

# C.E.F. REGIMENTAL DOCUMENTS

NAME **CARPENTER, HAMILTON**

REGT. No. 53550

UNIT 18 BN

...H. Q. FILE No 08136

[illegible][illegible]

War Service Badge

War Service Badge.

This space to be for numbers

Class **A** No. **84327** Issued

Class **B** No. **52821** Issued.

## Proceedings on Discharge.

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

No.	53550
Rank	SGT.
Surname	CARPENTER,
Christian name	Hamilton
NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.	
Corps (Squadron, Battery or Company)	18th Bn., C.O.M.F.
Date of discharge	APR 9 1919 NO 98 8/4/19
Place of discharge	LONDON, ONT.
1. DESCRIPTION AT THE TIME OF DISCHARGE.	
Age.....27.....years.....months.	Descriptive marks  G. S. W. RIGHT SHOULDER THIGH AND LEG
Height.....5.....feet.....4½.....inches.	
Complexion.....DARK	
Eyes.....BROWN	
Hair.....BROWN	
Trade.....Laborer	
Intended place of residence (To be given as fully as practicable.)	1835 Palm Wood Ave., Toledo, Ohio, U.S.A.
2. The above-named man is discharged in consequence of	
MEDICALLY UNFIT	
Authority for discharge.....	
N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.	
To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.	3. Conduct and character while in the service have been, according to the records, etc.
	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.)

M. F. B. 218.

200M.—5-18.  
H. Q. 1772-39-113.

(OVER)

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, and that I have received my permanent discharge certificate.

(Place) **LONDON, ONT.** *H. Carpenter* (Signature of Soldier.)

(Date) **APR 9 1919** *[Signature]* (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) **LONDON, ONT.**

(Date) **APR 9 1919**

(Signature) *S. Fletcher Hunt*

*[Signature]* D. C. Discharge Section, No. 1 D. D.

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.)

Joseph H. Carpenter

## List of Discharge Documents.

Reg. Conduct Sheet, Militia form B. 263

Squadron }  
Battery } Conduct Sheet, " B. 263a  
Company }

or  
Field Conduct Sheet " W. 178

Copies of Convictions, by C. P. in MS.

Med. Hist. Sheet, Militia form B. 313

Casualty Form " W. 54

Medical Report for Invalid§ " B. 227

Dental History Sheet " B. 465

Last Pay Certificate " W. 44

Duplicate Discharge Certificate " W. 39A

‡Form of Will " W. 82

§Only if discharged "Medically unfit."

‡Only if man has not been overseas.

Attestation Paper Militia Form W. 23

or  
Particulars of Recruit " W. 133

Proceedings on Discharge " B. 218

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

(a) Proceedings on Discharge

(b) Attestation.

(c) Medical History Sheet.

Documents not accompanying this form should be crossed out.

*I hereby certify that the following documents are unobtainable.*

*Officer Commanding.*

*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.*

Number.....53550.....Rank.....Sgt.....

Surname.....CARPENTER.....

Christian Names.....Hamilton.....

Unit.....18<sup>th</sup> Bn. Can. Inf. Theatre of War.....France.....

Date of Service.....14-9-15.....

Remarks.....Wallaceburg Ont.  
P.O. Box 699.....

Latest Address.....~~1835- Palm Wood Ave~~.....

.....~~Toledo, Ohio. U.S.A.~~.....

G-20750 Dsp

G 53824 dsp

SEP 18 1921

SEP 20 1921

*S.O.S. M.A. 9/4/19 M.D. 1.*

649-C-4234

✓  
CARPENTER, Hamilton ✓ *Sgt.* (~~Pte~~) No. 53550 ✓ C.E.F. *18 th. Bn.*

Medals and Decorations (Widow) Mrs. Delina Carpenter  
Box 699  
Wallaceburg, Ont.

Plaques and Scroll (Widow) same as above.

*(Ser. #985133.)*

Memorial Cross (Died) 24-9-21.

*Eligible for star Pte. 18 th. Bn.*

*Elig. " V.M.*

*Elig. " B.M.*

*M.D.*

*S.R.*  
*A*

57676

Scroli Desp. 23 5/23 Reqn. No. 56003

Page Des. 21/12/24 Reqn. No. 50116

Surname *Barpenter* Christian Name or Names *1st* Reg. No. *53550*  
 Rank *Pt Sgt.* Unit *18 Bn B.C. (102)* Co. *260. Bg* Troop  Batty.   
 Hospital *30 Gen. Hosp. Balais* Date of Admission *27.7.16*  
 Transferred *to Leeds War. Hosp.* Hosp. *8.8.16*  
*to Rushy Ok. Caval.* Hosp. *16.8.16*  
*21.11.16 to House Uxbridge* Hosp. *10.10.16*  
*22.11.16 to H. Camiers* Hosp. *2-10-18*

## Diagnosis

(1) Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

*gsw Rt. Shlar. etc.*

*gsw. Legs. R*  
*gsw. Mull. C/F. Femur*  
*+ Radius*

A.M.D. 2 DEPT.

Sch. of D.Q.M.S. O.M.F.C. London.

## DISPOSITION

*Dis 27.10.16**ser. ill*

Date

*2-10-18*

## REMARKS

*62.17.28.4.5.8.16**Removed from ser ill list.**(6.10.18.**12.8.16 B136**19.8.16 B142**16.10.16 B188**30.10.16 B200**" 4-10-18 A 335-0**8.10.18 A 338-5**18.10.18 B 346. @**27.12.18 B404**23-1-19 B426**27-2-19 B. 456<sup>2</sup>**Invalided to Canada 24.2.19.**7*  
*B<sup>2</sup>*

# EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

- |    |                            |            |
|----|----------------------------|------------|
| 1. | J <sup>W</sup> Gen Cardiff | 12. 10. 18 |
|    | Granville Buxton           | 21-12. 18  |
| 2. | S. G. S. H Kirkdale        | 18. 1. 19  |
| 3. |                            |            |
| 4. |                            |            |
| 5. |                            |            |
| 6. |                            |            |
| 7. |                            |            |

LEDGER No. 1568.SERIAL No. 22398.38REG. No. 53550 NAME Carpenter H.RANK Sgt. CORPS I. D. D. AGE 27 SERVICE 6 1/2, E 5 1/2, J 10 1/2  
HOSPITALS DATE OF ADMISSION1 L. M. C. H. 10-3-192 W O H London 26.3.19.

3

DIAGNOSIS G. S. W. Rt. Knee.

TRANSFERRED TO

DISPOSITION No-5419 CATEGORYM.F.W. 2553.  
1126-D.P.-50M-12-18.  
1772-39-1332.

P.T.O.

REMARKS:

\*Name **CARPENTER, Hamilton** Rank **BGT.** Regtl. No. **53550**  
 Original unit **18th Bn** Present unit **102nd Bn** M. or S. **S** Age **28** Religion **C.E.** Fyle Depot **IDD 10-C-616**  
 Port, ship, and date of arrival **Portland, Maine, U.S.A. Essequibo, 7-3-19** Ref. H.Q. **ID 30-C-1406**  
 Next of kin **Margaret Bowman, Toledo Ohio, U.S.A**  
 Address on leave .....  
 Address on discharge **1835 Palm Wood Ave, Toledo. Ohio. U.S.A.**  
 Transportation issued Yes No Date ..... Character on discharge .....  
 Previous occupation **Laborer** Date and place of enlistment **Nov. 2, 1914, Chatham, Ont.**  
 Diagnosis **Sligh loss function of R. knee.** Date of Medical Boards **London, Ont. 3-4-19.**

Date. T.O.S.	Remarks	Pt. 2 Order No.
24-2-19	No. 1 D.D.	
10-3-19	Posted to Hosp. Sect. (T:B.H) and granted furlough with subs. to 24-3-19	71 73

Date.

Remarks.

Pt. 2 Order No.

6161 - 9 RDA  
APR 5 1919*Posted to Casualty Coy.*

98

98

9-4-19

Discharged from H.M.S. Medically unfit (P.D.P.)

98

REGT'L NO 5-35-50

H. Q. FILE NO. 649-

NAME Carpenter Hamilton

RANK AND CORPS Pte. 18. Bn. now 102nd

FOLLOWS

No.

FOLLOWS

CABLE

No.

DATE

NATURE OF CASUALTY

m.10720	4-8-16	Adm. to No. 30 Gen. Hoop. Calais July 27th 1916 Wounded slightly shoulder.
H 370 39-3	7-10-18	Ser. ill 22nd Gen Camiers Oct 2nd 1918 leg. (mother) Margaret Coamant R.H.S.
(Gen. Section)		Josephs Ohio with aah W.M.F. 16
H 376 25-10	9-10-18	Remod. from ser. ill list 19-12-18 22 Gen. A Camiers Oct-6-1918

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
A 284	No. 30 Gen. Calais	27-7-16	Gsw Rt. shoulder Slr
B 136	East Leeds War. Hospital Rd. Hls.	8-8-16	" " " "
B 142 <sup>e</sup>	Kings Cin + Bushy Pk. Hampton Hill	16-8-16	Gsw R. Shldr Slr.
B 188	from. Conw. Tillingdon House Upbridge	18-10-16	" " "
B 200	from. " "	27-10-16	" " " Slr. (Disch.)
A 335	22 Gen. Camiers	2-10-18	Ser ell. Gsw legs
A 338	Runs from Ser List	6-10-18	Gsw legs
B 346 <sup>P</sup>	3rd. West Gen., Cardiff	12-10-18	" " "
B 404	Granville Burton	21-12-18	" " " "
B 426	Span. Kirkdale	18-1-19	" " " "
B 456	Invalided to Conw.	24-2-17	Gsw Mult Com Tral Femora L + Radius

**A. & D.  
CARD**

.....HOSPITAL.....

AT.....

A. & D. No. 14654 PL. OF ACTION.....

RANK Sgt REG. No. 53550 UNIT 102 bous SICK OR WOUNDED.....

NAME Carpenter H AGE 27 RELIGION BoE

PLACE IN HOSPITAL R.A.

DIAGNOSIS Sw Mult.

ADMITTED 20 DEC 1918 FROM 3rd West Gen Newport

DISCHARGED 17 JAN 1919 TO.....

TRANSFERRED 5th Can. Gen. L'pool

SERVICE AT HOME 48/12 IN FIELD 18/12

RESULTS .....

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

29 days

P.T.O.

REMARKS.

201240-107

No 550  
53850

RANK

Pte

NAME

Carpenter, 18

T. O. S.

UNIT

18th Battery

M. D. /

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1914	1914			
Nov 2	Nov 30	✓		
	Dec	✓		
1915	1915			
	Jan	✓	mulet pay 770	D.O. 65 = Jan payed
	Feb	✓		
	Mar	✓		
	Apr	✓		

UNIT SAILED  
APR 18 1915

D.M.S. 1340-20M-3987-31-10-17.

A. & D. No. T8972 Ward ML

Unit 102. Bn.

Regt. No. 53550 Rank SGT.

Name CARPENTER. H.

Age 27

Service 4 $\frac{1}{2}$  yr.

Time, with Field Force 1 $\frac{1}{2}$  yr.

Disease or Injury

Gsw. Mule. b7 Semur R  
Lt. Radua

Admitted 17 JAN 1919 G. Buxton

Discharged

24 FEB 1919 INV. TO CANADA

Transferred

Transferred

Religion C.E

Place of Action London ont 4/15.

S - Cooper

NO. 3 CANADIAN  
GENERAL HOSPITAL  
LIVERPOOL

DOCUMENT  
CARD

HOSPITAL

A. & D. No. T8772 AT INV. TO CANADA  
 ADMITTED 17 JAN 1919 DISCHARGED 24 FEB 1919 WARD No. ML  
 REGTL. No. 53550 RANK Sgt. NAME CARPENTER, H  
 UNIT 102. Bn TRANS'D FROM Glan Buxton  
 DIAGNOSIS SW Mult. CF Femur Rt St Radial  
 DIAGNOSIS CHANGED

M.H.S. WRITTEN FOR		M.H.S. RECEIVED		FINAL DISPOSAL OF M.H.S.	
DATE	TO	DATE	TO	DATE	TO WHOM SENT.
		<u>17 JAN 1919</u>	<u>OD</u>		

M.H.S. IN HOSPITAL.

SENT TO M.O. 1/c..... FLOOR..... WARD..... ON..... 191.....

RECEIVED FROM M.O. COMPLETE..... 191.....

[P.T.O.]

REMARKS.

OTHER DOCUMENTS (Board Papers, Charge Sheets, etc.)

MCS  
TC R

Hamilton

Name **CARPENTER**

Rank

Sgt.

Reg. No. 53550

Unit

102nd Bn. (2 C.O. R)

Next of Kin

U.S.A.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
2/10/18	22 G. N Camiers	G.S.W. Legs.	A. 335	H. 370	P143071	
	SERIOUSLY ILL					
6/10/18.	No longer seriously ill.		A. 338	H. 376	P144082	
12. 10	3 W.S. 140 Cardiff	do	B. 346		28908	
21-12	Gran Can Sp. Buxton	do	B. 404		3656	
18-1-19	5 Can Gen Bp Kirkdale	G.S.W. Mult.	B. 426		5225	
		G.F. 2000000 Lt R. 1000000				
24-2.	Inval to CANADA.	do.	K. 456		7611	

[illegible]

649-8-4234

CARD NO.

SURNAME.

CHRISTIAN NAMES

REGL. NO.

RANK

UNIT

FORMER CORPS

NEXT OF KIN.

NAMES IN FULL

RELATIONSHIP TO SOLDIER

ADDRESS

CHANGE OF ADDRESS

COUNTRY OF BIRTH

PLACE OF ATTESTATION

DATE

DATE

L. L. 90-89.-M. &amp; D. 6312

M. F. W. 22. 100m.-1-16. H. Q. 1772-39 839.

Carpenter

Hamilton

53550

Pte

18th Batt. ~~100~~

27th Regt.

NEXT OF KIN.

Bauman Margaret

Mother.

Toledo, Ohio, U.S.A.

CHANGE OF ADDRESS

Delia Carpenter  
wifeWallaceburg  
Ont.

Canada, Wallaceburg

DATE

Chatham, Ont.

DATE

Nov 2, 1914

Sailed from Halifax Per SS. "Grampian"

R/c 7/3/19  $\frac{277}{4}$  Sgt.

L. L. 90-89.-M. &amp; D. 6312

18-4-15

M. F. W. 22. 100m.-1-16. H. Q. 1772-39 839.

Gen Del. 1  
with loan records. 19-12-18.S.O.S. Dis. 9/4/19  
med. unfit  
D.O. 98 8/4/19 #106

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 **CARPENTER,**  
Hamilton

Rank **Pte**

Reg. No. **53550**

Unit **18th Batt.**

Next of Kin **U.S.A.**

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1916			GSW R.		M	
27-7	30 G.H. Calais		Shldr slt	A284	10720	5-8
8-8-	East Leeds War H. Harehills Rd. Leeds		-do-	B136		
16-8	Kings Can RCH Bushey Pk. Hampton Hill		-do-	B142		
10-10	C.C.H. Hillingdon H. Uxbridge		-do-	B188		
27-10	Discharged		-do-	B200		

[illegible]

## Casualty Form—Active Service

Regiment or Corps

*18th Battalion, C.E.F.*CERTIFIED CORRECT.  
Canadian Record Office,  
Westminster House,  
71 Millbank, S.W.Regimental No. *53550*

Rank

*Pte J. W. Carpenter*

Name

*Hamilton*Enlisted (a) *2nd/1st/4th*Terms of Service (a) *4 years*Service reckons from (a) *2/10/14*Date of promotion to  
present rankDate of appointment  
to lance rankNumerical position on  
roll of N.C.Os.

Extended

Re-engaged

Qualification (b) *Labourer*

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					
	18th Bn	Disembarked in France	Boulogne	15-9-15	Nominal Roll	
19-5-16	18th Bn.	Granted 8 days leave to	England	14-5-16	B. 213.	Pt. II order 23, 7/6/16.
26-5-16	do	Returned from leave		24-5-16	do	DCS. 203.
29-7-16	6 C.F.A.	Bomb wd. R. shldr, penet. Adm.	6 C.F.A.	27-7-16	A36.	DCS. 224, 8/8/16.
27-7-16	30 Gen.	G.W. R shldr. Adm.	No. 30 Gen.	27-7-16	W 3034.	
7-8-16	H.S. Newhaven	do Adm.	H.S. Newhaven, to England	7-8-16	W 3083.	Pt. II order 32, 14/8/16.
		<i>transf. to 66 ale</i>				

*Hoogau* Captain,  
for Lt. Col., A.A.G.,  
Canadian Sect, G.H.Q., 3rd Echelon.(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.

#53550 Carpenter H.

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				
14.8.16		Taken on strength ✓	C.C.A.C. Pt. II	D.O. No. 8-8-16 3320	
34/10/16 2-11-16		ATTACHED TRANSFERRED FROM C.C.A.C. TO ✓	C.C.D. Shoreham	1/11/16	PART II D.O. No. 482 ✓ Q. C. Edridge. Lt & Adj. C.C.A.C.
26/12/16		Discharged from	C.C.D. S. Leonard	27/12/16	Bn. Part II D.O. No. 61 D. Mackitchie Adjutant. Canadian Command Depôt,
24 JAN 09	CCTB.	Transferred to 4th. Can. Res. Bn. From 1st. CCTB. ✓	Hastings	24 JAN 1917	Pt 2. D.O. No. 24, 4 Major. O.C. CCTB.
24/1/17. 3/1/17 4-7-17.	4th Res Bn do O.C. 4th can Res Bn	TO S from C.C.A.C. West Sandling do S.O. S on transfer to Bramshott 5th Division withy.		24/1/17 3/1/17 29-6-17	Pt II D.O. #18 ✓ #25 ✓ pt 2 order no 157. R. M. Adair CAPTAIN. ADJUTANT 4TH CANADIAN RESERVE BATTALION.

DUPLICATE.

53550

Army Form B. 178.

To be used for recruits enlisting direct into the Regular Army only.  
Army Form B. 178<sup>A</sup> to be used for Special Reserve recruits and  
Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname CARPENTER Christian Name Hamilton.

TABLE I.—GENERAL TABLE.

Birthplace ... Parish Wallaceburg County Ontario

Examined ... { on 2nd day of November. 1914.  
at Chatham. Ont.

Declared Age ... 23 years ... days.

Trade or Occupation ... Laborer

Height ... 5 feet, 4½ inches.

Weight ... lbs.

Chest { Girth when fully Expanded. 31 33½ inches.  
Measurement { Range of Expansion 33½ 2. inches.

Physical Development ... Good

Vaccination Marks { Arm ... Right Left  
Number

When Vaccinated ...

Vision ... { R.E.—V=  
L.E.—V=

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

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

Approved by (Signature) D.H. Hogg.

(Rank) Major. A.D.M.S. 1st. Div.

Medical Officer.

Enlisted ... { at ...  
on ... day of 191 .

Joined on Enlistment ... { Corps. 18th Battn Regtl. No. 53550

Transferred to ... { This Medical History Sheet has been compared with the Corresponding Attestation Paper, and entries made in red have been taken from the Attestation Paper.

Became non-effective by W.R. WARD,  
Colonel in Charge of Records,  
Canadian Contingents.  
on ... day of 191 .

(Signature)

(Rank)

Table II.—Only for Admissions to Hospital or to the Sick List in the Case of Warrant C

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of Days in Hospital	Remarks bearing on the cause, nature, or treatment of the use. In cases of syphilis, admissions and re-admissions subsequent progress, including particulars of treatment given in the special syphilis case sheet.
	Day	Month	Year	Day	Month	Year			
East Leeds War Hosp. Harehills Rd. Leeds.	8	8	16	15	8	16	G.S.W. Shoulder.	7	Transferred to Bushey Park Hospital.
The King's Can Conv. Hospital.	15	8	16	9	10	16		25	Transferred to Uxbridge.
Can. Conv. Hospital. Hillingdon House. Uxbridge.	9	10	16	27	10	16	do do	19	Ypres July 26/16 C.C.S. Poperinghe 11 days Then to E. Leeds War Hospital Bushey Park. To C.C.A.C. Shoreham
Bramshott Camp. 4th Res. Bn.	28	5	17				X ray report.		Much destruction of bones (radius lower 3rd. Some callus formation.

missions to Hospital or to the Sick List in the Case of Warrant Officers treated in quarters.

Disease	Number of Days in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer.
G.S.W.Shoulder.	7	Transferred to Bushey Park Hospital, London.	J. Kay Jamieson Maj or. RAMC (T) Reg,
	35	Transferred to Uxbridge.	H.R.Casgrain, Lt.Col.
do do	19	Ypres July 26/16 C.C.S.Poperinghe Then to 30 G.H.Calais 11 days Then to E.Leeds War Hospital 7 days. Then to Bushey Park .To C.C.A.C.Shoreham by Sea for duty.	S.R.Johnston, Capt.
X ray report.		Much destruction of bones (radius near junction of mid and lower 3rd. Some callus formation.	J.I.O'Connell, Capt. PC.

**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.
	VACCINATIONS
18/12/14	Good. D.H. Hogg.
	ANTI-TYPHOID INOCULATIONS ETC
0/11/14	Good. D.H. Hogg.
0/11/14	"
1-12-16.	TAB, 1. A.E. Beech.
Oct. 30/16.	C.C.A.C. <i>Shoreham</i> , G.S.W. Shoulder R. 6 wks. P.T. 2. <i>Shoreham</i> , J.N. Cock, Capt. P.S.M.B.
<i>May 29/17 Bramshott Camp.</i>	APPROVED. Geo. A. Russell, Capt. A.M.C. G.S.W. Forearm L. C.ii C.E. Cooper Cole, P.S.M.B.

### Table IV.—Service Table.

[illegible]

Rank \_\_\_\_\_ Name **CARPENTER Hamilton** Reg'l No. **53550**  
 Unit **18th Battn.** If in perm. Corps, \_\_\_\_\_  
 What Unit? \_\_\_\_\_ Married or Single **Single**  
 Place and Date of Enlistment **Chatham, Ont. 2nd Nov. 1914** Place of Birth **Wallaceburg, Ont.**  
 Name and Address, Next-of-Kin **Margaret Bonman, Toledo, Ohio.**

Relationship

Assigned Pay Monthly \$

Payable to

Relationship

Separation Allowance \$

Payable to

Relationship

Discharge, Date and Place

Reason

Character

R 133 B 281

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				
29-4-15	O.C. 18	Arrived per St. Grampian England		29-4-15	Inform Form
12-6-15	O.C. 18	Forfeit 2 days pay A.W.L. West Sandling Camp		7-6-15	Part II Orders No 8
13-8-15	"	" " " " "	"	13-8-15	" 349
18-9-15	O.C. 18	Embarked ("C." Co.)	Folkestone	14-9-15	Inform. Form
7-6-16	"	Granted 8 days leave from		14-5-16	Part II 23
5-8-16	18 <sup>th</sup>	No 30 Genl Hospital	Calais	27-7-16	Cas. List A 284 } GSW Rt
12-8-16	"	East Leeds War Hospital	Leeds	8-8-16	" " B 136 " }
19-8-16	"	Kings Can. Red X Hospital	Hampton Hill	16-8-16	" " B 142 " }
14-8-16	O.C. 18	Transfer to CCAC		7-8-16	Part II 32 W.
14-8-16	b b a c	Taken on strength.	Folkestone	8-8-16	1-2332

(over)

mx.  
21/11/24 mg.

2008  
34

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				
16-10-16	18 <sup>th</sup> Bn	Trans Can Con Hosp.	uxbridge	10-10-16	CLB 188
30-10-16	" "	Dischd Can Con Hosp.	do.	27-10-16	CLB 200
29-10-16	Cba C	Reported as uxbridge	Shoreham	27-10-16	PT# 474
2-11-16	do	So CbD 6 weeks P.I.	do	1-11-16	PT# 482
29-12-16	do	leaves to be att'd CbD and SOS to CbD	Hastings	27-12-16	PT# 575
28.12.16 Ist CCTB TAKEN-ON-STRENGTH-HASTINGS. 27 12.16 PT 2 O 62					
24-1-17	do	J.O.S. to 4 <sup>th</sup> Rec Bn	do	24-1-17	— 24
24-1-17	4th Rec	Taken on strength	W. Saddington	24-1-17	Pt. II'18
31-1-17	4 <sup>th</sup> Rec.	App <sup>l</sup> A/L/Cpl. W.E.P.	- do -	31-1-17	— 25
21-3-17	do	App <sup>l</sup> A/L/Cpl. with pay	Bramshott	21-3-17	— 67
4-7-17	4 <sup>th</sup> Rec.	S.O.S. to Can Troops 5 <sup>th</sup> Div.	"	29-6-17	— 157
3.7.17	164th	att'd to 164th from 4th Rec	W. Saddington	29.6.17	— 30 4 <sup>th</sup> Rec. P/O 153 of 29 7/20.237. S.10.17
22.8.17	4th Rec	WD 157 to read SOS to 164th	Bramshott	29.6.17	— 199 Cancelled
25.9.17	—	WD 157 cancelled	"	29.6.17	— 253
1.10.17	164th	SOS from 4th Rec	W. Saddington	27.9.17	— 98 4 <sup>th</sup> Rec. P/O 233 of 1-10-17
25-2-18	164th	Remains to 164th on request	W. Saddington	26-2-18	209 Cancelled 2010/28/2/18
28-2-18	164th	SOS to 102 Bn	—	28-2-18	2010 + 102 2nd Bn P/O 1977 3/18 + 164th Bn P/O 19725-3-18 (Rank)
3-6-18	102 Bn	Confirmed as Cpl	Field	1-3-18	P/O 57.
13-9-18	—	App <sup>l</sup> 2. 18/5	—	8-9-18	P/O 89.

P.O. 103 CHECKED  
 5 MAR 1918

2nd Sheet

2nd Gen Ont Regt

Rank

Name

*Carpenter Hamilton*

Reg'l No. *53550*

Unit

*18th Bn*

If in perm. Corps, }  
What Unit? }

Married or Single *Single*

Place and Date of Enlistment

*Chatham, Ont 2nd Nov 1914*

Place of Birth *Wallaceburg, Ont.*

Name and Address, Next-of-Kin

*Margaret Bonman  
Toledo, Ohio*

Relationship

Assigned Pay Monthly \$

Payable to

Relationship

Separation Allowance \$

Payable to

Relationship

Discharge, Date and Place

Reason

Character

*Sgt. a/c*

N/E. R.B. No. *6431*  
File R.L. ....  
Category *771 Gen*

1st Sheet filed in Envelope.

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>28-9-18</i>	<i>102 Bn</i>	<i>Promoted Sgt</i>	<i>Field</i>	<i>24-8-18</i>	<i>Bn 096.</i>
<i>4-10-18</i>	<i>✓</i>	<i>Wounded</i>	<i>Field</i>	<i>2-10-18</i>	<i>ChA 335</i>
<i>21.10.18</i>	<i>260RB</i>	<i>10 Son porting from 102 Bn</i>	<i>Witley</i>	<i>12.10.18</i>	<i>DO 248 (102 Bn to 109 7/23 10/18)</i>
<i>27.2.19</i>	<i>260R</i>	<i>Invalided to Canada, ex</i>		<i>24.2.19</i>	<i>C.L. B 456</i>
<i>3.3.19</i>	<i>260RB</i>	<i>No 5 C. &amp; N. Kirkdale</i>		<i>24.2.19</i>	<i>DO 52</i>
		<i>10 Son being invalided to Canada</i>			

[illegible]

## Casualty Form—Active Service.

Regiment or Corps

18<sup>th</sup> Battalion C.E.F.

Regimental No. 53550

Rank

Lie

Name

Carpenter, Hamilton

Enlisted (a) 2-11-14

Terms of Service (a)

2 of W

Service reckons from (a) 2-11-14.

Date of promotion to  
present rankDate of appointment  
to lance rankNumerical position on  
roll of N.C.Os.

Extended

Re-engaged

Qualification (b)

Labourer

## 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  
received21-3-17  
26-9-17O/c 4<sup>th</sup>  
Res. Bn.Pt 2 order 157 in so far  
as it affects Cpl Carpenter  
H. is cancelled and he will  
be shown "On Command"Bramshott  
Bramshott21-3-17  
29-6-17Pt 2 O.O. # 67  
Pt 2 order 228 + 153 +  
304 of 3/7/17 of 164<sup>th</sup> Bn.

1-10-17

do

S.O.S. 4<sup>th</sup> Res. Bn. on transfer  
to 164<sup>th</sup> Bn. Witley, ceases to be  
"On Command" (3RO 2478) ✓

do

27-9-17

Pt 2 order 233.  
W. B. Stevens  
CAPTAINADJUTANT 4<sup>TH</sup> CANADIAN RESERVE BATTALION.

1-10-17

164<sup>th</sup> Bn

Taken on Strength ✓

Witley

27-9-17

Part 2 O.O. # 98. ✓

28-2-18

164<sup>th</sup> BnTransferred to 102<sup>nd</sup> Bn ✓

Witley

28-2-18

Part 2 O.O. # 10  
W. B. Stevens  
CAPTAINAdjutant 164<sup>th</sup> Battalion C. E. F.

18-9-15

O.C. 18<sup>th</sup>

Embarked (C 62)

Folkestone

14/9/15

Inform. Form.

29-12-16

C.E.F.

Pearson born. C.E.F. & S.O.S. 18<sup>th</sup> Bn

Hastings

27/12/16

Pt 2 O.O. # 575

28-12-16

C.E.F.

Taken on Strength

Hastings

27/12/16

62

25-2-18

164<sup>th</sup> Bn

Reverts to Plt at own request ✓

Hastings

24/2/18

9

(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., 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				
21.1.17	4 Res Bn	app a/k epe to C.P. ✓	Landing	24.1.17	Ph II 25
28.2.18	164 Bn	Ph II 0.9 cancelled			Ph II 10. <i>Ans</i>
					<i>D. S. L. LIEUT.</i>
1.3.18	4688 Bn	10.2 of the 102 <sup>n</sup> Bn on arrival in France	4688 Bn	1.3.18	NR DO 14
"	"	Sgt	T CCKG	3.3.18	NR/1020
9.3.18	Unit	Joined	Field	4.3.18	B513
25.5.18	Can Corps	<u>Confirmed in the Rank of</u> <u>Corporal</u>		1.3.18	A103-0-8 KI. 18/606.4 DO. 51 a/2.6.16
29.5.18	CCKG	Tot. in Ech	Field	29.5.18	NR/775
4.7.18	"	Sgt		4.7.18	NR/1174
8-7-18	"	Forfeits pay to make good breech cover. 8d, lost by neglect.	T Unit	2-7-18	B.2069; DO. 68 a/26.7.18
9.9.18	Unit	Appsta Lance <i>Comp Est.</i>		8.9.18	KI. 18. 1531 DO 89 12.9.18
21.9.18	do	Prom. Sergeant to Comp Est.		24.8.18	B712 DO. 96 28/9/18
28.9.18	do	Wt	Field	27.9.18	KI. 17.1246
do	30 CCS	Prv thgt a/cgt.	T 30 AT	29.9.18	A36/9989
30.9.18	22 Gene	do	22 Gene	30.9.18	W3034/6027
12.10.18	do	Invalided Wd. Posted to the 2 <sup>n</sup> Cold Wtly	St. 2	12.10.18	W3083/6239 DO. 109 23/10/18
		<i>M. de Liège</i>			
		<i>J. M. Anderson</i>			
		Lieut. for Lt Col. A. A. G.			
		Canadian Section, G. H. Q. - 3 <sup>rd</sup> , Ech.			

Reserved for M.H.C.

Regt. No. 53550 Rank Sgt Surname Carpenter Christian Name Hamilton  
 Unit or Corps—(a) Overseas from United Kingdom 102nd Can (b) In United Kingdom

Born at—Town Wallaceburg County or Province Ontario Country Canada

Date of Birth—Day 24 Month October Year 1891 Age 27 yrs 2 months.

Joined at Chatham Ont Date Nov 2nd 1914

Former Trade or Occupation Cooper

Permanent marks or peculiarities that will serve for future identification

Enlarged joint - distal interphalangeal of 3 fingers right due to crush.

Height—feet 5 inches 4 1/2 Colour of eyes Brown

Signature of Soldier (for identification purposes) H. Carpenter

### 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)

Incomplete Fracture Right Femur  
Multiple Skrapnel Wounds

Disabilities Group (b)

N.A.

Disabilities Group (c)

N.A.

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. Back, Left Thigh and Right Knee.</u>	<u>Cambrai Front</u>	<u>Sept 27 1918</u>
(ii.) As to Group (b) above.	<u>N.A.</u>	<u>N.A.</u>	<u>N.A.</u>
(iii.) As to Group (c) above.	<u>N.A.</u>	<u>N.A.</u>	<u>N.A.</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? N.A.

(ii.) As to Group (b) above? N.A.

If yes, has Active Service aggravated it? N.A.

(iii.) As to Group (c) above? N.A.

If yes, has Active Service aggravated it? N.A.

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? N.A.

(iii.) As to Group (c) above? N.A.

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? **No**(iii.) Was a Court of Inquiry held **N.A.**(iv.) Where? **N.A.**(v.) When? **N.A.**(vi.) Opinion of the Court? **N.A.**

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).

In good health at time of enlistment  
 Arrived in England April 27/15 - Reached France Sept 15/15. In France 18 months.  
 On July 26/16 he got a f. S.W. of right shoulder - Was laid up about 4 months  
 Wounds healed leaving no disability.

On Sept 27/18 He received multiple f. S.W. and an incomplete fracture of lower part  
 of Right femur. Wounds on left side of back - Wound (flesh) in left thigh  
 from which shrapnel fragment was later removed - A wound in upper  
 part of right knee, this wound caused incomplete fracture of femur

Hospitals - No 30 CCS. 2 days - 22nd Gen Hosp 12 days - 3rd West Gen  
 Hosp 2 weeks - Cavalry Bks Hosp 18 weeks - S.C.S. Hosp Buxton Dec 20/18

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

Subjective: The only complaint is of stiffness in the right knee.

Objective: He has two scars in good condition of flesh wounds. One  
 on left side of back 4" long at lower part of ribs. The other is in middle third of  
 outer surface of left thigh 4" long. This is slightly depressed and adherent. Neither  
 of these wounds have left any disability.

The third wound extends from a point just proximal to inner condyle of Rt femur  
 to the centre of the knee anteriorly. The knee joint was opened according to Mx. S.  
 This wound is not quite healed. There is some impaired movement at this joint.  
 A.G.E. is full. A.G.F. 135°. All other systems normal

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

(ii.) If so, state what. Partial culum of knee joint Right - Removal of F.B.

(iii.) Was one advised and declined? **No**

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. **Has had one extracted.**

10. DO YOU RECOMMEND:—

(a) Fit for duty? **No**(b) Fit for base duty? **No**(c) Invalid to Canada? **Yes**(d) Discharge from the Service as permanently unfit? **No**Date of Report **27/12/18** 191Signed **As Connolly**  
 Officer in medical charge of case.Station **G.C.S. Hosp Buxton**I have satisfied myself of the general accuracy of the above  
 Report, and concur therein \*except

Registrar, for O.C.,

\* Delete if inapplicable.

 Capt. **D.A.M.C.** Officer i/c Hospital } Strike out one  
 S.M.O. Brigade } of these.
Dated at **28 DEC 1918**

Granville Can Sp Hosp. 191

# 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%.)

No

15. THE PENSIONABLE DISABILITY.—see Part I. (3). Aggravation on Active Service of a disability existing previous to joining is to be included in the estimate.

What part of the entire disability estimated next above in (14) is due to causes arising during Active Service? (Estimate at none,  $\frac{1}{2}$ ,  $\frac{2}{3}$ ,  $\frac{3}{4}$ , or all.)

No

16. Permanency of the Pensionable Disability estimated next above in (15).

(i.) Is it permanent?

No

(ii.) If not permanent, what is its probable minimum duration (in months)?

No

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

No

18. Remarks.

Barly dressing

Walking cane

19. Recommendation:—(a) Fit for duty?

No

(b) Fit for base duty?

No

(c) Invalid to Canada?

Yes

(d) Discharge from service as permanently unfit?

No

Classification for the Military Hospitals Commission.

5

Date of Board

EXAM. MED. BOARD

31 DEC. 1918

Station

G. C. S. H.

Signatures of the Board.

Approved

MAJOR, D.A.D.M.S.

A.D.M.S.

Dated at

FOR A.D.M.S. CANADIANS  
BUXTON AREA.

Station

191

W. H. P. M. D. C. M. President.

29 Dec 1918  
ASSISTANT DIRECTOR OF MEDICAL SERVICE  
6 JAN 1919  
CA  
BUXTON AREA

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

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

on the                      day of                      191

Members of the Board:—

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

Dated at                      this                      day of                      191

Signatures of  
the Board

President.

THIS FORM WILL BE USED FOR ALL RANKS  
**MEDICAL HISTORY OF AN INVALID**

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" issued by the B.P.C. and instructions issued by Militia H.Q., Ottawa, will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of Sections 1 to 17 of this Form and will obtain the signature of the invalid to the "Statement," page 3. The President of the Board of Medical Officers is responsible for the proper completion of sections reserved for recording the "Opinion of the Medical Board."
3. In answering the questions, Medical Officers will carefully obtain and record the invalid's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the invalid concerned, from witnesses, or from documents, Regimental or otherwise.
4. Special care is required in answering question 9. Read the questions carefully. All questions must be answered.
5. If space provided under any section is insufficient add another sheet. Such sheets must be initialled by the Medical Board.
6. A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board."
7. Under no circumstances may information other than that in sections 7, 8, 9 and 10 be communicated to the invalid, directly or indirectly.
8. The nomenclature of diseases must be followed, if possible, as described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London (1915), by Messrs. Harrison & Sons.

STATION London, Ont. DATE 3-4-19.

1. 1 (a) Unit 1 D.D. (b) Regimental No. 53550 (c) Rank Sgt.

(d) Surname CARPENTER (e) Christian name Hamilton

(f) Home address 1855 Palmwood Ave., Toledo, Ohio, U.S.A.

(g) Next of Kin Mrs. Ray Denman, (h) Relationship Mother

(i) Address of Next of Kin 1835 Palmwood Ave., Toledo, Ohio, U.S.A.

2. Age last birthday 27 Date of birth 24-10-91.

3. Enlistment, or Appointment (if an Officer) (a) Place Chatham, Ont. (b) Date 2-11-14.

4. Personal description:

(a) Height 5' 4½" (b) Weight 141 (c) Complexion Medium

(stripped)

(d) Colour of hair D. Brown (e) Colour of eyes Brown (f) Identification marks, Scars, etc. 4"

scar inner surface right knee.

5. Former trade or occupation Automobile Repair.

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

	PERIODS	
	From	To
Canada	<u>2-11-14</u>	<u>27-4-15</u>
	<u>22-2-19</u>	<u>3-4-19.</u>
	<u>27-4-15</u>	<u>14-9-15</u>
	<u>10-8-16</u>	<u>1-3-18</u>
England	<u>2-10-18</u>	<u>22-2-19.</u>
	<u>14-9-15</u>	<u>25-7-16</u>
France or other theatres of War	<u>1-3-18</u>	<u>2-10-18.</u>

7. Original disease, or injury Slight loss of function right knee.

(a) Date of origin 27-9-18. (b) Place of origin France.

(c) Cause G.S.W.

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.)

Slight loss function right knee.

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.)

OBJECTIVE: Scar  $4\frac{1}{2}$ "x $\frac{3}{4}$ " across inner surface of right knee, (operation for opening up knee-joint) Scar is not adherent to deep tissue, is tender on pressure over inner end. Flexion of knee lessened about  $10^\circ$ .

SUBJECTIVE: No complaints.

- (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).)

First wounded in shoulder 25-7-16, flesh wound. No disability.

Second, knee, ~~xxx~~ side and left thigh 27-9-18, all were shrapnel wounds and all healed with no disability except right knee and it is slight.

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).)

None.

(c) (Here give a description of wounds, scars, and deformities. Shrapnel scars, 2 on right shoulder. No disability. 3 1/2" scar right lumbar region. No disability. 3 1/2" scar left thigh. No disability.

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

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

Not applicable.

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.)

22nd. General Cameries France, excision to fully open up knee-joint for removal of piece of shrapnel and drainage. Cardiff, Splints, rest massage.

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? Yes. (If not, briefly state why)

17. Recommendations. Fit for duty overseas.

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, H. Carpenter, 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 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.

The Board agree that the disability is slight. Sect. 9(a) - would add "Soldier complains that he cannot fully flex right knee". Soldier can walk any distance at his own gait. Sect. 17. "Service Abroad not General".

19. Is the invalid fit for

- |  |                                     |              |
|--|-------------------------------------|--------------|
| (a) General service,                           | <input checked="" type="checkbox"/> | Yes or No.   |
| (b) Service abroad, not general service,       | <input checked="" type="checkbox"/> | (Yes or No.) |
| (c) Home service (Canada only),                | <input checked="" type="checkbox"/> | (Yes or No.) |
| (d) Temporarily unfit.                         | <input checked="" type="checkbox"/> | (Yes or No.) |
| (e) Unfit for service in Categories A, B and C | <input checked="" type="checkbox"/> | (Yes or 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.)

- (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.)

Fit for Service Overseas not General.

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 London, Ont.

DATE 3-4-19.

*I. H. Tawers Major Comd* President.  
*A. F. Laird Capt* Members

## 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 *G. C. B. M. D.* Capt. C.A.M.C.  
For Assistant Director of Medical Services.  
DATE *3-4-19*

APPROVED BY  
Director-General of Medical Services.  
DATE.....

## MEDICAL CASE SHEET.\*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
T 46 54 Year	53550	Sgt	Carpenter	A
	Unit.	Age.	Service.	
	102 <sup>nd</sup> Bn	27	48 1/2	18 1/2
Station and Date.	Disease			
	Occupation			
	Enlisted			
	Reached England			
	Reached France			
	Wounded			
	Returned to England			
	Hospitals			
	Dental Report			
1 <sup>st</sup> Wound				
2 <sup>nd</sup> Wound				
H.P.I.				

On July 26/16 he got at Ypres a f. S.W. of Right Shoulder. This laid him up for some months and was eventually returned to duty at the front in France. With no disability.

On Sept 27/18 on Cambrai he received multiple shrapnel wounds. (a) On the left side at the back and in line with the shoulder blade, he received an oblique wound 4" long at the lower part of ribs. Wound is well healed, and though still a little tender causes no disability.

B Over the middle third of the outer surface of left thigh, he received a linear wound about 4" long. The wound is healed, and the scar a little depressed and adherent. Still some tenderness, but no disability.

C A laceration wound over the upper part of the right knee. Extending from just posterior of internal Condyle of humerus to middle of anterior surface; at upper margin

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

Station  
and Date.

of pellets. This wound is not yet quite healed and  
is receiving daily dressing. Extension at the knee is  
full. Flexion to about  $135^{\circ}$

AK Connolly  
27 Dec 1918

Dec 27. 18

For AFB 179 1 to C

EXAM. MED. BOARD

r. Crapb

31 DEC. 1918

D.B.

G. C. S. H.

Scars over knee, hip & back (right)  
No complaints, Movements of the knee,  
cannot flex past  $15^{\circ}$ . No foot drop  
or loss of sensation. D. to C.

S. C. Hugh Capt. A.M.S.

# MEDICAL HISTORY SHEET.

Surname Carpenter

Christian Name Hamilton

Examined on 2 day of November 1914  
at Chatham, Ont

Birthplace { City or Town Wallaceburg  
County Ontario

Apparent age 23 years

Trade or occupation Laborer

Height 5 Feet 4 1/2 Inches.

Weight ✓ Lbs.

Chest measurement { Minimum 31 inches.  
Maximum expansion 33 1/2 inches.

Physical development good

Small-Pox Marks none

Vaccination Marks { Arm Right ✓ Left.  
Number ✓

When Vaccinated last ✓

(a) Marks indicating congenital peculiarities or previous disease ✓

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

Approved by

AUG 24 1918

Rank Q.R.M.S.

1st Lieut M.O.

Date

Fit or Unfit

EXAMINED FOR RE-ENGAGEMENT.

16 AUG 1918

M.O.

7 JUL 1917

M.O.

NIL

6 OCT 1918

M.O.

M.O.

M.O.

M.O.

M.O.

Date

Result

VACCINATIONS.

18/14 good

D. H. Hogg

M.O.

M.O.

M.O.

Date

Result

ANTI-TYPHOID INOCULATIONS, ETC.

TAB 25/1/18

D. H. Hogg

M.O.

10/14 good

D. H. Hogg

M.O.

20/14 good

D. H. Hogg

M.O.

21/12/16 TAB A & B each

D. H. Hogg

M.O.

Enlisted on day of 191 at

	CORPS.	REG'T L NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>18th Bn</u>	<u>53550</u>		
Transferred to.....	<u>16th Bn</u> <u>102nd Bn</u>			<u>28-2-18</u>

## EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>Bramshott Camp, Hants.</u> <u>29 MAY 1917</u>	<u>Oct 30 16</u>	<u>G. S. W. Shoulders R.</u>	<u>6 wks P.T.</u> <u>Ph. Cock</u>
<u>APPROVED</u> <u>G.C.S.H. Buxton</u>	<u>Dec 31. 18</u>	<u>for Colonel, A.D.M.S.</u> <u>Canadian Troops, Bramshott Camp.</u>	<u>True Amia</u> <u>Med. Board, Bramshot</u>

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

LONDON, ONT. 3-4-19

Wounded right knee. Service overseas.

M. F. B. 313.

50M—9-14.  
H. Q. 1772-39-439.

The Tower Major  
can

Name  
Christie (62)

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				
EAST LEEDS WAR HOSPITAL. Harehills Road, Leeds.		8	8	16	15	8	16	gsw Shoulder	7	Transferred to Bushey Park Hospital London.	Major, R. A. M. C. (T) REGISTRAR, EAST LEEDS WAR HOSPITAL
THE KING'S CANADIAN RED CROSS CONVALESCENT HOSPITAL		15	8	16	9	10	16		55	Transferred to Uxbridge	R. P. S. M. C. (T)
Canadian Convalescent Hospital, Harehills Road, Leeds.		9	10	16	27	10	16	gsw. Shoulder	19	Ypres July 26/16 CCS. Popperidge then 4 to 44 Calais 11 days. Then to G. Leeds War Hosp. 7 days. Then to Bushey Park to CCAC. Shotdown by sea for duty.	O.C. The King's Canadian Red Cross Convalescent Hospital, Upper Lodge, Bushey Park.
Bramshott Camp 4 Rec. Bn		28	5	17				X Ray Report		Much destruction of bone (radius near junction of mid. & lower 3rd. Some call formation. Has full use of knee except lacks 15 degrees of full flexion. 227. 7th. for duty overseas not general. Drochamps	John A. M. C. (T) Capt.

Duplicate Medical Officer's Report  
per. J. L. S. M. C. (T)

TABLE II.—Only for admissions to Hospital or to the Sick List in case of Warrant Officers treated in quarters.

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
3RD WESTERN GENERAL HOSP CARDIFF	12	10	18	20	12	18	S. 10-L. Back R. Thigh & R. Knee. Severe. Flesh	70	Back - oblique clean healing wound Lower C. Chest Thigh. Vertical septic wound outer side - 7.6. removed - incomplete fract of femur reported. Knee. clean transverse healing wound medial aspect. Joint opened. 30.10.18 Transfer on Hospital Stretcher Canadian 20/12/19 1 year to Ruxton	F. J. Stuchman CAPT R.A.M.C.T.F.
Granville Can Spec Hosp St. James Derbyshire	20	12	18	17	1	19	- do -	29	All wounds healed except knee. Only disability is at the R. Knee. Extension is Full at 135°. Knee receiving daily dressings I.T.C.	W. J. Stuchman CAPT R.A.M.C.T.F.
No. 5 CANADIAN GENERAL HOSPITAL LIVERPOOL	17	JAN	1919	24	FEB	1919	do.		Scars over Rt Knee, hip & back healed. No complaints. Movement of R. knee cannot flex past 15°. No foot drop or loss of sensation J. to C.	As Connolly CAPT R.A.M.C.T.F.

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

# MEDICAL HISTORY OF

Surname

Christian Name.

TABLE I.—General Table.

Birthplace { Parish.....  
County .....

Examined { on.....day of.....191 ,  
at.....

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

Trade or Occupation.....

Height.....feet.....inches

Weight .....lbs.

Chest Measurement { Girth when fully .....inches  
Expanded  
Rate of Expansion .....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—  
.....  
.....

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

Approved by .....

Rank .....

Medical Officer.

**TABLE III.—Boards; Courts of Enquiry, Vaccination, Inoculations, etc.; Examinations for Field or Fore Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, etc.**

[illegible]

TABLE IV.—Service Table.

Enlisted	{ at..... on..... day of ..... 191...
Joined on enlistment	Corps
Transferred to	Regtl. No.
Became non-effective by .....	
on..... day of ..... 191...	
(Signature).....	
(Rank) .....	

[illegible]

Forms

I. 1237

10

(Part I.)

Army Form I. 1237.  
(C.I.F. I.)MEDICAL CASE SHEET.\* *Heat 2*

No. in Admission and Discharge Book. T 812 Year 1916	Regimental No. 53550	Rank. Pte	Surname. Carpenter	Christian Name. H
	Unit. 18th Battn.		Age. 24	Service. 12/12
(Part II.)				
(a) Station and Date.	(b) Disease <i>G S W Shoulder</i>			
Can. Con. Hosp. at Jxb ridge 9-10-16 19...	(c) Date of origin <i>July 26.</i>	(d) Place <i>Ypres</i>	Country <i>Belgium</i>	
	(d) Cause <i>Bomb Fragment.</i>			
(e) History to Date.	Admitted to	Date.	Special Treatment, &c.	Result.
	1 <i>90 Lm. Calais</i>	<i>July 27</i>	<i>Op. Removal F.B.</i>	<i>Revised.</i>
	2 <i>Ess. Heds.</i>	<i>Aug. 7.</i>	<i>Dressing.</i>	<i>Aug 14/16.</i>
	3 <i>Bushy Park.</i>	<i>Aug 14/16</i>	<i>"</i>	<i>Revised</i>
	4			<i>Oct 9/16.</i>
(f) X Ray Report.	From			
(g) Marks of Injury.	External <i>Scar above Rt clavicle &amp; on Anterior part of shoulder.</i>			
	Internal			
(h) Present Condition.	of physical state <i>Good.</i>		Symptoms <i>nil.</i>	
	of disability <i>Shoulder Inj.</i>			
(i) Prognosis.	Complications <i>Scar on Shoulder sore. will prevent Carrying pack</i> <i>Si found him as he could Carry pack.</i>			
(j) Treatment and Semi-Weekly Progress.	Date.	Treatment.		Progress.
(k) Result.	<i>Scar will prevent Carrying a pack.</i>			
(l) Disposal.	Transferred to <i>Clab.</i>		For <i>Revised</i>	
	Date <i>27-10-16</i>			
	Signed <i>A. E. Bennett</i> Capt., C.A.M.C.			

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

(m)

ADDITIONAL MEMO. re Part 1.

(1) Married	No
-------------	----

(2) Occupation Cooper

(3) Enlisted at Chatham Date Nov 1914

(4) Vaccinated for Small Pox	Yes
------------------------------	-----

(5) Inoculated for Typhoid ☒ Yes

	for Tetanus	Yes
--	-------------	-----

(n)		
TREATMENT, &c., re Part II.—continued.		Progress.
1.	1.	
2.	2.	
3.	3.	
4.	4.	
5.	5.	
6.	6.	
7.	7.	
8.	8.	
9.	9.	
10.	10.	
11.	11.	
12.	12.	
13.	13.	
14.	14.	
15.	15.	
16.	16.	
17.	17.	
18.	18.	
19.	19.	
20.	20.	
21.	21.	
22.	22.	
23.	23.	
24.	24.	
25.	25.	
26.	26.	
27.	27.	
28.	28.	
29.	29.	
30.	30.	
31.	31.	
32.	32.	
33.	33.	
34.	34.	
35.	35.	
36.	36.	
37.	37.	
38.	38.	
39.	39.	
40.	40.	
41.	41.	
42.	42.	
43.	43.	
44.	44.	
45.	45.	
46.	46.	
47.	47.	
48.	48.	
49.	49.	
50.	50.	
51.	51.	
52.	52.	
53.	53.	
54.	54.	
55.	55.	
56.	56.	
57.	57.	
58.	58.	
59.	59.	
60.	60.	
61.	61.	
62.	62.	
63.	63.	
64.	64.	
65.	65.	
66.	66.	
67.	67.	
68.	68.	
69.	69.	
70.	70.	
71.	71.	
72.	72.	
73.	73.	
74.	74.	
75.	75.	
76.	76.	
77.	77.	
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79.	79.	
80.	80.	
81.	81.	
82.	82.	
83.	83.	
84.	84.	
85.	85.	
86.	86.	
87.	87.	
88.	88.	
89.	89.	
90.	90.	
91.	91.	
92.	92.	
93.	93.	
94.	94.	
95.	95.	
96.	96.	
97.	97.	
98.	98.	
99.	99.	
100.	100.	

[illegible][illegible]

## MEDICAL CASE SHEET.\*

No. in  
Admission  
and  
Discharge  
Book.

Regimental No.

Rank.

Surname

Christian Name.

53550

Pte.

Carpenter  
Cappentier

H.

Unit.

Age.

Service.

Year

18th Bat t

24

12/12

10/12

Station  
and Date.

Disease

G.S.W. R. Shoulder

On July 26<sup>th</sup> at Ypres washit by part of a bomb which  
entered the R. Shoulder. No bone  
involvement. Sent to No 30Gen. Hosp. Calais where operation  
was performed and shrap removed.On Aug. 7<sup>th</sup> sent to Leeds war  
Hosp. where dressings were appliedK. C. R. C. Hosp. Aug 16<sup>th</sup> 1916.

Wounds not healed.

Present ConditionTwo small superficial granu-  
lating wounds on front of RT  
Shoulder. No disability.

Parade One wk JBA

Dressings. Aug. 23. Glycerine with 4 wounds  
dressed with 13 abs. Peru.Rash present on body & arms & legs.  
(itch. are. oc)

H. C. L. V.

Aug 26 Balsam of Peru  
Wounds healing, Rash improving  
Parade - 4 days JBA

Aug 28 Impetigo L hand.

Aug Hydrarg & Zuc Ox. Parade 30<sup>th</sup> JBA

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

Aug 30 Impetigo. Better  
Wounds progressing well

Parade One wk

Station and Date.	Sept. 6.	
	Improving, Wound on shoulder not healed.	
	Report - one week.	1 Nov 8
	Sept. 13.	
	Impetigo much improved.	
	Wbs. nearly healed.	
Born at Wallaceburg. Cont.	Epsom.	2 wks. J.B.A.
<del>Married or</del>		
Single	Sept. 21	
	Pain on arms + legs & lower abdomen.	
Occupation Cooper.	Treat. for scabies. Disinfect clothes 1 Nov 8	
	Report - in one week. 1 Nov 8	
Enlisted at Chatham Ont.	Oct. 3.	
On Oct. 24/14	Pain, almost, but not entirely gone. (Epsom when free from contagion) 1 Nov 8	
N. Inoc.	3	
S.P.V.	1.	
Treatment	Hot bath - lifebuoy soap, apply surg. antiseptic night and morning for three days. Hot bath. Clean underclothes before and after.	
Disposal	Epsom	
Next of Kin	Mr. H. Carpenter. Cal. 6.	
	117 Pinewood Ave.	Scabies cured. Disabling in shoulder very slight - no movement.
	Toledo Ohio.	1 Nov 8
	Transf'd to Uxbridge 9-10-16	
	H.B. Evans.	
	Capt Chase	

## MEDICAL CASE SHEET.\*

No. in  
Admission  
and  
Discharge  
Book.  
33

Regimental No.

Rank.

Surname.

Christian Name.

53556

Pte

Carpenter

JL

Unit.

Age.

Service.

Year

1916

18 Canadians.

24

22  $\frac{2}{12}$ Station  
and Date.

Disease

Bomb W<sup>d</sup> R<sup>t</sup> Shoulder

EAST LEEDS WALK

Marshall's Road, Leeds.

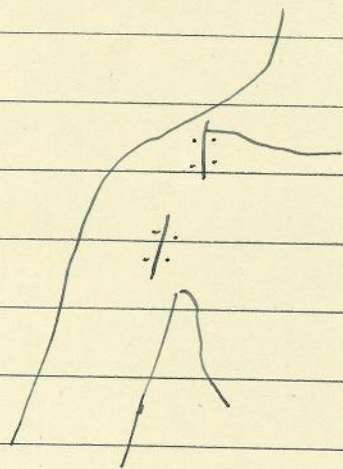
8-8-16

Wounded 26. 7. 16 m. Ypres.

Antitetanic serum next day.

Operation 30. 7. 16 for  
removal of metal.Wounds sutured — now  
almost healed.

For Auxiliary Hosp.



J. Hough

Capt. Rame C.B.

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

Station  
and Date.[illegible]

# CASE HISTORY SHEET.

No. 53550 Rank Sgt. Name Carpenter, H. Age 27  
Unit 1. Div Completed years of service C. 6 6. 5 18  
Where and how long } C. 12 6. 12 12  
Date of admission 26. 3. 19 Date of discharge 5-4-19  
Diagnosis G.P.W. Rt. knee Place of origin France

## CONDITION ON ADMISSION AND PROGRESS OF CASE

off 4 1/2" scar across inner surface right knee, not adherent to deeper tissue. Tending to pressure over lower end of scar. Cannot flex knee fully, locks 10° all other movements normal. Has 2 areas of shrapnel on right shank and left side - in disability. Subj. no complaints, claims knee cannot be disabled.

## FAMILY HISTORY

(Tuberculosis, mental or nervous diseases.)

## TREATMENT

(Especially any specific or special form.)

## CONDITION ON DISCHARGE

(and disposal made of case.)

Date 5-4-19 Cat B.

Medical Officer i/c case.

# ATTESTATION PAPER.

No. 53550

Folio. 14

## CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

### QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name? *Hamilton Carpenter*
2. In what Town, Township or Parish, and in what Country were you born? *Wallaceburg Ont.*
3. What is the name of your next-of-kin? *Margaret Bouman*
4. What is the address of your next-of-kin? *Goldo. Ohio*
5. What is the date of your birth? *24th October 1891*
6. What is your Trade or Calling? *Laborer*
7. Are you married? *no*
8. Are you willing to be vaccinated or re-vaccinated? *Yes*
9. Do you now belong to the Active Militia? *no*
10. Have you ever served in any Military Force? *27th Regt. 1 year*  
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 } *Yes*  
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? } *Hamilton Carpenter*

(Signature of Man).

*Elmer J. Baufford* (Signature of Witness).

### DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *Hamilton Carpenter*, 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.

*Hamilton Carpenter* (Signature of Recruit)

Date *2nd Nov* 1914. *Elmer J. Baufford* (Signature of Witness)

### OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Hamilton Carpenter*, 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.

*Hamilton Carpenter* (Signature of Recruit)

Date *2nd Nov* 1914. *Elmer J. Baufford* (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 *Chatham* this *2nd* day of *November* 1914.

*H. D. Smith* (Signature of Justice)

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

*W. H. H. H.* (Approving Officer)

# Description of Hamilton Carpenter on Enlistment.

Apparent Age.....23 years.....✓ months.  
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

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

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

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

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

Complexion.....dark

Eyes.....brown

Hair.....brown

Religious denominations. { Church of England.....yes  
Presbyterian.....  
Wesleyan.....  
Baptist or Congregationalist.....  
Other Protestants.....  
(Denomination to be stated.)  
Roman Catholic.....  
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.....2nd Nov.....1914.

Place.....Chatham Ont.

Charles B. Bell Capt.  
Amc  
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.

Hamilton Carpenter 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. H. H. H. (Signature of Officer)

Date.....28th Nov.....1914.

I, Hamilton, Pearson, CARPENTER. (Name in full)  
Regimental No. #53550, late of the 18th. Batt.  
Canadian Infantry Battalion, Canadian Expeditionary Forces,  
and now a patient at: Queen Alexandra Sanatorium, LONDON, Ont.  
do hereby revoke all former Wills by me made, and declare this  
to be my last Will, and Testament.

I Give, Will, and Bequeath my estate, Real, and Personal,  
(including all monies which may be to my credit with the  
Department of Soldiers' Civil Re-establishment, LONDON, Ont.)  
to: my Wife, Delina, Carpenter.

Box, 699, WALLACEBURG, Ontario.

I appoint as Executrix of this my Will,  
my Wife, Delina, Carpenter. Box 699, WALLACEBURG, Ont.

Signed at: QUEEN ALEXANDRA SANATORIUM, LONDON, ONT.

this 16<sup>th</sup> day of Sept 1921.

Hamilton Carpenter  
Signature of Testator.

Signed and acknowledged by the Testator as and for his last Will  
in the presence of us both present 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. Blue Carnes

Address of Witness. Queen Alexandra Sanatorium, LONDON, Ont.

Occupation of Witness. D.S.C.R. Representative.

Signature of Second Witness. W. M. Thompson

Address of Witness. Queen Alexandra Sanatorium, LONDON, Ont.

Occupation of Witness. Senior Clerk, Orderly Room.

## PROCEEDINGS OF A MEDICAL BOARD.

Dated at 30<sup>10</sup>/<sub>11</sub> 1916.No. 53550 Rank PL Name CARPENTER H.Local Unit Acac Overseas Unit 18th BATT Age 25Examination held at Shoreham Bgs seaDISABILITY:  
Overseas—Local.  
(scratch one out)L SW Rt ShoulderPRESENT CONDITION.Two scars Rt Shoulder - moment-  
unimpaired - superficial wound.  
L SW. Shoulder R.

## BOARD RECOMMENDS:—

1. Fit for Duty.....
2. Fit for duty after apx 6 wks ..... weeks' physical training.
3. Fit for Temporary Base Duty..... weeks.
4. Fit for Permanent Base Duty.....
5. Discharge.....

APPROVED  
CAPTAIN, C.A.M.C. FOR D. OF R. & O. FOR  
BRIGADIER GENERAL  
COMMANDING  
CANADIAN DIVISION.

Signatures:—

Members

J. A. C. C. C. ..... President.  
R. H. H. H. H. .....  
 .....  
 .....

APPROVED

Dated at Shoreham, Oct 30 1916.

C. M. A. C.  
 For A.D.M.S. C.  
 for A.D.M.S., Canadians, London Area.

THIS FORM WILL BE USED FOR ALL RANKS  
**MEDICAL HISTORY OF AN INVALID**

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" issued by the B.P.C. and instructions issued by Militia H.Q., Ottawa, will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of Sections 1 to 17 of this Form and will obtain the signature of the invalid to the "Statement," page 3. The President of the Board of Medical Officers is responsible for the proper completion of sections reserved for recording the "Opinion of the Medical Board."
3. In answering the questions, Medical Officers will carefully obtain and record the invalid's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the invalid concerned, from witnesses, or from documents, Regimental or otherwise.
4. Special care is required in answering question 9. Read the questions carefully. All questions must be answered.
5. If space provided under any section is insufficient add another sheet. Such sheets must be initialled by the Medical Board.
6. A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board."
7. Under no circumstances may information other than that in sections 7, 8, 9 and 10 be communicated to the invalid, directly or indirectly.
8. The nomenclature of diseases must be followed, if possible, as described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London (1915), by Messrs. Harrison & Sons.

STATION London Ont DATE 3-4-19

1. 1 (a) Unit D O #1 (b) Regimental No. 53550 (c) Rank Sgt  
 (d) Surname CARPENTER (e) Christian name Hamilton  
 (f) Home address 1835 Palmyra Av. Toledo Ohio  
 (g) Next of Kin Mrs Ray Denman (h) Relationship Mother  
 (i) Address of Next of Kin same address

2. Age last birthday 27 Date of birth 24-10-1891

3. Enlistment, or Appointment (if an Officer) (a) Place Chatham Ont (b) Date 2-11-14

4. Personal description:

(a) Height 5' 4 1/2" (b) Weight 141 (c) Complexion medium  
 (stripped)

(d) Colour of hair Dark Brown (e) Colour of eyes Brown (f) Identification marks, Scars, etc.

4" scar on surface right knee

5. Former trade or occupation auto mobile repair

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
.	.

	PERIODS	
	From	To
Canada	<u>2-11-14</u> <u>22-2-19</u>	<u>27-4-15</u> <u>2-4-19</u>
England	<u>27-4-14</u> <u>12-8-18</u>	<u>14-9-15</u> <u>12-2-18</u>
France or other theatres of War	<u>14-9-15</u> <u>1-3-18</u>	<u>25-7-16</u> <u>2-10-18</u>

7. Original disease, or injury Slight loss of function right knee

(a) Date of origin 27-9-18 (b) Place of origin France

(c) Cause g sw

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.)

Slight loss function right knee

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.)

of Scar 4 1/2 x 3/4" across inner surface of right knee (operation for opening up knee joint) scar is not adherent to deep tissue, is under a pressure over inner end. Flexion of knee lessened about 10°

Subj. no complaints

(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).)

First wounded - shoulder 25-7-16. flesh wounds no disability  
Second knee and side & left thigh 27-9-18. all were shrapnel wounds and all healed with no disability except right knee and it is slight

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).)

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

*Shrapnel scars two in right shoulder - in disability*  
*3 1/2" scar right arm - in disability*  
*3 1/2" scar left thigh - in disability*

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

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

*not applicable*

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.)

*22nd General Cameron's Force, examine to fully open up knee joint by removal of pieces of shrapnel & drainage.*  
*Cardiff, splints, rest, massage*

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? *yes*  
 (If not, briefly state why)

17. Recommendations.

*Fit for duty overseas*

*John H. Muller*

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, *H. Carpenter*, 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

*H. Carpenter* *Sergeant* Rank.  
*TLT* Signature of invalid examined.

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.)

Slight loss function right knee

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.)

off Scar  $4\frac{1}{2} \times \frac{3}{4}$ " across inner surface of right knee (operation for opening up knee joint) scar is not adherent to deep tissue, is under a pressure over inner end. Flexion of knee lessened about  $10^\circ$

Subj. no complaints

(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).)

First wounded - shoulder - 25-7-16. flesh wounds  
no disability

Second knee and side & left thigh  
27-9-18. all were shrapnel wounds and  
all healed with no disability except  
right knee and it is slight

R.O. MAY 4 1921  
A B MAY 4-1921

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.  
*The board agree, that the disability is slight Sect 9 "would add. "Soldier complaining that he can not fully flex right knee". Soldier can walk any distance at his own gait. Sect 17 Service abroad not general"*

19. Is the invalid 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.)  
(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 invalid  
(a) ~~Does require treatment.~~ (Give the nature of the condition and of the treatment required and its probable duration.)  
*Does not 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.)

21. It is recommended that the invalid be discharged. (When not for discharge add special recommendation.)  
*fit for service overseas not general*

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 *London Ont.*  
DATE *3/4/19.*  
*Thomas Major Campbell* President.  
*A. F. Laurin* Members

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.

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

APPROVED BY *G. B. MacLachlan* Assistant Director of Medical Services. DATE *3-4-19*  
APPROVED BY \_\_\_\_\_ Director-General of Medical Services. DATE \_\_\_\_\_

# ATTESTATION PAPER.

No. 74

Folio. E

## CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

### QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name? Hamilton Carpenter
2. In what Town, Township or Parish, and in what Country were you born? Wallaceburg Ont.
3. What is the name of your next-of-kin? Margaret Blouman  
What is the address of your next-of-kin? Toledo Ohio
4. What is the date of your birth? 24th October 1891
5. What is your Trade or Calling? Laborer
6. Are you married? no
7. Are you willing to be vaccinated or re-vaccinated? Yes
8. Do you now belong to the Active Militia? no
9. Have you ever served in any Military Force? 27th Regt 1 year  
If so, state particulars of former Service.
10. Do you understand the nature and terms of your engagement? Yes
11. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE? Yes

H. Hamilton Carpenter (Signature of Man).  
Elmer J. Boufford (Signature of Witness).

### DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Hamilton Carpenter, 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.

H. Hamilton Carpenter (Signature of Recruit)  
Date 2nd Nov 1914. Elmer J. Boufford (Signature of Witness)

### OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Hamilton Carpenter, 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.

H. Hamilton Carpenter (Signature of Recruit)  
Date 2nd Nov 1914. Elmer J. Boufford (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 Chatham this 2nd day of November 1914.

H. W. S. J. C. (Signature of Justice)

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

W. H. H. (Approving Officer)

# Description of Hamilton Carpenter on Enlistment.

Apparent Age 23 years ✓ months.  
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

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

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

Height 5 ft. 4 1/2 ins.

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

Complexion dark

Eyes brown

Hair brown

Religious denominations. { Church of England yes  
Presbyterian .....  
Wesleyan .....  
Baptist or Congregationalist .....  
Other Protestants .....  
(Denomination to be stated.)  
Roman Catholic .....  
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 2nd Nov 1914.

Place Glasgow, Ont

Blair G. Bell Capt  
AMC  
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.

H Carpenter 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. H. H. H. (Signature of Officer)

Date Nov 26 1914.

**(SERVICE AND CASUALTY FORM Part II).**

Regiment or Corps 18<sup>th</sup> Batten Regimental Number 53550

\*Substantive Rank Pte Surname Carpenter Christian Names Hamilton

\*Acting Rank \_\_\_\_\_

(\* To be entered in pencil to facilitate alteration.)

(A) Report		(B)	(C)	(D)	(E)	(F)
Date.	From whom received	Authority of Part II. of Orders	Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I., 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	Place of casualty	Date of promotion, reduction, reversion, casualty, &c.	Remarks, and initials and rank of an officer
21-10-18 <i>R. v. L. S. S.D.</i>	<i>26088</i>	<i>D.O. 248</i>	<i>TOS from 107 Bn</i>	<i>Withly</i>	<i>12-10-18</i>	<i>Pearce Lieut</i> <i>for Major i/c Records, G.H.Q.</i>
<i>24.2.19</i>	<i>J.S.</i>	Taken on strength No. 1 District Depot.....	<i>London W.I.</i> <i>M. J. Smee</i> <i>Capt</i> <i>for CO. NO. 1 DISTRICT DEPOT</i>			
<b>DISCHARGED</b>		LONDON, ONT. APR 9. 1919	MEDICALLY UNFIT <i>S. Mitchell</i> O. C. Discharge Section, No. 1 D. D.			

**To be folded on this line.**

**Nothing to be written in this margin.**

A1834	W.6425---P1600	500,000	10/18	G.W.P.Co.3973
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DISCHARGED

LONDON, ONT.  
APR 9 1919

MEDICALLY UNFIT

O. C. Discharge Section, No. 1 D. D.

[illegible]

**Nothing to be written in this margin.**

Service or  
Proficiency Pay

Signature O.C.  
Company, etc.

Character  
Geo R Bradley Major OLCy

Place	Date of offence	Rank	Cases of Drunkenness	Offence	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remarks
Brampton		A/Cpl		S.O.S. 4 <sup>th</sup> Res. Bn. on transfer to 5 <sup>th</sup> Div Witley effect 29-6-17	Part 2 order no. 157 4-7-17			Lt Col. H. A. C. [Signature] CAPTAIN, ADJUTANT 4TH CANADIAN RESERVE BATTALION.	
				Invalised wounded. 12/10/18. No 2. D.O. 109 d/23.10.18.	[Signature]			CAPT. & ADJT. FOR OFFICER COMMANDING, 102nd CANADIAN INF. BN.	

[illegible]

1 P.M.

ORIGINAL

10 - Ca - 154  
LAST PAY CERTIFICATE

Regt. No. *53550* Rank *Sgt* Name *Carpenter, Hamilton*  
 Corps *18Br* who was Discharged  
 on *9<sup>4</sup>/<sub>19</sub>* 1919 to

The following is a statement of the account of the above  
 named from *1<sup>4</sup>/<sub>19</sub>* to *9<sup>4</sup>/<sub>19</sub>*

from mon. of  
 Bal Dr from L.P.C.

from mon. of *Mar 784.57*  
 Bal Cr from L.P.C.

ASSIGNED PAY:

Regt. Pay *9* dys. @ \$ *1.50* *13.50*  
 F'd All. *9* dys. @ \$

SEPARATION ALLOWANCE:

SEPARATION ALLOWANCE:

OTHER CHARGES:

OTHER CREDITS:  
 Clothing Allowance 35.00

PAYMENTS:

Subsistence @ 80¢ per day

*OR 9 9-4-19**833.07*

Bal. Credit (to be pd.)

Bal. Dr. (to be deducted)

*W19**833.07*

(from soldier \$ )  
 (from Dependent \$ ) *833.07*

SEPARATION ALLOWANCE

ASSIGNED PAY

VICTORY BND

at \$ per month  
 has been to  
 by this Unit

at \$ per month  
 has been to  
 by this Unit

Subscribed \$  
 Pd. by \$  
 other Units  
 pd. by this  
 Unit

Dependent or Beneficiary :

Address:

REMARKS: D.C. *98* Discharged  
 on Demobilization. *med cert 9<sup>4</sup>/<sub>19</sub>*

Date of Enlistment: *2-11-14*If married and if Separation Allowance card submitted. *None*

I have carefully examined this statement of account and find it  
 to be a correct extract from the Paylist of this Unit.

Paymaster  
District Depot

Date: *Apr 9, 1919*  
 London, Ontario.

No. 1

LONDON, ONT.

*J. D. Patterson* Captain.  
 Paymaster, No. 1 District Depot.

# TRAINING—HISTORY SHEET

DEPOT BATTALION, CANADIAN EXPEDITIONARY FORCE

191.....

No. .... Rank ..... Name ..... Company .....

WEEK OF TRAINING	FIT FOR TRANSFER TO HIGHER WEEK *	DATE	FIT FOR TRANSFER TO HIGHER PERIOD *	DATE	(Information to assist in carrying on training from point left off in Canada, i.e. aptitude of man, results of standard tests, range practices fired, bayonet training, etc.)
PERIOD I, 1st Week.....			}		
2nd " .....					
PERIOD II, 3rd " .....			}		
4th " .....					
5th " .....					
6th " .....					
PERIOD III, 7th " .....			}		
8th " .....					
9th " .....					
10th " .....					
PERIOD IV, 11th " .....			}		
12th " .....					
13th " .....					
14th " .....					

\*Initials of officer in charge of week or period of training.

M. F. W. 113.

200M.—5-18.  
1772-39-1110.

(O. C..... Depot Battalion,

Regiment.)

# CANADIAN EXPEDITIONARY FORCE

## Discharge Certificate

This is to Certify that No. **53550** (Rank) **SERGEANT**

Name (in full) **CARPENTER, Hamilton** enlisted in  
the **18th BATTALION, C.O.M.F.**

CANADIAN EXPEDITIONARY FORCE at **CHATHAM, ONT.,** on the **SECOND**  
day of **NOVEMBER,** 19 **14.**

HE served in **FRANCE (with 18th BATTALION)**

and is now discharged from the service by reason of **MEDICALLY UNFIT**

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

Age **27**

Height **5 - 4½**

Complexion **DARK**

Eyes **BROWN**

Hair **BROWN**

Marks or Scars

**G. S. W. RIGHT SHOULDER, THIGH  
AND LEG.**

Signature of Soldier

Issuing Officer

Date of Discharge

**DISCHARGE SECTION  
APR 9 1919  
No. 1 District Depot**

**R.O.C. DISCHARGE SECTION, NO. 1 D.D.**

Signed at **LONDON, ONT.,** this **NINTH** day of **APRIL,** 19 **19**

in Military District No. **ONE**

File Reference No. **IDD-10-C-616**

**ID-30-C-1476**

N.B.—As no duplicate of this Certificate will be issued, any person finding same is requested to forward it in an unstamped envelope to the Secretary, Militia Council, Ottawa, Canada.

# CANADIAN EXPEDITIONARY FORCE

## Discharge Certificate

No. .... (Rank) ..... Name .....

Unit .....

Address on Discharge .....

Character and Conduct .....

Former Occupation .....

Special Qualifications of Value in Civil Life .....

Medals and Decorations .....

Remarks .....

Signed at ..... this ..... day of ..... 19 .....

.....  
Name of Officer

.....  
Rank

.....  
Appointment

On demobilization the particulars called for on the back of this certificate will not be completed.

Rank

*Pte.*

Name

CARPENTER Hamilton

Reg'l No.

53550

Unit

18th Battn.

If in perm. Corps,

What Unit?

Married or Single

Single

Place and Date of Enlistment

Chatham, Ont. 2nd Nov. 1914

Place of Birth

Wallaceburg, Ont.

Name and Address, Next-of-Kin

Margaret Bonman, Toledo, Ohio.

Relationship

Assigned Pay Monthly \$

Payable to

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						
1/5	31/5	31	1	31	31	10	310		3410			3350			3350	160	
1/6	30/6	30		30	30		3		33			30		220	3320	240	2 exp. #252
1/7	31/7	31		31	31		310		3410			3350			3350	4	
								253	253						653		Cr. Exchange
1/8	31/8	31	1	31	31	10	310		3410	211	321	3404		110	3314	546	Forfeit 1 day #349
1/9	30/9	30		30	30		3		33	364		367			267	3579	
1/10	31/10	31		31	31		310		3410	484		522			522	6464	
1/11	30/11	30		30	30		3		33	522		267			267	95	
1-12	31-12	31		31	31		310		3410	578		361			1662	11248	
1-1-16	31-1-16	31		31	31		310		3410	708		261			522	14136	
1-2	29-2	29		29	29		290		3190	806		262			523	16803	
March		31		31	31		310		3410	944		261			522	19691	
				336				3360	253	37213		17192		330	17522		Checked <i>J. H. H.</i>

BALANCE TRANSFERRED TO NEW LEDGER.

[illegible]

ASSIGNED PAY.	ENGLAND OR CANADA.	SEPARATION ALLOWANCE.	ENGLAND OR CANADA.	NAME:-	NUMBER:-						
<i>Nil.</i>	*		*	<b>CARPENTER</b> <i>Hamilton</i>	<b>53550.</b>						
EFFECTIVE DATE:-	EFFECTIVE DATE:-	PARTICULARS OF RANK OR APPOINTMENT									
AMOUNT:-	AMOUNT:-	AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT							
NAME, ADDRESS, RELATIONSHIP & AUTHORITY { WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.		<i>BD. 67 4<sup>th</sup> Reg. 21/3/17</i>	<i>21/3/17</i>	<i>corporal</i>							
		<i>BD. 51 3/6/18 102 Bn</i>	<i>1. 3. 18</i>	<i>Conf'd in Rank of Corporal</i>							
		<i>B.O. 89. 13/9/18</i>	<i>8. 9. 18</i>	<i>Lieut Sergeant</i>							
		<i>B.O. 96 25/9/18</i>	<i>24. 8. 18</i>	<i>Sergeant</i>							
		UNIT AND TRANSFERS									
		ORIGINAL UNIT:- <i>18<sup>th</sup> Bn.</i>									
		DATE ACCOUNT FIRST OPENED:- <i>1/4/16</i>									
		AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S'D	UNIT TRANSFERRED TO						
					<i>164<sup>th</sup> Bn</i>						
		<i>BD. 10 28/2/18</i>	<i>28/2/18</i>	<i>25/4/18</i>	<i>102 Bn</i> ✓						
				<i>15/4/19</i>	<i>Canada Sent</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.						
<i>2/7/18</i>	<i>13713</i>	<i>Bruton</i>	<i>£10</i>	<i>2/7/18</i>	<i>13713</i>						
<i>2/11/19</i>	<i>13713</i>	<i>Bruton</i>	<i>£10</i>	<i>2/11/19</i>	<i>13713</i>						
PARTICULARS OF RENDERING NON-EFFECTIVE:- <i>Invalided to Canada 1/3/19 - Jan 6<sup>th</sup> 1925 10/1/19 L.P.C. Blee \$ 763.68</i>											
MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
<i>1918</i>											
<i>Mar. 31</i>	<i>Bal. fwd.</i>								<i>425.88</i>	<i>423.50</i>	
<i>April</i>	<i>C.P.</i>	<i>36</i>		<i>8. 4. 4. 18 102<sup>nd</sup> Bn (1)</i>	<i>535</i>						
				<i>75. 26. 4. 18 102<sup>nd</sup> Bn (22)</i>	<i>535</i>				<i>451.18</i>		
		<i>36</i>			<i>1070</i>					<i>438.50</i>	
<i>May</i>	<i>C.P.</i>	<i>37.20</i>		<i>132. 8. 5. 18 (3)</i>	<i>535</i>						
				<i>195. 17. 5. 18 (10)</i>	<i>357</i>				<i>479.46</i>	<i>453.50</i>	
		<i>37.20</i>			<i>892</i>						
<i>June</i>	<i>C. Q.</i>	<i>36</i>		<i>539 4/6 4 C.C.R.C (3)</i>	<i>446</i>						
				<i>665 17/6 (8)</i>	<i>357</i>				<i>507.43</i>	<i>468.50</i>	
		<i>36</i>			<i>803</i>					<i>457.50</i>	
<i>July</i>	<i>C. Q.</i>	<i>37.20</i>		<i>778 1/7 (11)</i>	<i>446</i>						
				<i>429 8/7 102 Bn (10)</i>	<i>535</i>						
				<i>438 17/7 (11)</i>	<i>535</i>				<i>529.47</i>	<i>483.50</i>	
		<i>37.20</i>			<i>1516</i>					<i>472.50</i>	
<i>Aug</i>	<i>✓</i>	<i>37.20</i>		<i>500 6/8 110 C.D. B (9)</i>	<i>357</i>						
				<i>554 17/8 (10)</i>	<i>357</i>				<i>559.63</i>	<i>498.50</i>	
		<i>37.20</i>			<i>714</i>					<i>487.50</i>	
<i>Sep.</i>	<i>✓</i>	<i>36</i>		<i>686 19/9 (8)</i>	<i>357</i>				<i>591.96</i>	<i>513.50</i>	
	<i>adpt pay as recd. 8-30/9/18. 23 days @ 10</i>	<i>230</i>		<i>628 8/9 (18)</i>	<i>357</i>					<i>522.50</i>	

## UNIT AND TRANSFERS

ORIGINAL UNIT:- 18<sup>th</sup> Bn.

DATE ACCOUNT FIRST OPENED:- 1/4/16

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S'D	UNIT TRANSFERRED TO
			164 <sup>th</sup> Bn
B.O. 10	28/2/18	28/2/18	102 Bn ✓
		15/4/19	Canada Sect

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
2/7/18	00005	Trelo-8 <sup>d</sup>	16				
2/1/19	13413	Buxton £10	48 6/7				

## DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
B.O. 96 28/2/18	102 Bn	1 35	- 15	
B.O. 89- 12/4/18	102 Bn	1 10	- 10	
		1 15	- 15	

## PARTICULARS OF RENDERING NON-EFFECTIVE:

Invalidated to Canada 1/3/19 - Jan 6 A/125 10/1/19 L.P.C. Blee \$ 763 68

MONTH 1918	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
Mar. 31	Bal. fwd.								425 88	423 50	
April	C.P.	36		8. 4. 18 102 <sup>nd</sup> Bn (1)	5 35						
				75. 26. 4. 18 102 <sup>nd</sup> Bn (22)	5 35				451 18		
		36			10 70					438 50	
May	C.P.	37 20		132. 8. 5. 18 (3)	5 35						
				195. 17. 5. 18 (10)	3 57				479 46	453 50	
		37 20			8 92						
June	C. P.	36		539 4/6 4 C.C.R.C. (3)	4 46						
				665 17/6 ✓ (8)	3 57				507 43	468 50	
		36			8 03					477 50	
July	C. P.	37 20		778 1/7 ✓ (11)	4 46						
				429 8/7 102 Bn (10)	5 35					483 50	
				438 17/7 ✓ (11)	5 35				529 47	472 50	
		37 20			15 16						
Aug	✓	37 20		500 6/8 11 <sup>th</sup> C.D. 8 (9)	3 57						
				554 17/8 ✓ (10)	3 57				559 63	498 50	
		37 20			7 14					513 50	
Sep.	✓	36		686 17/9 ✓ (8)	3 57				591 96	502 50	
				628 8/9 ✓ (8)	3 57					588 50	
	adpt pay as Redpt. 8-30/9/18. 23 days @ 10 <sup>p</sup> 15 days @ 30 <sup>p</sup> 4 <sup>p</sup>	2 30							599 79	519 50	
	- do. as Sgt. 24/8-30/9/18 23 days @ 20 <sup>p</sup> 4 <sup>p</sup>	9 10								503 50	
		37 40			7 14					532 50	
Oct.	Sgt. P.	46 50		49857 5/11 Cardiff (23)	9 73				636 56	558 50	
		46 50			9 73					573 50	
Nov	"	45		60390 18/11 Newport (18)	9 73					588 50	
Dec	✓	46 50							764 83	588 50	
Jan	✓	46 50							812 51		
	Interest on Def Pay	47 68									
		155 18									

1919

Imperial  
Checked 14/1/19

1919

NUMBER

53550

RANK

NAME

CARPENTER

H.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
									812.51	588.50	
Feb				7074 21/19 Kirkdale (entire) (3)	4.57						
				12713 2/1 Buxton (8)	48.67						
				8163 4/2 ✓ (10)	4.87						
				7188 18/2 ✓ (13)	4.87				749.23		
					63.28						
apl				1st Lt. 2/7/18 44505 Field	16				749.07		
				S.O.S. Canada 24/2/19. S.L. Kirk. 2 COAD							

S.O.S. Canada <sup>24</sup>/<sub>2/19</sub> SL Kirk - 2 COAD

MARRIED OR SINGLE *S.*

PLACE OF BIRTH

*Wallaceburg, Ont.*

NAME AND ADDRESS OF NEXT OF KIN

*Margaret Bonman*

*Toledo, Ohio*

RELATIONSHIP OF NEXT OF KIN

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF

SEPARATION ALLOWANCE MONTHLY \$

EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &

PARTICULARS	EFFECTIVE DATE
<i>106 4/6/14</i>	<i>21/3/14</i>
<i>Reverts to Pfc. (Proceeding O'Connell)</i>	<i>26/2/18</i>
<i>B.O. #9. 25/2/18 (Cancelled)</i>	<i>26/2/18</i>

ADMISSIONS TO HOSPITAL, &

DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME

DATE	PAY				FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE					
	NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT					1	2	No	DATE	No.	DATE
			\$	C.			\$	C.			\$	C.									
1916																					
Mar 31			336				33	60						2 53							
			336				33	60						2 53	87 2 13						
Apr 1-30	30	100	30	-	30	10	3								33 -	986	1024				
May 1-31	31		31		31		3 10								34 10	1086 15.5	1107 27.5				
June	30		30		30		3								33 00						
July	31		31		31		3 10								34 10		1158 5.7				
Aug	31		31		31		3 10								34 10		1190 14.7				
Sep 1-30	30		30		30		3								33						
-	-		-		-		-								-						
Oct	31		31		31		3 10								34 10						
Nov	30		30		30		3								33	540 8/11	2634 24/10/11				
Dec	31		31		31		3 10								34 10	1698 4/10	7000				
			61 10													3633 30/11	607 16/11				
1917 Jan	31		34 10												34 10	23 7 20 12	4000 7.117				
Feb	28		30 80												30 80						
Mar	31		34 10												34 10						
			771 10											2 53	773 63						

Checked *Spurshing*



~~Mr~~ Carpenter H

MONTH PARTICULARS CR.1 CR.2

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFER. RED. PAY	SEP. ALLICE. ENG.
		455 36							455 36	314 <sup>50</sup>	
Oct.	Cpl. <del>37 20</del>	37 20							492 56	331	
Nov.	Cpl. P	36		AR 379 164 Bn 15-10-17	9 73				347 <sup>50</sup>		
Dec.	Cpl. P	37 20		AR 420 31-10-17	9 73						
				Dr. AR 276 164 <sup>th</sup> Bn 31/8/17	9 73						
				" " 162 4 <sup>th</sup> Res Bn 28/4/17	2 43						
				AR 457 14-11-17	9 73						
				Dr. AR 283 164 <sup>th</sup> Bn 10/9/17	41 35						
				Dr. AR 444 4 <sup>th</sup> Res 16/6/17	34 07						
				" AR 143 164 <sup>th</sup> Bn 15/9/17	9 74						
				" AR 189 do 31/7/17	4 87						
				" " 449 4 <sup>th</sup> Res Bn 16/6/17	4 87						
				" " 389 do 30/6/17	19 47						
				DNAR 509 4 <sup>th</sup> Res Bn 28-6-17	14 60						
				DNAR 365 164 Bn 30-7-17	9 73						
				DNAR 234 164 <sup>th</sup> Bn (4 <sup>th</sup> Res) 15-8-17	9 73				407 60		
1918	Jan Cpl. P	73 20		L.A.R. 671 4172 No 10/17	2 26				408 3	4364	
		37 20		Q 522 26/10/17	67						
				AR 498 30/11/17	12 17						
				" 536 5/12/17	9 73				390 <sup>50</sup>	380 <sup>50</sup>	
		37 20			22 57						

4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
				CREDIT	DEBIT			
220 59		3 20	517 06	256 57		215.50.		
		14 60	249 07					Differ Pay 11 days @ 10c
			315 07					
			316 27					
			349 27					
			389 47					3 <sup>00</sup> under rated fine 3 days @ 10c
			426 67					
1			731	455 36		31.4.50.		

CR 2	PARTICULAR	DR 1	DR 2	3 DR 4	BALANCE	DEFERRED PAY
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419 97 380 390 50

AR 658 17/12/17 12 17

AR 719 10-1-18 12 17

AR 776 31-1-18 12 17

AR 815 13-2-18 9 73

~~AR 815 13-2-18 9 73~~

~~in. Kelly 3 days 10c (for arrears)~~

AR 856 27/2/18 9 73

" 1392 102<sup>nd</sup> Bn 11/3/18 3 57

SNAR 1404 ✓ 14/3/18 5 35

1865

407 33

376

407.00

412

423 50

425 88

But for to New Ledger.

10-Ca-154

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

REGT. No. 5362

M. OR S.

NEXT OF KIN

RELATIONSHIP

PARTICULARS

EFFECTIVE  
DATE

AUTHORITY

ORIGINAL UNIT  
C. E. F. 18th B

ADDRESS

PLACE OF  
ATTESTATION

DATE OF  
ATTESTATION 2

IS SEPARATION ALLOWANCE PAID? *Nil.*

DATE EFFECTIVE

ASSIGNED PAY, \$

TO WHOM PAID

RELATIONSHIP

PAYABLE TO

ADDRESS

ADDRESS

STOP PAYMENT FORM  
ASSIGNED PAY  
RENDERED, DATE

DISCHARGED

MONTH	135 PAY AND F. A. 10		OTHER CREDITS		TOTAL CREDITS		ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED		REGI- MENTAL CHARGE
	NO. OF DAYS	RATE	AMOUNT				COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2	COL. NO. 3	PAY		
			\$	C.	\$	C.								\$	
E	31-1-19					763 68									
Feb.	28	150	42			694 07									
1-3-19	31	150	46	50	12	736 07									
1-4-19	9	180	13	50	35	784 57									
9-4-19	9	180	13	50	35	784 57									
WAR SERVICE GRATUITY															
183 days						420 00									
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