

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

Attestation Papers.....

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet.....

Compulsory Stoppages.....

Casualty Forms.....

Proceedings on discharge.....

Corps History Sheet.....

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

Parchment Certificate.....

Medical Report for Invalids.....

Medical History Sheet.....

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet.....

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate.....

A. F. B. - 122 - 1
M. F. W. - 392 - 1
M. H. C. Form. 132 - 2
M. F. W. - 192 - 1
A. F. B. - 268 - 1

M. F. W. 62. MFW 125 - 2
50m. - 9-16.
H. Q. 1772-39. 935. MFW. 138 - 1

DISCHARGE DOCUMENTS

Name **BAGNELL, ALEXANDER, DAVID**

Regt. No. **905 575** Rank **Pte**

Corps **136th Bn (#22, 7)**

Physically Unfit



402209

R. O. No.....

H. Q. No.....

012



3-17
22-17
26-17
2

Mrs Minnie B. Bagnall
Apt 8

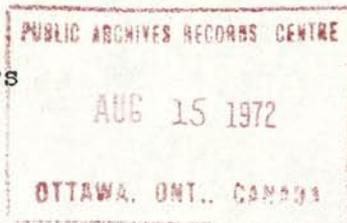
29 1/2 Simcoe Street S.
Oshawa, Ont.

Department of Veterans Affairs

STATEMENT OF SERVICE

IN THE

CANADIAN ARMED FORCES



805575

~~899~~

Service Rank and/or Number

Name

BAGNELL, Alexander ^{David}

- 1. Branch of Service: Army - 136th Battalion - CEF.
- 2. Date and Place of Birth: October 31, 1889
- 3. Date and Place of Appointment, Enlistment or Enrolment: March 13, 1916
- 4. Theatres of Service: Canada - Britain - France
- 5. Date and Place of Retirement or Discharge: 16 September 1918 - Toronto
- 6. Type of Retirement or Discharge: Honourable
- 7. Rank on Retirement or Discharge: Private
- 8. Medals and Decorations: British War and Victory Medals
- 9. Remarks:

Service in France with 87th Bn.

.....
Date

.....
Head, Accessions and Reference.

Ministère des Affaires des Anciens Combattants

ETATS DE SERVICE

Grade et (ou) numéro matricule.....Nom.....

1. Arme où le service a été accompli:

2. Date et lieu de naissance:

3. Date et lieu de la nomination, de l'engagement ou de l'enrôlement:

4. Théâtres de service:

5. Date et lieu de la retraite ou de la libération:

6. Genre de retraite ou de libération:

7. Grade à la retraite ou à la libération:

8. Médailles et décorations:

9. Remarques:

Date:

.....
Chef, accessions et référence.

Alexander David BAGNELL

805575

ARMY - 136th Battalion - C.E.F.

31 October 1889 Durham County, Ontario

13 March 1916 Bowmanville, Ontario

Canada - Britain and France.

16 September 1918 Toronto, Ontario

Honourable.

Private.

British War and Victory Medals.

Service in France with 87th Battalion.

29 $\frac{1}{2}$ Simcoe Street S.
Apt # 8
Oshawa, Ontario

August 15, 1972

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

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

250M.—1-16.
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps 136th OVERSEAS BATTALION, C. E. F.

Regimental No. 805575 Rank Pte Name Bagnell & Alexander David

C. E. F.

Enlisted (a) Mar. 13-16 Terms of Service (a) War & 6 Mos. Service reckons from (a) Mar. 13-16

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

Extended Re-engaged Qualification (b) Nil

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				

CERTIFIED CORRECT.
 7-10-16
 13-10-16
 21 NOV 1916
 7-10-16
 14-11-16
 GEN. RECORDS, LONDON.

			Halifax	25-9-16	
			Liverpool	6-10-16	
			W. Sandling	4-18-16	Pt. II 217
					Captain Adjutant 136th OVERSEAS BATTALION, C. E. F.
					136th OVERSEAS BATTALION, C. E. F.
			West Sandling	14-11-16	Pt. II O. 241
					CAPT. & ADJ.
					39TH BN. C.E.F.
15-11-16	C B.D.	Taken on Strength of 87th.Bn.		15-11-16	N.R.:D.O.Pt.II No.252
19-11-16	C.B.D.	Proceeding to Join Unit		19-11-16	N.R. d./18-11-16
25-11-16	O.C.Unit	Joined	Unit	22-11-16	B.213 D.C.S.63

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

[P.T.O.]

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
23-12-16	O.C. Unit	Attached to 182nd. Tunnelling Co.		21-12-16	B.213 D.C.S.91
20-1-17	do.	Returned to duty		13-1-17	B.213 D.C.S.93
3-2-17	do.	Attached to 182nd. Tunnelling Co.		29-1-17	B.213 D.S.S.98
17-2-17	do.	Returned to duty from Tun. Co.		15-2-17	B.213 D.C.S.103
16.6.17	"	Evacuated Wounded		9.6.17	B213
16.6.17	6 cas.	Bullet Wound L. leg.	adm.	9.6.17	226
28.6.17	18 Gen	do do	adm.	28.6.17	W.3034 W.4247
5.7.17	"	do do	L. blood sp.	11.7.17	" W.4766
5.7.17	6 Condys	do do	adm.	11.7.17	" W.4701
11.7.17	"	do do	to R. Condys	11.7.17	" W.1040
11.7.17	V " "	do do	adm.	11.7.17	" - W.037
28.7.17	4 C.100	L. O. S. A.		28.7.17	226
16.8.17	"	to R. Condys		16.8.17	"
18.8.17	4 C.100	Wound 4 R. leg		18.8.17	"
19.8.17	"	to Unit		19.8.17	"
19.8.17	W. Unit	Ground Unit		19.8.17	226
8.10.17	12.8.200	of W. H. Frige R. (accid)	Adm 12.8.200	8/10/17	W.326/9750/4518
		do	To 22.8.200	8/10/17	
		do	Adm do	8/10/17	W.326/9833/5004
9.10.17	22.8.200	do	To 50.7.	9/10/17	
10.10.17	4 Gen	do	Adm 4 Gen	10/10/17	W.3034/1474/5476
12.10.17	do	do	To England	12/10/17	W.2034/1558/5231
12.10.17	Ville de Liege	Invalidd Wounded & posted 1st 2 Rds		12/10/17	W.3083/10560. A.I.D. 120 d/20.10.17
14.10.17	H. Base	G.S. left Frige "accidental injury"	Field	14.10.17	auth: A. F. W. 3428

J. M. Anderson
 Lieutenant
 Lt. Col. ad.
 Cadm. Sec. 3rd Ech. S.A.O.

No. *805-675* RANK *Pte.*
805-575
805675

NAME *Bagnell a. D.*

T. O. S. *13-3-16* UNIT *136th Battalion C. E. F.*
(D.O. no 788 of 4-4-16)

M. D. *3.*

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1916</i> <i>Mar 13</i>	<i>1916</i> <i>Apr 30</i>	<i>L</i>	<i>Prom a/Sgt 4-16.</i>	<i>D.O. no 988 of 27-4-16.</i>
<i>May</i>		<i>L</i>		
<i>June</i>		<i>25.</i>		
<i>July</i>		<i>L</i>		
<i>Aug</i>		<i>L</i>		
<i>Sept</i>		<i>L</i>		

UNIT SAILED

SEP 25 1916

SURNAME.

Bagnell.

CARD NO.

CHRISTIAN NAMES

Alexander David.

503 Dis 16/1/18. 2 P. N. D. O.

148 of 12/1/18 FOLL. 2-D. D.

REGL. No.

805575

RANK

Pte

UNIT

136th.

Batt

FORMER CORPS

nil.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Bagnell, Mrs Grace Anne

RELATIONSHIP TO SOLDIER

Mother

ADDRESS

Bowmanville, Ont.

COUNTRY OF BIRTH

Canada, Bowmanville

DATE

Oct. 31st 1889

PLACE OF ATTESTATION

Bowmanville

DATE

Mar. 13th 1916

*0/8 25/9/16 545
2*



*R/C. 25-4-18 169
4-2*

MARRIED

SINGLE

yes

WIDOWER

TRADE OR CALLING

Clerk

RELIGION

Methodist.

DESCRIPTION.

APPARENT AGE

26 YEARS

5 MONTHS

HEIGHT

5 FEET

5 INCHES

CHEST MEASUREMENT

37 INCHES

EXPANSION

4 INCHES

COMPLEXION

Dark

EYES

Hazel

HAIR

Black.

DISTINGUISHING MARKS

nil.

MEDICAL EXAMINATION.

PLACE

Bowmanville

DATE

Mar. 13th 1916

Present Address Bowmanville.

24.1.40

This space to be for numbers

Proceedings on Discharge.



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

M.B.

No. 805675	
Rank Pte.	
Surname BAGNELL	
Christian Name A: EXANDER DAVID <small>NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.</small>	
Corps (Squadron, Battery or Company) 136th Bn (#2 D.D.)	
Date of Discharge SEP 16 1918	
Place of Discharge TORONTO, ONT.	
1. DESCRIPTION AT THE TIME OF DISCHARGE.	
Age 28 years..... months.	Descriptive Marks Face scars on left arm. G.S.W. left leg. 9-6-17 G.S.W. 4th finger left hand. 4-10-17 <i>Deceased April 1/32</i>
Height 5 feet..... 6 1/2 inches.	
Complexion Fair	
Eyes Blue	
Hair Fair	
Trade Freight Clerk.	
Intended place of residence } Bowmanville Ont. <small>(To be given as fully as practicable.)</small>	
2. The above-named man is discharged in consequence of Physical Unfitness	
<small>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.</small>	
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. Very Good <i>[Signature]</i>
	<small>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.</small>
4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)	Freight Clerk
	<i>K. R. O. 23-2-20</i>

P

M. F. B. 218.

100M.—1-17.

H. Q. 1772-39-113.

(OVER)

254 Comp 1/2 1/19
[Signature]

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

Nil

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

6. Medals and Decorations.....

Nil

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)..... TORONTO, ONT.

W. Robson Lieut. Captain,
For Lieut.-Colonel,
Commanding C.C. No. 2 District Depot.

(Date)..... SEP 18 1918

8. Certificate to be signed by the Soldier on Discharge

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

(Place)..... TORONTO, ONT. *A. L. Bagnell* (Signature of Soldier.)

(Date)..... SEP 18 1918 *A. L. Bagnell* (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) 2 years 200 days.

Total..... 2 years 200 days.

11. Confirmation of Discharge.

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

(Place)..... TORONTO, ONT.

(Signature)..... *W. Robson* Lieut. Captain,
For Lieut.-Colonel,
C.C. No. 2 District Depot.

(Date)..... SEP 18 1918

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.)

A. D. Bagwell

<p>Medical History Sheet (in the event such having been prepared)</p> <p>(c) Medical History Sheet (in the event such having been prepared)</p>	<p>Medical Report for Invalidity, Form B. 217</p> <p>Statement of Man's Account on or before Transfer and Last Pay Certificate, Form D. 872</p> <p>Medical History Sheet, Form B. 214</p> <p>Copies of Certificates, by C. T. in MS.</p>
<p>Proceedings on Discharge</p> <p>(a) Proceedings on Discharge</p> <p>(b) Affidavit</p>	<p>Reg. Conduct Sheet, Militia Form B. 203</p> <p>Proceedings on Discharge, Form B. 202</p> <p>Conduct Sheet, Form B. 201</p> <p>Attestation Paper, Militia Form B. 200</p>

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

List of Discharge Documents.

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

com.

Number 80 5575

Rank Pte.

10
V

Surname BAGNELL

Christian Name Alexander David

Units 87th Bn. Can. Inf. Theatre of War France

Date of Service 14. 11. 16.

Remarks

Latest Address Bowmanville, Ont.

Roll No.

B. Page 20314

200m.-6-21.4.

*DUE TO SERVICE
*NOT DUE TO SERVICE

HOSPITAL AS AN ADMISSION

WHERE FROM)

IT

IN CATEGORY

INVALID

WHERE TO)

CONDITIONS DIAGNOSED

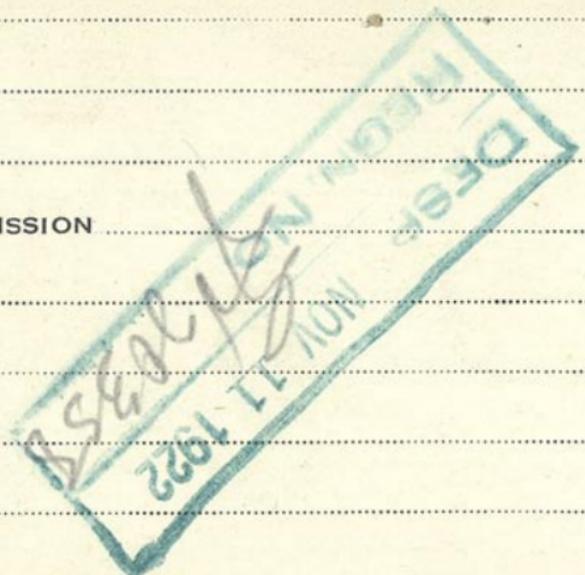
ADDRESS

HOSPITAL

STATION

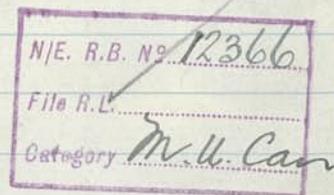
* CROSS OUT CONDITION NOT APPLICABLE.

(OVER)



A.G.R.

Rank _____ Name **BAGNELL, Alexander David** Reg'l No. **805575**
 Unit **136th Bn.** If in perm. Corps, }
 What Unit? } Married or Single **Single.**
 Place and Date of Enlistment **Bowmanville, 13TH March, 1916.** Place of Birth **Durham, Co.**
 Name and Address, Next-of-Kin **Mrs. Grace Anne Bagnell,**
Bowmanville, Ont. Relationship **Mother.**
 Assigned Pay Monthly \$ _____ Payable to _____ Relationship _____
 Separation Allowance \$ _____ Payable to _____ Relationship _____



Discharge, Date and Place _____ Reason _____ Character _____

H. W. & V., Ltd.—7165-16.

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS. Taken from Official Documents.
Date.	From whom received.				
		<i>Arrived in England S.S. Corsican 6-10-16</i>			
13-10-16	136 th Bn.	S.O.S. to 39 th Bn.	W. Sandling	6-10-16	Pt. 1 DO 217.
7-10-16	OC. 39 th	Taken on Strength	W. Sandling	6.10.16.	Pt. 2 DO239
14-11-16	OC. 39 th Bn.	S.O.S. overseas to 87 th Bn.	W. Sandling	14-11-16	Pt. 2 DO. 217
18-11-16	87 th Bn	T.O.S From Res Batten	In Pt. Field	18-11-16	Pt. 2 DO. 252
10-7-17	---	Adm 18 General Hosp.	Samiers	28.6.17	b2 A 251. GSWZ Leg.
14-7-17	---	Transf. to bowal Depot.	Staples	5.7.17	b2 A 255
21-7-17	---	5 bowal Depot.	bayeux	11.7.17	b2 A 260
7-8-17	---	Discharged	---	27.7.17	b2 A 273.
16-10-17	1 st Div.	Adm 22 has bearing Sta	Pt. Field	8-10-17	b2 A 37. SGT Hand

R.F.B. 103 CHECKED
20 NOV 1916

Jgs

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.				
19.10.17	1 st Lieut.	Adm 4 General Hosp.	Camiers	10.10.17	b2C 40. GSW & Linger Acc
17.10.17	1 st Lieut.	Adm Berrington War Hosp	Shrewsbury	13.10.17	b2B 38. 9LT & Hand
20.10.17	1 st Lieut. R.D.	L.O.S. from 84 th Bn.	Shoreham	13.10.17	PrEDO 199. + 84 th Bn. H/O 120 4/20.10.17
18.4.18	O R	Invalided to Canada ex 5 th Can Gen Hosp	Liverpool	15.4.18	Ch. B #191
22.4.18	"	to P.O. to Canada for further medical treatment	P. Shott	15.4.18	Pt. 98.
		Dis Depot for Further Treatment	^{MD 2} Toronto	24/4/18	NR 445

ATTESTATION PAPER.

No. 805672.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION. (ANSWERS.)

- 1. What is your surname? *Bagnell*
- 1a. What are your Christian names? *Alexander David.*
- 1b. What is your present address? *Bowmanville.*
- 2. In what Town, Township or Parish, and in what Country were you born? *Durham Co.*
- 3. What is the name of your next-of-kin? *M^{rs} Grace Anne Bagnell.*
- 4. What is the address of your next-of-kin? *Bowmanville Ont.*
- 4a. What is the relationship of your next-of-kin? *mother*
- 5. What is the date of your birth? *Oct 31 - 1889*
- 6. What is your Trade or Calling? *car R 18*
- 7. Are you married? *no*
- 8. Are you willing to be vaccinated or re-vaccinated and inoculated? *yes*
- 9. Do you now belong to the Active Militia? *no*
- 10. Have you ever served in any Military Force? *no*
If so, state particulars of former Service.
- 11. Do you understand the nature and terms of your engagement? *yes*
- 12. Are you willing to be attested to serve in the } *yes.*
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? }

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

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

Date *March 13* 1916. *A. D. Bagnell* (Signature of Recruit)
Lieut J. H. Pooney (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

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

Date *3-13* 1916. *A. D. Bagnell* (Signature of Recruit)
Lieut J. H. Pooney (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 *Bowmanville* this *13* day of *March* 191*6*.
[Signature] (Signature of Justice)

Description of Alexander David Bagnall on Enlistment.

Apparent Age 26 years 5 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. 5 ins.

Chest measurement { Girth when fully expanded 37 ins.
 Range of expansion 4 ins.

Complexion Dark

Eyes Hazel

Hair Black

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

None

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 Mar 13 1916 B. J. Hazlewood
Medical Officer.
 Place Barnanville

*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.

Alexander David Bagnall 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.

R. W. Smart Lt. Colonel (Signature of Officer)
O. C. 136th Overseas Battalion, C. E. F.
 Date March 13th 1916

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 805675 (Rank) Pte.

Name (in full) BAGNELL ALEXANDER DAVID enlisted in
the 125th Bn.

CANADIAN EXPEDITIONARY FORCE at Bowmanville on the 28th
day of March 1916

HE served in England and France
and is now discharged from the service by reason of Physical Unfitness

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

Age 28

Height 5' 6 1/2"

Complexion Fair

Eyes Blue

Hair Fair

Marks or Scars

Vacc scars on left arm. G.S.W.
left leg 9-6-17.

G.S.W. 4th finger left hand.
4-10-17

A. D. Bagnell

Signature of Soldier

W. Robson

Issuing Officer

Captain,

For Lieut. Colonel,

Rank

O.C. No. 2 District Depot.

Appointment

Date of Discharge Sept 16th 1918

Signed at Toronto Ont. this 16th day of Sept. 1918

in Military District No. 42

File Reference No. _____

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. 005675 (Rank) Pto. Name BAGNELL ALEXANDER DAVID

Unit

Address on Discharge 136th Bn Bowmanville Ont.

Character and Conduct

Very good (handwritten)

Former Occupation

Freight Clerk

Special Qualifications of Value in Civil Life

Medals and Decorations

Nil

Remarks

Gold stripes 200-2

Signed at Toronto Ont. this 16th day of Sept. 19 19

(Handwritten signature)

Name of Officer

Captain

For Lieut. - Colonel

O.C. No. 2 District Depot

Appointment

H.B.

Uniform not to be worn after date of discharge unless written authority has been granted by the G. O. C. of district.

This space to be left blank for the Chelsea Number.

583

On expiration of leave report to;

Military Orthopaedic Hospital,
Davisville Ave., Stop 7, Metropolitan Ry.

Army Form B. 268.

Proceedings on Discharge.

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

No. <u>805575</u>	Army Rank <u>Pte</u>
Name <u>Bagnell. Alexander David</u> <small>(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)</small>	
Corps <u>87th Battalion.</u>	
Battalion, Battery, Company, Depot, &c. <u>1st Quebec Regt Depot</u> (0) <small>(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)</small>	
Date of discharge _____	
Place of discharge <u>Invalided to Canada for further treatment.</u>	
1. <i>Description at the time of discharge.</i>	
Age _____ years _____ months Height _____ feet _____ inches Chest measurement { girth when fully expanded _____ ins. range of expansion _____ ins. Complexion _____ Eyes _____ Hair _____ Trade _____ Intended place of residence { _____ (To be given as fully as practicable) _____	Descriptive marks.
<small>(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)</small>	
2. The above-named man is discharged in consequence of _____ _____ _____	
<small>(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)</small>	
3. Military character :— _____	
4. Character awarded in accordance with King's Regulations :— _____ _____ _____ _____ _____ _____ _____ _____	
Certified that the above is an accurate copy of the character given by me on Army Form B. 2067* and that Army Form D. 489 was awarded in this case.	
_____ Initials of Commanding Officer.	

To be filled in on the soldier quitting the Colours.

Army Form B. 2088 has been issued to*

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

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

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

6. Campaigns, Medals and Decorations

{ _____

Certificate of education

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

(Place) _____

(Date) _____ Commanding _____ Battn. _____ Regiment.

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

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

(Place) _____ (Signature of Soldier.)

(Date) _____ (Signature of Witness.)

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

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

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

_____ (Signature of Soldier.)

10. *Statement of service.*

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

Further service " " _____ (the date of confirmation of discharge) " "

Total " "

11. *Confirmation of discharge.*

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

(Place) _____

Signature _____

(Date) _____

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

RESERVATIONS REFERRED TO AT PARA. 8.

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

LIST OF DISCHARGE
DOCUMENTS.

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	805675	PL	Baquet	Elex
Year		Unit.	Age.	Service.
1917	87	Canadians	28	1 yr 7 mos. in field 11 mos.
Station and Date.	Disease 1 C.P. 952 Left hand.			
VAD Hospital) SHROPSHIRE 26 BROUGHALL Cottage WHITCHURCH.	Hand very septic and inflamed on admission. Saline baths Fomentations. Operation 3rd finger amputated and incision made outside the Palm for drainage Tubes inserted 24/11/17. Jan 16 th finger almost healed. Dry dressing Jan. 29. Finger quite healed.			
	(signed) Arthur M. Watkins			
5th Gen Hosp, Liverpool	Ring finger left hand amputated about middle of premax phalanx			
21/2/18	Poor grip with other fingers cannot flex other fingers more than slight Incision scar on dorsum and palm of hand for drainage healed.			
15/4/18	Decided to Canada (signed) A. S. Buner to			

* The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signature
 Wt. W 6604/M 2870-1,500,000-8/17-H. & Sp. (10938). Forms/I. 1237/12. (E239) [P.1]

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

INSTRUCTIONS.

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

(1) Name of Overseas Unit which Soldier joins..... 136th, O.I.S., Bn C.E.F.

(2) Regimental Number..... 80557

(3) Full Name of Soldier..... David Alexander, Bagnell

(4) Place of Birth..... Bowmanville, Ont

(5) Are you married, or not?..... no

(6) If married, state,
 (a) Full name of your wife.....
 (b) Present Postal Address.....

(7) Are you a widower?.....

(8) Have you any children?.....
 If so, give number of boys and girls.....
 Also their names and ages.....

(9) Is your Father alive?..... *yes*

If so, state name and address *William Bagnell Bowmanville, Cal*

(10) Is your Mother alive?..... *yes*

If so, state name and address *Grace Ann Bagnell, Bowmanville*

(11) If your Mother is a widow.....

Are you her sole support, or not?.....

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

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

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

(15) Are you insured?..... *yes*

If so, in what Company?..... *Confederation*

Have you made arrangements for payment of your Insurance premium..... *yes*

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

AUG 31 1916

Date.....

R. W. Smart
Lieut. Col.
Officer Commanding
Commanding 136th Overseas Battalion, C. E. F.

FROM: OFFICER I/C P.11.

TO: OFFICER I/C R.111.

REPORT OF ACCIDENTAL, OR SELF-ADMINISTERED WOUNDS.

(Extract from { A.F.W. 3428 } dated Pro Forma 16)

1. Number, Rank, Name, & Unit. 805575 Pte. Bagnell, A.D. 87th Battr.

2. Date of Casualty. 4-10-17.

3. Location, Nature, and Severity of Wounds. wounded, 4" finger R. Hand Trivial

4. Whether likely to render unfit for further service.

5. Particulars as to how, and by whom caused, giving the Rank, Name etc., of Witnesses of the incident, and if due to a grenade, detonator or bomb. whilst jumping from his bunk, his finger caught on a nail in the woodwork. A.D. 793681 Pte Burns witness. Pro Forma 16

6. Whether the man is considered to blame. no.

7. What action has been taken. no action

8. Final classification as reported by Army H.Q. Injured accidentally

9. Casualty was reported as. GSW 2 finger (acc) 1st Lie 624 37 4/16 10.

10. Place and date of Court of Enquiry (if held) not applicable

DATE 30/10/17 For Officer i/c Records

11. Whether the man is considered to blame.

87th Battalion Canadian Infantry
(Canadian Grenadier Guards)

EVIDENCE in the case of No 805675 Rank Private

Name Bagnall, A.D.

Unit 87th Battalion Canadian Infantry
(Canadian Grenadier Guards)

No 506520 Rank Private Name Devlin, F.W.

STATES:--

On October 5th, 1917, about 9 A.M., 805675, Pte Bagnall AD was climbing down from his bunk in "B" Coy billets at HOUDAIN. I saw Bagnall fall and I picked him up. His right hand was covered with blood and I noticed one of his fingers was torn. I assisted No. 793681 Pte Burns, W R. to cut off Bagnall's ring which was flattened out on the injured finger. I assisted in dressing the wound.

F. W. Devlin Pte.

Signature of witness.....*F. W. Devlin Pte.*

Unit.....87th Battalion, Canadian Infantry.....
(Canadian Grenadier Guards)

EVIDENCE taken by me, in the Field, this tenth day of October 1917

Signature of Officer.....*Edwin L. Jones*

Rank.....*Lieut.*

Unit.....87th Bn Canadian Infy.....
(Canadian Grenadier Guards)

DATE.....October 13/17.....

*805675
M. 10. 17*

2

87th Battalion Canadian Infantry
(Canadian Grenadier Guards)

EVIDENCE in the case of No 805675 Rank Private

Name Bagnall, A.D.

Unit 87th Battalion Canadian Infantry
(Canadian Grenadier Guards)

No 793681 Rank Private Name Burns, W.R.
(Stretcher Bearer)

STATES:--

On October 5th, 1917, about 9 A.M., 805675, Pte Bagnall, A.D. was climbing down from his bunk in "B" Coy billet at HOUDAIN, and had his rifle in one hand and part of his equipment in the other hand. He slipped, and in falling the ring on his right hand caught in a nail in the woodwork and tore the finger, the ring becoming flattened out around the knuckles and it was necessary to cut the ring off. I bound up the wound and accompanied him (Bagnall) to the M.O.

Pte W R Burns SB

Signature of witness *A. B. Cutting Lieut.*
Unit... 87th Batta. Canadian Infantry
(Canadian Grenadier Guards)

EVIDENCE taken by me, in the Field, this tenth day of October, 1917

Signature of Officer *Edwin G. Fenwick*
Rank *Lieut.*
Unit 87th Battalion Canadian Infy
(Canadian Grenadier Guards)

DATE October 13/17

*87
nt. 10.17*

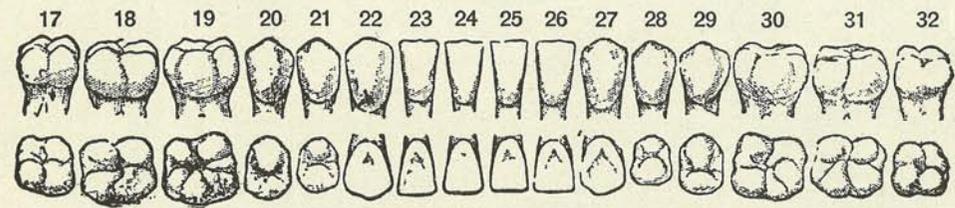
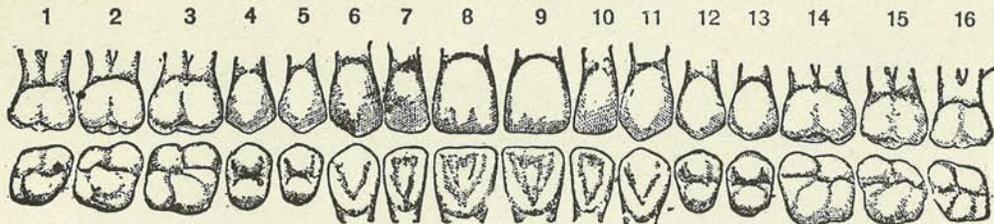
2

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS DISTRICT

NAME OF SOLDIER *Alexander David Baynall* RANK *Pte* No. *805675-*

B. 465
2-18
1772-38-957



INSTRUCTIONS

1. On examination the condition of patient's mouth to be marked on diagram in red ink.
2. On first line of report record of same to be made in red ink.

Only such entries to be made on this sheet as will show :

1. Condition on examination (in red).
2. Condition on leaving Canada.
3. Condition on discharge.

Date	Amalgam	Temporary Filling (a) (G. P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhoia	Synthetic Porcelain	Extracting	Dentures			Gold Clasp	Gold Filling	Crowns		Bridge Work	OPERATOR	Military Dist.	REMARKS
											U	L	P			Gold	Porcelain				
Condition on first Examination																					
																					<i>No Previous History sheet</i>
																					<i>Exam interchange by 3rd</i>
																					<i>No dental treat necessary - H.J. Hodgins - Cyst</i>

MEDICAL CASE SHEET.*

FET
652

No. in
Admission
and
Discharge
Book.

5 CAP GEN M W
805675

Rank. Pte

Surname.

Bagnell

Christian Name.

Elex

Unit.

87 Canadians

Age.

28

Service.

19.7 mth

Year
1917

~~Slight.~~ In full Severe. Dangerous.

Station
and Date.

Disease 1 CT 952 left hand.

12.10.17
Religion.

Methodist

Next of Kin.

Mother. Bowmanville Ontario Canada

Methodist

Condition of wounds on admission.

If in Action, and where.

When such wounds were received.

Station and Hospital where treatment given.

If Anti-Tetanic Serum administered and when.

Treatment.. Hand very septic & inflamed

V.A.D. HOSPITAL,
SHROPSHIRE 26,

BROUGHALL COTTAGE
WHITCHURCH.

on Admission. Saline baths
& fomentations.

Operation 3rd. finger amputated
& incision made out side
the palm. for drainage.

Tubes inserted. 24.10.17

Jan 16th. finger almost healed
dry dressing.

Jan 29 finger quite healed

Arthur M. Watkins

S. C. W. Gen
M. P. Liverpool
2/1/18

Ring finger left hand amputated about middle of
proximal phalanx. Poor grip with other fingers.

Cannot flex other fingers more than slight.

Incision scar on dorsum and palm

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

P.T.O.

Station
and Date.

on palm of hand for drainage
healed.

5/4/18 Invited to Hawaii (Sined) A. S. Dumer Capt

MEDICAL TRANSFER CERTIFICATE.

(To accompany a Man Transferred from one Hospital to another.)

Extract from Admission and Discharge Book of Danville, Va. Hospital at Lorton Date 21/6/18

No. of Case	Regiment or Corps	Troop or Company	Regt. No.	RANK AND NAME Surname first. If Married, write "M" under name	Completed Years of			DATES		Religion	DISEASE (a) Primary (b) Secondary (c) Operations	NAME HOSPITAL TRANSFERRED TO
					Age last birthday	Canada	Over-seas	Admitted into Hospital	Transferred			
23	87th Battl		805675	Pte Bagnell A D	28.	9/12	18/18	12/5/18	21/6/18	P.	G.C.F. Left Hand	Whitely

State here briefly reasons for Transfer, and note any particulars of Case for information of Medical Officer.

9
F. J. Snelgrove

Medical Officer in Charge.

DENTAL CERTIFICATE.

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

Date of Examination.	Present Dental Condition.	In case of loss or decay of teeth. Is the loss due to wounds, injury or disease directly attributed to Active Service?	Has he ever declined Dental Treatment.	Recommendation.
21/2/18	OK	T.E. Roberts capt case	no	6

61
REG. NO. 805675 NAME. Bagnell A D 2236
(SURNAME FIRST)

RANK. Pte CORPS. D D No2 43

AGE. 28 SERVICE. 26/12. C 8/12 E 7/12 F 11/12

NAME OF HOSPITAL. Davisville Military PLACE. Toronto

DATE OF ADMISSION. 12-5-18

DISEASE. I.C.T.? L Hand Amp finger Do

DISCHARGE. 5-20-9-18 mit

OPERATION

DISCHARGED TO DUTY

TRANSFERRED TO. Whitby Conva 21-6-18

DISCHARGED BY MEDICAL BOARD

Date

Movement

Place

Casualty

List
No.Notified
N/K O.

W.O. List

NAME

Bagnell, Alexander David

REG'T'L. No.

805575.

RANK AND CORPS

Stej 873w. Form. 136th (Inf)

H. Q. FILE No. 649.

FOLLOWS

No.

CABLE

No.

DATE

"6"

NATURE OF CASUALTY

FOLLOWS

Mf 5695

10-7-17

Adm. 18 Gen. Hosp. Camiers June 28th

8-3

(56-2)

1917. Gen. Left Leg ✓

M6222.

18-10-17

Adm. Berrington War. Hosp near
Shrewsbury Oct. 13th 1917 Wounded
accidentally fingers

LIST NO.	HOSPITAL	DATE OF ADMISSION	REMARKS
A 251	No 18 Gen. Camiers	28-6-17	Gsw L Leg
A 255	No 6 "Cons. Dep" Etaples	5-7-17	" " " " " 7-8-17
A 260	# 5 Convt. dep. Cayeux	11-7-17	Gsw. l. leg. 14-8-17
A 273	" " "Disc"	27-7-17	" " " " "
Q. 37. 1.	# 22 Cas Pl Stat.	8-10-17	J. C. J. Hand) Int. Reg
B. 38. 2.	" " Gen Hosp Camiers	10-10-17	Gsw L finger acc
B. 38. 7.	Barrington War. Shewsbury	13-10-17	" " " " " "
B 147.	No 5 Cau. Gen. Liverpool	21-2-18	D. C. J. Lf. Hand
B 191-2.	Ex " " Invalided to Canada	15-4-18	" " " " "

Alexander David

805575

Name **BAGNELL** Rank Pte.

Reg. No. ~~605675~~

Unit **87th P.W.**

ab
R2B

Next of Kin **Canada**

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1917						
8-10-22	C. C. S.		J. C. Thord	B. 37		(HA 1507)
10-10	A. 36 - 5146	H. G. Taniers	Also finger acc.			LET L. Haul
13-10	Barrington War Dep	Shrewsbury	do	B. 38		A46 M6222
	B. 225 - 3621					
13-10	V.A. Dep	Shrewsbury	do	do		
	A. 36 - 5146	do	do	do		
2-2-18	to 5 B. Dep	Surrey	S. G. L. Ford	B.		13020
15-4	enrolled to Canada	do	do	B.	191	6843

Surname **Bagnell** Christian Name or Names **A.D.** Reg. No. **805585**
 Rank **Pvt** Unit **87th Bn** Co. **1st. Que.** Troop Batty.
 Hospital **Fye** Date of Admission **18 Gen Camiers 28-6-17**

Transferred **6 bowal 6 tapes** Hosp. **5.7.17**
no 5 bowal tapes Hosp. **11.7.17**
22 Cas. Cl. Str. Hosp. **8-10-17**
4 Gen. Camiers Hosp. **10.10.17**
Berrington War Shrewsbury Hosp. **12-10-17**

Diagnosis **GSW Lt Leg R**

(1) Later Diagnosis (if changed) **J.C. L. Hand.**

(2)

(3)

G. S. W. L. Fertig acc.
gh

Additional Diagnosis: if more than one state present

A.M.D. 2 DEPT.
Beh. of D.G.M.S. O.M.F.C. London.

DISPOSITION

Date

Dio 27.7.17

REMARKS

C.L. 10-7-17 A251

14.7.17 H 255

21.7.17 A260

7.8.17 A273

C.L. 16-10-17 A37 **Dis. to Canada per HS. Araguaya**
C.L. 17-10-17 A38 **from Liverpool 15-4-18.**

19.10.17 A40

23.1.18 B147

18-4-18 B19(2) Invalided to Canada 15-4-18

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

5 ^{XXE} *ban gen Liverpool*

21. 7. 18.

2.

3.

4.

5.

6.

7.

NAME OF NEXT OF KIN
 ADDRESS OF NEXT OF KIN
 MAN'S SERVICE NUMBER
 RELATIONSHIP

Mrs. G. A. Bagnell
 Bowmanville Ont.
 Bowmanville Ont.
 mother

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

FORM TO BE USED FOR WARRANT OFFICERS, N.C.O'S, AND MEN
MEDICAL HISTORY OF AN INVALID

STATION: WHITBY MILITARY HOSPITAL DATE: Sept 3/1918

1. (a) Unit: 2 U N (b) Regimental No. 805-675- (c) Rank Pte
 (d) Surname: Bagnell (e) Christian name: Alexander David

2. Age last birthday: 28 Date of birth: 1889

3. Enlisted at: Bowmanville on: March 13/1916

4. Personal description:—
 (a) Height: 5'6 1/2 (b) Weight: 142 (c) Complexion: fair
 (d) Colour of hair: fair (e) Colour of eyes: blue (f) Identification marks: wound
 (operation) scars on left hand

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

6. Former trade or occupation: freight clerk

7. (a) Service	PERIODS		
	Years	Days	
	From	To	
	136 Bn	13 Mar 16	1 Nov 16
	87 Bn	1 Nov 16	8 Oct 17
	Hospit. Eng France	8 Oct 17	16 Apr 18
	2 U N	16 Apr 18	3 Sept 18

(b) Has he been Overseas? yes France

8. Present disease or disability (use authorized nomenclature if possible): 1. Pain & limitation movement in left hand

(a) Date of origin: (1) Nov. 1/16 (2) Dec. 16 (b) Place of origin: (1) Nordain France (2) England

(c) Cause*: 142 Accidental wound of left hand.
*(Here include original disease or injury)

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

Subjective Symptoms
 (1) Tenderness in scars on the back of left hand. Inability to properly use the fingers.
 (2) Tenderness of the amputation stump & inconvenience due to the amputation.

Objective Signs:
 (1) Two parallel linear scars over 4th metacarpal & one over 3rd metacarpal bones. These are tender & non-adherent. Directly opposite these on the

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

10

10. History ;

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

1. Small scar on left leg above the ankle - from flesh wound in France. no disability from this.

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

12. Did the disability arise on or off duty? 1 + 2 on duty

13. Was a Court of Inquiry held? 1. yes. verdict accidental - no blame attached

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

Yes. 1 + 2 not applicable No.

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

15. Was the disability caused or aggravated by negligence, by vice or by misconduct, or by unreasonable refusal to accept treatment? 1 + 2 not applicable

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

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

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

Hospital Eng + France 6 mos } Incisions for drainage - amputation
" Canada 4 mos } finger - dressing + manage

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

1 + 2 no

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

20. Recommendations

That he be discharged on account of medical unfitness

A. H. Naylor Capt RMC
Medical Officer by whom the case is brought forward.

STATEMENT OF THE SOLDIER.

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

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

Pte A. D. Bagnell
Signature of soldier examined.

OPINION OF THE MEDICAL BOARD

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

we concur

22. Is the soldier fit for

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

23. It is certified that the soldier

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

(Strike out condition not applicable).

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

Not recommended

That he be discharged on account of physical unfitness

TO BE COMPLETED WHEN TREATMENT IS REFUSED

E. J. Brumby President.
Arthur G. Casper Members.

STATION *WHITBY MILITARY HOSPITAL*

DATE *SEP 3, 1916*

APPROVED BY
5-9-16

DATE

APPROVED BY

DATE

John J. [Signature]
Assistant Director of Medical Services.

Director-General of Medical Services.

Objective signs (continued)⁴

palm of the hand are two parallel linear scars - not tender + not adherent. Also one $\frac{1}{2}$ " scar on radial border of the hand at the base of the little finger.

Extension of the fingers is normal. Flexion of the joints of the first + second fingers is normal but requires a good deal of effort. Almost no active flexion in the joints of the little finger but passively flexion is about one half normal. Movements of thumb are good. The ^{1/3 normal} nerves are weak. Sensation is good.

12 The ring finger has been amputated midway between metacarpophalangeal + proximal interphalangeal joint. The end of the stump is very tender. Movement is good.

All other systems normal.

Wasserman - neg. Urine Neg.

Incapacity is due to partial loss of function in left hand due to (1) pain + limitation of movement of the fingers.

(2) loss of a portion of ring finger.

CJC

TO BE COMPLETED WHEN TREATMENT IS REFUSED

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

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

INSTRUCTIONS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of pages 1 and 2 of this Form. The President of the Board of Medical Officers is responsible for the proper completion of the space, of page 3, reserved for recording the Proceedings of a Board of Medical Officers.
3. In answering the questions, Medical Officers will carefully obtain and record the soldier's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the soldier concerned, from witnesses, or from documents.
4. If a complete answer to any question requires more space than that reserved for it, the answer may be continued on the blank space on this page.
5. The nomenclature of diseases to be followed is that described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London, (1915), by Messrs. Harrison and Sons.

MEDICAL CASE SHEET (Ear, Nose and Throat)

MILITARY HOSPITAL *Cottage # 5*
 DEPARTMENT OF EAR, NOSE AND THROAT

Name *Pte Bagnell* Date *June 26, 1918*
 No. *805645* Unit *87th Bn.*
 Age *28* Enlisted *March 13, 1916* In Out Patient for
 Diagnosis.....

HISTORY:— *No complaints on part of patient.*

	RIGHT	LEFT
Nasal Septum.....	<i>deviated septum with ridge right.</i>	
Inf. Turbs.....		
Mid. Turbs.....		
Nas. Pharynx.....	<i>Negative findings otherwise</i>	
Pharynx.....		
Tonsils.....		
Teeth.....		
Accessory Sinuses.....		
Larynx.....		
Ext. Aud. Canal.....		
Memb. Tymp.....		
Mastoid.....		
X Ray.....		

R.

Hearing..... H. V. V..... C 256 Air Bone..... C 512..... Weber

L.

Treatment and progress..... *Operation not needed*
 M. F. W. 143. *W. H. Hume Capt*

REPORT ON ACCIDENTAL OR SELF-INFLICTED INJURIES.

A16-9

To be rendered in accordance with instructions on the back of this form.

8055-75

1. Number, Rank, Name, and UNIT of injured man. 805575 Pte. A.D. Bagnall 87th Canadian Battalion Date of casualty. 4/10/17

2. Nature, Location, and Severity of injury. (N.B. Field Ambulance to be notified at once if wound is believed to be self-inflicted.) Wound, 4th finger L. Hand - Trivial.

3. Short statement of the circumstances of the case. (Signed statements of witnesses to be attached to this form.) Whilst jumping from his bunk, his finger caught on a nail in the woodwork

4. Commanding Officer's opinion as to whether the man was :- (a) in the performance of Military Duty. (b) To blame, (c) Whether any other person was to blame.

Yes
No
No

J.V. O'Sullivan Lt. Colonel Commanding 87th Canadian Bn

Date 14/10/17

5. (a) Opinion of G.O.C. Brigade. (b) Disciplinary action taken or proposed whether against injured man or another.

Accidental
his action

7

Date 15/10/17

L.W. O'Brien Brig-Genl Comdg. 11th Can Inf Brigade

6. TO Second Army "A" Forwarded with reference to my casualty wire No. dated

Date 17-10-17

W. H. B. ... for GOC 4th Can Division.

A.G. OFFICE AT THE BASE
7. To D.A.G., G.H.Q., 3rd Echelon.
CENTRAL REGISTRY
Forwarded for record. This casualty should be reported as...
No. 20-0078151
Date...
C.R. No. OFFICE AT THE BASE
21 OCT 1917
KPA

accidentally injured
B.M. Bentinck Capt
6900 Ind Army

Handwritten notes and signatures, including dates like 10.11 and 30.7

Reserved for M.H.C.

Regt. No. 805575 Rank PTE Surname BAGNELL Christian Name ALEXANDER DAVID

Unit or Corps—(a) Overseas from United Kingdom 87th Bn (b) In United Kingdom 23rd Res Bn

Born at—Town Bowmansville County or Province Durham Co Country Ont. Canada

Date of Birth—Day 31st Month October Year 1889 Age 28 yrs. 4 months.

Joined at Bowmansville Can Date 13-3-16

Former Trade or Occupation Freight Clerk

Permanent marks or peculiarities that will serve for future identification:—
Amput of 4th Digit Left
Two linear scars back left hand. Two do in front in palm.

Height—feet 5 inches 5 Colour of eyes Blue

Signature of Soldier (for identification purposes) A. D. Bagnell

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). AMPUTATION FOURTH DIGIT LEFT.

Disabilities Group (b). IMPAIRED FUNCTION LEFT HAND

Disabilities Group (c). Not applicable

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>ACCIDENTAL WOUND LEFT HAND?</u>	<u>HOUDAIN</u>	<u>8-10-17</u>
(ii.) As to Group (b) above.	<u>ACCIDENTAL WOUND LEFT HAND?</u>	<u>HOUDAIN.</u>	<u>8-10-17</u>
(iii.) As to Group (c) above.	<u>Not applicable</u>	<u>not app</u>	<u>not app</u>

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

3. Is the disability due to disease contracted or injuries received prior to Active Service?

(i.) As to Group (a) above? No If yes, has Active Service aggravated it? not app

(ii.) As to Group (b) above? No If yes, has Active Service aggravated it? not app

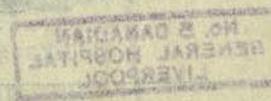
(iii.) As to Group (c) above? Not app If yes, has Active Service aggravated it? not app

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? Yes

(iii.) As to Group (c) above? not app



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? No
- (iv.) Where? not app
- (v.) When? not app
- (vi.) Opinion of the Court? not app

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.)

Patient states he was resting in his Bunk when called for dinner and when jumping from Bunk his ring on left Ring finger caught on something and was lacerated. Seen shortly after by M.D. - Dressed and after a few days to 12th Cav FA. To 22nd CCS T. 103 P. 188 Hand septic two parallel incisions on back of Hand - two in palm. Evacuated to Berrington was 14 Shrewsbury on 12-10-17. Ring finger amputated in course of proximal Phalange. On 20 2-18 to No 5 General Hospital Liverpool.

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

Patient is well nourished and Cardiac, Respiratory, Digestive, genito urinary systems normal. The Ring finger left has been amputated in the proximal phalange and Proximal metacarpal joint seems to be dislocated and is tender. There has been severe septic poisoning of Hand causing disease - destruction of tendons resulting in stiffness of remaining fingers. Hand almost useless. Wrist joint normal. Much loss of sensation over back of hand and hand is cyanosed & cold.

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

(ii.) If so, state what. AMP of Ring finger - Incisions for drainage

(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? No

(ii.) If so, describe. not applicable

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? —

Date of Report 1 MAR 1918 191

Signed G. J. ... Capt ...

Station **NO. 5 CANADIAN GENERAL HOSPITAL LIVERPOOL**

Officer in medical charge of case.

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

NO. 5 CANADIAN GENERAL HOSPITAL LIVERPOOL

COLONEL C.A.M.C.
D.O. No. 5 CANADIAN GENERAL HOSPITAL, LIVERPOOL.

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

Dated at 1 MAR 1918 Station, on 1 MAR 1918 191

* Delete if inapplicable.

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)? *Yes*
If not, indicate it.

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

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%)

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

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

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

18. Remarks. *No 117 available.*

Not applicable

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? —

Classification for the Military Hospitals Commission.

G 12

Date of Board — **2 MAR 1918**

Station

NO 5 CANADIAN GENERAL HOSPITAL LIVERPOOL

Signatures of the Board

Wombrighton major cause President.
Ag Paul Capt came
ag Dykes e pt came

Approved

Fellhau
A.D.M.S. CANADIAN BUXTON AREA

A.D.M.S.

ASSISTANT DIRECTOR OF MEDICAL SERVICES 13 MAR 1918 CANADIANS BUXTON AREA.

Dated at

Station

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:—

14. THE ENTIRE DISABILITY—Without regard to his regular occupation, to what extent in his capacity as a private for earning a full livelihood in the general market for unskilled labour?

15. THE PENSIONABLE DISABILITY—(see Part I. (2)) Approximate or definite service of a disability existing previous to joining the Army? What part of the entire disability estimated next above in (14) is due to causes arising during Active Service? (Estimate at once in £ s. d. or M.)

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

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

18. Remarks

19. Recommendation:—(a) Fit for duty? (b) Fit for base duty? (c) Invalid to Canada? (d) Discharge from service as permanent invalid?

Dated at _____ this _____ day of _____ 191_____

Signatures of the Board
President.
Station
Assistant Director of Medical Services
MAR 1918

136th OVERSEAS BATTALION, C. E. F.

ORIGINAL ORIGINAL

MEDICAL HISTORY SHEET.

805575

Surname Bagnell Christian Name Alexander David

Examined { on 13 day of March 1916
 at Bourmanwill

Birthplace { City or Town Bourmanwill
 County Durham Coy

Apparent age 26

Trade or occupation Freight Clerk

Height 5 Feet 5 Inches.

Weight 140 Lbs.

Chest measurement { Minimum 34 inches.
 Maximum expansion 37 inches.

Physical development good

Small-Pox Marks none

Vaccination Marks { Arm Right 0 Left 1
 Number 1

When Vaccinated last 1892

(a) Marks indicating congenital peculiarities or previous disease 0

Approved by B. J. Haylewood
 Rank Capt M.O.

Date.	Fit or Unfit.	EXAMINED FOR RE-ENGAGEMENT.
		M.O.

16 OCT 1917

Date.	Result.	VACCINATIONS.
		M.O.
		M.O.
		M.O.

(b) Slight defects but not sufficient to cause rejection

Date.	Result.	ANTI-TYPHOID INOCULATIONS, ETC.
<u>1916</u>		
<u>July 7</u>	<u>OK</u>	<u>C. J. Sarsfeld</u> M.O.
<u>22</u>	<u>OK</u>	<u>C. J. Sarsfeld</u> M.O.
<u>May 4</u>	<u>First</u>	<u>By B. J. Haylewood</u> M.O.

Enlisted on 13 day of March 1916 at Bourmanwill

CORPS.	REG'TL NUMBER.	HABITS.	DATE.
136th OVERSEAS BATTALION, C. E. F.	805575	good.	March 13/16
Transferred to { 39th Bn. C. E. F. 87th Bn			OCT 6 1916

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>On 5th Can Gen Hosp</u>	<u>2-3-18</u>	<u>amp index finger 1st hand impaired function 1st hand</u>	<u>downgraded to Canadian by Paul Capt</u>
			<u>14</u>

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

CANADIAN

Surname *Bagnill* Christian Name *Alexander David*



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				
<i>Berrington War Hosp Shrewsbury</i>		<i>12</i>	<i>10</i>	<i>17</i>	<i>20</i>	<i>2</i>	<i>17</i>	<i>952. I.C.T. L Hand</i>	<i>131</i>	<i>Severe septic infection of left hand leaving a stiff and practically useless hand. Transferred to No 5 Canadian Gen Hosp Kirkdale. Liverpool.</i>	<i>J. M. Rankin Capt R.A.M.C.</i>
 <i>Uruguay.</i>		<i>10</i>	<i>2</i>	<i>18</i>	<i>15</i>	<i>APR</i>	<i>1918</i>	<i>Infected hand</i>		<i>Involved to Canada. Wounds completely healed.</i>	<i>A. S. D. M. Capn</i>
		<i>15</i>	<i>4</i>	<i>18</i>	<i>25</i>	<i>4</i>	<i>18</i>	<i>Do</i>		<i>Condition the same</i>	<i>K. J. Jones Capt</i>

*Name L Bagnell, Alexander David Rank Pte Regtl. No. 805575
 Original unit 87th Bn Present unit M. or S. Fyle Depot
 Age 28 Religion Meth Ref. H.Q.
 Port, ship, and date of arrival.....
 Next of kin Mother, Mrs. Grace Anne Bagnell, Bowmanville, Ontario
 Address on leave Bowmanville Ont.
 Address on discharge Bowmanville Ont.
 Transportation issued Yes Date 16/9/18 Bowmanville Character on discharge Very Good
 Previous occupation Clerk Date and place of enlistment 13 Mar. 1916 Bowmanville
 Diagnosis Amp. fourth digit left Date of Medical Boards 3-9-18

Date.	Remarks	Pt. 2 Order No.
<u>15-5-18</u>	<u>M.O.H. From Clearing Depot to H.S. (M.O.H.) 27-4-18 on leave with Sub. to 12-5-18</u>	<u>28</u>
<u>24-6-18</u>	<u>M.O.H. to Whitby as from 21-6-18</u>	<u>68</u>
<u>5-9-18</u>	<u>Posted to Cas.</u>	<u>143</u>

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

(over)

Date.

Remarks.

Pt. 2 Order No.

16-9-18 S.O.S. DISCHGD. "Phys. Unfit" 3 mos. "DP" & cl. allce.

48

OTTAWA
18th

July 1920.

From;-

The Adjutant General
Canadian Militia.

To;-

805675 A. D. Bagnell,
Bowmanville,
Ont.

Sir;-

Enclosed herewith please find
Military Will executed by you ~~with~~ in the
C. E. F., and returned, the same being your
own property.

O. P. Pangman

Lieut.
for Lieut. Col.
Director of Records.
for Adjutant General.

1000
7-7-20
MCS

MCS

CANADIAN CONTINGENT EXPEDITIONARY FORCE.

M. D. 2

M.M.

LAST PAY CERTIFICATE.

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

BAGNALL
SAC-342...
No. 56

Regimental No. **805575** Rank Pte. Name

Corps **No. 2 District Depot** Discharged

On **Sept. 16, 1918** 191, to
"Insert "discharged" or "transfer d."

The following is a statement of the account of the above named
from **Sept. 1, 1918** 191 to **Sept. 16, 1918** 191, the
inclusive date of transfer or discharge.

Dr	\$	¢
Bal Dr. from prev month		
Advances No. 7307	35	00
by Cheques No.		
Assigned Pay No.		
Other Charges*		
Payment on transfer or Discharge No. 7308	17	60
Balance Cr. to be paid by the new unit	52	60
Total	52	60

Cr.	\$	¢
Bal Cr. from prev month		
16 days at \$ 1	16	00
Reg'tl Pay		
16 days at \$ 10	1	60
Field Allow.		
Clothing	35	00
Other Allowances*		
Other Credits*		
Bal. Dr. to be deducted by new unit	52	60
Total	52	60

*Give Particulars.

A monthly stoppage of \$ **20.00** # has **AUGUST 1918** ## been paid
on account of Assigned Pay for the month of **1918**
to Assignee **Mrs. C.A. Bagnall,**
Address **Bowmanville, Ont.**

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

ON TRANSFER OF AN OFFICER.

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

REMARKS:-

- State |1| date of enlistment.....
- |2| if married and if a Separation Allowance Card has been submitted
No
- |3| cause of discharge and authority.....
Phys. Unfit D.O.148

If discharged from the Contingent, state if Stop Payment advice for Assigned Pay has been forwarded, and date

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

Date Sept: 13, 1918

Place TORONTO, ONT. CAPT. PAYMASTER, No. 2 DISTRICT Paymaster

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

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

M.F.W. 44.
5m.-8-18.M.
1772-39-903.

Name Pte Bagnell A. D.

M. F. W. 41
100M-1-18.
1772-39-889. 2017

Regimental No. 805-575

Name and address of next-of-kin

Unit 87th

Date of enlistment

Place of

Married (yes or no) no.

Date and place discharged

Amount of pay assigned monthly \$ 20⁰⁰ pd. for Apr.

Reason for discharge

To whom payable Mrs. G. A. Bagnall

Character on discharge

Bowmanville Ont.

Date		PAY		Field Allowance		Other Credits	Total Credits	Voucher		Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days			Rate	Amount					
Mar 29	May 31	66	1-	66-	66	10	660	48	54					Out 25/4/18 to 12/5/18 DD17 7475-6. 13474 M.P.R.
							1360			77043	11474	20-		
June 1	30	30	1	30-	30	10	3	-	730	79261	5-	20-		S.S. June 11. 40 30 80775 J.P.L.
										40 30 82816	15	30	wh.	
July 1	31	31	1	31-	31	10	3	10	3410	AR 26	5	20		1758. J.P.L.
										AR 125	9	00		
Aug 1	31	31	1	31-	31	10	3	10		5152	5-	-		
										5649		20		
										34 20	6290	9	20	34 20 a.p.
Sept 1	15	16	1	16-	16	10	1	60		7307	35	00	✓	Req. 5-9-18 DD 143. Dro DD 148-P.D.P. & G.A. 5260. S.P.L.
										35 00				
										5260	7308	19	60	✓

English L.P.C. No. B. 464

805375

Name Bagnall Alexander D

Regt'l No. 805675 Rank Private File Numbers { P.M. 25-63

Former Units 22 R.A. Original Unit 136 Battalion

Date of arrival in Canada 24.4.18 Boat Araguaya Port of Disembarkation Halifax

Rates of Pay:—Regt'l. \$1.00 Field 10¢ Date of arrival in M.D. 2

Separation Allowance. Date paid to nil Rate nil If continued by Chief Paymaster, England no

Assigned Pay. Date paid to 30.4.18 Rate \$20.00 If continued by Chief Paymaster, England no

Name and address of Beneficiary { Mrs Grace A Bagnall
Bowmanville Ontario

Pay claimed on English L.P.C. to 26.3.18 to be paid by new Unit from 27.3.18

Name of new Unit District Depot Date L.P.C. forwarded to new Unit 8/5/18

a P. charged on English L.P.C. to 31.3.18

L.L. 34682—M. & D. 8645

Credit Balance shown on English L.P.C.		OTHER CREDITS DUE		TOTAL CREDITS		Charges to be made on account of advances since English L.P.C. made out				OTHER CHARGES		TOTAL DEBITS		BALANCE TO NEW UNIT		REMARKS	
\$	c.	\$	c.	\$	c.	On Boat	At C.I. Depot &c.	\$	c.	\$	c.	\$	c.	Credit	Debit		
95	97			95	97												
						25	00					243					
								20	00								
												47	43				
												Credit Bal: 48 54					
				95	97							95	97	48	54		
		7	30	7	30							7	30	7	30		

2 B. 7. 5-18
7. 5. 18

a.P. 400
Halifax 25.4.18
April 1918

Supp. Eng. L.P.C.
Credited 15-7-18

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

11670/232

Name Bagnall, A.D.

Surname

Christian Name

Regimental Number

8055755

Rank

pts.

Address (in full)

Bomanyville, Ont.

Unit

87th Bn.

Original Unit

District where paid

M.D.2.

Date of Discharge

P. D. P. Filing Number

7-696-2.

Rates:—Regimental pay \$

per diem: Field Allowance \$

per diem. Separation Allowance \$

per month.

L. L. 46038—M. & D. 9245

Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Over-payments to be Recovered	Total Amount Paid
	Cheque No. A	Date	Amount 30 days	Cheque No. B	Date	Amount 30 days	Cheque No. C	Date	Amount 31 days		
100 10	11389	14-9-18	33 00	10727	14-10-18	3300	7963	14-11-18	3410		100.10
	1st 9249	26/2/19	40 00								
560 A	2nd 26432	5-3-19	70 00								

M. F. W. 127.
25M.—S-18.
1772-39-1140.

Remarks:

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

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

To Whom *Mrs Grace A. Bagnal* By Whom Assigned *Bagnal A. D*
 Address *Bowmansville* Regtl. No. *8055-75*
Ont- Rank *Pte-*
 Rate *\$20.00* Corps *136th Bn*
Oct-1st/1916

OCT 1 - 1916 PAYMENTS

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

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

M. F. W. 12a.
 50m.-6-16.
 1772-39-819.

Sheet No. 2. *Grace A. Bagnal*

PAYMENTS.

Name of Soldier *Bagnal A. D.*
805575 136th - Bn Ple

L. L. Job 4503.-Req. 6832.

Month.	Year.	Cheque No.	Amt.	Remarks.
				<i>\$2600</i>
				<i>OCT 1 - 1916</i>
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.		<i>L 24096</i>	<i>20</i>	
Nov.		<i>7 29613</i>	<i>20</i>	
Dec.		<i>D 36372</i>	<i>20</i>	
Jan.	1917	<i>S 36677</i>	<i>20</i>	
Feb.		<i>R 40049</i>	<i>20</i>	<i>20 R</i>
March		<i>U 43708</i>	<i>20</i>	<i>20 L</i>
April		<i>J 438</i>	<i>20</i>	<i>20 E.</i>
May		<i>S 6325</i>	<i>20</i>	<i>0</i>
June		<i>T 13345</i>	<i>20</i>	<i>20 W.</i>
July		<i>T 20372</i>	<i>20</i>	<i>W.</i>
Aug.		<i>U 26442</i>	<i>20</i>	<i>W</i>
Sept.		<i>T 24375</i>	<i>20</i>	<i>00 \$240.00 J.W. ✓</i>
Oct.		<i>E 46841</i>	<i>20</i>	
Nov.				<i>+</i>
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

A.S.

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier _____

PAYMENTS.

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

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Oct 1/16

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

20.			
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PARTICULARS OF SEPARATION ALLOWANCE

No. *805575*
 Rank *Pte.* Promoted Reverted Discharge
 Soldier's Name *A. N. Bagnal*
 Battalion *136 Bn.*
 Beneficiary
 Relationship
 Address

PARTICULARS OF ASSIGNMENT

Name *Mrs. Grace A. Bagnal*
 Address *Bowmansville*
 Change of Address *Ont.*
 1
 2
 3
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total
<i>Sept. 30/1917</i>			<i>240</i>	<i>240</i>
<i>Oct</i>	<i>E 46841</i>		<i>20</i>	<i>20</i>
<i>Nov</i>	<i>B 53742</i>		<i>20</i>	<i>20</i>
<i>Dec</i>	<i>F 56086</i>		<i>20</i>	<i>20</i>
<i>1918 Jan 1/8</i>	<i>N 65289</i>		<i>20</i>	<i>20</i>
<i>July</i>	<i>B 95199</i>		<i>20</i>	<i>20</i>
<i>Mich</i>	<i>A 91547</i>		<i>20</i>	<i>20</i>
<i>April</i>	<i>I 8289</i>		<i>20</i>	<i>20</i>
<i>May</i>			<i>20</i>	<i>20</i>
			<i>350⁰⁰</i>	<i>350⁰⁰</i>

REMARKS

..... A/c Closed *30-4-18*
 Ret'd per. *Maguaya*
 Date *27-4-18* F.X. *1-5-18*
 Clerk *J. D. Dunne*
M.R.O. 2 B rendered. 1-5-18. J.D.



P. 559
MARRIED OR SINGLE

Single

PLACE OF BIRTH

Durham Cty Ont Canada

NAME AND ADDRESS OF NEXT OF KIN

*Mrs Grace Bagnall
Bowmanville ont can*

RELATIONSHIP OF NEXT OF KIN

Mother

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY \$

EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE

ADMISSIONS TO HOSPITAL, &c.

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

DATE	PAY				FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLL							
	NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT					1		2		3			
			\$	C.			\$	C.			\$	C.				NO.	DATE	NO.	DATE	NO.	DATE		
<i>1916</i>																							
<i>Oct</i>																							
<i>1-6</i>	<i>6</i>	<i>1⁰⁰</i>	<i>6</i>	<i>00</i>	<i>6</i>	<i>10</i>	<i>6</i>	<i>00</i>							<i>660</i>								
<i>7-31</i>	<i>25</i>	<i>1⁰⁰</i>	<i>25</i>	<i>00</i>	<i>25</i>	<i>10</i>	<i>25</i>	<i>00</i>							<i>2750</i>					<i>1779</i>	<i>15/10/16</i>		
<i>Nov</i>																							
<i>1-30</i>	<i>30</i>		<i>30</i>		<i>30</i>		<i>30</i>								<i>33</i>	<i>1878</i>	<i>31.10.16</i>	<i>1963</i>	<i>14.11.16</i>				
<i>1-31</i>	<i>31</i>		<i>31</i>		<i>31</i>		<i>31</i>	<i>10</i>							<i>34 10</i>				<i>622</i>	<i>7/16</i>			
			<i>9 20</i>				<i>9 20</i>																
<i>1-31</i>	<i>31</i>	<i>1⁰⁰</i>	<i>34</i>	<i>10</i>											<i>34 10</i>				<i>10673</i>	<i>16/12</i>			
<i>1-28</i>	<i>28</i>		<i>30</i>	<i>80</i>											<i>30 80</i>				<i>780</i>	<i>26-1-17</i>			
<i>1-31</i>	<i>31</i>		<i>34</i>	<i>10</i>											<i>34 10</i>				<i>908</i>	<i>11/3</i>			
<i>1-30</i>	<i>30</i>		<i>33</i>												<i>33</i>	<i>1</i>	<i>2/4</i>				<i>968</i>	<i>20/13</i>	
<i>1-21</i>	<i>31</i>		<i>34</i>	<i>10</i>											<i>34 10</i>	<i>129</i>	<i>21/4</i>	<i>148</i>	<i>7/5</i>				
<i>1-30</i>	<i>30</i>		<i>33</i>												<i>33</i>	<i>305</i>	<i>3/6</i>				<i>245</i>	<i>24/5</i>	
<i>1-31</i>	<i>31</i>		<i>34</i>	<i>10</i>											<i>34 10</i>								
			<i>334</i>	<i>40</i>																			
			<i>334</i>	<i>40</i>																			
																<i>27</i>	<i>85</i>	<i>362</i>	<i>25</i>				
																<i>27</i>	<i>85</i>	<i>362</i>	<i>25</i>				

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805575 The Bagnall A.D.

DATE	PAY		FIELD ALLOWANCE		WORKING OR SPECIAL PAY		ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS				CASH PAYMENTS				
	NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE				AMOUNT		1	2	3	4	1	2	3
			\$	C.						\$	C.	\$	C.	NO.	DATE			
1917																		
July			334	40				27 85	362 25							28 17 39 08		
Aug 31			34	10				34 10	34 10									
Sept 30			33						33 10							447 446		
	MONTH PARTICULARS		CR. 1	CR. 2		PARTICULARS		DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFER. PAY	SEP. ALICE PAY				
Sept 30						Hants M						112 76						
Oct	P. Pay		34	10		ap					20							
						Dr 1222. 65/17		1 78										
						Dr 497. 42/18		4 46										
						Dr 762 87 1/2		2 68										
			34	10				8 92				117 94						
Nov	ple pay		33			Dr 4077. C.M. 25/17		9 73										
Dec	ple pay		34	10		ban. ap					20							
						Dr 818. 87/17		2 68										
						" 913. 4 21/17		4 46										
						a.P. Dec.												
1918			67	10				16 87				20 128 17						
Jan	PP		34	10		ap						40 14 16						
Feb			34	10		ap						20 142 27						
												20 3 33						
												20						
						Min Smith 21 Chester Rd. Salop. 24-1-18		14 60				20 138 47						
						ap		14 60				20 147 07			51 10			
						ap P 100. 5 1/2 pool		2 43				144 64						
						P 218 " " 7-3-18		48 64				95 97						
												103 24						
						Dr P 400 5 Gen Hwy 5-4-18		51 10				20 100 84						
						End L.P.		2 43										
						Dr. Sailed 16/18		100 84										
								100 84										

SF 7-3-18 -
16-3-18
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1807 1st 5th 8/7
407 4th CRD. 31-7.

DEFER. PAY
SEP. ALICE PAY

51 10

PAYMENTS		ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
3	4				CREDIT	DEBIT			
		200 ..	41	267 66	94 59				
		20		20	108 69				
447		20		28 93	112 76				
446									

Supp PC. Revd 2/4/18
 Cr Bal. \$ 103 ²⁷/₁₀₀ g2247207

MEDICAL CASE-HISTORY SHEET

HOSPITAL M. O. H. STATION M. Toronto
 No. 805675 Rank Pte Name (Given) Alex S. (Surname) Bagnall Age 28
 Unit 87th Batt Service 26 months
 Date of Admission 12-5-18 Date of Discharge _____
 Diagnosis J. C. T. L. Hand.
 Date of Origin _____ Place of Origin _____

CAUSE OF ILLNESS OR INJURY:

Injury to ring finger by coming with equal ring.

HISTORY OF PRESENT ILLNESS OR INJURY.

(Is Illness or Injury result of Service?)

Ring finger about 1 inch & followed by cellulitis of whole hand.

CONDITION ON ADMISSION.

Pain over metacarpals - phal joints on pressure & also hyperextension interphalangeal joints alone flex. Ring finger amputated whole hand exposed. Particulate presentation over whole hand

TREATMENT.

Hand largely - functional - Give Contrast Baths and Gymnastic exercises -

Haut House - O.S.A.

27/5 Hand & arm improving

3/6 Hand much improved. A.W. 576.

June 5/18 Continue Haut House - & Give Massage & Manipulations O.S.

11/6. Hand improving. Having contrast baths & Haut House.

17/6. Hand improving.

CONDITION ON DISCHARGE FROM HOSPITAL.

Transfer to Haut House for treatment

OSSEYMAN

NEGATIVE

DATE MAY 21 1918

Capt. Bagnall

Medical Officer i/c Case.

MAY 12 1918

Date _____

June 25/18.

To have management practice movement.
Is taking Commercial course as vocational work.

AMM

NAME OF APPLICANT

ADDRESS OF APPLICANT

DATE OF ADMISSION

TREATMENT

REMARKS ON DISCHARGE FROM HOSPITAL

DATE MAY 1918

MAY 19 1918

Medical Officer's Name

Medical Officer's Signature

Medical Officer's Name

Name Bagnall and No. Unit
 Date JUN 21 1918 Rank pte.
Corp. Fingers

All Progress Notes must be signed and dated

WHITBY MILITARY HOSPITAL

25/6/18 To have massage & exercises. SS Ball
 Is taking Commercial course. Case

28/6/18 Previous History

While jumping out of bunk a ring on ring finger of left hand caught on something. Finger was lacerated, whole hand became septic & incision, drainage & amputation of distal part of ring finger was performed.

Present Condition

Two parallel incisions on back of hand (left) one over 4th metacarpal + one over 3rd metacarpal.

Two parallel incisions on palm of the hand.

There are no dressings.

Amputation of ring finger just proximal to middle phalangeal joint.

Circulation in hand poor.

Movements

At metacarpophalangeal joints nil.

1 + 2nd fingers at middle phalangeal normal but at distal about 1/2.

Little finger

Little movement in any joint.

Force surgeon is replant for hand.

18/7/18 Still having massage & heat (radiant)
 Taking general study class. Has considerable tenderness on the back of the hand. SSB

July 26/1918 Stumps very sensitive - Distal amputation at metacarpophalangeal joint.
 Hand very tender about scars - residual infection - to contain present heat & then treated. SSB

PROGRESS INSERT

Name

No.

Unit

Rank

Date

All Progress Notes must be signed and dated

22/7/18. Severe Bicus congestion treated 20 minutes ago. A.M.H.

24/7/18. Severe Bicus congestion B.I.D. 20' A.M.H.

18/8/18. Severe Bicus congestion B.I.D. 20 minutes. To see surgeon again. A.M.H.

Aug 18/18. Under treatment of l. hand, patient is apparently not very sensitive & pressure when his attention is directed elsewhere. - will improve in ordinary work. J.A. 227

24/8/18. To have amputation of middle finger at metacarpal phalangeal joint as recommended by Maj. R. Hunter for Tuesday 27/8/18. A.M.H.

25/8/18. To have Do have 227. A.M.H.