775243	BOWMAN	WILLIAM WATSON
I.D. number **No. d'identification**	**Surname** **Nom de famille**	**Given names** **Prénoms**

DEC'D 20115819

PERSONNEL RECORDS CENTRE
CENTRE DES DOCUMENTS DU PERSONNEL

PERSONNEL RECORDS ENVELOPE
ENVELOPPE DES DOSSIERS DU PERSONNEL

Location
Lieu 963

"CONTENTS CONFIDENTIAL"
"CONTENU CONFIDENTIEL"

ARC-1048 (r. 87/05)

REGIMENTAL DOCUMENTS

NAME BOWMAN. W. 24. WATSON REGT. NO. 175243 UNIT 26th Bn H. Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
	ATTESTATION PAPER (M.F.W. 23, 133, or 51)	24.3.19				DEATH
	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)	24-3-19				Category
	TRAINING HISTORY SHEET (M.F.W. 113)					
	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
	DENTAL HISTORY SHEET (M.F.B. 465)					Category
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)				33[illegible]	Med Unfit
	MEDICAL EXAMINATION (M.F.W. 129)					
	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)		Deceased 20-11-58			
	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					DESERTION
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					
	LAST PAY CERTIFICATE (M.F.W. 44)					
	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					
	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					

11/18
24-18
23-19
2

~~7-15~~

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W. 2589
100M-11-13
1772-35-1377

F 1EN

ORIGINAL
7025 F

ATTESTATION PAPER.

No. 775243

126TH OVERSEAS BATTALION

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?	Bowman.
1a. What are your Christian names?	William Watson
1b. What is your present address?	425 Lansdowne Ave. Toronto
2. In what Town, Township or Parish, and in what Country were you born?	Dundee, Scotland
3. What is the name of your next-of kin?	Mrs. Jennie Bowman
4. What is the address of your next-of-kin?	425 Lansdowne Ave. Toronto, Ont.
4a. What is the relationship of your next-of-kin?	Mother
5. What is the date of your birth?	Apl. 18th 1895.
6. What is your Trade or Calling?	Plumber
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 Watson Bowman, 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 Bowman (Signature of Recruit)

Date January 17 1916. J Madigan (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, William Watson Bowman, 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 Bowman (Signature of Recruit)

Date January 17 1916. J Madigan (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 17 day of January 1916.

J D Hamilton Lt Colonel

O. C. 126th O. S. "Peel" Battn., C. E. F. (Signature of Justice)

M. F. W. 23.
200 M.—11-15.
H. Q. 1772-39-841.

7025

Description of William Watson Bowman on Enlistment.

Apparent Age 23 years 10 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height	5 ft 7 ins.
Chest measurement. Girth when fully expanded	33½ ins.
Chest measurement. Range of expansion	2 ins.
Complexion	Fair
Eyes	Blue
Hair	Brown
Religious denominations. Church of England	
Presbyterian	Yes
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).

None

SCANNED Archives COPIE

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 January 17th 191 6. B. E. McKay Capt.

Place Toronto ..... 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 Watson Bowman 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.

J. J. Hamilton Lt. Colonel (Signature of Officer)
O. C. 126th O. S. "Peel" Battn., C. E. F.

Date January 17 191 6.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 775243 (Rank) Pte.

Name (in full) BOWMAN. WILLIAM WATSON enlisted in

the 126th Bn.

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

day of January 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 23 yrs.

Height 5' 7"

Complexion Fair

Eyes Blue

Hair Brown

Marks or Scars

Vacc. scars on left arm

C.A.T. Hook.....11-4-17

W. W. Bowman.

Signature of Soldier

Issuing Officer

Rank

Appointment

Date of Discharge March 11th, 1919

Signed at Toronto, Ont. this 11th day of March 19 19

in Military District No. 2

File Reference No.

No. 2
MAR 11 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.

LS.

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

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

Uniform is not to be worn after expiration of one month from date of discharge, except by special permission of G. O. C. district.

.....
Name of Officer

.....
Rank

.....
Appointment

ORIGINAL

ORIGINAL
7025

MEDICAL HISTORY SHEET.

Surname Bowman *Christian Name* Wm. Watson

Examined { on 17th day of January 1916
at Toronto

Birthplace { City or Town Toronto
County

Apparent age 20 yrs 10 mos

Trade or occupation Plumber

Height 5 Feet 7 Inches.

Weight 120 Lbs.

Chest measurement { Minimum 31½ inches.
Maximum expansion 33½ inches.

Physical development fair

Small-Pox Marks none

Vaccination Marks { Arm Right. 2 Left.
Number 2

When Vaccinated last years

(*a*) Marks indicating congenital peculiarities or previous disease none

(*b*) Slight defects but not sufficient to cause rejection none

Approved by H. E. Mackay

Rank Capt. M.O.

Date	Fit or Unfit	Examined for Re-engagement,
		M.O.
		M.O.
		27 APR 1917 M.O.
		25 MAY 1917 M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date	Result	Vaccinations.
23/3/16	O.K.	Glendon M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
5/3/16	O.K.	Glendon M.O.
21/3/16	O.K.	M.O.
25/3/16	O.K.	M.O.
21/9/16	X	
10/5/18	Lieut	J S Sutherland

Enlisted on 17th *day of* January 1916 *at* Toronto

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	[redacted]	775243		
Transferred to..	[redacted] OVERSEAS BATTALION C.E.F.			
	18th Bn W.O.R.D.			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
Beamwood Pk 5th Canadian Hospital Toronto	30-6-18 6-1-19 6 3/19	Synovitis Rt Knee Deaft Synovitis Rt Knee left. St. Tis marcia, chest	B II R D Bowman Capt A.M.C. R II H K Burgis Lt Col Pres. Med Board. I S C. J M Mallory A Lt Col

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.
150M.—8-15.
H. Q. 1772-39-439.

CANADA

7025

Surname Bowman Christian Name William Watson

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.
Beanwood.		20	4	7	31	8	17	Gun Shot Wound		Wounded. No disability. Shows benefit after graduated exercises. D[illegible]	C.D. Stewart Capt.
										Category D[illegible]	W.S. Dudley Capt & Major, Officer Commanding, Canadian Convalescent Hospital, Bear Wood, Wokingham, Berks.
Bear Wood.		20	9	17.				Synovitis Left Knee.		GB. Only Fair. Left knee swollen & painful on walking. Feels weak. Heart rapid. Pulse 108. Cats. C[illegible]	J. Wilson Capt
Beanwood					14	6	18	do		Knee condition recovered. Patient nervous, sleeps poorly appetite poor - generally weak and run down	J. Sutherland Captain

Army Form B. 178.

7025

To be used (a) for recruits enlisting direct into the Regular Army, and (b) for men of the Territorial Force when they are admitted to Hospital. Army Form B. 178A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname Bowman *Christian Name* W. W.

TABLE I.—General Table.

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

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

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

Trade or Occupation.....

Height .....feet.....inches.

Weight.....lbs.

Chest Measurement { Girth when fully Expanded ..... inches. / Range of Expansion ..... inches.

Physical Development .....

Vaccination Marks { Arm..... RIGHT | LEFT / Number ..... | .....

When Vaccinated .....

Vision { R.E.—V= ..... / L.E.—V= .....

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

.....

.....

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

.....

.....

Approved by .....

Rank .....

Medical Officer.

Enlisted { at..... / on ..... day of .....191.....

	Corps	Regtl. No.
Joined on enlistment	18 Canadians	775243
Transferred to		

Became non-effective by.....

.....

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

(*Signature*).....

(*Rank*).....

TABLE III.—Boards; Courts of Enquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, etc.

Date	Brief details, and Signature

TABLE IV.—Service Table.

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

W. P. Griffith & Sons Ltd., Printers, Old Bailey, E.C.
[1273] W15368/M1384 500m 2/17R 45 59

7025

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

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
3RD WESTERN GENERAL HOSP. CARDIFF.	15	4	17				GSW neck		Frenzen	F. J. Shaeffer — CAPT. R.A.M.C.T.F.

Forms
I. 1237
11

7025

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
P.O.T. 189.	775243.	Pte	Bowman	W.
Year 1916	Unit. 18th Canadians	Age. 21	Service. 16 mths	

Station and Date.	Disease T. S. W. Neck.
	Admitted 15. 4. 17. Wounded
	— shrapnel — Vimy Ridge.
	Small healing puncture neck &
	neck.
	No sign of neck implication or G.S.
16. 4. 17.	Transfer. T. J. Shackleton. Pte. R.A. — T.F.

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

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

P.T.O.

Station and Date.	

Forms
I. 1237
10

1EN

7025

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
87656	175243	Pte	Bowman	W W.

Year

Unit.	Age.	Service.
18 R	21	1/12

Station and Date.	Disease G S. W. neck
~~Staffs~~	
Hut ~~4~~	Tuning Ridge 10 apl 17
8	Boulogne #14 11 - -
	Cardiff 2nd Genl 15 - -
	Bear Wood 20 - -
	I/4
	Dressings
	P. C.
	wound not healed, dressing
	G. C. Jars
	Rest
31/8/17.	Discharged to 2nd C. C. D. Bramshott. D. I.

CANADIAN CONVALESCENT HOSPITAL
REGISTRAR
1 SEP. 1917
OFFICE
BEAR WOOD, WOKINGHAM, BERKS.

*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.	

Form R & O 6045
1288-180M-29/11,16.

7025

1EN

PROCEEDINGS OF A MEDICAL BOARD.

Dated at C C H Bear Wood April 30th.1918. 1916.

No. 775243 V Rank Pte Name BOWMAN W.W.

Local Unit..... Overseas Unit. 18th. Bn Age 22

Examination held at C C H Bear Wood.

DISABILITY.
Overseas ~~Local~~.
(scratch one out)

SYNOVITIS RT. KNEE.

PRESENT CONDITION.

Old wound in neck still gives considerable trouble and has difficulty in swallowing, solid food does not agree with patient- soft food more acceptable. Looks rather weak and "Run Down" has never been very strong Is rather nervous and "high strung"- does not sleep well. Takes cold easily. Has had frequent attacks of Bronchitis. Lungs show rales in both apecies which persist on coughing. Heart- roughening of 1st, sound at apex. pulmonary second sound slightle accentuated, will not be able to do manual labor of a severe type.

BOARD RECOMMENDS:—

1. Fit for Duty.....
2. Fit for duty after.....weeks' physical training.
3. Fit for Temporary Base Duty B.ii. Temp. D.l. .....weeks.
4. Fit for Permanent Base Duty .....
5. Discharge .....

Signatures:—

Members { R.D.Cowan Capt. CAMC ..... President.
J.S.Sutherland. Capt. CAMC .....
C.L.B. Stammers Capt. CAMC .....

APPROVED

Dated at May 9th.1918 1916.

J.S.Sutherland Capt. CAMC .....

For A.D.M.S.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at ..... 19...

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

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

Examination held at .....

DISABILITY.
Overseas Medical
(Scratch one out)

PRESENT CONDITION.

BOARD RECOMMENDS:—

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

Signatures:—

Members .....

.....

.....

APPROVED

Dated at ..... 19...

For A.D.M.S.

7025

IEN Chest.

6-3-19.

775243 Pte Wm. Watson BOWMAN.

	Sitting.	Standing after touching toes 10 times	Sitting 1 min.	Sitting 2 min.	Sitting 3 min.
Pulse	90	93	120	102	99	90
Resp. ~~15~~ 20	20	26	24	20	—

Pte. Back. Cyd.

Expansion 2" 3" 4"

A well formed chest.

The breath sounds are roughened slightly over the main bronchi and a few sticky rales are heard at the bases and occasionally a few coarse rales along the sides of the sternum

Slight bronchitis (due to service) which is clearing up since return to Canada.

Treatment is not indicated.

Discharge to C.D.C as out patient for re examination in three months.

(no rales heard at present today)

Chas. C. Alexander Capt.

6/19

1 E N

THIS FORM WILL BE USED FOR ALL RANKS

MEDICAL HISTORY OF AN INVALID

7025

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 Ex. Camp. DATE Feb. 25-19.

1. 1 (*a*) Unit No.2. D.D. (*b*) Regimental No. 775243 (*c*) Rank Pte.

(*d*) Surname BOWMAN (*e*) Christian name Wm. Watson.

(*f*) Home address 318 St. Clarens Ave., Toronto.

(*g*) Next of Kin Mrs. Jennie Bowman. (*h*) Relationship Mother.

(*i*) Address of Next of Kin 318 St. Clarens Ave., Toronto.

2. Age last birthday 19 Date of birth 18-4-195.

3. Enlistment, or Appointment (if an Officer) (*a*) Place Toronto. (*b*) Date 17-1-16.

4. Personal description: (*a*) Height 5ft. 7½in. (*b*) Weight 126 (stripped) (*c*) Complexion Fair.

(*d*) Colour of hair Brown. (*e*) Colour of eyes Blue (*f*) Identification marks, Scars, etc. Stitch of wound(wards) death before dishonor on right forearm. Heart and clasped hands (tattoo) true. love. Jose. on left forearm.

5. Former trade or occupation Plumber.

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).	3 Years	40 Days
126th Bn.	Periods	
	From	To
	Jan. 17-16.	Aug. 14-16.
Canada	Aug. 14-16.	Dec. 15-16.
	Dec. 15-16.	Apr. 14-17.
England	Apr. 14-17.	to date.
	England and Canada.	
France or other theatres of War		

7. Original disease, or injury 1. Chronic suppuration, Otitis Media, left. 2. Synovitis, left knee. 3. S. S. 3rd of neck. 4. Bronchitis. 5. Neurasthenia.

(*a*) Date of origin 1. Mar. 1917. 2. Apr. 1/17. 3. Apr. 10/17. 4. 1917. 5. June 1917. (*b*) Place of origin 1. 2. 3. 4. & 5. France.

(*c*) Cause 1. Infection. 2. Kicked on knee by mule. 3. Shrapnel. 4. Caused. 5. Stress of service.

M. F. B. 227.

300M.—8-18.
1772-39-117.

H. J.

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

1. Impaired function of left ear. 2. Impaired function of left knee.

3. " " " neck. 4. " " " respiratory system.

5. " " " nervous system.

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.)

1. Objective:- See special report.
1. Subjective:- Has pain in ear at times, which ceases when ear begins to discharge.
2. Objective:- All movement of joint normal, no swelling, slight tenderness on pressure over patella.
2. Subjective:- Knee feels weak, can not walk more than 3 miles without resting as knee becomes painful if he is on his feet all day. Knee throbs when he is in bed at night. Wet weather aggravates the disability.
3. Objective:- Small scar back of neck, one inch to left of cervical vertebra very tender to pressure over scar, slightly tender on pressure over vertebrae of neck. No loss of sensation, since injury has had slight pain in right side of neck when swallowing.
3. Subjective:- When he bends his head forward, has pain over vertebrae of neck. Neck feels tired when he holds his head erect for over ½ an hour. Man claims shrapnel still in wound (see X-Ray report).
4. Objective:- See special report.
4. Subjective:- " " "
5. Objective:- " " "
5. Subjective:- " " "

(*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 sugar or albumen.

No varicocele, varicose veins, hernia, haemorrhoides, or goitre.

English board papers claim D.A.H. This I consider largely functional.

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

1. Began Mar. 1917, in France, condition much the same now.
2. Was kicked by mule on knee, April, 1917, was in hospital 4 months, since discharge from hospital knee has gradually been improving.
3. G.S.W. of neck, April 10/17, was in hospital four months, condition much the same as when discharged from hospital, Aug. 1917, Sent to hospital for G.S.W.
4. See special report.
5. See special report.

7025

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*).)

G.S.W. back of neck, 10-4-17. Claims shrapnel still in wound.

See sect. 10 and X-Ray report.

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

Scar back of neck (left side) see sect.10B. One vaccination scar, childhood, mole on abdomen.

11.—(*a*) Did the disabling condition have its origin before enlistment? 1.2.3.4.&5. 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.)

12. Was the disability caused, or aggravated; (*a*) by intemperance, or improper conduct; or (*b*) by unreasonable refusal to accept treatment? (A & B) 1.2.3.4.& 5. No.

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

13. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? 1.& 2.Minimum period - 3 months. 3.& 4. Minimum period - 3 months. 5. Minimum period - 3 months.

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

Hospital - 13 months - England.

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit? 1.Yes - referred to I.S.C. as out-patient. 2.No. 3.Surgical interference at I.S.C. for removal of shrapnel. 4.Referred to I.S.C. as an out-patient. 5.No.
(If the answer is "yes" state nature of treatment required and probable duration)

16. Can the former trade or occupation be resumed? No - because of the nature of his occupation and his present physical condition.
(If not, briefly state why)

17. Recommendations. See sect. 15. I.S.C. as an out-patient for 3 months.

W.M. Ellenath Lt.
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).

Pte. Bowman, W.W.

I, the undersigned.....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.....

t.b. W.W. Bowman Rank.
Signature of invalid examined.

7025

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 except Sec. 15, No.3 - donot recommend removal of foreign bodies in neck.

19. Is the invalid fit for

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

20. It is certified that the invalid

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

1. for otitis media. 4. chest condition for 3 months treatment and observation.

(*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.)

To I.S.C. for 3 months treatment and observation, for otitis media and chest condition.

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.

Jno Hellmuth *President.*

Exhibition Camp, Toronto. } *Members*

PLACE

March 6-19.

DATE

TO BE COMPLETED WHEN TREATMENT IS REFUSED

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

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

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

President.

PLACE } *Members*

DATE

APPROVED BY

APPROVED
MAR 7 1919
Capt.
FOR A/D. M. S. M. D. 2

Assistant Director of Medical Services.

DATE

APPROVED BY

Director-General of Medical Services.

DATE

6

To be made out in duplicate.

H.Q. 54-21-23-53

DUPLICATE

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

INSTRUCTIONS.

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

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

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

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

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

---

(1) Name of Overseas Unit which Soldier joins 126th Peel Batt'n

(2) Regimental Number 775243

(3) Full Name of Soldier William Watson Bowman

(4) Place of Birth Dundee Scotland

(5) Are you married, or not ? No

(6) If married, state,
(a) Full name of your wife ✓

(b) Present Postal Address ✓

(7) Are you a widower ? ✓

(8) Have you any children ? ✓

If so, give number of boys and girls ✓

Also their names and ages ✓

M. F. W. 67.

300M.—5-16.
1772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive? No

If so, state name and address ✓

(10) Is your Mother alive? Yes

If so, state name and address Jane J. Bowman
245 St Clarence Ave, Toronto.

(11) If your Mother is a widow Yes

Are you her sole support, or not? Yes

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

$20.00 a week, Only means of support

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

✓

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

Yes

(15) Are you insured? ✓ 918

If so, in what Company? ✓

Have you made arrangements for payment of your Insurance premium ✓

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

F. J. Hamilton
Officer Commanding.

Date July 31 '16

IEN Chest.

5-3-19.

7025

778-243 Pte Wm. Watson BOWMAN.

Sec. 9a.

Objective: See Spec. report.

Subj: Cough occasionally in day - increased in evenings & mornings. Expectorates about 1 tablespoonful thick greenish black sputum in mornings.

Sec. 10 a.

Cough began April 1917 in France after exposure - No mention in N.H.S.

Wt. in France 134. Wt. on enlistment age 20 was 120.
Present Wt. 128½.

In 1917 April had night sweats for 2 wks. Med. Board Jan 4th 1919 states rales at both apices on deep inspiration.

3/19

R. Tait. Capt.

IEN

7025

Exhibition Camp. Toronto.

March 6.1919.

BOWMAN William W.

#775243.

NEUROLOGICAL REPORT.

History. This man became shaky in June 1917, after returning to England from France. He had been in bed 3 months previously with a bad knee. Whenever he attempted to pick anything the tremor of hands was increased. He says he has not improved any as far as his tremulousness is concerned.

Objective. Tremor of hands. Moderate exaggeration of patellar reflexes Cyanose of hands. Tachycardia.

At rest. After touching toes ten times. After 5 mins.

Pulse. 110 140 Original.

Pupils normal. Further objective findings are negative.

No evidence of organic nervous disease.

Subjective. He become dizzy and shaky if he climbs 5 or 6 steps up a ladder. (occupation-plumber). Insomnia. He is troubled with tremor of arms and legs after exertion.

Diagnosis. Neurasthenia induced by service conditions.

Disability. 10%.

J.H. Travis.

Capt.

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS DISTRICT 2

NAME OF SOLDIER Bowman W Watson No. 775243

REGIMENT ..... RANK Pte

INSTRUCTIONS

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

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

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

	Date		Amalgam	Temporary Filling (a) G.P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhœa	Synthetic Porcelain	Extracting	DENTURES U	DENTURES L	DENTURES P	Gold Clasp	Gold Filling	CROWNS Gold	CROWNS Porcelain	Bridge Work	OPERATOR	Military District	REMARKS
Condition on first Examination																							
Discharge Exam. At Exhibition Camp																							
Date. MAR - 6 1919																							
Certificate issued for Filling																							

W. A. Semple
Major

M. F. C. 200M. 1772-39-600.

M.F.W. 44.
1133 (D.P.) 250M.-12-18.
1772-39-903.

CANADIAN EXPEDITIONARY FORCE.

LAST PAY CERTIFICATE

Regimental No. 7/52443 Rank Pte Name Bowman W W
(Surname first)

Unit No. 2 District Depot. who was* DISCHARGED

On MAR 11 1919 191....., to Outpatient / S.C.R.

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1st March to MAR 11 1919 191...
the inclusive date of transfer or discharge.

	Dr.	Cr.
Bal. Dr. or Cr. from prev. month		11 -
Regimental Pay 11 days at $ 1 c. -		11 10
Field Allowance 11 days at $ c. 10		1 10
Separation Allowance		10 65
Clothing Allowance		3 5 -
Post Discharge Pay		100
*Other Credits		
Advances	10 65	
Separation Allowance and Assigned Pay Cheque No. S103169		
*Other Charges		
	11 7 10	
Balance on transfer or on discharge, cheque No. S103168	154 15 -	
Total		

*Give particulars.

A monthly stoppage of $ 20 00 (†) has (‡) been paid on account of

Assigned Pay for the month of February 191.... 19
and Separation Allce. for month of March 191.... 19 } (to) Assignee Mrs Jennie Bowman

(Address) 218 St. Clarens Ave Toronto Ont

(†) 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 Yes (3) Reason for discharge.....

(4) Authority for discharge or transfer D.O. 1167

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.

Date MAR 10 1919

Place TORONTO, ONT.

Capt.
PAYMASTER, No. 2 DISTRICT DEPOT *Paymaster.*

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

DISCHARGED

2 O.P-S.C.R.

DEPARTMENT OF MILITIA AND DEFENCE.

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 Watson 2. Surname Bowman (Bowman)
3. Rank Pte. 4. Original Unit 116 Bn 5. Reg. No. 775243
6. Address, in full, to which future payments of gratuity are to be forwarded 318 St Clarens Ave. Toronto Ont
7. Date of enlistment in the C.E.F. 17 Jany 1916
8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge Mrs Jennie Bowman
9. Relationship of such dependent Mother
10. Address, in full, of such dependent 318 St Clarens Ave. Toronto Ont
11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? No
12. Were you at any time on the strength for pay and allowances of a unit of the C.E.F. which was out of Canada or the United States when such pay and allowances were issuable? If so, give particulars of one such unit and dates of service overseas with such unit:— 116 Bn, ~~Oct~~ aug. 1916 Oct 1916
13. Were you on the strength for pay and allowances of the Clearing Services Command, having been at any time on duty outside of Canada or the United States? No
14. Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service No
15. Give total length of time which you served on active service, whether in Canada or Overseas, setting out particulars of units on whose strength you served 3 yrs 1 mo. 116 Bn 18 Bn
17/1/16 To 11/3/19
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 ..... 11/3/19 ..... (b) Reason for discharge ..... Medically unfit to take further out patient treatment with Dept. of Soldiers' Civil Re-est. .....

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 .....

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 ..... 18 Bn Dec 1916 — Apl 1917 .....

27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment? .....

(b) If so, are you in receipt of full pay and allowances from that Department? .....

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. W. Bowman.

Place of Residence: 318 St. Clarens. Ave. Toronto

Declared before me at: Toronto

This FEB 26 1919 day of 19....

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

POST DISCHARGE PAY.

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

Certified Correct.

District Paymaster.

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) BOWMAN MD2

REGIMENT 18 IH Bn. RANK Pte. No. 775243

Date of Examination in England 22.1.19 | Date of Examination in France

DIRECTIONS TO DENTAL OFFICERS

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

PRESENT DENTAL REQUIREMENTS

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

HAS HE EVER REFUSED DENTAL TREATMENT ?

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

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

CANADIAN ARMY DENTAL CORPS ORDERLY ROOM ROYAL PARK CAMP

Signature of Dental Officer H W Reid Capt

IEN

7025

M. F. W. 5a.
150M. 10-15.
H.Q. 1772-39-920.

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

Casualty Form—Active Service.

Unit, Regiment or Corps 126th Overseas Bn.

Regimental No. 775243 Rank Pte Name Bowman, William Watson
C. E. F.

Enlisted (a) Jan 17/16 Terms of Service (a) Want Sig Mentho Service reckons from (a) Jan 17/16

Date of promotion to present rank. } ..... Date of appointment to lance rank } ..... Numerical position on roll of N. C. Os. } .....

Extended ..... Re-engaged ..... Qualification (b) (Plumber)

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. 212, Army Form A. 36, or other official documents.
		Embarked Canada	Halifax, N.S.	14/8/16	
		Disembarked England	Liverpool	24/8/16	
14/10/16	OC 126	Transfd 116TH OVERSEAS BATTALION C.E.F.	Bramshott	15-10-16	No #38 Part 2 - 17-10-16
25/10/16	O.C. 116	Taken on Strength	Bramshott	15/11/16	O.C. 126th O/S "Peel" Battn. C.E.F. Lt. Colonel
29/11/16	O.C. 116	TRANSFERRED FOR OVERSEAS SERVICE WITH 126 BN. Attd Signal Capt + Adjt. FOR O.C. 116TH BN.		NOV 28 1916	DO # 311
29-11-16	Can Base Depot	Arr from 116 Can Res Bn England & taken on strength of 18 Can Bn.	Can Base Depot	29.11.16	Nom Roll Pt II Ord 57 d-13.12.16
9-12-16	18 BN	Joined unit	In the Fld	3.12.16	B.213
11-4-17	4 C.F.A.	SW. neck. Adm.	4 C.F.A.	11-4-17	A 36. DCS. 287.
13-4-17	3 Can Gen.	do Adm.	No. 3 Can Gen.	13-4-17	W 3034.

CERTIFIED CORRECT. 4 DEC. 1916 CAN. AREA

(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.

OVER

7025

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				
14-4-17	H.S. Jan Breydel.	S.W. neck. Adm. (Posted to West. Dnt. Regtl. Depot, Bramshott)	H.S. Jan Breydel.	14-4-17	W3083. (Can. Sect. No. 64/19) Pt. II Order 30, 30/4/17.
					J.Whogan Capt. for Lt.-Col., A. A. G. Canadian Section, G. H. Q. 3rd Echelon, B. E. F.
2-5-17	WORD	Posted to W.O.R.D.	Bramshott	14.4.17	Pt II O. 48
3.9.17	2.C.C.D	attached to 2.C.C.D.	Bramshott.	31.8.17.	Pt 2 D.O. # 171.
3.10.17	2nd. CCD	Ceased to be attached to 2nd. CCD on admission to Bearwood Mil. Hospital. Wolkingham.	Bramshott.	10.9.17	Pt. 2. D.O. #197. J.Raphael For. OC. 2nd. CCD.
1-9-17,	WORD	Duse. from Hospital on Com. 2nd CCD.	Bramshott,	31.8.17,	D.O. # 152,
4-10-17,	do	Admitted to Hosp. from 2nd. C.C.D.,	do.	10-9-17	D.O. # 180 C. Pelletier Capt.
3.9.17 3.10.17	2 C C D 2nd. CCD	attached to 2 C D Struck off Strength of 2nd. CCD on admission to Bearwood Hosp.	Bramshott Bramshott	31.8.17 24.9.17	Pt 2 D.O. # 171 Pt. 2. D.O. #197 J.Raphael For. OC. 2nd. CCD.

3

IEN

7025

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

M. F. W. 54. (A. F. B. 103.
500M.—9-16
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps .....

Regimental No. 775243 Rank Pte C. E. F. Name Bowman William Walter

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				
FEB 1 1919	O. S.	T. O. S. No. 2 DISTRICT DEPOT, TORONTO		1919	PART II D. O. 45

COPIED Archives COPY

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

11/3/19 S.O.S. (Discharged) No. 2 District Depot
Part II, D.O. No. 67

H Sargeant Cpl

O. C. Discharge Sections,
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				

W6490/1535.—2,000,000—J. J. K. & Co., Ltd.—Forms B. 103/1.

IEN

Army Form B. 103.

Casualty Form—Active Service.

Regiment or Corps _____ 7025

Regimental No. 775243 Rank Pte Name Bowman, W. W.

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: 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. 56, 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.
1-9-17	W.O.R.D.	Discharged from Hospl on Command 2nd C.C.D.	Bramshott	31-8-17	Lo # 152
4-10-17	W.O.R.D.	Ceases to be on Command 2nd C.C.D. admitted to Beaswood Hospl.	Bramshott	16-9-17	Lo # 180
16.5.18	W.O.R.D.	Discharged from Hospital will be shown as Command to 2ND C.C.D.	Witley	14.5.18	D.O. # 116
15/5/18	2nd C.C.D	att 2nd C.C.D	Bisley	14/5/18	Lo. 118
6 JUN 1918	OC. 2nd CCD	Ceases to be attached to 2nd C. C. D. on return to W.O. Reg. Depot	Bisley	6 JUN 1918	Pt. 2 D. O. No. 133. for OC. 2nd CCD.
7.6.18	W.O.R.D.	Having reported case to be on command to 2nd C.C.D. is attached to depot. Witley.	Witley	6.6.18	D.O. # 133
25.6.18	W.O.R.D.	BOB on transfer to C.A.M.C. Depot Thorncliffe	WITLEY	25.6.18	DO - 148

(*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.

COPIED Archives COPY

Asst. Adjt. West Ont. Regtl. Depot

Officer i/c Records. WORD

7025

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				
26-6-18	Camp D	Taken on Strength	S'cliffe	25-6-18	Pt 2 DO. 177
29-6-18	—	S.O.S. to C.A.M.C. Liverpool	—	28-6-18	[illegible] CAPT. ASST. ADJUTANT. FOR OFFICER COMMANDING, C.A.M.C. DEPOT.
29. 6. 18	No. 5 CANADIAN GENERAL HOSPITAL.	T.O.S. from C.A.M.C. Depot.	Liverpool	28. 6. 18	PT. 2 DO. No. 140 D 29/6/1918
10. 12. 18	— do —	S.O.S. to C.A.M.C. Casualty Co. Shorncliffe	Liverpool	9. 12. 18	PT. 2 DO. No. 264 D 10/12/1918
10. 12. 18	— do —	Attached from C.A.M.C. Casualty Co. Shorncliffe	Liverpool	9. 12. 18	PT. 2 DO. No. 264 D 10/12/1918
13-1-19	do	Ceases to be attached to this Unit on return to C.A.M.C. Casualty So. Shorncliffe.	Liverpool.	13-1-19	PT. 2 DO. No. 10 D 13/1/1919 MAJOR C.A.M.C. ADJT & REGISTRAR, FOR O.C. No. 5 CANADIAN GENERAL HOSPITAL, LIVERPOOL.
16.1.19	Same as above	Tos from S Cliffe reported	Shcliffe	13.1.19	Pt 2 DO 13.
20.1.19	do	On command to Kinmel Park.	do	18.1.19	— 16 Capt

Attached C.C.C. Kinmel Park for return to Canada. Part 11 Orders No._____. Ceases to be attached C,C,C, Kinmel Park on embarking for Canada, Part 11 Order No: 31-32 6-9/2/19.

22 JAN 1919.

W G Powers Lt
Commanding 2 Wing,
Kinmel Park Camp.

Embarked S.S Carmania
Liverpool Feb,1 1919

COPIED Archives Copy

CHEST REPORT

5-3-19.

BOWMAN William Watson.
#775243, Pte.

Sec. 9 A.
Objective:- See special report.
Subjective:- Cough occasionally in day, increased in evenings and mornings. Expectorates about 1 tablespoonful thick greenish black sputum in mornings.

Sec. 10 A.
Cough began April 1917, in France after slight gassing - No mention on M.H.S.
WT. in France 134. WT on enlistment 120, age 20. Present WT. 128½
In 1917 April has night sweats for period of 2 weeks.
Med. Board Ja . 4th 1919. states rales at both apices on deep inspiration.

(Signed) P.E. Faed, Capt.

IEW

7025

TORONTO GENERAL HOSPITAL

Department of Radiology

REPORT OF THE ROENTGEN EXAMINATION OF

Date Mar 3rd/19 Name Pte Bowman #77243

Address Exhibition Camp.

Referred by Dr. Jas. Moore. Case No. 45250

Plates were made of the cervical spine, antero-posterior and lateral.

There is a small irregular fragment of metal lying in relation to the posterior spinous process of the 2nd cervical vertebra, and about ½ to ¾" to the left of it. This seems to be lodged in the muscles of the back of the neck, and has not produced any fracture or abnormality of the bony structures.

F. E. Richards

Capt. C.A.M.C.,

O.C., X-Ray Dept.

3/19

M.N.

R—122

IEN

A.G.R. Rank Pte Name BOWMAN, William Watson Reg'l No. 775243 7025

Unit 126th Bn. If in perm. Corps, What Unit? Married or Single Single.

Place and Date of Enlistment Toronto, 17th Jan., 1916. Place of Birth Dundee, Scotland.

Name and Address, Next-of-Kin Mrs. Jennie Bowman,

425 Lansdowne Ave., Toronto, Ont. Relationship Mother.

Assigned Pay Monthly $ Payable to MD.2.

Relationship

Separation Allowance $ Payable to PG

Relationship

N/E. R.B. No. 9756
File R.L.
Category OR CAN

Discharge, Date and Place Reason Character

H. W. & V., Ld.—7165-16.

Report. Date.	Report. From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS. Taken from Official Documents.
		Arrived in England S.S. Empress Of Britain 24th. AUG. 1916			
14.10.16	126th Bn	S. of S. on Trans- to 116th Bn.	Bramshott	15.10.16	Part II. D.O. #38
25-10-16	to.116th.	T.O.S. from 126th. Bn.	B'shott.	15*10*16	Pt. 2 D.O 276
29.11.16	to.116th Bn.	S.O.S. overseas to 18th Bn.	Witley	28.11.16	Pt II DO. 211.
18.12.16	18th	Taken on strength.	Field	29.11.16	" " 57.
20-4-17	do	to 3 Can Gen Hspl.	Boulogne	13-4-17	6.LA 486 S.W. Neck 821.
30-4-17	"	3rd Western Gen Hospl	Cardiff	15-4-17	6 LB 341 do
3-5-17	do	Ex above to 6.6.H. Beaswood	Wokingham	21-4-17	" " 344 do
30-4-17	do	Posted to W.H.D (Wounded)	Field	14-4-17	Pt II O. 30 W.H.D. No 48
1-9-17	W.H.D.	On Command at 2nd 6.G.D.	B'shott	Pte 31-8-17	152 " 2nd 6.G.D. 171 d/s 4-9-17

A.F.B. 103 CHECKED 4 DEC. 1916

Report. Date.	Report. From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
7.9.17	W.O.R.	Disc. C.C. Hsp. Beauwood	Wokingham	Pte 31.8.17	C.I.B. 5 G.S.W. neck slt.
24-9-17	W.O.R.	Adm. 6 G.H. Beauwood	"	" 21-9-17	6 G.L. 16 Syn. R Knee
3.10.17	2nd G.D.	Ceases to be att on adm to Hdl. B Hosp.	"	? rec. queries	P.H.O. 197, WORO Pte H.O 180 4/10/17
16.5.18	W.O.R.D.	On comm. 2nd L.C.D.	Witley	" 14.5.18	DD 116 (2nd G.D. DD 114 14.5.18)
4.6.18	"	Ceases on com. 2nd G.D.	"	" 6.6.18	DD 133 2nd G.D. DD 133 6.6.18)
25.6.18	"	S.O.S. to C.L. M.C.D.	"	" 25.6.18	DD 148 / cancd Pte II D.O. 177 d/26/6/18
29.6.18	#56 Gen Hsp	T.O.S from Camb Depot	L'pool	" 28.6.18	Pte II D.O. 140 / cancd Pte II D.O. 179 d/28/6/18.
10.12.18	"	S.O.S to Camb Boy and attd from Camb Boy	"	" 9-12-18	—254. } Pte II Do 69 d/22.2.19 Camb to Boy
13.1.19.	"	Ceases to be attached	"	" 13-1-19.	Do 10. Pte II Do 69 d/22.2.19 Camb to Boy
~~16.1.19.~~	~~Camb Boy~~	~~T.O.S from No 5 G.S. Hsp~~	~~Cliffe~~	~~" 13.1.19.~~	Came Boy Pte II Do 69 d/22-2-19 ~~—13.~~
6-2-19	2 MDC Wg	T.O.S from.	Rhyl	21-1-19	—31
6.2.19	do	SOS to Canada	"	" 1.2.19	—31 (Supplementary Order)
		Sailing 1-2-19 Fr D2			

CDI (NL) Archives COPY

L. L. Job 4503.—M. & D. 6332.

mother

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12.
50m.—6-16.
H. Q. 1772-39-319.

To Whom Mrs. Jennie Bowman

Address 245 St. Clarens Ave
Toronto Ont.
318 Clarens Ave

Rate $20

By Whom Assigned Bowman W. W.

Regtl. No. 775243

Rank Pte

Corps 126 Bn.

AUG 1 1916

PAYMENTS

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

CONSOLIDATED 6 ACCOUNT

2

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12a.
50m.—6-16.
1772—39—819.

L. L. Job 4503.—Req. 6882.

Sheet No. 2. Mrs. Jennie Bowman PAYMENTS.

Name of Soldier Bowman W. W.

775243 Pte

AUG 1 1916

120 Bn

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916		$20	
May				
June				
July				
Aug.		K15460	20	
Sept.		F16470	20	
Oct.		A20826	20	
Nov.		K23761	20	
Dec.		F31111	20	
Jan.	1917	A38827	20	
Feb.		A43500	20	20 R
March		B48804	20	20 B.
April		W319	20	20 L
May		Y6977	20	
June		G13155	20	20 Ch
July		B21683	20	
Aug.		E27345	20	318 Clarens Ave Toronto Ont
Sept.		E34128	20	
Oct.		947149	20	300.00
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier_____

PAYMENTS.

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

4/1/16 1.3.16

45

L. L. Job 4503.—M[illegible]D. 6832

MILITIA AND DEFENCE

M. F. W. 11
50m.—6-16.
H. Q. 1772-39-818.

SEPARATION ALLOWANCE

Name Jennie Bowman

Address ~~245 St Clarens Ave~~ Toronto Ont.

Relation to Soldier / wife, child or mother } Mother

Name of Soldier Bowman W. W.

Regtl. No. 775243

Rank Pte

Corps 126th Battn

To what Corps belonging when called out } ✓ ✓

318 St Clarens Ave.

PAYMENTS

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

CONSOLIDATED

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 11a.
50m.—4-16.
1772—39—818.

Sheet No. 2.

L. L. Job 310.—Req. 6574.

J. Bowman Mother

Name of Soldier Bowman W.W.

DE

Month.	Year.	Cheque No.	Amt.		Remarks.
April	1916				
May					
June					
July					
Aug.					
Sept.		V 17938	140		140
Oct.		B 18153	20	-	20
Nov.		C 21790	20		20
Dec.		C 25351	20		20
Jan.	1917	B 28573	20		20
Feb.		B 31578	20		20
March		B 34464	20		20
April		D 387	20		20
May		C 3955	20	300	20
June		F 7324	20		20
July		C 10774	20		20
Aug.		G 13634	20	R	318 St Clarens Ave.
Sept.		F 17579	20	R	
Oct.		R 22814	20	R	400 00 03
Nov.					
Dec.					
Jan.	1918				
Feb.					
March					
April					
May					
June					
July					

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier_____

PAYMENTS.

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

Date of Enlistment

1/3/16.

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

10253

Date of Assignment

Aug. 1, 1916

RATE OF SEPARATION ALLOWANCE

~~20.~~	~~25~~ 1/-	30 1-9-18	

p. c. 3257 PC 2753 M041538

RATE OF ASSIGNMENT

20			

PARTICULARS OF SEPARATION ALLOWANCE

No. 775243

Rank Pte. Promoted Reverted Discharge

Soldier's Name W. W. Bowman

Battalion 126th Battn

Beneficiary Jennie Bowman.

Relationship Mother.

M.F.W. 2554 2-9-18

Address

Oct 31-17 400- 300 — 700-

PARTICULARS OF ASSIGNMENT (Mother)

Name Mrs. Jennie Bowman

Address ~~245 St.~~ Clarens Ave.

Change of Address Toronto,

1 318 St Clarens Ave. Toronto. Ont.

2

3

4

1949-W-4

Date		Cheque No.	Amount S/A	Amount A/P	Total		REMARKS
Nov.	F	53566	20	20	40		M.O. 71205
Dec	F	58501	20	20	40	m	
Jan	F	63748	30	20	50	Hd	
Feb	C	68683	25	20	45		
Mch	A	100966	25	20	45		
apr	C	4879	25	20	45		
May	E	11691	25	20	45	✓	
June	D	19693	25	20	45	✓	
July	X	34084	25	20	45	✓	
AUG	6	31593	25	20	45	✓	
SEP	D	37861	25	20	45	✓	
OCT -	F	41663	25	20	45	✓	
NOV	B	53247	25	20	45	✓	
DEC	A	67346	45	20	65	✓	
JAN - 1919	H	69300	30	20	50	✓	
FEB	J	78481	30	20	50		
			825	620			

OKD

M. F. W. 128
400M.—6-17—177-39-1141
L. L. 22320—M. & D. 7693.

A/c Closed 28-2-19

Ret'd per Carmania

Date 8-2-19 F. X. FEB 13 1919

Clerk M.D. 2

CONSOLIDATED

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

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

M. F. W. 128
400M.—6-17—1772-39-1141
L. L. 22920—M. & D. 7668.

IEN

7025
FORM D.M.S. 1300.
8137—50m—28/2/17.

Surname	Christian Name or Names	Reg. No.
Bowman	W. W.	775243

Rank	Unit	Co.	Troop	Batty.
Pte	18th Batt. W.G.R.		Depot.	

Hospital — Date of Admission

Transferred 3 Can. Gen. Boulogne Hosp. 13-4-17
3rd W.G.H. Cardiff Hosp. 15-4-17
Beamwood Conv Hosp. 21-4-17
" " Hosp. 21.9.17

Diagnosis — S. W. neck slt. (16)
Syn. R. Knee. RW

(1)
Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

DISPOSITION

A486

C.L. 20-4-17
CL 30-4-17 B341 (2)
3-5-17 B 344
8-9-17 B5
21.9.17 C16
21.5.18 C211-1

Date

Dis. 31-8-17
" 15.5.18.

REMARKS

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

EPITOME OF HOSPITAL TREATMENT.

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

L

*Name BOWMAN. William Watson Rank Pte. Regtl. No. 775243

Fyle Depot 24-Bn. 243

Original unit ..... Present unit 18th Bn M. or S. Age 23 Religion Pres Ref. H.Q.

Port, ship and date of arrival Halifax Carmania 8-2-19

Next of kin Mother Mrs. Jennie Bowman 425 Lansdowne Ave. Toronto Ont.

Address on leave Same

Address on discharge 318 St. Clarens Ave., Toronto, Ont.

Transportation issued Yes / No Date ..... Character on discharge .....

Previous occupation Plumber Date and place of enlistment Toronto Jan 17-16

Diagnosis Chronic suppuration, otitis media left ear. Synovitis left knee ~~G.S.W. of neck. Bronchitis.~~ Neurasthenia Date of Medical Boards 26-2-19

Date.	Remarks.	Pt. 2 Order No.
T.O.S. 1-2-19	Posted to Cas Co (Ex Camp) 8-2-19	
	Leave & Subs from 12-2-19 to 26-2-19	45
11-3-19.	S.O.S.DISCH."MED.UNFIT" TO TAKE OUT/PAT.TREATMENT WITH THE	
	DEPT.OF S.C.R. 183 DAYS W.S.G.	67

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

(over)

Date.	Remarks	Pt. 2 Order No.

M. F. W. 192

150m.—5 18

1772-39-1243

Form DMS 1401.
8289 100M 9/3/17.

1 EN

Registrar, Canadian Convalescent Hospital,
HOSPITAL.
Bear Wood, Wokingham, Berks.

A. & D. CARD

7025

B 11

AT

A. & D. No. A 39 [illegible] PL. OF ACTION 77243

RANK Pte UNIT 18th Batt SICK OR WOUNDED P

NAME Bowman. W.W. AGE 21 RELIGION

PLACE IN HOSPITAL 10 x A

DIAGNOSIS Synovitis Rt. knee

ADMITTED 20 SEP 1917 FROM Reported sick on leave

DISCHARGED 14 MAY 1918 TO 2nd. C.C.D. Bramshott.

TRANSFERRED

SERVICE AT HOME 12/12 IN FIELD 8/12

RESULTS

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

REMARKS.

Deceased November 20th, 1958.

Number 775-243 Rank Pte.

Surname BOWMAN

Christian Name William Watson

Units 18th Bn. Can. Inf. Theatre of War France

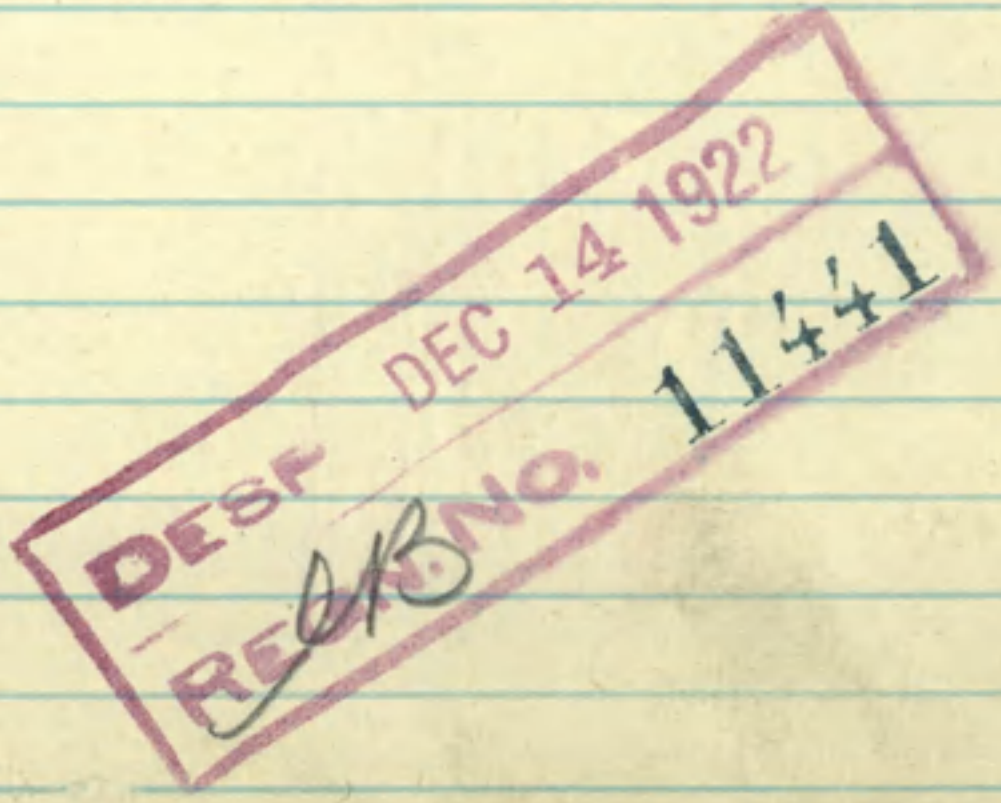
Date of Service 28-11-16

Remarks 35 Silverthorne Ave.

Latest Address [redacted] Toronto Ont.

Roll No. Page 19762

200m.-6-21.


DESF
DEC 14 1922
REC'D
NO. 11441

FORM R. 149.
7106—250m—7/2/17.

IEN

7025

Name **BOWMAN, William Watson** *Rank* **Pte.** *Reg. No.* **775243**

Unit **18th Bn.**

Next of Kin **Canada**

Depot

Date 1917	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
13-4	3 Can.G.H. Boulogne	S.W.	Neck slt	A486	M2363	20-4
15-4	3rd West.G.H. Cardiff	-do-		B341		
21-4	CCH Bearwood Wokingham	-do-		B344		
31-8	Discharged		Dy	B3		R 226 3
21-9	to H. Bearwood	Syn.	Rt. Knee Clg	C41		2497
14.5.18	Discharged					5464

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

Form D.M.S. 1317.
1202—15m—21/11/16.

1 E N

Registrar, Canadian Convalescent Hospitals,
Bear Wood, Wokingham, Berks.

7025

D 1

HOSPITAL. Hut 8.

A. & D. No. OS 7656 Ward ~~Hut 11~~

Unit 18th Batt Sick or Wounded.

Regtl. No. 775243 Pl. of Act'n

Rank Pte Name Bowman W W

Age 21 Religion CE

Service Compl'd 16/12 Time with Field Force 8/12

Diagnosis S.S.W. neck

Admitted 20 APR 1917 3rd W.F. Cardiff Discharged 31 AUG 1917

Transferred 2nd C.C.D. Bramshott

RECORD FURTHER REMARKS ON BACK.

Army Ridge 10 Cpl 17
Bonboyne 14th 11 7025
Cardiff 3 Gen 15

DSO
Det Hon Lld DSO
7 Aug Rosh

No 775243 Rank Pte. Name Bowman, H. H.

T. O. S. 17-1-16.
(D.O. 14 of 17-1-16)

Unit 126th Peel Battalion, C. E. F.

M. D. 2

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916	1916.			
Jan 17	Jan 31	✓		
Feb.		✓		
Mar.		✓		
Apr		✓		
May		✓	Forfeits 2 days' pay a. W. C.	70. O. 170 of 7-16
June		✓		
July				
Aug		✓		

UNIT SAILED
AUG 14 1916

1 EN

REGT'L NO 775243

NAME Bowman William Watson

H. Q. FILE No. 649-

RANK AND CORPS Pte 18th Bn from 126th Bn

FOLLOWS No. 7025

FOLLOWS

CABLE No.	CABLE DATE	NATURE OF CASUALTY
M2363	20-4-17	L Adm 3rd Gen Hosp Boulogne April 13th/17 G.S.W neck

L. L. 12767—M. & D. 7390.

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

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
A 486	1/3 Clan Gen, Boulogne	13-4-17	S.W. neck slt
B 341-2	3rd West: Gen Cardiff	15-4-17	G.S. Neck.
B.344	Can. Conv. Bearwood Wokingham	21-4-17	G.S.W. Neck
B 5:	Discharged	31-8-17	G.S.W. Neck Slt 5-10-17
C 16.	Can Conv. Bearwood Wokingham	2-9-17	Syn R Knee
C 21	Disch " "	11-8-18	(Dept) " " "

1925

SURNAME. Bowman

CHRISTIAN NAMES William Watson

REGL. NO. 775243 RANK Pte

UNIT 126th

FORMER CORPS Mil

2 CARD NO. ✕

Bw.

Sol. 11-3-19 FOLL. M.W.

D067-8-3-19-

Bw

NEXT OF KIN.

NAMES IN FULL Bowman Mrs Jennie

RELATIONSHIP TO SOLDIER Mother

ADDRESS 319 St. Clarens Ave., Toronto, Ont.

L.S.A.A.P. 8-8-17

CHANGE OF ADDRESS

COUNTRY OF BIRTH Scotland Dundee DATE Apr 18th 1895

PLACE OF ATTESTATION Toronto. Ont. DATE Jan 17th 1916

O/S 14/8/16 509/3

R/C. 9-2-19 263/21 Pte

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

M. F. W. 22. 250M.—2-16. H. Q. 1772-39-339.

MARRIED SINGLE yes WIDOWER

TRADE OR CALLING Plumber RELIGION Presbyterian

DESCRIPTION.

APPARENT AGE 20. YEARS 10 MONTHS

HEIGHT 5 FEET 7 INCHES

CHEST MEASUREMENT 33 1/2 INCHES EXPANSION 2 INCHES

COMPLEXION Fair EYES Blue HAIR Brown

DISTINGUISHING MARKS Nil

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

Present Address. 425 Lansdowne Ave. Toronto Ont.

LIST OF DISCHARGE DOCUMENTS.

Attestation Paper, Triplicate	Militia Form W. 23
or Particulars of Recruit	Militia Form W. 133
Field Conduct Sheet	Militia Form W. 178 or A.F.B. 122
Casualty Form	Militia Form W. 54 or A.F.B. 103
Last Pay Certificate	Militia Form W. 44
Certificate that missing documents are unobtainable	
Medical History Sheet	Militia Form B. 313 or A.F.B. 178
Proceedings of Medical Board	M.F.B. 227, A.F.B. 179 or A.F.A. 45
Dental History Sheet	Militia Form B. 465
Medical Report	M. F. W. 129 or D. M. S. 1375
Regimental Conduct Sheet	Militia Form B. 263
Company Conduct Sheet	Militia Form B. 263a

2MD2

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

1. No. 775243 — Sa 1-2-19 Ar 8-2-19 S.S. CARMANIA.
2. Rank. Pte.
3. Name. Bowman — William Watson
4. Unit. [illegible] — 18 Bn.
5. Date of Discharge | Place
6. Reason for Discharge. Embarked S.S Carmania Liverpool Feb,1 1919
7. Authority. Embarked S.S. Carmania Halifax Feb 9 1919
8. Proposed Residence after Discharge. Mother Plumber

9. CERTIFICATE TO BE SIGNED BY SOLDIER.

I hereby acknowledge that at the undernoted place and date I received my discharge Certificate M. F. W. ?

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place.....

Date.....

Signature.....
(O. C. Discharging Unit.)

M.F.B. 218a—300M.-11-18—1772-39-113.

"CARMANIA" 8.2.19

B1940 | AUDITOR | PAYMASTER

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

M. OR S. | REGT. No. 775243 | RANK Pte. | NAME (IN FULL) BOWMAN, W.W.

NEXT OF KIN | RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? Yes | DATE EFFECTIVE 1.3.19

TO WHOM PAID Same | RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F. Ca.M.C. | IF IN P.F. WHAT UNIT? | (BLOCK LETTERS, SURNAME FIRST) Dama

PLACE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

DATE OF ATTESTATION 17/1/16 | TRANSFERRED TO | DATE | AUTHORITY

ASSIGNED PAY, $ 20.00 | DATE EFFECTIVE 1.3.19

PAYABLE TO | RELATIONSHIP | ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS Mrs. Jennie Bowman, 718 St. Clarens Ave., Toronto, Ontario.

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE

DISCHARGED Outpatient | PLACE Toronto | DATE 11.3.19 | REASON Mil | AUTHORITY D067 | IF ENTITLED TO POST DISCHARGE PAY 183

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	C.	$	C.	TOTAL CREDITS $	C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	DATE	COL. NO. 2 NO.	DATE	COL. NO. 3 NO.	DATE	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.	$	C.	TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.	PARTICULARS OR REMARKS
Balance from previous account																																				
	31.1.19	$1.10					23	55	23	55	Boat 3/2/19						4	87																		
											"						30	00																		
											" 8/2/19.						5	00																		
																							2000												
																															59	87	36	32	AP. Feb. 19.19.
	1.2.19 28	1.10	30	80	12		42	80	24094								6	48									36	32	42	80					1/2/19 45
	28/2/19																																		SUBS 12/2/19 to 1/2/19 45
	Mar 1-11	11 1.10	12	10	35		100	10 65	157	75	S103188		S103189				117	10					40	65									157	75		
																																			Due Soldier Depend
	183 dys	W.S.G.	420	S.A.	180		600					Date		W.S.G.		S.A.															100		850		150	W.S.G. Paid by #2 D.D.
												Mar 11		70		30																			
												Apr 8	244420	70		30		244421														200		280		120	Ticks Mailed 10-4-19
												May 7	341353	70		30		341354														300		270		90	
												June 5	657683	70		30		657684														400		140		60	
												July 8	677751	70		30		677752														500		70		30	W.S.G. PAID IN FULL
												Aug 1	986944	70		30		985695														600		0		0	CAPTAIN FOR QUARTERMASTER SERVICE GRATUITY
			420		180		600							420		180																600		600			

60m.-11-18. L. L. 81777. M. & D. 9585.

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

MARRIED OR SINGLE: Single

PLACE OF BIRTH: Dundee, Scot.

NAME AND ADDRESS OF NEXT OF KIN: Jennie Bowman, 245 St. Clarens Ave, Toronto, Can

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
A. W. L. from 12.9.17		

ADMISSIONS TO HOSPITAL, &c.

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

6.9

REG'L. No. 775243 RANK Pte NAME Bowman, Wm Watson

IF IN PERMT. CORPS, WHAT UNIT? UNIT 126th Bn

PERMANENT FORCE ALLOWANCES

PLACE OF ATTESTATION Toronto Can

DATE OF ATTESTATION 17/1/16

TRANSFERRED TO 116 Bn DATE 15.10.16 AUTHORITY P.O. 038

TRANSFERRED TO 18th Bn DATE 1.1.17 AUTHORITY B.O. 311 29.12.16

TRANSFERRED TO Worl Regt Depot Woking ham DATE 21/6/17 AUTHORITY C.R. 8340 3/4

TRANSFERRED TO Patients Work D DATE 11/8/17 AUTHORITY O.R. 1/11/17

ASSIGNED PAY MONTHLY $ 20.00 DATE EFFECTIVE 1/9/16 AUG 1 - 1916

PAYABLE TO Jennie Bowman, 245 St. Clarens Ave, Toronto, Can RELATIONSHIP Mother

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

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

DISCHARGE DATE AND PLACE REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

C. 6.9

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
														20 10	20 10																20 10				A/C is payable by A/C Bn. from Aug 6 deduction for pay not made in Aug 1916 Can
Dept	30	1.00	30	00	30	10	3	00							33 00	16	1/9	58	88	15	20/9	1460	487	487		2000		4434	876				Balce from Canada.
Dft.	14	1.00	14	00	14	10	14	0							15 40	14	13/10					243				2000		2243	173				Trans to 116 Bn 15/10/16 Bn 38
"	17		17		17		17	0							18 70	68	57											20	43				
Nov	30	30		30		20		3	-						33 -		31/10									40		22	44	30	99		
Dec	31	31		31		31		3	10						34 10	369	15/11									20		22	86	37	23		Roads Nov 13. 25/- Trans to 18 Bn. eff 1.1.17 B.O. 311. 29/12/16
			17	50											5 of 30																	
Jan	31	1.10.	24	10											34 10	1589	23/12					523				20		25	23	46	10		
Feby	28	1.00/70	30	80											30 80											20		22	62	54	28		
March	31	1.00/70	34	10											34 10	1743	9/-					523	262			20		30	45	54	93		
April	30	1.00	33	-											33 -							261	261			20		22	61	65	32		
May	31	1.00	34	10											34 10								261			20		20	00	82	42		
June	20	1.00	22												22 -											20		20	00	84	42		Trans to 3rd Bn. Regt. Depot 21/6/17 6/18 301. 3/4
			333	30										20 10	353 40							3461	2019	262		200		5625798			98	42		

Checked H. Hutchings

775243 Pte. Bowman W.W.

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
			33	30										20 10	35	40								3461	2019	262		200	~ 56	25	79	8	95	42		
July	31	1/0	34	10											34	10												20 -		20 -	109	52			
Aug	10		11	40											11	-												20		20	100	52			To Workington P. at. with a/c
	31/8	21	23	10											23	10										243 -		240		243	121	19			
Sept		30	33	-											33	-									486 -			20		97	85	56	34			
			434	50										20 10	454	60								1076	2505	505		260	56	398	26				

MONTH	PARTICULARS	CR.1	CR.2	PARTICULARS	DR.1	DR.2	DR.3	DR.4	BALANCE	DEFER. DEP. FED. ALLCE. PAY. ENG.
		56 34							5634	
Oct 1/31	Pay	34 10						20	7044	
		34 10						20		
Nov. 30	Pay	33 00		As Corp.				20		
Dec 31	Pay	34 10		Donald 275 30/5/17 Pte Workington					4 87	
				4 482 27/6 "					4 87	
				" 364 13/6 "					4 87	
				" 189 16/5 "					4 87	
									19 48	
		64 10		As Corp.					19 48	
								20	78 06	
Jan 18				As Corp.				40		
	31 Pay	34 10		DR.				20		
	Sick Furlough 31-8-17 12-9-17 12 days 5 Bal 17. 3/9/17 2 16 2			OR 1369 27/12 ✓					9 73	
		8 16		✓ 1489 24/1 ✓					24 33	
				✓ 1193 31/1 ✓					4 87	
				✓ 1090 13/11/17 Cobbett Bear					4 87	
				✓ 1628 30/10 ✓					4 87	
				- 872 7/10 ✓ work					4 87	
				9442 14/10 ✓ ✓					4 87	
		42 66							58 41	
Feb				As Corp.				20	42 51	
	28 Pay	30 80		OR 1886 24/1/18 Cobbett ✓					4 87	
				IR 2402 5/2/18 Cobbett work					4 87	
		30 80						20	43 57	
									34 10	
March 31	Pay	34 10		As Corp.				20	77 67	
				OR					58 94	
				25478 19/12/18 Cobbett Work					4 87	
				SR.					16 73	
				OR 1638 9/1/18 ✓					4 87	
				OR						
				3809 9/3/18 ✓					4 87	
				3376 5/3 ✓					24 33	
									18 73	
		34 10						20		
					38 94					

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable

ASSIGNED PAY	* ENGLAND OR CANADA.	SEPARATION ALLOWANCE.	* ENGLAND OR CANADA.
EFFECTIVE DATE:- 1/9/16		EFFECTIVE DATE:-	
AMOUNT:- 20^oo.		AMOUNT:-	

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

Jennie Bowman (Mother)
245 St Clarens Ave Toronto Can
DAW
2/16 Complete 18/1/19
11 Stopped Effective 1/5/19

NAME:- BOWMAN. Wm Walson
NUMBER:- 775243

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Pte.

UNIT AND TRANSFERS

ORIGINAL UNIT:- 126th Batt.
DATE ACCOUNT FIRST OPENED 1/9/16

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
N.R.	1/11/17		Alod Pd
177. 28/6/18	1/7/18	83/7/18	ba.M.b.A.-6

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

DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT
16/1/19	3346	Canada £1-0-6	~~4 99~~	Ledger Balance			28 54
				126 Bal	8		23 55

DAILY RATES OF PAY AND ALLOWANCES

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

PARTICULARS OF RENDERING NON-EFFECTIVE: Transit Camp 31/1/9. NRS. 1973 Sc Effy. 4/1/9. Rhyl. MS 702. MD2

MONTH	PARTICULARS	CR 1	CR. 2.	PARTICULARS	DR. 1	DR 2	DR. 3	DR. 4.	BALANCE	DEFERRED	SEPARATION
31/3/18	Brought Forward								18 73		
April	30 PP.	33-		as clear				20			
				AR 76. 3/4/18. Cash Work	4 87						
				AR 506 17/4/18. ✓	4 87						
				- 888 30/4/18 ✓	2 43 -				19 56		
		33 -			12 17			20 -			
May	31 PP	34 10		Cash.				20			
				AR 1451 29/5/18 Cash	5 11				28 55		
		24 10			6 11			20			
June	30 PP.	33		Cash.				20			
				AR 1063 17/6/18 4 Days	7 30				34 25		
		33			7 30			20			
July	Ole Pay	34 10							68 35		
				Cash.				20 -	48 35		
				AR 5812. No 5 69 N. 15/7/18 a3	29 20				19 15		
				DNAR 1249 Cancld. 28/6/18 a11	4 87				14 28		
		34 10			34 07			20 -			
Aug	Ole Pay	34 10							48 35		
				Cash.				20 -	28 35		
				AR 1080 No 5 69 N. 15/8/18 a8	7 30				21 05		
				AR 1272 — " — 29/8/18 a10	4 87				16 21		
		34 10			12 17			20 -			
Sept	Ole Pay	33 -							49 21		
				Cash.				20 -	29 21		
				AR 1436 No 5 69 N 16/9/18 a3	7 30				21 91		
				1518 " 26/7 1/2	9 73				12 18	4/3 3/4	
		33 -			17 03			20 -			
				(Forward)							

NUMBER 775243 RANK Pte NAME BOWMAN W W

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
				-					12 18		
Oct	Cr Pay	34 10		Can.				20 -	26 28		
				OR 1724 No 5697 15/10/18 a 9	7 30				18 98		
				OR 1852 —"— 31/10/18 a 48	4 87				14 11		
		34 10			12 17			20 -			
Nov	Cr Pay	33 -		Can				20 -	27 11		
				OR 1969 No 5697 14/11/18 a 7	7 30				19 81		
				OR 2071 —"— 28/11/18 a 32	4 87				14 94		
					12 17			20 -	29 04		
Dec 1918	Cr Pay	34 10		Can.					14 44		
				OR 2226 No 5697 18/12/18 a 65	14 60						
Jan	Cr Pay	34 10		Can.				20 -	28 54		
		101 20			26 77			60			
				OR 3346 Canada 16/1/19 a 18	4 99				23 55		
		- -			4 99			- -			
					4 99						

Sailing List 13 808 Can 1/2/19

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	Militia Form W. 23	
or		
Particulars of Recruit	"	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.

7025

War Service Badge.
Class A
No. 48153 issued
10-4-31

This space to be for numbers.

IEN

Proceedings on Discharge.

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

B.

No. 775243

Rank Pte.

Surname BOWMAN. WILLIAM WATSON

Christian name

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

Corps (Squadron, Battery or Company) 126th Bn. (#2 D.D.)

Date of discharge March 11th, 1919

Place of discharge TORONTO, ONT.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 23 years ..... months.
Height 5 feet 7 inches.
Complexion Fair
Eyes Blue
Hair Brown
Trade Plumber
Intended place of residence (To be given as fully as practicable.) 318 St. Clarens Ave., Toronto, Ont.

Descriptive marks

Vacc. scars on left arm

G.S.W. Neck.....11-4-17

Deceased 20-11-58

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

HAVING BEEN FOUND MEDICALLY UNFIT FOR SERVICE.

Authority for discharge D.O. D.D. #2 Pt. 11 #67

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.)

LS.

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

(OVER)

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

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

6. Medals and Decorations.....

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

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

(Place).....

(Date).....

.....

Commanding.....

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

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

(Place).....TORONTO, ONT. William Watson Bowman
(Signature of Soldier.)

(Date).....March 11th, 1919 H Sargeant Capt
(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).....
For
O.C. No. 2 District Depot.

(Date).....March 11th, 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.)

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, 775243 Pte Bowman W.W. 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 :—

W W Bowman

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 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.

JEN

Reserved for M.H.C.

Reg. No. 775243 Rank Pte Surname Bowman Christian Name William W

Unit or Corps 18 Batt CEF Left United Kingdom — Joined in United Kingdom C A M C

Born at Town Dundee County or Province Scotland

Date of Birth Day 18 Month April Year 1894 Age 22 yrs 9 mths

Joined at Toronto Canada Date Jan 17- 1916

Former trade or occupation Plumber

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

Mole on Abdomen.

Height 5- 7 Weight Colour of eyes Blue.

Signature of Soldier for identification purposes W W Bowman

Medical Report

(a) Read carefully the instructions on the last page of this form.

DISABILITY

Disabilities, placed in order according to importance, arising from separate groups.

Disabilities Group (a) (i) D.A.H. (ii) Synovitis left Knee

Disabilities Group (b) n a

Disabilities Group (c) n a.

CAUSE OF DISABILITY

(i.) As to Group (a) above. (1) France 1916 (2) England 1916 Stress of Service. (2) Injury while Hospital Patient

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

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

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? no

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

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

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

(i.) As to Group (a) above? (1) yes (2) yes

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

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

PART II. (continued)

5. MEDICAL HISTORY. Family History negative.
Never was strong boy. had Scarlet-fever Measles & has had Bronchitis. On longtime has wounded in neck at Vimy 16. F B - still present. has pains on moving head backwards & sharp pain on Rt side & neck when he swallows. Solids. was on liquid diet 8 months in Hospital for this reason. - Has been able to carry on as Postman for 4 months. Takes Cold very easily has to take care of himself on that account.

6. PRESENT CONDITION. Fairly well nourished. - States he tires easily & heavy work & lifting causes dizziness. pre Cordial pain & palpatation. - Has cough. worse in morning & at night. Has lost weight steadily since discharge from Hosp. Exam: Inspection. Rather thin. - Expansion equal. both sides. Apex beat visible just inside left nipple line. Scar. left side neck below & behind mastoid. no visible deformity except. lump. near occipital Protuberance. Can move neck in any direction. Heart enlarged a little to left. 1st sound at apex roughened. Pulse many and accentuated. Pulse at Rest 78. after it bows 116. Rales at both apices on deep inspiration no difference in V F & V R. Hearing Left Ear diminished Digestive & Genito urinary systems normal. Left Knee. M H S Bearwood 20.9.17. Synovitis - at present some grating under patella. he states knee feels after use he is unable to wear puttees.

7. OPERATION. (i.) Was one performed? no (ii.) If so, state what. n a
(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? no
(ii.) If so, describe. n a.

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

Date of Report Jan 4 1919
Station #3 C G H Liverpool
Signed Ralph B Cox Capt
Officer in medical charge of case.

I have satisfied myself of the general accuracy of the above Report, and concur therein *except
COLONEL C.A.M.C.
OFFICER i/c HOSPITAL
Strike out one of these
Dated at No. 5 CANADIAN GENERAL HOSPITAL LIVERPOOL Station, on Jan 7th 1919
*Delete if inapplicable.

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PART II.

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

10. Is the disability fully described in Part I. (1)? If not, describe it. yes. But Heart is not enlarged. Heart sounds are normal.

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

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

13. THE ENTIRE DISABILITY.—Without regard to his regular occupation, to what extent is his capacity lessened at present for earning a full livelihood in the general market for untrained labour? (*Estimate at none, 5%, 10%, 15%, 20%, etc.*)

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.*)

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

16. If an operation was advised and declined, do you consider the refusal to have been unreasonable? no advised

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

18. REMARKS:— a G I Telegram 9043 of 11-11-18.

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

Date of Board - 6 JAN 1919
Station No. 5 CANADIAN GENERAL HOSPITAL LIVERPOOL
Signatures of the Board: N R Burridge Col. President. S B MacLennan Major C.A.M.C.

Approved
Dated at Station
Walter Ross A.D.M.S.
MAJOR, D.A.D.M.S.
FOR A.D.M.S. CANADIANS
BUXTON AREA.
191

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