REGIMENTAL DOCUMENTS

27578

Pte Bonnar James Robert REGT. NO. 817975 UNIT 25th Bn H. Q. FILE NO.

	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)	24/6/19				DEATH
	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)					
1	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
1	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 Unfit
	MEDICAL EXAMINATION (M.F.W. 129)					
2	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)					
2	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					
1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
1	AFB. 122					5-29
4	AFB 1237					24-29
7	Insd					29-29
2	Insd					1
1	AFB					
1	MRW67					
1	A122					1

W. 2589
100-4-11-18
1272-39-1377

ORIGINAL.

140th OVERSEAS BATTALION C. E. F.

ATTESTATION - PAPER.

No. 817875

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?	Bonnar.
1a. What are your Christian names?	James Robert.
1b. What is your present address?	Fredericton, N. B.
2. In what Town, Township or Parish, and in what Country were you born?	Fredericton.
3. What is the name of your next-of kin?	Mrs. ~~Bessie~~ Elizabeth Bonnar.
4. What is the address of your next-of-kin?	Fredericton, N. B. (General Delivery) York County, Canada
4a. What is the relationship of your next-of-kin?	Wife.
5. What is the date of your birth?	August 1st, 1876.
6. What is your Trade or Calling?	Sawyer.
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?	No.
10. Have you ever served in any Military Force? If so, state particulars of former Service.	No.
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, James Robert Bonnar., 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.

James R Bonnar (Signature of Recruit)

Date March 17th, 1916. J. A. Courtenay Lt. (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, James Robert Bonnar., 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.

James R Bonnar (Signature of Recruit)

Date March 17th, 1916. J. A. Courtenay Lt. (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 St. John, N. B. this 17th day of March 1916.

Major. W. N. Reed (Signature of Justice)

J. P.

Doc. Trade

M. F. W. 23.
400M.—1-15.
H. Q. 1772-39-841.

Description of James Robert Bonnar. on Enlistment.

Apparent Age 40. years 7 months.

(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height	5 ft 6 ins.
Chest measurement. Girth when fully expanded	37½ ins.
Chest measurement. Range of expansion	1½ ins.
Complexion	Medium.
Eyes	Hazel.
Hair	Dark Brown.
Religious denominations. Church of England	Yes
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).

One Vaccination Scar, Left arm.
Scar 1" x 3/8" Anterior Left knee.

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 March 17th, 1916. 191 . H. Conaghan

Place West St. John, N.B. Capt.

Medical Officer.

*Insert here "fit" or "unfit."

NOTE.—Should the Medical Officer consider the Recruit unfit, he will fill in the foregoing Certificate only in the case of those who have been attested, and will briefly state below the cause of unfitness:—

CERTIFICATE OF OFFICER COMMANDING UNIT.

James Robert Bonnar. 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.

R. A. Bell Lieut. Col. (Signature of Officer)

O. C. 140th Overseas Battalion C. E. F.

Date March 17th, 1916. 191 .

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 817975 (Rank) Private

Name (in full) JAMES ROBERT BONNAR enlisted in

the ----------140th Battalion ----------

CANADIAN EXPEDITIONARY FORCE at ST. JOHN, N.B. on the ~~17th~~ 11th

day of March 19 18.

HE served in ---------- Canada, England and France ----------

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

R. O. 1420 (a)

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

Age 43 years 9 months

Height 5 feet 6 inches

Complexion Dark-Ruddy

Eyes Brown

Hair Black

Marks or Scars Numerous scars all over body from shrapnel wounds.

James R Bonnar
Signature of Soldier

R. W. Lindsay
Issuing Officer

LIEUT.
Rank

for O.C. District Depot #7
Appointment

Date of Discharge June 9th, 1919.

Signed at FREDERICTON, N.B. this 9th day of June 19.

in Military District No. 7

File Reference No.

DISTRICT DEPOT No. 7
JUN 9 1919
FREDERICTON, N.B.

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

M. F. W. 39a.
250m.—6-18.
H. Q. 1772-39-882.

WAR SERVICE BADGE

Class "B" No. 61253 Issued

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

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

Unit .....

Address on Discharge .....

Character and Conduct .....

.....

Former Occupation .....

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

.....

Medals and Decorations .....

.....

Remarks .....

.....

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

.....

Name of Officer

.....

Rank

.....

Appointment

On demobilization or discharge application for particulars called for on the back of this certificate will not be considered. WAR SERVICE BADGE Class "B" No.

1.—That discharge certificate must be carried when wearing uniform.

2.—That uniform can be worn only thirty (30) days after discharge, or when duly authorized in writing, and

3.—That wearing of uniform renders him liable to usual military discipline, as if on the strength of a unit.

Forms
I. 1237
12

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
Year	8/14945	Pte	Brennan	J. R.
	Unit.		Age.	Service.
	25th Canadians		42.	

Station and Date.	Disease G.S.W. Arm, Hand, Knee & Thigh (R) L. Leg.
Houlton	13. 4. 14
C. of L.	
War Hosp:	
Epsom.	S.S.W. of Buttock -
	10 d. for Ant. Surface of Thigh & mid Buttock
	Wds were inflamed & very painful on admission.
Appl 17th '14.	10 d. better.
	Finger C. Fracture of 1st finger, Wd dressing
	Knee, small Wd.
28. 1. 18.	J W Eaton
	Was. op on 2 Jan 28. 18. —
	The cartilage were exposed & found free on
	knee was firmly bound in scar, but appeared
	to be otherwise little damaged.
	J W Eaton
	(Act Surg)

HORTON (C. of L.) WAR HOSPITAL, EPSOM.
2nd. Inj. Anti-Tetanus Serum.
Date 15. 4. 14 500. U.S.A Units.
M.O. i.c. J W Eaton

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

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

Station and Date.	

ORIGINAL.

To be made out in duplicate.

H.Q. 54-21-23-53

PARTICULARS OF FAMILY OF AN OFFICER OR MAN ENLISTED IN C. E. F.

INSTRUCTIONS.

(a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.

(b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.

(c) All questions, etc., must be answered.

(d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.

(e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

---

(1) Name of Overseas Unit which Soldier joins 140th OVERSEAS BATTALION C. E. F.

(2) Regimental Number 817975

(3) Full Name of Soldier James Robert Bonner

(4) Place of Birth Fredericton N.B.

(5) Are you married, or not ? Yes

(6) If married, state,
(a) Full name of your wife Mrs Elizabeth Bonner

(b) Present Postal Address Frderinton N.B.

(7) Are you a widower ?

(8) Have you any children ? 3 boys, Morris 20 yrs. Ottis, 15 yrs. Eddie 14 yrs

If so, give number of boys and girls 2 Girls . Grace 18 yrs . Aime 12 yrs

Also their names and ages

M. F. W. 67.

300M.—5-16.
1772-39-954.

(SEE OTHER SIDE.)

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

If so, state name and address .....

(10) Is your Mother alive ?.....No.....

If so, state name and address.....

.....

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

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

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

.....

.....

(13) If you have no wife, father, mother or children, state the name and relationship with full postal address of your next of kin, to whom you would desire any communication to be sent concerning you.

.....

.....

.....

(14) If you have a wife, or children, or a widowed mother who depends on you as her sole support, have you applied to the Paymaster of your unit for Separation Allowance ? If not, this must be done.

.....Yes $20.00 per Month.....

(15) Are you insured ?.....No.....

If so, in what Company ?.....

Have you made arrangements for payment of your Insurance premium.....

If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.

L. A. Burchell
.....
Officer Commanding.

Date.....Aug 30th. 1916.....

ORIGINAL

MEDICAL HISTORY SHEET

MF

Surname Bonner BONNAR Christian Name James Robert

Examined { on 15th day of March 1916.
at Saint John, N.B.

Approved by 17 APR 1917
D.C. Malcolm,
Rank Capt. M.O.

Birthplace { City or Town Fredericton
County York, N.B.

Apparent age 40 years

Trade or occupation Lawyer

Height 5 feet 6 Inches

Weight lbs.

Chest measurement { Minimum 36 inches
Maximum expansion 1½ inches

Physical development Good.

Small-pox Marks

Vaccination Marks { Arm Right Left 1
Number One

When Vaccinated last

(a) Marks indicating congential peculiarities or previous disease Scar (1" × 3/8") outer side left knee

(b) Slight defects but not sufficient to cause rejection

R. Eye :- D 20.
L. Eye :- D 20

Date	Fit or Unfit	Examined for Re-Engagement	
			M.O.
			M.O.
			M.O.
			M.O.
			M.O.
			M.O.

Date	Result	Vaccinations	
13/8/16.		D.C.M.	M.O.
			M.O.
			M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.	
4/5/16.	+	D.C.M.	M.O.
18/5/16.	+	D.C.M.	M.O.
24/5/16	+	D.C.M.	M.O.

Enlisted on 11th day of March 1916 at Fredericton, N.B.

	Corps	Regt'l Number	Habits	Date
Joined on enlistment	140th O.S. Bn.	817,975.		11-3-16.
Transferred to	25th Bn			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

Station	Date	Disease	Result
4th Can. Gen. Hosp. Basingstoke	15/3/18	Multiple S.W. Right Arm & Left Hand	Invalided to Canada Return to Duty.
NBMH	June 4/19	SW Rt Arm Back Thigh	Discharged SIB 227 Sick Leave Cert

N.B.—This sheet to be disposed of in accordance with instructions in the Regulations for Army Medical Servcie, on the man becoming non-effective; the date and cause being stated on next page.

M. F. B. 313.
500M.—3-16.
H. Q. 1772-39-439.

CANADA

Surname Bonner Christian Name James Robert

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
Boulogne (C.H.L.) War Hospital Gen.		13.	4.	17.	4	3	17	G.S.W. R. Arm " Hand " Knee " Thigh L. Leg.		Wd of left leg. injured sciatic nerve. This was first from ocean on Jan 28 — & healed by 1st intention —	
No. 4 Canadian Gen. Hospital, Basingstoke.		4	3	18.	27	5	18	Do.	83	Wounds Healed. Injury to Sciatic. Extensors of left foot do not respond to faradism. except the Peroneal group. Weakness of muscles of R. hand. Injury to Median recovering slowly. Index finger stiff. Invalided to Canada	J.W. Cathcart (Capt. R.A.M.C.)
No 5 CANADIAN GENERAL HOSPITAL LIVERPOOL		27 MAY 1918			6 JUN 1918			Gsw. Multiple		Several scars both knees & Rt hip. long surgical scar back of left thigh 12" long. Feels pain in Rt hip. Scar on Rt. fore-arm & 1. finger. Fingers have limited movement. Index straight — no movement. Otherwise normal ~~no~~ change	Brig. E Boeny Capt R.A.M.C.
H.M.H.S. LANDOVERY CASTLE.		6	6	18	16	6	18	Do			G.L. Sells Capt. C.A.M.C.

DENTAL HISTORY SHEET

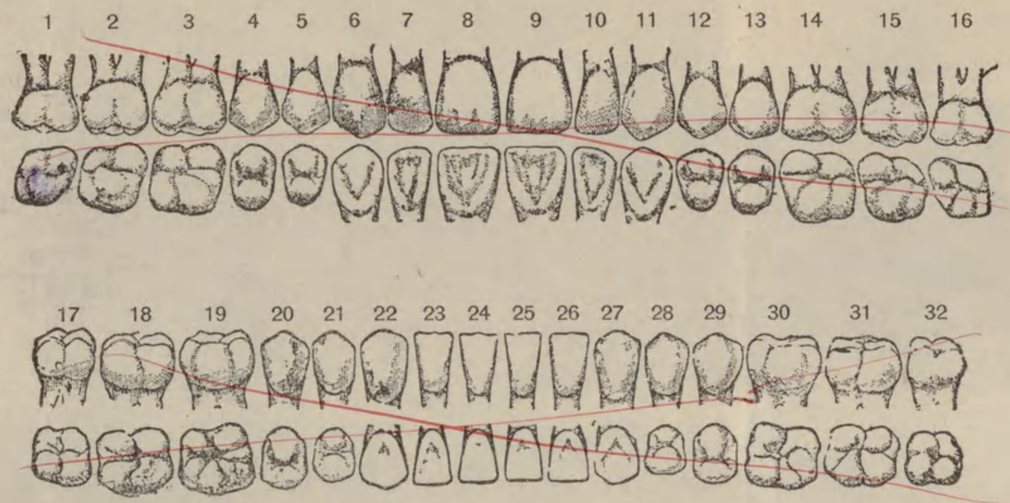
CANADIAN ARMY DENTAL CORPS

DISTRICT 7

NAME OF SOLDIER Brown G. No. 811925

REGIMENT [illegible] RANK [illegible]

M.F.B. 465.
150M.—-18.
177-39-950.



INSTRUCTIONS

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

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

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

	Date	Amalgam	Temporary Filling (a) G.P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhœa	Synthetic Porcelain	Extracting	DENTURES U	DENTURES L	DENTURES P	Gold Clasp	Gold Filling	CROWNS Gold	CROWNS Porcelain	Bridge Work	OPERATOR	Military District	REMARKS
Condition on first Examination	1919.										32											
(	June 9										X	1	1							R. Brimacombe Capt.	7	Incomplete
	" 9		Condition as above																	R. Brimacombe	7	

Assistant Director of Medical Services
M.D. 7
JUN 9 1919
Dental Service

DENTAL HISTORY SHEET

DENTAL ASSISTANT COURSE

CASE HISTORY SHEET.

N. B. Military Hospital. Fredericton Station.

No. 817975 Rank Pte. Name Bonnar Jos. R. Age 42

Unit 25th Btn. Completed years of service Where and how long } Can. 6/12 Eng. 15/12 France 7/12

Date of admission July 3, 1918. Date of discharge

Diagnosis G.S.W. Arm & Thigh. Place of origin

CONDITION ON ADMISSION AND PROGRESS OF CASE

Shows a round healed scar 3/4" diam, 3" above & internal to left patella. Another at same level on post. surface of same thigh. Also a linear scar down whole post surface of left thigh. Extension of ankle poor - flexion, inversion & eversion good.

Numbness on dorsum of foot & calf of left leg.

Shows 2 small scars on rt leg just above the knee

Right knee weak especially after exertion - tires easily. Shows scar 1/2" diam 3" below Ant. sup. spine on rt side of shin & another 6" below post. sup spine on same side

Cannot lie on rt side owing to pain in rt hip. Has scar three base of 3rd rt proximal bone in fore finger - stiff finger as result.

Shows two scars above rt elbow & rt forearm is weak.

Shoulder joint is limited in upward movement

Chest & abdomen normal.

Nov 2. Condition improving slowly. Nov 9 Condition improving slowly. 16/11/18. unchanged 20.11.18. No change appreciable.

FAMILY HISTORY

(Tuberculosis, mental or nervous diseases.) Nil

10/9/18. Condition Muscle Improved.

25-9-18 Gradually improving Treatment continued H. de L.

TREATMENT

(Especially any specific or special form) Massage and Electricity

CONDITION ON DISCHARGE,

(and disposal made of case.)

Date 4-7-18

H. Carey McGregor
Medical Officer i/c case.

M. F. B. 313a.
50M.—3-18.
1772—39-439.

CASE HISTORY SHEET.

N.B.Military Hospital Hospital. Fredericton, N.B. Station.

No. 817975 Rank Pte. Name Bonnar Jas.R. Age 43

Unit 25th Bn. Completed years of service Where and how long

Date of admission 11.7.18 Date of discharge 16.5.19.

Diagnosis G.S.W. rt. arm & hand
G.S.W. lft. thigh Place of origin France

CONDITION ON ADMISSION AND PROGRESS OF CASE

Exam.(21.11.18) rt.Arm: Entry scar,healed,size of dime 2½" above rt.Ext.Humeral condyle.
Exit wound, healed 3½" above (the back of arm) Int. condyle.
Elbow joint normal,Wrist joint normal.
Thumb: Abd.and add. 90% normal - weak.
Rt.Index: ~~This~~ T. T. healed B.W. in prox. phalanx. No movement in interphalangeal joints of this digit but flexion 45o at metocapo-phalangeal joint. Ext. normal, add. and abd. normal. This finger stiff and useless.

MIDDLE FINGER: Ext. normal; flexion 70o at metocapo-phalangeal,45o at interphalangeal joints. This finter is stiff.

RING FINGER: Ext. normal, flex. - normal at metocapo phalangeal joint. Flex. 80o ist. interphalangeal, 10 o. at 2nd interphalangeal.

LITTLE FINGER: Prac. normal except flexion in 2nd interphalangeal joint diminished to 30o.

GRIP AND RT. HAND: 70%. normal, some tremor.

LEFT LEG: T. T. wound)Bullet.) left thigh. Lack of sensation in outer side of calf and hip muscle and ext. of toes, do not respond to faradism.

FAMILY HISTORY

(Tuberculosis, mental or nervous diseases.)

TREATMENT

(Especially any specific or special form.)

CONDITION ON DISCHARGE,

(and disposal made of case.)

P.T.O.

Date 21.1.18.

Capt.
Medical Officer i/c case.

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

27.1.19. Very feeble faradic response in left tibilias anterius, but has some voluntary dorsi flexion of left ankle (foot). Numbness in outer side left leg diminished, some improvement. General improvement in strengtl of left ankle.
27.3.19. General improvement. To continue treatment.
16.5.19. Exam: RT. Arm and Hand: Rt. Thumb abduction and adduction almost normal. Can adduct to space between ring and little finger. This has improved in strength under treatment.
Rt. INDEX: Extension normal at metocapo phalangeal joint. Flexion is only 45o. Nerve is bony deformity and irreg. scar over site of bullet wound of 1st phalanx. The two interphalangeal joints of index are fixed in position, the 1st one being completely ankylosed in full extension and 2nd one semi-flexed at 45o. This finger is still quite useless. Has no power in assisting grip of hand. It sticks out awkwardly when attempting to close fist and does not assist in grasping object between thumb and index. Cannot button smaller buttons of his clothing with this index thumb.
RT. MIDDLE FINGER: Extension complete in all joints. Flexion at meta-capo phalangeal - 80o; at 1st interphalangeal - 70o; at 2nd interphalangeal -45o. There is a scar over distal phalanx from shrapnel wound and this terminal phalanx is out of alignment, it is deflected to outer side of hand.

RT. RING FINGER: Extension complete in all joints. Flexion at metacapo-phalangeal - 90o; at 1st interphalangeal - 70o; at mid-interphalangeal 45o.

RT. RING FINGER: Extension normal, other movements normal except mid interphalangeal joint where flexion is limited to 30o. Cannot make a fist. Can spread fingers - wrist, elbow normal. Marked loss of power of grip and rt. hand - 1/3 normal.

LFT. THIGH LEG: Small scars, one in front and one in back left lower $\frac{1}{3}$ of thigh. Also 10" operative scar along back lft. thigh where sciatic nerve was sutured. All scars healed. F.B. had gone right through. Hip and knee movements not restricted. At left ankle has good inversion and eversion and anteflexion but voluntary dorsi flexion of ankle limited. Can dorsiflex voluntarily to bring foot at rt. angles to leg but not any further.

SENSATION: Complete loss of sensation has existed on outer side left calf from below knee joint and on sole. This has improved so that pin pricks can be easily felt, and light touches also felt. Sensation to localization of pressure now normal. Muscles well developed in thigh and calf.

ELEC. REACTIONS: No response to faradism or galv. from tibialis anterius or extensors. Faradic response to peronei flexors. But diminished in peronei co pa ed to rt. Galvanism elicits no response from Tib. anterius or extensors of foot and toes. But he has voluntary movement of dorsi flexion to some extent.

RT. HIP: Presents scars of a T 7 T Bullet or shrapnel wound, also in rt. knee. The rt. leg is weak. Cannot lie on rt. hip. Hip lame and tired after walking. No limit of range of any joint movements. This man has days when he is better than others of pains in hips and knees; appear to be aggravated by damp weather.

Recommend discharge - refer to D.S.C.R. for re-education course.

F. W. Lamey
Capt
16-5-19

CLINICAL CHART.

(*To be pasted into Case Book opposite Patient's Case.*)

B1.

Corps 25th Batt. Hospital Station HB Military

No. 517975 Rank and Name Pte Bonnar. Jas. R. Age 42 Service 2 9/12

Disease Date of Admission 3-7-18 Date of Discharge Result Case Book Folio

Dates of Observation	July 3	4	5	6	7	8	9	10	11	12	13	14	15	16																		
Days of Disease																																
Temperature Fahrenheit	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.
107°																																
106°																																
105°																																
104°																																
103°																																
102°																																
101°																																
100°																																
99°																																
98°																																
97°																																
Pulse per Minute	60	72 72	76 80	60	80 60	76	100																									
Respirations per Minute	18	18 18	18 18	16	16 18	16	16																									
Motions																																

M. F. B. 288.

25M—2-18.
H. Q. 1772-39-513.

Signature ..... *In charge of case.*

CLINICAL CHART.

(To be pasted into Case Book opposite Patient's Case.)

Corps 25th Bde Hospital Station D.B. Military Hospital.

No. 817975 Rank and Name Pte Bonnar, Jos. R. Age 42 Service 2/12

Disease Date of Admission 3-7-1918 Date of Discharge Result Case Book Folio

Dates of Observation	July 3	4	5	6	7	8	9																								
Days of Disease																															
Temperature Fahrenheit	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.
107°																															
106°																															
105°																															
104°																															
103°																															
102°																															
101°																															
100°																															
99°																															
98°																															
97°																															
Pulse per Minute	60	72 72	76 80	60	80 60	76	100																								
Respirations per Minute	18	18 18	18 18	16	16 18	16	16																								
Motions																															

M. F. B. 288.

25M—2-18.

Signature *In charge of case.*

CLINICAL CHART.

(To be pasted into Case Book opposite Patient's Case.)

Corps N.B.D. 7 Hospital Station Fredericton, N.B.

No. 817975 Rank and Name Pte Bonnar, J. Age Service

Disease G.S.W. Lt. Arm, Date of Admission 3-7-18. Date of Discharge Result Case Book Folio

Dates of Observation	1	2																														
Days of Disease																																
Temperature Fahrenheit	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.
107°	8 6 4 2																															
106°	8 6 4 2																															
105°	8 6 4 2																															
104°	8 6 4 2																															
103°	8 6 4 2																															
102°	8 6 4 2																															
101°	8 6 4 2																															
100°	8 6 4 2																															
99°	8 6 4 2																															
98°	8 6 4 2																															
97°	8 6 4 2																															
	8 6																															
Pulse per Minute		60 72	64																													
Respirations per Minute		14 16	18																													
Motions																																

M. F. B. 288.

25M—2-18.

H. Q. 1772-39-513.

Signature ..... In charge of case.

Forms
I. 1237
12

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
Year 1918	877975	Pte	Bonnar	Jas
	Unit.		Age.	Service.
	25 Bn.		42	2y 9m / 1y 12

Station and Date.

Inverkeithing

Disease

All wounds of right arm, forearm, & hand except wrist & Paradise, except those included by the Median Nerve, which exactly, but there was no R. D.

Lower limb

Calf muscles except brisk & Paradise.

			Paradise	K.C.	A.C.
Tibialis Anticus	1		No	9	12
Extens. Long. Dig.	1		No	22	13
Peroneal.	0.5		Yes		
Extens. Prop. Hall.			No		
Extens. Brev. Dig			No	11	9

Robert J. Armour.
Surg.

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

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

[P.T.O.

Station and Date.	

Forms
I. 1237
12

bed 30

Army Form I. 1237.

V CAN. GEN. M. H.
LIVERPOOL

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
Year	817975	Pte	Bonnar	James Robert.
	Unit.		Age.	Service.
	25th Batt		42	2y6/12

Station and Date.

Disease GSW Left Leg Rt Thigh & Knee Rt Arm & hand Dropped foot

PATIENT STATES:— Civil Occupation Farmer

ENLISTED AT Fredericton N.B. March 11th 1916

ARRIVED IN ENGLAND Sept. 6th 1916

ARRIVED IN FRANCE Oct 5th 1916

WOUNDED AT Vimy

No 3 Can. Gen. Hosp. Kirkdale, 27/3/18. Present condition — Severals Scars both knee, rt. hip. Long Surgical scar back & lt thigh 12" long. Steel pains rt hip Schrapnell scar on hip. Scar over rt. forearm. + 1 finger. Fingers have limited movement Index is stiff + has no movement & the wrist normal.

Maj. L Bowen
Byt. Lt. Col. R.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.	

Forms
I. 1237
12

Army Form I. 1237. 179

21

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
W27200	817975	Pte	Bonnar.	Jas.
Year 1918	Unit. 25 Bn. Can.		Age. 42	Service. 2y 9m

Station and Date. 4-2-18

Disease G.S.W. Rt Arm & Hand Rt Knee & L. Lgh Rt Lg

No. 4 Canadian Gen. Hospital, Shorncliffe.

OCCUPATION Farmer

ENLISTED March 1916 Fredericton N.B.

ENGLAND Oct. 1916

FRANCE Nov. 1916 1918

WOUNDED April 9-1917. Vimy Ridge

HOSPITALS Moulton Hosp Epsom
No 4. C.G.H.

OPERATIONS

Incision for Removal of F.B

Frat. Jan 28/18 Femur sutured L. Lg.

REMARKS Bullet entered through R. Arm. Fr
Through R. Groin out at Back.
through Left Thigh about Centre
through Right Knee

SIGNATURE OF P.M.C. OR M.O.

All wounds have been healed
PRESENT CONDITION for some weeks

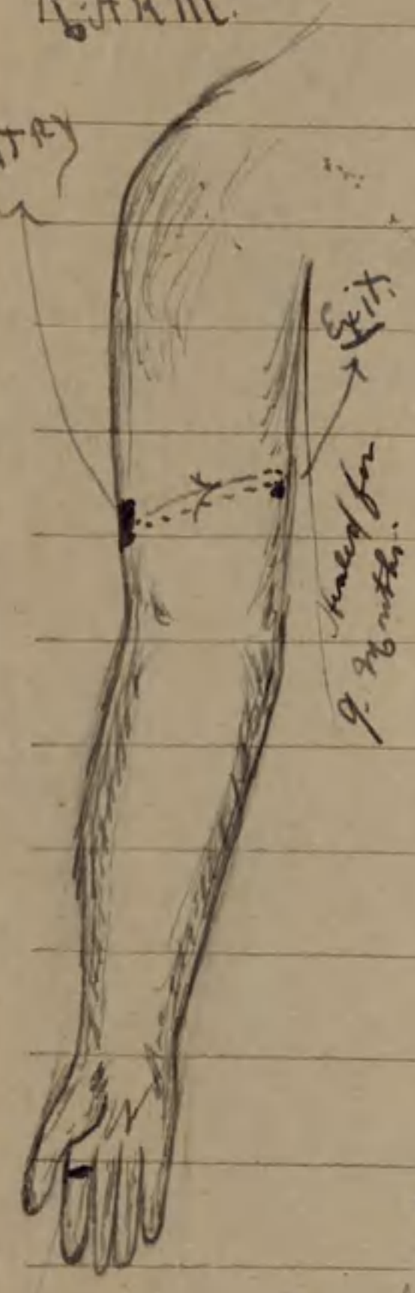
* The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.

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

[P.T.O.

Station and Date.

R. ARM.



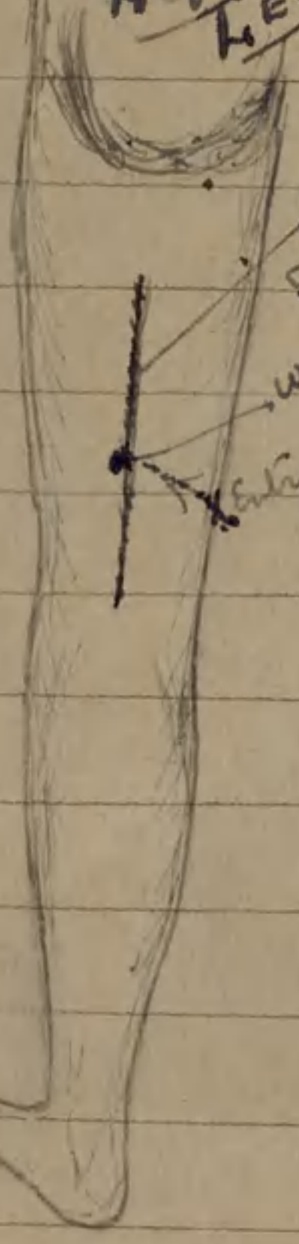
Right. ARM. There is a healed through and through S.S.W. which entered 2" above outer condyle of Humerus and passed through fleshy part of front of arm and passed out two inches higher up with some slight damage to Muscle spiral. Shoulder, elbow and wrist joint movements Normal. Dulness of Cutaneous sensation over outer border of little finger and hand.

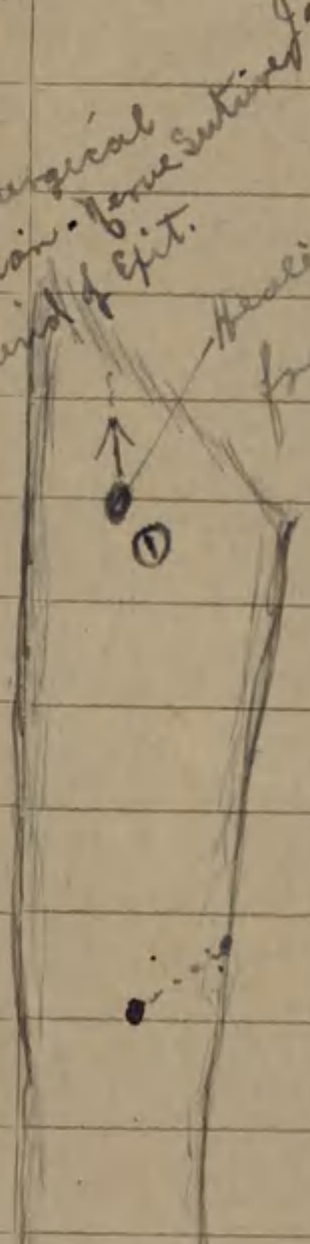
A healed perforating wound through the first phalanx of index finger of R. hand. The Metacarpo phalangeal joint is fixed. The other two joints of all the fingers are stiff. Movements of thumb normal.

LEFT. LEG. — Bullet passed through lower 1/3 of left thigh Entering inner side and passing out postero 2" higher up and about centre of thigh - Weakness and loss of power of muscles of foot and leg. Atrophy of muscles of inner side of thigh

Scar through & below finger

Left. Leg.





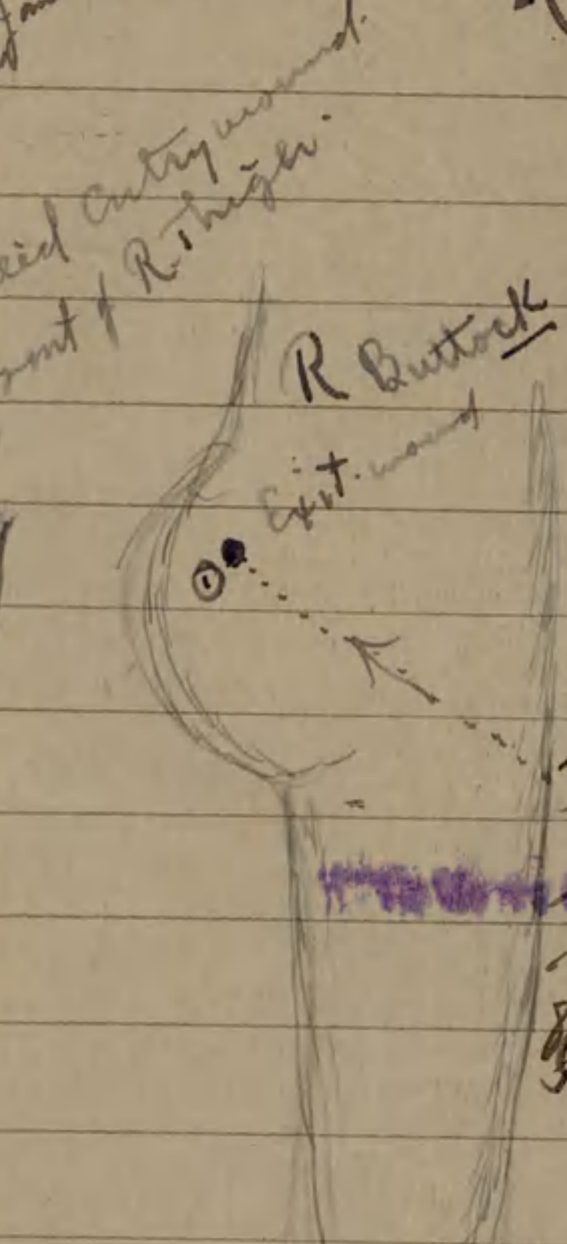
R. Leg. — Bullet entered front of R thigh 3" below Pouparts lig. and emerged through centre of Right Buttock. Movements of hip joint Normal. - But the impulsive pain at Right in R. hip

27/5/18 5 Cls. N L-foot

Several scars back Buttock & thigh

Long surgical scar back left thigh 9" long Peels pad in Rt. hip. Surgical scar on hip.

scar right fore-arm & 1 finger. fingers have limited movement Index straight No movement Otherwise normal



Leprosy Cert sent

Ismalia 5 Canada

H. S. F. Manning Capt
Adjt. 1

No. 817915 Name Bonnar, Jas. Robert. Sqn., Batty., or Company "C" Corps 14th Bn, L.C.F. Date of enlistment 17/3/16. G.C. Badges —. Service or Proficiency Pay —

Date of last entry in Company Conduct Sheet 21-6-16. No. and date of last drunk ✓. Period not reckoning towards freedom from extra fine. Sheet No. One. Signature O.C. Company, etc. G. H. Saunders Capt. Character Good

Place	Date of offence	Rank	Cases of Drunkenness	Offence	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remarks
					T.S.O.'s	Wounded	17-4-17		

Army Form B. 122

P.T.O.

W 16575/M. 237. 2,000M. J. P. & Co., Ltd. (C 1309). Forms/B122/4.

Place	Date of offence	Rank	Cases of Drunkenness	Offence	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remarks

7 SEP 1917

THE HORTON (COUNTY OF LONDON) WAR HOSPITAL.

ELECTRICAL DEPARTMENT.

Pte Bowman. 25th Corpd.

F. ward

Reactions All muscles below knee — complete R.D.

I will treat awhile & report again.

M.O. i/c Electrical. Dept.

LIEUT R.A.M.C.

Dr Caton

F. Wood

NOV 1917

THE HORTON (COUNTY OF LONDON) WAR HOSPITAL.

ELECTRICAL DEPARTMENT.

Pte Bourne. 25th Coy. F. Ward

Reactions internal popliteal

improved & nearly normal.

external popliteal

Complete R.D. but nerve has recovered excitability at lower joint level.

Power has improved in internal popliteal group.

Nutrition improving well.

The external popliteal nerve will, I think, recover in time, with treatment, & without operation.

M.O. i/c Electrical, Dept.

LIEUT R.A.M.C.

Dr Carson

F. Ward

Form—R. 190 8528-25M-25/10/15.

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.)

N.B. TO BE AT ONCE AFFIXED TO MEDICAL HISTORY SHEET.

(9 38 40) W5605—742 300,000 8/15 HWV(8M1268) Forms/W3172/2

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

Hospital.

Ward F. No. of Bed Date 16. 4. 17.

Regl. No.	Rank and Name	Corps	Part to be X-Rayed
817945	Pte Bonar	25th Canadian	R. Thigh

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

Signature of M.O.

Date

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

No. of Plate 3794 R. (3798. - 3399 R.
3800. - Rt. arm.
3801. Rt. hand.

Pelvis. Nothing abnormal
Thigh do
R. Arm. Bone intact. much metal dust
Hand. L. bad plate patient moved

DL

Signature of Radiographer

Date 16-4-17

Bonnar.

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

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

Casualty Form—Active Service.

Unit, Regiment or Corps 140th D.A. Bn. C.E.F. Bonnar

Regimental No. 817975 Rank Pte. Name James Robert, Bonnar

Enlisted (a) Mar. 17/16 Terms of Service (a) O. E. F. duration of war Service reckons from (a) Mar. 17/16

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) Basic Sapr-Trade

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	Halifax	25/9/16	S.S. Corsican
		Disembarked	Liverpool	6/10/16	
27/10/16	O.C. 140th Bn.	Transferred to 25th Bn Overseas.	Caesar's Camp Shorncliffe	27/10/16.	Part II. No 231. 27/10/16 G.H. Lowndes Capt. Adjutant, 140th C.E. Bn.

CERTIFIED CORRECT. NOV. 1916 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.

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				
	C. B. D.	ARRIVED C. B. D.	FRANCE	29.10.16	N. R. D 29.10.16 PART II ORDERS No 77 D 22.11.16
	C. B. D.	LEFT C. B. D. FOR	25th Bn	16.11.16	N. R. D 29.10.16
19.11.16	2nd Ent Bn	Arrived	2nd Ent Bn	19.11.16	NR.
	O. C.....BN	ARRIVED_____BN.	FIELD		B. 213 D_____
6-3-17	2nd Ent Bn	Left join 25th Bn	"	8-3-17	NR
10-3-17	25th Bn	Joined " "	"	8-3-17	B213 - DC 8289 - 19-3-17
12-4-17	H/S St Denis	Gs W. Multiple. Invalided (Wounded) & Posted to Nova Scotia Regtl. Depot	Bramshott	12-4-17	W3083-2957 Pte Ad- 44- 21-4-17
					Capt. for Lt.-Col., A. A. G. Canadian Section, G. H. Q. 3rd Echelon, B. E. F.
9/4/17	O.R.O.	To 2nd Posted from 25th Bn	Bramshott	12.4.17	Pte SO 13/11/18 LIEUT: FOR LT: COL: I/C RECORDS, C.O.M.F.
5-6-18	England	TAKEN ON STRENGTH, A.A. #7 PART II. ORDER No. 68	Fredericton	24-6-18	Capt., & Adjt., For O. C. District Depot No. 7.

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

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

Casualty Form—Active Service.

Unit, Regiment or Corps 140th Bn.

Regimental No. 817975 Rank P.D. Name Bonnar, James R.

C. E. F.

Enlisted (a) 17-3-16 Terms of Service (a) Dom. Service reckons from (a) 17-3-16

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) Lawyer.

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				
9-3-19	Emy.	TAKEN ON STRENGTH PART II. ORDER No. 68	District Depot No. 7.	5/6/19	Lieut. & Asst. Adjt. For O. C. District Depot No. 7.
		ST. JOHN, N. B.			
10-6-19	Dis. Dets.	STRUCK OFF STRENGTH PART II. ORDER No. 161	District Depot No. 7.	9/6/19	Lieut. & Asst. Adjt. For O. C. District Depot No. 7.

(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				

R—122

A.G.R. Rank Pte Name BONNAR, James Robert Reg'l No. 817975

Unit 140th Bn. If in perm. Corps, What Unit? Married or Single Married

Place and Date of Enlistment St. John, N.B., 17th March, 1916. Place of Birth Fredericton.

Name and Address, Next-of-Kin Mrs. Elizabeth Bonnar, General Delivery, Fredericton, York County, N.B., Canada. Relationship Wife.

Assigned Pay Monthly $ Payable to Relationship

Separation Allowance $ Payable to Relationship

Discharge, Date and Place Reason Qua. Character O/S.

N/E. R.B. No 4330
File R.L.
Category Inv U Can

H. W. & V., Ld.—7165-16.

Report. Date.	Report. From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS. Taken from Official Documents.
		Arr. in ENGLAND S.S. CORSICAN 6-10-16.			A.F.B. Inma 3 NOV. 1916
		27 10 16 140Bn T'fd to 25th ~~Res~~ Bn	Caesars Camp L'r ~~Dibgate~~	27-10-16	D.O. 231
22.11.16		25th Bn TOS 25th Bn from 140th Bn	Shrn	29.10.16	Pte 77.
19.4.17	✓	No 3 Can. Gen. Hosp.	Boulogne.	11.4.17	C.L.A. 487 S.W. R. Hand. Thigh. Leg.
11.4.17	✓	Invalided (Wd) posted to NSRD	Field	12.4.17	Pte II D.O. 44. Pte II D.O. 50 d/25.4.17
16.4.17	✓	War Hosp.	Huddersfield	17.4.17	C.L.A. 344? ✓ —
10.6.18	"	Invr to Canada	Ptd	6.6.18	CB 235
13.6.18	NSRD	SOS on Invr. to Canada	" B'chott	6.6.18	Pte II D.O. 145

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.				

L. L. Jo[illegible]03.—M. & D. 6832.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

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

Wife

To Whom Mrs Bessie Bonnar

Address Fredericton N.B.

Rate 20 00

By Whom Assigned Bonnar J R.

Regtl. No. 817975

Rank Pte

Corps 140 Bs. Batt: C E F

OCT 1 - 1916

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 ACCOUNT 2

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12a.
50m.—6-16.
1772—39—819.

Sheet No. 2. Mrs B. Bonnar Wife

20 00 PAYMENTS.

Name of Soldier. Bonnar J R

817975 - Pte - 140 Bs. Batt - CEF

L. L. Job 4503. - Req. 6832.

OCT 1 - 1916

20 00

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.		U 26421	20	
Nov.		U 29496	20	
Dec.		F 34628	20	
Jan.	1917	U. 36751	20	
Feb.		V 38522	20	20 R
March		W 45332	20	20 L
April		C 877	20	20 W
May		T 6659	20	
June		Y 13464	20	20 Cu
July		V 20427	20	C
Aug.		X 26477	20	L
Sept.		W 35934	20	D
Oct.		M 47662	20	V
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier_____

PAYMENTS.

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

16-3-16.

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 Bessie Bonnar.

Address Fredericton. N. B.

Relation to Soldier wife, child or mother } Wife.

Name of Soldier Bonnar. J. R.

Regtl. No.

Rank Pte.

Corps 140th Bn.

To what Corps belonging when called out }

PAYMENTS

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

ACCOUNT CONSOLIDATED 5

16-3-16.

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 11a.
50m.—4-16.
1772—39—818.

Sheet No. 2.

Bessie Bonnar Wife

Name of Soldier Bonnar J. R. Pte.

L. L. Job 310.—Req. 6574.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May		D 7282	50 -	50
June		A 8609	20	20
July		C 52 34	20	20
Aug.		E 12603	20	20
Sept.		Y 14953	20	20
Oct.		Y 18222	20	20
Nov.		Z 21147	20	20
Dec.		Z 24692	20	20
Jan.	1917	Y 28413	20	20
Feb.		Y 31400	20	20
March		Y 34089	20	20
April		Y 230	20	20
May		A 3441	20	20
June		Z 6391	20	20
July		Y 10133	20	20
Aug.		C 14178	20	R
Sept.		C 17593	20	B
Oct.		Y 22900	20	Bo
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier_____

PAYMENTS.

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

29281 THE MORTIMER SYSTEMS
OTTAWA, CANADA

Ewr

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

3157

Name Bonnar Mrs Thos.

Address Victoria Mills
York Co.
N.B.

Name of Soldier J. R. Bonnar

Regtl. No. 817975

Rank

Corps

Relation to Soldier wife, child or mother

To what Corps belonging when called out

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.		D 901	20.	Transferred to acct of same name in ledger No 1. Jan 16/14
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
Apl.				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

Date of Enlistment

16-3-16

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

Oct 1/16

RATE OF SEPARATION ALLOWANCE

~~20~~	4/12/17 25		

P.C. 3257

RATE OF ASSIGNMENT

20			

1 4 B 5 Qmar

PARTICULARS OF SEPARATION ALLOWANCE

No. 817975

Rank pte. Promoted Reverted Discharge

Soldier's Name J. F. Bonnar

Battalion 140 D.S. Batt'n C. E. F.

Beneficiary Bessie Bonnar

Relationship Wife

Address

Oct. 31/17

PARTICULARS OF ASSIGNMENT (Wife)

Name Mrs. Bessie Bonnar

Address Fredericton N. B.

Change of Address

1

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total		
		390	260	650		
Nov. '17	B 56910	20	20	40		
Dec	B 61243	20	20	40		W
1918 Jan	B 65678	30	20	50		M
Feb.	b 92479	25	20	45		
Mar	a 99755	25	20	45	✓	
April	b 3633	25	20	45		E
May.	E 10409	25	20	45		V
June	D 18447	25	20	45		V
		595	420			

1826-f-18

REMARKS

M.D. 7 ..... A/c Closed 30-6-18

G.S. # 420. Ret'd per Llandovery Castle

S.O. # 585 Date 20-6-18 F. X. 24-6-18

M.R.O. 2 B. Clerk .....

M. F. W. 128
400M.—6-17—172-39-141
Le L. 22320—M. & D. 1593.

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—177-38-1141
L. L. 22320—M. & D. 7993.

SURNAME. Bonnar

CHRISTIAN NAMES James Robert

REGL. No. 81/7 975 RANK Pte

UNIT 140

FORMER CORPS Nil

CARD NO.

140 Dis 9-6-19
Demob
FOLL. 100161 of 10-6-19
700
Bn.

NEXT OF KIN.

NAMES IN FULL Bonnar Mrs. Elizabeth

RELATIONSHIP TO SOLDIER Wife

ADDRESS Fredericton, York Co., N.B.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada, Fredericton N.B. DATE Aug. 1st 1876.

PLACE OF ATTESTATION St. John N.B. DATE March 17th 1916.

O/S. 25-9-16 546/3.

R/C 17/6/18 182/19 I

Lr L. 9450. M. & D. 6512.

M. F. W. 22. 250M.—2-16. H. Q. 1772-30-339.

MARRIED Yes SINGLE WIDOWER

TRADE OR CALLING Sawyer RELIGION Church of England

DESCRIPTION.

APPARENT AGE 40 YEARS 7 MONTHS

HEIGHT 5 FEET 6 INCHES

CHEST MEASUREMENT 37 1/2 INCHES EXPANSION 1 1/2 INCHES

COMPLEXION Medium EYES Hazel HAIR Dark Brown.

DISTINGUISHING MARKS One vacc. scar left arm, Scar 1" x 3/8" outerside left knee.

MEDICAL EXAMINATION. PLACE West St. John N.B. DATE March 17th 1916.

Present Address - Fredericton N.B.

No. 817975 Rank Pte. Name Bonnar. Jas. B.

T.O.S. 11-3-16. (Dv 38-20-3-16) Unit 140th Battalion C E F.

M.D. 6

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916 Mar 11.	1916. Mar 31.	C		
Apr.		C.	a.w.l. for 2 days pay	April Paylist.
May		C		
June		C.	a.w.o.l. for 2 days Pay 3 days C.B.	June Pay List
July		C		
Aug		C		

UNIT SAILED
SEP 25 1916

Reg. No. 817975 Name Bonar Jas R.

Rank A6- Corps 7 D.O. Age 42 Service C 3/12 2 15/12 F 7/12

Ledger No. Serial No. -

HOSPITALS	DATE	DIAGNOSIS
4 B. Hosp Fredericton	18-5-18	G.S.W. L Arm & Thigh
Trs to Armouries St John	19-6-18	" "
" 4 B. Hosp Fredericton	3-7-18	" "
Demobilized	9-6-19	

P. T. O.

HOSPITALS	DATE	DIAGNOSIS

M. F. W. 2553.
75M.—9-19.
1772-39-1332.

NAME Bonnar James Robert

REGT'L NO 817975

RANK AND CORPS Pte 2/5th Bn Gord Highrs

H.Q. FILE NO. 649-

FOLLOWS No 1/5th.

FOLLOWS

CABLE No.	CABLE DATE	NATURE OF CASUALTY
M2333	19-4-17	Adm to Gen Hosp Boulogne April 11th 1917. Gsw's R thigh & hand leg.
M13637	7-5-17 w m.	County of London " " " "
M4034	13-5-17 wm.	" " " " London
W.S.M. M4123	13-5-17.	Doing well.

L. L. 12767—M. & D. 7390.

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

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
A475	#3 Can Gen, Boulogne	11-4-17	S. wrt hand & high leg sli
B344	Horton County of London War Hosp	13-4-17	G.S.W. wrt hand, thigh, leg & fo
B227	#3 Can Gen Hospital Bulford	28-3-18	G.S.W. Multiple
B235	Invalided to Canada	6-6-18	G.S.W. Multiple

Form DMS 1401.

A. & D. CARD

No. 4 Canadian Gen. Hospital, HOSPITAL.

AT Basingstoke.

A. & D. No. M2 2.2100 Pl. of Action France

Rank Pte Reg. No. 817975 Unit 25 Bn. Can. Sick or Wounded

Name Bonnar, J Age 42 Religion C of E

Place in Hospital At

Diagnosis S.W. Arm & Hand, Rt. Knee & Thigh R. Leg

Admitted 4. 3. 18 From Horton War Hp. Epsom

Discharged To

Transferred 27.5.18. #5 CGH. Kirkdale.

Service at Home 15 mos In Field 9 mos

Results

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

P.T.O.

REMARKS.

FORM R. 149.
7106—250m—7/2/17.

Robert
Name M BONNAR James *Rank* Pte. *Reg. No.* 817975

Unit 25th. Battalion.

Next of Kin Canada

Date 1917	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
11-4	No 3 Can. Gen. Hosp.	Boulogne	SW. R. Hand Thigh Leg slt	A487/M2333/19-4		
13-4	Horton County Of London War Hosp.	do	A344			
24.10.17	Adm. to Hosp. (Sick)					
R 120	974					
5 3	Adm 4 Can Gen Hosp B'stoke		do	B 156		13415
28-5	5 Can Gen Kirkdale		GSW multiple	B 227		18820
6-6	Invalided to Canada	"	"	B 235		9723

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

Number 81374 Rank Pte

Surname Lunn

Christian Name Gilbert Little

Units 26 Bn Canty Theatre of War France

Date of Service 24-8-17 RR

Remarks (W) Mrs. Jennie H. Lewis,

Latest Address ~~Fredericton, N.B.~~
Salisbury NB 17/23

Roll No. B. Page 20942

200m.-6-21.

DESP. FEB 24 1923
REGN. NO. 356

DESP. JAN 15 1923
REGN. NO. 13967

12-2-23

FORM D.M.S. 1300.
8137—50m—28/2/17.

Surname	Christian Name or Names	Reg. No.
Bonnar.	J.R.	817975.

Rank	Unit	Co.	Troop	Batty.
Pte.	25th. Bn.	N.S. Reg		

Hospital — Date of Admission

Transferred 3. Can. G.H. B'logne. Hosp. 11-4-17.
Horton Co of Lond. War. Epsom Hosp. 13.4.17.
4. Can. Gen. Basingstoke. Hosp. 5. 3. 18.
5 CGH Kirkdale Hosp. 28. 5. 18

Diagnosis
(1) S.W. Rt. Hand. Thigh. Leg. Slt.
Later Diagnosis (if changed)
(2) G.S.W. multiple
(3)

Additional Diagnosis: if more than one state present

DISPOSITION — Date

C.L. 19-4-17. A/487.
26.4.17 B344.
7. 3. 18 B156.
31-5-18 B227
10. 6. 18 B235 (a)

REMARKS

Invalided to Canada.
6. 6. 18.

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

D.to C.per H.S.Llandovery Castle sailing 60 from L'pool. 6-6-18.

EPITOME OF HOSPITAL TREATMENT.

	Hospital	Adm.
1.		
2.		
3.		
4.		
5.		
6.		
7.		

FILE No. 67975 VOL.

SUBJECT Bonnor James R

CHARGED TO	PER	DATE	CHARGED TO	PER	DATE
Dean		1/10/38			

THIS CHARGE-OUT AND ABSENT CARD **MUST NOT** LEAVE THE REGISTRY

FILE No. 1 Dist 197 VOL.

SUBJECT London, U.K.

CHARGED TO	PER	DATE	CHARGED TO	PER	DATE
SCI		12/24/21			

THIS CHARGE-OUT AND ABSENT CARD **MUST NOT** LEAVE THE REGISTRY

O.S.S. 5.
30M-3-31 (4673)
H.Q. 1772-45-8.

N.B.M.H.

Victoria Mills, Fredericton, N.B.

AUDITOR | PAYMASTER

M. OR S.

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

REGT. No. 817975 RANK Pte. NAME (IN FULL) BONAR James Robert (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN — RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? Yes — DATE EFFECTIVE

TO WHOM PAID — RELATIONSHIP

ADDRESS See A.P.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

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

PLACE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

DATE OF ATTESTATION 17-3-1916 — TRANSFERRED TO — DATE — AUTHORITY 2595

ASSIGNED PAY $ $20.00 — DATE EFFECTIVE 4.7.1919 4/1/19

PAYABLE TO Mrs B Bonnar — RELATIONSHIP — ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS 367 York St. Fredericton N.B.

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

DISCHARGED PLACE. Fredericton DATE 9-6-19 REASON Med. Unfit. S.C. AUTHORITY 161 IF ENTITLED TO POST DISCHARGE PAY

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	C.		C.	TOTAL CREDITS $	C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	DATE	COL. NO. 2 NO.	DATE	COL. NO. 3 NO.	DATE	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.		C.	TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT Dec							Nil																										Nil			
Jan	31	1.10	34	10	30	00			64	10	39	22	101		50		5	00	10	00			50	00							65	00	90				Dec 31 '18 Pay list
Feb.	28	1.10	30	80	30	00			60	80	156	17	172	28			5	00	5	00			50	00							60	00	1	0			Ck 9397
Mar.	31	1.10	34	10	30	00			64	10	150	15	170	29			5	00	10	00			50	00							65	00	1	00			Ck 11832
Apr.	30	1.10	33	00	30	00			63	00	24/2	14/19	30/1	30/19			5	00	15	00			50	00							60	00			2	00	Ck 12393 AR 31-2 2/4/19
May	31	1.10	34	10	30	00			64	10	43/1	13/19	56/1	29/19			5	00	10	00			50	00							65	00			1	10	Ck 10966 AR 48-2 19/5/19
June 9	9	1.10	9	90	9	60	35	00	53	90	63/1	4/19					116	00					39	00							155	00	100	00			Ck 6366 AR 63-2 21/6/19
									396	00																					470	00				
					W.S.G.		S.G.																W.S.G.		S.G.								Soldiers Dep.			
183 days — Min —			+20	00	180	00	600	00															70	00	30	00					100	00	350	00	150	00	To bal. from above a/c
																							70	—	30	—					100	—	280	—	120	—	Ck 10788 Dec 18
																							70	—	30	—					100	—	210	—	90	—	Ck 10741 Dec 18
																							70	—	30	—					100	—	140	—	60	—	Ck 15521 Jan 19
																							70	—	30	—					100	—	70	—	30	—	Ck 15521 Feb 19
																							70	—	30	—					100	—					Ck 15521 Mar 19
0			120	/	180	/	600	/															420	/	180	/					600	/	NON-EFFECTIVE				

WAR SERVICE GRATUITY.

DISTRICT DEPOT No. 7

30M-11-18.—L.L. 50877-M. & D. 9553.

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

P. 559

MARRIED OR SINGLE: Married.

PLACE OF BIRTH: Fredericton N.B.

NAME AND ADDRESS OF NEXT OF KIN: Mrs. Elizabeth Bonnar.
"General Delivery" Fredericton, N.B.

RELATIONSHIP OF NEXT OF KIN: Wife

NAME AND ADDRESS OF NEXT OF KIN:

RELATIONSHIP OF NEXT OF KIN:

SEPARATION ALLOWANCE MONTHLY $ 20 xx/100 EFFECTIVE (DATE) 11/3/16.

PAYABLE TO: Mrs. Bessie Bonnar
Fredericton N.B.

RELATIONSHIP OF DEPENDANT: "Wife".

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

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

REG'L NO. 817975 RANK Pte. NAME "Bonnar" James Robert

IF IN PERMT. CORPS } WHAT UNIT: UNIT 140th Bn

TRANSFERRED TO 75th Bn DATE 1-17-16 AUTHORITY 2-10-16

PERMANENT FORCE ALLOWANCES

TRANSFERRED TO CCAC DATE 29/4/17 AUTHORITY CLR 344 26/4/17

PLACE OF ATTESTATION St. John. N.B.

TRANSFERRED TO N.S.R.D. DATE 1-11-17 AUTHORITY

DATE OF ATTESTATION 11/3/16.

TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY $ 20 xx/100 DATE EFFECTIVE 1/10/16.

PAYABLE TO Mrs. Bessie Bonnar, Fredericton, N.B. RELATIONSHIP "Wife".

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) Stopped EFFECTIVE Nov 15/18 RELATIONSHIP

DISCHARGE DATE AND PLACE Canada 30/11/18 — REASON AND AUTHORITY B'Disc 13/4/18 22 a/38 REASON Disc to Canada 1 SEP 1918

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

Checked Ledger

DATE 1916	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
Oct 1														18	18																				
Oct 1-31	31	100	31		10		3	10							34 10	436	7/11-10																			
Nov 1-30	30		30				3								33																					
Dec	31		31				3	10							34 10																					
			9	20			9	20																												
Jan	31		34	10											34 10																					
Feb	28		30	80											30 80																					
Mar	31		34	10											34 10																					
Apr	30		33												33																					
	2		2	20											2 20																					
May	30		33												33																					
	1		1	10											1 10																					
June	30		33												33																					
			302	50										18	320 50																					

Balance from Canada. 18 00

Transf to 75th Bn 1-17-16 Bn. Rec. 331 - 27-10-16.

Transf to CCAC 29/4/17 CLR 344 26/4/17 Dumps 2 Drs @ 10c

Carried forward to Large Ledger sheet

817975 Pte Bomar. James Robert

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
			30	250										18	320 50
July 31.	1	10	34	10											34 10.
Aug 31.			34	10											34 10
Sept 30			33												33

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
12 35	5 24	42 35		180		242 14	78 36				
				20.		20.	92. 46				
				20		20	106 56				
				20		20	119 56				

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	BALANCE
							119 56
Oct	P/P	34 10					20 133 66
		34 10					20
				a.p. Nov 7.			20.
Nov	"	33		Drac 1591 25/6 Epsom	4 87		
Dec	"	34 10		" " 535 7/12 Cert.	4 87		
				" " 2810 3/9 C&SH.	4 87		
				a.p. Can			20
				DMAK 2482 9/8 C&SH	4 87		141 28
1918		67 10			19 48		40
Jan		34 10		can ap Jan			20
				DMAK 3220 27/9 C&SH	4 87		
				" " 4040 1/11 Epsom	4 87		
				" " 5965 29/11 "	4 87		
				" " 6640 12/12 "	9 73		131 08
		34 10			24 34		20
Feb		30 80		can ap			20
				AK 1616 10/1 "	9 73		132 11
		30 80			9 73		20
Mch	"	34 10		can ap			20
				AK 11044 19/2 "	4 87		
				O 18234 10/2 "	.61		
				ap P 2042 20/3 " C&SH.	4 87		
				ap P 2039 20/3 " "	48 67		87 19
		34 10			59 87		20

137 11
34 10
166 21
79 0
87

Carried forward to Large Ledger Sheet

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY * ~~ENGLAND~~ OR CANADA.	SEPARATION ALLOWANCE. * ENGLAND OR CANADA.	NAME:- Bonnar. James Rob't.
EFFECTIVE DATE:- 1/Oct 1916	EFFECTIVE DATE:-	NUMBER:- 817975.
AMOUNT:- 20.00	AMOUNT:-	PARTICULARS OF RANK OR APPOINTMENT

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 Bessie Bonnar
Fredericton N.B.
Wife

Stopped Eff 1/5/18.

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Rfwake.

UNIT AND TRANSFERS 1 SEP 1918

ORIGINAL UNIT:- 140. Bn.

DATE ACCOUNT FIRST OPENED:- 1.10.16.

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			N.S.R.D.
	7/5/18	21/5/18	Can Mec "C"

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

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1/00	1/6		

P.830-25M-21-2-18.

LAST PAY CERTIFICATE.

PARTICULARS.

1. L.P.C. Issued, date 17/4/18 — 2. Authority Bstoke 12/4/18. 22a.35
3. Discharged to Canada. ~~4/5/18.~~ — 4. Pay Book Verified Yes
5. Balance shown on L.P.A. $ 108.95 — 6. Balc. shown on Ledger Sheet $ 100.19
7. Full particulars of entries making difference between 5 and 6 if any:-

No.	Date	Unit and Particulars of Entry	Amount Debit	Amount Credit
1		Sick Furlough. 20/3/18 to 1/4/18. (12 days @ 73¢)		~~8.76~~
				8.76.

8. Ass'd Pay Cancelled A3M forms rendered Stopped Eff 1/5/18.
or
9. Sep. Allce. and Assd. Pay continued to dependent in
England and transf'd to Acc'ts Br. for payment

Certified Correct.

Officer i/c Group "C"

DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
				87 19		
			20 -	100 19		
				108 95		
			20			
E & O.C. 9 73 / 9 73				99 22		
				99 22 -		
				Nil.		
2 43 / 101 65				2.43	C.N.	
				nil		

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY	* ~~ENGLAND~~ OR CANADA.	SEPARATION ALLOWANCE.	* ENGLAND OR CANADA.
EFFECTIVE DATE:-	1/Oct 1916	EFFECTIVE DATE:-	
AMOUNT:-	20.00	AMOUNT:-	

NAME, ADDRESS, RELATIONSHIP & AUTHORITY | WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.

Mrs Bessie Bonnar
Fredericton N.B.
Wife

Stopped Eff 1/5/18.

NAME:- BONNAR. James Robt.
NUMBER:- 81795.

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Rfmn.

UNIT AND TRANSFERS — 1 SEP 1918

ORIGINAL UNIT:- 14th. Bn.

DATE ACCOUNT FIRST OPENED:- 1.10.16.

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			N.S.R.D.
	1/5/18	24/5/18	Can. Mer. "C"

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

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1 00	60		

PARTICULARS OF RENDERING NON-EFFECTIVE:- Disc to Can Eff 1/5/18.

MONTH	PARTICULARS	CR 1	CR 2	PARTICULARS	DR. 1	DR 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
1918											
March 31	Balance forward								87 19		
Apr.	P.P.	33 -		Canada.				20 -	100 19		
"	S.T.- 20-3-18 - 1-4-18. B.O. 82. 3/4.	8 76							108 95		
		44 76						20			
May				1141. 6/5 4 Gn. & L.R.C.	9 73				99 22		
					9 73						
June				#60 6/6/18	99 22				Nil.		
				L.R. No. 5-3 3/6 1 Gn. (L.R.)	2 43				2 43		
					101 65						
July	#60 6/6/18 1374		2 43						nil		
			2 43								

NUMBER RANK NAME

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION

List of Discharge Documents.

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

§Only if discharged "Medically unfit."

‡Only if man has not been overseas.

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

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

(a) Proceedings on Discharge.

(b) Attestation.

(c) Medical History Sheet.

Documents not accompanying this form should be crossed out.

I hereby certify that the following documents are unobtainable.

Officer Commanding.

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

WAR SERVICE BADGE

Class "B" No. 56253 issued

This space to be for numbers.

Proceedings on Discharge.

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

No.	817975
Rank	Private
Surname	BONNAR
Christian name	James Robert

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

Corps (Squadron, Battery or Company)	District Depot No.7,
Date of discharge	June 9th, 1919.
Place of discharge	Fredericton, N.B.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age	43 years 9 months.
Height	5 feet 6 inches.
Complexion	Dark -Ruddy
Eyes	Brown
Hair	Black
Trade	Millman-Edgerman
Intended place of residence (To be given as fully as practicable.)	Victoria Mills, York County, N.B.

Descriptive marks

Numerous scars all over body from shrapnel wounds.

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

Authority for discharge R. O. 1420 (a)

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

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

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

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

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

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

Medical Documents Forwarded to S. G. H. of B. P. C. ON 20-6-19

(OVER)

5. He is in possession of the following number of G. C. Badges

No reference to G. C. Badges is to be made on either the discharge or character certificate.

6. Medals and Decorations.....

To be copied by the Commanding Officer on to the parchment Discharge Certificate.

7. His account is correctly balanced, and signed by the Officer Commanding his Company, *(Squadron or Battery,* and I have impartially enquired into all matters brought before me in accordance with Regulations.

(Place).....

(Date).....

.....

Commanding.....

8. **Certificate to be signed by the Soldier on Discharge**

I hereby acknowledge that I received all my Pay, Allowances and Clothing, and all just demands, up to the present date, subject to the reservations of the claims noted on the third page, and that I have received my permanent discharge certificate.

(Place) Fredericton, N.B. James R Bonnar *(Signature of Soldier.)*

(Date) June 9th, 1919. E. M. Beatty *(Signature of Witness.)*

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

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

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

.....*(Signature of Soldier.)*

10. **Statement of Service.**

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

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

11. **Confirmation of Discharge.**

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

(Place) St. John, N.B.

(Date) June 9th, 1919.

(Signature) MAJOR

O.C. DISTRICT DEPOT No.7

Reservations referred to at Para. 8.

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

none

James R Bonnar

OPINION OF THE MEDICAL BOARD

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

Yes.

19. Is the invalid fit for

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

20. It is certified that the invalid
(*a*) Does require treatment. (Give the nature of the condition and of the treatment required and its probable duration.)

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

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

Yes. That #817975 Pte. James Robert Bonnar be discharged medically unfit for Military Service. Disabilities C.O.A.S., France.

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

H. Allen Capt. D.D.M.S. *President.*

PLACE Fredericton, N. B.,

J. R. Morrison Capt. A.M.C. } Members

DATE 4/6/1919.

TO BE COMPLETED WHEN TREATMENT IS REFUSED

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

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

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

President.

PLACE.....

Members

DATE.....

APPROVED BY

Assistant Director of Medical Services.

DATE JUN 5 1919

MEDICAL SERVICES M.D. No. 1

APPROVED BY

Director-General of Medical Services.

DATE.....

THIS FORM WILL BE USED FOR ALL RANKS

MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

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

STATION Fredericton, N. B., DATE June 4/1919.

1. 1 (*a*) Unit D. D. # 7 (*b*) Regimental No. 817975 (*c*) Rank Pte.

(*d*) Surname BONNAR (*e*) Christian name JAMES ROBERT.

(*f*) Home address Victoria Mills, Fredericton, York Co., N. B.

(*g*) Next of Kin Mrs. J. R. Bonnar. (*h*) Relationship Wife.

(*i*) Address of Next of Kin Same

2. Age last birthday 43 Date of birth Aug. 1875.

3. Enlistment, or Appointment (if an Officer) (*a*) Place Fredericton, N. B. (*b*) Date March 11/1916.

4. Personal description:

(*a*) Height 5'-6" (*b*) Weight 170 (stripped) (*c*) Complexion Dark-ruddy.

(*d*) Colour of hair Black (*e*) Colour of eyes Brown (*f*) Identification marks, Scars, etc. 1 old scar to left of left patella. 2 old scars above right wrist joint flexor surface. These are all pre-enlistment scars.

5. Former trade or occupation Millman, Edgerman.

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).	Years	Days
	3	85.

	Periods	
	From	To
Canada 140th Bn., C. E. F.	11/3/1916	Oct. 1916.
England 140th Bn.	Oct. 1916.	Nov. 1916.
France or other theatres of War 25th Bn.	Nov. 1916.	April 15/1917.
England-Hospital.	April 1917.	June 1918.
Canada, Hospital.	June 1918.	June 4/1919.

7. Original disease, or injury

G.S.W. both legs and G. W. right hand and arm.

(*a*) Date of origin April 9/1917. (*b*) Place of origin Vimy.

(*c*) Cause (1) Shrapnel struck him about right thigh, right knee and lt. th
(2) ten minutes later he got hit in right upper arm and right index finger by bullet.

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

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

(1) Marked impairment of function right hand from weakness of arm and fracture and limitation of movement right index. And from limited movement of other fingers. (2) Weakness and pain right hip and knee, necessitating relative rest to that part of body. Marked loss of function left ankle following nerve injury. There is difficulty in using right hand to tie or button collar or neck up, or grip, grasp, or lift. There is also difficulty in walking, obvious from weakness right and loss function left leg.

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

Objective:- Right upper extremity:- 2 healed scars, each dime-sized, one situated 2½" above outer condyle right humerus, where bullet entered. Other 3½" above and to back of right humerus, where bullet emerged. Right shoulder elbow, and wrist joints normal. Supination and pronation normal. Right thumb now normal. Right index finger shows healed depressed, adherent scarsof a through and through bullet wound in its proximal phalanx. There is marked bony deformity in proximal phalanx right index. There is no movement possible in interphalangeal joints. The 2nd phalanx is fixed at 180°-completely extended. Distal phalanx fixed in position of 22½° of flexion. Flexion at Metacarpo-phalangeal joint is 45° only. Abductionand adduction of right index practically normal. This finger is stiff, awkward and of very little use to him. Sensation impaired below site of B.W. in prox. phalanx. Right middle finger:-shows healed scar to ulnar side of distal phalanx with bony irregularity. Extension complete in this finger, but flexion limited in all joints interfering with closing of fist and grasping. Right ring and little finger are also normal in extension but flexion limited in all joints. On attempting to close fist index sticks out at angle of 45° flexion from Metacarpal, and he cannot touch them with any of the other fingers on account of limited flexion. Has marked difficulty in grasping objects. Cannot use index to pick up objects. Has to use thumb and middle fingers. Difficulty marked in picking up ink bottle. Grip about ½ normal. Right lower extremity:-Healed, non adherent, dime sized scar in flesh of right thigh 3½" below Pouparts ligament at site of bullet entry. Similar scar in right buttock, where bullet emerged.Just at internal and upper border ~~is healed scar~~ rt. patella, is healed scar, dime sized, and 3" behind and internal to it is another similar one. Flesh wounds only where bullet went through and through. No limitation in hip or knee movements.

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

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

Fine tremor of muscles of hands and body generally under slight excitement. Tremor of speech.

Special Senses No. Respiratory System No. Integumentary System No.

Disturbances of Mentality No. Digestive System No. Muscular System No.

Osseous and Joint Systems No. Any other general condition No.

Left lower extremity:- Shows healed, non-adherent dime-sized scar on inner side left thigh about 4" above level of patella. Similar healed scar near midline of back of left thigh,at slightly higher level, where bullet emerged. Long linear 12" surgical scar extends in mid-line of left thigh from below gluteal fold to Popliteal space. None of these are adherent. Left hip;and knee joints unrestricted in range of movements. Movements of left ankle now normal, except that dorsi-flexion, which is limited. Can voluntarily dorsi-flex to rt. angle, but not further. Foot has tendency to drop. Toe movements of flexion and extension limited. Sensation diminished over outer side left calf from just below head of tibia and fibula, and over dorsum of foot. This has improved from complete loss, so that now he can feel light touch and pin-pricks. Can localize pressure, but not quite normal. Feels numb and tingles. Elect.;-No response to Faradism or Galvanism in tibialis anticus or extensors. Peronei respond to Faradism, but nor so well as in rt. normal, leg. Flexors respond well to Faradism. There is no Motor nerve lesion in right upper. Good Faradic response in right arm, forearm and finger muscles, except in right index locally. Subjective symptoms:- Complains of (1) Loss of strength in right arm and hand, difficulty in picking-up, grasping and lifting objects. Cant close fist. (2) Pain in right hip r gion preventing his sleeping while lying on right side. Tendency for right knee to give way under him. Rt. leg tires easily. Cannot stand or walk about more than 1½ hours. (3) Loss of strength and movement in left ankle. Has difficulty in walking on account of limitation of bending of instep, and weskness in calf and foot. (4) Impaired sensation right index finger and outer side left leg. (5) Sleeps poorly. Is very nervous, and body trembles under slightest excitement.

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

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

~~(1) Marked impairment of function right hand from weakne~~ Scar near left patella and 2 on flexor surface right forearm above wrist joint, as noted under identification section 4f., are result of old skating accidents--pre-enlistment. Non-disabling.

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

All described in previous sections.

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

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

N. A.

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

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

13. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? (1). (2). (3) all reduced to minimum now. Likely permanent, disabilities to present extent.

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

Hospital in France, England and Canada. Dressings, removal F. B., X/Rays massage, electricity. Suture 28/1/18--left exterior Plpliteal.

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

No.

16. Can the former trade or occupation be resumed? No. His occupation as Edgerman in mill takes 5 years to learn and requires full use both legs and hands to handle deals and boards.
(If not, briefly state why)

17. Recommendations

That #817975 Pte. James Robert Bonnar be dischargedmedically unfit for Military Service. Disabilities all C.O.A.S., France.

E. C. Lawrence Capt
Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

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

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

I complain in addition of

James R Bonnar Rank.
Signature of invalid examined.