


C.E.F. REGIMENTAL DOCUMENTS

2471

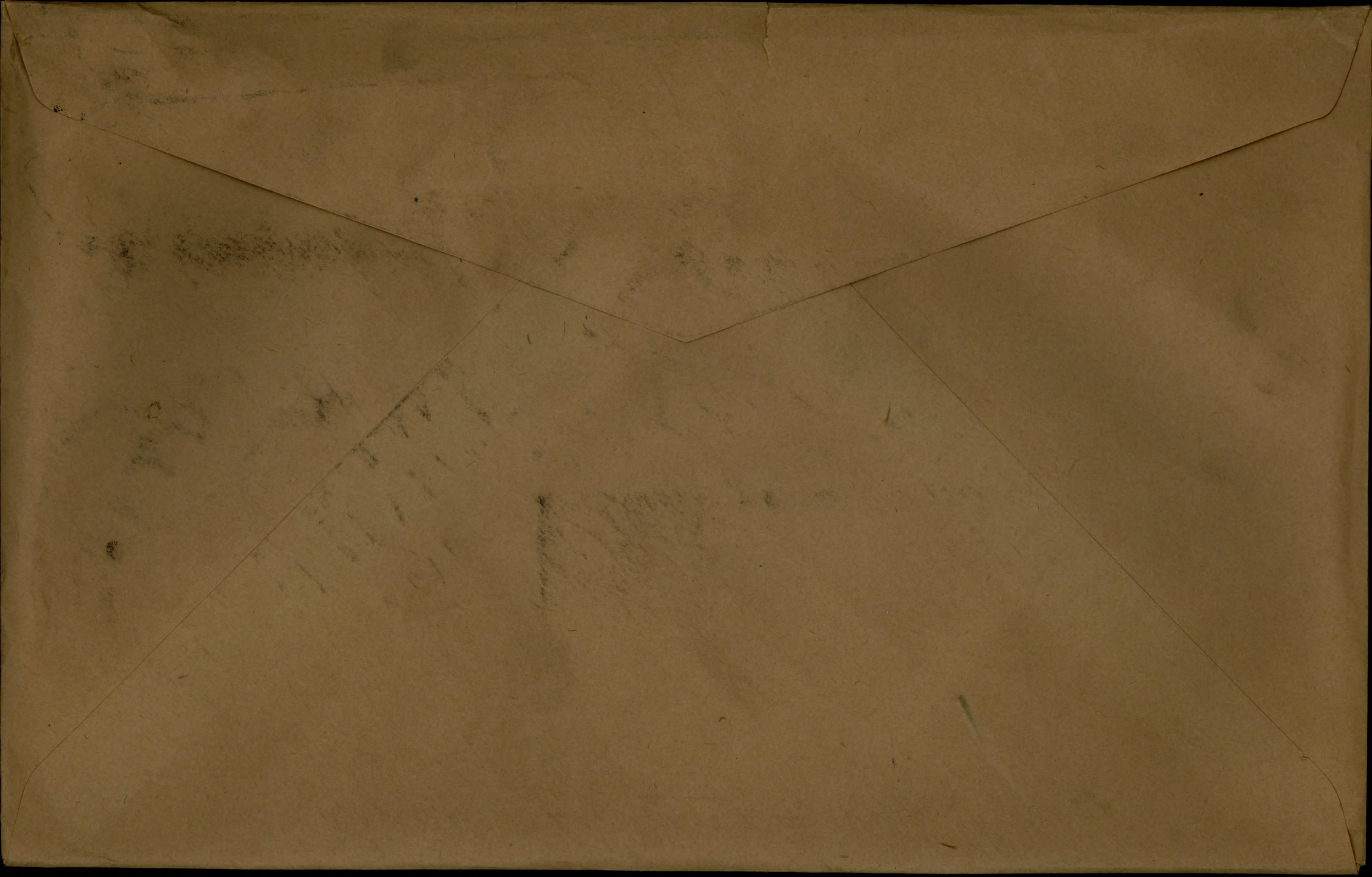
NAME **BARTON, JOS. VICTOR**

REGT. No. **163285**

UNIT **84 BN. FORM 109 REGT.**

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)					<b>DEATH</b>	
CASUALTY FORM (M.F.W. 54 or A.F.B. 103)						CATEGORY
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. 17j)					<b>DISCHARGE</b>	
DENTAL HISTORY SHEET (M.F.B. 465)						CATEGORY
MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					<b>MED. UNFIT</b>	
MEDICAL EXAMINATION (M.F.W. 129)						
TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)						
PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)						
DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)						
LAST PAY CERTIFICATE (M.F.W. 44)						<b>DESERTION</b>
PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)						
PARTICULARS OF CHARACTER (A.F.W. 3226)						
COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)						
CARDS						
PAY-SHEETS						

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



Original

# ATTESTATION PAPER.

No. 163285

8th Overseas B'n. C. E. F.

Folio.

## CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

### QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name?..... *Joseph Victor Barton*
2. In what Town, Township or Parish, and in what Country were you born?..... *Toronto, Can.*
3. What is the name of your next-of-kin?..... *Father Joseph Barton*
4. What is the address of your next-of-kin?..... *122 Sheridan Ave Toronto Ont*
5. What is the date of your birth?..... *June 19<sup>th</sup> 1897. Canada*
6. What is your Trade or Calling?..... *jam. maker.*
7. Are you married?..... *no.*
8. Are you willing to be vaccinated or re-vaccinated?..... *Yes.*
9. Do you now belong to the Active Militia?..... *Yes.*
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.*

*Joseph Victor Barton* (Signature of Man).  
*Charles Hutchison* (Signature of Witness).

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

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

*J. V. Barton* (Signature of Recruit)

Date *7<sup>th</sup> August* 191*8*. *C. Hutchison* (Signature of Witness)

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

I, *Joseph Victor Barton*, 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.

*J. V. Barton* (Signature of Recruit)

Date *7<sup>th</sup> August* 191*8*. *C. Hutchison* (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 *Niagara Falls* this *26* day of *Aug* 191*8*.

*[Signature]* (Signature of Justice)

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

*[Signature]* (Approving Officer)

Description of Joseph Victor Barton on Enlistment.

Apparent Age 18 years 2 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 Five 5 ft. 6 ins.

Chest measurement { Girth when fully expanded 35 ins.  
 Range of expansion 3 ins.

Complexion Fair

Eyes Brown

Hair Light Brown

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

1 Vaccination on Left Arm.

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 Aug 11<sup>th</sup> 1915

Place Toronto

[Signature]  
 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.

Joseph Victor Barton 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.

Date Sept 7 1915

[Signature] (Signature of Officer)  
[Signature] Lt. Col. Commanding  
 84th Bn. C. E. F.

## *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.)

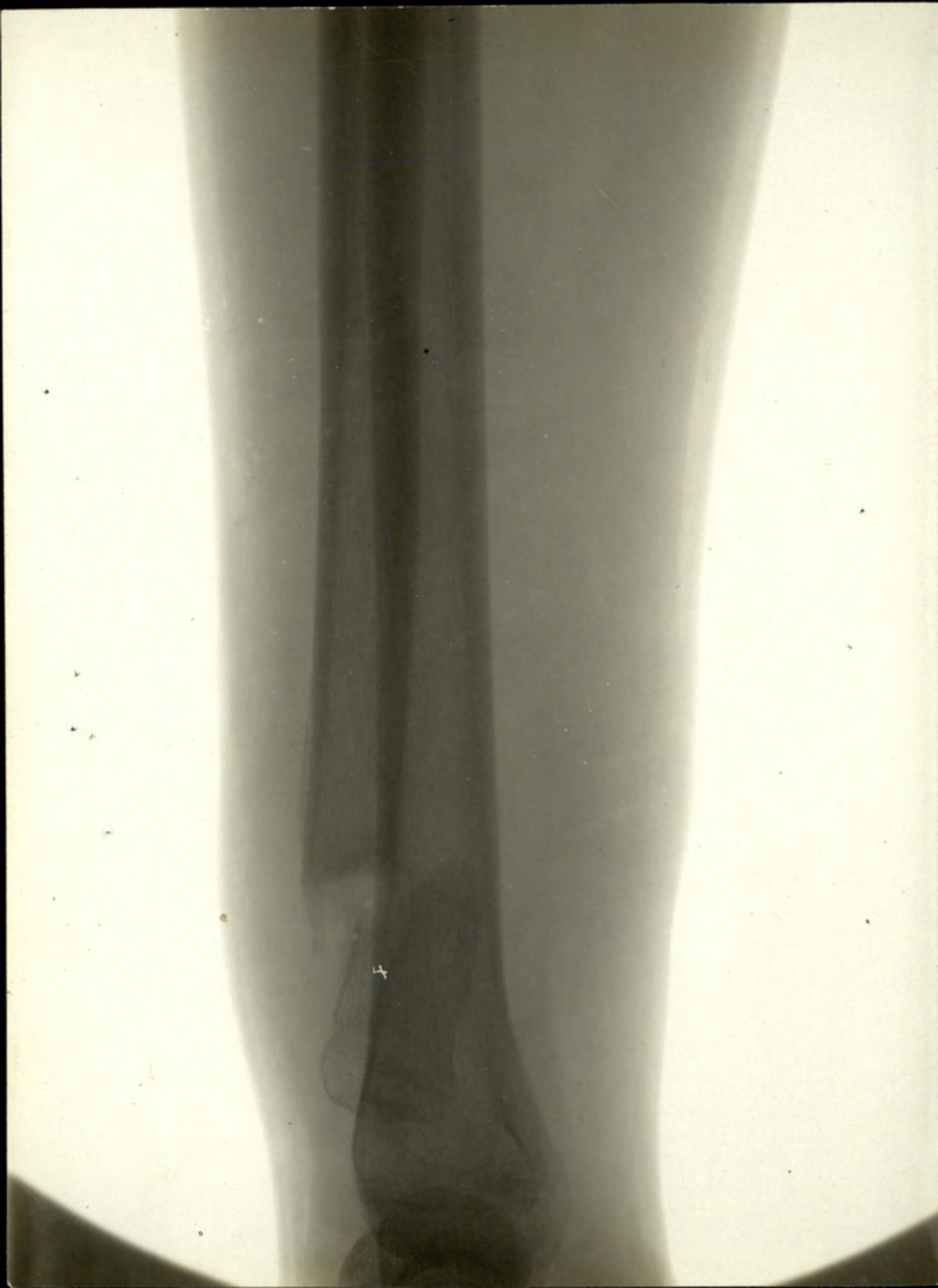


163285

Barton

1841

10-1-17





163285

Barton

1841 10-1-17

CERTIFIED CORRECT  
 1 SEP 1916  
 1 SEP 1916  
 CAN. RECORDS: LONDON

0743 38456

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

M. F. W. 54.  
 150M. 10-15.  
 H.Q. 1772-39-920.

# Casualty Form—Active Service.

84th Overseas Battalion, C.E.F.

Unit, Regiment or Corps

Regimental No. 63285 Rank Pte Name Barton, Joseph Victor  
C. E. F.

Enlisted (a) 7/8/16 Terms of Service (a) duration of war Service reckons from (a) 7/8/16

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) Jam maker

Date	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.
<u>3/7/16</u>	<u>B</u> O.C. 84th Bn.	<u>Embarked</u> <u>Disembarked</u> <u>Transferred to 75th Bn. Canadian Infantry</u>	<u>Canada</u> <u>England</u> <u>England</u>	<u>18-6-16</u> <u>29-6-16</u> <u>3-7-16</u> <u>30.6.16</u>	<u>W. Keworth</u> <u>Lt. Col. Comd.</u> <u>84Bn. C. I.</u>
		<u>Proceeded for service overseas</u>		<u>1/8/16</u>	<u>LT. COL.</u>
<u>6/8/16</u>	<u>75th</u>	<u>Appointed 1st Lt. Corp</u>	<u>Bshott</u>	<u>6/8/16</u>	<u>100 186. AB</u> <u>O.C. 75th CANADIAN INFANTRY BATTN</u>
	<u>7 NOV REC</u>				<u>Lt. Col. Northcote</u> <u>for Colonel i/c Records, C.E.F.</u>
<u>27-8-16</u>	<u>M.L.O.</u>	<u>Disembarked-France</u>	<u>France</u>	<u>12-8-16</u>	<u>L.R. 6280</u>
<u>21.10.16</u>	<u>O.C. 75th</u>	<u>Evacuated Wounded</u>	<u>Field</u>	<u>13.10.16</u>	<u>ATA 213; D.C. 37 dt 31.10.16</u>
<u>29.10.16</u>	<u>No 4 CCS</u>	<u>S. W. arm for admin</u>	<u>adm. no. 4. CCS.</u> <u>Traus 21 a. 1.</u>	<u>26.10.16</u> <u>27.10.16</u>	<u>ATA 36 No. 2. 1253.</u> <u>CCS. 42 dt 6.11.16</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, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties. [P.T.O.]

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
31-10-16	O.C.H.S. Jan Breydel	S.W. Forearm	To England	31-10-16	A.F.W. 3083 No. 142 Pt. II D.O. No. 249 d/- 6-11-16.  Lieut. for Lt. Col. A.A.G., Can. Sec. 3rd Ech. G.H.Q.
	D" Unit M.H.C.C.	S.O.S. Med. Unit	Toronto	31-10-17	H.Q. 649-B-9558 M.H.C.C. "D" Ba-79 d/1/11/17.  Capt. for D of R.

*[Handwritten signature]*

*[Faint stamp]*

*[Handwritten signature]*

NOV 1916

*Exam  
Completed  
H.D.*

BEDFORD COMMAND.

EDMONTON MILITARY HOSPITAL.

Full Bath \_\_\_\_\_

Blanket Bath \_\_\_\_\_

Conveyance to Ward \_\_\_\_\_

MEDICAL CASE SHEET.

Ward Coleridge West Religion CofE

Regtl. No.	RANK AND NAME. (Surname first).	Corps.	Squadron, Troop Company or Battery.	Age.	Service.	Number in Admission and Discharge Book.
163285	Barkin Jos. Capt	75 Canal	Sniper.	19.	15 12 35. 1/2	566

Admitted from Boulogne

Name and Address of nearest known Relative or Friend Aunt Mrs. Brown.

(This must not be left blank, if not known, state so.)

1. High St. Brentford. London

Date of Admission to Ward Oct 31 1916

Disease Sw L forearm C.F. ulna

Slight or Serious.  Serious

Convalescent Home—

Address while on leave, and name of Doctor attending.

Stretcher.

Regimental Depot

Name.....

Date..... Return.....

Date of Discharge or Death 10-11-16 191

(1) DIET.		Date when Discontinued.	(2) Initials of Medical Officer in personal charge.	Date when Ordered.	(3) EXTRAS.		(4) Initials of Medical Officer in personal charge.
Date when Ordered.	Diet.				Article.	Date when Discontinued.	
<u>Oct 31.</u>	<u>1.</u>		<u>CPH</u>				

If the Patient is wholly dieted on Extras, the word "Nil" is to be inserted in the column for Number of Diet. The date is to be inserted whenever the Diet is changed, or whenever any Extra is ordered or discontinued.

**CASE PAPER**—continued.

History of the Case: *wounded Oct. 26. by Sharpnell  
near Courcellette.  
Op. Oct. 26.*

Condition on Admission: *wound fairly clean operation  
in France but S could not be  
located.*

Termination of Case \_\_\_\_\_

In the event of Death, the date and apparent cause thereof:—

Date \_\_\_\_\_ 191 . Primary \_\_\_\_\_ Secondary \_\_\_\_\_

Date.	Record of subsequent History.	Date.	Record of Treatment.
15/11/16	C.H. C.H.		Ensol. dressing. For X Ray.

II

Form to be used instead of blank space on Army Form 179

Proceedings of Medical Board at Discharge Depot.

Number 163285 Rank L/c. Name and Corps of disabled soldier. Barton Joseph Victor 74<sup>th</sup> B.C.E.Z.

Previous Civilian Occupation. Jam. Maker.

Cause of disability:- ~~trauma~~ comminuted fracture L. ulna.

DEPT MILITIA & DEFENCE MAR 19 1917

163285-973-2558

Condition in detail which prevent the soldier earning a Full livelihood:-

Comminuted fracture L. ulna, Broken by glass <sup>some 1/3</sup> effusion carpi ulnaris Oct. 24. 1916 - some inclusion of tendon, in scar - weakness of arm, <sup>optimum bit</sup> about 1/3 power.

Opinion of the Board.

Degree of incapacity (Please state in fractions.) 30% decreasing with bone graft to 10%

Probable duration of incapacity:- ~~30~~ Permanent

Does it render him permanently unfit for "Military Service? yes

Would operation, special treatment or the use of appliances, etc., lessen incapacity. Convalescent Home

Signature. W. W. Carrick Major President. H. A. Kelly Capt and J. D. Wilson Capt Members.

Station. Quebec. Date 10/3/17

Approved. Date Mar 10/17 Assistant Director Medical Service. W. W. Carrick Major Date 23/3/17 Director General Medical Service. J. B. Kelly Capt

12-7-17 E. A.

11100

Form 100 is used in lieu of Blank Form 100  
Proceedings of Medical Board of President's Dept.

Number \_\_\_\_\_ Rank \_\_\_\_\_ Name and Corp. of disabled soldier \_\_\_\_\_

Previous Civilian Occupation \_\_\_\_\_

Cause of disability: -

Condition in detail when present should be stated in full  
Validity: -

Opinion of the Board

Degree of incapacity (Please state in fractions)

Probable duration of incapacity: -

Does it render him temporarily unfit for "Military Service"?

Would operation, special treatment or the use of appliances, etc.,  
lessen incapacity?

Signature \_\_\_\_\_ President \_\_\_\_\_

Members: \_\_\_\_\_

Station \_\_\_\_\_

Date \_\_\_\_\_

Approved: \_\_\_\_\_

Assistant Director, Medical Service \_\_\_\_\_

Director, General Medical Service \_\_\_\_\_

# CANADIAN CONTINGENT EXPEDITIONARY FORCE

## LAST PAY CERTIFICATE

COMMAND "D" UNIT No. 7

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

Regimental No. 163285 Rank L/Cpl. Name Barten, J.V. - 84th Bn.

Corps M. H. C.C. who was\* discharged

On October 31st, 1917, to Class III

\*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from October 1st, 1917, to October 31st, 1917, the inclusive date of transfer or discharge.

Dr.		\$	c	Cr.		\$	c
Bal. Dr. from prev. month				Bal. Cr. from prev. month			
Advances by Cheques } No. <u>36515</u>		<u>54.25</u>		Regt'l Pay <u>31</u> days at \$ <u>1.05</u>		<u>32.55</u>	
Assigned Pay No.				Field Allow. <u>31</u> days at \$ <u>10</u>		<u>3.10</u>	
Other Charges* <u>38768</u>		<u>13.00</u>		Other Allowances* <u>31</u> " "		<u>60</u>	<u>18.60</u>
Payment on transfer or discharge No.				Other Credits* <u>Clothing</u>			<u>13.00</u>
Balance Cr. (to be paid by the new unit)				Bal. Dr. (to be deducted by new unit)			
Total		<u>67.25</u>		Total		<u>67.25</u>	

\*Give Particulars.

A monthly stoppage of \$ - - (†) has - - (‡) been paid on account of Assigned Pay for the month of 1917 to (Assignee) 122 Sheridan Ave., Toronto.

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

### On Transfer of an Officer.

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

### REMARKS:—

- State (1) date of enlistment No.
- (2) if married and if a Separation Allowance Card has been submitted O.C. letter November 1st. D.O.306.
- (3) cause of discharge and authority - -

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

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

Date November 5th, 1917.

Place Toronto, Ont.

*Malcolm J. Cockburn*  
PAYMASTER, M.H.C.C. "D" UNIT, C.E.F.  
CAPTAIN

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

*Doeh*  
*19-11-17*  
*97*



CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

Name: ... Rank: ... who was: ... Discharged: ...

Statement of the account of the above named from ... to ...

Table with columns for Description, Amount, and Balance. Rows include: Bal. Cr. from prev month, Regular Pay, Field Allowance, Other Allowances, Other Credits, Bal. Dr. (to be deducted by way of), Total.

\*Give Particulars: ...

Pay to the order of: ... (Assigned) ...

On Transfer of an Officer: ...

Remarks: ...

Signature and Date: ...

Office of the A.D.M.S., Canadians, Shorncliffe,  
19 Westbourne Gardens,  
FOLKESTONE.

Feb. 2nd, 1917.

To: Officer i/c Records,  
Canadian Record Office,  
LONDON.

Name Barton, Joseph, B.

No. 163285 Rank L/Cpl.

Unit 109th Bn. 84th Battalion.

The above noted appeared before a Medical Board  
on Feb. 1st, 1917 and the following entry has been made on the  
Medical History Sheet of this man.

Board recommends:- Invalided to Canada

Signed T. Morrison, Captain, President, S. M. B.

Feb. 2nd, 1917, Approved,

Signed S. L. Walker, Captain for A.D.M.S., Canadians, Shorncliffe.

Further entries are also contained in this Sheet

which are herewith copied.

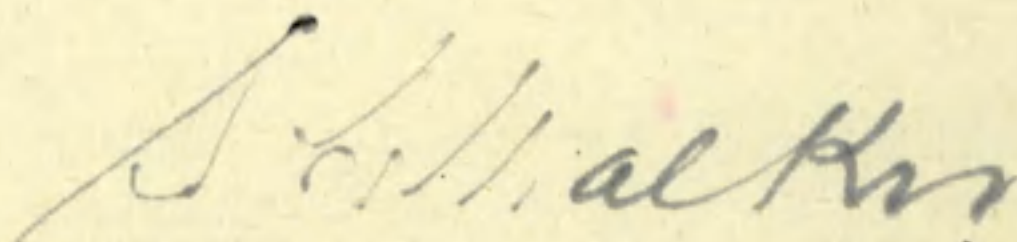
Edmonton Military Hospital, London, N., 31-10-16-10-11-16 S.W. left Arm.  
C.F. Ulna operation but could (Shrapnel) not be found. Signature illegible.

Woodcote Park, Epsom 16-11-16- G.S.W. Arm & Compound fracture. To  
Ramsgate for treatment. Signed C.C. Richardson, Captain, C.A.M.C.

G.C.S. Hospital, Ramsgate, 4-1-17- Do. No signature.

I hereby certify that the entries as above noted are

true copies.



Captain C.A.M.C.,  
for A.D.M.S., Canadians,  
Shorncliffe.

SLW/B.



DUPLICATE

ORIGINAL

MEDICAL HISTORY SHEET.

84th Overseas B'n. C. E. F.

163285

Surname Baxter

Christian Name Joseph

*Victor*

Examined { on 7 day of Aug 1915  
at Toronto

Approved by

*J. P. Bunker*

Birthplace { City or Town Toronto  
County Ont Canada

Rank Capt M.O.

Apparent age 18

Trade or occupation Pharmacist

Height 5 Feet 6 Inches.

Weight 120 Lbs.

Chest measurement { Minimum 32 inches.

Maximum expansion 35 inches.

Physical development Good

Small-Pox Marks None

Vaccination Marks { Arm Right Left  
Number 1

When Vaccinated last 3 years ago

(a) Marks indicating congenital peculiarities or previous disease None

(b) Slight defects but not sufficient to cause rejection None

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

Date	Result	VACCINATIONS.
<u>Aug 21</u>		<i>J. M. Gaulty</i> M.O.
		M.O.
		M.O.

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>Aug 18</u>		<i>J. M. Gaulty</i> M.O.
<u>23</u>		M.O.
<u>27</u>		M.O.

Enlisted on 9 day of August 1915 at Toronto

	CORPS.	REGT'L NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>109<sup>th</sup> Regt</u>			<u>Aug 3 1915</u>
Transferred to.. ..	<u>84 Bn CEF</u>	<u>163285</u>		<u>Aug 3/15.</u>
				<u>Aug 11/15</u>

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.

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.



ORIGINAL

MEDICAL HISTORY SHEET.

84th Overseas B'n, C. E. F.

Surname Barton

Christian Name Joseph

Rampali  
written 4/19/19  
Harry

Examined on 7<sup>th</sup> day of Aug 1915  
at Toronto

Approved by

JW Burson M.D. 172 JAN 1917

Birthplace { City or Town Toronto  
County Ont Canada

Rank Capt M.O.

Apparent age 18

Trade or occupation Chairmaker

Height 5 Feet 6 Inches

Weight 120 Lbs.

Chest measurement { Minimum 32 inches  
Maximum expansion 35 inches

Physical development Good

Small-Pox Marks None

Vaccination Marks { Arm Right Left  
Number 1

When Vaccinated last 3 years ago Aug 25

(a) Marks indicating congenital peculiarities or previous disease None

(b) Slight defects but not sufficient to cause rejection None

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

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

Date.	Result.	ANTI-TYPHOID INOCULATIONS, ETC.
Aug 18		M.O.
" 25		M.O.
" 27		M.O.

Enlisted on 3<sup>rd</sup> day of August 1915 at Toronto

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	109 Reg <sup>t</sup>			Aug 3 1915
Transferred to	84 <sup>th</sup> Bn CEF	163285		Aug 11/15


EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.

Stock 228E  
7-11-17  
GT

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.

Surname *Barton* Christian Name *Joseph H*

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				
 CANADIAN DIVISION; CONVALESCENCE HOSPITAL WOODCOTE PARK EPSOM		31	10	16	10	11	16	SWL arm	11	C, 7 ulna of foot S could not be found	<i>C. H. [Signature]</i>
		16	11	16	4	1	17	DO	51	Trans to Ramsgate for further treatment.	<i>[Signature]</i> Capt. G.A.M.C.
		4	1	17				Fract. ulna.		Ununited fracture lower end left ulna - wound has been healed for two months. needs bone graft - Inval. to Canada	<i>[Signature]</i>

Duplicate Medical History Sheet pasted to here.

MEDICAL CASE SHEET.\*

No. in Admission and Discharge Book.  
14130.  
Year

Regimental No.	Rank.	Surname.	Christian Name.
163285	Lt C	Barton	Joe.
Unit.	Age.	Service.	
75 Bn	19	15/12	



Station and Date  
4 JAN 1917

Disease *gsw Lt arm Comp frac of ulna.*

Occupation *clerk*

Enlisted *Aug 1. 15. Toronto.*

To England *June 30. 16.*

To France *Aug 8. 16*

Wounded *Oct 24. 16. Somme*

To England *Oct 31. 16*

Dentistry *- no*

Hospitals

*Boulogne #13. Gen 3 days*

*London Edmonton milty 16 days*

*Epsom years*

Disability - -

*disuse of left hand*

History of Injury

*Fracture of shaft of ulna entered the ulnar border of the left forearm just above the wrist - fracturing the ulna near its lower extremity. In France an attempt was made to remove the fragment. Wound discharged for 3 wks.*

*He now shows an un-united fracture of the ulna in its lower 1/3. There is also considerable swelling of the scar on the anterior surface of forearm with numbness pain on extreme flexion of fingers.*

*Ministry*

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



Station  
and Date.

To have X-Ray left forearm and part of left hand  
light microscope forearm. left. Return Thursday  
Urinalysis color  $\frac{1}{5}$  a. React  $\frac{1}{ac}$   $\frac{1}{10^2}$  -

4.1.14

EC bath, Massage with manipulation  
Gym Elbow & wrist classes.

13 JAN 1917

Capt Peegs

9.1.14

X-Ray Report. Fracture through lower  
 $\frac{1}{3}$  of ulna.

17-1-17

Urinalysis Color  $\frac{1}{straw}$  React  $\frac{1}{acid}$  Spec.  $\frac{1}{10^5}$

17-1-17

Gym Report Ununited fracture of lower end of  
ulna. - considering this he has good  
strong movement of hand & wrist.

24/1/17

appears to be ununited frach. lower end  
left ulna. D.D. neg 23/1/17 CHB

24 JAN. 1917

Has ununited fracture lower end of ulna -  
wound healed less than two months -

will require bone graft operation but should not be

done for two months yet. Invalued to Comd. A.S.O.S. 179

Discontinue Gymnasium - CHB

CHB  
S.A. Peegs

1/2/17

Invalued to Canada

Postmaster's copy

151  
*[Handwritten initials]*

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 *Joseph Victor* 2. Surname *Barton*
3. Rank *Sans. Corp.* 4. Original Unit *84<sup>th</sup> B.* 5. Reg. No. *163285*
6. Address, in full, to which future payments of gratuity are to be forwarded  
*Mr. J. V. Barton*  
*122 Sheridan Ave Toronto Can.*
7. Date of enlistment in the C.E.F. *7<sup>th</sup> August 1915*
8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge *No.*
9. Relationship of such dependent *No.*
10. Address, in full, of such dependent *No.*
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:—  
*75<sup>th</sup> Bn. Aug. 1916 - Oct 1916*
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 *Not applicable*
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 *I had 11 months service with 84<sup>th</sup> Bn. in Canada and Eng. and 10 Months service with 75<sup>th</sup> Bn.*
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.*

*3*

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 *3 months #2*
20. Have you been issued with a War Service Badge? If so, what class? *No. A*
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
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.? If not, give:—(a) Date of discharge *31 October 1917* (b) Reason for discharge *Medically unfit for further service*
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 *3 month service in France with 75<sup>th</sup> Batt. from 8 Aug till 27 Oct. 1917.*
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: *Joseph Victor Barton*

Place of Residence: *122 Sheildan ave. Toronto.*

Declared before me at: *Toronto*

This *Sixth* day of *January* 19*19*

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

**POST DISCHARGE PAY.**

Date paid.	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
<i>22-12-17</i>	<i>34.50</i>			
<i>12-1-18</i>	<i>34.50</i>			
<i>22-2-18</i>	<i>35.65</i>			
	<i>104.65</i>			

Certified Correct.

District Paymaster.

*[Signature]*  
 Lt. Col., C. A. P. C.  
 Paymaster, Military District No. 2

Temporary

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<sup>A</sup> to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY OF

Surname Barton Christian Name J. V.

TABLE I.—General Table.

Birthplace { Parish..... County.....  
Examined { on..... day of..... 191...  
at.....  
Declared Age 19 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...

	Corps	Regtl. No.
Joined on enlistment		
Transferred to		163285

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
Feb/17	<i>[Handwritten signature]</i>
2-FEB 1917	Approved <i>[Handwritten signature]</i> CAPT. FOR A.D.M.S. CANADIANS. SHORNCLIFFE.

TABLE IV.—Service Table.

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



A.G.R.

Rank

*W/SGT*

Name

BARTON, Joseph Victor

Reg'l No.

163285

Unit

84TH. BN.

If in perm. Corps,  
What Unit?

Married or Single

Single

Place and Date of Enlistment

Niagara, Ont., Aug. 7, 1915

Place of Birth

Toronto, Ontario

Name and Address, Next-of-Kin

Joseph Barton

122 Sheridan Ave., Toronto, Ontario

Relationship

Father

Assigned Pay Monthly \$

Payable to

Relationship

Separation Allowance \$

Payable to

Relationship

Discharge, Date and Place

Reason

Character

*R139-25*  
*6666*

N/E. R.B. No
File R.L. <i>banmm</i>
Category <i>6021</i>

H. W. & V., Ltd.—7165-16.

15/11/16

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				
25-8-16	84th Bn	<i>Arrived in England</i> <i>arrived in England with the</i> <i>acting Rank of 2/cpl</i>	<i>Empress of Britain</i> <i>Borden.</i>	28 JUN 1916 29-6-16	RH II DO. 198.
1-7-16	O.B. 84th Bn.	<i>S.O.S. on trans. to 75th. Bn.</i>	<i>Bordon</i>	30-6-16	D.O. 4th. II # 150
3-7-16	<i>oc 75th Bn</i>	<i>T.O.S on trans from 84th Bn</i>	<i>B'chott</i>	30-6-16	153
6-8-16	<i>75th</i>	<i>Appointed a Lance Corporal</i>	<i>"</i>	6/8/16	<i>a. 2. B. 103 Ckd 18/8/16 14/16</i>
10 8-16	75th.	<i>Embarked For France</i>	<i>Bramshott</i>	II-8-16	Part 2 D. O. 139
6-11-16	<i>75th</i>	<i>Adm No 3 Can. Gen Hq.</i>	<i>Boulogne.</i>	28/10/16	Ch. ASK S.W. Fract L Borden <i>det.</i>
9-11-16	<i>75th</i>	<i>Adm Edmonton Int. Hq (Silver street)</i>	<i>Edmonton N.</i>	31/10/16	C.L B77 8 SW h forearm
6-11-16	<i>75th</i>	<i>Wounded, trans to C.C.A.C.</i>	<i>Shoreham</i> <i>on sea</i>	31-10-16	Pt II DO, 249 (W)
13-11-16	C.C.A.C.	<i>Taken on strength.</i>	<i>Shorham</i>	31-10-16	Pt II O 499
28-11-16	75 Bn.	<i>Tfd to CCH Woodcote Park</i>	<i>Epsom</i>	17-11-16	CLB 93 do.

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.				
10-1-17	75 Bm	Tfd to Gran Can Spec Hosp	Ramsgate	5-1-17	CRB 125 BSW I Form comp free
3-3-17	-do-	Disc from Gran Spec Hosp.	-do-	19-2-17	6 L.B. 170 - " -
28-2-17	b b a b	Proto ban for disc is S.S.	Hastings	19-2-17	PA II O. 101.
	Dis Dep	To Gen Home.	MD2 Toronto	5-3-17	HR 217

ASSIGNED PAY

Mrs Margaret Barton Mother  
OVERSEAS CONTINGENTS  
PAYMENTS.

Sheet No. 2.

L. L. Job 310.—Req. 6574.

Name of Soldier Barton J. V.  
# 163285 84th Batt A Co.

Month.	Year.	Cheque No.	Amt.	Remarks.
			\$20 <sup>00</sup>	JUN 1 1916
April	1916			
May				
June				
July		87264	40	}
Aug.		10629	20	
Sept.		217104	20	
Oct.		2 21622	20	
Nov.		025857	20	
Dec.		1032845	20	
Jan.	1917	38582	20	
Feb.		943556	20	20 JW
March		<del>343552</del>	<del>20</del>	<del>20 Canceled</del>
April				
May				
June				Apr closed Put'd Esquibo 19 2/17 M.H.
July				
Aug.				180 <sup>00</sup> 7 X 5 3/17 M.H.
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

Obs H.M.S.

M.H.

JW



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.				

MILITIA AND DEFENCE  
**ASSIGNED PAY**  
 OVERSEAS CONTINGENTS

490

*WMT*

To Whom *Mrs Margaret Barton* By Whom Assigned *Barton J. E.V.*  
 Address *122 Sheridan Ave Toronto* Regtl. No. *163285*  
 Rank *L/Cpl.*  
 Corps *84<sup>th</sup> Batt A. Co.*

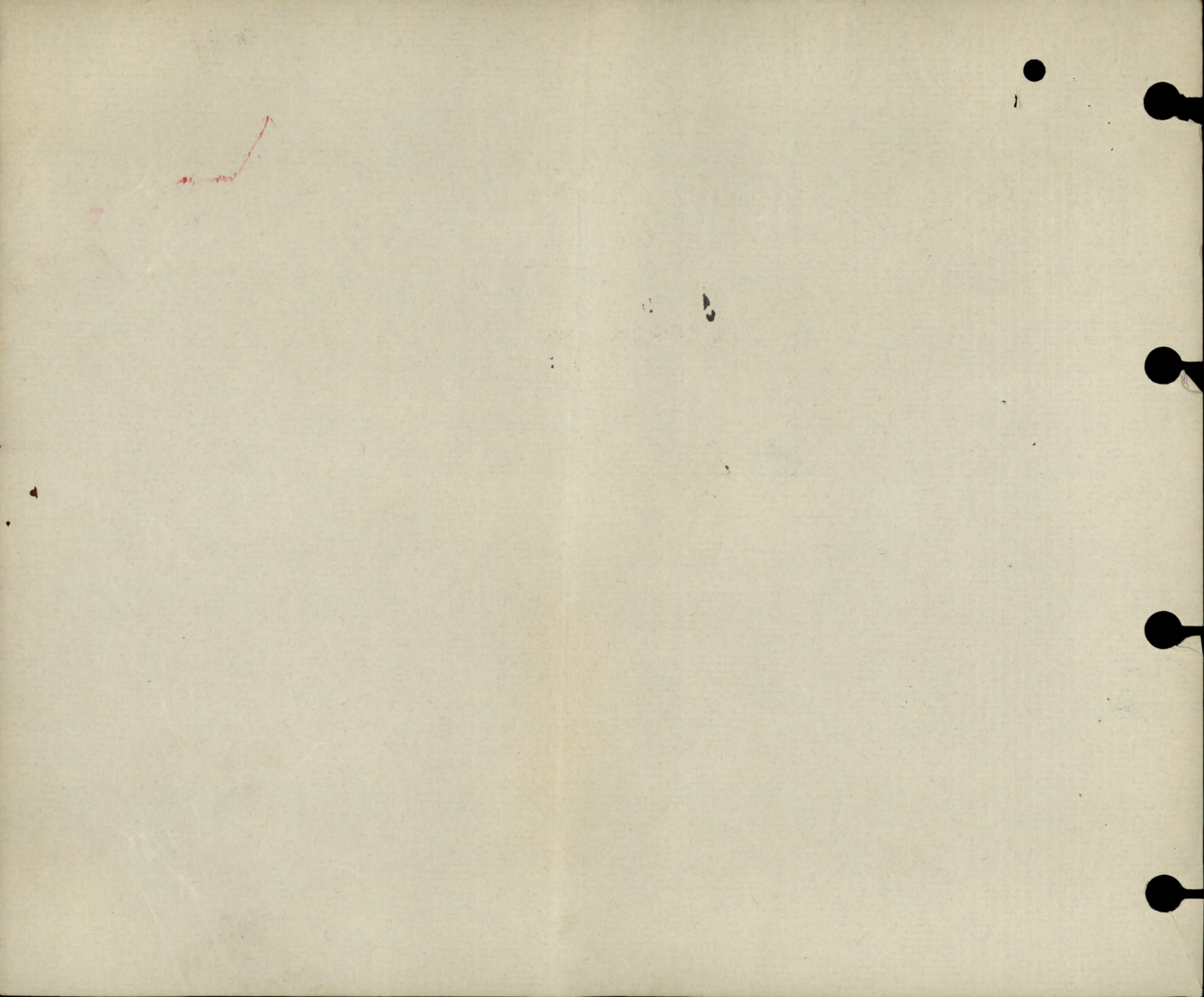
Rate *\$ 20<sup>00</sup>*

**JUN 1 1916**

**PAYMENTS**

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			<i>Due to Canada                      Stop payment 1/3/17                      J.M. 8/2/17 J.A.M. 19/3/17</i>  <i>acc closed</i>
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				





Name

*Barton Pte JV (L/Corp)*

Regimental No.

*163285*

Name and address of next-of-kin

*127 Sheridan Ave  
Toronto  
Ont*

Unit

*84 Bth*

Date of enlistment

Place of

Married (yes or no)

*No*

Date and place discharged

Amount of pay assigned monthly \$

*20 Febry 1917*

Reason for discharge

To whom payable

*Mrs Margaret Barton*

Character on discharge

*127 Sheridan Ave Toronto. Consequito. 5<sup>3</sup>/<sub>17</sub>*

L. L. Job 6351 - M. & D. 6880.

Date		No. of Days	PAY		Field Allowance		Other Credits	Total Credits	Voucher		Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
From	To		Rate	Amount	Rate	Amount			No.	Date					
<i>9<sup>2</sup>/<sub>17</sub></i>	<i>8<sup>2</sup>/<sub>17</sub> 31<sup>13</sup>/<sub>17</sub></i>	<i>51</i>	<i>1<sup>55</sup>/<sub>100</sub></i>	<i>53.55</i>	<i>51</i>	<i>.10</i>	<i>5.10</i>								<i>Quebec J. Ollivier 1/4/17</i>
								<i>24 58</i>							
								<i>82.73</i>						<i>82.73</i>	
															<i>Pensioned. fr. 1-11-17</i>



# POST DISCHARGE PAY OFFICE

2502/51

Three months pay and allowances after discharge.

Name **Barton, Joseph Victor**  
Surname Christian Name

986-J-1

Regimental Number **163285** Rank **L/Cpl.**

Address (in full) **122 Sheridan Ave.**

Unit **84th Bn.**

**Toronto, Ont.**

Original Unit

District where paid **M. D. 2**

Date of Discharge **31-10-17**

P. D. P. Filing Number **10-194-2**

Rates:—Regimental pay \$ **1.05** per diem: Field Allowance \$ **.10** per diem. Separation Allowance \$ \_\_\_\_\_ per month.

L. L. 22573—M. & D. 8009.

Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Over-payments to be Recovered	Total Amount Paid
	Cheque No. A	Date	Amount 30 days	Cheque No. B	Date	Amount 30 days	Cheque No. C	Date	Amount 31 days		
104 65	2990	22-12-17	34 50	2983	22-1-18	34 50	2909	22-2-18	35 65		104 65
	<del>1st 2543</del>	<del>6/2/19</del>	<del>70 00</del>								
	<del>138<sup>2</sup> 221015</del>	<del>26/2/19</del>	<del>70 00</del>								

Remarks:

M. F. W. 127.  
50M-6 17.  
1772 39-1140.

*Amn*

B.M.

Dec'n No 2502/31 W. S. G. File No 986-7-1

Award ..... days at \$ 70.00 per day \$

S. A. .... months at \$ ..... per mo. \$ 350.00  
Less P. D. P. Credited \$ 104.65  
\$ 245.35

Less further debit balance \$ .....  
Net due paid as below 245.35

TO SOLDIER TO DEPENDENT

O	Ag. No.	Ch. No.	ou	Amount
1	236	79543	70 00 ✓	
1	3FA	221015	70 00 ✓	
1	31B	421588	70 00 ✓	
1	18C	445842	35.35 ✓	

10-4-19  
Remailed  
Traces 12264  
20-5-19

122. Sheridan Ave.  
Toronto Ont.

GEN'L AUDITOR  
Posting stamped by  
*Quillock*  
Date 21/19

R.H.

Ba-79

Name *[Ate]* Barton, J. V.  
*[L/Cpl]*

M. F. W. 41  
1 OM-7-16  
1772-39 889.

Regimental No. 163285

Name and address of next-of-kin

Unit 84th Bw.

Discharge  
Oct letter

Date of enlistment

Nov 1st.

Place of

Married (yes or no) No.

Date and place discharged

No 306.

Amount of pay assigned monthly \$ ~~20.00~~ *Al for Feb*

Reason for discharge

To whom payable Mrs. Margt Barton  
122 Sheridan Ave Toronto

Character on discharge

5351-M. & D. 6880.

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date					
1 Apr	30	30	1 <sup>05</sup>	31 50	30	10	3 -	9 60 42 73	86 83	16252 15366	61 83 25 -			86 83	Ingr 40 2088 Mar 16-31 APR	
1 May	31	31	1 <sup>20</sup>	32 55	31	10	3 10	18 -	53 65	19206	53 65			53 65	Quit, Cpl indef DO 121 In May 1. DO 143 to 21 190 Quit June 3 Inc. 186 Quit May 1 <sup>st</sup> to 21 <sup>st</sup> DO 190	
1 June	30	30	1 <sup>05</sup>	31 50	30	10	3 -	16 80	51 30	<del>34 50</del> 22095	34 50			34 50		
1 July	31	31	1 <sup>05</sup>	32 55	31	10	3 10	16 80 18 60 12 00	<del>52 45</del> 83 05	23593 26 002	16 80 30 60			83 05	Quit July P.R.	
1 Aug	31	31	1 <sup>05</sup>	32 55	31	10	3 10	18 60	54 25	28719	54 25			54 25	A.P.R.	
1 Sep	30	30	1 <sup>05</sup>	31 50	30	10	3 -	18 -	52 50	33 503	52 50			52 50	Quit D. O. Sep 21 268 S.P.R.	
1 Oct	31	31	1 <sup>05</sup>	32 55	31	10	3 10	18 60 13 -	51 25 67 25	365 15 387 68	54 25 13 -			67 25	O.P.R.	





Surname *Barton* Christian Name or Names *J.W.* Reg. No. *163285-*

Rank *A.L.C.* Unit *75<sup>th</sup> Btn.* Co. Troop Batty.

Hospital *3 Coy General, Boulogne* Date of Admission *28-10-16*

Transferred *Edmonton Hill* Hosp. *31.10.16*

*Woodcote Pt. Epsom* Hosp. *17.11.16*

*Granville Spic. Ramsgate* Hosp. *5-1-17*

Hosp.

Diagnosis *SW<sup>comp.</sup> Fract. L Forearm (slt-)*

(1) Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

DISPOSITION

Date

*cz. 6-11-16 # @ 54*

*9.11.16. 1577*

*28.11.16 # B193*

*" 10-1-17 B125*

*3-3-17 B170 Dis. 19-2-17.*

REMARKS

A.M.D. 2 DEPT.

Edn. of D. S. M. S. O. M. F. C. London.  
London.

R

# EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

Name BARTON, J. V. Rank L/Cpl. Regt. No 163285 Unit D  
 Battn. 84th Camp or O.S. 0 File M.H.C.C. \_\_\_\_\_ H.Q. File \_\_\_\_\_  
 Pension awarded \_\_\_\_\_ Date of first payment \_\_\_\_\_  
 Discharged to Class 3 Conduct on discharge Good.  
 Next of kin Mother, 122 Sheridan Ave. Toronto.  
 Address on discharge Do.

DATE	CLASS	REMARKS	PART 2 ORDER
16-3-17	2	Spadina	#78 #102
1-4-17	2	Do indefinitely	#121
1-5-17	2	Spadina	#143 #190
21-5-17	2	T.G.H.	#143
2-6-17	2	Spadina from T.G.H.	#186
3-6-17	2	Spadina (Outpatient indefinitely)	#186
21-9-17	2	Spadina (Outpatient pending discharge)	#268
31-10-17	3	DISCHARGED.	# 306



Name BARTON. Joseph. Rank A/L/Cpl.  
Victor.

Reg. No. 163285.

Unit 75th Batt.

Next of Kin Canada.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1916.						6-11.
28-10.	3 Can Gen Hosp.	Boulogne. SW. Frac.	L Forearm.	A54.	0.4194.	
31-10.	Edmonton Mil Hosp.	Silver st. Edmonton.	N.			
			Do.	B.77.		
17-11.	Can Con Hosp.	Wicot. Pk. Epsom.	Do.	B93.		
5-1.	Granville Spec Hosp.	Ramsgate.	Do.	B125.		
19-2.	Discharged		Do.	B170.		



Flam  
Number 163285 Rank a/s/cpl

Surname BARTON

Christian Name Joseph Victor

Units 75th Bn. Can. Inf. Theatre of War France

Date of Service 12-8-16

Remarks \_\_\_\_\_

Latest Address 122 Sheridan Ave.

Toronto Ont.

Roll No. B. Page 22813

5m-1-22. M304.



DESP. APR 4 1923  
REGN. NO. 64334

No. 163285. RANK

Pte.

NAME

Barton J.

D.

T. O. S.

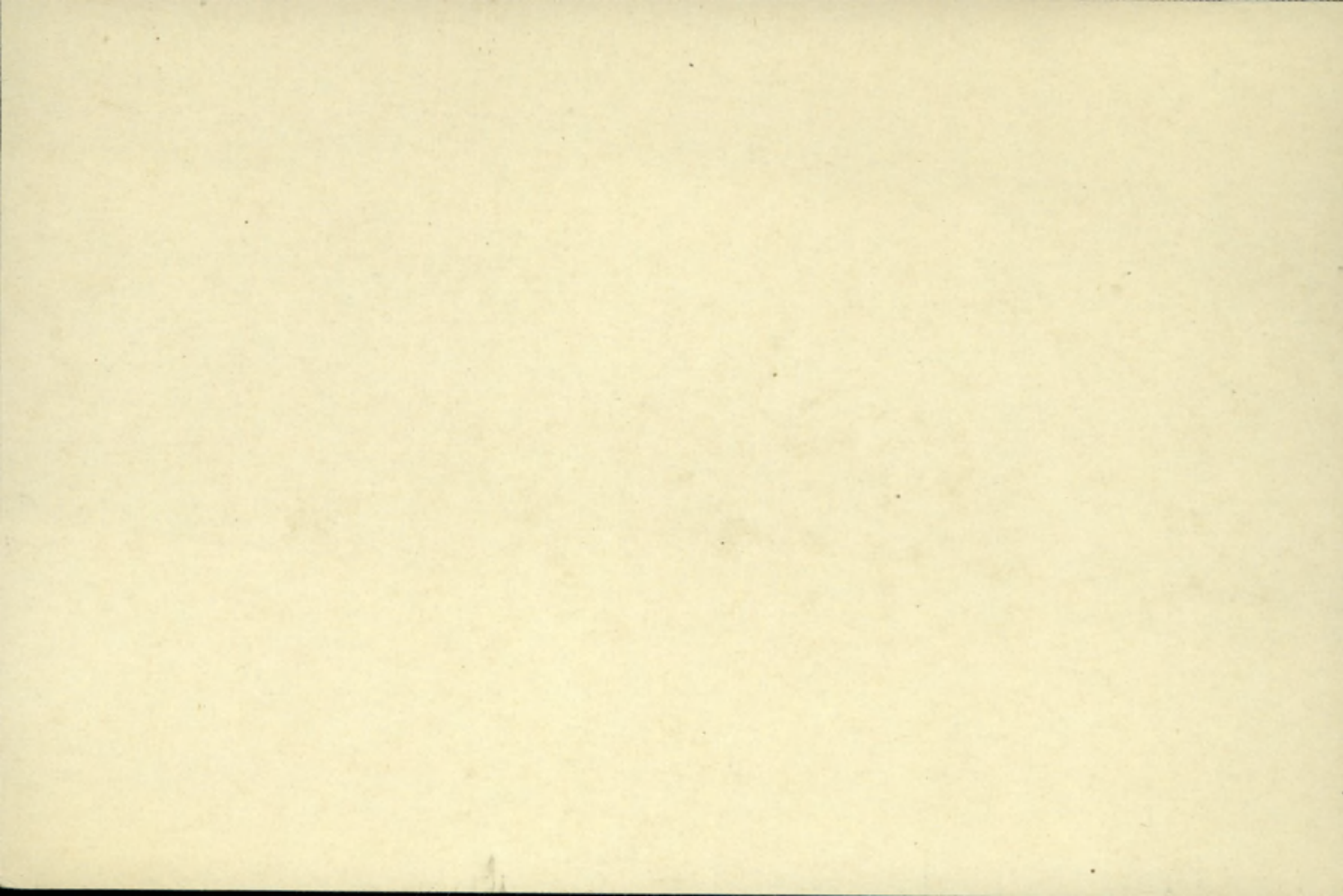
UNIT

Discharge Depot, Lehigh

M. D.

5

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1917 Mar no dates	1917	✓	84 ch.	



No. 163.285. RANK *Pte*

NAME *Barton Joseph Victor*

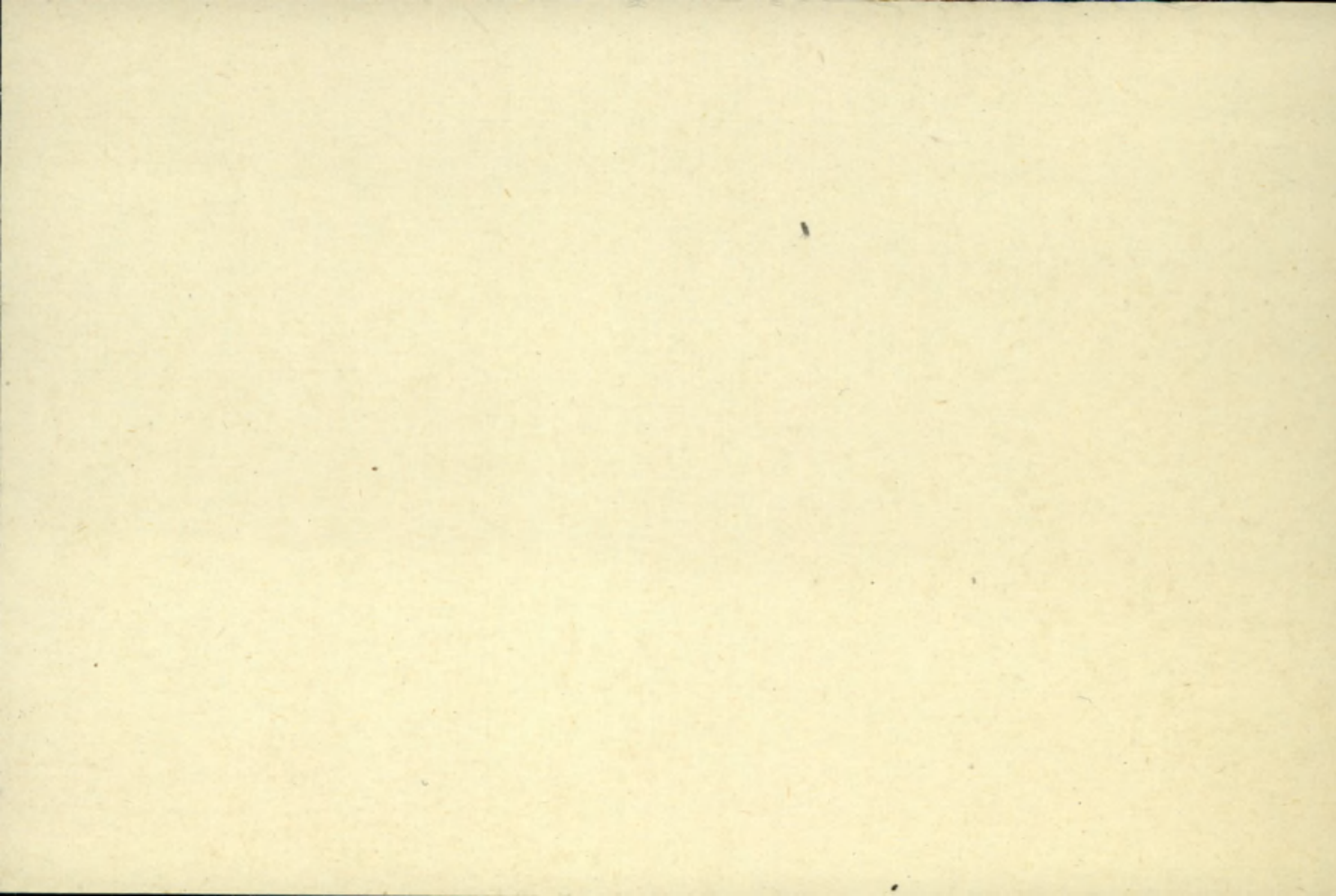
T. O. S.

UNIT *84<sup>th</sup> Battalion C I F  
(109<sup>th</sup> Regt Quota)*

M. D. 2

PAID		SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
FROM	TO		PARTICULARS	AUTHORITY
<i>1914</i>	<i>1915</i>			
<i>Aug 2</i>	<i>Aug 11</i>	<i>✓</i>		
	<i>Sept</i>	<i>✓</i>		
	<i>Oct</i>	<i>✓</i>		
	<i>Nov</i>	<i>✓</i>		
	<i>Dec</i>	<i>✓</i>		
<i>1916</i>	<i>Jan 1916</i>	<i>✓</i>		
	<i>Feb</i>	<i>✓</i>		
	<i>Mar</i>	<i>✓</i>		
	<i>Apr</i>	<i>✓</i>		
	<i>May</i>	<i>✓</i>		
	<i>June</i>	<i>✓</i>	<i>shown as Lie cpl.</i>	

UNIT SAILED  
JUN 18 1916



NAME *Barton Joseph Victor*

REGT'L No.

*163285*

RANK AND CORPS

*A/L/Capt. 75th Bu. form*

H. Q. FILE No. 649.

FOLLOWS

No.

*84th Bu*

FOLLOWS

CABLE

NO.

DATE

NATURE OF CASUALTY

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
268	M.H.C. Toronto	21-9-17.	J.U.L. Spadina U.P.
306	" " " "	31-10-17.	Disce. from H.M.S. cl 3

NAME *Barton Joseph Victor*REGT'L. No. *163285*RANK AND CORPS *Act. / L. / Cpl. 75th Bn. (form. 84th)*

## CABLE

No.

DATE

## NATURE OF CASUALTY

No.	DATE	NATURE OF CASUALTY
04194	4-11-16	Adm. 3 Gen. Hosp. Boulogne Oct. 28th 1916 wounded left arm fractured ✓
7318.	25.2.17.	Sailed from Liverpool for Canada per the Hosp Ship Esquibo on 19th Feb. 1917. Fract. L. Arm.



LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
954	#3 Can Gen. Boulogne	28-10-16	SW. Fractured L. Forearm SLT
B77	Edmonton Mil Silver St. Edmonton H.	31-10-16	SW. L. Forearm.
B93	Can Dis Comh Woodville Epson	17-11-16	SW L. Forearm Fractured
B125	to Granville Can. Spec. Ramsgate	5-1-17	SW & & & Comp. Frac.
B170	Bush	17-2-17	SW fractured R. Forearm
78 <sup>(3)</sup>	M. H. C. C. Toronto	16-3-17	Adm. Spadina M. H. C. #
121 <sup>(4)</sup>	M. H. C. C. Toronto	1-4-17	Spadina M. H. (out-patient)
143 <sup>(7)</sup>	" " " " "	21-5-17	" " " " to 500. Gen. Hosp.
183 <sup>3</sup>	" " " " "	3-6-17	Taken on list (out pat) Spad.
185 <sup>2</sup>	" " " " "	2-6-17	T. G. H. to Spadina
190 <sup>2</sup>	" " " " "	6-7-17.	(out patient) Spad. taken on list.

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, 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.

This space to be left blank for the Chelsea Number.



5-3-17

Proceedings on Discharge.

Army Form B. 268.  
 TORONTO. ONT.  
 24 SEP 1917  
 DEPT. MILITARY SERVICE

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

No. 163285 Army Rank Lance Corporal

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

Corps 84th. Battalion, C.E.F.

Battalion, Battery, Company, Depot, &c. C.C.A.C.  
 (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 31-10-17

Place of discharge Invalided to Canada by authority of Medical Board, Toronto

1. Description at the time of discharge.

Age	years	months	Descriptive marks.
Height	feet	inches	Scar. 3 in long. up from outer condyle. L. arm.
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)			

(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 Med. Unfit.

(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.

Army Form B. 2088 has been issued to\*

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

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

Classification for service, or proficiency pay ... .. Class \_\_\_\_\_

6. Campaigns, Medals and Decorations

\_\_\_\_\_
\_\_\_\_\_
\_\_\_\_\_
\_\_\_\_\_
\_\_\_\_\_

Certificate of education .....

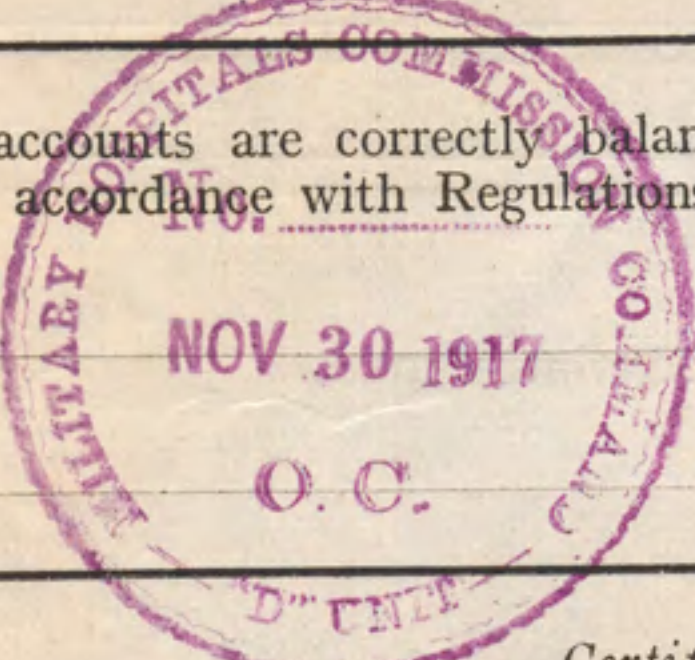
7. His accounts are correctly balanced, and I have impartially inquired into all matters brought before me in accordance with Regulations.

(Place) \_\_\_\_\_

(Date) \_\_\_\_\_

Wm Macell Lt

Commanding ~~Batt.~~ Lieut. Regiment.
O.C. (D) Unit M. H. C. Command



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.

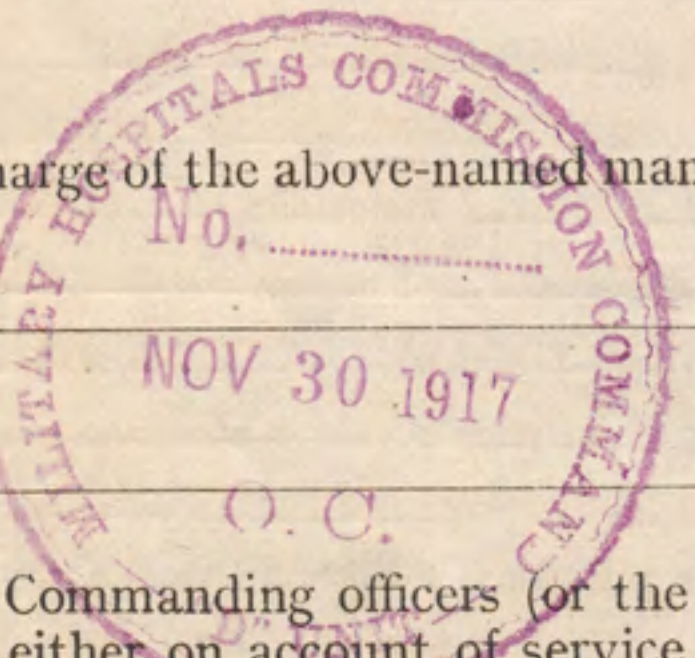
The discharge of the above-named man is hereby confirmed for 31/12/17 (date)

(Place) \_\_\_\_\_

(Date) \_\_\_\_\_

Signature Wm Macell Lt

O.C. (D) Lieut. Colonel



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.)

\_\_\_\_\_

P. 559.  
MARRIED OR SINGLE

PLACE OF BIRTH *Toronto Ont.*

NAME AND ADDRESS OF NEXT OF KIN  
*Joseph Barton  
122 Sheridan Ave. Toronto Ont.*

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
<i>B' Prom. Lt Jopl</i>	<i>6-8-16</i>	<i>B.O. 186</i>

DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL
<i>Jul</i>			

REG'L. No. *163285.* RANK *Private* NAME *Barton Joseph W. 1st Lt*

IF IN PERM. CORPS  
WHAT UNIT *81st Bn* TRANSFERRED TO *45th Bn.* DATE *1-8-16.* AUTHORITY *B.O. 150. 4/16.*

PERMANENT FORCE ALLOWANCES TRANSFERRED TO *6666* DATE *1/12/16* AUTHORITY *62B-77*

PLACE OF ATTESTATION *Piagara.* TRANSFERRED TO *L.P.L.* DATE *9/1/17.* AUTHORITY *7/4/17*

DATE OF ATTESTATION *7th Aug. 1915.* TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY \$ *22.25* DATE EFFECTIVE *1st July 1916.*

PAYABLE TO *Margaret Barton, 122 Sheridan Ave. Toronto.* RELATIONSHIP

ASSIGNED PAY MONTHLY \$ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) *8-2-17* EFFECTIVE *1-3-17* REASON *Disch'd to Canada*

DISCHARGE DATE AND PLACE *Canada 8-2-17.* REASON AND AUTHORITY *661318. 7/2/17*

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE) *9-2-17* Entered on N.E. Card Index 8-2-17

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE) Checked by *P. Peniam*

DATE	PAY				FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS								CASH PAYMENTS				BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS		
	No. OF DAYS	RATE		AMOUNT		No. OF DAYS	RATE		AMOUNT		No. OF DAYS	RATE				AMOUNT		1	2	3	4	1	2	3	4	TOTAL DEBITS	CREDIT	DEBIT						
		\$	C.	\$	C.		\$	C.	\$	C.		No.				DATE	No.												DATE				No.	DATE
1916															8										8							<i>Bal from Canada 30.8.16.</i>		
Checked <i>M. Peniam</i>	July	31	1.05	31.15	31	1.0	31.00	31	1.0	31.00					34	10								20	22	20	22	10						
	Aug	5	1.05	5.25	31	1.0	31.00	31	1.0	31.00					35	40	31	25						20		27	30	30	20					
	Sept	30	1.05	31.50	30	1.0	30.00	3							34	30	11	1.05			278	1.05		20		27	47	37	23					
	Oct	31	1.05	32.55	31	1.0	31.00	3							35	65	22	30	2.07	1.10				20		27	84	45	64					
Checked <i>M. Peniam</i>	Nov	30	1.05	31.50	30	1.0	30.00	3							34	50								20	20	59	54.					<i>Trans to 6666</i>		
	Dec	31	1.05	32.55	31	1.0	31.00	3							35	65								20	20	37	03	58	16					
	1917	Jan	31	1.05	32.55	31	1.0	31.00	3						35	65								20	20	34	60	59	21					<i>80 under credits Feb</i>
Checked <i>G.W. Williams</i>	Feb	8	1.05	8.40											8	40					232	3-27		20		24	33	47	61					<i>Trans to L.P.L. 9/17 but 918-7/17  Disch'd to Canada 3/17 888 7/17  L.P.L. rendered 8-2-17.  A.P.M. rendered 8-2-17.  Credit balance 24.08  Pay Book verified B. Dury  X Contract 1/5 pay book  Cibal 24.08.</i>
	Mar	22	1.05	23.10											80	80								24	33	24	08							<i>Trans to "Canada Dis'go 2/17</i>
	Apr														262	65								24	33	24	08							
	May																																	



NE

Medical Report on an Invalid.

Station Chatham Hotel  
Ramsgate  
Date 28. 1. 17.

- 1. Unit. 84<sup>th</sup> Batt.
- 2. Regimental No. 163285
- 3. Rank L/c. Barton J. B.
- 4. Name Barton J. B.
- 5. Age last birthday 18.
- 6. Enlisted  on 3<sup>rd</sup> Aug. 1916.  
 at Toronto, Ontario.
- 7. Former Trade  Chairmaker  
or Occupation

8. Disability. Ununited fracture of the left ulnar in its lower third.

Statement of Case.

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.

- 9. Date of origin of disability. Oct. 27<sup>th</sup> 1916.
- 10. Place of origin of disability. Somme France
- 11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case. He states that on duty Oct. 27<sup>th</sup> 1916 on the Somme he was hit by a piece of shell on the ulnar border of the left forearm in the lower third fracturing the ulnar, which has failed to unite. Hospitals Boulogne Gen. H. 3 days. London. Edmonton. Mil. 16 days. Epson. 7 wks. Gran. Can. Spec Hosp. Ramsgate. 14. 1. 17

Officer in medical charge of case. I have satisfied myself of the general accuracy of this report, and concur therewith.

- 12. (a) Give your opinion as to the causation of the disability. G. S. U. B.
- (b) If you consider it to have been caused by wounds received or illness contracted (1) in the presence of the enemy (2) on active service, explain the specific conditions to which you attribute it. (See notes on page 3). Fracture of the lower third of the left ulnar failing to unite.

11-17-17  
11-17-17

PENSIONS AND CLAIMS BOARD, Canadian Expeditionary Force, assembled at Prior Park, Bath, England, on the \_\_\_\_\_ day of \_\_\_\_\_ 191\_\_\_\_  
Members of Board.

Proceedings.

The Board having considered the evidence of the man marginally noted, and the documents submitted, hereto attached, which form part of these Presents, marked

- 20. (a) State whether the disability is the result of injuries received or illness contracted (1) in the presence of the enemy (2) on active service. It is therefore essential to differentiate between them see Articles 441 to 448 of the Canadian Pay and Allowance Regulations. (iii) The rates of pensions vary according to whether the disability is attributed to (1) injuries received or illness contracted (2) in the presence of the enemy (3) on active service. It is therefore essential to differentiate between them see Articles 441 to 448 of the Canadian Pay and Allowance Regulations. (iv) In answering question 20 the Board should be careful to discriminate between disease resulting from military operations and disease to which the soldier would have been equally liable in civil life.
- 21. Has the disability been caused or aggravated by (a) Intemperance? (b) Misconduct? (c) Negligence?
- 22. Is the disability permanent?
- 23. If not permanent, what is its probable minimum duration? To be stated in months.
- 24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present? In defining the extent of his inability to earn a livelihood, estimate it in £, s., d. or local currency.
- 25. If an operation was advised and declined, was the refusal unreasonable?
- 26. Do the Board recommend (a) Fit for duty? (b) Fit for base duty? (c) Invalided to Canada? (d) Discharge as permanently unfit?
- 27. Remarks.

Signed at Prior Park, Bath, this \_\_\_\_\_ day \_\_\_\_\_ 191\_\_\_\_  
President. \_\_\_\_\_  
Members of \_\_\_\_\_  
Approved. \_\_\_\_\_  
President. \_\_\_\_\_  
Administrative Medical Officer. \_\_\_\_\_

2189 (189) 2073/17

13. What is his present condition?

Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.

Want of ability to fully use the left arm caused by the ~~wound~~ fracture not uniting. He is feeling fit to carry on in every other way. Pronation & supination flexion & extension normal. Only weakness complained of.

14. If the disability is an injury, was caused?

- (a) In the presence of the enemy? *yes*
- (b) On active service? *yes*
- (c) On duty? *yes*
- (d) Off duty? *not applicable.*

15. Was a Court of Inquiry held on the injury?

- If so—(a) When? *no*
- (b) Where? *not applicable.*
- (c) Opinion? *not applicable.*

16. Was an operation performed? If so, what?

*no*

17. If not, was an operation advised and declined?

*no*

18. In case of loss or decay of teeth. Is the loss of teeth the result of wounds, injury or disease, directly\* attributable to active service?

*not applicable.*

19. Do you recommend

- (a) Fit for duty? *no*
- (b) Fit for base duty? *no*
- (c) Invalided to Canada? *yes*
- (d) Discharge as permanently unfit? *no*

*Wm J. Gould Captain*  
Officer in medical charge of case.

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

Station

Date

*M. K. H. Cooper*  
Officer in charge of Hospital.

\* Loss of teeth on, or immediately after, active service, should be attributed thereto, unless there is evidence that it is due to some other cause.

† Delete this word if no exceptions are to be made.

Opinion of the Medical Board.

NOTES.—(i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as it is essential that the Members of the Pensions and Claims Board should be in possession of the most reliable information to **enable them to decide upon the man's claim to pension.**

- (ii.) Expressions such as "may," "might," "probably," &c., should be avoided.
- (iii.) The rates of pensions vary according to whether the disability is attributed to wounds or injuries received or illness contracted (1) in the presence of the enemy, (2) on active service. It is therefore essential when assigning the cause of the disability to differentiate between them (see Articles 641 to 648 of the Canadian Pay and Allowance Regulations).
- (iv.) In answering question 20 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.

20. (a) State whether the disability is the result of injuries received or illness contracted, (1) in the presence of the enemy, (2) on active service.

*"yes" "yes" yes*

(b) If due to one of these causes, to what specific conditions do the Board attribute it?

21. Has the disability been caused or aggravated by

- (a) Intemperance? *no*
- (b) Misconduct? *no*

22. Is the disability permanent?

*yes until operation*  
*not applicable*

23. If not permanent, what is its probable minimum duration?

To be stated in months.

24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present?

*Total*

In defining the extent of his inability to earn a livelihood, estimate it at  $\frac{1}{4}$ ,  $\frac{1}{2}$ ,  $\frac{3}{4}$ , or total incapacity.

25. If an operation was advised and declined, was the refusal unreasonable?

*not applicable*

26. Do the Board recommend

- (a) Fit for duty? *no*
- (b) Fit for base duty? *no*
- (c) Invalided to Canada? *yes*
- (d) Discharge as permanently unfit? *no*

*G*

27. Remarks.

Signatures:—

*Prothonotary* President.

Station

Date

*M. K. H. Cooper* Members.

Approved.

Station

Date

*W. B. Walker*  
FOR AN ADMINISTRATIVE MEDICAL OFFICER.

Proceedings



NAME OF NEXT OF KIN Mrs. J. Barton  
 ADDRESS OF NEXT OF KIN 122 Sheridiana Ave Toronto Can  
 MAN'S ADDRESS Same  
 RELATIONSHIP Mother

MEDICAL HISTORY OF AN INVALID.

M. H. C. C.  
 "D. UNIT"  
 TORONTO, ONT.  
 24 SEP 1917  
 Ba 79

SPADINA MILITARY HOSPITAL  
 TORONTO

1. Station. SPADINA MILITARY HOSPITAL TORONTO
2. Regiment or Corps. 75<sup>th</sup> Bu.
3. Regimental No. and Rank. Pk.
4. Name. # 163283 - Barton: Joseph Victor
5. Age last Birthday. 20 (For this purpose the Company defaulter sheets will be obtained from the man's Commanding Officer.)
6. Enlisted on 7/8/15 at Toronto
7. Former trade or occupation. Shoe Maker Date. 20/9/17

8. General remarks on his:—  
 (a) Conduct. Good  
 (b) Habits. Good  
 (c) Temperance. Good

DEPT. MILITIA & DEFENCE  
 SEP 27 1917  
 H.Q.

(At Station or Hospital where finally disposed of.)

Station and Hospital } Arrived from }

Index No.	If under treatment.		Disease.	How fully disposed of.	Date of Discharge, &c.
	From	From			
Date					

Summary of Causes of invaliding, or remarks as to remand to Regiment, Station or Depot.

9. Service. Years. Days.

	PERIODS	
	FROM	To
84 <sup>th</sup> Bu	Aug. 1915	June 30. 1916
75 <sup>th</sup> Bu	June 1916	to date.

10. (a) Disease or disability. Deformity left forearm  
 (b) Date of origin. Oct. 26. 1916  
 (c) Place of origin. Same  
 (d) Cause. G.S.W.

11. Present condition. (Most Important.)  
(To include full description of present disabling condition or conditions, and of the immediate and direct cause of incapacity, i.e., debility, breathlessness on exertion, necessity of treatment by rest, etc.)

Scar 4" long over left lower forearm, extending upward from wrist over ulnar and dorsal surfaces - slightly adherent - Marked callus about lower third of L. ulna - Bone plate is still in. Supination normal. Pronation limited by 15°. Extension of wrist normal - Flexion of wrist limited by 25°. Other movements of hand + arm normal - Hand grip 1/2 normal. Scar 1 1/2" long over lower third of flexor surface of L. forearm causing no disability.

12. (a) Is the disability the result of service or climate? Service  
 (b) Has it been aggravated by intemperance, vice or misconduct? No.

Date of final Medical Board or decision. } Administrative Medical Officer.

Militia Form B. 227.  
 200M. 8-16.  
 H. Q. 1772-39-117.

DETAILED MEDICAL HISTORY OF INVALID.

Date	Disability	Name	Regimental No.	Rank	Station	Corps

Hospital or Station transferred to for final disposal. }  
 Date of final disposal }  
 How finally disposed of }

The original Report is invariably to accompany the discharge documents of invalids.

OPINION OF THE MEDICAL BOARD.

13. (a) For purpose of Identification. (Here a full description of wounds, scars, deformities, etc., is to be given.)

Scar 4" long on dorsum of h. wrist & forearm  
Scar 1 1/2" long palmar surface h-  
forearm  
Two Vacc. scars h. arm

Does the Board concur with the preceding report? If not, give differing opinion.

10. yes.

11. yes. (the left grip is quite good.)

12. yes

15. yes.

16. yes.

17. yes.

18. Is he unfit for Military Service. yes.

(b) In case of wounds, or other injuries, state whether sustained on or off duty. If not received in action was a Court of Inquiry held?

on duty

(c) In the event of the disability being attributed to exposure on duty, state clearly the nature of such exposure, and whether it was exceptional or otherwise.

not exceptional

14. Treatment.

Epsom, Ranigate. Edmen to M. A -  
Bme plate in Toronto

Recommendations :

That he be discharged on account of physical unfitness

That he be allowed to pass under his own control

15. If the disabling condition had its origin before enlistment, has it been aggravated by service, and to what extent?

not app.

16. What is the probable duration of the disability or of each disabling condition, if more than one contributes?

6 mos

Category E.

Signatures :-

G. J. Quinn M.D. President.

A. Taylor Capt. Members.

J. D. London, Lt. Members.

17. To what extent will it prevent his earning a full livelihood in the general labour market? Please state in fractions. When more than one disabling condition is present, the extent of the disability due to each should be stated.

1/3 reducing to nil -

18. State if for discharge on account of unfitness for Service.

yes  
A. Taylor Capt  
Medical Officer by whom the case is brought forward.

Station. SPADINA MILITARY HOSPITAL

Date. SEP 20 1917

Date. 25/9/17  
Chas. S. MacKay Capt  
Asst. Director of Medical Services

Approved. Date. Director-General of Medical Services.



PENSIONS AND CLAIMS BOARD, Canadian Expeditionary Force, assembled at

Prior Park, Bath, England, on the day of 1917

Members of Board.

NOTE—(i) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as it is essential that the Members of the Pensions and Claims Board should be in possession of the most reliable information to enable them to decide upon the man's claim to pension.

Proceedings.

The Board having considered the evidence of the man marginally noted, and the documents submitted, hereto attached, which form part of these Presents, marked

- 20. (a) State whether the disability is the result of injury received or illness contracted (1) in the presence of the enemy, (2) on active service, (3) in the presence of the enemy, (4) if due to one of these causes, to what specific conditions do the Board attribute it?
21. Has the disability been caused or aggravated by (a) Intemperance? (b) Misconduct?
22. Is the disability permanent?
23. If not permanent, what is its probable minimum duration? To be stated in months.
24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present?
25. In defining the extent of his inability to earn a livelihood, estimate it at 1/4, 1/2, 3/4, or total incapacity.
26. If an operation was advised and declined, was the refusal unreasonable?
27. Do the Board recommend (a) Fit for duty? (b) Fit for base duty? (c) Invalided to Canada? (d) Discharge as permanently unfit?
28. Remarks.

Signed at Prior Park, Bath, this day of 1917. Station of Members. President. Approved. Station. Date.

Medical Report on an Invalid.

Station GRANVILLE CANADIAN SPECIAL HOSP.

Date 28th January 1917.

- 1. Unit. 84th Battalion
2. Regimental No. 163285
3. Rank Lance Corporal
4. Name Barton J.B.

- 5. Age last birthday 18.
6. Enlisted on 3rd August 1915. at Toronto, Ontario.
7. Former Trade or Occupation Chairmaker.

8. Disability. If the disability is an injury, was it caused (a) In the presence of the enemy? (b) On active service? (c) On duty? (d) Off duty?

Ununited fracture of the left ulnar in its lower third.

Statement of Case.

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.

- 9. Date of origin of disability. October 27th 1916.
10. Place of origin of disability. Somme, France.
11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.

He states that on duty October 27th 1916 on the Somme he was hit by a piece of shell on the ulnar border of the left forearm in the lower third fracturing the ulna, which has failed to unite.

Hospitals. - Boulogne General Hospital - 3 days. London, Edmonton Military - 16 days. Epsom - 7 weeks. Granville Canadian Special Hosp. - 14.1.17.

Officer in medical charge of case.

- 12. (a) Give your opinion as to the causation of the disability. (b) If you consider it to have been caused by wounds received or illness contracted (1) in the presence of the enemy (2) on active service, explain the specific conditions to which you attribute it. (See notes on page 3).

I have satisfied myself of the general accuracy of this report, and concur therewith. Date. Station. Date.

13. What is his present condition?

Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.

Medical Report to be filled in by the Officer in medical charge of the case.

Carry on in every other way.

Pronation, supination, notations - Normal

Only weakness complained of.

Enlisted at  
Former Trade or Occupation

Unit  
Regimental No.  
Rank  
Name

14. If the disability is an injury, was it caused

- (a) In the presence of the enemy? Yes.
(b) On active service? Yes.
(c) On duty? Yes.
(d) Off duty? Not applicable.

15. Was a Court of Inquiry held on the injury?

- (a) When? No.
(b) Where? Not applicable.
(c) Opinion? Not applicable.

16. Was an operation performed? If so, what?

No.

17. If not, was an operation advised and declined?

No.

18. In case of loss or decay of teeth. Is the loss of teeth the result of wounds, injury or disease, directly attributable to active service?

Not applicable.

19. Do you recommend

- (a) Fit for duty? NO.
(b) Fit for base duty? NO.
(c) Invalidated to Canada? YES.
(d) Discharge as permanently unfit? No.

Wm J. Should Capt. Officer in medical charge of case.

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

Station GRNWILLE CANADIAN SPECIAL HOSP. C.A.M.C. Officer in charge of Hospital.

Date 28th January 1917.

\* Loss of teeth on, or immediately after, active service, should be attributed thereto, unless there is evidence that it is due to some other cause.

† Delete this word if no exceptions are to be made.

Opinion of the Medical Board.

NOTES.—(i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as it is essential that the Members of the Pensions and Claims Board should be in possession of the most reliable information to enable them to decide upon the man's claim to pension.

- (ii.) Expressions such as "may," "might," "probably," &c., should be avoided.
(iii.) The rates of pensions vary according to whether the disability is attributed to wounds or injuries received or illness contracted (1) in the presence of the enemy, (2) on active service.
(iv.) In answering question 20 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.

20. (a) State whether the disability is the result of injuries received or illness contracted, (1) in the presence of the enemy, (2) on active service.

yes, yes

(b) If due to one of these causes, to what specific conditions do the Board attribute it?

g. s. w.

21. Has the disability been caused or aggravated by

- (a) Intemperance? no
(b) Misconduct? no

22. Is the disability permanent?

yes until operation

23. If not permanent, what is its probable minimum duration?

not applicable

To be stated in months.

24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present?

Total

In defining the extent of his inability to earn a livelihood, estimate it at 1/4, 1/2, 3/4, or total incapacity.

25. If an operation was advised and declined, was the refusal unreasonable?

not applicable

26. Do the Board recommend

- (a) Fit for duty?
(b) Fit for base duty?
(c) Invalidated to Canada? yes
(d) Discharge as permanently unfit?

g.

27. Remarks.

Signatures:—

President.

Station Ramsgate Date 1-2-17

Members.

Approved.

Station Date 2-FEB-17

Administrative Medical Officer.

Members of Board  
The Board having considered the evidence of the man marginally noted, and the documents submitted, hereto attached, which form part of these Presents, marked \_\_\_\_\_

Proceedings.

The Board having considered the evidence of the man marginally noted, and the documents submitted, hereto attached, which form part of these Presents, marked \_\_\_\_\_

- 20. (a) State whether the disability is the result of an injury or disease contracted (1) in the presence of the enemy (2) on active service (3) on active service.
- (b) If due to one of these causes, to what specific conditions do the Board attribute it?
- 21. Has the disability been caused or aggravated by (a) Intemperance? (b) Misconduct?
- 22. Is the disability permanent? Yes - until operation
- 23. If not permanent, what is its probable minimum duration? To be stated in months.
- 24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present? Total
- In defining the extent of his inability to earn a livelihood, estimate it at  $\frac{1}{2}$ ,  $\frac{3}{4}$ , or total incapacity.
- 25. If an operation was advised and declined, was the refusal unreasonable?
- 26. Do the Board recommend (a) Fit for duty? (b) Fit for base duty? (c) Invalided to Canada? (d) Discharge as permanently unfit?
- 27. Remarks.

Signatures: —

Signed at Prior Park, Bath, this \_\_\_\_\_ day \_\_\_\_\_ 191 \_\_\_\_\_  
Station \_\_\_\_\_  
Date \_\_\_\_\_  
Approved \_\_\_\_\_  
Station \_\_\_\_\_  
Date \_\_\_\_\_  
FOR ADMINISTRATIVE MEDICAL OFFICER

Medical Report on an Invalid.

Station GRANVILLE CANADIAN SPECIAL HOSP.

Date 28th January 1917.

- 1. Unit. 84th Battalion
- 2. Regimental No. 163285
- 3. Rank Lance Corporal
- 4. Name Barton J.B.
- 5. Age last birthday 18.  
3rd August 1915.
- 6. Enlisted on Toronto, Ontario.  
at
- 7. Former Trade or Occupation Chairmaker.

8. Disability. If the disability is an injury, was it caused by an injury?

Ununited fracture of the left ulna in its lower third.

Statement of Case.

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.

- 9. Date of origin of disability. October 27th 1916.
- 10. Place of origin of disability. Somme, France.
- 11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.

He states that on duty October 27th 1916 on the Somme he was hit by a piece of shell on the ulnar border of the left forearm in the lower third fracturing the ulna, which has failed to unite.

Hospitals. — Boulogne General Hospital — 3 days.  
London, Edmonton Military — 16 days.  
Epson — 7 weeks.  
Granville Canadian Special Hosp. — 14.1.17.

Officer in medical charge of case.

- 12. (a) Give your opinion as to the causation of the disability. G.S.W.
- (b) If you consider it to have been caused by wounds received or illness contracted (1) in the presence of the enemy (2) on active service, explain the specific conditions to which you attribute it. (See notes on page 3).

Station Granville Canadian Special Hospital  
Date 28th January 1917

† Delete this word if no exceptions are to be made.

13. What is his present condition?

Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.

Want of ability to fully use the left arm caused by the fracture not uniting.

He is feeling fit to carry on in every other way.

Pronation, supination, flexion and extension - Normal.

Only weakness complained of.

1. Unit 84th Battalion  
2. Regimental No. 163285  
3. Rank Lance Corporal  
4. Name Barton J.E.

14. If the disability is an injury, was it caused

- (a) In the presence of the enemy? Yes.
(b) On active service? Yes.
(c) On duty? Yes.
(d) Off duty? Not applicable.

15. Was a Court of Inquiry held on the injury?

- (a) When? No.
(b) Where? Not applicable.
(c) Opinion? Not applicable.

16. Was an operation performed? If so, what?

No.

17. If not, was an operation advised and declined?

No.

18. In case of loss or decay of teeth. Is the loss of teeth the result of wounds, injury or disease, directly attributable to active service?

Not applicable.

19. Do you recommend -

- (a) Fit for duty? NO.
(b) Fit for base duty? NO.
(c) Invalidated to Canada? YES.
(d) Discharge as permanently unfit? No.

Com Wilson Capt. Officer in medical charge of case.

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

Station GRANVILLE CANADIAN SPECIAL HOSP. Officer in charge of Hospital.

Date 28th January 1917.

\* Loss of teeth on, or immediately after, active service, should be attributed thereto, unless there is evidence that it is due to some other cause.

† Delete this word if no exceptions are to be made.

Opinion of the Medical Board.

NOTES.—(i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as it is essential that the Members of the Pensions and Claims Board should be in possession of the most reliable information to enable them to decide upon the man's claim to pension.

- (ii.) Expressions such as "may," "might," "probably," &c., should be avoided.
(iii.) The rates of pensions vary according to whether the disability is attributed to wounds or injuries received or illness contracted (1) in the presence of the enemy, (2) on active service.
(iv.) In answering question 20 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.

20. (a) State whether the disability is the result of injuries received or illness contracted, (1) in the presence of the enemy, (2) on active service.

1 Yes 2 Yes

(b) If due to one of these causes, to what specific conditions do the Board attribute it?

G.S.W

21. Has the disability been caused or aggravated by

- (a) Intemperance? No
(b) Misconduct? No

22. Is the disability permanent? Yes - until operation

23. If not permanent, what is its probable minimum duration? Not applicable

To be stated in months.

24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present?

Total

In defining the extent of his inability to earn a livelihood, estimate it at 1/4, 1/2, 3/4, or total incapacity.

25. If an operation was advised and declined, was the refusal unreasonable? Not applicable

26. Do the Board recommend

- (a) Fit for duty? No
(b) Fit for base duty? No
(c) Invalidated to Canada? Yes
(d) Discharge as permanently unfit? No G

27. Remarks.

Signatures:—

President. J. Morrison Capt.

Station Ramsgate Date Feb. 1/17

Members. W. M. Leckham Capt.

Approved. Station 19, Westbourne Gardens, Folkestone.

Administrative Medical Officer. L. Walker

Date 2 - FEB 1917