REGIMENTAL DOCUMENTS

[redacted]IAM Cpl REGT. NO. 282688 UNIT 219th Battn. H. Q. FILE NO.

		DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY DEATH Category
1	FIELD [illegible] A.F.B. 122)				49922	
	REGT. CO[illegible] .B. 263 or A.F.B. 120)					
	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
3	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
1	DENTAL HISTORY SHEET (M.F.B. 465)					Category
1	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					Demobilization
1	MEDICAL EXAMINATION (M.F.W. 129)					
1	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.G.S. 2)					
	PROCEEDINGS. COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
	LAST PAY CERTIFICATE (M.F.W. 44)					
2	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					
1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
1	MOW 192					
1	QAOC 5009A					
2	RIP					
1	Can. Card					
2	A.F.I. 1257					
1	misc					
1	8127					
	½					

Discharged 28-1-19

43 - 5 -
2 - 8
11 - 8

- 2 -

W. 2589

6

ATTESTATION PAPER.

No. 787688

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

ORIGINAL

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?..... Buddlemell
1a. What are your Christian names?..... Frank William
1b. What is your present address?..... Pleasant Lake Yar Co N.S.
2. In what Town, Township or Parish, and in what Country were you born?..... Pleasant Lake Yar Co N.S
3. What is the name of your next-of kin?..... John Buddlemell
4. What is the address of your next-of-kin?..... Pleasant Lake Yar Co N.S Canada
4a. What is the relationship of your next-of-kin?. Father
5. What is the date of your birth?..... 14th January 1892
6. What is your Trade or Calling?..... Farmer
7. Are you married?..... No
8. Are you willing to be vaccinated or re-vaccinated and inoculated?..... Yes
9. Do you now belong to the Active Militia?..... Yes 29th Battery C.F.A.
10. Have you ever served in any Military Force? No. Recruit
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

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

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

Frank William Buddlemell (Signature of Recruit)

Date 9th March 1916 Lyle Hamilton (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Frank William Buddlemell, 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.

Frank William Buddlemell (Signature of Recruit)

Date March 9th 1916. G. Lincoln Lovett (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 Yarmouth this 9th day of March 1916.

T. M. Seeley J.P. (Signature of Justice)

In and for the County of Yarmouth Province of Nova Scotia

M. F. W. 23.
600M.—2-16.
H. Q. 1772-39-841.

Description of Bullerwell, Frank, William on Enlistment.

Apparent Age 24 years ..... months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height ..... 5 ft. 11½ ins.

Chest measurement.
- Girth when fully expanded ..... 36 ins.
- Range of expansion ..... 4 ins.

Complexion Fair

Eyes Blue

Hair Light

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

Distinctive marks, and marks indicating congenital peculiarities or previous disease.

(Should the Medical Officer be of opinion that the recruit has served before, he will, unless the man acknowledges to any previous service, attach a slip to that effect, for the information of the Approving Officer).

CERTIFICATE OF MEDICAL EXAMINATION.

I have examined the above-named Recruit and find that he does not present any of the causes of rejection specified in the Regulations for Army Medical Services.

He can see at the required distance with either eye; his heart and lungs are healthy; he has the free use of his joints and limbs, and he declares that he is not subject to fits of any description.

I consider him* fit for the **Canadian Over-Seas Expeditionary Force.**

Date March 7th 191 6. .....

Place Yarmouth, N.S. ..... A. H. Williamson M.D. .....
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.

Frank W. Bullerwell 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.

..... (Signature of Officer)
Lieut.-Colonel,
Comd'g. 219th. "Overseas" Highland B'n. C.E.F.

Date March 9th 1916.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 282688 (Rank) Corporal

Name (in full) Frank William Butterwell enlisted in

the 219th Battalion

CANADIAN EXPEDITIONARY FORCE at Yarmouth N.S. on the 7th

day of March 1916

HE served in France

and is now discharged from the service by reason of Demobilization

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

Age 27 years 2 months

Height 6 feet ½ inches

Complexion Ruddy

Eyes Blue

Hair Light Brown

Marks or Scars Scar Right Calf.

F W Butterwell
Signature of Soldier

R Christie LIEUT
for O C. DISCHARGE SECTION NO. 6 DISTRICT DEPOT
Issuing Officer

Rank

Appointment

Date of Discharge April 11. 1919

Signed at Halifax N.S. this 9th day of April 1919.

in Military District No.

File Reference No.

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

M. F. W. 39a
200m.—2-18.
H.Q. 1772-39-882

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

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

Unit .....

Address on Discharge .....

Character and Conduct .....

.....

Former Occupation .....

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

.....

Medals and Decorations .....

.....

Remarks .....

.....

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

.....

Name of Officer

.....

Rank

.....

Appointment

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

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

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

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

No. 282688 Name F. W. Bullerwell Sqn., Batty., or Company "C" 13 Corps 219th Bn. Date of enlistment 6-3-16. G.C. Badges Service or Proficiency Pay

Date of last entry in Company Conduct Sheet 8/10/16 No. and date of last drunk Nil Period not reckoning towards freedom from extra fine Sheet No. One Signature O.C. Company, etc. Asstant Captain Character Fair

Place	Date of offence	Rank	Cases of Drunkenness	Offence	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remarks
		Trans.		to 17th Res. Bn, Bramshott, 23-1-17,		Part II. Orders			#23
						A/Q Emmerson Capt;			
						Comdg D Coy 219 Bn			
				PROCEEDED OVERSEAS FOR SERVICE WITH 85 BATTN. 25 JUN 1917		Granted Lieut, Asst. Adjt.			
						17th Canadian Res. Batt.			
Field	8.5.18	9/Cpl		Neglect of duty while in Charge of billet	C.S.M. McLeod R.E.	Admonished	9.5.18	Maj F.B. Ralston.	
				S.O.S. Invalided wounded 18/9/18, D.O.		Part II. No 108 dated 28/9/18			
						A.A. Sheaffe Lieut			
						for			
						LT. COL.			
						COMMANDING 85th C.I. Bn. B.E.F. [P.T.O.			

Army Form B.122

Bullerwell F.W.

Received from Canada with 42 reinforcements 10/6/18

S.O. 785. W7436/1545. 2,500M. McC. & Co. Ltd.

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

Date.	Remarks.	Pt. 2 Order No.

M.F.W. 192
150M—6-18.
1772-39-1243.

*Name Butterwell F. W. Rank Cpl. Regtl. No 282688

Original unit 2/[redacted] Draft 1916 M or S. Age 26 Religion Bapt. Fyle Depot Ref. H.Q.

Port, ship, and date of arrival Halifax, N.S. S.S. Caronia 6.3.19

Next of kin John Butterwell (Father)

Address on leave Jarmouth N.S.

Address on discharge

Transportation issued Yes / No Date Character on discharge 9-3-16. Jarmouth N.S.

Previous occupation Farmer Date and place of enlistment

Diagnosis Date of Medical Boards

Date.	Remarks	Pt. 2 Order No.
22-2-19	1916. Posted To Can Cay NFld. 6-3-19	1069
11/4/19	DISCHARGED at Halifax, N. S	99

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

(over)

HLB

REMARKS:-

Number 282688 Rank Spl.

Surname BULLERWELL

Christian Name Frank William

Units 85th Bn C.M.R. Theatre of War France

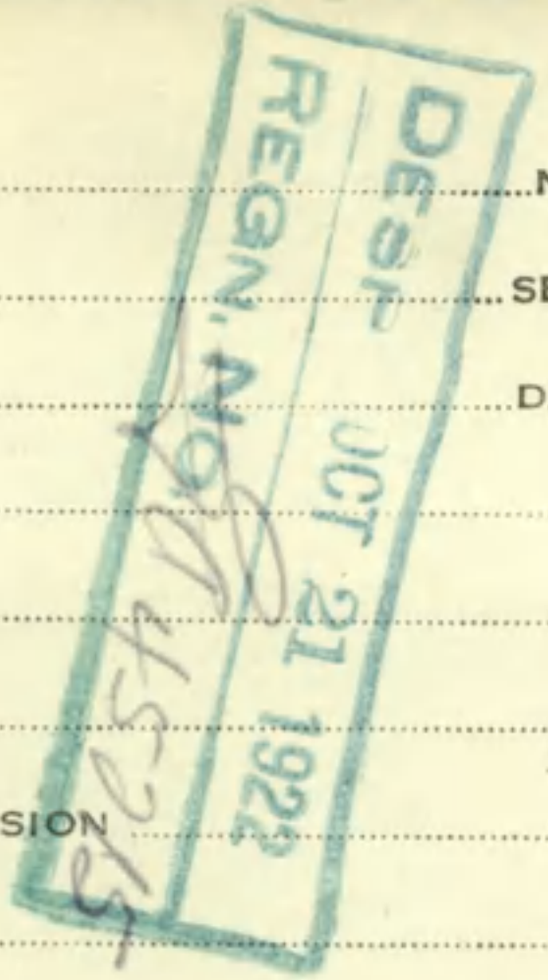
Date of Service 25-6-17

Remarks

Latest Address Pleasant Lake
Yarmouth Co. N.S.

Roll No. B

200m.-6-21. Page 19265



.....RANK.....NAME .....

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

.....DATE AND PLACE OF ORIGIN.....

.....*DUE TO SERVICE
*NOT DUE TO SERVICE

.....

.....

OSPITAL AS AN ADMISSION .....

WHERE FROM).....

IT .....IN CATEGORY.....

INVALID.....

.....

WHERE TO).....

ITIONS DIAGNOSED .....

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
9134	No 12 Can Field Amb.	20-8-17	Trench Fever
23-8-17	" " " " Wise	23-8-17	"
B331	2nd West Kent Mendelty	14-9-18	(SI) Lew Rleg
B369	Can Const Bearlwood Wok	6.12-11-18	- - - - - -
B371	11 McCaldin Nijmegen	12-11-18	" - + -
	4 Mil Conl Epsom		
B424	Leeds	14-1-19	Lew Rleg

NAME Bullerwell Frank William

REGT'L NO. 2826 88

H. Q. FILE NO. 649.

RANK AND CORPS Pte 4th Pl 85th Bn. (4th Can. Div.)

FOLLOWS NO. Dec 2 19 Bn

FOLLOWS

NATURE OF CASUALTY

CABLE NO.	CABLE DATE
9520 18 19	1918
Hhq 314 4-9 18	Nov 18

Adm 3 Can Gen H Boulogne
Sept 4th 1918 G.S.W. R leg
John Bullerwell (father)
Pleasant Lake Yarmouth Co
N.S.

L. L. 20497—M. & D. 7908

M. F. W. 42—50M.—5-17.
H. Q. 1772-39-8s3.

FORM R. 149.
7106—250m—7/2/17.

Name Bullerwell, Frank William. Pte. *Reg. No* 282688.

Unit 85th. Battn.

Next of Kin Canada.

Date 1917.	Movement	Place	Casualty	List No.	Notified N/K O.		W.O. List
20-8.	No. 11. C.F.A.	Trench	Fever.	A. 134.			
23-8.	Discharged.		-do-	A. 137		R[illegible]	8-10-17
						E.	10-10-17

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

C

SURNAME. Bullerwell

CHRISTIAN NAMES Frank William

REGL. NO. 282688 RANK Pte.

UNIT 219th Bn

FORMER CORPS 29th Bty - C.F.A.

6 CARD NO.

SOS 4-4-19 Demob.
AO #997 9-2-19 ROLL #600

NEXT OF KIN.

NAMES IN FULL Bullerwell John

RELATIONSHIP TO SOLDIER Father

ADDRESS Pleasant Lake, Yarmouth Co. N.S.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada Pleasant Lake N.S. DATE Jan. 24th 1892

PLACE OF ATTESTATION Yarmouth, N.S. DATE Mar. 9th 1916

Sailed from Halifax 12/10/16 Pte S.S. Olympic

R/C 6-3-1919 S-Spl

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

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

29

MARRIED SINGLE Yes. WIDOWER

TRADE OR CALLING Farmer RELIGION Baptist

DESCRIPTION.

APPARENT AGE 24 YEARS — MONTHS

HEIGHT 5 FEET 11½ INCHES

CHEST MEASUREMENT 36 INCHES EXPANSION 4 INCHES

COMPLEXION Fair EYES Blue HAIR Light

DISTINGUISHING MARKS not stated.

MEDICAL EXAMINATION. PLACE Yarmouth, N.S. DATE Mar. 7th 1916.

Present address Pleasant Lake, N.S.

No. 282688 RANK Pte. NAME Bullenwell, F. W.
282888 July P. L.

T. O. S. 6-3-16 D.O. 227 UNIT 219th Battalion, C. E. F.
1-27-3-16.

M. D. 6.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916	1916			
Mar. 6	Mar. 31	X.		
apl		✓		
May		✓		
June		✓		
July		✓		
aug		✓		
Sept		✓		
Oct		✓		

Reg. No.	Rank.	Surname	Category.	Dentally Unfit.
282688	Pte	Christian Names (1) Frank (2) William (3)	Date	

Place of Enlistment:	Date of	Taken on from	Religion	Inoculations	Company
Yarmouth	9/16			10 5/16 22 5/16 11-11-16 18-6-17 11/17	
Province: N.S.	Age on 24	Date	Epd.	Vaccination 4 7/16	

On Command	Hospital	Permanent Cadre	Employed as
		Date taken on	
Date Proceeding	Date Admitted		

Record of Overseas Service: 8 5th 25 6/17 - 18 7/18

Profession or Trade (Civil) Farmer

Transferred or Posted to

Date

Reason for Return: Wounded

Married or Single Single

Address of Next of Kin Father

John Bulmanell

Pleasant Lake

Country Yar Co. N.S.

LEAVE.

No. of Pass Issued.	From.	To.	Free Transportation.

A.G. 10434.

Part 2 Order Entries.

No.	Date	Ref.	No.	Date	Ref.
13~1	16-1-19	S1			
13~8	16-1-19	F			

TRAINING.

Weeks of Training.

1	2	3	4	5	6	7	8	9	10	11	12	13	14	Over.

Nature of Training	Date passed test
Drill	
Musketry	
Bombing	
Rifle Bombing	
Bayonet Training	
Anti-Gas	
Lewis Gun	
Rapid Wiring	

Special Training Courses, etc.

Form K. 149.

FRANK WILLIAM

Name BULLERWELL Rank A/CPL Reg. No 282688 N.C.

Unit 850 Bn

Next of Kin CANADA.

Date 1918	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
4-9	3 C.G.H. Boulogne	S.W. Leg		B.314	5/10	3866-41
19-9	2 W.G. Manchester	"		B.331		24979
12/11	Mil Con Epsom			B.369		2621
12-11-18	16 Bty Dramgton	"		B.371		1029
14-1-19	Discharged	"		B.424		1105
Corp B.S.M. Leave 11-1-19 to 26-1-19			14th Feb Bramshott			

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

C.A.D.C. 5009A

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

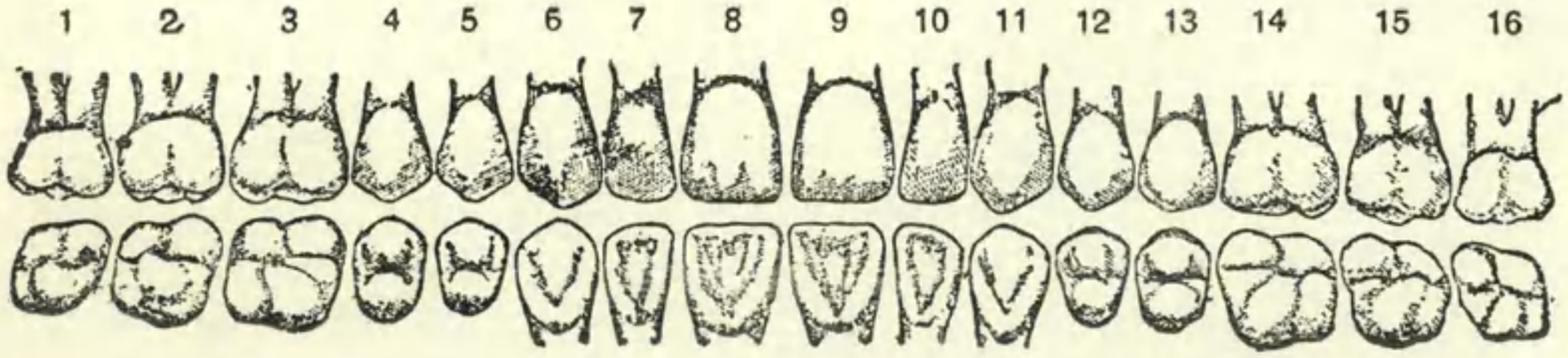
DENTAL CERTIFICATE FOR DEMOBILIZATION

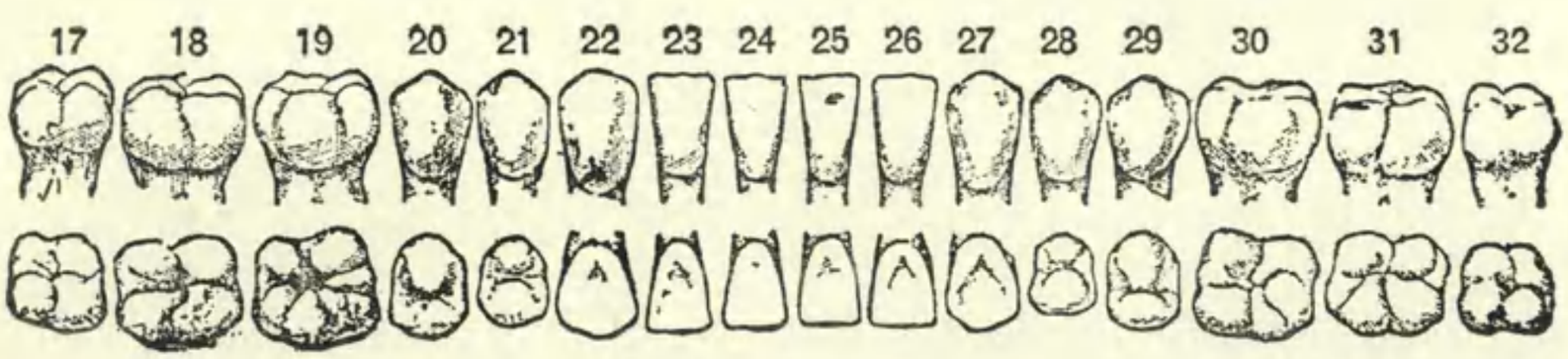
Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) BULLERWELL F.W.

REGIMENT 17th. RES. BN. RANK CPL. No. 282688.

Date of Examination in England 10 FEB 1919 Date of Examination in France





DIRECTIONS TO DENTAL OFFICERS

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

PRESENT DENTAL REQUIREMENTS

1. FILLINGS 6. 7. 8. 11. 31.
2. EXTRACTIONS
3. CROWNS
4. DENTURES
   - (*a*) Full Upper
   - (*b*) Part Upper
   - (*c*) Full Lower
   - (*d*) Part Lower

A. D. D. S.
10 FEB 1919
HEADQUARTERS:
CANADIAN DIVISION.
Ripon

HAS HE EVER REFUSED DENTAL TREATMENT? no

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

- (*a*) In Canada yes.
- (*b*) In England
- (*c*) In France

Signature of Dental Officer J. E. Thompson, Capt.

282688. Bullerwell. F W

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				
21.8.17	11 C.F.Amb.	Trench fever adm	11 C.F. Amb.	20.8.17	A36/6536.
~~15.12.17~~	~~26.85 Bn~~	~~To be A/Cpl. attach for~~	~~Field~~	~~15.12.17~~	~~Pmt. Field~~
12-1-18	"	Lewis & L R for Instrs at 4 Schools		1-1-18	"
26-1-18	"	Rejoined Unit		20-1-18	"
13/4-18	26.85 Bn.	Appt'd Lance Corpl. to complete Est.		10/10/17	B213. A.C.I. DO 414 of 25-4-18.
18/5-18	DO.	Appointed Acting (Paid) Cpl. vice Cpl. Logan, R.L.		5-5-18	" A.C.I. DO 550 of 19-5-18.
20-7-18	Do	Granted 14 Days leave	U.K.	16-7-18	B213. DO 478 of 31-7-18.
17-8/18	Do	Rejoined from leave	Field	9-8/18	"
3-9-18	3 C.F.Amb.	S.W. leg (L) adm	3 C.F. Amb	2-9-18	A858
4-9-18	3 Can. Gen.	Do adm	3 Can. Gen.	2-9-18	A856.
7-9-18	26.85 Bn.	Wounded in Action adm	Field	2-9-18	B213.
12-9-18	42 Bns.	S.W. leg L adm	42 Bns	2-9-18	A7147.
			26 A.T.	3-9-18	
19-9-18	26.85 Bn.	Confirmed in rank of Corporal		10/5-18	K.I. 18/18227 DO 107 of 26-9-18.
18-9-18	3 Can Gen.	S.W. leg L Do	England	18-9-18	W 4748
18-9-18	Do	Invalided and posted to N.S.R.D. per H/S St. David	Rhamsgate	18-9-18	W3082/6032. DO 108 of 28-9-18.

R. Sutter
Lieut. for Lt Col: A. A. G.
Canadian Section, G. H. Q. - 3rd, Ech.

3.10.18 NSRD 20 from 8 Sch Bn Brit 18.9.18 A.C.I. 241

J2

R. Rose
LIEUT.
FOR I/C RECORDS, C.O.M.F.

16/1/19 17 Res 20 from NSRD Bhed 14/1/19 Do.

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

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

WAR SERVICE BADGE.
CLASS "A" No .....

Casualty Form—Active Service.

Unit, Regiment or Corps 219th C. E. B. C. E. F.

Regimental No. 252655 Rank Pte. Name Boulton, Frank William.

Enlisted (a) 7/3/16. Terms of Service (a) Duration of War. Service reckons from (a) 7/3/16.

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

Extended ..... Re-engaged ..... Qualification (b) Farmer S.C.D.

Report: Date	Report: From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
		Embarked Canada.	Halifax.	12/10/16.	
		Disembarked England.	Liverpool.	18/10/16.	
23-1-17.	219th Bn.	Transferred to 17th Can. Res. Bn.	Bramshott.	23-1-17.	Part II orders #18.
					Adjt. 219th Overseas Battalion C.E.F.
23-1-17	O.C. 17th	Taken on strength	Bramshott	23-1-17	P.II Orders. "18"
26-5-17	O.C. 17th	PROCEEDED OVERSEAS FOR SERVICE WITH 85th BATTN.	Bramshott.	25-6-17	Part II Order 151. J. Y. Greenlees Lieut., Asst. Adjt., 17th Canadian Res. Batt.
D. C.	4 CIBD.	Landed in France.	Taken on	Nom. Roll	d/- 27.6.17
	— do —	Strength 85th. Bn.		Pt. II D. O. 84	d/- 5.7.17
D. C.	85th Bn.	Left for -do-		N. R.	d/- 14.7.17
		Arrived -do-		Field	18.7.17 B213, Dec. 66.
25.8.17	06.85 Bn.	Sick	To	F. Amb.	20.8.17 B213, Dec. 66.
25.8.17	-do-	Rejoined from	F. Amb	Field	23.8.17 B213, Dec. 66.

(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.

CERTIFIED COPY JUL 1917 CAN. RECORDS LONDON

(A) Report		(B)	(C)	(D)	(E)	(F)
Date.	From whom received	Authority of Part II. of Orders	Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	Place of casualty	Date of promotion, reduction, reversion, casualty, &c.	Remarks, and initials and rank of an officer

Nothing to be written in this margin.

Army Form B. 103—H.
Part II.

(SERVICE AND CASUALTY FORM Part II).

Regiment or Corps 219 Bn. Regimental Number 282688

*Substantative Rank Pte Surname Bullerwell Christian Names Frank [redacted]

*Acting Rank

(* To be entered in pencil to facilitate alteration.)

(A) Report: Date.	(A) Report: From whom received	(B) Authority of Part II. of Orders	(C) Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	(D) Place of casualty	(E) Date of promotion, reduction, reversion, casualty, &c.	(F) Remarks, and initials and rank of an officer
14/2/19	17 Res	D.O. 37	To Demobilization Camp MD = 6. Wing Kinmel Park Rhyl		14/2/19	
22/2/19	85		Posted to Depot Co.		6/3/19	
11/4/19			DISCHARGED at Halifax, N. S.			

To be folded on this line.

Nothing to be written in this margin.

A1834 W.6425—P1600 500,000 10 18 G.W.P.Co.3973.

21 FEB 1919

S.O.S. — O.M.F.C.-ON-TRANS. — C.E.F.

Roy M Hammond
LIEUT.
OFFICER I/c RECORDS M.D. 6

EMBARKED FEB 22 19
S.S. CASSANDRA

Lieut., Asst. Adjt.,
17th Canadian Res. Batt.
R. P. Camp

A. Westmore Major
O.C. * 13 T. A.C.S

D.O.9.
Lt. Asst. A.
i/c Records

G. W. Macalonie CAPTAIN.
D.O.C. DISCHARGE SECTION No. 6 DISTRICT DEPOT.

EPITOME OF HOSPITAL TREATMENT

	HOSPITAL	ADM.
1.		
2.		
3.		
4.		
5.		
6.		
7.		

FORM D.M.S. 1300

SURNAME	CHRISTIAN NAME OR NAMES	REG. NO.
Bullerwell	F. W.	282688

RANK Pte a/Cpl. UNIT 85th. Batt. CO. TROOP BATTY.

HOSPITAL — DATE OF ADMISSION

11 Can. Fld. Amb. 20-8-17

1. 3 Can. G. Bouvegne. HOSP. 4.9.18
2. 2nd W.G.H. Manchester 19-9-18
   6.6. Bearwood. HOSP. 12.11.18.
3. 16. Can. Gen. Orpington. HOSP. 12.11.18.
4. HOSP.

DIAGNOSIS

1 French Fever R.
  Shr. R Leg. a.f.

2-

3

DISPOSITION

A 134

C.L. 28-7-17
31-8-17 A 137
10.9.18 B 314.2.
30-9-18 B 331
13.11.18 B 369 (2)
15.11.18 B 371 (1)
20.1.19 B 424'

Dis 23-8-17 DATE
" 14.1.19
REMARKS

A.M.D. 2 DEPT.

Bch. of D.G.M.S. O.M.F.C. London.

B—122
8,401—50,000—21-10-16

A.G.R. Rank — Name BULLERWELL, Frank William - Reg'l No. 282688 -

Unit 219th Bn. — If in perm. Corps, What Unit? — Married or Single Single. -

Place and Date of Enlistment Yarmouth, 7th March, 1916. - Place of Birth Pleasant Lake, Yar. Co. N.S. -

Name and Address, Next-of-Kin John Bullerwell, -

Pleasant Lake, Yar. Co., N.S., Canada. Relationship Father.

Assigned Pay Monthly $ Payable to M.S.D. -

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

M/S. R.B. No. 7422
File R.L.
Category ORIGAN

Report. Date.	Report. From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.		Place.	Date.	REMARKS Taken from Official Documents.
	"C"	Arrived in England S.S. Olympic 18/10/16				
23-1-17	219th Bn.	S.O.S to 17th Res Bn		Bramshott	23-1-17	FT D.O. 23 nvb
23-1-17	17th Bn.	T.O.S from 219th Bn		Bramshott	23-1-17	PT II D.O. 18
26.6.17	✓	S.O.S. to 15 Bn. d.s.		✓	26.6.17	— 151. 15 Bn. d. 3.7.17.
28.8.17	85 Bn	To 11 Can Fd Amb.	Pte	Fd	20.8.17	C.R.A. 134 Trans. Secs.
31.8.17	"	Dischd from 11 C.F.A.		"	23.8.17	" 137. "
25.4.18	"	Appd L/Cpl to Comp Est	"	"	10.10.17	P.O. 41.
29.5.18	"	Appd A/Cpl (paid)	"	"	5.5.18	P.O. 55
10.9.18.	Do	Wounded	A/Cpl	"	11.9.18.	C.F.A. 314.
26.9.18.	"	Promoted L/Cpl	"	"	10.5.18.	Do 107.

M.F.B. 103 CHECKED
3 JUL 1917

282688 Bulberwell F. W.

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.
28.9.18.	85 Bn	Invalid Wdg Posted to N.S.R.D.	6Fl	Field	18.9.18.	D.O.108 9 N.S.R.D. D.O.241 d/ 3.10.18
16.1.19	17th Res.	T.O.S. from N.S.R.D.	"	Bisbett	14.1.19	D.O. 13. 114 d/ 17-1-19 N.S.R.D
14-2-19	17th Res. no 6	S.O.S. to M.D 6 Rhyl.	"	Ripon	14-2-19	" 36. 247 d/ 16.2.19 M.D. 6
25-2-19	M.D.W	S.O.S. to C.E.F. Canada M.D 6		Rhyl	22-2-19	~ 56

MEDICAL EXAMINATION UPON LEAVING THE SERVICE OF OFFICERS AND OTHER RANKS WHO HAVE NO DISABILITY.

Officers and Other Ranks leaving the service for reasons other than medical unfitness are to be reported on this form. Where there is evidence of any undetermined or progressive disability, this form will not be used, but the case will be referred to a Medical Board for completion of M.F.B. 227.

No. 382688 Rank Cpl. Surname BULLERWELL

(Given name in full) Frank William

Unit or Corps 17th Res. Bn. Birthplace Yarmouth, N.S.

(Examination of Officer or Other Rank (stripped) to be made by one Medical Officer.)

1. GENERAL DESCRIPTION:

Physique Good Weight 175 lbs. Height 6 ft. 0 in. Colour of Eyes Blue

Nutrition Good

Pulse 73

Condition of arteries Good

Vision Rt. 6/9 Left 6/9

Hearing (conversational voice) Rt. 2/ ft.

Left 2/ ft.

Identification marks, scars, or deformities. (Give cause and date of origin).

8" linear broad scars on posterior and inner aspects Rt Calf. Healed -

Opinion as to general health and physical condition Good

2. Has Officer or Other Rank ever suffered from, or has he now, any affection of the following systems? (Answer "Yes" or "No") (Subjective evidence may be sufficient in certain cases.)

Nervous System No Genito Urinary System No Cardio-Vascular System No

Special Senses No Integumentary System No Respiratory System No

Disturbance of Mentality No Muscular System No Digestive System No

Osseous and Joint System No Any other general condition No

3. If the answer to any part of Section 2 above is "Yes," here give full particulars, with cause and date of origin; and also a description of the present condition.

Ft Shrapnel and penetrating wound anterior aspect thigh Rt gangrene. Incisions for drainage at Rearmy wound 2/9/18 Left #16 C Gft 14/1/19 Now fit.

(If space is insufficient, continue on back of form.)

[OVER]

EXAMINATIONS

THIS SECTION FOR USE OVERSEAS—

Examined at ..Rhine.....(Overseas)

Date ..10/2/19..... Signed ..J.W.Rutherwell..... M.O.
MAJOR C.A.M.C.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature ..J.W.Rutherwell.....

(If not satisfied, M.F.B. 227 will be completed by Medical Board.)

THIS SECTION FOR USE IN CANADA—

Examined at .....(Canada)

Date ..... Signed ..... M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature .....

(If not satisfied, M.F.B. 227 will be completed by a Medical Board.)

(This space to be used, if necessary, in connection with Section 3, overleaf, only.)

Forms
I. 1237
12

No. 16 CANADIAN GENERAL (ONTARIO) HOSPITAL
ORPINGTON, KENT.

Duty 14/11/19

Army Form I. 1237.

MEDICAL CASE SHEET.*

24

No. in Admission and Discharge Book	Regimental No.	Rank.	Surname.	Christian Name.
18364	282688	Cpl	Butterwell.	Frank W.
Year	Unit.		Age.	Service.
	80th Coys.		26	8 2/12.

Station and Date.	Disease GSW Rt Leg.
11.11.18.	Pres Occupation:- Engineer.
	Prev Illnesses:- None.
	Military History:- Enlisted at Yarmouth N.S. Mar' 16. to England Oct' 16. to France May' 17.
	Pres Illness:- Wounded at Arras. on 2.9.18. to Fd Amb - to C.C.S. - to 2nd Can Gen Hosp. Boulogne - Operation - Pieced + cleaned.
	to Stepping Hill. Hosp. Stockport. 19.10.18. to Epsom C.C.H. to B.M.H. 11.11.18.
	Physical Exam:-
	Teeth - Good.
	Heart + Lungs - Normal.
	Wound:- T+T wd. Healing.
25.11.18.	Wd healed. Leg tires quickly.
11.12.18	Improving
2.1.19	Healing slowly. Wd having opened again.
9.1.19	To T T D

B.S. Ellis Lt.
Capt.

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

(6365) W2944/P438 2,950,000 1/18 McA & W Ltd Forms/I. 1237/13 (E 2349)

[P.T.O.

Station and Date.	

1. SUBJ

Forms
I. 1237
12

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
Year	282688	Cpl.	Ballerwell	J. W.
MCH EPSOM	Unit.		Age.	Service.
	85 Can Bn.		26.	

Station and Date.	Disease
2 - NOV 1918	GSW Rt Leg Flesh 2-9-18 Wounded, Sick, Suffering Unsuitable Requires active treat Transf to Orpington Thos Bradley Capt

FURLOUGH ADDRESS IN FULL

TAB

TAB

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

(6365) W2944/P438 2,950,000 1/18 McA & W Ltd Forms/I. 1237/13 (E 2349)

[P.T.O.

Station and Date.	

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

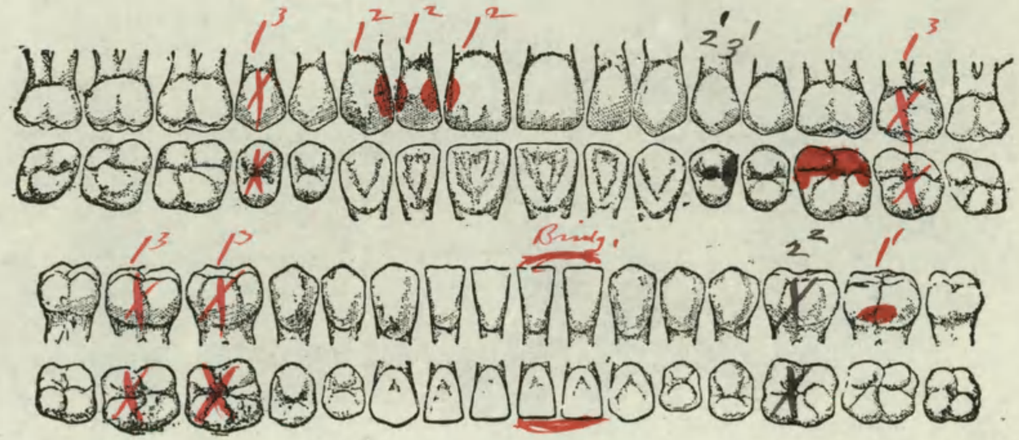
Division 6

No. 252485

Name of Soldier Frederick Hall

Regiment 219 Battn. Rank

M. F. B. 465
100m.—7 16.
1772-39-950



DATE	No.	Fillings				Extracted	Anesthetic	Treated	Crowns	Cleaned	As 2° 3	Pulp Removed	Put Pulp	Artificial Teeth	OPERATOR	REMARKS
		Amal.	Phosp.	G. Per.	Cement											
1916																
Sept. 14	1	1				1	1								H. L. Matchemen	On Entering Service
" 14	2			1		2									H. L. Matchemen	Not Completed
" 21	3	3													B. Rossnell	" " "

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

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				
Mr. C.H.							S.S.W. Right Leg (flesh)		Onadm:— not healed Discha. swelling.	
Epsom	1	11	18.	11	11	18		11	unsuitable - Requires action treatment Trans: to Orpington	W.H. Bradley Major R.A.M.C.
16 Con. Gen. Hosp. Orpington Kent.	11	11	18	14	1	19	— do —	64	Wd healed Leg tries quickly To F + D	D.D. Watt Capt RAMC

Temporary

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. 178 to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

Cpl. 282688.

MEDICAL HISTORY OF

Surname Ballerwell *Christian Name* F. W.

TABLE I.—General Table.

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

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

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

Trade or Occupation.....

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

Weight .....lbs.

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

Physical Development .....

Vaccination Marks	RIGHT	LEFT
Arm.....		
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

TABLE IV.—Service Table.

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

[11,823] W2836/M2217 1,800 000 6/17 W. P. & Co. (1349)

STEPPING HILL AUXILIARY MILITARY HOSPITAL.

HAZEL GROVE, Near STOCKPORT.

Medical Officer: **J. HOWIE SMITH.** *Ward* A 1

MEDICAL CASE SHEET.

Serial No	Regimental No.	Rank.	Surname.	Christian Name.
F.C. 1615	282688	Cpl.	Bullerwell	Frank J

Unit	Company.	Age.	Service.	
85 Canadians	C	26	2 5/12	1/4/12

Date of Admission 19 SEP 1918 Religion Baptist

Disease Shr Wd R. leg

FOR TRANSFER CLASS.	INOCULATION AGAINST. TETANUS. Units.	Date.	TYPHOID. TV 1 / TV 2 / TV Nil.	DATE OF ONSET, INJURY OR DISEASE.
	1500	2. 9. 18		Sept 2nd 1918
	500	12. 9. 18	Date	
	500	19. 9. 18		
	500	24. 9. 18	Cross out that which does not apply.	

DATE, 191	
	Large through and through wd to right calf muscles. Tubes ~~Lacies~~ drains have put through & through gastrocnemius muscles. Back Splint & wedge.
27.10.18.	Transr. Reddish Capt.
	Transferred to Bank Meadow Manchester.
27 OCT 1918	
1.11.18.	Admitted Brans Ho Woodcote Park Epsom.

2nd WESTERN GENERAL HOSPITAL BANK MEADOW. 27-10-18

J. HOWIE SMITH.

Next of kin F. Pleasant Lake Yar. Co Nova Scotia

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

P.T.O.

Date	

ORIGINAL

MEDICAL HISTORY SHEET.

ORIGINAL

Surname Bullerwell Christian Name Frank William

Examined on 7th day of March 1916
at Yarmouth, N.S.

Birthplace City or Town Pleasant Lake
County Yarmouth

Apparent age 24

Trade or occupation Farmer

Height 5 Feet 11½ Inches.

Weight 169 Lbs.

Chest measurement Minimum 32 inches.
Maximum expansion 36 inches.

Physical development Good

Small-Pox Marks Nil

Vaccination Marks Arm Right. Left.
Number Nil

When Vaccinated last

(a) Marks indicating congenital peculiarities or previous disease Nil

(b) Slight defects but not sufficient to cause rejection Nil

Approved by
L. N. Richardson M.D.

Rank M.O.

Date.	Fit or Unfit.	Examined for Re-engagement.
		23 SEP 1918 M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date.	Result.	Vaccinations.
4-7-16	Good	Lt. Richards M.O.
		M.O.
		M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.
10.3.16	Good	Lt. C. M.O.
22-5-16	Good	Lt. C. M.O.
11/11/16 18/4/17	T. a'B. T.A.B.	Lt C. M.O.

Enlisted on 6th day of March 1916 at Yarmouth, N.S.

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	219th. "Overseas" Highland B'n. C. E. F	282688		6/3/16
Transferred to	17th Can. Res. Bn	282688		23-1-17
	85 Batt	282688		25-6-17

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.

CANADIAN

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

M. F. B. 313.
400M.—1-16.
H. Q. 1772-39-439.

Surname Bullerwell Christian Name Frank William

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital. Day	Month	Year	Dates of Discharge from Hospital. Day	Month	Year	DISEASE.	Number of days in Hospital	Remarks on nature of the disease: how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
No.11.C.F.A.		20	8	18	23	8	17	Trench Fever		Discharged 11th	A134-A137.
2nd WESTERN GENERAL HOSPITAL, MANCHESTER.		29	9	18	1	11	18	Sl Wd R Leg.	44.	Large thro' thro wd. to right calf muscles. Trans. 1-11-18	
M&H Epsom		1	11	18				-do-		Regmis Adime treat: Leaves to Orpington. Medical report on. Temporary "Att 5"	Kenneth Braidley Major RAMC

Secretary and Registrar, 2nd WESTERN GENERAL HOSPITAL

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a.
50m.—6-16.
1772—39—819.

Sheet No. 2. J. Bullerwell

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

Name of Soldier Pte Bullerwell F. W.

282688 219 Bn. C. Co

20.00

OCT 1 1916

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.		V 26453	20	
Nov.		28975	20	
Dec.		H34368	20	
Jan.	1917	Q35592	20	
Feb.		Q41933	20	20
March		U44552	20	20
April		P. 285	20	20
May		P6617	20	
June		Y13548	20	20
July		S. 20699	20	
Aug.		V.26994	20	
Sept.		U 33249	20	
Oct.		T48625	20	260
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier_____

PAYMENTS.

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

Job 5470—M. & D. [illegible]

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12
50m.—7-16
H. Q. 1772-39-316

To Whom J Bullerwell
Address Pleasant Lake
Yarmouth Co
N. S.
Rate 20.00 OCT 1 1916

By Whom Assigned Bullerwell F. W.
Regtl. No. 283688
Rank Pte
Corps 219 Bn. C.Co

PAYMENTS

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

CONSOLIDATED ACCOUNT 7

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

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—172-39-1141
L. L. 22320—M. & D. 7693.

* Strike out whichever inapplicable

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

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

J. H. F. Bullerwell, Father.
Pleasant Lake, 25.

Stopped 1/3/19

NAME:- BULLERWELL Frank William

NUMBER:- 28v688.

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Pte.
D041. 25/4/18	10/10/17	L/Cpl.
Bd. 55 27/5/18 85 Bn	5/5/18	a/Cpl. Cpl.

UNIT AND TRANSFERS

ORIGINAL UNIT:- 219th Batt

DATE ACCOUNT FIRST OPENED:- 1st Oct 1916

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
D025v. 27/6/17.	27/7/17		85th Bn

Canada

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1 00	- 10		
D041. 25/4/18	1 05	. 10		
" 55 27/5/18	1 10	10		

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

DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT
5/2/19	4961	Lr.-0-0	9 73				
9/2/19	5033	Lr-0-0.	9 73				

Dis to Can 28/2/19 N.R. 2866 8/2/19 Rybbs. — Reboon 2nd Lr. D.A.B. Ld Bal 5617

L886 - 36 71.

PARTICULARS OF RENDERING NON-EFFECTIVE:-

1918 MONTH	PARTICULARS	CR 1	CR 2.	PARTICULARS	DR. 1	DR 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Mar.	Balance Forward								67 04		
Apr	Pay.	33		CAP.				20			
	Apr Cpl 10/10/17 4 c 203 days @ 5 00/41.	10 15		AR II 6/4/18 85 Batt	4 46						
				" 1v. 27/4/18 " "	4 46				81 27		
		4 15			8 92			20			
May	Base pay	35 65		C.A.P.				20			
	Cpl pay 5/5/18 - 31/5/18 = 27 days @ 5d	1 35		AR 150 5/5 ✓ ✓	4 46						
				" 1899 5/5 ✓ ✓	4 46				89 35		
		37 00			8 92			20			
June	Cpl pay	36		C.A.P.				20			
				AR 266 3/6 ✓ ✓	4 46						
				✓ 327 19/6 ✓ ✓	5 35				95 54		
		36			9 81			20			
JUL	" "	37 20		C.A.P.				20			
				✓ 389 2/7 ✓ ✓	5 35						
				✓ 518 15/7 72 ✓	5 35						
				✓ 36 ✓ - 165 15/7 ✓ ✓	82 73				19 31		
		37 20			93 43			20			
Aug	"	34 20		A.P.				20			
				AR 567 16/8. 85 Bn	3 57				32 94		
		37 20			3 57			20			
Sept	✓	36		C.A.P.				20	48 94		
		36						20			
Oct	✓	37 20		C.A.P.				20			
				390 14 Rem 8/10.	9 73				58 41		
				AR 260 ✓ Cpls 4/11	4 87.				51 54		
		37 20			14 60			20			

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

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

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

J. H. Bullerwell. Father.
Pleasant Lake. Sask.

Stopped 1/3/19

NAME:- BULLERWELL Frank Hillia
NUMBER:- 287688.

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Pte
DO 41 25/4/18	10/10/17	L/Cpl
Bd. 55 27/5/18 85 Bn	5/5/18	a/Cpl Cpl

UNIT AND TRANSFERS

ORIGINAL UNIT:- 219th Batt
DATE ACCOUNT FIRST OPENED:- 1st Oct 1916

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
D 125 r. 27/6/17.	27/7/17		85th Bn
			Canada

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1 00	- 10		
DO 41 25/4/18	1 05	. 10		
" 55 27/5/18	1 10	10		

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

DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT
5/2/19	4961	R r. -0-0	9 73				
9/2/19	5033	R r -0-0	9 73				

Dis to Can 28/2/19 N.R. 2866 8/2/19 R+b. – Repon ND 1r. Da B

Ld Bal 56 17
LPB - 36 71.

PARTICULARS OF RENDERING NON-EFFECTIVE:-

1918 MONTH	PARTICULARS	CR 1	CR 2.	PARTICULARS	DR. 1	DR 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATIC
Mar.	Balance Forward								67 04		
Apr	Pay.	33		Cap.				20			
	Apr 2d. 10/10/17 4/c r 3 day @ 5 20/41.	10 15		aR 11 6/4/18 85 Batt	4 46						
				" 7r. 27/4/18 " "	4 46				8 27		
		43 15			8 92			20			
May	L/Cpl pay	35 65		C.A.P.				20			
	Cpl pay 5/5/18 - 31/5/18 - 27 day @ 5t	1 35		aR 150 8/5 ✓ ✓	4 46						
				" 189 18/5 ✓ ✓	4 46				89 35		
		37 00			8 92			20			
June	Cpl pay	36		C.A.P.				20			
				aR 266 3/6 ✓ ✓	4 46						
				✓ 327 19/6 ✓ ✓	5 35				95 54		
		36			9 81			20			
JUL	" "	37 20		C.A.P.				20			
				✓ 389 2/7 ✓ ✓	5 35						
				✓ 518 18/7 72 ✓	5 35						
				✓ 76 ✓ 165 15/7 ✓ ✓	82 73				19 31		
		37 20			93 43			20			
Aug	"	34 20		A.P.				20			
				aR 567 16/8. 85 Bn	3 57				32 94		
		37 20			3 57			20			
Sept	✓	36		C.A.P.				20	48 94		
		36						20			
Oct	✓	37 20		C.A.P.				20			
				39014 Rem 8/10.	9 73				58 41		
				aR 26 r Cops 4/11	4 87				53 54		
		37 20			14 60			20			

NUMBER 282688 RANK NAME BULLERWELL Frank W.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
									51 54		
NOV	3	36		Cas				20			
		37 70		8246. 20/11 Otp	9 73			20			
				9598. 18/11 ✓	9 73						
Jan		37 70						20	82 48		
		100 40			19 46			60			
Feb		33 60		Cas				20			
	S J 14/1/19 - 26/1/19 12 days Cpl. Pay			10878 14/1, 16 & Hosp	48 67				56 17		
	B20 13 16/1/19 17 Re	8 16		4961 6/2 17 Res	9 73				16		
				5023 10/2. ✓ 5840 6813	9 73				36 71		
		42 36			68 13			20			

S O S Canada 22/3/19
S.L.B. 17 Res.

P. 559

MARRIED OR SINGLE: Single

PLACE OF BIRTH: Pleasant Lake, Yarbo. N.S.

NAME AND ADDRESS OF NEXT OF KIN: John Bullerwell. Pleasant Lake, Yar. Co. N.S. Father

NAME AND ADDRESS OF NEXT OF KIN:

RELATIONSHIP OF NEXT OF KIN:

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO:

RELATIONSHIP OF DEPENDANT:

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

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

REG'L NO. 282688 RANK Private NAME Bullerwell, Frank William

IF IN PERMT. CORPS } WHAT UNIT — UNIT 219 Batt TRANSFERRED TO 17 Res. Bn DATE 1-8-17 AUTHORITY C.O. 69 22/1/17

PERMANENT FORCE ALLOWANCES — TRANSFERRED TO 85th Bn DATE 21-7-17 AUTHORITY Do 152-27/6/17

PLACE OF ATTESTATION Yarmouth, N.S. — TRANSFERRED TO — DATE — AUTHORITY

DATE OF ATTESTATION 7-3-16. — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY MONTHLY $ 20. DATE EFFECTIVE Oct 1/16.

PAYABLE TO John. W. Bullerwell, Pleasant Lake N.S. RELATIONSHIP Father

ASSIGNED PAY MONTHLY $ ~~21~~ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

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

DISCHARGE DATE AND PLACE REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE) E.D. Oct

DATE 1916	PAY No. OF DAYS	PAY RATE	PAY AMOUNT $	PAY AMOUNT c.	FIELD ALLOWANCE No. OF DAYS	FIELD ALLOWANCE RATE	FIELD ALLOWANCE AMOUNT $	FIELD ALLOWANCE AMOUNT c.	WORKING OR SPECIAL PAY No. OF DAYS	WORKING OR SPECIAL PAY RATE	WORKING OR SPECIAL PAY AMOUNT $	WORKING OR SPECIAL PAY AMOUNT c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE CREDIT	BALANCE DEBIT	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
3/10/16														9 10	9 10												~~20~~			9 10					
Nov	30	1.00	30	-	30	10c	3								33	27/11/16	78	4 15/11/16						9 73 - 243 -				20	14 30	46 46		4 36			
Dec	31	1.00	31		31	10	3	10							34 10	14 6	15/12/16							2 44 -				20		22 44 26 80	7 30				
17 Jany	31	10	3	6 10											34 10													20		20	21 40				
			10	10 20																				17 17 2 43				60	14 20	58 90					
Feby	28	1.10	30	80											30 80													20		20	32 20				
Mar	31		34	10											34 10	3 14	15/2	3 10	7 15/3					4 87 -	4 87 -			20		29 74	4 16 56				
Apl	30		33												33													20		20	49 56				94005 - 461 - 11/4
MAY	31		34	10											34 10	6 4	18/4	93	14/4					1 30 -				20	1 17	43 07	40 59				
June	30		33												33			183 232	15/5 30/5					14 60 - 7 30 - 7 30 -				20		34 60	38 99				
July	20		22												22													20		20	40 99				1st 85th Bn 20 152 27/6
	11		12	10											29 7 30 12 10															256 31	53 09				
AUG 31			34	10											34 10													20 00		20 00	67 19				
SEP 30			33	00											33 00	3 15 4 17 5 6 3 7			4 9 6 17/7		288 17 Res 17/5 315 4th D.B.D 11/7			2 68 ✓ 2 68 ✓	5 36 -	4 86 - 4 46 -		20 00		40 04	60 15				

Balfm Canada

P.T. 01859 Confirto 15 days Pay. a W.L

28688 Pte Butterwell J W $20.00

DATE	PAY				FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS								CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
	NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.	NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.	NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.				1 NO.	1 DATE	2 NO.	2 DATE	3 NO.	3 DATE	4 NO.	4 DATE	1	2	3	4				CREDIT	DEBIT			
MONTH	PARTICULARS	CR.1	CR.2	PARTICULARS			DR.1	DR.2	DR.3	DR.4	BALANCE	DEFER-RED. PAY	SER. ALLCE. ENG.	MONTH	PARTICULARS	CR.1	CR.2	PARTICULARS			DR.1	DR.2	DR.3	DR.4	BALANCE	DEFER. SER. RED. ALLCE. PAY ENG.								
1/10/17	Bal Fwd	60 15																															
	Pte Pay	34 10									20																						
				DNAR 294 15/6 19th Rec			7 30																											
				AR 64 9 10/9 85.			2 69																											
				" 7/14 20/9 "			2 69				61 61																							
NOV 30	P Pay	34 10					12 64				20																						
		33 00		Can Asp							20																						
				AR 99 1 4/10 85th			3 57																											
DEC 31	P Pay	34 10		" 840 18/10 "			4 46																										
				Can Asp Dec							20																						
				AR 909 8/11 85th			3 57				77 11																						
JAN 31	P. Pay	67 10					11 40				40																						
		34 10		Cas Fun							20																						
				AR 964 19/1/18 85th			13 38																											
				AR 1024 7/12 85th			3 57																											
				" 1087 18/12 " "			4 46																											
		34 10					21 41				69 80																						
											20																						
FEB 28	P. Pay	30 80		A & P							20																						
				AR 1149 31.1.18 85th			3 57																											
				" 985 18/1/18 4th Rec Rc			4 46																											
				" 1214 23/1/18 85th			4 46				68 11																						
MAR 1918		30 80					12 49				20																						
		34 10		A P							20																						
				1278 12.318			3 57																											
				1342 22.318			4 46																											
				1396 2 318			8 03 3 57																											
				1471 15.3.18			3 57				67 04																						
		34 10					15 17				20																						

Pay Office: Vancouver 6.3.19

AUDITOR | PAYMASTER

M. OR S.

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

REGT. No. 282688 RANK Bpl. NAME (IN FULL) Butterwell F.W. (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN — RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? — DATE EFFECTIVE

TO WHOM PAID — RELATIONSHIP

ADDRESS

English

PARTICULARS	EFFECTIVE DATE	AUTHORITY
CRS 22-3-19 Subs		Do 69

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

PLACE OF ATTESTATION — TRANSFERRED TO — DATE 4/6/19 — AUTHORITY

DATE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY $ 30.00 — DATE EFFECTIVE 1.4.19

PAYABLE TO John W. Butterwell — RELATIONSHIP Father

ADDRESS Pleasant Lake N.S.

ANY CHANGE IN ASSIGNEE OR ADDRESS: Yarmouth Co

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

DISCHARGED — PLACE Halifax N.S. — DATE 11-4-19 — REASON Demob. — AUTHORITY Do 99. — IF ENTITLED TO POST DISCHARGE PAY

MONTH adjusted to	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	C.	Pd Ad Fd $	C.	TOTAL CREDITS $	C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	DATE	COL. NO. 2 NO.	DATE	COL. NO. 3 NO.	DATE	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.		$	C.	TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	BALANCE CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT																																					
28.2.19		1.20					36	01																			49	84									On boat
COMPILED BY																											20	00									Ad. March
CHECKED BY																															69	84	33	16			
PASSED BY									36	01																			33	16							Do previous acct.
1-3-19					11	20																											15	24			
March	31	1.20	37	20					48	40																					33	16					Clothing allowance
April	11	1.20	13	20	35	00	15	24			#71						15	24													133	44					Cr. previous acct.
					70	00			133	44	#188								118	20									173	44	1	1-					War service Gratuity
			W.S.G. S.A.																				WAR SERVICE GRATUITY W.S.G. S.A.										Settled		
	183				420	00			420	00																							350	00			
																							70	00									280	00			588382 6-5-19
																							70	00									210				594384 7-6-19
																							70										140				583118 7-7-19
																							70										70				1115644 6-8-19
																							70								430		Nil.				1490358 11-9-19
			420	00					420	00													420	00							420	00					

Certified that all payments due on the account have been paid.

For Senior Officer Pay Services, M. D. 6

100M—1-19.—L. L. 32962-F . . . 2723.
M. F. W. 2526
1775-30-125

List of Discharge Documents.

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

§Only if discharged "Medically unfit."

‡Only if man has not been overseas.

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

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

(a) Proceedings on Discharge

(b) Attestation.

(c) Medical History Sheet.

Documents not accompanying this form should be crossed out.

I hereby certify that the following documents are unobtainable.

Officer Commanding.

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

This space to be for numbers.

2-6-39

Wan Invoice Badge - P
Class A 143898
Issued

Proceedings on Discharge.

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

MEDICAL DOCUMENTS FORWARDED TO S. C. R. B. P. C. 16-4-19

No. 282688

Rank Corporal

Surname Butlerwell.

Christian name Frank William

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

Corps (Squadron, Battery or Company) 219th Battalion

Date of discharge April 11 1919

Place of discharge Halifax N.S.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 27 years 2 months.
Height 6 feet 1/2 inches.
Complexion Ruddy
Eyes Blue
Hair Light-Brown
Trade Farmer
Intended place of residence (To be given as fully as practicable.) Pleasant Lake Yarmouth Co.

Descriptive marks

Scar Right Calf

28/12/57

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

Released

Authority for discharge Demobilization.

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

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

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

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

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

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

(OVER)

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

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

6. Medals and Decorations.....

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

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

(Place).....

(Date).....

.....

Commanding.....

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

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

(Place) Halifax, N.S. F W Budlemell ..... *(Signature of Soldier.)*

(Date) April 8/1919 G. L. Lovett ..... *(Signature of Witness.)*

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

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

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

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

10. **Statement of Service.**

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

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

11. **Confirmation of Discharge.**

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

(Place) Halifax, N.S.

(Date) April 11. 1919

(Signature) Dawson LIEUT. COL.

No. 6 DISTRICT DEPOT.

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.)

Nil / F W Budlemell

OPINION OF THE MEDICAL BOARD

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

1/28

19. Is the invalid fit for

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

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

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

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

placed in Cat C III

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

J. A. Spangle Lt Col President.
J. D. Mac Law Capt. Members

PLACE Halifax N.S.
DATE 24-3-19

TO BE COMPLETED WHEN TREATMENT IS REFUSED

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

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

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

.....President.

PLACE..... Members
DATE.....

APPROVED BY
.....
Assistant Director of Medical Services.
DATE 26-3-19

APPROVED BY
.....
Director-General of Medical Services.
DATE.....

THIS FORM WILL BE USED FOR ALL RANKS

MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

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

STATION Halifax, N.S. DATE 24-3-19

1. 1 (*a*) Unit D.D.& L. (*b*) Regimental No. 282688 (*c*) Rank Cpl
(*d*) Surname Bullerwell (*e*) Christian name Frank William
(*f*) Home address Pleasant Lake Yarmouth Co, N.S.
(*g*) Next of Kin John Bullerwell (*h*) Relationship father
(*i*) Address of Next of Kin Pleasant Lake, Yarmouth Co, N.S.

2. Age last birthday 27 Date of birth 14-1-92

3. Enlistment, or Appointment (if an Officer) (*a*) Place Yarmouth N.S. (*b*) Date 6-3-16

4. Personal description:
(*a*) Height 6 ft ½ in (*b*) Weight 175 (stripped) (*c*) Complexion ruddy
(*d*) Colour of hair light brown (*e*) Colour of eyes blue (*f*) Identification marks, Scars, etc. Scar R. calf.

5. Former trade or occupation farmer

ASSISTANT DIRECTOR MEDICAL SERVICES MAR 26 1919 M. D. No. 6

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).	Years	Days
	3	18

	Periods From	Periods To
Canada 219th Bn	6-3-16 (6-3-19)	19-10-16 (24-3-19)
England 219th Bn	19-10-16 (2-9-18)	30-5-17 (16-3-19)
France or other theatres of War 85th Bn	30-5-17	2-9-18

7. Original disease, or injury Lacerated wound right leg.

(*a*) Date of origin Sept 1918 (*b*) Place of origin France
(*c*) Cause Shell followed by gas gangrene

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

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

Impaired function right leg.

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

Objective

There is a broad depressed scar extending 7" long beginning below knee and down on posterior aspect of right calf muscles. Scar is somewhat tender and is adherent to underlying muscles. Internal and parallel to this is another 7" line depressed scar also adherent and slightly tender in upper part. Whole calf leg is tender on deep pressure. There is superficial anaesthesia between scars.

Subjective - States right leg tires easily, and that there is a "dull ache" present in calf on standing and walking. Whole leg increased by walking. Gets quite stiff and tires about knee especially marked on anterior aspect of knee, after walking one mile. Also some swelling of ankle and foot.

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

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

Special Senses no Respiratory System no Integumentary System no

Disturbances of Mentality no Digestive System no Muscular System no

Osseous and Joint Systems no Any other general condition no

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

On Sept 2. 1918 in France was wounded in right leg by shrapnel. "Large thro' thro wound calf muscles" (M.O.S.) Incisions for gas gangrene. Spent 4 mos 11 days in Hospitals in France and England.

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

Trench fever 20. 8. 17.

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

Scar left ankle - cut in childhood

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

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

N. A.

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

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

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

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

Hospital in France + England.

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 - partly
(If not, briefly state why)

17. Recommendations

Cat. C. III

P. Rogers Capt Chaine.
Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

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

I, the undersigned F W Budbrooke 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.D.S.

F W Budbrooke Rank.
Signature of invalid examined.

LIST OF DISCHARGE DOCUMENTS.

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

WAR SERVICE BADGE.
CLASS "A" No.....

15 FEB 1919

M. D. 6.

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

EMBARKED FEB 22 1919
S.S. CASSANDRA

1. No. 282788
2. Rank. Cpl
3. Name. Bullerwell F. W. (Bullerwell)
4. Unit. 185 17th. Aug 21st
5. Date of Discharge | Place
6. Reason for Discharge Nec. D. Fin. Father. Residence Yarmouth Occupation Farmer Category A1
7. Authority. Dis. in France 16 mos
8. Proposed Residence after Discharge Yarmouth

B.1089

9. CERTIFICATE TO BE SIGNED BY SOLDIER.

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

.....

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

K.D. 11.4.19.

Place.....

Date.....

K. C. D. 2-2-20 SR 19

Signature.....

(O. C. Discharging Unit.)

M.F.B. 218a—300M.-11-18—1772-39-113.