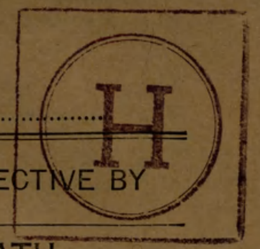
C.E.F. REGIMENTAL DOCUMENTS

NAME BROWN JOSEPH H. REGT. No. 488746 UNIT 13 BN H. Q. FILE No. 44913



CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
ATTESTATION PAPER (M.F.W. 23, 133 or 51)					DEATH
CASUALTY FORM (M.F.W. 54 or A.F.B. 100)					CATEGORY
TRAINING HISTORY SHEET (M.F.W. 115)					
FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
REGT. CONDUCT SHEET (M.B.W. 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. 171)					DISCHARGE
DENTAL HISTORY SHEET (M.F.B. 465)					CATEGORY
MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					M.U.
MEDICAL EXAMINATION (M.F.W. 129)					
TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
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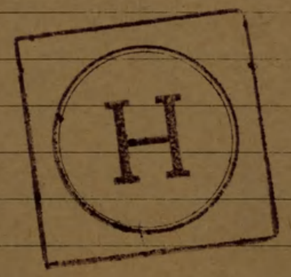
PARTICULARS OF CHARACTER (A.F.W. 3226)					
COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
CARDS					
PAY-SHEETS					



403083

M.F.W. 2589
20M-4-46 (9...3)
H.Q. 1772-39-1377

Original

ATTESTATION PAPER.

No. 458746

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your name?..... Brown Joseph
2. In what Town, Township or Parish, and in what Country were you born?..... Newfoundland
3. What is the name of your next-of kin?..... Mrs Lucy Brown
4. What is the address of your next-of-kin?..... New Waterford. Nova Scotia. b.g.R.
5. What is the date of your birth?..... Sept 14 1895
6. What is your Trade or Calling?..... Labourer
7. Are you married?..... Single
8. Are you willing to be vaccinated or re-vaccinated?..... x J B
9. Do you now belong to the Active Militia?..... yes
10. Have you ever served in any Military Force?.. no
    If so, state particulars of former Service.
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

Joseph Brown (Signature of Man.)

F C Stewart (Signature of Witness.)

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Joseph Brown, 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.

NOV 12 1915

NOV 12 1915

Joseph Brown (Signature of Recruit)

Date ..... 191 . F C Stewart (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Joseph Brown, 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.

Joseph Brown (Signature of Recruit)

Date NOV 12 1915 ..... 191 . F C Stewart (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 Sydney, C.B. this ..... day of NOV 12 1915 ..... 191 .

E. Waterington Ellis J.P. (Signature of Justice)

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

J B Simpson Lt (Approving Officer)

M. F. W. 23.
200 M.—7-15.
H. Q. 1772-39-841.

Description of Brown Joseph on Enlistment.

Apparent Age 20 years 6 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height ..... 5 ft. 4 ins.

Chest measurement. { Girth when fully expanded ..... 34 ins. 2
Range of expansion ..... 2 ins.

Complexion ..... ~~Dark~~ med

Eyes ..... ~~Brown~~ blue

Hair ..... ~~Black~~ & R brown

Religious denominations.
- Church of England ..... yes
- 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).

Small vaccine
Scar on left eyebrow
Alopecia Areata

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 Nov 15 1915

Place Sydney NS W J Hamshaw
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.

Joseph Brown 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.

A J Steele Capt (Signature of Officer)
for C.O. and

Date 17 Nov 1915

DUPLICATE

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 488446 (Rank) Private

Name (in full) Joseph Brown enlisted in

the 63rd Regt. N.S. (Reinforcing Draft.)

CANADIAN EXPEDITIONARY FORCE at Sydney N.S. on the 12th

day of November 1915.

HE served in France

and is now discharged from the service by reason of being medically unfit. Auth: G.O. 59. D. 763. (2. 7. 18)

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

Age	22 10/12 years.	Marks or Scars	
Height	5' 4"		
Complexion	Medium.		
Eyes	Blue		
Hair	Black.		

J Brown
Signature of Soldier

E. C. Armstrong
Issuing Officer

Lieut. Colonel.
Rank

O.C. 6 Bn. C.G.A.
Appointment

Date of Discharge 17th July 18

Signed at Halifax N.S. this 17th day of July 1918

in Military District No. Six

File Reference No. 16-B-465

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. 39
200m.—2-18.
H.Q. 1772-33-332

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

No. 488746 (Rank) Private Name J. Brown.

Unit 6 Batt. C. G. P.

Address on Discharge New Waterford. C.B. N.S.

Character and Conduct ~~Fair~~ Good

b.a.m

Former Occupation Mine operator

Special Qualifications of Value in Civil Life

Medals and Decorations

Remarks Entitled to wear one Gold bar wounded 3 June 16

Signed at Halifax N.S. this 14th day of July 1918

L.D. Mumford

Name of Officer

Lieut. Colonel.

Rank

O.C. 6 Batt. C.G.P.

Appointment

BATTALION CANADIAN
ORDERLY ROOM
JUL 17 1918
No.....
HALIFAX, N. S.
GARRISON REGIMENT, C. E.F.

~~Class~~ 1436 B

Class II Category D 3

Brown Joseph,
New Waterford,
C. B.

No. of M. H.C. File

No. 488746 Rank Pte. Original Unit 13 Present U

Age 22 Height 5 ft. 7 ins. Complexion fair Eyes blue Hair dark Character Good

Date of enlistment Oct. 1915 Where enlisted Waterford Where seen service Hx.

Ship returned by L. Castle Date of arrival 30-9-17 Port of arrival Hx.

Birthplace above place Religion C. E.

Name and address next of kin mother

Notification of return to be sent to Harry Bisure, above place.

MAY 29 1920

Cause of disability Debility

Condition which prevents the soldier from earning a full livelihood In France states he had nervous spells. Did not loose consciousness at any time. Does not pass urine involuntarily. Appears to be the average mentally. States in May 1915 he was three months in Nova Scotia Hospital, for the Insane. This mental trouble brought on he states by trouble with a brother in law.

Degree of incapacity (Please state in fractions) Eng. Board Canadian Board 25% DDS 10%

Probable duration of incapacity three months

Recommendation of Canadian Board ~~Halifax~~

Destination to which transportation issued Halifax

Members of Board Drs. Moore, MacDonald and Schwartz.

INFORMATION TO BE FURNISHED BY SOLDIER

DEPENDENTS	NAME	AGE	WHERE—IF EMPLOYED	WAGES	STATE OF HEALTH
Wife					
Children 1	none				
2					
3					
4					
5					

Occupation prior to enlistment

Regular trade or profession

Average earnings previous to enlistment irregular Any other income

Name and address of last employer irregular

Rent per month If purchasing property amount due and annual payment, $ $

Taxes If Homestead, when is patent due?

If carrying life or accident insurance, annual premium

If in receipt of sick benefits or other insurance—name of society Amt. per mo. $

If unable to follow previous occupation, name preference same

At what age soldier left school? 14 What grade, standard, &c., was he in? 6

Has he taken any Technical or Continuation classes, if so what?

Whether given Vocational Training while in Hospital in England. If so, what subjects?

References

Witness W. B. MacCoy

Date 1-10-17

I declare that the above statement is correct.

Signature J. H. Brown.

Recommendation by Interviewer as to classes likely to be of use, and general remarks:

Last Pay Cert. Cr., $ Dr., $ Amount paid at Depot H.Q., $ L. P. C. leaving Depot, $

Amount forwarded to H. Q. Unit, $ Credit Clothing allowances, $

Transf'd to Unit—Date Transf'd Class 1—Date Transf'd Class 3—Date

PENSION—Class Amount per year, $ Period granted for Dating from

First payment date

Form No. 5a.

CLASS 1.—Men for immediate discharge without a pension.
(a) Unfit for overseas service but capable to take up their previous civilian occupation.
(b) Disability not the result of service or involving claim as the result of or aggravation by service.

CLASS 2.—Men whose condition may be benefited by further medical treatment or rest in a Convalescent Home, Hospital or Sanatorium. If deemed advisable, in some cases the medical officer in charge of the Convalescent Home, Hospital or Sanatorium may grant these men leave to return to their own homes and families for a definite period.

Class 3—Men benefitted by hospital treatment, but whose disability is aggravated by service, and who are entitled by the Pensions Board with a view to pension.

R. & O. 6045 (*Revised*).
8778—10M.—31/10/16.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at 23rd February 1916.

No. 488746 Rank Pte Name Brown J.

Local Unit 17th Res. Overseas Unit 13th Bn Age 21

Examination held at Granville Canadian Special Hospital Ramsgate

DISABILITY.
Overseas—Local.
(scratch one out)

Mentally deficient. (3 months in Asylum)

PRESENT CONDITION.

Both mentally & physically this man, in our opinion, should be quite fit to carry on on lines of communication

BOARD RECOMMENDS:— B II

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

Signatures:

Members { Clarence L. Starr — Lt. Col. President.
Colin Russell Major
Capt.

C. WAR HERO

APPROVED 26 FEB 1917

Dated at.....1916. Lieutenant-Colonel [illegible] [illegible] CAPT.
FOR A.D.M.S. CANADIANS, SHORNCLIFFE
For A.D.M.S.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at ..... 19..

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

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

Examination held at .....

DISABILITY.
Overseas Local.
(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 ..... weeks.

4. Fit for Permanent Base Duty

5. Discharge

Signatures:

Members

President.

APPROVED

Dated at ..... 19..

For A.D.M.S.

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

This form to be used for all Ranks (Vide Articles 122, 130 and 141, Financial Instructions, 25715c, C.E.F., 1916).

Regimental No. 488746 Rank Pte. Name J. Brown

Corps 6th Battn., C.O.C., C.E.F. who was* Discharged

On 17-7-18 191....., to

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1-7-18 191...., to 17-7-18 191...., the inclusive date of transfer or discharge.

Dr.	$	c.	Cr.	$	c.
Bal. Dr. from prev. month		87	Bal. Cr. from prev. month		
Advances by Cheques No. 3437	10	00	Regt'l Pay 17 days at $ 1 00	17	00
Advances by Cheques No.			Field Allow. 17 days at $ c. 10	1	70
Assigned Pay and Sep'n Allce. No.			Separation Allowances* (Monthly)		
Other charges Regt'l Charges		10	Other Allowances* Subs. Allce.	4	30
Payment on transfer or discharge No. 3657	75	73	Other Credits* Clothing Allce.	35	00
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)		
Total	86	70	Total	86	70

*Give particulars.

A monthly stoppage of $ ....(†) has ....(‡) been paid on account of Assigned {Pay for the month of ....191.... and Sep'n Allce. for month of ....191....} (to) Assignee....

(Address) ....

(†) Insert amount to be assigned, whether it has been paid or not.
(‡) Insert "not" if amount has not been paid for period of account.

On Transfer of an Officer

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

REMARKS:—

State (1) date of enlistment .....

(2) if married and if a Separation Allowance Card has been submitted No.

(3) cause of discharge Medically unfit authority 6D.59-B-703.

(4) authority for transfer .....

NOTE.—Separation Allowance and Assigned pay Card and Index Card (M. F. W. 71) are to accompany the original Last Pay Certificate on transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay-list of the unit.

Date 25-7-18

Place Halifax N.S. LIEUT. 6th Battn. Dept.

Paymaster.

Paymaster No. 6 Battalion, Canadian Overseas Regiment

N.B.—For purposes of transfer this form is to be made out in quadruplicate. Original copy to paymaster of new unit; duplicate to District Paymaster; triplicate to accompany the pay-list at the end of the month, and quadruplicate for retention as a record.

For purposes of discharge it is to be made out in triplicate. Original copy to accompany discharge papers; duplicate to accompany pay-list at the end of the month, and triplicate for retention as a record.

If a man on discharge is entitled to three months' Post Discharge Pay, Last Pay certificate will be made out in quadruplicate. The original Last Pay Certificate will be forwarded with other documents to Paymaster Post Discharge Pay and triplicate, with his discharge documents.

M. F. W. 44.

300M—2-18.
H. Q. 1772-39 903.

6045 (*Revised*).

102893

N.F.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at Epsom Sept 29th 1916.

No. 488146 Rank Pte Name Brown J.

Local Unit Epsom Overseas Unit 13th Bn Age 21

Examination held at Tolworth

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

Pneumonia.

PRESENT CONDITION.

In France 6 mos.

In hosp Very Nervous.

Epsom 6 wks

BOARD RECOMMENDS:—

APPROVED
CAPTAIN, C.A.M.C. FOR D. OF R. & C. FOR
BRIGADIER GENERAL
COMMANDING
CANADIAN TRAINING DIVISION.

1. Fit for Duty.....

2. Fit for duty after.....weeks' physical training.

3. Fit for Temporary Base Duty.....weeks.

4. Fit for Permanent Base Duty.....

5. Discharge.....

Signatures:—

Members { J. McCrea Capt .....President.
Chas Campbell Major .....

APPROVED

Dated at 29/9 1916. D. J. McIntyre Capt .....
For A.D.M.S.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at ..... 1918.

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

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

Examination held at .....

.....

DISABILITY.
Overseas—Local.
(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 ..... weeks.

4. Fit for Permanent Base Duty .....

5. Discharge .....

APPROVED
CAPTAIN C.A.M.C. (or D.A.D.M.S.)
BUSSORAH OR ORKNEYS

Signatures:—

..... President.

..... } Members.

.....

APPROVED

Dated at ..... 1918.

For A.D.M.S.

[redacted] & O. 6045 (*Revised*).
8778—10M—31/10/16.

150489

N.E.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at 23rd February 1916.

No. 488746 Rank Pte Name Brown J.

Local Unit 17th Res. Overseas Unit 13th Bn. Age 21

Examination held at Granville Canadian Special Hosp. Ramsgate

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

Mentally deficient.

(3 months in France)

PRESENT CONDITION.

Both mentally & physically this man, in our opinion, should be quite fit to carry on on lines of communication.

BOARD RECOMMENDS:—

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

Signatures:

Members { Clarence L Starr — Lt. Col. President.
Colin Russell Major
Capt.

APPROVED 26 FEB 1917

Dated at ..... 1916.

Lewis Davis Major
CAPT.
FOR A.D.M.S. CANADIANS, SHORNCLIFFE
For A.D.M.S.

PROCEEDINGS OF A MEDICAL BOARD

Examination held at _____ Local Unit _____ Overseas Unit _____ Age _____

No. _____ Rank _____ Name _____ Unit _____

Dated at _____ this _____ day of _____ 19_____

PRESENT CONDITION

Overseas _____ months.

DISABILITY

1. Diagnosis and cause:

2. Duty:

3. Is disability permanent?

4. Is disability due to service?

5. Is disability aggravated by service?

6. Is disability due to enemy action?

7. Is disability due to misconduct?

8. Is disability due to own misconduct?

9. Is disability due to venereal disease?

10. Is disability due to pre-existing defect?

11. Is disability due to pre-existing disease?

12. Is disability due to pre-existing injury?

13. Is disability due to pre-existing wound?

14. Is disability due to pre-existing illness?

15. Is disability due to pre-existing condition?

16. Is disability due to pre-existing injury?

17. Is disability due to pre-existing illness?

18. Is disability due to pre-existing condition?

19. Is disability due to pre-existing injury?

20. Is disability due to pre-existing illness?

21. Is disability due to pre-existing condition?

22. Is disability due to pre-existing injury?

23. Is disability due to pre-existing illness?

24. Is disability due to pre-existing condition?

25. Is disability due to pre-existing injury?

26. Is disability due to pre-existing illness?

27. Is disability due to pre-existing condition?

28. Is disability due to pre-existing injury?

29. Is disability due to pre-existing illness?

30. Is disability due to pre-existing condition?

31. Is disability due to pre-existing injury?

32. Is disability due to pre-existing illness?

33. Is disability due to pre-existing condition?

34. Is disability due to pre-existing injury?

35. Is disability due to pre-existing illness?

36. Is disability due to pre-existing condition?

37. Is disability due to pre-existing injury?

38. Is disability due to pre-existing illness?

39. Is disability due to pre-existing condition?

40. Is disability due to pre-existing injury?

41. Is disability due to pre-existing illness?

42. Is disability due to pre-existing condition?

43. Is disability due to pre-existing injury?

44. Is disability due to pre-existing illness?

45. Is disability due to pre-existing condition?

46. Is disability due to pre-existing injury?

47. Is disability due to pre-existing illness?

48. Is disability due to pre-existing condition?

49. Is disability due to pre-existing injury?

50. Is disability due to pre-existing illness?

51. Is disability due to pre-existing condition?

52. Is disability due to pre-existing injury?

53. Is disability due to pre-existing illness?

54. Is disability due to pre-existing condition?

55. Is disability due to pre-existing injury?

56. Is disability due to pre-existing illness?

57. Is disability due to pre-existing condition?

58. Is disability due to pre-existing injury?

59. Is disability due to pre-existing illness?

60. Is disability due to pre-existing condition?

61. Is disability due to pre-existing injury?

62. Is disability due to pre-existing illness?

63. Is disability due to pre-existing condition?

64. Is disability due to pre-existing injury?

65. Is disability due to pre-existing illness?

66. Is disability due to pre-existing condition?

67. Is disability due to pre-existing injury?

68. Is disability due to pre-existing illness?

69. Is disability due to pre-existing condition?

70. Is disability due to pre-existing injury?

71. Is disability due to pre-existing illness?

72. Is disability due to pre-existing condition?

73. Is disability due to pre-existing injury?

74. Is disability due to pre-existing illness?

75. Is disability due to pre-existing condition?

76. Is disability due to pre-existing injury?

77. Is disability due to pre-existing illness?

78. Is disability due to pre-existing condition?

79. Is disability due to pre-existing injury?

80. Is disability due to pre-existing illness?

81. Is disability due to pre-existing condition?

82. Is disability due to pre-existing injury?

83. Is disability due to pre-existing illness?

84. Is disability due to pre-existing condition?

85. Is disability due to pre-existing injury?

86. Is disability due to pre-existing illness?

87. Is disability due to pre-existing condition?

88. Is disability due to pre-existing injury?

89. Is disability due to pre-existing illness?

90. Is disability due to pre-existing condition?

91. Is disability due to pre-existing injury?

92. Is disability due to pre-existing illness?

93. Is disability due to pre-existing condition?

94. Is disability due to pre-existing injury?

95. Is disability due to pre-existing illness?

96. Is disability due to pre-existing condition?

97. Is disability due to pre-existing injury?

98. Is disability due to pre-existing illness?

99. Is disability due to pre-existing condition?

100. Is disability due to pre-existing injury?

BOARD RECOMMENDS:

Dated at _____ this _____ day of _____ 19_____

_____

Member

_____

President

ORIGINAL

Ramsgate

[redacted]

09287 56

2/12/16

1105 13/2/17

MEDICAL HISTORY SHEET.

Surname Brown *Christian Name* Joseph

Examined { on 13th day of Nov. 1915
at Halifax. N.S.

Approved by V. F. Cosmo

Rank Capt. M.O.

Birthplace { City or Town Newfoundland
County do.

Apparent age 20.

Trade or occupation Labourer.

Height 5 Feet 7. Inches.

Weight 135 Lbs.

Chest measurement { Minimum 34 inches.
Maximum expansion inches.

Physical development good

Small-Pox Marks nil

Vaccination Marks { Arm Right. Left.
Number

When Vaccinated last

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

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

Date	Fit or Unfit	Examined for Re-engagement,
		28 FEB. 1917 M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date	Result	Vaccinations.
		M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
		F. Cosmo M.O.
		V.F.C. M.O.
		M.O.

Enlisted on *day of* 191 *at* Halifax, N.S.

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	~~5.B.R.~~ 1st. D.A.	5250	Good.	12/11/15
Transferred to..	1. D.A.C. 55th Regt. N.S.	488746		12/11/15

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
Halifax	29-V-16	Mental Instability — Category E	Invalided

8 MAR 1916

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.

100M.—5-15.
H. Q. 1772-39-439

CANADIAN

Surname..... Christian Name.....

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.
Can. Base Depot.		13	6	16	20	6	16	Wd. Shell Shock	7.	Rejoined Unit.	A.384-393-2
(CANADIAN DIVISION), CONVALESCENT HOSPITAL, WOODCOTE PARK, EPSOM		2	10	16	15	2	16	G.S.W. Knee. L. + Neurasthenia		To Ramsgate for further treatment.	J.M. Burnett Capt. C.A.M.C.
R.C.D.H. Ramsgate		15	2	17	22	2	17	—do—	13	Transferred to C.C.D. Hastings.	J.B. Cannon Capt. C.A.M.C. Registrar, for O.C., Granville Can. Sp. Hosp., Ramsgate.
										Duplicate Medical History Sheet posted to here: H.	
Canadian Convalescent Hospital, Buckingham House, Dalbridge.		10	5	17				V.D. Q.		Pt depressed + melancholic. Worries continually. Mentally Deficient.	Chas. Lent Capt. C.A.M.C.
Ross Hospital		2	10	17	16	4	18	Catarrh C III	196	Transferred to No 6 Special Hospital Halifax N.S.	J.O. Wilson

Temporary Capt Grass

Army Form B. 178.

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 Brown *Christian Name* Joseph H.

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		
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
	Admitted
	18/6/17
	Disabelety
	Mental Instabelety
	Repatriation to Canada
	R Bayer
	Lt R A M C (T)
	For Officer in charge
	THE LORD DERBY WAR HOSPITAL
	Approved:-
	Captain C.A.M.C.,
	for A.D.M.S., Canadians, London Area.
	A.D.M.S. CANADIANS, LONDON AREA. 27 JUN 1917

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.
[1128] W8827/M945 200m 10/16R 45 59

Forms B. 178. 48

[P.T.O.

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				
THE LORD DERBY WAR HOSPITAL WARRINGTON Date	18	6	17				Mental Instability		Recommended for repatriation to Canada.	T. Bencraft Evans Capt RAMC.

CASE HISTORY SHEET.

No. 488147 Rank Pte Name J. Brown Age 22

Unit 13th Battn. Completed years of service (Where and how long)

Date of admission 12-10-'17 Date of discharge 24-4-18

Diagnosis Neurasthenia Place of origin France

CONDITION ON ADMISSION AND PROGRESS OF CASE

States he had nervous spells. Whilst in France Did not loose consciousness at any time. Appears to be the average mentally. States in May 1915 he was for three months in Nova Scotia Hospital for Insane. This mental trouble brought on by trouble in the family. Memory poor. Calm and he denies having mental trouble according to his first story. States he had no fits prior to enlistment and that his present mental condition is due to shell shock.

FAMILY HISTORY

(Tuberculosis, mental or nervous diseases.)

TREATMENT

(Especially any specific or special form.) Rest. Diet & Tonics

CONDITION ON DISCHARGE, Mental response fairly active

(and disposal made of case.) No Muscular incoordination. No fits while in this Hospital. Station nervous appearance and carriage. Pulse often was normal. Heart & lungs normal. Convalescent in ordinary

Date April 30, 1918 Medical Officer i/c case.

M. F. B. 313a.
50M.-11-17.
1772—39-439.

19927
6

Form [redacted] 12

Admitted from Can Cont. Hospital Uxbridge

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	488746	Pte	Brown	J H

Year	Unit.	Age.	Service.
1917	13th Canadians	21	Total 1 7/12
			In fd:

Station and Date.

18/6/17

The Lord Derby War Hospital, Warrington.

Weight

Disease Mental Instability

Slight
Severe
Dangerous

NEXT OF KIN.

Mrs Mary Brown
Hospital for Insane
Hardwood Hill
Sydney

Mr Harry Brown
New Waterford
Cape Breton
N.S.

INOCULATION AGAINST ENTERIC		
TV 1	TV 2	TV Nil.
Date		

Cross out that which does not apply.

Book 4 at School. Says he has been a miner & fisherman.

Was in Asylum 1915 at Halifax from May 5th 1915. Says he has had fits off & on since infancy. Gets no warning of his fits. Loses consciousness. Nearly always passes his water in them. Has not bitten his tongue in them or hurt himself in any other way. One sister has fits. Mother in an Asylum.

Enlisted Oct. 1915. Came to England Jan 1916. Went to France May 1916. Was under fire. Says he was wounded in left leg. Not buried. Invalided home Oct. 1916. Sent to Folkestone, thence to Epsom 6 months as Neurasthenia, thence to Ramsgate, Hastings, Warlingham, Uxbridge.

Warrant to

Station.

RECOMMENDED FOR Denies alcoholic excess. Had gonorrhoea denies Syphilis

Discharge	
On	
To Duty	
Light Duty.	

At the present time converses pretty well, but has to be kept to the point. Sleeps well

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

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

P.T.O

Station and Date.	
	denies hallucinations. Has not a fit since September vii France. No sign of organic nervous disease in view of the infrequency & ~~duration~~ unproven nature of his fits his diagnosis is returned as above.
	O.P. Napier Pearn Capt RAMC
16.vi.17.	Boarded & Recommended for Repatriation to Canada
	A Rayer Major RAMC. (T)
18.9.17	I HEREBY CERTIFY that No. 488746. Pte Brown. is not suffering from ~~any Infectious~~ Disease. He is free from ~~vermin, and is in a fit~~ state of bodily health to allow of his transfer to Hospital Ship for Canada.
	O.P. Napier Pearn Capt RAMC

I. 1237
11

6.6.. Nwt 6

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
T	488746.	Pte	Brown	J. H.

Year	Unit.	Age.	Service.
1917	13th Bn..	22	1/6

Station and Date.	Disease V. D. F.
10.5.17	
11.5.17. Weybridge.	No sign of V.D.F. Complains of nervousness. Gives hist. of "fits". Was in Nova Scotia Hosp. for insane for 3 mos. No diagnosis. Patients story is inconsistent & apparently mentally deficient. Treat. L.B. Marked to Hospital
12.5.17	Loc. Bd rec.d 17.9. written.

*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.

Station and Date.	
	Laborer

114/501

Army Form I. 1237.

MEDICAL CASE SHEET.

No. in Admission and Discharge Book.	Regimental No.	Rank	Surname	Christian Name
T4P25	408746	Pte	Brown	J.
Year	Unit	Age	Service	
	13 Bn	21	12/12 6/12	

~~Casualty~~ Mental Defect.

Station and Date.

GRANVILLE CANADIAN SPECIAL HOSPITAL
15 FEB 1917
RAMSGATE

P. Rec'd: Nurses.

Enlisted Oct 12th/16: Halifax. N. S.
~~Wounded. June 13th/16.~~
Arrived in France Apr. 11th.
Wounded June 13/16, sent to base, wound slight & returned to unit in a month.
Evac. from unit as unfit. Aug 1916.
Hospitals:

Home Base.	2 weks.
C.C.S.	2 weks
Epsom	5 months
admitted R.C. Ramsgate 15/2/17.	

Comp'ts.: Headache. Dizziness. Insomnia.

P.I.: In the trenches at Ypres on 5 different occasions when he was all right. Then went to Somme & was very shaken & remained during his 1st trip in. When he came out apparently went to pieces and had several fits which he says he knew were coming on by the prodromata. Referred to M.O. who signed him to Asylum & Ailsa's, he says, declared him unfit for active service. He says he has not fits but since he was examined but knows that he cannot stand the racket in France.

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

P.T.O.

P.H.: Mackenzie chief.
In hospital Forbes Hosp. for insane from May 26/15
to Aug 7th 1915. Says he was sent in there
because he had fits. Says he never
had his temperature. Patient has suffer from
head. trip. comprising this but going
to drug stores.
Does not smoke much.
Never drinks -
Left school at age 11.

F.H.: F. died. from "fever". aet. 65.
M. " " "Heart failure" " 60.
1 B. a. SW. -
3 S. a. SW.
His mother used to have "fits". She was in
asylum for 10 yrs. (48-58).

P.C.: Well developed stupid looking man
of 21. Dark hair long. and has
unfinished sores on arms & legs where
he probably scratched himself when he
had scabies abt. 1 month ago.
Teeth good, Bowels regular.
Heart & Lungs. O.K.

Nervous System.. Poor intelligence. Poor & stupid
Follows in conversation any ideas. Memory seems
fair. Says does not sleep well. Does not dream
much. Headache occasional.
Cranial Nerves O.K..
Motor functions. OK
Sensory - OK
Reflexes: Sup. & deep. OK
Coordination - Quite marked vertical.
No impairment of sensation or hallucinations noted.
For Institution:
Ment. Deficiency, Imb.

Recommend B II Colin Russell major.
Says he is all right clear of France -

21/2/17. This patient says he told Dr. O. that he found
himself fit for service that he had been an inmate
of Insane asylum. She was not in the
asylum 2 months & has been discharged
Since discharge. She is very anxious
to return to Canada but is that he has
sent the Gov. a lot of money & so far
been of very little use and is physically
strong & respectfully recommend Sanitorium Board
or something similar to [illegible]

H.P. Wright

23 FEB 1917 Granville Board.
B II by d. Mac

10 FEB. 1917

BPC Original 63B-700

MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" issued by the B.P.C. and instructions issued by Militia H.Q., Ottawa, will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of Sections 1 to 17 of this Form and will obtain the signature of the soldier 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 soldier'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 soldier concerned, from witnesses, or from documents.
4. Special care is required in answering question 13. Please read the questions carefully. All questions must be answered.
5. If space provided under any sections is insufficient use blank space, page 4 or add another sheet. Such entries or 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 8, 9 and 10 be communicated to the soldier, 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 Debert N.S. DATE May 1918

1. 1 (a) Unit 12th Batt (b) Regimental No. 488746 (c) Rank Pte.

(d) Surname Brown (e) Christian name Joseph

2. Age last birthday 23 Date of birth April 1894

3. Enlisted at Sydney N.S. on Oct 12th 1915

JUN 8 1918
29-B-783
M. D. No. 6

4. Personal description:—

(a) Height 5.4 (b) Weight 135 (stripped) (c) Complexion Fresh

(d) Colour of hair black (e) Colour of eyes blue (f) Identification marks Nil

5. Address after discharge (for the use of the Board of Pension Commissioners) New Waterford. Cape Breton N.S.

6. Former trade or occupation Mine Operator.

7. (a) Service	Years	Days
	2	230

	Periods	
	From	To
63rd Regt. 17th Res. Batt'n. 13th Batt in France. Hospitals 6th C.G.R.	Oct 12th/15	present.

(b) Has he been overseas? Yes. 8. Original disease or disability Fits (Epileptoid)

(a) Date of origin About Jan. 1915. (b) Place of origin New Waterford

(c) Cause* Hereditary Predisposition & worry.

(d) Present disease or disability Mental Instability.

9. Present condition (a) (Important to be a full description of the present disabling condition or conditions only.) "History" must be recorded in Section 10.

[After describing all abnormalities, anatomical and functional, contributing to present disability (see section 11) state whether such disability is directly due to (*a*) weakness, (*b*) loss (complete or partial) of any organ or member of its functions, or (*c*) to the necessity for rest of the body or of some of its parts.]

At present seems to be mentally up to the average memory is fairly good. Well oriented as to time & place, No evidence of any delusions or

M. F. B. 227.
300M.—2-18.
1772—39—117.

9. Present condition.—(*Continued.*)

hallucinations. not obviously depressed. Says he is nervous. Sleeps & eats well.
Has had fits before and since enlistment of which there is no description among his documents. Was in Nova Scotia hospital before enlistment May 1915. for three months. Reflexes exaggerated.

(b) Are the following systems normal? If not, briefly state abnormality

Nervous as above. Digestive normal Respiratory normal Cardiac normal

Genito-Urinary normal Skin, Middle Ear, Eye or any other part normal.

10. History: (*a*) of Condition referred to in "a" section 9.

History of trouble as above before enlistment. Returned from France Sep. 1916 on account of fits. In hospitals in England under observation for a year.

(*b*) Here give a description of wounds, scars, deformities, and signs and symptoms of abnormal conditions present and not included in answer 8. This section cannot be completed without stripping the soldier and subjecting him to a thorough physical examination.

nil

11. If the disabling condition had its origin before enlistment, has it been aggravated on service?

yes

12. Was the disability caused or aggravated by negligence, by vice or by misconduct, or by unreasonable refusal to accept treatment? no

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

13. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? permanent

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

~~none.~~ Observation in hospitals
+ sedatives

OPINION OF THE MEDICAL BOARD

14. (*Continued*).

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

No

16. Can the former trade or occupation be resumed ? Yes if he remains as at present which is unlikely.
(If not, briefly state why.)

17. Recommendations

Discharge B.

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

Cause

STATEMENT OF THE SOLDIER.

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

I, the undersigned Joseph Brown 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

J Brown
Signature of soldier examinea.

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 criticized.

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

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

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

OPINION OF THE MEDICAL BOARD—(*Continued*).

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

Recommended that he be discharged on the ground of previous attack of Insanity and bad family History. His Mother suffering from Chronic Insanity.

Before signing the President of the Medical Board will read the certificate signed by the soldier, to the soldier, and if no change is indicated will initial the certificate.

N. McB Morton Captain ..... *President.*

H 7 D Bruce Capt ..... } Members.

PLACE... Halifax, N. S.

DATE..... 29 - 5 - 18.

APPROVED BY

APPROVED E. Fiddes Surgn. For G.O.C. M.D. No. 6

..... *Assistant Director of Medical Services.*

DATE..... 7.6.18

APPROVED BY

..... *Director-General of Medical Services.*

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 soldier 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.....

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

M. F. W. 54. (A. F. B. 103.
500M.—9-16
H. Q. 1772-39-9-20.

Casualty Form—Active Service.

488446 Unit, Regiment or ~~Corps~~ 6th. Batt, Can. Garrison Regt, C.E.F.

Regimental No. ..... Rank Pte C. E. F. Name J. Brown

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				
		Taken on strength 6th. Batt. C.G.R. C.E.F.	HALIFAX, N. S.	30.4.16	Lieut Officer i/c Records 6th Batt. C.G.R. C.E.F.
		Struck off strength 6th. Batt. C.G.R. C.E.F. Med unfit.	HALIFAX, N. S.	14.4.16	Lieut Officer i/c Records 6th Batt. C.G.R. C.E.F.

(*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				

Form R 122.
2353—100M—9-12-16.

2 Page of Records

D.M. Rank Pte. Name BROWN, Joseph Reg'l No. 488746

Unit Dft.63rd to 17th Res. Bn. If in perm. Corps What Unit? Married or Single Single

Place and Date of Enlistment Sydney, 12th Nov. 1915 Place of Birth Newfoundland

Name and Address, Next-of-Kin Mrs. Lucy Brown, New Waterford, Nova Scotia, Canada.

Relationship

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

N/E. R.B. No 9292
File R.L.
Category M U C

H. W. V., Ld.—9546-16.

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.
		First page of records on file in envelope. Pay Grade Pte	Acting Rank		E.V.C
30.3.17	C.C.A.C.	S.O.S. on trans. 1 Que Regiment ex b on GDD	Hastings	10.3.17	Pt. II D.O. 136
2.4.17	1st QRD.	T.O.S. from CCAC	Shoreham	10.3.17	—— 24
18.4.17	"	Cease to be o/com at GDD. on ddm. to hospital	"	12.4.17	Pt II D.O 38.
15.5.17	13th Bn	Trans to. C.C. Hosp Shillingdon	H/o Uxbridge	11.5.17	62 B 360. VDG
15-10-17	1st QRD.	Trans to. Cam bon Hosp	Bromley	18.6.17	62 B 36 NYD

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.				
26.9.17	1st 2/RD.	S.O.S. to Canada for Discharge			C.h. D151 28/7/18 'Q'
			Shoreham	19.9.17	Ptn D0177.
	Dis Dep	Further Treatment	MD 6 Halifax	30.9.17	NK 375.

425/C

D. M.

Rank Pte. Name BROWN, Joseph. Reg'l No. 488746.

Unit Draft 63rd to 17th Res.Bn. If in perm. Corps, What Unit? Married or Single Single.

Place and Date of Enlistment Sydney 12th Nov.1915 Place of Birth Newfoundland.

Name and Address, Next-of-Kin Mrs Lucy Brown.
New Waterford, Nova Scotia, Canada. Relationship

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

05

R133B/26ct

1410

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.			
31-1-16	O.L. 17th	to 17th	E. Sandling	30-1-16	A.II O "37".
21. 2. 16	"	14 dys C.B. Disobeying Orders	"	21.2.16	" " 580
13. 3. 16	"	Admt. to Moore Barracks Hospl.	Shorncliffe	13.3.16	" " 81 V.D.S. Cas List 94
15-3-16	"	Attd. to Brgde M. Gun Coy	E. Sandling	15.3.16	" " 103a
27. 4. 16	"	14 dys F.P.#2 Insubordination	"	27.4.16	" " 124a
27. 4. 16	"	Rpt. from Hospl.	"	26.4.16	" " 124.
8. 5. 16.	"	Trans. to 13th Bn.	Overseas	7.5.16.	" " 135a
21.5.16	O/C 13th	Taken on strength 13th Bn.	Field	8.5.16	Pt II O #21
13.6.16	C.L.13	No 11 Gen. Hosp.	Camiers	4.6.16	C.L.A378 Shell Shock
17.6.16	" "	To No6 Conv. Depot	Etaples	8.6.16	C.L.A382 do

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				
20.6.16	C.L. 13th	To Can. Base Depot		13.6.16	C.L. A384
30.6.16	" "	Rejoined Unit	Field	20.6.16	C.L. A393
29.7.16	17th	Disch Military Hosp	Shorncliffe	15.3.16	C.L. 138
14.8.16	O/C 13th	In confinement awaiting trial from 24.6.16 Tried by F.G.C.M. of "Otenon Active Service Desertion - absent from 7.30 P.M. parade for trenches 24.6.16. Found not Guilty of Desertion but Guilty of Absence without leave. Sentenced to 6 months I.H.L. 28.7.16 Confirmed by Brig. Gen. G.S. Tuffard C.M.G. G.O.C. 3rd Can. Inf. Bde 30.7.16 who commuted sentence to 90 days. F.P. #1	Folkestone	24.6.16	Pt II O #32
9-10-16	7c 13th	Transferred to C.C.A.C., Folkestone.	Class "C"	27.9.16	Pt II O 56 676.
29.9.16	C C A C.	Taken on strength.	Folkestone	29.9.16	Pt II O 425/C. 13th Bn C.E.F. 187 neurasthenia
3.10.16	— " —	adm. to C.C.H. Epsom.	— " —	2.10.16	Pt II O 432/E
26.2.17	13th Bn.	Tfd to Granville Spec Hosp	Ramsgate	16.2.17	C.L. B 297. Neurasthenia.
28.2.17	do	Disp do do	do	27.2.17	— 299 do
1.3.17	C C A C	REPORTED TO C.C.A.C.	Hastings	28.2.17	Pt II O 102

9243-W6490/1535.—2,000,000—J. J. K. & Co., Ltd.—Forms B. 103/1.

Army Form B. 103.

B.239

Casualty Form—Active Service.

94-10-3-17

Regiment or Corps 13th Canadian Battalion.

Regimental No. 488746 Rank Pte. Name Brown, J.

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*) ____

2.

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				
					pwhogan Capt., for Lt-Col., A.A.G.
		Taken on strength C.C.A.C. Pt. II D.O. No. 425 29/9/16			
Hastings. 8/3/17		ATTACHED ~~TRANSFERRED~~ FROM C.C.A.C. TO C.C.D PART II D.O. No. ...		6.12.16	F L Brennan Lt. for O.C. C.C.A.C.
		ATTACHED ~~TRANSFERRED~~ FROM C.C.A.C. TO G.D.D. PART II D.O. No. ...			
12/4/17	C.C.A.C.	Ceases to be attached to	G.D.D.	12/4/17	Part II D.O. No 97
					O. i/c Records & Depôt. For Lt. Officer Commanding, Canadian Garrison Duty Depôt.
10-3-17	C.G.D.D.	T.O.S. 12th Regtl. Depot	Shoreham.	Pt. DO.	24-10-3-17. Lady
		6 OCT REC'D			12th Regtl 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				
29.9.16	CCAC	Taken on Strength	Folkestone	29.9.16	Pt II Do 425.
30.3.17	-"-	S.O.S on Trans to 1st Can R.D.	Shoreham	10.3.17	Pt II Do 136.
2-4-17	1st Can R.D.	T.O.S from CCAC	-"-	10.3.17	Pt II Do 24.

for Lt Col

Lieut.
i/c Records. Colchd

INVALIDED TO CANADA FOR
FURTHER MEDICAL TREATMENT

W.A. Lind

CAPT:
HOSPITAL REPRESENTATIVE FOR A. G. CANADIANS

2.10.17			
~~22.4.18~~	Taken on strength "B" Unit M.H.C.	Hfx-2-10-17. D.O.C. No 253 /1917.	
19.4.18			J. Taylor Major
22.4.18	Struck off strength B. Unit M.H.C.	Hfx 18-4-1822 D.O. No. 3. 1918.	
			J. Taylor Major

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

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

Casualty Form—Active Service.

Unit, Regiment or Corps 14th Res Battalion

Regimental No. 68746 Rank Pte Name Brown Joseph

Enlisted (a) 12/11/15 Terms of Service (a) C. E. F. Duration of War Service reckons from (a) 12-11-15.

Date of promotion to present rank. } ..... Date of appointment to lance rank } ..... Numerical position on roll of N. C. Os. } 6 2nd

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				
7 MAY 1916	14th Bn	Trans. to 13th Bn	OVERSEAS	7 MAY 1916	A Samuel Lieut. Adjt. 17th Bn.
8/5/16	Can Base Depot	Arrived in France for 13TH CANADIAN INF. BATTALION	Can Base Depot	8/5/16	H.R. Pt II Ord No 21, 21/5/16
28/5/16	"	Proceeded to join Unit	The Field	28/5/16	H.R. 2
2/6/16	O.C. 13th Bn	Joined Unit	The Field	29/5/16	B213 Dec. 339, 10/6/16
4/6/16	9th C Hosp.	W. Shock Shell Conc.	9 C Hosp.	3/6/16	A36 Dec. 351 13/7/16
10/6/16	3rd Can Gen Hosp	W. Shock Shell Conc.	3rd Can Gen Hosp	4/6/16	A36 Dec. 359. 8/7/16
4/6/16	11 General	W. Shock Shell Conc.	11 General	4/6/16	W3034
8/6/16	11 General	W. Shock Shell Conc.	Trans to C Can Depot	8/6/16	W3034
13/6/16	Can B Dep	Joined from Etaples	Can B Dep	13/6/16	H.R. Dec 345, 14/6/16

(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.

12th A.I.C.

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				
20/6/16	Can Base Dep	Left for Unit.	The Curragh	20/6/16	D.R. D.C.I. 349, 22/6/16
23/6/16		Rejoined Unit.		21/6/16	A.B.213
4/8/16	O.C. 13/Bn	F.G.C.M. In confinement awaiting trial from 3/7/16 Tried by F.G.C.M. "When on Active Service, Desertion" — Absent from 7.30pm parade for trenches. Found Not Guilty of Desertion but guilty of absence without leave Sentenced to 6 Months I.H.L. Sentence confirmed by Brig. Gen. G.S. Sanford C.M.G. G.O.C. 3rd Can. Inf. Bde. who commuted sentence to 90 Days F.P. No 1.	The Curragh	28/7/16	A.B.209 G.C.O. No 32, 12/8/16
4/8/16	O.C. 13/Bn	To Prison	The Curragh	2/8/16	A.B.213. D.C.S. 385, 12/10/16
15/9/16		From Prison		12/8/16	A.B.213 D.C.S. 410, 21/9/16
18/9/16	C.B. Depot	Joined from A.D.M.S.	Curragh Depot	18/9/16	A.R.
28/9/16		Class "B" Classified "C" per Med. Board to Neurasthenia	England	27/9/16	A.R. G.C. II Ord. 56 9/10/16

Name Brown 12-11-15

Date of Embarkation for England 30-1-16

Proceeded to France. Returned to England.

7-5-16 27-9-16 Lud Leah.

Date returned to Canada.

19-9-17

6th Fd 14-1-27

P.R.2855.

D.M.S. 1500.

Surname	Christian Name or Names	Reg. No.
Brown	J	488746

Rank	Unit	Co.	Troop	Batty.
Pte	17th Res Bn (13th Batt)			

Hospital — Date of Admission: C.C.A.C 1st Base

Transferred
- Gen. Hosp. Shorncliffe Hosp. 14-3-16
- #11 Con. Hosp. Camiers Hosp. 4.6.16
- #6 Conv. Depot Etaples Hosp. 8.6.16
- Can. Conv. Woodcote Pk. Hosp. 3-10-16

Diagnosis: (1) V.D.G.

Later Diagnosis (if changed): (2) Shell-Shock (3) Neurasthenia

Additional Diagnoses: If more than one state present: V.D.G. Mental Instability

DISPOSITION		Date
	Can. Base Depot	13.6.16
	Rejoined Unit	20.6.16

C.L. 25.3.16	94 (1)
C.L. 13.6.16	A378
C.L. 17.6.16	A382
C.L. 20.6.16	A384 (2)
C.L. 30.6.16	A393 (2)
C.L. 29.6.16	138 X
C.L. 16-10-16.	B187.
C.L. 26-2-17	B297
" 28.2.17	B299
21.3.17.	B316.
15-5-17	B360

REMARKS

Reported from Base

Discharged 15.3.16

Dis to Canada per HS "Llandovery Castle" from Liverpool 19-9-17

A.M.S. 2 DEPOT

Bch [illegible] Hospital

Em 6-6-16

E.

D.F.T.

J.L. No. Rec.

EPITOME OF HOSPITAL TREATMENT.

	Hospital	Adm.
1.	Granville Spec.	16-2-17
2.	Mil H. (Ken) Count Farm. Warlingham	16.3.17.
3.	Canad. Belligerent Hos. Eltham	11.3.17
4.	Lord Derby Warrington	18.6.17
5.		
6.		
7.		

Ch 15.10.17. B 86 (1) Invalided to Canada 19.9.17

28.2.18 B 15, (2)

20.6.18 B. 245 (3) Note:- Re Ch. B. 15. diag. now ascertained to be. Mental Instability.

R. 149.

Name Brown Joseph Rank Private Reg. No. 488746

Unit 13th Battalion

Next of Kin Canada

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
4.6.16.	11 Gen Hosp.	Ramsgate	Shell Shock	378	III	M7928
8.6.16.	6 Con. Depot	Etaples	do	B382		
13.6.16	Can. Base Depot.		do	B384		
20.6.16	Rejoined Unit		do	B393		
3.10.16	Can Hosp Woodcote P. Epsom		Neurasthenia (R.A.M.C.)	B184		
1917.						
16-2	Gran.Can.Sp.Hosp.Rams.		Neur.	B297.		
27-2-17	DISCHARGED		do	B299.		
16-3	Mil.Hosp.Court ~~Fran~~ Farm		Warl. V.D.G. CCAC	B.316.		
11-5	Con.Hosp.Hill.house Ux.		do	B360.		

Date 1917	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
18-6	Lord Derby W. Hospital Warrington ~~Ex Hosp Leeds~~.		N.Y.D.	B.36.		
19-9	Disch To Canada		Not Stated	B.154		
12 6	Correct diagnosis now stated to be (28-2-18)		Mental Instability	B245		9830

Reg. No. 488746 Name Brown J.

Rank Pte Corps 13th Bn Age 22 Service C.E. & F. 2/12

Ledger No. Serial No. 19927 13

HOSPITALS	DATE	DIAGNOSIS
Ross Mil Sidney	2-10-17	Debility
Mosman "	12-10-17	Neurasthenia
Dis to duty	24-4-18	

P. T. O.

HOSPITALS	DATE	DIAGNOSIS

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

R. 149.

Name Brown Joseph Rank Pte. Reg. No. 488746

Unit 17th. Batt.

Next of Kin Canada.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
14/3/16	Mil. Hos.	Shorncliffe	V.D.?	94		
13-3. 16				138		

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

REGT'L No 488746

NAME Brown, Josephs

H. Q. FILE No. 649-

RANK AND CORPS Pte. 13th Bn. (17th Res. Batt (Depot) 6 Regt. Halifax Rifles, 1st R.D.

FOLLOWS No. 2818x

FOLLOWS

C.

NATURE OF CASUALTY

CABLE No.	CABLE DATE	
M7928	12-6-16	Adm. to #11 Gen. Hosp. Camiers June 4th (shell shock)
S352	24-9-17	Sailed from Liverpool for Canada per the Hired Ship Llandovery Castle on Sept. 19th 1917. Mental Instability

9-M206

L. L. Job 90581—M. & D. 6314.

M. F. W. 42—50M—1-16.
H. Q. 1772-39-893.

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
94"	Mil, Shorne.	14-3-16	V. D. G.
A378	11 Gen. Canvas	4-6-16	Shell-shock
A382	6 Can Depot Etaples	8-6-16	Shell Shock
A384	Can. Base. Depot.		
	Ex #6 Cons. Camp. Etaples	13-6-16	" "
138	Mil Hosp Shorne Kent	15-3-16	V. D. G
A395	Reported from Base		
	rejoined unit	28-6-16	Shell Shock
B187	Can Cmot Woodcote OK Epsm	3-10-16	Neurasthenia from 16/4
B297.	to Granville Can. Spec Ramsgate 16/2		17 " "
B299	"Discharged" " "	27-2-17	
B316	Mil, (Ven.) Can Cons Farms Warlingham	16-3-17	V. D. G (6 6 A. 6)
B360	Can. Cons. & Hollington House Uxbridge	11-5-17	V. D. G.

NAME Brown J.

RANK AND CORPS Pte.

REGT'L No. 488746

H. Q. FILE No. 649.

FOLLOWS

No.

FOLLOWS

CABLE

NO.	DATE

NATURE OF CASUALTY

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

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

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
B36, 255. B151	Lord Derby War Hospital Warrington "B." M. H. 6.6 Invalided to Canada & Lord Derby War Hospital Warrington	18-6-17 2-10-17 (99-1)	R.Y.S. Posted as Auth. P. to Ross (13) ~~Initiated~~ Mental Instability

depot 14th B2 45

Comb 649-B-25425
649-B-3728

CARD NO.

S.O.S. 17-718 Mtl. 6.
Auth.
Pt II 79 of 18-7-18.

SURNAME. Brown

CHRISTIAN NAMES Joseph

REGL. No. 488746 RANK Pte.

UNIT ~~63rd. Regt. Halifax Rifles (1st. R.D.)~~ 6 Bn. C.G.R.

FORMER CORPS nil

NEXT OF KIN.

NAMES IN FULL Brown, Mrs. Lucy

RELATIONSHIP TO SOLDIER

ADDRESS New Waterford, N. S.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Newfoundland.

PLACE OF ATTESTATION Sydney C. B.

DATE Nov. 12th 1915.

O/S · 22-1-16 316/2

R/C - 30-9-17.

L. L. 90589.—M. & D. 6312.

M. F. W. 22. 100m.—1-16. H. Q. 1772-39-839.

Sailed for Canada per Hosp Ship "Glandovery Castle". 19-9-17. (Can't S. 352)

MARRIED SINGLE Yes. WIDOWER

TRADE OR CALLING RELIGION

DESCRIPTION.

APPARENT AGE YEARS MONTHS

HEIGHT FEET INCHES

CHEST MEASUREMENT INCHES EXPANSION INCHES

COMPLEXION EYES HAIR

DISTINGUISHING MARKS

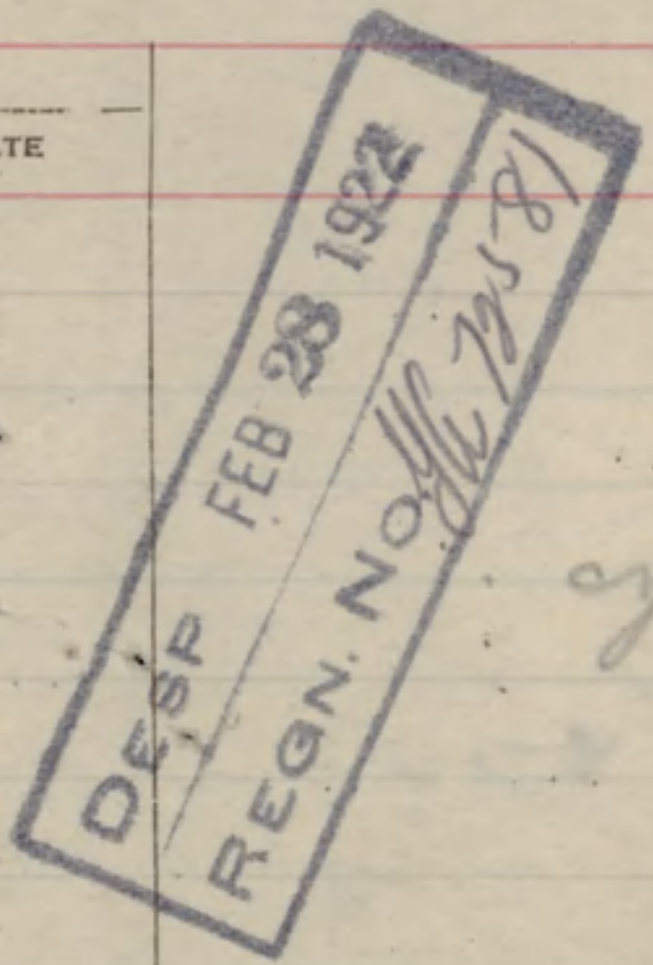
MEDICAL EXAMINATION. PLACE DATE

NAME REGT. No.

RANK AND UNIT

NEXT OF KIN

CABLE	
No.	DATE



NATURE OF CASUALTY

cyprus · 9

· 9 · 16 20

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

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS

com.

Number 488746 Rank Pte

Surname BROWN

Christian Name Joseph (J.H.)

Unit 13th Bn Canterbury Theatre of War France

Date of Service 8.2.16

Remarks Camp Hill Military Hospital Halifax

Latest Address ~~No 14 Colliery~~ ~~New Waterford Cape Breton~~ N.S. N.S.

Roll No. B Page 11220

D.M.

Rank Pte. Name BROWN, Joseph. Reg'l No. 488746

P—56

Unit Draft 63rd to 17th Res Bn. If in perm. Corps, What Unit? Married or Single Single.

Place and Date of Enlistment Sydney 12th Nov.1915. Place of Birth Newfoundland.

Name and Address, Next-of-Kin Mrs Lucy Brown.

New Waterford, Nova Scotia, Canada. Relationship

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance Payable to

Relationship

Discharge, Date and Place Canada Reason Character

JAN 19 1918 CANADIAN OVERSEAS EXPEDITIONARY FORCE

V.W.

Checked on N.E. Card Index

Checked by

Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualtjes, etc.
																10 00	Due from Pres Regt
Feb 1	29	29	1	29 00	29	10	2 90		31 90			9 73			9 73	32 17	Touch 16.3.16 31/3/16 a330
Mar 1	31	31	"	31 -	31	"	3 10		66 27 954			4 87		9 -	1 80 15 67	50 60	Do. 13.3.16. 14.3.16 " " 1643
				60 ✓			6 00 10 ✓		76 ✓			14 60 ✓		10 80	25 40 ✓	50 60 ✓	a&m

BALANCE TRANSFERRED TO NEW LEDGER.

Carried forward to Large Ledger sheet

16 8 1 2.30

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date						

Pte Name Brown Joseph

M. F. W. 41
1 0M—7-16
1772-39 889.

L. P. C. No. B 2746

Regimental No. 488746

Unit 63 Bn R.D.

Date of enlistment Octo 1915.

Place of " Waterford

Married (yes or no) No.

Amount of pay assigned monthly $ 15.00 1-4-17-30-9-17. $90.

To whom payable Harry Brown.

Name and address of ~~next-of-kin~~ Home. New Waterford C.B.

M.B. 1-10-17. Conv Home.

Date and place discharged

Reason for discharge

Character on discharge

L. Castle 30-9-17. New Waterford Cape Breton N.S. Cat D3. A1. 649-B-3428.

L. L. Job 5351—M. & D. 6880.

Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
	10-7-17.							185 74								E.L.P.C
11-4-17.	31-10-17.	113	1.00	113 00	113	.10	11 30.		310 04					24 33		A.R 116
														9 73		AR 1419.
														110 00		Halifax D.D.
													15 00			Aug 1917
													15 00			Sept 1917.
														80. 181 86		V.D charges. 28-4-17.
															128 18	L.P.C pend on
									310 04						310 04	% adjusted to 31-10-17.
																transf to. Blind.
																Left to Joan
																Sup. L.P.C. 67
																22.7.18. 73" Unit.
																Recovered 4/4/18 "73" Unit.

Cr Bal. brot forward 128 18 — 128 18

Sup L.P.C. 3407

Cr. Balance 941 — 128 18

Eng A1P charged 4 months to 31-7-17 = $60.00

M. F. W 41
1 0M—7-16
1772-39 889

Name.....

Regimental No.

Unit

Date of enlistment

Place of "

Married (yes or no)

Amount of pay assigned monthly $

To whom payable

Name and address of next-of-kin

Date and place discharged

Reason for discharge

Character on discharge

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date					

L.L. 1927 M. & D. 7814.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12.
25m—4-17.
H. Q. 1772-39-819.

To Whom Harry Brown

Address New Waterford
Cape Breton
N.S.

Rate 15¢ Apl 1/17

By Whom Assigned Brown Joseph H.

Regtl. No. 488746

Rank Pte

Corps 63 Btn

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			2 M 28 3/17 B 16 3/17
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

CONSOLIDATED 6 ACCOUNT

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12a.
50m.—6-16.
1772—39—819.

Sheet No. 2. Harry Brown

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

PAYMENTS. Name of Soldier Brown Joseph H. Pte 488746 63 Btn

Month.	Year.	Cheque No.	Amt.	Remarks.
				15 Apl 1/17
April	1916			$30 overpayment in Aug & Sept recovered by CP pay E 0 2 on file 2256-9708 S H S 8/11/17
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April				
May		W 14764	30	} 30. S
June		H16375	15	15.
July		N20076	15	B
Aug.		Q27252	15	90
Sept.		P33927	15	
Oct.				
Nov.				
Dec.				
Jan.	1913			
Feb.				
March				
April				
May				
June				
July				

JGR

..... A/c Closed

90 Ret'd per Clandovery Castle

Date 19/9/17 F. X 10/10/17

..... Clerk J68

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.				

Env 1 P.

14695/292

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

225-6-J-54

Name Brown, Joseph
Surname Christian Name

Regimental Number 488746 Rank Pte. Address (in full) New Waterford,

Unit 13th Bn. C.B.

Original Unit

District where paid M.D.6

Date of Discharge 17-7-18

P. D. P. Filing Number 5-170-6

Rates:—Regimental pay $ 1.00 per diem: Field Allowance $ .10 per diem. Separation Allowance $ per month.

L. L. 22573—M. & D. 8009.

Total Credits 91 days		FIRST PAYMENT Cheque No. A	Date	Amount 30 days		SECOND PAYMENT Cheque No. B	Date	Amount 30 days		FINAL PAYMENT Cheque No. C	Date	Amount 31 days		Balance Over-payments to be Recovered		Total Amount Paid	
100	10	2228	17-7-18	33	00	2132	17-8-18	38	90					28	20	71	90
		1st G/10685	21-2-19	70	00												
539A		2nd G. 26301	5-3-19	70	00												

M. F. W. 127.
60M—6 17.
1772 39-1140.

Remarks: Dr.Bal. 6 C.G.R.

1292

Dec'n No. 14695 / W. S. G. File No 2256.- J-108

Award ..... days at $ ~~70.00~~ per day $ 350.00

S. A. ..... months at $ .... per mo. $ .. $

Less P, D. P. Credited $ ~~100.10~~

$

Less further debit balance $ .....

Net due paid as below 249.90

TO SOLDIER [illegible] DEPENDENT

0	Ag. No	Ch No	Amount		No	Amount	
21.2.19 1	866	10685	70.00				
5.3.19 2	531A	26301	70.00				
10.4.19 3	1051B	42[illegible]343	70.00				
13/5/19 4	1022C	460091	39.90				
5							
6							
	Total		349	90	Total		

GEN'L AUDITOR
Posting checked by
Rogers
Date 13.3.19.

New Waterford

Cape Breton

N.S.

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

Apr. 1/17

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

15.			

PARTICULARS OF SEPARATION ALLOWANCE

No. 477746

Rank Pte Promoted Reverted Discharge

Soldier's Name Joseph H. Brown

Battalion 63rd Battn.

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name Harry Brown

Address New Waterford, Cape Breton

Change of Address N.S

1

2

3

4

Date 1917	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
Sep 30			90	90	a/c closed 30/9/17 Retd per Clandonary Castle 19/9/17

M. F. W. 128
400m.—6-17—1772-33-1141
L. L. 22320—M. & D. 7493.

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. 22820—M. & D. 7993.

OPINION OF THE MEDICAL BOARD—(*Continued*).

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

Recommend he be discharged on the ground of previous attack of Insanity and bad family history. His mother suffering from Chronic Insanity

Before signing the President of the Medical Board will read the certificate signed by the soldier, to the soldier, and if no change is indicated will initial the certificate.

President.

PLACE Stobs W.S.

DATE 24-V-18

R 708 Brum OP

} Members.

APPROVED BY

APPROVED
E. Gilbert Major
A.D.M.S. G.O.C. M.D. No 6

Assistant Director of Medical Services.

DATE 7.6.18

APPROVED BY

Director-General of Medical Services.

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

President.

PLACE.....

DATE.....

} Members.

OPINION OF THE MEDICAL BOARD

14. (*Continued*).

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

No

16. Can the former trade or occupation be resumed ? Yes - if he remains as at present. to which is unlikely
(If not, briefly state why.)

17. Recommendations Discharge F

E. [illegible]
Medical Officer by whom the case is brought forward.

STATEMENT OF THE SOLDIER.

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

I, the undersigned Joseph Brown 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

J Brown
Signature of soldier examined.

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 criticized.

19. Is the soldier fit for

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

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

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

9. Present condition.—(*Continued.*)

and eats well. Has had fits before and since enlistment of which there is no description among his documents. Was in Nova Scotia Hospital before enlistment May 1915. for three months. Reflexes exaggerated.

(b) Are the following systems normal? If not, briefly state abnormality

Nervous As above Digestive normal Respiratory normal Cardiac normal

Genito-Urinary normal. Skin, Middle Ear, Eye or any other part normal.

10. History: (*a*) of Condition referred to in "a" section 9.

History of trouble as above before enlistment. Returned from France Sept. 1916 on account of fits. In hospital in England under observation for a year.

(*b*) Here give a description of wounds, scars, deformities, and signs and symptoms of abnormal conditions present and not included in answer 8. This section cannot be completed without stripping the soldier and subjecting him to a thorough physical examination.

Nil

11. If the disabling condition had its origin before enlistment, has it been aggravated on service?

Yes.

12. Was the disability caused or aggravated by negligence, by vice or by misconduct, or by unreasonable refusal to accept treatment? No

The regimental documents will be referred to.

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

13. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? Permanent

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

Observation in Hospitals and sedatives.

Duplicate

MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" issued by the B.P.C. and instructions issued by Militia H.Q., Ottawa, will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of Sections 1 to 17 of this Form and will obtain the signature of the soldier 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 soldier'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 soldier concerned, from witnesses, or from documents.
4. Special care is required in answering question 13. Please read the questions carefully. All questions must be answered.
5. If space provided under any sections is insufficient use blank space, page 4 or add another sheet. Such entries or 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 8, 9 and 10 be communicated to the soldier, 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 Halifax, N. S. DATE May 1918.

1. 1 (a) Unit 13th Batt. (b) Regimental No. 488746 (c) Rank Pte.

(d) Surname Brown (e) Christian name Joseph

2. Age last birthday 23 Date of birth April 1894

3. Enlisted at Sydney, N. S. on Oct. 12, 1915.

MILITARY DISTRICT No. 6
HALIFAX, N. S.
JUN 8 1918
59-B-783
M. D. No. 6

4. Personal description:—

(a) Height 5' 4" (b) Weight 135 (stripped) (c) Complexion Medium

(d) Colour of hair Black (e) Colour of eyes Blue (f) Identification marks Nil

5. Address after discharge (for the use of the Board of Pension Commissioners)

New Waterford, Cape Breton, N. S.

6. Former trade or occupation Mine operator.

7. (a) Service	Years	Days
	2	230

	Periods	
	From	To
63rd Regt. 17th Res. Batt. 13th Batt. in France. Hospitals. 6th C.G.R.	Oct. 12, 1915.	Present.

(b) Has he been overseas? Yes 8. Original disease or disability Fits (Epileptoid)

(a) Date of origin About Jan. 1915. (b) Place of origin New Waterford.

(c) Cause* Hereditary Predesposition and worry.

(d) Present disease or disability Mental Instability.

9. Present condition (a) (Important to be a full description of the present disabling condition or conditions only.) "History" must be recorded in Section 10.

[After describing all abnormalities, anatomical and functional, contributing to present disability (see section 11) state whether such disability is directly due to (*a*) weakness, (*b*) loss (complete or partial) of any organ or member of its functions, or (*c*) to the necessity for rest of the body or of some of its parts.]

At present seems to be mentally up to the average. Memory is fairly good. Well ~~disoriented~~ oriented as to time and place. No evidence of any delusion or hallucinations. Not obviously depressed. Says he is nervous. Sleeps

M. F. B. 227.
300M.—2-18.
1772—39—117.

MARRIED OR SINGLE S.

PLACE OF BIRTH Newfoundland

NAME AND ADDRESS OF NEXT OF KIN Mrs Lucy Brown
New Waterford Nova Scotia

RELATIONSHIP OF NEXT OF KIN

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL
28.4.17	10-5-17	V	

REG'L. NO. 488746. RANK Pte NAME Brown. Joseph

IF IN PERMT. CORPS WHAT UNIT UNIT 17th

PERMANENT FORCE ALLOWANCES

PLACE OF ATTESTATION Sydney

DATE OF ATTESTATION Nov 12th 1915.

ASSIGNED PAY MONTHLY $15.00 DATE EFFECTIVE 1/4/16 Jawn #47982 1.7.17 Gold Caps.

PAYABLE TO Harry Brown. New Waterford. C.B. N.S. Can RELATIONSHIP Brother

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE Trans to. NE. Date 10.7.17

PAYABLE TO J.M.O.

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) ~~Stopped~~ Stopped EFFECTIVE ~~28.-8-17.~~ 1/7/17 RELATIONSHIP ~~Invalided to Canada~~

DISCHARGE DATE AND PLACE ~~Canada 7/6/17~~ 10.7.17. Canada. REASON ~~Invalided to Canada~~

REASON AND AUTHORITY Upder 17 9. 6.6.17
Invalided. Auth Buxton 30/6/17. 20 W.6.
~~Invalided.~~

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

TRANSFERRED TO 13th DATE 7/6/16 AUTHORITY Boar 21/8/16

TRANSFERRED TO C.A.C. DATE 1/1/17 AUTHORITY Debt Notes

TRANSFERRED TO Pay 2 "L" DATE 31/5/17 AUTHORITY Mobridge 17th 6.6.17

TRANSFERRED TO K Dis DATE 8/6/17 AUTHORITY ~~Con~~ Con Sydney 6 Dec 16 auth: Buxton 4/7 20 W.6. 30/6

" " ~~Gen Hosp. P.E.~~ ~~6.6~~ ~~10/7/17~~

" " L.P.C. 10/7/17

RECEIVED N.E. BRANCH JAN 19 1918 CANADIAN OVERSEAS

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
1916 Apl 1-30	30	1.00	30		30	10	3							10	76									1460				1080	2540	5060					
May 1/31	31	1.00	31		31	10	3	10							33 00			1143	20/4/16						973			x 1 20 / 15 40 / 2/8 60	4493	3867					
June/6	6	1.00	6		6	10		60							34 10	1169	8/5							486				486	6791					
July/30	24	1	24		24	10	24	0							6 60														7451					
Aug/31	31	-	31		31	10	3	10							24 0											456 681		75 19	1107	8984					
Sept/30	30		30		30		3								34 10			1412	3/7						762				562	12182					
Oct	31		31		31		3	10							34 60													13640	13640	1907					In confinement awaiting trial 26/9/16 Sent to 6 mo. 28/10/16 Commuted to 90 Days 7 Apl 17 28/12/16 30 33 -
Nov	30		30		30		3								33 -															5202					
Dec	31		31		31		3	10							34 60										687				721	7891					
			335																							730			730	10461					
Jan	31	1.10	34	10																					486	224	33		2919	10952	185 / 180	-		2 Reduccae Eff. 1/1/17
Feb	28		30	80											34 60	33	20/12	230	8/1	307	24/10			994	243	486		129	1832	12530					1 29 Ors #1417 Bus May/15 2 on R Bo 1879 11/5/16
															30 80	418	23/1	632	9/2	3603	7/12/16			43	43	43			1215	14395					
			433	40										10 -	443 40					3255	11/1/16			31 63	17 21	35 29	31 63	183 69	299 45					
																				3424	22/11/16													

Entered on N.E. Card Index
Checked by

Small Ledger Sheet.

488746 Pte Brown. J. AF B.-00 Eff 1/4/17

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
			433	40										10 -	443 40
Mar	31		31	10											31 10
Apr	30	1.10	33	-											33.
May	30	-	33	-											33 -
31	1		1	10											1 10
Jan. 7	7		7	70											7 70
—															—
—														120	1 20
														60	60
															35H 10
8/29	22	1.10	24	20											24 20
July	9	1.10	9	90										1 10	9 10 9 90
- 10	1		1	10										441	5 51
Aug.															
Aug.															

ACQUITTANCE ROLLS 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date
		Leave 543	28/5				
Roll 364	27/5	629	9/3				
						538.	27/4/17 Willingham

CASH PAYMENTS 1	2	3	4
31 63	17 21	35 29	31 63
	4 99		
	.243 x .487		
		24	
		24	
		48	
			36 77
34 06	27 09	36 25	31 63
		49	

ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS
	~~83 69~~	~~183 69~~ 299 45
—		17 29
15	9 -	24 -
15	~~1 96~~	15 96
15		15
	60	60
		~~157 80~~
		~~184 80~~
		186 80
		211 00
15 -	- -	15 -
		212 51
60	7 80 ✓	
	16 80	24 60
		49

BALANCE Credit	BALANCE Debit	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE
143 95			
165 76		156 80	8 96
174 76			
191 80			
192 90			
185 60			
186 20			
207 00			
187 91			
187 42			

REMARKS

£9.00 Y.D. 16/3 - 30/3/17. 15 days.
K.C.Z.T. 99 Warlingham. 10/7.
Reamp Pay 2 L. 31/5/17
Uxbridge 17a/8. 6/6/17.

V.D under 1st Jan 1916.

V.D 14/3/16 Chgd Leave
V.D 13/3/16. 14/3/16 Chgd as 3 days Std be 2 days
V.D 31/3/16 Chgd Leave
Int Def Acct to 31/5/17 £9.41

A3M. FORM REN'D 1/7/17 EFFEC. 1/7/17.
DISCHARGED TO Hosp DATE 1/7/17.
PAYBOOK VERIFIED 5/6/17.
Cr BAL £ 160 00 P.C. REN'D 7/6/17.
AUTH Uxbridge 17a 6 6 17

Checked Judd Sgt.

L.P.C. Invalided 10/7/17. auth: Buxton 20 W.L 30/6.
Defer to Brit Hosp 10/7/17 off 20 days 10/7/17 to Uxbridge 10/7/17
P.T.A. 30/6/17. £1.10

A3M. FORM REN'D Hosp EFFEC. 1/7/17.
DISCHARGED TO Extd DATE 10/7/17.
PAYBOOK VERIFIED 10:7:17.
Cr BAL £ 185 74 P.C. REN'D 10/7/17.
AUTH Buxton 30/6/17. 20 6
Invalided.

Checked Williams L.P.C.

Supp L.P.C. Cr. 177 82 Issued 7/8
Supp LPC. 24/8/17. Cr 160 65 ✓
£4.80 FD 31-3-17 to 27-4-17 28 Days Pte Warlingham
£9.50 FD. 28-4-17 to 5-5-17 13 days
FD. 754 Warlingham.
Supp LPC 14/1/18. Cr. 126 55

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED PAY	SER ALLCE. ENG.
6th Dr	Def								18 42		
6th				AR 1424 6th Bn Buxton 28/5/17	9 24						
✓				Draft 1546 - Unfit Patients 1/6/17	2 43						
				R17 29/5/17 CCH Hectordale	R 17 24 3/4				163 08		
Nov.				DRAR 989. 6th Unfit. 18/5/17	2 43						
✓				✓ 1215. CRCS Hosp. Buxton 30/5/17	24 33						
✓				1644 CCH Unfit 6.6.17.	9 74				126 58		
					36 50						

Trans to Canadian Liability Acct

Balance transferred to N. E. Branch. Nil.

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.
Ramsgate. 23/2/17.	Case has symptoms as mentally deficient but we find him quite intelligent enough to carry on at Base. Clarence L. Starr Lt Col. Canc
Aldershot 9 June 1917	Recommended for Lord Derby Hospital for observation. R.P. Borden Capt. C.A.M.C.
	A.D.M.S. CANADIANS LONDON AREA 13 Berners St LONDON W. Approved:- 11 JUN 1917 Captain C.A.M.C., for A.D.M.S., Canadians, London Area.

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

Temporary

Army Form B. 178.

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

MEDICAL HISTORY of

Surname Brown *Christian Name* .....

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 ... (*a*) .....

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

Approved by (*Signature*) .....
(*Rank*) .....
Medical Officer.

Enlisted ... ... at .....
on ..... day of ..... 191 .

Joined on Enlistment ... / Transferred to	Corps.	Regtl. No.
	1st Can. Div.	455746

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 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 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.
	Day	Month	Year	Day	Month	Year				
M.H.H. Ramsgate	15	2	17	27	2	17	Influenza	13	Transferred to R.E.A.E. Hastings.	Capt. C.A.M.C.
Mil. Hosp. Court Farm Wokingham	15	3	17	10	5	17	Gonorrhoea	56	Routine, Scabies	Registrar, for O.C., Granville Can. Sp. Hosp., Capt. R.A.M.C.
Canadian Convalescent Hospital, Hillingdon House, Uxbridge.	10	5	17				20 Mentality, Def.		Complains of nervousness. Gives history of "fits". Was in Yarra Euston Hospital for insanity for 3 months. No diagnosis Patient's story is inconsistent & is apparently mentality deficient.	Capt. R.A.M.C.

18. (*a*) Is the disease complicated with epilepsy, paralysis, or homicidal or suicidal impulses?

(*b*) If suicidal tendency exists, the way in which self-destruction has been attempted should be stated.

He gives history of fits, that may be epileptiform but I have no evidence to prove it.

N. A.

19. (*a*) Is the patient noisy, dangerous, mischievous, or given to steal?

(*b*) Are his habits cleanly or the reverse?

no

Habits are cleanly.

Chas Symmons
Capt RAMC
Officer in medical charge of the case.

Station Uxbridge

Date 31. 5. 17.

The A. D. M. S. (or D. D. M. S.)
London (Canadians' area)
District (or Command).

I recommend that this soldier be brought before a Medical Board, with a view to his mental condition being definitely affirmed, and his disposal determined.

J. A. Sponagle
Lt Col. C. A. M. C.
Officer in charge, Military Hospital.

Station Uxbridge

Date May 31st 1917

Army Form B. 183.

Report on a Case of Mental Disability.

1. Regimental Number. 488746 Rank. Pte
   Surname. Brown Christian Name. Jas.
2. Regiment or Corps. 13th 13th
3. Age last birthday. 21 Religion. C. of E.
4. Place of birth. St. Johns Newfoundland
5. Married or single. Sgl.
6. Names and Addresses of nearest surviving relatives.
   Mrs. Mary Brown. Hosp. for insane Hardwood Hill, Sydney. Cape Breton N.S.
   Harry Brown. New Waterford " " "
   Miss Annie Brown " " " "
   " Lucie " " " " "
   " Dina " " " " "

7—Service. 1 7/12 Years. 18 ~~Days.~~

COUNTRY	PERIODS From	PERIODS To
Canada	Oct. 12. 1915	Jan 22. 1916
England	Feb 1. 1916	May 1. 1916
France	May 1. 1916	Oct. 15. 1916.

The answers to the following questions will be in the handwriting of the Officer in medical charge of the case.

8. Character, especial regard being paid as to whether temperate or otherwise.
(*For guidance in forming an opinion, the Company Conduct Sheet will be obtained from the soldier's Commanding Officer.*)

Patient is quiet, & depressed. Character is very temperate.

9. Form of mental disease.

Dementia praecox.

J. McCandlish

(8 2 25) W 10941—1992 25,000 1/15 H W V (R) Forms/B. 183/10

10. Is this a first attack? No. He suffered the same before Enlistment.

11. Duration of present attack. Since June 1916.

12. Was the attack sudden or insidious? If the latter, mention any peculiarity of behaviour or change in habits which preceded it. Onset insidious. Had been free from fits for 1 year, before which time he used to have fits & peculiarities sufficient to warrant treatment in a Hosp. for insane. Fits apparently start with dizziness & tremor, followed by unconsciousness for 24- & 8 hrs, after which he is quite again.

13. Was it preceded or accompanied by any particular illness, such as fever, rheumatism, syphilis, &c.? No.

14. What are the supposed causes (moral or physical) of the attack? unknown.

Has the patient suffered from sunstroke, concussion, or injury of the head? Has been exposed to concussion in France, was in the lines for 5 mos.

15. Has the disability been caused or aggravated by his service as a soldier? If so, how? No, I dont think it has.

16. Does any hereditary predisposition exist? Yes—
His mother is now in Hospital for insane, apparently suffering from mania.
Sister also had fits & used to run away from home &c.

17. What are the particular ideas or actions which have induced the belief of insanity?

(a) Observed by you.

(b) Communicated to you by others.

(a) Patient is depressed & melancholic. Seems to be worrying about himself continuously, especially at night. No delusions or hallucinations.
Patient is slow to understand & to answer questions.

(b) no information available.

PART III.

Proceedings of the Pensions and Claims Board on the Soldier mentioned in Part I.

The Pensions and Claims Board, Canadian Expeditionary Force, assembled at

on the day of 191

Members of the Board :—

The Board, having considered the evidence of the soldier marginally named, together with the documents submitted, recommend :—

Dated at this day of 191

Signatures of the Board

President.

PART I. A.F.B. 179 Canada (Revised).

Reserved for M.H.C.

Regt. No. 488746 Rank Pte. Surname Brown Christian Name Joseph

Unit or Corps—(*a*) Overseas from United Kingdom 13th Bn. (*b*) In United Kingdom

Born at—Town St Johns County or Province Country Newfoundland

Date of Birth—Day Month Year Age 21 yrs. months.

Joined at New Ottoford N.S. Canada Date October 15th 1915

Former Trade or Occupation Labourer

Permanent marks or peculiarities that will serve for future identification :—

Height—feet 5 inches 6 Colour of eyes Blue.

Signature of Soldier (*for indentification purposes*)

Medical Report.

The answers to the questions below are to be filled in by the Officer in medical charge of the case. He will carefully discriminate between the soldier's unsupported statements and the evidence as recorded in the medical or other military documents bearing on the case. He will plainly state the existence of any of the disability prior to the soldier joining for the present war.

1. DISABILITY (*State the actual disabling conditions as distinguished from the diseases or injuries from which they resulted*).
(*Follow the official nomenclature as far as possible.*)

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

Disabilities Group (*a*). MENTAL INSTABILITY

Disabilities Group (*b*). /

Disabilities Group (*c*). /

2. CAUSE OF DISABILITY. (*Follow the official nomenclature in stating the disease or injury.*)

	Disease or injury to which the disability is due.	Place of origin.	Date of origin.
(*i*) As to Group (*a*) above.	Heredity Predisposition	New Ottaford N.S.	Indefinite May 1915 the earliest date obtainable
(*ii*) As to Group (*b*) above.	/		
(*iii*) As to Group (*c*) above.	/		

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

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

(*i*) As to Group (*a*) above? Yes If yes, has Active Service aggravated it? Yes

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

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

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

(*i*) As to Group (*a*) above? No

(*ii*) As to Group (*b*) above? /

(*iii*) As to Group (*c*) above? /

PART I. *(continued).*

5. If a cause of disability was an injury received on Active Service, was it received— Not applicable

(*i*) While on duty ? (*ii*) While off duty ?

(*iii*) Was a Court of Inquiry held ? (*iv*) Where ? (*v*) When ?

(*vi*) Opinion of the Court ?

6. HISTORY OF THE CASE. *(State concisely the essential points of the history, noting the entries made on the Medical History Sheet and other records.)*

In 1909 patient began to have epileptoid fits and continued to have them with the result that in May 1915 he was sent to the Hospital for Insane, Nova Scotia. for eight weeks
Enlisted October 1915 – came to England January 1916 – no fits in England.
Went to France May 1916 – had a fit in June, July and August and at irregular intervals afterwards until Feb. 1917 when he reported sick – sent to Boulogne + back to duty.
Again reported sick – sent to Epsom, Ramsgate + Uxbridge – at latter place 10.5.17 –
on May 28–1917 Boarded at Uxbridge and recommended for 'Removal to Lord Derby War Hospital for Observation'.
No note of any personal observation by an M.O. of a fit in documents –
Has had insomnia, headaches – reported depressed + melancholic – to follow cerebration

7. PRESENT CONDITION. *(Give previous and present weight if likely to indicate progress of disability.)*

At present he is fairly bright, intelligent, and rational in conversation: he shows lack of attention and his mind appears to wander continuously. States that he has no warning of a fit that it renders him unconscious and leaves him sleepy and with a headache each time – also that he urinates involuntarily during a fit.
No evidence of any neurological disease – no sign of tongue being bitten or other injury from a fit.
Intelligence fair – memory good – Knows place, dates, days etc well.
In good physical health.

8. OPERATION. (*i*) Was one performed ?

(*ii*) If so, state what. Not applicable

(*iii*) Was one advised and declined ?

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

9. (*i*) Is there loss or decay of teeth attributable to Active Service ?

(*ii*) If so, describe. Not applicable

10. DO YOU RECOMMEND :—

(*a*) Fit for duty ? (a) No

(*b*) Fit for base duty ? (b) No

(*c*) Invalid to Canada ? (c) Invalid to Canada

(*d*) Discharge from the Service as permanently unfit ? (a) No.

Date of Report 23 June 1917. Signed T. Bensonhaven Capt RAMC
Officer in medical charge of case.

Station Lord Derby War Hospital

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

THE LORD DERBY WAR HOSPITAL Date 25/6/17 WARRINGTON

Dated at ..... N. M. Freeman Capt Major, R.A.M.C. Registrar, for THE LORD DERBY WAR HOSPITAL Station, on ..... 191 {Officer i/c Hospital / S.M.O. Brigade} Strike out one of these.

* Delete if inapplicable.

PART II.

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

Clear and decisive answers are to be given to all questions. Such terms as "may," "perhaps," "probably," "possibly," are not to be employed. Disability due to causes arising on Active Service is to be clearly shown in order that the Pensions Authorities may deal with the case properly.

11. Is the disability fully indicated in Part I (1) ? Yes.
If not, indicate it.

12. Is the cause of the disability fully indicated in Part I (2) ? Yes.
If not, indicate it. Mother in an asylum for Insane.
Sister also had fits.

13. Was the disability caused or aggravated by— (*a*) Negligence of the Soldier { Caused ? No. / Aggravated ? No } (*b*) Misconduct of the Soldier { Caused ? / Aggravated ? } No.

14. 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, 10%, 20%, 30%, 40%, 50%, 60%, 70%, 80%, 90%, or 100%.) 50%.

15. THE PENSIONABLE DISABILITY—*(see Part I (3). Aggravation on Active Service of a disability existing previous to joining is to be included in the estimate).*
What part of the entire disability estimated next above in (14) is due to causes arising during Active Service ? *(Estimate at none, 1/5, 2/5, 3/5, 4/5, or all).*
Two-fifths.

16. Permanency of the Pensionable Disability estimated next above in (15).
(*i*) Is it permanent ? No
(*ii*) If not permanent, what is its probable minimum duration *(in months)* ? at least twelve months then reconsider

17. If an operation was advised and declined, do you consider the refusal to have been unreasonable ? N a.

18. Remarks.

19. Recommendation :—(*a*) ~~Fit for duty~~ ?
(*b*) ~~Fit for base~~ duty ?
(*c*) Invalid to Canada ? Yes.
(*d*) ~~Discharge from Service as permanently unfit~~ ?

Classification for the Military Hospitals Commission.

Date of Board 26/6/17 THE LORD DERBY WAR HOSPITAL WARRINGTON

Station

Signatures of the Board: R Sayer MD Major, R.A.M.C. (T.) President.
T. Bensonhaven Capt RAMC
Alan Paget Lieut RAMC

Approved ..... A.D.M.S.
Captain C.A.M.C.,
A.D.M.S. CANADIANS, LONDON AREA, LONDON.

Dated at for A.D.M.S., Canadians, London Area. Station 27 JUN 1917 191

PART III.

Proceedings of the Pensions and Claims Board on the Soldier mentioned in Part I.

The Pensions and Claims Board, Canadian Expeditionary Force, assembled at

on the day of 191

Members of the Board :—

The Board having considered the evidence of the soldier marginally named, together with the documents submitted, recommend :—

Dated at this day of 191

Signatures of the Board

President.

PART I. A.F.B. 179 Canada (Revised).

Reserved for M.H.C.

Regt. No. 478746 Rank Pte. Surname Brown Christian Name J. H.

Unit or Corps—(*a*) Overseas from United Kingdom 13th. Bn. (*b*) In United Kingdom [redacted]

Born at—Town St Johns County or Province Country Newfoundland.

Date of Birth—Day Month Year Age 21 yrs. months.

Joined at New Ottoford Date October 12th 1915.

Former Trade or Occupation Labourer

Permanent marks or peculiarities that will serve for future identification :—

Height—feet 5 inches 6 Colour of eyes Blue.

Signature of Soldier *(for identification purposes)*

Medical Report.

The answers to the questions below are to be filled in by the Officer in medical charge of the case. He will carefully discriminate between the soldier's unsupported statements and the evidence as recorded in the medical or other military documents bearing on the case. He will plainly state the existence of any of the disability prior to the soldier joining for the present war.

1. DISABILITY (*State the actual disabling conditions as distinguished from the diseases or injuries from which they resulted*).
(*Follow the official nomenclature as far as possible.*)

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

Disabilities Group (*a*). Mental Instability.

Disabilities Group (*b*).

Disabilities Group (*c*).

2. CAUSE OF DISABILITY. (*Follow the official nomenclature in stating the disease or injury.*)

	Disease or injury to which the disability is due.	Place of origin.	Date of origin.
(*i*) As to Group (*a*) above.	Heredity Predisposition	New Ottoford N.S	Indefinite. May 1915. The earliest date obtainable.
(*ii*) As to Group (*b*) above.			
(*iii*) As to Group (*c*) above.			

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

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

(*i*) As to Group (*a*) above? Yes If yes, has Active Service aggravated it? Yes

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

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

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

(*i*) As to Group (*a*) above? No.

(*ii*) As to Group (*b*) above? --

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

PART I. (*continued*).

5. If a cause of disability was an injury received on Active Service, was it received— Not Applicable.

(*i*) While on duty? (*ii*) While off duty?

(*iii*) Was a Court of Inquiry held? (*iv*) Where? (*v*) When?

(*vi*) Opinion of the Court?

6. HISTORY OF THE CASE. (*State concisely the essential points of the history, noting the entries made on the Medical History Sheet and other records.*)

In 1909 patient began to have epileptoid fits and continued to have them with the result that in May 1915 he was sent to the hospital for insane, Nova Scotia. for eight weeks. Enlisted October 1915 - came to England Jan.1916.No fits in England.
Went to France May 1916. Had a fit in June, July and August and at irregular intervals afterwards until Feb.1917 when he reported sick. Sent to Boulogne and back to duty. Again reported sick. Sent to Epsom, Ramsgate and Uxbridge. At latter place 10.5.17. On May 28.1917. Boarded at Uxbridge and recommended for removal to L.D.W.Hospital for observation.
No note of any personal observation by an M.O. of a fit in documents.
Has had insomnia, headaches. Reported depressed and melancholic, and of slow cerebration.

7. PRESENT CONDITION. (*Give previous and present weight if likely to indicate progress of disability.*)

At present he is fairly bright, intelligent, and rational in conversation: he shows lack of attention and his mind appears to wander continuosly. States that he has no warning of a fit, that it renders him unconscious, and leaves him sleepy and with a headache each time. Also that he urinates involuntary during a fit. No evidence of any neurological disease. No signs of tongue being bitten or other injury from a fit.
Intelligence fair, memory good. Knows place, dates, days, etc. well.
In good physical health.

8. OPERATION. (*i*) Was one performed?

(*ii*) If so, state what. Not applicable

(*iii*) Was one advised and declined?

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

9. (*i*) Is there loss or decay of teeth attributable to Active Service? Not applicable

(*ii*) If so, describe.

10. DO YOU RECOMMEND:—

(*a*) Fit for duty? (a) No

(*b*) Fit for base duty? (b) No

(*c*) Invalid to Canada? (c) Invalid to Canada.

(*d*) Discharge from the Service as permanently unfit? (d) No.

Date of Report 23 June 1917 Signed T.Benson Evans, Capt.R.A.M.C.
Officer in medical charge of case.

Station Lord Derby War Hospital

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

THE LORD DERBY WAR HOSPITAL Date 25/6/17 WARRINGTON

H.M.Faulkner Capt. Major, R.A.M.C. (Officer i/c Hospital / S.M.O. Brigade) Strike out one of these.
Registrar,
THE LORD DERBY WAR HOSPITAL

Dated at Station, on 191

* Delete if inapplicable.

PART II.

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

Clear and decisive answers are to be given to all questions. Such terms as "may," "perhaps," "probably," "possibly," are not to be employed. Disability due to causes arising on Active Service is to be clearly shown in order that the Pensions Authorities may deal with the case properly.

11. Is the disability fully indicated in Part I (1)?
If not, indicate it. Yes

12. Is the cause of the disability fully indicated in Part I (2)?
If not, indicate it. Mother in Hospital for Insane. Sister also had fits

13. Was the disability caused or aggravated by— (*a*) Negligence of the Soldier { Caused? / Aggravated? } no. (*b*) Misconduct of the Soldier { Caused? / Aggravated? } no.

14. 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, 10%, 20%, 30%, 40%, 50%, 60%, 70%, 80%, 90%, or 100%.*) 50%

15. THE PENSIONABLE DISABILITY—(*see Part I (3). Aggravation on Active Service of a disability existing previous to joining is to be included in the estimate*).
What part of the entire disability estimated next above in (14) is due to causes arising during Active Service? (*Estimate at none, 1/5, 2/5, 3/5, 4/5, or all*). 2/5.

16. Permanency of the Pensionable Disability estimated next above in (15).
(*i*) Is it permanent? no.
(*ii*) If not permanent, what is its probable minimum duration (*in months*)? At least 12 months & then reconsider

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

18. Remarks.

19. Recommendation:—(*a*) Fit for duty?
(*b*) ~~Fit for base duty~~?
(*c*) Invalid to Canada? yes.
(*d*) ~~Discharge from Service as permanently unfit~~?

Classification for the Military Hospitals Commission.

Date of Board

Station

THE LORD DERBY WAR HOSPITAL Date 26/6/17 WARRINGTON

Signatures of the Board: R Rayen MD Major, R.A.M.C. (T.) President.
T Benson Evans Capt RAMC

Approved W Smedley A.D.M.S.

Dated at for A.D.M.S., Canadians, London Area. Station

Captain C.A.M.C.,

A.D.M.S. CANADIANS, LONDON AREA, LONDON, 27 JUN 1917

A M Paget Lieut RAMC

191

PENSIONS AND CLAIMS BOARD, Canadian Expeditionary Force, assembled at England, on the day of 191

Members of Board.

Proceedings.

The Board having considered the evidence of the man marginally noted, and the documents submitted, hereto attached, which form part of these Presents, marked

Signed at *this* *day*

of , 191 .

President.

A.F.M.S. 1312.
A.F.B. 179 Canada.
4703—15m—11/1/17.

Medical Report on an Invalid.

Station Aldershot

Date May 7/8.17

1. Unit. 13th Bn
2. Regimental No. 488746
3. Rank Pte
4. Name Brown J.H.
5. Age last birthday 21
6. Enlisted { on Oct. 12. 1915 / at New Ottaford: Cape Breton N.S.
7. Former Trade or Occupation { Laborer.
8. Disability. Mentally deficient

MENTALLY DEFICIENT.

Statement of Case.

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.

9. Date of origin of disability. indefinite. as early as May 1915 at least

10. Place of origin of disability. New ottaforie N. S.

11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case. In 1909 patient began to have fits, apparently epileptical, coming on about once a week; continued till MAY 1915 when he was sent to Hosp. for insane N.S. for 8 wks. No drugs. Enlisted in oct. 1915; had no fits until sent to Eng. in January. Says he had no fits on way to France May 1916 had a fit in June, another in July, again in August & at irregular intervals since. Feb. 1917 when he reported sick, sent to Base, then back to lines, reported sick again & sent to hospital at Epsom, then Canadian Convalescent Hospital at Bramshott, then to Shorncliffe, then to Seaford, then to Witley, then to Crowborough, then to Aldershot.

12. (*a*) Give your opinion as to the causation of the disability.

(*b*) If you consider it to have been caused by wounds received or illness contracted (1) in the presence of the enemy (2) on active service, explain the specific conditions to which you attribute it. (*See notes on page 3*).

1. } No cause unknown
2. } Likely congenital

13. What is his present condition?

Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.

No loss of weight. Complains of nervousness, headaches, insomnia. - appetite good Bowels regular. Patient is obviously mentally deficient, depressed, melancholic.

14. If the disability is an injury, was it caused

(a) In the presence of the enemy? No N. A.

(b) On active service? N. A.

(c) On duty? N. A.

(d) Off duty? N. A.

15. Was a Court of Inquiry held on the injury? No

If so—(a) When? N. A.

(b) Where? N. A.

(c) Opinion? N. A.

16. Was an operation performed? If so, what? N. A.

17. If not, was an operation advised and declined? N. A.

18. *In case of loss or decay of teeth.* Is the loss of teeth the result of wounds, injury or disease, directly* attributable to active service? No.

19. Do you recommend

(a) Fit for duty? No

(b) Fit for base duty? No

(c) Invalided to Canada? No

(d) Discharge as permanently unfit? Yes

Chasheim Capt RAMC

Officer in medical charge of case.

I have satisfied myself of the general accuracy of this report, and concur therewith, ~~except~~†

Station Can. Conv. Hosp Uxbridge

J. A. Ironside Lt. Col. C. A.M.C.

Officer in charge of Hospital.

Date May 31st 1917

* Loss of teeth on, or immediately after, active service should be attributed thereto, unless there is evidence that it is due to some other cause.

† Delete this word if no exceptions are to be made.

Opinion of the Medical Board.

NOTES.—(i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as it is essential that the Members of the Pensions and Claims Board should be in possession of the most reliable information to **enable them to decide upon the man's claim to pension.**

(ii.) Expressions such as "may," "might," "probably," &c., should be avoided.

(iii.) The rates of pensions vary according to whether the disability is attributed to wounds or injuries received or illness contracted, (1) in the presence of the enemy, (2) on active service. It is therefore essential when assigning the cause of the disability to differentiate between them (*see* Articles 641 to 648 of the Canadian Pay and Allowance Regulations).

(iv.) In answering question 20 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.

20. (a) State whether the disability is the result of injuries received or illness contracted, (1) in the presence of the enemy, (2) on active service.

a1 No — a2 aggravation by active service of a condition existing prior to enlistment

(b) If due to one of these causes, to what specific conditions do the Board attribute it? Has been in Hospital for insane May 26/15 - to - August 7/1915

21. Has the disability been caused or aggravated by

(a) Intemperance? No

(b) Misconduct? No

22. Is the disability permanent? Yes.

23. If not permanent, what is its probable minimum duration? Not applicable

To be stated in months.

24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present? Total

In defining the extent of his inability to earn a livelihood, estimate it at ¼, ½, ¾, or total incapacity.

25. If an operation was advised and declined, was the refusal unreasonable? Not applicable

26. Do the Board recommend

(a) Fit for duty? No

(b) Fit for base duty? No

(c) Invalided to Canada? No

(d) Discharge as permanently unfit? No

27. Remarks. Recommend his removal to the Royal Derby Hospital for observation

Signatures:—

Station Uxbridge Can. Conv. Hosp.

Date June 9/17

C. F. McGaw Capt. CAMC.

R. P. Borden Capt. CAMC.

Members.

President.

Approved.

Station A.D.M.S. CANADIANS, LONDON AREA, LONDON, W.1

Date 13 Berners St 11 JUN 1917

W. Smaedmill

Administrative Medical Officer.

Captain C.A.M.C.

for A.D.M.S., Canadians, London Area.

PENSIONS AND CLAIMS BOARD, Canadian Expeditionary Force, assembled at England, on the day of 191

Members of Board.

Proceedings.

The Board having considered the evidence of the man marginally noted, and the documents submitted, hereto attached, which form part of these Presents, marked

No.

Signed at *this* *day*

of , *191* .

President.

FORM D.M.S. 1312.
A.F.B. 179 Canada.
4703—15m—11/1/17.

166749

Medical Report on an Invalid.

Station Uxbridge.

Date May 28, 1917.

1. Unit. 13th Bn.
2. Regimental No. 488746
3. Rank Pte.
4. Name Brown, J.H.
5. Age last birthday 21
6. Enlisted { on Oct. 12, 1915. / at New Ottaford, Cape Breton, N.S.
7. Former Trade or Occupation { Laborer.

8. **Disability.**

MENTALLY DEFICIENT.

Statement of Case.

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.

9. Date of origin of disability. Indefinite, as early as May 1915 at least.

10. Place of origin of disability. New Ottaford, N.S.

11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case. In 1909 patient began to have fits, apparently epileptical~~l~~, coming on about once a week, continued till May 1915 when he was sent to Hospital for insane N.S. for 8 wks. No diagnosis. Enlisted in Oct. 1915, had no fits until he came to England in January. Says he had no fits in England. Went to France May 1916, had a fit in June, another in July, again in August and at irregular intervals till Feb. 1917, when he reported sick, sent to Boulogne, then back to lines, reported sick again and sent to England to Epsom, then Ramsgate, then to Uxbridge 10-5-17.

12. (*a*) Give your opinion as to the causation of the disability. Unknown.

(*b*) If you consider it to have been caused by wounds received or illness contracted (1) in the presence of the enemy (2) on active service, explain the specific conditions to which you attribute it. (*See notes on page 3*). 1.) 2.) No. Cause unknown, likely congenital.

13. What is his present condition?

Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.

No loss of weight. Complains of nervousness, headaches, insomnia, appetite good. Bowels regular. Patient is obviously mentally deficient, depressed, melancholic.

14. If the disability is an injury, was it caused

(*a*) In the presence of the enemy? N.A.

(*b*) On active service? N.A.

(*c*) On duty? N.A.

(*d*) Off duty? N.A.

15. Was a Court of Inquiry held on the injury? No.

If so—(*a*) When? N.A.

(*b*) Where? N.A.

(*c*) Opinion? N.A.

16. Was an operation performed? If so, what? N.A.

17. If not, was an operation advised and declined? N.A.

18. *In case of loss or decay of teeth.* Is the loss of teeth the result of wounds, injury or disease, directly* attributable to active service? No.

19. Do you recommend

(*a*) Fit for duty? No.

(*b*) Fit for base duty? No.

(*c*) Invalided to Canada? No.

(*d*) Discharge as permanently unfit? Yes.

Chas. Lewis, Capt. C.A.M.C.
Officer in medical charge of case.

I have satisfied myself of the general accuracy of this report, and concur therewith, *except*†

Station C.C.H. Uxbridge.

J.A. Sponagle, Lt.Col. C.A.M.C.
Officer in charge of Hospital.

Date May 31st, 1917.

* Loss of teeth on, or immediately after, active service should be attributed thereto, unless there is evidence that it is due to some other cause.

† Delete this word if no exceptions are to be made.

Opinion of the Medical Board.

NOTES.—(i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as it is essential that the Members of the Pensions and Claims Board should be in possession of the most reliable information to **enable them to decide upon the man's claim to pension.**

(ii.) Expressions such as "may," "might," "probably," &c., should be avoided.

(iii.) The rates of pensions vary according to whether the disability is attributed to wounds or injuries received or illness contracted, (1) in the presence of the enemy, (2) on active service. It is therefore essential when assigning the cause of the disability to differentiate between them (*see* Articles 641 to 648 of the Canadian Pay and Allowance Regulations).

(iv.) In answering question 20 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.

20. (*a*) State whether the disability is the result of injuries received or illness contracted, (1) in the presence of the enemy, (2) on active service.

(*b*) If due to one of these causes, to what specific conditions do the Board attribute it?

a1: No.

a2: Aggravation by Active Service of a condition existing prior to enlistment. Has been in Hospital for insane May 26/15 to August 7/1915.

21. Has the disability been caused or aggravated by

(*a*) Intemperance? No.

(*b*) Misconduct? No.

22. Is the disability permanent? Yes.

23. If not permanent, what is its probable minimum duration? Not applicable.

To be stated in months.

24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present? Total.

In defining the extent of his inability to earn a livelihood, estimate it at $\frac{1}{4}$, $\frac{1}{2}$, $\frac{3}{4}$, or total incapacity.

25. If an operation was advised and declined, was the refusal unreasonable? Not applicable.

26. Do the Board recommend

(*a*) Fit for duty? No.

(*b*) Fit for base duty? No.

(*c*) Invalided to Canada? No.

(*d*) Discharge as permanently unfit? No.

27. Remarks. Recommend his removal to the Lord Derby Hospital for observation.

Signatures:— _____ President.

Station C.C.H. Uxbridge — C.F. Moffatt, Capt. C.A.M.C.

Date June 9/17. — R.P. Borden, Capt. C.A.M.C. } Members.

Approved.

Station A.D.M.S. CANADIANS, LONDON AREA.

Date LONDON, 11 JUN 1917

W. Gaudill
Administrative Medical Officer.
..... Captain C.A.M.C.,
for A.D.M.S., Canadians, London Area.

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form B. 263.	Attestation Paper,	Militia Form B. 235.
Squadron / Battery / Company } Conduct Sheet,	" B. 263a.	Proceedings on Discharge	" B. 218.
Copies of Convictions, by C. P.	in MS.		
Med. Hist. Sheet,	Militia Form B. 313		
Medical Report for Invalid*	" B. 227.		
Statement of Man's Account on Transfer and Last Pay Certificate,	" D. 877.		

*Only if discharged "Medically unfit."

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 (in the event of such having been prepared.)

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

This space to be for numbers

21-4.

Proceedings on Discharge.

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

No. 488446

Rank Private.

Surname Brown.

Christian Name Joseph. H

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

Corps (Squadron, Battery or Company) 6th. Batt. Can. Garrison Regt. C.E.F.

Date of Discharge 17th July 18

Place of Discharge Halifax N.S.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 21 years 10 months.
Height 5 feet 4 inches.
Complexion Medium.
Eyes Blue
Hair Black.
Trade Mine operator
Intended place of residence (To be given as fully as practicable.) New Waterford. N.S.

Descriptive Marks

—

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

Medically unfit

(Auth: G.O. 59.B-483. 13.4.18)

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.

Good.

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

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

M. F. B. 218.

100M.—1-17.
H. Q. 1772-39-113.

(OVER)

W. S. G. Comp.
8-2-19
A.G.

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) HALIFAX, N. S. L. A. Mumford

(Date) JUL 17 1918 *Commanding* .....
6th, Batt, Can. Garrison Regt. C.E.F.

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.

(Place) HALIFAX N. S. J Brawn *(Signature of Soldier.)*

(Date) JUL 17 1918 B Snoot. Sgt. *(Signature of Witness.)*
6th, Batt, Can. Garrison Regt. C.E.F.

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.

J Brawn *(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) HALIFAX, N. S.

(Date) JUL 17 1918 *(Signature)* L. A. Mumford
6th, Batt, Can. Garrison Regt, C.E.F.

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.)

I Claim Subsistence allowance from

J Brawn

Witness.

B Snoot. Sgt.
6th, Batt, Can. Garrison Regt, C.E.F.

(OVER)