25111

871099

BOGLE

WILLIAM

I.D. number
No. d'identification

Surname
Nom de famille

Given names
Prénoms

OPEN

DEC'd 10/02/19

PERSONNEL RECORDS CENTRE
CENTRE DES DOCUMENTS DU PERSONNEL

Location
Lieu 847

REGIMENTAL DOCUMENTS

NAME Boyle William REGT. NO. 871099 UNIT H. Q. FILE NO. Inc 25711

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 Killed
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.F.B. 263 or A.F.B. 120)					
COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
DENTAL HISTORY SHEET (M.F.B. 465)					Category
MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					
MEDICAL EXAMINATION (M.F.W. 129)					
TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
LAST PAY CERTIFICATE (M.F.W. 44)					
PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					1
PARTICULARS OF CHARACTER (A.F.W. 3226)					10 10
COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					10 10
1 Cascard					11 - 10
2 Long Med Board					
1 A.F.B.					
1 Pen W.W.					
1 Body "					
1 P.T.O.					
1 Pte					

Mx. 20 4/20.

W. 2589
10-11-19
[illegible]

ORIGINAL 871099

ATTESTATION PAPER.

No.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?	Bogle
1a. What are your Christian names?	William
1b. What is your present address?	466 Pacific Ave. Winnipeg
2. In what Town, Township or Parish, and in what Country were you born?	Londonderry. Ireland.
3. What is the name of your next-of kin?	Mrs Lizzie Bogle
4. What is the address of your next-of-kin?	466 Pacific Ave, Winnipeg.
4a. What is the relationship of your next-of-kin?	Wife
5. What is the date of your birth?	26th August 1877
6. What is your Trade or Calling?	Carpenter
7. Are you married?	Yes
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.	4th Dragoon Guard 8 years 6 " " 3 "
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, William Bogle, 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.

8th Feby 191 6 ..... William Bogle ..... (Signature of Recruit)

Date .... H R Allen ..... (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, William Bogle, 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.

..... Wm Bogle ..... (Signature of Recruit)

Date 8th Feby 191 6. ..... H R Allen ..... (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 Winnipeg this 8th day of Feby 191 6.

..... H A Webb. ..... (Signature of Justice)

M. F. W. 23.
400M.—1-15.
H. Q. 1772-30-841.

Description of William Boyle on Enlistment.

Apparent Age 39 years ..... months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height	5 ft 11 ins.	
Chest measurement. Girth when fully expanded	40 ins.	
Chest measurement. Range of expansion	3½ ins.	
Complexion	fair	
Eyes	grey	
Hair	dark	
Religious denominations. Church of England	X	
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).

V-L-3-1904

Scar on - female head on left forearm

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 Feb-8 1916.

Place Winnipeg

D W Linehan
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.

William Boyle 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.

Wm. J. Edgecombe (Signature of Officer)

Date 8th Feby 1916

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

M. F. W. 54. (A. F. B. 103.)
250M.—1-16.
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps 183rd OVERSEAS BATTALION C. E. F.

Regimental No. 871099 Rank Pte Name Bogle William

Enlisted (a) 3 Feb. 8/16 Terms of Service (a) C.E.F. duration of War. Service reckons from (a) 3 Feb 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) Carpenter

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	Halifax	4/10/16	
		disembarked England	Liverpool	13/10/16	✓
23.10.16.	6.C. 183rd Bn.	appointed a/Cpl Corp	Witley Camp	4/10/16	Part II orders # 211 ✓
26/10/16	6.C. 183rd ~~B.H.~~ Bn	Transfered to 144th Batt.	Witley	26/10/16	Pte II O# 214. ✓ Wm J Edwards O.C.
20.246 dated. 30-10-16	144th ~~183rd~~ Batt C.E.F.	Taken on strength of 144th Batt C.E.F.	Witley	26-10-16	Pte II O# 245. ✓ 183rd OVERSEAS BATTALION
O.O. 260 16 Nov 1916.	6.C. 144th Bn.	Reverts to the rank at his own request.	Seaford	7 Nov 1916.	Pte II O# 260. ✓
D.O. 3. Jany 8. 1917	144th (W.R.) Bn.	Transferred to 2nd Canadian Labor Battalion	Seaford	2-1-17	Pte II O# 8. ✓ F.H.W. Godsell, Major for Lt. Col. 144th Battalion (Winnipeg Rifles) C.E.F.
10. 6 17 ~~4 1 17~~ 8 = 2 17	2nd C.L.B.	Taken on strength. Proceeded O/Seas.	Seaford	4/1/17. 8/2/17	Pte II O. 10. ✓ Pte II O. 31. W.R.C. McBrien

CERTIFIED CORRECT 6 MAR 1917 CAN. RECORDS LONDON

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

[P.T.O.

Bogle, W. 87109

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				
		Disembarked FRANCE		10-2-17	NR
		SOS to 1st C L B 21 11 17 20 3i			
		TOS CLB 22Nov DO 95			
15 DEC 1917		JOINED UNIT	9 DEC 1917		B 213
23.2.18	Pte C.L.B	Granted 14 days leave to U.K.		21.2.18	B.213. Pt. II O/15 d/5-3-18.
9.3.18	do	Rejoined from ——do——		9.3.18	B.213.
18.2.18	A.D.M.S	Class B 2 Board		18.2.18	W.3339-R.R 384 Pt. II O/19 d/26-3-18.
		Designation changed to 1st Can. Inf Works Bn (Auth: War Office letter 121/Overseas/4840 (A.G.12) d/11-3-18.			
26.3.18	A.F.C.Cdn	Dofid. to Eng. for return to Canada		26.3.18	A.5.3a(1) 5-1-33 d/24-1-18 Can. Sec. file K.E. 25687 Pt. II O/20 d/31-3-18
	A.A.G.	to dep. farmer + posted to Cdn. Cent. Depot S/Cliffe			
		J. Thomson Lieut. for Lt. Col. A.G.T. Canadian Section			
30.3.18	Gen. Depot	TOS from C.L. Pool	Sailed	27.3.18	DO 76
		for Colonel i/c Records			Lieut. OMFC

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				
13-1-19.	No. 5 CANADIAN GENERAL HOSPITAL	S.O.S. to C.A.M.C. Casualty Co. Shorncliffe.	Liverpool.	13-1-19	PT. 2 DO. No. 10 D. 19/1/19 MAJOR C. A. M. C. ADJT. & REGISTRAR, FOR O. C. No. 5 CANADIAN GENERAL HOSPITAL.
16.1.19	Came ex Tos from 5 CGH reported		Skiff	13.1.19	H-Dd 15
20.1.19	do	On Leave to Kinmel Park	do	19.1.19	— 16
22-1-19.		T.O.S. C.C.C. Kinmel Park for return to Canada. Part 11 Orders No. 24. S.O.S. 11.2.19. C.C.C. Kinmel Park on embark- 5-2-19. ing for Canada, Part 11 Order No: 3541 Hallett Ross Lt. for Commanding 10 Wing, Kinmel Park Camp.			Came ex leave

Army Form B. 103. Regimental Number 871099

Casualty Form—Active Service.

Regiment or Corps 183rd Bn

Rank Pte Surname Bugle Christian Name Wm

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

Enlisted (*a*) 8/2/16 Terms of Service (*a*) War Service reckons from (*a*) 7th 8/16

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

Extended { ..... } Re-engaged { ..... } Qualification (*b*) .....

..... or Corps Trade and Rate .....

..... 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...			
19/4/18	Can Depot	~~S.O.S. G.D. Leave Came.~~ S. Clyde	S. Clyde	18/4/18	P. to 093 19/4/18
		S. Clyde			
		M. F. Willcocks Captain For O.C. Can. General Depot			
20-4-18	Can Depot	Taken on Strength	S. Clyde	18-4-18	[illegible]
21.5.18	do	S.O.S. to 205 A.G.H. Liverpool	do	21.5.18	Pte to 3741
					CAPT. ADJT. FOR OFFICER COMMANDING, CAN. G.T. DEPOT.
22.5.18	No. 5 CANADIAN GENERAL HOSPITAL	T.O.S. from C.A.M.C. Depot	Liverpool	21.5.18	PT. 2 DD. No. 114 D22/5/18

(*a*) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
(*b*) Signaller, Shoeing-Smith, &c.

[P.T.O.

[31101] W6135/M768 1000m 9/16s 153 G & S Forms/B.103/4. E./354.

(*b*) *e.g.* Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

For use of Employers.

M.L. 20 4/20.

(R.)

Army Form B. 181.

CLINICAL CHART.

(To be attached to Case Sheet.)

Corps C.M.C. Military Hospital No 9 Can Gen

No. 871099 Rank and Name Pte Boyle Wm Age 49 Service 3y/12

Disease ~~Influenza~~ Pneumonia Date of admission 8-2-19. Date of discharge Result Died 1.25 P.M. Feb 10th 1919

Dates of Observation

Days of Disease

Temperature Fahrenheit

Time A.M. P.M. (repeated for each column)

107° 106° 105° 104° 103° 102° 101° 100° 99° 98° 97°

8 6 4 2

Pulse per Minute: 108 100 120 94 120 120 130

Respirations per Minute: 26 32 40 40 40 40 46

Motions per 24 hours.

(6378) Wt. W4612/P566 2,000,000 2/18 McA & W Ltd A.F.B. 181/5 (E. 2565)

Signature D. MacDougall Capt. In charge of case.

Army Form B. 181.

CLINICAL CHART.

(To be attached to Case Sheet.)

Corps_____ Military Hospital_____

No._____ Rank and Name_____ Age_____ Service_____

Disease_____ Date of admission_____ Date of discharge_____ Result_____

Dates of Observation

Days of Disease

Temperature Fahrenheit — Time A.M. P.M.

107° 106° 105° 104° 103° 102° 101° 100° 99° 98° 97°

Pulse per Minute

Respirations per Minute

Motions per 24 hours

(6378) Wt. W4612/P566 2,000,000 2/18 McA & W Ltd A.F.B. 181/5 (E. 2565)

Signature_____ In charge of case.

C-AM C
1 E
B 3

ORIGINAL

MEDICAL HISTORY SHEET.

Surname Bogle *Christian Name* William

Examined { on 8th., day of Feby 1916
at Winnipeg, Man.

Birthplace { City or Town Londonderry,
County Ireland.

Apparent age 39

Trade or occupation Carpenter.

Height 5 Feet 11 Inches.

Weight Lbs.

Chest measurement { Minimum 37 inches.
Maximum expansion 3 inches.

Physical development

Small-Pox Marks

Vaccination Marks { Arm Right. Left. X
Number Three

When Vaccinated last 1904

(*a*) Marks indicating congenital peculiarities or previous disease Tattoo female head on left forearm.

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

Approved by Dan Lunnehan

Rank Captain C.A.M.C. M.O.

Date.	Fit or Unfit.	Examined for Re-engagement.
		4 APR 1918 M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date.	Result.	Vaccinations.
13/7/16		Dan Lunnehan M.O.
		M.O.
		M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.
19/5/16		Dan Lunnehan M.O.
13/7/16		Dan Lunnehan M.O.
		M.O.

Enlisted on 8th. *day of* February *1916 at* Winnipeg, Man.

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	183rd., Batt	871099		Feby 8th., 1916.
Transferred to	144th Bn.			22/10/16
	2nd. Lab. Bn			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
Seaford	Jan 2-17	Arrange Drafting	P/BD. B-11 P Abstraction Capt.
L'pool No 5 Can Genl Hosp Liverpool	22.7.18. 2/1/19.	" Arthritis Chronic	B11. J.L.C. B11 H.L. Burris Lt Col Pres Bd.

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.

CANADA

Surname Boyle Christian Name [illegible]

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.
MILITARY HOSPITAL KINMEL PARK, RHYL		8	2	19				Broncho-pneumonia		Sick for four days before admission. Typical history of Influenza. Consolidation of both lower lobes. Died at 1.25 P.M. Feb. 10th, 1919.	D. MacDougall Capt. C.A.M.C.

R. & O. 6045 (*Revised*).

137559 6 5

PROCEEDINGS OF A MEDICAL BOARD.

Dated at Seaford Jany 2 1916.

No. [illegible] Rank Pte Name Bogle W

Local Unit [illegible] Overseas Unit [illegible] Age 47

Examination held at Seaford Sussex

DISABILITY.
Overseas—Local.
(scratch one out)

Overage

PRESENT CONDITION.

Slightly deaf and Overage.
otherwise fit.
Has been employed as Carpenter.

B-T.

BOARD RECOMMENDS:—

1. Fit for Duty.....
2. Fit for duty after.....weeks' physical training.
3. Fit for Temporary Base Duty.....weeks.
4. Fit for Permanent Base Duty.....
5. Discharge.....

Signatures:—

Members { W H Colyer Maj .....President.
D Abut Lieut Canadian Army
.....

APPROVED

Dated at Seaford Jan 2 1916 A C Lo[illegible] Major
Tapsaons For A.D.M.S.

PROCEEDINGS OF A MEDICAL BOARD.

R. & O. 2042 (Amended)

No. ..... Rank ..... Name .....

Dated at ..... this ..... day of ..... 19 .....

PRESENT CONDITION.

DISABILITY. (Search one out)

Overseas—Local.

Examination held at .....

Local Unit ..... Overseas Unit ..... Age .....

Disease .....

Date of Enlistment ..... Date of Discharge .....

Length of Service: — Regular ..... Temporary ..... Total .....

Service: — Overseas ..... Local .....

Medical Category on Discharge .....

Decorations .....

Pensionable Trade .....

Civil Occupation .....

BOARD RECOMMENDS:—

1. For Discharge .....

2. For Treatment ..... Months.

3. For Temporary Base Duty ..... weeks.

4. For Permanent Base Duty .....

5. For ..... weeks, physical training.

6. For duty after .....

Dated at ..... this ..... day of ..... 19 .....

For A.D.M.S.

APPROVED

Medical Officer ..... President.

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

Name of Hospital.	Admitted to Hospital. Day	Month	Year	Discharged from Hospital. Day	Month	Year	Disease.	Number of days in Hospital.	Remarks bearing on the cause, nature, or treatment of the case likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer.
No. 9 Canadian General Kinmel Park, Rhyl, Wales	8	2	19	10	2	19	Pneumonia		Had been sick for three days before admission. Dullness over both lower lobes. Crepitic rub heard all over both lungs. Bronchial breathing heard all over both lower lobes. Pulse rapid and of very poor quality. Died 1.25 P.m. Feb. 10th, 1919. Due to service conditions.	D. MacDougall, Capt. C.A.M.C.

Regional No...... **MEDICAL HISTORY OF—** A.F. B 178.

Regimental No. 271099 *Region*.....

Surname Pte Bogle *Christian Names* William

TABLE I.—General Table.

Birthplace { Parish..... / County .....

Examined { on.....day of.....191..., / at.....

Declared Age.....49.....years.....days.

Trade or Occupation.....

Height.....feet.....inches. Weight.....lbs.

Colour of Hair... .....Complexion.....

,, Eyes .....

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 = ... With Glasses { R. ..... / L. ..... / L. E.—V = ...

Identification Marks, such as Tattoo, Moles, Scars, etc.:—

.....

.....

.....

Defects or Ailments :

.....

.....

Examined and found—

Fit for Grade { I. / II. / III. / IV.

(Strike out those which do not apply.)

Signature .....

Chairman of Medical Board.

Re-examined for posting at ... .

On.....day of .....191...

Enlisted { at ..... / on.....day of.....19...

	Corps.	Regtl. No.
Joined on enlistment	C.A.M.C.	
Transferred to		

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.
.....	.....
.....	.....
.....	.....
.....	.....
.....	.....
.....	.....
.....	.....
.....	.....
.....	.....
.....	.....
.....	.....
.....	.....
.....	.....
.....	.....
.....	.....
.....	.....
.....	.....
.....	.....
.....	.....
.....	.....

Special Remarks : state if a discharged Soldier

.....

.....

.....

.....

TABLE IV.—Service Table.

Station or Troopship.	Date of arrival or embarkation.	Date of Departure or disembarkation.
.....	.....	.....
.....	.....	.....
.....	.....	.....
.....	.....	.....
.....	.....	.....
.....	.....	.....

Became non-effective by .....

on.....day of.....191...

(Signature).....

(Rank).....

M833 WL12016/457 400,000 7/18 CLdP 334.

Forms
I. 1237
12

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
Year 1919	871099	Pte	Bogle	William
	Unit. C.A.M.C.		Age. 49	Service. 3 years

Station and Date.

Disease ~~Influenza~~ Pneumonia

No. 9 C.G.H.

Has been sick for three days.

9-2-19

Complaints :— Headache, backache, pains all over the body, pains in the knee joints, Chills and cold all the time. Cough very troublesome at night.

Past Illnesses :— Negative

Physical Exam :— Tongue thickly furred.

10-2-19

Lungs :— Well developed chest. well nourished. Resonance in front good. Dullness over both lower lobes. Pleuritic sub-heard all over both lungs. Bronchial breathing heard all over both lower lobes.

Heart sounds very weak. Pulse rapid and weak.

at 12.30 P.m. breathing became very laboured, pulse extremely weak and rapid.

Died 1.25 P.M. Feb. 10th, 1919.

D. MacDougall
Capt. C.A.M.C.

Due to service conditions.

D. MacDougall
Capt. C.A.M.C.

* 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. & Sr. (10938). Forms/I. 1237/12. (E239) [P.T.O.

Station and Date.	

FORM OF WILL.

82478

I, William Bogle. (Name in full)

Regimental Number 871099. serving in 2nd Can Labour Bn.

of the Canadian Expeditionary Force, do hereby revoke all former Wills by me made and declare this to be my last Will.

I bequeath all my real estate unto

Elizabeth. Bogle.
466 Pacific Avenue.
Winnipeg.

Name & Address of person or persons to whom it is to go.

absolutely, and my personal estate I bequeath to

Elizabeth. Bogle.
466 Pacific Avenue.
Winnipeg Can.

Name & Address of person or persons to receive personal estate* (see note).

In Witness whereof I have hereunto set my hand this 10th day of January A.D. 1917

W. Bogle Signature.

*N.B.—Personal estate includes pay, effects, money in bank, insurance policy, in fact everything except real estate.

Signed and acknowledged by the Testator as and for his last Will in the presence of us both present at the same time, who in his presence, at his request, and in the presence of each other have hereunto subscribed our names as Witnesses.

Name of Witness James Jeeves

Address of Witness 2nd Canadian Labor Bn.

Occupation of Witness Soldier

Name of Witness J Blenny

Address of Witness 2nd Can Labour Batt

Occupation of Witness Soldier

FORM OF WILL.

(Name in full) _____

Hospital Number _____ serving in _____

of the Canadian Expeditionary Force, do hereby revoke all former Wills

by me made and declare this to be my last Will.

I hereby devise all my real estate unto

Name & Address of person or persons to whom it is to go.	Description of Property (Lot No.).

absolutely, and my personal estate I bequeath to

Name & Address of person or persons to receive Personal estate.	Description of Property.

In Witness whereof I have hereunto set my hand

this _____ day of _____ A.D. 191 .

_____

Witness

_____

Witness

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

Name

Surname Christian Name

Regimental Number Rank

Address (in full)

Unit

Original Unit

District where paid

Date of Discharge

P. D. P. Filing Number

Rates:—Regimental pay $ per diem; Field Allowance $ per diem. Separation Allowance $ per month.

L.L. 53961—M. & D. 9721

	Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Overpayments 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		

Remarks:

M. F. W. 127
30CM-1-19
17-2-39-1140

Register No. DB1166

WAR SERVICE GRATUITY
TO
DEPENDENTS OF DECEASED SOLDIERS

A.P. File No. 1769-VI-1.

Regt'l No. 877099 Name William (Christian Name) Bogle (Surname)

Unit C.A.M.C. Dep. Dom. Rank Pte. Date of enlistment

Date of casualty 10/2/19 B.P.C. File No. 101304

Was service performed overseas ? Yes

DEPENDENT

Name Mrs. Elizabeth Bogle Relationship Widow

Address 254 Owena St.
Winnipeg
Man.

Amount of Special Pension Bonus $ 80.00 Abstracted by J. LeClair

Eligible for Gratuity $ 180.00

Less amount of Special Pension Bonus paid $ 80.00

Less Debit Balance of S. A. or A.P. $

Total deductions $ 80.00

Balance due $ 100.00

Cheque No. G/868140 Date issued JUL 31 1920

Clerk W. Mitchell

REMARKS :

Audited by

Date 30/7/20

M.F.W. 2652
25M—6-20.
H.Q. 1772—89-1473

L. L. 28912. M. & D. 8368.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12.
25m.—10-17.
H. Q. 1772-39-819.

To Whom: Mrs. L. Bogle,
Address: 447 Pacific Ave. Winnipeg, Man.

By Whom Assigned: Bogle, Wm.
Regtl. No.: 871099.
Rank: Pte.
Corps: 2 Lab Bn.

SPECIAL REMITTANCE

Rate $50.00

Sched # 463 22-11-17

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.		W 47875	50 -	
Jan.	1916			
Feb.				
March				

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier .....

PAYMENTS.

Month.	Year.	Cheque No.	Amt.	Remarks.
Aug.	1918			
Sept.				
Oct.				
Nov.				
Dec.				
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.				

Capt. John. A. Bohan
180th Battn
Lieut. W. Bohan
Next of kin
17 - 11 - 19 Can-D

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 11a.
50m.—4-16.
1772—39—818.

Sheet No. 2. Elizabeth Bogle. wife.

L. L. Job 310.—Req. 6574.

Name of Soldier Bogle. William pte.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May		Y3487	60	60
June		E4231	20	20
July		B5430	20	20
Aug.		E12432	20	20
Sept.		Y14775	20	20
Oct.		Y18047	20	20
Nov.		Y20981	20	20
Dec.		B24533	20	20
Jan.	1917	Y28240	20.	20
Feb.		Y31224	20	20
March		Y33913	20	20
April		Y59	20	20
May		Y3210	20	20
June		I 6221	20	20 Pacific
July		Y9967	20	20
Aug.	C	14009	20	R
Sept.	C	17665	20	B
Oct.	Y	22747	20	B
Nov.				1400
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

1-3-16.

58

L- L. Job 310 M. & D. 6574.

MILITIA AND DEFENCE

M. F. W. 11.
50m.—4-16.
H. Q. 1772-39-818.

SEPARATION ALLOWANCE

Name Elizabeth. Bogle. ave

Address ~~466~~ Pacific ~~St.~~ ave
447 Winnipeg.
Man.

Relation to Soldier wife, child or mother: wife.

Name of Soldier Bogle. William

Regtl. No. 871099

Rank Pte.

Corps 183 Bttn.

To what Corps belonging when called out: N

PAYMENTS

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

CONSOLIDATED 5 ACCOUNT

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

PAYMENTS.

M. F. W. 12a.
50m.—6-16.
1772—39—819.

Sheet No. 2. Mrs Elvy Bogle

L. L. Job 4503.—Req. 6332.

Name of Soldier Bogle. Wm.
871099 - Pte. 183 Bn.

OCT 1 1918

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			15-
May				
June				
July				
Aug.				
Sept.				
Oct.		U 27333	15	
Nov.		U 29460	15	
Dec.		F 34596	15	
Jan.	1917	T 37229	15	
Feb.		T 43157	15	15
March		X 47876	15	15
April		4 139	15	15
May		6569	15	
June		X 13347	15	15. S
July		U 19952	15	
Aug.		W 29339	15	
Sept.		V 33392	15	
Oct.		48329	15	
Nov.				195
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

L-L. Job 5470—M. & D. 6888

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

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

To Whom Mrs Elizabeth Bogle

Address ~~447~~ 466 Pacific Ave.
Winnipeg
Man.

Rate $ 15.-

OCT 1 1916

By Whom Assigned Bogle. Wm.

Regtl. No. 871099.

Rank Pte.

Corps 183 Bn.

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 7 ACCOUNT

JM.

Rank Pte. Name BOGLE, William. late 1st Lab Bn

Reg'l No. 871099

Unit 183rd Bn. If in perm. Corps, What Unit ?

Married or Single Married.

Place and Date of Enlistment Winnipeg. 8th Feb 1916.

Place of Birth Londonderry, Ireland.

Name and Address, Next-of-Kin Mrs Lizzie Bogle.

466 Pacific Ave., Winnipeg, Man Canada

Relationship Wife.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

M/E. R.B. No. 4930
File M.L. 25-B-6630
Category D.O.C.

Report. Date.	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.
	C	Arrived in England S.S.		13/10/16	
23-10-16	Of 183rd Bn	Appted. Actg. Lce. Corp	Witley	4-10-16	P II DO. 211
26-10-16	"	SOS on tofr. to 144th Bn.	Witley	26.10.16	P II DO 214
30-10-16	144th Bn	Taken on strength	Witley	26-10-16	" " " 245
16-11-16	O.C. 144th Bn	Reverts to ranks at own request	Seaford	7-11-16	" " 260
8-1-17	do.	S.OS. tofr to 2nd Can. L. Bn	do.	2-1-17	" " 8
10.1.17	2nd C.L.B	S. OS from 144th Bn	"	4.1.17	— 10
9.2,17	2LabBn,	Proceeded O/Seas- ← Seaford 8-2-17 Nom. Roll			
25.11.17	✓	S.O.S. To 1st C. Lab Bn	Field	Pte 21.11.17	P II 91.
31.3.18	1st Can Reinforcements Base	S. on to Base Depot (Forms)	✓	✓ 26.3.18	- 20 (Gen. Dep. D.O 76 d/30.3.18)

A.F.B. 122 CHECKED 14 FEB. 1917

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.
20-4-18	6 Can Mob Dep	T.O.S from Gen Depot	Sheliffe	Ste	18-4-18	P.H. D.O. 110 / Gen Dep. P.H. D.O. 94 of 20/4/18
22-5-18	F.S.C. Genl Hp	T.O.S from 6 Can Mob Dep	do	"	21-5-18	— 114 / Cancld P.H. D.O. 141 of 21/5/18.
13-1-19.	"	S.O.S. to Can. C. Corps	Liverpool	"	13-1-19.	Cancld Corps — 10. Pt-Lo. 13 of 16-1-19.
20-1-19.	2010 M.F. Wing	T.O.S from Can. C.	Kinmel Pk.	"	20-1-19.	— 21. (Ob. make 5-2-19.)
11-2-19	Can. C.	Died	9 C Gen Hp.	.	10.2.19	C.L.C. 430 Influenza
13-2-19.	10. M.H. Wg.	S.O.S. to C.E.F. in Canada.	Rhyl	Ste.	10-2-19.	P.H. D.O. 43.
15-2-19.	do.	S.O.S. (Died at Kin. Pk. Hp)	do.	"	10-2-19.	" " 45.
10-4-19.	do.	P.H. D.O. 43 is cancelled	do.	"	—	" " 98.
10-4-19.	do.	P.H. D.O. 45 is amended to read:- "S.O.S. to Can. C. Casbg. on decease"	do.	"	10-2-19.	" " 98.
11-4-19.	Can. C. Corps.	T.O.S. on posting from M.D. 10 Wing Kinmel Park. W/L (deceased)	Sheliffe	Ste.	10.2.19.	" 86.

C.A.D.C. 5009 A

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

2nd.10

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) Bogle W.

REGIMENT 12 C.R.T. RANK Pte No. 871099

Date of Examination in England 23/1/19 | Date of Examination in France

DIRECTIONS TO DENTAL OFFICERS

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

PRESENT DENTAL REQUIREMENTS

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

HAS HE EVER REFUSED DENTAL TREATMENT ?

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

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

KINMEL PARK, NORTH WALES.

Signature of Dental Officer A.G. Hussey Capt

Date of Enlistment

1 · 3 · 16

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

B

8663

Date of Assignment

Oct 1 /16

RATE OF SEPARATION ALLOWANCE

~~20~~	~~25~~ 1/12/19. P.C. 3254	30.00 1-9-18. P.C. 2753 M.O. 36497	

RATE OF ASSIGNMENT

15			

PARTICULARS OF SEPARATION ALLOWANCE

No. 871099

Rank Pte Promoted Reverted Discharge

Soldier's Name Wm Bogle

Battalion 183 Battn

Beneficiary Eliza. Bogle

Relationship wife

Address

2554-2-1-18

NOV 23 Rec'd

PARTICULARS OF ASSIGNMENT

Name Mrs. Elizabeth Bogle

Address 447 Pacific Ave

Change of Address Winnipeg, Man.

1

2

3

4

B 8663

REMARKS 1769. W. 6

Date	Cheque No.		Amount S/A	Amount A/P	Total	
Oct 31-17			400	195	595	
Nov	52496	F	20	15	35	
Dec	57964	F	20	15	35	C S
Jany.	~~65774~~	A	~~30~~	~~15~~	~~45~~	B.R. 65774 cancelled & copy
Jan	69083	D	30	15	45	M.C.
Feb	92140	C	25	15	40	
Mar	99423	A	25	15	40	
April	3285	C	25	15	40	
May	10067	E	25	15	40	
June	18105	D	25	15	40	
July	32413	F	25	15	40	
Aug.	29880	C	25	15	40	
Sept	35943	D.	25	15	40	
Oct	47711	B.	25	15	40	
Nov	51311	B.	25	15	40	
Dec	66872	A	45	15	60	
JAN 1919	74892	D.	30	15	45	
	76830		30	15	45	
			825	435	1260	

KILLED IN ACTION / DIED OF WOUNDS DATE 10-2-19

C. L. No. 447 DATE 15-2-19

M.R.O. 69467 TO DESTROY REGISTERED 19-2-19

B. P. C. FORM [illegible] X. COMPLETED ON FILE

[signature] 19 2 19

A STENCIL HAS BEEN MADE FOR THIS ACCOUNT

M. F. W. 128
400M.—6-17—1772-39-1141
L. L. 22820—M. & D. 7983.

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—177-39-1141
L. L. 22520—M. & D. 7483.

BOGLE, Pte. William, #871099, C.E.F.
649-B-20626 Dec. 1st 1919.

Not eligible for 14/15 Star.

MEDAL.....(W) Mrs. Elizabeth Bogle,
257 Owena St.,
Winnipeg, Man.

8089

MAR 1 5 1921

Scroll Desp. _____ Regn. No. Z 28663

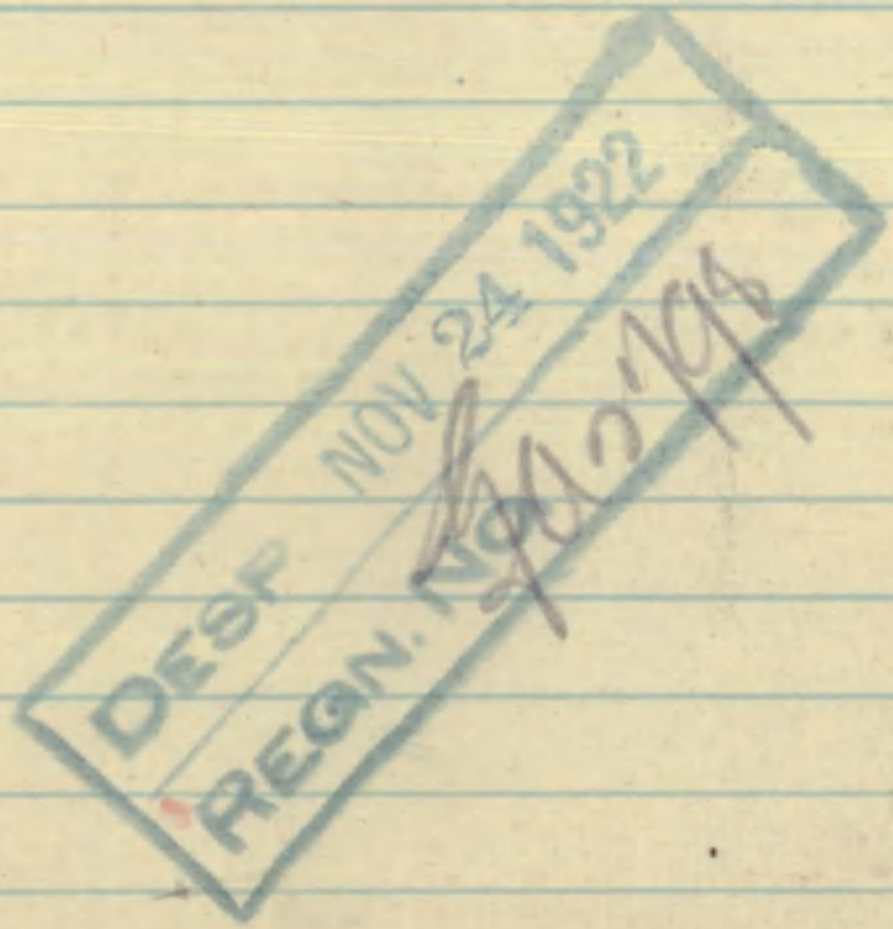
PLAQUE.....Widow, as above.
Plague Desp. DEC 29 1920 Regn No. PA 1528

(Serial no. 791081.)

C. OF S.....Widow, as above.
mother dead
Desp MAY 19 1920 C & 050

(C.)

O.K.


DESF
NOV 24 1922
REGN.

Number 871099 Rank

Surname BOGLE

Christian Name William

Units 2nd Can. Lab. Bn Theatre of War France

Date of Service 8-2-17

Remarks (W) Mrs. Elizabeth Bogle,

Latest Address 257 Owena St.,
Winnipeg, Man.

Roll No. 10 Page 20304

200m.-6-21.

No. 57099 RANK Pte NAME Bogle W.

T.O.S. 8-2-16 UNIT 183rd Battalion. C.E.F.
(A.O.2. 10-2-16)

M.D. 10

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916	1916			
Feb 8	Feb 29	✓		
Mar		✓		
Apr		✓		
May		✓		
June		✓		
July		✓		
Aug		N.	Warned for Leave	aug paylist.
Sept		✓		
Oct		N	L/Cpl 4-10-16	oct paylist
			Trans to 144th Bn 26-10-16	" " "

MARRIED Yes SINGLE WIDOWER

TRADE OR CALLING Carpenter RELIGION Church of England.

DESCRIPTION.

APPARENT AGE 39 YEARS MONTHS

HEIGHT 5 FEET 11 INCHES

CHEST MEASUREMENT 40 INCHES EXPANSION 3 INCHES

COMPLEXION Fair EYES Grey HAIR Dark.

DISTINGUISHING MARKS Tattoo - Female head on left forearm.

V-L 3. 1904,

MEDICAL EXAMINATION. PLACE DATE

Present Address, 466 Pacific Ave, Winnipeg

649-B-20676

CARD NO.

FOLL.

SURNAME. Bogle

CHRISTIAN NAMES William

REGL. No. 8/1099 RANK Pte.

UNIT 183rd Bn

FORMER CORPS 4th Dragoon Gds (8 yrs) 6th Dr Gds (3 yrs).

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL Bogle Mrs Lizzie

RELATIONSHIP TO SOLDIER Wife.

ADD 44 Pacific Ave., Winnipeg, 207 Aurora St Man. L. of A. P. 18-7-17.

Mail sent letter 6-12-17

COUNTRY OF BIRTH Ireland Londonderry, DATE Aug 26th 1877

PLACE OF ATTESTATION Winnipeg Man., DATE Feb 8th 1916

Sailed from Halifax 3/10/16 2nd part per S.S. Saxonia

1st part per S.S. Missanabie 3/10/16

AFW. 3118. 1237.

AFW. 3243 & 3243a. Medical History Sheet & other Documents.

To	To app to M. D. 10. 9-2-19. Orig to Ward 2 on 21-2-19. 1 Temp 1237-181 to Can Records. 14-2-19. 1 orig to Can Records 19-2-19.	To
rom	From	From

P6

1896.

Name Bogle. W. Folio Reg. C. A. M. C.

Rank Reg. No. 871099. Compy. M. D. 10.

Age 49. Service 36/12. Rel. C of E.

Disease ~~Influenza~~. (Labor Pneumonia)

Admitted 8-2-19. From Niner Camp H.

Ward 2.

Transferred To

Discharged Died 1325 P.M. To 10-2-19.

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

Form R. 149.

25-B.6630

Name BOGLE. WILLIAM Rank Pte Reg. No. 87099

Unit C.A.M.C ~~Cardiff~~. (10 M.D.C. WING KINMEL PK)

Next of Kin Canada MRS LIZZIE BOGLE (WIFE) 466 PACIFIC AVE WINNIPEG M

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
10.2.19	Seriously Ill. Mil Hosp Kinmel Pk	Influenza			W.	105 704
10.2.19.	Died. (Mil Hosp	Kinmel Pk.	do	C.H.	10	6058.
						9M7C
						11-2-19
	Born 26/8/1877	C of E				

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
6430	Died - Q.G. Kinmel Pk.	10-2-19	Influenza

NAME Bogle. William REGT. No. 87.1099.

RANK AND UNIT Pte. C.A.M.C. Hps. Sharncliffe.

NEXT OF KIN Mrs. Lizzie Bogle. (wife)
441 Pacific Ave., Winnipeg. Man.

CABLE		NATURE OF CASUALTY
No.	DATE	
H 105. 2-1.	12-2-19.	Ser. ill Sharncliffe Mil. H. Feb. 10/19. Influenza
H 106. 5-1	12.2.19.	Dt. at 19 Gen. H. Kinmel Park Feb. 10th/19.

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

Cas. List.

Surname	Christian Name or Names	Reg. No.
BOGLE.	W.	871099.

Rank: Pte.

Unit: C.A.M.C. CAS.DEPT.

Cas. List.	
11-2-19.C440.	9. C.G.H. Kimmel Pk. 10-2-19 Influ'za. D I E D. 10-2-19

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

D.M.S.1300. 50M-30-8-18.

P. 559

MARRIED OR SINGLE: M

PLACE OF BIRTH: Londonderry City, Ireland

NAME AND ADDRESS OF NEXT OF KIN: Lizzie Bogle
#66 Pacific Ave, Winnipeg, Man.

RELATIONSHIP OF NEXT OF KIN: Wife

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
Promoted Lance Corporal	1/10/16	P.T.O. 211
Reverts to Ranks	7/11/16	B.O. 760 7/11/16

ADMISSIONS TO HOSPITAL, &c

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

Lance Corporal ~~Private~~

REG'L NO. 871099 RANK Private NAME Bogle William

IF IN PERMT. CORPS WHAT UNIT

UNIT 183rd Batt. TRANSFERRED TO 1st ~~2nd~~ Batt. DATE ~~26/10/16~~ 7/11/16. AUTHORITY P.T.O. 211

PERMANENT FORCE ALLOWANCES TRANSFERRED TO 2nd Lab. Bttn. DATE 1-2-17 AUTHORITY B.O. 8. 8/1/17

PLACE OF ATTESTATION Winnipeg, Man. TRANSFERRED TO 1st Labour DATE 1/1/18 AUTHORITY 95 21/1/17.

DATE OF ATTESTATION February 8th 1916 TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY $15. DATE EFFECTIVE October 1st 1916

PAYABLE TO Mrs E. Bogle, #66 Pacific Ave, Winnipeg, Man. RELATIONSHIP Wife

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

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

DISCHARGE DATE AND PLACE REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

Checked H.H. Rodgers

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
																															Nil	Nil			B.1	Balance from Canada Pro. L/C 4/10/16 B.O. 211
1.10.16	3	1.	3	-	3	.10		30							36 60											15 -	/	15 -	20 50						
2.10.16	28	1.05	29	40	28	.10	2	80							33 30	100	11/4							457 -		15		34 74	27 06						Records to Pay Office complete 7/11/16 B.O. 760 7/11/16.
3.10.16	6	1.05	6	30												110	13/11							487 -											
4.10.16																93	31/10							974 -											
7/30-11-16	24	1.00	24		30	.10	3	-							34 10	175	2/12							244 -		15		27 18	35 98			Nil			
Dec 1/31	31		31		31		3	10							34 10									1701 -		15		32 04	38 04						Transferred to 2nd Labour Bttn. 1-2-17 B.O. 8. 8/1/17
1917 Jan 1/31	31	1	31	10											34 10	229	2/12							1217 -											
			9	70												49	2/12/17																		
Feb 28			30	80											30 80	21	18/11/17							487 -											
March 31			34	10											34 10			255	13/1/17						262 -		15		15 -	71 28						
April 30		1.00	33	00											33 00			1470								15 -		15 -	90 38						
		10																																	
May 31		"	34	10											34 10											15 -		15 -	108 38						
June 30		"	33	00											33 00											15 -		15 -	127 48						
July 31		.	34	10											34 10											15 -		15 -	146 58						
Aug 31		"	34	10											34 10											15		15	164 58						
Sept 30			33												33																				
			403	20											403.20									34 08	21 92	2 62		180 00		238 62	164.58				

871099 Pte Bogle, Wm.

Assigned Pay $15 00 xx

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
MONTH PARTICULARS	CR. 1	CR. 2	PARTICULARS											DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DATE SER. REG. PAY	ALLTM ENTS															
			~~164 58~~																															
																		164 58																	
Oct 31	P.P		34 10													15		183 68																	
			34 10													15																			
Nov 30	P.P.		33 00													15																			
				Rem. Roll 8075 22.11.17. 2nd Lab Bn.										50.00																						
				ab. 634. 28.10.17.										3.57																						
				ab. 689. 13.11.17										4.46																						
Dec 31	P.P.		34 10					dec. ab.								15		162 75																	
1918			67 10											58.03		30																			
Jan.	P Ray		34 10					Jan. ban. Ab.								15																			
				AR 1448				1st Lab Bn.						1.68																						
				AR. 1448				2nd Lab Bn.						3.54				175 60																	
			34 10											6.25		15																			
Feb	P. Pay		30 80					Feb. ban. Ab.								15																			
				AR. 880				1st Lab Bn.						1.68				188 42																	
			30 80											1.68		15																			
Mar.	P Ray		34 10					Mar. ban. Ab.								15																			
				AR. 3631				1st Lab Bn.						97.33																						
			34 10											97.33		15		110 49																	

NUMBER 871099 RANK Pte NAME BOGLE W.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
									134 03		
Oct	Clé Cay	34 10		Canp				15 -	153 13		
				CAK 1723. No 56471. 15/10/18 a19	9 73				143 40		
		34 10			9 73			15 -			
Nov	Clé Cay	33 -		Can.				15 -	161 40		
Dec	Clé Cay	34 10		Can				15 -	180 50		
Jan	Clé Cay	34 10		Can				15 -	199 60		
		101 20						45 -			
				CAK 3346 Canada. 16/1/19 a 18	14 72				184 88		
Feb	Clé Cay	30 80		Can	14 72			15 -	200 68		
		30 80			14 72			15			
May	to 1707 22/5/19 Cash in Effects Rmtce Regt. dep 289		1 50						202 18		
			1 50								
June	——			T118 10/6/19 To Ottawa	200 68				1 50		
					200 68						
				Dr. W122. Bal to Canada	1 50				0		
		- - - -		NON EFFECTIVE. ACT.	1 50						

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY * ~~ENGLAND~~ OR CANADA.

EFFECTIVE DATE:- 1.10.16.

AMOUNT:- $15.00

ON ...NCE. * ENGLAND OR CANADA.

...VE

AMOUNT:-

NAME:- BOGLE Wm.

NUMBER:- 871099

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. E. Bogle (wife)
466 Pacific Ave., Winnipeg, Man.

~~2 Pte Compton 18/5/19~~
~~A/Sgt Hayhurst 4/2/19~~
Retaken on strength Canada 1/2-1/19

DIED. INFLU. 10-2-19
Cas List C-440. 10-2-19
CAMC. Cas Depot

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Pte.

UNIT AND TRANSFERS

ORIGINAL UNIT:- 183rd. Bn.

DATE ACCOUNT FIRST OPENED - 1.10.16.

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			1st Lab Bn.
110 20/4/18	1/5/18	1/5/18	Camb. D
	1/4/19	16/4/19	N E G

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS { UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK

DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT
16/1/19	3346	Carried £3-0-6	~~14~~ 72			Ledger Short Bal	199 60
		NES Rendered 7.5.19				1 Pte Bal #	164 88
		" NES Balance #	200 68				
		Ledger "	~~240~~ 68				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
V	1 00	10		

Discharge Cancelled Auth. Comd. P.M. Kensington Park 8/2/19

PARTICULARS OF RENDERING NON-EFFECTIVE: ~~Transferred to Can 24/4/19 Pte C 1975 Sgt 17th Bn. Rtd. MD No 10.2.10~~

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MONTH	PARTICULARS	CR 1	CR 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
1918.											
Mar.	31st Bal. frd.								110 49	Nil	
Apr.	P. Pay	33		Can. Asst.				15	178 49		
				Dr. aR. 508 13/4/18 Det. S. Cliffe	9 73				118 76		
		33			9 73			15			
May	Pte Pay	34 10							152 86		
				CAP				15 -	137 86		
				DR 509 - CAMC D. 13/5/18 a3	9 73				128 13		
				DNR 232 — " — 26/4/18 a11	18				127 95		
				DNR 368 — " — 26/4/18 a11	4 87				123 08		
				AR 8/371 — " — 29/5/18 a16	9 73				113 35	Nil	
		34 10			24 51			15 -			
June	Pte Pay	33 -							146 35		
				CAP				15 -	131 35		
				AR 8522. No 5697. 13/6/18 a3	9 73				121 62		
				AR 8665 — " — 28/6/18 a11	4 87				116 75		
		33 -			14 60			15 -			
July	Pte Pay	34 10							150 85		
				CAP.				15 -	135 85		
		34 10						15 -			
Aug	Pte Pay	34 10							169 95		
				CAP.				15 -	154 95		
				AR 1079 No 5697. 15/8/18 a5	9 73				145 22		
		34 10			9 73			15 -			
Sept	Pte Pay	33 -							178 22		
				CAP				15 -	163 22		
				AR 1435 No 5697 16/9/18 a3	9 73				153 49		
				1572 " 27.9.18 a12	9 73				143 76		
				DNR 55 Gen Dept. 4/4/18 a17	9 73				134 03		
		33 -			29 19			15 -			

PART I.

A.F.B. 179 Canada (Revised 1918). 40266 10/8/18 D. 343

Reserved for M.H.C.

Regt. No. 871099 Rank Pte Surname Bogle Christian Name WILLIAM

Unit or Corps—(a) Overseas from United Kingdom 2nd Can. Lbr. Bn. (b) in United Kingdom Same

Born at—Town Londonderry County or Province — Country Ireland

Date of Birth—Day ? Month August Year 1869 Age 49 yrs. 5 months.

Joined at Winnipeg Man. Date 22nd Dec 1916

Former trade or occupation Carpenter

Permanent Marks or any peculiarity that will serve for future identification :—

Tattoo - womans Head. Left forearm.

Height—feet 5 inches 11 Colour of eyes Blue

Signature of Soldier (*for identification purposes*) W. Bogle

Medical Report

☞ *Read carefully the instructions on last page of this form.*

1. DISABILITY.

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

Disabilities Group (*a*) DEAFNESS OF LEFT EAR.

Disabilities Group (*b*) OVER AGE ARTERIO SCLEROSIS

Disabilities Group (*c*) NA

2. CAUSE OF DISABILITY

	Place of origin.	Date of origin.
(*i.*) As to Group (*a*) above.	Un Known.	Canada. July 1916
(*ii.*) As to Group (*b*) above.	OVER AGE.	Canada. Prior to Enlistment
(*iii.*) As to Group (*c*) above.	NA	

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

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

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

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

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

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

(*ii.*) As to Group (*b*) above ? NO

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

PART II.

PART III.

Statement of the Soldier

(This is to be completed only in the case of the Soldier taking his Discharge in England.)

(Sections 1, 2, 5, and 6 are to be read to the Soldier.)

I, the undersigned, 871099 Pte Bogle Wm have heard the description of my disability read, and am satisfied ~~(or not satisfied)~~ with it. (If dissatisfied, statement should follow.) I complain in addition of :—

Nil.

W Bogle.

Signature of Soldier examined.

Instructions to Medical Officers

Question 1.—State the disability in terms of a diagnosis, that is, a diagnosis of the existing condition as distinguished from the disease or injury which caused it. It should be noted that in medical cases the disability may be the actual disease; for example, Tubercle of Lung, Chronic Bronchitis, Myalgia, Gastric conditions and so forth. (Follow the nomenclature as laid down in the "List of Diseases" of 1915, and amended by A. C. I. No. 1587 of 1917.)

Question 2.—The cause of the disability when known should be stated and care should be taken to establish as correctly as possible the place and date of origin. This is important in view of the relationship of Questions 3 and 4 to Question 5.

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

Question 5.—MEDICAL HISTORY.—State concisely the essential points of the history of the case as supported by documentary evidence. If further evidence is considered necessary to complete the Medical History, the same not being supported by documents, this should be obtained by questioning the soldier, but should be distinctly shown as "Patient's Statement." It is considered advisable that these latter statements be grouped apart from the evidence supported by documents available to the Medical Officer.

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

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

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

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

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

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

The Medical Officer in charge of the case will fill out pages 1 and 2 of this Form. The original must be wholly in the handwriting of the Medical Officer. The copies may be typewritten but must be signed by the Medical Officer who must be responsible that these are true copies of the original.

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

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

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

ENTRIES OF RECATEGORIZATION

Date	Station	Category	Signature of M. O.	Date	Station	Category	Signature of M. O.

PART I. (continued).

5. MEDICAL HISTORY.

His statement :— Had malaria in India in 1898. no other illness. No sickness since enlisting — was in France with Labour unit for 14 months. First noticed deafness & tightness after musket drill in Winnipeg — 1916.
Documentary Evidence
Has not been in Hospital since Enlisting
Boarded BII (2-1-17) — average + Deafness.
Re Boarded BII (22-7-18)

6. PRESENT CONDITION.

He is a well nourished man of 49 — considerable puffiness of face — Complains of deafness of left Ear — no discharge or pain. Hearing in Rt Ear good.
Arteries palpable — Heart — Apex outside left nipple line — heart regular — no murmurs. Chest — clear.
Abdomen — prominent — Bowels regular — Urinary system :+ negative findings

7. OPERATION. (i.) Was one performed ? no (ii.) If so, state what. no
(iii.) Was one advised and declined ? no

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

8. (i.) Is there loss or decay of teeth attributable to Active Service ? yes
(ii.) If so, describe. Two teeth decayed

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

Date of Report Jan 2nd 1919 Signed [signature] Officer in medical charge of case.
Station No 5 C.G.H. Kirkdale

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

[signature] COLONEL C.A.M.C. (Officer i/c Hospital / S.M.O. / Brigade) Strike out one of these
No. 5 CANADIAN GENERAL HOSPITAL LIVERPOOL

Dated at Station, on Jan 2nd 1919

*Delete if inapplicable.

PART II.

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

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

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

12. From the medical information now adduced, was the disability caused or aggravated by :—
(a) Negligence of the Soldier — Caused ? no — Aggravated ? no
(b) Misconduct of the Soldier — Caused ? no — Aggravated ? no

13. THE ENTIRE DISABILITY.—Without regard to his regular occupation, to what extent is his capacity lessened at present for earning a full livelihood in the general market for untrained labour ?
(*Estimate at none, 5%, 10%, 15%, 20%, etc.*) Not applicable

14. THE DISABILITY DUE TO SERVICE.—(*See Part I. (3). Aggravation on Active Service of a disability existing previous to joining is to be included in this estimate.*)
What part of the entire disability estimated next above (13) is due to causes arising during Active Service ?
(*Estimate at none, 1/10, 2/10, 3/10, etc., or all.*) Not applicable

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

16. If an operation was advised and declined, do you consider the refusal to have been unreasonable ? Not applicable

17. Can the former trade or occupation be resumed ? Yes

18. REMARKS :— A.G.I. Telegram 9083 of 11-11-18.

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

Date of Board 2-1-19

Signatures of the Board: H.C. Burrishdal President. [signature] Major [illegible]

Station No. 5 CANADIAN GENERAL HOSPITAL LIVERPOOL

Approved [signature] A.D.M.S.

Dated at Walter Ross Station

MAJOR, D.A.D.M.S. For A.D.M.S. CANADIANS BUXTON AREA.

ASSISTANT DIRECTOR OF MEDICAL SERVICES 8 JAN 1919 CANADIANS BUXTON AREA.

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