77693	ATKINSON	FRED
I.D. number **No. d'identification**	**Surname** **Nom de famille**	**Given names** **Prénoms**

DEC'D 16-12-33

PERSONNEL RECORDS CENTRE
CENTRE DES DOCUMENTS DU PERSONNEL

PERSONNEL RECORDS ENVELOPE
ENVELOPPE DES DOSSIERS DU PERSONNEL

Location
Lieu 287

"CONTENTS CONFIDENTIAL"
"CONTENU CONFIDENTIEL"

ARC-1048 (r. 87/05)

C.E.F. REGIMENTAL DOCUMENTS

NAME ATKINSON, FRED REGT. No. 77693 UNIT 30 BN H. Q. FILE No. X 6135

CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE
ATTESTATION PAPER (M.F.W. 23, 133 or 51)				
CASUALTY FORM (M.F.W. 54 or A.F.B. 103)				
TRAINING HISTORY SHEET (M.F.W. 113)				
FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)				
REGT. CONDUCT SHEET (M.B.W. 263 or A.F.B. 120)				
COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)				
MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)				
DENTAL HISTORY SHEET (M.F.B. 465)				
MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)				
MEDICAL EXAMINATION (M.F.W. 129)				
TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)				
PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)				
DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)				
LAST PAY CERTIFICATE (M.F.W. 44)				
PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)				
PARTICULARS OF CHARACTER (A.F.W. 3226)				
COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)				
CARDS				
PAY-SHEETS				

NON-EFFECTIVE BY

DEATH

CATEGORY

DISCHARGE

CATEGORY

DEMOB

DESERTION

Box # 287

M.F.W. 2589
20M-4-46 (9113)
H.Q. 1772-39-1377

77693

ATTESTATION PAPER.

No. 839

Folio. H 27

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name?..... Fred Atkinson
2. In what Town, Township or Parish, and in what Country were you born?..... Greasborough Yorks
3. What is the name of your next-of-kin?..... J. Atkinson (Father)
4. What is the address of your next-of-kin?..... Fernie B.C.
5. What is the date of your birth?..... 6 June 1887
6. What is your Trade or Calling?..... Miner
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?..... 102 RMR
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 CANADIAN OVER-SEAS EXPEDITIONARY FORCE?} Yes

F. Atkinson (Signature of Man).

(Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Fred Atkinson, 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.

F. Atkinson (Signature of Recruit)

Date Nov 9 1914. (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Fred Atkinson, 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.

F. Atkinson (Signature of Recruit)

Date Nov 9 1914. (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 Victoria this 9 day of Nov 1914.

(Signature of Justice)

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

McDynne Jones Lt-

(Approving Officer)

200 M.—8-14.
H.Q. 1772-1-13.

Description of Atkinson F. on Enlistment.

Apparent Age 27 years 5 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 6 ins.

Chest measurement.
- Girth when fully expanded 38½ ins.
- Range of expansion 2½ ins.

Complexion fresh

Eyes grey

Hair brown

Religious denominations.
- Church of England
- Presbyterian
- Wesleyan Yes
- Baptist or Congregationalist
- Other Protestants (Denomination to be stated.)
- Roman Catholic
- Jewish

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).

Scar right wrist

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 Nov 9 1914.

Place Victoria

W R Lapper Major
B Gaudet Major
A E Jones Capt

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.

Atkinson 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.

J A Hall (Signature of Officer)

Date 9/11/14 1914.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 77693. (Rank) Private

Name (in full) Fred Atkinson enlisted in

the 30th Battalion

CANADIAN EXPEDITIONARY FORCE at Victoria B.C. on the 9th

day of November 1914.

HE served in France with 15th Bn.

and is now discharged from the service by reason of demobilization

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

Age 31 yrs

Height 5' 6"

Complexion Dark

Eyes Gray

Hair Brown.

Marks or Scars Scar right wrist.

Fred. Atkinson
Signature of Soldier

H. G. Andrews
Issuing Officer

Captain
Rank

for O.C. District Depot No. 11
Appointment

Date of Discharge July 21st 1919

Signed at Vancouver B.C. this 21 day of July 1919

in Military District No. XI

File Reference No. DD-A-6660

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.

M. F. W. 39a
200m.—2-18.
H.Q. 1772-39-882

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 required.

WAR SERVICE BADGE CLASS " " A
No 61406. ISSUED

C.A.D.C. 5009 A

CANADIAN ARMY DENTAL CORPS, O.M.F.C. MD 11

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) ATKINSON. F.

REGIMENT 3rd Tunnel Coy RANK Sapper No. 77693.

Date of Examination in England 20.12.18 | Date of Examination in France

DIRECTIONS TO DENTAL OFFICERS

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

PRESENT DENTAL REQUIREMENTS

1. FILLINGS 4. 8 -9.
2. EXTRACTIONS
3. CROWNS
4. DENTURES
   - (*a*) Full Upper
   - (*b*) Part Upper
   - (*c*) Full Lower
   - (*d*) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT ?

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

- (*a*) In Canada
- (*b*) In England
- (*c*) In France yes

KINMEL PARK, NORTH WALES.

Signature of Dental Officer [illegible]

6660

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

NAME OF SOLDIER Atkinson DISTRICT XI

REGIMENT C. Engrs RANK Spr. No. 776693

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	Pyrrhœa	Synthetic Porcelain	Extracting	DENTURES U	DENTURES L	DENTURES P	Gold Clasp	Gold Filling	CROWNS Gold	CROWNS Porcelain	Bridge Work	OPERATOR	Military District	REMARKS
Condition on first Examination	1919 Sept. 18.	1/5		3/6.10 4							4/13.17 21.30						2/19.31			Lieut Sproule	XI	No work Required

D.M.S. 1975

Medical Examination upon leaving the Service

of an Officer fit for general service or a Soldier fit for duty.

☛ *Officers leaving the Service upon being found unfit for general service by a Medical Board, and Soldiers leaving the Service upon being found otherwise than fit for duty by a Medical Board, are not to be reported on this Form.*

Rank Spr. Name T. Surname Albinson

Unit or Corps 2nd C E R B. (If a soldier) Regtl. No. 77693

Born at Greytown, Grey, on, date 1887, 1st June.

Signature (for identification) Fred Albinson

The examination is to be made jointly by two Medical Officers.

1. PHYSIQUE—Any deformity, maiming or lameness? If so, describe.

Weight 148 lbs.

Height 5 ft. 7 ins.

yes middle finger left hand. amputated at proximal inter-phalangeal joint good flap - not painful

2. NUTRITION AND DIATHESIS?

good.

After searching inquiry and thorough examination is any evidence found of disease or impairment of the parts indicated below? If so, describe.

3. NERVOUS SYSTEM?

no

4. RESPIRATORY SYSTEM.

no

5. HEART?

Abnormal Sounds? no

Abnormal Size? no

Pulse Rate? 80 Intermittence or irregularity? no

6. ARTERIES.—Any hardening? no

7. DIGESTIVE SYSTEM?

no

8. GENITO-URINARY SYSTEM?

Urinalysis—S.G.? 1020 Reaction? Ac Albumen? 0 Sugar? 0

9. SKIN, MIDDLE EAR, EYE or any other part?

no

10. Is there any evidence of impairment of health or physical condition not mentioned above? If so, describe.

no

11. Opinion as to the health and physical condition of the one examined?

Good

Examined at Kimmell Park Camp Signed [illegible] Capt. M.O.

Date 27/12/18 Signed [illegible] Capt M.O

☛ *If any disease or impairment of health or physical condition is discovered, this report should be sent at once to the O.C. concerned for the Officer or Soldier to be sent before a Medical Board for regular boarding.*

A.G's. BRANCH,
G.H.Q., 3RD ECHELON
Date 2.3.18
No. E4

A.F. W.3428.

REPORT ON ACCIDENTAL OR SELF-INFLICTED INJURIES.

To be rendered in accordance with Instructions on the back of this Form.

		Date of Casualty.
1. Number, Rank, Name and Unit of injured man.	77693 Spr ATKINSON F. No. 3 CANADIAN TUNNELLING CO. C.E.	24/2/18

2. Nature, Location, and Severity of injury. (*N.B.* Field Ambulance to be notified at once if wound is believed to be self-inflicted).

Laceration head (slight)
Rutherford Capt R.A.M.C.

3. Short statement of the circumstances of the case. (Signed statements of witnesses to be attached to this Form).

Spr Atkinson was making a photo frame from the butt of a German rifle when the chisel which he was using slipped, penetrating the palm of his hands.

4. Commanding Officer's opinion as to whether the man was:—

(*a*) In the performance of military duty. — No.

(*b*) To blame. — No.

(*c*) Whether any other person was to blame. — No.

A Whitehead Major
Commanding 3rd Can. Tun. Co. C.E.

Date 26.2.18

C.L. B.176
Lce. Lt. Hand
acc.
Nil.

5. (*a*) Opinion of G.O.C. Brigade. Not on military duty - injury accidental

(*b*) Disciplinary action taken or proposed, whether against injured man or another. Nil

R Uniacke LtCol. R.E.
C.R.E. XXII Corps Troops.
Commanding Brigade.

Date 28/2/18.

G.H.Q., 3RD ECHELON
No. 18/6/174
9 MAR 1918
CANADIAN SECTION

6. To ..... Army "A."

Forwarded with reference to my Casualty Wire No. ..... Dated .....

Date .....

G.H.Q. 3RD ECHELON.
CENTRAL REGISTRY.
20 MAR 1918
G.R. No. K

Division.

7. To D.A.G.,
G.H.Q., 3rd Echelon.

aw 9089

Forwarded for Record. This casualty should be reported as injured (accidentally)

A B Whitfield Capt for D.A.G.

Date 18/3/18

G.H.Q., 3RD ECHELON
No. 18/6/174
20 MAR 1918
KDd
CANADIAN SECTION

Army.

A.P. & S.S. B. 128. 20000 7/17.

INSTRUCTIONS.

1. These Forms are to be completed in all cases of accidental or self-inflicted injuries, involving a soldier's absence from duty, whether due to the man's own act, or that of a comrade, or to other extraneous circumstances.

2. Where several casualties occur as the result of one accident, one Form is to be completed for each Officer or other rank injured, but only one set of statements from the witnesses of the accident need be attached.

3. Full statements are to be taken by an Officer from the witnesses of the accident. These statements will be signed by the witnesses making them, and by the Officer who takes them, and will be forwarded with this Form. Where it is intended to take disciplinary action, copies of these statements should be retained by the Unit for use in lieu of a summary of evidence.

4. Where it is possible to obtain it, a statement from the injured man will also be forwarded. This, however, should not be used as evidence against him in any subsequent disciplinary proceedings.

Special Instructions as to Evidence in Cases of Self-inflicted Wounds.

5. In these cases the statements mentioned in paragraphs 2 and 3 above should bring out all material points, *e.g.*, statements to the effect that the witness was with the accused standing on the fire step (or sitting in a dug-out); that the accused was cleaning his rifle; position of safety catch, magazine, etc., if known; muzzle of rifle on toe of foot; hand on muzzle; that accused pulled trigger; that the rifle was afterwards examined and an empty cartridge case was found in chamber; that accused was seen to be wounded; what accused said ("I have shot myself," "I did not know it was loaded," etc.).

6. A soldier is specially trained in the safe use of his rifle and revolver, and evidence of any neglect of the ordinary precautions as to their handling in such cases usually has considerable bearing on the question of negligence. In cases of wilful self-wounding the fullest possible evidence should be obtained; unless the evidence is conclusive, this charge should not be used. The charge will therefore usually be laid under Sec. 40 Army Act—"Conduct to the prejudice of good order and military discipline in wounding himself through negligently handling a rifle," and an alternative charge to this effect should be made, even if the accused is to be tried under Section 18 for wilful maiming.

R.2-164.

FROM:- ~~OFFICER I/C R.11~~

TO:- ~~OFFICER I/C~~ R.I.A.3.

REPORT OF ACCIDENTAL OR SELF INFLICTED WOUNDS.

(Extract from (A.F.W.3428)
(~~Pro Forma 16~~)

1. Number, Rank, Name and Unit.	77693 Spr Atkinson F. No. 3 Can Tunn Coy.
2. Date of Casualty.	24/2/18.
3. Location, Nature and Severity of Wounds.	Lacerated Hand Slight.
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 accident, and if due to a detonator, grenade, or bomb.	Spr Atkinson was making a photo from the butt of a German rifle when the fixed bullet which he was trying to extricate by inserting the point of his knife.
6. Whether the man is considered to blame.	No.
7. What action has been taken.	None.
8. Final classification as reported by Army H.Q.	Injured Hand.
9. Casualty was reported as.	Lac Lt. Hand Hand.
10. Place and date of Court of Enquiry (if held)	

J P Charters
Lieut.

For Officer i/c Records 2.A4

Date 2/4/18

Forms
I. 1237
12

E 1/1/22

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
12133.	77693	Spr	Atkinson	Frederick
Year	Unit.		Age.	Service.
	Can. Engs		31	4 2/12 3 4/12

Station and Date.

Disease Lac'd Wd. Lt Hand.

Occupation Miner

Enlisted Nov 4 1915 at Kamloops B.C.

Came to Eng 5 March 1915

Went to France 1 May 1915.

Wounded 26 Feby 1918

Hospitals C.C.S. 3 days

54 London Genl Boulogne 18 Days: Bournemouth

Crag Head V.A.D. 2 weeks: Can Conl Epsom 7 weeks

16 Can. Genl Orpington 8 weeks Then to C.C.H.

10 July 1918.

History: On Feb 26th 1918 at Ypres he accidentally injured palm of left hand with chisel. Immediately afterwards found he was unable to flex middle finger - Reported sick and wound dressed - 2 days later went to C.C.S and operation done to suture tendon - Came to 54th General Boulogne for two weeks Then on March 15th to Bournemouth for 18 days Then to Epsom for 7 weeks - wound dressed & massage. Then to Orpington May 15th - On May 22nd another operation to suture tendon - Admitted Granville C.C.H. July 9th 1918

July 12th 1918 Present Condition - Left Hand - Small transverse scar in palm about level of superficial palmar arch in line of mid finger - Linear scar of operation in line of proximal finger - Unable to fully flex mid finger - Has certain amount of flexion by flexors ~~profundus~~ superficialis profundus - Evidently severed ~~tendons~~ tendon

J. A. McCollum

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

(44502) Wt.W 11203—M 1150. 1,450,000. 6/12 16. C.F.&S. Form /I. 1237/12. (E239) P.T.O.

Station and Date.	
15 JUL 1918	Do not postpones owing? G.H.T.
July 19th 1918	Gas wounded for dressing Lincoln — Dó go hÚs B. Nursing explanations for dressing in hospital J. a. wh.
22 JUL. 1918	Amputat. midgint - middle finger left H.B. Tierney
July 22nd 1918	Waiting for operation J. a. wh.
Aug 2nd 1918	" " " Dr H
Aug. 6. 18	" " " 3 Operations Dr
Aug 13th -	Operation:- Amputation of middle finger left hand, just above 1st inter-phalyngeal joint Long ventral and short dorsal flaps. Tendon severed and sewn over end of stump of bone, Flaps sewn silk worm gut sutures. Dressings. Dr H
Aug 14/18	D.W. Carney Bon 3 flies
Aug. 19th 1918	Stitches removed. Patient doing well
Aug 24, 1918.	making good progress.
	For Surgical Exam-room. Dr Kelleher capt
Aug 5/5	was also heated to Exam room re dispersal 3 flies
5.9.18	Mid finger healed to Board Room for disposal 3 flies.
6 SEP 1918	Has good result - in amputated finger Can flex & extend thing well.
	Category D1
	Dr Kelleher
8.9.18.	To be discharged D1 3 flies.

EXAM. MED. BOARD
9 SEP 1918
G. C. S. H.

Forms
I. 1237
12

Ward 21

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	77693	Spr.	Atkinson	J

Unit. Can Eng. Age. 31 Service.

Year 1918.

Station and Date.

Disease Lacerated L Hand. acc. W.I.S.

29-3-18. Was on duty on Trans, Carpentering, Trimming a board, Chisel cut his ~~L~~ Hand - Cut tendon of 3rd finger: covered nearly healed - Movement of flexion 3rd finger L hand greatly impaired Vide Dressings

Woodcote Park, Epsom.

6.5.18 Col Stewart recommends Transfer to Orpington for active T T.

Passed Capt Comb

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

(44502) Wt.W 11203—M 1150. 1,450,000. 6/12 16. C.F.& S. Forms/I. 1237/12. (E238)

P.T.O.

Station
and Date.

Forms
I. 1237
12

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	77693.	Sapper.	McKeown.	Fred.

Year	Unit.	Age.	Service.
1918	3rd Canadian Tun Co.	31 yrs.	3y 42 mths.

Station and Date.	Disease
B	Lacerated Hand L. (1072)
	For transfer J Reuers.
Cap-head	
Bournemouth	
25.3.18	
28-3-18	Can: Idpl. Epsom.

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

Wt. W 6604/M 2870—1,500,000—8/17—H. & Sp. (10933). Forms/I. 1237/12. (E239)

[P.T.O.

Station
and Date.

ONTARIO MILITARY HOSPITAL,
ORPINGTON, KENT.

Forms
I. 1237
12

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	77693	Spr	Atkinson	A. E. Fred

Year 1918

Unit.	Age.	Service.
Canadian Engineers (3rd Tunnelling Coy.)	31	4 yrs 12 days

Station and Date. 13/5/18.

Disease Lac wd. left hand (acc)

B'de

Div:

Enlisted Sept. 1914.

Went to France 1st May 1915.

Ref: Epsom.

Wounded at Ypres 24/2/18

Went to 48th Field Amb. 26/2/18.

" " No. 2 C.C.S. 26/2/18 & had operation

" " 54th London Gen. Hosp. Boulogne 28/2/18

" " Crag Head V.A.D. Hosp. Bournemouth 15/3/18

Transf'd to C.C.H. Epsom 28/3/18

" " No. 6 Canlgen. Hosp. 13/5/18

Present Condition —

Small scar on palm of hand opp flexor tendon of middle finger. Pt. cannot flex middle finger. Apparently no bony injury. Pt. states he did this with a wood chisel while doing carpenterwork at Ypres.

Indications

(1) X-ray left hand

(2) Operation.

Hospital Capt

14/5/18 To Massage Clinic

N A E

14/5/18 Nine Regim daily massage & Electricity

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

(Misc) W2944/P438 2,9[illegible]0,000 1/18 McA & W Ltd Forms/I. 1237/13 (E 2349)

Station and Date.	
14/5/18	Xray Report: Negative.
27/5/18	Operation. — Suture of tendons of flexor sublimis & profundus tendons of middle fingers. Hall
22/5/18	Urine — Colour - Cloudy Amber Reaction - alkaline S.G. - 10.35 Albumen 0 Sugar 0
24/6/18	Operation — Scar on palmar surf of hand excised and the ends of flexor sublim & profundus tendons separated and drawn together. Sewn together with fine silk. Skin closed. Hand put up with fingers in flexion. Har
4/6/18	To Capt. Campbell for massage training of muscles of middle fingers. Hall Lieut. Capt
10/7/18	Very little flexion in finger yet. Requires muscle training. To Burton. Hall Lieut Capt.

(9173)—Wt. W12165—2146.—1,250,000.—2-15.—C. & G. Forms B. 103/1.

Casualty Form—Active Service.

Regiment or Corps 30th BATTALION C E F.

Regimental No. 77693 Rank Pte Name Atkinson F.

Enlisted (*a*) 1-11-14 Terms of Service (*a*) one year or duration of war Service reckons from (*a*) 1-11-14

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*) Miner

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
		Taken on Strength 15th Bn No 10 Part 2 Orders 16/5/15	3/5/15		
15/11/15	O.C. 15th Bn.	Wounded by rifle Grenade		14/11/15	137/Inf./15/9.
19/11/15	Do	Wounded	Lab sp.	14/11/15	B.213
19/11/15	Do	Returned from Command mining section	Hosp.	14/11/15	B.213
21/11/15	No 1 C.F.A	Sh. Hd Shld. Hip.	#1 C.F.A	14/11/15	A.36 — 21/11/15
21/11/15	No. 2 C.F.A.	" " " "	#2 C.F.A	14/11/15	" " "
"	"	Transferred to	#1 C.F.A	" "	" " "
28/11/15	No. 1 C.F.A	Hd Shld & Hip		14/11/15	" 28/11
"	"	" " transferred to daily	With Unit	26/11/15	" " "
24/12/15	O.C. 15th Bn	Reported from Hospital	Joined	12/12/15	B.213. No. 196
3/2/16	Daily.	Transferred to 3rd Canadian Tunnelling Coy. and struck off strength 15th Bn	Joined	29/1/16	Authy:- Daily Confd. 3rd Echelon No 2341 dy 3-2-16 No 8

(*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.

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				
4/2/16	6 C 15 Bn	Inlisted Strength 3rd Can Inf Coy	Fritzlar	4/2/16	Auth Daily Can Sect 3rd Echelon d 27 1/3/2/16 01 2 Orders No 7 dy- 14/2/16
19/2/16	O.C. Unit	Granted leave of absence to. 27-2-16	do	19-2-16	B213 Pt 2 Orders 11- 14/3/16
3/4/16	do	Rejd. Unit from leave.	do	6/3/16	158 Coy/13/13 DCS. 38/5/4/16
1/2/16	O C Unit	Appointed L/Corporal	do	1/2/16	B213 ~~DCS~~ Pt 2 Orders. 16 21/4/16
		Admitted Pt 2 Orders No 16 dy- 21/4/16 Subsection No 4 in so far as concerns the Admission is hereby cancelled	Fritzlar	20/4/16	Pt 2 Orders 17. 20/4/16
20/2/16	do	In confinement awaiting trial by F.G.C.M. of "When on active service, absenting himself without leave from 9.30 am 20/2/16 to 1.30 a.m 6/2/16 & sentenced to 56 days F.P. No 1 by Major Gen. G.W. Thomas. Forfeits 7 days Pay under R.W.	6/2/16. Tried & convicted 1/19/2/16. Confirmed & C. in Chief 22/2/16 ~~Report~~	B 20 Coy. Pt 2 Orders 17. 30/4/16	
23/4/16.	10 b Yorks	Deserters	Aden	10 b Yorks 18/4/16	a 36 DCS Coy. 9-5-16
do	9 c Yorks	do	"	9 b Yorks do	a 36/DCS. 71-11-5-16
do	do	do	Jetta	DRS do	
24/4/16	O C Unit	Rejd Unit from Hosp	Fritzlar	24/4/16	B213 DCS 16. 16/5/16
27-10-16	do	Attached 2a Inf Coy Camp	do	24-10-16	C of M 2 Army CM: 700 dy-22/10/16 Pt-20. Coy. 9/11/16
8-11-16	do	Rejd Unit from	do	8-11-16	B213 Pt 20. 73. 21/11/16

3

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

M. F. W. 54. (A. F. B. 103.)
350M.—5-16
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps 30th Batt.

Regimental No. 77693 Rank Pte Name Atkinson F.

Enlisted (a) 1-11-14 Terms of Service (a) C. E. F. 20 of 20 Service reckons from (a) 1-11-14

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) Miner

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				
30/1/19	overseas	T. O. S. District Depot XI.	Hastings Pk. Vancouver	13-1-19	D. O. Pt II 30/1/1919
	DISCHARGED	DEMOBILIZATION	VANCOUVER, B.C.	21/2/19	D.O. 55/327 F. V. A. MacLean Capt. For O.C. District Depot, XI

(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				

Casualty Form Active Service

Regiment or Corps 3rd. Canadian Tunnelling Coy.

Regimental No. 77693 Rank Spr. Name Atkinson F.

Enlisted (a) 1-11-14 Terms of Service (a) D of W Service reckons from (a) 1-11-14

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) Miner

Report: Date	Report: From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
1/12/16	O.C. Unit	Sick to hospital	Not stated	27/11/16	B.213 D.C.S.195 d/12/12/16
9/12/16	76 F.A.	Pyalgia adm	76 F.A.	27-11-16	a 36 E1901 DCS 197
do	do	do Disch	to Duty	5-12-16	23-12-16
22/12/16	O C Unit	Regd from Hosp.	Field	5/12/16	B213 DCS. 199. 31 12/16
25 8/17	do	Leave 22 8/17 to 19/17			B213 O/- 59. 7 9/17
8 9/17	do	Regd from Leave	do	39/17	B213 DCS. 259
25.2.18	48 F.A.	Sec. Hand. L. Adm.	48 F.A.	25.2.18	a. 36/4691.
25.2.18	48 F.A.	" " " "	48 F.A.	25.2.18	a. 36/4691.
		To 37 D.R.S.	48 F.A.	25.2.18	
26.2.18	48 F.A.	" " " Adm.	48 F.A.	?	a. 36/5083.
		To	2 CCCS.	26.2.18	
28 2/18	54 Genl.	— do — adm	54 Genl.	28 2/18	5492
2 3/18	2 CCCS	— do — adm	2 CCCS	26 2/18	6113
		Tfr.	17 A.T.	28 2/18	

(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				
14 3/18	54 Genl	Lac. Hand	Tfd England	14 3/18	7688
	GOC 1st	Injured (accd.)	Tfd	24 2/18	KD d. 18/6124.
15 3/18	Army	do	Adm	HS St	
14 3/18	HS St Denis			14 3/18	4910 W3083 O/- 18. 28 3/18

D.B. Johnston

Lieut. for Lt.-Col., A. A. G.
Canadian Section, G. H. Q. 3rd Echelon, B. E. F.

22.3.18	C. E. R. D.	T. O. S. from 3rd Tunn Coy	Seaford	15.3.18	D.O. 81

W. D. Lurcel
LIEUT
FOR LT: COL: I/C RECORDS, C.O.M.F.

21-11-18 DISCHARGED FROM 3RD C. C. D. Seaford TO 6th OBN. PART II D. O. No 271 21-11-18
R. S. Davies Lieut. For O.C.
3rd Canadian Command Depot

20.9.18	CERD	On Com 3° CCD	Seaford	17.9.18	Do 251
28.11.18		Cease Com 3° CCD on S. & Sposted 3° CERB		21.11.18	Do 310

J. T. Burk Lieut
For O.C CERD

Embarked for Cam. 13/11/19.

15.12.18	3rd CERB	Com: Rhyll	Seaford	16-12-18	Pl 11. DO. No 114.

T. O. S. — C.C.C. — Kinmel Park Camp Part II Orders 14
S. O. S. — " " " " " " " " " 27

1717

GRANVILLE CANADIAN SPECIAL HOSPITAL

PATHOLOGICAL LABORATORY

Urinalysis:

Date 11th August 1918 **Ward** A.17 **Bed** 122

Name Spr. Atkinson **Regt. No.** 77693 **Unit** C.E.

Quantity in 24 hours ..... **Sp. Gr.** 1030 **Reaction** Acid

Consistence Clear **Colour** L.A. **Sediment** .....

Chemical:

Albumin Approx 0 **Sugar** 0 **Urea** .....

Remarks Acetone 0

Microscopical:

Casts .....

Plus .....

Blood .....

Other Elements .....

Russell B. Lucas

Form 16 3,000 29-7-18

Pathologist.

BOARD RECOMMENDS:-

1. Fit for Duty .....

2. Fit for Duty after ..... weeks' physical training.

3. Fit for Temporary Base Duty ..... weeks.

4. Fit for Permanent Base Duty .....

5. Discharge .....

Signatures:-

(..... President.
(
(
Members (.....
(
(
(.....

APPROVED.

Dated ..... 191 . ..... For A.D.M.S.

Regtl. No. Rank and Name 77693. Spr Atkinson Corps C.E.

Disease Pr. Da. Hand Hospital 16th C.G. Hospt.

To Officer i/c Laboratory. Ward 21.

Please carry out an examination of the accompanying specimen of Urine

with special regard to

Date 22. 5. 18

O. i/c Ward.

LABORATORY REPORT.

Colour	Cloudy Amber
Reaction	Alkaline
Sls	1035
Albumen	0
Sugar	0

Date of Examination 694.

W.3212. 50M-4-4-18.

O. i/c Laboratory.

Specialist's report.

Station.Vancouver,Date 17-2-19.

Reg.No. 77693..Name Atkinson..Rank ..Spr.
Unit. 30th Btn.

Pathological condition present:

C.C.O.M.
Slight retraction right memb. tymp - Left normal.

Voice - Right - 20 ft.
Left - 20 ft.

Estimated percentage of disability. Negligible.
Is this disability due to service..No.
If not due to service has it been aggravated by service..No.
If "yes" give percentage due to such aggravation.
Will further treatment be of benefit.No.
Probable duration of disability..Permanent.
Recommendation.

(sgd) E.C.Draeseke,Major.
Signature and rank of specialist.

Certified to to be correct copy.

. . . . . .Capt.CAMC.
Pres.Med.Bd.Cas.Coy.,D.D.NoXl.CEF.

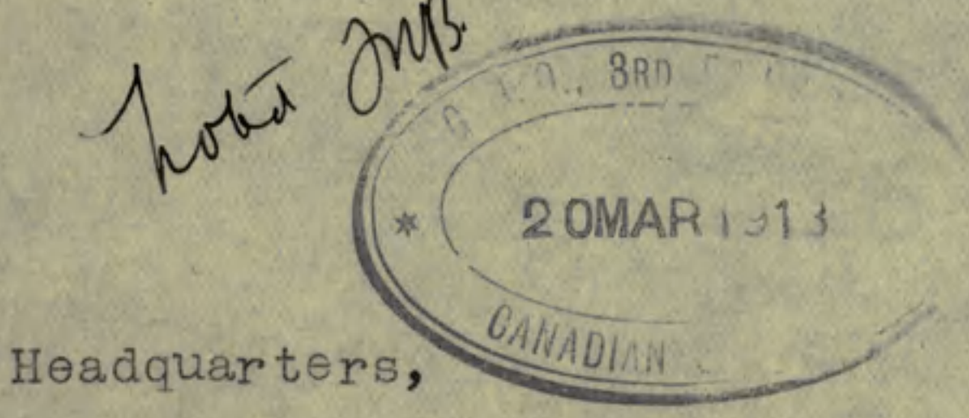
Headquarters,

4th ARMY.

First Army No. A(B)X. 1272/4. 15/3/18.

The attached papers in connection with the accidental injuries sustained by No. 77693, Sapper F. ATKINSON, 3rd Canadian Tunnelling Co. R.E. are passed to you as the Unit concerned is under your command.

Noted 20/3



Lieutenant Capt

Major, D.A.A.G.,
for General,
Commanding First Army.

Headquarters,

First Army.

56

L. L. Job 4503.—M. & D. 6332.

42213

MILITIA AND DEFENCE

ASSIGNED PAY

Duplicate

OVERSEAS CONTINGENTS

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

CHECKED. R

Officer I/C Pay 2 F.

To Whom John Atkinson

Address 4 Selkirk St.
Dewsbury Rd. Leeds
Yorkshire. England.

Rate $15.00 Sept. 1. 1915

By Whom Assigned Atkinson F.

Regtl. No. 77693

Rank ~~Pte.~~ Lcpl

Corps ~~30th Basin (2m. 8 10/15)~~
No 3 Tunn Co

OK. H. G. Mackie Pay Sgt 24/11/16.

PAYMENTS

Month	Year	Cheque No.	Amt.		REMARKS
Aug.	1915				
Sept.					
Oct.		I. 9613	30 -	✓	
Nov.		A. 16023	15 -	✓	
Dec.		J 11501	15 -	✓	
Jan.	1916	I. 13172	15 -	✓	
Feb.		H. 19075	15 -	✓	
March		G. 19322	15 -	✓	
April		A. 223	15 -	✓	
May		B. 1450	15 -	✓	
June		O. 9074	15 -	✓	
July		C. 8849	15 -	✓	
Aug.		B. 11122	15 -	✓	
Sept.		J. 15217	15 -	✓	
Oct.		~~G 19659~~	~~15~~ -	Cancelled	
Nov.	$225	261820	30	✗	Pay $30.00 to adjust Oct
Dec.		302093	15	✗	
Jan.	1916	313533	15	✗	
Feb.		350559	15	✗	
March		395083	15		As Pay Checked and Correct Fred Lanett

RECEIVED FROM
NOV 7 1916
OTTAWA.

ASSIGNED PAY.

By whom assigned Atkinson. F. (Cpl.)

Regtl. No. 77693 ~~30th Bn.~~ No. 3 Tunn. Co.

Month	Year	Cheque No.	Amt.		Pay Sheet		REMARKS.
Jan.	1916						
Feb.							
March							
Apl.							
May.							
June							
July							
Aug.							
Sept.							
Oct							
Nov.							
Dec.							
Jan.	1917						
Feb.							
March							
Apl.							
May							
June							
July							
Aug.							
Sept.							
Oct.							
Nov.							
Dec.							

Form P. 812A.
7777 15m. 12/12/18 D509

C.R. FILE NO. 1763

ASSIGNED PAY and/or SEPARATION ALLOWANCE

Payable to J. Atkinson.

Address 4 Selkirk Street, Dewsbury Road, Leeds.

Name ATKINSON. F.

From Canada: No. 77693 Rank L/Cpl Unit C.E

Rank	Authority	Unit
	ASSIGNED PAY AND SEPARATION ALLOWANCE BEING PAID IN ENGLAND UNTIL ADVICE FROM OTTAWA OF DISCHARGE OF SOLDIER	

ASSIGNED PAY

Authority ASSIGNED PAY / SEPARATION ALLOWANCE Dol. Effect

15 00 " " "

" " "

1.1.19. " " "

Month	Cheque No.	Assigned Pay	Amount Separation Allce.	Total A.P. and S.A.	REMARKS
DEC. 1919	~~E94004~~	~~15~~		~~15~~	DISCHARGED TO CANADA
JAN.	E94004	15		15	4 R. I.
FEB.	F50425	15			
MARCH	F31137.	15			Final paym^t.
APRIL					
MAY					
JUNE					
JULY					
AUG.					
SEPT.					
OCT.					
NOV.					
DEC.					
JAN.					
FEB.					
MAR.					
APRIL					
MAY					
JUNE					
JULY					
AUG.					

FORM P.805.
2283-7½M-6/12/16

Ref. No. .....

MILITIA AND DEFENCE
ASSIGNED PAY.

To whom	Mrs. Gladys Atkinson (Wife)	By whom assigned	Atkinson F
Address	45 Rosebank View	Regtl. No.	77693
	Westfield Road, Leeds	Rank	Spr
		Corps, &c.	C. E.
Rate	ASSIGNED PAY / SEPARATION ALLOWANCE 30.00		
Date to commence	1-1-19 ~~1-12~~		

ASSIGNED PAY AND SEPARATION ALLOWANCE BEING PAID IN ENGLAND UNTIL ADVICE FROM OTTAWA OF DISCHARGE OF SOLDIER NAMED HEREIN

Noted on L.P.C.

PAYMENTS.

Month.	Year.	Cheque No.	Amt. ASSIGNED PAY	Pay Sheet Deduction. SEPARATION ALLOWANCE	REMARKS.
Jan	1919				DISCHARGED TO CANADA.
Feb.					W R 1
Mar.	F80730	—		90 -	S A Jan-Feb-Mch £18.9-10
April					Final payment
May					Disc. 21.2.19.
June					Ottawa. T. 4005. 26.4.19.
July					
Aug.					
Sept.					
Oct.					
Nov					
Dec.					
Jan	1917				
Feb.					
Mar.					
April					
May					
June					
July					
Aug.					

ASSIGNED PAY.

By whom assigned

Regtl. No.

Month.	Year.	Cheque No.	Amount.	Pay Sheet.	REMARKS.
Sept.	1917				
Oct.					
Nov.					
Dec.					
Jan.	1918				
Feb.					
Mar.					
April					
May					
June					
July					
Aug.					
Sept					
Oct.					
Nov.					
Dec.					
Jan.	1919				
Feb.					
Mar.					

29247 THE MORTIMER SYSTEMS, OTTAWA, CANADA

NAME ATKINSON, Fred

Regimental No.	77693	Name and address of next-of-kin	
Unit	30th. Batt. 15th "		J. Atkinson, (Father)
Date of enlistment	Nov. 9th. 1914.		Fernie, B.C., Canada. PO Box 993
Place of Birth	Greasborough, Yorks.		
Married (yes or no)	No	Date and place discharged	
Amount of pay assigned monthly $	15.00	Reason for discharge	
To whom payable		Character on discharge	

CANADIAN ASSIGNED PAY AUDITED
AUDIT CLERK
DATE 3/6/16

	Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned pay	Other Charges	Total Debits	Remarks, Casualties, etc.
	1/3/15	31/3/15	31	1	31.	31	10	3 10		34 10			33.			33.	
	1/4/15	30/4/15	30	1	30.	30	10	3.	1 10	33 00			25 60			25 60	Ltd. to 15th Batt 30/4/15
15B	May	1-31	31	1.	31	31	.10	3.10	8 50	34 10			7			7	8
	June	1-30	30	1	30	30	.10	3.	35 60	33 00			3			3	
	July	1-31	31	1	31	31	.10	3 10	65 60	34 10			3			3	
									96 70				71 60				
									1 90	1 90							Exchange
	Aug	1-31	31	1.00	31	31	.10	3 10	98 60	34 10			5 66			5 66	
	Sept	1 30	30	1-	30	30	.10	3 00	127 04	33 00			5 48 15 00			20 48	15th Stats Sept 1st
	Oct	1-31	31	1-	31	31	10	3 10	139 56	34 10			2 68 15			17 68	
	Nov	1 30	30	1-	30	30	10	3 00	155 98	33 00			15 84 15			30 84	
	Dec	1-31	31	1-	31	31	10	3 10	158 14	34 10			5 23 15			20 23	
	Jan	1-31	31	1-	31	31	10	3 10	172 01	34 10			16 57 15			31 57	Trans to 3rd Can Tunls Co 1st Feb (B.O.8 14/2/16)
	Feb. 1	29 Mar. 31	29 60	1.00	29 00	29	1	29 0	174 54	31 90			12 95 15			14 45	
	Mar. 1	31	31	1.00	31 00	31	.10	3 10	61 93	37 10			5 23 15			20 23	From Esq. from 24/2/16 Part II Or No 16 21/4/16.
					400 00			39 70	1 90	441 60			257 80	105 00		362 80	
									7880								
					400 00			39 70	1 90	441 60			257 80	105 00		362 80	
								Total Debit		362 80							
										7880			Balance from to New Ledger				

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date					

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

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2. John Atkinson

Name of Soldier Atkinson F

PAYMENTS.

L. L. Job 89002.—Req. 6213.

Month.	Year.	Cheque No.	Amt.
April	1916	A 223	15
May		B 1450	15
June		O 9074	15
July		C 8849	15
Aug. ✓		B 11122	15
Sept.		J 15217	15
Oct.		~~J 19657~~	~~15~~
Nov.			
Dec.			
Jan.	1917		
Feb.			
March			
April			
May			
June			
July			
Aug.			
Sept.			
Oct.			
Nov.			
Dec.			
Jan.	1918		
Feb.			
March			
April			
May			
June			
July			

$15.00

Remarks. 15th Bth

13
05
6 5
3
1 95

ENGLISH

CANADIAN
ASSIGNED PAY AUDITED
2 [illegible]
AUDIT CLERK
DATE 2-6-19

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier.....

PAYMENTS.

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

L. L. Job 85095—M. & D. 5953.

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M. F. W. 12. 1
20m.—9-15.
H. Q. 1772-39-819.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

To Whom John Atkinson

Address ~~P. O. Box 993~~ ~~Fernie B.C.~~

4 Selkirk St.
Dewsbury Rd. Leeds
Yorkshire England

Rate 15.00 per m Sept 1st.

By Whom Assigned Atkinson F.

Regtl. No. 77693

Rank Pte.

Corps ~~15th Bttn~~ 30th Battn

2m-8/10/15

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			ENGLISH
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				Duplicate sent to England 17/10/16 OCT 19 1916
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.		I 9613	30	
Nov.		A16023	15	
Dec.		J 11501	15	
Jan.	1916	I 13172	15	
Feb.		H 19075	15	
March		G 19322	15	

CANADIAN
ASSIGNED PAY AUDITED
[signature]
AUDIT CLERK
DATE 2.6.19

Emp No 18157

Rank and Name ATKINSON, Fred.

Regimental No. 77693

Unit 30th. Batt.

Date of enlistment Nov, 9th. 1914 Victoria

Place of birth Greasborough, Yorks,

Married (Yes or No) No

If in Permanent Force

Name and Address of Next-of-kin
J. Atkinson, (Father)
Fernie, B. C. Canada

Date and place of discharge

Reason for discharge

Character on discharge

5338
CAN.O.R

Promotions or appointments

Report: Date	Report: From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case	Place	Date	REMARKS Taken from Official Documents
16.5.15	06.15th Bn.	Transferred to 15th Bn	France	16.5.15	Part II orders 10.
		On Strength 15th	do.	31/7/15	Nom. Roll.
26=11=15	WO.	Wounded by Rifle grenade } from Base		14=11/15	C.S "206. 9/n.
15=12=15	WO.	1st Canadian 2d Amb		26 11/15	C.S "221 W. Shoulder & hip
9=1=16	WO.	Rejoined Unit		12 12/15	Cas; List #238
14.2.16.	9/c 15th	Transf to Can. Tun'l Eg Co	Field	29.1.16	Part II O 8.
14 3 16	3rd C Tun Co.	Granted Leave from 19/2/16 to 27/2/16	"		" " # 11
21.3.16	"	Appointed L/Cpl	"	1.2.16	" II # 16 Cancelled
30.4.16	"	In confinement awg trial	"	6.3.16	" II # 17
30.4.16	"	Tried convicted by FGCM for AWL from 25/2/16 to 6/3/16 Sentenced 56 days & R1 Forfeits 7 days pay	"	19.3.16	" II # 17
"	"	Appt L/Cpl is cancelled	"		" II # 17
14.2.16	"	[illegible]	"	4.2.16	" 2 5 7

Atkinson. F. 77693

Report Date	Report From whom received	Record of promotions, reductions, transfers, casualties, etc, during active service. The authority to be quoted in each case.	Place	Date	REMARKS Taken from Official Documents
12.5.16	3rd Tun Co	Admd No 10 Can Field Amb	In the Field	18.4.16	CLA57 Deafness 10
20.5.16	"	Discharged to Unit	"	24.4.16	" A64 Myalgia 10
9.11.16	"	Attd to 2nd Tun Cos Camp	"	24.10.16	pt 2 # 69
21.11.16	"	Ceases to be Attd 2nd Tun Cos Camp	"	8.11.16	pt 2 # 73
16.12.16	"	Admd to Hospl Reptd from Base	"	27.11.16	CLA190 Sick Q 26.
29.12.16	"	Admd No 76 Field Amb	"	27.11.16	" A194 Myalgia
"	"	Discharged to Duty	"	5.12.16	" A194 " 26.
22.3.18	C.C.R.D.	Adm. Hosp T.O.S from 3 Tn Co.	Spr. Seaford	15.3.18	D.O. 81 & 3 Tn. Co/D.O. 18/28 3/18
20.9.18	-"-	On comm 3rd C.C.D	" -"-	17.9.18	D.O. 251 & 3 C.C.D. 224/23 9/18
29.10.18	3 C.C.D.	Granted permission to marry	" -"-	29.10.18	D.O. 256.
28.11.18	C.E.R.D.	S.C.S. to 3 C.E.R.B. Ceases of 3 C.C.D	" "	21.11.18	3 C.C.D 275/21 11/18 D.O. 310
26.12.18	W.C.D # 11	Attached from 3 C.E.R.B.	" Phyl.	16.12.18	D.O. 12
23.1.19	3 C.E.R.B.	Ceases of com Phyl & S.C.S to Canada in D 11	" Seaford	12.1.19	D.O. 19

29-1-16
15-3-18

181056 Spr. Chisholm
J. 3rd Tun. Co. C.E. states:
at about noon 24.2.18.
I saw Spr. Atkinson
working on a photo-
graph frame being
made from a German
Rifle Butt. He was
using a chisel and
talking to us at the time.
The chisel slipped
and pierced his
left hand. It was
purely accidental.

J. Chisholm

Wm. Tray Capt.
C.E.
25.2.18.

ESCHELON
18/6124
9-MAR1918
CANADIAN SECTION

No. 70/128 Spr.
Ferguson H. L.
3rd Tun. Co. C.E. States.

at about noon
24.2.18. I was over
in the medical hut
when a sapper athin
son was working on
a souvenir. A photo-
graph frame in a
German Rifle Butt.
He was using a chisel
the chisel slipped
and cut him in the left
hand. It was
accidental.

H L Ferguson

Lieut. T. Gray Capt. C.E.

25. 2. 18.

G. H. Q., 3RD ECHELON
No.....
9 -MAR 1918

No. 776.93. Spr.
Atkinson F. 3rd Tun. Co. C.
states:—
About 12 noon 24.2.18.
I was making a
photograph frame
from the Butt of a
German rifle when
the chisel slipped
penetrating the
palm of the left
hand. It was
purely accidental.

Atkinson F.

Wm. Gray Capt.

25.2.18.

18/6124
9-MAR 1918
KDE
CANADIAN SECTION

Name Atkinson Enl. 9-11-14.

Date of Embarkation for England N. S.

Proceeded to France. 16-5-15. Returned to England. 14-3-18 injured acc.

Date returned to Canada. 12-1-19.

Chk'd (over) 12/12/24

P.R. 855.

Cas. sheet.

14-11-15. Wd'd by rifle grenade - W. shldr & hip.
To duty 26-11-15.

18-4-16. Deafness To duty 24-4-16.

27-11-16. Myalgia To duty 5--12-16.

23--2-18. Lac. hand Lt. Eng. acc.
To Eng. 14 3/18

D.M.S. 1300.

Surname | Christian Name or Names | Reg. No.

Atkinson. F. 77693.

Rank | Unit | Co. | Troop | Batty.

Pte. 15th. Battn. (3 C. Tun. Co.) C. E.

26.11.15

Hospital 1st. Can. Fld. Amb. | Date of Admission

Transferred 10 C. F. amb. Hosp. 18.4.16.

76 Fld. Amb. Hosp. 27-11-16.

48. Fld. amb. Hosp. 25.2.18

54. Gen. Hsp. Boulogne Hosp. 28.2.18

Diagnosis

(1) Wd. Shldr. & hip.

Later Diagnosis (if changed)

(2) Deafness

(3) Myalgia.

Lac. L. Hand, Inc. acc.

Additional Diagnoses: if more than one state present

DISPOSITION | Date

To hosp. 27.11.16.

To Duty 5-12-16

REMARKS

C.L. 16-12.15 # 221

C.L. 26-11-15. 206.

" 8.1.16. 238.

" 12.5.16. A57.

" 20.5.16. A64!.

16.12.16. A190.

C.L. 29-12-16 A 194.

1.3.18, A 152-I

4.3.18 A154.

19.3.18 B167 (1)

" 30-3-18 B176 (2)

2.4.18 B177 2

16.5.18 B 215.

Reported from Base

"WOUNDED BY RIFLE GRENADE".

:- 14-11-15.

Rept'd. from Base

rej. unit. 12.12.15

Dis. to unit. 24.4.16

Dis 17.9.18

A M D 7 Dept

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

EPITOME OF HOSPITAL TREATMENT.

	Hospital	Adm.
1.	Mil. Hosp. Boscombe	15-3-18
2.	Mil Conv. Epsom.	29. 3. 18.
	16. C. G. Orpington.	14. 5. 18.
3.	Granville Buxton	11- 7- 18
4		
5.		
6.		
7.		

6. 2. 15. 7- 18 B 265
20- 9. 18 B 324

Atkinson F 31

Ward No. 21.
No. 16 Can. Gen. (Ont.) Hospital.

Plate No. L ~~XXH~~/190.

Name	Atkinson F. Spr.
Regl. No.	77639.
Unit	C.E.
Bde.	
Div.	
Par	Lt. Hand.
View	Posterior.
Date	14-5-18.

REPORT: Negative.

L 190

(This form to be filled in by all ranks on voyage to Canada.)

M.D. No. [redacted]

NUMBER	RANK	SURNAME	INITIALS	UNIT
77693	Spr.	Atkinson	F	3rd C.E.R.B

Full postal address Post Box 474 (Street) Fernie (City or Town) B.C (Province)

Name of one person to be notified of arrival Mrs. Beatrice Goode

Address Post Office Box 474 Fernie B.C

Railway Station in Military District to which a furlough warrant is required Fernie

Railway C.P.R

If married, is your wife on board No Number of children on board —

Their destination —

(Sgd.) Fred Atkinson

M. F. W. 2502

50 M.—4-18
1772—39—1269

Civilian Occupation Miner

HAI.

K.D.(d) 18/6124.

To:- Headquarters "A",
FIRST ARMY.

- - - - - - - - - - - - - - - -

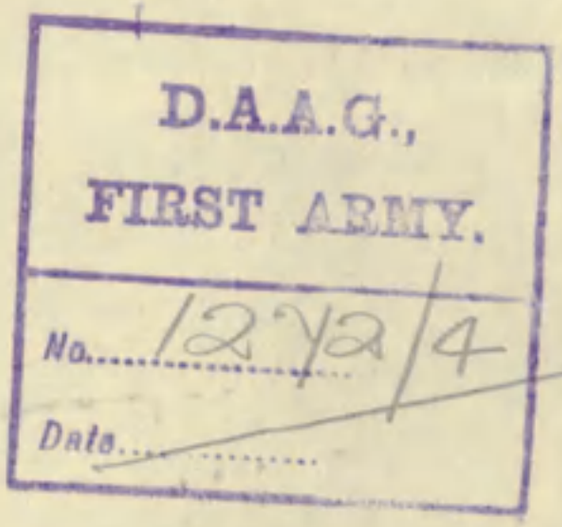
77693 Spr. Atkinson, F. No.3 Cdn.Tunn.Coy.

- -

The attached Army Form W. 3428 in connection with the above named man is forwarded for completion of Para. 7, please.

D. C. Skinner Capt.
S/C
for Major-General,
Deputy Adjutant-General.

G.H.Q.,
3rd Echelon,
March 10th,1918.



F.C.A. Wac

Number 77693 Rank Pte

Surname ATKINSON

15/4/21

Christian Names Frederick

Unit 15th Bn Can Inf Theatre of War France

Dates of Service 16/5/15

Remarks

Kellogg Gen Del

Latest Address ~~P.O. Kimberley~~

~~Idaho B.C. USA~~

Roll.No. B Page 160

G.A-7565 Diaps
9.49.308 ccm
MAY 1 6 1921
SEP 6 192
SEP 6 192

No. 8.39. 7769 3 Feb. Paylist. Rank Pte. Name Atkinson J.

T. O. S. 1.11.14 (20.30/12.11.14) Unit 30 Battalion C. E. F.

M. D. 11

Paid From	Paid To	Sig. or Rec't	Promotions, Transfers, Discharges, etc.	
			Particulars	Authority
1914. Nov. 1.	1914. Nov. 30.	✓		
10 ea.		✓		
1915. Jan. 1.	1915. Jan. 31.	✓		
Feb.		✓		
Mar.		✓		

UNIT SAILED
FEB 23 1915

R. 149.

Name Atkinson. F Held *Rank* Spr. *Reg. No.* 77693.

Unit 3rd. Canadian Tunnelling Company.

Next of Kin Canada.

Date 1916.	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
18. 4.	To. 10. Can. Fld. Amb.		Myalgia.	A. 54		
24. 4	Discharged to Unit.		do	A. 64		
27-11.	Reptd. from Base Adm. to Hosp.		Sick	A. 190.		
27-11.	To. 76. Fld. Amb.		Myalgia.	A. 194.		
5-12.	Discharged to Duty.		(Do)	A. 194.		

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

NAME Atkinson, T. REGT. No. 77693

RANK AND UNIT Pte. 3 J.R.C.

NEXT OF KIN

CABLE		NATURE OF CASUALTY
No.	DATE	

M. F. W. 42—100 M.—8-18.
H.Q. 1772 39-893.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
B 324	Disc Ex Grans Con Spec: Buxton	17-9-18	Lac. St. Hand acc

Form R. 149. Fred

Name ATKINSON Rank Spr Reg. No. 47693

Unit 3rd Can. Tunn Coy

Next of Kin Canada

Date		Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1918							
25	2	48 Fld Amb	Lac	Lt Hand	A152		14333
28	2	54 G H Boulogne		do	A154	HA	16317
15	3	Mil Hsp Boscombe Hants			B167		
		(Aff. Alexandra H. Cosham)		do	B176		14514
Now		ascertained to be	accidental				
29	3	M. C. H. Woodcote PR	Epsom	Lac Lt.	B177		
—	—			Hand Acc			15234
14	5	16 C G H Arpington		do	B213		18045
11	7	Gran C. Spec Buxton		do	B265		21242
		R.L. 17/9/18 Sick furlough from 17/9/18 to 27/9/18					
		Rpt to 3rd Command Seaford					
17	9	Disch		do	B324		8075

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

Name Atkinson J. Rank Pte. Reg. No. 77693.

Unit 15th. Battalion.

Next of Kin Canada.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
14/11/15	Rep. from	Base	Wd. by		11	
			rifle grenade	206	228	84
26/11/15	1st. Com. F. Amb.		W. shr. hip	221		
12/12/15	Reg. Unit		(")	238		

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

Reg. No.	Rank.	Surname	Category.	Dentally Unfit.
77693.	Spr.	Atkinson Christian Names (1) Fred. (2) C.E. (3)	A3 Date	

Place of Enlistment:	Date of	Taken on from	Religion	Inoculations	Company
Kamploops	4/11/14	[illegible]			E
Province: B.C.	Age on 24	Date 27/9/18	Pres.	Vaccination	

On Command	Hospital	Permanent Cadre	Employed as
		Date taken on	English
Date Proceeding	Date Admitted		

Record of Overseas Service: 1/5/15 till 15/2/18

Profession or Trade (Civil) Miner

Transferred or Posted to [illegible] Date [illegible]

Reason for Return: Gsw. left hand.

Married ~~or Single~~ ~~Single~~.

Address of Next of Kin Father
Mr John Atkinson
4 Selkirk St
Leeds Eng

Country

LEAVE.

No. of Pass Issued.	From.	To.	Free Transportation.
S/3.	17	27/9/18	

A.G. 10434

Part 2 Order Entries.

No.	Date	Ref.	No.	Date	Ref.
224	23/9/18	A7			
231	1/10/18	x P			
243	15/10/18	H.A.			
255	29/10/18	M.			

TRAINING.

Weeks of Training.

1	2	3	4	5	6	7	8	9	10	11	12	13	14	Over.

Nature of Training	Date passed test
Drill	
Musketry	
Bombing	
Rifle Bombing	
Bayonet Training	
Anti-Gas	
Lewis Gun	
Rapid Wiring	

Special Training Courses, etc.

Reg. No.	Rank.	Surname Atkinson	Category.	Dentally Unfit.
		Christian Names (1) Fred		
		(2) (3)	Date	

Place of Enlistment:	Date of	Taken on from	Religion	Inoculations	Company
Kamploops.	4/11/14				
Province:	Age on	Date		Vaccination	
B. C.	27.		Pres.		

On Command	Hospital	Permanent Cadre	Employed as
		Date taken on	
Date Proceeding	Date Admitted		

Record of Overseas Service: 1/5/15 till 15/3/18.

Profession or Trade (Civil) Miner

Transferred or Posted to

Date

Reason for Return: G.S.W. Left hand

Married or Single Married.

Left Canada 23/2/15.

Address of Next of Kin

Country

LEAVE.

No. of Pass Issued.	From.	To.	Free Transportation.

A.G. 10434.

Part 2 Order Entries.

No.	Date	Ref.	No.	Date	Ref.

Dependants 1
Where living - England.

TRAINING.

Weeks of Training.

1	2	3	4	5	6	7	8	9	10	11	12	13	14	Over.

Nature of Training	Date passed test
Drill	
Musketry	
Bombing	
Rifle Bombing	
Bayonet Training	
Anti-Gas	
Lewis Gun	
Rapid Wiring	

Special Training Courses, etc.

SURNAME. Atkinson

CHRISTIAN NAMES Frederick

REGL. No. 77693 RANK Pte.

UNIT 30th Bn.

FORMER CORPS 102nd Regt.

CARD No. 11

SOS Dis Demob 21-2-19

FOLL.

Do 55. 24-2-19 11

NEXT OF KIN.

NAMES IN FULL Atkinson J.

RELATIONSHIP TO SOLDIER Father

ADDRESS Fernie, B.C.

CHANGE OF ADDRESS

COUNTRY OF BIRTH England, Greasborough Yorks. DATE June 6th, 1887.

PLACE OF ATTESTATION Victoria, B.C. DATE Nov 9th 1914

O/S. 23-2-15.

R/C 25-1-19 256/94 Spr.

L. L. 10437. M. & D. 7253. M. F. W. 22. 100M. -11-16. H. Q. 47 2-39-339.

From Halifax Per S.S. Missanabie Borderland & Megantic 23-2-15.

MARRIED ✓ ✗ 5 SINGLE Yes WIDOWER

TRADE OR CALLING Miner. RELIGION Wesleyan.

DESCRIPTION.

APPARENT AGE 27. YEARS 5. MONTHS

HEIGHT 5. FEET 6. INCHES

CHEST MEASUREMENT 38½. INCHES EXPANSION 2½. INCHES

COMPLEXION Fresh. EYES Grey. HAIR Brown.

DISTINGUISHING MARKS Scar R. wrist.

MEDICAL EXAMINATION. PLACE Victoria, B. C. DATE Nov. 9th 1914.

Present Address, Not Stated.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
206	Reported From Base	14-11-15	wounded by rifle grenade.
221	1st Can. Fld. Amb.	26-11-15	W. shoulder & hip.
238.	Rep. by the Base Rej. unit	12-12-15	W. shldr. & hip.
a 57.	#10 C. F. Amb.	18-4-16	Weakness (3rd Can. Fun. log
a 64	#10 " " "	24-4-16	Myalgia —
a 190	Rep. from Base	27-11-16	Adm. to hosp. Sick
a 194.	#76 Fld. Amb.	27-11-16	Myalgia
a 194.	Discharged to duty	5-12-16	" "
a 152-1.	48 Fld. Amb.	25-2-18.	Lac. Lt. Hand.
a 154-1.	54 Gen. Boulogne	28-2-18	" " —
B167-1.	Mil. Bascombe.	15-3-18.	" " (Acc) as per H.L. B176
B177-2.	Ex To Mil. Conv. Wdcte. P. Epsom	29-3-18.	" " "
B215-1.	Ex To 16 Can. Gen. Orpington	[illegible]14-5-18.	" " "
B265	Ex To Granville Can. Spec. Burton	1-7-18	" " " "

H. Q. FILE No. 648-A-6-11

NAME Atkinson, Fred

REGT'L. No. 77693

RANK AND CORPS Pte 15th Batt. (Form 20th

CABLE		NATURE OF CASUALTY
NO.	DATE	
M2289	26-11-15	Wnded Nov. 15th 1915

NO. 948

FOLL.

L. L. Job 86907- -M. & D. 16065.

M. F. W. 42—50m.-10-15.
H. Q. 1772—39-893.

Form DMS 1401.
8289 100M 9/3/17.

anville Can. Spec. Hosp
~~Barton~~ Derbyshire
HOSPITAL.

A. & D. CARD

AT

A. & D. No. T2133 PL. OF ACTION 77693

RANK Pte UNIT 6.E.S. SICK OR WOUNDED

NAME Atkinson J AGE 31 RELIGION C of E

PLACE IN HOSPITAL 9/7/18

DIAGNOSIS Lac Wound L Hand

ADMITTED 10 JUL 1918 FROM Ont Sick TF Orpington

DISCHARGED 17 SEP 1918 TO 3 CCD Seaford

TRANSFERRED

SERVICE AT HOME 42/12 IN FIELD 34/12

RESULTS

70 days

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

REMARKS.

880. CS 186. W.503/P.36. 20,000 Pads. 10/17. N.P.A. Ltd. E. 1955.

Army Form W. 3172.
(In pads of 50.)

No. 16 Can Gen Hospital.

Ward 21 No. of Bed 25 Date 14-5-18

Regl. No.	Rank and Name.	Corps.	Part to be X-Rayed.
77693	Spr Atkinson F	C.E.	Left hand.

SHORT HISTORY OF CASE.
(To be completed by M.O. i/c case.)

Ref: Epsom
Wounded at Ypres
24/2/18

Signature of M.O. Harlliot Capt.

Date 14-5-18

REPORT ON RESULT OF X-RAY EXAMINATION.
(To be completed by Radiographer.)

No. of Plate L St/190 10x8 (Broken) AP

Negative.

Signature of Radiographer L. Gilchrist Capt

Date May 14/18

*Name ATKINSON, Fred. Rank Pte. Regtl. No. 77693

Fyle Depot 6660

Original unit 50th Present unit ~~M.~~ or S. Age 31 Religion Weslyan Ref. H.Q.

Port, ship, and date of arrival Quebec, Empress of Briton 22-1-19.

Next of kin Father J Atkinson P.O. Fernie B.C.

Address on leave

Address on discharge P.O. Kimberley B.C.

Transportation issued Yes No Date Character on discharge

Previous occupation Miner Date and place of enlistment Victoria 9-11-14

Diagnosis Lacerated Hand Date of Medical Boards Feb. 19th. 1919

Discharged 21-2-19 O. 55/32

Date.	Remarks	Pt. 2 Order No.
30-1-19	T.O.R. from Dis. Sec. 13-1-19 Posted to Dis. Gov. 23-1-19 Leave 14-2-19	30-141
21/2/19	Posted to Dis. Sec. from Cas Co DDDO 317 H 22/2/19	55-24/2/19

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

(over)

Date.	Remarks.	Pt. 2 Order No.

M.F.W. 192
150M—6-18.
1772-39-1243.

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY	* ENGLAND OR [redacted].	SEPARATION ALLOWANCE.	* ENGLAND OR CANADA.
EFFECTIVE DATE:- ~~1/1/18~~	1/1/19	EFFECTIVE DATE:-	26/11/18
AMOUNT:- ~~£1 00~~		AMOUNT:-	$30 00

NAME: ATKINSON Tpte

NUMBER:- 77693.

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Pte

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.

~~J. Atkinson - Husband~~
~~St. Georges Rd Leeds~~

MRS. GLADYS ATKINSON
45 ROSEBANK VIEW
WESTFIELD RD, LEEDS. A.T.M. 10/1/18

UNIT AND TRANSFERS

ORIGINAL UNIT:- 3 T Co

DATE ACCOUNT FIRST OPENED:-

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			3 T Co.
81 15/3/18	1/4/18		CCRD

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
13/12/18	1627	3 CCRD £3	14 60				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1 05	10		

PARTICULARS OF RENDERING NON-EFFECTIVE:- Trans. to Canada 1/1/19 NR. 1 11/12/18 3rd CCRD. G.Del. 48. = L.R.C.

MONTH	PARTICULARS	CR 1	CR 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
	31/3/18 Bal Z								93 01		
April	L. Cpl Pay	34 50		A 18024			15				
				AR. 3125 Capern. 7/4/18	9 73						
				Remit. 1249. Chq. 3488. 25/4/18	24 33				78 86		
		34 50			34 06		15				
May	L Cpl Pay	35 65		A 86430.			15				
				AR. 3201 Eyre RS. 2/5/18	4 87						
				AR. 2142 Orpington 29/5	4 87				89 77		
		35 65			9 74		15				
June	L/Cpl's Pay	34 50		B 45028			15				
				AR. 254. Ch. 12850 Johnson 10/6	24 33				84 94		
		34 50			24 33		15				
July	L/Cpl's Pay	35 65		C 17536			15				
				AR. 4298 Chas. C.S.Hosp. Buxton 17/7	4 87						
				" 2950 16 Con. C.S.Hosp. Orpington 24/7	4 87						
				" 4893 Buxton G.C.S.H. 27/7	24 33				71 52		
		35 65			34 07		15				
Aug.	-	35 65		C 60912			15				
				AR 5032 G.C.S.H. Buxton 8/8/18	4 87				87 30	7817 3/18	
		35 65			4 87		15				
Sept.		34 50		C 76513			15				
	Pte II 224 23/9/18 3rd CCD Sick furlough from 17/9/18 to 27/9/18 - 10 Days @ 1/3½	7 30		" 7129 G.C.S.H. Buxton 17/9/18	48 67						
				" 6458 " " 10/9/18	4 87				60 56		
		41 80			53 54		15				
Oct.	L/Cpls Pay.	35 65		D 38313			15				
				6888 3rd CCD. 15/10/18	43 80						
				7149 " 28/10/18	4 87				32 54		
		35 65			48 67		15				
NOV		34 50		E 19704			15				
	Dec. P & A.	35 65		7875 3rd CCD. 19/11/18	9 73						
				E 30415 Dec. 1.10.18 to 31.10.18			15				
				Suppl. Cr. E42803 S.A. 26/11/18 to 31/12/18							35
				1627 2nd CCRD. 13/12/18	14 60				48 36		
		70 15			24 33		30				35 -

Granted Pension to widow 29/10/18.
20.255 29/10/18 3rd CCRD.

NUMBER 77693 RANK Lt. NAME ATKINSON J.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
				Bal. Fwd.					48-36		
FEB	Pay.	-NIL-		N.Y. Kennel Pack. 22/2/18	9/75	End on ZRC					
				C.1629 — 9/6/19	9/75	End on ZRC			28-90		
					19/56						

CANADIAN
ASSIGNED PAY AUDITED
AGS 10483
AUDIT CLERK
DATE 3/6/19

B.O.S. - Canada 12½. D.O.I. 3rd O.E.R.B. 23½

MARRIED OR SINGLE S.

PLACE OF BIRTH Greasborough Yorks England

NAME AND ADDRESS OF NEXT OF KIN J. Atkinson
Farnie B.C. Canada. P O Box 99.

RELATIONSHIP OF NEXT OF KIN Father

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

a/p Checked & Correct Fred Jones

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

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

REG'L NO. 47693 RANK ~~Sapr~~ Pte NAME Atkinson Fred.

IF IN PERMT. CORPS WHAT UNIT — No 3 Unit Tunnelling Co

PERMANENT FORCE ALLOWANCES

PLACE OF ATTESTATION

DATE OF ATTESTATION 9/11/14

TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY MONTHLY $ 15 00 ZK DATE EFFECTIVE 1/9/15.

PAYABLE TO J Atkinson. ~~P.O. Box 999. Fernie B.C. Canada.~~ 4, Selkirk St. Newbury Rd Leeds Yorks Eng. RELATIONSHIP

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) EFFECTIVE REASON

DISCHARGE DATE AND PLACE REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

DATE	PAY No. OF DAYS	PAY RATE	PAY AMOUNT $	PAY AMOUNT c.	FIELD ALLOWANCE No. OF DAYS	FIELD ALLOWANCE RATE	FIELD ALLOWANCE AMOUNT $	FIELD ALLOWANCE AMOUNT c.	WORKING OR SPECIAL PAY No. OF DAYS	WORKING OR SPECIAL PAY RATE	WORKING OR SPECIAL PAY AMOUNT $	WORKING OR SPECIAL PAY AMOUNT c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No	1 Date	2 No	2 Date	3 No	3 Date	4 No	4 Date	CASH PAYMENTS 1	2	3	4	C ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE CREDIT	BALANCE DEBIT	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
1916																																			
			400	00			39	70					Forward from old Ledger.		190 44160																				
Mar 31																								257 80				105 -		362 80	78 80				
April																													4 50						
1-30	30	105	31	50	30	.10	3	-							34 50													15 -	83 60	103 10		10 20			Pres: Bare: Awaiting Trial from 6/3/16 Tried by F.G.C.M. 19/3/16 Sent to 56 days P.B.#1. For: 7 days. Pay.	P.B.O #17 30/4/16
May																													17 55						
1. 31	31	105	32	55	31	10	3	10							35 65			29231/5/16								2 55		15 -	~~17 55~~	~~28 30~~		28 30			
June.																		400 17/6/16			RR 29/5/16					1 70								
1-30	30	105	31	50	30	.10	3	-							34 50			325 9/6/16			65					1 70		15 -		42 73		20 07			
																		540 7/7/16								1 75								
July.	1-31	31	105	32	55	31	.10	3	10						35 65	469	25/8/16	584	10/7/16					1 70	1 74			15 -		20 19		35 53			
																		761	148						1 75									
Aug	1-31	31	105	32	55	31	10	3	10						35 65	656	27/9	735	6/8					1 74	3 48			15 -		21 97		49 21			
																		953	13/9						1 74									
Sept	1-30	30	"	31	50	31	"	3	-						34 50	837	26/8	944	5/9					1 74	1 74			15 -		20 22		63 49			
																		1195	15/10						3 49									
Octr	1-31	31	"	32	55	31	-	3	10						35 65			1061	6/10			RR 146 24/9.			1 74			15 -		34 83		64 31			
Novr	1-30	30	"	31	50	30	-	3	-						34 50	1233	24/10											15 -		23 72		78 09			
																1418	23/11	1530	5/12					8 72										
Dec	1-31	31	"	32	55	31	"	3	10						35 65	1382	20/11							3 49											
			Fd.	67	20			67	20															3 49	2 61			15		24 59		86 15			
	1917															1655	23/12							4 36										
Jany	1-31	31	105/10	35	65										35 65	1574	15/12							1 74	1 74			15 -		24 58		97 22			
																1719	2/1	1777	14/1															
Feby	1-28	28	"	32	20										32 20	1860	4/2			270	24/1			1 74		1 74		15 -		18 48		110 94			
				823	80										190 828 70									288 26	27 73	174	3893	270	88 10	7147 6	110 94			

77693 "Hope" Atkinson Fred $15.00 Asp

DATE	PAY No. of Days	PAY Rate	PAY Amount $	PAY Amount c.	FIELD ALLOWANCE No. of Days	FIELD ALLOWANCE Rate	FIELD ALLOWANCE Amount $	FIELD ALLOWANCE Amount c.	WORKING OR SPECIAL PAY No. of Days	WORKING OR SPECIAL PAY Rate	WORKING OR SPECIAL PAY Amount $	WORKING OR SPECIAL PAY Amount c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS
			82	80										190	87 70
Mar	31	10/105	35	65											35 65
Apl	30		34	50											34 50
May	31		35	65											35 65
June 1-30	30		34	50											34 50
July 1-31	31		35	65											35 65
Aug	31		3	10											3 10
Sept 1-30	30		34	50										1 55	36 05
			106	85										3 245	107 80

ACQUITTANCE ROLLS 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date
2025	3/4	2094	2/3				
1974	22/3	2054	12/3				
1909	15/3						
						839	1/4
		1554				4300	5/4
2	23/4	2755				4920	5/5
471	25/5	552	5/6.			3505	
598		676				3578	
586		643				4566	6/4
741	7/8	811 789	10/8	903	29/7	4300	5

CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS
28876	2773	174	3893	270	88 10	71476
175	175					
174	174			15		
349						2547
	174		4867	15		6541
349	179			15		2028
357	178			15		2035
				15		1500
179	624		2433			
179	267		9733	15		14715
268	3 14 267	535		15		3284
30856	5528	709	20926	375	88 10	187376

BALANCE Credit	BALANCE Debit	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
1094				
12117				
9021				
10558				
11973				
14038				
2533				Paid as Sapper in Arcy
2854				

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED PAY	SEP. ALLCE. ENG.
Sep	B/F	28 54							2854		
Oct			24 66 C				15		1354		
	Hope pay	3565							4919		
				AR.876 16/9 3 Tc.	535				4384		
		3565			575		15		4384		
Nov				B58099			15		2884		
				AR.917 1/10 3 Tc.	268						
				AR.1037 15/10 "	535				2081		
	Hope pay	3450							5531		
				AR.1069 1/11 3 Tc.	357				5174		
				B88456 Dec			15 30		3674		
		3450									
				AR.1099 16/11 3 Tc.	1338				2336		
	Dec pay	3565									
		7015			2498		30		5901		
Jan 18				Eng. 186481			15		4401		
				AR.1127 17/12 3 Tc.	446						
				" 1149 4/11 "	357				3598		
	Hope pay	3565							7163		
		3565			803		15				
Net	" "	3270		C90070			15				
				AR.1174 24/1 3 Tc.	446						

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED PAY	SEP. ALLCE. ENG.
				AR.1174 31/1	446						
				AR.1248 7/2 3 Tc.	357						
					1160		15		7723		
Net pay		3270					15		11288		
		3565		C10070			15		10843		
				AR.1387 14/2 "	446						
		3565			446		15		9342		

CANADIAN
ASSIGNED PAY AUDITED
AUDIT CLERK
DATE 3/61 19.....

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form	B. 263
Squadron / Battery / Company } Conduct Sheet,	"	B. 263a
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.

This space to be for numbers.

WAR SERVICE BADGE CLASS " "
No. 61406. ISSUED
9-1-33.

Proceedings on Discharge.

Hunt
wounded

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

No. 77693

Rank Pte.

Surname Atkinson

Christian name Fred.

NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.

Corps (Squadron, Battery or Company) 30th Bn.

Date of discharge 21/2/19.

Place of discharge Vancouver B.C.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 31 years ..... months.
Height 5 feet 6 inches.
Complexion Fresh
Eyes Gray
Hair Brown
Trade
Intended place of residence (To be given as fully as practicable.) Kimberley, P.C. B.C.

Descriptive marks
Scar right wrist

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

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.

OK
Eadem

MEDICAL DOCUMENTS FORWARDED TO ~~S. C. R. OR~~ B. P. C. ON 14-3-19.

(OVER)

E R J.

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)..... Fred Atkinson ..... *(Signature of Soldier.)*

(Date)..... J. G. Johnson. ..... *(Signature of Witness.)*

District Depot M.D. XI FEB 21 1919 Discharge Section

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)..... *(Signature)* H. B. Andrews Capt.

(Date)..... For O.C. District Depot XI

District Depot M.D. XI FEB 21 1919 Discharge Section

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.)

Wife allowance not come through

Fred. Atkinson

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
17th July 1918	TAB 1 Lothian Coll
2nd Aug 1918	TAB 2 L.O.T.
3rd A.C.D. Seaford 15/9/18	Fit for duty Actg RBK Kennedy Scouts for Major Cameron

Table IV.—Service Table.

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

W. R. WARD,
Colonel in Charge of Records
Canadian Contingent, London.

The Medical History Sheets of all men proceeding overseas, must be returned by the Officer commanding their unit to the Record Office when they leave England.

6660 Dio. 21-2-14 77693

ORIGINAL.

Army Form B. 178.

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

MEDICAL HISTORY of 27

Surname Atkinson. Christian Name Frederick

19 MAR 1915

TABLE I.—GENERAL TABLE.

Birthplace ... Parish Greasborough County Yorks Eng.

Examined ... ... on 9th day of November 1914.
at Victoria B.C.

Declared Age ... ... 27 years 5 months ~~days.~~

Trade or Occupation ... Miner

Height ... ... 5 feet, 6 inches.

Weight ... ... 167 lbs.

Chest Measurement — Girth when fully Expanded. 38½ inches.

Chest Measurement — Range of Expansion 2½ inches.

Physical Development ... Robust

Vaccination Marks — Arm ... Right 7 Left

Vaccination Marks — Number 7

When Vaccinated ... Feb 1st 1915

Vision ... ... R.E.—V=
L.E.—V=

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

(b) Slight defects but not sufficient to cause rejection ... ... (b) Scar right wrist. ✓

Approved by (*Signature*) W. Lothian

(*Rank*) Capt. Can. C.
Medical Officer.

Enlisted ... ... at Victoria. B.C. ✓
on 9th ✓ day of November ✓ 1914.

Joined on Enlistment ...	Corps.	Regtl. No.
	102nd R. M. R.	
Transferred to	30th Batt. C.E.F.	77693. ✓
	15th Batt ✓ C.E.F.	

Became non-effective by

on day of 191 .

(*Signature*)

(*Rank*)

Entries in Red Ink made from ~~Attestation Sheets~~

CANADIAN

(25012) Wt.W10943-1990. 300 M. 1/15. M.R.Co.,Ltd. 59.

D JUL 15 1915

P.T.O.

for D. D. M. S.

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

Name of Hospital	Admitted to Hospital Day	Month	Year	Discharged from Hospital Day	Month	Year	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
No 10 Can Fld Amb	18	4	16	24	7/16	16	Deafness- Myalgia	6.	Dis to Unit	455- 64÷
Reported from Base to Hospital.	27	11	16	27	11	16	Sick.			A.190.
No.76.Field.Amb.,	27	11	16	5	12	16	Myalgia.		Discharged to duty — Duplicate Medical History Sheet posted to here.	A.194-194. REB
Bos-combe	15	3	18	28	3	18	Lacs wd. L. Hand (10/2)	14	A.C. Surgn. Surgn.	
M. C. H Epsom	28	3	18	13	5	18	Do.	47	Can: Sdpl. Epsom. Lac. wound healed. Flexor tendon 3rd finger severed. Movement. Greatly impaired. Manages Less. Little improvement. 6.5.18. Lieut. Stuart recommended transfer to Orpington for actinic	W. F. Lawrence SURGEON GENERAL A.M.S. H.S. MILITARY HOSPITAL, BOSCOMBE
16 Can General Ost Mil Hosp. Orpington. Kent	3	5	18.	10	7	18	Do.	67.	Small scar on palm of hand opp. flexor tendon of middle finger. Cannot flex middle finger. Apparently no bony injury. X-ray negative. Op'n 22/5/18 Suture of flexor tendons 10/7/18.—Very little flexion in finger yet.	H. Stewart Capt. Can M. A. Elliot Capt. CAMC
Granville Can. Spec. Hosp Buxton Derbyshire	10	7	18	17	9	18	Lacerated L hand.	70	Considerable flex ~~Deformity~~ Profund. Dig not united very slight flexion index finger Amputated Meta Carp Phalang joints Discharged to duty. Epilepsy II:	H. J. Hewetson Capt. A.D.M.S. Dental Corps

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.

Concurs.

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.)
(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.)

Duty Category A. 2.

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.

W. Mangaff President.
W. Emmerson Capt.
Members

PLACE New Westminster, B.C.

DATE February 19, 1919

TO BE COMPLETED WHEN TREATMENT IS REFUSED

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

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

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

..... President.
~~W. Emmerson Capt.~~
Members

PLACE .....

DATE .....

APPROVED BY B. E. Lang
Assistant Director of Medical Services.
DATE FEB 19 1919

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

34-A-772

10

THIS FORM WILL BE USED FOR ALL RANKS

MEDICAL HISTORY OF AN INVALID

NF CR file

X1.C.C.

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 ..... DATE Feb. 19, 1919.

1. 1 (a) Unit C.E.R.B. (b) Regimental No. 77693 (c) Rank Sapper.
(d) Surname Atkinson. (e) Christian name Fred.
(f) Home address Kimberley, B.C.
(g) Next of Kin Mrs. Gladys Atkinson. (h) Relationship Wife.
(i) Address of Next of Kin 45 Rosebank View, Westfield Road, Leeds, York. England.

2. Age last birthday 31 Date of birth June 6, 1887

3. Enlistment, or Appointment (if an Officer) (a) Place Kamloops, B.C. (b) Date Nov. 4, 1914.

4. Personal description:
(a) Height 5' 6" (b) Weight 157 (stripped) (c) Complexion Fresh
(d) Colour of hair Brown (e) Colour of eyes Grey (f) Identification marks, Scars, etc.
Scar right wrist.

5. Former trade or occupation Miner.

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
	4	106

		Periods From	Periods To
Canada	Canada	Nov. 4, 1914	Feb. 19, 1915.
England	England	Mar. 6, 1915	May 1, 1915.
	France	May 2, 1915	Mar. 15, 1918.
France or other theatres of War	England	Mar. 15, 1918	Jan. 13, 1919
	Canada	Jan. 22, 1919	Present.

7. Original disease, or injury
Lacerated hand.
(a) Date of origin Feb. 24, 1917 (b) Place of origin Ypres, France.
(c) Cause Lacerated hand with a chisel.

M. F. B. 227.
300M.—8-18.
1772-39-117.

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.)

Loss of 2nd & 3rd phalanges 2nd finger left hand.

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.)

Complains of loss of end of 2nd finger left hand -

Objective. Has had an amputation of 2nd finger left hand at inter-phalangeal joint between 1st & 2nd phalanges. Stump well healed. Good cushion - smooth scar and no tenderness. Scar in palm of left hand, parallel to tendon of 2nd finger. Can do any work in ordinary labor market.

(*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 (If pulse rate is abnormal, B. P. will be taken.) — Genito-Urinary System: no (Albumen and Sugar will be excluded.)

Special Senses: Yes — Respiratory System: no — Integumentary System: no
See Specialists report.

Disturbances of Mentality: no — Digestive System: no — Muscular System: Yes(Myalgia)

Osseous and Joint Systems: no — Any other general condition: As Noted.

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

While at work in a Carpenter shop, cut the palm of his hand with a chisel, also lacerating 2nd finger left hand - severing tendon of profundus digitorum to 2nd finger left hand, which was sutured while in Granville C.S. hospital, had finger amputated at 2nd interphalangeal joint, as noted in sec. 9.

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*).)

Myalgia - 18/4/16 to 24/6/16 - Compiled from N.H.S. No disability now. Deafness - 18/4/16 to 24/6/16

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

Amputation of 2nd finger left hand at 2nd intephalangeal joint; Linear scar in palm left hand.

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.)

N. app.

12. Was the disability caused, or aggravated; (*a*) by intemperance, or improper conduct; or (*b*) by unreasonable refusal to accept treatment? no
The regimental documents will be referred to.
(If the answer is in the affirmative, state in percentages, to what extent the patient is incapacitated by that causation or aggravation. In answering this question, conduct sheets should be considered. If treatment has been refused, the circumstances surrounding the refusal should be described on page 4.)

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

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

Hospital and Surgical.

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

Category A. 2.

W. E. Newcombe, Capt.
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, Fred Atkinson, 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

W. H. L.

Fred Atkinson Rank.
Signature of invalid examined.

6992 Empress Britain 6660

Sa 13 1 19 Ar 22 1 19

(2468) Wt. W. 2290—PP1182 6-18 J.F.W. (E2877)

Army Form W3997.

Regtl. No. 77693 Rank Spr.

M D 11

Name Fred Atkinson
(Christian Names in full) (Surname)

Unit C.E.R.B. Regt. or Corps 30th Bttn. 21/2/19

A Vancouver wife

M D XI

18.

COVER

FOR

DISCHARGE DOCUMENTS.

Miner

Deceased
16 Dec. 33
A 511
649

Sailed for Can. 13 JAN 1918

EMPRESS OF BRITAIN

4364

AUDITOR | PAYMASTER

M. OR S. M

22.1.19 Empress of Britain

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

REGT. No. 77693 RANK Sfc NAME (IN FULL) ATKINSON. F.

(BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN — RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? Yes — DATE EFFECTIVE

TO WHOM PAID Nil — RELATIONSHIP

ADDRESS Mrs Gladys Atkinson, 46 Rosebery Ave ~~Roseberry Ave~~ Westfield Rd Leeds, Yorks.

PARTICULARS	EFFECTIVE DATE	AUTHORITY
Emp of Brita		
adj to	31.12.18	
		Auth 2057/1918
		Lieut 2-5-19

ORIGINAL UNIT C.E.F.

IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

DATE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY $ 15 — DATE EFFECTIVE Pay as Engle & Wo changed from 1.1.19

PAYABLE TO J atkinson — RELATIONSHIP ~~Father~~

ADDRESS 46 Rosebery Ave Leeds

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

ANY CHANGE IN ASSIGNEE OR ADDRESS: P.O. Kemberley Yks — 13/8/19

DISCHARGED — PLACE Newcastle — DATE 21/2/19 — REASON — AUTHORITY D055 — IF ENTITLED TO POST DISCHARGE PAY

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.	OTHER CREDITS $	OTHER CREDITS C.			TOTAL CREDITS $	TOTAL CREDITS C.	ACQUITTANCE ROLLS COL. NO. 1 No.	COL. NO. 1 DATE	COL. NO. 2 No.	COL. NO. 2 DATE	COL. NO. 3 No.	COL. NO. 3 DATE	CASH PAYMENTS COL. NO. 1 $	COL. NO. 1 C.	COL. NO. 2 $	COL. NO. 2 C.	COL. NO. 3 $	COL. NO. 3 C.	ASSIGNED PAY $	ASSIGNED PAY C.	REGIMENTAL CHARGES $	REGIMENTAL CHARGES C.	OTHER CHARGES $	OTHER CHARGES C.			TOTAL DEBITS $	TOTAL DEBITS C.	BALANCE DEBIT $	BALANCE DEBIT C.	BALANCE CREDIT $	BALANCE CREDIT C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT 31.12.18		1.15							28	36	28	36	22.12.18	4/19																					28	36	
													I Eamed				9	73	9	73																	
							Sub				15.1.19	20	1.19.2.1.19				4	87	30	00	5	00																
													Paid																30	-			P.D.P					
Jan	52	1.15	59	80			11	20									65	03	70	-													~~23436~~	~~70~~ -				
					35	-	154	36	29	15									15	-													23936	85 -				
									26																													
			W.S.G.																																			
Feb	183 Days		420		180	-	420																															
							180	-																														

War Service Gratuity

Service 4 years — months

Date Ck No.

S.O. Paid Expenses from 2.6.19 to 21.8.19 Auth 2057/1918 — 420 — 180

Mch	54	159	264	70	-																																	
Apl	53	162	267	70		34																																
May	21	172	818	70		111																																
Jun	21	806	168	70		111																																
Jly	21	824	292	55		30	-																															
Aug	6	114	293	30		7																																
Sep	8	114	300	3		111																																

39 Recommd by (4) 2609

Appmt Sa 6.21.3.19 T 216 M FW 2609 Instr.

Hosp Convalescent 6/9/19

Certified that all payments have been made on this account for which covering authority has been received to date.

Paymaster, Demobilization Pay M.D. No. 11

I certify that all payments of War Service gratuity shown hereon have been made except according to the period as before stated on the M.F.W. 2609 received.

Officer i/c War Service Gratuity M.D. No. 11

600 -

MONTH	PAY AND F.A.				OTHER CREDITS				TOTAL CREDITS		ACQUITTANCE ROLLS						CASH PAYMENTS						ASSIGNED PAY		REGI-MENTAL CHARGES		OTHER CHARGES				TOTAL DEBITS		BALANCE				PARTICULARS OR REMARKS
	NO. OF DAYS	RATE	AMOUNT								COL. NO. 1		COL. NO. 2		COL. NO. 3		COL. NO. 1		COL. NO. 2		COL. NO. 3												DEBIT		CREDIT		
			$	C.	$	C.	$	C.	$	C.	NO.	DATE	NO.	DATE	NO.	DATE	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	