

REGIMENTAL DOCUMENTS

NAME

30-8-19
CARNEY, Andrew Patrick REGT. NO. **3083401** UNIT **1/1 Dpt Bu 2nd Regt**

H. Q. FILE NO.

CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505
REFERENCE

NON EFFECTIVE BY

DEATH

Category

DISCHARGE

Category

DESERTION

ATTESTATION PAPER (M.F.W. 23, 133, or 51)

CASUALTY FORM (M.F.W. 54 or A.F.B. 103)

TRAINING HISTORY SHEET (M.F.W. 113)

FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)

REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)

COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)

MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)

DENTAL HISTORY SHEET (M.F.B. 465)

MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)

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1 B P 6-871

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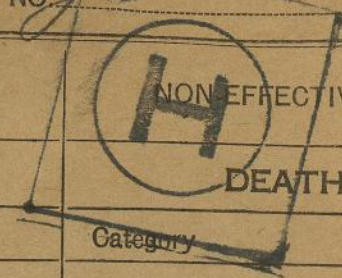
1 M F C-462

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1 P 122

1 D N



07664

Demob

30-23
17-23
9-23

Rank
Yell

Number

3083401

Rank

PL-B

Surname

CARNEY

Christian Name

Andrew Patrick

Units

G.R.

Theatre of War

England

Date of Service

10-7-18

Remarks

Latest Address

G. P. O. Worcester
Mass.

Roll No.

A Page 3866

U.S.A.

GRATUITY (IMPERIAL)

CHRISTIAN NAME

SURNAME

REG. No.

SCHEDULE No.

LINE No.

UNIT RETIRED OR DISCHARGED FROM

PLACE OF RETIREMENT OR DISCHARGE

DATE RECEIVED FROM OTTAWA

IMPERIAL DEPOT No.

DATE RECEIVED FROM REG. DEPOT.

DATE FORWARDED TO OTTAWA



SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

DA: A
09-13
H

1. No. <i>3083401</i>	
2. Rank. <i>Private</i>	
3. Name. <i>Carney Andrew Patrick</i>	
4. Unit. <i>1st Depot Battalion Quebec Regiment</i> <i>C.A.S.C. in England</i>	
5. Date of Discharge	Place
<i>31-7-19</i>	<i>Montreal, P.Q.</i>
6. Reason for Discharge <i>Demobilization</i>	
<p>← H. M. T. S. WINIFREDIAN →</p> <p>EMBARKED 18-7-19</p>	
7. Authority. <i>D.D.#4 R.O. 1420 D.O.Pt.II#213.</i>	
8. Proposed Residence after Discharge. <i>c/o G.P.O. Worcester,</i>	
<i>Mass.</i>	
<i>U.S.A.</i>	
9. CERTIFICATE TO BE SIGNED BY SOLDIER.	
I hereby acknowledge that at the undernoted place and date I received my discharge Certificate	
M. F. W. P. <i>B 39</i>	<i>Montreal</i>
	<i>31st July 1919</i>
	<i>Andrew P. Carney</i>
	Signature of Soldier.
10. CONFIRMATION.	
The discharge of the above named man is hereby confirmed.	
Place	<i>Montreal</i>
Date	<i>31st July 1919</i>
Signature	<i>H. Vancouver</i> Capt.
	(O. C. Discharging Unit.)

LIST OF DISCHARGE DOCUMENTS.

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

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

Group..... *B*

Checked by No..... *171*

Date..... *17 JUL 1919*

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 3083401 (Rank) Private
 Name (in full) Garney Andrew Patricia enlisted in
 the 1st Depot Battalion Quebec Regiment
 CANADIAN EXPEDITIONARY FORCE at Montreal on the eight
 day of April, 1918
 HE served in 22nd Reserve Battalion in England
 and is now discharged from the service by reason of Demobilization.
~~Medical Unfitness.~~

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

Age 42 years 7 months
 Height 5 feet 4 1/2 inches
 Complexion Fair
 Eyes Blue
 Hair Brown

Marks or Scars Nil

Andrew P Garney
 Signature of Soldier

Date of Discharge



A. J. Anderson
 Issuing Officer

Commanding Dispersal Station

Rank

Date 31st July 1919.

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.

FORM OF WILL

I, CARNEY Andrew Patrick (Full Name)

3083401

Regtl. Number..... Serving in 1st DEPOT BN. 1st QUEBEC REG'T.
of the Canadian Expeditionary Force, do hereby revoke all former Wills by me made and declare this to be my last Will.

I devise all my real estate unto

I GOA. NLL Name and Address.

absolutely, and my personal estate I bequeath to

Mrs. Mary Elizabeth O'Brien
12 Commonwealth Avenue,
Worcester, Mass. U.S.A. Name and Address.

Space for the appointment of executor if necessary.....

Invalid unless DATED and SIGNED by soldier himself This 10th day of April A.D. 1918

Andrew Patrick Carney Signature of Soldier.

*Personal estate includes everything except real estate.

Signed and acknowledged by the Testator as and for his last Will in the presence of us both at the same time, who in his presence, at his request, and in the presence of each other have hereunto subscribed our names as Witnesses.

Signature of First Witness..... R. J. Stroughton

Address of Witness..... Gay St. Bldg. Montreal

Occupation of Soldier..... Soldier

Signature of Second Witness..... L. O. Seely

Address of Witness..... Gay St Bldg. Montreal

Occupation of Witness..... Soldier

B.C.M.R.

ATTESTATION PAPER.

No. 3083401

B. 5719

Folio.

H.W.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

H.P.

- 1. What is your surname?..... CARNEY
- 1a. What are your Christian names?..... Andrew Patrick
- 1b. What is your present address?..... 12 Commonwealth Ave, Worcester, Mass
- 2. In what Town, Township or Parish, and in what Country were you born?..... Halifax N.S. Canada, U.S.A.
- 3. What is the name of your next-of kin?..... Mrs. Mary Elizabeth O'Brien
- 4. What is the address of your next-of-kin?..... 12 Commonwealth Ave, Worcester, Mass. USA
- 4a. What is the relationship of your next-of-kin?..... Sister
- 5. What is the date of your birth?..... Decr 20th 18 76
- 6. What is your Trade or Calling?..... Machinist
- 7. Are you married?..... Single
- 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?..... U.S.A. Navy 4 years 3 yrs U. S.A. Army
If so, state particulars of former Service.
- 11. Do you understand the nature and terms of your engagement?..... Yes
- 12. Are you willing to be attested to serve in the }
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? }..... Yes
- 13. Have you ever been discharged from any Branch of His Majesty's Forces as medically unfit? .. No
- 14. If so, what was the nature of the disability?..... Not applicable
- 15. Have you ever offered to serve in any Branch of His Majesty's Forces and been rejected?..... NO
- 16. If so, what was the reason?..... Not applicable

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, CARNEY Andrew Patrick, 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.

Andrew Patrick Carney (Signature of Recruit)

Date April 8th 1918 . S. H. Shughlen (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, CARNEY Andrew Patrick, 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.

Andrew Patrick Carney (Signature of Recruit)

Date April 8th 1918 191 . S. H. Shughlen (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 Montreal P.Q. this 8th day of April 1918 191 .

J. L. Shum (Cap t) (Signature of Justice)

M. F. W. 23. 750 M.-1-17. H. Q. 1772-39-341.

N.B.—ATTENTION IS DRAWN TO THE FACT THAT ANY PERSON MAKING A FALSE ANSWER TO ANY OF THE ABOVE QUESTIONS IS LIABLE TO A PENALTY OF SIX MONTHS' IMPRISONMENT.

Description of **CARNEY Andrew patrick** on Enlistment.

Apparent Age **41** years months.
 (To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height **5** **4 1/2** ft. ins.

Chest measurement { Girth when fully expanded, **32** ins.
 Range of expansion **3** ins.

Complexion **Medium**

Eyes **Blue**

Hair **D. Brown**

Religious denominations { Church of England
 Presbyterian
 Methodist
 Baptist or Congregationalist
 Roman Catholic **XXXXXX**
 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).

F. D. = **20**
 L. D. = **20**
 R. EAR
 L. EAR **OK**

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* for the **Canadian Over-Seas Expeditionary Force.**

Date **M. D. No. 4** 191

Place **APR 11 1918**

*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:—

"B" Fit for Service Abroad (but not for General Service)

Declared **FIT** by **MEDICAL BOARD**
MOBILIZATION CENTRE, M. D. #4

W. C. ...
 Medical Officer.
J. ...
 President, S. I. B.



CERTIFICATE OF OFFICER COMMANDING UNIT.

CARNEY Andrew patrick

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

W. C. ... Major. (Signature of Officer)
 for O. C. 1st Depot Bn. 1st Quebec Regiment.

Date **April 8 th 1918** . 191

THIS FORM WILL BE USED FOR ALL RANKS

MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

- 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 invalid to the "Statement," page 3. The President of the Board of Medical Officers is responsible for the proper completion of sections reserved for recording the "Opinion of the Medical Board."
- In answering the questions, Medical Officers will carefully obtain and record the invalid's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the invalid concerned, from witnesses, or from documents, Regimental or otherwise.
- Special care is required in answering question 9. Read the questions carefully. All questions must be answered.
- If space provided under any section is insufficient add another sheet. Such 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 7, 8, 9 and 10 be communicated to the invalid, 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.

21 JUN 1919

STATION M.C.H. EPSOM DATE

1. 1 (a) Unit 23 RES. Q.R.D. (b) Regimental No. 3083401 (c) Rank PTE
 (d) Surname CARNEY (e) Christian name ANDREW P.
 (f) Home address 4 HAYWARD ST WORCESTER MASS. U.S.A.
 (g) Next of Kin MRS. J.J. O'BRIEN (h) Relationship SISTER
 (i) Address of Next of Kin SAME

2. Age last birthday 42 Date of birth 20-12-1876

3. Enlistment, or Appointment (if an Officer) (a) Place MONTREAL (b) Date 8-4-1918

4. Personal description:

(a) Height 5' 4 1/2" (b) Weight 116 ESTIMATE (c) Complexion FAIR
(stripped)
 (d) Colour of hair BROWN (e) Colour of eyes BLUE (f) Identification marks, Scars, etc.
NIL

5. Former trade or occupation MACHINIST

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).	Years	Days
	<u>ONE</u>	<u>62</u>

PATIENTS STATEMENT

	PERIODS	
	From	To
Canada	<u>8-4-1918</u>	<u># 2-7-1918</u>
England.....	<u>14-7-1918</u>	<u>T.O.D.A.T.E.</u>
France or other theatres of War.....		

7. Original disease, or injury CHRONIC GASTRITIS

(a) Date of origin 1912 (b) Place of origin CANADA
 (c) Cause CONSTITUTIONAL

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

CHRONIC GASTRITIS - Pain in belly, worse at night
Bacchahe - loss of appetite - constipation

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

Subj - Development and nutrition only fair. Weight now stripped 115 lbs. Tenderness in epigastrium and over the gall bladder. Spleen and liver not palpable. Gums are bluish and anemic, teeth in very poor condition.

Subj - Pain in belly, worse at night
Bacchahe
Loss of appetite
Constipation

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

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

Special Senses..... no..... Respiratory System..... no..... Integumentary System..... no

Disturbances of Mentality..... no..... Digestive System..... no..... Muscular System..... no

Osseous and Joint Systems..... no..... Any other general condition..... no

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

pt. states that he had lead poisoning in 1908 - and that from 1912 he has been troubled off and on with indigestion ever since. Last March he became worse and was sent to hospital and diagnosed cholecystitis. He has improved greatly in Hosp. and home Hosp.

10.—(b) (Here give a complete history, as obtained from invalid, with dates of origin, of any affection from which the invalid, has suffered either prior to or since enlistment, and not included in Section 10 (a).)

pt. states no other illness

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

none

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

Yes

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

No - weight on enlistment 112 lbs.

12. Was the disability caused, or aggravated; (a) by intemperance, or improper conduct; or (b) by unreasonable refusal to accept treatment?

No

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

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

Permanent

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

Hospital and Gen. Hosp.

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

No

(If the answer is "yes" state nature of treatment required and probable duration)

16. Can the former trade or occupation be resumed?

Yes

(If not, briefly state why)

17. Recommendations

Wm. B. ...
Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

(Sections 7, 8, 9 and 10 are to be read to the invalid and either "satisfied" or "not satisfied" struck out).

I, the undersigned, *A.P. Larry* 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]

3083401 A.P. Larry Pfc Rank.
Signature of invalid examined.

OPINION OF THE MEDICAL BOARD

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

"We Concur and agree with opinion of Medical Officer"

19. Is the invalid fit for

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

20. It is certified that the invalid

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

N.A.

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

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

Boarded for return to Canada with a G.T. Tele. 9085-11-1111.

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

PLACE *Grosvenor Square* *H. Mac Dermott* President.
A. Moody Members
 DATE *23 JUN 1919*

TO BE COMPLETED WHEN TREATMENT IS REFUSED

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

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

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

APPROVED BY *[Signature]*
 Assistant Director of Medical Services.
 Captain, C.A.M.C.
 DATE.....
 for A.D.M.S., Canadians, London Area

APPROVED BY
 ASSISTANT DIRECTOR OF MEDICAL SERVICES
 Director-General of Medical Services.
 CANADIANS, LONDON AREA.
 DATE *JUN 25 1919*
 13, BERNERS ST. LONDON, W.1

DUPLICATE

MILITARY SERVICE ACT, 1917.

MEDICAL HISTORY SHEET.

IMPORTANT.—If the man's name does not appear upon the schedule of men reporting for service, or if he has not made an application for exemption or a report for service, or, although having made one, he does not know the number, he will be instructed that the copy of this medical history sheet (which will be handed to him) must be attached by him to a report for service or claim for exemption which he may make on application to any Postmaster in Canada, or be sent by him after he has noted upon it the number on the receipt he obtained from the Postmaster to a Registrar or Deputy Registrar under the Military Service Act. In any event the duplicate medical history sheet will be sent by the Medical Board to the District Officer Commanding unless instructions have been given by the latter to forward it direct to a Registrar or Deputy Registrar.

- 1. Surname GARNNEY Christian name Andrew Patrick
2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule B.C.M.R.
3. Consecutive number on schedule of men reporting for service (if he appears on it)
4. Address (including street and number, if any) 12 Commonwealth Avenue, Worcester, Mass. U. S.A.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 10th day of April 1918, 1917, by the undersigned medical board sitting at Montreal P.Q.

- 5. Age as stated 41 Years 4 Months
6. Apparent age
7. Height 5 Feet 3 1/2 Inches
8. Weight 112 Pounds
9. Chest measurement Minimum 34 Ins. Maximum 35 Ins.
10. Complexion medium
11. Physical development Good
12. Smallpox marks
13. Number of vaccination marks Right arm Left arm
14. When vaccinated last
15. Distinctive marks and marks indicating congenital peculiarities or previous disease

16. Slight defects but not sufficient to cause rejection

The man denies having had Rheumatism Tuberculosis Syphilis We find no evidence of past Rheumatism Tuberculosis Syphilis (Strike out disease admitted or suspected.)

We have examined the above named man in accordance with the C. E. F. Regulations for medical examinations, and he is placed in Category 2

- 17. (a) Vision R. L. (b) Hearing. R. L.

H. Aubreyman President. J. P. Blum Member.

Table with columns: Date, Result, VACCINATIONS, Date, Result, ANTI-TYPHOID INOCULATIONS, ETC. Includes entries for May 5, 1918 and April 23, 1918.

Joined 8th day of April 1918, 1917 at Montreal P.Q.

Table with columns: CORPS, REG'TL NUMBER, HABITS, DATE. Includes entry: 1st DEPOT BN, 1st QUEBEC REG'T, 3083401

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Table with columns: STATION, DATE, DISEASE, RESULT. Includes entry: JUN 24 1918, chr folliculitis pain in belly.

N. B.—This sheet is 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.

Signature of Man

Christian Name Andrew Patrick

GARNEY

Surname

STATION.	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				
Ryeford Mills Notts.		14	3	19	2	4	19	Infl of Gall Bladder & Ducts. 574.	20	7 years history of Indigestion. P.S acute Pain tenderness over Gall Bladder. No Colic. No jaundice. Gall Bladder appear- enlarged Temp 99.0° F Cleared up X-ray: Negative for intestinal Stasis. no Malacena. Trusts Buxton Hospital Notts	Andrew Garney
Franklin, Can. Spec. Hosp Buxton, Derbyshire		2	4	19	24	4	19	do	23	No symptoms or signs of inflammatory trouble in Abdomen Examination neg throughout Transfer to Epw	Andrew Garney
W. H. H. H. H.		24	4	19	25	6	19	do	64	Older man does not look well at all very pale & has yellowish tinge to the face Has lost in weight in past two years & history of vomiting blood at times of Bowel & 1/2 transferred to Epwington 27/4/19	Andrew Garney

CANADIAN ARMY DENTAL CORPS, O.M.F.C. DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

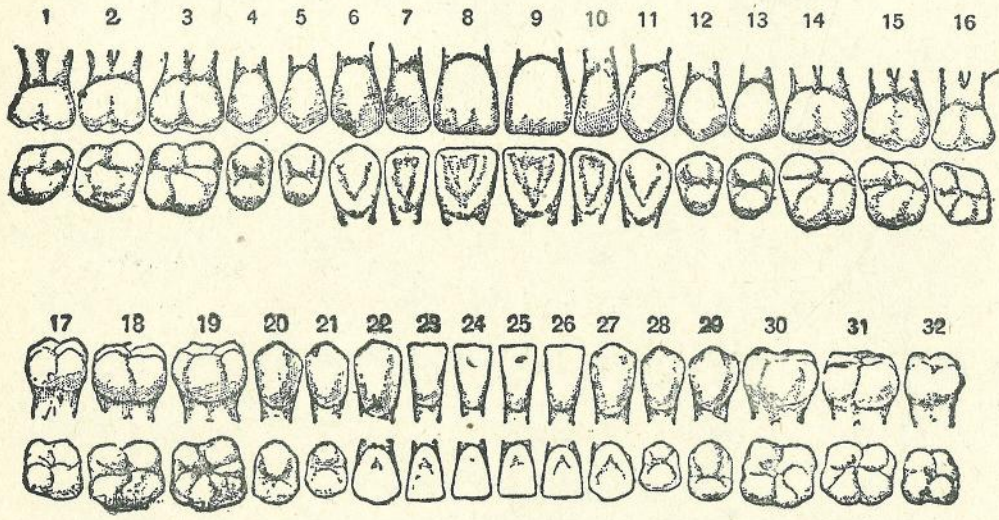
F
DIRECTIONS TO
DENTAL OFFICERS

NAME OF SOLDIER (Block Letters) CARNEY A.P.

REGIMENT C.A.S.C. RANK Pte. No. 3083401

Date of Examination in England 8/7/19 Date of Examination in France _____

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



PRESENT DENTAL REQUIREMENTS

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

HAS HE EVER REFUSED DENTAL TREATMENT? No.

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

- (a) In Canada
- (b) In England 73
- (c) In France

R. Simpson Capt

A. D. D. S. M. D. No. 4

Signature of Dental Officer J. Ross Capt.



**A. & D.
CARD**

_____ HOSPITAL.

AT _____

A. & D. No. 1453 PL. OF ACTION _____

RANK Pt 3083401 UNIT 23rd Can. Res SICK OR WOUNDED _____

NAME Barney A.P. AGE 42 RELIGION CofE

PLACE IN HOSPITAL G.B.

DIAGNOSIS Cholecystitis

ADMITTED 2/4/19. FROM Mel Hosp. Ripon

DISCHARGED _____ TO _____

TRANSFERRED 27-4-19 Mel Hosp. Ripon

SERVICE AT HOME 12/12 IN FIELD _____

RESULTS _____

24

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

(P.T.O.)

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

M. F. W. 54. (A. F. B. 103.

500M.—9-16

H. Q. 1772-39-9'0.

Casualty Form—Active Service.

Unit, Regiment or Corps. *1st. Sgt. Co. 1st. Q. Regt.*

Regimental No. *3083401* Rank *Pte* Name *Carney, Andrew Patrick*

C. E. F.

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 (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				
<i>11.9.19.</i>	<i>Q. R. D.</i>	<i>S.O.S. to C.S.D. (Buxton)</i>		<i>11.9.19.</i>	<i>D.O. 208.</i>
<i>9.10.19.</i>	<i>Q. R. D.</i>	<i>Pt. II D.O. 208 D/11.9.19, insofar as it refers to the m/sn. soldier, is hereby cancelled.</i>		<i>9.10.19.</i>	<i>A.O. 13. Dunman Lieut. for D.O.R.</i>

(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				

ANDREW P.ATRICK.Name BARNEY Rank PteReg. No. 3083401Unit 23 RES.Next of Kin W. S. A.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
<u>1919.</u> 15-3	<u>Smith Hosp</u>	<u>Ripon</u>	<u>Appendicitis</u>	<u>C473</u>		<u>8659</u>
<u>3-4</u>	<u>Gran Barr St</u>	<u>Hosp</u>	<u>do</u>	<u>C479</u>		<u>9368</u>
<u>25-4</u>	<u>Inf Barr</u>	<u>Hosp</u>	<u>do</u>	<u>C505</u>		<u>10133</u>
<u>29. 6</u>	<u>161 C. 7</u>	<u>Hosp</u>	<u>do</u>	<u>C555</u>		<u>11436</u>
<u>11-7</u>	<u>discharged</u>	<u>do</u>	<u>do</u>	<u>C556</u>		<u>4575</u>
<u>Ref. C555</u>	<u>C563</u>	<u>Rept- 7 of 26 to</u>	<u>reliability</u>	<u>C569</u>		<u>9471</u>

Convalescent Hospital,

Woodside Park, Epsom.

HOSPITAL.

A. & D.
CARD

AT.....

A. & D. No. PL. OF ACTION

RANK *4th* REG. NO. *3083401* UNIT *23 Res.* SICK OR WOUNDEDNAME *Carney A.P.* AGE *42* RELIGION *R.C.*

PLACE IN HOSPITAL

DIAGNOSIS *cholecystitis con*ADMITTED *24.4.19* FROM *Gen. Spec. Boston*

DISCHARGED TO

TRANSFERRED *16 99th. Crispington* *28.6.19*SERVICE AT *Home* *1 yr.* IN FIELD *12* *By*

RESULTS

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

177
REMARKS.

3.6.19 Man does not look well, very
pale and has ~~spots~~ yellowish
tint to the face. Has lost in
weight in past year of history
of vomiting illness at times.

27.6.19 Transfer to Crispin

a. m. Blakely

Capt.

KR Rank Name **GARNEY Andrew Patrick.** Reg'l No. **3083401**
 Unit **71st Dft 1st Bn. 1st QUE** If in perm. Corps, }
 What Unit? } Married or Single **Single**
 Place and Date of Enlistment **Montreal 8th April 1918** Place of Birth **Halifax Canada.**
 Name and Address, Next-of-Kin **Mrs Mayy Elizabeth O'Brien.**

12 Commonwealth Ave, Worcester, Mass. USA. Relationship **Sister.**

Assigned Pay Monthly \$ Payable to

Relationship

Separation Allowance \$ Payable to

Relationship

Discharge, Date and Place Reason Character

W/E. R.B. No. 53947
 CAN. OR
 X 345

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.				
QUEBEC		Arrived in England		15-7-18	S/S OXFORDSHIRE
25.7.18.	23 Res	L.O.S.	Bickhott.	15.7.18	D.O. 206.
31-5-19	" "	S.O.S. to Q.P.D.	(Pte) Ripon	31-5-19	D.O. 131 80139 S/PD 17-6-19
7-7-19	W/S B.D.	T.O.S. on posting from G.S.H.	Witley.	5-7-19	D.O. 161
8-7-19	M. Wing	T.O.S.	"	7.7.19	89 D.O. 163 of 9.2.19 case 88
		Canada 98 F 35		18.7.19	(and Sail)
11-9-19	QR D	S.O.S. to C.O.D. Buxton	Witley	11-9-19	Do 208
9 10 19	RECORDS	SOS TO CANADA	Witley	18-7-19	A0.4
7.10.19	M. Wing	P20-208 of 11/9/19 is Am'd to Read as S.O.S. on Pro to Com	Witley	18.7.15	A.O.3.

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.				
9.10.19.	Q. R. 20.	Pt. II. DO. 208 D/11. 9.19, insofar as it refers to the m/w. soldier, is hereby cancelled.		9.10.19.	A.D. 13.

BOARD OF PENSION COMMISSIONERS FOR CANADA

Aug. 25th. 1919.

Rank Private. Date of att. April 9th. 1918
Regimental Number 5082402 Date of Discharge July 31st. 1918.
Unit C.A.S.C. in England.
Name GARNEY Andrew Patrick.
Address c/o C.P.O. Worcester Mass. U.S.A.
B.P.C. District Office Montreal D.D. No. 4.

Attestation Form:-

Weight on enlistment: 112 pounds

Marks of Identification: None.

Rank at attestation: Private.

Casualty Form:-

Disease: Chronic Gastritis. Existed previous to Enlistment;.

Miscel.: Hosp. 107 days. Inflammation of Gall bladder.

Conduct Sheet:-

Veneral disease: Nil

Conduct: Good

Self inflicted wound: Nil

Surname

Christian Name or Names

Reg. No.

CARNEY

A.P.

3083401

Rank 1. Pte.
2.
3.
4.

Unit 1. Que. 23R
2.
3.
4.

Cas. List.	Hospital and Diagnosis.	Date
20-3-19 C473	M.H. Ripon Appendicitis	15-3-19
8.4.19 - C489	Granville Spec. Buxton & Cholecystitis	3.4.19.
30.4.19 6505 F.	M.C. Woodcote Hk	25.4.19
2-7-19 C.555	16 C.E. Orpington M.D. "Q"	29-6-19
11-7-19 6.563	Mis-	4-7-19.
17-7-19 6.568	Note: Re. 6.563 report (N.Y.D.) changed to Debility. R	

A.M.D. & DEPT.

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

Fill in only Unit, Number, Rank and Name.

M. F. W. 54. (A. F. B. 103.

500M.—9-16

H. Q. 1772-39-920.

HQ

Casualty Form—Active Service.

Unit, Regiment or Corps 1st DEPOT BN. 1st QUEBEC REG'T.

Regimental No. 3083401 Rank Private Name CARNEY Andrew Patrick

C. E. F.

Enlisted (a) 8-4-18 Terms of Service (a) CRF Service reckons from (a) 8-4-18

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) Machinist

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				
		<i>Embarked</i>	<i>Canada</i>	<i>26-6-18</i>	<i>S. M. J.</i>
		<i>Arrived</i>	<i>Liverpool</i>	<i>15-7-18</i>	<i>Oxfordshire</i>
25-7-18	23rd Can Res. Bn.	Taken on strength from Canada.	Bramshott	15-7-18	D.P.11 O.206
25-7-18	do	On Command Segregation Camp, Frensham Pond.	do	15-7-18	D.P.11 O.206
4-8-18	do	On command Segregation Camp ceases.	do	13-8-18	D.P.11 O.223
12/12/18	23rd Can Res Bn	On Command to No 8 Detachment C.O.C. Bramshott	do	4/12/18	SP5C 346 T. & ADJUTANT, 3rd CANADIAN RESERVE BATTN.
5-12-18	O.C. No 8 Det.	On Command No 8 Det. C.O.C.	Bramshott.	5-12-18.	DO Pt 11 No 58 d/5/12/18.
18-2-19		Cons to be attached	Bramshott	19-2-19	DO Pt 11 No 12 d/19-2-19. <i>Willshawley</i>

(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				
31-5-19	23rd CAN. RES. BN.	POSTED TO 1st. QUE. REG. DEPOT. <i>Com Genl of Quebec</i>	<i>Repor</i>	01-5-19	D.P. H. G. No. 131 <i>for O.C.</i> <i>W. H. L. M. G. No. 131</i>
		<i>16-779 S.O.S. OF C.M.F.C. ON PROCEEDING TO CANADA.</i>		<i>20 97-18-1-19</i>	
		<i>for discharge</i>			
		<i>J. Melancon Lieut.</i>			
		<i>for O.C. M. Viny C.C.E.</i>			
				18-7-19	
1-8-19	O/S	T.O.S. D.D.#4 Disp.Stn."F" Montreal			D.O.Pt.II#213.
1-8-19		S.O.S. D.D.#4 Demob.			31-7-19.O.Pt.II#213.
					R.O. 1420.
		<i>J. G. W.</i>			
		Lieutenant, Assistant Adjutant, District Depot No. 4			

H.M.T.S. WINIFREDIAN
 EMBARKED 18-7-19

H.M.T.S. WINIFREDIAN
 EMBARKED 12-7-19

* Strike out whichever inapplicable.

ASSIGNED PAY.	ENGLAND or CANADA.	SEPARATION ALLOWANCE.	ENGLAND or CANADA.
EFFECTIVE DATE:-		EFFECTIVE DATE:-	
AMOUNT:-		AMOUNT:-	

NAME:- *CARNEY Patrick Andrew*
 NUMBER:- *3093401*

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

PARTICULARS OF RANK OR APPOINTMENT		
AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
<i>206 Ban.</i>	<i>1.7.18</i>	<i>206</i>

UNIT AND TRANSFERS

ORIGINAL UNIT: *206 Ban, 1 206, 1 206.*

DATE ACCOUNT FIRST OPENED:- *1.7.18*

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S P'D	UNIT TRANSFERRED TO
<i>206</i>	<i>2/9/18</i>	<i>1.9.18</i>	<i>20.9.18. 206 Res Case G.</i>

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

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
24/5	6533		9.73			Lodge	24811
6/6	1168		4.87			sub	3042
26/6	2421		9.73			R.P.E.	21769
24/6	sub		1.22				
4 7/19	6647		4.87				

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
<i>206</i>	<i>1.00</i>	<i>10</i>		

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
<i>206</i>	<i>1.00</i>	<i>10</i>		

PARTICULARS OF RENDERING NON-EFFECTIVE: *30th To Ban 31/7/19 - N.R. 9 11534 - Admitt 8 7/19 with mtd 4 "m"*

MONTH	PARTICULARS	Cr. 1	Cr. 2	PARTICULARS	Dr. 1	Dr. 2	Dr. 3	Dr. 4	BALANCE	DEFERRED	SEPARATION
<i>30/6/18</i>	<i>Doc from Ban</i>								<i>2346</i>		
<i>July</i>	<i>PP</i>	<i>24/10</i>		<i>AR 1437 Furnham 22-7-18</i>	<i>487</i>				<i>1853</i>		
<i>Aug</i>	<i>PP</i>	<i>31/10</i>		<i>AR inv. 20th Res Bn 24/8/18</i>	<i>487</i>				<i>8186</i>		
		<i>31/10</i>		<i>" 1282 23rd Res. 30/8/18</i>	<i>487</i>				<i>7699</i>	<i>30</i>	
<i>SEP</i>	<i>P.P.</i>	<i>34/10</i>			<i>974</i>				<i>10999</i>	<i>45</i>	
		<i>33</i>		<i>175N1372 ✓ 14/9</i>	<i>2920</i>				<i>8079</i>		
		<i>33</i>		<i>20 BN 1510 ✓ 30/9</i>	<i>730</i>				<i>7349</i>		
<i>Oct</i>		<i>34/10</i>			<i>3650</i>				<i>10759</i>		
		<i>34/10</i>		<i>AN 1647 ✓ 17/10</i>	<i>973</i>				<i>9786</i>		
		<i>34/10</i>		<i>AN 1807 ✓ 31/10</i>	<i>730</i>				<i>9056</i>		
<i>Nov</i>		<i>34/10</i>			<i>1703</i>				<i>12356</i>		
<i>Dec</i>		<i>33</i>							<i>15766</i>		
		<i>34/10</i>		<i>AR 1937 22BN 15</i>	<i>913</i>				<i>14793</i>		
<i>Jan</i>		<i>34/10</i>		<i>AR 1107</i>	<i>730</i>				<i>18203</i>		
		<i>34/10</i>		<i>DU 2935 Det Bakt 20</i>	<i>4867</i>				<i>17473</i>		
									<i>12606</i>		

UNIT AND TRANSFERS

ORIGINAL UNIT: *206, 1st Bn, 12th*
 DATE ACCOUNT FIRST OPENED: *1-7-18*

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S'D	UNIT TRANSFERRED TO
206	2/9/18	1-9-18	20.9.18. <i>Case G.</i>

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

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
24/5	6533		9.73			<i>Lodge</i>	248.11
6/6	168		4.87			<i>ent</i>	3042
26/6	5421		9.73			<i>R.P.C.</i>	217.69
24/6	sub		1.22				
4/1/19	6649		4.87				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1.00	10		

PARTICULARS OF RENDERING NON-EFFECTIVE: *To ban 31/7/19 - N.R. 911534 - Blkett 8 7/19 With mtd 4 "m"*

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
<i>30/6/18</i>	<i>pos from ban</i>								2340		
<i>July</i>	<i>PP</i>			<i>AR 1437 Furnham 22-7-18</i>	487				1853		
		3410							5263	15	
<i>Aug</i>	<i>PP</i>			<i>AR inv. 20th Res Bn 24/8/18</i>	487				8186		
		3410		<i>1282 23rd Res. 30/8/18</i>	487				7699	30	
		3410			974				10999	15	
<i>SEP</i>	<i>P.P.</i>			<i>17571372 ✓ 14/9</i>	2920				8079		
		33		<i>20 BN 1510 ✓ 30/9</i>	730				7349		
		3410			3650				10759		
<i>Oct</i>				<i>AN 1647 ✓ 17/10</i>	973				9786		
				<i>AN 1807 ✓ 31/10</i>	730				9056		
		3410			1700				12356		
<i>Nov</i>		33							15766		
<i>Dec</i>		3410		<i>AR 1937 22nd Bn 15/11</i>	973				14793		
<i>Jan</i>		3410		<i>AR 1107</i>	730				18203		
				<i>DU 2935 Det Bkett 14/12</i>	4867				17473		
		10120			6570				13606		
<i>Feb</i>		3080							15686		
				<i>55/3248 Bkett 13/1</i>	1460				14226		
				<i>99/AN 1503 12th Bn 29/1</i>	1217				13009		
		3410			2675				16419		
<i>March</i>				<i>127/263 Bkett 12/2</i>	1217				15202		
		649		<i>134/3046 upon 27/2</i>	487				14715		
				<i>155/3130 vales 14/3</i>	1947				12768		
		6490			6348						

NUMBER	RANK	NAME		MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4.	BALANCE	DEFERRED	SEPARATION
													12768		
all						33							16068		
May						3410							19478		
								54/128 list 9/4	487						
						6710		54/80 v 5/4	487				18504		
						6710		58/3405 Larson 25/4	973				17531	165	
									19477						
								CP 7315-1 5-6-19 London 6	487						
June						33							20831	180	
July						3410							24241	195	
						Int on 89							24811		
								39/3421 Eps. 26/6	973						
								44/6533 ✓ 26/5	973						
								49/1717 ✓ 27/6	122						
								50/168 ✓ 5/6	487				21769		
						1280			3044						
								6649 47 ov. E 30	487				21282		
									487						

S.O.S. 18²/₁₉ 2098

June
July

33
34 10
Int on DP 570

CP 7315-1 5-6-19 London 6 4 87

20831 180
24241 195
248 11

39	3421	Eps.	26/6	9 73
44	6533	✓	26/5	9 73
49	1717	✓	27/6	1 22
50	168	✓	5/6	4 87

7280

21769

6649	42	ovp. E-30	487
			487

21282

S.O.S. 187/19 1998

4 * CARD NO.

SURNAME.

Carney

CHRISTIAN NAMES

Andrew Patrick

REGL. NO.

3083401

RANK

Pvt

of 500 208 cancelled by 801309-10-19 G. Repl. PPO

R.O.P. Plus. 30/7/19
Demol. FOLL.
W-0. 213 1/8/19 #4

UNIT

1st. Que. Regt. 1st. Inf. Br.

10th
S. Apr. 8. 1918

FORMER CORPS

U.S. Navy (4 yrs.) U.S. Army (3 yrs.)

D.O. Part. II. Nov. 1912

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

O'Brien, Mrs. Mary Elizabeth.

RELATIONSHIP TO SOLDIER

Sister

ADDRESS

*12 Commonwealth Ave.,
Worcester, Mass., U.S.A.*

COUNTRY OF BIRTH

Canada, Halifax, N.S.

DATE

Dec. 20th, 1896.

PLACE OF ATTESTATION

Montreal, P. Q.

DATE

Apr. 8th, 1918.

*0/826-6-18 1298
3*

*W/C 28/7/19 379p
21/10*

MARRIED

SINGLE

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

Carney A P.

REGT. NO.

3883401

RANK AND UNIT

NEXT OF KIN

CABLE

NATURE OF CASUALTY

No.

DATE

LIST NO.

HOSPITAL

DATE OF
ADMISSION

REMARKS

C473 (1)
 C489 (1)
 C505 (1)
 C555 (1)
 C563 (1)

LIST NO.	HOSPITAL	DATE OF ADMISSION	REMARKS
C473 (1)	Mil Ripon	15-3-19	Appendicitis
C489 (1)	Grenville Central Ripon	3-4-19	" " & Cholecystitis
C505 (1)	Mil Connaught Ripon	25-4-19	" " " " " "
C555 (1)	16 Con Leu Orpington	29-6-19	N.Y.D.P.
C563 (1)	discharged	4-7-19	N.Y.D.P. debility as per C568

Duty 4/7/19.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
Year.	Unit.	Age.	Service.	
	3073401	Pa	Larney	G. R.
	23 Cav Res.		43	12 Aug 12.
Station and Date.	Disease			
2.	Cholecystitis (Acute)	Did not have an operation. No permanent pain still. No D.		
2 17/4/19.	Appetite fair	Obvious jaundice. 7.5. Persistent pain in region of gall bladder.		
5/3/19.	Complaint of pain around umbilicus	7.5. Condition unchanged.		
2 6/5/19	My PT2.			
3/6/19		Man does not look well. Is very pale and has yellowish tinge to the face. Has lost in wt in past yrs, and history of vomiting blood at times.		
		Bearded I.T.C.		
27.6.19.		Transferred to ^{6"} Crispington ^{6th} Hussars g.		
Mechanism	None a. London.			

Lab. 30-4-18

Station
and Date.

Report No. _____

Army Form W. 3212.

(In books of 100)

Regt. No., Rank and Name } 30 83041 Plt-Laney ap Age 42 Corps 26 Cavies.

Disease _____ Hospital Worcester

To Officer i/c Laboratory. 84/19 Ward Unit 84

Please carry out an examination of the accompanying specimen of urine

with special regard to routine plant

Nos. of previous Reports (if any) _____

In Pathological Reports a résumé of clinical history, treatment or progress since last report should be given.

Date 19-5-19 O. i/c _____ Ward _____

LABORATORY REPORT.

COLOR	<u>Amber</u>
REACT.	<u>Acid</u>
SP. GR.	<u>1028</u>
ALB.	<u>0</u>
SUGAR	<u>0</u>

7

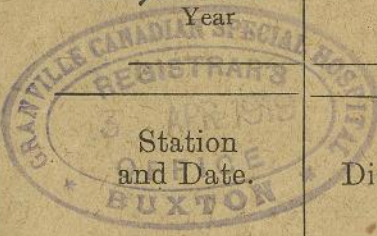


Date of Examination _____ O. i/c Laboratory. Whitehead

Low G.B.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book. <i>T 453</i>	Regimental No.	Rank.	Surname.	Christian Name.
	<i>3083401</i>	<i>Pt</i>	<i>Carney</i>	<i>A.P.</i>
Year	Unit.	Age.	Service.	
	<i>23rd Can. Res.</i>	<i>42</i>	<i>12/12</i>	



Station and Date.	Disease
	<i>Cholecystitis</i>

Occupation	<i>Mechanic</i>
Enlisted	<i>Apr. 4th 1918 Montreal</i>
To England	<i>July 1st 1918</i>
To France	<i>Ad.</i>

4/4/19 Pre-ill - lead poisoning (working as paint-scaler) 1908. Hosp. 1/2 with colic typhoid malaria 1899. Hosp 3 mos. Recovery.

Presill - In 1912 first troubled with indigestion. Attack lasted 10 days. Has had bad attacks off & on since - About first of March 1919. Complained of pain in epigastric & R. inguinal regions & in back, especially on R. side. Vomiting - Anorexia. Constipated. Is better now but still complains of pain in region of R. kidney - eating better - Constipated - no vomiting.

Exam - Fairly well nourished - Heart & chest - apparently normal - abdomen - slight degree of distension in upper part of abdomen - Gurgling in region of stomach. Belly soft & relaxed - no masses - Tenderness on pressure at lower border of ribs in Hypochondrium (especially on inspiration) Soft mass is felt in this region on inspiration.

* The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.
(6365) W2944/P.138 2,950,000 1/18 McA & W Ltd Forms I. 1237/13 (E 2349) [P.T.C]

Station
and Date.

Lower border of ribs, liver or spleen
not felt - Tenderness over both kidneys
especially R. - in front & behind.
Slight tenderness on deep pressure
in appendiceal region - some
dilated veins along lower border of ribs.
Next - Uinalysis - Spec. Diet - laxatives
Non-urinary.

3.4.19

Lab Report. Sp. Gr. 1016 Reaction Acid
Consistence Clear Colour L.A. Albs. & Sugar - nil
Sgd. K.D. Simon Capt. Case

11 APR 1919

Abdomen - soft, non-resistant, relaxed
Liver or spleen cannot be felt.
Tenderness on palpation over right
hypochondrium and epigastrium
but no masses can be felt.
Kidney cannot be palpated
No costal crepitus.
R. Paraffin oil ʒiv iis. Am

21 APR 1919

no symptoms or signs of any inflammatory
process in abdomen. Exam in neg
throughout. Transfer Epsom
Shurlock

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No. 3083401.	Rank. Pte.	Surname. Carney	Christian Name. A. P.
Year 1919.	Unit. 23 rd Hq. Canadian Bn.		Age. (42 yrs)	Service. 12 yrs.
Station and Date.	Disease Infl of Gall Bladder and Duct. 546.			
Rifon 1/4/19.	History of 7 years indigestion.			
	Admitted (Mily Hope) Rifon 14/3/19 with severe			
	pain & tenderness over Gall Bladder. Gall			
	Bladder appeared Enlarged. Temp 99° F.			
	No Colic. No Jaundice.			
	Cleared up in about 7 days.			
	x Ray: negative for Intestinal Stasis. No			
	Malacena.			
	to Buxton Hoedoe Hope 2/4/19.			
	M. Hope Cpt Rifon			

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

Station
and Date.