C.E.F. REGIMENTAL DOCUMENTS

NAME BARRETT, FRANCIS ALLISON REGT. No. 488966 UNIT 63 REG. H. Q. FILE No. 0057

CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
ATTESTATION PAPER (M.F.W. 23, 133 or 51)					DEATH
CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					CATEGORY H
TRAINING HISTORY SHEET (M.F.W. 113)					
FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
REGT. CONDUCT SHEET (M.B.W. 263 or A.F.B. 120)					
COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 173)					DISCHARGE
DENTAL HISTORY SHEET (M.F.B. 465)					CATEGORY MED.UNFIT
MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					
MEDICAL EXAMINATION (M.F.W. 129)					
TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
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LAST PAY CERTIFICATE (M.F.W. 44)					
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PARTICULARS OF CHARACTER (A.F.W. 3226)					
COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
CARDS					
PAY-SHEETS					

H

Deceased 24-11-60

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

Original

ATTESTATION PAPER.

No. 488966

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

	(ANSWERS.)
1. What is your surname?	Barrett
1a. What are your Christian names?	Francis Allison
1b. What is your present address?	Beaver Bank N.S.
2. In what Town, Township or Parish, and in what Country were you born?	Beaver Bank N.S.
3. What is the name of your next-of kin?	Herbert Barrett
4. What is the address of your next-of-kin?	Beaver Bank Hfx. Co. N.S.
4a. What is the relationship of your next-of-kin?	Father
5. What is the date of your birth?	15th August 1894
6. What is your Trade or Calling?	Farmer
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?	yes
10. Have you ever served in any Military Force? If so, state particulars of former Service.	yes 2 months 63rd Regt. Hfx. Rifles
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, Francis A. Barrett, 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.

1st June 16 Francis Barrett (Signature of Recruit)

Date ~~23rd May~~ 1916. C. L. McClare (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Francis A. Barrett, 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.

1st June 16 F. Barrett (Signature of Recruit)

Date ~~23rd May~~ 1916. C. L. McClare (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 Halifax this 2nd day of June 1916.

(Signature of Justice)

M. F. W. 23.
600M.—2-16.
H. Q. 1772-39-841.

Description of Francis A. Barrett on Enlistment.

Apparent Age 21 years — months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height ..... 5 ft. 9 ins.

Chest measurement { Girth when fully expanded ..... 36 ins. / Range of expansion .... 3 ins.

Complexion ..... Light

Eyes ..... Blue

Hair ..... Light

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

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

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

CERTIFICATE OF MEDICAL EXAMINATION.

I have examined the above-named Recruit and find that he does not present any of the causes of rejection specified in the Regulations for Army Medical Services.

He can see at the required distance with either eye; his heart and lungs are healthy; he has the free use of his joints and limbs, and he declares that he is not subject to fits of any description.

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

Date 2 3 5 1916. B Y Johnson Capt

Place McNabs Halifax NS ..... 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.

Francis A. Barrett ..... 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.

Lt Col ..... (Signature of Officer)

Date 1 June 1916.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 488966 (Rank) Private

Name (in full) Francis Allison Barrett enlisted in

the 63rd Regiment, Halifax Rifles C.D. Draft

CANADIAN EXPEDITIONARY FORCE at Halifax, N.S. on the 1st

day of June 1916

HE served in France

and is now discharged from the service by reason of Medically unfit.

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

Age 24 years 6 months

Height 5 feet 10 inches

Complexion Light

Eyes Blue

Hair Light

Marks or Scars Shrapnel wound. right foot. Two inch scar. right shoulder

F A Barrett
Signature of Soldier

C W MacAlooney CAPTAIN.
O. C. DISCHARGE SECTION No. 6 DISTRICT DEPOT.
Issuing Officer

Rank

Appointment

Date of Discharge March 4, 1919

Signed at Halifax N.S. this 27th day of February 1919

in Military District No. 6 Discharge

File Reference No.

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

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

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

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

Unit .....

Address on Discharge .....

Character and Conduct .....

.....

Former Occupation .....

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

.....

Medals and Decorations .....

.....

Remarks .....

.....

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

.....

Name of Officer

.....

Rank

.....

Appointment

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

Uniform not to be worn after **Date of** Discharge, unless authority has first been obtained from G. O. C. District.

88966 Pt.

Barrett. J. A.

24th Bn.

Walls OK

Halifax

M. D - 6

Gsw R foot

father

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch B

OVERSEAS CONTINGENTS

Date of Assignment

2353 Aug. 1. 1916

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

20			

PARTICULARS OF SEPARATION ALLOWANCE

No. 488966

Rank Pte. Promoted Reverted Discharge

Soldier's Name Frank A. Barrett.

Battalion 63 Regt. Re. — Inf.

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name Florence Barrett

Address Beaver Bank

Change of Address Halifax, N.S.

1

2

3

4

	Date	Cheque No.		Amount S/A	Amount A/P	Total		
Sept	30/17				280	280		
	Oct.	K	47903		20	20		
	Nov.	C	54341		20	20		
	Dec	D	57839		20	20	Br.	
	Jan	V	65286.		20	20	EB	D
	Feb	B	97260		20	20		
	Mar	A	93590		20	20	✓	
	April	J	8335		20	20	R	
	May	C	11745		20	20	R	
	JUN	B	20026		20	20		
	IUL	Y	33085		20	20		
	AUG	B	31374		20	20		
W.B.	SEP	B	36164		20	20		
	Oct	A	49287		20	20		
	Nov.	A	57371		20	20		
	Dec.	B	67364		20	20		
					580	580		

REMARKS 924-S.-14.

A/c Closed Open.

Ret'd per Khyber.

Date 9-10-18 F.X. 11-10-18

Clerk Saver.

A/c transferred to M D # 6 as from 31-12-18 auth. H.Q. 593-I-62 23-11-18. M.R.O.

K.L. 24/12/18

M. F. W. 128
400M.—6-17—1772-39-1141
L. L. 22320—M. & D. 7693.

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank — Promoted — Reverted — Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS

M. F. W. 128
400M.—6-17—1772-38-141
L. L. 22320—M. & D. 1498.

CONSOLIDATED ACCOUNT

C.5.

CASE HISTORY SHEET.

CAMP HILL HOSPITAL
HALIFAX

Camp Hill Hospital. Halifax Station.

No. 488466 Rank Pvt. Name Barrett J.A. Age 24

Unit 24 Batt. Completed years of service { Where and how long }

Date of admission 24-10-18 Date of discharge FEB 22 1919

Diagnosis G.S.W. Rt. Foot Place of origin France 11/4/18

CONDITION ON ADMISSION AND PROGRESS OF CASE. Full wounded & general condition good. Wounded in August 1918 by shrapnel & Rifle in France. Was admitted to Military Hospital, Boulogne & transferred to Endell Street London. Fractured 4th Metatarsal bone. Had operation performed & wound healed. Had also had gunshot wound of left thigh. Discharged from Hospital on 3/12/18 & granted furlough. Returned to Hospital on 3/1/19. Wound discharging from that date until about Oct 10th. Scar 2" long, two sinuses. Result G.S.W. No disability. X-ray reveals scar about 1" above joint to internal malleolus. Also 2½" in length adherent to underlying tissues and no limitation of movement at ankle joint. Ankylosis of toes. Metatarsal joints of foot is quite fair. Foot is rather cold and circulation poor. Only complains of pains around foot & prolonged exertion.

5-2-19. Patient making fair progress. Receiving Massage and electrical treatment to right foot. Scar below internal malleolus not adherent. Can bear weight well on right foot when foot on floor but cannot bear weight on body on toes of right foot

Negative

17-2-19 Board Written. Urine report negative. No I/C Hydrotherapy reports further treatment in that dept but Hospital Cat E

TREATMENT 22-2-19. Discharged from Hospital Cat E

(Especially any specific or special form.) Massage Gymnastic exercises.

CONDITION ON DISCHARGE, Improved. Cat E

(and disposal made of case.)

Date 22-2-19

F. H. Ennis Major
Medical Officer i/c case.

M. F. B. 313a.
200M.—5-18.
1772-39-439.

7701

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

64

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 Francis Allison 2. Surname Barrett

3. Rank Pte 4. Original Unit 63rd 5. Reg. No. 488966

6. Address, in full, to which future payments of gratuity are to be forwarded Beaver Bank Falfax Co. N.S.

7. Date of enlistment in the C.E.F. 1-6-16

8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge Not applicable

9. Relationship of such dependent do

10. Address, in full, of such dependent do

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: 3-11-16 to 14-2-17 (24th Bn)

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 No

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 63rd H. Rifles (Can.) 23rd Res. (Eng.) 24th Bn (France) 23rd Res (Eng) 24th Bn (France) Hosp (Eng) to

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

M.F.W. 2595.
1772—39—1389.
1160—D.P.—250M-12-18.

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? A 76052 B.C. 48341.

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? ..... No .....

24. Are you now serving in the C.E.F. ..... If not, give:—(a) Date of discharge ..... 4-3-19 ..... (b) Reason for discharge Med. unfit .....

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 .....
24th Bn France 1-11-16 to 14-2-17

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? ..... not applicable .....

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: F. A. Barrett

Place of Residence: Beaver Bank Halifax Co. N.S.

Declared before me at: Halifax N.S.

This 27th day of February 19 19.

P. L. Chipman

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

A Commissioner of the Supreme Court in and for the Province of Nova Scotia.

POST DISCHARGE PAY.

Date paid	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
9c Clear	Sa Nil.		153 days	3.50 00
70 00 1st Payment War S. Gratuity				

W. W. Montgomerie

Certified Correct.

District Paymaster.

MAR 4 1919

Forms
I. 1237
12

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
M2 42592	488966	Pte	Barrett	G H.

Year	Unit.	Age.	Service.
1918	24 Batt.	23	25/12 5/12

Station and Date.

Disease G S W. R foot & Rt Shoulder

OCCUPATION Farmer

ENLISTED Halifax March 1916.

ENGLAND July 1916

FRANCE Oct 1916

WOUNDED April 11 - 1918

HOSPITALS 3rd Dn. Field

No. 4 Gen.

No. 4 Canadian Gen. Hospital.

OPERATIONS

Foot & shoulder inv.
al. C.C.S. 11 - 4 - 18

REMARKS

{M. F.C.} R foot?
Shrapnel Wd. Cleaned
& B.I.P.
Wd. Single entry
back Rt. Shoulder Track
through scapula to
Axilla of
side No sucking.
F.B. not found B.I.P.
11 Stoty 12-4-18.
Wds healthy. No pyrexia

SUMMARY OF C.M.C. & M.H.S.

PRESENT CONDITION. Pat. feels well

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

Wt. W 6604/M 2870—1,500,000—8/17—H. & Sp. (10938). Forms/I. 1237/12. (E239)

[P.T.O.

Station and Date.	
	Large round 3" long Back & downward 2" from Acromion of Rt Scapula Sinus about 2" deep extending to round Medial border of scapula T & T. D. W. Rt Foot Large entrance 2½" x 2" on Palmar dorsum of Foot one proximal ends of outer metatarsals. Small round exit inner & lower portion of heal. Drains tubes — both wounds
	Lungs. Nurse coughed up blood. Has no cough. Heart. No Murmurs found. A. J. Wadsallen Capt.
May 14.	Shoulder wd. healed. Dry dressing
	Foot wd. filling in nicely A. J. W.
May 22.	Foot slightly swollen X Ray shows Necrosis of bone. Requests.
May 23.	Dead bone removed all of 4th metarsal as necrosed & small piece of tarsal bone. also removed. Drain portion Carrel tubes inserted. Incision 1½" long on 4th metatarsal A. J. Wadsallen

ORIGINAL

ORIGINAL. Original

MEDICAL HISTORY SHEET.

Surname Barrett *Christian Name* Francis Allison

Examined { on 23 day of May 1916
at Mrs Nutt's, Halifax, N.S.

Birthplace { City or Town Beaver Bank
County Halifax Co., Nova Scotia

Apparent age 21

Trade or occupation Farmer

Height 5 Feet 9 Inches.

Weight 160 Lbs.

Chest measurement { Minimum 33 inches.
Maximum expansion 36 inches.

Physical development Good

Small-Pox Marks None

Vaccination Marks { Arm Right. — Left. —
Number —

When Vaccinated last —

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

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

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

Date.	Fit or Unfit.	Examined for Re-engagement.
		7 MAR 1917 M.O.
		18 APR 1918 M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date.	Result.	Vaccinations.
3-7-16		V. L. Cotton M.O.
		M.O.
		M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.
31.5.16		T. J. Byrne Capt M.O.
26-6-16		T. J. Byrne Capt M.O.
15/4/17	TAB 2	M.O.

Enlisted on 23rd day of May June 1916 at Halifax, N.S.

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	63rd Regt. Re-Inf. C.E.F.	488966	Good	1st June 23 May, 1916
Transferred to	24th Bn.			
	23rd RESERVE BATTN C.E.F.			
	24th Bn			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
#4 C.G.H Basingstoke	July 5/18.	S.N. Rt. Foot.	J to C. Fred G. Watts Major RAMC
"	13/2/19	Imp Fractured right foot Flat Feet E	G. J. McNally Major

CANADIAN

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.

M. F. B. 313.

400M.—1-16.
H. Q. 1772-39-439.

J.Mc

Surname Barrett Christian Name Francis Reuben

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital. Day	Month	Year	Dates of Discharge from Hospital. Day	Month	Year	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.
1st LONDON GENERAL HOSPITAL		28	2	17	26	3	17	I.C.T Rt foot	26	—	Cuthland
GROVE MILITARY HOSPITAL No. Date TOOTING GROVE, S.W.		26	3	17.	30	5	17.	"	65.	Healed Disch'd & Com. Conv. H. Bromley	Mulcaster MAJOR R.A.M.C (T) REGISTRAR. GROVE MILITARY HOSPITAL TOOTING GROVE, S.W.
CANADIAN CONVALESCENT HOSPITAL BROMLEY, KENT,		30	5	17	4	6	17	Frost Bite		Cured Class D;	W. Hill Major CAMC
No. 4 Canadian Gen. Hospital, Basingstoke.		16.	4	18.				L. W. Rt. Shoulder & Rt. Foot		Duplicate Medical History Sheet posted to hire 7.5. Shrap. pierced Rt. scapula & fract. Rib No lung lesion. Wds healed. T. + T. Shrap. wd foot. Exit 3" long, on outer side foot. 4 Th. metatarsal & parts of outer cuneals in debil. now found necrosed & removed Discharging sinus present. Splint normal	J. Macaulay Capt

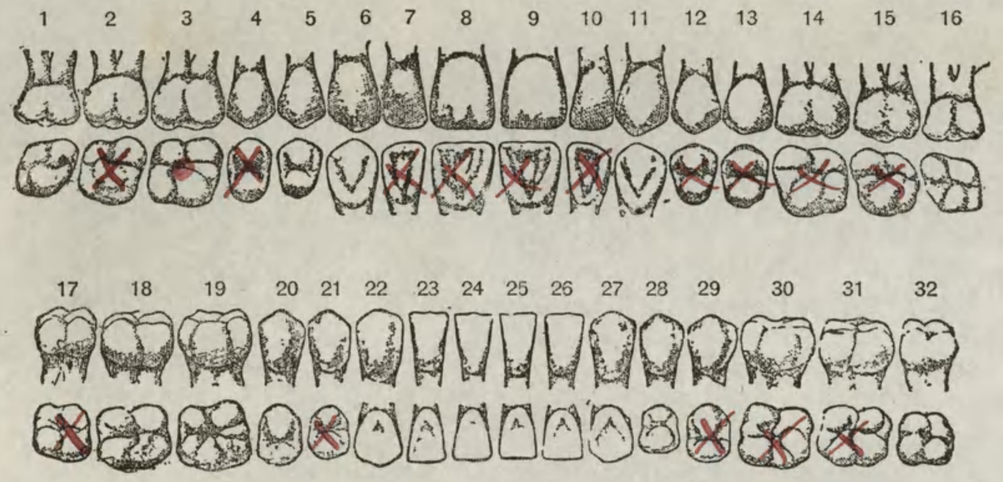
EMBKD SEPT 24 1918
DISEMBKD OCT 7 1918

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS DISTRICT 6

NAME OF SOLDIER Barnett Sydney No. 42[illegible]

REGIMENT [illegible] RANK [illegible]



INSTRUCTIONS

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

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

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

	Date	Amalgam	Temporary Filling (a) G.P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhoea	Synthetic Porcelain	Extracting	DENTURES U	DENTURES L	DENTURES P	Gold Clasp	Gold Filling	CROWNS Gold	CROWNS Porcelain	Bridge Work	Prophylaxis	OPERATOR	Military District	REMARKS
Condition on first Examination	7-11-18	3								1.2.4.7.8. 9.10.12. 13.14.15. 17.21.29. 30.31										Capt. Casson	6	Cavities / Extractions
	23-1-19																			Capt. Casson	6	
Returned																						Complete

M. [illegible] 465
15[illegible] 10-18
1772-39-950

(9) Is your Father alive ? Yes

If so, state name and address J. Barrett, Beaver Bank N.S.

(10) Is your Mother alive ? Yes

If so, state name and address Florence Barrett, Beaver Bank N.S.

(11) If your Mother is a widow No

Are you her sole support, or not ?

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

No

(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.

No

(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.

No

(15) Are you insured ? Yes

If so, in what Company ? Greatwest Life Ins. Co.

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.

A. Wright LIEUT.
Officer i/c Records 63rd. Reg't. Re-inf. C. E. F.
Officer Commanding.

Date 26.6.16

To be made out in duplicate. H.Q. 54-21-23-53

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 63rd Regt. Reinforcements C.E.F.

(2) Regimental Number 488966

(3) Full Name of Soldier Barrett, Francis Allison

(4) Place of Birth Beaver Bank N.S.

(5) Are you married, or not ? No

(6) If married, state,
(a) Full name of your wife No

(b) Present Postal Address

(7) Are you a widower ? No

(8) Have you any children ? No

If so, give number of boys and girls

Also their names and ages

M. F. W. 67
20 M.—2-16
1772-39-254

(SEE OTHER SIDE.)

Forms I. 1237/11

E.F.C.D.LEY.KENT.

1st LONDON GENERAL HOSPITAL R.A.M.C. (T.F.)

Army Form I. 1237.

MEDICAL CASE SHEET.*

4 B.

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
1 CE 33	488968	Pte	Barrett	Francis a
Year: 1917	Unit: 24 Canadians		Age: 21 6/12	Service: 1

Station and Date.	Disease
28 FEB 1917	I.C.T. Foot. R.
	14.2.17 Feet frozen - Necrosis of distal portion of II nd Toe of Rt foot.
26.3.17	To The Grove Mil. H. Tooting
	C.W.B. Reed
28 March	Both extent and exercise and clothing. A Lafthornthwaite
29 MAR 1917	Rep. A.L.H.
5 APR 1917	Improving. A.L.H.
12 APR 1917	2 per cent Lotion in addition to other treatment. A.L.H.
	L.H.D.
16 April	Start standard treatment. A.L.H.
23 APR 1917	Must ~~A.F.I and To~~. Circulation very bad A.L.H.
30 April.	L.H.D and V.E. Rep medicine A.L.H.
7 MAY 1917	Nearly well A.L.H.
14 May 17	Not healed Syr. Phos Co A.L.H.
21 May 17	Almost healed 104 days A.L.H.
28 MAY 1917	All healed Rec. for discharge. A.L.H.
	29/5 To Canadian Conv. 31/5
	Ev-Sidcup

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

(23205) Wt.W 4234—M 627. 1,000,000, 8/16. C.F.&S. Forms/I. 1237/11.

P.T.O.

Station and Date.	

L- L. Joh[illegible]—M. & D. 6574.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12.
50m.—4-16.
H. Q. 1772-39-819.

To Whom Florence Barrett

Address Beaver Bank.
Halifax
N. S.

Rate $20.00 AUG 1 1916

By Whom Assigned Barrett. Frank. A.

Regtl. No. 488966

Rank Pte.

Corps 63 Rgt. Re-Inf.

PAYMENTS

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

CONSOLIDATED 5 ACCOUNT

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a.
50m.—6-16.
1772—39—819.

Sheet No. 2. Florence Barrett.

Name of Soldier Barrett. Frank A.

488966 Pte 63 Rgt.

L. L. Job 4503.—Req. 6832.

Month.	Year.	Cheque No.	Amt.		Remarks.
April	1916			20 00/xx	AUG 1 1916
May					
June					
July		[illegible]	20		
Aug.		P 17155	20		
Sept.		P 21768	20		
Oct.		O 24524	20		
Nov.		C 33841	20		
Dec.		Z 37619	20		
Jan.	1917	Z 42925	20		20
Feb.		Z 49484	20		20
March		O 120	20		20.
April		Y 6706	20		
May		C 12542	20		20.
June		Z 22090	20		
July		[illegible]82	20		
Aug.		C 33654	20		
Sept.		K 47903	20		280
Oct.					
Nov.					
Dec.					
Jan.	1918				
Feb.					
March					
April					
May					
June					
July					

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.				

R—122

ET.

Rank ✓ Name BARRETT, Francis Allison ✓ Reg'l No. 488966 ✓

Unit Dft 63rd Regt, If in perm. Corps, What Unit? } Married or Single Single. ✓

Place and Date of Enlistment Halifax, June 1st 1916. ✓ Place of Birth Beaver Bank. ✓

Name and Address, Next-of-Kin Herbert Barrett. ✓ N.S, ✓

Beaver Bank. Halifax Co., Nova Scotia. ✓ Canada. Relationship Father. ✓

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

N/E. R.B No 14153
File R.L.
Calgary M.U. Barr

H. W. & V., Ld.—7165-16.

Report. Date.	Report. From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS. Taken from Official Documents.
6.		{Arrived in England. Taken on strength.}			
8.8.16	O.C. 23rd Bn		Witley Delgate	25.7.16	Pt. II 187 (A.O. 4137)
27.10.16	" " "	S.O.S. to 24th Bn. O'seas	"	27.10.16	" 266
10.11.16	" 24th Bn.	Taken on Strength	Field	3.11.16	" 74
1-3-17	" "	Adm. No 1 Can. Gen Hosp	Etaples	20-2-17	CL B/454 ICT R Foot
6.3.17	" "	Sick to fd. to C.C.C. Shoreham on Sea.	Field	28.2.17	RTL 20
6-3-17	" "	Adm. 1st London Gen Hosp	Camberwell	28-2-17	CL B/309 "
30.3.17	"	Fd. Military Hosp.	Tooting	16.3.17	CL. B 328. ICT R. Foot.
23.3.17	1st Can R.D.	T.O.S. from C.C.C.	Shoreham.	10.3.17	Part O. 16
4-6-17	24th Bn.	Trans to Canadian Hospital	Bromley.	31.5.17	CL B 380 — —

A.F.B. 103 CHECKED 30 OCT. 1916

Report. Date.	Report. From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
4.6.17	3 bbD.	Attached for P.T.	St Leonards	4.6.17	Pt II O 92. 1st Inc Pt II O 82
19.6.17	24 Bn	Discharged bam bon Hosp.	Bromley	4.6.17	S.L.B 393. ICT R Foot.
26.7.17	23 Res.	T.O.S. from 1st Inc from CCD.	Shorncliffe	26.7.17	Pt II O 204 1st Inc Pt II O 126 d 28.7.17
16.11.17	—.—	S.O.S. to 24 Bn O/Seas	Pte Field	15.11.17	Pt II O 317. 24 Bn Pt II O 106 d 28.11.17
18.4.18	O.R.	Wounded	"	12.4.18	C.L.A. #191
23.4.18	24 Bn	Wounded reposted to O.R.D.	"	15.4.18	DO #39 DO #100 D 24/4/18 a20
1.10.18	O R	Invalided to Canada ex 4 Can Gen Hosp	Basing Hosp	24.9.18	C.L.B 333.
4.10.18	—.—	B.O.S. to C.E.F. in Canada for further med treatment.	Bsnott	24.9.18	D.O. 241

A.F.B.10 CHECKED 20 NOV 1917

(2)

Army Form B. 103. Regimental Number 488966.

Casualty Form—Active Service.

Regiment or Corps 2nd Canadian Battalion

Rank Pte Surname Barrett Christian Name Francis Allison

Religion ..... Age on Enlistment ....., years ..... months

Enlisted (a) 1.6.16 Terms of Service (a) D of W Service reckons from (a) 1.6.16

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

Extended { ..... / ..... } Re-engaged { ..... / ..... } Qualification (b) Farmer

or Corps Trade and rate .....

Occupation ....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			
12.4.18	11 Stat.	Edmt. Tod R. Stretch R. Clark R	11 Stat	12.4.18	W303H E34H49
11.4.18	6 CFA	" " " " " "	6 CFA	11.4.18	} 026 E3565
11.4.18	" "	" " " " " "	CCS.	11.4.18	
15.4.18	11 Stat.	" " " " " " Wounded	} A	15.4.18	W3083 - 3741
		To 1st Can Reg. Depot Bramshott.	} David		926.39 d-23 4/18

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

24-4-18	O.R.D.	TOS from 24th Bn	B'Stat	15.4.18.	100

Lieut.
for Lieut.-Colonel i/c Records

INVALIDED TO CANADA FOR FURTHER MEDICAL TREATMENT

HOSPITAL REPRESENTATIVE

HOSPITAL REPRESENTATIVE No. 4 CAN. GEN. HOSP. 19 SEP 1918 BASINGSTOKE, HANTS

(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.

W. 5527—M2093 1000m 7/17 (25686) C. P. & S., Ltd. Forms B./103 E/1555. [P.T.O.

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				
SEP 24 1918	H.M.T. "K" SAILING NO. 64	Embarked LONDON Disembarked QUEBEC OCT -7-1918.		SEP 24 1918	
24-9-18 7-10-18	Osias	TAKEN ON STRENGTH NO. 6 DISTRICT DEPOT Posted to Pay Co	Halifax	20183	CAPTAIN ADJUTANT NO. 6 DISTRICT DEPOT
22-2-19.	Trans. to Casualty Coy	Halifax	22/2/19	20183	CAPTAIN O. C. HOSPITAL SECTION No. 6 DISTRICT DEPOT
4.3.19	DISCHARGED at Halifax, N.S.	D.O. 62 for			LIEUT O.C. DISCHARGE SECTION NO. 6 DISTRICT DEPOT

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

M. F. W. 54. (A. F. B. 103.)
250M.—1-18.
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps 63rd (Canadian Militia)

Regimental No. 488966 Rank Private Name Barrett Francis Allison
C. E. F.

Enlisted (a) 1.6.16 Terms of Service (a) Dur. W. DUR-OF-WAR Service reckons from (a) 1.6.16

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) Farmer

Report: Date	Report: From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
		Embarked	Canada	15.7.16	
		Arrived	England	25.7.16	
		Taken on strength 23rd Battalion 25-7-16. D.O. 4137. 7-8-16	25.7.16		D.P.II.O. 188
27-10-16.	23rd.Bn.	Drafted to the 24th.Bn..	Field.....	27-10-16.	D.P.II O.267
					E. Munro Capt. Adj.23rd.Bn.C.E.F.
3.11.16	C/B.D.	Reinforcement to 23rd Bn	C/BD	3.11.16	A.R. P.2 O.74 d/10/11/16
18.11.16	" "	Left join Unit	Field	18.11.16	A.R.
24.11.16	24th C Bn	Joined Unit	"	24.11.16	B213 257 d/10/12/16
16.2.17	" "	Infected Foot	Not stated	14.2.17	B213 282 d/26/2/17
20-2-17	1 Can Gen	3 C Y Foot, Rt,	1 Can Gen	20-2-17	W3034.
28-2-17	" " "	" " " "	H.S Brighton	28-2-17	W3083.8194 P.2020 d/6-2-17

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

[P.T.O.

CERTIFIED CORRECT. 16 NOV. 1916 CAN. RECORDS, LONDON.

INVALIDED FOR FURTHER MEDICAL TREATMENT

HOSPITAL REPRESENTATIVE. 12 SEP. 1918 HOSPITAL REPRESENTATIVE 4 CAN. GEN. HOSPITAL

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213 Army Form A. 36, or other official documents.
Date	From whom received				
23.3.17	1st Can R.D.	T.O.S. from C.B.A.C.	Shorham	Canadian 10.3.17	J.W. Hogan Capt. for Lt.-Col., A. A. G., Section, G. H. Q. 3rd Echelon, B. E. F. Wado 16.
					L. Evans Lieut. for Colonel i/c Records, C.O.R.C.
26-7-17	DISCHARGED FROM 3RD C. C. D.	Leaford TO 23rd Res BN.			PART II D. O. No. 133 27-7-17 For O.C 3rd Canadian Command Depot
26/7/17	y 23rd. CAN. RES. BN.	TAKEN ON STRENGTH	SHOREHAM	26/7/17	D.P. H. O. No. 214
		16.11.17.23rd.Res.Posted to 24th. Bn. Battalion.			Bramshott. 15.11.17.D.F.II 0.517 A. Lieut. and Adjutant for O.C., 23rd. Can. Res. Bn
28/7/17	1st Quebec	Ceases on lemming res SOS to 23 res.	Shoreham	26/7/17	P II 0.126
16-11-17	2 C. I. B. D.	Arrived. A. T. O. S 24th Bn.	2 C.I.B.D.	16-11-17	N.R P.O. 1060 28/11/17
19-11-17	Do	Left for C.C.R.C 2	Field	19-11-17	N.R 736
19-11-17	C.C.R.C 2.	Joined Do	Do	19-11-17	N.R 38.
24-11-17	Do	Left for 24th Can Bn	Do	24-11-17	N.R 46
30-11-17	24th Bn	Joined 24th " "	Do	24-11-17	B213.

CERTIFIED CORRECT 27 NOV. 1917 CAN. RECORDS, LONDON.

320

3200

X RAY DEPT.
4th Can. Gen. Hosp.

Case 3200

Date 21.5.18

Pte J. a. Barrett.

488966. 24th Bn. Can.

R. Foot.

N. upper.

3500

3200

X RAY DEPT.
4th Can. Gen. Hosp.
Case 3200
Date 21-5-18.

Pte F. A. Barnett.

488966. 24th Bn Can.

R. Todd.

K. Upp

Name BARRETT, Francis Allison. Rank Pte. Regtl. No. 488966.

Fyle Depot 74-B-583.

Original unit Que. Regt. Present unit XXI or S Age 24. Religion C.E. Ref. H.Q.

Port, ship and date of arrival Quebec -- Khyber -- 7-10-18.

Next of kin Herbert Barrett, Father, Beaver Bank, Hfx. Co., N. S.

Address on leave do do

Address on discharge

Transportation issued Yes / No Date Character on discharge (Documents O. K.).

Previous occupation Farmer. Date and place of enlistment 1-6-16, Halifax.

Diagnosis Date of Medical Boards

Date	Remarks		Pt. 2 Order No.
24-9-18.	T.O.S. No. 6 District Depot.	D.D.D.O.	183.
7-10-18.	T.O.S. Hospital Section (Camp Hill).	D.D.D.O.	183.
22-2-19.	Transferred to Casualty Co'y, 22-2-19, (Cat. "E").	H.S.D.O.	53.
M. 3.19		A.D.D.O	62

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

(over)

Date.	Remarks	Pt. 2 Order No.

M. F. W. 192
150m.—5-18
1772-39-1243

D.M.S. 1300.

Surname	Christian Name or Names	Reg. No.
Barrett	F.A.	488966

Rank	Unit	Co.	Troop	Batty.
Pte	24th Bn Que. Regt.			

Hospital — Date of Admission

I.C.G.H. Etaples 20-2-17

Transferred 1st. Lon. Gen. Camberwell S.E. Hosp. 28-2-17
Tooting Mil Hosp. 26.3.17
Bromley Conval Hosp. 31.5.17
Mc 11 Stat. Rouen Hosp. 12-4-18

Diagnosis I.C.T. Rt. Foot

(1) Later Diagnosis (if changed) G.S.W. R. Foot - R. Shldr. & Cheek. R. Rr.

(2)

(3)

Additional Diagnosis: if more than one state present

Invalided to Canada 24.9.18

DISPOSITION — Date

Disc. 4-6-17

C.L. 1-3-17 A457
C.L. 6-3-17 B309
30.3.17 B378
4.6.17 B380
" 19-6-17 B393
18-4-18 @ 191.4
" 19-4-18 B192
1-10-18 B333 -S-

REMARKS

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

RW

EPITOME OF HOSPITAL TREATMENT.

	Hospital	Adm.
1.	4 C. G. Basingstoke	17-4-18
2.		
3.		
4.		
5.		
6.		
7.		

Number 468966 Rank Pte

Surname BARRETT.

Christian Name Francis Allison

Units 24th Can Inf Theatre of War France.

Date of Service 27-10-16.

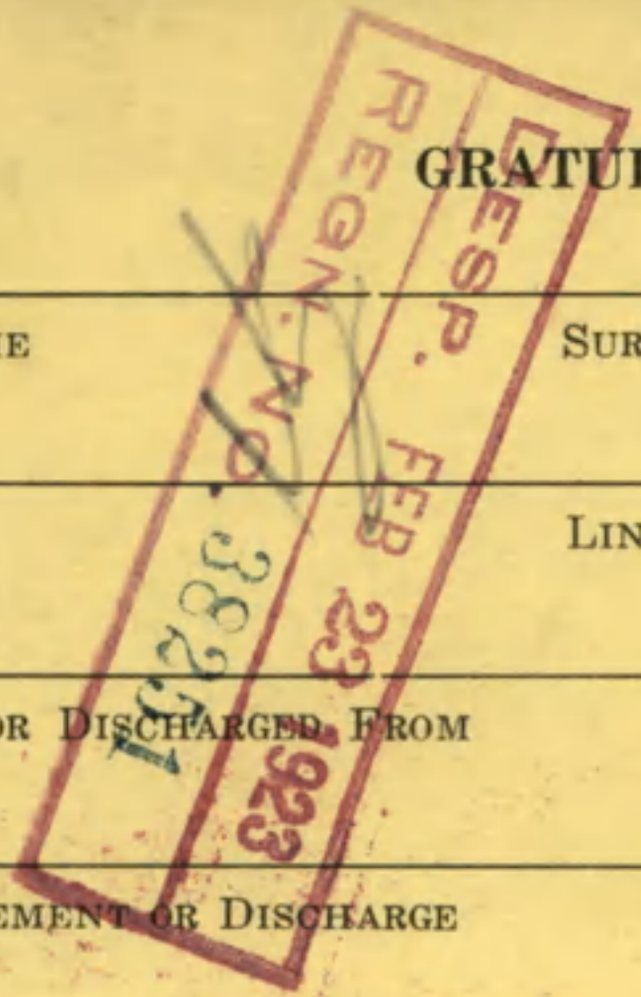
Remarks

Latest Address Beaver Bank
Halifax Co. N.S.

Roll No. B. Page 18685.

200m.-6-21.

GRATUITY (IMPERIAL)



CHRISTIAN NAME | SURNAME | REG. NO.

SCHEDULE NO. | LINE NO.

UNIT RETIRED OR DISCHARGED FROM

PLACE OF RETIREMENT OR DISCHARGE

DATE RECEIVED FROM OTTAWA | IMPERIAL DEPOT NO.

DATE RECEIVED FROM REG. DEPOT. | DATE FORWARDED TO OTTAWA

868—D.P.—40M-1-12-19.

NAME Barrett Francis Allison

REGT'L No 488964

RANK AND CORPS Pte 24th L Bn

H. Q. FILE No. 649-

FOLLOWS No.

FOLLOWS

CABLE No.	DATE	NATURE OF CASUALTY
H 112	19-4-18	Adm 11 Stat Hosp Rouen April 12th 1918. G.S.W. R. foot. skin. cheek.
Hosp 2 & 3 191	18-4-18	
N.O.K.		Herbert Barrett. (Father) Beaver Bank Halifax N.S.

L. L. 12767—M. & D. 7390.

M. F. W. 42—50M.—12-16.
H. Q. 1772-39-893.

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
A.4757	1 Can Gen Etaples	20-2-17	G.S.W. rt foot
B.309	1st London Gen Camberwell Sq	28-2-17	" " "
B328.	to Mil Dooting	26-3-17	" " " " "
B.380	Can Croix-Bromley, Kent	31-5-17	" " " " "
B393.	Ex " "Lisse"	4-6-17	" " " " "
B192	4 Can Gen Basingstoke	17-4-18	G.S.W. R. Foot. R. Shldr, & R Chest
B333-5	Invalided to Canada	24-9-18	" " " " "

R. 149.

Name BARRETT.Francis Addison. Pte. *Reg. No.* 488966.

Unit 24th.Battalion.

Next of Kin Canada.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
20-2-17.	1.CGH.	Etaples.	ICT R Foot.	A457.		
28-2-17.	1st.London GH.	Camberwell. SE.	""	B309.		
26-3-17.	Mil.Hosp.	Tooting.	""	B328.		
31.5.17	C. C. Hosp	Bromley	do	B380		
4-6-17	Discharged		do	B393		

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

Form R. 149.

Francis. Allison

Name BARRETT. Rank Pte Reg. No. 488966.

Unit 24th Bn.

Next of Kin Canada

Date 1918.		Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
12-	4	To 11 Cdy Hosp. Rouen.	Gsw L. Foot. R.				H/12
A&P			D & R. Bleek St.		191		484/10
14-	4	To 4 L.G.H. Basingstoke	do		192		16431
24-	9	INVALIDED TO CANADA			333		2498.

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

Form DMS 1401.

No. 4 Canadian Gen. Hospital,

Basingstoke HOSPITAL.

A. & D. CARD

AT

A. & D. No. M2 12592 PL. OF ACTION France

RANK Pte REG. No. 488966 UNIT 24 Can's D SICK OR WOUNDED

NAME Barrett J A AGE 23 RELIGION C of E

PLACE IN HOSPITAL N. Ward

DIAGNOSIS G S W R. foot + R. Shldr

ADMITTED 16 - 4 - 18 FROM H S St David

DISCHARGED TO

TRANSFERRED 24-4-18 Hm. 2 - K - 4

SERVICE AT HOME 2y 12 IN FIELD 3y 12

RESULTS

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

P.T.O.

REMARKS.

LEDGER NO. 35. SERIAL NO. 7761 39

REG. NUMBER 448966 NAME Bassett H A

RANK Pte CORPS 24th

AGE 24 SERVICE

NAME OF HOSPITAL Military PLACE Halifax

DATE OF ADMISSION 9-10-18

DISEASE Loss of some bones & G S W Rt foot

TRANSFERRED TO OTHER HOSPITALS

OPERATION

DISCHARGED TO 22-2-19 IN CATEGORY

M. F. W. 2553.
50m.—6-18.
1772-39-1332.

P. T. O.

REMARKS:

Form—K. 190 8528-25M-25/10/16.

IMPORTANT.

DISPOSAL OF ORIGINAL MEDICAL HISTORY SHEETS.

1. Action by Officer i/c Hospital—

(*a*) See that all entries are properly and fully made, and signed.

(*b*) Forward to Hospital to which man is transferred, immediately it is done. If discharged to Unit—to Officer Commanding such Unit.

2. Action by Officer Commanding Unit—

(*a*) On admission of man to Hospital, forward M.H.S. to such Hospital at once.

(*b*) On transfer to another Unit—to Officer Commanding such Unit.

(*c*) On proceeding Overseas — return to Record Office, London, without delay.

(Authority, Army Council Instruction 831, April, 1916.)

IMPORTANT

DISPOSAL OF ORIGINAL MEDICAL HISTORY SHEETS

Issue by Officer in Charge

(a) See that all entries are properly and fully made and signed.

(b) Forward to Hospital to which man is transferred immediately it is done. If discharged to Unit, to Officer Commanding such Unit.

Issue by Officer Commanding Unit

(a) On admission of man to Hospital, forward M.H.S. to such Hospital at once.

(b) On transfer to another Unit, to Officer Commanding such Unit.

(c) On proceeding Overseas or return to Record Office (London) without delay.

(Adjutant-General's Instruction 671, Nov., 1918.)

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

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

4 Can. Gen. Hospital.

Ward Upper No. of Bed . Date May 20

Regt. No.	Rank and Name.	Corps.	Part to be X-Rayed.
488966	Pte Barrett.	24 Can	Dorsum R. Foot

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

S.W. ankle
surface Rt. foot
over 5th Labrid
Metatarsals. Exp
& D. & fracture.

Signature of M.O. J. Macdonald

Date

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

No. of Plate 3200

The 4th metatarsal has been fractured. Much of the bone is missing and proximal 2/3 of shaft is represented by a long, half-absorbed sequestrum. Head also greatly rarefied. Much destruction in all of distal row of tarsal bones except 2nd. cuneiform. Base of 5th metatarsal also damaged.

Signature of Radiographer A/Sgt. Rolph Capt.

Date 21/5/18.

B.E.F. FRANCE

MEDICAL TRANSFER CERTIFICATE.

Army Book 172.

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

Extract from Admission and Discharge Book of 1st LONDON GENERAL HOSPITAL R.A.M.C. (T.F.) Hospital at [illegible] Date 23 [illegible] 1917

No. of Case.	Regiment or Corps.	Troop or Company.	Regt. No.	RANK AND NAME. Surname first. If Married, write "M" under name.	Completed Years of: Age last birthday.	Service	Service in the command.	DATES. Admitted into Hospital.	Transferred.	Religion.	DISEASE. (a) Primary. (b) Secondary. (c) Operations.	Destination on Transfer, and to what Hospital or Ship Transferred.
T.C.E. 33	24 Canadian	D	488986	Pte. Barnett Francis A.	22 6/12	1	4/12	28.2.17	26 MAR 1917	C. of E.	I.C.T. Foot	Tooting

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

4B

[signature]

Medical Officer in Charge.

MEDICAL CERTIFICATE BOOK.

London: Printed for H.M. Stationery Office by John Rissen, Ltd.—82.

Halifax, N.S., March 3rd, 1919.

TO:-
The Quartermaster,
No.6 District Depot.
Halifax, N.S.

In consideration of you giving me my Clearance on discharge. I hereby agree to any charges there my be against me being deducted from any Allowance there may be to my credit in the future.

Signed. Fdt Barrett
488966 24th Bn

MARRIED OR SINGLE: Single

PLACE OF BIRTH: Beaver Bank, N.S.

NAME AND ADDRESS OF NEXT OF KIN: Herbert Barrett Beaver Bank, Halifax Co. N.S.

RELATIONSHIP OF NEXT OF KIN: Father

NAME AND ADDRESS OF NEXT OF KIN:

RELATIONSHIP OF NEXT OF KIN:

SEPARATION ALLOWANCE MONTHLY $ — EFFECTIVE (DATE)

PAYABLE TO:

RELATIONSHIP OF DEPENDANT:

CASUALTIES. PROMOTIONS. &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL. &c

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

1698

REG'L. NO. 488966 RANK Pte. 63rd Batt. NAME Barrett, Francis Allison

IF IN PERMT. CORPS | WHAT UNIT — UNIT 23rd Batt.

TRANSFERRED TO 24th Bn. DATE 21/11/16 AUTHORITY 60268 27/10 6

PERMANENT FORCE ALLOWANCES

TRANSFERRED TO CCRC DATE 21.3.17 AUTHORITY CAB 309 63/17

PLACE OF ATTESTATION Halifax

TRANSFERRED TO Brit Hospital DATE 31/5/17. AUTHORITY

DATE OF ATTESTATION 1/6/16

TRANSFERRED TO Orpington Kent DATE 21/6/17. AUTHORITY AR.

1st D.R.D. 1-11-17

24 Bn 1.1.18 B.O. 106. 28/11/17.

ASSIGNED PAY MONTHLY $ 20 00 DATE EFFECTIVE August 1/16.

PAYABLE TO Mrs Florence Barrett. Beaver Bank, Halifax. N.S. RELATIONSHIP

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

DEC 5 1918

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) Stop. EFFECTIVE 1. 8. 18 REASON Dis to Can

DISCHARGE DATE AND PLACE Canada 31. 7. 18 REASON AND AUTHORITY B.Stats 22 4/51. 8. 7. 18

Sav africa

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

DATE	PAY No. OF DAYS	PAY RATE	PAY AMOUNT $	PAY AMOUNT c.	FIELD ALLOWANCE No. OF DAYS	FIELD ALLOWANCE RATE	FIELD ALLOWANCE AMOUNT $	FIELD ALLOWANCE AMOUNT c.	WORKING OR SPECIAL PAY No. OF DAYS	WORKING OR SPECIAL PAY RATE	WORKING OR SPECIAL PAY AMOUNT $	WORKING OR SPECIAL PAY AMOUNT c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE Credit	BALANCE Debit	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
														29 10	29 10																29 10				Balance from Canada
Aug 1-31	31	1.00	31		31	10	3	10							34 10			2489	15/8					9 73					9 73	53 47				
Sept 1-30	30	1.00	30		30	10	3								33	2563	31/8	2631	15/9					12 16	7 30			20 20		59 46	27 01			Aug Arrears
Oct 1-31	31	1.00	31		31	10	3	10							34 10	2624	30/9	2731	15/10					9 73	4 86			20	62	35 21	25 90			Issue on Repay C/415. 5.9.16
Nov 1-10	10	"	10		10		1	-							11 -	2749	31/10							4 87				20	1 65 1 17	24 69	9 21			Issue on Rep. C/4005-494 8/10
Nov 11-30	20	-	20		20		2	00							22 00										4 36			20		4 36	26 85			11 " 4 " 5-9 2. 24/10
Dec 1-31	31		31		31		3	10							34 10	1140	28/11							11 34	4 36			20		35 70	25 25			
	Dec		15	20			1	50																										
Jan 21	31	1.10	34	10											34 10	1681	15/12							2 62				20		25 23	34 12			
																1737	28/12							2 61										
																1804	28/1							2 62										
Feb 1-28	28	1.10	30	80											30 80	1907	18/1							2 61				20		25 23	39 69			Trans CCAC 4/26/3/17 CAB 309 63.17
															22														53 23 14	38 55			
Mar 1-20	20	1.10	22											29 10	28 4 30									51 17	21 89	8 72		160	3 97	245 75		80 65		
			25 5	20																														
Mch 1-31	11	-	17	10											17 10							6 7/4				487								
	Apl	30	-	33	-										33 -							L 30/4				487	20 -		59 74	53 91			
																						L 5/5				487								
	May	30		33											33 -							" 9/5				487	20 -		59 74	57 78			To Brit. Hospitals 31/5
			333	30										29 10	362 40									51 17	21 89	8 72	19 48	200	3 97	305 23				

488966 Pte Barrett Francis Allison Assigned pay $20.00/100

DATE	PAY No. of Days	PAY Rate	PAY Amount $	PAY Amount c.	FIELD ALLOWANCE No. of Days	FIELD ALLOWANCE Rate	FIELD ALLOWANCE Amount $	FIELD ALLOWANCE Amount c.	WORKING OR SPECIAL PAY No. of Days	WORKING OR SPECIAL PAY Rate	WORKING OR SPECIAL PAY Amount $	WORKING OR SPECIAL PAY Amount c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS
			333	30										29 10	362 40
May 1			1	10											1 10
June 20			22												22
June 10	1	10	11												11 -
July 31	1	10	34	10											34 10
Aug 31			34	10											34 10
Sept 30			33												33
			~~268~~	60										29 10	497 70

ACQUITTANCE ROLLS 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date
		98	14/				

CASH PAYMENTS 1	2	3	4
51 17	21 89	8 72	19 48
	48 67		
51 17	70 56	8 72	19 48

ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE Credit	BALANCE Debit	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
200	3 97	305 23	57 17				
			58 27				
20		20	60 27				→
		48 67	22 60				To Orpington Patients 7/6/17.
20		20	36 70				
20		20	50 80				
20		20	63 80				
280	3 97	433 90					

MONTH	PARTICULARS	DR.1	DR.2	DR.3	DR.4	BALANCE	PAY ALLOC.
Sept 30						63 80	
Oct 31	Pte Pay	34 10					
		34 10					
Nov.	Pte pay	33 -					
Dec.	Pte pay	34 10					
			DN 1086. 28 Rec. 28/9/17	9 73			
			Can a.p.				
			DN 1007. 73 Rec. 13/9/17.	9 73			
			DN 804. 73 Rec. 14/8/17.	7 30			
			DN 976. " " 27/8/17.	9 74			
			DN 971. " " 27/8/17.	9 73			
			AR 1178. 73 Rec. 14/11/17.	9 73			
			DN AR 799. 73 Rec'd. 13/7/17.	4 87			
			" 713. " 28/6/17.	4 87			
			AR 1122 73 Rec'd 13/11/17.	9 73			
			" 1199. " 29/10/17.	9 73			
			a.p. Dec.			20	19 8 18
19.18		67 10		85 16		40	
Jan	Can a/c Jan					20	
	pp pp	34 10	AR 463. 28 Rec'd 23/11/17	8 92			
			" 916. 24 Rec 6/12/17	4 46			
			" 970 " 19/12/17	4 46			
			" 1025 " 29/12/17	3 57			
		34 10		21 41		20	12 53 Nil
	~~Can a/c Jan~~					~~20~~	

MONTH	PARTICULARS	DR.1	DR.2	DR.3	DR.4	BALANCE	PAY ALLOC.
Balld Fwd						12 53	
Feb	pp	30 80					
		34 10					
Mar	pp	30 80					
		34 10					

MONTH	PARTICULARS	DR.1	DR.2	PARTICULARS	DR.1	DR.2	DR.3	DR.4	BALANCE	PAY ALLOC.
				Can A/P					20	
				AR 1074 24 Rec 9/1/18		4 46			1887	
						4 46			20	
				Can A/P					20	
				AR 1171 24 Rec 9/2/18		8 03				
				" 1215 " 19/2/18		3 57				
				" 1266 " 8/3/18		4 46				
				" 1314 " 19/3/18		3 57			13 34	
		34 10				19 63			20	

Carried forward to Large Ledger sheet

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY * ~~ENGLAND~~ OR CANADA.	SEPARATION ALLOWANCE. * ENGLAND OR CANADA.
EFFECTIVE DATE:- 1/8/16	EFFECTIVE DATE:-
AMOUNT:- ~~20.00~~ Stop Eff 7/8/18	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 Florence Barrett
Beaver Bank Halifax
N.S.

NAME:- BARRETT. Francis Allison

NUMBER:- 488966

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Pte
		"

UNIT AND TRANSFERS DEC 5 1918

ORIGINAL UNIT:- 63 Bn.

DATE ACCOUNT FIRST OPENED - 1/8/16

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			24 Bn
BD 100. 24/4/18	1/6/18	19/6/18	Q R D
Dis. to Can.	1-8-18		U.K. " D"

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 £ s d	DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT £ s d
~~1/8~~	3297	~~Balance~~	~~£1 4 8~~				
8/8	3330	"	£10 18 6				
			53 34				
L.I.C. Cr Bal $			17 05	Supp L.P.C. 7/8 Cr. 1132.			

DAILY RATES OF PAY AND ALLOWANCES

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

PARTICULARS OF RENDERING NON-EFFECTIVE:- Dis to Canada. 1/8/18. Auth:- 1,22 A/51 8/1/18 Invalided

MONTH 1918	PARTICULARS	CR 1	CR 2	PARTICULARS	DR 1	DR 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
May 31	Bal Fwd								13 34		
Apl	PP	33.		Can AP				20	26 34		
				DN P912. 4 Gen Hosp 24/4/18	2 43			20	23 91		
					2 43						
May	PP	33 34 10		Can Apl				20	38 01		
				DN. 1171. 4 C G H Bux 6/5/18	4 87				33 14		
	P.P.	34 10 33.			4 87			20			
June				Can A.P.				20			
				AR 2399 #4 G.H. 5.6.18	4 87			20	41 27		
July	P.Pay	33 30 10		Can Ad.	4 87			20	55 34		
	Sick Furlough 8/8 to 21/8 B.O. 168								65 59		
	11/7/18. Q.R.D.			AR 3292. 4 C G H. 4/7	4 87						
				3330 " 8/7	4 86 7						
				Qtr. 1 dy S.T. for 14 days shown for 13 dys			73		11 32		
		44 32			53 54	73	20				
				AR 4504. 4 C G H Endorsee 9/8/18.	9 73				1 59		
Sept				AR 5958 " " 11/9	9 73 4 87				3 28		
Oct	Sailed #64 24/9. C. Nova 1057		328 378						Nil		

AUDITOR | PAYMASTER

M. OR S. Khyber 7/10/18

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

REGT. No. 188966 RANK pte NAME (IN FULL) Barrett F. A. (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN — RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? no — DATE EFFECTIVE

TO WHOM PAID — RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F. — IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

DATE OF ATTESTATION — TRANSFERRED TO — DATE 64 — AUTHORITY

ASSIGNED PAY $ 70.00 — DATE EFFECTIVE 1/1/19

PAYABLE TO Mrs Florence Barrett — RELATIONSHIP — ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS Beaver Bank NS

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

DISCHARGED — PLACE — DATE 4/3/19 — REASON — AUTHORITY 2062 — IF ENTITLED TO POST DISCHARGE PAY

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	C.		TOTAL CREDITS $	C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	DATE	COL. NO. 2 NO.	DATE	COL. NO. 3 NO.	DATE	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.		TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT								9 30																										
1/1/19								9 30								95 03				114 93		113 60										9 30		
31/1/19	31	110	34 10					43 40								9 30				14 65		20 00		15					43 40					
1/2/19																176 30						158 68												
28/2/19	28	110	30 80					30 80								10 80						20 00							20 00		10 80			
1/3/19								53 20								176 74				177 34														
4/3/19	4	110	4 40		35 00		10	49 20								10 80				39 40														
																		178 70											120 20					
																		70 00											XX 9 90	70 00				
	153		350					350								War Service Gratuity																		
																				70											28 0			
																70															210			
																70 00															140			
																70															70			
																70															Nil			
		350						350								280					70			350										

Certified that all payments due on this acct. have been paid.

For Senior Officer Pay Services, M.D. 6 CAPT.

£15 10 14 4-4-19
581138 1-5-19
594003 3-6-19
577835 3-7-19

30M-11-18.—L.L. 50877-M. & D. 9553.

PART III.

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

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

on the day of 191

Members of the Board:—

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

Dated at this day of 191

Signatures of the Board

President.

PART I.

Reserved for M.H.C.

Regt. No. 488966 Rank Dte Surname Barrett Christian Name Francis A.

Unit or Corps—(a) Overseas from United Kingdom 24 Batt (b) In United Kingdom Res Batt 23

Born at—Town Beaver Bank County or Province Halifax Co. Country Nova Scotia

Date of Birth—Day 15 Month August Year 1895 Age 23 yrs. 10 months.

Joined at ~~McNabs~~ Halifax N.S. Date ~~May 23~~ June 1st /1916

Former Trade or Occupation FARMER

Permanent marks or peculiarities that will serve for future identification:—

None Except Wounds.

Height—feet 5 inches 10 Colour of eyes Blue

Signature of Soldier (*for identification purposes*) F Barrett

Medical Report.

☞ *The answers to the questions below are to be filled in by the Officer in medical charge of the case. He will carefully discriminate between the soldier's unsupported statements and the evidence as recorded in the medical or other military documents bearing on the case. He will plainly state the existence of any of the disability prior to the soldier joining for the present war.*

1. DISABILITY (*State the actual disabling conditions as distinguished from the diseases or injuries from which they resulted*). (*Follow the official nomenclature as far as possible.*)

Group the disabilities, placing those resulting from separate causes in separate groups.

Disabilities Group (*a*). Loss of Some Bones Rt Foot

Disabilities Group (*b*). nil

Disabilities Group (*c*). nil

2. CAUSE OF DISABILITY. (*Follow the official nomenclature in stating the disease or injury.*)

	Disease or injury to which the disability is due.	Place of origin.	Date of origin.
(*i.*) As to Group (*a*) above.	G.W.d. & Sepsis	Arras	April 9/18
(*ii.*) As to Group (*b*) above.	Not Applicable	Not Applicable	
(*iii.*) As to Group (*c*) above.	Not Applicable	N a.	

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

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

(*i.*) As to Group (*a*) above? No If yes, has Active Service aggravated it? n. a

(*ii.*) As to Group (*b*) above? n. a If yes, has Active Service aggravated it? n. a

(*iii.*) As to Group (*c*) above? n. a If yes, has Active Service aggravated it? n. a

4. Is the disability due to disease contracted or injuries received while on Active Service—

(*i.*) As to Group (*a*) above? Yes.

(*ii.*) As to Group (*b*) above? n. a

(*iii.*) As to Group (*c*) above? n. a

PART I. (continued).

5. If a cause of disability was an injury received on Active Service, was it received—

(i.) While on duty? Yes (ii.) While off duty? No

(iii.) Was a Court of Inquiry held? No (iv.) Where? N a (v.) When? N a

(vi.) Opinion of the Court? N a

6. HISTORY OF THE CASE. (*State concisely the essential points of the history, noting the entries made on the Medical History Sheet and other records.*)

Pte Shepherd entered Rt foot 2" in front of Rt heel & 1½" from sole of foot. Healed April 15th Exit 5" distant on outer side of foot over 4th metatarsal 3" in length. X Ray May 20 showed necrosis & distruction of bone & sequestra all of 4th Metarsal & pieces of distal external tarsal bones & sequestra removed May 23/18 at No 4 C.G.H. Rt Carrel tubes inserted. Shrap also entered Rt. shoulder pierced scapula & fractured a rib, No lung lesion. Rt foot healed by June 20/18

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

General condition good Scar 2" long Outside Rt foot 2" still discharging. Pt cannot bear weight on foot. Pain & Spasm when trying to move ankle. Ankle & ankle stiff & hard. Pain & limitation of movement of great toe. Tarso metatarsal joint has full movement. Pt walks with crutches at times. Is not able to put weight on foot yet.

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

(ii.) If so, state what. See Ky

(iii.) Was one advised and declined? No

NOTE.—Loss of teeth on or immediately after Active Service should be attributed thereto unless there is evidence to the contrary.

9. (*i.*) Is there loss or decay of teeth attributable to Active Service? Loss of Teeth

(ii.) If so, describe. Left upper Rt molars & four Rt incisors pulled

10. DO YOU RECOMMEND:—

(*a*) Fit for duty? No

(*b*) Fit for base duty? No

(*c*) Invalid to Canada? Yes.

(*d*) Discharge from the Service as permanently unfit? No

Date of Report June 27 191 8 Signed A J MacCallum
Officer in medical charge of case.

Station No 4 Can Gen Hosp, Basingstoke

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

A CANADIAN GENERAL HOSPITAL REGISTRAR'S OFFICE 3 JUL 1918 BASINGSTOKE

R C Sharpe Major RAMC { Officer i/c Hospital / S.M.O. Brigade } Strike out one of these.

Dated at Station, on 191

* Delete if inapplicable.

PART II.

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

Clear and decisive answers are to be given to all questions. Such terms as "may," "perhaps," "probably," "possibly," are not to be employed. Disability due to causes arising on Active Service is to be clearly shown in order that the Pensions Authorities may deal with the case properly.

11. Is the disability fully indicated in Part I. (1)? Yes.
If not, indicate it. not applic

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

13. Was the disability caused or aggravated by— (*a*) Negligence of the Soldier { Caused? No / Aggravated? No } (*b*) Misconduct of the Soldier { Caused? No. / Aggravated? No }

14. THE ENTIRE DISABILITY.—Without regard to his regular occupation, to what extent is his capacity lessened at present for earning a full livelihood in the general market for untrained labour?
(*Estimate at none, 10%, 20%, 30%, 40%, 50%, 60%, 70%, 80%, 90%, or 100%.*)

15. THE PENSIONABLE DISABILITY—(*see Part I. (3). Aggravation on Active Service of a disability existing previous to joining is to be included in the estimate*).
What part of the entire disability estimated next above in (14) is due to causes arising during Active Service? (*Estimate at none, ⅓, ½, ⅔, ¾, or all.*)

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

17. If an operation was advised and declined, do you consider the refusal to have been unreasonable? not applic

18. Remarks. Right Foot.
Bone infection there has been a fusion of all the tarsal and tarso-metatarsal joints giving rise to a marked limitation of inversion and eversion of foot.
He cannot bear full on his foot. C

19. Recommendation:—(*a*) Fit for duty? No
(*b*) Fit for base duty? No
(*c*) Invalid to Canada? Yes.
(*d*) Discharge from service as permanently unfit? No.

Classification for the Military Hospitals Commission. C.

Date of Board July 5/18

Signatures of the Board: Fred E Watts Major C.A.M.C. President.
H Howard Lieut-Colonel.

Station #4 Can Gen Hosp Basingstoke

Approved [illegible] Major, C.A.M.C. A.D.M.S.
for A.D.M.S., Canadians, London Area.

Dated at Station 18 JUL 1918 191

A.D.M.S. CANADIANS LONDON AREA

OPINION OF THE MEDICAL BOARD

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

Yes. but would add to each #9 that Soldier cannot ~~the~~ support his weight on his left foot when standing on toes.

19. Is the invalid fit for

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

20. It is certified that the invalid

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

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

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

Cat E.

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

CAMP HILL HOSPITAL HALIFAX

PLACE Halifax NS

DATE Feb 13/19.

President.

Members

TO BE COMPLETED WHEN TREATMENT IS REFUSED

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

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

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

President.

PLACE.....

DATE.....

Members

APPROVED BY

Assistant Director of Medical Services.

DATE 18-2-19

APPROVED BY

Director-General of Medical Services.

DATE.....

ORIGINAL

THIS FORM WILL BE USED FOR ALL RANKS

MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

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

STATION Halifax, N.S. DATE 17-2-19

1. 1 (a) Unit 6th D.D. (b) Regimental No. 488966 (c) Rank Pte

(d) Surname Barrett (e) Christian name Francis

(f) Home address Beaver Bank, Halifax Co. N.S. 59 B 12 T

(g) Next of Kin Mrs Florence Barrett (h) Relationship Mother

(i) Address of Next of Kin Beaver Bank, Halifax Co., N.S.

2. Age last birthday 24 years Date of birth Aug 15th 1894

3. Enlistment, or Appointment (if an Officer) (a) Place Halifax, N.S. (b) Date May 23rd 1916

4. Personal description:

(a) Height 5 ft 9 inches (b) Weight 160 (stripped) (c) Complexion Fair

(d) Colour of hair Brown (e) Colour of eyes Blue (f) Identification marks, Scars, etc. Scar 4" on right shoulder parallel to Spine of scapula. Scar 3" on outer border of right foot.

5. Former trade or occupation Farmer

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

	Years	Days
	2	265

ASSISTANT DIRECTOR OF MEDICAL SERVICES M.D. NO. 6 FEB 15 1919

	Periods From	To
Canada { 6 3rd Halifax Rifles / Otta D.B. Depot	May 23rd 1916 / Oct 24th 1918	July 15th 1916 / Feb 12th 1919 (Struck off)
England 23rd Reserve	July 15th 1916	Oct 28th 1916
France or other theatres of War 24th Bn C.E.F.	Oct 28th 1916	Oct 24th 1918

7. Original disease, or injury Gunshot Wounds of right shoulder and right foot

(a) Date of origin April 11th 1918 (b) Place of origin Arras, France

(c) Cause Gunshot Wounds.

M. F. B. 227.

300M.—8-18.
1772-39-117.

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

(a) Impaired function right foot (b) Flat feet

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

(a) Patient a well nourished individual. Scar 4" in length on right shoulder parallel to the spine of the scapula and non adherant. but does not cause any disability. Scar on dorsum of right foot along the cubaid and fourth metatarsal, upper third of scar is adherant. There is anky losis of the tarso - metatarsal joints of right foot. Movements of ankle joint are normal. Arch of right foot gets painful after walking about a mile. Walks with a slight limp.

(b) Both feet are markedly flat and everted The right arch ~~(Pes)~~ is rigid. Left is not. The left foot does not cause him any pain on walking but right does. Report of ~~no~~ Xe Hydrotherapy, Urine report ~~and Dental~~ report attached.

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

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

Special Senses No Respiratory System No Integumentary System No

Disturbances of Mentality No Digestive System No Muscular System No

Osseous and Joint Systems No Any other general condition No

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

(a) Patient was wounded by shrapnel April 11th 1918 in right shoulder and ~~foot~~ (left) Operation same day and fragment of bone removed from shoulder discharged for about two months before healing. May 23rd 1918 operation on foot and sequestra of 4th metatarsal bone, cuboid and external cuneiform removed and draining tube inserted. Drained until Oct 1918.

(b) Patient had flat feet since he can remember but they never caused him any disability until wounded in right foot and since then arch of right foot pains after about one mile of walking.

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

none

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

Scar 4" in length on right shoulder parallel to spine of scapula. Scar 3" in length on outer border of dorsum of right foot.

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

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

(a) Not applicable (b) no

12. Was the disability caused, or aggravated; (a) by intemperance, or improper conduct; or (b) by unreasonable refusal to accept treatment? no

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

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

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

Gymnastic exercises. Report of no Xe Hydro therapy that further treatment in that dept not of benefit attached

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit?
(If the answer is "yes" state nature of treatment required and probable duration)

no

16. Can the former trade or occupation be resumed? yes
(If not, briefly state why)

17. Recommendations Recommended that Pte Frances Barrett # 488966 be placed in Category E for discharge from the Service.

D M O Louis St Laurent
Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

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

I, the undersigned Pte Frances Barrett have heard the description of my disability and present condition read, and am satisfied (~~or not satisfied~~) with it. (If dissatisfied, statement should follow.)

I complain in addition of

Pte Francis Barrett Rank.
Signature of invalid examined.

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 depot for discharge).
18. Descriptive return (Army Form D. 400), where required. See section 11 on second page.
19. Active service casualty form. (Army Form B. 103).
20. Employment sheet. (Army Form B. 2066).

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

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

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

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

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

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

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

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

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

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

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

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

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

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

This space to be left blank for the Chelsea Number.

Army Form B. 2[illegible].

Khyber 3 24 9 18 Ar 7 10 18

Proceedings on Discharge.

B-583.

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

No. 488966 Army Rank Private.

Name Barrett. Francis Allison. 57 B. 1217

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

Que 63rd 8 W Rifles

Corps Quebec Regt a. 63rd Bn. c. June 1st 1916.

Battalion, Battery, Company, Depôt, &c. B. 24th Bn. 23rd Res.

(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.*

Age years months

Height feet inches

Chest measurement { girth when fully expanded ins. / range of expansion ins.

Complexion

Eyes

Hair

Trade

Intended place of residence (To be given as fully as practicable)

Descriptive marks.

Shrapnel Wound Right Foot.
Scar 2" Right Shoulder.

(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
K. R. & O. 392-16-1912.

(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.)

To be filled in on the soldier quitting the Colours.

3. Military character :—

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

Certified that the above is an accurate copy of the character given by me on Army Form B. 2067* and that Army Form D. 489 was awarded in this case.

Initials of Commanding Officer.

Army Form B. 2088 has been issued to*

* Strike out if not applicable.

INVALIDED TO CANADA FOR FURTHER MEDICAL TREATMENT

HOSPITAL REPRESENTATIVE.

(11)

19/5/20

D. D. & L., London, E.C. A4508 Wt. W17176 M291 500,000 8/16 Sch. 89 Forms B. 268 40

[OVER.

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)_____

HOSPITAL REPRESENTATIVE. No. 4 CAN. BEN. HOSPITAL 12 SEP 1918 BASINGSTOKE, HANTS.

_____
HOSPITAL REPRESENTATIVE.
*Commanding*_____*Battn.*_____*Regiment.*

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

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

(*Place*)_____ _____(*Signature of Soldier.*)

(*Date*)_____ _____(*Signature of Witness.*)

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

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

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

_____(*Signature of Soldier.*)

10. *Statement of service.*

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

Further service „ „ _____(the date of confirmation of discharge) ... ..._____ „ _____ „

Total ..._____ „ _____ „

11. *Confirmation of discharge.*

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

(Place)_____

*Signature*_____

(Date)_____

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

RESERVATIONS REFERRED TO AT PARA. 8.

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

_____

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) Halifax, N.S. F.d Barrett *(Signature of Soldier.)*

(Date) 4 Feb 1919 E.A. MacLean *(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) Halifax, N.S.

(Date) March 4 1919

(Signature) [illegible] Lieut
O.C. No 6 R.D.

Reservations referred to at Para. 8.

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

Nil

F.d Barrett

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form	B. 263
Squadron / Battery / Company } Conduct Sheet,	"	B. 263a
or Field Conduct Sheet	"	W. 178
Copies of Convictions, by C. P.		in MS.
Med. Hist. Sheet,	Militia form	B. 313
Casualty Form	"	W. 54
Medical Report for Invalid§	"	B. 227
Dental History Sheet	"	B. 465
Last Pay Certificate	"	W. 44
Duplicate Discharge Certificate	"	W. 39A
‡Form of Will	"	W. 82

§Only if discharged "Medically unfit."

‡Only if man has not been overseas.

Attestation Paper or Particulars of Recruit	Militia Form	W. 23 / W. 133
Proceedings on Discharge	"	B. 218

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

(a) Proceedings on Discharge

(b) Attestation.

(c) Medical History Sheet.

Documents not accompanying this form should be crossed out.

I hereby certify that the following documents are unobtainable.

Officer Commanding.

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

War Service Badge
Class A # 76032
B # CA8541 issued

This space to be for numbers.

Proceedings on Discharge.

B.

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

M

No.	488966
Rank	Private
Surname	Barrett.
Christian name	Francis Allison
NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.	
Corps (Squadron, Battery or Company)	63rd Regiment. Halifax Rifles
Date of discharge	March 4, 1919
Place of discharge	Halifax, N.S.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

H

Age	24 years 6 months.
Height	5 feet 10 inches.
Complexion	Light
Eyes	Blue
Hair	Light
Trade	farmer
Intended place of residence (To be given as fully as practicable.)	Beaver Bank. Halifax Co., N.S.

Descriptive marks

Shrapnel wound right foot. Scar inch rear right shoulder

Declared 24-12-60

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

Medically unfit

Authority for discharge.....

N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.

To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.

3. Conduct and character while in the service have been, according to the records, etc.

N.B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldiers and the Officer Commanding his Squadron, Battery or Company.

4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)

M. F. B. 218.

200M.—5-18.
H. Q. 1772-39-113.

MEDICAL DOCUMENTS FORWARDED TO
~~S. C. B.~~
B. P. C.
ON 10-3-19

(OVER)