REGIMENTAL DOCUMENTS

NAME BOWEN WILLIAM HENRY REGT. NO. 512474 UNIT 3rd Div #2 O.D. H. Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY DEATH Category
3	ATTESTATION PAPER (M.F.W. 23, 133, or 51)	Lon 29-3-19				
4	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					
	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)					
1	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
2	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)				326[illegible] 32668	DISCHARGE Category
2	DENTAL HISTORY SHEET (M.F.B. 465)					
2	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					Med Benefit
	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
1	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	H M C 132					
1	A.F.B. 151					
1	A.F.B. 227					
1	A.F.A. 2					
1	R49					
1	A.F.B. 268					

Deceased 12-8-18

12 8
34 8
29-8

2

W. 2589
100M-11-18
1772-39-1377

Box
951

ORIGINAL

3

ATTESTATION PAPER.

No. 512474

3rd Div. Supply Col.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?	Bowen Jr.
1a. What are your Christian names?	William Henry
1b. What is your present address?	54 Montrose Ave. Toronto, Canada.
2. In what Town, Township or Parish, and in what Country were you born?	Toronto, Ont., Canada.
3. What is the name of your next-of kin?	Margaret Bowen
4. What is the address of your next-of-kin?	54 Montrose Ave. Toronto, Canada.
4a. What is the relationship of your next-of-kin?	Mother
5. What is the date of your birth?	April 30th 1897
6. What is your Trade or Calling?	Cutter
7. Are you married?	No
8. Are you willing to be vaccinated or re-vaccinated and inoculated?	Yes
9. Do you now belong to the Active Militia?	No
10. Have you ever served in any Military Force? 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, William Henry Bowen Jr., 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.

Wm H. Bowen Jr. (Signature of Recruit)

Date March 17th 191 6. W. M. Edmonstone (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, William Henry Bowen Jr., 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 H. Bowen Jr. (Signature of Recruit)

Date March 17th 191 6. W. M. Edmonstone (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 Toronto this 17th day of March 191 6.

(Signature of Justice)

M. F. W. 23.
600M.—2-16.
H. Q. 1772-39-941.

DIVISIONAL SUPPLY COLUMN
C. E. F.

Description of William Henry Bowen Jr. on Enlistment.

Apparent Age 18 years 10 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft 5½ ins.

Chest measurement: Girth when fully expanded 37 ins.; Range of expansion 3 ins.

Complexion Fair

Eyes Blue

Hair Fair

Religious denominations:
- Church of England Precpt.
- 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).

Mole on chest.
Scar R knee.
" R ForeFinger
" L side face.

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

Place Toronto, Canada.

W. MacLaurin Lieut.
Toronto Recruiting Depot 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 Henry Bowen Jr.
having been finally approved and inspected by me this day, and his Name, Age, Date of Attestation, and every prescribed particular having been recorded, I certify that I am satisfied with the correctness of this Attestation.

W. Mayall Capt. (Signature of Officer)

MAR 18 1916

Date 191 .

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 512474 (Rank) Pte.

Name (in full) BOWEN, William Henry enlisted in

the 3rd. Div. Supply Col.

CANADIAN EXPEDITIONARY FORCE at Toronto, Ont. on the 17th.

day of March 19 16

HE served in England and France

and is now discharged from the service by reason of

"Medically Unfit"

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

Age 21

Height 5' 7"

Complexion Fair

Eyes Blue

Hair Fair

Marks or Scars Vacc. scars left arm

Pte. W. H. Bowen.
Signature of Soldier

Issuing Officer

Rank

O. C. Discharge Sections,
No. 2 District Depot

Appointment

Date of Discharge February 25th, 1919

Signed at Toronto, Ont. this 25th. day of Feb. 19 19

in Military District No. 2 J.S.

File Reference No.

No. 2
FEB 25 1919
DISTRICT DEPOT

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 Budge.

Class A.

No. 89878 issued Feb. 25. 1919

War Service Budge.

Class B.

No. C.545-23 issued Feb 25. 1919.

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 called for particulars called for the back of this certificate will be completed.

A

DEPARTMENT OF MILITIA AND DEFENCE.

DISCHARGED

WAR SERVICE GRATUITY.

OTTAWA, CANADA.

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

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

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

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

1. Christian Names ...Wm. Henry..... 2. Surname .....Rowen.....
3. Rank ....Private.... 4. Original Unit ...3rd. Div. Supply Col.... 5. Reg. No. ....512474...
6. Address, in full, to which future payments of gratuity are to be forwarded .....54 Montrose Ave., Toronto.....
7. Date of enlistment in the C.E.F. .....17-3-16.....
8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge .....Not applicable.....
9. Relationship of such dependent .....Not applicable.....
10. Address, in full, of such dependent .....Not applicable.....
11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier ? ...Not applicable
12. Were you at any time on the strength for pay and allowances of a unit of the C.E.F. which was out of Canada or the United States when such pay and allowances were issuable? If so, give particulars of one such unit and dates of service overseas with such unit:—
Yes. left Canada with 3rd Div. Supply Col. 24-4-16
Returned to Canada 26-1-19
13. Were you on the strength for pay and allowances of the Clearing Services Command, having been at any time on duty outside of Canada or the United States ? .....No.....
14. Were you on active service only in Canada or the United States ? If so, give particulars of unit and dates of such service .....Not applicable.....
15. Give total length of time which you served on active service, whether in Canada or Overseas, setting out particulars of units on whose strength you served 2.Yrs..11.Mos..8.Dys.....
.3rd.Div...Supply..Col....11th..C.R.T..Bn.....
16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department .....No.....
17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.? ....No.....

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

18. Have you had more than one enlistment? If so, give particulars of discharges and re-enlistments, and under what regimental numbers and units ..... No .....

19. Have you already received any payment of Post Discharge Pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid ..... No .....

20. Have you been issued with a War Service Badge? If so, what class ? ..... No .....

21. Have you, during the present war, served in the Imperial Forces ? ..... No .....

22. Are you entitled to receive, or have you received any gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled ..No.....

23. (a) Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England? ..... No .....
(b) If so, was such reversion in consequence of misconduct or inefficiency? .....

24. Are you now serving in the C.E.F. ..... No ..... If not, give:—(a) Date of discharge ..February 25th, 1919..... (b) Reason for discharge .....
......"Medically Unfit".....

25. Are you at present a member of and in receipt of pay and allowances from any Canadian naval or land forces? If so, give unit..... No .....

26. Did you at any time serve at the front in an actual theatre of war? If so, give particulars of one unit which you served at the front, and dates of such service with that unit..... Yes .....
.....C.A.S.C. from 14-12-17 till 24-8-18 (France .....

27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment? ...No
(b) If so, are you in receipt of full pay and allowances from that Department? ..... No .....

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

Signature of Applicant: W. H. Bowen.

Place of Residence: 54 Montrose Ave., Toronto, Ont.

Declared before me at: Park School Barracks, Toronto

This 20th day of February 19 19....

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

POST DISCHARGE PAY.

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

Certified Correct.

District Paymaster.

R—122

LTR.

Rank Name BOWEN, Jr William Henry Reg'l No. 512474

Dft 3/div Supply Column If in perm. Corps, }
Unit Tor C.A.S.C. T.D. What Unit? } Married or Single Single.

Place and Date of Enlistment Toronto, 17th, March, 1916. Place of Birth Toronto, Ontario. Canada,

Name and Address, Next-of-Kin Margaret Bowen.

54 Montrose, Ave, Toronto, Ontario, Canada. Relationship Mother.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

NOT B.d No 3761
File R.L.
Category M-II CANADA

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.
	C. C	Arrived in England.	S.S. Metagama	5/5/16	
8.5.16	C.A.S.C. T.D.	T.B.S. C.A.S.C. T.D.	Shorncliffe	5/5/16	P II 129.
7.12.16		to Scottish Command & London		30.11.16	— " — 3 Apr
26.10.16	Pay O	Attd Hq B.E.F. to Pay O	London	23/10/16	" 264
30-11-16	D of S & T.	T.S.D. for Pay & allies of establishment.	London	30-11-16	P II D 324.
28-12-16	C.A.S.C.	Repatriation Hq B.E.F. to D of S & T London	"	23.10.16	He Dets attd P II 14
14.12.16	Scottish	Reported from Hqs. O.B.S.		23.10.16	P II D 348
9.1.17	O.C. M.T.	on conv M.T. sections Uxbridge	London	8.1.17	P II O 9
16-1-17	C.C. Hosp Uxbridge	Ofr conv to this Unit on reporting from M.T. Canadian London area	Uxbridge	8.1.17	P II O 16
9.2.17	D of S & T.	S.O.L. to C.A.S.C. London Area	London	9.2.17	P II O 9

512474 Bowen Jr. William Henry

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.
9-2-17.	C.A.S.C. Hon. Ar.	T.O.S. from D. of St. T.	London.	9-2-17.	P III. Do. 1.
18.8.17	"	Ceases "on com" C.C.H. Uxbridge	"	17.8.17	" " 167
"	"	D.O.S. to CASCRD.	"	"	" " 162. (CASCRD P III 102d/24.8.17)
30-8-17	CASCRD	SOS to Duty Depot	Pte	Selliff	30.8.17 P20.1058 P20109 DD 31.8.17
12-10-17	CASC	Adm Moore Bks Hosp	Pte	— —	9.10.17 R L C 35. Tonsilitis A.F.B 103 Ad-19-12-17
22.11.17	— —	Discb from Hosp	Pte.	—	19.11.17 — 69 —
14-12-17	Base Dep	SOS to Overseas	Pte	—	14-12-17 — 91
20.12.17	Pool	TOS from Eng	Pte	Field	15.12.17 — 95
10.1.18	"	Att. as in W.E. To. 11th C.R.T.	"	"	24.12.17 " " 3. & P II O. 1. 11 C R T 9.1.18
18.5.18	CASC Pool	Awarded G. Con Badge	Pte	— —	17.3.18 P II O. 64 & P II O. 47. 11 C R T 18.5.18
6-7-18	11 C R T	Ceases to be Att on Adm to Hospital	Pte	Field	27.6.18 P II O. 72 & P II O. 98 CASC Pool 8.7.18
31.8.18	CASCRD.	TOS from CASC Pool on adm to hosp in England.	~	Selliff	24.8.18 — 225.
31.8.18	CASC Pool.	Invalided sick & posted to CASCRD.	~	Field	24.8.18 — 140.
17.1.19	CASC.	Invalided to Canada Ex. S.S. Grampian Liverpool			13.1.19 C L B 408.
21-1-19	CASCRD	DOS to C E F Canada	Pte	Witley	13-1-19 D.O. 18.

Army Form B. 103 Temp. Rec Sheet Regimental Number 512473

Casualty Form Active Service.

Regiment or Corps C.A.S.C.

Rank Driv. Surname Bowen Christian Name W.H.

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

Enlisted (*a*) ..... Terms of Service (*a*) ..... Service reckons from (*a*) .....

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

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

or Corps Trade and Rate .....

Occupation ....Signature of Officer.

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A.36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents
Date	From whom received				
		Embarked ...			
		Disembarked...			
9-1-18.	11th G.R.I.	Att'd from C.A.S. Base in W.E.	Field	24-12-17	F.F.O.1
18-5-18	do	Awarded Good Conduct Badge	"	17.3.18	—47
6-7-18	11th G.R.I.	Ceases to be Att'd on admission to hosp	Field	27-6-18	F.F.O.72

Int 15/7/18 Ame

(*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.

(6228) W.13863/M1477 2,400,000 1/17 McA & W Ltd Forms B./103/4 (E. 856)

[P.T.O.

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A.36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents
Date	From whom received				

4498

Army Form B. 103.

Casualty Form—Active Service.

Regimental Number 51247

Regiment or Corps Divisional Supply Column C.E.F.

Rank Private Surname Bowen. Jr. Christian Name William Henry

Religion Presbyterian Age on Enlistment 18 years 10 months.

Enlisted (a) Mar. 17/16 Terms of Service (a) D. of. W. Service reckons from (a) Mar. 17/16.

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

Extended { _____ } Re-engaged { _____ } Qualification (b) Butler

or Corps Trade and Rate _____

_____ Signature of Officer i/c Records.

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 ...	Canada. Apr. 22/16		
		Disembarked ...	England. May 5/16		
5/5/16.	Transferred to	6. A. S. C. T. D. (Attd).	C.F.F. Order # 129	8/5/16.	
7/12/16	D.C.—C.A.S.C.—T.D.	S.O.E to D.of S.T		30/11/16	Part II order 342
					Capt.
					Adjutant. C.A.S.C., T.D.
Dof S&T	105 from	Offrs to Shorncliffe	LONDON	Part 2 Orders No Dat	
9-7-17	105 to 67 Ad London Dists		Part 2 #9	10/6/17	
Dof S&T					to Mar Dept
9-7-17	105 from	Dof S&T London Dists	Part 2 #10	10/7/17	
CASC London Dists					

(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.

(938). Wt 15012/5156. 1,000,000. 1/16. P. P. Ltd. Forms/B.103/3.

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				
London					
15.5.17	C.A.S.C.	"On Command" to			
	London Area	Can Con Hosp Uxbridge	London	8-1-17	Part II Orders # 8-1-17
					Lieut, For Major, O.C., C.A.S.C., London Area.
16.1.14	o.c. case. for.	On Command at Cdn Hospl	Uxbridge	8.1.14	Part II Orders # 16-1614. ✓
11.8.14.	Uxbridge	Granted 6 Days leave with			
		Rail transportation —	do	10/Aug	Part II do # 223
18.8.14	do	Reported to be att on returning			
		to unit	London	19/8/14	P II do # 230 ✓
					Adjutant for O.C. Canadian Con. Hospital, Billingdon House, Uxbridge
23-8-17	C.A.S.C.	Reported "Off Command"			
"	London	from C.C. Hosp Uxbridge	London	18-8-17	Part II orders # 162 ✓
23-8-17	C.A.S.C.	SOS to C.A.S.C.R.D.			✓
	London	Shorncliffe	London	18-8-17	Part II Orders # 162
					For Major, O.C., C.A.S.C., London Area.
24.8.17.	O.C. C.A.S.C.R.D.	Taken on strength of C.A.S.C.R.D.	Shornecliffe	18.8.17	Part II. 402 ✓
		from C.A.S.C. London Area			

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 6 A. S. C. Res. Depot.

Regimental No. 512474 Rank Pte Name Bowen W. H. William Henry

Enlisted (a) 17 3 16 Terms of Service (a) D of W. C. E. F. 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) Cutter

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.
AUG 30 1917	O.C., C.A.S.C.R.D.	Tsfrd. to Duty Depot.	Shornclife	AUG 30 1917	PART II. ORDER No. 108. A. Allen Lieut. for O.C., C.A.S.C.R.D.
31 AUG 1917	O.C., C.A.S.C.D.D.	Taken on strength of C.A.S.C.D.D. from C.A.S.C.R.D.	Shorncliffe	30 AUG 1917	PART II. ORDER No. 109
DEC 14 1917	O.C., C.A.S.C.D.D.	On draft overseas to C.A.S.C.	Shorncliffe	DEC 14 1917	PART II. ORDER No. 91 J. Bowen Lt for O.C., C.A.S.C. B.D.
15-12-17	A.A.G.	Having arrived from England is T.O.S. of C.A.S.C. Pool as	reinft.	15-12-17	NR 422 Pt. 11 D095 d/20-12-
17-12-17	C.G.B.D.	To	1st B.M.T.D.	17-12-17	NR 828
20-12-17	1st BMTD	Arrived	"	18-12-17	NR 199
23-12-17	"	To Cdn. Rly. Jacobstones Audruicq		21-12-17	NR 206
30-12-17	OC 11th Bn CRT.	Attached to 11th Bn C.R.T. Jasen 20.6.	Field	24.12.17	B213 Pte 03 d/10.1.18

CERTIFIED CORRECT. 4 DEC 1917 CAN. RECORD OFFICE 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				
11-5-18	11.C.R.T	Awarded One G.C.B adge.		17-3-18	B213 Pte 6H 18/5/1918
		Ceases to be attch to 11 C.R.T on adm to Hosp.		27-6-18	Pte 98 d/ 8/7/18
27-6-18	76. Genl	Trivisible Heart.	adm	27-6-18	Fg231
16-7-18	Do	Do	To 6 Con Dep	16-7-18	G2027
16-7-18	6 Con Depl	Do	adm	16-7-18	G2217.
20-8-18	Do	Trans to 7. C. Genl Hosp.		19.8.18	K.H. 17-15
19-8 18	7 C. Genl	R.M.O.	To 6 Con Dep	19.8.18	H.H 17.
24/8/18	7 Cdn Genl Hosp	Invalided Sick per A.T. "Princesse Elizabeth" & posted to casc Corps Depot Shorncliffe.		24/8/18	A.S.W 3083/6317. Pte 1140 d/ 30/8/18
Hm 31.8.18	casco	T.O.S. from casc Pool (Hosp. Pat.)	Sciffe	24.8.18	P 225

G. Ulcar
Lieut for Lt.-Col., A. A. G.
Canadian Section, G. H. Q. 3rd Echelon, B. E. F.

Received
LIEUT:
FOR LT: COL: I/C RECORDS, C.O.M.F.

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 ....

Regimental No. 512474 Rank .... Name Bowen W. H.
C. E. F.

Enlisted (*a*) .... Terms of Service (*a*) .... Service reckons from (*a*) ....

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*) ....

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				
1919	O. S.	T. O. S. No. 2 DISTRICT DEPOT, TORONTO		1919 PART II D. O. 30	

Dis. #2 D.D. Feb. 25th, 1919 Pt.11 #53.

O. C. Discharge Section,
No. 2 District Depot

Lieut.
For O. C. No. 2 District Depot

(*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				

Forms.
I. 1237
10

THE KING'S CANADIAN RED CROSS SPECIAL HOSPITAL,
BUSHY PARK, HAMPTON HILL.

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	3-124774	PTE	BOWEN.	William Henry.
Year	Unit.		Age.	Service.
1918	1st C.R.T.	C.A.S.C. (M.T.)	21.	2 6/12 yrs.

Station and Date.
Bushy Park.
4/10/18

Disease D.A.H.
Permanent Address; 54 Montrose Ave., Toronto.
Disability - Precordial pain & dizziness on exertion. dyspnoea on exertion.
Previous Occupation: Cutter.
Enlisted on 17/3/16 at Toronto.
Foreign Service 1 C.R.T. — Duration 8 mos.

Disability
Concise
History

Date of Origin Sept 1917 Place of Origin England.
(Received vaccine for staphylococcic)
(School, Games, Work, Training, Past Illness, Service, Onset).

States that he never went in for games but attended the Gymnasium & enjoyed it. He went to work in factory age 16 - but was employed as chauffeur a good deal of the time & was well.

Past Illnesses - measles & scarlet fever when a child - no particulars.
Typhoid fever age 10 - in bed 6 weeks.
Chorea (apparently) age - age 9-15 - out of school about 1/2 his Time.
Tonsillitis once only Oct 1917.

Enlisted March 1916 - age 18, - To England. - May 1916. - To France Dec 1917
During 1 9/12 yrs. training he was chauffeur and felt well. However in Sept 1917 he got some sores on hands & says he was treated a staphylococci vaccine. He says that while taking this treatment he developed present symptoms, but these symptoms got better. Also when cranking his car or other hard work he noticed them. 8/10/17 to 19/11/17 were spent in No XI C. G. Hosp "Tonsillitis". After this he was kept for a while on duty tachycardia (N. H. S.)

To France - 11th C.R.T 14/12/17 - acted as chauffeur. He got along pretty well but one day - about 10/8/18 his car got stuck & he had to walk 10 miles to keep. On the way he developed severe precordial pain & dyspnoea so that he had to stop. & was given a ride in ambulance. For a week or so he lay around Camp & light duty & then he was sent to hosp for 3 weeks - and for 3 weeks at Convalescent Camp, Hornchurch to Base duty. He got both his legs & arms & was sent to hosp. 19/8/18 (F. M. C.) & was evacuated D.A.H. to Hosp. in England: 24/8/18 to 26/9/18 Saffron Walden Red + Hospital "Plaistow" (M. H. S.) 26/9/18 to 30/9/18 at Epsom & sent to Bushy Park.

Tobacco - 10 Cigarettes a day Alcohol. occasional drink.

	(a)	(b)
Causation		
Present Symptoms.	Precordial Pain Dizziness Shortness of breath	on exertion.

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

(J 3521.) Wt. W 5606—2621. 2,000,000. 7/15. D & S.

P.T.O.

Station and Date.

Present State:

Physique Hgt 5'7" wgt 140 lbs. stripped

Teeth good. Tonsils negative.

Appearance Hands negative.

Thyroids

Pulse before 106. ; after exercise 126 ; 1¼ mins later 100.
Blood pressure 88- 150.
HEART: apex beat in 5th I.C. space.

C.A.D. Left limit in 5th I.C. space 8 cm from mid sternum

Sounds: neg

Abdomen; neg

Lungs: neg.

Urine; 1022. acid. No sugar or albumen.

Nervous System. Patients nervous. Pupils + patellar reflexes normal

a Bradymon Capsicum.

19.11.18. Suspected Suppuration in basis of Left lung.
Objective Findings: Sputum examined appearance of tenacious character. Last 2 or 3 days. Heart normal as to size. Rate from 100 to 120. Blood pressure 88-150. Pulse has been considered unsatisfactory. Rate from 120 to 132. Oldest appearance of dyspnoea on exertion; quite short. Quite often has been noticed during 6 weeks or so. Has been subject to frontal headache for 2 or 3 days. Has been considered unsatisfactory. Pulse from 30 minutes after exercise 126. Oldest appearance of dyspnoea on exertion; quite short. Quite often has been noticed during 6 weeks or so. Has been subject to frontal headache for 2 or 3 days. Heart normal as to size. Rate from 100 to 120. Blood pressure 88-150. Pulse has been considered unsatisfactory. Rate from 120 to 132

FYLE D.S.M.S

CASE HISTORY SHEET.

SPADINA MILITARY Hospital. TORONTO Station.

No. 512474 (#2 D.D.) Rank Pte. Name BOWEN, Wm. Henry Age 21

Unit C.A.S.C. Completed years of service Where and how long

Date of admission 12-2-19 Date of discharge

Diagnosis D.A.H. Place of origin

CONDITION ON ADMISSION AND PROGRESS OF CASE Adm. from Clearing Depot 12-2-19

HISTORY:-

Measles and scarlet fever in childhood.
Chorea from 9 - 15 years.
Tonsilitis in October, 1917.
Trench fever August, 1918.

PRESENT ILLNESS:-

M.H.S. notes tachycardia following tonsilitis in October, 1917 and since this date patient has felt present symptoms which grew much worse after trench fever in August, 1918 and have persistad since.

COMPLAINS:-

Feels well when lying quiet, but on exertion feels weak, has sharp praecordial pains, dizzy spells, palpitation and dyspnoea.

EXAMINATION:-

General condition good but skin and mucosæ are pale.
Sweats readily under examination.
Tonsils and teeth negative.
Apex beat is slightly diffuse and 8 cm. to the left of the mid sternal line
Left border of the heart 10 cm., right border normal.
Hyperalgesia over precordium.
Pulse at rest recumbent 100, on standing erect 100, after 100 hops 140, after 2 minutes rest 104.
Exertion test caused marked distress and breathlessness.
Blood pressure 120-72 at rest.
Murmurs and accentuations absent.
Pulse rate during sleep - 76
Temperature - not elevated.
Wassermann - negative.
Urine - Negative for sugar and albumen.
Breath can be held for 10 seconds only.

FAMILY HISTORY
(Tuberculosis, mental or nervous diseases)

DIAGNOSIS:- D.A.H.

RECOMMENDATION:- Boarded for discharge.

FEB 14 1919

CONDITION ON DISCHARGE,
(and disposal made of case.)

Date

Capt. R. K. George, M. O.
Medical Officer i/c case.

M. F. B. 313a.
100M.—6-18.
1772—39-439.

B 41841.

4798 111

ORIGINAL

MEDICAL HISTORY SHEET.

ORIGINAL

G

Surname Bowen Christian Name William Henry

Examined on 17th day of March 191 6 at Toronto, Canada.

Birthplace City or Town Toronto, Ont., County Canada.

Apparent age 18 Years 10 Months

Trade or occupation Cutter

Height 5 Feet 5¾ Inches.

Weight 132 Lbs.

Chest measurement Minimum 34 inches. Maximum expansion 37 inches.

Physical development Good

Small-Pox Marks None

Vaccination Marks Arm Right. Left. 1 Number 1

When Vaccinated last Childhood

(a) Marks indicating congenital peculiarities or previous disease None

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

Approved by W MacLaren Lieut Rank M.O.

Toronto Recruiting Depot

Date.	Fit or Unfit.	Examined for Re-engagement.
C.1.17	A-II	[illegible] M.O.
		26 AUG 1918 M.O.
		26 AUG M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date.	Result.	Vaccinations.
27/3/16		G. Porter Capt M.O.
28/3/16		J. Fitzsimmons Capt M.O.
		M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.
28/3/16		G. Porter Capt M.O.
3/4/16		M.O.
7/4/16		M.O.
29-5-17	to 3	[illegible] M.O.

Enlisted on 17th day of March 191 6 at Toronto, Canada.

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	3rd Div Supply Col.			
Transferred to	C A S C,	5/24974		

CANADA

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
Bushy Park.	21-11-18.	D.A.H.	2 to 6 Months Leave Toronto Disch Fit for Service Capt for Pres. Bd
Spadina Military Hospital" Toronto	FEB 17 1919	D. A. H	

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.

DIVISIONAL SUPPLY COLUMN C. E. F.

J.M.O.

Surname Bowen Jr Christian Name William Henry

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.
No 11 Can General Hosp		8	10	17	19 NOV 19			Dental Sis.	42	Pt. had a fairly acute attack. Following this was kept under observation for tachycardia. Heart is a neurasthenic element present. Discharged this date to duty. Cat. Fuday. Cabefty Anaes on admission A3	N.H. Lieut Capt
Saffron Walden Red+	24	8	18	26	9	18	P.U.O.		33.	Unintempted recovery - transferred to Goodeste Park Epsom.	Pte Hoare mo
M&B Epsom	26	9	18	30	9	18	do		5.	Transferred to Bushy Park for treatment Heart abnormal as to size and Sounds. Systolic Pulse during 6 weeks observation always past, up to 100 and 120 frequently. Slight bouts of temperature for 20 or 30 days, when both am. & pm. temp. moved the up - not above 100. These bouts interfered with graduated exercises, which had caused precordial pain, dyspnoea, and vertigo.	J.B. Hemming Capt CSMC
THE KING'S CANADIAN RED CROSS SPECIAL HOSPITAL	30	9	18				DAH.				A MacKenzie Capt Can
No. 5 CANADIAN GENERAL HOSPITAL LIVERPOOL	20 DEC 1918			13 JAN 1919			D'ia			Dizzy spells on exertion Pulse 104 at rest.	A Eastwood Capt
H. M. A. T. "ESSEQUIBO"	JAN 13 1919			JAN 25 1919			-do-		13	Condition unchanged	W Thomson Capt

Forms
I. 1237
12

Army Form I. 1237.

MEDICAL CASE SHEET.* Div. III. C. Sub.

No. in Admission and Discharge Book.	Regimental No.	Rank	Surname.	Christian Name.
	012474	Pte.	Bowen	W. H.
Year	Unit		Age	Service.
	Can. A. S. C.		21.	

Station and Date.	
	Disease Pneumonia (D. A. H)
	Complaints of dyspnoea weakness & pain over heart on exertion. Looks pale & tender par. Very rapid pulse on exertion. Transphar to Busby Park for treatment. J. O'Connor Capt. Can. A.M.C.
5 Cy. 1.16	Pulse 104 at rest.
22.12.18	Dizzy spells on exertion. Reeslaid Capt.

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

(6365) W2944/P138 2,950,000 1/18 McA & W Ltd Forms/I. 1237/13 (E 2349)

[P.T O.

Station and Date.	

Forms
T. 1237.
12

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank	Surname.	Christian Name.
T 6987.	5124/H.	P/C	Bowen	W. H.
Year 1918	Unit		Age	Servic
	Canadian A.S.C. M.T.		21.	2 4/12

Station and Date.	Disease P.U.O. (D.A.H.?)
Saffron Walden Aug. 24/18.	1) A.T.S., France — 2) Saffron Walden.
26.9.18.	Transferred to Can. Hosp. at Woodcote Park, Epsom for investigation & treatment. [illegible]

* The first and last entries will be signed, and transfers from one M[illegible]er to another, attested by their signatu[illegible]

(6365) W2944/P138 2,950,000 1/18 McA & W Ltd Forms/T. 1237/13 (E 2[illegible]

tation
d Date.

CLINICAL CHART.

(To be attached to Case Sheet.)

Army Form B. 181

Corps C.A.S.C. Military Hospital MOORE BARRACKS, CANADIAN HOSPITAL SHORNCLIFFE

No. 512474 Rank and Name Ste Bowen. Wm N. Age 20 Service 18/12

Disease Tonsilitis. Date of admission 8-10-17. Date of discharge Result

Dates of Observation	4		9		10		11	12	13	14	Oct 26		27		28	29	30	31	1	2	3	4	5									
Days of Disease																																
Temperature Fahrenheit — Time A.M.	2	6	10	2	6	10	2	6	10	2	6	10	2	6	10	2	6	10	2	6	10	2	6	10	2	6	10	2	6	10	2	6	10
Time P.M.	2	6	10	2	6	10	2	6	10	2	6	10	2	6	10	2	6	10	2	6	10	2	6	10	2	6	10	2	6	10	2	6	10
Pulse per Minute	128	92	92	92	104	104	100	96	88	80	92	80	72	60	60	60	60	58	64	72	80	76	80	72	64	84	68	80	104	112	120	104	80	112	120	92	88	120	124	92	96	120	120
Respirations per Minute	22	24	22	20	24	20	22	20	20	24	20	18	18	18	18	20	20	20	20	20	20	20	20	20	20	20	20	20	20	20	20	20	20	20	20	20	20	20	20	20	20	20	20
Motions per 24 hours																																										

(6201) Wt. W. 11421/M1165 2,000,000 12/16 McA & W Ltd. A.F.B. 181 (E. 735)

Signature N. Hall, Capt. In charge of case.

38

Army Form W. 3212. (In books of 100.)

Regtl. No., Rank and Name 51247 Pte. Bowen Corps A.S.C. B.D.

Disease D.A.H. Hospital No XI Can. Gen. Hosp.

To Officer i/c Laboratory. Ward 19.

Please carry out an examination of the accompanying specimen of blood

with special regard to Specific disease - for diagnosis Wassermann

Date Nov. 1, 1917 N. H. Lindsay Capt.

O. i/c Ward.

LABORATORY REPORT.

Wassermann NEGATIVE

Date of Examination

P. Gaylard Capt

O. i/c Laboratory.

W 12965—6740 200,000 11/15 H W V (M 875) Forms/W. 3212/1
1439—480 200,000 5/16

NEGATIVE

Moore Barracks Canadian Hospital

Shorncliffe..9/....10/.....1917

REQUISITION

DATE 9/10/17

REG. NO 512474

NAME Pte Bowen W. H

UNIT C. A. D. C.

DIAGNOSIS

EXAM. REQUIRED routine

WARD 19

Capt Little ..... Capt. C. A. M. C

Officer i/c Ward.

REPORT

COLOUR Light amber

S. G. 1024

REACTION Slightly acid

SUGAR neg

ALBUMEN neg

MICROSCOPIC

B Hutchinson ..... Lieut. C. A. M. C

Officer i/c Laboratory

(d) Invaliding to Canada.....

This will be accompanied by Nominal Rolls in duplicate shewing Regimental Number, Rank, Name, Unit Disability and Dates Boarded.

Army Form W. 3212. (In books of 100.)

(3)

Regtl. No., Rank, and Name 5/12474 Lt Bowen Corps CASC.

Disease Neurasthenia Hospital Hoxi - 9 A

To Officer i/c Laboratory. Ward 19

Please carry out an examination of the accompanying specimen of

with special regard to

Date

h Hinde
O. i/c Ward.

LABORATORY REPORT.

R. B. Court

Htgn 75 o/o.

R.B.C. 3,400,000

Date of Examination 15-11-17

ITB Hetherington
Capt.
O. i/c Laboratory.

W 12965—6740 200,000 11/15 H W V (M 875) Forms/W. 3212/1
1439—480 200,000 5/16

M.F.W. 44.
1138 (D.P.) 250M.-12-18.
1772-39-903.

CANADIAN EXPEDITIONARY FORCE.

LAST PAY CERTIFICATE

Regimental No. 512474 Rank Pte Name Bowen M.H.
(Surname first)

No. 2 District Depot.
FEB 25 1919

Unit ..... who was* DISCHARGED

On ..... 191....., to .....
*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from Jan 1 to FEB 25 1919 191...
the inclusive date of transfer or discharge.

	Dr.	Cr.
Bal. Dr. or Cr. from prev. month	4 56	
Regimental Pay 56 days at $ 1 c		56 00
Field Allowance 56 days at $ 10 c		5 60
Separation Allowance		
Clothing Allowance		35 00
~~Post Discharge Pay~~ Wag		70 00
*Other Credits Subs		12 00
Advances		
Separation Allowance and Assigned Pay Cheque No. 23684	40 00	
*Other Charges		
Balance on transfer or on discharge, cheque No. 23742	154 04	
Total	178 60	178 60

*Give particulars.

A monthly stoppage of $ 20 (†) has ..... (‡) been paid on account of

Assigned Pay for the month of Feb 1919
and Separation Allce. for month of 191.....

(to) Assignee Mrs Margaret Bowen
5 of Montrose Ave Toronto

(Address) .....

(†) Insert amount to be assigned, whether it has been paid or not.

(‡) Insert "not" if amount has not been paid for period of account.

ON TRANSFER OF AN OFFICER.

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

REMARKS:—

State (1) date of enlistment ..... married or single.....

(2) Separation Allowance, entitled or not No (3) Reason for discharge.....

(4) Authority for discharge or transfer DO 53

NOTE.—S.A. & A.P. Card and Index Card (M.F.W. 71) are to accompany Last Pay Certificate on transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay Account of the officer or soldier.

FEB 24 1919

Date .....

TORONTO, ONT.

Place .....

Malcolm J Cameron CAPT.
Paymaster.

PAYMASTER, No. 2 DISTRICT DEPOT

N.B.—(A) This form is to be used for all ranks (vide Article 122-130 and 141) Financial Instructions, C.E.F., 1916.
(B) For purposes of transfer it is to be made out in triplicate. Copies will be disposed of in accordance with instructions as laid down in Routine Order No. 1307, dated 12th Nov., 1918. Payment of the balance will not be made and the words "or on discharge cheque No." will be deleted.
(C) For purpose of discharge it is to be made out in duplicate. One copy to accompany discharge papers, and one copy for retention as a record. As payment of the balance will have been made, the words "on transfer or" will be deleted.
(D) If a man on discharge is entitled to Post Discharge Pay, Last Pay Certificates will be made out as in "C" with an additional copy to be forwarded to the District Paymaster.

CREDITS, ADVANCES, Etc.

Credits, Advances, Forfeitures, Issues on Repayment, etc., since issue of this L.P.C. are to be entered hereunder:

Date	Place	Cheque No. A.R. No. or Other Particulars.	AMOUNT		Signature of Officer Making Payment.
			Dr.	Cr.	
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....

C.A.D.C. 5009 A

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) BOWEN. W.H.

REGIMENT Can. A.C. RANK Pte No. 512474

Date of Examination in England 23 12 18 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
   - (*c*) Full Lower
   - (*d*) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT? No

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

- (*a*) In Canada No
- (*b*) In England Yes
- (*c*) In France No

Signature of Dental Officer O. Rowley

DENTAL CERTIFICATE FOR DEMOBILIZATION

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

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS DISTRICT M.D. #2

NAME OF SOLDIER BOWEN, Wm. Henry No. 512474

REGIMENT C.A.S.C. RANK Private

INSTRUCTIONS

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

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

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

	Date	Amalgam	Temporary Filling (a) G. P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhœa	Synthetic Porcelain	Extracting	DENTURES U	DENTURES L	DENTURES P	Gold Clasp	Gold Filling	CROWNS Gold	CROWNS Porcelain	Bridge Work	Prophylaxis	OPERATOR	Military District	REMARKS
Condition on first Examination	FEB 17 1919					No Dental History.																	Cavities / Extractions
						Exchange examination at SPADINA M.H.																	
																				Prophylaxis			Certificate given
																					MAJOR J. G. ROBERTS		
																							SPADINA M.H.

M.F.B. 465
150M--10-18
1772-39-950

CLINICAL CHART.

(To be attached to Case Sheet.)

Army Form B. 181.

Corps_____ Military Hospital_____

No. 61244 Rank and Name Pte Bowen, Wm Age_____ Service_____

Disease D.A.H. Date of admission 30-9-18 Date of discharge_____ Result_____

Dates of Observation	30	Oct 1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
Days of Disease																																

Temperature Fahrenheit — Time A.M. P.M. (each day)

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 (2565)

Signature A Thackinnon In charge of case.

Capt Canc

Bed 17
ward 5

Army Form B. 181.

CLINICAL CHART.

(To be attached to Case Sheet.)

Corps_____ Military Hospital_____

No._____ Rank and Name Bowen Age_____ Service_____

Disease_____ Date of admission_____ Date of discharge_____ Result_____

Dates of Observation: 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21

Days of Disease: 11 12 13 14 15 16 17 18 19

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: B.C. B.C.

(6378) Wt. W4612/P566 2,000,000 2/18 McA & W Ltd A.F.B. 181/5 (E. 55)

Signature [redacted] In charge of case.

L. L. Job 95618—M. & D. 6555.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12.
15m.– 3-16.
H. Q. 1772-39-819.

To Whom Mrs. Margaret Bowen

Address 54 Montrose Ave
Toronto

Rate $20 MAY 1 - 1916

By Whom Assigned Bowen, Jr. W. H.

Regtl. No. 512474

Rank Pte

Corps 3rd Div Sup Col

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				

CONSOL ACCOUNT

CANADIAN
ASSIGNED PAY AUDITED
OK
AUDIT CLERK
DATE 15/5/19

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a.
50m.—4-16.
1772—39—819.

Sheet No. 2. Mrs. Margt Bowen

L. L. Job 310.—Req. 6574.

Name of Soldier Bowen W. H.

572474 3rd C.A.S.C.

Month.	Year.	Cheque No.	Amt.	Remarks.
			20.-	
April	1916			
May		T5784	20	
June		P 8893	20	
July		D9195	20	
Aug.		E102.07	20	
Sept.		E 18511	20	
Oct.		E79838	20	
Nov.		M 24598	20	
Dec.		L 32492	20	
Jan.	1917	Z37924	20	
Feb.		Z43237	20	
March		Z49796	20	
April		Y886	20	
May		L67441	20	
June		F13410	20	
July		Z 22440	20	
Aug.		D 27545	20	
Sept.		D 34438	20	
Oct.		Q46959	20	
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

20 20 20

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.				

*Name L BOWEN William Henry Rank Pte. Regtl. No 512474

Fyle Depot 24-Bo-196

Original unit ● Present unit C.A.S.C. M. or S. S Age 20 Religion Pres. Ref. H.Q.

Port, ship, and date of arrival Essequibo Halifax 26-1-19

Next of kin Mother Mts. Margaret Brown, 54 Montrose Ave. Toronto

Address on leave same.

Address on discharge same.

Transportation issued Yes / No Date Character on discharge

Previous occupation Cutter Date and place of enlistment Toronto March 17-16

Diagnosis DAH Date of Medical Boards 17-2-19.

Date.	Remarks S.M.H.	Pt. 2 Order No.
T.O.S. 13-1-19	Posted to Hosp Sec 26-1-19	H.S. 35
	Leave & Subs from 29-1-19 to 12-2-19	30.

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

(over)

Date.	Remarks.	Pt. 2 Order No.
20-2-19	HOSPITAL SECTION TO C.C.T.S.	51
25-2-19	SOS DISCH. MED. UNFIT (ENTITLED TO 153 days WSG) 53	

M.F.W. 192
150M—6-18.
1772-39-1243.

FORM D.M.S 1300.

SURNAME	CHRISTIAN NAME OR NAMES	REG. NO.
Bowen.	W. H.	512474.

RANK	UNIT	CO.	TROOP	BATTY.
Pte.	Depot Can. S. C.		Above (att. 1. C.R.I.)	

HOSPITAL — DATE OF ADMISSION

1. Moore Bks Shorncliffe 9-10-17
1. 7 C.G. Etaples Hosp. 27.6.18
2. 6 Can. Etaples Hosp 16.7.18
3. 7.C.G. Etaples 19.8.18
3. Gen. Mil. Colchester. Hosp. 24.8.18.
4. Ine Can. Epsom. Hosp. 27.9.18.

DIAGNOSIS

1 Tonsillitis Hd
Irritable Heart
2. P.U.O. & D.A.H.
3

DISPOSITION — DATE — REMARKS

Disc. 19-11-17

C.L. 19-10-17 - C 95.
23-11-17 B 69.
5.7.18 a 256-1
23.7.18 a 2716.2.
26.8.18 B 2010 (1)
27.8.18 B 2940 (1)
2.10.18 B 324.
5.10.18 B 327
24.12.18 B 392 (1)
14-1-19 B 408 (1)

Int To Canada 13-1-19.

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

EPITOME OF HOSPITAL TREATMENT

	HOSPITAL	ADM.
1.	K. & A. Bushy Park	1.10.18
	S. C. Gen Liverpool	21-12-18
2.		
3.		
4.		
5.		
6.		
7.		

LEAVE THIS BLANK.

PROGRESS, Notes. Class I. Complains of precordial pain. Pulse after exercise 90 to 1'37"

Class II. Complains of dyspnoea and vertigo. Pulse after exercise 1'20 to 1'32"

The bouts of slight temperature referred to on the other side of card interspersed with exercises & he was excused them frequently

DISPOSITION.

A Meiklejohn Capt.
Officer i/c Gymnasium.

patient.

Remedial Treatment Gymnasium,
Canadian Hospitals and
Command Depots.

LEAVE THIS BLANK.

THE KING'S CANADIAN RED CROSS SPECIAL HOSPITAL
BUSHY PARK, HAMPTON HILL.

Place:-

Regt.No 512474 Rank Pte Name BOWEN. W. H.

Unit 6 A St. Age 21 (Adm 30-9-18

Date of(

Division Hut (Disch.

DISABILITY.

Date.

D. A. H.

CLASS. (1) 15 min P.T. } 4 wks.
2 m Walk }
(2) 30 min P.T. } 2 wks.
2 m Walk }

(3)

MACHINES. not prescribed

Hours of Attendance,
a.m.

p.m.

REMARKS. Sitting pulse during 6 weeks observation fast - often 100 to 120. Slight rises of temperature lasting 2 or 3 days, and including the morning - not over 100. Heart normal as to size and Sounds.

R.T.G.1. P.T.O.

LEDGER NO. 655 SERIAL NO. B41841

REG. NUMBER 512474 NAME Bowen W A

RANK Pte CORPS D S 2

AGE 21 SERVICE — C 4 TrE 25/12

NAME OF HOSPITAL Giralda Mil Hosp PLACE Limerick

DATE OF ADMISSION 10.2.19

DISEASE D A H

TRANSFERRED TO OTHER HOSPITALS

OPERATION

DISCHARGED TO Castle 20-2-19 IN CATEGORY B.

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

P. T. O.

REMARKS:

MARRIED SINGLE Yes. WIDOWER

TRADE OR CALLING Cutter. RELIGION Presbyterian

DESCRIPTION.

APPARENT AGE 18 YEARS 10 MONTHS

HEIGHT 5 FEET . 5 3/4 INCHES

CHEST MEASUREMENT 37 INCHES EXPANSION 3 INCHES

COMPLEXION Fair EYES Blue HAIR Fair.

DISTINGUISHING MARKS Mole on chest, Scar R. knee. Scar R. forefinger, Scar L. side face.

MEDICAL EXAMINATION. PLACE Toronto. Ont. DATE Mar. 17th. 1916

2 CARD NO. V

SURNAME. Bowers.

CHRISTIAN NAMES William, Henry, Jr.

REGL. NO. 512474. RANK pte.

UNIT 3rd. Div. Supply Col.

FORMER CORPS nil.

1/10 is 25-2-19
M-U FOLL.
200-3 of 22-2-19
200

NEXT OF KIN.

NAMES IN FULL Bowen, Mrs. Margaret.

RELATIONSHIP TO SOLDIER Mother.

ADDRESS 54 Montrose Ave., Toronto, Ont.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada, Toronto, Ont DATE Apr. 30th. 1897

PLACE OF ATTESTATION Toronto, Ont. DATE Mar. 17th. 1916

O/S 22/4/16 392/2 R/C 26/1/19 257 Pte.

L. L. 94504. M. & D. 6512.

M. F. W. 22. 250M.—2-16. H. Q. 177-89-339.

Form R. 149.

William Henry

Name BOWEN Rank Gte Reg. No. 512474

Unit CASC. ~~D.D.~~ Pool. Att. 11th CRT

Next of Kin CANADA

Date		Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1917							
9	10	H.C.C.Dep. M.B	Bcliffe	Tonsillitis	C35		3500
19	11	Discharged	—	do	C69		1457
1918							
27	6	H.C.C.Dep	Etaples	Irritable	B256		2286
16	7	6 conv Dep.	—	Heart	B271		2686
19	8	H.C.C.Dep.	—	do	B311		3432
24	8	Gen Hosp Dep	Colchester	do	B324		24913
27	9	Emily Gwyn Hosp	Epsom	P.U.O.D.A.H.	B324		27442
1	10	K.G.R.G. Sp. Hosp.	Bushey Park	D.A.H	B337		27722
21	12	5 Can Gen H.	Kirkdale	do	B.C.9		3682
13.1.19		Invalided to Canada			B4108		6310

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

Number 512.474 Rank Pte

Surname BOWEN

Christian Name William Henry (Jr)

Units C A S C Theatre of War France

Date of Service 14-12-17

Remarks Dent C

Latest Address 54 Montrose Ave Toronto Ont

Roll No. B. Page 19682.

200m.-6-21.M.

DESP. JUL 23 1924
REGN. NO. 6280

NAME Bowen W. A.

RANK AND CORPS Pte.

REGT'L NO 512474

H. Q. FILE NO. 649.

FOLLOWS NO.

FOLLOWS

CABLE

NO. | DATE

NATURE OF CASUALTY

L. L. 26438. M. & D. 8207.

M. F. W. 42 50M.—8-17.
H. Q. 1772-39-893.

LIST NO.	HOSPITAL	DATE OF ADMISSION	REMARKS
C 35.	Moore Barracks Can Shorncliffe	9-10-17	Tonsillitis (Can A S C.
C 69.	Discharged from #11 Can. Gen. Shorncliffe.	19-11-17	" "
A 252-1	7 Can Gen H & Etaples	27-6-18	Irritable Heart
A 270	6 Can Depot Etaples	16-7-18	(Pool) " "
A 301	Can Gen Etaples	19-8-18	" "
B 297	Gen Mil Colchester	24-8-18	
B 324	Mil Can Epsom	27-9-18	Discharged
B 32	Kings Can R C Base Depot	1-10-18	"
A 398	Can Gen Hospital	21-12-18	"
B 408	Invalided to Canada	13-1-19	"

No. 512474 RANK Pte. NAME Bowen, W. H. (jr)

T. O. S. 17-3-16
O.O. 26/717-3-16

UNIT Can. Army Service Corps. (3rd Div. Supply Column.)

M. D. 7

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916 Mar. 17	1916 Mar. 31	—		

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

B

10030 May 1. 1916.

Date of Assignment

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

20			

PARTICULARS OF SEPARATION ALLOWANCE

No. S 12474

Rank Pte. Promoted Reverted Discharge

Soldier's Name W. H. Bowers.

Battalion 3rd. Mtd. C. A. S. C. (Div Sup Col)

Beneficiary

Relationship

Address

Oct 31-17 360 — 360 —

PARTICULARS OF ASSIGNMENT

Name Mrs Margaret Bowers.

Address 54 Montrose Ave. Toronto Ont.

Change of Address

1

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	
Nov 17	F 53358		20.	20	
Dec	F 58294		20	20	M
Jan.	F 63556		20	20	Hd
Feb	C 93491		20	20	9
March	A 100971		20	20	✓
Apr.	C 4681		20	20	9
May	E 11492		20	20	✓
June	D 19496		20	20	✓
July	X 33876		20	20	✓
AUG	6 31375		20	20	✓
SEP	D 37629		20	20	✓
OCT -	B 49429		20	20	✓
NOV -	B 52017		20	20	✓
DEC	6 66282		20	20	✓
JAN - 1919	H 69091		20	20	✓
			660	660	

REMARKS 1929 - N - 30

A/c Closed 31-1-19.

Ret'd per Essequibo.

Date 26-1-19. F. X. 30/1/19 to M.D. 2.

Clerk Cpl. M.R.O. 64762 Dusting

CANADIAN
ASSIGNED PAY AUDITED
OK
AUDIT CLERK
DATE 15/5/19

CONSOLIDATED ACCOUNT

M. F. W. 128
400M.—6-17—172-39-1141
L. L. 22320—M. & D. 7663.

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No. 4 P 90 20

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

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

M. F. W. 128
400M.—6-17—1772-39-141
L. L. 22320—M. & D. 7493.

Forms
I. 1237
12

Army Form I. 1237.

MEDICAL CASE SHEET.*

MOORE BARRACKS CANADIAN HOSPITAL SHORNCLIFFE

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
Year 1917	512474	Pte	Bowen	Wm H.

Unit.	Age.	Service.
Co. A. S.C.	20	18/12

No 11 Can. Genl
8-10-17.

Station and Date.

Disease Tonsiletis.

Two days ago noticed developed sore throat. Has been sent to hospital.

Examination -

Throat - Both tonsils more or less inflamed.
- No membrane or discharge present.

Heart. Slight enlargement. Apex beat inside left nipple line. Impulse frequent.
No murmurs present.
Heart sounds very rapid & irregular in rhythm.

Nervous System -
Tremor of extended hands.
Hand fine present - more
12 flexes + +
No organic lesions

Lungs - normal
Urine - normal

Past Illness - Chorea when a boy.

15-10-17. Tonsils large but no. injury suppuration.
Complains of pain in left chest. None on admission.

24-10-17. Systolic B.P. - 140
Diastolic - 90.

30-10-17. S.B.P - 135, D. 85. Heart action very variable.
Pat varies from 80 - 120 or more. It is excitable.
It did not improve after rest in bed. Complains of precordial pain.

R.T. Finch

DISCHARGED TO DUTY
19 NOV 1917

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

(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.	
Nov 17/17	Pt. has much improved physically. There is a nervous element about the case. Examined by Col. Finlay who recommended sending him back to his lines. Discharged to lines. Category A as on admission.

R. H. Hitchcock.

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.....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 :—

.....

.....

.....

.....

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.

SPADINA FURLOUGH

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

Reserved for M.H.C. S.M.H.

Regt. No. 512474 Rank PTE Surname BOWER Christian Name WILLIAM HENRY

Unit or Corps—(a) Overseas from United Kingdom CASC (M.T.) (b) in United Kingdom CASC (M.T.)

Born at—Town TORONTO County or Province ONT. Country CANADA

Date of Birth—Day 30 Month APRIL Year 1897 Age 21 yrs. 6 months.

Joined at TORONTO Date 19/3/16

Former trade or occupation CUTLER

Permanent Marks or any peculiarity that will serve for future identification :— ON OUTER SURFACE OF LEFT ARM TATTOED CANADIAN FLAG & UNION JACK, "CANADA, 17" 3rd 1916 512474

Height—feet 5 inches 7 Colour of eyes BLUE

Signature of Soldier (*for identification purposes*)

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*) D. A. H. (303),

Disabilities Group (*b*) not applicable.

Disabilities Group (*c*) not applicable.

2. CAUSE OF DISABILITY

	Place of origin.	Date of origin.
(*i.*) As to Group (*a*) above.	TRENCH FEVER	FRANCE EN ROUTING JUNE. 1917
(*ii.*) As to Group (*b*) above.	not applicable	
(*iii.*) As to Group (*c*) above.		

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 ?

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

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

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

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

(*ii.*) As to Group (*b*) above ? ✓

(*iii.*) As to Group (*c*) above ? ✓

PART I. (Continued)

5. MEDICAL HISTORY.

Says that he was robust and active as a boy. Started to work in factory age 16, but was employed as a [illegible] a good deal of the time + felt well.
Past Illness: Measles + scarlet fever when a child. Typhoid fever age 10, in hospital 6 weeks. Chorea age 9 to 15, the worst attack at about age 14. Has had rheumatic pains off + on since childhood. Has had no other illness. Was employed as Chauffeur in Canada and England for 1½ years on private cars. Enlisted 8/10/17 to 19/11/17 first noticed this (Patient's statement). He was in C.G. Hosp. Toronto Nov 1917 (Medical Board, Nov 21st, 1917.) He had some tachycardia then (M.H.S.). To France 14/12/17 - acted as Chauffeur to C.R.T. Worked right in the scrapping latter end of March for 6 weeks, otherwise was not under shell fire. Six weeks later he was taken sick and admitted to hospital with pains in neck and back. Was unable to walk without crutches for help. He was placed on [illegible] and was sent to hospital at Base (Patient's statement.) After 3 weeks there + 3 weeks at Convalescent Camp he again reported sick and entered hospital again. That was 2/3/18 (R.M.O.) and he was evacuated D.A.H. 24/3/18 to 2: 6/9/18 at Sapper Walden Hospital P.W.D. and sent to Epsom where he was judged D.H.H and sent home 30/9/18 (M.H.S.). He says he was lousey most of time in France.

6. PRESENT CONDITION.

Subjective Symptoms: Easily tired: precordial pain and dizziness, and dyspnoea, on exertion.
Objective Findings: General appearance good. Pulse during 6 weeks observation fast - quite often 120 to 130. Weight [illegible] temperature lasting for 2 or 3 days - the temperature being up both morning + evening - not over 100.
Heart normal as to size and sounds.
Lungs negative.
Reaction to graduated exercise not bad - but the exercises have been interspersed with by these rises of temperature. After 30 minutes light exercise patient complains of dyspnoea and vertigo, and pulse is 120 to 130.
Other systems apparently normal.

7. OPERATION.

(*i.*) Was one performed? no (*ii.*) If so, state what.

(*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? none

(*ii.*) If so, describe.

few [illegible] caps

9. DO YOU RECOMMEND :—

(*a*) Fit for duty? (*state category*) B III likely to be raised within 6 mos.

(*b*) Invalid to Canada? no

(*c*) Discharge from the Service as permanently unfit? no

Date of Report 14/11/18 191..

Signed A Thomson Capt Can M.C.
Officer in medical charge of case.

Station The King's Canadian Red Cross Special Hospital, Bushey Park, Middlesex.

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

Officer i/c Hospital / S.M.O. Brigade

Dated at Station, on 22/11/18 191..8..

*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? / Aggravated? No

(*b*) Misconduct of the Soldier — Caused? / 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.*) 20%

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.*) 2/10

15. Permanency of the Disability due to Service estimated next above in (14).
(*i.*) Is it permanent?

(*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?

17. Can the former trade or occupation be resumed?

18. REMARKS :— Soldier is also known 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 nature of previous illness or injury. In account of operation not considered advisable to send to duty.

19. RECOMMENDATION :—

(*a*) Fit for duty? (*state category*)

(*b*) Invalid to Canada? Yes

(*c*) Discharge from Service as permanently unfit?

Date of Board 22/11/18

Signatures of the Board: J. Mackenzie Lt Col A.D.M.S. Can Corps. — President.

Station Bushey Park.

Approved A Thomson Capt Can M.C.

A.D.M.S.

Dated at ..... Station 191

Major, C.A.M.C.

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.

We concur

19. Is the invalid fit for

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

20. It is certified that the invalid

(*a*) ~~Does require treatment.x~~ (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.)

We recommend his discharge as medically unfit for service

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.

C. J. Currie Maj. *President.*

PLACE SPADINA MIL. HOSPITAL, TORONTO

DATE Feb. 17th -1919 } Members

TO BE COMPLETED WHEN TREATMENT IS REFUSED

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

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

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

President.

PLACE .....

DATE ..... } Members

APPROVED BY ..... *Assistant Director of Medical Services.*
DATE 21-2-19

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 Spad. Mil.Hospital DATE 17-2-19.

1. 1 (*a*) Unit #2 DD (*b*) Regimental No. 512474 (*c*) Rank Pte.
(*d*) Surname BOWEN (*e*) Christian name William Henry
(*f*) Home address 54 Montrose Ave., Toronto, Ont.
(*g*) Next of Kin Mrs. Margaret Bowen (*h*) Relationship Mother
(*i*) Address of Next of Kin 54 Montrose Ave., Toronto, Ont.
2. Age last birthday 21 yrs. Date of birth 30/4/1897
3. Enlistment, or Appointment (if an Officer) (*a*) Place Toronto (*b*) Date 17/3/16
4. Personal description:
(*a*) Height 67 (*b*) Weight 138 (Stripped) (*c*) Complexion fair
(*d*) Colour of hair fair (*e*) Colour of eyes blue (*f*) Identification marks, Scars, etc. Flags & #512474 tattooed on left forearm.
5. Former trade or occupation Ladies' wear cutter.
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	Periods From	Periods To
Canada	2x 2	337	17/3/16	19/4/16
England			19/4/16	14/12/17
France or other theatres of War			14/12/17	24/7/18
~~England & Canada~~			24/7/18	present date

7. Original disease, or injury Tonsilitis
(*a*) Date of origin Oct. 1917 (*b*) Place of origin England
(*c*) Cause Infection.

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.)

Disordered action of the heart (DAH)

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 signs:- General condition good & weight the same as on enlistment. Eye mucous membranes are slightly pale and he vomits readily under examination. Tonsils and teeth negative. Apex beat is slightly diffuse and 3 cms. to the left of the mid sternal line. No enlargement of the heart on percussion. Definite precordial hyperalgesia. The pulse is lying 100, standing 104, after exertion 140, with recovery to 104 in 1 minute. This test caused marked distress and breathlessness. Blood pressure is 120-75 at rest. Murmurs and accentuations absent. Sleeping the pulse rate is 76, breath cannot be held over 10 seconds. Xrayed by Whistle, Medical consultant confirms above examination and diagnosis and recommends discharge.

Subjective symptoms:- Feels perfectly well when quiet but on exertion such as ascending stairs or rapidly walking feels weak, dizzy and breathless, and has sharp precordial pain.

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

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

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

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

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

Temperature - not elevated.
Expectoration - negative.
Urine - negative for sugar and albumen.

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

In October 1917 he had tonsilitis with tachycardia

Since this date the patient has felt his present symptoms, which grew much worse after trench fever in August 1918 and have persisted since

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*).)

In childhood was also said to have had rheumatic fever.
Carried from 9 to 15 years.

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

None

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.)

Not applicable.

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? 12 months.

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

Various Hospitals since August 1918.
Spa & Ina Military Hospital since 12/2/19.

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?
(If not, briefly state why) no. needs partial rest.

17. Recommendations.

Discharge.

George
Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

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

I, the undersigned Pte. Henry Bowen 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

W. H. Bowen Rank.
Signature of invalid examined.
Pte.

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.

This space to be for numbers.

War Service Badge.
Class A
No. 89878 issued Feb. 20. 1919

War Service Badge.
Class 13.
No. C 145123 issued Feb. 20. 1919

Proceedings on Discharge.

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

J.S.

No. 512474

Rank Pte.

Surname BOWEN,

Christian name WILLIAM HENRY

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

Corps (Squadron, Battery or Company) 3rd.Div. Supply Co. (#2 D.D.)

Date of discharge FEB 25 1919

Place of discharge TORONTO, ONT.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 21 years ..... months.
Height 5 feet 7 inches.
Complexion Fair
Eyes Blue
Hair Fair
Trade Ladies' Wear Cutter
Intended place of residence (To be given as fully as practicable.) 54 Montrose Ave., Toronto, Ont.

Descriptive marks

Vacc. scars left arm

Received 1-12 $5.56

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

"MEDICALLY UNFIT"

Authority for discharge #2 D.D. Feb. 25th, 1919 Pt.11 #53.

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.

(OVER)

K.C. 26.2.20. Com.

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..... O. C. Discharge Section No. 2 District Depot

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) TORONTO, ONT. William Henry Bowen *(Signature of Soldier.)*

(Date) FEB 25 1919 H. F. Harvey Lt *(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) TORONTO, ONT.

(Signature) H. F. Harvey Lt

O. C. Discharge Section No. 2 District Depot

(Date) FEB 25 1919

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.)

"ESSEQUIBO" 26.1.19

B.1674

AUDITOR | PAYMASTER

M. OR S. S

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

REGT. No. 512474 RANK Pte NAME (IN FULL) BOWEN, W.H. (BLOCK LETTERS, SURNAME FIRST)

NEXT OF KIN — RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? Nil — DATE EFFECTIVE

TO WHOM PAID — RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C. E. F. C.A.S.C. IF IN P. F. WHAT UNIT? Same.

PLACE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

DATE OF ATTESTATION 17-3-16 — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY, $ 20.00 — DATE EFFECTIVE 1.2.19.

PAYABLE TO Mrs. Margaret Bowen. — RELATIONSHIP — ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS 54 Montrose Ave. Toronto.

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

DISCHARGED PLACE Toronto DATE 25/2/19 REASON MU AUTHORITY Do. 53 IF ENTITLED TO POST DISCHARGE PAY 153

MONTH	PAY AND F.A. NO. OF DAYS	PAY AND F.A. RATE	PAY AND F.A. AMOUNT $	PAY AND F.A. AMOUNT C.	OTHER CREDITS $	OTHER CREDITS C.	TOTAL CREDITS $	TOTAL CREDITS C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	ACQUITTANCE ROLLS COL. NO. 1 DATE	ACQUITTANCE ROLLS COL. NO. 2 NO.	ACQUITTANCE ROLLS COL. NO. 2 DATE	ACQUITTANCE ROLLS COL. NO. 3 NO.	ACQUITTANCE ROLLS COL. NO. 3 DATE	CASH PAYMENTS COL. NO. 1 $	CASH PAYMENTS COL. NO. 1 C.	CASH PAYMENTS COL. NO. 2 $	CASH PAYMENTS COL. NO. 2 C.	CASH PAYMENTS COL. NO. 3 $	CASH PAYMENTS COL. NO. 3 C.	ASSIGNED PAY $	ASSIGNED PAY C.	REGIMENTAL CHARGES $	REGIMENTAL CHARGES C.	OTHER CHARGES $	OTHER CHARGES C.	TOTAL DEBITS $	TOTAL DEBITS C.	BALANCE DEBIT $	BALANCE DEBIT C.	BALANCE CREDIT $	BALANCE CREDIT C.	PARTICULARS OR REMARKS
Balance from previous account																																		
31.12.18		1.10					75	31																										
							75	31	6053	31/1/19					4	87																		
										26/1/19					5	00																		
										29/1/19					50	00																		
																					20	00												
1.1.19 to 25-2-19	56	1.10	61	60	35/12	70	178	60	23742.				23684		154	04					20/45		456					178	60					
																												79	87	4	56			
153 days		W.S.G. 350 00					350	00							W.S.G.																			
															Feb 25.																			
															70	00																		
															Mch 22 24464/6		70	00																
															April 1 46355		70	00																
															May 20 145056		70																	
															June 20 663/71270																			
			350				350								350																			

Jan. '19 ECW.

T. O. S. ..... D. 30

SUBS. 29/1 TO 15/2/20 D. 30

Due Soldier.

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	AMCUNT								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.	$	C.	

MARRIED OR SINGLE: Single

PLACE OF BIRTH: Toronto.

NAME AND ADDRESS OF NEXT OF KIN: Margaret Bowen, 54 Montrose Ave, Toronto,

RELATIONSHIP OF NEXT OF KIN: Mother.

NAME AND ADDRESS OF NEXT OF KIN:

RELATIONSHIP OF NEXT OF KIN:

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

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

REG'L NO. 512474 RANK Pte NAME Bowen Jr. ~~W~~ ~~H~~ William Henry

IF IN PERMT. CORPS / WHAT UNIT — UNIT 3rd DSC

PERMANENT FORCE ALLOWANCES

PLACE OF ATTESTATION Toronto

DATE OF ATTESTATION 17th Mar. 1916

TRANSFERRED TO	HQ London	DATE 23-10-16	AUTHORITY Taken on from CP 23-10-16
TRANSFERRED TO	66th Lethbridge for pay	DATE 9/1/17	AUTHORITY Cable 33
TRANSFERRED TO	L.A.O	DATE 1.11.17	AUTHORITY
TRANSFERRED TO		DATE	AUTHORITY

ASSIGNED PAY MONTHLY $ 20.00 DATE EFFECTIVE

PAYABLE TO Margaret Bowen 54 Montrose ave Toronto RELATIONSHIP

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

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

DISCHARGE DATE AND PLACE REASON AND AUTHORITY F.

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

DATE	PAY No. OF DAYS	PAY RATE	PAY AMOUNT $	PAY AMOUNT c.	FIELD ALLOWANCE No. OF DAYS	FIELD ALLOWANCE RATE	FIELD ALLOWANCE AMOUNT $	FIELD ALLOWANCE AMOUNT c.	WORKING OR SPECIAL PAY No. OF DAYS	WORKING OR SPECIAL PAY RATE	WORKING OR SPECIAL PAY AMOUNT $	WORKING OR SPECIAL PAY AMOUNT c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE CREDIT	BALANCE DEBIT	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
April	30													18 40	18 40																18 40				Bal from Canada.
May	31	1.00	31	-	31	10	3	10							34 10	1384	1457							9 43	4 30			20		34 03	15 44				
June	30	"	30		"		3								33.													20		20	28 44				
July	31	"	31		31	"	3	10							34 10	1626 1668	1947							4 87 7 30	4 87			20		37 04	25 53				
Aug	31		31				3	10							34 10	2129	3117	2273	15/8					4 87	7 30			20		32 17	27 46				
Sept	30		30		30		3	00							33 00	2407	3/8	2545	199					4 87	7 30			20		32 17	28 29				
Checked ... Oct. 1-22	22		22		22		2	20							24 20	2612								CRM 3-11-17 23-10			9741	20		34 61	17 88				Trans to H.Q London 1st list 23-10-16
Oct 23																								4 87		14 60				14 60		14 60		
Nov 30	39	.	39		39		3	90	39	1.00	39	00			81 90	2311 Cancl	2454	15 11/16	2653	31 11/16				9 73	29 20	24 33		20		83 26	1 92				
Dec-31	31	1.00	31	00	31		3	10	31		31	00			62 10		2983								41 36			20		61 36	56				
Jan-31	31	1.00	24	50			2	50																											
Jan 1-31	31	1.00	34	10					31		31				65 10	3154 Can								19 47				20		39 17	31 29				
Feb 1-28	28	1.00	30	80					28		28				58 80			3721	15/11/17	3996	31/1/17				19 47	19 47		20		58 94	31 15				
Mch																		4213	15/3						24 33			20	107 10	151 43		120 28			
			334 50								129	00		18 40	462 80								6571	1413	5840	974	320	107 10	58 94	14 60	14 60				

Nov 30 — 39 days @ 1.00 = 39 00; Dec-31 — 31 days @ 1.00 = 31 00; Jan-31 — 24 50 (24 days @ 1.00 = 24 00, 2 days @ 1.25 = 2 50); Jan 1-31 — 31 days @ 1.00 = 31 00; Feb 1-28 — 28 days @ 1.00 = 28 00

$10.70 = Ovw. Cr. P & A. 9/1/17 to 28/2/17 61 Days at 2.00 per C.C.

Note: Lethbridge for pay 9/1/17 Cable 33

CANADIAN ASSIGNED-PAY AUDITED O.K. [illegible] AUDIT CLERK DATE 15-3-17

No. 517474 Pte. Bowers Jr. Williams Henry. Assigned Pay $ 00 20

DATE 1917	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
2nd			33 40								129 00			18 40	481 80									65 71	141 13	58 40	974	220	107 10	602 08		120 28			
apr																											20		20		140 28			
Apr	9/4/16	3/6/17	89 10												89 10																51 18			
May	31	1st 19th 10	34 10												34 10												20		20 00		37 08			
June	30		33 00												33 00												20		20 00		24 08			
July	31		34 10												34 10												20		20 00		9 98			
Aug	31		34 10												34 10												20		20 00	4 12				
Sept	30		33 00												33 00	352	3717	388	14 8					243	243			10		24 86	13 26				

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR 3	DR. 4	BALANCE	DEFERRED PAY	SEP. ALLCE. ENG.
Oct									12 26		
	B/Pay	34 10						20		16 36	
				MR 2783 6226 215	16.10.14	9 43			16 63	29 73	
Nov	1st	34 10		Nil a/c		9 73		20		16 63	
Dec	1st	34 10		C/R 6114 30-9-17 6226 88		4 81					
				Nil a/c		14 54 6226-1m038					
1918									36 43		
Jan	1st	61 10		C/R 467 21-1-17 " "		2 41					
		34 10		O.R 1043 30-11-17 " "		1460		40			
				" 198 18-9-17 " "		486					
				a/c		1946					
		34 10						20	31 07		
				Can a/c				20	61 87		
July	1st	30 80		AR 2M 155 31/12/17 11th RECRT		2 68		20	41 87		
		30 80				268		20	39 19		
		30 80				769					
				Can a/c Med.				20			
Med.	1st	34 10		DR 112 13/11/17 8th Bn		1 78					
				DR 206 15/1/18 11 REGT.		268					
				D.R. 20659 4 HD 3rd Ech 19.12.17		3 57					
				DR AR 326 15/2/18 11 CAN.		3 57					
				" " 758 28/1/18 11 Bn		3 57					
				" " 382 28/2/18 "		3 57					
				DR AR 1187 13/12/17 CASC BD		4 87					
				DR AR 4444 15/3/18 11 REGT		3 57			26 11		
		34 10				27 18		20			

CANADIAN
ASSIGNED PAY AUDITED
O.K.
AUDIT CLERK
DATE 15-9-18

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY. 20ᵉᵉ * ~~ENGLAND~~ OR CANADA.		SEPARATION ALLOWANCE. * ENGLAND OR CANADA.	
EFFECTIVE DATE:- 1.5.16		EFFECTIVE DATE:-	
AMOUNT:-		AMOUNT:-	

NAME:- BOWEN, WILLIAM HENRY Jr.

NUMBER:- 512474

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.

Margaret Bowen
54, Montrose Ave,
Toronto

Discharged to Canada 31 12/18
Ref 16 A/142. C/Bal as per L. Pl. $6~~8~~ 91
75 91.

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Private.

UNIT AND TRANSFERS

ORIGINAL UNIT:- C.A.S.C. T.D

DATE ACCOUNT FIRST OPENED:- 1 5.16

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
	1-11-19		L.A.O Casc
	1-2-19		N.E.R.

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
~~13 11/18~~	~~3 54~~	~~Bankers D.~~	~~14 50~~				
~~27 11/18~~	~~4002~~	~~" "~~	~~14 80~~	19/2/19.			
~~24 11/18~~	~~3001~~	~~" "~~	~~14 80~~	14/2/19			
~~Ad~~	~~to be debited~~		~~7 30~~				

DAILY RATES OF PAY AND ALLOWANCES 1ˢ

AUTHORITY	PAY	F.A.	P.F.A.	SUBSISTENCE ALLOWANCE
	1	10		

PARTICULARS OF RENDERING NON-EFFECTIVE:-

1918 MONTH	PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
31/3/18	Cr Bal.								26 11		
April	P+A @ 1ˢᵗ	33		D.R.AR No 143 H.C.R.I. 15-4-18	3 57			20 ~~26~~			
				D.R. AR 57 11 Cdn. 1-4-18	3 57				31 97		
		33			7 14			20			
May	P+A. 31 days @ 1ˢᵗ	34 10		L.A.S. May.				20 00			
	Unctd. Carried on P.L. 9-17. 30-4-17-81 days @ 1ˢᵗ. should be. 112 days @ 1ˢᵗ $123.20	34 10		D.R. AR. 270. 15-5-18.	3 57						
				D.R. AR. 355. 20-5-18.	3 57			20 00			
		68 20			7 14			~~13~~ 08	73 03		
June	P+A. @ 1ˢᵗ	33		L.A.S. June				20			
				D.N. AR 175. 30.4.16	3 57						
		33 00			3 57			20	82 46		
July	P+A @ 1ˢᵗ	34 10		L.A.S. July				20			
				D.R.AR. 460. 11ᵗʰ Bttn. 13-6-18	3 57				92 99		
				" " 6392 L.G.B.D. 21-7-18	8 92						
				AR - 7262 " 31-7-18	4 46				79 61		
		34 10			16 95			20			
Aug	P+A. @ 1ˢᵗ	34 10		L.A.S. August				20			
				D.R. AR 7897. 18 8/18	4 46				89 25		
		34 10			4 46			20			
Sept	Pay @ 1ˢᵗ	33		Can AR Sep				20			
				AR Hosp Can VO # 33658 17-9-18	9 73				92 57		
		33			9 73			20			
Oct	Pay	34 10		Can Pay Oct.				20			
				AR 3251 Bushy Park. 11 10/18	4 87				101 70		
		34 10			4 87			20			
Nov	Pay	33 00		Can AR Nov				20			
Dec	Pay	34 10		AR 3501 25 10/18	2 45						
		67 10		Can AR Dec				20	126 42		
					24 3						

NUMBER 51247A RANK 2/Lt NAME BOWEN W.H.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
		67 10		Fwd	2 42			40	126 42		
~~Dec.~~	~~Pay~~	~~24 10~~		AR 3757 Bushy Park. 12/11/18	487				121 55		
		67 10			7 30			40			
	L P C										
				AR 3991. Bushy Pk. 29/11/18.	4867						
				AR P. 6053. Kirkdale 3/1/19.	487	Endon L.P.C.					
				~~AR~~ WR 4002. ~~Bushy Pk.~~ 27/11/18.	487				6314		
					58 41						
March/19	10 dys. S.F.		7 30						70 44		
			7 30								
	S.O.S Eff. 12-1-19										

CANADIAN
ASSIGNED PAY AUDITED
O/K
Osborne
AUDIT CLERK
DATE 12-5-19