FOURTH DIVISIONAL AREA
APR 24 1915
I.D.

No 3 Gtt

# ATTESTATION PAPER.

No. Lt Col

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

## QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name? Henry Brydges Yates.
2. In what Town, Township or Parish, and in what Country were you born? Montreal P.Q. Canada
3. What is the name of your next-of-kin? Alice Mary Yates (wife)
4. What is the address of your next-of-kin? 257 Peel Street Montreal
5. What is the date of your birth? May 10th 1865
6. What is your Trade or Calling? Physician
7. Are you married? Yes
8. Are you willing to be vaccinated or re-vaccinated? Yes
9. Do you now belong to the Active Militia? Yes, A.M.C.
10. Have you ever served in any Military Force? If so, state particulars of former Service. M.O. 3rd Regt Victoria Rifles of Canada
11. Do you understand the nature and terms of your engagement? Yes as an officer
12. Are you willing ~~to be attested~~ to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE? Yes

A B Yates (Signature ~~of Man~~).

R H Malone (Signature of Witness).

No. 3 GENERAL HOSPITAL (McGILL)
C. E. F.
APR 21 1915
ORDERLY ROOM

## DECLARATION TO BE MADE BY MAN ON ATTESTATION.

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

A B Yates (Signature ~~of Recruit~~)

Date April 10 1915 R H Malone (Signature of Witness)

## OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Henry Brydges Yates, 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.

A B Yates (Signature ~~of Recruit~~)

Date 21st April 1915 C H Gould (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 Montreal this 21st day of April 1915

C H Gould J.P. (Signature of Justice)

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

A. C. P. Howard Major (Approving Officer)

M. F. W. 23.
150 M.—12-14.
H.Q. 1772-39-841.

# Description of Henry Bridges Yates on Enlistment.

Apparent Age 19 years ..... months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height ..... 5 ft. 10 ins.

Chest measurement. Girth when fully expanded ..... 38 ins.
Range of expansion ..... 4 ins.

Complexion ..... fair
Eyes ..... blue
Hair ..... grey

Religious denominations.
Church of England ..... 1
Presbyterian .....
Wesleyan .....
Baptist or Congregationalist .....
Other Protestants ..... (Denomination to be stated.)
Roman Catholic .....
Jewish .....

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).

Warts in both armpits
Pigmented mole just above rt. antecubital fossa.

## 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 April 10th 1915. ..... R.H. Malone

Place Montreal ..... 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.

Henry Bridges Yates 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.

H.D. Burnett (Signature of Officer)
Colonel

Date 21 April 1915

...ngs of Court of Inquiry or on men
...reported Missing on Active Service.....
Attestation Papers..... 16
Declaration of change of name.....
Authority for special enlistments.....
Documents of re-enlisted men.....
Regimental Conduct Sheet.....
Compulsory Stoppages.....
Casualty Forms..... 1
Proceedings on discharge.....
Corps History Sheet.....
Date and No. of Deposit Receipt for Purchase Money and Amount.....
Parchment Certificate.....
Medical Report for Invalids.....
Medical History Sheet..... 2
Proceedings of Regt. Court Martial.....
Copies of Convictions by Civil Power.....
Company Conduct Sheet.....
Clothing Transfer Certificate.....
Inventory of Kit.....
...st Pay Certificate.....

a.f.a. 45-1
Misc - 1
1 R 149
1 Car Card

M. F. W. 62.
50M.-9-16.
H. Q. 1772-39-935.

DISCHA... DOCUMENTS

R. O. No.....
H. Q. No.....

Name YATES HENRY BRIDGES.

Regt. No. — Rank Lt/Col

Corps #3. Can. Gen. Hosp.

Died of S. 22-1-16.

C0301

PERSONNEL
RECORDS CENTRE
CENTRE des
DOCUMENTS du PERSONNEL

Box 10630

1-27
1-27

| I.D. number<br>No. d'identification | Surname<br>Nom de famille | Given names<br>Prénoms |
|---|---|---|
| LT./COL. | YATES | HENRY BRYDGES |

OPEN

dec'd 22/01/16

# PERSONNEL RECORDS CENTRE
# CENTRE DES DOCUMENTS DU PERSONNEL

**Location**
**Lieu** 10630

Number

Rank Lt. Can. B

Surname Yates

Christian Name Henry, Brydges

Units

Theatre of War England

Date of Service 6-5-15

Remarks (W) Mrs. Alice Mary Yates.

Latest Address C/o Bank of Montreal,
Peel St.
Montreal.
P.Q.

Roll No. A Page 3872

200m.-2-21.M.

REGT. NO. ..... RANK ..... NAME .....

UNIT ..... AGE ..... SERIAL NO. IN A. AND D.

TOTAL SERVICE WHERE AND HOW LONG ..... DATE AND PLACE OF ORI

DISEASE OR INJURY .....

OPERATIONS .....

RESULT OF OPERATIONS .....

(A) DATE OF ARRIVAL AT HOSPITAL AS AN ADMISSION .....

(B) AS A TRANSFER (STATE WHERE FROM) NAME OF HOSPITAL .....

DATE OF DISCHARGE TO UNIT ..... IN CA

DATE OF DISCHARGE AS AN INVALID .....

DATE OF DEATH .....

DATE OF TRANSFER (STATE WHERE TO) NAME OF HOSPITAL .....

OTHER INDEPENDENT CONDITIONS DIAGNOSED .....

APR 11 1928

Scroll Desp. JUL 9 1921 Regn. No. 2.49739 M H.A.Q

Plague Desp. APR 28 1922 Regn. No. P.364/64

YATES, Henry Brydges, Lieut. Col. C.A.M.C. 3rd Can Gen Hosp

MEDALS & DECORATIONS — Mrs. Alice Mary Yates (Widow) c/o Bank of Montreal, Peel St., Montreal, P. Q.

PLAQUE & SCROLL — Widow, as above.

(Ser# 784412)

MEMORIAL CROSS — Widow, as above. Mother, predeceased.

S.R

Elig for 1914-15 Star Lt-Col 3rd Can Gen Hosp C.A.M.C.

" " V.M.

" " B.W.M.

47154

MAS

W/44958

FEB 11 1927

1068

SURNAME. Yates. 3542-1.

CARD NO.

FOLL.

CHRISTIAN NAMES Henry Brydges.

REGL. NO. Lt-Col. RANK

UNIT 3. Gen Hosp. (McGill.)

FORMER CORPS 3rd Regt.

M

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL Yates, Mrs Alice Mary.

RELATIONSHIP TO SOLDIER

ADDRESS ~~257. Peel St, Montreal. P.Q.~~

Metis Beach. P.Q.

Letter 6/8/18. 3542-1.

COUNTRY OF BIRTH Canada Montreal. P.Q. DATE

PLACE OF ATTESTATION Montreal. P.Q. DATE April 21st 1915.

L. L. 94504. M. & D. 6512. Of $. 6-5-15. 69/3.

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

MARRIED yes. SINGLE WIDOWER

TRADE OR CALLING RELIGION

## DESCRIPTION.

APPARENT AGE YEARS MONTHS

HEIGHT FEET INCHES

CHEST MEASUREMENT INCHES EXPANSION INCHES

COMPLEXION EYES HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE DATE

H. Q. FILE No. 649-

NAME Yates. Henry Bryages REGT'L. No.

RANK AND CORPS Lt. Col C. A. M. C. 3rd C. G. H. NO. 19

ROLL

| CABLE NO. | CABLE DATE | NATURE OF CASUALTY |
|---|---|---|
| M. 3281 | 14-1-16 | Seriously Ill at Granville Special Hosp. Ramsgate Jan 14th 1916. Bronchitis. |
| MW3447 | 22-1-16 | With ref. to my telegram Jan 14. MW 3281. Died Granville Can. Special Hosp. Ramsgate Jan 22nd. (Brights disease Cardiac Failure.) |

L. L. Job 86907- -M. & D. 16065.

M. F. W. 42—50m.-10-15.
H. Q. 1772—39-893.

| LIST No. | HOSPITAL | DATE OF ADMISSION | REMARKS |
|---|---|---|---|
| 218 (1) | No. 3. Can Con. Camiers | 13-11-15 | Gastritis. Risk. slight. |
| 218 | Lady Meyrells Hosp Lennox Gardens. W | 22-11-15 | Bronchitis |
| 233 | Med Board. | 7-12-15 | Two months leave. Bronchitis |
| 250 (1) | Grand Can Spec. Ramsgate | 27-12-15 | Bronchitis |
| 261 | Grand Can Spec Ramsgate | 14-1-16 | Bronchitis. Seriously Ill. |
| 268 (1) | " " " " | | Died 22-1-16. Brights Disease, Cardiac failure |

Yates. H. B.

Lt-Col. 3rd.CGH. C.A.M.C.

No. 3. Can. Gen. Camiers. 13-11-15.

Lady Meynells. 8 Lennox Gdns. 22-11-15.
Granville Spe. Ramsgate. 14-1-16.

Gastritis. slt. sick.

Bronchitis. ser. ill.).

2 mts. leave. 7-12-15.

DIED OF BRIGHT'S DISEASE &
CARDIAC FAILURE:- 21-1-16

C.L. 19-11-15. 215.
25-11-15. 218.
10-12-15. 233.
14-1-16. 261.
22-1-16. 268.
31-12-15. 250.

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

Surname Christian Name Reg. No.

Rank Unit

**MEDICAL BOARD** held at Date Serial No.

(1)

Other Medical Boards at Date Serial No.

(2)

(3)

(4)

(5)

Condition found by Board

Disposition Recommended

(1)

(2)

(3)

(4)

(5)

**PENSIONS & CLAIMS BOARD** held at Date.....

Disposition

Remarks

Indicate by a P.T.O. if continued on other side.

H. W. & V., Ld.—3-94-15.

125.

OFFICER i/c RECORDS

CONFIDENTIAL.

Army Form A. 45.

# PROCEEDINGS OF A MEDICAL BOARD

assembled at London. on Dec.6/1915.

by order of D.M.S. Canadians.

for the purpose of examining and reporting upon the present state of health of

(Rank and Name) Lt.Col. H.B. YATES. (Corps) C.A.M.C.

Age 50. Service 18 yrs. Disability Bronchitis.

Date of commencement of leave granted for present disability ~~Nov.12~~ Dec 6th/1915.

Date on which placed on half-pay for present disability

The Board having assembled pursuant to order, and having read the instructions on the back of the form, proceed to examine the above-named officer and find that this Officer contracted bronchitis while on Service in France. He was sent to Lady Meynell's Hospital and from there by Colonel Woodward to the Rookeries, Hendon. He has still much difficulty in breathing and complains of pain about the heart.

I concur in the findings of the Board of Medical Officers here recorded.

7-12-15

Major, C.A.M.C.
For D.M.S.
Canadian Contingents.

The opinion of the Board upon the questions herein is as follows:—

(1.) *a.* Is the officer fit for "General Service"? No.

*b.* If not so fit, how long is he likely to be unfit? Six weeks.

(2.) *a.* *If unfit for General Service, is he fit for any service at home?* No.

*b.* *If not so fit, how long is he likely to be unfit for any service at home?* Six weeks.

(3.) Was the disability contracted in the service? Yes.

(4.) Was it contracted under circumstances over which he had no control? Yes.

(5.) Was it caused by military service? Yes.

(6.) If caused by military service, to what specific conditions is it attributed? Exposure to cold and wet.

Signatures (Sd) R.RAIKES, Major, C.A.M.C. President.

" C.E.DOHERTY. Maj. C.A.M.C. Members.

(8 27 21) W 12286-2164 150,000 2/15 H W V(P) Forms A. 45 24

[P.T.O.

## Instructions.

1. On the occasion of an Officer's first appearance before a Medical Board for his present disability, the circumstances under which the disability was contracted will be fully detailed; whenever possible a statement of the case by his medical attendant will also be attached.

2. In recording the proceedings of subsequent Boards, the progress of the individual since his last appearance will be clearly and concisely stated so as to ensure a continuous medical history of the case being available.

3. Question 2 is only to be answered by the Board, when specially instructed by the convening authority.

4. Enteric Fever, Dysentery, Malaria, etc., contracted when on service abroad, in countries where there is a special liability to the disease, are to be regarded as caused by military service.

ORIGINAL. OFFICER

# MEDICAL HISTORY SHEET.

Surname Lt Col Yates Christian Name Henry Brydges

Examined on 10th day of April 1915 at Montreal

Birthplace City or Town Montreal County Hochelaga County P.Q.

Apparent age

Trade or occupation Physician

Height 5 Feet 10 Inches.

Weight 225 Lbs.

Chest measurement Minimum 44 inches. Maximum expansion 48 inches.

Physical development Good.

Small-Pox Marks nil

Vaccination Marks Arm Right. Left. ✓ Number 2

When Vaccinated last 1898

(a) Marks indicating congenital peculiarities or previous disease none

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

Approved by R H Malone

Rank Capt. M.O.

4 JAN 1916

| Date | Fit or Unfit | Examined for Re-engagement, |
|---|---|---|
| | | M.O. |
| | | M.O. |
| | | M.O. |
| | | M.O. |
| | | M.O. |
| | | M.O. |
| | | M.O. |

No 3 CANADIAN GENERAL HOSPITAL (McGILL) B.E.F. JUL 20 ORDERLY ROOM

| Date | Result | Vaccinations. |
|---|---|---|
| 24/4/15 | | M.O. |
| | | M.O. |
| | | M.O. |

| Date | Result | Anti-Typhoid Inoculations, Etc. |
|---|---|---|
| 7/4/15 | | L H McKim M.O. |
| 17/4/15 | | L H McKim M.O. |
| 27/4/15 | | L H McKim M.O. |

Enlisted on 21st day of April 1915 at Montreal

| | Corps. | Regt'l Number. | Habits. | Date. |
|---|---|---|---|---|
| Joined on enlistment | No 3 General Hospital | Lt Col | | |
| Transferred to.. ..... | | | | |

## EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

| Station. | Date. | Disease. | Result. |
|---|---|---|---|
| | | | |

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

This Medical History Sheet has been compared with the Corresponding Attestation Paper, and entries made in red have been taken from the Attestation Paper.

W.R.WARD,
Colonel in Charge of Records,
Canadian Contingents.

M. F. B. 313.
50M—9-14.
H. Q. 1772-39-439.

The Medical History Sheets of all men proceeding overseas, must be returned by the Officer commanding their unit to the Record Office when they leave England.

W.R.WARD, Colonel in Charge of Records, Canadian Contingents, London.

The Medical History Sheets of all men proceeding overseas, must be returned by the Officer commanding their unit to the Record Office when they leave England.

Lieut.-Col. In Charge of Records, Canadian Contingent.

Surname Yates Christian Name Henry Bryd Jes

| STATION. | Date of Arrival at the Station. | Dates of Admission into Hospital. Day | Month | Year | 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. |
|---|---|---|---|---|---|---|---|---|---|---|---|
| Meynell Hos. Lennon Gdns. | | 22. | Nov: | 1915 | 24 | Nov | 1915 | Bronchitis | 2. | Colonel Yates was admitted on Nov. 22/15 & was discharged on the 24th. with the knowledge of the Officials at Millbank to. Hugh Allen Esqre Stanmore Middlesex – | C. M. Anderson Mtd. |
| | | 26 | 12 | 15 | 22 | 1 | 16 | 1 | 27 | Died 2.45 a.m. Jan 22d 1916 | |

GRANVILLE CANADIAN SPECIAL HOSPITAL 1 FEB 1916 RAMSGATE

Duplicate Medical History Sheet posted to here. Medical Registrar Record Office.

Capt. & Registrar, GRANVILLE CANADIAN SPECIAL HOSPITAL, RAMSGATE.

Duplicate Medical History Sheet posted to here. Medical Registrar Record Office.

(9178)—Wt. W12165—2146.—1,250,000.—2-15.—C. & G. Forms B. 103/1.

**Army Form B. 103.**

5007 49

No. 3 CANADIAN GENERAL HOSPITAL (McGILL) C. E. F. JUN 14 1915 ORDERLY ROOM

## Casualty Form—Active Service.

Regiment or Corps No. 3 Canadian General Hospital.

Regimental No. _____ Rank Lt.-Col. Name Yates, Henry Bridges.

Enlisted (*a*) 21-4-15 Terms of Service (*a*) C.E.F. Service reckons from (*a*) 21-4-15.

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. 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. |
|---|---|---|---|---|---|
| 6-2-21 | | | | | |
| 13.11.15 | 06 Unit | Gastritis admitted | Dannes | 13.11.15 | W 3034 |
| 22.11.15 | Do | Gastro Enteritis & Bronchitis transferred to Eng | " | 22.11.15 | W 3034 T/o 10 A |
| 22.11.15 | 06 H.S. Stad Antwerpen | Bronchitis admitted for transfer to England | H.S. Stad Antwerpen | 22.11.15 | A 36. 06 Sheet 198 26/11/15 Pt II orders 25 d/25.12.15. |

A.M. Shaw
Capt R.A.M.C.
for Lt Col. D.A.A.G.

(*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 | | | | |
| 2[illegible] 1.16 | Tel | Died (Granville Can. Special Hosp. Ramsgate) | | 22.1.16 | CL 268 |

[illegible] Major
~~CAPT~~
FOR ABST MIL SEC EN

38391 THE MORTIMER SYSTEMS, OTTAWA, CANADA

20-4-15

(To the credit of)

90

MILITIA AND DEFENCE

# SEPARATION ALLOWANCE

Mrs

Name Alice M. Yates

Address c/o Bank of Montreal
Peel St Branch
Montreal Que.

Name of Soldier Yates, H. B.

Regtl. No.

Rank Lt. Col.

Corps #3 Gen'l Hosp'l.

Relation to Soldier wife, child or mother } Wife

To what Corps belonging when called out }

## PAYMENTS

| Month | Year | Cheque No. | Amt. | REMARKS |
|---|---|---|---|---|
| Aug. | 1914 | | | |
| Sept. | | | | |
| Oct. | | | | |
| Nov. | | | | |
| Dec. | | | | |
| Jan. | 1915 | | | |
| Feb. | | | | |
| March | | | | |
| Apl. | | | | |
| May | G | 10,343 ✓ | 82 — | 82 ✓ |
| June | | N 823 | 60 | 60 |
| July | | O 1073 | 60 — | 60 |
| Aug. | | F 14171 | 60 | 60 |
| Sept. | | J 11033 | 60 | 60 |
| Oct. | | J 13416 | 60 — | 60 |
| Nov. | | N 12692 | 60 — | 60 |
| Dec. | cancelled M | ~~16228~~ | ~~60~~ | 60 |
| Jan. | 1916 | H 21069 G 26687 | 60 — | 60 |
| Feb. | ✓ | N 24644 | 60 | 60 |
| March | | J 28716 | 60 | 60 |

582

ACCOUNT CLOSED
DATE JUN 19 1916 PER W.

8.52 next Sheet

Dist of Brights Disease 22/1/16 (3542-1)
Pension Granted - 23/1/16
Acct: Closed - [illegible]

MILITIA AND DEFENCE

# SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 11a.
60m.—12-15.
1772—39—818.

L. L. Job 89002.—Req. 6213.

Sheet No. 2 Bank of Montreal Wife. Name of Soldier Yates H. B.

Br of Mr Alice M. Yates. Lt Col.

| Month. | Year. | Cheque No. | Amt. | | Remarks. |
|---|---|---|---|---|---|
| April | 1916 | O, 4335 | 60 | 60 | |
| May | | Brt forwd. | 682 | 60 | Pension Granted - 23/1/16 |
| June | | | 742 | | |
| July | | | | | |
| Aug. | | | | | Acct Closed - |
| Sept. | | | | | |
| Oct. | | | | | |
| Nov. | | | | | |
| Dec. | | | | | |
| Jan. | 1917 | | | | |
| Feb. | | | | | |
| March | | | | | |
| April | | | | | |
| May | | | | | |
| June | | | | | |
| July | | | | | |
| Aug. | | | | | |
| Sept. | | | | | |
| Oct. | | | | | |
| Nov. | | | | | |
| Dec. | | | | | |
| Jan. | 1918 | | | | |
| Feb. | | | | | |
| March | | | | | |
| April | | | | | |
| May | | | | | |
| June | | | | | |
| July | | | | | |

ACCOUNT CLOSED

DATE JUN 19 1916 PER W

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. | | | | |

# POST DISCHARGE PAY OFFICE

**Three months pay and allowances after discharge.**

Name

Surname Christian Name

Regimental Number Rank

Unit

Original Unit

District where paid

Date of Discharge

P. D. P. Filing Number

Address (in full)

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

L.L. 53961—M. & D. 9721

| | Total Credits 91 days | FIRST PAYMENT | | | SECOND PAYMENT | | | FINAL PAYMENT | | | Balance Overpayments to be Recovered | Total Amount Paid |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | Cheque No. A | Date | Amount 30 days | Cheque No. B | Date | Amount 30 days | Cheque No. C | Date | Amount 31 days | | |
| | | | | | | | | | | | | |

M. F. W. 127
300M-1-19
1772-39-1140

Remarks:

Register No. D469

# WAR SERVICE GRATUITY
## TO
## DEPENDENTS OF DECEASED SOLDIERS

A.P. File No. 1955, H. 1

Regt'l No. ..... Name Henry Brydges Yates
(Christian Name) (Surname)

Unit C.A.M.C. Rank Lt-Col. Date of enlistment .....

Date of casualty 22/1/16 B.P.C. File No. 4238

Was service performed overseas ? Yes

### DEPENDENT

Name Mrs. Alice Mary Yates Relationship Widow

Address Bank of Montreal
Peel Street
Montreal, P.Q.

Amount of Special Pension Bonus $ 208.00 Abstracted by J Leclair

M.F.W. 2652
25M—6-20.
H.Q. 1772—69-1473

| | | |
|---|---|---|
| Eligible for Gratuity | $ | 360.00 |
| Less amount of Special Pension Bonus paid | $ | 208.00 |
| Less Debit Balance of S. A. or A.P. | $ | |
| Total deductions | $ | 208.00 |
| Balance due | $ | 152.00 |

Cheque No. G.190210 Date issued 27/8/20

Clerk J North

REMARKS :

Audited by
Scott Howard
Date 25.8.20

$152

L. L. Job 70481—Req. 5220.

188

M. F. W. 12.
10m. 11-14.
H. Q. 1772-39-819.

MILITIA AND DEFENCE

# ASSIGNED PAY

OVERSEAS CONTINGENTS

To Whom Mrs Alice M. Yates

Address c/o Bank of Montreal
Peel St. Branch.
Montreal, P.Q.

MAY 1 1915

Rate $75.00

By Whom Assigned Yates A.B.

Regtl. No.

Rank Lieut Colonel

Corps #3 General Hospital

## PAYMENTS

| Month | Year | Cheque No. | Amt. | REMARKS |
|---|---|---|---|---|
| Aug. | 1914 | | | Casualties |
| Sept. | | | | |
| Oct. | | | | |
| Nov. | | | | |
| Dec. | | | | |
| Jan. | 1915 | | | |
| Feb. | | | | |
| March | | | | |
| April | | | | |
| May | | M 978 | 75— | |
| June | | P.2213 | 75— | |
| July | | 0875 | 75 | |
| Aug. | | S3852 | 75— | |
| Sept. | | M6616 | 75— | |
| Oct. | | 07821 | 75— | |
| Nov. | | Q9486 | 75 | Pension granted from Jan. 23/16 |
| Dec. | 2 | S88823 | 75 | |
| Jan. | Cancelled 1916 | U11561 | 75 | Acct closed Died Jan 22 - C. L Jan 24 |
| Feb. | | | | |
| March | | | 600 | |

NAME Yates. H. B. Lt. Col.

DATE OF APPOINTMENT Montreal April 10. 15. (2/4/15). R.E. 98. 81.

MARRIED (YES ~~OR NO~~)

NEXT OF KIN:— NAME Wife. Alice M. Yates

ADDRESS 257 Peel St. Montreal.

DATE NON-EFFECTIVE AND CAUSE 22.1.1916. C.L. 268 (Brights disease) Deceased 22/1/16 C.L. 268.

UNIT 3 General. Hospital

ASSIGNED PAY:—

MONTHLY AMOUNT 75.00

TO WHOM PAYABLE Mrs. A. M. Yates BK. of Montreal Peel St. Branch. Montreal. Que.

BANK IN WHICH PAY & ALLOWANCES DEPOSITED Bank of Montreal.

| PERIOD From 1915 | PERIOD To | No. of Days | Regtl. Rate | PAY Amount of Regimental | PAY Command | PAY Adjutant | PAY Cr. from Prev. Account | PAY Total Pay | Rate of Field Allowance | ALLOWANCES Amount of Field Allowance | ALLOWANCES P. F. Allowance | ALLOWANCES Messing | ALLOWANCES Subsistence | ALLOWANCES Total | Total Pay and Allowances | Assigned Pay | Sundry Deductions | Net P. A. | ~~Paid in Cash~~ Balance | Deposited in Bank | Carried Forward | Remarks |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1/5 | 31/5 | 31 | 5 | 155 | | | | 155 | 1 25 | 38 75 | | 16 | | 54 75 | 209 75 | 75 | | 134 75 | | 134 75 | | |
| 1/6 | 30/6 | 30 | 5 | 150 | | | | 150 | | 37 50 | | 30 | | 67 50 | 217 50 | 75 | | 142 50 | | 142 50 | | |
| 1/7 | 31/7 | 31 | | 155 | | | | 155 | | 38 75 | | 31 | | 69 75 | 224 75 | 75 | | 149 75 | | 149 75 | | |
| 1/8 | 31/8 | 31 | | 155 | | | | 155 | | 38 75 | | 31 | | 69 75 | 224 75 | 75 | | 149 75 Total debits | | 149 75 | | |
| 1/9 | 30/9 | 30 | | 150 | | | | 150 | | 37 50 | | 30 | | 67 50 | 217 50 | 75 | | 75 | ~~142 50~~ | 142 50 | | |
| 1/10 | 31/10 | 31 | | 155 | | | | 155 | | 38 75 | | 31 | | 69 75 | 224 75 | 75 | | 75 | ~~149 75~~ | 149 75 | | |
| 1/11 | 30/11 | 30 | | 150 | | | | 150 | | 37 50 | | 30 | | 67 50 | 217 50 | 75 | | | | 142 50 | | |
| 1/12 | 31/12 | 31 | | 155 | | | | 155 | | 38 75 | | 31 | | 69 75 | 224 75 | 75 | | | | 149 75 | | |
| 1/1 | 31/1/16 | | | 155 | | | | 155 | | 38 75 | | 31 | | 69 75 | 224 75 | 75 | | | | 149 75 | | |
| | | | | | | | | | | | | | | | | S.P.F. 4/2/16. for Feb 1916. v# 2754. | | | | 1311 00 | | |
| | | | | | | | | | | | | | | | | 675 | | | | | | |

28 SEP 1915

## SUNDRY PAYMENTS

| DATE | CHEQUE No. | PARTICULARS | AMOUNT $ | C. | £ | S. | D. | REMARKS |
|---|---|---|---|---|---|---|---|---|
| 5 21 | 1436 | Outfit all | 100 | | 20 | 10 | 11 | |

276 days @ 6.25 1725.00
261 " messing 261.00 1986.00

A Pay 675.00
Deposits 1311.00 1986.00

P—15.

ASSIGNED PAY. UNIT. 3 Gen Hospital RANK. Lt. Col NAME. ✓

| NAME OF | DATE | AUTHORITY | | DATE | AUTHORITY |
|---|---|---|---|---|---|
| | | | | | |

Beneficiary

Address

Amount. $

Separation Allowance issued. Yes or No..... Died (Brights disease) 22 1/16 Ch. 268

Name Yates

Initials H.B.

Bank

| DATE | No. OF DAYS | REGT RATE | AMOUNT REGIMENTAL | PARTICULARS F.A. | MESSING | OTHER CREDITS | CK. NO. TOTAL | CR. ASS PAY | DR. CHARGES | ASSIGNED PAY PAID IN CANADA DR. BALANCE | CREDIT BALANCE | SPECIAL AUTHORITIES To be initialled by P.M. in every case. BANK | INITIALS. |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1. 5. 15 / 31. 5. 15 | 31. | $5 Pay $125 FA $1. Mess. | 155 | 38 75 | 16 | | 209 75 | 75 | | | | 134 75 | |
| 1. 6 15 / 30 6 15 | 30 | | 150 | 37 50 | 30 | | 217 50 | 75 | | | | 142 50 | |
| 1. 7. 15 / 31. 7. 15 | 31. | | 155 | 38 75 | 31. | | 224 75 | 75 | | | | 149 75 | |
| 1. 8. 15 / 31. 8. 15 | 31. | | 155 | 38 75 | 31. | | 224 75 | 75 | | | | 149 75 | |
| 1. 9. 15 / 30. 9. 15 | 30 | | 150 | 37 50 | 30. | | 217 50 | 75 | | | | 142 50 | |
| 1. 10. 15 / 31. 10 15 | 31. | | 155 | 38 75 | 31. | | 224 75 | 75 | | | | 149 75 | |
| 1. 11 15 / 30 11 15 | 30. | | 150 | 37 50 | 30 | | 217 50 | 75 | | | | 142 50 | |
| 1. 12. 15 / 31. 12. 15 | 31. | | 155 | 38 75 | 31. | | 224 75 | 75 | | | | 149 75 | |
| 1. 1. 16 / 31. 1. 16 | 31. | | 155 | 38 75 | 31. | | 224 75 | 75 | | | | 149 75 | Nil Bal Trans to Ottawa 16/10/16 |
| | | | 1380 | 34500 | 261 | | | 675 | | | | 13 11 — | |

P.M. Bch. August/18. ① 75 — ⊗ 75 — 75 — [illegible]

Sept/18.

① A P overchgd Jan/16 OH. Obs Y-150. see OH SA + A P letter d/28 5/18 on file 9-Y-8. Vo 120. A.P. Can.

⊗ Trans to Ottawa List 163 - Vo 2476

Amended a/c Rendered 22 8/18. Cr. Balce $75.00

Statement of OCT 4 1916 Account rendered

A.F.B. 20909 A.F.B. 104-9

*Name* Yates, H.B. *Rank* Lt.Col. *Reg. No.*

*Unit* 3rd.C[illegible].Hos. C.A.M.C.

*Next of Kin* Canada

Mrs. Alice M. Yates, Bank of Montreal, Waterloo Place S.W.

| Date 1915 | Movement | Place | Casualty | List No. | Notified N/K O. | W.O. List |
|---|---|---|---|---|---|---|
| 13.11 | 3rd. Can .Gen.Hosp.Camiers ✓ | | Gastritis Sick, slt. | 215 | | |
| 22.11 | Lady Meynell's Hos. 8 Lennox Gdns. W. ✓ | | Bronchitis | 218 | | |
| 7 12 | Med. Bd. 2 mths. leave | | – | 233 | | |
| 27 12 | Granville Can. Spec. Hosp. Ramsgate | | – | 250 | | |
| | Seriously Ill 14-1-16 | | – | 261 | M 3281 | |
| 22-1-16 | DIED | | | 268 | M 3417 24/1 | |
| | | | | | C 4251 | |

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

Rank Lt. Col. Name YATES, Henry Brydges ✓ Reg'l No.

Unit No3 Genl.Hospl. If in perm. Corps, What Unit? Married or Single Married

Place and Date of Enlistment Place of Birth Montreal, P.Q.Canada

Name and Address, Next-of-Kin Alice Mary Yates

257. Peel Street. Montreal. Canada. Relationship Wife

Verbal from Casualty Branch c/o Bank of Montreal Waterloo Place London W.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

Left Canada 6th May 1915.

A.F.B. 158.
1 AUG 1915
SEP 1915
OCT 1 1915
DEC 2 1915
JAN 1 1916

A.F.B. 103

| 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 |
|---|---|---|---|---|---|
| 5/1/16 | Dms. | Invalided Transfd To England. | | 22/11/15. | C.L.218. CO 27 (Pt II ord 25 39/Hosp.) Sick Sl. |
| 19/11/15. | W.O. 17/11. | Admitted #3 Genl. Hosp'l | Camiers. | 13/11/15. | C.L. 215 (Gastritis) |
| 27/11/15. | Med Bd. Ret. | Discharged from Hosp | | 24/11/15 | RL 89-2. |
| 6/12/15 | -Do- | Unfit for any service for 6 weeks. | | | RL 9-Y-8. Address, The Rookeries Hendon (RL 89-2) |
| 10/12/15. | Med. Bd. Ret. | "Two months leave" | | 7/12/15. | C.L. 233. Bronchitis. |
| 31/12/15 | HR. 27/12. | Admitted Granville Spec Hosp Seriously ill — | Ramsgate | 14/1/16. 27/12/15. | C.L. 261 CL 250 (Bronchitis). |
| 22/1/16. | Tel. | Died. (Granville Spec Hosp | Ramsgate) | 22/1/16. | C.L. 268. ~~Imscord~~ RL 9-Y-8 Brights Disease. Cardiac failure. Pt II O 27. Cam Ct. Pt II O 57 Cam Ct. |

| Report | | Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case. | Place | Date | REMARKS Taken from Official Documents |
|---|---|---|---|---|---|
| Date | From whom received | | | | |

● OFFICER

~~509.~~ Lt. Col.

DUPLICATE

Army Form B. 178.

**To be used for recruits enlisting direct into the Regular Army only. Army Form B. 178[A] to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.**

# MEDICAL HISTORY of

*Surname* YATES *Christian Name* Henry Bryoges.

TABLE I.—GENERAL TABLE.

Birthplace ... Parish Montreal County Hochelaho County, P.Q.

Examined ... ... on 10th day of April 1915.
at Montreal

Declared Age ... ... years days.

Trade or Occupation ... Plysician

Height ... ... ... 5 feet, 10 inches.

Weight ... ... ... 225 lbs.

Chest Measurement — Girth when fully Expanded. 48 inches.

Chest Measurement — Range of Expansion 4 inches.

Physical Development ... Good

Vaccination Marks — Arm ... Right Left

Vaccination Marks — Number 2

When Vaccinated ... ... 1898

Vision ... ... ... R.E.—V=
L.E.—V=

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

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

Approved by (*Signature*) R.H. Malone

(*Rank*) Capt.
*Medical Officer.*

Enlisted ... ... ... at Montreal
on 21st day of April 191 5

| Joined on Enlistment ... | Corps. | Regtl. No. |
|---|---|---|
| | No.3. General Hospital | Lt.Col. |
| Transferred to ... ... | | |

Became non-effective by

on day of 191 .

(*Signature*)

(*Rank*)

2966. Wt. W8005/2748. 300,000. 8/15. D. D. & L.

[P.T.O.

## Table II.—Only for Admissions to Hospital or to the Sick List in the

| Name of Hospital. | Admitted to Hospital | | | Discharged from Hospital | | | Disease | Number of Days in Hospital | Remarks bearing on the use. In cases of subsequent progre given in the speci |
|---|---|---|---|---|---|---|---|---|---|
| | Day | Month | Year | Day | Month | Year | | | |
| Meynell Hosp. Lennox Gdns. | 22 | 11 | 15 | 24 | 11 | 15 | Bronchitis. | 2. | Colonel Yates was discharge Officials at |
| Granville Can. Hosp. Ramsgate | 26 | 12 | 15 | 22 | 1 | 16 | " | 27 | Died 2.45 |

**o the Sick List in the case of Warrant Officers treated in quarters.**

| 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 must 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. |
|---|---|---|
| 2. | Colonel Yates, was admitted on November 22nd.1915. and was discharged on the 24th, with the knowledge of the Officials at Millbank to. - Hugh Allen. Esqr. Stanmore, Middlesex. | C.M.Anderson. M.D. |
| 27 | Died 2.45 A.M. Jan 22rd 1916. | Nelson G.Cooper Capt. |

## Table III.—Boards; Courts of Inquiry, 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. |
|---|---|
| 24.4.15. | Vaccinated. |
| 7.4.15. | Anti-Typhoid Inoculation. L.H.Mc.Kim. |
| 17.4.15. | do. do. |
| 27.4.15. | do. do. |
| | |
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## Table IV.—Service Table.

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