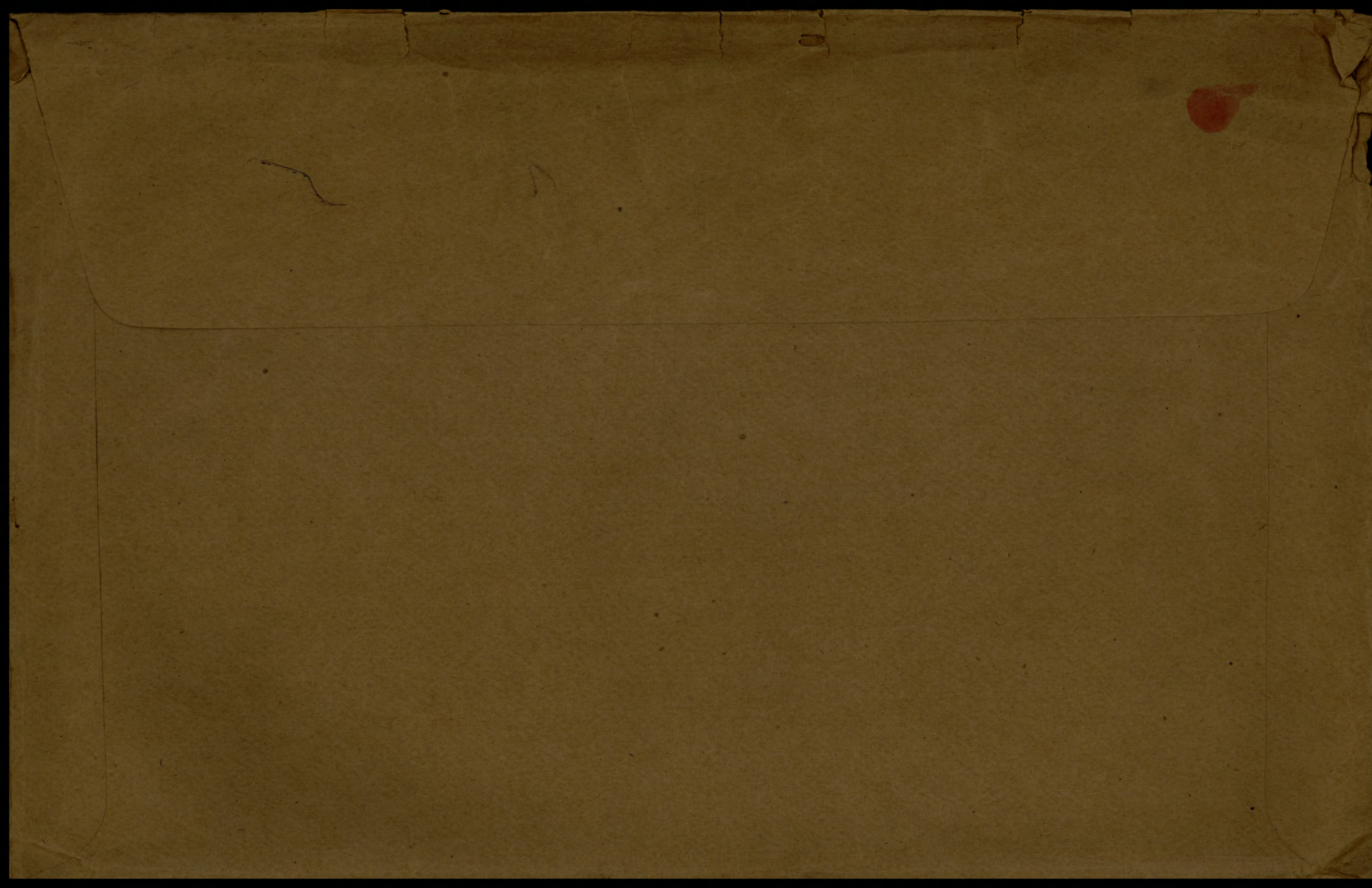


REGIMENTAL DOCUMENTS

NAME **ATKINSON** *KIRK IRVING* REGT. NO. *832276* UNIT *D. 12907* H. Q. FILE NO. *6204*

S CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
1					DEATH
3					Category
		M			
1					
4					DISCHARGE
					Category
					<i>Red. Draft.</i>
1					
					DESERTION
					5 4
					9-10
					20-10
					28-11
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1					
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Card
71416
B

DUPLICATE

ATTESTATION PAPER.

No. 82276

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

Folio 1

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

- 1. What is your surname? Atkinson
- 1a. What are your Christian names? Kirk Irving
- 1b. What is your present address? Moncton N.B.
- 2. In what Town, Township or Parish, and in what Country were you born? Moncton N.B. Canada
- 3. What is the name of your next-of-kin? Mrs Margaret Atkinson
- 4. What is the address of your next-of-kin? 166 Queen St. Moncton N.B.
- 4a. What is the relationship of your next-of-kin? Mother
- 5. What is the date of your birth? Feb 2 - 1898
- 6. What is your Trade or Calling? Clerk
- 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 }
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? } Yes

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Atkinson K.I., 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.

K.I. Atkinson (Signature of Recruit)

Date Feb 4 1916

A.P. McIngham (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Atkinson K.I., 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.

K.I. Atkinson (Signature of Recruit)

Date 4 Feb 1916

A.P. McIngham (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 Moncton N.B. this 4 day of Feb 1916

J. E. Martin (Signature of Justice)

3710 7.27

Description of Atkinson K. J. on Enlistment.

Apparent Age... 18 years..... months.
 (To be determined according to the instructions given in the Regulations for Army Medical Services.)

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

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

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

Chest measurement. { Girth when fully expanded..... 34 ins.
 Range of expansion..... 3 ins.

Complexion..... medium

Eyes..... Grey

Hair..... Brown

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

Birth mark over right shoulder blade oval in shape 1/2" x 3/4 in.

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 declares that he is not subject to fits of any description.

I consider him* fit for the **Canadian Over-Seas Expeditionary Force.**

Date..... Feb 4 1916..... E. A. Steeves, Major

Place..... Moncton NB.....

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.

K. J. 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.

W. C. Fortes..... L.T. COL. (Signature of Officer)
 145th "Overseas" Batt. C. E. F.

Date..... Feb 4 1916

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 832276 (Rank) Private

Name (in full) - - - - - KIRK IRVING ATKINSON - - - - - enlisted in
the 145th Battalion - - - - -

CANADIAN EXPEDITIONARY FORCE at Moncton, N.B. on the 4th
day of February 19 16

HE served in Canada, England and France.

and is now discharged from the service by reason of Demobilization, Medically Unfit
for general Service, Authority, - - R.O. 1420 & 1894 Para 4.

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

Age 21 years 5 months

Marks or Scars " N I L "

Height 5 feet 6 inches

Complexion Fair

Eyes Grey

Hair L. Brown

K I Atkinson
Signature of Soldier

[Signature]
Issuing Officer

Date of Discharge July 29, 1919.

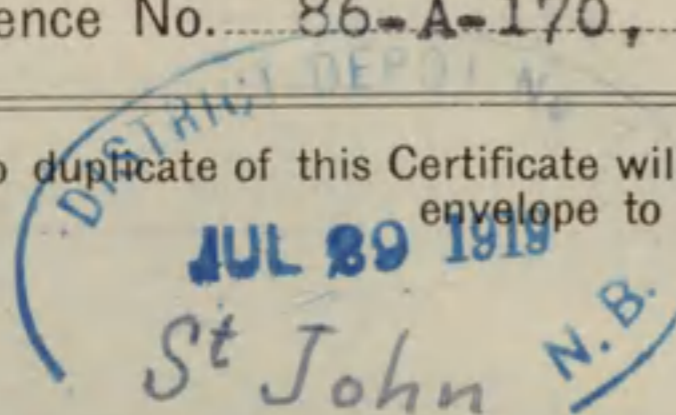
Rank Major,
O.C. DISTRICT DEPOT NO. 7.
Appointment

Signed at St. John, N.B. this 29th day of July 1919.

in Military District No. 7.

File Reference No. 86-A-170, D.D. 7.

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



CANADIAN EXPEDITIONARY FORCE
Discharge Certificate

No. _____ (Rank) _____ Name _____

Unit _____

Address on Discharge _____

Character and Conduct _____

Former Occupation _____

Special Qualifications of Value in Civil Life _____

Medals and Decorations _____

Remarks _____

Signed at _____ this _____ day of _____ 19 _____

Name of Officer

Rank

Appointment

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

CLASS A
WAR SERVICE BADGE
NO, ... 78113 ... Issued

CLASS
WAR SERVICE BADGE
NO, Issued

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

OTTAWA, CANADA.

Declaration required of Officers, Warrant Officers and Men who claim War Service Gratuity under Order-in-Council (P.C. 3165), dated 21st December, 1918.

If the applicant will enquire at the local Branch of the Canadian Patriotic Fund he will be informed if there is an official who will take this Declaration free of charge.

A complete reply must be given to every question in this Declaration. There must be no blanks and no dashes. If any questions are not applicable, the words "NOT APPLICABLE" must be written out.

On completion this Declaration is to be returned to THE DISTRICT PAYMASTER OF THE DISTRICT IN WHICH THE SOLDIER WAS DISCHARGED.

1. Christian names *Pte Mark Irving* 2. Surname *Atkinson*
3. Rank *Pte* 4. Original Unit *145th* 5. Reg. No. *832276*
6. Address, in full, to which future payments of gratuity are to be forwarded
166 Queen Street Moncton NB
7. Date of enlistment in the C.E.F. *4th Feb 1916*
8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge *Mr. M. Atkinson*
9. Relationship of such dependent *Mother*
10. Address, in full, of such dependent *166 Queen Street Moncton NB*
11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? *No*
12. Were you at any time on the strength for pay and allowances of a unit of the C.E.F. which was out of Canada or the United States when such pay and allowances were issuable? If so, give particulars of one such unit and dates of service overseas with such unit:—
Yes 145th 26-9-16 until 3rd June 1919
13. Were you on the strength for pay and allowances of the Clearing Services Command, having been at any time on duty outside of Canada or the United States? *No*
14. Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service *N.A.*
15. Give total length of time which you served on active service, whether in Canada or Overseas, setting out particulars of units on whose strength you served *3 yrs 5 mos - In Can with 145th 7 mos In England 7 mos In France with 28th until 3 mos - In Hosp 3 mos To France with 28. 8 mos. Remainder of period B.T.C and in Hosp.*
16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department *No*
17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.? *No*

18. Have you had more than one enlistment? If so, give particulars of discharges and re-enlistments, and under what regimental numbers and units. *No*
19. Have you already received any payment of Post Discharge Pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid *No*
20. Have you been issued with a War Service Badge? If so, what class? *No*
21. Have you, during the present war, served in the Imperial Forces? *No*
22. Are you entitled to receive, or have you received any gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled *No*
23. (a) Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England? *No*
 (b) If so, was such reversion in consequence of misconduct or inefficiency?
24. Are you now serving in the C.E.F.? *No* If not, give:—(a) Date of discharge *29-7-19*
 (b) Reason for discharge *Medically unfit for General Service on Demand*
25. Are you at present a member of and in receipt of pay and allowances from any Canadian naval or land forces? If so, give unit *No*
26. Did you at any time serve at the front in an actual theatre of war? If so, give particulars of one unit which you served at the front, and dates of such service with that unit *Yes with 28th. from 25-5-17 until 25-8-17.*
27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment? *No*
 (b) If so, are you in receipt of full pay and allowances from that Department? *No*

And I make this solemn declaration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath and in virtue of the Canadian Evidence Act.

Signature of Applicant: *H. J. Atkinson*

Place of Residence: *Moncton NB.*

Declared before me at: *St John NB.*

This *29* day of *July* 19*19*.

Signature of Barrister of the Supreme Court Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner for the Administration of Oaths.

J. V. Kenward Capt.

POST DISCHARGE PAY.

Date paid.	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
.....
.....
.....

Certified Correct.

District Paymaster.

832276

DUPLICATE

H.Q. 54-21-23-53

To be made out in duplicate.

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..... **145th O. S. Battalion, C. E. F.**

(2) Regimental Number..... **832276.**

(3) Full Name of Soldier..... **Atkinson, Kirk Irving.**

(4) Place of Birth..... **Moncton, West. Co., N. B., Canada.**

(5) Are you married, or not?..... **Single.**

(6) If married, state,

(a) Full name of your wife.....

(b) Present Postal Address.....

(7) Are you a widower?..... **No.**

(8) Have you any children?.....

If so, give number of boys and girls.....

Also their names and ages.....

DUPLICATE

(9) Is your Father alive?.....**No.**.....

If so, state name and address

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

If so, state name and address.....**Margaret Atkinson,**.....

.....**166 Queen St., Moncton, West. Co., N. B.**
.....**Canada**

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

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

(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.

.....**\$25.00 per month.**.....

(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.

-----**Yes.**-----

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

If so, in what Company?.....**Metropolitan and Canadian Government Railways,** ..

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.

W. E. Forbes..... LT. COL.
.....**145th "Overseas" Batt. C. E. F.,**
.....**Officer Commanding.**

Date.....**July 11th, 1916.**

MEDICAL CASE SHEET.*

96

No. in
Admission
and
Discharge
Book.

Regimental No.

Rank.

Surname.

Christian Name.

832276

PTE

Atkinson

H. J.

T 540

Unit.

Age.

Service.

Year

1918-19

28 Canadian

19

3 yrs

Station
and Date.

Disease Shell w. of forearm. Frac radius

NORMANHURST V.A.D. HOSPITAL
15 OCT 1918

Adm? fr. 18 Gen Hosp.

A.T.S. 1500. 4: X: 18.

18. General Hospital 9: X: 18. Tr T wd. Et: forearm.

middle curve excised & packed. wd. good condition
Fracture present.

11. X. 18. pack removed.

13. X. 18. Pack removed improved.

Compound comminuted fracture of radius. Wds
excised. Having pack. Xray report. Fracture of
radius & junction of middle upper third.C.O.A. Incised wds: outer border Et: forearm
3 1/2 x 2 1/2 inner border 3" x 2". Granulating but
septic.Treatment. Bed. Carel tubes, injected c̄ Eusol
2 bly. Diet. O.D.

17 A.T.S. 500

20 Wd. granulating healthy. Wound clean

22. Surface of wd. is clean & granulating healthily,
track through arm leads to fragments of bare
bone & remains dirty. Carel Tubes inserted down
to bone.

24 A.T.S. 500.

27 Wd. clearing T° night 99°. Some pain in wrist

31 A.T.S. 500

now. 3 Healing well. Fingers to be gently moved daily.

7 Short straight splint. Passive mov^{to} elbow & fingers

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

Station
and Date.

21.11.18.

Dead bone is loosening.

26.11.18.

Sinuses cleaned.

29.12.18.

C.H.C.L₃ by Dr Brodrick. Sinus curetted & one
large & several small sequestra removed.
Carrel tube replaced & Eusol dressing applied.
Adhesions in wrist & fingers broken down.

3.12.18.

W^{as} quite clean.

12.12.18

Transferred to Military Hospital Eastbourne
for further transfer treatment.

A W Brodrick M.B. Bch.

18.3.18

Trsd to Kirkdale

34

MEDICAL CASE SHEET.

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	822276	Pte	Atkinson	Kirk
Year	Unit.	Age.	Service.	
1918	28 Battr	20	35/12	
Station and Date.	Disease GSW. Forearm. Left with fracture to radius.			
	Admitted from Dormanhurst			
	Enlisted from Milton Jan 1916			
	to England. Aug 1916. Pres Lee Farmer			
	of France. Dec 1916.			
	Invalided from France Oct 1918.			
	Wounded Cambrai Oct 7/18			
	Exam: In 9 wound ^{middle} Lt. Forearm internal entrance wd healed ext. exit wd almost healed but has discharging sinus in centre. Considerable stiffness of fingers, wrist & elbow some oedema of hand.			
	Massage treatment started. Urine:- neg			
27.12.18	wd healed.			
	Requires massage & elec. treatment			
	Transf. Cooden.			
	Jarvisham. Maj.			
Princess Patricia Canadian Cooden Camp, Bexhill.	Red Cross Hospital Wound healed			
30-12-18	Player Capt			
26/4/18	Wound healed 8/4 recd Capt.			

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

Station
and Date.

ORIGINAL.

MEDICAL HISTORY SHEET.

832276

Name Atkinson Christian Name Kirk Irving

Examined on 4th day of Feb 1916
 at Moncton

Approved by E. O. Steves

Birthplace { City or Town Moncton
 County Westmorland

Rank Major M.O.

Apparent age 48

Trade or occupation clerk

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT,
		29 AUG 19 M.O.
<u>28/12/17</u>	<u>A.</u>	<u>2nd Lt. Steves</u> M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Height 5' Feet 4 1/4 Inches

Weight 120 Lbs.

Chest measurement { Minimum 31 inches

{ Maximum expansion 34 inches

Physical development good

Small-Pox Marks none

Vaccination Marks { Arm Right Left
 Number none

Date	Result	VACCINATIONS.
<u>20.5.16</u>		<u>no do.</u>
		M.O.
		M.O.
		M.O.

When Vaccinated last _____

(a) Marks indicating congenital peculiarities or previous disease _____

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>17/3/16</u>		<u>T.B.S. 26/11/17</u> <u>2nd Lt. Steves</u>
<u>27/3/16</u>		<u>Capd.</u>
<u>6-7/16</u>		<u>no do.</u>
		M.O.
		M.O.

Enlisted on 4 day of Feb 1916 at Moncton N.B.

	CORPS.	REG'TL NUMBER.	HABTS.	DATE.
Joined on enlistment	<u>14505.</u>	<u>832276</u>		
Transferred to..	<u>Batt 697.</u>			
	<u>9th Res Bn</u>			<u>7-10-16</u>
	<u>128th Bn</u>			APR 11 1917
	<u>28th Bn</u>			MAY 23 1917
	<u>15th Res. 28th Bn</u>			<u>28.12.17</u>
				5 APR 1918

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>Wolley.</u>	<u>18.4.17.</u>	<u>Hot feet.</u>	<u>A.H. Roadbridge</u>
<u>Wolley.</u>	<u>5-2-19</u>	<u>adherent muscle</u> <u>of fore-arm</u>	<u>Good friendly</u> <u>supp. came</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.

Christian Name Kirk

Surname Atkinson

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				
Valcartier Camp Hospital							G. Measles	14	Recovered, fit	R. W. B. [Signature] Capt., R.C.A.M.C. Training Depot No. 4.	
R.F.B.		5	7	17	12	7	Sick		Rejoined Unit.	[Signature] - A571/A77 ID	
		26	8	17	1	9	Debility	13	Can. Gen. H. Woodcote Epsom	[Signature] Capt. R.A.M.C. Registrar.	
		7	9	17	9	11	Concussion	64	- On admission - Was unconscious for 1/2 hour - Nervous tremors of hands - 18-9-17. Complaints of pain in head - 29-10-17. - No disability now - fit for D1 -	[Signature] Capt.	
		12	12	18	30	12	Open Right Forearm: & fract. radius.	19	Wdd. Oct. 7/18 Cambrai. Wds. now healed. Union of radius firm. Considerable stiffness of fingers, wrist & elbow joints. Transf. Wooden P.P.C.R.C.A.	[Signature] [Signature]	



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

MEDICAL HISTORY OF

Surname Atkinson Christian Name A

TABLE I.—General Table.

Birthplace { Parish
County

Examined { on day of 191
at

Declared Age years days.

Trade or Occupation

Height feet inches

Weight lbs.

Chest Measurement { Girth when fully Expanded inches
Range of Expansion inches

Physical Development

Vaccination Marks {	Arm.....	RIGHT	LEFT
	Number		

When Vaccinated

Vision { R.E.—V =
L.E.—V =

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

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

Approved by

Rank

Medical Officer.

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

Joined on enlistment	Corps	Regtl. No.
	<u>28th Bn</u>	<u>832276</u>

Transferred to

Became non-effective by

on day of 191.....

(Signature)

(Rank)

TABLE III.—Boards; Courts of Enquiry, 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

TABLE IV.—Service Table.

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

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

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
NORMANHURST HOSPITAL BATTLE	15	X	18	12	12	18	Sh. wound/infected	58	Compound comminuted fracture Radius Operation of curetting sinus 29-XI-18 Improving on transfers.	
Princess Patricia Canadian Red Cross Hospital Cooden Camp, Bexhill	30	12	18	14	4	18	—	74	Trip to Kirkdale ANN Bouchard - MB.	Hendon Maj
No 5 CANADIAN INFIRMARY POOL	16	APR	1919	15	MAY	1919			Wound healed. Extension limited 120° seen under	Extremity lost.
S.S. Hughes	13	5	19	1	6	19			as above	J. H. W. W. W. W.

PROCEEDINGS OF A MEDICAL BOARD

Dated at Witley 18. 4. 1917.

No. 832276 RANK Pte NAME ATKINSON K. J.

LOCAL UNIT 128th Bu - OVERSEAS UNIT _____ AGE 17 ²/₁₂

Examination held at Witley

DISABILITY. Flat feet
Overseas - Local.
(strike out one)

PRESENT CONDITION

Has anatomical flat feet - is small and undeveloped

BOARD RECOMMENDS:-

AIR

- 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:-

Thwaites Capt President

Members.

C.B. Trill - Capt

APPROVED

Dated April 15th 1917.

Jh. Cook Capt

for A.D.M.S.,

Witley

1000-2

1000

1000

1000

1000

1000

1000

1000

CASE HISTORY SHEET.

New Brunswick Military Hospital, Hospital.

FREDERICTON, N. B. Station.

No. ~~2700265~~ ^{E32276} Rank ^{1st Lt} Name ^{Atkinson 15.2} Age ²¹

Unit ^{DA 7} Completed years of service ^{8 1/2} ^{8 1/2} ^{7 1/2} } ^{Where and how long}

Date of admission ^{JUN = 1919} Date of discharge

Diagnosis ^{of sev. L arm I + J} Place of origin

CONDITION ON ADMISSION AND PROGRESS OF CASE.

^{USO} left forearm act. 7th 1918 With fracture of radius junction upper & mid third.

Complaint - loss of motion in hand, wrist & elbow. Loss of grip etc.

P.E.: 2 Punctiform scars 1 1/2" x 3/4" on the outer and inner borders respectively of the upper & mid thirds of left forearm from U. & D. USO. Moderate tissue loss over these scars. The scar over the radial border slightly sensitive. Elbow prominent flexion 45° flexion possible to 110°. Wrist extension 10° flexion 45°. Lateral motion approx 25°. Practically no motion in pronation and supination. No active motion in the interphalangeal joints. Motion in the metacarpophalangeal joints approx 40°. Motion in the phalangeal joints, thumb 15°. Can adduct thumb to touch inner side of ring finger. Has practically no grip in hand.

FAMILY HISTORY Heart & lungs apparently negative. (Tuberculosis, mental or nervous diseases.) ^{Rept. of Physiotherapy - reports electrical reaction normal. No nerve tension.}

TREATMENT

(Especially any specific or special form.)

M. & E.

CONDITION ON DISCHARGE

(and disposal made of case.) *a above*

Date *24-7-19* *E. J. Snowdon*
Medical Officer i/c case.

CASE HISTORY SHEET

THE HISTORY SHEET



THE HISTORY SHEET

CASE HISTORY SHEET.

New Brunswick Military Hospital, Hospital. FREDERICTON, N. B. Station.
 No. 832276 ~~2100265~~ Rank Pte Name Atkinson K.R. Age 21
 Unit A.D. 7 Completed years of service 6 } Where and how long 6/12 8/12 7/18/12
 Date of admission June 4/19 Date of discharge 24-7-19
 Diagnosis S.W. Eff arm 7 & 7 Place of origin _____

CONDITION ON ADMISSION AND PROGRESS OF CASE.

Recd 7/4/18. Well. Fracture of radius left forearm 1 1/2 x 3/4" on the outer end between respective of the upper and lower thirds of left forearm
from 2 & 7/9 seen moderate swelling over the fracture the area over the radial bone slightly swollen the elbow permanent
flexion 45° extension 110° Wrist extension 10°
flexion 40° extension 10° motion in pronation and supination
no motion in the metacarpophalangeal joints approx 40° motion
in the distal interphalangeal 15° Cap at distal claw to back
same side of Ray finger has practically no cup in band
chest throat supraclavicular negative
type of phos therapy applied Electrical Reaction Normal
no renal lesion

FAMILY HISTORY

(Tuberculosis, mental or nervous diseases.)

TREATMENT

(Especially any specific or special form.)

M.T.E.

CONDITION ON DISCHARGE

(and disposal made of case.)

As above

Date 24-7-19
E. J. [Signature]
 Medical Officer i/c case.

4

Handwritten scribble or signature

CASE HISTORY SHEET.

N. B. Mil Hospital. J'ton N.B. Station.
No. 832276 Rank Pte Name Alkison K. J. Age 21
Unit DD-7. Completed years of service Where and how long }
Date of admission Le Massage 21-6-19 Date of discharge 24-7-19
Diagnosis SWH Troam Place of origin France

CONDITION ON ADMISSION AND PROGRESS OF CASE

Date Wounded Oct 7/18

T. T. Shrapnel L. forearm fractured Radius.

Wound: 21-6-19: Two 3x1 healed scars - one on ulnar side on radial border L. forearm about mid-way - at site of entry & exit respectively. Scars adherent.

Suppuration & Ossification - Nil kept in fixed and Patient.

W.R.I.S.T.

Dorsi flex: 30° Ab-duction 15° } all limited
Veni flex: 25° Ad-duction 10° }
(measured by protractor).

All fingers held in flexion @ 110° slight ant. voluntary flexion 40° at metacarpus-phalangeals no vol flexion at interphalangeal joints.

Can spread fingers.

Thumb abrad-duction flexion reduced slightly. ++ Warts on Back L. Hand.

FAMILY HISTORY

(Tuberculosis, mental or nervous diseases.)

Health Reaction all Normal. no N. Lesion.

TREATMENT

(Especially any specific or special form.)

- 1 Daily Arm Back
- 2 Massage Scars
- 3 Passive Movement fingers & wrist
- 4 St in firm splint & abd movement for suppuration & ossification & wrist finger movements

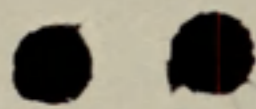
CONDITION ON DISCHARGE

(and disposal made of case.)

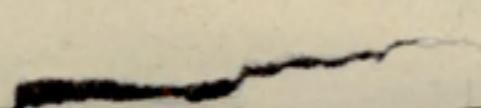
Practically unchanged but less stiff. Recommended this man be discharged. But continue treatment on his own account at his home to get better use of L. Hand.

Date 24-7-19.

Medical Officer i/c case.



[Faint handwritten notes or markings]



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

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) ATKINSON, K.I.
 REGIMENT 28th BATTN RANK PLT No. 832276
 Date of Examination in England Apr 20. 19 Date of Examination in France _____

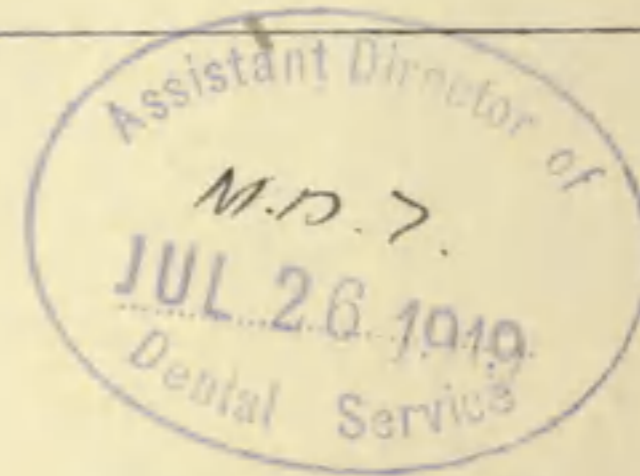
**DIRECTIONS TO
DENTAL OFFICERS**

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 13
2. EXTRACTIONS _____
3. CROWNS _____
4. DENTURES
 - (a) Full Upper _____
 - (b) Part Upper _____
 - (c) Full Lower _____
 - (d) Part Lower _____



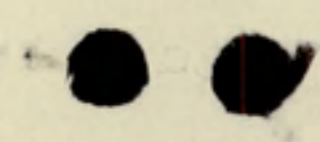
HAS HE EVER REFUSED DENTAL TREATMENT? No

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

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

Signature of Dental Officer _____

L. D. Steele
CAPT. CADS



ATMOSPHERIC

10000
10000
10000

10000
10000
10000

10000
10000
10000

10

10

10

Name **ATKINSON, Kirk** Rank **Pte.**
 Irvine

Reg. No **832276**

Unit **28th. Battalion.**

Next of Kin **Canada**

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1917.						
5-7.	Rep. from Base:-	SICK.	N.S. Q.	A571		
12.7.17	Rejoined Unit.		do	A577.		
31.7.17	No 5. C. F. A.		N.Y.A.	A586.		
5.8.17	No 10. C. F. A.		do	A594		
13.8.17	Discharged		do	A594		
21.8.17	R/ Base Wounded			A603	5981	01.5.
23-8	No. 22. G. H. Camiers.		GSW. Cont.	A604.		
29.8.17	No 2 of 4 Coy Canterbury (1043)			B8		
8.9.17	Mil C. N. S. P. B. (1737)		Debility of the	B8.		
9.11.17	Discharged (1737)			B7		

NAME

Atkinson, Kirk Lewis

REGT'L No.

832276

RANK AND CORPS

Pte.

28th W Bn

H. Q. FILE No. 649.

FOLLOWS
No.

Follows 145th

FOLLOWS

CABLE

NO.

DATE

NATURE OF CASUALTY

M 5981.

1-9-17

Rep wounded Aug 21st 1917 ✓

113-12.
No of M. Mrs Margaret Atkinson (mother), 166 Queen St.
Moncton, N.B.

Moncton, N.B.

N 397.

17-10-18

Adm. 18 Gen H. Dannes Carriere

H. Q. 345

16-10-18

Oct. 8th / 18. Issued L Arm ✓

SURNAME.

Atkinson,

CARD NO.

7

CHRISTIAN NAMES

John Irving

Ladies Armory

FOLL 29.7.19

REGL. No.

832276 RANK Pte.

A.O. 211 of 30.7.19

6 705

UNIT 145 th.

Batt

FORMER CORPS

Nil.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Atkinson, Mrs Margaret

RELATIONSHIP TO SOLDIER

Mother

ADDRESS

166, Queen St. Moncton, N.B.

COUNTRY OF BIRTH

Canada, Moncton, N.B.

DATE

Feb 2nd 1898

PLACE OF ATTESTATION

Moncton, N.B.

DATE

Feb 4th 1916

Sailed from Halifax Per S.S. "Tuscania" 25/9/16

1916-2-6-19 32 Ple 2

MARRIED

SINGLE

Yes

WIDOWER

TRADE OR CALLING

Clerk

RELIGION

Presbyterian

DESCRIPTION.

APPARENT AGE

18

YEARS

MONTHS

HEIGHT

5

FEET

4 1/4

INCHES

CHEST MEASUREMENT

34

INCHES

EXPANSION

3

INCHES

COMPLEXION

Med.

EYES

Grey

HAIR

Brown

DISTINGUISHING MARKS

Oval birth-mark over rt. shoulder blade.

MEDICAL EXAMINATION.

PLACE

Moncton, N.B.

DATE

Feb 4th 1916



NO. 75 ... HOSPITAL.

AT

A. & D. No. 1840 PL. OF ACTION

RANK Otc. REG. No. 832276 UNIT 28 ban Bn. SICK OR WOUNDED

NAME Atkinson K. J. AGE 19 RELIGION Pres.

PLACE IN HOSPITAL C 2.

DIAGNOSIS G. S. W. Fore arm L. with Fract Radius

ADMITTED 12 DEC 1918 FROM W. H. Bourne

DISCHARGED

TRANSFERRED 30 DEC 1918 To P.P.C. Hosp. Coode.

SERVICE AT HOME 36/12. IN FIELD

RESULTS

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

Priestess Patricia Canadian Red Cross Hospital. *✓*

**A. & D.
CARD**

AT..... *15674*

A. & D. No. *Regt 832, 276* PL. OF ACTION *Camelot*

RANK *Pvt* REG. No. UNIT *28th Bn.* SICK OR WOUNDED

NAME *Atkinson, K.* AGE *20* RELIGION *Presby*

PLACE IN HOSPITAL *Div 1*

DIAGNOSIS *G. A. W. Lt. forearm*

ADMITTED *30-12-18* FROM *No. 4 C. G. Hospital Eastbourne*

DISCHARGED TO *No. 5 C. G. H. L. pool*

TRANSFERRED *16 4 1919*

SERVICE AT HOME *34/12* IN FIELD *7/12*

RESULTS

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

REMARKS.

By Clerk

Sept 10 / 1916

Moncton N.B.

Name *Atkinson* Rank *Pte* *Kirk Irving*

Reg. No. *832276*

Unit *28¹²*

Next of Kin *Canada*

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
<i>8-10-18</i>	<i>18 G. 4 carriers</i>	<i>GH Army L</i>	<i>(Ser)</i>	<i>A 345</i>	<i>H 397</i>	<i>47659</i>
<i>16-10</i>	<i>Sent to Eastbourne</i>	<i>do</i>	<i>do</i>	<i>B 345</i>		<i>29289</i>
<i>13-12</i>	<i>1st G. 4 carriers</i>	<i>do</i>	<i>do</i>	<i>B 345</i>		<i>3212</i>
<i>31-12</i>	<i>P.P.C. P.C. Benthill</i>	<i>do</i>	<i>do</i>	<i>B 345</i>		<i>4152</i>
<i>1918</i>	<i>Drag. G.W. 75</i>	<i>Radins Sp</i>	<i>do</i>	<i>B 410</i>		<i>6146</i>
<i>17-18</i>	<i>2nd G. 4 carriers</i>	<i>do</i>	<i>do</i>	<i>B 500</i>		<i>285</i>
<i>13-5-19</i>	<i>Inval to Canada</i>	<i>do</i>	<i>do</i>	<i>B 528</i>		<i>9082</i>
	<i>S/S 501 G.W. 75</i>					

Date

Movement

Place

Casualty

List
No.

Notified
N/K O.

W.O. List

1942

1943

2

Reg. No. 892276 Name Atkinson. H. J.
 Rank Pvt Corps 145 Age 18 Service 27/2 E 6/12 7.18/12
 Ledger No. 2146 Serial No. D. 9211

37

HOSPITALS

DATE

DIAGNOSIS

HOSPITALS	DATE	DIAGNOSIS
Camp Valerius, Quebec	0: 8. 16	Measles
Dis to Unit	13. 8. 16	
Military Instruction	4 6 19	G. S. W. L. Army
Dis to	28 7 19	

HOSPITALS**DATE****DIAGNOSIS**

M. F. W. 2555.

75M.—9-19.

1772-39-1332.

Convalescent Hospital,
HOSPITAL.
Woodcote Park, Epsom.

A. & D.
CARD

1. AT _____
A. & D. No. 717950 PL. OF ACTION _____
RANK S32276 Pte UNIT 28 SICK OR WOUNDED a
NAME Atkinson R. J. AGE 19 RELIGION P
PLACE IN HOSPITAL _____
DIAGNOSIS Concussion
ADMITTED 7-9-17 FROM *2 Mil. Canterbury
DISCHARGED 10/9-11-17 TO 2. C. C. H. Brams hoth.
TRANSFERRED _____
SERVICE AT HOME 19/12 IN FIELD 3/12
RESULTS _____

REMARKS.

- 8-9-17. Was unconscious for 1/2 day Nervous
tremors of hands & blutz.
- 18-9-17. pains in head
- 20-9-17. pains improving Continue.
- 1-10-17. ~~Condition~~ Continue.
- 15-10-17. Continue
- 23-10-17. Continue
- 29-10-17. Di.

C. F. Howson Capt.

NAME

Atkinson R

REGT. No.

852276

RANK AND UNIT

Pl

2nd Lt

NEXT OF KIN

CABLE

NATURE OF CASUALTY

No.

DATE

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
B500	Stanley Kirtland P.P. Cankin Bethel	17.4.19	(28) Lher fac radius
B528	Invalided to can	23.5.19	" " " " " " 52-50 / MAD7

No. 932276 RANK *Pte*

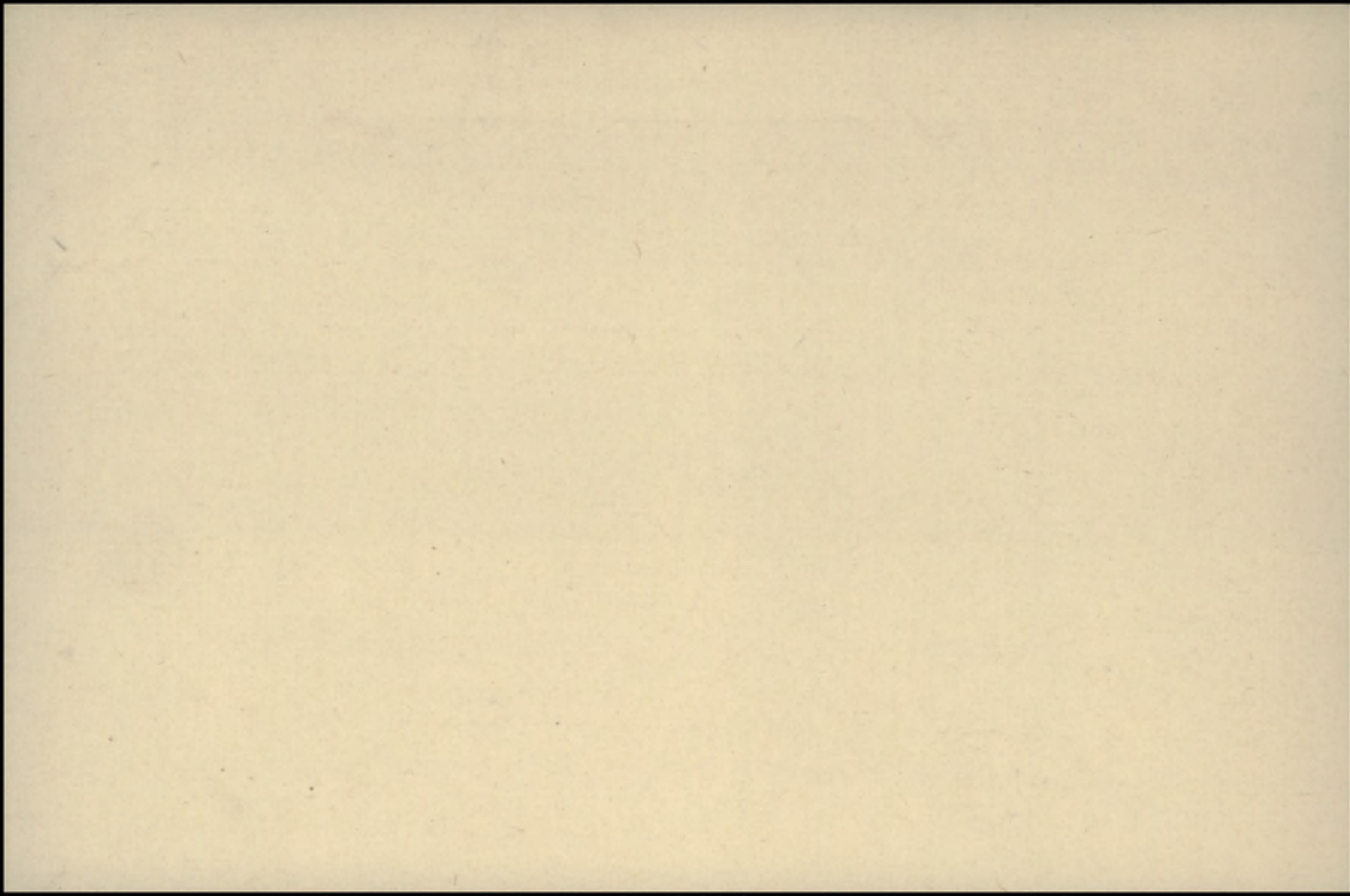
NAME *Atkinson Kirk J.*

T. O. S. 4-2-16
Do 27/5-2-16

UNIT *145th Battalion (Moncton N.B.)*

M. D. 6

PAID		SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
FROM	TO		PARTICULARS	AUTHORITY
<i>1916</i> <i>Feb 4</i>	<i>1915</i> <i>Feb 29</i>	<i>v</i>		
	<i>Mar</i>	<i>v</i>		
	<i>Apr.</i>	<i>v</i>		
	<i>May</i>	<i>v</i>		
	<i>June</i>	<i>v</i>		
	<i>July</i>	<i>v</i>		
	<i>Aug.</i>	<i>v</i>		
	<i>Sep.</i>	<i>v</i>	<i>a.w.h. 21-9-16</i>	<i>D.O. 223 of 21-9-16</i>
				UNIT SAILED SEP 25 1916



185b

Ple. 10
V

Number 832276

Rank

Surname ATKINSON

Christian Name Kirk Irving

Units 28th Cav. Inf Theatre of War France

Date of Service 23-5-17

Remarks

Latest Address ~~78~~ 166 Queen St
Moncton N.B.

Roll No. Page 21832

10m.-8-21.M.

DESP
REGR. NO. ~~10~~
DEC 15 1922
2167

Surname **Atkinson** Christian Name or Names **H. J.** Reg. No. **832276**
 Rank **Pte.** Unit **28 Batt.** Co. **Sask** Troop Batty.
 Hospital Date of Admission

Transferred **5 Can 7d amb.** Hosp. **31-7-17.**
10 Can. 7ld. Amb. Hosp. **5-8-17**
22 Gnl Hosp. Dan. Camillo Hosp. **23-8-17**
2 mi oc/PK Cambridge. Hosp. **29-8-17**
mi Con Epsom. Hosp. **8-9-17**

Diagnosis **MSD** **N.Y.D.**
 (1) **Wh. S.**
 Later Diagnosis (if changed) **G.S.W. Contusion R**
 (2)
 (3)

Additional Diagnosis: if more than one state present
Debility R
G.S.W. L. Arm Rev. R
Chgo to GSW ~~Ray~~ Radin ^{at}
Invalided to Canada 23.5.19
Dis. 18-8-17 Date

DISPOSITION

REMARKS

62-21-7-17 A571 R.F.B. Sick. 5-7-17.
1-8-17 A577 Ry: unit. 12-7-17. W.B.
11-8-17 A586 R.F.B. wd. 21-8-17
Dis 9-11-17
Ch 21-8-17 A594
" 31-8-17 A603
1-9-17 @ 604
17-9-17 B8 (1) (2).
24-11-17 B71 (3)
16-10-18 A345-2
21-10-18 B349-I.
19-12-18 B400 (2)

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

P. J. D.

EPITOME OF HOSPITAL TREATMENT.

	Hospital	Adm.
1.	18 Gen Carriers	8. 10. 18
2.	Central Mil H Eastbourne	15. 10. 18
	14 C. G. Eastbourne	13-12-18
3.	P. L. S. Beshill	31-12-18
4.	5 C. G. H. Kirkdale	17. 4. 19
5.		
6.		
7.		

S.L. 2-1-19 B410^o

8.1.19 B4.4. Diagnosed chyd.
 22.4.19 B500-1
 28.5.19 B528

FIELD MEDICAL CARD.

A.T. Serum
Dose and date

1st

¹⁵⁰⁰
⁷⁵⁰
OCT 7 1918

2nd

FIELD AMBULANCE NOTES.

Morphia
Dose and time

Date of wound or
onset of illness

OCT 7 1918

Religion

Pres

No.

832276

Rank

Plt

Name

ATKINSON

K.I

Unit

28 1st Bn

2 Bn

Battle Casualty

~~Accidentally Wounded.~~ "Sick"

(Strike out description which does not apply).

No. of F.A.

9TH CANADIAN FIELD AMBULANCE.

Date of admission

OCT 7 1918

F.A. diagnosis

S. M. Forearm L. fract.?
at Simpson
capt camp

Additional F.A. Notes to be written on back of card.

C.C.S. diagnosis (if altered from above)

Base Hospital diagnosis (alterations or additional)

*S.S. W. (L) forearm (sens)
fracture.*

Date of entry and medical unit admitting must be recorded immediately on admission. Brief clinical notes to be added later and signed by M.O.

No. of C.C.S. 33

Date of entry

7¹⁰/₁₈

No. of Hospital 15

Date of entry

9/10/18.

T & T W. (L) forearm middle curve
excised & packed. W. good condition
fracture present.

11-10 - Pack removed

J. Redman
St M G O
Rise

13-10-18

Pack removed. Improved

Norfolk VA D. 15-x-18

Compound comminuted fracture
Bony fragments. Wound curetted
here on 29-x-18. Improving since.

12-x-11-18.

AM Woodruff, M.B.

Evac. Attending
J. W. H. Downes
May, R. A. M.C.

This F.M. Card must not be destroyed, and it must be transmitted with the patient if he is evacuated to U.K. Temperature charts or additional clinical notes may be sent with it, either in the same or in another envelope attached to the patient.

Name

Atkinson Hul 4/2/12

Date of Embarkation for England

Arrived 6-10-16

Proceeded to France.

23/5/17
8-4-19

Returned to England.

26/8/17 ended
15-10-18 ended

Date returned to Canada.

23/5/19

one

P.R. 2855.

checked 1-6-22.

Geo shell 30/7/17 N.Y.D

5/8/17 N.A.D. to duty 13/8/17

21-8-17 Waded Bank to log 26/8/17

7-10-18 Assw Ann to log 15/10/18

Casualty Form—Active Service.

Regiment or Corps 145th Battalion CEF

Regimental No. 832276 Rank Private Name Atkinson Kirk Irving

Enlisted (a) 4/2/16 Terms of Service (a) D of W Service reckons from (a) 4/2/16

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) (Civil) Clerk

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				
Religion	<u>Presby.</u>	Age on enlistment	<u>18</u>		<u>Embarked Hfx.N.S. 26-9-16</u> <u>Disembarked Liverpool 6-10-16</u>
<u>7-10-16</u>	<u>O.C. 145th Bn</u>	<u>trans. to 9th Res Bn.</u>	<u>St. Martins Plain, Kent</u>	<u>7-10-16</u>	<u>Part II. O. 231</u>
			<u>A. T. Gully Cap. and Adj. 145th Bn.</u>		
<u>9-10-16</u>	<u>O.C. 9th Res Bn</u>	<u>Taken on strength 9th Res Bn</u>	<u>St. Martins Plain</u>	<u>7-10-16</u>	<u>Part II O. 281</u>
<u>23-2-17</u>	<u>O.C. 9th Res Bn</u>	<u>Transferred to 202ND O. BATTN. C.E.F.</u>	<u>Witley</u>	<u>5/2/17</u>	<u>Pt. O. 29, Y 32.</u>
<u>5-2-17</u>	<u>O.C. 9th Res Bn</u>	<u>Taken on strength of 202ND O. BATTN. C.E.F.</u>	<u>Witley</u>	<u>5/2/17</u>	<u>Pt 2. D.O. #36, 5/2/17</u>
<u>13/4/17</u>	<u>O.C. 202nd</u>	<u>S.O.S. on transfer to 128th Bn</u>	<u>Witley</u>	<u>11/4/17</u>	<u>Pt 2 D.O. #101. 11/4/17</u> <u>Comdng 202nd. (Sportsmen's) O. Battn. C.E.F.</u>
<u>13-11-17</u>	<u>128th</u>	<u>S.O.S. from 202nd Bn</u>	<u>Witley</u>	<u>11-11-17</u>	<u>Pt II O. 102</u>

(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, Shoering Smith, etc., etc., also special qualifications in technical Corps duties. [P.T.O.]

CERTIFIED CORRECT
 30 JUN 1977
 CAN. RECORDS, LONDON.

Report Date	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.
MAY 23	128th	Proceeded Overseas for service with the 28th Battn.	Witley	MAY 23 1917	Part 11, D/O 143 CAPT. & ADJT.
2/5/17	1st Can. Base Depot	Arrived in France for 28th Can. Bn	Etates	2/5/17	N.A. P-11 D/O + 9 d 3/5/17
14/6/17	"	Left for Unit	Free	14/6/17	N.A.
23/6/17	28th Bn.	Joined Unit		23/6/17	N.A. B213
7/7/17	"	Went to F. amb		7/7/17	B213 Det. 306
21/7/17	"	Rejoined unit		21/7/17	" 310
4/8/17	"	Went to F.A.		30/7/17	B213 " 315
28/8/17	1st Lt. NYD	adm. NYD	5 C.F.A.	31/7/17	Asst.
5/9/17	do	N.A.	10 C.F.A. (Ch)	5/9/17	" 302
17/9/17	2nd Lt. 28th	Rejoined unit	Free	13/9/17	B213 Det. 310
24/9/17	"	Wounded		21/9/17	N.A. on leave 15/10/17 to 2/11/17
25/9/17	2nd Lt.	Wounded (W)	Free	25/9/17	W 30 54/6 P46 Det. 311
25/9/17	1st Lt. A.T. de Courcel	Wounded and Posted To Saskatchewan Regtl. Depot. Bramshott.	A.T. de Courcel	25/9/17	W 30 F3/5 F36. P-11 D/O + 9 d 7/9/17

14.9.17. S.R.D. 5.0.S. on posting from 28th Bn
 Bram 26.8.17 P-11 D/O 198.
 Major for Lt.-Col., A.C.G.
 Canadian Section G.H.Q. 3rd Echelon B.E.F.
 for Lt. Col. i/c Records, C.E.F.

(SERVICE AND CASUALTY FORM Part II).

Regiment or Corps _____ Regimental Number 832296

*Substantive Rank _____ Surname Atkinson Christian Names R. J.

*Acting Rank _____

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

(A) Report		(B)	(C)	(D)	(E)	(F)
Date.	From whom received	Authority of Part II. of Orders	Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I, 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	Place of casualty	Date of promotion, reduction, reversion, casualty, &c.	Remarks, and initials and rank of an officer

24.10.18	S.R. Co	✓	To S. from 28 th Bn	B'sholt	16.10.18	P-150292
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..... LIEUT:
FOR LT: COL: W/C RECORDS, C.O.M. #.

To be folded on this line.

Nothing to be written in this margin.

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

INVALIDATED TO CANADA FOR
FURTHER MEDICAL TREATMENTS

W. J. Bayliss Jr

HOSPITAL REPRESENTATIVE
ADJUTANT GENERAL CANADIAN
BULLEN DEPARTMENT Red Cross Hospital
BUSHILL-ON-DEA

(A) Report		(B) Authority of Part II. of Orders	(C) Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	(D) Place of casualty	(E) Date of promotion, reduction, reversion, casualty, &c.	(F) Remarks, and initials and rank of an officer
Date.	From whom received					
23/5/19 6/6/19	England.		TAKEN ON STRENGTH <i>District Depot No. 7.</i> PART II. ORDER No. 157. ST. JOHN, N. B.		23/5/19 6/6/19	<i>hllwslms</i> <i>Lieut. & Asst. Adjt.</i> <i>For O. C. District Depot No. 7.</i>
30/7/19	Dis. A.M.S.		STRUCK OFF STRENGTH <i>District Depot No. 7.</i> PART II. ORDER No. 211		29/7/19	<i>hllwslms</i> <i>Lieut. & Asst. Adjt.</i> <i>For O. C. District Depot No. 7.</i>

Nothing to be written in this margin.

Casualty Form—Active Service.

Regiment or Corps 14528 Bn

Rank PT Surname Atkinson Christian Name Kirk Irving

Religion P Wesley Age on Enlistment 18 years.....months

Enlisted (a) 4.2.16 Terms of Service (a) D. of W. Service reckons from (a) 4.2.16

Date of promotion to present rank..... Date of appointment to lance rank.....

Extended {.....} Re-engaged {.....} Qualification (b).....
or Corps Trade and Rate.....

Occupation Clerk Signature of Officer.....

Report		Record of promotions, reductions, transfers, casualties, &c., 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 of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents
Date	From whom received				
			Embarked ...		
			Disembarked...		
<u>16.11.17</u>	<u>2CCD</u>	<u>Attached to 2CCD</u>	<u>Bramshott</u>	<u>21.11.17</u>	<u>Pt 2 D.O. No 235</u>
<u>29 DEC 1917</u>	<u>OG, 2nd CCD</u>	<u>Ceases to be attached to 2nd C. C. D.</u>	<u>B. Shatt.</u>	<u>28 DEC 1917</u>	<u>Pt. 2 D. O. No. 270</u>
		<u>on return to..... Res. Bn.</u>			<u>for OG, 2nd CCD.</u>
<u>DEC 1917</u>	<u>D.C. 15th RES. BN.</u>	<u>TAKEN ON STRENGTH FROM <u>S.R.D.</u> from <u>2nd C.C.D.</u></u>	<u>BRAMSHOTT.</u>	<u>28.12.17</u>	<u>Part II D.O. 356</u> <u>(SRAP 356)</u> <u>1/31-12-17</u>
<u>APR 1918</u>	<u>D.C. 15th RES. BN.</u>	<u>STRUCK OFF STRENGTH TO <u>28th Bn</u></u>	<u>BRAMSHOTT.</u>	<u>7 APR 1918</u>	<u>PART II, DAILY ORDERS No. 98</u> <u>Deanshall Lt ADJUTANT,</u> <u>15th RESERVE BATTALION.</u>

CERTIFIED CORRECT
 6 APR 1918
 CAN. RECORDS LONDON

(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) Signaller, Shoeing-Smith, &c. (2289) W 13863/M1477 2,400,000 1/17 MeA & W Ltd Forms B./103/4 (E. 886) [P.T.O.]

F32276 Lt. Richardson K. J.

Report		Record of promotions, reductions, transfers, casualties, &c., 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 of Casualty	Date of Casualty	Remarks, Taken from Army Form B.213, Army Form A.36, or other official documents
Date	From whom received				
8.12.16	9 Bn.	Detail for duty with 1st Bn	Schiffe	8.12.16	P. 213
18.7.17	"	Ret'd from "	"	14.12.16	- 350
19.1.17	"	Cond to 1 Res. paid discharge	"	19.1.17	-19 (Res on the 16)
5.2.17	Res Bn.	leaves on Cond.	"	5.2.17	- 33
L. S. Landy					LIEUT.
FOR LT: COL: HQ RECORDS, C.O.M.F.					
8.4.18	Can. Base Depot	Arrived in France for 28th Can. Bn	Etaples	8.4.18	NR No records
10.4.18	"	Left for Unit	Field	10.4.18	NR
10.4.18	"	Joined Unit	"	10.4.18	NR
13/5/18	"	Wounded for unit	"	13/5/18	NR. D201.
19/5/18	OC 28th	Arrived Unit	"	14/5/18	B213
12/10/18	"	Wounded	"	7/10/18	B213
8/10/18	1st Gen	G.W. Am (Mun) adv	1st Gen	8/10/18	W 2024/W 764
7/10/18	9 CF. amb.	do	9 CF. amb.	7/10/18	A36/A322
	33 res.	do	33 res.	7/10/18	A613
15/10/18	1st Gen	do	1st Gen	15/10/18	W 2024/W A.P.1
	OC A.T.	do - wounded	A.T.	15/10/18	W 2024/W 6259
	Ville de	Wounded and	Ville de		W 2024/W 122 d 24/10/18
	Wey	Posted To Saskatchewan Regt.	Wey		
		Depot, Bramshill			

Whogau Major for Lt-Col. A.A.G.
Canadian Section C.H.O 3rd Echelon D.E.F.

CHS Rank Name **ATKINSON Kirk Irvine** Reg'l No. **832276**
 Unit **145th. Bn.** If in perm. Corps, }
 What Unit? }

Married or Single **Single**

Place and Date of Enlistment **Moncton. N.B. Feb. 4th. 1916.** Place of Birth **Moncton. N.B. Canada.**

Name and Address, Next-of-Kin **Mrs. Margaret Atkinson**

166 Queen St. Moncton. N.B. Canada. Relationship **Mother**

Assigned Pay Monthly \$ Payable to

Relationship

Separation Allowance \$ Payable to

Relationship

REF R 12654
 FILE R L
 Category **MUC**

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.				
Arrived in England S. S. Tuscania, 6-10-16.					
7-10-16	I45 Bn	Trans. To 9 Res Bn	S'cliffe	7-10-16	P2 231
9-10-16	9th Bn	Taken On Strength	S'cliffe	7-10-16	Pt 11 28I
8-11-16	9c 9th Bn.	Detail for duty with ofc 145th Bn.	"	8-11-16	Pt 2 313.
15-12-16	"	Returned from duty with 145th Bn.	Do	14-12-16	350
19-1-17	"	On cmd to 1st Bn pending Discharge	Do	19-1-17	19
19-1-17	1st Res Bn	Attd for ops, ration & discipline	Do	19-1-17	16
5-2-17	"	Leave to be attd on rept to 202nd Bn	S. Diggate	5-2-17	33
23-2-17	9th Res Bn	Leave to be on Com to 1st B. & S.O.S. to 202nd	B' shott	3-2-17	Pt 2 D.O. 29
5-2-17	202nd	T.O.S. on tpr. from 1st Res. Bn	Witley	5-2-17	Pt 2 D.O. 36
26-2-17	9th Res. Bn	Pt 2 D.O. 29 Amended to read	B' shott	5-2-17	Pt 2 D.O. 32

832276. Atkinson R. G.

A.F.S. 103 CHECKED

Witley
WB. 19 JUN 1917

Plt.

H

RECORDED

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.				
18-4-17	202 nd	S.O.S to 128 th Bn.	Witley	11-4-17	4, 52. of 128 th Bn Plt 101
23-5-17	128 th Bn	S.O.S. 28 th Bn Overseas	Field	23-5-17	49-31-5-17 28 th Bn -143.
21-7-17	28 th Bn	Reptd. from Base Sick	Field	5-7-17	PLA 571 Not signed
1-8-17	✓	Rejoined Unit	Plt.	12-7-17	✓ 577
11-8-17	✓	Adm 5. Can. Gen. Amb.	Field	31-7-17	CLA 586 N.Y.D.
21-8-17	✓	Adm. No-10. Can. Gen. Amb.	✓	8-8-17	✓ 594 N.Y.D.
✓	✓	Discharged	✓	13-8-17	✓ ✓ ✓
31-8-17	✓	Reported Wounded.	Base.	21-8-17	CLA 603.
1-9-17	✓	Adm 22. Gen. Hosp	Caniers.	23-8-17	CLA 604. G.S.W. Contusion
7-9-17	✓	Wounded Posted to S.R.D.	Field	26-8-17	Plt 83. 198/14-9-17 S.R.D.
11-9-17	Sack.	Adm. 2. Mil. Hosp. old. Pk. Canterbury		29-8-17	C.L.B.S. Delinquency
✓	✓	Adm. M. G. B. Woodcock Pk. Exon		8-9-17	✓ ✓
23-11-17	✓	Dis. from Hosp		9-11-17	✓ 71.
29-12-17	15 th Bn	T.O.S on posting from S.R.D.	Plt	28-12-17	Plt 356 + S.R.D. Plt 306 1/31-12-17
8-4-18	✓	S.O.S to 28 th Bn, Overseas	Plt	7-4-18	Plt 98 + 28 th Bn Plt 340 1/11-4-18.
16-10-18	28 th Bn	Wounded	Field	8-10-18	CLA 545 GSW arm L
24-10-18	S.R.D	T.O.S from 28 th Bn	Plt	16-10-18	Plt 272 + 28 th Bn Plt 123 24.10.18
28/5/19	S.R. (28 th Bn)	Invalidated to Canada	- Ripon	23/5/19	C.L.B.S. 528 Failing # 501 S.R.D. Plt 10127. 4.3.19 M.D.7.

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2.

L. L. Job 95618—M. & D. 6555.

Mother
Mary Atkinson
PAYMENTS.

Pte Name of Soldier *Atkinson Kirk J.*
832276

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916	T 1734	58	58
May		R 6195	20	20
June		A 2225	20	20
July		O 10112	2	2 to adv O 10112 remailed 27/7/16
Aug.		B 10757	20	20
Sept.		H 14854	20	20
Oct.		H 18156	20	20
Nov.		H 20864	20	20
Dec.		H 24226	20	20
Jan.	1917	H 27579	20	20
Feb.		H 30729	20	20
March		H 33864	20	20
April		I 1144	20	20
May		I 3335	20	20 318°
June		J 6360	20	20
July		I 9808	20	20
Aug.		H 13239	20	T
Sept.		J 16271	20	B 7.11.380. ✓
Oct.			20	m
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE
SEPARATION ALLOWANCE
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier

PAYMENTS.

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

4-2-16 1-3-16

Led 8
133

MILITIA AND DEFENCE

M. F. W. 11.
15m.—3-16.
H. Q. 1772-39-818.

SEPARATION ALLOWANCE

Name *Margaret Atkinson*
Address *166 Queen St,
Moncton N.B.*


Name of Soldier *Atkinson Kirk J.*
Regtl. No. *832276*
Rank *Pte*
Corps *145th Battr*

Relation to Soldier
wife, child or mother } *Mother*

To what Corps belonging }
when called out }

✓

PAYMENTS

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

1920

1920

1920

MILITIA AND DEFENCE
ASSIGNED PAY

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

OVERSEAS CONTINGENTS

Sheet No. 2.

Margaret Atkinson

Name of Soldier

Atkinson, Kirk, S.

PAYMENTS.

#832276.

L. L. Job 4503 - Req. 6832.

Month.	Year.	Cheque No.	Amt.	Remarks.
				<i>\$20. Feb. 1st 1917</i>
April	1916			
May				
June				<i>\$20.00 refund requested 8³/₁₇ F.L.</i>
July				<i>\$20.00 Recovered by dc recreated 1/2/17. DMN 20/3/17</i>
Aug.				
Sept.				
Oct.		<i>T 25629</i>	<i>20</i>	
Nov.		<i>F 29522</i>	<i>20</i>	
Dec.		<i>W 36287</i>	<i>20</i>	
Jan.	1917	<i>P 36352</i>	<i>20</i>	<i>Spec. Reg. 21/3/17</i>
Feb.		<i>P 42577</i>	<i>20</i>	<i>Stop Feb 1/17</i>
March		<i>T 54835</i>	<i>20</i>	<i>20 (J.W.) Part for refund 200</i>
April		<i>G 390</i>	<i>20</i>	<i>\$20.00 toady March 17/17</i>
May		<i>Q 6285</i>	<i>20</i>	<i>Signature</i>
June		<i>T 12880</i>	<i>20</i>	<i>20.8</i>
July		<i>R 19717</i>	<i>20</i>	<i>5</i>
Aug.		<i>S 27358</i>	<i>20</i>	<i>B</i>
Sept.		<i>R 33810</i>	<i>20</i>	<i>6</i>
Oct.				<i>240⁰⁰ P.S.B.</i>
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

~~OCT 7 1916~~

200

14

20

P6

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.				

4-2-14
MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

M. F. W. 12
50m.—7-16
H.Q. 1772-39-819

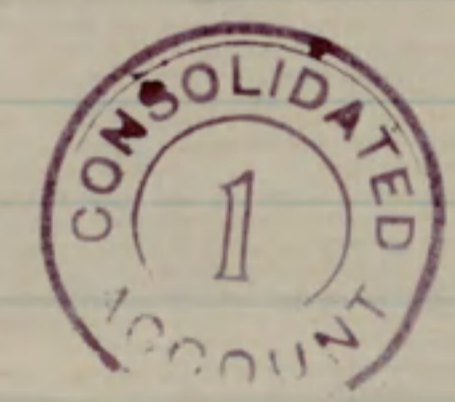
To Whom *Margaret Atkinson*
Address *166 Queen St.
Moncton,
N.B.*
Rate *\$20.-*

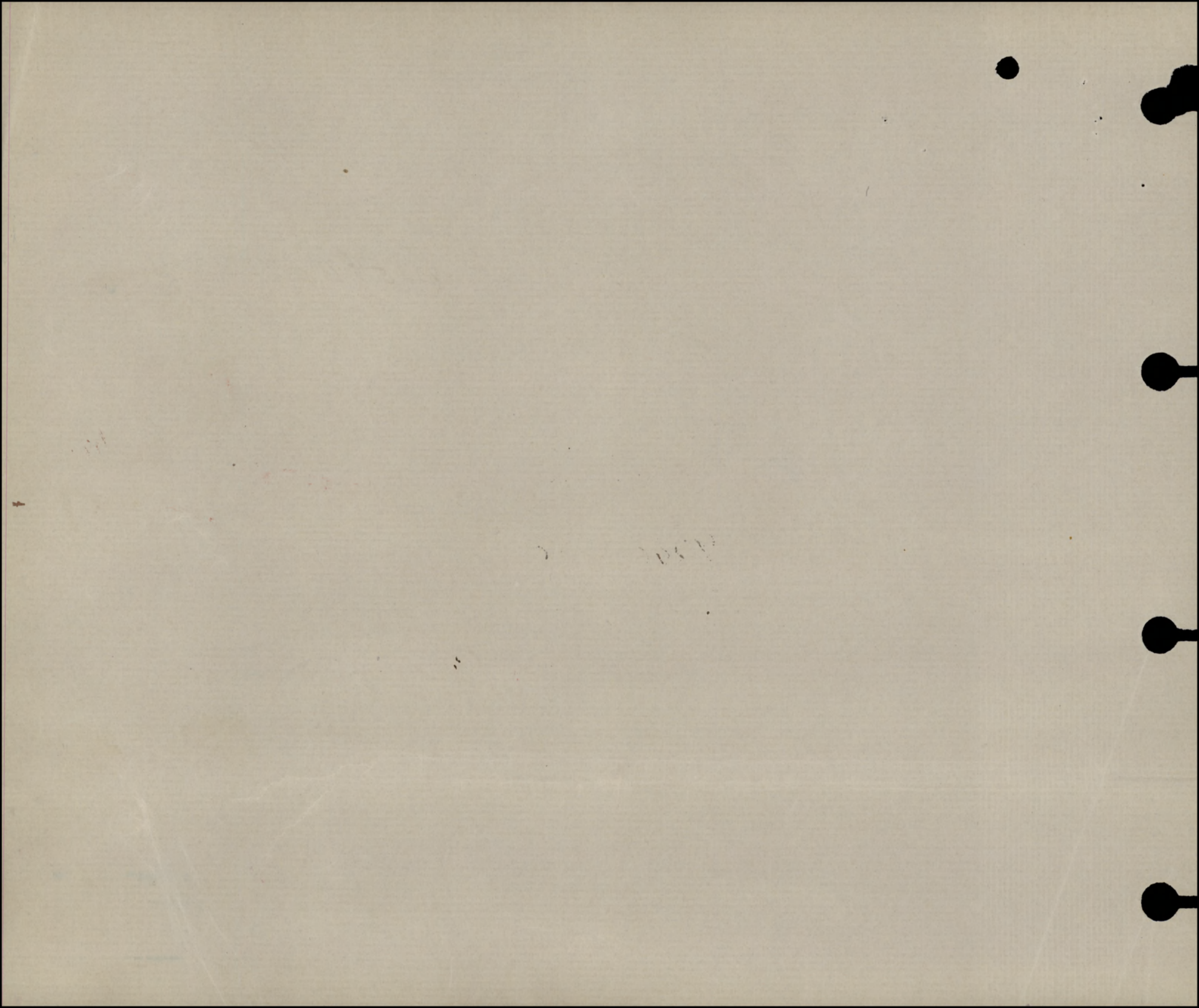
By Whom Assigned *Atkinson, Kirk S.*
Regtl. No. *832276*
Rank *Pvt*
Corps *145th Batt. C.E.F.*
~~OCT 1 1916~~

PAYMENTS

February 1st 1917

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			<i>Stop Payments Feb 1/17 Discharged to Canada 3M 18/1/17 C.E.F. 2/3/17</i>
Sept.				
Oct.				
Nov.				
Dec.				<i>2016 8377 1917</i>
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				





Statement of the Soldier

(This is to be completed only in the case of the Soldier taking his Discharge in England.) (Sections 1, 2, 5, and 6 are to be read to the Soldier.)

I, the undersigned, Kirk Atkinson, 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:—

Kirk Atkinson

Signature of Soldier examined.

Instructions to Medical Officers

Question 1.—State the disability in terms of a diagnosis, that is, a diagnosis of the existing condition as distinguished from the disease or injury which caused it.

Question 2.—The cause of the disability when known should be stated and care should be taken to establish as correctly possible the place and date of origin.

Questions 3 and 4.—NOTE—By Active Service is meant Service with the Colours in Canada, the United Kingdom or elsewhere during the present war, (since the 4th August, 1914.)

Question 5.—MEDICAL HISTORY.—State concisely the essential points of the history of the case as supported by documentary evidence.

Extracts should be made from all entries on the Medical History Sheet.

If answers to Nos. 2, 3 or 4 show that the Soldier is suffering from some condition which pre-existed enlistment, it is advisable that these answers be substantiated as far as possible by statements obtained from the Soldier showing history of previous illness or injury.

Question 6.—PRESENT CONDITION.—As this question is primarily intended for the Medical Officer's report, in answering show clearly the condition of the Soldier at the time of examination.

It is directed that the objective and subjective matter be arranged in separate groups. The objective matter is considered to be the more important, in that it consists of a statement of the Medical Officer's findings.

Specialists' reports bearing on the PRESENT CONDITION should be attached.

In addition to description of the disability, a report on "all systems" is required in order that the whole when completed may be a true pen portrait of the Soldier's condition.

The Medical Officer in charge of the case will fill out pages 1 and 2 of this Form. The original must be wholly in the hand writing of the Medical Officer.

Finally the O. C. Hospital or S. M. O. or an Officer delegated for such duty by the A. D. M. S., is required to sign a certificate at the bottom of page 2, which reads as follows:—

"I have satisfied myself of the general accuracy of this report and concur therewith, except....."

This is a most important part of the paper and one to which the attention of the Officers concerned should be frequently drawn as it is by such strict supervision that the accuracy and good results of Medical Board work can be assured.

ENTRIES OF RECATEGORIZATION

Table with columns: Date, Station, Category, Signature of M. O., Date, Station, Category, Signature of M. O.

Reserved for M.H.C.

Regt. No. 838976 Rank PTE Surname ATKENSEN Christian Name KIRK

Unit or Corps (a) Overseas from United Kingdom 28th BATTN (b) in United Kingdom 16th RES.

Born at—Town Moncton County or Province N.B. Country CAN.

Date of Birth—Day Month FEB Year 1895 Age 20 yrs 11 months

Joined at Moncton N.B. Date FEB 4th 1916

Former trade or occupation CLERK

Permanent Marks or any peculiarity that will serve for future identification:— SCAR 3" LONG ANT

SURFACE (L) FOREARM, SCAR 4" LONG POST.

SURFACE LEFT FOREARM

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

Signature of Soldier (for identification purposes) K J Atkinson

Medical Report

Read carefully the instructions on last page of this form.

1. DISABILITY.

Table for Disability Groups (a), (b), and (c) with handwritten entries: ADHERENT SCARS LEFT FOREARM, ADHERENT MUSCLES LEFT FOREARM, NA.

2. CAUSE OF DISABILITY

Table for Cause of Disability with columns: (i) As to Group (a) above, (ii) As to Group (b) above, (iii) As to Group (c) above, Place of origin, Date of origin.

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? NA
(ii) As to Group (b) above? NA If yes, has Active Service aggravated it? NA
(iii) As to Group (c) above? NA If yes, has Active Service aggravated it? NA

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? NA
(iii) As to Group (c) above? NA

5. MEDICAL HISTORY. F.M.C. shows patient was admitted to No 18 G.H. 9/10/15 suffering from F&T wound forearm (L) with fracture of radius. M.H.S. shows patient was in Normanhurst Hosp., Battle 15/10/15 - 12/11/15 J.H. forearm with fractured radius: No 14 G.G.H. Entons 12/11/15 - 30/12/15 @ S.H. forearm (L): Valcartier Camp Hosp. 5/1/16 - 10/1/16 - @ Brearley. R.F.B. 5/7/17 - 14/7/17 - Sick, No 2 Mil. Hosp. Canterbury 26/8/17 - 7/9/17 - Deficiency M.C.H. Epsom 7/9/17 - 9/11/17 Concussion - Discharged D+
 X-ray report of 1/1/18 showed fracture radius at junction of upper & middle 1/3

6. PRESENT CONDITION

England 12/11/18: 832276
 surface of forearm
 on forearm, 4" below elbow
 90° and flexion
 movement of
 anasthetized
 Patient says
 attached to
 Heart - no

PPC R X Hosp. 30-1-19
 Exam. of marginally noted o/s discloses all nerves left arm intact except small Radial area anaesthesia. Muscles intact but stiffness and limitation movement elbow wrist and fingers due to extended period of immobilization following compound fracture radiuses, left.
 J. J. Shannon
 Capt. R.F.

7. OPERATION. (i) Was one performed? *yes* (ii) If so, state what. *compound fracture radiuses, left.*
 (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.

8. (i) Is there loss or decay of teeth attributable to Active Service? *no*
 (ii) If so, describe. *no*

9. DO YOU RECOMMEND:—
 (a) Fit for duty? (state category) *no*
 (b) Invalid to Canada? *yes*
 (c) Discharge from the Service as permanently unfit? *no*

Date of Report *27/1/19* 191... Station *Cooden*
 Signed *J. J. Shannon* Officer in medical charge of case.

I have satisfied myself of the general accuracy of the above Report, and concur therein *except
T. D. Burt (Officer i/c Hospital) Strike out one of these
 Dated at *Cooden* Station, on *28/1/19* 191...
 *Delete if inapplicable.

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

10. Is the disability fully described in Part I. (1)? *yes*
 If not, describe it.

11. Is the cause of the disability fully described in Part I. (2)? *yes*
 If not, describe it.

12. From the medical information now adduced, 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* }

13. 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, 5%, 10%, 15%, 20%, etc.) *n.a.*

14. THE DISABILITY DUE TO SERVICE.—(See Part I. (3). Aggravation on Active Service of a disability existing previous to joining is to be included in this estimate.)
 What part of the entire disability estimated next above (13) is due to causes arising during Active Service?
 (Estimate at none, 1/10, 2/10, 3/10, etc., or all.) *n.a.*

15. Permanency of the Disability due to Service estimated next above in (14). *n.a.*
 (i) Is it permanent? *n.a.*
 (ii) If not permanent, what is its probable minimum duration (in months)? *n.a.*

If an operation was advised and declined, do you consider the refusal to have been unreasonable? *not refused*

17. Can the former trade or occupation be resumed? *no*

18. REMARKS:—
mind report 28-1-19 P as trace Sugar

19. RECOMMENDATION:—
 (a) Fit for duty? (state category) *no*
 (b) Invalid to Canada? *yes*
 (c) Discharge from Service as permanently unfit? *no*

Date of Board *5-2-19*
 Station *Cooden*
 Signatures of the Board: *W. J. ...* President, *W. J. ...* Secretary

Approved: *[Signature]* A.D.M.S.
 Dated at *[Signature]* Station *Cooden* 191...
 for A.D.M.S., Canadians,
 OFFICE STANDING MEDICAL BOARD SEAFORD, SU.
 5 - FEB 1919
 APPROVED

5. MEDICAL HISTORY. F.M.C. shows patient was admitted to No 18 G.H. 9/10/15 suffering from F&T wound forearm (S) with fracture radius. M.H.S. shows patient was in Normanhurst Hosp., Battle 15/10/15 - 12/12/15 J.H. forearm with fractured radius: No 14 G.G.H. Eastbourne 12/12/15 - 30/12/15 & S.H. forearm (W): Valcartier Camp Hosp. 5/5/16 - 15/5/16 - 9 Breaches. R.F.B. 5/7/17 - 14/2/17 - Sick, No 2. Mil. Hosp. Canterbury 26/8/17 - 7/9/17 - Deficiency M.C.H. Epsom 7/9/17 - 9/10/17 Concussion - discharged 24 days report 7/10/17 showed fracture radius at junction of upper & middle third

6. PRESENT CONDITION. Total service 35, Can. 7, France 16 England 12 1/2: There is an adherent scar 3" long on ant. surface of forearm 2" below elbow joint tender on pressure, another scar 4" long on post. surface of forearm 2" below elbow joint: Forearm (S) can be extended to 90° and flexed to 45°, forearm fixed midway between pronation and supination & can not be moved either way. Left hand slightly redematous. Practically no movement of fingers or thumb, Back of Hand (D) anaesthetic palm & fingers & thumb hyperesthetic, Patient says hand is cold all the time attached report of Capt Gladwin O.R.E. Cooden Heart - normal Other systems - normal

7. OPERATION. (i.) Was one performed? *yes* (ii.) If so, state what. *wound exposed*
(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.

8. (i.) Is there loss or decay of teeth attributable to Active Service? *no*
(ii.) If so, describe. *no*

9. DO YOU RECOMMEND:—
(a) Fit for duty? (state category) *no*
(b) Invalid to Canada? *yes*
(c) Discharge from the Service as permanently unfit? *no*

Date of Report *27/1/19* 191... Station *Cooden*
Signed *J. E. Eyer Capt*
Officer in medical charge of case.

I have satisfied myself of the general accuracy of the above Report, and concur therein *except
J. D. B. M.D. (Officer i/c Hospital) Strike out one of these
Dated at *Cooden* Station, on *28/1/19* 191...
*Delete if inapplicable.

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

10. Is the disability fully described in Part I. (1)? *yes*
If not, describe it.
11. Is the cause of the disability fully described in Part I. (2)? *yes*
If not, describe it.
12. From the medical information now adduced, 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* }

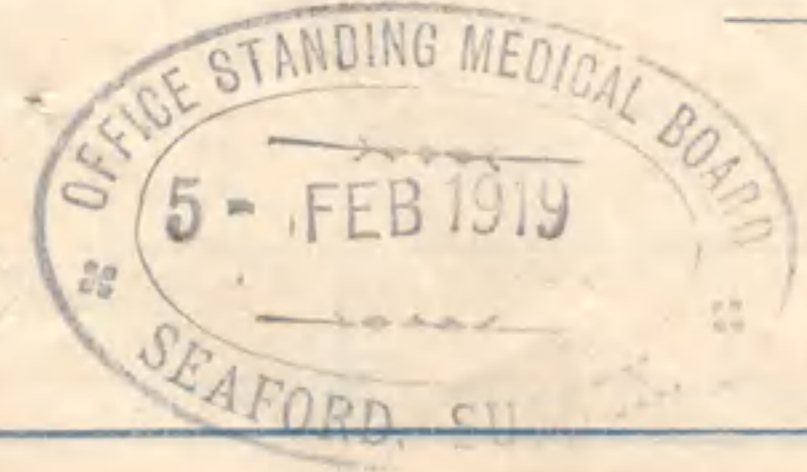
After Diets or Extras have been entered on the Diet Sheet, no further entry need be written in full opposite the date when any change is made: also on the day of...
*Insert here "Patient," "Dining Hall," or "Kitchen"

at extent is his capacity lessened at	
Active Service of a disability existing during Active Service?	
a.	<i>refused</i>
	<i>no</i>
	<i>ugar</i>

19. RECOMMENDATION:—
(a) Fit for duty? (state category) *no*
(b) Invalid to Canada? *yes*
(c) Discharge from Service as permanently unfit? *no*

Date of Board *5-2-19*
Station *Cooden*
Signatures of the Board
President
captaine
Major J. J. Eyer Capt

Approved *[Signature]* A.D.M.S.
Dated at *[Signature]* Station *Cooden*
for A.D.M.S., Canadians, 191...
Capt. C.A.M.C.



APPROVED

Can adduct thumb to touch inner side of ring finger. Electrical reaction normal. No nerve lesion. Has practically no grip in hand, Has many warts on dorsum of hands, which have been cauterized by Violet Ray.

Subjective:- Is unable to carry objects as he cannot close hand. When he walks arm swings about so that he has to carry it in pocket. Some numbness on radial side of hand.

(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 Fredericton, N. B. DATE July 24/1919.

1. (a) Unit D. D. # 7 (b) Regimental No. 832276 (c) Rank Pte.

(d) Surname ATKINSON (e) Christian name KIRK IRVING.

2. Age last birthday 21 Date of birth Feb. 2/1898.

3. Enlisted at Moncton, N. B. on Feb. 4/1916.

4. Personal description :-

(a) Height 5'-6" (b) Weight 125 (c) Complexion Fair
(stripped)

(d) Colour of hair L. Brown (e) Colour of eyes Grey (f) Identification marks 2 penniform

scars outer and inner borders upper and mid thirds left forearm.

5. Address after discharge (for the use of the Board of Pension Commissioners.) 166 Queen St., Moncton,
N. B. Next of kin Mrs. Margaret Atkinson, mother, same address.

6. Former trade or occupation Railway clerk.

	PERIODS	
	Years	Days
7. (a) Service	<u>3</u>	<u>170</u>
Canada.	Feb. 1916.	Sept. 1916.
England.	May 1919.	Present.
France.	Sept. 1916.	May - April 1917.
	Aug. 1917.	April 1918.
	Oct. 1918.	May 1919.
	May 1917.	Aug. 1917.
	April 1918.	Oct. 1918.

(b) Has he been Overseas? Yes.

8. Present disease or disability (use authorized nomenclature if possible). Partial loss function left up
upper extremity due to limitation of joints from G.S.W., C.O.A.S., France.

(a) Date of origin Oct. 7/1918. (b) Place of origin Cambrai.

(c) Cause* G.S.W.--shrapnel.
* (Here include original disease or injury)

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

Objective:- 2 Penniform scars 1 1/2" x 3/4" on the outer and inner borders
respectively of the upper and mid thirds of left forearm. Moderate amount
of tissue loss over these scars. The scar over the radial border slightly
sensitive. Motion in the elbow joint approximately 60 degrees. Joint is bent
in 45 degrees permanent flexion. No motion in supination and pronation.
Motion in the wrist. Extension 10 degrees. Flexion 45 degrees. There is no
motion in the interphalangeal joints. Motion in the metacarpophalangeal joint
approximately 40 degrees. Motion in the phalangeal joint of thumb 15 degrees.

[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.]

M. F. B. 227.

1598-6-17.
1772-39-117.

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.

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

G.S.W. left arm October 1918, with fracture of radius upper and mid thirds

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? On duty.

13. Was a Court of Inquiry held? No.

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

Yes..... No..... 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? No.

(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? Permanent.

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

Surgical, Massage, Gymnastics, etc. Hospitals France, England and Canada.

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

No.

19. Can the former trade or occupation be resumed? Yes--with restriction.

20. Recommendations That #832276 Pte. Kirk Irving Atkinson be discharged Medically unfit for General Service.

E. J. Robertson Lt Col 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, Kirk I. Atkinson, 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

K I Atkinson Pte 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.

Yes.

22. Is the soldier fit for

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

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).

That #832276 Pte. Kirk I. Atkinson be discharged Medically unfit for General Service.

J. H. Morrison President.
E. W. Lunney, Capt. Case Members.

STATION

DATE

APPROVED BY

DATE

APPROVED BY

DATE


Assistant Director of Medical Services.

Director-General of Medical Services.

This space to be for numbers.

Proceedings on Discharge.

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

No.	832276	
Rank	Private	
Surname	ATKINSON,	
Christian name	Kirk Irving	
<small>NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.</small>		
Corps (Squadron, Battery or Company)	DISTRICT DEPOT NO. 7.	
Date of discharge	July 29, 1919.	
Place of discharge	St. John, N.B.	
1. DESCRIPTION AT THE TIME OF DISCHARGE.		
Age	21 years 5 months.	Descriptive marks 
Height	5 feet 6 inches.	
Complexion	Fair	
Eyes	Grey	
Hair	L. Brown.	
Trade	Clerk.	
Intended place of residence <small>(To be given as fully as practicable.)</small>	Moncton, N.B.	
2. The above-named man is discharged in consequence of Medically Unfit for General Service.		
Authority for discharge.....B.O. 1420 & 1894 Para 4.....		
<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>		
3. Conduct and character while in the service have been, according to the records, etc.		
<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.)		

M. F. B. 218.
200M.-5-18.
H. Q. 1772-39-113.

Medical Documents
Forwarded to
S. C. H. or B. P. C.
ON
A-8-19

(OVER)

List of Discharge Documents.

Reg. Conduct Sheet, Militia form B. 263	Attestation Paper Militia Form W. 23
Squadron } Battery } Company }	or Particulars of Recruit " W. 133
Conduct Sheet, " B. 263a	Proceedings on Discharge " B. 218
or Field Conduct Sheet " W. 178	
Copies of Convictions, by C. P. in MS.	In the case of recruits who are rejected on final approval, the discharge documents will consist of
Med. Hist. Sheet, Militia form B. 313	(a) Proceedings on Discharge
Casualty Form " W. 54	(b) Attestation.
Medical Report for Invalid§ " B. 227	(c) Medical History Sheet.
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.

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.

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)..... St. John, N.B. *H. J. Atkinson* (Signature of Soldier.)

(Date)..... July 29, 1919. *Chl S. Dave* (Signature of Witness.)

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

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

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

.....(Signature of Soldier.)

10. Statement of Service.

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

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

11. Confirmation of Discharge.

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

(Place)..... ST. JOHN, N.B.

(Signature) *M. Munnell*

(Date)..... JULY 29, 1919.

MAJOR,
O.C. DISTRICT DEPOT NO. 7.

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.)

None.

H. J. Atkinson

Moncton

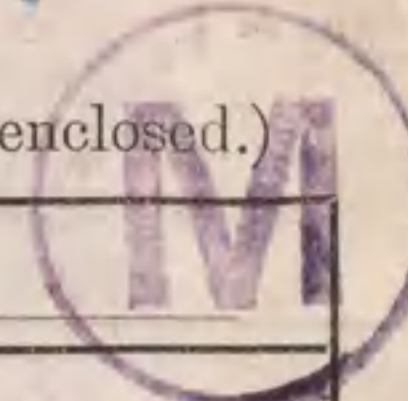
This space to be left blank for the Chelsea Number.

514

A-170

Proceedings on Discharge.

7



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

No. 832276 Army Rank Private

Name Atkinson, Dick Irving
(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)

Corps Saskatchewan Regiment

Battalion, Battery, Company, Depôt, &c. 145th Bn 4th Co 232th Bn 128th Bn 28th Bn
(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.)

Date of discharge _____

Place of discharge Canada

1. Description at the time of discharge.

Description at the time of discharge.		Descriptive marks.
Age _____ years _____ months		
Height _____ feet _____ inches		
Chest measurement { girth when fully expanded _____ ins. range of expansion _____ ins.		
Complexion <u>Medium</u>		
Eyes <u>Grey</u>		
Hair <u>Brown</u>		
Trade <u>Black</u>		
Intended place of residence _____		
(To be given as fully as practicable)		

(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.)

2. The above-named man is discharged in consequence of being no longer physically fit for war service.
Para 392, Sec. 16, K. R. - O 1912
(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.)

3. Military character:—

4. Character awarded in accordance with King's Regulations:—

To be filled in on the soldier quitting the Colours.

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. [Signature]

Army Form B. 2088 has been issued to*

LIST OF DISCHARGE DOCUMENTS.

1. Proceedings on discharge. (Army Form B. 268.)
2. Proceedings on transfer to reserve (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 depôt 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, despatch, 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.

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 Officer, BATTN. CANADIANS, Regiment.
Princess Patricia's Canadian Red Cross Hospital,
GOLDEN BEACH, BRITISH COLUMBIA.

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.)

0210
24

M.D. No 7

N.B.M.H

166 Queen St., Moncton N.B.

AUDITOR PAYMASTER

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

M. OR S.

REGT. No

832276

RANK

Pte

NAME (IN FULL)

Atkinson

K. I.

Form with fields: NEXT OF KIN, ADDRESS, RELATIONSHIP, PARTICULARS, EFFECTIVE DATE, AUTHORITY, IS SEPARATION ALLOWANCE PAID?, DATE EFFECTIVE, TO WHOM PAID, ADDRESS, RELATIONSHIP.

Form with fields: ORIGINAL UNIT C.E.F., PLACE OF ATTESTATION, TRANSFERRED TO, DATE, AUTHORITY, DATE OF ATTESTATION, TRANSFERRED TO, DATE, AUTHORITY, ASSIGNED PAY \$, DATE EFFECTIVE, PAYABLE TO, ADDRESS, RELATIONSHIP, STOP PAYMENT FORM, DISCHARGED, PLACE, DATE, REASON, AUTHORITY, IF ENTITLED TO POST DISCHARGE PAY.

Yes. see a.p.

4-2-16

20.00

1-7-19

Mrs. Margaret Atkinson (Mother) 166 Queen St., Moncton, N.B.

St. John, N.B. 29-7-19. Demob.

D.O. 2112

BALANCE FROM PREVIOUS ACCOUNT

Main table with columns: MONTH, NO. OF DAYS, RATE, AMOUNT, OTHER CREDITS, TOTAL CREDITS, ACQUITTANCE ROLLS, CASH PAYMENTS, ASSIGNED PAY, REGIMENTAL CHARGES, OTHER CHARGES, TOTAL DEBITS, BALANCE DEBIT, BALANCE CREDIT, PARTICULARS OR REMARKS.

WAR SERVICE GRATUITY.

NON-EFFECTIVE

* Strike out whichever inapplicable.

ASSIGNED PAY.	ENGLAND OR CANADA CANADA	SEPARATION ALLOWANCE.	ENGLAND OR CANADA.
EFFECTIVE DATE: 1/2/17		EFFECTIVE DATE: 1-3-19	
AMOUNT: 20 ⁰⁰		AMOUNT: -	
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.	
Mrs Margaret Atkinson, Mother 166 Queen St. Moncton, Canada			
PARTICULARS OF RANK OR APPOINTMENT			
AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT	
		7th	
UNIT AND TRANSFERS			
ORIGINAL UNIT: -145 Bn.			
DATE ACCOUNT FIRST OPENED: -1-10-16			
AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T 5 F D	UNIT TRANSFERRED TO
	F 1/2/18	25/4/18	SRW 28 th Bn

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
30/1/19	5292	Gooden	973	S.F. 17-2-19 to 27-2-19 (10 days)			730
14/2/19	6786	" Feb	4867				
28/1/18	A.M. 582	Eastbourne	426			L.P.C Bal Co.	4473
14/11/18	✓	✓	170				
			6426				

DAILY RATES OF PAY AND ALLOWANCES

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

PARTICULARS OF RENDERING NON-EFFECTIVE: *Transferred to Canada 28-2-19 Ref Gooden List A30 18-2-19*

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
March 1918	Belvedere								21 51		
Apr.	P.P.	33		Can A/P				20			
				AR 232 24/4/18 2 nd Div Waig	3 57						
				DR. AR 5/4/18 15 th Reg	9 73						
		33			13 30			20	21 4		
May	P.P.	34	10	AR 365 11/5 2 nd Div Waig	4 46						
				Can A/P				20			
				" 189190 23/5 28 th Bn	3 57				30 85		
		34	10		8 03			20	27 28		
June	P.P.	33		a.p.				20			
				AR 252 11/6 28 th Bn	3 57						
		33			3 57			20	36 71		
July	P.P.	34	10	a.p.				20			
				AR 313 1/7 28 th Bn	4 46						
				" 379 9/7 "	3 57						
				" 392 24/7 "	11 16				38 32		
		34	10		12 49			20			
Aug	P.P.	34	10	a.p.				20	52 42		
		34	10					20			
Sept	✓	33		a.p.				20	65 42		
				AR 511 30/8 28 th Bn	7 14						
				" 961 15/9 "	3 57						
				" 1186 26/9 "	3 57				51 14		
		33			14 28			20			

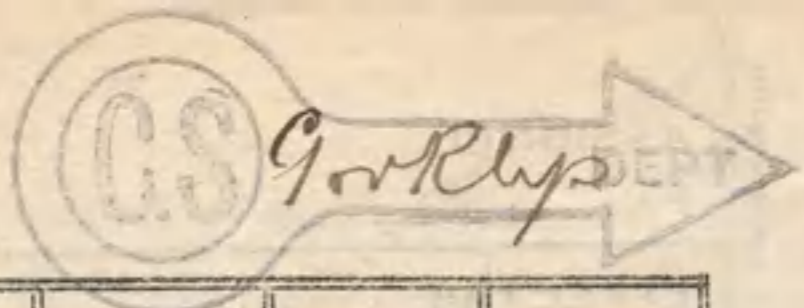
19/7 Canada Sea

Beckhill to M.D.K. Beckhill to M.D.K.

8/25

8/25

8/25



NUMBER 832 276 RANK

NAME ATKINSON, Kirk J.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
9/18	Balance fwd								5114		
Oct	P. P. A	3410		Cash				20	6524		agreed
		3410						20			
Nov	✓	33						20			
				A-101059 26/10 Carthage	85						
Dec	✓	3410		Cash				20			
				at 3558 19/12 ✓	487						
Jan	✓	3410		Cash				20	10072		
		10120			572			60			
				at 3129 6/1 - Bexhill	973						
				A m 582 28/11 Carthage	486						
				✓ 14/12 ✓	170						
				at 5272 30/1 Bexhill	973						
Feb	P.P.	3080		Cash				20	8610		
				at 6786 14/1 - Bexhill	4867						
				✓ Sick Leave 7/19 - 27/19 - 30 38	730				4473		
				✓ 9226 13/3 ✓ End	973				3500		
		3810			8382			20			
				✓ 570 9/4 Bexhill End	973						
				✓ 9934 27/3 ✓	1947						
				✓ 1209 22/4 Kirkdal ✓	487						
				✓ 2305 6/5 ✓	3407						
				✓ 3858 20/5 ✓	487				394		
					3894				1267		
					973						
					4867						

S of Canada 23/19. List 501

Date of Enlistment (Led 16 conts)

MILITIA AND DEFENCE

Date of Assignment

1-3-16

Separation and Assigned Pay Branch

A

4786

Oct 1-16

~~Feb 1/17~~

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

20.	25. 1-12-17	30. 1/18
-----	----------------	-------------

Pb. 325 PC 2753
M.O. 4800

RATE OF ASSIGNMENT

20			
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PARTICULARS OF SEPARATION ALLOWANCE

No. 832276
 Rank Pte Promoted J Reverted Discharge
 Soldier's Name Kirk, J. Atkinson
 Battalion 145th Bataw CEF
 Beneficiary Mrs. Margaret Atkinson
 Relationship Mother
 Address

PARTICULARS OF ASSIGNMENT

Name Margaret Atkinson
 Address 166 Queen St Moncton, N.B.
 Change of Address
 1
 2
 3
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total
Sept 30-17		380	240	620
Oct	D 51311	20	20	40
Nov.	C 53094	20	20	40
Dec	B 59113	20	20	40
1918 Jan 1/18	F 60421	30	20	50
Feb.	B 94534	25	20	45
March	A 90872	25	20	45
Apr	I 7598	25	20	45
May	C 8957	25	20	45
June	B 17342	25	20	45
July	Y 30353	25	20	45
Aug	A 32916	25	20	45
Sept	A 39721	25	20	45
OCT	A 46348	25	20	45
NOV	A 54432	25	20	45
Dec	A 63726	45	20	65
Jan	B 73653	30	20	50
Feb	A 80353	30	20	50
Mar	D 89102	30	20	50
APR	B 3086	30	20	50
MAY	A 7751	30	20	50
JUN	A 16358	30	20	50
		945	660	

REMARKS 0586-K-1

AUDITED.

A/c Closed 30-6-19
 Ret'd per...
 Date 3-6-19 M.F.W. 187
 Clerk... M.F.W. 187

M. F. W. 128
 400M. - 6-17-1772-39-1141
 L. L. 22320 - M. & D. 75953.