From	To
<u>25th Batt.</u>		
<u>40th Batt.</u>		
<u>17th High. Batt.</u>		
<u>C. A. S. C.</u>	<u>in Hosp. 3 months</u>	<u>May 12/15</u> <u>1918</u>

(b) Has he been overseas? Yes 8. Original disease or disability Shin wound
Left foot
 (a) Date of origin Sept 11, 1916 (b) Place of origin Caurecut
 (c) Cause* Shell explosion
 (d) Present disease or disability Impaired circulation left foot

9. Present condition (a) (Important to be a full description of the present disabling condition or conditions only.) "History" must be recorded in Section 10.

[After describing all abnormalities, anatomical and functional, contributing to present disability (see section 11) state whether such disability is directly due to (a) weakness, (b) loss (complete or partial) of any organ or member of its functions, or (c) to the necessity for rest of the body or of some of its parts.]
seen 1/2 in lung below outer tubercles left
foot - seen 1/2 in lung in dorsal region 3
heel no tenderness or pressure



9. Present condition.—(Continued.)

our side of . show scars. No suppurative
lesion or collection. Left ankle, considerable
limitation of rotation of left ankle and
extension of this joint shows tenderness
of anteroposterior ligament tibiotalars and Calcaneum
and Cuboid. Suppurative considerable pain
after walking any distance
walks on outer side of left foot

(b) Are the following systems normal? If not, briefly state abnormality.....

Nervous..... *yes* Digestive..... *yes* Respiratory..... *yes* Cardiac..... *yes*
Genito-Urinary..... *yes* Skin, Middle Ear, Eye or any other part..... *yes*

10. History: (a) of Condition referred to in "a" section 9.

Due to wound by blue spear

(b) 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.

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

Not applicable

12. Was the disability caused or aggravated by negligence, by vice or by misconduct, or 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?.....

Permanent

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

OPINION OF THE MEDICAL BOARD



14. (Continued).

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

No

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

Yes

17. Recommendations

Discharge

[Signature]

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 and either "satisfied" or "not satisfied" struck out.)

I, the undersigned, 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

[Signature]

Signature of soldier examined.

OPINION OF THE MEDICAL BOARD

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

Yes - Category E
(9) Can flex foot to rt angle. extend foot to same extent as rt foot. cannot evert foot, and can only invert foot to half extent of rt foot. The rotary motion of foot is about 1/4 that of right R.F.B.

19. Is the soldier fit for

- (a) General service,
- (b) Service abroad, not general service,
- (c) Home service, (Canada only),
- (d) Temporarily unfit,
- (e) Unfit for service in Categories A, B and C,

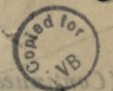
- (Category A) ~~(Yes or No)~~ *no*
- (" B) ~~(Yes or No)~~ *no*
- (" C) ~~(Yes or No)~~ *no*
- (" D) ~~(Yes or No)~~ *no*
- (" E) ~~(Yes or No)~~ *yes*

20. It is certified that the soldier

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

- (b) Does not require treatment.
- (c) Should pass under his own control.
- (d) ~~Should not pass under his own control.~~
(Strike out condition not applicable).

OPINION OF THE MEDICAL BOARD—(Continued).



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

Before signing the President of the Medical Board will read the certificate signed by the soldier, to the soldier, and if no change is indicated will initial the certificate.

A. M. S. Weston Captain
President.
R. F. Johnson ap
Members.

PLACE *Stuyvesant, N.Y.*
DATE *29-V-18*

APPROVED BY
E. M. Moore Major
Assistant Director of Medical Services.
DATE *26-6-18*



APPROVED BY
Director-General of Medical Services.
DATE

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.

OPINION OF THE MEDICAL BOARD

PLACE.....
DATE.....
President.
Members.

19. Is the soldier fit for:
(a) General service
(b) Service abroad, not general service
(c) Home service (Canada only)
(d) Temporarily unfit
(e) unfit for service in (categories A, B and C)
20. 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)

DUPLICATE.

ARMY FORM B. 178.

To be used (a) for recruits enlisting direct into the Regular Army, and (b) for men of the Territorial Force when they are admitted to Hospital.
Army Form B. 178^A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname SUTHERLAND Christian Name John Leo.

TABLE I.—GENERAL TABLE.

Birthplace ... Parish Sydney Mines County Cape Breton

Examined ... { on 13th day of July 191 5,
at Valcartier

Declared Age ... 20 years ... days.

Trade or Occupation ... Miner

Height ... 5 feet 6½ inches.

Weight ... lbs.

Chest Measurement { Girth when fully Expanded 33½ inches.
Range of Expansion 3 inches.

Physical Development ...

Vaccination Marks { Arm ... Right Left
Number

When Vaccinated ...

Vision ... { R.E.—V=
L.E.—V=

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

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

Approved by (Signature) E. Douglas
(Rank) Capt.
Medical Officer.

Enlisted ... { at Valcartier P. Q.
on 13th day of July 191 5.

Joined on Enlistment	Corps.	Regtl. No.
	<u>40th Bn.</u>	<u>4155099</u>
Transferred to	<u>17th Bn.</u>	

Became non-effective by ...

This Medical History Sheet has been compared with the Corresponding Attestation Paper, and entries made in red have been taken from the Attestation Paper.
on ... day of ... 191

(Signature) McQuinn Bell
(Rank)

Table III.—Boards; Courts of Inquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, etc.

Date	Brief details, and signature
2.9.15.	Anti-Typhoid Inoculation E. Douglas
11.9.15.	" "

Table IV.—Service Table.

Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation	Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation

I certify the foregoing to be a true copy of an original entry on a Medical History Sheet of this man.
 C.A.M.C.
 for the Officer in Charge of Records
 Canadian Contingents.

027427494
N.E.

PROCEEDINGS OF A MEDICAL BOARD. 416 25

Dated at Jan 6 1916. 7

No. H15099 Rank Plt Name SUTHERLAND, J

Local Unit 25-45 Overseas Unit - Age 20

Examination held at Hastings
GSW left foot Sept 15th 16.

DISABILITY
Overseas—Local
(scratch one out)

PRESENT CONDITION.

8 months duty in France. Wound healed. Ankle and foot slightly enlarged. Extension and flexion movements slightly limited - but foot inverted and cannot be everted. So full weight comes on external part of foot. He is unable to walk very far without pain.

BOARD RECOMMENDS:— 0 - 3.

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

Signatures:— [Signature] President.

Members

[Signature]
[Signature]

APPROVED
Hastings, Sussex.

7. JAN 1917

Dated at.....1916.

[Signature]

For A.D.M.S.

PROCEEDINGS OF A MEDICAL BOARD

No. Rank Name
Local Unit Overseas Unit Age
Examination held at

DISABILITY
Overseas - Local
(attach one of)

PRESENT CONDITION

BOARD RECOMMENDS

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

Signature: _____

President: _____

Members: _____

APPROVED

Dated at 1916

For A.D.M.S.