DISCHARGE DOCUMENTS

R. O. No.....

H. Q. No.....

Name Butler James Kenneth

Regt. No. 67713 Rank Pte

54949

Corps 23rd Bn

Med Unfit

Proceedings of Court of Inquiry or on men reported Missing on Active Service.....

Attestation Papers..... 1 2

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet 1

Compulsory Stoppages.....

Casualty Forms..... 2

Proceedings on discharge..... 2

Corps History Sheet.....

Date and No. of Deposit Receipt for Purchase Money and Amount.....

Parchment Certificate..... Arch 1

Medical Report for Invalids.....

Medical History Sheet.....

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet..... 1

Clothing Transfer Certificate .....

Inventory of Kit.....

Last Pay Certificate..... 1

19+D card

1R/149

2
14-12
14-12
1 13

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

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

Copy 1844.

This is to Certify that No. 67715 (Rank) Private

Name (in full) James Kenneth Butler enlisted in

the 25th Battalion

CANADIAN EXPEDITIONARY FORCE at Halifax N.S. on the 20th

day of November 19 14.

HE served in France.

and is now discharged from the service by reason of Being found Med. Unfit for further service

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

Age 21 years

Height 6 feet. 1 inch.

Complexion Fair

Eyes Blue

Hair Fair

Marks or Scars Scar behind left ear due to mastoid operation.

X J K Butler X
Signature of Soldier

D A M G Ren
Issuing Officer

Lt. Colonel
Rank

Commanding #6. District Depot
Appointment

Date of Discharge July 31st 1918

Signed at Halifax N.S. this 31st day of July 19 18

in Military District No. 6

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. 67715 (Rank) Private Name James. Kenneth. Butler

Unit 25th Battalion.

Address on Discharge Berwick, Kings Co. N. S.

Character and Conduct Very Good

Former Occupation Bank Clerk.

Special Qualifications of Value in Civil Life

Medals and Decorations None Awarded

Remarks

Signed at Halifax N. S. this 31st day of July 1918

Name of Officer

Lt. Colonel

Rank

Commanding # 6. District Depot

Appointment

Uniform not to be worn after Date of Discharge unless written authority has been granted by G. O. C. of District.

Field Conduct

missing

written for Ea

10

Registrar.

Kindly have diagnosis
changed from Chronic
bronchitis to Phthisis

Rosewood
Capt.

31.

Forms
I. 1237
10

OFFICER. F.C.255.

2 WEST GEN HP
MANS

URINE 10.4.16
REAC. ALK.
SP.GR. 1025
ALB. NIL.

Army Form I. 1237
WARD

D. of Helen.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
F.C.255 317	64415	Pte:	Butler	J. H.
Year 1916	Unit. 25th Canadians B. Col:		Age. 19	Service. 1 4/12
9.4.16 Station and Date. Baptist Schools C.e. Hants.	Disease Influenza Pleurisy			
23.6.16	FOR TRANSFER CLASS.			

POPULATION AGAINST ENTERIC
I V IP V I V
1 2 NIL
Date .....
CROSS OUT THAT WHICH DOES NOT APPLY

16/7/16. To see dentist.
W.G.H.

℞. Ferri et Ammon. Cit. ʒiii. ℞ Bismuth
Mag. Sulph. ʒx c Lactt. bis die.
Aq. Ch. ad ʒviii
M. Sig. ℥ss t.d. p.c.
W.G.H.

31/7/16. a few rales l. apex (behind.) Cough. Sputum (blood-tinged) & night sweats.
Specimen of Sputum for bacteriological exam.
Negative Report. J Symons Lieut. W.G.H.

31/8/16. Fit for Transfer to Hampstead Barracks
by recommendation of 2nd Western General
J Shelton-Young Maj. R.A.M.C.

7-9-16 Trans: to Epsom,
Mother Mrs. E. H. Butler
Next of Kin. Berwick, King's County
Nova Scotia

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

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

P.T.O.

Station and Date.	

Medical officer.
Dr. Woodcock.

Forms
I. 1237
10

Army Form I. 1237.

MEDICAL CASE SHEET.*

Baptist.

Ward A. 10

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
F.C. 255	67715	Pte.	Butler,	James Kenneth.

Year	Unit.	Age.	Service.
1916	25th 1/5th Canadians B. Coy.	19	1 7/12

Station and Date: June 23/16

Disease: Influenza. Pleurisy (Rt. with effusion.

2nd WESTERN GENERAL HOSPITAL, SEYMOUR PARK, OLD TRAFFORD, Manchester

FOR TRANSFER CLASS. *

4 Seaside

July 8/16. allowed out.

INOCULATION AGAINST ENTERIC.

T V	T V	T V
1	2	Nil.

Date 1914

CROSS OUT THAT WHICH DOES NOT APPLY.

June 25. Exploring 2 mls. blood flake serum. Hbls

9.7.16 To Baptist Schools, Chorlton cum Hardy

7.9.16 Discharged

Next of Kin.

(Mother) Mrs G. W. Butler
Berwick
Kings County
Nova Scotia
Canada.

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

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

P.T.O.

Station and Date.	

Forms
I. 1237
11

Y154r

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
67715	67715.	Pte	Butler.	Jas K.
Year 21542.	Unit. 25 Bn.		Age. 19.	Service. 24/12

Station and Date. MOORE BARRACKS, CANADIAN HOSPITAL, SHORNCLIFFE

Disease Pleurisy. Dvgt. Cases 1/12

31/10/16

Complaint. Pains in L. chest. Cough & expt.

Duration Some time. Last week or two

P. H. Taken ill at Seaford. Was sent to camp hosp.

F. H. Sents to D.

Present

H. P. I. Began in May. 1916. pains in L chest coughing. Blood last 20 mins last two mins part of last day. Vomiting & Sweating since

Physical Exam. Chest moving well on right for slight restriction of L at lung base. Few rales.

Heart normal.

Urine Alb Trace. Sugar nil

4/11/16 Urine Alb Trace. Sugar nil

10/11/16 Chest moving well on L for Consolidation at base. Urine and Sputum negative for T.B.

13/11/16 Transferred to Epsom

to Genl Hosp

MOORE BARRACKS, CANADIAN HOSPITAL

16/11/16

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

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

P.T.O.

Station and Date.	

CLINICAL CHART.

(To be attached to Case Sheet.)

Army Form B. 181.

Corps 67715 A&D. 21542

No. 25 Bn Rank and Name Pte Butler Jas R. Age 19 Service 24/12

Military Hospital MOORE BARRACKS, CANADIAN HOSPITAL, SHORNCLIFFE

Disease Pleurisy Date of admission 31-10-16 Date of discharge Result Invalided

Dates of Observation	Oct 31	1	2	3	4
Days of Disease					
Temperature Fahrenheit — Time A.M. P.M.					
107°					
106°					
105°					
104°					
103°					
102°					
101°					
100°					
99°					
98°	98.4	98.2	97.6	98.0	
97°					
Pulse per Minute	84	90	76	80	
Respirations per Minute	20	20	20	20	
Motions per 24 hours					

(3253) W7204—1542. 750,000. 8/15. McA. & W. Ltd. Forms/B. 181/3.

Signature R. P. W. Hospital Capt. A.M.S. In charge of case.

Forms
I. 1237
.11

735

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
735	17715	Pte	Butler	Kenneth
Year	**Unit.**		**Age.**	**Service.**
1917	25th Batt. L. G. D. D		20	28/12

CANADIAN MILITARY HOSPITAL
HASTINGS, SUSSEX.

Station and Date.
Feb 22/17
C. M. Hosp. Hastings

Disease ~~Chronic Bronchitis~~ Phthisis.

8-3-17. Fairly well nourished ~~but~~ Is loosing weight
Considerable cough and expectoration.
Complains frequently of pains in chest.
Wt. 165-1/2 lbs. T.B. + in Sputum Mar 1st 1917

J. McCurdy

22 MAR 1917

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

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

P.T.O.

Station and Date.	

CLINICAL CHART.

(To be attached to Case Sheet.)

Army Form B. 181.

Corps 20th Batt. C. G. D. Military Hospital Hastings

No. 67715 Rank and Name Butler, Pte. Kenneth Age 20 Service 2 8/12

Disease Chronic Bronchitis Date of admission 22-2-17 Date of discharge 26-2-17 Result

Dates of Observation	25																														
Days of Disease																															
Temperature Fahrenheit	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.
107°	8																														
106°																															
105°																															
104°																															
103°																															
102°																															
101°																															
100°																															
99°																															
98°																															
97°																															
Pulse per minute	76																														
Respirations per Minute	20																														
Motions per 24 Hours																															

(29342) W6465—M789. 1,000,000. 9-16. D.P.W. A.F.B. 181. (373)

Signature _____ In charge of case.

CLINICAL CHART.

(*To be attached to Case Sheet.*)

Army Form B. 181.

Corps 25 Battn. Military Hospital C. M. H. Hastings Pinewood Section

No. 67715 Rank and Name Pte. Butler K. Age 20 Service 2 5/12

Disease Chronic Bronchitis Date of admission 22-2-17 Date of discharge _____ Result _____

Dates of Observation (March 1917)	10	11	12	13	14	15	16	17	18	19	20
Days of Disease											
Temperature Fahrenheit — Time A.M. P.M.											

107° 106° 105° 104° 103° 102° 101° 100° 99° 98° 97°

Pulse per Minute

Respirations per Minute

Motions per 24 hours

(2669.) W9043—1125. 800,000. 12/14. C.P., Ltd. Forms/B. 181/3.

Signature T. Pinewood Capt. In charge of case.

MEDICAL HISTORY SHEET.

Surname Butler *Christian Name* Jas Kenneth

Examined { on 19 day of Nov 1914
at Kabrfax

Birthplace { City or Town Berwick
County Kings Co

Apparent age 19

Trade or occupation Bank Clerk

Height 6 Feet Inches.

Weight 160 Lbs.

Chest measurement { Minimum 33 inches.
Maximum expansion 37 inches.

Physical development Good

Small-Pox Marks

Vaccination Marks { Arm Right. Left.
Number

When Vaccinated last

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

(*b*) Slight defects but not sufficient to cause rejection
Scar back of left ear -
Psoriasis mastoidalis

Approved by
J. A. Hopewell
Rank Lt Col, A.D. M.O.

Date	Fit or Unfit	Examined for Re-engagement,
		29 6 16 M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date	Result	Vaccinations.
27/11/14		J. Ross. Lt Col AMC M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
27/11/14		J. Ross. Lt Col AMC M.O.
8/12/14		J. Ross, Lt Col AMC M.O.
TAB 1cc	15/1/15	Wheldon M.O.

Enlisted on 16 *day of* Nov 1914 *at* Kingston

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	25 Bn 6th Regt	67715		16-11-14
Transferred to..				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
Hastings	27/11/14	Pleurisy	C-3 [illegible]
Hastings	20/2/14	TB (?)	Discharged [illegible]

PRESIDENT
STANDING MEDICAL BOARD

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.—1-15.
H. Q. 1772-39-439.

Invalided to Canada for further treatment
Hospital Representative Hastings.

Surname Butler ..... 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.
2nd WESTERN GENERAL HOSPITAL, MANCHESTER.		23	6	16	17	9	16	Influenza Pleurisy	90	31.7.16. Few rales at l apex. Cough. Sputum – blood tinged. Night sweats. Bact Exam of Sputum – Neg. report.	
											Major, R.A.M.C., T.F. Secretary and Registrar, 2nd WESTERN GENERAL HOSPITAL.
l l-Strap Epsom		7	9	16	31	10	16	– do –		Transferred to Moore Barracks Isop for Observation T.B. suspect.	
Moore Barracks Hpl, Shorncliffe.		31	10	16	14	11	16	Pleurisy	15	Can make out no fracture. Urine and sputum negative for T.B. No temp. Lungs negative. Transferred to Epsom for graduated exercise	W W Brun Capt Camc P D Dixon Capt Camc
Woodcote. Park Epsom		16	11	16	11	1	17	Pleurisy & Influenza		To l.C.A.C. for T.B.	C C Richardson
CANADIAN MILITARY HOSPITAL, HASTINGS, SUSSEX.		22	2	17	22	3	17	T.B.	28	Invalided Canada awaiting	J A Sutherland Capt. C.A.M.C., Registrar, For O.C. CAN. MIL. HOSP., HASTINGS.

MEDICAL HISTORY SHEET

Surname Butler Christian Name James Kenneth.

Examined { on 4th day of July 1918.
at Nova Scotia Sanatorium Kentville N.S.

Birthplace { City or Town
County

Apparent age

Trade or occupation

Height feet Inches

Weight lbs.

Chest measurement { Minimum inches
Maximum expansion inches

Physical development

Small-pox Marks

Vaccination Marks { Arm Right Left
Number

When Vaccinated last

(*a*) Marks indicating congential peculiarities or previous disease

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

Approved by

Rank M.O.

Date	Fit or Unfit	Examined for Re-Engagement	
			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.	
			M.O.
			M.O.
			M.O.

Enlisted on 20th day of November 1914 at Halifax N.S.

	Corps	Regt'l Number	Habits	Date
Joined on enlistment	25th Butler	67715		20/11/14.
Transferred to	6DD			5/7/17.
Transferred to	ISC.			4/7/18.

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

Station	Date	Disease	Result
Nova Scotia Sanat. Kentville N.S.	4/7/18.	Pulmonary Tuberculosis	Category C. Tbl

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.
300M.—1-17.
H. Q. 1772-39-439.

Surname Butler. Christian Name James Kenneth

STATION	Date of Arrival at the Station	Dates of Admission into Hospital			Dates of Discharge from Hospital			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
		Day	Month	Year	Day	Month	Year				
Nova Scotia Sanatorium Kentville N.S.	5/7/17	5	7	17	4	7	18	Pulmonary Tuberculosis	364	2nd Stage. Unimproved. Boarded for Category E for discharge and transfer to the U.S.A.C.	Lt K. Vincent

MEDICAL HISTORY SHEET

Surname Butler Christian Name James Kenneth

Examined { on 4th day of July 1918.
at Nova Scotia Sanatorium. Kentville N.S.

Birthplace { City or Town
County

Apparent age

Trade or occupation

Height feet Inches

Weight lbs.

Chest measurement { Minimum inches
Maximum expansion inches

Physical development

Small-pox Marks

Vaccination Marks { Arm Right Left
Number

When Vaccinated last

(*a*) Marks indicating congential peculiarities or previous disease

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

Approved by

Rank M.O.

Date	Fit or Unfit	Examined for Re-Engagement
		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.
		M.O.
		M.O.
		M.O.

Enlisted on 20th *day of* November 1914 *at* Halifax N.S.

	Corps	Regt'l Number	Habits	Date
Joined on enlistment	25th Battn	67715		20/11/14.
Transferred to	6thD.			5/7/17.
	ISC.			4/7/18.

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

Station	Date	Disease	Result
Nova Scotia Sanatorium Kentville N.S.	4/7/18.	Pulmonary Tuberculosis	Category E.

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.
300M.—1-17.
H. Q. 1772-39-439.

Surname Battles Christian Name James Kennett

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
Nova Scotia Sanatorium Kentville N.S.	5/7/17	5	7	17	4	7	18.	Pulmonary Tuberculosis	364	2nd. Stage of Pulmonary Tr. improved. Boarded for Category E for discharge and transfer to the S.S.C.	Lt. Venables

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

MEDICAL HISTORY OF

Surname Butler *Christian Name* James Kennett

Invalided to Canada for further treatment H Hospital Representative Hastings

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	25th Batt^n	6775
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
2-3-17	Hastings SNB Invd to Canada W.A.M.O. Inter Major.
	Hastings, Sussex APPROVED 3-MAR 1917 for A.D.M.S. Canadians Captain, C.A.M.C. Hastings.

TABLE IV.—Service Table.

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

Y 8714. Wt. W 8827/M945. 300m. 10/16. Drayton Mill. (529)

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				
CANADIAN MILITARY HOSPITAL, HASTINGS, SUSSEX.	22	2	17	27	3	17	213	28	Ind Canada Country Sailor	[illegible]

RECEIVED SEPT. C.A.M.C. REGISTRA
FOR O.C. CAN. MIL. HOSP., HASTING

FORM TO BE USED INSTEAD OF BLANK SPACE ON ARMY FORM 179.
PROCEEDINGS OF MEDICAL BAORD AT DISCHARGE DEPOT.

DEPT MILITIA & DEFENCE
APR -9 1917
H.Q. CANADA

Number, Rank, Name & Corps of disabled Soldier:-
67715 Pte Butler Lewes Kenneth
Previous civilian occupation:- Bank Clerk

Is he able to resume previous civilian occupation:- no

Cause of disability:- Shell Shock; and Pulmonary Tuberculosis.

Condition, in detail, which prevents the Soldier earning a full livelihood:-?

Insomnia, Loss of appetite and weight. In the trenches four months. In June 1916 Shell exploded, wounded his right leg, hip & back and pieces of wood. Taken to Hospital Boulogne where it was discovered that he had pleurisy with effusion.

Present Condition. Gets tired on the least exertion; shows some pallor, low Tension press. Temperature normal, Heart normal. Right Pulmonary apex shows impaired resonance and prolongation of expiratory murmur. No rales. Impaired resonance at angle of right scapula. Occasional Cough E. B. Days Sputum negative

OPINION OF THE BOARD.

Degree of incapacity(please state in fractions) 100%

Disability due to Service:- Yes, Service. 100% ORC

Probable duration of incapacity:- One year

Does it render him permanently unfit for Military Service? Yes

Would operation, special treatment or the use of appliances etc., lessen incapacity:- Yes Sanatorium for T.B.

Recommendation of Medical Board---
That he be sent to a Sanatorium for T.B.

Station:- Halifax, N.S.

CLASS:-# II

Date March 31, 17

D. P. Cronin Capt R.C. President

S. J. Macdonald Member

F. W. Anderson Capt R.A.M.C. Member

Approved.
Date 3-4-17

Conrad Gregorie Major
for Assistant Director of Medical Services

Date 14/4/17

D. B. Hurley Capt
Director General of Medical Services

B.P.C. FOLIO
FALSE DOCKET
7

CASE HISTORY SHEET.

No. 67715 Rank Private Name James K. Butler Age 21.

Unit 6th D Completed years of service Where and how long 3 yrs. 226 Dys Canada France

Date of admission 5/7/17 Date of discharge 4/7/18.

Diagnosis Pulmonary Tuberculosis Place of origin France

CONDITION ON ADMISSION AND PROGRESS OF CASE Poor.

19/7/17 R.L.L. Turban II. Right lung Coarse Rales Heard on coughing at apex and Base in front Fine Rales at apex Moderately coarse Rales from 4th vertebral spine to base with frequent pleuritic rubs. Left lung No Rales.

28/8/17 Moderately Coarse Rales with frequent pleuritic rubs to Base of Right Lung in Back Slightly improved.

2/10/17 Fine Rales at back of Right Lung with Pleuritic Rubs 4th vertebral spine to base.

2/11/17 Fine rales with pleuritic rubs back of right lung 5th vertebral spine to base. Improved.

4/12/17 Same. Slight Improvement.

4/1/18 Same Further Improvement.

28/1/18 Same

2/2/18 Fine rales at back of right lung from 7th vertebral spine to Base. Pleuritic rubs have disappeared. Improved.

6/3/18 Fever. Moderately coarse rales from 5th rib to base in front and from 3rd Vertebral spine to base in right lung. And from apex to Base in front and 6th vertebral spine to Base in back. Condition Worse.

21/3/18 Fever, laid up in bed. Condition as on 5th.

On Pass to April 29th/1918.

9/5/18. Right lung. Fine Moist to coarse Rales to 4th Rib in front Moderately coarse rales to Base in Back. Breathing is rough at Base in front. Broncho-Vesicular at Apex in Back. Left Lung. Moderately Coarse Rales to Base in front and to 6th vertebral spine in back. Breathing is rough. Unimproved.

12/6/18. Moderate Coarse Rales to Base front and back both lungs. Haemoptysis Slight +. Stomach poor bowels irregular Not improved.

FAMILY HISTORY (Tuberculosis, mental or nervous diseases.) Negative

TREATMENT (Especially any specific or special form.) To be placed in Category C for transference to the D.S.C. for Rest and treatment.

Sanatorium treatment at Kentville, N.S. (364 days)

CONDITION ON DISCHARGE, (and disposal made of case.) Unimproved. Boarded for Category E for discharge and transfer to the D.S.C.

Date July 4/1918

Medical Officer i/c case.

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

N.S. Sanatorium, Kentville N.S.

Form R & O 6045
1238-180M-29/11,16.

DEPT. OF MILITIA & DEFENCE
FEB 28 1916
H.Q. CANADA

PROCEEDINGS OF A MEDICAL BOARD.

Dated at Hastings this 20th day of Feb 1916.

No. 67715 Rank Pte. Name BUTLER J.K.

Local Unit ..... Overseas Unit 7th Bn. Age 20.

Examination held at S.M.B.

DISABILITY.
Overseas—Local.
(scratch one out)

Pulmonary T.B(?)

PRESENT CONDITION.

Has just come off the
sick parade, has a Cough.
Breath sounds Examined on
pt. Side

BOARD RECOMMENDS:— Dis Hastings Sanatorium
for Observation & Treatment

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.
.....
.....

B. P. C. FOLIO
FALSE DOCKET

APPROVED

20 FEB 1916
Hastings, Sussex

Dated at .....1916.

For A.D.M.S.

Captain, C.A.M.C.
for A.D.M.S., Canadians
Hastings, Sussex

PROCEEDINGS OF A MEDICAL BOARD.

Dated at ..... 1916.

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

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

Examination held at .....

DISABILITY.
Overseas—Local.
(Primary Cause)

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:

..... President.

..... } Members

.....

APPROVED

Dated at ..... 1916.

For A.D.M.S.

Form R. & O 6045
1238-130M-29/11,18.

0 Ent. 19345

DEPT. MILITIA & DEFENCE
FEB 28 1918
HQ 254-4-776

PROCEEDINGS OF A MEDICAL BOARD.

64B/83-13189

B. P. C. C. R.
MAR 8 1918

Dated at Hastings Jan 12th 1916.

No. 67715 Rank Pte Name BUTLER, J. K.

Local Unit — Overseas Unit 25th Age 19

Examination held at Hastings
Military Hospital "D"

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

PRESENT CONDITION.

10½ months in France - This man has a very poorly shaped Chest - X Rays show no T.B. Is Asthmatic. He has some dyspnoea on light exertion. There are no signs present in lungs of trouble - Has slight Cough - and looks miserable -

C-3 (Clerk - in Hastings at some point with good chance of Ability).

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.
..... Capt
.....

APPROVED

Hastings, Sussex
13 JAN 1917

Dated at .....1916.

B. P. C. FOLIO
FALSE DOCKET

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

PROCEEDINGS OF A MEDICAL BOARD

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

Dated at ..... 19..

PRESENT CONDITION.

Examination held at .....

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

DISABILITY.

One year's—Local

Permanent and total

Cause .....

Duration .....

Aggravated by Service .....

Result .....

Remarks .....

Signature .....

Rank .....

Medical Board.

APPROVED

Dated at ..... 19..

Member .....

.....

.....

President.

BOARD RECOMMENDS:—

1. Discharge .....

2. Fit for Temporary Base Duty .....

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

4. Fit for Duty .....

5. Fit for duty after .....

6. Discharge .....

Signature .....

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS DISTRICT 6.

NAME OF SOLDIER Burton, L. (or Burton) Butler RANK Pte.

REGIMENT 25th Batt (B Unit Mtlcs) No. 67715

B 15

INSTRUCTIONS

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

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

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

	Date	Amalgam	Temporary Filling (a) G. P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhœa	Synthetic Porcelain	Extracting	Dentures U	Dentures L	Dentures P	Gold Clasp	Gold Filling	Crowns Gold	Crowns Porcelain	Bridge Work	OPERATOR	Military Dist.	REMARKS
Condition on first Examination	1917 July 31										R 1-16 36									J. K. Farres	6	18-19, 20, 22, 23, 24, 25 26, 27, 29, 31
	Sept 11	2/ 19, 20 21, 22		1/8																F.O. Johnson	6	

Nos. 3, 465
2 17
17 950

20784/414

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

Name Butler (Surname) James Kenneth (Christian Name)

Regimental Number 67715 Rank Pte.

Unit 25th Bn.

Original Unit

District where paid

Date of Discharge 31-7-18

P. D. P. Filing Number

Address (in full)

Berwick
N. S.

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

L.L. 53961—M. & D. 9721

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

May 25 3/19

Remarks: New Ledger Sheet No 1 record of P.D.P. paid.

M. F. W. 127
30GM-1-19
17-2-30-1140

P. O. P.

Dec'n No 20784/HHA W. S. G. File No 25964/H-5.

Award 91 days at $ 1.10 per day $ 100.10

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

Less P, D. P. Credited $ .....

$

Less further debit balance $ .....

Issued $ 100.10

TO						
	R. C. O. 23254	94th 740	100.10			

19-6-19

GEN'L AUDITOR
Posting checked by
J. O. Brown
Date 19-6-19

M. F. W. 41
1 0M—7-16
1772-39 889.

1483

Name Butler Pte J K

Regimental No. 67715

Unit 25 Bttn

Date of enlistment

Place of "

Married (yes or no) No

Amount of pay assigned monthly $ 30 Mar 1917

To whom payable Geo W Butler

Name and address of next-of-kin

Derwick
N.S.

Date and place discharged

Reason for discharge

Character on discharge

Same Addy Essequibo 31/3/17

Form 5351—M. & D. 6890.

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					
	20/3/17							3 4 18						40 -		Ld Stafford
21/3/17	31/3/17	11	1 -	11 -	11	.10	1 10	- -				Balber		6 18		To Bttn 1/4/17
									46 18						46 18	

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. Job 80137—M. & D. 56

Ewd

52

M. F. W. 12.
20m.—5-15.
H. Q. 1772-39-819.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

To Whom Geo. W. Butler

Address Berwick
Kings Co
N.S.

Rate 20.00

JUN 1 1915

By Whom Assigned Butler James K

Regtl. No. 67715

Rank Pte

Corps B. Co 25th Battn

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			Stop Payments April 1/17 Discharged to Canada 3M 20/3/17 a.t.c. 1/5/17 Prev noted F. X.
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June		M20471	20 00	
July		03540	20 00	
Aug.		Pd335	20 -	
Sept.		R6710	20 -	
Oct.		S5968	20 -	
Nov.		U7315	20	
Dec.		V4520	20	
Jan.	1916	X8390	20 -	
Feb.		Y11410	20	
March		K15540	20	

COY FC 5 CASUALTIES.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

53

M. F. W. 12a.
60m.—12-15.
1772—39—819.

Sheet No. 2. Geo. W. Butler

L. L. Job 89002.—Req. 6213.

Name of Soldier Butler James Ko.
B. Co, 25th Batt.

$ 20.00

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916	M 860	20	
May		M 4041	20	
June		07987	20	
July		D 7063	20	
Aug.		A 11225	20	
Sept.		V 16717	20	
Oct.		V 21549	20	
Nov.		M. 24685	20	
Dec.		D 30340	20	
Jan.	1917	W 32068	20	440 a/c closed
Feb.		W 39054	20	Rptd Essequibo 22-3-17
March		W 49452	20	T.X. 29-3-17 J.446.
April		~~J 446~~	20	20 Y6 J. 446 Cancelled
May				
June				
July				
Aug.				
Sept.				
Oct.				
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.				

Rank Name BUTLER James Kenneth. Reg'l No. 67715.

Unit 25th Bn. If in perm. Corps, What Unit? Married or Single Single.

Place and Date of Enlistment Halifax. N.S. 26th Nov. 1914. Place of Birth Berwick Kings Co.N.S.

Name and Address, Next-of-Kin George W. N.Butler. Berwick Kings. Co. N.S.

Relationship Mother.

OFFICE OF THE MINISTER OF MILITIA AUG 16 1917 CANADIAN CONTINGENT

Assigned Pay Monthly $ 20.00 Payable to Next of Kin

Relationship

Separation Allowance $ Payable to

Relationship

Entered on N. Card Index V.W.

Checked by T. Macdonald

Discharge, Date and Place Reason Character

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, Casualties, etc.
1/6/15	30/6/15	30	1	30	30	.10	3		33.	68	1/5	12.50	20		27.50	5.50	
1/7/15	31/7/15	31	1	31	31	10	3.10		39.60		1/10		20		30	9.60	
															Adj Exchange		47
Aug 1	Aug 31	31	1	31	31	10	3.10		34.10		1/9.73		20		29.73	14.44	
Sept 1	Sept 30	30	1	30	30	10	3		33				20		20	27.44	
Oct 1	Oct 31	31	1	31	31	10	3.10		34.10		1/7.97		20		27.97	33.57	
Nov 1	Nov 30	30	1	30	30	10	3.		33.		1/16.96		20		36.96	29.61	
Dec 1	Dec 31	31	1	31	31	10	3.10		34.10		1/5.24		20		25.24	28.47	
1916 Jan. 1	Jan. 31	31	1	31	31	10	3.10		34.10		1/7.62		20		22.62	49.95	
Feby 1	Feby 29	29	1	29	29	10	2.90		31.90		1/7.85		20		27.85	54.-	
Mch 1	31	31	1	31	31	10	3.10		34.10		1/4.36		20		24.36	63.74	
				305			30.50	47	335.90			223.200			272.23	63.74	

Checked W.R.W.

BALANCE TRANSFERRED TO NEW LEDGER

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							

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
14/1/17	C.R.D.	Trans to D.C. Hdq. C.M.G. Cleveland Hants ~~Staff~~ A.P.A. Lyndon Commdg. Canadian Garrison Duty Depot.	London	Lt. Col.	Part 2 D.O. No 20 - 24/1/17 A/C
15-2-17	R.D. G.H. London	Returned to. C.G.D.O.	Hastings	15.2.17	T. Cunningham LIEUTENANT, OFFICER i/c DETAILS,
17/4/17	b.b.a.b.	Cases to be attached on attachment to b.G.D.O.	b.G.D.O.	17/4/17	Part II D.O. No. 101
3/5/17	b.b.a.b.	Cases to be attached to + taken on strength of Nova Scotia Reg't Depot. While patient in Canadian Military Hospital	b.G.D.O. Bramshott. Hastings.	3/5/17	Part II D.O. No 117 R. Davis Lt & Adj. for Lt. Col. Commanding Canadian Garrison Duty Depot.
22-3-17	N.S.R.D.	T.O.S. from b.b.a.b. & on command to b.a.s.b., Bramshott	Bramshott	22.3.17	Part II D.O. 13
28-4-17	"	On Command b.G.D.b.o. Hast.	"	28-4-17	" " " 50
8-5-17	"	Admitted to b.M.H. Cre.	"	8-5-17	" " " 60
30-7-17	"	S.O.S. disc. to Canada	"	30-7-17	" " " 143

Dickson LIEUT,
OFFICER i/c RECORDS,
NOVA SCOTIA REGTL. DEPOT.

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

Army Form B. 103.

CERTIFIED CORRECT.
Canadian Record Office,
Westminster House,
7, Millbank, S.W.

Casualty Form—Active Service.

Regiment or Corps 25 Bn. C.E.

Regimental No. 67715 Rank Pte. Name Butler, James Kenneth

Enlisted (*a*) ~~24~~ 16/4/15 Terms of Service (*a*) Period War Service reckons from (*a*) ~~24~~ 16/4/15.

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

Extended ____ Re-engaged ____ Qualification (*b*) ____

Report		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				
25/9/15	25 Bn.	Disembarked	Boulogne	SEP 15	1915 Nom Roll.
2-12-15	" "	Att. 5th Bde as Scout.	5th Bde.	1-12-15	B 213 2-12-15
20-6-16	3 Can Sta Hpl	Influenza	adm 3 Can Sta Hpl	20-6-16	W3034
22-6-16	H/S Jan Breydel	Influenza	to H/S Jan Breydel	22-6-16	W3083 - Part II - O - 27 - 7 - 7 - 16

A. C. Cockshott Lieut.
for Lt Colonel. A.A.G.

4.7.16. Taken on strength C.C.A.C. Pt. II D.O. No. 254

14.1.17. ATTACHED ~~TRANSFERRED~~ FROM C.C.A.C. TO G.D.D. PART II D.O. No. ....

L. Mackie — Lieut.
for O.i.C. C.C.A.C.

(*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.

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

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

Casualty Form—Active Service.

Unit, Regiment or Corps ..... 25th Bn. C.E.F.

Regimental No. 67715 Rank Pte Name Butler J.H.

Enlisted (*a*) Nov 1914 Terms of Service (*a*) Duration War 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*) Bank Clerk

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				
					D.D. 8/4/18 [signature] CAPTAIN ADJUTANT NO. 6 DISTRICT DEPOT
		TAKEN ON STRENGTH NO. 6 DISTRICT DEPOT			Do 1 18/4/18
		Posted to Details Co	Halifax NS	14/4/18	Do 16 3/5/18 [signature] LIEUT. O.C, DETAILS COMPANY NO. 6 DISTRICT DEPOT.
27.7.18	—	Transferred to Hosp Sect.	Halifax N.S.		
		Tested to Cat Cay	"	4.7.18	RSD 103 F.D. & Mp [signature] CAPTAIN 2nd. IN COMMAND HOSPITAL SECTION No. 6 DISTRICT DEPOT
4.7.18.		Taken on strength of Casualty Comp'y	fr. Hosp Sect		
31.7.18		DISCHARGED at Halifax, N. S			[signature] LIEUT O.C. DISCHARGE SECTION NO. 6 DISTRICT DEPOT
31-7-18	Do. 120.	STRUCK OFF STRENGTH NO. 6 DISTRICT DEPOT.			
		Discharged	Halifax NS		[signature] Lieut A/ST. ADJT. No. 6 DISTRICT DEPOT.

(*a*) In the case of a man who has re-engaged for, or enlisted into Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered.
(*b*) *e.g.* Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

[P.T.O.

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

12

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

Regtl. No., Rank and Name 67715 Pte Butler. Corps 25th Batt (C.E.F.

Disease Pleurisy Hospital M. B. C. H.

To Officer i/c Laboratory. Ward 14 Bed 11.

Please carry out an examination of the accompanying specimen of Sputum.

with special regard to T. B.

Date 3rd Nov 1916.

R S W Lieut

O. i/c Ward.

LABORATORY REPORT.

No T.B. found

Date of Examination

O R Douglas Capt

O. i/c Laboratory.

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

LABORATORY REPORT

A & D no - 21542.

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

Regtl. No., Rank and Name 67715, Pte Butler Corps 25 Bn.

Disease Pleurisy Hospital M.B.C.H.

To Officer i/c Laboratory. Ward 4, Bed 11.

Please carry out an examination of the accompanying specimen of Sputum

with special regard to T.B.

Date Nov 1, 1916. P.J. Wilson Capt.

O. i/c Ward.

LABORATORY REPORT.

No T.B. in smear

Date of Examination 1-11-16 C.P. [illegible] Capt.

O. i/c Laboratory.

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

LABORATORY REPORT

31

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

Regtl. No., Rank and Name Pte Butler No 67715 Corps 25th Batt C.E.C.C.

Disease Pleurisy. Hospital M.B.C.H.

To Officer i/c Laboratory. Ward 14 Bed 11.

Please carry out an examination of the accompanying specimen of Sputum.

with special regard to T.B.

Date 5th Nov 1916. C P Wilson Capt

O. i/c Ward.

LABORATORY REPORT.

Negative T.B

Date of Examination _____ C P Douglas Capt

O. i/c Laboratory.

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

LABORATORY REPORT

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

Regtl. No.; Rank and Name 67715 Bdr. J. K. Pb Corps C. F. A.

DEPT. MILITIA & DEFENCE
FEB 28 1918
H.Q. CANADA

Disease _____ Hospital _____

To Officer i/c Laboratory. Ward _____

Please carry out an examination of the accompanying specimen of Swab

with special regard to diphtheria bacilli - B. 1/2/17

Date 22 JAN 1917 _____

O. i/c Ward.

LABORATORY REPORT.

4

22 JAN 1917 negative

23 JAN 1917 negative

Ok to forward to Toronto

Wm. Fno.

B. P. C. FORM
FALSE DOCKET
2

Date of Examination 24 JAN 1917

Thos R Leitch Capt

O. i/c Laboratory.

W 12935—6740 200,000 11/15 H W V (M 875) Forms/W. 3212/1
1439—480 200,000 5/16

MAR 1 1918

NOT CHARGED FEB 2 8 1918

379-
28/2/18

U. S. ARMY
TALBOT HOSPITAL

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

Regtl. No.; Rank and Name 67715 Pte Butler K Corps 25 Batt

Disease T. B Suspect Hospital CANADIAN CONVALESCENT HOSPITAL, SANITORIUM SECTION, HASTINGS.

To Officer i/c Laboratory. Ward

Please carry out an examination of the accompanying specimen of Sputum

with special regard to T. B.

Date 1 MAR 1917

Woodward Capt
O. i/c Ward.

LABORATORY REPORT.

1 MAR 1917 Bacilli

Date of Examination

Thos. R Little Capt
O. i/c Laboratory.

W 12935—6740 200,000 11/15 H W V (M 875) Forms/W. 3212/1
1439—480 200,000 5/16

A&D no - 21542

REQUISITION

DATE Nov: 1, 1916

REG. NUMBER 67715

NAME Pte Butler

UNIT 25 Bn.

WARD 14, Bed 11.

DIAGNOSIS Pleurisy

EXAM REQUIRED Routine.

MEDICAL OFFICER

RS Sinclair

REPORT

COLOUR Straw

S.G. 1.028

REACTION acid

SUGAR neg

ALBUMIN neg

MICROSCOPIC

C A Douglas

Capt C.A.M.C.
Officer i/c Laboratory

D.M.S. 1300.

Surname	Christian Name or Names	Reg. No.
Butler	J. K.	67715

Rank	Unit	Co.	Troop	Batty.
Pte	25th Bn			

Hospital — Date of Admission

2. W. Gen. Manchester 23.6.16

Transferred Woodcote, Epsom Hosp. 8.9.16

Moore Barracks Hosp. 1.11.16

Epsom Convl. Hosp. 17.11.16

~~6 Gen. Hastings~~ Hosp. 23.2.17

Diagnosis: Influenza + Pleurisy

(1) Later Diagnosis (if changed): Bronchitis Chr

(2)

(3)

Additional Diagnosis: if more than one state present

DISPOSITION — Date

Dis. 11.1.14
– 22.3.14.

REMARKS

CL 27.6.16 B95.
" 12.9.16 B159
" 8.11.16 B208.
28.11.16 B274
" 24.1.16 B243.
2.3.17 B301
11.4.14. B332

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

RW

EPITOME OF HOSPITAL TREATMENT.

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

Name **BUTLER J.K.** Rank **Pte.** Regt. No. **67715** Unit **B 6.**

Battn. **25th** Camp or O. S. **O** File M. H. C. C. H.Q. File

Pension awarded Date of first payment

Discharged to Class Conduct on discharge

Next of kin **G. Butler,**

Address on discharge **Berwick. Kings Co. N.S.**

Diagnosis **S. S. & T.B.** Date boarded **31-3-17** D. of D. **100%**

DATE	CLASS	REMARKS	Part 2 Order
5-7-17	2	Kentville from "B" Unit.	#168
1-12-17		Staff extra duty pay. #	#326
2-4-18	2	Kentville Outpatient	#94
18-4-18		Trans to D.D. 6. Details Co.	108-1
3-5-18		Hosp. Sect.	17. 26.
4-7-18		Cas.Co.	103.

over

M.H.C. F. 29. 5m-4-17. G.H.P. Ltd.

DATE	CLASS	REMARKS	Part 2 Order
31-7-18		DISCHARGED. TO. I.S.C.	120.

No. 715 Rank Pte Name Butler Jas. K.

67715 (mar. payliste)

T. O. S. 24-11-14 Unit 25th Bn.

D. O. #1-30-11-14

M. D. 6

PAID FROM	PAID TO	SIG. OR REC'T
1914	1914	
Nov. 24	Nov. 30	✓
Dec.		✓
1915	1915	
Jan.		✓
Feb.		✓
Mar.		✓
Apr.		✓
May.		✓
June.		M

PROMOTIONS, TRANSFERS, DISCHARGES, ETC.

PARTICULARS	AUTHORITY
	UNIT SAILED MAY 20 1915

Southern Sanatorium, St. Helen's Park, Hastings.

This is to Certify that _____ is suffering from _____ and is hereby rendered incapable of performing his ordinary employment.

_____

Date _____ *Medical Superintendent.*

Pte Butler Weight Card

28/2/17 169 ½ lbs

6/3/17 165 - ½

12/3/17 165.

20-3-17 163 ½

D.M.S. 1313.

CANADIAN CONVALESCENT HOSPITAL
AT

G A. & D. CARD.

Regt. No. 67715

Rank Pte Corps 2 S

Name Buckle . JK . Age 19 Religion Bapt.

Service at Home 1/10/12

„ „ Front 9/12

Diagnosis Pleurisy & Myalgia

Admitted 7.9.16. 2nd C Gen Hosp Aucha Gr.

Discharged

Place in Hospital

M. H. Rec'd (See Document Card)

Transferred 31-10-16 Moore Bks Hosp.

Results

P.T.O.

REMARKS: 8.9.16. Dulness on Rt side, anaemic Lt Duty
appetite poor. Lt Duty.
12.9.16. L.D.
19.9.16 Sputums exam. T.B suspect.
26.9.16. do do do. L.D.
3.10.16. Improving, another sputum exam, Spec Exercise
24.10.16 T.B. suspect. Moore Bks for observation

J. McBrien.

No. 67715 Rank Pte. Name Butler J. R.

T. O. S. Unit Discharge Depot

M. D. 6

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1917 1 Mar.	1917 Mar.	✓	Dates not stated 25th B'n.	Mar pay list. " "

cf 649-B-13189

SURNAME. Butler,

CHRISTIAN NAMES James Kenneth.

REGL. No. 67795 RANK Pte.

UNIT ~~25th Bn.~~ #6 D.O.

FORMER CORPS Nil.

CARD NO.

Lost Dis M U.31-7-18

FOLL.

W.D. 120 D/15-8-18

Batt.

NEXT OF KIN.

NAMES IN FULL Butler, Mrs. Lila M.

RELATIONSHIP TO SOLDIER Mother

ADDRESS Berwick, Kings Co., N S

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada Berwick, Kings Co. DATE Sept 13/96

PLACE OF ATTESTATION Halifax DATE 24/11/14

R/C - 31/3/17.

O/S. 20-5--15-88/4

L. L. 90589.—M. & D. 6312.

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

MARRIED SINGLE Yes. WIDOWER

TRADE OR CALLING Bank Clerk RELIGION Baptist

DESCRIPTION.

APPARENT AGE 18. YEARS MONTHS

HEIGHT 6. FEET INCHES

CHEST MEASUREMENT 37 INCHES EXPANSION 4 INCHES

COMPLEXION Fair EYES Hazel HAIR Lt Brown

DISTINGUISHING MARKS

Height 160 lbs.

MEDICAL EXAMINATION. PLACE Halifax N.S. DATE Nov 11/ 14

Returned to Canada per S.S. "Esquibo" 22-3-17 Med Transfer Auth T323

R. 149.

Name Butler, Jas. Kenneth. *Rank* Pte. *Reg. No.* 67715

Unit 25th. Battalion.

Next of Kin

CANADA

1916 Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
23 6	2nd. Western G.H.	Manchester.	Influenza.	B95		
8-9	CCH	Woodcote Park Epsom	Pleurisy Influenza	B159		
1-11	Moore Bks Hosp	Shorncliffe	do	B208		
17-11	CCH	Woodcote Park Epsom	do	B224		
1917 11-1	Discharged		do	B273		
23-2	Can. Military	H. Hastings. Chr.	Bronchitis. chronic.	B281		301
22-3	Discharged		do.	B332		

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

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
B95	2nd West Gen Manchester	23-6-16	Influenza
B159	Can Conv, Wdcte Pk Epsom	8-9-16	Pleurisy Influenza
B208	Mil Barr, Shorncliffe	1-11-16	Pleurisy & Influenza
B224	Mil Con Hosp (Can) Woodcote Pk Epsom To Mil. Conv Woodcote Pk Epsom	17-11-16	Pleurisy & Influenza
B273	Can Conv Wdcte Pk Epsom	17-1-17	" " " Sick
B231.	Can. Mil Hastings.	23-2-17.	Bronchitis Chronic
B332.	Disc	22.3-17	" "
168	M. H. C. C. Halifax	5-7-17	Trans. to Kentville San
82	M. H. C. C. Halifax	11-4-17	Adm. on Furlough at Home

M.D6 – 14.

NAME Butler J. R

RANK AND CORPS Pte. 25th Bn.

REGT'L NO 67715

H. Q. FILE NO. 649-

FOLLOWS NO.

FOLLOWS

CABLE No.	CABLE DATE	NATURE OF CASUALTY
J 323.	25-3-17.	Sailed from Liverpool for Canada per the Hosp. Ship. "Essequebow." on the 22nd inst. (Phthisis)

L. L. Job 90581—M. & D. 6314.

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

From Epsom

OVERSEAS. 9/12

ADMITTING CARD.

Regt. No. 67715 A. & D. No. 21542.

Rank Pte

Name Butler James R

Corps 25 Batt attcac

Religion Bapt Age 19

M. H. Rec'd M. H. Requested M. H. Ret'd

Disease Pleurisy

Admitted 31-10-16

Discharged

Place in Hospital 14

Transferred to Epsom NOV 16 1916

Results

24/12 Halifax no yes P.T.O. 2.40 pm

REMARKS:

MEDICAL HISTORY SHEET.

Orig. read. from Epsom ..... 1 /11/1916.

Dup. read. from ..... /..../191 .

Orig. sent to ..... /..../191 .

Dup. sent to ..... /..../191 .

Received by Registrar this date. Orig. 13/11/1916.

Dup.

J. Thomson ..... Ward 7

Ed

Number 67715 Rank Pte

Surname BUTLER

Christian Name James Kenneth

Units 25th B.C. Inf Theatre of War France

Date of Service 15.9.15

Remarks Geo. W. Butler Esq (F) 329-W-96th St., Los Angeles, Cal., U.S.A.

Latest Address ~~Burnaby~~ ~~Kings Co~~ 48

Roll No.

200m.-6-21.d.

B. Page 2127

GRATUITY (IMPERIAL)

DESP REGN. NO. JUL 6 1925

CHRISTIAN NAME	SURNAME	REG. NO.
SCHEDULE NO.	LINE NO.	
UNIT RETIRED OR DISCHARGED FROM		
PLACE OF RETIREMENT OR DISCHARGE		
DATE RECEIVED FROM OTTAWA	IMPERIAL DEPOT NO.	
DATE RECEIVED FROM REG. DEPOT.	DATE FORWARDED TO OTTAWA	

868—D.P.—40M-1-12-19.

649-B-13189

BUTLER, Jas. K. - #67715 - Pte. - 25th Bn.

2 lists for 14th Star Pte. 25th Bn.

Medals & Decs. (Father) Geo. W. Butler, Esq.,
3/7/25. 329-W-96th St., Los Angeles, Cal., U.S.A.
~~Berwick, Kings C. O., N.S.~~

Placque & Scroll " do

Ser. # 987091.

Memorial Cross (Mother) Mrs. G .W.Butler,
(Same address as above)

Statement MD6-5-d 24 11/19

JV.6

Supp. List 7496 Dcsp. AUG 26 1920 (M.) C 19999

FEB 18 1924

Scroll Dep. Regn. No. 57037

AUG 22 1924

Photo Dep. Regn. No. 761

CANADIAN CONTINGENT EXPEDITIONARY FORCE

1918-19
No. 6 DISTRICT DEPOT

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. 67715 Rank Pte. Name Butler, J.K.

Corps 25th. Bn. who was* DISCHARGED.

On July 31st. 1918. 191..., to

*Insert "discharged" or "transferred."

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

Dr.	$	c.	Cr.	$	c.
Bal. Dr. from prev. month			Bal. Cr. from prev. month Augsut	34	10
Advances by Cheques No.			Regt'l Pay days at $ 1 c.		
Advances by Cheques No.			Field Allow. days at $ 10		
Assigned Pay and Sep'n Allce. No.			Separation Allowances* (Monthly)		
Other charges Pay A. P. & S. A. August	34	10	Other Allowances*		
Payment on transfer or discharge No.			Other Credits*		
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)		
Total	34	10	Total	34	10

*Give particulars.

A monthly stoppage of $ NIL. (†) 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.

Made by
Checked by
No. Last D.O. Pt. II 120
Date

Form No. 2
Line No. 29
Init.
Sept 9 1918

On Transfer of an Officer

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

M.D. No. 6
No. 53

REMARKS:—

State (1) date of enlistment

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

(3) cause of discharge authority D.O. 120.

(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 Sept. 9th. 1918.

Place Halifax, N.S.

Paymaster.

Paymaster No. 6 District Depot.

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.

Rank Pte. Name BUTLER James Kenneth. Reg'l No. 67715.

Unit 25th Bn. If in perm. Corps, What Unit? Married or Single Single.

Place and Date of Enlistment Halifax. N.S. 26th Nov. 1914. Place of Birth Berwick Kings Co.N.S.

Name and Address, Next-of-Kin Mrs Lila M.Butler. Berwick Kings. Co. N.S.

Relationship Mother.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

N/E. R.B. No. 2187
File R.L.
Category M U Can

Discharge, Date and Place Reason Character

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, per S.S. Sayona		29.5.15	
14-9-15		Embarked for France	Folkstone	13-9-15	Embarkation Memo 288
27.6.16	6th R. 25.	2nd Western Gen Hospl	Manchester	23.6.16	Influenza C.R. "B" 5
7.7.16	25th Bn	Invd. & trans to 6th C.A.B. Folkestone	In Hd	22.6.16	5 " Pt II 24.
4 7 16	6th C.A.B.	Taken on strength.	Folkestone	23 6 16	Pt II 025-4.
12 9 16	25th Bn	Trans to 6th C.H. Woodcote Park	Epsom	8 9 16	6th C.B. 159 Nervous Influenza
8-11-16	do.	2fd to Moore Bks Hospital	Shorncliffe	1-11-16	6 C.B. 208 " do
28.11.16	"	" " 6th C.H. Woodcote Park	Epsom	17.11.16	" 224 " "
27.1.17	25th Bn	Discharged " "	— " —	11.1.17	" 273 " "
15.1.17	6th C.A.C.	REPORTED TO C.C.A.C. from Epsom	Hastings	12.1.17	Pt II O 24(E)

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				
16.1.17	C.C.A.C.	On Command to Garr. Duty Depot	Hastings	15.1.17	Pt II 027 (f) C-3.
2.2.17	"	6 cases to be on Comd at GDDepot on Comd at CA 16 Brancshot	"	18.1.17	Pt II O 56.
1.2.17	CAMC 101	attd for pay + allces to 6	London	25.1.17	He Detd attd Pt II O 28
		Hy C.C. Cleveland Hospfor duty	London	~~15.2.17~~	~~He~~ " " " ~~41~~
16.2.17	"	S.O.S on rtn to unit (GHQ)	London	15.2.17	He " " " 41
2.3.17	25 Bn	Adm Can Mil Hosp Cbl.	Hastings	23.2.17	C H B 501 Bronchitis Chronic
14.3.17	C.C.A.C.	S.O.S. on transfer to	Hastings	10.3.17	Pt. II D.O. 120
22.3.17	N.S.R.D.	T.O.S. N.S. Regiment	Brockhill.	10.3.17	Pt II O. 13.
11.4.17	25th Bn	Adm. G C H Epsom ex. Busby	R.K. Epsom	22.3.17	C L B 332 Bron, Chr.
22.					
28.4.17	N.S.R.D	On Comnd 5 D Coy Hastings	Hastings	16.4.17	Pt II O 50
30.7.17	"	Ceases to con. 5 D Coy Hastings	He B'Hill	3.5.17	- " - 143
30.7.17	N.S.R.D	S.O.S on invaliding to Canada	He. B'Hill	22.3.17	Pt II D.O. 143
	Disch Def.	To Convalescent Home.	M.D. 6. Dunwich	N.S. 31.3.17	N.R. 229.

74-B-186.

TRANSFER CLOTHING CARD M.H.C.C.

Regimental No. 64415

Rank and Name Pte Butler J. R.

Battalion 25th Battn

Posted to "B" Unit, M.H.C.C. Date

Transferred to Mil. Conv. Hosp. or San.

at Kentville Date

PLACE AND DATES OF ISSUE		Boots, ankle, prs.	Caps, drab	Caps, winter, cloth	Caps, winter, fur	Gloves, winter, prs.	Great coats, drab	Jackets, drab, R. & F.	Overshoes, prs.	Mufflers	Puttees, drab, serge	Shirts, service	Slippers, canvas	Trousers, drab	Trousers, service	Tuques	Jackets, sweater	Pullovers
DATE	Units M.F."C" 512																	
1917	In Possession	1	1			1	1	1		1	1			1		1	1	
July 8 San												21		1				
Nov. 11		1		1			1											
20-1-18	"				1											1		
19-2-18			1															
19-3-18																		

Bags, kit	Brasses, button	Brushes, boot, blkg.	Brushes, boot, polshg.	Brushes, hair	Brushes, shaving	Drawers, winter	Razor and case	Shirts, flannel	Shirts, winter	Socks, worsted, prs.
1	1		1	1	1	2	1	2	1	2
1		1				2		2		2
										2

Discharged 31-7-18

M.H.C. F. 51 10M–12-16–M. Co.

TRANSFER CLOTHING CARD M.H.C.C.

Regimental No. _____ Posted to _____ Unit, M.H.C.C. _____ Date _____

Rank and Name _____ Transferred to _____ Mil. Conv. Hosp. or San.

Battalion _____ at _____ Date _____

PLACE AND DATES OF ISSUE		Boots, ankle, prs.	Caps, drab	Caps, winter, cloth	Caps, winter, fur	Gloves, winter, prs.	Great coats, drab	Jackets, drab, R. & F.	Overshoes, prs.	Mufflers	Puttees, drab, serge	Shirts, service	Slippers, canvas	Trousers, drab	Trousers, service	Tuques	Jackets, sweater		Bags, kit	Brasses, button	Brushes, boot, blkg.	Brushes, boot, polshg.	Brushes, hair	Brushes, shaving	Drawers, winter	Razor and case	Shirts, flannel	Shirts, winter	Socks, worsted, prs.
DATE	Units M.F."C" 512																											
	In Possession																											

M.H.C. F. 51 10M–12-16–M. Co.

A.A.D. no. 21575

REQUISITION

DATE Nov. 2, 1916

REG. NUMBER 63167

NAME Pte Butler

UNIT 36 Res Bn

WARD 14, Bed 31

DIAGNOSIS Bronchitis

EXAM REQUIRED Routine

MEDICAL OFFICER

J. McWhan Capt

REPORT

COLOUR straw

S.G. ———

REACTION acid

SUGAR neg

ALBUMIN neg

MISCROSCOPIC

Capt C.A.M.C.
Officer i/c Laboratory

-67715-

BUTLER, JAMES KENNETH

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

W

MILITARY DISTRICT NO. 6
HALIFAX, N.S.
SEP 26 18
59-B-1031

Proceedings on Discharge.

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

H

No. 67715.

Rank Private.

Surname Butler.

Christian Name James. Kenneth.

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

Corps (Squadron, Battery or Company) 25th

Date of Discharge 31-7-18

Place of Discharge Kentville. N.S.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 21 3/4 years months.
Height 6 feet 1 inches.
Complexion Fair.
Eyes blue.
Hair fair
Trade Bank Clerk
Intended place of residence (To be given as fully as practicable.) Berwick Kings Co. N.S.

Descriptive Marks

None

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

being medically unfit for further Military Service.

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.

Very 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)

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..... Present War not be awarded

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. ..... LIEUT
O.C. DISCHARGE SECTION NO. 6 DISTRICT DEPOT

(Date) July 31st 1918 *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.

(Place) Ventnor C N S J K Butler *(Signature of Soldier.)*

(Date) July 11th 1918 P Colborn *(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) 3 years 253 days.

Total 3 years 353 days.

11. **Confirmation of Discharge.**

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

(Place) Halifax N.S.

(Date) July 31st 1918 (*Signature*) D A MacRae Lt Col. Commanding No 6. District Dept

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.)

No Reservations.

J K Butler

(OVER)

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

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

That #67715. Pte J.K. Butler be placed into Category "E" for discharge and be transferred to the I.S.C. for further treatment.

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 Nova Scotia Sanatorium, Kentville. N.S.

DATE July. 4th.1918.

Members.

APPROVED BY

Assistant Director of Medical Services.

DATE 21-7-18

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.

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 Nova Scotia Sanatorium.Kentville.N.S. DATE 4th Jly.18

1. 1 (a) Unit No.6.D.D. (b) Regimental No. 67715 (c) Rank Pte Scout.

(d) Surname BUTLER (e) Christian name James Kenneth.

2. Age last birthday 21 Date of birth 1896

3. Enlisted at Halifax. N.S. on Nov.20.1914.

4. Personal description:—

(a) Height 6'.1" (b) Weight 150 lbs (stripped) (c) Complexion Fair

(d) Colour of hair Fair (e) Colour of eyes Blue (f) Identification marks. Scar behind left ear due to mastoid operation.

5. Address after discharge (for the use of the Board of Pension Commissioners) Berwick. King's Co. N.S.

6. Former trade or occupation Bank Clerk.

	Years	Days
7. (a) Service	3	226

	Periods	
	From	To
25th Battalion.	20.11.14.	5. 7.17.
No.6.D.D.	5. 7.17.	4. 7.18.
I.S.C.	4. 7.18.	

(b) Has he been overseas? Yes-France 8. Original disease or disability Pleurisy & T.B. Infection - shell shock.

(a) Date of origin Jun.1916 (b) Place of origin France.

(c) Cause* Shell shock, pleurisy T.B. Infection.

(d) Present disease or disability Pulmonary Tuberculosis.

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.]

PHYSICAL FINDINGS: RIGHT: Slight dullness to base front and back. Breathing is broncho vesicular at the apex and increased towards the base. Vocal resonance ++ On coughing moderately coarse rales are heard to 4th rib in front and to base in back.
LEFT: Slight dullness to base front and back, breathing is rough, Vocal

MILITARY DISTRICT No. 6 HALIFAX, N. S. JUL 19 1918 59-13-1031 M. D. No. 6

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

9. Present condition.—(*Continued.*)

resonance + to wards the apex. On coughing moderately coarse rales are heard over front and back. This patient is in the 2nd stage of Pulmonary Tuberculosis.

Loss of strength	+	Debility	+
Loss of weight	+	Hoarseness	o
Loss of appetite	+	Shortness of breath	+
Cough	+	Pleurisy	+
Expectoration	+		
Night Sweats	o		
Fever	+		
Haemoptysis	+		
Tubercle Bacilli	oo		

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

Nervous Was shell-shocked. Digestive poor Respiratory See #9 (a) Cardiac good

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

Ears: Left Tympanic membrane is ruptured.

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

He developed a serious pleurisy (Right) in June 1916.

(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.

None.

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

Not applicable

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 ?

Twelve months.

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

Sanatorium (364 days)

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.)

Yes

16. Can the former trade or occupation be resumed ?

No.

(If not, briefly state why.)

17. Recommendations That #67715 Pte J.K. Butler be placed into Category "B" and transferred to the I.S.C. for further treatment.

R.J. Collins

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 J.K. Butler 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.K. Butler

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.

Yes

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

Mod. advanced case. Requires 12 months' treatment.

(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).

From the I.S.C. as furtherSanatorium treatment will hot benefit him.

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.

(Sgd) A.F.Miller, *President.*

PLACE N.S.Sanatorium,Kentville,N.S.

DATE Oct. 11, 1918.

(Sgd) T.M.Sieniewicz,Lt.A.M.C. } Members.

APPROVED BY

Assistant Director of Medical Services.

DATE

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.

COPY.

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 Nova Scotia Sanatorium Kentville,N.S. DATE Oct. 11,18.

1. 1 (a) Unit 25th Battn. (b) Regimental No. 67715 (c) Rank Pte.

(d) Surname Butler, (e) Christian name James K.

2. Age last birthday 20. Date of birth 1898,

3. Enlisted at Halifax, N.S. on Nov. 20, 1914.

4. Personal description:—

(a) Height 6'0". (b) Weight 152. (stripped) (c) Complexion light.

(d) Colour of hair Lt.Brn. (e) Colour of eyes Blue. (f) Identification marks None.

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

Berwick, N.S.

6. Former trade or occupation Bank Clerk.

7. (a) Service

	Years	Days	Periods From	Periods To
25th Battn.			Nov. 20,14.	Jly.4.18.

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

(a) Date of origin June., 1916. (b) Place of origin Folkestone,Eng.

(c) Cause* Exposure to weather trenches,exhausting marches,shell shock

(d) Present disease or disability Pulmonary Tuberculosis, ententis & Colitis.

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 necessitv for rest of the body or of some of its parts.]

This man is in the 3rd stage of Tuberculosis. His disease is progressive.

PHYSICAL FINDINGS: RIGHT: Dullness over front and back, breathing

M. F. B. 227.

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9. Present condition.—(*Continued.*)

broncho vesicular to 3rd rib and diminished to base in front. Broncho-vesicular over the entire back in scattered areas. On cough coarse and moddrately coarse rales over both front and back (beginning) Areas of breaking down and probable many small cavities.
LEFT: Dullness over front and back. Breathing bronchial to the 3rd rib and the 5th Vert. Spine, broncho vesicular to base. On cough gurgles coarse and moderately coarse rales to base cavity to3rd R and 5th V.S.
Cough.....plus. Loss of strength....plus.
Expectoration.....plus. Pleurisy.....0.
Night sweats.....plus. Debility - marked.
Fever plus to 103. Haemoptysis plus. Recently t.B.Bacilli plus.
Loss of weight, plus.

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

Nervous Normal. Digestive see above. Respiratory see above. 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.

Began with pleusiry June 1916. He improved until Feb. 1918 when he developed Tuberculous ententis and since then has gradually failed.

(*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.

He has loss of appetite, frequent vomiting and persistent diarrhoea containing mucus and pus.

11. If the disabling condition had its origin before enlistment, has it been aggravated on service? Not applicable.

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? The debility is complete and he will not recover.

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

Sanatorium, July 5th, 1917, July 1918.

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.)

At the present time he is at home, Sanatorium treatment will not benefit his condition.

16. Can the former trade or occupation be resumed? No.
(If not, briefly state why.)

17. Recommendations For discharge from the I.S.C. as further Sanatorium treatment will be of no benefit to him.

(Sgd) R.J.Collins.,
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 J.K.Butler, 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

(Sgd) J.K.Butler.
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.

Yes.

19. Is the soldier 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 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).

PENSIONS AND CLAIMS BOARD, Canadian Expeditionary Force, assembled at Prior Park, Bath, 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 Prior Park, Bath, this day of , 191

President.

Invalided to Canada for further treatment

Hospital Representative Hastings.....

Army Form B. 179.
Canada.

Medical Report on an Invalid.

Station Hastings.

Date 19/2/17

16th Res. Bn.

1. Unit. 35th Bn.
2. Regimental No. 67715
3. Rank Pte.
4. Name Butler Jas. Kenneth.
5. Age last birthday 20
6. Enlisted { on 16th Nov 1914. / at Halifax.
7. Former Trade or Occupation { Bank Clerk.

8. Disability.

Weakness.
Defective respiration Suspicious
Pre- Tuberculosis stage.

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. Pre existing enlistment.

10. Place of origin of disability. Unknown.

11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.

Many years before he enlisted he felt weak, but did not cough In June 23/16 was sent to 2nd Western General Hospital Manchester for Influenza and Pleurisy the 31/7/16. He had few rales at Apex R. lungs. Coughed sputum blood tinged night sweat, Bact. Exam. of Sputum, Neg, report Sent to C.C.H Epsom 7/9/16. The 31/10/16 was sent to Moore Barracks Hosp Shorncliffe for obersavation, Bact exam of Sputum. Neg report Sent back to Woodcote Park Epsom the 16/11/16 discharged on the 11/1/17 and sent to C.C.A.C. for P.B. Boarded 12/1/17 and classified, C 3. He has lost weight.
No improvement.

12. (*a*) Give your opinion as to the causation of the disability. Pleurisy, Suspected Tuberculosis.

(*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*). Pre existing condition activated during active service.

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.

Poorly shaped Chest Looks miserable is pale, Lost weight, was weighing 170 lbs when he enlisted, Present weight 145 lbs. No T.B. in sputum, "Bact Exam, Report" He gets out of breath easily and is very wea slight cough more acute at night. There are no perceptible signs at present in lungs. No temperature pulse 90.

Circulatory System.		Normal
Nervous	-do-	-do-
Digestive	-do-	-do-
Lymphatic	-do-	-do-

14. If the disability is an injury, was caused

(*a*) In the presence of the enemy? Not applicable.

(*b*) On active service? -----

(*c*) On duty? -----

(*d*) Off duty? ----

15. Was a Court of Inquiry held on the injury?

Not applicable.

If so—(*a*) When? ---

(*b*) Where? ----

(*c*) Opinion? ---

16. Was an operation performed? If so, what? Not applicable.

17. If not, was an operation advised and declined? Not applicable.

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? Not applicable.

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.

H. Van Wyck Head Capt CAMC

Officer in medical charge of case.

I have satisfied myself of the general accuracy of this report, and concur therewith, *except*† that I would strongly recommend some mountain sanatorium Treatment in Canada

Station Hastings.

H. M. Simon Capt.

Officer in charge of Hospital.

Date 19th Feb, 1917

A/S.M.O. C.G.D.D.

* 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. 1. Yes. 2. Yes.

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

21. Has the disability been caused or aggravated by

(*a*) Intemperance? No

(*b*) Misconduct? No

(c) Neglect. No

22. Is the disability permanent? Not applicable.

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? Not applicable.

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? Yes

(*d*) Discharge as permanently unfit No

7

27. Remarks.

This man is pale, anaemic and debilitated and has cough. Is probably tuberculosis.

Signatures:—

(Sgd) W.A.McIntosh, Major. President.

" C.B.Peat. Major.

Station Hastings.

Date 2-3-17.

Members.

Approved.

Station Hastings Military Area

Date 8 MAR 1917

Administrative Medical Officer.

Captain, C.A.M.C.
In A.D.M.S., Canadians,
Hastings, Sussex

* N. B—This Form being applicable to any Board of Officers or Committee or Court of Inquiry, this blank to be filled in accordingly.

The signature of each Officer composing the Board, &c., should be attached to the end of the proceedings.

PROCEEDINGS of a * COURT OF INQUIRY

assembled at THE NOVA SCOTIA SANATORIUM. Kentville.N.S

on the 2nd day of November. 1918.

by order of

for the purpose of determining the time, place and cause of death of #67715. Pte J.K. Butler. 25th Battn.

PRESIDENT.

Capt. A.F. Miller. C.A.M.C.

MEMBERS.

C.E.A. de Witt. M.D.

Lt. T.M. Sieniewicz. C.A.M.C.

R.J. Collins. M.D.

The Court. having assembled pursuant to order, proceed to determine the time place and cause of death of #67715 Pte J.K.Butler, 25th Battalion.

This man was admitted to the Nova Scotia Sanatorium, Kentville.N.S. on July 5th.1917 for the treatment of Pulmonary Tuberculosis. Upon examination the physical findings of his chest showed a Moderately advanced case of Pulmonary Tuberculosis. Under Sanatorium treatment he was gradually improving until Mch.5th.18 when examination of chest revealed a spreading lesion. He began to run a fever at this time too. Each monthly examinatiom of chest, thereafter, shewed a rapidly spreading lesion. In June 1918 he developed a complication - Tuberculous Enteritis and Colitis. Chest examination on this man on Oct.3.1918 shewed a far advanced case of Pulmonary Tuberculosis, and Tuberculosis of the Intestines. On Aug.7th.1918 this man was permitted to go home for a month's home treatment, but at the expiration of such his general condition would not allow him to return and it was thought advisable that this man should remain at home. Finally, in spite of all treatment prescribed and carried out this man died at 3.15.a.m. on Oct.27th.18 at his home in Berwick, King's County, N.S. from Pulmonary and Intestinal Tuberculosis.

PRESIDENT.

MEMBERS.

M. F. B. 303.
150M.—7-16.
H. Q. 1772—39—133.

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
27/1/15	Vaccination J. Ross Lt. Col.
27/11/14	Anti-Typhoid Inoc. "
8/12/14	" "

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

I certify the foregoing to be a true copy of an original entry on a Medical History Sheet of this man.

C.A.M.C.
for the Officer in Charge of Records
Canadian Contingents.

MF

nocard
1917

67715

DUPLICATE.

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 BUTLER *Christian Name* James Kennedy

TABLE I.—GENERAL TABLE.

Birthplace ... Parish Berwick County Kings Co.

Examined ... ... on 19th day of November 1914, at Halifax

Declared Age ... ... 19 years days.

Trade or Occupation ... Bank Clerk

Height ... ... 6 feet inches.

Weight ... ... 160 lbs.

Chest Measurement — Girth when fully Expanded 37 inches.

Chest Measurement — Range of Expansion 4 inches.

Physical Development ... Good

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 ... ... (*b*) Scar back of left ear
Previous mastoiditis

Approved by (*Signature*) J. A. Sponagh
(*Rank*) Lt. Col. R.O.
Medical Officer.

Enlisted ... ... at Halifax
on 16th day of November 1914.

Joined on Enlistment ... / Transferred to ...	Corps.	Regtl. No.
	25th. Batt. C.O.E.F	67715

Became non-effective by ...

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

on day of 191 .

(*Signature*)
W.R.WARD (*Rank*)
~~Colonel in Charge of Records,~~
Canadian Contingents.

(48879) W.1934/1689. 6000. 8/18. C.&A., LTD.

Forms B. 178 39

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 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				

LIST OF DISCHARGE DOCUMENTS.

1. Proceedings on discharge. (Army Form B. 268.)
2. Proceedings on transfer to reserve (if any). (Army Form B. 2056.)
3. Duplicate attestation.
4. Army Form B. 97 (if any).
5. Declaration of change of name (if any).
6. Re-engagement paper (if any). Army Form B. 136).
7. Authority for continuance, or extension, of service (if any). Army Form B. 221.)
8. Court of Inquiry on an injury (if any) (Army Form A 2.)
9. Regimental conduct sheet. (Army Form B. 120).
10. Company conduct sheet. (Army Form B. 121.)
11. Copies of convictions by Civil Power (if any).
12. Medical history sheet. (Army Form B. 178)
13. Medical report on invalid (if any). (Army Form B. 179).
14. Copy of receipt for purchase money (if any).
15. Attestation of fraudulently enlisted man for corps in which he has not been held to serve (if any).
16. Detailed statement of former service allowed to reckon towards pension (if any).
17. Copy of 3rd page attestation (in the case of men from abroad entitled to deferred pay who go to Netley or the discharge depot for discharge).
18. Descriptive return (Army Form D. 400), where required. See section 11 on second page.
19. Active service casualty form. (Army Form B. 103).
20. Employment sheet. (Army Form B. 2066).

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

1. Duplicate attestation. (On third page the date and cause of discharge will be entered and signed by the competent military authority).
2. Medical history sheet (if any). (Army Form B. 178).

Instructions as to the preparation, dispatch, and custody, of discharge documents.

1. When a soldier is to be discharged, the documents retained with the duplicate attestation will be placed inside this form. Should any of the documents be missing, an explanation of the deficiency, signed by the commanding officer, must be substituted for the missing document. The officer in charge of records will then extract from the original attestation, any documents required to complete the list of discharge documents enumerated in the margin, which will then be placed in this form in the sequence given.

2. When men are discharged from the colours at home as medically unfit, or with claims to pension, Army Form B. 268 will be sent confirmed, together with the duplicate attestation and documents retained therein to the officer in charge of records 10 days in advance of the date for discharge in the case of invalids, and 14 days in other cases. This officer will then extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin, place them in this form, and after carefully checking the duplicate attestation with the original forward the whole to the Secretary, Royal Hospital, Chelsea. When such men are discharged abroad, the same procedure will be adopted as above, with the exception that the discharge documents will be sent to the officer in charge of records immediately after discharge takes place (except in the case of men who are granted gratuities on discharge from local battalions or companies, Royal Artillery,

3. When soldiers are sent home from abroad for discharge, the documents retained with the duplicate attestation will be placed inside this form and sent home with the men for transmission to the officer who carries out the discharge, together with the following additional forms :—

(a) Discharge certificate (Army Form B. 2079 or Army Form B. 264).
(b) Character Certificate (Army Form B. 2067) if entitled.
(c) Copy company conduct sheet (Army Form B. 121) when required under King's Regulations.

The duplicate attestation and documents retained therein will be sent to the officer in charge of records, who will extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin and place them in this form.

4. The discharge documents of re-enlisted pensioners, on re-discharge, will be sent to the officer in charge of records, who will extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin, place them inside this form, and forward the whole to the Secretary, Royal Hospital, Chelsea, irrespective of the cause of discharge.

5. The original and duplicate attestations of recruits who are rejected before, or on, final approval will be retained by the approving officer for one year, when they will be destroyed.

6. In all other cases the discharge documents will be sent, directly the discharge is carried out, to the officer in charge of records of the unit concerned.

7. Postage need not be paid, and receipts are not required, in the case of documents sent to Chelsea or to the War Office,

8. When the discharge documents of men not entitled to pension are sent to the officer who will have final charge of them, they are to be accompanied by Army Form B. 279, and that officer will, if they are found to be correct, sign and return Army Form B. 279. Should any document be missing, he must at once apply for it.

9. The officers having final charge of the discharge documents will arrange them according to regimental numbers, and enter the names in the alphabetical index, Army Book No. 129.

This space to be left blank for the Chelsea Number.

Army Form B. 268.

MILITARY MISSION C. A.
HALIFAX, N.S.
SEP 26 [illegible]
M. D 13. 6

Proceedings on Discharge.

(When forwarded for confirmation the documents named on page 4 should be enclosed.)

No. 67715 Army Rank Private

Name Butler, James Kenneth
(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)

Corps Nova Scotia Regiment

Battalion, Battery, Company, Depôt, &c. 25th Battalion 26th Res. Bn
(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)

Date of discharge

Place of discharge Canada

1. *Description at the time of discharge.*

Age years months
Height feet inches
Chest measurement { girth when fully expanded ins. / range of expansion ins.
Complexion
Eyes
Hair
Trade Bank Clerk
Intended place of residence (To be given as fully as practicable)

Descriptive marks.

(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)

2. The above-named man is discharged in consequence of Being no longer physically fit for war service Para 392 Sec 16. K. R. & O. 1912

(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)

To be filled in on the soldier quitting the Colours.

3. Military character :—

4. Character awarded in accordance with King's Regulations :—

Certified that the above is an accurate copy of the character given by me on Army Form B. 2067* and that Army Form D. 489 was awarded in this case.

Initials of Commanding Officer.

Army Form B. 2088 has been issued to*

D. D. & L., London, E.C. A4502 Wt. W17176/M281 500,000 8/16 Sch. 39 Forms B. 268 40

* Strike out if not applicable.

[OVER.

5. He is in possession of the following number of G.C. badges (if the man is a N.C.O. and enlisted prior to 1st July, 1881, the number he would have been entitled to had he not been promoted should be stated).

Is it probable that he will be entitled to another good conduct badge before the confirmation of these proceedings?

Classification for service, or proficiency pay... ... ... Class_____

6. Campaigns, Medals and Decorations

_____
_____
_____
_____
_____

Certificate of education .....

7. His accounts are correctly balanced, and I have impartially inquired into all matters brought before me in accordance with Regulations.

(Place)_____ _____

(Date)_____ *Commanding*_____*Battn.*_____*Regiment.*

8. *Certificate to be signed by the soldier on discharge.*

I hereby acknowledge that I have received all my pay and allowances (including clothing allowance), and all just demands up to the present date, subject to the reservations of the claims noted on the 3rd page.

(*Place*)_____ _____(*Signature of Soldier.*)

(*Date*)_____ _____(*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 at 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 towards engagement to_____(the date to which the record of service is completed)_____years_____days.

Further service „ „ _____(the date of confirmation of discharge) ... ..._____ „ _____ „

_____

Total ..._____ „ _____ „

11. *Confirmation of discharge.*

The discharge of the above-named man is hereby confirmed for (date)

(Place)_____

*Signature*_____

(Date)_____

Commanding officers (or the Paymaster if at Netley) will issue to every discharged soldier whose claim to pension, either on account of service or disability, is to be brought under the consideration of the Chelsea Board, a memorandum for his guidance on Army Form D. 401, and will at the same time transmit to the Secretary, Royal Hospital Chelsea, a descriptive return of the man on Army Form D. 400.

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.)

_____

AUDITOR | PAYMASTER

M. OR S.

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

REGT. No. 67715 RANK Pte NAME (IN FULL) Butler J. K (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN — RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? — DATE EFFECTIVE

TO WHOM PAID — RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F. 25 Bn. — IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

DATE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY $ — DATE EFFECTIVE

PAYABLE TO — RELATIONSHIP — ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS Estate Brench

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

DISCHARGED — PLACE Hfx. N.S — DATE 31-7-18 — REASON Fr. U. — AUTHORITY B. Units — IF ENTITLED TO POST DISCHARGE PAY

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.	OTHER CREDITS $	OTHER CREDITS C.			TOTAL CREDITS $	TOTAL CREDITS C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	COL. NO. 1 DATE	COL. NO. 2 NO.	COL. NO. 2 DATE	COL. NO. 3 NO.	COL. NO. 3 DATE	CASH PAYMENTS COL. NO. 1 $	COL. NO. 1 C.	COL. NO. 2 $	COL. NO. 2 C.	COL. NO. 3 $	COL. NO. 3 C.	ASSIGNED PAY $	ASSIGNED PAY C.	REGIMENTAL CHARGES $	REGIMENTAL CHARGES C.	OTHER CHARGES $	OTHER CHARGES C.			TOTAL DEBITS $	TOTAL DEBITS C.	BALANCE DEBIT $	BALANCE DEBIT C.	BALANCE CREDIT $	BALANCE CREDIT C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT																																					
1919 Dec					35	00	X		35	00																	35	00			35	00			35 00	clothing allce P.M. 6-B-1144 L.P.C. Ford Estate Branch 5/1/20

Certified that all payments on this account have been paid.
Capt. A.D.M.S.
For Senior Officer Base Services, M. D. 6

100M-1-19.—L. L. 83262-M & D. 9723.
M. F. W. 2596.
1772-38-1380.

MARRIED OR SINGLE S.

PLACE OF BIRTH Berwick, Kings Co. N.S.

NAME AND ADDRESS OF NEXT OF KIN Geo W Butler, Berwick Kings Co. N.S.

RELATIONSHIP OF NEXT OF KIN Mother

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

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

REG'L. No. 67715 RANK Pte NAME Butler, Jas Kenneth

IF IN PERMT. CORPS WHAT UNIT UNIT 25th Bn. TRANSFERRED TO C.C.A.C. DATE 1/7/16 AUTHORITY 30027 7/7/16

PERMANENT FORCE ALLOWANCES TRANSFERRED TO P. & R. Office DATE 25/1/17 AUTHORITY orders 12/1/17

PLACE OF ATTESTATION Halifax. N.S. TRANSFERRED TO C.G.D.D. Montreal DATE 16/2/17 AUTHORITY C.A.R.C. 4th D.O. 4/2

DATE OF ATTESTATION 16th Nov 1914. TRANSFERRED TO L.P.C. DATE 20/3/17. AUTHORITY S.A. 2 20/3

to N.S. 21/3/17

ASSIGNED PAY MONTHLY $ ~~30.00~~ DATE EFFECTIVE 21/3/17

PAYABLE TO George W Butler. Berwick Kings Co N.S. RELATIONSHIP

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) 20/3/17 Effective 1/4/17 REASON Discharge to Canada

DISCHARGE DATE AND PLACE Canada 20/3/17 REASON AND AUTHORITY 8 A/2 20/3/17 H.Q. Invalided to Canada. Cleveland

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE) 21/3/17

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

OV

NAVY OFFICERS' CHARGES AUG 28 1917 CANADIAN GOVERNMENT
Entered on Nominal Card Index
Checked by

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	C ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE Credit	BALANCE Debit	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
			305				3050							47	335 97									7223				200 200		2X223	63 44				
April	30	1	30		30	10	3								33													20		20	46 44				
May	31	1	31		31	10	3	10							34 10	10159	9/5/16			F23 383	3/4/16			✓ 5 11		✓ 58 40		20		83 51	27 33				
June	30	1	30		30	10	3								33						22. 27/6					✓ 5 11		20		25 11	35 22				
1/7 31/7	31	1	31		31	10	3	10							34 10									5 11		63 51		60 20		20	4932				
8 31/8/16	31	1	31		31	10	3	10							34 10													20		20	63 42				
1/9 30/9	30	1	30		30	10	3								33											✓ 4 87 ✓ 4 87 ✓ 2 56		20		3229	64 13				
1/10 31/10	31		31		31		3	10							34 10											✓ 4 87 ✓ 4 87 ✓ 4 22		20		2974	68 49				
Nov 1—30	30		30		30		3								33											✓ 4 87 ✓ 48		20 360		2657	7492				
Dec 1—31	31		31 58		31		3 40								34 10											✓ 2 44 ✓ 4 87		20		2731	8171				
Jan 1—30	31		34 10												34 10	34	20/1/17							✓ 9 74 ✓ 5 11 0 ✓ 7 7 33	✓ 2 43 ✓ 2 44		✓ 14 60	20	770	5691	5890		1/2 Lac 1/6	5890	7 90 7 days P&R Bred w Leave Jan/17 2nd " P & R Office 25/1/17 Gd. C.G.D.D. Montreal 16/2/17 Sailed per A.O. 4/2 Arr Loc. 8½ 25/3/17.
Feb 15	22	1.20	37 40						22 1.00		22 -				59 40													20 -		95 43	7787				
March 1917	19	1.10	20 90											14 30	20 90															3 4807				
			730 40							22 -				14 77	767 17									162 51	4 87	99 42	14 60	440	2 70	729 10					

Checked W.H.Ward

Checked J.D.Reid

Nova Scotia Reg. Depot, Bramshott, Ref A.G. 03 D.P.S. 2-1-48. Sailing per Hospital Ship. "Essequibo" 22-3-17.

Over

Small Ledger Sheet.

67715 Pte Butler J. A.

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
Mar			730	40							22	—		14 77	767	17					69	20/1/17	162	51	4	87	99	42	14	60	440 —	7	70	729	10	38	07				
	1	1 2/3	1	10											1	10					1 Hdqrs	17/3/17					2 56							4	99	34	18			Extracted from A.P.B.
															768	27					353						243 X							734	09	34	18		Transd to "Canada Disc'ge a/c"	
																										Balance transferred to N. E. Branch											
Aug 1917.																												34	18	34	18		Nil.		

A3M. FORM REN'D 20/3/17. EFFEC 1/4/17
DISCHARGED TO Canada DATE .....
PAYBOOK VERIFIED 20/3/17
Cr BAL. 34 18 L.P.C. REN'D 20/3/17
AUTHY. S/a/2 20/3/17

Checked Lieut LPO

Invalided to Canada
Hfx L.S.B. 1418/17 21/3/17